

# Corporate Travel

## Product Disclosure Statement and Accident & Health Insurance Policy



POLICY

This Policy is underwritten by QBE Insurance (Australia) Limited  
ABN 78 003 191 035, AFS Licence No. 239545 of 82 Pitt Street, Sydney



# CORPORATE TRAVEL POLICY

## About this Product Disclosure Statement (PDS)

### Important Information

This booklet is designed to assist you to make informed choices about your insurance needs. It gives a summary of the significant benefits and risks associated with this product (you should refer to the Policy Terms and Conditions for full details). The Important Information also contains information about costs, our dispute resolution system, your cooling off rights and other relevant information, including other rights, terms, conditions and obligations attaching to this product.

### Policy Terms and Conditions

The Policy Terms and Conditions detail all the terms, conditions and exclusions relating to the Policy.

If we issue you with an insurance policy, you will be given a Policy Schedule. The Policy Schedule sets out the specific terms applicable to your cover and should be read together with the Policy Terms and Conditions.

The Policy Terms and Conditions and the Policy Schedule we send to you form your legal contract with us so please keep them in a safe place for future reference.

Please read both the Important Information and the policy Terms and Conditions carefully.

If you require further information about this product, please contact your Financial Services Provider.

Other documents may form part of this PDS. Any such documents will be dated and will include a statement identifying them as part of this PDS. If any major omissions, updates or corrections need to be made to this PDS a Supplementary PDS may be provided. In either case the relevant document will be provided to you with this PDS.

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## IMPORTANT INFORMATION

### Insurer

The Policy is underwritten by QBE Insurance (Australia) Limited, ABN 78 003 191 035, AFS Licence No. 239545 of 82 Pitt Street, Sydney, NSW 2000.

### About QBE Australia

QBE Insurance (Australia) Limited is a member of the QBE Insurance Group (ASX: QBE) and is Australia's largest international general insurance and reinsurance group. We are one of the top 25 insurers and reinsurers worldwide. The company has been operating in Australia since 1886 and continues to provide industry-leading insurance solutions that are focused on the needs of intermediaries and their clients.

QBE is a household name in Australian insurance, backed by sizeable assets, and well known as a strong and financially secure organisation.

### About QBE Assist

QBE Assist is a fully owned division of QBE Insurance (Australia) Limited.

QBE Assist provides medical evacuation and repatriation services for QBE's insurance policyholders worldwide. All cases are managed from start to finish by our experienced insurance and medical specialists who are available by telephone 24 hours a day for advice and assistance in the event of a medical emergency.

Specific services provided for insured persons under this Policy who sustain an injury or suffer an illness or mishap while travelling outside their country of residence include:

- Medical transfer to an appropriate specialist hospital;
- Repatriation to Australia;
- Intra hospital transfer should specialist care be required;
- Road ambulance transportation services;
- Repatriation of mortal remains.

### Additional services include:

- Providing a message service to the insured person to enable them to keep in touch with family, employees and travel agents,
- Organising the insured persons evacuation in the event of a political or environmental event which necessitates their evacuation.

### Contact details

In case of medical emergency, contact QBE Assist reverse charge from anywhere in the world, 24 hours a day.

Phone: +61 38523 2523

Fax : +61 38523 2530

Email : qbeassist@qbe.com

## Significant benefits and features

We believe the most significant benefits of this insurance Policy are that it offers the following benefits to an insured person on a journey. There are exclusions that apply to each section, see 'Corporate Travel Terms and Conditions' for full details.

Section A: Capital benefits - we will pay lump sum payments for accidental death and other listed conditions suffered as a result of an injury.

Section B: Weekly benefits injury – we will pay periodic payments to replace income that is lost following an injury.

Section C: Weekly benefits illness – we will pay periodic payments to replace income that is lost following an illness.

Section F: Overseas medical and additional expenses – we will reimburse certain medical and/or additional expenses incurred, as a result of an injury or illness, while on a journey outside an insured person's country of residence.

Section G: Emergency travel assistance – QBE Assist will provide assistance for specified amounts in the event of an injury or illness provided it occurs outside the insured person's country of residence.

Section H: Baggage and personal effects - we will pay specified amounts when an insured person's baggage is damaged, lost or stolen.

Section I: Personal money, travellers cheques and credit cards – we will pay specified amounts where cash, travellers cheques and credit cards are damaged, lost or stolen.

Section J: Personal liability – we will indemnify an insured person for their legal liability for certain damages that arise as a result of an occurrence while on a journey.

Section K: Kidnap, ransom and personal extortion – we will reimburse specified amounts if an insured person is kidnapped while on a journey.

Section L: Loss of deposits and additional expenses – we will reimburse specified amounts for loss of travel deposits and additional expenses.

Section M: Refund of excess following a collision – we will reimburse specified amounts following a collision, damage or theft of a hire motor vehicle, which occurs while an insured person is on a journey.

### This Policy does not cover certain things

We will not pay for any claim under any section of the Policy if the claim arises directly or indirectly out of any of the following:

1. intentional self injury or suicide or any attempt at suicide;
2. flying or other aerial activity unless as a passenger in a properly licensed aircraft;
3. an insured person's criminal or illegal act;
4. alcoholism or drug addiction;
5. participating in or training for any professional sport;
6. expenses recoverable by you or the insured person from any other source such as Workers Compensation or any other statutory scheme or Medicare or private health insurance;

7. expenses or costs which are considered to be 'Health Insurance business', as defined within the *Private Health Insurance Act 2007* (Cth); or
8. any expenses or costs which we are prohibited by law from paying within Australia or the country in which a claim occurs.

## Significant risks

### This product may not match your expectations

This product may not match your expectations (for example, because an exclusion applies). You should read the PDS carefully. Please ask your financial services provider if you are unsure about any aspect of this product.

The Policy will not cover some health problems the insured person had before you take out cover. Health problems not covered are those that are terminal illnesses.

### Your sum insured may not be adequate

To ensure that the amount of insurance is adequate to cover losses in the event of a claim, you should establish an adequate sum insured when initially arranging cover and also take care to amend the sums insured when your situation changes.

### A claim may be refused

We may refuse to pay or reduce the amount we pay under a claim if you do not comply with the Policy conditions, if you do not comply with your Duty of disclosure, or if an insured person makes a fraudulent claim.

### The amount of any claim may be reduced

The amount of any claim made against this Policy may be reduced:

- (a) where an excess applies (any applicable excess will be shown in your Policy Schedule);
- (b) where an excluded period of claim applies. An excluded period of claim is the number of days after medical treatment by a registered medical practitioner, for which we will not pay any benefits. An excluded period of claim will apply where you have chosen cover for 'Weekly benefits – Injury' or 'Weekly benefits – Illness';
- (c) where you have not requested the insured value of any item to be specifically specified in the Policy;
- (d) if you or an insured person do not comply with any Policy condition.

## The cost of this insurance Policy

The total premium is the amount we charge you for this insurance Policy. It includes the amount which we have calculated will cover the risk, and any taxes and government charges.

The premium and any taxes and government charges will be shown on your Policy Schedule.

When calculating your premium we take a range of rating factors into account. These factors, and the degree to which they affect your premium, will depend upon the information you provide to us.

The following factors have a significant impact on the calculation of your premium:

- the sums insured you choose;
- the extent of any helicopter and aircraft flying you do;
- the number of domestic and overseas trips you take and their duration;
- your claims and insurance history.

You should arrange your method of payment through your financial services provider. A quote for premium may be obtained from your financial services provider.

## How you can pay your premium

You can pay your premium in one annual payment by cash, cheque, or credit card.

### Overdue premium

You must pay your premium on time otherwise your Policy may not operate.

If you have not paid by the due date or your payment is dishonoured, this Policy will not operate and there will be no cover.

For more detailed information regarding payment options refer to the section headed 'How you can pay your premium' in Part B (Terms and Conditions).

## How Goods and Services Tax affects any payments we make

The amount of premium payable by you for this Policy includes an amount on account of the GST on the premium.

The sum insured and other limits of insurance cover shown on your Policy documentation are GST inclusive.

When we pay a claim, your GST status will determine the maximum amount we pay.

### When you are:

- (a) not registered for GST, the maximum amount we pay is the sum insured or the other limits of insurance cover including GST;
- (b) registered for GST, the maximum amount we pay is the sum insured or the other limits of insurance cover less any Input Tax Credit to which you are entitled or would be entitled if you made a relevant acquisition. In these circumstances, the Input Tax Credit may be claimable through your Business Activity Statement (BAS).

You must advise us of your correct Australian Business Number & Taxable Percentage. Any GST liability arising from your incorrect advice is payable by you.

Where the settlement of your claim is less than the sum insured or the other limits of insurance cover, we will only pay an amount for GST (less your entitlement for Input Tax Credit) applicable to the settlement. This means that if these amounts are not sufficient to cover your loss, we will only pay the GST relating to our settlement of the claim.



