

**Health Partners****Top Extras with Natural Therapies****\$294.10 / month**

(Before Rebate, Discount &amp; Loading)

Available in All States

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:** Two adults & dependants, including non-student dependants (3 or more people, only 2 of whom are adults).

Children (0 - 17), non-classified\* dependant (18 - 20), students (21 - 31) and non-students (21 to 31), as well as persons with a disability who qualify as a child, non-classified\* dependant, student and non-student in these age ranges.

\*Non-classified dependant: Non-classified dependant means a person who is aged between 18 and 20 (inclusive), is not married or living in a de facto relationship, and is a child of the policyholder or child of the policyholder's partner.

References to Child Dependant include Non-Classified Dependant.

At our providers: 85% dental benefit, major dental \$1500 limit, 70% optical benefit, \$350 limit for prescription glasses, \$210 for contacts. Only Pay \$18 for eligible Physio consults, \$1000 limit. T&Cs apply. See <https://www.healthpartners.com.au/members/providers/>.

**Policy ID: SPS/I1N/AFJD2Y****Source: Private Health Information Statement (PHIS)**

## Extras Cover

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

Note, for treatments marked with \* : Health Partners and participating providers are in SA only. If you attend a Health Partners Dental or participating dental provider, higher benefits will apply. Dependants (including Child Dependants) on Family/Single Parent covers receive 2 gap-free dental check-ups at Health Partners Dental & participating dental providers and 4 gap-free physiotherapy consults at participating physios. Healthier Living provides health management service and benefits, such as Bowel Cancer Screening Kits, Diabetes Membership, Gym and Fitness, Mole Check Body Scan, Weight Management & Post-Natal Lactation Consult - Benefits and limits vary. Loyalty bonuses apply to Occupational, Speech therapy and Aids & Appliances. T&Cs apply.

| Treatment & waiting period (months) |    | Benefit limits per 12 months unless otherwise stated                                  | Examples of maximum benefits                                                                       |
|-------------------------------------|----|---------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|
| ✓ Acupuncture                       | 2  | \$350 per person                                                                      | <ul style="list-style-type: none"><li>Initial visit: \$29</li><li>Subsequent visit: \$21</li></ul> |
| ✓ Blood glucose monitors            | 12 | \$250 per person<br>sub-limits apply                                                  | <ul style="list-style-type: none"><li>Per monitor: 85% of charge</li></ul>                         |
| ✓ Chinese medicine                  | 2  | \$160 per person                                                                      | <ul style="list-style-type: none"><li>Initial visit: \$20</li></ul>                                |
| ✓ Chiropractic                      | 2  | \$400 per person<br>combined limit for chiropractic, exercise physiology & osteopathy | <ul style="list-style-type: none"><li>Initial visit: \$42</li><li>Subsequent visit: \$25</li></ul> |
| ✓ Dietetics/dietary advice          | 2  | \$450 per person                                                                      | <ul style="list-style-type: none"><li>Initial visit: \$60</li><li>Subsequent visit: \$35</li></ul> |

|                                          |    |                                                                                              |                                                                                                                                                                                                |
|------------------------------------------|----|----------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| ✓ Endodontic*                            | 12 | \$1,000 per person                                                                           | <ul style="list-style-type: none"> <li>Filling of one root canal: \$135</li> </ul>                                                                                                             |
| ✓ Exercise physiology                    | 2  | <b>\$400 per person</b><br>combined limit for chiropractic, exercise physiology & osteopathy | <ul style="list-style-type: none"> <li>Initial visit: \$28</li> <li>Subsequent visit: \$21</li> </ul>                                                                                          |
| ✓ Eye therapy (orthoptics)               | 2  | \$250 per person                                                                             | <ul style="list-style-type: none"> <li>Initial visit: \$25</li> <li>Subsequent visit: \$25</li> </ul>                                                                                          |
| ✓ General dental*                        | 2  | No annual limit                                                                              | <ul style="list-style-type: none"> <li>Fluoride treatment: \$20</li> <li>Scale &amp; clean: \$65</li> <li>Surgical tooth extraction: \$140</li> <li>Periodic oral examination: \$32</li> </ul> |
| ✓ Health management / Healthy lifestyle* | 2  | \$200 per person                                                                             | <ul style="list-style-type: none"> <li>Health management: 100% of charge</li> </ul>                                                                                                            |
| ✓ Hearing aids                           | 12 | \$800 per person                                                                             | <ul style="list-style-type: none"> <li>Hearing aid: 85% of charge</li> </ul>                                                                                                                   |
| ✓ Major dental*                          | 12 | \$1,500 per person                                                                           | <ul style="list-style-type: none"> <li>Full crown veneered: \$800</li> </ul>                                                                                                                   |
| ✓ Non PBS pharmaceuticals*               | 2  | <b>\$600 per person</b><br>combined limit for non pbs pharmaceuticals & vaccinations         | <ul style="list-style-type: none"> <li>Per eligible prescription: \$0</li> </ul>                                                                                                               |
| ✓ Occupational therapy                   | 2  | \$350 per person                                                                             | <ul style="list-style-type: none"> <li>Initial visit: \$50</li> <li>Subsequent visit: \$40</li> </ul>                                                                                          |
| ✓ Optical*                               | 2  | <b>\$250 per person</b><br>sub-limits apply                                                  | <ul style="list-style-type: none"> <li>Multi-focal lenses &amp; frames: 50% of charge</li> <li>Single vision lenses &amp; frames: 50% of charge</li> </ul>                                     |
| ✓ Orthodontic                            | 12 | <b>\$2,500 lifetime limit</b><br>sub-limits apply                                            | <ul style="list-style-type: none"> <li>Braces for upper &amp; lower teeth, including removal plus fitting of retainer: 70% of charge</li> </ul>                                                |
| ✓ Orthotics (podiatric orthoses)         | 2  | \$300 per person                                                                             | <ul style="list-style-type: none"> <li>Orthotics supply &amp; fit: 70% of charge</li> </ul>                                                                                                    |
| ✓ Osteopathy                             | 2  | <b>\$400 per person</b><br>combined limit for chiropractic, exercise physiology & osteopathy | <ul style="list-style-type: none"> <li>Initial visit: \$42</li> <li>Subsequent visit: \$25</li> </ul>                                                                                          |
| ✓ Physiotherapy*                         | 2  | \$500 per person                                                                             | <ul style="list-style-type: none"> <li>Initial visit: \$30</li> <li>Subsequent visit: \$24</li> </ul>                                                                                          |
| ✓ Podiatry                               | 2  | \$350 per person                                                                             | <ul style="list-style-type: none"> <li>Initial visit: \$33</li> <li>Subsequent visit: \$24</li> </ul>                                                                                          |
| ✓ Psychology                             | 2  | \$400 per person                                                                             | <ul style="list-style-type: none"> <li>Initial visit: \$75</li> <li>Subsequent visit: \$70</li> </ul>                                                                                          |
| ✓ Remedial massage                       | 2  | \$100 per person                                                                             | <ul style="list-style-type: none"> <li>Initial visit: \$20</li> <li>Subsequent visit: \$20</li> </ul>                                                                                          |
| ✓ Speech therapy                         | 2  | \$400 per person                                                                             | <ul style="list-style-type: none"> <li>Initial visit: \$75</li> <li>Subsequent visit: \$45</li> </ul>                                                                                          |

