



Incolink Accident & Illness Benefits Program

RAIL, TRAM & BUS

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



Incolink was established in 1988 as the industry redundancy scheme to support workers between jobs.

As well as managing funds for workers, Incolink supports the Industry with a range of benefits and services.

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The Incolink Accident & Illness Benefits program brochure is only intended to provide a general overview of the benefits available under the various insurance policies governing the Accident and Illness Benefits program. It does not contain all the information that may be relevant to the matters included in it. The information is provided as a matter of interest only – this information is not an insurance policy.

Conditions apply to the benefits that may be available under those insurance policies. These conditions are not fully set out in this brochure. You should:

- not act in reliance on the information contained in this brochure;
- check the accuracy, reliability and completeness of any information; and if necessary
- obtain independent and specific advice before acting.

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

The RTBU has committed considerable effort and resources to assist in putting this insurance cover in place. As a result, RTBU receive a financial benefit to cover their expenses. Refer to Windsor Management Insurance Brokers' RTBU's FSG for the declaration of administration fee.

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Incolink is the trading name of the Redundancy Payment Central Fund Ltd, a Company Incorporated in Victoria. The Company acts as the Trustee of the various Trusts, which governing Trust Deeds are applicable to employers and their workers within the commercial construction sector.



Your insurance cover – what cover applies to me?

The Personal Accident & Illness Leisure Time policies (being Personal Accident Leisure Time and Leisure Time Illness/ WorkCover Top-Up & Workplace Death and Capital Benefits) are underwritten by QBE Insurance (Australia) Limited ABN 78 003 191 035 AFS Licence number 239545.

All claims under these policies are managed by Total Claims Solutions ABN 42 389 515 023, who have been appointed as Claims Manager on behalf of QBE Insurance (Australia) Limited.

The Discretionary Covers (Ambulance, Dental and Funeral) are provided via Incolink's Discretionary Fund and are governed by the Discretionary Guidelines. Ambulance and Dental claims are managed by Total Claims Solutions. Funeral claims are managed by Incolink.

If your employer is paying and is up to date with Incolink redundancy contributions or paying the applicable insurance premium:

Personal Accident Leisure Time Insurance

- Leisure Time Injury – Weekly Benefits
- Broken Bones
- Capital Benefits
- Journey Cover – Weekly Benefits
- Journey Cover – Capital Benefits

Discretionary Cover

- Emergency Transport
- Dental, Accident only
- Funeral

If your employer is paying Incolink Income Protection and Trauma (IPT) premiums directly to Incolink or paying the applicable insurance premium via Windsor Management Insurance Brokers:

- Leisure Time Illness – Weekly Benefits
- TAC Top-Up
- Workers Compensation Top-Up
- Workplace Death & Capital Benefits

What cover applies if I am an apprentice and my employer is registered with Incolink?

Personal Accident Leisure Time Insurance and Discretionary Cover (Ambulance, Dental and Funeral) apply if your employer is registered with Incolink and apprentice days are recorded on your behalf and they are current or where the applicable insurance premium is being paid to Windsor Management Insurance Brokers.

Income Protection and Trauma (IPT) may apply as long as your employer is registered with Incolink and is paying the IPT insurance premiums on your behalf and they are current or paying the applicable insurance premium directly to Windsor Management Insurance Brokers.

Please refer to the
Frequently Asked
Questions on
page 43.



Personal Accident Leisure Time Insurance

- A. Important information & exclusions
- B. Leisure Time Injury – Weekly Benefits
- C. Broken Bones
- D. Capital Benefits
- E. (i) Journey Cover – Weekly Benefits
(ii) Journey Cover – Capital Benefits

When is cover in place?

Cover is only available for those workers where the employer continues to pay the redundancy contributions or the applicable insurance premium that is paid directly via Windsor Management Insurance Brokers. You can check your redundancy payments are up to date by logging into WorkerLink via the Incolink smartphone app or incolink.org.au or by calling Incolink on (03) 9639 3000.

If your employer is paying the insurance premium directly via Windsor Management Insurance Brokers, contact Daniel Urzia on 9320 8535.

If a period exists where no redundancy or premium contribution payments have been paid on your behalf while employed, then no cover will apply for such a period.

Gaps in redundancy contribution payments or premium contribution payments will mean no cover. Where back payments have been made after an injury and a claim is submitted, the claim will not be considered. Redundancy contributions and/or employer premium payments must be current at the time of injury.

Apprentices (under 18 years old)

Apprentice days must be recorded and current or insurance premium paid at the time of injury.

A. Important information & exclusions

Worker

Means a worker who is currently obtaining a salary and actively working for an employer whose redundancy contribution and/or insurance premium payments and/or apprentice days are current at the time of injury.

