

Insurance cover



REFERENCE GUIDE: This Reference Guide was issued on 1 November 2011 and forms part of the Product Disclosure Statement (PDS) for Division F dated 1 November 2011. The Reference Guide should be read in conjunction with the PDS and is not intended to be read as a document in its own right. The Reference Guide may be updated at any time. You can download the current PDS or Reference Guide from our website osfsuper.com.au or by calling us on 1800 023 928.

Many Australians insure their homes and cars but don't adequately insure some of their most important assets—their life and ability to earn an income! Insurance cover may provide financial security for you and your family if something happens to you.

The following types of insurance cover are available to Division F members:

- Death and Total and Permanent Disablement (TPD) cover
- Death-only cover
- Salary Continuance (sometimes known as Income Protection) cover

More information about cover is provided in the following sections.

Automatic Death and TPD cover is provided in some cases

A default amount of Death and TPD insurance cover will be provided automatically if **both** of the following conditions apply:

- i) You are currently employed by the Group on a permanent basis (or a fixed term contract greater than 12 months) working at least 10 hours per week, **AND**
- ii) The Group makes an employer contribution to a Division F account for you within 120 days of the date you started employment with the Group (or the date you first become eligible under (i) above)

The default Death and TPD cover is equal to **four times your super salary** (subject to a limit of \$1.5 million cover¹) and is provided without you having to supply any medical evidence to the insurer². (Note: In this Reference Guide, 'super salary' refers to super salary for insurance purposes.)

You should note that we make no representations about whether this default cover is the most appropriate type and/or amount of cover for you. You can change or cancel this default cover at any time—refer to page 4 for more information.

Note: If you cancel your cover or your cover lapses for any reason and you later re-apply for cover, automatic

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acceptance will not apply. You must re-apply through the insurer's normal application and underwriting process.

If you are not eligible for automatic cover, you can still apply for Death and TPD or Death-only cover at any time—refer to page 4 for more information.

Salary Continuance cover is not provided automatically, but you can apply for this type of cover at any time—refer to page 4 for more information.

1- If your default level of cover exceeds \$1.5 million (ie. your super salary exceeds \$375,000), the insurer's normal application and underwriting process applies for the portion of any cover you would like above the \$1.5 million automatic acceptance limit). If this applies to you, we will contact you to make arrangements for cover above this limit if you need it.

2- You are automatically accepted for the default Death and TPD cover on the date you start employment with the Group (or the date you first become eligible), provided we receive an employer contribution from the Group within 120 days of that date. In addition, you must be less than age 70 and living in Australia at the time insurance cover commences.

Death and Total and Permanent Disablement (TPD) cover

Summary of cover

Eligibility for cover	You must be less than age 70 and residing in Australia.
Basis of cover	<p>For members who are permanent³ Group employees, cover is generally based on a multiple of salary (ie. cover changes in line with salary changes). Alternatively you may choose to have a fixed dollar amount of cover, or a combination of multiple-based and fixed amount cover (see page 4 for more information).</p> <p>For members who are not permanent³ Group employees, cover is based on a fixed dollar amount.</p> <p>You can have Death-only cover, but you cannot have TPD cover on its own.</p> <p>You can nominate different fixed dollar amounts for the Death component and the TPD component of your cover, but the amount of Death cover must be equal to or greater than the amount of TPD cover.</p> <p>Note: If your cover is multiple-based and you leave employment with the Group, your cover will continue, but will be based on a fixed amount basis from that point onwards.</p>
Minimum and maximum cover⁴	<p>Minimum: \$1,000⁵</p> <p>Maximum: \$5 million⁵ for Death cover and \$3 million⁵ for TPD cover</p>
Start of cover	<p>For members eligible for automatic cover (see page 1), cover generally begins on the date you start employment with the Group (or first become eligible for automatic cover)⁶.</p> <p>For members who are not eligible for automatic cover, cover begins once your application for cover is accepted and there is sufficient money in your account to cover your first monthly premium when due. You will be notified in writing of the outcome of your application and, if it is accepted, the date your cover begins.</p>
Exclusions	<p>A benefit may not be paid if your death (or terminal illness) or disablement is a result of any of the following:</p> <ul style="list-style-type: none"> i) suicide (or attempted suicide) or self-inflicted injury or infection (only applies in limited circumstances) ii) a pre-existing condition (only applies in limited circumstances) iii) war iv) any specific condition or exclusion that the insurer may apply to your cover (as advised to you at the time your cover begins). <p>Refer to page 16 for more information on the scope and application of these exclusions.</p>
End of cover	<p>The earliest of the following:</p> <ul style="list-style-type: none"> • the next premium due date after you cease to be a member of Division F (refer to the note below). • the next premium due date after you reach age 70. (Note: Any multiple-based TPD cover reduces progressively by 10% per annum between ages 61 and 70—refer to page 3) • The date any benefit becomes payable⁷. • There is not enough money in your account to cover your premium when due. • The first day of the month immediately after we receive your written request to cancel cover. • The policy expires or is terminated, or the trustee cancels the insurance cover (if this happens we will give you advance notice within the time period specified by law). <p>Note: If you close your account, you may be eligible to continue any Death cover under an individual insurance policy directly with the fund's insurer through a continuation option—refer to page 17.</p>

3- 'Permanent' in this case means you are employed by the Group on a permanent basis (or on a fixed term contract greater than 12 months) working at least 10 hours per week.

4- In some cases, the OSF may be required to provide you with a minimum level of Death cover as specified under choice of super fund laws—refer to page 9 for more information on what this minimum cover is and when it may apply.

5- If you are a permanent Group employee, you may be able to have your Death and TPD or Death-only cover calculated as (i) a multiple (between 0.5 and 10 inclusive) of your salary (ie. amount of cover, and therefore premiums, change in line with salary changes), OR (ii) as a fixed dollar amount of cover OR (iii) a combination of both. Cover for all other members is on a fixed dollar amount basis. Refer to page 4 for details.

6- If you are not in 'active employment' with the Group (as defined in the insurance policy) on the date your default cover starts, you will receive 'limited cover' until you return to active employment with the Group for 2 consecutive months. 'Limited cover' means you are only covered for an event arising from a sickness that first becomes apparent or an injury that first occurs on or after the date your cover last commenced.

7- The insurer may pay a benefit for Death OR Terminal Illness OR TPD, but will not pay a benefit for more than one of these events. However, if you have Death and TPD cover and the amount of your Death cover is greater than your TPD cover, upon payment of a TPD benefit you will still be covered for the remaining amount of Death cover.

Any multiple-based TPD cover reduces progressively after age 60

If you have Death and TPD cover that is based on a multiple of your salary, the TPD component will taper by 10% each year between ages 61 and 70 as follows:

For the year immediately after you turn...	This proportion of your cover amount will apply...
60	100%
61	90%
62	80%
63	70%
64	60%
65	50%
66	40%
67	30%
68	20%
69	10%
70	No cover

Note: Cover reduces from the first premium due date after your birthday

Example: If you have multiple-based TPD cover of \$300,000 when you turn 60, your cover will reduce to \$270,000 on the first premium due date after your 61st birthday, and to \$240,000 after your 62nd birthday, and so on. If you become disabled at age 62, a benefit of \$240,000 (ie. 80% of your original insured amount) would be payable if the claim was accepted.

Once your insurance cover begins to reduce after turning 61, your insurance premiums will be calculated on your tapered amount of cover, not your original insured amount. This means that for the example above, your premiums after you turn 61 would be calculated on an insured amount of \$270,000 then \$240,000 etc.

Note: Tapering does not apply to TPD cover that is based on a fixed dollar amount. Premiums will continue to be deducted based on your original insured amount.

From the first premium due date after you turn 70, regardless of whether your cover is multiple-based or fixed dollar amount, you will no longer be eligible for cover under the trustee's insurance policy.

