

THREE IMPORTANT POLICIES

Privacy Policy, Cooling Off Period Policy and
Complaints Policy



A Members
Health Fund

Privacy Policy

Background

In this Privacy Policy, reference to “we”, “us” or “our” is reference to Police Health Limited (ABN 86 135 221 519), a registered not for profit, restricted access private health insurer, including the brands Police Health and Emergency Services Health. Reference to “you” or “your” is reference to a customer or a person insured under a private health insurance policy or having any contact or dealing with us.

Our 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.

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. We aim to manage personal information that we collect 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 us for further information (contact details appear at the end of this Policy).

Collecting and holding personal information

We collect and hold 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 us and our products. However, it is not practicable for individuals not to identify themselves, or to use a pseudonym, when dealing with us in relation to health insurance or claims.

We collect and hold the minimum personal information required to perform our functions and activities. This information may include:

- Contact and identity information, such as names, addresses, age, gender, marital status and relationship details, employment details, government identifiers, passwords, telephone, mobile and facsimile numbers and email addresses.
- Financial information, such as premiums, income, 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.
- Provider information, relating to their scope of practice.

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 us 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) 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 an 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 us by voice, electronically or in hard copy and is stored by us 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. Data may be held on systems owned and managed by “cloud” service providers. 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 this Privacy Policy and the Australian Privacy Principles.

We collect 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 we will collect your personal information on a recurring basis. When you or your authorised 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 we will collect your personal information.

If you are the Contributor of a health insurance policy with us, you are responsible for ensuring that every person on the health insurance policy is aware of this 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 us, but are making a claim, or otherwise providing personal information, on behalf of another insured person, you must be authorised 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 or the other person 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 us to comply with legislative requirements for the collection of and submission of data to Government agencies.
- Developing and providing products and services.
- Communicating to you general information about us, 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 promotions, products and services provided or offered by us or on our behalf, or other service providers who have a relationship with us, that we consider may be of interest or benefit to you or other people insured on the same health insurance policy (where applicable). 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, mail and/or by phone. When you become a customer or become insured under a private health insurance policy, you consent to receiving marketing material for an indefinite period (including after you may cease to be insured by us). 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 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 us to do so, for the provision of these health programs.
- Perform any other functions or activities.

Our functions and activities and our range of products and services may change from time to time.

Disclosure of personal information

We 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 us, the Contributor authorises us 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. We will endeavour to keep the information private, but may 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.

We 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 Return to Work SA, in relation to claims made for damages or compensation for motor vehicle or other accidents or workers compensation;
- Organisations contracted by us 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);
- Third parties (organisations contracted by us) to assist us in the delivery of our functions and services and, unless required by law, with our agreement;
- 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.

We will not sell your contact details or add your contact details to mailing lists of third parties unrelated to your health insurance policy or with whom we do not have a relationship, without your prior consent. We will require that business partners and contractors comply with the Australian Privacy Principles.

We are not likely to disclose your personal information to overseas recipients.

Security

We undertake all reasonable steps to ensure that your personal information is kept secure and to 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.

Social media, website analytics and electronic exchanges

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

We use persistent and session cookies to store information entered into the websites. This information is stored on your browser until it is closed. Information is securely transferred by encryption protocols (SSL) to our server and exists within memory for the duration of the HTTPS request and associated response, upon which it is removed. You may refuse the use of cookies by selecting the appropriate settings on your browser, however please note that if you do this you may not be able to use the full functionality of the websites. Our websites use a range of tools and services provided by third parties, including Google Analytics, a service which transmits website traffic data to various Google servers around the world, including the United States. Google Analytics does not identify individual users or associate your IP address with any other data held by Google. We use reports provided by Google Analytics to help us understand website traffic and webpage usage.

By using our websites, you consent to the processing of data about you by Google in the manner described in [Google's Privacy Policy](#) and for the purposes set out above. You can opt out of Google Analytics if you disable or refuse the cookie, disable JavaScript, or [use the opt-out service provided by Google- external site](#). In addition to anonymous Data Collection Tools, we also collect identifiable information through the use of tracking pixels and cookies.

