



# TRAVEL INSURANCE

Combined Financial Services Guide And Product Disclosure Statement  
Effective 27 September 2022

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# THINGS TO KNOW



01

## About 1Cover

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### Your Insurer:

**Your** travel insurance **Policy** is secured by Certain Underwriters at Lloyd's (the **Insurer**). **1Cover** Pty Ltd issues the **Policy** to **You** and handles claims as an agent for the **Insurer**.

### Emergency Assistance:

Emergency Assistance is provided 24/7, 365 days a year by 'First Assistance'. You can find the [Emergency Assistance number](#) on the back cover.

### Your 1Cover Travel Policy:

If **You** buy the **Policy**, this document, a letter from **Us** confirming or declining cover for **Your Pre Existing Medical Condition(s)** and **Your Certificate Of Insurance** make up **Your** insurance contact with **Us**.

Be sure to keep them in a safe place!

Thank you for choosing 1Cover.

The one thing you need when one thing goes wrong!

## Your Duty To Us

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In accordance with the Insurance Contracts Act 1984, **You** have a duty to act in the utmost good faith in all of **Your** dealings with **us**.

This duty applies when **You** first apply for **Your Policy** and on any renewal, variation, extension or replacement of **Your Policy**.

If **We** ask **You** questions that are relevant to **Our** decision whether to insure **You** and on what terms, **You** must take reasonable care not to make a misrepresentation to **Us** when answering those questions. For example, **You** will need to provide information which, to the best of **your** knowledge is accurate, complete and not misleading.

**You** and everyone insured under **Your Policy** (and listed in the **Certificate Of Insurance**) must comply with this duty. Please make sure **You** explain the duty to anyone else insured under **Your Policy**.

If **You** do not take reasonable care not to make a misrepresentation, **We** may be permitted by law to cancel **Your** insurance contract or reduce the amount **We** will pay **You** if **You** make a claim, or both.

If **You** make a misrepresentation which is fraudulent, **We** may refuse to pay a claim and treat the insurance contract as if it never existed.



## Words With Special Meanings:

Some words in this document have defined meanings. Where they appear:

- **'You'** and **'Your'** mean the person(s) whose name(s) is set out on **Your Certificate Of Insurance** and their accompanying **Dependant(s)** travelling with **You** for 100% of the **Journey**, not in full time employment at the date of **Policy** issue and listed on **Your Certificate Of Insurance**.
- **'We'**, **'Our'** and **'Us'** means the **Insurer** who deals with **You** through **1Cover**.

Other words in this Product Disclosure Statement (PDS) have a special meaning and appear in bold. When these words are used, they have the meaning set out in the [Definitions](#) section.

This Product Disclosure Statement (PDS), includes the policy wording which sets out the cover available and the terms and conditions which apply.

It is important to understand what you are not covered for. View more "[General Exclusions](#)" that apply to all sections of our policies.

## Important Coronavirus (COVID-19) Information:

Cover under this policy is extended to include overseas medical claims arising from a positive diagnosis of the Coronavirus (meaning COVID-19 or SARS-COV-2 or any mutation or variation of these) by a qualified medical practitioner while on your **Journey**. Cover is extended under the following Sections of your policy:

Section 1: Emergency Medical Assistance

Section 2: Overseas Emergency Medical & Hospital Expenses

Section 4: Hospital Cash Allowance

Section 5: Repatriation of Remains

[General Exclusion 13](#) applies in all other circumstances and Sections of the **Policy**.

This **Policy** will not cover claims:

- Where circumstances existed that **You** knew or should reasonably have known of at the time **You** either bought the **Policy** or booked **Your** travel, that may affect your travel or give rise to a claim under the **Policy**. See [General Exclusion 4](#) and [General Exclusion 22](#).
- If **Your** claim is associated with travel to countries for which a 'Do Not Travel' warning has been issued by the Australian Government or there are circumstances that a reasonable person in your position should be aware of that may affect **Your** travel. See [General Exclusion 14](#).
- For costs or expenses that **You** incur due to mandatory quarantine or isolation orders required, or if the government bans travel before or during your trip. See [General Exclusion 15](#).

POLICY SECTION & BENEFITS		EXCESS APPLIED	COMPREHENSIVE / OVERSEAS FREQUENT TRAVELLER	ESSENTIALS	MEDICAL	DOMESTIC / DOMESTIC FREQUENT TRAVELLER	ALREADY OVERSEAS
<b>MEDICAL</b>							
1	Overseas Emergency Medical Assistance^	No	Unlimited	Unlimited	Unlimited	X	Unlimited
2	Overseas Emergency Medical & Hospital Expenses^*	Yes	Unlimited	Unlimited	Unlimited	X	Unlimited
2A	Includes Dental Expenses (Per Adult)^	Yes	\$1,000	\$500	\$500	X	\$500
3	Resumption Of Journey^*	No	\$3,000	X	X	X	\$3,000
4	Hospital Cash Allowance^*	No	\$5,000	X	X	X	\$5,000
5	Repatriation Of Remains	No	\$15,000	\$15,000	\$15,000	X	\$15,000
6	Permanent Disability^*	No	\$25,000	X	X	X	\$25,000
7	Loss Of Income^*	No	\$10,400	X	X	X	\$10,400
<b>LUGGAGE</b>							
8	Credit Card Fraud & Replacement^	Yes	\$5,000	\$1,000	X	X	\$5,000
8A	Includes Travel Documents & Traveller's Cheques^	Yes	Yes	X	X	X	Yes
9	Theft Of Cash^#	No	\$250	X	X	X	\$250
10	Luggage & Personal Effects*	Yes	\$15,000	\$5,000	X	\$15,000	\$15,000
11	Luggage & Personal Effects Delay Expenses^	No	\$250	X	X	X	\$250
<b>CANCELLATION</b>							
12	Additional Accommodation & Travel Expenses*	Yes	\$2,000	X	X	\$2,000	\$2,000
12A	Includes Family Emergency*	Yes	Yes	X	X	Yes	Yes
12B	Includes Emergency Companion Cover*	Yes	Yes	X	X	Yes	Yes
13	Cancellation Fees & Lost Deposits*	Yes	Unlimited	\$2,500	X	Unlimited	X
14	Disruption Of Journey*	No	\$2,000	X	X	\$2,000	\$2,000
15	Alternative Transport Expenses^	Yes	\$5,000	X	X	X	\$5,000
<b>ANCILLARY</b>							
16	Personal Liability#	Yes	\$5 Million	\$5 Million	\$5 Million	\$5 Million	\$5 Million
17	Domestic Pets^*	Yes	\$500	X	X	X	\$500
18	Domestic Services^*	Yes	\$500	X	X	X	\$500
19	Rental Vehicle Insurance Excess#*	Yes	\$5,000	X	X	\$5,000	\$5,000

**Unless otherwise specified in the PDS:**

Sections 12, 12A, 12B, 13 & 14 - if you claim for the same or similar cancelled services/facilities or alternative arrangements under sections 12, 12A, 12B, 13 & 14, we will only pay the higher of the two amounts, not both. Benefit limits are per adult traveller. For accompanying dependants, the policy benefits are shared with the adult traveller.

# Limits are per policy regardless of the number of persons the claim relate to.

\* Sub-limits apply.

^^ **You** only have this cover for these sections if the relevant pack has been purchased.

^ **You** do not have cover under these sections while travelling in Australia.

ADD-ON POLICY SECTION & BENEFITS		EXCESS APPLIED	COMPREHENSIVE	ESSENTIALS	MEDICAL	DOMESTIC / FREQUENT TRAVELLER	ALREADY OVERSEAS
<b>CRUISE PACK ADD ON</b>							
20	Pre-paid Shore Excursions Cancellation^^	Yes	\$1,000	X	X	\$1,000	\$1,000
21	Missed Cruise Departure^^	Yes	\$2,500	X	X	\$2,500	\$2,500
22	Cabin Confinement/Loss of Enjoyment^^*	No	\$1,500	X	X	\$1,500	\$1,500
23	Missed Port Cover^^	Yes	\$750	X	X	\$750	\$750
24	Formal attire cover^^*	Yes	\$1,500	X	X	\$1,500	\$1,500
25	Formal Attire Delay Allowance^^	No	\$250	X	X	\$250	\$250
<b>WINTER SPORTS ADD ON</b>							
26	Emergency Rescue^^	Yes	Unlimited	X	X	Unlimited	Unlimited
27	Ski Pack^^	Yes	\$750	X	X	\$750	\$750
28	Piste Closure^^*	Yes	\$1,000	X	X	\$1,000	\$1,000
29	Bad Weather & Avalanche Closure^^	Yes	\$750	X	X	\$750	\$750
30	Winter Sports Equipment Hire^^	Yes	\$1,500	X	X	\$1,500	\$1,500
31	Winter Sports Equipment Excess^^*	Yes	\$1,750	X	X	\$1,750	\$1,750
<b>RENTAL VEHICLE INSURANCE EXCESS ADD ON ^^#</b>		<b>\$5,000 - \$8,000</b>	<b>\$5,000 - \$8,000</b>	<b>X</b>	<b>X</b>	<b>\$5,000 - \$8,000</b>	<b>\$1,750</b>
<p>Unless otherwise specified in the PDS:  Sections 12, 12A, 12B, 13 &amp; 14 - if you claim for the same or similar cancelled services/facilities or alternative arrangements under sections 12, 12A, 12B, 13 &amp; 14, we will only pay the higher of the two amounts, not both. Benefit limits are per adult traveller. For accompanying dependants, the policy benefits are shared with the adult traveller.</p> <p># Limits are per policy regardless of the number of persons the claim relate to.  * Sub-limits apply.</p> <p>^^ <b>You</b> only have this cover for these sections if the relevant pack has been purchased.  ^ <b>You</b> do not have cover under these sections while travelling in Australia.</p>							



# PRODUCT DISCLOSURE STATEMENT

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02



## Product Disclosure Statement (PDS)

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This PDS Explains:

- How to buy the **Policy** – [click here](#)
- What the **Policy** covers – [click here](#)
- How to make a claim under the **Policy** – [click here](#)

**You** should read the PDS before buying the **Policy** because **You** are responsible for ensuring that the insurance cover **You** select, is suitable for **Your** needs.

Any updates to this PDS, will be available on our website at [www.1Cover.com.au/policydetails](http://www.1Cover.com.au/policydetails). **We** will email **You** if any important changes happen while **Your Policy** is in force.

## How To Buy The Policy

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Before buying the Policy, you should consider:

- The different levels of cover available – [click here](#)
- Whether **You** are eligible for cover – [click here](#)
- How frequently **You** travel – [click here](#)
- Whether **You** need any extra optional cover – [click here](#)
- The level of **Excess** that **You** prefer – [click here](#)
- The cost of the **Policy** – [click here](#)
- The terms on cancelling **Your Policy** – [click here](#)

## The Different Levels Of Cover Available

**You** need to choose who will be covered and the level of cover **You** need to suit **Your** travel plans.

**You** can choose from 7 levels of cover.

Levels Of Cover	What's Included
Comprehensive	Sections 1 to 19.
Essentials	Sections 1, 2, 2A, 5, 8, 10, 13 and 16.
Medical Only	Sections 1, 2, 2A, 5 and 16.
Domestic	Sections 10, 12, 12A, 12B, 13, 14, 16 and 19.
Already <b>Overseas</b>	Sections 1 to 12, and 14 to 19.
International Frequent Traveller	Sections 1 to 19.
Domestic Frequent Traveller	Sections 10, 12, 12A, 12B, 13, 14, 16 and 19.

## Whether You Are Eligible For Cover

**Australian Residents** who are eligible for a Medicare card can apply for cover under the following plans provided that, at the time of purchase:

- **You** are under the [age limits](#) that apply for the chosen plan; and
- **Your Journey** commences and ends in Australia; and
- **You** purchase the **Policy** before leaving the station, airport, port, terminal or motor vehicle rental agency from which **Your** trip is scheduled to commence.

### Comprehensive | Essentials | Medical Only | Domestic

These plans are appropriate for **Australian Residents** whose **Journey** has not yet commenced. Please read **Our** conditions of purchase carefully. **We** can only provide cover if:

- **You** satisfy the [age limits](#) that apply for the chosen plan; and
- **Your Journey** commences and ends in Australia; and
- **You** purchase the **Policy** before leaving the station, airport, port, terminal or motor vehicle rental agency from which **Your** trip is scheduled to commence.

## Already Overseas

The Already **Overseas** plan is appropriate for **Australian Residents** who are already **Overseas** and need travel insurance cover because they have either forgotten to purchase before they left Australia or, their existing travel insurance **Policy** has expired.

Please read **Our** conditions of purchase carefully. **We** can only provide cover if **You** satisfy the following conditions at the time of purchase:

- **You** are aged 64 or under; and
- **You** have a permanent residential address in Australia and will be returning to resume residence in Australia at the end of **Your Journey**; and
- **You** intend to return to Australia on the date **Your Policy** ends by providing evidence of a return flight; and
- **You** purchase **Your Policy** within 5 days from either the date **You** departed Australia; or the expiry of any other travel insurance **Policy**; and
- **Your** period of **Overseas** travel does not exceed 15 consecutive months in total from the date **You** originally departed Australia; Please note:
  - Under this plan, “**Journey**” means the time from when the **Policy** is issued while **You** are **Overseas** and ends on or before the last day of cover shown on Your **Certificate of Insurance** or when **You** arrive at any immigration counter in Australia, whichever happens first.
- **Journeys** can be up to a maximum of 90 days.
- Purchasing an Already **Overseas Policy** is limited to one Journey every 12 months.

## Frequent Travellers

This plan covers an unlimited number of **Journeys** both internationally and domestically for a twelve-month period. This applies to both leisure and business travel.

The maximum duration of cover for any one **Journey** will depend upon which **Policy** option **You** have selected. **You** can choose from 21, 45, or 90 days per trip.

There are 2 types of cover:

International Frequent Traveller covers **Overseas** and domestic journeys.

Domestic journeys will only be covered when **You** are more than 100KM from **Your Home**.

International: sections 1-19.  
Domestic: sections 10, 12, 12A, 12B, 13, 14, 16 and 19.

Domestic Frequent Traveller covers **Journeys** within Australia, but **You** are only covered when **You** are more than 100KM from **Your Home**.

Sections 10, 12, 12A, 12B, 13, 14, 16 and 19.

All benefit limits and sub-limits are reinstated at the end of each **Journey** (other than section 16 - Personal Liability, where the amount shown in the **Table Of Benefits** is the most **We** will pay for all claims under the **Policy**).



