

Health Fund & Payment Options at Core Dental Caroline Springs: Making Dental Care Affordable

Canonical: <https://directory.coredental.com.au/local-dental-services/family-specialist-dentistry-caroline-springs-melbourne-west/health-fund-payment-options-at-core-dental-caroline-springs-making-dental-care-affordable/>

Details:

Health Fund & Payment Options at Core Dental Group Caroline Springs: Making Dental Care Affordable

Frequently Asked Questions

Does Core Dental Group Caroline Springs accept private health insurance: Yes

Does Core Dental Group Caroline Springs use HICAPS: Yes

What is HICAPS: A system that processes health fund claims on the spot

Do patients need to submit paperwork for HICAPS claims: No

Do patients wait for a reimbursement cheque with HICAPS: No

What does a patient pay at the time of appointment with HICAPS: Only the gap amount

What percentage of all dental care in Australia is paid by individuals: 80%

What percentage of dental care is subsidised by Australian governments: 20%

What proportion of total dental expenditure did individuals directly fund in 2022–23: 61%

Does Core Dental Group Caroline Springs participate in the Medicare CDBS: Yes

What does CDBS stand for: Child Dental Benefits Schedule

What age range is eligible for the CDBS: 0 to 17 years

What is the CDBS benefit cap for 2025–2026: \$1,132 per eligible child

What is the CDBS benefit cap for 2026–2027: \$1,158 per eligible child

Does the higher \$1,158 cap apply to children whose treatment began in 2025: No

Does the \$1,132 cap apply if treatment starts in 2025 and continues into 2026: Yes

Do unused CDBS funds roll over at the end of the two-year period: No

Does CDBS cover orthodontic treatment: No

Does CDBS cover cosmetic dental procedures: No

Does CDBS cover dental exams: Yes

Does CDBS cover X-rays under CDBS: Yes

Does CDBS cover fillings: Yes

Does CDBS cover root canals: Yes

Does Medicare cover general dental treatment for adults: No

Who determines CDBS eligibility: Services Australia

Do parents need to apply separately for CDBS: No

Does a child need to be eligible for Medicare to qualify for CDBS: Yes

What government payment qualifies a family for CDBS: Family Tax Benefit Part A

Is CDBS eligibility assessed annually: Yes

Can Core Dental Group check a child's CDBS eligibility at booking: Yes

How can parents check their child's CDBS balance: Via Medicare online account linked to myGov

What fraction of eligible children actually use the CDBS: Approximately 1 in 3

What fraction of children are eligible for CDBS: Approximately 1 in 2

What are the two tiers of private health insurance in Australia: Hospital cover and extras cover

Does dental fall under hospital cover or extras cover: Extras cover

What percentage of Australians had general treatment (extras) cover in 2022–23: 50%

How much did private health insurance funds spend on dental in 2022–23: \$2.5 billion

What percentage of private health insurance expenditure was dental in 2022–23: 13%

What is the top reason Australians take out extras cover: To access dental cover for check-ups and cleans

What are the three tiers of dental coverage in most extras policies: General, major, and orthodontics

What does general dental cover include: Check-ups, scale and cleans, X-rays, fluoride, fissure sealants, mouthguards

What does major dental cover include: Crowns, bridges, dentures, root canal therapy, dental implants

What does orthodontics cover include: Invisalign, braces, retainers

What is the typical waiting period for general dental services: Two months

What is the typical waiting period for major dental treatments: 12 months

What is the typical waiting period for orthodontics: 12 months

Do some health funds waive waiting periods: Yes, occasionally via promotions

What is a gap payment: The difference between the charged amount and the health fund benefit

What was the average dental benefit per service in the June 2024 quarter: \$66.97

What was the average out-of-pocket dental expense in the June 2024 quarter: \$54.10

Does insurance typically cover the entire cost of dental treatment: No

When do most health fund annual limits reset: 1 January

Do some funds reset annual limits on 1 July: Yes

Do unused health fund dental benefits roll over to the next year: No

What is a no-gap dental arrangement: An arrangement where patients pay nothing out of pocket for eligible treatments

