

Travel Insurance

Combined Product Disclosure Statement and Financial Services Guide

Effective 29 September 2021



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Welcome

This is an important document.

Please read it carefully before making a decision to purchase any of the travel insurance plans explained in it.

It will help you decide whether the insurance meets your needs. You can even use it to compare with other options you may be considering.

Any recommendation or opinion in this document is of a general nature only. It does not take into account your objectives, financial situation or needs. You need to decide if the insurance is right for you.

This booklet contains important information about the insurer, Zurich Australian Insurance Limited (ZAIL), ABN 13 000 296 640, AFS Licence Number 232507 (referred to as "we", "our" and "us" in relation to the insurance), its agent Cover-More Insurance Services Pty Ltd ABN 95 003 114 145, AFSL 241713 (Cover-More) as well as the Commonwealth Bank and other relevant persons.

The Commonwealth Bank is not the insurer of the insurance referred to in this booklet. It and any of its related corporations do not guarantee, and are not liable to pay, any of the benefits under these covers.

Things you need to understand

- Terms, conditions, limits and sub-limits apply – that is why it is important **you** read this booklet carefully.
- Exclusions apply to restrict, limit and/or exclude cover. Read the General exclusions on pages 75-78 and the exclusions under each benefit carefully to see what **we** don't cover.
- Certain words have special meanings and are shown in bold. See Words with special meaning, pages 42-45.

For example **relevant time** in respect of:

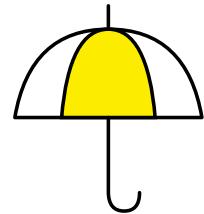
- a. Single Trip policies, means the time of issue of the policy, and
- b. Annual Multi-Trip policies, means the first time at which any part of the relevant trip is paid for or the time at which the policy is issued, whichever occurs last.



How to use this PDS

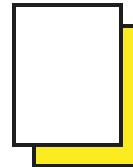
We know your PDS can seem overwhelming. It outlines every detail of your policy, so you know exactly what's included.

But, it helps you get covered in 4 easy steps:



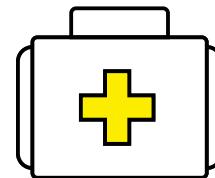
Step 1

Choose your cover



Step 2

Check our add-ons to see if
you need any for your trip



Step 3

Check our existing medical
conditions. If all your conditions
are automatically included,
you're good to go. If they're
not, declare all of them and
complete an assessment.



Step 4

Pay your premium and get cover.
You're away!



Helpful tips

Safety of your belongings

- Don't check in **your valuables** – keep them with **you** as they're not covered by **us** when checked-in with the **transport provider** (unless security regulations meant **you** were forced to check them in).
- Items left **unattended** in any motor vehicle (for example, a car, campervan or motorhome) or towed land vehicle during daylight hours are not covered, unless they are stored in the **concealed storage compartment** of the locked motor vehicle or towed land vehicle and forced entry was gained. A limit of \$500 per item and a maximum of \$2,000 in total applies.
- Don't leave items **unattended** in ANY motor vehicle or towed land vehicle overnight, as they're not covered.
- Don't walk away from or leave **your belongings unattended in a public place**. They're not covered by **us**.
- Remember to check for **your items** when checking out of any accommodation or leaving an aircraft, ship, train, tram, taxi or bus.
- Report any loss or theft to the police within 7 days of when **you** first become aware of the incident, as a police report is required so **we** can validate that the incident occurred. Also, **your belongings** may have been handed in and may be recovered or the police may have a chance to follow up an alleged crime.
- 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.
- If **you** are unable to provide **us** with a copy of the relevant report, **you** must provide **us** with a reasonable explanation and details of the time and place **you** made the report, including their contact details.

Reciprocal Healthcare Agreement

The Australian Government and the governments of certain countries have an agreement where Australian residents are provided with subsidised essential medical treatment (which, in turn, minimises **your claim with us**). The agreement is known as a Reciprocal Healthcare Agreement (RHA). Please visit humanservices.gov.au/medicare or dfat.gov.au for details of RHAs with Australia.



A vibrant photograph of several Indian women in traditional saris dancing joyfully in a grassy field. One woman in a yellow sari on the left is laughing and waving her hand. Another woman in a red sari on the right is smiling and pointing. They are all wearing colorful jewelry like bangles and necklaces. The background is a lush green field.

The cover

International travel insurance

		International				Travel to Australia	
		Comprehensive	Essentials	Medical Only	Cancellation Only	Inbound	
		Single Trip or Annual Multi-Trip	Single Trip	Single Trip	Single Trip	Single Trip	
Summary of benefits		Excess applies	Limits per adult unless stated otherwise	Limits per adult unless stated otherwise	Limits per adult	Limit per policy	Limits per adult unless stated otherwise
 Medical & Health	1 Emergency Medical and Dental Expenses Overseas	Yes	\$Unlimited~	\$Unlimited~	\$Unlimited~	–	\$10,000,000~
	2* Hospital Incidentals	–	\$5,000	–	–	–	\$1,000
	3 Overseas Rent	–	\$5,000	\$2,500	–	–	–
	4* Additional Expenses – Your Health	Yes	\$Unlimited~	\$Unlimited	\$Unlimited	–	\$Unlimited
	5* Additional Expenses – Non-travellers	Yes	\$50,000	\$50,000	\$50,000	–	\$50,000
	6* Additional Expenses – Other	Yes	\$50,000	\$50,000	\$50,000	–	\$50,000
 Delays & Disruptions	7* Amendment or Cancellation Costs	Yes	Cover chosen^	Cover chosen^	–	Cover chosen^	Cover chosen^
	8* Travel Delay Expenses	–	\$2,000	–	–	–	\$2,000
	9 Special Events	–	\$5,000	–	–	–	–
	10 Festivals and Gigs	–	\$2,000	\$2,000	–	–	–
	11 Resumption of Journey	–	\$3,000	–	–	–	–
	12* Luggage and Travel Documents	Yes	\$10,000	\$5,000	–	–	\$3,000
 Your Luggage & Personal Effects	<i>any single item including attached and unattached accessories</i>		up to \$500	up to \$300	–	–	up to \$200
	13* Luggage Delay Expenses	Yes	\$1,100	–	–	–	\$1,100
	14 Money	–	\$250	–	–	–	\$200
	15 Rental Vehicle Insurance Excess	–	\$6,000 [∞]	–	–	–	\$Nil [∞]
	16* Hijacking	Yes	\$6,000	–	–	–	–
	17* Loss of Income	Yes	\$10,400 ^{†#} (up to \$1,733.33 per month)	–	–	–	–
 Other Benefits	18* Disability	Yes	\$25,000 ^{†#}	–	–	–	\$10,000
	19* Accidental Death	Yes	\$25,000 ^{†#}	–	–	–	\$10,000
	20 Personal Liability	–	\$2,500,000	\$1,500,000	\$2,500,000	–	\$1,000,000
	21* Emergency Medical and Dental Expenses in Australia	–	–	–	–	–	\$1,000,000~

~Medical and dental cover and assistance will not exceed 12 months from onset of the illness or injury. *Sub-limits apply. Refer to the Policy wording pages 41-78. ^Cover chosen applies per policy. See page 13. †The maximum liability collectively for Benefits 17, 18 & 19 is \$25,000. ∞Additional cover available. See page 23. The excess will be shown on your Certificate of Insurance.

Importantly, please note that conditions, exclusions, limits and sub-limits apply.

	International				Travel to Australia
	Comprehensive	Essentials	Medical Only	Cancellation Only	Inbound
	Single Trip or Annual Multi-Trip	Single Trip	Single Trip	Single Trip	Single Trip

Cruise Cover Benefits – These benefits are only available if the Cruise Cover is purchased. See page 15

 Cruise Cover	i Medical and Dental Cover For Cruising~	Yes	\$Unlimited	\$Unlimited	\$Unlimited	–	\$Unlimited
	ii Ship to Shore Medical Cover	Yes	\$Unlimited	\$Unlimited	\$Unlimited	–	\$Unlimited
	iii Sea Sickness Cover	Yes	\$Unlimited	\$Unlimited	\$Unlimited	–	\$Unlimited
	iv* Cabin Confinement	–	\$1,500 \$100 per 24 hour period	\$1,500 \$100 per 24 hour period	\$1,500 \$100 per 24 hour period	–	\$1,500 \$100 per 24 hour period
	v Missed Port	Yes	\$1,000	\$1,000	\$1,000	–	\$1,000
	vi Missed Shore Excursion	Yes	\$1,000	\$1,000	\$1,000	–	\$1,000
	vii Formal Wear Damaged, Lost or Stolen	–	\$1,000	\$500	\$500	–	\$1,000
	viii Delayed Formal Wear	–	\$500	\$250	\$250	–	\$500
	ix* Marine Rescue Diversion	–	\$1,000 \$100 per 24 hour period	\$500 \$100 per 24 hour period	\$500 \$100 per 24 hour period	–	\$1,000 \$100 per 24 hour period

~Medical and dental cover and assistance will not exceed 12 months from onset of the illness or injury. *Sub-limits apply. Refer to the Policy wording pages 41-78.

The excess will be shown on your Certificate of Insurance.

Importantly, please note that conditions, exclusions, limits and sub-limits apply.

Cover add-ons & choices available					
Cancellation Cover (You choose an amount)	✓	✓	✗	✓	✓
Cruise Cover (Must be added if multi-night cruising)	✓	✓	✓	✗	✓
Existing Medical Conditions	✓	✓	✓	✗	✗
Increase Luggage Item Limits	✓	✗	✗	✗	✓
Electronic Gadgets	✓	✓	✗	✗	✓
Adventure Activities and Adventure Activities Plus	✓	✓	✓	✗	✓
Motorcycle/Moped Riding and Motorcycle/Moped Riding Plus	✓	✓	✓	✗	✓
Snow Sports and Snow Sports Plus	✓	✓	✓	✗	✓
Rental Vehicle Insurance Excess Increase	✓	✓	✗	✗	✓

International			
Non-medical			
Single Trip - One adult per policy			
Summary of benefits	Excess applies	Limits per adult	
 Delays & Disruptions	5 Additional Expenses – Non-travellers	\$250	\$50,000
	6* Additional Expenses – Other	\$250	\$50,000
	7* Amendment or Cancellation Costs	\$250	Cover chosen [^]
	8* Travel Delay Expenses	–	\$2,000
	9 Special Events	–	\$5,000
	10 Festivals and Gigs	–	\$5,000
 Your Luggage & Personal Effects	12* Luggage and Travel Documents <i>any single item including attached and unattached accessories</i>	\$250	\$10,000
			up to \$500
	13* Luggage Delay Expenses	–	\$1,100
	14 Money	–	\$250
 Other Benefits	15 Rental Vehicle Insurance Excess	–	\$6,000 [∞]
	18* Disability	–	\$25,000 [†]
	19* Accidental Death	–	\$25,000 [†]
	20 Personal Liability	–	\$2,500,000
Cruise Cover Benefits			
 Cruise Cover	v Missed Port	\$250	\$1,000
	vi Missed Shore Excursion	\$250	\$1,000
	vii Formal Wear Damaged, Lost or Stolen	–	\$500
	viii Delayed Formal Wear	–	\$250
	ix* Marine Rescue Diversion	–	\$500

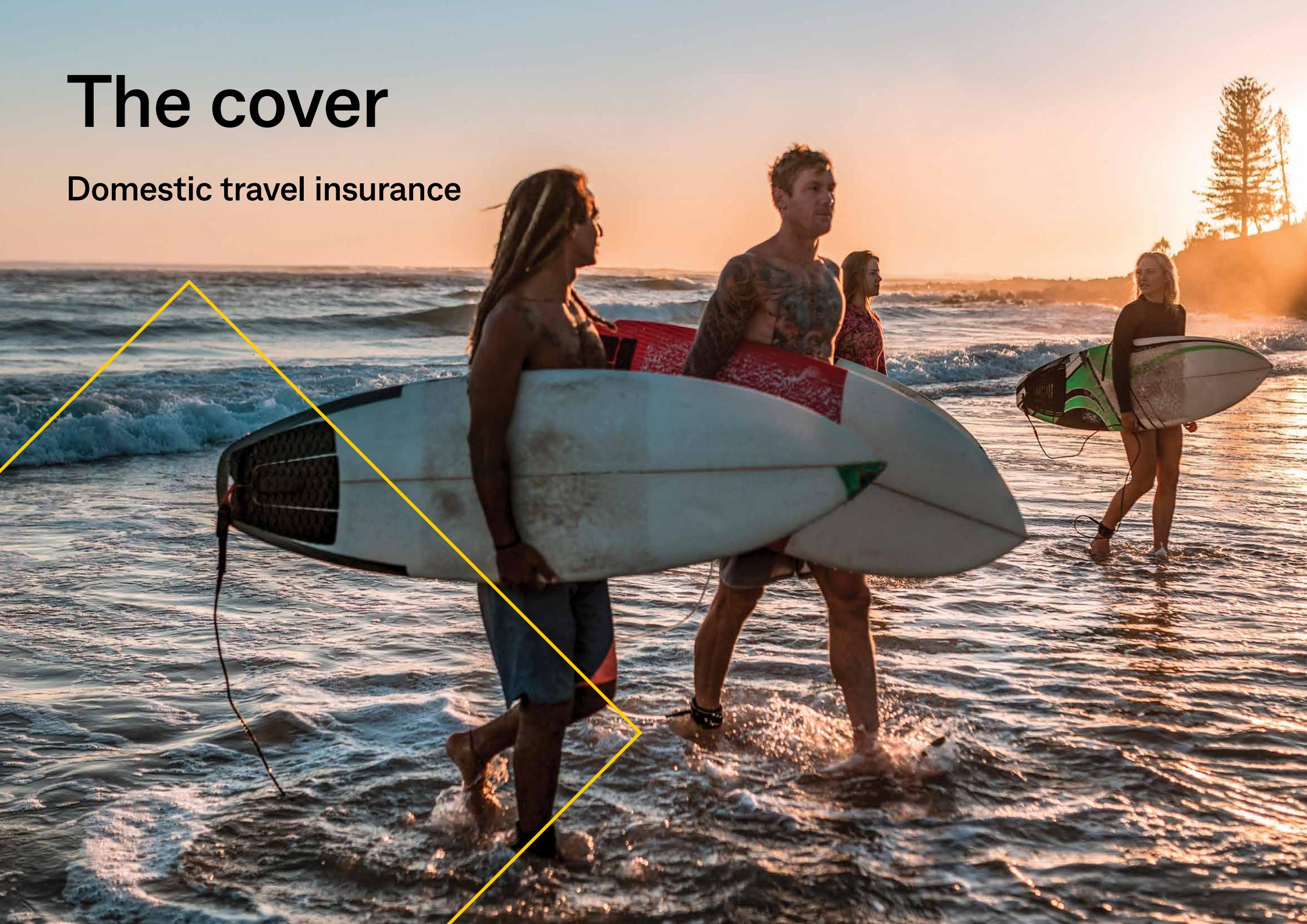
*Sub-limits apply. Refer to the Policy wording pages 41-78. ^Cover chosen applies per policy. See page 13. †The maximum liability collectively for Benefits 18 & 19 is \$25,000. ∞Additional cover available. See page 23.

