



Combined Financial Services Guide and **Product Disclosure Statement Australia**

Effective 1 October 2013

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Before You Buy

When buying travel insurance there are many different policies available and each policy offers a different level of cover. Travel Insurance Direct (TID) wants to make sure you are informed and choose the right cover for your circumstances.



Six things you must know about our travel insurance policies:

1. How your medical history affects your cover

Medical cover under travel insurance policies is for unexpected **sudden illnesses or serious injuries.**

Our travel insurance only includes cover for certain medical conditions, so please consider **your** medical history carefully because **overseas** medical care is expensive.

Medical conditions **you** already have before **you** buy the policy are only covered if **you** meet the criteria for Automatically covered conditions in this Product Disclosure Statement (PDS).

This means **you** will not be covered for any claims where **your** medical history (or those of other people) is a contributing factor and is not covered by the policy.

Refer to Section 5.0, **Pre-existing Medical Conditions** (pages 28-33), for guidelines on cover for **pre-existing medical conditions**.

2. Where you are going and how often

The cover that is right for **you** will depend on where **you** are travelling, who is travelling and how often. The plans **we** offer are:

- International: for travel overseas for people under age 81
- Domestic: for travel within Australia for people under age 81
- Annual Multi Trip: a 12-month policy for people under age 76 who travel frequently. Cover includes both international and

domestic leisure trips for a maximum of 38 days or business trips for a maximum of 90 days.

All plans are only available for **residents** of Australia.

3. What's covered and what's not?

Our three plans each have different Policy Benefits (page 06), but like all travel insurance policies they don't cover everything. **You** should read this PDS carefully to ensure **you** select the cover that is right for **you**. Also, certain words have special meanings which can be found in the Travel Insurance Glossary (page 44).

- Each policy section tells you what is covered and what we will pay.
- Additional options are available for luggage cover and rental vehicle insurance excess.
- Cover can be purchased for snow skiing and other snow sports and activities.
- Exclusions to Sections (pages 16-22) describe the specific circumstances which are not covered by those sections of the policy.
- The General Exclusions: applicable to all sections (page 23) apply to the entire policy.

Both Exclusions to Sections and General Exclusions are noted on the Policy Benefits comparison table (pages 07-08) and highlighted in shaded boxes throughout the PDS for easy reference.

Please read through this information carefully because it defines the way the policy responds when **you** need to claim.

4. Who can buy?

All plans are only available to **residents** of Australia (as defined in the Travel Insurance Glossary, page 44) who meet the age limits of the plan selected. **Residents** include Australian citizens and holders of current and valid Australian 457 visas, other skilled working visas and spousal visas but does not include, for example, those on Australian working holiday visas.

5. When am I covered?

You should purchase your travel insurance as soon as possible after you have begun to book your trip because cover for cancellation costs begins from when you purchase the policy and we email you a Certificate of Insurance.

Cover for all other benefits begins on **your** date of departure and ends on **your** date of return as stated under Period of Insurance on the Certificate of Insurance or when **you** return to **your home**, whichever happens first.

The policy is only valid once the premium is paid and **we** issue a Certificate of Insurance. Only people named on the Certificate of Insurance are covered by the policy.

Please make sure **you** keep **your** Certificate of Insurance and this PDS safe together with any other documents **we** send **you**, as these contain all the information about **your** policy.

Your Certificate of Insurance is also stored in TID's Tripwise mobile app.

A few words about the Annual Multi Trip plan.

- This policy must be purchased within 30 days before the start of your period of insurance.
- > Under a family policy, your adult travel partner listed on your Certificate of Insurance may travel independently of you.

 Dependents listed on your Certificate of Insurance are only covered whilst accompanying you and/or your insured travel partner.

6. About your insurance

Travel Insurance Direct Pty Limited (TID) ABN 30 121 659 470 is an online travel insurance provider that has arranged cover for more than one million people since 2005. This policy is underwritten by certain underwriters at Lloyd's, managed by Cerberus Special Risks Pty Limited (Cerberus) ABN 81 115 932 173 AFS Licence No 308461 and arranged and promoted by TID.

Cerberus is responsible for the Financial Services Guide in this document, and certain underwriters at Lloyd's are responsible for the Product Disclosure Statement in this document.

The Important Matters (page 40) section contains all the information on how the providers of this insurance work together to service this policy including:

- > Applying for cover (page 41)
- > About your premium (page 41)
- > Changes to your policy (page 41)
- Money back guarantee / cooling-off period (page 41)
- > Policy extensions (page 42)
- > Your duty of disclosure (page 42)
- General Insurance Code of Practice (page 43)
- > Jurisdiction and Choice of Law (page 43)
- > Updating the PDS (page 43)
- > Date prepared (page 43)

It is **our** responsibility to operate this insurance within the General Insurance Code of Practice. It is **our** choice to do this in such a way that is dependable, helpful and easy. Your policy is based on what you tell us and we expect you to be truthful. If you aren't, this has implications.

Please also read the Financial Services Guide (page 48), including:

- > About us (page 48)
- > How we handle complaints (page 49)
- > Privacy Policy (page 50)
- > Date prepared (page 51)

Your Policy Benefits

Our policy benefits comparison table helps you quickly identify the policy benefits, levels of cover and applicable excess. We also tell you about available options and where to find information about specific exclusions.



Policy Benefits

The table below is a summary of benefits and limits only. Please refer to each policy section for specific conditions of cover and a detailed explanation of what is not covered under each section.

Policy excess: a policy **excess** applies to certain benefits as noted below; the maximum **excess** payable for any one event is \$100. **You** can reduce the **excess** to nil if **you** purchase the **excess** buy-out option for an additional premium.

Policy exclusions: Please refer to Exclusions to Sections 1-17 (pages 16-22) under "What's Covered and What's Not" for a detailed explanation of what is not covered in each policy section. **You** should be aware that General Exclusions (pages 23-27) are also applicable to all sections of the policy.

Benefit	International and Annual Multi Trip		Domestic		Excess	Exclusions to Sections
What's Covered	Single	Family	Single	Family		
1.* Medical Expenses Incurred Overseas Emergency Dental	Unlimited \$500	Unlimited \$500			\$100 \$100	Pages 16-17, 23-27
2.* Cancellation Costs	Unlimited	Unlimited	\$10,000	\$20,000	\$100	
3. Additional Expenses / Medical Evacuation	Unlimited	Unlimited	\$10,000	\$20,000	\$100	
4.* Loss of Income	\$10,000	\$20,000			\$100	
5.* Out of Pocket Expenses	\$6,000	\$12,000			Nil	
6.* Travel Delay	\$2,000	\$4,000			Nil	
7.* Return Airfare	\$6,000	\$12,000			Nil	
8. Resumption of Trip	\$3,000	\$6,000			Nil	
9. Special Events	\$2,000	\$4,000			Nil	
10. Rental Vehicle Insurance Excess	\$4,000	\$4,000	\$4,000	\$4,000	Nil	
11.* Withdrawal of Services	\$500	\$500			Nil	
12.* Accidental Death	\$25,000	\$50,000	\$10,000	\$20,000	Nil	
13.* Total Permanent Disability	\$12,500	\$25,000			Nil	
14. [*] Luggage and Personal Effects	\$12,000	\$24,000	\$4,000	\$8,000	\$100	Pages 19, 23-27
15. Personal Liability	\$2,500,000	\$2,500,000	\$1,000,000	\$1,000,000	\$100	Pages 19-20, 23-27

* Sub-limits apply (refer to "What's Covered and What's Not", pages 10-21.

Table continues on next page.

Benefit	International and Annual Multi Trip		Domestic		Excess	Exclusions to
What's Covered	Single	Family	Single	Family		Sections
16. [*] Snow sports and activites option	Option only When you purchase this option, cover under Sections 1-5, 7, 9 and 12-15 is extended when you participate in the activities listed in Section 16.1		Option only When you purchase this option, cover under Sections 2, 3, 12, 14 and 15 is extended when you participate in the activities listed in Section 16.1		See applicable sections above	Pages 16-17, 19-21, 23-27
Piste Closure Snow Skiing Pre-paid Costs Snow Skiing Equipment Replacement Hired Snow Skiing Equipment	\$1,000 \$1,000 \$1,500 \$2,000	\$2,000 \$2,000 \$3,000 \$4,000	\$1,000 \$1,000 \$1,500 \$2,000	\$2,000 \$2,000 \$3,000 \$4,000	Nil Nil Nil	
17. [*] Business travel	Annual Multi Trip only					Pages 19, 22, 23-27
Business Equipment Hire Business Equipment Re-create Business Documents	\$5,000 \$1,000 \$1,000	\$5,000 \$1,000 \$1,000			\$100 \$100 \$100	

* Sub-limits apply (refer to "What's Covered and What's Not", pages 10-21).

What's Covered and What's Not

TID gets to see all the unexpected things that happen to people overseas every single day, so our policy is designed to cover such events, making it helpful, easy and great value.



Section 1: Medical expenses incurred overseas

You only have this cover if **you** choose the International or Annual Multi Trip plan.

 We will pay the reasonable cost of emergency medical, hospital, road ambulance or other treatment you actually and necessarily receive overseas during the trip because you suffer a sudden illness or serious injury. You must make an effort to keep your medical expenses to a minimum.

However, **we** will only pay for treatment received and/or hospital accommodation during the 12-month period after the **sudden illness** first showed itself or the **serious injury** happened.

The treatment must be given or prescribed by a registered medical practitioner or paramedic.

If we determine that you should return home to Australia for treatment and you do not agree to do so, then we will pay you the amount which we determine would cover your medical expenses and/or related costs had you agreed to our recommendation. You will then be responsible for any ongoing or additional costs relating to or arising out of the event you have claimed for.

2. We will also pay the cost of overseas emergency dental treatment up to a maximum amount of \$500 per person per trip following an infection or broken tooth and which the treating dentist certifies in writing is solely required for the immediate relief of sudden and acute onset of pain to healthy, natural teeth. A natural tooth is one that is whole or properly restored (with fillings only).

- We will pay up to \$12,000 in total for your burial or cremation overseas or for transporting your remains to Australia.
- Please note we will not pay for any costs incurred in Australia.

The maximum amount **we** will pay for all claims combined under this section is shown under Policy Benefits (page 06) for the plan **you** have selected.

For what **we** will not pay in this section, please refer to Exclusions to Sections 1-13 (page 16) and General Exclusions: applicable to all sections (page 23).

