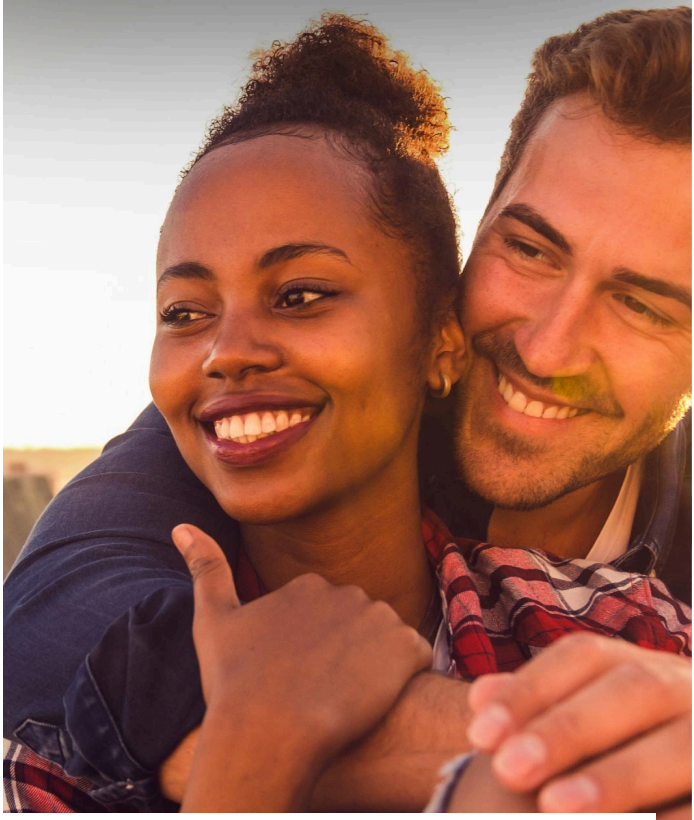
nib

Partner Product



International Travel Insurance

Combined Financial Services Guide and Product Disclosure Statement

Effective Date 1 September 2026

Contents

About this document 3

Product Disclosure Statement 4

- Important information 4
- Plans 14
- Comprehensive Plan 15
- Essentials Plan 17
- Annual Multi Trip Plan 19
- Definitions 22
- Existing medical conditions 26
- Changes in your health before travelling 32
- Pregnancy 32
- Cancellation and additional expenses 33
- Medical expenses 37
- Medical evacuation and repatriation 39
- Extra travel cover 40
- Rental vehicle expenses 43
- Luggage 44
- Personal accident 48
- Personal liability 50
- Coronavirus travel costs 51
- Snow sports cover (optional cover) 53
- General exclusions 54
- Claims 58

Financial Services Guide 62

- About the Insurer 62
- About nib and AGA 62
- About how we are paid 62
- Feedback, complaints and disputes 63
- Your privacy 64
- Professional indemnity insurance 64
- Date prepared 64
- Contacts 65

Date of Preparation: 20 July 2026

Date effective: 1 September 2026

Version: IMP3833

About this document

There are two parts to this document. The first part is your Product Disclosure Statement (PDS) which provides the important information about this policy, including the detailed terms, conditions and exclusions, and how to contact us. This is a consumer insurance contract under the *Insurance Contracts Act 1984 (Cth)*. Pacific International Insurance Pty Ltd ABN 83 169 311 193, AFSL No 523921 (the insurer) is responsible for the PDS section in this document.

The second part of this document is the Financial Services Guide (FSG) which provides information about who we are, who we do business with to provide you with insurance, how we and our business partners are paid, how to make a complaint and other details to help you decide whether to use any of the services offered by us. AWP Australia Pty Ltd, ABN 52 097 227 177, AFSL No 245631, trading as Allianz Global Assistance (AGA), is responsible for the FSG section in this document. nib Travel Services (Australia) Pty Ltd, ABN 81 115 932 173, AFSL No 308461 (nib), acts as third party administrator on behalf of AGA.

Product Disclosure Statement

Important information

In this PDS **we** explain important information about this policy including how **we'll** protect **your** privacy and how to make a complaint or access **our** dispute resolution service.

The insurer

This insurance is underwritten by Pacific International Insurance Pty Ltd ABN 83 169 311 193, AFSL No 523921.

AGA and nib

This policy is distributed by nib Travel Services (Australia) Pty Ltd (nib) who acts as third party administrator on behalf of AGA, managing claims, complaints, enquiries and sales. AGA, nib and **our** business partners act on behalf of the insurer and not on **your** behalf.

nib international assistance

nib international assistance provides emergency assistance for people who are covered under nib travel insurance policies worldwide. nib international assistance's experienced specialists can be contacted by telephone 24 hours a day, 7 days a week to help **you** in the event of an emergency and to liaise on **your** behalf with the medical team.

nib international assistance will also work closely with the claims department, which will assess **your** entitlement to financial assistance.

nib international assistance is connected with a global network that provides:

- Medical care;
- Medical transfer to a hospital or repatriation to Australia where necessary;
- Guidance and support even if **your** loss may not be covered by the policy;
- Access to translation services.

How to contact nib international assistance

Please contact the nib international assistance team using the contact details below:

Phone	+61 3 8523 2800 Within Australia: 1300 555 019
Fax	+61 3 8523 2815
Email	travelassist@nib.com.au

The cost of this policy

The total premium is the amount **we** charge **you** for this policy. It includes the amount **we** have calculated for the risk, commission and taxes and

government charges applicable. The premium will be shown on the Certificate of Insurance.

When calculating the premium **we** take a number of factors into account. These factors and the degree to which they affect the premium will depend on the information **you** give **us** and the level and type of cover **you** choose.

The main factors that impact **your** premium include:

- the length of **your trip**;
- the length of time between the date of **your** policy's purchase and the **trip** departure date noted on **your** Certificate of Insurance;
- **your** destination;
- the travel plan chosen;
- **your** age;
- additional premium payable for any available options **you** choose:
    - cancellation limit
    - **snow sports** cover option
    - **rental vehicle** insurance excess
    - specified items
    - variable excess
    - **specified medical conditions**

For example, premiums may be higher if **you** are in a higher risk age group, for longer **trips**, destinations that are high risk or have higher medical costs, plans with greater coverage, and when **you** choose to purchase additional cover.

This policy is only valid after **you** pay the premium and **our representative** issues a Certificate of Insurance to **you**.

Additional options to purchase

We offer the following options for **you** to purchase. These options can be added with payment of an additional premium, depending on the travel plan **you** select, and will be shown on **your** Certificate of Insurance when added to **your** policy.

Cancellation option

For all plans, the policy limit for Cancellation or holiday deferment costs must be chosen at the time of purchase; the limit will then appear on the Certificate of Insurance.

Depending on the travel plan **you** choose, **you** can vary the maximum **trip** limit. **You** will be advised of any change in premium. **Your** policy limit for Cancellation or holiday deferment costs and any additional premium will be shown on **your** Certificate of Insurance.

Snow sports cover option

This option is available with the Comprehensive and Annual Multi Trip Plans with payment of an additional premium. When chosen, this option is shown on **your** Certificate of Insurance. Applicable limits are applied per adult and are not increased for accompanying **children**.

If **you'll** be taking part in **snow sports** on **your trip**, **you** must select the **Snow sports** cover option to have cover under all benefit sections of **your** policy for

any claim **arising** from participation in **snow sports**. In addition, **you** will receive the following benefits:

Benefit	Applicable limits per adult
Any claim **arising** from participation in **snow sports**	Up to the applicable limit of the relevant section.
Ski lift passes	$300
Ski run closure	$100 per day up to a maximum of $500
Hire replacement snow equipment	$300

Refer to the section **Snow sports** cover for further cover details with this option.

Additional rental vehicle insurance excess option

This option is available with the Comprehensive and Annual Multi Trip Plans with payment of an additional premium. When chosen, this option is shown on **your** Certificate of Insurance.

If **you** are hiring a **rental vehicle**, **you** may have to pay an insurance excess for an accident or theft. **We** have included cover for **rental vehicle** insurance excess; however, **you** may wish to increase this cover for an additional amount.

Maximum additional policy limit	Additional units of cover
$5000	Additional premium charged for each $1,000 unit of additional limit selected.

This insurance does not provide cover for **your** liability arising out of **your** use of a **rental vehicle**. Please ensure **you** have liability insurance adequate for the country(ies) where **you** will be using the **rental vehicle**.

Specified items option

This option is available on the Comprehensive, Annual Multi Trip and Essentials Plans. Specified items are shown on **your** Certificate of Insurance.

You can cover items worth more than the luggage item limit shown for **your** plan by specifying the item(s) and paying an additional premium. Items separately insured under this Specified items option are covered up to the amount specified, even if this amount exceeds the total Luggage and personal effects limit set out in the Schedule of benefits for **your** plan.

- Maximum individual specified item limit: $4,000
- Maximum total for all specified items: $10,000

You must insure the total value per item. Please ensure **you** have proof of value of any item **you** specify. This will be required should **you** make a claim. Depreciation does not apply to specified items in the event of a claim. Cover for specified items is subject to the terms and conditions as detailed under the section Luggage and personal effects.

Variable excess option

When **you** apply for insurance, **we** will let **you** know the applicable premium **you** have to pay. The premium and any excess applicable to **your** selected plan will be shown on **your** Certificate of Insurance.

Where a plan allows **you** to vary the excess, **your** premium will be adjusted accordingly; the lower the excess **you** select, the higher **your** premium will be.

Refer to the section Excesses for more information on how excesses work.

Specified medical conditions option

(Not available on the Essentials Plan.)

If **you** seek cover for events that **arise** from **your existing medical condition(s)** - other than those listed in Automatically covered conditions for which **you** meet the eligibility criteria - please refer to the section **Existing medical conditions** for the application, medical screening and cover details.

If **we** agree to offer **you** cover for **your existing medical condition(s)**, **we** will advise **you** in writing of any additional terms and conditions of that cover, including any additional excess and premium that will be payable. If **you** purchase this cover, it will be shown on **your** Certificate of Insurance.

Refer to the section Excesses for more information on how excesses work.

Your Duty to Us

Under the *Insurance Contracts Act 1984 (Cth)*, **you** have a duty to take reasonable care not to make a misrepresentation to **us** when answering questions that **we** will ask **you** and providing **us** with information. Before **you** enter into, vary or extend an insurance contract, **we** will ask **you** questions that are relevant to **our** decision 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, it is important that **you** answer these questions fully and accurately, to the best of **your** knowledge.

If **you** do not take reasonable care not to make a misrepresentation to **us**, **we** may cancel **your** contract, or deny or reduce the amount **we** will pay **you** for a claim, in accordance with **our** rights at law.

If **you** make a misrepresentation to **us** which is fraudulent, **we** can:

1. treat **your** contract as if it never existed (i.e. void the contract), unless **we** would have entered into the contract for the same premium and on the same terms anyway; or
2. if **we** are not entitled to void the contract or **we** decide not to void the contract, **we** can reduce the amount that **we** pay **you** for a claim so that **we** are put in the position **we** would have been in if **you** had not breached **your** duty to **us**, in accordance with **our** rights at law.

Cooling-off period

Cancelling within the cooling-off period

You have 21 days from the day **you** buy **your** policy to decide if the cover is right for **you**. If it's not, **you** can cancel **your** policy within this 'cooling-off period', and **we'll** give **you** a full refund of **your** premium provided that:

- **you** haven't started **your trip**; and
- **you** haven't made a claim; and
- **you** don't intend to make a claim or exercise any other right under **your** policy.

To cancel **your** policy within the cooling-off period, contact **our representative**. **Your** refund will be processed within 15 business days.

Cancelling outside the cooling-off period

If **you** request to cancel **your** policy outside the cooling-off period, **we** may, at **our** discretion, refund that part of **your** premium paid for the unused **period of insurance**. To be eligible for a refund, **you** cannot have started **your trip**, have made a claim or intend to make a claim or exercise any other right under **your** policy.

Cancellation by us

We can cancel **your** insurance in any way permitted by law, as described in the *Insurance Contracts Act 1984 (Cth)*, including if **you** have:

- failed to comply with **Your** Duty to **Us**; or
- failed to comply with **your** duty of utmost good faith to **us**; or
- made a misrepresentation which is fraudulent, unless **we** would have entered into or amended the policy for the same premium and on the same terms with **you** anyway; or
- failed to comply with a provision of the policy, including failure to pay the premium; or
- made a fraudulent claim under this policy or any other current policy.

If **we** cancel **your** policy, **we** will do so by giving **you** written notice. **We** will deduct from the premium an amount to cover the shortened period for which **you** have been insured by **us** and refund to **you** what is left.

The General Insurance Code of Practice

We are a signatory to the General Insurance Code of Practice developed by the Insurance Council of Australia and enforced by the Code Governance Committee, an independent body whose purpose is to drive better Code compliance and help the insurance industry improve its service to consumers. The Code is designed to promote good relations and insurance practice between insurers, authorised representatives and consumers. The Code sets out what **we** must do when dealing with **you**. **You** can obtain a copy of the Code from insurancecouncil.com.au.

Privacy

nib Travel Services (Australia) Pty Limited ("we", "us", "our" in this privacy section) collect **your** personal information, and in some cases **your** sensitive information, in order to issue, arrange and manage **your** travel insurance or to provide **you** with related services. **We** will only collect personal and sensitive information from **you** or from those authorised by **you**, such as **our** distribution partners.

We may disclose **your** personal and sensitive information to third parties involved in the above process, including AWP Australia Pty Ltd (ABN 52 097 227 177, AFSL No. 245631), trading as Allianz Global Assistance (AGA), which manages and administers this insurance product as the principal. **We** may also disclose **your** information to travel agents and consultants, travel insurance providers, insurers and reinsurers, claims handlers, investigators and cost containment providers, medical and health service providers, legal and other professional advisers, **your** and **our** agents and **our** related companies. Some of these third parties may be located in other countries such as the UK, Europe and the USA.

Our Privacy Policy details how **we** collect, use, store and disclose **your** personal and sensitive information as well as how **you** can seek access to and correct **your** personal information or make a complaint. **You** may not access or correct personal information of others unless **you** have been authorised by them, or are authorised under law or they are **your** dependants.

AWP Australia Pty Ltd, trading as Allianz Global Assistance (AGA), is the principal under which this insurance product is managed.

By providing **us your** personal and sensitive information, **you** consent to **us** collecting, using, storing and disclosing it in accordance with **our** Privacy Policy. If **you** don't provide all of the personal and sensitive information **we've** requested, whether directly or through others, **we** may not be able to provide **you** with **our** services or products including being able to process **your** application for insurance.

You can view **our** full Privacy Policy at: nib.com.au/legal/privacy-policy.

The insurer is Pacific International Insurance Pty Ltd. Please see their full privacy policy at: pacificins.com.au/privacy-policy.

