






Issued by N.M. Superannuation Proprietary Limited on 15 November 2024.
Insurance cover for SignatureSuper® is provided by TAL Life Limited (TAL).

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SignatureSuper® Flexible Protection and Lifetime Protection

Information about your SignatureSuper® insurance

Log into [My AMP](#) to check your insurance. **You** may hold one or more of the following cover types:

 <p>DEATH COVER</p>	 <p>TOTAL AND PERMANENT DISABLEMENT (TPD) COVER</p>	 <p>INCOME PROTECTION (IP) COVER</p>
<p>Also known as life cover, which pays a lump sum to you, your beneficiaries or estate if you die or become terminally ill. Death cover is paid in addition to your super account balance.</p>	<p>Provides a lump sum benefit in the event that you become totally and permanently disabled. TPD cover is paid in addition to your super account balance.</p>	<p>Pays a monthly benefit if you're totally (or then partially) disabled.</p>

Previous feature	Applies to	
	Death and TPD cover	IP cover
Guaranteed Future Insurability	✓ Automatically included	✓ Automatically included
Waiver Benefit	✓ Extra cost option	✗
Business Safeguard Benefit	✓ Extra cost option	✗
Change of employer feature	✗	✓ Automatically included

The information in this document is for existing members who already hold the types of cover described. These products are closed to new members, however **you** can still decrease your existing cover or cancel some or all of it.

Your cover is subject to the terms and conditions of the policies issued to the trustee by the **insurer**. If there's any inconsistency between the insurance policies and this document, the relevant policy document prevails.

If **you** want to increase your insurance cover amount or apply for a new cover type, **you** may choose to apply for either Essential Protection or Super Protection. Information on Essential Protection and Super Protection can be found in the [SignatureSuper - Personal Insurance Guide](#).

Defined terms are found at the back of this guide and will be **bolded** throughout.

Your SignatureSuper Insurance

Flexible Protection and Flexible Lifetime Super (personal) insurance

If **you**'ve previously applied and been approved for Flexible Protection or Flexible Lifetime Super (personal) insurance, **you** may currently hold one or more of the following types of cover:

- Death (including terminal illness) cover – referred to as the Extra Death Benefit (EDB) and Terminal Illness benefit.
- Total and permanent disablement cover – referred to as the Total and Permanent Disablement (TPD) benefit.
- Income protection cover – previously referred to as the Temporary Salary Continuance (TSC) benefit.

There were certain features included in these benefits, or available as extra cost options, which were removed from 1 April 2024:

Included features removed from 1 April 2024	Extra cost options removed from 1 April 2024
Guaranteed Future Insurability	Business Safeguard Benefit (BSB) (previously available for EDB and TPD benefit only)
Change of employer feature (previously included with IP benefit only)	Waiver Benefit (WB) (previously available for EDB and TPD benefit only)

If **you** don't already hold one of the insurance cover types described in this document and **you**'re wanting to apply for that cover type, or to increase your existing cover, **you** will need to move products to either Essential Protection or Super Protection. Any application for new or additional cover are subject to the Essential Protection or Super Protection terms and conditions and if **you** move products, your existing Flexible Protection insurance or Flexible Lifetime Super (personal insurance) will cease. The [Product Disclosure Statement](#) and [Insurance Guide for Essential Protection and Super Protection](#) are available on our website or **you** can call us for a copy.

Your insurer

Insurance cover for **SignatureSuper** is provided by TAL Life Limited (TAL) ABN 70 050 109 450 AFSL No. 237848.

Insurer consent

TAL Life Limited:

- has given and not withdrawn its consent in relation to being named in this document, and
- has not issued or caused the issue of this document.

Policy documents

Your cover is subject to the terms and conditions of the policies issued to the **trustee** by the **insurer**.

If there's any inconsistency between the insurance policies and this document, the **PDS** and/or your **welcome letter**, the relevant policy document prevails.

Your insurance needs may change

It's a good idea to keep on top of your insurance needs. Because, as life changes (like if **you** purchase a home or have children) your insurance needs might too. Also, the cost of your cover may change as **you** age. It's important to keep reviewing your cover to make sure it continues to be right for **you**.

Your SignatureSuper insurance is flexible to meet your changing needs. **You** can apply to reduce or cancel all or some of your cover at any time. A financial adviser can help **you** work out your insurance needs. Our insurance calculator might also be a good place to start too, access the calculator here: amp.com.au/insurance-needs.

Supporting your health and wellbeing

TAL Health for Life is here to protect and support your wellbeing at every stage of your health journey. This includes enabling **you** to live a healthy life before making a claim, supporting **you** at claim time and empowering recovery from illness or injury.

When it comes time to get your life back on track after a claim, the **insurer** will support **you** through providing access to a wide range of evidence-based services to help **you** meet your health goals and sustainably achieve the best possible health and work outcomes.



Your insurance cover is subject to superannuation laws

Insurance in super is subject to laws to ensure affordability and eligibility. To be eligible for cover, **you** must:

- be at least 25 years old
- have a super balance of at least \$6,000
- have had a contribution put into your account within the last 16 months,

unless **you** elect to have cover earlier.

You can let us know **you'd** like cover at amp.com.au/getinsurance.

We are required to cancel your insurance if **you** haven't had a contribution or rollover put into your account within the last 16 months, unless **you've** elected to keep your cover.

You can tell **us** **you'd** like to keep your insurance at any time: amp.com.au/keepmyinsurance.

Death cover

If **you** hold Death cover (which also includes a Terminal Illness benefit), a lump sum will be paid (in addition to your super account balance) if **you** die whilst your Death cover is in-force. To find out your level of Death cover, go to [My AMP](#). We encourage **you** to review the appropriateness of your cover with your financial adviser, from time to time, to ensure it continues to meet your personal needs and objectives.

What happens if you die

If **you** die while **you're** an insured **member** of SignatureSuper, and the **insurer** accepts **you** are eligible for a death benefit, your Death cover will be paid (in addition to your super account balance) to either your beneficiaries or estate. If a death benefit becomes payable, it will consist of:

- your super account balance, plus
- the proceeds of any insurance claim paid by the **insurer** (if any).

When **we're** notified of your death, your investments in your super account (and your Death cover, if any) will be switched into a low-risk investment option. The Death cover amount is only payable if the **insurer** accepts that **you're** eligible for a death benefit and if **you** are, the amount payable will be your sum insured at the time of your death.

Who gets your super if you die

Super is not automatically included in your will, so it's important to let us know who **you'd** like to get your death benefit. **You** can do this by nominating a beneficiary(ies). Information on how **you** can nominate a beneficiary and how death benefits are paid is available in your **member guide**. **You** can also make a nomination in [My AMP](#). **Members** under the age of 18 are not able to nominate beneficiaries and therefore 'no nomination' provisions will apply. If **you** don't make a nomination or **you** cancel your existing nomination and don't make a new one, **we** must pay your death benefit to your estate.

Terminal Illness benefit

Death cover has an in-built Terminal Illness benefit at no extra cost. The Terminal Illness benefit is an early payment of Death cover if **you** suffer a **terminal illness**. The amount the **insurer** pays under the Terminal Illness benefit is the Death cover insured amount on the date the **insurer** agrees with the doctor's prognosis that **you're terminally ill**, subject to the maximum cover limit. The maximum amount **we'll** pay is \$5 million. If a Terminal Illness claim is accepted, the **insurer** will pay the sum insured to **us** and **we'll** invest this benefit in a low-risk investment option.

Your TPD cover (if any) sum insured will be reduced by the amount of any Terminal Illness benefit that is paid. If **you** have TPD cover greater than the Terminal Illness benefit paid, then the reduced TPD cover amount will continue. On payment of the Terminal Illness benefit, Death cover will cease. Your Death cover and/or TPD cover insurance fees will be refunded back to the **Terminal Illness certification date** for the portion of Death cover and/or TPD cover that was reduced by the Terminal Illness benefit amount paid.

