

Value Extras Product Guide

Effective from 1 April 2019

Subject to change



Dental

Dental network

Get a minimum of 15% off the usual dental fee at our network dentists. Visit defencehealth.com.au/dental for locations. Usual fees apply at non-network providers.

General and preventive dental

2 Month waiting period **↑** Annual limit - \$ Unlimited*

Periodic oral exam (O12)	Up to \$40.60
Removal of calculus (114)	Up to \$73.80
Bitewing x-ray (O22)	Up to \$25.00
Adhesive filling to one surface of a rear tooth (531)	Up to \$82.20

Major dental

12 Month waiting period **↑** Annual limit - \$900 per person

Surgical tooth removal (323)	Up to \$146.20
Root canal obturation (417)	Up to \$114.80
Veneer indirect (556)	Up to \$490.40
Full crown - veneer indirect (615)	Up to \$760.20
Endosseous implant (688)	Up to \$900.00

Orthodontics

12 Month waiting period **↑** Annual limit - \$800 per person

Orthodontic treatment	Up to \$800.00
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Unlike other funds there is no lifetime limit. You get \$800 every financial year while you are receiving treatment. Benefits are payable on proof of payment for treatment received during the financial year.

You can get one free custom-fitted mouthguard, 100% covered each year, for kids.

*Some dental items are limited in the number of times they can be claimed in a year or appointment. Some are not payable in combination with others. And some may not attract a benefit at all. View the full dental schedule at defencehealth.com.au/dental-schedule

Ambulance treatment

2 Month waiting period **↑** Annual limit - \$ Unlimited

100% cover for ambulance services by state-appointed ambulance providers across Australia. This includes emergency services, non-emergency dispatch, mobile intensive care and air and sea ambulance services.

Patient transfer services and transport services by Patient Transport vehicles are not ambulance services and are not claimable.

Optical

2 Month waiting period **↑** Annual limit - \$255 per person

Optical network partners

Our optical network providers have extensive ranges of no-gap glasses. If selecting outside of the no-gap range, benefits are payable up to your annual limit. Visit specsavers.com.au or vsp-australia.com.au for locations.

	Specsavers	VSP Vision Care
Single vision glasses	2 pairs no-gap	1 pair no-gap
Bi/Multifocal glasses	1 pair no-gap	1 pair no-gap
Frames	Discounted	Discounted
Contacts (in store)	10% off	15% off

Benefits at non-network providers are limited: up to \$90 for single vision lenses, up to \$95 for ground single vision lenses, up to \$105 for bi-focal lenses, up to \$155 for multi-focal lenses, up to \$95 for frames and up to \$180 for contact lenses.

A sight-correcting script must accompany the claim. The no-gap glasses deals are based on standard lens options. Other lens choices are likely to involve an out-of-pocket cost. For the two pairs no-gap glasses deal, the second pair must be from the same or lower priced range and must be for the same prescription.

Alternative therapies

2 Month waiting period **↑** Annual limit - \$300 per person

Initial consultation	Up to \$31
Subsequent consultation	Up to \$27

Where the provider is recognised by the Australian Regional Health Group, benefits are payable on remedial massage, acupuncture and myotherapy. No benefit is payable on prescribed medications, herbal or dietary preparations.

School accidents

✓ No waiting period **↑** Annual limit - \$600 per person

Up to \$600 per person in additional benefits for costs resulting from a school accident to your child. To cover the gaps after your extras benefits have been provided, excludes Medicare services.



Flexi-limits

2 Month waiting period

Annual limit – \$1100 per person

Physiotherapy (including hydrotherapy)

Initial consultation	Up to \$55
Subsequent consultation	Up to \$42
Lymphoedema treatment	Up to \$84
Group therapy sessions and classes	Up to \$18

Chiropractic/Osteopathy

Initial consultation	Up to \$48
Subsequent consultation	Up to \$35
Chiropractic x-rays (max 2)	Up to \$45

Exercise physiology

Initial consultation	Up to \$32
Subsequent consultation	Up to \$26
Group therapy	Up to \$13

Antenatal and postnatal services

Antenatal course	Up to \$300
Antenatal consultations/classes	Up to \$30
Postnatal consultations/classes	Up to \$30

By a midwife or physiotherapist in private practice only.

