

Super Savings – Corporate Insurance Guide

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MetLife Superannuation Plan



Contents

Insurance in your super	2
1. Standard Death and Total & Permanent Disability cover	3
Permanent employees	3
Casual employees	4
Important eligibility terms and conditions	5
Additional cover	8
Conditions & exclusions	9
Other important information	11
Overseas travel and approved leave	13
2. Premiums	14
Facts about making a claim	16
3. Definitions - Total & Permanent Disability	18
4. Definitions - general terms	19

Your employer MetLife has chosen Australian Retirement Trust to provide a specialised super plan for you.

MetLife 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 Corporate Insurance Guide

This Super Savings - Corporate Insurance Guide (Corporate Insurance Guide) will provide you with important information to help you better understand your super. Make sure you read this Corporate 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 MetLife Insurance Limited ABN 75 004 274 882, AFSL 238 096 (MetLife) to the Trustee of Australian Retirement Trust. In the event of a dispute the policy will override the information in the Super Savings - Corporate Product Disclosure Statement for Accumulation Account (PDS) and this Corporate Insurance Guide.

In conjunction with either a disability claim application or an application for Additional cover, an Australian Retirement Trust 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.

More information

Visit **portal.australianretirementtrust.com.au/metlifeau** for dedicated plan information and resources to help you sort your super.

Important information

This is the Super Savings – Corporate Insurance Guide (Corporate Insurance Guide). The Corporate Insurance Guide contains information about the insurance in your Super Savings – Corporate plan, including insurance terms and conditions.

The information in this Corporate Insurance Guide forms part of the Super Savings – Corporate Product Disclosure Statement for Accumulation Account (PDS) issued on 1 July 2023. The PDS references important information contained in this Corporate Insurance Guide. This Corporate Insurance Guide may reference important information contained in the Super Savings Accumulation Guide and Super Savings Investment Guide. The PDS, this Corporate Insurance Guide, the Super Savings Accumulation Guide and the Super Savings Investment Guide should be read in their entirety before making a decision to acquire or continue to hold an interest in Australian Retirement Trust. Super Savings – Corporate Accumulation accounts are products issued within the public offer division of Australian Retirement Trust. Any references to Australian Retirement Trust contained in this Corporate Insurance Guide are references to the public offer division of Australian Retirement Trust.

Changes to insurance cover from time to time

Please note that our insurance offering changes from time to time. Different features, benefits and terms may apply to members who joined before the Corporate Insurance Guide's issue date. Contact us for a copy of the Corporate Insurance Guide that applied when you became a member, and any notifications of insurance changes that we have previously sent you.

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 Australian Retirement Trust Pty Ltd provides and will help you decide whether to use these services. Visit australian retirement trust.com.au/fsg or contact us for a copy.

Protecting your privacy

Australian Retirement Trust respects the privacy of the information you give us. If you require a copy of our Privacy Policy visit australian retirement trust.com.au/privacy or contact us

Defined Term:

There are a number of terms in this Corporate Insurance Guide that are defined and have a particular meaning when used in this Corporate Insurance Guide. Refer to the end of this Corporate 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 Corporate 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 Corporate 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 Disability 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.		
Employees can choose how much Death and Total & Permanent Disability cover suits their needs	Standard Death and Total & Permanent Disability cover is automatically provided to eligible members, unless you decide to opt-out of cover. The following Standard insurance cover is available:		
suits their fieeus	Permanent employees		
	Death cover: 8 x Fixed Annual Remuneration		
	Total & Permanent Disability cover : 5 x Fixed Annual Remuneration		
	Casual employees		
	Death and Total & Permanent Disability cover: \$160,000		
Terminal Illness cover	This forms part of the Death cover and provides a lump sum benefit where a member is diagnosed as having a <i>Terminal Illness</i> .		
Eligible age for automatic	Death – age 15 to 64		
Standard cover	Total & Permanent Disability – age 15 to 64		
Age when Standard cover	Death – age 65		
ceases	Total & Permanent Disability – age 65		
Automatic Acceptance Limits (AAL)	An AAL is the maximum amount of Standard cover provided to eligible employees without any medical evidence being required.		
	Death – \$1,500,000 for Permanent employees		
	Total & Permanent Disability – \$1,500,000 for Permanent employees		
	For information on the maximum amount of Standard cover provided to eligible Casual employees please refer to the <i>Casual employees</i> section in this Corporate Insurance Guide.		
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 an existing insurance policy or superannuation fund and provide equivalent benefits on Australian Retirement Trust's terms and conditions.		
	You can apply to transfer Death and Total & Permanent Disability cover up to \$2,000,000.		
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. Additional conditions may apply where your Employer pays for all or part of your premium.		
Financial advice ¹	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 Australian Retirement Trust first and we will guide you through the process.		
Binding Nominations vs. Preferred Beneficiaries	You can make a binding death benefit nomination or you can nominate your preferred beneficiaries. Refer to the Super Savings Accumulation Guide for more information.		
Who pays for your insurance premiums?	The cost of the Standard Death and Total & Permanent Disability cover is met by your employer. The cost of any Additional cover held is met by the employee and deducted from your Super Savings - Corporate Accumulation account.		

