

**Expatriate Medical Expenses,  
Evacuation, Personal Safety  
and Personal Accident**

Master Insurance Policy Number  
EXP2014v1

Issued to clients of VMIA

For the period 30 June 2014 to 30 June 2015

**Contents**

**Your Duty of Disclosure..... 3**

**Non-disclosure ..... 3**

**Important Information ..... 3**

**Important Definitions ..... 4**

**Part 1 ..... 5**

**Section 1- Medical Expenses..... 5**

    Extent of Cover ..... 5

    Definitions..... 5

    Table of Benefits ..... 6

    Exclusions ..... 7

**Section 2 – Evacuation Cover and Personal Safety..... 8**

    Extent of Cover ..... 8

    Exclusions ..... 8

    Emergency Assistance Companies..... 9

    Medical Emergency ..... 9

    Security or Personal Safety Emergency..... 9

**Part 2 ..... 10**

**Personal Accident Cover ..... 10**

    Extent of Cover ..... 10

    Table of events ..... 10

**Definitions..... 11**

**General Conditions and Limitations ..... 13**

**Privacy Statement ..... 15**

## Your Duty of Disclosure

Before you enter into a contract of general insurance with an insurer, you have a duty to disclose to the insurer every matter you know or could reasonably be expected to know is relevant to the insurer's decision whether to accept the risk of the insurance and, if so, on what terms.

You have the same duty to disclose those matters to the insurer before you renew, extend, vary or reinstate a contract of general insurance.

Your duty however does not require disclosure of any matter:

- that diminishes the risk to be undertaken by the insurer;
- that is of common knowledge;
- that your insurer knows or, in the ordinary course of its business, ought to know;
- as to which compliance with your duty is waived by the insurer.

## Non-disclosure

If you fail to comply with your duty of disclosure, the insurer may be entitled to reduce its liability under the contract in respect of a claim or may cancel the contract.

If your non-disclosure is fraudulent, the insurer may also have the option of avoiding the contract from its beginning.

## Important Information

All cover under this Policy is subject to:

1. The payment of the premium,
2. The terms and conditions contained in this Policy Document and in the Schedule and
3. The limits of liability referred to in the Policy.

This Policy consists of Parts and Sections. An Insured Person is covered for insurance under those Parts and Sections selected by You as indicated in the Schedule.

We hereby agree to insure such person or persons as You shall nominate from time to time on the terms and conditions and subject to the exclusions set out in this Policy.

There are maximum amounts payable under this Policy with respect to each Insured Person, and with respect to all claims payable under this Policy during each Period of Insurance. Where the limits are stated as "per annum" or "annual" the limits are pro-rated to equal the Period of Insurance. The limit of the total Sum Insured is stated in the Schedule.

If You are not entirely satisfied with this Policy You may cancel it by returning it to Us within twenty-one (21) days of the date of receipt. We will refund Your premium and the Policy will be treated as though it never existed.

## Important Definitions

For the purposes of this Policy the following important definitions apply to each Section:

**INSURER** means the Victorian Managed Insurance Authority (VMIA) of Level 10 South, 161 Collins Street, Melbourne, Victoria, 3000, Australia.

**SCHEDULE** means the Schedule attaching to the Policy VMIA has issued to You.

**INSURED PERSON** is any person nominated by You from time to time for the insurance cover selected by You and with respect to whom a premium has been paid.

**FAMILY** means the Insured Person's spouse and any unmarried dependant children, stepchildren or legally adopted children who are living with the Insured Person and who are under 19 years of age or under 25 years of age if they are a full-time student and primarily dependent on the Insured Person for maintenance and support.

**PERIOD OF INSURANCE** is the period referred to in the Schedule.

**ARRANGEMENT DATE** is the date cover was arranged by Us.

**TABLE OF BENEFITS** specifies maximum annual benefit amounts for specific treatments.

**AHI ASSIST** is the emergency assistance arm of Accident & Health International Underwriting Pty Ltd ABN 26 053 335 952 of Level 4, 33 York Street, Sydney, New South Wales, 2000, Australia.

**YOU / YOUR** is the Insured named in the Schedule.

**WE/OUR/US** means VMIA.

**NUCLEAR, CHEMICAL OR BIOLOGICAL TERRORISM** means terrorism which includes, but is not limited to, any act, preparation in respect of action or threat of action, designed to:

- a. influence a government or any political division within it for any purpose, and/or
- b. influence or intimidate the public or any section of the public with the intention of advancing a political, religious, ideological or similar purpose.

