

Sunsuper for life Insurance guide

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Insurance in your super

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Important information

This is the *Sunsuper for life Insurance guide*. The information in this *guide* forms part of the *Sunsuper for life Product Disclosure Statement (PDS)* issued 1 January 2021. The *PDS* references important information contained in this *guide* by "it". This *guide* may reference important information contained in the *Sunsuper for life Investment guide* and *Sunsuper for life guide*. The *PDS* should be read in its entirety before making a decision to acquire or continue to hold an interest in the product.

General advice disclaimer

This document contains general information only and doesn't take into account your personal objectives, financial situation or needs. You should consider the appropriateness of the information in this document with regard to your objectives, situation and needs. You should obtain financial advice tailored to your circumstances. Call us if you would like to speak to a qualified financial adviser.

Protecting your privacy

Sunsuper respects the privacy of the information you give us. If you require a copy of our Privacy Policy visit sunsuper.com.au/privacy or contact us.

Financial Services Guide (FSG)

The FSG contains information about the financial services Sunsuper Pty Ltd (ABN 88 010 720 840, AFSL No. 228975) provides and will help you decide whether to use these services. Visit sunsuper.com.au/fsg or contact us for a copy.

The insurer

Insurance cover is provided through group life policies for Death and Total & Permanent Disability, and Income Protection, issued by AIA Australia Limited (AIA Australia) ABN 79 004 837 861 ASFL No. 230 043 to the Trustee of the Sunsuper Superannuation Fund. In the event of a dispute the policy will override the information in the *PDS* and this *guide*.

In conjunction with either a disablement claim application or an application for additional cover, Sunsuper members may be contacted directly by an AIA Australia representative on behalf of the Fund to discuss or gather information relating to their application.

AIA Australia Privacy

AIA Australia also respects your privacy. AIA Australia's handling and exchange of your personal and sensitive information is outlined in the AIA Australia Privacy Policy available at aia.com.au or by calling AIA Australia on 1800 333 613.

Refund of premiums to the Trustee

As part of the Trustee of the Sunsuper Superannuation Fund's arrangements with AIA Australia to provide insurance to Fund members, the Trustee may receive a refund of premiums, depending on the level of claims against the insurance policies. The Trustee will pass on any refunded premiums through adjustments to future premiums, or will use refunded premiums to assist with insurance administration costs. Any refunded premiums which are received and not yet used for these purposes are allocated to an insurance reserve.

Insurance in Superannuation Voluntary Code of Practice

Sunsuper complies with the Insurance in Superannuation Voluntary Code of Practice (Code). The Code is the superannuation industry's commitment to high standards when providing insurance to members of superannuation funds. The Code contains standards we will uphold when providing insurance benefits to you. Please refer to sunsuper.com.au/insurance for more information on the Code.

1. Why have insurance?

Protecting your retirement dreams is just as important to us as helping you reach them. And while no one expects the worst to happen, the right insurance cover can help you and your family feel prepared and protected.

Why should I insure through Sunsuper?

As a profit-for-members super fund, our sole purpose is to help our members achieve their dream retirement. Our insurance options are designed to help members safeguard their and their families' financial future, while providing a default level of death and total and permanent disability insurance. Our only motivation is to act in the best interests of our members.

Insurance cover with Sunsuper continues even if you leave your employer. We're able to use our size and scale to work hard to provide flexible and affordable insurance cover for our members.

We also understand that life's full of changes, so it's good to know that Sunsuper's insurance cover is flexible so you can make changes as your life changes. We offer easy ways for you to change your cover, apply for cover, or cancel your cover at any time. Insurance cover through Sunsuper protects you 24 hours a day, 7 days a week.

At Sunsuper, the types of insurance cover we offer are outlined as follows:



Standard and Tailored Death cover to age 70 (including **Terminal Illness**)

Standard Death cover is automatically provided to eligible members of Sunsuper. Tailored cover provides you with death cover to suit your needs. Death cover is paid as a lump sum, if you die or meet the **Terminal Illness** definition.



Standard and Tailored Total & Permanent Disability Assist cover to age 67

Standard Total & Permanent Disability Assist cover is automatically provided to eligible members of Sunsuper.

Tailored Total & Permanent Disability Assist cover provides you with additional disability cover to suit your needs.

If you are suffering from long term injury or sickness we may provide early intervention and occupational rehabilitation support. Where you are totally and permanently disabled and you continue to meet the **Total & Permanent Disability Assist** definition, you may receive up to six support payments over a minimum of five years to help you pay any debts and bills and fund disability related expenses such as home modifications, rehabilitation and special medical needs. In limited circumstances, Total & Permanent Disability Assist may be paid as a single lump sum payment.



Tailored Total & Permanent Disability cover to age 67

As an alternative to Tailored Total & Permanent Disability Assist cover, you may choose to apply for Tailored Total & Permanent Disability cover to suit your needs. Total & Permanent Disability cover is paid as a lump sum, if you meet the **Total & Permanent Disability** definition, to help you to fund any special medical needs, and assist with your costs of living.



Opt-In Income Protection cover to age 65

Provides an income for up to two years while you are unable to work due to sickness or injury to help you pay your expenses while you focus on your health and recovery.



Tailored Income Protection cover to age 65

Provides a replacement income where you become sick or injured and cannot work as a result. You can tailor cover to suit your individual circumstances by electing a range of **Benefit Periods** and **Waiting Periods**.

Bring your cover with you

It's simple, you can apply to transfer existing Death, Total & Permanent Disability and Income Protection cover anytime.

You may be eligible to transfer existing Death and/or Total & Permanent Disability cover (from other super funds or insurance policies up to \$1,000,000), and/or Income Protection cover (up to \$10,000 per month in total) to Sunsuper. Simply download and complete the *Transfer of insurance cover* form at [sunsuper.com.au/insuranceforms](https://www.sunsuper.com.au/insuranceforms) and return it to us.

It's important you include all required documentation. If you are thinking about transferring your existing insurance cover, make sure you compare the features and benefits, and are accepted by the insurer, before cancelling existing cover. If accepted by the insurer you will be subject to the terms and conditions outlined in the policy.

Insurance in your Super-savings account

Eligible members are provided with automatic Death and Total & Permanent Disability Assist cover. For more information refer to *3 Am I eligible for insurance cover?*

It's important to review your insurance needs and check whether automatic insurance cover is enough.

Key Facts Sheet

The Key Facts Sheet summarises the key features about the automatic insurance cover provided. It is provided in a consistent format, thus allowing you to easily compare features across all superannuation providers. The Key Facts Sheet is available at [sunsuper.com.au/insurance](https://www.sunsuper.com.au/insurance).

Renewal of cover

Once your insurance cover commences we renew your benefits every year until cover stops. For full details on when cover stops, please refer to *When does Death and Total & Permanent Disability insurance cover stop?* in Section 4 *Death and Total & Permanent Disability cover* and *When does Income Protection cover stop?* in Section 5 *Income Protection cover*. Continuation of cover is subject to there being sufficient funds available and ongoing contributions in your *Super-savings account* to pay the weekly premium. Your eligibility for insurance cover is outlined in Section 3 *Am I eligible for insurance cover?*

2. How much cover do I need?

Different people will have different needs depending on their individual circumstances. You may need more cover, you may want to protect yourself with Income Protection cover, or you might not want insurance at all. With Sunsuper you can apply for the cover you need.

Working out how much insurance is right for you can be a difficult task. The amount of insurance you need will depend on a combination of things such as your liabilities, assets, ongoing expenses and your expected standard of living. Once you have read through this *guide* for details on the insurance we offer, you can work through the following steps to work out how much insurance is right for you.

1 How much money will I need?

Generally, you should have enough money to pay all large debts and cover daily living expenses for yourself and your family for a certain period of time. As a starting point, list the current financial commitments you have. Keep in mind your insurance needs will change as your life changes.

2 How much money do I have?

Consider your existing sources of income (other than your salary) and savings.

3 Use our Insurance needs calculator to work out your needs

Use this calculator to work out how much Death, Total & Permanent Disability and Income Protection cover you may need. The calculator is available at [sunsuper.com.au/calculators](https://www.sunsuper.com.au/calculators)

It is important to understand that using your superannuation account now for the payment of insurance premiums before retirement will impact upon your future balance when you do retire.

4 How much insurance do I need?

You may find your needs are greater than your savings. This is where insurance comes in. It can be used to meet the shortfall between your needs and your existing savings. Keep in mind that different types of cover may be paid as a lump sum or as multiple benefit payments, and the payment method could have a significant impact on whether the amount of cover you have is adequate for your needs.

5 Do you need some help?

Call **13 11 84** to speak to one of our qualified financial advisers¹.

Need some financial advice?

Speak to your financial adviser. If you don't have your own personal financial adviser and you need advice about your Sunsuper account, Sunsuper also has qualified financial advisers¹ who can help you over the phone with simple advice about your Sunsuper account. This service is included in your membership fee. If the advice you need is more complex or comprehensive in nature, we may refer you to an accredited external financial adviser². Advice of this nature may incur a fee.

- ¹ Sunsuper employees provide advice as representatives of Sunsuper Financial Services Pty Ltd (ABN 50 087 154 818 AFSL No. 227867) (SFS), wholly owned by the Sunsuper Superannuation Fund.
- ² Sunsuper has established a panel of accredited external financial advisers who are not employees of Sunsuper. Sunsuper is not responsible for the advice provided by these advisers and does not receive or pay any referral fees. These advisers will explain to you how their advice fees are determined.

3. Am I eligible to receive insurance cover automatically?

Australian Government reforms restrict when super funds can provide automatic insurance cover to members. The purpose of these reforms is to help protect members' retirement savings from being eroded by premiums for insurance cover they may not want or need.

Under the *Putting Members' Interests First* reforms, we generally cannot automatically provide insurance cover to new members before they attain age 25 or before their account balance reaches \$6,000. These age and balance requirements are now a key component of the eligibility criteria for you to automatically receive Standard insurance cover.

However, you do have the option to request Standard insurance cover before the age 25 and \$6,000 account balance requirements (subject to you meeting the other eligibility criteria). See the *Opt in to Standard cover sooner* section for details.

Insurance cover is not available for members under the age of 15.

It is very important to check your eligibility for cover. If you are not eligible to opt in or automatically receive Standard Death and Total & Permanent Disability Assist, or Opt-In Income Protection cover you can apply for Tailored cover at any time.

The following table outlines insurance cover eligibility requirements for automatic Standard Death and Total & Permanent Disability Assist cover, and Opt-In Income Protection cover. If you're unsure if you are eligible for insurance cover with Sunsuper, call us today on **13 11 84**.

Types of insurance cover	Age	Eligible for cover	Not eligible for cover
Standard Death	15-69	<ul style="list-style-type: none"> You are actively employed¹ and we are receiving Superannuation Guarantee (SG) contributions for you, and <ul style="list-style-type: none"> you have attained age 25 and your account balance has reached \$6,000, or you have opted in to Standard cover before you have attained age 25 or before your account balance has reached \$6,000. 	<ul style="list-style-type: none"> you are self-employed,² or you are not employed, or you have previously received or are eligible to receive a Terminal Illness benefit, Total & Permanent Disability benefit, or a benefit as a result of Permanent Incapacity or a Terminal Medical Condition from a superannuation fund or insurer.
Standard Total & Permanent Disability Assist	15-66		
Opt-In Income Protection	15-64	<ul style="list-style-type: none"> you are actively employed¹ on a permanent basis for a minimum of 15 hours per week, and you have Standard Death and Total & Permanent Disability Assist cover, and you have selected this Opt-in Income Protection option within 120 days of joining Sunsuper. 	<ul style="list-style-type: none"> you are self-employed,² or you are not employed, or you are a casual or contract employee,³ or you are working less than 15 hours per week, or you are employed under a work visa,³ or you have previously received or are eligible to receive a Terminal Illness benefit, Total & Permanent Disability benefit, or a benefit as a result of Permanent Incapacity or a Terminal Medical Condition from a superannuation fund or insurer.

¹ You will be actively employed if you satisfy the **At Work** definition at the date your automatic Death and Total & Permanent Disability Assist, and Opt-In Income Protection cover starts - refer to 9 Definitions for the **At Work** definition.

² Self-Employed means a person who is predominantly working in their own business on a regular basis and earning an income - refer to 9 Definitions for the **Self-Employed Person** definition.

³ Casuals, contractors, **Self-Employed Persons** and members employed under a work visa may apply for Tailored Income Protection - refer to 5 Income Protection cover.

Other important eligibility terms and conditions

Death and Total & Permanent Disability (including Total & Permanent Disability Assist)

- As a general rule, your eligibility for insurance cover, including Death and Total & Permanent Disability Assist and White Collar cover will not be assessed until you make a claim.
- Limited Cover** will apply until you satisfy the **At Work** requirements for 30 consecutive days where:
 - your automatic Standard cover commences within 120 days of the latter of you attaining age 25 or your account balance reaching \$6,000, or
 - you have opted in to Standard cover before attaining age 25 and your account balance reaching \$6,000, and this cover commenced within 120 days of the date you joined your employer and the date you joined Sunsuper.
- Limited Cover** will apply to your cover for a period of 24 months and will cease to apply once you satisfy the **At Work** requirements for 30 consecutive days after the end of the 24 month period where:
 - your automatic Standard cover commences more than 120 days after the latter of you attaining age 25 and your account balance reaching \$6,000, or
 - you have opted in to Standard cover before attaining age 25 and your account balance reaching \$6,000, and this cover commenced more than 120 days after the date you joined your employer or the date you joined Sunsuper. If you attained age 25 and reached an account balance of \$6,000 before the expiration of the 24 month **Limited Cover** period, this limitation on your Standard cover would be lifted subject to you meeting the 30 consecutive days **At Work** requirement from that date.
- You are not eligible to request or apply for insurance cover until you turn age 15. You will not be automatically provided with Standard Insurance cover before you turn age 25.
- A Death or Total & Permanent Disability benefit will not be paid where Death or Total & Permanent Disability is caused by suicide or any intentional self-inflicted act within 12 months of your insurance cover start date if:
 - your automatic Standard insurance cover start date is more than 120 days after the latter of you attaining age 25 and your account balance reaching \$6,000, or
 - you have opted in to Standard cover before attaining age 25 and your account balance reaching \$6,000, and this cover commenced more than 120 days from the date you joined your employer or the date you joined Sunsuper, or
 - you have White Collar cover and your cover commenced more than 120 days after the date you joined your employer or the date you joined Sunsuper, or
 - you have Life and Age Events cover, or
 - you have Tailored cover.
- You will not be eligible for Standard cover if you have applied and been accepted for Tailored cover (including a transfer of cover) by the insurer prior to obtaining Standard cover.
- Members whose financial affairs are under the supervision of a third party due to their medical condition or incapacity, such as a Public Trustee Office, are entitled to Death cover only, subject to satisfying the **At Work** requirements for 30 consecutive days after cover commences. Where the member is not able to satisfy the **At Work** test for the initial 30 consecutive days from when cover commences, then a **Limited Cover** applies for 24 months and this will cease to apply once the person satisfies the **At Work** requirements for 30 consecutive days after the end of the 24 month period. A death benefit will not be paid where death is caused by suicide within 12 months of the insurance cover start date.

They will also not be able to apply for Life and Age Event options or for White Collar cover.

- If you ceased employment with your employer due to sickness or injury, Death and Total & Permanent Disability cover transferred from either *Sunsuper for life Corporate* or *Sunsuper for life Business* will be **Limited Cover**. **Limited Cover** will apply until you have been **At Work** for 30 consecutive days.

Income Protection

- As a general rule, your eligibility for Opt-In Income Protection or White Collar Income Protection cover will not be assessed until you make a claim.
- If you have Opt-In Income Protection or White Collar Income Protection cover, **Limited Cover** will apply for the first 24 months and will apply until you satisfy the **At Work** requirements for 30 consecutive days after the initial 24 month period.
- An Opt-In Income Protection or Tailored Income Protection benefit will not be paid if the injury or sickness is caused, wholly or partly, directly or indirectly, from:
 - deliberate self-inflicted injury, or attempted suicide, or self-destruction while sane or insane;
 - uncomplicated pregnancy, childbirth or miscarriage;
 - your deployment to a hostile environment as part of active military service, where you participate in active service after your cover commences or increases;
 - a criminal act committed by you; or
 - any matter subject to an individual exclusion that has been imposed on your Tailored Income Protection cover.
- You are not eligible for Opt-In Income Protection or White Collar Income Protection cover if your financial affairs are under the supervision of a third party such as the Public Trustee Office, due to your medical condition or incapacity.
- An Opt-In Income Protection or Tailored Income Protection benefit will not be paid in the event of a fraudulent claim.

Not eligible for cover

If you are not eligible to opt into or automatically receive Standard Death and Total & Permanent Disability Assist or Opt-In Income Protection cover you can apply for Tailored cover. Any application will be subject to acceptance by the insurer (satisfactory evidence of health will be required).

To avoid being charged premiums for cover that you are ineligible for, please ensure that you notify us if you are ineligible, or contact us if you would like to discuss whether you are eligible for Standard Death and Total & Permanent Disability Assist cover or Opt-In Income Protection cover. Premiums paid for the period you were deemed ineligible for cover will be refunded to your *Super-savings account*.

Premiums will not be refunded in the instance you are ineligible to claim a benefit as a result of **Limited Cover**.

Self-Employed, unemployed or unpaid Domestic Duties

If you are **Self-Employed**, unemployed or are engaged in unpaid **Domestic Duties** in your own home you are eligible to apply for Tailored cover.

Multiple Super-savings accounts

If you have two or more *Super-savings accounts* in *Sunsuper for life*, you will only be entitled to insurance cover from one account (does not include *Sunsuper for life Corporate Super-savings accounts* and *Sunsuper for life Business Super-savings accounts*).

Special offers

Some members may have other insurance offers made to them from time to time or you may be part of a group transfer from another fund. Your insurance arrangements and eligibility may differ from those contained in this *guide*. You will be advised if this applies to you.

When does my insurance cover start?

The following table outlines the types of cover, when your cover will start and some of the conditions applicable to that cover. For details on how you can apply for the insurance covers listed, please refer to *6 How do I apply?*

Standard Death and Total & Permanent Disability Assist		
Requirements for insurance cover to start	Insurance cover start date	Other eligibility requirements (<i>Limited Cover</i> ¹ and <i>At Work</i> ² rules)
<p>Standard cover is automatically provided when:</p> <ul style="list-style-type: none"> you attain age 25, and your account balance reaches \$6,000, and we receive an SG contribution on your behalf. 	<ul style="list-style-type: none"> Cover starts when you have attained age 25 and reached an account balance of \$6,000, if an SG contribution was received in the prior 120 days. Otherwise, cover starts on the date of receipt of the next SG contribution following the latter of you attaining age 25 and reaching an account balance of \$6,000. 	<ul style="list-style-type: none"> If cover starts within 120 days of the latter of you attaining age 25 and reaching an account balance of \$6,000, then Limited Cover will apply until you satisfy the At Work requirements for 30 consecutive days. Otherwise, Limited Cover will apply until you satisfy the At Work requirements for 30 consecutive days after an initial 24 month Limited Cover period.
<p>Opt in to Standard cover sooner - you can opt into Standard cover before attaining age 25 and before reaching an account balance of \$6,000. We need to be receiving SG contributions on your behalf.</p>	<ul style="list-style-type: none"> If an SG contribution was received in the prior 120 days, your cover starts on the date we receive your request to opt in to Standard cover. Otherwise, cover starts on the date of the next SG contribution following receipt of your request to opt in to Standard cover. 	<ul style="list-style-type: none"> If cover starts within 120 days of the date you joined Sunsuper and the date you joined your contributing employer, then Limited Cover will apply until you satisfy the At Work requirements for 30 consecutive days. Otherwise, Limited Cover will apply until you satisfy the At Work requirements for 30 consecutive days after an initial 24 month Limited Cover period.³
Opt-In Income Protection		
Requirements for insurance cover to start	Insurance cover start date	Other eligibility requirements (<i>Limited Cover</i> ¹ and <i>At Work</i> ² rules)
<p>If you hold or are applying for Standard cover, you can apply for Opt-In Income Protection cover within 120 days of joining Sunsuper.</p>	<p>Your Opt-In Income Protection cover starts on the later of:</p> <ul style="list-style-type: none"> the start date of your Standard cover, or the date your Opt-In Income Protection application is accepted. 	<p>Limited Cover will apply until you satisfy the At Work requirements for 30 consecutive days after the end of an initial 24 month Limited Cover period.</p>
White Collar cover		
Requirements for insurance cover to start	Insurance cover start date	Other eligibility requirements (<i>Limited Cover</i> ¹ and <i>At Work</i> ² rules)
<p>If you hold, or apply for Standard cover, you can apply for White Collar cover:</p> <ul style="list-style-type: none"> within 120 days of joining Sunsuper using <i>Member Online</i>, a <i>Membership Application</i> form, or a <i>New Member Options</i> form, or outside 120 days of joining Sunsuper using the <i>Increase or update your insurance cover</i> form in <i>Member Online</i> (which includes a short health assessment questionnaire). 	<p>Your White Collar cover will start on the later of:</p> <ul style="list-style-type: none"> the start date of your Standard cover, or the date your White Collar application is accepted. 	<ul style="list-style-type: none"> If your request is within 120 days of joining Sunsuper, then Limited Cover will apply to any increase in your cover until you satisfy the At Work requirements for 30 consecutive days after an initial 24 month Limited Cover period, If your request is outside 120 days of joining Sunsuper, then the Limited Cover requirements apply to all of your cover.

Life and Age Events		
Requirements for insurance cover to start	Insurance cover start date	Other eligibility requirements (<i>Limited Cover</i> ¹ and <i>At Work</i> ² rules)
On application by you, not more than 180 days after the Life or Age Event.	Date of acceptance of your application by the insurer.	Limited Cover will apply to any increase in your cover above Standard cover until you satisfy the At Work requirements for 30 consecutive days after an initial 24 month Limited Cover period.
Tailored Death, Total & Permanent Disability, Total & Permanent Disability Assist and Income Protection cover		
Requirements for insurance cover to start	Insurance cover start date ⁴	Other eligibility requirements (<i>Limited Cover</i> ¹ and <i>At Work</i> ² rules)
On application by you at any time.	Date of acceptance of your application by the insurer. ⁴	Individual exclusions or loadings may be applied to your cover.

- ¹ **Limited Cover** - means you are only covered for an illness that first became apparent, or an injury which first occurs on or after the date your cover began. Please refer to *9 Definitions* for the full insurance policy definition.
- ² **At Work** - means you are actively performing or capable of performing all of your normal duties without limitation due to sickness or injury, and where working, you are working normal hours on the day the cover is to commence. Please refer to *9 Definitions* for the full insurance policy definition.
- ³ If you attain age 25 and reach an account balance of \$6,000 before the **Limited Cover** would have otherwise ended, the limitation will be lifted subject to you being **At Work** for 30 consecutive days after the date you meet both the age and balance requirements.
- ⁴ Cover will generally start from the date the insurer approves your application. However, as a condition of acceptance of Tailored cover, the insurer may apply a loading (a higher premium) for the increased amount of cover. The insurer may also specify a benefit exclusion that will apply if a claim for the increased amount of insurance is related to a specified condition or pastime. You will be advised if any loadings or exclusions apply in advance of any Tailored cover commencing. If you accept the terms of this Special Acceptance offer (if applicable), your Tailored cover will start on the date you accept.

4. Death and Total & Permanent Disability Cover

With Sunsuper, eligible members can get automatic protection for what matters most - your earning capacity and your family's financial security. Eligible members automatically receive Standard Death and Total & Permanent Disability Assist cover, unless you have told us that you do not want this cover.

If you die, your dependants or your beneficiaries may receive a lump sum. If you become totally and permanently disabled, you may receive up to six support payments, where you continue to meet the relevant definition, combined with occupational rehabilitation (where appropriate) to assist you to return to wellness, or in some limited circumstances, a lump sum benefit that can help you towards paying any debts and bills and fund disability-related expenses such as home modifications, rehabilitation, and special medical needs.

Standard Death and Total & Permanent Disability Assist

Standard Death and Total & Permanent Disability Assist Cover is automatically provided to eligible members, without needing to undergo any medical examinations.



Death cover

If you die, your dependants or beneficiaries may receive a lump sum. Or you can receive a *Terminal Illness* benefit.



Total & Permanent Disability Assist

If you are totally and permanently disabled, you may receive occupational rehabilitation support and up to six support payments or in some limited circumstances a single lump sum payment.

