


Personal Accident Insurance Policy: 02P0012009

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| (New) Location: | University Insurance Office Level 5, Arts Centre Building [No.199.] 757 Swanston Street (Corner Grattan Street), The University of Melbourne. Victoria. 3010. | | |
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Insurer: ACE Insurance Limited.

Policy Number: 02P0012009

1. Scope of Cover

2. How to Make a Claim

3. Supporting Documents Required to Support Claim

4. Definition Medicare and Non-Medicare Expenses

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1. Scope of Cover

All students currently enrolled at the University of Melbourne are protected by Student 'Personal Accident' Insurance covering most injuries received, only whilst undertaking, and travelling to and from their approved University-related activities, including University sport activities, Student Work Experience / Field / Outside Placements.

Including all related and affiliated bodies, institutions

The "Non-Medicare" Medical Expenses protection provided – does not cover any part of medical expenses incurred where a Medicare "Item Number" and a subsequent benefit is payable. This is due to Section 67 of the Australian Federal Government's "National Health Act", 1953, as amended.

No benefit is payable in respect of the Medicare gap, being the difference between the payments made by Medicare and the Medicare Benefits Schedule fee for the expense.

Benefits under this Insurance only apply for a maximum period of up to twelve (12) months from the date of injury.

Therefore students who are not treated by a medical practitioner who "**bulk-bills**" for their services, will be "out of pocket" for any shortfall that arises between the medical service charge and Medicare's "schedule fee", commonly referred to as the "Medicare gap".

2. How to Make a Claim

If the claimant is not eligible for a Medicare (International Students) the accounts that would be claimed through Medicare must be claim through their OSHC (Overseas Student Health Cover).

- The injury must be reported – in writing, as soon as practical, to the Insurance Office.

- Download the Personal Accident Claim Form from the UoM Insurance office web site.
<http://www.fpg.unimelb.edu.au/io/unimelb/forms.html>
- If not able to access the Insurance Office web site, contact MUS and request a Personal Accident Claim Form.

The Insured Person must complete and return the signed Claim Form (including PART D) to the Insurance Office, together with original supporting documentation.

3. Original Supporting Documentation Required

- A copy of the University of Melbourne's-or- MUS - Incident Report, if one has been issued.
- A letter on the University Club/ College / Department Letterhead, from the President or Secretary of the organization, confirming when the injury was received during an associated organization activity/
- Original** documentation of relevant **"Non-Medicare"** expenses incurred, which are not otherwise claimable from the Insured Person's own private health insurance arrangements.
- If claiming through the Insured Person's own private health insurance – the Remittance Advice must be submitted, as supporting documentation with the Claim Form to claim the "Gap" via the UoM.
- The benefit payable is less any recovery made from any private health insurance fund, with respect to the expense.
- Note: that due to Federal Government legislation, Medical Expenses which have a "Medicare Item No." - such as a Doctors Consultation, Surgeons fees or X-ray expenses - can only be claimed against "Medicare". Resultant "Out of Pocket Expenses" (commonly referred to as the "Medicare Gap"), due to section 67 of the National Health Act, 1953, as amended.) –is Not covered by this Policy.
- Benefits only apply for a maximum period of up to 12 months from the date of the injury.**

4. DEFINITION-NON MEDICARE EXPENSES

If during the period of Insurance and whilst the person is a Covered person providing services without payment, to an education, religious, charitable or benevolent organisation on behalf of the Policyholder, the Covered Person suffers from a Bodily Injury, ACE will pay the Non-Medicare Medical Expenses incurred up to a maximum of \$6,000 with a \$50 Excess.

Non-Medicare Medical Expenses

(a) Incurred with 12 months of sustaining a Bodily Injury; and

(b) Paid by a Covered Person or by the Policyholder for Doctor, physician, surgeon, nurse, physiotherapist, chiropractor, osteopath, and hospital and/or ambulance services for the following treatments:

- Medical
- Surgical
- X-ray
- Chiropractor
- Osteopathic
- Physiotherapy
- Hospital
- Nursing Treatment

But does not include dental treatment (see below), unless such treatment is necessarily required to teeth other than dentures and is caused by the Bodily Injury referred to in (a) above.

Conditions

1. The benefit payable is less any recovery made from any private health insurance fund with respect to the expense.
2. No benefit is payable in respect of the Medicare gap, being the difference between the payments made by Medicare and the Medicare Benefits Schedule fee for the expense.

Dental

The maximum benefit payable for any one Bodily injury resulting in loss of teeth or dental procedures is \$2,500.

The limit on each tooth is \$250.

For the purpose of Part E - a tooth means a sound and natural permanent tooth but does not include first or milk teeth, dentures, implants and dental fillings.

5.SUBMIT ALL DOCUMENTATION TO-

**Insurance Office
Level 5, the "Arts Centre"
757 Swanston Street
University of Melbourne Vic. 3010**

Claims and supporting documentation sent directly to ACE will not be accepted and will delay the claim process.