



**EMERGENCY  
SERVICES  
HEALTH**

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## Three Important Policies

- › Privacy Policy
- › Cooling Off Period Policy
- › Complaints Policy

**( MEMBERS OWN )**  
HEALTH FUND

# Privacy Policy

## Background

Emergency Services Health's primary purpose for collecting information is to conduct a health insurance business and any health related business, including the provision of goods and services either directly or through a third party.

At Emergency Services Health, we are committed to maintaining the privacy of individuals whose information we collect in accordance with the Australian Privacy Principles (APPs) contained in the *Privacy Act 1988*. Emergency Services Health aims to manage personal information that it collects in an open and transparent way. This Privacy Policy describes how we manage personal information. If you have any queries about the Policy or the manner in which personal information is managed, you may contact Emergency Services Health for further information (contact details appear at the end of this Policy).

Police Health Limited (Police Health) has been contracted to manage the operations of Emergency Services Health. Police Health will manage the collection, use and disclosure of personal information on behalf of Emergency Services Health in accordance with the privacy policy of Emergency Services Health.

## Collecting and holding personal information

Emergency Services Health collects and holds personal information about people insured or interested in becoming insured under a health insurance policy, providers of health services, suppliers, contractors, people attending functions or events and other contacts to conduct our activities, understand and meet stakeholder needs and meet our legal obligations. If you do not provide us with the information we ask for, we may not be able to perform these activities and functions, in particular relating to applications for health insurance cover, administering health insurance policies, providing relevant services, assessing and paying claims and meeting statutory reporting requirements.

An individual may deal anonymously with us when seeking general information about Emergency Services Health and its products. It is not practicable for individuals not to identify themselves or to use a pseudonym when dealing with

Emergency Services Health in relation to the health insurance or claims.

Emergency Services Health will collect and hold the minimum personal information required to perform its functions and activities. This information may include:

- › Contact and identity information, such as names, addresses, age, gender, employment details, government identifiers, passwords, telephone, mobile and facsimile numbers and email addresses.
- › Financial information, such as premiums, Australian Government Rebate on private health insurance tier level, bank account details, and employment details.
- › Sensitive information, such as information about claims, health services provided to you and your health.
- › Correspondence or correspondence details, verbal and written, hard copy or electronic.

Where possible, the information is collected from you, from a person or organisation authorised to provide the information on your behalf or from another person insured on your health insurance policy. Information may also be collected from government agencies, business partners, contractors, employers, other private health insurers, other insurers and service providers.

In particular, when you make a claim, you consent to Emergency Services Health collecting sensitive (health) information directly from third parties, or if the information relates to someone other than you on the health insurance policy, you give consent on behalf of that person and you must be authorised to do so.

Where you receive treatment at or by a hospital, our contracted third party, the Australian Health Service Alliance ([www.ahsa.com.au](http://www.ahsa.com.au)) collects personal information about your claim to assist us in assessing and paying your claim and assisting us in meeting our statutory reporting requirements.

Personal information may be collected from a person acting on behalf of the insured person or from an organisation or person when authorised by a person acting on behalf of the insured person. The circumstances of this collection usually relate to an application for a health insurance policy, amendments or additions to a health insurance policy, amendments or changes to personal details and when making claims under a health insurance policy.

Information may be collected by Emergency Services Health by voice, electronically or in hard copy and is stored by Emergency Services Health either electronically, in hard copy or both electronically and in hard copy.

HAMB Systems Ltd supports our membership management and claims processing system by the provision of software and hosting services. Personal information is held on systems hosted by HAMB Systems Ltd at its sites. Third party suppliers host voice recordings and related material. These and other service providers that host personal information are subject to the Privacy Act, and agreements ensure the integrity and security of personal information and management of the information in accordance with the Privacy Policy of Emergency Services Health and the Australian Privacy Principles.

Emergency Services Health collects personal information on a recurring basis, in particular relating to managing your health insurance with us and when making a claim. This is your notification that Emergency Services Health will collect your personal information on a recurring basis. When you or your authorized representative interact with us and when you receive treatment for which a claim is made on your health insurance policy, it is reasonable for you to expect that Emergency Services Health will collect your personal information.