Automatic Insurance

Eligible members automatically receive Standard Death and Total & Permanent Disability Assist cover. Eligibility includes attaining age 25 and reaching an account balance of \$6,000.

How much Standard cover do you get and what does it cost?

The amount and cost of cover depends on your age, gender and type of cover. The amount of your cover changes as you get older.

Standard Death and Total & Permanent Disability Assist cover levels (example)

Your age	Standard Death (\$)	Standard TPD ¹ Assist (\$)			Standard Death and TPD ¹ Assist premium (\$) per week	
		Initial support payment	Subsequent support payments	Maximum Benefit ²	Male	Female
25	125,000	43,750	26,250	175,000	4.16	2.68
35	240,000	60,000	36,000	240,000	7.44	4.84
45	132,000	33,000	19,800	132,000	8.92	6.84
55	42,000	10,500	6,300	42,000	8.92	6.84
65	16,000	16,000	0	16,000	8.92	6.84

¹ TPD means Total & Permanent Disability.

² The maximum benefit shown is the sum of the initial support payment and all 5 subsequent support payments.

If you are approved for a Total & Permanent Disability Assist benefit, you may be paid up to six support payments over a minimum of five years (where you continue to meet the **Total & Permanent Disability Assist** definition). The initial support payment is calculated as 25% of your maximum benefit amount at the **Date of Disablement**. The subsequent support payments (up to a maximum of five payments) are each calculated as 15% of your maximum benefit amount at the **Date of Disablement**.

To find out which level of cover and premium applies to you please refer to *7 Premium Rates - (Premium table 1)*. Total & Permanent Disability Assist cover ends at age 67.

Premiums are calculated weekly and normally deducted from your *Super-savings account* each month so it doesn't impact your take-home pay.

Opt in to Standard cover sooner

When you join Sunsuper, you can request Standard insurance cover before you attain age 25, and before your balance reaches \$6,000. We need to be receiving SG contributions on your behalf.

You can choose this option upon joining Sunsuper when you join online, via your **Member Online** account (if you are already a member) or you can request Standard cover by completing and returning your *Membership application* form.

Will my cover change as I get older?

Yes, the amount and cost of cover will generally alter at certain ages.

We will confirm your cover each year in your *Annual statement* and *Annual insurance summary*. To confirm your cover amount at any time just visit **Member Online** or the Sunsuper app or contact us.

White Collar cover

If you are eligible and work in a White Collar role you can apply for White Collar cover which provides 50% more Death and Total & Permanent Disability Assist cover for the same cost. Refer to *White Collar cover* for more details.

Exclusions and restrictions

A Death, Total & Permanent Disability Assist or **Terminal Illness** benefit will not be paid:

- where your death is caused by suicide or your injury or illness is caused by any intentional self-inflicted act within 12 months of your insurance cover start date, where:
 - you have White Collar cover and your cover commenced more than 120 days after the date you joined your employer or the date you joined Sunsuper, or
 - your automatic Standard insurance cover start date is more than 120 days after the latter of you attaining age 25 and your account balance reaching \$6,000, or
 - you have opted in to Standard cover before attaining age 25 and your account balance reaching \$6,000, and this cover commenced more than 120 days from the date you joined your employer or the date you joined Sunsuper.

- if you are deployed to a hostile environment as part of active military service, where you participate in active service after your cover commences or increases, or
- prior to receiving cover you had received, or were eligible to receive, a **Terminal Illness** benefit, Total & Permanent Disability benefit or a benefit as a result of **Permanent Incapacity** or a **Terminal Medical Condition**.

Limited Cover will apply until you satisfy the **At Work** requirements for 30 consecutive days where:

- your automatic Standard cover commences within 120 days of the latter of the date you attain age 25 and your account balance reaches \$6,000 (subject to you meeting the other eligibility criteria), or
- you have opted in to Standard cover and this cover commences within 120 days of the date you joined your employer and the date you joined Sunsuper.

Limited Cover will apply to your cover for a period of 24 months, and will cease to apply once you satisfy the **At Work** requirements for 30 consecutive days after the end of the initial 24 month period where:

- your automatic Standard cover commences more than 120 days after the latter of the date you attain age 25 and your account balance reaches \$6,000, or
- the Standard cover you request commences more than 120 days after the date you joined your employer or the date you joined Sunsuper. If you attain age 25 and reach an account balance of \$6,000 before the expiration of the 24 month **Limited Cover** period, this limitation on your Standard cover is lifted subject to you meeting the 30 consecutive days **At Work** requirement from that date.

Please refer to the definition of **Limited Cover** and **At Work** in *9 Definitions*.

What is Total & Permanent Disability Assist?

Intention of Total & Permanent Disability Assist

The intention of **Total & Permanent Disability Assist** insurance cover is to provide support payments to you should you suffer an injury or illness that permanently prevents you from working to retirement age.

Total & Permanent Disability Assist insurance cover is available to you regardless of your working hours or the basis on which you are employed. Regardless if you are employed on a permanent, contract, or casual basis, you will be provided with Standard cover when you are eligible after joining Sunsuper.

We believe in supporting you when you are first unable to work due to injury or illness by offering an early intervention program to assist you back into the workforce. Where you remain unable to return to work, we will help you achieve a suitable and safe return to work through occupational rehabilitation (provided through the Fund insurer), where applicable.

Your capacity to work is assessed by Sunsuper's insurer and is determined by your ability to perform any reasonably suitable occupation based on all of your education, training or experience, not just your usual occupation or job you were performing when you become injured or ill. If you are unemployed we may consider your domestic duties to be your occupational duties.

When reviewing your education, training or experience, both we, and the insurer, may consider for example the level of schooling you completed, further studies undertaken since then and any subsequent qualifications and certifications you have obtained, the skills and abilities you have acquired through work you have undertaken (both paid and unpaid), as well as any of your hobbies or interests.

Once you meet the definition of **Total & Permanent Disability Assist**, you may receive up to six support payments over at least five years where you continue to remain injured or ill and continue to meet the **Total & Permanent Disability Assist** definition. Should you suffer a specified **Medical Condition** which causes you to be unable to perform work ever again, you may receive a single lump sum benefit.

What is Total & Permanent Disability Assist cover?

At Sunsuper we recognise the importance of supporting members who are sick or injured return to wellness, and where appropriate, providing assistance in enabling them to return to work where they are able to. Sunsuper's Total & Permanent Disability Assist cover is here to help minimise the impacts of long-term injury or sickness that leaves you unable to ever work again.

The road to recovery can be a difficult path both financially and emotionally. As your ability to earn a living is the cornerstone to your standard of living it's important to regain your capability to earn a living. Where permanent disablement prevents this, it's important to have a safety net in place.

The term 'totally and permanently disabled' generally means that you will be unable to ever work again in any occupation for which you are suited by training, education or experience. If your Total & Permanent Disability claim is accepted, you are usually able to withdraw your superannuation account balance and either begin to receive your insured benefit as up to a maximum of six support payments, or in limited circumstances, receive it as a one-off lump sum, supporting you to pay debts or bills, provide an ongoing income or fund your special medical needs.

Sunsuper's **Total & Permanent Disability Assist** cover provides several unique features:

- **no Waiting Period** - with Total & Permanent Disability Assist cover there is no **Waiting Period**, with the exception of **Part A(b)** - the loss of **Cognitive Function**. If you're employed, assistance within the first three months of your injury or sickness is essential in successful occupational rehabilitation.

Not having a waiting period also avoids any delays where a specified **Medical Condition** or loss of limbs or sight has occurred,

- **occupational rehabilitation and retraining** - provides occupational rehabilitation support and guidance where deemed appropriate, and may be a compulsory part of the claims process. Our insurer's occupational rehabilitation consultants will collaboratively work with you, your treating health professionals, rehabilitation provider and employer to assist you in returning to work,
- **support payments or single lump sum payment** - if you are assessed as totally and permanently disabled your insured cover may be paid as up to six support payments while you continue to meet the **Total & Permanent Disability Assist** definition. If you are diagnosed with one of the specified **Medical Conditions** (listed on page 51) with no chance of recovery, and meet the definition, suffer loss of limbs or sight, or loss of **Cognitive Function**, or you are aged 62 or older, your insured cover may be paid as a single lump sum payment following the initial assessment,
- **no premium required** - while on a Total & Permanent Disability Assist claim you don't have to worry about paying your Death and Total & Permanent Disability Assist premiums. **Warning: You must still continue to be a member of Sunsuper for Life for any Death cover to continue while you are on a Total & Permanent Disability Assist claim.**

In limited circumstances you will not be eligible to claim on the Standard Death and Total & Permanent Disability Assist insurance cover through Sunsuper. See *3 Am I eligible to receive insurance cover automatically?*

Important: When considering if the benefit available under **Total & Permanent Disability Assist** is right for you, it is important to consider the following risks:

- whether the amount of your support payments will be sufficient to pay off (or pay the interest on) any debts you would need to manage should you become permanently unable to work,
- any costs (e.g. legal costs) you may incur throughout the course of your claim, and whether the amount of your support payments would be sufficient to cover these costs, and
- that occupational rehabilitation and retraining is provided to eligible claimants. If eligible, this may assist you in becoming capable of returning to work in an occupation different to your previous occupation. This may include a lower paying occupation than your previous occupation.

Refer to *Tailored insurance cover* and *Tailored Income Protection cover* sections for more information on other insurance options available to you.

What happens if you believe you are totally and permanently disabled?

As a profit-for-members fund, we're here to help, support and guide you through the claims process so you don't feel confused or overwhelmed.

If you believe that you may be eligible to apply for a Total & Permanent Disability Assist claim, we are here to help you along the way. We'll do everything in our power to ensure all eligible claims are paid as quickly as possible.

In order to lodge a claim you would need to be under the care of a **Medical Practitioner** and suffering from an ongoing and serious injury or sickness that is permanently preventing you from working. See *9 Definitions* for the **Total & Permanent Disability Assist** definition.

Our Claims Representatives are here to help you every step of the way and will confirm your eligibility to lodge a claim. Following lodgement of your claim application, the insurer will assess whether your claim is successful and whether occupational rehabilitation services would assist you in a successful return to work.

If you're unsure or would like more information, please contact one of our Claims Representatives.

If you are approved for a Total & Permanent Disability Assist benefit, you may be paid up to six support payments over a minimum of five years (where you continue to meet the **Total & Permanent Disability Assist** definition). The initial support payment is calculated as 25% of your maximum benefit amount at the **Date of Disablement**. Any subsequent support payments (up to a maximum of five payments) are each calculated as 15% of your maximum benefit amount at the **Date of Disablement**.

The maximum benefit is equal to the amount of Total & Permanent Disability insurance cover you have, based on your age at the **Date of Disablement**. This maximum benefit is also the sum of the initial support payment and all 5 subsequent support payments.

Support payments and maximum benefit

The table below shows the support payments and maximum benefit by age for Standard Total & Permanent Disability Assist cover. Premium table 1 in section *7 Premium Rates*, shows the cost of this Standard cover.

Your age ¹	Standard Total & Permanent Disability Assist cover		
	Initial support payment	Subsequent support payments	Maximum benefit ²
15 to 21	31,250	18,750	125,000
22 to 29	43,750	26,250	175,000
30 to 33	62,500	37,500	250,000
34	61,500	36,900	246,000
35	60,000	36,000	240,000
36	57,500	34,500	230,000
37	54,750	32,850	219,000
38	52,250	31,350	209,000
39	49,250	29,550	197,000
40	46,500	27,900	186,000
41	44,000	26,400	176,000
42	40,750	24,450	163,000
43	38,000	22,800	152,000
44	35,500	21,300	142,000
45	33,000	19,800	132,000
46	30,500	18,300	122,000
47	28,250	16,950	113,000
48	25,750	15,450	103,000
49	23,250	13,950	93,000
50	20,750	12,450	83,000
51	18,750	11,250	75,000
52	16,500	9,900	66,000
53	14,250	8,550	57,000
54	12,000	7,200	48,000
55	10,500	6,300	42,000
56	9,000	5,400	36,000
57	8,000	4,800	32,000
58	7,250	4,350	29,000
59	6,750	4,050	27,000
60	6,250	3,750	25,000
61	5,750	3,450	23,000
62	21,000	N/A	21,000
63	19,000	N/A	19,000
64	17,000	N/A	17,000
65 to 66	16,000	N/A	16,000

¹ Total & Permanent Disability Assist cover ceases at age 67.

² The maximum benefit shown is the sum of the initial support payment and all 5 subsequent support payments.

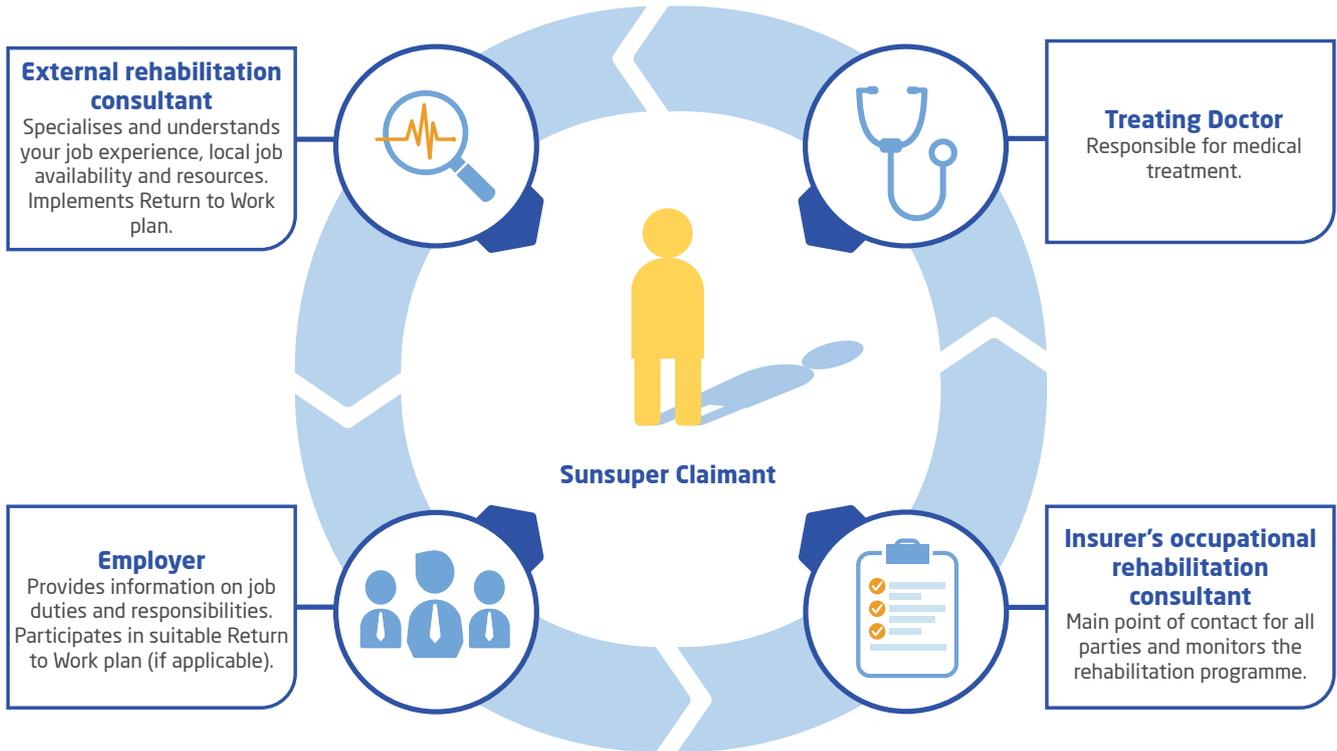
Early intervention and occupational rehabilitation

Your chances of a swift recovery and making a successful return to wellness and/or work are significantly improved if you have access to effective rehabilitation and support services. The sooner you are able to seek assistance from a health professional the higher the chance of a successful outcome.

The approach we take will be dependent on your injury or sickness and whether rehabilitation is appropriate. For complex illnesses such as depression, anxiety, back pain and musculoskeletal injuries early assistance can prove invaluable. Early assistance for certain illnesses such as Stroke or Cancer may not be appropriate.

Where deemed appropriate, we will engage with our insurer who will help determine what, if any, occupational rehabilitation and retraining services will assist. Occupational rehabilitation may be a compulsory part of the claims process (where you are assessed against **Part B - Unable to do a suited occupation ever again** of the **Total & Permanent Disability Assist** definition).

An effective rehabilitation plan relies on the coordination of all parties. Our insurer's occupational rehabilitation consultant does not provide medical treatment, however, they will work with you, your employer and your treating doctor/s where appropriate to help ensure your rehabilitation program is right for you. An example follows:



If you require assistance please contact us to discuss your rehabilitation options.

What does occupational rehabilitation involve?

We understand that navigating the health system can be a daunting task, especially in times of emotional and physical stress. Though legislation does not allow us or the insurer to pay for medical consultations and treatment, we can provide invaluable assistance in other ways.

By working closely with you, your treating health professional and your employer, our insurer's rehabilitation consultant will be able to design a rehabilitation program that is individually tailored to you and your needs. The approach is to work in partnership with you and your treating health professionals to help with your recovery and assist you in returning to work capability.

Some of the services available to you may include:

- coordination of support services with your health professional, rehabilitation provider and employer,
- arranging an initial assessment with your health professional who can identify your support needs,
- providing guidance to your treating doctor on a treatment plan,
- engagement of a rehabilitation provider,
- development and implementation of a return to work plan, including re-skilling and retraining and functional upgrading,
- providing guidance and work-related counselling and support where secondary conditions such as mental health manifest, and
- job seeking advice and career guidance.

What benefits are paid out if rehabilitation is unsuccessful or not appropriate for you?

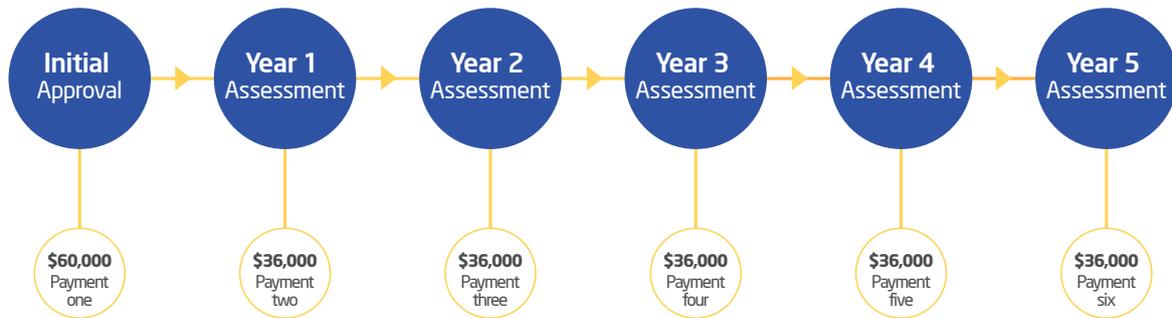
You may receive up to six support payments over a minimum of five years. To continue to receive support payments over the period, you must continue to meet the definition of totally and permanently disabled and participate in any occupational rehabilitation program designed for you. Your eligibility for each support payment will be assessed as close as possible to your annual assessment date (the anniversary of the date of the initial payment made). Sunsuper and our insurer work towards making any subsequent support payments that you qualify for as close as possible to the annual assessment date, but actual payment dates will depend on the circumstances of each claim.

You may also be able to access your *Sunsuper for life* account balance due to **Permanent Incapacity**.

It's important to note that Death cover will reduce by the amount of the support payments paid. Any Death cover in excess of the **Total & Permanent Disability Assist** cover will still continue. It is important to note that if you withdraw your full balance for any reason, your insurance cover (including your Death cover) will cease at the date you close your account, and you will not be insured for any events that occur after this time. You will however continue to be eligible to be assessed for your existing claim.

Example of the support payment process:

Tom was 35 when he first met the **Total & Permanent Disability Assist** definition. Tom has automatic Standard Death and Total & Permanent Disability Assist cover. As at the **Date of Disablement** he has a maximum Death and Total & Permanent Disability Assist benefit amount of \$240,000. Following acceptance of the **Total & Permanent Disability Assist** claim by the insurer, he receives his initial support payment of \$60,000 (equal to 25% of Tom's maximum benefit amount). Rehabilitation was unsuccessful and Tom continues to meet the **Total & Permanent Disability Assist** definition at each **New Assessment Date**. Tom's five subsequent payments were each \$36,000 (equal to 15% of Tom's maximum benefit amount). Tom's total benefit payments were \$240,000.



For members with Tailored Total & Permanent Disability Assist cover, your maximum benefit amount will be based on your Tailored Total & Permanent Disability Assist cover amount as at the **Date of Disablement**.

Ongoing assessment process

Should your injury or sickness continuously prevent you from working ever again, your eligibility for each support payment will be assessed as close as possible to your annual assessment date (the anniversary of the date of the first payment made). If you are assessed as still being totally and permanently disabled (according to the definition), Sunsuper and our insurer will work towards making subsequent payments as close as possible to the annual assessment date.

Where deemed appropriate, our insurer will help determine what, if any, ongoing rehabilitation and retraining services will assist.

Payment of Total & Permanent Disability Assist benefits

If you are eligible to receive a Total & Permanent Disability Assist benefit, the insurer will pay the insurance payment into your *Super-savings account* where it will be invested in the Cash investment option. We will then contact you for payment instructions. Should we not receive payment instructions within 28 days, the payment will be invested as per your current investment strategy.

What happens in the event of a loss of limbs, sight or Cognitive Function?

If you suffer the loss of limbs, your sight or **Cognitive Function** you may be paid a single lump sum benefit equal to the Total & Permanent Disability Assist cover amount at the **Date of Disablement**.

See 9 Definitions for the **Total & Permanent Disability Assist - Part A - Loss of limbs and/or sight** definition.

Any Death cover in excess of the Total & Permanent Disability Assist cover will still continue.

What happens in the event of a specified Medical Condition?

If you do experience one of the specified **Medical Conditions** listed below, and meet the definition, you may be paid a single lump sum benefit equal to the maximum Total & Permanent Disability Assist cover amount at the **Date of Disablement**.

To qualify for a single lump sum benefit payment due to a **Medical Condition** you must have one of the following:

- Primary Pulmonary Hypertension
- Major Head Trauma
- Motor Neurone Disease
- Multiple Sclerosis
- Muscular Dystrophy
- Dementia and Alzheimer’s Disease
- Parkinson’s Disease
- Chronic Lung Disease
- Cardiomyopathy
- Paraplegia (including Quadriplegia, Hemiplegia, and Tetraplegia)

See 9 Definitions for the various **Medical Conditions**, and **Total & Permanent Disability Assist- Part C- Suffering a specifically defined medical condition and permanently unable to work because of that medical condition**.

Any Death cover in excess of the Total & Permanent Disability Assist cover will still continue.

What happens if I am close to retirement age?

If you are aged 62 or older, you may be paid a single lump sum benefit equal to the maximum Total & Permanent Disability Assist benefit amount at the **Date of Disablement**. If you are receiving support payments and turn age 62 any remaining support payments may be paid as a lump sum when you are assessed at your next **New Assessment Date**. See 9 Definitions for the **Date of Disablement** and **New Assessment Date** definitions.

You must remain a member of *Sunsuper for Life* for any Death cover in excess of the Total & Permanent Disability Assist cover to continue. It’s important to note that if you withdraw your full balance for any reason, your Death cover will cease at the date you close your account.

What happens if I am capable of returning to work prior to receiving all six support payments?

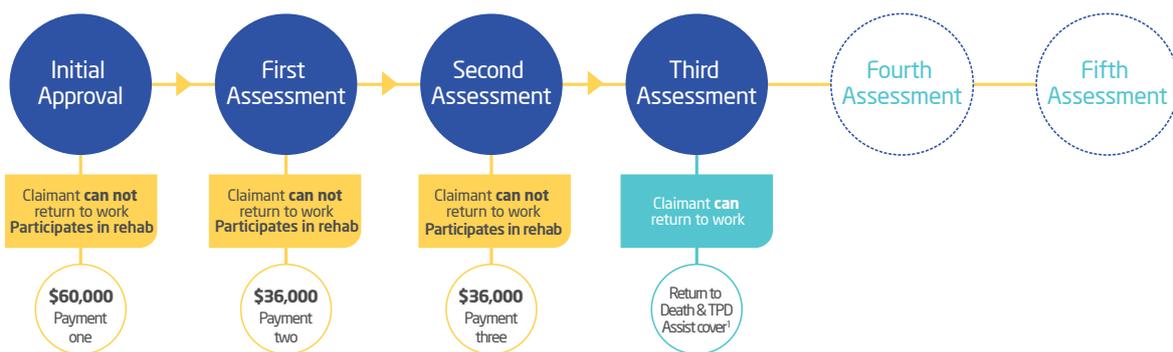
If you return to work or become capable of returning to work (i.e. no longer meeting the **Total & Permanent Disability Assist** definition), prior to receiving all six support payments, your support payments will cease.

