

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



About this booklet

This booklet contains 2 separate sections: Part A and Part B.

Part A – Product Disclosure Statement (PDS)

Part A of this booklet contains a Product Disclosure Statement (PDS). The PDS 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 Part B – Terms and Conditions for full details).

The PDS 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. Please read Parts A and B of this booklet carefully.

Part B – Policy Terms and Conditions

Part B of this booklet contains the Policy Terms and Conditions, which detail all the terms, conditions and exclusions relating to the Policy. It is Part B which forms part of your legal contract with us.

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.

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

About QBE Australia

QBE Insurance (Australia) Limited is a member of the QBE Insurance Group (ASX: QBE). QBE Insurance Group is Australia's largest international general insurance and reinsurance group, and 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.

Date of preparation: 5 October 2005

Date effective: 17 March 2006

QM184-0306

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PART A – PRODUCT DISCLOSURE STATEMENT (PDS) FOR CORPORATE TRAVEL POLICY

Insurer

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

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

Significant benefits and features

We believe the most significant benefits of this insurance Policy are that it offers the following benefits while you are the insured person on a journey:

- (a) lump sum payments (capital benefits) for accidental death and other listed conditions, and
- (b) periodic payments (weekly benefits) to replace income that is lost following an accident or an illness
- (c) specified amounts for overseas medical and additional expenses incurred while on a journey outside Australia
- (d) specified amounts for emergency travel assistance where an injury or illness occurs outside Australia
- (e) specified amounts where the insured person's luggage is damaged, lost or stolen
- (f) specified amounts where the insured person's cash, travellers cheques and credit cards are damaged, lost or stolen
- (g) cover for legal liability for damages as a result of an occurrence while on a journey
- (h) specified amounts if the insured person is kidnapped while on a journey
- (i) specified amounts for loss of travel deposits and additional expenses
- (j) specified amounts for refund of excess following collision damage or theft where the insured person hires a motor vehicle while on a journey.

The Policy does not cover certain things

Claims may be refused in certain circumstances. Please refer to the Corporate Travel Policy Terms and Conditions which follow this PDS for full details of the terms and conditions of cover and exclusions.

The Policy will not cover you or the insured person if a claim arises directly or indirectly out of any of the following:

Section A – Capital Benefits

- illness
- suicide or attempted suicide.

Section B – Weekly Benefits – Injury

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

Section C – Weekly Benefits – Illness

- when a journey is undertaken against medical advice, or
- injury
- childbirth or pregnancy.

Section F – Overseas Medical and Additional Expenses

- 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.

Section G – Emergency Travel Assistance

- when a journey is undertaken against medical advice, or
- when a journey is undertaken for the purpose of obtaining medical treatment.

Section H – Baggage and Personal Effects

- luggage that is left on its own somewhere with no one looking after it unless it is stored inside a securely locked building or stored out of sight inside a securely locked motor vehicle
- luggage that is sent somewhere and won't be travelling with the insured person on the journey
- sporting equipment while it is being used
- furniture
- brittle or fragile items
- money
- precious unset or uncut gemstones
- normal wear and tear
- items intended to be sold or dealt with for trade
- items stolen unless the theft is reported to Police or other authority and a written statement obtained.

Section I – Personal Money, Travellers Cheques and Credit Cards

- cash unless carried by the insured person
- loss of property 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 the theft is reported to Police or other authority and a written statement obtained
- confiscation by customs or other officials
- losses due to devaluation in currency.

Section J – Personal Liability

- 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
- aggravated, exemplary or punitive damages or any fine or penalty.

Section K – Kidnap and Ransom and Personal Extortion

- any kidnapping or personal extortion occurring in any country located in Central or South America
- 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 been kidnapped or had an attempted kidnapping in the past
- if you or the insured person has had an extortion demand made against them in the past.

Section L – Loss of Travel Deposits and Additional Expenses

- disinclination to travel
- travel plans made after a warning in the mass media of strike, riot or bad weather
- travel plans made after an Australian Government travel advice or warning is reported in the mass media in relation to any of your intended destinations
- when a journey is undertaken against medical advice.

Section M – Refund of Excess following Collision Damage or Theft

- if the insured person does not hold a valid driving licence
- if the insured person uses the vehicle illegally
- if the insured person is under the influence of intoxicating liquor or drugs unless they have been prescribed by a registered medical practitioner. We will regard a blood alcohol reading in excess of the area's legal limit as being under the influence of intoxicating liquor
- if the vehicle is not rented from a licensed rental agency.

