

Enhanced Extras

Effective 1 September 2020.

This information is important, please read thoroughly. For more information please refer to your Member Guide or call us on 1800 333 004.

Dental

Extras treatments	Amount you can claim		Annual limit per person, per calendar year	Total annual claiming limit	Waiting period (months)
	At all other providers	At smile.com.au dentists ⁵			
General and Preventative Dental¹	70%	80%	\$1,000	service limits apply	2
No Gap Dental ² available through smile.com.au	Not available	100%			
Major Dental³					
Periodontics (gum treatment)	70%	80%	\$800	\$1,000 combined Major Dental limit per person, per calendar year	12
Endodontics (root canal treatment)	70%	80%	\$800		
Occlusal therapy	70%	80%	\$800		
Crowns and bridges	70%	80%	\$800		
Dentures and implants	70%	80%	\$800		
Oral surgery (e.g. wisdom teeth)	70%	80%	\$800		
Orthodontics⁴	70%	80%	\$800	\$3,200 Lifetime limit	12

By using the smile.com.au dental network, you can significantly reduce your out-of-pocket dental expenses.

Your dental extras explained

1. General and Preventative Dental

General and Preventative Dental includes a wide range of common dental procedures including check-ups, x-rays, cleaning, fluoride treatments, fillings and simple teeth extractions. There are limits to the number of Preventative Dental treatments that may be claimed in a calendar year.

Preventative Dental service limits include one comprehensive oral examination and two periodic dental examinations, per person, per calendar year.

There are a range of dental procedures that cannot be claimed when provided on the same day e.g. a filling on a tooth that has been removed. Dental benefits for some procedures cannot be paid unless tooth identification is supplied by the provider.

2. No Gap Dental

No Gap Dental benefit is available on eligible preventative dental services to members who have served the two-month waiting period and are using a smile.com.au dentist.

Please note this benefit is included in the combined General and Preventative Dental annual limit.

This benefit is limited to one service per treatment group per year for each person listed on the policy. Eligible No Gap Dental item numbers for each treatment group are:

Oral examinations

- 011 (Comprehensive oral examination)
- 012 (Periodic oral examination)
- 013 (Oral examination limited)

Scale and clean

- 111 (Removal of plaque and/or stain)
- 114 (Removal of calculus – first visit)
- 115 (Removal of calculus – subsequent visit)

Fluoride treatment

- 121 (Topical application of remineralisation and/or cariostatic agents, one treatment)

Mouthguard

- 151 (Provision of a mouthguard)

3. Major Dental

Major Dental includes endodontics, occlusal therapy, crowns, bridges, complete and partial dentures, dental implants, periodontics and oral surgery (includes surgical teeth extractions e.g. wisdom teeth).

4. Orthodontics with smile.com.au

smile.com.au is a dental network – it does not have orthodontists in its network. However, some dentists do provide basic orthodontic treatments that are eligible to receive smile.com.au Dental Network benefits including reduced fees and higher percentage back (e.g. Invisalign, Snap-On Smile, Fastbraces, Myobrace and ClearCorrect).

5. smile.com.au

We have partnered with smile.com.au to make dental care more affordable and accessible for our members. Members who have extras with dental cover will save 15–40% off* all dental treatments performed by a smile.com.au approved dentist. In order to view the list of dentists to book with please visit member benefits at aia.com.au/health

These savings are in addition to your existing AIA Health Insurance Extras benefits. This means lower out-of-pocket costs for any treatment, as smile.com.au dentists will reduce their normal fees by at least 15%.

With over 2,400 approved dentists in the smile.com.au network, chances are there is one near you.

*Savings may vary between dentists. It is recommended that members obtain a quote prior to treatment.

Enhanced Extras

Non-Dental

Extras treatments	Amount you can claim		Annual limit per person, per calendar year	Additional information	Waiting period (months)
	Benefit amount	AIA Vitality Boost with AIA Vitality Silver Status or above ⁶			
Optical (prescription lenses, contacts and frames only)	70%	80%	\$250		6
Non-PBS Pharmaceuticals ⁷	up to \$40 per item		\$300		2
Therapies					
Physiotherapy (including hydrotherapy and myotherapy)	70%	80%	\$600		
Antenatal and postnatal services ⁸					
Chiropractic	70%	80%	\$400		
Osteopathy					
Speech therapy	70%	80%	\$200		
Audiology	70%	80%	\$200		2
Eye therapy	70%	80%	\$200		
Occupational therapy	70%	80%	\$200		
Podiatry	70%	80%	\$250		
Psychology	70%	80%	\$200		
Acupuncture	70%	80%	\$200		
Remedial massage	70%	80%	\$200		2
Health aids					
Medically prescribed appliances ⁹	70%	80%	\$400	Benefit replacement periods apply	12
Hearing aids	70%	80%	\$400	one per person per three years	
Wellness					
Swimming lessons ¹⁰	70%	80%	\$200		
Weight management programs (including dietetics) ¹¹	70%	80%	\$350		
Smoking cessation ¹²	70%	80%	\$150		2
Health checks ¹³	70%	80%	\$200		

Unless stipulated otherwise, consultations must be one-on-one with a registered provider.

