

# Flex Ancillary

*'Basic extras cover with a single limit'*

Make every dollar count with ACA Health's Flex Ancillary. Designed just for you with 60% benefits which you can choose to use your way.



**Please Note: This product is only available for purchase in combination with a Singles ACA Health Hospital policy**

## What You Are Covered For

Service	Description	Benefits Per Service	Annual Limit Per Person (Calendar Year)
Optical <i>Must be accompanied by a relevant sight correction prescription.</i>	Single lens Lenses (pair) Frames (for prescription lenses) Repairs Contact lenses Contact lens solution	60% of cost to a maximum benefit of \$175	\$175
General Dental <i>This is not a comprehensive list of our dental benefits, please see the Dental Schedule insert inside for individual item numbers.</i>	Plaque removal	60% of cost to a maximum benefit of \$650	\$650 combined
	Fluoride treatment		
	Periodic examination		
	Tooth extraction		
	Fillings		
	Periodontics		
Physiotherapy	Short Treatment		
	Standard Treatment		
	Extended Treatment		
Acupuncture	Registered practitioner visit		
Chinese Herbal Medicine Consult	Practitioner fee only		
Exercise Physiology	Registered practitioner visit		
Dietetics	Dietician only not nutritionist		
Vaccinations	Prescribed Vaccinations costing over the Pharmaceutical Benefits Scheme (PBS) amount (\$31.60 as at 1/01/2025)		

\* 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.

\*\* 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.

## What's Not Covered?

- ✗ Ambulance
- ✗ Services not listed above e.g. orthodontic treatment (please see the Dental Schedule insert inside)
- ✗ Services while a membership is in arrears
- ✗ Services incurred before waiting periods are served
- ✗ Services where there is an entitlement under compensation insurance
- ✗ Services claimed over 2 years after the service date
- ✗ Products or services purchased in or from countries other than Australia
- ✗ Services performed by a Podiatric Surgeon (inpatient)
- ✗ Naturopathy, Herbalism & Homeopathy
- ✗ Western Herbal medicines & Chinese Herbal medicines
- ✗ Chronic Disease Management Programs
- ✗ No Special assistance

## 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](http://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.

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.

## Dental Benefits Schedule (subject to annual total benefit limit of \$650 for all services)

Benefits will be 60% of cost up to the maximum limit of \$650. All benefits and limits are subject to the total benefit limit of \$650, per calendar year

Total Benefit Limit is \$650 for all services covered apart from optical but including dental		
Service	Item No.	Benefits Per Service
<b>Diagnostic &amp; Radiological Services</b>		
Comprehensive oral examination	011	60% of cost
Periodic oral examination	012	60% of cost
Oral examination – limited	013	60% of cost
Consultation	014	60% of cost
Extended consultation (30 minutes or more)	015	60% of cost
Intraoral radiograph per exposure	022	60% of cost
Full x-rays	031-039	60% of cost
Other	016, 017, 059, 071, 074-084, 087-091	60% of cost
<b>Preventative Services</b>		
Removal of plaque and/or stain	111	60% of cost
Removal of calculus – first visit	114	60% of cost
Removal of calculus – subsequent visit	115	60% of cost
Topical application of remineralisation agents, one treatment.	121	60% of cost
Application of a cariostatic agent – single tooth	123	60% of cost
Provision of a mouthguard – indirect	151	60% of cost
Bimaxillary mouthguard – indirect	153	60% of cost
Fissure sealing – per tooth	161	60% of cost
<b>Periodontics</b>		
Supporting structures treatments	213-251	60% of cost
<b>Oral Surgery</b>		
Removal of tooth or part	311,314	60% of cost
Surgical removal of tooth or part(s) thereof	322	60% of cost
requiring bone removal and/or tooth division	324	60% of cost
Surgically implanted Medical Devices and Human Tissue Products#	331-345	60% of cost
Maxillo-facial injuries	351-359	60% of cost
Dislocations	361-363	60% of cost
Osteotomies	365-366	60% of cost
General surgical	371-379	60% of cost
Other surgical procedures	381-399	60% of cost
<b>Endodontics</b>		
Pulp and root canal treatments	412-421, 431-438, 445, 452-457, 459	60% of cost
<b>Restorative Services</b>		
Metallic restoration – 1 surface	511	60% of cost
Metallic restoration – 2 surfaces	512	60% of cost
Metallic restoration – 3 surfaces	513	60% of cost
Metallic restoration – 4 surfaces	514	60% of cost
Metallic restoration – 5 surfaces	515	60% of cost
Adhesive restoration – 1 surface-ant/post tooth	521, 531	60% of cost
Adhesive restoration – 2 surface-ant/post tooth	522, 532	60% of cost
Adhesive restoration – 3 surface-ant/post tooth	523, 533	60% of cost
Adhesive restoration – 4 surface-ant/post tooth	524, 534	60% of cost
Adhesive restoration – 5 surface-ant/post tooth	525, 535	60% of cost
Adhesive restoration - veneer	526, 536	60% of cost
Pin retention – per pin	575	60% of cost
Other	541-556, 571, 572, 574, 575, 577-598	60% of cost

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Service	Item No.	Benefits Per Service
<b>Prosthodontics: Crowns Bridges &amp; Implants</b>		
Full crown – polymeric material - ceramic	611, 613	60% of cost
Full Crown – veneered - indirect	615	60% of cost
Full Crown – metallic - indirect	618	60% of cost
Core for crown including post - indirect	625	60% of cost
Preliminary restoration for crown - direct	627	60% of cost
Other	629-691	60% of cost
<b>Emergency/General/Miscellaneous</b>		
Palliative care - per visit	911	60% of cost
After hours call out	915	60% of cost
Anaesthesia & sedation	941-944, 949	60% of cost
Splinting/stabilisation	981	60% of cost
Enamel stripping - per appointment	982	60% of cost
<b>Occlusal Treatment/Therapy</b>		
Occlusal treatments	963, 965-968, 972	60% of cost
<b>No Benefits Payable on the following items</b>		
018, 019, 026, 041-048, 051-053, 055-058, 061, 072, 073, 113, 116-119, 122, 131, 141, 142, 163, 165, 171, 411, 451, 452-456, 692-697, 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



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