Continuation of cover

A worker will continue to be covered for a period of nine (9) consecutive months from the last recorded and paid redundancy contribution and/or apprentice days to Incolink provided;

- they are unemployed, and
- remain in or are actively seeking work in the rail, tram and bus industry within Australia, and
- are registered as seeking work with Incolink's Wellbeing & Support Services, Union Registry book, Centrelink or equivalent, and
- is not an insured person who is self employed as a sole trader or a partner in a partnership or is a director, company secretary, member, shareholder or officer of a proprietary limited company.

NOTE: continuation of cover does not apply to those workers who pay the applicable insurance premium directly via Windsor Management Insurance Brokers.

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, as from 1 October 2016, less than \$18,200 per year in the 12 months immediately prior to the date of disablement, 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?

A claim will not be paid if it directly or indirectly arises from any of the following:

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 or non professional sport, or activity organised by any sporting organisation, authority, club or centre.
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. Any medical condition for which the worker has required medication, or any treatment or advice from a doctor, chiropractor or physiotherapist in the six months before:
 - the commencement of the worker's cover, or
 - the resumption of the worker's cover following a period of at least six (6) consecutive months for which no redundancy and or premium pay contributions has been paid.
10. 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.

When does cover cease?

- Upon your 70th birthday.
- If your redundancy contributions or insurance premium payments paid directly to Windsor Management Insurance Brokers are not current at the time of your injury.
- If your apprentice days are not current at the time of your injury.
- You commence working for an employer who is not registered with Incolink or paying the premium payments directly to Incolink.
- At the end of nine (9) months from the last recorded and paid redundancy contribution, or last recorded apprentice days, whilst a worker has been unemployed.

NOTE: Nine (9) month cover does not apply to those workers who are paying premium directly via Windsor Management Insurance Brokers.

We may also be entitled to refuse to pay or to reduce the amount of a claim if:

- It is in any way fraudulent.
- Fraudulent means or devices are used by you, or anyone acting on your behalf, to obtain any benefits under this policy.

Please refer to the
Frequently Asked
Questions on
page 43.

B. Leisure Time Injury – Weekly Benefits

Provides cover to workers only, for accidents, where a worker suffers an injury in their leisure time, which prevents a worker from working. The injury must:

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

** Journey cover is provided in Section E*

Benefit payable period

Weekly benefits will be paid whilst a worker continues to suffer disablement up to a maximum of 156 weeks or such lesser period whilst a worker is unable to return to their occupation as a result of the injury. Where a worker is over 65 years old at the time of injury, the benefits period is limited to 104 weeks.

When will payments be made?

Once a claim has been accepted 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.

Weekly benefits will be increased from the 53rd week by 5%, whilst a worker continues to suffer total disablement as a result of the claimed injury.

Weekly Benefits payable

Where the employer is paying Income Protection & Trauma (IPT) premiums, or the applicable insurance premium directly to Windsor Management Insurance Brokers the gross weekly benefits are as follows:

	WHERE EMPLOYER IS NOT PAYING IPT*	WHERE EMPLOYER IS PAYING IPT*
With dependants	\$950	\$1,450
Without dependants	\$730	\$1,300
Apprentices with dependants	\$650	\$1,050
Apprentices without dependants	\$595	\$950

When are the benefits under the “Where employer is not paying IPT” column available?

When your employer is only paying redundancy contributions (i.e. with no IPT premiums). Or whilst you are unemployed or between jobs and you meet the conditions under continuation of cover on page 5.

When are the benefits under the “Where employer is paying IPT” column available?

The benefits are only available to those workers whose employer is paying the Incolink IPT insurance premium in addition to redundancy payments and/or apprentice days or the applicable insurance premium is paid directly to Windsor Management Insurance Brokers. Redundancy contribution and/ or insurance premium payments and/or apprentice days and

IPT insurance premium must be current at the time of the injury.

Any disablement must occur within 12 months from the date of injury.

C. Broken Bones

Provides cover to employees only where a worker suffers injury during their leisure time, resulting in a break or hairline fracture of a bone shown below. No work related accidents or accidents during a journey are covered in this section.

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

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

Ribs – means one or many. Cover of \$800 is paid whether one, two or three ribs break.

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.

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 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 unsound mind to the extent of legal incapacity as diagnosed by a registered medical practitioner with expertise in the assessment of cognitive capacity	\$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

Please refer to the Frequently Asked Questions on page 43.

PAYABLE CONDITIONS		WORKER WITH DEPENDANTS	WORKER WITHOUT DEPENDANTS
9	Permanent total loss of the use of:		
9.1	All the toes on 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, reimbursement for child care expenses will be made if the expenses are 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 worker with no dependants.



E. (i) Journey Cover – Weekly Benefits

The weekly benefit under this cover is only available where a worker suffers an injury whilst in direct travel to and from work, which prevents a worker from working.

The injury must:

- occur during the period of insurance, and
- occur outside working hours and when the worker is not engaged in any work whatsoever for remuneration, and
- occur during a journey directly to and from work, and
- 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 an Incolink claim.
- C) Fell off push bike. This is an Incolink 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 \$1,500 (gross*) per week.