Your non-dental extras explained

6. AIA Vitality and AIA Vitality Boost

At AIA Health Insurance, we believe health insurance should help people live healthier, longer, better lives. That's why we offer our policyholders (and partner where applicable) access to AIA Vitality, the science-backed health and wellbeing program that rewards you for getting to know your health and taking steps to improve it.

As a new member, you start your journey to better health at Bronze Status, working your way up to Silver, Gold and Platinum

by completing points-earning activities. The more points you earn, the higher your AIA Vitality Status and the greater the rewards. For more information regarding AIA Vitality please refer to the AIA Health Insurance Member Guide.

AIA Vitality Boost

AIA Vitality Boost is a new extras feature that enables a member to increase their percentage back on non-dental claims by engaging with AIA Vitality. When a member reaches Silver AIA Vitality Status they will automatically receive a further 10% back on their treatments, reducing out-of-pocket costs. Please note that annual limits do not change.

A member's benefit percentage will be boosted by 10% within two to four business days after they achieve Silver AIA Vitality Status. Likewise, a member's benefits will revert down by 10% within two to four business days when they drop to Bronze AIA Vitality Status after their AIA Vitality membership year.

7. Pharmaceuticals

AIA Health Insurance will pay benefits of up to \$40 per item, after the PBS threshold, up to your annual limits for all non-PBS Pharmaceuticals and travel vaccines. Pharmaceutical benefits are only payable on drugs that are a Schedule 4 or Schedule 8 class.

8. Antenatal and postnatal services

Antenatal and postnatal treatments can only be claimed through recognised midwives or lactation consultants.

9. Medically prescribed appliances

A doctor's letter of recommendation is required to be lodged with claims for a medically prescribed appliance, including;

- blood glucose monitor
- blood pressure monitors
- nebuliser pump
- sleep apnoea machine
- TENS machine
- pressure garments
- non-surgical prostheses

AIA Health does not pay benefits for the hire of any health appliance or any consumable products associated with these devices. A benefit replacement rule applies to medically prescribed appliances. A member must wait three years before they can lodge another claim for the same item.

Orthopaedic and orthotic appliances

Orthopaedic and orthotic appliances must be custom made by a podiatrist or orthotist, and not by a chiropractor or physiotherapist. For an orthosis to be custom made, a plaster cast or mould must be taken. Customising, heat moulding, trimming or adjusting an existing 'off the shelf' appliance does not involve this process and therefore does not constitute a custom-made appliance. Orthopaedic appliances attract benefits where the application of which has resulted from, and is required immediately following, an injury or surgery. A doctor's letter of recommendation is required prior to claiming. Orthopaedic and orthotic appliances are subject to a 12-month benefit replacement period.

10. Swimming lessons

AIA Health Insurance will pay benefits for approved swimming lessons provided by recognised swimming providers. Swimming lessons must be for the purpose of improving or preventing a specific medical condition e.g. asthma. A doctor's letter of recommendation is required to be lodged with claims.

11. Weight management programs

AIA Health Insurance will pay benefits for any consultations at a registered dietitian or participation in recognised weight loss programs, including Jenny Craig, Weight Watchers and Fernwood Food Coaching. A doctor's letter of recommendation is required to be lodged with claims.

12. Smoking cessation

AIA Health Insurance will pay benefits for approved smoking cessation programs (Allen Carr's Easyway, quitstopnow.com, quitline, nicorette.com.au, nicabate.com.au). Only the cost of the program is covered; the cost of medications and nicotine replacement products such as patches, gum and lozenges is not covered. Members can only claim their Allen Carr Program benefit once per year, either through AIA Vitality or AIA Health Insurance.

13. Health checks

AIA Health Insurance will pay benefits for preventative health checks provided by recognised providers, including:

- mammograms and bowel cancer screening kits (one each every two years)
- prostate cancer and skin cancer checks (one each per year).

Note: if a member has claimed a health check through Medicare, we will not pay for that claim again.

Important information about your Extras cover

How we communicate with you

As our primary method of communication is email, it is important that your contact details are kept up to date with your current email address to ensure you're able to receive any correspondence.

Recognised providers

Extras can be claimed from any practitioner in a private practice who is appropriately registered with recognised bodies approved by AIA Health Insurance, where there is no Medicare benefit payable. Your provider can confirm they are recognised or you can call us on 1800 333 004.

Waiting periods

Waiting periods are the period of time during which a member is not entitled to the benefits of the policy. Waiting periods can apply when changing your cover to include new or upgraded services. If you're switching to AIA Health Insurance from another equivalent policy, you won't need to re-serve waiting periods already served with the previous health insurer.

Benefit Replacement Periods

Benefit replacement period is the time you need to wait after purchasing an item covered by us before you can receive further benefits to replace the item. All medically prescribed appliances and hearing aids have a benefit replacement period of three years for purchasing or replacing the same item.

AIA Health Insurance may make changes to this cover from time to time, including adding or reducing the benefits or services available to members, and that notice of such changes will be provided via email in accordance with the PHI Act, Code of Conduct and Australian Consumer Law.