



TID TRAVEL
INSURANCE
DIRECT

EFFECTIVE 24 OCTOBER 2018

Understand your cover.

Combined Financial Services Guide
and Product Disclosure Statement
Australia

Contents

Product Disclosure Statement

1.0 Before You Buy	1		
1. How your medical history affects your cover			
2. What plans are offered?			
3. What's covered and what's not?			
4. Who can buy?			
5. When am I covered?			
6. About your insurance			
2.0 Your Policy Benefits	5		
Policy excess			
Policy exclusions			
3.0 What's Covered and What's Not	8		
Section 1: Medical expenses incurred overseas			
Section 2: Cancellation costs			
Section 3: Additional expenses/ medical evacuation			
Section 4: Loss of income			
Section 5: Out of pocket expenses			
Section 6: Travel delay			
Section 7: Return airfare			
Section 8: Resumption of trip			
Section 9: Special events			
Section 10: Rental vehicle insurance excess Additional rental vehicle insurance excess option			
Section 11: Withdrawal of services			
Section 12: Accidental death			
		Section 13: Total permanent disability Exclusions to Sections 1-13	
		Section 14: Luggage and personal effects New for old cover option for valuable items Exclusions to Section 14	
		Section 15: Personal liability Exclusions to Section 15	
		Section 16: Snow sports and activities option Exclusions to Section 16	
		Section 17: Business travel Exclusions to Section 17	
		4.0 General Exclusions	23
		5.0 Existing Medical Conditions	28
		What's an existing medical condition? Automatically accepted conditions Can I purchase cover for other existing medical conditions that are not automatically covered? What if I develop a medical condition after buying my policy but before I travel? Existing medical conditions – close relatives Existing medical conditions – other people	
		6.0 Travelling While Pregnant	34
		When are you covered? When aren't you covered?	

7.0 Help and Emergencies	36	9.0 Important Matters	42
8.0 Claiming with TID	38	Insurer	
What we ask for		Applying for cover	
Submitting your claim		About your premium	
Claims processing		Changes to your policy	
Claims are payable in Australian dollars		Cooling-off period	
You must not admit fault or liability		Policy extensions	
You must help us recover any money we have paid		Your duty of disclosure	
If you can claim from anyone else...		How we handle complaints	
Depreciation		General Insurance Code of Practice	
Other insurance		Jurisdiction and Choice of Law	
Subrogation		Updating the PDS	
Recovery		Date prepared	
How GST affects your claim		10. Travel Insurance Glossary	46
Travel within Australia only			
Financial Services Guide	50		
About us			
How we handle complaints			
Privacy Policy			
Date prepared			

Before You Buy

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

1.0

Six things you must know about our travel insurance policies:

1. How your medical history affects your cover

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

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

Medical conditions **you** already have before **you** buy a policy (or have previously experienced) are defined as **existing medical conditions**. They are only covered if they are on the list of Automatically accepted conditions AND **you** meet all requirements outlined for automatic cover on pages [29-33](#). If **your** condition is not listed, or **you** do not meet those requirements, **you** will not have cover for **your existing medical condition(s)**.

Refer to Section 5.0, Existing Medical Conditions (pages [28-33](#)), for further information.

When **your** medical condition (or the medical condition of others) is a contributing factor to any claim, cover is subject to all policy terms, conditions and exclusions.

2. What plans are offered?

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

- › The Works: **our** most comprehensive plan, for travellers under age 81 taking a single **trip overseas**.
- › The Basics: **our** lower-priced plan with reduced benefits, for travellers under age 76 taking a single **trip overseas**.

- › Domestic: for a single **trip** taken within Australia by travellers under age 81.
- › Annual Multi Trip: a 12-month policy for people under age 76 who travel frequently. This plan covers both international and **domestic trips** up to a maximum of 38 days each leisure trip and up to a maximum of 90 days each business trip.

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

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

Our four plans each have different Policy Benefits (page [6](#)), but like all travel insurance policies they don't cover everything. **You** should read this PDS carefully to ensure **you** select the cover that is right for **you**. Also, certain words have special meanings which can be found in the Travel Insurance Glossary (page [46](#)).

- › Each policy section tells **you** what is covered and what **we** will pay.
- › Additional options are available for luggage cover and **rental vehicle** insurance excess.
- › Cover can be purchased for snow skiing and other snow sports and activities.
- › Exclusions to Sections (pages [15-22](#)) describe the specific circumstances which are not covered by those sections of the policy.
- › The General Exclusions: applicable to all sections (page [23](#)) apply to the entire policy.

Please read through this PDS carefully, ensure **you** understand the cover offered, and select the cover that's right for **you**.

4. Who can buy?

All plans are only available to Australian **residents** and their **dependents** (which are defined in the Travel Insurance Glossary on pages 49 and 47) who meet the age limits of the plan selected.

5. When am I covered?

Cover begins from when **you** pay **your** premium and **we** issue **your** Certificate of Insurance.

Cover for Cancellation Costs begins from the issue of **your** policy. Cover for all other benefit sections for **your** chosen plan begins on **your** date of departure noted on **your** Certificate of Insurance or when **you** actually leave **your home** to begin **your trip**, whichever occurs last.

All cover under **your** policy ends when **you** return to **your home** in Australia, or on **your** policy return date at 11.59pm AEST/AEDT, whichever occurs first. (Any policy extension **you** are eligible for must be applied for and purchased online before **your** cover ends – refer to page 44 for details.) If **you** return **home** before **your** policy return date, all cover under **your** policy ends, and the policy cannot be used for any future travel.

Waiting period

If **you** buy a policy after leaving **your home** and starting **your trip**, there is a 72-hour waiting period that applies to all benefits from the time **we** issue **your** Certificate of Insurance before cover begins.

Please keep a copy of **your** Certificate of Insurance, this PDS and any other documents **we** send **you**. These documents, along with **your** application for insurance, contain **your** cover terms and conditions.

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

A few words about the Annual Multi Trip plan.

- › This policy must be purchased within 30 days before the start of **your** period of insurance.
- › Under a **family** policy, **your** adult travel partner listed on **your** Certificate of Insurance may travel independently of **you**.
- › **Dependents** listed on **your** Certificate of Insurance are only covered whilst accompanying **you** and/or **your** insured travel partner.

6. About your insurance

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

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

The Important Matters (page [42](#)) section contains all the information on how the providers of this insurance work together to service this policy including:

- › Applying for cover (page [43](#))
- › About your premium (page [43](#))
- › Changes to your policy (page [43](#))
- › Cooling-off period (page [43](#))
- › Policy extensions (page [44](#))
- › Your duty of disclosure (page [44](#))
- › General Insurance Code of Practice (page [45](#))
- › Jurisdiction and Choice of Law (page [45](#))
- › Updating the PDS (page [45](#))
- › Date prepared (page [45](#))

It is **our** responsibility to operate this insurance within the General Insurance Code of Practice. It is **our** choice to do this in such a way that is dependable, helpful and easy.

Your policy is based on what **you** tell **us** and **we** expect **you** to be truthful. If **you** aren't, this has implications.

Please also read the Financial Services Guide (page [50](#)), including:

- › About us (page [50](#))
- › How we handle complaints (page [51](#))
- › Privacy Policy (page [52](#))
- › Date prepared (page [52](#))

Your Policy Benefits

Our policy benefits comparison table helps you quickly identify the policy benefits, benefit limits and applicable excess for each plan. We also tell you where to find information about specific exclusions.

2.0

Policy Benefits

The table below is a summary only of the benefits and **trip** limits for each plan. For each benefit **we** will pay up to the stated limit. Please refer to each policy section in What's Covered and What's Not (pages 8-22) for specific conditions of cover, sub-limits and a detailed explanation of what cover is available under each section.

Any options **you** have purchased will be shown on **your** Certificate of Insurance.

