

High Extras Over 50s Policy Summary



Welcome to Feel Good Cover.

Health insurance that doesn't just do its job, but adds an extra level of care.

Why Westfund?



We help people make sense of health care



We provide quality products with a proven track record



We're a not-for-profit that helps you get the most from your cover



We're proudly Australian owned and operated

This Extras Cover includes:

- ✓ No out-of-pocket costs for selected preventative dental services at any Westfund or Provider of Choice dentist.[#]
- ✓ Extended* and Disability Dependant[^] cover options available.
- ✓ No gap glasses and an extra member benefit for prescription glasses and contacts purchased at a Westfund Eye Care Centre.[#]
- ✓ Unlimited emergency ambulance cover and \$5,000 per member for non-emergency ambulance trips.
- ✓ Cover for our full range of services including dental, optical, physio, chiro and other therapies.
- ✓ Benefits for extras that help you manage your health, like gym memberships, vitamins and preventative health checks.

Who should love this cover

High-level Extras health insurance designed for mature singles and couples. Provides generous per-person limits on optical, dental, physio, chiro and a range of other therapies. Plus, benefits to help you manage your health, like gym memberships, vitamins, pharmaceuticals, preventative health checks and health aids including orthotics, blood glucose monitors, sleep apnoea devices and hearing aids.



* Dependants up to 31 stay covered if unmarried or not in a bona fide domestic relationship.

[^] A dependant with a disability is a person who is over the age of 31 and participates in the National Disability Insurance Scheme (NDIS) and holds an active NDIS plan.

[#] Annual limits and waiting periods apply.

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Please read this policy summary carefully and retain. For more policy information, definitions and claiming requirements please refer to Westfund's Membership Terms & Conditions which can be downloaded at www.westfund.com.au/terms-conditions or by calling Westfund on 1300 937 838. Our Privacy Policy and Complaints Resolution Policy as well as information about the Code of Conduct and Commonwealth Ombudsman are also included in our Membership Terms & Conditions.

Find a registered provider from our Provider of Choice Network or use your own provider after reviewing our provider recognition criteria at www.westfund.com.au/find-a-provider/

Treatments covered by this policy

Service	Waiting Period	Item Limit	Annual Group Limit	Additional Information																				
General Dental Treatments include: Diagnostic & Preventive Fillings Extractions	2 months	Set item benefits depending on item number. Benefits for some of the common General Dental Services are: <table border="1"> <thead> <tr> <th>Service & Item Number</th> <th>Provider of Choice</th> <th>General Dentist</th> </tr> </thead> <tbody> <tr> <td>Periodic Oral Exam 012</td> <td rowspan="6">Benefits fully cover the cost of these services</td> <td>\$31.50</td> </tr> <tr> <td>X-ray 022</td> <td>\$22.50</td> </tr> <tr> <td>Scale & Clean 114</td> <td>\$69.00</td> </tr> <tr> <td>Fluoride Treatment 121</td> <td>\$22.00</td> </tr> <tr> <td>Mouthguard 151</td> <td>\$94.00</td> </tr> <tr> <td>Surgical Tooth Extraction 322</td> <td>\$145.00</td> <td>\$145.00</td> </tr> <tr> <td>Filling 533</td> <td>\$107.50</td> <td>\$107.50</td> </tr> </tbody> </table>	Service & Item Number	Provider of Choice	General Dentist	Periodic Oral Exam 012	Benefits fully cover the cost of these services	\$31.50	X-ray 022	\$22.50	Scale & Clean 114	\$69.00	Fluoride Treatment 121	\$22.00	Mouthguard 151	\$94.00	Surgical Tooth Extraction 322	\$145.00	\$145.00	Filling 533	\$107.50	\$107.50	\$1600 per member combined limit for General and Major Dental	Service limits per member per calendar year may apply. Some common limits include: 151- 1 service; 012- 2 services; 114, 121- 4 services; 022- 4 services per day, up to 8 services.
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Major Dental Treatments include: Periodontics Oral Surgery Endodontics Veneers, Crowns Bridges, Implants Dentures Maxillofacial Prosthetics	12 months	Set item benefits depending on item number. Benefits for some of the common Major Dental Services are: <table border="1"> <thead> <tr> <th>Service & Item Number</th> <th>Benefit</th> </tr> </thead> <tbody> <tr> <td>Frenectomy 391</td> <td>\$173.00</td> </tr> <tr> <td>Root canal treatment - one canal 417</td> <td>\$140.00</td> </tr> <tr> <td>Full crown - veneered 615</td> <td>\$850.00</td> </tr> <tr> <td>Bridge pontic - per pontic 643</td> <td>\$437.00</td> </tr> <tr> <td>Complete upper & lower dentures 719</td> <td>\$977.00</td> </tr> </tbody> </table>	Service & Item Number	Benefit	Frenectomy 391	\$173.00	Root canal treatment - one canal 417	\$140.00	Full crown - veneered 615	\$850.00	Bridge pontic - per pontic 643	\$437.00	Complete upper & lower dentures 719	\$977.00		Service limits per member per calendar year may apply.								
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Dental Item Numbers General Dental Major Dental Devices for Sleep Apnoea and Diagnosed Snoring (refer to Health Aids and Appliances)		Diagnostic services (items 011-091), Preventive, Prophylactic and Bleaching services (items 111-171), Extractions (items 311-324), Restorative services (items 511-525, 531-535, 541-555, 571-579, 595-598), General services (items 911-972) and Miscellaneous (items 981-982, 985-999). Periodontics (items 213-251), Oral Surgery (items 331-399), Endodontics (items 411-459) and Prosthodontics: crowns, bridges, veneers, implants, dentures and maxillofacial prosthetics (items 526, 536, 556, 586-588, 611-790). Miscellaneous (item 984).																						

