

Income Protection for the Rail Industry



A joint enterprise of employer associations
and unions in the building and
construction industry



Rail, Tram & Bus Accident & Illness Benefits Program

This brochure has been produced to assist workers in understanding the benefits that apply under the various insurance covers and the circumstances under which these benefits may be claimed.

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The Rail, Tram and Bus Union (RTBU)

RTBU has a long, proud and militant history of fighting for the wages, rights, and working conditions that members enjoy today. With our origins tracing back to 1861, the RTBU is the Industry Union that covers all workers of all grades across the Rail Industry.

United we stand – Divided we fall.

Important Disclaimer

This brochure is intended to provide a general overview of the benefits available under the Insurance Policy governing the Accident and Illness Benefits Program. It does not purport to contain all the information that may be relevant to the matters included in it, and the information which is provided is provided as a matter of interest only – this is not the Insurance Policy.

Conditions apply to a number of the benefits available under the Insurance Policy which may not be fully set out in this brochure. Workers and others should not act in reliance on the information contained in this brochure and should check the accuracy, reliability and completeness of any information and if necessary obtain independent and specific advice before acting.

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Please Note:

The Insurance Policy is arranged by Windsor Management Insurance Brokers and distributed by RTBU. RTBU does not manage or process claims. RTBU does not give any advice in relation to the Insurance Policy.

The Personal Accident & Illness Leisure Time policy is underwritten by QBE Insurance (Australia) Limited ABN 78 003 191 038 AFS License number 239545. All claims under Personal Accident & Illness Leisure Time Cover are managed by Total Claims Solutions, who have been appointed as Claims Manager on behalf of QBE Insurance (Australia) Limited.

The funeral policy is underwritten by MLC Limited ABN 96 000 000 402 AFS License number 230694. Total Claims Solutions assess and forward funeral claims to MLC for review.

The Discretionary Cover is provided via Incolink's Discretionary Fund and is governed by the Discretionary Guidelines. Total Claims Solutions manage all Discretionary Cover claims on behalf of Incolink.

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Personal Accident Leisure Time Insurance

A. Important Definitions/Information

B. Leisure Time Injury – Weekly Benefits

C. Broken Bones

D. Capital Benefits

E. (i) Journey Cover – Weekly Benefits (ii) Capital Benefits

Covers those workers where their employer continues to pay the premium contributions. If a period exists where no premium contribution payments have been paid whilst employed, then no cover will apply for such period.

Gaps in premium contribution payments will mean no cover for those periods.

Where back payments have been made, after an injury and a claim is submitted, the claim will not be considered. Premium contribution payments must be current at the time of injury.

A. Important Definitions/Information

Worker

Means a worker who is currently obtaining a salary and actively working for a registered Employer Member whose premium contribution payments are current at the time of injury.

When Does Cover Cease

Where premium contributions have ceased.

Dependants

Means the worker's spouse (or partner with whom the worker has cohabited for not less than three (3) consecutive months), whose gross earnings are less than \$16,000 per year in the 12 months immediately prior to the date of injury, and the unmarried, financially dependent children of the worker up to 16 years of age, or up to 25 years of age if a full time student.

What is Not Covered:

1. Pregnancy, childbirth, or miscarriage or any complication arising from any of those conditions.
2. War, whether declared or not, invasion or civil war, rebellion or insurrection.
3. Any act of terrorism, regardless of any cause or event contributing concurrently or in any other sequence to the loss.
4. Intentional self injury or suicide or any attempt at suicide.
5. Flying or other aerial activity unless a passenger in a properly licensed aircraft.
6. A worker's criminal or illegal act.
7. Training for or playing in any professional sport.
8. A worker's use of alcohol or drugs unless the drugs have been prescribed by a registered medical practitioner and used as per the registered medical practitioner's instructions.
9. An injury that occurs to a worker after a worker's 70th birthday.
10. Any medical condition for which a worker has required treatment or advice from a doctor, chiropractor or physiotherapist in the six (6) months before the commencement date of their cover.

The Policy does not provide benefits or entitlements to benefits to an insured person for any period when they are serving a prison sentence or whilst outside of Australia.

B. Leisure Time Injury–Weekly Benefits

Provides cover to workers only, for accidents, where a worker suffers an injury in their leisure time and prevents a worker from working which;

- occurs during the period of insurance, and
- occurs outside working hours and when the worker is not engaged in any work whatsoever for remuneration, and
- does not occur during a journey, and
- does not give rise to any entitlement to compensation under any statutory workers compensation scheme or statutory transport accident scheme.

