Top Extras Product Guide

This is a closed product. It is not open to new members.

Effective from 1 November 2023

Subject to change.

Annual limits apply from 1 July.

Please read 'Things you need to know about extras' before having treatment or call us if you have any questions about out-of-pocket expenses.

Dental

Dental network

Visit a network dentist for quality dental care at special member prices. Receive no-gap on your annual scale and clean at participating network dentists - Limit to one per person per financial year. Visit **defencehealth.com.au** for more information.

General and preventive dental



2 Month waiting period



Annual limit - \$900 per person

Periodic oral exam (012)

Up to \$35.40

Removal of calculus (114)

Up to \$66.20

Bitewing x-ray (022)

Up to \$20.00

Adhesive filling to one surface

of a rear tooth (531)

Up to \$65.60

Dependent children can get one custom-fitted mouthguard (items 151 and 153 only) 100% covered each financial year, subject to general dental limits.

Major dental



12 Month waiting period



Annual limit - \$850 per person

Surgical tooth removal (324)

Up to \$167.60

Root canal obturation (417)

Up to \$129.00

Veneer indirect (556)

Up to \$438.80

Full crown - veneer indirect (615)

Up to \$673.80

Endosseous implant (688)

Up to \$850.00

Orthodontics



12 Month waiting period



Annual limit - \$800 per person

Orthodontic treatment

Up to \$800.00

There is no lifetime limit on orthodontic treatment. Benefits are payable on proof of payment for treatment received during the financial year.

Some dental items are limited in the number of times they can be claimed in a year or appointment. Some are not payable in combination with others. And some may not attract a benefit at all. Check your available limits by logging onto your Member Portal, at defencehealth.com.au

Ambulance treatment



2 Month waiting period



Annual limit - \$ Unlimited

Comprehensive cover for ambulance services by state-appointed ambulance providers across Australia. This includes emergency transport, on the spot treatment, mobile intensive care, air and sea ambulance.

Transport services between hospitals, repatriation to or from a state for non-clinically necessary reasons, or services by patient transport vehicles are not claimable.



Optical



2 Month waiting period



Annual limit - \$255 per person

Optical network

Our optical network providers have extensive ranges of no-gap glasses and 100% back on eligible items available up to your annual limit. Plus, receive discounts on in-store contact lenses and other optical add-ons. Visit **defencehealth.com.au** for more information.

Non-network providers

Single vision lenses Up to \$90 Ground single vision lenses Up to \$95 Bi-focal lenses Up to \$105 Multi-focal lenses Up to \$155 Frames/repairs Up to \$95 Contact lenses Up to \$180

All optical claims must include a sight correcting script.

Health and wellbeing



2 Month waiting period



Annual limit - \$300 per person

Exercise physiology, remedial massage, acupuncture and myotherapy

Initial consultation Up to \$31 Subsequent consultation Up to \$27

Group physiotherapy

Group therapy sessions and classes

Up to \$17

Includes group hydrotherapy.

Tests and programs

Per test/program limit

Up to \$80

Benefits are available for approved health screening tests (bowel screening, kidney check, mole mapping, bone density tests, mammograms, heart tests and specialist eye tests), approved quit smoking programs and nicotine replacement therapies.

Benefits are not available for tests/programs where Medicare pays a benefit. An itemised invoice with the patient's name must be provided.



Physiotherapy (including one-on-one hydrotherapy)

2 Month waiting period

Annual limit - \$550 per person

Initial consultation

Up to \$50

Subsequent consultation

Up to \$39

Ante/post natal classes (max 10)

Up to \$20

Full day antenatal class

Up to \$200

Lymphoedema treatment

Up to \$40

Pelvic floor treatment

Up to \$39

Ante/post natal classes must be provided by a recognised

midwife or physiotherapist in private practice only.

Chiropractic/Osteopathy

2 Month waiting period

Annual limit - \$450 per person

Initial consultation

Up to \$45

Subsequent consultation

(max 2 per financial year)

Up to \$32

Chiropractic x-rays

Up to \$40

Psychology

2 Month waiting period

Annual limit - \$400 per person

Initial consultation

Up to \$80

Subsequent consultation

Up to \$70

Group therapy

Up to \$25

Couple/family therapy

Up to \$35

Psychology services claimable through Medicare are not eligible for benefits.