Salary Continuance cover

Summary of cover

Eligibility for cover to begin	You must be less than age 65 AND you must be employed on a permanent basis at least 15 hours per week. You must also be eligible to contribute to Division F.
Basis of cover	Cover is based on a fixed dollar amount. Note: If you are a former Group employee, your cover is automatically indexed each year by the lesser of 7.5% or the CPI (subject to the maximum cover below). You can opt out of automatic indexing, but you cannot opt back in at a later date. Please contact us for more information on opting out.
Minimum and maximum cover	Minimum: \$100 per month Maximum: the <i>lesser</i> of (i) 75% of your monthly income OR (ii) \$25,000 per month
Waiting period⁸	Your choice of (i) 90 days OR (ii) 30 days A higher premium applies to cover with a 30-day waiting period.
Benefit payment period	Your choice of (i) 2 years OR (ii) Until age 65 A higher premium applies to cover with a benefit period to age 65.
Start of cover	Cover begins once the insurer accepts your application and there is sufficient money in your account to cover your first monthly premium when due. You will be notified in writing of the outcome of your application and, if it is accepted, the date your cover begins.
Exclusions	A benefit will not be paid if your disablement is a result of any of the following: i) intentional self-inflicted injury or infection or attempted suicide (whether sane or not at the time) ii) uncomplicated pregnancy or childbirth iii) war iv) any specific condition that the insurer may apply to your cover (as advised to you at the time your cover begins). Refer to page 16 for more information on the scope and application of these exclusions.

⁸– The waiting period is a continuous period of 90 or 30 days (as selected) in which you must be totally disabled for at least 14 of the first 19 consecutive days. The waiting period will restart if you return to work at full capacity, unless the return to work happens once and is for no more than 5 consecutive days (in which case the number of days worked are added to the waiting period).



End of cover	<p>The earliest of the following:</p> <ul style="list-style-type: none"> • the next premium due date after you cease to be a member of Division F (refer to note below) • the next premium due date after you reach age 65 • there is not enough money in your account to cover your premium when due • you join any armed forces of any country (other than the Australian Armed Forces Reserve) • the first day of the month immediately after we receive your written request to cancel cover • you die • the policy expires or is terminated, or the trustee cancels the insurance cover, (in which case we will give you advance notice within the time period specified by law) <p>Note: If you close your account, you may be eligible to continue any salary continuance cover under an individual insurance policy directly with the fund’s insurer through a continuation option—refer to page 17.</p>
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Applying for or changing your insurance cover

As your personal circumstances change from time to time, it’s important to re-evaluate and make sure you still have insurance cover that suits you.

You can apply for new cover or change or cancel any existing cover at any time, subject to the rules set out in the PDS and this Reference Guide.

There is no fee to change your cover but your monthly insurance premium will change based on your new level of cover (once accepted by the insurer).

To apply for new or increased insurance cover	 Complete the <i>Insurance Application Form</i> , available from our website
To decrease or cancel your insurance cover	 Complete the <i>Decrease/Cancel Insurance Cover</i> form available from our website

If we receive an incomplete request, we will not send it to the insurer until we receive completed information from you.

Understanding multiple-based and fixed dollar amount cover for Death and TPD

If you are a permanent Group employee

If you are a permanent employee (ie. employed by the Group on a permanent basis (or on a fixed term contract greater than 12 months) working at least 10 hours per week), your cover for Death and TPD will generally be based on a **multiple** of your super salary.

Your cover is re-calculated monthly based on salary information that we receive from the Group. If your salary changes, your amount of Death and TPD cover (and therefore your premium) will change accordingly.

If you want to change your amount of Death and TPD cover, you can do so in several ways:

- You can continue to have your cover **linked with your salary** by nominating a new insurance multiple, which must be a whole or half number between 0.5 and 10 (inclusive). (Note: If you would like cover of more than 10 times your salary, you can apply for the additional amount of cover as a fixed dollar amount.)
- You can choose to have all of your cover fixed at a nominated **dollar amount**, in which case any future changes to your salary will not impact on your amount of cover.
- You can choose a **combination** of multiple-based and fixed dollar amount cover.

Example: If your salary is \$60,000 and you would like around \$500,000 in Death and TPD cover, you could choose to have:

- A multiple of 8 times salary (\$480,000) or 8.5 times salary (\$510,000) – any changes to your salary would increase your cover (and premiums) accordingly
- A fixed amount of \$500,000 cover – your cover would remain at this amount regardless of changes to your salary (unless you later applied to change your cover)
- A combination of multiple-based and fixed amount cover, eg. a multiple of 5 times salary (\$300,000, where any changes to your salary would change this component of your cover) and a fixed amount of \$200,000.

If you have Death-only cover, you can choose to have multiple-based and/or fixed amount cover as outlined above. If you have Death and TPD cover and choose to have a different amount for the Death component and the TPD component, all cover must be on a fixed amount basis.

Any application for new or changed cover is subject to the policy minimums and maximums outlined on page 2. Any increase to cover may be subject to the insurer’s normal application and underwriting process, with the exception of increases under the life events cover and transfer of cover options (refer to pages 5 and 6).

If you are not a permanent Group employee

If you are not a permanent Group employee, all Death and TPD or Death-only cover is based on a fixed dollar amount. To apply for new cover or change any existing cover, simply nominate the dollar amount of cover you would like.

Some aspects of your cover may change if you change membership categories

If your employment basis with the Group changes

If your employment changes such that you would not ordinarily be eligible for automatic cover if you were a new member (refer to page 1), the amount of any existing Death and TPD or Death-only cover will be fixed at the dollar amount as at the date your employment basis changed. Your cover will no longer change with changes in your salary. There will be no change to any Salary Continuance cover.

If your employment arrangements change such that you first become eligible for automatic cover, any existing fixed Death and TPD cover that you have will end but you will receive automatic cover equal to four times your super salary (rounded to the nearest whole or half number multiple, to a maximum of 10 times your super salary). Your new cover is expressed as a multiple of your super salary. Therefore, if your super salary changes, your cover amount and insurance premiums will change accordingly. There will be no change to any Salary Continuance cover.

If you leave employment with the Group

If the Group notifies us that you have left employment, any Death and TPD or Death-only cover you had that was based on a multiple of your salary will be fixed at an equivalent dollar amount as at the date you left the Group. This means your cover will no longer change in line with any changes in your salary. There will be no change to any Salary Continuance cover.

Transferring cover from another super fund into Division F

If you have an account in another super fund, you may be able to transfer any insurance cover associated with that account into Division F. This may make it easier for you to consider consolidating your super accounts.

To be eligible to transfer cover, you must transfer the entire account balance from your former fund and transfer the same type and amount of insurance cover and not partial cover (subject to product restrictions and eligibility rules). For example, if you have Death and TPD cover with your former fund, you must transfer in the full amount of that Death and TPD cover. You could not transfer Death-only cover or a different amount of cover in this case.

You can transfer multiple super accounts and associated insurance cover, subject to your total insurance cover in Division F (including the transferred amount) not exceeding the policy maximums (see pages 2 and 3).

Transferred cover will be subject to the rules and premiums applicable to Division F, which may be different to those that applied in your former fund. You should consider both products carefully (ie. cover in your former fund and Division F cover) before deciding to transfer cover.

Please note that it is important that you **DO NOT** cancel your existing cover in your former fund or close that account until you have received confirmation in writing from us that this request has been accepted.

To transfer cover from another super fund



Complete the *Application to transfer insurance cover* form, available from our website (this form includes a *Request to Transfer* form for your account balance)

You are **not** eligible to transfer your Death and TPD or Death-only cover, and/or Salary Continuance cover (as applicable) if any of the following apply:

- You have been declined for the same type of insurance cover in Division F.
- You have received, had your claim admitted or are eligible for a TPD benefit from your former fund, another super fund or the OSF.
- You are restricted, due to injury or illness, from carrying out the identifiable duties of your current and normal occupation on a full-time basis (even if you are not currently working full-time).
- You have been diagnosed with an illness that reduces your life expectancy to less than 12 months as at the date your other cover ceased.
- You have not cancelled your other cover prior to the transfer of cover to Division F and have not agreed to waive any right or entitlement under your other cover.
- You have not provided us with evidence, to our satisfaction, of the type, amount and terms of cover which applied to you under your other cover on the day before the transfer.

