



Choosing the right nib cover for you

Why you need health cover and all the great reasons to be with nib

nib
it's worth it

Private health cover opens up a world of choice

While it's great that all Australians are entitled to public hospital treatment, there are big advantages to having private health cover as well.

Private cover can provide support for general health and wellbeing, peace of mind and may deliver tax savings. And like any form of insurance, it really shines when you find yourself faced with an unexpected setback – like needing hospital treatment.

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The information contained in this document is current as at 1 March 2017. This information should be read in conjunction with the Policy Booklet. These are available at nib.com.au or by calling **13 14 63**. Please read this brochure and keep a copy for your records. Rules and benefits may change from time to time.



nib hospital cover

01 SECTION

A bit about public hospital waiting lists...

We've all heard stories about public hospital waiting lists. As a public patient you have little control over when you are treated, who treats you or where you go to hospital.



Would you be happy to wait months for public hospital treatment?

Here are a few examples of the average wait times for treatment in a public hospital under Medicare*

120 days
for removal of tonsils

13 days
for coronary bypass surgery

114 days
for hip replacement surgery

188 days
for knee replacement surgery

50% of people on the list waited longer than this

*Source: Australian Institute of Health and Welfare, Australian hospital statistics 2015-16: elective surgery waiting times. Waiting times at the 50th percentile. Report dated December 2016.

Private hospital treatment can be expensive

There's no denying that private hospital treatment can be very expensive. In fact, without health insurance you could be up for tens of thousands of dollars.



Do you have this kind of money to spare?

A few examples of what private hospital procedures could cost you without health insurance*

\$2,948 for removal of tonsils

\$45,037 for coronary bypass surgery

\$25,499 for hip replacement surgery

\$22,553 for knee replacement surgery

Waiting periods may apply before you can claim for hospital treatment. Refer to your product information and the Policy Booklet.

*Average charge to nib customers for procedures in a private hospital (rounded to the nearest \$1), in 2016. Correct as at December 2016. Average costs include all charges for the total hospital procedure (including and not limited to, medical, hospital, prostheses, surgeons' and specialists' charges).

nib helps you afford the private hospital treatment you want

nib's hospital cover helps you avoid public hospital waiting lists, pays benefits toward the cost of private treatment and also allows you to (subject to availability):

- ✓ Choose the specialists who treat you
- ✓ Attend the nib Agreement Private Hospital of your choice
- ✓ Decide with your doctor when you'll be treated
- ✓ Stay in a private room.



Waiting periods may apply before you can claim for hospital treatment. Refer to your product information and the Policy Booklet.

Why nib hospital cover is the right choice

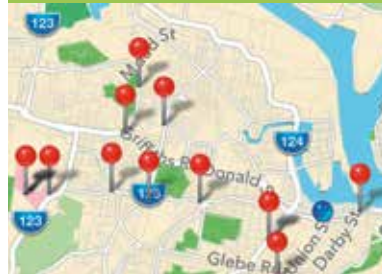
Approximately 480 nib Agreement Private Hospital and day facilities to help you save money

nib has agreements with more than 75% of Australia's private hospitals. These agreements help us to keep hospital costs and therefore your premiums down. They also mean we reduce or eliminate out-of-pocket expenses when you need treatment.

Refer to the Policy Booklet for more information. (available at nib.com.au or at nib Retail Centres)



To find an nib Agreement Private Hospital near you, visit nib.com.au or download the nib App



nib Accidental Injury Benefit

nib offers you more protection against the unexpected with the Accidental Injury Benefit.

Seek treatment within 24 hours after an accident at a hospital Emergency Department and receive benefits in-line with our best level of hospital cover for the next 90 days (excludes consult at an Emergency Department).

Accidental Injury Benefit criteria must be met for approval. The initial admission must be covered by the Accidental Injury Benefit for any follow-up admissions (within 90 days) to be covered as well.

This product information is intended as a summary only and should be read in conjunction with the Policy Booklet.

Refer to the Policy Booklet for more information. (available at nib.com.au or at nib Retail Centres)

Ask us if you'd like to know more

nib Emergency Ambulance Cover

People often think ambulance transportation is covered by the Government or Medicare, but for many Australians it isn't.