This allows for the collection of information regarding the use of the web page that contains the tracking pixel/cookie. For example, if you have used Facebook on the same device, we share the tracking cookie data with Facebook who will use this to optimise advertising provided to you when using Facebook.

We use Facebook Custom Audiences to deliver advertising about us to users on Facebook based on email addresses we have collected. If you would like to opt-out of our Facebook advertising, follow this link and update your ad preferences – <http://facebook.com/ads/website>

[custom_audiences/](#)

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

We provide links to third party sites, and third party applets for social media sharing. These sites are not under our control and hence we are not responsible for any practices by these third parties that may breach your privacy. We encourage you to review the privacy policies of these third parties.

If you access or log-in to our websites through a third party social media service, we may also collect information from that social media service. This may include:

- Your user name for that service;
- Any information or content you have permitted the social media service to share with us (such as your profile picture(s), email address, followers or friends lists); and
- Any other information you have made public (including other posts you make using your social media profile).

We do not collect your social media profile password. When you access our websites through your social media profile, or when you connect to your social media profile, you authorise us to collect and handle your personal information in accordance with this Privacy Policy.

We may send you push notifications from time-to-time in order to update you on our latest blogs or about current promotions which we may be offering. If you no longer wish to receive these communications, you may turn them off at any time at the device level or by visiting our websites and following the prompt. To ensure you receive proper notifications, we will need to collect certain information about your device such as operating system and user identification information.

Use and access of our websites must be in accordance with the terms and conditions published on the websites.

We provide 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 our office, accessed through the Online Member Service or sent to the requestor. We reserve the right to charge an administration fee for the provision of the information to cover costs incurred.

We have 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, we should be advised in writing as soon as practicable.

Complaints

Questions about our 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 6111, Adelaide SA 5000
- Phone number: 1300 703 703
- Email address: enquiries@eshealth.com.au

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

Privacy Policy changes

From time to time, we may modify this Privacy Policy. Where this occurs we will publish the new Privacy Policy on websites, www.policehealth.com.au and www.eshealth.com.au

Policy Administration

- Policy Approved From: 19 April 2023
- Policy Review Date: 31 March 2024

Oversight Responsibility: Risk Management and Compliance Committee

Cooling Off Period Policy

1. Policy Statement

A new Contributor of a new policy or existing Contributor changing their health insurance cover to a new cover will be provided with 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 a new policy within an existing policy is received in writing within 30 calendar days of the commencement of the new policy or new cover; and
2. There has been no benefits paid under the new policy or benefits paid which are related to the new cover.

Where a new Contributor meets the above requirements, the Contributor will be refunded, in full, any contributions paid without penalty.

Where an existing Contributor has changed their health insurance cover to a new cover and meets the above requirements:

1. Where the contribution rate is higher - return the Contributor to their previous cover and either refund the Contributor, in full, the additional contributions paid, or advance the paid to date of the policy to the equivalent amount; or
2. Where the contribution rate is lower - return the Contributor to the previous cover so long as the Contributor pays any additional contributions to bring the policy up to date.

Where the cooling off period is applied to a Contributor who changes their health insurance cover to a new 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.

2. Purpose and Scope

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 contribution refund during the cooling off period.

3. Definitions

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

Cooling off period is the first thirty calendar days following the commencement date of joining the Police Health Limited (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).

4. Policy Administration

- Approved by CEO: 24 June 2023
- Policy Review Date: 30 June 2026

Complaints Policy

1. Purpose and Scope

This policy sets out Emergency Services Health's policy for handling customer complaints. It includes information about:

- how to lodge a complaint;
- our resolution process;
- what you can do if you are unhappy with the outcome of your complaint.