In addition to the above eligibility criteria, if you have existing Salary Continuance cover in Division F, you can only transfer Salary Continuance cover if:

- your waiting period in your other fund is equal to or less than your existing waiting period in Division F; and
- your benefit period in your other fund is equal to or greater than your existing benefit period in Division F.

If you do not have existing Salary Continuance cover in Division F, you can only transfer the cover if your waiting period is 90 days or less and your benefit period is at least 2 years in your other fund.

If you are not eligible to transfer insurance cover, you can still apply for new cover or change any existing cover in Division F by applying through the normal application and underwriting process—refer to page 4.

How is cover transferred?

When Death and TPD (or Death-only) cover is transferred into your account, you will receive an equivalent fixed dollar amount of cover, on top of any existing cover you have (subject to product maximums). For example:

Existing Division F cover	Cover from former fund	New cover in Division F
\$200,000 (multiple-based cover)	\$100,000	\$300,000 in total: \$200,000 (multiple-based cover) + \$100,000 (fixed dollar amount)
\$200,000 (fixed dollar amount)	\$100,000	\$300,000 (fixed dollar amount)
No existing cover	\$500,000	\$500,000 (fixed dollar amount)

When Salary Continuance cover is transferred into your account, any existing cover will be increased to equal the cover you had in the former fund (subject to product maximums). For example:

Existing Division F cover	Cover from former fund	New cover in Division F
\$3,000 per month	\$4,000 per month	\$4,000 per month
No existing cover	\$4,000 per month	\$4,000 per month

Any premium loadings, exclusions or special conditions that applied to the cover immediately before it is transferred from the former fund will continue to apply in Division F. Your monthly insurance premium will change based on your new total amount of cover (once accepted by the insurer).

How are Salary Continuance waiting periods and benefit periods transferred?

If you have existing Salary Continuance cover in Division F, the waiting period and benefit period applied to your transferred cover will be the same waiting period and benefit that applies to your existing cover.

If you do not have existing Salary Continuance cover in Division F, the waiting period applied to your transferred cover will be:

- 30 days (where your waiting period was 30 days or less with your former fund), or
- 90 days (where your waiting period was greater than 30 days with your former fund).

In Division F, a Salary Continuance benefit may be paid for up to 2 years or up to age 65. If you do not have existing Salary Continuance cover in Division F, the benefit period applied to your transferred cover will be:

- To age 65 (if your benefit period was to age 65 with your former fund), or
- 2 years (in all other cases).

Increasing your cover without medical evidence under a 'life event' option

When you experience one of the following 'life events', you can apply to increase your existing Death and TPD or Death-only cover without having to provide additional medical evidence (although proof of the life event is required).

Note: You cannot increase Salary Continuance cover under the life events option.

Event	Proof required
Marriage	Marriage certificate
Birth or legal adoption of a child	Birth certificate OR adoption documentation
Mortgage or refinance your primary residence	Stamped front page of the 'contract of sale' AND letter on bank letterhead detailing the loan arrangement
Child's first day at primary or secondary school	Letter on school letterhead confirming the name of the student, school start date and details that the student is starting either 'Primary' (Kindergarten) or 'Secondary' (Year 7)
Divorce	Decree Nisi/Absolute OR Certificate of Divorce
Death of spouse	Death certificate

Note: The 'Birth or legal adoption' event does not include assuming parental responsibilities of a step-child or becoming a legal guardian.

To be eligible to apply for increased cover under the life events option, ALL of the following must apply:

- You have existing Death and TPD or Death-only cover in Division F.
- You are in active employment (ie. you are employed by an employer to carry out identifiable duties; you are actually performing those duties; and in the insurer's opinion, you are not restricted by sickness or injury from being capable of performing those duties on a full-time basis and the duties of your normal occupation on a full-time basis (even if not then working on a full-time basis)).
- We must receive your application for cover (including documentary evidence supporting the life event) within 120 days of the life event occurring.

You are not eligible for the life events cover option if your cover ends, or if you die, become terminally ill or totally and permanently disabled, before we receive your application form.

To apply to increase cover under a life events option



Complete the *Life events insurance cover option* form, available from our website

How much increased cover can you apply for?

Under the life events cover option, you can apply to increase your existing insurance cover by up to (i) \$250,000 or (ii) 100% of your existing cover, whichever is the *lesser* amount.

If you have Death and TPD cover, you must apply to increase both components of the cover, ie. you cannot increase the Death component but not the TPD component.

Additional cover under the life events cover option is provided as a fixed dollar amount, on top of your existing level of cover. If your existing cover is based on a multiple of your salary, this means that your new cover after the life events option will have both a multiple-based component and a fixed dollar amount component.

Your increased level of cover will commence upon acceptance of your application. Any exclusions, loadings or other restrictions that apply to your existing cover will also apply to the increased portion of cover. Your monthly insurance premium will change based on your new level of cover (once accepted by the insurer).

How often can you increase cover under life events?

You may exercise the life events cover option more than once (except for mortgage/refinancing option which can only be exercised once), but there must be at least a 12-month gap between applications to increase cover.

You may need to provide medical evidence with any application for new, increased or varied cover

If you apply for new, increased or varied cover for any type of insurance (except under the life event cover or transfer of cover options outlined on pages 5 and 6, or where you have multiple-based cover and your cover increases as a result of a salary change⁹), you may need to provide information about your health, which may include medical tests, in order for the insurer to assess your application. The information required will depend on your age, health and medical history, and the amount of insurance cover you have applied for.

The minimum requirements that the insurer generally requests are outlined on page 8, but the insurer may change these requirements without notice or request additional information depending on your circumstances. Accordingly you should only use this information as a guide.

You do not have to arrange any additional tests before sending us your application for cover. Generally, upon receiving your application, the insurer will give your contact details to Lifescreen, which is a mobile health evaluation service provider. A Lifescreen nurse consultant will then contact you directly to arrange an appointment to conduct the tests at a time and place that suits you. There is no cost to you for this service. Alternatively, you can ask your local doctor, pathologist or health service provider to conduct the tests and send us the results with your application for cover.

The insurer may accept or reject your application based on the information you supply and the results of any medical tests. The insurer may also impose special conditions or restrictions when accepting your application. The insurer may also request and pay for a detailed medical report from your usual doctor for an application for any level of cover.

The insurer will generally pay the costs of any medical examination or medical report that they request. However, the insurer will not pay for any other costs, such as the cost of travelling to or from an appointment or any fee if you do not attend an arranged appointment.

Your new or increased level of cover will begin if and when the insurer accepts your application and there are sufficient funds in your account to cover your first monthly premium when due.

⁹– If your cover exceeds \$200,000 and a change in super salary would increase your cover by more than 25% of the amount that applied 12 months ago (or when your cover began, if not in place for 12 months), the insurer must approve the increase in writing.