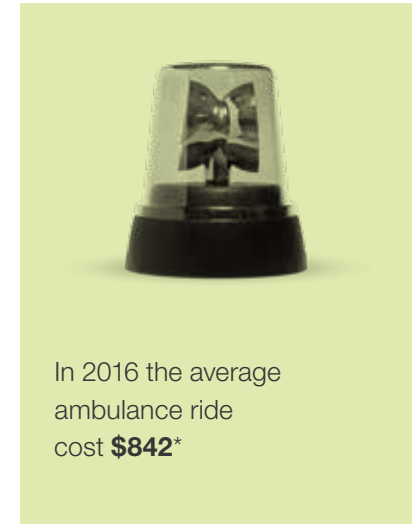
The most nib paid for a customer's ambulance claim in 2016 was \$10,475 (correct as at December 2016). With nib there's no need to be caught out by the cost of an expensive ride.

nib provides cover for emergency ambulance transportation by state ambulance in most circumstances (refer to Policy Booklet for exclusions).

Emergency ambulance costs are covered by the state government for residents of QLD and TAS.

Refer to the Policy Booklet for more information. (available at nib.com.au or at nib Retail Centres)

*Average ambulance charge incurred by nib customers in 2016 (excluding TAS and QLD residents). Correct as at December 2016.



In 2016 the average ambulance ride cost **\$842***

More than just insurance

Besides the peace of mind of having your health insurance with nib, we provide a range of health and wellbeing programs assisting eligible customers in better understanding their health, whilst living with conditions like:

- ✓ Diabetes
- ✓ Heart disease
- ✓ High blood pressure or cholesterol
- ✓ Knee or hip joint pain
- ✓ Managing multiple prescription medications
- ✓ Anxiety or depression

Over the past 8 years our programs have supported over 4,000 nib customers by improving their health outcomes at no additional cost to them.

If you have nib hospital cover and think you could benefit from a bit of extra help with your health, contact our friendly team of Health Advisors to see if you may be eligible or to learn more about our one on one programs.

Call **1800 339 219** or email thecoach@nib.com.au



nib Extras cover

02 SECTION

Stay healthy and active with Extras

Health insurance can help you cover the cost of the everyday services you use to stay healthy - like dental treatment, a new pair of glasses, remedial massage, or a visit to the physio. We call them 'Extras'.

'Extras' may sound like something you can do without, but the truth is they can make a big difference to your health and wellbeing. If you've used these types of treatments before you'll know it doesn't take much for the costs to really add up.



Medicare doesn't normally pay for them, but nib can help cover the cost

Tailor your nib Extras to suit your needs

We've created Extras covers based on services you are most likely to use. Start with one of our core packages – including dental, optical and physio. If you are looking for more cover you can add other Extras covers based on the Extras you'd like to claim.

For example, if wellbeing is important you can add cover which includes natural therapies like remedial massage. Or if you have children you can choose a cover with orthodontia and other Extras designed for children.

It's easy to add cover or take cover away later as your needs change.

Waiting periods may apply before you can claim for Extras. Refer to your product information and the Policy Booklet (available at nib.com.au or at nib Retail Centres).

60% BACK | 75% BACK

On nib's latest range of Extras covers you'll be able to claim 60% of the cost of service every time you claim for Extras (up to your annual limit). Or if you decide to take Top Extras you'll receive 75% back up to the annual limit. It's really as simple as that.

You choose the provider you'd like to see

nib customers have the choice to use any provider with professional qualifications recognised by nib. And with thousands of nib Recognised Providers for Extras there's bound to be one near you.

Refer to the Policy Booklet for more information. (available at nib.com.au or at nib Retail Centres)

Claiming made easy

nib offers you many convenient ways to claim on Extras:

- On-the-spot at your provider using your nib card
- Claim from home via nib Online Services
- Claim on the go using the nib App, it's as easy as taking a photo of your official provider receipt
- Visit an nib Retail Centre or download a claim form from nib.com.au and mail your claim to us.

Search and compare Extras providers with whitecoat.com.au

- ✓ See if there's an Extras provider at a location convenient to you
- ✓ Read reviews from other patients about the provider you'd like to see

nib Dental & Eye Care Centres

- Up to 100% back on dental check-ups at nib Dental Centres
- 100% back on a selection of single vision prescription glasses purchased online and in-store, and a 20% discount on full-priced prescription glasses, sunglasses and contact lenses when you visit us at an nib Eye Care Centre
- 100% back on a selection of contact lenses at nib Eye Care Centres or via nibeyecare.com.au

nib Dental & Eye Care offers are subject to your level of cover, waiting periods, annual limits and other conditions.



