



With your health and wellbeing in mind, Caterpillar Voluntary has partnered with GU Health to provide you and your family with access to a tailored health plan with generous private hospital benefits.

Who is **GU Health**?

GU Health is a corporate health insurance specialist. We've been providing health cover to many of the world's biggest and most recognised brands for over 15 years.

In 2017 GU Health became a subsidiary of nib. nib is one of Australia's fastest growing health insurers, providing health and medical insurance to more than one million Australian and New Zealand residents.

GU Health members enjoy high quality health cover that helps them to live well.

Caterpillar Voluntary Health Plan for Residents

The GU Health **difference**:

- Our agreements with partner private hospitals mean you're covered for hospital accommodation and theatre fees, depending on your level of cover after you have paid any applicable excess.
- Holding hospital cover with GU Health entitles you to an exemption from the Medicare Levy Surcharge (MLS) if it applies to you; that is if you earn over \$90,000 as a single or over \$180,000 as a couple or family.
- Managing your membership is simple with Online Member Services.
- GU Health members have access to a large network of private hospitals across Australia.
- If your doctor participates in the GU Health Medical Gap Network, you'll have no out-of-pocket expenses, or you'll know exactly how much to pay before your treatment begins.

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Your Plan option/s:

- Option 1:** Premier Gold Hospital (\$100 single/\$200 family excess) & Superior Benefits
- Option 2:** Premier Gold Hospital (\$250 single/\$500 family excess) & Superior Benefits
- Option 3:** Premier Gold Hospital (\$250 single/\$500 family excess) & Economy Benefits
- Option 4:** Premier Gold Hospital (\$250 single/\$500 family excess) & Corporate Boost Benefits
- Option 5:** My Choice Silver Plus Hospital Saver (\$100 single/\$200 family excess) & Superior Benefits
- Option 6:** My Choice Silver Plus Hospital Saver (\$100 single/\$200 family excess) & Economy Benefits
- Option 7:** My Choice Silver Plus Hospital Saver (\$100 single/\$200 family excess) & Corporate Boost Benefits

The excess for Premier Gold Hospital, applies once per excess year upon admission to hospital. If the total excess is not paid in a single hospital admission, you will have to pay the remaining balance of the excess on any subsequent admission within the same excess year.

The excess for My Choice Silver Plus Hospital Saver, applies once per excess year upon admission to hospital if you are on a single membership. If you're on a family membership the excess is paid at the single rate, a maximum of twice per excess year. The excess does not apply to same day hospital admissions.

Hospital waiting periods

During your waiting period you or anyone covered under your membership can't claim benefits for certain treatments. Unless you've already served your waiting periods on an equivalent level of cover, your waiting periods will start on the date you join or upgrade your GU Health membership.

If you're covered for any of the following conditions, these hospital waiting periods apply:

Treatment	Waiting period
Psychiatric, palliative & rehabilitation care	2 months
Plastic/cosmetic surgery	12 months
Pregnancy & birth	12 months
Pre-existing conditions	12 months

For Extras waiting periods, please refer to the product table/s.

We have attached the rate sheet and product table/s for your reference.

Continuity of cover

Continuity of cover means that there's no gap in your health cover, if you've transferred from a registered Australian health fund within 60 days of joining us and you've already served your waiting periods on a level of cover with comparable benefits. If you haven't fully served waits with your previous fund, you'll need to serve the remainder with GU Health.

The Australian Government Rebate on Private Health Insurance

The level of rebate that you're entitled to claim is based on the age of the oldest person covered under your membership and

your household income. Unless an arrangement specific to your corporate health plan has already been set up by your employer, you may claim the rebate as an up-front reduction in your GU Health contributions or as a tax rebate when lodging your tax return.

The ATO has grouped earnings over the income thresholds into the following tiers:

Income thresholds effective from 1 April 2015 to 30 June 2021

	Base Tier	Tier 1	Tier 2	Tier 3
Singles	\$90,000 or less	\$90,001 – \$105,000	\$105,001 – \$140,000	\$140,001+
Families	\$180,000 or less	\$180,001 – \$210,000	\$210,001 – \$280,000	\$280,001+

Note: Single parents and couples (including de facto couples) are subject to the family tiers. For families with children, the thresholds are increased by \$1,500 for each child after the first.

