

Insurance Guide Flexible insurance options to fit your lifestyle

29 SEPTEMBER 2023



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Disclaimer: When writing this document none of your personal financial needs, circumstances and objectives were considered, making all advice in this document general. Before making any super-related decisions, we recommend reading all available information, assessing your financial situation and seeking expert advice from a licensed or authorised financial adviser. We've taken all reasonable care to ensure the accuracy of this information, as required by law, but to the extent permitted by law, do not accept liability for any loss, direct or indirect, as a result of reliance on the information in this document.

The information in this Insurance Guide forms part of the CareSuper Member Guide Product Disclosure Statement dated 29 September 2023. Together with Fact sheets applicable to some Employee Plan members, this Insurance Guide describes the insurance arrangements that apply for members joining the Employee Plan or Personal Plan on or after 29 September 2023.

The information contained in this **Insurance Guide** (and any applicable **Fact sheet**) is a summary only of significant terms and conditions relating to insurance. There are other terms and conditions (including defined terms) in the insurance policies. The insurance terms and conditions, including eligibility for cover and payment of benefits, are applied in line with the policies and super legislation.

Your duty of disclosure

If you apply for life insurance, the insurer will ask you a number of questions.

The insurer's questions will be clear and specific. They will be about things such as your health and medical history, occupation, income, lifestyle, pastimes, and other insurance.

The answers given in response to the insurer's questions are very important. The insurer will use them to decide if it can provide cover to you and, if it can, the terms of the cover, and the insurance fees it will charge.

THE DUTY TO TAKE REASONABLE CARE

If applying for insurance, you have a duty to take reasonable care not to make a misrepresentation.

A misrepresentation could be made if an answer is given that is false, only partially true, or that does not fairly reflect the truth. This means when answering the insurer's questions, you should respond fully, honestly and accurately.

The duty to take reasonable care not to make a misrepresentation applies any time you answer the insurer's questions as part of an initial application for insurance, an application to extend or make changes to existing insurance, or an application to reinstate insurance.

You are responsible for all answers given, even if someone assists you with your application.

The insurer may later investigate the answers given in your application, including at the time of a claim.

Take care to answer all questions the insurer asks as part of any insurance application honestly and accurately.

Otherwise, you may not be able to rely on your insurance when it's needed the most.

GUIDANCE FOR ANSWERING THE INSURER'S QUESTIONS

When answering the insurer's questions, please:

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

OTHER IMPORTANT INFORMATION

Any application for cover you make will be treated as if you are applying for an individual 'consumer insurance contract'. For this reason, the duty to take reasonable care not to make a misrepresentation applies. Before your cover starts, the insurer may ask about any changes that meán you would now answer its questions differently. As any changes might require further assessment or investigation, it could save time if you let the insurer know about any changes when they happen. If, after the cover starts, you think you may not have met your duty, please contact CareSuper immediately and we will let you know whether it has any impact on your cover.

It's important that you understand this information and the questions the insurer asks. If you have any questions contact CareSuper on 1300 360 149.

CONSEQUENCES OF NOT COMPLYING WITH THE DUTY

If there is a failure to comply with the duty to take reasonable care not to make a misrepresentation, it can have serious consequences for your insurance, such as those explained below:

Potential consequences	Additional explanation	Impact on claims
Your cover being avoided	This means your cover will be treated as if it never existed	Any claim that has been made will not be payable
The amount of your cover being changed	Your cover level could be reduced	If a claim has been made, a lower benefit may be payable
The terms of your cover being changed	The insurer could, for example, add an exclusion to your cover meaning claims for certain events will not be payable	If a claim has been made for an event that is now excluded, it will not be payable

If the insurer believes there has been a breach of the duty to take reasonable care not to make a misrepresentation, it will let you know its reasons and the information relied on, and give you an opportunity to provide an explanation.

In determining if there has been a breach of the duty, the insurer will consider all relevant circumstances.

The rights the insurer has if there has been a failure to comply with the duty will depend on factors such as what it would have done had a misrepresentation not been made during your application process, and whether or not the misrepresentation was fraudulently made.

If the insurer decides to take some action on your cover, it will advise you of its decision and the process to have this reviewed or make a complaint if you disagree with the decision.

Insurance cover for CareSuper members is provided by our insurer, MetLife Insurance Limited ('the insurer') ABN 75 004 274 882, AFSL 238096.

Insurance with CareSuper

UNCOVER YOUR INSURANCE BENEFITS WITH CARESUPER

As a super member, you're saving for future you – but your super can also protect you now. With access to three types of insurance, paid from your super account, you can be covered if something hits you out of the blue.

DISCOVER THE TYPES OF INSURANCE COVER WE OFFER

1 DEATH COVER

Provides a benefit in the event of your death or if you are diagnosed with a terminal illness (see the definition of terminal illness on page 32). You must be aged at least 15 and under 75 and meet other eligibility criteria to obtain death cover.



2 TOTAL AND PERMANENT DISABLEMENT (TPD) COVER Provides you with a benefit if you're unable to work again because of illness or injury. You

must be aged at least 15 and under 70 and meet other eligibility criteria to obtain TPD cover.

3 INCOME PROTECTION COVER

Provides you with a temporary income if you are unable to work because of illness or injury (specific conditions apply). You must be aged at least 15 and under 70 and on an ongoing basis be earning at least \$16,000 p.a. or working 15 hours or more per week to be eligible for income protection (other eligibility criteria apply). For members with benefit periods of 5-years or to age 65, we'll automatically switch you to a 2-year benefit period when you reach age 63 (so you can continue to receive income protection until age 70). If you do not wish to have a 2-year benefit period you can cancel your cover. Income protection is only available as voluntary cover.

WHEN INSURANCE COVER IS AUTOMATIC AND WHEN IT'S NOT

Your membership type, age and account balance determine whether or not you receive age-based death and TPD cover automatically on joining CareSuper (subject to eligibility):

	Death cover	TPD cover	Income Protection
Employee Plan			
Aged 25 or over and account balance of \$6,000 or greater on joining	V	~	×
Under age 25 or account balance less than \$6,000 on joining	×	×	×
Personal Plan	×	×	×

Eligible Employee Plan members may receive age-based death and TPD cover automatically (referred to as '100% standard cover'). There are three levels of standard cover 100%, 125% and 150% standard cover. You will be notified in your Welcome Pack of the level of standard cover available to your participation in the Employee Plan, and be provided with a Fact sheet, if applicable to you. Where cover is not automatic, Employee Plan members can elect to receive the standard cover applicable to their participation in the Employee Plan, without providing medical evidence subject to eligibility and commencement of cover conditions. If you elect to receive standard cover

more than 6 months after joining CareSuper, the standard cover will be subject to limited cover conditions.

If you do not elect to receive standard cover while a member of the Employee Plan you will automatically receive standard cover after joining (if you meet eligibility and commencement of cover conditions on pages 23, 25 and 26) when you satisfy the following criteria while a member of the Employee Plan:

- Reach age 25 and
- Have had at least \$6,000 in your account (conditions apply).

You are able to cancel or reduce your cover if it doesn't suit your needs.

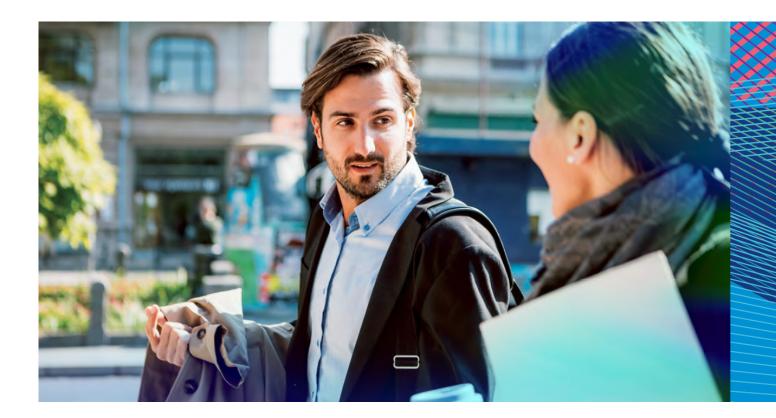
Standard cover is subject to other terms and conditions.

Employee Plan members who do not receive or are ineligible for standard cover and Personal Plan members need to apply for cover. Cover is subject to the approval of the insurer, MetLife Insurance Limited ABN 75 004 274 882, AFSL No 238096.

Insurance fees are deducted from your account at the sell unit price of your chosen investment option/s. Insurance fees include the insurance fees charged by our insurer and an amount that contributes to CareSuper's costs of providing insurance. For information about investment option unit prices see the **Investment Guide**, available at **caresuper.com.au/ investmentguide**.

IMPORTANT

Unfortunately, if you've previously been paid a TPD payment of any type and from any source, including another super fund or a personal insurance policy, you will only be eligible for death cover. If you've received a terminal illness or similar benefit from any source, or if you have previously been diagnosed with an illness that reduces your life expectancy to less than 24 months, you are not eligible for any cover. If this affects you, let us know so we can cancel your cover and stop deducting insurance fees. Otherwise you will pay for cover you are not entitled to claim.



Your insurance cover as an Employee Plan member

DISCOVER WHAT STANDARD DEATH AND TPD COVER OFFERS

Eligible Employee Plan members may automatically receive standard age-based death and TPD cover, without the need for medical checks (conditions apply – see 'Other insurance conditions and exclusions' on pages 26 and 27).

There are three levels of standard cover, depending on your employer. Most Employee Plan members may be eligible for 100% standard cover (the cost and amount of 100% standard cover is set out in this **Insurance Guide**). Some Employee Plan members may be eligible for cover that is 125% of standard cover (called '125% standard cover') or 150% of standard cover (called '150% standard cover'). You will be notified in your Welcome Pack of the level of standard cover available to your participation in the Employee Plan, and be provided with a **Fact sheet**, if applicable to you.

When you first join CareSuper, you won't receive automatic standard cover on joining, unless you meet the eligibility criteria, see page 3 for information on the eligibility criteria. However, you can elect to receive standard cover without providing medical evidence, subject to eligibility and commencement of cover conditions. Also, limited cover (see page 32 for the definition) may apply in some circumstances.

If you do not elect to receive standard cover, you will be given standard cover automatically provided you also satisfy eligibility and commencement of cover conditions (see page 3 for the eligibility criteria and page 23 for the commencement criteria).

You are able to change or remove automatic standard cover if you wish.

YOUR OCCUPATION MAKES A DIFFERENCE TO YOUR COVER

There are two different occupational categories for any standard cover available to eligible Employee Plan members: General and Professional. You automatically go into the General occupational category. If the work you do is limited to professional, managerial, administrative or similar duties which don't involve manual work, you may qualify for the Professional occupational category. Check page 13 for further information and to see if you qualify.

WHAT STANDARD COVER COSTS

The cost of standard age-based death and TPD cover is paid directly from your super account and will vary based on your age, occupational category, gender and the level of standard cover you have. The cost of 100% standard cover for death and TPD is shown on page 6. For the cost of 125% standard cover or 150% standard cover refer to the **125% standard cover Fact sheet** or **150% standard cover Fact sheet**, if applicable to you.

For certain members the insurance fees for standard cover may be paid by your employer. Any insurance and/or administration fees your employer pays, count towards your concessional contribution cap. For more information, go to **caresuper.com.au/knowyourlimits**.



COST OF 100% STANDARD COVER - AGE-BASED DEATH AND TPD COVER

If you are eligible for 100% standard cover, the cost of the age-based death and TPD cover (insurance fees) is paid directly from your super account and will vary based on your age, occupational category and gender.

Insurance fees for age-based death and TPD cover (\$ weekly)

		General				Professional		
	Death	Cover	TPD	Cover	Death Cover		TPD Cover	
Age	м	F	м	F	м	F	м	F
15	0.16	0.07	0.20	0.13	0.19	0.07	0.23	0.13
16	0.16	0.07	0.20	0.13	0.19	0.07	0.23	0.13
17	0.16	0.07	0.20	0.13	0.19	0.07	0.23	0.13
18	0.17	0.07	0.22	0.15	0.21	0.08	0.27	0.17
19	0.22	0.10	0.28	0.19	0.28	O.11	0.31	0.19
20	0.28	0.12	0.35	0.24	0.34	0.13	0.38	0.24
21	0.35	0.15	0.43	0.29	0.42	0.16	0.50	0.28
22	0.44	0.18	0.54	0.38	0.50	0.20	0.56	0.44
23	0.52	0.21	0.65	0.45	0.59	0.28	0.77	0.45
24	0.58	0.24	0.73	0.50	0.67	0.32	0.87	0.51
25	0.67	0.31	1.01	0.71	0.77	0.37	1.24	0.70
26	0.74	0.38	1.35	0.90	0.85	0.44	1.45	1.02
27	0.79	0.42	1.66	1.09	0.88	0.49	1.85	1.23
28	0.86	0.51	2.02	1.41	0.94	0.58	2.18	1.54
29	0.91	0.59	2.47	1.73	0.98	0.65	2.72	1.81
30	2.46	1.73	2.88	2.04	2.83	1.82	3.10	2.19
31	2.68	1.97	3.28	2.40	2.94	2.12	3.59	2.39
32	2.97	2.28	3.94	2.86	3.13	2.39	4.14	3.04
33	3.16	2.51	4.44	3.27	3.31	2.76	4.69	3.41
34	3.36	2.64	4.98	3.72	3.61	2.87	5.09	3.89
35	3.47	2.77	5.36	4.12	3.61	2.96	5.46	4.26
36	3.52	2.95	5.62	4.42	3.59	3.05	5.75	4.67
37	3.60	2.95	5.84	4.75	3.71	3.20	5.96	4.92
38	3.74	2.91	6.08	4.73	4.01	3.03	6.22	4.83
39	3.89	2.96	6.21	4.78	4.00	3.06	6.44	4.87
40	3.92	3.04	6.26	4.95	4.12	3.21	6.64	5.04
41	4.01	3.17	6.48	5.07	4.23	3.28	6.86	5.25
42	4.06	3.23	6.63	5.35	4.24	3.42	6.98	5.61
43	4.31	3.45	6.90	5.57	4.58	3.67	7.33	5.89
44 45	4.44	3.55 3.40	7.09 6.96	5.67 5.49	4.63 4.55	3.72 3.53	7.49 7.45	5.97 5.80
46	4.20	3.30	6.73	5.28	4.58	3.42	7.40	5.63
47	4.00	3.19	6.46	5.12	4.37	3.46	6.97	5.52
48	3.96	3.18	6.36	5.11	4.32	3.51	6.93	5.6
49	3.98	3.29	6.35	5.24	4.30	3.58	6.90	5.74
50	3.93	3.19	6.24	5.09	4.20	3.43	6.77	5.51
51	3.87	3.13	6.19	5.03	4.21	3.39	6.64	5.45
52	3.83	3.02	6.12	4.85	4.09	3.28	6.59	5.27
53	3.93	3.09	6.28	4.94	4.19	3.30	6.70	5.26
54	3.80	3.01	6.12	4.80	4.09	3.24	6.54	5.16
55	3.72	2.95	6.01	4.80	4.02	3.18	6.49	5.13
56	3.66	2.86	5.89	4.60	4.00	3.11	6.42	5.01
57	3.54	2.73	5.70	4.37	3.92	3.02	6.28	4.82
58	3.38	2.52	5.41	4.05	3.79	2.81	6.08	4.53
59	3.39	2.47	5.43	3.95	3.77	2.76	6.06	4.42
60	3.27	2.38	5.49	4.04	3.61	2.62	6.08	4.47
61	2.93	2.14	5.38	3.97	3.23	2.36	5.92	4.36
62	2.64	1.93	5.36	3.89	2.92	2.12	5.89	4.29
63	2.77	2.02	5.57	4.04	3.05	2.23	6.13	4.45
64	3.00	2.19	6.15	4.45	3.30	2.41	6.65	4.83
65	3.22	2.35	6.66	4.83	3.55	2.59	7.19	5.24
66	3.14	2.29	7.22	5.23	3.45	2.53	7.80	5.68
67	3.31	2.42	7.82	5.67	3.64	2.67	8.45	6.16
68	3.49	2.54	8.47	6.15	3.85	2.81	9.16	6.67
69	3.17	2.32	9.18	6.66	3.50	2.55	9.93	7.22
70	3.52	2.58	N/A	N/A	3.89	2.84	N/A	N/A
71	3.92	2.87	N/A	N/A	4.33	3.16	N/A	N/A
72	4.38	3.20	N/A	N/A	4.83	3.52	N/A	N/A
73	4.89	3.58	N/A	N/A	5.40	3.94	N/A	N/A
74	5.46	3.99	N/A	N/A	6.03	4.40	N/A	N/A

- Insurance fees and cover amounts for age based cover are different for the General and Professional occupational categories. To change your occupational category you must apply to our insurer, either through MemberOnline or by using our Changing your occupational category form. A request to change your occupational category will be effective after acceptance of your request. We'll write to you to confirm your new occupational category.
- 2. Insurance fees shown are based on binary gender (male/female) pricing. If we are not advised of your gender your insurance fees will be based on the female gender, this will be updated once we are advised of your gender by either yourself or your employer. If you do not identify as male or female, please contact us and we will notify you of the insurance fees that will be applicable to you.
- Insurance fees include an amount that contributes to CareSuper's costs of providing insurance.
- Figures are rounded to two decimal places for disclosure only and actual insurance fees may differ due to the effects of rounding.
- TPD cover ceases at age 70 and Death cover including terminal illness) ceases at age 75 unless cover ceases for some other reason.

