



A higher level of extras cover for those who want broader support for their wellbeing

Annual limits apply from 1 July.

Please read your product guide before having treatment or call us if you have any questions about out-of-pocket expenses.

Treatments covered by this policy

Dental network

At participating network dentists receive no-gap benefits on selected preventive dental services, such as scale and clean, fluoride treatment and bitewing x-rays – Subject to annual limits and limited to one no-gap claim per person each financial year. Visit defencehealth.com.au for more information.

Optical network

Our optical network providers have extensive ranges of no-gap glasses and 100% back on eligible items available up to your annual limit. Plus, receive discounts on in-store contact lenses and other optical add-ons. Visit defencehealth.com.au for more information.

Service Category	Description	Indicative Benefit Amount	Waiting Period	Annual Limit (per person)
General and preventive dental	Periodic oral exam (012)	up to \$37.60	2 months	Unlimited
	Removal of calculus (114)	up to \$70.80		
	Bitewing x-ray (022)	up to \$23.30		
	Fluoride (121)	up to \$20.60		
	Adhesive filling to one surface of a rear tooth (531) <i>Get one custom-fitted mouthguard (items 151 and 153 only) 100% covered each financial year up to annual limits</i>	up to \$84		
Major dental	Surgical tooth removal (324)	up to \$166.80	12 months	\$700
	Root canal obturation (417)	up to \$117.40		
	Veneer indirect (556)	up to \$515.60		
	Full crown - veneer indirect (615)	up to \$700		
	Endosseous implant (688)	up to \$700		
Orthodontics	Orthodontic treatment <i>There is no lifetime limit on orthodontic treatment. Benefits are payable on proof of payment for treatment during the financial year</i>	up to \$700	12 months	\$700
Optical	Single vision lenses Ground single vision lenses Bi-focal lenses Multi-focal lenses Frames/repairs Contact lenses <i>All optical claims must include a sight correcting script.</i>	100% back up to annual limit	2 months	\$225
Physiotherapy/ Exercise physiology	Physiotherapy - initial/ subsequent	up to \$97/ \$79	2 months	\$450
	Group physiotherapy - sessions/ classes	up to \$29		
	Exercise physiology - initial/ subsequent	up to \$77/ \$54		
	Group exercise physiology - sessions/ classes	up to \$18		
Chiropractic/ Osteopathy	Chiropractic - initial/ subsequent	up to \$66/ \$43	2 months	\$400
	Chiropractic x-rays <i>(max. 2 per financial year)</i>	up to \$76		
	Osteopathy - initial/ subsequent	up to \$80/ \$65		
Health and wellbeing	Remedial massage - initial/ subsequent	up to \$60/ \$52	2 months	\$250
	Acupuncture - initial/ subsequent	up to \$76/ \$62		
	Myotherapy - initial/ subsequent	up to \$68/ \$58		
Ambulance treatment	Cover for ambulance services by state-appointed ambulance providers across Australia. This includes emergency transport, on the spot treatment, mobile intensive care, air and sea ambulance. <i>Transport services between hospitals, repatriation to or from a state for non-clinically necessary reasons, or services by patient transport vehicles are not claimable.</i>		2 months	Unlimited

Service Category	Description	Indicative Benefit Amount	Waiting Period	Annual Limit (per person)
Mental health support	Psychology - initial/ subsequent Group therapy Couple/ family therapy <i>Hypnotherapy where service is provided by a Defence Health recognised psychologist.</i> <i>Benefits are payable for consultations with registered Psychologists and Mental Health Social Workers in private practice. Psychology services claimable through Medicare are not eligible for benefits.</i>	up to \$222/ \$165 up to \$118 up to \$118	2 months	\$300
	Counselling - consultations Group therapy Couple/ family therapy <i>Benefits are payable for consultations with registered Counsellors in private practice. Counselling services claimable through Medicare are not eligible for benefits.</i>	up to \$165 up to \$118 up to \$118		
	Online Cognitive Behavioural Therapy (Online CBT) courses <i>Online CBT is a structured therapy program delivered through secure online platforms, such as mobile apps, video or web-based programs. It can help manage concerns such as stress, anxiety, relationship concerns and ongoing pain. Benefits are payable for Defence Health-approved and recognised programs once completed, with a paid invoice and certificate of completion.</i>	up to \$50		
Pharmacy and vaccinations	Per prescription or vaccination <i>The benefit is payable on non-PBS pharmaceuticals only. It is paid on the gap between the current PBS amount and the actual charge. No benefits are payable for over-the-counter medicines. Excludes vitamins, supplements and minerals. Benefits are not payable for nicotine e-cigarettes or nicotine vaping products.</i>	up to \$60	2 months	\$150
Health management	Antenatal and postnatal services Full day antenatal course Antenatal consultations/classes Postnatal consultations/classes <i>By a recognised midwife or physiotherapist in private practice only.</i>	up to \$200 up to \$40 up to \$40	2 months	\$400
	Audiology - initial/ subsequent	up to \$145/ \$115		
	Dietetics - initial/ subsequent	up to \$105/ \$68		
	Eye therapy - initial/ subsequent	up to \$118/ \$112		
	Occupational therapy - initial/ subsequent Group therapy	up to \$103/ \$81 up to \$62		
	Speech therapy - initial/ subsequent Group therapy	up to \$155/ \$91 up to \$55		
Hearing aids	Hearing aids* <i>*Replacement or additional items are not claimable within 3 years of previous purchase</i>	up to \$1000	12 months	\$1,000
Podiatry	Initial/ subsequent Foot orthotics Orthopedic shoes	up to \$68/ \$55 up to \$100 up to \$200	2 months	\$250
Private Hospital Emergency Department	If you attend a Private Hospital emergency or accident department, you can claim up to \$100 per attendance, per person each year towards the attendance or facility fees charged by the Private Hospital. <i>Benefits are not payable for attendances or charges where a Medicare benefit is payable, such as medical, radiology or pathology services, as result out of pocket expenses may still apply. To receive the benefit a claim must be submitted with a paid invoice outlining the attendance, administration or facility fee charged.</i>	up to \$100	2 months	\$100