Benefit payable period

Weekly benefits are paid (up to a maximum of 156 weeks) whilst a worker continues to suffer disablement and is unable to return to their occupation as a result of the injury. Where a worker is 65 years old at the time of the accident, the benefit period is limited to 104 weeks.

When do payments commence?

Once a claim has been accepted 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. The weekly benefit will be increased from the 53rd week by 5%, whilst a worker continues to suffer total disablement as a result of the claimed injury.

Any disablement must occur within 12 months from the date of injury.

Please refer to the Frequently Asked Questions on page 43.

E. (ii) Journey Cover – Capital Benefits

Provides cover to the worker only, 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	WORKER WITHOUT DEPENDANTS
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 entire sight of one/ both eye/s	\$100,000	\$50,000
5	Permanent and incurable paralysis of all limbs	\$100,000	\$50,000
6	Permanent unsound mind to the extent of legal incapacity as diagnosed by a registered medical practitioner with expertise in the assessment of cognitive capacity	\$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	WORKER WITHOUT DEPENDANTS
9	Permanent total loss of the use of:		
9.1	All the toes on 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	\$20,000	\$25,000
11.2	Between 20% and 39% of the entire body	\$10,000	\$12,500
12	Fracture of a leg or patella with established non-union	\$4,000	\$5,000
13	Shortening of the leg by five (or more) centimetres	\$3,000	\$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, reimbursement for child care expenses will be made if the expenses are 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 worker without dependants.



Discretionary Cover – Ambulance & Dental

- A. Important definitions/information
- B. Emergency Transport
- C. Dental, Accident only

When is cover in place?

Cover is only available for those workers where the employer continues to pay the redundancy contributions or the applicable insurance premium that is paid directly via Windsor Management Insurance Brokers. You can check your redundancy payments are up to date by logging into WorkerLink via the Incolink smartphone app or incolink.org.au or by calling Incolink on (03) 9639 3000.

If your employer is paying the insurance premium directly via Windsor Management Insurance Brokers, contact Daniel Urzia on (03) 9320 8535.

If a period exists where no redundancy or premium contribution payments have been paid on your behalf while employed, then no cover will apply for such a period.

Gaps in redundancy contribution payments or premium contribution payments will mean no cover. Where back payments have been made after an injury and a claim is submitted, the claim will not be considered. Redundancy contributions and/or employer premium payments must be current at the time of injury.

Apprentices (under 18 years old)

Apprentice days must be recorded and current or insurance premium paid at the time of injury. These covers are provided under an Incolink Discretionary Fund and are governed by the Discretionary Guidelines.

A. Important information & exclusions

Worker

Means a worker who is currently obtaining a salary and actively working for an employer whose redundancy contribution and/or insurance premium payments and/or apprentice days are current at the time of the incident.

Continuation of cover

A worker will continue to be covered for a period of nine (9) consecutive months from the last recorded and paid redundancy contribution and/or apprentice days to Incolink provided:

- they are unemployed, and
- remain in or are actively seeking work in the rail, tram and bus industry within Australia, and
- are registered as seeking work with Incolink's Wellbeing & Support Services, Union Registry book, Centrelink, or equivalent, and
- is not an insured person who is self employed as a sole trader or a partner in a partnership or is a director, company secretary, member, shareholder or officer of a proprietary limited company.

NOTE: continuation of cover does not apply to those workers who pay the applicable insurance premium directly via Windsor Management Insurance Brokers.

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.

Claim period

The period of cover is, 1 January to 31 December each year. 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 – that is before 1 September the following year.

When am I not covered?

- If a period exists where no redundancy contribution or premium payments have been paid on your behalf whilst employed, then no cover will apply for such period.
- Gaps in redundancy contribution or premium payments will mean no cover.
- Where back payments have been made and a claim is submitted, the claim will not be considered. Redundancy contribution or premium payments must be current at the time of the incident.
- Where your employer has not paid your redundancy contributions or applicable premium at the time of your ambulance use and/or dental accident or time of death.

When does cover cease?

- If your redundancy contributions or employer premium payments made directly to Windsor Management Insurance Brokers are not current at the time of the event.
- If your apprentice days are not current at the time of the event.
- At the end of nine (9) months from the last recorded and paid redundancy contribution,
- or last recorded apprentice days, whilst a worker has been unemployed.

NOTE: Nine (9) month cover does not apply to those workers who are paying premium directly via Windsor Management Insurance Brokers.

B. Emergency Transport

Provides cover to the worker and their dependants, for ambulance usage anywhere in Australia. There are set guidelines for claiming under this section. The following is a summary of those guidelines.

Maximum amount paid

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.

What is not covered?

Cover is not available where a worker subscribes to an Ambulance service or is provided with Ambulance cover under their private health provider. That is, if you have ambulance insurance with another provider you are not covered.

