

Reference Guide

Insurance

Issued on 6 November 2017

The information in this guide is a summary of the important terms and conditions of your insurance and forms part of the Product Disclosure Statement (PDS) for smartMonday DIRECT dated 6 November 2017.

This information, including terms and conditions, may change from time to time. The latest information is available on our website at smartMonday.com.au/resources.aspx

Insurance cover is provided through a group insurance policy with AIA Australia Limited (ABN 79 004 837 861 AFSL 230043, 'the insurer') and held by the trustee on your behalf. Cover is subject to the terms and conditions contained in the policy, the interpretation of which will prevail over any information that may be inconsistent with the PDS, this reference guide, and any other related disclosure or information.

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Death and total and permanent disablement

Automatic cover

The insurance cover in the fund is designed to help ensure you have enough cover to protect you and your family if something happens to you. We've designed the cover to balance what we think is adequate and affordable levels of cover for the membership with the flexibility to let you tailor it to your particular needs.

Cover for death and TPD is automatically provided to you from the start of your membership, but is limited to New Events cover for 2 years, after which time it will convert to Full Cover upon you satisfying the At Work requirement for 30 consecutive days (see next page).

To be eligible for automatic insurance cover, you must be an Australian resident or hold a visa that allows you to stay or work in Australia.

Some occupations may not be eligible for any insurance cover because the insurer considers them too hazardous.

See the latest *Occupation ratings* guide available on the website smartMonday.com.au/resources.aspx

When you receive your *Starter pack* you should take a few minutes to check the following details:



Important information

- > check your *Starter pack* to ensure you have insurance cover
- > check that your occupational factor is appropriate for the type of work that you do.

Automatic minimum levels of cover (based on your age)

Age	Death cover	TPD cover
Up to 42	\$294,848	\$294,848
43	\$277,159	\$277,159
44	\$259,467	\$259,467
45	\$241,777	\$241,777
46	\$224,086	\$224,086
47	\$206,395	\$206,395
48	\$188,703	\$188,703
49	\$171,012	\$171,012
50	\$153,322	\$153,322
51	\$135,631	\$135,631
52	\$117,939	\$117,939
53	\$100,248	\$100,248
54	\$82,557	\$82,557
55	\$64,866	\$64,866
56	\$58,380	\$58,380
57	\$51,894	\$51,894
58	\$45,407	\$45,407
59	\$38,919	\$38,919
60	\$32,433	\$32,433
61	\$25,947	\$25,947
62	\$19,461	\$19,461
63	\$12,973	\$12,973
64	\$6,486	\$6,486
65	\$0	\$0

Note:

- > Levels are current as at 1 July 2017. The minimum level of cover increases on 1 July each year by the lower of inflation as measured by the increase in the Consumer Price Index (CPI) or 5%.

The At Work requirement

Any New Events cover converts to Full Cover when the At Work requirement is satisfied for 30 consecutive days after the end of the New Events period.

Being 'at work' means you are:

- actively performing all of your normal duties, without limitation or restriction due to injury or sickness, and working normal hours on the day cover is to commence; and
- in the insurer's opinion, not restricted by injury or sickness from being capable of actively performing all of your normal duties on a full-time basis for at least 35 hours per week even though actual employment may be on a full-time, part-time, casual, or contract basis; and
- not in receipt of, or entitled to claim, any income support benefits from any source including but not limited to workers' compensation benefits, statutory transport accident benefits and disability income benefits.

You'll be considered to be at work if, on the applicable date, as the context requires, you are on employer-approved leave for reasons other than injury or sickness, and not taking into account the leave, able to meet the At Work requirement.

If you're not working, but have been working previously (eg you're a qualified builder and currently unemployed but between jobs), the insurer will assess your At Work status by your capability of performing, for at least 35 hours per week, the duties that you normally complete in your role or previous occupation immediately prior to unemployment.

New Events cover

For the first 2 years of your membership, your automatic cover is limited to 'new events' only. This means you'll only be covered for an injury or sickness that occurs or becomes apparent after your cover commences or most recently commences (whichever is the later).

Full Cover

If you don't want New Events cover to apply, you can apply for Full Cover:

- on joining—by completing the appropriate section of the *Application* form
- at any time—by completing the *Personal statement and declaration of health* form available on our website smartMonday.com.au/resources.aspx.

You'll need to provide health information to the insurer and Full Cover will be subject to the insurer's approval. If your application for Full Cover is not accepted, you'll still be covered on a New Events basis.

Tailoring cover to suit your needs

You can choose the type and level of cover to suit your personal circumstances. If you need help call us on **1300 880 588** or, if you need advice before making a decision, speak to your financial adviser. We can put you in touch with a financial adviser if you need one.

To change your cover you'll usually need to complete a form available at smartMonday.com.au/resources.aspx, or call us.

Additional cover

You can increase, fix your level of cover at a dollar amount, or transfer other cover you may have into the fund. This cover will be known as 'voluntary' cover and will be in addition to any automatic cover you already have. (If you reduce your level of automatic cover then it will become voluntary cover). Unless otherwise stated, for increases to your cover or fixing your cover, you may need to provide additional information about your health and lifestyle. Additional cover will commence when your application has been approved by the insurer.

Insurance limits

The maximum levels of cover you can have in the fund are:

Cover	Limit	
	Aged 16 to 64	Aged 65 to 69
Death	Unlimited	\$2 million
TPD*	\$3 million	Not available

* Any voluntary TPD cover will reduce linearly each year from age 60 to zero at age 65

Fast-track your application for additional cover

If you're under age 55, you can complete a *shorter application* form which fast-tracks the approval process.

Forms are available at smartMonday.com.au/resources.aspx. Short-form applications are subject to the following limits.

Cover	Limit
Death	\$1 million
TPD	\$1 million

Transferring cover into the fund

You can transfer any death and TPD cover that you have in other super funds or policies into the fund.

Transferred cover will be classified as 'voluntary' cover and be in addition to any automatic cover you have in the fund.

Some conditions and transfer limits may apply, so please see the latest *Individual insurance transfer* form available on the website smartMonday.com.au/resources.aspx.

Your total cover in the fund following the transfer of cover can't exceed the limits for each type of insurance benefit.

Interim cover (accidental injury cover)

You'll be provided with interim cover while your application for cover or increased cover is being assessed. Accidental injury means a physical injury (which occurs while your policy is in force) that is caused solely and directly by violent, visible, external, and unexpected means that is not traceable, even indirectly, to any pre-existing mental or physical condition.

You'll be covered until:

- > your application is either accepted or rejected by the insurer, or
- > you cancel or withdraw your application, or
- > 90 days from the date we receive your completed application, or
- > your cover would have otherwise ceased.

Exclusions

The following exclusions apply to interim cover:

- > no accidental injury benefit will be payable if death or disability is caused directly or indirectly by you engaging in any sport or pastime where the insurer would not normally cover you on standard rates or terms, and
- > any other excluded events set out in this guide.

Life stages additional cover

Big things happen in life and you might want to consider looking at your level of insurance cover when they happen to you. Personal events like starting a family or buying your first home, or starting your own business. Our life stages cover gives you the opportunity to increase your cover (up to 3 times during your membership) without the need to provide additional health information.

Applying for life stages cover

You'll need to complete a *Life stages cover application* form within 60 days of the personal or business event occurring. The form is available at smartMonday.com.au/resources.aspx and we will require evidence of the event, usually in the form of certified copies of important documents (eg a marriage or birth certificate). See the form for requirements.