¹ Employees in the Australian Retirement Trust group provide advice to members and employers as representatives of Sunsuper Financial Services Pty Ltd (ABN 50 087 154 818 AFSL No. 227867) (SFS), wholly owned by Australian Retirement Trust. SFS is a separate legal entity responsible for the financial services it provides. Eligibility conditions apply. Refer to the Financial Services Guide at **australianretirementtrust.com.au/fsg** for more information.

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 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. Australian Retirement Trust 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

Important eligibility criteria

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, rules around when cover can be automatically provided changed. Some restrictions may also apply if you leave your employer or redirect your Superannuation Guarantee contributions.

Who pays for your insurance?

An important feature of this plan is that MetLife pays the premium for your Standard Death and Total & Permanent Disability cover. Premiums for Additional cover (if any) are automatically deducted from your account each month.

Premiums paid by your employer are included in the assessment against the concessional contributions cap. Breaching this cap may have tax implications for you. Refer to the Super Savings Accumulation Guide for more information.

1. Standard Death and Total & Permanent Disability cover

Permanent employees

If you are an eligible employee you will automatically receive default Death and Total & Permanent Disability cover up to a maximum of \$1,500,000, unless you decide to opt-out of cover.

Permanent employees are provided the following insurance cover:

Death cover:

8 x Fixed Annual Remuneration

Total & Permanent Disability cover:

5 x Fixed Annual Remuneration

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

Your cover will normally start when you join your employer (subject to meeting the other eligibility conditions).

The amount of insurance cover provided is recalculated each 1 July based upon your updated "Fixed Annual Remuneration" (*FAR*), unless we advise you otherwise. Your annual premium is based on this cover and remains unchanged until 1 July the next year. In the event of a claim, your insurance cover will be calculated using your *FAR* at the last review date.

FAR is the amount advised to Australian Retirement Trust by MetLife on the previous 1 July or on date of commencement (whichever is more recent).

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

Special Conditions

If you move from *Permanent employment* to *Casual employment* you will retain your level of insurance cover as fixed cover. This means that cover will not be recalculated each year based on the formula but will remain fixed. Your premium will generally increase as you get older.

MetLife will continue to pay for your Standard cover as a Casual employee (refer to the *Casual employees* section of this Corporate Insurance Guide). Any amount in excess of the Standard cover amount for Casual employees will be provided as Additional cover and the premiums for this cover will be deducted from your Super Savings - Corporate Accumulation account.

An example of Standard Death and Total & Permanent Disability cover

James is 29 years old when he joins the MetLife Superannuation Plan. He is a Permanent employee on a FAR of \$50,000 p.a. James is eligible for Standard Death and Total & Permanent Disability cover.

Death cover

8 x Fixed Annual Remuneration	Death cover
8 X \$50,000	\$400,000

Total & Permanent Disability cover

5 x Fixed Annual Remuneration	Total & Permanent Disability cover
5 X \$50,000	\$250,000

The cost of the Standard Death and Total & Permanent Disability cover is met by your employer. Premiums for partial weeks are not pro-rated.

For full details on Death and Total & Permanent Disability premium rates, refer to the *Premiums* section of this Corporate Insurance Guide.

Need to know your level of cover

Just log into **australianretirementtrust.com.au/ memberonline**. 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.

Casual employees

Standard Death and Total & Permanent Disability cover is provided on a fixed cover basis. This means your cover stays the same, but your weekly premium generally increases as you get older.

Standard Death and Total & Permanent Disability cover is available until age 65.

Your cover will normally start when you join your employer (subject to meeting the other eligibility conditions).

If you are an eligible employee, you will automatically receive Standard Death and Total & Permanent Disability cover of \$160,000, unless you decide to opt-out of cover.

Your premium is calculated when cover commences and is recalculated on 1 July each year.

If you do not want to have Standard cover, or if you just want Standard Death cover please let us know.

Weekly premium

The cost of the Standard Death and Total & Permanent Disability cover is met by your employer. Premiums for partial weeks are not pro-rated.

For full details on Death and Total & Permanent Disability premium rates, refer to the *Premiums* section of this Corporate Insurance Guide.

Special Conditions applicable to casual employees

If you move from *Casual employment* to *Permanent employment* your Standard insurance cover will be replaced. Refer to *Standard Death and Total & Permanent Disability insurance cover for Permanent employees* for more details. Any Additional cover may also change.

You must be in *Active Employment* at the date of transfer otherwise *Limited Cover* will apply until you have been in *Active Employment* for 5 consecutive days.

Important eligibility terms and conditions

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

You are eligible for automatic Standard Death and Total & Permanent Disability cover up to the AAL if:

- · you are aged under 65,
- · you join the MetLife Superannuation Plan,
- your employer is making Superannuation Guarantee (SG) contributions to Super Savings – Corporate Accumulation account 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 a working visa which enables you to work in Australia, unless otherwise agreed by the insurer.

