A photograph of a man and a woman sitting in the front seats of a car. The man is on the left, wearing sunglasses and a white polo shirt, smiling broadly. The woman is on the right, with curly hair, wearing a white top with a small floral pattern, and laughing joyfully. The background shows a blurred view of greenery through the car window.

nib travel
insurance

Ultimate Health Travel Insurance

Policy Document New Zealand | Effective 21 April 2018

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Travel Insurance Glossary

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Before You Travel

Before you travel we ask that you become familiar with the information outlined in this policy document to ensure the cover offered is right for you.

Where **you** still have queries, please contact nib.
Call: **0800 888 nib (0800 888 642)**

Email: contactus@nibtravel.co.nz

For further contact information, please visit
www.nibultimatehealthtravel.co.nz.

Who can be covered?

Cover under this travel insurance is only available to **residents** of New Zealand (as defined in the [Travel Insurance Glossary](#) page 29) who are insured under a current **nib Ultimate Health** cover.

You, **your** spouse or partner and **dependents** will only be included on this policy as authorised by nib nz limited, and only the person or people named in the Certificate of Insurance are covered by **your** policy.

Where are you going and how often?

Whether this cover is right for **you** will depend on where **you** are travelling, who is travelling and how often.

We offer a 12-month policy for frequent travellers, which covers any number of international **trips** with a maximum duration of 38 days per **trip**. If any one period of travel to and from **your home** will exceed 38 days, no part of that travel is covered by this policy.

When am I covered?

To be covered under this travel insurance, **you** must maintain active **nib Ultimate Health** Cover. When **your nib Ultimate Health** Cover ceases, **your** cover under this travel insurance ceases.

Cover under this travel insurance for each **trip** begins after **we** issue **your** travel Certificate of Insurance, as follows:

- Cover under Section 2 Cancellation costs begins from the Cover Start Date shown on **your** Certificate of Insurance.
- Cover under all other benefit sections begins on the Cover Start Date as shown on **your** Certificate of Insurance or when **you** leave **your home** to begin each **trip**, whichever happens last.

All cover for any one **trip** ends on the earlier of:

- the Cover End Date noted on **your** Certificate of Insurance; or
- when **you** return to **your home**.

The policy is only valid once **we** issue a Certificate of Insurance. Only people listed on the Certificate of Insurance are covered by the policy.

Please make sure **you** keep **your** Certificate of Insurance and this policy document safe together with any other documents **we** send **you**, as these contain all the information about **your** cover.

For **families**, **your** adult travel partner listed on **your** Certificate of Insurance may travel independently of **you**. **Dependents** listed on **your** Certificate of Insurance are only covered whilst accompanying **you** and/or **your** insured travel partner; they are not covered for independent travel.

What's covered and what's not?

As with all travel insurance policies, **our Policy Benefits** (page 5) don't cover everything. **You** should read this policy document carefully to ensure that this cover is right for **you**.

Certain words have special meanings which can be found in the **Travel Insurance Glossary** (pages 29-31). In addition:

- Each policy section tells **you** what is covered and what **we** will pay.
- The **Exclusions to Sections** (pages 10-12) describe the specific circumstances which are not covered by those sections of the policy.
- The **General Exclusions**: applicable to all sections (pages 13-15 apply to the entire policy).
- This policy does not include cover for snow skiing or other sports and activities on snow or ice. If **you** require cover for these activities, **you** will need to purchase other insurance that includes this cover. **You** can contact nib on **0800 888 nib** (0800 888 642) or visit nibtravel.co.nz for information on other travel insurance plans offered by nib.

Both **Exclusions to Sections** and **General Exclusions** are noted in the **Policy Benefits** section (page 5) and highlighted in shaded boxes throughout the policy document for easy reference.

Please read through this information carefully because it defines the way the policy responds when **you** need to claim.

How your medical history affects your cover

Medical cover under travel insurance policies is for unexpected **sudden illnesses or serious injuries**.

Our travel insurance only includes cover for certain medical conditions, so please consider **your** medical history carefully because **overseas** medical care is expensive.

Medical conditions **you** already have (or have experienced) before the Cover Start Date shown on **your** Certificate of Insurance are defined as **existing medical conditions**. They are only covered if they are on the list of automatically covered conditions AND **you** meet all requirements outlined

for automatic cover on pages 16-19. If **your** condition is not listed, or **you** do not meet those requirements, **you** will not have cover for **your existing medical condition(s)**.

You will not be covered for any claims where **your** medical history (or those of other people) is a contributing factor and is not covered by the policy.

Refer to the **Existing Medical Conditions** section (pages 16-19) for guidelines on cover for **existing medical conditions**. If **you** require cover for **existing medical conditions** that are not covered by this policy, **you** can contact nib on **0800 888 nib** (0800 888 642) or visit nibtravel.co.nz for information on other travel insurance offered by nib.

About your insurance

This policy is underwritten by certain underwriters at Lloyd's, managed by Cerberus Special Risks Pty Limited (Cerberus) and is arranged and promoted by nib Travel Insurance Distribution Pty Ltd (nib), ABN 40 129 262 175.

Your policy is based on what **you** tell **us**, and **we** expect **you** to be truthful. If **you** aren't, this has implications.

The **Important Matters** section (page 25) contains information on **your** duty of disclosure, applying for cover, changing **your** policy, **your** rights and **our** responsibilities to **you**. It includes details about **us** and:

- Our contact details
- Your duty of disclosure
- Applying for cover
- About your premium
- Changes to your policy
- Continuation of cover
- Policy extensions
- How we handle complaints
- Fair Insurance Code
- Jurisdiction and choice of law
- Privacy Notice
- Updating the policy document
- Date prepared



Policy Benefits

The following table is a summary only of the benefits and limits available. Please refer to each policy section for specific conditions of cover and a detailed explanation of what is not covered under each section.

Policy excess

A policy **excess** applies per event when claiming under benefit sections 1-3 and 9-10. No **excess** applies to benefit sections 4-8.

A policy **excess** is an amount **you** must pay once for each event when **you** make a claim. If **your** claim is paid, this **excess** is deducted from any payment **we** make to **you** after **you** claim.

The **excess** amount is shown on **your** Certificate of Insurance.

Policy exclusions

For a detailed explanation of what is not covered in each policy section, please refer to

Exclusions to Sections 1-10 (pages 10-12) under "What's Covered and What's Not". Also, there are **General Exclusions** (pages 13-15) which are applicable to all sections of the policy.

Benefits and Limits

What's Covered	nib Ultimate Health Travel Insurance	
	Single	Family
1* Medical Expenses Incurred Overseas ^ Emergency Dental	Unlimited \$1,000 per person, per trip	Unlimited \$1,000 per person per trip
2* Cancellation Costs	\$15,000 per trip	\$15,000 per trip
3 Additional Expenses / Medical Evacuation ^	Unlimited	Unlimited
4* Travel Delay	\$2,000 per trip	\$4,000 per trip
5 Special Events	\$2,000 per trip	\$4,000 per trip
6 Rental Vehicle Insurance Excess	\$4,000 per trip	\$4,000 per trip
7* Accidental Death	\$25,000 per policy	\$50,000 per policy
8* Total Permanent Disability	\$12,500 per policy	\$25,000 per policy
9* Luggage and Personal Effects	\$12,000 per policy	\$12,000 per policy
10 Personal Liability	\$2,500,000 per policy	\$2,500,000 per policy

* Sub-limits apply (refer to "What's Covered and What's Not", pages 6-12).

^ For up to 12 months after the **sudden illness** first appears or **serious injury** first occurs.



What's Covered and What's Not

This section describes the cover available and the terms, conditions and exclusions that apply when we issue you a policy.

For the cover limits applicable, refer to **Policy Benefits** on page 5; for further exclusions that apply to all sections, refer to the **General Exclusions** on pages 13-15.

Section 1: Medical expenses incurred overseas

1. **We** will pay the **reasonable** cost of emergency medical, hospital, road ambulance or other treatment **you** actually and necessarily receive **overseas** during the **trip** because **you** suffer a **sudden illness or serious injury**. **You** must make an effort to keep **your** medical expenses to a minimum.

However, **we** will only pay for treatment received and/or hospital accommodation during the 12-month period after the **sudden illness or serious injury** first occurred.

The treatment must be given or prescribed by a registered medical practitioner or paramedic.

If **we** determine that **you** should return **home** to New Zealand for treatment and **you** do not agree to do so, then **we** will pay **you** the amount which **we** determine would cover **your** medical expenses and/or related costs had **you** agreed to **our** recommendation. **You** will then be responsible for any on-going or additional costs relating to or **arising** out of the event **you** have claimed for.

2. **We** will also pay the cost of **overseas** emergency dental treatment up to a maximum amount of \$1,000 per insured person per **trip** following an infection or broken tooth and which the treating dentist certifies in writing is solely required for the immediate relief of sudden and acute onset of pain to healthy, natural teeth. A natural tooth is one that is whole or properly restored (with fillings only).

3. **We** will pay up to \$15,000 in total for **your** burial or cremation **overseas** or for transporting **your** remains to New Zealand.