If you are the Contributor of a health insurance policy with Emergency Services Health, you are responsible for ensuring that every person on the health insurance policy is aware of Emergency Services Health's Privacy Policy, particularly as it relates to the collection, holding, use and disclosure of their personal information for the purposes of their cover and verifying that appropriate benefits are paid. Where you provide personal information to us about another person on the health insurance policy, you must be authorised to do so.

If you are not the Contributor of a health insurance policy with Emergency Services Health, but are making a claim, or otherwise providing personal information, on behalf of another insured person, you must be authorized to do so.

If you or any other person on your health insurance policy does not consent to the collection and the way we use and disclose personal information, we may not be able to provide you with cover.

## Use of personal information

Personal information is used for a number of reasons such as:

- › Administering the private health insurance fund and your private health insurance policy. This includes providing a billing and claims payment service involving assessment, processing, control, auditing, benefit review, research and system maintenance and undertaking related regulatory requirements such as Contributor communication and reporting.
- › Enabling Emergency Services Health to comply with legislative requirements for the collection of and submission of data to Government agencies.
- › Developing and providing products and services.
- › Communicating with you general information about Emergency Services Health, the health insurance industry, health and well being or other material which we consider may be of interest to you.
- › Advising you of direct marketing offers, such as products and services provided by Emergency Services Health or on its behalf, which we consider may be of interest to you. Direct marketing material may be brought to your attention by various means and includes being sent to you through electronic communications such as email or text message. This is your consent to receive marketing material for an indefinite period. If you do not want to receive direct marketing material or offers, you can withdraw your consent by contacting us.
- › Resolving business or legal matters, issues or complaints.
- › Purchasing or providing health or health related services on your behalf, including membership of organisations.
- › Part of the security protocols used by staff of Emergency Services Health to confirm the identity of the person being dealt with.
- › Undertaking surveys to improve our products and services.

- › Identifying persons that may benefit from risk management, health management and disease management programs and, where the person has consented or the person would reasonably expect Emergency Services Health to do so, for the provision of these health programs.
- › Perform any other functions or activities.

Emergency Services Health's functions and activities and its range of products and services may change from time to time.

### Disclosure of personal information

Emergency Services Health may disclose your personal information (including sensitive health information) to other individuals on your health insurance policy for administering the policy, including for the payment of benefits. As the Contributor is the holder of the health insurance policy, we disclose all personal information about all insured persons on the policy to the Contributor, including details of all benefits and services claimed on the policy. We send all communications on health insurance policies, including those that cover more than one person, to the address supplied by the Contributor. In addition, at the time of joining Emergency Services Health, the Contributor authorises Emergency Services Health to share personal information amongst individuals on the health insurance policy.

A person over the age of 14 years may request to have their sensitive information kept private from other persons insured on the policy. Emergency Services Health will endeavour to keep the information private, but will be obliged to disclose information on request by the Contributor of the insurance policy, or a parent or guardian of the person. If any insured person aged 18 years or older wants to guarantee that their personal information (in particular sensitive information) is not disclosed to other persons on the health insurance policy, they will need to purchase their own health insurance policy.

Emergency Services Health may need to disclose personal information to various organisations such as:

- › Government agencies, including Medicare, Private Health Insurance Ombudsman, the Department of Health and the Australian Prudential Regulation Authority;

