Ancillary Lite

'Lite on benefits - Lite on price'

With Ancillary *Lite* we offer cover for just the essentials such as general dental, optical, physiotherapy and remedial massage. Being *'lite'* on the benefits means you don't have to pay for the complete package of health services you don't need.



What You Are Covered For

Service	Description	Benefits Per Service	Annual Limit Per Person (Calendar Year)
Emergency Ambulance Transport Pensioners must claim the pensioner discount first	Transport costs (Please refer to the Products and Benefits Guide for further clarification)	100%	Unlimited
Dental This is not a comprehensive list of our dental benefits, please see the Dental Schedule insert inside.	Periodic examination	80% up to \$100	\$700 (\$400 sub limit for all major dental)
	Plaque removal	80% up to \$100	
	Fluoride treatment	80% up to \$100	
	Tooth extraction	80% up to \$120	
	Crowns & bridges	Up to 80% of cost	\$400 sub limit
	Fillings	Up to 80% of cost	\$400 sub limit
	Periodontics	Up to 80% of cost	\$400 sub limit
	Root canal treatment	Up to 80% of cost	\$400 sub limit
	Implants	Nil	Nil
	Dentures	Nil	Nil
	Orthodontics	Nil	Nil
Optical Must be accompanied by a relevant sight correction prescription.	Single lens Lenses (pair) Frames (for prescription lenses) Repairs Contact lenses Contact lens solution	80% of total cost	\$200
Pharmacy Available only on prescription	Prescriptions related to a medical condition costing over the Pharmaceutical Benefits Scheme (PBS) limit (\$31.60 as at 1/01/2024)	Up to \$50 per script after deducting the PBS amount	\$250
Physiotherapy	Short Treatment/ Hydrotherapy	80% Up to \$25	\$300 combined
	Standard Treatment	80% Up to \$26.50	
	Extended Treatment	80%Up to \$37.50	
Chiropractic/Osteopathy	Registered practitioner visit	80% Up to \$25	
Podiatry	Registered practitioner visit	80% Up to \$25	
Remedial Massage/Acupuncture	Registered practitioner visit	80% Up to \$20	\$100 combined

^{*} In order for benefits to be paid on general treatments, the health practitioner must be appropriately qualified and **registered** with their relevant association. To confirm exactly what benefits are payable on any particular treatment, contact ACA Health with the specific item number or description of the service.

What's Not Covered?

- $oldsymbol{\mathsf{X}}$ Services not listed above (including orthodontic treatment)
- x Services while a membership is in arrears
- × Services incurred before waiting periods are served
- ${\bf x}~$ Services where there is an entitlement under compensation insurance
- ${f x}$ Services claimed over 2 years after the service date
- X Products or services purchased in or from countries other than Australia
- × No special assistance
- x Services performed by a Podiatric Surgeon (Inpatient)
- $oldsymbol{\mathsf{X}}$ Naturopathy, Herbalism & Homeopathy

Waiting Periods		
Optical	4 months	
Dental	9 months	
All other services	2 months	

On joining general treatments cover for the first time, waiting periods must be served before benefits will be paid. If you upgrade your general treatments cover, waiting periods will apply before the higher benefits will be paid.

How to claim your benefits

For many services you can claim electronically 'on the spot' using your membership card. This means your benefits are paid to the health care provider immediately and you only pay the difference. If your health care provider does not have electronic claiming available, you can claim online or via post. To claim online through acahealth.com.au, login through 'Member login' and follow the prompts on the 'Make a Claim' page to upload your invoice and submit the claim. To claim via post, return a completed and signed claim form with the original invoices. You can download and print a claim form from our website. Our claims assessor will assess your claim and pay the benefits within 3-5 working days of receiving your claim. If you have not yet paid the provider for the service, a cheque will be made payable to them and you will need to present it to the provider with the gap payment.

^{**} Annual limits do not rollover to the next calendar year. Benefits are paid according to the limit of the year in which the services are provided/purchased.

Dental Benefits Schedule

Benefits will be 80% of cost up to the maximum limits shown below. All benefits and limits are subject to the annual calendar year limit of \$700.

