

Travel Insurance

Top Cover

Basic Cover

Domestic Cover

Australia



Table of contents

Product Disclosure Statement (PDS)	3-52
Welcome	3
The purpose of the Product Disclosure Statement (PDS)	3
About this cover	3
Contact us	5
The cover	4
Benefits table	4
Policy inclusions and options	6-9
Single Trip or Annual Multi-Trip	6
Areas of travel	6
Policy excess	6
Your belongings.....	6
Activities included in Your cover	7
Motorcycle/moped riding.....	8
Cruise cover	8
Snow skiing, snowboarding and snowmobiling	8
Extending Your Journey	9
Money back guarantee	9
Travel and health	10-12
Existing Medical Conditions	10
Health of other people impacting Your travel (non-traveller).....	11
Pregnancy	12
24 hour emergency assistance	12-13
Claims	13-14
Important information	15-22
Who is the insurer?.....	15
The Financial Claims Scheme.....	15
Who is Cover-More and the providing entity?.....	15
When and how benefits are provided.....	16
Additional policy information.....	16
Change of terms and conditions.....	16
Your duty of disclosure	17
General Insurance Code of Practice.....	17
The amount You pay for this insurance.....	17
How various factors affect the Amount Payable	18
Cancelling Your policy	18
How a claim settlement is calculated.....	18
We respect Your privacy.....	19
Resolving complaints	22
Policy Wording	23-52
Words with special meaning.....	23-27
Policy Conditions	27-30
The Benefits.....	31-50
General Exclusions.....	50-52
Financial Services Guide	54-55

Welcome

We know travel and we know it's about having an amazing experience, enjoying yourself even when you are hundreds of kilometres away from home. We are as enthusiastic about travel as you, but we know things don't always go to plan.

If the unexpected happens, you can relax and take comfort in knowing that should something go wrong, we have an experienced team available to help you, no matter what time of the day.

The purpose of the Product Disclosure Statement (PDS)

The PDS provides information to help You understand this travel insurance policy, compare cover and make an informed decision about whether to buy a policy.

Please read the PDS carefully to ensure it provides the cover You need. If You have any questions please contact Us.

The PDS details:

- the benefits – read these together with the options to vary cover;
- requirements if You have an Existing Medical Condition or are pregnant;
- if You are booking a multi-night cruise, the Cruise cover required;
- obligations in relation to Your duty of disclosure;
- definitions of 'Words with special meaning' where they are used in the policy; and
- what is and isn't covered.

When You purchase a policy, keep a copy of this PDS and the Certificate of Insurance we'll give You in a safe place for future reference.

About this cover

This policy is available to:

- residents of Australia.
- residents of Fiji, Vanuatu or Samoa travelling to and within Australia only on the Top Cover Single Trip Plan. Please refer to the heading "Residents Fiji, Vanuatu or Samoa" in the Policy Conditions section of this document as additional terms will apply to Your policy.

For full details of the terms and conditions of the cover offered, make sure You read all sections of this document which will help You understand the policy and provide You with information to make an informed decision about whether this insurance is suitable for You.

The cover

Benefits table

Below is a summary of the benefits We provide and their maximum limits. Please refer to the Policy wording for full details on the cover provided.

Policy benefits	
1*	Overseas Medical and Dental Expenses - Overseas Dental Expenses \$2,000
	Health related emergency accommodation and transport
2*	Emergency Accommodation and Transport
3*	Amendment or Cancellation Costs
4*	Luggage and Personal Effects
5	Travel Documents
6	Delayed Luggage Allowance
7	Money
8	Rental Car Insurance Excess
9*	Travel Delay
10	Resumption of Journey
11	Special Events
12*	Hospital Incidentals
13*	Loss of Income
14*	Disability
15*	Accidental Death
16	Personal Liability
Cruise Cover	
Motorcycle/Moped riding	
Snow skiing, snowboarding and snowmobiling	

~Medical and dental cover and related expenses will not exceed 12 months from the onset of the illness or injury.

^Maximum liability collectively for Sections 13, 14 and 15 is \$25,000 on Top Cover.

Contact us

Customer Service and Claims

Call: 1300 135 769

International Top Cover	International Basic Cover	Domestic Cover
Single Trip or Annual Multi-Trip	Single Trip	Single Trip or Annual Multi-Trip
Limit per adult	Limit per adult	Limit per adult
\$Unlimited~	\$Unlimited~	-
\$50,000	\$50,000	} \$50,000
\$Unlimited	\$5,000	
\$15,000	\$5,000	\$5,000
\$5,000	-	-
\$250	\$250	-
\$500	-	-
\$6,000	\$1,500	\$3,000
\$2,000	\$1,000	-
\$3,000	-	\$3,000
\$5,000	-	-
\$8,000	-	-
\$10,400^	-	-
\$25,000^	-	-
\$25,000^	-	\$25,000
\$5,000,000	\$5,000,000	\$5,000,000
Yes**	No	No
Yes**	No	No
Yes**	No	No

*Sub-limits apply. Refer to the Policy Wording.

**See page 8 for details.

Policy inclusions and options

Single Trip or Annual Multi-Trip

You can choose a policy to cover one Single Trip or, if You are a frequent traveller, rather than buying a Single Trip policy each time You travel, You may want to buy an Annual Multi-Trip policy.

With Our Annual Multi-Trip policy You can select from the available choices, a Journey duration to suit Your needs and be covered for an unlimited number of Journeys more than 250 km from Home during the Period of Insurance.

Inbound travellers can purchase a Single Trip policy only.

Areas of travel

Where You travel will influence Your premium.

Single Trip: You will need to choose the main destination based on where You will spend the most time on Your Journey.

Annual Multi-Trip: You will need to choose the area which will cover all of Your trips for the year. If You select an international area, this also includes cover for travel in Australia.

Note: If 20% or more of any Journey will be spent in the Americas or Africa You must nominate the area including these countries as the main destination.

Policy excess

You can choose Your excess. The higher the excess You choose, the lower the premium. Your excess will be shown on Your Certificate of Insurance and only applies in the event of a claim.

Your belongings

When You're at Home, You look after Your belongings. When You travel it should be no different. Unfortunately, many claims We see for loss or theft are caused by people being careless with their belongings. If You do not take good care of Your belongings We may not be able to pay Your claim. Not all belongings are covered by the policy.

What does this mean?

- Keep Valuables with You (where security regulations allow You to do so) rather than checking them in with the Transport Provider.
- Do not leave Valuables in a motor vehicle at any time.

“Valuables” means articles made of or containing gold, silver or precious metals; binoculars; jewellery; mobile phones; photographic, audio, video, tablet computer, computer and electrical equipment of any kind (including but not limited to devices such as drones, computer games, portable navigation equipment or media); precious stones; smart phones; telescopes and watches.

- A maximum limit of \$2,000 applies to all other items (i.e. not Valuables) left in a locked motor vehicle as long as they are in a Concealed Storage Compartment. Also, don't leave items in a motor vehicle overnight as they are not covered.
- Report any loss or theft to the police within 24 hours as an original police report is required for any claim involving loss or theft.
- Additionally, We require the relevant report from the related party. For example, an Airline Property Irregularity Report (PIR) is also required if Your items were lost or stolen when travelling with an airline.

Luggage item limits

The following limits apply to any one item, set or pair of items (including attached and unattached accessories), up to the following limits, after taking into account reasonable depreciation. See pages 38-39 for depreciation rates and an example of how a claim is worked out.

	Cameras and video cameras	Laptop and tablet computers (including iPads)	Mobile phones and smart phones	Other items
All Plans	\$3,000	\$3,000	\$1,000	\$750

Activities included in Your cover

Your policy includes cover for participation in any of the following activities whilst on Your Journey:

- abseiling
- archery
- ballooning
- bungee jumping
- flying fox
- horse riding
- jet boating
- jet skiing
- kayaking
- paragliding
- parasailing
- snorkelling
- surfing
- trekking
- white water rafting
- working holidays

Participation in all activities is subject to the ordinary terms of cover and in particular General Exclusions 23-27 on page 52 and SECTION 16: Personal liability exclusion 3 and 4 on page 49.

Motorcycle/moped riding

Available with Top Cover Plan only

Riding a motorcycle (including a moped) as the driver or pillion passenger during Your Journey is included in Your policy however, You will only be covered if:

- while in control of a motorcycle or moped You hold a valid Australian motorcycle rider's licence or Australian motor vehicle driver's licence, and You hold a licence valid in the relevant country;
- while You are a pillion passenger the driver must hold a licence valid in the relevant country;
- the engine capacity is 250cc or less;
- You are wearing a helmet;
- You are not participating in a Professional capacity; and
- You are not racing.

Note: No cover will apply under SECTION 16: Personal liability. This means You are responsible to pay costs associated with damage to the motorcycle, moped or property or injury to another person.

Cruise cover

Available with Top Cover Plan only

Claims directly or indirectly for or related to Your cruise, and cruise travel or that arise whilst on a cruise are specifically excluded from this policy unless You have purchased the Top Cover Plan.

Snow skiing, snowboarding and snowmobiling

Available with Top Cover Plan only

Participation in these activities is included in Your policy during Your Journey however, You will only be covered if:

- You are skiing or snowboarding On-Piste;
- You are not racing; and
- You are not participating in a Professional capacity.

Extending Your Journey

If You are travelling and wish to be insured for longer than the original period shown on Your original Certificate of Insurance, You need to purchase a new policy by calling or emailing Cover-More prior to the expiry date. It is not an extension of the previous policy. Your Certificate of Insurance will be adjusted with the new dates.

Please note:

- Should a medical condition present itself before the new policy is issued, it may be considered an Existing Medical Condition under a new policy. Therefore it may not be covered by the new policy. Purchasing a longer duration up front may avoid this risk. Restrictions on duration apply.

For example, the maximum overall period for Worldwide cover is 12 months in total.