For more information and locations visit nib.com.au

For full terms and conditions call nib on **13 14 63**, visit nib.com.au or ask in-store. nib Dental Care Centres are owned and operated by Pacific Smiles Group Limited ABN 42 103 087 449. The nib Dental Care Centre trademark is owned by nib health funds ABN 83 000 124 381 and is used under license by Pacific Smiles Group Limited. nib Eye Care Centres are owned and operated by The Optical Company (NSW) Pty Ltd ABN 32 153 741 970. The nib Eye Care Centre trademark is owned by nib health funds ABN 83 000 124 381 and is used under license by The Optical Company.

How you can save

03 SECTION

nib lets you tailor the cover you need without paying for things you don't

We all stay active in our own way, so we need a health cover that's as individual as we are. That's why nib has created a range of health covers that allow you to tailor your cover, your way. Get the hospital cover you need and the Extras you'd like. It's easy and can save you money. After all, who wants to pay for things they don't use?



Other ways to save on your premiums with nib

✓ Increase your hospital excess to reduce your premiums

A hospital excess is the amount you pay towards the cost of a hospital stay before any benefits are payable by nib. Selecting a higher excess means your premiums with nib will be lower.

✓ Discount for paying by direct debit

Receive a discount on your premiums when you pay by automatic direct debit from a bank or building society cheque or savings account (excludes Ambulance Only Cover).

✓ Grown-up kids can stay covered up until they turn 25

Unmarried adult children aged 21-25 can stay on the family cover:

- for no extra charge if they are in full-time study (Student Dependents Cover) or
- for an extra charge on your premium if they are not studying (Extended Family Cover – only available on selected health covers).

Don't worry,
we can help
you with
these when
you join

The Medicare Levy Surcharge and how you could avoid paying extra tax

If your taxable income is above \$90,000 (\$180,000 for couples), and you don't have an appropriate level of private hospital cover, you may have to pay the Medicare Levy Surcharge. This is an additional 1% to 1.5% in tax (on top of the Medicare Levy we all have to pay).

How much you could be required to pay in extra tax depends on your income (or combined income for couples and families):

	Tier 0	Tier 1	Tier 2	Tier 3
Singles	\$90,000 or less	\$90,001-105,000	\$105,001-140,000	\$140,001+
Couples	\$180,000 or less	\$180,001-210,000	\$210,001-280,000	\$280,001+
Medicare Levy Surcharge				
	0.0%	1.0%	1.25%	1.5%

You can avoid the Medicare Levy Surcharge (and pay less tax) by joining any nib hospital cover and maintaining it for the full financial year. If you take out hospital cover part-way through the financial year, you will only avoid the surcharge for the period you held suitable hospital cover.

Source: Australian Tax Office. These thresholds apply for the 2016/2017 financial year. For families, and single parent families the threshold increases by \$1,500 for each dependant child after the first. There are specific rules for calculating income for Medicare Levy Surcharge purposes. For more information go to ato.gov.au

Want more info?

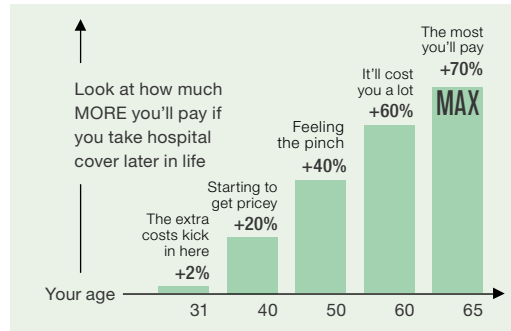
Ask us, or visit
the Australian
Taxation Office at
www.ato.gov.au



Join early to avoid paying more

Under Lifetime Health Cover (LHC) if you don't have hospital cover by 1 July after your 31st birthday, you'll pay a 2% loading on top of the normal premiums for each year you don't have hospital cover. The loading applies for 10 years of continuous hospital cover.

This isn't just with nib, but every health fund. So if you wait until you're 40, you'll pay 20% more than someone on the same cover who joined when they were 31.