- Please note **we** will not pay for any costs incurred in New Zealand.

The maximum amount **we** will pay for all claims combined under this section is shown under **Policy Benefits** (page 5).

For what **we** will not pay in this section, please refer to **Exclusions to Sections 1-8** (pages 10-11) and **General Exclusions**: applicable to all sections (pages 13-15).

Section 2: Cancellation costs

You only have this cover up to the limit shown under **Policy Benefits** (page 5).

If any of the following Insured Events occurs and, as a direct result of the event, **you** have no option but to cancel **your trip**, **we** will pay up to the applicable cover limits:

- the value of **your** unused pre-paid travel and accommodation arrangements, less any refunds due to **you**;
- the reasonable cost of rearranging **your trip** prior to **you** travelling. This cost must not be greater than

the cancellation fees or lost deposits which would have been incurred had the **trip** been cancelled.

Insured Events:

The following events must be unforeseen and outside of **your** control at the time **we** issue **your** Certificate of Insurance and when **you** book any related travel arrangements.

1. A **sudden illness or serious injury** or death of:
 - a) **You** or a member of **your travelling party**; or
 - b) A **close relative** who resides in New Zealand or Australia and who is not travelling with **you**, provided that their **sudden illness or serious injury** required hospitalisation or confinement.
2. Cancellation, delay or rescheduling of scheduled public transport services caused by severe weather, natural disaster, hijacking, riot, strike, civil commotion, or an emergency landing or diversion.
3. **You** miss **your** scheduled transport because **you** cannot reach **your** departure point on time due to severe weather or natural disaster; a motor vehicle, railway, air or marine **accident**; a riot, strike or civil commotion; a hijacking.
4. Closure of an airport, port, station, terminal or other designated point of arrival or departure by the relevant authority.
5. Before **your trip** starts, the pre-approved leave of either **you** or a member of **your travelling party** – who is a member of the New Zealand military or police force – is cancelled. This event does not include voluntary cancellation of leave.
6. Before **your trip** starts, a tour or special event is cancelled or rescheduled by the organiser. The special events are: a wedding (which is not **your** own); a pre-paid sporting event, training course, conference, concert or festival; a graduation; or a funeral.
7. During **your trip**, **your** passport, travel documents or credit cards are permanently lost, **accidentally** damaged or stolen from **you** when they were either:
 - a) on **your** person, on the person of a family member or a member of **your travelling party**; or
 - b) in a locked safe or cabinet in **your** private, locked room occupied only by **you**, **your family** or member of **your travelling party**.

8. **You** are prevented from staying at **your** pre-paid accommodation due to fire, severe weather or natural disaster.
9. **Your home** in New Zealand is declared uninhabitable by the relevant public authority due to fire, severe weather or natural disaster.
10. During **your trip**, **your** current location or a planned destination is declared an 'Extreme Risk' area by the New Zealand Ministry of Foreign Affairs and Trade.

You must do everything reasonable to avoid any unnecessary expense. **You** must also obtain written confirmation of the event from an official body in the country where any **accident** or other event occurs as well as written confirmation of any claim **you** have with any responsible party (including but not limited to any transport or accommodation provider).

The following conditions apply:

- a) **Travel agent cancellation fees** – **We** will pay the travel agent's cancellation fees up to 10% of the amount paid to the travel agent or \$1,500, whichever is the lesser, when full monies have been paid or the maximum amount of the deposit has been paid at the time of cancellation. **We** will not pay any travel agent's cancellation fees above the level of commission and/or service fees normally earned by the agent had the **trip** not been cancelled.
- b) **Frequent flyer points** – **We** will pay **you** for loss of frequent flyer or similar air travel points **you** used to purchase an airline ticket following cancellation of **your** airline ticket and where **you** cannot recover the lost points from any other source.

We calculate the amount **we** pay **you** by multiplying:

 - i) the cost of an equivalent class airline ticket based on the quoted retail price at the time the ticket was issued, less **your** financial contribution;
 - ii) by the total value of points lost divided by the total value of points used to obtain the ticket.

The maximum amount **we** will pay for all claims combined under this section is shown under **Policy Benefits** (page 5).

For what **we** will not pay in this section, please refer to **Exclusions to Sections 1-8** (pages 10-11) and **General Exclusions**: applicable to all sections (pages 13-15).

Section 3: Additional expenses/ medical evacuation

This section only covers **you** for **reasonable** additional travel and accommodation expenses that result directly from one of the following events:

1. **You** being unable to continue the **trip** because of the death, **sudden illness or serious injury** of:
 - a) **You** or a member of **your travelling party**; or
 - b) A **close relative** who is resident in New Zealand or Australia and who is not travelling with **you**, provided that the **sudden illness or serious injury** required hospitalisation or confinement.
2. The need, because of a **sudden illness or serious injury** resulting in **you** being hospitalised as an in-patient, for a **close relative** or friend to travel to, remain with or escort **you** in place of the attending registered medical practitioner. **You** must have written advice of this need from the attending registered medical practitioner and **our** consent.
3. Cancellation or restriction of scheduled public transport services caused by severe weather, natural disaster, hijacking, riot, strike or civil commotion. The event must have begun after **we** issued the Certificate of Insurance and after **you** booked any related travel arrangements. **You** must have done everything reasonable to avoid the expenses, and **you** must get the **carrier's** written confirmation of **your** claim.
4. Motor vehicle, railway, air or marine **accident**. **You** must have written confirmation of the **accident** from an official body in the country where the **accident** happened.
5. Loss (excluding Government confiscation) of passports, travel documents or credit cards, but limited to expenses incurred within the country where the loss occurred in having the documents replaced.
6. A member of **your travelling party** who is a full-time student being required to sit supplementary examinations.
7. Disruption of **your trip** due to **your home** in New Zealand being destroyed by a natural disaster or fire.

We will pay **you** if **you** have to interrupt **your trip** after it has begun for **your** necessary additional travel, accommodation, repatriation and meals that **you** undertake with **our** consent. Travel expenses for **your**

return **home** or evacuation are only covered if the attending registered medical practitioner advises **us** in writing that as a result of **sudden illness or serious injury you** are unfit to continue the **trip**.

The following conditions apply:

1. **We** will not pay for the cost of resuming the **trip** after **you** have returned to New Zealand.
2. Additional travel must be at the fare class originally chosen, except where **we** agree otherwise based on a written recommendation by **your** attending registered medical practitioner.
3. If **you** do not have a return ticket at the time of the event that causes **you** to return to New Zealand, **we** will deduct the cost of an economy class airfare at the **carrier's** regular published rates for the return trip. **We** will use **your** return ticket if this reduces **our** costs.
4. **We** will not pay for additional transport and accommodation expenses when a claim is made under Section 2 Cancellation costs or Section 4 Travel delay, when applicable, for cancelled transport and accommodation expenses covering the same period of time.
5. Benefits are payable for a period up to 12 months from the date **your trip** was interrupted.

The maximum amount **we** will pay for all claims combined under this section is shown under **Policy Benefits** (page 5).

For what **we** will not pay in this section, please refer to **Exclusions to Sections 1-8** (pages 10-11) and **General Exclusions**: applicable to all sections (pages 13-15).

Section 4: Travel delay

If **your** pre-paid scheduled transport is cancelled, rescheduled or delayed for an unforeseen reason outside of **your** control, whether or not caused by a **carrier**, **we** will pay **you** up to \$2,000 for a **single** policy or \$4,000 for a **family** policy, per **trip**, as follows:

1. If **you** are delayed for at least 6 hours, **we** will pay **you** up to \$200 for each 12 hour period of delay. This benefit is for reimbursement of **reasonable** additional
2. Expenses for accommodation, meals and for transfers directly between transport terminals and accommodation; and

3. Where **you** cannot reach **your** next destination on time, **we** will pay **you** toward the cost of **your** unusable, non-recoverable, pre-paid accommodation, transfers, tours, events and attractions.

You must give **us your** receipts and written confirmation from the **carrier** of the reasons for the cancellation, rescheduling or delay and any compensation offered or denied. Additional expenses must be **reasonable** and necessary and at the same standard as originally booked.

We will not pay for flights or other transport costs or upgrades for **you** to continue **your** journey.

Where **you** incur an additional expense under item 1 above as well as a loss of a similar pre-paid expense under item 2 above relating to the same period of time, **we** will pay the higher of the two. For example, if **you** have to purchase a night's accommodation in City A because **your** flight is delayed and **you** can't use **your** non-refundable, pre-paid accommodation in City B for the same night, **we** will only pay the higher of these costs.

The maximum amount **we** will pay for all claims combined under this section is shown under **Policy Benefits** (page 5).

For what **we** will not pay in this section, please refer to **Exclusions to Sections 1-8** (pages 10-11) and **General Exclusions**: applicable to all sections (pages 13-15).

