



YOUR HEALTH POLICY



Effective May 2016

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IMPORTANT

Goods and Services Tax (GST)

It is your responsibility to advise ahm OSHC if you have any entitlement to claim GST as an input tax credit. (See page 20 for more information)

For further information please contact ahm on **134 148**.

Congratulations on choosing to study in Australia. We hope that while you're here you enjoy good health.

If you get ill while studying, your Overseas Student Health Cover with ahm OSHC will help you with your medical bills while in Australia. Overseas Student Health Cover is only available to holders of a student visa, and their partner or dependants, if authorised to enter and remain in Australia with the overseas student.

If your student visa status changes, you will need to change to a different health insurance cover, so you should contact us immediately on **134 148**.

About your Overseas Student Health Cover (OSHC)

Your Overseas Student Health Cover provides you with benefits towards included services in hospital and out of hospital. It also helps cover you for emergency ambulance services, prescription medicines and hospital accommodation at most private and all public hospitals across Australia.

This policy document has been designed to help you understand your ahm OSHC benefit entitlements and ahm OSHC terms and conditions. It also provides you with a step-by-step guide that explains what you need to do if you have to go to hospital.

Important

The terms and conditions in this policy document may vary from time to time. It is your responsibility to keep up-to-date with the terms and conditions of your cover.

To download the latest version of this policy booklet go to **ahmoshc.com**

Please read this document carefully and keep an up-to-date copy in a safe place for future reference.

Remember, if you need to go to hospital, call us first if you can.



HERE'S A SNAPSHOT OF THE GREAT BENEFITS YOU GET WITH ahm OSHC

- ✓ Help with the costs of medical treatment
- ✓ 24 hour emergency service helpline **1800 006 745** for:
 - Emergency medical assistance
 - Stress and trauma counselling
 - Interpreter service
- ✓ Online claiming services, any time of the day or night
- ✓ Informative website **ahmoshc.com**
- ✓ Your choice to take up additional cover to include popular services like dental, optical and physiotherapy (see page 19 for more information)
- ✓ Health information sheets.

Why you need health cover in Australia

- The Department of Immigration and Border Protection (DIBP) requires most visitors with a student visa to have Overseas Student Health Cover for the length of their Visa
- Australia's national health care program, Medicare, generally doesn't cover you
- ahm OSHC pays towards the cost of medical bills. For example, the cost of treatment (excluding prescription medicines) in a public hospital could be as high as \$2,500 a day but ahm OSHC pays it for you.

How long you need to be covered

If you need health cover as a condition of your student visa, you must be covered for the full length of your visa to its end date. When applying for your visa, you will be asked to provide evidence of your cover.

When does your cover start?

- If you pay your premium before you arrive in Australia: your cover starts from the date of your arrival. If you arrive on a date other than your expected date of arrival, please call us on **134 148** so that our records can be changed to reflect the appropriate commencement date
- If you pay your premium after you arrive in Australia: your cover starts on payment of your premium, unless you have nominated a later date to be your commencement date, or on the date you transfer from your current health fund
- Please note that benefits cannot be paid until ahm OSHC has received your premium. If you pay your premium through your educational institution or agent, there may be a short delay before ahm OSHC receives it.

What happens if you don't renew your Overseas Student Health Cover?

- ahm OSHC is required to provide your details to the Department of Immigration and Border Protection (DIBP) if you cancel or don't renew your cover
- Holding Overseas Student Health Cover for the whole time you are in Australia is a condition of your visa, so your visa status may be reviewed by DIBP
- If you don't have Overseas Student Health Cover and you have an accident or need medical attention, you will have to pay the entire cost of the treatment yourself
- If you allow your cover to lapse for any reason, when you renew your Overseas Student Health Cover you will have to back-pay for any period that you were not covered by Overseas Student Health Cover to your new visa end date.



Visa and passports

ahm OSHC may ask you to provide a copy of the passport and/or visa for any person covered by ahm OSHC to assess eligibility to make a claim before paying benefits. You consent to ahm OSHC verifying your visa details with DIBP.

OSHC Exceptions

- Norwegian and Swedish students who are covered by the health insurance arrangements provided by their Governments do not need to take out OSHC. Any student not eligible for cover provided by their Government must take out an OSHC policy
- Belgian students studying in Australia are covered under the Reciprocal Health Care Agreement with Australia and do not need to take out OSHC. However, Belgian students may wish to take out OSHC for a more comprehensive level of cover.

