



TUH, part of the Teachers Health Group
Family Extras

Restricted Insurer

\$102.87 / month
 (Before Rebate, Discount & Loading)
 Available in QLD

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 current or former union members and their families.

No-gap or agreed discounts at preferred optical, dental, podiatry and physiotherapy providers. See <https://tuh.com.au/information/using-your-extras/find-provider>.

Policy ID: QTU/FAM/QDWU10

Source: Private Health Information Statement (PHIS)

Extras Cover

This policy includes General treatment (Extras) cover for

Note, for treatments marked with * : *Major Dental limit includes Crowns/Bridges \$650 sub-limit, Implants \$450 sub-limit, Dentures \$600 sub-limit, Endodontia \$450 sub-limit, Periodontia \$450 sub-limit, Inlays Onlays and Facings \$450 sub-limit, Anti-snore device \$500 sub-limit and Orthodontics \$850 annual sub-limit (maximum lifetime benefit \$2,550). *Optical set benefits apply for frames/lenses/repairs, 100% up to annual limit for contacts. *Physiotherapy limit includes Exercise Physiology and Group Physiotherapy \$250 sub-limit, and Ante/post-natal physiotherapy. *Podiatry limit includes Orthotics (customised and moulded \$200 sub-limit) (repairs \$100 sub-limit). *Acupuncture limit includes \$400 sub-limit Massage/Myotherapy. *Home nursing benefits apply per day.

Treatment & waiting period (months)		Benefit limits per 12 months unless otherwise stated	Examples of maximum benefits
✓ Acupuncture	2	\$600 per policy combined limit for acupuncture, chinese medicine, osteopathy, remedial massage & other services	- Initial visit: \$50 - Subsequent visit: \$40
✓ Ante-natal/Post-natal classes*	2	\$240 per policy combined limit for ante-natal/post-natal classes, health management / healthy lifestyle & other services sub-limits apply	- Initial visit: 80% of charge - Subsequent visit: 80% of charge
✓ Audiology	2	\$200 per policy	- Initial visit: \$75 - Subsequent visit: \$70
✓ Blood glucose monitors*	12	\$600 per policy sub-limits apply	Per monitor: 85% of charge
✓ Chinese medicine	2	\$600 per policy combined limit for acupuncture, chinese medicine, osteopathy, remedial massage & other services	- Initial visit: \$50 - Subsequent visit: \$40
✓ Chiropractic	2	\$400 per policy	- Initial visit: \$52 - Subsequent visit: \$42

✓ Dietetics/dietary advice	2	\$300 per policy	- Initial visit: \$60 - Subsequent visit: \$42
✓ Endodontic	12	\$2,000 per policy combined limit for endodontic, major dental, orthodontic & other services sub-limits apply	Filling of one root canal: \$161
✓ Exercise physiology	2	\$700 per policy combined limit for exercise physiology, physiotherapy & other services sub-limits apply	- Initial visit: \$30 - Subsequent visit: \$30
✓ Eye therapy (orthoptics)	2	\$200 per policy	- Initial visit: \$42 - Subsequent visit: \$42
✓ General dental	2	No annual limit	- Fluoride treatment: \$30.45 - Scale & clean: \$67.2 - Surgical tooth extraction: \$125 - Periodic oral examination: \$35.7
✓ Health management / Healthy lifestyle*	2	\$240 per policy combined limit for ante-natal/post-natal classes, health management / healthy lifestyle & other services sub-limits apply	Health management: 80% of charge
✓ Hearing aids	12	\$1500 limit overall \$750 per ear \$550 sub-limit on repairs. Limits apply over 3-year period from first supply.	Hearing aid: \$750
✓ Home nursing*	2	\$500 per policy	- Initial visit: \$80 - Subsequent visit: \$80
✓ Major dental*	12	\$2,000 per policy combined limit for endodontic, major dental, orthodontic & other services sub-limits apply	Full crown veneered: \$650
✓ Non PBS pharmaceuticals	2	\$500 per policy	Per eligible prescription: \$70
✓ Occupational therapy	2	\$300 per policy	- Initial visit: \$52 - Subsequent visit: \$37
✓ Optical*	6	\$260 per policy	- Multi-focal lenses & frames: 100% of charge - Single vision lenses & frames: 100% of charge
✓ Orthodontic*	12	\$2,000 per policy combined limit for endodontic, major dental, orthodontic & other services sub-limits apply	Braces for upper & lower teeth, including removal plus fitting of retainer: \$850
✓ Orthotics (podiatric orthoses)	12	\$300 per policy combined limit for orthotics (podiatric orthoses), podiatry & other services sub-limits apply	Orthotics supply & fit: 80% of charge
✓ Osteopathy	2	\$600 per policy combined limit for acupuncture, chinese medicine, osteopathy, remedial massage & other services	- Initial visit: \$52 - Subsequent visit: \$42

