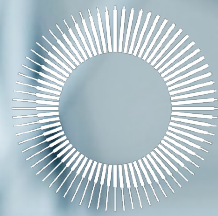


# Business Travel



AHI

AHI  
Product Disclosure Statement (PDS) – Part 1 attaching  
to the Vertex Business Travel 2110 Policy Wording - Part 2

1800 618 700  
[ahiinsurance.com.au](http://ahiinsurance.com.au)

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# Important Information

This document contains two parts:

- Product Disclosure Statement - contains general information the Policyholder needs to be aware of before applying for the product and about the Policy; and
- The Policy Wording - contains the terms and conditions of this insurance Policy.

# Product Disclosure Statement

## Accident & Health International (AHI)

Accident & Health International Underwriting Pty Limited, ABN 26 053 335 952, AFS Licence No. 238261 (AHI) is an underwriting agency specifically created to provide Personal Accident, Medical and Travel insurance. AHI acts on behalf of Tokio Marine & Nichido Fire Insurance Co., Ltd, ABN 80 000 438 291, AFS Licence No. 246548 (TMNF), with full authority to quote and issue contracts of insurance, collect premiums and pay Claims.

For any queries about this Policy, please contact the appointed insurance advisor. Their details are shown in the Policy Schedule. In the event there is no appointed advisor, please contact AHI. Their details are in this document.

## The Insurers

The Insurers of the Policy are:

1. Tokio Marine & Nichido Fire Insurance Co., Ltd, ABN 80 000 438 291, AFS Licence No. 246548 (TMNF) for all Benefits other than the Life Insurance Benefit and the Financial Collapse Benefit, and
2. Liberty Mutual Insurance Company, ABN 086 083 605, trading as Liberty International Underwriters (LIU) for the Financial Collapse Benefit only which is issued and arranged through their agent International Passenger Protection Limited.

## What is a Product Disclosure Statement

This Product Disclosure Statement (PDS) contains important information about the Policy to assist in making an informed decision when choosing this insurance. In this PDS:

1. 'We', 'Our', 'Us' means
  - a. Tokio Marine & Nichido Fire Insurance Co., Ltd, ABN 80 000 438 291, AFS Licence No. 246548 (TMNF) for all Benefits other than the Life Insurance Benefit and the Financial Collapse Benefit, and
  - b. Liberty Mutual Insurance Company, ABN 61 086 083 605, trading as Liberty International Underwriters (LIU) for the Financial Collapse Benefit only which is issued and arranged through their agent International Passenger Protection Limited.
2. 'Policyholder' means the person or company who is named in the Policy Schedule as the Policyholder. The Policyholder is the contracting party for this Policy.
3. 'Covered Person' means any person shown by name, classification or meeting the criteria specified for a Covered Person in the Policy Schedule for the insurance cover selected by the Policyholder and with respect to who the premium has been paid. The Covered Person and the type of cover chosen will be set out in the Policy Schedule.

## What the Policy consists of

The Policy consists of:

1. the Policy Wording document which sets out details of the Policyholder's cover, applicable terms, conditions, limitations and exclusions; and
2. a Policy Schedule, approved by Us, which sets out who is insured, the cover(s) selected, the Period of Insurance, the limits of liability, excesses and other important information. This is referred to as the Policy Schedule in this Policy document.

The Policy should be carefully read and retained by the Policyholder. These documents should be read together as they jointly form the contract of insurance between Us and the Policyholder. Any new or replacement Policy Schedule detailing changes to the Policy or the Period of Insurance We may send to the Policyholder will become the current Policy Schedule, which should be carefully read and retained by the Policyholder.

## The Purpose of the Cover

This insurance is entered into with the Policyholder and provides cover in relation to Covered Persons. In some cases, the Policyholder may also be a Covered Person.

Covered Persons who are not the Policyholder are not parties to the contract between Us and the Policyholder. This means a Covered Person cannot cancel or vary the Policy in any way (only the Policyholder can do this).

Covered Persons who are not the Policyholder have a right to recover their loss in accordance with Section 48 of the Insurance Contracts Act. Section 48 states that Covered Persons have the same obligations in relation to a Claim made by them that the Policyholder would have to Us (for example, complying with Claims conditions such as subrogation) and may discharge the Policyholder's obligations in relation to a loss. We have the same defences to an action by a Covered Person as We would in an action by the Policyholder.

Where the Policy covers Covered Persons (other than the Policyholder), the Policyholder:

1. is not Our agent;
2. acts independently from Us in entering into this insurance to provide cover to Covered Persons; and
3. is not authorised by Us to provide any recommendations or options about the insurance or other financial services to a Covered Person.