If the rebate tier nominated under your actual membership doesn't reflect your rebate entitlement, this will be reconciled by the ATO as part of your tax return. **For more details visit the Australian Taxation Office (ATO) website: ato.gov.au**

Lifetime Health Cover (LHC)

LHC was introduced by the Australian Government to encourage people to take out private hospital cover at a younger age and lock in lower hospital contribution rates throughout their lifetime. People who take out hospital cover after 30 June following their 31st birthday pay a two per cent loading, on top of their contribution for every year they're without hospital cover.

Ready to join?

To join online, simply log onto: guhealth.com.au/cvhp and enter the company code: **cvhp101**.

Please refer to **Your Cover Guide** for more information about your health cover.

Please have on hand your:

- personal details and those of your partner and dependants if applicable
- Medicare card, if you're planning on claiming the Australian Government Rebate
- previous health cover details if you're transferring from another Australian registered health fund.

If you've previously been a GU Health member, you won't be able to use our 'join online function', please join by downloading and completing an application form and returning it directly to:

corporate@guhealth.com.au or

GU Health

Reply Paid 2988 (no stamp required)

Melbourne Vic 8060

We're here to help

For assistance or for more information email: corporate@guhealth.com.au or contact our Member Relations Team on <FreeCall number> between <Hours of Operation> ●



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Rate sheet

Caterpillar Voluntary Direct Debit

Employee Contribution Information

Rates Effective from 01-Jan-20 until 31-Dec-20

Due to Australian Government legislation, rates inclusive of rebate are subject to change on 1 April each year.

Australian Residents:

Premier Gold Hospital \$100(S)/\$200(F) Excess

Monthly Contributions	Single				Family			
	Rates inclusive of rebate			No rebate	Rates inclusive of rebate			No rebate
	Base Tier	Tier 1	Tier 2	Tier 3	Base Tier	Tier 1	Tier 2	Tier 3
New South Wales & ACT	\$163.35	\$181.55	\$199.75	\$218.00	\$326.70	\$363.15	\$399.55	\$436.00
Victoria	\$184.35	\$204.90	\$225.45	\$246.00	\$368.70	\$409.80	\$450.90	\$492.00
Queensland	\$183.95	\$204.45	\$225.00	\$245.50	\$367.95	\$408.95	\$449.95	\$491.00
South Australia	\$175.80	\$195.40	\$215.00	\$234.60	\$351.60	\$390.80	\$430.00	\$469.20
Western Australia	\$146.25	\$162.55	\$178.90	\$195.20	\$292.55	\$325.15	\$357.75	\$390.40
Northern Territory	\$109.45	\$121.65	\$133.90	\$146.10	\$218.95	\$243.35	\$267.80	\$292.20
Tasmania	\$184.70	\$205.30	\$225.90	\$246.50	\$369.45	\$410.60	\$451.80	\$493.00

Premier Gold Hospital \$100(S)/\$200(F) Excess & Superior Benefits

Monthly Contributions	Single				Family			
	Rates inclusive of rebate			No rebate	Rates inclusive of rebate			No rebate
	Base Tier	Tier 1	Tier 2	Tier 3	Base Tier	Tier 1	Tier 2	Tier 3
New South Wales & ACT	\$304.70	\$338.65	\$372.60	\$406.60	\$609.40	\$677.35	\$745.25	\$813.20
Victoria	\$325.65	\$362.00	\$398.30	\$434.60	\$651.35	\$723.95	\$796.60	\$869.20
Queensland	\$325.30	\$361.55	\$397.80	\$434.10	\$650.60	\$723.15	\$795.65	\$868.20
South Australia	\$317.20	\$352.55	\$387.95	\$423.30	\$634.45	\$705.15	\$775.85	\$846.60
Western Australia	\$287.70	\$319.75	\$351.80	\$383.90	\$575.40	\$639.50	\$703.65	\$767.80
Northern Territory	\$250.90	\$278.85	\$306.80	\$334.80	\$501.80	\$557.70	\$613.65	\$669.60
Tasmania	\$326.05	\$362.40	\$398.75	\$435.10	\$652.10	\$724.80	\$797.50	\$870.20

