

Cover Summary

Special Extras.

Here's a summary of the services and treatments we pay benefits towards under 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 132 331.





Extras cover.

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


Through our Members' Choice network, you'll generally get better value for money with capped rates and a percentage back on what you're charged. With a non-Members' Choice provider, you'll generally get back a Fixed Amount for that service regardless of the provider's charge. As long as the provider is a Medibank recognised provider, benefits are payable for services or items included under your cover.


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.

Service category	Example items and services	Waiting period	Amount you can claim		Annual limit per member
			Members' Choice provider	Non-Members' Choice provider	
Ambulance services*	For eligible services where immediate professional attention is required	1 day	100%		No annual limit
General dental* Every member gets 100% back on up to two check-ups each year at a Members' Choice Advantage dentist (includes bitewing x-rays where required). And this doesn't count towards annual limits [†]	Preventative treatment	2 months	60%	Fixed Amount	No annual limit
	Dental examinations				
	Scale and clean				
	Major restorative fillings (e.g. veneers)	12 months			
	Surgical dental procedures (excluding hospital charges)				
Major dental*	Dentures, crowns, bridges & dental implants	12 months	60%	Fixed Amount	\$750
	Periodontics (e.g. treatment of gum disease)	2 months			
Orthodontics*	Braces	12 months	100%		\$350 per year, \$1800 lifetime limit
Optical items	Frames	6 months	100%		\$170
	Prescription lenses				
	Contact lenses				
Non-PBS Pharmaceuticals	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	Fixed Amount		\$300

Service category	Example items and services	Waiting period	Amount you can claim		Annual limit per member
			Members' Choice provider	Non-Members' Choice provider	
Physiotherapy 	Consultations	2 months	60%	Fixed Amount	\$400
	Hydrotherapy sessions				
	Clinical pilates				
Chiropractic 	Consultations	2 months	60%	Fixed Amount	\$250 combined limit
Osteopathy					
Podiatry 	Consultations	2 months	60%	Fixed Amount	\$200
	For approved orthotics 		100%		
Occupational therapy	Consultations only	2 months	Fixed Amount		\$200
Speech therapy	Consultations only				\$200
Eye therapy	Consultations only				\$200
Mental health support	Consultations for psychology and counselling	None	Fixed Amount		\$200

 Benefit replacement periods apply.

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

 Members' Choice providers are available for these services only.

[^] For ambulance attendance or transportation to a hospital where immediate professional attention is required and your medical condition is such that you couldn't be transported any other way. TAS and QLD have State schemes to cover ambulance services for residents of those States.

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

[‡] 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.

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.

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.

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.

Lifetime limit.

This is a once-only limit that isn't reset each year. When you reach this limit, you can no longer claim that benefit again, even if you change your 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.

Benefit Replacement Periods are separate to waiting periods.

Service category	Items	Benefit Replacement Period
Major dental	Dentures, crowns, bridges & dental implants	36 months

Additional limitations such as service restrictions (clinical reasonability rules) may apply to some individual dental items and services.

Limits also apply to how often you can claim on some extras services. For example, you can only claim on one mouthguard per person, per calendar year.

Please contact us on **132 331** before your treatment.

Helping you live better.

Use Members' Choice Extras providers.

For some (but not all) services, Medibank has entered into arrangements with providers - these providers are known as Members' Choice 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 Extras providers are part of our Members' Choice Network and you may enjoy even better value when you receive eligible extras services at these providers.

It's important to be aware that Medibank's Members' Choice and Members' Choice Advantage Extras providers are not available for all services, 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

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 to check what services are available through telehealth.

Health support that never sleeps.

Medibank health insurance members can talk to a registered nurse or mental health professional at no extra cost[#]. Chat over the phone or online with 24/7 Medibank Nurse and 24/7 Mental Health Support. Call **1800 644 325** or chat online for support any time of the day or night.

Manage your account online with My Medibank.

Update your details, check what your cover includes, make a payment and much more. My Medibank lets you manage your health cover wherever and whenever it suits you.

Best of all, it only takes two minutes to sign up for My Medibank, at 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

Live Better, get rewarded.

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

[#] Some referred services may involve out of pocket costs and waiting periods may apply.

[®] 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

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