Payments commence from the 15th day onwards from the date a worker first seeks medical advice/treatment from a registered medical practitioner and has been disabled and continues to be disabled as a result of the injury.

In relation to non professional sport injuries, payments commence from 29th day.

We will pay weekly benefits whilst a worker continues to suffer disablement up to a maximum period of 104 weeks, non professional sport injuries limited to 26 weeks, or such lesser period whilst a worker is unable to return to their occupation as a result of the injury.

We will increase a worker's weekly benefit from the 53rd week by 5%, whilst a worker continues to suffer total disablement as a result of the claimed injury.

The weekly benefit payable is 100% of salary up to the maximum of \$1,450 per week.

Definition of salary

The actual pre-disability earnings at the time of the occurrence and is the average of the actual declared earnings of an eligible Insured Person over the previous twelve months or lesser period if the eligible Insured Person has worked for less than twelve months.

C. Broken Bones

Provides cover to workers only, as a lump sum benefit, where a worker suffers injury during their leisure time, resulting in a break or hairline fracture of a bone shown below.

Breaks		Hairline Fracture	
Neck	\$8,000	Neck	\$2,400
Skull	\$8,000	Skull	\$2,400
Spine	\$8,000	Spine	\$2,400
Hip	\$6,000	Hip	\$6,000
Jaw	\$4,000	Jaw	\$1,600
Pelvis	\$4,000	Pelvis	\$1,600
Leg	\$4,000	Leg	\$1,600
Ankle	\$4,000	Ankle	\$1,600
Knee	\$4,000	Knee	\$1,600
Cheekbone	\$2,400	Cheekbone	\$2,400
Shoulder	\$2,400	Shoulder	\$2,400
Arm	\$2,000	Arm	\$800
Elbow	\$2,000	Elbow	\$800
Wrist	\$2,000	Wrist	\$800
Nose	\$1,600	Nose	\$1,600
Collarbone	\$1,600	Collarbone	\$1,600
Ribs	\$800	Ribs	\$800
Foot	\$600	Foot	\$600
Hand	\$600	Hand	\$600

The type of break or hairline fracture is determined by the information detailed in the radiologist report. The following definitions apply:

Break –fracture of a bone which is complete or incomplete resulting from injury which does not include a hairline fracture and, in the opinion of a registered medical practitioner requires medical treatment.

Hairline Fracture – A fracture of a bone without separation of the fragments, being hairlike and, in the opinion of a registered medical practitioner requires medical treatment.

No work related accidents or accidents occurring during a journey are covered under this Policy.

PLEASE NOTE: Ribs means one or many, \$800 is paid whether one, two or three ribs break. The maximum benefit payable for a broken or hairline fractured bone/s for any one injury is \$8,000.

D. Capital Benefits

Provides cover to workers only, as a lump sum benefit, where a worker suffers injury in their leisure time resulting in any of the following payable conditions which must occur within 12 months of the date of injury. Injury resulting in:

Payable Conditions		Worker with Dependants	Worker without Dependants
1	Death * Additional benefit Child Care Assistance (Accidental Death)	\$40,000	\$20,000
2	Permanent paraplegia	\$40,000	\$20,000
3	Permanent quadriplegia	\$40,000	\$20,000
4	Permanent total loss of entire sight of one/both eye/s	\$40,000	\$20,000
5	Permanent and incurable paralysis of all limbs	\$40,000	\$20,000
6	Permanent and incurable insanity	\$40,000	\$20,000
7	Permanent total loss of hearing:		
7.1	In both ears	\$32,000	\$16,000
7.2	In one ear	\$8,000	\$4,000
8	Permanent total loss of the use of:		
8.1	Four fingers and thumb of either hand	\$30,000	\$15,000
8.2	Four fingers of either hand	\$16,000	\$8,000
8.3	One thumb, both joints	\$12,000	\$6,000
8.4	One thumb, one joint	\$6,000	\$3,000
8.5	A finger, three joints	\$4,000	\$2,000
8.6	A finger two joints	\$3,000	\$1,500
8.7	A finger one joint	\$2,000	\$1,000