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:

- war whether declared or not, invasion or civil war, rebellion or insurrection
- the use, existence or escape of nuclear weapons material or ionising radiation from or contamination by radioactivity from any nuclear fuel or nuclear waste from the combustion of nuclear fuel
- intentional self injury or suicide or any attempt at suicide
- flying or other aerial activity unless as a fare paying passenger on an airline with scheduled flights
- driving or riding in any kind of race
- motor cycling except for agricultural or pastoral purposes on a motor cycle with an engine capacity of less than 250cc
- your or the insured person's criminal or illegal act
- alcoholism or drug addiction
- participating in or training for any professional sport
- practice for or playing organised football of any kind
- driving a motor vehicle whilst having a percentage of alcohol in your breath or blood in excess of that permitted by law.

These are only some of the events that are not covered by this insurance. Please read the Corporate Travel Policy Terms and Conditions which follows this PDS for full details of all relevant Policy exclusions.

The amount of any claim may be reduced

The amount of any claim made against the 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 do not comply with any Policy condition.

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 (Part A of this booklet) and the Policy Terms and Conditions (Part B of this booklet) 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 chronic or that we think are likely to recur.

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.

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).

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 you make a fraudulent claim.

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.

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 worked.

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. 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 and investigators), for the purposes of assisting us and them in providing relevant services and products, or for the purposes of litigation. We may disclose personal information to people listed as co-insured on your policy and to family members or agents authorised by you. 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. Telephone: (02) 9375-4656, Fax: (02) 8275-9022 or Email: 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; and
- 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 Insurance Ombudsman Service (IOS), an ASIC approved external dispute resolution body.

The Insurance Ombudsman Service (the Service) 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 the Service but the determination is not binding on you.

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

Taxation implications

Goods and Services Tax

The Policy has provisions relating to GST. In summary, they are as follows but please read the provisions in full. They can be found in Part B Terms and Conditions, under the heading '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.

Other taxation implications

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

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 insurance 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.

PART B – POLICY TERMS AND CONDITIONS FOR CORPORATE TRAVEL POLICY

(This Part does not form part of the Product Disclosure Statement)

Insurer

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

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 on your Policy Schedule.

The exclusions in the section(s) headed 'When you are not covered' and conditions in the section headed 'General Conditions' apply to all types of cover.

Your Policy

Your Corporate Travel Policy consists of Part B (Terms and Conditions) of this booklet and the Policy Schedule we give you.

Please read your Policy 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 your Policy Booklet and Policy Schedule together in a safe and convenient place for future reference.

Jurisdiction

This Policy will be governed and construed in accordance with the laws of Australia. Any dispute under this Policy will be resolved in accordance with the laws of 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.

Providing proof

So that your claim can be assessed quickly you should keep the following:

- any medical certificates that relate to your claim
- receipts and other confirmation of purchase
- valuations.

We may ask you for these if you make a claim.

How you can pay your premium

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

Paying your premium

You must pay your premium by the due date. If we do not receive your premium by this date or your payment is dishonoured this Policy will not operate and there will be no cover.

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.

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
Act of Terrorism	includes any act, or preparation in respect of action, or threat of action designed to influence the government de jure or de facto of any Nation or any political division thereof, or in pursuit of political, religious, ideological or similar purposes to intimidate the public or group(s) of persons whether acting alone or on behalf of or in connection with any organisation(s) or government(s) de jure or de facto, and which: <ul style="list-style-type: none"> • involves violence against one or more persons, or • involves damage to property, or • endangers life other than that of the person committing the action, or • creates a risk to health or safety of the public or a section of the public, or • is designed to interfere with or to disrupt an electronic system.
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.
Aggregate limit of liability	the maximum amount we will pay for any one event involving more than one insured person. The aggregate limit of liability is 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 limitation imposed by the aggregate limit of liability does not apply to Section F Overseas Medical and Additional Expenses and Section J Personal Liability.
Compensation	the amount of benefit shown in the Compensation Tables of this Policy.

