

Combined Financial Services Guide & Product Disclosure Statement

Effective 26th August 2023

Contents

Contents	
Product Disclosure Statement	1
About this document	1
Your contract with us	1
Summary of cover	3
Before you buy	9
Medical conditions and pregnancy	12
Sports and activities	17
While you are travelling	18
Words with special meanings	20
General exclusions	25
Policy wording	29
Section benefits	29
What we cover - your health	
Section 1: Overseas emergency medical and hospi	
expenses Section 2: Emergency assistance	
Section 2: Emergency assistance	
What we cover - your journey	
Section 4: Cancellation or amendment expenses	
Section 5: Additional expenses	
·	
Section 6: Missed connections and special events	
Section 7: Travel delay	
What we cover - your belongings	43
Section 8: Luggage and personal effects	43

Section 9: Delayed luggage and personal effects 46
Section 10: Passport, travel documents and bank cards
Section 11: Theft of cash 48
What we cover - your personal exposure49
Section 12: Rental vehicle insurance excess
Section 13: Personal liability 50
Section 14: Accidental death 51
Section 15: Permanent disability52
Section 16: Loss of income 53
Section 17: Pet care
What we cover - COVID-1955
Section 18: COVID-19 overseas medical, hospital and emergency expenses55
Section 19 - COVID-19 cancellation fees and lost deposits
Section 20 - COVID-19 additional expenses 59
Section 21 - COVID-19 travel delay60
What we cover - your choices61
Cruise pack61
Motorcycle, moped and scooter pack 64
Important matters66
Financial Services Guide73

Product Disclosure Statement

About this document

Please take the time to read all information contained in this booklet. It includes important detail that **you** should read which will assist in **your** decision to decide if this product is right for **you**.

About Tokio Marine & Nichido

This insurance is issued by Tokio Marine & Nichido Fire Insurance Co., Ltd (Tokio Marine & Nichido) ABN 80 000 438 291, AFSL 246548. This means that **we** are the insurer. **Our** managing agent, Tokio Marine Management (Australasia) Pty Ltd. ABN 69 001 488 455 (TMMA) is authorised to act on **our** behalf to issue **our** policies and handle and settle claims in relation to those policies, subject to the terms of the authority. When **we** reference the words **us**, **we** and **our**, **we** are referring to Tokio Marine & Nichido.

Tokio Marine & Nichido is a part of the Tokio Marine Group, a global insurance group operating in 46 countries with over 40,000 employees.

About CHI Travel Insurance

Since CHI Travel Insurance Pty Ltd (ABN 70 131 684 636 Authorised Representative No. 327036) was established over 40 years ago, travel has completely changed!

Through years of experience, a passion for travel and the desire to offer our customers quality travel insurance, CHI Travel Insurance has evolved into the product available today.

Your contract with us

Upon the purchase of a **policy**, **you** will be issued with a **Certificate of insurance** (COI). The COI will outline what was advised at the time of finalising **your policy** and confirms **you** have entered into a contract with **us**. The COI, along with the Combined Financial Services Guide, Product Disclosure Statement and Policy Wording sets out the terms and conditions of the insurance **we** provide to **you** when **you** purchase a **policy**. These documents explain:

- Things to know before **you** buy
- What the policy covers and does not cover (known as Exclusions and General Exclusions)
- Limits under each section of cover
- Your obligations, including what you need to tell us when you apply, and what to do when you need to make a claim; and
- Other things **you** need to know about **your** insurance.

Contacting CHI Travel Insurance

Phone:1800 997 810 or +61 2 9997 4810Website:www.chitravelinsurance.com.auEmail:sales@chitravelinsurance.com.au

Contacting TMMA

Online:	https://chi-onlineclaim.tmnfatravelinsurance.com.au
Phone:	1300 852 071
Email:	chiclaims@tmnfatravelinsurance.com.au
Mail:	CHI Travel Insurance c/o TMNFA
	GPO Box 4616, Sydney NSW 2001

24 hour emergency assistance while overseas

Phone: +61 2 8055 1611 (Reverse charges accepted from the overseas operator).

Words with special meanings

Within **your** travel **policy** certain words have definite meanings that are in bold text. It is important that **you** are aware of them. Headings have been included for ease of reference and it is understood and agreed that the terms, conditions and exclusions of the **policy** are not to be construed or interpreted by reference to such headings.

Smart Traveller

For international travel, it is always a good idea to register **your** details with Smart Traveller before **you** depart, at <u>www.smartraveller.gov.au</u>

About CHI Travel Insurance and the person who provides you with the financial service

CHI Travel Insurance Pty Ltd (CHI Travel Insurance) ABN 70 131 684 636 Authorised Representative No. 327036 administers the **policy** which includes services such as customer service and arranging for medical assessments.

CHI Travel Insurance also arranges for the issue of this insurance as an agent of the insurer.

A person who provided **you** with the service may either be the insurer's authorised representative, referrer or distributor. They will:

- act on behalf of the insurer and not you;
- receive a commission; and
- if **you** are unhappy about the services in relation to this insurance that they have provided, please refer to the 'Complaints' section of this document.

If the person is an authorised representative, there is more information about them in the <u>Financial Services Guide</u> part of this document on page 73. **You** can ask the person whether they are a distributor, referrer or an authorised representative.



Summary of cover

Plan options	2 International Single Trip options	1 Multi-Journey Plan
	Top Plus International & Basic International	1 Domestic Plan
Cover options	Single, Family & Duo	
Additional options	You may choose to buy the:	
	Cruise pack*	
	Motorcycle, moped and scooter pack*	
	Excess variation	
	Pre-existing medical condition/s*	
	*Benefits are not automatically available for events related	d to these additional options
Exclusions and General	Step one: Check each Benefit Section 1-21 for s	pecific exclusions
Exclusions	Step two: Check General Exclusions applicable t	o all sections

Plan options International Single Trip

International Single Trip	Multi-journey	Domestic
Provides benefits for journeys to	Provides benefits for multiple	Provides benefits for journeys in
destinations outside of Australia (as	journeys both overseas and	Australia, including Norfolk Island
well as any domestic portion of your	within Australia (as long as your	and Lord Howe Island. As long as
overseas journey).	destination is at least 200km	your destination is at least 200km
Top Plus International:	from your home). The maximum	from your home , benefits are
see ' <u>International plan benefits table'</u>	period for any one journey is 45	available for the following sections
page 7.	days.	under the Domestic plan:
Basic International:	Benefits are available for the	Section 2: Emergency assistance
• Section 1: Overseas emergency	following options (if the option is	Section 4: Cancellation or
medical and hospital expenses	purchased and the conditions of	amendment expenses
Section 2: Emergency assistance	cover are met):	 Section 5: Additional expenses
• Section 3: Hospital cash allowance	Cruise pack	Section 6: Missed connections and
• Section 4: Cancellation or amendment	• Motorcycle, moped and	special events
expenses	scooter pack (this cover only	Section 7: Travel delay
 Section 5: Additional expenses 	applies for overseas journeys).	• Section 8: Luggage and personal
 Section 6: Missed connections and 		effects
special events	For domestic journeys , benefits	 Section 9: Delayed luggage and
Section 7: Travel delay	are available under the following	personal effects
 Section 8: Luggage and personal 	sections of the policy :	Section 12: Rental vehicle
effects	• Section 2: Emergency assistance	insurance excess
 Section 9: Delayed Luggage and 	Section 4: Cancellation or	 Section 13: Personal liability
personal effects	amendment expenses	 Section 14: Accidental death
 Section 10: Passport, travel 	Section 5: Additional expenses	 Section 19: COVID-19 Cancellation
documents and bank cards	Section 6: Missed connections	Fees and Lost Deposits
 Section 11: Theft of cash 	and special events	 Section 20: COVID-19 Additional
 Section 12: Rental vehicle insurance 	Section 7: Travel delay	Expenses
excess	 Section 8: Luggage and 	• Section 21: COVID-19 Travel Delay
 Section 13: Personal liability 	personal effects	Benefits are available for the
 Section 14: Accidental death 	• Section 9: Delayed Luggage and	following options (if the option is
 Section 15: Permanent disability 	personal effects	purchased and the conditions of
 Section 16: Loss of income 	Section 12: Rental vehicle	cover are met):
Benefits are available for the following	insurance excess	There is no cover under any policy if
options (if the option is purchased and	Section 13: Personal liability	your destination is less than 200km
the conditions of cover are met):	 Section 14: Accidental death 	from your home .
Cruise pack		-
• Motorcycle, moped and scooter pack.		
		I



Cover options

Single	Duo	Family
This plan type provides benefits for one adult and their dependents travelling together. The benefit limits apply to the combined total of all claims made by the travellers (including dependents) listed on the certificate of insurance .	This plan type provides benefits for two adult travelling companions travelling together. Duo cover does not provide cover for any dependents . The benefit limits under each section cover and optional cover apply to each traveller listed on the certificate of insurance , except for the following sections: • Section 4: Cancellation or amendment expenses • Section 12: Rental vehicle insurance excess • Section 13: Personal liability	This plan type provides benefits for two adults and their dependents travelling together. The benefit limits for Family cover are equal to double the benefit limits of Single cover and apply to the combined total of all claims made by the travellers (including dependents) listed on the certificate of insurance . * The benefit limits are not doubled for the following sections and additional cruise benefits: • Section 4: Cancellation or amendment expenses • Section 11: Theft of cash • Section 12: Rental vehicle insurance excess • Section 13: Personal liability • Section 17: Pet care • Cruise pack cover option: Missed port

Additional options

What additional cover options can you buy?

Our policy gives you the flexibility to choose the cover you need.

You may choose to buy the:

- Cruise pack to add benefits for cruising **overseas** or in Australian waters.
- <u>Motorcycle, moped and scooter pack</u> to ride a motorcycle, moped or scooter overseas as a driver or a passenger.

You must read '

What we cover - your choices' on pages 61 to 65 to understand:

- the additional cover options available;
- the conditions of cover; and
- what **we** won't pay.

You aren't automatically covered for events related to these additional benefit options. You must have chosen the additional cover option at the time you bought your policy or before your departure date, and any appropriate additional premium must have been paid. The additional benefit option must be listed on your certificate of insurance.



Your excess

An **excess** is the first amount **you** pay on any claim and is charged per claim event. **Your** chosen **excess** will be displayed on **your certificate of insurance**.

The standard excess on all plans is \$150 and applies to any claim arising from the following sections:

- Section 1: Overseas emergency medical and hospital expenses
- Section 4: Cancellation or amendment expenses
- Section 5: Additional expenses
- Section 6: Missed connections and special events
- Section 8: Luggage and personal effects
- Section 10: Passport, travel documents and bank cards
- Section 12: Rental vehicle insurance excess
- Section 13: Personal liability
- Section 18: COVID-19 **Overseas** medical and **hospital** expenses (not applied to Cash in **Hospital** or Funeral Expenses **Overseas**)
- Section 19: COVID-19 Cancellation fees and lost deposits
- Section 20: COVID-19 Additional expenses
- Section 21: COVID-19 Travel delay
- Cruise pack cover option: Missed shore excursions

You also have a choice to vary **your** standard \$150 **excess** by paying an additional premium to reduce **your excess** to nil **excess**, or **you** can reduce **your** premium by increasing the standard **excess** to \$250.

Your chosen excess will then be displayed on your certificate of insurance.

Top Plus International or Basic International plans bought after departing Australia.

If **you** have bought **your** Top Plus International plan or Basic International plan after departing Australia, there is no option available to vary **your excess**. In this instance there is a \$150 **excess** for all claims where there is an **excess** applicable.

Policy cover for Schengen visa-holders

If **you** are planning to apply for a Schengen visa, **our** Top Plus International and Basic International plans provide an unlimited **dollar** value benefit for expenses incurred due to repatriation for medical reasons, emergency medical treatment and **hospital** treatment.

These plans also provide cover for up to 30,000 EURO for **overseas** funeral expenses or repatriation of **your** remains if **you** pass away in a Schengen member-state.

You will need to list every country that you will visit with the Schengen visa on your policy. You should also check whether this policy meets the requirements of the Schengen visa as the insurance requirement may change from time to time.



Luggage item limits

	Top Plus	Basic		
	International	International	Multi-Journey	Domestic
Section cover limit	\$15,000	\$5,000	\$10,000	\$8,000
Sub-limits: Video recorders,	\$4,000	\$1,500	\$4,000	\$1,500
cameras (but not phone				
cameras), laptops, tablets				
and other personal handheld				
computers (including				
attached and unattached				
accessories)				
Sub-limits: Mobile phones,	\$1,500	\$1,000	\$1,500	\$1,500
smartphones and electronic				
watches (including attached				
and unattached accessories)				
Sub-limits: Medical aids	\$2,000	\$1,000	\$2,000	\$1,000
(Including attached and				
unattached accessories)				
Sub limits: All other items	\$750	\$750	\$750	\$750
(Including attached and				
unattached accessories)				
Sub limits: Essential	\$500	\$500	\$500	\$500
medication (for pre-existing				
medical condition(s) listed on				
your policy documents)				
Sub-limits: Luggage and	Up to \$200 for			
personal effects stolen	each stolen	each stolen	each stolen	each stolen
from a concealed storage	item up to a			
compartment of a locked	maximum of	maximum of	maximum of	maximum of
motor vehicle	\$2,000	\$2,000	\$2,000	\$2,000



International plan benefits table

Single	Duo	Family
When Single cover is selected, the benefit	When Duo cover is selected, the benefit	When Family cover is selected, the benefit
limits displayed in the table of benefits	limits displayed in the table of benefits	limits displayed in the table of benefits
apply to the combined total of all claims	apply to each traveller listed on your	below apply to the combined total of all
made by the travellers (including	certificate of insurance except for Section	claims made by the travellers (including
dependents) that are listed on your	benefit 4, 12 or 13. This section cover limit is	dependents on a family policy) listed on
certificate of insurance. Sub-limits may	the maximum amount we will pay for all	your certificate of insurance. Sub-limits
apply.	claims combined. Sub-limits may apply.	may apply.

	Tau Dhua ha		Decis luter	
	Single	ternational Family	Basic Inter Single	national Family
What we cover your bealth	Single	Failiny	Single	Failiny
What we cover – your health Overseas emergency medical and	Unlimited *~	Unlimited *~	Unlimited *~	Unlimited *~
hospital expenses	Unimited	Unlimited *~	Unimited	Unimited
2 Emergency assistance	Unlimited *~	Unlimited *~	Unlimited *~	Unlimited *~
3 Hospital cash allowance	\$6,000 *	\$12,000 *	\$3,000 *	\$6,000 *
What we cover – your journey				
4 Cancellation or amendment expenses	Cover chosen and	Cover chosen and	Cover chosen and	Cover chosen
	listed on your	listed on your	listed on your	and listed on
	certificate of	certificate of	certificate of	your certificate
	insurance *	insurance *	insurance *	of insurance *
5 Additional expenses	\$50,000 *	\$100,000 *	\$7,500 *	\$15,000 *
6 Missed connections and special	\$5,000	\$10,000	\$2,000	\$4,000
events 7 Travel delay	\$2,000 *	\$4,000 *	\$1,000 *	\$2,000 *
	\$2,000	\$4,000	\$1,000	\$2,000
What we cover – your belongings 8 Luggage and personal effects	\$15,000 *	\$30,000 *	\$5,000 *	\$10,000 *
9 Delayed luggage and personal effects	\$750 *	\$1,500 *	\$200 *	\$400 *
10 Passports, travel documents and	\$5,000	\$10,000	\$500	\$1,000
bank cards	<i>\$3,000</i>	<i>\</i> 10,000	çsoo	<i>φ</i> 1,000
11 Theft of cash	\$250	\$250	\$250	\$250
What we cover – your personal expo				
12 Rental vehicle insurance excess	\$8,000 *	\$8,000 *	\$3,000 *	\$3,000 *
13 Personal liability	\$5,000,000	\$5,000,000	\$1,000,000	\$1,000,000
14 Accidental death	\$25,000 *	\$50,000 *	\$10,000 *	\$20,000 *
15 Permanent disability	\$50,000 *	\$100,000 *	\$10,000 *	\$20,000 *
16 Loss of income	\$10,400 *	\$20,800 *	\$5,200 *	\$10,400 *
17 Pet care	\$500 *	\$500 *	No cover	No cover
What we cover – COVID-19				
18 COVID-19 Overseas Medical and	Unlimited *~	Unlimited *~	No cover	No cover
Hospital and Emergency Expenses 19 COVID-19 Cancellation Fees and Lost			No cover	No cover
Deposits	Section 19, 20 &	Section 19, 20 &	NO COVER	No cover
20 COVID-19 Additional Expenses	21 Combined limit	21 Combined limit	No cover	No cover
21 COVID-19 Travel Delay	\$3,500	\$7,000	No cover	No cover
What we cover – your choices – Cruis		<i>Ţ</i> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Missed shore excursions	\$1,000	\$2,000	\$1,000	\$2,000
Missed port	\$800 *	\$1,600 *	\$800 *	\$1,600 *
Emergency formal attire	\$250	\$500	\$250	\$500
Cabin confinement	\$1,500 *	\$3,000 *	\$1,500 *	\$3,000 *
What we cover – your choices – Mot	orcycle, moped ar			
Motorcycle, moped and scooter	Optional	Optional	Optional	Optional
cover				

* Sub-limits apply to particular types of losses or claims.

~ \$Unlimited means that generally there is no cap on the maximum **dollar** amount which may be paid out for this benefit, subject to the specific terms and conditions, **sub-limits** and exclusions that apply to this benefit.

This benefit covers **reasonable overseas** medical and **hospital** costs as a result of an **injury** or **sickness** occurring which first shows itself during **your journey** dates as outlined on the **certificate of insurance**.



Multi-Journey and Domestic plan benefits table

Single

When **Single cover** is selected, the benefit limits displayed in the table of benefits apply to the combined total of all claims made by the travellers (including **dependents**) that are listed on **your certificate of insurance. Sub-limits** may apply.

Duo

When **Duo cover** is selected, the benefit limits displayed in the table of benefits apply to each traveller listed on **your certificate of insurance** except for Section benefit 4, 12 or 13 this section cover limit is the maximum amount **we** will pay for all claims combined. **Sub-limits** may apply Family When Family cover is selected, the benefit limits displayed in the table of benefits below apply to the combined total of all claims made by the travellers (including dependents on a family policy) listed on your certificate of insurance. Sub-limits may apply.

		Multi-Journey		Domestic	
		Single	Family	Single	Family
W	nat we cover – your health				
1	Overseas emergency medical and	Unlimited *~	Unlimited *~	No cover	No cover
	hospital expenses				
2	Emergency assistance	Unlimited *~	Unlimited *~	\$10,000	\$20,000 *
3	Hospital cash allowance	\$6,000 *	\$12,000 *	No cover	No cover
	nat we cover – your journey				
4	Cancellation or amendment	Cover chosen and	Cover chosen and	Cover chosen and	Cover chosen and
	expenses	listed on your	listed on your	listed on your	listed on your
		certificate of	certificate of	certificate of	certificate of
_		insurance *	insurance *	insurance *	insurance *
5 6	Additional expenses Missed connections and special	\$50,000 *	\$100,000 *	\$10,000 *	\$20,000 *
D	events	\$5,000	\$10,000	\$2,000	\$4,000
7	Travel delay	\$2,000 *	\$4,000 *	\$2,000 *	\$4,000 *
Wł	nat we cover – your belongings				
8	Luggage and personal effects	\$10,000 *	\$20,000 *	\$8,000 *	\$16,000 *
9	Delayed luggage and personal effects	\$750 *	\$1,500 *	\$750 *	\$1,500 *
10	Passports, travel documents and	\$5,000	\$10,000	No cover	No cover
	bank cards				
	Theft of cash	\$250	\$250	No cover	No cover
Wł	nat we cover – your personal expo				
12	Rental vehicle insurance excess	\$8,000 *	\$8,000 *	\$6,000 *	\$6,000 *
13	Personal liability	\$5,000,000	\$5,000,000	\$1,000,000 *	\$1,000,000 *
14	Accidental death	\$25,000 *	\$50,000 *	\$10,000 *	\$20,000 *
15	Permanent disability	\$50,000 *	\$100,000 *	No cover	No cover
16	Loss of income	\$10,400 *	\$20,800 *	No cover	No cover
17	Pet care	\$500 *	\$500 *	No cover	No cover
_	nat we cover – COVID-19				
18	COVID-19 Overseas Medical and Hospital and Emergency Expenses	No cover	No cover	No cover	No cover
19	COVID-19 Cancellation Fees and Lost	No cover	No cover	Section 19, 20 &	Section 19, 20 & 21
	Deposits			21 Combined limit	Combined limit
20	COVID-19 Additional Expenses	No cover	No cover	\$3,500	\$7,000
21	COVID-19 Travel Delay	No cover	No cover		
Wł	nat we cover – your choices – Crui	se cover			
	Missed shore excursions	\$1,000	\$2,000	No cover	No cover
	Missed port	\$800 *	\$1,600 *	No cover	No cover
	Emergency formal attire	\$250	\$500	No cover	No cover
	Cabin confinement	\$1,500 *	\$3,000 *	No cover	No cover
W	nat we cover – your choices – Mot	orcycle, moped a	nd scooter cover		
	Motorcycle, moped and scooter	Optional	Optional	No cover	No cover
	cover				

* Sub-limits apply to particular types of losses or claims.

~ \$Unlimited means that generally there is no cap on the maximum **dollar** amount which may be paid out for this benefit, subject to the specific terms and conditions, **sub-limits** and exclusions that apply to this benefit.

This benefit covers **reasonable overseas** medical and **hospital** costs as a result of an **injury** or **sickness** occurring which first shows itself during **your journey** dates as outlined on the **certificate of insurance**.

Before you buy Your duty to take reasonable care not to make a misrepresentation

Before **you** enter into this contract of insurance, **you** have a duty to take reasonable care not to make a misrepresentation. **You** have a similar duty when **you** ask **us** to vary, extend or reinstate the insurance. What that means is that **you** need to take reasonable care to provide honest, accurate and complete answers to any questions that **we** ask.

Specifically when **you** ask **us** to vary, extend or reinstate **your** insurance, **you** need to take reasonable care to review any information that **we** provide to **you** for **your** confirmation and to inform **us** of any changes, where the information is no longer honest, accurate and complete.