What you need to know

Paying for your cover

You must provide proof of purchase of your Overseas Student Health Cover in your application for your visa or in your application for an extension of your visa.

If you applied for a visa before 1 July 2010, when you renew your cover, you will need to pay for cover to the end date of your visa.

Refunds

ahm OSHC can only refund all of your premium payment if one of the following circumstances occur:

- You did not take up your studies in Australia
- You paid your premium for an extended stay but your student visa was not extended.

ahm OSHC can only refund the unused portion of your premium if one of the following circumstances occur:

- You are obliged to cease studies in Australia and return home
- Your student visa has been cancelled or your visa status changes
- You have been granted permanent residency or an Australian visa (other than a student visa)
- You were not resident in Australia for a continuous period of at least 3 months while you held a valid student visa
- You decide to leave Australia when your studies are finished but before your student visa expires.

You will need to provide us with documentary proof of these circumstances should you require a refund. A refund administration fee may be charged and deducted from your refund.

If you transfer to another OSHC provider, you will need to provide us with a certificate of your insurance showing evidence of paid cover for the full visa term before we can refund any unused portion of your premium.

ahm OSHC is required to advise DIBP should you cancel your policy with ahm OSHC.

Remember to keep your cover up to date. It is your responsibility under your visa conditions to maintain Overseas Student Health Cover for the whole time you are in Australia on a student visa and to advise ahm OSHC if your circumstances change.



Refund Payments

If you cancel your ahm OSHC cover while you are in Australia and:

- You are granted permanent residency, you are then no longer eligible for ahm OSHC. If you transfer to a new ahm Private Health Insurance cover within two months from the date you were granted permanent residency, we will transfer any residual premiums onto your new ahm Private Health Insurance cover
- Your refund request is approved, ahm OSHC will pay the refund amount into your Australian bank account. ahm OSHC will not make payments to foreign bank accounts or issue cheques
- You are intending to leave Australia and request a refund, it is important that you do not close your Australian bank account until after your refund request has been paid by ahm OSHC.

Your membership card

Use your membership card when you need to visit a doctor, arrange admission to hospital, make a claim or make any other type of enquiry.

You are responsible for any claims made using your card. Keep your card safe and advise us immediately if it is lost, stolen or if someone not covered by your OSHC is using your card. For your security, photo ID must accompany your membership card.

Your membership card should have been sent to you.

If you have not yet received your card please call us on **134 148**.

Policy renewal

If you applied for your visa before 1 July 2010 and you don't have cover for the full length of your visa, renewing your policy is easy. You can do this via **ahmoshc.com.au**

If you apply to extend your visa, you need to contact us and pay for the additional time you'll be studying so that your ahm OSHC policy can accompany your visa extension application.

Visa and passports

ahm OSHC may ask you to provide a copy of the passport and/or visa for any person covered by ahm OSHC to assess eligibility to make a claim before paying benefits, by verifying your visa details with DIBP.

Date paid to or current financial date

This is the date that your ahm OSHC policy is paid to. After this date, you won't be insured and we won't pay benefits.



Single policy

This policy covers the student only.

Family policy

Your spouse or de facto partner and your dependant children under 18 years of age can be covered under an ahm OSHC family policy if they:

- ✓ are authorised to enter Australia under your (the student's) visa
- ✓ live with you while you're studying.

We don't cover members of your family such as parents, grandparents, brothers, sisters, uncles or aunts.

Having a baby?

If you are already on an existing ahm OSHC single policy, your new-born baby will be able to be added with effect from their date of birth without having to serve any waiting periods already served by you (the student), provided that:

- the application is received by ahm OSHC **within two (2) months** of the date of birth, and
- the membership is changed to a family membership and the family premium is paid, from the date of birth.

If you are adding a new-born to an existing family policy, you simply need to notify us within two (2) months of the new-born's date of birth and they will not need to serve any waiting periods already served by the student.

Any waiting periods not served in full by the student, will continue to apply to your new-born.



How we communicate with you

While you are with ahm OSHC, we may need to send you information about your policy. This can include an important update to policy information, a reminder that your policy needs renewing or you may have lost your card and need a new one. That means it's very important that your contact details are up to date.

Updating your contact details

You must let us know if your personal details change. Please contact us as soon as possible if:

- you change your contact details such as your address, telephone number or email address
- your spouse/partner and/or dependants are coming to Australia to live with you
- your spouse/partner and/or dependants are no longer living with you
- you or your spouse/partner is pregnant
- you are applying for another visa.