## You Will Not Be Eligible For Cover

Applicable to all plans, except Domestic.

- If **You** do not intend to return to Australia on the completion of **Your Overseas Journey**; or
- **You** are using this travel insurance to substitute with a private health insurance while **Overseas**.

## Age Limits That Apply

Age limits are as at the date of issue of **Your Certificate Of Insurance**.

Plans:	Age Limits That Apply
Comprehensive	Travellers of all ages*^
Essentials	Travellers aged 74 and under
Medical Only	Travellers aged 74 and under
Domestic	Travellers of all ages*^
Already <b>Overseas</b>	Travellers aged 64 and under
Frequent Traveller	Travellers aged 64 and under

\*Cover is only available up to a maximum of 6 months per 1 **Journey** for travellers aged 80 years or over.

^If you are aged 80 years old or above, a \$3,000 Excess applies for all claims arising from, related to or associated with an **Injury, Illness or** medical condition. For all other claims, refer to the section titled “What Level Of **Excess** Do I Apply” – [view here](#).

## Amendment Of Cover

In certain circumstances, **We** will allow **You** to amend **Your Policy** after purchase.

Where **We** agree to update or add to the cover under **Your Policy**, the change in cover will only apply to circumstances which **Arise** after **We** have issued **You** with an updated **Certificate Of Insurance** reflecting the change.

Where **We** agree to **Your** request to remove any cover under **Your Policy**, **You** will not be able to make any claim or exercise any other right under the cover that has been removed for any circumstance which **Arises** at the time or after **Your Policy** is updated.

## Where Are You Travelling To?

When **You** apply for the **Policy** **You** need to tell **Us** where **You** are travelling to. The premium **You** pay for the **Policy** depends on **Your** destination(s). The **Policy** only covers loss, **Injury** or **Illness** which occurs in the countries or regions shown on your **Certificate Of Insurance**.

Please note: **We** will cover **You** for stopovers in the USA if **You** also nominate USA as a destination when **You** apply for cover.

## Cruise Holidays

If **You** are going on a cruise, **You** must select an appropriate region. **You** MUST pay additional premium for travel on a **Cruise Vessel** by purchasing the **Cruise Pack**. There is, however, no cover under any sections of the **Policy** when **You** are on a cargo ship or freighter.

## Whether You Need Any Extra Optional Cover

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### High Value Items

**Luggage & Personal Effects** are covered under all plans (see [Section 10 - Luggage & Personal Effects](#), except for Medical Only, but individual limits apply to each item.

Please note, this option is only available for Comprehensive and International Frequent Traveller plans.

**You** can purchase up to \$5,000 additional cover for high value items, other than jewellery, watches, **Bicycles** and watercraft (excluding surfboards by listing each item and its value when **You** apply for cover.

Please note high value items cannot be more than 12 months old.

### Cruise Pack

**You** can purchase the **Cruise Pack** with all plans, except Essentials and Medical Only by paying an additional premium. **You** will only have the cover provided under the sections included in the **Cruise Pack** if **You** select this option at the time of purchase and **You** have paid the required additional premium.

If **You** DO NOT purchase the **Cruise Pack** **You** WILL NOT be covered for any losses **Arising** directly or indirectly from **You** travelling on a **Cruise Vessel** under sections:

- 1 - Emergency Medical Assistance
- 2 - Emergency Medical & **Hospital** Expenses
- 12 - Additional Accommodation & Travel Expenses
- 12A - **Family** Emergency, section 12B - Emergency Companion cover and;
- 13 - Cancellation Fees & Lost Deposits of the **Policy** while **You** are travelling on a **Cruise Vessel**.

The **Cruise Pack** must be purchased at least 24 hours before travelling on a **Cruise Vessel**. **You** cannot purchase this pack individually.

The following sections in the table below are included in the **Cruise Pack**. This table also shows the coverage limits under each section.

Sections	Benefit	Amount
20	Pre-paid Shore Excursion Cancellation	\$1,000
21	Missed Cruise Departure	\$2,500
22	Cabin Confinement / Loss Of Enjoyment*	\$1,500
23	Missed Port Cover	\$750
24	Formal Attire Cover	\$1,500
25	Formal Attire Delay Allowance	\$250

\*sub-limits apply

## Winter Sports Pack

**You** can purchase the **Winter Sports Pack** with all plans, except Essentials and Medical Only by paying an additional premium. **You** will only have the cover provided under the sections included in the **Winter Sports Pack** if **You** select this option at the time of purchase and **You** have paid the required additional premium.

If **You** do not purchase the **Winter Sports Pack** **You** will not be covered for any losses **Arising** directly or indirectly from **You** participating in **Winter Sports Activities** under sections:

- 1 - Emergency Medical Assistance, section
- 2 - Emergency Medical & **Hospital** Expenses
- 12 - Additional Accommodation & Travel Expenses
- 12A - **Family** Emergency
- 12B - Emergency Companion cover and;
- 13 – Cancellation Fees & Lost Deposits of the **Policy**.



The **Winter Sports Pack** must be purchased at least 24 hours before participating in **Winter Sports Activities**. **You** cannot purchase this pack individually.

Sections	Benefit	Amount
26	Emergency Rescue	Unlimited
27	Ski Pack	\$750
28	Piste Closure*	\$1,000
29	Bad Weather & Avalanche Closure	\$750
30	Winter Sports Hire Equipment	\$1,500
31	Winter Sports Equipment Excess*	\$1,750

\*sub-limits apply

**You** must be aged 64 years and under at the time **Your Policy** is issued to purchase this option.

This additional option does not provide cover for claims under Permanent Disability or Personal Liability that **Arise** from **You** participating in **Winter Sports Activities**.

A double **Excess** applies for all claims under sections **Overseas** Emergency Medical & **Hospital** Expenses, Additional Accommodation & Travel Expenses and Cancellation Fees & Lost Deposits if **You** purchase this option and **Your** claim **Arises** directly from **You** participating in **Winter Sports Activities**. **You** cannot pay to remove this **Excess**.

## Rental Vehicle Insurance Excess

**Your Policy** automatically provides cover under section 19 - **Rental Vehicle Insurance Excess** for all plans, except for Medical Only and Essentials.

**You** can increase the benefit level shown in the **Table Of Benefits** by nominating the level of additional cover required from the options **We** make available to **You** and paying an additional premium at the time **You** purchase **Your Policy**.

The amount of additional cover purchased by **You** will be shown on **Your Certificate Of Insurance**.

## Pre Existing Medical Conditions

Please refer to **Our Pre Existing Medical Condition** process – [view here](#).

## The Level Of Excess That You Prefer

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The **Excess** is the amount **You** must pay **Us** towards the cost of any claim **You** make. If **We** agree to pay **Your** claim, **We** will deduct the **Excess** from the amount of the claim **We** will pay to **You**.

**You** can select the amount of the **Excess** you wish to pay on certain claims when **You** apply for **Your Policy**. **Your Certificate Of Insurance** will show the Excess(es) that apply to the cover **You** select. The higher the **Excess You** choose, the lower **Your** premium will be.

Please note:

**We** may impose an additional **Excess** for claims **Arising** from some medical conditions. This will be shown on **Your Certificate Of Insurance** and the letter **You** receive from **Us** if **You** have declared any **Pre Existing Medical Conditions(s)**.

If you are 80 years old (or older) there is an age **Excess** of \$3,000 on any claim arising from, related to or associated with an injury or illness.

Additional excesses apply to the **Winter Sports Pack** – [view here](#).

**You** cannot pay to remove these **Excesses**.

## The Cost Of The Policy

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**We** will tell **You** the premium payable for **Your Policy** when **You** apply for cover.

It will be based on a number of factors including **Your** travel destination(s), the duration of **Your Journey**, the level of cover and **Excess You** choose, the number of people covered, **Your** age and any optional extra cover **You** select.

It will also include some government charges and taxes (e.g. GST).

## What You're Covered For

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This part of the PDS explains:

- The period for which **You** are covered – [click here](#)
- Circumstances in which **You** can extend **Your Policy** - [click here](#)
- What the **Policy** covers and, does not cover – [click here](#)
- Exclusions and conditions that limit what **You** are covered for under the **Policy** – [click here](#)

## The Terms On Cancelling Your Policy

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If **You** decide that **You** do not want this **Policy**, **You** can cancel it via the online policy manager or you can contact us. It's important to understand that canceling your policy means that that you won't be eligible for any cover, and you won't be able to make any claim under your policy. The following cancellation terms apply depending upon the circumstances.

### Up to 14 Days Cooling-Off Period

**You** may change **your** mind about buying this **policy** within fourteen (14) days of issue of the **Certificate of Insurance** ('cooling-off period') and **we** will provide a full refund. **We** must receive **your** request within the 14 days either in writing or by email. Alternatively, you may log in to **your** [Policy Manager](#) account and cancel **your policy** online.

This cooling-off right does not apply if it is past the first travel date shown on your **Certificate of Insurance**, **you** have made a claim or if **you** have started your **journey**.

### Cancellation by You After 14 Days

**You** can cancel **your policy** after 14 days, and **we** will refund the amount you paid less the proportion of the premium for the period which you were insured. **We** will also deduct an administration fee of \$25 from the amount that **we** refund **you**.

However, no refund will be provided if **you** have made a claim, or **you** have exercised any other right under **your policy**. If **you** choose to end your **journey** early, we will not reimburse any premium of any unused portion of **your policy**.

### Cancellation by Us

We may cancel this **Policy** at any time as allowed by law by notifying **You** in writing of the date from which cancellation is to take effect. **We** may only cancel in certain circumstances, including where you have:

- Breached **your** duty to take reasonable care not to make misrepresentation; or
- Breached a provision of your **policy**; or
- Made a fraudulent claim under any policy of insurance.

If **we** cancel, **we** will only refund the portion of the premium for your policy for the period for which you were not insured. There will be no administration charge where we choose to cancel.

### Complaints

If **You** have any concerns about the **Policy** or the insurance services **You** receive, please refer to the Complaints Procedures which you can [view here](#).



## Period For Which You Are Covered

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The earliest that cover under the **Policy** starts is when **We** issue **You** a **Certificate Of Insurance**. This confirms the period for which **You** are insured.

Importantly:

- Cover for section 13 - Cancellation Fees & Lost Deposits starts on the date the **Certificate Of Insurance** is issued.
- If **You** need to return **Home** during **Your Journey** (unless it is a claimable event), the cover provided by **Your Policy** will be suspended from the time **You** return to **Your Home**, until the time **You** leave **Your Home** to continue **Your Journey**.

Please note, it does not change the end date of **Your Policy**. Following resumption of **Your Journey**, **Your Policy** will remain valid until the end date shown on **Your Certificate Of Insurance** or **Your** permanent return to **Your Home**, whichever happens first.

**We** will not pay any cost in relation to **Your** return to Australia (unless these costs are covered by this **Policy**) or for **Your** expenses to travel **Overseas** to resume **Your Journey**. Any **Illness** or **Injury** **You** have developed, show symptoms for, have diagnosed or treated in Australia before **You** resume your **Journey** will not be covered in the remaining insurance period, as it will be considered a **Pre existing medical condition** from the time you resume your journey.

- Cover under all other sections starts on the first of the travelling dates shown on your **Certificate Of Insurance**, except for the Already Overseas plan, where there is no cover under any section for the first 72 hours after the issued date shown on your **Certificate Of Insurance**. This means there is no cover **arising** from events that happen within or before this period.
- All cover ends on the earlier of the date you return **Home** or the last of the travelling dates shown on your **Certificate Of Insurance**.
- **You** must purchase your **Policy** before you leave your **Departure point**, except where you are purchasing the Already Overseas plan.

## Circumstances In Which You Can Extend Your Policy

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If **You** decide to travel for longer than the original travel dates stated on **Your Certificate Of Insurance**, you can apply to extend your policy via our Online Policy Manager.

**You** must apply for an extension before Your Policy expires (11:59 PM AEST)

Online Policy Manager

<https://www.1cover.com.au/policy-manager>

If **We** agree to extend **Your Journey** end date and **You** pay the additional premium, **We** will issue **You** with a new **Certificate Of Insurance**.

**We** will agree to extend **Your Policy** end date on request unless:

- **You** have made a claim, or **You** are aware that **You** may need to make a claim under **Your** existing **Policy** that **You** have not advised to **Us**; or
- Your age exceeds **Our** [age limit](#) for the selected plan.

- It **Arises** from any **Pre Existing Medical Condition(s)**, which are automatically covered ([click here to view](#)) and **You** have not been **Hospitalised** (including day surgery or emergency department attendance) for that condition(s) in the past 12 months (regardless of whether **Your Pre Existing Medical Condition(s)** was covered under the original **Policy**); or
- **You** have suffered from a new medical condition during the term of the original **Policy**; or
- **You** are aged 80 years or over when **You** request the extension to a Comprehensive **Policy**; or
- **You** are aged 75 or over and request an extension to an Essentials or Medical Only policies; or
- **You** are aged 65 or over and request an extension to an Already Overseas **Policy**.

The cost of any extensions or amendment are calculated at the current rates for the relevant plan at the time of the extension or amendment.

## What The Policy Covers And, Does Not Cover

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The **Policy** provides 31 different types of benefits.

### Benefits Limits

The **Table Of Benefits** ([view here](#)) shows:

- Whether the benefit is included in the plan **You** have selected.
- The maximum amount **We** will pay for certain types of claims

### Limits On Cover

Although **We** strive to provide as wide coverage as possible, the **Policy** does not cover every circumstance. The limits on the cover are explained in each section and also in the section titled General Exclusions. Carefully read these sections to understand what **You** are, and are not, covered for.

## 1. Emergency Medical Assistance

This cover applies to all plans, excluding Domestic and Domestic Frequent Traveller. Our [emergency assistance team](#) are available 24/7 to help you if you need it. This assistance is offered to you regardless of whether your claim is related to COVID-19.

Please Note: **You** will not have cover under this **Policy** section while travelling on a **Cruise Vessel** or while participating in **Winter Sports Activities** unless **You** purchase the **Cruise pack** or the **Winter Sports Pack**.

