

Medibank Comprehensive OSHC Membership Guide

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Your guide to membership

Welcome to membership of Medibank Comprehensive Overseas Student Health Cover (OSHC).

This guide will tell you about your cover and what you can and cannot claim for. It also includes a summary of the policies of Medibank as they apply to OSHC membership.

This Membership guide forms part of the terms and conditions of your Comprehensive OSHC with Medibank. All members of Comprehensive OSHC are subject to the terms and conditions and policies contained in this guide, as varied from time to time.

Please read the Membership guide carefully and contact Medibank if there is anything you do not understand or if you want more information about your cover.

Keep this guide in a safe place together with your other Medibank documents.

This guide applies to Medibank Comprehensive Overseas Student Health Cover only

You should read this guide in conjunction with the Cover summary that you would have received when you joined or changed your cover.

If you did not receive, or no longer have, your Cover summary please contact Medibank on 134 148 or visit medibankoshc.com.au for more information.

Glossary of definitions

The following definitions explain the meaning of some of the words and phrases used throughout this quide.

Benefit

An amount of money payable by Medibank to, or on behalf of, a member for an expense approved by Medibank.

Calendar year

A 12-month period commencing 1 January and ending 31 December.

Cosmetic treatment

A service that is not clinically necessary that can't be billed to Medicare. Under all Medibank covers, no benefits are payable toward procedures or hospital costs associated with cosmetic treatment or procedures not recognised by Medicare.

Department of Immigration and Border Protection (DIBP)

The Australian Government Department of Immigration and Border Protection is responsible for, among other things, immigration and entry, stay and departure arrangements for non-citizens.

Dependant

A person who is:

- a partner of an Overseas Student, or
- a child or a step-child of an Overseas Student who is not married (or in a de facto relationship) and has not turned 18.

Hospital treatment

This means:

- hospital accommodation and nursing care for the purpose of permitting professional attention, and
- the provision of a surgically implanted prosthesis on the Australian Government's Prostheses List

Inpatient

A person who has been formally admitted to a registered hospital for the purpose of obtaining professional attention. This includes same day admissions.

Medicare

Australia's national health care system which provides permanent Australian residents with access to treatment as public patients in public hospitals and subsidised treatment by doctors and other health care professionals.

Medicare Benefits Schedule (MBS)

A schedule that lists all the services for which Medicare pays benefits, and the rules that apply to the payment of those benefits. Each service has a fee (the MBS fee) that has been set by the Australian Government for the purpose of calculating the Medicare benefit payable for that service.

Members' Choice hospital

A private hospital:

- with which Medibank has an agreement to provide greater value to our members by way of capped fees or higher benefits for accommodation or treatment, and
- that is part of Medibank's Members' Choice network.

To find a Members' Choice hospital go to **medibank.com.au** and click on Find a Health Provider.

Non Members' Choice hospital

A private hospital that is not part of Medibank's Members' Choice network.

Outpatient

A patient who receives medical attention at a hospital outpatient department or accident and emergency department, but is not formally admitted to the hospital. An outpatient may be charged both hospital fees and doctors' or specialists' fees.

Partner

A person who lives with the Policy holder in a marital or de facto relationship and is a non-resident of Australia

Policy holder

A student in whose name an application for membership of Medibank Comprehensive OSHC has been accepted. This is usually the first-named person on the membership card. Unless approved by Medibank, a person aged under 16 is not eligible to be a Policy holder.

Pre-existing condition

Medibank may refuse benefits for any claim made in the first 12 months of membership where, in the opinion of a medical practitioner appointed by Medibank, signs or symptoms of an ailment, illness or condition related to that claim were in existence at any time during the six months before the commencement of that cover.

Prescription medicine

A medicine that may be legally obtained only where prescribed by a medical or dental practitioner to treat a particular medical condition.

Prescription medicine co-payment

The amount you are required to pay towards the cost of each prescription medicine before benefits are payable by Medibank. This amount is reviewed each year.