Word or Term	Meaning
Emergency dental	<ul style="list-style-type: none"> • 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 their normal country of domicile.
Emergency optical	<ul style="list-style-type: none"> • 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 their normal country of domicile.
Excess	a sum of money that you or the insured person might be required to contribute to the amount of any claim. Any amount payable 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 first occurs during the period of insurance.
Injury	bodily injury resulting from accident and which is not an illness and which <ul style="list-style-type: none"> • occurs during the period of insurance, and • within 12 months of the injury, results solely and independently of any other cause in the events covered under this Policy and • includes any condition resulting from exposure to the elements as a result of injury.
Insured person	any person described in the Policy Schedule as an Insured person.
Journey	authorised business travel <ul style="list-style-type: none"> • commencing during the period of insurance • as shown in the Policy Schedule under time of operation of cover.
Loss	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.

Words with special meanings/What you are covered

Word or Term	Meaning
Partial disablement	disablement as a result of injury or illness if selected that prevents an insured person from: <ul style="list-style-type: none"> carrying out a substantial part of all the normal duties of their usual occupation, business or profession.
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.
Permanent	continuing for at least twelve months and which thereafter will, in all probability, continue for life.
Personal extortion	to intimidate by a threat or series of threats to kidnap, or cause bodily injury.
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"> if an insured person is self employed: <ul style="list-style-type: none"> gross weekly income from personal exertion after allowing for costs and expenses incurred in deriving that income averaged over the 12 months prior to injury or illness or any shorter period that they have been engaged in their occupation. if an insured person is an employee: <ul style="list-style-type: none"> basic weekly base rate of pay exclusive of overtime payments, bonuses, commission or allowances at the time of injury or illness where an insured person has elected to salary sacrifice income, basic weekly base rate of pay will be deemed to mean the total cost of employment inclusive of such income salary sacrificed.
Quadriplegia	total paralysis of both legs and both arms.
Temporary employment	employment during a journey which does not exceed 90 days.

Word or Term	Meaning
Total disablement	total disablement as a result of injury that entirely prevents an Insured person from: <ul style="list-style-type: none"> carrying out all the normal duties of their usual occupation, business or profession, or carrying out all the normal duties of all their occupations where they are engaged in more than one occupation. <p>If illness cover has been selected, total disablement will also mean such inability occurring in the same circumstances resulting from illness.</p>
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 Section A to M, and in the additional covers.

Please note that general exclusions and conditions apply to all of this Policy.

Section A – Capital Benefits

What we will pay

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

- occur during the period of insurance
- 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
- suicide or attempted suicide.

The General and Additional Exclusions set out under 'When you are not covered' in this Policy may also affect your claim.

Capital Benefits

- Any payable condition claimed under Capital Benefits must occur within 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.

Compensation Table – Capital Benefits

Injury resulting in:	Payable Condition
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%

Injury resulting in:	Payable Condition
7 Permanent and incurable paralysis of all limbs	100%
8 Permanent total loss of the entire sight of one 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 hand and one foot	100%
15 Permanent total loss of the use of one hand and one arm	100%
16 Permanent total loss of the lens of one eye	50%
17 Permanent total loss of the hearing in one ear	50%
18 Permanent total loss of the use of one foot or one leg	50%
19 Permanent total loss of the use of four fingers and thumb of either hand	75%
20 Permanent total loss of the use of four fingers of either hand	40%
21 Permanent total loss of the use of one thumb, both joints	30%
22 Permanent total loss of the use of one thumb, one joint	15%
23 Permanent total loss of the use of a finger, three joints	10%
24 Permanent total loss of the use of a finger, two joints	8%
25 Permanent total loss of the use of a finger, one joint	5%
26 Permanent total loss of the use of all the toes of one 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 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 Capital Benefits

- Any payable condition claimed under Additional Capital Benefits must occur within 12 months of the date of injury.
- 'Break' means a complete break of a bone and does not include a fracture not extending through the full thickness of the bone.

Compensation Table - Additional Capital Benefits

Broken Bones Additional Capital Benefit is \$10,000

Injury resulting in the following broken bones: Payable Condition	Compensation as a percentage of the Broken Bones Additional Capital Benefit
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 Additional Capital 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 year

we will presume that they have died as a result of injury and will pay the death benefit accordingly, unless we suspect that the insured person may not have perished.

If we have paid a disappearance capital benefit we will not pay for any other capital benefits as well.

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

Lifestyle Modification Additional Capital Benefit

In an insured person is paid a capital benefit under any of payable conditions 2, 4, 5 or 7 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 in respect of an insured person if the payable conditions shown

- occur during the period of insurance
- 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.