Resolving complaints and disputes

If **you** have any feedback about **our** service – positive or negative – **we** would like **you** to share it with **us**. Refer to **our** contact details on the last page of this document.

How we handle complaints

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

nib Customer Relations
PO Box A975
Sydney NSW 1235 Australia
Phone: 1300 025 121
Email: travelcomplaints@nibtravel.com

nib will acknowledge **your** complaint within 1 business day of receiving it and provide **you** with the contact details of the person handling **your** complaint. **We** will do **our** utmost to resolve the complaint to **your** satisfaction within 10 business days.

If **we** are unable to resolve the complaint to **your** satisfaction within 10 business days, **we** will keep **you** informed about the progress of **your** complaint at least every 10 business days.

The Australian Financial Complaints Authority (AFCA) provides fair and independent financial services complaint resolution that is free to consumers. **You** can take **your** complaint to AFCA at any time.

If **we** are unable to resolve **your** complaint within 30 calendar days of the date on which **you** first made the complaint, or if **you** are still not satisfied with the outcome, **you** can choose to have **your** complaint independently reviewed at any time by AFCA.

AFCA can be contacted at:

Website: afca.org.au
Email: info@afca.org.au
Telephone: 1800 931 678 (free call)
In writing to: Australian Financial Complaints Authority, GPO Box 3, Melbourne VIC 3001

In the event **you** choose to escalate **your** complaint to AFCA, please direct it to nib Travel Services (Australia) Pty Ltd when completing the AFCA complaints form.

Should **you** choose to refer **your** complaint to AFCA, **you** must do so within 2 years of **our** final decision. If **you** have a complaint about nib Travel or one of **our** partners, feel free to contact **our** Customer Relations team by post, email or telephone.

Changing your policy

Changes to this policy only become effective when **we** agree to them and send **you** a new Certificate of Insurance detailing the change.

If **you** wish to change **your** policy details after **your** Certificate of Insurance has been issued, please contact **us**; **we** may require additional information to review the change request. Where **we** agree to make a change to **your** cover, an additional premium may apply.

Changes to your travel plans

You must tell **us** as soon as possible if circumstances occur, or if changes or alterations are intended or made, which increase the risk of loss, damage or **injury**. This may result in changes to **your** cover.

For example, **you** intend to spend more than 72 hours in a destination country or region not listed on **your** Certificate of Insurance.

If **you** don't nominate the destination country or region for **your trip** which would impact **our** decision to offer **you** cover or the terms of the cover offered, any claim under the policy relating to that undisclosed destination country or region may be reduced to nil.

Extending your policy

Depending on **your** circumstances, if **you** want to change the dates of **your** cover, **you'll** need to either extend **your** policy or buy a new one (for the additional days). **You** are eligible to extend **your** policy if:

- **your** current policy has not ended;
- all travellers are currently within the plan age limits – such as if **you** are travelling with accompanying **children** who are still under 25;
- **you** still meet all eligibility requirements of the policy;
- **you** haven't claimed and don't intend to claim for an event that has already occurred;
- there has been no change to **your** health since the issue of **your** Certificate of Insurance; and
- **you** don't have any **specified medical conditions** covered under **your** current policy.

You will not have cover for a claim **arising** from any event that has occurred before **your** policy is extended that a reasonable person in **your** circumstances should have known could foreseeably lead to a claim.

If **you** don't satisfy all these criteria, don't worry; **you** can apply to buy a new policy for the additional dates. If **you** don't qualify for an extension and have to buy a new policy to cover **your** additional travel days, the PDS and the pricing in use at the time **you** buy **your** new policy will apply.

You can only extend a policy up to a maximum of 12 months from the original departure date shown on **your** Certificate of Insurance.

You cannot extend the Annual Multi Trip Plan or its 45-day **trip** duration; however, if **you** are taking a **trip** that is longer than 45 days, **you** can apply for a Comprehensive policy to cover the additional dates, provided that **you** meet the eligibility requirements.

If **you** do not extend or buy a new policy before **your** current policy ends (or the end of the 45th day of **your trip** on the Annual Multi Trip Plan) or there is a gap between the **periods of insurance**, a 72-hour waiting period will apply to a policy **you** purchase whilst **you** are travelling.

Automatic extension

If **you** are unable to return to **your home in Australia** before the end of the **period of insurance** (at 11.59pm AET on the return date shown on **your** Certificate of Insurance), due to an **illness** or **injury** causing **you** or a member of **your travelling party** to be unfit to travel, contact nib international assistance emergency assistance team as soon as possible. **We** will apply an extension to **your** policy whilst **your** claim is being determined, which will continue if **we** accept cover for **your** claim. This extension will last until the earlier of six months after the return date of **your** policy, or until **you** are able to return to **your home in Australia**. If **we** determine that there is no cover for **your** claim, **we** will notify **you** of this, and the cover under the automatic extension will end.

If **you** are prevented from returning to **your home in Australia** before the end of the **period of insurance** by the delay, cancellation or restriction of **your scheduled public transport**, an extension of up to 48 hours applies to **your** policy. If **you** will be delayed longer than 48 hours, **you** may be eligible to extend **your** policy prior to the end of the **period of insurance** (see Extending your policy), or **you** can buy a new policy,

Jurisdiction and Choice of Law

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

- If a dispute arises under this insurance, this insurance will be subject to New South Wales law and practice and the insurer will submit to the jurisdiction of any competent court in New South Wales;
- Any summons notice or process to be served upon the insurer may be served upon:

  Pacific International Insurance Pty Ltd
  PO Box 550
  Kotara NSW 2289
- If a suit is instituted against **us**, **we** will abide by the final decision of such court or competent appellate court.

Financial Claims Scheme

The insurer is authorised under the *Insurance Act 1973* to carry on general insurance business. This *Act* and the insurer's authorisation obligates it to comply with prudential standards to ensure it meets its financial obligations under this policy. The protection provided to **you** under the Federal Government's Financial Claims Scheme applies to the insurer and as such if the insurer's financial obligations under this policy are not met, then **you** may have a claim under this scheme.

Information about the scheme can be found at fcs.gov.au by calling 1300 55 88 49.

Our agreement with you

This policy is an agreement between **you** and **us**, made up of:

- **your** application for insurance; and
- this Combined Financial Services Guide and Product Disclosure Statement; and
- **your** Certificate of Insurance, which sets out the cover **you've** chosen and any terms specific to **you**; and
- any other documentation **we** issue to **you** outlining terms and conditions of **your** cover.

The cover under this policy is provided during the **period of insurance**, once **you've** paid **us your** premium. There are also:

- conditions and exclusions which apply to specific covers or sections;
- General exclusions, which apply to any claim **you** make;
- general conditions, which set out **your** responsibilities under this policy;
- Claims conditions, which set out **our** rights and **your** responsibilities when **you** make a claim; and
- other terms which set out how this policy operates.

Paying your premium

You must pay **your** premium (which includes commission, stamp duty and GST if applicable) at the time **you** take out this policy.

Your premium is set out on **your** Certificate of Insurance. If **you** did not pay **your** premium at the time **you** took out this policy, then **we** will treat this policy as never having operated and there'll be no cover.

Excesses

An excess is an amount **you** must pay once for each claim **you** make, except for benefit sections which state: "No excess applies to claims under this benefit". The excess is deducted from any claim payment **we** make to **you**. If **you** make more than one claim under **your** policy, the excess will apply to each claim which **arises** from each separate set of circumstances.

When **you** apply for insurance, **we** will let **you** know the applicable premium **you** have to pay, and **your** excess will be shown on **your** Certificate of Insurance. Depending on **your** plan, **you** may vary **your** excess. Refer to the section Variable excess option under Additional options to purchase.

Plan	Policy excess
Comprehensive Plan	Chosen excess
Essentials Plan	Chosen excess
Annual Multi Trip Plan	Chosen excess

Specified medical conditions excess

If **you** receive cover for any **specified medical condition(s)** and **your** Certificate of Insurance shows **you** have this cover, an additional excess may also apply to each occurrence relating to **your specified medical condition(s)** when **you** claim.

This additional excess will also be shown on **your** Certificate of Insurance and on any other related documents **we** send **you**; however, **you** cannot change or remove this excess.

How much we'll pay

The most **we'll** pay for a claim is the applicable limit set out in the Schedule of benefits for the plan **you** have purchased and for the cover or section **you're** claiming under, less any excess and depreciation, where applicable. For more information about excesses, refer to the section Excesses; for more information on depreciation, refer to the Luggage and personal effects section which explains how **we** calculate depreciation.

When does the policy begin and end?

Once **you** pay **your** premium, and **we** have accepted **your** application for insurance **we** will issue **you** a Certificate of Insurance showing the details of **your** policy.

Cover is available for a **trip** to be taken during the **period of insurance** (which begins from the departure date, and ends at 11.59pm AET on the return date, which are shown on **your** Certificate of Insurance). For an Annual Multi Trip Plan, cover is available for any **trip** to be taken during the **period of insurance**, for up to 45 continuous days each **trip**.

There is no provision to suspend this policy during the **period of insurance** and the policy is not a renewable contract of insurance.

When does Cancellation cover begin and end?

Your cancellation cover:

- begins from the time **we** issue **your** Certificate of Insurance for:
  - benefit section Cancellation or holiday deferment costs; and
  - events 1 to 5 in the benefit section **Coronavirus** travel costs; and
- ends when **you** return to **your home in Australia** or when the **period of insurance** ends, whichever happens first.

For the Annual Multi Trip Plan, for each **trip**:

- cover begins from the time **we** issue **your** Certificate of Insurance for:
  - the benefit section Cancellation or holiday deferment costs; and
  - events 1 to 5 in the benefit section **Coronavirus** travel costs; and
- cover ends the earlier of:
  - the time **you** return to **your home in Australia**; or
  - the end of the 45th day of **your trip**; or
  - the end of the **period of insurance**.

When does cover for all other benefits and events begin and end?

- Cover under all other benefits and events begins when **you** leave **your home in Australia** to begin **your trip** or the departure date of the **trip** shown on **your** Certificate of Insurance, whichever happens last. Cover ends when **you** return to **your home in Australia** or when the **period of insurance** ends, whichever happens first.
- For the Annual Multi Trip Plan, for each **trip**, cover under all other benefits and events begins during the **period of insurance** shown on

your Certificate of Insurance from the time **you** leave **your home in Australia** to begin **your trip**. Cover ends the earlier of:

- the time **you** return to **your home in Australia**; or
- the 45th day of **your trip**; or
- the end of the **period of insurance**.

Waiting period

If **you've** already started travelling **when your** Certificate of Insurance is issued:

- a 72-hour waiting period applies from the time the Certificate of Insurance is issued before cover for any events begins. However, if after the trip departure date noted on **your** Certificate of Insurance and before the end of the 72-hour waiting period **you** suffer an **injury** as a result of an accident, cover as per the conditions of Medical expenses and Medical evacuation and repatriation begins from the time of the accident for that **injury**. Cover for all other events only begins after the 72-hour waiting period, and is only for events first occurring after the 72-hour waiting period.
- where **you** select a **trip** departure date that is more than 72 hours after **your** Certificate of Insurance is issued even though **you've** already started travelling:
  - cover under the benefit section Cancellation or holiday deferment costs and events 1 to 5 under the benefit section **Coronavirus** travel costs only begins after the 72-hour waiting period, and is only for any events first occurring after the 72-hour waiting period; and
  - cover for all other benefits and events begins from the **trip** departure date **you** nominate that is shown on **your** Certificate of Insurance and is only for events first occurring after the **trip** departure date.

If **you** have an existing nib travel insurance policy that will end whilst **you** are travelling, and **you** buy a new policy before the **period of insurance** ends under **your** existing policy (at 11.59pm AET on the return date shown on **your** Certificate of Insurance), the waiting period will not apply to that new policy, provided that there is no gap between the **periods of insurance**.

Changes to this document

Information in this document may change from time to time. Where **we** reasonably determine the change is not materially detrimental to **you**, the updated information will be displayed on **our** website at nibtravelinsurance.com.au. **You** can also ask **us** for a free copy in writing.

In any other case, **we** will issue **you** with a new PDS (or supplementary PDS).

Responsibility for this document

Pacific International Insurance Pty Ltd is responsible for the PDS in this document, which was prepared on 20 July 2026.

Plans

When **you** take out this policy **you** must choose from the following plans:

- Comprehensive
- Essentials
- Annual Multi Trip

Your Certificate of Insurance will show the plan **you've** chosen.

Comprehensive Plan

Schedule of benefits

This Schedule of benefits forms part of **your** policy and shows the limits and sub-limits for the benefits. Applicable limits are applied per adult traveller and are not increased for accompanying **children**. **You** must read this Schedule of benefits together with **your** Certificate of Insurance and this Product Disclosure Statement.

Benefit	**Applicable limits per adult**
Cancellation and additional Expenses	
Cancellation or holiday deferment costs	Chosen limit *
Agents cancellation fees sub-limit	*$2,000*
Emergency travel arrangements and accommodation expenses	Unlimited~
Meals sub-limit	*$500; limit $75 per 24hrs*
Emergency internet/telephone sub-limit	*$250*
Post hospital accommodation	$500; limit $100 per day
Medical expenses	
Overseas medical expenses	Unlimited~^
*Critical **illness** or **injury** – emergency travel expenses for a friend or relative sublimit*	*$20,000*
Hospital compensation	$8,000; limit of $50 per 24hrs
Dental expenses due to sudden and acute pain	$1,000
Medical evacuation and repatriation	Unlimited~
Home services sub-limit	*$500*
Extra travel cover	
Travel delay	$2,000; limit $250 per 24hrs

Benefit	Applicable limits per adult
Missed connection – special events	$2,000
Resumption of **trip**	$3,000
Emergency accommodation due to **terrorism**	$3,000; limit $300 per day
Emergency expenses to avoid disaster	$1,000
Early return home	$2,000
Rental vehicle expenses	
Rental vehicle insurance excess	$5,000 *
Return of **rental vehicle**	$750
Luggage	
Luggage and personal effects maximum limit	$12,000
***Personal computer**, camera, video individual item limit*	*$4,000*
Smartphones individual item limit	*$1,000*
Other individual item limit	*$700*
Emergency luggage	$500
Stolen cash	$250
Hiring replacement golf and surf equipment	$200
Replacement passports and travel documents	$3,000
Fraudulent use of credit or debit cards	$3,000
Personal accident	
Accidental death	$25,000
*Accompanying **children** sub-limit*	*$1,000 per **child***
Funeral expenses overseas	$25,000
Total permanent disability	$12,500
Loss of income	$10,000; limit of $1,667 per month
Personal liability	$2,500,000
Coronavirus travel costs	$10,000

~ Where used, the term 'Unlimited' only means there is no capped dollar sum insured. Terms, conditions, exclusions, limits and applicable sub-limits apply - refer to the Policy Benefits and General Exclusions sections of the PDS for details.