### We Will Pay

**We** will pay for **Our** emergency assistance provider, First Assistance to provide the following services if **You Injure** yourself or become **Ill** while **Overseas**:

- a) Arrange access to a **Medical Adviser** for emergency medical treatment while **You** are **Overseas**.
- b) Arrange medical transfer if **You** need to be transported to the nearest **Overseas Hospital** for emergency medical treatment, or evacuation if **You** need to be brought back to Australia with appropriate medical supervision.
- c) Provide written guarantees of payment of **Reasonable** expenses for emergency **hospitalisation** that may be required while **You** are **Overseas**.
- d) Pass on messages to **Your Family** or employer in the case of an emergency.
- e) Arrange for **Your** dependants to return to Australia during **Your Journey** if they are left without supervision following **Your hospitalisation** or evacuation.



## We Will Not Pay

**We** will not pay for;

- a) Any **Hospital** or medical costs incurred in Australia.
- b) Any subsequent medical, **Hospital** or evacuation expenses if **You** decline to promptly follow any medical advice First Assistance has given.
- c) Medical evacuation or the transportation of **Your** remains from Australia to an **Overseas** country.
- d) Any claims under this section **Arising** from **Your** participation in **Winter Sports Activities**, unless **You** have purchased the winter sports pack.
- e) Any claims under this section **Arising** during **Your** travel on a **Cruise Vessel**, unless **You** have purchased the **Cruise pack**.
- f) Any claims **Arising** from search and rescue.

## You Can Choose Your Own Doctor

**You** may choose **Your** own **Medical Adviser** or First Assistance can appoint an approved **Medical Adviser** to see **You**, unless **You** are treated under a **Reciprocal Health Care Agreement**. If **You** do not get the medical treatment **You** expect, although First Assistance can assist **You**, neither **We** nor First Assistance will be liable for anything that results from that treatment.

## 24 Hours Emergency Assistance

Emergency Assistance is provided 24/7, 365 days a year by First Assistance.

If **You** are advised that **You** need medical transfer or evacuation to Australia, **You** or a member of **Your** travelling party **MUST** contact First Assistance as soon as possible and obtain their prior approval for any expenses.

If **You** do not contact First Assistance or follow their guidance, **We** will not pay any expenses that would have been avoided or minimised if **You** had followed their guidance.

## 2. Emergency Medical & Hospital Expenses

This cover applies to all plans, excluding Domestic and Domestic Frequent Traveller.

This section is extended to cover your actual and reasonable medical expenses incurred overseas if you need medical treatment because you are diagnosed with COVID-19 by a qualified medical practitioner while on your **Journey**

Please Note: **You** will not have cover under this **Policy** section while travelling on a **Cruise Vessel** or while participating in **Winter Sports Activities** unless **You** purchase the **Cruise pack** or the **Winter Sports Pack**.

Our Emergency Assistance team can be contacted on (+) 61 2 8776 3010.

### We Will Pay

**We** will reimburse:

a) **You** for **Reasonable overseas** emergency medical, and other necessary treatment expenses **You** incur until **You** get back to Australia if you become ill or injured overseas. This cover is subject to the following conditions.

- The medical or Hospital expenses must have been incurred by a claimable event and confirmed in writing by a Medical Adviser.
- You must make every effort to keep Your medical and Hospital expenses to a minimum.
- If **You** are **Hospitalised** or, if **You** are treated as an outpatient and the total cost of the treatment will exceed \$1,000, **You** or a member of **Your** travelling party **MUST** contact First Assistance as soon as possible and obtain their prior approval for any expenses. If **You** do not, **We** will not pay for any expenses that First Assistance would not have approved or arranged had **You** sought their prior approval.
- If First Assistance determines that **You** should return **Home** to Australia for treatment and **You** do not agree to do so, **We** will

pay **You** the amount which **We** determine would cover **Your** medical expenses and/or related costs had **You** agreed to First Assistance's recommendation. **You** will then be responsible for any ongoing or additional costs relating to or **Arising** out of the event for which **You** have claimed.

**We** will only pay for medical expenses incurred within 12 months after an **Illness** first showed itself or the **Injury** happened

### We Will Not Pay

**We** will not pay for expenses:

- a) Incurred in Australia.
- b) **Arising** from **Pre Existing Medical Condition(s)** except as specified under **Pre Existing Medical Condition(s)** – [view here](#).
- c) If **You** do not take the advice of First Assistance.
- d) For more than 2 weeks treatment by a chiropractor, physiotherapist or dentist unless approved by First Assistance.
- e) In respect of medical care that is covered under a **Reciprocal Health Care Agreement**.
- f) **Arising** from **Your** participation in **Winter Sports Activities**, unless **You** have purchased the **Winter Sports Pack**.
- g) **Arising** during **Your** travel on a **Cruise Vessel**, unless **You** have purchased the **Cruise pack**.
- h) **Arising** from any search and rescue.
- i) **Arising** from any COVID-19 testing or vaccinations unless undertaken as part of your **hospitalisation**.
- j) Relating to COVID-19 where the **Policy** was issued after **Your** departure from **Your Home** in Australia.

## 2A. Dental Expenses

This cover applies to all plans, excluding Domestic and Domestic Frequent Traveller.

### We Will Pay

**We** will reimburse the cost of emergency dental treatment up to a maximum payable benefit for dental costs incurred which the treating dentist certifies in writing is for the relief of sudden and acute pain to sound and **Natural Teeth**.

### We Will Not Pay

**We** will not pay for expenses:

- a) Incurred in Australia.
- b) **Arising** from **Pre Existing Medical Condition(s)** except as specified under **Pre Existing Medical Condition(s)** – [view here](#).
- c) Relating to damage to dentures, dental prostheses, bridges or crowns.
- d) Relating to dental treatment involving the use of precious metals or for cosmetic dentistry.
- e) For dental treatment caused by or related to the deterioration and/or decay of **Teeth**, including root canal treatments.
- f) For preventative dental treatment.

## 3. Resumption Of Journey

This cover only applies to Comprehensive, Already **Overseas** and International Frequent Traveller plans.

### We Will Pay

**We** will pay if;

- a) **You** return to **Your Home** from **Overseas** because:
  - During **Your Journey**, a **Relative** dies unexpectedly or is **Hospitalised** following a serious **Injury** or **Illness** (except **Arising** from **Pre Existing Medical Condition(s)**); and
  - It is possible for **Your Journey** to be resumed; and
  - more than 14 days of the period of cover remains, as noted on Your **Certificate Of Insurance**; and
  - You resume **Your Journey** within 30 days of **Your** return to Australia.

**We** will reimburse the cost of the airfares for **You** to return to the place where **Your Journey** was interrupted.

- b) The **Relative** is **Hospitalised** in Australia or New Zealand or dies in Australia or New Zealand after the **Policy** is issued as a result of a **Pre Existing Medical Condition(s)**, and at the time of **Policy** issue **You** were unaware of the likelihood of such **hospitalisation** or death, the most **We** will pay under this sections is:

Per Adult:	\$2,000
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## We Will Not Pay

We will not pay if:

- a) **You** were aware of any reason, before **Your** period of cover commenced, that may cause **Your Journey** to be cancelled, disrupted or delayed.
- b) The death, **Injury** or **Illness** of the **Relative Arises** from a **Pre Existing Medical Condition(s)** except as specified under Section 3 Resumption Of **Journey, What We will pay** b) .
- c) **You** can claim **Your** resumption of **Journey** expenses from anyone else.

## 4. Hospital Cash Allowance

This cover only applies to Comprehensive, Already Overseas and International Frequent Traveller plans.

This section includes cover regardless of whether you are diagnosed with COVID-19.

## We Will Pay

We will pay **You** \$50 for each day **You** are in **Hospital** if **You** are in **Hospital** for more than 48 continuous hours while **You** are **Overseas**.

## We Will Not Pay

We will not pay:

- a) For the first 48 continuous hours **You** are in **Hospital**;
- b) If **You** cannot claim for **Overseas** medical expenses in Section 2 - Emergency Medical & **Hospital** Expenses.

## 5. Repatriation Of Remains

This section includes cover regardless of whether you are diagnosed with COVID-19.

If **You** die as a result of an **Injury** or **Illness** during **Your Journey**, **We** will also pay up to \$15,000 per person for the **Reasonable** cost of either a funeral or cremation **Overseas** and/or returning **Your** remains to **Your Home**.

## 6. Permanent Disability

This cover only applies to Comprehensive, Already **Overseas** and International Frequent Traveller plans.

## We Will Pay

We will pay the permanent disability benefit shown in the **Table Of Benefits** if:

- a) **You** are **Injured** during an **Overseas Journey**; and
- b) Within 12 months of the **Injury** **You** have **Totally Lost** all of the sight in one or both eyes or the total use of a hand or foot at or above the wrist or ankle; and the loss is for at least 12 months and, in **Our** reasonable opinion after consultation with an appropriate medical specialist, will continue indefinitely.

## We Will Not Pay

We will not pay if any claims under this section **Arising** from **Your** participation in **Winter Sports Activities**.

## 7. Loss Of Income

This cover only applies to Comprehensive, Already **Overseas** and International Frequent Traveller plans.

### We Will Pay

**We** will pay \$400 per week for up to 26 weeks if:

- An **Injury** which occurs during an **Overseas Journey** causes **You** to become disabled within 30 days of the **Injury**; and
- The disablement continues for more than 30 days after **Your** return to Australia; and
- As a result of the disablement, **You** cannot do **Your** normal full-time job or suitable alternative work; and
- **You** lose all income.

### We Will Not Pay

**We** will not pay for;

- a) The first 30 days of **Your** disablement from the time **You** return to Australia.
- b) Loss of income of dependants.

## 8. Credit Card Fraud & Replacement

This cover only applies to Comprehensive, Essentials, Already **Overseas** and International Frequent Traveller plans.

### We Will Pay

**We** will reimburse;

- a) The replacement cost (including communication costs) of **Your** credit cards **You** lose or which are stolen from **You** during an **Overseas Journey**.
- b) For any loss resulting from the fraudulent use of **Your** credit card which is lost or stolen during the **Overseas Journey** where the loss is not covered by any guarantee provided by the bank or issuing company.

### We Will Not Pay

**We** will not pay if;

- a) **You** do not report the theft as soon as possible, after **You** becoming aware of the loss to the police or other appropriate authority and **Your** card provider in accordance with the credit card terms and conditions; and
- b) **You** do not provide **Us** with proof that **You** made such a report to the police (or an appropriate authority and (if relevant) **Your** credit card provider as soon as possible after **You** become aware of it. Where possible a written statement from the Police should be provided.



## 8A. Travellers Cheques & Travel Documents Cover

This cover only applies to Comprehensive, Already **Overseas** and International Frequent Traveller plans.

### We Will Pay

**We** will reimburse the replacement costs (including communication costs) of any travel documents, including passports or travellers cheques **You** lose or which are stolen from **You** during an **Overseas Journey** where the loss is not covered by any guarantee provided by the bank or issuing company.

### We Will Not Pay

**We** will not pay if **You** do not report the loss or theft as soon as practicable after becoming aware of the loss, to the police or other appropriate authority and in the instance of travelers cheques, to the issuing bank or company in accordance with the conditions under which **your** travellers cheques were issued.

**You** must provide evidence that you made such report to the relevant persons or appropriate authority. Where possible, a written statement should be provided from whoever you reported the incident to.

## 9. Theft Of Cash

This cover only applies to Comprehensive, Already **Overseas** and International Frequent Traveller plans.

### We Will Pay

**We** will reimburse the value of cash, bank notes, currency notes, postal orders or money orders stolen from **Your** person during an **Overseas Journey**.

### We Will Not Pay

**We** will not pay if the cash, bank notes, current notes, postal orders or money orders were not on **Your** person at the time they were stolen.

**You** MUST report the theft as soon as possible after **You** become aware of the loss, to the police or an officer of the bus line, airline, shipping line or rail authority (or other appropriate authority) on which **You** were travelling when the theft occurred.

**You** must provide **Us** with written evidence that the theft was reported to the police, or an appropriate authority and (if relevant) **Your** credit card provider. Where possible, a written statement should be provided by whoever you reported the incident to.

## 10. Luggage & Personal Effects

Coverage under this section applies to all plans other than the Medical Only plan. In this section:

**‘Accidentally Damaged’** means an unexpected, unintended, unforeseeable event causing damage. The accidental damage must occur while **You** are on **Your Journey**.

**‘Concealed Storage Compartment’** means a boot, trunk, glove box, enclosed centre console, or concealed cargo area of a sedan, station wagon, hatchback, van or motorhome. It also includes overhead storage on a plane, or train you are travelling on.

**‘Electronic & Communication Devices’** means photographic and video equipment, tablets, personal computers and electrical devices of any type. It does not include mobile phones.

**‘Luggage & Personal Effects’** means any personal items owned by **You** and that **You** take with **You** or buy on **Your Journey** and which are designed to be worn or carried about with **You**. This includes items of clothing, personal jewellery, photographic and video equipment or personal computers, or electrical devices or portable equipment. However, it does not mean any cash, bank notes, currency notes, cheques, credit cards, negotiable instruments, **Bicycles**, drones, passports, business samples or items that **You** intend to trade.

**‘Unattended’** means but is not limited to when an item is:

- not on **Your** person or under **Your** control at the time of loss;
- left with someone **You** don’t know;
- left in a place where it can be taken without **Your** knowledge including on the beach or beside the pool when **You** swim;

- left in a place where the item is out of **Your** sight; and/or
- left at a distance where **You** are unable to prevent the item from being unlawfully taken.

**‘Valuables’** means passports, travel documents, jewellery, watches, phones, precious metals or stones or items made from precious metals or stones, furs, binoculars, telescopes, computer games, any kind of photographic equipment, computers, mobile phones, laptops or tablets.

## We Will Pay

**We** will pay the repair cost or value of any **Luggage & Personal Effects** which are stolen or accidentally damaged or are permanently lost during **Your Journey**.

When calculating the amount payable **We** will apply depreciation due to age, wear and tear. The amount of such depreciation will be determined by **Us**. No depreciation will be applied to goods purchased duty free prior to **Your** departure or goods purchased during **Your Journey**.

**We** will not pay more than the original purchase price of any item. **We** may repair or replace any item with an equivalent item at **Our** option, instead of paying **You**.

## Limits & Cover Conditions

Subject to clauses b) and c), the maximum amount **We** will pay for any one individual item is \$750 per one **Journey**, except for Electronics & Communication Devices, which have the following sub-limits.

First lost / stolen / damaged item*#	Maximum payable amount for the first item*#	Maximum payable amount for subsequent lost / stolen / damaged items within the same category*#
<b>Category 1:</b> Personal computer, Video recorder or Camera	\$3,000	\$750
<b>Category 2:</b> Mobile phones & tablets (including PDA's & any items with phone capabilities)	\$1,000	\$750

Pairs or related sets of items are considered as only one item and the appropriate single item limit will be applied. For example, this applies, but is not limited to:

- a camera, lenses (attached or not), tripod and accessories;
- a matched or unmatched set of golf clubs, golf bag and buggy;
- a matching pair of earrings;
- a mobile phone and its accessories ( including sim and SD cards).