If **you** are not sure of the answers to any of **our** questions, or whether the information **you** previously provided remains honest accurate and complete, **you** should take the time to check and find out. It is also important to understand that, in answering the questions and checking the information, **you** are answering for **yourself** and anyone else to whom the questions apply.

As **we** use **your** answers to decide what insurance **we** will offer, to calculate **your** premium, and to assess any claim **you** make, it is essential that **you** contact **us** if **you** have any doubts.

If **you** do not take reasonable care in answering **our** questions, or to inform **us** of any changes, **you** may breach **your** duty.

If that happens, **your policy** may be cancelled, or treated as if never existed, and any claim may be denied or not paid in full.

If **your** circumstances make it difficult for **you** to work out how to answer any of **our** questions, or **you** are not clear how to explain **your** situation to **us**, **you** should contact **us** to discuss **your** queries.

Who can purchase this policy

Eligibility requirements

1. Top Plus International, Basic International & Domestic plans (bought before you commence

your journey)

You can only get cover under this **policy** for these plans if **you** meet all of the following:

- a. Either:
 - i. you hold a valid Australian Medicare card; or
 - ii. you hold a temporary visa that includes a condition to maintain health insurance whilst in Australia; and
- b. you currently reside in Australia;
- you buy this policy before you leave Australia (unless you meet the eligibility requirements to purchase this policy after departing Australia);
- d. you start and end your journey in Australia and;

e. where you hold a temporary visa, your visa remains valid beyond the period of your return to Australia.
For clarity, the above means that a person living in Australia on a working holiday visa or visiting on a tourist visa that does not require you to maintain health insurance cannot be covered under this policy.

You also cannot purchase this **policy** if **you** have already started **your journey**.

2. Top Plus International and Basic International plans (bought after departing Australia)

You can only get cover under this **policy** for these plans if:

- a. you hold a valid Australian Medicare card;
- b. you currently reside in Australia;
- you let us know at the time you buy your policy you are already overseas;

d. **you** hold a prepaid return airfare to Australia. Temporary visitors are not eligible to purchase policies after departing Australia.

Please note that Top Plus International and Basic International plans bought after departing Australia are subject to:

- a 48-hour no cover period applies to all benefits (there is no cover under any section of the **policy** for any events that occur prior to purchasing the **policy** or within the first 48 hours after **you** have bought **your policy**); and
- a \$150 excess for all claims where there is an excess applicable.

3. Multi-Journey plan

You can only get cover under this **policy** for the Multi-Journey plan if **you** meet all of the following:

- a. Either:
 - i. you hold a valid Australian Medicare card; or
 - ii. **you** hold a temporary visa that includes a condition to maintain health insurance whilst in Australia; and
- b. **you** are aged 74 years and under at the time **you** buy the **policy**;
- c. you currently reside in Australia;
- d. you buy this policy before you leave Australia;
- e. you start and end your journey in Australia; and
- f. where **you** hold a temporary visitor visa, **your** visa remains valid beyond the period of **your** return to Australia.

For clarity, the above means that a person living in Australia on a working holiday visa or visiting on a tourist visa that does not require **you** to maintain health insurance cannot be covered under this **policy**. **You** also cannot purchase this **policy** if **you** have already started **your journey**.

If you have bought Family cover under a Multi-Journey plan, benefits are provided to your spouse or partner when they are travelling with you or independently of you. Benefits are also available to your dependents under this Family cover when they are travelling with you or your spouse or partner.

The maximum period for any one **journey** is 45 days.

Are your dependents covered?

Benefits are available for **your dependents** under **Single cover** or **Family cover** if they are:

- under the age of 25 years at the time you buy your policy;
- financially dependent on their parents and/or grandparents and not working fulltime;
- travelling with **you** for **your** entire **journey**; and
- listed on the certificate of insurance as dependents. But, if your dependents need cover for a Pre-existing medical condition, you may need to pay an additional premium.

When are benefits available?

The period **you** are covered for is set out on **your certificate of insurance** and varies depending on the length of **your journey** and the type of plan **you** have bought. **Your period of insurance** is between the issue date and return date listed on **your certificate of insurance**. If **your journey** includes travel within Australia before going **overseas** or after leaving **your overseas** destination but before returning **home**, **you** should specify travel dates that match with the dates **you** depart from and return to **your home** when **you** buy **your policy**, not just the dates **you** are **overseas**.

Where **you** have bought **your policy** after departing Australia, a 48-hour no cover period will apply to all benefits from the time the **policy** is issued.

When does your cover start? Top Plus International, Basic International,

Domestic plans

Polices bought before you depart.

When does your cover start?

- Cover for Section 4: Cancellation or amendment expenses starts from the time **you** buy **your policy**.
- Cover for all other sections starts when **you** leave **your home** to begin **your journey** on the departure date listed on **your certificate of insurance**.

When does your cover end?

Your cover ends:

- when you return home; or
- on the return date listed on **your certificate of insurance**; or
- on the date, **you** submit a claim under Section 4: Cancellation or amendment expenses following the cancellation of **your** entire **journey** by **you**,
- whichever happens first.

Polices bought after you depart.

For eligible **policy** holders already **overseas**, who have bought a Top Plus International or Basic International plan after departing Australia, **your** period of cover is explained as below.

When does your cover start?

• There is no cover under any section of the **policy** for the first 48 hours from the time the **policy** is issued. This is **your** no cover period. This means there is no cover **arising** from any claim events that happen prior to purchasing the **policy** or within the waiting period. Cover under the sections of **your policy** begins immediately after the first 48 hours. Your cover ends:

- when you return home; or
- on the return date listed on **your certificate of insurance**; or
- on the date you submit a claim under Section 4: Cancellation or amendment expenses following the cancellation of your entire journey by you, whichever happens first.

Multi-Journey plan

When does your cover start?

- Cover for Section 4: Cancellation or amendment expenses starts from the **relevant time** (the first time at which any part of the relevant **journey** is paid for or the time at which the **policy** is issued, whichever is the latter).
- Cover for all other sections starts at the beginning of each journey or the departure date listed on your certificate of insurance.

When does your cover end?

- Cover for any one journey ends when you return home from each journey or on the return date listed on your certificate of insurance, whichever happens first. All cover ends when your policy expires.
- Cover is reinstated for all sections under the policy on the completion of each journey except for Section 13: Personal liability where the benefit limit is the maximum we will pay for all claims combined during the 12-month policy period.
- The maximum period for any one **journey** is 45 days. You can make as many **journey**s as **you** wish during your period of insurance.

Please note that **you** are only covered for any incidents or events that happen during the first 45 days of **your journey**. There is no cover for any incident or event that happens outside of the 45 days.

Cancelling your policy

If **you** would like to cancel **your policy**, please contact **your** issuing travel agent. Once **you** cancel **your policy**, **you** are unable to make a claim on it.

Cancelling within your cooling-off period

You have 21 days from the date you buy your policy to decide if it meets your needs.

We call this the 'cooling-off' period. During this time, you can cancel your policy, and we'll give you a full refund of your premium (less any taxes or duties we cannot recover), if:

- you haven't made, and don't plan to make, a claim under the policy; and
- the start of **your journey** hasn't happened.

What happens if you cancel outside your cooling-off period?

If **you** would like to cancel **your policy** outside the cooling-off period then **you** can request **us** to consider this, provided:

• you haven't made, and don't plan to make, a claim under the policy; and

the start of your journey hasn't happened.
 We will consider your request and may at our discretion provide you with a pro-rated refund. This refund (and our decision in providing you with a refund which will not be unreasonably withheld) will be based on numerous factors including:

- The level of cover/policy type chosen; and/or
- The date **you** purchased **your policy** and the date the **journey** would have begun; and/or
- Any other extenuating circumstances.

Making changes to your policy

You can request a change to your policy by contacting your issuing travel agent or CHI Travel Insurance.

If the change can be made, we'll let **you** know whether there is any additional premium that **you** need to pay.

Changes to **your policy** will only start once **we** receive any additional premium (if required) and **we** have confirmed the changes to **you** in writing with a new **certificate of insurance**.

Your duty to take reasonable care not to make a misrepresentation still applies when you make a change to your policy. Check out page 9 for details on '<u>Your</u> duty to take reasonable care not to make a misrepresentation'.

Medical conditions and pregnancy

Pre-existing medical condition(s)

Please carefully consider **your** medical history, the medical history of any other person listed on **your certificate of insurance**, as well as the health of **your travelling companion** and **your close relatives**. Not all **Pre-existing medical condition**(s) are covered automatically, and some can't be covered at all. The cover available for **Pre-existing medical condition**(s) is explained below.

What cover is there for a Pre-existing

medical condition(s) suffered by travellers

listed on your certificate of insurance?

There is cover for claims **arising** from or made worse by a **Pre-existing medical condition**(s) suffered by **you** if the **Pre-existing medical condition**(s) is covered as specified under <u>'Pre-existing medical condition(s) we</u> <u>cover</u>' on pages 13 and 14, or **we** have agreed in writing to provide cover to **you** for the **Pre-existing medical condition**(s) after a medical assessment, where the appropriate premium has been paid.

Cover is only available for claims **arising** from or made worse by a **Pre-existing medical condition**(s) suffered by **your travelling companion**, who is not listed on **your certificate of insurance**, if the **Pre-existing medical condition**(s) is covered as specified under '<u>**Pre-existing**</u> <u>medical condition(s) we cover'</u> on pages 13 and 14. A **travelling companion**, who is not listed on **your certificate of insurance**, cannot complete a medical assessment.

Please note that there is no cover under this **policy** for any claims **arising** from, related to or associated with a **Pre-existing medical condition**(s) that:

- we are unable to cover after a medical assessment;
- is pending investigation, test results, diagnosis or specialist consultation;
- that we cannot cover under any circumstances under the policy; or
- for which we have agreed to provide cover but you chose not to accept the cover and/or have not paid the applicable premium, unless it is covered as specified under 'Pre-existing medical condition(s) we cover' on pages 13 and 14 and you meet the condition of the cover for the specific Pre-existing medical condition(s) or we have agreed to cover in writing and it is noted on your certificate of insurance.

For additional health-related circumstances that are excluded, **you** should also read 'General exclusions' on pages 25 to 28.

What cover is there for people who aren't

travelling with me like my close relatives?

There is limited cover '<u>Section 4: Cancellation or</u> <u>amendment expenses'</u> on pages 35-38 and <u>'Section 5:</u> <u>Additional expenses'</u> on pages 38 to 40 for claims **arising** from, related to or associated with the **sickness**, **injury** or **Pre-existing medical condition**s suffered by **your close relatives** (such as **your** parents or grandparents).

Except for this limited cover, and that provided for travelling companions not listed on your certificate of insurance, there is no cover under this policy for any other claims arising from, related to or associated with, a **Pre-existing medical condition** suffered by people who aren't listed on your certificate of insurance.

What's a Pre-existing medical condition?

A **Pre-existing medical condition** means any medical, dental or physical condition, defect, disease, or illness including any **mental illness**, of which **you** were aware, or should reasonably have been aware, of at the **relevant time** that meets any one or combination of the following:

- 1. A condition that is **chronic**, ongoing, terminal, requires ongoing consultation with a specialist, requires regular review or check- ups, or requires ongoing medication for treatment or to control risk factors; or
- 2. A condition that in the past 2 years:
 - a. has been diagnosed; or
 - b. has been treated; or
 - c. medication has been prescribed for (including to control risk factors); or
 - d. has required an emergency department visit, hospitalisation or day surgery procedure; or
 - e. has shown symptoms or signs that **you** have not yet sought a medical opinion regarding the cause; or
 - f. is pending investigation, test results, diagnosis or specialist consultation.
- 3. A condition that at any time in the past involves one or more of the following:
 - a. heart, circulatory system, lungs or respiratory system, brain, kidneys, liver, or cancer; or
 - b. surgery involving the back, neck, joints, or abdomen; or
 - c. drug or alcohol dependency; and
- 4. Any complication related to any condition above.

Please note that the time periods for the conditions listed above are measured in relation to the **relevant time**:

- a. For Single-Trip plans (Top Plus International, Basic International and Domestic plans): this starts from the time of issue of the **policy**.
- b. For the Multi-Journey plan: this starts from the first time at which any part of the relevant journey is paid for or the time at which the policy is issued, whichever occurs last.

This definition applies to **you** and anyone else listed on **your certificate of insurance**, **your travelling**

companion, **your close relatives** or anyone one else associated with **your** claim.

If you are unsure whether you or anyone else listed on your certificate of insurance has a Pre-existing medical condition, please call our Medical Assessment team on:

1800 888 448 or +61 2 9979 8888.

Getting cover for your Pre-existing medical

condition(s)

We have three categories of pre-existing medical conditions:

- 1. Pre-existing medical conditions we cover
- 2. Pre-existing medical conditions we need to assess
- 3. Pre-existing medical conditions which we cannot cover.

It's important that **you** understand whether **your Pre**existing medical condition is covered, whether we need to assess it or whether we cannot cover **you**.

Where **your Pre-existing medical condition** is not covered by meeting criteria as stated in the '**Pre-existing medical condition**(s) **we** cover' section below, **you** will not be covered for any medical condition **arising** out of a pre-existing condition unless **you** have applied for the cover, the condition is approved by **us**, the additional premium is paid if required, and the condition is listed on **your certificate of insurance**.

Pre-existing medical condition(s) we cover

You must read this information carefully. It is important that you understand whether your Pre-existing medical condition is covered.

We cover the Pre-existing medical conditions listed in the table below as long as you meet the following criteria:

- you haven't been hospitalised or needed treatment by any medical practitioner in the last 12 months (unless a different time period is listed in the table) for any of the listed conditions; and you aren't under investigation for any of the listed conditions; and
- **you** aren't awaiting investigation, surgery, treatment or procedures for any of the listed medical conditions; and
- **your** condition meets the relevant additional criteria listed in the table.



	Contents
Medical Condition	Additional criteria
1. Acne	No additional criteria.
2. Allergy	 You have no known respiratory conditions e.g., asthma; and
	• You haven't required treatment by a medical practitioner in the last 6 months
3. Asthma	You are under 60 years of age;
	 In the last 12 months, you haven't had an asthma exacerbation requiring
	treatment by a medical practitioner; and
	 You don't have a chronic lung condition or disease.
4. Bell's palsy	No additional criteria.
5. Bunions	No additional criteria.
6. Carpal tunnel syndrome	No additional criteria.
7. Cataracts	In the last 90 days, you haven't had an operation for this condition.
8. Coeliac disease	In the last 6 months, you haven't been treated by a medical practitioner
	for this condition.
9. Congenital blindness	No additional criteria.
10. Congenital deafness	No additional criteria.
11. Ear grommets	You haven't had an ear infection in the last 3 months
12. Epilepsy	• You haven't required hospitalisation for epilepsy, including as an outpatient in
	the last 2 years;
	• You haven't changed your medication regime for epilepsy in the last 12 months;
	and
	• You don't have an underlying medical condition e.g., previous head trauma, brain
	tumor or stroke.
13. Gastric reflux	Your gastric reflux doesn't relate to an underlying diagnosis e.g., hernia or gastric
	ulcer.
14. Glaucoma	You have no ongoing complications for this condition.
15. Goiter	No additional criteria.
16. Gout	No additional criteria.
17. Graves' disease	No additional criteria.
18. Hiat us hernia	No additional criteria.
19. Hip replacement, knee	The procedure was performed more than 6 months ago and less than 10 years ago.
replacement	
20. Hip resurfacing	The procedure was performed more than 6 months ago and less than 10 years ago
	and you haven't had any post-operative complications relating to the surgery.
21. Hypercholesterolemia	You don't have a known heart or cardiovascular condition.
(high cholesterol)	
22. Hypertension	You don't have a known heart or cardiovascular condition;
(high blood pressure)	 You don't have Type 1 diabetes or Type 2 diabetes; and
	 In the last 12 months your blood pressure medication has not changed; and
	 You aren't suffering symptoms of hypertension.
23. Menopa us e	You don't have osteoporosis.
24. Migraine	No additional criteria.
25. Peptic ulcer/gastric ulcer	In the last 12 months, the peptic / gastric ulcer has been stable.
26. Plantar fasciitis	No additional criteria.
27. Raynaud's disease	No additional criteria
28. Skin cancer	Your skin cancer is not a melanoma;
	 You haven't had chemotherapy or radiotherapy for this condition; and
	 Your skin cancer does not require any follow-up treatment.
29. Trigger finger	No additional criteria.
30. Urinary incontinence	No additional criteria.
31. Underactive	The cause of your underactive/overactive thyroid wasn't a tumor.
thyroid/overactive	
thyroid	

Pre-existing medical conditions we need

to assess

If you want cover for a **Pre-existing medical** condition(s) that your condition(s):

- does not meet the criteria in the table set out in 'Pre-existing medical condition(s) we cover'; or
- are not listed in the table set out in 'Pre-existing medical condition(s) we cover';

You will need to complete a medical assessment for your condition(s) to see if we can cover them.

You can complete a medical assessment with your travel insurance quote. The process will be explained to you during the quote.

If you complete a medical assessment for your Preexisting medical condition(s), but you don't tell us about all your Pre-existing medical conditions and you make a claim due to a Pre-existing medical condition you didn't disclose to us, we may be unable to provide cover.

There are two possible outcomes once **you've** completed a medical assessment for **your Pre-existing medical condition**(s) when **you** apply for a **policy**:

1. We can cover your Pre-existing medical condition(s)

We'll offer **you** a **policy** covering unexpected events relating to **your Pre-existing medical condition**(s). An additional premium may be payable, and the condition(s) will be listed on **your policy** documents.

2. We can't cover your Pre-existing medical condition(s)

If **your** risk is higher than **we're** able to cover, or unknown because **you** have symptoms that haven't been diagnosed, **we** may decline to offer **you** a **policy** or offer **you** a **policy** with special exclusions for the **Preexisting medical condition**(s).

3. Pre-existing medical conditions which

we cannot cover

We cannot cover under any circumstances:

- Your terminal illness.
- Any conditions involving drug or alcohol dependency.
- Any travel booked or undertaken against the advice of any medical practitioners.
- Any conditions for which **you** are travelling to seek

medical treatment or review, or to participate in a clinical trial.

 Any Pre-existing medical condition that is pending investigation, test results, diagnosis or specialist consultation, or for which you are aware of or should reasonably be aware of for which you have not sought treatment or advice.

Cover for pregnancy

Important note: **Our policy** only provides cover for **your** pregnancy in limited circumstances.

We cover single non-complicated pregnancies up to the end of the 25th week automatically. For all other pregnancies a medical assessment is required to determine if **we** can provide cover.

There is no cover under any circumstances:

- for any pregnancy beyond the end of the 25th week; or
- for childbirth at any stage of the pregnancy or for costs relating to the health or care of a newborn child.

This 'Cover for pregnancy' section applies to **your** pregnancy and the pregnancy of anyone else associated with a claim.

We don't consider pregnancy a Pre-existing medical condition. But, we do consider pregnancy complications to be Pre-existing medical conditions. This means you need to declare them, along with any other Pre-existing medical condition(s) so that we can assess your overall health risk.

When **we** use the word 'complications' in this 'Cover for pregnancy' section, **we** mean a medical condition that is caused by or adversely affected by pregnancy. Complications may include health problems that happen during pregnancy or may be caused by medical conditions that already existed prior to the pregnancy. Some examples of complications are miscarriage, gestational diabetes, hyperemesis or pre-eclampsia.

When do you need to call us to complete

a medical assessment?

To ensure **you** understand the cover available to **you**, **we** recommend **you** call **us** before purchasing **your policy** if:

there have been complications with this pregnancy

or a previous pregnancy;

- **you** have a multiple pregnancy (for example, twins or triplets);
- you have any other Pre-existing medical condition which could have an impact on your pregnancy or vice versa; or
- the conception was medically assisted (for example, fertility treatment including hormone therapies or IVF).

If after purchasing your policy and before starting your journey:

- you were not pregnant at the time you purchased your policy and now have a pregnancy-related complication; or
- you were pregnant at the time you purchased your policy and have since suffered an onset of complications that were not previously declared.
 You should contact your medical advisor and get written confirmation that you are fit to travel. See

<u>'Changes in health, new medical conditions or finding</u> <u>out you're pregnant after buying **your policy**</u> on pages 16 and 17 for more information.

If **you** are unsure whether **you** need to complete a medical assessment for **your** pregnancy, please call our Medical Assessment team on **1800 888 448** or **+61 2 9979 8888.**

What is covered

We will pay under the benefit sections of your policy for claims that result from unexpected complications of your single non-complicated pregnancy, or other pregnancy and/or any pregnancy related complications that are listed on your certificate of insurance:

• up to the end of the 25th week of **your** pregnancy

What is not covered

We won't pay any claims, costs or losses under any section of the **policy** if **your** claim **arises** from or is related to:

- **your** pregnancy or the pregnancy of anyone else from the end of the 25th **we**ek
- your pregnancy other than any single noncomplicated pregnancy, unless you have completed a medical assessment, we have agreed to provide cover, you have paid any additional premium (as required) and it is noted on your certificate of insurance.

- anyone else's pregnancy other than any single noncomplicated pregnancy.
- for childbirth at any stage of the pregnancy;
- the health or care of a newborn child, irrespective of the stage of pregnancy when the child is born;
- regular antenatal care; and
- pregnancy complications suffered by you or anyone else listed on the certificate of insurance that:
 - existed at the **policy relevant time**;
 - you know about prior to the start of your journey:
 - you suffered in the past;
 - are related to another **Pre-existing medical** condition;
 - involve a multiple pregnancy; or involve a pregnancy that was medically assisted e.g. using assisted fertility treatment including hormone therapies or IVF, unless **you** applied to cover such complication;
 - or Pre-existing medical condition, the complication or Pre-existing medical condition is approved by us, the additional premium is paid if required, and the complication or Preexisting medical condition is listed on your policy certificate of insurance.

It's important also to read 'General exclusions' on pages 25 to 28.for other reasons why **we** won't pay.

Changes in health, new medical conditions or finding out you're pregnant

after buying your policy

If any of the following events **arise** at any time after **you** buy **your policy**, but before the start of **your journey**, or each **journey** under **your** Multi- Journey plan, **you** must contact **your medical advisor** and get written confirmation that **you** are fit to travel:

- a change in a Pre-existing medical condition that was either covered as specified '<u>Pre-existing</u> <u>medical condition(s) we cover</u>' on pages 13 and 14 or a change to a Pre-existing medical condition that we covered for an additional premium when you purchased the policy;
- a completely new medical condition (or the symptoms of one);
- a pregnancy.