- If You can't return Home on Your original date due to an unforeseeable circumstance outside Your control, the policy will automatically extend - See policy condition 10. Free extension of insurance on page 29 for details.

Money back guarantee

Should You cancel this policy for any reason within the cooling off period which is within 14 days (excluding public holidays) of the date of purchase, We will give You Your money back.

Our money back guarantee ensures a refund of the entire premium unless You have already:

- made a claim under the policy; or
- departed on Your Journey.

Should You wish to cancel Your policy and receive a full refund, please call Cover-More on 1300 135 769 within the cooling off period.

Travel and health

Existing Medical Conditions

If You have an Existing Medical Condition You may purchase a policy however, there is no cover under this policy for any claim arising from or exacerbated by Your or Your travelling companion's Existing Medical Condition.

What is an Existing Medical Condition?

“Existing Medical Condition” means a disease, illness, medical or dental condition or physical defect that at the time the policy was issued meets any one of the following:

- a) has required an emergency department visit, hospitalisation or day surgery procedure within the last two years;
- b) requires
 - (i) prescription medication from a qualified medical practitioner or dentist;
 - (ii) regular review or check-ups;
 - (iii) ongoing medication for treatment or risk factor control;
 - (iv) consultation with a specialist;
- c) has
 - (i) been medically documented involving the brain, circulatory system, heart, kidneys, liver, respiratory system or cancer;
 - (ii) required surgery involving the abdomen, back, joints or spine;
 - (iii) shown symptoms or signs however, a medical opinion or investigation has not been sought to confirm or provide a diagnosis;
- d) is
 - (i) chronic or ongoing (whether chronic or otherwise) and medically documented;
 - (ii) under investigation;
 - (iii) pending diagnosis;
 - (iv) pending test results; or
- e) is pregnancy or is connected with a current pregnancy or participation in a medically assisted fertility treatment program e.g. using assisted fertility treatment including hormone therapies or IVF.

“Relevant Time” in respect of:

- a) Single Trip policies means the time of issue of the policy.

- b) Annual Multi-Trip policies means the first time at which any part of the relevant trip is paid for or the time at which the policy is issued, whichever occurs last.

If You are unsure whether You have an Existing Medical Condition, please call Cover-More on 1300 135 769 for assistance.

Health of other people in impacting your travel (non-traveller)

When booking a trip and buying travel insurance please carefully consider the health of loved ones not travelling with You.

We will only consider claims arising from the death or sudden disabling injury, sickness or disease of a Relative or Your business partner who is not travelling, if:

- that person lives in Australia or New Zealand and at the time the policy was issued that person was less than 85 years of age;
- it was medically necessary for You to amend or cancel Your Journey to assist that person; and
- at the Relevant Time that person:
 - in the last two years, had not been hospitalised (including day surgery or emergency department attendance) for a condition that was directly or indirectly caused by, arising from, or exacerbated by, the condition that gave rise to the claim;
 - was not residing in a facility such as a nursing home, an aged care facility, a residential aged care home, a high and/or low care facility, a privately owned accommodation facility such as Supported Residential Services or Facilities (SRS/SRF) or, a residential care facility as defined under the Aged Care Act 1997 (Cth) (or any subsequent amendment, or amendment legislation, to it. This applies whether the person is in Australia or New Zealand);
 - resides independently at home or in a retirement home or village, including independent living arrangements, and they did not require home care or flexible care services as defined under the Aged Care Act 1997 (Cth) (or any subsequent amendment, or amendment legislation, to it. This also applies whether the person is in Australia or New Zealand);
 - was not on a waiting list for, or did not know they needed surgery, inpatient treatment or tests at a hospital or clinic;
 - did not have a drug or alcohol addiction; and
 - did not have a Terminal Illness.

A claim caused by the health of someone who is not a Relative or Your business partner or anyone living outside Australia or New Zealand is not covered by the policy.

Pregnancy

The following restrictions apply to all pregnancies and any claim arising from pregnancy:

- No cover is available for pregnancy.
- No cover is provided for childbirth or the health of a newborn child, irrespective of the stage of pregnancy at which the child is born.

Expectant mothers should therefore consider whether they travel and buy this policy, particularly if travelling beyond the 20th week of pregnancy.

For assistance, please call Cover-More on 1300 135 769.

24 hour emergency assistance

All policyholders have access to Our emergency assistance team when travelling.

24 hours a day, 365 days a year, Our team of doctors, nurses, case managers and travel agents provide the following services:

- **Help to find a medical facility and monitor Your medical care**
- **Paying bills** - Becoming ill overseas can be very expensive so those significant medical expenses can be paid by Us directly to the hospital if Your claim is approved.
- **Keeping You travelling or getting You Home** - Our team can decide if and when it is appropriate to move You or bring You Home and will coordinate the entire exercise.
- **Help if passports, travel documents or credit cards are lost** - If You need assistance in contacting the issuer of the document, Our emergency assistance team can help.
- **Help to change travel plans** - If Your travel consultant is not available to assist with rescheduling in an emergency, Our team can help.

Certain services are subject to Your claim being approved.

You must phone Our emergency assistance team as soon as possible if You are admitted to hospital or if You anticipate Your medical or related expenses will exceed \$500.

When You call, please have the following information:

- Your policy number; and
- A phone number to call You back on.

Please call DIRECT and TOLL FREE from:

USA 1866 893 9316

Canada 1866 773 9316

UK 0808 5893 628

NZ 0800 498 233

Charges may apply if calling from a pay phone or mobile phone.

From all other countries or if You are experiencing difficulties with one of the numbers above, please use the following numbers:

Call: +61 2 8907 5947

Fax: (02) 9954 6250

Claims

How to make a claim

Complete an online claim

Visit claims.covermore.com.au/travelclaims and follow the prompts; or

Fill in a claim form

Download, print and complete a claim form from virginaustralia.covermore.com.au.

Add receipts and other supporting documents

Follow the checklist for the supporting documents You need to send with Your completed claim.

Submit the claim online or post it

Upload Your scanned documents and submit the claim online; or

Post the completed claim form and original supporting documents to:

Cover-More Travel Insurance Claims Department

Mail: Private Bag 913

North Sydney NSW 2059 Australia

Email: claims_processing@covermore.com.au

We need original documents, so please hold on to Your documents as We may request them. If You are posting them, keep a copy.

For further assistance:

Call: 1300 135 769 or +61 2 8907 5038.

When will I hear back about the claim?

We try to process claims as quickly as possible.

We may approve and settle, investigate or decline the claim or request further information. In any case, You will hear back within 10 working days from the time We receive Your claim or each time We receive further information on it.

When You book a trip, You expect to be going on it.

Travel insurance is designed to protect You from the unforeseen and the unexpected.

Sometimes things happen before You even depart—unavoidable things that mean You need to amend or even cancel Your trip.

And because We believe that travel insurance policies should be clear and readily understood, here are some general points on how to make sure You can provide Us with the documents We require if You need to cancel Your trip and make a claim for cancellation or early return costs.

For all health related claims, We will always need the patient's usual GP to complete Our claim form medical certificate and certify unfitness to travel or the need to look after someone.

For a new mental health condition, in addition to the above, referral to and a diagnosis made by a Registered Psychologist or Psychiatrist is required. We're not saying the GP can't be the first port-of-call but We need specialist certification of unfitness to travel or the need to look after someone. It's the same type of thing as having a heart condition where the GP would refer to a heart specialist.

Important information

Who is the insurer?

ZAIL is part of the Zurich Insurance Group, a leading multi-line insurer that serves its customers in global and local markets. Zurich provides a wide range of general insurance and life insurance products and services in more than 210 countries and territories. Zurich's customers include individuals, small businesses, and mid-sized and large companies, including multinational corporations. ZAIL's contact details are:

Mail: Zurich Australian Insurance Limited
PO Box 677, North Sydney NSW 2059

The Financial Claims Scheme

If the insurer becomes insolvent, You may be entitled to payment under the Financial Claims Scheme (FCS). Access to the FCS is subject to eligibility criteria. Please visit www.fcs.gov.au for information.

Who is Cover-More and the providing entity?

Cover-More Insurance Services Pty Ltd ABN 95 003 114 145, AFSL 241713 (Cover-More) administers the policy (including customer service, medical assessments and claims management) and will usually arrange for the issue of the insurance, either directly or through the appointment of distributors or authorised representatives.

The person who provides You with this PDS is the providing entity. The capacity in which they act is displayed in the Financial Services Guide on pages 54-55 of this booklet.

When and how benefits are provided

The benefits for which You are insured under this policy are payable:

- when an insured event occurs during the Period Of Insurance causing You to suffer loss or damage or incur legal liability; and
- Your claim is accepted by Us.

After calculating the amount payable We will either:

- pay for replacement (after allowing for depreciation) or repair of Your personal items;
- pay for specified Additional expenses;
- pay the person to whom You are legally liable; or
- pay You.

Additional policy information

The insurance We offer You is set out in the PDS and Policy Wording. It is important that You:

- are aware of the limits on the cover provided and the amounts We will pay You (including any excess that applies);
- are aware of the “Words with special meaning” found in the Policy Wording pages 23-27;
- are aware of the maximum benefit limits shown in the “Benefits table” on pages 4-5; and
- are aware of the Policy Conditions and General Exclusions found in the Policy Wording pages 27-53.

Change of terms and conditions

From time to time and where permitted by law, We may change parts of the Combined FSG/PDS. We will issue You with a new Combined FSG/PDS or a Supplementary FSG or PDS or other compliant document to update the relevant information except in limited cases. Any updates which are not materially adverse to You from the view of a reasonable person deciding whether to buy this insurance, may be found on covermore.com.au. You can obtain a paper copy of any updated information without charge by calling 1300 135 769.

Your duty of disclosure

Before You enter into this contract of insurance, You have a duty of disclosure under the Insurance Contracts Act 1984 (Cth). The duty applies until (as applicable) We first enter into the policy with You, or We agree to a variation, extension or reinstatement with You.