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Service		Waiting Period	Item Limit	Annual Group Limit	Additional Information
Optical	Frames	2 months	100%	\$250 per member at External Optical Providers or \$325 per member at Westfund Eye Care Centres	Prescription only. No benefit towards tinting, coating or add-ons. Benefits also apply for Irlen lenses or repairs. Higher benefit available at Westfund Eye Care Centres only.
	Single Vision Lenses				
	Bifocal Lenses				
	Multifocal Lenses				
	Contact Lenses				
	Sunglasses				
Other Therapies	Physiotherapy	2 months	\$10 per group service or \$42 per individual service	\$600 per member	Two chiropractic x-rays per member per calendar year.
	Exercise Physiology		\$10 per group service or \$30 per individual service		
	Chiropractic		\$30 per individual service		
	Chiropractic X-ray		\$55 per X-ray		
	Osteopathic		\$30 per individual service		
	Remedial Massage & Myotherapy		\$25 per individual service		
	Acupuncture & Chinese Herbalism	\$25 per individual service	\$400 per member	Benefits are only payable for services rendered by providers that are recognised by Westfund and in private practice (recognised provider).	
	Dietetics & Nutrition	\$10 per group service or \$30 per individual service			
	Home Nursing (up to 6 hrs/over 6 hrs)	\$12/\$48 per individual service			
	Vision (Eye) Therapy	\$25 per individual service			
	Occupational Therapy	\$10 per group service or \$40 per individual service			
	Podiatry Surgical Treatment	\$34 per individual service 100%			
	Clinical Psychology	\$50 per group service or \$50 per individual service			
	Psychometric/Learning assessment	\$200 per individual service			
	Speech Therapy (initial/subsequent)	\$36 per group service or \$48/\$36 per individual service			
		12 months for surgical treatment by a Podiatrist			

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Treatments covered by this policy

Service		Waiting Period	Item Limit (per service)		Annual Group Limit	Additional Information	
Prescriptions, Injections, Vaccinations	For Private, Non-PBS and Non-NHS prescriptions	2 months	\$50 per prescription for the amount that exceeds the PBS co-payment			Doctor letter required in some instances (see Membership Terms and Conditions).	
	Preventative Health Checks		\$60			<p>The health check must not be Medicare claimable.</p> <p>Preventative Health Checks include but are not limited to cancer, cardiac, musculoskeletal or chronic disease screening checks.</p>	
Preventative Health	Service	Waiting Period	Item Limit	Sub-limit	\$500 per member		
	Ear and Eye Health Checks	Audiology Tests	2 months	\$80		\$160	The health check must be provided by a recognised provider and cannot be Medicare claimable.
		Eye Health Tests					Eye Health Tests include but are not limited to Optical Coherence Tomography, Retinal Photography and Corneal Topography.
		Optical Digital Centration					100%
	Hypnotherapy			100%		\$250 lifetime limit	Includes Asthma Foundation, Diabetes Australia, Arthritis Australia, Coeliac Association, Crohn's and Colitis Australia, Parkinson's Australia, Multiple Sclerosis (MS) Australia, Alzheimer's Australia, National Association of people with HIV Australia (NAPWHA), Lupus Association of Australia, MedicAlert Foundation, Stoma Associations (Ostomy, Colostomy), Myasthenia Gravis Associations.
	Chronic Disease Association Fees		2 month	100%		\$30	
Health Management	Fitness Centre		100%	\$100		Fitness, Weight Loss, Virtual Gastric Banding, Mental Health and Aquatic Programs require a Medicare Registered Practitioner to complete a Health Management Declaration Claim Form to confirm the program is medically necessary. Forms are available for download at www.westfund.com.au/forms-downloads/	
	Aquatic Programs						
	Mental Health Programs						
	Weight Loss Programs						
	Virtual Gastric Banding						
	Diabetes Education						
	Vitamins						
	Omega 3						
	Probiotics						

