



**Navy Health Ltd**  
Healthy Living Extras  
**Restricted Insurer**

**\$77.77 / month**

(Before Rebate, Discount &amp; Loading)

Available in WA

You may be entitled to an Australian Government Rebate on the above premium. Your premium may also include an insurer discount. Check with your insurer for details.

**This policy covers:** Dependents only (2 or more people, none of whom is an adult).

Children (0 - 17), non-classified\* dependant (18 - 21) and students (22 - 31), as well as persons with a disability who qualify as a child, non-classified\* dependant and student in these age ranges.

\*Non-classified dependant: A non classified dependant is defined by Navy Health as a child, legally adopted child or step-child who is unmarried and who is younger than 21 years of age.

**Restricted insurer:** Membership of this insurer is restricted to Cover for the ADF community - serving, ex-serving ADF, employees of contractors to ADF and families.

This health insurer does not operate a preferred provider scheme.

**Policy ID: NHB/I20/WFFQ0D**

**Source:** [Private Health Information Statement \(PHIS\)](#)

## Extras Cover

**This policy includes** General treatment (Extras) cover for

Treatment & waiting period (months)	Benefit limits per 12 months unless otherwise stated	Examples of maximum benefits
✓ Acupuncture 2	<b>\$320 per person up to \$640 per policy</b> combined limit for acupuncture, chinese medicine, exercise physiology & remedial massage	<ul style="list-style-type: none"> <li>Initial visit: \$32</li> <li>Subsequent visit: \$32</li> </ul>
✓ Audiology 2	<b>\$300 per person</b>	<ul style="list-style-type: none"> <li>Initial visit: \$60</li> <li>Subsequent visit: \$40</li> </ul>
✓ Blood glucose monitors 6	<b>\$400 per person</b>	<ul style="list-style-type: none"> <li>Per monitor: 85% of charge</li> </ul>
✓ Chinese medicine 2	<b>\$320 per person up to \$640 per policy</b> combined limit for acupuncture, chinese medicine, exercise physiology & remedial massage	<ul style="list-style-type: none"> <li>Initial visit: \$32</li> <li>Subsequent visit: \$32</li> </ul>
✓ Chiropractic 2	<b>\$550 per person up to \$1,100 per policy</b> combined limit for chiropractic, osteopathy & other services	<ul style="list-style-type: none"> <li>Initial visit: \$48</li> <li>Subsequent visit: \$35</li> </ul>
✓ Dietetics/dietary advice 2	<b>\$300 per person</b>	<ul style="list-style-type: none"> <li>Initial visit: \$60</li> <li>Subsequent visit: \$40</li> </ul>
✓ Endodontic 12	<b>\$1,500 per person</b> combined limit for endodontic, major dental & other services sub-limits apply	<ul style="list-style-type: none"> <li>Filling of one root canal: \$129</li> </ul>

