



Information Bulletin – Comcover Statement of Cover 2017-18

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Comcover Statement of Cover 2017-18 – Expatriate Changes

Key changes to the *Comcover Statement of Cover 2017-18* (the Statement of Cover) take effect on 1 October 2017 and supersede the *Comcover Statement of Cover 2017-18* issued on 1 July 2017. It is important that you, as the Fund Member, carefully read the Statement of Cover and understand the changes that may affect the level and extent of your cover.

The Statement of Cover is a statement of the policy under which Comcover manages and settles claims for funding losses on behalf of Fund Members and the Commonwealth more generally.

Changes to the Statement of Cover from 1 October 2017 relate to section 16, Expatriate. A change was also made to section 3 Conditions of Cover to reflect the updated terms and conditions in section 16.

Notable changes in the *Comcover Statement of Cover 2017-18* include:

CHAPTER 1 – PREAMBLE

3. Conditions of Cover

- 3(3)(h) Deleted “*and notification to Comcover of any pre-existing conditions prior to deployment*”. This section now recognises the option from 1 October 2017 for a Fund Member to take up supplementary cover for the pre-existing conditions of expatriates. This change also reflects that where a Fund Member has elected to not take out supplementary cover, the Fund Member is no longer able to apply to Comcover for consideration of coverage of a pre-existing condition(s) for an individual expatriate.

CHAPTER 6 – PERSONAL ACCIDENT AND TRAVEL

16. Expatriate

- 16(1) Deleted “*less any excess shown on your Schedule of Cover, up to a maximum of 12 months per loss or claim from the date of first treatment*”. This change recognises the excess of \$50 and 12 month cap on the approval of an expatriate’s claimed expenses being removed and applies to expatriate claims from 1 October 2017. Schedules of Cover will be updated to reflect the changes.

16(4)(g) Deleted “*not reviewed and agreed to by Comcover prior to deployment*”. This change recognises that approval is no longer required to accept liability for a pre-existing condition, provided the Fund Member has opted in for supplementary cover.

Added Note 16 “*This exclusion does not apply when **you** have elected to receive supplementary pre-existing condition Expatriate cover and is noted on **your Schedule of Cover***” has been added to recognise the exclusion of expenses resulting from pre-existing conditions will still apply to Fund Members that did not elect to take expatriate supplementary cover.

The words “*but does not include prescription spectacles and contact lenses*” have been added to the end of 16(4)(g) to confirm Comcover’s practice in covering the costs of prescription spectacles and contact lenses for all Fund Members.

As usual, Fund Members should note this summary of changes is not definitive and decisions relating to coverage of an expatriate’s claim will depend on the wording of the Fund Member’s Schedule of Cover and the expatriate claimant’s specific circumstances.

If you require any further information, please contact the Expatriate Team at expat@finance.gov.au