

Expatriate/Inpatriate Medical Expenses

We know that making a claim is often done at a stressful time and understand the importance of processing your claim as quickly as possible. Your claim will be managed by Proclaim Management Solutions (Proclaim), our trusted claims service provider, who is committed to ensuring your claim is handled efficiently, honestly, and fairly.

About this claim form

- To avoid delays with your claim, it's important that you provide answers to all the questions, including any additional documentation requested.
- Itemise each expense and and attach/scan your relevant invoices, receipts and prescriptions before submitting your claim.
- Please ensure you keep copies of all documentation.
- · The issue of this form is not an admission of liability.

Ready to submit your claim form?

If so, please double check that you have followed all of the instructions, then send the completed claim form to ahclaims.au@libertyglobalgroup.com

You can fill out the form either electronically or by hand and if you have any questions regarding the completion of this claim form, please contact Proclaim on 1300 552 446 or +61 3 9660 5200.

- T: International +61 3 9660 5200
- F: 1300 858 329 or +61 2 8551 8681
- E: ahclaims.au@libertyglobalgroup.com

1. POLICY HOLDER

Employer/company							
Policy number							
Last name	First name			N	Middle name initial		
Nationality		Male	Female	Date of birth			
Address							
Suburb	Country			State	Postco	ode	
Mobile	Telephone (work)						
Do you consent to us communicating with you by email?					Yes	No	
Email							
Have you been granted permanent residency in Australia?						Yes	No
If yes, what date was this granted?							
Medicare eligibility					Eligible	Not eligible	

2. CLAIM DETAILS

Treatment date	Description of injury/illness	Treatment	Name/ relationship	Date of birth	Currency	Claimed amount
e.g. 31/1/2015	Broken Leg	Consultation	Julie/daughter	29/1/1998	USD	\$100
	1	1]		Total	

Are these costs incurred in your home country?

If so, please provide us with the travel dates of each family member to and from your home country:

If you are a citizen or resident of the United States, are you eligible for US Medicare benefits?

No

No

Yes

Yes



Accident & Health | Expatriate/Inpatriate Medical Expense | Claim Form | AU | June 2025

3. BANK DETAILS

Bank name	Bank address
BSB (Branch)	Account no
Account holder's name	Swift code
IBAN number	Currency

4. MEDICAL AUTHORITY AND DECLARATION

I understand that by investigating my claim or by accepting proof of my claim, neither Proclaim Management Solutions (Proclaim) or Liberty Specialty Markets (Liberty) have accepted liability, nor waived any of their rights in respect of any claim arising under the policy.

I consent to Proclaim and/or Liberty using and disclosing my personal information in accordance with their respective privacy policies and this document. This consent remains valid unless I alter or revoke it by giving written notice to Proclaim's Privacy Officer.

I authorise any person or entity to provide to Proclaim or Liberty such personal information (including health information) as Proclaim or Liberty in its absolute discretion considers relevant for its assessment of my claim including my entitlement to benefits.

I will use my best endeavours and render all reasonable assistance and cooperation to Liberty and Proclaim in the assessment of my claim. I confirm that any information that I supply will be true and correct and that I will not deliberately withhold any information likely to affect the acceptance or handling of my claim.

I understand that if I do not consent to the terms of this authority or revoke my consent, Proclaim or Liberty may not be able to process or assess my claim.

I appoint Proclaim to do everything necessary or expedient to give effect to the transactions contemplated by the consents and authorisations in this document and to execute, on my behalf, any documents or to do such acts required to give effect to this Privacy Consent and Medical Authority.

Signature of claimant

Name of claimant

Date



Accident & Health | Expatriate/Inpatriate Medical Expense | Claim Form | AU | June 2025

Privacy Notice

Liberty Specialty Markets (Liberty) and Proclaim Management Solutions (Proclaim) are bound by the Privacy Act 1988 (Cth) and its associated Privacy Principles when collecting and handling your personal information.

Liberty collects personal information in order to provide insurance services and products and for ancillary business purposes and Proclaim collects personal information in order to provide claim assessments and insurance related services. Liberty and Proclaim may pass personal information to third parties involved in this process such as its related companies, reinsurers, agents, loss adjusters and other service providers. We may also store your information with third party cloud or other types of networked or electronic storage providers. Third parties may be located locally or overseas in the United States, Canada, UK, Singapore, Hong Kong and Malaysia.

Your information may be transferred to countries without comparable privacy laws if it is reasonably necessary to provide you with the products or services you seek from Liberty and Proclaim. We will take appropriate measures to ensure your personal information remains protected and that the transfer complies with applicable data protection laws. This may include using standard contractual clauses or other lawful mechanisms to provide safeguards for the protection of your personal information. If you do not provide the personal information Liberty, Proclaim or other relevant third parties require to offer you specific products or services, Liberty or Proclaim may not be able to provide the appropriate type or level of service.

If you wish to gain access to or correct your personal information, make a privacy complaint, or if you have any query about how Liberty or Proclaim collects or handles your personal information please write to Liberty's Privacy Officer at privacy.officer.ap@libertyglobalgroup.com or call +61 2 8298 5800 and/or Proclaim's Data Protection Officer at GDPR.enquiries@dwf.law (please mark the subject heading of your email "For the attention of the Data Protection Officer") or call (toll free): +44 (0)333 320 2220.

To obtain a copy of Liberty's Privacy Policy go to Liberty's website (libertyspecialtymarkets.com.au) or request a copy from Liberty's Privacy Officer. To obtain a copy of Proclaim's Privacy Policy go to Proclaim's website (https://proclaim.com.au/proclaim-privacy-policy) or request a copy from Proclaim's Data Protection Officer.

When you give Liberty or Proclaim personal or sensitive information about other individuals, Liberty and Proclaim rely on you to provide its Privacy Notice to them. If you have not done this, you must tell us before you provide the relevant data.



Accident & Health | Expatriate/Inpatriate Medical Expense | Claim Form | AU | June 2025 AP0312-06-25

Liberty Mutual Insurance Company, Australia Branch ABN 61 086 083 605; AFSL No. 530842 (for claims handling and settling services only), a company incorporated in Massachusetts, USA (the liability of members is limited), trading as Liberty Specialty Markets. Claims managed by Proclaim Management Solutions Pty Ltd (ACN 087 666 484) (AFSL No. 530885).