Under superannuation law, a **member** who is certified by two **doctors** (one who is a specialist in the field of the specific illness) as having a life expectancy of 24 months or less from the date of certification (and the 24 month certification period has not yet ended), will be considered to have met a Terminal Illness condition of release, and therefore will be able to withdraw the superannuation account balance, regardless of age.

Where **you** have met a condition of release and choose to withdraw your full account balance, your superannuation account will be closed and any insurance cover that **you** hold through that account will end from the date of closure. Before closing your account, and if **you** are **terminally ill**, **you** should seek financial and tax advice to ensure that **you** fully understand the impact that this will have on your ability to claim against any insurance cover that **you** hold through your superannuation account.

In particular, **you** should consider that where your Death cover is cancelled as a result of the closure of your superannuation account, that your beneficiaries will not be able to claim against that insurance cover in the event that **you** die.

Payment of a Death benefit where you only have TPD or IP cover

If **you** only have TPD cover or IP cover, and **you** don't have any Death cover, the **insurer** may still pay out an amount if **you** die. Please refer to the **Total and Permanent Disablement (TPD) cover** and **Income Protection (IP) cover** sections of this guide for more information.

Death cover and Terminal Illness benefit exclusions

The **insurer** won't pay an insurance benefit:

- for **terminal illness**, if it results from wilful and intentional self-inflicted illness or injury, or
- for Death cover, if your death is caused by suicide within 13 months of the insurance being taken out or, if increasing the insurance, for the amount of the increase.

If your cover replaces previous cover issued by the **insurer** or a different **insurer**, the 13 months won't apply if **you** were entitled to claim under the previous cover, as long as:

- the previous cover was in force at the time the **insurer** issued the insurance, and
- the previous cover was in force for at least 13 months.

The **insurer** will require satisfactory evidence of these points at the time of claim for this exception to apply.

Other exclusions may apply and, if applicable, **we** or the **insurer** would have advised **you** of these at the time your application for cover was accepted.

Total and Permanent Disablement (TPD) cover

TPD cover is a lump sum amount paid if **you** become **totally and permanently disabled**, subject to **you** serving a three month waiting period and for the benefit to be paid to **you** from **the fund**, **you** satisfy a condition of release. To find out your level of TPD cover, go to [My AMP](#). We encourage **you** to review the appropriateness of your cover with your financial adviser, from time to time, to ensure it continues to meet your personal needs and objectives.

The **insurer** will pay your TPD sum insured to your super account if **you** become **totally and permanently disabled** while **you** are an insured **member** of SignatureSuper.

The definition of **totally and permanently disabled** can be found in the **Defined terms** section of this guide. If **you** have continuously held TPD cover since prior to 1 July 2014, different definitions may apply.

How TPD benefits are paid

If your TPD claim is accepted:

1. your account balance will remain in your current superannuation investment options, and
2. your TPD benefit will be invested in a low-risk investment option.

If a TPD benefit is payable, any Death cover insured amount **you** have is reduced by the amount of the TPD benefit paid. If your TPD benefit amount paid is equal to your Death cover insured amount, then your Death cover will cease upon payment of your TPD benefit.

The amount of the TPD benefit payable is the amount **you're** insured for at your **date of disablement**.

If **you** are paid a TPD benefit, we will not charge **you** insurance fees that relate to that cover from the **date of disablement** (as your cover ends on that date).

What happens if you're claiming a TPD benefit and you die before the claim has been accepted

The **insurer** will assess the claim for TPD if **you** survive eight days after the illness or injury that resulted in **you** being TPD.

Death benefit feature for TPD cover

This is an in-built feature of TPD cover. If **you** have TPD cover but do not have any Death cover, the **insurer** will pay an amount if **you** die. The **insurer** will pay under this Death benefit feature if **you** die while this account is in force. The **insurer** will pay \$10,000 (or the TPD cover insured amount if it is lower than \$10,000). The **insurer** will only pay once across all accounts **you** hold with us that have TPD cover. This feature must be claimed within 12 months of death.

This benefit is not payable if **you** die by your own hand within 13 months of the commencement or reinstatement of TPD cover, or if **you** are entitled to a Terminal Illness or TPD benefit.

TPD cover exclusions

The **insurer** won't pay a TPD benefit if disablement results from a wilfully and intentionally self-inflicted illness or injury. Other exclusions may apply and, if applicable, **we** or the **insurer** would have advised **you** of these at the time your application for cover was accepted.

Income Protection (IP) cover

IP is a benefit paid monthly in arrears, as a percentage of your income. It helps replace your income if **you** become unable to work due to an illness or injury.

IP cover includes:

- the **total disability** benefit, and
- the **partial disability** benefit.

If **you** have IP cover, the **insurer** will pay a **monthly benefit** if **you** meet the definition of **totally disabled** or **partially disabled** (see the **Defined terms** section for the full definitions of **totally disabled** and **partially disabled**).

Your IP cover will have a specific:

- **benefit period**. This is the maximum period the IP benefit will be paid for if **you** become **totally disabled** or **partially disabled**, and
- **waiting period**. This is the amount of time in which no benefits are payable, from the date **you** first become **totally disabled** or **partially disabled**. Benefit payments start one month after the **waiting period** has ended.

To be eligible to claim a total disability benefit:

- **You** must be **totally disabled** for the duration of the **waiting period**.

To be eligible to claim a Partial Disability benefit **you** must be:

- **totally disabled** for at least the first 14 days during the **waiting period**, and
- **totally disabled** or **partially disabled** for the remaining days of the **waiting period**.

IP cover automatically includes waiver of premium and a Death benefit feature at no extra cost. **You** may also have the superannuation contribution benefit as part of your IP cover. To find out your level of IP cover, your **benefit period** and **waiting period**, go to [My AMP](#). We encourage **you** to review the appropriateness of your cover with your financial adviser, from time to time, to ensure it continues to meet your personal needs and objectives.

What the insurer will pay

The monthly amount the **insurer** pays will not exceed the amount the **insurer** has agreed to insure **you** for. This is called the **maximum monthly benefit**, and the amount is subject to the following maximum percentages:

- up to 75% of the first \$320,000 of your annual income, plus
- up to 50% of the next \$240,000 of your income,

subject to a maximum of \$30,000 per month.

IP benefits paid directly to **you** are treated as taxable income and attract Pay As You Go withholding tax, the same as salary and wages. The **insurer** will deduct any

tax that they are required to deduct before they pay **you**. If **you're** being paid an IP benefit, **we** will not charge **you** insurance fees related to that cover for the period **you** are eligible to be paid that benefit. Insurance fees remain payable during the **waiting period**.

Superannuation contribution benefit

The superannuation contribution benefit (SCB) is an extra cost option **you** may have added to your account. It is paid to your super account in addition to your IP cover amount, subject to the **maximum monthly benefit**.

If **you're** an employee, your employer is obliged to make minimum contributions (known as superannuation guarantee (SG) contributions) to your superannuation account on your behalf. If **you** become disabled, and are unable to earn an income, your employer may also stop making SG contributions. The SCB can help to insure either:

- your compulsory SG contributions (at the time the **insurer** accepted your application for insurance), or
- a nominated percentage of your annual income above the legislated default SG minimum contribution at the time, but not more than 15%.

If **you've** chosen this option, any **total disability** benefit or **partial disability** benefit payable will include the SCB as an additional amount (proportioned if **you're** receiving a **partial disability** benefit), which will be paid into your super account.

The **insurer** stops paying the SCB when one of the following happens:

- the **insurer** stops paying **you** a **total disability** or **partial disability** benefit, or
- your IP cover ends.

Total disability benefit

The **total disability** benefit is designed to pay **you** a monthly amount if **you** are **totally disabled**.

