

Sunsuper for life Corporate

Insurance guide

APN Superannuation Plan
(Management)

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Insurance in your super

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Your employer APN has chosen Sunsuper to provide a specialised super plan for you.

APN is not responsible for the preparation of this document. They are not providing advice or a recommendation in relation to this investment.

How to use this Insurance guide

This *Insurance guide* will provide you with important information to help you better understand your super. Make sure you read this *Insurance guide* so you can make informed decisions and get the most from your super – from your very first day of work, throughout your working life and during your retirement.

The insurer

Insurance cover is provided through group life policies issued by AIA Australia Limited ABN 79 004 837 861 AFSL 230 043 (AIA) 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 disability claim application or an application for Additional cover, a Sunsuper member may be contacted directly by a representative of the insurer on behalf of the Fund to discuss or gather information relating to their application.

Key Facts Sheet

The Insurance in super factsheet summarises the key features about the insurance cover provided in your plan. It is provided in a consistent format, thus allowing you to easily compare features across all superannuation providers. The factsheet is available at sunsuper.com.au/apnsuper99

Important information

This is the *Sunsuper for life Corporate Insurance guide*. The *Sunsuper for life Corporate Insurance guide* contains information about the insurance in your *Sunsuper for life Corporate Plan*, including insurance terms and conditions.

The information in this *Insurance guide* forms part of the *Sunsuper for life Corporate Product Disclosure Statement (PDS)* issued on 29 March 2020. The *PDS* references important information contained in this *Insurance guide* by "1". This *Insurance guide* may reference important information contained in the *Sunsuper for life guide* and *Sunsuper for life Investment guide*. The *PDS*, this *Insurance guide*, the *Sunsuper for life guide* and the *Sunsuper for life Investment guide* should be read in their entirety before making a decision to acquire or continue to hold an interest in Sunsuper.

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.

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.

Financial Services Guide (FSG)

Contains information about the financial services Sunsuper Pty Ltd provides and will help you decide whether to use these services. Visit sunsuper.com.au/fsg or contact us for a copy.

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.

Defined Terms

There are a number of terms in this *Insurance guide* that are defined and have a particular meaning when used in this *Insurance guide*. Refer to the end of this *Insurance guide*. It is important to read their meanings carefully because they can affect your eligibility for cover and when a claim will be paid.

Terms and Conditions

There are terms and conditions attached to the insurance cover, and some situations in which the benefits will not be paid. In the event of a dispute the Insurance Policy/ies will override the information in the *PDS* and this *Insurance guide*.

Insurance in your super

The benefits, features and options for insurance cover are summarised in the table below. More information on each item can be found in this *Insurance guide*.

Features	Description
Death cover	Provides a lump sum benefit on the death of a member. Members can have Death only cover.
Total & Permanent Disablement cover	Provides a lump sum benefit where a member becomes totally and permanently disabled and meets the conditions of the relevant part of the Total & Permanent Disability definition. Total & Permanent Disability only cover is also available.
Standard Death and Total & Permanent Disability	Standard Death and Total & Permanent Disability cover is automatically provided to eligible members. The following Standard insurance cover is available: 15% x Salary x Years of Future Membership (to age 67)
Terminal Illness cover	This forms part of the Death cover and provides a lump sum benefit where a member is diagnosed as having a Terminal Illness .
Income Protection cover	Standard Income Protection cover is automatically provided to eligible permanent employees. Income Protection cover provides a replacement income where a member becomes Totally or Partially Disabled and cannot work as a result. The benefit payments are based on: <ul style="list-style-type: none"> • A monthly income of up to 75% of your Pre-Disability Salary (less offsets) • For a Benefit Period up to 2 years, after a 90-day Waiting Period.
Eligible age for automatic Standard cover	Death - age 25 to 66 Total & Permanent Disability - age 25 to 66 Income Protection cover - age 25 to 64
Age when Standard cover ceases	Death - age 67 Total & Permanent Disability - age 67 Income Protection cover - age 65
Opt-in for insurance cover	Standard cover does not start automatically until you attain age 25 and your <i>Super-savings account</i> balance reaches \$6,000. If you need cover before attaining age 25 and reaching an account balance of \$6,000 and you're aged 15 or older you can opt-in at anytime (subject to meeting the other eligibility conditions). Refer to the <i>Opt-in for insurance cover</i> section for more details.
Automatic Acceptance Limits (AAL)	An AAL is the maximum amount of Standard cover provided to eligible employees without any medical evidence being required. Death - \$1,000,000 Total & Permanent Disability - \$1,000,000 Income Protection - \$156,000 per annum
Additional cover	You can apply for Death and Total & Permanent Disability cover to suit your individual circumstances and needs. Limits may apply.
Transfer of insurance cover	We may agree to take over the cover provided by a previous insurance policy or superannuation fund and provide equivalent benefits on Sunsuper's terms and conditions. You can apply to transfer Death and Total & Permanent Disability, Death only or Total & Permanent Disability only cover up to \$2,000,000 and up to \$240,000 per annum of Income Protection cover.
Worldwide cover	Cover is provided 24/7 anywhere in the world.
Automatic continuation of cover	Your Death and Total & Permanent Disability cover continues once you leave your employer, though you retain the same level of cover the premium charged may change. Within 120 days of leaving your Employer you can apply to have your Income Protection cover reinstated without underwriting in your <i>Sunsuper for life account</i> , however your employment status will need to be confirmed and your premium may alter.
Financial advice¹	We can assist members to determine the amount and type of insurance cover needed and to manage proceeds of claims.
Claims support	Our experienced Claims Representatives are here to help with your claim. Simply contact Sunsuper first and we will guide you through the process.
Rehabilitation - "work is good medicine"	If you have an injury, disability or health condition we may be able to arrange work related rehabilitation to assist you back to meaningful work.
Binding Nominations vs. Preferred Beneficiaries	You can make a binding death benefit nomination or you can nominate your preferred beneficiaries. Refer to the <i>Sunsuper for life guide</i> for more information.
Who pays for your insurance premiums?	Premiums for insurance cover are deducted from your <i>Super-savings account</i> .

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

Standard Death and Total & Permanent Disability cover

Insurance solutions

You have access to flexible cover to keep you protected 24 hours a day, 7 days a week if something unfortunate were to happen to you. You also have the added advantage of cover being provided through a corporate plan with Standard cover (subject to eligibility) and limited circumstances in which health evidence is required.

You are protected no matter what stage of life you're at. You can use your insurance benefits to help pay your credit card bills, cover your mortgage, pay the rent or cover the unexpected medical treatment you may need. Also in the unfortunate event of your death, insurance can help to ensure your family's financial future is secure.

As there's no "one size fits all" with insurance, you have the flexibility to make sure your cover is right for you. Sunsuper offers easy ways for you to change your cover, apply for Additional cover or cancel your cover. You have two options available to ensure you and your family are adequately covered.

Standard cover	Additional cover
Automatic cover for eligible members with no medical questions unless you exceed the AAL	An application form with medical and lifestyle questions Choose your own level of cover

New eligibility criteria introduced 1 April 2020

Australian Government reforms restrict when super funds can provide automatic insurance cover to members. This restriction is designed to help protect members retirement savings from erosion by insurance premiums for insurance cover you may not want or need.

Under the *Putting Members' Interests First* reforms effective from 1 April 2020, we cannot automatically provide insurance cover to members before they attain age 25 and 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 have the option to opt-in to Standard insurance cover before meeting age 25 and the \$6,000 account balance requirement (subject to meeting the other eligibility conditions). Refer to the section *Opt-in for insurance cover* for more details.

Who pays for your insurance?

Your insurance premiums are calculated weekly and deducted monthly from your *Super-savings account*.

If you are an eligible employee you will automatically receive default cover up to a maximum of \$1,000,000.

Permanent employees are provided Death and Total & Permanent Disability cover based on the following:

15% x Salary x Years of Future Membership (to age 67)

Your cover will normally start from the date you attain age 25 and your *Super-savings account* balance reaches \$6,000 (subject to meeting the other eligibility conditions), unless you opt-in to Standard cover sooner.

Your specific level and type of cover will be detailed in your *Welcome booklet* and each year in your *Annual Statement*.

The amount of insurance cover provided is recalculated each 1 July based upon your updated **Salary** and **Years of Future Membership**, unless we advise you otherwise. Your annual premium is based on this cover and remains unchanged until 1 July the next year. **Salary** is the amount advised to Sunsuper by your employer.

If you are on **Unpaid Leave** or parental leave, **Salary** is the amount advised to Sunsuper by APN on the previous 1 July or on date of commencement (whichever is more recent) immediately before starting leave, unless we advise you otherwise.

Opt-in for insurance cover

If you would like to obtain cover before attaining age 25 and reaching an account balance of \$6,000, please select the "Opt-in for insurance cover" option in Sunsuper's *Member Online*, or by ticking the box on your *Membership application* form.