**COUNTRY OF DOMICILE** means the country in which You would normally reside if not but for Your period of expatriation. It is usually the country in which You are considered to be a "resident" outside of Your country of expatriation. It is normally the country from which You departed in order to commence Your period of expatriation, or is the country to which You will be expected to return to following the completion of Your period of expatriation. For the purpose of this Policy You are considered to only have one Country of Domicile.

# Part 1

## Section 1- Medical Expenses

### Extent of Cover

1. If an Insured Person has completed an application form and is accepted by VMIA and sustains an injury or suffers a sickness or disease and incurs Medical Expenses (as defined) during the Period of Insurance, We will pay those expenses incurred outside Your Country of Domicile as detailed in the Table of Benefits, provided the Policy is in force. If an Insured Person has not completed an application form cover is limited to conditions which are contracted and commencing during the Period of Insurance.
2. We will pay Medical Expenses incurred within Your Country of Domicile as detailed in the Table of Benefits, provided the VMIA Policy is in force however all payments are subject to the local legislation in Your Country of Domicile.
3. We will also pay the expenses related to the Emergency Evacuation as a consequence of a medical condition of an Insured Person provided such evacuation is recommended by a legally qualified medical practitioner and is authorised by AHI Assist or Accident & Health International Underwriting Pty Ltd.
4. We will also pay for reasonable and necessary expenses for one person to accompany an evacuated Insured Person provided a medical practitioner certifies it as necessary.
5. If an Insured Person dies during the Period of Insurance, We will pay either funeral or cremation expenses if the body is buried at the place of death, or the cost of returning the Insured Person's body or ashes to his or her home address subject to a maximum benefit of ten thousand (\$10,000) dollars.

### Definitions

**MEDICAL EXPENSES** means expenses incurred and paid to a legally qualified medical practitioner, nurse, hospital or ambulance service for medical, surgical, hospitalisation or nursing treatment, including the cost of medical supplies and ambulance hire as per the following Table of Benefits.

We will only pay for Medical Expenses which are incurred during the Period of Insurance.

**EMERGENCY EVACUATION** means an evacuation due to medical treatment being immediately required and the medical condition being sudden and life threatening.

## Table of Benefits

POLICY BENEFITS	SPECIFIED LIMIT PER ANNUM
<b>1. MEDICAL EXPENSES</b>	
<b>HOSPITAL COVER</b>	
As a standard Private or Public Hospital Patient for the following treatment classifications:	
Surgical Medical Psychiatric Rehabilitation Nursing Care Theatre Fees Special Dressings/Disposables and Prosthetic Implants Physiotherapy in Hospital Pharmaceutical Benefits in Hospital Anaesthetic	100% of expense up to the Policy Limit
Elective Surgery following an Accident whilst you are insured under this policy	50% of expense to a maximum of \$4,000 per single or per family
<b>2. GENERAL HEALTH SERVICES COVER – NON HOSPITAL</b>	
Doctors	100% of expense up to the Policy Limit
Medical Imaging / Laboratory Examinations / Day Surgery / Radiotherapy / Chemotherapy	100% of expense up to the Policy Limit
Physician prescribed medicines and drugs following physician's consultation. There is no cover for non-prescription medicines available over the counter.	50% of expense to a maximum of \$2,000 per single or per family
<b>3. AMBULANCE SERVICE</b>	
	100% of expense up to the Policy Limit
<b>4. MATERNITY CARE AND PREGNANCY</b>	
<b>12 month waiting period</b>	
Routine pre natal, delivery and post natal charges	100% of expense up to a maximum of \$20,000
Emergency and/or complicated delivery charges	100% of expense up to a maximum of \$20,000
Charges relating to post birth complications for the newborn (0 - 6 months)	100% of expense up to a maximum of \$100,000
<b>5. DENTAL SERVICES</b>	
Consultation	
X-Rays	
Scaling and Cleaning/Removal of Plaque	
Application of Fluoride	Single Cover
Amalgam Filling	50% of expense to a maximum of \$1,500 per person
Composite Resin Filling	Family Cover
Single Extraction	50% of expense to a maximum of \$1,500 per person
Additional Extractions	Maximum of \$4,000 per family
Endodontics	
Periodontics	
Oral Surgery	