The **insurer** pays a benefit up to 75% of your **pre-disability income**, if **you** are unable to work for a period longer than your **waiting period**. **you** will not be paid more than the **maximum monthly benefit**.

If you receive income from other sources

If **you** receive income amounts from other sources (referred to as 'offsets') while **you're** receiving a benefit, the **insurer** will reduce the amount payable. The amount payable is reduced so that, when it is added to the **offset** amounts, **you** don't receive more than 75% of your **pre-disability income** while **totally disabled**.

Partial disability benefit

The **insurer** pays **you** the **partial disability** benefit when **you** return to work after a period of disability if:

- an illness or injury which made **you** **totally disabled** causes **you** to earn less than **you** did before a period of **total disability**,
- **you** were **totally disabled** for at least the first 14 days of the **waiting period** and **partially disabled** for the rest of the **waiting period**,
- **you** have the approval of your **doctor** to return to work and the **insurer** agrees, and
- **you** remain under **ongoing care** for the illness or injury which caused **you** to be **totally disabled**.

The amount **you** receive is the **total disability** benefit, reduced by a proportion to reflect what **you're** earning. The **insurer** will calculate your **partial disability** benefit using the following calculation:

$$\frac{(A - B)}{A} \times C$$

Where:

A = Your **pre-disability income** (monthly).

B = The current monthly amount **you** earn from working.

C = The monthly **total disability** benefit amount.

If **you** were already being paid a **total disability** benefit when **you** become **partially disabled**, the **insurer** will keep paying **you** on the same dates, but the benefit will be reduced and the **waiting period** won't apply again.

If the **insurer** is not already paying a **total disability** benefit, then the **insurer** will start to pay the **partial disability** benefit when the **waiting period** ends.

Partial disability benefits are paid until **you** are no longer **partially disabled**. **You** will not be paid for longer than the **benefit period**.

If you receive income from other sources

If **you** receive income amounts from other sources (referred to as 'offsets'), while **you're** receiving a **partial disability** benefit, the **insurer** will reduce the amount paid so **you** don't receive more than 100% of your **pre-disability income** while **partially disabled**. The **insurer** won't pay more than the **maximum monthly benefit**.

IP benefit offsets

Payments that the **insurer** takes into account as other sources when reducing the **monthly benefit**, include regular payments from:

- any workers' compensation, accident compensation or public liability scheme;
- any insurance plans **you** obtained after **you** applied for your IP cover, if either the **insurer** did not consider this IP cover in assessing your eligibility or if your total IP benefits from all insurance plans exceed 75% of your **pre-disability income**; and
- sick leave.

If any of these regular payments are paid other than monthly, the **insurer** will convert them to monthly payments for their calculation. If the payment is a lump sum, then only that part of the payment that relates to compensation for loss of wages or earning capacity will be taken into consideration. The **insurer** does not take investment income or other forms of unearned income into account.

Returning to work during the waiting period

The **waiting period** starts when **you** first become **totally disabled**. **You** may work during the **waiting period** for five days (or less) in a row without the **waiting period** starting again. The **waiting period** will end when the number of days **you** have been unable to work equals the **waiting period**.

If **you** work for more than five days in a row during the **waiting period**, that **waiting period** stops and must restart from the beginning if **you're** again **totally disabled**.

Relapse

If **you've** previously had an IP claim, and the **insurer** stopped paying your IP benefit because it had been paid for the full **benefit period**, and **you** suffer a **relapse**, **you'll** only receive claim payments in relation to the **relapse** if **you've** worked in your usual occupation, for at least your usual income, for six consecutive months or more. In this case, your claim will be treated as a new claim and the **waiting period** and **benefit period** will start again.

If the **insurer** stopped paying for a different reason:

- if **you** suffer the **relapse** at least six months after the **insurer** stops paying, your additional claim will be treated as a new claim and both the **waiting period** and **benefit period** will start again; and
- if **you** suffer the **relapse** within six months after the **insurer** stops paying, your additional claim will be treated as a continuation of the previous claim. In this instance, the **waiting period** and **benefit period** do not restart and instead, the **insurer** adds up all the periods paid for that claim and treats them as one **benefit period**. No further payments will be made if **you've** already been paid for the full **benefit period**.

IP cover exclusions

The **insurer** won't pay an IP benefit if your **total disability** or **partial disability** results from intentional self-inflicted injury, or if your injury or illness was caused (directly or indirectly) by war (whether war was declared or not).

The **insurer** doesn't consider normal and uncomplicated pregnancy or childbirth as an illness or an injury and won't pay for this condition. However, the **insurer** will pay if **you're** unable to work because **you** suffer complications during pregnancy or while giving birth.

If **you** cease to be employed for reasons other than injury or illness, then the **insurer** won't pay a **total disability** or **partial disability** benefit. If **you** leave employment, **you** should tell us to stop your cover – otherwise **we'll** continue to charge your insurance fees.

Other exclusions may apply, and if applicable, **we** or the **insurer** would have advised **you** of these at the time your application for cover was accepted (or before your cover started).

Death benefit feature for IP cover

This is an in-built feature of IP cover, only if any account **you** hold with AMP (with insurance provided by the **insurer**) does not have Death cover for **you**. This feature must be claimed within 12 months of death.

The **insurer** will pay additional payments under this Death benefit feature if **you** die while **you** are **totally disabled** or **partially disabled** and **you're** receiving an IP benefit (the **insurer** won't pay under the Death benefit feature if **you** die during the **waiting period**).

The **insurer** pays six extra payments, with each payment equal to the amount they would have paid each month if **you** were **totally disabled**. The maximum paid under this feature under all insurance plans **you** hold with the **insurer** is \$60,000.

When IP benefit payments stop

The **insurer** will stop paying IP benefit payments if any of the following occur:

- in the **insurer's** opinion, **you** are no longer **totally disabled** or **partially disabled** (including because **you're** no longer under the **ongoing care** of your **doctor** for the illness or injury that caused **you** to become **totally disabled**);
- **you** do any **remunerative work**, except where a **partial disability** benefit applies;
- all the periods for which the **insurer** has paid under the one claim add up to the **benefit period**;
- for **partial disability** claims, the illness or injury which made **you** **totally disabled** no longer causes **you** to earn less (**you're** able to earn your full **income** again);
- for **partial disability** claims, **you** no longer have the approval of your **doctor** to work;
- for **partial disability** claims, **you** become **totally disabled** again, in which case the **insurer** may start paying **you** **total disability** benefits instead;
- the IP cover ends;
- **you** turn 65 (or the nominated insurance cease date for your insurance if earlier); or
- **you** die;

whichever occurs first.

When your payments stop, the following will also stop:

- waiving the insurance fees associated with your IP cover; and
- paying any contributions under the Superannuation contribution benefit (if applicable).

General terms

Worldwide cover

Your insurance provides worldwide cover 24 hours a day, seven days a week, giving **you** peace of mind.

If **you** qualify for an Income Protection (IP) benefit whilst **you** are outside Australia or New Zealand, the **insurer** may pay **you** for a maximum period of three months. IP benefit payments will recommence when **you** return to Australia or New Zealand (if **you**'re still entitled to be paid). If the **insurer** decides to pay benefits whilst **you** are outside Australia or New Zealand for longer than three months, then they may set certain conditions for these payments.

When cover stops

Your cover stops on the earliest of the following:

- for Death cover (and the Terminal Illness benefit), **you** turn 99;
- for TPD cover, **you** turn 99 (a modified TPD definition applies after age 65);
- for IP cover, **you** turn 65;
- **you** cancel your **insurance benefit(s)**;
- **you** stop being a **member** (including where **you** close your account);
- **you** pass away;
- your account doesn't have enough money to pay the full value of all insurance fees at the time they are due, meaning your insurance will be cancelled immediately. **You** will have 60 days to request reinstatement of your cover; or
- if no contributions or rollovers have been received into your account for a period of 16 months, we may be required to cancel your insurance (unless **you**'ve told us in writing that **you** want to keep your insurance – **you** can do this online at amp.com.au/insurancecancellation).