Your insurance cover as an Employee Plan member (continued)

INSURANCE FEES ARE DEDUCTED FROM YOUR SUPER ACCOUNT

With insurance through super you get access to the competitive insurance fees we've been able to negotiate and the convenience of paying for those fees from your account.

The cost of age-based cover is calculated as an annual insurance fee using the weekly insurance fees table on the previous page (or weekly insurance fees table shown in a **Fact sheet**, if applicable to you). Insurance fees are usually deducted from your super account monthly on a pro-rata basis and are determined by the amount of cover provided for the number of days in the month. This usually occurs on the last calendar day of the month or on full withdrawal.

Insurance fee calculations are subject to any adjustments that are necessary, for example, for changes in cover. Your insurance cover is paid for using your super and not your take-home pay. Your account is also credited with a 15% contributions tax deduction benefit on the insurance fees you pay.

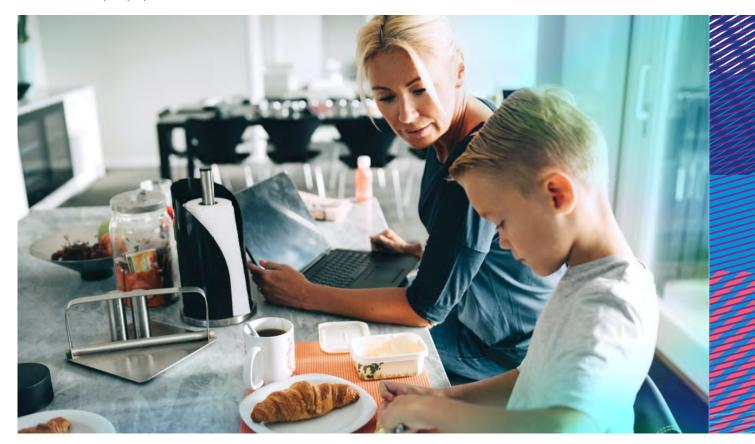
INSURANCE COVER ON PARENTAL LEAVE AT NO COST

If you are on employer-approved parental leave, and not receiving Superannuation Guarantee contributions, you can request a waiver of your insurance fees for death, TPD and income protection for up to 24 months subject to satisfying certain criteria. This means your insurance cover can continue while you are on parental leave without any applicable insurance fees being deducted from your account, if you are eligible, unless cover ceases for some reason. The 24 months starts from the first day of the month after you start parental leave and ends the last day of the month you return to work. You have a 6-month window from the date you return to work to take up the offer. To take up the offer please complete a Parental leave insurance fee waiver form available at caresuper.com.au/forms. Other conditions apply.

If a refund is required for a back dated period the refund will be made as a lump sum effective the date the payment is allocated to your account.

STANDARD COVER AMOUNTS

The amount of death and TPD cover provided with standard age-based cover for eligible Employee Plan members depends on whether 100% standard cover, 125% standard cover or 150% standard cover applies to you. The amount of age-based death and TPD cover provided with 100% standard cover is shown on page 8. For the amount of age-based death and TPD cover provided with 125% standard cover or 150% standard cover, refer to the **Fact sheet**, if applicable to you.



Age-based death and TPD cover amounts (\$)

If you are eligible for 100% standard cover, the amount of age-based death and TPD cover you receive depends on your age and occupational category.

_	Gen	eral	Professional		
Age	Death cover	TPD cover	Death cover	TPD cover	
15	20,000	50,000	53,250	133,000	
16	20,000	50,000	53,250	133,000	
17	20,000	50,000	53,250	133,000	
18	22,000	55,000	70,000	175,000	
19	28,000	70,000	80,000	200,200	
20	35,250	88,000	99,750	249,200	
21	43,250	108,000	116,500	291,200	
22	53,250	133,000	130,500	326,200	
23	62,000	155,000	134,500	336,000	
24	69,250	173,000	151,250	378,000	
25	78,000	195,000	161,250	403,200	
26					
_	85,250	213,000	178,000	445,200	
27	91,250	228,000	183,750	459,200	
28	98,000	245,000	189,250	473,200	
29	103,250	258,000	189,250	473,200	
30	273,000	273,000	476,000	476,000	
31	285,000	285,000	480,200	480,200	
32	298,000	298,000	480,200	480,200	
33	305,000	305,000	480,200	480,200	
34	313,000	313,000	483,000	483,000	
35	307,250	307,250	483,000	483,000	
36	296,000	296,000	468,500	468,500	
37	284,750	284,750	450,750	450,750	
38	271,000	271,000	427,000	427,000	
39	257,250	257,250	409,750	409,750	
40	243,750	243,750	398,250	398,250	
41	230,000	230,000	380,750	380,750	
42	216,250	216,250	357,250	357,250	
43	204,500	204,500	341,500	341,500	
44	194,750	194,750	317,800	317,800	
45	179,000	179,000	296,800	296,800	
46	161,000				
_		161,000	274,400	274,400	
47	146,000	146,000	261,800	261,800	
48	136,000	136,000	247,800	247,800	
49	129,000	129,000	233,800	233,800	
50	118,000	118,000	212,800	212,800	
51	108,000	108,000	194,600	194,600	
52	98,000	98,000	176,400	176,400	
53	92,000	92,000	159,600	159,600	
54	84,000	84,000	147,000	147,000	
55	77,000	77,000	137,200	137,200	
56	70,000	70,000	128,800	128,800	
57	62,000	62,000	120,400	120,400	
58	52,000	52,000	106,400	106,400	
59	46,000	46,000	92,250	92,250	
60	39,000	39,000	76,250	76,250	
61	31,000	31,000	59,750	59,750	
62	25,000	25,000	48,000	48,000	
63	24,000	24,000	46,200	46,200	
64	24,000	24,000	46,200	43,400	
_					
65	24,000	24,000	46,200	43,400	
66	22,000	24,000	42,400	43,400	
67	22,000	24,000	42,400	43,400	
68	22,000	24,000	42,400	43,400	
69	19,000	24,000	36,600	43,400	
70-74	19,000	N/A	36.600	N/A	

Example age-based cover calculation

Marcus, age 28, is in the General occupational category, and has an account balance of more than \$6,000 at the date his cover commences on 1 April 2023, so his death cover is \$98,000 and his TPD cover is \$245,000 (assuming he meets all other eligibility and commencement of cover conditions).

He will pay \$0.86 per week for death cover and \$2.02 for TPD cover — a total of \$2.88 per week or \$149.76 per year.

Insurance fees are rounded for disclosure only and may vary slightly from what is deducted from your account.

If you're not in active employment (see definition on page 31) for all of the first 30 days from the date your cover commences, limited cover (see definition on page 32) will apply. If you receive standard cover, it will be limited cover:

- We haven't yet received an employer contribution within 4 months of you first being eligible,
- We don't receive an employer contribution for you that covers the date you receive cover, or
- You elect to receive cover more than 6 months after joining the fund.

For further explanation of active employment and limited cover, see pages 31.and 32.

- TPD cover ceases at age 70 and death cover (including terminal illness) ceases at age 75, unless cover ceases for some other reason. See page 25 for more information about when cover ceases.
- If you are under age 15, you can elect to receive standard cover when you turn age 15, subject to satisfying the commencement of cover conditions on page 23 and other terms and conditions. Limited cover may apply depending on when you make the election.

Your insurance cover as an Employee Plan member (continued)

YOU'RE ONE OF A KIND. WE'VE GOT INSURANCE OPTIONS TO FIT YOU

Sometimes custom-made is the best way to get exactly what you want. That's why we offer plenty of choice when it comes to the types and amounts of insurance you can have. The insurance fees you pay depend on the options you choose.



SPECIAL INSURANCE OFFER FOR ELIGIBLE NEW MEMBERS WITH STANDARD COVER

New Employee Plan members with standard cover have access to a special welcome offer – New Member Options cover. If you're under 60, you can apply to increase your death and TPD cover and/or add income protection cover. You must be eligible for the increased, fixed or additional cover at the time you request it.

- Increasing death and TPD cover
 - You can do this by fixing your cover at a set dollar amount (See page 15 of this guide for the cost of fixed cover), or
 - By increasing the standard age based death and TPD cover in multiples of 25% of standard age-based cover (subject to a maximum amount, depending on your occupational category). See page 10 for further details.

- These multiples are based on the amounts in the table shown on the previous page. Maximum cover amounts apply to both fixed and age-based cover either way you can increase cover up to the lesser of seven times your total annual income or \$750,000.
- Adding income protection cover If you are adding income protection cover, maximum amounts apply depending on your total income (see definition on page 31) and occupational category:

Occupational category	Maximum benefit
General	\$7,500 per month
Professional	\$11,000 per month

You'll need to satisfactorily answer a few simple questions to apply for New Member Options cover – it's a great opportunity to think about what insurance you need and adjust your cover accordingly without providing detailed medical evidence.

This offer is only available in the first 90 days after you join CareSuper and is subject to some terms and conditions as outlined in this Insurance Guide. The New Member Options cover will not commence until standard cover eligibility conditions have been met and your standard cover commences. If we receive your valid application for New Member Options cover within 90 days of you joining CareSuper but your standard cover does not commence within 6 months of joining, the offer will expire. Otherwise, the New Member Options cover will commence from the later of the date standard cover commences and date your application is accepted. You can apply by completing the Insurance application form available at **caresuper.com.au/forms** or by logging in to Member Online and going to the Insurance cover section.

If you want to increase your death and TPD cover and/or add income protection cover at a later time or above what is offered through the New Member Options, it's likely you will be required to provide detailed medical evidence and your application may be subject to insurance fee loadings and/or exclusions if approved.

For information about the special insurance offer available to eligible new Employee Plan Members who receive 125% standard cover or 150% standard cover refer to the **Fact sheet**, if applicable to you.

OPTIONS AVAILABLE TO INCREASE 100% STANDARD COVER UNDER THE NEW MEMBER OFFER

As a new Employee Plan member who has received 100% standard cover, if you are eligible, you can increase your death and TPD cover to a multiple of 1.25, 1.50, 1.75 or 2.00 of the amounts applicable to you as shown on page 8 of this Insurance Guide. Eligible members with 100% standard cover in the Professional occupational category can choose to increase to 1.25 or 1.50 of the amount applicable to you, as shown on page 8 of this Insurance Guide.

The cost of your cover increases in the same way. For example, if you choose to increase your cover to a multiple of 1.50 of the amount applicable to you on page 8 of this Insurance Guide, then the cost goes up to 1.50 times the insurance fees shown on page 6 of this Insurance Guide.

Example calculation for an Employee Plan member with 100% standard cover

Meredith is 38, has an account balance greater than \$6,000 and is in the General occupational category. Her standard age-based cover is \$271,000 for death and \$271,000 for TPD assuming she meets eligibility and commencement of cover conditions. She is interested in increasing her cover up to a multiple of 1.50 and wants to check the amounts and cost of cover. She looks up the cover amounts in the table on page 8 and the insurance fees in the table on page 6 and multiplies these by 1.50.

Amount of death cover	Amount of TPD cover	
\$271,000 × 1.50 = \$406,500	\$271,000 x 1.50 = \$406,500	
Cost of death + cost of TPD cover = total cost per week		
(\$2.91 × 1.50 = \$4.36) + (\$4.73 × 1.50 = \$7.10) = \$11.46 per week		
Insurance fees are rounded for disclosure only and may vary slightly to what is deducted from your account.		

Note: Employee Plan members who receive 125% or 150% standard cover should refer to the applicable Fact sheet for details of the amount of death and TPD cover (and associated costs) available to them under New Member Option.



Your insurance cover as an Employee Plan member (continued)

NOW IT'S YOUR TURN

If you're interested in increasing your cover, use this worksheet to help you check the cover amount and cost. This is a guide only. Remember the multiple you can choose may be different depending on the level of standard cover you automatically receive when you become eligible. Limits also apply to the multiple you can choose. Call us on 1300 360 149 to confirm what will apply to you including whether the New Member Option is available to you.

First, calculate your cover amou 150% standard cover refer to the	nt using the table on page 8 for 10 e relevant Fact sheet for amounts o	0% standard cover (for 125% and of cover).	
The amount of death cover in the table for your age and occupation	Your chosen multiple for death cover		
		Increased death cover amount	
\$×	<	=	
The amount of TPD cover in the table for your age and occupation	Your chosen multiple for TPD cover		
		Increased TPD cover amount	
\$×		=	
Now look up the insurance fees standard cover (for 125% and 15	for your age, occupational categor 0% standard cover refer to the rele	y and gender in the table on pag want Fact sheet for insurance fee	e 6 for 100% es).
The insurance fees shown in	The insurance fees shown ir)	

CHANGE OR CANCEL YOUR EMPLOYEE PLAN COVER

You can apply at any time to:

- Elect to receive standard cover without providing medical evidence if you don't receive standard cover automatically on joining (eligibility and commencement of cover conditions apply on pages 23, 26 and 27),
- Tailor the amount of death and TPD cover you choose (fixed or permitted amounts of age-based) by being assessed and approved by our insurer (medical evidence may be required)
- Change your occupational category to the Professional occupational category if you meet the criteria (see page 13 for more details)
- Fix your age-based death and/or TPD cover so that your amount of cover will stay the same

- Add or increase income protection cover from date approved
- Change the benefit period or waiting period of any income protection cover you may have from date approved
- Change any standard age-based death and/or TPD cover in multiples of 25% of standard age-based cover to a maximum of 200% (25% is the minimum you can hold) of the cover amounts shown on page 8 of this guide, with effect from the date we receive your request (increases will be subject to underwriting)
- Reduce your fixed cover. A minimum of \$10,000 applies and your fixed cover must be in multiples of \$1,000
- Cancel any of your cover, with effect from the start of the date we receive your request (you will not be covered for this day), if it doesn't suit your needs.