Psychology

Initial consultation	Up to \$90
Subsequent consultation	Up to \$75
Group therapy	Up to \$30
Couple/family therapy	Up to \$38

Speech therapy

Initial consultation	Up to \$95
Subsequent consultation	Up to \$50
Group therapy	Up to \$35

Occupational therapy

Initial consultation	Up to \$75
Subsequent consultation	Up to \$45
Group therapy	Up to \$25

Podiatry/chiroprody

Initial consultation	Up to \$48
Subsequent consultation	Up to \$35

Audiology

Initial consultation	Up to \$72
Subsequent consultation	Up to \$50

Eye therapy

Initial consultation	Up to \$65
Subsequent consultation	Up to \$45

Dietitian

Initial consultation	Up to \$60
Subsequent consultation	Up to \$34

Pharmacy and vaccinations

Per prescription or vaccination	Up to \$100
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The benefit is payable on non-PBS pharmaceuticals only and applies to the cost in excess of the current PBS amount.

Health and wellbeing (in combination with hospital cover)

2 Month waiting period

Annual limit – \$100 per person

Benefits are available for approved health screening tests (bowel screening, kidney check, mole mapping, bone density tests, mammograms, heart tests and specialist eye tests), approved quit smoking programs and nicotine replacement therapies.

Available to members who have Value Extras cover in combination with hospital cover. Benefits will not be available for medicines/services where Medicare pays a benefit.

An itemised pharmacy receipt with the patient's name must be provided. View detail at defencehealth.com.au/wellbeing

Medically prescribed devices and appliances

2 - 12 Month waiting period Annual limit – \$1000 per person

12 month waiting period per person

** Replacement or additional items are not claimable within 3 years of previous purchase.*

Hearing aids* Up to \$1000

Blood glucose monitor* Up to \$400

Foot orthotics Up to \$250
Custom-made or fitted by specialist orthotic practitioner. Excludes over the counter orthotics.

Orthopaedic shoes Up to \$250
Custom-made by specialist shoemaker.

Splints and braces Up to \$250
Splints, knee/leg/spinal/lumbar/sacral/wrist/ankle braces and surgical corsets.

TENS machine* Up to \$250

Nebuliser* and spacer for breathing conditions Up to \$250

2 month waiting period per person

Non-sight correcting Irlen lenses Up to \$90

EpiPen Up to \$100

Appliance maintenance Up to \$100

For the repair of hearing aids and foot orthoses or for the purchase of appliance accessories.

Rental of appliances Up to \$150

Including oxygen cylinders, soft collars, toilet seat risers, shower chairs, Continuous Passive Movement machines or any other appliance listed above.



E Things you need to know about extras

Knowing your annual limits

All of the goods or services claimable under extras cover have annual per person limits.

Once the annual limit has been reached, no further benefits are payable in that year. Limits are re-set on 1 July each year. Benefit payments will resume for treatment received after the beginning of the next financial year.

Benefits and limits are subject to change.

You can easily monitor your available limits on our website, defencehealth.com.au/members

If you've reached your limits, consider whether a higher level of cover is right for you. We'd be happy to help, just give us a call.

Claiming extras benefits

Many health care providers (like dentists, optometrists and physiotherapists) can swipe your member card on-the-spot through an electronic terminal. The benefit payable is automatically credited to them and you then settle any outstanding amount. A list of providers who offer on-the-spot claiming is available on our website, defencehealth.com.au/extrasprovider

If your provider doesn't offer on-the-spot claiming you can claim using one of the following convenient options:

- The simplest process is to claim via your smartphone through our Mobile Claiming App
- For the fastest refund claim online through the secure area of our website, defencehealth.com.au/members
- Or download a claim form from our website, complete it and then:
 - Email it with your receipts to claims@defencehealth.com.au
 - Fax it and your receipts to 1800 241 581
 - Post it and your original accounts or receipts to us: Defence Health, PO Box 7518, Melbourne, Victoria, 3004

Please hold onto your receipts for 2 years.

Claiming conditions

The most common claiming conditions are:

- All services must be provided by an approved practitioner in private practice
- Claims must be lodged within 2 years of receiving the service
- Benefits are only payable on goods and services purchased in Australia. When purchasing online the supplier must be a registered Australian company
- Benefits are only payable where Medicare benefits are not payable
- Benefits are not payable when they can be claimed from another source such as workers compensation, Department of Veterans' Affairs or third party insurance
- Extras benefits are not payable where Medicare has been or is available to be claimed.

We recognise all extras providers who are registered with their professional body and in the case of approved alternative therapies, those recognised by the Australian Regional Health Group. Remedial massage providers must also hold at least a Diploma of Remedial Massage to be recognised.

If you are unsure whether a practitioner is registered with us, visit Find an Extras Provider on our website, defencehealth.com.au/extrasprovider, or just give us a call.