Answering Our questions

In all cases, if We ask You questions that are relevant to Our decision to insure You and on what terms, You must tell Us anything that You know and that a reasonable person in the circumstances would include in answering the questions.

It is important that You understand You are answering Our questions in this way for Yourself and anyone else that You want to be covered by the contract.

Variations, extensions and reinstatements

For variations, extensions and reinstatements You have a broader duty to tell Us anything that You know, or could reasonably be expected to know, may affect Our decision to insure You and on what terms.

If You do not tell Us something

If You do not tell Us anything You are required to tell Us, We may cancel Your contract or reduce the amount We will pay You if You make a claim, or both.

If Your failure to tell Us is fraudulent, We may refuse to pay a claim and treat the contract as if it never existed.

General Insurance Code of Practice

We are signatories to the General Insurance Code of Practice (Code), which was developed by the Insurance Council of Australia to further raise standards of practice and service across the insurance industry. To obtain more information on the Code and the rights You may have under it please contact Us or visit codeofpractice.com.au.

The amount You pay for this insurance

You can obtain a quote from the providing entity. The amount We charge You for this insurance policy is the total amount of the premium that We calculate to cover the risk and any relevant government charges (such as Goods and Services Tax (GST) and stamp duty). These amounts add up to the total amount You must pay.

Once the policy is issued Your total premium and any relevant government charges are shown on the Certificate of Insurance.

If You wish to change Your policy in any way please contact us.

How various factors affect the Amount Payable

We consider a number of factors in calculating the total Amount Payable. The following is a guide on these key factors, how they combine and how they may impact the assessment of risk and therefore Your premium.

- **Plan** – the International plan, which provides more cover, costs more than the Domestic plan.
- **Area** – higher risk areas cost more.
- **Age** – higher risk age groups cost more.
- **Duration** – the longer Your trip the more it usually costs.

Cancelling Your policy

If You cancel Your policy within a cooling-off period of 14 days after You are issued Your Certificate of Insurance, You will be given a full refund of the premium You paid, provided You have not started Your Journey or You do not want to make a claim or exercise any other right under Your cover.

After this period You can still cancel Your policy. We will refund to You a proportion of the premium for the unexpired period of cover (less any non-refundable government charges and taxes that We have paid and are not recoverable). You are not entitled to a refund if You have started Your Journey, You want to make a claim, or exercise any other right under Your cover.

To cancel Your cover please contact Cover-More by calling 1300 135 769 (within Australia) or +61 2 8907 5038 (from overseas), or email enquiries@covermore.com.au.

How a claim settlement is calculated

When We pay a claim We consider a number of aspects in calculating the amount. These can include:

- the amount of loss or damage or liability;
- the excess;
- maximum benefit limits and sub-limits;
- reasonable depreciation; and
- the terms and conditions of the policy.

The following example illustrates how We will calculate claim settlement:

- Your new camera with an original purchase price of \$3,500 is stolen from a hotel room.
- You have purchased Top Cover with an excess of \$100.

The amount payable following the claim would be calculated as follows:

- consider the value of the camera – \$3,500 (no depreciation applies because the camera was new).

- consider the maximum benefit limit for Luggage and Personal Effects – \$15,000.
- consider the maximum item limit – \$3,000. The item limit does apply in this case.
- the \$100 excess is applied. This results in an amount payable of \$2,900, or We may choose to replace the item through a supplier of Our choice.

We respect Your privacy

In this Privacy Notice the use of “we”, “our” or “us” means Cover-More and the insurer, unless specified otherwise.

Why Your personal information is collected

We collect Your personal information (including sensitive information) for the purposes of:

- identifying You and conducting necessary checks;
- determining what services or products we can provide to You and/or others;
- issuing, managing and administering services and products provided to You and/or others including claims investigation, handling and payment; and
- improving services and products e.g. training and development of representatives, product and service research, data analysis and business strategy development.

Cover-More also collects Your personal information for the purpose of providing special offers of other services and products that might be of interest to You.

How Your personal information is collected

We may collect Your personal information through websites from data You, or Your travel consultant, input directly or through cookies and other web analytic tools, via email, by fax, by telephone or in writing.

We collect personal information directly from You unless:

- You have consented to collection from someone else;
- it is unreasonable or impracticable for us to do so; or
- the law permits us to collect from someone else.

We also collect additional personal information from other third parties to provide You with our services and products.

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.

Who we disclose Your personal information to

We may disclose Your personal information to other parties and service providers for the purposes noted above.

The other parties and service providers include:

- insurers and reinsurers;
- medical providers, travel providers and Your travel consultant;
- our lawyers and other professional advisers;
- our related companies and other representatives or contractors who we have hired to provide services or to monitor the services provided by us or our agents, our products or operations; and/or
- other parties we may be able to claim or recover against or other parties where permitted or required by law.

Additional parties and service providers are detailed in the Cover-More Privacy Policy and the insurer's Privacy Statement. The contractual arrangements that we have in place with these parties and service providers generally include an obligation for them to comply with Australian privacy laws.

We may need to disclose personal information about You to other parties and service providers, some of whom may be located in overseas countries. Who they are may change from time to time.

Generally these recipients will be located in the overseas countries You travelled to over the duration of Your policy and Your claim. These recipients would usually be service providers, such as medical providers, providers of travel related services, investigators, assessors and facilitators or our related entities that carry out services on our behalf in relation to Your policy and Your claim. Further details of these types of recipients are set out in the Cover-More Privacy Policy and the insurer's Privacy Statement.

We may not always be able to take reasonable steps to ensure that these recipients comply with the Privacy Act.

Some of the countries where these recipients are based may not offer the same protection or obligations that are offered by the Act in Australia. By acquiring the services and products from us You agree that You may not be able to seek redress under the Act, or from us and/or from the recipients in overseas countries, or to the extent permitted by law.

You and any other traveller included on the policy consent to these uses and disclosures unless You tell Cover-More, using the contact details following.

Your choices

If You choose not to provide Your personal information and/or choose not to consent and/or withdraw Your consent to the use and disclosure of Your personal information set out in this Privacy Notice at any stage, we may not be able to provide our services or products or manage and administer services and products to You and/or others.

If You wish to withdraw Your consent including for things such as receiving information on products and offers or Your travel consultant receiving personal information about Your policy and coverage, please contact Cover-More on 1300 135 769.

More information

For more information about how Your personal information is collected, used or disclosed, how to access or seek correction to Your personal information or how to make a complaint and how such a complaint will be handled, please contact us or refer to the relevant website.

Cover-More Privacy Officer

Cover-More Insurance Services Pty Ltd

Mail: Private Bag 913, North Sydney NSW 2059 Australia

Email: privacy.officer@covermore.com.au

Call: 1300 131 746

Website: virginaustralia.covermore.com.au

ZAIL Privacy Officer

Zurich Australian Insurance Limited

Mail: PO Box 677, North Sydney NSW 2059

Email: privacy.officer@zurich.com.au

Call: 132 687

Website: www.zurich.com.au/important-information/privacy

Resolving complaints

We and Cover-More are committed to resolving any complaint or dispute fairly.

If You think we have let You down in any way, or our service is not what You expect (even if through one of our representatives), please let us know. We will put You in contact with someone who can help to resolve the complaint. You can talk over the phone, email or write:

- Call Cover-More on 300 135 769
- Write to the Customer Relations Manager

Post: Private Bag 913, North Sydney NSW 2059

Email: customerrelations@covermore.com.au

We will attempt to resolve the matter in accordance with our Internal Dispute Resolution process. To obtain a copy of our procedures, please contact us.

A dispute can be referred to the Australian Financial Complaints Authority (AFCA), subject to the AFCA Rules.

Its services are independent and free to You and We are bound by determinations made by it in accordance with its terms of reference.

Australian Financial Complaints Authority

Call: 1800 931 678

Mail: GPO Box 3, Melbourne VIC 3001

Email: info@afca.org.au

Website: afca.org.au

Policy Wording

The benefits described in this policy wording should be read in conjunction with the Benefits (pages 4-5), Policy inclusions and options (pages 6-9), Travel and health (pages 10-12), Your duty of disclosure (page 17), Words with special meaning (pages 23-27), Policy conditions (pages 27-30) and General exclusions (pages 50-53).

THIS POLICY IS NOT VALID UNLESS THE CERTIFICATE OF INSURANCE IS ISSUED TO YOU.

We will give You the insurance cover described in this policy in return for receiving the total Amount Payable.

It is a condition of this policy that:

- You are not aware of any circumstance which is likely to give rise to a claim;
- You are a resident of Australia; or a resident of Fiji, Vanuatu or Samoa travelling to and within Australia on the Top Cover Single Trip Plan; and will be returning to Your Home at the completion of the Period Of Insurance and within 12 months of the Journey commencing.
- If You purchase an Annual Multi-Trip Policy, cover will only extend to a Journey that involves travel to a destination which is more than 250 km from Home and a maximum trip duration applies as shown on Your Certificate of Insurance.

Words with special meaning

In this PDS the following words have the meanings shown below. The use of the singular shall also include the use of the plural and vice versa:

“We”, “Our”, “Us” means Zurich Australian Insurance Limited (ZAIL).

“You”, “Your”, “Yourself” means the people listed as adults on the Certificate of Insurance and includes Accompanied Children. Where more than one person is listed as an adult on the Certificate of Insurance all benefits, limitations, conditions and exclusions will be interpreted as if a separate policy was issued to each of the persons listed other than:

- a) in the event a claim arising from the one event is made, an excess (if applicable) will only be applied once;
- b) in the case of luggage item limits which shall be as per a single policy.

In respect of organised groups, each child not travelling with their usual guardian must purchase a separate policy.

“Accompanied Children” means Your children or grandchildren who are identified on the Certificate of Insurance and travelling with You on the Journey, provided they are not in full-time employment, they are financially dependent on You and they are under the age of 21 years.

