

Cover Summary

Priority Optimal Extras.

(without a Priority hospital cover)

Here's a summary of the services and treatments we pay benefits towards on your cover. Please read it and keep it somewhere safe for future reference. For a better understanding of how your cover works refer to your Member Guide, which is a summary of our Fund Rules and policies, or call us on 131 680.

Making the most of your Extras cover.

Members' Choice extras providers.

If you visit a provider from our large Members' Choice network you'll generally get better value for money. This means you can take advantage of capped rates. When you visit a non-Members' Choice provider, you'll generally receive a lower benefit for those services. As long as the provider is a Medibank recognised provider, benefits are payable for services or items included under your cover.

Get more value at Members' Choice and Members' Choice Advantage providers.







100% back on up to 2 check-ups each year at Members' Choice dentists and this doesn't count towards annual limits.‡

‡ Members can claim a maximum of two 100% back dental check-ups per member, per year either at a Members' Choice Advantage dentist (including up to two bitewing x-rays per check-up where required), or a Members' Choice dentist (excluding x-rays), or a combination of both. These check-ups do not count towards annual limits.









Included extras.

Here are the Extras services you can claim for, along with the limits and waiting periods that apply.


It's important to know that the benefit we pay for services or items is likely to be less than your annual limit and less than your provider's charge, which means you may have out-of-pocket expenses to pay.

Service	Waiting period	Annual limits & sub-limits
Ambulance services[^]	1 day	No annual limit
General dental* 	2 months	\$1,000
• Surgical procedures & extractions	12 months	\$300 sub limit per member during the first 6 months of membership
Major dental* 	12 months 	\$2,000 For services in this category but not to exceed the amount shown for each sub-category
• Periodontics (i.e. treatment of gum disease)		\$300 – \$600 [#]
• Crowns, dentures & bridges		\$400 – \$700 [#]
• Inlay/onlay restorative (e.g. restorative fillings)		\$300 – \$600 [#]
• Orthodontics e.g. braces		\$400 – \$700 [#] (lifetime limit of \$2,400 per member)
Endodontic services*  e.g. root canal treatment	12 months	\$400 – \$650 [#]
Optical items  Includes frames, prescription lenses & contact lenses	6 months	\$250 A sub limit of \$92 for frames & \$200 for contact lens items
Physiotherapy  Includes consultations, clinical pilates & hydrotherapy sessions	2 months	\$700 – \$850 [#]

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Service	Waiting period	Annual limits & sub-limits
Non-PBS pharmaceuticals Includes most prescription-only items not subsidised by the Government. Benefits will be paid after the PBS co-payment amount has been deducted. It's important to note that we don't pay benefits for oral contraceptives or for pharmaceuticals prescribed for cosmetic purposes.	2 months	\$600 – \$750 [#]
Alternative therapies Consultations for:	2 months	\$1,000 For services in this category but not to exceed the amount shown for each sub-category
• Chiropractic  & osteopathy		\$400 – \$800 [#]
• Acupuncture 		\$400 – \$800 [#]
• Remedial massage 		\$100 – \$250 [#]
Other therapies	2 months	\$1,000 For services in this category but not to exceed the amount shown for each sub-category
• Podiatry – Consultations – Approved orthotics 		\$400 – \$800 [#]
• Occupational therapy		\$400 – \$800 [#]
• Speech therapy		\$400 – \$800 [#]
• Eye therapy		\$400 – \$800 [#]
• Dietetics		\$400 – \$800 [#] Jenny Craig sub limit applies: \$100 per person per lifetime up to \$200 per membership
Mental health support	None	\$400 – \$800 [#]
• Consultations with psychologists, counsellors and mental health social workers		
• Pharmacogenetic testing for all conditions ⁺		
Health appliances		\$1,000 For services in this category but not to exceed the amount shown for each sub-category
• Hearing aids	36 months	\$800
• Breathing appliances e.g. peak flow meters, nebulisers & spacing devices 	12 months	\$180 per membership every 3 years
• Blood glucose monitors 	24 months	\$240 per membership every 3 years
• Approved external prostheses and appliances 	2 months	\$500 Sub limits apply
School accident treatment For preschool, primary and secondary school students. Conditions apply	2 months	\$800

 Benefit restrictions apply.

 A referral letter is required. Refer to your Member Guide for more information.

 Members' Choice providers are available for these services only.

[^] For ambulance attendance or transportation to a hospital where immediate professional attention is required and your medical condition is such that you couldn't be transported any other way. Tasmania and Queensland have state schemes to cover ambulance services for residents of those states.

^{*} Benefits will only be paid towards dental and orthodontic treatments that are administered in person (not via phone or online), by a recognised provider.

[#] The annual limits increase by \$50 on 1 January of each year of continuous membership following the date of joining to the maximums shown.

⁺ Medibank will pay benefits towards pharmacogenetic tests for all conditions. Benefits will only be paid towards pharmacogenetic tests administered in-person, or for approved home kits where supporting documentation from a medical practitioner outlining the clinical purpose is supplied.