Generally, all applications to change occupational category, increase, fix or add cover will need to be assessed and approved by our insurer, and medical evidence may be required. See 'Tailoring insurance to your needs' starting on page 13 for more information, including costs and how to apply. Limited cover may apply in some circumstances.

If you're under 60, you may also be able to transfer your cover from another super fund (subject to maximum limits). See 'Bring all your insurance together' on page 22 for more information.

Your insurance cover as a Personal Plan Member

Personal Plan members don't receive insurance cover automatically but can apply for cover and there are plenty of options.

You can at any time:

- Choose the occupational category that best matches your occupation based on the criteria (see page 13 for more details), from date approved
- Apply for age-based or fixed death only, TPD only or death and TPD cover
- Apply for income protection cover
- Change the benefit period or waiting period of any income protection cover you may have, from date approved
- Change any standard age based death and/or TPD cover in multiples of 25% of standard age-based cover to a maximum of 200% (25% which is the minimum you can hold) of the cover amounts shown on page 8 of this guide, with effect from the date we receive your request
- Reduce any fixed cover. A minimum of \$10,000 applies and your fixed cover must be in multiples of \$1,000

• Cancel any of your cover, with effect from the start of the date we receive your request (you will not be covered for this day), if it doesn't suit your needs.

All applications for cover (or increased cover) will usually need to be assessed and approved by our insurer and medical evidence may be required. You must have a minimum account balance of \$1,500 before cover commences.

See 'Tailoring insurance to your needs' starting on page 13 for more information, including costs and how to apply.

If you're under 60, you may be able to transfer your cover from another super fund (subject to maximum limits). See 'Bring all your insurance together' on page 22 for more information.

INSURANCE COVER ON PARENTAL LEAVE AT NO COST

If you are on employer-approved parental leave you can request a waiver of your insurance fees for death, TPD and income protection for up to 24 months subject to satisfying certain criteria. This means your insurance cover can continue while you are on parental leave without any applicable insurance fees being deducted from your account, if you are eligible, unless cover ceases for some reason. The 24 months starts from the first day of the month after you start parental leave and ends the last day of the month you return to work. You have a 6-month window from the date you return to work to take up the offer. To take up the offer please complete the Parental leave insurance fee waiver form available at caresuper.com.au/forms. Other conditions apply.

If a refund is required for a back dated period the refund will be made as a lump sum effective the date the payment is allocated to your account.



Tailoring insurance to your needs

You've got plenty of choice about the types and amount of insurance you can have with us.

You can apply for cover up to the maximum levels below.

Your insurance options (evidence of health required)	Maximum limit
Death	Up to \$10 million (age-based and fixed) Terminal illness claim is capped at \$3 million and the insured balance paid on death
TPD	Up to \$3 million (age-based and fixed)
Income protection	2-year and 5-year benefit periods Up to \$40,000 per month* To age 65 benefit period Up to \$30,000 per month*

* See page 16 for more information on the maximum monthly benefit for tailored income protection cover based on income. See 'Your options to vary income protection' on page 16 for information on benefit periods.

Additional limits may apply for transferred cover.

CHOOSE THE CATEGORY THAT BEST MATCHES YOUR OCCUPATION

What you do for a living can make a difference to how much cover you have, and how much it costs.

Different roles and occupations have different levels of risk. CareSuper has two occupational categories:

- General, and
- Professional.

Your occupational category affects the amount and cost of any standard death and TPD cover you hold. It also affects the cost of fixed death only or death and TPD cover or income protection cover.

If you are an Employee Plan member, you automatically go into the General occupational category when youfirst receive cover. If you meet the eligibility criteria for the Professional occupational category, you can apply to change your category to better match what you do (if eligible).

If you are a Personal Plan member, your occupational category will be determined by the insurer when you apply for insurance cover.

To determine your occupational category, answer the following questions:

1	Are the duties of your occupation limited to professional, managerial, administrative or similar duties which do not involve manual work?	NO 🔶	General
		yes 🔶	Continue to Q2
2	Are you earning* in excess of \$125,000 p.a. from your profession? If you currently work part-time and your full-time equivalent salary is	NO 🔶	General
	more than \$125,000 p.a., you're eligible to answer 'yes' to this question.	yes 🔶	Continue to Q3
3	a) Do you hold a tertiary qualification or are you a member of a professional institute or registered as a practicing member of your profession by a government body?	NO 🔶	General
	or b) Do you work in a management or a leadership role?	YES 🔶	Professional

* To calculate your earnings, see the relevant definition of 'total income' on page 34

You can use the table on page 15 to work out what your insurance fees will be for fixed cover and pages 17 to 19 to work out your insurance fees for income protection cover.

You can apply to change your occupational category via MemberOnline or by completing the **Changing your occupational category** form available at **caresuper.com.au/forms**. You will need to satisfactorily answer a few simple health questions to ensure you're eligible to change your cover and any change is subject to approval. Each time you complete a new application form or apply to vary your insurance cover, your occupational category will be assessed by our insurer. You may be required to provide further health evidence and if your application is approved, any additional cover may be subject to insurance fee loadings and/or exclusions. If changing your occupational category increases your cover, the active employment (see definition on page 31) test will apply. This means if you're not in active employment for all of the first 30 days from the date your cover increases, limited cover (see definition on page 32) conditions apply to the increased cover. Once you return to active employment for 2 consecutive months, full cover will apply unless limited cover applies to your existing cover for any other reason.

CHOOSE YOUR DEATH AND TPD COVER AMOUNT

You can apply for a fixed amount of cover at any time (subject to maximum limits see page 13). Your application needs to be assessed and approved by our insurer and medical evidence may be required. If your application is accepted, the fixed cover replaces any standard cover for death and TPD you may hold.

FIXED COVER

With fixed cover, the amount of death and TPD cover generally stays the same, but your insurance fees are determined by your age, gender and occupational category. Insurance fees increase as you get older. A minimum of \$10,000 applies and your fixed cover must be in multiples of \$1,000.

COST OF FIXED COVER

To calculate your annual insurance fee, divide your required level of cover by \$1,000 and multiply the insurance fee for your age, gender and occupational category.

The cost of your cover is calculated using annual insurance fees and deducted monthly on a pro-rata basis and is determined by the amount of cover you hold for the number of days in the month. Your cover is paid from your super and not your take-home pay. Your account also receives a 15% contributions tax deduction benefit on the insurance fees you pay.

See page 15 for our fixed cover insurance fees.

Example fixed cover calculation

Claire is in the General occupational category and has applied for \$550,000 of fixed death and TPD cover. Using the table on page 15, the cost of her cover at various ages (if approved) is:

Age 30 \$550,000		\$0.72 (\$0.33 for death and \$0.39 for TPD)	<u> </u>
\$1,000	Х	= \$396.00 p.a.	
Age 40			
\$550,000	×	\$1.71 (\$0.65 for death and \$1.06 for TPD)	
\$1,000	~	= \$940.50 p.a.	
Age 50			
\$550,000	×	\$3.66 (\$1.41 for death and \$2.25 for TPD)	
\$1,000	~	= \$2,013.00 p.a.	
\$550,000 \$1,000 Age 50 \$550,000	×	= \$940.50 p.a. \$3.66 (\$1.41 for death and \$2.25 for TPD)	

For how to apply for a fixed amount of cover, see 'Applying for our tailored cover options' on page 20. The above is an example only. Insurance fees are rounded for disclosure only and may vary slightly to what is deducted from your account. Contact us on 1300 360 149 to find out what insurance fees will be applicable to you.

Tailoring insurance to your needs (continued)

Insurance fees per year, per \$1,000 of fixed death and TPD cover (\$)

		Gen	eral		Professional					
	Death	Cover	TPD (Cover	Death	Cover	TPD (Cover		
Age	м	F	м	F	м	F	м	F		
15	0.42	0.18	0.21	0.14	0.19	0.07	0.09	0.05		
16	0.42	0.18	0.21	0.14	0.19	0.07	0.09	0.05		
17	0.42	0.18	0.21	0.14	0.19	0.07	0.09	0.05		
18	0.40	0.17	0.21	0.14	0.16	0.06	0.08	0.05		
19	0.41	0.18	0.21	0.14	0.18	0.07	0.08	0.05		
20	0.41	0.18	0.21	0.14	0.18	0.07	0.08	0.05		
21	0.42	0.18	0.21	0.14	0.19	0.07	0.09	0.05		
22	0.43	0.18	0.21	0.15	0.20	0.08	0.09	0.07		
23	0.44	0.18	0.22	0.15	0.23	O.11	0.12	0.07		
24	0.44	0.18	0.22	0.15	0.23	O.11	0.12	0.07		
25	0.45	0.21	0.27	0.19	0.25	0.12	0.16	0.09		
26	0.45	0.23	0.33	0.22	0.25	0.13	0.17	0.12		
27	0.45	0.24	0.38	0.25	0.25	0.14	0.21	0.14		
28	0.46	0.27	0.43	0.30	0.26	0.16	0.24	0.17		
29	0.46	0.30	0.50	0.35	0.27	0.18	0.30	0.20		
30	0.47	0.33	0.55	0.39	0.31	0.20	0.34	0.24		
31	0.49	0.36	0.60	0.44	0.32	0.23	0.39	0.26		
32	0.52	0.40	0.69	0.50	0.34	0.26	0.45	0.33		
33	0.54	0.43	0.76	0.56	0.36	0.30	0.51	0.37		
34	0.56	0.44	0.83	0.62	0.39	0.31	0.55	0.42		
35	0.59	0.47	0.91	0.70	0.39	0.32	0.59	0.46		
36	0.62	0.52	0.99	0.78	0.40	0.34	0.64	0.52		
37	0.66	0.54	1.07	0.87	0.43	0.37	0.69	0.57		
38	0.72	0.56	1.17	0.91	0.49	0.37	0.76	0.59		
39	0.79	0.60	1.26	0.97	0.51	0.39	0.82	0.62		
40	0.84	0.65	1.34	1.06	0.54	0.42	0.87	0.66		
41	0.91	0.72	1.47	1.15	0.58	0.45	0.94	0.72		
42	0.98	0.78	1.60	1.29	0.62	0.50	1.02	0.82		
43	1.10	0.88	1.76	1.42	0.70	0.56	1.12	0.90		
44	1.19	0.95	1.90	1.52	0.76	0.61	1.23	0.98		
45	1.27	0.99	2.03	1.60	0.80	0.62	1.31	1.02		
46	1.36	1.07	2.18	1.71	0.87	0.65	1.37	1.07		
47	1.43	1.14	2.31	1.83	0.87	0.69	1.39	1.10		
48	1.52	1.22	2.44	1.96	0.91	0.74	1.46	1.18		
49	1.61	1.33	2.57	2.12	0.96	0.80	1.54	1.28		
50	1.74	1.41	2.76	2.25	1.03	0.84	1.66	1.35		
51	1.87	1.51	2.99	2.43	1.13	0.91	1.78	1.46		
52	2.04	1.61	3.26	2.58	1.21	0.97	1.95	1.56		
53	2.23	1.75	3.56	2.80	1.37	1.08	2.19	1.72		
54	2.36	1.87	3.80	2.98	1.45	1.15	2.32	1.83		
55	2.52	2.00	4.07	3.25	1.53	1.21	2.47	1.95		
56	2.73	2.13	4.39	3.43	1.62	1.26	2.60	2.03		
57	2.98	2.30	4.80	3.68	1.70	1.31	2.72	2.09		
58	3.39	2.53	5.43	4.06	1.86	1.38	2.98	2.22		
59	3.84	2.80	6.16	4.48	2.13	1.56	3.43	2.50		
60	4.37	3.19	7.34	5.40	2.47	1.79	4.16	3.06		
61	4.94	3.61	9.05	6.69	2.82	2.06	5.17	3.81		
62	5.51	4.03	11.19	8.12	3.17	2.30	6.40	4.66		
63	6.02	4.40	12.11	8.79	3.45	2.52	6.92	5.03		
64	6.53	4.76	13.36	9.68	3.73	2.72	7.99	5.81		
65	7.01	5.12	14.47	10.50	4.01	2.92	8.65	6.30		
66	7.45	5.44	15.69	11.37	4.25	3.11	9.38	6.83		
67	7.85	5.73	17.00	12.33	4.48	3.28	10.16	7.40		
68	8.27	6.03	18.42	13.37	4.74	3.46	11.01	8.02		
69	8.71	6.36	19.96	14.49	4.99	3.64	11.94	8.68		
70	9.68	7.08	N/A	N/A	5.55	4.05	N/A	N/A		
71	10.77	7.87	N/A	N/A	6.17	4.50	N/A	N/A		
72	12.03	8.78	N/A	N/A	6.88	5.02	N/A	N/A		
73	13.44	9.82	N/A	N/A	7.70	5.62	N/A	N/A		
74	15.00	10.95	N/A	N/A	8.59	6.27	N/A	N/A		

Note:

- Insurance fees differ depending on your occupational category. To change your occupational category, you must apply to our insurer either through Member Online or by using our Changing your occupational category form available at caresuper.com.au/forms. A request to change your occupational category will be effective after acceptance of your request. We'll write to you to confirm your new occupational category after acceptance of your request.
- 2. TPD cover ceases at age 70 and death cover (including terminal illness) ceases at age 75, unless for some other reason.
- 3. Insurance fees shown are based on binary gender (male/female) pricing. If we are not advised of your gender your insurance fees will be based on the female gender, this will be updated once we are advised of your gender by either yourself or your employer. If you do not identify as male or female, please contact us and we will notify you of the insurance fees that will be applicable to you.
- Insurance fees include an amount that contributes to CareSuper's costs of providing insurance.
- Figures are rounded to two decimal places for disclosure only and actual insurance fees may differ due to the effects of rounding.



APPLYING FOR INCOME PROTECTION

You can apply at any time if you're:

- Under 70 for benefit period of 2-years
- Under 63 for benefit periods of 5-years or up to age 65. We'll automatically switch any member who has a 5-year or to age 65 income protection benefit period to a 2-year benefit when they reach age 63 (so they can continue to receive income protection cover until age 70). If you do not wish to have a 2-year benefit period you can cancel your cover
- A full-time, part-time, self-employed or casual worker or contractor, and
- Either:
 - Earning at least \$16,000 p.a. through ongoing work, or
 - Working at least 15 hours each week.

You will not be eligible for income protection cover if you have previously been paid a TPD or similar benefit, have been paid a terminal illness benefit, or have been diagnosed with an illness that reduces your life expectancy to less than 24 months.

If you suffer an illness or injury, the maximum income protection benefit payable is:

- If you selected a 2-year or 5 year benefit period, the lesser of 87% of your pre-disability income or the amount of cover you hold, or
- If you selected a benefit period to age 65, the lesser of 87% of your pre-disability income for the first 2 years, then after 2 years the

benefit payment will reduce to 62% of your pre-disability income or the amount of cover you hold.

We'll pay 12% to your CareSuper account as superannuation contributions, the balance will be paid to you as income (less applicable tax). For the definition of pre-disability income, refer to the income definitions provided on page 31.

Your benefit may also be reduced if you receive other income or disability benefits (find out more on page 30).

To work out how much income protection cover to apply for, estimate how much income you would need if you weren't working. If you select to have a 5-year or to age 65 benefit period and make a successful claim, your income protection benefit payment amount will increase by the lesser of the Consumer Price Index (CPI) and 5% for each 12-month period while on claim.

YOUR OPTIONS TO VARY INCOME PROTECTION

You can choose from the following options to tailor this cover to your circumstances:

- A waiting period of 30, 60 or 90 days, and
- A benefit period of 2 years, 5 years or to age 65.

