

# Top Extras Cover Summary

## Top extras cover for total peace of mind

### Features



Unlimited urgent ambulance by road<sup>1</sup>



Get a fully covered flu vac and health check at selected Friendlies Pharmacies and Member Plus<sup>2</sup> Pharmacies



No annual limit on preventative and general restorative dental<sup>3</sup>



A fully covered pair of glasses every year<sup>4</sup>

#### Top Extras includes:

- ✓ Our highest level of extras cover
- ✓ Cover for 19 services including Dental, Chiro, Optical, Pharmacy, Physio, Psychology, Remedial Massage and more

Full list of service categories and commonly used treatments are enclosed within this product sheet

#### How to contact us:



##### Call 133 423

Call centre hours (WST)  
Mon-Fri: 6am-6pm, Sat: 7am-4pm, Sun: Closed



##### Go to [hbf.com.au](https://www.hbf.com.au)



##### Find a branch near you

<sup>1</sup> HBF will cover the cost for urgent ambulance transport by road only for circumstances classified as emergency or urgent. HBF does not cover air ambulance.

<sup>2</sup> Only applicable in states outside WA.

<sup>3</sup> Waiting periods apply.

<sup>4</sup> Available from one of many Member Plus optical stores. Waiting periods and annual maximums may apply.

# Why trust HBF as your health insurer

Since 1941, HBF has been caring for the health of Australians by helping them get well in the moments that matter



We always put our members first



We're not run by shareholders  
That means we can focus on giving our members more back



We're a health fund trusted by  
1 million members

## Get well rewarded with a range of offers and discounts:



15% off at Friendlies Pharmacies  
for HBF members<sup>5</sup>



Free HBF fitness sessions run  
across WA<sup>6</sup>



Access exclusive discounts  
through our Momentum  
Member Benefits program

## As an HBF member, you'll also be able to:



### Stay connected

Claim online and check your limits and usage through  
myHBF and the HBF Health app



### Get well covered

Get well covered with HBF home, car and travel,<sup>7</sup>  
and life<sup>8</sup> products

<sup>5</sup> Excludes prescriptions, discounted products, health services and related items.

<sup>6</sup> Charges apply for other participants.

<sup>7</sup> General Insurance issued by Insurance Australia Limited. Consider the PDS available from HBF.com.au to see if the product is right for you.

<sup>8</sup> HBF Ezicover life insurance products are issued by Zurich Australia Limited. Before making a decision about the product you should consider the HBF relevant combined Product Disclosure Statement and Financial Services Guide available from HBF or via [www.hbf.com.au](http://www.hbf.com.au)

# What am I covered for?

This is an overview of Top Extras. Additional information you should know relating to this cover can be found in the Membership guide available at [hbf.com.au/membership-guide](http://hbf.com.au/membership-guide)

Benefits only payable for services and programs delivered by providers that are approved by HBF. There is a limit of 1 initial consultation per service, per calendar year.