Benefit restrictions.

The Benefit Replacement Periods on your cover are shown below. A Benefit Replacement Period is the amount of time you need to wait from the date you purchase an item, before we pay towards a replacement for it.

Benefit Replacement Periods are separate to waiting periods.

Service category	Items	Benefit Replacement Period
Health appliances and external prostheses	Wigs, hip protectors and insulin delivery pens	24 months
	Other health appliances and external prostheses	36 months
Blood glucose monitors	Blood glucose monitors	36 months
Breathing appliances	Peak flow meters and nebulisers (per membership)	
	Spacing devices	
Major dental	Dentures, crowns and bridges	60 months
Hearing aids	Hearing aids	

Additional limitations such as service restrictions (clinical reasonability rules) may apply to some individual dental items and services.

Limits also apply to how often you can claim on some extras services. For example, you can only claim on one mouthguard per person, per calendar year.

Please contact us on **131 680** before your treatment.

Things you need to know about your Extras cover.

Members' Choice providers.

Medibank has arrangements with providers for some (but not all) services - these are known as Members' Choice providers. We've negotiated capped prices that Members' Choice Extras providers can charge, which generally means more money back in your pocket. You can still use a non-Members' Choice Extras provider, as long as they're recognised by Medibank, but you won't be able to take advantage of the capped pricing.

Members' Choice Advantage Extras providers are part of our Members' Choice Network and you may enjoy even better value when you need to use eligible extras services at these providers.

It's important to be aware that Medibank's Members' Choice and Members' Choice Advantage Extras providers are subject to change without notice, and are not available in all areas, so please check if they're a Members' Choice or Members' Choice Advantage provider before your treatment or service.

Find your nearest Members' Choice provider at medibank.com.au/memberschoice

Non-Members' Choice providers.

These are extras providers recognised by Medibank but with whom we don't have an agreement.

Transferring from another health insurer.

You may not need to re-serve waiting periods if you transfer within two months. Benefits paid under your previous cover will be taken into account in determining the benefits payable under your Medibank cover.

Lifetime limit.

Once you've reached this limit you can no longer claim that benefit in any future year of membership, even if you change your cover.

Waiting periods.

A waiting period is a period of time you need to wait after taking out your cover before you're entitled to receive benefits for services or items included under your cover. You're not able to receive benefits for any items or services you might have obtained while you are serving a waiting period or before you joined Medibank.

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Annual limit and sub limit.

An annual limit is the maximum amount of benefits payable for an extras service, particular groups of extras services or items within a calendar year (i.e. 1 January – 31 December). The benefit is paid for a particular item or service within an overall annual limit.

Where the annual limit increases, it will increase on 1 January, up to the maximum limit. The first increase will be applied only after you've served one full calendar year of membership.

A sub limit is a maximum amount you can receive on an annual basis (or within other defined periods of time) for a particular item or service within an overall annual limit. Benefits are paid per person per calendar year unless otherwise shown. For more information call us on **131 680**.

Telehealth services.

Medibank pays towards telehealth consultations for some extras services, such as mental health support. Refer to the Member Guide or medibank.com.au/telehealth to check what other services on your cover are available through telehealth.

Health support that never sleeps.

Medibank health insurance members can talk to a registered nurse or mental health professional at no extra cost.[^] Chat over the phone or online with 24/7 Medibank Nurse Support and 24/7 Medibank Mental Health Support. Call **1800 644 325** or chat online using My Medibank.

Live Better rewards.

We think Australians should be rewarded for looking after their health. That's why eligible Medibank members with Hospital or Extras cover can earn Live Better rewards points by tracking things they do every day like walking, eating healthy meals and more with Live Better rewards in My Medibank. Members can then redeem those points on anything from discounts on premium payments to rewards from our health and wellbeing partners.[@]

For more information visit medibank.com.au/livebetter/rewards.

[^] Some referred services may involve out of pocket costs and waiting periods may apply.

[@] Medibank Live Better rewards terms and conditions: Must be 16 years or over to register for Medibank Live Better rewards. Must be a Medibank member with Hospital cover, Extras cover, or Hospital and Extras cover, be up-to-date with premium payments and have signed up to Medibank Live Better rewards with My Medibank to earn Live Better rewards points and to redeem rewards. Excludes Overseas Student Health Cover (OSHC), Ambulance only cover, ahm covers and other selected covers. Live Better Management Pty Ltd, ACN 003 457 289 has entered into commercial arrangements with Medibank Live Better rewards program partners and may receive commissions. Additional terms and conditions may apply to the redemption of a reward depending on the type of reward chosen. Some program partners and earning activities require a person to be at least 18 years of age to be eligible to earn and/or redeem a reward. See full Medibank Live Better rewards terms at medibank.com.au/livebetter/rewards/terms

How to find out more.

Health insurance can be complicated, that's why we've prepared a glossary of useful terms that you can view online at medibank.com.au/glossary