

# BASIC EXTRAS

PRODUCT SHEET

## **BASIC EXTRAS**

Basic Extras gives you a flexible yearly limit on popular services like physio, remedial massage, and psychology. Plus, get additional limits to use on things like gym memberships, optical and dental. To find out more go to **nmhealth.com.au/basic-extras** 

	BENEFIT (UPTO)	YEARLY LIMIT	WAITING PERIOD
GENERAL DENTAL			
Periodic oral examination (012) – limit of 2 services per person/year	\$20	\$400 per person/ \$800 per family	2 months
Removal of calculus (114) – limit of 2 services per person/year	\$35		
Topical application of remineralising agent (121) – limit of 2 services per person/year	\$20		
Removal of tooth (311)	\$50		
Filling: adhesive restoration – 3 surfaces (533)	\$61		
OPTICAL			
Frames	\$150	\$150 per person/ \$300 per family	6 months
Single vision lenses – pair	\$150		
Bifocal lenses – pair	\$150		
Multifocal lenses – pair	\$150		
Contact lenses – pair	\$150		

BENEFIT (UPTO)	YEARLY LIMIT	WAITING PERIOD
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\$30	\$500 per person/ \$1,000 per family	
\$15		
\$30		
\$15		
\$60		
\$45		2 months
\$30		21110111113
\$22		
\$22		
\$25		
	\$30 \$15 \$30 \$15 \$60 \$45 \$30 \$22 \$22	\$30 \$15 \$30 \$15 \$30 \$15 \$60 \$45 \$30 \$1,000 per person/ \$22 \$22

Benefits towards non-PBS prescription medication, that's approved by the Therapeutic Good Association (TGA), to treat a medical condition. Benefits are not payabe for contraceptives prescribed without a medical condition.

## HEALTHY LIFESTYLE/HEALTH MANAGEMENT

Health-related programs to address a specific health or medical condition. You're required to submit a Healthy Lifestyle Program form every 2 years, download a copy from nmhealth.com.au/healthy-lifestyle

Including weight management, gym membership and more. Visit <b>nmhealth.com.au</b> for a full list of programs.	100%	\$150 per person/ \$300 per family	6 months
Flu vaccination	\$30	(\$30 per person/\$60 per family sub-limit applies for flu vaccination)	

## **EMERGENCY AMBULANCE TRANSPORT**

Emergency ambulance transport (state government services)	100%	\$6,000 per person/ \$12,000 per family	1day
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## IMPORTANT THINGS TO KNOW

## WAITING PERIODS

To keep health insurance fair for everyone, you may need to wait for a while before you can claim on your Extras cover – this is a 'waiting period'.

Waiting periods may apply if you're **new to private health insurance**, or if you **upgrade to a higher level of cover** (with us or when you switch from another fund).

If you leave another health fund, you need to join us within 60 days to avoid re-serving any applicable waiting periods.

You don't have to wait if you switch from another fund to the same or lower cover with us, and you've already served your waiting periods.

## **EXTRAS WAITING PERIODS**

Optical, Healthy Lifestyle	6 months
All other services	2 months
Emergency ambulance transport	1day

#### **BENEFITS AND LIMITS**

- All person and family limits are based on a calendar year from 1 January (unless stated otherwise).
- The family limit applies to everyone on your cover. Once you reach the family limit, you can't claim for that benefit until the next calendar year.

 Benefits are limited to one service per person, per provider, per day.

## WHAT WE WON'T PAY FOR

We won't pay for things like:

- two services from the same provider on the same day
- services provided by an immediate family member who is covered by the same policy
- · claims more than two years old
- claims where no charge has been raised, such as gift vouchers for massages
- services where benefits are payable from a third party (i.e. compensation)
- services received during any period when your membership is unfinancial or suspended
- services not included in your cover, or for which you are serving waiting periods
- · services from an unrecognised provider
- · claims without official receipts
- services or goods received overseas.

Please be aware you *can* claim for face-to-face dental consultations only. You *can't* claim for home (DIY) dentistry – this includes teeth whitening kits, orthodontic aligners and occlusal splints. If unsure, you can contact us to find out whether a benefit is payable, we're here to help.

This is not an exhaustive list and additional exclusions may apply based on the Fund Rules.









GPO Box 9812 Sydney NSW 2001 **1300 344 000** 

Overseas callers +61 2 8346 2134 info@nmhealth.com.au

This Product Sheet contains important information about your private health insurance with Nurses & Midwives Health. Please read it carefully in conjunction with the Membership Guide and retain for future reference.

The information contained within this brochure is current at the time of printing. Membership of Nurses & Midwives Health is available to current and prior members of the Australian Nursing & Midwifery Federation and its branches, and their families. Fund policyholders and those covered under a policy are subject to the rules and conditions of Nurses & Midwives Health as well as applicable government legislation and laws. This brochure contains a summary of the main rules and conditions. Premiums and benefits are subject to change. Fund policyholders are encouraged to review the Nurses & Midwives Health Privacy Policy, available at nmhealth.com.au/privacy. This brochure should be read carefully in conjunction with the Membership Guide and retained.

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