

Value Extras

Our basic and most affordable level of extras cover for a wide range of services, making it ideal for young singles and couples.

No-gap dental

Get 100% back on a range of no-gap preventative dental services through our *More for Teeth* program*.



RT Thank You Program

Our rewards program⁺ helps members access savings on everyday household items like groceries and fuel, as well as shopping and entertainment.



No-gap optical

Choose from our exclusive range of no-gap prescription glasses and enjoy complimentary digital retinal imaging with your eye test, thanks to our *More for Eyes* program*[^].



130+ years strong

As Australia's first registered health fund, we've been looking after hardworking Aussies since 1889. And now we're part of Australia's largest not-for-profit health fund, HCF.



Key features:

- ✓ Affordable level of cover for routine extras services, including general dental, physio, optical and more.
- ✓ Benefits for quit smoking assistance (over-the-counter nicotine replacement therapy).
- ✓ Generous alternative therapies limits for massage and acupuncture.
- ✓ Pharmacy, vaccine and health aids benefits included.

Effective 1 January 2026.

* 100% back through our No-Gap network is available to members with Value Extras. Waiting periods and annual limits apply. Providers are subject to change. We recommend that you confirm your chosen provider is part of 'More for' program prior to your appointment.

[^] Excludes add-ons such as high index material, coatings and tinting.

⁺ RT Health rewards program. See www.rthealth.com.au/rewardsplatform

Treatments covered by this policy

Service	Benefit for each purchase, service or treatment	Annual limit (limits are per person unless otherwise shown)	Waiting periods
Dental			
General dental Includes X-rays, surgical items, preventative dentistry, restorations (fillings), scaling and cleaning, extractions, mouthguard, fluoride application and more.	Each dental item has a set benefit. Call us on 1300 886 123 with the item number of the service you're having and we'll let you know how much you'll get back.	\$500 per person \$1,000 per membership Dental service limits apply. Max 2 check-ups, 2 scale and clean, and 1 fluoride treatment per person, per year.	2 months
Major dental	Not covered		
Orthodontics			
Optical			
Optical	All prescription frames, lenses and contact lenses: 100% of the cost	\$200	2 months
Specialist therapies			
Physiotherapy	Initial consultation: \$40 Subsequent consultation: \$35 Group consultation: \$25	\$350 per person \$700 per membership	2 months
Chiropractic and osteopathy	Initial chiropractic consultation: \$37 Subsequent chiropractic consultation: \$30 X-ray: \$60 Initial osteopathy consultation: \$39 Subsequent osteopathy consultation: \$31	\$300 per person \$600 per membership Combined chiropractic and osteopathy limit	
Dietetics	Initial/subsequent consultation: \$35	\$300 per person \$600 per membership	
Occupational therapy	Initial consultation: \$38 Subsequent consultation: \$36	\$300 per person \$600 per membership	
Orthoptics	Initial consultation: \$30 Subsequent consultation: \$25	\$300 per person \$600 per membership	
Alternative therapies (Consultations only) Benefits are paid for consultations only. No benefits are payable for additional products associated with the treatment e.g. needles, remedies, oils.			
Remedial massage	Initial/subsequent consultation: \$30	\$200 per person \$400 per membership	2 months
Acupuncture	Initial consultation: \$31 Subsequent consultation: \$26	\$300 per person \$600 per membership	
Pharmaceuticals			
Pharmaceuticals	Up to \$35 per non-PBS prescription payable after you have paid the equivalent of the PBS patient copayment amount for each item.	\$300 per person \$600 per membership	2 months
Vaccines	Up to \$50 per vaccine	\$150	
Over-the-counter nicotine replacement therapy			
Over-the-counter nicotine replacement therapy	50% of the cost. Benefit applies to approved products only. Please check with us prior to purchasing.	\$100 per person \$200 per membership	2 months

Treatments covered by this policy cont.

Service	Benefit for each purchase, service or treatment	Annual limit (limits are per person unless otherwise shown)	Waiting periods
Health aids (Purchase only) A letter from a medical practitioner is required with all Health aid claims. No benefits are payable for consumables used in conjunction with any of these items. CPAP and BPAP machine benefits can only be claimed once every 3 calendar years.			
Artificial eye/limb, blood glucose monitor, blood pressure monitor, braces/splints, BPAP and CPAP machine, compression garments (non-sports), crutches (hire or purchase), external breast prosthesis, nebuliser, oral appliance (984), oxygen concentrator/cylinder, TENS machine (excluding circulation boosters/massagers/reflexology devices), wheelchair, wig	80% of the cost	Up to \$300 per item	\$300 per person \$600 per membership 12 months
Wheelchair hire	Up to \$30	Sub-limit: \$30 per membership	
Low vision aids for ARMD (Age-related macular degeneration)	100% of the cost per non-electronic optical aid, capped at sub-limit	Sub-limit: \$70 per person	
Repairs to health aids	100% of the cost, capped at sub-limit	Sub-limit: \$100 per person/\$200 per membership	

Things you need to know

What's not covered?

There are a few situations where our health insurance doesn't cover you, including but not limited to:

- claims for services by providers not recognised by RT Health, and providers that don't meet RT Health's criteria as set out in the A to Z Membership Guide, available at rthealth.com.au
- claims made 2 years or more after the date of service
- more than 1 therapy service performed by the same provider in any 1 day.

Refer to the HCF Group Fund Rules for further information, available at rthealth.com.au

Waiting periods

A waiting period applies when you first join RT Health, or upgrade your health cover. We don't pay benefits for any items purchased or services received while you're serving a waiting period.

Switching from another health insurer?

If you're switching from another fund within 2 months of leaving your previous health insurer, you may not need to serve additional waiting periods. This applies if you transfer to an equivalent level of cover or if we've waived the waiting periods at the time of joining.

Private health insurance code of conduct



The Private Health Insurance (PHI) Code of Conduct's aim is to improve the standards of practice and service in the private health insurance industry. See a full copy of the code at privatehealth.com.au/codeofconduct

Important information

Read more about your extras cover in our online A to Z Membership Guide which can be found under 'Your Cover' at rthealth.com.au. You can find a copy of the Private Health Information Statement by visiting privatehealth.gov.au