Professional attention

In relation to hospital treatment means:

- medical or surgical treatment by or under the supervision of a medical practitioner
- obstetric treatment by or under the supervision of a medical practitioner or a registered nurse with obstetric qualifications,
- dental treatment by or under the supervision of a dental practitioner, or
- podiatric treatment by or under the supervision of a podiatrist who has been accredited by the Minister of Health.

Same day admission

An admission to, and discharge from, a hospital or day hospital facility on the same day (ie. where the stay does not extend beyond midnight).

Surgically implanted prostheses

The Federal Government publishes a prostheses list that sets out the minimum benefits health funds must pay to members with hospital cover for these items.

If you are going to be admitted to hospital for a procedure in which a prosthesis is to be surgically implanted or applied, we recommend that, before admission, you ask your doctor to provide you with an estimate for the cost of the prosthesis they will be using for your procedure. Once you know how much the prosthesis will cost you should then provide your doctor with Informed Financial Consent and it is preferable that this is in writing. You can obtain an Informed Financial Consent form from your doctor. You will need to speak with us, your doctor and your hospital to confirm what your likely out-of-pocket expenses are going to be.

Benefits are not payable for any prosthesis associated with an excluded service under your cover.

Theatre fees

Costs of procedures performed in an operating room of a hospital or day surgery facility.

Visa Length Health Cover

OSHC for which the Policy holder makes one payment that covers the entire period of their student visa.

Waiting period

The period of time a member must wait after taking out cover before they can receive a benefit for services or items included on their cover. No benefits are payable for any items or services obtained while serving a waiting period.

Your membership

Types of membership available and who can be covered

It is a condition of most student visas to have private health cover for the duration of your visa. Medibank Comprehensive OSHC is designed for people who are the holders of a student visa or:

- is an applicant for a Student Visa; and
- is the holder of a Bridging Visa; and
- was, immediately before being granted the Bridging Visa, the holder of a Student Visa.

If at any stage your student visa status changes, OSHC will no longer be suitable for your needs. To discuss our broader range of health insurance products, please call **134 148** or visit a Medibank store.

If you are found to be ineligible for OSHC, Medibank may take steps including terminating your membership or transferring you to an alternative cover. Medibank may backdate this change and require you to pay any additional premiums and/or repay any higher benefits you received on your OSHC.

Comprehensive OSHC offers three types of membership:

- **single membership**, which covers you (the student) only
- **couple membership**, which covers you (the student) and your partner
- family membership, which covers you (the student) and your dependants (such as your partner, and any dependant children).

A dependant child is not eligible to remain on a Comprehensive OSHC family membership from the date of his/her eighteenth (18th) birthday.

Your Partner and/or dependants can be covered under a couple or family membership only if they:

- are authorised to enter Australian under your Student Visa; and
- live with you while you're studying.

Members with OSHC may not be members of any other Medibank hospital cover. They may, however, purchase an additional Medibank ancillary ('extras') cover for everyday health needs like optical and dental. Please contact us if you would like further information about our 'extras' cover options.

Please note that your parents/guardians and other family members (who are not your partner or dependant) cannot be covered under your Comprehensive OSHC. If they live with you in Australia while you are studying they'll need to arrange their own private health insurance.

Expatriate Australian students

If you are an expatriate Australian coming to Australia on a student visa to undertake formal studies, and you are not eligible for Medicare, you are required to take out OSHC for the full length of your student visa.

Norwegian and Swedish students

Most Norwegian and Swedish students studying in Australia are covered by health insurance arrangements provided by their Government, and are not eligible to join OSHC.

However, a Norwegian or Swedish student must take out OSHC if they are not eligible for cover under their own Government's insurance arrangements.

Belgian students

Belgian students studying in Australia are not required to take out OSHC under the terms of the Reciprocal Health Care Agreement that exists between the Belgian and Australian Governments. However, OSHC might still be beneficial for these students as it offers a more comprehensive level of 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 contact us so that our records can be changed to reflect the appropriate commencement date. You will need to bring your passport and membership card (if you already have one) with you to make this change
- 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 Medibank has received your premium. If you pay your premium through your educational institution or agent, there may be a short delay before Medibank receives it.

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**.

Medibank will not accept liability for any loss to you resulting from the misuse of a lost or stolen card. You can visit our website at medibankoshc.com.au to request a replacement card.