Your waiting period is how long you'll need to wait before you qualify to receive benefit payments and your benefit period is the maximum amount of time benefits may be paid for. If you don't select a waiting period, 30 days will apply. By choosing to wait longer to receive your benefit, you can reduce the cost. If you don't select a benefit period when tailoring income protection cover, the 2-year benefit period will apply. If you choose the 5-year or to age 65 benefit period, the cost increases.

COST OF INCOME PROTECTION

The cost of income protection cover is based on your gender, age, occupational category and the waiting period and benefit period as shown in the tables on pages 17 to 19. The cost of income protection cover is calculated by using an annual insurance fee for each \$100 per month of cover. Insurance fees are deducted from your super account monthly on a pro-rata basis and are determined by the amount of cover provided for the number of days in the month. This occurs on the last calendar day of the month or on full withdrawal. Insurance fee calculations are subject to any adjustments that are necessary, for example, for changes in cover or a change in age. Your account also receives a 15% contributions tax deduction benefit for the insurance fees you pay.

2-year benefit period - annual insurance fee per \$100 monthly benefit (\$)

	30 days		General 60 days 90 days									
_							30 days			days		days
Age	м	F	м	F	м	F	м	F	м	F	м	F
15	\$2.27	\$3.34	\$1.36	\$1.97	\$0.88	\$1.22	\$1.61	\$2.33	\$0.94	\$1.38	\$0.58	\$0.87
16	\$2.27	\$3.34	\$1.36	\$1.97	\$0.88	\$1.22	\$1.61	\$2.33	\$0.94	\$1.38	\$0.58	\$0.87
17	\$2.27	\$3.34	\$1.36	\$1.97	\$0.88	\$1.22	\$1.61	\$2.33	\$0.94	\$1.38	\$0.58	\$0.8
18	\$2.27	\$3.34	\$1.36	\$1.97	\$0.88	\$1.22	\$1.61	\$2.33	\$0.94	\$1.38	\$0.58	\$0.8
19	\$2.27	\$3.34	\$1.36	\$1.97	\$0.88	\$1.22	\$1.61	\$2.33	\$0.94	\$1.38	\$0.58	\$0.8
20	\$2.27	\$3.34	\$1.36	\$1.97	\$0.88	\$1.22	\$1.61	\$2.33	\$0.94	\$1.38	\$0.58	\$0.8
21	\$2.27	\$3.34	\$1.36	\$1.97	\$0.88	\$1.22	\$1.61	\$2.33	\$0.94	\$1.38	\$0.58	\$0.8
22	\$2.27	\$3.34	\$1.36	\$1.97	\$0.88	\$1.22	\$1.61	\$2.33	\$0.94	\$1.38	\$0.58	\$0.8
23	\$2.27	\$3.34	\$1.36	\$1.97	\$0.88	\$1.22	\$1.61	\$2.33	\$0.94	\$1.38	\$0.58	\$0.8
24	\$2.27	\$3.34	\$1.36	\$1.97	\$0.88	\$1.22	\$1.61	\$2.33	\$0.94	\$1.38	\$0.58	\$0.8
25	\$2.27	\$3.34	\$1.36	\$1.97	\$0.88	\$1.22	\$1.61	\$2.33	\$0.94	\$1.38	\$0.58	\$0.8
26	\$2.28	\$3.43	\$1.35	\$2.05	\$0.85	\$1.31	\$1.62	\$2.39	\$0.94	\$1.43	\$0.57	\$0.9
27	\$2.32	\$3.54	\$1.36	\$2.13	\$0.84	\$1.37	\$1.66	\$2.48	\$0.94	\$1.50	\$0.56	\$0.9
28	\$2.37	\$3.70	\$1.38	\$2.22	\$0.84	\$1.42	\$1.70	\$2.58	\$0.96	\$1.56	\$0.56	\$1.0
29	\$2.46	\$3.88	\$1.41	\$2.31	\$0.85	\$1.48	\$1.75	\$2.71	\$0.98	\$1.62	\$0.57	\$1.04
29 30	\$2.46	\$5.88	\$1.41	\$2.51	\$0.85	\$1.48	\$1.75	\$2.71	\$0.98	\$1.62	\$0.57	\$1.04
							\$1.81		\$1.01			
31	\$2.66	\$4.33	\$1.51	\$2.53	\$0.89	\$1.57		\$3.02		\$1.78	\$0.59	\$1.12
32	\$2.79	\$4.59	\$1.57	\$2.67	\$0.92	\$1.62	\$1.98	\$3.21	\$1.10	\$1.87	\$0.61	\$1.15
33	\$2.93	\$4.87	\$1.65	\$2.81	\$0.96	\$1.70	\$2.09	\$3.41	\$1.15	\$1.97	\$0.64	\$1.20
34	\$3.09	\$5.19	\$1.74	\$2.98	\$1.01	\$1.78	\$2.20	\$3.63	\$1.21	\$2.09	\$0.68	\$1.2
35	\$3.27	\$5.53	\$1.84	\$3.15	\$1.07	\$1.88	\$2.33	\$3.86	\$1.28	\$2.22	\$0.71	\$1.3
36	\$3.47	\$5.89	\$1.95	\$3.37	\$1.14	\$2.00	\$2.47	\$4.11	\$1.36	\$2.36	\$0.76	\$1.4
37	\$3.68	\$6.28	\$2.08	\$3.59	\$1.22	\$2.15	\$2.63	\$4.39	\$1.45	\$2.52	\$0.81	\$1.5
38	\$3.91	\$6.69	\$2.23	\$3.85	\$1.32	\$2.32	\$2.79	\$4.67	\$1.54	\$2.70	\$0.88	\$1.6
39	\$4.16	\$7.11	\$2.38	\$4.14	\$1.42	\$2.52	\$2.96	\$4.97	\$1.66	\$2.90	\$0.95	\$1.78
40	\$4.43	\$7.57	\$2.56	\$4.44	\$1.55	\$2.76	\$3.15	\$5.29	\$1.78	\$3.12	\$1.03	\$1.9
41	\$4.73	\$8.05	\$2.76	\$4.79	\$1.71	\$3.03	\$3.37	\$5.62	\$1.92	\$3.37	\$1.14	\$2.1
42	\$5.04	\$8.56	\$2.99	\$5.16	\$1.88	\$3.33	\$3.60	\$5.97	\$2.07	\$3.63	\$1.24	\$2.3
43	\$5.38	\$9.08	\$3.23	\$5.57	\$2.07	\$3.68	\$3.84	\$6.35	\$2.24	\$3.91	\$1.38	\$2.6
44	\$5.75	\$9.64	\$3.50	\$6.02	\$2.30	\$4.07	\$4.10	\$6.73	\$2.43	\$4.23	\$1.53	\$2.8
45	\$6.16	\$10.22	\$3.82	\$6.51	\$2.55	\$4.50	\$4.39	\$7.14	\$2.64	\$4.58	\$1.70	\$3.19
46	\$6.59	\$10.85	\$4.16	\$7.03	\$2.85	\$4.98	\$4.71	\$7.57	\$2.88	\$4.95	\$1.90	\$3.5
47	\$7.07	\$11.50	\$4.55	\$7.60	\$3.18	\$5.50	\$5.04	\$8.03	\$3.14	\$5.34	\$2.12	\$3.8
48	\$7.60	\$12.19	\$4.97	\$8.21	\$3.56	\$5.06	\$5.41	\$8.51	\$3.44	\$5.77	\$2.12	\$4.2
49	\$8.16	\$12.92	\$5.45	\$8.85	\$3.99	\$6.67	\$5.82	\$9.02	\$3.77	\$6.24	\$2.66	\$4.7
50	\$8.79	\$13.69	\$5.98	\$9.56	\$4.47	\$7.32	\$6.27	\$9.57	\$4.13	\$6.72	\$2.99	\$5.1
51	\$9.46	\$14.53	\$6.58	\$10.30	\$5.03	\$8.02	\$6.75	\$10.15	\$4.54	\$7.25	\$3.34	\$5.6
52	\$10.21	\$15.41	\$7.25	\$11.09	\$5.64	\$8.77	\$7.29	\$10.77	\$4.99	\$7.81	\$3.76	\$6.2
53	\$11.05	\$16.36	\$7.99	\$11.93	\$6.34	\$9.55	\$7.87	\$11.44	\$5.50	\$8.40	\$4.22	\$6.7
54	\$11.95	\$17.40	\$8.81	\$12.83	\$7.12	\$10.38	\$8.52	\$12.15	\$6.07	\$9.03	\$4.74	\$7.3
55	\$12.97	\$18.50	\$9.74	\$13.79	\$8.00	\$11.25	\$9.24	\$12.92	\$6.69	\$9.71	\$5.32	\$7.9
56	\$14.08	\$19.71	\$10.76	\$14.79	\$8.97	\$12.14	\$10.04	\$13.77	\$7.40	\$10.41	\$5.97	\$8.6
57	\$15.32	\$21.03	\$11.89	\$15.87	\$10.04	\$13.08	\$10.93	\$14.69	\$8.17	\$11.16	\$6.69	\$9.2
58	\$16.70	\$22.46	\$13.16	\$17.00	\$11.25	\$14.05	\$11.91	\$15.69	\$9.03	\$11.96	\$7.49	\$9.9
59	\$18.24	\$24.03	\$14.56	\$18.19	\$12.59	\$15.04	\$13.01	\$16.79	\$9.99	\$12.81	\$8.38	\$10.6
60	\$19.96	\$25.77	\$16.12	\$19.46	\$14.05	\$16.07	\$14.23	\$18.00	\$11.06	\$13.70	\$9.36	\$11.3
61	\$21.88	\$27.69	\$17.85	\$20.80	\$15.68	\$17.10	\$15.60	\$19.35	\$12.25	\$14.64	\$10.43	\$12.1
62	\$24.03	\$29.82	\$19.77	\$22.24	\$17.47	\$18.15	\$17.14	\$20.84	\$13.56	\$15.66	\$11.64	\$12.8
63	\$26.92	\$33.41	\$22.14	\$24.91	\$19.57	\$20.33	\$19.19	\$23.34	\$15.18	\$17.53	\$13.03	\$14.4
64	\$30.15	\$37.42	\$24.80	\$27.89	\$21.92	\$22.77	\$21.50	\$26.14	\$17.01	\$19.63	\$14.59	\$16.1
65	\$33.77	\$41.90	\$27.78	\$31.24	\$24.55	\$25.50	\$24.08	\$29.28	\$19.05	\$21.99	\$16.34	\$18.0
66	\$37.82	\$46.94	\$31.11	\$34.99	\$27.49	\$28.56	\$26.97	\$32.79	\$21.33	\$24.63	\$18.30	\$20.2
67	\$42.36	\$52.57	\$34.85	\$39.19	\$30.80	\$31.99	\$30.20	\$36.72	\$23.90	\$27.59	\$20.50	\$22.6
68	\$34.31	\$42.58	\$28.22	\$31.74	\$24.94	\$25.91	\$24.47	\$29.75	\$19.36	\$22.34	\$16.61	\$18.3
69	\$11.32	\$14.05	\$9.32	\$10.48	\$8.23	\$8.55	\$8.07	\$9.81	\$6.38	\$7.37	\$5.48	\$6.0

¹ Insurance fees differ depending on your occupational category. To change your occupational category, you must apply to our insurer either through Member Online or by using our Changing your occupational category form available at caresuper.com.au/forms. A request to change your occupational category will be effective after acceptance of your request. We'll write to you to confirm your new occupational category after acceptance of your request.

² Insurance fees shown are based on binary gender (male/female) pricing. If we are not advised of your gender your insurance fees will be based on the female gender, this will be updated once we are advised of your gender by either yourself or your employer. If you do not identify as male or female, please contact us and we will notify you of the insurance fees that will be applicable to you.

³ Insurance fees include an amount that contributes to CareSuper's costs of providing insurance.

⁴ Figures are rounded to two decimal places for disclosure only and actual insurance fees may differ due to the effects of rounding.

5-year benefit period - annual insurance fee per \$100 monthly benefit (\$)