Payable Conditions		Worker with Dependants	Worker without Dependants
9	Permanent total loss of the use of:		
9.1	All the toes of one foot	\$6,000	\$3,000
9.2	Great toe, both joints	\$2,000	\$1,000
9.3	Great toe, one joint	\$1,200	\$600
9.4	Other toe (each toe)	\$400	\$200
10	Permanent loss of the lens of one eye	\$24,000	\$12,000
11	Third degree burns and/or resultant disfigurement which covers:		
11.1	More than 40% of the entire body	\$20,000	\$10,000
11.2	Between 20% and 39% of the entire body	\$10,000	\$5,000
12	Fracture of a leg or patella with established non-union	\$4,000	\$2,000
13	Shortening of the leg by five (or more) centimetres	\$3,000	\$1,500

*In the event of the death of a "Worker with Dependants" as defined, for which a benefit is payable under this part of the policy, in addition, we will reimburse child care expenses incurred within 12 months of the insured person's death. The maximum amount payable under this benefit is \$30,000 for any one claim. Benefits are only paid directly to the registered child care provider.

The maximum Capital Benefit paid for any one accident is \$40,000 for a worker with dependants and \$20,000 for a single worker.

E. (i) Journey Cover – Weekly Benefits

Provides cover to workers only, where a worker suffers an injury whilst in direct travel to and from work and prevents a worker from working which;

- occurs during the period of insurance, and
- occurs outside working hours and when the worker is not engaged in any work whatsoever for remuneration, and
- occurs during a journey, and
- does not give rise to any entitlement to compensation under any statutory workers compensation scheme or statutory transport accident scheme.

Any accidents involving registered vehicles, trams, buses, trains are not covered. These claims must be lodged with the appropriate statutory transport accident scheme.

Example

Person on a bicycle (push bike) travelling to work is:

- A) Hit by a car. This is a Statutory Transport claim.
- B) Hit a parked vehicle. This is a claim.
- C) Fell off push bike. This is a claim.

Weekly benefits are determined at 100% of a worker's pre-disability earnings, being the basic weekly rate of pay exclusive of all site allowances, overtime, bonuses or commissions at the time of injury to a maximum of \$1,450 (gross) per week.

Payments commence from the day a worker first seeks medical advice/treatment from a registered medical practitioner and is deemed unfit to work as a result of the injury. We will increase a worker's weekly benefit from the 53rd week by 5%, whilst a worker continues to suffer total disablement as a result of the claimed injury.

We will pay weekly benefits whilst a worker continues to suffer disablement up to a maximum of 104 weeks or such lesser period whilst a worker is unable to return to their occupation as a result of the injury.

E. (ii) Capital Benefits

Provides cover to the worker only, as a lump sum benefit where a worker suffers injury whilst travelling directly to and from work. Any accidents involving registered vehicles, trams, buses, trains are not covered. These claims must be lodged with the appropriate statutory transport accident scheme. Injury resulting in:

Payable Conditions		Worker with Dependants	Single Worker
1	Death *Additional benefit Child Care Assistance (Accidental Death)	\$100,000	\$50,000
2	Permanent paraplegia	\$100,000	\$50,000
3	Permanent quadriplegia	\$100,000	\$50,000
4	Permanent total loss of the entire sight of one / both eyes	\$100,000	\$50,000
5	Permanent and incurable paralysis of all limbs	\$100,000	\$50,000
6	Permanent and incurable insanity	\$100,000	\$50,000
7	Permanent total loss of hearing:		
7.1	In both ears	\$80,000	\$40,000
7.2	In one ear	\$20,000	\$10,000
8	Permanent total loss of the use of:		
8.1	Four fingers and thumb of either hand	\$75,000	\$37,500
8.2	Four fingers of either hand	\$40,000	\$20,000
8.3	One thumb, both joints	\$30,000	\$15,000
8.4	One thumb one joint	\$15,000	\$7,500
8.5	A finger three joints	\$10,000	\$5,000
8.6	A finger, two joints	\$7,500	\$3,750
8.7	A finger, one joint	\$5,000	\$2,500