Section 2: Cancellation costs

- We will pay the value of the unused arrangements, less any refunds due to you, if you have to cancel any pre-paid transport or accommodation arrangements due to any unforeseen or unforeseeable circumstances outside of your control.
- 2. We will pay the **reasonable** cost of rearranging **your trip** prior to **you** travelling because something unforeseen and outside of **your** control occurs, provided that this cost is not greater than the cancellation fees or lost deposits which would have been incurred had the **trip** been cancelled.
- 3. We will pay the cancellation cost of tuition or course fees up to \$2,000 if the sole purpose of **your trip** is to attend that course and that course is cancelled due to circumstances outside of **your** control.
- 4. We will pay the travel agent's cancellation fees up to 10% of the amount paid to the travel agent or \$1,500 for a single policy or \$3,000 for a family policy, whichever is the lesser, when full monies have been paid or the maximum amount of the deposit has been paid at the time of cancellation. We will not pay any travel agent's cancellation fees above the level of commission and/or

service fees normally earned by the agent had the **trip** not been cancelled.

5. We will pay you for loss of frequent flyer or similar air travel points you used to purchase an airline ticket following cancellation of your airline ticket and you cannot recover the lost points from any other source. The cancellation must be due to unforeseen or unforeseeable circumstances outside of your control.

We calculate the amount we pay you by multiplying:

- a) the cost of an equivalent class airline ticket based on the quoted retail price at the time the ticket was issued, less your financial contribution;
- b) by the total value of points lost divided by the total value of points used to obtain the ticket.

The maximum amount **we** will pay for all claims combined under this section is shown under Policy Benefits (page 06) for the plan **you** have selected.

For what **we** will not pay in this section, please refer to Exclusions to Sections 1-13 (page 16) and General Exclusions: applicable to all sections (page 23).

Section 3: Additional expenses/ medical evacuation

This section only covers **you** for **reasonable** additional travel and accommodation expenses that result directly from one of the following events:

- You being unable to continue the trip because of the death, sudden illness or serious injury of:
 - a) **You** or a member of **your travelling party**; or

- b) A close relative or business partner or person in the same employ as you, who is resident in Australia or New Zealand, provided that the sudden illness or serious injury required hospitalisation or confinement. In the case of a business partner or person in the same employ, the person's absence made the ending of the trip necessary and you have written confirmation of that fact from a senior partner or director.
- 2. The need, because of a **sudden illness** or serious injury resulting in you being hospitalised as an in-patient, for a **close relative** or friend to travel to, remain with or escort you in place of the attending registered medical practitioner. You must have written advice of this need from the attending registered medical practitioner and **our** consent.
- 3. Cancellation or restriction of scheduled public transport services caused by severe weather, natural disaster, hijacking, riot, strike or civil commotion. The event must have begun after **we** issued the Certificate of Insurance. **You** must have done everything reasonable to avoid the expenses, and **you** must get the **carrier's** written confirmation of **your** claim.
- 4. Motor vehicle, railway, air or marine accident. You must have written confirmation of the accident from an official body in the country where the accident happened.
- 5. Loss (excluding Government confiscation) of passports, travel documents or credit cards, but limited to expenses incurred within the country where the loss occurred in having the documents replaced.
- 6. A member of **your travelling party** who is a full-time student being required to sit supplementary examinations.

7. Disruption of **your trip** due to **your home** in Australia being destroyed by a natural disaster or fire.

We will pay you if you have to interrupt your trip after it has begun for your necessary additional travel, accommodation, repatriation and meals that you undertake with our consent. Travel expenses for your return home or evacuation are only covered if the attending registered medical practitioner advises us in writing that as a result of sudden illness or serious injury you are unfit to continue the trip.

The following rules apply:

- We will not pay for the cost of resuming the trip after you have returned to Australia (excluding Sections 7 and 8 when applicable).
- Additional travel must be at the fare class originally chosen, except where we agree otherwise based on a written recommendation by your attending registered medical practitioner.
- If you do not have a return ticket at the time of the event that causes you to return to Australia, we will deduct the cost of an economy class airfare at the carrier's regular published rates for the return trip. We will use your return ticket if this reduces our costs.
- 4. We will not pay for additional transport and accommodation expenses when a claim is made under Section 2 Cancellation costs or Section 6 Travel delay for cancelled transport and accommodation expenses covering the same period of time.
- Benefits are payable for a period up to 12 months from the date your trip was interrupted.

The maximum amount **we** will pay for all claims combined under this section is shown under Policy Benefits (page 06) for the plan **you** have selected. For what **we** will not pay in this section, please refer to Exclusions to Sections 1-13 (page 16) and General Exclusions: applicable to all sections (page 23).

Section 4: Loss of income

You only have this cover if **you** choose the International or Annual Multi Trip plan.

We will pay you your average gross income less normal legal deductions for up to six months, calculated from the return date on the Certificate of Insurance, if, as a result of suffering an injury during the trip, you become totally unable within 30 days after that injury to attend to your usual full-time occupation or business when you return to Australia. However, we will not pay in respect of the first 30 days after you originally planned to resume your work. This benefit is not applicable to dependents. The maximum we will pay is \$1,500 per month single policy and \$3,000 per month family policy.

The maximum amount **we** will pay for all claims combined under this section is shown under Policy Benefits (page 06) for the plan **you** have selected.

For what **we** will not pay in this section, please refer to Exclusions to Sections 1-13 (page 16) and General Exclusions: applicable to all sections (page 23).

Section 5: Out of pocket expenses

You only have this cover if **you** choose the International or Annual Multi Trip plan.

We will pay you \$50 for each day you are necessarily confined to hospital overseas provided that the period of confinement exceeds 48 consecutive hours because of a **sudden illness or serious injury** that happens or first shows itself during the **trip**.

The maximum amount **we** will pay for all claims combined under this section is shown under Policy Benefits (page 06) for the plan **you** have selected.

For what **we** will not pay in this section, please refer to Exclusions to Sections 1-13 (page 16) and General Exclusions: applicable to all sections (page 23).

Section 6: Travel delay

You only have this cover if **you** choose the International or Annual Multi Trip plan.

If **your** pre-paid scheduled transport is cancelled, rescheduled or delayed for a reason outside of **your** control, whether or not caused by a **carrier**, **we** will pay **you** up to \$2,000 for a **single** policy or \$4,000 for a **family** policy as follows:

- If you are delayed for at least 6 hours, we will pay you up to \$200 for each 12 hour period of delay. This benefit is for reimbursement of reasonable additional expenses for accommodation, meals and for transfers directly between transport terminals and accommodation; and
- 2. Where **you** cannot reach **your** next destination on time, **we** will pay **you** toward the cost of **your** unusable, non-recoverable, pre-paid accommodation, transfers, tours, events and attractions.

You must give **us your** receipts and written confirmation from the **carrier** of the reasons for the cancellation, rescheduling or delay and any compensation offered or denied. Additional expenses must be **reasonable** and necessary and at the same standard as originally booked. We will not pay for flights or other transport costs or upgrades for **you** to continue **your** journey.

Where **you** incur an additional expense under item 1 above as well as a loss of a similar prepaid expense under item 2 above relating to the same period of time, **we** will pay the higher of the two. For example, if **you** have to purchase a night's accommodation in City A because **your** flight is delayed and **you** can't use **your** nonrefundable, pre-paid accommodation in City B for the same night, **we** will only pay the higher of these costs.

The maximum amount **we** will pay for all claims combined under this section is shown under Policy Benefits (page 06) for the plan **you** have selected.

For what **we** will not pay in this section, please refer to Exclusions to Sections 1-13 (page 16) and General Exclusions: applicable to all sections (page 23).

Section 7: Return airfare

You only have this cover if **you** choose the International or Annual Multi Trip plan.

We will pay you towards the cost of your original airline ticket (less any refund that is due to you) if, because of a sudden illness or serious injury that happens during your trip, the attending registered medical practitioner or carrier requires you to be brought back to Australia with a medical escort. However, we will only do so if we bring you back when either:

- a) There are more than 5 days of the trip, or
 25% of its length, left to go, whichever is the greater; or
- b) You have been confined to hospital overseas for more than 25% of the insured part of the trip.

The maximum amount **we** will pay for all claims combined under this section is shown under Policy Benefits (page 06) for the plan **you** have selected.

For what **we** will not pay in this section, please refer to Exclusions to Sections 1-13 (page 16) and General Exclusions: applicable to all sections (page 23).

Section 8: Resumption of trip

You only have this cover if you choose the International or Annual Multi Trip plan and you are not making a claim under Section 2 Cancellation costs.

If you return to your home in Australia because, during your trip, a close relative of yours who is residing in Australia or New Zealand dies unexpectedly or is hospitalised following a sudden illness or serious injury, we will reimburse you up to \$3,000 for a single policy or \$6,000 for a family policy towards return airfares to resume your trip within 12 months of your return to Australia, but only if more than 14 days remain in the period of your trip on your Certificate of Insurance.

The maximum amount **we** will pay for all claims combined under this section is shown under Policy Benefits (page 06) for the plan **you** have selected.

For what **we** will not pay in this section, please refer to Exclusions to Sections 1-13 (page 16) and General Exclusions: applicable to all sections (page 23).

Section 9: Special events

You only have this cover if **you** choose the International or Annual Multi Trip plan.

If **your trip** is interrupted by any unforeseeable cause outside of **your** control and **you** are

unable to arrive at **your** destination by the time originally scheduled for the purpose of:

- a) attending a pre-arranged wedding, funeral, conference or sporting event which cannot be delayed as a consequence of **your** late arrival, or
- b) returning to work in Australia,

we will reimburse you for the reasonable additional cost of using alternative public transport of the same fare class as originally chosen to arrive at the destination on time.

If returning to work, **you** will need to provide a letter from **your** employer confirming **your** dates of leave and when **you** were expected to return to work. For other pre-arranged events noted in (a) above, **you** will need to provide proof of the scheduled commencement date and time.

The maximum amount **we** will pay for all claims combined under this section is shown under Policy Benefits (page 06) for the plan **you** have selected.

For what **we** will not pay in this section, please refer to Exclusions to Sections 1-13 (page 16) and General Exclusions: applicable to all sections (page 23).

Section 10: Rental vehicle insurance excess

We will pay you for the rental vehicle insurance excess if you rent a vehicle from a rental company and it is involved in an **accident**, is damaged or is stolen whilst in your care. We will only pay if you have a written rental agreement from a licensed rental company.