“Act Of Terrorism” means an act including, but not limited to, the use of force or violence, of any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organisation(s) or government(s), which from its nature or context is done for, or in connection with, political, religious, ideological, ethnic or similar purposes or reasons, including the intention to influence any government and/or to put the public, or any section of the public, in fear.

“Additional” means the cost of the accommodation or transport You actually use less the cost of the accommodation or transport You expected to use had the Journey proceeded as planned.

“Amount Payable” means the total amount payable shown on Your Certificate of Insurance.

“Concealed Storage Compartment” means a boot, trunk, glove box, enclosed centre console, or concealed cargo area of a motor vehicle.

“Disabling Injury, Sickness or Disease” means a disabling injury, sickness or disease which first shows itself during the Period Of Insurance and which requires immediate treatment by a qualified medical practitioner.

“Epidemic” means a fast-spreading contagious or infectious disease or illness in an area as documented by a recognised public health authority.

“Existing Medical Condition” means a disease, illness, medical or dental condition or physical defect that at the time the policy was issued meets any one of the following:

- a) has required an emergency department visit, hospitalisation or day surgery procedure within the last two years;
- b) requires
 - (i) prescription medication from a qualified medical practitioner or dentist;
 - (ii) regular review or check-ups;
 - (iii) ongoing medication for treatment or risk factor control;
 - (iv) consultation with a specialist;
- c) has
 - (i) been medically documented involving the brain, circulatory system, heart, kidneys, liver, respiratory system or cancer;

- (ii) required surgery involving the abdomen, back, joints or spine;
 - (iii) shown symptoms or signs however, a medical opinion or investigation has not been sought to confirm or provide a diagnosis;
- d) is
- (i) chronic or ongoing (whether chronic or otherwise) and medically documented;
 - (ii) under investigation;
 - (iii) pending diagnosis;
 - (iv) pending test results; or
- e) is pregnancy or is connected with a current pregnancy or participation in a medically assisted fertility treatment program e.g. using assisted fertility treatment including hormone therapies or IVF.

“Home” means Your usual place of residence in Australia.

“Insolvency” means bankruptcy, provisional liquidation, liquidation, insolvency, appointment of a receiver or administrator, entry into a scheme of arrangement, statutory protection, presentation of a petition for the compulsory winding up of, stopping the payment of debts or the happening of anything of a similar nature under the laws of any jurisdiction.

“International Waters” means waters outside the jurisdiction territory of any country.

“Journey” means the period commencing at the time You leave Home and ceasing at the time You return to Home.

“Limb” means a hand at or above the wrist or a foot at or above the ankle.

“On-Piste” means a marked trail or slope prepared for the purpose of skiing or snowboarding within the boundary of the ski field or ski resort and used in accordance to any regulations published by the ski field or ski resort.

“Pandemic” means an Epidemic that is expected to affect an unusually large number of people or involves an extensive geographic area.

“Period Of Insurance” means:

- a) In respect of Single Trip Policies from the time You commence the Journey or the travel start date shown on Your Certificate of Insurance (whichever is later) until the time You complete the Journey or the travel end date shown on Your Certificate of Insurance (whichever is the earlier).
- b) In respect of Annual Multi-Trip Policies from the time You commence each Journey or the travel start date shown on Your Certificate of Insurance (whichever occurs last) until the earliest of the following times:

- (i) the time that You complete the Journey; or
- (ii) the expiry of the maximum insured duration per Journey (this maximum duration is shown on Your Certificate of Insurance); or
- (iii) 12 months from the travel start date shown on Your Certificate of Insurance.

Cover under SECTION 3: Amendment or Cancellation Costs begins from the time the policy is issued. The dates on Your Certificate of Insurance can only be changed with Our consent. In respect of SECTION 10: Resumption of Journey, cover is suspended while You are in Australia and will recommence once You resume the Journey, subject to the original expiry date.

“Permanent” means a period of time lasting 12 consecutive months after the expiry of which We consider there is no reasonable prospect of improvement.

“Professional” means undertaking any activity for which financial payment (an appearance fee, wage, salary or prize money in excess of \$1,000) is received or eligible to be received from another person or party.

“Public Place” means any place the public has access to including but not limited to airports, beaches, hotel foyers and grounds, ports, private car parks, restaurants, shops and streets.

“Registered Psychologist or Psychiatrist” means a psychologist or psychiatrist 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 jurisdiction in which You seek medical assistance.

“Relative” means a person who is Your spouse, de facto; parent, parent-in-law, stepparent, guardian; grandparent; child, foster child, grandchild; brother, brother-in-law, half-brother, stepbrother, sister, sister-in-law, half-sister, stepsister; daughter, daughter-in-law, stepdaughter, son, son-in-law, stepson; fiancé, fiancée; first cousin; uncle, aunt; or niece, nephew.

“Relevant Time” in respect of:

- a) Single Trip policies means the time of issue of the policy.
- b) Annual Multi-Trip policies means the first time at which any part of the relevant trip is paid for or the time at which the policy is issued, whichever occurs last.

“Rental Car” means a rented sedan, campervan, hatchback or station-wagon (including 4WDs) rented from a licensed motor vehicle rental company.

“Terminal Illness” means a medical condition for which a terminal prognosis has been given by a qualified medical practitioner and which is likely to result in death.

“Transport Provider” means a properly licensed coach operator, airline, shipping line or railway company.

“Valuables” means articles made of or containing gold, silver or precious metals; binoculars; jewellery; mobile phones; photographic, audio, video, tablet computer, computer and electrical equipment of any kind (including but not limited to devices such as drones, computer games, portable navigation equipment or media); precious stones; smart phones; telescopes and watches.

Policy Conditions

1. Excess

The excess is the first amount of a claim which We will not pay for.

The excess applies to any claim arising from a separate event in respect of Sections 1, 2, 3, 4, 5, 10 and 11 of the policy only. The excess is the amount shown on Your Certificate of Insurance.

Claim example: You have a \$100 excess on Your policy. If You made a claim for \$2,500 under Section 1: Overseas Medical and Dental, You already paid the expenses and We approve Your claim, We would deduct the \$100 excess from the claim before We paid You. If, via Our emergency assistance team, We approved a claim directly with an overseas medical provider, We will ask You to pay the \$100 excess directly to the provider at the time or request You to pay it to Us before We can finalise Your claim with the provider. In any event, the total claim We pay is \$2,400.

2. Sections of the policy applicable to each plan

Refer to the Benefits table on pages 4-5.

3. Limits of liability

The limits of Our liability for each Section of the policy are the amounts shown in the Benefits table (pages 4-5) except:

- a) on the Domestic Plan where the maximum liability collectively shall not exceed in total the sum insured stated under the policy plan for Sections 1.3, 1.4, 2 and 3; or
- b) the maximum liability collectively for Sections 13, 14 and 15 shall not exceed \$25,000 on the Top Cover Plan; or
- c) where We have notified You in writing of different limits.

4. Claims

- a) The loss or theft of luggage, personal effects, travel documents or money must be reported within 24 hours to the police and (where applicable) the responsible Transport Provider and a written report must be obtained at that time.

- b) If You are admitted to hospital or You anticipate Your medical expenses and Additional expenses are likely to exceed \$500 You must phone the emergency assistance number as soon as physically possible.
- c) You must take all reasonable steps to prevent or minimise a claim.
- d) You must not make any offer, promise of payment or admit any liability without Our written consent.
- e) You must advise Us of any claim or occurrence which may give rise to a claim as soon as possible and within 60 days of the return date shown on Your Certificate of Insurance by sending a completed claim form.
- f) You must at Your own expense, supply any documents in support of Your claim which We may request, such as an original police report, a Property Irregularity Report (PIR), receipts, valuations, a repair quote, a death certificate and/or medical certificate.
- g) You must co-operate fully in the assessment or investigation of Your claim.
- h) If You make or try to make a false, exaggerated or fraudulent claim or use any false, exaggerated or fraudulent means in trying to make a claim, We will not pay Your claim, Your cover under this policy will be voided (without any return of the amount You have paid), We may report You to the appropriate authorities and You may be prosecuted.
- i) Where You are a registered entity You may be entitled to an input tax credit for Your Amount Payable and/or for things covered by this policy. You must disclose these entitlements to Us if You make a claim under Your policy.
- j) If We agree to pay a claim under Your policy We will base any claim payment on the GST inclusive costs (up to the relevant limits of liability). However, We will reduce any claim payment by any input tax credit You are, or would be, entitled to for the repair or replacement of insured property or for other things covered by this policy.
- k) We will be entitled, at Our expense, to have You medically examined or, in the event of death, a post-mortem examination carried out. We will give You or Your legal representative reasonable notice of the medical examination.

5. If You are able to claim from a statutory fund, compensation scheme or Transport Provider

If You are able to claim from a statutory fund, compensation scheme (for example a private health fund or workers compensation scheme) or Transport Provider for monies otherwise payable under this policy You must do so and the policy will only cover the remaining amount.

6. You must help Us to make any recoveries

We have the right to recover from any other party in Your name, money payable under this policy or to choose to defend any action brought against You. You must provide reasonable assistance to Us.

7. Claims payable in Australian dollars

All amounts payable and claims are payable in Australian dollars at the rate of exchange applicable at the time the expenses were incurred.

8. Policy interpretation

The policy shall be interpreted in accordance with the law of the Australian State or Territory in which it is issued.

9. Emergency assistance

- a) Where Your claim is excluded or falls outside the policy coverage, the giving of emergency assistance will not in itself be an admission of liability.
- b) The medical standards, sanitary conditions, reliability of telephone systems and facilities for urgent medical evacuations differ from country to country.

Responsibility for any loss, medical complication or death resulting from any factor reasonably beyond Our control cannot be accepted by Virgin Australia Group, the emergency assistance network, Cover-More or Us.