Personal events	Cover may be increased by the lesser of:
<ul style="list-style-type: none"> > Marriage > Divorce > Turning 30 > Birth or adoption of a child > Child turning 12, or enrolling in private education 	<ul style="list-style-type: none"> > 25% of your current death/TPD insured amount, and > \$200,000
<ul style="list-style-type: none"> > Commencing a first mortgage or increasing an existing first mortgage for the purpose of building or renovating which is the principal place of residence 	<ul style="list-style-type: none"> > 50% of your current death/TPD insured amount > the amount of the primary mortgage > the amount of the increase of the primary mortgage, and > \$200,000
Business events	
<ul style="list-style-type: none"> > You are a key person* in a business and your financial interest in the business or value to the business, averaged over the last 3 years has increased 	<ul style="list-style-type: none"> > 25% of your current death/TPD insured amount > the increase in the value of your financial interest in the business or value to the business, averaged over the last 3 years, and > \$200,000

*A key person is a working partner, director or significant shareholder.

Loyalty additional cover

It can be difficult to increase your level of insurance cover especially as you get older and start to have a few health issues. That's why after 5 consecutive years of holding death and / or TPD cover in the fund and every 5th anniversary after that, we'll provide you with the opportunity to increase your cover without needing to provide additional health information. You'll be able to increase your cover by the lesser of:

- > 25% of your current insured amount, and
- > \$100,000

We'll contact you in writing when you're eligible for loyalty cover and let you know what you need to do. You'll have 60 days to take up the offer, and the increase to your cover will commence on the day we accept your application.

Conditions for life stages and loyalty cover

To apply you must:

- > be under 55
- > be At Work on the date of your application
- > not have been off work or restricted from carrying out your current and normal occupation for more than
- > 10 days in the last 12 months for the same medical conditions
- > hold death or TPD cover on standard terms with no loadings, restrictions or exclusions, and
- > not have made, lodged, or be eligible to lodge a claim, or been previously declined cover, with any fund or insurer.

Any increase to your cover will commence on the day we accept your application.

Exclusions for life stages and loyalty cover

The following exclusions or restrictions apply to the amount of additional cover:

- > suicide or attempted suicide within the first 13 months from the date of the increase
- > for TPD cover, TPD directly or indirectly caused by any self-inflicted injury whether sane or insane.

Death cover conditions

Death cover provides for a lump sum insurance benefit to be paid if you die, usually to your beneficiaries or dependants.

Who do you want to leave your benefit to?

The trust deed of the fund requires us to pay the death benefit to 'eligible dependants' (as defined in the superannuation rules), which can be a spouse, child, financial dependant or someone in an interdependency relationship to you. But circumstances and relationships can change over time and you may want a bit more certainty and control about who you want to leave your money to when you die.

Binding death benefit nomination

A binding death benefit nomination is legally binding on the trustee and must be paid according to the wishes you stipulate on your nomination form. Complete and send us the *Binding death benefit nomination* form available on our website.

A binding nomination is generally valid for 3 years.

Non-binding death benefit nomination

A non-binding death benefit nomination is used only as a guide to your wishes on who should receive your benefit payment. It's not legally binding on the trustee, but it can help a lot if it turns out there's a difficult decision for the trustee to make. You can make a non-binding nomination online or by completing the relevant section of a *Change member details* form.

When death cover ceases

Death cover ceases on the earliest date that any of the following apply:

- > you turn age 70 (for voluntary cover) and 65 (for automatic cover)
- > you die
- > you request cancellation of cover in writing
- > 60 days after premium payments cease
- > 60 days after you cease to be a member of the fund
- > your account balance has fallen below \$5,000 and we've given you 60 days written notice and you haven't topped up your account
- > the date your TPD benefit is paid or becomes payable (except where death cover is greater than TPD cover, in which case the remaining death cover will continue until the occurrence of any other condition listed here)
- > the date your terminal illness benefit is paid or becomes payable as specified in General conditions on page 23.

Exclusions

In addition to any underwriting exclusions imposed by the insurer, death cover excludes:

- > death from suicide that occurs within 13 months of effecting any voluntary increase in insurance cover.
- > It is only the increased amount that is not payable under these circumstances
- > active service in the armed forces of any country or international organisation, and
- > for automatic cover (while your cover is limited to New Events cover, see page 3), death which occurs as a result of any hazardous pursuits and/or pastimes, suicide or a self-inflicted act.

Terminal illness

If you suffer from an illness or have incurred an injury that could result in death within a 24-month period and two registered medical practitioners (one must be a specialist in the area of the illness or injury that you suffer from) certify that despite reasonable medical treatment, it is likely that you have less than 24 months to live you may be eligible to receive your death benefit. Simply lodge a claim while cover is still effective and the policy is still in force.

TPD cover conditions

TPD cover provides for a lump sum insurance benefit to be paid if you become totally and permanently disabled.

For all cover other than automatic cover, if you choose to have TPD which is above your level of death cover, you will pay an additional 20% on the premium rate applying to the amount of TPD cover over death cover.

When TPD cover ceases

TPD cover ceases on the earliest date that any of the following apply:

- you turn 65
- you die
- you request cancellation of cover in writing
- 60 days after premium payments cease
- 60 days after you cease to be a member of the fund
- your account balance has fallen below \$5,000 and we've given you 60 days written notice and you haven't topped up your account
- the date your TPD benefit is paid or becomes payable
- the date your terminal illness benefit is paid or becomes payable (except where TPD cover is greater than death cover, in which case the remaining TPD cover will continue until the occurrence of any other condition listed here) as specified in General conditions on page 23.

Exclusions

In addition to any underwriting exclusions imposed by the insurer, TPD cover excludes:

- disablement directly or indirectly, wholly or partly caused by intentional self-inflicted injury or any such attempt by you whether sane or insane
- active service in the armed forces of any country or international organisation, and
- for automatic cover (while your cover is limited to New Events cover, see page 3), death which occurs as a result of any hazardous pursuits and/or pastimes, suicide or a self-inflicted act.

Other information about your TPD benefit

- Any voluntary TPD cover will reduce linearly each year from age 60 to zero at age 65 when cover will cease
- Benefits are paid separate to any claim made under your income protection insurance cover (if you have any).

Premium rates for death and TPD

The cost of your insurance is deducted monthly from your account. Costs depend on the annual premium rate for your age and the type of cover you have, the amount of cover, your occupation factor, and additional loadings (if any). See next page.

The annual premium rates shown here:

- > represent the cost per \$1,000 of cover
- > are inclusive of a 15% administration fee (plus GST) which is payable by you to Aon Hewitt for insurance administration services provided directly by Aon Hewitt. The fee does not form part of the insurance premium payable to the insurer
- > do not reflect any occupational factor. If we are not notified of your occupation category, we will apply a 'heavy blue collar' occupation factor to the calculation of your premium. See page 9 for occupation factors.

Age next birthday	Death	TPD
16	0.18	0.12
17	0.25	0.14
18	0.31	0.19
19	0.38	0.23
20	0.41	0.29
21	0.44	0.28
22	0.42	0.25
23	0.38	0.24
24	0.34	0.20
25	0.31	0.19
26	0.29	0.19
27	0.30	0.17
28	0.31	0.17
29	0.31	0.19
30	0.31	0.20
31	0.35	0.19
32	0.36	0.20
33	0.37	0.23
34	0.38	0.24
35	0.43	0.23
36	0.44	0.24
37	0.46	0.29
38	0.50	0.29
39	0.54	0.31

Age next birthday	Death	TPD
40	0.57	0.36
41	0.62	0.40
42	0.71	0.44
43	0.75	0.49
44	0.85	0.56
45	0.93	0.65
46	1.03	0.78
47	1.14	0.93
48	1.29	1.11
49	1.43	1.31
50	1.62	1.53
51	1.80	1.78
52	1.99	2.14
53	2.22	2.60
54	2.47	3.08
55	2.75	3.64
56	2.96	4.35
57	3.27	5.13
58	3.64	5.95
59	4.05	6.86
60	4.48	7.83
61	4.96	8.86
62	5.47	10.06
63	6.00	11.26
64	6.61	12.56
65	7.25	14.01
66	8.66	N/A
67	9.70	N/A
68	10.86	N/A
69	12.17	N/A
70	13.63	N/A

Occupation factors for death and TPD

Occupations are given a risk rating (or factor) according to the type of work performed. The higher risk of death or injury, the higher the risk factor the insurer will apply to the calculation of insurance costs. See the table below for the different occupational factors.

