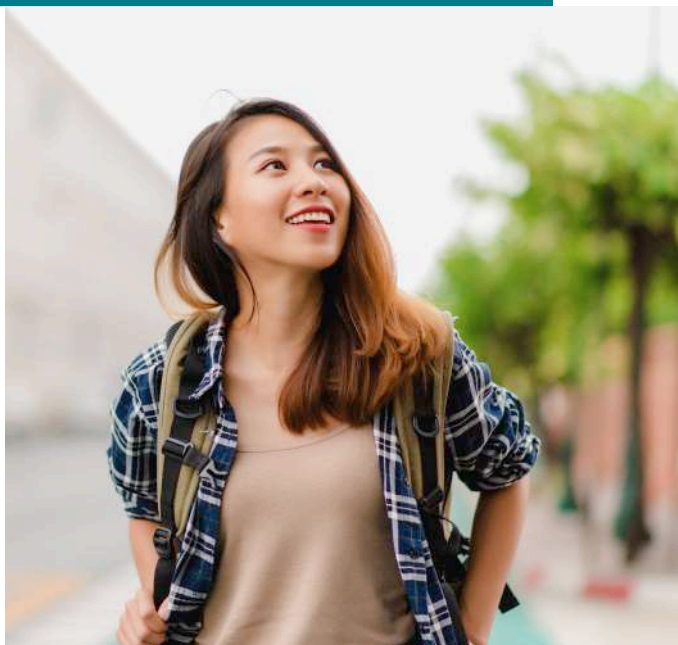


OVERSEAS STUDENT HEALTH COVER ESSENTIALS

Policy document and members guide



Allianz  Care

The one thing that matters the most is knowing your health care won't cost you a fortune while you study.



CONTENTS

02 ALLIANZ CARE AUSTRALIA WELCOMES YOU TO AUSTRALIA

- What is OSHC?
- Why is OSHC important?

03 SECTION ONE: OSHC ESSENTIALS POLICY

This section outlines information on:

- Eligibility and periods of cover
- Benefits payable
- Services not covered
- General exclusions
- Waiting period for pre-existing conditions

09 SECTION TWO: PRIVACY NOTICE

12 SECTION THREE: OTHER IMPORTANT MATTERS

This section outlines information on:

- Hospitalisation
- Transferring from another OSHC Fund
- Resolving your concerns
- Premium refunds
- You must help us recover any money we have paid
- You must provide additional information upon request
- Compensation Fund
- Fraud
- Words with special meanings

17 SECTION FOUR: MEMBERS GUIDE

This section outlines information on:

- 24 hour / 7 day emergency assistance
- The Australian healthcare system
- General Practitioners
- Accident and emergency treatment
- How do I find a doctor
- Your claiming options
- Helpful services

ALLIANZ CARE AUSTRALIA WELCOMES YOU TO AUSTRALIA

We understand that maintaining your health is an important part of making your stay in Australia as safe and enjoyable as possible.

Allianz Care Australia is here to assist and provide services and information that make it easy to understand and use the health cover which is available to you, whilst studying in Australia.

What is OSHC?

Overseas Student Health Cover (OSHC) is health insurance for international students which provides cover for the costs of:

- Out of hospital medical treatment
- In hospital medical treatment
- Prescription medicines
- Surgically implanted prostheses
- Emergency ambulance transport

The Department of Health regulates OSHC and OSHC providers.

WHY IS OSHC IMPORTANT?

Student Visa requirement

The Australian Government through the Department of Home Affairs requires all holders of a Student Visa to maintain OSHC during their entire stay in Australia.

Maintaining OSHC is a mandatory condition

According to Student Visa condition 8501, overseas students who do not maintain their OSHC are at risk of having their visa cancelled.

As it is a condition of the Student Visa that OSHC must be maintained while studying in Australia, Allianz Care Australia may provide the Department of Home Affairs with the name and contact details of the Member who has cancelled his or her Policy or whose premium has been refunded.

Medical treatment can be expensive

Overseas students are not eligible for Medicare (the public health insurance system for Australian Residents). Without access to Medicare, overseas students may have difficulty paying for medical treatment. In most cases, hospital treatment will cost more than \$1,500 per day.