The Australian Government Rebate on private health insurance

The Private Health Insurance Rebate offers a saving on the cost of private health cover funded by the Federal Government. The level of Rebate you could be entitled to receive is based on the age of the oldest person on the policy and your taxable income (or combined family income for couples and families).

The table below will help you determine which rebate level you could be entitled to. The Rebate percentages are set annually by the Australian Government.

If you have a Lifetime Health Cover loading, the Rebate is not claimable on the LHC loading component of your premium

	Tier 0	Tier 1	Tier 2	Tier 3
Singles	\$90,000 or less	\$90,001-105,000	\$105,001-140,000	\$140,001+
Couples	\$180,000 or less	\$180,001-210,000	\$210,001-280,000	\$280,001+

Source: Australian Tax Office. These thresholds apply for the 2016/2017 financial year. For families, and single parent families the threshold increases by \$1,500 for each dependant child after the first. All customers on the policy must be eligible to claim the Rebate. There are specific rules for calculating income for Australian Government Rebate purposes. For more information go to ato.gov.au

Private Health Insurance Rebate – from 1 April 2017 to 31 March 2018

	Tier 0	Tier 1	Tier 2	Tier 3
Under 65	25.934%	17.289%	8.644%	0%
65-69	30.256%	21.612%	12.966%	0%
70+	34.579%	25.934%	17.289%	0%

Go online for almost anything

04
SECTION

nib Online Services

We make it easy for our customers to manage their health cover from home or work. You can register for nib Online Services at nib.com.au

- View your health cover
- Check your claims history
- Claim on selected Extras
- Make a payment
- Check your Extras usage
- Order claims, tax and payment statements
- Update your details

Health cover in your hands

Download the nib App and manage your health cover in the palm of your hands.

At nib we believe that health cover should be easy to understand and easy to use, wherever you are. That's why the nib App for iPhone®, iPad® and Android™ makes it easy to get the most from your nib health cover.

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We're here to help. Friendly service, real people

- If you need the personal touch you can always speak to a real person in our call centres. We offer extended call centre hours for your convenience. Call us on **13 14 63**
- Or visit one of our Australian Retail Centres. To find locations and open hours visit **nib.com.au**

"I find everything clear and easy to understand. I love using the app as it is quick and easy. I find the nib staff to be exemplary – they are always kind, helpful and polite. Definitely the best staff of any service I use."

– **Claire**



How to choose

05
SECTION

01

Start with hospital cover

We recommend our top hospital cover for peace of mind, and if you are looking to save money you can choose a lower level of cover which excludes the things you don't want to be covered for.

02

Tailor your Extras

We've created Extras covers based on services you are most likely to use. Start with one of our core packages – including dental, optical and physio. If you are looking for more cover you can add other Extras covers based on the Extras you'd like to claim.

For example, if wellbeing is important you can add cover for things like natural therapies. Or if you have children you can choose a cover with orthodontia and other Extras designed for children.

It's easy to add cover or take cover away later as your needs change.

30 DAY
COOLING
OFF

It's worth it or your money back

If you aren't happy with your cover we'll refund your premiums if you change your mind and contact nib to cancel in the first 30 days (providing you haven't made a claim).

Get your personalised quote today. It's worth it.
Call **13 14 63** or visit **nib.com.au**

01 Start with hospital cover

We recommend top hospital cover for peace of mind, and if you are looking to save money you can choose a lower level of cover which excludes the things you don't want to be covered for.

What's covered In-Hospital

Depending on your level of cover, nib's hospital covers pay benefits **towards** the cost of the following things when provided to an admitted private patient in any nib Agreement Private Hospital, non Agreement Private Hospital or public hospital. These things are only covered for procedures included in your health cover and out-of-pocket expenses may apply:

- ✓ Medical treatments not requiring surgery, investigative procedures and surgeries
- ✓ Day surgery
- ✓ Overnight accommodation (private room where available)
- ✓ Special care unit accommodation (e.g. intensive care)
- ✓ Operating theatre fees
- ✓ Doctors' surgical fees and in-hospital consultations
- ✓ Government approved prosthetic devices
- ✓ Allied health services (e.g. physiotherapy, occupational therapy)
- ✓ Prescription medication required for specific treatment when in hospital
- ✓ Ward-drugs and sundry medical supplies (e.g. bandages, painkillers)
- ✓ Nursing care
- ✓ Patient meals

If you choose to be treated at a private hospital that does not have an agreement with nib, we will pay towards the costs of the services listed above, but you are likely to incur greater out-of-pocket expenses for most hospital related services than you would at an agreement hospital.

nib pays benefits toward these for Included Services on your chosen health cover. Out-of-pocket expenses may apply to these services.