Member Online is available at sunsuper.com.au/memberonline and you can obtain a copy of the *Membership application* form at sunsuper.com.au/apnsuper99.

For information on when cover starts please refer to the *When does my insurance cover start?* section in this *guide*.

Limited Cover will apply in the following circumstances,

- if you Opt-in for insurance within 120 days of joining your employer and you are not **At Work** on the date cover starts, your cover will be provided as **Limited Cover** until you have been **At Work** for 30 consecutive days,
- if you Opt-in for insurance cover outside of 120 days of joining your employer, your Standard cover will be provided as **Limited Cover** for 12 months¹ and subject to a 30-consecutive day **At Work** requirement after the end of the 12-month period to remove the limitation.

If you Opt-in for insurance cover outside of 120 days of joining your employer, you will not be eligible to claim where your Death, **Terminal Illness** or Total & Permanent Disability results from suicide or any intentional self-inflicted act within 12 months of cover starting.

1. Where you joined the Plan within 120 days of the date you joined your employer, if you attain age 25 and your *Super-savings account* balance reaches \$6,000 before the expiration of the 12 month **Limited Cover** period, this limitation will be removed subject to you being **At Work** on the date you meet these requirements. If you are not **At Work** on that date, cover will remain **Limited Cover** until you are then **At Work** for 30 consecutive days.

Important eligibility terms and conditions

An example of Standard Death and Total & Permanent Disability cover

James is 29 years old when he joins the APN Superannuation Plan. He is on a Salary of \$50,000 p.a. and has an account balance of \$6,000. James is eligible for Standard Death and Total & Permanent Disability cover and chooses the default.

Insurance cover

15% x Salary x Years of Future Membership (to age 67)	Standard cover
15% x \$50,000 x 38 years	\$285,000

Weekly premium

(Standard cover / \$10,000) x premium / 52	Weekly premium for Standard cover
(\$285,000 / \$10,000) x \$4.86 / 52	\$2.67

Note: Rounding variations may occur when calculating premiums. The weekly premiums displayed above are rounded up to the next whole cent.

Premiums for insurance cover are deducted from your *Super-savings account*. For full details on Death and Total & Permanent Disability premium rates, refer to the *Premiums* section of this *Insurance guide*.

Am I eligible for Standard Death and Total & Permanent Disability cover?

You are eligible for automatic Standard Death and Total & Permanent Disability cover if:

- you have attained age 25 and your account balance has reached \$6,000, or
- you have opted in to Standard cover before you attain age 25 and/or before your balance reaches \$6,000¹, and
- you are under the age of 67,
- your employer APN is making Superannuation Guarantee (SG) contributions to Sunsuper on your behalf,
- you meet the specific eligibility criteria established by your employer, the Trustee and the insurer,
- you are an Australian citizen, permanent resident or holder of working visa which enables you to work in Australia, unless otherwise agreed by the insurer.

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

You are not eligible for Standard cover if:

- you have previously received or are eligible to receive a Total & Permanent Disability benefit or **Terminal Illness** benefit or a benefit for **Permanent Incapacity** or **Terminal Medical Condition** from Sunsuper or any other fund or insurer, or
- you have previously cancelled the Plan's Standard insurance cover.

If you're not eligible to opt-in or automatically receive Standard cover, you can apply for Additional cover at any time. Refer to the *Additional cover* section of this *Insurance guide*.

For more information refer to the *Definitions* section of this *Insurance guide*, this includes the definition of **Limited Cover** and **At Work**.

1. If you opt-in outside 120 days of starting work with your employer, your cover will be provided as **Limited Cover** for 12 months and subject to a 30-consecutive day **At Work** requirement after the end of the 12-month period.

Where you joined the Plan within 120 days of the date you joined your employer, if you attain age 25 and your *Super-savings account* balance reaches \$6,000 before the expiration of the 12 month **Limited Cover** period, this limitation will be removed subject to you being **At Work** on the date you meet these requirements. If you are not **At Work** on that date, cover will remain **Limited Cover** until you are then **At Work** for 30 consecutive days.

What is Limited Cover?

Limited Cover generally means you're only covered for illness or injury that first manifests after the date cover commenced. For more information on **Limited Cover** refer to the *Definitions* section of this *guide*.

Need to know your level of cover

Just log into sunsuper.com.au/memberonlinelogin. If you're not signed up for *Member Online* – it's simple – just contact us on **13 11 84** and we'll get you set up in no time.

When does my Standard Death and Total & Permanent Disability cover start?

The following table outlines when your cover will start and the conditions applicable to that cover.

Insurance cover or option	Requirements for insurance cover to start	Insurance cover start date
Standard Death and Total & Permanent Disability cover	Standard cover starts automatically when all four have occurred: <ul style="list-style-type: none"> • you join the Plan, and • we receive an SG contribution on your behalf, and • you attain age 25; and • your account balance reaches \$6,000. 	Cover starts when you attain age 25 and reach 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 attaining age 25 and reaching an account balance of \$6,000.
Opt-in for insurance cover – you can opt-in for Standard cover prior to attaining age 25 and reaching an account balance of \$6,000	Standard cover starts when all three have occurred: <ul style="list-style-type: none"> • you join the Plan, and • we receive an SG contribution on your behalf, and • we receive a request from you to opt-in for insurance cover. 	Cover starts on the date your application is received if an SG contribution was received in: <ul style="list-style-type: none"> - the 120 day period prior to your application, or - within 120 days of you starting with your employer, where your application is also in this period. Otherwise, cover starts on the date of receipt of the next SG contribution following receipt of your application.

Limited Cover will apply in the following circumstances, if

- you are not **At Work**, on the date cover starts, your Standard cover will be provided as **Limited Cover** until you have been **At Work** for 30-consecutive days,
- you joined the Plan outside of 120 days of joining your employer, your Standard cover will be provided as **Limited Cover** for 12 months and subject to a 30-consecutive day **At Work** requirement after the end of the 12-month period to remove the limitation,
- your Standard cover starts more than 120 days after the date you attain age 25 and your account balance reaches \$6,000, your Standard cover will be provided as **Limited Cover** for 12 months and subject to a 30-consecutive day **At Work** requirement after the end of the 12-month period to remove the limitation.

If you're on leave for reasons other than sickness or injury you are still generally considered to be **At Work**.

If you're not eligible to opt-in or automatically receive Standard cover, you can apply for Additional cover at any

time. Applications are subject to acceptance by the insurer and evidence of health may be required. Simply complete and return the *Change of insurance cover* form.

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

If you want to reduce or cancel your Standard cover, or just want Standard Death only cover or Total & Permanent Disability only cover, please let us know. Otherwise the premiums will continue to be deducted from your *Super-savings account* each month. The cancellation or reduction will be effective from the date your instruction is received by Sunsuper.

Our secure online service *Member Online* allows you to cancel your insurance cover, alternatively just contact us.

If you cancel your cover, evidence of health satisfactory to the insurer will be required before cover can restart from the date approved by the insurer or if Special Conditions apply, the date you accept the Special Conditions.

What is Total and Permanent Disablement cover?

The intention of Total & Permanent Disability cover is to provide a payment to you should you suffer an injury or illness that permanently prevents you from working to retirement age.

Total & Permanent Disability insurance cover is available to you regardless of your working hours or the basis on which you are employed. You will be provided with cover automatically when you attain age 25 and your *Super-savings account* reaches balance of \$6,000.

In the event of a claim 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 the job you were performing when you become injured or ill. If you are not employed prior to becoming injured or ill, different conditions may apply.

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.

If you are deemed totally and permanently disabled, the payment will be paid to you as a single lump sum.

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

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.

In order to lodge a claim you would need to be under the care of a **Medical Practitioner** and are still suffering from an ongoing and serious injury or illness that is permanently

preventing you from working ever again. Refer to the **Total & Permanent Disability** definition in the *Definitions* section.

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. The assessment process takes into account the **Total & Permanent Disability** definition at the **Date of Disablement**, your employment status, and the impact that your injury or illness will have on your ability to work again.

What benefits are paid out if you are totally and permanently disabled?

If you are totally and permanently disabled and meet the Total & Permanent Disability definition, your Total & Permanent Disability cover as at the **Date of Disablement** will be payable. You may also be able to access your *Super-savings account* balance.

Any Total & Permanent Disability benefit is subject to acceptance of the claim by the insurer.

In limited circumstances you will not be eligible to claim on the Standard Death and Total & Permanent Disability insurance cover through Sunsuper. Refer to the section *Am I eligible for Standard Death and Total & Permanent Disability cover?* And the definition of Employed in the *Definitions* section.

When would a health questionnaire be required?

A health questionnaire will be required if:

- your Standard cover is over \$1,000,000,
- you have previously cancelled your cover and want to reapply, or
- you choose to apply for Additional cover.

Remember you may have a condition that does not impede your day-to-day activities but may affect your risk assessment with the insurer.