Policy excess

A policy **excess** is an amount **you** must pay once for each claim **you** make and applies to certain benefits as noted in the following table. If **your** claim is paid, this **excess** is deducted from any payment **we** make to **you** after **you** claim.

When **you** apply online and select **your excess**, **we** will let **you** know the applicable premium **you** have to pay; the higher the **excess**, the lower the premium. **Your** chosen **excess** will then be shown on **your** Certificate of Insurance.

Policy exclusions

Please refer to Exclusions to Sections 1-17 (pages 15-22) under What's Covered and What's Not for a detailed explanation of what is not covered in each policy section. **You** should be aware that General Exclusions (pages 23-27) are also applicable to all sections of the policy.

Benefit WHAT'S COVERED	The Works and Annual Multi Trip		The Basics		Domestic		EXCESS APPLIES	EXCLUSIONS TO SECTIONS
	SINGLE	FAMILY	SINGLE	FAMILY	SINGLE	FAMILY		
1.* Medical Expenses Incurred Overseas [^] Emergency Dental	Unlimited \$500	Unlimited \$500	\$5m \$500	\$10m \$500			Yes Yes	Pages 15-16, 23-27
2.* Cancellation Costs	Unlimited	Unlimited	\$3,000	\$6,000	\$10,000	\$20,000	Yes	
3. Additional Expenses / Medical Evacuation	Unlimited	Unlimited	\$500,000	\$1m	\$10,000	\$20,000	Yes	
4.* Loss of Income	\$9,000	\$18,000					Yes	
5.* Out of Pocket Expenses	\$6,000	\$12,000	\$6,000	\$12,000			Nil	
6.* Travel Delay	\$2,000	\$4,000					Nil	
7.* Return Airfare	\$6,000	\$12,000					Nil	
8. Resumption of Trip	\$3,000	\$6,000					Nil	
9. Special Events	\$2,000	\$4,000					Nil	
10. Rental Vehicle Insurance Excess	\$4,000	\$4,000			\$4,000	\$4,000	Nil	
11.* Withdrawal of Services	\$500	\$500					Nil	
12.* Accidental Death	\$25,000	\$50,000	\$25,000	\$50,000	\$10,000	\$20,000	Nil	
13.* Total Permanent Disability	\$12,500	\$25,000	\$12,500	\$25,000			Nil	

* Sub-limits apply (refer to What's Covered and What's Not, pages 8-22).

[^] For up to 12 months after **sudden illness** first appears or **serious injury** first occurs.

Table continues on next page.

Benefit WHAT'S COVERED	The Works and Annual Multi Trip		The Basics		Domestic		EXCESS APPLIES	EXCLUSIONS TO SECTIONS
	SINGLE	FAMILY	SINGLE	FAMILY	SINGLE	FAMILY		
14.* Luggage and Personal Effects	\$12,000	\$24,000	\$3,000	\$6,000	\$4,000	\$8,000	Yes	Pages 19, 23-27
15.* Personal Liability	\$2.5m	\$2.5m	\$1m	\$1m	\$1m	\$1m	Yes	Pages 20, 23-27
16.* Snow sports and activities option	Option only When you purchase this option, cover under Sections 1-5, 7, 9 and 12-15 is extended when you participate in the activities listed in Section 16.1		Option only When you purchase this option, cover under Sections 1-3, 5 and 12-15 is extended when you participate in the activities listed in Section 16.1		Option only When you purchase this option, cover under Sections 2, 3, 12, 14 and 15 is extended when you participate in the activities listed in Section 16.1		See applicable sections above	Pages 15-16, 19-21, 23-27
Piste Closure	\$1,000	\$2,000	\$1,000	\$2,000	\$1,000	\$2,000	Nil	
Snow Skiing Pre-paid Costs	\$1,000	\$2,000	\$1,000	\$2,000	\$1,000	\$2,000	Nil	
Snow Skiing Equipment Replacement	\$1,500	\$3,000	\$1,500	\$3,000	\$1,500	\$3,000	Nil	
Hired Snow Skiing Equipment	\$2,000	\$4,000	\$2,000	\$4,000	\$2,000	\$4,000	Nil	
17.* Business travel	Annual Multi Trip only							Pages 19, 22, 23-27
Business Equipment	\$5,000	\$5,000					Yes	
Hire Business Equipment	\$1,000	\$1,000					Yes	
Re-create Business Documents	\$1,000	\$1,000					Yes	

* Sub-limits apply (refer to What's Covered and What's Not, pages 8-22).

^ For up to 12 months after sudden illness first appears or serious injury first occurs.

What's Covered and What's Not

This section describes the cover and options available and the terms, conditions and exclusions that apply when we issue you a policy. For the benefit limits applicable to each plan, refer to the Policy Benefits on pages [6-7](#).

3.0

Section 1: Medical expenses incurred overseas

You only have this cover if you choose The Works, The Basics or the Annual Multi Trip plan.

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

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

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

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

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

3. We will pay up to \$12,000 in total for your burial or cremation **overseas** or for transporting your remains to Australia.

› Please note we will not pay for any costs incurred in Australia.

The maximum amount we will pay for all claims combined under this section is shown under Policy Benefits (page 6) for the plan you have selected.

For what we will not pay in this section, please refer to Exclusions to Sections 1-13 (page 15) and General Exclusions: applicable to all sections (page 23).

Section 2: Cancellation costs

1. We will pay the value of the unused arrangements, less any refunds due to you, if you have to cancel any pre-paid transport or accommodation arrangements due to any unforeseen or unforeseeable circumstances outside of your control.
2. We will pay the **reasonable** cost of rearranging your trip prior to you travelling because something unforeseen and outside of your control occurs, provided that this cost is not greater than the cancellation fees or lost deposits which would have been incurred had the trip been cancelled.
3. We will pay the cancellation cost of tuition or course fees up to \$2,000 if the sole purpose of your trip is to attend that course and that course is cancelled due to circumstances outside of your control.

4. **We** will pay the travel agent's cancellation fees up to 10% of the amount paid to the travel agent or \$1,500 for a **single** policy or \$3,000 for a **family** policy, whichever is the lesser, when full monies have been paid or the maximum amount of the deposit has been paid at the time of cancellation. **We** will not pay any travel agent's cancellation fees above the level of commission and/or service fees normally earned by the agent had the **trip** not been cancelled.
5. **We** will pay **you** for loss of frequent flyer or similar air travel points **you** used to purchase an airline ticket following cancellation of **your** airline ticket and **you** cannot recover the lost points from any other source. The cancellation must be due to unforeseen or unforeseeable circumstances outside of **your** control.

We calculate the amount **we** pay **you** by multiplying:

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

The maximum amount **we** will pay for all claims combined under this section is shown under Policy Benefits (page 6) for the plan **you** have selected.

For what **we** will not pay in this section, please refer to Exclusions to Sections 1-13 (page 15) and General Exclusions: applicable to all sections (page 23).

Section 3: Additional expenses/ medical evacuation

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

1. **You** being unable to continue the **trip** because of the death, **sudden illness or serious injury** of:
 - a) **You** or a member of **your travelling party**;
or
 - b) A **close relative** or business partner or person in the same employ as **you**, who is resident in Australia or New Zealand and is not travelling with **you**, provided that the **sudden illness or serious injury** required hospitalisation or confinement. In the case of a business partner or person in the same employ, the person's absence made the ending of the **trip** necessary and **you** have written confirmation of that fact from a senior partner or director.
2. The need, because of a **sudden illness or serious injury** resulting in **you** being hospitalised as an in-patient, for a **close relative** or friend to travel to, remain with or escort **you** in place of the attending registered medical practitioner. **You** must have written advice of this need from the attending registered medical practitioner and **our** consent.
3. Cancellation or restriction of scheduled public transport services caused by severe weather, natural disaster, hijacking, riot, strike or civil commotion. The event must have begun after **we** issued the Certificate of Insurance. **You** must have done everything reasonable to avoid the expenses, and **you** must get the **carrier's** written confirmation of **your** claim.