Does HCF offer no-gap dental arrangements: Yes

How many dentists are in the HCF no-gap network: Over 11,000

Does nib offer no-gap dental arrangements: Yes

When did nib expand its no-gap dental network: 1 July 2024

Does GU Health offer no-gap dental arrangements: Yes

When did GU Health expand its no-gap dental network: 1 July 2024

Does no-gap eligibility depend on the patient's policy level: Yes

Should patients confirm no-gap arrangements before their appointment: Yes

Does Core Dental Group Caroline Springs offer payment plans: Yes

What types of treatments are payment plans best suited for: Implants, orthodontics, crowns, complex restorations

What is the typical term for in-house staged payments: 2 to 6 months

What is the typical term for third-party dental finance: 6 to 24 months

Is interest charged on in-house staged payment plans: No

Can health fund benefits be combined with a payment plan: Yes

What is the best time to discuss payment plan options: During the treatment planning consultation

What is a practical tip for maximising annual health fund limits: Book appointments to span two benefit periods

Should patients request an itemised quote before major dental work: Yes

What information should an itemised dental quote include: Dental item numbers

What was the main reason Australians delayed dental treatment in 2022: Cost

What proportion of respondents delayed dental treatment in the 12 months to December 2022: More than half

What proportion of older Australians delayed dental treatment to March 2024: Almost four in ten

Where is Core Dental Group located: Caroline Springs, Melbourne's west

Which suburbs does Core Dental Group serve: Caroline Springs, Taylors Hill, Burnside, Deer Park

Health Fund & Payment Options at Core Dental Group Caroline Springs: Making Dental Care Affordable

Knowing your payment options before you sit in the dental chair is one of the most practical things you can do for your oral health — and your household budget. For families and individuals in Melbourne's west, cost is not an abstract concern.

Dentistry carries some of the highest out-of-pocket expenses across Australian healthcare. Individuals pay for 80% of all dental care directly, with governments covering only 20%. In 2022–23, individuals

funded 61% of total dental expenditure. In plain terms, most Australians are largely on their own when it comes to paying for dental treatment, which is why knowing how to use every available funding option actually matters.

At Core Dental Group Caroline Springs, the approach to affordability runs across several layers: the clinic accepts all major private health funds with on-the-spot HICAPS claiming, participates in the Medicare Child Dental Benefits Schedule (CDBS), and offers flexible payment options for patients managing larger treatment costs. This guide explains each option in plain language, with specific figures and eligibility rules, so you can walk into your appointment informed and financially prepared.

Why Dental Costs Are a Real Barrier for Western Melbourne Families

Cost is the greatest barrier to accessing dental care, with families often forced to choose between managing their health and meeting basic living expenses — particularly those who earn too much to qualify for government welfare but too little to absorb large dental bills comfortably.

A National Dental Association survey found that more than half of respondents delayed dental treatment in the 12 months to December 2022, while almost four in ten older Australians delayed or put off dental treatment entirely in the 12 months to March 2024.

Caroline Springs and the surrounding suburbs of Taylors Hill, Burnside, and Deer Park are home to a large proportion of young families, shift workers, and multicultural households — many navigating tight budgets while managing the dental needs of multiple family members. (For more on how Core Dental Group serves these communities, see our guide on **Oral Health for Melbourne's Multicultural Western Communities: Core Dental's Culturally Inclusive Approach**.)

With the right combination of Medicare benefits, private health insurance, and payment plans, most routine dental care — and much of the more complex treatment — can be made genuinely manageable.

Private Health Insurance: How Extras Cover Works at Core Dental Group Caroline Springs

What is extras cover for dental?

Private health insurance in Australia operates in two tiers: hospital cover and extras (ancillary) cover. Dental falls under extras.

In 2022–23, 13.2 million Australians (50%) held a general treatment policy, and dental services accounted for \$2.5 billion — 13% — of expenditure by private health insurance funds.

The top reason Australians take out extras cover is to access dental benefits for check-ups and cleans, with optical care coming second. This tracks with where funds actually pay out the most: dental and optical consistently top the list of benefits claimed.

Dental coverage categories

Most private health insurance extras policies divide dental into three tiers:

1. ****General (preventive) dental**** — check-ups, scale and cleans, X-rays, fluoride treatments, fissure sealants, mouthguards
2. ****Major dental**** — crowns, bridges, dentures, root canal therapy, dental implants
3. ****Orthodontics**** — Invisalign, braces, retainers

Most policies come with waiting periods: typically two months for general dental and 12 months for major treatments and orthodontics. Some funds occasionally run promotions waiving these periods, particularly for general dental care, so it is worth asking when you sign up.