Bring your current cover with you

You may be eligible to transfer existing Death and Total & Permanent Disability, Death only or Total & Permanent Disability only cover up to \$2,000,000 to the APN Superannuation Plan.

To apply to transfer your existing cover please complete and return the *Transfer of insurance cover* form, available at [sunsuper.com.au/apnsuper99](https://www.sunsuper.com.au/apnsuper99)

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 Group Life Insurance policy,
- you will continue to be subject to any individual loadings, exclusions and restrictions applicable to the cover that was transferred,
- you will need to cancel the cover you had under your previous fund or policy, and
- your transferred cover will be fixed and in addition to your Standard 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 transferring cover.

Transferred cover will start on the date your application is accepted by the insurer.

Interim Accident cover

Where you are not entitled to Standard Death and Total & Permanent Disability cover or you choose to apply for Additional 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 *Change of insurance cover* form.

The interim cover ends on the earlier of acceptance, deferral or rejection of your application for cover or the expiry of the 90-day period.

The amount of interim accident cover is the lesser of the amount of Additional Death and/or Total & Permanent Disability cover you are applying for or \$2,000,000.

No premium is charged for the interim accident cover.

No interim accident benefit will be paid during the interim period if 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 terms. Benefit payment exclusions may also apply (refer to the *Conditions & exclusions* section in this *Insurance guide*).

The interim accident cover available to you is determined by the type of cover available in your Plan.

Additional cover

There are many reasons that you may want to apply for Additional cover:

- you're not eligible for Standard insurance cover,
- you have previously cancelled your cover and want to reapply,
- you simply want to increase the level of cover, or
- you want to change the basis of insurance provided by Standard cover.

Any application for insurance cover is subject to acceptance by the insurer. Satisfactory evidence of health may be required. Sunsuper reserves the right to limit the amount of Additional cover provided. Cover will commence on the date the insurer accepts your application.

Types of cover available

The types of cover available are:

- Death only (this includes *Terminal Illness*)
- Death and Total & Permanent Disability
- Total & Permanent Disability only

How much can I apply for?

You can apply for either Death and/or Total & Permanent Disability cover up to the following maximum cover levels (this includes any existing Standard cover):

- Death cover – unlimited
- *Terminal Illness* – \$5 million (this forms part of the Death cover)
- Total & Permanent Disability cover – \$3 million

When does Additional Death and Total & Permanent Disability cover start?

Your Additional Death and/or Total & Permanent Disability cover will start from the date the insurer approves your application, provided you have enough money in your *Super-savings account* to pay insurance premiums and their approval is not subject to any loadings or benefit exclusions.

Additional Total & Permanent Disability cover reduces from age 61

Once you reach age 61, your Additional 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

It's simple, you can apply for Additional cover anytime

You can apply for cover through [sunsuper.com.au/apnsuper99](https://www.sunsuper.com.au/apnsuper99) by selecting the "Insurance - Apply today" tab.

Alternatively download and complete the *Change of insurance cover* form and return it to us.

below. If you have \$200,000 of Total & Permanent Disability cover, your Total & Permanent Disability cover will reduce as follows:

Age	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 Additional Total & Permanent Disability 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.

An example of how to calculate Additional Death and Total & Permanent Disability premiums

James is 29 years old, he needs Additional cover. He decides to apply for \$100,000 of Additional Death cover and \$200,000 of Additional Total & Permanent Disability cover. If accepted by the insurer, James' premiums for Additional cover will be as follows:

$$\begin{aligned} & \text{(Additional Death only cover / \$10,000) x Death premium / 52} \\ & \text{plus} \\ & \text{(Additional TPD¹ only cover / \$10,000) x TPD¹ premium / 52} \end{aligned}$$

$$(\$100,000 / \$10,000) \times \$3.35 / 52$$

+

$$(\$200,000 / \$10,000) \times \$1.51 / 52 = \$1.23 \text{ per week}$$

¹ TPD means Total & Permanent Disability

Note: Rounding variations may occur when calculating premiums. The weekly premiums displayed above are rounded up to the next whole cent.

Premiums for insurance cover are deducted from your *Super-savings account*.

Restrictions and exclusions on Additional cover

There is a benefit exclusion that applies for 12 months after acceptance of the Additional insurance cover to any claim resulting from suicide or any intentional self-inflicted injury.

This means the Death and/or Total & Permanent Disability cover that is accepted by the insurer will not be paid for a suicide or intentional self-inflicted injury related claim in the 12 month period from the date that your Additional cover is accepted by the insurer. This restriction applies only to the amount above any Standard insurance cover you may have been automatically entitled to on joining Sunsuper.

Conditions & exclusions

When does Death and Total & Permanent Disability insurance cover stop?

Cover will stop when:

- you turn 67 for Standard Death cover,
- you turn 67 for Standard Total & Permanent Disability cover,
- you turn 70 for Additional Death cover,
- you turn 67 for Additional Total & Permanent Disability cover,
- you die,
- you receive a Total & Permanent Disability insurance benefit,
- you cancel the cover,
- you are paid a **Terminal Illness** benefit,
- you withdraw all monies from Sunsuper,
- the policy issued to the Trustee is cancelled or terminated for any reason,
- you are Employed under a work visa and the term of the visa expires, or you permanently depart Australia (whichever is earlier),
- Contribution Inactivity - your *Super-savings account* has not received an **Eligible Contribution** in the last 12 months or more and you have not elected in writing to keep your cover¹, or
- Zero Account Balance - the premium is due and there is not enough money in your super account to pay the premiums and the premiums remain unpaid for 4 months.

1. Where we have valid contact details, we will contact you advising the date your cover will stop. If you wish for your cover to continue even if no **Eligible Contributions** are made to your account for continuous periods of 12 months or longer, you can advise us in writing or visit [sunsuper.com.au/keepmyinsurance](https://www.sunsuper.com.au/keepmyinsurance). Make sure you consider the impact of premiums on your account balance.

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

If your insurance cover automatically stops because of:

- Contribution Inactivity; or
- Zero Account Balance,

then Standard cover based on the default option will automatically restart upon receipt of a Superannuation Guarantee contribution, and only if you have also met the Standard cover eligibility criteria of attaining age 25 and your account balance reaching \$6,000.

You also have the option to advise us in writing to restart the insurance cover that was stopped due to Contribution Inactivity. This written request must be received within 60 days of the cover stopping. We will restart the type and amount of cover you had as at the date of the automatic cancellation from the date your written request for reinstatement is received.

Any cover that is reinstated will be provided as **Limited Cover** until you have been **At Work** for 30 consecutive days.

If you have requested a cancellation of your cover, your cover will **not** automatically restart. Should you wish to restart cover in this instance, you will be required to complete an application that may be subject to health and lifestyle assessment, and acceptance by the insurer.

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

What happens if you have a Terminal Illness?

A **Terminal Illness** means that you are suffering from a sickness or injury that is likely to result in your death within 12 months.

If your Death cover is in force, subject to providing all the required documentation to support your claim and approval by the Trustee and Insurer, which includes certification of the **Terminal Illness** by the two **Medical Practitioners** (as defined in the *Definitions* section), you will be paid a **Terminal Illness** benefit.

If you have Death cover and the insurer accepts your claim for **Terminal Illness**, the benefit paid is the amount of your 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 paid by the insurer on account of the **Terminal Illness** benefit. Your beneficiaries will then receive this in the event of your death.

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

What benefits are paid out if you die?

Your Death benefit is the amount of your superannuation account balance plus the total amount of Death 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 binding death benefit nomination).

Any Death benefit is subject to acceptance of the claim by the insurer.

General exclusions

- active military service

A Death, **Terminal Illness** or Total & Permanent Disability benefit will not be paid if the sickness or injury arises from you being deployed to a hostile environment as part of active military service.

This exclusion does not apply to the Australian Armed Forces Reserve where active duty occurs in Australia.

- suicide or intentional self-inflicted injury

Within 12 months of:

- the start of your Standard Death and Total & Permanent Disability cover where your cover is subject to a 12 month **Limited Cover** period, or
- the start of your Additional Death and Total & Permanent Disability cover,

you will not be eligible to claim where your death or total & permanent disability results from suicide or from an intentional self-inflicted injury. For more information please refer to the *Opt-in for insurance cover* and *When does my Standard Death and Total & Permanent Disability cover start?* sections in this *guide*.

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 and working at least 15 hours a week, you may be eligible 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.

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. 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, 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 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 became ill.

The waiting period is the length of time you must be injured or ill before you can claim a benefit. The benefit period is the maximum period you can claim benefits whilst you are totally or partially disabled.

Standard Income Protection cover is automatically provided to eligible permanent employees. You will be provided with cover automatically when you attain age 25 and your *Super-savings account* reaches a balance of \$6,000.