Section 5: Special events

If **your** trip is interrupted by any unforeseeable cause outside of **your** control and **you** are unable to arrive at **your** destination by the time originally scheduled for the purpose of:

- a) attending a pre-arranged wedding, funeral, conference or sporting event which cannot be delayed as a consequence of **your** late arrival, or
- b) returning to work in New Zealand,

we will reimburse **you** for the **reasonable** additional cost of using alternative public transport of the same fare class as originally chosen to arrive at the destination on time.

If returning to work, **you** will need to provide a letter from **your** employer confirming **your** dates of leave and when **you** were expected to return to work. For other pre-arranged events noted in (a) above,

you will need to provide proof of the scheduled commencement date and time.

The maximum amount **we** will pay for all claims combined under this section is shown under **Policy Benefits** (page 5).

For what **we** will not pay in this section, please refer to **Exclusions to Sections 1-8** (pages 10-11) and **General Exclusions**: applicable to all sections (pages 13-15).

Section 6: Rental vehicle insurance excess

We will pay **you** for the **rental vehicle** insurance excess if **you** rent a vehicle from a rental company and it is involved in an **accident**, is damaged or is stolen whilst in **your** care. **We** will only pay if **you** have a written rental agreement from a licensed rental company.

The maximum amount **we** will pay for all claims combined under this section is shown under **Policy Benefits** (page 5).

For what **we** will not pay in this section, please refer to **Exclusions to Sections 1-8** (pages 10-11) and **General Exclusions**: applicable to all sections (pages 13-15).

Section 7: Accidental death

1. **We** will pay **your** estate the **applicable limit** if **you** die within twelve (12) months as the direct result of an **injury** that happens to **you** during **your** trip.
2. **We** will also pay **your** estate the **applicable limit** if **you** are presumed dead and **your** body is not found within 12 months after the transport **you** were travelling in disappears, sinks, is wrecked or crashes.

No cover is provided under this Section 7 for **your** dependents. Under a **family** policy, **we** will only pay the **single** policy limit for any one person.

The maximum amount **we** will pay for all claims combined under this section is shown under **Policy Benefits** (page 5).

For what **we** will not pay in this section, please refer to **Exclusions to Sections 1-8** (pages 10-11) and **General Exclusions**: applicable to all sections (pages 13-15).

Section 8: Total permanent disability

We will pay **you** up to the **applicable limit** if, during **your trip**, **you** suffer an **injury** resulting in **your** permanent total loss of sight in one or both eyes or the permanent total loss of use of one or more limbs within one year of the date of the **accident**.

We will pay **you** up to the **single** amount shown for the policy. The maximum limit in respect of **dependents** is \$10,000 for each child.

The maximum amount **we** will pay for all claims combined under this section is shown under **Policy Benefits** (page 5).

For what **we** will not pay in this section, please refer to **Exclusions to Sections 1-8** (pages 10-11) and **General Exclusions**: applicable to all sections (pages 13-15).

Exclusions to Sections 1-8

We will not pay a claim that **arises** because of any of the following:

1. **You** have received medical care under a reciprocal national health scheme. Reciprocal Health Agreements are currently in place with the governments of Australia and the United Kingdom. For details of these agreements, refer to the NZ Ministry of Health website: www.health.govt.nz.
2. **You** received private hospital or medical treatment where public funded services or care was available in New Zealand or under any Reciprocal Health Agreement with Australia or the United Kingdom. Please refer to the NZ Ministry of Health website for further information: www.health.govt.nz.
3. Medical and/or dental costs incurred in New Zealand.
4. **You** travel even though **you** know **you** are unfit to travel; travel against medical advice; travel to obtain medical treatment; or **you** arrange to travel when **you** know of circumstances that could lead to the **trip** being disrupted or cancelled.
5. **You** have been instructed by **your** registered medical practitioner that **you** are unfit to travel and **you** fail to promptly cancel **your** pre-booked travel. **You** will be responsible for any extra cost (including cancellation charges) incurred from **your**

failure to promptly cancel the prearranged travel.

6. **Your** claim **arises** directly or indirectly from any **injury, sudden illness or serious injury** where a metastatic or terminal prognosis was made prior to the issue of the Certificate of Insurance.
7. **Your** claim **arises** out of pregnancy or related **pregnancy complications** after 26 weeks of pregnancy with a single baby or after 19 weeks of pregnancy with a multiple pregnancy. Expectant mothers should consider whether they travel under this policy, as no cover is provided for childbirth or the health of a newborn child, irrespective of the stage of pregnancy at which the child is born.
8. Dental treatment involving the use of precious metals or for cosmetic dentistry.
9. A tour operator or wholesaler is unable to complete arrangements for a tour because there are not the required number of people to begin or complete a tour or trip. This does not apply in relation to prepaid travel arrangements bought separately to reach the departure point for the tour or other travel arrangements.
10. A loss that **arises** directly or indirectly from an act or threat of terrorism. This exclusion only relates to **Section 2: Cancellation costs** on pages 6-7, **Section 4: Travel delay** on page 8 and **Section 5: Special events** on page 9.
11. Delays, rescheduling or cancellation of scheduled transport services caused by the **carrier** or related to the **carrier**, including maintenance, repairs, rescheduling, service faults or industrial activity other than a strike or corporate takeover. This exclusion does not apply to **Section 4: Travel delay** on page 8 and **Section 5: Special events** on page 9.
12. Financial, business, professional or contractual arrangements. This exclusion does not apply to claims under **Section 2: Cancellation costs** (pages 6-7) where **you** are a full-time permanent employee of the New Zealand military or police force and **your** pre-approved leave is cancelled by **your** employer.
13. Which **arises** from a lack of due care and responsibility on **your** part by neglecting to observe appropriate preventative measures for the travel region as outlined by the World Health Organisation, including relevant vaccinations, malaria prophylaxis and hygiene measures. Please see www.who.int for further information.

14. **You** or a member of the **travelling party** changes plans or decides not to continue with the **trip**.
15. **You** operate a **rental vehicle** in violation of the rental agreement.
16. **You** use the **rental vehicle** to transport items other than luggage.
17. **You** engage in snow skiing or other sports and activities on snow or ice, including glacier/ice walking.
18. The financial collapse of any transport, tour or accommodation provider.

You must check **General Exclusions**: applicable to all sections (pages 13-15) for other reasons why **we** will not pay.

Section 9: Luggage and personal effects

You must take all reasonable precautions to safeguard **your luggage and personal effects**, for example:

- a) locking them securely inside a locker or cabinet; or
- b) leaving them in **your** or **your travelling party's** locked, private room; or
- c) not leaving them **unsupervised** in a **public place**, not leaving them behind nor walking away from them.

Otherwise, **we** will not pay **your** claim.

It is important that **you** report all losses to the police if theft is suspected or **you** lose something. However, all losses that occur aboard public transport or whilst **you** are a guest of an accommodation provider should also be reported to a responsible officer of the transport or accommodation provider where the loss occurred. **You** must obtain a written report from whomever **you** report **your** loss to. All losses must be reported within 24 hours of discovery.

The limits in total for a camera, video camera or personal computer and for any other item are set out below. A pair or related set of items is considered one individual item. Examples of individual items include, but are not limited to:

- a) a camera, lenses (attached or not), tripod and accessories;
- b) a matching pair of earrings.

The maximum amount **we** will pay for any one item (item limit) is:

- \$700; and
- \$1,000 where the item is a mobile phone; and
- \$4,000 where the item is a laptop, tablet, camera or video camera.

If **we** are to pay a claim, **you** must:

- a) keep receipts for goods **you** buy separate from the goods themselves;
- b) keep any relevant ticket and luggage check and other documentation and give them to **us**;
- c) provide evidence of the value and **your** ownership of the goods;
- d) provide evidence of forced entry for theft of locked items;
- e) if an airline loses or damages **your** accompanying luggage, report it in writing to the airline within 24 hours of discovery; and
- f) get written confirmation that **you** made the report, and give it to **us** with details of any settlement that they make in relation to the loss or damage.

We are entitled to choose between repairing or replacing the property or paying **you** its value in cash after allowing for **reasonable** wear and tear (depreciation). Any payment, however, will not exceed the original cost of the item.

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

1. **Accidental** loss, theft or damage to **your luggage and personal effects**, including things **you** buy during the **trip**, whilst they are accompanying **you**.
2. Theft of cash up to \$250 provided a police report is obtained confirming the theft has occurred.
3. Loss of dentures or dental prostheses up to \$800.
4. Essential clothing and toiletry items bought because **your luggage** is temporarily lost or delayed (not permanently lost) by the **carrier** for more than 12 hours, up to \$250 for a **single** policy or \$500 for a **family** policy. This does not apply on the leg of **your trip** that brings **you** to **your home** in New Zealand. **We** will not pay more than \$500 for a **single** policy or \$1,000 for a **family** policy if the delay is more than 72 hours. **You** must give **us** relevant receipts and written confirmation of **your** claim, including the length of the delay from the appropriate authority. No **excess** applies to this benefit.