* This is a limit per policy; it is the most **we'll** pay for all people on **your** Certificate of Insurance combined, per **trip**.
^ For up to 12 months after the **illness** first appears or **injury** first occurs.

Guidelines

- This plan is only available to **residents of Australia**.
- This plan ends once **you** have returned to **your home in Australia** or the **period of insurance** ends, whichever happens first.
- If **you** have an **existing medical condition** other than those automatically covered, please contact **us** to complete a medical screening assessment, which must be completed before the Certificate of Insurance can be issued.
- There is cover for publicly available international river cruises, and ocean cruises within Australian waters or **international waters**, under this plan.
- There is no provision to suspend this plan during the **period of insurance**.
- This plan cannot be purchased more than 18 months prior to travel.
- A policy premium is charged for each adult traveller; accompanying **children** are insured for no additional premium.
- This policy only covers the adult travellers and any accompanying **children** named on the Certificate of Insurance.
- There is no age limit on this plan.
- Any options selected by **you** are in addition to this plan and are referenced in **your** Certificate of Insurance.

Essentials Plan

Schedule of benefits

This Schedule of benefits forms part of **your** policy and shows the limits and sub-limits for the benefits. Applicable limits are applied per adult traveller and are not increased for accompanying **children**. **You** must read this Schedule of benefits together with **your** Certificate of Insurance and this Product Disclosure Statement.

Benefit	**Applicable limits per adult**
Cancellation and additional expenses	
Cancellation or holiday deferment costs	Chosen limit *
Agent's cancellation fees sub-limit	*$2,000*
Emergency travel arrangements and accommodation expenses	$15,000
Meals sub-limit	*$500; limit $75 per 24 hrs*
Emergency internet/telephone sub-limit	*$250*

Benefit	Applicable limits per adult
Medical expenses	
Overseas medical expenses	Unlimited~^
*Critical **illness** or **injury** – emergency travel expenses for a friend or relative sublimit*	*Not insured*
Hospital compensation	$5,000; limit of $50 for every 24 hours
Dental expenses due to sudden and acute pain	$1,000
Medical evacuation and repatriation	$500,000
Home services sub-limit	*Not insured*
Extra travel cover	
Travel delay	$1,000; limit $250 per 24 hrs
Missed connection - special events	Not insured
Resumption of **trip**	Not insured
Emergency accommodation due to **terrorism**	Not insured
Emergency expenses to avoid disaster	$1,000
Early return home	$2,000
Rental vehicle expenses	
Rental vehicle insurance excess	$2,000 *
Return of **rental vehicle**	$750
Luggage	
Luggage and personal effects maximum limit	$5,000
Individual item limit	*$500*
Emergency luggage	$200
Stolen cash	Not insured
Hiring replacement golf and surf equipment	Not insured
Replacement passports and travel documents	$1,000
Fraudulent use of credit or debit cards	Not insured
Personal accident	
Accidental death	$10,000
*Accompanying **children** sub-limit*	*$1,000 per **child***

Benefit	Applicable limits per adult
Funeral expenses overseas	$15,000
Total permanent disability	Not insured
Loss of income	Not insured
Personal liability	$1,000,000
Coronavirus travel costs	Not insured

~ Where used, the term 'Unlimited' only means there is no capped dollar sum insured. Terms, conditions, exclusions, limits and applicable sub-limits apply - refer to the Policy Benefits and General Exclusions sections of the PDS for details.

* This is a limit per policy; it is the most **we'll** pay for all people on **your** Certificate of Insurance combined, per **trip**.
^ For up to 12 months after the **illness** first appears or **injury** first occurs.

Guidelines

- This plan is only available to **residents of Australia** up to 69 years of age at the time the Certificate of Insurance Is issued.
- This plan ends once **you** have returned to **your home in Australia** or the **period of insurance** ends, whichever happens first.
- This plan does not cover **existing medical conditions** unless it is one that is automatically covered. If **you** require cover for any other **existing medical condition**, please ask **our representative** or **us** about other travel insurance products which may be available.
- There is cover for publicly available international river cruises, and ocean cruises within Australian waters or **international waters** , under this plan.
- This plan does not provide cover for any **snow sports**.
- There is no provision to suspend this plan during the **period of insurance**.
- This plan cannot be purchased more than 12 months prior to travel.
- A policy premium is charged for each adult traveller; accompanying **children** are insured for no additional premium.
- This policy only covers the adult travellers and any accompanying **children** named on the Certificate of Insurance.
- Any options selected by **you** are in addition to this plan and are referenced in **your** Certificate of Insurance.

Annual Multi Trip Plan

Schedule of benefits

This Schedule of benefits forms part of **your** policy and shows the limits and sub-limits for the benefits. Applicable limits are applied per adult traveller and are not increased for accompanying **children**. **You** must read this Schedule of

benefits together with **your** Certificate of Insurance and this Product Disclosure Statement.

Benefit	**Applicable limits per adult**
Cancellation and additional expenses	
Cancellation or holiday deferment costs	Chosen limit *
Agents cancellation fees sub-limit	*$2,000*
Emergency travel arrangements and accommodation expenses	Unlimited~
Meals sub-limit	*$500; limit $75 per 24hrs*
Emergency internet/telephone sub-limit	*$250*
Post hospital accommodation	$500; limit $100 per day
Medical expenses	
Overseas medical expenses	Unlimited~^
*Critical **illness** or **injury** – emergency travel expenses for a friend or relative sublimit*	*$20,000*
Hospital compensation	$8,000; limit of $50 per 24hrs
Dental expenses due to sudden and acute pain	$1,000
Medical evacuation and repatriation	Unlimited~
Home services sub-limit	*$500*
Extra travel cover	
Travel delay	$2,000; limit $250 per 24hrs
Missed connection – special events	$2,000
Resumption of **trip**	$3,000
Emergency accommodation due to **terrorism**	$3,000; limit $300 per day
Emergency expenses to avoid disaster	$1,000
Early return home	$2,000
Rental vehicle expenses	
Rental vehicle insurance excess	$5,000 *

Benefit	Applicable limits per adult
Return of **rental vehicle**	$750
Luggage	
Luggage and personal effects maximum limit	$12,000
Personal computer, *camera, video individual item limit*	*$4,000*
Smartphone individual item limit	*$1,000*
Other individual item limit	*$700*
Emergency luggage	$500
Stolen cash	$250
Hiring replacement golf and surf equipment	$200
Replacement passports and travel documents	$3,000
Fraudulent use of credit or debit cards	$3,000
Personal accident	
Accidental death	$25,000
*Accompanying **children** sub-limit*	*$1,000 per **child***
Funeral expenses overseas	$25,000
Total permanent disability	$12,500
Loss of income	$10,000; limit of $1,667 per month
Personal liability	$2,500,000
Coronavirus travel costs	$7,500

~ Where used, the term 'Unlimited' only means there is no capped dollar sum insured. Terms, conditions, exclusions, limits and applicable sub-limits apply - refer to the Policy Benefits and General Exclusions sections of the PDS for details.

* This is a limit per policy; it is the most **we'll** pay for all people on **your** Certificate of Insurance combined, per **trip**.
^ For up to 12 months after the **illness** first appears or **injury** first occurs.

Guidelines

- This plan is only available to **residents of Australia**.
- There is no cover under this plan when **you** are between **trips**, other than any benefits **you** may be entitled to under the Cancellation or holiday deferment costs and events 1 to 5 under **Coronavirus** travel costs.
- If **you** have an **existing medical condition** other than those automatically covered, please contact **us** to complete a medical

screening assessment, which must be completed before the Certificate of Insurance can be issued.

- There is cover for publicly available international river cruises, and ocean cruises within Australian waters or **international waters**, under this plan.
- There is no provision to suspend this plan during the **period of insurance**.
- This plan cannot be purchased more than 6 months prior to the nominated commencement date.
- This plan provides cover for any **trip** overseas or within Australia a minimum of 200km from **your home**.
- This policy only covers the adult travellers and any accompanying **children** named on the Certificate of Insurance. Named adults can travel independently to any other named adult on **your** plan. **Children** are only covered whilst accompanying an adult named on **your** Certificate of Insurance.
- There is no limit to the number of **trips you** may take during **your** 12 month **period of insurance**.
- The maximum duration of any one **trip** is 45 days. For any **trips** longer than this duration please refer to the section headed Extending your policy and contact **our representative**.
- A policy premium is charged for each adult traveller; accompanying **children** are insured for no additional premium.
- There is no age limit on this plan.
- Any options selected by **you** are in addition to this plan and are referenced in **your** Certificate of Insurance.

Region selection for Annual Multi Trip Plan

You must select a region based on the country(ies) **you** will be travelling to:

- Worldwide: or
- Worldwide excluding USA and Nepal.

Policy expiration for Annual Multi Trip Plan

- This policy will end 12 months from the nominated "Departure date" on **your** Certificate of Insurance and it is not a renewable contract. If it is possible that **your** policy may end during **your trip you** should apply for a new policy by contacting **our representative** to obtain a new PDS. If **you** wish to apply, complete a new application and, if required, contact **us** to complete a medical screening assessment.
- If **you** have continuous cover, the maximum allowable **trip** duration will start again at the "Departure date" nominated on the new Certificate of Insurance.

Definitions

The words and terms in **bold** throughout this policy have special meanings set out below. Plurals and other forms of these words shall have the same meaning as in the singular form.

Where other words and terms are only used in one section of the policy, **we'll** describe their special meaning in that section.

Word or term	Meaning
Arise	caused by or resulting from.
Carrier	the scheduled airline, vessel, train, or motor coach public transport in which **you** are to travel to or from **your** intended destination.
Child	**your** children, stepchildren, grandchildren, foster children, and children for whom **you** are the legal guardian, who are travelling with **you** on the same itinerary for the entire duration of **your trip** and at the time the Certificate of Insurance is issued are: ■ under 25 years of age, and ■ working less than 30 hours per week.
Chronic	a persistent and lasting condition in medicine. **We** do not consider that chronic pain has to be 'constant' pain, however in many situations it has a pattern of relapse and remission. The pain, disease or medical issue may be long-lasting, recurrent (occurred on more than two occasions) or characterised by long suffering.
Close contact	■ face-to-face contact in any setting with a confirmed or probable case, for 15 minutes or more. This is cumulative over the course of one week. It starts from 48 hours before the onset of symptoms in the confirmed or probable case; or ■ sharing a closed space with a confirmed or probable case for a prolonged period (e.g. more than 2 hours). This is in the period extending from 48 hours before onset of symptoms in the confirmed or probable case.
Close relative	a relative of **yours** or of a member of **your travelling party**, who is resident in Australia or New Zealand. It means a spouse, de facto partner, parent, parent-in-law, daughter, son, daughter-in-law, son-in-law, brother, sister, brother-in-law, sister-in-law, aunt, uncle, niece, nephew, grandchildren, grandparent, stepparent, stepchildren, fiance or fiancee, legal guardian, or those under **your** legal guardianship.
Coronavirus	the SARS-CoV-2 virus, and any disease caused directly by this virus, including COVID-19.
Electronic equipment	personal and portable game consoles, media players, satellite navigation units, wearable technology, headphones.

Word or term	Meaning
Existing medical condition	any medical condition which: ■ at the time **you** buy **your** policy is: ◆ **chronic**; or ◆ displaying symptoms; or ◆ under investigation; or ◆ pending follow-up consultation, treatment or surgery; or where these are recommended or planned; or ◆ metastatic; or ◆ terminal; or ■ in the six months prior to the time **you** buy **your** policy there has been: ◆ treatment by a **medical practitioner**; or ◆ medication prescribed; or ◆ surgery.
Financial default	the insolvency, bankruptcy, provisional liquidation, financial collapse, appointment of receivers or any other form of insolvency administration of any person, company, or organisation.
Home in Australia	**your** usual residential address in Australia. If **you** do not travel directly to **your** home in Australia at the completion of **your trip**, it means the point of arrival of **your** pre-paid **scheduled public transport** or an Australian hospital if **we** repatriate **you**.
Illness	any disease or sickness affecting the body or mind.
Injury	a bodily injury that is caused solely and directly by external and visible means as a result of an accident and which does not result from an **illness**.
International waters	The open seas of the world outside the territorial waters of any nation.
Medical practitioner	a medical professional registered and certified by the National or State Health Board (as required by law) either in Australia or in the country in which **you** are being treated whilst on **your trip**, and who is licensed to provide treatment, medication/prescriptions and medical opinions and reports – for example doctors, physiotherapists, dentists, psychologists and psychiatrists. A medical practitioner does not include a person who is related to **you** or a member of **your travelling party**.

Word or term	Meaning
Natural disaster	flood, cyclone, tornado, hurricane, typhoon, wild fire, tsunami, earthquake, landslide, avalanche, volcanic eruption. Natural disaster does not include outbreak of disease, epidemic, pandemic, or any other event that is not specifically included in this definition.
Our representative	an intermediary and their employees appointed by **us** as **our** agent to issue or vary nib travel insurance products on **our** behalf.
Period of insurance	the period between the departure date and 11.59pm AET on the return date shown on **your** Certificate of Insurance.
Personal computer	laptops, notebooks, tablets, other personal hand-held wireless devices that convey data or information (excluding smartphones).
Professional sporting activity	a sporting activity where **you** are paid to participate, appear or train or where **you** receive sponsorship, income or prize money, regardless of whether or not **you** are a professional sportsperson.
Rental vehicle	Any 4-wheeled vehicle with a gross vehicle mass less than 4.5 tonnes that **you**: ■ hire from a registered rental vehicle company; and ■ have a rental vehicle agreement in writing.
Resident of Australia	an Australian citizen; permanent resident; holder of a skilled working visa (including Temporary Skill Shortage visa, but not a working holiday visa); student visa; holder of a partner/spouse visa which allows **you** to stay in Australia for at least 2 years; or New Zealand passport holder; all with unrestricted right of entry into Australia and access to long-term medical care in Australia.
Scheduled public transport	publicly available flights, cruises, rail services, bus services, ferries that run to a published timetable.
Snow sports	snow skiing and snowboarding on and off piste, back country skiing and snowboarding, snowmobiling, tobogganing, cross-country skiing, telemark skiing.
Specified medical conditions	an **existing medical condition** that **we've** agreed in writing to cover under **your** policy and for which **you've** paid an additional premium. The additional premium will be shown on **your** Certificate of Insurance.
Terrorist act/ Terrorism	An act or threat of violence of any person or group, organisation or government committed for political, religious, ideological or similar purposes, including the intention to influence any government and/or to put the public in fear.