However, if you are still a member of *Sunsuper for Life*, any remaining Death and Total & Permanent Disability Assist cover may continue and will be calculated in line with the cover detailed in *Premium table 1*. The cover provided will be based on your current age less the total of any support payments already paid to you. Premiums are adjusted accordingly. For members with Tailored Total & Permanent Disability Assist cover, the remaining cover provided will also be based on whether the cover is provided on a Fixed Premium basis or Fixed Cover basis.

This remaining cover is now subject to the “*Recurrent events and separate claims*” conditions outlined later in this section.

Example of a member being capable of returning to work

Following acceptance of the Total & Permanent Disability Assist claim by the insurer, Tom receives his initial support payment of \$60,000 (equal to 25% of Tom’s maximum Standard Total & Permanent Disability Assist benefit amount of \$240,000). Tom’s initial rehabilitation was unsuccessful and Tom continued to meet the **Total & Permanent Disability Assist** definition at the next two assessment dates. Tom was paid \$36,000 after each of these assessments. In year three Tom was successfully capable of returning to work and returned to active employment.



Tom is 38 years old at the third assessment date. The Standard Death and Total & Permanent Disability Assist cover amount for a 38 year old is \$209,000. See Premium Table 1 in Section 7.

To date he has been paid a total of \$132,000 in support payments. His remaining Standard Death and Total & Permanent Disability Assist cover is now \$77,000 (calculated as \$209,000-\$132,000).

For members with Tailored Total & Permanent Disability Assist cover, the remaining cover provided will also be based on whether the cover was provided on a Fixed Premium basis or Fixed Cover basis.

¹ TPD means Total & Permanent Disability.

What happens after the six support payments are made?

Where you have claimed benefits under Total & Permanent Disability Assist cover, and all six support payments have been made, you will cease to be covered under Death and Total & Permanent Disability Assist cover.

Any Death cover in excess of the Total & Permanent Disability Assist cover will still continue.

What can prevent a support payment from being paid?

Where you have previously received support payments, you may not be able to receive any more payments if:

- you no longer satisfy the definition of **Total & Permanent Disability Assist** as assessed by the insurer,
- the date the Total & Permanent Disability Assist cover reduces to nil, following payment of the full Total & Permanent Disability Assist benefit,
- you die, or
- you are paid a **Terminal Illness** benefit.

There is no entitlement for your beneficiaries/Estate to make a posthumous Total & Permanent Disability Assist claim, after you have passed away.

What happens if you die or become terminally ill whilst on claim for Total & Permanent Disability Assist?

If you pass away while you are on claim for Total & Permanent Disability Assist, your beneficiaries/Estate will not be entitled to claim any remaining support payments. If, however, you have current Death cover when you pass away, your beneficiaries/Estate would be entitled to make a claim on that cover. There is no entitlement for your beneficiaries/Estate to make a posthumous Total & Permanent Disability Assist claim after you have passed away.

If you become terminally ill while you are on claim for Total & Permanent Disability Assist, you will not be entitled to make a terminal illness claim unless you have current Death cover when you are diagnosed as terminally ill.

Recurrent events and separate claims

Recurrent events or separate claims may occur following a claim ceasing prior to the full six support payments being made. If you make, and are accepted for another claim arising from the same or related cause as the prior Total & Permanent Disability Assist claim, the further claim will be deemed to be a recurrent event and a continuation of the original claim if made within 12 months from the date you ceased to satisfy the **Total & Permanent Disability Assist** definition. Support payments will continue unaltered.

However, it will be treated as a new separate claim if:

- (a) It occurred more than 12 months after ceasing to satisfy the **Total & Permanent Disability Assist** definition, or
- (b) if you make a claim arising from an unrelated cause as the prior Total & Permanent Disability Assist claim.

No premium required

Upon acceptance of a Total & Permanent Disability Assist claim you don't have to worry about paying your premiums for Death and Total & Permanent Disability Assist. Following a claim ceasing, the cost of any remaining cover will be calculated weekly and normally deducted from your *Super-savings account* each month. **Warning: you must still continue to be a member of Sunsuper for Life for any Death cover to continue while you are on a Total and Permanent Disability Assist claim.**

White Collar cover

If you work in a White Collar occupation you can get 50% more cover than Standard Death and Total & Permanent Disability Assist cover at no additional cost.

How does White Collar cover work?

White Collar cover entitles you to 50% more cover than Standard Death and Total & Permanent Disability Assist cover at no additional cost to you.

White Collar cover can also apply to any increase in Death and Total & Permanent Disability Assist cover as a result of you electing any Life and Age Events.

Am I eligible for White Collar cover?

To be eligible for White Collar cover:

- you must have Standard Death and Total & Permanent Disability Assist cover,
- you must be permanently employed, and working at least 15 hours per week,
- at least 80% of the work you perform is in an office environment (excluding travel from one job to another), and
- you must be performing duties limited to clerical, administration, managerial (or similar) which do not involve more than 10% light manual duties.

How do I apply for White Collar cover?

You can apply:

- by completing the questions when you join online, or
- by applying to update your cover in **Member Online**, or
- by completing the White Collar eligibility questions on your *Membership application* form.

When does White Collar cover start?

Your White Collar cover will start from the later of:

- the start date of your Standard cover, or
- the date your White Collar application is accepted.

Refer to *When does my insurance cover start?* section for more details.

Exclusions and restrictions

A Death, Total & Permanent Disability Assist or **Terminal Illness** benefit will not be paid:

- where your death is caused by suicide or your injury or illness is caused by any intentional self-inflicted act within 12 months of your insurance cover start date, where:
 - you have White Collar cover and your cover commenced more than 120 days after the date you joined your employer or the date you joined Sunsuper, or
 - your automatic Standard insurance cover start date is more than 120 days after the latter of you attaining age 25 and your account balance reaching \$6,000, or
 - you have opted in to Standard cover before attaining age 25 and your account balance reaching \$6,000, and this cover commenced more than 120 days from the date you joined your employer or the date you joined Sunsuper.
- if you are deployed to a hostile environment as part of active military service, where you participate in active service after your cover commences or increases, or
- prior to receiving cover you had received, or were eligible to receive, a **Terminal Illness** benefit, Total & Permanent

Disability benefit or a benefit as a result of **Permanent Incapacity** or a **Terminal Medical Condition**.

Limited Cover will apply to any increase in your cover as a result of you choosing the White Collar cover option, where you apply for White Collar cover within 120 days of joining the Fund.

Limited Cover will apply to all your cover where you apply for White Collar cover more than 120 days after joining the Fund.

Limited Cover will be for a period of 24 months and until you have been **At Work** for 30 consecutive days after the end of the 24 month period.

How much cover do you get?

You get 50% more cover than Standard Death and Total & Permanent Disability Assist cover at no additional cost to you. The following table is an example of White Collar cover.

White Collar cover levels (example)

Your age	Standard cover (\$)		White Collar cover (\$)	
	Death	TPD ¹ Assist (Maximum Benefit) ²	Death	TPD ¹ Assist (Maximum Benefit) ²
15	62,500	125,000	93,750	187,500
25	125,000	175,000	187,500	262,500
35	240,000	240,000	360,000	360,000
45	132,000	132,000	198,000	198,000
55	42,000	42,000	63,000	63,000
65	16,000	16,000	24,000	24,000

¹ TPD means Total & Permanent Disability.

² The maximum benefit shown is the sum of the initial support payment and all 5 subsequent support payments.

If you are approved for a Total & Permanent Disability Assist benefit you may be paid up to six support payments over a minimum of five years (where you continue to meet the **Total & Permanent Disability Assist** definition). The initial support payment is calculated as 25% of your maximum benefit amount at the Date of Disablement. The subsequent support payments (up to a maximum of five payments) are each calculated as 15% of your maximum benefit amount at the **Date of Disablement**.

For example, using the figures in the table above, if you were 35 years of age at your **Date of Disablement** and had White Collar cover, your initial support payment would be \$90,000, and your subsequent support payments would be \$54,000. Each subsequent payment is subject to an annual assessment process and acceptance by the insurer.

To find out which level of cover and premium applies to you please refer to 7 *Premium Rates - Premium table 1* and 2. Total & Permanent Disability Assist cover ends at age 67.

Premiums are calculated weekly and normally deducted from your *Super-savings account* each month.

Life and Age Event options

Increase your Standard cover at the times in your life when it matters most.

When your life changes, Life and Age Event options give you the opportunity to increase your Standard Death and Total & Permanent Disability Assist cover at the times in your life when it matters the most.

You can apply to increase your Standard Death only, Death and Total & Permanent Disability Assist cover or Total & Permanent Disability Assist only cover, including White Collar cover at each Event. Each increase in cover will increase your weekly premium. You can apply up to four times for Life Events, plus you have up to three opportunities to increase your cover with Age Events.

When can you increase your cover?

To increase your cover you must apply within 180 days following one of the Life or Age Events occurring. The Life and Age Event options apply to your existing Death and Total & Permanent Disability Assist cover including White Collar cover, Death only or Total & Permanent Disability Assist only cover.

You are not eligible to apply for a Life and Age Event if you have previously received or are eligible to receive a Total & Permanent Disability Assist benefit from Sunsuper as a result of your total and permanent disablement.

Life Event options ¹

- you get married,²
- you have or adopt a child,
- you take out a mortgage³ to buy or build your home or you increase your current mortgage³ by \$100,000 or more,
- you get divorced, or
- the death of your spouse.

¹ You can only apply for Life Event options up to age 67.

² Marriage as defined by the *Marriage Act 1961 (Cth)*.

³ The mortgage must be with a financial institution and for your principal place of residence.

Age Event options

- you turn 30, 40 or 50.

Increasing your cover with Life or Age Event options

Apply to increase your cover using the *Life and Age Event insurance options* form in **Member Online**. For the Life Event option(s) you are applying for, you'll need to provide to us proof of the Life Event.

Life Event	Evidence required
Marriage	Copy of marriage certificate
Birth or adoption of a child	Copy of child's birth certificate or adoption papers
Mortgage to purchase home or increase current home mortgage	Copy of the signed application form (including the duty of disclosure), and Copy of confirmation from the bank that the mortgage is in effect, is under the member's name, and includes an effective date (meeting the life stage criteria).
Divorce	Copy of divorce certificate
Death of your spouse	Copy of your spouse's Death certificate

If accepted by the insurer, each Life or Age Event will increase your Death and Total & Permanent Disability Assist cover including White Collar cover by the Life and Age Event increase amount shown in 7 *Premium Rates - Premium table 2*. The increased cover and premium amounts are based on your type of cover at the time of your application (Death only, Total & Permanent Disability Assist only or Death and Total & Permanent Disability Assist).

The Life and Age Events option does not apply to members with Tailored Death and/or Tailored Total & Permanent Disability Assist cover or Tailored Total & Permanent Disability Assist cover.

Exclusions and restrictions

A Death, Total & Permanent Disability Assist or **Terminal Illness** benefit will not be paid:

- where caused by suicide or any intentional self-inflicted act within 12 months of your Death and Total & Permanent Disability Assist cover including White Collar cover increases as a result of a Life or Age Event,

- if you are deployed to a hostile environment as part of active military service, where you participate in active service after your cover commences or increases, or
- if prior to an increase as a result of a Life or Age Event you had received a Total & Permanent Disability Assist benefit from Sunsuper.

Limited Cover will apply to the increase in your Death and Total & Permanent Disability Assist cover or White Collar cover as a result of a Life or Age Event for 24 months from the date of acceptance, and you will also need to be **At Work** for 30 consecutive days after this 24 month period before **Limited Cover** restrictions are lifted. Please refer to the definition of **Limited Cover** and **At Work** in 9 *Definitions*.

When does Life and Age Event cover start and what does it cost?

If you change your cover using one of the Life or Age Event options, and are accepted by the insurer, your changed cover levels and premiums will start from the date your application is accepted by the insurer.

Any premiums associated with the change will be charged in addition to your existing premiums and will be calculated weekly and normally deducted from your *Super-savings account* monthly. The following table shows the increased cover and premiums for the addition of one Life or Age Event, based on a member who has Standard cover. Further Life or Age Events will result in similar increases in cover and premiums.

Examples of the cover levels and cost for Life and Age Event options

Your age	Standard Death and TPD ¹ Assist Cover (\$)		Life and Age Event (\$)		New Death and TPD ¹ Assist cover (\$)		Current Cost per Week (\$)		New Cost per Week (\$)	
	Death	TPD ¹ Assist (Maximum Benefit) ²	Death	TPD ¹ Assist (Maximum Benefit) ²	Death	TPD ¹ Assist (Maximum Benefit) ²	Male	Female	Male	Female
15	62,500	125,000	15,625	31,250	78,125	156,250	2.40	1.40	3.00	1.75
25	125,000	175,000	31,250	43,750	156,250	218,750	4.16	2.68	5.20	3.35
35	240,000	240,000	60,000	60,000	300,000	300,000	7.44	4.84	9.30	6.05
45	132,000	132,000	33,000	33,000	165,000	165,000	8.92	6.84	11.15	8.55
55	42,000	42,000	10,500	10,500	52,500	52,500	8.92	6.84	11.15	8.55
65	16,000	16,000	4,000	4,000	20,000	20,000	8.92	6.84	11.15	8.55

¹ TPD means Total and Permanent Disability.

² The maximum benefit shown is the sum of the initial support payment and all 5 subsequent support payments.

Cover levels and associated premiums are based on Standard cover.

If you are approved for a Total & Permanent Disability Assist benefit you may be paid up to six support payments over a minimum of five years (where you continue to meet the **Total & Permanent Disability Assist** definition). The initial support payment is calculated as 25% of your maximum benefit amount at the **Date of Disablement**. The subsequent support payments (up to a maximum of five payments) are each calculated as 15% of your maximum benefit amount at the **Date of Disablement**.

For example, if you were 35 years of age at your **Date of Disablement** and had increased your Standard Death and Total & Permanent Disability Assist cover after one Life or Age Event, your initial support payment would be \$75,000 and your subsequent support payments would be \$45,000. Each subsequent payment is subject to an annual assessment process and acceptance by the insurer.

Refer to 7 *Premium Rates - Premium table 2* for the full details of Life and Age Event options cover and premium tables. Total & Permanent Disability Assist cover ends at age 67.

Premiums are calculated weekly and normally deducted from your *Super-savings account* each month.

Have you had a Life or Age Event?

Visit [sunsuper.com.au/insurance](https://www.sunsuper.com.au/insurance) to find out how to increase your cover and for the relevant form. For further information please contact us.

Tailored insurance cover

Having the right level of insurance cover can give you peace of mind about the financial future for you and your family. We provide the opportunity to tailor your insurance cover to your specific needs through Sunsuper's Tailored insurance cover range.



Tailored Death cover

If you die, your dependants or beneficiaries may receive a lump sum. Or you can receive a **Terminal Illness** benefit.



Tailored Total & Permanent Disability Assist

If you are totally and permanently disabled, you may receive occupational rehabilitation support and up to six support payments or in some limited circumstances a single lump sum payment.



Tailored Total & Permanent Disability

If you are totally and permanently disabled, you may receive a lump sum benefit.

Types of Tailored cover available

- Tailored Death (this includes **Terminal Illness**),
- For our Tailored disability cover, you can choose the type of cover that best meets your needs:
 - Tailored Total & Permanent Disability Assist, or
 - Tailored Total & Permanent Disability.

You can only hold one type of disability cover, being Total & Permanent Disability Assist or Total & Permanent Disability.

How much can I apply for?

You can apply for Tailored cover up to the following maximum cover limits:

- Death cover: Unlimited (however, the **Terminal Illness** benefit has a maximum of \$5 million),
- **Total & Permanent Disability Assist** cover: \$3 million,
- **Total & Permanent Disability** cover: \$3 million.

Any application for insurance cover is subject to acceptance by the insurer. Satisfactory evidence of health may be required. The Trustee reserves the right to limit the amount of cover provided.

The assessment process, known as "underwriting", usually takes some time especially where additional medical information is required. The underwriting process depends on your level of cover and the amount of health evidence required.

Intention of Total & Permanent Disability

The intention of total & permanent disability insurance cover is to provide financial support to you should you suffer an injury or illness that prevents you from working to retirement age.

Tailored insurance cover is available to you regardless of your working hours or the basis on which you are employed. Whether you are employed on a permanent, part-time, contract or casual basis you may be eligible for cover.

In the event of a disability claim, your capacity to work is assessed by our insurer and is determined by your ability to perform any reasonably suited occupation based on all of your education, training or experience, not just your usual occupation or the job you were performing when you become injured or ill. If you were unemployed at your date of disablement, the insurer may consider your **Domestic Duties** to be your occupational duties.

When reviewing your education, training or experience, we may consider, for example, the level of schooling you completed, further studies undertaken since then and any subsequent qualifications or certifications you have obtained, the transferable skills and abilities you have acquired through any work you have undertaken (both paid and unpaid) as well as any of your hobbies and interests.

We offer two types of Tailored total & permanent disability, so that you can choose the type that suits your needs, including the way in which financial support is provided should you suffer an injury or illness that prevents you from working to retirement age.

The following section helps explain key features of **Total & Permanent Disability Assist** and **Total & Permanent Disability**.

The high level summarised features of the two types of Total & Permanent Disability cover are shown in the table below. A full explanation of these features is provided in this *Guide*:

Features	Total & Permanent Disability Assist cover	Total & Permanent Disability cover
Type of cover obtained by application	✓	✓
Premiums based on occupation classification	✓	✓
Relative cost of cover - see <i>Premium table 3</i> in <i>Section 7</i>	Lower than Total & Permanent Disability cover	Higher than Total & Permanent Disability Assist cover
Waiting period after illness or injury before a claim can be lodged ¹	Generally, no waiting period applies	Generally, a three month waiting period applies
Payment of benefits ² - when assessed against Part B of the relevant Total & Permanent Disability definition - <i>unable to do a suited occupation ever again</i>	up to six support payments ³	Single lump sum payment

Features	Total & Permanent Disability Assist cover	Total & Permanent Disability cover
Occupational rehabilitation and retraining	✔	✘
Ongoing assessment required	✔ (each support payment after the initial payment requires an annual assessment against Part B2 of the Total & Permanent Disability Assist definition)	✘
Waiver of premiums whilst on claim	✔	✘

- 1 The waiting period can vary depending on which part of the relevant Total & Permanent Disability definition you are being assessed against. See *Section 9 - Definitions*.
- 2 For **Total & Permanent Disability Assist**, in some circumstances (generally when you are assessed against other parts of the definition), your benefit may be paid as a single, lump sum payment.
- 3 If you are approved for a **Total & Permanent Disability Assist** benefit, you may be paid up to six support payments over a minimum of five years (where you continue to meet the **Total & Permanent Disability Support** definition). The initial support payment is calculated as 25% of your maximum benefit amount at the **Date of Disablement**. The subsequent support payments (up to a maximum of five payments) are each calculated as 15% of your maximum benefit amount at the **Date of Disablement**.

What is Total & Permanent Disability Assist cover?

At Sunsuper we recognise the importance of supporting members who are sick or injured to return to wellness. Where appropriate, we provide assistance in enabling you to return to work where you are able. Sunsuper's **Total & Permanent Disability Assist** cover is here to help minimise the impacts of long-term injury or illness that leaves you unable to ever work again.

The road to recovery can be a difficult path both financially and emotionally. As your ability to earn a living is the cornerstone to your standard of living it's important to regain your capability to earn a living. Where permanent disablement prevents this, it's important to have a safety net in place.

We believe in supporting you when you are first unable to work due to injury or illness by offering an early intervention program to assist you back into the workforce. Where you remain unable to return to work, we will help you achieve a suitable and safe return to work through occupational rehabilitation (provided through our insurer), where applicable.

The term 'totally and permanently disabled' generally means that you will be unable to ever work again in any occupation for which you are suited by training, education or experience.

If approved for a **Total & Permanent Disability Assist** claim, you may receive up to six support payments over at least five years where you continue to remain injured or ill and continue to meet the **Total & Permanent Disability Assist** definition. Should you suffer a specified **Medical Condition** which causes you to be unable to perform work ever again, you may receive a single lump sum benefit.

Sunsuper's **Total & Permanent Disability Assist** cover provides several special features:

- No **Waiting Period** - with **Total & Permanent Disability Assist** cover there is no **Waiting Period**, with the exception of **Part A - loss of Cognitive Function**. If you're employed at your date of disablement, assistance within the first three months of your injury or sickness is essential in successful occupational rehabilitation. Not having a waiting period also avoids any delays where a specified **Medical Condition** or loss of limbs or sight has occurred,
- **Occupational rehabilitation and retraining** - occupational rehabilitation support and guidance is provided where deemed appropriate, and may be a compulsory part of the claims process. Our insurer's occupational rehabilitation consultants will collaboratively work with you, your treating health professionals, rehabilitation provider and employer to assist you in returning to work,
- **Support payments or single lump sum payment** - if you are assessed as totally and permanently disabled your insured cover may be paid as up to six support payments while you continue to meet the **Total & Permanent Disability Assist** definition. If you are diagnosed with one of the specified **Medical Conditions** with no chance of recovery, and meet the definition, suffer loss of limbs or sight or loss of **Cognitive Function** or you are aged 62 or older, your insured cover may be paid as a single lump sum payment following the initial assessment. You may also be able to access your *Super-savings account* balance,
- **No premium required** - while on a Total & Permanent Disability Assist claim you don't have to worry about paying your Death and Total & Permanent Disability Assist premiums. **Warning: You must still continue to be a member of Sunsuper for Life for any Death cover to continue while you are on a Total & Permanent Disability Assist claim.**

Important: When considering if the benefit available under **Total & Permanent Disability Assist** is right for you, it is important to consider the following risks:

- whether the amount of your support payments will be sufficient to pay off (or pay the interest on) any debts you would need to manage should you become permanently unable to work,
- any costs (e.g. legal costs) you may incur throughout the course of your claim, and whether the amount of your support payments would be sufficient to cover these costs, and
- that occupational rehabilitation and retraining is provided to eligible claimants. If eligible, this may assist you in becoming capable of returning to work in an occupation different to your previous occupation. This may include a lower paying occupation than your previous occupation.

The cost of Tailored Total & Permanent Disability Assist cover is lower than the cost of the premiums for equivalent Tailored Total & Permanent Disability cover.

Refer to the more detailed information about Total & Permanent Disability Assist cover shown in the *Standard Death and Total & Permanent Disability Assist* section of this guide. This includes information about:

- payment of support payments,
- occupational rehabilitation, retraining and capability to return to work,
- circumstances in which a lump sum benefit may be paid in place of support payments.

What is Total & Permanent Disability cover?

The term 'totally and permanently disabled' generally means that you will be unable to ever work again in any occupation for which you are suited by education, training or experience.

Sunsuper's Tailored **Total & Permanent Disability** cover is available to help minimise the impacts of severe injury or illness in the event that it leaves you permanently disabled and unable to work again.

In the event of a claim, if you are deemed totally and permanently disabled and eligible for a benefit, Tailored **Total & Permanent Disability** cover provides payment of your **Total & Permanent Disability** cover as at the **Date of Disablement** as a lump sum. You may also be able to access your *Super-savings account* balance.

A three month waiting period generally applies to a claim under the **Total & Permanent Disability** definition.

Payment of any Tailored **Total & Permanent Disability** benefit will reduce your Death cover by the amount paid as a **Total & Permanent Disability** benefit.

Note: The cost of Tailored **Total & Permanent Disability** cover is higher than the cost of equivalent Tailored **Total & Permanent Disability Assist** cover.

What happens if you believe you are totally and permanently disabled?

Whether you have **Total & Permanent Disability Assist** cover or **Total & Permanent Disability** cover, if you believe that you may be eligible to apply for a total & permanent disability claim, we are here to help you along the way. We'll do everything in our power to ensure all eligible claims are paid as quickly as possible.

As a profit-for-members fund, we're here to help, support and guide you through the claims process so you don't feel confused or overwhelmed.