	General						Professional					
	30 days 60 days			90 days		30 days		60 days		90 days		
Age	м	F	м	F	м	F	м	F	м	F	м	F
15	\$3.68	\$5.54	\$2.25	\$3.29	\$1.48	\$2.08	\$2.43	\$3.65	\$1.48	\$2.23	\$0.96	\$1.46
16	\$3.68	\$5.54	\$2.25	\$3.29	\$1.48	\$2.08	\$2.43	\$3.65	\$1.48	\$2.23	\$0.96	\$1.46
17	\$3.68	\$5.54	\$2.25	\$3.29	\$1.48	\$2.08	\$2.43	\$3.65	\$1.48	\$2.23	\$0.96	\$1.46
18	\$3.68	\$5.54	\$2.25	\$3.29	\$1.48	\$2.08	\$2.43	\$3.65	\$1.48	\$2.23	\$0.96	\$1.46
19	\$3.68	\$5.54	\$2.25	\$3.29	\$1.48	\$2.08	\$2.43	\$3.65	\$1.48	\$2.23	\$0.96	\$1.46
20	\$3.68	\$5.54	\$2.25	\$3.29	\$1.48	\$2.08	\$2.43	\$3.65	\$1.48	\$2.23	\$0.96	\$1.46
21	\$3.68	\$5.54	\$2.25	\$3.29	\$1.48	\$2.08	\$2.43	\$3.65	\$1.48	\$2.23	\$0.96	\$1.46
22	\$3.68	\$5.54	\$2.25	\$3.29	\$1.48	\$2.08	\$2.43	\$3.65	\$1.48	\$2.23	\$0.96	\$1.40
23	\$3.68	\$5.54	\$2.25	\$3.29	\$1.48	\$2.08	\$2.43	\$3.65	\$1.48	\$2.23	\$0.96	\$1.46
24	\$3.68	\$5.54	\$2.25	\$3.29	\$1.48	\$2.08	\$2.43	\$3.65	\$1.48	\$2.23	\$0.96	\$1.46
25	\$3.68	\$5.54	\$2.25	\$3.29	\$1.48	\$2.08	\$2.43	\$3.65	\$1.48	\$2.23	\$0.96	\$1.46
26	\$3.75	\$5.73	\$2.27	\$3.46	\$1.47	\$2.24	\$2.47	\$3.77	\$1.49	\$2.34	\$0.95	\$1.57
27	\$3.85	\$5.97	\$2.30	\$3.63	\$1.48	\$2.37	\$2.54	\$3.92	\$1.51	\$2.46	\$0.95	\$1.66
28	\$3.99	\$6.27	\$2.36	\$3.81	\$1.49	\$2.48	\$2.63	\$4.13	\$1.55	\$2.57	\$0.96	\$1.74
29	\$4.16	\$6.61	\$2.44	\$4.00	\$1.52	\$2.58	\$2.74	\$4.36	\$1.60	\$2.70	\$0.98	\$1.8
30	\$4.36	\$7.03	\$2.54	\$4.21	\$1.56	\$2.69	\$2.87	\$4.63	\$1.67	\$2.85	\$1.01	\$1.89
31	\$4.59	\$7.49	\$2.66	\$4.44	\$1.62	\$2.80	\$3.03	\$4.94	\$1.74	\$3.01	\$1.06	\$1.96
32	\$4.85	\$8.01	\$2.80	\$4.71	\$1.70	\$2.92	\$3.20	\$5.28	\$1.84	\$3.18	\$1.10	\$2.0
33	\$5.15	\$8.57	\$2.96	\$4.99	\$1.78	\$3.06	\$3.40	\$5.64	\$1.94	\$3.38	\$1.16	\$2.14
34	\$5.48	\$9.19	\$3.14	\$5.32	\$1.89	\$3.23	\$3.61	\$6.06	\$2.06	\$3.59	\$1.22	\$2.2
35	\$5.84	\$9.85	\$3.35	\$5.68	\$2.02	\$3.43	\$3.85	\$6.49	\$2.19	\$3.84	\$1.31	\$2.4
36	\$6.24	\$10.57	\$3.59	\$6.09	\$2.16	\$3.67	\$4.11	\$6.96	\$2.35	\$4.11	\$1.40	\$2.5
37	\$6.67	\$11.34	\$3.85	\$6.55	\$2.33	\$3.97	\$4.40	\$7.47	\$2.52	\$4.42	\$1.51	\$2.7
38	\$7.14	\$12.16	\$4.15	\$7.06	\$2.52	\$4.31	\$4.71	\$8.01	\$2.71	\$4.77	\$1.64	\$3.0
39	\$7.65	\$13.03	\$4.47	\$7.63	\$2.75	\$4.72	\$5.04	\$8.59	\$2.92	\$5.15	\$1.78	\$3.30
40	\$8.21	\$13.96	\$4.83	\$8.26	\$3.02	\$5.19	\$5.41	\$9.19	\$3.17	\$5.58	\$1.96	\$3.6
41	\$8.81	\$14.93	\$5.24	\$8.96	\$3.33	\$5.73	\$5.81	\$9.83	\$3.44	\$6.06	\$2.15	\$4.0
41	\$9.46		\$5.71	\$9.72	\$3.68						\$2.38	
42		\$15.97				\$6.35	\$6.25	\$10.52	\$3.73	\$6.57		\$4.4
	\$10.18 \$10.96	\$17.07	\$6.22 \$6.80	\$10.56	\$4.09	\$7.06	\$6.71	\$11.25	\$4.07	\$7.15	\$2.66 \$2.96	\$4.9
44		\$18.23		\$11.48	\$4.57	\$7.85	\$7.23	\$12.01	\$4.45	\$7.78		\$5.50
45	\$11.81	\$19.45	\$7.46	\$12.48	\$5.12	\$8.72	\$7.79	\$12.82	\$4.87	\$8.46	\$3.31	\$6.12
46	\$12.73	\$20.76	\$8.19	\$13.58	\$5.74	\$9.71	\$8.40	\$13.67	\$5.36	\$9.21	\$3.72	\$6.8
47	\$13.75	\$22.16	\$9.01	\$14.76	\$6.46	\$10.77	\$9.06	\$14.59	\$5.90	\$10.01	\$4.18	\$7.5
48	\$14.86	\$23.62	\$9.93	\$16.04	\$7.27	\$11.94	\$9.80	\$15.56	\$6.50	\$10.89	\$4.72	\$8.3
49	\$16.09	\$25.20	\$10.96	\$17.42	\$8.21	\$13.22	\$10.61	\$16.60	\$7.17	\$11.84	\$5.32	\$9.2
50	\$17.44	\$26.89	\$12.13	\$18.90	\$9.26	\$14.60	\$11.50	\$17.71	\$7.92	\$12.85	\$6.00	\$10.2
51	\$18.94	\$28.70	\$13.43	\$20.50	\$10.47	\$16.08	\$12.49	\$18.91	\$8.78	\$13.94	\$6.78	\$11.2
52	\$20.58	\$30.65	\$14.90	\$22.21	\$11.83	\$17.66	\$13.58	\$20.18	\$9.73	\$15.11	\$7.66	\$12.3
53	\$22.41	\$32.75	\$16.53	\$24.03	\$13.37	\$19.35	\$14.78	\$21.56	\$10.80	\$16.36	\$8.66	\$13.5
54	\$24.43	\$35.03	\$18.36	\$26.00	\$15.09	\$21.13	\$16.11	\$23.07	\$12.00	\$17.70	\$9.78	\$14.8
55	\$26.69	\$37.51	\$20.41	\$28.08	\$17.03	\$23.01	\$17.60	\$24.70	\$13.34	\$19.13	\$11.04	\$16.1
56	\$29.20	\$40.21	\$22.70	\$30.31	\$19.21	\$24.98	\$19.25	\$26.48	\$14.83	\$20.66	\$12.45	\$17.5
57	\$32.00	\$43.17	\$25.27	\$32.68	\$21.64	\$27.04	\$21.10	\$28.43	\$16.50	\$22.27	\$14.02	\$18.9
58	\$35.13	\$46.43	\$28.13	\$35.22	\$24.35	\$29.18	\$23.17	\$30.58	\$18.37	\$24.00	\$15.78	\$20.4
59	\$38.64	\$50.02	\$32.21	\$38.93	\$28.74	\$32.96	\$25.48	\$32.95	\$21.03	\$26.55	\$18.62	\$23.1
60	\$44.03	\$55.77	\$38.72	\$45.00	\$35.86	\$39.19	\$29.03	\$36.74	\$25.26	\$30.71	\$23.23	\$27.4
61	\$42.01	\$52.04	\$36.85	\$41.23	\$34.08	\$35.41	\$27.70	\$34.28	\$24.04	\$28.14	\$22.08	\$24.8
62	\$37.89	\$46.12	\$32.99	\$35.66	\$30.35	\$30.01	\$24.98	\$30.38	\$21.52	\$24.31	\$19.67	\$21.0

¹ Insurance fees differ depending on your occupational category. To change your occupational category, you must apply to our insurer either through Member Online or by using our Changing your occupational category form available at caresuper.com.au/forms. A request to change your occupational category will be effective after acceptance of your request. We'll write to you to confirm your new occupational category after acceptance of your request.

² Insurance fees shown are based on binary gender (male/female) pricing. If we are not advised of your gender your insurance fees will be based on the female gender, this will be updated once we are advised of your gender by either yourself or your employer. If you do not identify as male or female, please contact us and we will notify you of the insurance fees that will be applicable to you.

³ Insurance fees include an amount that contributes to CareSuper's costs of providing insurance.

4 Figures are rounded to two decimal places for disclosure only and actual insurance fees may differ due to the effects of rounding.

Tailoring insurance to your needs (continued)

Benefit period to age 65- annual insurance fee per \$100 monthly benefit (\$)

	General Professional											
	30 (days	60 days		90 (days	30 days		60 days		90 days	
Age	м	F	м	F	м	F	м	F	м	F	м	F
15	\$9.12	\$14.14	\$6.40	\$9.98	\$4.95	\$7.74	\$5.62	\$10.10	\$3.83	\$7.15	\$2.86	\$5.56
16	\$9.12	\$14.14	\$6.40	\$9.98	\$4.95	\$7.74	\$5.62	\$10.10	\$3.83	\$7.15	\$2.86	\$5.56
17	\$9.12	\$14.14	\$6.40	\$9.98	\$4.95	\$7.74	\$5.62	\$10.10	\$3.83	\$7.15	\$2.86	\$5.56
18	\$9.12	\$14.14	\$6.40	\$9.98	\$4.95	\$7.74	\$5.62	\$10.10	\$3.83	\$7.15	\$2.86	\$5.56
19	\$9.10	\$14.12	\$6.39	\$9.97	\$4.94	\$7.73	\$5.61	\$10.09	\$3.82	\$7.14	\$2.85	\$5.5
20	\$9.09	\$14.11	\$6.38	\$9.96	\$4.93	\$7.72	\$5.61	\$10.08	\$3.82	\$7.13	\$2.85	\$5.54
21	\$9.08	\$14.08	\$6.37	\$9.94	\$4.92	\$7.71	\$5.60	\$10.06	\$3.81	\$7.12	\$2.84	\$5.5
22	\$9.06	\$14.06	\$6.36	\$9.93	\$4.91	\$7.70	\$5.59	\$10.04	\$3.80	\$7.11	\$2.84	\$5.5
23	\$9.04	\$14.03	\$6.35	\$9.91	\$4.90	\$7.68	\$5.58	\$10.02	\$3.79	\$7.09	\$2.83	\$5.5
24	\$9.03	\$14.01	\$6.34	\$9.89	\$4.88	\$7.67	\$5.57	\$10.01	\$3.79	\$7.08	\$2.83	\$5.5
25	\$9.01	\$13.98	\$6.32	\$9.86	\$4.87	\$7.65	\$5.56	\$9.99	\$3.78	\$7.07	\$2.82	\$5.4
26	\$8.97	\$13.92	\$6.30	\$9.82	\$4.85	\$7.62	\$5.53	\$9.94	\$3.76	\$7.03	\$2.81	\$5.4
27	\$9.29	\$14.50	\$6.46	\$10.48	\$4.93	\$8.31	\$5.73	\$10.36	\$3.86	\$7.50	\$2.85	\$5.9
28	\$9.71	\$14.50	\$6.68	\$10.40	\$5.04	\$8.89	\$5.99	\$10.88	\$3.99	\$7.95	\$2.91	\$6.3
29	\$10.21	\$15.22					\$6.30					
			\$6.95	\$11.74	\$5.20	\$9.39		\$11.50	\$4.16	\$8.41	\$3.01	\$6.7
30	\$10.79	\$17.11	\$7.27	\$12.38	\$5.38	\$9.82	\$6.66	\$12.23	\$4.35	\$8.86	\$3.11	\$7.0
31	\$11.45	\$18.26	\$7.65	\$13.04	\$5.60	\$10.23	\$7.06	\$13.05	\$4.58	\$9.34	\$3.24	\$7.3
32	\$12.19	\$19.53	\$8.07	\$13.75	\$5.86	\$10.63	\$7.51	\$13.96	\$4.83	\$9.84	\$3.39	\$7.6
33	\$13.00	\$20.92	\$8.56	\$14.52	\$6.16	\$11.07	\$8.02	\$14.95	\$5.12	\$10.39	\$3.56	\$7.9
34	\$13.88	\$22.43	\$9.08	\$15.36	\$6.50	\$11.56	\$8.57	\$16.03	\$5.43	\$11.00	\$3.76	\$8.2
35	\$14.84	\$24.03	\$9.67	\$16.30	\$6.89	\$12.13	\$9.16	\$17.18	\$5.79	\$11.67	\$3.98	\$8.7
36	\$15.87	\$25.73	\$10.32	\$17.33	\$7.33	\$12.81	\$9.79	\$18.39	\$6.18	\$12.41	\$4.24	\$9.1
37	\$16.97	\$27.52	\$11.04	\$18.48	\$7.84	\$13.62	\$10.47	\$19.67	\$6.60	\$13.23	\$4.53	\$9.7
38	\$18.14	\$29.38	\$11.83	\$19.76	\$8.42	\$14.57	\$11.19	\$20.99	\$7.08	\$14.15	\$4.86	\$10.4
39	\$19.38	\$31.32	\$12.69	\$21.15	\$9.08	\$15.69	\$11.95	\$22.38	\$7.60	\$15.15	\$5.24	\$11.2
40	\$20.70	\$33.31	\$13.64	\$22.69	\$9.83	\$16.96	\$12.77	\$23.80	\$8.17	\$16.25	\$5.69	\$12.7
41	\$22.09	\$35.35	\$14.69	\$24.36	\$10.69	\$18.44	\$13.63	\$25.26	\$8.79	\$17.44	\$6.18	\$13.2
42	\$23.57	\$37.43	\$15.83	\$26.15	\$11.67	\$20.09	\$14.54	\$26.74	\$9.47	\$18.73	\$6.74	\$14.4
43	\$25.12	\$39.54	\$17.09	\$28.08	\$12.77	\$21.92	\$15.50	\$28.24	\$10.21	\$20.11	\$7.37	\$15.7
44	\$26.75	\$41.66	\$18.47	\$30.14	\$14.01	\$23.93	\$16.50	\$29.77	\$11.04	\$21.59	\$8.09	\$17.1
45	\$28.46	\$43.79	\$19.97	\$32.29	\$15.40	\$26.11	\$17.56	\$31.29	\$11.93	\$23.13	\$8.90	\$18.7
46	\$30.27	\$45.92	\$21.62	\$34.55	\$16.95	\$28.42	\$18.67	\$32.81	\$12.90	\$24.74	\$9.80	\$20.3
47	\$32.16	\$48.03	\$23.39	\$36.87	\$18.67	\$30.87	\$19.83	\$34.32	\$13.96	\$26.41	\$10.79	\$22.
48	\$34.12	\$50.11	\$25.31	\$39.25	\$20.57	\$33.39	\$21.05	\$35.81	\$15.10	\$28.11	\$11.89	\$23.9
49	\$36.17	\$52.14	\$27.37	\$41.63	\$22.63	\$35.98	\$22.30	\$37.25	\$16.31	\$29.81	\$13.08	\$25.8
50	\$38.28	\$54.10	\$29.56	\$43.99	\$24.87	\$38.56	\$23.61	\$38.66	\$17.60	\$31.51	\$14.37	\$27.6
51	\$40.44	\$55.96	\$31.86	\$46.29	\$27.25	\$41.09	\$24.94	\$39.98	\$18.97	\$33.16	\$15.75	\$29.4
52	\$42.63	\$57.70	\$34.27	\$48.48	\$29.76	\$43.51	\$26.30	\$41.23	\$20.38	\$34.72	\$17.20	\$31.2
53	\$44.83	\$59.29	\$36.74	\$50.48	\$32.37	\$45.74	\$27.65	\$42.36	\$21.84	\$36.17	\$18.71	\$32.8
55	\$46.99	\$60.67	\$39.21	\$52.24	\$35.03	\$47.71	\$28.99	\$43.35	\$23.30	\$37.42	\$20.23	\$34.
55	\$49.07	\$61.80	\$41.65	\$53.68	\$37.65	\$49.31	\$30.27	\$44.15	\$24.74	\$38.45	\$20.25	\$35.3
					\$37.65							
56	\$50.98	\$62.60	\$43.95	\$54.70		\$50.45	\$31.44	\$44.73	\$26.09	\$39.18	\$23.21	\$36.2
57	\$52.63	\$63.02	\$46.01	\$55.22	\$42.44	\$51.02	\$32.46	\$45.03	\$27.30	\$39.55	\$24.53	\$36.
58	\$53.92	\$62.92	\$47.69	\$55.10	\$44.33	\$50.89	\$33.25	\$44.95	\$28.30	\$39.48	\$25.62	\$36.
59	\$54.67	\$62.19	\$48.79	\$54.24	\$45.64	\$49.95	\$33.72	\$44.44	\$28.94	\$38.86	\$26.38	\$35.8
60	\$44.03	\$55.77	\$38.72	\$45.00	\$35.86	\$39.19	\$29.03	\$36.74	\$25.26	\$30.71	\$23.23	\$27.4
61	\$42.01	\$52.04	\$36.85	\$41.23	\$34.08	\$35.41	\$27.70	\$34.28	\$24.04	\$28.14	\$22.08	\$24.8
62	\$37.89	\$46.12	\$32.99	\$35.66	\$30.35	\$30.01	\$24.98	\$30.38	\$21.52	\$24.31	\$19.67	\$21.0

¹ Insurance fees differ depending on your occupational category. To change your occupational category, you must apply to our insurer either through Member Online or by using our Changing your occupational category form available at caresuper.com.au/forms. A request to change your occupational category will be effective after acceptance of your request. We'll write to you to confirm your new occupational category after acceptance of your request.

² Insurance fees shown are based on binary gender (male/female) pricing. If we are not advised of your gender your insurance fees will be based on the female gender, this will be updated once we are advised of your gender by either yourself or your employer. If you do not identify as male or female, please contact us and we will notify you of the insurance fees that will be applicable to you.

³ Insurance fees include an amount that contributes to CareSuper's costs of providing insurance.

4 Figures are rounded to two decimal places for disclosure only and actual insurance fees may differ due to the effects of rounding.

Example income protection calculation

Olivia, age 35, earns a before-tax income of \$3,800 per month (\$45,600 p.a.) and is in the General occupational category. Olivia decides to insure for the maximum amount of cover which is:

\$3,800 x 0.87 = \$3,306 per month.