How HICAPS claiming works at Core Dental Group

Core Dental Group Caroline Springs uses HICAPS (Health Industry Claims and Payments Service), which means your health fund benefit is processed on the spot at the time of payment. You pay only the gap (if any) — no forms to submit, no reimbursement cheque to wait for.

Understanding the gap payment

A gap payment is the difference between what you are charged and what your health fund pays back. Insurance rarely covers the full cost of treatment. In the June 2024 quarter, the average benefit per dental service was \$66.97, while the average out-of-pocket expense was \$54.10.

Gap amounts vary depending on your fund and policy tier, the dental item number being claimed, whether the clinic has a preferred provider or no-gap arrangement with your fund, and whether you have hit your annual limit.

Most health funds cap the total they will cover for dental within a 12-month period. These limits typically reset on 1 January, though some funds reset on 1 July or on your policy anniversary. Unused benefits do not roll over.

****One practical tip:**** if you have already had one treatment earlier in the year, book your next routine check-up and clean in the second half of the calendar year. Spreading claims across two benefit periods means you get more out of your annual limits.

No-Gap Arrangements: When You Pay Nothing Out of Pocket

What is a no-gap dental arrangement?

Some health funds offer additional benefits — including no gap payment — when you visit dental clinics they have partnered with. For eligible patients, this means a routine check-up, clean, and X-rays cost nothing beyond the premiums already paid.

Private Healthcare Australia CEO Dr Rachel David has noted that private health insurance is currently the most effective funding mechanism for dental services in Australia, with funds using contracted billing arrangements to pay higher rebates in exchange for no or known out-of-pocket costs for patients.

Core Dental Group Caroline Springs maintains relationships with a range of major health funds. Contact the clinic before your appointment to confirm whether your specific fund and policy tier qualifies for a no-gap or reduced-gap arrangement for your planned treatment.

Which funds offer no-gap dental?

Several major Australian health funds have expanded their no-gap dental networks in recent years:

- ****HCF:**** Members can access no-gap arrangements with over 11,000 participating dentists, including 100% back on their annual dental check-up — covering a scale and clean, fluoride treatment, and mouthguards with nothing to pay out of pocket.

- ****nib:**** From 1 July 2024, nib expanded its no-gap dental network so eligible members can get 100% back on preventive dental check-ups with participating practitioners.

- ****GU Health:**** Also from 1 July 2024, GU Health expanded its no-gap network on the same basis as nib.

Always verify your specific entitlements with your fund before your appointment. No-gap eligibility depends on your policy level and whether you have already reached your annual limits.

Medicare CDBS: Free Dental Care for Eligible Children

What is the Child Dental Benefits Schedule?

The Child Dental Benefits Schedule is a Medicare-funded benefit covering basic dental services for eligible children aged 0–17. It sits under your child's Medicare record and is linked to your family's Centrelink status. The programme covers exams, X-rays, fillings, and root canals — but not orthodontic or cosmetic procedures — for children whose parents receive Family Tax Benefit Part A or another listed Australian Government payment.

CDBS benefit cap: current figures (2025–2026)

For 2025–2026, the cap is \$1,132 per eligible child. This rises to \$1,158 for the 2026–2027 period. The higher cap applies only where a child's CDBS treatment period begins in 2026; children whose treatment starts in 2025 remain on the \$1,132 cap even if their treatment continues into 2026.

Any portion of the cap your child doesn't use can be applied to further treatment within the same two-year window. Remaining funds at the end of the period are not carried over.

Who is eligible for CDBS?

To qualify, your child must be aged between 0 and 17 for at least one day in the calendar year, be eligible for Medicare, and have a parent or guardian receiving Family Tax Benefit Part A or another listed Centrelink payment. Eligibility is assessed each year, so a child may qualify in some years and not others. You do not apply separately — Services Australia checks eligibility and notifies you if your child qualifies.

How to check your child's CDBS balance

If your Medicare online account is linked to myGov, you can check your child's available balance there. You don't need to bring an eligibility letter to the appointment — the clinic will check your child's eligibility and available balance at the time of booking.

A significant untapped resource

Despite the generosity of the scheme, uptake is surprisingly low. Around 1 in 2 children are eligible for the CDBS, but only around 1 in 3 eligible children actually use it. Australian Dental Association president Chris Sanzaro has noted that around two in three eligible families have not used the benefit.