Full claiming conditions are available on our website, defencehealth.com.au/claim

Extras waiting periods

When you join Defence Health or upgrade your existing cover, you may have a waiting period before you can claim benefits. Treatment received during the waiting period cannot be claimed. The following waiting periods apply:

- 12 months for major dental and orthodontic treatment
- 12 months for most devices and appliances
- 2 months for all other services
- Cover for an accident is immediate, including ambulance service, where it is not claimable from another source such as workers compensation or third party insurance.

Remember, if you transfer from an equivalent level of cover with another health fund and have served your waiting periods, you won't have to serve a waiting period with us.

If you upgrade your cover in the future you will have to serve waiting periods on all services and benefits you are not currently covered for.



Our commitment to you

Our values

Our purpose is to support you, the members of the ADF and wider Defence community to manage your personal and family health care.



Trust

We will earn your trust by consistently delivering a personal experience for your needs. We are as good as our word – every time.



Excellence

Our people are proud to serve you. We will provide service and experience others won't, or can't. We actively seek ways to continuously improve our offer to you.



Ownership

We're part of the ADF family. We accept responsibility, act with initiative, and follow through. We won't let you down.



Respect

We are friendly people, here to help you make good choices. We listen with intent and offer clear explanations, to provide you with peace of mind and support.



Community

We're here for people, not profit. We are committed to making a positive difference to the health and wellbeing of the Defence community.

We value your feedback

Compliments or complaints can be made by phone on 1800 335 425 or to info@defencehealth.com.au

If we are unable to satisfy you, you can contact the Commonwealth Ombudsman on 1300 362 072 or at phio.info@ombudsman.gov.au. The Ombudsman provides free information and assistance to resolve disputes.

You can view more information at www.ombudsman.gov.au/making-a-complaint/contact-us

Defence Health Fund Rules

Your cover will be provided and benefits paid in accordance with the Fund Rules of Defence Health Limited. You can download a copy of the latest Fund Rules from defencehealth.com.au/fund-rules or call us and we'll send you one.

This Product Guide is current as at 1 April 2019, and is subject to change.

It should be read carefully and retained.

Defence Health Limited - ABN 80 008 629 481 AFSL 313890

Your privacy is important to us

Defence Health has a legal obligation to comply with the Commonwealth *Privacy Act 1988* and the Australian Privacy Principles. The Defence Health privacy statement informs you about how your personal information will be collected, held, used and disclosed, how you may gain access and seek correction of that information, and how you may complain about possible breaches of privacy. A copy of the full Privacy Policy is available at defencehealth.com.au/privacy. We will always endeavour to collect your personal information directly from you, but in some circumstances, for instance where you are a dependant on the policy, we will collect your personal information from the policy holder.

We will generally collect and use your information to approve your transactions/claims, to provide services you have requested and to inform you of products, benefits and services we think may be of interest to you.

We may use or disclose your personal information for another purpose, but only if we have your prior consent, or we are required to do so to fulfil our obligations as a private health insurer, or for any other reasonably expected purpose related to the provision of your health benefits. For example, we may disclose your information to other service providers we have arrangements with or who provide services to us, or where otherwise permitted or required by law.

Policy holders will have access to certain personal information about dependants on the policy. Policy holders have an obligation to make dependants aged 16 years and over aware that they may contact us if they do not wish us to share their personal information with the policy holder or others on the policy.

If you do not provide the information requested or do not consent to us requesting it from third parties, we may be unable to provide our health benefit services or discounts to you.

Our full Privacy Policy is available at defencehealth.com.au/privacy or you can call us on 1800 335 425 for a copy.

Code of conduct

We are committed to the Private Health Insurance Code of Conduct.

You can download a copy of the code at defencehealth.com.au



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Defence
Health



Dental

Dental network

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General and preventive dental

2 Month waiting period Annual limit - \$900 per person

Periodic oral exam (O12)	Up to \$40.60
Removal of calculus (114)	Up to \$73.80
Bitewing x-ray (O22)	Up to \$25.00
Adhesive filling to one surface of a rear tooth (531)	Up to \$82.20

Major dental

12 Month waiting period Annual limit - \$900 per person

Surgical tooth removal (323)	Up to \$146.20
Root canal obturation (417)	Up to \$114.80
Veneer indirect (556)	Up to \$490.40
Full crown - veneer indirect (615)	Up to \$760.20
Endosseous implant (688)	Up to \$900.00

Orthodontics

12 Month waiting period Annual limit - \$800 per person

Orthodontic treatment	Up to \$800.00
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Unlike other funds there is no lifetime limit. You get \$800 every financial year while you are receiving treatment. Benefits are payable on proof of payment for treatment received during the financial year.