To update your details, you can call us on **134 148** and we'll update your details for you or you can update your details via ahmoshc.com.au



WHAT YOU'RE COVERED FOR

Please read the following information carefully and contact us if you have any questions.

If you need treatment in a hospital, please call us on 134 148 to confirm your benefits and entitlements.

Doctors' bills

For treatment in a Doctor's surgery or at home by a General Practitioner (GP) or anywhere outside a hospital

We pay

- 100% of the published MBS fee or the amount as determined by the Federal Government for standard GP consultations (please see page 16 for more information)
- 85% of the published MBS fee or the amount as determined by the Federal Government for other out of hospital services and you pay the difference.

For treatment in a hospital

We pay

- 100% of the MBS fee.

Important

- If you need to see a doctor, you can choose any doctor you wish
- You should always ask your doctor how much they're going to charge you
- If the doctor charges more than the MBS fee, you pay the difference.

Pathology & X-rays

For services such as blood tests and X-rays

We pay

- 100% of the published MBS fee or the amount as determined by the Federal Government for in hospital services
- 85% of the published MBS fee or the amount as determined by the Federal Government for out of hospital services and you pay the difference.



Hospitals

For treatment in partner private hospitals or day surgeries

We pay*

- the full cost of private or shared room accommodation, theatre fees and same day services
- up to the MBS fee for treatment by your doctor.

For treatment in all public hospitals

We pay*

- the full cost for shared accommodation, theatre fees and same day services
- up to the MBS fee for treatment by your doctor
- for accident and emergency facility fees
- for outpatient medical and post operative services. (See page 10 for what we pay on doctors' bills).

Important

Private or public? It's your choice.

- If you need to go to hospital, you can choose to have your treatment at either a private or public hospital
- Hospital bills are normally sent straight to us for payment. If there's a difference between the ahm OSHC benefit and the hospital charge, you'll need to pay this on admission
- If the private hospital you're treated in is not a partner hospital, you'll have to pay the difference between the ahm OSHC default benefit and the hospital's charge on admission (this could be quite a large amount)
- **Call us beforehand to make sure you're being treated in a partner private hospital.**

* Hospital charges for treatment in public and private hospitals do not include charges for prescription medicines. (See page 13 for what we pay on prescription medicines).

Emergency treatment

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

This will need to be verified by the treating medical practitioner.

Ambulance services

For emergency transport in an ambulance

We pay

- 100% of the cost.

Important

Emergency transportation means a sudden or unexpected need for hospitalisation where the only practical way of getting to a hospital is by ambulance. If you call an ambulance for services other than emergency hospital transportation, you'll have to pay the full cost.



Prescription medicines

For medicines and other prescription items prescribed by your doctor

- You pay a set amount (the current PBS amount) towards the cost and we pay the rest up to a maximum of \$50 per item (See page 17 for more information).

We pay

- The difference between the current PBS amount and the cost of the item, up to \$50 per item.

Maximum benefit:

- \$300 per calendar year for single members
- \$300 per person per calendar year up to a maximum of \$600 for a family policy.

Important

- Benefits are only payable on pharmacy items that are prescription only and prescribed by a medical practitioner and are essential to treat a particular illness, injury, or condition
- No benefits are payable on over the counter medicines, vitamins or herbal medicines
- You'll need to pay for the prescription medicine first and then claim it back from us
- As an overseas student, you may face significant out-of-pocket costs if you need treatment with high cost pharmaceuticals, particularly oncology (cancer) treatment.

Prostheses

- We'll cover the minimum benefit for surgically implanted prostheses which are listed on the Federal Government Prostheses List and associated with services that are included under your cover.

Important

If you choose a prosthesis that costs more than the benefit listed in the Federal Government Prosthesis List, you'll have to pay the difference between the minimum benefit and the prosthesis charge.

We will not pay a benefit for any surgically implanted prosthesis associated with an excluded service under your cover.



