# HEALTHY OPTIONS EXTRAS union health

#### **EFFECTIVE 1 JANUARY 2023**

Please read this product guide in conjunction with information on our website and the Important Information Guide.

Take the guesswork out of your extras cover and get 60% back on a wide range of treatments up to your annual limits. Treatments available include dental, optical, physiotherapy, massage therapy, and Health Management services.

### **EXTRAS COVER**

Limits are per person, per calendar year, unless otherwise stated. Benefits are only payable up to the annual limit.

SERVICES	Waiting periods (months)	Benefit	Annual limit
Dental Dental items are as defined by the Australian Dental Association (ADA) schedule and at our discretion. For information on actual benefits payable, contact us when you have obtained an itemised treatment plan from your dentist.			\$1,000 overall
General and preventative Includes the surgical removal of teeth (including wisdom teeth).	2	60%	
Major	12		
Anti-snore device Replacement every 3 years from date of previous supply.		60%	
Crowns and bridges			
Dentures			
Dental implants			
Endodontia			
Inlays, onlays, facings			
Orthodontia The lifetime limit is \$2,100. See the Important Information Guide for details.			\$700
Periodontia			
Optical	6		\$260
Highlighted items: No benefit for additional lens treatments (eg. tinting/hardcoating/transitional).		60%	
Single vision lenses			
Bi-focal lenses			
Graduated/progressive lenses			
Tri-focal lenses			
Contact lenses – disposable (single/pair)			
Contact lenses – hard/soft spherical			
Contact lenses – hard/soft toric			
Frames only			
Repairs to frames			
Physiotherapy	2		\$450
Consultations		60%	
Exercise physiology			
Group physiotherapy/exercise physiology (includes hydrotherapy) Provided by a physiotherapist/exercise physiologist as part of a treatment plan.			
Antenatal/postnatal			
Paediatric assessment (one per year)			
Other services			
Active Health Bonus Only available in combination with any hospital cover. Participation in online Health-e-Profile required every 12 months.	6	100%	\$40/single \$80/family

SERVICES (CONT.)	Waiting periods (months)	Benefit	Annual limit
Health management Please contact us for details of approved programs. Due to legislation, benefits are only payable if not claimable through Medicare.	2	60%	\$150/single \$300/family
Antenatal/postnatal classes Childbirth education class, when conducted by a doctor, hospital, or midwife (one per membership)		60%	
Ambulance subscriptions Excludes QLD, TAS, ACT and NSW residents. Refer to the Important Information Guide (page 8) for further details.			
<b>Health programs</b> Nicotine replacement products (where not covered under the PBS),illness related association memberships, health education classes, lithotripsy, medical alert bracelets/subscriptions.			
Health screenings Mammogram, pap smear (Thin Prep), ambulatory blood pressure monitoring, bone density screening, coronary CT, MRI, health checks (heart health checks and medical tests prior to fitness training programs), foetal screenings.			
Weight loss, exercise and health programs For management of a chronic health condition. Claims require a health management form completed by your medical provider and valid receipts. The form is available from our website.			
Therapies	2		\$500
Acupuncture Provider must be registered with the Australian Regional Health Group.		60%	
Chiropractic			
Consultations			
X-rays (one per year)			
Massage therapy and myotherapy Provider must be registered with the Australian Regional Health Group.			
Osteopathy			
Consultations			
X-rays (one per year)			
Podiatry Benefits not payable for orthotics or podiatric surgery.			
Consultations			
Bio-mechanical gait analysis (one per year)			
Psychology and hypnotherapy Psychology benefit only paid for a Medicare registered psychologist. Counsellors must be registered with the Australian Regional Health Group.			
Consultations			
Group consultations (psychology only)			
Psychometric assessment (one per year)			
Counselling consultations			

### THINGS TO LOOK OUT FOR

Per single/family cover

An individual on a single cover can only claim up to the single limit, whereas persons under a family, single parent, or couple cover can claim up to the family limit.

Per person/membership

An individual within a family, single parent, or couple cover can claim up to the per person limit, provided the membership limit has not been exceeded.

Initial consultation

Limit of one per year for each service type.



Telehealth options available. See Important Information Guide for conditions and how to claim.

## **EXTENDED DEPENDANT COVER**

Young adults who are single and not covered as student dependants can remain on their parents' policy until they turn 31, for an additional premium loading. Not available when combined with Basic Hospital or Gold Hospital.