Speech therapy

2 Month waiting period

Annual limit - \$500 per person

Initial consultation

Up to \$85

Subsequent consultation

Up to \$45

Group therapy

Up to \$30

Occupational therapy

2 Month waiting period

Annual limit - \$500 per person

Initial consultation

Up to \$65

Subsequent consultation

Up to \$40

Group therapy

Up to \$20

Podiatry/chiropody

2 Month waiting period

病 Annual limit - \$300 per person

Initial consultation

Up to \$45

Subsequent consultation

Up to \$32

Audiology

2 Month waiting period



Annual limit - \$200 per person

Initial consultation

Up to \$60

Subsequent consultation

Up to \$40

Eye therapy

2 Month waiting period



Initial consultation

Up to \$50

Subsequent consultation

Up to \$35

Group therapy

Up to \$10

Laser refractive eye surgery

12 Month waiting period



Benefits are payable for LASIK, PRK or SMILE eye surgery in a state recognised and registered day surgery centre.

Dietitian

2 Month waiting period

Annual limit - \$250 per person

Initial consultation

Up to \$50

Subsequent consultation

Up to \$30

Pharmacy and vaccinations

2 Month waiting period



Per prescription or vaccination

Up to \$80

The benefit is payable on non-PBS pharmaceuticals only. It is paid on the gap between the current PBS amount and the actual charge.

No benefits are payable for over-the-counter medicines. Excludes vitamins, supplements and minerals.

Benefits are not payable for nicotine e-cigarettes or nicotine vaping products.

School accidents

No waiting period

Annual limit - \$600 child dependant

To cover any out-of-pocket expenses resulting from a school accident. Relevant extras benefits must be claimed first. This benefit excludes services claimable through Medicare.

Home nursing

2 Month waiting period



Per visit

Up to \$32

Visits by a registered nurse in private practice to attend to a person with a serious medical condition when requested by a medical practitioner.



Medically prescribed devices and appliances 2 - 12 Month waiting period Annual limit - \$1000 per person 2 month waiting period Sub-limit Up to \$90 Non-sight correcting Irlen lenses EpiPen Up to \$100 Up to \$100 Appliance maintenance For the repair of hearing aids and foot orthoses or for the purchase of appliance accessories like PAP machine masks. Rental or purchasing of appliances Up to \$150 Rental or purchase of oxygen cylinders, soft collars, toilet seat risers, shower chairs, Continuous Passive Movement machines. Rental only, any other appliance listed below. 12 month waiting period Sub-limit * Replacement or additional items are not claimable within 3 years of previous purchase. Hearing aids* Up to \$1000 PAP machine* for sleep apnoea Up to \$1000 EPAP is not covered under the PAP machine benefit. Blood glucose monitor* Up to \$400 Foot orthotics Up to \$220 Custom-made and fitted by a specialist orthotic practitioner. Excludes over the counter orthotics. Orthopaedic shoes Up to \$250 Custom-made and fitted by a specialist shoemaker for identifiable foot deformities. Splints and braces Up to \$250 Splints,knee/leg/spinal/lumbar/sacral/wrist/ankle braces and surgical corsets. Does not cover casts.

Mobility aids*

Wheelchairs, crutches, walking frames, walking sticks, rolling walkers, seat riser cushions, reaches and adjustable canes

Up to \$1000

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Non-cosmetic prostheses Annual sub-limits apply:	Up to \$1000
- Wig following a medical condition	Up to \$250
- External breast prostheses following a mastectomy (excludes post-mastectomy bra)	Up to \$250
- Artificial eye*	Up to \$1000
Blood pressure monitor*	Up to \$250
TENS machine*	Up to \$250
Nebuliser* and spacer for breathing conditions	Up to \$250

Compression garments Up to \$1000

Up to \$250 per compression garment. Must be TGA approved, and specifically made to treat, manage or prevent a medical condition such as treatment of burns, post-surgical recovery, treatment for lymphoedema or prevention of deep vein thrombosis are common examples when a compression garment could be suitable.

Claims must include a letter from the treating practitioner indicating recommended garment and condition being treated.

Things you need to know about extras

Know your annual limits

All of the goods and services claimable under extras cover have annual per person limits.

Once the annual limit has been reached on a service, no further benefits are payable in that financial year. Most limits re-set on 1 July each year. Benefits, limits and payment conditions are assessed according to the date of service.

Benefits and limits are subject to change.

Check your available limits by logging onto your Member Portal, at **defencehealth.com.au**

If you've reached your limits, consider whether a higher level of cover is right for you. We're happy to help, just give us a call.

Claiming extras benefits

Many health care providers (like dentists, optometrists and physiotherapists) can swipe your member card on-the-spot through an electronic terminal. Your benefit is paid to the provider and you then settle any outstanding amount. A list of providers who offer on-the-spot claiming is available on our website, **defencehealth.com.au**

If your provider doesn't offer on-the-spot claiming you can:

- Claim through your Member Portal (for most services) at defencehealth.com.au
- Claim on your smartphone through our Mobile Claiming App
- Download and complete a claim form from our website, and either:
 - email it with your receipts to claims@defencehealth.com.au
 - fax it and your receipts to 1800 241 581
 - post it and a copy of the account to us: Defence Health, PO Box 7518, Melbourne, Victoria, 3004

Please hold onto your receipts for 2 years.