You are not eligible for Standard cover if:

- you are aged under 15,
- 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 Australian Retirement Trust or any other fund or insurer, or
- you have previously cancelled the Plan's Standard insurance cover.

If you **join the MetLife Superannuation Plan outside of 120 days of joining your employer** you will be required to be Underwritten for cover.

If you are not eligible to automatically receive Standard cover, you can apply for Additional insurance at any time. Refer to the *Additional cover* section of this Corporate Insurance Guide.

For more information refer to the *Definitions* section of this Corporate Insurance Guide, this includes the definition of *Limited Cover* and *Active Employment*.

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 Corporate Insurance Guide.

When does my 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 ¹
Standard Death and Total & Permanent Disability cover	You elect to join the Plan.	Cover starts when you join your employer.

^{1.} If you join the MetLife Superannuation Plan outside of 120 days of joining your employer you will be required to be Underwritten for cover.

Limited Cover will apply in the following circumstances, if

 you are not Actively Employed on the date cover starts, your Standard cover will be provided as Limited Cover until you have been Actively Employed for 30 consecutive days

If you **join the MetLife Superannuation Plan outside of 120 days of joining your employer** you will be required to be Underwritten for cover.

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

If you're not eligible to 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. This form is available at portal.australianretirementtrust.com.au/metlifeau

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

If you don't want 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 – Corporate Accumulation account each month. The cancellation or reduction will be effective from the date your instruction is received by Australian Retirement Trust.

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 & Permanent Disability cover?

The intention of Total & Permanent Disability insurance cover is to provide a payment should you suffer an injury or illness that disables you to a point that permanently prevents you from working to retirement age. This cover is given to you automatically if you join the plan within 120 days of joining your employer (subject to meeting eligibility criteria). You will need to be medically assessed to determine if you are disabled. Some extra terms and conditions apply.

Total & Permanent Disability insurance cover is available to you regardless of your working hours or the basis on which you are employed. Some limitations may apply if working overseas. Whether you are employed on a permanent, contract or casual basis you will be provided with cover if you are eligible when joining the MetLife Superannuation Plan. You will be provided with cover automatically when you join the Plan.

In the event of a claim your capacity to work is assessed by the Plan'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.

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 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 – Corporate Accumulation account balance.

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

Payment of a Total & Permanent Disability benefit will reduce the Death cover by the amount paid as a Total & Permanent Disability benefit. Any Death cover in excess of the Total & Permanent Disability cover will still continue in your Super Savings – Corporate Accumulation account while you continue to pay premiums and have an account.

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

What happens in the event of a specified Medical Condition?

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

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

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

For more details refer to the *Definitions* section for *Medical Conditions*, and *Total & Permanent Disability – Suffering a specifically defined medical condition and permanently unlikely to work because of that condition.*

Payment of a total and permanent disability benefit

If you are eligible to receive a Total & Permanent Disability benefit, the insurer will pay the benefit (less any applicable tax) to your Super Savings – Corporate Accumulation account where it will be invested in the Cash investment option.

We will then contact you for payment instructions. Should we not receive payment instructions within 28 days, the payment will be invested as per your current investment strategy.

When would a health questionnaire be required?

A health questionnaire will be required if:

- you are a Permanent employee and your Standard cover is over \$1,500,000,
- you do not join Australian Retirement Trust within
 120 days of being employed by MetLife,
- you elect to direct your Superannuation Guarantee contributions to Australian Retirement Trust outside of 120 days of being employed by MetLife,
- you have previously cancelled your cover and want to reapply, or
- you choose to apply for Additional cover.

In addition, a full health assessment may also be required if requested by the insurer.

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 cover up to \$2,000,000 to the MetLife Superannuation Plan.

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

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 the Plan's insurer, before transferring cover.

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

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 or reinstated by the insurer. This restriction applies only to the amount above any Standard insurance cover you may have been automatically entitled to on joining Australian Retirement Trust.

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

You can apply for cover through portal.australianretirementtrust.com.au/metlifeau

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

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.

If the insurer offers special terms, conditions, restrictions, exclusions or premium loading, you will be required to accept these terms and cover will commence from the date your acceptance is received, provided that this acceptance is within 30 days of the date of insurers offer.

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

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 for a death or disability claim where a benefit exclusion applies (refer to the *Conditions & exclusions* section in this Corporate Insurance Guide).

Death or Total and Permanent Disablement must occur within 365 days of the Accident that occurs during the Interim Accident cover period.

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. Australian Retirement Trust reserves the right to limit the amount of Additional cover provided.

Types of cover available

The types of cover available are:

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

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 Unlimited (this forms part of the Death cover)
- Total & Permanent Disability cover \$5 million

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

Your Additional Death and/or Total & Permanent Disability cover will generally start from the date the insurer approves your application. However 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.

If you accept the terms of this Special Acceptance offer (if applicable), your Additional Death and/or Total & Permanent Disability cover will start on the date you accept the offer.

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

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

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

(Additional Death and TPD¹ cover / \$10,000) x Death and TPD¹ premium / 52

(\$200,000 / \$10,000) x \$3.18 / 52 = \$1.23 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.