You can get one free custom-fitted mouthguard, 100% covered each year, for kids.

Some dental items are limited in the number of times they can be claimed in a year or appointment. Some are not payable in combination with others. And some may not attract a benefit at all. View the full dental schedule at defencehealth.com.au/dental-schedule

Ambulance treatment

2 Month waiting period Annual limit - \$ Unlimited

100% cover for ambulance services by state-appointed ambulance providers across Australia. This includes emergency services, non-emergency dispatch, mobile intensive care and air and sea ambulance services.

Patient transfer services and transport services by Patient Transport vehicles are not ambulance services and are not claimable.

School accidents

No waiting period Annual limit - \$600 per person

Up to \$600 per person in additional benefits for costs resulting from a school accident to your child. To cover the gaps after your extras benefits have been provided, excludes Medicare services.

Optical

2 Month waiting period Annual limit - \$255 per person

Optical network partners

Our optical network providers have extensive ranges of no-gap glasses. If selecting outside of the no-gap range, benefits are payable up to your annual limit. Visit specsavers.com.au or vsp-australia.com.au for locations.

	Specsavers	VSP Vision Care
Single vision glasses	2 pairs no-gap	1 pair no-gap
Bi/Multifocal glasses	1 pair no-gap	1 pair no-gap
Frames	Discounted	Discounted
Contacts (in store)	10% off	15% off

Benefits at non-network providers are limited: up to \$90 for single vision lenses, up to \$95 for ground single vision lenses, up to \$105 for bi-focal lenses, up to \$155 for multi-focal lenses, up to \$95 for frames and up to \$180 for contact lenses.

A sight-correcting script must accompany the claim. The no-gap glasses deals are based on standard lens options. Other lens choices are likely to involve an out-of-pocket cost. For the two pairs no-gap glasses deal, the second pair must be from the same or lower priced range and must be for the same prescription.

Health and wellbeing

2 Month waiting period Annual limit - \$300 per person

Remedial massage, acupuncture and myotherapy

Initial consultation	Up to \$31
Subsequent consultation	Up to \$27

Where the provider is recognised by the Australian Regional Health Group, benefits are payable on remedial massage, acupuncture and myotherapy. No benefit is payable on prescribed medications, herbal or dietary preparations.

Physiotherapy

Group therapy sessions and classes	Up to \$18
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Exercise physiology

Group therapy	Up to \$13
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Tests and programs

Benefits are available for approved health screening tests (bowel screening, kidney check, mole mapping, bone density tests, mammograms, heart tests and specialist eye tests), approved quit smoking programs and nicotine replacement therapies.

Benefits will not be available for medicines/services where Medicare pays a benefit. An itemised pharmacy receipt with the patient's name must be provided. View detail at defencehealth.com.au/wellbeing

**Flexi-limits**

2 Month waiting period  Annual limit – \$900 per person

Physiotherapy (including hydrotherapy)

Initial consultation	Up to \$55
Subsequent consultation	Up to \$42
Lymphoedema treatment	Up to \$84

Chiropractic/Osteopathy

Initial consultation	Up to \$48
Subsequent consultation	Up to \$35
Chiropractic x-rays (max 2)	Up to \$45

Exercise physiology

Initial consultation	Up to \$32
Subsequent consultation	Up to \$26

Antenatal and postnatal services

Antenatal course	Up to \$300
Antenatal consultations/classes	Up to \$30
Postnatal consultations/classes	Up to \$30

By a midwife or physiotherapist in private practice only.

Psychology

Initial consultation	Up to \$90
Subsequent consultation	Up to \$75
Group therapy	Up to \$30
Couple/family therapy	Up to \$38

Speech therapy

Initial consultation	Up to \$95
Subsequent consultation	Up to \$50
Group therapy	Up to \$35

Occupational therapy

Initial consultation	Up to \$75
Subsequent consultation	Up to \$45
Group therapy	Up to \$25

Podiatry/chiroprody

Initial consultation	Up to \$48
Subsequent consultation	Up to \$35

Audiology

Initial consultation	Up to \$72
Subsequent consultation	Up to \$50

Eye therapy

Initial consultation	Up to \$65
Subsequent consultation	Up to \$45

Dietitian

Initial consultation	Up to \$60
Subsequent consultation	Up to \$34

Pharmacy and vaccinations

Per prescription or vaccination	Up to \$100
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The benefit is payable on non-PBS pharmaceuticals only and applies to the cost in excess of the current PBS amount.