Some occupations may not be eligible for any insurance cover because the insurer considers them too hazardous. See the latest *Occupation ratings* guide at smartMonday.com.au/resources.aspx. This guide may be updated by the insurer from time to time.

Occupation category	Description	Factor	
		Death	TPD
Class 1 Professional	Professionals, executives (eg CPA/CA accountant, lawyer, doctor, pharmacist) and senior management (eg CEO, CFO) with tertiary qualifications and high incomes.	0.90	0.85
Class 2 White collar	Office-based with no manual work, eg clerical roles, professional or administrative roles such as architect, accountant, computer analyst, lecturer, social worker, administrator, clerk.	1.00	1.00
Class 3 Grey collar	Primarily non-manual work but may involve light manual duties only, such as hairdresser, shop assistant, florist, cashier, tailor.	1.25	1.50
Class 4 Blue collar	Moderate degree of manual work, or recognised qualified trades such as baker, gasfitter, electrician, mechanic, signwriter, printer, greengrocer.	1.50	2.00
Class 5 Heavy blue collar	Heavy manual work or those with a degree of additional risk of disability, such as boilermaker, gardener, storeman, tyre fitter, welder.	2.00	3.00

Default occupation category: 'Heavy blue collar'

If we're not notified of your occupation category, we will apply a 'Heavy blue collar' factor to the calculation of your insurance premium.

You can change your occupation category at any time by completing and returning a *Reclassify your occupation* form available at smartMonday.com.au/resources.aspx.

Your request to change occupational category will commence from when the form has been approved by the insurer. Changes in occupation cannot be applied retrospectively, regardless of when the new occupation commenced.

If at claim time the insurer assesses that you've been working in a 'hazardous' occupation (as set out in the latest *Occupation ratings* guide) and therefore normally not eligible for cover, or one that should have been given a higher risk factor, then additional premiums may be deducted from your benefits and you'll be assessed using the 'Activities of daily working' definition of TPD. On the other hand, if you've been working in a lower risk occupation than what your premium was calculated on, any overpaid premiums may be added to your benefit payment.

Calculating the cost of your insurance

Your annual premium equals:

$$\frac{\text{Amount of cover}}{\$1,000} \times \text{annual premium rate} \times \text{occupation factor}$$

Example: You're turning 42 and working in an occupation rated as 'Blue collar'. Your level of automatic cover for death and TPD will be \$294,848 according to the table on page 2. Your premium for the year would be calculated as:

$$\text{Death cover: } \frac{\$294,848}{\$1,000} \times \$0.71 \times 1.50 = \$314.01$$

$$\text{TPD cover: } \frac{\$294,848}{\$1,000} \times \$0.44 \times 2.00 = \$259.47$$

Total annual premium **\$573.48**

The rates and factors shown are correct at the date of issue. Premiums will be deducted from your account and will be shown on your annual benefit statement, or you can view these details online by logging into your account.

Disability definitions for TPD

If you lodge a TPD claim you will be assessed as follows:

Where you're working at least 15 hours per week and do not have an occupation listed with the Activities of daily working (ADW) definition, you'll be assessed against Part A or B. If you don't satisfy these definitions, you can still be assessed against the Part C definition.

Where you're working less than 15 hours per week or have an occupation listed with the ADW definition, you'll be assessed against Part B or C.

Where you've applied and been accepted for the Home Duties definition, you will be assessed against Part B, C or D.

Part A – Standard definition

As a result of injury or sickness, you:

- have not performed any work for an uninterrupted period of at least 6 consecutive months solely due to the same injury or sickness; and
- are attending and under the regular care and following the advice of a medical practitioner and have undergone all reasonable and usual treatment including rehabilitation for the injury or sickness; and
- after consideration of all the medical evidence and such other evidence as the insurer may require, have become in the opinion of the insurer, incapacitated to such an extent as to render you unable ever again to be gainfully employed in your usual occupation and any other occupation for which you are reasonably suited by education, training or experience.
- In determining whether an occupation is reasonably suitable for you, the insurer will consider the skills you may acquire through reasonable retraining taking into account your education, training or experience.

Part B – Irrecoverable loss

You have suffered the permanent loss of:

- the use of two limbs; or
- the sight in both eyes; or
- the use of one limb and sight in one eye.

where 'limb' means the whole hand or whole foot; and, after considering all of the medical evidence and such other evidence as the insurer may require, you have become, in the opinion of the insurer, as a result of the same injury or sickness, incapacitated to such an extent as to render you unable ever again to be gainfully employed in your usual occupation and any other occupation for which you are reasonably suited by education, training or experience.

Part C – Activities of daily working (ADW)

For a period of 6 consecutive months after the occurrence of the injury or sickness, you have been continuously unable to perform (with or without aids and adaptations*) at least 3 of the following activities, as certified by a medical practitioner:

Mobility: the ability to:

- bend, kneel or squat to pick something up from the floor and straighten up again, and get into and out of a standard sedan car; or
- walk more than 200 metres at a normal pace on a level surface without stopping due to breathlessness as a result of a medical condition or angina,

Vision: the ability to see, such that an ophthalmologist can certify that your visual acuity is better than 6/60 in the better eye or a visual field of greater than 10 degrees (ie not legally blind),

Lifting: the ability to lift (from bench height) and carry 5 kg weight a distance of 10 metres and place the item back down at bench height,

Communicating: the ability to:

- speak with sufficient clarity such you can hold a conversation with another person in a quiet room in your first language. This involves understanding a simple message and relaying that message to another person; or
- hear such that an audiologist can certify that you have a hearing ability of less than or equal to 40db in the better ear (averaged over the frequencies 0.5, 1, 2 and 3 KHz) in an audiometry test,

Manual dexterity: the ability to use:

- at least 1 hand to pick up and/or manipulate small objects such as picking up a coin from desk height, using cutlery or fastening buttons; or
- a pen, pencil or keyboard to write a short note that can be understood by another person in your first language,

and after consideration of all the medical evidence and such other evidence as the insurer may require, you have become, in the opinion of the insurer, incapacitated to such an extent as to render you unlikely ever to be able to perform any 3 of the above activities.

In addition to the above, the insurer, after considering all relevant evidence which is reasonably available, then determines that you will be unlikely ever to be gainfully employed in any occupation for which you are reasonably suited by education, training or experience.

Where you are unable to perform one or more of the above activities upon the date cover commenced, that activity shall not be taken into consideration during the TPD assessment.

* Aids and adaptations refers to equipment or fixtures to assist you without the assistance of another person to carry out the activities.

Part D – Home duties definition

You are wholly engaged in full time unpaid Domestic Duties in your residence:

- have been unable to perform normal domestic duties, leave home unaided and engage in any employment for an uninterrupted period of at least 6 consecutive months solely due to the same injury or sickness; and
- are attending and under the regular care and following the advice of a Medical Practitioner and have undergone all reasonable and usual treatment including rehabilitation for the injury or sickness; and
- at the end of the period of 6 consecutive months, after consideration of all the medical evidence and such other evidence as the insurer may require, have become, in the opinion of the insurer, as a result of the same injury or sickness incapacitated to such an extent as to render you likely to require ongoing medical care and unable ever to perform normal domestic duties, leave home unaided and engaged in any form of employment.