In order to lodge a claim you would need to be under the care of a **Medical Practitioner** and suffering from an ongoing and serious injury or illness that is permanently preventing you from working ever again. See *9 Definitions* for disability definitions specific to **Total & Permanent Disability Assist** and to **Total & Permanent Disability**.

Our Claims Representatives are here to help you every step of the way and will confirm your eligibility to lodge a claim. Following lodgement of your claim application, the Insurer will assess your application and provide a recommendation to us. For members with **Total & Permanent Disability Assist** cover, this recommendation will include whether occupational rehabilitation services would assist you in a successful return to work.

More information on the claims process can be found in *Section 8 - Facts about making a claim* and online at sunsuper.com.au/insurance.

Payment of total & permanent disability benefits

If you are eligible to receive a **Total & Permanent Disability Assist** or **Total & Permanent Disability** benefit, the insurer will pay the insurance payment into your *Super-savings account* where it will be invested in the Cash investment option. We will then contact you for payment instructions. Should we not receive payment instructions within 28 days, the payment will be invested as per your current investment strategy.

It's simple; you can apply for Tailored cover anytime.

Just visit **Member Online**, select *Insurance*, and follow the prompts to apply. If you're not signed up for **Member Online** – it's simple – you can register for online access at sunsuper.com.au/memberonline or contact us on **13 11 84** and we'll have you set up in no time.

When does Tailored insurance cover start?

Your Tailored insurance cover will normally start from the date the insurer approves your application, provided you have enough money in your *Super-savings account* to pay insurance premiums and the insurer's approval is not subject to any loadings or benefit exclusions. If you do not have enough money in your *Super-savings account* to pay premiums, you will be notified of the conditions that apply to you.

Interim Accident cover

Up to 90 days Interim Accidental Death and/or Accidental Total & Permanent Disability cover will apply immediately from the date we receive your completed *Tailored insurance* application form. See *9 Definitions* for the definition of **Accident**.

No premium is charged for the Interim Accident cover. The Interim Accident cover ends on the earlier of acceptance, deferral or rejection of your application for Tailored cover or 90 days from receipt of your application.

The amount of Interim Accident cover is the lesser of the amount of Tailored cover you are applying for and \$2 million for Death and Total & Permanent Disability. No Interim Accident cover will be paid if during the interim period, death or disability is caused directly or indirectly by engaging in any sport or pastime that the Insurer would not normally cover at standard rates or any other exclusions under the policy.

What are the Occupational Categories?

When you apply for Tailored insurance cover the Insurer will determine your Occupational Category based on your occupation at the time. When calculating your insurance premium for Tailored cover, an occupational loading will be applied based on your Occupational Category. Refer to **Occupational Categories** in *9 Definitions* for a brief description of how they are determined.

Can you change your Occupational Category?

If your occupation changes so you are in a less manual or less hazardous occupation, you can request a change to your Occupational Category by completing the *Increase or update your insurance cover* form in **Member Online**.

This may result in a reduction in your premiums.

How is the premium calculated?

If Tailored cover is approved and you already have Standard Death and Total & Permanent Disability Assist cover, the premium for your Standard Death and Total & Permanent Disability Assist insurance cover no longer applies. All of your cover will convert to a premium based on your occupational classification. This means you will pay a different premium to the premium you previously paid for the same amount of existing cover because of your occupation.

The factors that determine the cost you will pay for your Tailored insurance cover are:

- the type of cover,
- the amount and basis of cover,
- your occupation,
- your health,
- your age, and
- your gender.

Refer to *7 Premium Rates - Premium table 3* for the premium applicable to Tailored Death, Tailored Total & Permanent Disability Assist and Tailored Total & Permanent Disability cover

These tables include the **Occupational Categories** as determined by the insurer. In calculating your premium, the insurer assumes you are in good health. Premiums are calculated weekly and normally deducted from your *Super-savings account* balance each month. You should ensure you have sufficient money in your *Super-savings account* to pay premiums and maintain your insurance cover.

Amount and basis for insurance cover

Once you have decided on the type of disability cover and the amount of cover that best suits your circumstances and needs, you then need to determine the basis on which you want this insurance cover. For Tailored insurance cover you can choose either a:

- **Fixed Cover** basis, or
- **Fixed Premium** basis.

A **Fixed Cover** basis means your amount of insurance cover stays the same, but your weekly premium will generally increase as you get older. A **Fixed Premium** basis means your weekly premium stays the same, but your insurance cover will generally decrease as you get older.

If you don't make a choice, your cover will be provided on a **Fixed Cover** basis.

Tailored total & permanent disability cover reduction on Fixed Cover basis

Once you reach age 61, your Tailored total & permanent disability cover reduces annually by 10% of your insured benefit at age 60, until your 67th birthday when cover ceases. Your premiums are adjusted accordingly. An example is shown below. If you have \$200,000 of Fixed total & permanent disability cover, it will reduce as follows:

Your Age	TPD ¹ Assist/TPD ¹ cover (\$)
60	200,000
61	180,000
62	160,000
63	140,000
64	120,000
65	100,000
66	80,000
67	nil

¹ TPD means Total & Permanent Disability

If your cover commenced after age 60, your cover will reduce at a rate greater than 10% per annum. This will be consistent with any reduction had your cover commenced prior to age 60.

Transferring your Death and Total & Permanent Disability insurance cover

You may be eligible to transfer existing Death and/or Total & Permanent Disability cover (from other super funds or insurance policies up to \$1,000,000) to Sunsuper. To transfer your existing cover please complete and return the *Transfer of insurance cover* form available at [sunsuper.com.au/insuranceforms](https://www.sunsuper.com.au/insuranceforms)

You will not be eligible to transfer your cover if:

- you have previously had an application for additional insurance cover declined,
- you have been paid, lodged or eligible to lodge any Total & Permanent Disability, **Permanent Incapacity**, **Terminal Illness** or Income Protection claim, or
- you are absent from work or unable to carry out all of the duties of your usual occupation due to an injury or illness at the transfer date.

It's important you include all required documentation, which will include:

- a letter or certificate of currency from your superannuation fund or insurance provider detailing your current insurance cover,
- details of any visits to Specialists in the previous twelve months,

- details of any loadings, exclusions and restrictions applicable to that cover, and
- the confirmation must have been issued within 30 days of your application.

If accepted by the insurer:

- you will be subject to the terms and conditions outlined in the Group Life Insurance policy provided by AIA Australia,
- the transferred cover will be additional to any existing insurance cover you have subject to maximum cover limits²,
- you will need to cancel the cover you had under your previous fund or policy, and
- your total cover will become Tailored Death and/or Total & Permanent Disability cover and will be **Fixed Cover**.

If you are thinking about transferring your existing insurance cover, make sure you compare the features and benefits, and are accepted by Sunsuper's insurer, before cancelling existing cover.

² You will not be eligible for Standard Death and Total & Permanent Disability Assist cover if you have been accepted for a transfer of cover prior to meeting all of the eligibility requirements for Standard cover.

Can your health affect your insurance cover?

When the insurer assesses your application for Tailored insurance cover, they may ask for further details in relation to the information you disclose in your *Tailored insurance application*.

As a condition of acceptance of the Tailored insurance cover, the insurer may apply a loading (a higher premium) for the increased amount of Death and/or total & permanent disability insurance cover. The insurer may also specify a benefit exclusion that will apply if a claim for the increased amount of insurance is related to a specified condition or pastime.

Any premium loadings or benefit exclusions will be advised to you as a Special Acceptance offer. You will be required to either accept or decline this offer within 30 days. If no response is received from you it will be deemed that you have declined this offer. Interim Cover will apply until the terms are accepted or declined. If you do not respond to the Special Acceptance offer within 30 days the application will be cancelled and the interim cover will cease.

If you accept the terms of this offer, your increased insurance cover will start on the date you accept the Special Acceptance offer.

Exclusions and restrictions

A Tailored Death, Total & Permanent Disability Assist, Total & Permanent Disability or **Terminal Illness** benefit will not be paid:

- where caused by suicide or any intentional self-inflicted act within 12 months of the insurer's acceptance of the additional Tailored cover,
- if you are deployed to a hostile environment as part of active military service, where you participate in active service after your cover commences or increases, or
- if subject to any restriction or exclusion imposed as a condition of acceptance by the insurer at time of application for Tailored cover.

Any restrictions or exclusions on your previous cover amounts will continue.

Conditions and Exclusions

These conditions and exclusions apply to Standard and Tailored Death cover, Standard and Tailored Total & Permanent Disability Assist cover, and Tailored Total & Permanent Disability cover.

When does insurance cover stop?

Cover will stop when:

- you cancel it,
- you turn 70 years of age for Death cover,
- you turn 67 years of age for Total & Permanent Disability cover¹,
- you die,
- you are paid a Tailored Total & Permanent Disability insurance benefit,²
- you are paid all six support payments under the Total & Permanent Disability Assist benefit,²
- when the total of support payments paid under the Total & Permanent Disability Assist benefit exceed your Death cover, your Death cover will cease,
- you withdraw all monies from Sunsuper,
- the policy issued to the Trustee is cancelled or terminated for any reason,
- you are paid a **Terminal Illness** benefit² where the full Death benefit cover is paid,
- your *Super-savings account* has not received an **Eligible Contribution** in the past 12 months or more and you have not elected in writing to keep your cover³ (contribution inactivity), or
- the premium is due and there is not enough money in your *Super-savings account* to pay the premiums, and it remains unpaid for 4 months (zero account balance).

¹ Special conditions may apply to some members.

² Death cover in excess of the Total & Permanent Disability Assist or Tailored Total & Permanent Disability cover or Terminal Illness benefit will still continue.

³ Where we have valid contact details, we will contact you advising the date your cover will stop. To prevent the erosion of your account balance from insurance premiums, you should consider maintaining regular contributions into your account and retain a balance above a level that's right for you. If you want your insurance cover to continue, even if there are no regular contributions for continuous periods of 12 months or more, you can advise us in writing or visit [sunsuper.com.au/keepmyinsurance](https://www.sunsuper.com.au/keepmyinsurance).

Can Death and Total & Permanent Disability cover restart if it automatically stops?

If your insurance cover automatically stops because of:

- contribution inactivity
- zero account balance

then Standard cover will automatically restart upon receipt of an SG contribution (but only if you have also met the Standard cover eligibility criteria of attaining age 25 and reaching an account balance of \$6,000).

You also have the option to advise us in writing to restart the insurance cover that was stopped due to contribution inactivity only. This written request must be received within 60 days of the cover stopping. The restart of cover date will be the date your written request is received.

Limited Cover will apply to your restarted cover until you satisfy the **At Work** requirements for 30 consecutive days.

Note: You will not be able to make a claim for the period between when your cover was stopped and when your cover restarted.

What benefits are paid out if you die?

Your Death benefit is the amount of your *Super-savings account* balance plus the total amount of your Death cover.

Any benefit payment for your Death cover is subject to acceptance of the claim by the insurer.

In limited circumstances your beneficiaries will not be eligible to claim on the Death cover through Sunsuper. See *3 Am I eligible for insurance cover?*

In the event of your death, your Death benefit may be paid to your nominated beneficiaries (subject to Trustee discretion) – unless you have a valid binding death benefit nomination.

Can I nominate a beneficiary?

In the unfortunate event of your death, the Sunsuper Trustee is required to pay your Death benefit to your beneficiaries, or where there are no eligible beneficiaries, to any person who has a fair claim. For your *Super-savings account* you can complete either:

- a binding death benefit nomination - this allows you to nominate who will receive your superannuation benefits in the event of your death and ensures that the Trustee is legally bound by your wishes. Claims are generally processed faster when a valid binding death benefit nomination is in place, or
- a preferred beneficiary nomination - this is used by the Trustee as a guide when deciding who should receive your Death benefit, as there may be restrictions on who the benefit can be legally paid to. There may also be lengthy investigations to determine who the benefit should be paid to.

Refer to the *Nominating your beneficiaries* section of the *Sunsuper for life guide* for more information.

What happens if you have a Terminal Illness?

Subject to providing all the required documentation to support your claim and approval by the Trustee and insurer, if your Death cover is in force at the date of the most recent certification of the **Terminal Illness** by two registered **Medical Practitioners** (one being a specialist physician in the particular medical field relating to the condition for which you are claiming), you will be paid a **Terminal Illness** benefit. **Terminal Illness** means you are suffering from an illness, or have incurred an injury, that is likely to result in your death within a period of 24 months.

If you have Death cover and the insurer accepts your claim for **Terminal Illness**, the benefit paid is the amount of your *Super-savings account* balance plus the amount of your Death cover in force at the most recent certification (up to a maximum of \$5 million). The remaining amount of Death cover (if any) is then your total Death cover, less the amount of insurance cover paid by the insurer on account of your **Terminal Illness** benefit.

If you have received or are eligible to receive a **Terminal Illness** benefit or a benefit as a result of a **Terminal Medical Condition** from Sunsuper, or another fund or insurer when your cover starts, you will not be eligible for Death or Total & Permanent Disability cover with Sunsuper.

What happens if I want to reduce or cancel my cover?

You can cancel or reduce your insurance cover at any time through **Member Online**, our secure online service or by contacting us.

If you cancel your Death and Total & Permanent Disability Assist cover within 60 days of the date cover commences, any premiums paid for your Death and Total & Permanent Disability Assist will be refunded to your *Super-savings account*.

A reduction or cancellation of cover will be effective from the date your instruction is received. If you cancel your cover, evidence of health satisfactory to the insurer will be required before cover can restart from the date accepted by the insurer.

What happens during Unpaid Leave or parental leave?

Your Death and total & permanent disability cover will continue. The total & permanent disability definition that will generally apply will be the definition that applied while you were working - refer to *9 Definitions* for the relevant total & permanent disability definitions. Premiums will continue to be deducted from your *Super-savings account* during the period of leave. You need to ensure you have enough money in your *Super-savings account* during the period of leave to pay your premiums.

Where you temporarily reside overseas during a period of **Unpaid Leave**, your cover will continue as described later in this section, under *What happens if you temporarily reside overseas?* Refer to *9 Definitions* for the **Unpaid Leave** definition.

Your cover may still stop while you are on **Unpaid Leave** or parental leave if any of the conditions and exclusions for when cover stops occur.

Warning - If your account does not receive an **Eligible Contribution** for at least a 12 month period and you haven't informed us in writing that you wish to keep your insurance cover, your cover will normally cease 12 months after your last **Eligible Contribution**.

What happens if your work situation changes or you leave your employer?

Your existing Death and Total & Permanent Disability cover will continue when you leave your employer. Premiums will continue to be deducted from your *Super-savings account* balance.

However, it is important that you notify us if:

- you change occupation,
- your income changes, or
- you change employer,

so that we can update your records and determine the impact of any changes.

You must let us know if you wish to cancel your Death and Total & Permanent Disability insurance cover.

Worldwide cover

Your cover will continue to apply if you travel outside Australia.

However, you should note if you make a claim for **Terminal Illness** or total & permanent disability, the insurer may require you to return to Australia at your own expense to enable your claim to be assessed and to secure the payment of any **Terminal Illness** or total & permanent disability benefit.

What happens if you are employed under the terms of a work visa?

If you are employed under the terms of a work visa you are eligible for Death and Total & Permanent Disability Assist cover and may also apply for Tailored cover. Your cover continues when your visa expires or when you permanently depart Australia.

What happens if you travel overseas on paid leave?

Where you travel overseas while on paid leave from your Australian-based employer (or an international subsidiary or associated company of your Australian employer), your Death and total & permanent disability cover continues with no travel restrictions.

What happens if you temporarily reside overseas?

Your Death and total & permanent disability cover will continue while you are temporarily residing overseas. If you become disabled while based overseas you may be required to return to Australia at your own expense for assessment of any disablement claim.

It is your responsibility to check there is always enough money in your *Super-savings account* to pay insurance premiums.

5. Income Protection cover

Income Protection cover is designed to protect you by providing an income for a time period in the event you are unable to work due to injury or illness. It can give you the peace of mind that you can pay your expenses while you focus on your health and recovery.

Intention of Income Protection

The intention of Income Protection insurance cover is to provide you with ongoing income and financial support, should you become temporarily unable to work due to an injury or illness. It can give you the peace of mind that you have income that can help pay your expenses while you focus on your health and recovery.

If you are employed on a permanent, part-time, contract or casual basis and working at least 15 hours a week, you may be eligible to apply for cover.

You may be able to claim a total disability benefit if you are unable to work due to injury or illness. To be considered disabled, you must be unable to do one of the major duties of your regular occupation which involves at least 20% of your occupational tasks, and meet other requirements. If you are unemployed, a casual employee or working less than 15 hours prior to being injured or ill, a different definition will apply to you, or you may not even be able to apply for Income Protection cover.

You will be covered for up to 75% of the income you were earning prior to becoming disabled; this is known as your monthly benefit. You may receive an additional percentage of your income as a superannuation contribution paid into your *Super-savings account*. This helps you continue to save for your retirement. We will support you to return to work, by providing occupational rehabilitation where applicable.

Where you are working in a reduced capacity while on claim and earning less, due to injury or illness, and satisfy other requirements you may be able to claim a partial disability benefit to assist with your transition back to work in a full capacity.

If you are paid a monthly benefit it will generally be reduced where you receive other disability benefits, such as workers compensation or benefits from other Income Protection policies. This prevents you from receiving more income than you earned before you were injured or ill.

With Tailored Income Protection cover, we offer various waiting periods and benefit periods in order to offer you flexibility to suit your personal needs and financial situation. The **Waiting Period** is the length of time you must be injured or ill before a benefit is payable. The **Benefit Period** is the maximum period you can claim benefits whilst you are **Totally** or **Partially Disabled**. With Opt-In Income Protection we offer cover that eligible members can request when they join Sunsuper, without the need to fill in complicated forms or provide medical evidence.

Comparing our Income Protection options

Feature	Opt-In Income Protection	Tailored Income Protection
Cover obtained	Opt in ¹	By application
Benefit Period	2 years	2 years, 5 years, to age 65
Waiting Period	90 days	30, 60, 90, 180 days
Cover up to age 65	✓	✓
Covers self-employed members	✗	✓
Partial disablement payments	✓	✓
Indexation of cover	✗	✓
Occupation categories	2	6
Indexation of Income Protection claim benefits	✗	✓ ³
Occupational Rehabilitation support	✓	✓
Cover during paid and Unpaid Leave ²	✓	✓
Cover during overseas employment	✓	✓
Limited cover	24 months and 30 day At Work requirement	✗
Maximum cover per month	\$5,000 (\$7,500 if you have White Collar cover)	\$30,000
Premium waiver when on claim	✓	✓

¹ Within 120 days of joining Sunsuper you can request to add Opt-In Income Protection cover. Refer to *Opt-In Income Protection* later in this section.

² Income Protection cover will stop where your period of **Unpaid Leave** or parental leave exceeds 24 months.

³ Indexation applied to **Benefit Periods** under Tailored Income Protection cover.

Waiting Period and Benefit Period

The **Waiting Period** and **Benefit Period** determine when a claim payment commences and the maximum length of time a benefit is payable.

The **Waiting Period** is how long you must be **Totally Disabled** or **Partially Disabled** before becoming eligible to claim a benefit. The **Waiting Period** commences from the date a **Medical Practitioner** certifies you are **Totally Disabled** and unable to work as determined by the insurer. Benefit payments will commence when the **Waiting Period** ends and are paid monthly in arrears.

The **Benefit Period** is the maximum length of time that a claim will be paid for.

How to apply

You can apply for an amount up to 85% of your **Income** (75% of your **Income** plus 10% superannuation contribution) but not more than \$30,000 per month. **Income** is defined in *9 Definitions*.



Opt-In Income Protection

You must apply within 120 days of joining Sunsuper. You can apply when you join online at sunsuper.com.au/join or via *Member Online* (if you are already a member).

If you would prefer filling in a paper application, please complete and return the *New Member Options* form at sunsuper.com.au/insuranceforms



Tailored Income Protection

You can apply for cover through **Member Online**. To log into **Member Online** visit sunsuper.com.au/memberonline

If you're not signed up for **Member Online** – it's simple – you can register for online access at sunsuper.com.au/memberonline or contact us on 13 11 84 and we'll have you set up in no time.

If you would prefer filling in a paper application, the *Tailored insurance application* form is available at sunsuper.com.au/insuranceforms

Opt-In Income Protection cover

When you join Sunsuper, you have 120 days in which you can add Opt-In Income Protection cover without complicated forms and medical information.

How does Opt-In Income Protection cover work?

Opt-In Income Protection cover provides you with a replacement income, after a **Waiting Period** of 90 days, for up to two years if you are unable to work due to injury or illness.

The **Waiting Period** commences from the date a **Medical Practitioner** certifies you are **Totally Disabled** and unable to work as determined by the insurer. Benefit payments will start accruing when the **Waiting Period** ends and are paid monthly in arrears.

Your amount of cover is a fixed monthly benefit amount. Your cover amount is calculated as 85% of your **Income**, rounded up to the next \$500. The weekly cost per \$500 of cover is shown in *Premium table 4*.

The maximum monthly cover for Opt-In Income Protection cover is \$5,000. You will be provided with monthly cover of \$2,500 where you do not provide details of your **Income**.

Am I eligible for Opt-In Income Protection cover?

To be eligible for Opt-In Income Protection cover you must:

- be actively employed¹ on a permanent basis for a minimum of 15 hours per week,
- aged between 15 and 64, and
- select this option when requesting Standard insurance cover within 120 days of joining Sunsuper.

You are not eligible for Opt-In Income Protection cover if:

- you are not permanently employed for at least 15 hours per week,
- you are a casual employee,
- you are a contract employee,
- you are **Self-Employed**,
- you are employed under the terms of a work visa, or
- your financial affairs are under the supervision of a third party, such as the public trustee, due to your medical condition or incapacity.

You are also not eligible to apply for Opt-In Income Protection cover if you have previously received or are eligible to receive a **Terminal Illness**, Total & Permanent Disability benefit or a benefit as a result of **Permanent Incapacity** or a **Terminal Medical Condition** from Sunsuper or another fund or insurer.

1. You will be actively employed if you satisfy the *At Work* definition at the date your Standard Death, Total & Permanent Disability Assist and Opt-In Income Protection cover starts - refer to *9 Definitions* for the *At Work* definition.

Things to consider

- Premiums generally increase with age.
- Generally, Income Protection benefits are considered taxable income and subject to Pay As You Go (PAYG) tax. If applicable, an income statement will be issued by the insurer at the end of the financial year.
- You may also have the added advantage of insurance premiums offsetting your 15% contributions tax liability.
- An Income Protection benefit is not paid during the **Waiting Period**.

How much does it cost?

The cost of cover depends on your age and gender and will increase at certain ages.

Opt-In Income Protection weekly premium rates (example)

Your age	Premium (\$) per week (per \$500 monthly benefit)	
	Male	Female
15	0.34	0.48
25	0.34	0.48
35	0.34	0.48
45	0.76	1.21
55	1.89	2.42
65	N/A	N/A

To find out which premium applies to you please refer to 7 *Premium Rates - Premium table 4*. To calculate your weekly premium simply divide your cover amount by \$500 and multiply by the Income Protection premium.

Premiums are calculated weekly and normally deducted from your *Super-savings account* each month.

When does Opt-In Income Protection cover start?

Provided you apply within 120 days of joining Sunsuper, your Opt-In Income Protection cover will start from the later of:

- the start date of your Standard insurance cover, or
- the date your application is accepted.

Exclusions and restrictions

An Income Protection benefit will not be paid if the injury or illness is caused, wholly or partly, directly or indirectly, from:

- a deliberate self-inflicted injury or attempted suicide or self-destruction while sane or insane,
- an uncomplicated pregnancy, childbirth or miscarriage,
- your deployment to a hostile environment as part of active military service, where you participate in active service after your cover commences or increases,
- a criminal act committed by you, or
- a fraudulent claim is made.

Limited Cover will apply to your Opt-In Income Protection cover for a period of 24 months and until you have been **At Work** for 30 consecutive days after the end of the 24 month period. Please refer to 9 *Definitions* for the **Limited Cover** and **At Work** definitions.

Example of how to calculate your Opt-In Income Protection cover and premium:

Jack is 45 when he joins Sunsuper. He applies for Opt-In Income Protection cover on his *Membership application* form or when he joins online. Jack's salary is \$80,000 p.a. To calculate Jack's Opt-In Income Protection cover and his weekly premium, follow the following steps and refer to 7 *Premium Rates - Premium table 4*.