4. Motor vehicle, railway, air or marine **accident**. You must have written confirmation of the **accident** from an official body in the country where the **accident** happened.
5. Loss (excluding Government confiscation) of passports, travel documents or credit cards, but limited to expenses incurred within the country where the loss occurred in having the documents replaced.
6. A member of **your travelling party** who is a full-time student being required to sit supplementary examinations.
7. Disruption of **your trip** due to **your home** in Australia being destroyed by a natural disaster or fire.

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

The following rules apply:

1. **We** will not pay for the cost of resuming the **trip** after **you** have returned to Australia (excluding Sections 7 and 8 when applicable).
2. Additional travel must be at the fare class originally chosen, except where **we** agree otherwise based on a written recommendation by **your** attending registered medical practitioner.
3. If **you** do not have a return ticket at the time of the event that causes **you** to return to Australia, **we** will deduct the cost of an economy class airfare at the **carrier's** regular published rates for the return trip. **We** will use **your** return ticket if this reduces **our** costs.

4. **We** will not pay for additional transport and accommodation expenses when a claim is made under Section 2 Cancellation costs or Section 6 Travel delay for cancelled transport and accommodation expenses covering the same period of time.
5. Benefits are payable for a period up to 12 months from the date **your trip** was interrupted.

The maximum amount **we** will pay for all claims combined under this section is shown under Policy Benefits (page 6) for the plan **you** have selected.

For what **we** will not pay in this section, please refer to Exclusions to Sections 1-13 (page 15) and General Exclusions: applicable to all sections (page 23).

Section 4: Loss of income

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

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

The maximum **we** will pay is \$1,500 per person per month.

The maximum amount **we** will pay for all claims combined under this section is shown under Policy Benefits (page 6) for the plan **you** have selected.

For what **we** will not pay in this section, please refer to Exclusions to Sections 1-13 (page 15) and General Exclusions: applicable to all sections (page 23).

Section 5: Out of pocket expenses

You only have this cover if **you** choose The Works, The Basics or the Annual Multi Trip plan.

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

The maximum amount **we** will pay for all claims combined under this section is shown under Policy Benefits (page 6) for the plan **you** have selected.

For what **we** will not pay in this section, please refer to Exclusions to Sections 1-13 (page 15) and General Exclusions: applicable to all sections (page 23).

Section 6: Travel delay

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

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

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

You may need to provide **us** with **your** receipts and written confirmation from the **carrier** of the reasons for the cancellation, rescheduling or delay and any compensation offered or denied. Additional expenses must be **reasonable** and necessary and at the same standard as originally booked.

We will not pay for flights or other transport costs or upgrades for **you** to continue **your** journey.

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

The maximum amount **we** will pay for all claims combined under this section is shown under Policy Benefits (page 6) for the plan **you** have selected.

For what **we** will not pay in this section, please refer to Exclusions to Sections 1-13 (page 15) and General Exclusions: applicable to all sections (page 23).

Section 7: Return airfare

You only have this cover if you choose The Works or the Annual Multi Trip plan.

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

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

The maximum amount we will pay for all claims combined under this section is shown under Policy Benefits (page 6) for the plan you have selected.

For what we will not pay in this section, please refer to Exclusions to Sections 1-13 (page 15) and General Exclusions: applicable to all sections (page 23).

Section 8: Resumption of trip

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

If you return to your home in Australia because, during your trip, a **close relative** of yours who is residing in Australia or New Zealand – and who is not travelling with you – dies unexpectedly or is hospitalised following a **sudden illness or serious injury**, we will reimburse you up to \$3,000 for a **single** policy or \$6,000 for a **family** policy towards return airfares to resume your trip within 12 months of your return to Australia, but only if more than 14 days remain in the period of your trip on your Certificate of Insurance.

The maximum amount we will pay for all claims combined under this section is shown under Policy Benefits (page 6) for the plan you have selected.

For what we will not pay in this section, please refer to Exclusions to Sections 1-13 (page 15) and General Exclusions: applicable to all sections (page 23).

Section 9: Special events

You only have this cover if you choose The Works or the Annual Multi Trip plan.

If your trip is interrupted by any unforeseeable cause outside of your control and you are unable to arrive at your destination by the time originally scheduled for the purpose of:

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

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

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

The maximum amount we will pay for all claims combined under this section is shown under Policy Benefits (page 6) for the plan you have selected.

For what we will not pay in this section, please refer to Exclusions to Sections 1-13 (page 15) and General Exclusions: applicable to all sections (page 23).

Section 10: Rental vehicle insurance excess

You only have this cover if you choose The Works, the Annual Multi Trip or Domestic plan.

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

The maximum amount we will pay for all claims combined under this section is shown under Policy Benefits (page 6) for the plan you have selected.

For what we will not pay in this section, please refer to Exclusions to Sections 1-13 (page 15) and General Exclusions: applicable to all sections (page 23).

Additional rental vehicle insurance excess option

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

Section 11: Withdrawal of services

You only have this cover if you choose The Works or the Annual Multi Trip plan.

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

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

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

The maximum amount we will pay for all claims combined under this section is shown under Policy Benefits (page 6) for the plan you have selected.

For what we will not pay in this section, please refer to Exclusions to Sections 1-13 (page 15) and General Exclusions: applicable to all sections (page 23).

Section 12: Accidental death

1. We will pay your estate the applicable limit if you die within twelve (12) months as the direct result of an injury that happens to you during your trip. However, there is no cover for your dependents. Under a family policy, we will only pay the single policy limit for any one person.
2. We will also pay your estate the applicable limit if you are presumed dead and your body is not found within 12 months after the transport you were travelling in disappears, sinks, is wrecked or crashes.

The maximum amount we will pay for all claims combined under this section is shown under Policy Benefits (page 6) for the plan you have selected.

For what we will not pay in this section, please refer to Exclusions to Sections 1-13 (page 15) and General Exclusions: applicable to all sections (page 23).

Section 13: Total permanent disability

You only have this cover if **you** choose The Works, The Basics or the Annual Multi Trip plan.

We will pay **you** up to the **applicable limit** if, during **your trip**, **you** suffer an **injury** resulting in **your** permanent total loss of sight in one or both eyes or the permanent total loss of use of one or more limbs within one year of the date of the **accident**. Under a **family** policy, **we** will only pay the **single** policy limit for any one person. The maximum limit in respect of **dependents** is \$10,000 for each child.

Exclusions to Sections 1-13

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

1. **You** have received medical care under a reciprocal national health scheme. Reciprocal Health Care Agreements are currently in place between the Government of Australia and several other countries. For details of these agreements, refer to the following Australian Medicare website: humanservices.gov.au/medicare
2. **You** received private hospital or medical treatment where public funded services or care was available in Australia or under any Reciprocal Health Care Agreement between the Government of Australia and the Government of any other country. Please refer to the following Australian Medicare website for further information: humanservices.gov.au/medicare
3. Medical and/or dental costs incurred in Australia.
4. **You** travel even though **you** know **you** are unfit to travel; travel against medical advice; travel to obtain medical treatment; or **you** arrange to travel when **you** know of circumstances that could lead to the **trip** being disrupted or cancelled.
5. **You** have been instructed by **your** registered medical practitioner that **you** are unfit to travel and **you** fail to promptly cancel **your** pre-booked travel. **You** will be responsible for any extra cost (including cancellation charges) incurred from **your** failure to promptly cancel the prearranged travel.
6. **Your** claim **arises** directly or indirectly from any **injury, sudden illness or serious injury** where a metastatic or terminal prognosis was made prior to the issue of the Certificate of Insurance.
7. **Your** claim **arises** out of pregnancy or related **pregnancy complications** after 26 weeks of pregnancy with a single baby or after 19 weeks of pregnancy with a multiple pregnancy. Expectant mothers should consider whether they travel under this policy, as no cover is provided for childbirth or the health of a newborn child, irrespective of the stage of pregnancy at which the child is born.
8. Dental treatment involving the use of precious metals or for cosmetic dentistry.
9. A tour operator or wholesaler is unable to complete arrangements for a tour because there are not the required number of

The maximum amount **we** will pay for all claims combined under this section is shown under Policy Benefits (page 6) for the plan **you** have selected.