The cost of the Standard Death and Total & Permanent Disability cover is met by your employer. The cost of any Additional cover held is deducted from your Super Savings – Corporate Accumulation account. Premiums for partial weeks are not pro-rated.

For full details on Death and Total & Permanent Disability premium rates, refer to the *Premiums* section of this Corporate Insurance Guide.

Conditions & exclusions

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

Cover will stop when:

- · you turn 65 for Standard Death cover,
- you turn 65 for Standard Total & Permanent Disability cover,
- you turn 65 for Additional Death cover,
- you turn 65 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 your Super Savings Corporate Accumulation account,
- the policy issued to the Trustee is cancelled or terminated for any reason,
- you start duty in the military services of any country (except the Australian Armed Forces Reserve as long as you are not on active duty outside Australia),
- you are employed on a Casual Basis and 60
 consecutive days has passed since you were last
 At Work actively performing all the duties of his or her
 occupation with MetLife,
- you are not an Australian Resident, and leave Australia.
 Cover will be provided for a period of up to 90 days from the date of departure,
- Contribution Inactivity your Super Savings –
 Corporate Accumulation 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 Savings – Corporate Accumulation 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 **australianretirementtrust.com.au/keep-my-insurance**. 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 level of cover you had as at the date of the automatic cancellation from the date your written request for reinstatement is received.

Reinstatement of cover within 60 days:

If you are not *Actively Employed* on the date the cover restarts, any cover that is reinstated will be provided as *Limited Cover* until you have been *Actively Employed* for 30 consecutive days.

Reinstatement of cover outside 60 days:

If your cover restarts more than 60 days after cover has ceased, any cover that is reinstated will be provided as *Limited Cover* for 12 months as long as you are *Actively Employed* for 30-consecutive days immediately prior to the end of the 12-month period, otherwise *Limited Cover* continues until you are *Actively Employed* for 30 consecutive days after the end of the 12-month period.

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?

In summary, Terminal Illness means that you are suffering from a sickness or injury that is likely to result in your death within 24 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 two *Medical Practitioners* (one being a specialist physician in the particular medical field), 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.

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

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

- suicide or intentional self-inflicted injury

Within 12 months of:

- the start or recommencement 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 Disablement 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 Corporate Insurance Guide.

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 insurer accepts or rejects your application. 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 – Corporate Accumulation account to pay insurance premiums. If you do not have enough money in your Super Savings – Corporate Accumulation 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 Trustee of Australian Retirement Trust is required to pay your Death benefit to your beneficiaries, or where there are no eligible beneficiaries, to any person who has a fair claim. For your Super Savings – Corporate Accumulation 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 to the Super Savings Accumulation 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, any special arrangements with MetLife will stop on the last day of the period for which contributions were made. Subject to the warning below any Death only or Death and Total & Permanent Disability cover you had immediately prior to redirecting your SG contributions will continue as fixed cover in a Super Savings Accumulation account.

However, your administration fees and insurance premiums may alter from the amounts you were paying in the MetLife Superannuation Plan and will become payable in full by you.

To be eligible to continue your cover in a Super Savings Accumulation account, 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 Super Savings Accumulation account, your cover will be replaced by the higher of your existing Super Savings Accumulation account cover and the cover provided under your Super Savings – Corporate Accumulation account. The replacement of cover will take effect the date your SG contributions are redirected.

Visit **australianretirementtrust.com.au/pds** for a copy of the Super Savings PDS for Accumulation Account.

Insurance cover for Super Savings Accumulation accounts is provided through group life policies issued by AIA Australia Limited ABN 79 004 837 861 AFSL No. 230043 to the Trustee of Australian Retirement Trust.

Warning: As a result of legislation effective 1 April 2020, Australian Retirement Trust will cancel any insurance cover held for members who redirect their SG contributions and are under age 25 or have a balance below \$6,000. It's important you know these changes may impact your cover. Should you wish to retain your cover you should advise us in writing or visit **australianretirementtrust. com.au/keep-my-insurance** prior to redirecting your SG contributions.

What happens if I leave my employer?

When we are told you have left your employer your membership in the MetLife Superannuation Plan will cease as well as any special arrangements. Your membership will be transferred to a Super Savings Accumulation account.

Shortly after Australian Retirement Trust 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 MetLife 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.
- Subject to the warning below any Death and Total & Permanent Disability cover you had at the time of leaving your employer will continue in a Super Savings Accumulation account 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 until you have been At Work for 30 consecutive days.
- If you already have a Super Savings Accumulation account, your cover will be replaced by the higher of your existing Super Savings Accumulation account cover and the cover provided under your Super Savings – Corporate Accumulation 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 Super Savings Accumulation 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.

Warning: As a result of legislation effective 1 April 2020, Australian Retirement Trust will cancel any insurance cover held for members who cease employment and are under age 25 or have a balance below \$6,000. It's important you know how these changes may impact your cover. Should you wish to reinstate your cover in a Super Savings Accumulation account, you should advise us in writing or complete the Insurance transfer application form, available at **australianretirementtrust.com.au/insurance-forms.**

To be eligible to continue cover you must ensure regular contributions will be paid into your Super Savings Accumulation account.