Word or term	Meaning
Total permanent disability	permanent and total loss of sight in one or both eyes, or permanent and total loss of use of one or more limbs.
Travelling party	**you** and any travelling companion who has made arrangements to accompany **you** for at least 50% of the duration of **your trip**.
Trip	In the case of the Comprehensive and Essentials Plans: it means travel during the period between the departure date and the return date listed on **your Certificate of Insurance**. The trip must start or end at **your home in Australia**. In the case of the Annual Multi Trip Plan, trip(s) means any travel up to 45 days in duration between the departure date and return date shown on **your** Certificate of Insurance. Each trip must: ■ Start and end at **your home in Australia**, and ■ Be to a destination of at least 200km from **your home in Australia**, and ■ Include travel by either pre-paid **scheduled public transport** or hire car, or include at least one night of pre-booked publicly available accommodation. The period of travel cannot be altered without **our** consent.
Unattended	leaving **your** luggage or personal effects: ■ in a public place where it can be taken without **your** knowledge or at a distance from which **you** cannot prevent it from being taken; or ■ with a person who is not a member of **your travelling party** or working for **your carrier** or accommodation provider.
We, our, us	AWP Australia Pty Ltd ABN 52 097 227 177 AFSL No 245631, trading as Allianz Global Assistance (AGA), who deal with **you** as agent of the insurer, Pacific International Insurance Pty Ltd ABN 83 169 311 193, AFSL No 523921. nib Travel Services (Australia) Pty Ltd ABN 81 115 932 173 AFSL No 308461 acts as third party administrator on behalf of AGA managing claims, complaints, enquiries and sales.
You, your, yours, yourself	the people listed in the Certificate of Insurance.

Existing medical conditions

The definition of **existing medical condition** applies to **you** where, at the time **you** buy **your** policy, **you** or a reasonable person in the same position could be expected to have been aware of the condition. It also applies to claims **you**

make that **arise** from the **existing medical condition(s)** of **your travelling party**, a **close relative**, and **your** business partner.

There are exclusions that may apply to claims **arising** from **existing medical condition(s)**.

If **you** have an **existing medical condition** that is not automatically covered, **you** must complete a medical screening at the time **you** buy **your** policy. If **we** agree to offer **you** cover for **your existing medical condition(s)**, these can be added to **your** policy under the **Specified medical conditions** option for an additional premium.

(This option is not available with the Essentials Plan.)

What's an existing medical condition?

An **existing medical condition** is any medical condition which:

- at the time **you** buy **your** policy is:
  - **chronic**; or
  - displaying symptoms; or
  - under investigation; or
  - pending follow-up consultation, treatment or surgery; or where these are recommended or planned; or
  - metastatic; or
  - terminal; or
- in the six months prior to the time **you** buy **your** policy there has been:
  - treatment by a **medical practitioner**; or
  - medication prescribed; or
  - surgery.

Getting cover for existing medical conditions (the "Specified medical conditions option")

A number of the most common medical conditions are automatically covered by **your** policy. Even if **your existing medical condition** isn't automatically covered, in many cases **you'll** still be able to get cover on application. Here's what **you** need to do:

1. Check if **your** condition is an automatically covered condition:

   We'll automatically cover **you** for over 40 medical conditions. If **your existing medical condition** is on the list of Automatically covered conditions, and **you** satisfy all the criteria related to that condition, **you're** covered for events that **arise** from that condition as part of **our** standard cover.

2. Apply to add any conditions that aren't automatically covered as **specified medical conditions** (this option is not available with the Essentials Plan):

   If **you** have one or more **existing medical conditions** that aren't automatically covered, **you** must let **us** know at the time **you** buy **your** policy and complete a medical screening. **We'll** ask **you** some questions about **your** health and then determine whether **we** can offer **you** cover and, if so, on what terms.

In many cases, **we** expect that **we'll** be able to offer **you** cover for **your existing medical condition(s)** for an additional premium. If **you** choose to pay the additional premium, the condition becomes a **specified medical condition** covered under **your** policy, and the premium and any additional **excess** will be shown on **your** Certificate of Insurance. **You'll** then be covered for events that **arise** from the **specified medical condition(s)**.

What happens if you choose not to get cover for your existing medical condition?

If **you** have an **existing medical condition** that's not automatically covered under **your** policy or added to **your** policy as a **specified medical condition**, then **you** won't be covered for any claim that **arises** from that **existing medical condition**.

Automatically covered conditions

We automatically cover **you** for over 40 **existing medical conditions** which may exist at the time **you** buy **your** policy. **Your** medical condition is classified by **us** as an automatically covered condition if it's listed in the table below, provided that **you** satisfy all criteria listed for that condition. **You** must read this section together with the General exclusions, as these may affect **your** cover.

Medical condition	Criteria
Acne	**You** haven't received treatment for **your** acne from a **medical practitioner** in the three months prior to buying **your** policy.
Allergies	**You** follow advice in accordance with **your medical practitioner** (such as to carry EpiPens, antihistamines/ other preventative medication at all times) and, at the time **you** buy **your** policy, **you**: ■ have no other known or underlying respiratory conditions or diseases (for example, asthma); and ■ have not required treatment from a **medical practitioner** for **your** allergies in the last six months.
Anaemia (Iron Deficiency)	No criteria apply.
Asthma	At the time **you** buy **your** policy, **you**: ■ are under 60 years of age; ■ have no other known or underlying respiratory conditions (including sleep apnoea); ■ haven't required cortisone medication, except taken by inhaler or puffer; and ■ haven't required hospitalisation for asthma in the last two years, including as an outpatient.
Bell's Palsy	No criteria apply.

Medical condition	Criteria
Benign Positional Vertigo	At the time **you** buy **your** policy, **you** haven't required hospitalisation for benign positional vertigo in the last two years, including as an outpatient.
Bunions	At the time **you** buy **your** policy, **you** haven't had surgery for bunions in the last three months and have no surgery planned.
Carpal Tunnel Syndrome	At the time **you** buy **your** policy, **you** haven't had surgery for carpal tunnel syndrome in the last three months and have no surgery planned.
Cataracts	At the time **you** buy **your** policy, **you** have no ongoing complications, haven't had surgery for cataracts in the last three months, and have no surgery planned.
Coeliac Disease	At the time **you** buy **your** policy, **you** haven't required hospitalisation for coeliac disease in the last two years, including as an outpatient.
Congenital Blindness	No criteria apply.
Congenital Deafness	No criteria apply.
Diabetes Mellitus (Types I and II)	At the time **you** buy **your** policy, **you**: ■ were diagnosed more than six months ago; ■ haven't had any complications in the last six months; ■ have no eye, kidney, nerve or vascular complications; ■ have a blood sugar level reading between 4 and 12 or a HbA1C score of 9% or less; and ■ have no known cardiovascular/coronary heart disease.
Dry Eye Syndrome	No criteria apply.
Ear Grommets	At the time **you** buy **your** policy, **you** have no current ear infection.
Epilepsy	At the time **you** buy **your** policy, **you've**: ■ no underlying medical conditions (for example, previous head trauma, stroke); ■ not changed **your** medication regime for epilepsy in the last 12 months; and ■ not required hospitalisation for epilepsy in the last two years, including as an outpatient.
Folate Deficiency	No criteria apply.

Medical condition	Criteria
Gastric Reflux	**Your** gastric reflux doesn't relate to another underlying diagnosis (examples: hernia or gastric ulcer).
Glaucoma	At the time **you** buy **your** policy, **you** have no ongoing complications, haven't had surgery for glaucoma in the last three months, and have no surgery planned.
Goitre	The underlying medical cause excludes tumour.
Graves' Disease	At the time **you** buy **your** policy, **you** haven't received treatment from a **medical practitioner** for Graves' disease in the last six months.
Hashimoto's Disease	The underlying medical cause excludes tumour.
Hiatus Hernia	At the time **you** buy **your** policy, **you** haven't had surgery for hiatus hernia in the last six months and have no surgery planned.
Hypercholesterolemia/ Hyperlipidaemia (High Cholesterol / High Lipids)	Provided **you** have no cardiovascular/coronary heart disease.
Hypertension (High Blood Pressure)	Provided at the time **you** buy **your** policy: ■ **you** have no known cardiovascular/coronary heart disease; and ■ **your** current blood pressure reading is lower than 165/95.
Hypothyroidism (underactive thyroid)	The underlying medical cause excludes tumour.
Hyperthyroidism (overactive thyroid)	The underlying medical cause excludes tumour.
Impaired Glucose Tolerance	At the time **you** buy **your** policy, **you**: ■ were diagnosed more than six months ago; ■ haven't had any complications in the last six months; ■ have no eye, kidney, nerve or vascular complications; ■ have a blood sugar level reading between 4 and 12 or a HbA1C score of 9% or less; and ■ have no known cardiovascular/coronary heart disease.

Medical condition	Criteria
Incontinence	**You** have no underlying gastrointestinal or urinary condition.
Insulin Resistance	At the time **you** buy **your** policy, **you've**: ■ no known cardiovascular/coronary heart disease; and ■ not required hospitalisation for insulin resistance in the last two years, including as an outpatient.
Iron Deficiency	No criteria apply.
Macular Degeneration	No criteria apply.
Migraine	**You** haven't required hospitalisation for migraines in the two years prior to buying **your** policy, including as an outpatient.
Nocturnal Cramps	No criteria apply.
Osteoporosis/ Osteopenia	At the time **you** buy **your** policy, **you**: ■ haven't had any fractures; ■ don't require more than one medication for this condition; and ■ have no other conditions involving the neck or back.
Pernicious Anaemia	No criteria apply.
Plantar Fasciitis	At the time **you** buy **your** policy, **you** haven't had surgery for plantar fasciitis in the last three months, and have no surgery planned.
Raynaud's Disease	At the time **you** buy **your** policy, **you** haven't required treatment by a **medical practitioner** for Raynaud's disease in the last six months.
Sleep Apnoea	At the time **you** buy **your** policy, **you**: ■ have no other known or underlying respiratory conditions (including asthma); and ■ haven't required hospitalisation for sleep apnoea in the last two years, including as an outpatient.
Solar Keratosis	**Your** condition has been confirmed as benign.
Trigeminal Neuralgia	**You** haven't required treatment by a **medical practitioner** for trigeminal neuralgia in six months prior to buying **your** policy.

Medical condition	Criteria
Trigger Finger	At the time **you** buy **your** policy, **you** haven't had surgery for trigger finger in the last three months, and have no surgery planned.
Vitamin B12 Deficiency	No criteria apply.

Changes in your health before travelling

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

Don't forget, **our** definition of an **existing medical condition** includes a condition that was displaying symptoms or that **you** were undergoing investigations for at the time **you** bought **your** policy. If **you** did not tell **us** about **your existing medical condition** when **you** bought **your** policy, contact **us** as soon as possible (contact details on last page of this document).

Pregnancy

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

- is covered by this policy;
- is a pregnancy-related **illness**; and
- occurs up to the end of the 26th week of **your** pregnancy.

We don't consider pregnancy to be an **existing medical condition**. However, pregnancy-related **illnesses** such as hyperemesis (severe morning sickness), gestational diabetes, and any other pregnancy-related **illness** must have first developed unexpectedly after **you** bought **your** policy. There is no cover for any **existing medical condition** related to **your** pregnancy, unless it has been added to **your** policy as a **specified medical condition** following a medical screening and **our** written offer to cover (this option is only available under the Comprehensive or Annual Multi Trip Plans, see Getting cover for **existing medical conditions**).

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

Looking to fall pregnant?

You don't need to currently be pregnant to apply for cover for a pregnancy-related **existing medical condition**. If **you're** thinking about having a baby and **you** have an **existing medical condition** related to a previous pregnancy, follow the instructions in Getting cover for **existing medical conditions** to apply for cover.

Cancellation and additional expenses

This section is divided into different benefits which apply depending on the plan, limits and any optional benefits **you** have chosen. The plan and any applicable limits appear on **your** Certificate of Insurance.

You must read this section together with the General exclusions as these may affect **your** cover.

What are the events that will be covered under this section?

We will cover **you** under this Cancellation and additional expenses section in respect of **your** planned **trip** if one of the following events occurs after the issue of the Certificate of Insurance:

1. **you** are unable to start or finish the **trip** because of the death, sudden serious **illness** or serious **injury** that occurs before or during the **trip** of:

   a. **you**; or

   b. a member of **your travelling party**; or

   c. a **close relative** or business partner who is a **resident** in Australia or New Zealand.

   However, before **we** will cover **you**, **you** must provide **us** with proof that:

   - **you** or a member of **your travelling party** were certified medically unfit to travel by a **medical practitioner**; or the death has occurred, or
   - in the case of a **close relative** or business partner, the death has occurred, or the **illness** or **injury** required hospitalisation or for **you** to care for them.

2. **you** are attending the childbirth of **your close relative**, provided the conception occurs after **you** bought **your** policy as verified by medical records.

3. **your** pre-paid **scheduled public transport** services or pre-paid tour have been cancelled or restricted by **your carrier** or service provider because of severe weather, **natural disaster**, riot, strike, civil insurrection, or hijacking.

4. **you** are unable to arrive at **your** departure point to start **your trip** due to a **natural disaster** causing road closures.

5. **you** are unable to start **your trip** due to severe weather or **natural disaster** causing damage to **your home in Australia** or **your** place of business within 72 hours of **your trip departure date**.

6. **your** pre-paid accommodation has been destroyed or is uninhabitable due to severe weather or **natural disaster** and no alternative equivalent accommodation is available in the vicinity. **You** must have done everything reasonable to obtain alternative accommodation.

7. a member of the **travelling party** is summoned to jury duty or to give evidence in a court of law.

8. **you** have been involved in, or **your** travel arrangements have been cancelled or delayed by, a motor vehicle, railway, air or marine accident. **You** must have evidence confirming the accident, such as documentation from an official body in the country where the accident happened.

9. **your** passport, travel documents or credit cards are stolen, accidentally lost or damaged.

10. a member of **your travelling party** has been retrenched from their permanent employment in Australia.

11. the cancellation of pre-arranged leave by an employer for a member of **your travelling party** who is a permanent employee of the police, fire, ambulance, Australian Defence Forces, or emergency services.

12. **you** are unable to start the **trip** because **your** employer cancels **your** pre-arranged leave and **you** are in permanent employment. This cover is limited to $1,000.

13. a wedding, conference, pre-paid concert, course, tuition or ticketed sporting event has been cancelled, and the sole purpose of the **trip** is to attend that wedding, conference, concert, course, tuition or ticketed sporting event.

14. a tour operator or wholesaler has cancelled a tour because there are not enough people to begin or complete the tour. Cover is limited to the pre-paid cost of the transport arrangements purchased solely to get to the departure point of the tour and returning from the finishing point of that tour, or rearrangement costs, whichever is the lesser.

Cancellation or holiday deferment costs

You are covered for this benefit under the Comprehensive, Essentials and Annual Multi Trip Plans.

What is covered?

If **you** have to cancel or rearrange **your trip** because of one of the reasons listed under What are the events that will be covered under this section?, **we** will pay either:

1. the non-refundable portion of **your** pre-paid travel arrangements and cancellation fees charged by **your** travel agent; or

2. the cost to rearrange **your trip**, provided that the cost is not greater than the amount that would have been incurred had **you** cancelled the **trip**,

for anyone listed on **your** Certificate of Insurance.