Initial medical evidence required for Death and TPD or Death-only cover

	Age				
	18 to 45	46 to 50	51 to 55	55 to 60	61+
If requested cover is:	You will need to provide the following:				
\$1 to \$1,000,000	A	A	A	A	A
\$1,000,001 to \$1,500,000	A	A	B	B	C
\$1,500,001 to \$2,000,000	A	F	F	F	G
\$2,000,001 to \$2,500,000	A	F	F	G	G
\$2,500,001 to \$5,000,000	G	G	G	G	G

Initial medical evidence for Salary Continuance cover

	Age	
	18 to 30	31+
If your requested level of cover is:	You will need to provide the following:	
Up to \$10,000 per month	A	A
\$10,001 to \$15,000 per month	A	D
\$15,001 to \$20,000 per month	D	E
\$20,001 to \$25,000 per month	E	G

Key to initial medical evidence tables:

- A**– Insurance Application Form
- B**– Insurance Application Form, MBA20 & Medi Lite
- C**– Insurance Application Form, MBA20, Medi Lite & PMAR
- D**– Insurance Application Form, HIV, Hepatitis B & C serology & MBA20
- E**– Insurance Application Form, HIV, Hepatitis B & C serology & PMAR
- F**– Insurance Application Form, HIV, Hepatitis B & C serology, MBA20 & Medi Lite
- G**– Insurance Application Form, HIV, Hepatitis B & C serology, MBA20, Medi Lite & PMAR

Note: The *Insurance Application Form* is available from our website.

Here is some information to help you understand the requirements above:

- **Multiple Biochemical Analysis (MBA20):** This is a fasting test. An MBA20 is a blood test that analyses 20 different chemicals in the blood and also includes an analysis of HDL/LDL cholesterol.
- **MediLite:** This is a basic medical check performed by a trained nurse. Blood pressure readings, height, weight and a urine test are obtained. It is a convenient, fast alternative to a GP medical examination.
- **HIV:** This is a blood test to identify the presence of the human immunodeficiency virus.
- **Personal Medical Attendant's Report (PMAR):** This is a report completed by your usual doctor. The report is requested directly from your doctor by International SOS (a medical provider used by the insurer). Your doctor would complete this form using data from your patient records. You won't need to attend any appointments.

Interim cover may apply while an insurance application is being assessed

While an application for new or increased Death and TPD or Death-only cover is being assessed (except under the life event cover or transfer of cover options), the insurer provides interim accident cover based on the new level of cover that you are applying for.

Interim cover is *not* provided for Salary Continuance cover.

Your interim accident benefit will be the amount of cover or additional cover you have requested, subject to a maximum of \$750,000 less the amount of any existing cover.

Interim accident cover begins from the date we inform the insurer of your application (which is as soon as possible after we receive it) and ceases at the earliest of the following dates:

- the date your application is accepted or declined
- 90 days from the date the insurer receives your application
- the date your application is withdrawn by you
- the date the insurer cancels the cover
- the date on which a benefit becomes payable.

A benefit will only be payable under interim accident cover if your death or TPD results from bodily injury caused solely or directly by accidental, external and visible means, independent of any other cause. A benefit is not payable if your death or TPD is a result of actual or attempted suicide or self-inflicted injury or infection, whether or not you are sane at the time.

In the case of a TPD interim accident benefit, the insurer will apply the definition of TPD that would have applied to you had you been accepted for TPD cover but the disablement must be the result of an accident.

A benefit is payable only once, either for accidental death or TPD but not both.

If you make a claim during the interim accident period, your application for new or increased cover will automatically be cancelled.

A minimum level of death cover may apply

Under choice of super fund laws, if you are eligible for automatic cover the fund must provide you with a minimum amount of death cover based on your age. Unless you reduce or cancel your cover, the following minimum cover will apply:

If your age is:	The minimum death insurance cover is:
Less than 35	\$50,000
35 to 39	\$35,000
40 to 44	\$20,000
45 to 49	\$14,000
50 to 55	\$7,000

Your duty of disclosure

If you apply for cover or apply to change your cover, you must comply with your duty of disclosure.

Under the *Insurance Contracts Act*, you must disclose to the insurer every matter that you know, or could reasonably be expected to know, is relevant to the insurer's decision whether to accept the risk of the insurance and, if so, on what terms.

Your duty, however, does not require disclosure of a matter:

- that reduces the risk to be undertaken by the insurer
- that is of common knowledge
- that your insurer knows or, in the ordinary course of its business, ought to know
- as to which compliance with your duty is waived by the insurer.

If you do not comply with your duty of disclosure and the insurer would not have covered you on any terms if the failure had not occurred, the insurer may avoid the cover within three years of issuing it. Alternatively, the insurer may, within the same period, elect to reduce the

sum that you have been insured for based on a formula that takes into account the premium that would have been payable if you had disclosed all relevant matters to the insurer.

If your non-disclosure is fraudulent, the insurer may avoid the contract at any time.

Cooling off period

If you apply for new or increased cover, you have 14 days from the date you receive our written acceptance to check that any change in cover meets your needs. To cancel the change in cover, you must advise us in writing before the end of the 14-day period. We will refund your account with any premiums you have paid, effective from the day we receive your request.

Paying for insurance cover

Depending on the type and amount of cover you have, your insurance premiums may be influenced by your age, sex, salary and any special circumstances that apply to you.

The fund is entitled to a tax deduction for the premiums we pay to the insurer. We pass this saving on to you through cheaper premiums.

In some cases when accepting an application for cover or increased cover, the insurer may also determine that a loading (ie. an additional premium) applies to your insurance premiums due to your occupational, personal or medical circumstances. This will be advised to you if and when your application is accepted.

Premiums are deducted monthly from your account

Insurance premiums are paid in advance and deducted from your account at the beginning of each month.

Your insurance cover may lapse if there is not enough money in your account to cover your premium when due.

You can nominate the investment option that your premiums are deducted from. If there are insufficient funds in this option (or if you do not nominate an option), the remaining premium will be deducted in the default order from the investment options you are invested in. This default order is set by the trustee and generally means premiums are deducted from the most conservative investment first. Contact us for more information about the current default order.

To nominate the investment option that insurance premiums are deducted from



Complete the deduction for fees and insurance premiums section of the *Insurance Application Form* or the *Investment Selection Form* (available from our website)

Premium rates for Death and TPD or Death-only cover

Annual premium per \$1,000 of Death and TPD or Death-only insurance cover (including stamp duty)