<b>✓ Exercise physiology</b>	2	<b>\$320 per person up to \$640 per policy</b> combined limit for acupuncture, chinese medicine, exercise physiology & remedial massage	<ul style="list-style-type: none"> <li>Initial visit: \$32</li> <li>Subsequent visit: \$32</li> </ul>
<b>✓ Eye therapy (orthoptics)</b>	2	<b>\$300 per person</b>	<ul style="list-style-type: none"> <li>Initial visit: \$60</li> <li>Subsequent visit: \$35</li> </ul>
<b>✓ General dental</b>	2	<b>No annual limit</b>	<ul style="list-style-type: none"> <li>Fluoride treatment: \$21</li> <li>Scale &amp; clean: \$68</li> <li>Periodic oral examination: \$42</li> </ul>
<b>✓ Hearing aids</b>	12	<b>\$900 per person</b>	<ul style="list-style-type: none"> <li>Hearing aid: 100% of charge</li> </ul>
<b>✓ Home nursing</b>	2	<b>\$1,000 per person</b>	<ul style="list-style-type: none"> <li>Initial visit: \$60</li> <li>Subsequent visit: \$60</li> </ul>
<b>✓ Major dental</b>	12	<b>\$1,500 per person</b> combined limit for endodontic, major dental & other services sub-limits apply	<ul style="list-style-type: none"> <li>Surgical tooth extraction: \$135</li> <li>Full crown veneered: \$619</li> </ul>
<b>✓ Non PBS pharmaceuticals</b>	2	<b>\$500 per person</b> combined limit for non pbs pharmaceuticals & vaccinations	<ul style="list-style-type: none"> <li>Per eligible prescription: \$120</li> </ul>
<b>✓ Occupational therapy</b>	2	<b>\$400 per person</b>	<ul style="list-style-type: none"> <li>Initial visit: \$45</li> <li>Subsequent visit: \$33</li> </ul>
<b>✓ Optical</b>	6	<b>\$260 per person</b>	<ul style="list-style-type: none"> <li>Multi-focal lenses &amp; frames: 100% of charge</li> <li>Single vision lenses &amp; frames: 100% of charge</li> </ul>
<b>✓ Orthodontic</b>	12	<b>\$2,000 per person</b>	<ul style="list-style-type: none"> <li>Braces for upper &amp; lower teeth, including removal plus fitting of retainer: 70% of charge</li> </ul>
<b>✓ Orthotics (podiatric orthoses)</b>	2	<b>\$200 per person</b>	<ul style="list-style-type: none"> <li>Orthotics supply &amp; fit: 85% of charge</li> </ul>
<b>✓ Osteopathy</b>	2	<b>\$550 per person up to \$1,100 per policy</b> combined limit for chiropractic, osteopathy & other services	<ul style="list-style-type: none"> <li>Initial visit: \$48</li> <li>Subsequent visit: \$35</li> </ul>
<b>✓ Physiotherapy</b>	2	<b>\$600 per person</b>	<ul style="list-style-type: none"> <li>Initial visit: \$55</li> <li>Subsequent visit: \$42</li> </ul>
<b>✓ Podiatry</b>	2	<b>\$300 per person</b>	<ul style="list-style-type: none"> <li>Initial visit: \$45</li> <li>Subsequent visit: \$35</li> </ul>
<b>✓ Psychology</b>	2	<b>\$400 per person</b>	<ul style="list-style-type: none"> <li>Initial visit: \$90</li> <li>Subsequent visit: \$70</li> </ul>
<b>✓ Remedial massage</b>	2	<b>\$320 per person up to \$640 per policy</b> combined limit for acupuncture, chinese medicine, exercise physiology & remedial massage	<ul style="list-style-type: none"> <li>Initial visit: \$32</li> <li>Subsequent visit: \$32</li> </ul>
<b>✓ Speech therapy</b>	2	<b>\$300 per person</b>	<ul style="list-style-type: none"> <li>Initial visit: \$90</li> <li>Subsequent visit: \$40</li> </ul>
<b>✓ Vaccinations</b>	2	<b>\$500 per person</b> combined limit for non pbs pharmaceuticals & vaccinations	<ul style="list-style-type: none"> <li>Per service: \$120</li> </ul>

Other treatments covered include: Laser Eye Surgery (\$1,200 per person per benefit year), Medically Prescribed Appliances (includes Blood Glucose Monitors) (\$400 per person per benefit year) and CPAP Devices (\$600 per benefit year). Members can access special offers from any of Navy Health's preferred optical providers: OPSM, Laubman & Pank, Specsavers, Teachers Eye Care, Eyebenefit and Q Optical Network (QON). General treatment benefit year runs from 1 July to 30 June.

**This policy does not include General treatment (Extras) cover for**

<b>✗</b> Ante-natal/Post-natal classes	<b>✗</b> Health management / Healthy lifestyle
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**Other features of this general treatment cover:** Telehealth services available for Physiotherapy, Psychology, Dietetics and Speech Therapy.

**For further information about this policy see:** <https://navyhealth.com.au/healthy-living-extras-cover>

## Ambulance cover

In WA this policy provides:

Emergency: Unlimited with a waiting period of 2 months.

Non-emergency: Unlimited transport with a waiting period of 2 months, or 2 months for pre-existing conditions.

Call-out fees: Will be paid for each attendance, including emergency treatment without transport to hospital.

**Other features of this ambulance cover:** We cover 100% of the cost of ambulance services within Australia, provided it is provided by a state based run Ambulance service, by either air/sea or land. We do not provide benefits for privately run patient transport services.

**For further information about this policy see:** <https://navyhealth.com.au/healthy-living-extras-cover>

## Insurer Details



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Healthy Living Extras

Restricted Insurer

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Call now 1300 306 289  
Sponsor link

**Navy Health Ltd**

⊕ <https://navyhealth.com.au/why-navy-health/>

✉ [query@navyhealth.com.au](mailto:query@navyhealth.com.au)

📞 1300 306 289

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Private Health Information Statement is available from the Private Health Insurance Ombudsman website at

<https://privatehealth.gov.au/dynamic/Premium/PHIS/NHB/I20/WFFQ0D>