Importantly, please note that conditions, exclusions, limits and sub-limits apply.

Other	
Cancellation Cover (You choose an amount)	✓ It is also important to note, there is no provision for you to claim cancellation costs if the claim is caused by any disease, illness, sickness or injury suffered by you.
Cruise Cover	Cruise travel included (no option to vary the cover purchase is required) but there is no cover for medical related cruise benefits and no cover for medical, additional or cancellation expenses related to your health.

The cover

Domestic travel insurance



For travel within Australia

Domestic

Single Trip or Annual Multi-Trip

Summary of benefits		Excess applies	Limits per adult
 Delays & Disruptions	4 Additional Expenses – Your Health	\$50	\$10,000
	5 Additional Expenses – Non-travellers	\$50	
	6* Additional Expenses – Other	\$50	
	7* Amendment or Cancellation Costs	\$50	
	8* Travel Delay Expenses	–	
	9 Special Events	–	
	10 Festivals and Gigs	–	
Your Luggage & Personal Effects	12* Luggage and Travel Documents	\$50	\$3,000
	<i>any single item including attached and unattached accessories</i>		up to \$300
 Other Benefits	15 Rental Vehicle Insurance Excess	–	\$4,000 [∞]
	17* Loss of Income	–	\$1,500 ^t (up to \$250 per month)
	18* Disability	–	\$10,000 ^t
	19* Accidental Death	–	\$10,000 ^t
	20 Personal Liability	–	\$200,000

*Sub-limits apply. Refer to the Policy wording pages 41-78. †The maximum liability collectively for Benefits 17, 18 & 19 is \$10,000. ∞Additional cover available. See page 23.

The excess amount will be on your Certificate of Insurance.

Importantly, please note that conditions, exclusions, limits and sub-limits apply.

Cover add-ons & choices available	
Existing Medical Conditions	✓
Increase Luggage Item Limits	✓
Electronic Gadgets	✓
Adventure Activities and Adventure Activities Plus	✓
Motorcycle/Moped Riding and Motorcycle/Moped Riding Plus	✗
Snow Sports and Snow Sports Plus	✓
Rental Vehicle Insurance Excess Increase	✓

Policy inclusions and choices

Single Trip or Annual Multi-Trip

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

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 up to the maximum journey duration chosen.

For your journey to be covered by the Annual Multi-Trip policy, your destination must be more than 250 kilometres from home or, if less than that, your trip must include at least one night paid accommodation booked with an accommodation supplier or provider (including a hotel, Bed & Breakfast (B&B), serviced apartment or peer to peer service such as Airbnb).

Areas of travel

Where you travel to will influence your premium.

So, when you get a quote online at commbank.com.au/travelinsurance, or over the phone, you need to tell us your destinations.

Simply select from the list of countries and areas provided.

Where are you travelling to?

- Enter or select every country you will be travelling to wherever possible.
- For each country you select, cover for travel to all other countries within that region is also included regardless of whether you select the countries or not.

Stopping over somewhere?

- If you are stopping in a country for less than 72 hours, you do not need to enter or select that country.

What to do if you do not know every single country you will be travelling to

- If you are not sure of all your destinations, select a region instead. Cover then applies for travel to all countries within that region. You can also select Worldwide.

What about a cruise?

- In Australia (e.g. on the Murray River) or in Australian Coastal Waters (e.g. a Kimberley Cruise) – Please choose or enter "Australia"
- From a port in Australia to another port or ports in Australia without any stopover at a port outside of Australia (e.g. a 'Sampler Cruise', a cruise from Sydney to Brisbane) – these cruises go outside of Australian Coastal Waters - Please choose or enter "Domestic Cruising"



- Overseas (e.g. a European river cruise, Caribbean cruise or a cruise from Hong Kong to Sydney) or from a port in Australia to another port or ports outside Australia (e.g. Sydney/Singapore) - Please choose or enter the main area or destination/country based on where **you** will spend the most time on **your** trip.

Excess choices

When travelling internationally **you** can choose **your** excess. The higher the excess **you** choose, the lower the premium **you** pay. **Your** excess will be shown on **your** Certificate of Insurance and only applies to certain sections in the event of a claim. When **you** make a claim arising from the one event, an excess (if applicable) will only be applied once.

An excess of \$250 currently applies to the Non-Medical Plan. An excess of \$50 currently applies to the Domestic Plan. Other excess amounts may be available.

Cancellation cover

The Comprehensive, Cancellation Only, Inbound and Non-Medical Plans do not automatically include an amount for cancellation cover. **You** can add a cancellation cover amount that suits **you**.

Select an amount from the options available when **you** apply for cover.

The level of cancellation cover **you** choose will influence **your** premium. Typically people choose an amount that will cover all prepaid travel tickets, hotels, tours or other travel-related expenses for all travellers on the policy.

The level of cover **you** choose will be shown on **your** Certificate of Insurance and will be the total amount of cover available under Benefit 7:

- on a per policy basis on the Comprehensive, Inbound and Non-Medical Plan, and
- on a per person basis on the Cancellation Only Plan.

There is no cancellation cover on the International Medical Only Plan.

Inbound Plan

The Inbound Plan is for non-Australian residents travelling to Australia, covering travel within Australia.

Cover is available for travellers up to 69 years of age.

There is no cover for any **existing medical conditions** or pregnancy other than those conditions **we** automatically include. See Travel and health pages 24-32.



Extending your journey

If you are travelling and wish to be insured for longer than the original period shown on your Certificate of Insurance, you need to purchase a new policy by calling or emailing us prior to the expiry date. It is not an extension of the previous policy.

Call 1300 467 951 (within Australia) or +61 2 8907 5060 (from overseas), or email commbank@covermore.com.au

Please note:

- Should a medical condition present itself before the new policy is issued, it may be considered an **existing medical condition** under the new policy. Therefore it may not be covered by the new policy. Purchasing a longer duration policy up front may avoid this risk. Restrictions on duration may apply.
- If you can't return home on your original date due to an unforeseen event outside your control, the policy will automatically extend – see policy condition 11 Free extension of insurance on page 48 for details.

Cooling-off period

You can cancel or change your policy at any time before you leave home. If you cancel a policy for any reason within the cooling-off period, which is within 21 days of the date of purchase, we will give you your money back.

Our Cooling-off period ensures a refund of the entire premium unless you have already made a claim under the policy or departed on your journey.

If you wish to cancel your policy and receive a full refund, please call Cover-More on 1300 467 951 within the cooling-off period.

How to make a claim

Visit commbank.com.au/cbatravelclaims

Follow the prompts to complete your claim and the checklist to gather the supporting documents you need to submit with it.

Submit the claim online

Upload your scanned supporting documents when submitting the claim online, or

If you are unable to upload documents, still submit the claim online, but post the documents to us. We will give you a claim number to note on the original supporting documents. Please note: we need original supporting documents, so if you are uploading your documents, please hold on to them as we may request them. If you are posting them, keep a copy.

Commonwealth Bank Travel Insurance
C/o Cover-More
PO Box 2027
North Sydney NSW 2059 Australia

Check that the amount you want to claim is higher than any excess applicable to your claim



Cruise Cover

Available on Comprehensive, Essentials, Medical Only and Inbound

Will you be travelling for 2 or more nights on a cruise?

If your cruise is overseas or outside Australian Coastal Waters, to be insured for claims relating to a cancelled cruise, cruise travel or that occur while on a cruise, you must tell us you are doing a cruise and pay an extra premium to have cover. Cruise Cover will then be shown on your Certificate of Insurance. The cruise cover benefits on page 70-74 will also be included.

If you do not tell us about your cruise, claims in any way related to your multi-night cruise, and multi-night cruise travel or that arise while on a multi-night cruise are specifically excluded by this policy.

When don't I need to add Cruise Cover?

You don't need to add cruise cover if you are:

- not travelling on a cruise
- on a cruise for only one night
- only taking a ferry trip
- are cruising in Australia (e.g. on the Murray River) or in Australian coastal waters (e.g. a Kimberley Cruise), or
- are sailing. (Note: Sailing is not covered in international waters).



Options to vary cover



Options to vary cover

Existing Medical Conditions and Pregnancy

See Travel and health pages 24-32.

Increase Luggage Item Limits

Available on Comprehensive, Inbound and Domestic

You can increase an item's limit by specifying the item on **your** policy and paying an additional premium.

Receipts or valuations (less than 12 months old) must be available if requested by **us**.

Luggage item limits automatically included in your cover

Depending on the plan **you** choose, **we** provide cover for any one item, set or pair of items (including attached and unattached accessories), up to the following limits, after taking into account reasonable depreciation.

Comprehensive	Essentials	Inbound	Domestic	Non-Medical
\$500	\$300	\$200	\$300	\$500

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

There is no luggage cover on the International Cancellation Only Plan.

Luggage and personal effects

It is **your** responsibility to provide **us** with evidence to support **your** claim for an item. This is 'proof of ownership'.

- We will accept the original or a copy of a purchase receipt, invoice and/or bank statement showing the purchase, the date of the purchase and the amount paid.
- We may consider valuation certificates (issued prior to the Relevant Time), ATM receipts and warranty cards with accompanying bank statement of purchases.
- We will not accept photographs, packaging or instruction manuals as proof of ownership.



Electronic Gadgets

Available on Comprehensive, Essentials, Inbound and Domestic

If you want to increase the single item limit for a bunch of portable, electronic items you usually travel with, you can simply purchase the Electronic Gadgets cover option.

You only need to add Electronic Gadgets to the policy once, and you do not need to specify the item(s). Cover is up to a maximum of \$5,000, for any claim within this add-on, and item limits apply. For any one item, set or pair of items (including attached and unattached accessories), we provide cover up to the following limits after taking into account reasonable depreciation:

smart phones and mobile phones	\$1,000	game consoles (including virtual reality goggles)	\$1,000
smart watches	\$1,000	headphones	\$1,000
laptop and tablet computers	\$4,000	speakers	\$1,000
cameras and video cameras and go pros	\$4,000	hard drives	\$1,000
drones (not in use)	\$2,000	power banks (battery packs)	\$1,000
electronic medical equipment (e.g. hearing aids)	\$2,000	hair dryers/straighteners	\$1,000
electric skateboards/scooters	\$1,000	walkie talkies	\$1,000
navigation equipment	\$1,000	metal detectors	\$1,000
health trackers	\$1,000	other portable electronic gadgets	\$1,000



Adventure Activities Cover

We know that not everyone enjoys the same activities while travelling. So, we offer a comprehensive list of automatically included activities as well as cover options available (see Adventure Activities Cover on page 20) for more adventurous pursuits.

Please check the lists below to make sure any activities **you** plan to take part in are covered.

Activities automatically included in your cover:

- Abseiling
- Archery
- Ballooning
- Bungy Jumping
- Flying Fox
- Horse Riding
- Jet Boating
- Jet Skiing
- Kayaking
- Paragliding
- Parasailing
- Scuba Diving (to a depth of 30 metres)
- Snorkelling
- White Water Rafting
- Working Holidays

Your participation in any of the activities listed above is subject to the terms of cover. There is no cover for these activities if **you** are racing, or participating in a **professional** capacity. There is no personal liability cover for use or ownership of waterborne craft or mechanically-propelled vehicles. Conditions apply to scuba diving. See exclusion 23 on page 77.



Adventure Activities Cover

You can purchase cover for participating in more adventurous activities during **your journey**, shown below, by selecting an option to vary the cover. Cover starts from the time the extra premium is paid and is subject to meeting the criteria listed.

You can choose from 2 levels of cover:

- Adventure
- Adventure +

Adventure	Adventure +
<p>Available on Comprehensive, Essentials, Medical Only, Inbound and Domestic</p> <ul style="list-style-type: none">• Closed circuit triathlon up to a 1.5 kilometre swim, 40 kilometre bike ride and 10 kilometre run.• Outdoor rock climbing (with ropes and/or guides, or bolted) less than 2,000 metres above sea level.• Scuba diving if the maximum depth is between 30 metres and 50 metres below the surface, provided you are diving under the direction of an accredited dive marshal, instructor or guide, or, if qualified, diving within the guidelines of the relevant* diving or training agency or organisation, and not diving alone.	<p>Also includes Adventure Activities listed in the adjacent table.</p> <p>Available on Comprehensive, Essentials, Medical Only, Inbound and Domestic</p> <ul style="list-style-type: none">• Parachuting or Skydiving (not including BASE jumping).• Trekking (which doesn't require specialist climbing equipment) that reaches an altitude between 4,000 metres and 6,000 metres above sea level, if the trek takes more than 2 days to complete.• Trekking the Kokoda Track.
<p>*BSAC Sports Diver – 35 metres, BSAC Dive Leader – 50 metres, PADI Advanced Open Water – 30 metres, PADI Dive Master – 40 metres, PADI Deep Dive Speciality – 40 metres, SSI Advanced Open Water – 30 metres, SSAC Sports Diver – 35 metres or SSAC Master Diver – 50 metres.</p>	

Please note: we will not pay claims where **you** participate in any activity in a **professional** capacity.



Motorcycle/Moped Riding Cover

This policy does not cover claims for motorcycling or moped riding, for any purpose, during **your journey**.

To obtain motorcycle/moped riding cover while travelling, **you** can select an option to vary the cover and pay the required premium. Cover starts from the time the extra premium is paid and is subject to meeting the criteria listed. **You** can choose from 2 levels of cover:

- Motorcycle/Moped Riding
- Motorcycle/Moped Riding +

Motorcycle/Moped Riding as the driver or passenger
Engine capacity 200cc or less

Available on Comprehensive, Essentials, Medical Only and Inbound

If **you** pay the additional premium for motorcycle/moped riding, **you** will only be covered if:

- the engine capacity is 250cc or less
- while in control of a motorcycle or moped **you** hold a valid Australian motorcycle rider's licence or Australian motor vehicle driver's licence
- while **you** are a passenger the driver holds a valid licence for riding that vehicle
- **you** are wearing a helmet
- **you** are not participating in a **professional** capacity
- **you** are not racing, and
- **you** are not participating in motocross.

Motorcycle/Moped Riding +
Engine capacity unlimited

Also includes motorcycle/moped riding as per the conditions listed in the adjacent table.

Available on Comprehensive, Essentials, Medical Only and Inbound

If **you** pay the additional premium for motorcycle/moped riding +, **you** will only be covered if:

- the motorcycle/moped is hired
- **you** have held an Australian motorcycle rider's licence for the last 5 years
- while in control of a motorcycle or moped **you** hold a valid Australian motorcycle rider's licence
- **you** are the registered owner of a motorcycle in Australia that has an engine capacity greater than or equal to the engine capacity of the motorcycle/moped **you** are hiring
- while **you** are a passenger the driver holds a valid licence for riding that vehicle
- **you** are wearing a helmet
- **you** are not participating in a **professional** capacity
- **you** are not racing, and
- **you** are not participating in motocross.