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

Visit **australianretirementtrust.com.au/pds** for a copy of the Super Savings PDS for Accumulation Account.

Insurance cover for Super Savings Accumulation accounts is provided through group life policies issued by AIA Australia Limited ABN 79 004 837 861 AFSL No. 230043 to the Trustee of Australian Retirement Trust.

What is a Continuation Option?

As the insurer to the MetLife Superannuation Plan, MetLife Insurance Limited ABN 75 004 274 882 AFSL No. 238096 offers a continuation option if you wish to continue your Death cover when you leave employment with MetLife and you are aged less than 65 years. Some criteria applies and the continuation option is provided through an individual policy with the Insurer. You should consider the relevant Product Disclosure Statement available from the Insurer.

As long as you are not leaving employment due to ill-health or have not received or become entitled to receive a Total & Permanent Disability benefit, you may effect an individual policy with the insurer within 60 days of leaving employment subject to terms and conditions imposed by the insurer.

You will be provided with details of how to effect a continuation option by your Employer and it will be your responsibility to apply for the continuation option. If you do effect a continuation option with the Insurer, you must advise us in writing. If you do not effect a continuation option, your Death and Total & Permanent Disability cover will continue in a Super Savings Accumulation account.

Note: You may not continue your Death and Total & Permanent Disability cover in a Super Savings Accumulation account if you effect a continuation option with the Insurer.

Your duty to take reasonable care not to make a representation

About your duty

When you apply for life insurance as a member of Australian Retirement Trust, the insurer may conduct a process called underwriting. It's how the insurer decides whether it will cover you, and if so on what terms and at what cost. If your application is underwritten, you will be asked questions which the insurer needs to know the answers to. These will be about your personal circumstances and may include questions about your health and medical history, occupation, income, lifestyle, pastimes, and current and past insurance. The information you provide in response to the questions is vital to the insurer's decision.

The duty to take reasonable care

When applying for insurance which is to be underwritten, you have a legal duty to take reasonable care not to make a misrepresentation before your application is accepted by the insurer. A misrepresentation is a false answer, an answer that is only partially true, or an answer which does not fairly reflect the truth. This duty also applies when extending or making changes to existing insurance, and reinstating insurance.

If you do not meet your duty

If you do not meet your legal duty, this can have serious impacts on your insurance. Your cover could be avoided (treated as if it never existed), or its terms may be changed. This may also result in a claim being declined or a benefit being reduced. Please note that there may be circumstances where the insurer later investigates whether the information you provided was true. For example, the insurer may do this when a claim is made.

Guidance for answering questions

When answering questions as part of an application for insurance cover, you should:

- Think carefully about each question before you answer.
 If you are unsure of the meaning of any question, please ask us or the insurer before you respond.
- Answer every question.
- · Answer truthfully, accurately and completely.
- If you are unsure about whether you should include information or not, you should include it.
- Review your application carefully before it is submitted.
 If someone else helped prepare your application (for
 example, your adviser), you should check every answer
 (and if necessary, make any corrections) before the
 application is submitted.
- You must not assume that Australian Retirement Trust or the insurer will contact your doctor for any medical information.

Changes before your cover starts

Before your application is accepted, the insurer may ask about any changes that mean you would now answer the questions differently. As any changes might require further assessment or investigation, it could save time if you let us or the insurer know about any changes when they happen.

If you need help

It's important that you understand this information and the questions that you are asked. Ask us or the insurer for help if you have difficulty understanding the process of applying for insurance or answering our or the insurer's questions. If you're having difficulty due to a disability, understanding English or for any other reason, we are here to help and can provide additional support for anyone who might need it.

What can the insurer do if the duty is not met?

If you do not take reasonable care not to make a misrepresentation, there are different remedies that may be available to the insurer. These are set out in the *Insurance Contracts Act 1984* (Cth). These are intended to put the insurer in the position they would have been in if the duty had been met.

For example, the insurer may:

- Avoid the cover (treat it as if it never existed),
- · vary the amount of the cover, or
- · vary the terms of the cover.

Whether the insurer can exercise one of these remedies depends on a number of factors, including:

- Whether you took reasonable care not to make a misrepresentation (this depends on all of the relevant circumstances),
- what the insurer would have done if the duty had been met – for example, whether they would have offered cover, and if so, on what terms,
- whether the misrepresentation was fraudulent; and
- in some cases, how long it has been since the cover started.

Before the insurer exercises any of these remedies, they will explain their reasons, how to respond and provide further information, including what you can do if you disagree.

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.

Speak to your adviser to get the advice you need. If you don't have your own personal financial adviser and you need advice about your Super Savings – Corporate Accumulation account, Australian Retirement Trust also has qualified financial advisers¹ who can help you over the phone with simple advice about your Super Savings – Corporate Accumulation account. This service is included in your membership. For more comprehensive advice, we may also refer you to an accredited external financial adviser². Advice of this nature may incur a fee¹.