Income Protection features at a glance

Feature	Description
Cover obtained	Automatically
Cover starts	Normally when you attain age 25 and your account balance reaches \$6,000 or the date you opt-in for cover (subject to having received an employer contribution)
% of Salary	75%
Maximum cover	\$600,000 per annum
Automatic Acceptance Limit	\$156,000 per annum
Cover up to age	65
Benefit Period	2 years
Waiting Period	90 days
Premium waiver	When on claim
Occupational rehabilitation support	✓
Partial Disability payments	✓
Cover during paid & Unpaid leave	✓
Cover during overseas employment	✓

How does Income Protection cover work?

Income Protection cover provides:

- a replacement monthly income of up to 75% of your **Pre-Disability Salary** (less offsets),
- for a **Benefit Period** up to 2 years, after a 90-day **Waiting Period**,

If you're an eligible permanent employee you will automatically receive Income Protection cover based on your **Salary**, up to the Automatic Acceptance Limit (AAL) of \$156,000 per annum. Sunsuper will let you know what is required if Standard cover is not available to you or your cover is over the AAL.

Your specific benefit amount and weekly premium will be detailed in your *Welcome booklet* and each year in your *Annual Statement*.

Opt-in for insurance cover

If you would like to obtain cover before attaining age 25 and reaching an account balance of \$6,000, please select the "Opt-in for insurance cover" option in Sunsuper's *Member Online*, or by ticking the box on your *Membership application form*.

Member Online is available at [sunsuper.com.au/memberonline](https://www.sunsuper.com.au/memberonline) and you can obtain a copy of the *Membership application form* at [sunsuper.com.au/apnsuper99](https://www.sunsuper.com.au/apnsuper99).

For information on when cover starts please refer to the *When does my insurance cover start?* section in this *guide*.

Limited Cover will apply in the following circumstances,

- if you Opt-in for insurance within 120 days of joining

your employer and you are not **At Work** on the date cover starts, your cover will be provided as **Limited Cover** until you have been **At Work** for 30 consecutive days,

- if you Opt-in for insurance cover outside of 120 days of joining your employer, your Standard cover will be provided as **Limited Cover** for 12 months¹ and subject to a 30-consecutive day **At Work** requirement after the end of the 12-month period to remove the limitation.

1. Where you joined the Plan within 120 days of the date you joined your employer, if you attain age 25 and your *Super-savings account* balance reaches \$6,000 before the expiration of the 12 month **Limited Cover** period, this limitation will be removed subject to you being **At Work** on the date you meet these requirements. If you are not **At Work** on that date, cover will remain **Limited Cover** until you are then **At Work** for 30 consecutive days.

Things to consider

- Premiums generally increase with age.
- Income Protection benefits are taxable income and subject to Pay As You Go (PAYG) tax.
- 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**.

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 the number of continuous days which must elapse 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.

Premium waiver

Your Income Protection premiums will be waived whilst you are in receipt of monthly benefit payments.

Once you stop receiving benefit payments, deduction of the Income Protection premiums will recommence being drawn from your *Super-savings account*.

Example of how an Income Protection benefit is paid:

Fiona has a 90-day **Waiting Period**. Her benefit will be payable from day 91 subject to acceptance by the insurer. As benefit payments are paid monthly in arrears her first benefit payment will be made a month later.

Partial Disability payments

A reduced monthly Income Protection benefit may be payable if you become **Partially Disabled**.

Where you are unable to work at full capacity due to sickness 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

Occupational rehabilitation support

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

We 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, we can assist you to improve your fitness for work.

Rehabilitation services may include:

- initial meetings with a rehabilitation provider to identify your return to work needs,
- workplace visits to identify solutions in your return to work plan,
- equipment to ensure you maintain your job,
- career guidance to explore alternate 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. If you would like further information about your rehabilitation options please speak with your Claims Representative at Sunsuper.

Together we can assist you getting back to work and back to a fuller life.

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

Rehabilitation expenses

Following lodgement of an Income Protection claim, and if you are approved by the insurer to participate in a rehabilitation program, the expenses will be paid, up to an amount equivalent to six monthly benefit payments, by the insurer to the rehabilitation service provider on your behalf.

Am I eligible for Standard Income Protection cover?

You are eligible for Standard Income Protection cover if:

- your employer has elected to have Income Protection cover in the APN Superannuation Plan,
- you have attained age 25 and your account balance has reached \$6,000 or
- you have opted in to Standard cover before you attain age 25 and/or before your balance reaches \$6,000¹, and
- you are under the age of 65,
- you are permanently **Employed** (including employees on fixed term contracts of six months or more) and working at least 15 hours per week for your employer APN,
- your employer APN is making superannuation contributions to Sunsuper on your behalf,
- you are an Australian citizen, permanent resident or holder of working visa which enables you to work in Australia, unless otherwise agreed by the insurer, and
- you meet the specified eligibility criteria established by APN.

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

You are not eligible for cover if:

- you have previously received or are eligible to receive a Total & Permanent Disability benefit or **Terminal Illness** benefit or a benefit for **Permanent Incapacity** or **Terminal Medical Condition** from any other fund or insurer,
- you have previously cancelled the Plan's Standard insurance cover.

If you're not eligible for Standard cover, you can apply for cover at any time. Applications are subject to acceptance by the insurer and evidence of health may be required. Simply complete and return the *Change of insurance cover form*.

1. If you opt-in outside 120 days of starting work with your employer, your cover will be provided as **Limited Cover** for 12 months and subject to a 30-consecutive day **At Work** requirement after the end of the 12-month period.

Where you joined the Plan within 120 days of the date you joined your employer, if you attain age 25 and your *Super-savings account* balance reaches \$6,000 before the expiration of the 12 month **Limited Cover** period, this limitation will be removed subject to you being **At Work** on the date you meet these requirements. If you are not **At Work** on that date, cover will remain **Limited Cover** until you are then **At Work** for 30 consecutive days.

Does my cover change each year?

Your Standard Income Protection cover is based on your **Salary** each year. Your annual premium is based on your cover and remains unchanged until 1 July the next year, unless we advise you otherwise. Refer to the *Definitions* section of this *guide* for the definition of **Salary** for Income Protection cover.

How is my Salary determined?

Salary is the amount advised to Sunsuper by your employer.

If you are on **Unpaid Leave** or parental leave, **Salary** is the amount advised to Sunsuper by APN on the previous 1 July or on date of commencement (whichever is more recent) immediately before starting leave, unless we advise you otherwise.

In the event of a claim, your benefit will be based on your **Salary** at the date you become **Totally Disabled**.

When does my Standard Income Protection cover start?

The following table outlines when your cover will start and the conditions applicable to that cover.

Insurance cover or option	Requirements for Insurance Cover to start	Insurance Cover start date
Standard Income Protection cover	Standard cover starts automatically when all four have occurred: <ul style="list-style-type: none"> • you join the Plan, and • we receive an SG contribution on your behalf, and • you attain age 25; and • your account balance reaches \$6,000. 	Cover starts when you attain age 25 and reach 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 attaining age 25 and reaching an account balance of \$6,000.
Opt-in for insurance cover - you can opt-in for Standard cover prior to attaining age 25 and reaching an account balance of \$6,000	Standard cover starts when all three have occurred: <ul style="list-style-type: none"> • you join the Plan, and • we receive an SG contribution on your behalf, and • we receive a request from you to opt-in for insurance cover. 	Cover starts on the date your application is received if an SG contribution was received in: <ul style="list-style-type: none"> - the 120 day period prior to your application, or - within 120 days of you starting with your employer, where your application is also in this period. Otherwise, cover starts on the date of receipt of the next SG contribution following receipt of your application.

Limited Cover will apply in the following circumstances, if

- you are not **At Work**, on the date cover starts, your Standard cover will be provided as **Limited Cover** until you have been **At Work** for 30-consecutive days,
- you joined the Plan outside of 120 days of joining your employer your Standard cover will be provided as **Limited Cover** for 12 months and subject to a 30-consecutive day **At Work** requirement after the end of the 12-month period to remove this limitation,

- your Standard cover starts more than 120 days after the date you attain age 25 and your account balance reaches \$6,000 your Standard cover will be provided as **Limited Cover** for 12 months and subject to a 30-consecutive day **At Work** requirement after the end of the 12-month period to remove this limitation.

If you're on leave for reasons other than sickness or injury you are still generally considered to be **At Work**.

If you're not eligible for Standard cover, you can apply for cover at any time. Applications are subject to acceptance by the insurer and evidence of health may be required. Simply complete and return the *Change of insurance cover* form.

An example of how to calculate Income Protection premiums

Karen is 30 years old when she joins the APN Superannuation Plan. She is a permanent employee on a **Salary** of \$50,000 p.a. and has an account balance over \$6,000. She is working at least 15 hours per week and is eligible for automatic Standard Income Protection cover.

Insurance cover

75% x Salary	Annual Income Protection cover
75% x \$50,000	\$37,500

Weekly Premium

(Cover / \$1,000) x premium / 52	Income Protection cover weekly premium
$(\$37,500 / \$1,000) \times \$1.58 / 52$	\$1.14

Note: Rounding variations may occur when calculating premiums. The weekly premiums displayed above are rounded up to the next whole cent.