Indexation feature

To help **you** keep up with increases in the cost of living, the indexation feature automatically increases your cover amount on 1 July each year, according to the applicable **new CPI** figure.

If this feature applies to your cover:

- Death and TPD cover automatically increases by the annual change in the Consumer Price Index (**CPI**), or by 5% (whichever is higher), and
- IP cover will automatically increase by the annual change in the **CPI**.

If **you**'ve selected the indexation feature to apply to your IP benefit with a 'to age 65' **benefit period**, your IP benefit will also automatically increase with the annual change in the **CPI** while **you**'re being paid an IP benefit. This option was offered at an extra cost and can no longer be added to IP 'to age 65' cover. The table below explains when **CPI** increases will stop:

CPI increases stop:	For the following insurance benefits:
When we pay you a TPD benefit	Any remaining Death cover
When we pay you a Terminal Illness benefit	Any remaining Death and TPD cover
While we are paying you an IP benefit	IP cover with a two-year benefit period
Once you turn 84	Death and TPD cover
Once you turn 64	IP cover

Deceased customer policy

All deductions for insurance fees will cease upon notification of your death. These deductions will then be reversed back to the date of death. Administration and investment fees will continue whilst your account remains open and are charged in accordance with the applicable product rules and disclosures.

Taxation

This information is based on an understanding of the current law and Australian Taxation Office (ATO) practice at the date of preparation of this Insurance Guide. **You** should seek professional advice concerning your own tax position.

Insurance claim benefits are paid into your super account, then taxed accordingly upon meeting a superannuation condition of release. Death benefit lump sums paid to tax dependants are generally tax-free. Total and Permanent Disablement (TPD) amounts are included in the taxable component of superannuation proceeds, and may be reduced by a tax-free component depending on the circumstances of your payment.

Income Protection (IP) benefits paid to **you** are treated as taxable income and attract Pay As You Go withholding tax, the same as salary and wages. Further taxation information can be found at ato.gov.au.

Your privacy with us and TAL Life Limited

We are authorised under superannuation law to collect your personal and sensitive information for the purpose of administering your superannuation, including insurance held through super. The personal and sensitive information **you** provide is collected and held by **us** to administer your insurance within your AMP super account. If **you** do not provide the requested information, **we** may be unable to process your insurance application, assess a claim or properly administer your insurance. Your personal and sensitive information will only be disclosed to our staff as required, **TAL Life Limited** (as the **insurer**) and/or our legal or other professional advisors if reasonably necessary.

You can access our privacy policy at amp.com.au/privacy, or **we** can send **you** a copy upon request or **you** can contact **us** for further information. Our privacy policy contains detailed information about how **we** manage your personal and sensitive information. It also contains information about how to make a complaint in relation to how **we** have managed your personal and sensitive information.

TAL and its related entities are committed to ensuring that your information is handled responsibly in accordance with the privacy laws, including the *Privacy Act 1988* (Cth) and the Australian Privacy Principles. The way in which **TAL** collects, uses, secures and discloses information relating to their customers is set out in their privacy policy available at tal.com.au/privacy-policy or available on request.

Managing your cover

As life changes, your insurance needs may change too. The level of cover **you** need will depend upon your own personal circumstances and your need to provide for your family and/or other beneficiaries. It's important to keep reviewing your cover to make sure it continues to be right for **you**.

How to change or cancel your cover

You can reduce or cancel your cover at any time. We will reduce or stop deducting insurance fees from your super account from the date we confirm the change to your insurance. If **you** want to apply to increase your cover (including increasing cover that **you**'ve previously reduced), or to take out a new cover type, **you** will need to move products to either Essential Protection or Super Protection. If **you** move products, your existing Flexible Protection insurance or Flexible Lifetime Super (personal insurance) will cease.

Information on Essential Protection and Super Protection can be found in the [SignatureSuper – Personal Insurance Guide](#).

Life events cover

If **you**'ve experienced a significant change in your life which **you** need to be covered for, **you** may be able to apply to increase your cover by answering a short number of health and lifestyle questions. If **you** want to apply for this cover type, **you** will need to move products to either Essential Protection or Super Protection. If **you** move products, your existing Flexible Protection insurance or Flexible Lifetime Super (personal insurance) will cease. Life events cover is only available for Death cover and TPD cover.

Information on Essential Protection and Super Protection can be found in the [SignatureSuper – Personal Insurance Guide](#).

If **you** need to change your cover, please contact **us**.

If **you** cancel your cover:

- **you** will not be able to make a claim for insurance benefits for events or conditions that arise after your cover has been cancelled; and
- your ability to restart your cover, or to apply for new cover, may be subject to health assessment and acceptance by the **insurer**, or **you** may not be eligible to get cover.

If **you**'re cancelling your cover because **you** intend to apply for alternative cover elsewhere, **you** should consider not cancelling your cover until the alternative cover is in place. **You** can get independent financial advice to help **you** make a decision on cancellation.

Reinstatement of insurance cover

You can reinstate your cover, unless **you** cancelled your cover voluntarily or where a claim has been paid, within 60 days of the date your cover was cancelled at amp.com.au/reinstatemyinsurance.

If your cover is reinstated, the cover will be reinstated to the cover **you** previously had, back to the date it was cancelled (and insurance fees will be payable for that period) and will retain any conditions, exclusions or restrictions that applied prior to it ceasing. If **you** choose to reinstate only some of your cover, then that cover will still be reinstated back to date it was cancelled, and any reduced insurance fees will be effective from the date of your request.

How much cover costs

Your insurance fee is made up of your premiums and any insurance service expense and **stamp duty** that applies.

The cost of insurance depends on a number of factors, including the cover types and amounts, your age, sex and occupation. Each cover type has different fees payable.

Your insurance cover and fees will be recalculated as **you** age. If indexation is applicable to your cover then your insurance cover and fees will also be recalculated as at 1 July each year.

Your insurance fees are paid monthly in advance and are deducted from your super account at the start of every month. **We**'ll deduct your insurance fees in the following order:

- first, from any money in Choice investment options, excluding any term deposits;
- if there's not enough money in Choice investment options, or if your only investment is in the MySuper investment option, **we**'ll deduct from the MySuper investment option.

The **insurer** has the right to vary premium rates at any time. We will provide at least 30 days' notice if your insurance fees increase, unless the increase is due to:

- age or CPI based recalculations each year;
- **you** changing your insurance;
- a **stamp duty** change – for example, due to **you** moving to another state; or
- a change in **stamp duty** calculations or the introduction of a new Government charge.

You cannot be singled out for an individual premium increase, unless it is a result of:

- **you** requesting a change to your insurance; or
- a **stamp duty** change – for example, due to **you** moving to another state.

If **you** make a change to your cover, your insurance fees will be adjusted to reflect this change and your new insurance fees will apply from the date the **insurer** accepts the proposed changes to your cover.

Insurance fees quote

You can obtain a quotation by contacting SignatureSuper Customer Service, alternatively **you** may be able to log on to [My AMP](#), or visit amp.com.au/insurance-calculator.

Updating your occupation

If **you** change occupations in the future, **you** may be able to update your occupation by calling us. Changing your occupation may result in a change to your insurance fees. Your new insurance fees will be advised to **you** at the time **you** change your occupation.

Insurance service expense

The insurance service expense is currently up to 11.5% of your premium, capped at \$30 per month. The insurance service expense is charged by **us** and covers the cost of providing insurance.