1. Determine Jack's monthly benefit - $\text{Income} \times 85\% / 12$ (rounded up to the next \$500).
2. Divide the monthly benefit by \$500.
3. Multiply 2. by the weekly premium.

Jack's cover and weekly premium will be:

1. $\$80,000 \times 85\% / 12 = \$6,000$. Maximum monthly Opt-In Income Protection cover = \$5,000 monthly benefit.
2. $\$5,000 / \$500 = 10$.
3. $10 \times \$0.76 = \7.60 per week.

White Collar Income Protection cover

Opt-In Income Protection cover at a reduced cost.

How does White Collar cover work?

If accepted, White Collar cover may entitle you to Opt-In Income Protection cover at a reduced cost. Depending on your income level it may also entitle you to more cover than Opt-In Income Protection cover. The maximum monthly benefit for White Collar Income Protection cover is \$7,500. Your monthly benefit is limited to 85% of your **Income**.

White Collar cover provides you with a monthly benefit, after a **Waiting Period** of 90 days, for up to two years if you are unable to work due to injury or sickness.

The **Waiting Period** commences from the date a **Medical Practitioner** certifies you are **Totally Disabled** and unable to work as determined by the insurer. Benefit payments will start accruing when the **Waiting Period** ends and are paid monthly in arrears.

Your amount of cover is a fixed monthly benefit amount. Your cover amount is calculated as 85% of your **Income**, rounded up to the next \$500. The weekly cost per \$500 of cover is shown on 7 *Premium Rates - Premium table 4*.

Am I eligible for White Collar cover?

To be eligible for White Collar cover:

- you must have Standard Death and Total & Permanent Disability Assist cover,
- you must be permanently employed, and working at least 15 hours per week,
- at least 80% of the work you perform is in an office environment (excluding travel from one job to another), and
- you must be performing duties limited to clerical, administration, managerial (or similar) which do not involve more than 10% light manual duties.

How do I apply for White Collar cover?

You can apply:

- by completing the questions when you join online, or
- by applying to update your cover in **Member Online**, or
- by completing the White Collar eligibility questions on your *Membership application* form.

When does White Collar cover start?

If you apply within 120 days of joining Sunsuper, your White Collar cover will start from the later of:

- the start date of your Standard cover, or
- the date your application is accepted.

Where you hold Opt In Income Protection cover and apply for White Collar cover more than 120 days after joining Sunsuper, your White Collar cover will start from the date the insurer accepts your application.

How much does it cost?

The cost of cover depends on your age and gender and will increase at certain ages. Any premium change will occur on your birthday.

White Collar Opt-In Income Protection weekly premium rates (example)

Your age	Premium (\$) per week (per \$500 monthly benefit)	
	Male	Female
15	0.23	0.32
25	0.23	0.32
35	0.23	0.32
45	0.51	0.81
55	1.26	1.61
65	N/A	N/A

To find out which premium applies to you take a look at the *7 Premium Rates - Premium table 4*. To calculate your weekly premium simply divide your monthly cover amount by \$500 and multiply by the Income Protection premium.

Premiums are calculated weekly and normally deducted from your *Super-savings account* each month.

Exclusions and restrictions

An Income Protection benefit will not be paid if the injury or illness is caused, wholly or partly, directly or indirectly, from:

- a deliberate self-inflicted injury or attempted suicide or self-destruction while sane or insane,
- an uncomplicated pregnancy, childbirth or miscarriage,
- your deployment to a hostile environment as part of active military service, where you participate in active service after your cover commences or increases,
- a criminal act committed by you, or
- a fraudulent claim is made.

Limited Cover will apply to your Opt-In Income Protection cover for a period of 24 months and until you have been **At Work** for 30 consecutive days after the end of the 24 month period. Please refer to *9 Definitions* for the **Limited Cover** and **At Work** definitions.

Tailored Income Protection cover

Select a **Waiting Period** and **Benefit Period** that suits your individual circumstances.

How does Tailored Income Protection cover work?

If you're not eligible for Opt-In Income Protection cover, or you have previously cancelled your cover and want to reapply, or you simply want to change the level of your Income Protection insurance cover you may apply for Tailored Income Protection cover.

You can choose the length of your **Benefit Period** and **Waiting Period**. Income Protection cover provides you with monthly income for up to 2 years, 5 years or to age 65 after a **Waiting Period** of either 30, 60, 90 or 180 days, upon acceptance by the insurer of your inability to work due to injury or sickness. Payments are made monthly in arrears after the conclusion of the **Waiting Period**.

Am I eligible to apply for Tailored Income Protection cover?

You are eligible for Tailored Income Protection cover if you are aged 15 to 64 and working at least 15 hours per week and:

- you are permanently employed, or
- you are **Self-Employed**, or
- you are working in Australia under the terms of a work visa. Your **Benefit Period** will be limited to your legal eligibility to work in Australia.

Casuals and contractors can apply for Tailored Income Protection cover but restrictions apply (for example, you are only eligible for a 2-year **Benefit Period**. A minimum contract period of 6-months applies to contractors).

Any application for Income Protection cover is subject to acceptance by the insurer. Satisfactory evidence of health will be required. Sunsuper reserves the right to limit the amount of Tailored Income Protection cover provided. Contact us on **13 11 84** for more information.

Maximum amount of Tailored Income Protection cover

You can apply for an amount of cover up to 85% of your **Income** (75% of your **Income** plus 10% superannuation contribution) but not more than \$30,000 per month. **Income** is defined in *9 Definitions*.

Interim Accident cover

Where you apply for Tailored Income Protection cover, up to 90 days Interim Accidental Income Protection cover will apply from the date of receipt of your completed *Tailored insurance application* form. **Accident** is defined in *9 Definitions*. No additional premium is charged for the Interim Accident cover.

The Interim Accident cover ends on the earlier of the acceptance, deferral or rejection of your application for Income Protection cover or 90 days from receipt of your application.

The maximum Interim Accident cover available is \$15,000 per month or the amount of cover you applied for, whichever is the lesser. The **Benefit Period** and **Waiting Period** you applied for will also apply to any Interim Accident cover. No Interim Accident cover will be paid if during the interim period, death or disability is caused directly or indirectly by engaging in any sport or pastime that the insurer would not normally cover at standard rates or any other exclusion under the policy.

It's simple; you can apply for Tailored cover anytime.

Just visit **Member Online**, select *Insurance*, and follow the prompts to apply. If you're not signed up for **Member Online** – it's simple – you can register for online access at sunsuper.com.au/memberonline or contact us on **13 11 84** and we'll have you set up in no time.

Exclusions and restrictions

An Income Protection benefit will not be paid if the injury or illness is caused, wholly or partly, directly or indirectly, from:

- a deliberate self-inflicted injury or attempted suicide or self-destruction while sane or insane,
- an uncomplicated pregnancy, childbirth or miscarriage,
- your deployment to a hostile environment as part of active military service, where you participate in active service after your cover commences or increases,
- a criminal act committed by you,
- any other exclusion imposed by the insurer as a result of underwriting, or
- a fraudulent claim is made.

Indexation of Tailored Income Protection cover

Tailored Income Protection cover will be indexed annually on 1 July, based on the annual trend adjusted increase in Average Weekly Ordinary Time Earnings (AWOTE) at the previous November. This means that the amount of your Tailored Income Protection cover will increase at each 1 July. Any increase will be limited to a maximum of 5%.

You can choose to not have your Tailored Income Protection indexed each year or opt back into automatic indexation of your Tailored Income Protection cover. Use the *Insurance variation form* at sunsuper.com.au/insuranceforms

If you choose to opt back into annual indexation the increased Income Protection cover will be subject to **Limited Cover** for a period of 24 months and until you are **At Work** for 30 consecutive days after the end of the 24 month period.

Example of how your Tailored Income Protection cover will be indexed:

Fiona is 28 years old when she applies for and is accepted for Tailored Income Protection cover. Her Income is \$60,000 p.a. and the date of acceptance is 1 March. The indexation rate for 1 July is 2.3%.

Cover at 1 March (date of acceptance):

$\$60,000 \times 85\% = \$51,000$ p.a. = \$4,250 per month

New cover at next 1 July:

$\$51,000 \times 1.023 = \$52,173$ p.a. = \$4,347 per month

If Fiona had previously opted out of indexation and then chose to opt back into annual indexation, indexation will restart from 1 July thereafter the increased cover of \$1,164 p.a. will be subject to **Limited Cover** for 24 months until you are **At Work** for 30 consecutive days after the 24 month period.

What happens to my Opt-In Income Protection or White Collar Income Protection cover?

If Tailored Income Protection cover is approved, the premium previously applied to your Opt-In Income Protection or White Collar Income Protection insurance cover will no longer apply and your total Income Protection cover and premium will be based on your occupational classification.

What are the Occupational Categories?

When you apply for Tailored Income Protection cover the insurer will determine your Occupational Category based on your occupation at the time. When calculating your insurance premium within Tailored cover, an occupational loading will be applied based on your Occupational Category. Refer to **Occupational Categories** in *9 Definitions* for a brief description of how they are determined.

Can you change your Occupational Category?

If your occupation changes so you are in a less manual or less hazardous occupation, you can request a change to your Occupational Category by completing the *Increase or update your insurance cover form* in **Member Online**.

A change in your Occupational Category may result in a lower premium.

How much is the premium and when is it paid?

The premium payable for Tailored Income Protection cover is based on your amount of cover, **Benefit Period**, **Waiting Period**, gender, occupation, health and age. The premium is recalculated with any change in your cover amount and on your birthday each year. Occupation is based on the six **Occupational Categories** shown in *9 Definitions*. Income Protection cover may not be available for hazardous occupations and will be assessed on a case-by-case basis.

The premium is normally deducted from your *Super-savings account* balance each month, which is great as it won't impact your take-home pay. You should ensure you have sufficient money in your *Super-savings account* to pay premiums and maintain your insurance cover. The total premium includes stamp duty and a 5% insurance fee to offset Sunsuper's cost of providing the cover, and is deducted from your *Super-savings account* balance.

The *Premium tables 5 to 7* set out the annual premium for each \$1,000 of annual insured benefit for the 2 year, 5 year and to age 65 **Benefit Periods**. When the insurer assesses your application for Tailored cover, the insurer may apply a loading (a higher premium).

Transferring your Income Protection insurance cover

You may be eligible to transfer existing Income Protection cover (from other super funds or insurance policies up to \$10,000 per month) to Sunsuper. To transfer your existing cover please complete and return the *Transfer of insurance cover* form available at [sunsuper.com.au/insuranceforms](https://www.sunsuper.com.au/insuranceforms)

You will not be eligible to transfer your cover if:

- you have previously had an application for additional insurance cover declined,
- you have been paid, lodged or eligible to lodge any Total & Permanent Disability, **Permanent Incapacity**, **Terminal Illness** or Income Protection claim, or
- you are absent from work or unable to carry out all of the duties of your usual occupation due to an injury or illness at the transfer date.

It's important you include all required documentation, which will include:

- a letter or certificate of currency from your superannuation fund or insurance provider detailing your current insurance cover,
- details of any loadings, exclusions and restrictions applicable to that cover, and
- the confirmation must have been issued within 30 days of your application.

If accepted by the insurer:

- you will be subject to the terms and conditions outlined in the Income Protection policy provided by AIA Australia,
- the **Waiting Period** and **Benefit Period** you had will be transferred where they are offered under the policy, or where not available under the policy, the **Waiting Period** will be the next longest period and the **Benefit Period** the next shortest period offered by the policy,
- you will need to cancel the cover you had under your previous fund or policy, and
- the transferred cover will be additional to any existing insurance cover you have subject to your total Income Protection cover not exceeding 85% of your **Pre-Disability Income**. The maximum benefit limit is \$30,000 per month.

If you are thinking about transferring your existing insurance cover, make sure you compare the features and benefits and are accepted by the insurer before cancelling existing cover.

Can your health affect your insurance cover?

When the insurer assesses your application for Tailored insurance cover, they may ask for further details in relation to the information you disclose in your *Tailored insurance application*.

As a condition of acceptance of the Tailored insurance cover, the insurer may apply a loading (a higher premium) for the increased amount of Income Protection cover. The insurer may also specify a benefit exclusion that will apply if a claim for the increased amount of insurance is related to a specified condition or pastime.

Any premium loadings or benefit exclusions will be advised to you as a Special Acceptance offer. You will be required to either accept or decline this offer within 30 days. If no response is received from you it will be deemed that you have declined this offer. Interim Cover will apply until the terms are accepted or declined. If you do not respond to the Special Acceptance offer within 30 days the application will be cancelled and Interim Cover will cease.

If you accept the terms of the offer, your increased insurance cover will start on the date you accept the Special Acceptance offer.

Where you have maintained the same **Benefit Period** and **Waiting Period** any loadings or exclusions will only apply above the amount of any Opt-In Income Protection or White Collar Income Protection insurance cover you may have at the time of acceptance of your Tailored Income Protection cover application.

Conditions and Exclusions

When does Income Protection cover start?

Where you apply within 120 days of joining Sunsuper, Opt-In Income Protection cover and White Collar Income Protection cover will commence from the later of:

- the start date of your Standard Insurance cover, or
- the date your application is accepted.

Opt-In Income Protection is not available after 120 days of joining Sunsuper.

If you hold Opt-In Income Protection cover and apply for White Collar Cover more than 120 days after you joined Sunsuper, White Collar Cover will start from the date the insurer accepts your application. Tailored Income Protection cover will start from the later of the date the insurer approves your application, where the insurer's approval is not subject to any loadings or benefit exclusions; or the date you accept the Special Acceptance offer within 30 days, where the insurer's approval is subject to any loadings or benefit exclusions. Interim Cover will apply until the terms are accepted or declined. If you do not respond to the Special Acceptance offer within 30 days the application will be cancelled and Interim Cover will cease.

Commencement of cover is also subject to you having sufficient money in your *Super-savings account* to pay insurance premiums. If you do not have enough money in your *Super-savings account* to pay premiums, you will be notified of the conditions that apply to you.

When does Income Protection cover stop?

Income Protection cover stops when:

- you withdraw all your money from Sunsuper,
- you turn 65,
- you cancel the cover,
- you die,
- your period of **Unpaid Leave** or parental leave exceeds 24 months,
- you cease employment with your Australian-based employer whilst overseas,
- the premium is due and there is not enough money in your *Super-savings account* to pay the total premium (including stamp duty) and it remains unpaid for four months (zero account balance),
- your *Super-savings account* has not received an **Eligible Contribution** in the past 12 months or more and you have not elected in writing to keep your cover¹ (contribution inactivity), or
- the policy issued to Sunsuper is cancelled or terminated for any reason.

It is your responsibility to check there is always enough money in your *Super-savings account* to pay insurance premiums.

¹ Where we have valid contact details, we will contact you advising the date your cover will stop. Generally, cover will stop 12 months after the date of your last Eligible Contribution. To prevent the erosion of your account balance from insurance premiums, you should consider maintaining regular contributions into your account and retain a balance above a level that's right for you. If you want your insurance cover to continue even if there are no regular contributions for continuous periods of 12 months or more, you can advise us in writing or visit [sunsuper.com.au/keepmyinsurance](https://www.sunsuper.com.au/keepmyinsurance).

Can Income Protection cover restart if it stops?

If your Income Protection cover automatically stops because of:

- contribution inactivity, or
- zero account balance,

it can only restart under specific circumstances.

Should you wish to restart cover, you will be required to complete an application that will be subject to health and employment assessment, and acceptance by the insurer. You will also be required to ensure your account has sufficient funds to pay future premiums.

Note: You will not be able to make a claim for the period between when your cover was cancelled and when your cover restarted.

What happens if I want to reduce or cancel my cover?

If you don't want Opt-In Income Protection, White Collar Income Protection or Tailored Income Protection cover, you can reduce or cancel insurance cover at any time through **Member Online** our secure online service or by contacting us.

A reduction or cancellation of cover will be effective from the date your instruction is received.

What happens if your work situation changes or you leave your employer?

Your existing Income Protection insurance cover will continue when you leave your employer. Premiums will continue to be deducted from your *Super-savings account* balance. However, it is important that you notify us if:

- you change occupation,
- your income changes,
- you change employers, or
- you are no longer working,

so that we can update your records and determine the impact of any changes.

Your cover may stop (refer to *When does Income Protection cover stop?* in this section) or your premium may change if your circumstances change as outlined above. You should contact us to determine the impact of any changes.

If you are unemployed at the **Date of Disablement** and have been unemployed for a period of more than 12 months, you will not be eligible to make a claim for an Income Protection benefit.

You must let us know if you wish to cancel your Income Protection insurance cover.

What happens if you return to work during the Waiting Period?

If the **Waiting Period** you select is 30 days, you may return to work for up to five days during that time without having to start the **Waiting Period** again. If your **Waiting Period** is 60, 90 or 180 days, you may return to work for up to 10 days during that time without having to restart the **Waiting Period**. If you do return to work, your original **Waiting Period** will extend by the number of days you returned to work.

If you return for longer than those periods specified your **Waiting Period** will restart.

What happens during Unpaid Leave or parental leave?

Total premiums (including stamp duty) will continue to be deducted from your *Super-savings account* during the period of leave. It is your responsibility to ensure sufficient monies are in your *Super-savings account* during the period of leave to pay your premiums. Your Income Protection cover will stop after 24 months.

Warning - If your account does not receive an **Eligible Contribution** for at least a 12 month period and you haven't informed us in writing that you wish to keep your insurance cover, your cover will normally cease 12 months after your last **Eligible Contribution**.

Refer to *9 Definitions* for the **Unpaid Leave** definition.

What happens if you travel overseas on paid leave?

Where you travel overseas while on paid leave from your Australian-based employer (or an international subsidiary or associated company of your Australian employer), your Income Protection cover continues with no travel restrictions.

Total premiums (including stamp duty) will continue to be deducted from your *Super-savings account* during the period of leave. It is your responsibility to ensure sufficient monies are left in your *Super-savings account* during the period of leave to pay your premiums.

If you cancel your cover while on leave, you will need to reapply for cover on returning to work. Satisfactory evidence of health will be required to restart this cover.

What happens if you temporarily reside overseas?

Your Income Protection cover will continue while temporarily residing overseas as long as you remain in active employment with your Australian-based employer (or an international subsidiary or associated company of your Australian employer). If you become disabled while based overseas you may, at your expense, be required to return to Australia for assessment of any disability claim.

Where you temporarily reside overseas during a period of **Unpaid Leave**, your Income Protection cover may continue for up to 24 months.

Any disablement claim will be dependent on your employment status at the time of becoming disabled.

Warning - If your account does not receive an **Eligible Contribution** for at least a 12 month period and you haven't informed us in writing that you wish to keep your insurance cover, your cover will cease 12 months after your last **Eligible Contribution**.

What benefit is paid out?

After the **Waiting Period**, the monthly benefit is payable for up to a maximum period of:

- 2 years,
- 5 years, or
- to age 65

depending on the **Benefit Period** you have chosen, while you continue to meet the insurer's definition of **Total Disability**.

The monthly benefit payable will generally be the lower of:

- the level of cover selected by you less any offsets, and
- 75% of your monthly rate of **Pre-Disability Income**, plus up to 10% superannuation contributions for Tailored cover or up to 25% superannuation contributions for Opt-In Income Protection or White Collar Income Protection cover, less any offsets.

The benefit paid to you will usually be taxable income and attract PAYG tax (the same as salary and wages) which will be deducted from the benefit before it is paid to you.

Refer to *9 Definitions* for more details on **Pre-Disability Income**. Income is usually calculated at your **Date of Disablement**. Refer to *Will there be offsets to my benefit payment?* further in this section, for more details on offsets.

Recurrent event

Following a claim, if you make a further claim arising from the same or related cause as the first claim, the further claim will be:

- (a) treated as a separate claim if it occurred after you returned to work for at least six continuous months, or
- (b) deemed to be a continuation of the original claim if made within six months from the end of payments from the earlier claim. A further **Waiting Period** will not apply in this case but the relevant **Benefit Period** will be adjusted to take into account prior benefits paid under this policy for the original claim.

Concurrent event

Where you are **Totally Disabled** because of more than one injury or illness, or from both, whether related or not, benefits are payable in respect of only one injury or illness, as the insurer shall reasonably determine, based on medical evidence.

Updating your Income Protection cover

It is very important you keep your level of Income Protection cover up to date. Apart from the indexation of your Tailored Income Protection cover each 1 July, you will need to apply for any additional increase in the level of Tailored Income Protection cover you require – providing new income details alone does not increase the cover. Your application must be accepted by the insurer.

With Opt-In Income Protection or White Collar Income Protection cover, you must apply for any increase and your total Income Protection cover will become Tailored Income Protection cover on acceptance by the insurer.

Will there be offsets to my benefit payment?

An offset means that the benefit payable may be reduced if you receive other income while you're unable to work due to illness or injury.

Your Income Protection benefit payment may be reduced by the following payments:

- all benefits or payments for workers' compensation or transport accident compensation or similar legislation in relation to your injury or sickness, whether as a lump sum or periodic payments paid to you for loss of income, loss of earning capacity or other economic loss,
- any other payments, statutory or as damages under Common Law, paid to you for loss of income, loss of earning capacity, or any other economic loss (including any benefits or payments for work injury damages) whether paid as a lump sum or not, in relation to your injury or sickness,
- any other payments made under any disability income type insurance policy,
- any other lump sum payment which relates to loss of income, loss of earning capacity, or any other economic loss due to injury or sickness whether under legislation or otherwise (other than a Total & Permanent Disability or **Terminal Illness** benefit under this Policy), or
- any paid sick leave from your employer (however the insurer does not require all sick leave to be used before commencement of the income benefit).

If an amount is commuted (or will be commuted) to a lump sum, then for the purposes of the offset calculation the lump sum will be converted to a monthly amount at the rate of 1/60th of the lump sum per month over a period of 60 months.

Payment of benefits

The insurer will pay monthly benefits directly to you with a maximum payment of 75% of **Pre-Disability Income**. Any remaining benefit will be paid to your *Super-savings account*. Generally, Income Protection payments are considered taxable income and subject to Pay As You Go (PAYG) tax. If applicable, an income statement will be issued by the insurer at the end of the financial year.

The definition of **Total Disability** you will be assessed against in the event of a claim is linked to the number of hours you are working prior to the claim event. If you are a casual employee, unemployed, or working on average less than 15 hours per week in the three months prior to becoming disabled, you will be assessed against the **Limited Total Disability** definition. If you were working on average 15 or more hours per week in the three months prior to becoming disabled, you will be assessed against the **Total Disability** definition. If your claim is accepted, payments (monthly in arrears) will start when the **Waiting Period** finishes. Any claim for your Income Protection benefit is assessed independently of any total & permanent disability claim.

The Income Protection benefit is subject to a maximum level based on your most recent **Pre-Disability Income** accepted by the insurer immediately before you become **Totally Disabled**. If you are on **Unpaid Leave** or parental leave, your benefit is based on your most recent **Pre-Disability Income** accepted by the insurer immediately prior to starting leave. Any insured superannuation contributions up to 10% for Tailored Income Protection cover, or up to 25% for Opt In Income Protection or White Collar Income Protection cover, will be paid directly to your *Super-savings account* on your behalf. These amounts count towards your concessional contribution cap. Payments will be made monthly in arrears.

Indexation of Tailored Income Protection benefits

When on claim your Tailored Income Protection benefits will be indexed by the lesser of the Consumer Price Index (**CPI**) or 5% on each anniversary of the commencement of your continuing Tailored Income Protection claim.

Partial Disability

A reduced monthly Income Protection benefit may be payable if you become **Partially Disabled**. Refer to 9 Definitions for the **Partial Disability** definition.

Where you are unable to work at full capacity due to illness or injury, and

- following a period of **Total Disability** for seven (7) out of the first ten (10) working days of the **Waiting Period**, and your ongoing disablement during the remainder of the **Waiting Period**, and you have returned to work in your usual or an alternative occupation, and
- your monthly income is less than your **Pre-Disability Salary**, and
- you are under the care of, and complying with the reasonable advice given by a **Medical Practitioner**.

We will pay a partial disablement monthly benefit. The benefit payable is calculated in accordance with the following formula.

$[(A - B) \times C] / A$ where:

A is your **Pre-Disability Salary**

B is your actual Salary during the month of **Partial Disability**

C is the monthly benefit

Proof of Income

In the event of a claim, proof of Income is required to ensure your benefit does not exceed the maximum allowable amount, which is generally 85% of your Income, at the first day of absence from active employment due to injury or sickness resulting in **Total Disability**.