Premiums for insurance cover are deducted from your *Super-savings account*.

For full details of Income Protection premiums, refer to the *Premiums* section of this *Insurance guide*.

How to apply for Income Protection cover?

It's simple, you can apply for Income Protection cover anytime.

You can apply for cover through sunsuper.com.au/apnsuper99 by selecting the "Insurance - Apply today" tab.

Alternatively download and complete the *Change of insurance cover* form and return it to us.

Bring your current cover with you

You may be eligible to transfer existing Income Protection cover up to \$240,000 per annum to the APN Superannuation Plan. Your total Income Protection cover cannot exceed 75% of your **Pre-Disability Salary**.

To apply to transfer your existing cover please complete and return the *Transfer of insurance cover* form, available at sunsuper.com.au/apnsuper99

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 Group Life Insurance policy,
- you will continue to be subject to any individual loadings, exclusions and restrictions applicable to the cover that was transferred,
- you will need to cancel the cover you had under your previous fund or policy, and
- your transferred cover will be fixed and in addition to your Standard 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 transferring cover.

Transferred cover will start on the date your application is accepted by the insurer.

Interim Accident cover

Where you choose to apply for Income Protection cover, up to 90 days interim accidental Income Protection cover will apply immediately from the date we receive your completed *Change of insurance cover form*.

The amount of interim accident cover is the lesser of the amount of Income Protection cover you are applying for and \$180,000 per annum. Your chosen **Benefit Period** and **Waiting Period** will apply.

The interim cover ends on the earlier of acceptance, deferral or rejection of your application for cover or the expiry of the 90-day period.

No premium is charged for the interim accident cover.

No interim accident benefit will be paid during the interim period if 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 terms. Benefit payment exclusions may also apply (refer to the *Conditions & exclusions* section in this *Insurance guide*).

The interim accident cover available to you is determined by the type of cover available in your Plan (see your *PDS* and this *Insurance guide*). Refer to the *Definitions* section of this *Insurance guide* for the definition of **Accident**.

Conditions & exclusions

When does Income Protection cover stop?

Income Protection cover stops when:

- you leave your employer,
- you turn 65,
- you die,
- you cancel the cover,
- you withdraw all monies from Sunsuper,
- you are no longer working for at least 15 hours per week with your employer, or you no longer satisfy the eligibility conditions for Income Protection cover,
- your period of **Unpaid Leave** or parental leave exceeds 24 months,
- you are Employed under a work visa and the term of the visa expires, or you permanently depart Australia (whichever is earlier),
- the date you cease employment with your Australian based employer while overseas,
- the policy issued to the Trustee is cancelled or terminated for any reason,
- Contribution Inactivity - your *Super-savings account* has not received an **Eligible Contribution** in the last 12 months or more and you have not elected in writing to keep your cover¹, or
- Zero Account Balance - the premium is due and there is not enough money in your super account to pay the premiums and the premiums remain unpaid for 4 months.

1. Where we have valid contact details, we will contact you advising the date your cover will stop. If you wish for your cover to continue even if no **Eligible Contributions** are made to your account for continuous periods of 12 months or longer, you can advise us in writing or visit [sunsuper.com.au/keepmyinsurance](https://www.sunsuper.com.au/keepmyinsurance). Make sure you consider the impact of premiums on your account balance.

Can Income Protection cover restart if it ceases?

If your insurance cover automatically stops because of:

- Contribution Inactivity; or
- Zero Account Balance,

then Standard cover based on the default option will automatically restart upon receipt of a Superannuation Guarantee contribution and only if you have also met the Standard cover eligibility criteria of attaining age 25 and your account balance reaching \$6,000.

You have the option to advise us in writing to restart the insurance cover that was stopped due to Contribution Inactivity. This written request must be received within 60 days of the cover stopping. We will restart the type and amount of cover you had as at the date of the automatic cancellation from the date your written request for reinstatement is received.

Any cover that is reinstated will be **Limited Cover** until you are **At Work** for 30 consecutive days.

If you have requested a cancellation of your cover, your cover will **not** automatically restart. Should you wish to restart cover in this instance you will be required to complete an application

that may be subject to health and lifestyle assessment, and acceptance by the insurer.

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

What benefit is paid out?

An Income Protection benefit is payable if you are **Totally Disabled** or **Partially Disabled** after the **Waiting Period** has ended. The maximum Total Disability benefit is the lower of:

- your insured amount less any offsets,
- 75% of your **Pre-Disability Salary** (less any offsets), and
- \$600,000 per annum.

Benefit payments will commence when the **Waiting Period** ends and are paid monthly in arrears. A reduced monthly Income Protection benefit may be payable if you become **Partially Disabled**. The benefit may also be reduced by income received by alternate income sources, refer to offsets detailed below.

Benefits paid under the Income Protection benefit are subject to Pay As You Go (PAYG) tax. This will be deducted prior to payment.

Whilst on claim Income Protection premiums are waived. Any claim for your Income Protection benefit is assessed independently of any Total & Permanent Disability claim.

When we won't pay a benefit

It is important to understand in what circumstances an Income Protection benefit is not payable. A benefit won't be paid if the sickness or injury is caused, wholly or partly, directly or indirectly, from:

- deliberate self-inflicted injury or suicide, or attempted suicide or self-destruction while sane or insane,
- uncomplicated pregnancy, childbirth or miscarriage,
- you being deployed to a hostile environment as part of active military service,
- a criminal act committed by you, or
- any other exclusions imposed by the insurer.

A benefit won't be paid where a fraudulent claim is made.

Will there be offsets to my benefit payment?

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

- Workers' Compensation or Transport Accident Compensation or similar legislation in relation to your sickness or injury,
- any other payments, statutory or otherwise, paid to you for loss of income in relation to your sickness or injury,
- any other payments made under any disability income type insurance policy, e.g. salary continuance, group salary continuance, income protection, etc,
- any other payment which relates to loss of income due to sickness or injury 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 Income Protection benefit is commuted (or will be commuted) to a lump sum, 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 Salary** (less any offsets). The benefit paid to you is taxable income and attracts PAYG tax (the same as salary and wages) which will be deducted from the benefit before it is paid to you.

You will be assessed against the **Total Disability** or **Partial Disability** (as applicable) definition. If your claim is accepted, payments (monthly in arrears) will start when the **Waiting Period** finishes.

The Income Protection benefit is subject to a maximum level based on your **Pre-Disability Salary** before you become **Totally Disabled**. If you are on **Unpaid Leave** or parental leave, your benefit is based on your most recent **Pre-Disability Salary** accepted by the insurer immediately prior to starting leave.

Payments will be made monthly in arrears.

Proof of income

In the event of a claim, proof of income is required to ensure your benefit does not exceed 75% of your **Pre-Disability Salary** at the first day of absence from active employment due to sickness or injury resulting in **Total Disability**.

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

You can return to work for up to 10 days during the **Waiting Period** without having to restart the **Waiting Period**. If you do return to work, the days returned to work will extend your original **Waiting Period** by the number of days returned to work. If you return for longer than specified, your **Waiting Period** will restart.

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:

- treated as a separate claim if it occurred after you returned to work for at least 6 continuous months, or
- deemed to be a continuation of the original claim if made within 6 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 sickness, or from both, whether related or not, benefits are payable in respect of only one injury or sickness, as the insurer shall reasonably determine, based on medical evidence.

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** 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 becomes capable of earning, a monthly salary equal to or greater than your **Pre-Disability Salary**,
- you being **Employed** under a work visa and the term of the working visa expiring or you permanently depart Australia (whichever is earlier),
- you are no longer under the care of, and or complying with the reasonable advice given by a **Medical Practitioner**,
- you reaching age 65, or
- your death.

The benefit will be paid even if the insurer assesses you to be Total & Permanent Disability. Providing you were an insured member of Sunsuper at the time you finished work due to the sickness or injury 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.

Other important information

Can your health affect your insurance cover?

If you wish to apply for cover above the AAL or you require Additional cover, when assessing your application for cover, the insurer may ask for further details in relation to the information you disclose in your application.

As a condition of acceptance of the Additional 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.

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

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.

Change in circumstances

Different people will have different needs depending on their individual circumstances. You may need more cover, or you may not want to cover yourself at all. It is important that you review your insurance needs and check that you are adequately covered. To help you work out your insurance needs, call us on **13 11 84**.

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 *Sunsuper for life Corporate* 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. 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 the *Sunsuper for life guide* for more information.

What happens if I am staying with my current employer, but my Superannuation Guarantee (SG) contributions are redirected?

If your SG contributions are redirected to another fund, the special arrangements you have with the APN Superannuation Plan will end on the last day of the period for which contributions were made. Any cover you had immediately prior to redirecting your SG contributions will continue as fixed cover amounts in *Sunsuper for life*. However, your administration fees and insurance premiums may alter from the amounts you were paying in the APN Superannuation Plan.