- 1 Employees in the Australian Retirement Trust group provide advice to members and employers as representatives of Sunsuper Financial Services Pty Ltd (ABN 50 087 154 818 AFSL No. 227867) (SFS), that is wholly owned by the Trustee as an asset of Australian Retirement Trust. SFS is a separate legal entity responsible for the financial services it provides. Eligibility conditions apply. Refer to the Financial Services Guide at australianretirementtrust.com.au/fsg for more information.
- 2 The Trustee has established a panel of accredited external financial advisers who are not employees of the Australian Retirement Trust group. The Trustee is not responsible for the advice provided by these advisers and does not receive or pay any referral fees. These advisers will explain to you how their advice fees are determined.

Overseas travel and approved leave

Total premiums (including stamp duty) will continue to be deducted from your Super Savings – Corporate Accumulation account during the period of leave. It is your responsibility to ensure sufficient monies are in your Super Savings – Corporate Accumulation 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 for up to two years while on *Unpaid Leave* or Parental Leave.

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.

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

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 MetLife (or an international subsidiary or associated company of your Australian employer). If you are a not an Australian resident, cover will cease after 90 days. 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 Disability 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 automatic Standard insurance cover and may apply for Additional cover.

2. Premiums

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 the 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 on 1 July, unless agreed otherwise with the insurer. Premiums are deducted from your Super Savings – Corporate Accumulation account unless otherwise agreed with your employer.

Payment of Standard Death and Total & Permanent Disability premiums

An important feature of this plan is that MetLife pays the premium for your Standard Death and Total & Permanent Disability cover. Premiums for Additional cover (if any) are automatically deducted from your account each month. Premiums paid by your employer are included in the assessment against the concessional contributions cap. Breaching this cap may have tax implications for you.

Refer to the Super Savings Accumulation Guide for more information.

From time to time, our insurer may need to change premium rates, which may result in an increase or decrease to your premiums.

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.

	Standard cover		Additional Death & TPD¹ cover		Additional De	eath only cove
Age	Death	TPD ¹	Male \$	Female \$	Male \$	Female \$
15	6.21	5.83	3.64	1.56	3.26	1.23
16	6.21	5.83	3.64	1.56	3.26	1.23
17	6.21	5.83	4.04	1.59	3.62	1.34
18	6.21	5.83	4.27	1.66	3.82	1.45
19	6.21	5.83	4.33	1.65	3.87	1.45
20	6.21	5.83	4.27	1.63	3.82	1.44
21	6.21	5.83	4.14	1.57	3.71	1.40
22	6.21	5.83	3.95	1.56	3.53	1.39
23	6.21	5.83	3.75	1.56	3.35	1.39
24	6.21	5.83	3.54	1.62	3.17	1.35
25	6.21	5.83	3.36	1.77	3.00	1.37
26	6.21	5.83	3.23	1.91	2.82	1.40
27	6.21	5.83	3.14	2.06	2.64	1.43
28	6.21	5.83	3.12	2.21	2.50	1.45
29	6.21	5.83	3.18	2.36	2.42	1.49
30	6.21	5.83	3.26	2.54	2.37	1.54
31	6.21	5.83	3.44	2.72	2.39	1.62
32	6.21	5.83	3.71	2.95	2.47	1.70
33	6.21	5.83	4.02	3.21	2.59	1.81
34	6.21	5.83	4.40	3.47	2.78	1.92
35	6.21	5.83	4.84	3.80	3.01	2.06
36	6.21	5.83	5.35	4.16		
37				4.16	3.31	2.21
	6.21	5.83	5.90 6.52		3.62	2.38
38	6.21	5.83		5.07	4.00	2.58
39	6.21	5.83	7.19	5.66	4.40	2.82
40	6.21	5.83	7.92	6.29	4.83	3.07
41	6.21	5.83	8.71	7.05	5.31	3.36
42	6.21	5.83	9.56	7.89	5.80	3.66
43	6.21	5.83	10.46	8.87	6.31	4.02
44	6.21	5.83	11.47	9.97	6.87	4.43
45	6.21	5.83	12.55	11.20	7.44	4.86
46	6.21	5.83	13.75	12.57	8.03	5.34
47	6.21	5.83	15.07	14.13	8.68	5.89
48	6.21	5.83	16.57	15.83	9.37	6.48
49	6.21	5.83	18.26	17.68	10.12	7.13
50	6.21	5.83	20.17	19.73	10.93	7.84
51	6.21	5.83	22.34	21.97	11.83	8.62
52	6.21	5.83	24.83	24.36	12.83	9.47
53	6.21	5.83	27.69	26.96	13.97	10.40
54	6.21	5.83	30.98	29.74	15.25	11.39
55	6.21	5.83	34.76	32.73	16.71	12.48
56	6.21	5.83	39.11	35.90	18.40	13.66
57	6.21	5.83	44.10	39.27	20.33	14.93
58	6.21	5.83	49.88	42.79	22.59	16.30
59	6.21	5.83	56.46	46.50	25.17	17.76
60	6.21	5.83	64.02	50.38	28.17	19.34
61	6.21	5.83	72.63	54.42	31.64	21.03
62	6.21	5.83	82.45	58.57	35.63	22.82
63	6.21	5.83	93.61	62.87	40.23	24.74
64	6.21	5.83	106.26	67.28	45.50	26.79

^{1.} TPD means Total & Permanent Disability Rounding variations may occur when calculating premiums.