What is not covered?

1. **We** will not pay for a loss **arising** from any event other than those listed as covered under the Cancellation and additional expenses section.

2. **We** will not pay for any unused pre-paid transport costs where **we** have repatriated **you** a distance equivalent to, or greater than, the total distance remaining on **your** itinerary at the point of repatriation. Where the total distance of the repatriation is less than the unused travel arrangements **we** will calculate **your** entitlement on a pro-rata basis, taking into account the cost of **your** original ticket.

3. **We** will not pay for any pre-paid **snow sports** arrangements on the Comprehensive or Annual Multi Trip Plans, unless **you** have purchased the **Snow sports** cover option and this option is shown on **your** Certificate of Insurance.

4. There is no cover where **you** have made a claim for the same costs under any other section of the policy.

5. **We** will not pay for any non-refundable costs for anyone not named on **your** policy.
6. **We** will not pay more than the cancellation limit amount that **you** selected which appears on **your** Certificate of Insurance.
7. In the case of Agent's cancellation fees, **we** will not pay more than the limit outlined in the Schedule of benefits.

What is the most we will pay?

The most **we** will pay per policy for this benefit is the Cancellation - chosen limit shown on **your** Certificate of Insurance.

If **you** paid for any part of **your trip** using loyalty points or similar reward points, the amount **we** will pay is calculated as follows:

1. the cost of the equivalent class airline ticket, based on the best available advance purchase airfare for the same season of the following year, less **your** financial contribution towards the airline ticket;
2. multiplied by the total amount of points lost;
3. divided by the total amount of points redeemed to obtain the airline ticket.

Example:

Equivalent class advance purchase airfare = $1,000

Points lost = 5,000

Points redeemed to obtain original ticket = 20,000

Claimable amount = $1,000 x (5,000/20,000) = $250

We will not pay for or reinstate **your** Frequent Flyer Points or similar reward points if **you** are able to recover the points or their value from any source.

Emergency travel arrangements and accommodation expenses

You are covered for this benefit under the Comprehensive, Essentials and Annual Multi Trip Plans.

What is covered?

We will cover **you** for expenses **you** incur for **your** reasonable additional travel, accommodation, meals, internet use and emergency telephone calls, if **you** have to interrupt **your trip** after it has begun, because of an event set out under What are the events that will be covered under this section?.

We will pay the higher of the non-refundable cancellation fees or the additional rearrangement costs that have been incurred as a result of the same event.

What is not covered?

1. **We** will not pay for a loss **arising** from any event other than those listed under What are the events that will be covered under this section?.
2. **We** will not pay any additional travel **you** undertake above the fare class that **you** originally chose, except where **we** agree a different fare class is reasonable on the basis of a written recommendation provided by **your** attending **medical practitioner**.

3. If the interruption to **your trip** requires repatriation or an early return to Australia, **you** must not organise any additional travel or accommodation in excess of $2,000 without prior consent from **us**. If **you** do not contact **us** for **our** prior consent, **we** may limit what **we** pay to what are reasonable expenses in the circumstances.

4. If **you** return to **your home in Australia** because of the interruption and **you** did not have a return ticket at the time of the event that causes a claim under this section, **we** will deduct from the amount **we** pay **you** the cost of an economy class airfare at the **carrier's** regular published rates for the return journey.

5. **We** will not pay for any expenses **you** incur to resume **your trip** after **you** have returned to **your home in Australia**, except as set out under the section Resumption of **trip**.

6. **We** will not pay for additional accommodation where **you** have claimed for cancelled accommodation expenses covering the same period of time.

7. **We** will not pay for accommodation expenses for periods where **you** have not forfeited pre-paid accommodation arrangements, except as set out under Post-hospital accommodation, or if **you** are past **your** planned return date and **we** agree that **you** are unfit to travel.

8. There is no cover where **you** have made a claim for the same event under any other section of the policy.

What is the most we will pay?

The most **we** will pay for this benefit is shown in the Schedule of benefits for **your** chosen plan. Limits apply per adult traveller and are not increased for accompanying **children**.

Post-hospital accommodation

You are covered for this benefit under the Comprehensive and Annual Multi Trip Plans.

When does the cover begin and end?

The cover under this benefit begins when **you** leave hospital and ends when **your medical practitioner** deems **you** are fit to resume **your trip**, or after 5 days, whichever occurs first.

What is covered?

We will cover **you** if **you** are hospitalised overseas for more than 48 hours because of an **illness** or **injury** which first happened while **you** were outside Australia on **your trip**, and **you** need accommodation to recover from **your illness** or **injury** after **you** leave hospital. Before **we** will pay this **you** must have consent from **us**. If **you** do not contact **us** for **our** prior consent, **we** may limit what **we** pay to what are reasonable expenses in the circumstances.

What is not covered?

1. **We** will not pay for post-hospitalisation accommodation expenses when **you** have also made a claim for cancelled accommodation expenses covering the same period of time.

2. There is no cover where **you** have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most **we** will pay for this benefit is shown in the Schedule of benefits for **your** chosen plan. Limits apply per adult traveller and are not increased for accompanying **children**.

Medical expenses

This section is divided into different benefits which apply depending on the plan **you** have chosen.

You must read this section together with the General exclusions as these may affect **your** cover.

Overseas medical expenses

You are covered for this benefit under the Comprehensive, Essentials and Annual Multi Trip Plans.

What is covered?

We will cover **you** for:

1. reasonable and necessary emergency medical, hospital and ambulance expenses that **you** incur **arising** from **your** death or **your** new **illness** or **injury**, **specified medical condition,** or automatically covered condition;
2. a return economy class airfare and reasonable accommodation for a friend or relative to travel directly to **you**, if **you** are hospitalised with a sudden, life-threatening **injury** or **illness** during **your trip**;
3. dental treatment expenses **you** incur **arising** from an **injury** to healthy natural teeth and which cannot be delayed until **your** return to Australia.

All treatment must be provided by a qualified and registered **medical practitioner** in the country **you** are being treated in.

Where **you** need treatment for an **injury** by a physiotherapist, chiropractor or osteopath, **you** may have the first 6 treatments without asking **us**. Any treatments after that must be with **our** consent.

All expenses under this section must be incurred within 12 months of the date of the **illness** or **injury**.

What is not covered?

1. There is no cover for any medical, hospital, dental or ambulance expenses **you** incur in Australia.
2. There is no cover for medical expenses **arising** from **you** travelling with the intention of receiving medical treatment.
3. There is no cover under this benefit for a loss **arising** from an **illness** or **injury**, the signs and symptoms of which **you** first became aware of after **you** purchased **your** policy but before **you** started **your trip**, where **you** did not obtain confirmation from **your medical practitioner** that **you** were fit to travel.
4. There is no cover for damage to dentures or dental prostheses under this section. Refer to the Luggage and personal effects section for cover that may be available.
5. There is no cover for dental expenses **arising** from gingivitis, decay, normal wear and tear or the normal maintenance of dental health.

6. There is no cover for crowns, caps, whitening, cleaning, scaling, creation of a new dental bridge or dental implants.

7. There is no cover for ongoing payments under this benefit if **we** decide, based on the reasonable recommendation of a **medical practitioner** appointed by **us**, that **you** are capable of being repatriated to Australia. If **you** do not agree to return to Australia to continue **your** medical treatment, ongoing cover will be limited to what **we** determine would have been the cost to return **you** to Australia.

8. There is no cover where **you** have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most **we** will pay for this benefit is shown in the Schedule of benefits for **your** chosen plan. Limits apply per adult traveller and are not increased for accompanying **children**, subject to the following:

- Medical expenses to treat an **illness** or **injury** must be reasonable and medically necessary,
- If **you** have paid an additional premium for cover for a **specified medical condition**, any additional terms and conditions which **we** notified to **you** in writing will also apply,
- The most **we** will pay for a dental **injury** event requiring only dental treatment is $1,000.

Hospital compensation

No excess applies to claims under this benefit.

You are covered for this benefit under the Comprehensive, Essentials and Annual Multi Trip Plans.

What is covered?

We will cover **you** if **you** are hospitalised overseas for more than 48 continuous hours because of an **illness** or **injury** which first happened while **you** were outside Australia on **your trip**.

What is the most we will pay?

The most **we** will pay for this benefit is shown in the Schedule of benefits for **your** chosen plan. Limits apply per adult traveller and are not increased for accompanying **children**.

Dental expenses due to sudden and acute pain

You are covered for this benefit under the Comprehensive, Essentials and Annual Multi Trip Plans.

What is covered?

We will cover **you** for dental treatment expenses **you** incur overseas to relieve sudden and acute dental pain.

We will pay expenses which **we** believe are reasonable and necessary to treat the pain. Before **we** will pay this **you** must give **us** written certification from **your** treating dentist that treatment is necessary to alleviate **your** pain. Any treatment **you** receive must be given by a dentist or oral surgeon who is registered to practice in the country where **you** receive treatment.

What is not covered?

1. There is no cover for dental expenses **arising** from gingivitis, normal wear and tear or the normal maintenance of dental health.
2. There is also no cover for any dental expenses **you** incur in Australia.
3. There is no cover for crowns, caps, whitening, cleaning, scaling, creation of a new dental bridge or dental implants.
4. There is no cover for cosmetic dentistry.
5. There is no cover where **you** have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most **we** will pay for this benefit is shown in the Schedule of benefits for **your** chosen plan. Limits apply per adult traveller and are not increased for accompanying **children**.

Medical evacuation and repatriation

You are covered for this benefit under the Comprehensive, Essentials and Annual Multi Trip Plans.

You must read this section together with the General exclusions as these may affect **your** cover

What is covered?

We will cover **you** if **you** have to interrupt **your trip** after it has begun because **you** have suffered an **illness** or **injury** while **you** are on **your trip**, and based on the reasonable recommendation of a **medical practitioner** appointed by **us**, **you** need to be evacuated or repatriated. **We** will pay transport and accommodation expenses which **we** believe are reasonable and necessary to bring **you** back to **your home in Australia**, or to another destination of **our** choice. The decision to evacuate or repatriate **you** is **ours**, and **we** will not pay for any evacuation or repatriation expenses unless **you** have received **our** consent.

We will pay for expenses for transporting **your** remains to a funeral home in Australia if **you** die during the **trip**.

We will either:

- return **you** to **your home in Australia** with a medical attendant; or
- pay for a return economy class airfare, reasonable accommodation and additional expenses for a friend or relative to fly to, remain with and escort **you** in place of a medical attendant; or
- return **you** to **your home in Australia** without an attendant.

Under the Comprehensive and Annual Multi Trip Plans, **we** will also pay **you** for necessary home services provided by a registered home services business if **you** have been repatriated to **your home in Australia** by **us** during **your trip** and **your illness** or **injury** restricts **your** ability to perform these duties. **You** must have **our** consent before **you** incur any costs for home services.

What is not covered?

1. There is no cover for any medical, hospital, dental or ambulance expenses **you** incur in Australia.

2. **We** will not cover a loss **arising** from **your** evacuation or repatriation that is not medically necessary or that is undertaken without **our** consent.

3. There is no cover under this benefit for a loss **arising** from an **illness** or **injury**, the signs and symptoms of which **you** first became aware of after **you** purchased **your** policy but before **you** started **your trip**, where **you** did not obtain confirmation from **your medical practitioner** that **you** were fit to travel.

4. **We** will not pay for any expenses **you** incur to resume **your trip** after **you** have returned to **your home in Australia**.

5. For repatriation, **we** will not pay more than the cost of repatriation to **your home in Australia**.

6. There is no cover for any additional costs for travel **you** undertake that is not at the fare class that **you** originally chose, except where **we** agree a different fare class is reasonable on the basis of a written recommendation provided by the appointed **medical practitioner**.

7. If **you** do not have a return ticket at the time of the event that causes a claim under this section, **we** will deduct from the amount **we** pay **you** the cost of an economy class airfare at the **carrier's** regular published rates for the return journey.

8. There is no cover where **you** have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most **we** will pay for this benefit is shown in the Schedule of benefits for **your** chosen plan. Limits apply per adult traveller and are not increased for accompanying **children**.

Extra travel cover

This section is divided into different benefits which apply depending on the plan **you** have chosen.

You must read this section together with the General exclusions as these may affect **your** cover.

Travel delay

No excess applies to claims under this benefit.

You are covered for this benefit under the Comprehensive, Essentials and Annual Multi Trip Plans.

What is covered?

We will cover **you** if during **your trip**, **your** pre-paid **scheduled public transport** is delayed (including delays caused by cancellation or rescheduling) due to an unforeseen reason outside **your** control, and **you** are subsequently delayed for at least 6 hours.

We will cover **you** for:

1. the reasonable cost of rearranging **your** travel arrangements to resume **your** pre-paid arrangements; and

2. the cost of reasonable additional accommodation and meals.

What is not covered?

There is no cover where **you** have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most **we** will pay for this benefit is shown in the Schedule of benefits for **your** chosen plan. Limits apply per adult traveller and are not increased for accompanying **children**.

Missed connection – special events

You are covered for this benefit under the Comprehensive and Annual Multi Trip Plans.

What is covered?

We will cover **you** if **your trip** is interrupted by an event that is not anticipated, is unexpected, and is outside of **your** control, and **you** are unable to arrive at **your** destination by the time originally scheduled for the purpose of attending a wedding, funeral, conference, 25th or 50th wedding anniversary, concert or ticketed sporting event which cannot be delayed as a consequence of **your** late arrival. **We** will pay for the reasonable additional cost of using alternative public transport to arrive at the destination on time.

What is not covered?

There is no cover where **you** have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most **we** will pay for this benefit is shown in the Schedule of benefits for **your** chosen plan. Limits apply per adult traveller and are not increased for accompanying **children**.

Resumption of trip

This benefit is in place of, and not in addition to, any benefit payable under Cancellation or holiday deferment costs.

You are covered for this benefit under the Comprehensive and Annual Multi Trip Plans.

What is covered?

We will cover **you** if **you** have to return to Australia because of the hospitalisation or death of a **close relative** in Australia during **your trip** as a direct result of sudden serious **illness** or serious **injury**. **We** will pay **you** for the transport costs **you** have paid to resume **your** original **trip**.

However, **we** will only do so if, at the date **you** return to Australia:

- **you** have more than 25% of the duration of **your trip** remaining, and
- **you** resume **your** journey within 6 months from the date that **you** return to **your home in Australia**, and
- **you** have not made a claim for cancellation costs under this policy.

What is not covered?

1. **We** will pay no more than the cancellation costs that would have been incurred on unused pre-paid arrangements had **you** not resumed **your** journey.
2. There is no cover under this policy for any period of time **you** are in Australia.
3. **Your** policy will not recommence when **you** leave Australia to resume **your** journey. **You** must take out a new policy to have cover.

4. There is no cover where **you** have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most **we** will pay for this benefit is shown in the Schedule of benefits for **your** chosen plan. Limits apply per adult traveller and are not increased for accompanying **children**.

