



Your Extras Cover

Apia Classic and Advanced Extras

What's Covered

Extras are services usually provided outside of a hospital. Medicare does not generally cover these services, so we help you pay for them. This document is a summary of what you have cover for including the amounts you can claim, annual limits and wait periods.

As an Apia Health Insurance member, if you visit a provider in nib's First Choice network, you may pay less out of pocket for eligible services than you would with a provider who is not part of nib's First Choice network. The amount you can claim will still depend on your level of cover, available limits and the service received. To learn more about the First Choice network or find a participating provider, visit health.apia.com.au/find-a-provider.

Please read the Policy Booklet for more information on how your cover works.

Apia Classic Extras

The Extras that people use most.

Extras Covered	Amount You Can Claim Percentage of the cost or a set amount per service, depending on your cover and provider		Annual Limit Maximum amount claimable per person in a calendar year	Waiting Period Applies if you are new to health insurance or if you have recently increased your level of Extras cover
	First Choice network provider	Non-First Choice network provider [#]		
Preventative dental treatment Includes selected examinations, scale and cleans, fluoride treatments and x-rays	60%	Fixed Amount	No annual limit, service limits apply*	2 months
General dental treatment E.g. fillings, basic extractions	60%	Fixed Amount	\$700	2 months
Major dental treatment Includes root canal therapy, crowns, bridges, dentures, oral surgery	60%	Fixed Amount	\$1,300	12 months
Optical appliances E.g. prescription glasses and contact lenses	60%		\$300	6 months
Physiotherapy	60%		\$450	2 months
Ambulance Emergency ambulance transport paid at 100% of the cost [^]	100%		No limit	1 day

[#] For visits to Non-First Choice network providers, please refer to the applicable Private Health Information Statement, or contact your provider before treatment, to understand the fixed amount that may apply.

* A service limit restriction means there's a cap on how often you can claim for certain treatment in a calendar year or across calendar years.

[^] Excludes residents of QLD and TAS who have ambulance services provided by their State ambulance schemes.



Your Extras Cover

Apia Classic and Advanced Extras

Apia Advanced Extras

Additional Extras services like Chiropractic and Osteopathy to suit an active lifestyle.

Extras Covered	Amount You Can Claim Percentage of the cost or a set amount per service, depending on your cover and provider		Annual Limit Maximum amount claimable per person in a calendar year	Waiting Period Applies if you are new to health insurance or if you have recently increased your level of Extras cover
	First Choice network provider	Non-First Choice network provider [#]		
Chiropractic Osteopathy	60%		\$300	2 months
Podiatry (consultations only) Foot orthotics (appliance limits apply)	60%		\$250	2 months
Pharmaceutical prescriptions Benefits only payable for non PBS items. Benefits do not apply to prescriptions dispensed to hospital inpatients	60%		\$250	2 months
Health aids (appliance limits apply) Surgical stockings, CPAP Machine, CPAP parts, pressure garment, walking frame, blood pressure monitor, hip protector, blood coagulation device, erectile dysfunction pump, macular degeneration aid	60%		\$300	12 months
Healthier lifestyle benefit Approved weight management, quit smoking and health management programs (gym, personal trainer)	60%		\$250	6 months
Preventative tests (service limits apply) Thin prep, bone density tests, bowel screening	60%		\$200	6 months
Hearing aids (appliance limits apply)	60%		\$800	36 months
Eye therapy (Orthoptics)	60%		\$200	2 months

[#] For visits to Non-First Choice network providers, please refer to the applicable Private Health Information Statement, or contact your provider before treatment, to understand the fixed amount that may apply.

It pays to review your cover regularly Your life is constantly changing. So, you should remember to review your health cover at least once a year to make sure it doesn't reflect the old you. We make reviewing and updating your cover quick and easy.	Simply visit apia.com.au/health or call us on 1800 274 213
--	--

apia.com.au/health 1800 274 213 - Apia Classic and Advanced Extras 2/2

Apia Health Insurance is issued by nib health funds limited ABN 83 000 124 381 (nib), a registered private health insurer, and is marketed by Platform CoVentures Pty Ltd ABN 82 626 829 623 (PC), a Suncorp Group company. PC is an authorised agent of nib and receives commission from nib. In this document, "we", "us" and "our" means nib. The information contained in this document is current as at 1 October 2026 and is intended as a summary only. This document should be read in conjunction with the Policy Booklet and Fund Rules. Rules and benefits may change from time to time.

nib349007_01102026