- |                                                           |   |                         |                    |
|-----------------------------------------------------------|---|-------------------------|--------------------|
| ✓ <b>Vaccinations*</b>                                    | 2 | <b>\$600 per person</b> | • Per service: \$0 |
| combined limit for non pbs pharmaceuticals & vaccinations |   |                         |                    |
| sub-limits apply                                          |   |                         |                    |

At Health Partners, we want to help you get the most out of your cover. That's why we have invested in our own Health Partners dental and optical services. When you use these services or our network of participating dentists, pharmacies and physiotherapists, higher benefits and limits may apply. Contact us for more information. Save 20% every day on full-price, non-prescription products at over 50 pharmacies across South Australia, which include participating Priceline and TerryWhite Chemmart stores. T&Cs apply.

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

- |                                 |             |                |
|---------------------------------|-------------|----------------|
| ✗ Ante-natal/Post-natal classes | ✗ Audiology | ✗ Home nursing |
|---------------------------------|-------------|----------------|

**Other features of this general treatment cover:** Shared limits for Psychology and Hypnotherapy. Benefits for Asthmatic Spray Appliances, Blood Pressure Machines, Low Vision Optical Magnification Aids, Circulation Boosters and Sleep Apnoea Machines. 40% Optical unlimited benefit once annual limit is reached, plus unlimited 30% discount on non-prescription sunglasses - only at Health Partners Optical centres. 40% unlimited Endodontic benefit once annual limit is reached at Health Partners Dental centres. Natural Therapies provides benefits for Remedial Massage, Chinese Herbalism, Myofascial Release, Therapeutic Massage, Swedish Massage, Myotherapy and Nutritionist. Benefit \$20 per consultation, total annual limit for all combined Natural Therapy services is \$160 per person. T&C apply.

**For further information about this policy see:** <https://www.healthpartners.com.au/health-insurance/extras-cover>

## Ambulance cover

In all states this policy provides:

**Emergency:** With a waiting period of 2 months, limited to \$20,000 per policy per year, 1 service per year.

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

State schemes provide ambulance services for residents of Tasmania ([https://www.health.tas.gov.au/ambulance/fees\\_and\\_accounts](https://www.health.tas.gov.au/ambulance/fees_and_accounts)) and Queensland (<https://www.ambulance.qld.gov.au>).

**Other features of this ambulance cover:** Ambulance is limited to 1 per person, per year up to \$20,000; maximum 2 per policy. You will be covered for the cost of service required on medical grounds (excluding clinic-car type transport) that is deemed or classified as 'emergency' only (emergency classification determined by approved ambulance provider). Additionally, you will be covered for treatment where no transport is required. This will count towards your annual limit.

**For further information about this policy see:** <https://www.healthpartners.com.au/health-insurance/understanding-private-health-insurance/>

## Insurer Details



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Call now  **1300 113 113**  
Sponsor link

**Health Partners**

 <http://www.healthpartners.com.au>

 [ask@healthpartners.com.au](mailto:ask@healthpartners.com.au)

 **1300 113 113**

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