

Mid Extras 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

Good Extras health insurance suited to families wanting cover for key services such as optical, dental (including orthodontic), physio and chiro. Offers good value for growing families with benefits to put towards a broad range of Extras including mental health support, massage, vitamins and nutrition.

Only available when packaged with a hospital cover.



* 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 (unless otherwise stated)	Additional Information
General Dental	Treatments include:	2 months	Set item benefits depending on item number. Benefits for some of the common General Dental Services are:			\$1125 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.
	Diagnostic & Preventive		Service & Item Number	Provider of Choice	General Dentist		
	Fillings		Periodic Oral Exam 012	Benefits fully cover the cost of these services	\$25.00		
	Extractions		X-ray 022		\$18.00		
			Scale & Clean 114		\$55.00		
			Fluoride Treatment 121		\$22.00		
			Mouthguard 151	\$75.00			
	Surgical Tooth Extraction 322		\$135.00	\$135.00			
	Filling 533		\$86.00	\$86.00			
Major Dental	Treatments include:	12 months	Set item benefits depending on item number. Benefits for some of the common Major Dental Services are:				Service limits per member per calendar year may apply.
	Periodontics		Service & Item Number		Benefit		
	Oral Surgery		Frenectomy 391	\$130.00			
	Endodontics		Root canal treatment – one canal 417	\$135.00			
	Veneers, Crowns		Full crown - veneered 615	\$750.00			
	Bridges, Implants		Bridge pontic - per pontic 643	\$400.00			
	Dentures		Complete upper & lower dentures 719	\$781.50			
	Maxillofacial Prosthetics						
	Orthodontic		Orthodontic Treatment	12 months	100%		
Dental Retainers		Set item benefits depending on item number. Benefits for Dental Retainers are:			2 services per item number per member		
		Service & Item Number	Benefit				
		Passive removable appliance – per arch 811	\$283.30				
		Active removable appliance – per arch 821	\$618.88				
		Functional orthopaedic appliance - custom fabrication 823	\$912.64				
Functional orthopaedic appliance – prefabricated 824	\$493.00						
Dental Item Numbers	General Dental	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)					
	Major Dental	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)					
	Orthodontic	Dental retainers (items 811-824), Orthodontic (items 825-882)					

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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		Prescription only. No benefit towards tinting, coating or add-ons. Benefits also apply for Irlen lenses.
	Single Vision Lenses					
	Bifocal Lenses					
	Multifocal Lenses					
	Contact Lenses		\$310 per member at Westfund Eye Care Centres	Higher benefit available at Westfund Eye Care Centres only.		
	Sunglasses				100%	\$50 per member
ServiceWaiting PeriodItem Limit				Annual Group Limit		Additional Information
				Single	Couple/ Family	
Other Therapies	Physiotherapy	2 months	\$10 per group service or \$30 per individual service	\$300	\$600	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	\$300	\$600	
	Chiropractic X-ray		\$40 per X-ray			
	Osteopathic		\$30 per individual service			
	Remedial Massage & Myotherapy		\$25 per individual service	\$150	\$300	
	Acupuncture & Chinese Herbalism		\$25 per individual service	\$150	\$300	
	Dietetics & Nutrition		\$7 per group service or \$30 per individual service	\$150	\$300	
	Home Nursing (up to 6 hrs/over 6 hrs)		\$12/\$48 per individual service	\$150	\$300	
	Vision (Eye) Therapy		\$25 per individual service	\$150	\$300	
	Occupational Therapy		\$7 per group service or \$40 per individual service	\$150	\$300	
	Podiatry Surgical Treatment	12 months for surgical treatment by a Podiatrist	\$25 per individual service 100%	\$150	\$300	Benefits are only payable for services rendered by providers that are recognised by Westfund and in private practice (recognised provider).
	Clinical Psychology		\$50 per group service or \$50 per individual service	\$300	\$600	
	Psychometric/Learning assessment		\$100 per individual service			
	Speech Therapy (initial/subsequent)			\$36 per group service or \$48/\$36 per individual service	\$300	

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Treatments covered by this policy

Service		Waiting Period	Item Limit	Annual Group Limit (unless otherwise stated)	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	\$400 per member	Doctor letter required in some instances (see Membership Terms and Conditions)	
Health Management	Fitness Centre	2 months	100%	Single Policy \$75 or Couple/Family Policy \$150	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					
Preventative Health	Preventative Health Tests	Bone Density Test	2 months	100%	\$60 per member	The health test must be recommended by a Medicare Registered Practitioner and cannot be Medicare claimable.
		Bowel Testing Kit				
		Calcium Score				
		Chronic Disease Health Screen				
		Mammogram				
		Mole Scan				
		Thin Prep Pap Test				
	Ear and Eye Health Checks	Audiology Tests	2 months	\$80	\$120 per member	The health check must be provided by a recognised provider and cannot be Medicare claimable.
		Eye Health Tests				Eye Health Tests include but is not limited to Optical Coherence Tomography, Retinal Photography and Corneal Topography.
	Antenatal Classes and pre/postnatal consultations		12 months	100%	\$120 per policy	Includes Lactation Consultation and Post-Partum Assessments.
	Hypnotherapy		2 months	100%	\$250 per member lifetime limit	
	Chronic Disease Association Fees		2 months	100%	\$30 per member	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.

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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	12 months	\$100	Calendar Year	No	Benefit available for hire and purchase fees.
		\$150	Calendar Year	No	
				Lifetime letter	
		\$120	Calendar Year	Every Calendar Year	Letter of recommendation or Health Management Declaration Claim Form not required if Health Aids & Appliances are purchased from a Medicare Registered Practitioner.
				Lifetime letter	
		\$800	Calendar Year	Every Calendar Year	Health Management Declaration Claim Form available to download at www.westfund.com.au/forms-downloads/
		\$200	Every two years	Lifetime letter	
		\$225	Calendar Year	Lifetime letter - unless relevant hospitalisation is recorded with Westfund	Respiratory Aids include Spacer Devices, Mucus Clearing Devices, Nebuliser & Peak Flow Meters.
		\$110	Calendar Year	Lifetime letter	
		\$200	Calendar Year	Every Calendar Year	Benefits for a maximum of two orthotic models/impressions are combined under the orthotics benefit.
		\$200	Calendar Year	Every Calendar Year	
		\$150	Calendar Year	Lifetime letter - unless relevant hospitalisation is recorded with Westfund	

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: - 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