



TUH, part of the Teachers Health Group

Family Extras

Restricted Insurer

**\$101.01 / month**

(Before Rebate, Discount &amp; Loading)

Available in VIC

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/VDXM10

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 <b>\$600 per policy</b> combined limit for acupuncture, chinese medicine, osteopathy, remedial massage & other services	<ul style="list-style-type: none"> <li>Initial visit: \$50</li> <li>Subsequent visit: \$40</li> </ul>
✓ Ante-natal/Post-natal classes*	2 <b>\$240 per policy</b> combined limit for ante-natal/post-natal classes, health management / healthy lifestyle & other services sub-limits apply	<ul style="list-style-type: none"> <li>Initial visit: 80% of charge</li> <li>Subsequent visit: 80% of charge</li> </ul>
✓ Audiology	2 <b>\$200 per policy</b>	<ul style="list-style-type: none"> <li>Initial visit: \$75</li> <li>Subsequent visit: \$70</li> </ul>
✓ Blood glucose monitors*	12 <b>\$600 per policy</b> sub-limits apply	<ul style="list-style-type: none"> <li>Per monitor: 85% of charge</li> </ul>
✓ Chinese medicine	2 <b>\$600 per policy</b> combined limit for acupuncture, chinese medicine, osteopathy, remedial massage & other services	<ul style="list-style-type: none"> <li>Initial visit: \$50</li> <li>Subsequent visit: \$40</li> </ul>
✓ Chiropractic	2 <b>\$400 per policy</b>	<ul style="list-style-type: none"> <li>Initial visit: \$52</li> <li>Subsequent visit: \$42</li> </ul>

✓ Dietetics/dietary advice	2	<b>\$300 per policy</b>	<ul style="list-style-type: none"> <li>Initial visit: \$60</li> <li>Subsequent visit: \$42</li> </ul>
✓ Endodontic	12	<b>\$2,000 per policy</b> combined limit for endodontic, major dental, orthodontic & other services sub-limits apply	<ul style="list-style-type: none"> <li>Filling of one root canal: \$161</li> </ul>
✓ Exercise physiology	2	<b>\$700 per policy</b> combined limit for exercise physiology, physiotherapy & other services sub-limits apply	<ul style="list-style-type: none"> <li>Initial visit: \$30</li> <li>Subsequent visit: \$30</li> </ul>
✓ Eye therapy (orthoptics)	2	<b>\$200 per policy</b>	<ul style="list-style-type: none"> <li>Initial visit: \$42</li> <li>Subsequent visit: \$42</li> </ul>
✓ General dental	2	<b>No annual limit</b>	<ul style="list-style-type: none"> <li>Fluoride treatment: \$30.45</li> <li>Scale &amp; clean: \$67.2</li> <li>Surgical tooth extraction: \$125</li> <li>Periodic oral examination: \$35.7</li> </ul>
✓ Health management / Healthy lifestyle*	2	<b>\$240 per policy</b> combined limit for ante-natal/post-natal classes, health management / healthy lifestyle & other services sub-limits apply	<ul style="list-style-type: none"> <li>Health management: 80% of charge</li> </ul>
✓ Hearing aids	12	<b>\$1500 limit overall \$750 per ear \$550 sub-limit on repairs. Limits apply over 3-year period from first supply.</b>	<ul style="list-style-type: none"> <li>Hearing aid: \$750</li> </ul>
✓ Home nursing*	2	<b>\$500 per policy</b>	<ul style="list-style-type: none"> <li>Initial visit: \$80</li> <li>Subsequent visit: \$80</li> </ul>
✓ Major dental*	12	<b>\$2,000 per policy</b> combined limit for endodontic, major dental, orthodontic & other services sub-limits apply	<ul style="list-style-type: none"> <li>Full crown veneered: \$650</li> </ul>
✓ Non PBS pharmaceuticals	2	<b>\$500 per policy</b>	<ul style="list-style-type: none"> <li>Per eligible prescription: \$70</li> </ul>
✓ Occupational therapy	2	<b>\$300 per policy</b>	<ul style="list-style-type: none"> <li>Initial visit: \$52</li> <li>Subsequent visit: \$37</li> </ul>
✓ Optical*	6	<b>\$260 per policy</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>
✓ Orthodontic*	12	<b>\$2,000 per policy</b> combined limit for endodontic, major dental, orthodontic & other services sub-limits apply	<ul style="list-style-type: none"> <li>Braces for upper &amp; lower teeth, including removal plus fitting of retainer: \$850</li> </ul>
✓ Orthotics (podiatric orthoses)	12	<b>\$300 per policy</b> combined limit for orthotics (podiatric orthoses), podiatry & other services sub-limits apply	<ul style="list-style-type: none"> <li>Orthotics supply &amp; fit: 80% of charge</li> </ul>

<b>✓ Osteopathy</b>	2	<b>\$600 per policy</b> combined limit for acupuncture, chinese medicine, osteopathy, remedial massage & other services	<ul style="list-style-type: none"> <li>Initial visit: \$52</li> <li>Subsequent visit: \$42</li> </ul>
<b>✓ Physiotherapy*</b>	2	<b>\$700 per policy</b> combined limit for exercise physiology, physiotherapy & other services	<ul style="list-style-type: none"> <li>Initial visit: \$62</li> <li>Subsequent visit: \$52</li> </ul>
<b>✓ Podiatry*</b>	2	<b>\$300 per policy</b> combined limit for orthotics (podiatric orthoses), podiatry & other services	<ul style="list-style-type: none"> <li>Initial visit: \$40</li> <li>Subsequent visit: \$35</li> </ul>
<b>✓ Psychology</b>	2	<b>\$400 per policy</b>	<ul style="list-style-type: none"> <li>Initial visit: \$80</li> <li>Subsequent visit: \$70</li> </ul>
<b>✓ Remedial massage*</b>	2	<b>\$600 per policy</b> combined limit for acupuncture, chinese medicine, osteopathy, remedial massage & other services sub-limits apply	<ul style="list-style-type: none"> <li>Initial visit: \$40</li> <li>Subsequent visit: \$40</li> </ul>
<b>✓ Speech therapy</b>	2	<b>\$400 per policy</b>	<ul style="list-style-type: none"> <li>Initial visit: \$102</li> <li>Subsequent visit: \$55</li> </ul>

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

In VIC this policy provides:

Emergency: Unlimited with a waiting period of 1 day.

Non-emergency: Unlimited transport with a waiting period of 1 day, or 1 day 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:** Members who have COMBINED HOSPITAL AND EXTRAS COVER are entitled to emergency ambulance services benefits. No annual limit will apply to emergency road ambulance services. State-owned air ambulance transportation services are covered up to \$6,000 per person per annum. From 1 Jan 2022 members who have eligible stand-alone extras cover may claim the cost of a third-party ambulance subscription fee from the Health Program benefit category (sub-limits apply).

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****\$101.01 / month**

(Before Rebate, Discount &amp; Loading)

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**Call now** **1300 360 701**  
Sponsor link**TUH, part of the Teachers Health Group** <https://tuh.com.au/> [enquiries@tuh.com.au](mailto:enquiries@tuh.com.au) [1300 360 701](tel:1300360701)

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