To be eligible to continue your cover in *Sunsuper for life*, you must ensure regular contributions are paid. You must let us know if you wish to cancel your insurance cover.

If you already have a *Sunsuper for life account*, your cover will be replaced by the higher of your existing *Sunsuper for life* cover and the cover provided under your *Sunsuper for life Corporate* account. The replacement of cover will take effect the date your SG contributions are redirected.

Visit [sunsuper.com.au/pds](https://www.sunsuper.com.au/pds) for a copy of the *Sunsuper for life PDS*.

Insurance cover for *Sunsuper for life* is provided through group life policies issued by AIA Australia Limited ABN 79 004 837 861 to the Trustee of the Sunsuper Superannuation Fund.

What happens if I leave my employer?

When we are told you have left your employer your membership in the APN Superannuation Plan will cease as well as any special arrangements. Your membership will be transferred to *Sunsuper for life*.

Shortly after Sunsuper receives notification we will contact you to advise you of your options:

- There will be no change to your investment choice, however the Administration fees may vary, any change will take effect from the date of transfer,
- Effective the date you cease employment with APN your insurance premiums and insurance fee may alter from the amounts you were paying in your Employer Plan and will be payable in full by you. Additional fees may also apply. Any changes to your insurance will be back dated to the date you left employment.
- Any Death and Total & Permanent Disability cover you had at the time of leaving your employer will continue in *Sunsuper for life* as Tailored Death and/or Total & Permanent Disability cover on a fixed cover basis. This means your amount of insurance stays the same but your premiums will generally increase as you get older.
- If you have left your employer as a result of illness or injury, **Limited cover** will apply from the date of transfer until you have been **At Work** for 30 consecutive days.
- If you already have a *Sunsuper for life account*, your cover will be replaced by the higher of your existing *Sunsuper for life* cover and the cover provided under your *Sunsuper for life Corporate* account. The replacement of cover will take effect the date you cease employment with your employer.

- If you have elected to 'Keep My Cover' this election will continue to apply to cover provided in your *Sunsuper for life* account.
- If your account does not receive an **Eligible Contribution** for a period of 12 months or more, your cover will normally cease 12 months after your last **Eligible Contribution**.

Your Income Protection cover will cease.

Your Income Protection cover may be able to be reinstated without evidence of health if:

- You return to permanent employment and work at least 15 hours per week,
- You apply for reinstatement within 120 days of leaving your employer,
- You have not left your employer as a result of illness or injury,
- You supply us proof of your new employment and occupational status, and
- You complete the *Income Protection transfer application* form, available at sunsuper.com.au/publications/insurance

Upon acceptance by the insurer, your Income Protection cover will be reinstated. The same level of cover, **Benefit Period** and **Waiting Period** will apply. If you have not applied within 120 days of ceasing employment, you will need to reapply for Income Protection cover and evidence of health may be required.

To be eligible to continue cover you must ensure regular contributions will be paid into your *Super-savings account*.

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

Visit sunsuper.com.au/pds for a copy of the *Sunsuper for life PDS*.

Insurance cover for *Sunsuper for life* is provided through group life policies issued by AIA Australia Limited ABN 79 004 837 861 to the Trustee of the Sunsuper Superannuation Fund.

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

If you don't want Standard or Additional cover, or you just want to reduce your cover, you need to let us know, otherwise the premiums will continue to be deducted from your *Super-savings account* each month. The cancellation or reduction will be effective from the date your instruction is received by Sunsuper.

Our secure online service *Member Online* allows you to cancel your insurance cover, alternatively just contact us.

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.

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 call us on **13 11 84**.

Special offers

Information on special offers may be available on our website from time to time. If we make a special offer, we will provide you with separate terms and conditions about the offer on request. Special offers may only be available to you for a short time and we may withdraw them at any time.

Financial Advice

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.

If you need some financial advice and help deciding what you should do in the short-term as well as a long term plan, please don't hesitate to contact one of our qualified financial planners on **13 11 84**. They can help you with a tailored financial plan.

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

Overseas travel and approved 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.

If you cancel your cover while on leave, you will need to reapply for cover on returning to work. 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. During the first 24 months of leave, the Total & Permanent Disability definition that will generally apply will be the definition that applied while you were working. If your period of leave continues past 24 months your cover will continue. However, the ***Loss of limbs and/or sight*** or ***Unable to do basic activities associated with work ever again*** components of the Total & Permanent Disability definition will apply until you return to work. Refer to the Total & Permanent Disability definition in the *Definitions* section.

Your Income Protection cover will stop after 24 months. You can reapply for cover upon returning to work. Evidence of health satisfactory to the insurer will be required before cover can restart from the date accepted by the insurer.

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 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 cover continues with no travel restrictions.

If you become disabled whilst overseas you may be required to return to Australia, at your own expense, for assessment.

What happens if you temporarily reside overseas?

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

The Total & Permanent Disability definition or Disablement benefit used in the event of a claim will depend 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 normally cease 12 months after your last ***Eligible Contribution***.

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

Employees employed under the terms of a work visa are eligible for Standard insurance cover and may apply for Additional cover.

Income Protection cover whilst temporarily residing overseas

Where you temporarily reside overseas during a period of ***Unpaid Leave*** your Income Protection cover may continue for up to 24 months. After 24 months your Income Protection cover will stop (refer to the Definitions section for the definition of ***Unpaid Leave***).

How is the premium for Standard and Additional cover calculated and when is it paid?

The premium rates for your Employer Plan are generally based on a number of factors including:

- the number of insured members in your Employer Plan,
- the age, gender and occupational mix of your Employer Plan, and
- the claims history of your Employer Plan.

The premiums include a 5% insurance fee to offset Sunsuper's costs of providing the cover.

The cost of your cover depends on the amount and type of cover you have, your age and gender, stamp duty (where applicable) and the premium rates applying to your Employer Plan. Premiums for cover in addition to the Standard insurance cover you receive automatically may also depend on your health at the time you applied and were accepted for the Additional cover.

Generally your insurance premiums are recalculated annually, unless agreed otherwise with the insurer. Premiums are deducted from your *Super-savings account* unless otherwise agreed with your employer.

Your insurance premiums are calculated weekly and deducted monthly from your *Super-savings account*.

Premium Rates - Standard and Additional Death and Total & Permanent Disability cover

Your insurance premiums are determined by your age, gender, amount of insurance and the premium rates applying to your Employer Plan. The table below shows the annual premium for each \$10,000 of cover.

Age	Death & TPD ¹ cover		Death only cover		TPD ¹ only cover	
	Male \$	Female \$	Male \$	Female \$	Male \$	Female \$
15	3.13	1.19	2.81	0.97	0.32	0.22
16	3.13	1.19	2.81	0.97	0.32	0.22
17	3.67	1.30	3.24	1.08	0.43	0.22
18	4.11	1.41	3.35	1.19	0.76	0.22
19	4.44	1.52	3.79	1.30	0.65	0.22
20	4.76	1.51	3.89	1.19	0.87	0.32
21	4.87	1.51	4.00	1.19	0.87	0.32
22	4.97	1.30	4.00	1.08	0.97	0.22
23	5.19	1.30	4.00	1.08	1.19	0.22
24	5.19	1.51	3.89	0.97	1.30	0.54
25	5.20	1.40	3.79	1.08	1.41	0.32
26	4.98	1.40	3.79	1.08	1.19	0.32
27	4.87	1.73	3.57	1.19	1.30	0.54
28	4.76	1.84	3.35	1.19	1.41	0.65
29	4.86	2.06	3.35	1.30	1.51	0.76
30	4.86	2.28	3.35	1.41	1.51	0.87
31	4.97	2.38	3.35	1.41	1.62	0.97
32	4.97	2.48	3.35	1.51	1.62	0.97
33	4.97	3.03	3.35	1.73	1.62	1.30
34	5.19	3.35	3.35	1.84	1.84	1.51
35	5.51	3.68	3.35	1.95	2.16	1.73
36	5.95	4.11	3.35	2.16	2.60	1.95
37	6.38	4.65	3.57	2.38	2.81	2.27
38	7.03	5.19	3.79	2.49	3.24	2.70
39	7.79	5.62	4.00	2.81	3.79	2.81
40	8.55	6.27	4.33	2.92	4.22	3.35
41	9.08	7.14	4.43	3.35	4.65	3.79
42	9.73	8.12	4.76	3.79	4.97	4.33
43	10.81	8.76	5.19	4.00	5.62	4.76
44	11.90	9.95	5.52	4.43	6.38	5.52
45	13.09	10.92	6.06	4.76	7.03	6.16
46	14.38	11.90	6.49	5.19	7.89	6.71
47	16.11	13.09	7.03	5.52	9.08	7.57
48	18.27	14.50	7.89	6.06	10.38	8.44
49	20.55	15.90	8.87	6.49	11.68	9.41
50	23.25	17.41	9.73	7.03	13.52	10.38
51	26.28	19.14	10.92	7.46	15.36	11.68
52	29.85	20.76	12.22	8.11	17.63	12.65
53	34.07	23.04	13.63	8.87	20.44	14.17
54	38.72	25.53	15.47	9.63	23.25	15.90
55	43.90	28.55	17.30	10.71	26.60	17.84
56	49.86	32.01	19.36	11.68	30.50	20.33
57	56.46	36.23	21.20	13.19	35.26	23.04
58	64.24	41.10	23.58	14.71	40.66	26.39
59	71.37	46.61	26.06	16.44	45.31	30.17
60	79.71	52.89	28.88	18.39	50.83	34.50
61	86.84	59.92	31.47	20.55	55.37	39.37
62	91.82	68.03	35.15	23.04	56.67	44.99
63	111.28	77.00	41.85	25.63	69.43	51.37
64	131.62	86.84	50.72	28.55	80.90	58.29
65	181.69	119.94	57.21	31.80	124.48	88.14
66	208.94	137.89	64.67	35.15	144.27	102.74
67	n/a	n/a	73.11	38.83	n/a	n/a
68	n/a	n/a	82.52	42.94	n/a	n/a
69	n/a	n/a	93.33	47.26	n/a	n/a