Any notices of expiry, variation, avoidance or cancellation will be sent by Us to the Policyholder. We will not provide any notices in relation to this insurance to the Covered Persons. The Policyholder is required to notify Covered Persons when this occurs.

## Our Agreement with the Policyholder

If We accept the application for cover, the Policyholder and Covered Persons will be insured under this Policy for:

1. loss or damage caused by one or more of the insured events set out in this Policy; and
2. the other Benefits, as set out in this Policy.

This cover will be given on the basis:

1. that the Policyholder has paid or agreed to pay Us the premium for the cover the Policyholder selected when cover was requested and which the current Policy Schedule indicates is in force; and
2. of the verbal and/or written information provided by the Policyholder to Us prior to inception of the Policy.

#### **Your duty to take reasonable care not to misrepresent**

Before you enter into an insurance contract with us, the Insurance Contracts Act 1984 requires you to take reasonable care not to make a misrepresentation.

What this means is that you must take care to ensure the accuracy of any information you provide to us, as our decision whether to enter into a contract with you, and if so on what terms, will be based on the information you provide. Your duty includes:

- Giving honest, accurate and complete answers to any questions we ask;
- Making reasonable enquiries to determine the accuracy of any information you give to us; and
- Taking care to ensure that any representation you make to us is accurate.

Every person who is insured under the policy must comply with this duty at the commencement of the policy and when you renew, vary, extend, reinstate or replace the policy.

If you or any person who is insured under the policy do not comply with this duty and fail to take care to ensure the accuracy of any representation made to us, we may cancel the policy, reduce the amount we pay if you make a Claim, or decline a Claim. If you breach this duty fraudulently, we may avoid the policy altogether and treat it as if it never existed.

#### **Choosing the most suitable Cover**

Cover is provided for the Policyholder (where the Policyholder is also a Covered Person) and the Covered Persons as set out in the Policy Schedule.

It is important that the Policyholder makes sure that the Sum Insured they have selected for each Benefit provides sufficient protection for their needs.

The Policyholder can select cover from any of the following Benefits included in the Policy:

#### **Benefits**

The following Benefits are included in this Policy. The Sum Insured for each is shown in the Policy Schedule. If the Sum Insured shown in the Policy Schedule is \$0.00 for a Benefit, no cover is provided under this Policy for that Benefit. The circumstances under which a Claim is payable for each of these covers is detailed under "Benefits" in the Policy Wording.

Personal Accident & Sickness  
Kidnap & Ransom/Extortion  
Hijack & Detention  
Medical & Additional Expenses and Cancellation & Curtailment Expenses  
Emergency Assistance  
Loss of Deposits

Baggage, Electronic Equipment & Money  
Alternative Employee and Resumption of Assignment Expenses  
Personal Liability  
Rental Vehicle Excess Waiver  
Extra Territorial Workers Compensation  
Missed Transport Connection  
Overbooked Flight  
Political & Natural Disaster Evacuation  
Search & Rescue Expenses  
General Extensions Applicable to All Sections of this Policy

#### **Benefit Limits**

Benefits may be subject to Benefit Limits. Benefit Limits may affect the amount payable in the event of a Claim. If a Benefit Limit is applicable to a Benefit, it will be shown in the Policy Schedule below the Benefit it applies to, indented from the left margin of the Schedule of Benefits.

#### **Age Limitation**

Age limits apply to this Policy. No cover is provided for Covered Persons who are not aged between the minimum and maximum age limits as stated in the Policy Wording under "Section 18: General Provisions Applicable to All Sections of the Policy – 18.1 - Age Limitations" or as otherwise show on the Schedule.

Specific age limits may also apply to each Benefit included on this Policy. Please refer to each Benefit for full details.

#### **The most We will Pay**

The Policy may include an Aggregate Limit of Liability which is the most We will pay for all Benefits in any one Period of Insurance under this Policy. If applicable, it is shown in the Policy Schedule against "Aggregate Limit of Liability". We may also include an Aggregate Limit of Liability for specific Benefits or Events. If We include a specific Aggregate Limit of Liability for a Benefit or an Event, such limit will be shown in the Policy Schedule. The Aggregate Limit of Liability does not apply to the Personal Liability Benefit or the Medical and Medical Evacuation Expenses Benefit if they are included on the Policy. In the event this limit is reached, the amount can be reinstated with Our agreement and payment of the appropriate additional premium (plus any charges).