Weekly Benefit – Injury

- Any payable condition claimed must occur within 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 months or more
 will be considered as one 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

Injury resulting in: Payable Condition	Compensation
1 Total disablement (weekly benefit)	As per Policy Schedule
2 Partial disablement (weekly benefit)	30% of total disablement

Additional benefits applicable to Section B – Weekly Benefits – Injury

Surgical Procedures Additional Benefit – resulting from an injury

Injury resulting in the following Surgical Procedures: Payable Condition	Compensation as a percentage of the Surgical Procedures Additional Benefit
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%

This additional benefit will only apply if;

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

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

Rehabilitation Additional Benefits

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 \$7,500 for costs incurred as a result of an injury.

Claim Escalation Additional 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.

The General and Additional Exclusions set out under 'When you are not covered' in this Policy may also affect your claim.

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 in respect of an insured person if the payable conditions shown

- occur during the period of insurance
- 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, or
- injury, or
- childbirth or pregnancy.

Weekly Benefits – Illness

- Any payable condition claimed must occur within 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 months or more will be considered as one period of total 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 total 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

Illness resulting in: Payable Condition	Compensation
1 Total disablement (weekly benefit)	As per Policy Schedule
2 Partial disablement (weekly benefit)	30% of total disablement

Additional benefits applicable to Section C – Weekly Benefits – Illness

Surgical Procedures Additional Benefit – resulting from an illness

Illness resulting in Surgical Procedures: Payable Condition	Compensation as a percentage of the Surgical Procedures Additional 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%

This additional benefit will only apply if;

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

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

Rehabilitation Additional 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 \$7,500 for costs incurred as a result of an illness.

Claim Escalation Additional 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.

The General and Additional Exclusions set out under 'When you are not covered' in this Policy may also affect your claim.

Section F – Overseas Medical and Additional Expenses

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'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 Australia.

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.

The General and Additional Exclusions set out under 'When you are not covered' in this Policy may also affect your claim.

Overseas Medical and Additional Expenses

- 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.
- We will pay only expenses
 - incurred outside Australia and
 - within Australia, if the insured person was first treated outside Australia

but we will not pay expenses incurred in respect of the rendering in Australia of a professional service which are considered to be 'Health Insurance Business' as defined within the National Health Act and its Regulations.

- The maximum amount we will pay for any one event involving more than one person arising out of any act of terrorism that is directly or indirectly caused by, contributed to by, or in any way involves or is connected with biological, chemical, radioactive, or nuclear pollution or contamination or explosion, will also be limited to the amounts as set out in the Compensation table in this section of the policy. If this amount is not enough to pay all claims in full, then we will reduce each insured person's benefit proportionately.

Compensation Table – Overseas Medical and Additional Expenses

Injury or Illness resulting in: Payable Expense	Compensation
1 Medical Expenses	As per Policy Schedule
2 Hospital Expenses	As per Policy Schedule
3 Emergency Dental Expenses - injury only	\$5,000
4 Emergency Optical Expenses -injury only	\$5,000
5 Additional accommodation, meal and travelling expense	\$20,000
6 Burial expenses	\$20,000
7 Expenses of having one person travel to, remain with or escort the insured person if <ul style="list-style-type: none"> our prior agreement has been obtained medical advice states it is necessary. 	\$20,000
8 In the event an insured person is hospitalised outside of Australia, as a result of an injury or illness, we will pay the insured person an amount of \$300 for each day hospitalised, to cover out-of-pocket expenses	\$300 per day, up to a maximum \$5,000
9 Reasonable and necessary additional accommodation, meal and travelling expenses for the insured person or for a substitute employee to complete the insured person's objective in the event of the insured person's death, or injury or illness providing it exceeds 5 consecutive days	\$20,000

Section G – Emergency Travel Assistance

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's expenses

- are incurred during the period of insurance
- are as a result of injury or illness which occurs while on a journey outside Australia.

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.

The General and Additional Exclusions set out under 'When you are not covered' in this Policy may also affect your claim.

Our Emergency Travel Assistance Provider will advance any amounts necessary to settle medical bills which are covered under any section of this Policy.