SECTION ONE OSHC ESSENTIALS POLICY

WHO IS ELIGIBLE FOR OSHC?

Overseas students are eligible for OSHC. You are an overseas student if you are:

- (a) a person who is the holder of a Student Visa; or
- (b) a person who
 - i is an applicant for a Student Visa; and
 - ii is the holder of a Bridging Visa; and
 - iii was, immediately before being granted the Bridging Visa, the holder of a Student Visa.

Single or Family Cover

Your Certificate of Insurance will show which policy you have selected. Your policy may be either:

Single

Covering only the overseas student who is the primary Student Visa holder;

Dual family

Covering the overseas student, and either one adult spouse or recognised de facto partner or one or more children or step-children under the age of 18 years who are not married; or

Multi family

Covering the overseas student and more than one dependant, which can only include one adult spouse or recognised de facto partner and one or more dependant children.

BENEFITS COVERED UNDER YOUR POLICY

Medical and hospital benefits

In the event of medical treatment being required by you or any dependants covered under your policy and occurring during the period of cover, we will pay benefits for the following:

You may incur out of pocket costs for hospital expenses

Service	Benefit per service
Out of hospital medical services	
Medical services provided by most general practitioner services	We will cover the benefit amount as listed in the Medicare Benefit Schedule (MBS).
All other medical services such as pathology and radiology (including specialists)	The benefit amount may vary depending on the type of medical service.
In hospital medical services	
Medical services provided in hospital	100% of the Medicare Benefits Schedule Fee.
Public hospital – admitted patient in shared ward, hospital same day services, accommodation, accident and emergency and out patient medical, and post-operative services	The rate determined by State and Territory health authorities for services charged to a patient who is not an Australian resident.
Private hospital/registered day hospital facility	100% of the contracted charges for all insurable costs raised by one of our agreement hospitals with a minimum of shared ward accommodation.

Service	Benefit per service
Prescription medicines	
For prescription medicines prescribed by your doctor. Excludes: medications, drugs or other treatments not prescribed by a doctor or not listed on the Pharmaceutical Benefits Scheme (PBS).	<p>Prescription medicines benefit for expenses exceeding the equivalent of the current Pharmaceutical Benefits Scheme (PBS) patient contribution for general beneficiaries up to a:</p> <ul style="list-style-type: none"> - maximum benefit of \$50 per prescribed item - maximum amount per calendar year for Single cover of \$300 - maximum amount per calendar year for Family cover of \$600 <p>Each individual in a family has a limit equivalent for a single person as long as the family maximum benefit has not been used.</p>
Surgically implanted prostheses	
Surgically implanted prostheses and other items included on the Federal Government's prostheses list	100% of the cost as listed on the Australian Prostheses list.
Ambulance services	
When medically necessary for admission to hospital or for emergency treatment	100% of the charge for transport by an ambulance provided by or under an arrangement with an approved ambulance service when medically necessary for admission to hospital or for emergency treatment.

HOW LONG DO I HAVE TO BE COVERED?

The Australian Government requires that you have continuous OSHC for the entire length of your stay in Australia.

You can purchase OSHC for the proposed length of your Student Visa (as provided by you to us).

Periods of cover:

- 1 Your OSHC Policy is only valid whilst you hold a current Student Visa and have paid the full premium required.
- 2 You are insured for the period of cover shown on your Certificate of Insurance, starting on the commencement date shown and ending on the expiry date shown.
- 3 Your cover ceases on the date of your departure from Australia, the date you cease to hold a Student Visa, or on the expiry date shown on your Certificate of Insurance, whichever occurs first. However if you leave Australia on a holiday but return prior to the expiry date shown on your Certificate of Insurance and you still hold a current Student Visa when you return, your cover will recommence on your return to Australia and continues for the remaining period of your cover.
- 4 The minimum period for which you must have OSHC cover is the duration of your Student Visa, unless a medical condition verified by a doctor and acquired during the term of your Student Visa has resulted in you being unfit to travel home. However you will be required to provide to the Department of Home Affairs evidence of continuous coverage by OSHC for the proposed duration of your Student Visa as a condition of being granted a Student Visa for that proposed duration.
- 5 It is a Student Visa requirement that OSHC must be continuous for the term of your Student Visa. If you allow your OSHC to lapse whilst on a Student Visa, and you wish to renew your OSHC during the duration of your Student Visa, you must pay the premiums for the lapsed period.
- 6 No benefits are payable for claims incurred by you during the lapsed period of your OSHC.
- 7 Regardless of the general exclusions listed in this policy, no additional waiting periods will apply to claims you make if you have allowed your OSHC to lapse whilst on a Student Visa and have since renewed your OSHC during the duration of your Student Visa.