For what **we** will not pay in this section, please refer to Exclusions to Sections 1-13 (page 15) and General Exclusions: applicable to all sections (page 23).

people to begin or complete a tour or trip. This does not apply in relation to prepaid travel arrangements bought separately to reach the departure point for the tour or other travel arrangements.

10. A loss that **arises** directly or indirectly from an act or threat of terrorism. This exclusion only relates to Section 2: Cancellation costs (page 9), Section 6: Travel delay (page 12) and Section 9: Special events (page 13).
11. Delays, rescheduling or cancellation of scheduled transport services caused by the **carrier** or related to the **carrier**, including maintenance, repairs, rescheduling, service faults or industrial activity other than a strike or corporate takeover. This exclusion does not apply to Section 6: Travel delay (page 12) and Section 9: Special events (page 13).
12. Financial, business, professional or contractual arrangements. This exclusion does not apply to claims under Section 2: Cancellation costs (page 9) where:
 - a) **you** or a member of **your travelling party** are made redundant from full-time permanent employment in Australia, provided **you** or they were not aware that the redundancy was to occur before **you** purchased this policy; or
 - b) where **you** are a full-time permanent employee and **your** pre-arranged leave is cancelled by **your** employer.
13. Which **arises** from a lack of due care and responsibility on **your** part by neglecting to observe appropriate preventative measures for the travel region as outlined by the World Health Organisation, including relevant vaccinations, malaria prophylaxis and hygiene measures. Please see who.int for further information.
14. **You** or a member of the **travelling party** changes plans or decides not to continue with the **trip**.
15. **You** operate a **rental vehicle** in violation of the rental agreement.
16. **You** use the **rental vehicle** to transport items other than luggage.
17. **You** engage in snow sports and activities, except those covered under Section 16 Snow sports and activities option when **you** have purchased that option for an additional premium and it is noted on **your** Certificate of Insurance.
18. The financial collapse of any transport, tour or accommodation provider.

You must check General Exclusions: applicable to all sections (page 23) for other circumstances in which there is no cover or **we** will not pay.

Section 14: Luggage and personal effects

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

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

Otherwise, if **you** do not comply with these conditions, **we** may reduce or may not pay **your** claim.

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

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

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

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

- › \$700 under all plans; and

- › \$4,000 (\$2,000 on The Basics plan) where the item is a laptop, tablet, camera or video camera; and
- › For the Annual Multi Trip plan only, a policy limit of \$5,000 applies in respect of all business equipment.

If we are to pay a claim, you must:

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

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

We will pay **you** for each of the following, up to the applicable cover limits:

1. **Accidental damage**, theft, or permanent loss of **your luggage and personal effects arising** from circumstances outside of **your** control.
2. Theft of cash up to \$250 provided a police report is obtained confirming the theft has occurred. (There is no cover for cash on The Basics plan.)

3. Loss of dentures or dental prostheses up to \$800.
4. Essential clothing and toiletry items bought because **your luggage** is temporarily lost or delayed (not permanently lost) by the **carrier** for more than 12 hours, up to \$250 for a **single** policy or \$500 for a **family** policy. This does not apply on the leg of **your trip** that brings **you** to **your home** in Australia. **We** will not pay more than \$500 **single** or \$1,000 **family** if the delay is more than 72 hours. **You** must give **us** relevant receipts and written confirmation of **your** claim, including the length of the delay from the appropriate authority. No **excess** applies to this benefit.
5. Financial loss **you** suffer because of loss, theft or fraudulent use of **your** travel documents, travellers cheques, passport or credit cards. **We** will not pay more than \$2,000. **You** must comply with any conditions of the issuing body. (There is no cover for this benefit on The Basics plan.)
6. The **reasonable** additional costs incurred **overseas** in obtaining a replacement passport or travel document following the **accidental** damage, theft, or permanent loss of **your** passport whilst outside Australia, up to \$2,000. No **excess** applies to this benefit.

In the event that a claimable theft, damage or loss of **your luggage and personal effects** occurs, **we** will allow **you** one automatic reinstatement of the sum insured for the plan selected.

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

The maximum amount **we** will pay for all claims combined under this section is shown under Policy Benefits (page 6) for the plan **you** have selected.

The Exclusions to Section 14 (below) and the General Exclusions: applicable to all sections (page 23) apply regardless of any additional cover for valuable items below.

New for old cover option for valuable items

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

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

The Exclusions to Section 14 (page 19) and General Exclusions: applicable to all sections (page 23) apply.

Exclusions to Section 14

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

1. Loss, theft or damage **arising** from circumstances within **your** control including, but not limited to, leaving items behind (whether left intentionally or not) in a guest room after **you** have checked out; in any aircraft, taxi, bus, ship, train or ferry; etc.
2. Loss, theft or damage to watercraft of any type (excluding surfboards).
3. Damage to sports and leisure equipment (including surfboards) while in use, except snow sports and leisure equipment when **you** have purchased the Snow sports and activities option (Section 16) for an additional premium and it is noted on **your** Certificate of Insurance.

4. Breakage or damage to snow sports and leisure equipment over three years old.
5. Damage to sports and leisure equipment due to normal wear and tear, including dents and scratches.
6. Loss, theft or damage of **luggage** not reported to the transport provider, police, hotel or appropriate authority within 24 hours of **you** becoming aware of the loss and where no written report is obtained.

You must check General Exclusions: applicable to all sections (page 23) for other circumstances in which there is no cover or **we** will not pay.

Section 15: Personal liability

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

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

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

The maximum amount **we** will pay for all claims combined under this section is shown under Policy Benefits (page 6) for the plan **you** have selected.

Exclusions to Section 15

We will not pay for liability:

1. **Arising** out of **your** trade, business or profession;
2. For injury to an employee **arising** out of, or in the course of, their employment by **you**;
3. **Arising** out of an unlawful, wilful or malicious act by **you**;
4. **Arising** out of **your** ownership, possession or use (including as a passenger) of a mechanically propelled vehicle or any aircraft or watercraft;

5. **Arising** out of **you** passing on an illness or disease to another person;
6. **Arising** out of **your** participation in snow sports and activities, except those activities covered under Section 16 Snow sports and activities option when **you** have purchased that option for an additional premium and it is noted on **your** Certificate of Insurance.

You must check General Exclusions: applicable to all sections (page 23) for other circumstances in which there is no cover or **we** will not pay.

Section 16: Snow sports and activities option

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

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

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

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

- b) backcountry snow skiing and snowboarding, including heli-skiing and cat skiing, only when on a guided tour with a licensed tour operator;
- c) cross country skiing on marked trails; tobogganing (on-piste);
- d) using snowmobiles when provided by the recognised piste authority for transport to and from areas designed for recreational skiing within resort boundaries or when on a guided tour with a licensed tour operator;
- e) ice/glacier walking (up to 3,000 metres), sleigh riding and dog sledding, only when on a guided tour with a licensed tour operator.

2. **Piste closure:** We will pay **you** \$100 for a **single** policy or \$200 for a **family** policy for each day that the skiing facilities at the resort **you** have pre-booked before **your** trip commenced and that **you** are staying in during the usual ski season for that resort are totally closed due to adverse snow conditions (including absence of snow).