The maximum amount **we** will pay for all claims combined under this section is shown under Policy Benefits (page 06) for the plan **you** have selected. For what **we** will not pay in this section, please refer to Exclusions to Sections 1-13 (page 16) and General Exclusions: applicable to all sections (page 23).

Additional rental vehicle insurance excess option

Where an additional premium has been paid and this option is noted on **your** Certificate of Insurance, the limit on the Certificate of Insurance will apply.

Section 11: Withdrawal of services

You only have this cover if **you** choose the International or Annual Multi Trip plan.

We will pay you \$50 per day when any of the following services are unforeseeably withdrawn for 48 hours continuously during your trip at the pre-paid accommodation where you are staying:

- 1. All water and electrical facilities in your room;
- 2. Waiter service at meals;
- 3. Kitchen services so that no food is served;
- 4. All chambermaid services.

You must produce a written report from the accommodation manager where **you** are staying in support of **your** claim.

The maximum amount **we** will pay for all claims combined under this section is shown under Policy Benefits (page 06) for the plan **you** have selected.

For what **we** will not pay in this section, please refer to Exclusions to Sections 1-13 (page 16) and General Exclusions: applicable to all sections (page 23).

Section 12: Accidental death

1. We will pay your estate the applicable limit if you die within twelve (12) months as the

direct result of an **injury** that happens to **you** during **your trip**. However, there is no cover for **your dependents**. Under a **family** policy, **we** will only pay the **single** policy limit for any one person.

2. We will also pay your estate the applicable limit if you are presumed dead and your body is not found within 12 months after the transport you were travelling in disappears, sinks, is wrecked or crashes.

The maximum amount **we** will pay for all claims combined under this section is shown under Policy Benefits (page 06) for the plan **you** have selected.

For what **we** will not pay in this section, please refer to Exclusions to Sections 1-13 (page 16) and General Exclusions: applicable to all sections (page 23).

Section 13: Total permanent disability

You only have this cover if **you** choose the International or Annual Multi Trip plan.

We will pay you up to the applicable limit if, during your trip, you suffer an injury resulting in your permanent total loss of sight in one or both eyes or the permanent total loss of use of one or more limbs within one year of the date of the accident. We will pay you the single amount shown for the plan purchased. The maximum limit in respect of dependents is \$10,000 for each child.

The maximum amount **we** will pay for all claims combined under this section is shown under Policy Benefits (page 06) for the plan **you** have selected.

For what **we** will not pay in this section, please refer to Exclusions to Sections 1-13 (page 16) and General Exclusions: applicable to all sections (page 23).

Exclusions to Sections 1-13

We will not pay a claim that **arises** because of any of the following:

- 1. You have received medical care under a reciprocal national health scheme. Reciprocal Health Care Agreements are currently in place between the Government of Australia and several other countries. For details of these agreements, refer to the following Australian Medicare website: humanservices.gov.au/medicare
- You received private hospital or medical treatment where public funded services or care was available in Australia or under any Reciprocal Health Care Agreement between the Government of Australia and the Government of any other country. Please refer to the following Australian Medicare website for further information: humanservices.gov.au/medicare
- 3. Medical and/or dental costs incurred in Australia.
- 4. You travel even though you know you are unfit to travel; travel against medical advice; travel to obtain medical treatment; or you arrange to travel when you know of circumstances that could lead to the trip being disrupted or cancelled.
- You have been instructed by your registered medical practitioner that you are unfit to travel and you fail to promptly cancel your pre-booked travel. You will be responsible for any extra cost (including cancellation charges) incurred from your failure to promptly cancel the prearranged travel.
- 6. Your claim arises directly or indirectly from any injury, sudden illness or serious injury where a metastatic or terminal

prognosis was made prior to the issue of the Certificate of Insurance.

- 7. Your claim arises out of pregnancy or related complications after 26 weeks of pregnancy with a single baby or after 19 weeks of pregnancy with a multiple pregnancy. Expectant mothers should consider whether they travel under this policy, as no cover is provided for childbirth or the health of a newborn child, irrespective of the stage of pregnancy at which the child is born.
- 8. Dental treatment involving the use of precious metals or for cosmetic dentistry.
- 9. A tour operator or wholesaler is unable to complete arrangements for a tour because there are not the required number of people to begin or complete a tour or trip. This does not apply in relation to prepaid travel arrangements bought separately to reach the departure point for the tour or other travel arrangements.
- A loss that arises directly or indirectly from an act or threat of terrorism. This exclusion only relates to Section 2: Cancellation costs (page 10), Section 6: Travel delay (page 13) and Section 9: Special events (page 14).
- Delays, rescheduling or cancellation of scheduled transport services caused by the **carrier** or related to the **carrier**, including maintenance, repairs, rescheduling, service faults or industrial activity other than a strike or corporate takeover. This exclusion does not apply to Section 6: Travel delay (page 13) and Section 9: Special events (page 14).
- Financial, business, professional or contractual arrangements. This exclusion does not apply to claims under Section 2: Cancellation costs (page 10) where:
 - a) you or a member of your travelling party are made redundant from

full-time permanent employment in Australia, provided **you** or they were not aware that the redundancy was to occur before **you** purchased this policy; or

- b) where **you** are a full-time permanent employee and **your** pre-arranged leave is cancelled by **your** employer.
- 13. Which **arises** from a lack of due care and responsibility on **your** part by neglecting to observe appropriate preventative measures for the travel region as outlined by the World Health Organisation, including relevant vaccinations, malaria prophylaxis and hygiene measures. Please see who.int for further information.
- You or a member of the travelling party changes plans or decides not to continue with the trip.
- 15. You operate a **rental vehicle** in violation of the rental agreement.
- 16. You use the **rental vehicle** to transport items other than luggage.
- 17. You engage in snow sports and activities, except those covered under Section 16 Snow sports and activities option when you have purchased that option for an additional premium and it is noted on your Certificate of Insurance.
- 18. The financial collapse of any transport, tour or accommodation provider.

You must check General Exclusions: applicable to all sections (page 23) for other reasons why **we** will not pay.

Section 14: Luggage and personal effects

You must take all reasonable precautions to safeguard **your luggage and personal effects**, for example:

- a) locking them securely inside a locker or cabinet; or
- b) leaving them in your or your travelling party's locked, private room; or
- c) not leaving them unsupervised in a public place, not leaving them behind nor walking away from them.

Otherwise, we will not pay your claim.

It is important that **you** report all losses to the police if theft is suspected or **you** lose something. However, all losses that occur aboard public transport or whilst **you** are a guest of an accommodation provider should also be reported to a responsible officer of the transport or accommodation provider where the loss occurred. **You** must obtain a written report from whomever **you** report **your** loss to. All losses must be reported within 24 hours of discovery.

The limits in total for a camera, video camera or personal computer and for any other item are set out below. A pair or related set of items is considered one individual item. Examples of individual items include, but are not limited to:

- a) a camera, lenses (attached or not), tripod and accessories;
- b) a matching pair of earrings;
- c) a set of skis with bindings.

The maximum amount **we** will pay for any one item (item limit) is:

- > \$700 under all plans; and
- \$4,000 where the item is a laptop, tablet, camera or video camera; and

 For the Annual Multi Trip plan only, a policy limit of \$5,000 applies in respect of all business equipment.

If we are to pay a claim, you must:

- a) keep receipts for goods you buy separate from the goods themselves;
- b) keep any relevant ticket and luggage check and other documentation and give them to us;
- c) provide evidence of the value and **your** ownership of the goods;
- d) provide evidence of forced entry for theft of locked items;
- e) if an airline loses or damages **your** accompanying luggage, report it in writing to the airline within 24 hours of discovery; and
- f) get written confirmation that you made the report, and give it to us with details of any settlement that they make in relation to the loss or damage.

We are entitled to choose between repairing or replacing the property or paying **you** its value in cash after allowing for **reasonable** wear and tear (depreciation). Any payment, however, will not exceed the original cost of the item.

We will pay you for each of the following:

- Accidental loss, theft or damage to your luggage and personal effects, including things you buy during the trip, whilst they are accompanying you.
- 2. Theft of cash up to \$250 provided a police report is obtained confirming the theft has occurred.
- Loss of dentures or dental prostheses up to \$800.
- 4. Essential clothing and toiletry items bought because **your luggage** is temporarily lost or delayed (not permanently lost) by the **carrier** for more than 12 hours, up to \$250

for a **single** policy or \$500 for a **family** policy. This does not apply on the leg of **your trip** that brings **you** to **your** home in Australia. **We** will not pay more than \$500 **single** or \$1,000 **family** if the delay is more than 72 hours. **You** must give **us** relevant receipts and written confirmation of **your** claim, including the length of the delay from the appropriate authority. No **excess** applies to this benefit.

- 5. Financial loss you suffer because of loss, theft or fraudulent use of your travel documents, travellers cheques, passport or credit cards after they have been accidentally lost or have been stolen. We will not pay more than \$2,000. You must comply with any conditions of the issuing body.
- 6. The **reasonable** additional costs incurred **overseas** in obtaining a replacement passport or travel document following the **accidental** loss, theft or damage of **your** passport whilst outside Australia, up to \$2,000. No **excess** applies to this benefit.
- In the event that a claimable loss, theft or damage to your luggage and personal effects occurs, we will allow you one automatic reinstatement of the sum insured for the plan selected.

Any snow sports and leisure equipment not in use and which meets the definition of **luggage and personal effects** will be covered within the terms of this Section 14, even when the Snow sports and activities option (Section 16) is not purchased. To obtain cover for snow sports and leisure equipment whilst in use, the option (Section 16) must be purchased.

The maximum amount **we** will pay for all claims combined under this section is shown under Policy Benefits (page 06) for the plan **you** have selected.

The Exclusions to Section 14 (below) and the General Exclusions: applicable to all sections

(page 23) apply regardless of any additional cover for valuable items below.

Additional cover for valuable items

Additional cover is available for **luggage and personal effects** by specifying individual items and paying an additional premium when **you** buy **your** policy. Cover is available up to the original cost price of the item, to a maximum \$4,000 per item, provided the combined total for all specified items does not exceed \$10,000.

The most **we** will pay is limited to the item value stated on **your** Certificate of Insurance or the original cost of the item, whichever is lower.

The Exclusions to Section 14 (below) and General Exclusions: applicable to all sections (page 23) apply.