Payable Conditions		Worker with Dependants	Single Worker
9	Permanent total loss of the use of:		
9.1	All the toes of one foot	\$15,000	\$7,500
9.2	Great toe, both joints	\$5,000	\$2,500
9.3	Great toe, one joint	\$3,000	\$1,500
9.4	Other toe, (each toe)	\$1,000	\$500
10	Permanent loss of the lens of one eye	\$60,000	\$30,000
11	Third degree burns and/or resultant disfigurement which covers:		
11.1	More than 40% of the entire body	\$50,000	\$25,000
11.2	Between 20% and 39% of the entire body	\$25,000	\$12,500
12	Fracture of a leg or patella with established non-union	\$10,000	\$5,000
13	Shortening of leg by five (or more) centimetres	\$7,500	\$3,750

*In the event of the death of a "Worker with Dependants" as defined, for which a benefit is payable under this part of the Policy, in addition, we will reimburse child care expenses incurred within 12 months of the insured person's death. The maximum amount payable under this benefit is \$30,000 for any one claim. Benefits are only paid directly to the registered child care provider.

The maximum Capital Benefit paid for any one accident is \$100,000 for a worker with dependants and \$50,000 for a single worker.

Discretionary Cover

A. Important Definitions/Information

B. Emergency Transport

C. Dental, Accident Only

Covers those workers where their employer continues to pay the premium contributions. If a period exists where no premium contribution payments have been paid whilst employed, then no cover will apply for such period.

Gaps in premium contribution payments will mean no cover for those periods.

Where back payments have been made and a claim is submitted, the claim will not be considered. Premium contribution payments must be current at the time of the event.

These covers are provided under a Discretionary Fund and not underwritten by QBE Insurance (Australia) Limited.

A. Important Definitions/Information

Worker

Means a worker who is currently obtaining a salary and actively working for a registered employer member whose premium contribution payments are current at the time of the incident.

When does Cover Cease?

Where premium contributions have ceased.

Dependants

Means the worker's spouse (or partner with whom the worker has cohabitated for not less than three (3) consecutive months), and includes the unmarried, financially dependent children of the worker up to 16 years of age, or up to 25 years of age if a full time student.

The Latest Time a Claim Can be Made

Any claim received will only be considered for payment if the claim is submitted within eight (8) months after the anniversary of the period of cover. The period of cover is, 1st January to 31st December each year.

B. Emergency Transport

There are set guidelines for claiming under this section.

The following is a summary of those guidelines.

Provides cover to the worker and their dependants, for ambulance usage anywhere in Australia.

There is a maximum amount paid on any one ambulance trip. The maximum amount payable for road transport will be subject to a maximum of \$12,000 and for air travel will be subject to a maximum amount of \$15,000.

Work accidents must be lodged through WorkCover and accidents involving a registered vehicle must be lodged with the appropriate statutory transport accident scheme. No cover is provided where statutory insurance provides compensation.

C. Dental, Accident Only

There are set guidelines for claiming under this section. The following is a summary of those guidelines. Provides cover to the worker and their dependants for accidental damage to sound and healthy teeth, occurring outside working hours.

The maximum amount payable for any one accident is:

**Worker without Dependants: \$2,000
(Maximum two (2) claims per year)**

**Worker with Dependants: \$2,250
(Maximum four (4) claims per year)**

PLEASE NOTE: Damage to Dentures/Bridges/Plates will be covered up to 10 years old. Anything above 10 years will incur a depreciation table. Dentures/Bridges/Plates above 15 years old are not covered. Proof of purchase and age will need to be supplied. Where there is no proof of purchase, the damaged Dentures/Bridges/Plates will need to be provided and reviewed by our appointed independent dentist.

Dental, Accident Only: What is Not Covered

- Any damage related to childbirth or pregnancy or their complications.
- Intentional self injury or suicide or any attempt at suicide.
- Any damage occurring as a result of an illegal act.
- Training for or playing in competitive club sport or activity organised by any sporting organisation, authority or club.
- Any damage resulting from disease or sickness.
- Any damage that is not caused by an accident.
- Damage to filling/s only. (There must be actual damage to the tooth.)
- Any damage as a result of the use of intoxication by liquor or drugs, unless they have been prescribed by a registered medical practitioner and used as per medical instructions.
- Any damage which has been contributed to by decay.
- Milk teeth or first teeth.
- Extractions to wisdom teeth.
- Any dental work which is upgrading the tooth from the condition it was in prior to the accident.
- Any work or motor accident for which statutory insurance or compensation scheme provides compensation.
- Lost Dentures, Bridges or Plates.
- Any damage or loss which occurs whilst in prison.
- Any dental work that is covered under your travel insurance policy.
- Where a worker has private health insurance which includes dental, all accounts must be submitted with the private health insurer first and we will only consider the gap if the claim is approved.
- Failed treatment. Failed treatment is where a dentist has performed a procedure and that procedure has not worked.