We will (where relevant) pay you on your claim by reference to the GST exclusive amount of any supply made by any business of yours which is relevant to your claim.

GST, Input Tax Credit, Business Activity Statement (BAS) and Acquisition have the same meaning as given to those expressions in *A New Tax System (Goods and Services Tax) Act 1999* and related legislation as amended from time to time.

Taxable Percentage is your entitlement to an Input Tax Credit on your premium as a percentage of the total GST on that premium.

### Other Taxation implications

There may be other taxation implications affecting you, depending upon your own circumstances. We recommend that you seek professional advice.

## Duty of disclosure – What you must tell us

Under the *Insurance Contracts Act 1984 (the Act)*, you have a Duty of disclosure. The Act requires that before a Policy is entered into, you must give us certain information we need to decide whether to insure you and anyone else to be insured under the Policy, and on what terms. Your Duty of disclosure is different, depending on whether this is a new Policy or not.

### New business

Where you are entering into this Policy for the first time (that is, it is new business and is not being renewed, varied, extended or reinstated) you must tell us everything you know and that a reasonable person in the circumstances could be expected to tell us, in answer to the specific questions we ask.

When answering our questions you must be honest.

- **Who needs to tell us**

It is important that you understand you are answering our questions in this way for yourself and anyone else whom you want to be covered by the Policy.

- **If you do not tell us**

If you do not answer our questions in this way, we may reduce or refuse to pay a claim, or cancel the Policy. If you answer our questions fraudulently, we may refuse to pay a claim and treat the Policy as never having worked.

### Renewals, variations, extensions and reinstatements

Once your Policy is entered into and is no longer new business then your duty to us changes. You are required before you renew, vary, extend or reinstate your Policy, to tell us everything you know and that a reasonable person in the circumstances could be expected to know, is a matter that is relevant to our decision whether to insure you, and anyone else to be insured under the Policy, and if so, on what terms.

- **You do not have to tell us about any matter**

- that diminishes the risk;
- that is of common knowledge;
- that we know or should know in the ordinary course of our business as an insurer, or
- which we indicate we do not want to know.

- **If you do not tell us**

If you do not comply with your Duty of disclosure we may reduce or refuse to pay a claim or cancel your Policy. If your non-disclosure is fraudulent we may treat this Policy as never having inception.

## Privacy

Privacy legislation regulates the way private sector organisations can collect, use, keep secure and disclose personal information. We are bound by the *Privacy Act 1988* (Cth.), when collecting and handling your personal information. QBE has developed a Privacy Policy which explains what sort of personal information we hold about you and what we do with it.

We will only collect personal information from or about you for the purpose of assessing your application for insurance and administering your insurance Policy, including any claims you make or claims made against you. We will only use and disclose your personal information for a purpose you would reasonably expect.

We may need to disclose personal information to our reinsurers (who may be located overseas), insurance intermediaries, insurance reference bureaux, credit reference agencies, our advisers and those involved in the claims handling process (including assessors, investigators and other insurers), for the purposes of assisting us and them in providing relevant services and products, or for the purposes of recovery or litigation. We may disclose personal information to people listed as co-insured on your Policy and to family members or agents authorised by you. Computer systems and support services may be provided to us by related companies within the QBE Group that may be located overseas. We may also disclose information to organisations which conduct customer service surveys on our behalf. We will request your consent to any other purpose.

By providing your personal information to us, you consent to us making these disclosures. Without your personal information we may not be able to issue insurance cover to you or process your claim.

You also have the opportunity to find out what personal information we hold about you and, when necessary, correct any errors in this information. Generally we will do this without restriction or charge. For further information about our Privacy Policy or to access or correct your personal information, please contact The Compliance Manager, QBE Insurance (Australia) Limited, GPO Box 82 Sydney NSW 2001 or email: [compliance.manager@qbe.com](mailto:compliance.manager@qbe.com).

## The General Insurance Code of Practice

QBE Insurance (Australia) Limited is a signatory to the General Insurance Code of Practice.

The Code aims to:

- promote more informed relations between insurers and their customers;
- improve consumer confidence in the general insurance industry;
- provide better mechanisms for the resolution of complaints and disputes between insurers and their customers; and
- commit insurers and the professionals they rely upon to higher standards of customer service.

## How to make a claim

Please contact your financial services provider to make a claim. We will only accept responsibility for repairs or payments to third parties under a claim where you have told us about them beforehand and we have accepted your claim. Full details of what you must do for us to consider your claim are provided in the 'Claims' section in part B of this booklet.

## Dispute resolution

We will do everything possible to provide a quality service to you. However, we recognise that occasionally there may be some aspect of our service or a decision we have made that you wish to query or draw to our attention.

We have a Complaints and Dispute Resolution Procedure which undertakes to provide an answer to your complaint within 15 working days.

If you would like to make a complaint or access our internal dispute resolution service please contact your nearest QBE office and ask to speak to a dispute resolution specialist.

If you are not happy with our answer, or we have taken more than 15 working days to respond, you may take your complaint to the Financial Ombudsman Service (FOS), an ASIC approved external dispute resolution body.

FOS resolves certain insurance disputes between consumers and insurers and will provide an independent review at no cost to you. QBE is bound by the determination of FOS but the determination is not binding on you.

We will provide the contact telephone number and address of the FOS office upon request.

## Cancelling your Policy

### How you may cancel this Policy

- You may cancel this Policy at any time by telling us in writing that you want to cancel it. You can do this by giving the notice to your financial services provider.
- Where 'you' involves more than one person, we will only cancel the Policy when a written agreement to cancel the Policy is received from all persons named as the insured.

### How we may cancel this Policy

- We may cancel this Policy in any of the circumstances permitted by law by informing you in writing.
- We will give you this notice in person or send it to your address last known to us.

## The premium

We will refund to you the proportion of the premium for the remaining period of insurance.

## Cooling-off information

If you want to return your Policy after your decision to buy it, you may cancel it and receive a full refund. To do this you may notify your financial services provider electronically or in writing within 21 days from the date the Policy commenced.

This cooling-off right does not apply if you have made or are entitled to make a claim. Even after the cooling-off period ends, you still have cancellation rights however your financial services provider may deduct certain amounts from any refund for administration costs or any non-refundable taxes.

If your Policy is for an event that will start and finish within the 21 day cooling-off period, you can only exercise your right before the event starts or the expiry of the cooling-off period, whichever is the earlier. For example, for travel insurance, the commencement of the journey is the event.

## Financial Claims Scheme

This Policy is a protected Policy under the Financial Claims Scheme (FCS), which protects certain insureds and claimants in the event of an insurer becoming insolvent. In the unlikely event of QBE becoming insolvent you may be entitled to access the FCS, provided you meet the eligibility criteria.

More information may be obtained from APRA – [www.apra.gov.au](http://www.apra.gov.au) or 1300 55 88 49.

## CORPORATE TRAVEL POLICY TERMS AND CONDITIONS

### Our agreement with you

This Policy is a legal contract between you and us. You pay us the premium, and we provide you with the cover you have chosen as set out in the Policy, occurring during the period of insurance shown on your Policy Schedule or any renewal period.

The amount of any excess that applies to your Policy will be shown in the Policy terms and conditions or your Policy Schedule.

The 'Exclusions - when you are not covered' and 'General conditions' apply to all sections of this Policy.

### Your Policy

Your Policy consists of this PDS and the Policy Schedule we give you.

Please read your Policy Wording carefully and satisfy yourself that it provides the cover you require.

If you want more information about any part of your Policy, please ask us, or your financial services provider.

The address and telephone number of your QBE branch are on your Policy Schedule.

You should keep the PDS and Policy Schedule together in a safe and convenient place for future reference.

### Definitions

#### Words with special meanings

Some key words and terms used in this Policy have a special meaning.

If words and terms are only used in just one section of the Policy, we will describe their special meaning in that section.

Wherever the following words or terms are used in the Policy they mean what is set out below:

Word or Term	Meaning
compensation	the amount or percentage of benefit shown in the compensation tables of this Policy for a payable condition or payable event under each section of this Policy.
country of residence	the country which an insured person is a citizen or permanent resident of (i.e. a holder of a multiple entry visa or permit which gives the insured person residency entitlements in such country).
dependant children	an insured person's and their spouse/partner's unmarried dependant child(ren) (including step or legally adopted child(ren)) as long as they are under nineteen (19) years of age or under twenty-five (25) years of age while they are full time students, and in either case, are primarily dependant upon the insured person for maintenance or support.