Compensation Table - Emergency Travel Assistance

What needs to happen Injury or Illness to an insured person resulting in: Payable Expense	What we will pay Compensation
Our Emergency Travel Assistance Provider's medical team in conjunction with the local medical practitioner attending to the insured person consider that the insured person's condition is of such seriousness that hospitalisation has become necessary.	The full cost for our Emergency Travel Assistance Provider to organise and arrange payment for <ul style="list-style-type: none"> the transfer under necessary medical supervision of the insured person by any means (air ambulance, scheduled flight road ambulance) to an appropriate hospital.
Our Emergency Travel Assistance Provider's medical team in conjunction with the local medical practitioner attending to the insured person consider <ul style="list-style-type: none"> that the insured person's condition following hospitalisation has improved sufficiently and does not prevent the insured person's repatriation home to Australia and that it is necessary for repatriation to take place. 	The full cost for our Emergency Travel Assistance Provider to organise and arrange payment for <ul style="list-style-type: none"> the direct repatriation under necessary medical supervision of the insured person by scheduled flight to an appropriate hospital or nursing home near their home in Australia the costs of necessary road ambulance transfers to and from hospital to airport.

Section G

What needs to happen Injury or Illness to an insured person resulting in: Payable Expense	What we will pay Compensation
The insured person's death.	The full cost for our Emergency Travel Assistance Provider to organise and arrange payment for <ul style="list-style-type: none"> the necessary arrangements to meet the required formalities for the return of the body or ashes to the international airport nearest to the place of burial in Australia.
The cost of moving the insured person to another country or bringing the insured person back to Australia if: <ul style="list-style-type: none"> you contact us first and get our agreement medical advice states that it is necessary. If we bring the insured person home to Australia we will use the insured person's return ticket towards our costs.	Unlimited

General Terms and Conditions applying to Section G

- In case of an emergency while overseas, the insured person must call (reverse charge) to the nearest of our Emergency Travel Assistance Provider's 24 hours a day alarm centres before undertaking any personal action and:
 - state his/her name and the number and validity date of this Policy
 - state the place and telephone number where he/she can be reached
 - give a brief description of the problem encountered and nature of help required.
- Our Emergency Travel Assistance Provider'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.
- 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 our Emergency Travel Assistance Provider's medical team.
- Should our Emergency Travel Assistance Provider pay for the transportation of the insured person the latter will be asked to hand over to our Emergency Travel Assistance Provider the unused portion of his/her original ticket or the counter value of the said portion.
- 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 our Emergency Travel Assistance Provider within three days of the date of occurrence. Failure to do so may entitle our Emergency Travel Assistance Provider to invoice you the supplementary cost to be borne by our Emergency Travel Assistance Provider which would not have been incurred had this three day delay been respected by the insured person or any person acting on his/her behalf.
- In a life threatening situation, the insured person should try to arrange for immediate emergency help first through local sources and then by calling our Emergency Travel Assistance Provider.
- The insured person will provide our Emergency Travel Assistance Provider with all documents and carry out all necessary formalities to enable our Emergency Travel Assistance Provider to recover payments from relevant sources, if applicable.
- Should our Emergency Travel Assistance Provider 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 National Health Act 1953, or any registered Health Fund and pay all amounts received from these sources to QBE Insurance (Australia) Limited as soon as possible after his/her return to Australia.
- Our Emergency Travel Assistance Provider 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

What we will pay

If during the period of insurance the insured person's luggage 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.

Luggage under this section is:

- personal effects accompanying the insured person
- business papers, plans, specifications and manuscripts
- laptop computers
- mobile telephones
- electronic business equipment.

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:

- luggage that is left on its own somewhere with no one looking after it unless stored inside a securely locked building or stored out of sight inside a securely locked motor vehicle
- luggage that is sent somewhere and won't be travelling with the insured person on the journey
- sporting equipment while it is being used
- furniture
- brittle or fragile items
- money
- precious unset or uncut gemstones
- normal wear and tear
- items intended to be sold or dealt with for trade
- items stolen unless reported to police or other authority and a written statement obtained.

The General and Additional Exclusions set out under 'When you are not covered' in this Policy may also affect your claim.

Baggage and Personal effects

The most we will pay for each item is:

• camera, video camera	\$3,000
• laptop computer	\$6,000
• electronic business equipment	\$2,000
• mobile telephone	\$1,500
• each other item	Up to 30% of the limit shown in the Policy Schedule.