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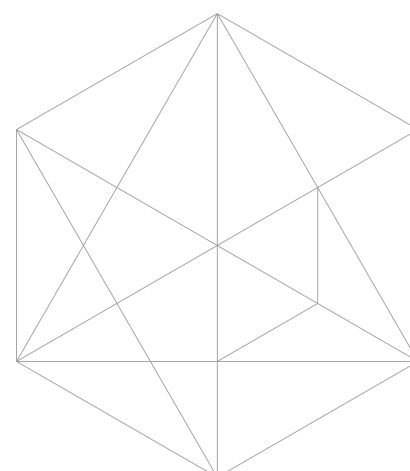
Rate sheet *continued*

Premier Gold Hospital \$250(S)/\$500(F) Excess & Superior Benefits

Monthly Contributions	Single				Family			
	Rates inclusive of rebate			No rebate	Rates inclusive of rebate			No rebate
Cover Options	Base Tier	Tier 1	Tier 2	Tier 3	Base Tier	Tier 1	Tier 2	Tier 3
New South Wales & ACT	\$297.55	\$330.75	\$363.90	\$397.10	\$595.15	\$661.50	\$727.85	\$794.20
Victoria	\$317.15	\$352.50	\$387.85	\$423.20	\$634.30	\$705.00	\$775.70	\$846.40
Queensland	\$317.20	\$352.55	\$387.95	\$423.30	\$634.45	\$705.15	\$775.85	\$846.60
South Australia	\$309.20	\$343.65	\$378.10	\$412.60	\$618.40	\$687.30	\$756.25	\$825.20
Western Australia	\$279.05	\$310.15	\$341.30	\$372.40	\$558.15	\$620.35	\$682.55	\$744.80
Northern Territory	\$245.20	\$272.50	\$299.85	\$327.20	\$490.40	\$545.05	\$599.70	\$654.40
Tasmania	\$317.30	\$352.65	\$388.00	\$423.40	\$634.60	\$705.30	\$776.05	\$846.80

Premier Gold Hospital \$250(S)/\$500(F) Excess & Economy Benefits

Monthly Contributions	Single				Family			
	Rates inclusive of rebate			No rebate	Rates inclusive of rebate			No rebate
Cover Options	Base Tier	Tier 1	Tier 2	Tier 3	Base Tier	Tier 1	Tier 2	Tier 3
New South Wales & ACT	\$243.70	\$270.85	\$298.00	\$325.20	\$487.40	\$541.70	\$596.05	\$650.40
Victoria	\$263.25	\$292.60	\$321.95	\$351.30	\$526.50	\$585.20	\$643.90	\$702.60
Queensland	\$263.30	\$292.70	\$322.05	\$351.40	\$526.65	\$585.35	\$644.10	\$702.80
South Australia	\$255.30	\$283.75	\$312.20	\$340.70	\$510.65	\$567.55	\$624.45	\$681.40
Western Australia	\$225.20	\$250.30	\$275.40	\$300.50	\$450.40	\$500.60	\$550.80	\$601.00
Northern Territory	\$191.30	\$212.65	\$233.95	\$255.30	\$382.65	\$425.30	\$467.95	\$510.60
Tasmania	\$263.40	\$292.75	\$322.10	\$351.50	\$526.80	\$585.55	\$644.25	\$703.00



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Rate sheet *continued*

Premier Gold Hospital \$250(S)/\$500(F) Excess & Corporate Boost Benefits

Monthly Contributions	Single				Family			
	Rates inclusive of rebate			No rebate	Rates inclusive of rebate			No rebate
Cover Options	Base Tier	Tier 1	Tier 2	Tier 3	Base Tier	Tier 1	Tier 2	Tier 3
New South Wales & ACT	\$220.55	\$245.10	\$269.70	\$294.30	\$441.10	\$490.25	\$539.40	\$588.60
Victoria	\$240.10	\$266.85	\$293.60	\$320.40	\$480.20	\$533.75	\$587.25	\$640.80
Queensland	\$240.15	\$266.95	\$293.70	\$320.50	\$480.35	\$533.90	\$587.45	\$641.00
South Australia	\$232.15	\$258.00	\$283.90	\$309.80	\$464.30	\$516.05	\$567.85	\$619.60
Western Australia	\$201.95	\$224.45	\$246.95	\$269.50	\$403.90	\$448.95	\$493.95	\$539.00
Northern Territory	\$168.15	\$186.90	\$205.65	\$224.40	\$336.30	\$373.80	\$411.30	\$448.80
Tasmania	\$240.15	\$266.95	\$293.70	\$320.50	\$480.35	\$533.90	\$587.45	\$641.00