Service Category	Description	Indicative Benefit Amount	Waiting Period	Annual Limit (per person)
Medically prescribed devices, appliances and programs	Blood glucose monitor	up to \$50	12 months	\$300
	Blood pressure monitor	up to \$50		
	TENS machine	up to \$80		
	Compression garments* <i>*Must be TGA approved and specifically made to treat, manage or prevent a medical condition such as treatment of burns, post-surgical recovery, treatment for lymphoedema or prevention of deep vein thrombosis are common examples when a compression garment could be suitable. Claims must include a letter from the treating practitioner indicating recommended garment and condition being treated.</i>	up to \$60		
	Programs Nicotine replacement therapies Approved quit smoking programs <i>Benefits are available for approved quit smoking programs and nicotine replacement therapies. Benefits are not available for programs where Medicare pays a benefit. An itemised invoice with the patient's name must be provided.</i>	up to \$45 up to \$20	2 months	

Annual limits

All of the goods and services claimable under extras cover have per person limits. Once the limit has been reached on a service, no further benefits are payable in that financial year. Most limits re-set on 1 July each year. Benefits, limits and payment conditions are assessed according to the date of service.

Benefits and limits are subject to change.

Check your available limits by logging onto your Member Portal, at defencehealth.com.au

Extras waiting periods

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

Cover for an accident is immediate, including for ambulance services.

Remember, if you transfer within 60 days from an equivalent level of cover with another health fund you won't have to re-serve the waiting periods you've already completed. If you have a break in cover greater than 60 days you will have to re-serve all waiting periods.

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 two years of receiving the service

Benefits are only payable on goods and services purchased in Australia. When purchasing eligible items online, the supplier must be recognised and a registered Australian provider or company

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 and counsellors, those recognised by the Australian Regional Health Group.

If you are unsure whether a practitioner is registered with us, just give us a call on 1800 335 425.

Full claiming conditions are available on our website at defencehealth.com.au

Dental claim frequency

Some dental items have claim frequency limits, including the number of times they can be claimed during an appointment, in a year, or across a number of years. Some are not payable in combination with others. And some may not attract a benefit at all. Check your available limits by logging onto your Member Portal, at defencehealth.com.au

Claiming extras benefits

Many health care providers (like dentists, optometrists and physiotherapists) can swipe your member card on-the-spot through an electronic terminal. Your benefit is paid to the provider 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

If your provider does not offer on-the-spot claiming, you can:

Claim through your Member Portal (for most services) at defencehealth.com.au

Claim on your smartphone through our Mobile Claiming App

Download and complete a claim form from our website and either:

- email it with your receipts to claims@defencehealth.com.au
- post it and a copy of the account to us: Defence Health, PO Box 7518, Melbourne, Victoria, 3004

Please hold onto your receipts for two years.

Your privacy is important to us

Defence Health collects your personal information – including sensitive information about your health – to provide services to you.

Our full Privacy Policy is available at defencehealth.com.au or you can call us on 1800 335 425 for a copy. It explains how we handle your personal information, how you can access or correct that information, how to make a privacy complaint and how we will deal with it, and how to opt-out of direct marketing from 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 or email info@defencehealth.com.au and we'll send you one.

Code of Conduct

We are committed to the Private Health Insurance Code of Conduct. You can download a copy of the code at [Private Health Insurance Code of Conduct](https://privatehealthinsurance.com.au).



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 visit www.ombudsman.gov.au.

For general information about private health insurance, see www.privatehealth.gov.au.

We're here to help



For more information visit defencehealth.com.au or call us on 1800 335 425.