Commonly used services	Waiting Period	Benefits (up to annual limits)	Annual limits per person (pp) per calendar year unless otherwise stated	
			Length of Cover	Amount
<b>Alternative Therapies<sup>9</sup></b>				
Traditional Chinese Medicine	2 months	1-10 consultations \$28 11+ consultations \$17	Up to 1 year	\$350
Acupuncture			1 - 2 years	\$400
		2 - 3 years	\$450	
			Over 3 years	\$500
Hypnotherapy		Consultation \$28	\$400 Combined annual limit for Hypnotherapy, Health Monitoring Equipment <sup>10</sup> & Preventative Equipment <sup>10</sup>	
<b>Appliances<sup>10</sup></b>				
Health monitoring equipment	2 months	100% Up to \$120 sub-limit	\$400 Combined annual limit for Hypnotherapy, Health Monitoring Equipment & Preventative Equipment	
Preventative equipment		100% Up to \$120 sub-limit		
Non-surgically implanted appliances <sup>11</sup>	12 months	Benefits vary depending on appliance	\$500 Sub-limits apply for some items	
Nebuliser		\$180	One appliance per 3 years	
Blood glucose monitor		\$200	One appliance per 3 years	
Hearing Aid		100%	Up to 2 years \$900 2 - 3 years \$1000 3 - 4 years \$1200 Over 4 years \$1400 Annual limits can only be claimed every 3 years	
<b>Chiropractic</b>				
Initial consultation	2 months	\$60	\$500	
Subsequent consultation		\$40	Combined annual limits for Chiropractic and Osteopathy	
X-ray – 1 pp per calendar year		\$107		
<b>Dental<sup>12</sup></b>				
		Member Plus dentist <sup>13</sup>	Non-Member Plus dentist	
Oral examination	2 months	100%	\$50	No limit
Dental x-ray			\$40	
Scale & Clean			\$98	
Fluoride treatment			\$25	
<b>General Restorative</b>		All dentists		
Extractions	2 months	\$162	No limit	
Simple Fillings		\$78		
<b>Major Dental and Implants<sup>12</sup></b>		All dentists		
Crowns (3 units of crowns/bridges per year) <sup>14/15</sup>	12 months	Up to \$960	Up to 3 years \$800 3 - 5 years \$1320 Over 5 years \$2500	2 complete Implants pp per 2 years
Root Canal		Up to \$185		
Dentures		Up to \$1100		
Bridges (3 units of crowns/bridges per year) <sup>14/15</sup>		Up to \$690		
Implants		Up to \$1317		

<sup>9</sup> Multiple services provided during a consult will be paid a single benefit. HBF does not pay a benefit for massage or medications/herbs.

<sup>10</sup> For HBF approved appliances only. HBF does not cover accessories and associated software for appliances.

<sup>11</sup> Charges for most appliances must be at least \$100.

<sup>12</sup> The benefit we pay on some dental items may be restricted if performed in conjunction with other specific dental services, or if a service is received more than once in a specified period of time.

<sup>13</sup> Member Plus dentist arrangements only applicable in WA.

<sup>14</sup> Sub-limits included in overall annual limits.

<sup>15</sup> Crowns associated with Implants limited to 2 pp per 2 years.

Commonly used services	Waiting Period	Benefits (up to annual limits)	Annual limits per person (pp) per calendar year unless otherwise stated		
			Length of Cover	Amount	
<b>Orthodontics<sup>16</sup></b>					
		All dentists			
Braces /Invisalign	12 months	Up to \$2800	Up to 3 years 3 - 5 years 5 - 10 years Over 10 years Lifetime limit	\$800 \$1200 \$2000 \$2800 \$2800	
<b>Dietetics / Nutritionist</b>					
Dietetics - Initial consultation	2 months	\$54	\$400		
Dietetics - Subsequent consultation		\$27			
Nutritionist - Initial consultation	2 months	\$33	\$200		
Nutritionist - Subsequent consultation		\$28			
<b>Exercise Physiology</b>					
Consultation	2 months	\$28	\$400		
Group consultation		\$10			
<b>Eye Therapy</b>					
Consultation – over 30 minutes	2 months	\$49	Up to 3 years Over 3 years	\$1000 \$1400	
Consultation – up to 30 minutes		\$24	Combined annual limits for Occupational Therapy, Eye Therapy and Speech Therapy		
<b>Healthy Living Programs<sup>17</sup></b>					
Health check	2 months	One fully covered health check when provided at selected Friendlies and Member Plus <sup>18</sup> pharmacies	One health check		
Flu vaccinations		100% when provided at selected Friendlies and Member Plus <sup>18</sup> pharmacies			
Dose administration aids		100% when provided at selected Friendlies Pharmacies	Up to 3 years Over 3 years	\$350 \$450	
Health Education programs		100%	\$250 sub-limit applies for Weight Management, Health Education and Living Longer Living Stronger programs		
Living Longer Living Stronger - Initial consultation		\$47			
Living Longer Living Stronger - Subsequent consultation		100%			
Quit smoking, Friendlies Health and Weight Management Programs		80%			
Travel Vaccinations		100%	\$100		
Nicotine Replacement Therapy		100%	\$100		
<b>Occupational Therapy</b>					
Initial consultation	2 months	\$56	Up to 3 years Over 3 years	\$1000 \$1400	
Subsequent consultation		\$33	Combined annual limits for Occupational Therapy, Eye Therapy and Speech Therapy		
Group consultation		\$12			
<b>Optical<sup>19</sup></b>					
A minimum of 30% of all frames will be fully covered when the glasses are purchased from any HBF Member Plus optical store and the frames are fitted with hard coated or uncoated single vision, bi-focal or multi-focal/progressive lenses. For partially covered glasses purchased at an HBF Member Plus optical store (including add-ons) a discount in addition to your HBF benefit may be applied.					
Frames & single vision lenses	2 months	\$180	1 pair of glasses up to set benefits \$180 sub-limit applies for frame replacements <sup>20</sup>		
Frames & bi-focal or multi-focal lenses		\$250			
Spherical rigid or soft contact lenses (pair)		\$212	1 pair of contact lenses or up to \$200 frequent replacement/disposable lenses per year		