When does payment of the benefit stop?

Benefit payments start after the **Waiting Period**, and will cease upon the earliest of any of the following events:

- you no longer satisfy the definition of **Total Disability**, **Limited Total Disability** or **Partial Disability**, as assessed by the insurer,
- the end of the benefit payment period,
- for a **Partial Disability** benefit, the date you earn, or become capable of earning, a monthly salary equal to or greater than your **Pre-Disability Salary**,
- you are no longer under the care of, and or complying with the reasonable advice given by a **Medical Practitioner**,
- you reside overseas and have received 12 months of benefit payments,
- you reach age 65, or
- your death.

The benefit will continue to be paid even if the insurer assesses you to be totally and permanently disabled.

Providing you were an insured member of Sunsuper at the time you finished work due to the injury or sickness that gave rise to a claim, monthly income benefits will be payable or continue to be paid, regardless of whether you continue to be a member of Sunsuper.

No premium required

Your Income Protection premiums will be waived from the end of the **Waiting Period** and will continue whilst a monthly benefit is payable. Once you stop receiving benefit payments, deduction of the Income Protection premiums will recommence being deducted from your *Super-savings account*.

6. How do I apply?

The following table shows you the type of cover you can apply for given your particular circumstances, and the various forms available for completion and where they can be found.

What are you applying for?	When should you apply?	How can you apply?	Where can you go to apply?
Standard Death and Total & Permanent Disability Assist cover	Standard cover is provided automatically when you have attained age 25 and reached an account balance of \$6,000 (subject to you meeting the other eligibility criteria).	<i>N/A - automatic cover</i>	N/A
	After joining Sunsuper, you can opt in to Standard cover before attaining age 25 or reaching a balance of \$6,000, at any time (subject to you meeting the other eligibility criteria).	<i>Member online; or</i> <i>Call us</i>	sunsuper.com.au/memberonline 13 11 84
White Collar cover – Death and Total & Permanent Disability Assist	Within 120 days of joining Sunsuper (and you are eligible for Standard Death & Total & Permanent Disability Assist cover)	<i>Membership application form; or</i> <i>New Member Options form</i>	In the <i>PDS</i> , visit sunsuper.com.au/pds sunsuper.com.au/insuranceforms
	On joining Sunsuper	Join online or via <i>Member Online</i>	sunsuper.com.au/join
	Outside 120 days of joining Sunsuper and you have Standard Death and Total & Permanent Disability Assist cover	<i>Increase or update your insurance cover form in Member Online</i>	sunsuper.com.au/memberonline
Life and Age Events	Not more than 180 days after the Life or Age Event, you are less than age 67 and you have either Standard Death and Total & Permanent Disability Assist or White Collar cover	<i>Increase or update your insurance cover form in Member Online</i>	sunsuper.com.au/memberonline
Tailored cover	Anytime	Online application via <i>Member online</i>	sunsuper.com.au/memberonline
	If you wish to apply for Tailored Death and/or Total & Permanent Disability or Tailored Total & Permanent Disability Assist cover	<i>Tailored insurance application form; or</i>	sunsuper.com.au/insuranceforms
Opt-In Income Protection cover	Within 120 days of joining Sunsuper	<i>Membership application form; or</i> <i>New Member Options form</i>	In the <i>PDS</i> , visit sunsuper.com.au/pds sunsuper.com.au/insuranceforms
	On joining Sunsuper	Join online or via <i>Member Online</i>	sunsuper.com.au/join
White Collar – Income Protection cover	On joining Sunsuper	Join online or via <i>Member Online</i>	sunsuper.com.au/join
	Within 120 days of joining Sunsuper (and you are eligible for Opt-In Income Protection cover)	<i>Membership application form; or</i> <i>New Member Options form</i>	In the <i>PDS</i> , visit sunsuper.com.au/pds sunsuper.com.au/insuranceforms
	Outside 120 days of joining Sunsuper and you have Opt-In Income Protection cover	<i>Increase or update your insurance cover form in Member Online</i>	sunsuper.com.au/memberonline
Tailored cover – Income Protection	Anytime	<i>Tailored insurance application form; or</i>	sunsuper.com.au/insuranceforms
	If you wish to apply for Tailored Income Protection cover, or decrease your existing Waiting Period or increase your existing Benefit Period	Online application via <i>Member online</i>	sunsuper.com.au/memberonline

What are you applying for?	When should you apply?	How can you apply?	Where can you go to apply?
Tailored cover – restarting Insurance cover on transfer from Sunsuper for life Corporate or Sunsuper for life Business	Within 120 days of ceasing employment with your <i>Sunsuper for life Corporate</i> or <i>Sunsuper for life Business</i> employer	<i>Insurance transfer application</i> form	sunsuper.com.au/insuranceforms
Reducing or cancelling your insurance cover	Anytime To reduce or cancel some or all of: <ul style="list-style-type: none"> • Death and Total & Permanent Disability • Death only • Total & Permanent Disability only • Income Protection <ul style="list-style-type: none"> • Increase your existing Waiting Period • Decrease your existing Benefit Period 	Online application via <i>Member Online</i> ; or	sunsuper.com.au/memberonline
		Call us; or	13 11 84
Tailored cover – improving your occupational category	Anytime To apply for a better occupational category than you have within Tailored cover	Online application via <i>Member Online</i>	sunsuper.com.au/memberonline
Transfer of insurance cover to Sunsuper	Anytime (but do not cancel your existing cover until your transfer is accepted by the insurer)	<i>Transfer of insurance cover</i> form	sunsuper.com.au/insuranceforms

7. Premium Rates

Work out your premium costs with the following tables.

Standard Death and Total & Permanent Disability Assist

Standard cover and White Collar cover (Premium table 1)

Use the following table to determine the Standard Death and Total & Permanent Disability Assist cover and White Collar cover available to eligible members, and the premiums that apply. Refer to the *Support payments and maximum benefit* section to see the initial and subsequent support payments that apply for Standard Total & Permanent Disability Assist cover.

Your age	Amount of cover (\$)				Premium (\$) per week			
	Standard Cover		White Collar cover		Death only		Death and Total & Permanent Disability Assist	
	Death	Total & Permanent Disability Assist ² (Maximum Benefit)	Death	Total & Permanent Disability Assist ² (Maximum Benefit)	Male	Female	Male	Female
15 to 21	62,500	125,000	93,750	187,500	0.96	0.56	2.40	1.40
22 to 29	125,000	175,000	187,500	262,500	1.92	1.08	4.16	2.68
30 to 33	250,000		375,000		3.84	2.16	7.44	4.84
34	246,000		369,000					
35	240,000		360,000					
36	230,000		345,000					
37	219,000		328,500					
38	209,000		313,500					
39	197,000		295,500					
40	186,000		279,000					
41	176,000		264,000					
42	163,000		244,500					
43	152,000		228,000					
44	142,000		213,000					
45	132,000		198,000					
46	122,000		183,000					
47	113,000		169,500					
48	103,000		154,500					
49	93,000		139,500					
50	83,000		124,500		4.12	2.36	8.92	6.84
51	75,000		112,500					
52	66,000		99,000					
53	57,000		85,500					
54	48,000		72,000					
55	42,000		63,000					
56	36,000		54,000					
57	32,000		48,000					
58	29,000		43,500					
59	27,000		40,500					
60	25,000		37,500					
61	23,000		34,500					
62	21,000		31,500					
63	19,000		28,500					
64	17,000		25,500					
65 to 66	16,000		24,000		4.12	2.36	N/A	N/A
67 to 69 ¹	16,000	N/A	24,000	N/A				

¹ Cover from age 67 is Death only.

² If you are approved for a Total & Permanent Disability Assist benefit you may be paid up to six support payments over a minimum of five years (where you continue to meet the **Total & Permanent Disability Assist** definition). The initial support payment is calculated as 25% of your maximum benefit amount at the **Date of Disablement**. The subsequent support payments (up to a maximum of five payments) are each calculated as 15% of your maximum benefit amount at the **Date of Disablement**. The maximum benefit shown is the sum of the initial support payment and all 5 subsequent support payments.

Life and Age Event options cover and premiums (Premium table 2)

Use the following table to determine the cover and premiums for Sunsuper's Life and Age Event options. The cover and premiums listed are in addition to your Death and Total & Permanent Disability Assist or White Collar cover and premiums once accepted by the insurer.

Your age	Amount of cover (\$)				Premium (\$) per week			
	Life and Age Event options		White Collar Life and Age Event options		Death only		Death and TPD ¹ Assist	
	Death	TPD ¹ Assist (Maximum Benefit) ²	Death	TPD ¹ Assist (Maximum Benefit) ²	Male	Female	Male	Female
15 to 21	15,625	31,250	23,438	46,875	0.24	0.14	0.60	0.35
22 to 29	31,250	43,750	46,875	65,625	0.48	0.27	1.04	0.67
30 to 33	62,500		93,750		0.96	0.54	1.86	1.21
34	61,500		92,250					
35	60,000		90,000		1.03	0.59	2.23	1.71
36	57,500		86,250					
37	54,750		82,125					
38	52,250		78,375					
39	49,250		73,875					
40	46,500		69,750					
41	44,000		66,000					
42	40,750		61,125					
43	38,000		57,000					
44	35,500		53,250					
45	33,000		49,500					
46	30,500		45,750					
47	28,250		42,375					
48	25,750		38,625					
49	23,250		34,875					
50	20,750		31,125					
51	18,750		28,125					
52	16,500		24,750					
53	14,250		21,375					
54	12,000		18,000					
55	10,500		15,750					
56	9,000		13,500					
57	8,000		12,000					
58	7,250		10,875					
59	6,750		10,125					
60	6,250		9,375					
61	5,750		8,625					
62	5,250		7,875					
63	4,750		7,125					
64	4,250		6,375					
65 to 66	4,000		6,000					
67 to 69 ³	4,000	N/A	6,000	N/A			N/A	N/A

¹ TPD means Total & Permanent Disability.

² If you are approved for a Total & Permanent Disability Assist benefit you may be paid up to six support payments over a minimum of five years (where you continue to meet the **Total & Permanent Disability Assist** definition). The initial support payment is calculated as 25% of your maximum benefit amount at the **Date of Disablement**. The subsequent support payments (up to a maximum of five payments) are each calculated as 15% of your maximum benefit amount at the **Date of Disablement**. The maximum benefit shown is the sum of the initial support payment and all 5 subsequent support payments.

³ Cover from age 67 is Death only. You can only apply for Life Event options up to age 67.

Notes:

- Different cover and premium arrangements may exist; you will have been informed separately if this applies.

Tailored insurance cover (Premium table 3)

Tailored Death; Tailored Total & Permanent Disability cover; Tailored Total & Permanent Disability Assist cover

Annual premiums for each \$1,000 insured benefit for White occupational category

Your age	Male			Female		
	Death	TPD ¹	TPD ¹ Assist	Death	TPD ¹	TPD ¹ Assist
15	0.37	0.05	0.05	0.12	0.03	0.03
16	0.37	0.05	0.05	0.12	0.03	0.03
17	0.40	0.05	0.05	0.12	0.03	0.03
18	0.43	0.12	0.10	0.14	0.03	0.03
19	0.47	0.11	0.09	0.14	0.03	0.03
20	0.47	0.14	0.12	0.14	0.05	0.05
21	0.50	0.17	0.14	0.14	0.05	0.05
22	0.51	0.19	0.16	0.12	0.03	0.03
23	0.51	0.21	0.18	0.12	0.03	0.03
24	0.51	0.25	0.21	0.12	0.08	0.07
25	0.51	0.27	0.23	0.12	0.05	0.04
26	0.51	0.24	0.20	0.12	0.05	0.04
27	0.49	0.27	0.23	0.14	0.08	0.07
28	0.48	0.28	0.24	0.14	0.09	0.08
29	0.48	0.32	0.27	0.15	0.11	0.10
30	0.49	0.32	0.27	0.17	0.13	0.11
31	0.48	0.33	0.28	0.17	0.16	0.13
32	0.49	0.33	0.28	0.18	0.16	0.13
33	0.50	0.33	0.28	0.21	0.19	0.16
34	0.52	0.37	0.32	0.22	0.23	0.19
35	0.53	0.44	0.37	0.24	0.25	0.21
36	0.55	0.52	0.44	0.27	0.29	0.25
37	0.58	0.58	0.49	0.28	0.34	0.29
38	0.61	0.63	0.54	0.31	0.40	0.34
39	0.64	0.72	0.61	0.35	0.43	0.37
40	0.67	0.80	0.68	0.40	0.50	0.42
41	0.69	0.89	0.76	0.43	0.56	0.47
42	0.72	0.99	0.84	0.47	0.65	0.55
43	0.75	1.10	0.94	0.51	0.72	0.61
44	0.80	1.25	1.06	0.55	0.83	0.70
45	0.85	1.42	1.21	0.59	0.93	0.79
46	0.89	1.58	1.34	0.63	1.02	0.87
47	0.96	1.70	1.44	0.68	1.14	0.97
48	1.04	1.81	1.54	0.73	1.26	1.07
49	1.14	1.97	1.67	0.79	1.42	1.20
50	1.25	2.16	1.83	0.84	1.56	1.33
51	1.38	2.63	2.23	0.90	1.75	1.48
52	1.54	3.07	2.61	0.99	1.90	1.62

Your age	Male			Female		
	Death	TPD ¹	TPD ¹ Assist	Death	TPD ¹	TPD ¹ Assist
53	1.73	3.49	2.96	1.07	2.13	1.81
54	1.93	3.87	3.29	1.17	2.37	2.01
55	2.16	4.31	3.66	1.29	2.68	2.27
56	2.42	4.80	4.07	1.42	3.05	2.59
57	2.65	5.53	4.70	1.59	3.45	2.93
58	2.95	6.38	5.42	1.78	3.96	3.36
59	3.27	7.09	6.02	1.97	4.52	3.84
60	3.64	7.96	6.76	2.21	5.17	4.39
61	3.99	8.66	7.36	2.46	5.90	5.01
62	4.44	8.87	7.53	2.76	6.75	5.73
63	5.29	10.89	9.24	3.07	7.53	6.39
64	6.33	12.69	10.77	3.44	8.41	7.14
65	7.16	19.24	16.33	3.84	13.21	11.22
66	7.96	21.99	18.67	4.26	15.40	13.08
67	8.74			4.70		
68	10.13	n/a	n/a	5.19	n/a	n/a
69	11.55			5.66		

Occupational Categories

Occupational Category	Death	TPD ¹ / TPD ¹ Assist
Professional	0.85	0.85
White	1.00	1.00
Light Blue	1.20	1.60
Medium Blue	1.30	2.10
Heavy Blue	1.40	2.50
Hazardous	4.20	15.80

¹ TPD means Total & Permanent Disability.

Notes:

- You can only hold one type of disability cover, being either Total & Permanent Disability or Total & Permanent Disability Assist.
- Total & Permanent Disability cover and Total & Permanent Disability Assist cover ends when you turn 67 and Death cover ends when you turn 70.
- Cover is available on a **Fixed Premium** or **Fixed Cover** basis.
- Rounding variations may occur when calculating premiums.
- Different cover and premium arrangements may exist; you will have been informed separately if this applies.

Cost of Tailored insurance cover

To calculate the annual cost of Tailored insurance cover, locate the annual premium for your age, gender and type of cover, then calculate as follows:

Annual premium = (Amount of cover / 1,000) x Annual premium rate x Occupational category rating.

You will need to calculate each type of cover separately as a different Occupational category rating may apply.

To calculate the weekly premiums divide the total premium by 52.

Opt-In Income Protection and White Collar Income Protection cover

90 day *Waiting Period*, 2 year *Benefit Period* (Premium table 4)

Weekly Premiums for each \$500 monthly benefit

Your age	Income Protection premium (\$) per week (per \$500 monthly benefit)			
	Opt-In Income Protection		White Collar Income Protection	
	Male	Female	Male	Female
15 to 21	0.34	0.48	0.23	0.32
22 to 29				
30 to 33				
34				
35				
36				
37				
38				
39				
40				
41	0.76	1.21	0.51	0.81
42				
43				
44				
45				
46				
47				
48				
49				
50				
51	1.89	2.42	1.26	1.61
52				
53				
54				
55				
56				
57				
58				
59				
60				
61				
62				
63				
64				

The following notes apply to Premium tables 4, 5, 6, 7:

- These premiums include stamp duty.
- Rounding variations may occur when calculating premiums.

The following note applies to Premium tables 5, 6, 7:

- These premiums include a 5% insurance fee to offset Sunsuper's cost of providing the cover.

White Collar eligibility

To be eligible for White Collar Income Protection cover you must be:

- permanently employed, and working at least 15 hours per week, and
- at least 80% of the work you perform is in an office environment (excluding travel from one job to another), and
- performing duties limited to clerical, administration, managerial (or similar) which do not involve more than 10% light manual duties.

Tailored Income Protection cover

2 year *Benefit Period* (Premium table 5)

Annual premiums for each \$1,000 insurance benefit for White occupational category

Your age	Male				Female			
	<i>Waiting Period</i>							
	30 days	60 days	90 days	180 days	30 days	60 days	90 days	180 days
15	2.24	1.57	1.05	0.76	2.91	1.96	1.10	0.79
16	2.26	1.59	1.07	0.76	2.92	1.98	1.12	0.80
17	2.26	1.62	1.07	0.76	2.94	2.01	1.12	0.80
18	2.30	1.62	1.07	0.76	2.97	2.04	1.12	0.79
19	2.32	1.64	1.07	0.76	2.99	2.04	1.16	0.81
20	2.36	1.65	1.07	0.76	3.03	2.06	1.16	0.82
21	2.28	1.59	1.00	0.70	3.05	2.07	1.17	0.82
22	2.24	1.55	0.94	0.68	3.07	2.09	1.17	0.85
23	2.16	1.50	0.88	0.65	3.13	2.11	1.17	0.85
24	2.13	1.44	0.84	0.60	3.15	2.14	1.21	0.88
25	2.08	1.44	0.80	0.59	3.17	2.14	1.21	0.88
26	2.08	1.42	0.77	0.55	3.26	2.23	1.28	0.93
27	2.13	1.44	0.76	0.55	3.35	2.29	1.32	0.98
28	2.14	1.44	0.76	0.55	3.48	2.39	1.38	1.03
29	2.21	1.46	0.76	0.55	3.62	2.48	1.42	1.06
30	2.26	1.51	0.76	0.57	3.81	2.58	1.47	1.10
31	2.36	1.56	0.80	0.60	4.00	2.73	1.50	1.12
32	2.45	1.64	0.80	0.60	4.24	2.89	1.55	1.16
33	2.56	1.71	0.84	0.65	4.50	3.01	1.62	1.23
34	2.69	1.79	0.88	0.67	4.77	3.19	1.68	1.31
35	2.83	1.89	0.94	0.72	5.07	3.35	1.77	1.38
36	3.00	1.99	0.97	0.76	5.39	3.53	1.89	1.45
37	3.18	2.09	1.07	0.82	5.72	3.77	2.04	1.59
38	3.35	2.24	1.13	0.89	6.08	4.00	2.18	1.71
39	3.55	2.38	1.21	0.96	6.48	4.31	2.36	1.89
40	3.79	2.53	1.33	1.07	6.88	4.61	2.58	2.06
41	4.02	2.71	1.44	1.16	7.30	4.98	2.82	2.27
42	4.30	2.91	1.59	1.27	7.76	5.33	3.10	2.50
43	4.56	3.11	1.74	1.41	8.22	5.68	3.44	2.78
44	4.85	3.34	1.95	1.56	8.72	6.08	3.79	3.07
45	5.20	3.58	2.14	1.76	9.25	6.50	4.18	3.43
46	5.57	3.88	2.40	1.99	9.80	6.93	4.60	3.79
47	5.95	4.17	2.69	2.24	10.38	7.42	5.07	4.22
48	6.38	4.50	2.98	2.49	11.00	7.92	5.60	4.66
49	6.84	4.86	3.31	2.80	11.64	8.46	6.14	5.16
50	7.37	5.30	3.74	3.13	12.35	9.02	6.75	5.67
51	7.91	5.75	4.19	3.55	13.07	9.64	7.35	6.26
52	8.54	6.24	4.68	4.01	13.85	10.28	8.03	6.84
53	9.18	6.78	5.24	4.49	14.69	10.96	8.77	7.52
54	9.92	7.42	5.87	5.06	15.59	11.71	9.51	8.18
55	10.73	8.06	6.61	5.72	16.55	12.47	10.27	8.89
56	11.60	8.81	7.42	6.47	17.59	13.30	11.09	9.67
57	12.57	9.62	8.27	7.24	18.70	14.19	11.92	10.44
58	13.66	10.55	9.24	8.12	19.91	15.14	12.77	11.25
59	14.84	11.55	10.33	9.12	21.20	16.17	13.66	12.08
60	16.14	12.64	11.52	10.21	22.65	17.25	14.58	12.94
61	17.60	13.87	12.82	11.41	24.21	18.42	15.50	13.80
62	19.23	15.22	14.29	11.49	25.92	19.68	16.45	13.21
63	16.59	14.06	12.25	9.88	25.02	20.94	17.38	13.99
64	10.66	8.40	6.69	5.47	16.07	12.68	10.10	8.27

Occupational Categories

Occupational Category	Income Protection
Professional	0.85
White	1.00
Light Blue	1.40
Medium Blue	1.70
Heavy Blue	2.50
Hazardous	10.00

Occupational categories are applied to each of the **Benefit Period** and **Waiting Period** options available (refer to *Premium tables 5-7*).

Cost of Tailored Income Protection cover

To calculate the annual cost of Tailored Income Protection cover, locate the annual premium for your age, gender and elected **Waiting Period**, then calculate as follows:

Insured benefit = Annual Salary x up to 85%.

Annual premium = (Insured benefit / 1,000) x Annual premium rate x Occupational category rating.

To calculate the weekly premiums divide the total premium by 52.