Facts about making a claim

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 Australian Retirement Trust, 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.

Super Savings 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 **australianretirementtrust.com.au/claim** 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 Australian Retirement Trust. 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 Trustee of Australian Retirement Trust, including determination of the beneficiary/s,
- decision by the Trustee of Australian Retirement Trust, 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 Disability 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, Australian Retirement Trust 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 – Corporate Accumulation account balance will normally be transferred to the Cash investment option. Any insurance benefit paid into your Super Savings – Corporate Accumulation 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

Australian Retirement Trust should be notified as soon as reasonably possible after an event that is likely to give rise to a disability or *Terminal Illness* claim. Depending on the type of illness or injury there is a 3-month waiting period before a Total and Permanent Disability claim becomes assessable.

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 Australian Retirement Trust 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 Trustee of Australian Retirement Trust for review and consideration.

If the Trustee of Australian Retirement Trust declines your claim and you disagree with this decision you can either:

- lodge a complaint with Australian Retirement Trust.
 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 Australian Retirement Trust.

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 may need help with a tailored financial plan or help in moving into a new or different phase of your financial life after a major event and/or insurance payout. You don't need to panic and you don't need to be rushed into a course of action. Speak to your adviser to get the advice you need. If you don't have your own personal financial adviser and you need advice about your Super Savings - Corporate Accumulation account, Australian Retirement Trust also has qualified financial advisers¹ who can help you over the phone with simple advice about your Super Savings - Corporate Accumulation account. This service is included in your membership. For more comprehensive advice, we may also refer you to an accredited external financial adviser². Advice of this nature may incur a fee.

1 Employees in the Australian Retirement Trust group provide advice to members and employers as representatives of Sunsuper Financial Services Pty Ltd (ABN 50 087 154 818 AFSL No. 227867) (SFS), that is wholly owned by the Trustee as an asset of Australian Retirement Trust. SFS is a separate legal entity responsible for the financial services it provides. Eligibility conditions apply. Refer to the Financial Services Guide at **australianretirementtrust.com.au/fsg** for more information. 2 The Trustee has established a panel of accredited external financial advisers who are not employees of the Australian Retirement Trust group. The Trustee is not responsible for the advice provided by these advisers and does not receive or pay any referral fees. These advisers will explain to you how their advice fees are determined.

3. Definitions - Total & Permanent Disability

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 time period over which your education, training or experience is considered depends on which part of the Total & Permanent Disability definition applies to you. The insurer will consider all your education, training or experience up 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.

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 unlikely ever again to be gainfully employed in any occupation for which you are reasonably suited by education, training or experience;

10

Unlikely to do a suited occupation ever again

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

- 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,
- (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 unlikely 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;

10

Suffering a specifically defined medical condition and permanently unlikely to work because of that condition

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

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

4. Definitions - general terms

Term	Definition			
Accident	For the purposes of the Accidental Death, or Accidental Total & Permanent Disability benefit, Accident is defined as the occurrence of an injury caused directly and solely by external, violent and accidental means and is independent of any other cause. For the purposes of the MetLife Policy, Injury means bodily injury which is caused solely and directly by external, violent and accidental means and is independent of any other cause.			
Actively Employed / Active Employment	Actively Employed means in the insurer's opinion you are capable of performing your identifiable duties without restriction by any illness or injury for at least 35 hours per week (whether or not you are actually working those hours).			
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	At Work means actively performing all the duties of their Occupation, working their usual hours free from any limitation due to Illness or Injury and not entitled to or receiving income support benefits of any kind.			
Casual Employment	Casual Basis means you are employed by your employer other than in Permanent Employment. If you transfer from a Casual Basis to Permanent Employment you must be in active employment at the date of transfer, otherwise <i>Limited Cover</i> will apply until you have been in active employment for 5 consecutive days.			
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 3 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	Date of Disablement means the later of the date on which a Medical Practitioner examines and certifies in writing that the Covered Person is disabled and the Covered Person ceases all work.			
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:			
	 (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.			
Fixed Annual Remuneration (FAR)	FAR means your Fixed Annual Remuneration (FAR). FAR means base salary which is the salary package inclusive of superannuation and as advised by the Employer or such other amount as advised by the Employer on the later of the previous 1 July or your commencement date. FAR does not include commissions, director's fees, overtime payments and penalty or shift allowances or other amounts unless otherwise agreed with the insurer. Where you are Employed on a part-time basis, the FAR will be the full-time equivalent			
Limited Cover	Limited cover means you are only covered for an Illness that first becomes apparent, or an Injury that first occurs, on or after the date cover commenced.			
	Injury means bodily injury which is caused solely and directly by external, violent and accidental means and is independent of any other cause.			
	Illness means sickness, disease or disorder.			