Word or Term	Meaning
excess	a sum of money that you or the insured person might be required to contribute to the amount of any claim. The excess applicable to each section of this Policy is shown in the Policy Schedule.
excluded period of claim	the number of days of disablement after medical treatment by a registered medical practitioner, for which an insured person does not receive a weekly benefit.
illness	any sickness or disease which occurs while on a journey.
injury	bodily injury resulting from an accident and which is not an illness and which: <ul style="list-style-type: none"> <li>occurs while on a journey; and</li> <li>within twelve (12) months of the injury, results solely and independently of any other cause in the events covered under this Policy; and</li> <li>includes any condition resulting from exposure to the elements as a result of injury.</li> </ul>
insured person	any person described in the Policy Schedule as an insured person.
journey	means any travel as described in the time of operation of cover, shown in the Policy Schedule. A journey does not include any travel that exceeds (six) 6 months.
medical expenses	all reasonable costs necessarily incurred outside an insured person's country of residence including ambulance, hospital, theatre and surgical fees and diagnostic or remedial treatment, physiotherapy or chiropractic services given, referred or prescribed by a registered medical practitioner.
non-scheduled flight	a flight which takes place outside of normal schedules and is the subject of a hiring agreement with a charter airline, either by hiring the entire aircraft or individual aircraft seat.
overseas	a journey or trip or travel outside the territorial borders of an insured person's country of residence.
payable condition	is the condition which is set out in the 'Compensation table' and/or the 'Policy Schedule' under each section of the Policy.
payable event	is the event which is set out in the 'Compensation Table' and/or the 'Policy Schedule' under each section of the Policy.

Word or Term	Meaning
period of insurance	the period shown in the Policy Schedule. If any insured person commences a journey during the period of insurance, the period of insurance for that insured person is extended until the journey ends.
Policy Schedule	the latest schedule of insurance we give you, including any endorsement schedule or any renewal schedule.
pre disability earnings	<ol style="list-style-type: none"> <li>1. if an insured person is self employed: <ul style="list-style-type: none"> <li>– the gross weekly income from personal exertion after allowing for costs and expenses incurred in deriving that income averaged over the twelve (12) months prior to injury or illness or any shorter period that they have been engaged in their occupation.</li> </ul> </li> <li>2. if an insured person is an employee: <ul style="list-style-type: none"> <li>– basic weekly base rate of pay exclusive of overtime payments, bonuses, commission or allowances at the time of injury or illness.</li> </ul> </li> <li>3. If an insured person is an employee and has elected to salary sacrifice income: <ul style="list-style-type: none"> <li>– basic weekly base rate of pay will be deemed to mean the total cost of employment inclusive of such income salary sacrificed.</li> </ul> </li> </ol>
professional sport	is an activity which is competitively engaged in, governed by a set of rules or customs, requiring physical exertion and for which the participant receives a financial reward, payment or remuneration for their efforts and/or achievements. Professional sport does not include amateur sporting activities for which the participant has not or will not receive any financial reward, payment or remuneration.
registered medical practitioner	a medical practitioner who holds a current registration with the respective medical practitioners board or medical board (or similar) in the country that the medical practitioner is providing medical services in.
spouse	the insured person's husband or wife, de-facto or life partner (including same-sex partners), which the insured person has continuously cohabited with for a period of six (6) months or more.

Word or Term	Meaning
terminal illness	a disease that cannot be cured or adequately treated and that is reasonably expected to result in the death of the patient within a relatively short period of time. Terminal illness includes but is not limited to progressive or chronic diseases such as cancer or heart disease.
total disablement	<p>disablement as a result of an injury that entirely prevents an insured person from:</p> <ul style="list-style-type: none"> <li>- carrying out all the normal duties of their usual occupation, business or profession, or</li> <li>- carrying out all the normal duties of all their occupations where they are engaged in more than one occupation.</li> </ul> <p>If illness cover has been selected total disablement will also mean such inability occurring in the same circumstances resulting from illness.</p>
war	includes war, invasion, acts of foreign enemies, hostiles or war like operations (whether war be declared or not), civil war, rebellion, revolution, insurrection, civil commotion assuming the proportions of or amounting to an uprising, military or usurped power.
we, our or us	QBE Insurance (Australia) Limited, ABN 78 003 191 035.
you or your	the person(s), companies or firms named on the current Policy Schedule as the 'Insured'.

### What you are covered for

We will cover you and any insured person for the events set out in Sections A to M, and in the 'Additional covers' of this Policy.

Please note that the 'Exclusions' and 'General conditions' apply to all of this Policy.



## Section A – Capital benefits

### Definitions

#### Words with special meanings

In this section the following words have the meanings set out below:

Word or Term	Meaning
loss of use	in connection with a limb or part of a limb means physical severance or permanent loss of use.
paraplegia	total paralysis of both legs and part or whole of the lower half of the body.
permanent	continuing for at least twelve (12) months and which will, in all probability, continue for life.
quadriplegia	total paralysis of both legs and both arms.

### What we will pay

We will pay amounts set out in the compensation tables in this section of the Policy to an insured person if the payable conditions shown:

- occur during the period of insurance, and
- are a result of injury which occurs while on a journey.

### What we will not pay

We will not pay for any claim under this section of the Policy if the claim arises directly or indirectly out of any of the following:

- illness, or
- suicide or attempted suicide.

The exclusions and general conditions set out in this Policy may also affect a claim.

### Capital benefits restrictions

- Any payable condition claimed under capital benefits must occur within twelve (12) months of the date of injury.
- Any capital benefit payable will be reduced by any amount of any other capital benefit we have paid or are liable to pay in connection with the same injury.
- Any capital benefit payable under this section will be reduced by any amounts paid under Section K (kidnap and ransom) in connection with the same event.
- Any capital benefit payable under this section will be reduced by any amounts paid under the disappearance capital benefit.
- The maximum amount we will pay for any one event involving more than one insured person is the aggregate limit of liability shown in the Policy Schedule. If this amount is not enough to pay all claims in full, then we will reduce each insured person's benefit proportionately.
- The death benefit payable for dependant children is limited to \$30,000 unless otherwise stated on the Policy Schedule.

### Compensation table – Capital benefits

Payable condition – an Injury resulting in:	Compensation as a percentage of the Capital Benefits sum insured shown in the Policy Schedule
1. Death	100%
2. Permanent total disablement	100% subject to a maximum of 10 times annual pre disability earnings.
3. Permanent disability not otherwise provided	The percentage we determine as being consistent with the compensation provided in this table but not exceeding 75%.
4. Permanent paraplegia	100%
5. Permanent quadriplegia	100%
6. Permanent unsound mind to the extent of legal incapacity	100%
7. Permanent and incurable paralysis of all limbs	100%
8. Permanent total loss of the entire sight in one (1) or both eyes	100%
9. Permanent total loss of hearing in both ears	100%
10. Permanent total loss of the use of both hands	100%
11. Permanent total loss of the use of both arms	100%
12. Permanent total loss of the use of both feet	100%
13. Permanent total loss of the use of both legs	100%
14. Permanent total loss of the use of one (1) hand and one (1) foot	100%
15. Permanent total loss of the use of one (1) hand or one (1) arm	100%
16. Permanent total loss of the use of one (1) foot or one (1) leg	100%
17. Permanent total loss of the lens of one (1) eye	50%
18. Permanent total loss of the hearing in one (1) ear	50%
19. Permanent total loss of the use of four (4) fingers and thumb of either hand	75%
20. Permanent total loss of the use of four (4) fingers of either hand	40%
21. Permanent total loss of the use of one (1) thumb, both joints	30%

Payable condition – an Injury resulting in:	Compensation as a percentage of the Capital Benefits sum insured shown in the Policy Schedule
22. Permanent total loss of the use of one (1) thumb, one (1) joint	15%
23. Permanent total loss of the use of a finger, three (3) joints	10%
24. Permanent total loss of the use of a finger, two (2) joints	8%
25. Permanent total loss of the use of a finger, one (1) joint	5%
26. Permanent total loss of the use of all the toes of one (1) foot	15%
27. Permanent total loss of the use of great toe, both joints	5%
28. Permanent total loss of the use of great toe, one (1) joint	3%
29. Permanent total loss of the use of other toe, (each toe)	1%
30. Third degree burns and/or resultant disfigurement which covers more than 40% of the entire body	50%

### Additional benefits applicable to section A – Capital benefits

The following additional benefits automatically apply if you have chosen this cover and it is shown in your Policy Schedule.

#### Broken bones benefit

If an insured person is on a journey and suffers an injury resulting in a broken bone we will pay them an additional benefit for the amount shown in the compensation table.

'Broken' means a complete break of a bone and does not include a fracture not extending through the full thickness of the bone.

The broken bones benefit sum insured is \$10,000. This the maximum amount we will pay for any and all broken bones arising from any one injury.

