



Teachers Health

Mid Extras

Restricted Insurer

**\$52.03 / month**

(Before Rebate, Discount &amp; Loading)

Available in NT

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:** Only one person.

**Restricted insurer:** Membership of this insurer is restricted to education union members and their families

We've partnered with a network of optical and dental providers Australia-wide to give members greater access to high quality treatment and exclusive discounts, including 'no gap' offers. See <https://www.teachershealth.com.au/members/find-a-provider/member-wellbeing-network/>.

**Policy ID: NTF/I2/DBPR10**

**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>\$400 per policy</b><br>combined limit for acupuncture, chinese medicine, remedial massage & other services | <ul style="list-style-type: none"> <li>Initial visit: \$38</li> <li>Subsequent visit: \$38</li> </ul>  |
| ✓ Chinese medicine                      | 2 <b>\$400 per policy</b><br>combined limit for acupuncture, chinese medicine, remedial massage & other services | <ul style="list-style-type: none"> <li>Initial visit: \$38</li> <li>Subsequent visit: \$38</li> </ul>  |
| ✓ Chiropractic*                         | 2 <b>\$250 per policy</b><br>combined limit for chiropractic & osteopathy<br>sub-limits apply                    | <ul style="list-style-type: none"> <li>Initial visit: \$40</li> <li>Subsequent visit: \$40</li> </ul>  |
| ✓ Endodontic                            | 12 <b>\$300 per policy</b><br>combined limit for endodontic, major dental & orthodontic                          | <ul style="list-style-type: none"> <li>Filling of one root canal: \$160</li> </ul>   |
| ✓ Exercise physiology                   | 2 <b>\$300 per policy</b><br>combined limit for exercise physiology & physiotherapy<br>sub-limits apply          | <ul style="list-style-type: none"> <li>Initial visit: \$40</li> <li>Subsequent visit: \$40</li> </ul>  |
| ✓ General dental                        | 2 <b>\$500 per policy</b><br>sub-limits apply  | <ul style="list-style-type: none"> <li>Fluoride treatment: \$27</li> <li>Scale &amp; clean: \$70</li> <li>Periodic oral examination: \$40</li> </ul> |
| ✓ Health management / Healthy lifestyle | 6 <b>\$200 per policy</b><br>sub-limits apply  | <ul style="list-style-type: none"> <li>Health management: \$200</li> </ul>   |

|                                  |    |  |  |
|----------------------------------|----|--|--|
| <b>✓ Major dental</b>            | 12 | <b>\$300 per policy</b><br>combined limit for endodontic, major dental & orthodontic                           | <ul style="list-style-type: none"> <li>Surgical tooth extraction: \$135</li> <li>Full crown veneered: \$300</li> </ul>                     |
| <b>✓ Non PBS pharmaceuticals</b> | 2  | <b>\$300 per policy</b><br>combined limit for non pbs pharmaceuticals & vaccinations                           | <ul style="list-style-type: none"> <li>Per eligible prescription: \$60</li> </ul>  |
| <b>✓ Optical</b>                 | 6  | <b>\$200 per policy</b>  | <ul style="list-style-type: none"> <li>Multi-focal lenses &amp; frames: \$200</li> <li>Single vision lenses &amp; frames: \$200</li> </ul> |
| <b>✓ Orthodontic</b>             | 12 | <b>\$300 per policy</b><br>\$2,500 lifetime limit<br>combined limit for endodontic, major dental & orthodontic | <ul style="list-style-type: none"> <li>Braces for upper &amp; lower teeth, including removal plus fitting of retainer: \$300</li> </ul>    |
| <b>✓ Osteopathy*</b>             | 2  | <b>\$250 per policy</b><br>combined limit for chiropractic & osteopathy<br>sub-limits apply                    | <ul style="list-style-type: none"> <li>Initial visit: \$40</li> <li>Subsequent visit: \$40</li> </ul>                                      |
| <b>✓ Physiotherapy*</b>          | 2  | <b>\$300 per policy</b><br>combined limit for exercise physiology & physiotherapy<br>sub-limits apply          | <ul style="list-style-type: none"> <li>Initial visit: \$40</li> <li>Subsequent visit: \$40</li> </ul>                                      |
| <b>✓ Podiatry*</b>               | 2  | <b>\$300 per policy</b>  | <ul style="list-style-type: none"> <li>Initial visit: \$40</li> <li>Subsequent visit: \$40</li> </ul>                                      |
| <b>✓ Psychology</b>              | 2  | <b>\$350 per policy</b>  | <ul style="list-style-type: none"> <li>Initial visit: \$72</li> <li>Subsequent visit: \$72</li> </ul>                                      |
| <b>✓ Remedial massage</b>        | 2  | <b>\$400 per policy</b><br>combined limit for acupuncture, chinese medicine, remedial massage & other services | <ul style="list-style-type: none"> <li>Initial visit: \$38</li> <li>Subsequent visit: \$38</li> </ul>                                      |
| <b>✓ Vaccinations</b>            | 2  | <b>\$300 per policy</b><br>combined limit for non pbs pharmaceuticals & vaccinations                           | <ul style="list-style-type: none"> <li>Per service: \$60</li> </ul>  |

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

|  |                                   |   |
|--|-----------------------------------|---|
| <b>✗</b> Ante-natal/Post-natal classes | <b>✗</b> Eye therapy (orthoptics) | <b>✗</b> Orthotics (podiatric orthoses) |
| <b>✗</b> Audiology                     | <b>✗</b> Hearing aids             | <b>✗</b> Speech therapy                 |
| <b>✗</b> Blood glucose monitors        | <b>✗</b> Home nursing             |   |
| <b>✗</b> Dietetics/dietary advice      | <b>✗</b> Occupational therapy     |   |

## Ambulance cover

In NT this policy provides:

Emergency: With a waiting period of 1 day, limited to \$6,000 per person per year.

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

**For further information about this policy see:** <https://www.teachershealth.com.au/health-insurance/our-products/emergency-ambulance/>

## Insurer Details

**Teachers Health**

Mid Extras

**Restricted Insurer****\$52.03 / month**

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Available in NT

**Call now 1300 728 188**  
Sponsor link**Teachers Health** <http://www.teachershealth.com.au> [info@teachershealth.com.au](mailto:info@teachershealth.com.au)

1300 728 188

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