My Choice Silver Plus Hospital Saver \$100(S)/\$200(F) Excess & Superior Benefits

Monthly Contributions	Single				Family			
	Rates inclusive of rebate			No rebate	Rates inclusive of rebate			No rebate
Cover Options	Base Tier	Tier 1	Tier 2	Tier 3	Base Tier	Tier 1	Tier 2	Tier 3
New South Wales & ACT	\$257.40	\$286.10	\$314.80	\$343.50	\$514.80	\$572.20	\$629.60	\$687.00
Victoria	\$264.15	\$293.60	\$323.05	\$352.50	\$528.30	\$587.20	\$646.10	\$705.00
Queensland	\$266.45	\$296.15	\$325.90	\$355.60	\$532.95	\$592.35	\$651.80	\$711.20
South Australia	\$261.90	\$291.10	\$320.30	\$349.50	\$523.80	\$582.20	\$640.60	\$699.00
Western Australia	\$249.70	\$277.50	\$305.35	\$333.20	\$499.40	\$555.05	\$610.70	\$666.40
Northern Territory	\$242.40	\$269.45	\$296.45	\$323.50	\$484.85	\$538.90	\$592.95	\$647.00
Tasmania	\$266.00	\$295.65	\$325.35	\$355.00	\$532.05	\$591.35	\$650.70	\$710.00

My Choice Silver Plus Hospital Saver \$100(S)/\$200(F) Excess & Economy Benefits

Monthly Contributions	Single				Family			
	Rates inclusive of rebate			No rebate	Rates inclusive of rebate			No rebate
Cover Options	Base Tier	Tier 1	Tier 2	Tier 3	Base Tier	Tier 1	Tier 2	Tier 3
New South Wales & ACT	\$203.50	\$226.20	\$248.90	\$271.60	\$407.05	\$452.45	\$497.80	\$543.20
Victoria	\$210.25	\$233.70	\$257.15	\$280.60	\$420.55	\$467.45	\$514.30	\$561.20
Queensland	\$212.60	\$236.30	\$260.00	\$283.70	\$425.20	\$472.60	\$520.00	\$567.40
South Australia	\$207.95	\$231.10	\$254.30	\$277.50	\$415.90	\$462.25	\$508.65	\$555.00
Western Australia	\$195.80	\$217.65	\$239.45	\$261.30	\$391.60	\$435.25	\$478.95	\$522.60
Northern Territory	\$188.45	\$209.45	\$230.45	\$251.50	\$376.95	\$418.95	\$460.95	\$503.00
Tasmania	\$212.05	\$235.70	\$259.35	\$283.00	\$424.15	\$471.40	\$518.70	\$566.00

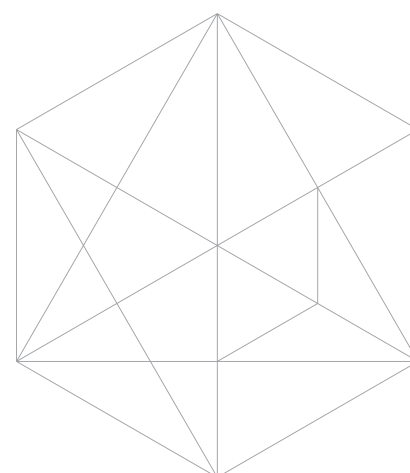
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My Choice Silver Plus Hospital Saver \$100(S)/\$200(F) Excess & Corporate Boost Benefits

Monthly Contributions	Single				Family			
	Rates inclusive of rebate			No rebate	Rates inclusive of rebate			No rebate
Cover Options	Base Tier	Tier 1	Tier 2	Tier 3	Base Tier	Tier 1	Tier 2	Tier 3
New South Wales & ACT	\$180.35	\$200.45	\$220.60	\$240.70	\$360.75	\$400.95	\$441.15	\$481.40
Victoria	\$187.10	\$207.95	\$228.85	\$249.70	\$374.25	\$415.95	\$457.65	\$499.40
Queensland	\$189.45	\$210.55	\$231.65	\$252.80	\$378.90	\$421.10	\$463.35	\$505.60
South Australia	\$184.80	\$205.40	\$226.00	\$246.60	\$369.60	\$410.80	\$452.00	\$493.20
Western Australia	\$172.65	\$191.90	\$211.15	\$230.40	\$345.30	\$383.80	\$422.30	\$460.80
Northern Territory	\$165.30	\$183.75	\$202.15	\$220.60	\$330.60	\$367.45	\$404.35	\$441.20
Tasmania	\$188.90	\$209.95	\$231.00	\$252.10	\$377.85	\$419.95	\$462.05	\$504.20