10. Free extension of insurance

Where Your Journey is necessarily extended due to an unforeseeable circumstance outside Your control, Your Period Of Insurance will be extended until You are physically able to travel Home by the quickest and most direct route. The Period Of Insurance will not be extended for any other reason.

11. Automatic reinstatement of sums insured

If You purchase an Annual Multi-Trip Policy, except for Section 16 Personal Liability, the sums insured under the other Sections of the policy are automatically reinstated on completion of each Journey.

12. Policy conditions applying to Sections 1 and 2 only

- a) We have the option of returning You to Australia if the cost of medical and/or Additional expenses overseas are likely to exceed the cost of returning You to Australia subject always to medical advice. We also have the option of evacuating You to another country.
- b) In all cases the cost of evacuation or to bring You back to Australia will only be met if it was arranged by and deemed necessary by the emergency assistance network.
- c) If You are hospitalised We will pay for a share room. If a share room is not available We will, at Our discretion and that of Our medical advisors, pay to upgrade You to a single room.

- d) If You do not hold a return airline ticket an amount equal to the cost of an economy class one way ticket will be deducted from Your claim for repatriation expenses.

13. Policy conditions applying to Sections 13, 14 and 15 only

- a) If the conveyance You are travelling in disappears, sinks or crashes and Your body has not been found after 12 months You will be presumed to have died.
- b) You must obtain and follow advice and treatment given by a qualified medical practitioner as soon as possible after suffering a disabling injury, during the Period Of Insurance.

14. Residents of Fiji, Vanuatu or Samoa travelling to and within Australia – Inbound area

This policy condition applies if You have paid the Top Cover Single Trip Plan, Inbound area, Amount Payable. In this policy wording (other than in this policy condition and the second bullet point on page 23, and references to the insurer and Virgin Australia):

- a) the word “**Australia**” should be replaced with Fiji, Vanuatu or Samoa; and
- b) the word “**overseas**” should be interpreted to mean a place outside Fiji, Vanuatu or Samoa.

15. Sanctions regulation

Notwithstanding any other terms or conditions under this policy, We shall not be deemed to provide coverage and will not make any payments nor provide any service or benefit to You or any other party to the extent that such cover, payment, service, benefit and/or activity of Yours would violate any applicable trade or economic sanctions, law or regulation.

The Benefits

SECTION 1: Overseas Medical and Dental Expenses

1. If You become sick

(Applies to the Top Cover and Basic Cover only)

If during the Period Of Insurance You suffer a Disabling Injury, Sickness or Disease We will pay the usual and customary cost of medical treatment and ambulance transportation which is provided outside Australia by or on the advice of a qualified medical practitioner or dentist.

Cover will not exceed a maximum of 12 months from the date of suffering the Disabling Injury, Sickness or Disease.

2. Dental expenses

(Applies to Top Cover and Basic Cover only)

If during the Period Of Insurance You require emergency dental treatment for the relief of sudden and acute pain to sound and natural teeth We will pay the usual and customary cost of emergency dental treatment which is provided outside Australia by or on the advice of a qualified dentist. Cover will not exceed a maximum of 12 months from the date of onset. The maximum amount We will pay in total will not exceed \$2,000.

3. Emergency expenses

Cover is subject to the written advice of the treating qualified medical practitioner and acceptance by Our emergency assistance team.

If You suffer a Disabling Injury, Sickness or Disease, We will pay the reasonable Additional accommodation (room rate only) expenses and Additional transport expenses, at the same fare class and accommodation standard as originally booked, incurred by:

- a) You. The benefit ceases when You are able to continue Your Journey, travel Home or on the completion of the Period Of Insurance, whichever is the earlier.
- b) Your travelling companion who remains with or escorts You until You are able to continue Your Journey, travel Home or on the completion of the Period Of Insurance, whichever is the earlier.
- c) one person (e.g. a Relative) (if You don't have a travelling companion with You already) who travels to and remains with You following You being hospitalised as an inpatient. The benefit ceases when You are able to continue Your Journey, travel Home or on the completion of the Period Of Insurance, whichever is the earlier.

- d) up to \$500 for the reasonable expenses incurred in returning a hired motor vehicle to the nearest depot provided that, on the written advice of the treating medical practitioner, You are unfit to drive it.

4. If You die

We will pay reasonable overseas funeral or cremation expenses or the cost of returning Your remains to Australia if:

- a) You die during the Period Of Insurance. In either event the maximum amount We will pay in total will not exceed \$15,000; or
- b) You hold a valid Schengen Visa and You die in a Schengen member state during the Period Of Insurance. In either event the maximum amount We will pay in total will not exceed 30,000EUR for expenses incurred in that Schengen member state.

The maximum benefit limit for this section is:

Top Cover	\$Unlimited
Basic Cover	\$Unlimited
Domestic Cover	\$50,000^

^Combined limit of Sections 1.3, 1.4, 2.1, 2.2 and 2.3.

For approved claims under this Section and Sections 2 and 3 for the same or similar Additional expenses or prepaid travel costs over the same period, We pay the higher of the two amounts claimed, not both.

We will not pay for:

1. medical treatment, dental treatment or ambulance transportation provided in Australia.
If You are cruising and have purchased the Top Cover Plan, this exclusion does not apply to medical treatment provided whilst on a ship (including cruise ship, passenger ship or passenger ferry) even if that ship is within Australian territorial waters. However, this additional benefit does not apply to any medical treatment provided on Australian inland waterways or whilst the ship is tied up in an Australian port.
2. dental treatment caused by or related to the deterioration and/or decay of teeth or associated tissue; involving the use of precious metals; or involving cosmetic dentistry.
3. the continuation or follow-up of treatment (including medication and ongoing immunisations) started prior to Your Journey.
4. routine medical or dental treatment or prenatal visits.
5. medical treatment, dental treatment or ambulance transportation provided in Your country of residence.

6. any costs or expenses incurred prior to You being certified by a qualified medical practitioner as unfit to travel.
7. (except for Section 1.1) claims arising from an Epidemic, Pandemic or outbreak of an infectious disease or any derivative or mutation of such viruses, or the threat or perceived threat of any of these.
8. on the Top Cover Plan and the Basic Cover Plan, Inbound area, medical treatment, dental treatment or ambulance transportation which is provided in Fiji, Vanuatu or Samoa.

Also refer to: General Exclusions – pages 50-53.

Policy Conditions – pages 27-30.

SECTION 2: Emergency Accommodation and Transport

1. If Your Relative or business partner becomes sick

We will pay reasonable Additional transport expenses if You are required to return to Your Home due to the sudden Disabling Injury, Sickness or Disease or death of a Relative or business partner in Australia or New Zealand.

2. If Your Home is destroyed by fire, earthquake or flood

We will pay the reasonable Additional transport expenses for Your early return to Your Home if it is totally destroyed by fire, earthquake or flood while You are on Your Journey.

3. Other circumstances

We will pay Your reasonable Additional hotel accommodation and Additional transport expenses incurred on the Journey due to an unforeseeable circumstance outside Your control and resulting from:

- a) disruption of Your scheduled transport because of riot, strike or civil commotion occurring after the commencement of the Journey provided You act reasonably in avoiding Additional costs;
- b) loss of passport or travel documents except involving government confiscation or articles sent through the mail;
- c) a quarantine regulation You unknowingly breach;
- d) a natural disaster;
- e) a collision of a motor vehicle, watercraft, aircraft or train in which You are travelling;
- f) Your scheduled transport being delayed due to severe weather conditions.

The maximum benefit limit for this section is:

Top Cover	\$50,000
Basic Cover	\$50,000
Domestic Cover	\$50,000^

^Combined limit of Sections 1.3, 1.4, 2.1, 2.2, and 2.3.

For approved claims under this Section and Sections 1 and 3 for the same or similar Additional expenses or prepaid travel costs over the same period, We pay the higher of the two amounts claimed, not both.

We will not pay for claims caused by:

1. an Act Of Terrorism (or arising directly or indirectly from it) or the threat, or perceived threat, of an Act Of Terrorism.
2. an Epidemic, Pandemic or outbreak of an infectious disease or any derivative or mutation of such viruses (or arising directly or indirectly from these) or the threat, or perceived threat, of any of these.
3. anxiety, depression, mental illness or stress (or arising directly or indirectly from, or exacerbated by, these conditions) unless the person lives in Australia or New Zealand, is referred to and diagnosed by a Registered Psychologist or Psychiatrist as a new condition (i.e. not an Existing Medical Condition) and he/she certifies that it was medically necessary for You to return Home to assist that person.
4. the death or sudden disabling injury, sickness or disease of a Relative or Your business partner who is not travelling, unless:
 - a) that person lives in Australia or New Zealand and at the time the policy was issued that person was less than 85 years of age;
 - b) it was medically necessary for You to amend or cancel Your Journey to assist that person; and
 - c) at the Relevant Time that person:
 - i) in the last two years, had not been hospitalised (including day surgery or emergency department attendance) for a condition that was directly or indirectly caused by, arising from, or exacerbated by, the condition that gave rise to the claim;
 - ii) was not residing in a facility such as a nursing home, an aged care facility, a residential aged care home, a high and/or low care facility, a privately owned accommodation facility such as Supported Residential Services or Facilities (SRS/SRF) or, a residential care facility as defined under the Aged Care Act 1997 (Cth) (or any subsequent amendment, or amendment legislation, to it. This applies whether the person is in Australia or New Zealand);

- iii) resides independently at home or in a retirement home or village, including independent living arrangements, and they did not require home care or flexible care services as defined under the Aged Care Act 1997 (Cth) (or any subsequent amendment, or amendment legislation, to it. This also applies whether the person is in Australia or New Zealand);
- iv) was not on a waiting list for, or did not know they needed surgery, inpatient treatment or tests at a hospital or clinic;
- v) did not have a drug or alcohol addiction; and
- vi) did not have a Terminal Illness.