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

3. **Snow skiing pre-paid costs:** We will pay **you** the proportional amounts of irrecoverable pre-paid charges **you** have paid (or contracted to pay before the **trip** commenced) for ski equipment hire, lift passes and ski-school costs if, during **your trip**, **you** are prevented from skiing for more than 24 hours following **your sudden illness or serious injury** sustained during **your trip**. **You** must obtain a medical certificate from a registered medical practitioner in support of **your** claim for **your sudden illness or serious injury**.
4. **Snow skiing equipment replacement:** We will pay **you** for the hire of alternative ski equipment:
 - a) following **accidental** damage, theft, or permanent loss, of **your** ski equipment and for which a claim has been accepted by **us** under Section 14; or
 - b) if **you** are temporarily deprived of **your** ski equipment for a period of more than 24 hours from the scheduled time of arrival at the snow destination due to delay or misdirection of **your** ski equipment.
5. **Hired snow skiing equipment:** We will pay for **accidental** damage, theft, or permanent loss of hired snow skiing equipment (skis, poles, ski boots and bindings, ski helmets, snowboards, snowboard boots and bindings) for which **you** have a written hire agreement with a licenced hire company. The maximum amount **we** will pay for any one item (item limit) is \$700.

The maximum amount **we** will pay for all claims combined under this section is shown under Policy Benefits (page 6) for the plan **you** have selected.

Exclusions to Section 16

We will not pay for a claim that **arises** from:

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

You must check all Exclusions to Sections 1-13 (page 15), 14 (page 19) and 15 (page 20) and General Exclusions: applicable to all sections (page 23) for other circumstances in which there is no cover or **we** will not pay.

Section 17: Business travel

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

Following circumstances outside of **your** control:

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

Exclusions to Section 17

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

1. **Arising** from circumstances within **your** control including, but not limited to, leaving items behind (whether left intentionally or not) in a guest room after **you** have checked out; in any aircraft, taxi, bus, ship, train or ferry; etc.
2. To business equipment (consisting of computer equipment, communication devices, other business-related equipment and business documents), unless **you** have selected the Annual Multi Trip plan.

You must check Exclusions to Section 14 (page 19) and General Exclusions: applicable to all sections (page 23) for other circumstances in which there is no cover or **we** will not pay.

General Exclusions: applicable to all sections

In addition to the exclusions which apply to Sections 1-17, the following general exclusions apply to all policy sections.

We recommend that you read them to understand what is not covered. If you are unsure, please call us on 1300 843 843.

4.0

We will not pay for any claim arising from or relating to the following:

1. A loss which is recoverable by compensation under any workers compensation act or transport accident laws or by any Government sponsored fund, plan, medical benefit scheme or any other similar legislation required to be effected by or under a law.
2. A loss **arising** from the failure of any travel agent, tour operator, accommodation provider, airline or other **carrier**, car rental agency or any other travel or tourism services provider to provide services or accommodation due to their **insolvency** or the **insolvency** of any person, company or organisation they deal with.
3. Consequential loss of any nature including loss of enjoyment.
4. A loss resulting from a criminal, unlawful or dishonest act by **you** or by a person with whom **you** are in collusion or if **you** have not been honest and frank with all answers, statements and submissions made in connection with **your** insurance application or claim.
5. A loss that **arises** from any act of war (whether war is declared or not) or from any rebellion, revolution, insurrection or taking of power by the military.
6. A loss that **arises** from a nuclear reaction or contamination from nuclear weapons or radioactivity.
7. A loss that **arises** from biological and/or chemical materials, substances, compounds or the like used directly or indirectly for the purpose to harm or to destroy human life and/or create public fear.
8. **Your claim arises** from errors or omissions in any booking arrangements or failure to obtain relevant visa, passport or travel documents.
9. A loss that **arises** because **you** did not follow advice in the mass media of a government or other official body's warning:
 - a) against travel to a particular country or parts of a country; or
 - b) of a strike, riot, bad weather, civil commotion or contagious disease; or
 - c) of a likely or actual **epidemic** or **pandemic**; or
 - d) of a threat of an **epidemic** or **pandemic** that requires the closure of a country's borders; or
 - e) of an **epidemic** or **pandemic** that results in **you** being quarantined;

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

No cover is available for any event under any section of this policy should **you** travel to a country or region where the Australian government has issued a "Do Not Travel" warning.
10. A loss that **arises** from BASE jumping, parachuting, sky diving, hang gliding, parapenting or travel in an air supported device other than as a passenger in a licensed passenger aircraft operated by an airline or charter company. This does not apply to hot air ballooning or parasailing.

11. A loss, theft or damage to:
 - a) cash, bank or currency notes, cheques or negotiable instruments (excluding Section 14 theft of cash);
 - b) unaccompanied or **unsupervised luggage and personal effects**;
 - c) property that **you** leave **unsupervised** in a **public place** or that happens because **you** do not take **reasonable** care to protect it;
 - d) **luggage and personal effects**, but only to the extent that **you** are entitled to compensation from the **carrier** responsible for the loss, theft or damage;
 - e) items left **unsupervised** in a motor vehicle, unless taken from a locked boot or locked concealed luggage compartment of a station wagon, hatchback, van or motor home between sunrise and sunset local time and there is evidence of damage or forced entry which is confirmed by a police report; or
 - f) a video camera, mobile telephone, photographic equipment, personal computer or jewellery left **unsupervised** in a motor vehicle at any time;
 - g) a video camera, mobile telephone, photographic equipment, personal computer or jewellery checked in to be held and transported in the cargo hold of any **carrier** (including any loss from the point of check-in until receipt of the said goods);
 - h) **luggage and personal effects** which are fragile or brittle or an electronic component which is broken or scratched, unless either:
 - i) it is the lens of spectacles, binoculars or photographic or video equipment; or
 - ii) the breakage or scratch was caused by a crash involving a vehicle in which **you** were travelling.
12. For loss, theft or damage which is not reported to, and a written report is not obtained within 24 hours of discovery from, the police or the appropriate authority such as, but not limited to, the airline, accommodation manager, transport provider, airport authority, tour operator or guide. In the case of an airline, a property irregularity report will be required.
13. Loss, wear and tear or depreciation of property or damage caused by the action of insects, vermin, mildew, rust or corrosion.
14. A loss **arising** from any mechanical or electrical breakdown or malfunction.
15. A loss **arising** from **your**, any of **your travelling party's** or a **close relative's** intentional exposure to a needless risk or not taking reasonable care, except in an attempt to save human life.
16. Any search and rescue expenses (including costs charged to **you** by a government, regulated authority or private organisation connected with finding or rescuing an individual).
17. Delay, detention, seizure or confiscation by Customs or other officials.
18. Events for which the provision of cover or a liability to pay a benefit would expose **us** and/or **our** reinsurer(s) to any sanction, prohibition or restriction under United Nations resolutions or any sanctions, laws or

- regulations of the European Union, United Kingdom or the United States of America.
19. Loss, theft or damage to anything shipped as freight or under a Bill of Lading.
 20. If **you, your close relative** or a member of **your travelling party**:
 - a) commits suicide, attempts to commit suicide or deliberately injures himself or herself;
 - b) is under the influence of, or is addicted to, intoxicating liquor or a drug, except a drug taken in accordance with the advice of a registered medical practitioner;
 - c) takes part in a riot or civil commotion;
 - d) acts maliciously;
 - e) races (except on foot); mountaineers or rock climbs using support ropes; or takes part in any professional sporting activity (an activity for which an appearance fee, wage or salary is received);
 - f) rides a motorcycle:
 - i) without wearing a helmet; and
 - ii) without having a valid licence as required in Australia and in the country of travel for the same class of motorcycle **you** (or they) are operating; or
 - iii) as a pillion passenger without a helmet;
 - g) dives underwater using an artificial breathing apparatus, unless an open water diving licence is held or when diving under licensed instruction.
 21. For any costs or expenses incurred outside the period of the **trip**.
 22. Ongoing payments under Section 1: Medical expenses incurred overseas (page 9) if **we** decide on the advice of a doctor appointed by **us** that **you** are capable of being repatriated to Australia.
 23. **Your claim arises** from any medical procedures in relation to an implantable or automated implantable cardioverter-defibrillator (AICD/ICD insertion) during **overseas** travel. If **you, your travelling party** or a **close relative** (as listed on **your** Certificate of Insurance) requires this procedure, due to sudden and acute onset which occurs for the first time during **your** period of cover and not directly or indirectly related to a **existing medical condition**, **we** will exercise **our** right to organise a repatriation to Australia for this procedure to be completed.
 24. The cost of medication in use at the time the **trip** began or for maintaining a course of treatment **you** were on prior to the **trip**.
 25. **Your claim arises** from **existing medical conditions** except as specified under **Existing Medical Conditions** (pages 28-33).
 26. If **your claim arises** directly or indirectly from a sexually transmitted disease.
 27. Any mental illness as defined by DSM-IV including but not limited to dementia, depression, anxiety, stress or other nervous condition; behavioural diagnoses such as autism; eating disorders; a drug or alcohol addiction.
 28. Fertility treatment at any time and any resulting complications.