No claims will be accepted:

1. If the ambulance usage is the result of an illegal act
2. If you are a health care card holder, where free ambulance cover is available.
3. If an injury or illness for which statutory insurance provides compensation.
4. For payments made in respect of an event occurring outside Australia or where a member does not remain within the territory of Australia.
5. For transport between two public hospitals.
6. For transport from a public hospital to an external diagnostic facility.
7. For transport to and from a public hospital appointment.

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.**

Damage to dentures, bridges and plates –

Damage to dentures, bridges and plates will be covered up to 10 years old. Anything above 10 years will incur a depreciation table. Dentures, bridges and 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 and plates will need to be provided and reviewed by our appointed independent dentist.

What is not covered

1. Any damage related to childbirth or pregnancy or their complications.
2. War whether declared or not, invasion or civil war, rebellion or insurrection.
3. Intentional self injury or suicide or any attempt at suicide.
4. Flying or other aerial activity unless as a passenger in a properly licensed aircraft.
5. Any damage occurring as a result of an illegal act.
6. Training for or playing in competitive club sport or activity organised by any sporting organisation, authority or club.
7. Any damage resulting from disease or sickness.
8. Any damage that is not caused by an accident.
9. Damage to filling/s only. (There must be actual damage to the tooth)
10. The use of intoxicating liquor or drugs, unless they have been prescribed by a registered medical practitioner and used as per medical instructions.

11. Any damage which has been contributed to by decay.
12. Milk teeth or first teeth.
13. Extractions to wisdom teeth.
14. Any dental work which is upgrading the tooth from the condition it was in prior to the accident.
15. Any work or motor accident for which statutory insurance or compensation scheme provides compensation.
16. Dentures, bridges or plates more than 15 years old.
17. Lost dentures, bridges or plates.
18. Any claim received will only be considered for payment if the claim is submitted to our office within 8 months of the expiry of the period of cover, as detailed above.
19. Any damage or loss which occurs whilst in prison.
20. Any dental work that is covered under your travel insurance policy.
21. Failed Treatment. This is not covered. Treatment proposed to correct failed treatment will be at the member's own expense

Claim period

The period of cover is, 1 January to 31 December each year. 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 – that is before 1 September the following year.

Conditions

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.

A. Important information & exclusions

B. Benefit

When is cover provided?

Cover is only available for those workers where the employer continues to pay the redundancy contributions or the applicable insurance premium that is paid directly via Windsor Management Insurance Brokers. You can check your redundancy payments are up to date by logging into WorkerLink via the Incolink smartphone app or incolink.org.au or by calling Incolink on (03) 9639 3000.

If your employer is paying the insurance premium directly via Windsor Management Insurance Brokers, contact Daniel Urzia on 9320 8535.

If a period exists where no redundancy or premium contribution payments have been paid on your behalf while employed, then no cover will apply for such a period. Gaps in redundancy contribution payments or premium contribution payments will mean no cover. Where back payments have been made after an injury and a claim is submitted, the claim will not be considered. Redundancy contributions and/or employer premium payments must be current at the time of injury.

Apprentices (under 18 years old)

Apprentice days must be recorded and current or insurance premium paid at the time of death.

A. Important information & exclusions

Incolink maintains a Funeral Discretionary Fund which provides funeral cover for Incolink employees in accordance with the Incolink Funeral Guidelines.

Incolink maintains a Funeral Discretionary Fund which provides funeral cover for worker members of Incolink in accordance with the Incolink Funeral Guidelines.

Worker

Means a worker who is currently obtaining a salary and actively working for a registered Incolink employer member whose redundancy contributions payments and/or apprentice days are current at the date of death or employer is also paying the premium directly to Windsor Management Insurance Brokers.

Continuation of cover

A worker will continue to be covered for a period of nine (9) consecutive months from the last recorded and paid redundancy contribution and/or apprentice days to Incolink provided:

- they are unemployed, and
- remain in or are actively seeking work in the rail, tram and bus industry within Australia, and
- are registered as seeking work with Incolink's Wellbeing & Support Department, Union Registry book, Centrelink, or equivalent, and
- are not an insured person who is self employed as a sole trader or a partner in a partnership or is a director, company secretary, member, shareholder or officer of a proprietary limited company.

NOTE: Continuation of cover does not apply to those workers who pay the applicable insurance premium directly via Windsor Management Insurance Brokers.

When am I not covered?

- If a period exists where no redundancy contribution or premium payments have been paid on your behalf whilst employed, then no cover will apply for such period.
- Gaps in redundancy contribution or premium payments will mean no cover.
- Where back payments have been made, after the date of death and a claim is submitted, the claim will not be considered. Redundancy contribution and/or premium payments must be current at the date of death.
- Where the employer has not paid the redundancy contributions or premium at the date of death.
- Where the cost of the funeral is fully recoverable from another insurer or statutory scheme such as under the Transport Accident Act 1986 (Vic.).

When does cover cease?