In addition to the limit shown in the **Table Of Benefits** for this section, **We** will pay up to a maximum of \$5,000 (or any lower amount which **You** have selected) for all **High Value Items** combined. Depreciation and the

standard item limits shown in section 10 - **Luggage & Personal Effects** do not apply to **High Value Items**. If **You** make a claim for **High Value Items**, **You** must provide **Us** with purchase receipts and/or valuations for the items claimed.

**Luggage & Personal Effects** left in a motor vehicle are only covered during the daylight hours and must have been left in a **Concealed Storage Compartment** of a locked motor vehicle, and forced entry must have been made.

The most **We** will pay if **Your Luggage & Personal Effects** are stolen from a **Concealed Storage Compartment** of an unoccupied locked motor vehicle during daylight hours is \$200 for each item, and \$2,000 in total for all stolen items, even if they are **High Value Items**.

**You** must report any loss, theft or misplacement as soon as possible after becoming aware of the loss, to the police or an office of the bus line, airline, shipping line or rail authority **You** were travelling on when the loss, theft or misplacement occurred.

**You** must provide evidence that **You** made such report. Where possible a written statement from the relevant authority you reported the incident to should be provided.

## We Will Not Pay

- a) For any loss, theft of or damage to jewellery, mobile phones, tablets, cameras, video cameras, personal computers, computer equipment or their accessories which occurs after between the time they are checked in to be held and transported in the cargo hold of any aircraft, ship, train, tram or bus and the time they returned to **You** possession, unless an airline requires **You** to transport these items in the cargo hold and **You** have written confirmation from the airline to this effect.
  - b) For loss, theft of or damage to or of the following:
    - cash, bank notes, currency notes, cheques or negotiable instruments;
    - **Bicycles**;
    - drones;
    - watercraft of any type (other than surfboards);
    - sporting equipment while in use (including surfboards).
  - c) For loss, theft of or damage to **Luggage & Personal Effects** which occurred:
    - while they were left **Unattended** in any place at any time, unless secured in **Your** accommodation (excluding shared accommodation or room such as a hostel, Airbnb or camp grounds), a safe or secure luggage locker;
    - left behind in any accommodation after **You** have checked out;
    - left behind in any form of public or private transport;
    - left **Unattended** in any shared accommodation or room (including but not limited to a hostel room and camp grounds) and not stored in a locked safe or locker;
    - while they were left **Unattended** and visible in a motor vehicle unless they were left in a concealed storage compartment of a locked motor vehicle; and/or
      - while they were left at, during or overnight in a motor vehicle even if they were left in a concealed storage compartment of a locked motor vehicle.
  - d) For loss, theft of or damage to valuables or electronics and communications devices left or stored in an overhead cabin or hold of any aircraft, bus, coach, train or watercraft. This exclusion will not apply if the transport provider has specifically instructed **You** that such items must be placed in the hold and no prior instruction or advice regarding this requirement was available to **You** prior to checking in;
  - e) While they were being sent unaccompanied or under a freight contract;
  - f) As a result of an electrical or mechanical breakdown;
  - g) Because a fragile, brittle or an electronic component is broken or scratched- unless either the damage is to the lens of spectacles, binoculars or photographic or video equipment or was caused by a crash involving a vehicle in which **You** are travelling;
  - h) Any process of cleaning, repair or alteration;
  - i) Ordinary wear and tear, deterioration, atmospheric or weather conditions, insects, rodents or vermin.
  - j) For damage to mobile phone, laptop or tablet screens, or LCD's.
  - k) For water (or any liquid) damage to mobile phones, laptops or tablets.
- If **You** are entitled to be reimbursed by the bus line, airline, shipping line or rail authority **You** were travelling on when the loss, theft, misplacement or damage occurred. However, if **You** are not reimbursed the full amount of **Your** claim, **We** will pay the difference between the amount of **Your** loss and what **You** were reimbursed, up to the limit of **Your** cover (allowing for depreciation due to the age, wear and tear).

## 11. Luggage & Personal Effects Delay Expenses

This cover is only available on Comprehensive, Already Overseas and International Frequent Traveller plans.

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

### We Will Pay

**We** will reimburse **You** if any items of **Your Luggage & Personal Effects** are delayed, misdirected or misplaced by a carrier for more than 12 hours while **You** are **Overseas** and in **Our** reasonable opinion it was **Reasonable** for **You** to purchase essentials items of clothing or other personal items.

**You** must provide **Us** with written confirmation from the carrier who was responsible for **Your Luggage & Personal Effects** that they were delayed, misdirected or misplaced.

**We** will deduct any amount **We** pay **You** under this section from any claim for lost **Luggage & Personal Effects** under section 10 - **Luggage & Personal Effects**.

### We Will Not Pay

**We** will not pay if **You** are entitled to compensation for the amount claimed from the bus line, airline, shipping line or rail authority on which **You** are travelling. However, if **You** are not reimbursed for the full amount of **Your** expenses, **We** will pay the difference, up to the limit of **Your** cover.

## 12. Additional Accommodation & Travel Expenses

This cover is available on all plans other than the Essentials and Medical Only plans. Please Note: **You** will not have cover under this **Policy** section while travelling on a **Cruise Vessel** or while participating in **Winter Sports Activities** unless **You** purchase the **Cruise pack** or the **Winter Sports Pack**.

### We Will Pay

**We** will reimburse;

- a) Any **Reasonable** additional accommodation and travel expenses if **You** cannot travel because of an **Injury** or **Illness** which needs immediate treatment from a **Medical Adviser** who certifies that **You** are unfit to travel.
- b) If **You** shorten **Your Journey** and return to Australia on the written advice of a **Medical Adviser** approved by First Assistance, the **Reasonable** cost of **Your** return to Australia. **We** will only pay the cost of the fare class that **You** had planned to travel at and **You** must take advantage of any pre-arranged return travel to Australia.

If **You** do not have a return ticket booked to Australia before **You** were **Injured** or became **Ill**, **We** will reduce the amount of **Your** claim by the price of the fare to Australia from the place from which **You** planned to return to Australia. The fare will be at the same fare class as the one **You** left Australia on.



c) **Your Reasonable** additional travel and accommodation expenses if a disruption to **Your Journey Arises** from the following reasons:

- **You** lose **Your** passport, travel documents or credit cards or they are stolen.
- **Your** scheduled or connecting transport is cancelled, delayed, shortened or diverted because of one of the following events: strike, riot, hijack, civil unrest, weather, natural disaster or accident affecting **Your** mode of transport.
- **You** unknowingly break any quarantine rule.
- **Your Home** is rendered uninhabitable by fire, explosion, earthquake or flood.

## We Will Not Pay

**We** will not pay if;

- a) Before **Your** period of cover commenced, **You** were aware of any reason that may cause **Your Journey** to be cancelled, disrupted or delayed.
- b) **You** can claim **Your** additional travel and accommodation expenses from anyone else.
- c) **Your** claim related to the financial collapse of any transport, tour or accommodation provider.
- d) Your claim is a result of **You** or **Your Travelling Companion** changing travel plans.
- e) For cancellations, delays, rescheduling or diversions to **Your** scheduled or connecting transport unless it is due to a strike, riot, hijack, civil protest, weather, natural disaster or accident affecting **Your** mode of transport.
- f) The additional out-of-pocket expenses **You** have paid are for, or on behalf of any other person, unless that person is also an insured person names on **Your Certificate Of Insurance**.
- g) Any claims under this section **Arising** from **Your** participation in **Winter Sports Activities**, unless **You** have purchased the **Winter Sports Pack**.
- h) Any claims under this section **Arising** during **Your** travel on a **Cruise Vessel**, unless **You** have purchased the **Cruise Pack**.

## 12A. Family Emergency

This cover is available on all plans other than the Essentials and Medical Only plans. Please Note: **You** will not have cover under this **Policy** section while travelling on a **Cruise Vessel** or while participating in **Winter Sports Activities** unless **You** purchase the **Cruise pack** or the **Winter Sports Pack**.

### We Will Pay

We will pay if;

- a) during **Your Journey**, **Your Travelling Companion** or a **Relative** of either of **You** is aged 84 or under and resides in Australia or New Zealand:
  - dies unexpectedly;
  - is disabled by an **Injury**; or
  - becomes seriously **Ill** and requires **hospitalisation** (other than **Arising** out of a **Pre Existing Medical Condition(s)**).  
**We** will reimburse the **Reasonable** additional cost of **Your** early return **Home** at the fare class at which **You** had planned to travel.
- b) If the **Relative** is **Hospitalised** in Australia or New Zealand or dies in Australia or New Zealand after the **Policy** is issued as a result of a **Pre Existing Medical Condition(s)**, and **You** were unaware of the likelihood of such **hospitalisation** or death at the time the **Policy** was issued, the most **We** will pay under this section is:

Per Adult:	\$2,000
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### We Will Not Pay

We will not pay if;

- a) **You** were aware of any reason that may cause **Your Journey** to be cancelled, disrupted before **Your Journey** commenced.
- b) the death, **Injury** or **Illness** of a **Relative Arises** from a **Pre Existing Medical Condition(s)**, except as specified under section 12A. b) **Family Emergency**.
- c) **You** can claim **Your** additional travel expenses from anyone else.
- d) as a result of **You** or **Your Travelling Companion** changing travel plans.
- e) **Your Travelling Companion** or **Relative** of either of **You** aged 85 or over and do not reside in Australia or New Zealand.
- f) any claims under this section **Arising** from **Your** participation in **Winter Sports Activities**, unless **You** have purchased the **Winter Sports Pack**.
- g) any claims under this section **Arising** during **Your** travel on a **Cruise Vessel**, unless **You** have purchased the **Cruise pack**.

## 12B. Emergency Companion Cover

This cover is available on all plans other than the Essentials and Medical Only plans. Please Note: **You** will not have cover under this **Policy** section while travelling on a **Cruise Vessel** or while participating in **Winter Sports Activities** unless **You** purchase the **Cruise pack** or the **Winter Sports Pack**.

### We Will Pay

We will reimburse;

- a) **Reasonable** additional accommodation and travel expenses **You** incur to remain with **Your Travelling Companion** if he or she cannot continue their **Journey** because of an **Injury** or **Illness** which needs immediate treatment from a **Medical Adviser** who certifies that **Your Travelling Companion** is unfit to travel.
- b) The **Reasonable** accommodation and travel expenses of **Your Travelling Companion** or a **Relative** to travel to **You**, stay near **You** or escort **You**, if **You** are in **Hospital** suffering from a life threatening or other serious condition, or are evacuated for medical reasons. He or she must travel, stay with **You** or escort **You** on the written advice of a **Medical Adviser** and with the prior approval of First Assistance.

### We Will Not Pay

We will not pay if;

- a) before **Your** period of cover commenced, **You** were aware of any reason that may cause **Your Journey** to be cancelled, disrupted or delayed.
- b) **You** can claim **Your** additional travel and accommodation expenses from anyone else.
- c) as a result of **You** or **Your Travelling Companion** changing travel plans.
- d) any claims under this section **Arising** from **Your** participation in **Winter Sports Activities**, unless **You** have purchased the **Winter Sports Pack**.
- e) any claims under this section **Arising** during **Your** travel on a **Cruise Vessel**, unless **You** have purchased the **Cruise pack**.

### 13. Cancellation Fees & Lost Deposits

This cover is available on all plans other than the Medical Only and Already Overseas plans. Please Note: **You** will not have cover under this **Policy** section while travelling on a **Cruise Vessel** or while participating in **Winter Sports Activities** unless **You** purchase the **Cruise pack** or the **Winter Sports Pack**.

#### We Will Pay

- a) **We** will pay cancellation fees and lost deposits for unused travel and accommodation arrangements for which **You** have paid in advance, associated with those named on the Certificate Of Insurance only, that and cannot recover in any other way if **Your Journey** is cancelled or shortened at any time, and through circumstances that **You** did not expect or intend or outside of **Your** control.
- b) **We** will reimburse the travel agent's cancellation fees up to the following amounts where all monies have been paid or the maximum amount of the deposit has been paid at the time of cancellation is as follows:
- |            |         |
|------------|---------|
| Per Adult: | \$1,500 |
|------------|---------|
- c) **We** will not pay more than the level of commission or service fees normally earned by the agent, had **Your Journey** not been cancelled. **You** must provide **Us** with documentary evidence of the travel agent's lost commission or service fees.

- d) **We** will also pay the cancellation cost of tuition or course fees up to a maximum of \$2,000 per person.
- e) **We** will pay the value of any frequent flyer or similar air travel points, loyalty cards points, redeemable vouchers or other similar schemes, **You** used to purchase an airline ticket following cancellation of that airline ticket due to unforeseen circumstances outside of **Your** control, if **You** cannot recover the lost points from any other source.
- The amount **We** pay will be calculated as follows:
- the cost of an equivalent class airline ticket based on the quoted retail price at the time the ticket was issued, less **Your** financial contribution toward the airline ticket;
  - multiplied by the total number of points lost;
  - divided by the number of points used to obtain the ticket.
- d) If **You** cancel or shorten **Your Journey** because a **Relative** is **Hospitalised** in Australia or New Zealand, or dies in Australia or New Zealand after the **Policy** is issued as a result of a **Pre Existing Medical Condition(s)**, **We** will not cover **You** unless **You** were unaware of the likelihood of the **hospitalisation** or death before the **Policy** was issued.