If you don't get written confirmation from your medical advisor that you are fit to travel, or the medical advisor declares you unfit to travel, you will not be covered for any claim that arises from that condition if you still travel.

If **your medical advisor** declares **you** unfit to travel, then **you** are covered under the terms of **your** existing **policy** to cancel **your journey** and make a claim under Section 4: Cancellation or amendment expenses.

There is no cover under '<u>Section 1: **Overseas**</u> <u>emergency medical and **hospital** expenses</u>' for continuation or follow up of medical treatment (including medication and ongoing immunisations) that started before **your journey**.

What happens if you have a Pre-existing medical condition(s) or pregnancy, but you didn't take steps to cover it under

your policy?

We won't pay any claims, costs or losses under any section of the policy arising from or, related to your Pre-existing medical condition(s) or pregnancy if:

- You didn't purchase cover for your Pre-existing medical condition(s) or pregnancy at the relevant time or, at the latest, before you depart on your journey;
- You complete a medical assessment for your Preexisting medical condition(s) or pregnancy, and we decline cover; or
- We agreed to provide cover for your
- Pre-existing medical condition(s) or pregnancy, and you don't pay the required additional premium.

This could mean having to pay hundreds and thousands of **dollars** out of **your** own pocket for expenses if **you** experience a medical emergency **overseas**.

If you are unsure whether you need to complete a medical assessment for your Pre-existing medical condition(s) or pregnancy, please call our Medical Assessment team on 1800 888 448 or +61 2 9979 8888.

Sports and activities Cover for sports and other leisure activities

What's covered

You are covered for most amateur sports and leisure activities as long as:

- you act in a reasonable way to protect yourself. This means enjoying the activities with an appropriately licensed outdoor pursuits or sports organisation, following their instructions, and complying with any rules and guidelines for the sport or activity;
- you aren't taking part in and/or competing in any race or timed activity (other than on foot and it's no greater than 43kms);
- you aren't taking part in or training for a professional sport.

Winter sports

Subject to terms and conditions, the cover for the following non-competitive **winter sports** activities are included in each plan:

- on piste recreational skiing and snowboarding;
- bigfoot skiing and snowboarding (only on a guided tour that is available to the general public and provided by a licensed tour operator);
- cat skiing and snowboarding (only on a guided tour that is available to the general public and provided by a licensed tour operator);
- cross-country skiing and snowboarding (along a designated cross-country ski route only);
- glacier skiing and snowboarding (only on a guided tour that is available to the general

public and provided by a licensed tour operator);

- heli-skiing and snowboarding (only on a guided tour that is available to the general public and provided by a licensed tour operator);
- ice hockey;
- ice skating;
- lugeing on ice (provided by a licensed tour operator and available to the general public only);
- on-piste mono skiing and snowboarding;
- off-piste skiing and snowboarding with a professional snow sports instructor/guide;
- snowmobiling; and
- tobogganing.

It is important also to read 'General Exclusions' on pages 25 to 28 for other exclusions that may apply.

What's not covered

- We won't pay any claims, costs or losses under any section of the **policy arising** from or, related to the following sports and leisure activities:
- Any of the following winter or snow-related activities: ski/snowboard racing (including training), ski/snowboard acrobatics, freestyle skiing/snowboarding, ski/snowboard fun parks, ski/snowboard jumping or stunting, off-piste skiing/ snowboarding without a professional snow sports instructor/guide, cross-country skiing outside of a designated cross-country ski route, bobsleighing and parascending (over snow).
- Contact sports, including but not limited to rugby and martial arts.

While you are travelling

Overseas emergency assistance

If something unexpected happens while **you** are **overseas**, **we** want to ensure **we** can help make it as stress free as possible. If **you** have an emergency medical situation, **our** team will help to keep **you** in Driving or being driven in a recreational all- terrain vehicle overseas unless you are under the direct supervision of an operator licensed in the country you are riding in, you obey all relevant safety requirements, and you wear a helmet.

- Hunting.
- Mountaineering or rock-climbing using ropes or climbing equipment (other than for hiking).
- Open water voyages.
- Parachuting (including BASE jumping), hanggliding or paragliding.
- Polo.
- Scuba diving using an artificial breathing apparatus unless you hold an open water diving license recognised in Australia or you are diving under licensed instruction, and you are diving at no greater depth than 30 metres.
- Taking part in, or training for, a professional sport of any kind.
- Taking part in and/or competing in any race or timed activity (other than on foot and it's no greater than 43kms).
- Travel by air or sea, unless **you** are a passenger with a paid ticket on a:
 - scheduled transport service; or
 - licensed charter flight; or
 - hot air balloon with a commercial operator licensed in the country you are in; or
 - licensed sightseeing air tour from one location back to that location; or
- licensed charter vessel where the crew are included, operating within coastal waters.
- Trekking or hiking on or above 3000 metres in height.

It is important also to read 'General exclusions' on pages 25 to 28 for other exclusions that may apply.

touch with **your** family and colleagues and assist in locating embassies and consulates around the world.

If **you** have an **overseas** emergency, contact **our** assistance team immediately, 24 hours a day, 7 days a

week on: +61 2 8055 1611 (reverse charges accepted from the **overseas** operator).

If **you** are hospitalised, **you**, or a member of **your** travelling party, must contact **us** as soon as practicable. The team is available 24 hours a day, 7 days a week. If **you** do not contact **us**, then to the extent permissible by law, **we** will not pay for any expenses (including medical) or for any evacuation/repatriation or airfares that have not been approved or arranged by **us**. If **you** are not hospitalised but **you** are being treated as an outpatient and the total cost of any consultation or treatment will exceed \$2,000, **you** should contact **us** as soon as practicable. **We** may not pay for any expenses that have not been approved by **us**.

For all other claims circumstances please follow the claims process outlined in Claims Information.

Extending your cover If you're travelling for longer than

planned

If you're travelling for longer than planned and need to update the return date listed on **your certificate of insurance**, you'll need to contact **your** issuing travel agent or CHI Travel Insurance, as applicable, before **your policy** expires. To allow time for changes to be made, **we** suggest doing so at least 2 business days prior to expiry.

If the change to **your policy** duration can be made (which may attract a payment of an additional premium), we'll issue **you** with a new **certificate of insurance** that will be adjusted with the new dates.

Free automatic extensions

We'll extend your policy free of charge until you are physically able to return home by the quickest and most direct route if your return home has been delayed due to a reason which is covered under your policy.

What conditions apply to trip

extensions?

You cannot extend cover:

- for any **Pre-existing medical condition**(s), except:
- those conditions that are covered as specified under <u>'Pre-existing medical condition(s) we</u> <u>cover'</u> on pages 13 and 14 and you meet any relevant criteria specified in <u>Pre-existing medical</u> <u>condition(s) we cover'</u> or those conditions with approval that are listed on your policy documents with additional premium paid; and

- there have been no changes in those preexisting medical condition(s) after you purchased the original policy;
- for new conditions, you suffered during the term of your original policy;
- where you haven't told us about any circumstances that have caused or may cause a claim under your policy;
- under the Top Plus International and Basic International plans (bought before or after departing Australia) or under the Domestic plan, where at the time of application for the change to your policy duration, the total length of your journey will exceed a combined maximum period of 12 months;
- where at the time of application for the change to your policy duration, you are aged 75 years old or over under the Top Plus International, Basic International and Domestic plans;
- at any time under the Multi-Journey plan.

Words with special meanings

Where you see a word written in bold in this document (unless otherwise specified), it means there's a definition for it here.

Arise, arises, arisen or arising means directly or indirectly arising from, attributable to or in any way connected with.

Carrier(s) means an aircraft, vehicle, train, tram, vessel or any other public transport operated under a license to transport passengers. This definition excludes taxis, rideshare services and carshare services.

Certificate of insurance (COI) (even if they are not in bold) means the most recent certificate **we** issued, which shows certain insurance details relevant to **you**. It may include additional terms, conditions, exclusions, and limitations that amend the standard terms of this PDS.

Chronic means an ongoing, persistent, or long- lasting condition. It may have a pattern of relapse and remission.

Close relative means **you** or **your travelling companion**'s spouse, de facto partner, parent, parent- in-law, children (including adopted or fostered children), brother, sister, brother-in- law, sister-in-law, son-in-law, daughter-in-law, grandchild, grandparent, step-parent, step-son, step-daughter, fiancé or fiancée or guardian.

Concealed storage compartment means a boot, trunk, glove box, enclosed center console, or concealed cargo area of a sedan, station wagon, hatchback, van or motorhome.

Cruise means an ocean voyage on a commercially operated vessel for more than one night.

Dependent or **dependents** means **your** children or grandchildren who are:

- under the age of 25 years at the time you buy your policy;
- who are financially **dependent** on their parents and/or grandparents and not working full time;

- travelling with you for your entire journey; and
- listed on the **Certificate of insurance** as **dependents**.

Dollar or \$ (even if they are not in bold) means Australian **dollar**s.

Duo cover (even if they are not in bold) means cover provided to **you** and **your** nominated **travelling companion** as listed on **your certificate of insurance**. This cover does not include cover for **dependents**.

Epidemic means an unexpected and rapid spread of an infectious disease, virus, illness or condition in a large number of individuals within a population, community or region.

Excess means the amount we'll deduct from any amount payable under your policy for each claimable incident or event. It will show under the section cover limits for each section where an excess applies. Please refer to your certificate of insurance for the excess amount you have agreed upon.

Family cover (even if they are not in bold) means cover provided to **you**, **your** spouse or partner and **your dependents** as listed on **your certificate of insurance**.

Financial collapse means:

- bankruptcy;
- entry into any official or unofficial scheme of arrangement;
- insolvency;
- applying for or filing for insolvency protection;
- liquidation or provisional liquidation;
- a person or company conducting business under statutory protection under the law of any jurisdiction
- winding up;
- presentation of a petition for the compulsory winding up of;
- restructuring or composition with creditors;
- appointment of receiver, manager or administrator;
- stopping the payment of debts; or
- something having a substantially similar effect to any of the above happens in connection with the person or company under the law of any jurisdiction.

For the purpose of this definition, insolvency means a person or company under administration or deemed insolvent (each as defined in the Corporations Act 2001 (Cth)).

Home means your usual place of residence in Australia where you carry out the ordinary course (day to day activities) of your life for the purposes of family, employment, living and financial considerations. Your home must be in Australia for any cover to apply.

Hospital means an established **hospital** registered under any legislation that applies to it, that provides in-patient medical care.

Injure, injured or **injury** means a bodily **injury** caused solely and directly by violent, accidental, visible and external means, which happened at a definite time and place during **your period of insurance** and did not result from any illness, **sickness** or self-harm.

Injury date means the date **you** are **injured** and will be the earlier of when:

- your medical advisor reasonably diagnoses as the most likely date of the injury;
- our medical advisor reasonably diagnoses as the most likely date of the injury;
- you first became aware of the injury or a reasonable person in the circumstances would have been aware of the injury;
- you first received medical treatment for the injury;
- the **injury** is first diagnosed by a **medical advisor**. **Insured person** (even if it is not in bold) means the people listed on **your certificate of insurance**, including **your dependents** if applicable to the plan **you** select.

Journey means:

- For Top Plus International and Basic International plans bought before departing Australia, journey means the travel during your period of insurance that:
 - starts on the departure date listed on your

certificate of insurance when **you** leave **your home** to go directly to the place **you** depart from on **your** travels; and

- ends on the return date listed on your certificate of insurance or when you return home, whichever happens first.
- For Top Plus International and Basic International plans bought after departing Australia, journey means the travel during your period of insurance that:
 - starts 48 hours after the issue date listed on your certificate of insurance; and
 - ends on the return date listed on your certificate of insurance or when you return home, whichever happens first.
- 3. For the Multi-Journey plan:

The maximum period for any one **journey** is 45 days. There is no cover for any incident or event that happens outside of the 45 days.

Each overseas journey:

- starts on the date of departure of each journey during your period of insurance when you leave your home to go directly to the place in Australia you depart from on your travels; and
- ends when you return home from each journey or on the return date listed on your certificate of insurance, whichever happens first.

Each domestic journey:

- starts on the date of departure of each journey during your period of insurance when you leave your home to go directly to your destination in Australia; and
- ends when you return home from each journey or on the return date listed on your certificate of insurance, whichever happens first.

Please note that domestic **journeys** under the Multi-Journey plan will only be covered if **your** destination is more than 200kms from **your home**.

- 4. For the Domestic plan, **journey** means travel during **your period of insurance** that:
 - starts when you leave your home to go directly to your destination in Australia; and
 - ends on the return date listed on your certificate of insurance or when you return home, whichever happens first.

Please note that **your journey** under the Domestic plan will only be covered if **your** destination is more than 200kms from **your home**.

Luggage and personal effects mean any personal items:

- owned by you and that you take with you on your journey; and/or
- you buy on your journey; and
- that are designed to be worn or carried about with **you**.

This includes but is not limited to:

- personal electronics such as mobile phones, tablets, laptops, cameras or video equipment;
- your suitcase and trunks;
- clothing and shoes;
- personal jewellery;
- toiletries and cosmetics; or
- sunglasses.

Examples of items that aren't considered **Luggage and personal effects** under the **policy** include bicycles and bicycle accessories, motor vehicles and accessories, passports or other travel documents, bank cards, cash, banknotes, currency notes, travellers' cheques, items of a perishable nature (meaning items that can decay or rot and won't last for long), negotiable instruments (such as gift cards, precious metals or securities), watercraft of any type (other than surfboards), furniture, furnishings, household appliances, hired items or any business sample or items that **you** intend to trade.

Check out '<u>Section 8: Luggage and personal effects'</u> on pages 43 to 45 and '<u>Section 9: Delayed luggage and</u> <u>personal effects'</u> on page 46 for more information on terms and conditions, limitations and exclusions that apply to **your** luggage and personal effects. **Medical advisor** means a qualified doctor of medicine or dentist (other than you, **your** travelling companion or **your** relative) that is:

- registered to provide the relevant service in the place where you receive the services; and
- acting within the scope of their registration and under relevant laws.

Medical aids mean:

- Communication aids e.g., hearing aids;
- Mobility aids e.g., walkers, crutches and wheelchairs;
- Prosthetic limbs, medical-grade footwear and orthotics;
- Sight aids e.g., prescription glasses;
- Dental aids e.g., dentures and dental prostheses.

Mental illness means any **sickness**, disorder or condition recognised or provided for in the latest edition of the Diagnostic and Statistical Manual of Mental Disorders.

Moped or Scooter means any two-wheeled or threewheeled motor vehicle with an engine capacity of up to and including 50cc.

Motorcycle means any two-wheeled or three-wheeled motor vehicle with an engine capacity greater than 50cc.

Natural disaster means an extraordinary natural phenomenon such as floods, earthquakes, tsunamis, landslides, volcanic eruptions, atypical cyclonic storms, falling objects from space and aerolites, and in general any extraordinary atmospheric, meteorological, seismic or geological phenomenon. It does not mean an **epidemic** or **pandemic**.

Open water voyages means being on a vessel more than 12 nautical miles off any landmass, other than on a **cruise** ship where **you** have selected the Cruise Pack and it is noted on **your certificate of insurance**.

Overseas means in any country other than Australia.

Pandemic means an **epidemic** (an unexpected and rapid spread of an infectious disease, virus, illness or condition in a large number of individuals within a population, community or region) that has spread rapidly across countries and/or continents.

Period of insurance is the period **you** are covered for as defined under the heading <u>'When does **your** cover</u> <u>start?</u>' on pages 10 to 11.

Policy (even if they are not in bold) means this PDS, the **certificate of insurance** and any other change to the

policy terms that are confirmed by **us** in writing (such as an endorsement or a Supplementary PDS).

Pre-existing medical condition means a disease, illness, medical or dental condition or physical defect as defined under the heading <u>'What's a **Pre-existing medical**</u> <u>condition?</u>' on page 13.

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

Reasonable means:

- for medical or other expenses, the standard level of care given in the country you are in; or
- for other covered expenses, the equivalent level you have booked for the rest of your journey. This definition will also apply where we use the word "reasonably".

Recreational all-terrain vehicle means a small, open motor vehicle having three or more wheels fitted with large tires designed chiefly for recreational use over roadless terrain. They are sometimes referred to as quadbikes, trikes or buggies.

Registered psychiatrist means a psychiatrist (other than **you**, **your travelling companion** or **your** relative) registered with and accredited by the Australian Health Practitioner Regulation Agency (AHPRA) or, if **you** are **overseas**, an equivalent regulatory body which governs psychiatrists in the country in which **you** are seeking medical assistance.

Relevant time means for:

- a. Single-Trip plans (Top Plus International, Basic International and Domestic plans): the time of issue of the **policy**.
- b. The Multi-Journey plan: the first time at which any part of the relevant **journey** is paid for or the

time at which the **policy** is issued, whichever occurs last.

Rental vehicle means a sedan, hatchback or station wagon, four-wheel drive, or minibus/ people mover, or a campervan/motorhome that does not exceed 4.5 tonnes, rented from a licensed motor vehicle rental company for the carriage of passengers and does not include any vehicle designed for the carriage of goods. It doesn't include car-sharing services (such as Car Next Door, Citihop, Go Get or Zipcar), motorcycles, mopeds or scooters, caravans, trailers, trucks or any watercraft.

Sick or **sickness** means a medical condition, not being an **injury**, which first occurred or first manifested during **your period of insurance**.

For this definition, a **sickness** will first manifest itself on the earlier of the date when:

- your medical advisor reasonably diagnoses as the most likely date the sickness or symptoms of the sickness, of which you would reasonably have been aware of, first occurred or manifested, whichever is the earlier;
- our medical advisor reasonably diagnoses as the most likely date the sickness or symptoms of the sickness, of which you would reasonably have been aware of, first occurred or manifested, whichever is earlier;
- you first became aware of the sickness or symptoms of the sickness, whichever is the earlier;
- a reasonable person in the circumstances would have been aware of the sickness or symptoms of the sickness, whichever is the earlier;
- the sickness or symptoms of the sickness were first diagnosed by a medical advisor, whichever is the earlier.

Single cover (even if they are not in bold) means cover provided to you and your dependents as listed on your certificate of insurance.

Sub-limit means the maximum dollar amount we'll pay

to cover a specific item, event or loss which we've described under a broader benefit or section cover limit.

Terrorism means any act:

- which may or may not involve the use or threat of force or violence; and
- where the purpose of the act is to promote a political, religious, ideological goal, or to intimidate or influence a government (whether lawfully elected or not), or any section of the public.

Terrorism will also include any act that is verified or recognised by the (relevant) government as an act of **terrorism** or defined under any relevant legislation as an act of **terrorism**.

Travelling companion means a person with whom **you** had planned to travel with for at least 50% of **your journey** before **your policy** was issued.

Unattended means but is not limited to, when an item is not on your person at the time of the loss, theft or damage, or not under your control at the time of the loss, theft or damage, left in a position where it can be taken or damaged without your knowledge including on the beach or beside the pool while you swim, in a public place or leaving it a distance or where you are unable to prevent it from being unlawfully taken or damaged. Unattended also means leaving an item behind, forgetting the item, walking away from it, or leaving it in a public place. **We**, **our**, **us** (even if they are not in bold) means Tokio Marine & Nichido Fire Insurance Co.

Winter sports means non-competitive:

- on piste recreational skiing and snowboarding;
- bigfoot skiing and snowboarding (only on a guided tour that is available to the general public and provided by a licensed tour operator);
- cat skiing and snowboarding (only on a guided tour that is available to the general public and provided by a licensed tour operator);
- cross-country skiing and snowboarding (along a designated cross-country ski route only);
- glacier skiing and snowboarding (only on a guided tour that is available to the general public and provided by a licensed tour operator;
- heli-skiing and snowboarding (only on a guided tour that is available to the general public and provided by a licensed tour operator);
- ice hockey;
- ice skating;
- lugeing on ice (provided by a licensed tour operator and available to the general public only);
- on-piste mono skiing and snowboarding;
- off-piste skiing and snowboarding with a professional snow sports instructor/guide
- snowmobiling; and
- tobogganing.

You, your, yourself and insured person (even if they are not in bold) means the people listed on your certificate of insurance, including your dependents.

General exclusions

Exclusions that apply to **your** whole **policy** are also known as general exclusions. This is an insurance term for exclusions that will be applied across all sections and benefits of the **policy**, regardless of when the **policy** was purchased. In short, these are things **we** can't cover under any circumstances.

Please note that these exclusions are in addition to any exclusions listed under Sections 1 to 21 and under the optional covers (Cruise pack and **Motorcycle**, **moped** and **scooter** cover pack).

We won't pay any claims, costs or losses under any section of the **policy** if **your** claim **arises** from or is related to:

General

- known events, including any event or circumstance that you were aware, or should have been reasonably aware, that could result in a claim. We consider reasonable awareness to include events that are the subject of any government warning or mass media report.
- any government or public health authority mandatory quarantine or isolation order imposed on you related to border, region or territory travel in response to COVID-19.
- an epidemic, pandemic or an outbreak of infectious disease, virus, illness or condition, including any derivative or mutation of such disease, virus, illness or condition, or the threat or perceived threat of any such epidemic, pandemic or outbreak. This exclusion also applies to any resurgence or subsequent waves of the disease, virus, illness or condition, unless you have purchased a policy with COVID-19 benefits as outlined in Sections 18-21. You are unable to claim for any COVID-19 related event under any other section of the policy.
- Any fear or threat of COVID-19, SARS-CoV-2, or any mutation or variation of SARS-CoV-2 of the COVID-19 disease.
- A diagnosis of COVID-19 unless provided by your medical advisor or our medical advisor.
- any person, company or organisation (including but not limited to any airline, or other carriers, accommodation provider, car rental agency, travel agency including online

travel agencies, online travel and leisure retailer, tour or cruise operator, travel wholesaler, booking agent or other providers of facilities or travel or tourism-related services), refusing, failing or not having ability to provide services, facilities or accommodation, due to their own **financial collapse** or the **financial collapse** of any other person, company or organisation providing facilities or tourism-related services.