Government duties

There may be **stamp duty** payable on your insurance premium, depending on where **you** live. **Stamp duty** is incorporated into your insurance fees. The **insurer** may change the way they recover **stamp duty** in the future, from incorporating it into the insurance fees to making it an additional charge. If a state or territory government **stamp duty** or tax applies, it will be based on the address **we** have on record for **you**. As **stamp duty** and tax differs between states/territories, it's important **you** let **us** know of any changes to your address. **Stamp duty** charges can change without notice (up and down), as governments introduce a new **stamp duty** or revise an existing one or as **we** change our address records.

How to make a claim

When **you** or your representative become aware of a potential claim, **we** need to be told as soon as reasonably possible.

If the **insurer** is not notified of a claim within a reasonable amount of time and can show they were prejudiced by this delay, the **insurer** may reduce your benefit amount.

You or your representative can lodge an insurance claim through your AMP super account using any one of these options:

Online	For Illness or injury claims	Online Claims form
Call	For Illness or injury claims	1300 366 214 Monday to Friday 8.30am – 5pm (Sydney time)
	For Life (also known as Death) insurance claim	1300 373 654 Monday to Friday 8.30am – 5pm (Sydney time)
Write	AMP Claims, PO Box 6346, Wetherill Park NSW 1851 Dharug Country	
Email	amp_claims_admin@amp.com.au	

Medical examinations and reporting for claims

When **you** submit a disability claim, the **insurer** will require **you** to provide information about your health and any other information that it reasonably requires to assess your claim. The **insurer** may require **you** to be examined by a **medical practitioner** of their choosing. In this case, the **insurer** will pay for this examination including any ensuring reporting from the **medical practitioner**. If **you** fail to attend any pre-arranged examinations or don't provide enough notice of your inability to attend, **you** may be liable for any fees incurred by the **insurer**.

The **insurer** will not pay for any fees incurred for the cost of having the standard initial claim reports completed or ongoing claims reporting for IP claims.

The claims process



We'll provide details on the claims process

You may have the option to choose between online, paper or tele-claim lodgement with the **insurer**.



Your TAL claim consultant will be in touch

Within two business days of receiving the minimum claim requirements, the **insurer** will confirm receipt of the required information and then your claim will move to assessment. **You** (or your representative) can contact the AMP claims team with any questions and **we'll** get back to **you** within 10 business days.



The insurer will assess your claim

We (or the **insurer**) will keep **you** (or your representative) informed of your claim's progress at least every 20 business days (or as otherwise agreed). **You** may contact **us** or the **insurer** directly with any questions about your claim.

The **insurer** may contact **you** (or your representative) to request more information relevant to your claim, like medical or occupational details.

The **insurer** maintains the right to:

- fully investigate and assess any claims to its satisfaction prior to claim settlement, and
- require assessment or any medical examination to be conducted in Australia as part of its consideration of your claim, should a TPD or IP claim arise while **you're** overseas. **You** will be responsible to pay any costs associated with **you** returning to Australia for assessment.

Benefit payments are subject to the **insurer's** acceptance of your claim.



We'll let you or your representative know the outcome of the claim

If your claim is:

- **accepted**, **you** (or your representative) will be asked to confirm how to pay the benefits to **you** or your estate/any beneficiaries (depending on the type of claim); or
- **declined**, **we'll** review the **insurer's** decision within 15 business days and advise the reason why, and what options **you** have.



Develop a recovery plan (for IP cover only)

If your IP claim is accepted, the **insurer** may:

- ask for additional requirements they need, to start and/or continue your payments; and
- work with **you** to set up a recovery or support plan specific to your situation.

Feedback

We take complaints seriously and we want all of our members to have a great experience, so if you're ever unhappy we want to hear about it so we can resolve this for you as quickly as possible.

Making a complaint

Our Complaints Handling Guide is on our website. Our complaints process can be found by visiting amp.com.au/support/complaints/complaints-process.

If you wish to make a complaint you can contact us by phone, in writing (email or send us a letter) or via our website.

- Call us on: **131 267**
- Email us at: ampsuper@amp.com.au
- Notify us through [My AMP](#)
- Website: amp.com.au/signaturesuper
- Write to us at: **SignatureSuper Customer Service
PO Box 6346
Wetherill Park NSW 1851
Dharug Country**

If your complaint is resolved within five business days we'll not provide you with a written response, unless you request it. However, if your complaint is about hardship, a declined insurance claim, the value of an insurance claim or a decision of the trustee, we'll provide you with a written response even if your complaint is resolved within five business days.

If your complaint can't be resolved within five business days, we'll resolve it through our complaint resolution process. We'll provide you with:

- a name and contact information of the Customer Resolution team responsible for handling your complaint,
- regular progress updates, and
- specify when the investigation into the complaint is likely to be resolved.

When we complete our investigation, we'll contact you to discuss our decision and then provide you with a written response including the outcome of the investigation and the reasons for our decision. Depending on the type of complaint lodged, different timeframes apply for the resolution of the complaint. You can find out more information by reading our Complaints Policy on our website.

If you aren't satisfied with the outcome of the complaint, you can refer it to the Australian Financial Complaints Authority (AFCA). AFCA is an independent body that provides a free complaint resolution service for complaints made to financial firms. The contact details for AFCA are:

Australian Financial Complaints Authority

Postal address: GPO Box 3, Melbourne VIC 3001

Australia phone: 1800 931 678

Email: info@afca.org.au

Website: afca.org.au

There may be a time limit for referring your complaint to AFCA. You should contact AFCA or visit the AFCA website for more details.

Getting help to make a complaint

If you need support or help to make a complaint you can ask an authorised representative, family member or friend to contact us on your behalf. We need your permission to speak with anyone else about your complaint, and this can be provided verbally or in writing. If you have a hearing or speech impairment you can use the National Relay Service as per the following:

- TTY (Text Telephone) users – phone 133 677 then ask to contact 131 267
- Speak and Listen (speech to speech relay) users – phone 1300 555 727 then ask to contact 131 267
- Internet relay users – visit the [National Relay Service website](#).

The Translating and Interpreting Service (TIS National) provides interpreting services to people who do not speak English and to agencies and businesses that need to communicate with their non-English speaking clients. TIS National can be contacted on 131 450.



Please note: Time limits apply to certain complaints to the Australian Financial Complaints Authority. If you have a complaint you should contact them immediately to find out if a time limit applies. See **Enquiries and complaints process** in the **member guide** for further details.

Defined terms

Defined terms – Flexible Protection and Lifetime Protection

The following terms apply to both Flexible Protection and Lifetime Protection insurance. There are more defined terms outlined in the following sections.

Defined term	Meaning
Activities of daily living	Means: <ul style="list-style-type: none"> • Washing: you can wash yourself by some means. • Dressing: you can put clothing on or take clothing off. • Feeding: you can get food from a plate into your mouth. • Contenance: you can control both your bowel and bladder function. • Mobility: you can: <ul style="list-style-type: none"> • get in and out of bed; • get on or off a chair/toilet; and • move from place to place without using a wheelchair.
AMP Super Fund, fund or the fund	Means the AMP Super Fund ABN 78 421 957 449, RSE Registration No. R1056433.
Benefit period	Means the maximum period during which benefits will be paid under this benefit for any one or related illness or injury.
Cognitive impairment	Means you suffer a significant and permanent cognitive impairment with a loss of intellectual capacity and as a result you're required to be under the continuous care and supervision of someone else.
CPI	Means the All Groups Consumer Price Index number for the weighted average of the eight capital cities published by the Australian Bureau of Statistics or, if that Index is discontinued or varied substantially, any other index the insurer selects and the trustee agrees.
Doctor	Means a legally qualified medical practitioner registered to practice in Australia, New Zealand, the United Kingdom, the United States of America, or Canada. That person may not be you , your business partner, or a member of your immediate family.
Home duties	You're engaged in home duties if you're doing at least four of the following duties related to running the family home: <ol style="list-style-type: none"> 1. cleaning the family home; 2. shopping for food and household items; 3. meal preparation; 4. laundry services; or 5. caring for a child or dependant.
Insurance benefit	Means a benefit payable under the insurance policy.
Insurer, the insurer, TAL	Means TAL Life Limited ABN 70 050 109 450 AFSL 237848 located at Level 16, 363 George Street, Sydney NSW 2000.
Limb	Means the whole hand below the wrist or the whole foot below the ankle.
Maximum monthly benefit	The amount the insurer has agreed to insure you for.
Member, you	Means a member of the AMP Super Fund whose life is insured under Flexible Protection or Flexible Lifetime Super (personal insurance).
Monthly benefit	Means the amount the insurer actually pays each month.