#### **Choosing a Sum Insured**

It is important that the Policyholder makes sure that the Sum Insured they have selected for each Benefit provides sufficient protection for its needs or the Covered Persons' needs.

#### **Policy Cost and Payment**

The cost of the Policy will be shown on the quotation We provide once We have received all required information to complete the quotation. The cost of the Policy is calculated according to various risk indicators such as:

- Age of Covered Persons
- Occupation of Covered Persons
- Activities undertaken during the Scope of Cover
- Previous claims experience for this type of risk
- Risk location

## - The Benefit Sum Insured

The cost of the Policy is made up of premium, administration fees and government taxes (such as Goods & Services Tax (GST) and Stamp Duty), where applicable.

### **Renewal Procedure**

Before this Policy expires We will normally offer renewal by sending a renewal invitation advising the amount payable to renew this Policy. It is important that the Policyholder checks the information shown before renewing each year to be satisfied that the details are correct.

### **Taxation Implications**

This Policy may be subject to a Goods & Services Tax in relation to premium.

Depending on the location of the risk being insured, this Policy may be subject to Stamp Duty in relation to premium and GST.

Depending upon the Policyholder or Covered Person's entitlement to claim Input Tax Credits under this Policy, We may reduce the payment of any Claim by the amount of any Input Tax Credit.

Any Claim paid in respect of the Weekly Injury Benefit or Weekly Sickness Benefit is subject to personal income tax. Where We are required to do so, We will withhold personal income tax amounts from Claim payments We make and forward these amounts to the Australian Taxation Office on behalf of the Policyholder or Covered Person. Where required, We will provide the Policyholder a summary of the amounts withheld at the end of each financial year.

The Policyholder and /or Covered Persons should consult an authorised tax advisor if there are any questions that relate to their particular circumstances.

### **Making a Claim and what is an Excess, Deferral Period and Co-payments**

If the Policyholder or Covered Person needs to make a Claim, please send a written notice of the Claim to AHI within thirty (30) consecutive days of the date of the incident occurring or as soon as reasonably possible. AHI will provide a copy of the claim form which will need to be completed to Our reasonable satisfaction and provided to Us as soon as reasonably practicable. Any costs involved in the collection of information for the form are the responsibility of the Policyholder or Covered Person.

At any time after a Claim has been lodged We may conduct enquiries into the circumstances of the Claim. We may ask for medical examinations or, in the event of death, We may request an autopsy. This will be done at Our expense.

Any payments will be made in Australian (AUD) dollars unless otherwise shown in the Policy Schedule.

Once a payment is made under this Policy, We may attempt to recover the amount We have paid to the Policyholder or Covered Person if We find someone else is responsible for the loss or damage. We will do this in the name of the Policyholder or

Covered Person as applicable. We may also need to defend the Policyholder or the Covered Person against allegations of loss or damage, in which case We require their full co-operation with Us at all times.

Depending on the circumstances of the Claim, an Excess or Deferral Period may apply, or the Policyholder or Covered Person may be required to contribute to the cost of the Claim as follows:

1. Excess - an Excess is the amount paid by the Policyholder or Covered Person when a Claim is made.
2. Deferral Period – a Deferral Period is the continuous period of time shown in the Policy Schedule during which no Benefits are payable.
3. Co-payments – a co-payment is an arrangement where We will reimburse a portion of an expense that has been incurred leaving the remainder to be paid by the Covered Person.

To see some examples Claim scenarios please visit [www.ahiinsurance.com.au/claims-examples](http://www.ahiinsurance.com.au/claims-examples) .

### **Cooling-Off**

The Policyholder has a cooling-off period of twenty-one (21) consecutive days from the date on which the Policy was issued to cancel the Policy. If the request is made to Us in writing to cancel the Policy within the twenty-one (21) consecutive days, We will cancel the Policy and provide a full refund of premium less charges or taxes which we are unable to recover, provided neither the Policyholder nor any Covered Person has exercised a right or power under the terms of the Policy in that period (e.g. Covered Person has started their Journey, the Policy has already expired or if any Claim has been made under the Policy).

### **Dispute Resolution**

We and AHI will do everything possible to provide a quality service at all times. If there are any concerns or complaints about Our products or service, AHI staff are always available to listen and help where possible.

If, after speaking with an AHI staff member, the complaint remains unresolved to the Policyholder's or Covered Person's satisfaction, the matter can be referred (either in writing or verbally) and reviewed through AHI's Complaints and Dispute Resolution Process, which is free of charge. Please contact the Disputes Resolution Manager (please see contact details for AHI in this Product Disclosure Statement). The process will undertake to provide an answer to the Policyholder or Covered Person within fifteen (15) consecutive business days, subject to all necessary information being provided.

