

Cover Summary




Priority Standard Extras

(without a Priority hospital cover)

This is an important summary of your cover and we recommend that you read and retain it. You can find out more about your membership by referring to the Member Guide, which is a summary of our Fund Rules and terms and conditions, or by calling us on 131 680.

Extras cover

This table shows the services you can claim benefits for, annual limits, sub limits and waiting periods that apply to your extras cover.

Service	Example Items and Services	Waiting period	Annual limit	Sub limit
Ambulance services+	For eligible services where immediate professional attention is required	1 day	No annual limit	
General dental* Every member gets 100% back on up to two check-ups each year at a Members' Choice Advantage dentist (including bitewing x-rays where required). And this doesn't count towards annual limits.^	Preventative treatment	2 months	\$800 	\$300 during first 6 months of membership \$400 for Endodontics
	Scale and clean	2 months		
	Surgical dental procedures (excluding hospital charges)	12 months		
	Endodontics	12 months		
Major dental*	Periodontics	12 months	\$300 per person / \$600 per membership 	
	Crowns, dentures & bridges			
	Major restorative fillings (e.g. veneers)			
	Orthodontics (e.g. braces)			
Optical*	Includes frames, prescription lenses and contact lenses	6 months	\$225	\$92 for frames \$200 for contact lens
Prescription pharmaceutical (non-PBS)	Includes most prescription-only items not subsidised by the Government. Benefits will be paid after a set charge 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	Flexi -fund \$600 increases by \$50 per year to a maximum \$800 per single membership \$1,000 increases by \$100 per year to a maximum of \$1,400 per couple/family membership  	
Physiotherapy*	Consultations	2 months		\$300
Chiropractic* / osteopathy	Consultations	2 months		\$300
Acupuncture*	Consultations only	2 months		\$300
Remedial massage*	Consultations only	2 months		\$100
Podiatry*	Consultations Approved orthotics 	2 months		
Dietetics*	Consultations and Jenny Craig weight loss benefit	2 months		Jenny Craig - \$100 per person lifetime limit \$200 per membership per calendar year

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Service	Example Items and Services	Waiting period	Annual limit	Sub limit
Occupational therapy*	Consultations only	2 months	Flexi-fund continued, refer above Ⓢ Ⓛ	\$300
Speech therapy*	Consultations only	2 months		
Mental health support	Consultations for psychology and counselling	None		
Eye therapy	Consultations only	2 months		
Breathing appliances 📄	Peak flow meters, nebulisers and spacing devices only	12 months		
Hearing aids	Purchase of devices	36 months		
Blood glucose monitors 📄	Purchase of devices only	24 months		
Health appliances including external prostheses 📄	Insulin delivery pens, pressure therapy garments, braces, splints, orthoses, post-mastectomy bras and external mammary prostheses/breast forms,	2 months		Sub-limits apply

Ⓛ Benefit Replacement Periods apply. Ⓢ Sub-limits apply. 📄 Referral letter required.

+ For ambulance attendance or transportation to a hospital where immediate professional attention is required and your medical conditions 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.

* Members' Choice providers are available for these services only.

^ 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.

? How does Flexi-Bonus work?

Flexi-Bonus		Waiting period	Per membership
The Flexi-Bonus can be used to top-up extras benefits for any services that are part of Flexi-Fund. Any member may claim Flexi-Bonus up to the membership limit	Year 1	2 months	\$50
	Year 2		\$75
	Year 3		\$100
	Year 4		\$125
	Year 5+		\$150

Ⓛ Benefit Replacement Periods (BRPs)

This is the period of time you need to wait from the date of purchase for an item before you can receive another benefit to replace it. This is separate to the waiting period. Below are the benefit replacement periods that apply to your cover. These apply per member, unless otherwise stated.

Additional restrictions may apply to some individual dental item numbers and services. Please contact us prior to your treatment.

Service category	Items	Benefit replacement period
General dental	Mouthguards	12 months
Health appliances and external prostheses	External mammary prostheses and repairs of external prostheses	12 months
	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	

What does it mean?

Members' Choice providers: These are extras providers Medibank has negotiated with so you won't be charged more than the agreed price.

Members' Choice Advantage providers are part of our Members' Choice Network. If you visit a Members' Choice Advantage provider, you can get 100% back on up to two dental check-ups per year (includes bitewing x-rays if required). Plus you can also get 100% back on a mouthguard each year (subject to your annual limits and capped prices).

Members' Choice and Members' Choice Advantage providers are not available in all areas. To check whether a provider is a Members' Choice/Members' Choice Advantage provider go to 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.

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.

Referral letter

A referral letter is required to claim benefits for some items under your cover. Refer to the Member Guide for more information.

How to find out more

If you'd like to find out more about your cover please refer to our Member Guide, which is a summary of our Fund Rules.

Where possible before booking treatment, you should always call us on 131 680 to ask about the benefits you can expect to receive and any out-of-pocket expenses you might incur.

medibank.com.au

This information is current as at 15 October 2020 and subject to change from time to time. If you'd like to change your cover, please contact us on 131 680.

Membership of Medibank Private is subject to our Fund Rules and policies which are summarised in our Member Guide.

Medibank Private Limited ABN 47 080 890 259