- › Other private health insurers or other health insurance industry bodies;
- › Health service providers;
- › Professional advisers.
- › Persons or organisations authorised by you (this includes other people covered under the same health insurance policy) and your agents and advisers;
- › Insurers or legal representatives of insurers, or statutory authorities such as WorkCover, in relation to claims made for damages or compensation for motor vehicle or other accidents or workers compensation.
- › Organisations contracted by Emergency Services Health to assist in the delivery of our functions and services. This includes our contracted third party agents such as the Australian Health Service Alliance Ltd (Note: From time to time, we disclose personal information to the Australian Health Service Alliance who provides clinical, classification and contract support in order to assist us with correctly assessing a claim for payment and to identify persons who could potentially benefit from a chronic disease management program), organisations that provide mail out services, organisations for security purposes, organisations that support our voice recording infrastructure and organisations that supply and support our information technology infrastructure;
- › To business partners who provide services direct to you on our behalf or business partners from which we purchase services on your behalf and this includes organisations that results in you also becoming their client and/or member (note: this may involve the retention of disclosed personal information by the business partner to deliver their services to you);
- › Payment system operators and financial institutions;
- › Your employer; and/or
- › Other parties to whom we are authorised or required by law to disclose information, such as auditors and actuaries.

Emergency Services Health will not sell your contact details or add your contact details to mailing lists of third parties unrelated to your health insurance policy without your prior consent. Emergency Services Health will require that business partners and contractors comply with the Australian Privacy Principles.

Emergency Services Health is not likely to disclose your personal information to overseas recipients.

## Security

Emergency Services Health takes all reasonable steps to ensure that your personal information is kept secure and protect your information from misuse, loss and unauthorized access, modification or disclosure. Paper documents are protected from unauthorized access through the application of a security system at our premises. Computer and network security systems include, amongst other things, the use of firewalls, encryption technology and password protection.

## Emergency Services Health Internet website and electronic exchanges

When you visit the Emergency Services Health website, a record of your browser, devices used to access the website, location, IP Address, cookies and such similar related information is made.

Emergency Services Health uses persistent and session cookies to store information entered into the website. This information is stored on your browser until it's closed. Information is securely transferred by encryption protocols (SSL) to our server and exists within memory for the duration of the HTTP request and associated response, upon which it is removed. Certain aspects of the Emergency Services website are not accessible to users with cookies disabled.

You acknowledge that the Internet is not a secure environment. Emergency Services Health cannot guarantee the security of information you send and receive by electronic means, and hence electronic exchanges are undertaken at your own risk.

Emergency Services Health provides links to third party sites, and third party applets for social media sharing. These sites are not under the control of Emergency Services Health and hence Emergency Services Health is not responsible for any practices by these third parties that may breach your privacy.

Emergency Services Health encourages you to review the privacy policies of these third parties.

Use and access of the Emergency Services Health website must be in accordance with the terms and conditions published on the website.

Emergency Services Health provides Contributors with access to Online Member Services in accordance with the published terms and conditions.

## Correcting, updating and accessing personal information

Subject to any legislation, an individual has a right to request reasonable access to their personal information and to request its correction. Generally, obtaining access, updating and correcting your personal information is undertaken by our Customer Services Officers using one of the points of contacts listed further below.

Depending on the information and how it is stored, information may be viewed at Emergency Services Health, accessed through the Online Member Service or sent to the requestor. Emergency Services Health reserves the right to charge an administration fee for the provision of the information to cover costs incurred.

Emergency Services Health has the right to withhold the release of personal information in certain circumstances.

The accuracy of your personal information is important to us. If you believe that any personal information is not accurate, complete or up to date, Emergency Services Health should be advised in writing as soon as practicable.

## Complaints

Questions about Emergency Services Health's Privacy Policy and privacy practices, requests for access and correction of personal information that you believe have not been addressed or complaints about a possible breach of privacy should be directed to the Privacy Officer using the contact details listed below.

## Contact details for Emergency Services Health

- > Postal Address: PO Box 6012, Adelaide SA 5001

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- > Phone number: 1300 703 703

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- > Facsimile number: 1300 151 152

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- > Email address: enquiries@eshealth.com.au

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## Information about Privacy

Information about privacy, including links to the *Privacy Act 1988* and the Australian Privacy Principles can be found on the Website of the Office of the Australian Information Commissioner [www.oaic.gov.au](http://www.oaic.gov.au).