Olivia has chosen a 60-day waiting period and a benefit period of 2 years. If approved, the cost of Olivia's income protection cover using the table on page 17 is:

\$3.15 per \$100 per month cover amount = \$3.15 x \$3,306 ÷ 100 = \$104.14 per annum.

Insurance fees are rounded for disclosure only and may vary slightly to what is deducted from your account.

If you want income protection cover, you must apply for it and it is subject to acceptance by our insurer. Insurance fee loadings and/or exclusions may apply to some members.

For how to apply for income protection, see 'Applying for our tailored cover options' on this page.

REDUCE OR CANCEL YOUR COVER

You can decrease or cancel your cover at any time by logging in to Member Online and going to the Insurance cover section. Decreases in age-based cover are limited to multiples of standard cover as outlined on pages 9 and 10 of this **Insurance Guide**. You can also cancel your cover by calling CareSuper on 1300 360 149. You may reapply at any time, but you'll need to call CareSuper to meet our insurer's assessment requirements and you may be required to provide evidence of health (see 'Recommencing your cover after it

stops' on pages 26 and 27 for more information).

APPLYING FOR OUR TAILORED COVER OPTIONS

To choose the cover that works best for you, fill out the

Insurance application form available at caresuper.com.au/forms or apply through the Insurance cover section of Member Online. All applications are subject to assessment and acceptance by our insurer. Insurance fee loadings and/or exclusions may apply to some members.

INTERIM ACCIDENT COVER WHILE YOUR APPLICATION IS ASSESSED

When you apply for tailored cover, you may receive interim accident cover. This provides you with some financial protection while your application is being assessed by our insurer. See 'Interim accident cover' on page 23 for more

information. Note: interim accident cover does not apply to elections for standard cover or New Member Options cover.

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DECIDE HOW MUCH COVER YOU NEED

Unsure what cover you need? As part of your membership you can access limited advice on insurance cover at no extra cost from our financial planners over the phone.* Call us on **1300 360 149**.

Whether obtaining information or advice over the phone, it is provided to you by Mercer Financial Advice (Australia) Pty Ltd (MFAAPL) ABN 76 153 168 293. Australian Financial Services Licence #411766. Mercer is responsible for any advice given to you under the authorisation of its licenced entities.



Life events cover

You can apply to increase your existing insurance cover at certain stages of your life when your circumstances have changed. You have access to a special offer to increase your existing death, TPD and income protection cover if you meet certain criteria.

ELIGIBILITY

To apply for additional cover, you'll need to:

- Have insurance at the date of the life event
- Be under age 65 for death and TPD, and under age 60 for income protection cover
- Have not increased your cover under a life event in the 12 months before your application
- Have not increased your cover under a life event more than 3 times in the past (for death and TPD only – excluding increases for turning 30, 40 or 50)
- Have not previously been declined for any cover due to your medical history
- Have previously not received, or been entitled to receive, a terminal illness or total and permanent disability benefit payment.

INCREASING DEATH AND TPD COVER

You can apply for additional death and TPD cover if you meet certain criteria, and experience one of the life events and provide corresponding documentation to us in the table below. We must receive the evidence and your application within three months after the date of the life event.

The maximum amount of additional death and TPD cover you can apply for under this option is the lesser of:

- 25% of your current cover
- \$200,000
- Where relevant, the amount of your new mortgage.

INCREASING INCOME PROTECTION COVER

If you receive an increase in income, you can apply to increase your income protection cover with a confirmation letter from your employer of the salary increase amount and the effective date.

The maximum amount of additional income protection cover you can apply for under this clause is the lesser of:

- 25% of your current cover
- \$1,500 per month for a 'General' occupational category
- \$2,000 per month for a 'Professional' occupational category.

APPLYING FOR LIFE EVENTS INCREASED COVER

You'll need to satisfactorily answer a few simple questions to apply for life events cover – it's a great opportunity to think about what insurance you need and adjust your cover accordingly without providing detailed medical evidence. Any loadings or exclusions that apply to your existing cover will also apply to the cover accepted under this offer.

Cover received under this offer will require you to be in active employment for all of the first 30 consecutive days from commencement of the increase. Otherwise, limited cover conditions apply until active employment is met for 30 consecutive days. A suicide / self-inflicted act exclusion will also apply for the first 12 months from the date the increase commences.

You can apply by completing the **Insurance application** form available at **caresuper.com.au/forms** or by logging in to **MemberOnline** and going to the 'Insurance' section.

Life event	Documentation		
You get married or register a de facto relationship	A copy of the marriage certificate or registration certificate		
You get a divorce or register a separation from a marriage or registered de facto relationship	A copy of the divorce or separation order		
Your spouse or de facto dies	A copy of the death certificate		
You or your spouse or de facto give birth to, or adopt a child	A copy of the birth or adoption certificate with you appearing as a parent		
Your child commences secondary school	A copy of the child's enrolment and a letter from the secondary school to confirm attendance		
You take out a mortgage on the initial purchase of your home or you increase an existing mortgage on	A letter from the lender showing the identity of th lender and confirming:		
your home	 The amount of the loan to purchase or increase the existing mortgage, and 		
	• The loan has been drawn down (not just approved), and		
	 A statutory declaration confirming the mortgaged property is your principal place of residence. 		
You have a milestone birthday of 30, 40 or 50	A copy of one of the below:		
	Current driver licence		
	State issued proof of age card		
	 Current passport identification page. 		

Bring all your insurance together

You may be in a number of super funds, especially if you've changed jobs a few times. That may mean you have other insurance cover through super too.

If you're under 60, you may be able to transfer your insurance cover from another super fund to your CareSuper account without having to provide detailed medical evidence. By doing this, you'll have your insurance in one place, making it easier to manage your level of cover and insurance fees. To do this you'll need to complete a Transfer your insurance form available at

caresuper.com.au/forms. Your application will need to be assessed and approved by our insurer. You will also need to transfer the whole account balance from your other fund to your CareSuper account.

TRANSFERRING YOUR DEATH ONLY OR DEATH AND TPD COVER FROM ANOTHER FUND

A maximum of \$2 million applies to transferring your death only or death and TPD cover to us without providing detailed medical evidence. This amount includes any existing death only or death and TPD cover you already have with us.

Any transfer of cover that would result in your total death only or death and TPD cover being greater than \$2million will need to be assessed and accepted by our insurer.

Any cover you transfer plus any additional fixed dollar amount you apply for will be your total fixed cover. The total cover will be rounded up to the next \$1,000. The cost of cover will be based on the fixed cover insurance fees shown on page 15.

TRANSFERRING YOUR INCOME PROTECTION COVER FROM ANOTHER FUND

If you want to transfer income protection from another super fund, a maximum of \$10,000 per month applies. The waiting period and benefit period will be adjusted in line with the product design of our income protection options. For example, a 45-day waiting period will be rounded up to 60 days. If the benefit period that applied to the cover being transferred is less than 2 years, or the waiting period that applied to that cover is more than 90 days, then no cover can be transferred.

Transferred income protection cover is not added to any existing income protection cover you have in CareSuper. Instead it replaces it (with adjustment of the waiting period and benefit period if required). However, if the amount of your existing cover exceeds the amount of your transferred cover, your existing cover will not be replaced and the transfer will be invalid.

TRANSFERRING YOUR EXISTING COVER

Complete the Transfer your insurance form, available at caresuper.com.au/forms and provide us with an up-to-date statement or certificate of currency. The statement or certificate of currency must have been issued within the last 6 months of being received by us.

Transferred cover is considered to be tailored cover and will commence on the later of:

- The date our insurer accepts your application, and
- The date your existing insurance cover under your other super fund is cancelled. This is generally the date your whole account balance is transferred to us.

The insurance fees for transferred cover are the same as for tailored cover, please refer to the insurance fee tables on pages 15, 17, 18 and 19. Any insurance fee loadings, exclusions and/or limited cover that previously applied to the transferred cover will continue to apply after it is transferred to CareSuper. Any exclusions and special conditions that would apply under the CareSuper policy (other than those that relate to your occupation) may also apply.

Before you transfer your cover make sure you understand your other insurance arrangements. Once you transfer, you'll lose any insurance entitlements you have with that other fund and your existing insurance with CareSuper may in some circumstances be replaced by the transferred cover (which may have loadings, exclusions and/or limited cover that would not apply to your existing cover with CareSuper), so it pays to be sure it's the right decision for you.

If you're not in active employment (see definition on page 31) for all of the first 30 days from the date your cover is transferred to us, you'll receive limited cover (see definition on page 32) only.

Understanding your insurance

WHEN YOUR COVER COMMENCES EMPLOYEE PLAN MEMBERS

For Employee Plan members eligible to receive standard cover, cover will commence on the later of:

- The date your first employer contribution is received by the fund
- The date you are at least 25 years old and have had least \$6,000 in your super account.

If you elect to receive standard cover, provided you are eligible, the cover will commence on the later of:

- The date we receive your election to have cover
- The date we receive the first employer contribution for you.

Cover may be limited cover depending on, for example, when you make the election or when we receive your first employer contribution.

This means Employee Plan members will usually receive insurance cover that commences from a date that is later than the date they joined the fund.

You will be advised from when your standard cover commences, when this information becomes known to CareSuper.

Any tailored cover commences when we advise you in writing. Any transferred cover you apply for commences as outlined on page 22.

PERSONAL PLAN MEMBERS

Cover commences on the date you are advised in writing that the cover has been accepted. You must also have a minimum balance of \$1,500 before cover commences. The first insurance fee payment deducted from your account will include all fees accrued since your commencement date. You may also be able to transfer existing cover you hold elsewhere. Refer to page 22 for commencement details.

DECLINING STANDARD AGE-BASED COVER

There is a 28-day cooling off period for standard cover. You have 28 days from the date the standard cover commences to tell us you wish to decline standard cover. The cover will then be deemed never to have started and all insurance fees paid during the cooling off period will be refunded to your CareSuper account.

You can also reduce your cover with backdated effect in this 28-day period. Contact us to find out if and when standard cover has commenced, if you haven't been notified that standard cover has commenced.

INTERIM ACCIDENT COVER

If you apply for underwritten cover such as tailored cover, you may receive interim accident cover. Our insurer may provide interim accident cover from the date they are notified in writing of the insurance request. Note: interim accident cover does not apply to elections for standard cover or New Member Options cover.

ACCIDENTAL DEATH COVER

Our insurer will pay a benefit if your application is for death cover and you die as a result of an accident that occurs during the interim accident cover period. The death must be within 90 days of the accident for this benefit to be paid.

ACCIDENTAL TOTAL AND PERMANENT DISABLEMENT COVER

Our insurer will pay a benefit if your application is for total and permanent disablement cover and you become totally and permanently disabled (see definition on pages 33 and 34) as a result of an accident during the interim accident cover period. The date of disablement (see definition on page 31) must be within 90 days of the accident for this benefit to be paid.

ACCIDENTAL INCOME PROTECTION COVER

Our insurer will pay a benefit if your application is for income protection cover, if you suffer total disability as a result of an accident. The date of disablement (see definition on page 31) must be within 90 days of the accident for this benefit to be paid. Benefits are offset for any other disability income you may be entitled to receive.

YOUR BENEFIT AMOUNT

For death or total and permanent disability, your benefit will be the amount of cover or additional insured cover you requested, but won't exceed the maximum accident cover of \$1 million less any amount of insured cover also paid under the same policy.

For income protection any cover, any maximum benefit for interim accident cover will be the lesser of 87% of your pre-disability income, the total cover you applied for and \$15,000 per month less any other disability income.

The maximum benefit period is either your existing cover period if you already hold income protection cover with CareSuper or 2 years in other circumstances.

The waiting period is either your existing waiting period or the waiting period applying to your application.

INTERIM ACCIDENT COVER PERIOD

Interim accident cover will start on the application date and will end on the earliest of the following:

- The date the application for insured cover is withdrawn
- The date our insurer accepts the application for insured cover on standard or special terms
- The date our insurer rejects the application for insured cover
- The date our insurer cancels the interim accident cover
- 120 days from the date we receive the application for insured cover, or
- The date of termination of the insurance policy.

INTERIM ACCIDENT COVER BENEFIT - EFFECT ON APPLICATION FOR COVER

If our insurer pays you a benefit under this condition, your application for cover or an increase in cover will be cancelled and you won't be able to apply for any more cover under the insurance policy.

A payment for interim accident cover is only payable to you once.

YOU'RE COVERED WHEREVER YOU GO

You're covered even when you're overseas (insurance policy conditions apply). Income protection payments are restricted to 12 months while overseas, unless otherwise agreed in writing. You're not required to advise us or our insurer before you travel overseas.

CHANGING YOUR MIND ABOUT TAILORED COVER

There is a cooling off period for tailored cover. You have 28 days from the date we tell you that we've accepted your cover to tell us that you have changed your mind and wish to decline our offer. The cover will then be deemed never to have started and all insurance fees paid during the cooling off period will be refunded to your CareSuper account.

REDUCE OR CANCEL YOUR COVER

You may cancel or reduce your tailored cover at any time by submitting a request via your online account, calling us on 1300 360 149 or via writing by completing the Reduce or cancel cover form. Your insurance fees will only cease when your request is received and accepted.

LEAVING OR CHANGING JOBS

If you leave your employer, any insurance cover you hold continues in the Employee Plan as long as you remain a member of CareSuper, provided cover does not cease for some reason (for example, you reach the maximum insurable age). If you don't have cover at the time you are transferred to the Employee Plan (for example, because you are under 25 or your account balance has not reached \$6,000), you won't automatically receive the standard cover applicable to your membership of the Employee Plan (or via an election) unless you meet the terms and conditions for the commencement of standard cover in the Employee Plan.

If you become unemployed, your ability to claim any income protection benefits will be affected. Changes to your employment could also affect the definition of total and permanent disablement that you must satisfy to claim a TPD benefit (see definitions on pages 33 and 34).



Understanding your insurance (continued)

TRANSFERRING YOUR COVER FROM A CORPORATE INSURANCE ARRANGEMENT (CIA) TO THE CARESUPER EMPLOYEE PLAN

If you transfer into the CareSuper Employee Plan from a CareSuper CIA, the amount of cover you have will be either age-based cover or fixed cover depending on that CIA. When transferring your cover from a CIA to the CareSuper Employee Plan the New Member Options are not available to you. If you hold income protection cover, the amount of cover (immediately before transfer) is matched to the next closest waiting period and benefit period, for example, if you have a waiting period of 45 days you will receive a waiting period of 60 days. Cover will continue as long as there is sufficient money in your account for ongoing insurance fee deductions, unless cover ceases for some other reason. As an Employee Plan member, you're responsible for paying the insurance fees. All other terms and conditions as set out in this Insurance Guide will apply to you.

Conditions, exclusions, restrictions or loadings applicable to you in the CIA will also continue to apply.

