

MID RANGE EXTRAS

EFFECTIVE 1 JANUARY 2021

Please read this product guide in conjunction with information on our website and the Important Information Guide.

Take charge of your overall health and well-being with this mid-range extras cover. You can access benefits for dental, optical, massage therapy, Health Management programs, and more.

EXTRAS COVER

Limits are per person, per calendar year, unless otherwise stated. Benefits are only payable up to the annual limit.

SERVICES	Waiting periods (months)	BENEFIT	ANNUAL LIMIT
Dental			
General	2		\$600
Preventive dental		Set dental benefits depend on item number	
General dental			
Major	12		\$1,000 overall
Crowns, bridges and dental implants		Set dental benefits depend on item number	\$580+
Dentures			\$550+
Endodontia			\$300
Orthodontia		100%	\$550
Anti-snore device			\$300
Optical	6	Set benefits apply	\$220
Frames only		\$130	
Complete set of glasses		\$220	
Single vision lenses		\$106	
Bi-focal lenses		\$105	
Tri-focal lenses		\$90	
Graduated/progressive lenses		\$120	
Repairs to frames		\$50	
Contact lenses—hard/soft toric		\$145	
Contact lenses—hard/soft spherical		\$105	
Disposable contact lenses (single/pair)		\$24/\$47	
Alternative therapies	2		\$400 overall
Acupuncture (initial/subsequent)		\$32/\$27	\$350
Massage therapy		\$35	\$350/person \$700/membership
Myotherapy		\$35	
Osteopathy			\$300
Initial/subsequent consultations		\$31/\$26	
X-rays (one per year)		\$50	

Dental items are as defined by the Australian Dental Association (ADA) schedule and at our discretion. Contact us when you have obtained an itemised treatment plan from your dentist for information on actual benefits payable.

The surgical removal of teeth (including wisdom teeth) is included in general dental.

The lifetime limit for orthodontia with Mid Range Extras is \$1,650. See the Important Information Guide for more details.

Replacement every 3 years from date of previous supply.

No benefit for additional lens treatments (eg. tinting/hardcoating/transitional).

Provider must be registered with the Australian Regional Health Group.

THINGS TO LOOK OUT FOR

Initial consultation
Limit of one per year.









Per person/membership

An individual within a family, single parent, or couple cover can claim up to the per person limit, provided the membership limit has not been exceeded.

Limits increase

The plus icon indicates where limits increase with years of membership. See page 3 for details.



SERVICES (CONT.)	Waiting periods (months)	BENEFIT	ANNUAL LIMIT
Physiotherapy	2		\$600 overall
Initial/subsequent consultations 		\$40/\$35	
Exercise physiology 		\$25	\$100
Group physiotherapy/exercise physiology (includes hydrotherapy)		\$17	\$150
Antenatal/postnatal		\$17	\$110
Chiropractic	2		\$300
Initial/subsequent consultations		\$32/\$26	
X-rays (one per year)		\$50	
Other therapies	2		\$350 overall
Dietetics (initial/subsequent) 		\$31/\$17	\$150
Podiatry (initial/subsequent)		\$34/\$28	\$250
Occupational therapy			\$150
Initial/subsequent consultations 		\$35/\$27	
Group consultations 		\$17.50	
Psychology (incl. hypnotherapy)	2		\$250
Initial/subsequent consultations 		\$70/\$55	
Group consultations (psychology only) 		\$30	
Speech therapy 			\$150
Initial/subsequent consultations		\$50/\$25	
Family/group consultations		\$12	
Other			
Health management (see next page)	2	80%	\$200/single \$400/family
Pharmaceuticals (approved only)	2	\$50	\$400
Ambulance emergency transport	1 day	Refer to the Important Information Guide	

Provided by a physiotherapist/exercise physiologist as part of a treatment plan.

Benefits not payable for orthotics and podiatric surgery.

Benefit only paid for a registered psychologist. No benefit paid for counsellors.

Only claimable when you hold both hospital and extras cover (excl. Qld residents).

 Telehealth options available. See Important Information Guide for conditions and how to claim.

INCREASING ANNUAL LIMITS

Limits are per person, per calendar year, unless otherwise stated.

SERVICES	LIMITS			
	1-2	3-4	5-6	7+
Years of membership				
Crowns and bridges	\$580		\$680	
Dentures	\$550	\$600	\$650	\$700

HEALTH MANAGEMENT

Please contact us for details of approved programs. Due to legislation, benefits are only payable if not claimable through Medicare.

SERVICES	BENEFIT	ANNUAL LIMIT
Health management		\$200/single \$400/family
Health screenings Mammogram, pap smear (Thin Prep), ambulatory blood pressure monitoring, bone density screening, coronary CT, MRI, health checks (heart health checks and medical tests prior to fitness training programs), foetal screenings	80%	\$90/person
Health management programs Nicotine replacement products (where not covered under the PBS), illness related association memberships, health education classes, lithotripsy, medical alert bracelets/subscriptions	80%	\$110/person
Healthy lifestyle programs Weight loss, exercise and health programs as recommended by your practitioner	80%	\$120/person
Antenatal/postnatal classes Childbirth education class, when conducted by a doctor, hospital, or midwife (one per membership)	80%	\$160/membership

Per single/family cover

An individual on a single cover can only claim up to the single limit, whereas persons under a family, single parent, or couple cover can claim up to the family limit.

Highlighted items

These services are to assist people in the management of their chronic health condition. We will only pay a benefit for these items when there is a health management plan recommended or provided by your health provider.

You can apply by submitting a Health Management Program Approval form (completed by your health provider prior to commencing a program/service), along with valid receipts. Please visit our website or contact us for the form. Benefits are only payable when not claimable through another benefit category.

Visit unionhealth.com.au or contact us on 1300 661 283 for more information about products and services, government initiatives, our privacy policy, the complaints process, and fund rules.

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