RATES FOR FEMALES				RATES FOR MALES			
Age next birthday	Death-only component	TPD-only component ¹⁰	Death & TPD	Age next birthday	Death-only component	TPD-only component ¹⁰	Death & TPD
16	\$0.13	\$0.01	\$0.14	16	\$0.27	\$0.01	\$0.28
17	\$0.14	\$0.02	\$0.16	17	\$0.31	\$0.05	\$0.36
18	\$0.16	\$0.03	\$0.19	18	\$0.38	\$0.06	\$0.44
19	\$0.18	\$0.04	\$0.22	19	\$0.44	\$0.10	\$0.54
20	\$0.18	\$0.05	\$0.23	20	\$0.45	\$0.11	\$0.56
21	\$0.17	\$0.07	\$0.24	21	\$0.41	\$0.16	\$0.57
22	\$0.16	\$0.07	\$0.23	22	\$0.40	\$0.15	\$0.55
23	\$0.15	\$0.08	\$0.23	23	\$0.38	\$0.17	\$0.55
24	\$0.15	\$0.08	\$0.23	24	\$0.37	\$0.18	\$0.55
25	\$0.14	\$0.09	\$0.23	25	\$0.36	\$0.19	\$0.55
26	\$0.13	\$0.09	\$0.22	26	\$0.35	\$0.19	\$0.54
27	\$0.13	\$0.08	\$0.21	27	\$0.34	\$0.20	\$0.54
28	\$0.13	\$0.09	\$0.22	28	\$0.33	\$0.21	\$0.54
29	\$0.14	\$0.10	\$0.24	29	\$0.32	\$0.22	\$0.54
30	\$0.14	\$0.11	\$0.25	30	\$0.32	\$0.23	\$0.55
31	\$0.15	\$0.17	\$0.32	31	\$0.32	\$0.33	\$0.65
32	\$0.16	\$0.19	\$0.35	32	\$0.32	\$0.34	\$0.66
33	\$0.17	\$0.21	\$0.38	33	\$0.31	\$0.37	\$0.68
34	\$0.18	\$0.26	\$0.44	34	\$0.33	\$0.40	\$0.73
35	\$0.19	\$0.28	\$0.47	35	\$0.34	\$0.41	\$0.75
36	\$0.21	\$0.32	\$0.53	36	\$0.34	\$0.46	\$0.80
37	\$0.22	\$0.38	\$0.60	37	\$0.35	\$0.50	\$0.85
38	\$0.25	\$0.43	\$0.68	38	\$0.36	\$0.53	\$0.89
39	\$0.28	\$0.52	\$0.80	39	\$0.40	\$0.60	\$1.00
40	\$0.32	\$0.56	\$0.88	40	\$0.43	\$0.64	\$1.07
41	\$0.36	\$0.61	\$0.97	41	\$0.48	\$0.65	\$1.13
42	\$0.41	\$0.65	\$1.06	42	\$0.53	\$0.68	\$1.21
43	\$0.44	\$0.74	\$1.18	43	\$0.58	\$0.77	\$1.35
44	\$0.47	\$0.83	\$1.30	44	\$0.65	\$0.88	\$1.53
45	\$0.50	\$0.91	\$1.41	45	\$0.73	\$1.00	\$1.73
46	\$0.54	\$0.98	\$1.52	46	\$0.83	\$1.13	\$1.96
47	\$0.58	\$1.09	\$1.67	47	\$0.92	\$1.27	\$2.19
48	\$0.62	\$1.23	\$1.85	48	\$1.02	\$1.46	\$2.48
49	\$0.68	\$1.40	\$2.08	49	\$1.14	\$1.66	\$2.80
50	\$0.77	\$1.60	\$2.37	50	\$1.30	\$1.85	\$3.15
51	\$0.89	\$1.80	\$2.69	51	\$1.45	\$2.07	\$3.52
52	\$1.02	\$2.05	\$3.07	52	\$1.63	\$2.31	\$3.94
53	\$1.17	\$2.30	\$3.47	53	\$1.82	\$2.57	\$4.39
54	\$1.34	\$2.61	\$3.95	54	\$2.06	\$2.93	\$4.99
55	\$1.54	\$2.93	\$4.47	55	\$2.33	\$3.41	\$5.74
56	\$1.72	\$3.27	\$4.99	56	\$2.58	\$3.87	\$6.45
57	\$1.91	\$3.63	\$5.54	57	\$2.83	\$4.35	\$7.18
58	\$2.11	\$4.01	\$6.12	58	\$3.13	\$4.93	\$8.06
59	\$2.30	\$4.34	\$6.64	59	\$3.44	\$5.52	\$8.96
60	\$2.50	\$4.70	\$7.20	60	\$3.79	\$6.20	\$9.99
61	\$2.73	\$5.07	\$7.80	61	\$4.19	\$6.96	\$11.15
62	\$2.99	\$5.50	\$8.49	62	\$4.60	\$7.81	\$12.41
63	\$3.31	\$6.04	\$9.35	63	\$5.05	\$8.70	\$13.75
64	\$3.72	\$6.68	\$10.40	64	\$5.51	\$9.66	\$15.17
65	\$4.18	\$7.43	\$11.61	65	\$5.99	\$10.70	\$16.69
66	\$5.76	\$7.14	\$12.90	66	\$7.98	\$10.31	\$18.29
67	\$6.59	\$7.79	\$14.38	67	\$8.76	\$11.24	\$20.00
68	\$7.57	\$8.54	\$16.11	68	\$9.57	\$12.23	\$21.80
69	\$8.63	\$9.70	\$18.33	69	\$10.28	\$13.61	\$23.89
70	\$9.87	\$11.06	\$20.93	70	\$10.98	\$15.17	\$26.15

¹⁰TPD-only rates are shown only for the purposes of calculating a premium for Death and TPD cover where you have different cover amounts for each component. TPD cover is not available without Death cover.

Premium rates for Salary Continuance cover (females)

Annual premium per \$100 of monthly benefit for Salary Continuance cover (excluding stamp duty)

RATES FOR FEMALES				
Age next birthday	BENEFIT PERIOD OF 2 YEARS		BENEFIT PERIOD UP TO AGE 65	
	90-day waiting period	30-day waiting period	90-day waiting period	30-day waiting period
16	\$0.58	\$1.71	\$2.88	\$6.79
17	\$0.58	\$1.74	\$2.88	\$6.79
18	\$0.60	\$1.77	\$2.88	\$6.79
19	\$0.61	\$1.82	\$2.88	\$6.79
20	\$0.63	\$1.86	\$2.88	\$6.79
21	\$0.66	\$1.92	\$2.88	\$6.79
22	\$0.69	\$1.98	\$2.92	\$6.96
23	\$0.73	\$2.05	\$2.99	\$7.11
24	\$0.80	\$2.11	\$3.05	\$7.28
25	\$0.83	\$2.14	\$3.12	\$7.45
26	\$0.87	\$2.17	\$3.18	\$7.62
27	\$0.87	\$2.18	\$3.38	\$7.91
28	\$0.88	\$2.19	\$3.56	\$8.28
29	\$0.89	\$2.21	\$3.75	\$8.75
30	\$0.89	\$2.28	\$3.92	\$9.31
31	\$0.90	\$2.39	\$4.11	\$9.98
32	\$0.91	\$2.50	\$4.34	\$10.73
33	\$0.93	\$2.61	\$4.58	\$11.61
34	\$0.97	\$2.74	\$4.86	\$12.59
35	\$1.01	\$2.90	\$5.20	\$13.68
36	\$1.06	\$3.05	\$5.61	\$14.90
37	\$1.13	\$3.23	\$6.10	\$16.23
38	\$1.22	\$3.42	\$6.67	\$17.68
39	\$1.31	\$3.63	\$7.35	\$19.24
40	\$1.43	\$3.84	\$8.15	\$20.92
41	\$1.57	\$4.06	\$9.05	\$22.71
42	\$1.72	\$4.30	\$10.09	\$24.60
43	\$1.89	\$4.52	\$11.29	\$26.58
44	\$2.07	\$4.75	\$12.63	\$28.65
45	\$2.27	\$5.01	\$14.09	\$30.80
46	\$2.49	\$5.29	\$15.71	\$33.00
47	\$2.73	\$5.60	\$17.44	\$35.23
48	\$2.99	\$5.94	\$19.28	\$37.51
49	\$3.28	\$6.32	\$21.23	\$39.77
50	\$3.60	\$6.73	\$23.24	\$42.03
51	\$3.93	\$7.17	\$24.77	\$43.39
52	\$4.29	\$7.63	\$26.24	\$44.63
53	\$4.66	\$8.14	\$27.59	\$45.73
54	\$5.05	\$8.69	\$28.78	\$46.70
55	\$5.45	\$9.26	\$29.77	\$47.79
56	\$5.89	\$9.87	\$29.93	\$49.40
57	\$6.35	\$10.53	\$29.73	\$50.80
58	\$6.83	\$11.22	\$29.17	\$51.85
59	\$7.33	\$11.96	\$28.17	\$52.49
60	\$7.85	\$12.78	\$26.69	\$52.56
61	\$8.39	\$13.68	\$24.68	\$51.82
62	\$8.96	\$14.70	\$22.02	\$49.96
63	\$7.44	\$13.23	\$18.97	\$46.33
64	\$5.60	\$11.03	\$14.68	\$39.27
65	\$2.26	\$6.66	\$5.49	\$21.85

Premium rates for Salary Continuance cover (males)

Annual premium per \$100 of monthly benefit for Salary Continuance cover (excluding stamp duty)