Services which are not covered under your policy:

- (a) any costs or services associated with dental treatment, physiotherapists, osteopaths, chiropractors, naturopaths or any other ancillary services, unless the services provided meet the requirements of the Medicare Benefits Schedule

- (b) medications, drugs or other treatments not prescribed by a doctor and not included in the PBS
- (c) optical charges
- (d) the co-payment payable by you under Australian law or as a result of the provider charging in excess of the Medicare Benefits Schedule Fee
- (e) service fees charged by a doctor or hospital which are not included in the benefits covered under your policy.

GENERAL EXCLUSIONS

Benefits are not payable for:

- (a) for services and treatment rendered as part of an assisted reproductive program, including but not limited to in-vitro fertilisation;
- (b) for treatment rendered outside of Australia, whether or not in connection with a course of study and including treatment necessary en route to or from Australia;
- (c) for treatment arranged in advance of the dependant's or overseas student's arrival in Australia;
- (d) for treatment rendered to a dependant or overseas student in the first twelve months after arrival in Australia where that treatment is for a pre-existing condition (other than a pre-existing condition of a psychiatric nature). This exclusion does not apply where a medical practitioner certifies, and we agree, that the dependant or overseas student required emergency treatment in Australia. We will not unreasonably withhold our agreement;
- (e) where an application was made for a Student Visa by an onshore applicant, who previously did not hold a Student Visa, treatment rendered to a dependant or overseas student in the first twelve months after purchase of OSHC where that treatment is for a pre-existing condition (other than a pre-existing condition of a psychiatric nature). This exclusion does not apply where a medical practitioner certifies, and we agree, that the dependant or overseas student required emergency treatment in Australia. We will not unreasonably withhold our agreement;
- (f) for treatment of secondary conditions or disabilities directly arising from the conditions or disabilities to which subclause (d) and (e) applies will be treated in accordance with the provisions of subclause (d) and (e) respectively;
- (g) treatment for a pregnancy related condition for a dependant or an overseas student where total duration of the overseas student's visa and any immediately preceding visa is less than three months. If an overseas student on an initial visa of less than three months duration obtains a new Student Visa to increase

their stay to three months or more then this exclusion ceases from the date of issue of the second visa;

- (h) for transportation of a dependant or overseas student into or out of Australia in any circumstance;
- (i) for services and treatment which are covered by compensation or damages, entitlements or payments of any kind; and
- (j) for elective cosmetic surgery.

For the purposes of these exclusions, the date of an overseas student or dependant arriving in Australia, and whether or not a condition is a pre-existing condition, will be determined in accordance with the section 'Waiting period for pre-existing conditions' below.

WAITING PERIOD FOR PRE-EXISTING CONDITIONS

There is a waiting period for pre-existing conditions

You cannot claim for costs arising during the waiting period if such costs arise from a pre-existing condition (other than a pre-existing condition of a psychiatric nature).

The waiting period is calculated as 12 months commencing from:

- the date you or your dependant (as the case may be) arrived in Australia; or
- the date your Student Visa was granted,

whichever is the later date.

A pre-existing condition is an ailment, illness or condition the signs or symptoms of which (in the opinion of a medical practitioner approved or appointed by us) existed in the period of six months ending on the later of:

- the date you or your dependant (as the case may be) arrived in Australia; or
- the date your Student Visa was granted.