Domestic duties means that you have chosen to remain at home and perform unpaid home duties as your primary occupation. The choice to remain at home should not be due to unemployment, full-time study or as a result of an injury or sickness.

Occupations listed with the 'Activities of daily working' (ADW) definition for TPD

If an occupation is listed with an ADW definition for TPD, the occupation factor associated with the death cover component will also apply to the TPD cover. For example, the occupation factor used to calculate TPD insurance premiums for an Abattoir Worker would be Heavy Blue (HB) and the occupation factor for an Air Traffic Controller would be White Collar (W).

Occupation	Death	TPD
Abattoir Worker	HB	ADW
Air Traffic Controller	W	ADW

Occupation category	Code
Professional	P
White Collar	W
Grey Collar	G
Blue Collar	B
Heavy Blue Collar	HB

The following occupations are listed with an ADW definition for TPD. This list is taken from the *Occupation ratings* guide current at the time of publication. The guide is available on our website at smartMonday.com.au/resources.aspx and may be updated by the insurer from time to time.

Occupation	Death	TPD
Abattoir Worker	HB	ADW
Actor	W	ADW
Air Traffic Controller	W	ADW
Airline Industry [pilot/crew]	W	ADW
Ambulance Officer	HB	ADW
Antenna Erector [up to 10m]	HB	ADW
Armed Services/Force [Not Pilots & Special Forces]	HB	ADW
Asphalt Layer	HB	ADW
Assembly Line Worker	HB	ADW
Author	W	ADW
Backhoe Operator	HB	ADW
Beach Patrol Lifeguard	HB	ADW
Blacksmith	HB	ADW
Bob Cat Operator	HB	ADW
Bookmaker	W	ADW
Brewery Worker	HB	ADW
Brick Cleaner	HB	ADW
Builder's Labourer	HB	ADW
Car Park Attendant	G	ADW
Carpet/Floor Covering Layer	HB	ADW
Cement renderer	HB	ADW
Cleaner [Factory/Defence Base]	HB	ADW
Concrete Layer/Labourer	HB	ADW
Courier [Bicycle]	HB	ADW
Courier [Motor Cycle]	HB	ADW
Crane Driver	HB	ADW
Cray Fisherman	HB	ADW
Deckhand	HB	ADW
Detention Centre Worker [includes manager/officer]	HB	ADW

Occupation	Death	TPD
Disc Jockey	HB	ADW
Docker/Stevedore/Waterside Worker	HB	ADW
Drillers [Water/Oil/Mineral]	HB	ADW
Driver [Armoured car]	HB	ADW
Driver [Coach/Truck – long distance, >500km radius]	HB	ADW
Driver [Construction equipment]	HB	ADW
Driver [Crane]	HB	ADW
Driver [Earthmoving equipment]	HB	ADW
Driver [Tow truck]	HB	ADW
Driver [Train]	B	ADW
Electrical Linesman/Power Lines [up to 10m]	HB	ADW
Entertainer	W	ADW
Factory Hand/Worker	HB	ADW
Farrier	HB	ADW
Fireman	HB	ADW
Floor Sander	HB	ADW
Foundry Worker	HB	ADW
Fruit Picker	HB	ADW
Garbage Collector	HB	ADW
Golf Professional	G	ADW
Grave Digger	HB	ADW
Gym [Instructor]	G	ADW
Handyman	HB	ADW
Home Duties [full time]	G	ADW
Horse Breeder	G	ADW
Horse Riding Instructor	HB	ADW
Horse Trainer	G	ADW
Insulation Contractor/Installer [not asbestos]	HB	ADW
Jackeroo	HB	ADW
Jockey [Horse Racing/Trotting]	HB	ADW
Journalist [Freelance]	W	ADW
Machine Operator [factory]	HB	ADW

Occupation	Death	TPD
Marine/Shipping – Crew	HB	ADW
Marine/Shipping – Dockworkers	HB	ADW
Massage Therapist/Masseur	G	ADW
Meat Packer	HB	ADW
Merchant Seamen	HB	ADW
Military Personnel [All ranks – not Pilots & Special Forces]	HB	ADW
Mining [Surface Worker – no explosives]	HB	ADW
Model	W	ADW
Musician	G	ADW
Nurse [Royal Flying Doctor Service]	HB	ADW
Oil and Gas Industry Worker [Onshore – not office]	G	ADW
Painter [Over 10m]	HB	ADW
Parking Attendant	G	ADW
Paver	HB	ADW
Photographer [Hazardous eg Aerial, War, News, etc.]	G	ADW
Pilot [Commercial]	W	ADW
Plant Operator	HB	ADW
Police	G	ADW
Porter	HB	ADW
Powder Controller	HB	ADW
Presenter [Television & Radio]	W	ADW
Prison Officer/Warden	HB	ADW
Process Worker/Operator	HB	ADW
Property Developer [no manual work]	W	ADW
Quarry Worker	HB	ADW
Radio Announcer/Disc Jockey	W	ADW
Railway Maintenance/Track Laying Worker	HB	ADW
Removalist	HB	ADW
Re-stumper	HB	ADW
Rigger	HB	ADW
Roadie/Stage Hand [bands]	HB	ADW
Roof Plumber/Tiler/Worker	HB	ADW

Occupation	Death	TPD
Sandblaster	HB	ADW
Sawmill Worker	HB	ADW
Scaffolder [up to 10m]	HB	ADW
Scrap Metal Dealer	HB	ADW
Seasonal Worker	HB	ADW
Security Guard	HB	ADW
Shearer/Shearing Contractor	HB	ADW
Shunters [Railway]	HB	ADW
Slaughterman	HB	ADW
Sports Coach [Professional]	G	ADW
Sportsperson [Professional]	G	ADW
Stable Hand	HB	ADW
Station Hand	HB	ADW
Steel Erector/Fixer	HB	ADW

Occupation	Death	TPD
Stockman	HB	ADW
Stone Mason	HB	ADW
Strapper [Horse Racing/Trotting]	HB	ADW
Street Cleaner	HB	ADW
Student	W	ADW
Tanner	HB	ADW
Teacher [Dance]	G	ADW
Tennis Coach	G	ADW
Tiler/Slater [Roof]	HB	ADW
Traffic Controller	HB	ADW
Tree Feller/Surgeon	HB	ADW
Wrecker [Building]	HB	ADW

Income protection

Income protection cover

If you're temporarily unable to work because of an injury or sickness, income protection insurance is there to help you cope financially and support you in your return to work.

A monthly benefit is paid if you meet the definition of totally disabled (or partially disabled, after a period of total disability).

Cover is available if you're under 65 and permanently and gainfully employed for at least 15 hours week. (Cover is not available to casual employees). If your hours of work fall below 15 hours during your cover then you may still be eligible to claim under the alternate definition shown on page 16.

Types of cover

We have two main types of cover:

- > Indemnity benefit
- > Agreed Value benefit

Once you've decided which type best suits your occupation and needs, you need to choose the length of waiting period and benefit period.

You can make changes to your cover after commencement but you should be aware that, depending on the nature of the change the insurer may seek additional health or lifestyle information.

Indemnity benefit

An indemnity benefit pays a benefit of up to 75% of your pre-disability income or the amount insured[^], whichever is the lesser (subject to a maximum of a \$30,000 monthly benefit, or \$10,000 per month from age 65).

[^] You can also elect to insure yourself for an additional amount up to 10% of your pre-disability income where

Agreed Value benefit

An agreed value benefit pays a benefit of up to*:

- > 75% of the first \$20,833 of your monthly income, plus
- > 50% of next \$12,500 of your monthly income, plus
- > 25% of next \$32,501 of your monthly income.

up to a maximum of a \$30,000 monthly benefit at the time of application (or \$10,000 per month from age 65). The benefit payable is also restricted to 100% of your pre-disability income.