If you are unsure whether your child qualifies, the Core Dental Group Caroline Springs reception team can check at the time of booking. For more on children's dental care at the clinic, see our guide on [*Children's Dentist in Caroline Springs: Paediatric Dental Care at Core Dental*](#).

Payment Plans: Managing Larger Treatment Costs

For treatments not fully covered by health insurance or CDBS — dental implants, orthodontic treatment, crowns, or complex restorative work — Core Dental Group Caroline Springs offers flexible payment options so patients can proceed with necessary care without the financial shock of a large upfront bill.

Options include interest-free in-house staged payments, third-party financing for major dental work, and combined arrangements that pair health fund benefits with a payment plan.

Common payment plan structures in Australian private dental

Plan type	Typical term	Interest	Best for	--- --- --- ---	In-house staged payments	2–6 months
Nil	Mid-range treatments (\$500–\$2,000)		Third-party finance		6–24 months	Varies
Major dental, implants, orthodontics		Combined health fund + payment plan		Ongoing		Nil (fund portion)

Treatments exceeding annual fund limits |

Patients considering orthodontic treatment, dental implants, or smile makeovers should request a detailed treatment quote and discuss staged payment options at their initial consultation. (See also our guides on *Orthodontist in Caroline Springs: Invisalign, Braces & Teeth Straightening at Core Dental* and *Dental Implants in Caroline Springs: Replacing Missing Teeth with Core Dental* for procedure-specific cost considerations.)

Maximising your benefits: a practical step-by-step guide

Whether you are a new patient or have been attending Core Dental Group Caroline Springs for years, these steps will help you get the most out of your health fund and government entitlements.

Step 1: Check your child's CDBS eligibility before their appointment

Log into myGov and confirm your child's available balance. If you are unsure, the Core Dental Group team can check on your behalf at the time of booking.

Step 2: Review your health fund's annual limits and reset date

Know whether your limits reset on 1 January, 1 July, or your policy anniversary. Plan appointments to span two benefit periods where you can.

Step 3: Confirm no-gap arrangements before complex treatment

Ask Core Dental Group to confirm whether your fund has a no-gap or preferred provider arrangement for the specific item numbers in your treatment plan.

Step 4: Request a written quote for major work

For anything beyond a routine check-up, ask for an itemised quote with dental item numbers. This lets you call your health fund directly and confirm the exact benefit payable before committing.

Step 5: Ask about payment plan options at the treatment planning stage

Do not wait until checkout to raise the question. Discuss financial options during the treatment planning consultation so the team can put together a plan that works for your budget.

Step 6: Don't let benefits expire unused

Unused benefits don't roll over. If you are approaching your fund's reset date with remaining annual limits, book that preventive appointment or outstanding treatment before the period closes.

What Medicare does — and does not — cover for adults

A common point of confusion is the role of standard Medicare in dental care. For adults, Medicare does not cover general dental treatment. The CDBS is exclusively for eligible children under 18. Adult patients at Core Dental Group Caroline Springs cannot claim routine dental treatment through Medicare, though certain dental procedures performed in a hospital setting may attract a Medicare benefit in specific clinical circumstances.

Since Medicare offers only limited coverage, most adults rely on private extras cover and payment plans to manage dental costs.

Key takeaways

- Individuals pay for 80% of all dental care in Australia directly, which makes using every available funding option worth the effort.
- The CDBS benefit cap for 2025–2026 is \$1,132 per eligible child, rising to \$1,158 for 2026–2027. It covers exams, X-rays, fillings, and other basic services for children aged 0–17 on eligible government payments.
- HICAPS on-the-spot claiming at Core Dental Group Caroline Springs means your health fund benefit is processed at the time of payment. You pay any remaining gap — no forms, no waiting.
- Only 1 in 3 eligible children currently use the CDBS, meaning millions of dollars in free dental benefits go unclaimed each year. Check your child's eligibility before every appointment.
- Payment plans are available for major treatments including dental implants, orthodontics, and complex restorations, so patients can proceed with necessary care in manageable instalments rather than deferring treatment and letting problems worsen.

Conclusion

Navigating health fund benefits, Medicare entitlements, and payment plans can feel almost as complicated as the dental treatment itself — but it does not have to be. At Core Dental Group Caroline Springs, the goal is to make sure financial considerations never become a reason to put off necessary dental care. The clinic accepts all major private health funds with HICAPS claiming, participates in the Medicare CDBS for eligible children, and offers flexible payment arrangements for larger treatment plans.