If the Policyholder or Covered Person is not satisfied with the outcome of the dispute resolution process or We cannot agree on alternative timeframe and would like to take the complaint further, the Policyholder may refer the matter to the Australian Financial Complaints Authority (AFCA), an external dispute resolution body, subject to eligibility. Access to the AFCA process is free of charge.

Please contact AHI to request further information about AFCA or contact:

Australian Financial Complaints Authority  
GPO Box 3  
Melbourne VIC 3001  
Telephone: 1800 931 678  
Email: [info@afca.org.au](mailto:info@afca.org.au)  
Web: [www.afca.org.au](http://www.afca.org.au)

## Privacy

### AHI – Privacy

As part of AHI's dealings with the Policyholder and Covered Persons, AHI may need to collect personal information (which may include sensitive information) when the Policyholder is applying for, changing or renewing a Policy with Us or when We are processing a Claim in order to help Us properly administrate the Policyholder's insurance proposal, policy or Claim. AHI will collect this information directly from the Policyholder or Covered Person where possible, but there may be occasions when AHI collects this information from a third party such as an insurance advisor.

AHI will only use information for the purposes for which it was collected, other related purposes and as permitted or required by law. The level of quality and/or quantity of information provided may affect AHI's ability to provide insurance cover as needed.

AHI may share this information with other companies within its group and third parties who provide services to AHI or on Our behalf, some of which may be located outside of Australia.

For more details on how AHI collects, stores, uses and discloses personal information, please read AHI's privacy policy located at [www.ahiinsurance.com.au](http://www.ahiinsurance.com.au). Alternatively, contact AHI at [privacy@ahiinsurance.com.au](mailto:privacy@ahiinsurance.com.au) or call (02) 9251 8700 to request a copy be sent.

It is recommended to obtain a copy of this privacy policy and read it carefully. By applying for, using or renewing any of AHI's products or services, or providing AHI with collected personal information, agreement is granted to AHI to this information being collected, stored, used and disclosed as set out in this policy.

AHI's privacy policy also contains information about how to access and seek correction of collected personal information, complain about a breach of the privacy law, and how AHI will deal with a complaint.

### TMNF – Privacy

Privacy is important to Us. TMNF is dedicated to upholding the Policyholder and Covered Person's privacy and protecting their personal information. We are bound in Australia by the Privacy Act 1988 (Cth) and its associated Australian Privacy Principles, along with any other applicable privacy laws and codes, when collecting, using, disclosing, holding, handling and transferring any personal information. TMNF has ongoing practices, procedures and systems in place to ensure that We manage personal information in an open and transparent way.

We may use the Policyholder or Covered Persons personal information (such as name, date of birth, contact details, and in certain cases explained in Our Privacy Policy, sensitive information) for the following purposes:

- to determine whether and on what terms We might issue the Policyholder or Covered Persons with an insurance policy;
- to open and administer any products and services the Policyholder or Covered Persons may sign up for;
- to help improve Our products and services;
- to undertake market research, customer data analysis and direct marketing activities;
- to manage and resolve complaints made;
- to report information required by law or regulations;
- to perform any other appropriately related functions

If the Policyholder or Covered Persons don't provide all the information requested, the main consequence is that We may not be able to issue the Policyholder or Covered Persons with a policy or pay a Claim.

Unless it is unreasonable or impracticable under the circumstances, We will collect the Policyholder or Covered Persons personal information directly from the Policyholder or Covered Persons advisor or someone authorised by the Policyholder or Covered Persons, for example, the Policyholder or Covered Persons insurance broker, financial planner, legal services provider, agent or carer. In issuing and/or managing the Policyholder or Covered Persons policy or Claim We may need to disclose the Policyholder or Covered Persons personal information to third parties such as another insurer, Our reinsurers, an insurance broker, Our legal providers, Our accountants, loss investigators or adjusters, anyone acting as the Policyholder or Covered Persons agent or regulatory bodies as well as Our various third-party service providers described in Our Privacy Policy. We may also disclose the insured or insured person's information as required by law.

In providing the Policyholder or Covered Persons with Our services it may be necessary to disclose the Policyholder or Covered Persons information overseas where We have a presence or engage such parties, including but not limited to Japan, USA, Canada, Bermuda, New Zealand, Thailand, Hong Kong, Europe (including the United Kingdom), Singapore and India.