What you are covered for

Comprehensive OSHC will pay benefits towards:

- medical and hospital treatment
- ambulance services (please refer to page 12 for further information)
- · some outpatient services, and
- some prescription medicines that you receive while studying in Australia, as set out below

If you anticipate treatment for which you are expecting a benefit from Medibank, please contact us before commencing treatment or going to hospital to confirm what benefits will be paid.

Please also read 'What you are not covered for', which explains the payments you are required to make if, and when, the applicable charges are incurred.

Public hospital

Where you're an inpatient in a public hospital Medibank will pay:

- 100% of the hospital charges* where you are an inpatient in a shared room (but any additional accommodation charges where you request a private room are your own responsibility)
- benefits towards the cost of surgically implanted prostheses and other items on the Australian Government's Prostheses List

Private hospital

Where you are an inpatient in a Members' Choice hospital:

- 100% of the accommodation charges
- 100% of theatre fees
- benefits towards the cost of surgically implanted prostheses and other items on the Australian Government's Prostheses List
- 100% of any other costs provided for in our agreement with the hospital (such as some ancillary services directly related to the reason for your hospital admission)
- access to newspapers, free-to-air TV and local telephone calls are covered in some Members' Choice hospitals.

Where you are an inpatient in a non Members' Choice private hospital:

- a fixed dollar amount towards each day's accommodation charges
- a fixed dollar amount for theatre fees for each operating theatre visit
- benefits towards the cost of surgically implanted prostheses and other items on the Australian Government's Prostheses List. See the glossary on page 5 for details.

Non-admitted hospital services

Where you are treated at a hospital but not admitted (i.e. you are an 'outpatient') and a fee is raised directly by the hospital, Medibank will pay:

- 100% of the hospital charges* for attending an accident and emergency department (also known as 'facility fees') in a Public or Private hospital; and
- 100% of the hospital charges* for outpatient medical and post-operative treatment in a Public hospital

You will be responsible for paying any difference between the Comprehensive OSHC benefit and the hospital charges.*

Long term hospital treatment

If you are hospitalised for a continuous period of more than 35 days, your doctor must certify that you require ongoing acute care as an inpatient, otherwise your hospital benefits will be reduced.

Obstetrics and pregnancy-related services

Medibank Comprehensive OSHC pays benefits towards obstetrics and pregnancy-related services for you or your partner. There is a 12-month waiting period for obstetrics and pregnancy-related services that the mother will need to have served before the baby is born. Benefits are not generally payable for any goods or services obtained while you are serving a waiting period.

This waiting period does not apply where a medical practitioner certifies and Medibank agrees that the member required emergency treatment.

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^{*} Hospital charges do not include charges for medical services or prescription medicines. Please refer to medical services and prescription medicines on pages 10 to 11.

Medical services

For treatment by medical practitioners (including specialist, pathology and x-ray services) Medibank Comprehensive OSHC pays you the following benefits:

If you are a hospital inpatient:

• 100% of the Medicare Benefits Schedule (MBS) fee.

If you are a hospital outpatient (for example, if you are treated in your doctor's consulting rooms):

- 100% of the MBS fee for General Practitioner (GP) consultations
- The published 85% MBS fee# for other Medicare-recognised services, including those provided by specialists.
- # The published 85% MBS fee may not equal exactly 85% of the total MBS fee but an amount published in the MBS as set by the Australian Government.

What you are not covered for

Benefits are not payable for the following (or those items included in 'General items you are not covered for' on page 10).

Public and private hospital

In a public or private hospital you are not covered for:

- fertility treatment eg. IVF and GIFT programs
- cosmetic treatment/procedures
- any part of the accommodation charge raised by a public hospital that exceeds the benefit for a shared room, if you are accommodated in a single room at your request
- the gap for surgically implanted prostheses on the Australian Government's Prostheses List (see page 5 for details)

- any services or items in a Members' Choice hospital that are not covered by our agreement with the hospital
- the difference between the charges raised by a non Members' Choice hospital and the benefit payable by Medibank
- any items provided to you on discharge from a hospital
- any ancillary services provided to you in hospital that are not related to the reason for your hospital stay
- Surgically Implanted Prostheses and other medical devices not included in the Australian Government's Prostheses List
- access to newspapers, free-to-air TV and local telephone calls, except as covered in some Members' Choice hospitals.