#### Compensation table - Broken bones benefit

Payable condition – an Injury resulting in the following broken bone(s):	Compensation as a percentage of the Broken bones benefit sum insured
1. Neck skull or spine	100%
2. Hip	75%
3. Jaw, pelvis, leg, ankle or knee	50%
4. Cheekbone or shoulder	30%
5. Arm, elbow or wrist	10%
6. Nose or collarbone	20%
7. Foot or hand	5%
8. In the case of established non union of any of the above breaks, an additional	5%

#### Disappearance benefit

If an insured person is travelling on a conveyance, and

- their means of transportation disappears, sinks or is wrecked, and
- their body has not been found within one (1) year,

we will presume that they have died as a result of an injury and we will pay the death benefit to the insured person's legal representative, unless we suspect that the insured person may not have perished.

If we have paid the disappearance benefit we will not pay any other capital benefits under this Policy.

If the insured person is later found to be alive then you must refund the amount we have paid.

#### Lifestyle modification benefit

If an insured person is paid a capital benefit under any of payable conditions 2, 4, 5 or 7 of the 'Compensation table – Capital benefits', we will also pay for the costs necessarily incurred by the insured person in modifying:

- their motor vehicle, or
- home, or
- in relocating to a suitable home.

We will pay up to a maximum of \$20,000.

## Section B – Weekly benefits – Injury

### What we will pay

We will pay amounts as set out in the compensation table in this section of the Policy to an insured person if the payable conditions shown:

- occur during the period of insurance, and
- are a result of injury which occurs while on a journey.

### What we will not pay

We will not pay for any claim under this section of the Policy if the claim arises directly or indirectly out of any of the following:

- when a journey is undertaken against medical advice, or
- illness.

The exclusions and general conditions set out in this Policy may also affect a claim.

### Weekly benefit – Injury restrictions

- Any payable condition claimed must occur within (twelve) 12 months of the date of injury.
- Successive periods of disablement:
  - resulting from the same injury, and
  - which are not separated by a return to active full time employment for six (6) months or more will be considered as one (1) period of disablement.
- Weekly benefits will be paid after the excluded period of claim has elapsed.
- We will continue to pay weekly benefits while the insured person suffers disablement up to a maximum of 156 weeks or any shorter period shown in the Policy Schedule.

### The weekly benefit we pay will be

- the amount shown in the compensation table, or
- the insured person's pre disability earnings,

whichever is less, and will be reduced by weekly benefits paid or payable from any Statutory Transport Accident Scheme Or Statutory Workers Compensation Scheme or other statutory schemes.

#### Compensation table – Weekly benefits - Injury

Payable condition – an Injury resulting in:	Compensation
1. Temporary total disablement	Up to the weekly benefit limit shown in the Policy Schedule.
2. Temporary partial disablement	Up to 30% of the weekly benefit limit unless otherwise stated in the Policy Schedule.

## Additional benefits applicable to Section B – Weekly benefits – Injury

### Surgical procedures benefit – resulting from an injury

This additional benefit will only apply if:

- the insured person has an entitlement to claim for weekly benefits under this section of the Policy,
- both the injury and the surgical procedure take place outside of the insured person's country of residence, and
- the payable condition claimed occurs within three (3) months of the date of injury.

Payable condition - an injury resulting in the following surgical procedure	Compensation as a percentage of the Surgical procedures Benefit sum insured
1. Craniotomy	100%
2. Open heart surgery	100%
3. Amputation of limb	100%
4. Fracture of limb requiring open reduction	50%
5. Dislocation requiring open reduction	50%
6. Any other surgical procedure carried out under a general anaesthetic	10%

We will pay up to a maximum of \$20,000 for any and all payable conditions arising from any injury.

### Rehabilitation benefit

If we pay a weekly benefit under this section of the Policy, we will also pay for the costs incurred for participation in a return to work program if:

- we consider the program reasonable, and
- agreed by the insured person's treating registered medical practitioner.

We will pay up to a maximum of \$10,000 for costs incurred as a result of an injury.

### Claim escalation benefit

If we pay a weekly benefit under this section of the Policy for an injury for a continuous period of more than 52 weeks, we will increase the weekly benefit each year by either:

- 7%, or
- the increase in the Consumer Price Index (in the State you live) compared with the previous year,

whichever is the lesser.

## Section C – Weekly benefits – Illness

### What we will pay

We will pay amounts as set out in the compensation table in this section of the Policy to an insured person if the payable conditions shown:

- occur during the period of insurance, and
- are a result of illness which occurs while on a journey.

### What we will not pay

We will not pay for any claim under this section of the Policy if the claim arises directly or indirectly out of any of the following:

- when a journey is undertaken against medical advice,
- a terminal illness diagnosed prior to the commencement date of the journey,
- injury, or
- childbirth or pregnancy.

The exclusions and general conditions set out in this Policy may also affect a claim.

### Weekly benefits – Illness restrictions

- Any payable condition claimed must occur within twelve (12) months of the date of illness.
- Successive periods of total disablement
  - resulting from the same illness, and
  - which are not separated by a return to active full time employment for six (6) months or more will be considered as one (1) period of disablement.
- Weekly benefits will be paid after the excluded period of claim has elapsed.
- We will continue to pay weekly benefits while the insured person suffers disablement up to a maximum of 156 weeks or any lesser period shown in the Policy Schedule.

### The weekly benefit we pay will be

- the amount shown in the compensation table, or
- the insured person's pre disability earnings

whichever is less, and will be reduced by weekly benefits paid or payable from any Statutory Transport Accident Scheme Or Statutory Workers Compensation Scheme or other statutory schemes.

### Compensation table – Weekly benefits -Illness

Payable condition -an Illness resulting in:	Compensation
1. Total disablement	Up to the weekly benefit limit shown in the Policy Schedule.
2. Partial disablement	Up 30% of the weekly benefit limit unless otherwise stated in the Policy Schedule.

## Additional benefits applicable to Section C – Weekly benefits – Illness

### Surgical procedures benefit – resulting from an illness

This additional benefit will only apply if:

- the insured person has an entitlement to claim for weekly benefits under this section of the Policy,
- both the illness and the surgical procedure take place outside of the insured person's country of residence, and
- the payable condition claimed occurs within three (3) months of the date of illness.

Payable condition - an injury resulting in the following surgical procedure	Compensation as a percentage of the Surgical procedures benefit
1. Craniotomy	100%
2. Open heart surgery	100%
3. Amputation of limb	100%
4. Abdominal surgery carried out under general anaesthetic	50%
5. Any other surgical procedure carried out under a general anaesthetic	10%

We will pay up to a maximum of \$20,000 for any and all payable conditions arising from any illness.

### Rehabilitation benefit

If we pay a weekly benefit under this section of the Policy, we will also pay for the costs incurred for participation in a return to work program if:

- we consider the program reasonable, and
- agreed by the insured person's treating medical practitioner.

We will pay up to a maximum of \$10,000 for costs incurred as a result of an illness.

### Claim escalation benefit

If we pay a weekly benefit under this section of the Policy for an illness for a continuous period of more than 52 weeks, we will increase the weekly benefit each year by either:

- 7%, or
- the increase in the Consumer Price Index (in the State you live) compared with the previous year,

whichever is the lesser.

## Section D

This policy does not contain Section D

## Section E

This policy does not contain Section E

## Section F – Overseas medical and additional expenses

### Definitions

#### Words with special meanings

In this section the following words have the meanings set out below:

Word or Term	Meaning
emergency dental	<ul style="list-style-type: none"> <li>treatment as a result of injury which we consider non routine and which in the opinion of a qualified dental practitioner, cannot be reasonably delayed until the insured person returns to his or her country of residence.</li> </ul>
emergency optical	<ul style="list-style-type: none"> <li>treatment as a result of injury which we consider non routine and which in the opinion of a qualified optical practitioner, cannot be reasonably delayed until the insured person returns to his or her country of residence.</li> </ul>

### What we will pay

We will pay the amounts as set out in the compensation tables in this section of the Policy if the insured person's medical and additional expenses:

- are incurred during the period of insurance, and
- are incurred within 24 months of the date of injury or illness, and
- are a result of injury or illness which occurs while on a journey outside of the insured person's country of residence.

### What we will not pay

We will not pay for any claim under this section of the Policy if the claim arises directly or indirectly out of any of the following:

- when a journey is undertaken against medical advice, or
- when a journey is undertaken for the purpose of obtaining medical treatment, unless agreed in advance by us, or
- a terminal illness diagnosed prior to the commencement date of the journey, or
- expenses within the insured persons country of residence unless first treated overseas by a registered medical practitioner.

### Overseas medical and additional expenses restrictions

- Any payable expense must be incurred within 24 months of the date of injury or illness.
- We will reduce our payment by any amounts recoverable by you or the insured person from any other source such as Workers Compensation or another Statutory Scheme or Private Health Insurance.