Note:

- The hospital contributions quoted above do not include Lifetime Health Cover (LHC) loading.
- The actual amount of your new contribution rate may include rounding of cents and will depend on the applicable LHC loading, if any (LHC loading not applicable to non-resident cover options).
- Only rates applicable to the rebate tiers available under your particular corporate health plan are set out above.
- Your actual entitlement to the Australian Government Rebate on Private Health Insurance may vary depending on your age and income. For more details visit the Australian Taxation Office (ATO) website ato.gov.au or contact your registered tax agent.
- If your rebate entitlement, as determined by the ATO, differs from rebate claimed under your GU Health membership, any reconciliation necessary will be carried out by the ATO after lodgement of your tax return.
- Rates inclusive of the Australian Government Rebate on Private Health Insurance are subject to change on 1 April each year due to government legislation. This affects contribution amounts quoted under Base Tier, Tier 1 and Tier 2 above. For more details on the government's indexing of the rebate visit the Department of Health website health.gov.au.



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Your hospital plan



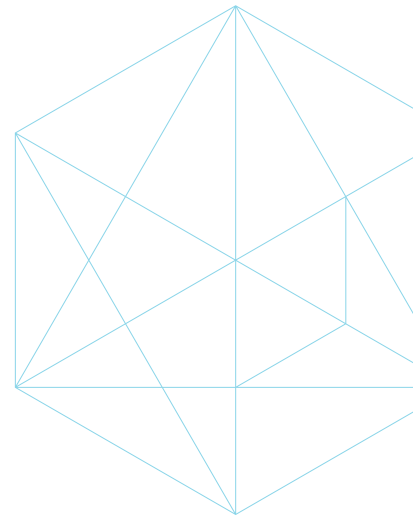
	ACCOMMODATION, INTENSIVE CARE & THEATRE FEES FOR IN-HOSPITAL TREATMENTS LISTED BELOW.	PREMIER GOLD HOSPITAL	MY CHOICE SILVER PLUS HOSPITAL
		All public & partner private hospitals	All public & partner private hospitals
Head & Spine	Brain & nervous system	✓	✓
	Eye (not cataracts)	✓	✓
	Cataracts	✓	✗
	Ear, nose & throat	✓	✓
	Implantation of hearing devices	✓	✓
	Tonsils, adenoids & grommets	✓	✓
	Dental surgery (excludes dental item fees)	✓	✓
	Back, neck & spine	✓	✓
Chest & Organs	Heart & vascular system	✓	✓
	Lung & chest	✓	✓
	Breast surgery (medically necessary)	✓	✓
	Skin	✓	✓
	Blood	✓	✓
Kidney & Digestive	Kidney & bladder	✓	✓
	Dialysis for chronic kidney failure	✓	✓
	Digestive system	✓	✓
	Hernia & appendix	✓	✓
	Gastrointestinal endoscopy	✓	✓
	Weight loss surgery	✓	✓
Reproductive	Male reproductive system	✓	✓
	Gynaecology	✓	✓
	Miscarriage & termination of pregnancy	✓	✓
	Pregnancy & birth	✓	✓
	Assisted reproductive services	✓	✗

COVERED
 RESTRICTED
 EXCLUDED

Please note: In addition to the services covered on your plan, you are covered for the following treatments.

Common and Support treatments: When you have a hospital admission, you may receive additional treatments that are associated with the in-hospital services listed above on your plan. We call these common treatments or support treatments and they are items listed within the Medical Benefits Schedule (MBS). Benefits for both common and support treatments are paid according to the level of cover you will receive for your principle hospitalisation.

Associated treatment for complications and unplanned treatments: If a medical complication occurs during your hospital admission that requires further treatment we refer to this as associated treatment for complications. Associated unplanned treatment is unplanned procedures you may need to have during your planned hospitalisation because your medical practitioner considers the treatment medically necessary and urgent. Both these types of associated treatments will be eligible for benefits at the same level of cover you'll receive for your principle hospitalisation. Refer to *Your Membership Guidelines* for more information.