- 7. **you** not taking reasonable action to avoid, minimise or reduce any claim or loss.
- 8. **you** not providing all assistance, information and cooperation reasonably requested by **us** or any government or relevant authorities, including but not limited to, undergoing an alcohol or drug test and releasing the result to **us**, or cooperating with any reasonable investigation related to **your** claim.
- 9. you not acting in a responsible and careful manner to protect yourself (unless it is to save a person's life), your Luggage and personal effects and cash. This includes, but is not limited to, you participating in dangerous or reckless activities, or putting yourself in unsafe circumstances.
- 10. you or your travelling companion breaking any laws in the country that you are in. This does not apply to you if you are not the perpetrator of such act and you can reasonably demonstrate that you did not know, instigate or condone of any such act.
- any errors or omissions in any booking arrangements. This includes but is not limited to any bookings made by you, your travel agent, your booking provider or any other person acting on your behalf.
- 12. any failure to get the relevant visa, work permit, passport or travel documents.
- you or anyone else being denied entry to a country, or failing to satisfy visa requirements to stay, as determined at any time by that country.
- 14. any natural disaster that happened before you purchased your policy. This includes if it was publicly known that the natural disaster was about to happen right before you purchased your policy.
- 15. any act of war, regardless of whether it was

declared or not, or from any rebellion, revolution, insurrection, civil war or the taking of power by the military.

- 16. **you** not following advice in the mass media or any government or other official body's warning against travel to a particular country or parts of a country or against remaining in a particular country or parts of a country; or
 - where a travel advisory risk rating of 'Do Not Travel' (or equivalent if this term is replaced) was issued by the Australian Department of Foreign Affairs and Trade before the start date of **your journey**; or
 - of a strike, riot, bad weather, civil protest or contagious disease (including an epidemic or pandemic);

and **you** did not take appropriate action to avoid or minimise any potential claim under **your policy** (including the delay of travel to the country or part of the country referred to in the warning).

If **you** are in a country or a part of a country at the time it's given a travel advisory risk rating of 'Do Not Travel' or equivalent by Australian government; **you** should return to Australia as soon as possible. If **you** need emergency assistance, please contact +61 2 8055 1611.

Check out <u>www.smartraveller.gov.au</u> for more information.

- any events related to a prohibition, regulation, intervention, quarantine, detention, confiscation, border closure or other directives, given, declared or carried out by any government or relevant authorities.
- a nuclear reaction or contamination from nuclear weapons or radioactivity.
- biological and/or chemical materials, substances or compounds used to harm or destroy human lives and/or to create fear.
- 20. any consequential loss of any kind, including but not limited to, loss of enjoyment, disappointment, non-financial loss (except for air travel points

cover under Section 4: Cancellation or amendment expenses) or any financial loss not mentioned in this **policy**. In other words, **we** won't pay a claim just because the weather was terrible for part of, or even **your** entire **journey**.

- 21. any claims, costs or losses that are recoverable from any other source.
- 22. any insured person shown on the **certificate of insurance** where Australia is not their **home**.
- 23. a domestic **journey**, under any applicable plan, where **your** destination is not more than 200kms from **your home**
- 24. Any losses or expenses that are from, related to or directly or indirectly caused by any violation of, or exposure of the Insured or Underwriters to, any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United Kingdom; United States of America; or Australia.

Health

- 25. your Pre-existing medical condition(s), except as provided under the section 'Pre-existing medical condition(s) we cover' on pages 13 and 14 or ones with approval that are listed on your policy documents with any applicable additional premium paid.
- 26. **your** pregnancy or the pregnancy of any other person after the end of the 25th week for single pregnancies.
- 27. your pregnancy other than any single noncomplicated pregnancy, unless you have completed a medical assessment, we have agreed to provide cover, you have paid any additional premium (as required) and it is noted on your certificate of insurance.
- 28. anyone else's pregnancy other than any single noncomplicated pregnancy.
- 29. any pregnancy complications suffered by **you** or any other person unless:
 - the pregnancy complications developed unexpectedly after the relevant time; and
 - it's a single pregnancy (up to and including 25 weeks); and
 - there have been no complications of this

pregnancy or any previous high-risk pregnancy; and

- the conception was not medically assisted e.g. using assisted fertility treatment including hormone therapies or in vitro fertilisation (IVF).
- 30. childbirth at any stage of pregnancy. This will not apply to claims under Section 4 related to a covered pregnancy prior to commencing **your journey**.
- 31. the health or care of a baby not listed on **your** certificate of insurance.
- 32. **you** declining to return **home** when **our** medical advisor has confirmed that **you** can be evacuated or repatriated safely back to Australia.
- you travelling or acting against the advice of a medical advisor.
- 34. an addiction to alcohol or substances, including but not limited to, facilities where **you** receive treatment rehabilitation for drug and/or alcohol addiction, or are using as a place for nursing, convalescence or rehabilitation.
- 35. the cost of medication in use at the time the journey began or the cost for maintaining a course of treatment you were on before your journey except as specified under Section 8: Luggage and personal effects.
- 36. any claim **arising** from:
- your suicide or attempted suicide; or
- injuring yourself deliberately or putting yourself in danger (unless you were trying to save a human life).
- 37. a sexually transmitted disease unless we agreed to provide cover and you have paid any applicable additional premium, and it's listed on your policy documents.
- 38. **you** being under the influence of alcohol, where:
- a) **you** are recorded as having a blood alcohol concentration (BAC) greater than the legal limit whilst operating a motor vehicle in the country **you** are in; or
- b) at all other times having a BAC of 0.15%, where an evidentiary blood test is not available or

undertaken, **we** may take into account other factors such as:

- (i) an expert's report, such as that of a medical practitioner or forensic expert;
- (ii) the witness report of a third party;
- (iii) your own admission; or
- (iv) the description of events you described to us or you had described to any treating medical professional (such as a paramedic, nurse, doctor) or attending emergency service member as documented in their records.
- drug or substance abuse (whether over the counter, prescription or otherwise); or consumption or ingestion of any drug or substance except those that are prescribed to you by a medical advisor and taken as per their instructions
- 40. medical costs incurred by **you** when, despite **our** advice otherwise following **your** call to **us**, **you** received private **hospital** or medical treatment where public funded services or care or treatment is available under any Reciprocal Health Agreement between the government of Australia and the **overseas** government. **We** may discuss with **you** to allow **you** to seek a treatment by an **overseas** private **hospital** when **we** reasonably consider that it is necessary considering all information available to **us** at the time.
- you travelling with the intention of receiving medical, dental or cosmetic treatment during your journey.
- 42. any elective, cosmetic or non-emergency procedures, surgery or treatment, including any complications caused by them.
- any event, injury or sickness where providing a payment, benefit or cover would result in us contravening:
 - the Health Insurance Act 1973 (Cth), the Private Health Insurance Act 2007 (Cth) or the National Health Act 1953 (Cth), any succeeding legislation to those Acts; or
 - any other applicable legislation (whether in Australia or not) where we don't have the necessary licenses or authority to provide

such cover or when **we** are prohibited from paying a benefit.

Leisure and other activities

- 44. **you** riding on a recreational all-terrain vehicle, as a driver or passenger **overseas** unless all the following apply:
 - you are under the direct supervision of an operator licensed in the country you are in;
 - you obey all relevant safety requirements; and
 - you are wearing a helmet.
- 45. **you** scuba diving using an artificial breathing apparatus unless **you** hold an open water diving licence recognised in Australia or **you** were diving under licensed instruction, and **you** are diving at no greater depth than 30 metres.
- 46. **you** hunting, engaging in **open water voyages**, playing polo, mountaineering or rock-climbing using ropes or climbing equipment (other than for hiking), parachuting (including BASE jumping), hang gliding.
- 47. **you** travelling by air or sea, unless **you** are a passenger with a paid ticket on a:
 - scheduled transport service; or
 - licensed charter flight; or
 - hot air balloon with a commercial operator licensed in the country you are in; or

- licensed sightseeing air tour from one location back to that location; or
- licensed charter vessel where the crew are included, operating within coastal waters.
- 48. **you** taking part in, or training for, a professional sport of any kind.
- 49. **you** taking part in a competition where there are financial rewards or cash prizes.
- 50. **you** taking part in and/or competing in any race, or other judged, scored or timed activity (other than on foot and no greater than 43kms).
- 51. Contact sports, including but not limited to rugby and martial arts.
- 52. trekking or hiking on or above 3,000 metres in height.
- 53. i. ski/snowboard racing (including training);
 ii. ski/snowboard acrobatics;
 iii. freestyle skiing/snowboarding;
 iv. ski/snowboard fun parks;
 v. ski/ snowboard jumping or stunting;
 vi. off-piste skiing/ snowboarding without a professional snow sports instructor/guide;
 vii. cross-country skiing outside of a designated cross-country ski route;
 viii. bobsleighing;
 ix. parascending (over snow);or
 x. any other winter or snow sport related activity other than winter sports.

Policy wording Section benefits What we cover - your health

This part explains what's covered, limits and conditions applying to that cover, what **you** need to do, and what **we** will and won't pay.

There is no cover for Covid-19 under Sections 1-17 of the **policy**. This **policy** provides cover for certain circumstances relating to COVID-19 up to the specified benefit limits as set out in Section 18, Section 19, Section 20 and Section 21.

Section 1: Overseas emergency medical and hospital expenses

\sim /				
Top Plus International	Basic International	Multi-Journey	Domestic	
Unlimited*	Unlimited*	Unlimited*	No cover	
\$1,000 per insured person	\$500 per insured person	\$1,000 per insured person	No cover	
Yes	Yes	Yes	No cover	
	Unlimited* \$1,000 per insured person	Unlimited* Unlimited* \$1,000 per insured person \$500 per insured person	Unlimited* Unlimited* Unlimited* \$1,000 per insured person \$500 per insured person \$1,000 per insured person	

*\$unlimited means that generally there is no cap on the maximum **dollar** amount which may be paid out for this benefit, subject to the specific terms and conditions, **sub-limits** and exclusions that apply to this benefit. This benefit covers **reasonable overseas** medical and **hospital** costs as a result of an **injury** or **sickness** occurring which first shows itself during **your journey** dates as outlined on the **certificate of insurance**.

There's cover under this section if you suffer an unexpected injury, sickness or dental pain overseas during your journey.

We'll pay up to the section cover limit of the plan you have selected for the **reasonable** costs incurred overseas on your journey for your emergency medical treatment, advice, attention, medication and assistance on the advice of a **medical advisor**.

We will also confirm any necessary written guarantees to medical providers for payment of reasonable expenses for medical treatment, advice, attention, medication and assistance.

Sub-limits applying to cover:

We'll also pay up to the **sub-limit** specified under **your** plan for each insured person listed on the **certificate of insurance** for the reimbursement of **reasonable** costs for emergency dental treatment received **overseas** for the relief of sudden and acute pain to healthy and natural teeth. This means that the emergency dental treatment must be for an original tooth (or one with a filling) and/or supporting tissues (**your** gums).

Conditions and limitations applying to cover:

- we'll only pay for overseas treatment received and/or hospital accommodation for a maximum of 12 months from the date the sickness first manifested itself or from the injury date.
- b. the medical, dental or hospital expenses must have been incurred due to a claimable event under the policy, and this is confirmed on the written advice of a medical advisor.
- c. if you don't agree to return home when we reasonably decide that you should based on the information that is available to us at the time, then we'll pay you the amount that 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.

- at our discretion we will decide on which action to take subject to medical constraints as agreed by our medical advisor. This may include returning you home for medical treatment.
- e. if we've paid for costs to return you home, but you didn't have a prepaid return flight home, we're entitled to recover that cost from you at the fare class in which you departed Australia.

What you need to do:

- a. contact **our** emergency assistance team as soon as reasonably possible (+612 8055 1611), or have someone else contact **us** on **your** behalf, if **you**:
 - i. are admitted to hospital;
 - ii. need surgery; or
 - iii. need outpatient treatment likely to cost more than \$2,000 AUD.
- b. if **you** are admitted to **hospital**, provide a copy of the discharge summary with **your** claim.
- c. keep receipts for any costs and provide them with **your** claim.
- d. make every effort to keep **your** medical or **hospital** expenses to a minimum.
- e. cooperate with **our** request for all relevant medical records or reports, including information about previous medical conditions and courses of treatment, to determine whether **your** claim relates to a **Pre-existing medical condition**.
- f. if a treatment is under public funded services or care or a treatment under a Reciprocal Health Agreement between Australia and another country is available, **you** will need to seek such a treatment first where reasonably practicable. Reciprocal Health Agreements

are currently in place with Finland, Italy, Malta, the Netherlands, Norway, Sweden, the Republic of Ireland, Belgium, Slovenia, United Kingdom and New Zealand.

We won't pay any claims, costs or losses under this section arising from or related to:

- a. you not meeting to our reasonable satisfaction, all the requirements that apply to you under 'What you need to do' unless we advise in writing that you don't need to.
- b. your Pre-existing medical conditions, except ones covered as specified under <u>'Pre-existing</u> <u>medical condition(s) we cover</u>' on pages 13 and 14 in the section <u>Pre-existing medical</u> <u>condition(s)</u> on pages 12 to 17 or Pre-existing medical conditions which we have assessed and agreed to cover and that are listed on your policy documents with additional premium paid.
- any costs without proof of the amount, and if
 we are reimbursing you directly, proof that
 you have paid it.
- d. you not promptly following our reasonable medical advice we have obtained from our medical advisors based on the information available to us at the time (and we also won't be responsible for subsequent medical, hospital or evacuation expenses).
- e. medical treatment or ambulance transportation which is provided in Australia.
- f. private medical treatment if the same treatment is available under public funded services or care or a treatment under a Reciprocal Health Agreement between Australia and another country. Reciprocal Health Agreements are currently in place with Finland, Italy, Malta, the Netherlands, Norway, Sweden, the Republic of Ireland, Belgium, Slovenia, United Kingdom and New Zealand.
- g. you travelling on a cruise overseas or in
 Australian waters, if you didn't select the Cruise
 pack at the time you took out your policy or



before **your** departure date, and pay the appropriate additional premium.

h. you riding a motorcycle, moped or scooter as a driver or passenger, unless you are overseas you selected the 'Motorcycle, moped and scooter pack' at the time you took out your policy or before your departure date, and paid the appropriate additional premium. You must also comply with all the other conditions under the 'Motorcycle, moped and scooter pack' on page 64 to 65 for cover to apply.

This exclusion will not apply where **you** are a passenger on a **motorcycle**, **moped** or **scooter overseas** where:

- i. the **motorcycle**, **moped** or **scooter** is a recognised form of public transport;
- ii. a fare is charged for your carriage; and
- iii. **you** are wearing a helmet.
- the continuation or follow up of medical treatment (including medication and ongoing immunisations) that started before your journey.
- j. routine medical or prenatal visits.
- additional treatment after 2 weeks of treatment by a chiropractor, physiotherapist

or dentist unless approved by us.

- I. dental treatment:
 - i. for normal dental wear and tear;
 - ii. that is for routine maintenance or hygiene;
 - iii. that is a continuation or follow-up of dental treatment that started before your journey;
 - iv. that involves the use of precious metals or is for cosmetic dentistry;
 - v. for damage to dentures, dental prostheses, crowns, bridges, braces or implants;
 - vi. that is not for an original tooth (or one with a filling) and/or supporting tissues (your gums);
 - vii. caused by or related to the deterioration and/or decay of teeth or associated tissue.
 This includes if **you** need a crown for **your** damaged or decayed teeth;
 - viii. that is follow-up treatment to restore the tooth if required; orix. received in Australia.
- m. all 'General exclusions' on pages 25 to 28 apply to this section as well.



No

Section 2: Emergency assistance

No

	Top Plus International	Basic International	Multi-Journey	Domestic
Section cover limit	Unlimited*	Unlimited*	Unlimited*	\$10,000
Sub-limits: Funeral or	\$20,000 or 30,000 EUR	\$20,000 or 30,000 EUR	\$20,000 per	No cover
cremation expenses;	per insured person if you	per insured person if you	insured person	
or expenses for the	hold a valid Schengen	hold a valid Schengen		
repatriation of mortal	Visa and die in a	Visa and die in a		
remains to Australia	Schengen member state	Schengen member state		

*\$unlimited means that generally there is no cap on the maximum **dollar** amount which may be paid out for this benefit, subject to the specific terms and conditions, **sub-limits** and exclusions that apply to this benefit. This benefit covers **reasonable overseas** medical and **hospital** costs as a result of an **injury** or **sickness** occurring which first shows itself during **your journey** dates as outlined on the **certificate of insurance**.

No

There's cover under this section for emergency medical assistance if **you** suffer an unexpected **injury** or **sickness** during **your journey**.

For the Domestic plan:

Excess

We'll pay up to the section cover limit of the plan you have selected for the reasonable costs following your unexpected injury or sickness during your journey:

- a. for your transport to the nearest appropriate medical facility (but not ambulances fees of any kind). We determine, consulting with our medical advisors where necessary, whether your transport is medically necessary.
- to bring dependents listed on your
 certificate of insurance back home or to an
 onward destination if they are left
 unsupervised.

Please note that **we** will not pay for the cost of any search and rescue charges.

For Top Plus International, Basic International and Multi-Journey plans:

We'll pay up to the section cover limit the following reasonable costs and arrangements if you suffer an unexpected injury or sickness overseas during your journey:

- a. for your medical transfer or evacuation;
- b. to bring **dependents** listed on **your certificate of insurance** back **home** or to an onward

destination if they're left unsupervised;

No

- for access to a medical advisor for emergency medical treatment overseas;
- for any messages which need to be passed on to your family or employer in the event of an emergency;
- e. for the provision of any written guarantees for payment of reasonable expenses for emergency medical transfer or evacuation overseas;
- f. your return home (for treatment or because the risk of continuing your journey is too high).

We determine, consulting with our medical advisors where necessary, whether it is medically necessary for you to be moved from one overseas hospital to another, or returned home.

Sub-limits applying to cover:

- a. We will pay up to:
 - \$20,000 in total for each insured person listed on the certificate of insurance if they die overseas; or
 - ii. 30,000 EUR in total for each insured person listed on the certificate of insurance if they die overseas and all the following criteria are met:
 - you purchase the Top Plus International or the Basic International Plan; and

- you list all countries you will visit using a Schengen Visa when you apply for the insurance; and
- each person holds a valid Schengen Visa; and
- an insured dies in a Schengen member state during their journey.

Where all of the above is met **we** will pay for the **reasonable** cost of either:

- a funeral or cremation; or
- for bringing your remains back to your home.

Conditions and limitations applying to all cover:

- a. if you don't agree to return home at the point when we reasonably decide that you should, then we'll pay you the amount that we determine would have covered 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.
- b. if we've paid for costs to bring you home, but
 you didn't have a prepaid return flight home,
 we're entitled to recover that cost from you at
 the same fare class as your departure fare.

What you need to do:

- a. contact **our** emergency assistance team as soon as reasonably possible (+61 2 8055 1611), or have someone else contact **us** on **your** behalf, if **you**:
 - i. are admitted to **hospital**;
 - ii. need surgery; or
 - iii. need out patient treatment likely to cost more than \$2,000 AUD.
- provide a death certificate with your claim, as evidence of the death.
- c. keep receipts for any costs and provide them with **your** claim.
- d. cooperate with our request for all relevant

medical records or reports, including information about previous medical conditions and courses of treatment, to determine whether **your** claim relates to a **Pre-existing medical condition**.

We won't pay any claims, costs or losses under this section arising from or related to:

- a. you not meeting to our reasonable satisfaction, all the requirements that apply to you under 'What you need to do'
- b. your Pre-existing medical conditions, except ones covered as specified under '<u>Pre-existing</u> <u>medical condition(s) we cover</u>' in the section <u>'Pre-existing medical condition(s)</u>' on pages 12 to 17 or Pre-existing medical conditions with approval that are listed on your policy documents with additional premium paid.
- c. you travelling on a cruise overseas or in Australian waters, if you didn't select the Cruise pack at the time you took out your policy or before your departure date and pay the appropriate additional premium.
- d. you riding a motorcycle, moped or scooter overseas as a driver or passenger if you didn't select the 'Motorcycle, moped and scooter pack' at the time you took out your policy or before your departure date, and pay the appropriate additional premium. You must also comply with all the other conditions under <u>'Motorcycle, moped and scooter pack</u>' on page 64 to 65 for cover to apply.
- e. you not promptly following our medical advice which is reasonable considering all information available to us at the time (and we also won't be responsible for subsequent medical, hospital or evacuation expenses).
- f. medical evacuation where we have reasonably decided that it is not necessary to do so with consultation with our medical advisors.
- g. medical evacuation from Australia to an **overseas** country.



- h. returning the deceased person to a country other than Australia.
- i. medical treatment or ambulance transportation which is provided in Australia.
- j. any search and rescue charges.
- k. all 'General exclusions' on pages 25 to 28 apply to this section as well.

Section 3: Hospital cash allowance

	Top Plus International	Basic International	Multi-Journey	Domestic
Section cover limit	\$6,000	\$3,000	\$6,000	No cover
Sub-limits:	\$50 per day after 48	\$50 per day after 48	\$50 per day after 48	No cover
	continuous hours	continuous hours	continuous hours	
Excess	No	No	No	No cover

This section cover limit applies to each insured person on **Duo cover** or is doubled for Family cover.

There's cover under this section if **you** are admitted to a **hospital overseas** for more than 48 continuous hours **overseas** due to an **injury** or **sickness**.

We'll pay up to the section cover limit of the plan you have selected, \$50 for each day you are in hospital overseas.

What you need to do:

You need to provide a copy of the discharge

summary with your claim.

We won't pay any claims, costs or losses under this section arising from or related to:

- a. the first 48 continuous hours, **you** are admitted to **hospital**.
- b. your hospitalisation if you cannot claim for overseas medical expenses in Section 1: Overseas emergency medical and hospital expenses.
- c. all 'General exclusions' on pages 25 to 28 apply to this section as well.


What we cover - your journey

This part explains what's covered, limits and conditions applying to that cover, what **you** need to do, and what **we** will and won't pay.