5. Financial loss **you** suffer because of loss, theft or fraudulent use of **your** travel documents, travellers cheques, passport or credit cards after they have been **accidentally** lost or have been stolen. **We** will not pay more than \$2,000. **You** must comply with any conditions of the issuing body.
6. The **reasonable** additional costs incurred **overseas** in obtaining a replacement passport or travel document following the **accidental** loss, theft or damage of **your** passport whilst outside New Zealand, up to \$2,000. No **excess** applies to this benefit.
7. In the event that a claimable loss, theft or damage to **your luggage and personal effects** occurs, **we** will allow **you** one automatic reinstatement of the sum insured for **your** policy.

The maximum amount **we** will pay for all claims combined under this section is shown under **Policy Benefits** (page 5).

The **Exclusions to Section 9** (page 12) and the **General Exclusions**: applicable to all sections (pages 13-15).

Exclusions to Section 9

We will not pay for a claim that **arises** because of any of the following:

1. Loss, theft or damage to watercraft of any type (excluding surfboards).
2. Damage to sports and leisure equipment (including surfboards) while in use.
3. Breakage or damage to snow sports and leisure equipment over three years old.
4. Damage to sports and leisure equipment due to normal wear and tear, including dents and scratches.
5. Loss, theft or damage of **luggage** not reported to the transport provider, police, hotel or appropriate authority within 24 hours of **you** becoming aware of the loss and where no written report is obtained.

You must check **General Exclusions**: applicable to all sections (pages 13-15) for other reasons why **we** will not pay.

Section 10: Personal liability

We will pay **you** amounts for which **you** are legally liable, up to the maximum benefit, because **your** negligence during **your 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 is not in **your** or their custody or control.

We will also reimburse **your reasonable** legal costs and legal expenses for settling or defending the claim made against **you**. **We** decide whether the costs were **reasonable**. **You** must not accept any liability without **our** prior approval.

The maximum amount **we** will pay for all claims combined under this section is shown under **Policy Benefits** (page 5).

Exclusions to Section 10

We will not pay for liability:

1. **Arising** out of **your** trade, business or profession;
2. For injury to an employee **arising** out of, or in the course of, their employment by **you**;
3. **Arising** out of an unlawful, wilful or malicious act by **you**;
4. **Arising** out of **your** ownership, possession or use (including as a passenger) of a mechanically propelled vehicle or any aircraft or watercraft;
5. **Arising** out of **you** passing on an illness or disease to another person;
6. **Arising** out of **your** participation in snow skiing or other sports and activities on snow or ice, including glacier/ice walking.

You must check **General Exclusions**: applicable to all sections (pages 13-15) for other reasons why **we** will not pay.



General Exclusions (applicable to all sections)

It's important to be aware that all travel insurance has "exclusions" – events and items **you** will not be covered for. Carefully read and ensure **you**

understand all preceding section exclusions and the following general exclusions. If **you** are unsure, please call nib on 0800 888 nib (0800 888 642).

We will not pay for any claim arising from or relating to the following:

1. A loss which is recoverable by compensation under any workers compensation act or transport accident laws or by any Government sponsored fund, plan, medical benefit scheme or any other similar legislation required to be effected by or under a law, including the Accident Compensation Act.
2. A loss **arising** from the failure of any travel agent, tour operator, accommodation provider, airline or other **carrier**, car rental agency or any other travel or tourism services provider to provide services or accommodation due to their **insolvency** or the **insolvency** of any person, company or organisation they deal with.
3. Consequential loss of any nature including loss of enjoyment.
4. A loss resulting from a criminal, unlawful or dishonest act by **you** or by a person with whom **you** are in collusion or if **you** have not been honest and frank with all answers, statements and submissions made in connection with **your** insurance application or claim.
5. A loss that **arises** from any act of war (whether war is declared or not) or from any rebellion, revolution, insurrection or taking of power by the military.
6. A loss that **arises** from a nuclear reaction or contamination from nuclear weapons or radioactivity.
7. A loss that **arises** from biological and/ or chemical materials, substances, compounds or the like used directly or indirectly for the purpose to harm or to destroy human life and/or create public fear.
8. **Your** claim **arises** from errors or omissions in any booking arrangements or failure to obtain relevant visa, passport or travel documents.
9. A loss that **arises** because **you** did not follow advice in the mass media of a government or other official body's warning:
 - a) against travel to a particular country or parts of a country; or
 - b) of a strike, riot, bad weather, civil commotion or contagious disease; or
 - c) of a likely or actual **epidemic** or **pandemic**; or
 - d) of a threat of an **epidemic** or **pandemic** that requires the closure of a country's borders; or
 - e) of an **epidemic** or **pandemic** that results in **you** being quarantined;

and **you** did not take the appropriate action to avoid or minimise any potential claim under **your** policy (including delay of travel referred to in the warning). Please refer to www.who.int and www.safetravel.govt.nz for further information.

No cover is available for any event under any section of this policy should **you** travel to a country or region where the New Zealand government has issued an "Extreme Risk" warning.

10. A loss that **arises** from BASE jumping parachuting, sky diving, hang gliding, parapenting or travel in an air supported device other than as a passenger in a licensed passenger aircraft operated by an airline or charter company. This does not apply to hot air ballooning or parasailing.
11. **You** engage in snow skiing or other sports and activities on snow or ice during **your trip**, including glacier/ice walking.
12. A loss, theft or damage to:
- a) cash, bank or currency notes, cheques or negotiable instruments (excluding Section 9 theft of cash);
 - b) **unsupervised luggage and personal effects**;
 - c) property that **you** leave **unsupervised** in a **public place** or that happens because **you** do not take reasonable care to protect it;
 - d) **luggage and personal effects**, but only to the extent that **you** are entitled to compensation from the **carrier** responsible for the loss, theft or damage;
 - e) items left **unsupervised** in a motor vehicle, unless taken from a locked boot or locked concealed luggage compartment of a station wagon, hatchback, van or motor home between sunrise and sunset local time and there is evidence of damage or forced entry which is confirmed by a police report; or
 - f) a video camera, mobile telephone, photographic equipment, personal computer or jewellery left **unsupervised** in a motor vehicle at any time;
 - g) a video camera, mobile telephone, photographic equipment, personal computer or jewellery checked in to be held and transported in the cargo hold of any **carrier** (including any loss from the point of check-in until receipt of the said goods);
 - h) **luggage and personal effects** which are fragile or brittle or an electronic component which is broken or scratched, unless either:
 - i) it is the lens of spectacles, binoculars or photographic or video equipment; or
 - ii) the breakage or scratch was caused by a crash involving a vehicle in which **you** were travelling.
13. For loss, theft or damage which is not reported to, and a written report is not obtained within 24 hours of discovery from, the police or the appropriate authority such as, but not limited to, the airline, accommodation manager, transport provider, airport authority, tour operator or guide. In the case of an airline, a property irregularity report will be required.
14. Loss, wear and tear or depreciation of property or damage caused by the action of insects, vermin, mildew, rust or corrosion.
15. A loss **arising** from any mechanical or electrical breakdown or malfunction.
16. A loss **arising** from **your**, any of **your travelling party's** or a **close relative's** intentional exposure to a needless risk or not taking reasonable care, except in an attempt to save human life.
17. Any search and rescue expenses (including costs charged to **you** by a government, regulated authority or private organisation connected with finding or rescuing an individual).
18. Delay, detention, seizure or confiscation by Customs or other officials.
19. Events for which 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 the European Union, United Kingdom or the United States of America.
20. Loss, theft or damage to anything shipped as freight or under a Bill of Lading.
21. If **you**, **your close relative** or a member of **your travelling party**:
- a) commits suicide, attempts to commit suicide or deliberately injures himself or herself;
 - b) is under the influence of, or is addicted to, intoxicating liquor or a drug, except a drug taken in accordance with the advice of a registered medical practitioner;
 - c) takes part in a riot or civil commotion;
 - d) acts maliciously;
 - e) races (except on foot); mountaineers or rock climbs using support ropes; treks/hikes above 3,000 metres; or takes part in any professional sporting activity;

- f) rides a motorcycle:
- i) without wearing a helmet; and
 - ii) without having a valid licence as required in New Zealand and in the country of travel for the same class of motorcycle **you** (or they) are operating; or
 - iii) as a pillion passenger without a helmet;
- g) dives underwater using an artificial breathing apparatus, unless an open water diving licence is held or when diving under licensed instruction.
22. For any costs or expenses incurred outside the period of the **trip**.
23. Ongoing payments under **Section 1: Medical expenses incurred overseas** (page 6) if **we** decide on the advice of a doctor appointed by **us** that **you** are capable of being repatriated to New Zealand.
24. **Your claim arises** from any medical procedures in relation to AICD/ICD insertion during overseas travel. If **you**, **your travelling party** or a **close relative** (as listed on **your** Certificate of Insurance) requires this procedure, due to sudden and acute onset which occurs for the first time during **your** period of cover and not directly or indirectly related to an **existing medical condition**, **we** will exercise **our** right to organise a repatriation to New Zealand for this procedure to be completed.
25. The cost of medication in use at the time the **trip** began or for maintaining a course of treatment **you** were on prior to the **trip**.
26. **Your claim arises** from **existing medical conditions** except as specified under **Existing Medical Conditions** (page 16).
27. If **your claim arises** directly or indirectly from a sexually transmitted disease.
28. Fertility treatment at any time and any resulting complication.
29. **Your pregnancy complications** that existed any time prior to the Cover Start Date shown on **your** Certificate of Insurance or that **you** are currently experiencing at the Cover Start Date listed on **your** Certificate of Insurance.
30. Pregnancy in any of the following circumstances:
- a) a single pregnancy after 26 weeks;
 - b) a multiple pregnancy after 19 weeks;
 - c) for childbirth at any time;
 - d) for regular antenatal care;
 - e) care of a newborn child.