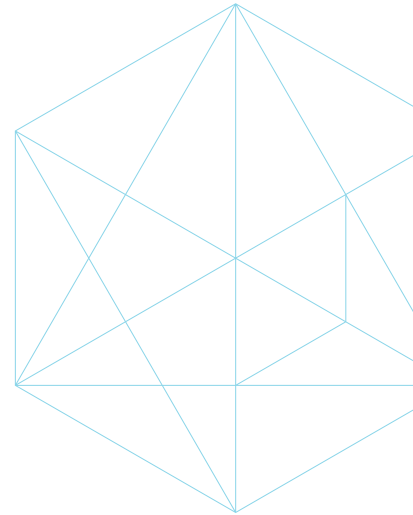


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Your hospital plan



ACCOMMODATION, INTENSIVE CARE & THEATRE FEES FOR IN-HOSPITAL TREATMENTS LISTED BELOW.		PREMIER GOLD HOSPITAL	MY CHOICE SILVER PLUS HOSPITAL
		All public & partner private hospitals	All public & partner private hospitals
Joint & Bone	Bone, joint & muscle	✓	✓
	Joint reconstructions	✓	✓
	Joint replacements	✓	✗
	Pain management	✓	✓
	Pain management with device	✓	✓
Services & Treatments	Chemotherapy, radiotherapy & immunotherapy for cancer	✓	✓
	Diabetes management (excluding insulin pumps)	✓	✓
	Insulin pumps	✓	✓
	Sleep studies	✓	✓
	Plastic & reconstructive surgery (medically necessary)	✓	✓
	Rehabilitation	✓	●
	Hospital psychiatric services	✓	●
	Palliative care	✓	✓
	Surgically-implanted prostheses (minimum cost of government-approved appliances)	✓	✓
	GU Health Medical Gap Network You may be able to reduce or eliminate your out-of-pocket expenses.	✓	✓
Additional included services (not recognised by Medicare for a benefit)	Podiatric surgery (Hospital accommodation costs when provided by a registered podiatric surgeon)	✓	✓
	Elective plastic & cosmetic surgery (Hospital only benefits)	●	●
	Ambulance	Emergency transport only	Emergency transport only
	Special nursing in hospital (when provided by a registered nurse in private practice)	\$20 per hour up to \$1,000	✗
	Home support services & programs	✓	✓



COVERED
 RESTRICTED
 EXCLUDED

This is a summary of your hospital cover. To understand the meaning of “restricted” on your plan, please see the section on Restrictions in this document. For full details on your benefits and membership entitlements, please refer to **Your Membership Guidelines**. Information is correct as at 1 April 2019 and may change at any time.

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Your extras plan

SUPERIOR Benefits

SERVICES	SERVICE DETAILS	BENEFIT	MAXIMUM LIMIT
General dental	Check ups, basic fillings, x-rays, scale & clean	80%	\$1,200
Major dental	Crowns, bridges, dentures, root canal, periodontics, inlays/onlays, implants & orthodontics	80%	\$1,700
Optical	Prescription glasses & contact lenses, including repairs. Tinting, coating & hardening of lenses not covered.	80%	\$350
Physiotherapy & specialist therapies	Physiotherapy, speech pathology, antenatal, eye therapy & occupational therapy. Consultations only.	80%	\$600
Pharmaceuticals	Prescription items with an official pharmacy receipt. After you pay a sum equal to the current Pharmaceutical Benefits Scheme (PBS) charge, you're covered for the remaining amount above the PBS, up to your benefit limit. Contraceptives & fertility treatment hormones not covered.	100%	\$500
Chiropractic & osteopathy	Consultations only. Includes two chiropractic x-rays.	80%	\$500
Clinical psychology & hypnotherapy	Consultations only	80%	\$500
Therapies	Acupuncture, ayurveda, Chinese massage, Chinese herbal medicine, exercise physiology, myotherapy, nutrition, remedial massage, sports therapy & traditional Thai massage. Consultations only.		
Dietetics	Consultations only		
Audiology	Consultations only	80%	\$200
Podiatry	Consultations only	80%	\$300
Hearing aids	One appliance every five years	100%	\$500
Aids & appliances	CPAP machines, blood pressure monitors, custom made orthotics & more. A letter is required from your treating doctor or recognised health practitioner. Appliances must be purchased from a recognised health practitioner or organisation.	80%	\$500

WAITING PERIODS

Major dental	12 months
Hearing aids	12 months
Aids, appliances & orthotics	12 months

Unless specified otherwise, all limits are per person per membership year. This is a summary of your extras cover. For full details of your benefits and membership entitlements, please refer to *Your Membership Guidelines*.