- In the event an insured person suffers an injury or illness whilst on a journey outside of his or her country of residence, on the insured person's return to the insured person's country of residence, we will reimburse medical expenses incurred within the insured person's country of residence, up to the limits shown in the compensation table and as permitted by the laws of that country.

The exclusions and general conditions set out in this Policy may also affect a claim.

#### Compensation table – Overseas medical

Payable event :	Compensation – What we will pay
Medical (including hospital) expenses	Up to the overseas medical Expense limit shown in your Policy Schedule.
Emergency dental expenses	Up to a maximum amount of \$5,000, any one injury or illness.
Emergency optical expenses	Up to a maximum amount of \$5,000, any one injury or illness.

#### Compensation table – Additional expenses

Payable Event	Compensation – What we will pay
Additional accommodation, meal and travelling expenses.	Up to an amount not exceeding \$20,000.
An insured person being hospitalised outside of the insured person's country of residence.	\$300 per day for each day hospitalised, up to a maximum of \$5,000 in total to cover out-of-pocket expenses.
Ongoing medical expenses when the insured person returns to their country of residence.	Up to the overseas medical expenses limit shown in your Policy Schedule if returning to Australia. If returning to another country of residence, up to \$50,000 unless otherwise stated in your Policy Schedule.
Expenses of having one person travel to, remain with or escort the insured person if <ul style="list-style-type: none"> <li>our prior agreement has been obtained</li> <li>medical advice states it necessary</li> </ul>	Up to an amount not exceeding \$20,000 unless otherwise stated in your Policy Schedule.
The insured person's death. We will reimburse the following costs to the estate of the insured person: <ul style="list-style-type: none"> <li>burial expenses or cost of returning the insured person's body or ashes to their home address including personal effects.</li> </ul>	Up to an amount not exceeding \$25,000 unless otherwise stated in your Policy Schedule.

The maximum amount of 'Additional expenses' we will pay as a result of an injury or illness to an insured person, will be up to the overseas medical and additional expense limit shown in the Policy Schedule.



## Section G – Emergency travel assistance

### Definitions

#### Words with special meanings

In this section the following words have the meanings set out below:

Word or Term	Meaning
emergency travel assistance	<p>co-ordinating emergency medical treatment and services, which includes but is not limited to:</p> <ul style="list-style-type: none"> <li>• arranging for hospitalisation;</li> <li>• repatriation;</li> <li>• transfers;</li> <li>• medical supervision during transportation;</li> <li>• burial arrangements;</li> </ul> <p>subject to QBE Assist's prior express consent.</p> <p>QBE Assist may also elect to</p> <ul style="list-style-type: none"> <li>– arrange for family or friends to travel to the insured person while they are hospitalised; and/or</li> <li>– arrange for family or friends to accompany an insured person on their repatriation;</li> </ul> <p>subject to QBE Assist's prior express consent.</p>

#### What we will do:

We will provide emergency travel assistance to an insured person who suffers an injury or illness which occurs while on a journey outside of their country of residence during the period of insurance.

QBE Assist may advance any amounts necessary to settle medical bills which are covered under any section of this Policy.

QBE Assist will also provide emergency travel assistance for non-medical events including:

- providing a message service to the insured person to enable them to keep in touch with family, employees and travel agents;
- organising the insured persons evacuation in the event of a political or environmental event which necessitates their evacuation.

#### What we will not do

We will not provide emergency travel assistance, or pay for any claim under this section of the Policy, if:

- QBE Assist has not given its prior express consent;
- a journey is undertaken against medical advice;
- a journey is undertaken for the purpose of obtaining medical treatment.

We will not provide emergency travel assistance, or pay for any claim under this section of the Policy, for:

- a terminal illness diagnosed prior to the commencement date of the journey; or

- emergency travel assistance provided in your or the insured person's country of residence.

**The other general exclusions set out in this Policy may also affect a claim.**

#### General terms and conditions applying to Section G

1. In case of an emergency while overseas and before undertaking any personal action, the insured person must contact QBE Assist's 24 hours a day alarm centres using the phone number or email which are provided on the QBE Assist Card issued to the insured, and:
  - (i) state his/her name and the number and validity date of this Policy,
  - (ii) state the place and telephone number where he/she can be reached,
  - (iii) give a brief description of the problem encountered and nature of help required.
2. QBE Assist's medical team or agents must have free access to the insured person in order to ascertain his/her condition. If this obligation is not fulfilled the insured person will no longer be entitled to medical assistance.
3. Any decision concerning the medical transfer and/or repatriation of the insured person (such as date, means, medical equipment) will be jointly taken by both the medical practitioner attending the insured person and QBE Assist's medical team.
4. In the event of a claim for transportation costs, the insured person must give QBE Assist the unused portion of their original ticket or the counter value of the said portion.
5. In any case of injury or illness requiring hospitalisation, transfer or repatriation the insured person or any person acting on his/her behalf must inform QBE Assist within three (3) days of the date of occurrence. Failure to do so may entitle us to invoice you the supplementary cost to be borne by QBE Assist which would not have been incurred had this three (3) day delay been respected by the insured person or any person acting on his/her behalf.
6. In a life threatening situation, the insured person should try to arrange for immediate emergency help first through local sources and then by contacting QBE Assist.
7. The insured person will provide us with all documents and carry out all necessary formalities to enable us to recover payments from relevant sources, if applicable.
8. Should QBE Assist be required to advance payment of medical expenses, the insured person will recover all entitled reimbursements for such expenses which are or would be payable under the *Private Health Insurance Act 2007* (Cth), or any registered Health Fund and pay all amounts received from these sources to QBE Insurance (Australia) Limited as soon as possible after the return the insured persons country of residence.
9. QBE Assist will not be responsible for delays or impeachment in performing the assistance and services in case of strike, war, invasion, act of foreign enemies, hostilities (whether war be declared or not), civil war, rebellion, insurrection, terrorism or military or usurped power, riot and civil commotion, radioactivity or any other event of force majeure.

## Section H – Baggage and personal effects

### Definitions

#### Words with special meanings

In this section the following words have the meanings set out below:

Word or Term	Meaning
electronic equipment	is any equipment that operates using batteries or electricity including iPods, iPads, satellite navigation units.
unattended	is leaving your baggage either with a person you have not previously met, or, in a public place where it can be taken without your knowledge or at a distance from which you cannot prevent it from being taken.

### What we will pay

If during the period of insurance an insured person's baggage as described below is damaged, lost or stolen while on a journey we will pay the amounts as set out in the compensation table in this section of the Policy.

Baggage under this section includes:

- baggage and personal effects accompanying the insured person;
- business documents including papers, plans, specifications and manuscripts;
- business samples, including items intended to be sold or dealt with for trade;
- electronic equipment including laptop computers, mobile phones, cameras and camera equipment, Personal Digital Assistant (PDA), electronic organisers and other hand held computers;
- replacement of keys and/or locks including motor vehicle, business or residential keys.

The maximum amount we will pay under this section is shown in the Policy Schedule.

### What we will not pay

We will not pay for any claim under this section of the Policy if the claim arises directly or indirectly out of any of the following:

- baggage that is left unattended;
- baggage or personal effects that are being transported independently by you;
- sporting equipment while it is being used;
- furniture;
- brittle or fragile items;
- money;
- precious unset or uncut gemstones;
- normal wear and tear;

- electronic equipment, including laptop computers, cameras and camera equipment, mobile phones, Personal Digital Assistants (PDA), electronic organiser's, palm pilots and other hand held computers whilst carried in or on any aircraft, aerial device, waterborne vessel or craft unless they accompany the insured person as personal cabin baggage; or
- items stolen or lost unless reported to Police or other authority and a written statement obtained within 24 hours.

The exclusions and general conditions set out in this Policy may also affect a claim

### Compensation table – Baggage and personal effects

Payable Event	Compensation – What we will pay
The insured person's baggage is delayed, misdirected or misplaced by any carrier for more than (eight) 8 hours.	The reasonable cost of the insured person having to buy essential clothing and personal items up to a maximum of \$3,000.
The insured person's business documents or samples are accidentally damaged, lost or stolen.	The reasonable cost of replacing the documents or samples, including the cost of delivery of replacements up to a maximum of \$3,000.
The insured person's business items intended to be sold or dealt with for trade are accidentally damaged or stolen.	The reasonable cost of replacing these items, including delivery of replacements up to a maximum of \$2,500.
The insured person's baggage is accidentally damaged, lost or stolen.	For all baggage items <ul style="list-style-type: none"> <li>• At our option the cost of repair or replacement to a condition equal to but not better than their condition when new.</li> <li>• We may choose to repair or replace lost or damaged property or pay for the loss in cash.</li> </ul> In either case, up to the maximum specified in the Policy Schedule.
The insured person loses his or her motor vehicle, business or residential keys.	The costs incurred to replace these keys and/or locks up to amount not exceeding \$2,000.
The insured person loses his or her mobile phone.	The amount the insured person must pay for illegal use of their mobile phone up to \$1,500.