Compensation Table – Baggage and Personal effects

What needs to happen Payable Event	What we will pay Compensation
The insured person's luggage is delayed, misdirected or misplaced by any carrier for more than 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 luggage is accidentally damaged, lost or stolen.	<p>For all items except laptop computers and mobile telephones</p> <ul style="list-style-type: none"> • at our option replace repair or pay for the cost of replacement or repair to a condition equal to but not better than their condition when new. <p>For laptop computers and mobile telephones</p> <ul style="list-style-type: none"> • at our option replace repair or pay for the cost of replacement or repair to a condition equal to but not better than their condition when damaged or lost. <p>In either case, up to the maximum specified above.</p>

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.

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 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
- confiscation by customs or other officials
- losses due to devaluation in currency.

The General and Additional Exclusions set out under ‘When you are not covered’ in this Policy may also affect your claim.

Compensation Table – Personal Money, Travellers Cheques and Credit Cards

What needs to happen Payable Event	What we will pay Compensation
The insured person’s money is lost or stolen.	As per 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

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
- aggravated, exemplary or punitive damages or any fine or penalty.

The General and Additional Exclusions set out under ‘When you are not covered’ in this Policy may also affect your claim.

Compensation Table – Personal Liability

What needs to happen Payable Event	What we will pay Compensation
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

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
- 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

- if you or the insured person has had an extortion demand made against them in the past.

The General and Additional Exclusions set out under 'When you are not covered' in this Policy may also affect your 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 moneys paid by us for that loss
- do all things necessary to prosecute the insured person.

You will 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

What needs to happen Payable Event	What we will pay Compensation
1 The insured person is kidnapped.	Ransom money paid by you less any amounts recovered. Expenses we consider reasonable that are incurred following receipt of a ransom demand.

Section L – Loss of Travel Deposits and Additional Expenses

What we will pay

We will pay the amounts as set out in the compensation table 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:

- disinclination to travel

- travel plans made after a warning in the mass media of strike, riot or bad weather
- travel plans made after an Australian Government travel advice or warning is reported in the mass media in relation to any of your intended destinations
- when a journey is undertaken against medical advice.

The General and Additional Exclusions set out under 'When you are not covered' in this Policy may also affect your claim.

Compensation Table – Loss of Travel Deposits and Additional Expenses

What needs to happen Payable Event	What we will pay Compensation
1 Delay or interruption to the journey in excess of 12 hours resulting in the insured person being prevented from reaching the scheduled destination as a result of hijacking.	\$300 per day and \$4,000 in total.
2 The unexpected death, serious injury or sickness of insured person's spouse, parent, parent-in-law, child, brother, sister, business partner or co-director, happening after the commencement of the Period of Insurance and after the start of the journey.	The insured person's reasonable additional travel and accommodation expenses to return to the journey's point of origin.
3 Cancellation or curtailment of scheduled public transport services caused by strike, riot or civil commotion, flood or natural disaster.	Additional accommodation, meal and travelling expenses up to \$300 per day.
4 Insured person is delayed as a result of something outside their control and the journey is shortened or cancelled.	<ul style="list-style-type: none"> • Cancellation fees and lost deposits on prepaid tickets and bookings that cannot be claimed from anyone else or • Reimbursement of the equivalent cost for actual lost frequent flyer or similar customer loyalty points, provided <ul style="list-style-type: none"> – the ticket was purchased with the use of loyalty points, and – points cannot be reimbursed or claimed by anyone else, and

What needs to happen Payable Event	What we will pay Compensation
4 Insured person is delayed as a result of something outside their control and the journey is shortened or cancelled. (continued)	<ul style="list-style-type: none"> – the cost is not greater than the actual purchase price of the ticket, or • 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.
5 Insured person's false arrest or wrongful detention during the period of insurance by any Government or foreign power.	Reimbursement of legal costs incurred up to \$30,000.
6 Insured person is delayed as a result of something outside their control and will be late arriving for a pre-planned business meeting, conference or event which cannot be delayed.	Cost of using alternative public transport to arrive at the destination on time.
7 Passport or travel documents are lost and the journey is delayed.	Additional accommodation, meal and travelling expenses up to \$300 per day.
8 Quarantine regulations are innocently broken and the journey is delayed.	Additional accommodation, meal and travelling expenses up to \$300 per day.
9 The insured person's injury or illness providing it exceeds 14 days or death and a substitute employee completes the insured person's objective within Australia.	Reasonable additional accommodation, meal and travelling expenses.
10 The insured person's death within Australia.	Burial expenses or the cost of returning the insured person's body or ashes to their home address up to a maximum of \$5,000.
11 Medical advice states it is necessary for a friend to travel to, remain with or escort the insured person within Australia.	Reasonable additional accommodation, meal and travelling expenses.
12 The insured person's home in Australia is seriously damaged.	Additional accommodation, meal and travelling expenses up to \$300 per day and \$5,000 in total.