WHAT YOU'RE not COVERED FOR

- ✗ Services not covered by Medicare such as cosmetic surgery or laser eye treatment
- ✗ Treatment for pre-existing medical conditions within the waiting period (See waiting periods for pre-existing conditions on page 15)
- ✗ Any Pregnancy Related Services in the first 12 months
- ✗ Assisted reproductive services such as in-vitro fertilisation (IVF)
- ✗ Services/treatment covered under compensation and damages provisions of any kind, for example, motor vehicle accidents covered by third party insurance
- ✗ Fees charged by your doctor above the amount we pay
- ✗ Transportation of you or your dependants into or out of Australia in any circumstance
- ✗ Treatment received outside of Australia
- ✗ Treatment for any of your children who are over 18 years of age
- ✗ Treatment by dentists or other extras services such as glasses and physiotherapy unless this treatment is related to a hospital stay and is included in the hospital's contract. You can be covered for this if you buy extras cover (See page 19 for more information)
- ✗ Items provided to you on discharge from a hospital including medication and crutches
- ✗ Personal expenses in hospital including telephone calls, television hire, internet and newspapers
- ✗ Services or treatment for which a claim has been submitted more than two years after the date of service or treatment
- ✗ Treatment organised before you or your dependants arrived in Australia
- ✗ Services or treatment rendered while your premiums are in arrears
- ✗ The cost of prescription medicines in excess of the benefit limits on page 13
- ✗ The gap for surgically implanted prostheses on the Australian Government's Prostheses List
- ✗ Any services or items in a partner private hospital that are not covered by our agreement with the hospital
- ✗ The difference between the charges raised by a non partner hospital and the benefit payable by ahm OSHC
- ✗ Accident and emergency facility fees raised by private hospitals
- ✗ Surgically implanted Prostheses and other medical devices not included in the Australian Government's Prostheses List
- ✗ Treatment rendered by providers who are not recognised by ahm OSHC for the purpose of paying benefits.

Waiting periods



When you take out ahm OSHC you'll have to wait a set time before you can claim for services and benefits.

If you applied for your student visa before coming to Australia your waiting periods will start from the date of arrival in Australia on a student visa.

If you applied for your student visa whilst already living in Australia your waiting periods will start from your date of purchase.

If you've transferred from another Overseas Student Health Cover provider to ahm OSHC, we'll recognise the waiting periods you have already served with the other Overseas Student Health Cover provider.

Waiting period	Service
2 months	Pre-existing condition of a psychiatric nature
12 months	Pre-existing medical conditions and pregnancy related services including childbirth

See page 17 for a definition of pre-existing medical conditions.

Important terms you need to know

Accidents

If you require treatment for an accident, you'll be covered from the day your ahm OSHC commenced.

Benefit

This is the amount that we'll pay for services or treatments you receive that are covered by this policy.

Compensable claims

Services and/or treatment covered under compensation and damages provisions of any kind, for example, motor vehicle accidents covered by third party insurance.

Day only surgery

This is when you're admitted to a hospital or day surgery facility and discharged on the same day.

Default benefit

We'll pay the default benefit for accommodation as set by the Commonwealth Government.

Emergency treatment

See page 12.

General Practitioner (GP)

A General Practitioner is a doctor who is not a specialist or consultant.

In hospital treatment

Where you or a person on your policy is formally admitted to a hospital for the purpose of receiving treatment.

Institution

This refers to a school, high school, TAFE College, English Language Centre, University or any other education provider.

Medicare

Medicare is Australia's national health care program for all permanent residents of Australia. It provides treatment as a public patient in a public hospital, and subsidised medical treatment by practitioners such as doctors, specialists and participating optometrists. Medicare is generally not available to overseas students.

Medicare Benefits Schedule and MBS fee

The Medicare Benefits Schedule (MBS) is a list of fees for medical procedures and treatments provided by doctors including specialists and General Practitioners. These fees are known as MBS fees.

A doctor can choose to charge more than these fees.

Before being treated, make sure you ask your doctor how much your treatment will cost so you know what you might have to pay. If your doctor charges more than the MBS fee you'll have to pay the amount above the MBS fee.

Out of hospital services

Means where you or a person on your policy receives medical services without being admitted to a hospital. Out of hospital services can refer to GP and specialist consultations, some X-rays and pathology.

Partner private hospitals

ahm OSHC has agreements with many private hospitals and day surgeries throughout Australia. We'll cover you at these hospitals for the full cost of theatre and accommodation charges.

Pharmaceutical Benefits Scheme (PBS)

The PBS is the national pharmaceutical benefits scheme funded by the Commonwealth Government where patients pay only part of the cost of a subsidised drug. The rest of the cost is paid by the PBS.