RATES FOR MALES				
Age next birthday	BENEFIT PERIOD OF 2 YEARS		BENEFIT PERIOD UP TO AGE 65	
	90-day waiting period	30-day waiting period	90-day waiting period	30-day waiting period
16	\$0.61	\$1.52	\$2.29	\$4.50
17	\$0.61	\$1.54	\$2.29	\$4.50
18	\$0.62	\$1.57	\$2.29	\$4.50
19	\$0.62	\$1.58	\$2.29	\$4.50
20	\$0.63	\$1.60	\$2.29	\$4.50
21	\$0.64	\$1.63	\$2.29	\$4.50
22	\$0.64	\$1.65	\$2.20	\$4.46
23	\$0.64	\$1.66	\$2.13	\$4.44
24	\$0.64	\$1.68	\$2.06	\$4.42
25	\$0.63	\$1.69	\$2.01	\$4.42
26	\$0.60	\$1.65	\$1.97	\$4.42
27	\$0.58	\$1.61	\$1.96	\$4.50
28	\$0.55	\$1.59	\$1.96	\$4.62
29	\$0.55	\$1.59	\$1.98	\$4.79
30	\$0.54	\$1.61	\$2.03	\$4.99
31	\$0.55	\$1.65	\$2.10	\$5.25
32	\$0.55	\$1.71	\$2.16	\$5.57
33	\$0.56	\$1.77	\$2.28	\$5.92
34	\$0.58	\$1.84	\$2.40	\$6.35
35	\$0.61	\$1.93	\$2.54	\$6.83
36	\$0.64	\$2.02	\$2.73	\$7.36
37	\$0.68	\$2.13	\$2.94	\$7.94
38	\$0.73	\$2.25	\$3.20	\$8.61
39	\$0.80	\$2.39	\$3.48	\$9.34
40	\$0.87	\$2.53	\$3.82	\$10.15
41	\$0.94	\$2.68	\$4.21	\$11.01
42	\$1.03	\$2.84	\$4.65	\$11.95
43	\$1.12	\$3.02	\$5.17	\$12.98
44	\$1.25	\$3.20	\$5.75	\$14.07
45	\$1.38	\$3.38	\$6.42	\$15.24
46	\$1.54	\$3.60	\$7.18	\$16.49
47	\$1.73	\$3.87	\$8.02	\$17.80
48	\$1.94	\$4.16	\$8.96	\$19.19
49	\$2.17	\$4.48	\$10.01	\$20.64
50	\$2.43	\$4.83	\$11.17	\$22.15
51	\$2.71	\$5.23	\$12.41	\$23.74
52	\$3.03	\$5.68	\$13.75	\$25.37
53	\$3.40	\$6.16	\$15.18	\$27.05
54	\$3.81	\$6.69	\$16.71	\$28.77
55	\$4.28	\$7.26	\$18.30	\$30.53
56	\$4.80	\$7.87	\$19.92	\$32.30
57	\$5.37	\$8.52	\$21.52	\$34.02
58	\$6.02	\$9.28	\$23.00	\$35.60
59	\$6.75	\$10.15	\$24.25	\$36.94
60	\$7.55	\$11.12	\$25.12	\$37.90
61	\$8.45	\$12.19	\$22.94	\$38.22
62	\$9.39	\$13.35	\$22.39	\$37.60
63	\$7.77	\$12.01	\$20.56	\$35.43
64	\$5.85	\$10.01	\$16.37	\$30.14
65	\$2.36	\$6.03	\$6.07	\$16.50

Estimating an annual Death and TPD or Death-only insurance premium

Death and TPD cover—same amount of cover for both components

Annual premium = [Insured amount ÷ \$1,000] x Death and TPD premium rate from page 10

Example	
Total insured amount (whether multiple-based and/or fixed dollar cover)	\$160,000 (A)
Units of cover (1 unit = \$1,000 cover) = your level of cover (A) ÷ \$1,000	\$160,000 ÷ \$1,000 = 160 (B)
Premium rate per unit for your age and sex Using the tables on page 10	\$0.47 (C) (based on female aged 35 next birthday)
Your annual insurance premium = your units of cover (B) times your premium rate per unit (C)	= 160 x \$0.47 = \$75.20 per year

Death and TPD cover—different amounts of cover for each component

Annual premium = [(Insured amount ÷ \$1,000) x Death-only premium rate from page 10] + [(Insured amount] ÷ \$1,000) x TPD-only premium rate from page 10]

Use the worked example above to calculate the premium for each component of your cover and add the premiums to get your total annual premium.

Death-only cover

Annual premium = [Insured amount ÷ \$1,000] x Death-only premium rate from page 10

Estimating an annual Salary Continuance insurance premium

Annual premium = [Annual insured amount ÷ (\$100 x 12)] x Salary Continuance premium rate from page 11 or 12

Example	
Annual insured amount	\$50,000 (A)
Units of monthly benefit = your level of cover (A) ÷ \$1,200	\$50,000 ÷ \$1,200 = 41.67 (B)
Premium rate per unit for your sex, age and benefit options Using the tables on page 11 or 12	\$0.61 (C) (based on male aged 35 next birthday and cover with a 2-year benefit period and 90-day waiting period)
Your annual insurance premium = your units of monthly benefit (B) times your premium rate per unit (C)	= 41.67 x \$0.61 = \$25.42 per year

Note: Salary Continuance premiums are waived while you are receiving a benefit.

In some circumstances your premium may change automatically

From time to time, your insurance premiums may change even if you have not requested a change to your amount of cover. This may happen in the following situations:

- On the first premium due date after your birthday each year your premium rate will change based on your new age.
- If your Death and TPD or Death-only cover is based on a multiple of your salary, your amount of cover is re-calculated monthly based on information about your super salary that we receive from the Group. If your super salary changes, your level of insurance cover and therefore your insurance premium will change accordingly.
- If you are a former Group employee, any accepted amount of Salary Continuance cover will be automatically indexed each year (up to the maximum monthly cover amount) by either 7.5% or CPI, whichever is the lesser amount. When indexation occurs, your premiums will increase accordingly. You can choose not to have your cover indexed automatically, but you cannot reverse this decision (ie. opt back into automatic indexation) at a later date. Contact us for more information on this option.

Premium rates may change from time to time

If insurance premium rates increase, we will give you advance notice within the time period specified by law. Additionally, the insurer reserves the right to increase premium rates immediately in the event of war involving Australia, where war includes any act of war (whether declared or not), revolution, invasion, rebellion or civil unrest.

When an insured benefit will be paid

Notifying us of an insurance claim

You (or your representative) must notify us as soon as possible after becoming aware of a claim or potential claim for death, terminal illness or disablement. You must, at your expense, provide us or the insurer with any requirements reasonably considered to be necessary in order to properly assess your claim.

Payment of any insurance benefit is subject to the trustee and insurer accepting your claim under the terms and conditions of the trust deed and the insurance policy.

The insurer may pay a benefit for Death or TPD or Terminal Illness, but not for more than one of these events. However, if you receive a TPD benefit and the amount of your Death cover is greater than your TPD cover, you will still be covered for the remaining amount of Death cover.

The insurer may pay a Salary Continuance benefit in conjunction with a TPD benefit if you have both types of cover and you meet the conditions for both benefits.

If a Death, Terminal Illness or TPD lump sum benefit is payable, it will be paid to your account and invested in the 'Cash' investment option, which is a low-risk and low-growth option. You or your representative will need to consider whether it is appropriate to keep it in this investment option once a benefit becomes payable. For more information refer to the **Reference Guide: Invest your account** available from our website or by calling us.

When a Death (or Terminal Illness) benefit will be paid

You must have Death and TPD or Death-only cover for an insurance benefit to apply. If you die and your claim is accepted by the insurer, a lump sum death benefit will be paid to your Division F account. The balance of your account will then be paid to any one or more of your dependants and/or your legal personal representative. Refer to **Reference Guide: Death benefits** for more information on who can receive a death benefit and how to nominate a beneficiary for your super.