The most **We** will pay under this section is as follows:

Per Adult:	\$2,000
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## We Will Not Pay

- a) **We** will not pay if, before **Your** period of cover commenced, **You** were aware of any reason that may cause **Your Journey** to be cancelled, abandoned or shortened.
- b) **We** will not pay if the cancellation fees or lost deposits **Arise** because of the death, **Injury** or **Illness** of a **Relative** aged 85 and over and/or **Arises** from a **Pre Existing Medical Condition(s)** except as specified under section 13 Cancellation Fees & Lost Deposits.
- d) **You** or **Your Travelling Companion** changing plans.
- e) Any business, financial or contractual obligations. This exclusion does not apply to claims where **You** or **Your Travelling Companion** are made redundant from full time employment in Australia provided **You** or they were not aware that the redundancy was to occur before the **Policy** was issued.
- f) A tour operator or wholesaler being unable to complete arrangements for any tour because there were not enough people to go on the tour.
- g) Cancellation, delays or rescheduling by a bus line, airline, shipping line or rail authority.
- h) The financial collapse of any travel agency, transport, tour or accommodation provider.
- i) The failure of **Your** travel agent to pass on monies to operators or to deliver promised services.
- j) The mechanical breakdown of any means of transport.
- k) An act or threat of terrorism.
- l) The death, **Injury** or **Illness** of any person who resides outside of Australia or New Zealand.
- m) **You** are a full-time permanent employee and **Your** pre-arranged leave is cancelled by **Your** employer unless **You** are a full time member of the Australian Defence Force or of federal, state or territory emergency services.
- n) The breakdown or dissolution of any personal or **Family** relationship.
- o) **Your** participation in **Winter Sports Activities**, unless **You** have purchased the **Winter Sports Pack**.
- p) **You** travelling on a **Cruise Vessel**, unless **You** have purchased the **Cruise Pack**.
- q) We will not reimburse for expenses **You** have paid for on behalf of any other person, unless that person is also an insured person named on **Your Certificate Of Insurance**.

## 14. Disruption Of Journey

This cover applies to all plans other than the Medical Only and Essentials plans.

### We Will Pay

If **You** pre-paid scheduled transport is cancelled, rescheduled or delayed for a reason outside of **Your** control, **We** will pay the disruption of

**Journey** benefit shown in the **Table Of Benefits**, subject to the following:

- a) If **You** are delayed for at least 6 hours, **We** will pay **You** up to \$200 for **Reasonable** additional meal and accommodation expenses at the end of the initial 6-hour period; and up to \$200 for each full 24- hour period that the disruption continues beyond the initial 6- hour delay; and/or
- b) If **You** cannot reach **Your** next destination or connecting transport on time, **We** will pay **You** toward the cost of **Your** pre-paid, unusable, non-recoverable, accommodation, flights, transfers, tours and events expenses.

### We Will Not Pay

**We** will not pay for a disruption to **Your Journey** if:

- a) **You** missed a connecting flight or transport service where the stopover, layover or connection originally scheduled on **Your** itinerary was less than 4 hours.
- b) **You** can claim **Your** additional meal and accommodation or non-refundable out of pocket expenses from anyone else.
- c) The disruption to **Your Journey Arises** from the financial collapse of any travel agency, booking agent, transport, tour or accommodation provider.
- d) The disruption to **Your Journey Arises** from an act or threat of terrorism.
- e) New flights or other transport costs or upgrades for **You** to continue **Your Journey**.



## 15. Alternative Transport Expenses

This cover only applies to the Comprehensive, Already **Overseas** and International Frequent Traveller plans.

### We Will Pay

**We** will pay **Your Reasonable** additional travel expenses to reach wedding, funeral, conference, sporting event or prepaid tour arrangements on time if **Your** scheduled **Overseas** transport is cancelled, delayed, shortened or diverted and that means **You** would not arrive on time.

### We Will Not Pay

**We** will not pay if the cancellation, delay, shortening or diversion of **Your** scheduled transport **Arises** from:

- a) The financial collapse of any transport, tour or accommodation provider.
- b) An act or threat of terrorism.

## 16. Personal Liability

This cover applies to all plans.

### We Will Pay

**We** will cover **Your** legal liability for payment of compensation in respect of:

- death or bodily **Injury**, and/or
- physical loss of, or damage to, property,

Occurring during **Your Journey** which is caused by an accident or a series of accidents attributable to one source or originating cause.

**We** will also reimburse **Your Reasonable** legal expenses for settling or defending the claim made against **You**. **You** must not admit fault or liability for the claim, or incur any legal costs without **Our** prior written approval (which shall not be unreasonably withheld).

### We Will Not Pay

**We** will not pay for any amount **You** become legally liable to pay if the claim **Arises** directly or indirectly from, or is in any way connected with, or is for:

- a) Bodily **Injury** to **You**, **Your Travelling Companion**, or to a **Relative** or employee of either of **You**;
- b) Damage to property belonging to **You**, or in **Your** care or control, or belonging to, or in the care or control of, **Your Relative**, or **Your Travelling Companion**, or an employee of either of **You**;

- c) **Your** ownership, custody, control or use of any firearm or weapon, aerial device, watercraft or motorised vehicle;
- d) **Your** conduct of, or employment in, any business, profession, trade or occupation;
- e) Any loss, damage or expenses which are covered or should have been covered under a statutory or compulsory insurance **Policy**, statutory or compulsory insurance or compensation scheme or fund, or under workers compensation legislation, an industrial award or agreement, or accident compensation legislation;
- f) Any fine or penalty, or aggravated punitive, exemplary or liquidated damages;
- g) Disease that is transmitted to **You** or by **You**;
- h) Any relief or recovery other than monetary amounts;
- i) A Contract that imposes a liability on **You** which **You** would not otherwise have;
- j) Assault and/or battery committed by **You** or at **Your** direction; or
- k) Conduct intended to cause bodily **Injury**, property damage or liability with reckless disregard for the consequences of **You** or any person acting with **Your** knowledge, consent or connivance.
- l) Any claims under this section **Arising** from **Your** participation in **Winter Sports Activities**.

## 17. Domestic Pets

This cover is only available on the Comprehensive, Already **Overseas** and International Frequent Traveller plans.

### We Will Pay

**We** will reimburse **You** up to:

- a) \$25 for each 24 hour period for additional kennel, boarding or cattery fees for domestic dogs and cats owned by **You** if **You** are delayed **Overseas** beyond **Your** original return date due to an event covered under this **Policy**.
- b) \$400 if **Your** pet suffers an **Injury** during **Your Overseas Journey** and requires veterinary treatment, provided that at the time of the **Injury**, **You** pet was in the care of a **Relative** or boarding kennel.

### We Will Not Pay

**We** will not pay any kennel or boarding cattery fees incurred outside of Australia.

## 18. Domestic Services

This cover is only available on the Comprehensive, Already **Overseas** and International Frequent Traveller plans.

### We Will Pay

If **You** become disabled as a result of an **Injury** which occurs during an **Overseas Journey** and the disablement continues after **Your** return to Australia **We** will reimburse **You** up to \$50 per day for the cost of housekeeping services that **You** are unable to perform yourself.

### We Will Not Pay

**We** will not pay **You** if **You** do not have a medical certificate confirming disablement and verifying the need for the housekeeping services while **You** are disabled.

## 19. Rental Vehicle Insurance Excess

This cover is available on all plans other than the Essential and Medical Only plans.

Cover is only provided under this benefit if **Your Rental Vehicle** agreement specifies an **Excess**, deductible or damage liability fee that is payable in the event the **Rental Vehicle** is damaged or stolen while in **Your** custody and whilst in **Your** control. This section does not cover **Your** liability to pay an **Excess** in respect of tyres, windscreens, roof and underbody if they are not covered by the protection provided by the rental company under the **Rental Vehicle** agreement to which the **Excess**, deductible or damage liability fees applies.

### We Will Pay

**We** will reimburse:

- a) If, during **Your** period of cover, a **Rental Vehicle** **You** have rented from a rental company or agency is involved in a motor vehicle accident while **You** are driving it or damaged or stolen while in **Your** custody, **We** will pay the lesser of:
  - the motor vehicle insurance **Excess** or the liability fee **You** are required to pay under a damage waiver; and
  - the cost of repair of the property damage for which **You** are liable.

**You** must provide a copy of the following documents:

- **Your Rental Vehicle** agreement;
- the incident report of the accident provided to or made by the rental company;

- an itemised list of the value of the damage;
  - the repair account; and
  - a written demand from the rental company or agency for the **Excess**, liability fee or property damage.
- b) This cover does not replace **Rental Vehicle** insurance and only covers the **Excess** component up to the applicable benefit limit.
- c) **We** will also pay up to \$500 for the cost of returning **Your Rental Vehicle** to the nearest depot if **Your** attending **Medical Adviser** certifies in writing that **You** are unfit to do so during **Your Journey**.
- e) The claim is for administrative charges or fees of the rental company that are not a component of the **Excess**, deductible or damage liability fee specified in **Your Rental Vehicle** agreement (such as loss of use).

The maximum amount **We** will pay for all claims combined under this section is shown in the **Table Of Benefits** for the plan **You** have selected. The amount applies to the total of all claims combined, regardless of the number of persons the claims relate to.

## We Will Not Pay

**We** will not pay a claim involving the theft of, or damage to, **Your Rental Vehicle** if any claim **Arises** from **You** operating or using the **Rental Vehicle**:

- a) In violation of the rental agreement;
- b) While affected by alcohol or any other drug in a way that is against a law of the place **You** are in; or
- c) Without licence for the purpose for which **You** were using it.
- d) If **You** have purchased **Your Policy** after **You** have left **Your Departure Point**; or

## 20. Pre-Paid Shore Excursions Cancellation

**You** only have this cover if **You** have purchased the **Cruise Pack** which is an option available for all plans other than Essentials and Medical Only.

### We Will Pay

If **You** cannot participate in **Your** pre-paid shore excursion(s) due to **Your** confinement in **Your** cabin or in the **Cruise Vessel's** medical centre as a result of circumstances outside of **Your** control, **We** will pay **You**, any cancellation fees **You** incur and **Your** lost deposits.

## 21. Missed Cruise Departure

**You** only have this cover if **You** purchased the **Cruise pack** which is an option available for all plans other than Essentials and Medical Only.

### We Will Pay

**We** will pay up to the amount shown in the **Table Of Benefits** for **Your Reasonable** and necessary additional accommodation and travelling expenses to get **You** to the nearest port in **Your** itinerary, incurred after **You** leave **Your Home** in Australia, if **You** missed the scheduled departure of **Your** pre booked cruise due to:

- a) An accident involving **Your** means of transport provided **You** have written confirmation from appropriate authority stating full details of the accident;
- b) The cancellation, delay or diversion of **Your** scheduled transport caused by riot, strike or civil commotion;
- c) Weather conditions;

- d) Natural disaster(s).

### We Will Not Pay

**We** will not pay if;

- a) **You** can claim **Your** additional travel expenses from anyone else.
- b) Cancellations, delays or rescheduling caused by mechanical breakdown or operational requirements of the airline, bus line or rail authority.

## 22. Cabin Confinement/Loss of Enjoyment

**You** only have this cover if **You** have purchased the **Cruise Pack** which is an option available for all plans other than Essentials and Medical Only.

### We Will Pay

If as a result of **Injury** or **Illness** during **Your Journey**, **You** are confined to bed in **Your** cabin or the **Cruise Vessel's** medical centre for a continuous period of more than 48 hours then **We** will pay **You** \$150 for each 24 hour that **You** continue to be confined.

### We Will Not Pay

- a) For the first 48 continuous hours.
- b) If **You** cannot claim for emergency medical expenses in section 2 - Emergency Medical and **Hospital** Expenses.

## 23. Missed Port Cover

**You** only have this cover if **You** have purchased the **Cruise Pack** which is an option available for all plans other than Essentials and Medical Only.

### We Will Pay

**We** will pay a \$250.00 for each scheduled port **Your Cruise Vessel** never docks at during **Your Journey**, which is due to weather conditions or natural disaster.

### We Will Not Pay

**We** will not pay if:

- a) **You** cannot get a written statement from the cruise company or relevant authority confirming the reason for the missed port;
- b) **You** can make a claim on this benefit on anyone else.

## 24. Formal Attire Cover

**You** only have this cover if **You** have purchased the **Cruise Pack** which is an option available for all plans other than Essentials and Medical Only.

### We Will Pay

If during **Your Journey**, **Your Formal Attire** is stolen, damaged or permanently lost **We** will pay the lesser of:

- The repair cost; or

- The original purchase price of **Formal Attire**.
- **We** have the option to repair or reimburse **You** the original purchase price of **Formal Attire**.

### We Will Not Pay

**We** will not pay for:

- a) For loss, theft of or damage to **Formal Attire** which occurred whilst:
  - left **Unattended** in any place at any time, unless secured in **Your** accommodation (excluding shared accommodation or room such as a hostel, Airbnb or camp grounds), a safe or secure luggage locker;
  - left behind in any accommodation after **You** have checked out or **Cruise Vessel** cabin after **You** have disembarked;
  - left behind in any form of public or private transport;
  - left **Unattended** in any shared accommodation or room (including but not limited to a hostel room and camp grounds) and not stored in a locked safe or locker;
  - left **Unattended** and visible in a motor vehicle unless they were left in a concealed storage compartment of a locked motor vehicle;
  - left at, during or overnight in a motor vehicle even if they were left in a concealed storage compartment of a locked motor vehicle; and/or
  - being sent unaccompanied or under a freight contract.



b) The loss or damage **Arising** from:

- any process of cleaning, repair or alteration;
- ordinary wear and tear, deterioration, atmospheric or weather conditions, insects, rodents or vermin.

**You** MUST report any loss, theft or misplacement as soon as possible after **You** become aware of the loss, to the police or an office of the bus line, airline, shipping line or rail authority **You** were travelling on when the loss, theft or misplacement occurred. **You** must prove that **You** made such report and where possible, provide **Us** with a written statement from whoever **You** reported it to.

## 25. Formal Attire Delay Allowance

**You** only have this cover if **You** have purchased the **Cruise Pack** which is an option available for all plans other than Essentials and Medical Only.

### We Will Pay

**We** will reimburse **You** if **Your Formal Attire** is delayed, misdirected or misplaced while on the outward portion of **Your Journey** for more than 12 hours from the time **You** boarded the **Cruise Vessel** and in **Our** reasonable opinion, it was **Reasonable** for **You** to purchase or hire alternative **Formal Attire**. **You** must provide **Us** with written confirmation from the carrier who was responsible for **Your Luggage & Personal Effects** that they were delayed, misdirected or misplaced.

**We** will deduct any amount **We** pay **You** under this section from any claim for lost **Luggage & Personal Effects** under section 24 - **Formal Attire** Cover.

### We Will Not Pay

If **You** are entitled to be reimbursed by the bus line, airline, shipping line or rail authority **You** were travelling on when the misplacement, delay or misdirection has occurred. However, if **You** are not reimbursed the full amount of **Your** claim, **We** will pay the difference between the amount of **Your** loss and what **You** were reimbursed, up to the limit of **Your** cover (allowing for depreciation due to the age, wear and tear).

## 26. Emergency Rescue

**You** only have this cover if **You** have purchased the **Winter Sports Pack** which is an option available for all plans other than Essentials and Medical Only.