Also refer to: General Exclusions – pages 50-53.

Policy Conditions – pages 27-30.

SECTION 3: Amendment or Cancellation Costs

If due to circumstances outside Your control and unforeseeable at the Relevant Time:

1. You have to rearrange Your Journey prior to leaving Home, We will pay the reasonable cost of doing so (We will not pay more for rearranging Your Journey than the cancellation costs which would have been incurred had the Journey been cancelled); or
2. You have to cancel the Journey (where You cannot rearrange it prior to leaving Home) We will pay You:
 - a) the value of the unused portion of Your prepaid travel or accommodation arrangements that are non-refundable and not recoverable in any other way;
 - b) the travel agent's commission (this is limited to the lesser of \$1,500 or the amount of commission the agent had earned on the prepaid refundable amount of the cancelled travel arrangements); and
 - c) the value of frequent flyer or similar flight reward points, air miles, redeemable vouchers or similar schemes lost by You following cancellation of the services paid for with those points, if You cannot recover Your loss in any other way. The amount We will pay is calculated as follows:
 - (i) For frequent flyer or similar flight reward points, loyalty card points, air miles:
 - The cost of an equivalent booking, based on the same advance booking period as Your original booking. We will deduct any payment You made towards the booking and multiply it by the total number of points or air miles lost, divided by the total number of points or air miles used to make the booking
 - (ii) For vouchers, the face value of the voucher or current market value of an equivalent booking, whichever is the lesser.

The maximum benefit limit for this section is:

Top Cover	\$Unlimited
Basic Cover	\$5,000
Domestic Cover	\$Unlimited

We will not pay for claims caused by:

1. Transport Provider caused cancellations, delays or rescheduling other than when caused by strikes.
- 2.. the disinclination of You or any other person to proceed with the Journey or deciding to change plans.
3. the death, injury, sickness or disease of any person living outside Australia or New Zealand.
4. anxiety, depression, mental illness or stress (or arising directly or indirectly from, or exacerbated by, these conditions) unless referred to and diagnosed by a Registered Psychologist or Psychiatrist as a new condition (i.e. not an Existing Medical Condition) and:
 - a) You are certified as unfit to travel by the treating Registered Psychologist or Psychiatrist; or
 - b) the treating Registered Psychologist or Psychiatrist certifies that it was medically necessary for You to amend or cancel Your Journey to assist a Relative or another person.
5. You cancelling or amending Your Journey prior to being certified by a qualified medical practitioner (or a Registered Psychologist or Psychiatrist as per point 4) as unfit to travel.
6. the death or sudden disabling injury, sickness or disease of a Relative or Your business partner who is not travelling, unless:
 - a) that person lives in Australia or New Zealand and at the time the policy was issued that person was less than 85 years of age;
 - b) it was medically necessary for You to amend or cancel Your Journey to assist that person; and
 - c) at the Relevant Time that person:
 - i) in the last two years, had not been hospitalised (including day surgery or emergency department attendance) for a condition that was directly or indirectly caused by, arising from, or exacerbated by, the condition that gave rise to the claim;
 - ii) was not residing in a facility such as a nursing home, an aged care facility, a residential aged care home, a high and/or low care facility, a privately owned accommodation facility such as Supported Residential Services or Facilities (SRS/SRF) or, a residential care facility as defined under the Aged Care Act 1997 (Cth) (or

any subsequent amendment, or amendment legislation, to it. This applies whether the person is in Australia or New Zealand);

- iii) resides independently at home or in a retirement home or village, including independent living arrangements, and they did not require home care or flexible care services as defined under the Aged Care Act 1997 (Cth) (or any subsequent amendment, or amendment legislation, to it. This also applies whether the person is in Australia or New Zealand);
 - iv) was not on a waiting list for, or did not know they needed surgery, inpatient treatment or tests at a hospital or clinic;
 - v) did not have a drug or alcohol addiction; and
 - vi) did not have a Terminal Illness.
7. the health or death of any other person (not listed in point 6).
 8. any contractual or business obligation or Your financial situation. This exclusion does not apply to claims where You are involuntarily made redundant from Your permanent full-time or permanent part-time employment in Australia and where You would not have been aware before, or at the Relevant Time, that the redundancy was to occur.
 9. failure by You or another person to obtain the relevant visa, passport or travel documents.
 10. errors or omissions by You or another person in a booking arrangement.
 11. the standards or expectations of Your prepaid travel arrangements being below or not meeting the standard expected.
 12. the failure of Your travel agent, Our agent who issued this policy, any tour operator, transport or accommodation supplier or provider (including but not limited to peer to peer services such as Airbnb and Uber), person or agency to pass on monies to operators or to deliver promised services.
 13. a request by a Relative.
 14. a request by Your employer, Your leave application being denied or Your leave being revoked. This exclusion does not apply if You are a member of the police force and Your leave is revoked.
 15. a lack in the number of persons required to commence any tour, conference, accommodation or travel arrangements or due to the negligence of a wholesaler or operator.
 16. customs and immigration officials acting in the course of their duties or You travelling on incorrect travel documents.

17. an Act Of Terrorism (or arising directly or indirectly from it) or the threat, or perceived threat, of an Act Of Terrorism.
18. an Epidemic, Pandemic or outbreak of an infectious disease or any derivative or mutation of such viruses (or arising directly or indirectly from these) or the threat, or perceived threat, of any of these.

Also refer to: General Exclusions – pages 50-53.

Policy Conditions – pages 27-30.

SECTION 4: Luggage and Personal Effects

If during the Period Of Insurance Your luggage or personal effects are lost, stolen or damaged, after deducting reasonable depreciation (where applicable and as determined by Us) We will replace, provide a replacement voucher, repair or pay You the monetary value of the item. It is Our choice which of these We do.

This policy is an indemnity policy which means settlement of Your claim is based on the value of an item at the time of the loss and not on a ‘new for old’ or replacement cost basis.

Reasonable depreciation takes into account the amount paid originally for the item, its age, wear and tear and advances in technology.

Items	Depreciation	
	Deduction for each month of age of the item at the time of loss	Maximum deduction
All other items (not including jewellery)	1.5%	60%
Phones, electrical devices, communication devices, all computers, photographic equipment, tablets, electronics equipment	2.5%	60%

Our payment will not exceed the original purchase price of an item with a limit for any one item, set or pair of items including attached and unattached accessories of:

	Cameras and video cameras	Laptop and tablet computers (including iPads)	Mobile phones and smart phones	Other items
All Plans	\$3,000	\$3,000	\$1,000	\$750

The following are examples of items considered as one item for the purpose of this insurance (an item limit will apply):

- Camera, lenses, tripods and camera accessories (attached or not)
- Smart phone and cover/case
- Matched or unmatched set of golf clubs, golf bag and buggy
- Necklace and pendant
- Charm bracelet and charms.

Claim example

A jacket purchased for \$200 was one year old when it was stolen. A claim would be calculated as follows.

Item

Jacket cost \$200 (within item limit)

Depreciation

Minus \$36 depreciation ($\$200 \times 18\%$ {i.e. 12 months x 1.5%/month})

Excess

Minus policy excess \$100 (where applicable)

Total

The total in this case is \$64

The maximum benefit limit for this section is:

Top Cover	\$15,000
Basic Cover	\$5,000
Domestic Cover	\$5,000

We will not pay for:

1. loss or theft that is not reported within 24 hours to the:
 - a) police; and
 - b) responsible Transport Provider (where Your items are lost or stolen whilst travelling with a Transport Provider).

All cases of loss or theft must be confirmed in writing by the police and the Transport Provider at the time of making the report and a written report obtained.

2. damage, loss or theft of Valuables placed in the care of a Transport Provider unless security regulations prevented You from checking in the Valuables.
3. Valuables left unattended in any motor vehicle at any time, even if stored in a Concealed Storage Compartment.
4. items left unattended in any motor vehicle overnight even if they were in a Concealed Storage Compartment.

5. items left unattended in any motor vehicle, unless they were stored in a Concealed Storage Compartment of a locked motor vehicle and forced entry was gained.
6. any amount exceeding \$2,000 in total for all items left unattended in any motor vehicle.
7. items left unattended in a Public Place.
8. drones (including attached and unattached accessories) whilst in use.
9. bicycles of any description.
10. sporting equipment whilst in use.
11. items sent under the provisions of any freight contract or any luggage forwarded in advance or which is unaccompanied.
12. surfboards or waterborne craft of any description. This exclusion does not apply if the item is lost, stolen or damaged while in the custody of a Transport Provider.
13. damage to fragile or brittle articles unless caused by a fire or motor vehicle collision. This exclusion does not apply to spectacles; or to lenses in cameras and video cameras; laptop and tablet computers; or binoculars.
14. damage caused by atmospheric or climatic conditions, wear and tear, vermin or any process of cleaning, repairing, restoring or alteration.
15. electrical or mechanical breakdown.
16. the loss, theft or damage to, or of, electronic data, software or any other intangible asset.
17. negotiable instruments or any items described in SECTION 7: Money.
18. bonds, coupons, gift cards, stamps, vouchers, warranties, pre-loaded or rechargeable cards including but not limited to phone, debit or stored value cards.
19. bullion, deeds, insurance premiums, manuscripts, negotiable instruments, precious metals or securities.

Also refer to: General Exclusions – pages 50-53.

Policy Conditions – pages 27-30.

SECTION 5: Travel Documents

(Applies to the Top Cover Plan only)

We will pay You for the cost of replacing travel documents and credit cards lost or stolen on the Journey. We will also pay for Your legal liability arising from their illegal use. You must however comply with all the conditions of the issue of the document prior to and after the loss or theft.

The maximum benefit limit for this section is:

Top Cover	\$5,000
Basic Cover	-
Domestic Cover	-

We will not pay for:

1. loss or theft that is not reported within 24 hours to the:
 - a) police; and
 - b) responsible Transport Provider (where Your items are lost or stolen whilst travelling with a Transport Provider).