29. Pregnancy in any of the following circumstances:
 - a) if **you** have experienced any **pregnancy complications** prior to **your** policy being issued;
 - b) a single pregnancy after 26 weeks;
 - c) a multiple pregnancy after 19 weeks;
 - d) for childbirth at any time;
 - e) for regular antenatal care;
 - f) care of a newborn child.
30. Elective or cosmetic surgery that is not medically necessary (and any complications that **arise** from surgery); gastric banding and gastric bypass surgery (and their complications); elective pregnancy terminations.
31. Any government prohibition, regulation or intervention.

Existing Medical Conditions

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

5.0

The cover described in Your Policy Benefits (pages 5-7) and in What's Covered and What's Not (pages 8-22) may include cover for a claim which **arises** from an **existing medical condition** in certain circumstances.

What's an existing medical condition?

An **existing medical condition** is one for which, at the time of policy purchase, **you** have ever:

- › had symptoms or been diagnosed;
- › been prescribed medication;
- › received (or are waiting for) medical treatment;
- › received (or are waiting for) tests, investigations or specialist consultation;
- › received or been advised to attend a follow-up consultation; and/or

- › had surgery or attended a hospital or clinic (as an outpatient or inpatient).

It also includes any **chronic** or ongoing medical condition or terminal illness.

This definition applies to **you**, a member of **your travelling party**, a **close relative**, and any other person.

Automatically accepted conditions

Many common **existing medical conditions** are automatically covered by **your** policy.

We automatically cover **you** for over 40 **existing medical conditions** (shown in the table below) for events that unexpectedly **arise** from that condition, provided that **you** satisfy all criteria listed for the condition(s).

Medical condition	Criteria
Acne	You haven't received treatment for your Acne from a medical practitioner in the three months prior to buying your policy.
Allergies	You follow advice in accordance with your medical practitioner (such as to carry EpiPens, antihistamines/other preventative medication at all times) and, at the date you buy your policy, you : <ul style="list-style-type: none"> › have no other known or underlying respiratory conditions or diseases (for example, Asthma); and › have not required treatment from a medical practitioner for your allergies in the last six months.
Anaemia (Iron Deficiency)	No criteria apply.

Medical condition	Criteria
Asthma	At the date you buy your policy, you : <ul style="list-style-type: none"> › are under 60 years of age; › have no other known or underlying respiratory conditions (including Sleep Apnoea); › haven't required cortisone medication, except taken by inhaler or puffer; and › haven't required hospitalisation for Asthma in the last two years, including as an outpatient.
Bell's Palsy	No criteria apply.
Benign Positional Vertigo	At the date you buy your policy, you haven't required hospitalisation for Benign Positional Vertigo in the last two years, including as an outpatient.
Bunions	At the date you buy your policy, you haven't had surgery for Bunions in the last three months and have no surgery planned.
Carpal Tunnel Syndrome	At the date you buy your policy, you haven't had surgery for Carpal Tunnel Syndrome in the last three months and have no surgery planned.
Cataracts	At the date you buy your policy, you have no ongoing complications, haven't had surgery for Cataracts in the last three months, and have no surgery planned.
Coeliac Disease	At the date you buy your policy, you haven't required hospitalisation for Coeliac Disease in the last two years, including as an outpatient.
Congenital Blindness	No criteria apply.
Congenital Deafness	No criteria apply.
Diabetes Mellitus (Types I and II)	At the date you buy your policy, you : <ul style="list-style-type: none"> › were diagnosed more than six months ago; › haven't had any complications in the last six months; › have no eye, kidney, nerve or vascular complications; › have a blood sugar level reading between 4 and 12 or a HbA1C score of 9% or less; and › have no known cardiovascular/coronary heart disease.
Dry Eye Syndrome	No criteria apply.

Medical condition	Criteria
Ear Grommets	At the date you buy your policy, you have no current ear infection.
Epilepsy	<p>At the date you buy your policy, you have:</p> <ul style="list-style-type: none"> › no underlying medical conditions (for example, previous head trauma, stroke); › not changed your medication regime for Epilepsy in the last 12 months; and › not required hospitalisation for Epilepsy in the last two years, including as an outpatient.
Folate Deficiency	No criteria apply.
Gastric Reflux	Your Gastric Reflux doesn't relate to another underlying diagnosis (examples: hernia or gastric ulcer).
Glaucoma	At the date you buy your policy, you have no ongoing complications, haven't had surgery for Glaucoma in the last three months, and have no surgery planned.
Goitre	The underlying medical cause excludes tumour.
Grave's Disease	At the date you buy your policy, you haven't received treatment from a medical practitioner for Grave's Disease in the last six months.
Hashimoto's Disease	The underlying medical cause excludes tumour.
Hiatus Hernia	At the date you buy your policy, you haven't had surgery for Hiatus Hernia in the last six months and have no surgery planned.
Hypercholesterolemia/ Hyperlipidaemia (High Cholesterol / High Lipids)	Provided you have no cardiovascular/coronary heart disease.
Hypertension (High Blood Pressure)	<p>Provided at the date you buy your policy:</p> <ul style="list-style-type: none"> › you have no known cardiovascular/coronary heart disease; and › your current blood pressure reading is lower than 165/95.
Hyperthyroidism (overactive thyroid)	The underlying medical cause excludes tumour.
Hypothyroidism (underactive thyroid)	The underlying medical cause excludes tumour.

Medical condition	Criteria
Impaired Glucose Tolerance	At the date you buy your policy, you : <ul style="list-style-type: none"> › were diagnosed more than six months ago; › haven't had any complications in the last six months; › have no eye, kidney, nerve or vascular complications; › have a blood sugar level reading between 4 and 12 or a HbA1C score of 9% or less; and › have no known cardiovascular/coronary heart disease.
Incontinence	You have no underlying gastrointestinal or urinary condition.
Insulin Resistance	At the date you buy your policy, you have: <ul style="list-style-type: none"> › no known cardiovascular/coronary heart disease; and › not required hospitalisation for Insulin Resistance in the last two years, including as an outpatient.
Iron Deficiency	No criteria apply.
Macular Degeneration	No criteria apply.
Migraine	You haven't required hospitalisation for Migraines in the two years prior to buying your policy, including as an outpatient.
Nocturnal Cramps	No criteria apply.
Osteoporosis/ Osteopenia	At the date you buy your policy, you : <ul style="list-style-type: none"> › haven't had any fractures; › don't require more than one medication for this condition; and › have no other conditions involving the neck or back.
Pernicious Anaemia	No criteria apply.
Plantar Fasciitis	At the date you buy your policy, you haven't had surgery for Plantar Fasciitis in the last three months, and have no surgery planned.
Raynaud's Disease	At the date you buy your policy, you haven't required treatment by a medical practitioner for Raynaud's Disease in the last six months.
Sleep Apnoea	At the date you buy your policy, you : <ul style="list-style-type: none"> › have no other known or underlying respiratory conditions (including Asthma); and › haven't required hospitalisation for Sleep Apnoea in the last two years, including as an outpatient.
Solar Keratosis	Your condition has been confirmed as benign.