Tailored Income Protection cover

5 year *Benefit Period* (Premium table 6)

Annual premiums for each \$1,000 insured benefit for White occupational category

Your age	Male				Female			
	<i>Waiting Period</i>							
	30 days	60 days	90 days	180 days	30 days	60 days	90 days	180 days
15	3.94	2.89	1.90	1.47	5.12	3.64	2.04	1.55
16	4.03	2.97	1.93	1.48	5.19	3.70	2.07	1.58
17	4.09	2.99	1.98	1.49	5.25	3.72	2.11	1.58
18	4.16	3.04	2.00	1.52	5.33	3.80	2.12	1.59
19	4.22	3.08	2.01	1.53	5.42	3.83	2.12	1.59
20	4.28	3.17	2.03	1.56	5.51	3.92	2.15	1.68
21	4.17	3.04	1.93	1.49	5.57	3.96	2.22	1.71
22	4.09	2.97	1.79	1.37	5.67	4.03	2.24	1.75
23	4.04	2.89	1.71	1.33	5.77	4.07	2.28	1.78
24	4.01	2.84	1.63	1.27	5.87	4.15	2.30	1.86
25	3.91	2.78	1.56	1.23	5.91	4.20	2.34	1.86
26	4.01	2.78	1.52	1.23	6.12	4.36	2.50	2.01
27	4.04	2.83	1.49	1.22	6.33	4.53	2.63	2.12
28	4.13	2.89	1.49	1.22	6.64	4.75	2.73	2.23
29	4.23	2.97	1.52	1.23	6.96	4.97	2.83	2.30
30	4.41	3.04	1.56	1.27	7.37	5.22	2.93	2.41
31	4.60	3.20	1.59	1.29	7.80	5.52	3.04	2.51
32	4.83	3.31	1.63	1.33	8.28	5.84	3.18	2.63
33	5.09	3.50	1.74	1.47	8.83	6.22	3.33	2.77
34	5.35	3.69	1.79	1.49	9.44	6.60	3.48	2.93
35	5.69	3.91	1.93	1.63	10.08	7.07	3.70	3.14
36	6.06	4.17	2.09	1.76	10.77	7.51	3.97	3.38
37	6.40	4.46	2.19	1.90	11.52	8.06	4.27	3.65
38	6.83	4.73	2.38	2.03	12.31	8.65	4.63	3.97
39	7.30	5.09	2.57	2.22	13.18	9.26	5.04	4.35
40	7.81	5.46	2.84	2.51	14.06	9.97	5.55	4.80
41	8.35	5.84	3.12	2.74	15.04	10.70	6.11	5.33
42	8.96	6.31	3.43	3.01	16.04	11.50	6.71	5.89
43	9.58	6.77	3.82	3.37	17.11	12.34	7.46	6.57
44	10.29	7.32	4.23	3.75	18.25	13.27	8.28	7.32
45	11.03	7.96	4.73	4.22	19.47	14.27	9.21	8.19
46	11.89	8.63	5.30	4.73	20.73	15.35	10.20	9.09
47	12.79	9.35	5.94	5.34	22.09	16.47	11.31	10.15
48	13.79	10.14	6.65	6.04	23.55	17.69	12.52	11.29
49	14.86	11.07	7.50	6.77	25.07	18.98	13.80	12.48
50	16.08	12.04	8.43	7.66	26.68	20.40	15.22	13.80
51	17.39	13.18	9.54	8.69	28.43	21.90	16.74	15.25
52	18.80	14.38	10.70	9.80	30.30	23.53	18.37	16.81
53	20.42	15.75	12.08	11.08	32.33	25.25	20.08	18.40
54	22.15	17.27	13.63	12.51	34.47	27.06	21.90	20.14
55	24.08	18.93	15.34	14.11	36.78	29.06	23.84	21.92
56	26.19	20.76	17.27	15.94	39.30	31.13	25.85	23.85
57	28.53	22.81	19.38	17.95	42.01	33.38	27.91	25.85
58	31.10	25.06	21.77	20.21	44.94	35.78	30.06	27.90
59	34.00	27.60	24.42	21.52	48.15	38.36	32.33	28.48
60	37.18	30.38	27.37	23.45	51.67	41.13	34.58	29.63
61	36.69	30.13	27.41	22.29	49.59	39.33	32.75	26.64
62	34.92	28.72	26.31	21.15	46.00	36.26	29.71	23.84
63	23.11	19.60	17.08	13.77	34.10	28.53	23.70	19.05
64	14.86	11.71	9.32	7.62	21.89	17.28	13.77	11.27

Tailored Income Protection cover

Benefit Period to age 65 (Premium table 7)

Annual premiums for each \$1,000 insured benefit for White occupational category

Your age	Male				Female			
	Waiting Period							
	30 days	60 days	90 days	180 days	30 days	60 days	90 days	180 days
15	6.25	4.81	3.35	2.89	9.68	7.02	4.36	3.75
16	6.62	5.06	3.51	3.01	10.42	7.58	4.70	4.08
17	6.87	5.26	3.68	3.17	10.79	7.80	4.86	4.17
18	7.11	5.45	3.78	3.27	11.13	8.06	5.01	4.31
19	7.38	5.66	3.92	3.36	11.52	8.36	5.17	4.43
20	7.66	5.87	4.05	3.51	11.89	8.62	5.37	4.63
21	7.66	5.75	3.87	3.38	12.30	8.88	5.50	4.81
22	7.69	5.73	3.70	3.24	12.70	9.21	5.67	4.96
23	7.73	5.66	3.62	3.17	13.10	9.48	5.88	5.17
24	7.79	5.64	3.46	3.08	13.54	9.78	6.02	5.40
25	7.86	5.64	3.38	3.01	13.98	10.09	6.24	5.57
26	8.05	5.73	3.38	3.01	14.66	10.68	6.73	6.01
27	8.36	5.89	3.42	3.04	15.41	11.29	7.15	6.43
28	8.71	6.11	3.46	3.13	16.30	11.94	7.54	6.79
29	9.15	6.34	3.55	3.23	17.35	12.62	7.90	7.15
30	9.61	6.64	3.68	3.30	18.53	13.37	8.25	7.49
31	10.20	6.98	3.80	3.46	19.82	14.23	8.60	7.84
32	10.80	7.41	4.00	3.64	21.22	15.10	9.00	8.22
33	11.45	7.83	4.21	3.83	22.74	16.10	9.44	8.63
34	12.20	8.31	4.47	4.11	24.39	17.18	9.97	9.13
35	12.99	8.88	4.79	4.41	26.13	18.34	10.57	9.71
36	13.85	9.49	5.09	4.68	27.95	19.63	11.29	10.42
37	14.83	10.20	5.48	5.09	29.89	20.99	12.11	11.18
38	15.81	10.89	5.93	5.48	31.86	22.48	13.08	12.13
39	16.87	11.66	6.46	5.99	33.94	24.07	14.23	13.19
40	17.99	12.52	7.04	6.52	36.10	25.80	15.50	14.36
41	19.20	13.46	7.71	7.13	38.31	27.61	16.95	15.75
42	20.48	14.49	8.46	7.90	40.56	29.53	18.53	17.24
43	21.83	15.55	9.29	8.66	42.84	31.58	20.31	18.87
44	23.22	16.74	10.27	9.56	45.16	33.69	22.25	20.70
45	24.66	17.99	11.31	10.55	47.51	35.88	24.32	22.67
46	26.26	19.37	12.51	11.66	49.83	38.14	26.50	24.67
47	27.88	20.82	13.79	12.87	52.16	40.45	28.81	26.88
48	29.59	22.40	15.24	14.18	54.42	42.76	31.21	29.10
49	31.36	24.05	16.80	15.66	56.70	45.10	33.61	31.32
50	33.18	25.80	18.49	17.20	58.85	47.40	36.05	33.58
51	35.07	27.69	20.31	18.85	60.95	49.63	38.45	35.77
52	37.01	29.59	22.27	20.66	62.97	51.78	40.74	37.81
53	38.95	31.60	24.31	22.50	64.81	53.78	42.90	39.75
54	40.95	33.64	26.45	24.43	66.50	55.60	44.88	41.41
55	42.91	35.72	28.61	26.29	67.97	57.17	46.54	42.76
56	44.87	37.78	30.83	28.19	69.14	58.41	47.88	43.71
57	46.54	39.62	32.89	29.81	69.79	59.09	48.61	44.04
58	47.85	41.14	34.61	31.00	69.75	59.09	48.65	43.60
59	48.55	42.12	35.86	31.60	68.79	58.20	47.77	42.08
60	37.18	30.38	27.36	23.45	51.66	41.13	34.59	29.63
61	36.69	30.13	27.41	22.30	49.59	39.33	32.75	26.64
62	34.92	28.72	26.31	21.15	46.00	36.27	29.71	23.85
63	23.11	19.59	17.08	13.76	34.10	28.53	23.69	19.06
64	14.86	11.72	9.32	7.63	21.89	17.29	13.77	11.27

8. Facts about making a claim

As a profit-for-members fund, we're here to help support and guide you through the claims process so you don't feel confused or overwhelmed.

At Sunsuper, we understand that making a claim can sometimes be a stressful and difficult process, and that the circumstances of every claim are as different as the individuals making them.

To help you and your family through this difficult time, we have experienced Claims Representatives that can assist and guide you through the claims process from start to finish.

All of our Claims Representatives are trained to understand and explain our claims process. Once you make the initial contact with us to commence a claim, you will be assigned an individual Claims Representative to help you through the rest of the process and answer your questions.

We'll do everything in our power to ensure all eligible claims are paid as quickly as possible.

Easy online service

Sunsuper has an easy to use online **Claims Eligibility Tool**, that allows you to contact us at your earliest convenience 24 hours a day, 7 days a week.

The online **Claims Eligibility Tool**, allows you to notify Sunsuper of your need to claim, provides you with information regarding your type of cover and any claim requirements. If eligible to claim, the **Claims Eligibility Tool** allows you to lodge your claim electronically via **eClaims**.

eClaims allows you to lodge and monitor your claim online. It also provides relevant third parties (i.e. employers and doctors) with the capability to complete and submit claim information directly online for the insurer to assess.

Both the **Claims Eligibility Tool** and **eClaims** are designed to help simplify the claims process and reduce the time taken to finalise your claim. You can always contact us on **13 11 84**. We're here to help!

Sunsuper insurance claims guide

Want to know more about making a claim or how a claim is assessed?

We have developed guides to help step you through the various claims processes. Visit [sunsuper.com.au/insurance](https://www.sunsuper.com.au/insurance) for more information on making a claim.

Do you need a lawyer to assist with your claim?

Every insurance claim is different. Our claim process has been designed so that in most cases you or your family should not need the assistance of a lawyer when making a claim with Sunsuper. Our experienced Claims Representatives are here to assist you with your claim throughout the whole process.

As a super fund that is run only to profit members, our only motivation is to act in the best interests of our members to ensure that all legitimate insurance claims are paid.

However, if you wish to engage the services of a lawyer to assist with your claim you can do so at any time.

Remember, we are here to help, so call us on **13 11 84** if you have any questions about how to make a claim.

How to make a claim

While we do hope that you never need to, the following information may assist you in understanding the claim process in the event that you do need to make a claim. Any claim process will involve:

- notification to us,
- gathering information and providing it to us,
- assessment of the insurance claim by the insurer,
- assessment by the Sunsuper Trustee, including determination of the beneficiary(ies),
- decision by the Sunsuper Trustee,
- payment of the claim, if approved.

These steps do take some time, although our experienced Claims Representatives will help you at every stage of the process.

Further information may be requested at different stages of the process, and with disablement claims you may be required to undergo an examination by a **Medical Practitioner** or professional of the insurer's choice. The insurer will usually meet the costs associated with any additional information requests.

Death claims

It is important that in the event of your death, Sunsuper is notified by a relative or legal personal representative to enable the claims process to begin. Once we receive notification of your death, your *Super-savings account* will normally be transferred to the Cash investment option. Any insurance benefit paid into your *Super-savings account* will also be invested in the Cash investment option, and will remain invested there until the Trustee finalises payment of your Death benefit.

Disability claims

Sunsuper should be notified as soon as reasonably possible after an event that is likely to give rise to a disability or **Terminal Medical Condition** claim. Please note that depending on the nature of your illness or injury, there is a 3 month **Waiting Period** before a Tailored Total & Permanent Disability claim becomes assessable, and a **Waiting Period** applicable to you in the event of an Income Protection claim.

If you don't have insurance with us, you may still be able to claim your super balance under a **Permanent Incapacity** benefit. If you are suffering from a **Terminal Medical Condition** you may also be able to access your super balance. Please contact Sunsuper on **13 11 84** to discuss these options.

If your claim is declined

If your claim is declined by the Insurer your claim will be referred to the Sunsuper Trustee for review and consideration.

If the Sunsuper Trustee declines your claim and you disagree with this decision you may lodge a complaint at no additional cost to you. Contact us to discuss your complaint:

Customer Service hotline: **13 11 84**

Website: [sunsuper.com.au/contact-us](https://www.sunsuper.com.au/contact-us)

Sunsuper Customer Relations Team

GPO Box 2924

Brisbane Qld 4001

Your complaint will be investigated, and if the decision to decline your claim is confirmed by the Fund, you can contact the Australian Financial Complaints Authority (AFCA) if you are still not happy with the outcome.

This is an independent body set up by the Government to help resolve complaints through conciliation. They may be contacted as below:

Australian Financial Complaints Authority

GPO Box 3

Melbourne Vic 3001

Website: [afca.org.au](https://www.afca.org.au)

Email: info@afca.org.au

Telephone: 1800 931 678

Access to AFCA is free of charge.

AFCA will advise you if they can deal with your complaint, and if so, what information you need to supply.

If you lodge your complaint directly with AFCA before you have raised it with Sunsuper, AFCA will generally forward your complaint to Sunsuper to consider the matter within timeframes specified by AFCA.

For up-to-date information on the complaints resolution process refer to [sunsuper.com.au/complaints](https://www.sunsuper.com.au/complaints)

Incorrect information and eligibility for cover

If your recorded age or gender is incorrect, the insurer has the right to adjust the premium or the benefit based on the correct information. As a general rule, your eligibility for cover will not be assessed until you make a claim. Please refer to *3 Am I eligible for insurance cover?*

Claims after your cover has stopped

If an event occurs before the date your cover stops or is terminated, and that event entitles you to make an insurance claim, you may still be eligible for that payment even after your cover has stopped.

Claim investigation

If you make a claim, the insurer reserves the right to investigate the claim including but not limited to conducting surveillance and requesting information and medical examinations.

Occupational Rehabilitation in Sunsuper - "Work is Good Medicine"

At Sunsuper we work with our insurer to offer you access to one of the largest and most experienced rehabilitation teams in Australia, so if you have an injury, disability or health condition we can arrange work related rehabilitation through our insurer to assist you back to meaningful work.

Your rehabilitation consultant will work in partnership with you, your treating health professionals and employer to assist you back to suitable work as part of your recovery plan. If you are unemployed, your rehabilitation consultant can assist you to improve your fitness for work.

Returning to work restores more than your income. It helps to restore your identity and self-esteem.

Rehabilitation services may include:

- initial meetings with a rehabilitation provider to identify your return to work needs,
- work place visits to identify solutions in your return to work plan,
- equipment to ensure you maintain your job,
- career guidance to explore alternative work options if you can't work in your usual role, and
- improving your skills and capabilities so that your return to work is sustainable.

Rehabilitation is not appropriate for everyone.

Together we can assist you back to work and back to wellness and a fuller life!

Other important information

Need some financial advice?

When you make a claim, or receive an insurance benefit, not only is it likely to be a difficult time, but it can be hard to know what your next step is. You may need help with a tailored financial plan or help in moving into a new or different phase of your financial life after a major event and/or insurance payout. You don't need to panic and you don't need to be rushed into a course of action.

Speak to your adviser. If you don't have your own personal financial adviser and you need advice about your Sunsuper account, Sunsuper also has qualified financial advisers¹ who can help you over the phone with simple advice about your Sunsuper account. This service is included in your membership fee. If the advice you need is more complex or comprehensive in nature, we may refer you to an accredited external financial adviser². Advice of this nature may incur a fee.

¹ Sunsuper employees provide advice as representatives of Sunsuper Financial Services Pty Ltd (ABN 50 087 154 818 AFSL No. 227867) (SFS), wholly owned by the Sunsuper Superannuation Fund.

² Sunsuper has established a panel of accredited external financial advisers who are not employees of Sunsuper. Sunsuper is not responsible for the advice provided by these advisers and does not receive or pay any referral fees. These advisers will explain to you how their advice fees are determined.

Duty of Disclosure for insurance cover

Before a superannuation fund trustee like Sunsuper Pty Ltd enters into a life insurance contract in respect of your life, it has a duty to tell the insurer anything that it knows, or could reasonably be expected to know, that may affect the insurer's decision to provide the insurance and on what terms.

The trustee entering into the contract has this duty until the insurer agrees to provide insurance. The trustee has the same duty before it extends, varies or reinstates the contract. The trustee does not need to tell the insurer anything that reduces the risk of the insurance, or is common knowledge, or the insurer knows or should know as an insurer, or where the insurer waives the duty to tell them.

If you as a member of Sunsuper do not tell us or the insurer something

If you, as the person whose life is to be insured under the life insurance contract, do not tell us or the insurer something that you know, or could reasonably be expected to know, may affect the insurer's decision to provide insurance and on what terms, this may be treated as a failure by us to comply with our Duty of Disclosure. This could affect the insurance cover provided to you as described below.

If we do not tell the insurer something (because you didn't tell us or otherwise)

In exercising the following rights, the insurer may consider whether different types of cover can constitute separate contracts of life insurance. If the insurer does, it may apply the following rights separately to each type of cover.

If we do not tell the insurer anything we are required to, and the insurer would not have provided the insurance if it had been told, the insurer may avoid the contract within three years of entering into it.

If the insurer chooses not to avoid the contract, it may, at any time, reduce the amount of insurance provided. This would be worked out using a formula that takes into account the premium that would have been payable if we had told the insurer everything we were required to. However, if the contract has a surrender value, or provides cover on death, the insurer may only exercise this right within three years of entering into the contract.

If the insurer chooses not to avoid the contract or reduce the amount of insurance provided, it may, at any time, vary the contract in a way that places the insurer in the same position it would have been in if we had told the insurer everything we were required to. However, this right does not apply if the contract has a surrender value, or provides cover on death. If the failure to comply with the Duty of Disclosure is fraudulent, the insurer may refuse to pay a claim and treat the contract as if it never existed. For further information please contact us.

9. Definitions

Total & Permanent Disability Assist

This section applies to both the Standard and Tailored Total & Permanent Disability Assist products.

It is important that you understand the Total & Permanent Disability Assist definition and the factors that can impact the payment of a benefit. The following statements are here to assist your understanding of the Total & Permanent Disability Assist definition.

Ongoing medical care - you are required to be under the ongoing care of and following the advice recommended by your treating doctor.

Already receiving disability support payments - you are not automatically entitled to a total and permanent disability benefit where you are eligible to access your superannuation balance because of **Permanent Incapacity**, or you have received benefits from Centrelink (for example a Disability Support Pension), or workers' compensation. You must meet the applicable **Total & Permanent Disability Assist** definition.

How is your prior education, training or experience taken into account? - if applicable to you, your claim will be assessed based on your capacity to perform any reasonably suitable occupation based on all your education, training or experience and not just your own occupation. It will not be limited to the occupation or job you were doing immediately prior to your disablement.

The time period over which your education, training or experience is considered depends on which part of the **Total & Permanent Disability Assist** definition applies to you. The insurer will consider all your education, training or experience up to the time you lodge your claim and at each instance your claim is assessed for a **Total & Permanent Disability Assist** benefit.

Working on a part-time basis - your capacity for part-time work, regular casual work or lower paid work after you become injured or ill may disqualify you from a benefit entitlement even if you were working full time prior to your disablement.

Work availability - the availability or desirability of suitable work in your immediate area is not a relevant consideration - it is only your capacity to perform work that is the determining factor.

Occupational Rehabilitation - if the insurer identifies you for an Occupational Rehabilitation Program, you must participate.

How will your benefit be paid - if you are eligible for a Total & Permanent Disability Assist benefit, you may receive up to six support payments over a minimum five years or a single lump sum payment in some limited circumstances. This will be determined by which part of the definition applies to you, and your accepted date of disablement. Sunsuper's insurer will determine this based on your claim.

Total & Permanent Disability Assist means:

Part A - Loss of limbs and/or sight

- (a) As a result of an injury or sickness you have suffered, at the **Date of Disablement**, the total and irrecoverable loss of:
- the use of two limbs, or
 - the use of the sight of both eyes, or
 - the use of one limb and the sight of one eye (where a limb means the whole hand or the whole foot)
- (b) loss of **Cognitive Function** (this has a three consecutive month **Waiting Period**), and
- (c) the insurer, after considering all relevant evidence which is reasonably available, then determines that you will be unable ever again to be gainfully employed in any occupation for which you are reasonably suited by education, training or experience, **or**

Part B1 - Unable to do a suited occupation ever again - Date of Lodgement

Where, solely by reason of an injury or sickness:

- (a) you have been continuously unable to perform your occupational duties since the **Date of Disablement** and remain so at the **Date of Lodgement** solely due to the injury or sickness, and
- (b) you are under the care of, and following the advice and treatment of a **Medical Practitioner**, and
- (c) the insurer determines in its opinion that you, as at the **Date of Lodgement**, will be unable ever again to be gainfully employed in any occupation for which you are reasonably suited by education, training or experience.

The determination made by the insurer under paragraph (c) is to be made after considering all relevant evidence which is reasonably available to the insurer as at the **Date of Lodgement**, including any education, training or experience acquired by you up to the **Date of Lodgement**, **or**

Part B2 - Unable to do a suited occupation ever again - Date of New Assessment

Where, solely by reason of an injury or sickness:

- (a) you have been continuously unable to perform your occupational duties since the **Date of Disablement** and remain so at the **New Assessment Date** solely due to the injury or sickness, and
- (b) you are under the care of, and following the advice and treatment of a **Medical Practitioner**, and
- (c) either:
- (i) you have not been required by the insurer to participate in an **Occupational Rehabilitation Program**, or
 - (ii) have been required by the insurer to participate in an **Occupational Rehabilitation Program** and are fully participating in the **Occupational Rehabilitation Program** to the satisfaction of the insurer*, and
- (d) the insurer determines in its opinion that you, as at the **New Assessment Date**, will be unable ever again to be gainfully employed in any occupation for which you are reasonably suited by education, training or experience.

The determination by the insurer under paragraph (d) is to be made after considering all relevant evidence which is reasonably available to the insurer, as at the **New Assessment Date**, or subsequently given to the insurer and relevant to the assessment of you as at the relevant **New Assessment Date**, including any **Occupational Rehabilitation Program** and any education, training or experience acquired by you up to the relevant **New Assessment Date**, **or**

* Where you cease participating in a required **Occupational Rehabilitation Program** on the advice of your treating **Medical Practitioner**, the insurer will consider whether they should vary the **Occupational Rehabilitation Program** or withdraw its requirement that you participate in the **Occupational Rehabilitation Program** and in doing so will consider any independent evidence in its consideration as well as any written documentation from your treating **Medical Practitioner** addressing the following:

- 1 outlining the reasons you have been advised to cease participating in the **Occupational Rehabilitation Program**, and
- 2 stipulating the duration of any required period of cessation and the anticipated timeframe for return to the **Occupational Rehabilitation Program**, and
- 3 whether any variations can be made to the **Occupational Rehabilitation Program** that would enable you to participate, and
- 4 all medical information relied upon by the treating **Medical Practitioner** in forming their opinion.

Part C - Suffering a specifically defined medical condition and permanently unable to work because of that medical condition

Where you were **Employed** immediately prior to the **Date of Disablement** and are absent from all work and have been certified by a **Medical Practitioner** as being unable to perform your occupational duties since the **Date of Disablement**:

- (a) solely as a result of suffering one or more of the following: Primary Pulmonary Hypertension, Major Head Trauma, Motor Neurone Disease, Multiple Sclerosis, Muscular Dystrophy, Dementia and Alzheimer's Disease, Parkinson's Disease, Chronic Lung Disease, Cardiomyopathy, or Paraplegia (including Quadriplegia, Hemiplegia and Tetraplegia), and
- (b) the insurer, after considering all relevant evidence which is reasonably available, then determines that you are unable to ever again to be gainfully employed in any occupation for which you are reasonably suited by education, training or experience.

Note: A different Total & Permanent Disability definition may apply to some members and if this applies to you, you will be informed separately.

Total & Permanent Disability

It is important that you understand the **Total & Permanent Disability** definition and the factors that can impact the payment of benefit. The following statements are here to assist your understanding of the **Total & Permanent Disability** definition.

Ongoing medical care - you are required to be under the ongoing care of and following the advice recommended by your treating doctor.

Already receiving disability support payments - you are not automatically entitled to a total and permanent disability benefit where you are eligible to access your superannuation balance because of **Permanent Incapacity**, or you have received benefits from Centrelink (for example a Disability Support Pension), or workers' compensation. You must meet the applicable **Total & Permanent Disability** definition.

How is your prior education, training and experience taken into account? - your **Tailored Total & Permanent Disability** definition is based on your capacity to perform any suitable occupation based on all your education, training or experience and not just your own occupation. It will not be limited to the occupation or job you were doing immediately prior to your disablement.

The time period over which your education, training or experience is considered depends on which part of the **Tailored Total & Permanent Disability** definition applies to you. The insurer will consider all your education, training or experience up to the end of any **Waiting Period** (as set out in the definition).

Working on a part-time basis - your capacity for part-time work, regular casual work or lower paid work after you become injured or ill may disqualify you from a benefit entitlement even if you were working full time prior to your disablement.

Work availability - the availability or desirability of suitable work in your immediate area is not a relevant consideration - it is only your capacity to perform work that is the determining factor.

How will your benefit be paid - if you are eligible for a Tailored Total & Permanent Disability benefit, this will be paid to you as a single lump sum payment.