This information is current from 1 April 2019, and subject to change.

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ECONOMY Benefits

SERVICES	SERVICE DETAILS	BENEFIT	MAXIMUM LIMIT
General dental	Check ups, basic fillings, x-rays, scale & clean	60%	\$1,000
Major dental	Crowns, bridges, dentures, root canal, periodontics, inlays/onlays, implants & orthodontics		
Optical	Prescription glasses & contact lenses, including repairs. Tinting, coating & hardening of lenses not covered.	60%	\$200
Physiotherapy & specialist therapies	Physiotherapy, speech pathology, antenatal, eye therapy & occupational therapy. Consultations only.	60%	\$600
Pharmaceuticals	Prescription items with an official pharmacy receipt. After you pay a sum equal to the current Pharmaceutical Benefits Scheme (PBS) charge, you're covered for the remaining amount above the PBS, up to your benefit limit. Contraceptives & fertility treatment hormones not covered.	60%	\$500
Chiropractic & osteopathy	Consultations only. Includes two chiropractic x-rays.	60%	\$500
Clinical psychology & hypnotherapy	Consultations only		
Therapies	Acupuncture, Chinese herbal medicine & nutrition. Consultations only.		
Dietetics	Consultations only		
Podiatry	Consultations only	60%	\$300
Hearing aids	One appliance every five years	60%	\$500
Aids & appliances	CPAP machines, blood pressure monitors, custom made orthotics & more. A letter is required from your treating doctor or recognised health practitioner. Appliances must be purchased from a recognised health practitioner or organisation.	60%	\$500

WAITING PERIODS

Major dental	12 months
Hearing aids	12 months
Aids, appliances & orthotics	12 months

Unless specified otherwise, all limits are per person per membership year. This is a summary of your extras cover. For full details of your benefits and membership entitlements, please refer to *Your Membership Guidelines*.

This information is current from 1 April 2019, and subject to change.

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CORPORATE BOOST Benefits

SERVICES	SERVICE DETAILS	BENEFIT	MAXIMUM LIMIT
General dental	Check ups, basic fillings, x-rays, scale & clean	75%	\$800
Major dental	Crowns, bridges, dentures, root canal, periodontics, inlays/onlays, implants & orthodontics. Lifetime limit on orthodontics \$2,200.	75%	\$800
Optical	Prescription glasses & contact lenses, including repairs. Tinting, coating & hardening of lenses not covered.	75%	\$200
Physiotherapy & specialist therapies	Physiotherapy, speech pathology, antenatal, eye therapy & occupational therapy. Consultations only.	75%	\$500
Pharmaceuticals	Prescription items with an official pharmacy receipt. After you pay a sum equal to the current Pharmaceutical Benefits Scheme (PBS) charge, you're covered for the remaining amount above the PBS, up to your benefit limit. Contraceptives & fertility treatment hormones not covered.	75%	\$250
Chiropractic & osteopathy	Consultations only. Includes two chiropractic x-rays.	75%	\$300
Clinical psychology & hypnotherapy	Consultations only	75%	\$350
Therapies	Acupuncture, ayurveda, Chinese massage, Chinese herbal medicine, exercise physiology, myotherapy, nutrition, remedial massage, sports therapy & traditional Thai massage. Consultations only.		
Dietetics	Consultations only		
Podiatry	Consultations only	75%	\$300
Orthotics	Custom made only. Appliances must be purchased from a recognised health practitioner.		
Hearing aids	One appliance every five years	75%	\$425
Aids & appliances	CPAP machines, blood pressure monitors & more. A letter is required from your treating doctor or recognised health practitioner. Appliances must be purchased from a recognised health practitioner or organisation.		

WAITING PERIODS

Major dental	12 months
Hearing aids	12 months
Aids, appliances & orthotics	12 months

Unless specified otherwise, all limits are per person per membership year. This is a summary of your extras cover. For full details of your benefits and membership entitlements, please refer to *Your Membership Guidelines*.

This information is current from 1 April 2019, and subject to change.