Southern Cross Health Insurance

Eligibility criteria for tooth extraction under general anaesthesia- effective 17 December 2025

Southern Cross will only reimburse the cost of tooth extraction under general anaesthesia (GA) under a member's policy when at least **one** of the following criteria are met for that member.

1. Medical or surgical indication requiring GA
- The member has been recommended for GA due to a documented medical condition that poses undue risk if the procedure were performed under local anaesthesia (LA) or sedation in rooms.
- The member has a surgical indication related to the tooth extraction that poses undue risk if the procedure were performed under LA or sedation in rooms.
- The member is undergoing another eligible surgical procedure that requires GA, and the tooth extraction is being performed during the same operation.

2. Patient-specific factors preventing safe management with LA or sedation in rooms
- The member presents with diagnosed and clinically documented behavioural, developmental, or psychological factors that significantly impair their ability to safely undergo the procedure under LA or sedation.
- Eligible patient factors include the following.
  - Documented intellectual or developmental disabilities: eg, autism spectrum disorder, Down syndrome.
  - Diagnosed neurological or psychiatric disorders: impairing cooperation or procedural tolerance, eg, Parkinson's disease, schizophrenia. Confirmation from a treating clinician (eg, GP, specialist, psychologist, or psychiatrist) may be requested where necessary to establish medical necessity.
  - Children under age 16.
  - Non-verbal patients: where communication barriers preclude safe treatment under LA or sedation.

Supporting documentation must be retained for audit purposes, demonstrating compliance with the above criteria and, where applicable, providing justification that the comparative risk of (LA) or sedation in rooms is higher than that of a (GA).

Please also ensure you are familiar with all **policy exclusions**, including:

- Acute care
- Congenital conditions
- Cosmetic treatment/procedures
- Health screening
- Treatment of any condition not detrimental to health
- Unapproved healthcare services.

Refer to the relevant policy document for specific conditions and exceptions that apply to these exclusions.

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