

HCF TOP EXTRAS PRODUCT SUMMARY

Top level extras with our highest coverage for therapies and services.

FEATURES

| | | | |
|--|--|--|---|
| <p>100% BACK ON SELECTED EXTRAS*</p>  | <p>LOYALTY LIMITS INCREASE THE LONGER YOU'RE WITH US⁺</p>  | <p>CLAIM ON A RANGE OF HEALTH MANAGEMENT PROGRAMS</p>  | <p>BE REWARDED WITH A GREAT RANGE OF EXCLUSIVE OFFERS through HCF Thank You</p>  |
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EXTRAS INCLUDES:

- ✓ Our highest level of limits and benefits
- ✓ Cover for our full range of services including dental, orthodontics, optical, physio, other therapies and health aids
- ✓ A range of HCF-approved Health Management Programs including learn to swim classes, weight management programs and gym membership fees for specific health conditions
- ✓ School Accident Benefit to help pay out-of-pocket expenses relating to extras included in your cover if your child's in an accident at school**

GET 100% BACK ON:*

- ✓ 2 dental check-ups, scale and cleans and a fluoride treatment through *More for Teeth* providers
- ✓ Prescription glasses[^] and free digital retinal imaging with your eye test through *More for Eyes* providers
- ✓ An initial physio, chiro and osteo consultation through *More for Muscles* and *More for Backs* providers
- ✓ An initial podiatry consultation through *More for Feet* providers
- ✓ High quality hearing aids from our *More for Hearing* provider, Blamey Saunders Hears



* At participating providers, subject to your cover and annual limits. Exclusions apply. To find out more, visit hcf.com.au/100back
⁺ Up to a maximum limit. See extras table for details.
[^] Excludes add-ons such as high index material, coatings and tinting.
^{**} Applies to children attending school, up to and including year 12. Subject to waiting periods, annual limits and other conditions. See hcf.com.au/school-accident