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Treatments covered by this policy

Service		Waiting Period	Item Limit	Claimable Period per member	Letter of recommendation	Additional Information
Health Aids and Appliances	Blood Glucose Monitor	12 months	\$100	Calendar Year	No	Benefit available for hire and purchase fees.
	Blood Pressure Monitor		\$150	Calendar Year	No	
	Cardiac Monitor				Lifetime letter	Letter of recommendation or Health Management Declaration Claim Form not required if Health Aids & Appliances are purchased from a Medicare Registered Practitioner.
	Braces		\$120	Calendar Year	Every Calendar Year	
	Compression Garments/Devices				Lifetime letter	
	Burn Suits		\$800	Calendar Year	Every Calendar Year	
	INR Monitor		\$200	Every two years	Lifetime letter	
	Mammary Prostheses and Brassieres		\$225	Calendar Year	Lifetime letter - unless relevant hospitalisation is recorded with Westfund	Respiratory Aids include Spacer Devices, Mucus Clearing Devices, Nebuliser & Peak Flow Meters.
	Respiratory Aids		\$110	Calendar Year	Lifetime letter	
	Custom Made Orthopaedic Boot		\$200	Calendar Year	Every Calendar Year	Benefits for a maximum of two orthotic models/ impressions are combined under the orthotics benefit.
	Custom Made/ Preformed Orthotics		\$200	Calendar Year	Every Calendar Year	
	Wigs		\$150	Calendar Year	Lifetime letter - unless relevant hospitalisation is recorded with Westfund	Devices for Sleep Apnoea and Diagnosed Snoring include CPAP Machine, EPAP Treatment, Oral Appliance for Diagnosed Snoring, APAP Machine & BiPAP Machine.
	Artificial Limbs		\$200	Calendar Year	Lifetime letter	
	Devices for Sleep Apnoea and Diagnosed Snoring		\$500	Every three years	Lifetime letter	
	Sleep Apnoea Masks/ Accessories and TENS Accessories	\$100	Calendar Year	No		
	Low Vision Aids	\$100	Calendar Year	Lifetime letter		
	Mobility Aids			Every Calendar Year		
	Oxygen and Accessories	\$500	Calendar Year	Lifetime letter		
	Oximeter			Lifetime letter		
	Repairs to Devices	\$100	Calendar Year	Lifetime letter - unless initial purchase of the device is recorded with Westfund	Repairs to devices are only available to appliances listed in this table.	
TENS Machine	\$150	Every three years	Lifetime letter			
Hearing Aids and Accessories	36 months	\$1400	Every three years	No	Must be purchased from a recognised provider.	
Frequency Modulated Systems						
Service	Waiting Period	Item Limit	Annual Group Limit	Additional Information		
Travel	Outpatient Travel Benefit	12 months	Up to \$70 per trip	\$140 per policy	Benefits will be paid on a grouped kilometre basis, in excess of 150 kilometres round trip from the member's home locality to the locality of the consultation. This benefit is limited to one service per member per day.	

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Treatments covered by this policy

Ambulance

Service	Waiting Period	Item Limit	Annual Group Limit	Additional Information
Emergency Ambulance Transport	1 day	100%	No annual limit	Benefit eligible for Westfund recognised ambulance service providers in Australia. Westfund covers the cost of transport by either covering the cost of state government levies or covering the ambulance account.
Non-Emergency Patient Transport	2 months	100%	\$5,000 per member	Ambulance services not available under this policy: <ul style="list-style-type: none"> - Inter-hospital transfers between public hospitals - Member requested ambulance transport e.g. to be closer to home/family.

Need to get in touch? We're only a click or call away.



Call us 1300 937 838
Monday - Friday
8am - 5pm (AEST)



Connect online
enquiries@westfund.com.au
westfund.com.au



Visit a Care Centre
Our Care Centres are located
across regional NSW and QLD