Pre-existing medical conditions

An Overseas Student or a Dependant of the Overseas Student insured under an Overseas Student Health Insurance policy has a pre-existing condition if:

- a) the Overseas Student or the Dependant of the Overseas Student has an ailment, illness or condition; and
- b) in the opinion of a Medical Practitioner appointed by ahm OSHC, the signs or symptoms of that ailment, illness or condition existed at any time in the period of 6 months ending on the day on which the Overseas Student or the Dependant of the Overseas Student arrived in Australia. In forming this opinion, ahm OSHC's Medical Practitioner must have regard to any information in relation to the ailment, illness or condition that the Medical Practitioner who treated the ailments, illness or condition gives him or her.

You need to give us consent to do this or we will not be able to assess your claim.

Prescription medicines

ahm OSHC provides benefits for most medicines prescribed by a doctor up to the benefit limits on page 13. For each prescription item you buy or that is administered to you, you have to pay part of the cost. (See Pharmaceutical Benefits Scheme on page 16). We'll pay the rest up to a maximum of \$50 each prescription item. If your doctor has prescribed several medicines on the same prescription, each item will count as a separate claim.

Prostheses

This term refers to surgically implanted items such as stents (for coronary arteries), grommets, artificial hips and knees, or titanium plates and screws (used in reconstructions or bone breaks).

The Commonwealth Government publishes a Prostheses List which sets out the minimum benefits health funds must pay to members with hospital cover for these items. We do not pay benefits towards any prostheses or medical devices not on this list.

If you need a prosthesis, please discuss the choices available with your doctor prior to giving your doctor consent. This will allow you to make a fully informed decision about the cost of your treatment. If you choose a prosthesis that costs more than the minimum benefit, you'll have to pay the difference between the minimum benefit and the prosthesis charge.

Services for overseas students

Using the web

- Update your contact details
- Renew your cover
- Request a new membership card
- Access general health information.

Making a claim

You can claim for:

- hospital treatment
- visits to your doctor (GP)
- pharmacy items
- specialists
- X-rays
- pathology.

Online claims

You can only claim online for most doctors, pathology and specialist services you have already paid.

1. Log onto ahmoshc.com.au
2. We'll deposit your benefit into your nominated Australian bank account (normally 2 working days).

Postal claims

- Fill in a claim form, include receipts and mail it to (no postage stamp required):
ahm OSHC, Reply Paid 75885, Matraville NSW 2036.

We can either deposit the benefit in your nominated Australian bank account or send you a cheque.

All claims will be paid in Australian dollars and can only be paid into an Australian bank account.

NOTE: If you haven't paid the bill – fill in a claim form and mail us the bill. We'll send you a cheque that's payable to your service provider. This might be your doctor, hospital or ambulance service. When you receive the cheque, you must send it to the provider and include any additional amount that you may be required to pay.

Direct billing – no need to pay and claim

When you visit a medical centre or GP that has a direct billing arrangement with ahm OSHC, we'll pay them the amount equal to the MBS fee for the service provided to you. This means you don't have to pay for the standard GP consultation and claim later. If your GP charges more than the MBS fee you will need to pay the difference directly to the GP or medical centre.

To find the nearest direct billing medical centre or GP near you, use ahm OSHC's online search function and select the state in which you live. You must show your ahm OSHC membership card at reception to use this service.

Go to ahmoshc.com.au and search for a participating medical centre near you.

NOTE: ahm OSHC only pays the amount equal to the MBS fee for standard GP consultations (see page 16 for more information – Medicare Benefits Schedule). If your doctor charges above the MBS fee you will have to pay the difference. Any amount above the MBS fee cannot be claimed.



EMERGENCY SERVICE HELPLINE

1800 006 745 24 hours, 7 days a week

Emergency medical assistance

- A registered nurse will direct you to the most appropriate level of care needed for your condition and if required, to a specialist practising physician.

Stress and trauma counselling

- You will be connected to a qualified counsellor for an initial discussion over the phone. The counsellor will help you develop strategies to move forward and may suggest an appointment with a qualified professional in person for further assistance.

Interpreter service

- If you need interpreter assistance, call **1800 006 745** and tell them your name and preferred language. This service is available 24 hours, 7 days a week and does not have to be for a medical service.

How to renew your cover

You can renew your OSHC online at ahmoshc.com.au

Adding extras cover

Your ahm OSHC only provides cover for hospital and medical treatment. It doesn't include things like visits to the dentist, eye checks, glasses or chiropractic. If you want cover for these services, you can buy one of our ahm extras covers. This cover is not a substitute for your visa requirement and can only be purchased in addition to your ahm OSHC policy. Waiting periods apply.