Funeral Cover

A. Important Definitions/Information

B. Benefit

Covers those workers where their employer continues to pay the premium contributions. If a period exists where no premium contribution payments have been paid whilst employed then no cover will apply for such period.

Gaps in premium contribution payments will mean no cover for those periods.

Where back payments have been made, after an injury/illness and a claim is submitted, the claim will not be considered. Premium contribution payments must be current at the time of injury/illness.

This policy is underwritten by MLC Limited ABN 96 000 000 402 AFSL 230694.

A. Important Definitions/Information

Worker

Means a worker who is currently obtaining a salary and actively working for a registered employer member whose premium contribution payments are current at the time of injury/illness.

When Does Cover Cease?

Where premium contributions have ceased.

B. Benefit

Provides a benefit of \$9,000 (payable to the beneficiary or funeral parlour) when a worker or dependant children dies. Cover is provided 24 hours, 7 days a week.

Cover ceases upon the worker's 70th birthday.

Leisure Time Illness/ WorkCover Top-Up/TAC Top-Up & Workplace Death & Capital Benefits

A. Important Definitions/Information

B. Leisure Time Illness – Weekly Benefits

C. TAC Top-Up

D. Workers Compensation Top-Up

E. Workplace Death & Capital Benefits

PLEASE NOTE: Cover is only available for those workers where the employer has agreed and continues to pay the weekly premium contributions.

If a period exists where no premium contribution payments have been paid on a worker's behalf, then no cover will apply for such period.

Gaps in premium contribution payments will mean no cover.

Back payments will not be accepted.

A. Important Definitions/Information

Worker

Means a worker who is currently obtaining a salary and actively working for a registered employer member and whose premium contributions are current at the time of injury/illness.

Dependants

Means the worker's spouse (or partner with whom the worker has cohabited for not less than three (3) consecutive months), whose gross earnings are less than \$16,000 per year in the 12 months immediately prior to the date of injury, or the date the worker first becomes disabled from the illness, and the unmarried, financially dependent children of the worker up to 16 years of age, or up to 25 years of age if a full time student.

When Does Cover Cease?

Where premium contributions have ceased.

What is Not Covered:

1. Pregnancy, childbirth or miscarriage or any complication arising from any of those conditions.
2. War, whether declared or not, invasion or civil war, rebellion or insurrection.
3. Any act of terrorism, regardless of any cause or event contributing concurrently or in any other sequence to the loss.
4. Intentional self injury or suicide or any attempt at suicide.
5. Flying or other aerial activity unless a passenger in a properly licensed aircraft.
6. A worker's criminal or illegal act.
7. Training for or playing in any professional sport.
8. A worker's use of alcohol or drugs unless the drugs have been prescribed by a registered medical practitioner and used as per the registered medical practitioner's instructions.
9. An illness or injury that occurs to a worker after the worker's 70th birthday.
10. Any medical condition for which a worker has required treatment or advice from a doctor, chiropractor or physiotherapist in the six (6) months before the commencement date of their cover.

The Policy does not provide benefits or entitlements to benefits to an insured person for any period when they are serving a prison sentence or whilst outside of Australia.

B. Leisure Time Illness – Weekly Benefits

Provides cover to workers only, where a worker suffers an illness in their leisure time and prevents a worker from working which;

- occurs and treatment is sought from a registered medical practitioner and disablement commences during the period of insurance, and
- is not an injury, and
- does not give rise to any entitlement to compensation under any statutory workers compensation scheme.

Payments commence from the 15th day onwards from the date a worker first seeks medical advice/treatment from a registered medical practitioner and is disabled which has not been separated by a return to work.

In relation to non professional sport injuries, payments commence from the 29th day.

The weekly benefit payable is 100% of salary up to the maximum of \$1,450 per week.

Definition of salary

The actual pre-disability earnings at the time of the occurrence and is the average of the actual declared earnings of an eligible Insured Person over the previous twelve months or lesser period if the eligible Insured Person has worked for less than twelve months.

We will pay weekly benefits whilst a worker continues to suffer disablement up to a maximum of 104 weeks, non professional sport injuries limited to 26 weeks or such lesser period whilst a worker is unable to return to their occupation as a result of the illness.

