

# Ultimate 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.\*
- ✓ Kids up to 31 stay covered^.
- ✓ 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

The ultimate Extras health insurance designed for people committed to maintaining a proactive and healthy lifestyle. Provides our highest level of cover with no annual limit on general dental to our best benefits across all Extras categories like orthodontics, physio, massage, mental health support, health management and more. Plus, a dental top up bonus that allows you to claim back your general dental or major dental out-of-pocket expenses, up to annual limits.



\*Annual limits and waiting periods apply.

^Dependants stay covered if unmarried or not in a bona fide domestic relationship.

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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](http://www.westfund.com.au/terms-conditions) or by calling Westfund on 1300 937 838. Our Privacy Policy and Complaints 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/](http://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																					
<b>General Dental</b> 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 &amp; Item Number</th> <th>Provider of Choice</th> <th>General Dentist</th> </tr> </thead> <tbody> <tr> <td>Periodic Oral Exam 012</td> <td rowspan="4">Benefits fully cover the cost of these services</td> <td>\$35.00</td> </tr> <tr> <td>X-ray 022</td> <td>\$25.00</td> </tr> <tr> <td>Scale &amp; Clean 114</td> <td>\$76.00</td> </tr> <tr> <td>Fluoride Treatment 121</td> <td>\$24.00</td> </tr> <tr> <td>Mouthguard 151</td> <td></td> <td>\$103.00</td> </tr> <tr> <td>Surgical Tooth Extraction 322</td> <td>\$150.00</td> <td>\$150.00</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	\$35.00	X-ray 022	\$25.00	Scale & Clean 114	\$76.00	Fluoride Treatment 121	\$24.00	Mouthguard 151		\$103.00	Surgical Tooth Extraction 322	\$150.00	\$150.00	Filling 533	\$107.50	\$107.50	No annual limit	Service limits per member per calendar year may apply.  Some common limits include: 011, 151- 1 service; 012- 2 services; 114, 121- 4 services; 022- 4 services per day, up to 8 services.
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<b>Major Dental</b> 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 &amp; Item Number</th> <th>Benefit</th> </tr> </thead> <tbody> <tr> <td>Frenectomy 391</td> <td>\$217.00</td> </tr> <tr> <td>Root canal treatment - one canal 417</td> <td>\$140.00</td> </tr> <tr> <td>Full crown - veneered 615</td> <td>\$1000.00</td> </tr> <tr> <td>Bridge pontic - per pontic 643</td> <td>\$546.00</td> </tr> <tr> <td>Complete upper &amp; lower dentures 719</td> <td>\$977.00</td> </tr> </tbody> </table>	Service & Item Number	Benefit	Frenectomy 391	\$217.00	Root canal treatment - one canal 417	\$140.00	Full crown - veneered 615	\$1000.00	Bridge pontic - per pontic 643	\$546.00	Complete upper & lower dentures 719	\$977.00	\$1500 per member	Service limits per member per calendar year may apply.									
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<b>Dental Top Up</b> Treatments include: General Dental and Major Dental items	12 months	100% of gap	Single Policy \$300 or Couple/Family Policy \$600	Can be used towards any General Dental items (excluding 119, 141, 944, 949, 990 and 999) and Major Dental items																					
<b>Dental Item Numbers</b> General Dental Major Dental Orthodontic 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)  Dental retainers (items 811-824), Orthodontic (items 825-882)  Miscellaneous (item 984)																							