In forming this opinion, the medical practitioner must have regard to any information in relation to the ailment, illness or condition provided to that medical practitioner by the medical practitioner who treated the ailment, illness or condition.

This includes an ailment, illness or condition that was present, but had not been diagnosed by a medical practitioner at the time of your arrival in Australia or the date your Student Visa was granted, whichever is the later date.

A pre-existing condition includes a secondary related condition or disability directly arising from a pre-existing condition.

SECTION TWO PRIVACY NOTICE

Your privacy:

Your privacy is important to us. To arrange, offer, and provide you with our products and services (or those we may offer or provide to you on behalf of our business partners) and for the purposes set out below, we, namely AWP Australia Pty Ltd ABN 52 097 227 177 trading as 'Allianz Care Australia', collect, store, use, process, and disclose your personal information including sensitive information such as medical information in accordance with the requirements of privacy laws.

For full details of our privacy policy, please visit our website at www.allianzpartners.com.au and click on the Privacy & Security link.

When we collect your personal information, we are responsible for ensuring it is processed and protected in accordance with applicable privacy laws such as the Privacy Act 1988 (C'th), and sometimes European Law such as the GDPR where our activities fall within its scope. Personal information we collect includes, for example, your name, address, date of birth, email address, your medical information, passport details, and bank account details. We also collect information through devices such as 'cookies' when you visit our website or use our mobile apps, in order to improve our website functionality and user experience.

Data collection:

We usually collect your personal information directly from you but sometimes from others depending upon the circumstances and the product involved. For example, to quote, arrange, or provide our health insurance products and services, we may collect your personal information from you, your agents, our agents, your broker, other insurers, universities and learning institutions, Government departments managing Immigration, health, and foreign affairs including for visa purposes, family members including your partner or spouse, travelling companions, as well as from doctors, hospitals, and other health service providers if you require medical assistance.

We may collect your personal information from our business partners and agents whom you may have approached or who distribute or help provide or arrange our products and services.

Purposes & uses:

We use your personal information to arrange, offer, and provide our products and services (or those we may offer or provide to you on behalf of our business partners) and to manage your and our rights and obligations in connection with any products and services you have inquired about or acquired. For instance, we use it to assess, process, and investigate health insurance claims, and to liaise with Government Departments such as immigration, health, and foreign affairs where it relates to your cover or your application for private health insurance cover.

We may also use it for product development, marketing (where permitted by law or with your consent), customer data analytics, research, IT and related systems maintenance and development, recovery against third parties, fraud investigations, to comply with requests from regulatory bodies and government departments, and for other purposes with your consent or where permitted by law. We do not sell your personal information to any other person or entity for marketing purposes.

Disclosures & overseas transfers:

Your personal information may be disclosed to your family members, co-insured on the same policy, your spouse or partner, as well as to third parties who assist us to carry out the activities set out in the 'Purposes & Uses' paragraph above, such as claims management providers, our agents and intermediaries, insurers, investigators, cost containment providers, medical and health service providers, universities and other education institutions, overseas data processing and 'cloud' storage providers, legal and other professional advisers, your agents and broker, your travel group leader if you travel in a group, your employer or sponsor, insurance reference bodies, and our related entities in the Allianz group of companies including Allianz Partners. Some of these third parties to whom your personal information may be disclosed and transferred, will be located in other countries including in Europe, the UK and Ireland, Asia, Canada, or the USA. We also, where necessary, disclose your personal information to Government Departments that manage immigration, health, and foreign affairs, as well as to regulatory bodies including those involved in the health insurance industry. We also disclose and transfer your personal information to our private health insurer that underwrites your policy, namely Peoplecare Health Limited, which is a registered private health insurer, ABN 95 087 648 753. When we disclose or transfer your personal information to third parties, we take steps binding those entities to comply with privacy law.

Marketing:

We may, where permitted by law or with your consent, contact you by telephone, normal mail, email, electronic messages such as

SMS, and via other means with promotional material and offers of products or services from us, our related companies, and business partners that we or they consider may be relevant and of interest to you. Where we contact you as a result of obtaining your consent, you can withdraw your consent at any time by calling us on 1800 023 767 or by contacting us – see below.