Section 4: Cancellation or amendment expenses

	Top Plus International	Basic International	Multi-Journey	Domestic
Section cover limit	The cover chosen and	The cover chosen and	The cover chosen and	The cover chosen and
	listed on your	listed on your	listed on your	listed on your
	certificate of	certificate of	certificate of	certificate of
	insurance	insurance	insurance	insurance
Sub-limits: For	25% of your non-	25% of your non-	25% of your non-	25% of your non-
events relating to	refundable claim	refundable claim	refundable claim	refundable claim
a Pre-existing	expenses up to	expenses up to	expenses up to	expenses up to
medical condition	a maximum of	a maximum of	a maximum of	a maximum of
of a close relative not travelling	\$2,000	\$2,000	\$2,000	\$2,000
with you on your				
journey.				
Sub-limits: For	\$1,500	\$1,500	\$1,500	\$1,500
travel agent's				
cancellation fees				
Excess	Yes	Yes	Yes	Yes

For the Top Plus International plan, the Basic International plan and the Domestic plan, this section cover limit is the maximum amount **we** will pay for all claims combined for a **Single cover**, **Duo cover** and **Family cover**.

For the Multi-Journey plan, this section cover limit and **sub-limit**s are reinstated on the completion of each **journey**. This section cover limit is the maximum amount **we** will pay for all claims combined for a **Single cover** and **Family cover** per **journey**.

For all plans, this section's **sub-limits** apply to each insured person on **Duo cover** or is doubled for **Family cover**.

There's cover under this section if, due to unforeseeable circumstances outside your control at the relevant time and covered under the policy, you need to:

a. cancel or change **your journey** before the start of **your journey**; or

- make changes to your journey arrangements during your journey; or
- c. end your journey early to return home.

We'll pay up to the section cover limit or sub-limits of the plan you have selected for:

- a. your cancellation costs for travel and accommodation arrangements that you have paid in advance and can't recover in any other way (where you can't rearrange it before leaving home); or
- b. your reasonable costs to rearrange your journey following the commencement of your journey;
- c. the loss of frequent flyer or similar air travel points that **you** used to buy an airline ticket following the cancellation of that airline ticket if **you** can't recover the lost points from any other source and before **you** submit a claim **you** must first request the airline or points provider refund **your** points. **We** calculate the amount **we** pay **you** as follows:

- 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; multiplied by:
- ii. the total value of points lost, divided by the total number of points used to get the ticket.

Sub-limits applying to cover:

- a. except where the reason you need to cancel or amend your journey is due to a sickness or injury resulting in the hospitalisation or death of a close relative, the most we will pay under this section is 25% of your non-refundable claim expenses up to a maximum of \$2,000 for Single cover, \$2,000 per insured person on Duo cover and \$4,000 for Family cover.
- b. where the reason you need to cancel or amend your journey is due to a sickness or injury resulting in the hospitalisation or death of a close relative and you can reasonably demonstrate that the hospitalisation or death is not related to a Pre-existing medical condition, then we will no longer apply the sub-limit and we will pay your reasonable cancellation or amendment expenses up to the section cover limit.
- we will pay up to \$1,500 for Single cover, up to \$1,500 per insured person on Duo cover and up to \$3,000 for Family cover for any travel agent's cancellation fees.

Conditions and limitations applying to cover:

- any refunds or credits **you** are eligible to receive will be deducted from the amount payable on **you** claim.
- b. if you submit a claim under this section following cancellation by you of your entire journey, cover under this policy ends. You'll need to buy another policy for any subsequent trip. Cover will remain in place for anyone listed on the certificate of insurance who isn't making a claim to cancel their journey, but the cover limit will be reduced by the amount

payable on the cancellation claim.

- c. wherever claims are made by you under Section 4: Cancellation or amendment expenses and Section 5: Additional expenses for cancelled services/facilities or alternative arrangements for the same or similar services/facilities, we will pay for the higher of the two amounts, not both. For example, if the cost to cancel part of your journey due to your home being declared uninhabitable (due to a fire, explosion or natural disaster) is \$3,000 and the cost to amend or rearrange your booking is \$2,000, then the most we'll pay is \$3,000.
- d. if we've paid to bring you back to Australia under Section 5: Additional expenses, we won't reimburse you for your original unused prepaid flight back to Australia.

What you need to do:

- a. provide with your claim, written confirmation of the event that caused you to change or cancel your journey.
- request credits and refunds from any service providers and carriers and provide written confirmation of whether you are entitled to any credits or refunds. If you are unable to provide any of this information, please provide a reason why.
- keep receipts for any costs paid for your
 original arrangements and provide them with
 your claim.
- d. keep receipts for any additional costs incurred and provide them with **your** claim.
- e. provide with **your** claim a copy of **your** original travel itinerary and **your** new travel itinerary, if applicable.

We won't pay any claims, costs or losses under this section arising from or related to:

a. you not meeting to our reasonable satisfaction, all the requirements that apply to you under 'What you need to do' unless we advise in

writing that you don't need to.

- any reason you were aware of or should have been reasonably aware of at the relevant time that may cause your journey to be cancelled, abandoned or shortened.
- c. any Pre-existing medical conditions, except ones covered as specified under <u>'Pre-existing</u> <u>medical condition(s) we cover</u>' in the section <u>'Pre-existing medical condition(s)</u>' on pages 12 to 17 or Pre-existing medical conditions that we have assessed, agreed to cover and that are listed on your policy documents with any applicable additional premium paid.
- d. the death or hospitalisation of your close relative, due to an illness or injury, if it arises from a Pre-existing medical condition except as specified under 'Sub-limits applying to cover'.
- e. you or your travelling companion changing plans or deciding not to continue with the intended journey where there are no unforeseeable circumstances outside your control that prevent the journey as intended.
- f. the failure of any person, company or organisation (including but not limited to any airline, or other carriers, hotel, car rental agency, travel agency including online travel agencies, online travel and leisure retailer, tour or cruise operator, travel wholesaler, booking agent or other providers of travel or tourismrelated services, facilities or accommodation) to pass on monies to operators or to deliver promised services.
- g. cancellations, delays or rescheduling by a bus
 line, airline, shipping line or rail authority
 other than when caused by strikes.
- h. the mechanical breakdown of any means of transport.
- i. you travelling on a cruise overseas or in Australian waters, if you didn't select the Cruise pack at the time you took out your policy or before your departure date, and pay the appropriate additional premium.

- a tour operator or wholesaler being unable to complete arrangements for any tour because there were not enough people to go on the tour.
- any business, financial or contractual obligations. This exclusion does not apply to claims where you or your travelling companion are made involuntarily redundant from employment in Australia provided you or they were not aware that the redundancy was to occur at the relevant time.
- I. any act, threat, or perceived threat of terrorism.
- m. any cancellation or amendment expenses
 you can claim from anyone else.
- n. any amount of compensation (including credits and refunds) you receive or are entitled to receive from the carrier whose transport was cancelled, delayed or rescheduled (we'll deduct this from your claim).
- any costs which you have paid on behalf of any other person unless that person is also an insured person listed on your certificate of insurance.
- a mental illness (including depression, anxiety, stress, mental or nervous conditions) suffered by you, your close relative or another person unless:
 - the mental illness has first occurred or first manifested as a new condition during your period of insurance (i.e., not a Pre-existing medical condition);
 - a mental illness diagnosis has been made by a registered psychiatrist;
 - iii. the mental illness is a Pre-existing medical condition that has been approved by us, the additional premium if required was paid, and the condition is listed on your certificate of insurance; and
 - iv. the treating registered psychiatrist certifies that the mental illness prevents you from starting or finishing your journey.

- a return flight home if you didn't have a prepaid return flight home when the claimable event occurred.
- r. additional amendment expenses if we've paid your unused prepaid costs.
- s. travel or accommodation that was

Section 5: Additional expenses

upgraded to a different nature and/or class than **you** originally booked, unless approved by **us**.

t. all 'General exclusions' on pages 25 to 28 apply to this section as well.

Top Plus Basic **Multi-Journey** International International Domestic Section cover limit \$50,000 \$7,500 \$50,000 \$10,000 Sub-limits: For events relating 25% of your 25% of your 25% of your 25% of your to a Pre-existing medical condition reasonable reasonable reasonable reasonable of a close relative additional additional additional additional not travelling with you on expenses up to expenses up to expenses up to expenses up to your journey a maximum of a maximum of a maximum of a maximum of \$2,000 \$2,000 \$2,000 \$2,000 Sub-limits: For trip resumption \$3,000 \$3,000 \$3,000 \$3,000 where your original journey was interrupted due to a close relative's unexpected death or hospitalisation due to a lifethreatening condition in Australia Excess Yes Yes Yes Yes

This section cover limit applies to each insured person on **Duo cover** or is doubled for **Family cover**. This section's **sub-limit**s also apply to each insured person on **Duo cover** or is doubled for **Family cover**.

There's cover under this section if you incur reasonable additional accommodation and travel expenses during your journey due to a claimable event listed below under 'We'll pay'.

We'll pay up to the section cover limit and **sub-limits** of the plan **you** have selected for:

- 1. Medical additional expenses:
- a. your reasonable additional accommodation and travel expenses incurred after the start of your journey if you can't continue your journey due to injury or sickness which needs immediate attention from a medical advisor who certifies that you are unfit to travel.
 - b. your reasonable additional accommodation

and travel expenses for **you** to be with **your travelling companion** if they can't continue their **journey** due to an **injury** or **sickness**.

c. the reasonable accommodation and travel expenses of your travelling companion or a close relative (not both) to travel to you, stay near you or escort you if you are admitted to hospital suffering from a lifethreatening or other serious condition, or are evacuated for medical reasons.

2. Non-medical additional expenses:

 a. your reasonable additional accommodation and travel expenses due to the disruption of your scheduled or connecting transport because of a riot, strike, hijack, civil commotion, severe weather conditions or natural disaster occurring after the commencement of your journey.

- b. your reasonable additional accommodation and travel expenses because of your passport or other travel documents being lost, stolen or damaged your except where left unattended or involving government confiscation or articles sent through the mail.
- c. your reasonable additional accommodation and travel expenses because of a collision of a motor vehicle, watercraft, aircraft or train in which you are travelling.
- d. your reasonable additional accommodation and travel expenses because your home is declared uninhabitable due to a fire, explosion, or a natural disaster during your journey. We'll pay for your early return home.
- e. the reasonable additional cost of your return home, or your reasonable additional accommodation and travel expenses to another place overseas, if during your journey, your close relative dies unexpectedly or is hospitalised, due to a sickness or an injury.
- 3. Trip resumption expenses:
 - a. your reasonable costs to return you to the place overseas when your journey was interrupted if you had to return home because:
 - during your journey, a close relative of yours dies unexpectedly or is hospitalised due to a life threatening condition;
 - ii. your journey can be resumed;
 - more than 14 days remain on the period of insurance, as noted on your certificate of insurance (as at the time the original journey was interrupted); and
 - iv. **you** resume **your journey** within 6 months of **your** return **home**.

What you need to do:

- a. provide a medical or death certificate with **your** claim.
- b. get written confirmation from the carrier or other relevant body as to the cause of the event and delay.
- c. keep receipts for any costs and provide them with **your** claim.
- d. act reasonably in avoiding additional costs.
- e. take advantage of any pre-arranged return travel to Australia where possible.

Conditions and limitations applying to cover:

- we'll only pay the cost of the fare class and accommodation standard (room rate only) as originally booked that **you** had planned to travel at.
- b. if you need to return home and did not have a return ticket booked to Australia before the circumstances giving rise to a claim under this section happened, we'll reduce the amount of your claim by the price of the fare to Australia, at the same fare class as your departure fare, from the place you planned to return to Australia from.
- costs incurred must be on the written advice of a medical advisor approved by us, and with our prior approval.
- d. wherever claims are made by you under Section 5: Additional expenses and Section 4: Cancellation or amendment expenses for cancelled services/facilities or alternative arrangements for the same or similar services/facilities, we'll pay for the higher of the two amounts, not both. For example, if the cost to cancel part of your journey due to your home being declared uninhabitable (due to a fire, explosion or natural disaster) is \$3,000 and the cost to amend or rearrange your booking is \$2,000, then the most we'll pay is \$3,000.

Sub-limits applying to cover:

- a. where the reason you need to return home or travel to another destination is due to a sickness or injury resulting in the hospitalisation or death of a close relative, the most we will pay under this section is 25% of your reasonable additional expenses up to a maximum of \$2,000 for Single cover, \$2,000 per insured person on Duo cover and \$4,000 for Family cover.
- except where the reason you need to cancel or amend your journey is due to an illness or injury resulting in the hospitalisation or death of a close relative, and you can reasonably demonstrate that the hospitalisation or death is not related to a Pre-existing medical condition, then we will pay your reasonable cancellation or amendment expenses up to the section cover limit. Where you meet the conditions to resume your journey when your original journey was interrupted, the maximum we'll pay under this section is up to \$3,000 for Single cover, up to \$3,000 per insured person on Duo cover and up to \$6,000 for Family cover.

We won't pay any claims, costs or losses under this section arising from or related to:

- a. you not meeting to our reasonable satisfaction, all the requirements that apply to you under 'What you need to do'. We may advise in writing that you do not need to, considering all relevant circumstances.
- any reason you were aware of or should have been reasonably aware of at the relevant time that may cause your journey to be cancelled, abandoned or shortened.
- any Pre-existing medical conditions, except ones covered as specified under '<u>Pre-existing</u> <u>medical condition(s) we cover</u>' in the section

<u>'Pre-existing medical condition(s)</u>' on pages 12 to 17 or Pre-existing medical conditions with approval that are listed on your policy documents with additional premium paid.

- the death or hospitalisation of your close relative, due to an illness or injury, if it arises from a Pre-existing medical condition except as specified under 'Sub-limits applying to cover'.
- e. cancellations, delays or rescheduling by a bus line, airline, shipping line or rail authority unless it is due to a strike, riot, hijack, civil protest, severe weather conditions or natural disaster.
- f. you or your travelling companion changing plans or deciding not to continue with the intended journey, other than as covered by this policy.
- g. any additional travel and accommodation expenses **you** can claim from anyone else.
- medical additional expenses caused by planned medical procedures, cosmetic treatments, or other non-emergency medical treatments.
- costs which you have paid on behalf of any other person unless that person is also an insured person listed on your certificate of insurance.
- additional expenses relating to telephone calls and mobile data (other than calls to notify us of your emergency).
- k. purchase of alcohol.
- normal wear and tear, deterioration or losses caused by atmospheric or climatic conditions, mould or fungus, insects, rodents, vermin or any process of cleaning, ironing, repairing, restoring or alteration.
- m. all 'General exclusions' on pages 25 to 28 apply to this section as well.



Section 6: Missed connections and special events

	Top Plus International	Basic International	Multi-Journey	Domestic
Section cover limit	\$5,000	\$2,000	\$5,000	\$2,000
Excess	Yes	Yes	Yes	Yes

This section cover limit applies to each insured person on **Duo cover** or is doubled for **Family cover**.

There's cover under this section if **your journey** is interrupted by **your** prepaid, scheduled transport being cancelled, delayed or disrupted and it will result in **you** being unable to arrive on time for a prepaid connection, prepaid accommodation, a wedding, funeral, conference, concert, sporting event or prepaid tour arrangements.

We'll pay up to the section cover limit of the plan you have selected for:

- a. your reasonable additional transport expenses if during your period of insurance your prepaid, scheduled transport is cancelled, delayed or disrupted within 24 hours of the scheduled departure time, and as a result:
 - you will miss a wedding, funeral, conference, sporting event or prepaid tour arrangements; or
 - ii. **you** will miss a prepaid connection or **your** prepaid accommodation.

Conditions and limitations applying to cover under this section:

If **you** make a claim under Section 4: Cancellation or amendment expenses for unused, prepaid, nonrefundable costs and cancellation fees as a result of the same event for which **you** are claiming under this section, we'll only pay for the higher amount. **We** won't pay a claim for the same event under both this section and Section 4: Cancellation or amendment expenses. For example, if **your** missed prepaid connection was \$1,000 and the cost for a new flight is \$1,500, then the most we'll pay is \$1,500.

What you need to do:

a. seek credits and refunds from the carrier or

other relevant authority who was responsible for the cancellation, delay or disruption.

- provide with your claim, written confirmation from the carrier who was responsible regarding:
 - i. the reason for the cancellation, delay or disruption; and
 - ii. whether **you** are entitled to any credits or refunds and if not, why; and
 - iii. details of any credits or refunds that you are entitled to.
- c. get and provide with your claim, proof of the scheduled date and time of the wedding, funeral, conference, concert or sporting event.
- d. keep receipts for any costs incurred and provide them with **your** claim.

- a. you not meeting to our reasonable satisfaction, all the requirements that apply to you under 'What you need to do' unless we advise in writing that you don't need to.
- any amount of compensation (including credits and refunds) you receive or are entitled to receive from the carrier whose transport was cancelled, delayed or disrupted (we'll deduct this from your claim).
- c. where the leg of transport that is initially delayed arrives at its destination:
 - i. less than 2 hours later than originally scheduled for domestic transport (this means you must allow at least 2 hours connection time to get to your domestic bookings); or
 - ii. less than 3 hours later than originally



scheduled for international transport (this means **you** must allow at least 3 hours connection time to get to **your** international bookings).

d. where the **carrier** provides a reasonable alternative mode of transportation without

additional cost to you.

- e. any act, threat, or perceived threat of **terrorism**.
- f. all 'General exclusions' on pages
 25 to 28 apply to this section as well.

	Top Plus International	Basic International	Multi-Journey	Domestic
Section cover limit	\$2,000	\$1,000	\$2,000	\$2,000
Sub-limits	Up to \$200 for each24- hour period of delay after the first 6 hours	Up to \$200 for each24- hour period of delay after the first 6 hours	Up to \$200 for each24- hour period of delay after the first 6 hours	Up to \$200 for each24- hour period of delay after the first 6 hours
Excess	No	No	No	No

This section cover limit applies to each insured person on **Duo cover** or is doubled for **Family cover**.

There's cover under this section for **reasonable** additional meals and accommodation if there's a delay to **your** prepaid transport during **your journey** for at least 6 hours that **arises** due to circumstances outside **your** control.

We'll pay for reasonable expenses incurred up to the section cover limit of the plan you have selected:

At the end of the first 6 hours:

- For **Single cover**: Up to \$200.
- For **Duo cover**: Up to \$200 for each insured person.
- For Family cover: Up to \$400.

After the first 6 hours, for each full 24-hour period that the delay continues, **we**'ll pay for **reasonable** expenses:

- For Single cover: Up to \$200.
- For **Duo cover**: Up to \$200 for each insured person.
- For Family cover: Up to \$400.

What you need to do:

a. provide with your claim, written confirmation

of the circumstances that caused the delay.

- b. provide receipts for meals and accommodation claimed.
- seek credits and refunds from the carrier or other relevant authority who was responsible for the cancellation, delay or disruption.
- provide with your claim, written confirmation from the provider who was responsible regarding:
 - i. the reason for the delay;
 - ii. whether **you** are entitled to any credits or refunds and if not, why; and
 - iii. details of any credits or refunds that **you** are entitled to.

- a. any additional meals and accommodation expenses **you** can claim from anyone else.
- b. any act, threat, or perceived threat of **terrorism**.
- any additional meal and accommodation expenses where we have also paid a claim under Section 4 or Section 5 for the same period.
- d. all 'General exclusions' on pages 25 to 28 apply to this section as well.

What we cover - your belongings

Section 8: Luggage and personal effects

	Top Plus International	Basic International	Multi-Journey	Domestic
Section cover limit	\$15,000	\$5,000	\$10,000	\$8,000
Sub-limits: Video recorders,	\$4,000	\$1,500	\$4,000	\$1,500
cameras (but not phone				
cameras), laptops, tablets				
and other personal handheld				
computers (including				
attached and unattached				
accessories)				
Sub-limits: Mobile phones,	\$1,500	\$1,000	\$1,500	\$1,500
smartphones and electronic				
watches (including attached				
and unattached accessories)				
Sub-limits: Medical aids	\$2,000	\$1,000	\$2,000	\$1,000
(including attached and				
unattached accessories)				
Sub limits: All other items	\$750	\$750	\$750	\$750
(including attached and				
unattached accessories)				
Sub limits: Essential	\$500	\$500	\$500	\$500
medication (for pre-existing				
medical condition(s) listed on				
your policy documents)				
Sub-limits: Luggage and	Up to \$200 for	Up to \$200 for	Up to \$200 for	Up to \$200 for
personal effects stolen	each stolen	each stolen	each stolen	each stolen
from a concealed storage	item up to a	item up to a	item up to a	item up to a
compartment of a locked	maximum of	maximum of	maximum of	maximum of
motor vehicle	\$2,000	\$2,000	\$2,000	\$2,000
Excess	Yes	Yes	Yes	Yes

This section cover limit applies to each insured person on **Duo cover** or is doubled for **Family cover**.

There's cover under this section if your luggage and personal effects are lost, stolen or damaged during your journey. Here are some examples where cover under this section may apply:

- a thief on a motorcycle snatched your handbag off your shoulder and sped away, or a thief broke into your hotel room and stole your laptop.
- b. your Luggage and personal effects are destroyed, damaged or unable to be

recovered, due to an unexpected accident, such as a car crash or fire.

We'll pay up to the section cover limit and sub-limits of the plan you have selected:

For the replacement or repair, where it is economically and logistically practical to do so, of **your Luggage and personal effects** that are lost, stolen or damaged during **your journey**.

If replacement or repair do not apply, **we** may also choose to pay **you** the monetary value of the item(s).

Sub-limits applying to cover:

- a. you can claim for any combination of
 Luggage and personal effects up to the
 applicable sub-limits, but the maximum
 amount we'll pay under this section won't
 exceed the section cover limit of the plan
 you have selected.
- b. for Luggage and personal effects stolen from a concealed storage compartment of a locked motor vehicle, the most we'll pay is up to \$200 for each stolen item and \$2,000 in total for all stolen items. But, there must be signs of forced entry which is confirmed by a police report.
- we'll pay up to \$500 for your essential prescription medication that has been lost, stolen or damaged during your journey provided that:
 - the medication was prescribed by a medical advisor; and
 - ii. the medication was essential for the management of a medical condition; and
 - iii. the event causing your claim wasn't otherwise excluded under Section 8: Luggage and personal effects.