## Section I – Personal money, travellers cheques and credit cards

### What we will pay

If during the period of insurance the insured person's property, as described below is damaged, lost or stolen while on a journey we will pay the amounts as set out in the compensation table in this section of the Policy.

We will also provide cover to the insured person's property from the time they collect the property from a financial institution or 72 hours prior to the commencement of the journey and shall continue for 72 hours after the completion of the journey or until property is deposited at a financial institution, which ever occurs first.

Property under this section is cash, travellers cheques and credit cards, passports and travel documents.

### What we will not pay

We will not pay for any claim under this section of the Policy if the claim arises directly or indirectly out of any of the following:

- cash unless carried by the insured person,
- loss of property other than cash from suitcases that have been left in accommodation rooms or motor vehicles or transported as checked baggage or forwarded as unaccompanied baggage,
- property stolen unless reported to Police or other authority and a written statement obtained within 24 hours,
- confiscation by customs or other officials, or
- losses due to devaluation in currency.

The exclusions and general conditions set out in this Policy may also affect a claim.

#### Compensation table –

##### Personal money, travellers cheques and credit cards

Payable event	Compensation – What we will pay
The insured person's money is lost or stolen.	Up to the money limit shown in your Policy Schedule.
The insured person's credit cards or travellers cheques or travel documents are damaged, lost or stolen.	The reasonable cost of replacing the documents and any amounts that the insured person has to pay resulting from their illegal use up to a maximum of \$5,000 unless otherwise stated in the Policy Schedule.

## Section J – Personal liability

### What we will pay

We will pay the amounts as set out in the compensation table in this section of the Policy if the insured person becomes legally liable during the period of insurance to pay damages as a result of an occurrence while on a journey.

Occurrence under this section includes continuous or repeated exposure to substantially the same general conditions. We regard all death, bodily injury or loss of or damage to property arising from one original source or cause as one occurrence.

### What we will not pay

We will not pay for any claim under this section of the Policy if the claim arises directly or indirectly out of any of the following:

- bodily injury to any employee of yours arising out of or in the course of employment,
- bodily injury to the insured person or any member of the insured person's family,
- loss of or damage to property belonging to or in the control of the insured person,
- loss of or damage to property belonging to any member of the insured person's family,
- loss of or damage to property or bodily injury arising out of the insured person's business or trade, or out of professional advice given by you or the insured person,
- loss of or damage to property or bodily injury arising out of ownership, use or possession of any mechanically propelled vehicle aircraft or waterborne craft, or
- aggravated, exemplary or punitive damages or any fine or penalty.

The exclusions and general conditions set out in this Policy may also affect a claim.

#### Compensation table – Personal liability

Payable event	Compensation – What we will pay
1. The insured person becomes legally liable to pay damage as a result of the death or bodily injury to any person.	As per Policy Schedule.
2. The insured person becomes legally liable to pay damage as a result of loss of or damage to property.	As per Policy Schedule.
3. The third party legal costs for which the insured person becomes legally liable as a consequence of payable event 1 or 2.	As per Policy Schedule.
4. The legal costs (which we approve in advance) of defending claims arising from payable events 1 or 2.	As per Policy Schedule.

## Section K – Kidnap and ransom and personal extortion

### Definitions

#### Words with special meanings

In this section the following words have the meanings set out below:

Word or Term	Meaning
kidnapping	any event or connected series of events of seizing, detaining or carrying away an insured person by unlawful force for the purpose of demanding ransom.
personal extortion	to intimidate by a threat or series of threats to kidnap, or cause bodily injury.
ransom	cash and/or marketable goods surrendered by or on behalf of the insured in connection with kidnap, unlawful detention or extortion event.

### What we will pay

We will pay the amounts as set out in the compensation table in this section of the Policy if the insured person is kidnapped or the insured person is subject to a personal extortion threat while on a journey.

The maximum amount we will pay under this section is shown in the Policy Schedule.

### What we will not pay

We will not pay for any claim under this section of the Policy if the claim arises directly or indirectly out of any of the following:

- any kidnapping or personal extortion occurring in any country located in Central or South America and any country in which the United Nations armed forces are present and active,
- if you or the insured person has had this type of insurance declined in the past for reasons specified to you or the insured person,
- if you or the insured person has had this type of insurance cancelled or issued with special conditions in the past for reasons specified to you or the insured person,
- if you or the insured person has had a kidnapping or attempted kidnapping in the past, or
- if you or the insured person has had an extortion demand made against them in the past.

The exclusions and general conditions set out in this Policy may also affect a claim.

### Special conditions

You must take all precautions to protect the confidentiality of this cover.

We will not act as an intermediary or negotiator for you or the insured person nor will we offer advice to you or the insured person on dealing with any kidnapper.

If the insured person is kidnapped you must:

- determine positively that there has been a kidnapping;
- record the serial numbers of any currency paid to secure the insured person's release.

If we establish that the insured person has committed a fraudulent kidnapping, you will:

- reimburse us all money paid by us for that loss;
- do all things necessary to prosecute the insured person.

You must also make every reasonable effort to notify the local law enforcement agency of the demand for ransom prior to the payment of the ransom monies and to comply with their recommendations and instructions.

### Compensation table – Kidnap and ransom and personal extortion

Payable event	Compensation – What we will pay
1. The insured person is kidnapped or is the subject of a personal extortion.	Ransom money paid by you less any amounts recovered. Expenses we consider reasonable that are incurred following receipt of a ransom demand.
2. Rehabilitation expenses incurred as a direct result of insured person being kidnapped or subject of a personal extortion.	Reimbursement of expenses incurred as recommended by the insured person's treating registered medical practitioner, to assist with his or her health and well-being, up to a maximum amount of \$5,000.

## Section L – Loss of deposits and additional expenses

### Definitions

#### Words with special meaning

In this section the following words have the meanings set out below:

Word or Term	Meaning
additional accommodation, meal and travelling expenses	expenses we consider reasonable, over and above what the insured person expected to pay for accommodation, meals and travelling expenses had the journey gone ahead as planned.
relative	insured person's parent, parent-in-law, step parent, child, step child, brother, sister, brother-in-law, sister-in-law, daughter -in-law, son-in-law, half brother, half sister, fiancée, niece, nephew, uncle, aunt, grand parent or grand child provided they reside in the insured person's country of residence.

For the purpose of this Section only, serious injury or illness shall mean an injury or illness which results in a person being admitted into hospital in excess of 24 hours.

#### What we will pay

We will pay the amounts as set out in the compensation tables in this section of the Policy if expenses in relation to the events stated in the compensation table are incurred during the period of insurance.

The maximum amount we will pay under this section is shown in the Policy Schedule.

#### What we will not pay

We will not pay for any claim under this section of the Policy if the claim arises directly or indirectly out of any of the following:

- the decision to change or alter travel plans for any reason other than the events listed in the compensation table; or
- travel plans made after a World Health Organisation warning is issued and/or reported in the mass media, which recommends against travelling to the intended destinations; or
- travel plans made after an Australian Government Travel Advisory is issued which recommends against travel to all or parts of the intended destination with a 'level 5 warning – do not travel' (reference: Department of Foreign Affairs and Trade – website: [www.smartraveller.gov.au](http://www.smartraveller.gov.au)); or
- death of a terminally ill person diagnosed prior to the journey, unless they die from any other reason; or
- when a journey is undertaken against medical advice.

The exclusions and general conditions set out in this Policy may also affect a claim.

### Loss of travel deposits - Conditions

In the event of 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, we will reimburse expenses incurred up to a maximum amount of \$25,000 during any one period of insurance. An excess of \$250 per person, will apply to each claim.