Other individuals/dependants:

Except where you have legal authority to provide personal information on behalf of another, such as in your capacity as a parent or legal guardian, when you provide personal information to us about another individual on your policy such as your spouse, partner, family member, dependant, or adult children, we rely on you and you warrant to us that you have first obtained that individual's consent, and have made them aware of the matters set out in this Privacy Notice.

Access to and correction of personal information:

You may also seek access to your personal information (or that of another on your policy where you are authorised to do so) and ask us to correct or update it, and to obtain details about our data processing activities in respect of your personal information. You may have further rights in respect of your personal information where the GDPR law applies, and depending upon the circumstances, you may request a restriction on processing, request it be deleted, and to receive it in a portable form, amongst other things.

Withdrawal of consent:

Where your personal information is used or processed with your specific consent as the sole basis for such use and processing (rather than on a contractual basis or legitimate interests of the company), you may withdraw your consent at any time. Just contact us as set out below.

Contact us:

If you wish to make a complaint about your data privacy, or have a request for access or correction, or any query about your personal information, please contact: The Privacy Officer, Allianz Care Australia, PO Box 162, Toowong, QLD 4066, or email DataPrivacyAU@allianz-assistance.com.au or phone us on +61 7 3305 7000.

You can also contact the Privacy Commissioner at the Office of The Australian Information Commissioner, GPO Box 5218, Sydney, NSW, 2001 if you have a complaint.

Without your agreement to the matters set out above, we may not be able to provide you with our products or services including the assessment and payment of any claims.

SECTION THREE

OTHER IMPORTANT MATTERS

This section explains your and our rights and responsibilities under this policy.

1 Hospitalisation

If you or a person covered under your policy is hospitalised, you or the hospital must advise us as soon as possible.

2 Transferring from another OSHC Fund

If you transfer to Allianz Care Australia OSHC from another OSHC Fund and can provide documentary proof of the period you had cover with the other Fund, we will take this period of cover into account when assessing the waiting period for any pre-existing condition. If you are transferring to Allianz Care Australia OSHC, we require that you obtain a clearance certificate from your current OSHC Fund.

To arrange your transfer visit us at:

www.allianzcare.com.au/oshc

or call 13 OSHC (13 6742)

or mail us at oshc@allianzcare.com.au.

3 Resolving your concerns

Any enquiry or concerns relating to this policy should be referred to:

Allianz Care Australia
Overseas Student Health Cover
Locked Bag 3001
TOOWONG QLD 4066
Telephone 13 OSHC (13 6742)

Commonwealth Ombudsman

The Commonwealth Ombudsman has responsibility to assist with enquiries and complaints about any aspect of private health insurance. The Ombudsman is independent of private health funds, private and public hospitals and the Government. Information may be obtained or complaints lodged about health insurance by telephoning the Ombudsman's office toll free on 1300 362 072 or at

www.ombudsman.gov.au.

Email phio.info@ombudsman.gov.au

4 Premium refunds

You can apply in writing for a pro-rata refund of premium for the unexpired portion of your policy if:

- (a) you paid your premium and did not come to Australia
- (b) you paid your premium on the basis of an extended stay but the extension of authorised stay was not granted by the Department of Home Affairs
- (c) you are obliged to cease studies and leave Australia before the end of a period of approved stay for reasons beyond your control
- (d) you have been granted permanent residence in Australia, or an Australian visa (other than a Student visa)
- (e) you were not resident in Australia for a continuous period of 3 months or more but whilst holding a valid Student Visa
- (f) you can provide proof of OSHC provided by another organisation which includes the period covered by the organisation
- (g) you have paid for an incorrect OSHC policy that was not required
- (h) you have paid the incorrect amount for a policy
- (i) your dependant no longer requires coverage under your policy
- (j) you and your dependants are leaving Australia following completion of your studies before your Student Visa is due to expire.