### We Will Pay

First Assistance will arrange for **Your** medical transfer or evacuation if **You** must be transported to the nearest **Hospital** for emergency medical treatment if **You** suffer an **Injury** while participating in **Winter Sports Activities**.

### We Will Not Pay

- a) **We** will not pay for any claims **Arising** from activities not defined as **Winter Sports Activities**.
- b) **We** will not pay for any claims **Arising** outside the period 15th December to 31st March in Northern Hemisphere resorts and 15th June to 30th September in Southern Hemisphere resorts. This exclusion will not apply to those resorts which are open outside these time periods and have sufficient snow for **Winter Sports Activities**.
- c) **We** will not pay for any search and rescue.

## 27. Ski Pack

**You** only have this cover if **You** have purchased the **Winter Sports Pack** which is an option available for all plans other than Essentials and Medical Only.

### We Will Pay

If, as a result of **Your Injury** or **Illness** during **Your Journey**, **You** are unable to utilise the full duration of **Your** pre--booked and pre--paid ski passes, ski hire, tuition fees or lift passes, **We** will reimburse **You** the irrecoverable cost of the unused portion for each insured person.

**You** must obtain a medical certificate from a **Medical Adviser** in support of **Your** claim for **Your Injury** or **Illness**.

### We Will Not Pay

**We** will not pay;

- a) for any claims **Arising** from activities not defined as **Winter Sports Activities**.
- b) for any claims **Arising** outside the period 15th December to 31st March in Northern Hemisphere resorts and 15th June to 30th September in Southern Hemisphere resorts. This exclusion will not apply to those resorts which are open outside these time periods and have sufficient snow for **Winter Sports Activities**.

## 28. Piste Closure

**You** only have this cover if **You** have purchased the **Winter Sports Pack** which is an option available for all plans other than Essentials and Medical Only.

### We Will Pay

**We** will pay up to \$100 per 24 hour period if, as a result of not enough snow, bad weather or power failure in **Your** pre booked holiday resort, all lift systems are closed for more than 24 hours.

**We** will pay for either;

- a) the cost of transport to the nearest resort; or,
- b) the cost of additional ski passes.

### We Will Not Pay

**We** will not pay for any claims **Arising** outside the period 15th December to 31st March in Northern Hemisphere resorts and 15th June to 30th September in Southern Hemisphere resorts. This exclusion will not apply to those resorts which are open outside these time periods and have sufficient snow for **Winter Sports Activities**.

## 29. Bad Weather And Avalanche Closure

**You** only have this cover if **You** have purchased the **Winter Sports Pack** which is an option available for all plans other than Essentials and Medical Only.

### We Will Pay

**We** will pay the **Reasonable** extra travel and accommodation expenses that **You** need to pay if **Your** pre--booked outward or return **Journey** is delayed for more than 12 hours from **Your** scheduled departure time because of an avalanche or bad weather.

### We Will Not Pay

**We** will not pay;

- a) for any claims **Arising** from activities not defined as a **Winter Sports Activities**.
- b) to the extent permitted by law **We** will not pay unless **You** obtain a written statement from the appropriate authority confirming that the reason for the delay was related to either an avalanche or bad weather, and how long it lasted.
- c) for any claims **Arising** outside the period 15th December to 31st March in Northern Hemisphere resorts and 15th June to 30th September in Southern Hemisphere resorts. This exclusion will not apply to those resorts which are open outside these time periods and have sufficient snow for **Winter Sports Activities**.

### 30. Winter Sports Equipment Hire

**You** only have this cover if **You** have purchased the **Winter Sports Pack** which is an option available for all plans other than Essentials and Medical Only.

#### We Will Pay

**We** will pay for the costs of hiring alternative **Winter Sports Equipment** following:

- a) Accidental loss, theft of, or damage to, **Your Winter Sports Equipment** for which a claim has been accepted by **Us** under section 10- **Luggage & Personal Effects**;
- b) The misdirection or delay, for a period of more than 24 hours, of **Winter Sports Equipment** owned by **You**.

#### We Will Not Pay

**We** will not pay for any claims **Arising** from activities that are not a winter sports activity.

### 31. Winter Sports Equipment Excess

**You** only have this cover if **You** have purchased the **Winter Sports Pack** which is an option available for all plans other than Essentials and Medical Only.

#### We Will Pay

- a) **We** will reimburse the **Winter Sports Equipment** hire insurance **Excess** or the cost of repairing the equipment, whichever is the lesser, if the **Winter Sports Equipment You** have hired is damaged or stolen due to an event covered under this **Policy**.
- b) This cover does not take the place of the **Winter Sports Equipment** hire insurance and only provides cover for the **Excess** component up to the applicable benefit limit for the plan **You** have selected.
- c) **We** will also pay up to \$1,000 for the cost of returning **Your** winter sports hire equipment to the nearest affiliated snow ski hire equipment supplier if **Your** attending **Medical Adviser** certifies in writing that **You** are unfit to do so during **Your Journey**.

## Pre Existing Medical Condition(s)

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This **Policy** only covers unforeseen medical events. Many **Pre Existing Medical Condition(s)** are not covered.

This section explains which **Pre Existing Medical Condition(s)** are covered automatically and how **You** can purchase cover for **Pre Existing Medical Condition(s)** that are not automatically covered.

### A Pre Existing Medical Condition is

- 1) Any medical, dental, physical or mental condition, defect, virus, disease or **Illness** of which in the 12 months prior to issue of the **Certificate Of Insurance**, **You** were aware or should reasonably have been aware of (due to symptoms a **Reasonable** person in the circumstances would be expected to be aware of) and for which **You** (being all persons insured under the **Policy** and set out in the **Certificate Of Insurance**), **Your Relative** or **Travelling Companion** have:
  - been diagnosed or had symptoms (even if a condition has not yet been diagnosed); or;
  - have been prescribed medication;
  - received (or are waiting for) medical treatment, including any kind of surgery;
  - received (or are waiting for) tests, investigations or specialist consultation
  - received or been advised to attend a follow-up consultation; and/or
  - had surgery or attended a Hospital or clinic (as an outpatient or inpatient).

And/or:

- 2) Any of the below medical conditions which **You, Your Relative** or **Travelling Companion** had at any time in **Your** life.
  - Heart conditions, including any cardiovascular or coronary heart disease or any condition related to **Your** blood or heart vessels;
  - Any condition relating to **Your** respiratory system, e.g. infections, and **Chronic** diseases;
  - Kidney conditions and kidney disease;
  - Any physical or mental disability;
  - Any recurring **Illness**;
  - Conditions involving the neck or back;
  - Any type of cancer;
  - Reduced or deficient immune system; and/or
  - A terminal **Illness**

However, it does not include an automatically covered condition.

### Relevant Time in respect of:

- a) Single trip policies means the time of issue of the **Policy**.
- b) Frequent Traveller policies means the first time at which any part of the relevant trip is paid for or the time at which the **Policy** is issued, whichever occurs last.

This above definition applies to **You, Your Travelling Companion**, and a **Relative** or any other person.

We treat **Pre Existing Medical Condition(s)** in one of two ways:

- a) Automatically covered;
- b) Medical Assessment.

## Automatically Covered

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The **Pre Existing Medical Condition(s)** listed in the table below are automatically covered under this **Policy** without assessment or additional charge, provided:

- a) the condition has been stable for more than 12 months; and
- b) there is no planned surgery, treatment or specialist review; and
- c) **You** have not attended **Hospital** for treatment for the condition in the past 12 months.

This **Policy** does not cover any routine treatment or management of **Your** approved **Pre Existing Medical Condition(s)**; for example, blood test and prescription renewals. If **Your** condition is listed in the table, but **You** do not meet these criteria for automatic cover, **You** MUST apply for cover - see Medical Assessment below.



1	Acne
2	Allergies, limited to rhinitis, <b>Chronic</b> sinusitis, eczema, food intolerance, hay fever.
3	<p>Asthma – provided that <b>You</b>:</p> <ul style="list-style-type: none"> <li>➤ have no other lung disease; and</li> <li>➤ are less than 60 years of age at the date of issue of the <b>Certificate Of Insurance</b>.</li> </ul> <p>If <b>You</b> have asthma and do not meet the criteria for automatic cover, <b>You</b> MUST declare by doing a medical assessment.</p>
4	Bell's palsy
5	Benign positional vertigo
6	Bunions
7	Carpal tunnel syndrome
8	Cataracts
9	Coeliac disease (gluten intolerance)
10	Congenital blindness
11	Congenital deafness
12	Dry eye syndrome
13	<p>Diabetes mellitus (Type I &amp; Type II) – provided that <b>You</b>:</p> <ul style="list-style-type: none"> <li>➤ were diagnosed over 12 months ago, and</li> <li>➤ have no eye, kidney, nerve or vascular <b>Complications</b>, and</li> <li>➤ do not also suffer from a known cardiovascular disease,</li> <li>➤ and are under 50 years of age at the date of <b>Policy</b> issue</li> </ul>
14	Epilepsy – provided <b>You</b> have not had any seizures in the past 12 months, and <b>You</b> are on no more than one anticonvulsant medication.
15	Folate deficiency

16	Gastric reflux (heartburn, indigestion)
17	Goitre
18	Glaucoma (increased ocular pressure)
19	Graves' disease
20	Hiatus hernia
21	Hypercholesterolaemia (high cholesterol) - provided <b>You</b> do not also suffer from a known cardiovascular disease.
22	Hyperlipidaemia (high blood lipids) – provided <b>You</b> do not also suffer from a known cardiovascular disease.
23	Hypothyroidism (underactive thyroid), including Hashimoto's disease.
24	Hypertension (High Blood Pressure) – provided <b>You</b> do not also suffer from a known cardiovascular disease and <b>Your</b> most recent reading is less than 165/95.
25	Impaired glucose tolerance (glucose intolerance, pre-diabetes) if you are under 50 years of age at the date of <b>Policy</b> issue.
26	Incontinence
27	Insulin resistance
28	Menopause– provided <b>You</b> do not have osteoporosis.
29	Nocturnal cramps
30	Pernicious anaemia
31	Raynaud's disease
32	Sleep apnoea
33	Trigeminal neuralgia
34	Trigger finger
35	Vitamin B12 deficiency

## Medical Assessment

**You** MUST declare any other **Pre Existing Medical Condition(s)** that is not described above, even if **You** no longer receive treatment for them and **You** do not require any additional cover.

## How To Tell Us About Or Apply For Cover For A Pre Existing Medical Condition

To add a **Pre Existing Medical Condition(s)**, **You** MUST let **Us** know at the time **You** buy **Your Policy** and complete medical assessment. **We** will ask **You** some questions about **Your** health and then determine whether **We** can offer **You** cover and if so, on what terms.

Depending on **Your** condition, **We** may decline to cover **You**, limit the amount of cover, exclude specific medical condition and/or agree to provide cover for an additional premium.

Each condition that **We** agree to cover will be noted on **Your Certificate Of Insurance** after **You** pay any applicable additional premium. **You** are not covered unless the condition is noted on **Your Certificate Of Insurance**.

**We** will only pay for treatment that was not expected at the time **We** agreed to insure **You**.

**We** regret that **We** cannot offer cover for **Pre Existing Medical Condition(s)** for Already **Overseas** plan, except for automatically covered conditions, if the criteria is met.

## Pregnancy

### We Will Pay

**You** are covered under the **Policy** while **You** are pregnant;

- a) for single foetus pregnancies - up to and inclusive of the 24th week of gestation.
- b) for multiple pregnancies - up to and inclusive of the 19th week of gestation.

If **You** have had **Complications** of this pregnancy **You** MUST complete medical assessment.

**We** will assess **Your** application and decide whether and to what extent **We** can offer **You** insurance for **Your** pregnancy and/or **Journey**. Depending on the circumstances, **We** may decline to cover **You**, limit **Your** cover and/or agree to provide cover for an additional premium. Any limitation on cover will be noted on **Your Certificate Of Insurance**.

If **You** have not told **Us** about the circumstances of **Your** pregnancy when **You** were required to do so, **We** may refuse **Your** claim or reduce it to the amount **We** would have paid had **You** given **Us** the required information.

### We Will Not Pay

In no circumstances will **We** pay any medical expenses for:

- a) Regular antenatal care;
- b) Childbirth at any gestation; or
- c) Care of the newborn child.

## General Exclusions

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### Exclusions That Apply To All Sections Of The **Policy**

To the extent permissible by law, **We** will not pay if:

1. **You** do not act in a responsible way to protect yourself and **Your** property and to avoid making a claim.
2. **You** do not do everything **You** can to reduce **Your** loss as much as possible.
3. **Your** losses are not directly associated with the incident that caused **You** to claim under the **Policy**. For example, **You** will not be covered for loss of enjoyment, except as provided under section 22 - Cabin Confinement/ Loss of enjoyment.
4. At the time **You** purchase the **Policy**, **You** were aware of something that would give rise to **You** making a claim under this **Policy**.
5. **Your** claim is for a loss which is recoverable by compensation under any workers compensation or transport accident laws, government sponsored fund, plan, or medical benefit scheme, or any other similar type of legislation required to be effected by, or under, a law.
6. **Your** claim is for any cost which **You** would have been expected to pay had the reason for the claim not occurred (i.e. cost of food which **You** would paid for in any case).
7. **Your** claim **Arises** from errors or omissions in any booking arrangements or failure to obtain the relevant visa, passport or travel documents.
8. **We** will not pay any cover, claim or benefit under the **Policy** where doing so would breach any sanction, prohibition or other restrictions imposed by law or regulation on **Us** or the **Insurer**.
9. **Your** claim **Arises** because **You** act illegally or break any government prohibition or regulation including visa requirements.
10. **Your** claim **Arises** from a government authority confiscating, detaining or destroying anything.
11. **Your** claim **Arises** from being in control of a motorcycle without a current Australian motorcycle licence or **You** are a passenger travelling on a motorcycle that is in the control of a person who does not hold a current motorcycle licence valid for the country **You** are travelling in.  
  
In this clause, motorcycle means any two-wheeled or three-wheeled motor vehicle with an engine displacement greater than 50cc.
12. **Your** claim **Arises** from being in control of a moped or scooter without a current Australian motorcycle or drivers licence or **You** are a passenger travelling on a moped or scooter that is in the control of a person who does not hold a current motorcycle or drivers licence valid for the country **You** are travelling in.  
  
In this clause, moped or scooter means any two-wheeled or three-wheeled motor vehicle with an engine displacement of less than 50 cc. It does not mean or include any dirt bikes.