## Privacy Policy changes

From time to time, Emergency Services Health may modify this Policy. Where this occurs we will publish the new Privacy Policy on our website [www.eshealth.com.au](http://www.eshealth.com.au)

## Policy Administration

- › Date Policy Approved: 21 September 2016
- › Policy Review Date: 30 September 2019
- › Oversight Responsibility: Risk Management and Compliance Committee

# Cooling Off Period Policy

## 1. Preface

To ensure prudent administration, risk management and governance, Emergency Services Health maintains a register of approved policies.

These policies are reviewed regularly, but not later than the review date specified in this policy.

## 2. Definitions

**Contributor** means the person registered as the Contributor for a health insurance policy, and who is responsible for payment of premiums of the policy.

**Cooling off period** is the first thirty calendar days following the commencement date of joining the Emergency Services Health fund (new policy) or the first thirty calendar days following the commencement date of a change in the level of private health insurance cover (cover change).

## 3. Introduction

This policy provides guidance to:

- › The rights and responsibilities of a Contributor during the **cooling off period** and
- › Employees when handling a request for a contribution refund during the **cooling off period**.

Understanding of and adherence to this policy will:

- › Increase the level of customer satisfaction regarding the delivery of products and services;
- › Recognise, promote and protect the insured person's rights, including the right to comment and complain;
- › Provide an efficient, fair and accessible process for handling a request for a premium refund during the **cooling off period**.

## 4. Policy

Emergency Services Health will provide to any new Contributor of a new policy or existing Contributor changing their level of health insurance cover a **cooling off period**, provided the following requirements are met:

(1) The request to cancel the new policy or to cancel the cover change to an existing policy is received in writing within 30 calendar days of the commencement of the new policy or cover change; and

(2) There has been no benefits paid under the new policy or benefits paid which are related to the cover change.

Where a new Contributor meets the above requirements, Emergency Services Health will refund to the Contributor, in full, any premiums paid without penalty.

Where an existing Contributor has changed their level of health insurance cover and meets the above requirements, Emergency Services Health will either:

(1) Where the premium rate is higher, return the Contributor to their previous cover and either refund the Contributor, in full, the additional premiums paid, or advance the paid to date of the policy to the equivalent amount; or

(2) Where the premium rate is lower, return the Contributor to the previous cover so long as the Contributor pays any additional premiums to bring the policy up to date.

Where the *cooling off period* is applied to a Contributor who changes their level of health insurance cover and then is returned to their previous cover under the application of the *cooling off period*, the Contributor will be treated as if their policy has been continuous of the previous cover, without loss of entitlements.

## 5. Policy Administration

- › Date Policy Approved: 1 September 2016
- › Policy Review Date: 30 September 2019

# Complaints Policy

## 1. Preface

To ensure prudent administration, risk management and governance, Emergency Services Health maintains a register of approved policies.

These policies are reviewed regularly, but not later than the review date specified in this policy.

## 2. Definitions

**Complainant** means a Contributor, dependent, provider or any third party making a complaint.

**Complaint** means an expression of dissatisfaction about a product, advice or service offered or provided, where a response or resolution is explicitly or implicitly expected.

**Contributor** means the person registered as the Contributor for a health insurance policy, and who is responsible for payment of premiums of the policy.

## 3. Introduction

This policy is used as a guideline for employees when handling problems, grievances and disputes. Adherence to this policy will:

- › enhance customer satisfaction by creating a customer-focused environment;
- › recognise and address the needs and expectations of complainants;
- › provide an open, effective and easy-to-use complaints process;
- › ensure review of the effectiveness and efficiency of the complaints-handling process; and
- › enable analysis and evaluation of complaints to improve the product and customer service quality.

## 4. Policy

### 4.1 Commitment

Emergency Services Health understands and recognises the right to complain and is committed to enhancing its reputation through improving the quality of its products, services and processes.

## 4.2 Fairness

Emergency Services Health's complaints-handling process recognises the need to be fair to both the complainant and any third party or person against whom the complaint is made. The complainant has the right to:

- › be heard;
- › know whether Emergency Services Health's relevant product and service guidelines have been followed;
- › provide and request all relevant material to support the complaint provided this does not breach privacy requirements or any law;
- › be informed of the response to their complaint:
- › be informed of Emergency Services Health's decision and the reason for this decision; and
- › know that their complaint is being reviewed independently, where appropriate.