Existing Medical Conditions

The cover described in the Policy Benefits (page 5) and in What's Covered and What's Not (pages 6-12) may include cover for a claim which arises from an existing medical condition in certain circumstances.

What's an existing medical condition?

An **existing medical condition** is one for which **you** have ever:

- had symptoms or been diagnosed;
- been prescribed medication;
- received (or are waiting for) medical treatment;

- received (or are waiting for) tests, investigations or specialist consultation;
- received or been advised to attend a follow-up consultation; and/or
- had surgery or attended a hospital or clinic (as an outpatient or inpatient).

It also includes any **chronic** or ongoing medical condition or terminal illness.

This definition applies to **you**, a member of **your travelling party**, a **close relative**, and any other person.

Automatically accepted conditions

Many common medical conditions are automatically covered by **your** policy. **We** automatically cover **you** for over 25 **existing medical conditions** (shown in the table below) for events that unexpectedly **arise** from that condition, provided that **you** satisfy all criteria listed for the condition(s).

Medical condition	Criteria
Acne	You haven't received treatment for your Acne from a medical practitioner in the three months prior to the Cover Start Date shown on your Certificate of Insurance.
Allergies	<p>You follow advice in accordance with your medical practitioner (such as to carry EpiPen(s), antihistamines/other preventative medication at all times) and, at the Cover Start Date shown on your policy certificate, you:</p> <ul style="list-style-type: none"> ■ 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.

Medical condition	Criteria
Asthma	At the Cover Start Date shown on your Certificate of Insurance, you : <ul style="list-style-type: none"> ■ 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.
Bunions	At the Cover Start Date shown on your Certificate of Insurance, you haven't had surgery for Bunions in the last three months and have no surgery planned.
Carpal Tunnel Syndrome	At the Cover Start Date shown on your Certificate of Insurance, you haven't had surgery for Carpal Tunnel Syndrome in the last three months and have no surgery planned.
Cataracts	At the Cover Start Date shown on your Certificate of Insurance, 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 Cover Start Date shown on your Certificate of Insurance, 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.
Ear Grommets	At the Cover Start Date shown on your Certificate of Insurance, you have no current ear infection.
Epilepsy	At the Cover Start Date shown on your Certificate of Insurance, you have: <ul style="list-style-type: none"> ■ 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.
Gastric Reflux	Your Gastric Reflux doesn't relate to another underlying diagnosis (examples: hernia or gastric ulcer).
Glaucoma	At the Cover Start Date shown on your Certificate of Insurance, 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.
Grave's Disease	At the Cover Start Date shown on your Certificate of Insurance, you haven't received treatment from a medical practitioner for Graves' Disease in the last six months.

Medical condition	Criteria
Hiatus Hernia	At the Cover Start Date shown on your Certificate of Insurance, 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 at the Cover Start Date shown on your Certificate of Insurance you have no cardiovascular/coronary heart disease.
Hypertension (High Blood Pressure)	Provided at the Cover Start Date shown on your Certificate of Insurance: <ul style="list-style-type: none"> ■ you have no known cardiovascular/coronary heart disease; ■ you don't have Diabetes (Type 1 or Type 11); and ■ your current blood pressure reading is lower than 165/95.
Hyperthyroidism (overactive thyroid)	The underlying medical cause excludes tumour.
Hypothyroidism (underactive thyroid)	The underlying medical cause excludes tumour.
Incontinence	You have no underlying gastrointestinal or urinary condition.
Migraine	You haven't required hospitalisation for Migraines in the two years prior to the Cover Start Date shown on your Certificate of Insurance, including as an outpatient.
Plantar Fasciitis	At the Cover Start Date shown on your Certificate of Insurance, you haven't had surgery for Plantar Fasciitis in the last three months, and have no surgery planned.
Raynaud's Disease	At the Cover Start Date shown on your Certificate of Insurance, you haven't required treatment by a medical practitioner for Raynaud's Disease in the last six months.

Can I purchase cover for other existing medical conditions that are not automatically covered?

You can't buy any additional cover. If **you** have an **existing medical condition** that's not listed above as an automatically accepted condition, or **you** don't satisfy all criteria for any listed condition, then **you** can still be issued a policy but **you** won't be covered for any claim that **arises** in relation to the **existing medical condition**.

What if I develop a medical condition after my policy is issued but before I travel?

If **you** develop a new medical condition (or the symptoms of one) after the Cover Start Date shown on **your** Certificate of Insurance but before **you** depart on **your trip**, **you** must check with **your** medical practitioner for written confirmation that **you're** fit to travel. 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** either directly or indirectly from that condition if **you** still travel.

Don't forget, if **you** had symptoms of a condition or were undergoing investigations for it at the Cover Start Date shown on **your** Certificate of Insurance, **we** consider that to be an **existing medical condition**.

Existing medical conditions – close relatives

Cover is available to **you** when **your** travel plans are interrupted when a **close relative** is hospitalised or dies unexpectedly in New Zealand or Australia as a result of a **sudden illness or serious injury arising** from their **existing medical condition(s)**. **Your close relative** must be residing in New Zealand or Australia at the time and not travelling with **you** on any part of **your trip**.

At the time of the policy issue, **you** had to have been unaware of the likelihood of such hospitalisation or death.

The most **we** will pay in respect of all claims **arising** from the **existing medical condition** of a **close relative** under all sections of the policy combined is \$2,000 for a **single** policy and \$4,000 for a **family** policy, per **trip**.

Existing medical conditions – other people

We will not pay for claims made under this policy which **arise** from an **existing medical condition** suffered by people other than those named on the Certificate of Insurance or for a **close relative** as noted above.

Please also read the applicable cover and exclusion sections under **What's Covered and What's Not** (pages 6-12) and the **General Exclusions:** applicable to all sections (pages 13-15).

If **you** have any queries regarding **existing medical conditions**, please contact nib on **0800 888 nib** (0800 888 642).



Travelling While Pregnant

The cover described in the Policy Benefits (page 5) and in What's Covered and What's Not (pages 6-12) may include cover for a claim which arises from pregnancy in the following circumstances.

When are you covered?

If **you're** pregnant at the Cover Start Date shown on **your** Certificate of Insurance or fall pregnant afterwards, **you'll** have **cover** for any claim that **arises** from **your** pregnancy, provided that the event that causes **your** claim:

- is sudden, unforeseen and outside of **your** control; and
- occurs up to the end of the 26th week of a single pregnancy (or the 19th week of a multiple pregnancy); and
- isn't otherwise excluded under this policy.

Further, if **your** claim **arises** as a result of **pregnancy complications** such as hyperemesis (severe morning sickness), miscarriage and gestational diabetes, then to be covered, those (or any other) **pregnancy complications** must have first developed unexpectedly after the Cover Start Date shown on **your** Certificate of Insurance and not be related to any previous **pregnancy complication you'd** had prior to the Cover Start Date shown on **your** Certificate of Insurance.

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

When aren't you covered?

You won't be covered for any claims that **arise** from any past or current **pregnancy complications** that exist at the Cover Start Date shown on **your** Certificate of Insurance.

You also won't be covered for:

- fertility treatment, at any time;
- childbirth at any time;
- regular ante-natal care;
- care of a newborn child.

Also, **you** should plan **your trip** so **you're home** by the end of the 26th week for single pregnancies (or the 19th week for multiple pregnancies). If **you** don't and something happens after that period, **you** won't be covered.

You must check all **Exclusions to Sections 1-8** (pages 10-11), **9** (page 12), **10** (page 12), and the **General Exclusions**: applicable to all sections (pages 13-15) for other circumstances in which there is no cover or **we** will not pay.



Help & Emergencies

Our emergency assistance service is there to help with medical emergencies, locate the nearest medical facilities, arrange **your** medical repatriation **home**, guide **you** to a local consulate or embassy, keep **you** in touch with **your** family or just give some general help when **you** need it.

24 hours, 7 days.

Phone:

+61 2 9234 3170 or
+61 2 8256 1570

Call reverse charges via the local operator to avoid call costs.

Email:

assist@we.com.au

Other contact information is available on nibtravel.co.nz/emergencies

If you need to go to hospital, are in an accident, require medical evacuation or repatriation

In an emergency situation, time is critical, so **you** or a member of **your travelling party** must contact **our** emergency assistance service (contact details above) as soon as it is practical following an **accident** or **you** becoming ill or **you** being hospitalised. They will need to assess **your** condition, so they will contact the hospital **you** are in to obtain necessary medical reports, and they may need to contact **your** GP at **home**.