Please note: No cover will apply under Benefit 20 Personal Liability on page 68. This means **you** are responsible to pay costs associated with damage to the vehicle or property or injury to another person.



Snow Sports: Snow Skiing, Snowboarding and Snowmobiling Cover

This policy does not cover claims involving participation by **you** (during the **journey**) in snow skiing, snowboarding or snowmobiling.

You can get cover for the activities shown in the following tables by selecting an option to vary the cover and pay the required premium. Cover starts from the time the extra premium is paid and is subject to meeting the criteria listed.

You can choose from 2 levels of cover:

- Snow Sports
- Snow Sports +

Snow Sports
On-piste snow skiing, snowboarding and snowmobiling, and cross-country skiing only
Not available on Cancellation Only or Non-Medical

If you pay the additional premium for Snow Sports, you will only be covered if you are:

- snow skiing, snowboarding or snowmobiling **on-piste**, or cross-country skiing
- not participating in a **professional** capacity, and
- not racing.

Snow Sports +
Snow skiing/boarding off-piste and heli-skiing/boarding
Also includes Snow Sports activities as per the conditions listed in the adjacent table.
Not available on Cancellation Only or Non-Medical

If you pay the additional premium for Snow Sports + you will only be covered:

- while heli-skiing/boarding if **you** are on a guided tour with a licensed tour operator
- when skiing or snowboarding outside piste boundaries, **you** are not going against local advice or warning
- if **you** are not participating in a **professional** capacity, and
- if **you** are not racing.

Please note: No cover will apply under Benefit 20 Personal Liability on page 68 for snowmobiling. This means **you** are responsible to pay costs associated with damage to the vehicle or property or injury to another person.



Rental Vehicle Insurance Excess Increase

The Comprehensive Plan automatically provides up to \$6,000 cover and the Domestic Plan automatically provides up to \$4,000 cover for **your** liability in respect to a **rental vehicle** insurance excess. The Inbound Plan does not automatically provide **Rental Vehicle** Insurance Excess Cover. Cover can be purchased on the Inbound Plan, or increased on the Comprehensive Plan or Domestic Plan, by up to \$3,500 by paying an additional premium.

There is no **Rental Vehicle** Insurance Excess Cover benefit on the International Medical Only Plan.



Travel and health



Existing medical conditions

(Of you or your travelling companion)

Do you have an existing medical condition?

Claims which in any way relate to, or are exacerbated by, an **existing medical condition** or related new infections except for those Existing medical conditions **we** automatically include pages 27-29.

What does this mean?

If **you** have an **existing medical condition** and, for example, take medication to keep that condition in check, it doesn't mean **you** can't purchase travel insurance.

It means that if **you** want to take cover for **existing medical condition(s)**, **you** will need to apply by completing a health assessment, online, with **your** quote. Please add this cover at the same time as purchasing **your** policy.

So, **you** should tell **us** about all **your existing medical conditions** including anything for which medication is prescribed. If **we** approve, **we** will offer **you** cover for an additional premium.

If **you** choose to declare some conditions and not others or choose not to declare any conditions, **you** run the risk of a claim being denied. See "What is an existing medical condition?", following, for more information.

Assessing your health

So **we** can assess the risk, **we** may also require **you** to answer some questions about **your** general health as well as completing the online health assessment at the relevant time.

What is an existing medical condition?

Existing medical condition(s) means a disease, illness, medical or dental condition or physical defect that, at the **relevant time**, meets any of the following:

- a. Has required an emergency department visit, hospitalisation or day surgery procedure within the last 12 months.
- 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, or
 - iv. consultation with a specialist.



- c. Has:
 - i. been medically documented involving the brain, circulatory system, heart, kidneys, liver, respiratory system or cancer, or
 - ii. required surgery involving the abdomen, back, brain, joints or spine that required at least an overnight stay in hospital.
- d. Is:
 - i. chronic or ongoing (whether chronic or otherwise) and medically documented
 - ii. under investigation
 - iii. pending diagnosis or awaiting a specialist opinion, or
 - iv. pending test results.

Relevant time means, for:

- a. Single Trip policies, the time of issue of the policy, and
- b. Annual Multi-Trip policies, 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 467 951 for help.

Getting cover for your existing medical conditions

There are 3 categories of **existing medical conditions**:

- Conditions that cannot be covered.
- Conditions **we** automatically include
- Conditions **we** need to assess.

Please review each of the categories to determine which category applies.

Existing medical conditions that cannot be covered

This policy does not provide cover for claims which in any way relate to, or are exacerbated by:

- conditions involving drug or alcohol dependency
- travel booked or undertaken against the advice of any medical practitioner
- routine or cosmetic medical or dental treatment or surgery during the Journey, even if **your existing medical condition** has been approved, or
- conditions for which **you** are travelling to seek advice, treatment or review or to participate in a clinical trial.

Medical conditions that are undiagnosed or awaiting specialist opinion

We are unable to offer cover for medical conditions **you** were aware of, or a reasonable person in **your** circumstances should have been aware of, or arising from signs or symptoms that **you** were aware of or a reasonable person in **your** circumstances should have been aware of, before commencing insurance cover in this booklet (see **period of insurance** meaning page 45, and for which at that time:

- **you** had not yet sought a medical opinion regarding the cause
- **you** were currently under investigation to define a diagnosis, or
- **you** were awaiting specialist opinion.

You will still be eligible for the other benefits provided by the policy but **you** may not apply for cover for any **existing medical conditions**. There will be no cover for claims that in any way relate to, or are exacerbated by, any **existing medical condition** or any condition where the points listed above apply. If **you** receive a diagnosis before **you** depart on **your journey**, **you** may be able to complete a health assessment and, if approved, add **existing medical condition** cover to **your** policy by paying **us** the required premium.

Existing medical conditions we automatically include

We automatically include cover for an **existing medical condition** shown in the tables following, provided:

- all **your existing medical conditions** are on this list
- in the 12 months prior to the **relevant time**, **you** have not required treatment by a medical practitioner or been hospitalised (including day surgery or emergency department attendance) for that condition
- **you** are not under investigation for that condition
- **you** are not awaiting investigation, surgery, treatment or procedures for that condition, and
- **your** condition meets any criteria shown for that condition.

All time frames are measured in relation to the **relevant time**, unless specified otherwise.

Conditions					
Acne	Carpal Tunnel Syndrome	Congenital Blindness	Goitre	Hiatus Hernia	Raynaud's Disease
ADHD (Attention Deficit Hyperactivity Disorder)	Cataracts Glaucoma	Congenital Deafness	Gout	Migraine	Stenosing Tenosynovitis (Trigger Finger)
Bell's Palsy	Coeliac Disease	Gastric Ulcer Peptic Ulcer	Graves' Disease	Plantar Fasciitis	Urinary Incontinence
Bunions					

Continued overleaf ...



Conditions	Criteria
Allergy	Provided you have no known respiratory conditions such as Asthma.
Anxiety	Provided: <ul style="list-style-type: none">• you have not been diagnosed with Depression in the last 3 years• in the last 12 months, your prescribed medication hasn't changed• you are not currently waiting to see a mental health clinician (e.g. psychologist or psychiatrist), and• you have not previously been required to cancel or curtail your travel plans due to your Anxiety.
Asthma	Provided you : <ul style="list-style-type: none">• are under 60 years of age• have not smoked for at least the last 18 months• do not need prescribed oxygen outside of a hospital, and• do not have a chronic lung condition or disease (whether chronic or otherwise) including Chronic Bronchitis, Chronic Obstructive Pulmonary Disease (COPD), Emphysema or Pulmonary Fibrosis.
Depression	Provided: <ul style="list-style-type: none">• you have not been hospitalised for this condition in the last 2 years• in the last 12 months, your prescribed medication hasn't changed• you are not currently waiting to see a mental health clinician (e.g. psychologist or psychiatrist), and• you have not previously been required to cancel or curtail your travel plans due to your Depression.
Ear Grommets	Provided you do not have an ear infection.
Epilepsy	Provided you do not have an underlying medical condition (e.g. previous head trauma, Brain Tumour or Stroke).
Gastric Reflux	Provided your Gastric Reflux doesn't relate to an underlying diagnosis (e.g. Hernia/Gastric Ulcer).
Hip Replacement	Provided:
Knee Replacement	<ul style="list-style-type: none">• the procedure was performed more than 12 months ago and less than 10 years ago, and
Shoulder Replacement	<ul style="list-style-type: none">• you haven't had any post-operative complications such as joint dislocation or infection related to that surgery.
Hip Resurfacing	

Conditions	Criteria
Hypercholesterolaemia (High Cholesterol)	Provided you do not have a known heart or cardiovascular condition.
Hypertension (High Blood Pressure)	Provided: <ul style="list-style-type: none">• you do not have a known heart or cardiovascular condition• you do not have Diabetes (Type I or Type II)• your Hypertension is stable and managed by your medical practitioner• in the last 12 months, your prescribed blood pressure medication has not changed, and• you are not suffering symptoms of Hypertension.
Skin Cancer	Provided: <ul style="list-style-type: none">• it is not a Melanoma• you have not had chemotherapy or radiotherapy for this condition, and• it does not require any follow up treatment e.g. chemotherapy, radiotherapy or further excision.
Underactive Thyroid	Provided the cause was not a tumour.
Overactive Thyroid	

If your existing medical condition is not automatically included

If your existing medical condition:

- is not automatically included, and/or
- includes one or more conditions not listed above

you will need to complete an online health assessment by declaring **all your existing medical conditions** to us.

To be clear, the conditions **we** automatically include only apply if **you** do not have other **existing medical conditions** beyond those on this list.

See page 31 for "How to complete a health assessment".

Important points to note

Chronic lung conditions

If you have a chronic lung condition*, **you** must complete a health assessment for that condition at the **relevant time** or, at the latest, before **you** depart on **your journey**, have it approved by **us** and pay the extra premium to be covered. If **you** don't, **you** will not be covered for claims which in any way relate to or are exacerbated by:

- that condition



- a respiratory infection e.g. Influenza, or
- a lung infection e.g. Pneumonia.

*Chronic lung condition includes Chronic Bronchitis, Chronic Obstructive Pulmonary Disease (COPD), Emphysema or Pulmonary Fibrosis.

What does this mean?

For example, if **you** have COPD and are diagnosed with a respiratory infection, **your** claim will not be covered because **we** consider the respiratory infection to complicate, and be a complication of, the underlying **existing medical condition**, COPD.

Cardiovascular Disease

If you have a condition involving **your** heart and blood vessels, collectively known as Cardiovascular Disease*, **you** must complete a health assessment for that condition at the **relevant time** or, at the latest, before **you** depart on **your journey**, have it approved by **us** and pay the extra premium to be covered. If **you** don't, **you** will not be covered for claims which in any way relate to or are exacerbated by:

- that condition, or
- another heart/cardiovascular system problem including a Heart Attack or Stroke.

*Cardiovascular Disease includes Aneurysms, Angina, Cardiac Arrhythmias (disturbances in heart rhythm) Cardiomyopathy, Cerebrovascular Accident (CVA or Stroke), previous heart surgery (including valve replacements, bypass surgery or stents), Myocardial Infarction (Heart Attack) or Transient Ischaemic Attack (TIA).

What does this mean?

For example, if **you** have ever been diagnosed with Coronary Artery Disease, also known as Ischaemic Heart Disease (IHD), it is a life-long condition. The risk of disease is elevated whether or not **you** have been treated with bypass surgery or coronary artery stent insertion.

If **you** have not told **us** about **your** condition, **we** have not approved it and **you** have not paid the additional premium, **we** will not be able to consider **your** claim if something goes wrong before or during **your journey** with respect to these conditions.

Reduced immunity

If you have reduced immunity at the **relevant time** (e.g. as the result of a medical condition or medical treatment), **you** must complete a health assessment at the **relevant time** or, at the latest, before **you** depart on **your journey**, have it approved by **us** and pay the extra premium to be covered. If **you** don't, **you** will not be covered for claims which in any way relate to, or are exacerbated by, the underlying medical condition or a new infection.

What does this mean?

For example, if **you** currently suffer from a condition that is associated with significant immunosuppression or **you** require medication that significantly impairs immune function (e.g. Methotrexate, Azathioprine or high dose steroids), **you** should tell **us** about **your** condition. Otherwise **we** won't be able to cover **your** claim if **you** develop an opportunistic infection with respect to these conditions.



What happens if I have an existing medical condition but do not take steps to cover it under my travel insurance policy?

We will not pay any claims which in any way relate to, or are exacerbated by, **your existing medical condition** if:

- you do not apply for this cover for that **existing medical condition** at the **relevant time** or, at the latest, before **you depart on your journey**
- you apply for this cover for that **existing medical condition** and **we** do not agree to provide cover, or
- **we** agree to provide cover for that **existing medical condition** and **you** do not pay the required extra premium.

This means, for example, that **you** will have to pay for an overseas medical emergency which can be very expensive in some countries.

If you have any questions about **existing medical conditions**, please call Cover-More on 1300 467 951.

How to complete a health assessment

You can complete a health assessment online with **your travel insurance quote**. You may also call 1300 467 951 for help. Please add this cover at the same time as purchasing **your policy**.

- **You** need sufficient knowledge about each **existing medical condition** to be able to complete a full declaration so **we** can assess the risk.
For example, **we** need to know the name of the medical condition **you** take medication for, rather than the name of the medication. Check with **your doctor** first if unsure.
- Check all **existing medical conditions** have been disclosed to **us** at the **relevant time** or, at the latest, before **you depart on your journey**.
- **we** will provide **you** with **your** assessment outcome and number.
- If **we** can approve **your** health assessment, **you** must pay **us** an extra premium to add cover for **your existing medical conditions** to the policy.
- An approval number for this cover will then be listed on **your** Certificate of Insurance.

Special conditions, limits and excesses may apply depending on **your existing medical condition**, age, trip destination and duration. This will be stated on **your** Certificate of Insurance, or separately advised to **you** in writing.

Depending on **your existing medical condition**, **we** may be unable to offer **you** a policy which provides cover for any medical or hospital expenses or cancellation or amendment costs, if the claim is caused by, or exacerbated by, any disease, illness, sickness or injury suffered by **you**.

If that is the case, **you** may be able to purchase a Non-Medical Plan policy. Please refer to the Summary of benefits on page 9 for details of the benefits available under this type of plan. You can apply for a Non-Medical Plan policy by calling Cover-More on 1300 467 951.



Pregnancy

Our policy provides limited cover for pregnancy.