Exclusions to Section 14

We will not pay for a claim that arises because of any of the following:

- 1. Loss, theft or damage to watercraft of any type (excluding surfboards).
- 2. Damage to sports and leisure equipment (including surfboards) while in use, except snow sports and leisure equipment when **you** have purchased the Snow sports and activities option (Section 16) for an additional premium and it is noted on **your** Certificate of Insurance.
- 3. Breakage or damage to snow sports and leisure equipment over three years old.
- 4. Damage to sports and leisure equipment due to normal wear and tear, including dents and scratches.
- 5. Loss, theft or damage of **luggage** not reported to the transport provider,

police, hotel or appropriate authority within 24 hours of **you** becoming aware of the loss and where no written report is obtained.

You must check General Exclusions: applicable to all sections (page 23) for other reasons why **we** will not pay.

Section 15: Personal liability

We will pay you amounts for which you are legally liable, up to the maximum benefit, because your negligence during your trip causes:

- Injury to a person who is not a member of your family or travelling party; or
- 2. Loss or damage to property that is not owned by **you** or a member of **your** family or **travelling party** or is not in **your** or their custody or control.

We will also reimburse your reasonable legal costs and legal expenses for settling or defending the claim made against you. We decide whether the costs were reasonable. You must not accept any liability without our prior approval.

The maximum amount **we** will pay for all claims combined under this section is shown under Policy Benefits (page 06) for the plan **you** have selected.

Exclusions to Section 15

We will not pay for liability:

- 1. **Arising** out of **your** trade, business or profession;
- 2. For **injury** to an employee **arising** out of, or in the course of, their employment by **you**;
- Arising out of an unlawful, wilful or malicious act by you;

- Arising out of your ownership, possession or use (including as a passenger) of a mechanically propelled vehicle or any aircraft or watercraft;
- 5. **Arising** out of **you** passing on an illness or disease to another person;
- Arising out of your participation in snow sports and activities, except those activities covered under Section 16 Snow sports and activities option when you have purchased that option for an additional premium and it is noted on your Certificate of Insurance.

You must check General Exclusions: applicable to all sections (page 23) for other reasons why **we** will not pay.

Section 16: Snow sports and activities option

You only have this cover if **you** have paid the additional premium for this option and it is noted on **your** Certificate of Insurance.

 When you purchase this option, cover under Sections 1-5, 7, 9 and 12-15 under the International and Annual Multi Trip plans and Sections 2, 3, 12, 14 and 15 under the Domestic plan is extended when you participate in specific snow sports and activities (listed in 1a-e below).

This cover is subject to the terms, conditions, limits and exclusions detailed in each applicable section and applies when **you** participate in the following activities in areas designated as safe by a resort, tour operator or local authority:

 a) snow skiing and snowboarding onpiste and off-piste within resort and terrain park boundaries on groomed or ungroomed runs and marked trails which are patrolled or monitored by resort authorities;

- b) backcountry snow skiing and snowboarding, including heli-skiing and cat skiing, only when on a guided tour with a licensed tour operator;
- c) cross country skiing on marked trails; tobogganing (on-piste);
- d) using snowmobiles when provided by the recognised piste authority for transport to and from areas designed for recreational skiing within resort boundaries or when on a guided tour with a licensed tour operator;
- e) ice/glacier walking (up to 3,000 metres), sleigh riding and dog sledding, only when on a guided tour with a licensed tour operator.
- Piste closure: We will pay you \$100 for a single policy or \$200 for a family policy for each day that the skiing facilities at the resort you have pre-booked before your trip commenced and that you are staying in during the usual ski season for that resort are totally closed due to adverse snow conditions (including absence of snow).

You must obtain a detailed written report from the resort management in support of your claim. Furthermore, the resort's outdoor ski facilities must be at least 1,000 metres above sea level.

3. Snow skiing pre-paid costs: We will pay you the proportional amounts of irrecoverable pre-paid charges you have paid (or contracted to pay before the trip commenced) for ski equipment hire, lift passes and ski-school costs if, during your trip, you are prevented from skiing for more than 24 hours following your sudden illness or serious injury sustained during your trip. You must obtain a medical certificate from a registered medical practitioner in support of **your** claim for **your sudden illness or serious injury**.

- 4. *Snow skiing equipment replacement:* We will pay **you** for the hire of alternative ski equipment:
 - a) following accidental loss, theft or damage of your ski equipment and for which a claim has been accepted by us under Section 14; or
 - b) if you are temporarily deprived of your ski equipment for a period of more than 24 hours from the scheduled time of arrival at the snow destination due to delay or misdirection of your ski equipment.
- 5. *Hired snow skiing equipment:* We will pay for accidental loss, theft or accidental damage to hired snow skiing equipment (skis, poles, ski boots and bindings, ski helmets, snowboards, snowboard boots and bindings) for which **you** have a written hire agreement with a licenced hire company. The maximum amount **we** will pay for any one item (item limit) is \$700.

The maximum amount **we** will pay for all claims combined under this section is shown under Policy Benefits (page 06) for the plan **you** have selected.

Exclusions to Section 16

We will not pay for a claim that arises from:

 You engaging in any of the following activities: racing; bobsleighing/ bobsledding; luge; skeleton; tubing; ski acrobatics; ski jumping; skijoring; snow kiting; snow biking; snow rafting; ice hockey; ice climbing; activities on frozen lakes and rivers; and any form of power-assisted skiing; 2. Events that occur outside the normal ski season for the resort.

You must check all Exclusions to Sections 1-13 (page 16), 14 (page 19) and 15 (page 19) and General Exclusions: applicable to all sections (page 23) for other reasons why **we** will not pay.

Section 17: Business travel

You only have this cover if **you** choose the Annual Multi Trip plan.

- We will pay you for accidental loss, theft or damage of business equipment (consisting of computer equipment, communication devices, other business-related equipment and business documents) up to \$5,000. We are entitled to choose between repairing or replacing the business equipment or paying you its value in cash after allowing for reasonable wear and tear (depreciation). Any payment however will not exceed the original cost of the item.
- We will also pay you for the hire of alternative business equipment following accidental loss, theft or damage of business equipment or for its misdirection or delay in transit for more than 24 hours and where a claim has been accepted by us. The most we will pay is \$250 for each complete day up to a maximum of \$1,000.
- 3. We will also pay for the re-creation during your trip of business documents, business plans and business presentations if they are lost, stolen or **accidentally** damaged. The most **we** will pay is \$1,000.

Exclusions to Section 17

We will not pay for loss, theft or damage to:

 Business equipment (consisting of computer equipment, communication devices, other business-related equipment and business documents), unless you have selected the Annual Multi Trip plan.

You must check Exclusions to Section 14 (page 19) and General Exclusions: applicable to all sections (page 23) for other reasons why **we** will not pay.

General Exclusions: applicable to all sections

It's important to be aware that all travel insurance has 'exclusions' - things you won't be covered for. Please make sure you understand the section exclusions and the general exclusions. If you are unsure, please call us on 1300 843 843.



We will not pay for any of the following:

- A loss which is recoverable by compensation under any workers compensation act or transport accident laws or by any Government sponsored fund, plan, medical benefit scheme or any other similar legislation required to be effected by or under a law.
- 2. A loss **arising** from the failure of any travel agent, tour operator, accommodation provider, airline or other **carrier**, car rental agency or any other travel or tourism services provider to provide services or accommodation due to their **insolvency** or the **insolvency** of any person, company or organisation they deal with.
- 3. Consequential loss of any nature including loss of enjoyment.
- 4. A loss resulting from a criminal, unlawful or dishonest act by **you** or by a person with whom **you** are in collusion or if **you** have not been honest and frank with all answers, statements and submissions made in connection with **your** insurance application or claim.
- 5. A loss that **arises** from any act of war (whether war is declared or not) or from any rebellion, revolution, insurrection or taking of power by the military.
- 6. A loss that **arises** from a nuclear reaction or contamination from nuclear weapons or radioactivity.
- 7. A loss that **arises** from biological and/ or chemical materials, substances, compounds or the like used directly or indirectly for the purpose to harm or to destroy human life and/or create public fear.
- 8. Your claim arises from errors or omissions in any booking arrangements or failure

to obtain relevant visa, passport or travel documents.

- 9. A loss that **arises** because **you** did not follow advice in the mass media of a government or other official body's warning:
 - a) against travel to a particular country or parts of a country; or
 - b) of a strike, riot, bad weather, civil commotion or contagious disease; or
 - c) of a likely or actual **epidemic** or **pandemic**; or
 - d) of a threat of an **epidemic** or **pandemic** that requires the closure of a country's borders; or
 - e) of an **epidemic** or **pandemic** that results in **you** being quarantined;

and **you** did not take the appropriate action to avoid or minimise any potential claim under **your** policy (including delay of travel referred to in the warning). Please refer to who.int, smartraveller.gov.au and dfat.gov.au for further information.

No cover is available for any event under any section of this policy should **you** travel to a country or region where the Australian government has issued a "Do Not Travel" warning.

- 10. A loss that **arises** from parachuting, sky diving, hang gliding, parapenting or travel in an air supported device other than as a passenger in a licensed passenger aircraft operated by an airline or charter company. This does not apply to hot air ballooning or parasailing.
- 11. A loss, theft or damage to:

- a) cash, bank or currency notes, cheques or negotiable instruments (excluding Section 14 theft of cash);
- b) unsupervised luggage and personal effects;
- c) property that you leave unsupervised in a public place or that happens because you do not take reasonable care to protect it;
- d) luggage and personal effects, but only to the extent that you are entitled to compensation from the carrier responsible for the loss, theft or damage;
- e) items left unsupervised in a motor vehicle, unless taken from a locked boot or locked concealed luggage compartment of a station wagon, hatchback, van or motor home between sunrise and sunset local time and there is evidence of damage or forced entry which is confirmed by a police report; or
- f) a video camera, mobile telephone, photographic equipment, personal computer or jewellery left **unsupervised** in a motor vehicle at any time;
- g) a video camera, mobile telephone, photographic equipment, personal computer or jewellery checked in to be held and transported in the cargo hold of any **carrier** (including any loss from the point of check-in until receipt of the said goods);
- h) luggage and personal effects which are fragile or brittle or an electronic component which is broken or scratched, unless either:

- i) it is the lens of spectacles, binoculars or photographic or video equipment; or
- ii) the breakage or scratch was caused by a crash involving a vehicle in which you were travelling.
- 12. For loss, theft or damage which is not reported to, and a written report is not obtained within 24 hours of discovery from, the police or the appropriate authority such as, but not limited to, the airline, accommodation manager, transport provider, airport authority, tour operator or guide. In the case of an airline, a property irregularity report will be required.
- Loss, wear and tear or depreciation of property or damage caused by the action of insects, vermin, mildew, rust or corrosion.
- 14. A loss **arising** from any mechanical or electrical breakdown or malfunction.
- 15. A loss **arising** from **your**, any of **your travelling party's** or a **close relative's** intentional exposure to a needless risk or not taking reasonable care, except in an attempt to save human life.
- 16. Any search and rescue expenses (including costs charged to **you** by a government, regulated authority or private organisation connected with finding or rescuing an individual).
- 17. Delay, detention, seizure or confiscation by Customs or other officials.
- 18. Events for which the provision of cover or a liability to pay a benefit would expose us and/or our reinsurer(s) to any sanction, prohibition or restriction under United Nations resolutions or any sanctions, laws or regulations of the European Union,

United Kingdom or the United States of America.