C. TAC Top-Up

Provides cover to workers only, where a worker suffers injury whilst travelling in direct travel to and from work in a registered motor vehicle and/or accidents involving trams, buses and trains which;

- occurs during the period of insurance, and
- occurs during a journey, and
- gives rise to an entitlement to compensation under any statutory transport accident scheme, and
- does not give rise to any entitlement to compensation under any statutory workers compensation scheme.

We pay the difference between what the transport accident scheme pays and the actual gross rate of 100% of a worker's pre-disability earnings, calculated by the transport accident scheme, to a combined maximum of \$1,450 (gross) per week.

We will pay top-up benefits whilst a worker continues to suffer disablement and receives loss of income benefits from a statutory transport accident scheme to a maximum of 104 weeks or such lesser period whilst a worker is unable to return to their occupation as a result of the injury.

D. Workers Compensation Top-Up

Provides cover to workers only, for workplace accidents which are accepted by an Australian jurisdiction statutory workers compensation scheme which;

- occurs during the period of insurance, and
- occurs during working hours, and
- gives rise to an entitlement to compensation under any statutory workers compensation scheme.

Benefits are provided from the 53rd week of disablement whilst in receipt of WorkCover payments for a maximum period of 78 weeks, or such lesser period, whilst the worker continues to be disabled and WorkCover continues to pay benefits.

We top-up the difference of what gross payment WorkCover is paying and your gross pre-injury earnings, determined by WorkCover at the time of calculating your benefit from week 53, to a combined maximum of \$1,450 (gross) per week.

E. Workplace Death & Capital Benefits

Provides cover to workers only, where a worker suffers a workplace injury resulting in death or permanent total disablement, as listed below, which is not an illness and is covered by a statutory workers compensation scheme.

Capital Benefits Table Payable Condition – an injury resulting in		Worker with Dependants	Worker without Dependants
1	Death	\$300,000	\$150,000
2	Permanent quadriplegia	\$300,000	\$150,000
3	Permanent paraplegia	\$300,000	\$150,000
4	Permanent and incurable paralysis of all limbs	\$300,000	\$150,000
5	Third degree burns which cover more than 50% of the entire body	\$150,000	\$75,000
6	Permanent total loss of sight in one/both eyes	\$300,000	\$150,000
7	Permanent total loss of the hearing in both ears	\$187,500	\$93,750
8	Permanent total loss of lens of the one eye	\$75,000	\$37,500
9	Permanent total loss of the hearing in one ear	\$75,000	\$37,500

Capital Benefits Table Payable Condition – an injury resulting in		Worker with Dependants	Worker without Dependants
Permanent physical severance or permanent total loss of use of the following:			
10	Both hands	\$300,000	\$150,000
11	Both arms	\$300,000	\$150,000
12	Both feet	\$300,000	\$150,000
13	Both legs	\$300,000	\$150,000
14	One hand and one foot	\$300,000	\$150,000
15	One foot or one leg	\$150,000	\$75,000
16	Four fingers and one thumb	\$112,500	\$56,250
17	Both joints of one thumb	\$45,000	\$22,500
18	One joint of one thumb	\$22,500	\$11,250
19	Three joints of one finger	\$22,500	\$11,250
20	Two joints of one finger	\$15,000	\$7,500
21	One joint of one finger	\$7,500	\$3,750
22	All toes of one foot	\$22,500	\$11,250
23	Great toe – both joints	\$11,250	\$5,625
24	Great toe – one joint	\$7,500	\$3,750
25	Each toe other than great	\$7,500	\$3,750
Other conditions:			
26	Fractured leg or patella with established non-union	\$15,000	\$7,500
27	Third degree burn which covers between 20% and 49% of the entire body	\$75,000	\$37,500
28	Loss of at least 50% of all sound and natural teeth including capped or crown teeth - per tooth	\$1,875	\$938
29	Permanent total disablement (payable where no payment is made under items 1 to 29 and aligned to Accident Compensation Act 1985 Section - Compensation of Maims)	10% of a lump sum impairment benefit as paid by WorkCover to a maximum of \$37,500	5% of a lump sum impairment benefit as paid by WorkCover to a maximum of \$18,750

*In the event of the death of a "Worker with Dependants" as defined, for which a benefit is payable under this part of the Policy, in addition, we will reimburse child care expenses incurred within 12 months of the insured person's death. The maximum amount payable under this benefit is \$30,000 for any one claim. Benefits are only paid directly to the registered child care provider.

