Premier Extras Product Guide

Effective from 1 July 2022

Subject to change.



PREMIUM EXTRAS FOR PEOPLE WHO WANT THE BEST

All-in extras to support all-in people.

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 two per person per financial year. Visit defencehealth.com.au/dental for more information.

General and preventive dental

Month waiting period

Annual limit - \$ Unlimited

Periodic oral exam (012) Up to \$45.00 Removal of calculus (114) Up to \$84.00 Bitewing x-ray (022) Up to \$27.00

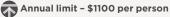
Adhesive filling to one surface Up to \$94.60

Dependent children can get one custom-fitted mouthguard (items 151 and 153 only) 100% covered each financial year.

Major dental

12 Month waiting period

of a rear tooth (531)



Surgical tooth removal (324) Up to \$213.60 Root canal obturation (417) Up to \$149.20 Veneer indirect (556) Up to \$652.20 Full crown - veneer indirect (615) Up to \$1011.20 Endosseous implant (688) Up to \$1100.00

Orthodontics

12 Month waiting period



Orthodontic treatment

Up to \$1000

There is no lifetime limit on orthodontic treatment. Benefits are payable on proof of payment for treatment 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 Online Member Services account, at defencehealth.com.au/members

Ambulance treatment

2 Month waiting period

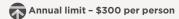


Comprehensive cover for ambulance services by stateappointed ambulance providers across Australia. This includes emergency services, non-emergency dispatch, mobile intensive care and air and sea ambulance services.

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



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/optical for more information.

Non-network providers

Single vision lenses Up to \$100 Ground single vision lenses Up to \$105 Bi-focal lenses Up to \$115 Multi-focal lenses Up to \$175 Frames/repairs Up to \$125 Contact lenses Up to \$200 All optical claims must include a sight correcting script.

Health and wellbeing

2 Month waiting period

Annual limit - \$400 per person

Remedial massage, acupuncture and myotherapy

Initial consultation Up to \$39 Subsequent consultation Up to \$35

Group physiotherapy

Group therapy sessions and classes Up to \$25

Includes group hydrotherapy.

Group exercise physiology

Group therapy Up to \$17

Tests and programs

Per test/program limit Up to \$180

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. Visit defencehealth.com.au/wellbeing for more details.

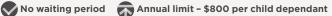
Laser refractive eye surgery

12 Month waiting period



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

School accidents

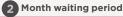


To cover any out-of-pocket expenses resulting from a school accident. Relevant extras benefits must be claimed first. This benefit excludes services claimable through Medicare.

Your extras cover continued

Flexi-limits







Exercise physiology

Initial consultation Up to \$51 Subsequent consultation Up to \$31

Antenatal and postnatal services

Full day antenatal course Up to \$500 Antenatal consultations/classes Up to \$50 Postnatal consultations/classes Up to \$50

By a recognised midwife or physiotherapist in private practice only.

Psychology

Initial consultation Up to \$122 Subsequent consultation Up to \$107 Group therapy Up to \$42 Couple/family therapy Up to \$62

Psychology services claimable through Medicare are not eligible for benefits.

Speech therapy

Initial consultation Up to \$110 Subsequent consultation Up to \$62 Group therapy Up to \$47

Occupational therapy

Initial consultation Up to \$94 Subsequent consultation Up to \$57 Group therapy Up to \$32

Podiatry/chiropody

Initial consultation Up to \$54 Subsequent consultation Up to \$40

Audiology

Initial consultation Up to \$82 Subsequent consultation Up to \$62

Eve therapy

Initial consultation Up to \$67 Subsequent consultation Up to \$57

Dietitian

Initial consultation Up to \$74 Subsequent consultation Up to \$42

Physiotherapy (including one-on-one hydrotherapy)

Month waiting period

Annual limit - \$850 per person

Initial consultation Up to \$64 Subsequent consultation Up to \$51 Pelvic floor treatment Up to \$72

Chiropractic/Osteopathy

Lymphoedema treatment

2 Month waiting period

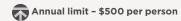
Annual limit - \$750 per person

Up to \$97

Initial consultation Up to \$54 Subsequent consultation Up to \$40 Chiropractic x-rays (max 2 per Up to \$57 financial year)

Pharmacy and vaccinations

2 Month waiting period



Per prescription or vaccination

Up to \$100

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.



Your extras cover continued

2 - 12 Month waiting period Annual lim	
2 month waiting period	Sub-limit
Non-sight correcting Irlen lenses	Up to \$100
EpiPen	Up to \$150
Appliance maintenance	Up to \$100
For the repair of hearing aids and foot orthos ourchase of appliance accessories like PAP m	
Rental of appliances	Up to \$200
Including oxygen cylinders, soft collars, toilet shower chairs, Continuous Passive Movement or any other appliance listed below.	
12 month waiting period	Sub-limit
* Replacement or additional items are not clain of previous purchase.	nable within 3 ye
Hearing aids*	Up to \$1500
PAP machine* for sleep apnoea EPAP is not covered under the PAP machine benefit.	Up to \$1250
Blood glucose monitor*	Up to \$500
Foot orthotics Custom-made and fitted by a specialist orthotic practitioner. Excludes over the counter orthotics.	Up to \$300
Orthopaedic shoes Custom-made and fitted by a specialist shoemaker for identifiable foot deformities.	Up to \$300
Splints and braces Splints,knee/leg/spinal/lumbar/sacral/ wrist/ankle braces and surgical corsets. Does not cover casts.	Up to \$300
Mobility aids* Wheelchairs, crutches, walking frames, walking sticks, rolling walkers, seat riser cushions, reaches and adjustable canes.	Up to \$100C
Joint fluid replacement injections Synvisc, OsteoArtz, Hyalgan	Up to \$300
Non-cosmetic prostheses Annual sub-limits apply:	Up to \$1250
- Wig following a medical condition	Up to \$300
- External breast prostheses following a mastectomy (excludes post-mastectomy bra)	Up to \$300
- Artificial eye*	Up to \$1250
Blood pressure monitor*	Up to \$300
TENS machine*	Up to \$300
Nebuliser* and spacer for breathing conditions	Up to \$300
Compression garments	Up to \$1500
Up to \$300 per compression garment. Must nand specifically made to treat, manage or precondition such as treatment of burns, post-subtreatment for lymphoedema or prevention of	event a medical irgical recovery,

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 Online Member Services account, at **defencehealth.com.au/members**

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/extrasprovider

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

- Claim through Online Member Services (for most services) at defencehealth.com.au/members
- 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/claim

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/fund-rules or call us and we'll send you one.

This Product Guide is current as at 1 July 2022, 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, parts of western Europe or USA.

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/ privacy** 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 **defencehealth.com.au**





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