All cases of loss or theft must be confirmed in writing by the police and the Transport Provider at the time of making the report and a written report obtained.

2. items left unattended in any motor vehicle overnight even if they were in a Concealed Storage Compartment.
3. items left unattended in any motor vehicle, unless they were stored in a Concealed Storage Compartment of a locked motor vehicle and forced entry was gained.
4. any amount exceeding \$2,000 in total for all items left unattended in any motor vehicle.
5. items left unattended in a Public Place.
6. items sent under the provisions of any freight contract or any luggage forwarded in advance or which is unaccompanied.
7. damage caused by atmospheric or climatic conditions, wear and tear, vermin or any process of cleaning, repairing, restoring or alteration.
8. negotiable instruments or any items described in SECTION 7: Money.

Also refer to: General Exclusions – pages 50-53.

Policy Conditions – pages 27-30.

SECTION 6: Delayed luggage allowance

(Applies to the Top Cover Plan and the Basic Cover Plan only)

If all Your luggage is delayed by a Transport Provider during the Journey for more than 12 hours We will pay You up to \$250 for essential emergency items of clothing and toiletries You purchase whilst on Your Journey.

The original receipts for the items and written confirmation of the length of delay from the Transport Provider must be produced in support of Your claim.

If Your luggage is not ultimately returned to You any amount claimable under this benefit will be deducted from any entitlement under Section 4 of this policy.

This section does not apply on the leg of the Journey that returns You Home.

The maximum benefit limit for this section is:

Top Cover	\$250
Basic Cover	\$250
Domestic Cover	-

We will not pay for:

1. delay that is not reported to the responsible Transport Provider within 24 hours. All reports must be confirmed in writing by the Transport Provider at the time of making the report and a written report obtained.

Also refer to: General Exclusions – pages 50-53.

Policy Conditions – pages 27-30.

SECTION 7: Money

(Applies to the Top Cover Plan only)

We will reimburse You up to \$500 for cash, bank or currency notes, postal or money orders accidentally lost or stolen from Your person.

The maximum benefit limit for this section is:

Top Cover	\$500
Basic Cover	-
Domestic Cover	-

We will not pay for:

1. loss or theft that is not reported within 24 hours to the:
 - a) police; and
 - b) responsible Transport Provider (where Your items are lost or stolen whilst travelling with a Transport Provider).

All cases of loss or theft must be confirmed in writing by the police and the Transport Provider at the time of making the report and a written report obtained.

2. loss or theft of cash, bank or currency notes, postal or money orders whilst not carried on Your person.

Also refer to: General Exclusions – pages 50-53.

Policy Conditions – pages 27-30.

SECTION 8: Rental Car Insurance Excess

This cover applies if You:

- a) hire a Rental Car;
- b) are the nominated driver on the Rental Car agreement; and
- c) have comprehensive motor vehicle insurance for the Rental Car for the hire period.

If the Rental Car is damaged or stolen whilst in Your control during the Journey We will pay the lower of the Rental Car insurance excess or the repair costs to the Rental Car that You become liable to pay.

It is Your responsibility to provide the final loss/repair report to substantiate Your claim.

The maximum benefit limit for this section is:

Top Cover	\$6,000
Basic Cover	\$1,500
Domestic Cover	\$3,000

We will not pay for:

1. any damage or theft, arising from the operation of a Rental Car in violation of the terms of the rental agreement.
2. any damage sustained to a Rental Car while it is being driven on an unsealed surface.
3. administration costs or loss of use penalties.

Also refer to: General Exclusions – pages 50-53.

Policy Conditions – pages 27-30.

SECTION 9: Travel Delay

(Applies to Top Cover and Basic Cover only)

If Your pre-booked transport is temporarily delayed for at least 6 hours during the Journey due to an unforeseeable circumstance outside Your control, We will reimburse You up to \$200 for reasonable Additional hotel accommodation and meal expenses.

We will also reimburse up to these limits again for each full 24 hour period that the delay continues beyond the initial 6 hour delay.

You must claim from the Transport Provider first, and provide Us with written confirmation from the Transport Provider of the cause and period of the delay and the amount of compensation offered by them.

You must also provide Us with receipts for the hotel accommodation expenses incurred.

The maximum benefit limit for this section is:

Top Cover	\$2,000
Basic Cover	\$1,000
Domestic Cover	-

We will not pay for claims caused by:

1. an Act Of Terrorism (or arising directly or indirectly from it) or the threat, or perceived threat, of an Act Of Terrorism.
2. an Epidemic, Pandemic or outbreak of an infectious disease or any derivative or mutation of such viruses (or arising directly or indirectly from these) or the threat, or perceived threat, of any of these.

Also refer to: General Exclusions – pages 50-53.

Policy Conditions – pages 27-30.

SECTION 10: Resumption of Journey

(Applies to the Top Cover Plan and the Domestic Cover Plan only)

If You are required to return to Australia during the Journey due to the sudden serious injury, sickness, disease or death of a Relative or business partner in Australia or New Zealand, and the exclusions on Section 2.1 do not apply to Your claim under this section, We will pay for the economy class transport costs You incur to return overseas provided:

- a) Your Period Of Insurance was at least 23 days;
- b) and less than 50% of the Period Of Insurance had elapsed at the time of the onset of the sudden serious injury, sickness, disease or death of a Relative or business partner;
- c) Your return overseas occurs prior to the original expiry date of Your cover for Your original Journey;
- d) no claim due to the same event is made under Section 3 of this policy;
- e) the death was not caused by an illness or injury appearing prior to the commencement of Your original Journey; and
- f) the onset of the illness or injury did not occur prior to the commencement of Your original Journey.

The maximum benefit limit for this section is:

Top Cover	\$3,000
Basic Cover	-
Domestic Cover	\$3,000

Also refer to: General Exclusions – pages 50-53.

Policy Conditions – pages 27-30.

SECTION 11: Special Events

(Applies to the Top Cover Plan only)

If due to an unforeseeable circumstance outside Your control Your Journey would otherwise be delayed resulting in You being unable to arrive in time to attend a wedding, funeral, 25th or 50th wedding anniversary or, a prepaid conference, concert, music festival or sporting event, which cannot be delayed due to Your late arrival, We will pay for the reasonable Additional cost of using alternative public transport to arrive at Your destination on time.

The maximum benefit limit for this section is:

Top Cover	\$5,000
Basic Cover	-
Domestic Cover	-

We will not pay for claims caused by:

1. an Act Of Terrorism (or arising directly or indirectly from it) or the threat, or perceived threat, of an Act Of Terrorism.
2. an Epidemic, Pandemic or outbreak of an infectious disease or any derivative or mutation of such viruses (or arising directly or indirectly from these) or the threat, or perceived threat, of any of these.

Also refer to: General Exclusions – pages 50-53.

Policy Conditions – pages 27-30.

SECTION 12: Hospital Incidentals

(Applies to the Top Cover Plan only)

If You are hospitalised, We will pay You for incidentals You incur such as phone calls and magazines. The amount We will pay is limited to \$50 for each night You are hospitalised overseas as a result of a Disabling Injury, Sickness or Disease during the Period Of Insurance, provided that the period of confinement is at least 48 hours. Original receipts for these expenses must be produced in support of Your claim.

The maximum benefit limit for this section is:

Top Cover	\$8,000
Basic Cover	-
Domestic Cover	-

Also refer to: General Exclusions – pages 50-53.

Policy Conditions – pages 27-30.

SECTION 13: Loss of Income

(Applies to the Top Cover Plan only)

If during the Period Of Insurance You suffer an injury caused solely and directly by violent, accidental, visible and external means (not caused by a sickness or disease) resulting in You losing income because You were unable to return to Your usual place of employment in Australia, We will pay You up to \$1733.33 per month for Your monthly net of income tax wage, but not in respect of the first 30 days after You originally planned to resume Your work in Australia.

The benefit is only payable if Your disability occurs within 30 days of the accident.

The maximum limit in respect of Accompanied Children is \$1,000 for each child.

Cover for loss of income is limited to six months.

The maximum benefit limit for this section is:

Top Cover	\$10,400 [^]
Basic Cover	-
Domestic Cover	-

[^]Maximum liability collectively for Sections 13, 14 and 15 is \$25,000 on the Top Cover Plan.

Also refer to: General Exclusions – pages 50-53.

Policy Conditions – pages 27-30.

SECTION 14: Disability

(Applies to the Top Cover Plan only)

If during the Period Of Insurance You suffer an injury caused solely and directly by violent, accidental, visible and external means (not caused by a sickness or disease) resulting in Your Permanent total loss of sight in one or both eyes or the Permanent total loss of use of one or more Limbs within one year of the date of the accident, We will pay You the amount shown in the plan purchased.

The maximum limit in respect of Accompanied Children is \$5,000 for each child.

The maximum benefit limit for this section is:

Top Cover	\$25,000 [^]
Basic Cover	-
Domestic Cover	-

[^]Maximum liability collectively for Sections 13, 14 and 15 is \$25,000 on the Top Cover Plan.

Also refer to: General Exclusions – pages 50-53.

Policy Conditions – pages 27-30.

SECTION 15: Accidental Death

(Applies to the Top Cover Plan and Domestic Cover Plan only)

If during the Period Of Insurance You suffer an injury caused solely and directly by violent, accidental, visible and external means (not caused by a sickness or disease) resulting in Your death, We will pay Your estate the amount shown in the plan purchased provided Your death occurs within one year of the accident.

Our limit in respect of Accompanied Children is \$5,000 for each child.

The maximum benefit limit for this section is:

Top Cover	\$25,000 [^]
Basic Cover	-
Domestic Cover	\$25,000

[^]Maximum liability collectively for Sections 13, 14 and 15 is \$25,000 on the Top Cover Plan.

Also refer to: General Exclusions – pages 50-53.