#### Compensation table –

##### Loss of deposits and cancellation/interruption expenses

Payable event	Compensation – What we will pay
Cancellation, delay, interruption or shortening of a journey resulting from: <ul style="list-style-type: none"> <li>• Unexpected death or injury/illness suffered by the insured person;</li> </ul> or <ul style="list-style-type: none"> <li>• Unexpected death or serious injury or serious illness of an insured person's spouse, dependant child, relative, business partner or co-director;</li> </ul> or <ul style="list-style-type: none"> <li>• Unforeseen circumstances outside of the insured person's control not otherwise excluded under the Policy.</li> </ul>	<ul style="list-style-type: none"> <li>• Cancellation fees, loss of deposits or unused portion of travel on prepaid tickets and bookings, that cannot be claimed from anyone else; or</li> <li>• Reimbursement of the equivalent cost for actual lost frequent flyer or similar customer loyalty points, provided:               <ul style="list-style-type: none"> <li>– the ticket was purchased with the use of loyalty points, and</li> <li>– points cannot be reimbursed or claimed by anyone else, and</li> <li>– the cost is not greater than the actual purchase price of the ticket, or</li> </ul> </li> <li>• The reasonable cost of rearranging the journey provided that the cost is not greater than the cancellation fees and lost deposits which would have been incurred if the trip had been cancelled.</li> </ul> <p>We may choose to reimburse the insured person or pay the provider direct up to the sum insured in the Policy Schedule.</p>



**Compensation table – Additional expenses**

Payable event	Compensation – What we will pay
Lost passport or travel documentation	Additional accommodation, meal and travelling expenses incurred up to an amount of \$400 per insured person per day.
Quarantine – unintentionally breaking government quarantine regulations	Additional accommodation, meal and travelling expenses incurred up to an amount of \$400 per insured person per day.
Substitute employee – due to an injury or illness exceeding 5 consecutive days or death	Additional accommodation, meal and travelling expenses incurred by a substitute employee for the purpose of completing the insured person's business objectives, up to an amount not exceeding \$20,000.
Hijacking - delay or interruption for a period in excess of 12 hours	Additional accommodation, meal and travelling expenses incurred up to an amount of \$400 per insured person per day, to a maximum of \$5,000.
Arrest or detention – the insured person's false arrest or wrongful detention overseas by any Government or foreign power	Legal costs incurred, up to an amount not exceeding \$50,000. Counselling costs incurred, up to an amount not exceeding \$5,000.
Disruption to public transport – due to a strike, riot or civil commotion, flood, adverse weather or natural disaster	Additional accommodation, meal and travelling expenses incurred up to an amount of \$400 per insured person per day.
Overbooked flight and no alternative transport available within eight (8) hours of the departure time.	Additional accommodation, meal and travelling expenses incurred up to an amount of \$400 per insured person per day, to a maximum of \$5,000.

**Section M – Refund of excess following collision damage or theft****What we will pay**

We will pay the amounts as set out in the compensation table in this section of the Policy if the insured person while on a journey hires a vehicle and as a result of the vehicle being damaged, stolen or involved in a collision, the insured person is responsible to refund the excess.

The maximum amount we will pay under this section is shown in the Policy Schedule.

**What we will not pay**

We will not pay for any claim under this section of the Policy if the claim arises directly or indirectly out of any of the following:

- if the insured person does not hold a valid driving licence in the country they are operating the vehicle,
- if the insured person uses the vehicle illegally,
- if the insured person causes loss or damage to the vehicle as a result of a breach of the provisions of the hiring agreement, or
- if the vehicle is not rented from a licensed rental agency.

The exclusions and general conditions set out in this Policy may also affect a claim

**Compensation table – Refund of excess following collision damage or theft**

Payable Event	Compensation – What we will pay
1. The insured person is involved in a collision while in control of a rented vehicle.	The amount of excess that the insured person has paid.
2. The insured person's rented vehicle is stolen or damaged.	The amount of excess that the insured person has paid.

## Additional covers

The following additional covers will automatically apply to your Policy, unless stated otherwise in your Policy Schedule.

If you suffer or incur the relevant loss, liability or damage defined within the cover, during the period of insurance, we will pay up to the limit stated in this part of the Policy, subject to the terms, conditions, exclusions and aggregate limit of liability of the Policy.

### 1. Extra territorial workers cover

#### This cover applies only if:

- the insured person is employed in a managerial clerical administrative or sales capacity;
- the substantial proportion of the insured person's work is performed in Australia;
- you maintain in force a Worker's Compensation Policy as required by the law in the State or Territory where the insured person is employed. This does not apply if you are a licensed self insurer;
- the insured person is engaged in temporary employment outside their home State for a maximum period of six (6) months, and
- the insured person is an Australian resident.

#### What we will pay

We will indemnify you for:

- Your liability to pay compensation benefits payable under any worker's compensation legislation which provides compensation to injured workers or their dependents for death, personal injury or occupational disease arising out of or in the course of employment during the period of insurance.
- Damages at common law (but not where entitlement arises solely under any statute) arising out of the death, personal injury or occupational disease suffered by the insured person as a result of an accident or occurrence happening during the period of insurance.

#### We will not pay for

We will not indemnify you for:

- exemplary, punitive, multiple or aggravated damages; or
- any claims for the cost of services for which a Medicare benefit is payable, or for any expenses which are considered to be 'Health Insurance business', as defined within the *Private Health Insurance Act 2007* (Cth).

The exclusions and general conditions set out in this Policy may also affect a claim.

#### Maximum limits

The maximum compensation we will pay is as follows, unless stated otherwise in the Policy Schedule:

- Weekly Benefit - is the difference between the weekly benefit limit and what the insured person can claim under your Worker's Compensation Policy. This cover

is subject to a weekly benefit limit of \$1,000 per week, up to a maximum limit of \$500,000 for any one claim.

- Damages at common law - is the difference between the damages and insured person's law costs payable and the amount of indemnity the insured person could claim under your Workers' Compensation Policy. This cover is subject to a maximum limit of \$500,000 any one claim.
- An aggregate limit of liability of \$1,000,000 applies to this cover unless otherwise stated in your Policy Schedule.

### 2. Environmental and natural disaster evacuation cover

This cover applies only if:

- the insured person is in a country outside of his or her country of residence,
- is in the aftermath of a natural disaster or environmental emergency situation, and

after we have consulted with you and any interested Government(s) and we agree that the insured person:

- (who is not in need of medical attention) is at high risk if exposure to adverse local conditions continues, or
- is unable to adequately continue to lead a healthy lifestyle.

#### We will pay

If we consider the situation will continue for less than thirty (30) days we will pay for arrangements necessary for the evacuation of the insured person to either:

- the nearest location outside the impacted area, or
- the nearest country which will accept the insured person, and
- at the conclusion of the situation, for the arrangements to return the insured person to their workplace via scheduled commercial airline or equivalent.

If we consider the situation will continue for more than thirty (30) days, we will pay for arrangements necessary for the evacuation of the insured person to their country of residence.

#### We will not pay

We will not pay any claim under this section of the Policy if the claim arises directly or indirectly out of any of the following:

- evacuation assistance or travel arrangements made without prior notification to QBE Assist,
- accommodation and living expenses of the insured person incurred following evacuation, or
- until reasonable local measures to protect the health and safety of the insured person have been exhausted.

The exclusions and general conditions set out in this Policy may also affect a claim.

### Maximum limit

The maximum limit we will pay under this cover is \$500,000 for any one event unless otherwise stated in the Policy Schedule.

### 3. Political evacuation cover

This cover applies only if while the insured person is on a journey in a country outside his or her country of residence and:

- officials in that country recommend that certain categories of persons which include the insured person should leave that country, or
- the insured person is expelled or declared persona non grata, or
- there is wholesale seizure, confiscation or expropriation of the insured person's property, plant or equipment.

#### We will pay:

- the cost of the insured person's return to their country of residence or the nearest place of safety up to the cost of an economy class airfare for the same journey; and
- the insured person's reasonable accommodation costs up to a maximum of \$500 per day for seven (7) days if the insured person is unable to return to his or her country or residence.

#### We will not pay

We will not pay any claim under this section of the Policy if the claim arises directly or indirectly out of any of the following:

- evacuation assistance or travel arrangements made without prior notification to QBE Assist, or
- you or the insured person violating the laws or regulations of the country the insured person is in, or
- the failure to produce or maintain immigration, work, residence or similar visas, permits or other documentation, or
- debt, insolvency, commercial failure, repossession of property by a titleholder or any other financial cause, or
- the failure to honour any contractual obligation or bond or to obey any conditions in a licence, or
- the insured person being a National of the country the insured person is in, or
- natural disasters, or
- nuclear fuel or waste.

The exclusions and general conditions set out in this Policy may also affect a claim.

### Maximum limits

The maximum limit we will pay under this cover is \$500,000 for any one event unless otherwise stated in the Policy Schedule.

### 4. Family assistance cover

#### What we will pay

We will pay the amounts set out below if while the insured person is on a journey outside of his or her country of residence, the insured person's spouse dies:

- during the period of insurance, and
- as a result of an injury.

#### What we will not pay

We will not pay any benefits under this cover if:

- the insured person's spouse is accompanying the insured person on a journey, or
- the insured person's journey is within his or her country of residence, or
- death is as a result of an illness, or
- death is as a result of suicide or attempted suicide.

The exclusions and general conditions set out in this Policy may also affect a claim.

### Maximum limits

The maximum amount we will pay is:

- \$30,000 as a result of the death of the insured person's spouse, and
- \$15,000 for each dependant child, up to a maximum of \$45,000 for all dependant children in any one (1) family.