WHEN COVER STOPS

Death, TPD and income protection cover will stop at the earliest of the following events:

- Your CareSuper membership ends
- You reach the maximum insurable age for a particular benefit:
 - Death cover (including terminal illness) -75 years
 - TPD cover 70 years
 - Income protection cover 70 years. For 5-year and to age 65 benefit periods, we'll automatically switch any member to a 2-year benefit period when they reach age 63 (so they can continue to have income protection cover until age 70). If you do not wish to have a 2-year benefit period you can cancel your cover
- There are insufficient funds in your account to pay the insurance fees on the last calendar day of the month. If you have an account balance at a later date, you will have to pay the difference between the deduction made in that month and the

insurance fee due for that month. Depending on your membership category and the type of contribution received, your cover may not be reinstated as a result of this fee deduction

- A terminal illness benefit is paid. However, if your death cover is greater than the terminal illness benefit paid, death cover will continue while you remain a member and maintain a sufficient balance to meet your insurance fees, unless cover ceases for some other reason. Your death cover will be reduced by the insured amount paid to you on terminal illness grounds
- You pass away
- A TPD benefit is paid. However, if your death cover is greater than the TPD benefit paid, your death cover will continue while you remain a member and maintain a sufficient balance to meet your insurance fees, unless cover ceases for some other reason. Your death cover will be reduced by the insured amount paid to you for TPD
- If you hold income protection cover your cover will stop if a death, terminal illness or TPD benefit is paid for you under a CareSuper Group Life policy
- The insurance policy is terminated or cancelled for any reason
- We receive your completed Reduce or cancel cover form, online request or by calling us on 1300 360 149. Your cover will cease from the start of the date we receive your request and you will not be covered for this day.
- If your cover is transferred to another group insurance policy issued to the fund by our insurer, your cover will end under your existing arrangements
- Your account has been inactive for a continuous period of 16 months and you have not made an election to keep your insurance cover even if your account becomes inactive for 16 months (refer to 'Cover ceases on inactive accounts or if the law requires' below for further information).

COVER CEASES ON INACTIVE ACCOUNTS OR IF THE LAW REQUIRES

Super laws require us to cancel your insurance cover or not provide cover in certain circumstances, including if your account has been inactive for a continuous period of 16 months.

Your account will become inactive if we have not received an amount (for example, a contribution or transfer in) for you for at least 16 continuous months.

We will write to you (where we are able to) before we cancel your cover to ask if you would prefer to keep your cover. You can tell us you would like to keep your cover even if your account becomes inactive by completing the **Keep or cancel my cover** form available at **caresuper.com.au/forms** and returning it to us before the date your insurance will be automatically cancelled.

Note that a request to keep cover does not mean that cover will continue indefinitely. Cover may cease for other reasons, such as reaching the maximum insurable age. The existing cover cessation rules still apply.

If we are required by law to cease cover that has previously been granted to you, we must do so. We will contact you about this if we are able to, however you should note that we are bound by government legislation even if we cannot contact you.

RECOMMENCING YOUR COVER AFTER IT STOPS

Usually if your insurance cover ceases, you can only reinstate (recommence) your previous level(s) of cover by applying for insurance cover and any future applications by you will need to be assessed and accepted by our insurer. If accepted, insurance cover begins when we confirm acceptance to you in writing.

However, in some circumstances cover may be reinstated without undergoing the full application process. Any reinstated cover is subject to the usual terms and conditions under the policy (including cessation of cover), and any special loadings, restrictions or exclusions previously applicable to the cover.

New Member options are not available in relation to reinstated cover.

MEMBER INITIATED REINSTATEMENT OF COVER

As a member, you can initiate a reinstatement of your cover within 2 months of cover ceasing, if cover has ceased due to insufficient balance or inactivity. See 'When your cover stops' on page 25 for information on how cover can cease. This is subject to a member having an account balance greater than \$500 at the date of request of reinstatement.

Your cover will be reinstated to the amount and type of cover you held prior to the date cover ceased, provided you were in active employment (see page 31 for definitions) for 3 continuous months from the date cover ceased. If this is not the case, then limited cover (see page 32 for definitions) applies until you've been in 2 months of active employment from the date of reinstatement.

If prior to your cover ceasing your cover was subject to a longer limited cover period, this will continue to apply once your cover is reinstated.

Your cover will be reinstated with effect from the date cover ceased; this means you'll have the peace of mind that continuous cover can provide (unless another cessation of cover event occurs). However you should note that any insurance fees applicable from the date cover ceased will be deducted from your account balance.

AUTOMATIC REINSTATEMENT OF COVER

If your insurance cover ceased as a result of a low account balance or an inactive account, your death and/or TPD cover will automatically be reinstated to the amount of standard cover applicable based on your age at the time of reinstatement.

Cover will be reinstated from the later of:

- The date a Superannuation Guarantee contribution is received into your CareSuper account
- The date you're at least 25 years old and have at least \$6,000 in your CareSuper account.

If an on-time employer contribution is received into your CareSuper account within four months of commencing employment with the most recent employer you will receive:

- Full cover if are in active employment (see definition on page 31) for one month
- Otherwise, limited cover (see definition on page 32) will apply until two consecutive months of active employment is met.

If an employer contribution is received into your CareSuper account and the above condition does not apply, your cover will be subject to the following conditions:

- Limited cover will apply for 2 years from the date cover is reinstated, and
- Limited cover will be removed if for two consecutive months before the end of the 2 year period you are in active employment, and
- Limited cover will continue if you're not in active employment for the entire two consecutive months.
 Limited cover will continue to apply until you return to active employment for at least two consecutive months.

Note that depending on the circumstances there may be a period between the date your cover ceases and the date it recommences where you won't be covered. You must be in active employment (see definition on page 31) for all of the first 30 days from the date your cover recommences. If you're not, limited cover (see definition on page 32) conditions apply.

OTHER INSURANCE CONDITIONS AND EXCLUSIONS

In addition to any other conditions and exclusions stated in this document, the following apply:

ALL TYPES OF COVER - DEATH (INCLUDING TERMINAL ILLNESS), TPD AND INCOME PROTECTION

- If you have two or more accounts with CareSuper with insurance cover, you will not be entitled to insurance cover from more than one account. In the event of a claim, the account with the largest benefit will be paid and cover in any other accounts will be cancelled. If you have a duplicate account, duplicate insurance fees will be refunded to the account when accounts are merged.
- Our insurer won't pay a benefit for a disability that is caused directly or indirectly by, or can be attributed to, an act of war or service in the armed forces of any country, including reserve forces.
- If you have previously been paid a TPD or similar benefit of any type from any source including another super fund or a personal insurance policy, you will only be eligible for death cover with CareSuper, not TPD or income protection cover.
- If you have previously been paid a terminal illness benefit or have been diagnosed with an illness that reduces your life expectancy to less than 24 months, you will not be eligible for death, TPD or income protection cover with CareSuper.
- If you apply for death, TPD or income protection cover, during the assessment period you will only be insured for interim accident cover as it pertains to your application. See page 23 for the definition of interim accident cover.

Understanding your insurance (continued)

For Employee Plan members, the following also apply:

- Limited cover (see definition on page 32) will apply when cover commences, recommences or increases:
 - a. If you are not in active employment for all of the first 30 days from the date your cover commences, recommences or increases until you return to active employment for at least 2 consecutive months
 - b. If we don't receive on-time employer contributions (see definition on page 32) on your behalf within 4 months of you being first eligible (see definition on page 31) and we don't receive an employer contribution that covers the date cover commences. Standard cover will be limited cover for 2 years, subject to you being in active employment (see definition on page 31) in the 2 months leading up to this anniversary. If you don't meet the active employment requirement, your cover remains limited cover until you have returned to active employment for at least 2 consecutive months.
 - c. If you elect to receive cover more than 6 months after joining the fund.
- You're able to apply to have limited cover restrictions removed at any time subject to our insurer's assessment requirements. The removal will be effective from the date the insurer approves.

DEATH AND TPD COVER SPECIFIC

In addition to the 'all types of cover' condition and exclusions, the following also apply to death, terminal illness and TPD cover.

- In the event of a pandemic outbreak, our insurer has the right to exclude any pandemic illness that could cause you to die within 30 days of your cover commencing, provided the condition was present at the date your cover commenced.
- Our insurer will not pay a benefit for you if your death, terminal illness or TPD is caused directly or indirectly by an act of war. This does not include death while on service in the Australian Defence Force
- You will not be covered for death and TPD in the event of intentional self-inflicted injury or infection, suicide or attempt at suicide – When limited cover applies within the first 12 months of cover commencing, increasing or recommencing
 - For New Member Options or tailored cover for any amount of cover in excess of the standard that would have otherwise applied.

INCOME PROTECTION COVER SPECIFIC

- No benefit is payable under our income protection cover policy if your illness or injury is directly or indirectly caused by:
 - Intentional self-inflicted injury or infection or attempt at suicide
 - Normal pregnancy or childbirth
 - Your service in the armed forces of any country, or
 - An act of war.
- Our insurer will not make a payment under the insurance policy if the payment would cause them to infringe the Private Health Insurance Act 2007 (Cth), Private Health Insurance (Prudential Supervision) Act 2015 (Cth), Health Insurance Act 1973 (Cth), or the National Health Act 1953 (Cth), or any succeeding legislation in connection with health insurance.
- Benefits will only be paid to you for one disability at a time.
- The maximum length of time a benefit for disability resulting from any one or related cause will be paid is the number of months in the benefit period. This includes any months in which the benefit is reduced or is calculated to be \$0.

Insurance fee loadings and/or exclusions may apply to some members. Some exclusions and restrictions can only be determined or assessed at the time a claim is made.

Claiming an insurance benefit

CLAIMING AN INSURANCE BENEFIT

We hope you'll never have to make a claim, but if you do you can be confident we'll make the process as straightforward as possible.

HOW DO I MAKE A CLAIM?

1 Notify us of your claim

Call us on **1300 090 925** to speak to a member of our team who will discuss your claim with you.

2 CareSuper check

Our Claims team will then check your eligibility to lodge a claim. This includes ensuring you had insurance cover at the relevant time and that your insurance fees have been paid for that period.

3 Submit the claim

We (or our insurer) will contact you to discuss your claim and send you the relevant forms. Once you and your treating doctor have completed the forms you will also need to provide other information such as:

- Proof of identification: a certified copy of your passport or driver's licence
- Medical reports from your treating doctors explaining your condition
- Any other information you think may assist with your claim such as insurance or compensation reports.

4 Our insurer will assess your claim

Depending on the date you're claiming for, your claim will either be managed by us and assessed by the insurer, or managed and assessed by the insurer. You will be appointed a case manager to assess and manage your claim, including your eligibility to claim under the insurance policy. Each claim is assessed on an individual basis. To fully assess your claim, your case manager may request additional information which they will outline to you. Your case manager will keep you informed of the status of your claim as it progresses.

5 We will notify you of the decision

If your claim is accepted we will request instruction from you on how you would like the benefit paid. If your claim is declined, we will independently review the insurer's decision and advise you of the outcome. In the event you disagree with the outcome, you are able to lodge a complaint as detailed in the claims decision letter.

If you have questions about the claims process, call our team on 1300 090 925.



Claiming an insurance benefit (continued)

QUALIFYING FOR A DEATH BENEFIT

A death benefit will be paid if you hold death cover with CareSuper on the day you pass away (conditions apply – see 'Other insurance conditions and exclusions' on pages 26 and 27).

If you become terminally ill (see definition on page 31), you may apply for early release of your insured death benefit.

Your death benefit, which can include your account balance and an insured benefit, can be paid to a dependant such as a spouse, de facto, child (including step-child or adopted), or anyone who is financially dependent on you or in an interdependency relationship with you. See page 31 for the definition of interdependency. Alternatively, your benefit can go to your legal personal representative.

You can nominate who your benefit goes to by making a binding or a non-lapsing binding nomination. A preferred nomination is not binding on CareSuper and will be used as a guide only, with the final decision made by CareSuper.

You can make a binding nomination or nonlapsing binding nomination by completing the Binding beneficiary nomination form at caresuper.com.au/forms. CareSuper will confirm in writing if the nomination is accepted.

QUALIFYING FOR A TPD BENEFIT

You may qualify for a TPD benefit if you meet our insurer's definition of total and permanent disablement (see definition on pages 33 and 34) while you have TPD cover (conditions apply – see 'Other insurance conditions and exclusions' on pages 26 and 27).

If you have submitted a TPD claim and you pass away before the claim is finalised, your TPD claim may continue to be assessed as a posthumous TPD claim. A posthumous TPD claim may result in a TPD benefit being paid to your beneficiaries after your death.

If your death cover is higher than your TPD cover, it will be assessed as a death claim and the death cover will be paid subject to eligibility. Find out more on your eligibility for a TPD benefit on pages 26 and 27.

QUALIFYING FOR AN INCOME PROTECTION BENEFIT

You may qualify for an income protection benefit if you meet the definition of total disability (see definition on page 34) while you have income protection cover, and have been unable to work for the selected waiting period (30, 60 or 90 days – see definition on page 34). Conditions apply – see 'Other insurance conditions and exclusions' on pages 26 and 27.

If you qualify for an income protection benefit and payment is permitted under superannuation legislation, it will remain payable for your selected benefit period (up to 2 years, 5 years or to age 65 – see definition on page 31) from the date payments commence, provided you continue to meet the benefit conditions. Income protection benefits are no longer paid when a terminal illness or TPD benefit is paid to you, or you pass away.

No benefits are payable during the waiting period. After this, benefits will begin to accrue and will be payable monthly in arrears if you meet the requirements.

The waiting period commences on the first day you're unable to work due to your total disability and your condition is certified by a medical practitioner. If you're entitled to a benefit for part of a month, you'll be paid 1/30th of the monthly benefit for each day you're entitled to a payment.

IF YOU HAVE A TERMINAL ILLNESS OR INJURY

If you've been diagnosed with a terminal illness and are expected to live less than 24 months, you may apply for a full or partial early release of your account balance including a terminal illness benefit provided through any death cover (subject to meeting the insurance policy definition). See page 32 for the definition of terminal illness. The maximum terminal illness benefit payable is \$3 million, even if you're insured for a larger amount of death cover. If your death cover is higher than \$3 million, you will retain the balance of that cover following payment of a terminal illness benefit, subject to you:

- Remaining a CareSuper member
- Retaining an account balance sufficient to cover your insurance fees
- Remaining eligible for cover.

You should consider your options prior to making a terminal illness claim for your full benefit and closing your account.

REDUCTION OF INCOME PROTECTION BENEFITS

Your income protection benefit will be reduced by the amount of income you receive from any of the following sources:

- a) Any income or lump sum payment of income, paid or payable to you as a result of your sickness or injury including:
 - Sick leave payments
 - Amounts payable under legislation such as workers' compensation or motor accident compensation
 - Benefits payable under other income protection policies
 - Awards or settlements under common law for loss of earnings or loss of earning capacity whether received as capital or income
- b) Any super contributions from your employer while disabled
- c) Any income that, in the opinion of our insurer, you could reasonably be expected to earn in your occupation while disabled. Where you're fit to return to work in a reduced capacity but such work isn't available with your existing

employer, our insurer will not offset any income you should be able to earn with this employer.

Any amount described in paragraph a) which is in the form of a lump sum (or is exchanged for a lump sum) is treated as a monthly amount equivalent to 1/60th of the lump sum over a period of 60 months.

PARTIAL DISABILITY BENEFIT

If you return to work and are earning an income that, as a result of your disability, is less than your pre-disability income, you may be eligible for a partial disability benefit (see definition on page 32). You must have satisfied the definition of total disability for at least 14 days and still have a reduced income at the end of the waiting period.

WHAT HAPPENS IF DISABLEMENT REOCCURS

If you recover while receiving income protection benefit payments, your payments cease. If you become totally disabled again (within 6 months) due to the same cause or a related cause, your previous claim will continue and there will be no further waiting period, provided you're still a member. After 6 months of ceasing to be either partially or totally disabled, normal waiting periods apply. The period in which benefits were paid previously will form part of the maximum benefit period for the relevant condition.

The maximum period benefits will be paid for the same or a related cause is the maximum benefit period. This is regardless of how often you're disabled due to this cause.

TREATMENT OF INSURANCE CLAIMS PROCEEDS

Insurance claims proceeds (including death, TPD and terminal illness) received from the insurer will be invested in the Cash investment option, pending payment either at your direction or as determined by the Trustee.