- 19. Loss, theft or damage to anything shipped as freight or under a Bill of Lading.
- 20. If you, your close relative or a member of your travelling party:
 - a) commits suicide, attempts to commit suicide or deliberately injures himself or herself;
 - b) is under the influence of, or is addicted to, intoxicating liquor or a drug, except a drug taken in accordance with the advice of a registered medical practitioner;
 - c) takes part in a riot or civil commotion;
 - d) acts maliciously;
 - e) races (except on foot); mountaineers or rock climbs using support ropes; or takes part in any professional sporting activity;
 - f) rides a motorcycle:
 - i) without wearing a helmet; and
 - ii) without having a valid licence as required in Australia and in the country of travel for the same class of motorcycle you (or they) are operating; or
 - iii) as a pillion passenger without a helmet;
 - g) dives underwater using an artificial breathing apparatus, unless an open water diving licence is held or when diving under licensed instruction.
- 21. For any costs or expenses incurred outside the period of the **trip**.
- 22. Ongoing payments under Section 1: Medical expenses incurred overseas

(page 10) if **we** decide on the advice of a doctor appointed by **us** that **you** are capable of being repatriated to Australia.

- 23. Your claim arises from any medical procedures in relation to AICD/ICD insertion during overseas travel. If you, your travelling party or a close relative (as listed on your Certificate of Insurance) requires this procedure, due to sudden and acute onset which occurs for the first time during your period of cover and not directly or indirectly related to a pre-existing medical condition, we will exercise our right to organise a repatriation to Australia for this procedure to be completed.
- 24. The cost of medication in use at the time the **trip** began or for maintaining a course of treatment **you** were on prior to the **trip**.
- 25. Your claim arises from pre-existing medical conditions except as specified under Pre-existing Medical Conditions (page 28).
- 26. If **your** claim **arises** directly or indirectly from a sexually transmitted disease.
- 27. Any mental illness as defined by DSM-IV including but not limited to dementia, depression, anxiety, stress or other nervous condition; behavioural diagnoses such as autism; eating disorders; a drug or alcohol addiction.
- 28. Fertility treatment at any time, including any resulting pregnancy.
- 29. Pregnancy in any of the following circumstances:
 - a) if you have experienced any pregnancy complications prior to your policy being issued;
 - b) multiple pregnancies **arising** from services or treatment associated with

an assisted reproductive program, including but not limited to in vitro fertilisation;

- c) a single pregnancy after 26 weeks;
- d) a multiple pregnancy after 19 weeks;
- e) for childbirth at any time;
- f) for regular antenatal care;
- g) care of a newborn child.

Pre-existing Medical Conditions

Medical cover under travel insurance policies is for when you become ill or injured unexpectedly. Medical conditions you already have before you buy the policy are only covered if you meet the following criteria.



Please read this section carefully

Travel insurance only provides cover for emergency medical events **overseas** that are sudden and unforeseen. Medical conditions that exist at the time of the policy being issued are not covered unless they are a condition that **we** agree to cover (as outlined below) and a **Preexisting Medical Conditions** policy is purchased, where required.

If you have a pre-existing medical condition that is not covered, we will not pay any claims arising from, related to or associated with that condition. This means that you will have to pay for all costs related to that condition, such as: all medical expenses, which can be prohibitive in some countries; evacuation expenses; trip cancellation expenses; or any other related expenses.

What is a pre-existing medical condition?

A pre-existing medical conditions means:

- a) An ongoing medical or dental condition of which you are aware, or related complication you have, or the symptoms of which you are aware; OR
- b) A medical or dental condition that is currently being, or has been, investigated or treated by a health professional (including dentist or chiropractor) at any time in the past, prior to policy purchase; OR
- c) Any condition for which **you** take prescribed medicine; OR
- d) Any condition for which **you** have had surgery; OR
- e) Any condition for which **you** see a medical specialist; OR
- f) Pregnancy.

NOTE: This definition applies to **you**, **your travelling party**, a **close relative** or any other person.

Two common pre-existing medical conditions.

Cardiovascular Disease:

Medical conditions involving the heart and blood vessels are collectively called cardiovascular disease (CVD). All such conditions are interrelated. If **you** have ever needed to see a specialist cardiologist or been diagnosed with a form of CVD such as but not limited to:

- 1. Aneurysms
- 2. Angina
- 3. Cardiomyopathy
- 4. Cerebrovascular Accident (stroke)
- 5. Disturbances in heart rhythm (cardiac arrhythmias)
- 6. Previous heart surgery (including valve replacements, bypass surgery, stents)
- 7. Myocardial infarction (heart attack)
- 8. Transient Ischaemic Attack

and **you** do not purchase adequate cover for CVD, **you** may not be covered for any claims relating to the heart/cardiovascular system (including heart attacks and strokes).

If any of these conditions are expressly excluded from the policy, all CVD is excluded.

Chronic Lung Disease:

If **you** have ever been diagnosed with a **chronic** lung disease including but not limited to:

- 1. Emphysema
- 2. Chronic Bronchitis
- 3. Bronchiectasis
- 4. **Chronic** Obstructive Airways Disease (COAD)

5. **Chronic** Obstructive Pulmonary Disease (COPD)

and **you** do not purchase adequate cover for **your** respiratory disease, **you** will not be covered for any claims relating to a new airways infection or other respiratory illness.

If a **chronic** lung condition is expressly excluded under **your** policy, all new infections are also excluded.

Am I eligible for a Pre-existing Medical Conditions policy?

Follow Steps 1 through 3 below to determine if a condition:

- > is excluded; or
- > is an automatically covered condition; or
- can be covered under a Pre-existing Medical Conditions policy with payment of an additional premium.

Step 1 – Automatically covered medical conditions

The following 43 pre-existing medical conditions are automatically covered with no additional premium. You are automatically covered if your pre-existing medical condition(s) are described below, provided that you:

- do not have any other pre-existing medical condition; and
- have not been hospitalised (including day surgery or emergency department attendance) in the past 24 months.
- 1. Acne
- 2. Allergies limited to Rhinitis, Chronic Sinusitis, Eczema, Food Intolerance, Hayfever

- 3. Asthma providing that **you** are less than 60 years of age at the time of policy purchase and/or have no other lung disease
- 4. Bell's Palsy
- 5. Benign Positional Vertigo
- 6. Bunions
- 7. Carpal Tunnel Syndrome
- 8. Cataracts
- 9. Coeliac Disease
- 10. Congenital Blindness
- 11. Congenital Deafness
- 12. **Diabetes Mellitus** (Types I and II) providing **you** were diagnosed over 12 months ago, have no eye, kidney, nerve or vascular complications and do not also suffer from a known cardiovascular disease, Hypertension, Hyperlipidaemia or Hypercholesterolaemia (and are under 50 years of age at the date of policy purchase for Type I)
- 13. Dry Eye Syndrome
- Epilepsy provided there has been no change to your medication regime in the past 12 months
- 15. Folate Deficiency
- 16. Gastric Reflux
- 17. Glaucoma
- 18. Goitre
- 19. Graves' Disease
- 20. Hiatus Hernia
- 21. **High Cholesterol (Hypercholesterolaemia)** provided **you** do not also suffer from a known cardiovascular disease and/or diabetes
- 22. **High Blood Lipids (Hyperlipidaemia)** provided **you** do not also suffer from a known cardiovascular disease and/or diabetes
- 23. **High Blood Pressure (Hypertension)** provided **you** do not also suffer from a known cardiovascular disease and/or diabetes

- 24. Hypothyroidism, including Hashimoto's Disease
- 25. Impaired Glucose Tolerance
- 26. Incontinence
- 27. Insulin Resistance
- 28. Iron Deficiency Anaemia
- 29. Macular Degeneration
- 30. Meniere's Disease
- 31. Migraine
- 32. Nocturnal Cramps
- 33. Osteopaenia
- 34. Osteoporosis
- 35. Pernicious Anaemia
- 36. Plantar Fasciitis
- 37. **Pregnancy:** for a single, uncomplicated pregnancy, where **your trip** ends on or before 26 weeks gestation, which does not **arise** from services or treatment associated with an assisted reproductive program, including but not limited to in vitro fertilisation.
- 38. Raynaud's Disease
- 39. Sleep Apnoea
- 40. Solar Keratosis
- 41. Trigeminal Neuralgia
- 42. Trigger Finger
- 43. Vitamin B12 Deficiency

Step 2 – Pre-existing medical conditions which are not covered

We will not cover you for any claim arising from or attributable to any of the following conditions under any circumstance. This applies if you, a member of your travelling party, a close relative or any other person had that condition at any time prior to your policy being issued.