Emergency Services Health or the person about whom the complaint is made has the right to:

- › collect sufficient information about the complaint to enable a thorough investigation of the complaint; and
- › be informed of the decision and the reasons for the decision.

## 4.3 Resources

Employees are an important resource in the complaints-handling process. Emergency Services Health will ensure employees are adequately trained and provided with sufficient support to handle complaints appropriately.

New employees undergo initial training in Emergency Services Health's complaints-handling process as part of their induction process. Emergency Services Health regularly reinforces and updates training as required.

Emergency Services Health will maintain a comprehensive system that will allow for the efficient recording, tracking, monitoring and reporting of all complaints.

## 4.4 Visibility

Emergency Services Health acknowledges that information on how and where to complain should be well publicised. This policy will be promoted internally for employees and

externally for Contributors, dependents, providers and other third parties. This policy will be promoted in written material and on the Emergency Services Health website.

## 4.5 Access

A complaint may be made by:

- › Calling a Customer Service Officer on 1300 703 703.
- › Email to [enquiries@eshealth.com.au](mailto:enquiries@eshealth.com.au)
- › Facsimile message to 1300 151 152.
- › Post to Emergency Services Health, PO Box 6012, Adelaide, SA, 5000.

Customer Service Officers are trained and have authority to deal with general complaints and will attempt to resolve the complaint immediately. If the complaint cannot be resolved, further information may be sought and/or the complaint may be referred to more senior personnel. The complainant will be advised of the escalation process.

Should the complainant not be satisfied with the response, the complainant can provide additional information and request a review.

Where the complainant is not satisfied with the outcome, the complainant may refer the matter to the Private Health Insurance Ombudsman.

## 4.6 Assistance

Emergency Services Health endeavours to resolve complaints by appropriately addressing an individual's particular needs. Emergency Services Health will engage specialist services appropriate to the individual to achieve a satisfactory resolution for all parties e.g. language or interpreting services.

## 4.7 Responsiveness

Where a complaint is not immediately resolved, Emergency Services Health will:

- › for email complaints, acknowledge the complaint within 24 hours (standard business week) of receipt of the complaint and outline the complaints-handling process and endeavour to resolve the complaint within 5 business days;

- › for written complaints received by facsimile or post, acknowledge the complaint within 5 business days of the complaint and outline the complaints-handling process;
- › contact the complainant on a regular basis, commensurate with the nature of the complaint, until the complaint is satisfactorily resolved; and
- › where the complaint is referred or escalated during the process of resolution, the complainant will be informed.

#### 4.8 Charges

Access to the complaints-handling process is generally free of charge to the complainant, but Emergency Services Health reserves the right to recoup administrative costs incurred where it is determined that Emergency Services Health was not at fault. Any potential recouped costs must be discussed and agreed with the complainant before costs are incurred.

#### 4.9 Remedies

Emergency Services Health will provide a fair and reasonable remedy for each complaint. The remedy may include:

- › an explanation;
- › a claim adjustment where an error was made in the payment of a benefit;
- › a premium refund where an error was made in applying a premium payment;
- › a written or verbal apology where an error was made or service standard not met;
- › the provision of information such as the clarification of benefit entitlements;
- › an ex-gratia payment that Emergency Services Health determines is appropriate given the unique circumstances; or
- › any other appropriate remedy not covered above that will result in the satisfactory resolution of a complaint.

#### 4.10 Data Collection

A communication system captures information about each interaction with Contributors, dependents, providers and any other third parties including complaints. Each complaint is recorded in the Communications Register and,

as a consequence, data is collected and stored to enable the handling of the complaint and to allow monitoring of performance.

#### 4.11 Systematic and Recurring Problems

Emergency Services Health is committed to continually monitoring its performance in handling complaints to ensure organisational objectives are met. Any identified systemic and recurring problems will be addressed through appropriate action.