We will otherwise collect, hold, use and disclose the Policyholder or Covered Persons personal information in accordance with Our Privacy Policies, which set out how the Policyholder or Covered Persons may access and correct the personal information that We hold about the Policyholder or Covered Persons and how to lodge a complaint.

To learn more about collection and use of the Policyholder or Covered Persons personal information, see Our Privacy Policy, which can be viewed at Our website [www.tokiomarine.com.au](http://www.tokiomarine.com.au) or contact Us on 02 9225 7599.

### Updating the PDS

Information in the PDS may need to be updated from time to time. A copy of any updated information can be obtained without charge by calling Us on the contact details provided in this document. If the update is to correct a statement or an omission, that is materially adverse from the point of view of a reasonable person deciding whether to acquire this Policy, We



will provide the Policyholder with a new PDS or a Supplementary PDS.

### Intermediary Remuneration

Tokio Marine & Nichido Fire Insurance Co., Ltd pays remuneration to insurance intermediaries when We issue, renew or vary a Policy the intermediary has arranged or referred to Us. The type and amount of remuneration varies and may include commission and other payments. Information about the remuneration We may pay intermediaries can be obtained by requesting it from the intermediary or insurance advisor.

### Financial Claims Scheme

The Policyholder or Covered Person may be entitled to payment under the financial claims scheme in the event Tokio Marine & Nichido Fire Insurance Co., Ltd becomes insolvent. Access to the Scheme is subject to eligibility criteria. Information about the scheme can be obtained from <http://www.fcs.gov.au>.

### General Insurance Code of Practice

We proudly support and are a signatory to the General Insurance Code of Practice ('the Code').

The purpose of the Code is to raise the standards of practice and service in the general insurance industry. The objectives of the Code are:

- to commit Us to high standards of service;
- to promote better, more informed relations between Us and Our valued customers;
- to maintain and promote trust and confidence in the general insurance industry;
- to provide fair and effective mechanisms for the resolution of complaints and disputes between Us and the Policyholder; and
- to promote continuous improvement of the general insurance industry through education and training.

This is Our commitment to all Our valued customers. We have adopted and support the Code and are committed to complying with it.

Further information about the Code and the customer's rights under it is available at [www.codeofpractice.com.au](http://www.codeofpractice.com.au) or contact Us.

### Contact Details

Accident & Health International Underwriting Pty Limited  
ABN 26 053 335 952  
AFS Licence No. 238261  
Level 4, 33 York Street  
SYDNEY NSW 2000

Telephone: (02) 9251 8700  
Fax: (02) 9251 8755  
Website: [www.ahiinsurance.com.au](http://www.ahiinsurance.com.au)  
Email: [enquiries@ahiinsurance.com.au](mailto:enquiries@ahiinsurance.com.au)

### AHI Assist

AHI Assist provides a 24-hour, 365-day emergency service offering protection, planning and intelligence vital for the safety and security of all clients.

To contact AHI Assist, call: +612 8330 1222 reverse charge, or  
Fax: +61 2 8016 9250  
SMS: +61 488 863 244  
Email: [help@ahiassist.com.au](mailto:help@ahiassist.com.au)

### The Insurers

Tokio Marine & Nichido Fire Insurance Co., Ltd,  
ABN 80 000 438 291  
AFS Licence No.246548  
(TMNF)

Level 3, 1 Chifley Square,  
SYDNEY NSW 2000

Telephone: +61 2 9225 7500  
Website: [www.tokiomarine.com.au](http://www.tokiomarine.com.au)

Liberty Mutual Insurance Company  
ABN 61 086 083 605  
(trading as Liberty International Underwriters (LIU))

Level 38, Governor Phillip Tower  
1 Farrer Place  
Sydney NSW 2000

Telephone: (02) 8298 5800  
Website: <http://www.liuaustralia.com.au>

International Passenger Protection Limited  
IPP House, 22-26 Station Road  
West Wickham  
Kent BR4 0PR  
United Kingdom.

Telephone: +44 (0)208 776 3750  
Fax: +44 (0)208 776 3751  
Email: [info@iplondon.co.uk](mailto:info@iplondon.co.uk)

This Product Disclosure Statement was prepared on 01/10/2021. AHI is authorised to distribute this Product Disclosure Statement.

# Contact Us



To find out how AHI can help you protect what matters most, please get in touch.

Sydney | Melbourne | Brisbane | Perth

1800 618 700

[ahiinsurance.com.au](http://ahiinsurance.com.au)