Standard waiting periods

- Pregnancy & birth related services **12 months**
- Pre-existing conditions (where the symptoms were evident at any time during the 6 months immediately prior to joining as determined by our Medical Practitioner) except psychiatric, rehabilitation or palliative care services **12 months**
- Psychiatric, rehabilitation or palliative care services (whether pre-existing or not) **2 months**
- Any other conditions requiring hospitalisation that aren't pre-existing **2 months**
- Accidental injury **1 day**
- Ambulance services **1 day**

Not all of these services are included on each health cover. Waiting periods apply to customers not currently covered for these services.

Switching from another health fund?

You won't have to start again when it comes to waiting periods. nib will recognise the waiting periods already served with your current health fund for the same services with equivalent level of cover subject to certain conditions.

This product information is intended as a summary only and should be read in conjunction with the Policy Booklet.

Our hospital covers at a glance

Top Hospital	<p>A comprehensive cover</p> <ul style="list-style-type: none"> ✓ Covers all Medicare recognised hospital procedures. ✓ Ideal if you are planning a family or want the best nib cover.
Advantage Hospital	<p>You want extensive cover but don't need pregnancy</p> <ul style="list-style-type: none"> ✓ Don't pay for pregnancy and infertility related services. ✓ Ideal for completed families and over 55's.
Standard Hospital	<p>Great value cover including many of our most commonly claimed services</p> <ul style="list-style-type: none"> ✓ Excludes some hospital procedures you're less likely to need. ✓ Ideal if you're healthy and not planning on having kids.
Starter Plus Hospital	<p>A cover that includes more than just the basics</p> <ul style="list-style-type: none"> ✓ Covers you for accidents and many commonly claimed procedures ✓ Great choice if you're young and healthy or on a budget
Basic Hospital	<p>Our basic cover</p> <ul style="list-style-type: none"> ✓ Covers you for accidents, some specific hospital services as well as emergency ambulance. ✓ Great choice for your first health cover or families on a budget.

Key features

- ✓ nib Accidental Injury Benefit
- ✓ Can help you to avoid the Medicare Levy Surcharge if you have a taxable income above \$90,000 (\$180,000 for couples) and Lifetime Health Cover Loading
- ✓ nib Emergency Ambulance Cover
- ✓ No excess for dependant children under 21 years of age
- ✓ Eligible for the Australian Government Rebate

Hospital excess options to help you save money

A hospital excess is the amount you pay towards the cost of a hospital stay before any benefits are payable by nib. Selecting a higher excess means your premiums with nib will be lower.

You only pay an excess if you or someone (other than a dependant child under 21 years of age) on your policy goes to hospital. The excess applies once per person per calendar year and is payable directly to the hospital prior to your admission.

\$250

per person per calendar year not available on Standard Hospital or Starter Plus Hospital

\$500

per person per calendar year

Great value for families

- ✓ No hospital excess for dependant children under 21 years of age
- ✓ The excess for families is capped at twice your chosen level of excess (e.g. a \$250 excess is capped at \$500 per calendar year)
- ✓ Each adult on the policy will only pay one excess per calendar year if they go to hospital, no matter how many admissions they may need

If you've recently switched hospital covers your previous level of excess may apply for up to 12 months for pre-existing conditions.

This product information is intended as a summary only and should be read in conjunction with the Policy Booklet.

In-hospital treatments and surgery

Included and excluded services by hospital cover

Heading to hospital? Talk to us first

It's always important to call nib first when you learn you need to go to hospital, unless it's an emergency. We can let you know the best ways to avoid potential out-of-pocket expenses. Call us on **13 14 63**.