Medically prescribed devices and appliances

2 – **12** Month waiting period  Annual limit – \$1000 per person

12 month waiting period per person

** Replacement or additional items are not claimable within 3 years of previous purchase.*

Hearing aids*	Up to \$1000
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Blood glucose monitor*	Up to \$400
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Orthopaedic shoes <i>Custom-made by specialist shoemaker.</i>	Up to \$250
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TENS machine*	Up to \$250
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Nebuliser* and spacer for breathing conditions	Up to \$250
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2 month waiting period per person

Non-sight correcting Irlen lenses	Up to \$90
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EpiPen	Up to \$100
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Appliance maintenance	Up to \$100
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For the repair of hearing aids and foot orthoses or for the purchase of appliance accessories.

Rental of appliances	Up to \$150
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Including oxygen cylinders, soft collars, toilet seat risers, shower chairs, Continuous Passive Movement machines or any other appliance listed above.



E Things you need to know about extras

Knowing your annual limits

All of the goods or services claimable under extras cover have annual per person limits.

Once the annual limit has been reached, no further benefits are payable in that year. Limits are re-set on 1 July each year. Benefit payments will resume for treatment received after the beginning of the next financial year.

Benefits and limits are subject to change.

You can easily monitor your available limits on our website, defencehealth.com.au/members

If you've reached your limits, consider whether a higher level of cover is right for you. We'd be happy to help, just give us a call.

Claiming extras benefits

Many health care providers (like dentists, optometrists and physiotherapists) can swipe your member card on-the-spot through an electronic terminal. The benefit payable is automatically credited to them and you then settle any outstanding amount. A list of providers who offer on-the-spot claiming is available on our website, defencehealth.com.au/extrasprovider

If your provider doesn't offer on-the-spot claiming you can claim using one of the following convenient options:

- The simplest process is to claim via your smartphone through our Mobile Claiming App
- For the fastest refund claim online through the secure area of our website, defencehealth.com.au/members
- Or download a claim form from our website, complete it and then:
 - Email it with your receipts to claims@defencehealth.com.au
 - Fax it and your receipts to 1800 241 581
 - Post it and your original accounts or receipts to us: Defence Health, PO Box 7518, Melbourne, Victoria, 3004

Please hold onto your receipts for 2 years.

Claiming conditions

The most common claiming conditions are:

- All services must be provided by an approved practitioner in private practice
- Claims must be lodged within 2 years of receiving the service
- Benefits are only payable on goods and services purchased in Australia. When purchasing online the supplier must be a registered Australian company
- Benefits are only payable where Medicare benefits are not payable
- Benefits are not payable when they can be claimed from another source such as workers compensation, Department of Veterans' Affairs or third party insurance
- Extras benefits are not payable where Medicare has been or is available to be claimed.

We recognise all extras providers who are registered with their professional body and in the case of approved alternative therapies, those recognised by the Australian Regional Health Group. Remedial massage providers must also hold at least a Diploma of Remedial Massage to be recognised.

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Extras waiting periods

When you join Defence Health or upgrade your existing cover, you may have a waiting period before you can claim benefits. Treatment received during the waiting period cannot be claimed. The following waiting periods apply:

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- 12 months for most devices and appliances
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- Cover for an accident is immediate, including ambulance service, where it is not claimable from another source such as workers compensation or third party insurance.

Remember, if you transfer from an equivalent level of cover with another health fund and have served your waiting periods, you won't have to serve a waiting period with us.

If you upgrade your cover in the future you will have to serve waiting periods on all services and benefits you are not currently covered for.



Our commitment to you

Our values

Our purpose is to support you, the members of the ADF and wider Defence community to manage your personal and family health care.



Trust

We will earn your trust by consistently delivering a personal experience for your needs. We are as good as our word – every time.



Excellence

Our people are proud to serve you. We will provide service and experience others won't, or can't. We actively seek ways to continuously improve our offer to you.



Ownership

We're part of the ADF family. We accept responsibility, act with initiative, and follow through. We won't let you down.



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We are friendly people, here to help you make good choices. We listen with intent and offer clear explanations, to provide you with peace of mind and support.



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We will generally collect and use your information to approve your transactions/claims, to provide services you have requested and to inform you of products, benefits and services we think may be of interest to you.

We may use or disclose your personal information for another purpose, but only if we have your prior consent, or we are required to do so to fulfil our obligations as a private health insurer, or for any other reasonably expected purpose related to the provision of your health benefits. For example, we may disclose your information to other service providers we have arrangements with or who provide services to us, or where otherwise permitted or required by law.

Policy holders will have access to certain personal information about dependants on the policy. Policy holders have an obligation to make dependants aged 16 years and over aware that they may contact us if they do not wish us to share their personal information with the policy holder or others on the policy.

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