### 5. Additional cover back home

If you or the insured person incur additional expenses as a result of an event specified below, we will reimburse these additional expenses incurred, up to the limits shown below:

- Damage to residence - in the event the insured person's residence sustains damage whilst the insured person is on a journey, which renders it unsafe to live in, we will reimburse additional accommodation, meal and travelling expenses incurred up to an amount of \$400 per day, to a maximum of \$5,000.
- Domestic pet care - in the event the insured person is delayed beyond their original return date due to an event covered by this Policy, we will reimburse additional costs incurred, up to \$50 per day and a maximum of \$500 for care of their pet(s) in a commercial kennel or cattery. The insured person must provide tax invoice(s) to substantiate their claim.
- Childcare/nanny benefit - in the event the insured person is delayed beyond their original return date due to an event covered by this Policy, we will reimburse up to \$200 per day for each 24 hour period up to a maximum of \$1,000 for the additional cost of registered childcare for your dependant children. You must provide tax invoice(s) to substantiate your claim.

## Exclusions – When you are not covered

### General exclusions applying to this Policy

This Policy excludes loss, damage, destruction, death, injury, illness, liability, cost or expense of any nature directly or indirectly caused by, contributed to by, resulting from, arising out of or in connection with any of the following, regardless of any other cause or event contributing concurrently or in any other sequence to the loss:

1. War, invasion, acts of foreign enemies, hostilities (whether declared or not), civil war rebellion, revolution, insurrection of military or usurped power while the original insured person is serving in any capacity whatsoever, whether in the armed forces, or while taking an active part in any occurrence as stated above,  
  
or
2. Radioactive contamination, whether arising directly or indirectly including the use, existence or escape of any nuclear fuel, nuclear material, or nuclear waste or action of nuclear fission or fusion.

This Policy also excludes any loss, destruction, damage, death, injury, illness, liability, cost or expense of any nature directly or indirectly caused by, contributed to by, resulting from or arising out of or in connection with any action taken in controlling, preventing, suppressing, retaliating against, or responding to or in any way relating to 1 or 2 above.

### Additional exclusions applying to this Policy

#### Things that are not covered by any part of the Policy

We will not pay for any claim under any section of the Policy if the claim arises directly or indirectly out of any of the following:

1. intentional self injury or suicide or any attempt at suicide;
2. flying or other aerial activity unless as a passenger in a properly licensed aircraft;
3. an insured person's criminal or illegal act;
4. alcoholism or drug addiction;
5. participating in or training for any professional sport;
6. expenses recoverable by you or the insured person from any other source such as workers compensation or any other statutory scheme or Medicare or Private Health Insurance;
7. expenses or costs which are considered to be 'Health Insurance business', as defined within the *Private Health Insurance Act 2007* (Cth); or
8. any expenses or costs which are prohibited by law from paying within Australia or the country in which a claim occurs.

## General conditions

### Aggregate limits of liability

The aggregate limit of liability is the maximum amount we will pay for any one event involving more than one insured person. If this amount is not enough to pay all claims in full, then we will reduce each insured person's benefit proportionately.

This limit applies to Sections A,B,C,H,I,M and 'Additional covers' of the Policy except as stated below:

1. Non-scheduled flights (including helicopter and light aircraft) – the aggregate limit of liability applicable to an event involving travel in a non-scheduled flight is shown in the Policy Schedule.
2. Section F (Overseas medical and additional expenses): the aggregate limit of liability does not apply to this section of the Policy.
3. Section J (Personal liability): the aggregate limit of liability does not apply to this section of the Policy. Our limit of liability under this section of the Policy for any one occurrence will be limited to the amount shown in your Policy Schedule.
4. Section K (Kidnap and ransom and personal extortion): the aggregate limit of liability applicable to this section of the Policy for an event will be \$500,000 unless otherwise stated in the Policy Schedule.
5. Section L (Loss of deposits and additional expenses): the aggregate limit of liability does not apply to this section of the Policy. Our limit of liability under this section of the Policy will be limited to the amount shown in your Policy Schedule.
6. Additional Covers – 1. Extra territorial workers: the aggregate limit of liability applicable to this cover for any one (1) claim or series of claims will be \$1,000,000 unless otherwise stated in the Policy Schedule.
7. Additional Covers – 2. Environmental and natural disaster evacuation cover: your aggregate limit of liability applicable to this cover for any one (1) claim or series of claims will be \$500,000 unless otherwise stated in the Policy Schedule.
8. Additional Covers – 3. Political evacuation cover: your aggregate limit of liability applicable to this cover for any one claim or series of claims will be \$500,000 unless otherwise stated in the Policy Schedule.

In all other cases your limits stated in this PDS and/or your Policy Schedule will apply.

### Changing your Policy

If you want to make a change to this Policy, the change becomes effective when:

- we agree to it, and
- we give you a new Policy Schedule detailing the change.

### Other interests

Any person whose interests you have told us about and we have noted on your Policy Schedule is bound by the terms of this Policy.

## Cancelling your Policy

### How you may cancel this Policy

- You may cancel this Policy at any time by telling us in writing that you want to cancel it.
- Where 'you' involves more than one (1) person, we will only cancel the Policy when a written agreement to cancel the Policy is received from all persons named as the insured.

### How we may cancel this Policy

- We may cancel this Policy in any of the circumstances permitted by law by informing you in writing.
- We will give you this notice in person or send it to your address last known to us.

### The premium

We will refund to you the proportion of the premium for the remaining period of insurance.

## Notices

Any notice we give you will be in writing, and it will be effective:

- if it is delivered to you personally, or
- if it is delivered or posted to your address last known to us.

It is important for you to tell us of any change of address as soon as possible.

## Jurisdiction

This Policy is governed and construed with the laws of the Australian State or Territory it was issued in. Any dispute that arises out of or in connection with this Policy will be subject to determination by any Court or competent jurisdiction within Australia.

## Subrogation

We are only required to make any payment under this Policy if:

- we can exercise any rights of recovery held by you or the insured person to the extent of that payment, and
- you and any insured person must not do anything that reduces any such rights, and
- you and any insured person must provide reasonable assistance to us in pursuing any such rights.

## Currency

The values and limits shown in this PDS are in Australian dollars (AUD). If expenses are incurred in another currency, then the rate of currency exchange used to calculate the amount of compensation to Australian dollars will be the rate at the date the payable condition occurred.

## Claims

### What you must do

1. If anything happens that is likely to lead to a claim you or the insured person must:
  - follow medical advice from a qualified medical practitioner as soon as possible after sustaining injury or illness,
  - tell your financial services Provider as soon as possible. You will be provided with a claim form and advice on the procedure to follow,
  - fully complete our claim form and return it to us within thirty (30) days,
  - undergo any medical examination by a doctor appointed by us if we require it, and
  - at your expense provide us with any information about the claim we ask for including:
    - reports from Police, transport provider hotel or other authority,
    - doctor's reports,
    - accounts and receipts,
    - valuations and proof of ownership,
    - letters and notices you receive from anyone else about your claim.
  - if in doubt at any time, ring your financial services provider for advice.
2. If you or the insured person act fraudulently we can reject the claim altogether and avoid this Policy – it would be as though the Policy never existed.
3. You and the insured person must give us written notice as soon as possible of every claim, writ, summons or proceedings, including any prosecution or inquest, and all information in regard to matters which may lead to liability under this Policy.
4. As soon as an event that can justify a claim occurs, you or the insured person must make every endeavour to minimise the loss, damage or liability.
5. In the event of a claim you must advise us of any other insurance you and/or the insured person have covering the same risk. If you or the insured person can claim from anyone else and we have already paid for the claim, you must render all reasonable assistance to us including but not limited to the proper lodgement of a claim in order that we may obtain a rateable recovery from any other insurer.
6. We have the sole right to make admissions. We may refuse to protect the insured person if you or the insured person admits fault, makes any offer of payment or defends a claim in court without our consent.
7. We will be entitled to conduct in your name or the insured person's name the defence or settlement of any claim or to prosecute in your or the insured person's name.
8. We will pay benefits to you or to the insured person unless you instruct us to do otherwise.



**What we do**

We may take over and conduct the defence or settlement of any claim or issue legal proceedings for damages. If we do this we will do it in your name. We have full discretion in the conduct of any legal proceedings and in the settlement of any claim. You must cooperate by giving us any statements, documents or assistance we require. This may include giving evidence in any legal proceedings.

**What can affect a claim**

We will reduce the amount of a claim by the excess shown in the Policy Terms and Conditions or on the Policy Schedule.

We may refuse to pay a claim if you are in breach of your Duty of disclosure or any of the conditions of this Policy, including any endorsements noted on or attached to the Policy Schedule.

We pay only once for loss or damage from the same event covered by this Policy even if it is covered under more than one (1) section of the Policy.

We may be entitled to refuse to pay or to reduce the amount of a claim if:

- it is in any way fraudulent, or
- any fraudulent means or devices are used by you or anyone acting on your behalf to obtain any benefits under this Policy.