Defined term	Meaning
Net earnings	<p>Means your total income package from employment, including commissions, regular bonuses, fringe benefits, employer superannuation contributions and any other items relating to your own efforts. It does not include investment income. It includes superannuation contributions made by your employer that are part of a salary sacrifice arrangement between you and your employer.</p> <p>When you own (directly or indirectly) all or part of the business or practice, net earnings means income earned by the business or practice as a result of your personal exertion or activities less your share of the business expenses incurred in earning that income. It does not include investment income.</p> <p>If the superannuation contribution benefit has been selected, net earnings will not include any amount insured under that option.</p>
New CPI	Means the CPI for the March quarter in the current calendar year.
Ongoing care	<p>Means the member:</p> <ol style="list-style-type: none"> has sought advice, care and associated treatment that was reasonably necessary and appropriate, from an appropriate doctor who has personally assessed the member and been provided with full clinical details in relation to their illness or injury, and is continuing to do so at reasonable intervals in the circumstances; is following the advice, care and associated treatment of the appropriate doctor; and is taking all other reasonable measures to minimise or avoid further illness or injury.
Professional occupation	<p>Means any occupation shown in the following list, where membership of a professional or government body is necessary as a pre-requisite for engaging in that occupation and duties involve no or minimal site attendance and no manual work and no supervision of manual work.</p> <ul style="list-style-type: none"> • Accountant • Actuary • Architect • Audiologist • Auditor • Barrister • Chemist • Dental surgeon • Dentist • Doctor • Engineer • Financial planner • Industrial chemist • Judge • Lawyer • Medical practitioner • Medical specialist • Optometrist • Orthodontist • Patent attorney • Professor or associate professor • Psychologist • Radiologist • Scientist • Solicitor • Surveyor • University lecturer • Veterinary surgeon <p>If you're engaged in a specialised occupation or duty in one of the professional occupations listed above, the insurer's assessment of whether you're totally and permanently disabled will depend upon whether you could work in or attend to any area of the listed professional occupation, not just the specialised area or duty you were engaged in when the disability commenced.</p>
Regular remunerative work	You're engaged in regular remunerative work if you're doing work in any employment, business, or occupation for at least 10 hours per week. You must be doing this work for reward or hope of reward of any type.
Relapse	You suffer a relapse if you've earlier suffered an illness or injury, and you again suffer the same illness or injury or one that arises from the same cause or a related cause.
Senior managerial duties	<p>You're engaged in senior managerial duties if you are a senior member of your employer's management/executive team and:</p> <ul style="list-style-type: none"> • your duties do not involve manual work or the supervision of manual work; • you work in an office where the work is of a sedentary nature; and • your net earnings before tax exceeded \$193,415 pa in each of the three years immediately before you became disabled. This amount applied until 30 June 2024 and will be indexed each year by any increase in the CPI.
Specified conditions	<p>Means one or more of the following:</p> <ul style="list-style-type: none"> • Dementia • Blindness • Advanced heart failure • Paralysis – permanent loss of use of two or more limbs • Deafness • Loss of speech • Advanced lung failure • Loss of independence – inability to perform the activities of daily living • Motor neurone disease • Advanced multiple sclerosis • Muscular dystrophy
Stamp duty	Stamp duty is a state/territory Government tax payable on insurance and differs between states and territories. The insurer currently incorporates it into their base premium.

Defined term	Meaning
Terminal illness/ terminally ill	<p>Means the insurer being satisfied that there is a life expectancy of 24 months or less, certified by your attending doctor and diagnosed on the basis of clinical findings and reports acceptable to the chief medical officer the insurer or his or her nominee and;</p> <ul style="list-style-type: none"> • a second doctor certifying that the injury or illness has caused a reduction in life expectancy to 24 months or less; • at least one of the doctors is a specialist practicing in an area related to the injury or illness you suffered; and • for each of the certificates, 24 months has not elapsed from the date the certification was provided. <p>The insurer may also require you to give information from medical advisers of their choosing. You will not be considered to have a terminal illness on a date prior to the Terminal Illness certification date.</p> <p><i>Please note: If your Death cover commenced prior to 1 July 2014 and you have continuously held Death cover since, a different definition of terminally ill applies. Contact us if you would like further information.</i></p>
Terminal Illness certification date	Means the date (or if there are two different dates, the later of the two dates) that two doctors sign a medical statement in a form acceptable to the insurer in which they certify that you have a life expectancy of 24 months or less.
Trustee, we, us	Means N. M. Superannuation Proprietary Limited ABN 31 008 428 322 or such other trustee as may become trustee of the AMP Super Fund from time to time.
Waiting period	Means the period before the insurer begins paying a benefit and means the waiting period that applies to your plan.

Defined terms – Flexible Protection

The following terms only apply if **you** have existing Flexible Protection insurance cover.

Defined term	Meaning
Able to work	Means you do not meet the definition of totally disabled .
Date of disablement	<p>Date of disablement is used only for the purpose of calculating the amount of the total and permanent disablement benefit and means the earlier of:</p> <ul style="list-style-type: none"> • the date on which the insurer admits liability to pay a claim for this insurance benefit; • the date the three month period (from the date you cease regular remunerative work or home duties) referred to in Part 1 or Part 4 of the definition of total and permanent disablement expires; and • the date the eight day period from the date of the event giving rise to the claim referred to in Part 2, 3, 5, 6A or 6B of the definition of totally and permanently disabled expires.
Partially disabled/ partial disability	<p>Means you're partially disabled if you return to work and:</p> <ol style="list-style-type: none"> d. the illness or injury which caused you to be totally disabled causes you to earn less than you did before your period of total disability; e. you were totally disabled for at least the first two weeks of the waiting period and you were partially disabled for the rest of the waiting period; f. you have the approval of your doctor to return to work and the insurer agrees; and g. you remain under the ongoing care and advice of your doctor.
Pre-disability income	Means your income prior to being totally disabled . The insurer uses your income during the 12 months immediately before you became unable to work, and divides that amount by 12 to determine the monthly amount. However, if you're taking maternity leave, paternity leave or leave without pay, or you've returned to work after taking maternity leave, paternity leave or leave without pay, the insurer uses your income during the 12 months immediately before you went on maternity leave, paternity leave or leave without pay, and divides that amount by 12 to determine the monthly amount.
Remunerative work	Means you're doing work in any employment, business or occupation. You must be doing it for reward – or the hope of reward – of any type.

