

# Extras Cover

## Essential Extras



**Essential Extras includes all those essential services like Dental, Physio, Chiro, Podiatry, Complementary Therapies, Ambulance and more.**

This is an overview of all the services included on Essential Extras. This product fact sheet must be read with our Health Cover Guide ([hif.com.au/guide](https://hif.com.au/guide)).



**HIF Choice Network<sup>2</sup> –**  
Get 100% back on your first two check-ups when visiting an HIF Choice Network Dental provider.



**Optical<sup>5</sup> –**  
Annual limit of \$200 per person.



Flexible combined annual limit of \$400 per person for **Physio, Exercise Physiology, Chiro, Osteo, Podiatry and Dietetics**.

Service	Benefit	Annual limit per person	Waiting period
<b>General Dental<sup>1</sup></b>	\$54.35	\$1,250 (Combined limit for General Dental, Major Dental and Orthodontics)	2 months
Oral Examination (012) <sup>3</sup>	\$23.95		
Dental x-ray (022)	\$110.35		
Scale and clean (114) <sup>3</sup>	\$33.20		
Fluoride treatment (121) <sup>3</sup>	\$139.75		
Surgical tooth extraction (322)	\$83.90		
<b>Major Dental</b>	\$129.15		12 months
Filling of one root canal (417)	\$758.85		
Full crown - non metallic (613)	\$720.25		
Full crown - veneered (615)	\$984.30		
Dentures - complete (719) <sup>4</sup>			

1 Limits apply to the number of times some items (such as bleaching) attract a benefit. You may also not be able to claim benefits for services performed with another item in the same course of treatment.

2 100% back for 2 check-ups and 1 mouthguard each year at HIF Choice Network Dental providers. Waiting periods and annual limits apply. For more information on other services covered under the HIF Choice Network, see the HIF Choice Network section or visit [hif.com.au/choice-network](https://hif.com.au/choice-network)

3 Subsequent visits for these item numbers within the calendar year are paid at a lower benefit.

4 Benefits for replacement dentures and partial dentures are not paid within three years of previous supply.

Service	Benefit	Annual limit per person	Waiting period
<b>Orthodontics</b>			
Orthodontics	100%	\$1,250 (Combined limit for General Dental, Major Dental and Orthodontics) Orthodontics lifetime limit: \$1,250	12 months
<b>Optical</b>			
Frames, prescription lenses and contact lenses <sup>5</sup>	100%	\$200	2 months
<b>Physiotherapy</b>			
Individual consultation	\$35		
Group, hydrotherapy, antenatal	\$15		
<b>Exercise Physiology</b>			
Consultations	\$25		
<b>Chiropractic</b>			
Consultations	\$28	\$400	2 months
X-ray	\$70 (max 1 per year)		
<b>Osteopathy</b>			
Consultations	\$28		
<b>Podiatry<sup>6</sup></b>			
Consultations	\$28		
<b>Dietetics</b>			
Consultations	\$30		
<b>Pharmacy<sup>7</sup></b>			
Non-PBS pharmaceuticals	Member pays general PBS contribution. Benefit is 100% of the balance up to \$80 per script item.	\$200	2 months
Flu vaccination (Benefits payable from a registered pharmacy only)	\$20 (1 per person, per calendar year)		
<b>Complementary Therapies<sup>8</sup></b>			
Services include acupuncture, myotherapy, remedial massage and traditional Chinese medicine	\$28	\$150	2 months
<b>Healthy Lifestyle<sup>9</sup></b>			
Services include gym memberships, health assessments, weight management programs, quit smoking plans and skin cancer screenings	100%	\$75	2 months
<b>Ambulance<sup>10</sup></b>			
Emergency Ambulance	100%	Unlimited	1 day
Non-Emergency Ambulance	100% (\$50 co-payment per trip)	Unlimited	30 days

<sup>5</sup> Benefits are payable on prescription optical items.

<sup>6</sup> Benefits are not payable on podiatry surgery or orthotics.

<sup>7</sup> Benefits are not payable on PBS (Pharmaceutical Benefit Scheme) prescriptions or over the counter items purchased with or without a prescription.

<sup>8</sup> Benefits are not payable on medicines.

<sup>9</sup> Benefits are payable for HIF approved programs delivered by registered providers only. Please contact us prior to commencing program to check eligibility.

<sup>10</sup> Not covered:

- Transportation from a hospital to your home, nursing home or other hospital.

- Transportation for ongoing medical treatment.

- Off road or air ambulance (e.g. plane, helicopter or boat).

### HIF Choice Network

HIF has partnered with a network of providers to make a selected range of services more affordable. By choosing an HIF Choice Network provider you'll receive low or no out-of-pocket costs.

#### Dental

When visiting a HIF Choice Network Dental provider, you can get more value with:

- 100% back for 2 check-ups and 1 mouthguard each year<sup>+</sup>

Find your nearest HIF Choice Network provider at [hif.com.au/choice-network](http://hif.com.au/choice-network)

*+ Members can claim 100% back on 2 oral examinations, 2 scale and cleans, 2 fluoride treatments, 2 x-rays and 1 mouthguard each year at HIF Choice Network Dental providers (subject to specific item codes). Waiting periods and annual limits apply. Additional service limits may apply. Other eligible dental item numbers may also be included. Once the HIF Choice Network 100% back service limit has been reached within the same calendar year, benefits will be paid at the same rate as Non-HIF Choice Network providers.*

#### Optical

To see all member discounts available at HIF Choice Network Optical providers, visit [hif.com.au/optical](http://hif.com.au/optical).

### Understanding annual limits

Like most Extras health covers, there are annual limits (a limit on how much we will pay towards your claims) for most services under Essential Extras. These annual limits reset to the full amount on January 1 each year.

**Please note:** Benefits are payable up to your annual limit. Annual limits are per person per calendar year unless otherwise stated.

### How to make an Extras claim

With HIF, making an Extras claim is easy! In fact, the toughest bit is choosing from our host of convenient ways to make your claim:

1. Claim on the spot with most providers simply by swiping your HIF Member card through their HICAPS eClaiming terminal
2. Claim online through our 24/7 Member Centre
3. Claim on your mobile with our HIF Member App, available for Apple and Android devices
4. Claim by email – simply send copies of your signed claim form and receipts to [claims@hif.com.au](mailto:claims@hif.com.au)
5. Claim by posting your documents to: HIF, Whadjuk Country, GPO Box X2221, Perth WA 6847.

In any case, it's quick and easy and you'll have your benefit paid in no time. To find out more and download a claim form, visit [hif.com.au/claim](http://hif.com.au/claim)

#### Please note:

*\* Benefits are payable by HIF only for services and programs delivered by registered providers that are approved by HIF.*

*\* Benefits are paid by item number limits up to sub-limits/calendar limits. Call us on 1300 134 060 prior to treatment to confirm your benefits payable.*

### What are waiting periods?

All health funds have to apply waiting periods. It's the only way we can protect our community of loyal Members from people who would otherwise join our fund to claim large amounts, then leave.

That said, we try to keep waiting periods to a minimum. That's why, if you switch to us from another health fund, we'll honour any waiting periods already served with your previous insurer on an equivalent level of cover.



#### Got a question?

Visit our handy online knowledge base at [hif.com.au/help](http://hif.com.au/help)