For more information or a brochure on extras, call **134 148**.

How to join ahm OSHC

Go to ahmoshc.com and fill in the online application form.

Switching your Overseas Student Health Cover policy

If you're with another health insurer, you can switch to us at any time. Just call us to find out how.

Goods and Services Tax (GST)

Overseas Student Health Cover is subject to GST which is included in the premium you pay. If you purchase ahm OSHC it is assumed you have no entitlement to claim any part of the GST as an input tax credit. If at any time you are eligible and intend to claim back part or all of the GST, you must notify us in writing.

Feedback

At ahm OSHC we value your comments on our products and services.

If you have any feedback for us or require further explanation on any matter affecting your membership, you can contact us by:

- calling us on **134 148** or **+61 3 9862 1095** (if calling from outside Australia)
- email **oshc@ahm.com.au**

Resolution of Complaints

If you have a complaint related to your policy, please let us know straight away so that we can work to resolve matters as soon as possible.

Where possible, we'll resolve your issue straight away. However, if we need to escalate your enquiry, it will be referred to the Member Resolutions Team for further investigation.

Member Resolutions Team

Our Member Resolutions Team will aim to find a solution for you by investigating your complaint and then letting you know the result. They will:

- investigate the issue
- keep you informed
- aim to resolve the issue within 10 working days.

To help us in this process, please provide as much information as possible about the nature of your complaint. Please include your name, and membership number (if applicable), on all correspondence.

What if I'm not satisfied?

If you're not satisfied with the steps taken by ahm OSHC to resolve your complaint or with the result of our investigation, you can request a review of your complaint by the Private Health Insurance Ombudsman.

Private Health Insurance Ombudsman

We will do our best to resolve the issue to your satisfaction. If you're unhappy with the result, you can contact the Private Health Insurance Ombudsman (PHIO) for free independent advice.

Phone: 1300 362 072

Email: phio.info@ombudsman.gov.au

Website: ombudsman.gov.au

ahm OSHC Privacy Statement

For the purpose of this Privacy Statement, We are Medibank Private Limited (**Medibank**) and Australian Health Management Group Pty Ltd (**ahm**), a subsidiary of Medibank and other Medibank subsidiaries (collectively Medibank Group Companies).

We collect and use your personal and sensitive Information to enable us, other Medibank Group Companies and our third party suppliers and partners to provide you with products and services, including insurance, health related services and partner offerings and to give you information on other products and services.

If we do not collect this information, we may not be able to provide you with these services.

We may collect your information from you, another person on your membership, a person authorised to provide us this information on your behalf, another Medibank Group company or a third party.

Where you give us personal information about others, you must ensure that you let them know what information you are giving us and that you have their consent to do so. You should also let them know about this Statement.

We may disclose your personal information to persons or organisations in Australia or overseas including other Medibank Group Companies, our service providers and professional advisers, health service providers, our suppliers and partners, government agencies, financial institutions, your educational institution and migration agent or broker. We may also disclose your information to other persons covered under your policy or your agents and advisers.

We may disclose your personal information overseas to other Medibank Group Companies or third parties who provide services to us including in India, the United States and New Zealand.

Where you provide us with an email address, we send most service-related communications to you by email, like premium and account notices.

From time to time, we or another Medibank Group Company may contact you to market products and services and to keep you informed of special offers from Medibank Group Companies and third parties, including by direct mail, SMS and MMS messages, by phone and email.

You can choose how we communicate with you and manage your consents to receiving promotions and offers by calling us on **134 148** or **+61 3 9862 1095** Monday to Friday: 8:30am - 6:30pm or email us at **oshc@ahm.com.au**

Our ahm OSHC Privacy Policy contains more information about our privacy practices, including how you may request access to, or correction of, personal information we hold about you, how you can lodge a privacy complaint and how we manage such complaints. You can always obtain the latest version of our ahm OSHC Privacy Policy by contacting us or by visiting our website at **ahmoshc.com.au**

You can also write to our Privacy Officer: Privacy Officer, Australian Health Management Group Pty Ltd, Locked Bag 1006, Matraville NSW 2036 or email **privacy@ahm.com.au**



All Enquiries: **134 148**

Email: oshc@ahm.com.au

Web: ahmoshc.com.au



Emergency service helpline

1800 006 745

- Emergency medical assistance
- Stress and trauma counselling
- Interpreter service

Updated May 2016