

# Cover Summary

## Extras 55

This cover must be taken with an eligible Hospital cover.

Here's a summary of the services and treatments provided by 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 **1800 746 746**.

### Making the most of your Extras cover

#### Extras providers

With Extras 55 you can claim a known percentage back at any recognised provider nationwide. That gives you the flexibility to use the service provider of your choice, knowing exactly what percentage of their charge you will receive back each time, up to your annual limit.

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.

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

100% back on up to 2 check-ups each year at Members' Choice Advantage dentists and this doesn't count towards annual limits.<sup>‡</sup>  
 100% back on optical items up to your annual limit, and discounts on most lenses and lens options.<sup>-</sup>

<sup>‡</sup> Members can claim a maximum of two 100% back dental check-ups per member, per year—either two check-ups at a Members' Choice Advantage dentist (including up to two bitewing x-rays per check-up where required), or a first check-up at a Members' Choice dentist (excluding x-rays) and a second check-up at a Members' Choice Advantage dentist. These check-ups do not count towards annual limits. Waiting periods apply.

<sup>-</sup> Some items excluded. A waiting period applies.

### Included extras

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

Service category	Example items and services	Waiting period	Amount you can claim		Annual limit per member
			Members' Choice provider	Non-Members' Choice provider	
Optical	Frames	6 months	100%		\$180
	Prescription lenses				
	Contact lenses				
General dental*	Preventative treatment	2 months	55%		\$600 
	Dental examinations				
	Scale and clean				
	Surgical dental procedures (excluding hospital charges)	12 months			
Physiotherapy	Consultations	2 months	55%		Combined limit of \$500
	Clinical pilates				
	Hydrotherapy sessions				
Chiropractic	Consultations				
Osteopathy	Consultations only				

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Service category	Example items and services	Waiting period	Amount you can claim		Annual limit per member
			Members' Choice provider	Non-Members' Choice provider	
<b>Non-PBS Pharmaceuticals</b>	Benefits for prescription-only non-PBS pharmaceuticals will be paid after a set charge has been deducted. Refer to your Member Guide for further details	2 months		55%	\$300
<b>Remedial massage</b> <span>MC</span>	Consultations	2 months		55%	Combined limit of \$300 
<b>Myotherapy</b>	Consultations				
<b>Acupuncture</b> <span>MC</span>	Consultations only				
<b>Chinese medicine</b>	Consultations only				
<b>Exercise physiology</b>	Consultations				
<b>Podiatry</b> <span>MC</span>	Consultations				
	Approved orthotics 				
<b>Dietetics</b>	Consultations only				
<b>Mental health support</b>	Consultations for psychology and counselling	None			
<b>Occupational therapy</b>	Consultations only	2 months			
<b>Eye therapy</b>	Consultations only				
<b>Speech therapy</b>	Consultations only				
<b>Health appliances and external prostheses</b> 	Insulin delivery pens, pressure therapy garments, braces, splints, non-podiatric orthoses, post-mastectomy bras and external mammary prostheses/breast forms	12 months			
<b>Breathing appliances</b> 	Peak flow meters, nebulisers and spacing devices only	24 months			
<b>Blood glucose monitors and blood pressure monitors</b> 	Purchase of devices	36 months			
<b>Hearing aids</b>	Purchase of devices				

 Benefit replacement periods apply.

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

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

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

## Things you need to know about your Extras cover

### Waiting periods

A waiting period applies when you join Medibank, or change your cover to include new or upgraded services. We won't pay benefits for any items purchased or services received while you are serving a waiting period.

### Annual limits

An annual limit is the maximum amount of benefits we pay towards services and/or items within a calendar year. A combined limit is an annual limit that applies to a group of services and/or items.

### Switching from another health insurer?

You may not need to re-serve waiting periods if you join Medibank within 2 months of leaving your previous health insurer, and you've already served the waiting period for that service. Benefits paid under your previous cover will be taken into account in determining the benefits payable under your Medibank cover.

## Benefit Replacement Periods

This is the amount of time you need to wait from the date you purchase an item, before we pay towards a replacement for it. Below are the benefit replacement periods that apply to your cover. Additional limitations may apply to some individual items and services, please contact us on **1800 746 746** before your treatment.

Benefit replacement periods are separate to waiting periods.

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 and blood pressure monitors	Blood glucose monitors and blood pressure monitors	36 months
Breathing appliances	Nebulisers, spacing devices and peak flow meters	
Hearing aids	Hearing aids	60 months

### **Use Members' Choice Extras 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 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).

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](https://medibank.com.au/memberschoice)

### **Telehealth consultations**

Medibank pays towards telehealth consultations for selected extras services included on your cover.

Refer to the Member Guide or [medibank.com.au/telehealth](https://medibank.com.au/telehealth) to check what services are available through telehealth.

### **Manage your membership on the go**

You can see your available Extras balances online at My Medibank. You can also update your details, check what your cover includes and much more.

Best of all, it only takes two minutes to sign up for My Medibank, at [medibank.com.au/members](https://medibank.com.au/members)

You can also download the Medibank app on your smartphone. Just search for Medibank in your app store or go to [medibank.com.au/mobile](https://medibank.com.au/mobile)

### **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](https://medibank.com.au/livebetter/rewards)

\* 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](https://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](https://medibank.com.au/glossary)