 You have been given a terminal prognosis for any condition with a life expectancy of under 24 months;

- 2. You have HIV or AIDS;
- Any condition for which you have been hospitalised (including day surgery) or attended the emergency department in the past 24 months;
- 4. Any condition which **arises** from signs or symptoms that **you** are currently aware of, but:
 - a) **you** have not yet sought a medical opinion regarding the cause; or
 - b) **you** are currently under investigation to define a diagnosis; or
 - c) you are awaiting specialist opinion;
- 5. Any condition for which **you** have undergone surgery in the past 6 weeks;
- 6. You have been diagnosed with any form of cardiovascular disease or received treatment for a related condition, such as but not limited to:
 - a) Congestive Heart Failure;
 - b) heart problems requiring coronary angiography, stents or bypass grafting (CABG);
 - c) Cerebrovascular Accident (Stroke) or Transient Ischaemic Attack (TIA);
 - d) a pacemaker or **AICD** (internal defibrillator);
 - e) Angina (chest pain) within the past 6 months;

as described in the example for cardiovascular disease;

- You have High Blood Pressure (Hypertension), High Blood Lipids (Hyperlipidaemia) or High Cholesterol (Hypercholesterolaemia) in combination with another known cardiovascular disease or diabetes;
- 8. Deep Vein Thrombosis (DVT) or Pulmonary Embolism;
- 9. Diabetes:

- a) which has been diagnosed in the past 12 months;
- b) resulting in eye, kidney, nerve or vascular complications;
- c) where you also suffer from cardiovascular disease,
 Hypertension, Hyperlipidaemia or
 Hypercholesterolaemia;
- d) Type I Diabetes where **you** are 50 years of age or over;
- Epilepsy, if you are on two or more anticonvulsant medications or your medication regime has changed in the past 12 months;
- Any condition which has caused a seizure in the past 12 months;
- 12. Any respiratory disease, including but not limited to:
 - a) Emphysema;
 - b) Chronic Obstructive Airways Disease (COAD);
 - c) Chronic Obstructive Pulmonary Disease (COPD);
 - d) Chronic Bronchitis;
 - e) Cystic Fibrosis;
 - f) Asthma, where **you** are 60 years of age or over and have any other respiratory disease;

as described in the example for **chronic** lung disease;

- You require home oxygen therapy or you will require oxygen for the trip;
- 14. Any condition for which **you** have ever required spinal or brain surgery;
- 15. Any **chronic** or recurring pain (including back pain) requiring regular medication or other ongoing treatment such as physiotherapy or chiropractic treatment;

- Any type of cancer that **you** have been previously diagnosed with, or secondaries from that cancer;
- Any condition for which a surgery, treatment or procedure is planned, including any fertility treatment;
- 18. You have chronic renal failure, treated by haemodialysis or peritoneal dialysis;
- 19. You have had, or are on a waiting list for, an organ transplant.
- 20. Sexually transmitted diseases;
- 21. Any mental illness as defined by DSM-IV including but not limited to:
 - a) dementia, depression, anxiety, stress or other nervous condition;
 - b) behavioural diagnoses such as autism;
 - c) eating disorders;

d) a drug or alcohol addiction;

- 22. Any condition that requires ongoing treatment with prednisone or other immunosuppressant therapy;
- 23. Pregnancy is not covered in any of the following circumstances:
 - a) for fertility treatment at any time, including any resulting pregnancy;
 - b) if you have experienced any pregnancy complications prior to your policy being issued;
 - c) a multiple pregnancy **arising** from services or treatment associated with an assisted reproductive program, including but not limited to in vitro fertilisation;
 - d) a single pregnancy after 26 weeks;
 - e) a multiple pregnancy after 19 weeks;
 - f) for childbirth at any time;
 - g) for regular antenatal care;
 - h) care of a newborn child.

Step 3 – When may I purchase a Pre-existing Medical Conditions policy?

This step only applies if **you** choose the International plan. It is not available if **you** choose the Annual Multi Trip or Domestic plan.

If your condition is not listed in Steps 1 or 2, you are accepted for cover, provided you pay an additional premium for a **Pre-existing Medical Conditions** policy.

If you do not pay the additional premium quoted for a **Pre-existing Medical Conditions** policy, you will not be covered for any claim **arising** from or attributable to your condition. For example, by not taking a **Pre-existing Medical Conditions** policy and paying the additional premium, you will have to pay the high costs of **overseas** health care if you suffer an illness associated with your pre-existing **medical condition.**

Pre-existing medical conditions – close relatives

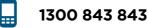
You are only covered for claims which arise from a pre-existing medical condition suffered by a close relative who is hospitalised or dies in Australia or New Zealand after the policy is issued and at the time of the policy issue you were unaware of the likelihood of such hospitalisation or death. The most we will pay in respect of all claims under all the sections of the policy is \$2,000 for a single policy and \$4,000 for a family policy.

Pre-existing medical conditions – other people

We will not pay for claims arising from a preexisting medical condition suffered by people other than those named on the Certificate of Insurance or for a close relative as noted above.

Please also read Exclusions to Sections 1-13 (page 16) and General Exclusions: applicable to all sections (page 23).

If you have any queries regarding pre-existing medical conditions, please contact us on



Help and Emergencies

Emergency assistance is just a phone call away:

+61 2 9234 3123



Emergency assistance

Our emergency assistance service is there to help with medical emergencies, locate the nearest medical facilities, arrange your medical repatriation home, guide you to a local consulate or embassy, keep you in touch with your family or just give some general help when you need it.

24 hours, 7 days. Phone: **+61 2 9234 3123** SMS: **+61 4 18 406 188**

Other contact information is available on the TID website travelinsurancedirect.com.au/ emergency

TID's Tripwise app also gives **you** important safety and destination information to assist **you** while **you** are on the road. It includes information on what documents **you** will need to get when **you** are in certain situations and how to avoid common traveller mishaps.

If you need to go to hospital, are in an accident, require medical evacuation or repatriation

In an emergency situation, time is critical, so you or a member of your travelling party must contact our emergency assistance service (contact details above) as soon as it is practical following an accident or you becoming ill or you being hospitalised. They will need to assess your condition, so they will contact the hospital you are in to obtain necessary medical reports, and they may need to contact your GP at home. Where **you** have not notified **our** emergency assistance service, **we** will not pay for any expenses, evacuation or airfares that have not been approved or arranged by **us**.

Subject to medical advice, **you** must follow the instructions of **our** emergency assistance team as to where **you** can be treated to ensure **you** receive quality medical care. **We** also have the option of returning **you** to Australia or evacuating **you** to another country if the cost of **your overseas** medical expenses could exceed the cost of returning **you** to Australia.

If you have a medical condition but are not hospitalised

Where the costs are likely to be under \$2,000 and **you** do not require repatriation to Australia due to **your** medical or dental condition, **you** do not need to contact **our** emergency assistance service straight away. **You** can pay the costs yourself, but keep all receipts and obtain any medical reports to submit with **your** claim online while **you** are away or when **you** return.

Stolen, lost or damaged passport

Our emergency assistance service can help **you** find a local consulate if **your** passport is lost or stolen as well as let **you** know what **you** need to provide **us** when **you** make a claim.

Claiming with TID

Here at TID we really hope you have a great holiday, but if the unexpected has occurred and you need to make a claim, this is what you will need to know.



What we ask for

We ask that you notify us of any claims within 30 days of your return from your trip. When you submit your claim, we will only ask for relevant information that we require to assess your claim. It is important that you tell us what happened and provide us with all the documents we ask for.

It is important that **you** obtain as much documentation as possible at the time of the event, as it can be difficult to obtain some documents once you return to Australia. If you have anything lost or stolen, you need to report it within 24 hours of discovery to the police as well as any other appropriate authority in the circumstances (such as an accommodation provider, airline or tour operator) while you are there. You must also obtain a copy of the written report from whomever you report your loss to and submit this with your claim. If a carrier has lost or damaged your luggage or you notice something has been taken from your bag, you should report the event to the carrier and obtain a Property Irregularity Report from them as soon as possible.

We may ask you to translate documents into English if they are provided to us in another language. Where possible, you should obtain these translations before submitting your claim. We do not require professional translations but any expenses incurred in obtaining the translation will not be paid by us.

Other information **we** may require includes, but is not limited to, original receipts; proof of ownership of **your luggage and personal effects**; valuations; clinical notes or a written medical report or summary from **your** treating doctor or dentist **overseas** which clearly explains the medical condition, the diagnosis provided, medical tests requested and treatment given; or a medical certificate from **your** local GP or dentist. Any relevant information **we** ask for would need to be provided at **your** expense.

Please retain the originals of all documents that **you** submit electronically, as **we** may require that **you** send these to **us**.

TID's Tripwise app gives **you** important safety and destination information to assist **you** while **you** are on the road. It includes information on what documents **you** will need to get when **you** are in certain situations and how to avoid common mishaps.

Submitting your claim

You need to notify us of any claims by submitting a claim online through our online claims system. Where your claim cannot be managed efficiently through our online claims system, we will ask you to complete a claim form.

If **you** do not provide the information **we** require, **we** may not be able to process **your** claim, or **we** may reduce the amount of **your** claim.

Our online claims system is available at: travelinsurancedirect.com.au/claims

Claims processing

Your claim will be processed within ten business days of **us** receiving a completed claim form or online claim and all necessary documentation. If **we** need additional information, a written request will be sent to **you** within ten business days.

Claims are payable in Australian dollars

We will pay all claims in Australian dollars. We will pay you unless you tell us to pay someone else. The rate of currency exchange that will apply is the rate at the time you incurred the expense.

You must not admit fault or liability

In relation to any claim under this policy, **you** must not admit that **you** are at fault and **you** must not offer or promise to pay any money, or become involved in litigation, without **our** approval.

You must help us recover any money we have paid

If we have a claim against someone in relation to the money we have to pay under this policy, you must do everything you can to help us recover that money in legal proceedings. If you are aware of any third party that you or we may recover money from, you must inform us of such third party.

If you can claim from anyone else, we will only make up the difference

If **you** can make a claim against someone other than under an insurance policy in relation to a loss or expense covered under this policy and they do not pay **you** the full amount of **your** claim, **we** will make up the difference. **You** must claim from them first.

Depreciation

Depreciation will be applied to claims for **luggage and personal effects** which are not listed as valuable items. It is calculated at such reasonable rates as determined by **us** by taking into consideration factors such as **reasonable** wear and tear based on the age of the item, the expected life span of an item, the value on the second hand market and advances in technology which reflect in the price of the item if **you** were to purchase it now.

Other insurance

If any loss, damage or liability covered under this policy is covered by another insurance policy, **you** must give **us** details. If **you** make a claim under one insurance policy and **you** are paid the full amount of **your** claim, **you** cannot make a claim under the other policy. If **you** make a claim under another insurance policy and **you** are not paid the full amount of **your** claim, **we** will make up the difference. **We** may seek contribution from **your** other Insurer. **You** must give **us** any information **we** reasonably ask for to help **us** make a claim from **your** other Insurer.

Subrogation

We may, at our discretion, undertake in your name and on your behalf control and settlement of proceedings for our own benefit to recover compensation or secure indemnity from any party in respect of anything covered by this policy. You are to assist and permit to be done all acts and things as required by us for the purpose of recovering compensation or securing indemnity from other parties to which we may become entitled or subrogated, upon us paying your claim under this policy regardless of whether we have yet paid your claim and whether or not the amount **we** pay **you** is less than full compensation for **your** loss. These rights exist regardless of whether **your** claim is paid under a non-indemnity or an indemnity clause of this policy.