Overall Annual Limit Per Person \$700				
Service	Item No.	Benefits Per Service		
Diagnostic & Radiological Services				
Comprehensive oral examination	011	\$100		
Periodic oral examination	012	\$100		
Oral examination – limited	013	\$100		
Consultation	014	\$100		
Extended consultation (30 minutes or more)	015	\$100		
Intraoral radiograph per exposure	022	\$100		
Full x-rays	031-039	\$100		
Other	016, 017, 059, 071, 074-084, 087-091	\$100		
Preventative Services				
Removal of plaque and/or stain	111	\$100		
Removal of calculus – first visit	114	\$100		
Removal of calculus – subsequent visit	115	\$100		
Topical application of remineralisation agents, one treatment.	121	\$100		
Application of a cariostatic agent – single tooth	123	\$100		
Provision of a mouthguard – indirect	151	\$100		
Bimaxillary mouthguard – indirect	153	\$100		
Fissure sealing – per tooth	161	\$100		
Periodontics (Yearly sub-limit: \$400)				
Supporting structures treatments	213-251	80% benefit		
Oral Surgery (Yearly sub-limit: \$400)				
Removal of tooth or part	311,314	\$120		
Surgical removal of tooth or part(s) thereof	322	\$168		
requiring bone removal and/or tooth division	324	\$320		
Surgically implanted Medical Devices and Human Tissue Products**	331-345	80% benefit		
Maxillo-facial injuries	351-359	80% benefit		
Dislocations	361-363	80% benefit		
Osteotomies	365-366	80% benefit		
General surgical	371-379	80% benefit		
Other surgical procedures	381-399	80% benefit		
Endodontics (Yearly sub-limit: \$400)				
Pulp and root canal treatments	412-421, 431-438, 445, 452-457, 459	80% benefit		
Restorative Services (Yearly sub-limit: \$400)				
Metallic restoration – 1 surface	511	\$200		
Metallic restoration – 2 surfaces	512	\$200		
Metallic restoration – 3 surfaces	513	\$200		
Metallic restoration – 4 surfaces	514	80% benefit		
Metallic restoration – 5 surfaces	515	80% Benefit		
Adhesive restoration – 1 surface-ant/post tooth	521, 531	\$200		
Adhesive restoration – 2 surface-ant/post tooth	522, 532	\$250		
Adhesive restoration – 3 surface-ant/post tooth	523, 533	\$250		
Adhesive restoration – 4 surface-ant/post tooth	524, 534	80% benefit		
Adhesive restoration – 5 surface-ant/post tooth	525, 535	80% benefit		
Adhesive restoration - veneer	526, 536	80% benefit		
Pin retention – per pin	575	\$30		
Other	541-556, 571, 572, 574, 575, 577-598	80% benefit		

Overall Annual Limit Per Person \$700					
Service	Item No.	Benefits Per Service			
Prosthodontics: Crowns Bridges & Implants (Yearly sub-limit: \$400)					
Full crown – polymeric material - ceramic	611, 613	\$400			
Full Crown – veneered - indirect	615	\$400			
Full Crown - metallic - indirect	618	\$400			
Core for crown including post - indirect	625	\$176			
Preliminary restoration for crown - direct	627	\$116			
Other	629-691	80% benefit			
Emergency/General/Miscellaneous					
Palliative care - per visit	911	\$36.70			
After hours call out	915	\$15			
Anaesthesia & sedation	941-944, 949	80% benefit			
Splinting/stabilisation	981	80% benefit			
Enamel stripping - per appointment	982	80% benefit			
Occlusal Treatment/Therapy (Yearly sub-limit: \$400)					
Occlusal treatments	963, 965-968, 972	80% benefit			
No Benefits Payable on the following items					

018, 019, 041-048, 051-053, 061, 072, 073, 113, 116-119, 122, 131, 141, 142, 165, 171, 411, 451, 775, 711-719, 721-724, 727, 728, 731-739, 741-755, 761-769, 771-790, 811-882, 916, 919-921, 926-929, 945, 948, 961, 964, 971, 984-987, 990, 999.

^{**} Formerly known as Prostheses