POLICY BENEFITS	SPECIFIED LIMIT PER ANNUM
<b>6. SPECIAL DENTAL SERVICES</b> following an accident	100% of expense to a maximum of \$6,000 per person
<b>7. OPTICAL BENEFITS</b>	
Eye Examination, Spectacles or Contact Lenses	Single Cover 50% of expense to a maximum of \$600 per person  Family Cover 50% of expense to a maximum of \$600 per person Maximum of \$1,200 per family
<b>8. ANCILLARY SERVICES</b>	
	<b>Benefit Per Visit</b>
Physiotherapy	\$100
Speech Therapy	\$100
Eye Therapy	\$100
Acupuncture	\$100
Chiropractic	\$100
Osteopathic	\$100
Naturopathic	\$100
Podiatry	\$100
Dietics	\$100
	<b>100% of expenses to a maximum of \$2,000 per single or per family</b>
Home Nursing	100% of expense up to the Policy Limit
Prostheses (not surgically implanted), Hearing Aids and Similar Appliances, Artificial Aids, Blood Glucose Meter, Nebuliser	100% of expense up to the Policy Limit
<b>9. PSYCHOLOGY AND PSYCHIATRY</b>	
Psychology and Psychiatry-related claims	50% of expense to a maximum of \$2,000 per single or per family
<b>10. REHABILITATION AND OCCUPATIONAL THERAPY</b>	
Rehabilitation treatment programme and occupational therapy following injury	100% of expense to a maximum of \$10,000 per single or per family

## Exclusions

We shall not pay for any medical expenses or other expenses which:

1. relate to childbirth or pregnancy within the first 52 weeks of cover commencing;
2. are in relation to cosmetic elective treatment, sterilisation, reversal of sterilisation and infertility treatment;
3. relate to a sexually transmitted disease, or Acquired Immune Deficiency Syndrome (AIDS) disease or Human Immunodeficiency Virus (HIV) infection.

## Section 2 – Evacuation Cover and Personal Safety

### Extent of Cover

1. If an Insured Person, during the Period of Insurance, is in a country or region that Australian officials recommend certain categories or persons (which include the Insured Person) in that country or region should leave because of a:
  - a. security threat such as insurrection, war, rebellion, civil unrest or political instability, or
  - b. a natural disaster such as earthquake, cyclone, flooding or volcanic eruption, after the Insured Person has arrived in the country or region and it is unsafe for the Insured Person to remain in the country or region,

We will pay:

- 1.1 the cost of evacuating the Insured Person to the nearest place of safety, and the reasonable cost of accommodation, up to a maximum of five hundred (\$500) dollars per day any one Insured Person to a maximum of fourteen (14) days any one event; or
  - 1.2 when necessary, the reasonable cost of returning the Insured Person to their country of domicile if commercial flights are unavailable; or if commercial flights are available the cost will be limited to a direct business class flight; and
  - 1.3 provided the evacuation is authorised by AHI Assist or Accident & Health International Underwriting Pty Ltd.
2. If an Insured Person, during the Period of Insurance, is in an emergency situation where their personal safety and security is at risk, We will provide assistance where possible and pay the reasonable and necessary expenses incurred for each Insured Person. The emergency situation must be unforeseen and outside the control of the Insured or the Insured Person and the expenses must be authorized by AHI Assist or Accident & Health International Underwriting Pty Ltd

However We will not pay in excess of two hundred and fifty thousand (\$250,000) dollars for any one evacuation or emergency situation for all persons covered under the Policy.

### Exclusions

We shall not be liable for claims arising from any:

1. expenses related to evacuation out of a country which You have travelled to after The Australian Department of Foreign Affairs and Trade has issued a Travel Warning which recommends that travellers do not undertake travel at all, i.e. Level 4. Such Travel Warning information can be acquired by contacting the Australian Embassy in the country travel is anticipated or The Australian Department of Foreign Affairs and Trade in Canberra or via our Website address [www.acchealth.com.au](http://www.acchealth.com.au).
2. expenses related to evacuation out of a country or a region which You have remained in after The Australian Department of Foreign Affairs and Trade has issued a Travel Warning which recommends that travellers should leave the area and such warning or recommendation has been ignored. Such Travel Warning information can be acquired by contacting the Australian Embassy in the country travel is anticipated or The Australian Department of Foreign Affairs and Trade in Canberra or via our Website address [www.acchealth.com.au](http://www.acchealth.com.au).