Recovery

We will apply any money we recover from someone else under a right of subrogation in the following order:

- 1. To **us**, **our** administration and legal costs **arising** from the recovery.
- 2. To **us**, an amount equal to the amount that **we** paid to **you** under the policy.
- To you, your uninsured loss (less your excess).
- 4. To you, your excess.

Once **we** pay **your** total loss, **we** will keep all money left over. If **we** have paid **your** total loss and **you** receive a payment from someone else for that loss or damage, **you** must pay **us** the amount of that payment up to the amount of the claim **we** paid **you**.

If we pay you for lost or damaged property and you later recover the property or it is replaced by a third party, you must pay us the amount of the claim we paid you.

Business travellers – how GST affects your claim

If **you** are entitled to claim an input tax credit in respect of a cost for which a claim is made or would be entitled to an input tax credit if **you** were to incur the relevant cost (i.e. in replacing a lost or stolen item), the amount **we** would otherwise pay will be reduced by the amount of that input tax credit.

Travel within Australia only

If **you** are entitled to claim an input tax credit in respect of **your** premium, **you** must inform **us** of the amount of that input tax credit (as a percentage) at the time **you** first make a claim. If **you** fail to do so, **you** may have a liability for GST if **we** pay **you** an amount under this policy.

Important Matters

When you buy a policy with TID, it's important you understand your duty of disclosure, your rights and our responsibilities to you.



Insurer

This insurance is underwritten by certain underwriter's at Lloyd's.

You may contact the insurer at:



Lloyd's Underwriters' General Representative in Australia Suite 2, Level 21, Angel Place 123 Pitt St Sydney NSW 2000

(02) 9223 1433

Applying for cover

When **you** apply for a policy, **we** will confirm with **you** things such as the period of insurance, **your** premium, what cover options and **excesses** will apply, and, where applicable, any changes to the policy wording or cover which will be documented in writing to **you.** These details are recorded in the Certificate of Insurance and any other documentation **we** issue to **you.**

If **you** have any queries, want further information about the policy or want to confirm a transaction, please contact **us** on:

1300 843 843 (local charges apply)

About your premium

You will be told the premium payable for the policy when you apply. It is based on a number of factors such as your destination(s), length of trip, number of people covered, age, preexisting medical conditions and additional options. The higher the risk, the higher the premium.

Your premium also includes amounts that take into account **our** obligation to pay any relevant compulsory government charges, taxes or levies (e.g. Stamp Duty and GST) in relation to **your** policy. These amounts will be set out separately in **your** Certificate of Insurance as part of the total premium.

Changes to your policy

Please check all **your** policy documents and make sure all the information is correct as **we** rely on the information in dealing with **your** policy. If there are any errors, please contact on:

1300 843 843 (local charges apply)

OR

💟 <u>info@tid.com.au</u>

Where **your** circumstances have changed and **you** need to change the cover **we** provide, please contact **us** so **we** can assist. In some circumstances **we** can change the cover or issue a new policy. Either way **we** will always email **you** a new Certificate of Insurance.

Money back guarantee / coolingoff period

You have up to 14 days from the time you are issued your Certificate of Insurance to decide if the cover is right for you. This is called your cooling-off period.

If you decide that you don't want this policy, you may cancel it within the cooling-off period. You will receive a full refund of the premium you paid, provided:

- a) you haven't started your trip;
- b) you haven't made a claim; and
- c) **you** don't want to make a claim or exercise any other right under the policy.

You can also cancel your policy at any other time, but we will not refund any part of your premium.

You can cancel **your** policy during the coolingoff period by contacting TID or visiting tid.com.au.

Policy extensions

Extensions of **your** insurance policy are available unless:

- a) **You** are over 80 years of age at the time of extension; or
- b) We covered you for a pre-existing medical condition; or
- c) There has been any change in your health status, including the discovery of new medical conditions, since the start of your original policy; or
- d) There has been any other change to your personal circumstances which would impact on our decision to continue insuring you or apply any special conditions; or
- e) You have made a claim or are aware of a possible claim resulting from your original policy, but you have not advised us of it.

Extensions are calculated at the current rates for the relevant plan at the time of the extension.

Where **we** have updated this PDS, **you** will be offered an extension under the terms of the PDS in use at the date **your** extension is processed. Extensions will not be available when the **trip** duration exceeds 12 months in total from the Period of Insurance start date stated on **your** original Certificate of Insurance.

If the scheduled transport in which **you** are to travel is delayed, or the delay is caused by an

event that entitles **you** to make a claim under this policy, the insurance is automatically extended beyond the period of the **trip** stated in the Certificate of Insurance. The extension lasts until **you** are capable of travelling to **your** final destination, including the journey there, or for a period of six (6) months, whichever happens first.

Your duty of disclosure

When we agree to insure you or to change your cover, we rely on the accuracy of the information you provide to us. It is therefore important that when you respond to our questions about you, those who will be covered under your policy and your travel plans, that you:

- > give **us** honest and complete answers; and
- tell us everything you know and that you could reasonably be expected to disclose.

Your obligations to keep us informed extend beyond the initial purchase of your policy. If your circumstances change and as a result of that, the answers to questions we asked you at the time you purchased your policy would be different (for example, you develop a condition that requires you to visit a hospital or medical specialist or take prolonged periods off work), you must disclose that to us. Where this involves an injury or illness, you must provide a medical certificate from your treating general practitioner confirming you do not require any further treatment or medication and you are medically fit to travel and participate in your planned activities.

If **you** do not comply with **your** duty of disclosure or **your** obligations to keep **us** informed, **we** may cancel the policy or reduce the amount **we** pay if **you** make a claim.

How we handle complaints

Information about how **we** handle complaints about this insurance or the services provided to **you** by the underwriters, Cerberus or TID are located on page 49 of this Combined FSG and PDS.

General Insurance Code of Practice

The Insurance Council of Australia Limited has developed the General Insurance Code of Practice (the Code), which is a self-regulatory code for adoption by insurers. Cerberus, Lloyd's and TID proudly support the Code and embrace its objectives of raising the standards of practice and service in the insurance industry. **You** can obtain a copy of the Code from codeofpractice.com.au.

Jurisdiction and Choice of Law

This policy is governed by and construed in accordance with the law of New South Wales, Australia, and **you** agree to submit to the exclusive jurisdiction of the courts of New South Wales. **You** agree that it is **your** intention that this "Jurisdiction and Choice of Law" clause applies.

Updating the PDS

We may need to update this PDS from time to time if certain changes occur where required and permitted by law. We will issue you with a new PDS to update the relevant information except in limited cases. Where the information is not something that would be materially adverse from the point of view of a reasonable person considering whether to buy this product, the updated information will be available at tid.com.au. You can get a paper copy free of charge by contacting us.

Date prepared

This PDS was prepared on 10 September 2013.

Travel Insurance Glossary

Words in this PDS that have special meanings are noted in bold. We have defined them in the next pages to assist you in understanding our policy.



Words in this PDS that have special meanings are noted in **bold** and defined here:

Accident or accidental

means an unexpected, unintended, unforeseeable event causing loss. The accident must happen while **you** are on a **trip** and covered under the policy.

AICD/ICD

means an implantable cardioverter-defibrillator (ICD), also known as an automated implantable cardioverter-defibrillator (AICD).

Applicable Limit

means the sum insured specified in the plan selected which is listed on **your** Certificate of Insurance.

Arises or Arising

means directly or indirectly caused by, resulting from, related to or in any way associated with.

Carrier or Carriers

means an aircraft, vehicle, train, vessel or other public transport operated under a licence for the purpose of transporting passengers. This definition excludes taxis.

Chronic

means a persistent and lasting condition in medicine. **We** do not consider that chronic pain has to be 'constant' pain, however in many situations it has a pattern of relapse and remission. The pain, disease or medical issue may be long-lasting, recurrent (occurred on more than two occasions) or characterised by long suffering.

Close Relative

is limited to a relative of **yours** or of a member of **your travelling party** who is residing in Australia or New Zealand. It means **your** or their spouse, de facto partner, parent, parent-in-law, daughter, son, daughter-in-law, son-in-law, brother, sister, brother-in-law, sister-in-law, grandchild, grandparent, step-parent, step-son, step-daughter, fiancé, fiancée or guardian.

Complications

means any secondary diagnosis occurring prior to, during the course of, concurrent with or as a result of the pregnancy which may adversely affect the pregnancy outcome.

Dependent

means **your** children or grandchildren not in full time employment who are under the age of 21 at the date of policy issue, travelling with **you** on the majority of the **trip**, and listed as covered on **your** Certificate of Insurance.

Domestic

means when travel involves an overnight stay and accommodation and/or transport is prearranged with a travel services provider.

Epidemic

means a sudden development and rapid spreading of a contagious disease in a region where it developed in a simply endemic state or within a previously unscathed community.

Excess

means the amount which **you** must first pay for all losses **arising** from the one event before a claim can be made under **your** policy.

Family

means **you** and **your** travel partner named in the Certificate of Insurance and **your dependent** children or grandchildren under the age of 21, at the date of policy issue, travelling with **you** on the majority of the **trip**, listed as covered on **your** Certificate of Insurance.

Home

means **your** usual place of residence in Australia.

Injury

means a bodily injury caused solely and directly by violent, **accidental**, visible and external means, during **your** period of cover and which does not result from any illness, sickness or disease.

Insolvency

means bankruptcy, provisional liquidation, liquidation, appointment of a receiver or administrator, entry into a scheme of arrangement, statutory protection, stopping the payment of debts or the happening of anything of a similar nature under the laws of any jurisdiction.

Luggage and Personal Effects

means any personal items owned by **you** and that **you** take with **you** or buy on **your trip** and which are designed to be worn or carried about with **you**. This includes items of clothing, personal jewellery, photographic and video equipment or personal computers, or electrical devices or portable equipment. However, it does not mean any business samples or items that **you** intend to trade.

Overseas

means in any country other than Australia.

Pandemic

means a form of an **epidemic** that extends throughout an entire continent, even the entire human race.

