

# Standard Extras 60

(only available with a Hospital cover)

Standard Extras 60 is a mid-level cover with benefits on most of the commonly used services while giving 60% back of the cost of the service up to the overall limit.

DESCRIPTION	WAITING PERIOD	PER SERVICE BENEFIT (UP TO OVERALL LIMIT)	OVERALL LIMIT (PER PERSON)	BENEFIT PERIOD
<b>DENTAL**</b>				
<b>Preventative &amp; general dental</b> (e.g. oral examination, scale & clean, fluoride treatment, x-ray, mouthguard, simple filling, simple and surgical extraction)	2 months	60% of the cost	\$500	calendar year
<b>Major dental</b> (e.g. periodontics, endodontics, inlays/onlays/facings/veneers, occlusal therapy, dentures, crowns, bridges & implants)	12 months		\$400	calendar year
<b>OPTICAL*</b>				
<b>Prescribed optical appliances</b> (e.g. frames, glasses, contact lenses)	6 months	60% of the cost	\$150	calendar year
<b>THERAPIES*</b>				
Physiotherapy (includes antenatal/postnatal)	2 months	60% of the cost	\$300	calendar year
Chiropractic & osteopathy			\$250	
Clinical psychology			\$100	
Dietitian				
<b>ALTERNATIVE THERAPIES*</b>				
Oriental therapies (Acupressure, acupuncture, Chinese herbal medicine consultation, Chinese massage, traditional Chinese medicine consultation)	2 months	60% of the cost	\$100	calendar year
Massage therapies (Deep tissue massage, lymphatic drainage, myotherapy, remedial massage, sports massage, Swedish massage, therapeutic massage)				

\* A benefit is not payable in respect of a service that was rendered to a member if the services can be claimable from any other source.

\*\* Benefits are not payable for Do-It-Yourself (DIY) dentistry including whitening kits, aligners and occlusal splints. Please contact us to confirm whether a benefit is payable.

## CBHS Corporate Health Wellness Benefits

CBHS Corporate Health Wellness Benefits cover you for a variety of health checks and programs designed to assist you in better managing your health and wellbeing.

WELLNESS BENEFITS (2 MONTH WAITING PERIOD)	BENEFITS ARE 60% OF THE COST UP TO MAXIMUM CATEGORY LIMIT	
	OVERALL LIMIT	BENEFIT PERIOD
<b>HEALTH CHECKS*</b>		
Breast examinations (e.g. mammograms/x-rays)	\$150	Calendar year
Bone density tests		
Skin cancer screening		
Bowel/prostate cancer screening		
Eye screenings		
<b>HEALTH MANAGEMENT*</b>		
Quit smoking programs <sup>1</sup>	\$100	Calendar year
Weight management programs <sup>1</sup>		
Stress management courses <sup>1</sup>		
Gym membership/ personal training <sup>2</sup>		

<sup>1</sup> Must be approved by CBHS Corporate Health.

<sup>2</sup> CBHS Corporate Health can only pay a benefit for gym membership/personal trainer where the gym/personal trainer service is provided as part of a health management program, certified by your GP or a recognised provider confirming that the gym/personal trainer program is a health management program. Approval form is available from CBHS Corporate Health website. Please note that GP consultations are not covered by CBHS Corporate Health.

\* CBHS Corporate Health is only able to pay a benefit towards selected scans, screenings and tests when they are NOT covered by Medicare. Your GP or provider will be able to advise you if your scan, screen or test meets Medicare criteria for benefits.



### Dental Choice Network

The dental Choice Network is a group of dental service providers who have committed to reducing or removing the gap for selected preventative dental services that you would usually pay between the dentist's charges and the CBHS Corporate Health benefit. By choosing to use a dentist in the network you will have no out-of-pocket expenses for these selected services.

### Optical Choice Network

By visiting an optical Choice Network provider, you receive benefits of 100% of the cost for all optical frames, lenses and contact lenses from a selected range, up to the maximum overall limits. These services may also be subject to known gaps, where you will know in advance what out-of-pocket expenses you may incur.

## Understanding your Extras cover

Standard Extras 60 benefits are based on 60% of the cost the provider charges you up to an overall limit.

### Benefit period

Each group of services within Extras covers has an overall limit on the amount you can claim. All limits are based on per person per calendar year.

### Extras waiting periods

DESCRIPTION	CALENDAR MONTHS
Major dental	12 months
Prescribed optical appliances	6 months
All other services	2 months

### Keep your non-student dependants covered

This product provides an option to keep your non-student dependants under 31 years of age, on your cover, providing they meet the non-student dependant criteria. An additional contribution amount will apply. More information is available at [cbhscorporatehealth.com.au](http://cbhscorporatehealth.com.au).