Conditions and limitations applying to cover:

- a. **you** must take reasonable care to protect luggage and personal effects. The level of care required is relative to the value of the item. The more expensive the item, the greater the level of care **we** expect **you** to take.
- where an item is part of a pair or set, we will pay no more than the value of the lost, damaged or stolen part, regardless of any special value that the item may have had as part of a pair or set. A pair or related set of items are considered as one item and the appropriate single item limit will be applied. These include but are not limited to the following examples, each of which is considered a single item:
 - a camera, lenses (attached or not), tripod and accessories;

- ii. a matching pair of earrings;
- iii. a drone with its camera.

What you need to do:

- a. report any crime or accident to the police, and hotel or carrier, if applicable, as soon as reasonably practicable, but preferably within 24 hours of the crime or accident and provide a copy of the report with your claim.
- report lost checked-in luggage to the carrier as soon as you realise that it's lost and provide a copy of the report with your claim.
- report any crime or accident resulting in the loss or damage of your Luggage and personal effects to us as soon as reasonably possible.
- d. provide with your claim, proof of ownership and value for any Luggage and personal effects that you are claiming for, such as receipts, valuations, or bank statements.
- e. provide with your claim, proof of ownership and value for any essential medication that you are claiming for, such as prescription s or receipts.
- f. contact **your** telecommunications provider to block **your** mobile phone sim and IMEI (international mobile equipment identity) if it is stolen or unrecoverable and provide written confirmation they have been blocked with **your** claim.

- a. you not meeting to our reasonable satisfaction, all the requirements that apply to you under 'What you need to do' unless we advise in writing that you don't need to.
- you not exercising reasonable care at all times for the safety and security of your personal items. The level of care required is relative to the value of the item. The more expensive the item, the greater the level of care we expect you to take.

- you not taking all reasonable actions within your power to recover your luggage and personal effects.
- d. your Luggage and personal effects being left unattended in a public place.
- e. your Luggage and personal effects being left unattended in a motor vehicle unless they were stored in the concealed storage compartment of a locked motor vehicle and there were documented signs of forced entry.
- f. **your** lost, stolen or damaged essential medication except where:
 - i. the medication was prescribed by a **medical advisor**; and
 - ii. the medication was essential for the management of this Pre-existing medical condition; and
 - iii. the event causing your claim wasn't otherwise excluded under Section 8: Luggage and personal effects.
- g. the transportation of **your** jewellery, mobile phone, camera, video camera, personal computer, computer equipment or their accessories in the cargo hold of any aircraft, ship, train, tram, bus or **carrier**. This does not apply in the case of personal electronic devices transported by aircraft if **you** are instructed by the airline or relevant authority to check the devices in due to government or security regulation.
- h. the cost of a medical consultation to replace **your** lost, stolen or damaged medication.
- you travelling on a bus, plane, ship or train when the loss, theft, misplacement or damage occurred if you are entitled to be reimbursed by the bus line, airline, shipping line or rail authority. But, if you aren't reimbursed the full amount of your claim, and the circumstances are covered under this

section, we'll pay the difference between the amount of **your** loss and what **you** were reimbursed, up to the limit of **your** selected cover.

- j. the electrical or mechanical breakdown of **your** luggage and personal effects.
- any loss, theft or damage to an item that doesn't meet the definition of Luggage and personal effects under this policy.
- any loss, theft or damage to watercraft of any type (other than surfboards).
- m. any loss or damage due to the process of cleaning, repair or alteration.
- any loss or damage due to ordinary wear and tear, deterioration, atmospheric or weather conditions, insects, rodents or vermin.
- your Luggage and personal effects being sent unaccompanied or by post, courier or under a freight contract.
- p. any damage to fragile or brittle articles unless the damage was caused by a fire or motor vehicle collision. This exclusion does not apply to spectacles, mobile phones, lenses in cameras and video cameras, laptop and tablet computers or binoculars.
- any loss of, or damage to, sporting equipment
 while in use (including surfboards or snowboards/skis.
- r. drones (including attached and unattached accessories) while in use.
- s. any negotiable instruments (such as gift cards, precious metals or securities).
- t. any information stored on any electronic device or other media, including software.
- u. all 'General exclusions' on pages 25 to 28 apply to this section as well.

Section 9: Delayed luggage and personal effects

	Top Plus International	Basic International	Multi-Journey	Domestic
Section cover limit	\$750	\$200	\$750	\$750
Sub-limits: At the end of the first 24 hours	\$375	\$100	\$375	\$375
Sub-limits: After 72 hours in total	\$375	\$100	\$375	\$375
Excess	No	No	No	No

This section cover limit applies to each insured person on **Duo cover** or is doubled for **Family cover**.

There's cover under this section for the cost of purchasing reasonable essential personal items if all your Luggage and personal effects are delayed, misdirected, or misplaced by your carrier for more than 24 hours during your journey, other than for the return leg of your journey.

For cover under this section, essential personal items are deemed to be toiletries, underwear, socks and a change of clothes and/or shoes.

We'll pay up to the section cover sub-limit listed for your plan at the end of the first 24 hours. This section cover sub-limit will be doubled if you still haven't received your Luggage and personal effects after 72 hours. Any compensation you are eligible to receive from the carrier will be deducted from the amount payable on your claim.

What you need to do:

- a. seek compensation from the **carrier** responsible for the delay.
- b. provide with your claim, written

confirmation from the **carrier** who was responsible regarding:

- i. the reason for the luggage delay;
- ii. the length of the delay;
- iii. whether **you** are entitled to any compensation; and
- iv. details of any compensation **you** are entitled to.
- c. keep receipts for any additional costs incurred and provide them with **your** claim.

- a. you not meeting to our reasonable satisfaction, all the requirements that apply to you under 'What you need to do' unless we advise in writing that you don't need to.
- b. your Luggage and personal effects
 being delayed on the final leg of your
 journey home.
- c. all 'General exclusions' on pages 25 to 28 apply to this section as well.



Section 10: Passport, travel documents and bank cards

	Top Plus International	Basic International	Multi-Journey	Domestic
Section cover limit	\$5,000	\$500	\$5,000	No cover
Excess	Yes	Yes	Yes	No cover

This section cover limit applies to each insured person on **Duo cover** or is doubled for **Family cover**.

There's cover under this section for the replacement costs (including communication costs) of your passports, travel documents or bank cards if they are lost, stolen or damaged while you are overseas.

We'll pay up to the section cover limit of your selected plan:

- a. to reimburse you for the replacement costs (including communication costs) of your passport, travel documents or bank cards if they are damaged, you lose them, or they are stolen from you while overseas.
- b. to also cover any loss resulting from the fraudulent use of any bank card held by you following the loss of the card while overseas.
 We will only cover those amounts not covered by any guarantee given by the bank or issuing company to you as the cardholder covering such losses.

What you need to do:

a. report any crime or accident to the police as soon as reasonably practicable, but preferably

within 24 hours and take reasonable steps to provide **us** with a copy of the report with **your** claim; and

 report the theft or loss of the bank card to the issuing bank or company in accordance with the conditions under which the cards were issued.

- a. you not meeting to our reasonable satisfaction, all the requirements that apply to you under 'What you need to do' unless we advise in writing that you don't need to.
- the loss or theft of your passports, travel documents or bank cards if they are not carried on your person unless they are locked in your accommodation.
- your passports, travel documents or bank cards being lost or stolen from your accommodation if a safe or locker has been provided and you fail to use it.
- d. the replacement or fraudulent use of any mobile device (such as mobile phone or smart watch).
- e. all 'General exclusions' on pages 25 to 28 apply to this section as well.



Section 11: Theft of cash

	Top Plus International	Basic International	Multi-Journey	Domestic
Section cover limit	\$250	\$250	\$250	No cover
Excess	No	No	No	No cover

This section cover limit is the maximum amount **we** will pay for all claims combined for **Single cover** and **Family cover**. For **Duo cover**, this section cover limit applies to each insured person.

There's cover under this section if the cash that you are carrying on you is stolen while you are overseas or stolen from a safe or strong room where available.

We'll pay up to the section cover limit for your selected plan for the theft of your cash, banknotes, currency notes, travellers' cheques, postal orders or money orders taken with you on your journey that have been stolen from your person or stolen from a safe or strong room where available.

What you need to do:

 report any crime or accident to the police, your hotel or your carrier, if applicable, as soon as reasonably practicable, but preferably within 12 hours of the crime, and take reasonable steps to provide **us** with a copy of the report with **your** claim;

 provide with your claim credit card or bank statements or receipts for the cash withdrawals, currency notes, travellers' cheques, postal orders or money orders.

- a. you not meeting to our reasonable satisfaction, all the requirements that apply to you under
 'What you need to do' unless we advise in writing that you don't need to.
- your cash, banknotes, currency notes, travellers' cheques, postal orders or money orders being stolen from you if it wasn't carried on you or your person or secured in a safe or strong room when it was stolen.
- c. all 'General exclusions' on pages 25 to 28 apply to this section as well.

What we cover - your personal exposure

This part explains what's covered, limits and conditions applying to that cover, what **you** need to do, and what **we** will and won't pay.

Section 12: Rental vehicle insurance excess

Please note that this cover does not take the place of **rental vehicle** insurance and only provides cover for the **excess** component that **you** become liable to pay in the event of collision or theft. This means that if the licensed motor vehicle rental company does not provide any insurance as part of the rental contract, then this section will not provide cover.

	Top Plus International	Basic International	Multi-Journey	Domestic
Section cover limit	\$8,000	\$3,000	\$8,000	\$6,000
Sub-limits: For the return of the rental vehicle if you are	\$500	\$500	\$500	\$500
injured or sick				
Excess	Yes	Yes	Yes	Yes

This section cover limit and **sub-limit** is the maximum amount **we** will pay for all claims combined for a **Single cover**, **Duo cover** and **Family cover**.

There's cover under this section for the rental vehicle insurance excess if you rent a rental vehicle from a licensed motor vehicle rental company during your journey, and it is involved in an accident, is damaged or is stolen during your hire period.

There is also cover for the cost **you** incur to return **your rental vehicle** should **you** be medically unfit to do so.

Rental vehicle means a sedan, hatchback or station wagon, four-wheel drive, or minibus/ people mover, or a campervan/motorhome that does not exceed 4.5 tonnes, rented from a licensed motor vehicle rental company for the carriage of passengers and does not include any vehicle designed for the carriage of goods. It doesn't include car-sharing services (such as Car Next Door, Citihop, Go Get or Zipcar), **motorcycles**, **mopeds** or **scooters**, caravans, trailers, trucks or any watercraft.

We'll pay up to the section cover limit and/or section cover sub-limit of your selected plan:

- a. the lower amount of either the rental vehicle insurance excess or the cost of repairing the rental vehicle; and
- b. the cost for the return of **your rental vehicle**.

Sub-limits applying to cover:

If **you** are **injured** or **sick** and unable to return **your rental vehicle**, we'll pay up to \$500 to have the vehicle returned to the nearest depot.

What you need to do:

- a. provide a copy of the rental agreement along with the repair account or quote.
- b. keep receipts for any costs **you** have paid and provide them with **your** claim.
- provide a medical certificate from your attending medical advisor certifying you as medically unfit to return the vehicle where you are claiming for the cost to return the rental vehicle.

We won't pay any claims, costs or losses under this section arising from or related to:

a. **you** not meeting to **our** reasonable satisfaction, all the requirements that apply to **you** under

'What **you** need to do' unless **we** advise in writing that **you** don't need to.

- b. the rental vehicle being operated or used by a person not named as a designated driver on the rental vehicle agreement, or by anyone not listed on your certificate of insurance.
- you or the driver not holding the correct license to operate the rental vehicle for the country you are in.
- the rental vehicle being used or driven in a way that violates the rental agreement, or damage that occurs beyond the limits of a public roadway.
- e. use of the rental vehicle that breaks the law

of the country **you** are in.

- f. the use of a vehicle that doesn't comply with the definition of a rental vehicle under this policy.
- g. the use of any vehicle that is rented from a car-sharing service.
- h. administration costs or penalties (such as loss of use).
- any costs you become liable for if the rental vehicle agreement does not include comprehensive motor insurance with an applicable excess for the duration of the hire period.
- j. all 'General exclusions' on pages 25 to 28 apply to this section as well.

Section 13: Personal liability

	Top Plus International	Basic International	Multi-Journey	Domestic
Section cover limit	\$5,000,000	\$1,000,000	\$5,000,000	\$1,000,000
Excess	Yes	Yes	Yes	Yes

This section cover limit is the maximum amount **we** will pay for all claims combined for a **Single cover**, **Duo cover** and **Family cover**.

There's cover under this section if, due to your negligent act that occurs during your journey, you become legally liable for:

- a. someone else's death or bodily injury; or
- b. the physical loss of, or damage to, someone else's property.

We'll pay up to the section cover limit for your selected plan for:

- a. the costs you are legally liable for; and/or
- b. your reasonable legal costs for settling or defending the claim against you as long as you have incurred them with our approval.

Conditions and limitations applying to cover:

- a. **you** must not accept fault or liability for any costs without **our** approval first.
- b. You must not incur any legal costs without our approval first.

What you need to do:

- a. get proof of the death, **injury**, loss or damage and provide it with **your** claim.
- b. keep invoices for costs **you** are liable for and provide them with **your** claim.
- c. keep receipts for any legal costs that **we** have approved and provide them with **your** claim.

- a. you not meeting to our reasonable satisfaction, all the requirements that apply to you under 'What you need to do' unless we advise in writing that you don't need to.
- an injury to you, a travelling companion, a relative of yours or your travelling companion, or anyone employed, or deemed to be employed, by you or your travelling companion.
- c. damage to property belonging to or in the care or control of **you**, a **travelling companion** or a

relative of **yours** or **your travelling companion**, or an employee, or a deemed employee, of **you** or **your travelling companion**.

- d. ownership, custody or use of motor any vehicle or mechanically propelled vehicle, aeroplane, aerial device, drone, watercraft, firearm or weapon.
- e. buildings **you** own or occupy, except if **you** temporarily reside there.
- f. the conduct of a business, profession or trade.
- g. a disease that is transmitted by **you**.
- h. assault and/or battery committed by **you** or at **your** direction.
- i. any conduct intended to cause injury, property

damage or other personal liability.

- a contract that imposes on you a liability which you would not otherwise have any non- financial assistance, remedy or recovery.
- k. any fine, penalty or aggravated, punitive, exemplary, or liquidated damages.
- any act of terrorism or any loss arising out of the use of military force to intercept, prevent, or mitigate and known or suspected act of terrorism.
- m. any conduct intended to cause bodily injury, property damage or liability with reckless disregard for the consequences of you or any person acting with your knowledge, consent or connivance.
- n. all 'General exclusions' on pages 25 to 28 apply to this section as well.

Section 14: Accidental death

	Top Plus International	Basic International	Multi-Journey	Domestic
Section cover limit	\$25,000	\$10,000	\$25,000	\$10,000
Sub-limits: Dependents	\$5,000 per	\$5,000 per	\$5,000 per	\$5,000 per
	dependent	dependent	dependent	dependent
Excess	No	No	No	No

This section cover limit applies to each insured person on **Duo cover**.

For **Family cover**, this section limit applies to each adult listed on the **certificate of insurance** (who is not a **dependent** listed on the **certificate of insurance**). The maximum amount payable for all claims combined is double this section cover limit.

There's cover under this section if you pass away due to an injury sustained during your journey.

We define injury as a bodily injury caused solely and directly by violent, accidental, visible and external means, which happened at a definite time and place during your period of insurance and did not result from any illness, sickness or self-harm.

We'll pay the accidental death benefit for **your** selected plan to **your** estate provided:

a. your death occurs within 12 months of the

accident; or

 b. during your journey, the transport you are travelling on disappears, sinks or crashes and you are presumed dead, and your body is not found within 12 months.

For **Duo cover**, this section cover limit under **your** plan is the amount **we** will pay for the death of each adult listed on the **certificate of insurance**.

For Family cover, this section cover limit under your plan is the amount we will pay for the death of each adult listed on the certificate of insurance (who is not a dependent listed on the certificate of insurance).

The maximum amount payable for all claims combined is double this section cover limit.

Sub-limits applying to cover under this section:

The maximum amount payable for the death of a **dependent** listed on the **certificate of insurance** is

Contents

\$5,000.

What you need to do

You need to provide a death certificate with the claim, as evidence of the accidental death.

We won't pay any claims, costs or losses under this section arising from or related to:

Section 15: Permanent disability

- a. you not meeting to our reasonable satisfaction, all the requirements that apply to you under 'What you need to do' unless we advise in writing that you don't need to.
- suicide or any other reason that doesn't meet the definition of injury under the policy.
- c. all 'General exclusions' on pages 25 to 28 apply to this section as well.

	Top Plus International	Basic International	Multi-Journey	Domestic
Section cover limit	\$50,000	\$10,000	\$50,000	No cover
Sub-limits: Dependents	5,000 per	5,000 per	5,000 per	No cover
	dependent	dependent	dependent	
Excess	No	No	No	No cover

This section cover limit applies to each insured person on **Duo cover**.

For **Family cover**, this section limit applies to each adult listed on the **certificate of insurance** (who is not a **dependent** listed on the **certificate of insurance**).

The maximum amount payable for all claims combined is double this section cover limit under **your** plan.

There's cover under this section if you suffer a bodily injury overseas during your journey that causes permanent disability.

We define permanent disability and permanently disabled as:

- you have totally lost all of your sight in one or both eyes; or the use of a hand or foot at or above the wrist or ankle; or
- a brain injury which prevents you from doing the same work you did prior to the injury or completing the same study you were undertaking prior to the injury; and
- The loss has lasted for at least 12 months and in the opinion of a medical advisor is unlikely to improve.

We'll pay the permanent disability benefit to you for your selected plan if:

- a. you suffer an injury during your journey; and
- b. due to this **injury**, **you** become permanently disabled within 12 months of the **injury date**.

For **Duo cover**, this section cover limit under your plan is the amount we will pay for the permanent disability of each adult listed on the certificate of insurance.

For **Family cover**, this section cover limit under **your** plan is the amount **we** will pay for the permanent disability of each adult listed on the **certificate of insurance** (who is not a **dependent** listed on the **certificate of insurance**). The maximum amount payable for all claims combined is double this section cover limit under **your** plan.

Sub-limits applying to cover under this section:

The maximum amount payable for the permanent disability of a **dependent** listed on the **certificate of insurance** is \$5,000.

What you need to do

You need to provide a medical certificate with **your** claim from a **medical advisor** confirming the permanent disability (as defined).

- a. you not meeting to our reasonable satisfaction, all the requirements that apply to you under 'What you need to do' unless we advise in writing that you don't need to.
- b. injury due to self-harm or any other reason

Section 16: Loss of income

that doesn't meet the definition of **injury** or permanent disability under the **policy**.

- c. sickness or disease.
- d. all 'General exclusions' on pages 25 to 28 apply to this section as well.

	Top Plus International	Basic International	Multi-Journey	Domestic
Section cover limit	\$10,400	\$5,200	\$10,400	No cover
Sub-limits: Weekly limit	\$400 per week	\$400 per week	\$400 per week	No cover
Excess	No	No	No	No cover

This section cover limit applies to each insured person on **Duo cover** or is doubled for **Family cover**.

There's cover under this section if you are injured during your overseas journey and as a result of the injuries, after 30 days of you returning home, you are unable to return to the job that you held in Australia before departing on your overseas journey, and you lose all your income.

We'll pay as follows up to the section cover limit and/or sub-limit, for your selected plan to replace your weekly wage, net of income tax, that you have lost due to your injury:

- for Top Plus International and Multi-Journey plans: Up to \$400 per week for a period of up to 26 weeks.
- for the Basic International plan: Up to \$400 for a period of up to 13 weeks.

What you need to do:

- a. get a medical report from your medical
 advisor overseas regarding the nature of your
 injury and confirming your disablement.
- b. get a medical report from your medical advisor in Australia once you return home outlining the treatment plan for your return to your usual occupation in Australia, the

expected return to work date or length of expected disablement.

- c. provide us with satisfactory evidence of your employment in Australia and your scheduled return to work date after your journey, confirming that you were employed prior to your departure and had work to return to in Australia.
- provide us with satisfactory evidence of your lost income by providing us with your recent payslips.

- a. you not meeting to our reasonable satisfaction, all the requirements that apply to you under 'What you need to do' unless we advise in writing that you don't need to.
- the first 30 days of your disablement from the time you originally planned to resume your work.
- c. the loss of income of **your dependents**.
- d. the loss of income for any job which **you** held while **overseas**.
- e. all 'General exclusions' on pages 25 to 28 apply to this section as well.

Section 17: Pet care

	Top Plus International	Basic International	Multi-Journey	Domestic
Section cover limit	\$500	No cover	\$500	No cover
Sub-limits: Daily limit	\$25 for each 24-	No cover	\$25 for each 24-	No cover
for kennel, boarding or	hour period		hour period	
cattery fees				
Excess	No	No cover	No	No cover

This section cover limit is the maximum amount **we** will pay for all claims combined for **Single cover** and **Family cover**. For **Duo cover**, this section cover limit applies to each insured person.

There's cover under this section for pet boarding fee if you are delayed from returning home due to an unexpected event covered under the **policy**.

We'll pay up to the section cover limit for **your** selected plan:

 \$25 for each 24-hour period for the additional kennel, boarding or cattery fees for domestic dogs and cats owned by you if you are delayed beyond your original return date due to an unexpected event covered under this policy.

What you need to do

You need to keep receipts for any costs and provide them with **your** claim.

- a. you not meeting to our reasonable satisfaction, all the requirements that apply to you under 'What you need to do' unless we advise in writing that you don't need to.
- b. for any kennel or cattery boarding fees outside of Australia.
- c. all 'General exclusions' on pages 25 to 28 apply to this section as well.

What we cover - COVID-19

Cover under this **policy** includes claims **arising** from COVID-19 only in the circumstances set out under the following sections.

IMPORTANT: You must purchase the Top Plus International or Domestic policy in order to be covered for any COVID 19 benefits.

The combined maximum benefit for all claims under Sections 19-21 is:

Single Plan*	Duo Plan*	Family Plan*
\$3,500	\$7,000	\$7,000

* sub-limits may apply. Please read each section for full terms and conditions.

Section 18: COVID-19 overseas medical, hospital and emergency expenses

You must purchase the Top Plus International policy to be covered for Overseas Medical and Hospital expenses that are incurred following a diagnosis of COVID-19. Any diagnosis of COVID-19 must be made by your medical advisor.