- Upon your 70th Birthday.
- If your redundancy contributions or premium payments are not current at the time of your death.
- If your apprentice days are not current at the time of your death.
- You commence working for an employer who is not paying redundancy contribution or premium payments.
- At the end of nine (9) months from the last recorded and paid redundancy contribution, or last recorded apprentice days, whilst a worker has been unemployed.

NOTE: Nine (9) month cover does not apply to those workers where the premium is being paid directly to Windsor Management Insurance Brokers.

B. Benefit

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

What needs to be provided when submitting a claim for Funeral Cover?

When submitting a claim form, a full certified death certificate stating the cause of death must be supplied along with proof of funeral costs paid, Probate or Letters of Administration may be required. Please contact Incolink to find out more information about the process and the relevant documentation required.

Once all the relevant paperwork is received, Incolink will collate all the relevant documentation and will then forward the claim to Total Claims Solutions for assessment and lodgement with the insurance company.

Please refer to the
Frequently Asked
Questions on
page 43.

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

- A. Important information & exclusions
- B. Leisure Time Illness – Weekly Benefits
- C. TAC Top-Up
- D. Workers Compensation Top-Up
- E. Workplace Death & Capital Benefits

When is cover in place?

Cover is only available for those workers where the employer has agreed and continues to pay the IPT premiums or the applicable insurance premium is paid directly via Windsor Management Insurance Brokers. You can check that your payments are up to date and that your employer is paying your weekly premium by logging into WorkerLink via the Incolink smartphone app, or incolink.org.au or by calling Incolink on (03) 9639 3000.

If your employer is paying the insurance premium directly via Windsor Management Insurance Brokers, contact Daniel Urzia on 9320 8535.

If a period exists where no premium payments have been paid on your behalf, then no cover will apply for such period. Gaps in premium payments will mean no cover.

Premium payments must be current at the time of illness/injury or else worker members may not be covered. Non-current premium payments will not be accepted and will be refunded.

A. Important information & exclusions

Worker

Means a worker, including an apprentice, who is currently obtaining a salary and actively working for a registered Incolink employer member and whose IPT insurance premiums payable are current at the time of illness/injury and who is paying the applicable insurance premium directly via Windsor Management Insurance Brokers.

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 commencing 1 October 2016 are less than \$18,200 per year in the 12 months immediately prior to the date of disablement, 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?

- If your insurance premiums or your direct insurance payments via Windsor Management Insurance Brokers are not current at the time of your illness/injury.
- You commence working for an employer who is not registered with Incolink who is not paying the IPT payments or the insurance premium payments direct to Windsor Management Insurance Brokers.
- You are unemployed at the time of your illness/injury.

What is not covered?

A claim will not be paid if it directly or indirectly arises from any of the following:

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 or non professional sport, or activity organised by any sporting organisation, authority, club or centre.
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. Any medical condition for which the worker has required medication, or any treatment or advice from a doctor, chiropractor or physiotherapist in the six months before:
 - the commencement of the worker's cover, or
 - the resumption of the worker's cover following a period of at least six (6) consecutive months for which no redundancy and or premium pay contributions has been paid.
10. 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

We may also be entitled to refuse to pay or to reduce the amount of a claim if:

- It is in any way fraudulent.
- Fraudulent means or devices are used by you, or anyone acting on your behalf to obtain any benefits under this Policy.

B. Leisure Time Illness – Weekly Benefits

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

- must occur 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.

When do payments commence?

Once the claim has been accepted, 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.

Payment period

Weekly benefits are paid (up to a maximum of 156 weeks) whilst a worker continues to suffer disablement and is unable to return to their occupation as a result of the illness. Where a worker is over 65 years old at the time of illness, the benefits period is limited to 104 weeks.

Weekly Benefits payable

Where the employer is paying IPT premiums, or the applicable insurance premium directly to Windsor Management Insurance Brokers the gross weekly benefits are as follows:

	WEEKLY BENEFIT
With dependants	\$1,450
Without dependants	\$1,300
Apprentices with dependants	\$1,050
Apprentices without dependants	\$950

Weekly benefit will be increased from the 53rd week by 5%, whilst a worker continues to suffer total disablement as a result of the claimed Leisure Time illness.

Any disablement must occur within 12 months from the date of illness.

Please refer to the Frequently Asked Questions on page 43.

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.

The worker will be paid top up benefits being 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 \$1,500 (gross) per week.

Benefit payable period

Top-up benefits will continue to be paid (up to a maximum of 104 weeks) whilst a worker continues to suffer disablement, is unable to return to their occupation as a result of the injury and receives loss of income benefits from a statutory transport accident scheme.

Example 1

John catches a tram to work every day. While on a tram to work, the tram is involved in a traffic accident with a car driven by Peter, causing John to suffer a compensatory injury. John's claim for loss of earning is accepted.