If you know you are pregnant at the **relevant time**, you will need to apply for cover at the **relevant time** or, at the latest, before you depart on your journey if:

- there have been complications with this, or a previous, pregnancy
- you have a multiple pregnancy e.g. twins or triplets, or
- the conception was medically assisted e.g. using assisted fertility treatment including hormone therapies or IVF.

Relevant time means, for:

- a. Single Trip policies, the time of issue of the policy, and
- b. Annual Multi-Trip policies, 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.

Please complete additional questions in an online health assessment to determine eligibility and obtain a quote. If you have any questions about the online assessment or prefer to talk with a customer service agent, please call 1300 467 951.

Pregnancy restrictions

Whether or not you have to apply for pregnancy cover, the following restrictions apply to claims arising in any way from the pregnancy of any person.

- Cover is only provided for serious, unexpected pregnancy complications that occur up until the 24th week of pregnancy i.e. up to 23 weeks, 6 days. Gestational age is measured in weeks and days and is calculated from the last known date of your menstrual period or calculated from the staging ultrasound.
- Childbirth is not covered.
- Costs relating to the health or care of a newborn child are not covered, irrespective of the stage of pregnancy when the child is born.

What does this mean?

Expectant mothers should consider if our product is right for them when travelling after 20 weeks as costs for childbirth and neonatal care overseas can be expensive.



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

This policy has cover if **you** need to change **your** trip due to the health of a **relative or your** business partner who is not travelling. In some circumstances the maximum **we** will pay is \$1,000.

What is covered?

We will pay for claims arising from the sudden disabling injury, sickness or disease or death of a **relative or your** business partner who is not travelling if, at the **relevant time**, that person:

- a. in the last 12 months, had not been hospitalised (including day surgery or emergency department attendance) for a condition that was in any way related to, or exacerbated by, the condition that gave rise to the claim
- b. 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)
- c. was residing 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
- d. was not on a waiting list for, or did not know they needed surgery, inpatient treatment or tests at a hospital or clinic
- e. did not have a drug or alcohol addiction, and
- f. did not have a **terminal illness**.

What are the restrictions and limits?

If any point a-f cannot be met e.g. if **your** non-travelling **relative** was in a nursing home or did have a **terminal illness**, the maximum **we** will pay is \$1,000 under all sections of the policy combined.

- For **your** reference, "**relative**" means a person who is **your** spouse; 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; uncle, aunt; or niece, nephew.

What isn't covered?

No payment will be made under this policy for:

- Claims related to non-travellers who aren't a **relative or your** business partner.
- Claims where **you** are aware of a circumstance which is likely to give rise to a claim.
- Claims which in any way relate to circumstances **you** knew of, or a person in **your** circumstances would have reasonably known or foreseen, at the **relevant time**, that could lead to the **journey** being delayed, abandoned or cancelled.



For example:

- Jim's father was hospitalised after a serious accident. After hearing the bad news, Jim cancelled his upcoming trip and received a 50% refund.

He then bought a travel insurance policy so he could claim the rest of the money back.

When Jim bought the policy, he had already cancelled the trip so his claim would not be covered.

For example:

- Khalida's mother had been unwell for several months and was booked to have medical tests. Khalida organised a holiday and travel insurance. Unfortunately, the test results showed her mother had a serious sickness so Khalida cancelled her holiday to spend time with her mother. Because her mother was having tests after being unwell when Khalida bought her policy, her claim would not be covered as she knew at that time, or a person in her circumstances would have reasonably known or foreseen, that she may need to cancel her trip due to her mother's health.



24 hour emergency assistance

You can contact our emergency assistance team 24 hours a day, 365 days a year while you're travelling overseas. The team of doctors, nurses, case managers and travel agents will help you by:

- Help to find a medical facility and monitor your medical care
- Paying bills

Becoming ill overseas can be very expensive. 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 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.

When and what number should you call?

You, or someone on your behalf, should phone our emergency assistance team as soon as possible if you require hospitalisation, if your medical expenses will exceed \$2,000 or if you want to return early.

When you call, please have the following information at hand:

- Your policy number
- A phone number to call you back on.

Please call Australia DIRECT and TOLL FREE from:

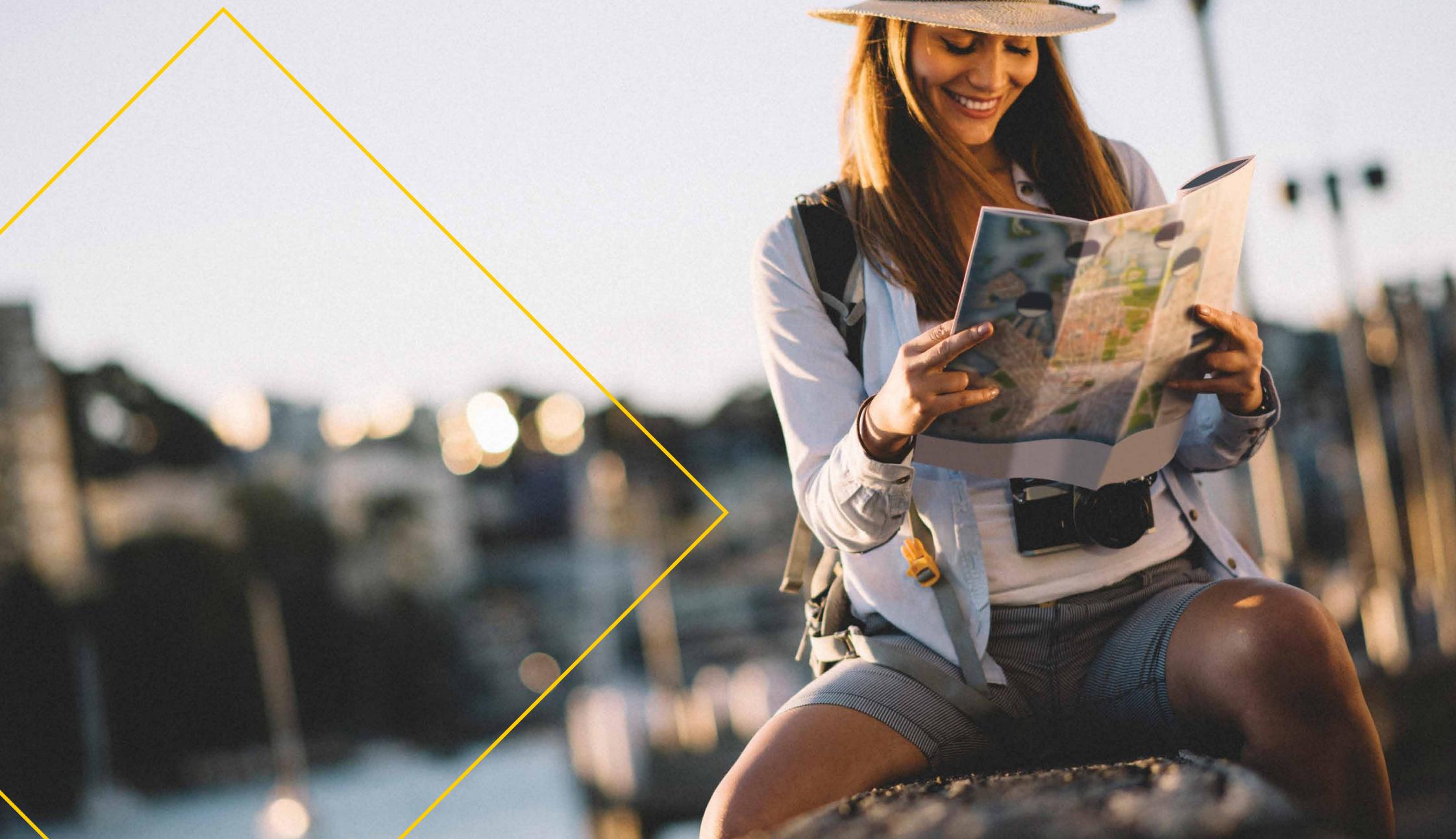
USA 1844 345 1662 UK 0808 234 3737 Canada 1844 345 1662 NZ 0800 632 031

Charges apply if you are calling from a pay phone or mobile phone.

From all other countries or if you experience difficulties with the numbers above:

Call direct: +61 2 8907 5641 Fax: +61 2 9055 3303

Important information



Who issues and insures this product?

Cover-More

This product is issued by Cover-More on behalf of the insurer. Cover-More administers the products (including customer service, health assessments and claims management) and arranges the issue of the insurance to **you** directly.

Zurich Australian Insurance Limited

ZAIL is the insurer and 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.

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

Duty to take reasonable care not to make a misrepresentation

This is a consumer insurance contract under the Insurance Contracts Act 1984 (Cth) (Act).

Under the Act, **you** have a duty to take reasonable care not to make a misrepresentation to **us**.

This duty applies whenever **you** enter into, renew, extend or vary this contract of insurance. In all cases, **we** will ask **you** questions that are relevant to **our** decision to insure **you** and on what terms.

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.

When **you** answer the questions **you** must give a true and accurate account of matters. **Your** response should tell **us** everything that **you** know about the question because **your** response is relevant to whether **we** offer **you** insurance and the terms **we** offer **you**.

A misrepresentation made fraudulently is made in breach of the duty to take reasonable care not to make a misrepresentation.

Circumstances relevant to your duty

Whether or not **you** took reasonable care not to make a misrepresentation will be determined with regard to all the relevant circumstances.

If **we** know, or ought to know about **your** particular characteristics or circumstances, **we** will consider these to determine if **you** took reasonable care not to make a misrepresentation to **us**.

We may consider the following matters to determine if **you** took reasonable care not to make a misrepresentation to **us**:

- the type of consumer insurance contract in question, and its target market
- explanatory material or publicity produced or authorised by **us**



- how clear, and how specific, the questions **we** asked were
- how clearly **we** communicated to **you** the importance of answering those questions and the possible consequences of failing to do so
- whether or not an agent/insurance broker was acting for **you**, or
- whether the contract was a new contract or was being renewed, extended, varied or reinstated.

You are not to be taken to have made a misrepresentation merely because you:

- failed to answer a question, or
- gave an obviously incomplete or irrelevant answer to a question.

Consequences if you fail to take reasonable care and do make a misrepresentation

If you do not take reasonable care when answering our questions and the result is you do make a misrepresentation to 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 take reasonable care not to make a misrepresentation to us is fraudulent, we may refuse to pay a claim and treat the contract as if it never existed.

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 specified additional expenses
- pay the person to whom you are legally liable
- pay the cash value, repair cost or arrange replacement of your personal items (after deducting reasonable depreciation where applicable), or
- pay you.



The amount you pay for this insurance

You can obtain a quote online or by calling 1300 467 951. 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.

- **Area** – higher risk areas cost more.
- **Departure date and trip duration** – the longer the period until **you** depart and the longer **your** trip duration, the higher the cost may be.
- **Age** – higher risk age groups cost more.
- **Plan** – an International Plan, which provides more cover, costs more than an International Medical Only or Domestic Plan.
- **Excess** – the higher the excess the lower the cost.
- **Cruise Cover** – additional premium applies.
- **Cancellation Cover** – on some policies **you** can choose **your** own level of Cancellation Cover. The more cancellation cover **you** require, the higher the cost may be.
- **Adding cover for existing medical conditions and pregnancy** (where available) – an additional premium may apply if a health assessment is completed and cover is offered by **us**.
- **Extra cover options** (where available) – an additional premium may apply.



How a claim settlement is calculated

When **we** pay a claim **we** consider a number of aspects in calculating the settlement. These include:

- the amount of loss or damage or liability
- the excess
- the 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:

- **You** new video camera with an original purchase price of \$999 is stolen from a hotel room
- **You** are travelling on the International Comprehensive Plan
- **You** have chosen the nil excess option
- **You** have not paid an additional amount to increase the standard item limit
- **You** have paid an additional amount to increase cover for electronic gadgets.

The claim settlement would be calculated as follows:

- Consider the original purchase price of the video camera – \$999 (no depreciation applies because the video camera was new)
- Consider the maximum benefit limit for Luggage and Travel Documents – \$10,000
- Consider the maximum item limit payable for cameras and video cameras – \$500
- Consider the Electronic Gadget Cover for a video camera – \$4,000
- Consider the excess. As **you** have chosen the nil excess option, no excess is deducted. This results in a claim settlement of \$999 or **we** may replace the item. **Our** choice will have regard to the circumstances of **your** claim and consider any preference **you** may have.



Policy wording



The benefits described in this policy wording should be read in conjunction with Policy inclusions and choices (pages 12-14), Options to vary cover (pages 16-23), Travel and health (pages 24-34), Duty to take reasonable care not to make a misrepresentation (pages 37-38), Words with special meaning (pages 42-45), Policy conditions (pages 46-50) and General exclusions (pages 75-78).

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

We will give **you** the insurance cover described in the policy in return for receiving the total **amount payable**.

It is a condition of the policy that:

- **you** are not aware of any circumstance that is likely to give rise to a claim
- **you** are a resident of Australia, or non-resident of Australia travelling on the Inbound Plan, and will be returning **home** at the completion of the **period of insurance** and within 18 months of the **journey** commencing (12 months for the Americas and/or Canada), and
- if **you** purchase the Annual Multi-Trip Policy
 - cover will only extend to a **journey**
 - to a destination more than 250 kilometres away from **your home**, or
 - that includes at least one night paid accommodation booked with an accommodation supplier or provider (including a hotel, Bed & Breakfast (B&B), serviced apartment or peer to peer service such as Airbnb), and
 - the length of each **journey** cannot exceed the maximum duration shown on **your** Certificate of Insurance.

Words with special meaning

In this policy words in bold 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**, except on the Domestic Plan where cover applies on a per person basis only. 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 person listed as an adult other than:

- a. when **you** make a claim arising from the one event, an excess (if applicable) will only be applied once
- b. for luggage item limits, which are regarded as per a single policy, and
- c. for Benefit 7 on the Comprehensive Plan and the Inbound Plan where the limit chosen applies per policy.

For 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 any act by a person, alone or with an organisation or foreign government, who:

- a. uses or threatens force or violence
- b. aims to create public fear, or
- c. aims to resist or influence a government, or has ideological, religious, ethnic or similar aims.

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.

computer system means any computer, hardware, software, communications system, electronic device (including, but not limited to, smart phone, laptop, tablet, wearable device), server, cloud or microcontroller including any similar system or any configuration of the aforementioned and including any associated input, output, data storage device, networking equipment or back up facility, owned or operated by the coach, airline, shipping line, cruise line or railway company that You were due to travel on.

concealed storage compartment means a boot, glove box, enclosed centre console, or concealed cargo area of a motor vehicle.

cyber act means an unauthorised, malicious or criminal act or series of related unauthorised, malicious or criminal acts, regardless of time and place, or the threat or hoax thereof involving access to, processing of, use of or operation of any **computer system**.

cyber incident means any:

- a. **cyber act** or error or omission or series of related errors or omissions involving access to, processing of, use of or operation of any **computer system**, or
- b. **cyber act** including any partial or total unavailability or failure or series of related partial or total unavailability or failures to access, process, use or operate any **computer system**.

disabling injury, sickness or disease means a disabling injury, sickness or disease that first shows itself during the **period of insurance** and requires immediate treatment by a qualified medical practitioner or dentist.