Medical services you are not covered for

- treatment not considered medically necessary, eg. health screening services and cosmetic treatment
- any difference between your doctor's charge and the benefit payable by Medibank
- any medical examinations, x-rays or pathology required by DIBP as part of the student visa renewal process.

General items you are not covered for

- any treatment related to medical procedures that are not listed in the Medicare Benefits Schedule (although limited hospital benefits may be payable for certain dental procedures carried out in hospital)
- treatment provided outside Australia, including treatment provided while travelling to or from Australia. This applies whether or not the reason for being outside

Australia is related to your course of study. Note that prior to 1 July 2016 Norfolk Island (an Australian external territory) is not considered to be part of Australia for health insurance purposes

- transportation into or out of Australia in any circumstance
- treatment arranged before you or your dependants came to Australia
- services and treatment for which compensation or damages can be claimed
- treatment rendered by providers who are not recognised by Medibank for the purpose of paying benefits
- optical items and ancillary services, such as dental or physiotherapy, whether provided in private practice or in a hospital (unless these are covered by our agreement with a Members' Choice hospital). If you wish to be covered for these expenses, you should consider buying an additional 'extras' cover from us
- services rendered while premiums are in arrears
- benefits in excess of the amount charged for a service
- services for which a claim is submitted more than two (2) years after the date of service
- Medibank may refuse to pay benefits or to provide continued cover if incorrect or false information has been provided
- if a member may claim all or part of the cost of a service from another person, company or organisation, the benefit payable by Medibank may be reduced, so that the total amount payable from all sources does not exceed the amount charged.

Prescription medicines

What is covered?

Medibank pays benefits up to a maximum of \$50 for each prescription only item. This is subject to calendar year limits.

You are responsible for paying the prescription medicine co-payment for each prescription medicine.

Medibank may cover the full cost (subject to annual limits) of prescription medicines provided to an inpatient of a Members' Choice hospital if those medicines are covered by our agreement with the hospital.

What is not covered?

Medibank will not pay benefits for the following:

- your prescription medicine co-payment for each prescription medicine
- costs in excess of the benefit payable for each prescription medicine
- costs in excess of the maximum annual limit payable for prescription medicines, as shown on the Cover Summary
- medicines other than prescription medicines
- medicines prescribed for cosmetic purposes
- oral contraceptives.

You will be responsible for paying any costs above the benefits that are payable.

This means you may incur significant out-of-pocket expenses if high cost prescription medicines are required for your treatment.

Ambulance services

What is covered?

Where you need immediate professional attention **and** your medical condition is such that you couldn't be transported any other way, you are covered for services provided by an ambulance provider approved by Medibank, in the following circumstances:

- ambulance transportation to a hospital to receive immediate professional attention
- when an ambulance is called to provide immediate professional attention but transport by ambulance is not needed
- when, as an admitted patient, the hospital requires you to be transferred from one hospital to another (excluding transfers between public hospital facilities)
- transport by air ambulance, where pre-approval has been obtained from Medibank by the air ambulance provider.

What is not covered?

We don't pay benefits for any ambulance service that has not been defined under 'What is covered?' This includes the following circumstances:

- ambulance services where immediate professional attention is not required (eg. general patient transportation)
- any ambulance transport required after discharge from hospital
- inter-hospital transfers when you're transferred from one public hospital to another public hospital as an admitted patient
- any ambulance costs that are fully covered by a third party arrangement, such as an ambulance subscription or federal/ state/territory ambulance transportation scheme, WorkCover or the Transport Accident Commission
- any air ambulance services that are fully subsidised, such as South Care or NRMA Care Flight.

For more information on ambulance services call us on 134 148

Waiting periods

A waiting period is a period of time you need to wait after taking out your cover before you can receive benefits for services or items covered. These waiting periods include:

- 12 months for obstetrics and pregnancy-related services
- 12 months for pre-existing conditions (excluding psychiatric treatment).

