

Bronze Extras

BE (Closed to new members)

This information is important, please read and retain for future reference.

Bronze Extras is an ideal option if you want to claim on popular extras services such as dental and optical.

Waiting periods

Waiting periods exist to protect members from claims made by those who join the fund or increase their level of cover because they have an ailment or illness that may require treatment.

Waiting periods will apply to:

- New memberships (previously uninsured).
- Additions to a membership (unless the addition/s has already served all waiting periods with GMHBA or another fund) except newborns, adopted and permanent foster children where the family membership has been in existence for at least 2 months.
- Existing GMHBA memberships, and transfers to GMHBA from another fund where the level of cover and/or benefit entitlement is upgraded or increased and/or where the waiting periods have not been completed.

Extras Service	Waiting Periods	Benefit
Dental		
Major Dental (see important note for dental)	12 months	
Orthodontic – Benefits example: Fixed appliance treatment – upper and lower jaw treatment by a registered specialist	12 months	
Maximum benefits per calendar year		75% up to \$300 per year
Maximum benefit per course of treatment		\$900
Lifetime benefit limit		\$1,050
Dentures (see important note for dental)	12 months	
New full upper and lower dentures per 2 years		\$420
Combined crown and bridgework (see important note for dental)	12 months	
Annual limit per person per calendar year		\$450
Indirect restorations (see important note for dental)	12 months	
Annual limit per person/single membership each calendar year		\$350
Annual limit per family membership[each calendar year		\$700
Implants (see important note for dental)	12 months	
Annual limit per person each calendar year		\$400
General Dental (For more information see general dental note)	2 months	
a) Diagnostic services	2 months	Set benefits apply
b) Preventative services e.g. periodic examination 2 per calendar year, removal of plaque 3 per calendar year. Annual limit per person per calendar year.	2 months	Up to \$200 per person

Important note: The table opposite must be read along with the footnotes below

Important note for Dental: The benefits shown are the annual limits for each type of dental service. There are further sub limits within some of these dental services e.g the individual benefit for one crown on Bronze Extras is \$225

General Dental – There are a range of dental procedure that cannot be claimed when provided on the same day e.g. a filling on a tooth that has been removed. There are also limits on the number of dental procedures you can have e.g. periodic examinations are limited to two per calendar year.

Dental benefits for some procedures cannot be paid unless tooth identifications (ID) are supplied by the provider.

The general dental limits for dental examinations and scale and clean procedures are available per person on a calendar year basis.

For services other than Dental, benefits for one initial consolation are available each calendar year

Preventative Dental – Benefits are based on specific item numbers. We recommend you contact GMHBA for a benefit estimate to confirm the benefit payable.

c) Simple extractions (not including surgical extractions of wisdom teeth)	2 months	Set benefits apply
d) Restorative services (limited benefits apply to precious restorations)	2 months	Set benefits Apply
Annual limit (see important note for dental)	12 months	
Annual limit per person each calendar year		\$1,000
Fluoride dietary supplement¹	2 months	
Benefit of up to		85%
Maximum benefit per person each calendar year		\$45
Occupational therapy²	2 months	
Initial visit		\$31
2-10 subsequent visits		\$21
Further visits		\$17
Annual limits per person /single membership each calendar year		\$350
Annual limit per family membership each calendar year		\$600
Optical³	6 months	
Prescription spectacles, contact lenses and frames – benefit of up to		80%
Annual limit per person each calendar year		\$170
Orthopaedic appliances⁴	12 months	
Benefit of up to		80%
Maximum benefit per item		\$115
Limit per person every 3 years		\$400
Orthopaedic appliance repairs	2 months	
Annual limit per person each calendar year		\$40
Pharmacy – private script⁵	2 months	
Members pay the first maximum PBS contribution then the following benefit is paid towards the balance		\$40
Annual limit per person/single membership each calendar year		\$250
Annual limit per family membership each calendar year		\$400
Physiotherapy/Myotherapy/Hydrotherapy⁶	2 months	
Initial visit		\$31
2-10 subsequent visits		\$21
Further visits		\$17
Class attendance		\$10
Annual limit per person/single membership each calendar year		\$350
Annual limit per family membership each calendar year		\$600
Prostheses (non-surgical)⁷	12 months	
Benefit of up to		80%
Maximum benefit per item		\$300
Maximum benefit per person every 3 years		\$400

1. Fluoride dietary supplement - Benefits are only payable towards the cost of dietary fluoride supplements (tablet or liquid form) dispensed by a chemist or dentist in private practice.

2. Occupational therapy - The annual limit of \$350 per person/single membership and \$600 per family membership each calendar year includes combined benefits for physiotherapy, myotherapy, occupational therapy and hydrotherapy.

3. Optical - Non-prescription sunglasses and repairs are excluded.

4. Orthopaedic appliances (GMHBA approved) – Must be custom made or approved by GMHBA. A doctor's letter recommending the appliance must accompany each claim for benefits. Orthopaedic appliances attract benefits where the application of which has resulted from, and is required immediately following the injury or surgery to the injury necessitating the appliance, for purposes other than or additional to support. For an appliance 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. There are some conditions therefore we recommend you call 1300 446 422.

The limit of \$400 per person is available every three years for orthopaedic appliances.

5. Pharmacy - Private Script Benefits are only payable towards the cost of prescription pharmaceuticals dispensed via a provider in a private practice. Benefits are not payable towards the cost of contraceptives or NHS (PBS) prescriptions, food supplements, natural therapies (including Modifast/Optifast), over the counter items purchased with or without a prescription and pharmaceuticals purchased overseas and not listed on the Australian Register of Therapeutic Goods.

6. Physiotherapy/Myotherapy/Hydrotherapy – For physiotherapy and hydrotherapy only class attendance is limited to \$240 per person each calendar year and this limit is included with your annual limit. Benefits will be paid for one consultation and/or treatment per provider per day. Physiotherapy consultation must be for a minimum of 15 – 20 minutes to qualify for one-on-one physiotherapy benefits.

The annual limit of \$350 per person/single membership and \$600 per family membership each calendar year includes combined benefits for physiotherapy, myotherapy, hydrotherapy and occupational therapy.

7. Prostheses (non-surgical) – Prostheses include a range of approved non-surgically implanted prostheses (eg wigs). A doctor's letter of recommendation must accompany each claim for benefits. We recommend you contact GMHBA for a benefit estimate to confirm the benefit payable.

The limit of \$400 per person is the benefit available for prostheses every three years.

Important

All extras services must be provided by practitioners in a private practice who are appropriately registered with recognised bodies approved by GMHBA. We recommend you contact us for a benefit estimate before commencing treatment to confirm the benefit payable. For services other than dental, benefits for one initial consultation per therapy type are available each calendar year.

Find out more

If you're planning treatment, please call us to discuss your options to ensure you're covered and have served all relevant waiting periods.

For further information please call 1300 446 422, visit your local branch or gmhba.com.au.