Your benefit amount will increase annually with inflation by the lower of 5% or the increase in the Consumer Price Index (CPI) on your anniversary in the fund.

The Agreed Value benefit option is not available if you're employed in a 'Heavy blue collar' occupation category. If you work in a 'Blue collar' occupation category, you must be under 55 at the time of your application.

Should you choose and be accepted by the insurer for an Agreed Value benefit, a 20% loading will apply to your premium rates.

The Agreed Value benefit is guaranteed subject to receipt by the insurer of full and satisfactory financial evidence in relation to your application. If financial evidence is not provided at the application stage, that evidence must be provided before the payment of any claim. In the event of a claim, your benefit will be the amount insured that applied immediately prior to the commencement of disability.

* Your income protection benefit will be based on your highest average monthly income for any financial year in the 2 years prior to your date of disablement based on the above formula. The maximum monthly payment for Agreed Value is up to 100% of your Pre-Disability Income minus any offsets.

Applying for cover

If you want cover you'll need to complete the *Application* form in the *Member kit* and provide some additional information about your health and lifestyle by completing a *Personal statement and declaration of health* form. Cover will commence once your application has been approved by the insurer.

Alternatively, if you're under age 55, you can complete a *short-form application* form which will fast-track the process. Short-form applications are subject to the limits on the form.

Forms are available at smartMonday.com.au/resources.aspx.

Choosing your waiting period

When choosing your waiting period, you may want to consider your leave entitlements with your employer (eg sick leave, annual leave, long service leave). You may wish to seek advice or call us on **1300 880 588**.

Choosing a longer waiting period can lower the cost of your cover, but may leave you short on income during this period if you don't have any other income to support you. You can choose from the following waiting periods:

- > 30 days
- > 60 days
- > 90 days

Choosing your benefit period

You can choose from the following maximum benefit periods:

- > Up to 2 years
- > Up to 5 years
- > to age 65

Choosing a shorter benefit period can lower the cost of your cover, but may leave you short on income once the benefit period runs out.

See page 17 for more information on the waiting period and benefit period.

Transferring cover into the fund

You can apply to transfer income protection cover that you have with other super funds or insurers into the fund.

Some conditions and transfer limits may apply so please see the latest *Individual insurance transfer* form available on our website smartMonday.com.au/resources.aspx.

Interim cover (accidental injury cover)

While your application for cover is being assessed you'll be provided with accidental injury cover of up to \$15,000 per month. Accidental injury means a physical injury (which occurs while your policy is in force) that is caused solely and directly by violent, visible, external, and unexpected means that is not traceable, even indirectly, to any pre-existing mental or physical condition.

You'll be covered until:

- > your application is either accepted or rejected by the insurer, or
- > you cancel or withdraw your application, or
- > 90 days from the date we receive your completed application, or
- > your cover would have otherwise ceased.

The maximum benefit period and waiting period for accidental injury cover will be the same as those being applied for.

Exclusions

The following exclusions apply to interim cover:

- > no accidental injury benefit will be payable if disability is caused directly or indirectly by you engaging in any sport or pastime where the insurer would not normally cover you, and
- > any other excluded events set out in this guide.

Disability definitions for income protection

These are the definitions we apply to assess whether you are eligible to receive the income protection benefit.

Total disability - Standard Definition

Applies where you've been working 15 hours or more on average per week in the 3 months (or less, if you've been employed for less) immediately prior to disablement.

You are totally disabled if you've been off work due to injury or sickness for at least 7 out of 12 consecutive days during the waiting period and that, solely due to the injury or sickness, you are:

- › unable to perform at least one Important Duty* of your usual occupation,
- › not engaged in any occupation (whether paid or unpaid),
- › under the regular care, attendance, and following the advice of a registered medical practitioner.

Total disability - Alternative Definition

Applies where you've been working less than 15 hours on average in the 3 months (or less, if you've been employed for less) immediately prior to disablement.

You are totally disabled if you've been off work due to injury or sickness for at least 7 out of 12 consecutive days during the waiting period and, solely by sickness or injury in the insurer's opinion after considering all medical evidence, you are continuously and totally unable to perform (with or without aids and adaptations†) at least 3 of the following activities of daily working as certified by a medical practitioner:

Mobility: the ability to:

- › bend, kneel or squat to pick something up from the floor and straighten up again, and get into and out of a standard sedan car; or
- › the ability to walk more than 200 metres at a normal pace on a level surface without stopping due to breathlessness as a result of a medical condition or angina,

Vision: the ability to see, such that an ophthalmologist can certify that your visual acuity is better than 6/60 in the better eye or a visual field of greater than 10 degrees (ie not legally blind),

* 'Important Duty' means a duty involving at least 20% of overall occupational tasks responsible for generating at least 20% of your pre-disability income.

† Aids and adaptations' refers to equipment or fixtures to assist you without the assistance of another person to carry out the activities.

Lifting: the ability to lift (from bench height) and carry a 5kg weight a distance of 10 metres and place the item back down at bench height,

Communicating: the ability to:

- › speak with sufficient clarity such that you can hold a conversation with another person in a quiet room in your first language. This involves understanding a simple message and relaying that message to another person; or
- › hear such that an audiologist can certify that the Member has a hearing ability of less than or equal to 40db in the better ear (averaged over the frequencies 0.5, 1, 2 and 3 KHz) in an audiometry test,

Manual dexterity: the ability to use:

- › at least one hand to pick up and/or manipulate small objects such as picking up a coin from desk height, using cutlery or fastening buttons; or
- › a pen, pencil or keyboard to write a short note that can be understood by another person in your first language,

Where you are unable to perform one or more of the listed activities on the commencement date of your cover, that activity won't be taken into consideration during the assessment.

Where the Alternative Definition is no longer supported, however medical evidence, in the insurer's opinion, confirms that you are still unable to perform at least one Important Duty* of your usual occupation, benefit payments will continue where you attend a rehabilitation program with a goal of returning to work. Benefit payments will continue until the earlier of the date that you:

- › return to work in a partial capacity;
- › return to full-time work;
- › refuse to continue to participate in the rehabilitation program; or
- › the rehabilitation program ceases.

Partial disability

The insurance benefit will be paid if, after being assessed as totally disabled, you continue to be partially disabled beyond the waiting period (because of the same injury or sickness). Partially disabled means you are:

- › unable to perform at least one Important Duty* of your usual occupation, but have returned to work in your usual occupation or another occupation;
- › earning an income from your usual occupation or another occupation which is less than 75% of your monthly pre-disability income; and
- › under the regular care, attendance, and following the advice of a registered medical practitioner.

How does the income protection benefit work?

If your claim is approved, income protection benefits will be paid monthly in arrears, after the waiting period ends. Your benefit payments cease on the earliest date that you:

- > reach age 65 (or 70, where approved)
- > die
- > no longer satisfy the definitions of total disability or partial disability, or
- > reach your maximum benefit period.

Waiting period

The waiting period is the number of days which must elapse before your income protection benefit starts to accrue. It commences when you're first examined and certified by a medical practitioner as totally disabled in relation to a condition that gave rise to your claim and you've ceased work due to that condition.

Returning to work during the waiting period

You can return to work performing your usual duties during the waiting period for up to:

- > 10 days where the waiting period is 60 or 90 days
- > 5 days where the waiting period is 30 days

without recommencing the waiting period. Where this happens, the waiting period will be extended by the number of days you're at work.

Benefit period

The benefit period is the maximum period during which your income protection benefits will be paid. Your benefits for partial disability during the period will generally be proportionately less than your benefits for total disability.

See page 18 for information on offsets that may apply which would reduce your insured benefit.