Defined term	Meaning
<p>Total and permanent disablement/ totally and permanently disabled</p>	<p>Means disablement which commences on or after the start date of your insurance and:</p> <ul style="list-style-type: none"> a. commences before your 65th birthday, and meets the definition in either Part 1, 2, 3, 4, 5, 6A or 6B; or b. commences before the member's 99th birthday, and meets the definition in either Part 2, 3 or 5. <p>You're totally and permanently disabled if you survive for eight days from the date of the occurrence of the illness or injury that directly or indirectly caused you to become totally and permanently disabled, and meet the definition of totally and permanently disabled in one of the following parts:</p> <p>Part 1 – Unable to work</p> <p>You're totally and permanently disabled if you suffer an illness or injury while either:</p> <ul style="list-style-type: none"> a. engaged in a professional occupation or performing senior managerial duties and you were engaged in that occupation, or were performing those duties, for at least 35 hours per week in the 12 months immediately before suffering the illness or injury; or b. engaged in regular remunerative work (or within six months after you cease regular remunerative work), <p>and:</p> <ul style="list-style-type: none"> c. the illness or injury wholly prevents you from engaging in regular remunerative work for at least three months in a row; and d. since you became ill or injured, you've been under the regular care and attention of a doctor for that illness or injury; and e. in the insurer's opinion, the illness or injury means you're unlikely ever to work in or attend to: <ul style="list-style-type: none"> i. your professional occupation with any employer or as a self-employed person; ii. your senior managerial duties; or iii. regular remunerative work for which you're reasonably fitted by education, training or experience, <p>whichever you were engaged in when you suffered the illness or injury.</p> <p>Where the claim is admitted, the insurer will refund any premium paid during the three month waiting period.</p> <p>Part 2 – Loss of use of limbs and/or sight</p> <p>You're totally and permanently disabled if you suffer an illness or injury that results in the total and irrecoverable loss of:</p> <ul style="list-style-type: none"> • the use of two limbs • the sight of both eyes; or • the use of one limb and the sight of one eye. <p>Part 3 – Loss of independent living</p> <p>You're totally and permanently disabled if you suffer an illness or injury and become totally and permanently unable to perform at least two of the activities of daily living without assistance from someone else.</p> <p>Part 4 – Home duties</p> <p>You're totally and permanently disabled if you suffer an illness or injury while engaged in full-time home duties (or within six months after you cease home duties) and:</p> <ul style="list-style-type: none"> a. the illness or injury wholly prevents you from engaging in any home duties for at least three months in a row; b. since you became ill or injured you've been under the regular care and attention of a doctor for that illness or injury; and c. in the insurer's opinion, the illness or injury means that you're unlikely to ever engage in one of either: <ul style="list-style-type: none"> i. all home duties; or ii. any occupation for which you're reasonably fitted by education, training or experience. <p>Where the claim is admitted, the insurer will refund any premium paid during the three month waiting period.</p> <p>Part 5 – Loss of cognitive functioning</p> <p>You're totally and permanently disabled if you suffer significant and permanent cognitive impairment.</p>

Defined term	Meaning
Total and permanent disablement/ totally and permanently disabled continued	<p>Part 6A</p> <p>You're totally and permanently disabled if you suffer an illness or injury while either:</p> <ol style="list-style-type: none"> engaged in a professional occupation or performing senior managerial duties and you were engaged in that occupation, or were performing those duties, for at least 35 hours per week in the 12 months immediately before suffering the illness or injury; or engaged in regular remunerative work (or within six months after you cease regular remunerative work), <p>and:</p> <ol style="list-style-type: none"> the illness or injury is a specified condition; and since you became ill or injured, you've been under the regular care and attention of a doctor for that illness or injury; and in the insurer's opinion, the illness or injury means you're unlikely ever to work in or attend to: <ol style="list-style-type: none"> your professional occupation with any employer or as a self-employed person; your senior managerial duties; or regular remunerative work for which you're reasonably fitted by education, training or experience, whichever you were engaged in when you suffered the illness or injury. <p>Part 6B</p> <p>You're totally and permanently disabled if you suffer an illness or injury while engaged in full-time home duties (or within six months after you cease home duties) and:</p> <ol style="list-style-type: none"> the illness or injury is a specified condition; since you became ill or injured you've been under the regular care and attention of a doctor for that illness or injury; and in the insurer's opinion, the illness or injury means that you're unlikely to ever engage in one of either: <ol style="list-style-type: none"> all home duties; or any occupation for which you're reasonably fitted by education, training or experience.
Total disability/ totally disabled	<p>Means you're:</p> <ul style="list-style-type: none"> unable to do your usual occupation because you're ill or injured; under the ongoing care of your doctor for that illness or injury; and not doing any remunerative work. <p>The insurer's assessment of your ability to do your usual occupation is based on your capacity to carry out any one duty, or combination of duties, which are critical to the proper performance of your usual occupation. This assessment is based on the occupation you were regularly engaged at the time of suffering the illness or injury causing inability to work.</p>

Defined terms – Lifetime Protection

The following terms only apply if **you** have existing Lifetime Protection insurance and if your cover commenced prior to 1 July 2014 and **you** have continuously held this cover since.

Defined term	Meaning
Date of disablement	<p>Date of disablement is used only for the purpose of calculating the amount of the total and permanent disablement benefit and means the earlier of:</p> <ol style="list-style-type: none"> the date on which the insurer admits liability to pay a claim for this insurance benefit; and for <ol style="list-style-type: none"> the date the three month period (from the date you cease regular remunerative work or home duties) referred to in Part 1 or Part 4 of the definition of total and permanent disablement expires; and the date the eight day period from the date of the event giving rise to the claim referred to in Part 2, 3, 5, or 6 of the definition of totally and permanently disabled expires.

Defined term	Meaning
Partially disabled/ partial disability	<p>Means you're partially disabled if you return to work and:</p> <ol style="list-style-type: none"> the illness or injury which caused you to be totally disabled causes you to earn less than you did before your period of total disability; you were totally disabled for at least the first two weeks of the waiting period and you were partially disabled for the rest of the waiting period; you have the approval of your doctor to return to work and the insurer agrees; and you remain under the ongoing care and advice of your doctor.
Total and permanent disablement/ totally and permanently disabled	<p>Means disablement which commences on or after the start date of your insurance and:</p> <ol style="list-style-type: none"> before your 65th birthday, and meets the definition in either Part 1, 2, 3, 4, 5, 6; or before your 99th birthday, and meets the definition in either Part 2, 3 or 5. <p>You're totally and permanently disabled if you survive for eight days from the date of the occurrence of the illness or injury that directly or indirectly caused you to become totally and permanently disabled, and meet the definition of totally and permanently disabled in one of the following parts:</p> <p>Part 1 – Unable to work</p> <p>You're totally and permanently disabled if you suffer an illness or injury while either:</p> <ol style="list-style-type: none"> engaged in a professional occupation or performing senior managerial duties and you were engaged in that occupation, or were performing those duties, for at least 35 hours per week in the 12 months immediately before suffering the illness or injury; or engaged in regular remunerative work (or within six months after you cease regular remunerative work), <p>and:</p> <ol style="list-style-type: none"> the illness or injury wholly prevents you from engaging in regular remunerative work for at least three months in a row; and since you became ill or injured, you've been under the regular care and attention of a doctor for that illness or injury; and in the insurer's opinion, the illness or injury means you're unlikely ever to work in or attend to: <ol style="list-style-type: none"> your professional occupation with any employer or as a self-employed person; your senior managerial duties; or regular remunerative work for which you're reasonably fitted by education, training or experience, whichever you were engaged in when you suffered the illness or injury. <p>Where the claim is admitted, the insurer will refund any premium paid during the three month waiting period.</p> <p>Part 2 – Loss of use of limbs and/or sight</p> <p>You're totally and permanently disabled if you suffer an illness or injury that results in the total and irrecoverable loss of:</p> <ul style="list-style-type: none"> • the use of two limbs • the sight of both eyes; or • the use of one limb and the sight of one eye. <p>Part 3 – Loss of independent living</p> <p>You're totally and permanently disabled if you suffer an illness or injury and become totally and permanently unable to perform at least two of the activities of daily living without assistance from someone else.</p> <p>Part 4 – Home duties</p> <p>You're totally and permanently disabled if you suffer an illness or injury while engaged in full-time home duties (or within six months after you cease home duties) and:</p> <ol style="list-style-type: none"> the illness or injury wholly prevents you from engaging in any home duties for at least three months in a row; since you became ill or injured you've been under the regular care and attention of a doctor for that illness or injury; and in the insurer's opinion, the illness or injury means that you're unlikely to ever engage in one of either: <ol style="list-style-type: none"> all home duties; or any occupation for which you're reasonably fitted by education, training or experience. <p>Where the claim is admitted, the insurer will refund any premium paid during the three month waiting period.</p>