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(s) means a disease, illness, medical or dental condition or physical defect that, at the **relevant time**, meets any of the following:

- a. Has required an emergency department visit, hospitalisation or day surgery procedure within the last 12 months.
- 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, or
 - iv. consultation with a specialist.
- c. Has:
 - i. been medically documented involving the brain, circulatory system, heart, kidneys, liver, respiratory system or cancer, or
 - ii. required surgery involving the abdomen, back, brain, joints or spine that required at least an overnight stay in hospital.
- d. Is:
 - i. chronic or ongoing (whether chronic or otherwise) and medically documented
 - ii. under investigation
 - iii. pending diagnosis or awaiting a specialist opinion, or
 - iv. pending test results.

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 **home**. On an Annual Multi-Trip policy, **your** destination must be more than 250 kilometres from **home** or, if less than that, **your** trip must include at least one night paid accommodation staying at a registered accommodation provider.

limbs means a hand at or above the wrist or a foot at or above the ankle.

natural disaster means a major adverse event resulting from natural processes of the Earth; examples are bushfire, hurricane, tornado, volcanic eruption, earthquake, tsunami, falling object from space (including a meteorite), and in general any extraordinary atmospheric, meteorological, seismic, or geological phenomenon. It does not mean an **epidemic or pandemic**.

on-piste means on 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 with 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), and
- 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**
 - ii. The expiry of the maximum insured duration per **journey** (this maximum duration is shown on **your** Certificate of Insurance)
 - iii. 12 months from the travel start date shown on **your** Certificate of Insurance.

Cover under Benefit 7 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 Benefit 9, 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 there is no reasonable prospect of improvement.

professional means undertaking any activity for which financial payment is received from another person or party.

public place means any place the public has access to, including but not limited to airports, bus terminals, buses, cruise ships, planes, stations, taxis, trains, wharves and beaches, galleries, hostels, hotels, hotel foyers and grounds, museums, private car parks, public toilets, shops, streets, restaurants and general access areas.

relative means a person who is **your** spouse; 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; uncle, aunt; or niece, nephew.

relevant time means, for:

- a. Single Trip policies, the time of issue of the policy, and
- b. Annual Multi-Trip policies, 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 vehicle means a campervan/motorhome that does not exceed 6 tonnes, SUV, sedan, station wagon, hatchback, people mover, coupe, convertible, four-wheel drive or mini bus rented from a licensed motor vehicle rental company or agency.

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

transport provider means a properly licensed coach operator, airline, cruise line, shipping line or railway company.

unattended means not on **your** person or within **your** sight and reach.

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 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 that **We** will not pay for. It is deducted from **your** claim if it is approved by **us**. The excess applies per event i.e. if **you** fall over and need medical treatment, and smashed **your** smart phone in the fall, the excess will be deducted once.

The excess, if applicable, applies to any claim arising from a separate event . The excess amount and benefits that the excess applies to are shown in the benefits tables, pages 7-11.

The excess amount will be shown on **your** Certificate of Insurance.

Claim example: You have a \$250 excess on your policy. If you made a claim for \$2,500 under Benefit 1: Emergency Medical and Dental Expenses Overseas, you already paid the expenses and we approve your claim, we would deduct the \$250 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 may ask you to pay the \$250 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 \$2,250.

In some circumstances, prior to **your** entry into the policy or when **you** apply for cover for **your existing medical conditions**, whichever occurs later, **we** may impose an extra or increased excess for claims arising from **existing medical conditions**. **We** will inform **you** in writing if this applies. These will be set out in **your** Certificate of Insurance or in a letter from **our** medical assessment team.

2. Limits of liability

The limits of **our** liability for each benefit of the policy are the amounts shown in the relevant table for the plan selected (see pages 51-74) except where **we** have notified **you** in writing of different limits such as on **your** Certificate of Insurance.

3. Claims

- a. **You** must report any loss or theft of luggage, personal effects, travel documents or money to the police, the **Transport Provider** or accommodation provider as relevant within 7 days of **you** first becoming aware of the loss or theft. **You** should obtain a report confirming the incident to submit to **us** with **your** claim.
- b. **You** must take all reasonable steps to prevent or minimise a claim.
- c. **You** must not make any offer, promise of payment or admit any liability without **our** consent.
- d. **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.
- e. **You** must at **your** own expense, supply any documents in support of **your** claim which **we** may request, such as a police report, a Property Irregularity Report (PIR), receipts, valuations, a repair quote, a death certificate and/or medical certificate.
- f. For claims relating to a mobile phone or device with phone capabilities **you** must supply **us** with the IMEI (International Mobile Equipment Identity). **You** must block the IMEI number (by Australian telecommunication providers) of the stolen or lost mobile phone or device.



- g. You must co-operate fully in the assessment or investigation of **your** claim.
- h. When making a claim, **you** are responsible for assisting **us** and acting in an honest and truthful manner. 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 on a Domestic or Domestic Cancellation Plan **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 Goods and Services Tax (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.

4. Claims are payable in Australian dollars

All claims and amounts payable are paid in Australian dollars at the rate of exchange applicable at the time the expenses were incurred. **We** will pay **you**, unless **you** tell **us** to pay someone else, by direct credit to an Australian bank account **you** nominate. In the case of **your** death **we** will pay **your** estate.

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

In the case that policy condition 7. Other insurance (page 48) does not apply, if **you** can make a claim against someone in relation to a loss or expense in respect of any of the covers provided and they do not pay **you** the full amount of **your** claim, **we** will make up the difference. **You** must claim from them first.

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 the policy or to choose to defend any action brought against **you**. **You** must provide reasonable assistance to **us**.

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

1. To **us**, **our** costs (administration and legal) arising from the recovery
2. To **us**, an amount equal to the amount that **we** paid to **you** in respect of any of the covers provided
3. To **you**, **your** uninsured loss (less **your** excess)
4. To **you**, **your** excess.

Once **we** pay **your** total loss, **we** will keep all money left over.



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

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

7. Other insurance

If you are insured, or entitled to receive a benefit or make a claim, under any other insurance policy in respect of the same loss as **your** claim under **our** covers, then:

- **you** must give **us** full details of the other insurance policy,
- to the extent permitted by law, **we** will not be liable to provide indemnity until the indemnity amount under any other policy is exhausted, or
- **we** may seek, from the other insurer, contribution for any amounts **we** have paid.

8. Subrogation

We may, at **our** discretion, undertake in **your** name and on **your** behalf, control and settlement of proceedings for **our** own benefit to recover compensation or secure indemnity from any party in respect of any of the covers provided.

You must assist **us** and give **us** permission to do everything required to recover compensation or secure indemnity from other parties, to which **we** may become entitled or subrogated, upon **us** accepting **your** claim in respect of any of the covers provided. This is regardless of whether **we** have yet paid **your** claim, whether or not the amount **we** pay **you** is less than full compensation for **your** loss or whether **your** claim is paid under a non-indemnity or an indemnity clause.

9. Policy interpretation

All insurance covers will be interpreted in accordance with the law of New South Wales, Australia.

10. Emergency assistance

Where **your** claim is excluded or falls outside the coverage provided, the giving of emergency assistance will not in itself be an admission of liability.

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 **our** emergency assistance, the Commonwealth Bank, Cover-More or **us**.

11. 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.



12. Sanctions

Notwithstanding any other terms, **we** shall not be deemed to provide cover or make any payments or provide any service or benefit to any person or other party to the extent that such cover, payment, service, benefit and/or any business or activity of the person would violate any applicable trade or economic sanctions law or regulation.

13. Special conditions, limitations, excesses and amounts payable

If **you**:

- a. want cover for an **existing medical condition** or pregnancy, which does not satisfy the provisions set out on pages 25-32, **you** must complete a health assessment. **we** will notify **you** of the outcome.

If **we** are able to approve cover for the condition(s) or pregnancy **you** must pay an extra premium to **us**. Cover may be subject to special conditions, limitations, limits and excesses.

- b. in the last 5 years have:

- i. made 3 or more travel insurance claims
- ii. had insurance declined or cancelled or had a renewal refused or claim rejected, or
- iii. been in prison or had any criminal conviction (other than driving offences)

cover must be separately applied for and accepted by **us**. It may be subject to special conditions, limitations, excesses and amounts payable.

We will notify **you** in writing of these before **we** issue the policy.

14. Automatic reinstatement of sums insured

If **you** purchase the Annual Multi-Trip Policy the limits of liability under each benefit of the policy are automatically reinstated on completion of each **journey** and in respect of Benefit 12 (Luggage and Travel Documents), also once on each **journey**.

15. Policy conditions applying to Benefit 1, 2 and 21 only

- a. **We** have the option of returning **you** to Australia if the costs 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 **your** claim is approved by **us** and it was arranged by, and deemed necessary by, **our** emergency assistance network.



- c. If we request that you be moved to another hospital, return to Australia or be evacuated to another country and you refuse, we will only consider:
 - i. your costs and expenses per Benefits 1 and 2 or Benefits 1, 2 and 21 (as applicable) incurred up to the time of our request, and
 - ii. the lesser of:
 - an amount equivalent to the costs and expenses per Benefits 1 and 2 or Benefits 1, 2 and 21 (as applicable) that you would have incurred after our request had you moved to another hospital, returned to Australia or been evacuated to another country as requested, or
 - your costs and expenses actually incurred after our request.
- d. 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 advisers, pay to upgrade you to a single room.
- e. 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.

16. Policy conditions applying to Benefits 17, 18 and 19 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.

17. Non-Australian residents travelling to Australia – Inbound Plan

This policy condition applies if you have paid the Inbound Plan amount payable and you are a non-Australian resident. In this policy wording (other than in this Policy condition, the second bullet point on page 42, Benefit 1 and Benefit 21):

- a. the word "Australia" should be replaced with your country of residence, and
- b. the word "overseas" should be interpreted to mean a place outside your country of residence.

18. Already travelling

Not available on the Inbound Plan

If you purchase this policy on your trip after leaving home, this cover is subject to a 3 day no-cover period. This means there is no cover under any section of the policy for any event that has occurred already or that arises within the first 3 days of buying the policy.



The benefits

A summary of the benefits and limits is shown on pages 7-11.

For all benefits, please also refer to the Policy conditions (pages 46-50) and General exclusions (pages 75-78).

Benefit 1: Emergency Medical and Dental Expenses Overseas

Overseas medical expenses

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 provided outside Australia by or on the advice of a qualified medical practitioner.

Also includes the usual and customary cost of emergency repatriation or evacuation. In all cases the cost of evacuation or to bring **you** back to Australia will only be met if **your** claim is approved by **us** and it was arranged by and deemed necessary by **our** emergency assistance network.

Overseas dental expenses

If during the **period of insurance** you suffer a **disabling** injury, sickness or disease we will pay the usual and customary cost of emergency dental treatment provided outside Australia by or on the advice of a qualified medical practitioner or dentist to relieve pain or temporarily restore function. For example, if **you** have a sore tooth and need a regular filling or if a capped front tooth breaks and a temporary cap is required.

Please note

Cover applies for a maximum of 12 months from the date of suffering the **disabling** injury, sickness or disease.

If any costs or expenses are incurred without **our** approval and before contacting **us**, we will only cover any such costs or expenses or for any evacuation/repatriation or airfares if **we** would have approved them up to an amount **we** would have otherwise incurred, had contact been made and approval provided.

Overseas medical and dental expenses cover may end less than 12 months from the date of suffering the **disabling** injury, sickness or disease as **we** do not provide cover if these expenses are incurred outside the **period of insurance**. In certain circumstances The **period of insurance** will automatically extend for a period of time – see Policy condition 11. Free extension of insurance on page 48 for more information.

The maximum benefit limit for this section is:

Comprehensive	Essentials	Medical Only	Cancellation Only	Inbound	Domestic	Non-Medical
\$Unlimited	\$Unlimited	\$Unlimited	\$0	\$10,000,000	\$0	\$0

We will not pay for:

1. medical treatment, dental treatment or ambulance transportation provided in Australia.

If **you** are cruising and have paid the additional premium for Cruise Cover, this exclusion does not apply to medical treatment provided while 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 while the ship is tied up in an Australian port



2. dental expenses involving the use of precious metals, teeth whitening or involving cosmetic dentistry.
3. continuation or follow-up 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**, or
6. private medical or hospital treatment where public-funded services or care is available, including medical or hospital treatment under any Reciprocal Health Agreement between Australia and the government of any other country unless **we** agree to the private treatment.

Benefit 2: Hospital Incidentals

If **you** are hospitalised for more than 48 continuous hours while **you** are overseas and **your** claim is approved, **we** will also reimburse incidental expenses **you** pay for, such as TV rental, newspapers and/or hospital phone calls. **We** will reimburse up to \$50 for each 24 hour period.

The maximum benefit limit for this section is:

Comprehensive	Essentials	Medical Only	Cancellation Only	Inbound	Domestic	Non-Medical
\$5,000	\$0	\$0	\$0	\$1,000	\$0	\$0

Benefit 3: Overseas Rent

While on **your journey**, if **you** suffer a **disabling injury, sickness or disease** and on the advice of the overseas medical practitioner **you** are unable to attend **your work** overseas for a period of more than 5 consecutive days, **we** will pay up to \$1,000 per week for **your** pre-arranged rental or boarding accommodation costs outside Australia.

This benefit is only payable if **your** inability to attend **your work** occurs within 7 days of the onset of the **disabling injury, sickness or disease**.

The maximum benefit limit for this section is:

Comprehensive	Essentials	Medical Only	Cancellation Only	Inbound	Domestic	Non-Medical
\$5,000	\$2,500	\$0	\$0	\$0	\$0	\$0

Benefit 4: Additional Expenses – Your Health

1. If you become sick

Cover is subject to the written advice of the treating qualified medical practitioner and acceptance by **our** emergency assistance team. If **your** claim is coverable, **we** or **our** emergency assistance team will not unreasonably withhold or delay **our** acceptance.



If during the **period of insurance** 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, or
- c. one person (e.g. a **relative**) (if **you** don't have a travelling companion with **you** already) who travels 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.

We will also pay the reasonable expenses incurred in returning **your rental vehicle** to the nearest depot if **you** suffer a **disabling injury, sickness or disease** provided that, on the written advice of the treating qualified medical practitioner, **you** are unfit to drive it.

2. If you die

If you die as a result of a **disabling injury, sickness or disease** during your **period of insurance**, we will pay:

- a. the reasonable costs incurred overseas, charged by a funeral director for arranging **your** funeral service and a cemetery for **your** burial, or a crematorium for **your** cremation incurred overseas, and
- b. the cost of bringing **your** remains to Australia, including from the inbound port or airport to **your home** or nominated funeral home.