Hospital excess options	Top Hospital		Advantage Hospital		Standard Hospital	Starter Plus Hospital	Basic Hospital	
	\$250 per person per calendar year	\$500 per person per calendar year	\$250 per person per calendar year	\$500 per person per calendar year	\$500 per person per calendar year	\$500 per person per calendar year	\$250 per person per calendar year	\$500 per person per calendar year
nib Accidental Injury Benefit (waiting period 1 day)	✓		✓		✓		✓	
nib Emergency Ambulance Cover (waiting period 1 day)	✓		✓		✓		✓	
Other included services (Services covered unless related to an excluded service. Standard waiting periods apply)								
Tonsils & adenoids removal	✓		✓		✓		✓	
Appendix removal	✓		✓		✓		✓	
Colonoscopies	✓		✓		✓		✓	
Dental surgery	✓		✓		✓		✓	
Gastroscopies	✓		✓		✓		✓	
Grommets in ears	✓		✓		✓		✓	
Gynaecological services	✓		✓		✓		✓	
Hernia repair	✓		✓		✓		✓	
Joint investigations	✓		✓		✓		✓	
Joint reconstructions	✓		✓		✓		✓	
Brain surgery	✓		✓		✓			✗
Cancer surgery and in-hospital cancer treatment (approved under the Pharmaceutical Benefits Scheme)	✓		✓		✓			✗
Stroke treatment	✓		✓		✓			✗
All other Medicare recognised services	✓		✓		✓			✗
Heart related procedures & surgery	✓		✓		✓		✗	✗
Cochlear implant surgery and bone anchored hearing devices	✓		✓		✓		✗	✗
Palliative care	✓		✓		✓		minimum benefits payable*	minimum benefits payable*
Rehabilitation (e.g. following a stroke)	✓		✓		✓		minimum benefits payable*	minimum benefits payable*
Psychiatric treatment [^] (e.g. mood disorders, treatment for addiction)	benefit limitation period – minimum benefits payable [^]		minimum benefits payable*		minimum benefits payable*		minimum benefits payable*	minimum benefits payable*
Back surgery	✓		✓			✗	✗	✗
Joint replacements	✓		✓			✗	✗	✗
Eye treatment & surgery	✓		✓			✗	✗	✗
Renal dialysis	✓		✓			✗	✗	✗
Obesity/weight loss surgery	✓		✗		✗		✗	✗
Assisted reproductive services	✓		✗		✗		✗	✗
Infertility investigations	✓		✗		✗		✗	✗
Pregnancy & birth related services	✓		✗		✗		✗	✗
Cosmetic surgery	✗		✗		✗		✗	✗
Procedures not covered by Medicare	✗		✗		✗		✗	✗

[^]**Benefit Limitation Period – Minimum Benefits Payable (BLP – MBP)** means that unless you're transferring from a Complying Health Insurance Product (see Policy Booklet), there will be significant out-of-pocket costs if you go to hospital for this treatment in the first 12 months of your policy. After serving the 2 month Waiting Period, your benefit will be limited to "Minimum Benefits Payable" for the following 10 months. After this period of time you are entitled to the full benefit claimable for the treatment.

***Minimum Benefits Payable (MBP)** means that we will pay the minimum amount of benefits that we are required to pay under the Private Health Insurance Act, to or on behalf of a customer for hospital treatment under a Hospital cover. If you're attending a Private Hospital for these services, there will be significant out-of-pocket costs. If a treatment important to you is listed as MBP, we recommend you consider a higher level of cover.

02 Tailor your Extras

Extras cover is for services you can use every day to stay healthy, like going to the dentist, a visit to the physio or a new pair of glasses.

What's covered

Extras are services usually provided outside a hospital. Medicare does not generally cover these services so we help you pay for them.

At nib Recognised Providers we'll help cover:

- ✓ The cost of the consultations listed
- ✓ The cost of health appliances listed (ask nib about specific restrictions and replacements)

How much you'll get back each time you claim, and how much you can claim each year, depends on the cover/s you choose.

How to choose ▶▶▶▶

If you want comprehensive Extras you can choose Top Extras (see page 24)

Or if you are looking to save some money you can tailor your Extras covers to suit your needs and budget.

Tailor your Extras

Decide between

Core Extras	OR	Core Extras Plus
The Extras that people use most - like dental, optical, physio		Cover for the same Extras as Core Extras cover, with higher annual limits

If you're looking for more you can add 1 or 2 of the following

Family Extras	Wellbeing Extras	Young at Heart Extras
The Extras your family needs as your family grows	The Extras services to help you look after your overall health and wellbeing	The Extras services you may need as you grow older

This product information is intended as a summary only and should be read in conjunction with the Policy Booklet.