Benefits are not generally payable for any services or items obtained while you are serving a waiting period. The waiting period does not apply when your treating medical practitioner certifies and Medibank agrees that the member required emergency treatment.

Other important membership information

Keeping your premiums up to date

It is generally a condition of your student visa that you have OSHC for the full length of your visa. If you have not paid a premium for the full length of your visa, or are applying for a new visa, you will have to renew your cover. It is your responsibility to ensure that premiums are up to date.

Many educational institutions will collect and send renewal premiums to Medibank on behalf of students. If your institution does this for you, Medibank will renew your cover and issue a new membership card to you automatically once payment has been received.

If you have a current student visa, you can also renew your membership online at medibankoshc.com.au

If you need to apply for a new student visa from DIBP, you should first contact your educational institution to obtain a letter that confirms that you are continuing your studies as we may be request documentary evidence of your student status either upon, or following the renewal of your OSHC.

Lapsed cover

Where premiums fall more than two (2) months in arrears, the membership will be considered to have lapsed. Should this occur, to restore your membership you will be required to pay **all** the arrears of premiums and pay premiums for the remaining length of your visa. You may be required to provide documentary evidence that you are still studying in Australia.

If you were a member of another fund's OSHC and your cover lapsed and you wish to now take out Medibank Comprehensive OSHC, you will be required to pay Medibank all the arrears of premiums and meet the above conditions.

Changing your personal details

You must advise Medibank when any of your personal details change, for example:

- you change your residential address.
 If you do not tell us when you change your address, you may not receive important correspondence
- your partner and/or children are coming to join you in Australia
- your partner and/or children no longer live with you
- you change your email address
- you change your phone number
- you change your educational institution
- your visa status changes.

Please refer to page 18 for details on how to obtain a copy of Medibank's Privacy Policy.

Adding your partner and children

If your partner and/or children are coming to join you, they can be added to your cover provided they have been authorised to enter Australia and reside with you (the student) for the duration of their stay. You will need to pay an additional premium to change your membership from a single or couple to a family cover.

When your family arrives, Medibank or your educational institution will need to see their passports and visas so that the period of cover can be confirmed. A new membership card listing all the members covered will be sent to you.

Adding a newborn to your cover

A new-born child may be added to an existing single or couple membership with effect from his or her date of birth and without having to serve any waiting periods already served by the Policy holder provided that:

- the application is received by Medibank 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.

Changing your resident status

If you or any of your dependants, are granted permanent residency status by DIBP, you are no longer eligible for OSHC. If you transfer to a new Medibank cover within 2 months of the date from which you were granted permanent resident status, we will recognise any waiting periods which you have already served under your OSHC, other than those to which separate waiting periods apply. Please contact us to arrange to transfer to another Medibank cover to avoid having to re-serve waiting periods.

Transferring from another Australian OSHC insurer

You can transfer your cover to Medibank from any other Australian OSHC insurer. Your period of membership served with another OSHC fund will count towards the waiting period under your Medibank OSHC.

However, if your cover with the other insurer has lapsed, see 'Lapsed cover' on page 14 for further details.

If you are transferring to Medibank, you will need to:

- ask your current OSHC insurer to provide Medibank with a Transfer certificate
- on request, provide documentary evidence, ie. electronic confirmation of enrolment, or a letter from the educational institution, to support that you are still studying in Australia, and
- on request, present your passport and visa to Medibank.

To arrange your transfer to Medibank or for more information visit our website at **medibankoshc.com.au**, come into a Medibank store, or call **134 148**.

Your premiums and length of membership

In order to be granted a student visa by DIBP, all applications lodged on or after 1 July 2010 must provide evidence that the student, and any of their accompanying dependants, have OSHC for the proposed duration of their visa.

For more information, or to find out the requirements for student visas lodged before 1 July 2010, please visit DIBP's web address at **border.gov.au**

OSHC premiums are reviewed from time to time. Any changes made to OSHC premiums will be advised to educational institutions and other agencies before they become effective.