Sub-limits

In either event the maximum amount **we** will pay in total will not exceed \$20,000.

If **you** hold a valid Schengen Visa and **you** die in a Schengen member state, in either event, the maximum amount **we** will pay in total will not exceed 30,000EUR for expenses incurred in that Schengen member state.

For approved claims under this benefit and Benefit 7 for the same or similar **additional** expenses or prepaid travel costs over the same period, **we** pay the higher of the 2 amounts claimed, not both.

The maximum benefit limit for this section is:

Comprehensive	Essentials	Medical Only	Cancellation Only	Inbound	Domestic	Non-Medical
\$Unlimited	\$Unlimited	\$Unlimited	\$0	\$Unlimited	\$10,000*	\$0

*Combined limit for benefit 4, 5, 6 & 7

We will not pay for:

1. any costs or expenses prior to **you** being certified by a qualified medical practitioner as unfit to travel.



Benefit 5: Additional Expenses – Non-travellers

If a relative or your business partner not travelling with you becomes sick

We will pay reasonable **additional** transport expenses at the same fare class as originally booked if **you** are required to return home due to the sudden **disabling injury, sickness or disease** or death of a **relative or your business partner**.

For approved claims under this benefit and Benefit 7 for the same or similar **additional expenses** or prepaid travel costs over the same period, **we** pay the higher of the 2 amounts claimed, not both.

The maximum benefit limit for this section is:

Comprehensive	Essentials	Medical Only	Cancellation Only	Inbound	Domestic	Non-Medical
\$50,000	\$50,000	\$50,000	\$0	\$50,000	\$10,000*	\$50,000

*Combined limit for benefit 4, 5, 6 & 7

We will not pay for claims caused by:

1. an **epidemic, pandemic** or outbreak of an infectious disease or any derivative or mutation of such viruses.
2. the sudden disabling injury, sickness or disease or death of a **relative or your business partner** who is not travelling, unless at the **relevant time** that person:
 - a. in the last 12 months, had not been hospitalised (including day surgery or emergency department attendance) for a condition that was in any way related to, or exacerbated by, the condition that gave rise to the claim
 - b. 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
 - c. was residing 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
 - d. was not on a waiting list for, or did not know (they needed surgery, inpatient treatment or tests at a hospital or clinic
 - e. did not have a drug or alcohol addiction, and
 - f. did not have a **terminal illness**.

If any point a-f cannot be met e.g. if **your** non-travelling **relative** was in a nursing home or did have a **terminal illness**, which means **your** claim would otherwise be excluded, **we** will pay no more than \$1,000 under all Sections of the policy combined.



Benefit 6: Additional Expenses – Other

1. If your home is destroyed by fire, earthquake or flood

We will pay the reasonable additional transport expenses at the same class as originally booked for **your early return home** if it is totally destroyed by fire, earthquake or flood while **you are on your journey**.

2. Other circumstances

We will pay **your reasonable additional accommodation (room rate only) and additional transport expenses**, at the same fare class and accommodation standard as originally booked, 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. disruption of **your scheduled transport** because of a **cyber incident** provided **you** act reasonably in avoiding **additional costs**
- c. loss of passport or travel documents except involving government confiscation or articles sent through the mail
- d. a **natural disaster**
- e. a collision of a motor vehicle, watercraft, aircraft or train in which **you** are travelling, or
- f. **your scheduled transport** being delayed for at least 12 hours due to severe weather conditions. **We** will pay up to \$300 providing written confirmation from the **transport provider** has been obtained. If **you** are unable to provide **us** with a copy of the relevant report confirming the delay, **you** must provide **us** with a reasonable explanation and details of the time and place the delay occurred, including any contact details **you** were provided with for the provider of the scheduled transport.

For approved claims under this benefit and Benefit 7 for the same or similar **additional expenses** or prepaid travel costs over the same period, **we** pay the higher of the 2 amounts claimed, not both.

The maximum benefit limit for this section is:

Comprehensive	Essentials	Medical Only	Cancellation Only	Inbound	Domestic	Non-Medical
\$50,000	\$50,000	\$50,000	\$0	\$50,000	\$10,000*	\$50,000

*Combined limit for benefit 4, 5, 6 & 7

We will not pay for:

1. claims caused by an **epidemic, pandemic** or outbreak of an infectious disease or any derivative or mutation of such viruses.



Benefit 7: 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 that would have been incurred had the journey been cancelled), or**
2. **you have to cancel your 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 \$4,000 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 up to the current market value of an equivalent booking.

The proportion of any trip costs for a travelling companion not insured on this policy is not claimable. This applies even if the trip was paid for by someone insured on this policy.

For approved claims under this benefit and Additional Expenses (Benefits 4-6) for the same or similar **additional expenses** or prepaid travel costs over the same period, **we** pay the higher of the 2 amounts claimed, not both.

The maximum benefit limit for this section is:

Comprehensive	Essentials	Medical Only	Cancellation Only	Inbound	Domestic	Non-Medical
\$Cover chosen^	\$Cover chosen^	\$0	\$Cover chosen^	\$Cover chosen^	\$10,000*	\$Cover chosen^{**}

*Combined limit for benefit 4, 5, 6 & 7

^Shown on **your** Certificate of Insurance

**See exclusion 4 below

Please note: This policy does not cover claims relating to government travel bans; "Do not travel" warnings; government directed border closure; or mandatory quarantine or self-isolation requirements related to cross area, border, region or territory travel.



We will not pay for claims caused by:

1. transport provider cancellations, delays or rescheduling other than when caused by strikes
2. your or any other person's unwillingness or reluctance to proceed with the **journey** or deciding to change plans
3. you cancelling or amending **your journey** prior to being certified by a qualified medical practitioner as unfit to travel
4. the death or sudden disabling injury, sickness or disease of a **relative** or **your business partner** who is not travelling, unless at the relevant time that person:
 - a. in the last 12 months, had not been hospitalised (including day surgery or emergency department attendance) for a condition that was in any way related to, or exacerbated by, the condition that gave rise to the claim
 - b. 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)
 - c. was residing 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
 - d. was not on a waiting list for, or did not know they needed surgery, inpatient treatment or tests at a hospital or clinic
 - e. did not have a drug or alcohol addiction, and
 - f. did not have a **terminal illness**.

If any point a-f cannot be met e.g. if **your non-travelling relative** was in a nursing home or did have a **terminal illness**, which means **your** claim would otherwise be excluded, **we** will pay no more than \$1,000 under all Sections of the policy combined

5. the health or death of any other person (not listed in point 4)
6. 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.
7. failure by **you** or another person to obtain the relevant visa, passport or travel documents
8. errors or omissions by **you** or another person in a booking arrangement
9. the standards or expectations of **your** prepaid travel arrangements being below or not meeting the standard expected
10. 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 service such as Airbnb and Uber), person or agency to pass on monies to operators or to deliver promised services
11. a request by **your employer**, **your** leave application being denied, or **your** leave being revoked. This exclusion does not apply if **you** are a full-time member of the Australian Defence Force or of federal, state or territory emergency services (e.g. police, fire, ambulance, paramedic) and **your** leave is revoked



12. 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.

However, if a tour or river cruise, that is prepaid and overnight, is cancelled due to a lack of numbers **we** will pay in respect of **your** other prepaid arrangements the lesser of:

- a. necessary amendment costs, or
- b. the non-refundable unused portion of costs if **you** cancel the trip.

In any case the most **we** will pay is the lesser of \$800 or **your** sum insured under this section of the policy.

13. customs and immigration officials acting in the course of their duties or **you** travelling on incorrect travel documents.

14. an act of terrorism.

15. an epidemic, pandemic or outbreak of an infectious disease or any derivative or mutation of such viruses.

Benefit 8: Travel Delay Expenses

If your pre-booked transport is temporarily delayed for at least 6 hours due to an unforeseeable circumstance outside **your** control (including a cyber incident), **we** will reimburse **you** up to \$300 on the for additional accommodation (room rate only) 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. If **you** are unable to obtain confirmation from the **transport provider**, **you** must provide **us** with a reasonable explanation and details on **your** request of this information, including their contact details. **You** must also provide **us** with receipts for the expenses incurred.

The maximum benefit limit for this section is:

Comprehensive	Essentials	Medical Only	Cancellation Only	Inbound	Domestic	Non-Medical
\$2,000	\$0	\$0	\$0	\$2,000	\$750	\$2,000

We will not pay for claims caused by:

1. an epidemic, pandemic or outbreak of an infectious disease or any derivative or mutation of such viruses.



Benefit 9: Special Events

If, due to an unforeseeable circumstance outside **your** control, **your journey** is delayed resulting in **you** being unable to arrive in time to attend a wedding, funeral, prepaid conference, 25th or 50th wedding anniversary or sporting event, which cannot be postponed due to **your** late arrival, **we will pay for:**

1. the reasonable additional cost of using alternative public transport to arrive at **your** destination on time, and
2. the cost of the unused connection (if **you** have to buy a new connection) less any refund or credit **you** are entitled to from the supplier of that connection.

The maximum benefit limit for this section is:

Comprehensive	Essentials	Medical Only	Cancellation Only	Inbound	Domestic	Non-Medical
\$5,000	\$0	\$0	\$0	\$0	\$2,000	\$5,000

We will not pay for claims caused by:

1. an epidemic, pandemic or outbreak of an infectious disease or any derivative or mutation of such viruses.

Benefit 10: Festivals and Gigs

If, due to an unforeseeable circumstance outside **your** control, **your journey** is delayed resulting in **you** being unable to arrive in time to attend a prepaid music festival or concert, which cannot be postponed 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:

Comprehensive	Essentials	Medical Only	Cancellation Only	Inbound	Domestic	Non-Medical
\$2,000	\$2,000	\$0	\$0	\$0	\$2,000	\$5,000

We will not pay for claims caused by:

1. an epidemic, pandemic or outbreak of an infectious disease or any derivative or mutation of such viruses.

Benefit 11: Resumption of Journey

If **you** are required to return **home** due to the sudden serious injury, sickness, disease or death of a **relative** or **your** business partner, and the circumstances of **your** claim would be approved under Benefit 5, **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. 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 **your** 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 Benefit 7 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:

Comprehensive	Essentials	Medical Only	Cancellation Only	Inbound	Domestic	Non-Medical
\$3,000	\$0	\$0	\$0	\$0	\$0	\$0

Benefit 12: Luggage and Travel Documents

1. Loss, theft or damage

If, during the **period of insurance**, **your** luggage or personal effects are lost, stolen or damaged, after deducting depreciation as shown in the depreciation table, **we** will repair the item if it is practical and economic to do so. If it is not practical and economic to repair the item and depreciation is not applicable, **we** will replace the item or provide **you** with a replacement voucher if the item is available from **our** usual suppliers. If the above do not apply, **we** will pay **you** the monetary value of the item.

If **your** prescription medication is lost, stolen or damaged during the **period of insurance** **we** will also pay up to \$500 for expenses incurred overseas to replace that prescription medication.

If **your** claim for loss or theft can be approved but **your** items are found in the meantime and can be posted to **you**, **we** will instead pay up to \$500 for postage costs so **you** can get **your** items back.

It is **your** responsibility to provide **us** with evidence to support **your** claim for an item. This is 'proof of ownership'.

- **We** will accept the original or a copy of a purchase receipt, invoice and/or bank statement showing the purchase, the date of the purchase and the amount paid.
- **We** may consider valuation certificates (issued prior to the Relevant Time), ATM receipts and warranty cards with accompanying bank statement of purchases.
- **We** will not accept photographs, packaging or instruction manuals as proof of ownership.

Depreciation table

This policy operates on an indemnity basis which means settlement of **your** claim is based on the value of an item at the time of the loss. Depreciation takes into account the amount paid originally for the item, its age, wear and tear and advances in technology.

We will reduce the value of the items because of age, wear and tear, and advances in technology according to the table following:



Items				
Age of item and depreciation that applies	Jewellery (not watches or costume jewellery)	Communication devices, all computers, electrical devices, electronics equipment, phones, all, photographic equipment, smart watches, tablet computers	Any other items	
New-24 months	0%	0%	0%	
25-36 months	0%	60%	36%	
More than 36 months	0%	60%	60%	

This means depreciation will not be deducted from items less than 2 years old at the time of loss. Items greater than 2 years old will have the percentage amount shown in the depreciation table deducted.

Item limits

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:

Comprehensive	Essentials	Inbound	Domestic	Non-Medical
\$500	\$300	\$200	\$300	\$500

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.

Optional covers

- Where an additional premium has been paid for Electronic Gadgets cover, the claim will be assessed based on the item and item limits specified on page 18. Depreciation applies. For multiple items, the overall increase in limits cannot exceed \$5,000.
- Where an additional premium has been paid to increase the luggage item limit for a single item, the claim will be assessed based on the item and item limit specified on the Certificate of Insurance. Reasonable depreciation applies. For multiple items, the overall increase in limits cannot exceed \$7,000.



2. Travel document replacement

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 documents prior to, and after, the loss or theft.

3. Automatic reinstatement of sum insured

In the event that a claimable loss or damage to your luggage and personal effects is incurred, we will allow you one automatic reinstatement of the sum insured stated in the plan selected while on your journey.

The maximum benefit limit for this section is:

Comprehensive	Essentials	Medical Only	Cancellation Only	Inbound	Domestic	Non-Medical
\$10,000	\$5,000	\$0	\$0	\$3,000	\$3,000	\$10,000

We will not pay for:

1. loss or theft that is not reported to the:
 - a. police or security personnel
 - b. responsible **transport provider** (if your items are lost or stolen while travelling with a **transport provider**), or
 - c. accommodation provider.

All cases of loss or theft must be reported as soon as possible and within 7 days. A copy of the relevant report must be submitted for any claim involving loss or theft. If you are unable to provide us with a copy of the relevant report, you must provide us with a reasonable explanation and details of the time and place you made the report, including their contact details

2. damage, loss or theft of valuables placed in the care of a **transport provider** unless security regulations prevented you from keeping the valuables with you
3. items left **unattended** in any motor vehicle (for example, a car, campervan or motorhome) or towed land vehicle overnight even if they were in a concealed storage compartment
4. items left **unattended** in any motor vehicle (for example, a car, campervan or motorhome) or towed land vehicle during daylight hours, unless they were stored in a concealed storage compartment of a locked motor vehicle or towed land vehicle and forced entry was gained
5. any amount exceeding \$500 per item and \$2,000 in total for all items left **unattended** in any motor vehicle (for example, a car, campervan or motorhome) or towed land vehicle
6. items left **unattended** in a **public place**
7. loss, theft or damage to drones (including attached and unattached accessories) while in use
8. sporting equipment (including bicycles) damaged, lost or stolen while in use



9. items sent under the provisions of any freight contract or any luggage forwarded in advance or which is unaccompanied. This exclusion for unaccompanied items will be waived if **your** claim for lost stolen items can be approved but **your** items are found in the meantime and can be posted to **you**
10. 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**
11. damage to fragile or brittle articles unless caused by a fire or motor vehicle collision. This exclusion does not apply to spectacles, lenses in cameras and video cameras, laptop and tablet computers, or binoculars
12. damage caused by atmospheric or climatic conditions, wear and tear, vermin or any process of cleaning, repairing, restoring or alteration
13. electrical or mechanical fault or breakdown
14. information stored on any electronic device or other media, including digital photos, downloaded files, electronic applications, programmed data, software or any other intangible asset
15. bonds, coupons, gift cards, stamps, vouchers, warranties, pre-loaded or rechargeable cards including but not limited to phone, debit or stored value cards.
16. bullion, deeds, insurance premiums, manuscripts, negotiable instruments, precious metals or securities
17. items described in Benefit 14 Money, or
18. a mobile phone or device with phone capabilities if **you** are unable to supply the IMEI (International Mobile Equipment Identity).