- John's actual weekly earning prior to the accident is \$1,600 per week.
- However the TAC determined that his pre-injury earning is \$1,400 per week.
- John's weekly benefit paid by the TAC is \$1,260.
- The difference between John's pre-injury earning (as calculated by the TAC = \$1,400) and his weekly benefit (as paid by the TAC = \$1,260) is \$140.
- Under the TAC Top-Up John will be paid gross \$140 per week.

Example 2

Peter who was driving his registered car and was on his way to work at the time also suffered a compensatory injury. Peter's claim for loss of earning is accepted by TAC.

- Peter's actual weekly earning prior to the accident is \$1,750 per week.
- However the TAC determined that his pre-injury earning is \$1,700 per week.
- Peter's weekly benefit paid by the TAC is also \$1,260.
- The difference between Peter's pre-injury earning (as calculated by the TAC = \$1,700) and his weekly benefit (as paid by the TAC = \$1,260) is \$440.
- Under the TAC Top-Up Peter will be paid \$240 per week and not \$440. This is because the top up is capped at a combined maximum of \$1,500.

Please refer to the
Frequently Asked
Questions on
page 43.

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.

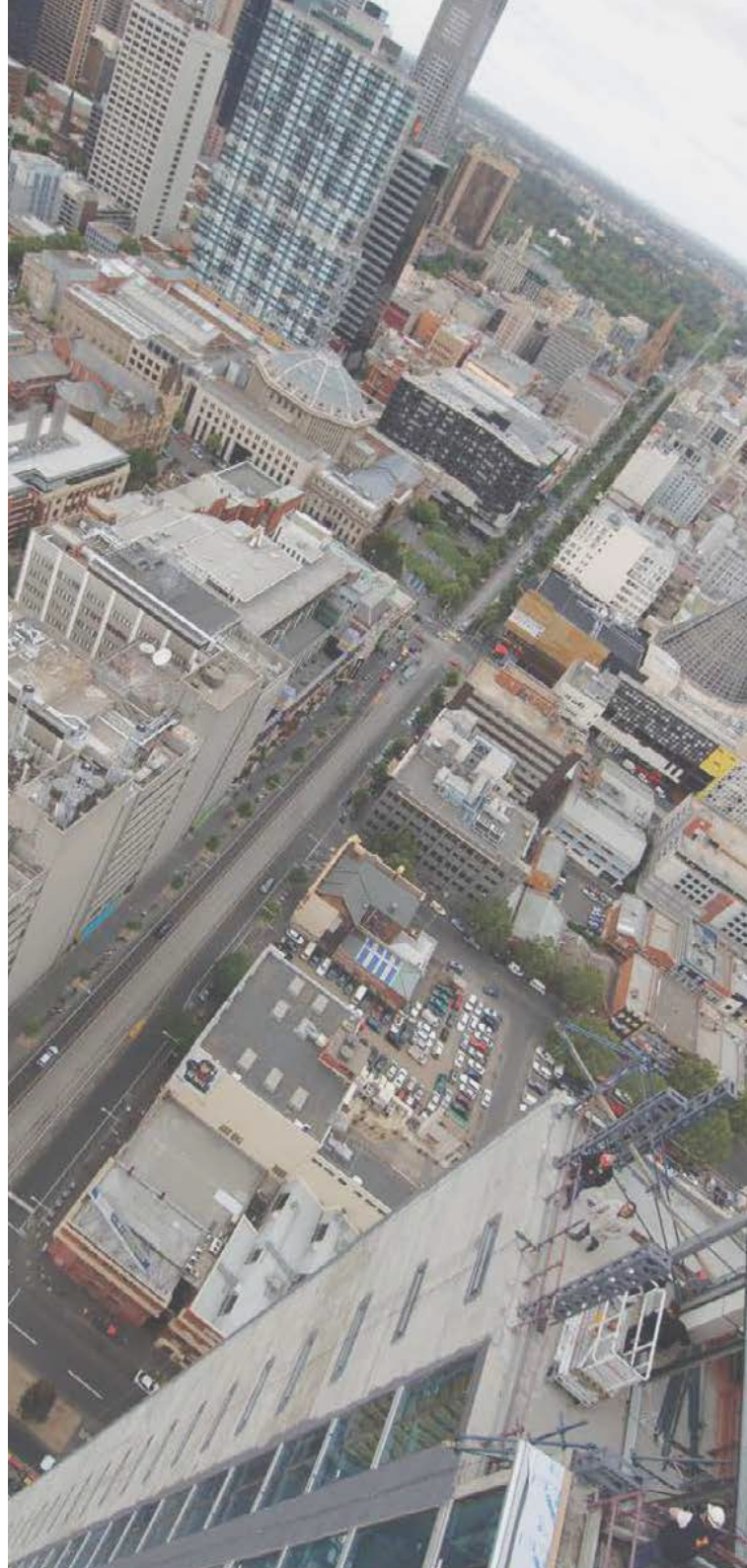
The worker will be paid a top-up being the difference of what gross payment WorkCover is paying and your gross pre-injury earnings, determined by WorkCover at the time of calculating the worker's benefit from week 53, to a combined maximum of \$1,500 (gross) per week.