Emergency accommodation due to terrorism

You are covered for this benefit under the Comprehensive and Annual Multi Trip Plans.

What is covered?

We will cover **you** after **your trip** has begun for expenses **you** incur for necessary emergency accommodation if **your trip** is interrupted due to a **terrorist act.**

What is not covered?

There is no cover where **you** have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most **we** will pay for this benefit is shown in the Schedule of benefits for **your** chosen plan. Limits apply per adult traveller and are not increased for accompanying **children**.

Emergency expenses to avoid disaster

No excess applies to claims under this benefit.

You are covered for this benefit under the Comprehensive, Essentials and Annual Multi Trip Plans.

What is covered?

During **your trip, we** will cover **you** for reasonable additional travel arrangements **you** make within 48 hours of a public warning being issued in the mass media of severe weather, **natural disaster**, riot, strike or civil insurrection that is likely/expected to directly impact **your** travel arrangements.

What is not covered?

There is no cover where **you** have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most **we** will pay for this benefit is shown in the Schedule of benefits for **your** chosen plan. Limits apply per adult traveller and are not increased for accompanying **children**.

Early return home

No excess applies to claims under this benefit.

You are covered for this benefit under the Comprehensive, Essentials and Annual Multi Trip Plans.

What is covered?

We will cover **you** if **your** usual place of residence or business premises in Australia has been destroyed or rendered insecure due to a **natural disaster**, fire or malicious damage. Cover is limited to the additional expenses incurred

in returning **you** to the nearest practical accommodation to **your home in Australia.**

What is not covered?

There is no cover where **you** have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most **we** will pay for this benefit is shown in the Schedule of benefits for **your** chosen plan. Limits apply per adult traveller and are not increased for accompanying **children**.

Rental vehicle expenses

This section is divided into different benefits which apply depending on the plan **you** have chosen.

You must read this section together with the General exclusions as these may affect **your** cover.

Rental vehicle insurance excess

You are covered for this benefit under the Comprehensive, Essentials and Annual Multi Trip Plans.

What is covered?

We will cover **you** for the **rental vehicle** insurance excess, or the cost of repairing the vehicle, whichever is lower, if:

- **you** rent a vehicle from a rental company;
- it is damaged by accident, storm, fire or theft; and
- **you** are a nominated driver on the Rental Vehicle Agreement.

For this benefit to apply, the **rental vehicle** must have valid comprehensive motor vehicle insurance for the period of hire.

What is not covered?

- This cover is not in place of **rental vehicle** insurance and only provides cover for the excess component up to the applicable limit.
- There is no cover for **your** liability **arising** from **your** use of a mechanically propelled vehicle (e.g. motor vehicle or motor cycle).
- There is no cover where the loss event is not covered by the **rental vehicle's** comprehensive motor vehicle insurance.
- There is no cover for administration or loss of use fees charged by the rental company.

What is the most we will pay?

The most **we** will pay for this benefit is shown in the Schedule of benefits; or, where **you** have purchased the Additional **rental vehicle** insurance excess option, **we** will pay up to the chosen limit for **Rental vehicle** insurance excess shown on **your** Certificate of Insurance.

Return of rental vehicle

No excess applies to claims under this benefit.

You are covered for this benefit under the Comprehensive, Essentials and Annual Multi Trip Plans.

What is covered?

We will pay towards the cost of returning **your rental vehicle** to the nearest depot, including airport concession charges, if due to a claimable event covered by any section of this policy **you** are unable to do so during **your trip**.

What is not covered?

There is no cover where **you** have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most **we** will pay for this benefit is shown in the Schedule of benefits for **your** chosen plan. Limits apply per adult traveller and are not increased for accompanying **children**.

Luggage

This section is divided into different benefits which apply depending on the plan **you** have chosen.

You must read this section together with the General exclusions as these may affect **your** cover.

Luggage and personal effects

You are covered for this benefit under the Comprehensive, Essentials and Annual Multi Trip Plans.

What is covered?

We will cover **you** for each of the following:

1. accidental loss, theft of, or damage to, **your** luggage or personal effects including things **you** buy during the **trip**, while they are accompanying **you** during **your trip**.
2. loss of, or damage to, dentures or dental prostheses whilst not on **your** person during **your trip**.
3. the cost of medical consultation fees **you** incur to replace prescription medication which is accidentally lost, stolen or damaged, together with the cost of the medication itself.
4. theft of, or damage to, **your** luggage or personal effects while they are left concealed during daylight hours in a locked motor vehicle, motor home, or caravan. There must be proof of forced entry into the vehicle.
5. theft of, or damage to, **your** luggage or personal effects while they are left in a locked storage facility. There must be proof of forced entry into the facility.

What is not covered?

There is no cover under this section for any of the following:

1. accidental loss or damage to or theft of:
    a. cash, bank or currency notes, cheques or negotiable instruments other than allowed for under the Stolen Cash section;
    b. fragile or brittle items (eg. glass or china), except loss or damage caused by fire, or by accident to the transport carrying them;

c. damage to computer, tablet or smartphone screens at any time;

d. damage to software or applications;

e. luggage or personal effects that are being transported independently of **you**;

f. luggage or personal effects that **you** leave **unattended** or that occurs because **you** do not take reasonable care to protect it;

g. luggage or personal effects for which **you** are entitled to compensation from the **carrier**;

h. **personal computers**, smartphones, communication or photographic equipment, **electronic equipment**, jewellery or watches left by **you** in a motor vehicle, a motor home or a caravan for any length of time, even if they are locked in the motor vehicle, motor home or caravan;

i. luggage or personal effects left by **you** for any length of time:

   (i) in an unlocked motor vehicle, motor home or caravan; or

   (ii) unconcealed in a motor vehicle, motor home or caravan; or

   (iii) between sunset and sunrise in a motor vehicle, motor home or caravan.

j. luggage or personal effects left by **you** in a tent for any length of time;

k. **personal computers**, smartphones, communication or photographic equipment, **electronic equipment**, jewellery or watches checked in as luggage;

l. trade items, trade samples or **your** tools of trade or profession;

m. gold or precious metals, precious unset or uncut gemstones;

n. watercraft of any type (excluding theft of surfboards or damage to surfboards whilst in the custody of a **carrier**);

o. a drone i.e. an aircraft without a human pilot aboard;

p. sporting equipment whilst in use;

q. **snow sports** equipment unless **you** have selected the **Snow sports** cover option and paid the additional premium;

r. luggage or personal effects that have been left in a locked storage facility for greater than 48 hours.

2. losses **arising** from wear and tear or depreciation of property or damage by the action of insects or vermin, mildew, humidity, rust or corrosion.

3. malfunction repair costs or losses **arising** from mechanical or electrical breakdown.

4. where **you** have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most **we** will pay for this benefit is shown in the Schedule of benefits for **your** chosen plan. Limits apply per adult traveller and are not increased for accompanying **children**. **We** will not pay more than the original price **you** paid for an item, even if the applicable limit set out in the Schedule of benefits is higher.

We will, after allowing for wear, tear, and depreciation, choose to:

1. pay or reimburse the cost of repairing **your** item; or
2. replace **your** property; or
3. pay **you** its depreciated value in cash.

To achieve a reasonable settlement, **we** consider the circumstances of the loss, the age, condition and value of the original item and the extent of any damage.

The limits for specific items are set out in the Schedule of benefits and depend on the plan **you** have chosen, unless **you** have separately insured an item under the Specified items option.

A pair or related set of items are considered to be one item (for example, a camera and its lenses (attached or not), tripod and accessories, a chain and pendant, or a pair of hearing aids) unless each individual item has been separately insured under the Specified items option.

If **you** have separately insured an item under the Specified items option, depreciation does not apply. In the event of a claim **you** must provide **us** with a receipt or valuation which is dated from before **you** specified the item on **your** policy. If **you** are not able to supply this, the item(s) will be settled in accordance with the items limits listed in the Schedule of benefits, and the additional premium **you** paid to specify the item will be reimbursed to **you**.

Items separately insured under the Specified items option are covered up to the amount specified and will not be deducted from the total luggage limit set out in the Schedule of benefits.

Depreciation

The nominated depreciation rate will apply to each year of age or part thereof (calculated pro-rata on a monthly basis) up to a maximum of 80% of the original purchase price of that item.

Depreciation amounts

10%	Camping, sporting and leisure equipment (not leisure clothing), and musical instruments.
15%	Clothing, footwear, personal effects, luggage, prescription glasses, sunglasses, costume jewellery and books.
20%	**Personal computer**, communication or photographic equipment, **electronic equipment**, mobile phones, smart phones, CDs and DVDs.
50%	Toiletries including skin care, makeup, perfume, medication.

For items not listed above, **we** will apply the depreciation amount of the category which **we** reasonably determine most closely describes **your** item.

Emergency luggage

No excess applies to claims under this benefit.

You are covered for this benefit under the Comprehensive, Essentials and Annual Multi Trip Plans.

What is covered?

We will cover **you** towards the cost of purchasing essential articles such as clothing, toiletries and personal requisites if **your** accompanied luggage is delayed, misdirected or temporarily misplaced by the **carrier** for a period in excess of 10 hours during **your trip**. If **your** luggage is not recovered, the amount paid by **us** for the loss will be reduced by the total of any amounts paid for under this section.

What is not covered?

1. There is no cover where **you** have made a claim for the same costs under any other section of the policy.
2. There is no cover for purchase of jewellery, perfume, fragrances or alcohol.
3. This benefit does not apply on the leg of **your trip** that returns **you** to **your home in Australia**.

What is the most we will pay?

The most **we** will pay for this benefit is shown in the Schedule of benefits for **your** chosen plan. Limits apply per adult traveller and are not increased for accompanying **children**.

If after 72 hours **your** accompanied luggage is still missing, the applicable limit for this benefit is doubled.

Stolen cash

No excess applies to claims under this benefit.

You are covered for this benefit under the Comprehensive and Annual Multi Trip Plans.

What is covered?

We will cover **you** for the loss of cash that was either carried on **your** person at the time of loss or secured in a locked safe, provided that **you** reported the loss to the police immediately or as soon as possible after becoming aware of the loss and obtained a written police report.

What is not covered?

There is no cover where **you** have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most **we** will pay for this benefit is shown in the Schedule of benefits for **your** chosen plan. Limits apply per adult traveller and are not increased for accompanying **children**.

Hiring replacement golf and surf equipment

No excess applies to claims under this benefit.

You are covered for this benefit under the Comprehensive and Annual Multi Trip Plans.

What is covered?

If **your** golf or surf equipment is accidentally lost, delayed or damaged during **your trip we** will pay for the cost of hiring replacement golf or surf equipment.

What is not covered?

There is no cover where **you** have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most **we** will pay for this benefit is shown in the Schedule of benefits for **your** chosen plan. Limits apply per adult traveller and are not increased for accompanying **children**.

Replacement passports and travel documents

You are covered for this benefit under the Comprehensive, Essentials and Annual Multi Trip Plans.

What is covered?

We will pay for the cost of reissuing or replacing **your** travel or personal documents, drivers licence, travellers' cheques, passport, or debit or credit cards, after they have been stolen, accidentally lost or damaged during **your trip**.

We will also cover the reasonable cost of **you** travelling to the nearest location where the documents can be replaced. **You** must comply with any conditions of the issuing body of the travel documents, travellers' cheques, passport, or debit or credit cards.

What is not covered?

There is no cover where **you** have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most **we** will pay for this benefit is shown in the Schedule of benefits for **your** chosen plan. Limits apply per adult traveller and are not increased for accompanying **children**.

Fraudulent use of credit or debit cards

You are covered for this benefit under the Comprehensive and Annual Multi Trip Plans.

What is covered?

We will cover **you** for the fraudulent use of **your** credit or debit card if it was accidentally lost, skimmed or stolen during **your trip**. **You** must comply with any conditions of the issuing body of the credit or debit card.

What is not covered?

1. There is no cover under this benefit if the credit or debit cards are fraudulently used by **you**, **your** relative or a travelling companion.
2. There is no cover where **you** have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most **we** will pay for this benefit is shown in the Schedule of benefits for **your** chosen plan. Limits apply per adult traveller and are not increased for accompanying **children**.

Personal accident

No excess applies to claims under this section.

This section is divided into different benefits which apply depending on the plan **you** have chosen.

You must read this section together with the General exclusions as these may affect **your** cover.

Accidental death

You are covered for this benefit under the Comprehensive, Essentials and Annual Multi Trip Plans.

What is covered?

We will pay **your** Estate if during **your trip**:

- **you** suffer an **injury** which results in **your** death within 12 months of the **injury** being sustained; or
- **you** disappear and are presumed dead because **your** means of transport disappeared, sank or was wrecked, and **your** body has still not been found 12 months after **your** disappearance.

What is not covered?

1. There is no cover if **your** death **arises** from an **illness** or **your** suicide.
2. There is no cover where **your** Estate has made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most **we** will pay for this benefit is shown in the Schedule of benefits for **your** chosen plan. Limits apply per adult traveller and are not increased for accompanying **children**.

Funeral expenses overseas

You are covered for this benefit under the Comprehensive, Essentials and Annual Multi Trip Plans.

What is covered?

We will pay for expenses for **your** burial or cremation overseas if **you** die during the **trip**.

What is not covered?

There is no cover where **your** Estate has made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most **we** will pay for this benefit is shown in the Schedule of benefits for **your** chosen plan. Limits apply per adult traveller and are not increased for accompanying **children**.

Total permanent disability

You are covered for this benefit under the Comprehensive and Annual Multi Trip Plans.

What is covered?

We will cover **you** if during **your trip you** suffer an **injury** and as a result of that **injury you** suffer **total permanent disability** within 12 months of sustaining the **injury**.

What is not covered?

1. There is no cover if **you** suffer **total permanent disability arising** from an **illness**.
2. There is no cover where **you** have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most **we** will pay for this benefit is shown in the Schedule of benefits for **your** chosen plan. Limits apply per adult traveller and are not increased for accompanying **children**.

Loss of income

You are covered for this benefit under the Comprehensive and Annual Multi Trip Plans.

What is covered?

We will cover **you** if due to an **injury you** suffer during **your trip**, and on the advice of **your medical practitioner**, **you** are unable to return to **your** usual place of employment or take up an offer of employment in Australia.

We will pay **you** for:

- **your** average monthly income based on **your** previous 12 months earnings (net of income tax) in the case **you** are unable to return to **your** usual place of employment; or
- **your** average monthly income based on **your** documented projected income for the next 12 months (net of income tax) if **you** are unable to take up an offer of employment.

This benefit is only payable if **you** are unable to resume or begin **your** employment within 30 days of the **injury**. Before **we** make any payment **we** will contact Centrelink or similar bodies to confirm any payments that must be deducted from any payment **we** make.

What is not covered?