Defined term	Meaning
<p>Total and permanent disablement/ totally and permanently disabled continued</p>	<p>Part 5 – Loss of cognitive functioning You're totally and permanently disabled if you suffer significant and permanent cognitive impairment.</p> <p>Part 6 – Day 1 TPD benefit You're totally and permanently disabled if you suffer an illness or injury while either:</p> <ol style="list-style-type: none"> engaged in a professional occupation or performing senior managerial duties and you were engaged in that occupation, or were performing those duties, for at least 35 hours per week in the 12 months immediately before suffering the illness or injury; or engaged in regular remunerative work (or within six months after you cease regular remunerative work), engaged in full-time home duties (or within six months after you cease home duties); <p>and:</p> <ul style="list-style-type: none"> the illness or injury is a specified condition; and since you became ill or injured, you've been under the regular care and attention of a doctor for that illness or injury; and either: <ol style="list-style-type: none"> where paragraph 'a' or 'b' applies, in the insurer's opinion, the illness or injury means that you're unlikely ever to work in or attend to: <ul style="list-style-type: none"> your professional occupation with any employer or as a self-employed person, your senior managerial duties; or regular remunerative work for which you're reasonably fitted by education, training or experience, whichever you were engaged in when you suffered the illness or injury, or where paragraph 'c' applies, in the insurer's opinion, the illness or injury means that you're unlikely to ever engage in: <ul style="list-style-type: none"> all home duties; or any occupation for which you're reasonably fitted by education, training or experience.
<p>Total disability/ totally disabled</p>	<p>You're totally disabled if:</p> <ol style="list-style-type: none"> you're so ill or injured that you're unable to do your usual occupation; you're under ongoing care of your doctor for that illness or injury; and you're not doing any remunerative work. <p>The insurer's assessment of your ability to do your usual occupation is based on your capacity to carry out any one duty, or combination of duties, which are critical to the proper performance of your usual occupation.</p> <p>This assessment is based on the occupation you were regularly engaged in at the time of suffering the illness or injury causing inability to work.</p>

The following terms only apply if **you** have existing Lifetime Protection insurance and if your cover commenced on or after 1 July 2014.

Defined term	Meaning
<p>Date of disablement</p>	<p>Date of disablement is used only for the purpose of calculating the amount of the total and permanent disablement benefit and means the earlier of:</p> <ol style="list-style-type: none"> the date on which the insurer admits liability to pay a claim for this insurance benefit; and for <ol style="list-style-type: none"> the date the three month period (from the date you cease regular remunerative work or home duties) referred to in Part 1 of the definition of total and permanent disablement expires; and the date the eight day period from the date of the event giving rise to the claim referred to in Part 2, 3, or 5 of the definition of totally and permanently disabled expires.
<p>Gainful employment</p>	<p>Means you're employed or self-employed for gain or reward in any business, trade, profession, vocation, occupation or employment.</p>

Defined term	Meaning
Partially disabled/ partial disability	<p>Means you're partially disabled if you return to work and:</p> <ol style="list-style-type: none"> the illness or injury which caused you to be totally disabled causes you to earn less than your pre-disability income; you were totally disabled for at least the first two weeks of the waiting period; you have the approval of your doctor to return to work and the insurer agrees; and you remain under ongoing care for the illness or injury which caused you to be totally disabled.
Permanent incapacity	<p>Means the insurer is reasonably satisfied that your ill-health (whether physical or mental) makes it unlikely that you'll engage in gainful employment for which you're reasonably fitted by education, training or experience.</p>
Total and permanent disablement/ Totally and permanently disabled	<p>Means disablement which commences on or after the start date of your insurance and:</p> <ol style="list-style-type: none"> before your 65th birthday, and meets the definition in either Part 1 or Part 5; or before your 99th birthday, and meets the definition in either Part 2, 3 or 4 and in the insurer's opinion you're considered to be suffering a permanent incapacity. <p>You're totally and permanently disabled if you survive for eight days from the date of the occurrence of the illness or injury that directly or indirectly caused you to become totally and permanently disabled, and meet the definition of totally and permanently disabled in one of the following parts:</p> <p>Part 1 – Unable to work</p> <p>You're totally and permanently disabled if you suffer an illness or injury while engaged in remunerative work (or within six months after you stop remunerative work) and:</p> <ol style="list-style-type: none"> the illness or injury wholly prevents you from engaging in remunerative work for at least three months in a row; since you became ill or injured, you've been under the regular care and attention of a doctor for that illness or injury; and in the insurer's opinion, the illness or injury means you're unlikely to ever return to gainful employment which you're reasonably fitted by education, training or experience. <p>Where the claim is admitted, the insurer will refund any premium paid during the three month waiting period.</p> <p>Part 2 – Loss of use of limbs and/or sight</p> <p>You're totally and permanently disabled if you suffer an illness or injury that results in the total and irrecoverable loss of:</p> <ul style="list-style-type: none"> the use of two limbs the sight of both eyes; or the use of one limb and the sight of one eye. <p>Part 3 – Loss of independent living</p> <p>You're totally and permanently disabled if you suffer an illness or injury and become totally and permanently unable to perform at least two of the activities of daily living without assistance from someone else.</p> <p>Part 4 – Loss of cognitive functioning</p> <p>You're totally and permanently disabled if you suffer significant and permanent cognitive impairment.</p> <p>Part 5 – Day 1 TPD benefit</p> <p>You're totally and permanently disabled if you suffer an illness or injury while engaged in remunerative work (or within six months after you stop remunerative work) and:</p> <ol style="list-style-type: none"> the illness or injury is a specified condition; and since you became ill or injured, you've been under the regular care and attention of a doctor for that illness or injury; and in the insurer's opinion, the illness or injury means that you're unlikely to ever return to gainful employment which you're reasonably fitted by education, training or experience.

The following terms only apply if **you** have existing Lifetime Protection insurance regardless of the date that your cover started.

Defined term	Meaning
Ongoing care	Means: a. you 've sought advice, care and associated treatment that was reasonably necessary and appropriate, from an appropriate doctor who has personally assessed you and been provided with full clinical details in relation to your illness or injury, and you 're continuing to do so at reasonable intervals in the circumstances; b. you 're following the advice, care and associated treatment of the appropriate doctor ; and c. you 're taking all other reasonable measures to minimise or avoid further illness or injury.
Pre-disability income	Means your income prior to being totally disabled . The insurer will use your income during the 12 months immediately before you became totally disabled , and divides that amount by 12 to determine the monthly amount. However, if you 're taking maternity leave, paternity leave or leave without pay, or you 've returned to work within the last 12 months after taking maternity leave, paternity leave or leave without pay, the insurer will use your income during the 12 months immediately before the start of the maternity leave, paternity leave or leave without pay, and divides that amount by 12 to determine the monthly amount.
Remunerative work	Means you 're doing work in any employment, business or occupation. You must be doing it for reward – or the hope of reward – of any type.
Waiting period	Means the period before the insurer starts to pay.

What you need to know

The information in this document is general information only and doesn't take into account your personal financial situation or needs. **You** should obtain financial advice tailored to your personal circumstances.

If **you**'d like advice on your insurance cover in this super product, contributions to your account or investment options, **you** can call **us** on 131 267. A fee won't be charged for this one-off intrafund advice. If **you**'d like to obtain other financial advice, or ongoing financial advice **you** should seek a financial adviser.

We may change the way **SignatureSuper** is managed and administered at any time. **We** may also change the **insurer** or any insurance terms and conditions if **we** form the view that it is in the best interest of **members of the fund** to do so. **We** will communicate with **you** if this occurs.

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