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 *Additional benefit Child Care Assistance (Accidental Death)	\$400,000	\$200,000
2	Permanent quadriplegia	\$400,000	\$200,000
3	Permanent paraplegia	\$400,000	\$200,000
4	Permanent and incurable paralysis of all limbs	\$400,000	\$200,000
5	Third degree burns which cover more than 50% of the entire body	\$200,000	\$100,000
6	Permanent total loss of sight in one/both eyes	\$400,000	\$200,000
7	Permanent total loss of the hearing in both ears	\$250,000	\$150,000
8	Permanent total loss of lens of the one eye	\$100,000	\$50,000
9	Permanent total loss of the hearing in one ear	\$100,000	\$50,000
Permanent total loss of the use of:			
10	Both hands	\$400,000	\$200,000
11	Both arms	\$400,000	\$200,000
12	Both feet	\$400,000	\$200,000
13	Both legs	\$400,000	\$200,000
14	One hand and one foot	\$400,000	\$200,000
15	One hand or one arm	\$200,000	\$100,000
16	One foot or one leg	\$200,000	\$100,000
17	Four fingers and one thumb	\$150,000	\$75,000

CAPITAL BENEFITS TABLE PAYABLE CONDITION – AN INJURY RESULTING IN		WORKER WITH DEPENDANTS	WORKER WITHOUT DEPENDANTS
18	Both joints of one thumb	\$60,000	\$30,000
19	One joint of one thumb	\$30,000	\$15,000
20	Three joints of one finger	\$30,000	\$15,000
21	Two joints of one finger	\$20,000	\$10,000
22	One joint of one finger	\$10,000	\$5,000
23	All toes of one foot	\$30,000	\$15,000
24	Great toe – both joints	\$15,000	\$7,500
25	Great toe – one joint	\$10,000	\$5,000
26	Each toe other than great	\$10,000	\$5,000
Other conditions:			
27	Fractured leg or patella with established non-union	\$20,000	\$10,000
28	Third degree burn which covers between 20% and 49% of the entire body	\$100,000	\$50,000
29	Loss of at least 50% of all sound and natural teeth including capped or crown teeth – per tooth	\$2,500	\$1,500
30	Permanent impairment which is not a Payable condition within the meaning of 1 to 29 and for which compensation is paid under section 98C or 98E of the Accident Compensation Act (Vic) 1958	10% of the payment of compensation under section 98C or 98E of the Accident Compensation Act (Vic) 1958 up to \$50,000	5% of the payment of compensation under section 98C or 98E of the Accident Compensation Act (Vic) 1958 up to \$25,000





Total Claims Solutions

Level 1, 151 Rathdowne Street
Carlton Victoria 3053
(03) 9320 8588

totalclaims.com.au

Dedicated claims team looking after you.

Should you wish to discuss your cover or require assistance with making a claim, please contact Windsor Management Insurance Broker on (03) 9663 2411.

Total Claims Solutions Pty Ltd ABN 42 389 515 023 is acting as Claims Manager on behalf of QBE Insurance (Australia) Limited ABN 780 0319 1035.

Incolink worker members may be eligible to lodge an insurance claim under Incolink's Accident and Illness Benefits program.*

Step 1 – Request a claim form

If you believe you may have suffered an injury or illness that may result in an insurance claim, contact Incolink **(03) 9639 3000** or where your employer is paying the applicable premium directly via Windsor Management Insurance Brokers, contact Total Claims Solutions **(03) 9663 2411**.

Alternatively, to download the appropriate insurance claim form visit:

Incolink
incolink.org.au

Total Claims Solutions
totalclaims.com.au

Step 2 – Filling in the Incolink Insurance claim form

Complete all sections of the claim form in FULL.

To support your claim, please include copies of medical report/s, discharge summary, patient notes, radiologist's reports and any other relevant information.

Proof of dependency will also need to be submitted if requested on the claim form to determine your weekly benefits.

Step 3 – Lodging your claim

Once completed, send the claim form to:

Total Claims Solutions
Level 1, 151 Rathdowne Street
CARLTON VIC 3053

Ensure you double-check that ALL sections of the claim form have been completed correctly before sending. Incomplete claim forms will delay the assessment of the claim.

Step 4 – Receiving the claim

Your claim will be assigned to a Total Claims Solutions case manager who will contact you to discuss your claim.

PLEASE NOTE

Cover is only available for those workers where the employer continues to pay the relevant premium and/or contributions. If a period exists where no premium and/or contribution has been paid on a workers behalf while employed, then no cover will apply for that period. This also applies where there are gaps in the premiums or contribution payments.

Q Who will assess my insurance claim?

A Total Claims Solutions, who are appointed as claims managers of the insurance company, are responsible for managing all claims.

