

Starter 60% with Repair

Extras Cover

Fact Sheet issued 01 April 2020

Level of cover with **Australian Unity**



MID

Cover availability



SINGLE







SINGLE PARENT FAMILY

FAMILY

IMPORTANT: This Fact Sheet is only a summary of the cover. Our Member Guide and Terms & Conditions documents have further information on how this cover works. Before booking treatment, you should contact us to ask about the benefits you can expect to receive and any out-of-pocket expenses you might incur. This information is current as at 13 February 2020 and subject to change from time to time.

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Dental	What you'll get back	Yearly limit (January - December)	Waiting Period and Additional Information
Preventative Dental	60% of the cost per item	Combined maximum of \$600 per person	No waiting period
			Covers selected services such as scale and clean, fluoride treatment and mouthguards
General Dental	60% of the cost per item		No waiting period for selected diagnostic services
			2 month waiting period includes most fillings and simple tooth extractions

Optical	What you'll get back	Yearly limit (January - December)	Waiting Period and Additional Information
Optical	60% of the cost per item	\$150 per person	6 month waiting period
			For prescription glasses, contact lenses or repairs supplied by an optometrist in private practice. Excludes non-prescription sunglasses and contact lenses, and optical consultations.

Physical Therapies	What you'll get back	Yearly limit (January - December)	Waiting Period and Additional Information
Physiotherapy	60% of the consultation fee	\$400 per person	2 month waiting period
			Includes sports physiotherapy and hydrotherapy
Chiropractic & Osteopathy	60% of the consultation fee	Combined maximum of \$300 per person	2 month waiting period
Podiatry	60% of the consultation fee		2 month waiting period
			Excludes podiatric surgery
Orthotics	60% of the cost per item	Combined maximum of \$300 per person	12 month waiting period
			Appliances must be recommended by a podiatrist or medical practitioner and supplied by an approved provider in a private practice

Other Health Services	What you'll get back	Yearly limit (January - December)	Waiting Period and Additional Information
Remedial Massage	60% of the consultation fee		2 month waiting period
Myotherapy	60% of the consultation fee	Combined maximum of \$300 per person	2 month waiting period
Acupuncture	60% of the consultation fee		2 month waiting period
Speech, Eye & Occupational Therapy	60% of the consultation fee	Combined maximum of \$300 per person	2 month waiting period

Devices & Aids	What you'll get back	Yearly limit (January - December)	Waiting Period and Additional Information
Health Aids	60% of the cost per item	Combined maximum of \$300 per person	month waiting period includes hire or purchase of wheelchairs or crutches used in prevention or support post injury month waiting period includes braces, splints,
			garments and non-surgical prosthesis. Benefit for each item is payable every 2 calendar years (does not apply to wigs).

Devices and Aids

For a benefit to be paid on some aids and devices, a letter is required (no more than 6 months old) from your treating doctor or healthcare practitioner indicating the medical condition for which the item is required. Aids and devices must be purchased from a Recognised Provider or an Australian organisation. Please call us to check if an item is covered and if a letter is required.



Important Information

Out-of-pocket costs

At Australian Unity we want to try to help with the cost of looking after your health by putting some money back in your wallet. Extras cover can help you get money back on common health treatments that aren't generally covered by Medicare.

You'll get a percentage of the cost back on included Extras every time you claim, until you reach your yearly limit. Therefore you only pay the difference between what you get back from Australian Unity and the cost set by your provider.

Please call us or refer to your Member Guide and Terms & Conditions for further information on how this cover works. If you want more specific information about what you can expect your out-of-pocket costs to be, we recommend you obtain a quote from your provider before undergoing treatment, along with a list of item numbers. You can then contact us or log in to Online Member Services for details of benefits before proceeding with your treatment.

Dental Service Limits

We use the Australian Dental Association (ADA) guidelines and our Fund Rules to determine whether we pay benefits for certain services. For example, the ADA guidelines help us to categorise each dental service (e.g. 'diagnostic', 'Periodontics') and may indicate that a certain dental item number can't be charged by a provider with another service during the same visit. Some limited services may also not be payable under our assessment rules. Where possible, you should always contact us to determine the benefits you can expect to receive.

Planning a family

Please contact us if you're planning a family to make sure this cover is appropriate for you and your family.

There's no happier time than starting or growing your family, and we want to ensure your new addition is covered straight away on your policy.

Family, Single Parent Family or Couple memberships

It is important that you notify us within 12 months of your baby's birth and add them to your policy effective from their date of birth, for waiting periods to be waited.

Please note that Couple memberships will also need to change to a Family membership and back pay any difference in premium (if applicable).

Single memberships

To avoid your baby serving waiting periods, it is important that within 30 days of the birth you:

- Upgrade to a Family or Single Parent Family cover; and
- Add your baby to the policy.

These changes will be made effective from the baby's date of birth and you will be required to back pay any difference in premium.

Benefits for the Clinical Category Pregnancy and Birth are only paid under selected Hospital covers. Please refer to your Hospital Fact Sheet or contact us for more information.



For more information, please refer to your Member Guide particularly Important Things to Know - Terms and Conditions and the Fund Rules available at australianunity.com.au/importantdocuments

Waiting Periods

You cannot receive benefits for any items or services you may have received while you are serving a relevant waiting period. However, if you've already served your waiting periods on an equivalent or higher level of cover with any registered Australian health fund and join within 30 days of leaving that fund, you will not have to re-serve your waiting periods. Otherwise, waiting periods will apply from the date you re-join. If you've upgraded your cover, your waiting periods for the higher benefits will start on the date you upgrade, but you can still claim an equivalent benefit to your previous level of cover during that period.

Please note: The services listed under the waiting periods in the Extras table are not an exhaustive list. Please refer to your Online Member Services or contact us for more information as waiting periods for other services may apply.

Changes to your cover

We may at any time make changes to your cover. This may include adding or reducing the benefits or services available to you. We will ensure that we provide you with appropriate notice of these changes in accordance with the Private Health Insurance Act 2007, the Australian Consumer Law and the Private Health Insurance Code of Conduct.

Recognised Providers

We only pay benefits when you see a recognised provider in a private practice. Please contact us to check if your provider is recognised by us.

Closed Covers

Please note this cover is no longer available to new members.



Australian Unity is a signatory to the Private Health Insurance Code of Conduct. For details visit privatehealth.com.au/codeofconduct. This documentation should be read carefully and retained Information is subject to change.

Your personal information is managed in line with our privacy policy which is available at australianunity. com.au/privacy-policy. Your membership is subject to the Fund Rules and Privacy Policy of Australian Unity which may change from time to time. Australian Unity Health Limited - ABN 13 078 722 568.

Any questions?



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