	Top Plus International	Basic International	Multi-Journey	Domestic
Section cover limit	Unlimited*	No cover	No cover	No cover
Sub-limit: Cash in Hospital	\$6,000	No cover	No cover	No cover
Sub-limit: Funeral Expenses Overseas	\$20,000	No cover	No cover	No cover
Excess: not applied to Cash in Hospital or Funeral Expenses Overseas	Yes	No cover	No cover	No cover

*\$unlimited means that generally there is no cap on the maximum **dollar** amount which may be paid out for this benefit, subject to the specific terms and conditions, **sub-limits** and exclusions that apply to this benefit. This benefit covers **reasonable overseas** medical and **hospital** costs as a result of an **injury** or **sickness** occurring which first shows itself during **your journey** dates as outlined on the **certificate of insurance**

The applicable cover limit applies to each insured person.

There's cover under this section if you are unexpectedly diagnosed by a medical advisor with COVID-19 during your overseas journey.

We will pay up to the section cover limit for the reasonable costs incurred on the advice of a medical advisor for your emergency medical treatment, hospitalisation or medical evacuation (where medically necessary) incurred by you until you get back to Australia.

We will also pay for your reasonable additional accommodation and travel expenses, which are of an equivalent standard to your pre-booked arrangements, you incur during your journey due to a claim for emergency medical treatment, hospitalisation or medical evacuation (where medically necessary) which **we** have accepted under this section.

Sub-limits applying to cover:

If, due to COVID-19, an insured person listed on the **certificate of insurance** dies **we** will pay up to \$20,000 in total for the **reasonable** cost of either:

- a funeral or cremation; and/or
- for bringing your remains back to your home.

If, due to COVID-19, **you** are hospitalised **overseas** for more than 48 hours, **we** will pay \$50 for each complete 24-hour period **you** are in **hospital** from the first day of hospitalisation up to the **sub-limit** shown in the table above. If, due to COVID-19, **you** are hospitalised, die or are medically evacuated and **your dependents** aged 16 years or under are left without supervision whilst on **your journey**, **we** will provide care for them until **we** can arrange:

- their return to Australia; or
- for a relative to arrive to care for them.

This benefit is provided **you**, **your travelling companion** or a relative contacts **us** first and obtains **our** agreement.

Conditions and limitations applying to cover:

- a. any diagnosis of COVID-19 must be made by a **medical advisor**.
- b. the medical or hospital expenses must be confirmed in writing by a medical advisor. You must make every reasonable effort to keep your medical or hospital expenses to a minimum.
- c. we will only cover medical treatments received and/or hospital accommodation incurred for a maximum of 12 months from the date the sickness first manifested itself.
- d. if you don't agree to return home when we reasonably decide that you should, based on the information that is available to us at the time, then we will pay you the amount that 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.
- e. in consultation with **our** medical advisors, **we** will determine whether it is medically necessary for **you** to be moved from one **hospital** to another or returned **home**.
- f. if **we've** paid for costs to bring **you home**, but **you** didn't have a prepaid return flight **home**, we're entitled to recover that cost from **you** at the same fare class that **you** departed Australia.

What you need to do:

- a. contact **our** emergency assistance team as soon as reasonably possible, or have someone else contact **us** on **your** behalf, if **you**:
 - i. are admitted to **hospital**;

ii. need surgery; or

iii. need outpatient treatment likely to cost more than \$2,000 AUD.

- b. if **you** are admitted to **hospital**, provide a copy of the discharge summary with **your** claim.
- c. keep receipts for any costs and provide them with **your** claim.
- d. cooperate with **our** request for all relevant medical records or reports, including information about previous medical conditions and courses of treatment, to determine whether **your** claim relates to a **Pre-existing medical condition**.
- e. if a treatment is under public funded services or care or a treatment under a Reciprocal Health Agreement between Australia and another country, **you** must seek such treatment first.
- f. provide a death certificate with **your** claim, as evidence of the death.

- a. you not meeting to our reasonable satisfaction, all the requirements that apply to you under 'What you need to do' unless we advise in writing that you don't need to.
- b. your Pre-existing medical conditions, except ones covered as specified under <u>Pre-existing</u> <u>medical condition(s) we cover</u>' in the section <u>'Pre-existing medical condition(s)</u>' on pages 12 to 17 or Pre-existing medical conditions which we have assessed and agreed to cover and that are listed on your policy documents with additional premium paid.
- c. a COVID-19 event that occurs during a cruise.
- any costs without proof of the amount, and if we are reimbursing you directly, proof that you have paid it.
- e. you not promptly following our reasonable medical advice we have obtained from our medical advisors based on the information available to us at the time (and we also won't be responsible for subsequent medical, hospital or evacuation expenses).
- f. medical treatment or ambulance transportation which is provided in Australia.

g. private medical treatment if the same treatment is available under public funded services or care or a treatment under a Reciprocal Health Agreement between Australia and another country. Reciprocal Health Agreements are currently in place with Finland, Italy, Malta, the Netherlands, Norway, Sweden, the Republic of Ireland, Belgium, Slovenia, United Kingdom and New Zealand.

- h. routine medical or prenatal visits.
- i. all 'General exclusions' on pages 25 to 28 apply to this section as well.

Section 19 - COVID-19 cancellation fees and lost deposits

Single Plan*	Duo Plan*	Family Plan*
\$3,500	\$7,000	\$7,000

* sub-limits may apply. Please read each section for full terms and conditions.

The combined maximum benefit for all claims under Sections 19-21 is:

Section cover limit	Top Plus International	Basic International	Multi-Journey	Domestic
Single plan	\$3,500	No cover	No cover	\$3,500
Duo or Family plan	\$7,000	No cover	No cover	\$7,000
Sub-limit: per insured person	\$3,500	No cover	No cover	\$3,500
Sub-limit: for travel agent's cancellation fees	\$1,500	No cover	No cover	\$1,500
Excess	Yes	No cover	No cover	Yes

The applicable section cover limit is the maximum **we** will pay for all claims in total on any one **policy**, subject to any applicable **sub-limit**s.

There's cover under this section if due to any unforeseeable COVID-19 related event outside of your control at the relevant time you need to:

- a. cancel **your journey**, before the start of **your journey**, as **you** are unable to commence the **journey**; or
- b. curtail **your journey**, after the start of **your journey**, as **you** are unable to continue the **journey**.

We will pay up to the section cover limit or sub-limits of the plan you have selected for:

- a. your cancellation costs for travel and accommodation arrangements that you have paid in advance and can't recover in any other way; or
- b. the loss of frequent flyer or similar air travel points that **you** used to buy an airline ticket following the cancellation of that airline ticket if

you can't recover the lost points from any other source and before you submit a claim you must first request the airline or points provider refund your points. We calculate the amount we pay you as follows:

- 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; multiplied by:
- ii. the total value of points lost, divided by the total number of points used to get the ticket.

Sub-limits applying to cover:

- a. the most **we** will pay per insured person under this section is \$3,500.
- we will pay up to \$1,500 for Single cover, up to \$1,500 per insured person on Duo cover and up to \$3,000 for Family cover for any travel agent's cancellation fees.

Conditions and limitations applying to cover:

a. You must purchase this **policy** more than 7 days prior to the start of **your journey** in order for the COVID-19 related cancellation cover to apply in circumstances that occur before the start of **your journey**. Note that cancellation cover for reasons other than COVID-19 is unaffected by this purchase requirement.

- b. any diagnosis of COVID-19 must be made by a **medical advisor**.
- any refunds or credits **you** are eligible to receive will be deducted from the amount payable on **you** claim.
- a. if you submit a claim under this section following cancellation by you of your entire journey, cover under this policy ends. You'll need to buy another policy for any subsequent trip. Cover will remain in place for anyone listed on the certificate of insurance who isn't making a claim to cancel their journey, but the cover limit will be reduced by the amount payable on the cancellation claim.
- b. wherever claims are made by you under Section 19 and Section 20 for the same or similar services/facilities, we'll pay for the higher of the two amounts, not both. For example, if the cost to cancel part of your journey due to contracting COVID-19 is \$3,000 and the cost to amend or rearrange your booking is \$2,000, then the most we'll pay is \$3,000.

What you need to do:

- a. provide with **your** claim, written confirmation of the event that caused **you** to change or cancel **your journey**.
- b. request credits and refunds from any service
- c. providers and **carriers** and provide written confirmation of whether **you** are entitled to any credits or refunds. If **you** are unable to provide any of this information, please provide a reason why.

- d. keep receipts for any costs paid for **your** original arrangements and provide them with **your** claim.
- e. keep receipts for any additional costs incurred and provide them with **your** claim.
- f. provide with **your** claim a copy of **your** original travel itinerary and **your** new travel itinerary, if applicable.
- g. that will exceed the combined maximum benefit for all claims under Sections 19-21.

- a. If **you** purchase **your policy** 7 days or less before the start of **your journey** there is no COVID-19 related cancellation cover.
- b. you not meeting to our reasonable satisfaction, all the requirements that apply to you under 'What you need to do' unless we advise in writing that you don't need to.
- c. a COVID-19 event that occurs during a **cruise**.
- d. any cancellation or amendment expenses **you** can claim from anyone else.
- e. any reason **you** were aware of or should have been reasonably aware of at the **relevant time** that may cause **your journey** to be cancelled, abandoned or shortened.
- f. you or your travelling companion changing
- g. plans or deciding not to continue with the intended journey where there are no unforeseeable circumstances outside your control that prevent the journey.
- h. the non-refundable unused portion of travel or accommodation arrangements where alternative travel or accommodation is paid for by us as part of a claim under this policy.
- i. all 'General exclusions' on pages 25 to 28 apply to this section as well.



Section 20 - COVID-19 additional expenses

The combined maximum benefit for all claims under Sections 19-21 is:

Single Plan*	Duo Plan*	Family Plan*
\$3,500	\$7,000	\$7,000

* **sub-limits** may apply. Please read each section for full terms and conditions.

	Top Plus International	Basic International	Multi-Journey	Domestic
Section cover limit				
Single plan	\$3,500	No cover	No cover	\$3,500
Duo or Family plan	\$7,000	No cover	No cover	\$7,000
Sub-limit: per insured person	\$3,500	No cover	No cover	\$3,500
Sub-limit: kennel or cattery fees	\$1,500	No cover	No cover	\$1,500
Excess	Yes	No cover	No cover	Yes

The applicable section cover limit is the maximum **we** will pay for all claims in total on any one **policy**, subject to any applicable **sub-limits**.

The applicable section cover limit is the maximum **we** will pay for all claims in total on any one **policy**, subject to any applicable **sub-limits**.

There's cover under this section if due to any unforeseeable COVID-19 related event outside of your control at the relevant time you need to:

- a. change **your journey**, before the start of **your journey**; or
- b. make changes to **your journey** arrangements during **your journey**.

We will pay up to the section cover limit or sublimits of the plan you have selected for your reasonable travel and accommodation arrangements to rearrange your journey at an equivalent standard to your pre-booked arrangements.

Cover includes but is not limited to:

- a. the pre-paid accommodation **you** planned to stay at is closed for cleaning due to an outbreak of COVID-19; or
- b. **you** are denied boarding on **your** scheduled prepaid public transport due to **you** being suspected of being infected with COVID-19; or
- c. **your close relative** or business partner in Australia dies or is hospitalised with COVID-19

and **you** need to return **home**.

d. your journey is for the purpose of attending a prearranged special event like a wedding, significant occasion, funeral, conference, musical festival or sporting event which cannot be delayed due to your late arrival and the journey is delayed because of COVID-19 related delays and outside your control, we will pay the reasonable additional cost of using alternative public transport to arrive at your destination on time.

Sub-limits applying to cover:

 a. \$25 for each 24 hour period in respect of additional boarding kennel or cattery fees for domestic dogs and cats that are owned by you and located within Australia, if you are delayed beyond your original return date due to any claimable circumstance which we have accepted cover under the COVID-19 Benefits.

Conditions and limitations applying to cover:

a. You must purchase this **policy** more than 7 days prior to the start of **your journey** in order for the COVID-19 related additional expenses cover to apply in circumstances that occur before the start of **your journey**. Note that additional expenses cover for reasons other than COVID-19 is unaffected by this purchase requirement.



We won't pay any claims, costs or losses under this section arising from or related to:

- a. If **you** purchase **your policy** 7 days or less before the start of **your journey** there is no COVID-19 related additional expenses cover.
- b. you not meeting to our reasonable satisfaction, all the requirements that apply to you under 'What you need to do' unless we advise in writing that you don't need to.
- c. a COVID-19 event that occurs during a **cruise**.
- d. any cancellation or amendment expenses **you** can claim from anyone else.
- e. any reason **you** were aware of or should have been reasonably aware of at the **relevant time** that may cause **your journey** to be cancelled,

abandoned or shortened.

- f. you or your travelling companion changing
- g. plans or deciding not to continue with the intended journey where there are no unforeseeable circumstances outside your control that prevent the journey.
- h. the non-refundable unused portion of travel or accommodation arrangements where alternative travel or accommodation is paid for by us as part of a claim under this policy.
- i. purchase of alcohol.
- j. exceeding the combined maximum benefit for all claims under Sections 19-21.
- j. all 'General exclusions' on pages 25 to 28 apply to this section as well.

Section 21 - COVID-19 travel delay

The combined maximum benefit for all claims under Sections 19-21 is:

Single Plan*	Duo Plan*	Family Plan*
\$3,500	\$7,000	\$7,000

* **sub-limits** may apply. Please read each section for full terms and conditions.

	Top Plus International	Basic International	Multi-Journey	Domestic
Section cover limit				
Single plan	\$3,500	No cover	No cover	\$3,500
Duo and Family plan	\$7,000	No cover	No cover	\$7,000
Sub-limit: per insured person per 24-hour period	Please refer below for applicable daily sub-limits	No cover	No cover	Please refer below for applicable daily sub-limits
Excess	Yes	No cover	No cover	No cover

The applicable section cover limit is the maximum **we** will pay for all claims in total on any one **policy**, subject to any applicable **sub-limits**.

There's cover under this section for **reasonable** additional meals and accommodation if, due to COVID-19, there's a delay to **your** prepaid transport during **your journey** for at least 6 hours that **arises** due to circumstances outside **your** control and **you** cannot claim the expenses from anyone else.

We'll pay for **reasonable** additional meal and accommodation expenses incurred up to the section cover limit of the plan **you** have selected:

At the end of the first 6 hours:

• For **Single cover**: Up to \$200.

- For **Duo cover**: Up to \$200 for each insured person.
- For **Family cover**: Up to \$400.

After the first 6 hours, for each full 24-hour period that the delay continues, we'll pay for **reasonable** additional meal and accommodation expenses:

- For **Single cover**: Up to \$200.
- For **Duo cover**: Up to \$200 for each insured person.
- For **Family cover**: Up to \$400.

We won't pay any claims, costs or losses under this section arising from or related to:

a. a COVID-19 event that occurs during a **cruise**.



- b. any additional meals and accommodation expenses **you** can claim from anyone else.
- any additional meals and accommodation expenses where we have also paid a claim for under any for the same period.
- d. purchase of alcohol.
- e. exceeding the combined maximum benefit for all claims under Sections 19-21.
- f. all 'General exclusions' on pages 25 to 28.apply to this section as well.

What we cover - your choices

This part explains about the optional covers **you** can add to **your** policies, what's covered, limits and conditions applying to that cover, what **you** need to do, and what **we** will and won't pay.

Cruise pack

	Top Plus International	Basic International	Multi- Journey	Domestic
Additional premium required for cover	Yes	Yes	Yes	No cover

Cover for cruising overseas or in Australian waters is not automatically included in your policy. You will only have this cover if you pay the additional premium and the Cruise pack is listed on your certificate of insurance.

If **you** are **cruising overseas** or in Australian waters and have not purchased the Cruise pack, there will be no cover under any section of the **policy** for the duration of any **cruise you** take.

There's cover under each benefit section limit and sub-limit of your policy if you purchase the Cruise pack.

Conditions and limitations applying to cover:

You must have purchased the Cruise pack at the time you took out your policy or before your departure date and paid the appropriate additional premium. The Cruise pack must be listed on your certificate of insurance. International cruises

If **you** intend to travel on an international **cruise**, **you** must:

• list each country that you will visit

on **your cruise**;

- buy either a Top Plus International plan, a Basic International plan or a Multi-journey plan; and
- purchase the Cruise pack cover option.

When **you** get **your certificate of insurance**, check that each country is listed and that the Cruise pack has been purchased.

Cruising in Australian waters

If **you** intend to travel on a **cruise** in Australian waters, **you** must:

- select 'Australia (including cruising)' as a destination; and
- buy either a Top Plus International plan, a Basic International plan or a Multi-journey plan (not a Domestic plan if **you** wish to be covered for **cruising** in Australian waters); and
- purchase the Cruise pack cover option.

You will need to buy either a Top Plus International or a Basic International plan for cruising in Australian waters because these plans cover medical evacuation and emergency medical expenses incurred while **you** are on-board the **cruise**. Please note that these expenses will not be covered by Medicare or **your** private health insurance provider. This is because typically the medical practitioners on board the ship cruising in Australian waters are not registered as medical practitioners in Australia. Please also note that **we** are unable to pay for **your** medical costs (including any out of pocket costs) if the onboard medical practitioner is registered in Australia, or when **you** visit an Australian medical practice at a port even if **you** buy the Cruise pack as **we** are prohibited under the law from doing so.

When you get your certificate of insurance, check

that 'Australia (including cruising)' is listed and that the Cruise pack has been purchased.

We won't pay any claims, costs or losses under this section arising from or related to:

- a. travel on an overseas cruise or in Australian waters where the Cruise pack has not been purchased and listed on your certificate of insurance. You cannot purchase the Cruise pack after you start your journey.
- b. a COVID-19 event that occurs during a **cruise.**
- all 'General exclusions' on pages 25 to 28 apply to this section as well.

There is also cover for the following benefits if you have purchased the Cruise pack:

Missed shore excursions:

	Top Plus International	Basic International	Multi- Journey	Domestic
Section cover limit	\$1,000	\$1,000	\$1,000	No cover
Excess	Yes	Yes	Yes	No cover

This section cover limit applies to each insured person on **Duo cover** or is doubled for **Family cover**.

There's cover under this section if you are unable to attend your prepaid shore excursion due to an unexpected event covered under the **policy**.

We'll pay up to the benefit limit for your selected plan for the non- refundable cost of the unused ticket.

What you need to do

You need to submit the original ticket or an evidence that is satisfactory to **us** that **you** have missed the prepaid shore excursion with **your** claim.

- a. you cannot submit the original ticket of an evidence to our reasonable satisfaction that you have missed the prepaid shore excursion any act, threat, or perceived threat of terrorism.
- b. a COVID-19 event that occurs during a cruise.
- c. all 'General exclusions' on pages 25 to 28 apply to this section as well.



Missed port:

	Top Plus International	Basic International	Multi-Journey	Domestic
Section cover limit	\$800	\$800	\$800	No cover
Sub-limits: per missed port	\$100 per missedport	\$100 per missedport	\$100 per missedport	No cover
Excess	Nil	Nil	Nil	No cover

This section cover limit is the maximum amount **we** will pay for all claims combined for **Single cover** and **Family cover**. For **Duo cover**, this benefit limit applies to each insured person.

There's cover under this section if your cruise doesn't dock at a port during your journey due to adverse weather restrictions or mechanical breakdown, and an alternative port is not provided.

We'll pay \$100 per port up to the benefit limit for **your** selected plan.

What you need to do

You need to provide us with written confirmation

from the **cruise** provider of the ports missed, the cause and whether an alternative port was provided.

We won't pay any claims, costs or losses under this section arising from or related to:

- you not providing us with written confirmation from the cruise provider of the ports missed, the cause and whether an alternative port was provided.
- b. a missed port if an alternative port was provided to **you**.
- c. all 'General exclusions' on pages 25 to 28 apply to this section as well.

Emergency formal attire:

	Top Plus International	Basic International	Multi- Journey	Domestic
Section cover limit	\$250	\$250	\$250	No cover
Excess	Nil	Nil	Nil	No cover

This section cover limit applies to each insured person on **Duo cover** or is doubled for **Family cover**.

There's cover under this section if your formal wear is delayed, misdirected, or misplaced for over 12 hours from the time **you** boarded the vessel.

We'll pay up to the benefit limit for **your** selected plan to buy or hire replacement formal wear.

What you need to do

You need to provide us with written confirmation

from the **cruise** provider or **carrier** of the delay to **your** formal attire.

- a. you not providing us with written confirmation from the cruise provider or carrier of delay to your formal attire.
- a claim for the same item if you have also claimed for it under Section 9:
 Delayed luggage and personal effects.
- c. all 'General exclusions' on pages 25 to28 apply to this section as well.

Cabin confinement:

	Top Plus International	Basic International	Multi- Journey	Domestic
Section cover limit	\$1,500	\$1,500	\$1,500	No cover
Sub-limits: Daily limit	Please refer below for applicable daily sub-limit s			
Excess	Nil	Nil	Nil	No cover

This section cover limit applies to each insured person on **Duo cover** or is doubled for **Family cover**.

There's cover under this section if, during your cruise, you suffer an injury or sickness and the treating medical advisor onboard the cruise orders you to be confined to your cabin for more than 24 hours.

We'll pay up to the benefit limit and/or **sub-limits** for **your** selected plan as follows provided that the period of confinement is for at least 24 hours:

- For Single cover: \$100 per day.
- For **Duo cover**: \$100 per day for each insured person confined to their cabin.
- For **Family cover**: \$100 per day for each insured person confined to their cabin.

What you need to do

You need to provide us with written confirmation of the cabin confinement order from the treating medical advisor onboard the cruise.

We won't pay any claims, costs or losses under this section arising from or related to:

- a. when you cannot provide us with written confirmation of the cabin confinement order from the treating medical advisor onboard the cruise not meeting to our reasonable satisfaction, all the requirements that apply to you under 'You must do the following' unless we advise in writing that you don't need to.
- b. a COVID-19 event that occurs during a **cruise.**
- c. all 'General exclusions' on pages 25 to 28 apply to this section as well.

Motorcycle, moped and scooter pack

	Top Plus International	Basic International	Multi- Journey	Domestic
Additional premium required for cover	Yes	Yes	Yes	No cover

Cover for **your** participation in riding a **motorcycle**, **moped** or **scooter overseas** as a driver or passenger is not automatically included in **your policy**.