Claims escalation benefit

Where you have a maximum benefit period of 5 years or to age 65, your benefit will increase annually with inflation by the lower of 5% or the increase in the Consumer Price Index (CPI) subject to the maximum monthly benefit payable. This will occur one year after your benefit payments commence and annually thereafter.

Rehabilitation expense benefit

If during your benefit period you attend a rehabilitation program which includes a 'return to work' plan approved by the insurer, the cost of that program will be paid by the insurer to the program provider.

Expenses will relate to rehabilitation programs with the aim of rehabilitating you to return to your pre-disability occupation or to retrain you into another occupation.

Recurrent disability benefit

If, within the first 12 months of returning to work in your normal pre-disability capacity following a claim you suffer a recurrence of the same or related disability which caused the claim, it will be treated as the same claim. This means that no waiting period will apply, and the benefit period will be reduced by however long the first claim period was. For example, if you received benefits for 6 months (on a 2 year benefit period) and then you have a recurrence of the same injury 3 months after returning to work, then your remaining benefit period on that claim will be 18 months.

If, after 12 months of returning to work you suffer a recurrence of the same or related disability that caused a previous claim, then that claim will be treated as a new and separate claim, and a new waiting period and benefit period will apply.

Where a claim has been paid for the maximum 2 or 5 year benefit period, no further payments will be made and no further claims will be accepted for the same or related disability unless you return to full time work and have been fully undertaking all of the important income producing duties of your occupation for at least 12 months following the previous claim.

Death while on claim

If you die while you're receiving a monthly benefit, an additional lump sum equal to 3 total disability monthly benefit payments will be paid.

Income protection conditions

Benefit offsets

If any other benefits are payable to you for loss of income, your insurance benefit payments may be reduced so that the total of benefits paid from all sources does not exceed what you're entitled to receive under this insurance benefit. Income from other sources that will reduce your benefit payments includes:

- › workers' compensation
- › motor accident compensation
- › social security benefits
- › any payments received in respect of any other legislation relating to loss of income due to injury or sickness
- › income protection insurance benefits from other insurance policies
- › any paid sick leave entitlements
- › other ongoing income generated from ownership in a business or practice, and
- › ongoing payments from an employer (eg annual leave, long service leave).

Cover to age 70

(Only available to white collar and professional occupation categories)

You can apply to extend your cover to age 70 if you're 63 and still gainfully employed for at least 15 hours per week in each and every normal working week.

Your benefit period will be a maximum of 2 years, and payments will cease on the earlier of 2 years or age 70. The maximum monthly benefit from age 65 is \$10,000.

The cost of your cover will be based on the rates shown in the table on the next page.

You won't be eligible for continuation of cover if you're:

- › self-employed, a contractor or a casual worker, or
- › entitled to receive or have previously received income protection benefits through the fund.

When cover ceases

Your cover will cease on the earliest date that any of the following apply:

- › you turn age 65 (age 70, where approved)
- › you die
- › you request cancellation of cover in writing
- › 60 days after premium payments cease
- › your account balance has fallen below \$5,000 and we've given you 60 days written notice and you haven't topped up your account
- › you cease to be a member of the fund.

Exclusions

Income protection insurance does not cover any injury or sickness arising from:

- › intentionally self-inflicted injury, sickness, or attempted suicide or self-destruction whether sane or insane
- › uncomplicated or normal pregnancy, childbirth or miscarriage
- › declared or undeclared act of war or military action
- › active service in the armed forces of any country or international organisation
- › any underwriting exclusions imposed by the insurer.

Premium rates—benefit payment period up to 2 years

The cost of your insurance is deducted monthly from your account. Costs depend on the annual premium rate for your age, the amount of the benefit, the benefit period and waiting period you have chosen, your gender, your occupation factor, and additional loadings (if any).

The annual premium rates shown here:

- represent the cost of your insurance (per \$100 of monthly benefit)
- are inclusive of a 15% administration fee (plus GST) which is payable by you to Aon Hewitt for insurance administration services provided directly by Aon Hewitt. The fee does not form part of the premium payable to the insurer
- do not reflect any occupational factor. If we're not notified of your occupation category, we will apply a 'heavy blue collar' occupation factor to the calculation of your premium. See page 22 for occupation factors.

Premium rates—benefit period up to 2 years

Age next birthday	30 days	Waiting period				
		60 days Male	90 days	30 days	60 days Female	90 days
16	2.74	1.84	0.98	4.11	2.77	1.46
17	2.74	1.84	0.98	4.11	2.77	1.46
18	2.74	1.84	0.98	4.11	2.77	1.46
19	2.74	1.84	0.98	4.11	2.77	1.46
20	2.74	1.84	0.98	4.11	2.77	1.46
21	2.74	1.84	0.98	4.11	2.77	1.46
22	2.78	1.86	0.98	4.17	2.78	1.46
23	2.81	1.88	0.99	4.23	2.83	1.49
24	2.86	1.90	1.01	4.29	2.87	1.51
25	2.90	1.94	1.01	4.35	2.90	1.51
26	2.92	1.94	0.99	4.38	2.91	1.49
27	2.87	1.95	0.96	4.32	2.95	1.44
28	2.87	1.88	0.93	4.32	2.83	1.39
29	2.89	1.87	0.90	4.34	2.80	1.34
30	2.91	1.88	0.87	4.36	2.83	1.33
31	2.97	1.89	0.87	4.44	2.84	1.33
32	3.03	1.93	0.87	4.54	2.91	1.33
33	3.13	2.00	0.91	4.67	2.99	1.37
34	3.25	2.07	0.93	4.86	3.10	1.40
35	3.39	2.16	0.98	5.08	3.25	1.47
36	3.56	2.28	1.04	5.34	3.40	1.56
37	3.69	2.37	1.10	5.54	3.56	1.64
38	3.90	2.51	1.17	5.86	3.77	1.76
39	4.12	2.66	1.27	6.18	4.00	1.92

Age next birthday	30 days	Waiting period				
		60 days Male	90 days	30 days	60 days Female	90 days
40	4.35	2.83	1.37	6.50	4.23	2.05
41	4.60	3.02	1.50	6.89	4.50	2.23
42	4.90	3.23	1.64	7.35	4.86	2.46
43	5.22	3.47	1.81	7.83	5.22	2.71
44	5.57	3.74	2.01	8.35	5.62	3.02
45	5.95	4.04	2.23	8.92	6.05	3.34
46	6.38	4.38	2.49	9.58	6.57	3.72
47	6.83	4.74	2.78	10.23	7.11	4.17
48	7.32	5.14	3.10	10.97	7.71	4.65
49	7.86	5.59	3.47	11.77	8.40	5.22
50	8.44	6.08	3.89	12.67	9.11	5.84
51	8.97	6.56	4.32	13.46	9.83	6.49
52	9.68	7.15	4.85	14.53	10.72	7.28
53	10.43	7.81	5.46	15.65	11.71	8.17
54	11.26	8.54	6.10	16.89	12.80	9.14
55	12.16	9.35	6.85	18.25	14.04	10.26
56	13.29	10.35	7.75	19.94	15.51	11.62
57	14.25	11.34	8.69	21.38	17.03	13.04
58	15.62	12.46	9.72	23.43	18.68	14.59
59	16.97	13.69	10.87	25.45	20.54	16.32
60	18.44	15.05	12.17	27.68	22.57	18.24
61	19.82	16.32	13.43	29.71	24.48	20.13
62	21.59	17.96	14.98	32.37	26.93	22.46
63	21.59	17.44	14.13	32.37	26.16	21.19
64*	13.58	11.56	8.19	20.36	17.32	12.30
65*	5.32	3.60	1.99	7.98	5.41	2.98

* See page 18 'Cover to age 70'.