1. **We** will not pay **you** in respect of the first 30 days after **you** originally planned to resume work in Australia.
2. There is no cover where **you** have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most **we** will pay for this benefit is shown in the Schedule of benefits for **your** chosen plan. Limits apply per adult traveller and are not increased for accompanying **children**.

Personal liability

You are covered for this benefit under the Comprehensive, Essentials and Annual Multi Trip Plans.

You must read this section together with the General exclusions as these may affect **your** cover.

What is covered?

We will pay **you** for **your** legal liability to pay damages or compensation because **your** negligence during the **trip** causes:

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

We will also pay **your** legal costs in relation to that liability, but only if **you** get **our** consent before legal costs are incurred or **you** take any legal action.

What is not covered?

1. There is no cover for any liability:
    a. **arising** from **your** trade, business or profession; or
    b. for injury to an employee **arising** from, or in the course of, their employment by **you**; or
    c. **arising** from **your** intentional, unlawful, wilfully negligent, or malicious act; or
    d. **arising** from **your** ownership, possession or use (including as a passenger) of a mechanically propelled vehicle for example, motor vehicle, motor cycle, aircraft or watercraft; or firearm; or
    e. **arising** from **you** passing on an **illness** to another person.
2. There is no cover where **you** have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most **we** will pay for this benefit is shown in the Schedule of benefits for **your** chosen plan. Limits apply per adult traveller and are not increased for accompanying **children**.

Coronavirus travel costs

You are covered for this benefit under the Comprehensive and Annual Multi Trip Plans.

You must read this section together with the General exclusions as these may affect **your** cover.

For details of the cover available for medical expenses overseas and medical repatriation/evacuation, see sections: Overseas Medical Expenses, Hospital Compensation, Funeral Expenses Overseas and Medical Evacuation and Repatriation.

What is covered?

This section covers **you** for:

1. **You** or a member of **your travelling party** are diagnosed with **Coronavirus** and **you** have to cancel or rearrange **your trip**, **we** will pay either the non-refundable portion of **your** pre-paid travel arrangements or **your** rearrangement costs up to what **you** would lose if **you** cancelled **your trip** entirely. **You** or they must be medically unfit or not permitted by the relevant authority to continue with **your** original travel plans. **You** or they must have been diagnosed by a **medical practitioner** or have a diagnosis registered with the relevant authority. The diagnosis of **Coronavirus** must be made after policy purchase.
2. **Your close relative** or business partner in Australia is hospitalised or dies due to **Coronavirus** and **you** have to cancel or rearrange **your trip**, **we** will pay either the non-refundable portion of **your** pre-paid travel arrangements or **your** rearrangement costs up to what **you** would lose if **you** cancelled **your trip** entirely. The diagnosis of **Coronavirus** must be made after policy purchase.
3. **You** or a member of **your travelling party** are permanently employed as a healthcare worker, residential care worker or law enforcement officer,

and **your** or their pre-approved leave is cancelled by the employer due to **Coronavirus**, **we** will pay either the non-refundable portion of **your** pre-paid travel arrangements or **your** rearrangement costs up to what **you** would lose if **you** cancelled **your trip** entirely.

4. **You** are unable to continue with a pre-paid escorted tour that forms part of **your trip** if it is cancelled due to **your** tour guide contracting **Coronavirus**, **we** will pay for **your** reasonable additional travel and accommodation. **You** must provide written confirmation from the provider.

5. **You** are unable to stay at **your** pre-paid accommodation due to a staff shortage caused by the accommodation provider's staff contracting **Coronavirus**, or it being closed for cleaning due to a confirmed case of **Coronavirus** at the accommodation, **we** will pay for **your** reasonable additional travel and accommodation. **You** must provide written confirmation of the closure from the provider.

6. During **your trip you** are not permitted to board **your scheduled public transport** due to **you** being suspected of being infected with **Coronavirus**, **we** will pay for **your** reasonable additional travel, meals and accommodation. **You** must provide confirmation from the **carrier** or relevant authority.

7. During **your trip**, **you** or a member of **your travelling party** are confined to compulsory quarantine as a result of **your** or their diagnosis of, or confirmed **close contact** with a case of, **Coronavirus**, **we** will pay for **your** reasonable additional travel, meals and accommodation, including in-room entertainment. **You** must provide written confirmation from the attending **medical practitioner** or local health authority that **your** quarantine is necessary due to **your** or **your travelling party's** diagnosis or confirmed **close contact**.

8. During **your trip**, **you** are unable to take care of **your** dependent children due to **you** being diagnosed with **Coronavirus**, **we** will pay **your** reasonable additional childcare costs for a registered or appropriately qualified childcare worker to take care of **your** dependent children who would otherwise have been in **your** full-time care.

9. During **your trip**, **you** are diagnosed with **Coronavirus**, **we** will pay **your** reasonable additional pet care services, including kennel and cattery boarding fees or professional pet sitting services, in Australia.

Retain documentation, such as receipts, notifications from the relevant authorities and written confirmation, as **you** may need to provide these to **us** at the time of a claim.

What is not covered?

We will not pay for any of the following:

1. If **you** buy or extend a policy, or make or undertake travel arrangements when **you** are aware, or a reasonable person in **your** circumstances should have been aware, of circumstances that may impact **your** travel plans, or knowingly putting **yourself** in a situation of unreasonable risk, such as:

    a. **you** know **you** will be unable to avoid **close contact** with a case of **Coronavirus** during **your trip**; or

    b. **you** are medically unfit to travel; or

    c. **you** travel against medical advice; or

    d. when **you** know **you** will have to consult a **medical practitioner** during **your trip**.

your policy will not cover **you** for a loss **arising** from those circumstances.

2. Extra costs **arising** from **your** failure to promptly cancel or rearrange **your** travel plans after an event impacts **your trip**.
3. A loss **arising** from **you** neglecting to observe applicable government, health department, and World Health Organization preventative and precautionary measures, including any relevant vaccinations, hygiene or social distancing guidelines.
4. A loss **arising** from **your** or a member of **your travelling party's** change of mind, disinclination or reluctance to travel.
5. Any expenses where **you're** unable to provide written documentation confirming the incident, or where **you** can't provide proof of **your** expenses, including original receipts, if **we** ask for them.
6. Additional travel and accommodation expenses above the standard originally booked, unless approved by **us**.
7. Expenses **you** incur after **you** return to **your home in Australia.**
8. Additional accommodation expenses, where **you** claim for cancelled accommodation expenses covering the same period of time, or which are less than the refundable portion of **your** pre-paid travel expenses; or any expenses where **you** have made a claim for the same costs under any other section of the policy.
9. A loss **arising** from any quarantine that is broadly imposed by a government or other official body and which is not as a result of **your** or a member of **your travelling party's** diagnosis of, or **close contact** with a case of, **Coronavirus**.

What is the most we will pay?

The most **we** will pay for this benefit is shown in the Schedule of benefits for **your** chosen plan. Limits apply per adult and are not increased for accompanying **children**.

Snow sports cover (optional cover)

Snow sports cover only applies if **you** have purchased the **Snow sports** cover option. This option is only available with the Comprehensive and Annual Multi Trip Plans.

When **you** buy the **Snow sports** cover option (which will be shown on **your** Certificate of Insurance) **you** have cover under the other benefit sections for the plan **you** have chosen when **you're** participating in a **snow sport**.

The following **Snow sports** cover benefits are also available when **you** purchase the **Snow sports** cover option.

You must read this section together with the General exclusions as these may affect **your** cover.

Ski lift passes

No excess applies to claims under this benefit.

What is covered?

We will cover **you** for non-refundable, pre-paid ski lift passes or ski equipment hire or tuition fees that cannot be used due to **your illness** or **injury** sustained during **your trip**.

What is not covered?

There is no cover where **you** have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most **we** will pay for this benefit is shown in the **Snow sports** cover option. Limits apply per adult traveller and are not increased for accompanying **children**.

Ski run closure

No excess applies to claims under this benefit.

What is covered?

We will pay **you** if **you** are prevented from skiing at a pre-booked ski resort for more than 24 continuous hours during **your trip**, because insufficient snow, too much snow or high winds caused a total closure of the lift system.

What is not covered?

1. **We** will not cover **you** for claims in respect of ski resorts that do not have skiing facilities at least 1,000 metres above sea level. **We** will not cover **you** for claims that **arise** due to insufficient snow in Northern Hemisphere ski resorts outside the period 15 December to 31 March, or in Southern Hemisphere ski resorts outside the period 1 July to 30 September.
2. There is no cover where **you** have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most **we** will pay for this benefit is shown in the **Snow sports** cover option. Limits apply per adult traveller and are not increased for accompanying **children**.

Hire replacement snow equipment

No excess applies to claims under this benefit.

What is covered?

We will pay **you** the reasonable cost of hiring replacement equipment if **your** snow skiing equipment is lost, delayed or damaged during the **trip**.

What is not covered?

There is no cover where **you** have made a claim for the same costs under any other section of the policy.

What is the most we will pay?

The most **we** will pay for this benefit is shown in the **Snow sports** cover option. Limits apply per adult traveller and are not increased for accompanying **children**.

General exclusions

These general exclusions apply to all sections of this policy, unless otherwise described in the exclusion.

You should read them, together with the cover and the specific exclusions referred to under each section of cover.

We will not cover any of the following:

1. A loss that **arises** from **you** travelling:
    a. even though **you** know **you** are unfit to travel; or
    b. against medical advice; or
    c. when **you** know **you** will have to consult a **medical practitioner**; or
    d. for the purpose of obtaining medical advice or treatment, or
    e. with a lack of due care and responsibility on **your** part to observe appropriate preventative measures as outlined by the Australian government or the World Health Organization, including relevant vaccinations, malaria prophylaxis and hygiene measures. Please see who.int for further information.
2. A loss that **arises** from **your** failure to maintain a course of treatment **you** were on at the time **your trip** commenced.
3. Elective or cosmetic treatment or surgery that is not medically necessary, or any loss **arising** from these treatments or their complications.
4. A loss **arising** from participation in or complications from a clinical trial.
5. A loss **arising** from any **existing medical condition** of **you**, a member of the **travelling party**, a non-travelling **close relative** or business partner. This exclusion will not apply to **your specified medical condition(s)** or to **your** Automatically covered conditions.
6. Any **illness** or death that **arises** from a metastatic or terminal prognosis that was made prior to the issue of the Certificate of Insurance.
7. A loss **arising** from any condition for which **you** have declined treatment or further investigation recommended by a **medical practitioner**.
8. Expenses related to the birth of a child including care of a newborn in any circumstances.
9. A loss **arising** from any pregnancy-related **illness** after the 26th week of gestation.
10. Any medical treatment or care that is not required as an emergency, or any alternative therapy, health spa or rehabilitation centre costs, unless it has been agreed to by **us**.
11. Any cover under the Essentials Plan where **you** are 70 years of age or over at the time the Certificate of Insurance is issued.
12. A loss **arising** from a member of the **travelling party** deciding to alter their plans or not to continue with the **trip**.
13. A loss **arising** from a member of the **travelling party**:
    a. intentionally and recklessly placing themselves in circumstances, or undertaking activities which pose a risk to their personal safety (except in an attempt to save a human life); or
    b. deliberately injuring themselves; or
    c. being intoxicated by or addicted to alcohol; or
    d. being intoxicated by or addicted to a drug, except a prescription drug taken in accordance with the advice of a registered **medical practitioner** or an over-the-counter drug taken in accordance with the manufacturer's instructions; or

e. taking part in a riot or civil commotion; or

f. hunting, playing polo, racing (except on foot), mountaineering using support ropes, paragliding, rock climbing, abseiling, participating in BASE jumping, running with the bulls, or pot holing; or

g. hiking or trekking at over 6,000m altitude; or

h. travelling in **international waters** in a private sail vessel or privately registered sail vessel; or

i. participating in, or training for, a **professional sporting activity**; or

j. scuba diving unless **you** hold an open water diving licence or **you** were diving under licensed instruction; or

k. riding an e-scooter or e-bike, either as the person in control or as a pillion passenger:

   (i) where the e-scooter has a maximum speed capacity greater than 25km/hr, or

   (ii) where the e-bike has a maximum speed capacity greater than 35km/hr, or

   (iii) without wearing a helmet.

l. riding a motor cycle, moped or motor scooter, either as the person in control or as a pillion passenger:

   (i) with an engine capacity greater than 250cc, or

   (ii) without wearing a helmet, or

   (iii) where the person in control does not have a full motorcycle licence that is valid both in the country of travel and in their country of residence.

m. riding an all terrain vehicle or quad bike, either as the person in control or as a pillion passenger unless as part of a tour with a licensed tour operator.

n. participating in activities on snow or ice, other than **snow sports** activities if **you** have purchased the **Snow sports cover option** , where available. This exclusion does not apply to ice skating on man-made bodies of water, dog sledding with a licensed tour company, or glacier walking on a guided tour.

o. participating in any competitive record attempts involving aerial devices or aircraft.

14. A loss which is recoverable under a scheme that provides coverage for any medical treatment; for example, Medicare, a private health fund, national reciprocal health fund or scheme, workers' compensation scheme, travel compensation fund or accident compensation scheme. **We** will not pay for private medical care when reciprocal health cover is available and accessible. In any case, **we** will only pay for private medical care where approval has been given by **us**.

15. Indirect losses of any nature, including for example loss of enjoyment, revenue, profit, business opportunity, or damage to goodwill or reputation.

16. A loss caused by, or in any way related to, a malicious, criminal or dishonest act by a member of the **travelling party** or by a person with whom **you** are in collusion.

17. **You** acting fraudulently in any way or encouraging anyone else to give **us** fraudulent information.

18. A loss **arising** from an epidemic, pandemic or World Health Organization declaration of a public health emergency of international concern. This exclusion does not apply to:

    - Overseas medical expenses;
    - Hospital compensation;
    - Medical evacuation and repatriation;
    - Funeral expenses overseas;
    - **Coronavirus** travel costs

19. A loss **arising** from war, invasion, act of a foreign enemy, hostilities (whether war is declared or not), civil war, rebellion, revolution, military or usurped power or civil insurrection, except as provided for in the section Emergency expenses to avoid disaster.

20. A loss **arising** from the use, existence or escape of nuclear materials, biological and or chemical materials, or ionising radiation from, or contamination by, radioactivity from any nuclear fuel, or nuclear waste from the combustion of nuclear fuel.

21. A loss **arising** from any government intervention, prohibition, or regulation; or **you** or a member of **your travelling party** not following official laws or warnings from a government authority or organisation, or from any other relevant or local authority. This exclusion does not apply to claims under the section **Coronavirus** travel costs. Please refer to **Coronavirus** travel costs for specific exclusions regarding **Coronavirus** travel costs.

22. A loss **arising** from any government authority seizing, withholding or destroying anything of **yours** or any government not allowing **you** to enter or to stay in that country.