¹ TPD means Total & Permanent Disability

The Death only premiums shown above for ages 67 to 69 apply to Additional Death cover only. When you have fixed cover, your Total & Permanent Disability cover reduces by 10% each year from age 61 and ceases on your 67th birthday. The above premiums for Death and Total & Permanent Disability do not reflect the reduced cover. Rounding variations may occur when calculating premiums.

Facts about making a claim

Premium Rates - Income Protection cover

Your insurance premiums are determined by your age, gender, amount of insurance, Waiting Period, Benefit Period and the premium rates applying to your Employer Plan. The table below shows the annual premium for each \$1,000 of Income Protection cover.

Age	Male \$	Female \$
15	1.02	1.18
16	1.04	1.21
17	1.04	1.21
18	1.04	1.21
19	1.04	1.24
20	1.04	1.26
21	0.99	1.27
22	0.92	1.27
23	0.87	1.27
24	0.81	1.30
25	0.78	1.30
26	0.76	1.37
27	0.73	1.42
28	0.73	1.47
29	0.73	1.54
30	0.73	1.58
31	0.77	1.61
32	0.78	1.66
33	0.81	1.73
34	0.87	1.83
35	0.90	1.91
36	0.96	2.03
37	1.04	2.19
38	1.10	2.35
39	1.18	2.54
40	1.30	2.78
41	1.41	3.04
42	1.56	3.34
43	1.70	3.70
44	1.89	4.07
45	2.09	4.51
46	2.35	4.95
47	2.63	5.46
48	2.92	6.01
49	3.25	6.60
50	3.64	7.26
51	4.08	7.92
52	4.57	8.64
53	5.13	9.43
54	5.73	10.23
55	6.46	11.04
56	7.23	11.91
57	8.09	12.82
58	9.03	13.73
59	10.09	14.70
60	11.25	15.69
61	12.54	16.68
62	13.97	17.69
63	11.99	18.71
64	6.54	10.86

Premiums include stamp duty. Rounding variations may occur when calculating premiums.

Let us help you

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. We understand 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 recently introduced an 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 of your type of cover and any claim requirements, and allows you to lodge your claim electronically via **eClaims**.

eClaims allows you to lodge and monitor your claim online. It also provides 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 process and reduce the time taken to finalise your claim. You can always contact us on **13 11 84** - We're here to help at no cost to you!

Sunsuper Insurance claims guide

Want to know more about:

- Making a claim
- How a claim is assessed

We have developed a *guide* to help step you through the various claims processes. Visit [sunsuper.com.au/makeclaim](https://www.sunsuper.com.au/makeclaim) 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.

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 will 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/s,
- decision by the Sunsuper Trustee, and
- 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 formal 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 disablement or Terminal Illness claim. Please note that there is a 3-month Waiting Period before a Total & Permanent Disability claim becomes assessable, and a 90-day 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.

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.

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 can either:

- lodge a complaint in writing, with Sunsuper. Your complaint will be investigated, and if the decision to decline your claim is confirmed by the Fund, you can refer your complaint to the Australian Financial Complaints Authority (AFCA), or
- lodge a complaint directly with AFCA, however AFCA may refer your complaint back to Sunsuper.

There are time limits on when you can make a complaint to AFCA about a Total & Permanent Disability claim. Call AFCA on 1800 931 678 or visit their website www.afca.org.au for more information about these time limits.

AFCA's contact details are as follows:

Australian Financial Complaints Authority
GPO Box 3 Melbourne VIC 3001
Call: 1800 931 678
Email: info@afca.org.au
Web: www.afca.org.au

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.

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.

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 don't need to panic and you don't need to be rushed into a course of action.

If you need some financial advice and help deciding what you should do in the short-term as well as a long term plan, please don't hesitate to contact one of our dedicated qualified financial planners.

Call **13 11 84** to speak to one of our phone based qualified financial planners¹ who can give you simple advice about your Sunsuper account at no additional cost. For more comprehensive advice, we may also refer you to an accredited external financial planner². Advice of this nature may incur a fee.²

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 planners for our members. Sunsuper does not receive or pay any referral fees to these planners. Each of these planners will explain to you how their advice fees are determined. The accredited external financial planners are not employed by Sunsuper, and Sunsuper is not responsible for the advice provided by these planners.

Term	Definition
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.
Activities	<p>The definition of Activities means:</p> <ul style="list-style-type: none"> (i) Mobility: The ability to: <ul style="list-style-type: none"> • Bend, kneel or squat to pick something up from the floor and straighten up again and get into and out of a standard sedan car; or • To walk more than 200 metres at normal pace on a level surface without stopping due to breathlessness as a result of a medical condition or angina. (ii) Hearing: the ability to hear such that an audiologist can certify that the Insured Member has a hearing ability of less than or equal to 40db in the better ear (averaged over the frequencies 0.5, 1, 2 and 3Khz) in an audiometry test. (iii) Communicating through speech: The ability to speak with sufficient clarity to be able to hold a conversation in a quiet room in the Insured Member's first language. This involves understanding a simple message and relaying that message to another person. (iv) Seeing: the ability to see even when tested with visual aids, such that an ophthalmologist can certify that the Insured Member's visual acuity is better than 6/60 in the better eye or a visual field of greater than 10 degrees (i.e. not legally blind). (v) Lifting and carrying: The ability to lift (from bench height) and carry a 5kg weight a distance of ten (10) metres and place the item back down at bench height. (vi) Manual dexterity: The ability to use: <ul style="list-style-type: none"> • at least one hand to pick up and/or manipulate small objects such as picking up a coin from a desk, using cutlery or fastening buttons; or • a pen or pencil or keyboard to write a short note that can be understood by another person. <p>For the purpose of assessing a Total & Permanent Disability claim, where you are unable to perform one or more of the Activities upon commencement of cover, that Activity shall not be taken into consideration for Total & Permanent Disability assessment.</p>
Aids and adaptations	Aids and adaptations means equipment or fixtures to assist you without the assistance of another person to carry out Activities .
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"> (i) actively performing or capable of performing all of your normal duties, without limitation or restriction due to sickness or injury, and where working you are working normal hours on the day cover is to commence, and (ii) in the insurer's opinion, not restricted by sickness or injury 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 (iii) 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>
Benefit Period	Benefit Period means the maximum period of time for which benefits will be paid for any one period of Total Disability or one period of Total and 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 Disablement - Income Protection	<p>The Date of Disablement is where you are:</p> <ul style="list-style-type: none"> (i) working and then cease work as a result of a illness or injury, the last day you worked provided this was as a result of a sickness or injury and which has been certified by a Medical Practitioner, or (ii) on Approved Leave and suffer a illness or injury which prevents you from returning to work as a result of that sickness or injury, the Date of Disablement will be determined based on the certification provided by the Medical Practitioner as the date on which you became disabled.