Premium rates—professional and white collar—2 year benefit payment period

64	23.49	19.27	15.77	34.55	27.93	22.65
65	25.56	21.29	17.63	36.86	29.84	24.22
66	27.84	23.54	19.68	39.38	31.84	25.81
67	30.38	26.02	21.92	42.16	33.93	27.45
68	33.22	28.65	24.22	45.21	35.99	28.87
69	29.20	23.93	19.58	39.28	29.34	22.48
70	12.86	8.89	6.36	17.35	10.91	7.15

Premium rates—benefit payment period up to 5 years

The cost of your insurance is deducted monthly from your account. Costs depend on the annual premium rate for your age, the amount of the benefit, the benefit period and waiting period you have chosen, your gender, your occupation factor, and additional loadings (if any).

The annual premium rates shown here:

- represent the cost of your insurance (per \$100 of monthly benefit)
- are inclusive of a 15% administration fee (plus GST) which is payable by you to Aon Hewitt for insurance administration services provided directly by Aon Hewitt. The fee does not form part of the premium payable to the insurer
- do not reflect any occupational factor. If we're not notified of your occupation category, we will apply a 'heavy blue collar' occupation factor to the calculation of your premium. See page 22 for occupation factors.

Premium rates—benefit period up to 5 years

Age next birthday	30 days	Waiting period				
		60 days Male	90 days	30 days	60 days Female	90 days
16	3.39	2.34	1.52	5.09	3.50	2.29
17	3.39	2.34	1.52	5.09	3.50	2.29
18	3.39	2.34	1.52	5.09	3.50	2.29
19	3.39	2.34	1.52	5.09	3.50	2.29
20	3.39	2.34	1.52	5.09	3.50	2.29
21	3.39	2.34	1.52	5.09	3.50	2.29
22	3.34	2.26	1.54	4.99	3.39	2.31
23	3.29	2.19	1.56	4.92	3.29	2.34
24	3.25	2.14	1.57	4.86	3.21	2.35
25	3.22	2.10	1.59	4.81	3.14	2.40
26	3.20	2.05	1.57	4.79	3.08	2.35
27	3.22	2.05	1.54	4.81	3.07	2.32
28	3.28	2.05	1.53	4.90	3.09	2.30
29	3.35	2.08	1.54	5.03	3.13	2.31
30	3.46	2.12	1.56	5.20	3.20	2.34
31	3.60	2.19	1.58	5.40	3.28	2.37
32	3.77	2.26	1.62	5.64	3.39	2.43
33	3.96	2.36	1.68	5.94	3.53	2.50
34	4.18	2.47	1.74	6.28	3.70	2.60
35	4.43	2.60	1.82	6.65	3.90	2.71
36	4.72	2.74	1.90	7.07	4.12	2.85
37	5.03	2.92	2.01	7.54	4.38	3.03

Age next birthday	30 days	Waiting period				
		60 days Male	90 days	30 days	60 days Female	90 days
38	5.38	3.11	2.14	8.06	4.68	3.22
39	5.76	3.34	2.30	8.63	5.01	3.45
40	6.19	3.59	2.49	9.27	5.39	3.72
41	6.65	3.88	2.69	9.98	5.82	4.05
42	7.15	4.19	2.93	10.73	6.30	4.41
43	7.71	4.56	3.23	11.56	6.85	4.83
44	8.31	4.98	3.56	12.47	7.47	5.33
45	8.97	5.45	3.94	13.46	8.17	5.90
46	9.70	5.98	4.38	14.54	8.96	6.56
47	10.49	6.56	4.89	15.72	9.84	7.33
48	11.35	7.22	5.49	17.02	10.84	8.22
49	12.29	7.98	6.14	18.43	11.96	9.22
50	13.32	8.81	6.92	19.99	13.23	10.37
51	14.46	9.77	7.78	21.69	14.65	11.68
52	15.70	10.83	8.77	23.54	16.24	13.15
53	17.07	12.02	9.92	25.59	18.02	14.86
54	18.57	13.35	11.17	27.86	20.02	16.75
55	20.24	14.84	12.60	30.36	22.25	18.90
56	22.08	16.50	14.91	33.13	24.75	22.37
57	24.13	18.35	16.87	36.20	27.53	25.33
58	26.42	20.42	18.92	39.64	30.63	28.40
59	28.99	22.73	21.26	43.49	34.11	31.90
60	31.88	25.32	23.22	47.82	37.99	34.83
61	33.17	26.22	22.75	49.76	39.32	34.14
62	32.38	25.49	20.95	48.57	38.22	31.41
63	30.14	23.38	18.02	45.23	35.08	27.04
64*	21.69	15.68	13.74	32.53	23.50	20.61
65*	11.44	6.72	4.89	17.14	10.07	7.34

* See page 18 'Cover to age 70'.

Premium rates—benefit payment period up to age 65

The cost of your insurance is deducted monthly from your account. Costs depend on the annual premium rate for your age, the amount of the benefit, the benefit period and waiting period you have chosen, your gender, your occupation factor, and additional loadings (if any).

The annual premium rates shown here:

- represent the cost of your insurance (per \$100 of monthly benefit)
- are inclusive of a 15% administration fee (plus GST) which is payable by you to Aon Hewitt for insurance administration services provided directly by Aon Hewitt. The fee does not form part of the premium payable to the insurer
- do not reflect any occupational factor. If we're not notified of your occupation category, we will apply a 'heavy blue collar' occupation factor to the calculation of your premium. See page 22 for occupation factors.

Premium rates—benefit payment period to age 65

Age next birthday	Waiting period					
	30 days	60 days	90 days		60 days	90 days
			Male	Female		
16	5.35	4.17	3.33	8.04	6.28	4.99
17	5.35	4.17	3.33	8.04	6.28	4.99
18	5.35	4.17	3.33	8.04	6.28	4.99
19	5.35	4.17	3.33	8.04	6.28	4.99
20	5.35	4.17	3.33	8.04	6.28	4.99
21	5.35	4.17	3.33	8.04	6.28	4.99
22	5.32	4.07	3.21	7.96	6.12	4.81
23	5.28	3.99	3.10	7.92	5.99	4.65
24	5.27	3.92	3.01	7.89	5.88	4.5
25	5.27	3.87	2.92	7.89	5.80	4.38
26	5.28	3.83	2.86	7.92	5.74	4.29
27	5.38	3.84	2.84	8.07	5.77	4.26
28	5.54	3.92	2.85	8.30	5.86	4.28
29	5.75	4.01	2.89	8.61	6.01	4.34
30	6.02	4.14	2.96	9.03	6.23	4.43
31	6.35	4.32	3.05	9.52	6.48	4.57
32	6.89	4.99	3.49	10.32	7.50	5.23
33	7.35	5.29	3.65	11.02	7.93	5.49
34	7.88	5.63	3.86	11.83	8.46	5.78
35	8.50	6.04	4.10	12.75	9.05	6.16
36	9.20	6.49	4.40	13.78	9.74	6.59
37	9.96	7.02	4.74	14.93	10.53	7.09
38	10.91	7.27	4.90	16.37	10.90	7.34
39	11.86	7.90	5.34	17.80	11.87	8.01