We'll pay claims related to you riding a motorcycle, moped or scooter as a driver or passenger during your overseas journey under the listed sections below if you pay the additional premium and the 'Motorcycle, moped and scooter pack' is listed on your certificate of insurance:

- Section 1: Overseas emergency medical and hospital expenses;
- Section 2: Emergency assistance; and
- Section 5: Additional expenses.

Conditions and limitations applying to cover:

 a. you must have purchased the 'Motorcycle, moped and scooter pack' at the time you bought your policy or before your departure date, and any appropriate additional premium must have been paid. The '**Motorcycle**, **moped** and **scooter** pack' must be listed on **your certificate of insurance**.

- b. if you are riding a motorcycle, moped or scooter overseas, you must hold a current Australian motorcycle licence valid for the class of motorcycle, moped or scooter and a licence valid for the country that you are riding in; or
- c. if you are travelling as a passenger on a motorcycle, moped or scooter overseas, the person that is in control of the motorcycle, moped or scooter must hold a current motorcycle licence valid for the country you are travelling in; and
- d. **you** must wear a helmet, even if **you** are a passenger.

- a. you not meeting to our reasonable
 satisfaction, all the requirements that apply
 to you under 'What you need to do' unless
 we advise in writing that you don't need to.
- b. personal liability under any circumstances. This means that you are responsible for paying for the damage to the motorcycle, moped or scooter or other two or threewheeled vehicle, any property damage or for an injury to another person.
- c. any **motorcycle**, **moped** or **scooter** riding as a driver or a passenger in Australia.
- all 'General exclusions' on pages 25 to 28 apply to this section as well.

Important matters Who is the insurer?

Tokio Marine & Nichido Fire Insurance Co., Ltd (Tokio Marine & Nichido) ABN 80 000 438 291 AFSL 246548 is the insurer and the issuer of this **policy**, and PDS. **Our** Australian Financial Services Licence (AFSL) authorises **us** to provide financial product advice about general insurance products, and to issue interests in general insurance products. **We** also have an Australian Prudential Regulation Authority (APRA) authorisation to conduct general insurance business in Australia.

Our managing agent and representative, Tokio Marine Management (Australasia) Pty. Ltd. ABN 69 001 488 455 (TMMA) is authorised under a binder and managing agent agreement to act on **our** behalf to issue **our** policies and handle and settle claims in relation to those policies, subject to the terms of the authority. As a representative and managing agent of Tokio Marine & Nichido, TMMA is also authorised to provide financial advice in relation to those policies. Tokio Marine & Nichido are responsible for the Product Disclosure Statement in this document.

The Financial Claims Scheme

You may be entitled to payment under the Federal Government's Financial Claims Scheme in the unlikely event that Tokio Marine & Nichido is not able to meet its obligations under the **policy**. Access to the scheme is subject to eligibility criteria. Information about the scheme can be obtained from the Australian Prudential Regulation Authority (APRA) website at <u>www.apra.gov.au</u> and the APRA hotline on 1300 55 88 49.

Who is CHI Travel Insurance and the providing entity?

CHI Travel Insurance (AR 269305), its employees and call centre staff, arrange the issue of the insurance to **you** as an authorised representative of Tokio Marine & Nichido, on behalf of the insurer. The CHI Travel Insurance contact details are provided on page 1.

The person who provides **you** with this PDS is the providing entity. The capacity in which they act is displayed in the '<u>Financial Services Guide'</u> on page 73.

Code of practice

Tokio Marine & Nichido (**we**, **us**, or **our** in this section) is a member of the Insurance Council of Australia and is also a signatory to the General Insurance Code of Practice (the Code). The objectives of the Code are to:

- Commit **us** to high standards of service;
- Promote better, more informed relations between insurers and their customers;
- Maintain and promote trust and consumer confidence in the general insurance industry;
- Provide fair and effective mechanisms for the resolving complaints you make about us; and
- Promote continuous improvement of the general insurance industry through education and training.

The Code Governance Committee (CGC) is the independent body that monitors and enforces **our** compliance with the Code. It also aims to drive better Code compliance, helping the insurance industry to improve its service to consumers.

For more information about the CGC, or to obtain a copy of the Code please visit www.insurancecode.org.au or phone 1800 931 678.

Both Tokio Marine & Nichido and CHI Travel Insurance are committed to following the Code standards.

How your premium is calculated

We'll let you know about any premium you must pay when you apply to buy or change your policy. If you disclose any Pre-existing medical conditions to us or make other changes to your policy such as increasing your trip duration after you buy your policy, we'll advise you of any additional premium you need to pay.

Your premium is based on the:

- plan and cover type **you** choose;
- number and ages of the travellers on your policy;
- destinations **you** are travelling to;
- length of your journey;

- duration of your pre-trip cancellation cover (the more cancellation cover you need and the longer the cancellation lead-time, the more it usually costs);
- your Pre-existing medical condition(s), if applicable, and
- any additional cover options **you** choose.

The premium also takes into account any obligation (actual or estimated) to pay any relevant charges, taxes or duties such as stamp duty and GST, if applicable.

How your claim payment is calculated

Factors that contribute to the calculation of the amount **we** will pay **you** for a claim include:

- the actual amount of the loss
- applying the various benefits and limits provided
- under the plan you have purchased
- less the excess you have nominated on your certificate of insurance, where applicable
- less any compensation, refund or credit you may have received from your pre-paid booking for your journey.

Privacy notice – how we protect your privacy

In this Privacy Notice the use of "**we**", "**our**" or "**us**" means Tokio Marine & Nichido, CHI Travel Insurance Pty Ltd (ATC), and its related companies, travel agents and representatives, unless specified otherwise.

Commitment to protect your privacy

We recognise that your privacy is very important to you and we are committed to ensuring the privacy of your personal information in accordance with our respective Privacy Policies and under applicable laws, including the Privacy Act 1988. This privacy notice should be read and considered in conjunction with our respective privacy policies as outlined below.

Why your personal information is

collected

To offer or provide **you** with **our** products and services (or those **we** may offer or provide to **you** on behalf of **our** business partners) **we** collect, store, use, and disclose **your** personal information including sensitive information for various purposes including:

- responding to your enquiries and providing you with information and assistance on your travel insurance options and your travel insurance requests;
- maintaining and administering our products and services (for example processing requests for quotes, applications for insurance, underwriting and pricing policies, issuing you with a policy, managing claims, processing payments);
- processing your survey or questionnaire responses including market research and the collection of general statistical information using common internet technologies such as cookies;
- providing you with marketing information regarding other products and services which are relevant and of interest (of ours or a third party);
- quality assurance and training purposes;
- performing administrative operations (including accounting and risk management) and any other purpose identified at the time of collecting your information.
- responding to your complaint or a dispute lodged with a dispute resolution scheme.

How your personal information is

collected

We collect your personal Information from you in various ways and at several different points, such as telephone conversations (including any form of mobile phone text messaging), our websites, electronic devices or communication and hard copy forms. We may also collect your personal information from other third parties such as:

- our distributors or referrers, agents, business partners and affiliates, other insurers or related companies;
- your travel consultant/agent, travel service providers, airlines, hotels, providers of transportation, providers of medical and nonmedical assistance and services;
- third parties for the purposes of assessing a claim or providing you with insurance cover or other services;
- another party involved in a claim;
- family members or anyone you have authorised to deal with us on your behalf;
- Insurance References Service (IRS) or other insurance reference bureau service by accessing the IRS database;
- any other organisation or person where you have consented to them providing your personal information to us or consented to us obtaining personal information from them.

If **you** provide personal information to **us** about another person **you** must only do so with their consent and agree to make them aware of this Privacy Notice.

Types of personal information we collect

The personal information **we** collect is based on the products and services **we** offer **you** or **you** use or apply for. Typically, the details **we** collect, and hold include **your** name, address, date of birth, email address, passport details, bank account details, as well as other information **we** collect through devices like 'cookies' when **you** visit **our** website such as **your** IP address and online preferences.

We will only collect 'sensitive information' such as your health/medical information where it is relevant to underwriting an insurance **policy**, to provide you with support during your journey, dealing with, managing, or processing a claim, assisting with or responding to a complaint or a dispute.

Who we disclose your personal

information to

In accordance with **our** Privacy **Policy**, **we** may share **your** personal information with other parties including but not limited to :

- our related companies, third party service providers;
- claims management providers;
- your travel consultant/agent, travel service providers, airlines, hotels, providers of transportation, providers of medical and nonmedical assistance and services or any travel companion with you on your trip;
- medical and health service providers;
- legal and other professional advisers;
- third parties for the purposes of assessing a claim or providing you with insurance cover or other services;
- other individuals who are travelling with you (regardless of whether they are insured under
- this policy);
- external disputes resolution scheme; or
- government departments or immigration service provider;
- IRS, a member-based organisation supporting Australian general insurance company members with understanding **policy** holder claims history, for the purpose of supporting claims management, claims investigation, loss assessment, fraud detection and risk underwriting

We may also need to disclose your personal information to government departments, immigration service providers, and for private health insurance providers to provide you with services or to assess your claims. Any of these persons may be located overseas, for example, in a country you will or have travelled. Our related companies and thirdparty service providers are located within Australia and in some instances may also be located overseas including but not limited to Japan, Australia, New Zealand, Thailand, United Kingdom, the United States of America and India. Additional parties and service provides that **we** may disclose personal information to are detailed in **our** respective Privacy **Policy** and may change from time to time.

Your consent

If you do not consent to us collecting, using or disclosing all or some of the personal information we request, we may not be able to provide you with our products or services such as processing your application for insurance, your claim or any payment due to you. It may also prevent us from maintaining or administering your policy, handling your complaint or resolving a dispute.

If **you** wish to withdraw **your** consent including for things such as receiving information on products and offers or **your** travel agent receiving personal information about **your policy** and coverage, please contact **us**. **Our** contact details are listed below.

More information

Our respective Privacy Policies contains information about how a person may access and seek correction of the personal information held by **us**, how **you** can complain to **us** about **our** breach of the applicable Australian Privacy Principles, and how **we** will deal with such a complaint.

To learn more about collection and use of **your** personal information, see **our** Privacy Policy, which can be viewed at **our** website <u>www.tokiomarine.com.au</u> or contact **us** on 1300 932 861. Alternatively, **you** can contact **us** at:

Tokio Marine & Nichido Fire and Insurance Co.

Attn: Privacy Officer Tokio Marine & Nichido Fire Insurance Co. Ltd.

GPO Box 4616 Sydney 2001 NSW

privacy@tokiomarine.com.au

CHI Travel Insurance www.chitravelinsurance.com.au P.O. Box 495, Mona Vale, NSW 2103 02 9979 8888

Complaints

If **you** need to make a complaint, **you** can do so over the phone or in writing. Get in touch with one of our customer service consultants about **your** concerns, and they'll do their best to resolve them straight away.

Call us on 1800 888 448 or +61 2 9979 8888 or visit <u>www.CHI Travel Insurance.com.au</u> for more options to get in touch.

If they are unable to resolve **your** complaint or if **you** are still not satisfied, **your** matter will be escalated to the Dispute Resolution Team who will review **your** complaint and provide **you** with a response. **Your** complaint will be reviewed by the relevant department manager or an employee with appropriate authority, knowledge and experience.

The person reviewing **your** complaint will be independent from the individual whose decision or conduct is the reason for **your** complaint. **You** will be provided with the contact details of the person looking after **your** complaint and **you** will be kept informed about the progress of **your** dispute at least every 10 business days.

If **you** are satisfied with the final decision, **your** complaint has been resolved. If the final decision does not resolve **your** complaint to **your** satisfaction, **you** are entitled to refer **your** complaint to the Australian Financial Complaints Authority (AFCA). AFCA is an independent external dispute resolution Scheme provided free of charge to **you**. The decisions made by AFCA are binding on **us** but not on **you**. **You** always have the option of seeking other solutions.

We further advise that the complaints process described above will not exceed 30 calendar days in total, unless we are unable to provide you with a final decision within 30 calendar days. If we are unable to provide you with a final decision within 30 calendar days, we will inform you before the end of that period of the reasons for the delay and your right to refer your complaint to AFCA, together with contact details for AFCA.

You can contact AFCA

Phone: 1800 931 678 Post: GPO Box 3 Melbourne VIC 3001 Website: <u>www.afca.org.au</u> Email: info@afca.org.au

Claims information

How to make a claim

You must let **us** know of **your** claim as soon as practicably possible after **your** return to Australia (unless otherwise stated in the **policy**) either by:

Web:

https://chi-onlineclaim.tmnfatravelinsurance.com.au Phone: 1300 852 071

- Email: <u>chiclaims@tmnfatravelinsurance.com.au</u>
- Mail: CHI Travel Insurance c/o TMNFA GPO Box 4616, Sydney NSW 2001

Providing us with the information we need, helps us to make timely and accurate decisions about your claim. When you contact us, we will let you know what you need to do and how the process will work. We will not be able to assess your claim unless you provide us with all the information we require. We can reduce your claim by the amount of any prejudice we have suffered due to any delay by you in submitting the required information. Full details should be submitted within 30 days of your return.

For all claims, **we** require: evidence of the claimable circumstance **you** are claiming for, including and not limited to; receipts, reports, proof of ownership, bank/credit card statements.

Any costs or expenses associated with obtaining these documents will be at **your** own cost.

If **you** cannot provide supporting documents for **your** claim, then **we** may reduce or refuse to pay **your** claim.

We may also refuse to pay a claim under this **policy** if **you** do not observe any of the conditions of this **policy**.

Examples of supporting documents required -

For Cancellation Fees and Loss Deposit claims:

- full itinerary
- travel invoices for all pre- booked costs being claimed
- written confirmation of any compensation or refund applicable or any credits being held by your transport or accommodation provider
- if you are claiming due to medical reasons, we will require a medical certificate from your medical advisor confirming unfit to travel and stating medical condition; we may also request a copy of your medical history
- if claiming due to the death or illness of a travelling companion or a relative, we will require a copy of the death certificate or a medical report/ certificate/history

 if you are claiming due to an accident, we require a supporting incident report such as a workplace/ police/ambulance report.

For Medical, Dental or Hospital claims:

- all medical and dental certificates and reports relevant to the claimed condition/illness
- we may also request a copy of your medical history
- proof of expenses incurred.

For Luggage or Personal Money claims:

- if lost or stolen, please report it immediately to police, obtain and retain a written report of the incident
- if damage or misplacement occurs caused by an airline or any other operator or provider of accommodation, please report the incident to an appropriate official.
- Obtain and retain a written report with any offer they might make for settlement
- proof of ownership e.g., receipts, bank statements, valuation certificates (issued prior to the date of loss)
- lost or stolen mobile phones –proof that your phone has been blocked and the IMEI blocked
- If the claim is for damaged items, **we** require proof of damage and repair report/invoice.

For Emergency Expenses or Travel Delay claims:

- documentation to substantiate the incident occurring e.g., loss report, medical report, police report, confirmation from Transport Provider confirming cause
- receipt for all additional expenses being claimed
- itinerary/invoices showing original pre-paid arrangements
- written confirmation of the actual delay and actual delay time.

You must not admit fault or liability

Do not admit any fault of liability to any claim under this **policy**. **You** must not promise or offer to pay any money or become involved in litigation without **our** authorisation.

Claims are payable in Australian dollars

We will pay all claims to you in Australian dollars. All conversions will be calculated using the Oanda rate at the time you incurred the expense. Alternatively, you can provide a copy of your credit card statement to show the conversion rate used by your bank for the expense.

Excess

If an **excess** applies to **your** claim, the **excess** will be deducted from **your** claim. An **excess** will apply to each and every claim incident or event.

Claims assessment

We will assess your claim within 10 business days of you notifying us and you providing us with all the necessary supporting documentation. If we need any additional information, a written notification or phone call will be made to you within 10 business days.

If you can claim from anyone else

If **you** can make a claim against someone else in relation to a loss or expense covered under this **policy you** must do so first. If they do not pay the full amount of **your** loss or expense for **your** claim, **we** will only make up the difference up to the **policy** limit.

Subrogation

If **you** are aware of any third party that **you** or **we** may recover money from, **you** must let **us** know.

We may, at our discretion and subject to applicable law, in your name and on your behalf, undertake, control and settle proceedings for our own benefit to recover compensation or secure indemnity from any party in respect of anything covered by this policy.

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

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

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** m**us**t pay **us** the amount of the claim **we** paid **you**.

Fraud

We will not pay if your claim is fraudulent.

Insurance fraud places additional costs on honest **policy** holders. Fraudulent claims contribute to the rise in insurance Premiums. **We** encourage the community to assist in the prevention of insurance fraud. **You** can help by reporting insurance fraud to **us** on 1300 852 071. All information will be treated as confidential and protected to the full extent of the law.

GST

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.

Sanctions

We will not provide any cover or pay any claims which if reimbursed or paid by us would result in us violating any applicable trade or economic sanctions or other such similar laws or regulations.

General advice

Any advice provided in this PDS is general only and does not take into account **your** individual needs, objectives or financial situation. **You** should carefully read this PDS before buying to decide if the product is right for **you**.

Updating the PDS

From time to time and where permitted by law, **we** may change parts of the **policy**. If **we** do so, any updates which aren't significantly unfavourable to **you** from the point of view of a reasonable person deciding whether to buy this insurance may be found on the CHI Travel Insurance website at <u>www.chitravelinsurance.com.au</u>

Should **we** substantially amend this PDS, we'll issue **you** a Supplementary Product Disclosure Statement (SPDS) which will provide details of these amendments. Should **you** wish to receive a paper copy of the latest PDS or any updates, please contact **us** on 1800 888 448, and **we'll** send **you** a copy free of charge.

Paperless correspondence

We prefer to communicate with you by email or other electronic channels. You are responsible for making sure you provide us with your correct and up to date email address. However, if you do not want to receive correspondence electronically, let us know.

We will consider any **policy** document we send to **you** electronically to have been received by **you** 24 hours from when we sent them.

Your certificate of insurance

The **certificate of insurance** is a part of **your policy** and is emailed to **you** when **you** buy a **policy**.

The **certificate of insurance** will, among other things, list the insured travellers and **dependents**, the type of **policy you** have bought, **your** destination and dates of travel, any additional cover **you** have chosen, the premium **you** have paid, and any changes to the standard terms and conditions that apply specifically to **you** or **your policy**.

Financial Services Guide

This Financial Services Guide (FSG) describes the products and services offered and distributed by CHI Travel Insurance Pty Ltd (CHI Travel Insurance) ABN 32 002 517 740 Authorised Representative No. 269305 of 10/9 Bungan Street, Mona Vale, New South Wales 2103 Telephone 1800 888 448 or 02 9979 8888.

The products disclosed in this FSG are provided by Tokio Marine Management (Australasia) Pty Ltd (TMMA) on behalf of Tokio Marine & Nichido (ABN 80 000 438 291) (AFSL No 246548) (Tokio Marine & Nichido) who is the product issuer.

CHI Travel Insurance is an authorised representative of Tokio Marine & Nichido.

The FSG explains:

- the products and services we provide on behalf of Tokio Marine & Nichido;
- the charges for such products and services; and
- other important information, such as our professional indemnity insurance arrangements and how any complaints you may have will be dealt with under our dispute resolution process.

The Product Disclosure Statement {PDS} for CHI Travel Insurance Travel Insurance is included with this document and sets out the significant benefits, features and characteristics of the cover and will assist **you** to compare and make an informed decision about whether to take out the insurance.

CHI Travel Insurance and their services in arranging your insurances

CHI Travel Insurance is authorised under a binder to deal in and provide general advice on travel insurance products underwritten by Tokio Marine. & Nichido. This means that CHI Travel Insurance has an authority from Tokio Marine. & Nichido to enter into policies on Tokio Marine. & Nichido's behalf. When providing any financial services in relation to the policy, the CHI Travel Insurance acts on behalf of Tokio Marine. & Nichido. They do not act on your behalf. Any advice provided by them is general advice only and does not take into account your personal objectives, financial situation or needs. You should read this document carefully to determine whether this product meets your needs. If you require personal advice, you need to obtain the services of a suitably qualified adviser. Tokio Marine

& Nichido can issue, vary, cancel, renew, and handle and settle claims under this **policy**.

How are we paid? CHI Travel Insurance may receive:

- an administration fee for the provision of certain services, such as providing a platform for the distribution of insurance products and performing Pre-existing medical condition assessments, which is calculated at 12% of premium (excluding statutory taxes and charges); and
- a commission which is calculated in a range of 5% to 30% the premium (excluding statutory taxes and charges);

from Tokio Marine. & Nichido for each **policy** arranged or issued by CHI Travel Insurance, either directly or via our network of travel agencies who have been appointed as Tokio Marine & Nichido's distributors or referrers in assisting **us** distribute this product as notified to **you** from time to time. Specifically, the commission amount set out above will be shared with such network of travel agencies and further information may be provided on request.

The commissions and administration fees are included in the premium **you** pay, which will be shown on **your certificate of insurance**.

Our employees may receive salaries and bonuses depending on the nature of their employment. Bonuses may be linked to general overall performance, including sales performance. If **you** require further details about any of the above remuneration received by us, please ask us.

Other Important Information

Professional Indemnity Insurance Arrangements In accordance with s912B of the Corporations Act, we maintain adequate Professional Indemnity Insurance. This insurance cover extends to claims in relation to us acting as an Authorised Representative of Tokio Marine. & Nichido and if our employees and representatives, past and present are negligent in providing financial services on behalf of Tokio Marine. & Nichido.

Dispute resolution

For information on CHI Travel Insurance's internal and external dispute resolution see "Complaints" in the PDS section.

Contact us

Sales and General Enquiries

CHI Travel Insurance Pty Ltd ABN 70 131 684 636 P.O. Box 495 Mona Vale NSW 2103 Phone: 1800 997 810 or +61 2 9997 4810 Email: sales@chitravelinsurance.com.au

Claims Enquiries

Phone: +61 2 8883 7801
Email: chiclaims@tmnfatravelinsurance.com.au
24 Hour Emergency Assistance Phone: +61 2 8055 1611 (reverse charges accepted from the overseas operator)



Issued by Tokio Marine & Nichido Fire Insurance Co., Ltd ABN 80 000 438 291 AFSL 246 548 Level 17, 60 Margaret Street Sydney NSW 2000



CHI Travel Insurance Pty. Ltd ABN 70 131 684 636 AR No. 327036