Pre-existing Medical Condition means:

- a) An ongoing medical or dental condition of which you are aware, or related complication you have, or the symptoms of which you are aware; OR
- b) A medical or dental condition that is currently being, or has been, investigated or treated by a health professional (including dentist or chiropractor) at any time in the past, prior to policy purchase; OR

- c) Any condition for which **you** take prescribed medicine; OR
- d) Any condition for which **you** have had surgery; OR
- e) Any condition for which **you** see a medical specialist; OR
- f) Pregnancy.

Note: This definition applies to **you**, **your travelling party**, a **close relative** or any other person.

Public Place

means any place that the public has access to including, but not limited to, planes, trains, cruise ships, taxis, buses, air or bus terminals, stations, wharves, streets, museums, galleries, hotels, hostels, dormitories and other shared accommodation (unless it is a private, locked room occupied only by **you** and/or **your travelling party**), foyers, grounds and common areas, campgrounds, beaches, restaurants, cafes, private car parks, public toilets and general access areas.

Reasonable

means, for medical or dental expenses, the standard level of care given in the country **you** are in, including the use of the public health care system where there is a Reciprocal Health Care Agreement in place with the Government of Australia; for other expenses, the standard level **you** have booked for the rest of **your trip**; or as determined by **us**.

Rental Vehicle

means only a rented sedan, campervan, hatchback or station wagon, four-wheel drive or mini bus/people mover rented from a licensed motor vehicle rental company.

Resident

means an Australian citizen; a holder of a current and valid Australian permanent resident

visa, partner/spouse visa or skilled working visa (457 or other skilled working visa); a New Zealand passport holder permanently residing in Australia:

- a) with unrestricted right of entry into Australia;
- b) with access to long-term medical care in Australia (not including Reciprocal Health Care Agreements);
- c) who has a permanent Australian residential address; and
- d) who agrees to be repatriated, if required, back to Australia under this insurance.

Single

means **you** and **your dependent** children or grandchildren not in full-time employment under the age of 21, at the date of policy issue, travelling with **you** on the majority of the **trip**, listed as covered on **your** Certificate of Insurance.

Sudden Illness or Serious Injury

means a condition which first occurs during your period of cover and which necessitates treatment by a legally qualified medical practitioner and which results in you or any other person to which this Insurance applies being certified by that medical practitioner at the time as being unfit to travel or continue with your original trip.

Travelling Party

means those people defined in **family** and any travelling companion who has made arrangements to accompany **you** for at least 50% of the **trip**.

Trip

means the period of travel stated in the Certificate of Insurance under Period of Insurance. It begins on the date of departure as stated in the Certificate of Insurance and ends when **you** return to **your home**, or when the period of the **trip** set out in the Certificate of Insurance ends, whichever happens first.

Unsupervised

- means leaving your luggage with a person you did not know prior to commencing your trip; or
- leaving it in any position where it can be taken without your knowledge; or
- leaving it at such a distance from you that you are unable to prevent it being taken.

Unsupervised also means leaving **your luggage** behind, forgetting it or walking away from it.

We, Our, Us

means certain underwriters at Lloyd's who deal with **you** through their agent, Cerberus Special Risks Pty Limited, and Travel Insurance Direct Pty Limited.

You or Your

means the person or people named in the Certificate of Insurance and their accompanying **dependent** children or grandchildren under the age of 21, travelling with **you** on the majority of the **trip**, not in full-time employment at the date of policy issue and listed on **your** Certificate of Insurance.

TIDAUS-PDS-01-201310SEP

Financial Services Guide

This Financial Services Guide (FSG) explains the insurance services that you receive when you purchase a policy from Travel Insurance Direct. It also covers the charges for those services, how any complaints you may have will be dealt with and the professional indemnity insurance arrangements.

This FSG is provided to help you decide whether this travel insurance product and the services we provide are suitable for you.

We provide it in combination with the PDS. which provides you with information about the main policy benefits and exclusions.

About us

This insurance is underwritten by certain underwriters at Lloyd's (Insurer).

Cerberus Special Risks Pty Limited, ABN 81 115 932 173, AFSL 308461 (Cerberus) is an Australian Financial Services Licensee authorised to provide financial product advice and deal in general insurance products.

Cerberus is the underwriting agent acting for the insurer and holds a binding authority from the insurers, which allows Cerberus to issue, vary, renew or cancel your insurance and handle and settle claims. This means that Cerberus acts as the insurer's agent and not as your agent.

Cerberus has appointed Travel Insurance Direct Pty Limited, ABN 30 121 659 470, AR 305589, as its authorised representative to assist in the management of its insurance activities, provide general advice and arrange to issue travel insurance online. TID acts on behalf of Cerberus and the insurer, and not on your behalf.

Our contact details:

Travel Insurance Direct Pty Limited ABN 30 121 659 470 Authorised Representative No. 305589



Sydney NSW 1235



1300 843 843

Cerberus Special Risks Pty Limited ABN 81 115 932 173 AFS Licence No. 308461



1300 625 229

PO Box A975 Sydney NSW 1235 Australia

For providing these services, Cerberus receives a percentage of the gross Premium (which includes the premium and taxes) from the insurer when you buy a policy. Cerberus pays a percentage of its commission to TID for its role in promoting travel insurance and arranging to issue **your** policy. If the insurer makes an underwriting profit in a given year, Cerberus can receive a profit commission based on the performance and profitability of all insurances placed by Cerberus.

If **you** are referred to TID, the affiliate who refers you is paid a referral fee from the commission that TID receives from Cerberus. The referral fee is calculated as a percentage of the gross premium when you buy a policy and is at no extra cost to you.

Employees of Cerberus and TID receive an annual salary. TID employees also receive a bonus provided they meet certain performance criteria, including sales.

You may ask each of us for more information about our remuneration within a reasonable time after we give you this FSG and before your policy is issued.

Cerberus has professional indemnity insurance arrangements that cover errors and mistakes relating to the insurance services provided by Travel Insurance Direct and Cerberus. The policy meets the requirements of the Corporations Act and provides cover for claims relating to the conduct of TID and Cerberus and their employees, even after that person ceases to be employed, provided that the claim is notified to the professional indemnity insurer when it arises and within the relevant policy period.

How we handle complaints

If **you** have a complaint **arising** out of this insurance or the financial services provided by the insurer, **our** employees, affiliates, or service providers, please contact:

Cerberus Customer Relations
 PO Box A975
 Sydney NSW 1235

Australia

1300 625 229

idr@cerberusrisks.com

Cerberus will respond to **your** complaint within 15 business days. If more time is needed to collect necessary information or complete any further investigation required, Cerberus will agree with **you** a reasonable alternative timeframe.

If **you** are not satisfied with the response to **your** complaint, and the complaint relates to the insurance, a claim, or the service provided by the underwriter, **you** may refer **your** case to Lloyd's General Representative in Australia for consideration under their dispute resolution process. Cerberus and all parties accepting this Insurance agree that:

- a) if a dispute arises under this Insurance, this Insurance will be subject to Australian law and practice and we will submit to the jurisdiction of any competent Court in the Commonwealth of Australia;
- b) any summons notice or process to be served upon the underwriters may be served upon:

Sportscover Syndicate 3334 Suite 2, Level 21, Angel Place 123 Pitt St Sydney NSW 2000



Phone: (02) 9223 1433

who has authority to accept service and to appear on the underwriters' behalf;

c) if a suit is instituted against any of the underwriters, all underwriters participating in this Insurance will abide by the final decision of such Court or any competent Appellate Court.

If **your** complaint relates to the services provided to **you** by Cerberus, TID, affiliates or other service providers, and **you** are not satisfied with Cerberus' response, **you** may request the matter be reviewed by the Financial Ombudsman Service (FOS): an independent body that operates nationally in Australia and aims to resolve certain insurance disputes. This service is free of charge to customers. Please note that **you** must register **your** dispute with the FOS within two years of receiving a decision from Cerberus Customer Relations.

If you are unhappy with the resolution of a complaint about the insurance, a claim, or the service of the underwriter after it has been referred to Lloyd's General Representative in Australia, you may also request the matter be reviewed by FOS.

FOS can be contacted at:

VIC 3001

Financial Ombudsman Service Limited (FOS) GPO Box 3 Melbourne

Phone: 1300 780 808 Fax: (03) 9613 6399

info@fos.org.au fos.org.au

Privacy Policy

To arrange and manage **your** travel insurance, **we** and **our** service providers including TID, Cerberus, and others who distribute this policy (collectively with **us** are referred to in this Privacy Policy as "we", "us" and "our") collect personal and health information from **you** and others (including those authorised by **you** such as **your** doctors, hospitals and persons whom **we** consider necessary).

We comply with the Privacy Act 1988 and the Health Records and Information Privacy Act 2002 and have developed a Privacy Policy that controls **our** handling of personal and health information.

Any personal information **you** provide is used by **us** to evaluate and arrange **your** travel insurance. **We** also use it to administer and provide the insurance services and manage **your** and **our** rights and obligations in relation to the insurance services, including managing, processing and investigating claims. **We** may also collect, use and disclose it for product development, marketing, research, IT systems maintenance and development, recovery against third parties and for any other purposes with **your** consent.

Our Privacy Policy covers:

- > what personal information is being collected;
- > who is collecting personal information;
- > how personal information is used;
- to whom and under what circumstances personal information is disclosed; and
- > how personal information is stored.

In most circumstance, we will:

- > only collect personal information about you with your consent unless it is legally required or authorised to do otherwise.
- collect your personal information directly from you where this is practical and possible.
- only collect personal information about you that is necessary and relevant to the purpose for which it is collected.
- > only use your personal information for the purpose for which it is collected or for a directly related secondary purpose that you could reasonably expect your personal information to be used for (unless legally required or authorised to do otherwise).
- > provide you with access to your personal information unless legally required or authorised to deny such access. An administration fee may be charged to process your request.
- > only disclose your personal information to a third party with your consent or where you could reasonably expect such disclosure or where we are legally required or authorised to do so.
- take reasonable steps to keep your personal information complete, current and accurate.
- take reasonable steps to ensure personal information about you is kept secure.

You can seek access to and correct your personal information by contacting us. You may not access or correct personal information of others unless you have been authorised by their express consent or otherwise under law, or unless they are your dependents under 16 years.

If **you** do not agree to the above or will not provide **us** with personal information, **we** may not be able to provide **you** with **our** services or products, process **your** application or issue **you** with a policy. In cases where **we** do not agree to give **you** access to some personal information, **we** will give **you** reasons why.

For further information about **our** Privacy Policy or to obtain a copy, please contact the Privacy Officer at Cerberus, PO Box A975, South Sydney NSW 1235.

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