Benefit 13: Luggage Delay Expenses

If all **your** luggage is delayed by a **transport provider** during the **journey** for more than 12 hours **we** will reimburse **you** up to:

- a. \$300 per item (\$1,000 in total) for underwear, socks, toiletries, non-prescription medication and change of shoes and clothing (and a bag) **you** bought after a 12 hour delay and before the luggage was returned to **you**, and
- b. \$100 for transport to retrieve **your** luggage.

The original receipts for the items and confirmation of the length of delay from the **transport provider** must be produced in support of **your** claim.

This section does not apply on the leg of the **journey** that returns **you home**.

What **you** must do if you want to make a claim

- Notify **your transport provider** or their handling agents of the situation as soon as possible after arriving at the destination. The quicker **you** report the fact **your** luggage has been delayed, the better chance the **transport provider** has of finding it and reuniting it with **you** promptly.
- Obtain a report from them as soon as possible to give to **us** with **your** claim so **we** have evidence of what happened.
- Get receipts for the essential items **you** bought to tide **you** over. **You** need to give **us** the receipts proving the amount **you** spent and that **you** waited at least 12 hours before buying essential items. **We** need receipts so **we** can reimburse **you**.



The maximum benefit limit for this section is:

Comprehensive	Essentials	Medical Only	Cancellation Only	Inbound	Domestic	Non-Medical
\$1,100	\$0	\$0	\$0	\$1,100	\$0	\$1,100

We will not pay for:

1. delay that is not reported to the responsible **transport provider**. All reports must be confirmed in writing by the **transport provider** at the time of making the report. If **you** are unable to provide **us** with a copy of the **transport provider's** report, **you** must provide **us** with a reasonable explanation and details of the time and place **you** made the report, including their contact details.

Benefit 14: Money

We will reimburse **you** for cash, bank or currency notes, postal or money orders accidentally lost, or stolen from **your** person, or stolen from a locked safe or safety deposit box, during the **period of insurance**.

The maximum benefit limit for this section is:

Comprehensive	Essentials	Medical Only	Cancellation Only	Inbound	Domestic	Non-Medical
\$250	\$0	\$0	\$0	\$200	\$0	\$250

We will not pay for:

1. loss or theft that is not reported to the:
 - a. police or security personnel
 - b. responsible **transport provider** (if **your** items are lost or stolen while travelling with a **transport provider**), or
 - c. accommodation provider.

All cases of loss or theft must be reported as soon as possible and within 7 days. A copy of the relevant report must be submitted for any claim involving loss or theft. If **you** are unable to provide **us** with a copy of the relevant report, **you** must provide **us** with a reasonable explanation and details of the time and place **you** made the report, including their contact details, or

2. cash, bank or currency notes, postal or money orders not on **your** person or stored in a locked safe or safety deposit box at the time of the loss or theft.



Benefit 15: Rental Vehicle Insurance Excess

This cover applies if you:

- a. hire a **rental vehicle**
- b. are the nominated driver on the **rental vehicle** agreement, and
- c. have purchased motor vehicle insurance or a damage waiver from the rental company or agency **you** rented the **rental vehicle** from.

If the **rental vehicle** is damaged or stolen while in **your** control during the **journey** we will pay the lower of the **rental vehicle** insurance excess or the repair costs to the **rental vehicle** that **you** become liable to pay.

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

If you paid for one of the motorcycle/moped riding cover options, **we** will also include cover for the insurance excess **you** become liable to pay for damage to or theft of a motorcycle or moped rented from a licensed motor vehicle rental company. The word "rental vehicle" should be interpreted to include motorcycle or moped.

The maximum benefit limit for this section is:

Comprehensive	Essentials	Medical Only	Cancellation Only	Inbound	Domestic	Non-Medical
\$6,000∞	\$0	\$0	\$0	\$Nil∞	\$4,000∞	\$6,000∞

∞Unless additional cover purchased. As shown on **your** Certificate of Insurance.

We will not pay for:

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

Domestic Plan: Bonus cover for the insurance excess on your personal vehicle

This cover applies if **you** have comprehensive car or motorcycle insurance on **your** own vehicle.

If **your** personal car or motorcycle is damaged or stolen while in **your** control during the **period of insurance**, **we** will reimburse **you** up to \$2,500 for:

- a. the prescribed excess paid under **your** comprehensive personal car or motorcycle policy of insurance, relative to the loss or damage to **your** own car or motorcycle and which is not legally recoverable from any other source, or
- b. the actual costs paid for any repairs to **your** own car or motorcycle should they be less than the prescribed excess applicable under the comprehensive personal car or motorcycle policy of insurance, relative to the damage to **your** own car or motorcycle and which is not legally recoverable from any other source.



Benefit 16: Hijacking

We will pay you \$1,000 for each continuous 24 hour period **you** are forcibly detained on a means of public transport due to it being hijacked by persons using violence or threat of violence during **your** journey.

The maximum benefit limit for this section is:

Comprehensive	Essentials	Medical Only	Cancellation Only	Inbound	Domestic	Non-Medical
\$6,000	\$0	\$0	\$0	\$0	\$0	\$0

Benefit 17: Loss of Income

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) requiring medical treatment overseas and:

- a. **you** become disabled within 30 days because of the injury
- b. the disablement continues for more than 30 consecutive days from the date of **your** return to Australia, and
- c. **you** lose all **your** income because **you** are unable to return to **your** usual place of employment in Australia as a result,

we will pay **you** up to \$1,733.33 per month on the Comprehensive Plan or \$250 per month on the Domestic Plan. This is for **your** monthly net of income tax wage for a maximum period of 3 months, starting from the 31st day after **your** return to Australia.

You must be under the regular care of, and acting in accordance with the instructions or advice of, a medical practitioner who certifies in writing that the disablement prevents **you** from gainful employment.

Cover for loss of income is limited to 6 months.

The maximum limit in respect of **accompanied children** is \$1,000 for each child.

The maximum benefit limit for this section is:

Comprehensive	Essentials	Medical Only	Cancellation Only	Inbound	Domestic	Non-Medical
\$10,400* (up to \$1,733.33 per month)	\$0	\$0	\$0	\$0	\$1,500* (up to \$250 per month)	\$0

*Maximum liability collectively for Sections 17, 18 and 19: Comprehensive – \$25,000, Domestic – \$10,000, and for Sections 18 and 19: Non-Medical – \$25,000



Benefit 18: Disability

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 \$10,000 for each child.

The maximum benefit limit for this section is:

Comprehensive	Essentials	Medical Only	Cancellation Only	Inbound	Domestic	Non-Medical
\$25,000*	\$0	\$0	\$0	\$10,000	\$10,000*	\$25,000*

*Maximum liability collectively for Sections 17, 18 and 19: Comprehensive – \$25,000, Domestic – \$10,000, and for Sections 18 and 19: Non-Medical – \$25,000

Benefit 19: Accidental Death

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 injury**.

The maximum limit in respect of **accompanied children** is \$1,000 for each child.

The maximum benefit limit for this section is:

Comprehensive	Essentials	Medical Only	Cancellation Only	Inbound	Domestic	Non-Medical
\$25,000*	\$0	\$0	\$0	\$10,000	\$10,000*	\$25,000*

*Maximum liability collectively for Sections 17, 18 and 19: Comprehensive – \$25,000, Domestic – \$10,000, and for Sections 18 and 19: Non-Medical – \$25,000



Benefit 20: 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:

Comprehensive	Essentials	Medical Only	Cancellation Only	Inbound	Domestic	Non-Medical
\$2,500,000	\$1,500,000	\$2,500,000	\$0	\$1,000,000	\$200,000	\$2,500,000

We will not pay for liability arising:

1. where **you** become liable to pay somebody who is a member of **your** family or travelling party, **your** travel companion or employed by **you** or deemed to be employed by **you**
2. from loss of, or damage to, property belonging to, or in the care, custody or control of **you**, **your** travel companion, a **relative** or an employee of any of **you**
3. from the conduct by **you** of any profession, trade or business
4. out of the use, or ownership by **you**, of any aircraft, drone, firearm, weapon, waterborne craft or mechanically-propelled vehicle
5. out of occupation or ownership of any land, buildings or immobile property
6. out of any wilful or malicious act
7. out of the transmission of an illness, sickness or disease
8. from punitive, exemplary or aggravated damages or any fine or penalty
9. out of **your** liability under a contract or agreement, unless **you** would be liable if that contract or agreement did not exist
10. out of assault and/or battery committed by **you** or at **your** direction, or
11. out of any act intended to cause bodily **injury**, property damage or liability done by **you** or any person acting with **your** knowledge, connivance or consent.



Benefit 21: Emergency Medical and Dental Expenses in Australia

Medical expenses

This benefit only applies if you have paid the Inbound Plan amount payable, you are a non-Australian resident and you are not an eligible person within the meaning of the *Health Insurance Act 1973* (Cth).

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 provided in Australia by, or on the advice of, a qualified medical practitioner.

Dental expenses

If during the **period of insurance** you suffer a **disabling injury, sickness or disease** we will pay the usual and customary cost of emergency dental treatment provided in Australia by or on the advice of a qualified dentist in order to relieve pain or temporarily restore function.

Please note

Cover applies for a maximum of 12 months from the date of suffering the **disabling injury, sickness or disease**.

Overseas medical and dental expenses cover may end less than 12 months from the date of suffering the **disabling injury, sickness or disease** as we do not provide cover if these expenses are incurred outside the **period of insurance**. In certain circumstances The **period of insurance** will automatically extend for a period of time – see Policy condition 11. Free extension of insurance on page 48 for more information.

The maximum benefit limit for this section is:

Inbound
\$1,000,000

We will not pay for:

1. medical treatment, dental treatment or ambulance transportation provided outside Australia
2. dental treatment involving the use of precious metals, teeth whitening or cosmetic dentistry
3. continuation or follow-up treatment (including medication) started prior to **your journey**
4. routine medical or dental treatment or prenatal visits
5. medical treatment, dental treatment or ambulance transportation provided in Australia if you are an Australian resident or a non-Australian resident who is an eligible person within the meaning of the *Health Insurance Act 1973* (Cth)
6. private medical or hospital treatment where public-funded services or care is available, including medical or hospital treatment under any Reciprocal Health Agreement between Australia and the government of any other country unless we agree to the private treatment, or
7. medical treatment, dental treatment or ambulance transportation provided in **your country of residence**.



Cruise Cover Benefits

The following benefits only apply to the Plans shown if Cruise Cover was selected and the additional premium for participating in multi-night cruising has been paid.

i. Medical and Dental Cover For Cruising

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 emergency dental treatment, which is provided while on board a cruise ship outside Australia by, or on the advice of, a qualified medical practitioner or dentist.

Cover applies for a maximum of 12 months from the date of suffering the **disabling injury, sickness or disease**.

The maximum benefit limit for this section is:

Comprehensive	Essentials	Medical Only	Inbound	Non-Medical
\$Unlimited	\$Unlimited	\$Unlimited	\$Unlimited	\$0

ii. Ship to Shore Medical Cover

If, during the **period of insurance**, you suffer a **disabling injury, sickness or disease** we will pay the usual and customary cost of emergency transportation, which is provided outside Australia by, or on the advice of, a qualified medical practitioner to evacuate you to the nearest onshore medical facility.

The maximum benefit limit for this section is:

Comprehensive	Essentials	Medical Only	Inbound	Non-Medical
\$Unlimited	\$Unlimited	\$Unlimited	\$Unlimited	\$0

iii. Sea Sickness Cover

If, during the **period of insurance**, while on board a cruise ship you suffer sea sickness we will pay the usual and customary cost of medical treatment, which is provided outside Australia by, or on the advice of, a qualified medical practitioner.

Cover applies for a maximum of 12 months from the date of suffering the **disabling injury, sickness or disease**.

The maximum benefit limit for this section is:

Comprehensive	Essentials	Medical Only	Inbound	Non-Medical
\$Unlimited	\$Unlimited	\$Unlimited	\$Unlimited	\$0



iv. Cabin Confinement

If, during the **period of insurance**, you suffer a **disabling injury, sickness or disease** and the treating medical practitioner on board the cruise ship orders **you** to be confined to **your cabin**, we will pay **you** up to \$100 per day provided that the period of confinement is at least 24 hours.

The maximum benefit limit for this section is:

Comprehensive	Essentials	Medical Only	Inbound	Non-Medical
\$1,500 (\$100 per 24 hour period)	\$0			

For Cruise Benefits i. – iv., We will not pay for:

1. medical treatment, dental treatment or ambulance transportation provided in Australia.

This exclusion does not apply to medical treatment provided while 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 while the ship is tied up in an Australian port

2. dental treatment involving the use of precious metals, teeth whitening or cosmetic dentistry
3. continuation or follow-up 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**, or
6. private medical or hospital treatment where public-funded services or care is available, including medical or hospital treatment under any Reciprocal Health Agreement between Australia and the government of any other country unless **we** agree to the private treatment.

v. Missed Port

If, during the **period of insurance**, you are on a **journey** from or to Australia and, due to an unforeseeable circumstance outside **your control**, you miss:

- a. **your pre-booked port**, or
- b. **your pre-booked connection**, where **you** have allowed the minimum connection time between transport as stipulated by **your transport provider**

we will pay the reasonable costs to use alternative public transport services to catch up on **your** planned itinerary. If **you** claim under this benefit, **you** are not entitled to make a claim under any other benefit of this policy for the same incident.



The maximum benefit limit for this section is:

Comprehensive	Essentials	Medical Only	Inbound	Non-Medical
\$1,000	\$1,000	\$1,000	\$1,000	\$1,000

We will not pay for claims caused by:

1. **transport provider** cancellations, delays or rescheduling other than when caused by mechanical failure or strike
2. an **act of terrorism**, or
3. an **epidemic, pandemic** or outbreak of a contagious disease or any derivative or mutation of such viruses.

vi. Missed Shore Excursion

If, due to an unforeseeable circumstance outside **your** control, **you** are unable to attend a shore excursion for which **you** hold a prepaid ticket or pass, **we** will pay for the non-refundable cost of the unused ticket. The original ticket must be submitted with **your** claim.