Where **you** have not notified **our** emergency assistance service, **we** will not pay for any expenses, evacuation or airfares that have not been approved or arranged by **us**.

Subject to medical advice, **you** must follow the instructions of **our** emergency assistance team as to where **you** can be treated to ensure **you** receive quality medical care. **We** also have the option of returning **you** to New Zealand or evacuating **you** to another country if the cost of **your overseas** medical expenses could exceed the cost of returning **you** to New Zealand.

If you have a medical condition but are not hospitalised

Where the costs are likely to be under \$2,000 and **you** do not require repatriation to New Zealand due to **your** medical or dental condition, **you** do not need to contact **our** emergency assistance service straight away. **You** can pay the costs **yourself**, but keep all receipts and obtain any medical reports to submit with **your** claim online while **you** are away or when **you** return.

Stolen, lost or damaged passport

Our emergency assistance service can help **you** find a local consulate if **your** passport is lost or stolen as well as let **you** know what **you** need to provide **us** when **you** make a claim.



Making a Claim

What we ask for

We ask that **you** notify **us** of any claims within 30 days of **your** return from **your** trip. When **you** submit **your** claim, **we** will only ask for relevant information that **we** require to assess **your** claim. It is important that **you** tell **us** what happened and provide **us** with all the documents **we** ask for.

It is important that **you** obtain as much documentation as possible at the time of the event, as it can be difficult to obtain some documents once **you** return to New Zealand. If **you** have anything lost or stolen, **you** need to report it within 24 hours of discovery to the police as well as any other appropriate authority in the circumstances (such as an accommodation provider, airline or tour operator) while **you** are there.

You must also obtain a copy of the written report from whomever **you** report **your** loss to and submit this with **your** claim. If a **carrier** has lost or damaged **your** luggage or **you** notice something has been taken from **your** bag, **you** should report the event to the **carrier** and obtain a Property Irregularity Report from them as soon as possible.

We may ask **you** to translate documents into English if they are provided to **us** in another language. Where possible, **you** should obtain these translations before submitting **your** claim.

We do not require professional translations but any expenses incurred in obtaining the translation will not be paid by **us**.

Other information **we** may require includes, but is not limited to, original receipts; proof of ownership of **your** luggage and personal effects; valuations; clinical notes or a written medical report or summary from **your** treating doctor or dentist **overseas** which

clearly explains the medical condition, the diagnosis provided, medical tests requested and treatment given; or a medical certificate from **your** local GP or dentist. Any relevant information **we** ask for would need to be provided at **your** expense.

Please retain the originals of all documents, as **we** may require that **you** send these to **us** (as outlined below).

Submitting your claim

You need to notify **us** of any claims by completing a claim form in full and attaching all supporting documentation.

To obtain a claim form, for instructions on submitting **your** claim form and supporting documentation, and for details of the full claims process:

To obtain a claim form, for instructions on submitting **your** claim form and supporting documentation, and for details of the full claims process:



Visit **our** website at:
nibtravel.co.nz/claims



Email:
nibtravelclaims@cerberusrisks.com, or



Ring **us** on:
0800 888 nib (0800 888 642)

If **you** do not fully complete the claim form or provide the information **we** require, **we** may not be able to process **your** claim, or **we** may reduce the amount of **your** claim.

Claims processing

We will acknowledge **your** claim within five business days and process **your** claim within ten business days of **us** receiving a completed claim form and all necessary documentation. If **we** need additional information, a written request will be sent to **you** within ten business days.

Claims are payable in New Zealand dollars

We will pay all claims in New Zealand dollars. We will pay **you** unless **you** tell **us** to pay someone else. The rate of currency exchange that will apply is the rate at the time **you** incurred the expense.

You must not admit fault or liability

In relation to any claim under this policy, **you** must not admit that **you** are at fault and **you** must not offer or promise to pay any money, or become involved in litigation, without **our** approval.

You must help us recover any money we have paid

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 you can claim from anyone else, we will only make up the difference

If **you** can make a claim against someone other than under an insurance policy in relation to a loss or expense covered under this policy and they do not pay **you** the full amount of **your** claim, **we** will make up the difference. **You** must claim from them first.

Depreciation

Depreciation will be applied to claims for **luggage and personal effects**. It is calculated at such reasonable rates as determined by **us** by taking into consideration factors such as **reasonable** wear and tear based on the age of the item, the expected life span of an item, the value on the second hand market and advances in technology which reflect in the price of the item if **you** were to purchase it now.

Other insurance

If any loss, damage or liability covered under this policy is covered by another insurance policy, **you** must give **us** details. If **you** make a claim under one insurance policy and **you** are paid the full amount of **your** claim, **you** cannot make a claim under the other policy. If the loss, damage or liability covered under this policy is covered to any extent under another insurance policy, this policy pays nothing until that other policy is exhausted. **You** must give **us** any information **we** reasonably ask for to help **us** make a claim from **your** other Insurer.

Subrogation

We may, at **our** discretion, undertake in **your** name and on **your** behalf control and settlement of proceedings for **our** own benefit to recover compensation or secure indemnity from any party in respect of anything covered by this policy. **You** are to assist and permit to be done all acts and things as required by **us** for the purpose of recovering compensation or securing indemnity from other parties to which **we** may become entitled or subrogated, upon **us** paying **your** claim under this policy regardless of whether **we** have yet paid **your** claim and whether or not the amount **we** pay **you** is less than full compensation for **your** loss. These rights exist regardless of whether **your** claim is paid under a non-indemnity or an indemnity clause of this policy.

Recovery

We will apply any money we recover from someone else under a right of subrogation in the following order:

1. To **us, our** administration and legal costs **arising** from the recovery.
2. To **us**, an amount equal to the amount that **we** paid to **you** under the policy.
3. To **you, your** uninsured loss (less **your excess**).
4. To **you, your excess**.

Once **we** pay **your** total loss, **we** will keep all money left over. If **we** have paid **your** total loss and **you** receive a payment from someone else for that loss or damage, **you** must pay **us** the amount of that payment up to the amount of the claim **we** paid **you**.

If **we** pay **you** for lost 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**.

GST

If **you** are required to account for GST on any claim payment because of section 5(13) Goods and Services Tax Act 1985:

- **You** must advise **us** of this at the time **you**
- make the claim; and
- Provided **you** have advised **us, we** will increase the claim payment so that the amount **you** receive, after having accounted for GST on the claim payment, is the amount **you** would have received if section 5(13) Goods and Services Tax Act 1985 didn't apply.



Important Matters

When you are issued a travel insurance policy with nib, it's important you understand who we are, the services you will receive, your duty of disclosure, your rights and our responsibilities to you.

About us

This insurance is underwritten by certain underwriters at Lloyd's (insurer) who have authorised Cerberus Special Risks Pty Limited, ABN 81 115 932 173 (Cerberus), under a binding authority to issue, vary, renew or cancel **your** insurance and handle and settle any claims under it. Cerberus acts as the insurer's agent and not as **your** agent.

Cerberus has appointed nib Travel Insurance Distribution Pty Ltd ABN 40 129 262 175 (nib) to assist in the management of its insurance activities, provide general advice and arrange to issue travel insurance. nib acts on behalf of Cerberus and the insurer and not on **your** behalf.

nib is a registered Financial Service Provider and member of the Insurance & Financial Services Ombudsman dispute resolution scheme.

Our contact details:

nib Travel Insurance Distribution Pty Ltd

 PO Box A975
Sydney South NSW 1235
Australia

 **0800 888 nib** (0800 888 642)

 contactus@nibtravel.co.nz

Your duty of disclosure

Before **you** enter into, vary or extend an insurance contract, **you** must provide **us** with complete and up-to-date material information about everyone insured under **your** policy.

When **we** ask **you** questions that are relevant to **our** decision to insure **you** and on what terms, **you** must tell **us** anything that **you** know and that a reasonable person in the circumstances would include in answering the questions.

When amending or extending **your** contract of insurance, **we** will ask **you** specific questions about any change in **your** circumstances. **You** must tell **us** about any change to something **you** have previously told **us**, otherwise **you** will be taken to have told **us** that there is no change.

You have this duty until **we** agree to insure, amend or extend the contract.

If **you** do not tell **us** anything **you** are required to tell **us** or if **you** provide **us** with false information, **we** may cancel **your** contract or reduce the amount **we** will pay you if **you** make a claim or both.

Important Matters

If **your** failure to tell **us** anything **you** are required to tell **us**, or **your** provision of false information, is fraudulent, **we** may refuse to pay a claim and treat the contract as if it never existed.

Applying for cover

When **you** get a policy, **we** will confirm with **you** things such as the period of insurance, what cover and **excesses** will apply, and, where applicable, any changes to the policy document or cover which will be documented in writing to **you**. These details are recorded on the Certificate of Insurance and any other documentation **we** issue to **you**.

If **you** have any queries, want further information about the policy or want to confirm a transaction, please contact nib on:

 **0800 888 nib** (0800 888 642)

About your premium

The premium for this travel insurance policy is paid by nib nz limited, and this policy is offered at no cost to **you**.