Policy Conditions – pages 27-30.

SECTION 16: Personal liability

We will provide cover if, as a result of Your negligent act occurring during the Period Of Insurance, You become unintentionally legally liable to pay compensation in respect to damage caused to someone else's property or the injury or death of someone else.

The maximum benefit limit for this section is:

Top Cover	\$5,000,000
Basic Cover	\$5,000,000
Domestic Cover	\$5,000,000

We will not pay for:

1. liability You become liable to pay to somebody related to You or to someone in Your employ or deemed to be in Your employ.
2. liability arising from loss or damage to property which is in Your legal custody or control.
3. liability arising from the conduct by You of any profession, trade or business or the use or ownership by You of any aircraft, drone, firearm, water borne craft or mechanically propelled vehicle.
4. liability arising out of occupation or ownership of any land, buildings or immobile property.
5. liability arising out of any wilful or malicious act.
6. liability arising out of the transmission of an illness, sickness or disease.
7. liability involving punitive, exemplary or aggravated damages or any fine or penalty.
8. liability arising out of Your liability under a contract or agreement unless You would be liable if that contract or agreement did not exist.

Also refer to: General Exclusions – pages 50-53.

Policy Conditions – pages 27-30.

General Exclusions

We will not pay for:

1. claims for costs or expenses incurred outside the Period Of Insurance.
2. claims involving consequential loss of any kind including, but not limited to, loss of enjoyment or any financial loss not specifically covered in the policy.
3. claims directly or indirectly arising from loss, theft or damage to property, or death, illness or bodily injury if You fail to take reasonable care or put Yourself in a situation where a reasonable person could foresee that loss, theft or damage to property, or a death, illness or bodily injury might happen.
4. claims involving air travel other than as a passenger on a fully licensed passenger carrying aircraft operated by an airline or an air charter company.
5. claims arising as a result of war, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection or military or usurped power.
6. claims arising directly or indirectly from any nuclear reaction or contamination, ionising rays or radioactivity.
7. claims arising from biological and/or chemical materials, substances, compounds or the like used directly or indirectly for the purpose to harm or to destroy human life and/or create public fear.
8. loss or damage caused by detention, confiscation or destruction by customs or other officials or authorities.
9. claims arising from any unlawful act committed by You or if You have not been honest and frank with all answers, the accuracy of information, statements and submissions made in connection with Your insurance application or claim.
10. claims arising from any government intervention, prohibition, regulation or restriction or court order.
11. claims directly or indirectly arising from circumstances You knew of, or a reasonable person in Your circumstances would know or foresee, at the time the policy was issued, that could lead to the Journey being delayed, abandoned or cancelled.

12. claims directly or indirectly arising from travel booked or undertaken by You:
 - a) even though You knew, or a reasonable person in Your circumstances would know, You were unfit to travel, whether or not You had sought medical advice;
 - b) against the advice of a medical practitioner;
 - c) to seek or obtain medical or dental advice, treatment or review; or
 - d) to participate in a clinical trial.
13. claims in respect of travel booked or undertaken after Your Terminal Illness was diagnosed.
14. claims directly or indirectly arising from the illness, injury, death or hospitalisation of any person aged 85 years and over not listed on Your Certificate of Insurance, regardless of the country they live in.
15. claims arising directly or indirectly from, or exacerbated by, any Existing Medical Condition of You or Your travelling companion.
16. claims directly or indirectly arising from pregnancy of You, Your travelling companion, a Relative or any other person.
17. claims directly or indirectly arising from childbirth or the health of a newborn child whatever the proximate cause of the claim is. This exclusion applies irrespective of the stage of pregnancy at which the child is born.
18. claims directly or indirectly arising from You having elective medical or dental treatment or surgery, a cosmetic procedure or body modification (including tattoos and piercings) during the Journey.
19. claims involving or directly or indirectly arising from Your suicide, attempted suicide, self-inflicted injury or condition, stress, travel exhaustion, any conduct engaged in whilst under the influence or effect of alcohol or drugs, the effect of or chronic use of alcohol or drugs or the transmission of any sexually transmittable disease or virus.
20. any GST liability or any fine, charge or penalty You are liable for because of a failure to fully disclose to Us Your input tax credit entitlement for the Amount Payable.
21. losses for which insurance or the payment is prohibited by law.

22. claims arising from the failure of any travel agent, tour operator, accommodation provider, airline or other carrier, car rental agency or any other travel or tourism services provider to provide services or accommodation due to their Insolvency or the Insolvency of any person, company or organisation they deal with.
23. claims involving You travelling (during the Journey) in International Waters in a private sailing vessel or a privately registered vessel.
24. claims involving participation by You or Your travelling companion in hunting; racing (other than on foot); polo playing; hang gliding; off-piste snow skiing or snowboarding; rodeo riding; BASE jumping; moto cross; freestyle BMX riding; running with the bulls; sports activities in a Professional capacity; mountaineering or rock climbing using ropes, rock climbing equipment or oxygen; scuba diving unless You hold an Open Water Diving Certificate or are diving with a qualified diving instructor.
25. claims involving participation by You (during the Journey) in riding a four wheel motorcycle such as a quad bike or ATV (All Terrain Vehicle) even as a pillion passenger.
26. claims involving participation by You (during the Journey) in motorcycling or moped riding where You have not purchased the Top Cover Plan and:
 - a) whilst in control of a motorcycle or moped You do not hold a valid Australian motorcycle rider's licence or Australian motor vehicle driver's licence, and a licence valid in the relevant country;
 - b) whilst You are a pillion passenger the driver does not hold a licence valid in the relevant country;
 - c) the motorcycle/moped has an engine capacity of more than 250cc; or
 - d) whilst in control of the motorcycle or as a passenger You are not wearing a helmet.
27. claims involving participation by You (during the Journey) in snow skiing, snowboarding or snowmobiling unless You purchased the Top Cover Plan.

(See Snow skiing, snowboarding and snowmobiling on page 8 for details of cover available and the terms that apply.)
28. claims directly or indirectly for or related to Your cruise, any cruise travel or that arise whilst on a cruise unless You purchased the Top Cover Plan.

(See Cruise cover on page 8 for details of cover available and the terms that apply.)

29. any benefit, or provide cover, if the provision of 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) or any applicable legislation (whether in Australia or not) or where We do not have the necessary licenses or authority to provide such cover.

Financial Services Guide

This Financial Services Guide (FSG) is an important document designed to help You decide whether to use the financial services offered.

It contains information about how Cover-More Insurance Services Pty Ltd ABN 95 003 114 145, AFSL 241713 (Cover-More) administers and arranges the policy either directly or through its authorised representative or distributor (Agent).

What financial services are provided?

Cover-More holds an Australian Financial Services Licence that allows both Cover-More and the Agent to provide You with factual information (distributors) or general financial product advice (authorised representatives) about this travel insurance product and to arrange this product for You. Cover-More is responsible for the provision of these services. The Agent is an authorised representative or distributor of Cover-More.

The Agent acts on behalf of Zurich Australian Insurance Limited (the insurer), the issuer of this product. Cover-More acts under a binder authority from the insurer. This means that Cover-More (and the Agent acting on behalf of Cover-More), can arrange this policy and Cover-More can handle or settle claims on behalf of the insurer. Cover-More and the Agent act for the insurer when providing these services. You can find full details of Cover-More and the insurer on page 15 of the PDS.

Cover-More or the Agent are not authorised to give You personal advice in relation to travel insurance. Any advice given to You about travel insurance will be of a general nature only and will not take into account Your personal objectives, financial situation or needs. You need to determine whether this product meets Your travel needs.

How are we paid?

Cover-More

Cover-More is paid a commission by the insurer when You buy this travel insurance policy. This commission is included in the premium that You pay and is received after You have paid the premium. The commission is a percentage of the premium.

Cover-More may also receive a share of the profit earned by the insurer if the insurer makes an underwriting profit in accordance with the underwriting targets it has set. This amount is calculated and paid retrospectively only when the insurer exceeds its underwriting targets in a given year.

Cover-More employees are paid an annual salary and may be paid a bonus based on business performance.

The Agent, and/or its associates

The Agent and/or its associates are paid a fee and/or commission by Cover-More for arranging Your travel insurance policy. This amount is paid out of the commission that Cover-More receives from the insurer.

The Agent's employees may receive salaries, bonuses and/or company dividends in their own business depending on the nature of their employment. Bonuses may be linked to general overall performance, including sales performance and may include all or part of the commission received by the Agent.

The Agent, and/or its associates, may also receive other financial and non-financial incentives from Cover-More for arranging Your travel insurance policy. Such incentives may be dependent on a number of performance related or other factors and may include, for example, a share of Cover-More's profit, bonus payments, prize pools, sponsorship of training events and conferences, marketing promotions and competitions.

Further information

For more information about remuneration or other benefits received for the financial services provided, please ask the Agent within a reasonable time of receiving this FSG and before You choose to buy this product.

Complaints

If You have a complaint about the financial services provided by Cover-More or the Agent please refer to the PDS for details of the complaint resolution process.

What professional indemnity insurance arrangements do we have in place?

Cover-More holds professional indemnity insurance covering errors and mistakes relating to the provision of financial services provided by Cover-More, its employees, the Agent and the Agent's employees (even after they cease to be employed). Cover-More's policy meets the requirements of the Corporations Act.

Who is responsible for this document?

The Agent is responsible for the distribution of the FSG in this document. The insurer is responsible for the PDS. Cover-More has authorised the distribution of this FSG.

This Combined FSG and PDS was prepared 18 February 2019.

a trusted partner of  australia

Contact us
Customer Service and Claims
1300 135 769

PDS Issue 1.1 (VTC/VBC/VTI/VDC/AU) | Date prepared: 18 February 2019

Copyright © 2019 Cover-More Insurance Services Pty Ltd
(ABN 95 003 114 145, AFSL No. 241713)