Goods and Services Tax (GST)

OSHC is subject to a Goods and Services Tax (GST), which is included in the premium you pay. If you are on OSHC it is assumed you have no entitlement to claim any part of the GST as an input tax credit. If you are eligible and intend to claim back part or all of the GST you must notify us in writing.

Refunding premiums

Medibank will refund all or part of your premium (as applicable) if:

- you paid for OSHC but did not come to Australia to take up studies
- you have paid your premiums for an extended stay, but your student visa was not extended
- you have to cease studies and leave Australia before the end of a period of approved stay, for reasons beyond your control
- you have been granted permanent resident status in Australia or have been granted an Australian visa other than a student visa
- you have decided to defer your study and return home
- you have completed your study earlier than expected
- you, your partner or your dependent children were not residents in Australia for a continuous period of at least 3 months while you held a valid student visa
- you can prove you had OSHC from another organisation which includes the period covered by Medibank

 you have paid for Visa Length Health Cover and suspended your membership for a continuous period of 3 months or more whilst holding a valid student visa.

You must apply for a refund in writing to Medibank, and provide documentary proof of the reason for the refund (eg. letter from DIBP where the visa is denied; letter from the educational institution etc).

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

- you are granted permanent residency
 you are then no longer eligible for
 Medibank OSHC. If you transfer to a new
 Medibank Private Health Insurance cover
 within two months from the date you were
 granted permanent residency, we may
 instead transfer any residual premiums
 onto your new Medibank Private Health
 Insurance cover
- your refund request is approved, Medibank will pay the refund amount into your Australian bank account. Medibank 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 Medibank.

Following the introduction of Visa Length Health Cover by DIBP, it's generally a condition of your student visa to have Overseas Student Health Cover for the full length of your stay in Australia.

For more information call us on 134 148.

Making claims

Online claims

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

- 1. Claim via medibankoshc.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 Medibank OSHC GPO 2984 Melbourne VIC 3001.

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

Note: If you haven't paid 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. All claims will be paid in Australian dollars and can only be paid into an Australian bank account.

Termination of membership

Where, in Medibank's opinion, a member has obtained, or attempted to obtain, an improper advantage for themselves or for any other person, Medibank may terminate the relevant membership immediately by writing to the Policy holder. An improper advantage is any advantage, financial or otherwise, to which a member is not entitled.

Other important membership information

Medibank Online

We help make managing your health and insurance easier with our online services. Our website at **medibankoshc.com.au** is full of useful information and services designed to help you have more control over your membership.

From our website the Policy holder on a membership can register to use our Online Member Services facility which allows them to:

- view membership details
- download brochures and forms
- order a replacement membership card
- update contact details
- register your bank account details for payment of claims (via EFT)
- make claims
- obtain a list of direct billing medical centres.

Medibank 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 (AEST) or emailing us at oshc_support@medibank.com.au

Our Medibank 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 Medibank OSHC Privacy Policy by contacting us or by visiting our website at medibankoshc.com.au

You can also write to our Privacy Officer at: Privacy Officer, Medibank Private Limited, PO Box 9999 in your Capital City or email **privacy@medibank.com.au**

Your feedback

At Medibank 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)
- visiting one of our stores, or
- email oshc_support@medibank.com.au

Resolution of complaints

At Medibank we aim to resolve all enquiries and concerns the first time you talk to us. If your concern is still unresolved, or you need further assistance with any aspect of your membership, our Member Resolutions team is here to provide courteous and respectful service. Members are responsible for providing us with sufficient information to enable us to investigate the concern.

You can get into contact with the Member Resolutions team by:

- calling us on 134 148
- writing to us at: Medibank Private Member Resolutions, GPO Box 9999, Melbourne, VIC 3000.

If you are still unsatisfied with the outcome of your complaint, you can receive free, independent advice from the Private Health Insurance Ombudsman:

- call: 1300 362 072
- online: ombudsman.gov.au



134 148

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This guide does not apply to Medibank Essentials OSHC cover. Visit medibankoshc. com.au to view and download the Medibank Essentials OSHC Policy. The information contained in this guide is current at the time of issue, January 2018. It applies only to Medibank Comprehensive OSHC and supersedes all previously published material.