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Service		Waiting Period	Item Limit	Annual Group Limit		Additional Information
Optical	Frames	2 months	100%	\$350 per member at External Optical Providers or \$450 per member at Westfund Eye Care Centres		Prescription only. No benefit towards tinting, coating or add-ons. Benefits also apply for Irlen lenses.  Higher benefit available at Westfund Eye Care Centres only.
	Single Vision Lenses					
	Bifocal Lenses					
	Multifocal Lenses					
	Contact Lenses					
	Sunglasses	100%	\$75 per member	Must be purchased through a Westfund Care Centre or selected Provider of Choice providers.		
Service		Waiting Period	Item Limit	Annual Group Limit		Additional Information
				Single	Couple/ Family	
Other Therapies	Physiotherapy	2 months	\$10 per group service or \$52 per individual service	\$520	\$1040	Two chiropractic x-rays per member per calendar year
	Exercise Physiology		\$10 per group service or \$40 per individual service			
	Chiropractic		\$40 per individual service			
	Chiropractic X-ray		\$70 per X-ray			
	Osteopathic		\$40 per individual service			
	Remedial Massage & Myotherapy	\$40 per individual service	\$350	\$700	Benefits are only payable for services rendered by providers that are recognised by Westfund and in private practice (recognised provider).	
	Acupuncture & Chinese Herbalism	\$35 per individual service	\$350	\$700		
	Dietetics & Nutrition	\$10 per group service or \$55 per individual service	\$350	\$700		
	Home Nursing (up to 6 hrs/over 6 hrs)	\$18/\$72 per individual service	\$225	\$450		
	Vision (Eye) Therapy	\$35 per individual service	\$350	\$700		
	Occupational Therapy	\$10 per group service or \$70 per individual service	\$500	\$1000		
	Podiatry Surgical Treatment	12 months for surgical treatment by a Podiatrist	\$42 per individual service 100%	\$336		\$672
	Clinical Psychology & Counselling	\$100 per group service or \$100 per individual service	\$420	\$840		
	Speech Therapy (initial/subsequent)	\$42 per group service or \$60/\$42 per individual service	\$500	\$1000		

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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	\$75 per prescription for the amount that exceeds the PBS co-payment	\$600 per member	Doctor letter required in some instances (see Membership Terms and Conditions)	
Health Management	Fitness Centre	2 months	100%	Single Policy \$150 or Couple/Family Policy \$300	Fitness, Weight Loss, Virtual Gastric Banding 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 <a href="http://www.westfund.com.au/forms-downloads/">www.westfund.com.au/forms-downloads/</a>	
	Aquatic Programs					
	Weight Loss Programs					
	Virtual Gastric Banding					
	Diabetes Education					
	Vitamins					
	Omega 3					
	Probiotics					
Preventative Health	Preventative Health Tests	2 months	100%	\$60 per member	The health test must be recommended by a Medicare Registered Practitioner and cannot be Medicare claimable.	
						Bone Density Test
						Bowel Testing Kit
						Calcium Score
						Mammogram
						Mole Scan
	Thin Prep Pap Test					
	Ear and Eye Health Checks	2 months	\$80	\$160 per member	The health check must be provided by a recognised provider and cannot be Medicare claimable.	
						Audiology Test
						Corneal Topography
						Optical Coherence Tomography
	Retinal Photography					
	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).		

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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	
	Braces		\$200	Calendar Year	Every 12 months	
	Compression Garments				Lifetime letter	
	Burn Suits		\$800	Calendar Year	Every 12 months	
	INR Monitor		\$200	Every two years	Lifetime letter	Health Management Declaration Claim Form available to download at <a href="http://www.westfund.com.au/forms-downloads/">www.westfund.com.au/forms-downloads/</a>
	Mammary Protheses and Brassieres		\$400	Calendar Year	Lifetime letter - unless relevant hospitalisation is recorded with Westfund	
	Respiratory Aids		\$200	Calendar Year	Lifetime letter	Respiratory Aids include Spacer Devices, Mucus Clearing Devices, Nebuliser & Peak Flow Meters.
	Custom Made Orthopaedic Boot		\$400	Calendar Year	Every 12 months	
	Custom Made/Preformed Orthotics		\$300	Calendar Year	Every 12 months	
	Wigs		\$300	Calendar Year	Lifetime letter - unless relevant hospitalisation is recorded with Westfund	
	Artificial Limbs		\$200	Calendar Year	Lifetime letter	Devices for Sleep Apnoea and Diagnosed Snoring include CPAP Machine, EPAP Treatment, Oral Appliance for Diagnosed Snoring, APAP Machine & BiPAP Machine.
	Devices for Sleep Apnoea and Diagnosed Snoring		\$750	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 12 months		
	Oxygen and Accessories	\$750	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	\$200	Every three years	Lifetime letter			
Hearing Aids and Accessories	36 months	\$2000	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	\$210 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: - 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](mailto:enquiries@westfund.com.au)  
[westfund.com.au](http://westfund.com.au)



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