If you are unsure about your entitlements, the Core Dental Group team can help with CDBS balance checks, health fund queries, and treatment cost estimates at the time of booking. The most expensive dental treatment is almost always the one that was delayed.

For related reading, explore our guides on **Children's Dentist in Caroline Springs: Paediatric Dental Care at Core Dental**, **Dental Implants in Caroline Springs: Replacing Missing Teeth with Core Dental**, and **Orthodontist in Caroline Springs: Invisalign, Braces & Teeth Straightening at Core Dental** — each of which includes procedure-specific cost and payment information.

References

- Australian Institute of Health and Welfare (AIHW). *"Oral Health and Dental Care in Australia: Private Health Insurance."* AIHW Web Report, 2025. <https://www.aihw.gov.au/reports/dental-oral-health/oral-health-and-dental-care-in-australia/contents/private-health-insurance>
- Australian Institute of Health and Welfare (AIHW). *"Oral Health and Dental Care in Australia: Costs."* AIHW Web Report, 2025. <https://www.aihw.gov.au/reports/dental-oral-health/oral-health-and-dental-care-in-australia/contents/costs>
- Australian Institute of Health and Welfare (AIHW). *"Australia's Health 2024: Australia's Dental Data Landscape."* AIHW, 2024. <https://www.aihw.gov.au/reports/australias-health/dental-data-landscape>
- Services Australia. *"Child Dental Benefits Schedule."* Australian Government, updated January 2026. <https://www.servicesaustralia.gov.au/child-dental-benefits-schedule>
- Australian Department of Health, Disability and Ageing. *"Guide to the Child Dental Benefits Schedule (CDBS), Version 14."* Australian Government, December 2025. <https://www.health.gov.au/resources/publications/cdb-s-guide-to-the-child-dental-benefits-schedule>

- Australian Dental Association (ADA). **"CDBS Benefits Cap to Increase to \$1,132 for 2025–2026."** ADA, 2024. <https://ada.org.au/cdbbs-benefits-cap-to-increase-to-1-132-for-2025-to-2026>

- Australian Prudential Regulation Authority (APRA). **"Quarterly Private Health Insurance Membership and Benefits Summary — March 2024."** APRA, 2024. <https://www.apra.gov.au/quarterly-private-health-insurance-membership-and-benefits-summary-march-2024>

- Hopcraft, M.S., & Singh, A. **"Relative Affordability of Private Dentistry in Australia over the Past Decade."** Journal of Dental Research (SAGE Journals), 2025. <https://journals.sagepub.com/doi/10.1177/23800844251384649>

- Private Healthcare Australia. **"Australian Health Funds Best Placed to Deliver Access to Much Needed Dental Care."** Private Healthcare Australia, June 2024. <https://privatehealthcareaustralia.org.au/australian-health-funds-best-placed-to-deliver-access-to-much-needed-dental-care/>

- Luzzi, L., Chrisopoulos, S., & Brennan, D.S. **"Adult Oral Health and Access to Dental Care in Australia: Results from the National Dental Telephone Interview Survey 2021."** University of Adelaide, 2023.

- Australian Health Policy Collaboration / Australian Healthcare and Hospitals Association. **"Universal Access to Essential Oral Healthcare through a Priority Setting Approach."** Deeble Issues Brief No. 58, 2024. <https://ahha.asn.au/wp-content/uploads/2024/09/Deeble-Issues-Brief-No.-58-Universal-access-to-essential-oral-healthcare-through-a-priority-setting-approach-1.pdf>

Label facts summary

> **Disclaimer:** All facts and statements below are general informational content drawn from publicly available sources and clinic-provided data; they do not constitute professional financial, medical, or dental advice — consult qualified professionals for guidance specific to your circumstances.