The premium includes amounts that take into account **our** obligation to pay any relevant compulsory government charges, taxes or levies (e.g. GST) in relation to **your** policy.

Changes to your policy

Please check all **your** policy documents and make sure all the information is correct as **we** rely on the information in dealing with **your** policy. If there are any errors, please contact nib on:

 **0800 888 nib** (0800 888 642)

OR

 contactus@nibtravel.co.nz

Where **your** circumstances have changed and **you** need to change the cover **we** provide, please contact **us** so **we** can assist. In some circumstances **we** can change the cover or issue a new policy. Either way **we** will always email **you** a new Certificate of Insurance.

Continuation of cover

To have cover under this travel insurance policy **you** must hold active **nib Ultimate Health** Cover.

Where:

- **You** end the **nib Ultimate Health** Cover arrangement which this travel insurance policy is part of; or
- The **nib Ultimate Health** Cover that this travel insurance policy is part of is cancelled by nib nz limited,

this policy ends on the date **your nib Ultimate Health** Cover ends. **We** may offer an alternative travel insurance policy for **your** consideration.

If **you** wish to apply for new travel insurance cover after **your** initial travel insurance policy has ended, it will be under a new contract of insurance with new policy terms and conditions.

Policy extensions

The maximum period of insurance for this travel insurance policy is 12 months, as evidenced on the Certificate of Insurance that **we** issue to **you**. Extensions to this period of insurance are not available.

nib nz limited may pay for a new policy for **you** at its discretion; cover will be under a new contract of insurance with new policy terms and conditions.

Cover for **trips** taken within this period of insurance cannot be extended beyond 38 days duration per **trip** nor past the Cover End Date shown on **your** Certificate of Insurance.

If during **your trip** the scheduled transport in which **you** are to travel is delayed, or the delay is caused by an event that is covered under **your** policy, the insurance is automatically extended beyond the period of the **trip**. The extension lasts until **you** are capable of travelling to **your** final destination, including the journey there, or for a period of six (6) months, whichever happens first.

How we handle complaints

If **you're** unhappy with the service, the insurance or the financial services provided by the insurer, Cerberus or nib, please contact:

 Cerberus Customer Relations
PO Box A975
Sydney South NSW 1235 Australia

 +61 2 8263 0487

 idr@cerberusrisks.com

Cerberus will acknowledge **your** complaint within 5 business days and provide **you** with the contact details of the person handling **your** complaint. **We** will issue **our** response to **your** complaint within 10 business days of the date **we** have all the information **we** need to determine **your** complaint.

If more time is needed to collect necessary information or complete any further investigation required, Cerberus will agree with **you** a reasonable alternative timeframe.

If **you** are not satisfied with the response to **your** complaint, **you** should contact Lloyd's for consideration under their dispute resolution process. **You** can contact Lloyd's at:

 Lloyd's Underwriters' General Representative
in New Zealand, Mr Scott Galloway
c/o Hazelton Law
Level 29 Plimmer Towers,
2-6 Gilmer Terrace
PO Box 5639
Wellington New Zealand

 +64 4 472 7582
Fax: +64 4 472 7571

 scott.galloway@hazelton.co.nz

 Lloyd's
c/- Lloyd's Australia Ltd

 +61 2 8298 0783

 ldrnz@lloyds.com

Your dispute will be acknowledged within 5 working days of receipt, and Lloyd's will send a response on behalf of the Underwriters within 10 days. Lloyd's will send **you** a final response on behalf of the underwriters within 8 weeks from the date of the complaint. If there are problems in resolving the complaint within this time, Lloyd's will advise **you** of the reasons for this and when it expects to finalise the matter.

If **we** are unable to resolve **your** complaint or if **you** are still not satisfied with the outcome, **you** can choose to have **your** complaint independently reviewed by the Insurance & Financial Services Ombudsman (IFSO).

The IFSO provides a free and independent dispute resolution service for consumers who have a dispute with their financial service provider falling within its terms. **You** can contact the IFSO at:

 The Insurance & Financial Services
Ombudsman Scheme (IFSO)
PO Box 10-845
Wellington 6143 New Zealand

 **0800 888 202** or +64 4 499 7612
Fax: +64 4 499 7614

 info@ifso.nz www.ifso.nz

Fair Insurance Code

This policy is not subject to the protection of the Insurance Council of New Zealand Fair Insurance Code.

Jurisdiction and choice of law

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

- If a dispute arises under this insurance, this insurance will be subject to New Zealand law and practice and the underwriters will submit to the jurisdiction of any competent court in New Zealand;

- Any summons notice or process to be served upon the underwriters may be served upon:

Mr Scott Galloway
Lloyd's Underwriters' General Representative in
New Zealand c/o Hazelton Law

Level 29 Plimmer Towers 2-6 Gilmer Terrace
PO Box 5639
Wellington New Zealand

who has authority to accept service and to appear on the underwriters' behalf; and

- If a suit is instituted against **us**, **we** will abide by the final decision of such court or any competent appellate court.

Privacy Notice

In order to arrange and manage **your** travel insurance, we ('we', 'us' and 'our' means nib Travel Insurance Distribution Pty Ltd, Cerberus Special Risks and certain underwriters at Lloyd's in this Privacy Notice) collect **your** personal information, and in some circumstances **your** health information, from **you** directly and those authorised by **you** such as family members, travelling companions, doctors and hospitals, as well as others outlined in the nib privacy policy.

The personal and health information **you** provide is used to administer and provide the insurance services, such as providing **you** with emergency assistance, and to manage **your** and our rights and obligations in relation to the insurance services, including managing, processing and investigating claims. We may also collect, use and disclose it for other purposes with **your** consent or where authorised by law as outlined in the nib privacy policy.

Your personal and health may also be disclosed to third parties located in New Zealand and overseas including Australia, the United Kingdom and the USA

who are involved in the above process, as outlined in our privacy policy.

We may also use **your** personal information for the purposes of direct marketing current or related products and services offered by us.

You may ask at any time to stop receiving direct marketing communications from us by a particular channel or at all at any time by contacting us at contactus@nibtravel.co.nz or by calling **0800 888 nib** (0800 888 642).

Your personal and health information is collected and held by nib Travel Insurance Distribution Pty Ltd, and is also held by Cerberus Special Risks Pty Limited, PO Box A975, Sydney South 1235, NSW, Australia. **You** can seek access to and correct **your** personal information by contacting us at privacy@cerberusrisks.com or by calling **0800 888 nib** (0800 888 642).

If the information provided to us is not accurate or complete, we may not be able to provide an accurate quote, or provide benefits for the requested insurance or related services.

We reserve the right to change this privacy notice from time to time. For more information on how we collect, use, store and disclose **your** personal information, please see the full privacy policy at www.nibtravel.co.nz/privacy.

Updating the policy document

This policy document is current for the period of insurance outlined on **your** Certificate of Insurance. From time to time, **we** may need to update this policy document if certain changes occur where required and permitted by law. If the changes affect a policy **you** currently have with **us**, **we** may issue **you** with a new policy document or other written notice to update the relevant information.

We ask that **you** read the new policy document and any other documentation in full to understand the changes, as they may affect **your** cover or **your** decision to obtain cover with **us**.

Date prepared

Date prepared: 21 April 2018

Date effective: 21 April 2018

Version: NIBULT-PDS-01-21APR2018



Travel Insurance Glossary

Words in this policy document that have special meanings are noted in **bold** and defined here:

Accident or accidental

means an unexpected, unintended, unforeseeable event causing loss. The accident must happen while **you** are on a **trip** and covered under the policy.

AICD/ICD

means an implantable cardioverter-defibrillator (ICD), also known as an automated implantable cardioverter-defibrillator (AICD).

Applicable Limit

means the sum insured specified in the plan selected which is listed on **your** Certificate of Insurance.

Arises or Arising

means directly or indirectly caused by, resulting from, related to or in any way associated with.

Carrier or Carriers

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

Chronic

means 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 Relative

is limited to a relative of **yours** or of a member of **your travelling party** who is **residing** in New Zealand or Australia. It means **your** or their spouse,

de facto partner, parent, parent-in-law, daughter, son, daughter-in-law, son-in-law, brother, sister, brother-in-law, sister-in-law, grandchild, grandparent, step-parent, step-son, step-daughter, fiancé, fiancée or guardian.

Dependent

means **your** children or grandchildren not in full time employment who are under the age of 21 at the date of policy issue, travelling with **you** on the majority of the **trip**, and listed as covered on **your** Certificate of Insurance.

Epidemic

means a sudden development and rapid spreading of a contagious disease in a region where it developed in a simply endemic state or within a previously unscathed community.

Excess or Excesses

means the amount which **you** must first pay for all losses **arising** from the one event before a claim can be made under **your** policy.

Existing Medical Condition

means a medical condition for which, at the Cover Start Date shown on **your** Certificate of Insurance, **you** have ever:

- had symptoms or been diagnosed;
- been prescribed medication;
- received (or are waiting for) medical treatment;
- received (or are waiting for) tests, investigations or specialist consultation;
- received or been advised to attend a follow-up consultation; and/or

- had surgery or attended a hospital or clinic (as an outpatient or inpatient).