The maximum benefit limit for this section is:

Comprehensive	Essentials	Medical Only	Inbound	Non-Medical
\$1,000	\$1,000	\$1,000	\$1,000	\$1,000

We will not pay for claims caused by:

1. an **act of terrorism**, or
2. an **epidemic, pandemic** or outbreak of a contagious disease or any derivative or mutation of such viruses.

vii. Formal Wear Damaged, Lost or Stolen

If **your** formal wear is accidentally damaged, permanently lost or is stolen during **your journey**, **we** will pay the lesser of:

- the repair or replacement cost, or
- the original purchase price.

Our payment will not exceed the original purchase price of an item. Pairs or sets of formal wear (e.g. gloves, shoes and suits) are considered to be one item, not 2 or more separate items.



The maximum benefit limit for this section is:

Comprehensive	Essentials	Medical Only	Inbound	Non-Medical
\$1,000	\$500	\$500	\$1,000	\$500

We will not pay for:

1. lost, misplaced or stolen formal wear that is not reported within 24 hours to the:
 - a. police or security personnel
 - b. responsible **transport provider** (if **your** items are lost or stolen while travelling with a **transport provider**), or
 - c. accommodation provider.

All cases of loss or theft must be reported as soon as possible and within 7 days. A copy of the relevant report must be submitted for any claim involving loss or theft. If **you** are unable to provide **us** with a copy of the relevant report, **you** must provide **us** with a reasonable explanation and details of the time and place **you** made the report, including their contact details.

2. damage or loss caused by atmospheric or climatic conditions, wear and tear, vermin or any process of cleaning, repairing, restoring or alteration, or
3. items left **unattended** in a **public place**.

viii. Delayed Formal Wear

If, on the outward leg of **your journey**, **your** formal wear is delayed, misdirected or misplaced for over 12 hours from the time **you** boarded the cruise vessel and it is necessary to buy or hire replacement formal wear, **we will pay you** the reasonable expenses to do so.

The maximum benefit limit for this section is:

Comprehensive	Essentials	Medical Only	Inbound	Non-Medical
\$500	\$250	\$250	\$500	\$250

We will not pay for:

1. claims under this benefit if **you** are entitled to compensation from the bus line, airline, shipping line or rail authority **you** were travelling on for the relevant amount claimed. However, if **you** are not reimbursed the full amount, **we will pay** the difference between the amount of **your** expenses and what **you** were reimbursed, up to the limit of **your** cover.



ix. Marine Rescue Diversion

If the cruise vessel you are travelling on is obliged to carry out a marine rescue during **your journey**, we will give **you** \$100 for each 24 hour period the diversion lasts up to a maximum of 5 days.

Cover applies where the marine rescue is carried out according to international conventions governing the Law of the Sea and Search and Rescue.

The maximum benefit limit for this section is:

Comprehensive	Essentials	Medical Only	Inbound	Non-Medical
\$1,000 (\$100 per 24 hour period)	\$500 (\$100 per 24 hour period)	\$500 (\$100 per 24 hour period)	\$1,000 (\$100 per 24 hour period)	\$500 (\$100 per 24 hour period)



General exclusions

These exclusions apply to all covers described in this booklet unless specified otherwise. They are listed in no particular order. There are also specific exclusions.

We will not pay for:

1. any other loss, damage or additional expenses following on from the event for which **you** are claiming that is not covered under this insurance. Examples of such loss, damage or additional expense would be the cost of replacing locks after losing keys, costs incurred in preparing a claim or loss of enjoyment
2. claims 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
3. 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
4. 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
5. claims which in any way relate to ionising radiation or radioactive contamination caused by nuclear fuel or waste, or the radioactive, toxic explosive or other dangerous properties of any explosive nuclear equipment
6. claims arising from biological and/or chemical materials, substances, compounds or the like used directly for the purpose to harm or to destroy human life and/or create public fear
7. loss or damage caused by detention, confiscation or destruction by customs or other officials or authorities
8. claims arising from any unlawful act committed by **you**
9. claims arising from any government intervention, prohibition, sanction, regulation or restriction or court order
10. claims which in any way relate to circumstances **you** knew of, or a person in **your** circumstances would have reasonably known or foreseen, at the relevant time, that could lead to the **journey** being delayed, abandoned or cancelled
11. claims which in any way relate to, or are exacerbated by, any physiological or psychological signs or symptoms that **you** were aware of or a person in **your** circumstances reasonably should have been aware of at or before the relevant time, if **you**:
 - a. had not yet sought a medical opinion regarding the cause
 - b. were currently under investigation to obtain a diagnosis, or
 - c. were awaiting specialist opinion



12. claims 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 which in any way relate to, or are exacerbated by, any **existing medical condition** **you** or **your** travelling companion has

(For general exclusions 11-13, see Travel and health pages 24-32 for details of cover available to purchase and the terms that apply)

14. claims arising from the pregnancy of **you** or any other person if **you** are aware of the pregnancy at the **relevant time** and:

- a. where complications of this pregnancy or any previous pregnancy had occurred prior to this time
- b. it was a multiple pregnancy e.g. twins or triplets, or
- c. where the conception was medically assisted e.g. using assisted fertility treatment including hormone therapies or IVF

(See Pregnancy page 32 for details of cover available to purchase and the terms that apply)

15. claims arising from the:

- a. pregnancy of **you** or any other person after the start of the 24th week of pregnancy, or
- b. pregnancy of **you** or any other person where the problem arising is not an unexpected serious medical complication

16. claims 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

17. claims arising from **you** having elective medical or dental treatment or surgery, a cosmetic procedure or body modification (e.g. tattoos and piercings) during the **journey**, such as any complication, even if **your** **existing medical condition** has been approved by **us**

18. claims which in any way relate to **your** wilful or self-inflicted injury or illness, suicide or attempted suicide

19. claims which in any way relate to **your**:

- a. chronic use of alcohol
- b. substance abuse, drug abuse (whether over the counter, prescription or otherwise), or
- c. ingestion of any non-prescription drug or substance (e.g. marijuana, ecstasy, heroin)



20. claims involving, arising from or related to **your** impairment due to **you** drinking too much alcohol:

- a. which is evidenced by the results of a blood test which show that **your** blood alcohol concentration level is 0.19% or above. (The level of alcohol in **your** blood is called blood alcohol concentration (BAC). As a point of reference, a BAC of 0.19% is almost four times the legal driving BAC limit range in Australia which is currently 0.05%), or
- b. taking into account the following, where available:
 - i. the report of a medical practitioner or forensic expert
 - ii. the witness report of a third party
 - iii. **your** own admission, or
 - iv. the description of events **you** described to **us** or the treating medical professional (e.g. paramedic, nurse, doctor) as documented in their records

21. 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.

22. claims involving **you** travelling (during the **journey**) in **international waters** in a private sailing vessel or a privately registered vessel

23. claims involving participation by **you** or **your** travel companion in hunting or using hunting equipment or projectiles (e.g. shooting and archery), mountaineering (involving the use of climbing equipment, ropes, guides or oxygen), outdoor rock climbing (involving the use of climbing equipment, ropes or guides), trekking that reaches an altitude of more than 6,000 metres above sea level, sports activities in a **professional** capacity, parachuting, skydiving, hang gliding, BASE jumping, wingsuiting, potholing, canyoning, caving, fire walking, motocross, freestyle BMX riding, running with the bulls, rodeo riding, polo playing, scuba diving or underwater activities that involve using artificial breathing equipment (unless the maximum depth is no greater than 30 metres, and **you** or **your** travel companion have an open water diving licence)

24. claims involving participation by **you** (during the **journey**) in racing (other than swimming races of 10 kilometres or less, running races that are marathon distance or less), or outdoor rock climbing

(See *Adventure Activities Cover* pages 19-20 for details of optional cover available to purchase and the terms that apply)

25. claims involving participation by **you** during the **journey** in any adventure activity listed under Adventure or Adventure + add-ons

(See *Adventure Activities Cover* pages 19-20 for details of optional cover available to purchase and the terms that apply)

26. claims involving participation by **you** (during the **journey**) in motorcycling or moped riding for any purpose

(See *Motorcycle/Moped Riding Cover* page 21 for details of optional cover available to purchase and the terms that apply)

27. claims involving participation by **you** (during the **journey**) in snow skiing, snowboarding or snowmobiling

(See *Snow Sports: Snow Skiing, Snowboarding and Snowmobiling Cover* page 22 for details of optional cover available to purchase and the terms that apply), or

28. claims which in any way relate to **your** multi-night cruise, any multi-night cruise travel or that arise while on a multi-night cruise.

(See *Cruise Cover* page 15 for details of cover available to purchase and the terms that apply.)



29. any costs or expenses incurred if a government or public health authority mandatory quarantine or isolation order is imposed on **you** related to cross area, border, region or territory travel. This exclusion only applies to COVID-19 and applies regardless of **you** being diagnosed with COVID-19 or being directed by a local public health authority into a period of quarantine because they have classified **you** as having close contact with a person diagnosed with COVID-19
30. claims arising from or caused by COVID-19
31. claims for costs or expenses incurred outside the **period of insurance**. This exclusion does not apply to benefit Sections Benefit 11: Resumption of Journey, Benefit 12: Luggage and Travel Documents, Benefit 15: Rental Vehicle Insurance Excess and Benefit 20: Personal Liability, or
32. claims involving any event that is intentionally caused by **you** or by a person acting with **your** consent.



General information



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 fcs.gov.au for information.

Change of terms and conditions

From time to time, and where permitted by law, **we** may change parts of the Combined PDS/Financial Services Guide (FSG). **We** will issue **you** with a new Combined PDS/FSG, a Supplementary PDS or FSG or other compliant document to update the relevant details, except in limited cases.

Any updates, which are not materially adverse to **you** from the view of a reasonable person deciding whether to acquire this insurance, can be found on commbank.com.au/travelinsurance.

You can obtain a paper copy of any updated information, without charge, by calling Cover-More on 1300 467 951.

General Insurance Code of Practice

We are a signatory to the General Insurance Code of Practice (the Code) and support the Code. The objectives of the Code are:

- to commit **us** to high standards of service
- to promote better, more informed relations between **us** and **you**
- to maintain and promote trust and confidence in the general insurance industry
- to provide fair and effective mechanisms for the resolution of complaints and disputes **you** make about **us**, and
- to promote continuous improvement of the general insurance industry through education and training.

The Code Governance Committee is an independent body that monitors and enforces insurers compliance with the Code.

Further information about the Code or the Code Governance Committee and **your** rights under it is available at insurancecouncil.com.au/cop/ or by contacting us.



Cancelling your policy and refunds

If you cancel your policy within a cooling-off period of 21 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.

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 467 951 (within Australia) or +61 2 8907 5060 (from overseas), or email commbank@covermore.com.au.

We respect your privacy

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

Why your personal information is collected

We collect your personal information (including sensitive information) to help us in:

- 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 developing representatives, product and service research, data analysis and business strategy development.

Cover-More also collects your personal information to provide you with special offers of other services and products that may 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, also via email, fax, 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 reasons explained 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 overseas. 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 1988*. 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, please contact Cover-More using the methods shown on page 83.

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: PO Box 2027, North Sydney NSW 2059 Australia

Email: privacy.officerCBA@covermore.com.au

Call: 1300 72 88 22

Website: covermore.com.au/covermore_privacy_policy

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



Complaints and disputes resolution process

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

If you have a complaint about an insurance product we issued or the service you have received (from us or one of our representatives), please contact us. 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 1300 467 951
- Write to the Customer Relations Manager

Post: PO Box 2027, North Sydney NSW 2059

Email: customerrelationsCBA@covermore.com.au

We will acknowledge receipt of **your** complaint within 24 hours or as soon as practicable.

If **you** are not satisfied with our initial response, **you** may use our Internal Dispute Resolution process. To obtain a copy of our procedures, please contact us.

We expect that our internal dispute resolution process will deal fairly and promptly with **your** complaint, however, **you** may take **your** complaint to the Australian Financial Complaints Authority (AFCA) at any time.

AFCA is an independent dispute resolution scheme. **We** are a member of this scheme and **we** agree to be bound by its determinations about a dispute. AFCA provides fair and independent financial services complaint resolution that is free to **you**.

Their contact details are:

Australian Financial Complaints Authority

Call: 1800 931 678

Address: GPO Box 3, Melbourne VIC 3001

Email: info@afca.org.au

Website: afca.org.au

If **your** complaint or dispute falls outside the AFCA rules, **you** can seek independent legal advice or access any other external dispute resolution options that may be available to **you**.



Financial Services Guide



This FSG is an important document designed to help **you** decide whether to use the financial services offered.

It contains information about how Cover-More administers and arranges the policy.

What financial services are provided?

Cover-More holds an Australian Financial Services Licence. It allows Cover-More to provide **you** with general financial product advice about this travel insurance product and to arrange this product for **you**. Cover-More is responsible for the provision of these services.

Cover-More acts under a binder authority from the insurer. This means that Cover-More arranges this policy and can handle or settle claims on behalf of the insurer.

Cover-More acts for the insurer when providing these services. Full details of Cover-More and the insurer are on page 37 of this booklet.

Cover-More is 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.

Commonwealth Bank

The Commonwealth Bank 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. Ask the Commonwealth Bank for details. Neither Commonwealth Bank nor any of its related corporations are our authorised representatives or authorised representatives of any of **our** related companies.

For more information on the financial services the Commonwealth Bank provides, see its Financial Services Guide, which can be found at commbank.com.au/personal/insurance/FSG_12032014.PDF?ei=gsa_generic_services-guide.



Further information

For more information about remuneration or other benefits received for the financial services provided, please contact Cover-More by calling 1300 467 951 or emailing commbank@covermore.com.au 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 please refer to page Complaints and disputes resolution process on page 84 of 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, its Agents and the Agent's employees (even after they cease to be employed). Cover-More's policy meets the requirements of the *Corporations Act 2001* (Cth).

Who is responsible for this document?

Cover-More 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 PDS was prepared on 10 August 2021.



Contact details



Travel insurance

24 hour emergency assistance

Please call Australia DIRECT and TOLL FREE from:

USA 1844 345 1662 UK 0808 234 3737

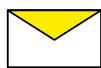
Canada 1844 345 1662 NZ 0800 632 031

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

From all other countries or if you experience difficulties with the numbers above:

Call direct: +61 2 8907 5641

Fax: +61 2 9055 3303



General enquiries (non-emergency)

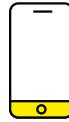
To activate your policy, ask about claims or other details about the insurance included with your credit card, please call or email:

1300 467 951 (within Australia)

+61 2 8907 5060 (from overseas)

commbank@covermore.com.au

How to make a claim – See page 14



Commonwealth Bank

By phone

Australia

13 2221

Personal and Business Awards customers