IF YOU DIE WHILE RECEIVING A BENEFIT

Any income protection benefits will cease upon your death, with a final payment equal to three times the monthly benefit.

MULTIPLE CLAIMABLE CONDITIONS

If you suffer multiple

claimable conditions or have a separate claimable condition arise while on claim, you are only able to claim all the conditions for the maximum benefit period only.



Definitions for insurance

The insurance information contained in this Insurance Guide is a summary only of significant terms and conditions relating to insurance and should be read in conjunction with the 125% standard cover Fact sheet or 150% standard cover Fact sheet, if applicable to you. There are other terms and conditions (including defined terms) in the insurance policies. The insurance terms and conditions, including eligibility for cover and payment of benefits, are applied in line with the policies and super legislation. If there is any inconsistency between this summary and the policies, the policies will apply.

ACTIVE EMPLOYMENT

You are employed to carry out identifiable duties, are actually performing those duties and, in our insurer's opinion, are not restricted by sickness or injury from carrying out those duties on a full-time (where fulltime means 35 hours per week) basis, or the duties of your usual occupation on a full-time basis (even if not then working on a full-time basis).

BENEFIT PERIOD

The maximum time benefits may be paid if you're temporarily unable to work due to illness or injury. You can select a benefit period of 2-years, 5-years or to age 65. Different feesa apply depending on the period you choose.

DATE OF DISABLEMENT

The date of disablement must occur while you are insured under the insurance policy and is the later of:

- a) The date you suffer from the sickness or injury that is the principal cause of your TPD, and
- b) The date you cease all employment.

If you participate in a rehabilitation program and are incapable of returning to employment within 12 months from the date you stopped working, the date of disablement will be the date that would have applied if you hadn't participated in the rehabilitation program. Note: this definition applies to total and permanent disablement only.

EMPLOYER CONTRIBUTION

Superannuation Guarantee contribution made by an employer on behalf of an employee or an employer contribution made under a certified or registered industrial authority or award, or a legally enforceable contract.

FIRST ELIGIBLE

The later of the date your employer selects CareSuper to be the default super fund to receive employer contributions, and the date you commence your employment with that employer.

INCOME (for the calculation of income protection benefits)

The total salary package value of remuneration received by you from your employer averaged over the most recent 12 months immediately prior to becoming disabled (including overtime, commission, bonuses and shift allowances, but excluding employer contributions).

- a) If you have been working with your employer for a period of less than 12 months immediately prior to becoming disabled, then the total monthly value of remuneration will be averaged over the period since you last commenced employment with your employer.
- b) If you are unemployed immediately prior to becoming disabled, the total monthly value of remuneration will be averaged over the lesser of the most recent 12-month period immediately prior to becoming disabled or the period since you last commenced employment with your most recent employer.
- c) If you are self-employed, then the before-tax income that is generated by you or the business as a result of your personal exertion (that is, income that would stop if you could not work due to illness or injury), and:
 - i. Includes any allowances or fringe benefits paid to you which you may convert into cash salary at your option or which our insurer agrees to treat as part of your income, but
 - ii. Does not include any necessary business expenses incurred in producing that income.

Where you are not employed on a permanent basis for more than 12 months, or are unemployed immediately prior to becoming disabled, a minimum averaging period of 3 months applies.

Where you have multiple employment arrangements, the salaries (which may be either permanent or casual) will be combined to provide a total gross annual figure.

INTERDEPENDENCY

Two persons have an interdependency relationship if they have a close personal relationship, live together, one or each provides the other with financial support, and one or each provides the other with domestic support and personal care.

If one of these criteria isn't met because one person or both suffer from a physical, intellectual, or psychiatric disability, or because they are temporarily living apart, then they can still be considered interdependents.

The following must be considered by CareSuper when determining interdependency between two persons:

- a) The context of the relationship, including duration of the relationship; whether or not a sexual relationship exists; the level of commitment to a shared life; whether there was shared ownership, use, or acquisition of property; whether the relationship was outside of a usual parent/child relationship in the case of parent/child relationships; whether the relationship was of mere convenience;
- b) The existence of a statutory declaration signed by one of the people to the effect that the person is, or (in the case of a statutory declaration made after the end of the relationship) was, in an interdependency relationship with the other person.

LIMITED COVER

You are only covered for claims arising from:

- A sickness which first became apparent, or
- An injury which first occurred on or after the date your cover last commenced, recommenced or increased.

ON-TIME EMPLOYER CONTRIBUTION

On-time employer contributions are those made by the following dates:

Quarter	Superannuation contribution due date
1 July - 30 September	28 October
1 October - 31 December	28 January
1 January - 31 March	28 April
1 April - 30 June	28 July

PARTIAL DISABILITY

You are partially disabled if you are not totally disabled but because of sickness or injury you:

- Have been totally disabled for at least 14 consecutive days
- Are unable to work in your occupation at full capacity immediately after you became totally disabled because of the sickness or injury that caused your total disability
- Are working in your own occupation in a reduced capacity, or working in another occupation
- Earn a monthly income that is less than your pre-disability income, and
- Are under the regular care of, and following the advice of, a medical practitioner.

However, if you were totally disabled having met the second part of the total disability definition (see pages 33 and 34), you will not be considered to be partially disabled if you return to work in your own occupation or an occupation for which you are reasonably qualified by education, training or experience.

STANDARD COVER

Standard cover is age-based death and TPD cover that may be provided to eligible Employee Plan members automatically or upon election. The level of standard cover in the Employee Plan varies depending on your Employer and is described in this **Insurance Guide** or a **Fact sheet**, if applicable to you.

TERMINAL ILLNESS

You are able to apply for the early release of your insured death benefit if you suffer from an illness which:

- a) Two medical practitioners, with at least one specialising in your terminal illness, certify in writing that, despite reasonable medical treatment, the illness will lead to your death within 24 months of the date of certification, and
- b) Our insurer is satisfied on medical or other evidence that, despite reasonable medical treatment, the illness will lead to your death within 24 months of the date of certification. The illness from which you suffer must occur and the date of the certification referred to in a) must take place while you are insured under the policy. See page 29 for important information about terminal illness benefits.



Definitions for insurance (continued)

TOTAL & PERMANENT DISABLEMENT (TPD)

means the insured member meets Definition A or Definition B. The definition which applies to an insured member is determined as follows:

Definition A applies to an insured member if they were:

- under the age of 65 at the date of disablement; and
- employed or self-employed at any time within the 16 months immediately before the onset of total disability leading to the permanent incapacity.

Definition B applies to an insured member if they were:

- aged 65 or over at the date of disablement; or
- not employed or self-employed at any time within the 16 months immediately before the onset of total disability leading to the permanent incapacity.

Definition A

An insured member is totally and permanently disabled if the insured member:

- a) as a result of sickness or injury, has been absent from all employment for three consecutive months from the date of disablement; and
- b) is under regular medical care; and
- c) has exhausted all reasonable treatment options and has reached maximum medical recovery, but only if in our insurer's opinion it may help the insured member return to employment; and
- d) our insurer is satisfied on the basis of medical and other evidence, that the insured member is unlikely ever to be able to engage in any occupation, whether or not for reward.

In determining if an insured member is totally and permanently disabled, our insurer will consider all relevant circumstances and factors including but not limited to any:

- re-skilling, retraining and rehabilitation the member has done; and
- volunteering experience the member has had; and

- future re-skilling, retraining and rehabilitation the member could reasonably undertake; and
- volunteer experience the member could reasonably obtain.

Definition B

An insured member is totally and permanently disabled if the insured member meets one of the following parts of the definition

- Restricted TPD Definition (Physical Disorders)
 Total and Permanent Disability unable to do basic activities associated with work ever again Our insurer determines that solely because of injury or illness, the insured member:
 - has been unable to perform at least two Basic Work Activities for at least 12 consecutive months;
 - is unable to perform at least two Basic Work Activities for the rest of their life, without the help of another person; and as at the assessment date* is unlikely ever to work in any gainful employment for which they are reasonably suited by education, training or experience.

Basic Work Activities means any of the following six activities:

- a. Mobility (walking or bending):
 - 1 Walk, with or without a walking aid#, more than 200m on a level surface without stopping; or
 - 2 Bend, kneel or squat to pick something up from the floor from standing position and straighten up again.
- b. Vision (reading): Read, with visual aids, to the extent that an Ophthalmologist can certify that:
 - 1 visual acuity is equal to, or better than, 6/48 in both eyes; or
 - 2 constriction is within, or greater than, 20 degrees of fixation in the eye with the better vision.
- c. Lifting: Using one or both hands to hold an object weighing at least 5kg above ones own waist height continuously for 60 seconds.

- d. Manual dexterity: With at least one hand, without the use of aids:
 - 1 type words using a computer keyboard; or
 - 2 pick up a small object such as a coin or pen.
- e. Hearing: Clearly hear with or without an aid, where the inability to hear clearly must be due to permanent hearing loss of at least 90 dB in both ears, averaged over frequencies of 500Hz, 1000Hz and 2000Hz, as certified by an appropriate medical specialist.
- f. Communicating (verbal or written): Comprehend and express oneself through verbal or written language with clarity, where the inability to speak verbally or write with clarity must be due to dysfunction of the nervous system that is present on clinical examination, as certified by an appropriate medical specialist. Examples of dysfunction include dysarthria, aphasia and dysphasia.
- 2 Restricted TPD Definition (Psychiatric Disorders) Total and Permanent Disability – unable to do basic activities associated with work ever again. Our insurer determines that all of the following are satisfied:
 - i. the insured member has a psychiatric disorder which:
 - has been diagnosed by a consultant psychiatrist and Fellow of RANZCP under the latest edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM) issued by the American Psychiatric Association, and
 - the insured member has been receiving psychiatric treatment for at least 12 months prior to the insured member's treating psychiatrist assessing the psychiatric disorder as chronic and unlikely to improve in the foreseeable future with or without further treatment, and
 - ii. our insurer determines that solely because of their psychiatric disorder, the insured member has suffered from the

following incapacity for at least 12 consecutive months, and is likely to continue to be so incapacitated for the rest of their life:

- has received an established diagnosis of Schizophrenia or Schizophreniform Disorder from their treating psychiatrist, or
- is unable to care for their dependent children in any capacity due to the unacceptable risk that the dependent(s) will be exposed to physical, emotional or psychological harm, requiring the dependent(s) to be removed from the insured member's care by Court order, or
- is unable to manage day-today financial affairs, including:
 - managing bank balance, or
 - paying bills on time without assistance, requiring the appointment of a guardian to manage the insured member's financial affairs, where the appointment of a guardian must be made by Court or Tribunal order and the Court or Tribunal must be satisfied through its own independent medical review that the insured member is not capable of managing their day-to-day financial affairs as a result of their psychiatric disorder, or
- is unable to live independently, requiring a care provider to provide daily care and supervision to the insured member, or
- requires ongoing psychiatric treatment and full-time
- residential care in a mental health facility to protect
- them and/or others from serious physical harm. The mental health facility must be authorised by the relevant Australian government (state or federal) to provide treatment and care to persons who have a mental illness, and
- iii. the insured member has been absent from their occupation with the employer through injury or illness for at least 3

consecutive months and has provided proof to our insurer's satisfaction that the insured member has become incapacitated to such an extent as to render the insured member unlikely ever to engage in or work for reward in any occupation or work for which they are reasonably qualified by reason of education, training or experience.

Where:

Care provider means: professional carer who is paid on a commercial basis. Psychiatric treatment means: following the advice of a treating psychiatrist in accordance with an established treatment plan and expert guidelines for the treatment of psychiatric conditions (guidelines must be recognised in Australia).

Schizophrenia means: Schizophrenia (Multiple Episodes or Continuous), diagnosed in accordance with Diagnostic and Statistical Manual of Mental Disorders (DSM) 5.

Schizophreniform Disorder means: Schizophreniform Disorder (Multiple Episodes or Continuous), diagnosed in accordance with Diagnostic and Statistical Manual of Mental Disorders (DSM) 5.

TOTAL DISABLEMENT/DISABLEMENT (INCOME PROTECTION)

You are totally disabled if you:

- a) Have ceased to be gainfully employed because of sickness or injury and are unable to perform at least one income producing duty of your own occupation, and
- b) Are under the regular care of and following the advice of a medical practitioner, and
- c) Are not working in any occupation, whether or not for reward.

Or, if the paragraph above does not apply, you are totally disabled if you:

- a) Have a sickness or injury and (on the basis of medical or other evidence) in our insurer's opinion you are permanently incapacitated because of that sickness or injury, and
- b) Are under the regular care of and following the advice of a medical practitioner, and
- c) Are not working in any occupation, whether or not for reward.

'Permanently incapacitated' means you are unlikely to engage in any occupation for which you are reasonably qualified by education, training or experience.

TOTAL INCOME (FOR DETERMINING YOUR OCCUPATIONAL CATEGORY AND MAXIMUM COVER UNDER THE NEW MEMBER OPTIONS)

The total salary package value of remuneration received from your employer averaged over the most recent 12 months (including overtime, commission, bonuses and shift allowances, but excluding employer contributions).

If you have been working with your employer for a period of less than 12 months, the total value of remuneration received since you last commenced employment with your employer should be converted up to an annual figure.

If you are self-employed, the total annual value of before-tax income that is generated by you or the business as a result of your personal exertion (that is, income that would stop if you could not work due to illness or injury), and:

- Includes any allowances or fringe benefits paid to you which you may convert into cash salary at your option or which our insurer agrees to treat as part of your income, but
- Does not include any necessary business expenses incurred in producing that income.

Where you have multiple employment arrangements, the salaries (which may be either permanent or casual) will be combined to provide a total gross annual figure.

WAITING PERIOD

The minimum amount of time you must wait before you'll start receiving an income protection benefit period. You can select a waiting period of 30, 60 or 90 days. Different fees apply depending on the period you choose.

Keeping in touch is easy

A	CALL	
Ц	Call 1300 360 149 for easy access to your CareSuper account information. You can talk to one of our friendly staff 8am to 8pm Monday to Friday AET.	Q
	VISIT	
-	Visit caresuper.com.au to access the latest news and information, check out how CareSuper is performing and download publications and forms.	MAKE SURE WE CAN FIND YOU TOO! If you have changed
57	LOG IN	your postal or email address, or if you are
	Manage your super through MemberOnline. Simply log in to view your account balance or change your details, investment options or insurance cover. Log in or register at caresuper.com.au/login .	about to, don't forget to let us know. This way, you'll be sure to receive your important
G	CONTACT	superannuation statements and other
	You can send any questions or concerns through to caresuper.com.au/ getintouch.	valuable information. Call 1300 360 149 or log in to
	WRITE TO	MemberOnline via caresuper.com.au/
	CareSuper Locked Bag 20019 Melbourne VIC 3001	login to advise your new details.
<u>و</u>	REQUEST ADVICE	

ABOUT OUR INSURER

CALL

Insurance cover for CareSuper members is provided by our insurer, MetLife Insurance Limited (MetLife) ABN 75 004 274 882, AFSL 238 096.

Visit **caresuper.com.au/advice** to request a call from a financial planner.

MetLife is committed to delivering exceptional service and providing a member-friendly claims experience.

With over 145 years of experience, MetLife has become a global leader in the delivery of insurance solutions.

MetLife is one of the largest group insurers in Australia and currently helps protect 2.7 million Australians through a range of innovative insurance solutions.





1300 360 149

caresuper.com.au/getintouch
 CareSuper Locked Bag 20019 Melbourne VIC 3001

CARE Super Pty Ltd ABN 91 006 670 060 AFSL 235226 **CARE Super (Fund)** ABN 98 172 275 725 29 September 2023