Core Extras

The Extras that people use most

60% BACK

of the cost to you up to your annual limit

Extras covered	Annual Limit <small>(maximum amount claimable per person in a calendar year)</small>	Waiting Period <small>(applies if you are new to health insurance or if you have recently increased your level of Extras cover)</small>
Preventative dental treatment <small>Includes selected examinations, scale & cleans and fluoride treatments</small>	No limit	2 months
General dental treatment <small>e.g. fillings, basic extractions, x-rays</small>	\$600	2 months
Major dental treatment <small>Includes root canal therapy, crowns, bridges, dentures, oral surgery</small>	\$600	12 months
Optical appliances <small>e.g. prescription glasses and contact lenses</small>	\$250	6 months
Physiotherapy	\$350	2 months
Ambulance <small>Emergency ambulance transport paid at 100% of the cost</small>	No limit	1 day

Core Extras Plus

The Extras that people use most, with higher annual limits

60% BACK

of the cost to you up to your annual limit

Extras covered	Annual Limit <small>(maximum amount claimable per person in a calendar year)</small>	Waiting Period <small>(applies if you are new to health insurance or if you have recently increased your level of Extras cover)</small>
Preventative dental treatment <small>Includes selected examinations, scale & cleans and fluoride treatments</small>	No limit	2 months
General dental treatment <small>e.g. fillings, basic extractions, x-rays</small>	\$700	2 months
Major dental treatment <small>Includes root canal therapy, crowns, bridges, dentures, oral surgery</small>	\$1,000	12 months
Optical appliances <small>e.g. prescription glasses and contact lenses</small>	\$300	6 months
Physiotherapy	\$450	2 months
Ambulance <small>Emergency ambulance transport paid at 100% of the cost</small>	No limit	1 day

This product information is intended as a summary only and should be read in conjunction with the Policy Booklet.

Now you have chosen
Core Extras or Core Extras Plus

Add 1 or 2 of the following: Family Extras
Wellbeing Extras
Young at Heart Extras



+ Family Extras

The Extras your family needs now, with added cover as your family grows

60% BACK

of the cost to you up to your annual limit

Extras covered	Annual Limit <small>(maximum amount claimable per person in a calendar year)</small>	Waiting Period <small>(applies if you are new to health insurance or if you have recently increased your level of Extras cover)</small>
Orthodontia	Starting limit of \$350 <small>(increasing by \$100 per calendar year to a lifetime limit of \$1,500)</small>	12 months
Speech pathology (speech therapy)	\$350	2 months
Podiatry <small>(consultations only)</small> Foot orthotics & Orthopaedic shoes <small>(appliance limits apply)</small>	\$200	2 months
Occupational therapy	\$300	2 months
Antenatal classes & postnatal services <small>Antenatal classes and postnatal services paid at 100% of the cost, up to the annual limit</small>	\$200	2 months
Family health aids <small>(appliance limits apply)</small> <small>Nebuliser, irlen lens, peak flow meter, spacers</small>	\$250	12 months
Preventative tests <small>(service limits apply)</small> <small>Thin prep, bone density tests, bowel screening</small>	\$100	6 months

+ Wellbeing Extras

The Extras services to help look after your overall health and wellbeing

60% BACK

of the cost to you up to your annual limit

Extras covered	Annual Limit (maximum amount claimable per person in a calendar year)	Waiting Period (applies if you are new to health insurance or if you have recently increased your level of Extras cover)
Chiropractic Osteopathy	\$300	2 months
Natural therapies (consultations only) Includes remedial massage, acupuncture, naturopathy, herbalism, myotherapy and shiatsu	\$300 (remedial massage limited to \$150)	2 months
Dietary advice (consultations only)	\$300	2 months
Psychology	\$300	2 months
Wellbeing health aids (appliance limits apply) Ankle-foot orthoses / knee-ankle-foot orthoses*, knee brace, hip orthosis, joint fluid replacements, shoulder brace, splint/orthosis for finger, hand, wrist, arm & elbow <small>*Please note: not foot orthotics (shoe inserts) provided by a podiatrist; podiatry benefits are available on our Family and Young at Heart Extras covers.</small>	\$250	12 months
Healthier lifestyle benefit nib approved; weight management, quit smoking, first aid and health management programs (gym, personal trainer, yoga, pilates)	\$150	6 months
Preventative tests (service limits apply) Thin prep, bone density tests, bowel screening	\$100	6 months