✓ Physiotherapy*	2	\$700 per policy combined limit for exercise physiology, physiotherapy & other services	- Initial visit: \$62 - Subsequent visit: \$52
✓ Podiatry*	2	\$300 per policy combined limit for orthotics (podiatric orthoses), podiatry & other services	- Initial visit: \$40 - Subsequent visit: \$35
✓ Psychology	2	\$400 per policy	- Initial visit: \$80 - Subsequent visit: \$70
✓ Remedial massage*	2	\$600 per policy combined limit for acupuncture, chinese medicine, osteopathy, remedial massage & other services sub-limits apply	- Initial visit: \$40 - Subsequent visit: \$40
✓ Speech therapy	2	\$400 per policy	- Initial visit: \$102 - Subsequent visit: \$55

Other services: Anti snore device \$500 sub-limit included in Major Dental overall limit. Group Physiotherapy \$20 per consult up to \$250 sub-limit. Ante/post natal Physiotherapy \$17 per consult. Chiropractic x-ray (one per year) \$70 included in Chiropractic limit. Group Psychology \$35 per consult, Psychometric assessments \$116 and Counselling \$38 initial per initial consult, \$32 per subsequent consult, included in \$400 Psychology limit. Osteopathic x-ray (one per year) \$63 included in Osteopathy limit. Myotherapy \$40 per consult included in Remedial Massage sub-limit. Podiatric Surgery 85% and Biogait Analysis (one per year) \$35, included within the \$300 Podiatry limit. Orthotic Repairs 85% up to \$100 sub-limit. Group Speech Therapy \$40 per consult and Paediatric Assessment (one per year) \$150 included in Speech Therapy limit. Group Occupational Therapy \$17.50 per consult and Paediatric Assessment (one per year) \$60 included in Occupational Therapy limit. Health Management overall limit includes \$120 sub-limits on Health Screenings, Health Management Programs and Healthy Lifestyle Programs. *Blood Glucose Monitors \$400 sub-limit included in Health Devices/Appliances overall \$600 limit. All services in Health Devices/Appliances limit payable at 85% of cost including \$600 sub-limit on CPAP etc machines, \$100 sub-limit on accessories/repair, \$300 limit on compression garments, and \$500 sub-limit for Non-surgically implanted prostheses e.g. breast prostheses and wigs. Blood Glucose Monitors \$400 sub-limit includes \$200 sub-limit for other appliances and \$120 sub-limit for Health Aids. Lactation nursing \$50 daily included in \$500 Home Nursing limit. Travel and Accommodation \$45 per night and up to \$100 travel up to \$100 limit (conditions apply). Active Health Bonus \$40/person \$80/membership (conditions apply).

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

✗ Vaccinations

Other features of this general treatment cover: Online and mobile access, claims via smart phone app. Extended dependant option only available with selected hospital products, contact us for further details.

For further information about this policy see: <https://tuh.com.au/extras/family-extras>

Ambulance cover

Ambulance cover is provided by the State government for Queensland residents (<https://www.ambulance.qld.gov.au>). This includes cover whilst interstate.

Other features of this ambulance cover: All permanent Queensland residents are covered under the State scheme delivered by Queensland Ambulance Service (QAS), including interstate travel, therefore no additional benefit is payable. Benefits may be payable for state-owned air ambulance services where charges are not payable by QAS (\$6,000 per person per annum limit applies).

For further information about this policy see: <https://tuh.com.au/information/glossary/ambulance>

Insurer Details



TUH, part of the Teachers Health Group

Family Extras

Restricted Insurer

\$102.87 / month

(Before Rebate, Discount & Loading)

Available in QLD

Call now  **1300 360 701**
Sponsor link

TUH, part of the Teachers Health Group

 <https://tuh.com.au/>

 enquiries@tuh.com.au

 **1300 360 701**

Disclaimer: This document is not a Private Health Information Statement (PHIS), and it is not intended to replace that document. The details contained in the **healthslips.com.au Policy Information** was provided by the insurer to the Australian Government. It is intended as general information. It may not take into account your circumstances. For further information contact the insurer. Information used is Licensed from the Commonwealth of Australia under a Creative Commons 3.0 licence.

Private Health Information Statement is available from the Private Health Insurance Ombudsman website at <https://privatehealth.gov.au/dynamic/Premium/PHIS/QTU/FAM/QDWU10>