Please note:

- Refunds are calculated on a monthly pro-rata basis, with a minimum refund of one month.
- Any amount that we retain on these grounds is treated as a fee for processing your refund.
- There is no minimum cover period payable if cover is cancelled prior to arrival in Australia.
- As it is a condition of the Student Visa that OSHC must be maintained while studying in Australia, Allianz Care Australia may provide the Department of Home Affairs with the name and contact details of the Member who has cancelled his or her Policy or whose premium has been refunded.

5 You must help us recover any money we have paid

If a claim made by you and paid by us under this policy is subject to recovery action by us against a third person you must do the following:

- Assign your rights in relation to the recovery of any amount we have paid under this policy.
- Provide us with reasonable assistance to recover payments made by us.
- Reimburse us for any amounts paid to you as part of a settlement for claims paid by us.

6 You must provide additional information upon request

You must provide all information and details that we may reasonably require in order to process any medical and hospital claims.

7 Compensation fund

Benefits are not payable if your claim is for a loss which is recoverable by compensation under any workers compensation or transport accident laws or by any government sponsored Fund, Plan, or Medical Benefit Scheme, or any other similar type legislation required to be effected by or under a law.

8 Fraud

Insurance fraud places additional costs on honest policy holders. Fraudulent claims force insurance premiums to rise. We encourage the community to assist in the prevention of insurance fraud. You can help by reporting insurance fraud. All information will be treated as confidential. Report insurance fraud by calling 1800 453 937.

WORDS WITH SPECIAL MEANINGS

Some words in this policy have special meanings and are defined below.

benefit means an amount of money we will pay to you or on your behalf for approved expenses incurred by you in accordance with your policy.

Bridging Visa has the meaning given by subsection 5 (1) of the Migration Act 1958.

co-payment means the amount you must contribute towards a claim. It is the difference between the amount payable under the Medicare Benefits Schedule and the amount actually charged for the medical service.

dependant means a person who is:

- (a) a spouse or de facto partner of an overseas student; or
- (b) a child or step-child of an overseas student who is unmarried and has not turned 18.

doctor means a person qualified and registered to practice medicine or surgery in Australia.

emergency treatment means the treatment of any of the following conditions:

- (a) risk of serious morbidity or mortality and requiring urgent assessment and resuscitation; or
- (b) suspected acute organ or system failure; or
- (c) an illness or injury where the viability of function of a body part or organ is acutely threatened; or

- (d) a drug overdose, toxic substance or toxin effect; or
- (e) psychiatric disturbance whereby the health of the patient or other people is at immediate risk; or
- (f) severe pain where the viability or function of a body part or organ is suspected to be acutely threatened; or
- (g) acute haemorrhaging and requiring urgent assessment and treatment; or
- (h) a condition that requires immediate admission to avoid imminent morbidity or mortality and where a transfer to another facility is impractical.

hospital means an established hospital registered under Australian legislation that provides in-patient medical care.

hospital same day services means minor medical, surgical or diagnostic treatment provided in a registered hospital or medical centre, which does not require you to be confined in a hospital overnight but must be admitted as a day patient.

injury or injured means bodily injury.

limit means the maximum amount of payment by us. A limit applies per person as long as the maximum benefit has not been used if you have a family policy (this includes both dual family or multi-family policies). Unless otherwise stated your limit relates to the maximum amount payable under a standard 12 month policy and is pro rata according to the length of cover of your policy.

medical practitioner has the meaning given to it in the Health Insurance Act 1973.

overseas student has the same meaning as in Rule 18 of the Health Insurance Business Rules, that is:

- (a) a person who is the holder of a Student Visa; or
- (b) a person who:
 - i is an applicant for a Student Visa; and
 - ii is the holder of a Bridging Visa; and
 - iii was, immediately before being granted the Bridging Visa, the holder of a Student Visa.

PBS patient contribution means the co-payment you are required to pay, by law, towards the cost of a prescription before we start to calculate your benefit. The co-payment you have to pay is the same as an Australian who does not receive any concessional payments.

pharmaceutical Benefit Scheme or PBS means the Commonwealth Scheme for the payment of pharmaceutical benefits detailed in Part VII of the National Health Act.

premium means the premium payable for your OSHC policy, including all taxes and charges.

prescription medicines means those medicines that require a prescription completed by a doctor or other authorised practitioner in order to be dispensed by a registered pharmacist. Benefits are only payable on prescription medicines listed within the Pharmaceutical Benefits Scheme.

schedule fee means the amount as determined from time to time by the Australian Government and listed in the Medicare Benefits Schedule as the standard fee for a certain treatment or service.

