

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 Corporate Services Network (CSN), 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 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@libertymutual.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 CSN on +61 2 8256 1770.

Claim form



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 Corporate Services Network (CSN) or Liberty (Liberty) have accepted liability, nor waived any of their rights in respect of any claim arising under the policy.

I consent to CSN 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 CSN's Privacy Officer.

I authorise any person or entity to provide to CSN or Liberty such personal information (including health information) as CSN 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 CSN 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, CSN or Liberty may not be able to process or assess my claim.

I appoint CSN 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	Date
Name of claimant	

Privacy Notice

Liberty Mutual Insurance Company, Australia Branch (ABN 61 086 083 605) incorporated in Massachusetts, USA (the liability of members is limited) (**Liberty**) is part of the Liberty Mutual Group headquartered in the United States.

Liberty and Corporate Services Network (**CSN**) are bound by the Privacy Act 1988 (Cth) and its associated Privacy Principles when collecting and handling your personal information. For the purposes of this Privacy Notice, 'we', 'us' or 'our' refers to, if the context permits, both Liberty and CSN.

We collect personal information to provide insurance products and services, manage claims and support related business operations. This may include information collected from insurance brokers, intermediaries, or directly from you. If you do not provide the personal information requested, we may be unable to offer the appropriate type or level of service.

If you provide us with personal or sensitive information about another individual, you must ensure they are aware of this notice and have consented to the disclosure. If you have not done so, please inform us before sharing their data. Your personal information may be disclosed to our related entities, reinsurers, insurance intermediaries, loss adjusters, legal and professional advisors and other service providers. We may also store your information with third party cloud or electronic storage providers.

Some recipients may be located overseas in the United States, Canada, United Kingdom, European Union, India, China, Australia, Hong Kong, Singapore and Malaysia. Where reasonably necessary, your information may be transferred to countries without comparable data protection laws to deliver the services you request. By engaging with us, you consent to these cross-border transfers unless you notify us otherwise in writing.

We are committed to protecting your privacy and ensuring transparency in how we use your personal information. As part of this commitment, we confirm Liberty does not currently use automated decision-making (**ADM**).

You may access or seek correction of your personal information, make a privacy complaint, or raise any queries by contacting Liberty's Privacy Officer and/or CSN's Privacy Officer: privacy.officer.ap@libertymutual.com. If you require a physical mailing address, please contact the Privacy Officer via email.

CSN: privacy@csnet.com.au

For more information, and to view the relevant privacy policy for your jurisdiction, visit: [Australia Privacy Policy](#).