## **Emergency Assistance Companies**

### **Medical Emergency**

An Insured Person is also entitled to the services of AHI Assist in the event of a medical emergency or sickness by using a toll-free or reverse-charge telephone number stated on The AHI Assist Identification Card which we have made available to You.

The contact number is +61 2 9978 6666.

AHI Assist provides many travel and emergency services, including:

1. Pre-travel advice on matters relating to health
2. Case management if hospitalised
3. Emergency assistance worldwide
4. The arrangement for transport by road, aircraft or special air ambulance to an appropriate medical centre if this is required for treatment, accompanied if necessary by a doctor or nurse
5. Arrangements for evacuation and transportation home if necessary.

### **Security or Personal Safety Emergency**

In the event of an emergency evacuation or situation whilst travelling it is recommended you contact our authorised security & political assistance company, AHI Assist for advice and management of the evacuation or situation.

To contact AHI Assist, call: +61 2 9978 6666.

## Part 2

### Personal Accident Cover

#### Extent of Cover

If during the Period of Insurance an Insured Person who is Your employee suffers from an Event described in the following Table of Events as a result of an Injury, We will pay the corresponding benefit for that Event set out in the Table of Events, provided an amount is shown on the Schedule for that Event.

#### Table of events

The Events	LUMP SUM BENEFIT
Injury resulting directly in the following Event(s), which occur within (12) months of the date of the injury:	Being a percentage of the Maximum Amount shown in the Schedule against Part 2 – Lump Sum benefits for each Insured Person.
1. Accidental Death	100%
2. Permanent Total Disablement	100%
3. Paraplegia or Quadriplegia	100%
4. Loss of sight of both eyes	100%
5. Loss of sight of one (1) eye	100%
6. Loss of use of two (2) Limbs	100%
7. Loss of use of one (1) Limb	100%
8. Permanent and incurable insanity	100%
9. Loss of hearing in: -	
a. both ears	100%
b. one (1) ear	20%
10. Permanent Total Loss of four (4) Fingers and Thumb of either Hand	75%
11. Permanent Total Loss of the lens of one (1) eye	60%
12. Third degree burns and/or resultant disfigurement which covers more than 40% of the entire external body	50%
13. Permanent Total Loss of use of four (4) Fingers of either Hand	40%
14. Permanent Total Loss of use of one (1) Thumb of either Hand:-	
a. both joints	30%
b. one (1) joint	15%

The Events	LUMP SUM BENEFIT
Injury resulting directly in the following Event(s), which occur within (12) months of the date of the injury:	Being a percentage of the Maximum Amount shown in the Schedule against Part 2 – Lump Sum benefits for each Insured Person.
15. Permanent Total Loss of use of Fingers of either Hand:-	
a. three (3) joints	15%
b. two (2) joints	10%
c. One (1) joint	5%
16. Permanent Total Loss of use of Toes of either foot:-	
a. all - one (1) foot	15%
b. great - both joints	5%
c. great – one (1) joint	3%
d. other than great, each Toe	1%
17. Fractured leg or patella with established non - union	10%
18. Shortening of leg by at least 5cm	7.5%
19. Permanent Partial Disablement not otherwise provided for under Events 1 to 18 inclusive.	Such percentage of the amount as We in Our absolute discretion shall determine and being in Our opinion not inconsistent with the benefits provided under Events 1 to 18 inclusive. Event 19 is limited to a maximum of 75% of the amount shown in the Schedule against Part 2 – Lump Sum Benefits.

## Definitions

Injury means bodily Injury resulting from an accident which is an external event that occurs fortuitously to an Insured Person during the Period of Insurance and results in any of the Events specified in the Table of Benefits within twelve (12) calendar months from the date thereof.

Injury does not include:

- (a) any consequences of an Injury which are ordinarily described as being a disease including but not limited to any congenital condition, heart condition, stroke or any form or cancer;
- (b) an aggravation of a pre-existing Injury;
- (c) any other pre-existing condition;
- (d) any degenerative condition.

# General Exclusions

We shall not pay for any other expenses which:

1. Result from an Insured Person engaging in or taking part in or training for any professional sports of any kind;
2. Are recoverable by You or by an Insured Person from any other source to the extent to which they are so recoverable;
3. Are caused by or arising out of an Insured Person engaging in air travel except as a passenger in any properly licensed aircraft;
4. Relate to a deliberately self-inflicted injury, including suicide or attempted suicide whether sane, insane or under any mental distress;
5. Relate to War, invasion, acts of foreign enemies, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection or military or usurped power in your Country of Domicile, Iraq or Afghanistan;
6. Are caused by or arising out of 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;
7. Result from losses arising from nuclear, chemical or biological terrorism.

