TOP EXTRAS PRODUCT SUMMARY

as at 30 June 2025

Comprehensive extras cover with an extensive range of services to supplement your HCi eligible Gold or Silver Plus hospital cover.

features

access to a range of additional health management programs*

easy to switch without new waiting periods*

fast & easy claiming options

WITH HCi YOU'LL BE

- ✓ part of our member focussed, not-for-profit health fund
- ✓ able to log into Online Member Services (OMS) at any time to check your cover, make claims securely and submit documents

Online Member Services

Call: **1800 804 950**

Email: **enquiries@hciltd.com.au**

Visit: **hciltd.com.au**

Come into our office:
25 Cattley Street, Burnie TAS 7320

** Eligibility conditions apply*

A Registered Private Health Insurer ABN 43 009 579 088

TOP EXTRAS
PRODUCT SUMMARY
as at 30 June 2025

HCi

This is an overview of our Top Extras product. It is not a complete description of the available cover and should be read in conjunction with the HCi Member Guide and other information available on our website. Claims are payable up to your annual per person limits, including any sublimits and policy caps, and only for services approved by HCi and delivered by providers in Australia that are formally recognised by HCi. Waiting periods may apply before claims are payable.

COMMON SERVICES	ANNUAL LIMIT^	SUB LIMIT PER YEAR^	WAITING PERIOD
General dental	**$1,650 (capped at $4,950/policy)**		**2 mths**
Individual benefits apply for different services.			
Major dental	**$1,650 (capped at $4,950/policy)**		**12 mths**
Individual benefits apply for different services.			
Periodontics		$700	
Endodontics		$700	
Prosthodontics (dentures*)		$1,000	
Prosthodontics (crowns & bridgework)		$1,000	
Prosthodontics (implants)		$1,000	
Orthodontics#		$1,000	
Optical	**$300 (capped at $900/policy)**		**6 mths**
Prescription glasses or contact lenses			
Physiotherapy	**$750 (capped at $2,250/policy)**		**2 mths**
Individual benefits apply for different services			

Understanding claim limits

A limit is the maximum you can claim for a specified group of services for each person in a calendar year. Each limit may contain sub limits for specific services. An annual policy cap also applies for multi-person policies. Please see our website for a more detailed explanation.

Dental services

Dental treatment service and reasonability rules may also apply. Its always best to get an itemised quote from your dentist and contact us before treatment to check what you're covered for.

^ per calendar year per person (unless stated otherwise) with an annual policy cap applying for multi-person policies.

 # Orthodontics have a $3,000 lifetime limit per person.

** Includes one upper and one lower set of dentures each two years*

HCi may change its products, benefits, and terms and conditions from time to time. We will notify members as soon as practicable before any detrimental changes.

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COMMON SERVICES	ANNUAL LIMIT^	SUB LIMIT PER YEAR^	WAITING PERIOD
Pharmaceuticals*	**$1,000 (capped at $3,000/policy)**		
Generally $100 per eligible prescription. An annual medical eligibility declaration may be required for some pharmaceuticals			
Weight loss, baldness and erectile dysfunction prescriptions		$600 (combined sub limit)	2 mths
Medical Botox		$600	2 mths
Medicinal cannabis		$600	12 mths
Ambulance Cover			
HCi cover may include your approved state based ambulance subscription or emergency (road only) ambulance trips. Please refer to our website as these rules vary between states.			
Complementary therapies	**$500 (capped at $1,500/policy)**		**2 mths**
Includes cover for chiropractic/osteopathic and Chinese medicine consultations, plus remedial massage and acupuncture treatments. Individual benefits apply for different services.			
Other treatments	**$1,000 (capped at $3,000/policy)**		**2 mths**
Individual benefits apply for different services			
Podiatry		$400	
Dietetics/nutrition		$200	
Orthoptics (eye therapy)		$400	
Occupational therapy		$400	
Orthotics (custom made)		$260	
Orthotics casting		$130	
Speech therapy		$400	
Psychology	**$300 (capped at $900/policy)**		**2 mths**
Generally $70 per service (consultations only)			
Audiology	**$250 (capped at $750/policy)**		**2 mths**
Generally $50 per service (consultations only)			
Hearing Aids	**$2,000 (capped at $6,000/policy)**		**36 mths**
Includes cover for two hearing aid devices per 3 years			

^ per calendar year per person (unless stated otherwise) with an annual policy cap applying for multi-person policies
** Exclusions apply - see our website for details. Government co-payment applies.*