<sup>16</sup> Benefit entitlement for Orthodontics is based on the length of membership on the relevant product at the time the appliances are fitted and is for a full course treatment.

<sup>17</sup> For HBF approved programs only.

<sup>18</sup> Only applicable in states outside of WA.

<sup>19</sup> Not all lens prescriptions and supplementary services may be eligible to be charged at no cost.

<sup>20</sup> When fitted with your own prescription lenses.

Commonly used services	Waiting Period	Benefits (up to annual limits)	Annual limits per person (pp) per calendar year unless otherwise stated	
			Length of Cover	Amount
<b>Osteopathy</b>				
Initial consultation	2 months	\$36	\$500	
Subsequent consultation		\$28	Combined annual limits for Chiropractic and Osteopathy	
<b>Pharmacy</b>				
Pharmaceuticals listed on the HBF Pharmacy Schedule	2 months	Cost of medicine less member co-payment <sup>21</sup>	\$600	
<b>Physiotherapy</b>				
Initial consultation	2 months	\$63	\$1000	
Subsequent consultation		\$53		
Group consultation		\$25		
<b>Podiatry</b>				
Initial consultation	2 months	\$42	10 consultations	
Subsequent consultation		\$22		
Foot Orthoses including casting (pair) <sup>22</sup>	12 months	Up to \$240	\$240	
<b>Psychology</b> (including Clinical Psychology)				
<b>Clinical Psychology</b> <sup>23</sup>				
Assessment	2 months	\$130	\$1400	
Treatment/Management		\$70		
Group Treatment		\$35		
<b>Psychology</b>				
Individual consultation	2 months	\$44	\$450	
Group consultation		\$22		
<b>Speech Therapy</b>				
Initial consultation	2 months	\$97	Up to 3 years	\$1000
Subsequent consultation		\$52	Over 3 years	\$1400
Group consultation		\$12	Combined annual limits for Occupational Therapy, Eye Therapy and Speech Therapy	
<b>Remedial Massage/Myotherapy</b>				
Consultation	2 months	\$40	\$400	
<b>Urgent Ambulance</b> <sup>24</sup>				
Urgent Ambulance (by road)	7 days	Cover for urgent ambulance transport	No limit	

### Are there any exclusions on benefits?

- If a claim is not lodged within 2 years of the date of service.

<sup>21</sup> This may vary depending on the medication. The co-payment amount is equivalent to the Australian Government General Co-payment amount at the time of dispensing the medication.

<sup>22</sup> Foot Orthoses must be custom-made by an approved HBF provider. For some Foot Orthoses, HBF will only pay a benefit when provided by an approved Podiatrist or Orthotist.

<sup>23</sup> Provider must be registered with the relevant national board with an endorsement of Clinical Psychology, and approved by HBF.

<sup>24</sup> HBF will cover the cost for urgent ambulance transport by road only for circumstances classified as emergency or urgent. HBF does not cover air ambulance.

**Before receiving any treatment, you should contact us or go to [hbf.com.au/myhbf](http://hbf.com.au/myhbf) for a health benefit quote so you know how much you're covered for, the benefits you'll receive and any out-of-pocket expenses.**

HBF reserves the right to make changes to its products, benefits and terms and conditions from time to time. HBF will notify the policyholder a reasonable time in advance of any changes that might be detrimental to the member's interests.