Age next birthday	Waiting period					
	30 days	60 days	90 days		60 days	90 days
			Male	Female		
40	12.78	8.63	5.86	19.16	12.96	8.78
41	14.02	9.44	6.38	21.04	14.17	9.58
42	15.10	10.25	7.05	22.65	15.38	10.59
43	16.56	11.26	7.83	24.84	16.87	11.75
44	17.62	12.13	8.54	26.43	18.18	12.83
45	18.73	12.80	9.33	28.08	19.20	14.01
46	20.06	14.07	10.42	30.07	21.11	15.64
47	21.66	15.46	11.63	32.49	23.19	17.45
48	23.35	16.97	12.86	35.03	25.46	19.29
49	25.13	18.60	14.35	37.68	27.90	21.51
50	26.97	20.37	15.95	40.44	30.55	23.94
51	28.57	22.24	17.53	42.86	33.37	26.32
52	30.53	23.99	19.41	45.80	35.98	29.13
53	32.53	26.06	21.41	48.80	39.09	32.12
54	34.57	28.23	23.51	51.87	42.34	35.27
55	36.67	30.46	24.91	54.99	45.69	37.39
56	38.77	32.74	26.51	58.14	49.10	39.77
57	39.92	34.04	28.29	59.88	51.05	42.43
58	40.81	35.04	30.16	61.22	52.56	45.25
59	41.78	36.22	31.71	62.67	54.34	47.58
60	40.57	34.16	29.34	60.87	51.23	44.02
61	33.17	30.12	26.69	49.76	45.19	40.04
62	31.53	28.98	25.80	47.31	43.46	38.69
63	30.14	26.13	23.46	45.23	39.19	35.2
64*	21.66	18.02	15.08	32.49	27.04	22.61
65*	11.37	7.51	5.43	17.03	11.27	8.13

* See page 18 'Cover to age 70'.

Occupation factors for income protection

Occupations are given a risk rating (or factor) according to the type of work performed. The higher risk of death or injury, the higher the risk factor the insurer will apply to the calculation of insurance costs. See the table below for the different occupation categories.

Some occupations may not be eligible for any insurance cover because they're just considered too hazardous. This is up to the insurer to make this determination. See the latest *Occupation ratings* guide available at smartMonday.com.au/resources.aspx. This guide may be updated by the insurer from time to time.

Occupation category	Description	Factor
Class 1 Professional	Professionals, executives (eg CPA/CA accountant, lawyer, doctor, pharmacist) and senior management (eg CEO, CFO) with tertiary qualifications and high incomes.	0.90
Class 2 White collar	Office-based with no manual work, eg clerical roles, professional or administrative roles such as architect, accountant, computer analyst, lecturer, social worker, administrator, clerk	1.00
Class 3 Grey collar	Primarily non-manual but may involve light manual duties only, such as hairdresser, shop assistant, florist, cashier, tailor	1.35
Class 4 Blue collar	Moderate degree of manual work, or recognised qualified trades, such as baker, gasfitter, electrician, mechanic, printer, signwriter, greengrocer	1.75
Class 5 Heavy blue collar	Heavy manual work or those with a degree of additional risk of disability, such as boilermaker, gardener, storeman, tyre fitter, welder.	3.00
Collective	A collective rating applied to all members in a particular employer plan based on the overall risk rating of the members in the plan.	Negotiated with the employer, if applicable

Default occupation category: 'Heavy blue collar'

If we're not notified of your occupation category, we will apply a 'Heavy blue collar' factor to the calculation of your insurance premium.

You can change your occupation category at any time by completing and returning a *Reclassify your occupation* form available at smartMonday.com.au/resources.aspx.

If at claim time the insurer assesses that you have been working in a 'hazardous' or 'uninsurable' occupation (as set out in the latest *Occupation ratings* guide) you will not be eligible for automatic cover. If you have received cover in error, cover will be cancelled from commencement and premiums will be refunded to you. On the other hand, if you've been working in a lower risk occupation than what your premium was calculated on, any overpaid premiums may be added to your benefit payment.

Calculating the cost of your insurance

Your annual premium equals:

$$\text{Monthly benefit} \times \text{annual premium rate} \times \text{occupation factor} \\ \$100$$

Example: You're a female turning 40 and working in an occupation rated as 'grey collar'. You have chosen income protection cover with a waiting period of 30 days and a benefit period of up to 5 years. If you're injured and unable to work, you want to receive a monthly benefit payment of \$1,800 (which is 75% of your normal monthly salary).

Your annual premium would be calculated:

$$\underline{\$1,800} \times \$9.27 \times 1.35 = \underline{\$225.26} \\ \$100$$

The rates and factors shown are correct at the date of issue. Premiums will be deducted from your account and will be shown on your annual benefit statement, or you can view these details online by logging into your account.

General conditions

Worldwide cover

You are covered if you travel overseas, provided you haven't moved overseas permanently.

If you're not an Australian resident (eg working here on a temporary working visa), then you're only covered for a maximum of 3 months while overseas.

The insurer may require you to return to Australia (at your own expense) for the assessment of a claim.

Leave without pay

Death and TPD cover continues while you're on approved leave without pay as long as the premium continues to be paid. Where the disability occurs after 24 months of approved leave without pay, your TPD claim will be assessed against the 'Activities of daily working' definition of TPD.

If you have income protection, you're covered during periods of leave without pay (including maternity/paternity leave) for periods of up to 24 months, as long as the premium continues to be paid. There must be documented evidence of an agreed return to work date and you must return to work within 30 days of the agreed date, or cover will cease. You can apply to extend cover beyond 24 months subject to approval by the insurer.

Duty of disclosure

Before you enter into a contract of life insurance you have a duty under the Insurance Contracts Act 1984 to disclose to the insurer every matter that you know or could reasonably be expected to know, which is relevant to the insurer's decision whether to accept the risk of insurance and, if so, on what terms.

You have the same duty to disclose those matters to the insurer until the insurer agrees to provide the insurance and before you renew, extend, vary or reinstate your cover.

You don't need to tell us anything that:

- > reduces the risk we insure you for; or
- > is common knowledge; or
- > the insurer knows or should know as an insurer; or
- > the insurer waives your duty to disclose.

If you don't tell the insurer something that you know, or could reasonably be expected to know, may affect the insurer's decision to provide the insurance and on what terms, this may be treated as a failure to comply with your duty of disclosure.

If you fail to comply with your duty of disclosure and the insurer would not have entered into the contract on any terms if the failure had not occurred, the insurer may avoid the contract within 3 years of entering into it. If your non-disclosure is fraudulent, the insurer may avoid the contract at any time.

An insurer who is entitled to avoid a contract of life insurance may, within 3 years of entering into it, elect not to avoid it but to reduce the sum that you would have been insured for in accordance with a formula that takes into account the premium that would have been payable if you had disclosed all relevant matters to the insurer.

Economic or trade sanctions

If you have a trade or economic sanction placed against you then you will not be eligible for insurance cover and would not be paid out on any claim received on or after that date. The insurer could be exposed to penalties or restrictions if cover was provided to a sanctioned person.

Privacy

For information about your privacy as it relates to insurance arrangements with the insurer, AIA Australia, their privacy statement is available on their website aia.com.au.

Making a claim

Our claims process

If you need to make a claim, it's likely to be a difficult and emotional time for you. We're there to help you through this period, so the best thing to do is call us on **1300 880 588** and we'll get the ball rolling. We'll do our best to ensure you've got the support you need and your claim is processed as quickly and efficiently as possible.

Our insurer AIA Australia has a simple claims philosophy – "Helping people when they need it most"

AIA Australia assesses each case individually and looks for ways to pay the claim promptly, not avoid it.

They understand that when it comes to claims processing, timeliness and accuracy are critical to getting the experience right for you.

Rehabilitation

A safe and speedy return to work is usually the best outcome for your physical and mental wellbeing.

During the early stages of your income protection claim, we'll work with the insurer to assess your suitability for their range of rehabilitation options which includes things like physical conditioning or workplace retraining programs, counselling, and short courses to develop new skills.

It's completely up to you if you want to participate in rehabilitation. AIA Australia's rehabilitation program is provided in addition to any monthly income protection benefit you receive.

If you want to make your own arrangements (subject to approval by the insurer), the costs will be paid by the insurer to the provider of the program. See the rehabilitation expense benefit on page 17.



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