Frequently Asked Questions

Q Who will assess my claim?

A Total Claims Solutions is responsible for managing all claims. For all claims enquires, contact Total Claims Solutions on (03) 9663 2411.

Q Do I need to get all sections of the Claim Form completed?

A Yes, a Claim Form cannot be considered until we receive the form completed in FULL. Incomplete answers and vague information will delay the assessment of your claim.

Q What other information do I need to submit with my claim?

A Copies of any medical reports and/or discharge summary; patient notes; radiologists' reports that you may have been provided, which will assist with the assessment of your claim. Proof of dependency will also need to be submitted if requested on the claim form to determine your weekly benefits.

Q How long does it take for a claim to be considered?

A The initial assessment of your claim may take between five and six weeks, depending on the information required (delays will occur where the forms have not been completed in full).

Q Can I fax through my Claim Form?

A Yes; however we will need the original Claim Form prior to considering a claim.

Q Can I email through my claim form?

A Yes; however it is important the original Claim Form is also sent prior to considering a claim.

Q Do I have to wait 14 days before having to send my claim form in?

A No; if it appears that you are going to be off work for more than 14 days, you should complete a claim form and send it to Total Claims Solutions immediately.

Q Do I need to take all my sick leave before claiming?

A No

Q What is the maximum benefit period I can claim for?

A Weekly benefits are only payable for a maximum period of 104 weeks whilst deemed medically unfit to work as a result of your injury or illness or such lesser period whilst you are unable to return to work.

Q Can I claim my medical bills?

A No; legislation does not allow for medical bills to be covered. Cover is only for weekly benefits whilst you are medically unfit to work as a result of an injury or illness.

Q How are my payments made?

A Payments are made fortnightly in arrears whilst we have a current medical certificate. Payments can be either made by cheque or Electronic Funds Transfer (EFT).

Q. Where is Total Claims Solutions?

A Total Claims Solutions is located in the Incolink Building on Level 1, 151 Rathdowne Street, Carlton, Victoria.

Q Where do I get a claim form?

A You will need to contact Total Claims Solutions on **(03) 9663 2411** for a claim form to be sent or you can download the claim forms from the following websites:

Total Claims Solutions www.totalclaims.com.au

Once my claim is approved how long until benefits are paid?

A Payment can be made the same day the claim has been approved providing Total Claims Solutions have a Medical Certificate on file for the applicable periods. Payments are made by cheque or EFT. If payments are made by EFT, funds will appear within 48 hours.

If payments are made via cheque, the cheque will be posted within five (5) working days.

Q What are my obligations when I have made a claim?

A You must follow medical advice and treatment from your treating medical practitioner at all times after sustaining your injury/illness; and at our expense, undergo any medical examination by a doctor appointed by Total Claims Solutions, if required. Failure to comply may result in your claim payments ceasing.



For all enquiries pertaining to the information supplied in this brochure or for a claim form, please call:



Windsor Management Insurance Brokers Pty Ltd
AFS Licence Number 230747 ACN 083 775 795
Level 1, 151 Rathdowne Street, Carlton, Vic 3053
Phone: **(03) 9663 2411** Facsimile: (03) 9663 4288
www.wmib.com.au

The insurance policy is arranged by Windsor Management Insurance Brokers and distributed by RTBU. RTBU does not manage or process claims. RTBU does not give any advice in relation to the Insurance Policy.

The Personal Accident & Illness Leisure Time policy is underwritten by QBE Insurance (Australia) Limited ABN 78 003 191 038 AFS License number 239545. All claims under Personal Accident & Illness Leisure Time Cover are managed by Total Claims Solutions, who have been appointed as Claims Manager on behalf of QBE Insurance (Australia) Limited.

The funeral policy is underwritten by MLC Limited ABN 96 000 000 402 AFS License number 230694. Total Claims Solutions assess and forward funeral claims to MLC for review.

The Discretionary Cover is provided via Incolink's Discretionary Fund and is governed by the Discretionary Guidelines. Total Claims Solutions manage all Discretionary Cover claims on behalf of Incolink.



Total Claims Solutions Pty Ltd ABN 42 389 515 023
Phone: (03) 9663 2411 Facsimile: (03) 9663 4020
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