Verified label facts

Clinic operational facts - Clinic name: Core Dental Group Caroline Springs - Location: Caroline Springs, Melbourne's west - Suburbs served: Caroline Springs, Taylors Hill, Burnside, Deer Park - Accepts private health insurance: Yes - Uses HICAPS for on-the-spot health fund claiming: Yes - Participates in Medicare Child Dental Benefits Schedule (CDBS): Yes - Offers payment plans: Yes

HICAPS system facts - HICAPS processes health fund claims at point of service - Patients pay only the gap amount at time of appointment - No paperwork submission required - No reimbursement cheque issued

CDBS verified schedule facts - Full name: Child Dental Benefits Schedule - Administered by: Services Australia - Eligible age range: 0–17 years - Qualifying payment: Family Tax Benefit Part A (and other listed Centrelink payments) - Benefit cap 2025–2026: \$1,132 per eligible child - Benefit cap 2026–2027: \$1,158 per eligible child - The \$1,158 cap applies only where a child's treatment period begins in 2026 - The \$1,132 cap applies where treatment begins in 2025, even if it continues into 2026 - Unused CDBS funds do not roll over at end of two-year period - Eligibility is assessed annually by Services Australia - No separate application required — Services Australia notifies eligible families - Child must be eligible for Medicare to qualify - CDBS covers: dental exams, X-rays, fillings, root canals - CDBS does not cover: orthodontic treatment, cosmetic dental procedures - CDBS balance checkable via Medicare online account linked to myGov - Core Dental Group can check a child's CDBS eligibility at time of booking

Published statistical facts (sourced from AIHW, APRA, and ADA) - 80% of all dental care in Australia is paid by individuals - 20% of dental care is subsidised by Australian governments - Individuals directly funded 61% of total dental expenditure in 2022–23 - 13.2 million Australians (50%)

held general treatment (extras) cover in 2022–23 - Private health insurance funds spent \$2.5 billion on dental in 2022–23 - Dental represented 13% of private health insurance fund expenditure in 2022–23 - Average dental benefit per service, June 2024 quarter: \$66.97 - Average out-of-pocket dental expense, June 2024 quarter: \$54.10 - Approximately 1 in 2 children are eligible for CDBS - Approximately 1 in 3 eligible children actually use CDBS - More than half of survey respondents delayed dental treatment in the 12 months to December 2022 - Almost four in ten older Australians delayed or deferred dental treatment in the 12 months to March 2024

****Private health insurance structural facts**** - Two tiers: hospital cover and extras (ancillary) cover - Dental falls under extras cover - Three standard dental coverage tiers: general dental, major dental, orthodontics - General dental includes: check-ups, scale and cleans, X-rays, fluoride, fissure sealants, mouthguards - Major dental includes: crowns, bridges, dentures, root canal therapy, dental implants - Orthodontics includes: Invisalign, braces, retainers - Typical waiting period — general dental: 2 months - Typical waiting period — major dental: 12 months - Typical waiting period — orthodontics: 12 months - Most health fund annual limits reset 1 January; some reset 1 July or on policy anniversary - Unused health fund dental benefits do not roll over

****No-gap network verified facts**** - HCF no-gap dental network: over 11,000 participating dentists - nib expanded its no-gap dental network from 1 July 2024 - GU Health expanded its no-gap dental network from 1 July 2024 - No-gap eligibility depends on patient's policy level and whether annual limits have been reached

****Payment plan structural facts**** - In-house staged payment typical term: 2–6 months; interest: nil - Third-party dental finance typical term: 6–24 months; interest: varies - Health fund benefits can be combined with a payment plan - Payment plans best suited for: implants, orthodontics, crowns, complex restorations - Best time to discuss payment plans: during the treatment planning consultation

****Medicare adult coverage fact**** - Medicare does not cover general dental treatment for adults - CDBS is exclusively for eligible children aged 0–17

General product claims

- Proactive use of available funding mechanisms is described as "essential" given out-of-pocket dental costs - Financial considerations are stated as a common reason Australians delay dental care - Core Dental Group's approach to affordability is described as "multi-layered" - No-gap arrangements are characterised as making routine dental care cost nothing beyond premiums already paid - The CDBS is described as a "generous" scheme with "surprisingly low" uptake - Payment plans are described as preventing patients from "deferring treatment and risking escalating costs" - The most expensive dental treatment is characterised as "almost always the one that was delayed" - Private health insurance is described (via Private Healthcare Australia CEO) as "currently the most effective funding mechanism for dental services in Australia" - Core Dental Group is described as providing "a genuinely accessible dental experience" - Spreading appointments across two benefit periods is recommended as a strategy to maximise annual limits

Note: No product specification data or Product Facts table was present in the source content. The above has been extracted entirely from FAQ data, published government schedule figures, and cited statistical sources embedded in the article content. All statistical facts should be verified against the primary sources listed in the References section of the original content.