+ Young at Heart Extras

The Extras services you may need as you grow older

60% BACK

of the cost to you up to your annual limit

Extras covered	Annual Limit (maximum amount claimable per person in a calendar year)	Waiting Period (applies if you are new to health insurance or if you have recently increased your level of Extras cover)
Podiatry (consultations only) Foot orthotics & Orthopaedic shoes (appliance limits apply)	\$200	2 months
Dietary advice (consultations only)	\$300	2 months
Pharmaceutical prescriptions Benefits only payable for non PBS items. Benefits do not apply to prescriptions dispensed to hospital in-patients	\$400	2 months
Hearing aids (appliance limits apply)	\$500	36 months
Young at heart health aids (appliance limits apply) Surgical stockings, CPAP machine, CPAP parts, pressure garment, walking frame, blood pressure monitor, hip protector, blood coagulation device, erectile dysfunction pump, macular degeneration aid	\$250	12 months
Preventative tests (service limits apply) Thin prep, bone density tests, bowel screening	\$100	6 months

Or, for our best level of Extras cover, choose Top Extras.



Top Extras

Comprehensive Extras cover available from nib

Extras covered	Annual Limit (maximum amount claimable per person in a calendar year)	Waiting Period (applies if you are new to health insurance or if you have recently increased your level of Extras cover)
Preventative dental treatment Includes selected examinations, scale & cleans and fluoride treatments	No limit	2 months
General dental treatment e.g. fillings, basic extractions, x-rays	\$1,000	2 months
Major dental treatment Includes root canal therapy, crowns, bridges, dentures, oral surgery	\$1,300	12 months
Orthodontia	Starting limit of \$800 (increasing by \$100 per calendar year to a lifetime limit of \$2,600)	12 months
Optical appliances e.g. prescription glasses and contact lenses	\$350	6 months
Physiotherapy	\$600	2 months
Exercise physiology	\$300	2 months
Ambulance Emergency ambulance transport paid at 100% of the cost	No limit	1 day
Chiropractic	\$500	2 months
Osteopathy	\$500	2 months
Natural Therapies (consultations only) Includes remedial massage, acupuncture, naturopathy, herbalism, myotherapy and shiatsu	\$400 (remedial massage limited to \$200)	2 months
Speech pathology (speech therapy)	\$450	2 months
Podiatry (consultations only)	\$400	2 months
Foot orthotics & Orthopaedic shoes (appliance limits apply)	\$400	2 months

This product information is intended as a summary only and should be read in conjunction with the Policy Booklet.

75% BACK

of the cost to you up to your annual limit

Extras covered	Annual Limit (maximum amount claimable per person in a calendar year)	Waiting Period (applies if you are new to health insurance or if you have recently increased your level of Extras cover)
Eye therapy (orthoptics)	\$200	2 months
Dietary advice (consultations only)	\$600	2 months
Home nursing services	\$200	2 months
Occupational therapy	\$450	2 months
Antenatal classes & postnatal services Antenatal classes and postnatal services paid at 100% of the cost, up to the annual limit	\$250	2 months
Pharmaceutical prescriptions Benefits only payable for non PBS items. Benefits do not apply to prescriptions dispensed to hospital in-patients	\$500	2 months
Psychology	\$500	2 months
Hearing aids & speech processors (appliance limits apply)	\$1,200	36 months
Health aids (appliance limits apply) e.g. Nebuliser, irlen lens, peak flow meter, spacers, surgical stockings, CPAP machine, CPAP parts, pressure garment, walking frame, blood pressure monitor, hip protector	\$500	12 months
Healthier lifestyle benefit nib approved; weight management, quit smoking, first aid and health management programs (gym, personal trainer, yoga, pilates)	\$200	6 months
Preventative tests (service limits apply) Thin prep, bone density tests, bowel screening	\$200	6 months

nib proudly supports and complies with The Private Health Insurance Code of Conduct. A copy of the Code is available at privatehealth.com.au/codeofconduct



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nib
it's worth it

Need help?

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