Medical condition	Criteria
Trigeminal Neuralgia	You haven't required treatment by a medical practitioner for Trigeminal Neuralgia in six months prior to buying your policy.
Trigger Finger	At the date you buy your policy, you haven't had surgery for Trigger Finger in the last three months, and have no surgery planned.
Vitamin B12 Deficiency	No criteria apply.

Can I purchase cover for other existing medical conditions that are not automatically covered?

You can't buy any additional cover. If **you** have an **existing medical condition** that's not listed above as an automatically accepted condition, or **you** don't satisfy all criteria for any listed condition, then **you** can still buy a policy but **you** won't be covered for any claim that **arises** in relation to the **existing medical condition**.

What if I develop a medical condition after buying my policy but before I travel?

If **you** develop a new medical condition (or the symptoms of one) after **you** buy **your** policy but before **you** depart on **your** trip, **you** must check with **your** medical practitioner for written confirmation that **you're** fit to travel. If **you** don't get **your** medical practitioner's written confirmation before **you** travel, and/or are unfit to travel due to **your** medical condition, **you** won't be covered for any claim that **arises** either directly or indirectly from that condition if **you** still travel.

Don't forget, if **you** had symptoms of a condition or were undergoing investigations for it at the time **you** bought **your** policy, **we** consider that to be an **existing medical condition**.

Existing medical conditions – close relatives

Cover is available to **you** when **your** travel plans are interrupted when a **close relative** is hospitalised or dies unexpectedly in Australia or New Zealand as a result of a **sudden illness or serious injury arising** from their **existing medical condition(s)**. **Your close relative** must be residing in Australia or New Zealand at the time and not travelling with **you** on any part of **your** trip.

At the time of the policy issue, **you** had to have been unaware of the likelihood of such hospitalisation or death.

The most **we** will pay in respect of all claims arising from the **existing medical condition** of a **close relative** under all sections of the policy combined is \$2,000 for a **single** policy and \$4,000 for a **family** policy.

Existing medical conditions – other people

We will not pay for claims made under this policy which **arise** from an **existing medical condition** suffered by people other than those named on the Certificate of Insurance or for a **close relative** as noted above.

Please also read the applicable cover and exclusion sections under What's Covered and What's Not (pages 8-22) and the General Exclusions (pages 23-27).

If **you** have any queries regarding **existing medical conditions**, please contact **us** on 1300 843 843.

Travelling While Pregnant

Travel insurance is important, especially for expectant mothers who wish to travel. If you're pregnant when you travel you are only covered if you meet the following criteria.

6.0

The cover described in Your Policy Benefits (pages 5-7) and in What's Covered and What's Not (pages 8-22) may include cover for a claim which **arises** from pregnancy in the following circumstances.

When are you covered?

If **you're** pregnant at the time **you** buy **your** policy, or fall pregnant afterwards, **you'll** have cover for any claim that **arises** from **your** pregnancy, provided that the event that causes **your** claim:

- > is sudden, unforeseen and outside of **your** control; and
- > occurs up to the end of the 26th week of a single pregnancy (or the 19th week of a multiple pregnancy); and
- > isn't otherwise excluded under this policy.

Further, if **your** claim **arises** as a result of **pregnancy complications** such as hyperemesis (severe morning sickness), miscarriage and gestational diabetes, then to be covered, those (or any other) **pregnancy complications** must have first developed unexpectedly after **you** bought **your** policy and not be related to any previous **pregnancy complication** **you'd** had prior to buying **your** policy.

These conditions apply whether **you** fall pregnant naturally or with medical assistance (for example, through IVF).

When aren't you covered?

You won't be covered for any claims that **arise** from any past or current **pregnancy complications** that exist at the time **you** buy **your** policy.

You also won't be covered for:

- > fertility treatment, at any time;
- > childbirth at any time;
- > regular ante-natal care;
- > care of a newborn child.

Also, **you** should plan **your** trip so **you're** home by the end of the 26th week for single pregnancies (or the 19th week for multiple pregnancies). If **you** don't and something happens after that period, **you** won't be covered.

You must check all Exclusions to Sections 1-13 (pages 15-16), 14 (page 19), 15 (page 20) and 16 (page 21) and the General Exclusions (pages 23-27) for other circumstances in which there is no cover or **we** will not pay.

Help and Emergencies

Emergency assistance is
just a phone call away:

+61 2 9234 3123 or
+61 2 8256 1523

7.0

Emergency assistance

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

24 hours, 7 days.

Phone: **+61 2 9234 3123**

or **+61 2 8256 1523**

SMS: **+61 4 18 406 188**

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

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

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

In an emergency situation, time is critical, so **you** or a member of **your travelling party** must contact **our** emergency assistance service (contact details above) as soon as it is practical following an **accident** or **you** becoming ill or **you** being hospitalised. They will need to assess **your** condition, so they will contact the hospital **you** are in to obtain necessary medical reports, and they may need to contact **your** GP at **home**.

Where **you** have not notified **our** emergency assistance service, **we** will not pay for any expenses, evacuation or airfares that have not been approved or arranged by **us**.

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

If you have a medical condition but are not hospitalised

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

Stolen, lost or damaged passport

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

Claiming with TID

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

8.0

What we ask for

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

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

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

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

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

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

Submitting your claim

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

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

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

Claims processing

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

Claims are payable in Australian dollars

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

You must not admit fault or liability

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

You must help us recover any money we have paid

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

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

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

Depreciation

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

Other insurance

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

Subrogation

We may, at **our** discretion, undertake in **your** name and on **your** behalf, control and settlement of proceedings for **our** own benefit to recover compensation or secure indemnity from any party in respect of anything covered by this policy; this is known as subrogation.

If **you** are entitled to make a claim upon another insurer, **we** may write to them on **your** behalf to ask them to contribute towards **your** claim, including, but not limited to, any insurance to which **you** are entitled or under which **you** may make a claim as part of **your** contract with **your** credit card provider. Please make sure **you** provide **us** with all details of any other insurance cover **you** may have when making **your** claim.

You are to assist and permit to be done all acts and things as required by **us** for the purpose of recovering compensation or securing indemnity from other parties to which **we** may become entitled or subrogated, notwithstanding that **we** have not paid **your** claim and whether or not the amount **we** pay **you** is less than full compensation for **your** loss.

Recovery

We will apply any money we recover from someone else under a right of subrogation in any manner we determine.

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 stolen 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.

How GST affects your claim

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

Travel within Australia only

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

Important Matters

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

9.0

Insurer

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

You may contact the insurer at:



Lloyd's Underwriters' General Representative in Australia

Level 9, 1 O'Connell St
Sydney NSW 2000



+61 2 8298 0700

Applying for cover

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

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



1300 843 843 (local charges apply)

About your premium

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

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

Changes to your policy

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



1300 843 843 (local charges apply)



OR **info@tid.com.au**

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

Cooling-off period

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

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

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

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

You can cancel your policy during the cooling-off period by contacting TID or visiting tid.com.au.

Cancelling outside the cooling-off period

If you request to cancel your policy outside the cooling-off period, we may, at our discretion, refund that part of your premium paid for the unused period of insurance; we may charge an

administration fee to do so. Also, **you** cannot have started **your trip**, made a claim and/or intend to make a claim or exercise any other right under **your** policy.

Policy extensions

If **you** wish to extend **your** policy, **you** must meet the eligibility criteria below and complete **your** online application before **your** policy expires at 11.59pm of the return date AEST/AEDT stated on **your** Certificate of Insurance. Be sure to contact **us** several days before **your** policy expires and during Australian business hours to ensure sufficient processing time.