13. If **Your claim Arises** from, is related to, or associated with an actual or likely **epidemic** or **pandemic** or outbreak of a contagious disease or any derivative or mutation of such viruses, except for the cover which is in place for [Coronavirus related claims](#) (meaning COVID-19 or SARS-COV-2 or any mutation or variation of these) as [specified here](#).

**'Epidemic'** means "a fast-spreading contagious disease or **Illness** that a recognised public health authority declares, defines, detects or states or otherwise classifies as an epidemic.

**'Pandemic'** means "an outbreak of a disease, illness or bodily condition that the World Health Organization (WHO) or any international or national authority or organisation declares, defines, detects, states or otherwise classifies as a pandemic.

Please refer to who.int and smartraveller.gov.au for further information on **Epidemics** and **Pandemics**.

14. **Your claim Arises** from, is related to, or associated with travelling to, planning to travel to, or choosing to remain in a country, region or part of a country for which;
- (a) (i) an advice or warning has been released by the Australian Government Department of Foreign Affairs and Trade (see [smartraveller.gov.au](https://smartraveller.gov.au)) or any other government or official body, and
  - (ii) the advice or warning risk rating is 'Do Not Travel' or advises against specific transport arrangements or participation in specific events or activities, unless a Government exemption from the Department of Home Affairs has been granted; or
  - (b) a reasonable person in your position should be aware of the existence of circumstances (including, but not limited to circumstances referred to in this section (a)(i) and (ii)) that may affect your travel; and
  - (c) you did not take appropriate action to avoid or minimize any potential claim under your Policy (including any delay of travel to the country or part of the country referred to in the relevant advice(s) or warnings).

The circumstances to which this exclusion applies, include but are not limited to strike, riot, weather event, civil protest or contagious disease (including an **Epidemic** or **Pandemic**)

15. **Your claim Arises** from, is related to, or associated with mandatory quarantine, lockdown, curfew, or isolation orders required such as (but not limited to) border restrictions between states, countries, or regions, or if the government bans travel or imposes travel permit requirements before or during your **Trip**.

16. **Your claim Arises** from biological and/or chemical materials, substances, compounds or the like used directly or indirectly for the purpose to harm or to destroy human life and/or create public fear.
17. **Your claim Arises** from any act of war, whether war is declared or not or from any rebellion, revolution, insurrection or taking of power by the military.
18. **Your claim Arises** from a nuclear reaction or contamination from nuclear weapons or radioactivity.
19. **Your claim Arises** from, is related to or associated with any **Pre Existing Medical Condition(s)**, except as provided under the **Pre Existing Medical Condition(s)** section ([view here](#)) or in section 12A) **Family Emergency**, 3) **Resumption Of Journey** or **Cancellation Fees And Lost Deposits**.
20. **Your claim Arises** from, is related to or associated with pregnancy, childbirth or related **Complications**, or if **You** are not yet pregnant, except as provided under the **Pregnancy** section ([view here](#)).
21. **Your claim** is in respect of travel booked or undertaken against the advice of any **Medical Adviser**.
22. **You** arrange to travel when **You** know of circumstances that may lead to **Your Journey** being disrupted or cancelled.
23. **Your claim Arises** from, is related to, or associated with, elective surgery or treatment.
24. **Your claim Arises** from, is related to, or associated with, any routine treatment or management of **Your** approved **Pre Existing Medical Condition(s)**; for example, blood tests and prescription renewals.
25. **Your claim Arises**, or is a consequence of **Complications** from medical, surgical or dental procedures or treatments that are not for an **Injury** or **Illness** that would otherwise be covered by this **Policy**.
26. **Your claim Arising** from, related to or associated with, planned surgery, treatment, investigation or procedure, or for any yet to be diagnosed conditions.
27. **Your claim** involves a **Hospital** where **You** are being treated for addiction to drugs or alcohol, or **You** are using it as a nursing, convalescent or rehabilitation place.
28. **Your claim** involves the cost of medication in use at the time the **Journey** began or the cost for maintaining a course of treatment **You** were on prior to the **Journey**.
29. **Your claim Arises** from suicide or attempted suicide, physical, mental or emotional exhaustion, including but not limited to jet lag.
30. **Your claim Arises** from a sexually transmitted disease.
31. **You** were under the influence of any intoxicating liquor or drugs except a drug prescribed to **You** by a **Medical Adviser**, and taken in accordance with their instructions.
32. **You** received private **Hospital** or medical treatment where public funded services or care is available in Australia or under any reciprocal healthcare agreement between the government of Australia and the government of any other country unless **We** or First Assistance agreed in advance to the private treatment.
33. **Your claim Arises** from or is any way related to the death or **hospitalisation** of any person aged 85 years and over, regardless of the country in which they may live.

34. **Your claim Arises from You or Your Travelling Companion** participating in professional sport of any kind.
35. **Your claim Arises** because **You** hunt, race (other than on foot), engage in sailing more than 10 nautical miles off any land mass, play polo, compete in rugby league or rugby union, go quad biking, go mountaineering or rock climbing using ropes or climbing equipment, go hiking or trekking within an altitude limit above 3500 metres (i.e. Everest base camp), or from professional sport of any kind, or from parachuting or hang gliding.
36. **Your claim Arises** because **You** dive underwater using an artificial breathing apparatus, unless **You** hold an open water diving licence recognised in Australia or **You** were diving under licensed instruction.
37. **Your claim Arises** from travel in any air supported device other than as a passenger in a fully licensed aircraft operated by an airline or charter company. This exclusion does not apply to regulated or licensed ballooning.

## General Conditions

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The following conditions apply to all sections.

### Other Insurance

If any loss, damage or liability covered under this **Policy** is covered by other insurance, **You** must give **Us** details. If **You** are paid the full amount of **Your** claim under one **Policy**, **You** cannot make a claim under another **Policy**.

If **You** are not paid the full amount of **Your** claim under another **Policy**, **We** will make up the difference provided **Your** claim is covered by the **Policy**. **We** may seek contribution from the other **Insurer**. If **We** do, **You** must give **Us** any information or assistance **We** reasonably need to do so.

### Subrogation

If **You** are aware of any third party that is or may be liable for **Your** loss or damage, **You** must tell **Us** about them.

**We** are entitled to and may (at **Our** discretion) seek to recover compensation from any party in respect of anything covered by this **Policy**, including bringing legal proceedings. **We** are entitled to control and settle any such recovery action.

**You** must provide any assistance and permit all acts and things that **We** reasonably require to enable **Us** to pursue any such recovery actions even if **We** have not yet paid **Your** claim or the amount **We** pay does not fully compensate **You** for **Your** loss or damage.

## Recovery

Any money **We** recover from a third party under **Our** right of subrogation will be applied in the following order:

1. To **Us** for administration and legal costs **Arising** from the recovery and for an amount equal to the amount **We** pay **You** under the **Policy**;
2. To **You** for **Your** uninsured loss (less **Your Excess**)
3. To **You** for **Your Excess**.

Once **We** have paid **Your** total loss, **We** will keep any money left over.

If **We** have paid the full amount of **Your** loss and **You** later receive a payment from someone else for that loss, **You** must pay that money to **Us** (but only up to the amount **We** paid **You**).

If **We** pay for lost or damaged property which is later recovered or replaced by a third party, **You** must repay **Us** the amount **We** paid for that property.

## Business Travellers - GST

If **You** are entitled to claim an input tax credit in respect of **Your** premium, **You** must inform **Us** of the amount of that input tax credit (as a percentage) at the time **You** first make a claim. If **You** fail to do so, **You** may incur liability for GST when **We** pay **Your** claim.

If **You** are entitled to claim an input tax credit in respect of a cost for which a claim is made, or would be entitled to an input tax credit if **You** were to incur the relevant cost (i.e. replacing a lost or stolen item), the



amount **We** would otherwise pay will be reduced by the amount of that input tax credit.

## Jurisdiction And Choice Of Law

This **Policy** is governed by laws of New South Wales, Australia. If **You** purchase the **Policy**, **You** agree to submit to the exclusive jurisdiction of the Courts of that State.

### The Insurer Agrees That:

- In the event of a dispute **Arising** under this **Policy** it will at **Your** request, submit to the jurisdiction of any competent Court in the Commonwealth of Australia. Such dispute shall be determined in accordance with the law and practice applicable in such Court;
- Any summons notice or process to be served on the **Insurer** may be served on Lloyd's General Representative in Australia, Suite 1603/1 Macquarie PI, Sydney NSW 2000, who has authority to accept service and to enter an appearance on the **Insurer's** behalf, and who is directed at **Your** request to give a written undertaking that he will enter an appearance on the **Insurer's** behalf;
- If a suit is instituted against any one of the participating underwriters, all underwriters participating in this insurance will abide by the final decision of such Court or any competent Appellate Court.

## Several Liability

When Certain Underwriters at Lloyd's underwrite this **Policy**, it means that the obligations of each subscribing **Insurer** under the contract of insurance is several and not joint and are limited solely to the extent of their individual subscriptions. The subscribing Insurers are not responsible for the subscription of any co-subscribing **Insurer** who for any reason does not satisfy all or part of its obligations.

# Making A Claim

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This part of the PDS explains what **You** need to do if **You** need to make a claim or want to make a complaint.

## First Things First

If an event occurs which **You** think might be covered by the **Policy**, **You** need to take some action right away:

1. for claims under section 1 - **Overseas** Emergency Medical Assistance, section 2 - **Overseas** Emergency Medical and **Hospital** Expenses, and section 26 - Emergency Rescue, notify First Assistance as quickly as possible. [First Assistance's contact details are on the back cover](#). In some cases, **We** may refuse to pay **Your** claim if **You** don't notify them.
2. **You** must not admit to anyone that **You** are at fault for any event. **You** must not offer or promise to pay any money to anyone or become involved in litigation, without **Our** approval.
3. report loss or theft of **Your Luggage & Personal Effects** to the police as soon as possible. You must also prove that You made such a report and where possible, obtain written evidence of **Your** report.
4. report damage or misplacement of **Your Luggage & Personal Effects** caused by an airline or other operator or accommodation provider to an appropriate official and where possible, obtain a written report, including of any settlement offer they make.
5. do everything **You** can to reduce **Your** loss as much as possible.

6. keep evidence of the value of any property insured or the amount of any loss **You** sustain – **You** will need to provide this to **Us** when **You** submit **Your** claim.

## How To Make A Claim

### Step 1 – Submit Your Claim

If **You** need to make a claim on the **Policy**, it is important that **You** let **Us** know as soon as possible and within 30 days of **Your** return **Home**.

Email	<a href="mailto:claims@1Cover.com.au">claims@1Cover.com.au</a>
Online	<a href="https://www.1Cover.com.au/claims/making-a-claim/">https://www.1Cover.com.au/claims/making-a-claim/</a>

When submitting **Your** claim, make sure **You** provide **Us** with full information.

If **You** delay submitting **Your** claim, or provide **Us** with insufficient information and **We** are disadvantaged and as a result, **We** may need to reduce the amount **We** pay in settlement of **Your** claim.

### Step 2 – Provide Supporting Documents

**You** must give **Us** any information **We** reasonably ask to support **Your** claim at **Your** expense, such as but not limited to, proof of **Your** identification, police reports, valuations, detailed repair quote from an authorized repairer, medical reports, original receipts or proof of purchase and ownership.

**You** will need to show evidence for all expenses that **You** are claiming. If required, **We** may ask **You** to provide **Us** with translations into English of any such documents to enable **Us** to consider **Your** claim.

**You** may be required to take part in an investigative interview, to help substantiate a legitimate claim.

### Step 3 – Claim Assessment

**We** will assess **Your** claim within 10 business days of receiving it, provided **We** have all necessary information and documentation.

If **We** need additional information **We** will let **You** know within 10 business days and provide an initial estimate of the timetable and process for making a decision.

Once **Our** assessment is complete, **We** will decide whether to accept or deny **Your** claim. If it is denied **We** will let **You** know in writing and give **You** **Our** reasons.

### Step 4 – Claim Acceptance

If **Your** claim is accepted, **We** will reimburse the amount due to **You** in Australian dollars. **We** will reimburse **You** unless **You** ask **Us** to pay someone else. Payment will be made by direct credit to an Australian bank account nominated by **You**.

Importantly:

- where applicable, **We** will apply the rate of currency exchange that was current at the time **You** incurred an expense.
- depreciation will be applied to claims for **Luggage & Personal Effects** at the rate **We** determine appropriate.
- if **You** make a claim against someone else in relation to a loss covered by the **Policy** and **You** do not get paid the full amount of **Your** claim, **We** will reimburse the difference, provided:
  - a) the claim is covered by the **Policy**; and
  - b) **You** claim against the other person first.

# DEFINITIONS



03



## Definitions

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Where used in this document, the following words and phrases have the meaning below.

**'1Cover'** means **1Cover** Pty Limited ABN 91 105 954 265, AR 269304, an authorised representative of Coffre-Fort Pty Ltd ABN 66 125 358 518, AFS Licence No. 472457.

**'Appropriate Supervision'** means under supervision of a person who possesses the necessary skills, qualifications and licensing appropriate for the supervision of the activity undertaken.

**'Arise', 'Arises' or 'Arising'** means directly or indirectly rising from, or in any way connected with.

**'Australian Resident'** means an Australian Citizen; a holder of a current and valid Australian permanent resident visa, partner/spouse visa or Australian skilled migrant visa (including 457 and temporary Skilled Shortage but excluding working holiday visa; New Zealand passport holder permanently residing in Australia;

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

**'Bicycle'** means any **Bicycle**, tricycle, tandem, trailer cycle or push scooter that is powered by human pedaling and / or battery.

**'Certificate Of Insurance'** means the **Certificate Of Insurance** that **We** issue to **You** when **You** purchase the **Policy** and that forms part of **Your** contract with **Us**.

**'Chronic'** means a medical condition that has been (or is likely to be) present for three months or longer.

**'Complications'** means any secondary diagnosis occurring prior to, during the course of, concurrent with, or as a result of the pregnancy, which may adversely affect the outcome of the pregnancy.

**'Cruise Pack'** includes emergency medical and **Hospital** cover, medical evacuation-ship to shore/mass land, pre-paid shore excursions cancellation, missed cruise departure, cabin confinement and missed port cover.

**'Cruise Vessel'** is a large ship that carries people on voyages for the purpose of leisure travel, typically but not limited to docking temporarily at several ports and places.