Terrorism includes but is not limited to, any act, or preparation in respect of action or threat of action, designed to:

- a. influence a government or any political division within it for any purpose, and/or
  - b. influence or intimidate the public or any section of the public with the intention of advancing a political, religious, ideological or similar purpose;
8. Result from an Insured Person engaging in or taking part in naval, military or air force service or operations;
  9. Result from a criminal or illegal act committed by You or an Insured Person.

# General Conditions and Limitations

## 1. Notice Of Claim

Written notice of claim must be given to Us or to AHI Assist within thirty (30) days after the occurrence of any circumstances giving rise to a claim or as soon thereafter as is reasonably possible.

## 2. Subrogation

In the event of any payment being made by Us under this Policy, We shall be subrogated to all the Insured Person's rights of recovery against any person or organisation. The Insured Person must not take any action to prejudice any such right of recovery and must co-operate with and do all things necessary to enable the recovery action to be prosecuted.

## 3. Claim Forms

Upon receipt of a notice of claim, We shall submit Our usual claim form for completion. We shall not be liable to make any payment under this Policy unless the claim form is properly completed and all information reasonably required by Us has been furnished.

## 4. Your Duty to Co-Operate

The benefits of this Policy depend on You or any person covered by this Policy giving Us any reasonable information and help We require. This includes giving Us written statements and documents We consider relevant. We may also require You or any person covered by this Policy to attend Court to give evidence. You must help Us even when We have paid Your claim. If You do not co-operate Your payments may be suspended.

## 5. Physical Examination and Autopsy

We may at Our own expense conduct any medical examination or examinations of any Insured Person or arrange at Our own expense for an autopsy to be carried out.

## 6. Legal Action

No action at law or in equity shall be brought to recover on this Policy prior to the expiration of sixty (60) days after Our reasonable requirements in connection with a claim have been met. No such action shall be brought after the expiration of three (3) years after the time of the loss or damage or the time the liability was incurred (as the case may be).

No action at law or equity shall be brought or maintainable unless and until the parties have first participated in a formal mediation process before a mediator appointed by agreement or failing that by the president of the law society of that state the claimant ordinarily resides. The costs of any mediator shall be borne equally by the parties.

## 7. Cancellation

1. This Policy may be cancelled by You at any time by giving Us written notice, in which case We shall retain a proportion of the premium calculated at Our usual short-term rates for the time the Policy has been in force.
2. We may cancel this Policy in accordance with the provisions of the Insurance Contracts Act 1984 (notwithstanding that We are not bound by the provisions of that Act). Upon cancellation by Us, We shall refund a proportion of the premium paid calculated by reference to the unexpired Period of Insurance.

**8. Age Limitation**

We shall not be liable to pay any money with respect to any Insured Person who has attained the age of sixty five (65) years.

**9. Limit of Liability**

Our total liability for all claims arising under this Policy during any Period of Insurance shall not exceed the amount stated in the Schedule.

**10. Currency**

Any claim or benefit paid under this Policy will be paid in the same currency as the premium was quoted.

**11. Governing Law And Jurisdiction**

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

# Privacy Statement

VMIA is committed to protecting your privacy. Any personal information collected, handled, stored or disclosed about you through our services will be managed in accordance with the *Victorian Managed Insurance Act 1996*, *Privacy and Data Protection Act 2014* and the *Health Records Act 2001*.

Personal information means information or an opinion that is recorded about an individual whose identity is apparent, or can reasonably be ascertained, from the information or opinion.

## Collection and use of Personal Information

VMIA will collect and record personal information through its client data collection processes including its website, online forms and surveys. Personal information provided directly to us will only be used for the purpose of performing our functions or activities. For example VMIA will need to collect personal information to prepare insurance renewals. In particular, personal information is collected in the following situations:

- when you send us an email
- when you use our online services, such as completing a form or survey electronically
- when you register to attend training and events
- when you access VMIA's secure client portal on VMIA's website.

## Access and Correction

If you:

- want to have access to the personal information (if any) that we hold about you
- want to know more about what sort of information we hold, for what purposes and how we deal with that information
- believe that personal information that we hold about you is not accurate, complete and up to date; or
- have concerns about your privacy rights, please contact VMIA's Information Privacy Officer on 03 9270 6912.