You are only eligible for a policy extension when:

- a) **You** are still under the age limit for the plan selected; and
- b) **You** have not made a claim nor are aware of any possible claim to be made under **your** current policy; and
- c) There have been no changes to **your** health status – including the discovery of new medical conditions – since the issue date of **your** current policy; and
- d) There have been no other changes to **your** personal circumstances which someone would reasonably believe could impact on **our** decision to continue insuring **you** or applying any special conditions.

Extensions are calculated at the rates which are current at the time the extension is processed. Where **we** have updated this PDS, **you** will be offered an extension under the terms of the PDS in use at the date **your** extension is processed. Extensions will not be available when the **trip** duration exceeds 12 months in total (6 months for Domestic) from the departure date stated on **your** Certificate of Insurance.

Automatic extension

If the scheduled transport in which **you** are to travel is delayed, or the delay is caused by an event that is covered under **your** policy, the insurance is automatically extended beyond the return date stated in the Certificate of Insurance. The extension lasts until **you** are capable of travelling to **your** final destination, including the journey there, or up to a maximum of six (6) months, whichever happens first.

Your duty of disclosure

Before **you** enter into, vary or extend an insurance contract, **you** have a duty of disclosure under the *Insurance Contracts Act 1984*.

When **we** ask **you** questions that are relevant to **our** decision to insure **you** and on what terms, **you** must tell **us** anything that **you** know and that a reasonable person in the circumstances would include in answering the questions.

When amending or extending **your** contract of insurance, **we** will ask **you** specific questions about any change in **your** circumstances. **You** must tell **us** about any change to something **you** have previously told **us**, otherwise **you** will be taken to have told **us** that there is no change.

You have this duty until **we** agree to insure, amend or extend the contract.

If **you** do not tell **us** anything **you** are required to tell **us**, **we** may cancel **your** contract or reduce the amount **we** will pay **you** if **you** make a claim, or both.

If **your** failure to tell **us** is fraudulent, **we** may refuse to pay a claim and treat the contract as if it never existed.

How we handle complaints

Information about how **we** handle complaints about this insurance or the services provided to **you** by the underwriters, Cerberus or TID are located on page 51 of this Combined FSG and PDS.

General Insurance Code of Practice

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

Jurisdiction and Choice of Law

This policy is governed by and construed in accordance with the law of New South Wales, Australia, and **you** agree to submit to the exclusive jurisdiction of the courts of New South Wales. Equally, **we**, in accepting this insurance, agree that:

- › If a dispute **arises** under this insurance, this insurance will be subject to Australian law and practice and the underwriters will submit to the jurisdiction of any competent court in the Commonwealth of Australia;
- › Any summons notice or process to be served upon the underwriters may be served upon Lloyd's Underwriters' General Representative in Australia at Level 9, 1 O'Connell St, Sydney NSW 2000, who has authority to accept service and to appear on the underwriters' behalf; and
- › If a suit is instituted against **us**, **we** will abide by the final decision of such court or any competent appellate court.

Updating the PDS

This PDS is current for the period of insurance outlined on **your** Certificate of Insurance. From time to time, **we** may need to update this PDS or issue a Supplementary PDS (SPDS) if certain changes occur where required and permitted by law. If the changes affect a policy **you** currently have with **us**, **we** may issue **you** with a new PDS and/or SPDS to update the relevant information. **We** ask that **you** read the new PDS and/or SPDS in full to understand the changes, as they may affect **your** cover or **your** decision to purchase this product from **us**.

Where the information is not something that would be materially adverse from the point of view of a reasonable person considering whether or not to buy this product, the updated information will be available at tid.com.au. **You** can get a paper copy free of charge by contacting **us**.

Date prepared

This PDS was prepared on 24 October 2018. Certain underwriters at Lloyd's are responsible for this PDS.

Travel Insurance Glossary

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

10.

Words in this PDS that have special meanings are noted in **bold** and defined here. Plurals and other forms of these words shall have the same meaning:

Accident or accidental

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

Applicable Limit

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

Arises or Arising

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

Carrier or Carriers

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

Chronic

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

Close Relative

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

Dependent

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

Domestic

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

Epidemic

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

Excess

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

Existing Medical Condition

means a medical condition for which, at the time of policy purchase, **you** have ever:

- > had symptoms or been diagnosed;
- > been prescribed medication;
- > received (or are waiting for) medical treatment;
- > received (or are waiting for) tests, investigations or specialist consultation;
- > received or been advised to attend a follow-up consultation; and/or
- > had surgery or attended a hospital or clinic (as an outpatient or inpatient).

It also includes any **chronic** or ongoing medical condition or terminal illness.

This definition applies to **you**, a member of **your travelling party**, a **close relative**, and any other person.

Family

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

Home

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

Injury

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

Insolvency

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

Luggage and Personal Effects

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

Overseas

means in any country other than Australia.

Pandemic

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

Pregnancy Complications

means a medical condition in respect of which the diagnosis is distinct from pregnancy but is caused by or adversely affected by pregnancy.

Public Place

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

Reasonable

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

Rental Vehicle

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

Resident

means an Australian citizen; a holder of a current and valid Australian permanent resident visa, partner/spouse visa, Australian skilled migrant visa (including 457 and Temporary Skill Shortage (TSS) visa) or a student visa, but excluding working holiday visas; a New Zealand passport holder permanently residing in Australia; and:

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

Single

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

Sudden Illness or Serious Injury

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

Travelling Party

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

Trip

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

Unsupervised

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

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

We, Our, Us

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

You or Your

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

TIDAUS-PDS-10-24OCT2018

Financial Services Guide

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

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

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

About us

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

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

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

Cerberus has appointed Travel Insurance Direct Pty Limited, ABN 30 121 659 470, AR 305589, as its authorised representative to assist in the

management of its insurance activities, provide general advice and arrange to issue travel insurance online. TID acts on behalf of Cerberus and the insurer, and not on your behalf.

Our contact details:

Travel Insurance Direct Pty Limited

ABN 30 121 659 470

Authorised Representative No. 305589



PO Box A975
Sydney NSW 1235
Australia



1300 843 843

Cerberus Special Risks Pty Limited

ABN 81 115 932 173

AFS Licence No. 308461



1300 625 229



PO Box A975
Sydney NSW 1235
Australia

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

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

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

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

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

How we handle complaints

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

Cerberus Customer Relations

PO Box A975
Sydney NSW 1235
Australia

 **1300 625 229**

 idr@cerberusrisks.com

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

If you are not satisfied with the response to your complaint, you should contact the Lloyd's General Representative in Australia for consideration under their dispute resolution process.

You can contact Lloyd's at:

Lloyd's Underwriters' General Representative in Australia

Level 9, 1 O'Connell St
Sydney NSW 2000

 **+61 2 8298 0783**


The length of time required to resolve a dispute will depend on the individual issues; however, you'll normally receive a response within 15 business days of receipt, provided Lloyd's has received all necessary information and has completed any investigation required.

If you're not satisfied with the outcome of your complaint, or if your complaint has not been resolved to your satisfaction within 45 days of making your complaint, you can choose to have your complaint independently reviewed by Financial Ombudsman Service Limited (FOS). This service is free of charge to customers.

FOS can be contacted at:

Financial Ombudsman Service Limited (FOS)

GPO Box 3
Melbourne, VIC 3001

 **1800 367 287**
Fax: (03) 9613 6399

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

Privacy Policy

We take your privacy seriously and adhere to the Privacy Policy detailed on our website at travelinsurancedirect.com.au/privacy.

For further information about our Privacy Policy or to obtain a copy, please contact the Privacy Officer in writing at Cerberus, PO Box A975, Sydney South, NSW 1235 or at privacy@tid.com.au.

Date prepared

This FSG was prepared on 7 December 2017. Cerberus is responsible for this FSG.

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