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
- if the insured person uses the vehicle illegally
- if the insured person is under the influence of intoxicating liquor or drugs unless they have been prescribed by a registered medical practitioner. We will regard a blood alcohol reading in excess of the area's legal limit as being under the influence of intoxicating liquor
- if the vehicle is not rented from a licensed rental agency.

The General and Additional Exclusions set out under 'When you are not covered' in this Policy may also affect your claim.

Compensation Table – Refund of Excess following Collision Damage or Theft

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

Additional covers

We will provide the following Additional Covers to you, if shown in the Policy Schedule and up to the limits stated in the Policy Schedule, if you suffer or incur the relevant loss, liability or damage during the period of insurance.

The Additional Covers available are:

- Extra Territorial Cover
- Environmental and Natural Disaster Evacuation and Political Evacuation
- Family Assistance Cover.

Extra Territorial Cover

This part of the policy operates if it is noted in the Policy Schedule.

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 months.

What we will pay

We will indemnify you for:

1. 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.
2. 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
- any claims for the cost of services for which a Medicare benefit is payable, or for any expenses to which Section 67 of the National Health Act 1953 (as amended) and any of its regulations apply.

Maximum limits

The maximum we will pay is:

For compensation benefits

- the difference between the amount payable and what the insured person can claim under your worker's compensation policy
- up to the maximum amount shown in the Policy Schedule.

For damages at common law

- the difference between the damages and insured person's law costs payable and the amount of indemnity the insured person could claim under your worker's compensation policy
- up to the maximum amount shown in the Policy Schedule.

Environmental and Natural Disaster Evacuation and Political Evacuation

This part of the Policy operates if it is noted in the Policy Schedule.

Environmental and Natural Disaster Evacuation

This cover applies only if:

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

after we have consulted with you and interested governments 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 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 30 days, we will pay for arrangements necessary for the evacuation of the insured person to their home country.

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 independently by the insured person
- 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.

Political Evacuation

This cover applies only if while the insured person is on a journey in a country outside Australia 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

We will pay:

- the cost of the insured person's return to their home country or the nearest place of safety up to the cost of an economy class airfare for the same trip
- the insured person's reasonable accommodation costs up to a maximum of \$500 per day for 7 days if the insured person is unable to return to their home country.

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:

- you or the insured person violating the laws or regulations of the country the insured person is in
- the failure to produce or maintain immigration, work, residence or similar visas, permits or other documentation
- debt, insolvency, commercial failure, repossession of property by a titleholder or any other financial cause
- the failure to honour any contractual obligation or bond or to obey any conditions in a licence
- the insured person being a national of the country the insured person is in
- natural disasters
- nuclear fuel or waste.

Maximum Limits

The maximum we will pay under this part of the Policy is \$500,000.

Family Assistance Cover

This part of the Policy operates if it is noted in the Policy Schedule.

What we will pay

If while the insured person is on a journey outside of Australia, the insured person's spouse dies as a result of an injury, we will pay to the insured person the following amounts:

- \$25,000, and
- \$5,000 for each dependant child, up to a maximum of \$10,000 for all dependant children in any one family.

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 Australia, or
- death is as a result of an illness, or
- death is as a result of suicide or attempted suicide.

The General and Additional Exclusions set out under 'When you are not covered' in this Policy may also effect your claim.

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 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, or
2. Radioactivity or 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. the insured person's criminal or illegal act
4. alcoholism, drug addiction
5. if the insured person is under the influence of intoxicating liquor or drugs unless they have been prescribed by a registered medical practitioner
6. childbirth or pregnancy where the term of the pregnancy exceeds 26 weeks
7. participating in or training for any professional sport

8. 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
9. 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 not pay any benefits under any section of this Policy which are considered to be 'Health Insurance business', as defined within the National Health Act and its Regulations.

General conditions

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 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.

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
 - give us notice in writing, by telephone or in person describing the occurrence
 - tell us promptly
 - fully complete our claim form and return it to us within 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.
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 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 co-operate 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 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.