Student Visa has the meaning given by subsection 5(1) of the Migration Act 1958 and includes a Bridging Visa.

we, us and **our** means Peoplecare Health Limited, a private health insurer under the Private Health Insurance Act 2007 (Cth) and AWP Australia Pty Ltd (trading as Allianz Care Australia) as the manager of this Overseas Student Health Cover product.

you or **your** means the person or persons named in the Certificate of Insurance under the heading 'Insured Persons'.

SECTION FOUR

MEMBER'S GUIDE

OSHC 24 HOUR HELPLINE - 1800 814 781

In the event of a medical or personal situation, we will assist you with:

- (a) 24 hour medical advice and assistance
- (b) 24 hour referrals to a doctor for medical treatment
- (c) 24 hour telephone access to a solicitor for legal advice
- (d) 24 hour access to an interpreting service
- (e) assistance to replace travel documents or passports
- (f) any messages which need to be passed to your family or friends in the event of an emergency.

In a medical emergency call triple zero (000).

AWP Australia Pty Ltd trading as Allianz Care Australia has been appointed by the underwriter to administer all assistance services. Please note that the provision of assistance services to you is not deemed to be acceptance of cover in circumstances where no cover is otherwise available to you under this policy.

THE AUSTRALIAN HEALTHCARE SYSTEM

It is very important that you have a good understanding of the Australian healthcare system. If you understand the healthcare system in Australia, you will be able to access the best and most effective treatment for you.

GENERAL PRACTITIONERS

If you are not in a medical emergency situation, the first point of contact is a general practitioner (GP), medical practitioner or local health/medical centre. You can access many services at your local health centre. Some of the services available are:

- General medicine and simple diagnostic screenings.
- Assessment and treatment of health problems and injuries.
- First aid services as needed.
- Women's and men's health.
- Referrals to specialist services.

In most cases, it is necessary for you to make an appointment to see your doctor.

ACCIDENT AND EMERGENCY TREATMENT

Many hospitals have a 24 hour Accident and Emergency department. Accident and Emergency departments should only be accessed in the case of emergency situations. When you visit an accident and emergency department, a nurse will assess you and if your illness or injury is not deemed as an emergency, you may need to wait a long time to see a doctor.

Hospital treatment

If you have been admitted for emergency treatment, contact Allianz Care Australia immediately on 1800 814 781. If you have been referred to hospital for a non emergency admission, contact the claim department on 1800 651 349 prior to admission. You will need to provide Allianz Care Australia with the details of your treatment and hospital stay. We will then be able to confirm your cover and assist you with making arrangements for payment to the hospital.

Public admission

Generally, OSHC covers the total cost of your stay and treatment as an in-patient in a shared ward of a public hospital. As a patient in a public hospital, your doctors will be nominated by the hospital. After your hospital discharge your care will be carried out in either the outpatient clinic, by one of the hospital's specialists in his/her private rooms or you will be referred to your local general practitioner.

Private admission

You can choose to be treated in a private hospital. Through our relationship with Peoplecare Health Limited we have arrangements in place with most private hospitals in Australia. These agreement hospitals ensure that an agreed schedule of fees (including in-patient accommodation, theatre and special unit accommodation fees as appropriate) is charged by the hospital and paid by Allianz Care Australia on a member's behalf. You may incur out of pocket costs for private hospital expenses. We also have arrangements with private specialists in order to minimise your out of pocket costs for medical services.

There are only a few private hospitals that are not part of these agreement hospitals. In these cases, we may not cover the full cost of your hospitalisation however, if you call us for a chat before you go into hospital we'll be able to tell you how much it will cost you. Members who choose a non-agreement hospital may incur out of pocket expenses for hospital related services.