Claiming conditions

The most common claiming conditions are:

- All services must be provided by an approved practitioner in private practice
- Claims must be lodged within 2 years of receiving the service
- Benefits are only payable on goods and services purchased in Australia. When purchasing eligible items online the supplier must be recognised and a registered Australian provider or company
- Benefits are not payable when they can be claimed from another source such as workers compensation, Department of Veterans' Affairs or third party insurance
- Extras benefits are not payable where Medicare has been or is available to be claimed.

We recognise all extras providers who are registered with their professional body and in the case of approved alternative therapies, those recognised by the Australian Regional Health Group. Remedial massage providers must also hold at least a Diploma of Remedial Massage to be recognised.

If you are unsure whether a practitioner is registered with us, just give us a call on 1800 335 425.

Full claiming conditions are available on our website at **defencehealth.com.au**

Extras waiting periods

When you join Defence Health or upgrade your existing cover, you may have a waiting period before you can claim new or higher benefits. Treatment received during the waiting period cannot be claimed.

Cover for an accident is immediate, including for ambulance services.

Remember, if you transfer within 60 days from an equivalent level of cover with another health fund you won't have to re-serve the waiting periods you've already completed. If you have a break in cover greater than 60 days you will have to re-serve all waiting periods.



Our commitment to you

Our values

Our purpose is to support you, the members of the ADF and wider Defence community to manage your personal and family health care.



Trust

We will earn your trust by consistently delivering a personal experience for your needs. We are as good as our word – every time.



Excellence

Our people are proud to serve you. We will provide service and experience others won't, or can't. We actively seek ways to continuously improve our offer to you.



Ownership

We're part of the ADF family. We accept responsibility, act with initiative, and follow through. We won't let you down.



Respect

We are friendly people, here to help you make good choices. We listen with intent and offer clear explanations, to provide you with peace of mind and support.



Community

We're here for people, not profit. We are committed to making a positive difference to the health and wellbeing of the Defence community.

We value your feedback

Compliments or complaints can be made by phone on 1800 335 425 or to info@defencehealth.com.au

If we are unable to satisfy you, you can contact the Commonwealth Ombudsman on 1300 362 072 or visit www.ombudsman.gov.au. The Ombudsman provides free information and assistance to resolve disputes.

For general information about private health insurance, see www.privatehealth.gov.au

Defence Health Fund Rules

Your cover will be provided and benefits paid in accordance with the Fund Rules of Defence Health Limited. You can download a copy of the latest Fund Rules from **defencehealth.com.au** or call us and we'll send you one.

This Product Guide is current as at 1 November 2023, and is subject to change.

It should be read carefully and retained.

Defence Health Limited - ABN 80 008 629 481 AFSL 313890

Your privacy is important to us

Defence Health collects your personal information – including sensitive information about your health – in order to provide services to you.

We comply with the *Commonwealth Privacy Act 1988* and its Australian Privacy Principles in relation to the personal information that we hold about you and those on your policy.

As a member, by using our services and providing personal information to Defence Health, you affirm that you consent, and you have the consent of any other individuals whose information is provided, to Defence Health dealing with it under our Privacy Policy.

Policy holders will have access to certain personal information about dependants on the policy. Policy holders have an obligation to make dependants aged 16 years and over aware that they may contact us if they do not wish us to share their personal information with the policy holder or others insured on the policy. Upon request, we will make reasonable efforts to keep their personal information private from others insured on the policy, but this may be subject to limited exceptions.

We'll usually collect your personal information directly from you, but may also collect it from others such as your health care professionals, your previous insurer, another insured person on the policy or the policyholder if you are a dependant. We may also collect personal information from third parties and public sources.

We collect your personal information so that we can use it for our reasonable business purposes and provide products and services to our members. We engage with a range of third parties in order to operate our business and provide services. We may disclose personal information to third parties for these purposes. Some third-party providers may be located overseas including in Ireland, other parts of western Europe, USA, New Zealand or India. We may also store your personal information on servers based overseas or in the "cloud". In such cases, your personal information may be viewed from overseas to repair system faults.

Whenever we send you marketing material, we will always inform you how you can opt out of our mailing list. We will implement your request free of charge within a reasonable timeframe.

Our full Privacy Policy is available at **defencehealth.com.au** or you can call us on 1800 335 425 for a copy. It explains how we handle your personal information, how you can access or correct that information, how to make a privacy complaint and how we will deal with it, and how to opt-out of direct marketing from us.

Code of conduct

We are committed to the Private Health Insurance Code of Conduct. You can download a copy of the code at Private Health Insurance Code of Conduct





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