Total & Permanent Disability means:

Part A - Loss of limbs and/or sight

- (a) As a result of an injury or sickness you have suffered, at the **Date of Disablement**, the total and irrecoverable loss of:
 - the use of two limbs, or
 - the use of the sight of both eyes, or
 - the use of one limb and the sight of one eye (where a limb means the whole hand or the whole foot)
- (b) loss of **Cognitive Function** (this has a three consecutive month **Waiting Period**), and
- (c) the insurer, after considering all relevant evidence which is reasonably available, then determines that you will be unable ever again to be gainfully employed in any occupation for which you are reasonably suited by education, training or experience, **or**

Part B - Unable to do a suited occupation ever again

Where, solely by reason of an injury or sickness:

- (a) you are unable to perform your occupational duties for a period of three consecutive months since the **Date of Disablement** solely due to the injury or sickness, and
- (b) you are under the care of, and following the advice and treatment of a **Medical Practitioner**, and
- (c) the insurer, after considering all relevant evidence which is reasonably available, then determines you will be unable ever again to be gainfully employed in any occupation for which you are reasonably suited by education, training or experience; **or**

Part C - Suffering a specifically defined medical condition and permanently unable to work because of that medical condition

Where you were **Employed** immediately prior to the **Date of Disablement** and are absent from all work and have been certified by a **Medical Practitioner** as being unable to perform your occupational duties since the **Date of Disablement**:

- (a) solely as a result of suffering one or more of the following; Primary Pulmonary Hypertension, Major Head Trauma, Motor Neurone Disease, Multiple Sclerosis, Muscular Dystrophy, Dementia and Alzheimer's Disease, Parkinson's Disease, Chronic Lung Disease, Cardiomyopathy, or Paraplegia (including Quadriplegia, Hemiplegia and Tetraplegia), and
- (b) the insurer, after considering all relevant evidence which is reasonably available, then determines that you are unable to ever again to be gainfully employed in any occupation for which you are reasonably suited by education, training or experience.

Note: A different Total & Permanent Disability definition may apply to some members and if this applies to you, you will be informed separately.

Income Protection

It is important that you understand the Income Protection definitions and the factors that can impact the payment of an Income Protection benefit. The following statements are here to assist your understanding of the Income Protection definition.

Ongoing medical care - to remain eligible for Income Protection benefits, you are required to be under the care of and following the advice recommended by your treating doctor.

Working more than 15 hours per week - a **Total Disability** assessment will be based on your inability to perform at least one of the major duties of your usual occupation. A major duty is an income-producing duty of your regular occupation, which involves at least 20% of your overall occupational tasks. Where you return to paid work (even in a different job or occupation), you will no longer be eligible for a total disability benefit, however you may be eligible to claim a partial disability benefit, subject to meeting eligibility criteria.

Unemployed or working less than 15 hours per week - a **Limited Total Disability** assessment will be based on your inability to perform any suitable occupation based on all of your education, training and experience, not just your occupation (or prior occupation where you are unemployed), at the time you become injured or ill.

You may be eligible for a partial disability benefit - where you have been totally disabled and return to work in a reduced capacity and have a reduced income as a result of your illness or injury. You must be totally disabled for seven (7) out of the first ten (10) days of your waiting period to be eligible for a partial disability benefit.

Occupational rehabilitation support - where appropriate, the insurer will work with you, your doctor, your employer and the insurer to encourage and support you through occupational rehabilitation (including workplace modifications). Participating in occupation rehabilitation is voluntary and will not impact your monthly benefit.

Already receiving disability support payments - your total or partial disability benefit may be reduced if you also receive payments from other sources (for example workers' compensation, sick leave or from other Income Protection policies).

Ongoing assessment - Income Protection claims are assessed on a monthly basis over the duration of your benefit period. You will need to periodically provide ongoing evidence to support your claim.

Maximum period you could be paid - the **Benefit Period** is the maximum length of time that you will receive a monthly benefit whilst you continue to remain **Totally** or **Partially Disabled**. Your payments will stop when your **Benefit Period** ends, even if your disability continues.

Totally and permanently disabled - your monthly benefit will not be impacted if you are paid a total and permanent disability benefit from Sunsuper or any other superannuation fund.

Total Disability or Totally Disabled

Total Disability means that, as a direct result of injury or sickness, you are:

- (a) continuously and completely unable to perform at least one of the major duties of your usual occupation based on the work performed at the time of injury or sickness, and
- (b) under the regular care of and complying with the reasonable advice given by a registered **Medical Practitioner** in respect of that injury or sickness, and
- (c) not in any occupation for which a person would normally expect to receive remuneration or profit.

A major duty is an income-producing duty of your regular occupation, which involves at least 20% of your overall occupational tasks.

For those on **Unpaid Leave**, the above definition applies for up to 24 months while you are on **Unpaid Leave** if you were a permanent employee working an average of 15 hours or more per week in the three months immediately prior to going on **Unpaid Leave**.

Partial Disability or Partially Disabled

Partial Disability means that, following a period of **Total Disability** (for seven (7) out of the first ten (10) working days of the **Waiting Period**) and while you continue to be either **Totally Disabled** or **Partially Disabled** during the **Waiting Period** you:

- (a) have returned to work in your usual or an alternative occupation, and
- (b) are under the care of and complying with the reasonable advice given by a registered **Medical Practitioner**, and
- (c) as a result of the disability, you have suffered and continue to suffer loss of **Income** as a direct result of the injury or sickness.

The income benefit paid during **Partial Disability** will be calculated in line with the proportionate loss of income from the end of the **Waiting Period**.

Limited Total Disability

Limited Total Disability means as a result of sickness or injury, you:

- (a) have been incapacitated to such an extent as to render yourself unable to engage in your usual occupation or any occupation for which you are reasonably suited by education, training and experience, and
- (b) remain under the regular care, attendance and following the advice of a registered **Medical Practitioner** in relation to that sickness or injury, and
- (c) are not engaged in any occupation (whether paid or unpaid).

The above definition applies for up to 24 months while you are on **Unpaid Leave** if you were working on average less than 15 hours per week in the three months or were a casual employee, immediately prior to going on **Unpaid Leave**.

The following terms are used throughout this *guide*:

Term	Definitions	
Accident	Accident is defined as a physical injury that is caused solely and directly by violent, visible, external and unexpected means that is not traceable, even indirectly, to any pre-existing mental or physical condition.	
Approved Leave	Approved Leave means parental leave, annual leave, bereavement leave, long service leave or any other leave approved by your employer for reasons other than related to injury or illness.	
At Work	<p>At Work means you are:</p> <ul style="list-style-type: none"> (a) actively performing or capable of performing all of your normal duties, without limitation or restriction due to injury or sickness, and where working you are working normal hours, and (b) in the insurer’s opinion, not restricted by injury or sickness from being capable of actively performing your full and normal duties on a full-time basis (for at least 30 hours per week) even though actual employment may be on a full-time, part-time, casual or contract basis, and (c) not in receipt of, or entitled to claim, any income support benefits from any source including workers’ compensation benefits, statutory transport accident benefits and disability income benefits (including government support benefits). <p>You will be considered to be At Work on the applicable date, as the context requires, if you are on Approved Leave for reasons other than injury or sickness, and not taking into account the leave, are able to meet the At Work definition.</p> <p>In addition for death and total and permanent disability cover only, At Work also means if you are not gainfully employed but are engaged in full-time Domestic Duties you will meet the At Work requirement if you are able to actively perform your normal full-time Domestic Duties without limitation or restriction due to injury or sickness.</p>	
Benefit Period	Benefit Period means the maximum period of time for which benefits will be paid for any one period of Total Disability or Partial Disability .	
Cognitive Function	Cognitive Function means intellectual capacity, loss of which requires you to be under the continuous care and supervision of another adult person for at least three consecutive months and, at the end of that 3-month period, you are likely to require permanent ongoing continuous care and supervision by another adult person.	
Date of Disability (Income Protection)	<p>The Date of Disability means where you are:</p> <ul style="list-style-type: none"> (a) working and then cease work as a result of an illness or injury, the last day you worked provided this was as a result of an illness or injury and which has been certified by a registered Medical Practitioner, or (b) on Approved Leave or unemployed and suffer an illness or injury which prevents you from returning to work as a result of that illness or injury, the Date of Disablement will be determined based on the certification provided by the registered Medical Practitioner as at the date on which you became disabled. 	
Date of Disablement (Total & Permanent Disability Assist)	The Date of Disablement depends on your employment status and the type of injury or sickness that caused your permanent disablement:	
	Claiming under Total & Permanent Disability Assist component	Date of Disablement
	Part A - Loss of limbs and/or sight	<p>The date you suffer the loss of the use of two limbs (where limb is defined as the whole hand or the whole foot), the sight in both eyes, or the sight in one eye and the use of one limb, or</p> <p>The date that is three months after loss of intellectual capacity.</p>
Part B - Unable to do a suited occupation ever again - Date of Lodgement	The first day you permanently ceased all work solely as a result of the injury or sickness, or where you have been unemployed or on domestic duties, the date you are medically certified by a Medical Practitioner that the injury or sickness is preventing you from being able to work, even though work may not be available at that time.	

Term

Definitions

	Claiming under Total & Permanent Disability Assist component Part C - Suffering a specifically defined medical condition and permanently unable to work because of that medical condition	Date of Disablement The first day you ceased all work solely as a result of suffering one or more of the listed Medical Conditions outlined in Part C of the Total & Permanent Disability Assist definition, or where you have been unemployed less than six months the first day on which you are medically certified by a Medical Practitioner as suffering one or more of the listed Medical Conditions outlined in Part C of the Total & Permanent Disability Assist definition.
Date of Disablement - (Total & Permanent Disability)	The Date of Disablement depends on your employment status and the type of injury or sickness that caused your permanent disablement:	
	Claiming under Total & Permanent Disability component Part A - Loss of limbs and/or sight Part B - Unable to do a suited occupation ever again Part C - Suffering a specifically defined medical condition and permanently unable to work because of that medical condition	Date of Disablement The date you suffer the loss of the use of two limbs (where limb is defined as the whole hand or the whole foot), the sight in both eyes, or the sight in one eye and the use of one limb, or The date that is three months after loss of intellectual capacity. The first day of the three month qualification period being the day you permanently ceased all work solely as a result of the injury or sickness, or where you have been unemployed, or on domestic duties, the first day of the three month qualification period, being the date you are medically certified by a Medical Practitioner that the injury or sickness is preventing you from being able to work, even though work may not be available at that time. The first day you ceased all work solely as a result of suffering one or more of the listed Medical Conditions outlined in Part C of the Total & Permanent Disability Assist definition, or where you have been unemployed less than six months the first day on which you are medically certified by a Medical Practitioner as suffering one or more of the listed Medical Conditions outlined in Part C of the Total & Permanent Disability Assist definition.
Date of Lodgement	Date of Lodgement means the date you lodge a claim for a Total & Permanent Disability Assist benefit with Sunsuper under the Total & Permanent Disability Assist Part B1 definition and provide all mandatory documentation required by the insurer in relation to the claim to commence assessment.	
Domestic Duties	Domestic Duties means you have chosen to remain at home and perform unpaid home duties as your primary occupation. The choice to remain at home should not be due to unemployment or as a result of a sickness or injury.	
Eligible Contribution	Eligible Contributions include Superannuation Guarantee, additional Employer contributions, personal contributions (including voluntary contributions, and contributions made by a spouse), rollovers and automatic transfers from other funds. They do not include co-contributions or the low income super tax offset.	
Employed	Employed means: <ul style="list-style-type: none"> (i) you are engaged under a contract of employment with an Australian employer (which includes on secondment or transfer to an international subsidiary or an associated or affiliated company of an Australian employer), or (ii) you are self-employed and earning an income under an ABN registered entity, or (iii) you have been unemployed for less than six months, or (iv) you have been on Unpaid Leave for less than twenty-four months with an Australian employer, or (v) you are working for an overseas employer for at least 15 hours per week, or (vi) you are engaged in unpaid Domestic Duties in your own home. 	
Fixed Cover	Fixed Cover basis means your amount of insurance cover stays the same, but your weekly premium will generally increase as you get older.	

Term	Definitions
Fixed Premium	<p>Fixed Premium basis means your weekly premium stays the same, but your insurance cover will generally decrease as you get older.</p>
Income (Income Protection)	<p>Income means your pre-tax income derived from your occupation, less any expenses incurred in deriving that income. Unless otherwise agreed with the insurer, Income does not include director's fees, overtime payments, commissions, bonuses, penalty or shift allowances, mandated superannuation contributions, investment income, income received from deferred compensation plans, disability income policies, retirement plans or any income derived from non-vocational activities.</p> <p>For Self-Employed Persons, Income means the income generated by the business or practice due to your personal exertion or activities, less your share of necessarily incurred business expenses and investment income.</p> <p>Proof of Income is also required at the time of a benefit claim.</p>
Limited Cover	<p>Limited Cover means you are only covered for claims arising from an illness which first Manifests itself or an injury which occurred on or after the date your cover commenced, most recently commenced or increased (where applicable) under the policy and was not related to the condition that occurred before the date your cover commenced, most recently commenced or increased (where applicable) under the policy.</p> <p>"Manifests" means that symptoms exist which would cause an ordinary prudent person to seek diagnosis, care or treatment, or that medical advice or treatment has been recommended by or received from a Medical Practitioner.</p>
Limited Total Disability (Income Protection)	<p>Limited Total Disability means as a result of sickness or injury, you:</p> <ul style="list-style-type: none"> (a) have been incapacitated to such an extent as to render yourself unable to engage in your usual occupation or any occupation for which you are reasonably suited by education, training and experience, and (b) remain under the regular care, attendance and following the advice of a registered Medical Practitioner in relation to that sickness or injury, and (c) are not engaged in any occupation (whether paid or unpaid). <p>The above definition applies for up to 24 months while you are on Unpaid Leave if you were a casual employee or working on average less than 15 hours per week in the three months immediately prior to going on Unpaid Leave.</p>

Term	Definitions
Medical Conditions	<p>The following are the definitions for the specified Medical Conditions as per the Total & Permanent Disability Assist and Total & Permanent Disability definitions:</p> <p>Primary Pulmonary Hypertension means:</p> <p>Primary pulmonary hypertension established by cardiac catheterisation, resulting in significant permanent physical impairment which is classified as Class III or greater under the New York Heart Association classification of cardiac impairment.</p> <p>The New York Heart Association classifications are:</p> <ul style="list-style-type: none"> (i) Class I - no limitation of physical activity, no symptoms with ordinary physical activity. (ii) Class II - slight limitation of physical activity, symptoms occur with ordinary physical activity. (iii) Class III - marked limitation of physical activity and comfortable at rest, symptoms occur with less than ordinary physical activity. (iv) Class IV - symptoms with any physical activity and may occur at rest, symptoms increased in severity with any physical activity. <p>Major Head Trauma means:</p> <p>An accidental head injury resulting in permanent neurological deficit, resulting in you either:</p> <ul style="list-style-type: none"> • being totally and permanently unable to perform any one of the activities of daily living where these activities include bathing, dressing, feeding, toileting and mobility; or • suffering at least a 25% impairment of whole person function as defined in Guides to the Evaluation of Permanent Impairment 5th edition, American Medical Association. <p>Diagnosis must be confirmed by a consultant neurologist.</p> <p>Motor Neurone Disease means:</p> <p>The unequivocal diagnosis of motor neurone disease confirmed by a consultant neurologist.</p> <p>Multiple Sclerosis means:</p> <p>The unequivocal diagnosis of multiple sclerosis confirmed by a consultant neurologist.</p> <p>Muscular Dystrophy means:</p> <p>The unequivocal diagnosis of muscular dystrophy confirmed by a consulting neurologist.</p> <p>Dementia / Alzheimer's Disease means:</p> <p>The definite (clinical) diagnosis of dementia as confirmed by a consultant neurologist, psychiatrist or geriatrician resulting in significant cognitive impairment. Significant cognitive impairment means deterioration in your mini-mental state examination, or equivalent thereof, scores to 20 or less.</p> <p>Dementia as a result of alcohol or drug abuse is excluded.</p> <p>Parkinson's Disease means:</p> <p>The unequivocal diagnosis of idiopathic Parkinson's disease as confirmed by a consultant neurologist. All other types of Parkinsonism are excluded (e.g. secondary to medication).</p> <p>Chronic Lung Disease means:</p> <p>End stage respiratory failure requiring continuous and permanent oxygen therapy and is confirmed by a medical specialist, excluding Intermittent Oxygen Therapy.</p> <p>Cardiomyopathy means:</p> <p>A condition of impaired ventricular function of variable aetiology (often not determined), resulting in significant permanent physical impairment i.e. Class III on the New York Association classification of cardiac impairment.</p> <p>The New York Heart Association classifications are:</p> <ul style="list-style-type: none"> (i) Class I - no limitation of physical activity, no symptoms with ordinary physical activity. (ii) Class II - slight limitation of physical activity, symptoms occur with ordinary physical activity. (iii) Class III - marked limitation of physical activity and comfortable at rest, symptoms occur with less than ordinary physical activity. (iv) Class IV - symptoms with any physical activity and may occur at rest, symptoms increased in severity with any physical activity. <p>Paraplegia (including Quadriplegia, Hemiplegia and Tetraplegia) means:</p> <p>Paraplegia means the total and permanent loss of function of the lower limbs due to spinal cord injury or disease, or brain injury or disease.</p> <p>Quadriplegia/ Tetraplegia means the total and permanent loss of function of the lower and upper limbs due to spinal cord injury or disease, or brain injury or disease.</p>

Term	Definitions
	<p>Hemiplegia means the total and permanent loss of one side of the body due to spinal cord injury or disease, or brain injury or disease.</p>
<p>Medical Practitioner</p>	<p>Medical Practitioner means a legally qualified and registered practitioner of medicine. It does not include your employer, you, an employee of your employer or a member of you or your employer's immediate family or business partner(s).</p> <p>The insurer may, in their absolute discretion, accept a similarly qualified person who is registered and practising as a Medical Practitioner in another country with a similar standard of medical care as that in Australia, and who has a formal qualification that is generally equivalent to that required to practise in Australia. The insurer may, in their absolute discretion, seek an independent opinion from a qualified registered Medical Practitioner in Australia to review such overseas medical evidence.</p> <p>Where medical evidence is provided in a language other than English, you will bear the cost of any translation of medical evidence.</p>
<p>New Assessment Date</p>	<p>New Assessment Date means the date a claim is lodged for a Total & Permanent Disability Assist benefit with Sunsuper under the Total & Permanent Disability Assist "Unable to do suited occupation ever again - New Assessment Date" component of Part B2 - Unable to do a suited occupation ever again definition and provides all mandatory documentation required by the insurer in relation to the claim to commence assessment, and cannot be less than 12 months after the later of:</p> <ul style="list-style-type: none"> (a) the date your claim is accepted following the Date of Lodgement, and (b) the previous New Assessment Date at which you met the Total & Permanent Disability Assist Part B2 definition.

Term	Definitions
Occupational Categories	<p>The following Occupational Categories apply within Tailored cover. Professional and White will also apply to White Collar cover.</p> <p>Professional</p> <p>White Collar professionals performing no manual duties (e.g. doctor, lawyer, accountant). Usually those with a tertiary qualification or registered with a professional body (and they must be using these qualifications in their occupation).</p> <p>White</p> <p>Clerical, administration and managerial occupations involving office duties only. Includes those who do less than 10% light manual duties (e.g. administrator, bookkeeper, computer operator).</p> <p>Light Blue</p> <p>Certain light manual skilled workers (e.g. photocopy/TV repairers), purchasing officers, travelling sales representatives, claims/loss assessors, business owners in non-hazardous industries involved in light manual work (e.g. coffee shop owner) and supervisors of workers in Medium Blue occupations.</p> <p>Medium Blue</p> <p>Qualified tradespeople involved in non-hazardous industries doing light manual work (e.g. qualified tradespeople such as cabinetmaker, carpenter, plumber, mechanic).</p> <p>Heavy Blue</p> <p>Heavy manual workers, unskilled or performing higher risk occupations, tradespeople involved in heavier manual work (e.g. brick layer (qualified), interstate bus driver, warehouse worker, carpet layer, house removalist).</p> <p>Hazardous</p> <p>There are other occupations classified as hazardous including airline crew and pilots, fire fighters, professional sports people, police, underground workers, miners, abalone divers, asbestos workers, bouncers and those working at heights above 10 metres. For hazardous occupations, the insurer reserves the right to assess applications for cover on a different premium basis to the five categories listed above.</p>
Occupational Rehabilitation Program	<p>Occupational Rehabilitation Program means any program which, at the Date of Lodgement and each New Assessment Date or any other date the insurer deems appropriate, the insurer in its sole discretion determines will assist you to improve your ability to work in your own occupation or another occupation for which you are, or may be at the conclusion of rehabilitation or retraining, reasonably suited by education, training or experience through the skills acquired during any Occupational Rehabilitation Program.</p> <p>In determining these rehabilitation services, the insurer may take into account the following criteria and any other criteria the insurer considers appropriate:</p> <ul style="list-style-type: none"> (i) your current or potential vocational abilities, and (ii) available medical evidence, and (iii) the nature, scope, objective and costs of any rehabilitation or re-training program. <p>The insurer may require at its own cost an independent examination(s) to assist in designing and implementing an Occupational Rehabilitation Program that is appropriate for you to participate in. You will not be required to pay for any Occupational Rehabilitation Program. Any Occupational Rehabilitation Program must be designed in accordance with any criteria agreed between the insurer and Sunsuper and amended or replaced from time to time.</p> <p>Any Occupational Rehabilitation Program will not include any program providing 'hospital treatment' or 'general treatment' within the meaning of the <i>Private Health Insurance Act 2007 (Cth)</i> or any other program which might cause the policy to cease to be exempt from the relevant health insurance legislation.</p>

Term	Definitions
Partial Disability or Partially Disabled (Income Protection)	<p>Partial Disability means that, following a period of Total Disability (for seven (7) out of the first ten (10) working days of the Waiting Period) and while you continue to be either Totally Disabled or Partially Disabled during the Waiting Period you:</p> <ul style="list-style-type: none"> (a) have returned to work in your usual or an alternative occupation, and (b) are under the care of and complying with the reasonable advice given by a registered Medical Practitioner, and (c) as a result of the disability, you have suffered and continue to suffer loss of income as a direct result of the injury or sickness.
Permanent Incapacity	<p>Permanent Incapacity is a condition of release of superannuation benefits defined in the <i>Superannuation Industry (Supervision) Regulations 1994</i> (Cth). A member of a superannuation fund is taken to be suffering Permanent Incapacity if the Trustee of the fund is reasonably satisfied that the member's ill-health (whether physical or mental) makes it unlikely that the member will engage in gainful employment for which the member is reasonably qualified by education, training or experience.</p>
Pre-Disability Income (Income Protection)	<p>Pre-Disability Income means the higher of the gross monthly income you earned at the Date of Disablement or an average of the gross monthly income earned by you over the three months immediately prior to the Date of Disablement.</p> <p>If you are a casual or contract employee, or unemployed, the Pre-Disability Income means the average of the gross monthly income earned over the 12 months (or if employed less than 12 months, over your period of employment) immediately prior to the Date of Disablement.</p> <p>If you are Self-Employed, Pre-Disability Income means the greater of the average of the gross monthly income earned over the 12 months and the latest financial year immediately prior to the Date of Disablement.</p>
Self-Employed Person	<p>A Self-Employed Person means a person who operates a business or profession as a sole proprietor, partner in a partnership, independent contractor or consultant and reports income earned from self-employment.</p>
Terminal Illness	<p>Terminal Illness means you are suffering from an illness, or have incurred an injury, that is likely to result in your death within a period of 24 months from the date of certification of the Terminal Illness by two registered Medical Practitioners (one being a specialist physician in the particular medical field), both acceptable to the insurer and the certification periods have not ended. The benefit the insurance policy pays out is termed as a Terminal Illness benefit.</p>
Terminal Medical Condition	<p>Terminal Medical Condition is a condition of release of superannuation benefits defined in the <i>Superannuation Industry (Supervision) Regulations 1994</i> (Cth). For more information refer to the <i>Sunsuper for life guide</i>.</p>
Unpaid Leave	<p>Unpaid Leave means leave (not being cessation of employment) without pay from your employer. This leave must be:</p> <ul style="list-style-type: none"> (a) approved by your employer or authorised by: <ul style="list-style-type: none"> • the Commonwealth, a State or a Territory, or • a certified agreement or award made by a tribunal or body having the authority to do so under the law of the Commonwealth, a State or a Territory. (b) in relation to which you have a statutory or contractual right to resume employment at the end of the leave, and (c) in relation to which you are not being paid by the employer. <p>Unpaid Leave excludes leave:</p> <ul style="list-style-type: none"> (a) that is due to your injury or illness, or (b) during which you receive or are entitled to receive: <ul style="list-style-type: none"> • income benefits, or • disability income benefits, or • social security illness benefits, or (c) due to strike or lockout.
Waiting Period	<p>The Waiting Period is the number of continuous days which you must remain off work due to an injury or illness before the Total Disability benefit, Limited Total Disability benefit or Partial Disability benefit begins to accrue. The Waiting Period commences from the date you are Totally Disabled and unable to work, as certified by a registered Medical Practitioner.</p>