Definition Term Medical Cardiomyopathy means: a condition of impaired ventricular function of variable aetiology (often not **Conditions** determined) resulting in significant permanent physical impairment i.e. Class III on the New York Heart Association classification of cardiac impairment. The New York Heart Association classifications are: Class I – no limitation of physical activity, no symptoms with ordinary physical activity. Class II – slight limitation of physical activity, symptoms occur with ordinary physical activity. Class III - marked limitation of physical activity and comfortable at rest, symptoms occur with less than ordinary physical activity. Class IV - symptoms with any physical activity and may occur at rest, symptoms increased in severity with any physical activity. **Chronic Lung Disease** means: end stage respiratory failure requiring continuous and permanent oxygen therapy and is confirmed by a medical specialist, excluding Intermittent Oxygen Therapy. Medical Dementia / Alzheimer's Disease means: the definite (clinical) diagnosis of dementia as confirmed by a consultant neurologist, psychiatrist or geriatrician resulting in significant cognitive impairment. Significant cognitive impairment Conditions means deterioration in the Member's mini-mental state examination or equivalent thereof, scores to twenty (20) or continued less. Dementia as a result of alcohol or drug abuse is excluded. Major Head Trauma means: an accidental head injury resulting in permanent neurological deficit, resulting in you either: being totally and permanently unable to perform any one of the Activities of Daily Living where these activities include bathing, dressing, feeding, toileting and mobility; or suffering at least a 25% impairment of whole person function as defined in Guides to the Evaluation of Permanent Impairment 5th edition, American Medical Association. Diagnosis must be confirmed by a consultant neurologist. Motor Neurone Disease means: the unequivocal diagnosis of motor neurone disease confirmed by a consultant Multiple Sclerosis means: the unequivocal diagnosis of multiple sclerosis confirmed by a consultant neurologist. Muscular Dystrophy means: the unequivocal diagnosis of muscular dystrophy confirmed by a consulting neurologist. means: the unequivocal diagnosis of idiopathic Parkinson's disease confirmed by a consultant neurologist. All other types of Parkinsonism are excluded (e.g. secondary to medication). Paraplegia (including Quadriplegia, Tetraplegia and Hemiplegia) means: Paraplegia means the total and permanent loss of function of the lower limbs due to spinal cord injury or disease, or brain injury or disease. Quadriplegia / Tetraplegia means the total and permanent loss of function of the lower and upper limbs due to spinal cord injury or disease, or brain injury or disease. Hemiplegia means the total and permanent loss of one side of the body due to spinal cord injury or disease, or brain injury or disease. Primary Pulmonary Hypertension means: primary pulmonary hypertension established by cardiac catheterisation resulting in significant permanent physical impairment which is classified as Class III or greater under the New York Heart Association classification of cardiac impairment. The New York Heart Association classifications are: Class I – no limitation of physical activity, no symptoms with ordinary physical activity. Class II – slight limitation of physical activity, symptoms occur with ordinary physical activity. Class III – marked limitation of physical activity and comfortable at rest, symptoms occur with less than ordinary physical activity. Class IV – symptoms with any physical activity and may occur at rest, symptoms increased in severity with any physical activity.

Term	Definition			
Medical Practitioner	Medical Practitioner means: (a) a person who is registered and practising as a medical practitioner in Australia; or (b) a person who, in our opinion and absolute discretion, is: (i) appropriately qualified and practising medicine in their country; and (ii) registered with the body responsible for the registration of medical practitioners in the person's jurisdiction where they are practising. A <i>Medical Practitioner</i> cannot be someone who is: (a) a Covered Person; (b) your parent, child or sibling; (c) your spouse or partner, as determined by us in our absolute discretion; or (d) your business partner, associate or employee.			
Permanent Employment/ Permanently Employed	Permanent Employment means a person is Employed by the Employer under a single and ongoing contract that: (i) is of indefinite duration and is for a fixed term of no less than 6 (six) months; and (ii) requires the person to perform identifiable duties; and (iii) requires the person to work a regular number of hours per week; (iv) provides for paid annual leave, sick leave and long service leave; and (v) is not employed on a Casual Basis			
Permanent Incapacity	Permanent Incapacity is defined in the <i>Superannuation Industry (Supervision) Regulations 1994</i> (Cth). A member of a superannuation fund is taken to be suffering permanent incapacity if the trustee of the fund is reasonably satisfied that the member's ill-health (whether physical or mental) makes it unlikely that the member will engage in gainful employment for which the member is reasonably qualified by education, training or experience.			
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 24 months from the date of certification of the Terminal Illness by two registered <i>Medical Practitioners</i> (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 <i>Superannuation Industry (Supervision)</i> Regulations 1994 (Cth). For more information refer to the Super Savings Accumulation Guide.			
Unpaid Leave	Unpaid Leave means leave (not being cessation of employment) without pay from your employer. This leave must be: (i) approved by your employer or authorised by: 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. Unpaid Leave excludes leave: (i) that is due to your illness or injury, or (ii) during which you receive or are entitled to receive: a. income benefits, or b. disability income benefits, or c. social security sickness benefits, or			



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