If you become terminally ill and your claim for a Terminal Illness benefit is accepted by the insurer, your death benefit will be pre-paid as a lump sum to your account. To claim for terminal illness, you will need to provide specialist medical evidence to satisfy the insurer that, despite reasonable medical treatment, you have less than 12 months to live.

If a Death claim is not accepted by the insurer (and therefore an insurance benefit is not paid), the balance of your account will be payable. If a claim for Terminal Illness is not accepted by the insurer (and therefore an insurance benefit is not paid), the balance of your account will be payable to you if the trustee is satisfied that you have a terminal medical condition as defined under superannuation law.

When a TPD benefit will be paid

You must have TPD cover for an insurance benefit to apply. If you become totally and permanently disabled and your claim is accepted by the insurer, a lump sum TPD benefit will be paid to your account.

Under the trustee's insurance policy, the definition(s) of TPD that applies to you depends on your age and whether or not you are employed (and for how many hours) at the time of your disablement:

TPD definition	If you are under age 65	If you are aged 65 to 70
Loss of limbs or blindness	Applies	Applies
Inability to perform activities of daily living	Applies	Applies
Inability to engage in any occupation	See note following table	Does not apply

Note: The 'inability to engage in any occupation' definition applies if you are under age 65 as follows:

- For *current Group employees*: applies only if you are employed by the Group for at least 10 hours per week
- For *non-Group employees*: Applies only if you are employed by an employer on a permanent basis for at least 10 hours per week OR if you are self-employed for at least 10 hours per week.

The TPD definitions are described below:

Loss of limbs or blindness, means...

You suffer, as a result of sickness or injury:

- the total and permanent loss of the use of two limbs, OR
- blindness in both eyes, OR
- the total and permanent loss of the use of one limb and blindness in one eye;

where:

- 'limb' means the whole hand below the wrist or whole foot below the ankle, and
- 'blindness' means the permanent loss of sight to the extent that visual acuity is 6/60 or less, or to the extent that the visual field is reduced to 20 degrees or less of arc.

Inability to perform activities of daily living means...

For 6 consecutive months from the date of your disablement and without the physical assistance of another person, you have been totally unable to perform any two of the following activities of daily living, and will be permanently and irreversibly unable to do so for life:

- Dressing—the ability to put on and take off clothing
- Continence—the ability to control bowel and bladder function
- Toileting—the ability to use the toilet, including getting on and off
- Mobility—the ability to get in and out of bed and a chair
- Feeding—the ability to get food from a plate into your mouth

Inability to engage in any occupation means...

As a result of sickness or injury, you have been absent from all employment for 6 consecutive months from the date of your disablement and the insurer considers, on the basis of satisfactory medical and other evidence, that you are unlikely ever to be able to engage in any occupation, whether or not for reward; where occupation means an occupation that you can perform, on a full-time or part-time basis, based on the skills and knowledge you have acquired through previous education, training or experience.

If a claim for TPD is not accepted by the insurer (and therefore an insurance benefit is not paid), the balance of your account will be payable to you if the trustee is satisfied that you are totally and permanently disabled under the terms of the trust deed.

When and how a Salary Continuance benefit will be paid

You must have Salary Continuance cover for a benefit to apply. If you are disabled for a continuous period of longer than your waiting period and your claim for a total or partial disability benefit is accepted by the insurer, you will receive a monthly benefit.

The definitions of disablement for the purposes of Salary Continuance are outlined below:

Partially disabled

You will be partially disabled if you are not totally disabled but, because of sickness or injury, ALL of the following apply to you:

- You have been totally disabled for at least 14 days.
- You are unable to work in your own occupation at full capacity immediately after ceasing to be totally disabled and the inability to work at full capacity is due to the sickness or injury that caused your total disability.
- You are working in your own occupation in a reduced capacity or working in another occupation.
- You earn a monthly income that is less than your monthly income immediately before becoming disabled.
- You are under the regular care of, and following the advice of, a medical practitioner.

where 'own occupation' means the normal occupation or work you carried out immediately before becoming disabled.

Total disability

You will be totally disabled if, because of sickness or injury, ALL of the following apply to you:

- You are unable to perform at least one income-producing duty of your own occupation
- You are under the regular care of, and following the advice of, a medical practitioner.
- You are not working in any occupation, whether or not for reward,

where:

- 'income producing duty' is a duty of your occupation immediately before you became totally disabled that generates or generated 20% or more of your income;
- 'own occupation' means the normal occupation or work you carried out immediately before becoming disabled.

If you are totally disabled, the monthly benefit that will be paid (in arrears) is the *lesser* of the following amounts:

- \$25,000
- 75% of your monthly income immediately before your total disability (as defined in the policy)
- your level of cover accepted by the insurer.

If you are partially disabled, the insurer will pay a proportion of this monthly benefit based on how much your income has been reduced. This benefit tops up your return-to-work salary to a maximum of 75% of your previous salary.

The insurer will only pay a Salary Continuance benefit in relation to one disability at a time.

Important! Salary Continuance premiums are calculated based on your accepted monthly amount of cover. If, at the time of a claim, the amount of your benefit is less than your level of cover (based on the conditions above), you will not be refunded for the excess premiums you have paid on your accepted monthly cover amount. Therefore it is important that you notify us if your income changes to the extent that it is less than your accepted amount of cover.

Payment of any Salary Continuance benefit will begin following your waiting period and continue until the *earliest* of the following:

- you are no longer totally or partially disabled (as applicable)
- the end of your benefit payment period, whether that be 2 years or to age 65
- the next premium due date after you reach age 65
- you die.

A Salary Continuance benefit may be reduced if you receive other payments or income

If you are entitled to a monthly Salary Continuance benefit, the insurer may reduce your monthly benefit by the amount of any income or payment that you receive in respect of your injury or sickness, including:

- sick leave payments
- amounts payable under workers' compensation or motor accident compensation
- benefits payable under any other salary continuance or income protection policies
- income earned from personal exertion while disabled
- income you could reasonably be expected to earn in your occupation while disabled.

A waiting period will not apply if your disability recurs

The waiting period does not apply if you are disabled again from the same or a related cause within six months of last receiving a disability benefit. However, the insurer will treat this as a continuation of the original claim and add both periods of disability (and any subsequent periods) to determine when the benefit payment period ends.

You may be reimbursed for rehabilitation expenses

The insurer may pay your rehabilitation expenses providing the expenses are approved in writing by the insurer before they are incurred, and the expenses are incurred to directly assist you in returning to work in a gainful occupation or in undertaking a vocational retraining program because of your disability.

Generally, these expenses include the cost of a rehabilitation program (other than an excluded rehabilitation program) that a medical practitioner certifies as necessary for your rehabilitation. The insurer will meet these costs by payment directly to the provider of the service.

The maximum amount the insurer will pay for any one disability is the *lesser* of (i) the actual expense amount, and (ii) 24 times your monthly cover amount; less any amounts that can be claimed from any other source for those expenses.

This amount will be paid in addition to the monthly disability benefit and whether or not a disability benefit is payable.

A one-off amount may be payable if you die

If you die while you are entitled to receive a disability benefit, the insurer will pay a one-off amount equal to two times the monthly cover amount.

When an insured benefit will not be paid

For cover transferred from another fund

If it becomes apparent to us or the insurer that:

- you have not transferred your entire account balance from your former fund
- you have not cancelled your cover in your former fund
- you have transferred the cover from your former fund to any other division or section of that fund
- you have effected a continuation option or reinstated your insurance cover within your former fund (or any division or section thereof) or within any fund or insurance policy where such reinstatement is available to you
- you have provided incorrect or incomplete information,

then the insurer reserves the right to decline your claim, delay payment of your claim or reduce your claim by the amount paid or payable from your former fund or any policy issued under any option you have exercised.

Exclusion clauses

In some cases, an insurance benefit will not be payable if your death or disablement is a result of specific situations. These are referred to as **exclusion clauses**. The general exclusion clauses applying to cover are outlined below.