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 given, anything which might 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 and the time taken to receive requested reports. Delays will also occur where the forms have not been completed in full.

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 days before claiming?

A No.

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

Leisure Time Injury/Journey & Leisure Time Illness

Weekly benefits are only payable for a maximum period of 156 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. Limited to 104 weeks if aged 65 at time of injury/illness.

TAC Top Up Benefits

Top up benefits are only payable for a maximum period of 104 weeks whilst deemed medically unfit to work as a result of your injury or such lesser period whilst you are unable to return to work, and you are receiving weekly benefits from a statutory transport accident scheme.

WorkCover Top Up Benefits

Top up benefits are only payable for a maximum period of 78 weeks whilst deemed medically unfit to work as a result of your injury or such lesser period whilst you are unable to return to work and you are receiving weekly benefits from a statutory workers compensation scheme.

Q: Is tax taken out of my weekly payments from the claim?

A All payments made before 14 November 2016 were gross as shown on the remittance advice and tax was not deducted. These payments are taxable and should be included in your tax return. From 14 November 2016, QBE will withhold tax from weekly payments as requested by the ATO. At the end of the financial year, you will receive a Payment Summary which will show all payments and tax withheld for the year. If you need help with this, please contact your accountant, financial advisor or the ATO on 13 28 61.

Q Where do I get a claim form?

A Contact Total Claims Solutions on (03) 9663 2411 for a claim form to be sent or download the claim forms from the following websites:

Incolink – incolink.org.au

Total Claims Solutions – totalclaims.com.au

Q Once my claim assessment is completed and 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 treatments 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.

Q How can I check that my redundancy and/or IPT premiums are being paid on my behalf and are current?

A You can check that your payments are up to date by logging into WorkerLink via the Incolink smartphone app, or incolink.org.au or by calling Incolink on (03) 9639 3000.

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 If my employer is paying my insurance premium directly via Windsor Management Insurance Brokers, how do I check that there payments are current?

A Contact Daniel Urzia on (03) 9320 8535 or DUrzia@wmib.com.au

Q What should I do to ensure I have ongoing cover?

A You can check that your payments are up to date by logging into WorkLink via the Incolink smartphone app, or Incolink.org.au or by calling Incolink on (03) 9639 3000. or If your employer is paying the insurance premium directly via Windsor Management Insurance Brokers contact Daniel Urzia on (03) 9320 8535 or DUrzia@wmib.com.au

Q If my employer is paying my insurance premiums directly via Windsor Management Insurance Brokers, who can I contact to explain the insurance covers?

A Contact Daniel Urzia on (03) 9320 8535 or DUrzia@wmib.com.au

If your employer is paying premium directly to Windsor Management Insurance Brokers, ring _____

Q What should I do to ensure I have ongoing cover?

A You can check your redundancy and/or IPT payments made directly to Incolink are up to date by logging into WorkerLink via the Incolink smartphone app, or incolink.org.au or by calling Incolink on (03) 9639 3000. By contacting Incolink of any change in your personal circumstances you can keep up to date with changes in your cover.

Q What is the Internal Dispute Resolution process?

A If you have any concerns about your claim please put your reasons for dispute in writing and we will review your file. All disputes will be reviewed internally by Total Claims Solutions' Technical Advisor. If you disagree with the decision, you can request the matter to be further considered by QBE Insurance (Australia) Limited's Internal Disputes Resolution Team, if applicable. Please contact us for a brochure that sets out this process.

If you are unable to resolve your dispute you can contact the Australian Financial Complaints Authority (AFCA) on 1800 931 678 between 9am–5pm AEST/ AEDT weekdays or email info@afca.org.au.

All matters relating to Discretionary Covers – Ambulance and Dental, will be referred to Windsor Management Insurance Brokers' Responsible Manager. Discretionary Cover – Funeral, will be referred to Incolink.

Q Who can I talk to if I need help in filling out the claim form?

A Ask to speak to one of the case managers at Total Claims Solutions, by:
(03) 9663 2411
totalclaims@totalclaims.com.au

Q Who are my Incolink Industry Liaison Officers?

Russell Wilson
Phone: 0408 607 737
Email: russellw@incolink.org.au

Tony Cordier
Phone: 0448 870 225
Email: tonyc@incolink.org.au

Note: Only available for workers where their employer is making Incolink redundancy contributions on their behalf. Not available for those workers whose Employer is making premium contributions directly to Windsor Management Insurance Brokers.

For all enquiries about
the information supplied
in this brochure, please call:



WINDSOR
MANAGEMENT
INSURANCE BROKERS

Windsor Management Insurance Brokers

Level 1, 151 Rathdowne Street
Carlton Victoria 3053
(03) 9663 2411
wmib.com.au

For all claims enquiries,
or to request a claim form,
please call:



Total Claims
SOLUTIONS

Total Claims Solutions

Level 1, 151 Rathdowne Street
Carlton Victoria 3053
(03) 9320 8588
totalclaims.com.au