It also includes any **chronic** or ongoing medical condition or terminal illness.

This definition applies to **you**, a member of **your travelling party**, a **close relative**, and any other person.

Family

means **you** and **your** travel partner named in the Certificate of Insurance and **your dependent** children or grandchildren under the age of 21, at the date of policy issue, travelling with **you** on the majority of the **trip**, listed as covered on **your** Certificate of Insurance.

Home

means **your** usual place of residence in New Zealand.

Injury

means a bodily injury caused solely and directly by violent, **accidental**, visible and external means, during **your** period of cover and which does not result from any illness, sickness or disease.

Insolvency

means bankruptcy, provisional liquidation, liquidation, appointment of a receiver or administrator, entry into a scheme of arrangement, statutory protection, stopping the payment of debts or the happening of anything of a similar nature under the laws of any jurisdiction.

Luggage and Personal Effects

means any personal items owned by **you** and that **you** take with **you** or buy on **your trip** and which are designed to be worn or carried about with **you**. This includes items of clothing, personal jewellery, photographic and video equipment or personal computers, or electrical devices or portable equipment. However, it does not mean any business samples or items that **you** intend to trade.

nib Ultimate Health

means Ultimate Health Cover or Ultimate Health Max Cover issued by nib nz limited on or after 21 April 2018, where **you** are an insured person under that cover.

Overseas

means in any country other than New Zealand.

Pandemic

means a form of an **epidemic** that extends throughout an entire continent, even the entire human race.

Pregnancy Complications

means a medical condition in respect of which the diagnosis is distinct from pregnancy but is caused by or adversely affected by pregnancy.

Public Place

means any place that the public has access to including, but not limited to, planes, trains, cruise ships, taxis, buses, air or bus terminals, stations, wharves, streets, museums, galleries, hotels, hostels, dormitories and other shared accommodation (unless it is a private, locked room occupied only by **you** and/or **your travelling party**), foyers, grounds and common areas, campgrounds, beaches, restaurants, cafes, private car parks, public toilets and general access areas.

Reasonable

means, for medical or dental expenses, the standard level of care given in the country **you** are in, including the use of the public health care system where there is a Reciprocal Health Agreement in place with the Government of New Zealand; for other expenses, the standard level **you** have booked for the rest of **your trip**; or as determined by **us**.

Rental Vehicle

means only a rented sedan, campervan, hatchback or station wagon, four-wheel drive or mini bus/people mover rented from a licensed motor vehicle rental company.

Resident or Residents

means a New Zealand citizen; a holder of a current and valid New Zealand residence class or permanent resident visa, student visa or Essential Skills (Skills Shortage) work visa; an Australian passport holder permanently residing in New Zealand; and:

- a) with unrestricted right of entry into New Zealand;
- b) with access to long-term medical care in New Zealand (not including Reciprocal Health Agreements);
- c) who has a permanent New Zealand residential address; and
- d) who agrees to be repatriated, if required, back to New Zealand under this insurance.

Single

means **you** and **your dependent** children or grandchildren not in full-time employment under the age of 21, at the date of policy issue, travelling with **you** on the majority of the **trip**, listed as covered on **your** Certificate of Insurance.

Sudden Illness or Serious Injury

means a condition which first occurs during **your** period of cover and which necessitates treatment by a legally qualified medical practitioner and which results in **you** or any other person to which this Insurance applies being certified by that medical practitioner at the time as being unfit to travel or continue with **your** original **trip**.

Travelling Party

means those people defined in **family** and any travelling companion who has made arrangements to accompany **you** for at least 50% of the **trip**.

Trip

Means **your** travel **overseas**:

- a) for up to 38 days which begins and ends at **your home**; and is
- b) between the Cover Start Date and Cover End Date as shown on **your** Certificate of Insurance.

Unsupervised

- a) means leaving **your luggage** with a person **you** did not know prior to commencing **your trip**; or
- b) leaving it in any position where it can be taken without **your** knowledge; or
- c) leaving it at such a distance from **you** that **you** are unable to prevent it being taken.

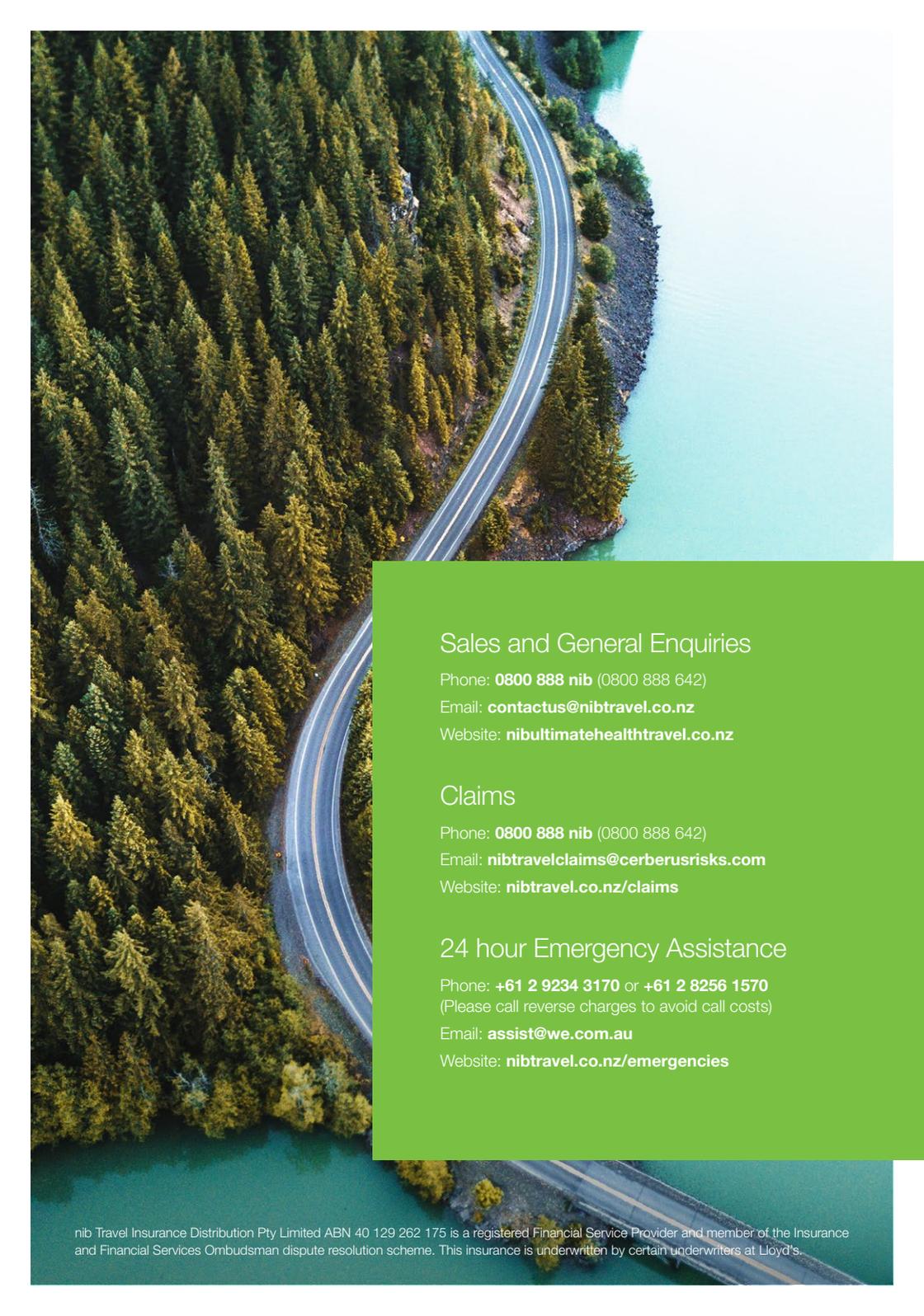
Unsupervised also means leaving **your luggage** behind, forgetting it or walking away from it.

We, Our, Us

means certain underwriters at Lloyd's who deal with **you** through their agent, Cerberus Special Risks Pty Limited.

You or Your

means the person or people named in the Certificate of Insurance and their accompanying **dependent** children or grandchildren under the age of 21, travelling with **you** on the majority of the **trip**, not in full-time employment at the date of policy issue and listed on **your** Certificate of Insurance.



Sales and General Enquiries

Phone: **0800 888 nib** (0800 888 642)

Email: contactus@nibtravel.co.nz

Website: nibultimatehealthtravel.co.nz

Claims

Phone: **0800 888 nib** (0800 888 642)

Email: nibtravelclaims@cerberusrisks.com

Website: nibtravel.co.nz/claims

24 hour Emergency Assistance

Phone: **+61 2 9234 3170** or **+61 2 8256 1570**
(Please call reverse charges to avoid call costs)

Email: assist@we.com.au

Website: nibtravel.co.nz/emergencies