**'Departure Point'** means the station, airport, port, terminal or motor vehicle agency from where **You** are scheduled to board **Your** mode of transport or collect **Your Rental Vehicle** to commence **Your** travel.

**'Dependant'** means **Your** children or grandchildren not in full time employment who are under the age of 19 and travelling with **You** on the **Journey**, and are named on the **Certificate Of Insurance**.

**'Excess'** means the amount which **You** must pay for each claim **Arising** from any one event when a claim is made under **Your Policy**.

**'Epidemic'** means a fast-spreading contagious disease or illness in an area as documented by a recognised public health authority. Please refer to who.int and smartraveller.gov.au for further information on Epidemics and Pandemics.

**'Family'** means **You**, **Your** spouse or partner and **Your** dependants who are named on the **Certificate Of Insurance**.

**'Formal Attire'** means dinner suit, dress shirt, evening gown, cocktail dress or other items of clothing which are required for formal dining. This does not include jewellery.

**'Full Time Job'** means full time permanent employment in Australia of at least 30 hours per week.

**'Heli-Skiing'** means downhill skiing or snowboarding from locations accessed by helicopter.

**'High Value Items'** means **Luggage & Personal Effects** excluding jewellery, **Bicycles**, watches and watercraft (other than surfboards) that **You** have purchased additional cover for and that are listed on **Your Certificate Of Insurance** with a nominated sum insured.

**'Home'** means **Your** permanent residential address in Australia.

**'Hospital'** means an established **Hospital** registered under any legislation that applies to it, that provides in-patient medical care.

**'Hospitalised'** means admitted to a **Hospital** on the recommendation of a **Medical Adviser** and 'hospitalisation' has a similar meaning.

**'Ill'** or **'Illness'** means a medical condition, not being an **Injury**, which first occurs during **Your** period of cover.

**'Injure'** or **'Injured'** or **'Injury'** means bodily **Injury** caused solely and directly by violent, accidental, visible and external means, which happens

at a definite time and place during **Your** period of cover and does not result from any **Illness** or disease.

**'Insurer'** means Certain Underwriters at Lloyd's.

**'Journey'** means **Your Journey** from the time when **You** leave **Your Home** to go directly to the place **You** depart from on **Your** travels and ends when **You** return to **Your Home** on or before the last day of cover shown on **Your Certificate Of Insurance**. Journeys that involve travel solely within Australia will only be covered when **Your** destination is more than 100 kilometres from **Your Home**.

**'Luggage & Personal Effects'** means any personal items owned by **You** and that **You** take with **You** or buy on **Your Journey** and which are designed to be worn or carried about with **You**. This includes items of clothing, personal jewellery, photographic and video equipment or personal computers, or electrical devices or portable equipment. However, it does not mean any cash, bank notes, currency notes, cheques, credit cards, negotiable instruments, **Bicycles**, drones, passports, business samples or items that **You** intend to trade.

**'Medical Adviser'** means a qualified doctor of medicine or dentist, other than **You** or a **Relative**, holding the necessary certifications in the country in which they are currently practising.

**'Natural Teeth (or Tooth)'** for the purpose of this insurance means a live, whole, and healthy **Tooth** that has not previously been treated, filled or restored in any way. A natural **Tooth (or Teeth)** does not mean dentures or implants.

**'Off-Piste'** means areas within the boundaries of a ski resort that are not:

- groomed terrain; or
- marked slopes; or
- trails that are open, maintained, monitored and patrolled by the ski resort.

**‘Overseas’** means in any country other than Australia.

**‘Pandemic’** means an **Epidemic** occurring, or is expected to occur worldwide, or over a very wide geographical area, crossing international boundaries and usually affecting a large number of people.

**‘Policy’** means **Your** travel insurance **Policy** with **Us** and is made up of this PDS, **Your Certificate Of Insurance** and any other document **We** tell **You** forms part of the **Policy**.

**‘Pre Existing Medical Condition(s)’** is:

- 1) any medical, dental, physical or mental condition, defect, virus, disease or illness of which in the 12 months prior to issue of the certificate of insurance, you were aware or should reasonably have been aware of (due to symptoms a reasonable person in the circumstances would be expected to be aware of) and for which you (being all persons insured under the policy and set out in the certificate of insurance), your relative or travelling companion have:
  - been diagnosed or had symptoms (even if a condition has not yet been diagnosed); or
  - have been prescribed medication;
  - received (or are waiting for) medical treatment, including any kind of surgery;
  - received (or are waiting for) tests, investigations or specialist consultation; and/or
  - received or been advised to attend a follow-up consultation; and/or
  - had surgery or attended a hospital or clinic (as an outpatient or inpatient).

And/or:

2) any of the below medical conditions which **you, your** relative or travelling companion had at any time in **your** life.

- heart conditions, including any cardiovascular or coronary heart disease or any condition related to your blood or heart vessels;
- any condition relating to your respiratory system, e.g. infections, and chronic diseases;
- kidney conditions and kidney disease;
- any physical or mental disability;
- any recurring illness;
- conditions involving the neck or back;
- any type of cancer;

This definition applies to **You, Your Travelling Companion**, and a **Relative** or any other person.

**‘Reasonable’** means for medical or dental expenses, the standard level of care given in the country **You** are in or, for other expenses, the standard level **You** have booked for the rest of **Your Journey** or, as determined by **Us**.

**‘Reciprocal Health Care Agreement’** means an agreement between the Government of Australia and the government of another country where **Australian Residents** are provided with subsidised essential medical treatment. (Please visit [www.humanservices.gov.au](http://www.humanservices.gov.au) for details).

**“Relative”** means for the purposes of this **Policy, Your** or **Your Travelling Companion’s** mother, mother-in-law, father, father-in-law, step parent, step parent-in-law, sister, sister-in-law, brother, brother-in-law, wife, husband, son, son-in-law, daughter, daughter-in-law, step child, foster



child, first cousins, auntie, uncle, niece, nephew, grandparent, grandchild, partner, fiancé(e), spouse or guardian, only if they are under 85 years of age and resident in Australia or New Zealand.

**‘Relevant Time’** in respect of:

- a) single trip policies mean the time of issue of the **Policy**.
- b) frequent traveller policies mean the first time at which any part of the relevant trip is paid for or the time at which the **Policy** is issued, whichever occurs last.

**‘Rental Vehicle’** means a campervan/motorhome that does not exceed 4.5 tonne, a sedan, hatchback or station wagon, four wheel drive or mini bus/people mover rented from a licensed motor vehicle rental company (this does not include peer to peer car sharing services, such as Turo).

**‘Table Of Benefits’** means the **Table Of Benefits** ([view table](#)) which summarises the cover provided by the **Policy** and any limits that apply to each benefit.

**‘Totally Lost’** means the total physical loss or loss of use of hand or foot at or above the wrist or ankle. For an eye, it means the entire and irrecoverable loss of sight in that eye.

**‘Travelling Companion’** means a person who is not **Your Dependant** and with whom **You** have made arrangements, before **Your Policy** was issued, to travel with **You** for at least 75% of **Your Journey**.

**‘Unattended’** means but not limited to, when an item is not on **Your** person at the time of loss, left with a person other than **Your Relative** or **Travelling Companion**, left in a position where it can be taken without **Your** knowledge including on the beach or beside the pool when **You**

swim, leaving it a distance where **You** are unable to prevent it from being unlawfully taken.

**‘We’, ‘Our’ and ‘Us’** means **Insurer** who deals with **You** through **1Cover**.

**‘Winter Sports Activities’** means the following amateur activities that do not involve any form of racing, acrobatics, jumping, aerial, stunting or freestyle:

- skiing, snowboarding, sledding, tobogganing, or tubing conducted on groomed ski slopes within ski resort boundaries;
- skiing or snowboarding **Off-Piste** (but not backcountry);
- **Heli-Skiing**;
- snowcat skiing;
- cross country skiing on groomed and marked trails;
- glacier walking with hiking equipment under **Appropriate Supervision**;
- snow shoeing on groomed and marked trails;
- snowmobile riding on groomed and marked trails under **Appropriate Supervision**;
- ice sailing.

**‘Winter Sports Equipment’** means skis, poles, boots, bindings, snowboards or ice skates.

**‘Winter Sports Pack’** includes emergency rescue, ski pack, piste closure, bad weather & avalanche closure, winter sports hire equipment and **Winter Sports Equipment Excess**.

**‘You’ and ‘Your’** means the person(s) whose name(s) are set out on **Your Certificate Of Insurance**.



# FINANCIAL SERVICES GUIDE





## Financial Services Guide

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This Financial Services Guide (FSG) describes the financial service provided by **1Cover** and is designed to assist **You** to decide whether to use these services. It contains information about the types of financial services **1Cover** can offer **You**, how **1Cover** and others are remunerated in relation to those services, any potential conflict of interest **1Cover** may have, **1Cover's** internal and external dispute resolution procedures and how **You** can access them, arrangements **1Cover** has in place to compensate clients for losses, and how **We** manage complaints.

### About Us

**Your Policy** is underwritten by Certain Underwriters at Lloyd's (the **Insurer**).

The **Insurer** has appointed Coffre-Fort Pty Ltd ABN 66 125 358 518, AFS License No. 472457 to issue, vary, renew or cancel policies and to handle and settle claims on the **Insurer's** behalf. **1Cover** Pty Ltd, ABN 91 105 954 265, is an Authorised Representative of Coffre-Fort Pty Ltd to deal in general insurance products and provide General Advice on travel insurance products.

**1Cover** is located on Level 21, 68 Pitt Street, Sydney, 2000 Australia, and **1Cover** is responsible for the financial services provided to **You** and is also responsible for the content and distribution of the FSG.

**1Cover** acts as an agent of the **Insurer** and not as **Your** agent.

## Remuneration And Associations How We Are Paid

The premium including all Government taxes and duties for the **Policy** is payable by **You** to **1Cover**.

**1Cover** is paid 0-35% (inc GST) of the premium paid for the **Policy** for **Our** costs of issuing the **Policy**.

### General Advice

**1Cover** can provide **You** with General Advice about the financial services product it arranges. General Advice does not take into account **Your** particular circumstances, objectives or needs. **You** should carefully read the Product Disclosure Statement (PDS) to decide if the product meets **Your** needs, objectives and financial circumstances before making a decision to purchase the insurance product.

### Who We Pay

If **You** are referred to **1Cover** by one of **Our** referral partners, **1Cover** will pay that person a referral fee of up to 20% of the premium **We** receive.

**1Cover's** employees and representatives receive an annual salary and may earn a bonus or other incentives.

**1Cover** is part of a group of companies that have access to shared services, including compliance, claims manuals and training as well as legal, banking and group purchasing arrangements.

## Professional Indemnity Insurance

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Coffre-Fort has professional indemnity insurance covering errors and mistakes made in relation to **Our** insurance services. This insurance meets the requirements of the Corporations Act 2001 (Cth) and covers the services provided by **1Cover** and **Our** representatives after they cease working for **Us**.

## Complaints

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**We** treat complaints seriously.

If **You** have a concern about this **Policy** or the insurance services **We** provide, please let **Us** know.

### Step 1: Let Us Know

**We** want to resolve any complaint or dispute for **You** as quickly as possible. The best place to start is to contact our Customer Disputes Resolution Team.

You can lodge a complaint with them online at:

<https://www.1cover.com.au/complaints>

**We** will acknowledge **Your** complaint and provide **You** with the contact details of the person handling **Your** complaint. **We** will try to resolve **Your** complaint within 10 business days. If more time is needed to collect necessary information or complete any further investigation, we will agree with you a reasonable alternative time frame.

If you require specialist services or would like to speak to a complaints officer over the phone, you can contact us on +61 2 8015 6287 and we will arrange for someone to return your call as soon as possible.

## Step 2: Escalation To Our Insurer

If **We** are unable to resolve **Your** complaint to **Your** satisfaction, we will escalate it to our **Insurer**, Lloyd's Australia Limited.

**Email:** idraustralia@lloyds.com

**Call:** +61 2 8298 0783

**Mail:** Lloyd's Australia Limited  
Suite 1603/1 Macquarie Pl, Sydney NSW 2000

## Step 3: External Independent Review

**We** aim to resolve complaints within 30 days. If **We** are unable to do so or **You** are dissatisfied with **Our** final decision, **You** may lodge a complaint with Australia Financial Complaints Authority (AFCA) for external dispute resolution.

You can contact AFCA directly:

**Online:** [www.afca.org.au](http://www.afca.org.au)

**Email:** [info@afca.org.au](mailto:info@afca.org.au)

**Call:** 1800 931 678

**Mail:** Australian Complaints Authority  
GPO BOX 3, Melbourne VIC 3001

## Privacy

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**1Cover** and the **Insurer** are committed to ensuring the privacy and the security of **Your** personal information. **We** use the information **You** provide to assess the risk of, provide **You** with insurance cover, and assess and manage claims.

**We** may also use **Your** contact details to send **You** information and offers about products and services **We** believe will be of interest to **You**. If **You** don't provide **Us** with full information, **We** may not be able to provide insurance or assess a claim.

If **You** provide **Us** with information about someone else, **You** must obtain their consent to do so.

When issuing and administering **Your** insurance, **1Cover** will provide **Your** information to the **Insurer** in the United Kingdom. This may include **Your** medical information if **You** have made a medical related claim. **Your** information may also be provided to contracted third party service providers (e.g. emergency assistance and claims management companies, but reasonable steps will be taken to ensure that they comply with privacy legislation.

**1Cover** has a Privacy Policy containing information about how **You** can access or correct the information **We** hold about **You**, or make a privacy related complaint.

[Click here](#) to view a copy of **Our** Privacy Policy.

In providing **Your** personal information, **You** consent to its collection and use as outlined above.

## SALES ENQUIRES

✉ info@1cover.com.au

## CLAIM ENQUIRIES

✉ claims@1cover.com.au

## 24 HOUR EMERGENCY ASSISTANCE

(+) 61 2 8776 3010

## INTERNATIONAL NUMBERS

UK:	Toll Free: 0808 178 5380
Australia:	Toll Free: 1300 884 508
New Zealand:	Toll Free: 0800 192 742
Thailand:	Toll Free: 1800 011 857
USA/Canada:	Toll Free: 1 855 912 3443
Indonesia:	Toll Free: 0803 061 2053



This travel insurance is insured by Certain Underwriters at Lloyd's (the insurer).  
1Cover issues the policy to you and handles claims as an agent of the insurer.



Level 21, 68 Pitt Street, Sydney 2000 NSW

Coverholder at **LLOYD'S**