23. A loss **arising** from an act or threat of **terrorism**. This exclusion does not apply to Cancellation and additional expenses event 2 for hijacking in What are the events that will be covered under this section?; Overseas medical expenses; Emergency accommodation due to **terrorism**; Luggage and personal effects; or under Medical evacuation and repatriation for the cost of repatriation to or within Australia, if the **carrier** requires **you** to be brought back with a medical escort.

24. A loss **arising** from the cancellation, delay or rescheduling of **your scheduled public transport** on the part of the **carrier** for operational reasons, mechanical breakdown or maintenance. This exclusion does not apply to the Travel delay section or the Missed connection - special events section.

25. A loss **arising** from **your** failure to take reasonable precautions to avoid a financial loss after a public warning of a strike, riot, civil commotion, or **natural disaster**.

26. A loss **arising** from **you** operating a **rental vehicle** in violation of the rental agreement.

27. A loss **arising** from the **financial default** of any person, company or organisation involved in **your** travel arrangements.

28. A loss under the Annual Multi Trip Plan which occurs in excess of 45 days of any **trip**.

29. Credit card conversion fees or any other bank charges.

30. A loss **arising** from an event that occurs during any waiting period that applies to **your** policy, other than for **injuries** as a result of an accident, as outlined in the section Waiting period.

31. A loss **arising** from travelling to, planning to travel to, or choosing to remain in a country or region that is the subject of a 'Do not travel' warning issued by the Australian Government (see smartraveller.gov.au).

32. If **you** buy or extend a policy, or make or undertake travel arrangements when **you** are aware, or a reasonable person in **your** circumstances should have been aware, of circumstances that could result in a claim, **your** policy will not cover **you** for a loss **arising** from those circumstances. This exclusion does not apply to claims under section **Coronavirus** travel costs as there are specific exclusions regarding **Coronavirus** travel costs. Please refer to **Coronavirus** travel costs for specific exclusions regarding **Coronavirus** travel costs.

33. Expenses **you** have not made every reasonable attempt to recover from the **carrier**, accommodation provider, booking agents, travel agents, any compensation scheme, or any other source.

34. Where the provision of cover or a liability to pay a benefit would expose **us** and/or **our** reinsurer(s) to any sanction, prohibition or restriction under United Nations resolutions or any sanctions, laws or regulations of Australia, the European Union, the United Kingdom or the United States.

35. Any loss **arising** from:

    a. the use of, or inability to use any application, software, or program in connection with any electronic equipment (for example a computer, smartphone, tablet or internet-capable electronic device); or

    b. any computer virus or other malicious computer software; or

    c. any hoax relating to a. and/or b. above.

    This exclusion will not apply to claims related to **illness**, **injury**, or death under sections: Cancellation and additional expenses, Medical expenses, Medical evacuation and repatriation, or Personal accident.

Claims

This section describes what **you** should and should not do, as well as conditions that apply when **you** make a claim and at the time loss or damage occurs which is likely to give rise to a claim.

What you must do in the event of a claim or incident

1. Prevent further loss or damage if it is safe to do so;

2. If something was lost, stolen or vandalised, as soon as possible after becoming aware of the loss or damage, notify the local police, transport provider, hotel, tour guide or other authority and give **us** evidence confirming the notification, such as documentation about the loss or damage;

3. If there were any witnesses, get their details and a written statement where possible;

4. In the case of an emergency, call nib international assistance 24-hour emergency assistance team;

5. Contact **us** to submit **your** claim as soon as **you** can;
6. Give **us** any documents, letters or notices relating to a claim or possible claim, medical certificates, itemised medical accounts, original receipts, rental agreements, repair quotes, ticket and luggage checks or information that **we** reasonably ask for. This will be at **your** expense;
7. If **you** become sick or **injured**, see a **medical practitioner** as soon as possible after **you** become aware of signs or symptoms of the condition and request a written report;
8. If **your** luggage is lost, delayed or damaged by the **carrier,** report this to the **carrier** as soon as possible and send to **us** a copy of the property irregularity report, along with details of any settlement that they make in relation to the loss or damage.

What you must not do in the event of a claim or incident

1. Make any promise or offer of payment, or admit fault to anyone (except as required by law), or become involved in any litigation in respect of an event that may result in a claim under this policy, without **our** consent;
2. Offer or negotiate to pay a claim or make repairs;
3. Dispose of damaged items unless **we've** said **you** can;
4. Delay telling **us** about an incident, as that could prejudice **our** rights and if so, it may reduce the amount **we** pay for **your** claim;
5. Give **us** false or misleading information.

Settling claims

Claims, less any applicable excess, will be paid to **you** or **your** personal representative in Australian dollars on the basis of the exchange rate that applied at the time of the loss that gave rise to the claim. **We** will not pay more than **your** actual loss.

Claims conditions

These claims conditions apply to every plan.

Claims service standard

Our claims service standard is to make a decision on **your** claim within 10 working days upon the receipt of a completed claim form, all relevant information and after **we** have completed all enquiries. If more information is required **we** will contact **you** within 10 working days of receiving **your** claim.

GST

If **you're** a business **you** must tell **us** if **you're** registered, or are required to be registered, for GST. When **you** do this, **we** need **you** to give **us**:

- **Your** ABN
- The percentage of any input tax credit **you** will claim, or will be entitled to claim, on **your** premium.

When **we** pay a claim, **your** GST status will determine the amount **we** pay **you**. **Your** claim settlement amount will be adjusted to allow for any ITC entitlement.

Unless **we** say otherwise, all amounts in **your** policy are inclusive of GST. There may be other taxation implications affecting **you**, depending upon **your** own circumstances. **We** recommend **you** seek professional advice.

How claims administration and legal proceedings are undertaken

When a claim is made **we** have the right, at **our** discretion, to exercise all the legal rights of the person making the claim relating to the incident and to do so in their name. **We'll** take fair and reasonable action in the administration, conduct or settlement of the claim including any recovery or defence **we** think is necessary.

We'll also report any suspected fraudulent act to the police for further investigation.

Other insurance and contribution

You must notify **us** of any other insurance which will or may, whether in whole or in part, cover any loss insured under **your** policy.

If at the time of any loss, damage or liability there's any other insurance (whether effected by **you** or by any other person) which covers the same loss, damage or liability **you** must provide **us** with any reasonable assistance **we** require to make a claim for contribution from any other insurer(s).

Losses recoverable from another source

If **your** loss has been caused by someone else, for example, **your** luggage is damaged by a **carrier**, **you** are required to make every reasonable attempt to recover from the responsible party and provide documentation of that to **us**. If they do not pay **you** the full amount of **your** claim and **your** claim is covered under **your** policy, **we** will make up the difference. **You** must claim from them first.

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

If **we** pay any expenses on **your** behalf or reimburse **you** for any loss, and **you** later receive payment from any other source for these expenses, **you** must pay **us** the amount of that payment up to the amount of the claim **we** paid **you**.

If **we** pay **you** for stolen or damaged property and **you** later recover the property or it is replaced by a third party, **you** must pay **us** the amount of the claim **we** paid **you**.

Providing proof

You must be able to provide **us** with evidence confirming that **you've** suffered a loss covered by **your** policy before **we'll** pay **you** for it. **We** may ask **you** for this evidence if **you** make a claim under **your** policy. So **your** claim can be assessed quickly, make sure **you** keep the following:

- proof that **you** owned the item; and
- proof of its value and age.

Therefore **you** should keep all relevant receipts, accounts, valuations and police or medical reports.

If **you** cannot provide the evidence or proof that **we** ask for **we** may not pay **you**.

Salvage

We're entitled to obtain and retain any items or materials salvaged or recovered after **you** make, and **we** agree, to pay a claim by replacing or paying to replace any items or materials. **We** may sell the items or materials and keep the proceeds. **We** may choose to sell the items or materials to **you**, provided **you** agree to pay market price.

Subrogation, recovery action and uninsured loss

We may at any time, at **our** expense take fair and reasonable action in **your** name to secure reimbursement for loss or damage arising under **your** policy. In the event **we** do so, **you** agree to give all reasonable assistance for that purpose.

If **you've** suffered loss that wasn't covered by **your** policy as a result of the incident, **we** may offer to attempt to recover this. **You** may also specifically ask **us** to recover this for **you**. **You'll** need to give **us** documents supporting **your** loss. Before **we** include any uninsured loss in the recovery action **we'll** also ask **you** to agree to the basis on which **we'll** handle **your** recovery action. **You** may need to contribute to legal costs in some circumstances.

Preventing our right of recovery

If **you've** agreed not to seek compensation from any person liable to compensate **you** for loss, damage or liability covered by **your** policy, **we** won't cover **you** for that loss, damage or liability.

Financial Services Guide

In this section you can find information about who nib and AGA are, our relationships with our business partners, the financial services we provide to you and information about how we and our business partners are paid for those services. It aims to help you make an informed decision about the services offered. You can also find out about how we deal with any complaints and disputes.

About the Insurer

This insurance is underwritten by Pacific International Insurance Pty Ltd ABN 83 169 311 193, AFSL No 523921 (the insurer).

About nib and AGA

This policy is distributed by nib Travel Services (Australia) Pty Ltd (nib) who acts as third party administrator on behalf of AGA, managing claims, complaints, enquiries and sales. nib may also provide you with general advice about this travel insurance product. nib and our business partners act on behalf of AGA and not on your behalf.

AGA acts as the underwriting agent of the insurer under a binding authority from the insurer, which means it can issue, vary, renew or cancel your insurance on the insurer's behalf and handle and settle any claims you make. AGA is authorised to provide these services under its AFSL.

This travel insurance may be arranged through a distributor, such as a travel agent. Distributors act on our behalf. They may arrange this insurance but are not authorised to give you any advice about the policies.

Affiliates introduce or refer potential travel insurance customers. Affiliates are authorised only to refer you to AGA who can then arrange the insurance. Affiliates may also provide factual information such as linking to the policy.

Aggregators are independent agencies that provide comparison services to consumers, by allowing customers to compare travel insurance product features, carriers, coverage and prices on their websites. Aggregators may refer potential travel insurance customers to nib Travel Insurance.

About how we are paid

AGA is paid a commission by the insurer for arranging and issuing travel insurance on behalf of the insurer under a binding authority. The commission is calculated as a percentage of the premium you pay for the policy. The percentage varies and is partly based on the profitability of all travel insurance policies of the insurer arranged by or through AGA.

nib Travel Services (Australia) Pty Ltd (nib) is paid a service fee by AGA for providing third party administration services in connection with this insurance, including customer service, claims and complaint handling, and related operational services. nib's service fee is not calculated as a percentage of your premium and is not a commission – it is a fixed fee arrangement based on the costs of providing those services. Employees of nib who provide services in relation to this insurance receive an annual salary and may receive bonuses based on performance and/or sales.

If you would like more information on commissions, service fees or remuneration, please contact AGA or nib either before you buy your insurance or within a reasonable time of receiving this Combined FSG and PDS.

If your travel insurance is arranged through a distributor, the distributor will be paid a referral fee. The referral fee is calculated as a percentage of the

gross premium when you buy a policy and is at no extra cost to you. A distributor may receive additional benefits such as discounted travel insurance or marketing assistance.

If your travel insurance is arranged after you have been referred to us by an affiliate, the affiliate will be paid a referral fee. The referral fee is calculated either as a percentage of the gross premium when you buy a policy or as a flat fee for each policy purchased after referral to us by an affiliate and is at no extra cost to you. An affiliate may receive additional benefits such as discounted travel insurance or marketing assistance.

If you travel insurance is arranged after you have been referred to nib Travel Insurance by an aggregator, nib Travel Insurance will pay a referral fee to the aggregator. The referral fee is calculated as a percentage of the gross premium when you buy a policy and is at no extra cost to you.

Feedback, complaints and disputes

If you have any feedback about our service – positive or negative – we would like you to share it with us. Refer to our contact details on the last page of this document.

How we handle complaints

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

nib Customer Relations
PO Box A975
Sydney NSW 1235 Australia
Phone: 1300 025 121
Email: travelcomplaints@nibtravel.com

nib will acknowledge your complaint within 1 business day of receiving it and provide you with the contact details of the person handling your complaint. We will do our utmost to resolve the complaint to your satisfaction within 10 business days.

If we are unable to resolve the complaint to your satisfaction within 10 business days, we will keep you informed about the progress of your complaint at least every 10 business days.

The Australian Financial Complaints Authority (AFCA) provides fair and independent financial services complaint resolution that is free to consumers. You can take your complaint to AFCA at any time.

If we are unable to resolve your complaint within 30 calendar days of the date on which you first made the complaint, or if you are still not satisfied with the outcome, you can choose to have your complaint independently reviewed at any time by AFCA.

AFCA can be contacted at:

Website: afca.org.au
Email: info@afca.org.au
Telephone: 1800 931 678 (free call)
In writing to: Australian Financial Complaints Authority, GPO Box 3, Melbourne VIC 3001

In the event you choose to escalate your complaint to AFCA, please direct it to nib Travel Services (Australia) Pty Ltd when completing the AFCA complaints form.

Should you choose to refer your complaint to AFCA, you must do so within 2 years of our final decision. If you have a complaint about nib Travel or one of our partners, feel free to contact our Customer Relations team by post, email or telephone.

Your privacy

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

Professional indemnity insurance

nib has professional indemnity insurance arrangements that comply with the requirements of Chapter 7 of the *Corporations Act 2001 (Cth)* and which (subject to its terms and conditions) cover liability for claims in relation to nib and those who act on nib's behalf, including those who no longer act on our behalf but did at the relevant time.

AGA also maintains its own professional indemnity insurance arrangements in connection with its role as principal under this insurance product.

Where a financial service is provided to you by one of nib or AGA 's partners, that partner is required to hold professional indemnity insurance arrangements for compensating clients for losses they suffer as a result of a breach of their obligations under the *Corporations Act 2001 (Cth)* relating to the financial services provided by them.

Date prepared

AGA is responsible for this FSG which was prepared on 20 July 2026.

AGA has authorised nib to provide this FSG.

Contacts

Customer Service

Phone: 1300 410 272 (within Australia)

Phone: +61 2 9234 3193 (outside of Australia)

Email: travel@nib.com.au

Claims

Phone: 1300 353 176 (within Australia)

Phone: +61 2 7202 0508 (outside of Australia)

Email: travelclaims@nib.com.au

nib international assistance

Phone: 1300 555 019 (within Australia)

Phone: +61 3 8523 2800 (outside of Australia)

Fax: +61 3 8523 2815

Email: travelassist@nib.com.au

Insurance underwritten by Pacific International Insurance Pty Ltd, ABN 83 169 311 193, AFSL No 523921, who deal with you through their agent AWP Australia Pty Ltd, ABN 52 097 227 177, AFSL No 245631, trading as Allianz Global Assistance (AGA). nib Travel Services (Australia) Pty Ltd, ABN 81 115 932 173, AFSL No 308461, acts as third party administrator on behalf of AGA, managing claims, complaints, enquiries and sales.