Term	Definition								
Date of Disablement\ Disability	The Date of Disablement depends on your employment status and the type of injury or illness that caused your permanent disablement:								
	<table border="1"> <thead> <tr> <th>Claiming under component</th> <th>Date of Disablement</th> </tr> </thead> <tbody> <tr> <td>Loss of limbs and/ or sight</td> <td>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 that is 3 months after loss of Cognitive Function.</td> </tr> <tr> <td>Unable to do a suited occupation ever again</td> <td>The first day of the 3 month waiting period being the day you permanently ceased all work solely as a result of the injury or illness, or where you are unemployed the date you are medically certified by a Medical Practitioner that the injury or illness is preventing you from being able to work, even though work may not be available at that time.</td> </tr> <tr> <td>Unable to do basic activities associated with work ever again</td> <td>The first day of the 3 month waiting period being the date on which you, as a result of an injury or illness, are unable to perform at least three Activities, and are not able ever again to perform these three Activities and medical certification has been provided with respect of that date.</td> </tr> </tbody> </table>	Claiming under component	Date of Disablement	Loss of limbs and/ or sight	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 that is 3 months after loss of Cognitive Function .	Unable to do a suited occupation ever again	The first day of the 3 month waiting period being the day you permanently ceased all work solely as a result of the injury or illness, or where you are unemployed the date you are medically certified by a Medical Practitioner that the injury or illness is preventing you from being able to work, even though work may not be available at that time.	Unable to do basic activities associated with work ever again	The first day of the 3 month waiting period being the date on which you, as a result of an injury or illness, are unable to perform at least three Activities , and are not able ever again to perform these three Activities and medical certification has been provided with respect of that date.
	Claiming under component	Date of Disablement							
	Loss of limbs and/ or sight	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 that is 3 months after loss of Cognitive Function .							
Unable to do a suited occupation ever again	The first day of the 3 month waiting period being the day you permanently ceased all work solely as a result of the injury or illness, or where you are unemployed the date you are medically certified by a Medical Practitioner that the injury or illness is preventing you from being able to work, even though work may not be available at that time.								
Unable to do basic activities associated with work ever again	The first day of the 3 month waiting period being the date on which you, as a result of an injury or illness, are unable to perform at least three Activities , and are not able ever again to perform these three Activities and medical certification has been provided with respect of that date.								
Eligible contributions	Eligible contributions include Superannuation Guarantee, additional Employer contributions, personal contributions (including voluntary contributions and contributions made by a spouse) and rollovers and automatic transfers from other superannuation 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 have been on employer Approved Leave for less than 2 years with an Australian employer, or (iii) you are working for an overseas employer at least 15 hours per week. 								
Limited Cover	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. "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 .								
Medical Practitioner	Medical Practitioner means a legally qualified and registered doctor of medicine. It does not include the Employer, the Insured Member, an Employee or the Insured Member's immediate family or business partner/s.								
Permanent Employment	Permanent Employment means you are employed on a single and ongoing contract of indefinite duration or a fixed term no less than six months and you are provided paid annual leave, sick leave and long service leave. You must be performing identifiable duties and work a regular number of hours each week.								
Permanent Incapacity	Permanent Incapacity is defined in the Superannuation Industry (Supervision) Regulations 1994 (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.								
Pre-Disability Salary	Pre-Disability Salary means the higher of the gross monthly salary you earned at the Date of Disablement or an average of the gross monthly income earned by you over the 3 months immediately prior to the Date of Disablement . If you are a casual or contract employee, the Pre-Disability Salary means the average of the gross monthly Salary earned over the 12 months (or if Employed less than 12 months, over your period of employment) immediately prior to the Date of Disablement .								
Salary	Salary means your pre-tax salary derived from your occupation, less any expenses incurred in deriving that income. Unless otherwise agreed with the insurer, Salary 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. Proof of Salary is also required at the time of a benefit claim. For Income Protection claims, Salary is determined at the first day of absence from your employment due to the injury or sickness resulting in Total Disability. The amount of benefit will depend on the cover most recently accepted by the insurer.								

Term	Definition
Terminal Illness	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 12 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. The benefit the insurance policy pays out is termed as a Terminal Illness benefit.
Terminal Medical Condition	Terminal Medical Condition is a condition of release under the Superannuation Industry (Supervision) Regulations 1994 (Cth). For more information refer to the <i>Sunsuper for life guide</i> .
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"> (i) approved by your employer or authorised by: <ul style="list-style-type: none"> a. the Commonwealth, a State or a Territory, or b. 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. (ii) in relation to which you have a statutory or contractual right to resume employment at the end of the leave, and (iii) in relation to which you are not being paid by the employer. <p>Unpaid Leave excludes leave:</p> <ul style="list-style-type: none"> (i) that is due to your illness or injury, or (ii) during which you receive or are entitled to receive: <ul style="list-style-type: none"> a. income benefits, or b. disability income benefits, or c. social security sickness benefits, or (iii) due to strike or lockout.
Waiting Period	The Waiting Period is the number of continuous days which you must remain off work due to an illness or injury before the 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 Medical Practitioner .
Years of Future Membership	Years of Future Membership is the period from 1 July or date of commencement (whichever is more recent) up to age 67 measured in years and complete months, unless we advise you otherwise.

It is important that you understand the Total & Permanent Disability 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 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 & 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 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 insurer will consider all your education, training or experience up to the end of any waiting period (as set out in definition).

Working on a part-time basis - your ability to participate in part-time work, regular casual work or lower paid work after you become injured or ill may disqualify you from receiving a Total & Permanent Disability benefit payment 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.

Unemployed at the date of Disability - if you were unemployed prior to the date of Disability, you may be considered totally & permanently disabled if,

- you suffer the loss of limbs and/or sight, or
- you suffer the loss of intellectual capacity that requires you to be under continuous care, or
- you are unable to do basic activities associated with work ever again - this means you are permanently incapacitated due to injury or illness and unable to perform three activities of daily work (mobility, hearing, communicating through speech, seeing, lifting and carrying, manual dexterity).

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

Total & Permanent Disability means:

Loss of limbs and/or sight

You have suffered the total and irrecoverable loss of:

- (i) the use of two limbs; or
- (ii) the use of the sight of both eyes; or
- (iii) the use of one limb and the sight of one eye; or
- (iv) **Cognitive Function**.

(where limb is defined as the whole hand or the whole foot); and

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

Unable to do a suited occupation ever again

Where, at the **Date of Disability**, you were **Employed**:

- (i) you are unable to perform your occupational duties based on the work performed at the time of disability by reason of an illness or injury for a period of three consecutive months as a result of the illness or injury, and
- (ii) you are under the care of, and following the advice of, a registered **Medical Practitioner**, and
- (iii) the insurer, after considering all relevant evidence which is reasonably available, then determines you will be unable ever again to be gainfully employed in your usual occupation, or any other occupation for which you are reasonably suited by education, training or experience;

or

Unable to do basic activities associated with work ever again

Where, at the **Date of Disability**, you were not **Employed**:

- (i) you have not, as a result of an illness or injury, been able to perform at least three **Activities** for a period of three consecutive months after the occurrence of the illness or injury; and
- (ii) you are under the care of, and following the advice of, a registered **Medical Practitioner**, and
- (iii) the insurer, after considering all relevant evidence which is reasonably available, then determines that it is likely, due to the illness or injury, that you are totally and permanently unable to perform (with **Aids and adaptations**) at least three **Activities**; and
- (iv) 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.

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.

Unable to work - unable to work at least 20% of your occupational tasks assessment will be based on your inability to perform at least one of the major duties of your usual occupation. A major duty is any work task which accounts for 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 may be eligible to claim a partial disability benefit.

You may be eligible for a partial disability benefit - where you have been 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 7 out of the first 10 days of your waiting period to be eligible for a partial disability benefit.

If you are partially disabled, the amount of your benefit may change each month depending on the actual income you earned during that month.

Occupational rehabilitation support - where appropriate, we 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 will 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 & Permanent Disability benefit from Sunsuper or any other superannuation fund.

Total Disability or Totally Disabled

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

- (i) 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 illness or injury, and
- (ii) under the regular care of and complying with the reasonable advice given by a registered **Medical Practitioner** in respect of that illness or injury, and
- (iii) 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 working an average of 15 hours or more per week in the 3 months immediately prior to going on **Unpaid Leave**

Partial Disability or Partially Disabled

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

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



Contacting us is easy

- ☞ sunsuper.com.au/contact-us
- ☎ 13 11 84 (+61)7 3121 0700 when overseas)
- ✉ GPO Box 2924 Brisbane QLD 4001

Need assistance? Call our translation service on 13 14 50 and follow the prompt.

Hai bisogno di assistenza? Chiama il nostro servizio di interpretariato telefonico al 13 14 50, e su richiesta conferma la tua lingua "italiano".

如需協助，請撥打13 14 50 使用我們的翻譯服務，並在聽到提示後說普通話。

Cần sự trợ giúp - gọi điện cho dịch vụ thông dịch của chúng tôi số 13 14 50 - và nói "Vietnamese" (Tiếng Việt) ở câu nhắc

통역이 필요하세요? 13 14 50으로 전화하셔서 '한국어' 혹은 'Korean' 이라고 말하세요.

لصحتنا ودعم اسم المادى لى لى ت ج ت ح ا ا ذ ل 131450 " لوقب ة ي ب ر ع ل ا ر ا ت خ ا و ، ر ا ي ت خ ا ل ا ط ا ط ج ل د ن ع ل ل ع ة ح ا ت ا ل ا ة م ج ر ت ل ل ا ة م ن غ ب

This document is prepared and issued by Sunsuper Pty Ltd, the issuer and Trustee of the Sunsuper Superannuation Fund (referred to as "the Fund" or "Sunsuper"):

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For further information on the ratings methodology used and awards refer to sunsuper.com.au/ratingsagencies

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