#### 4.12 Accountability

Emergency Services Health's employees have been trained to handle complaints and accept responsibility for effective complaints handling. Employees will receive feedback on the outcomes of complaints with the aim of improving customer satisfaction and service.

#### 4.13 Review

Managers will review records of complaints received to ensure that a satisfactory solution to the complaint was reached and will review the complaints-handling process at least annually to ensure that it is delivering fair and reasonable outcomes.

#### 4.14 Complaints Handling Procedure

All complaints, both oral and written, will be recorded in Emergency Services Health's Communications Register. All employees receiving a complaint will recognise and acknowledge a person's right to comment and/or complain.

#### Oral Complaints

The steps in processing an oral complaint include:

- › the Customer Service Officer clearly identifying themselves, listening and empathising with the complainant in a courteous manner and determining what the complainant wants;
- › the Customer Service Officer confirming the details received and endeavouring to resolve the complaint;
- › where the information is insufficient to resolve the complaint, seeking further information and resolving the complaint;
- › where the complaint cannot be resolved, reaching agreement on alternative courses of action, including

referral to more senior personnel, without creating expectations;

- › recording the details of the complaint in Emergency Services Health's Communications Register;
- › the referee seeking further information (orally or in writing) to resolve the complaint if required and aiming to ensure that the complaint is resolved or agreement reached on alternative courses of action, including referral to external dispute resolution processes, such as the Private Health Insurance Ombudsman;
- › the complainant being kept informed of the progress of the complaint;
- › providing acknowledgement of any resolution and or information given in writing if requested; and/or
- › following up as appropriate and monitoring to ensure the complainant remains satisfied as well as receiving feedback.

#### Written Complaints

The steps in processing a written complaint include:

- › the Customer Service Officer contacting the complainant, either in writing or orally and acknowledging receipt of the complaint;
- › for oral responses, the Customer Service Officer clearly identifying themselves, listening and empathising with the complainant in a courteous manner and determining what the complainant wants;
- › confirming details received and endeavouring to resolve the complaint;
- › where the information is insufficient to resolve the complaint, seeking further information and resolving the complaint;
- › where the complaint cannot be resolved, reaching agreement on alternative courses of action, including referral to more senior personnel, without creating expectations;
- › recording the details of the complaint in Emergency Services Health's Communications Register;
- › the referee seeking further information (orally or in writing) to resolve the complaint if required and aiming

to ensure that the complaint is resolved or agreement reached on alternative courses of action, including referral to external dispute resolution processes, such as the Private Health Insurance Ombudsman;

- › the complainant being kept informed of the progress of the complaint;
- › providing acknowledgement of any resolution and or information given in writing if requested; and/or
- › as appropriate, following up and monitoring to ensure the complainant remains satisfied as well as receiving feedback.

#### 4.15 External Resolution

Where the complainant is not satisfied with the outcome of the complaints-handling process, the complainant may refer the matter to the Private Health Insurance Ombudsman:

- › Writing to: Private Health Insurance Ombudsman  
Commonwealth Ombudsman  
GPO Box 442, CANBERRA ACT 2601
  - › Call: 1300 362 072 (Select option 4 for Private Health Insurance)
  - › Via [www.ombudsman.gov.au](http://www.ombudsman.gov.au)
- #### 5. Policy Administration
- › Date Policy Approved: 2 September 2016
  - › Policy Review Date: 30 September 2019



# EMERGENCY SERVICES HEALTH

**COVER LIKE NO OTHER**

**PHONE**

1300 703 703

**POST**

Reply Paid 84966  
Halifax Street SA 5000

**EMAIL**

[enquiries@eshealth.com.au](mailto:enquiries@eshealth.com.au)

**FACEBOOK**

[/EmergencyServicesHealth/](#)

**WEB**

[eshealth.com.au](http://eshealth.com.au)

**CONTACT  
HOURS**

Monday, Wednesday to Friday  
8.30 am - 4.45 pm (SA Time)

Tuesday  
9.30 am - 4.45 pm (SA Time)