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as at 30 June 2025

COMMON SERVICES	ANNUAL LIMIT^	SUB LIMIT PER YEAR^	WAITING PERIOD
Health Management	**$350 (capped at $1,050/policy)**		**2 mths**
Only applies to approved programs. Individual benefits and conditions apply - see our website for details.			
Quit smoking program		$200	
Weight loss program		$200	
Diabetes education		$200	
Health screening checks		$250	
Home nursing	**$500 (capped at $1,500/policy)**		**2 mths**
Generally $50 per service. Covers medical treatment nursing only - not home care.			
Laser eye surgery#	**$1,500 (capped at $4,500/policy)**		**36 mths**
Health appliances and aids	**$1,000 (capped at $3,000/policy)**		**12 mths**
Blood glucose monitors, TENS machine, Nebuliser, Blood pressure monitor*		$500 every 3 yrs	
Sleep apnoea (CPAP) appliances*		$750 every 3 yrs	
CPAP mask & hose replacements		$150	
Non-surgical prosthesis		$250	
Surgical footwear & custom made medical braces	**$750 (capped at $2,250/policy)**		**12 mths**
Travel & Accommodation	**$300 (capped at $900/policy)**		**12 mths**
Generally up to $125 per eligible trip. Only applicable to Top Extras members who **also** have HCi Gold hospital cover.			
Vaccinations	**$250 (capped at $750/policy)**		
Individual limits apply for flu, travel and many other eligible vaccines			
Additional Benefits			
Selected health services and programs to help maintain your health. Please see our website for details and eligibility conditions.			

^ per calendar year per person (unless stated otherwise) with an annual policy cap applying for multi-person policies

 # LASIK and PRK/ASLA (Advanced Surface laser Ablation) surgeries performed by a registered/accredited provider.

** Appliances are subject to receipt of a Medical Eligibility Declaration. Only one of each type of appliance can be claimed each 3 years.*

TOP EXTRAS PRODUCT SUMMARY

SWITCHING TO HCI?

It's easy to switch to HCi from another fund – and we'll even arrange to cancel your old cover for you!

When you join, tell us about any previous cover and we'll do the rest. We'll generally recognise equivalent waiting periods already served on your prior cover providing you join HCi within 30 days of leaving your old fund – waiting periods will generally apply for higher levels of cover.

WAITING PERIODS

A waiting period applies when you join HCi, or change your cover to include new or upgraded services. We won't pay claims for relevant items during a waiting period.

PRIVACY

HCi respects your privacy and is committed to keeping your personal information safe. To obtain more information about HCi's Privacy Policy, refer to our website

CLAIMING MADE EASY

Claims can be made using your membership card (through eligible providers), OMS (Online Member Services), a claims form or in our office.

We pay eligible claims for covered services if

- any relevant waiting periods are complete
- the provider is HCi recognised and approved
- goods and services are supplied within Australia
- it is claimed within 2 years of the date of service
- a receipt and any required documentation (including a claim form if not using OMS) is provided

Our cover doesn't include a few things, such as

- treatments and services provided by a family member or business partner
- non-prescription glasses and sunglasses, or optical consultations
- items for sport, recreation or entertainment
- exercise accessories and equipment
- repeat treatments or services on the same day
- claims above what you paid (eg if you had a discount so paid $40 instead of $60, we will only assess a claim for $40)
- materials or supplies associated with Chinese medicine and health management programs
- pharmaceuticals not needing a prescription, contraceptives, anabolic steroids and drugs not approved in Australia.

ADDITIONAL INFORMATION

Our website details all our hospital and extras cover options. You can also find fact sheets, forms and our member guide on the site.

Some other things worth noting:

- Claims are not payable for services where you may be able to claim compensation, damages or benefits from another source (eg WorkCover) whether or not you received any compensation from that source.
- Claims are not payable during any period in which your membership is unfinancial (ie not paid at least 2 weeks in advance) or suspended (eg while overseas).
- Vaccination claims require a receipt confirming details of who received what vaccination
- Eligible pharmacy claims are paid less the applicable co-payment amount (see our website for details) and must be accompanied by an official pharmacy receipt.
- Health appliances and aids, medical botox and medicinal cannabis are only covered when noted as medically necessary in a Medical Eligibility Declaration.
- Travel and accommodation costs are only payable for the patient attending a medical specialist or hospital more than 50kms from their normal residence within their home state. It does not cover accompanying family members.