In addition, an insurance benefit may not be payable if your death or disablement is a result of any other specific limitations or restrictions applied by the insurer due to your occupational, personal or medical circumstances and advised to you before your cover commenced.

Suicide

This exclusion only applies to your cover if ALL of the following statements are true for you:

- You are not a permanent full-time or part-time employee of the Group working at least 10 hours per week who last commenced employment with the Group on or before 1 March 2006.
- Your death, terminal illness or TPD occurs within 12 months of your cover commencing, recommencing or increasing.
- Your death, terminal illness or TPD is the result of an actual or attempted suicide or self-inflicted injury or infection (whether or not you are sane at the time).

If this exclusion applies to you and your insurance cover has increased within 12 months of your death, terminal illness or TPD, only the increased portion of the insurance benefit will not be payable under this exclusion. A benefit will still be payable in respect of your original cover amount.

War

This exclusion applies if your death, terminal illness, TPD or disability (for salary continuance purposes) is directly or indirectly caused by war, including any act of war (whether declared or not), revolution, invasion, rebellion or civil unrest.

This exclusion does not apply to death cover if you die while on war service.

Pre-existing condition

This exclusion only applies to your cover if ALL of the following statements are true for you:

- You last commenced employment with the Group on or after 1 May 2005.
- Your 'event date' is on or before 31 December 2010, where 'event date' generally means:
 - for TPD – the date you were last physically able to attend work,
 - for terminal illness – the date that two medical practitioners certify that you are terminally ill, and
 - for death – your date of death.
- Your death or the sickness or injury which causes your TPD occurs within five years of your insurance cover last commencing.
- Your death or TPD is caused directly or indirectly by a pre-existing condition.

If this exclusion applies to you, it will only apply to any cover that may have been originally provided to you automatically (ie. without providing any medical evidence for cover). It *does not apply* to any insurance cover that you have applied for and received unless the insurer lists the condition as a specific limitation or restriction when accepting your application for cover. If you previously had automatic cover that was subject to a pre-existing condition exclusion clause, that exclusion may continue to apply to your cover if your employment basis changes or you leave employment with the Group.

A **pre-existing condition** is a sickness or injury for which you received medical advice, treatment, care or services (including tests or other diagnostic measures) or were prescribed stimulants, sedatives, tranquillisers, antibiotics, drugs or medication at any time during the two years immediately before the date your insurance cover last commenced.

If this exclusion would ordinarily apply to you, you can ask the trustee and the insurer to remove all or some pre-existing conditions from the exclusion clause. The insurer may also consider removing all or some pre-existing conditions from the exclusion clause if you request an increase in your insured amount.

Additional exclusions that apply to salary continuance cover

In addition to the war exclusion outlined on this page, a salary continuance benefit is not payable if your disablement is a result of:

- attempted suicide or intentional self-inflicted injury or infection, whether or not you are sane at the time, OR
- uncomplicated pregnancy or childbirth, including multiple pregnancy, caesarean birth, threatened miscarriage, post-natal depression, participation in an IVF or similar program, and normal discomfort commonly associated with pregnancy such as morning sickness, backache, varicose veins, ankle swelling and bladder problems.

Continuing your insurance cover if you leave Division F

If your entire account balance is withdrawn or transferred from Division F and you are eligible for the continuation option described below, your insurance cover will continue temporarily from the date of withdrawal or transfer for up to 60 days.

We do not deduct an insurance premium for this temporary cover.

After the period of temporary cover (if applicable), your insurance through Division F will end. However, you may be eligible to continue any Death cover and/or Salary Continuance cover under an individual insurance policy directly with the fund's insurer through a **continuation option**. This is a special arrangement with the trustee's insurer, subject to separate conditions from those that apply to the trustee's insurance policy.

The insurance premiums that you pay under the continuation option may not be at the same rates as those paid under the trustee's insurance policy while you were a Division F member.

Note: TPD cover is not available under the continuation option.

You must apply to take up the continuation option within 60 days

You must apply to take up the continuation option and the insurer must receive your premium within 60 days of leaving Division F. We will send you more information and a continuation option form if you leave Division F.

To be eligible to take up the continuation option, you must meet the following conditions:

- You are no longer an employee of the Group (or not an employee in the case of a spouse member).
- You are under age 60 if applying to continue Death cover and you are under age 55 if applying to continue Salary Continuance cover.

- No benefit is payable (or about to be payable) for you under the trustee's insurance policy.
- Your insurance premium is not overdue.
- You meet the insurer's minimum policy issue and underwriting requirements.
- You are not joining any armed forces (other than the Australian Armed Forces Reserve)

In addition, the trustee's insurance policy must still be in force.

These continuation option arrangements are subject to change by the insurer.

Cover generally applies worldwide

Division F cover applies anywhere in the world, subject to the conditions of the cover. Therefore, you are covered if you are seconded overseas by the Group for employment purposes. If you are disabled overseas, you may have to return to Australia at your own expense for assessment.

Note: The trustee's policies do not cover you in the event of an act of war (as defined in the policy) unless the insurer agrees otherwise before you leave Australia.

Insurance risk

As with all financial products, there are some risks associated with your super account, including risks associated with insurance cover:

- The insurance options offered through Division F may not suit your individual needs.
- In some cases, you may not be eligible for insurance cover in Division F, therefore you will need to make other arrangements if you wish to have cover.
- Your cover may be subject to exclusion clauses, or any other limitations or restrictions applied by the insurer at the time of accepting your application for cover.
- If you are disabled, there may be a waiting period from the date you last worked before a claim may be considered.
- All claims are subject to acceptance by the trustee and the insurer under the terms and conditions of the trust deed and the insurance policy.

About the insurance policy

The trustee's insurance policy is provided by the insurer, The Colonial Mutual Life Assurance Society (ABN 12 004 021 809).

Insurance through Division F is governed by our insurance policy documents. You can view a copy of the policy documents at the trustee's office or we can provide you with a copy free of charge.

The PDS (including this Reference Guide) provides a summary of the features of the insurance cover and the relevant terms and conditions. If there are any differences between what is written in this PDS or the Reference Guide and the insurance policy documents, the insurance policy documents will prevail.

The policy documents can be altered at any time. The insurer can, in certain circumstances, change the eligibility criteria, premium rates or automatic acceptance levels after three months notice to us (or immediately if there are certain changes to relevant laws). For salary continuance cover, there is no limitation on the circumstances in which the insurer can vary the eligibility criteria or premium rates provided it gives at least three months notice to us.

The trustee may change the insurer at its discretion or depending on the state of the market or competition.

For more information

[View or print copies of this PDS or Reference Guides, forms or other documents](#)

Internet osfsuper.com.au

Intranet CommNet or HR Intranet sites > Employee Benefits > Our Super Fund (accessible to Group employees only)

[Access your account online](#)

Login osfsuper.com.au

[Contact us](#)

Phone 1800 023 928 between 8.30am and 5.00pm (Sydney time), Monday to Friday

Email osfms@colonialfirststate.com.au

Fax (02) 9303 7700

Mail GPO Box 4758 Sydney NSW 2000

This Reference Guide was prepared and issued by Commonwealth Bank Officers Superannuation Corporation Pty Limited (ABN 76 074 519 798, AFSL 246418), Ground Floor 201 Sussex Street, Sydney NSW 2000, as trustee of the Officers' Superannuation Fund (OSF) (ABN 24 248 426 878, SPIN OSF001AU). The information in this Reference Guide is general information only and does not take into account your individual objectives, financial situation or needs. You should consider the information contained in the PDS and this Reference Guide and its appropriateness, having regard to your objectives, financial situation and needs, before making a decision about this product or whether to acquire or continue to hold the product. You should seek professional advice tailored to your personal circumstances from a licensed financial adviser. The PDS is available and can be obtained from our website osfsuper.com.au or by calling us on 1800 023 928.