This policy is used to guide employees handling problems, grievances and disputes. Adherence to this policy has the purpose of:

- enhancing customer satisfaction by creating a customer-focused environment;
- recognising and addressing the needs and expectations of complainants;
- providing an open, effective and easy-to-use complaints process;
- ensuring review of the effectiveness and efficiency of the complaints-handling process; and
- enabling analysis and evaluation of complaints to improve the product and customer service quality.

2. Policy Statement

2.1 Commitment

We understand and recognise the right to complain, and we are committed to enhancing our reputation through working with our customers in a respectful way to resolve complaints within a reasonable timeframe.

2.2 Fairness

Our 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 our 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 our decision and the reason for this decision; and
- know that their complaint is being reviewed independently, where appropriate.

We (including the person about whom a complaint may be made) have 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.

2.3 Resources

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

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

2.4 Visibility

Information on how and where to complain will 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 our website.

2.5 Lodging a Complaint

A complaint in relation to Emergency Services Health may be made by:

- calling a Customer Service Officer on 1300 703 703.
- face to face at Police Health's Office, 320 King William Street, Adelaide.
- email to enquiries@eshealth.com.au
- post to Emergency Services Health, PO Box Reply Paid 6111, Halifax Street, Adelaide, SA 5000.

A complaint in relation to Police Health may be made by:

- calling a Customer Service Officer on 1800 603 603.
- face to face at Police Health's Office, 320 King William Street, Adelaide.
- email to enquiries@policehealth.com.au
- post to Police Health, PO Box Reply Paid 6111, Halifax Street, Adelaide, SA 5000.

When lodging a complaint, it helps to provide us with as much relevant information as possible, including:

- a clear description of your concern, and what you believe caused it including key information such as when the problem occurred.
- whether your concern relates to a specific service, claim or interaction.
- your desired outcome.
- any special arrangements you'd like us to follow, such as a preferred contact method or support needs.
- your contact details such as email, phone number and postal address to make it easier to reach you.

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 Commonwealth Ombudsman.

2.6 Assistance

We endeavour to resolve complaints by appropriately addressing

an individual's particular needs. We will engage specialist services appropriate to the individual to achieve a satisfactory resolution for all parties e.g., language or interpreting services.

2.7 Responsiveness

Where a complaint is not immediately resolved, we will:

- for oral 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 10 business days.
- for written complaints received by email or post, acknowledge the complaint within 5 business days of the complaint and outline the complaints-handling process and endeavour to resolve the complaint within 10 business days.
- 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.

2.8 Charges

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

2.9 Remedies

We 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 contribution refund where an error was made in applying a contribution 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 we determine is appropriate given the unique circumstances; or
- any other appropriate remedy not covered above that will result in the satisfactory resolution of a complaint.

2.10 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, therefore, data is collected and stored to enable the handling of the complaint and to allow monitoring of performance. We draw on complaint data to continuously improve our products and services.

2.11 Systemic and Recurring Problems

We are committed to continually monitoring our performance in

handling complaints to ensure organisational objectives are met. Any identified systemic and recurring problems will be addressed through appropriate action.

2.12 Accountability

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.

2.13 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.

2.14 Complaints Handling Procedure

All complaints will be recorded in the Complaints 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 desired outcome is.
- 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 the 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 Commonwealth 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 desired outcome is.
- 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 the 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 Commonwealth 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.

2.15 Unsatisfactory Resolution

Where the complainant is not satisfied with the outcome of the complaint, the complainant may refer the matter to the Commonwealth Ombudsman:

- Online: www.ombudsman.gov.au
- Phone: 1300 362 072
- Writing: Commonwealth Ombudsman, GPO Box 442, Canberra ACT 2601

3. 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 contributions of the policy.

4. Policy Administration

- Approved by CEO: 20 July 2023
- Policy Review Date: 30 June 2026



Call **1300 703 703**

Post **PO Box Reply Paid 6111 Halifax Street, Adelaide SA 5000**

Email **enquiries@eshealth.com.au**

Facebook **facebook.com/EmergencyServicesHealth/**

Web **eshealth.com.au**

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