HCF TOP EXTRAS

TREATMENTS COVERED BY THIS POLICY

| SERVICE CATEGORY | | DESCRIPTION | INDICATIVE BENEFIT AMOUNT | WAITING PERIOD | ANNUAL LIMIT PER PERSON, PER CALENDAR YEAR (UNLESS OTHERWISE SPECIFIED) |
|--|--|---|---|--|--|
| OPTICAL | Glasses and contact lenses | Spectacle frames | \$135 | 2 months | \$275 |
| | | Spectacle lenses - pair | \$150 | | |
| | | Contact lenses - pair | \$160 | | |
| GENERAL DENTAL | Diagnostic and preventative | Examinations (max 2 services per year) | \$34-\$84 | 2 months | No annual limit (service limits apply) |
| | | Removal of plaque/calculus (max 2 services per year) | \$40-\$75 | | |
| | | Application of fluoride (max 1 service per year) | \$29 | | |
| | | Single film X-rays (service limits apply) | \$34 | | |
| GENERAL DENTAL | Simple fillings | Direct fillings | \$105-\$256 | 12 months | Year 1 \$1,000 Year 2 \$1,150 Year 3+ \$1,300 |
| | Tooth extractions | Simple extractions | \$120-\$175 | | |
| MAJOR DENTAL | Oral surgery | Surgical extractions | \$210-\$330 | 12 months | Year 1 \$1,000 Year 2 \$1,150 Year 3+ \$1,300 |
| | | Occlusal therapy | \$38-\$400 | | |
| | Complex fillings | Indirect fillings | \$341-\$783 | | |
| | Periodontics | Treatment of tissue surrounding teeth | \$27-\$430 | | |
| | Endodontics | Treatment of root canals | \$32-\$285 | | |
| | Crowns and bridges | Placing of crowns and bridges | \$280-\$1,100 | | |
| | Dentures | Dentures and components (partial and complete) Limits renew every 3 years | \$33-\$1,300 | | |
| Orthodontics | Orthodontics - orthodontist/other dentist | Up to \$800 | \$800 (\$400 for other dentists) Lifetime limit \$2,400 or \$1,200 for other dentists | | |
| THERAPIES | Initial/subsequent | Physiotherapy (see Health Management Programs for groups and classes) | \$60/\$54 | 2 months (12 months for foot orthotics) | Year 1 \$600 Year 2 \$750 Year 3+ \$900 |
| | | Exercise physiology (see Health Management Programs for groups and classes) | \$40 | | Year 1 \$600 Year 2 \$750 Year 3+ \$900 |
| | | Occupational therapy | \$72 | | Year 1 \$300 Year 2 \$400 Year 3+ \$500 |
| | | Psychology (after Medicare entitlement exhausted) | \$100 | | Year 1 \$250 Year 2 \$300 Year 3+ \$500 (Orthotic sub-limit \$250) |
| | | Chiropractic | \$45/\$35 | | Year 1 \$300 Year 2 \$400 Year 3+ \$500 |
| | | Osteopathy | \$50/\$40 | | Year 1 \$250 Year 2 \$300 Year 3+ \$500 (Orthotic sub-limit \$250) |
| | | Dietetics | \$55 | | Year 1 \$300 Year 2 \$400 Year 3+ \$500 Sub-limit \$300 per therapy |
| | | Audiology | \$70 | | |
| | | Speech pathology | \$83 | | |
| | | Podiatry (including 1 pair of foot orthotics per person per year) | \$40/\$35 | | |
| | | Remedial massage and myotherapy | \$40/\$35 | | |
| Acupuncture and Chinese herbal medicine consultation | \$40/\$35 | | | | |
| OTHER | Travel and accommodation | 200km round trip for a consulting medical specialist and/or hospital admission | \$50 | 2 months | Max \$250 per policy |
| | HCF-approved pharmacy | After PBS equivalent co-payment subtracted | Up to \$50 per script | | \$280 |
| | HCF-approved vaccines and immunisations | After PBS equivalent co-payment subtracted | Up to \$50 per script | 12 months | Max \$200 per policy |
| | Artificial aids | HCF-approved (e.g. low vision aids, blood glucose monitors) | \$55-\$200 | | \$800-\$1,800 |
| | Hearing aids | Benefits accrue over time and renew every 3 years | Up to \$1,800 | 2 months | \$200 per person Max \$400 per policy |
| | Health Management Programs | HCF-approved e.g. exercise classes, group physiotherapy and group exercise physiology classes and weight management | Up to \$200 | 2-12 months | \$200 per eligible child |
| | School Accident Benefit | Helps pay out-of-pocket expenses for extras in your cover. See hcf.com.au/school-accident | Up to \$200 | 1 day | No annual limit |
| | Emergency ambulance (State govt. services) | NSW and ACT VIC, WA, NT, and SA | N/A N/A | | 1 per person Max 2 per policy |

TREATMENTS NOT COVERED BY THIS POLICY

| SERVICE CATEGORY | | DESCRIPTION |
|------------------|----------------------------|--|
| OTHER | Health Management Programs | HCF-approved antenatal/postnatal services - pregnancy compression garments and breastfeeding support services through the Australian Breastfeeding Association |

THINGS YOU NEED TO KNOW

The following waiting periods apply where these services are covered under your policy:

| EXTRAS WAITING PERIODS | |
|------------------------|--|
| 1 DAY | Emergency ambulance. |
| 12 MONTHS | Crowns, bridges, dentures, endodontics, occlusal therapy, surgical extractions, oral surgery, complex fillings, periodontics, prosthodontics, dental bleaching, veneers, orthodontics, artificial aids, foot orthotics and hearing aids. |
| 2 MONTHS | All other extras services. |

WHAT'S NOT COVERED?

There are a number of situations where our health insurance doesn't cover you, including for example:

- claims for services by providers not recognised by HCF, and that do not meet HCF's criteria as set out in the Fund Rules
- claims made 2 years or more after the date of service
- more than 1 therapy service performed by the same provider in any 1 day.

Please refer to the HCF Member Guide or Fund Rules for a comprehensive list of exclusions.

Note:

This product summary is not a complete description of your cover. Please refer to the HCF Member Guide or Fund Rules, or call **13 13 34** to check what you're covered for before receiving treatment.