FIND A DOCTOR

Direct billing services

In order to minimise your medical expenses, you can attend a health service or doctor that direct bills Allianz Care Australia. You can find your closest direct billing service on our website at www.allianzcare.com.au/oshc. You simply have to show your valid Allianz Care Australia OSHC membership card, and the bill for the covered portion of your service will be sent directly to Allianz Care Australia.

Other medical providers

You can attend any other medical practice or doctor in Australia. In most cases, you will be required to pay the bill, and submit a claim to Allianz Care Australia in order to get your benefit reimbursed. Some medical practices or doctors may charge more than the benefit payable, in which case you will be required to pay a co-payment that is not covered by your policy.

YOUR CLAIMING OPTIONS

For paid and unpaid accounts

Online claims	
Step 1	Go to the website : www.allianzcare.com.au/oshc
Step 2	Click on 'Students'
Step 3	Enter your policy number, family name and date of birth to login
Step 4	Confirm your details
Step 5	Select 'File a Claim' from the menu and follow the prompts
Step 6	Upon successful submission of an online claim, a unique claim number will be provided. Write this claim number at the top of each of your tax invoices/receipts
Step 7	Post the original tax invoices/receipts directly to Allianz Care Australia

It is important that you keep a copy of all your invoices and receipts.

Postal claims

Step 1	Obtain a claim form from your educational institution, an Allianz Care Australia OSHC member service point or download and print a form off from our website
Step 2	Complete the claim form in full. Please write clearly and sign the form ensuring you have clearly written your OSHC policy number on the form
Step 3	Attach your receipts to the claim form
Step 4	Post the claim form, original tax invoices and receipts directly to Allianz Care Australia

It is important that you keep a copy of all your invoices and receipts.

CLAIMS REIMBURSEMENT

Paid accounts

If you have paid your medical or hospital bill, your benefit will be reimbursed in Australian dollars by:

- **Direct debit** - into your nominated Australian bank account; or
- **Bank cheque** - sent to your postal address as nominated on your claim form - please ensure your postal address is correct and up to date.

Unpaid accounts

If you have not paid your medical or hospital bill, the benefit will be paid to the nominated health care provider (eg. doctor or hospital).

You are responsible for any 'co-payment' payable to the provider. In some instances our claims officers will contact you to request more information. If you have further questions about claims, visit the 'Claiming made easy' fact sheet on our website listed below.

We will endeavour to process your claim within 10 working days of receiving a completed claim form and all original documents. If we need additional information, a written request will be sent to you within 10 working days.

HELPFUL SERVICES

Online services and information

Simple and easy to use services and important information can be found at our website www.allianzcare.com.au/oshc.

Members services

If you need assistance with any matter, contact our friendly and helpful member service officers on **13 OSHC** (13 6742), who will be able to assist you.

Allianz Care Australia Overseas Student Health Cover - Essentials

Online services and information

www.allianzcare.com.au/oshc

Members services and general enquiries

13 OSHC (13 6742)

Claims

1800 651 349

OSHC 24 hour helpline

Medical assistance, legal and interpreting services

1800 814 781

In a medical emergency call triple zero (000)

This insurance is arranged and managed by

AWP Australia Pty Ltd

ABN 52 097 227 177

Trading as Allianz Care Australia

Level 16, 310 Ann Street, Brisbane, Queensland 4000

Locked Bag 3001, Toowong QLD 4066

Australia

Phone: in Australia 13 OSHC (13 67 42)

From overseas: +61 7 3305 7000

Fax: +61 7 3305 7009

oshc@allianzcare.com.au

www.allianzcare.com.au/oshc

Allianz Care Australia Overseas Student Health Cover policies are authorised under a Deed entered into between Peoplecare Health Limited and the Australian Government through the Department of Health. Allianz Care Australia Overseas Student Health Cover is managed by AWP Australia Pty Ltd ABN 52 097 227 177 trading as Allianz Care Australia. Peoplecare Health Limited ABN 95 087 648 753, a private health insurer under the Private Health Insurance Act 2007 (Cth), is the underwriter of Allianz Care Australia Overseas Student Health Cover policies.

