

Important changes to your super

from 1 July 2013

In preparation for upcoming regulatory changes to superannuation, Qantas Super has reviewed the features and benefits we provide to our members. As a result, we are making some changes to your insurance from 1 July 2013.

Key changes at a glance

Here is a summary of the material changes to your insurance from 1 July 2013.

Changes to insurance				
A new insurer	We have appointed MLC Limited to provide your insurance benefits in Qantas Super.	page 2		
Exclusion for pre-existing medical conditions removed	Your Death and Total and Permanent Disablement (TPD) Benefits will no longer be reduced if you make a claim that relates to a pre-existing medical condition.	page 2		
New definition for TPD	You'll need to satisfy a new definition if you make a claim for a TPD Benefit.	page 3		
New conditions and features	We've made a few other changes including the introduction of maximum limits and restrictions on your insurance, and an improved continuation option.	page 4		

What you need to do

Please read and keep this document as it details the material changes being made to your insurance, reasons for the changes and how each change will affect you. **The changes will automatically apply** to your insurance from 1 July 2013.

More information

More information about these changes is contained in the *Frequently Asked Questions* at www.qantassuper.com.au. Or if you have questions about the changes, you can:

- ontact us on 1300 654 384 (+61 2 9374 3930 outside Australia), 8.30am to 5.30 AEST weekdays.
- email info@qantassuper.com.au

Issued by Qantas Superannuation Limited ABN 47 003 806 960 AFSL 288330 (**Trustee**) as trustee for the Qantas Superannuation Plan ABN 41 272 198 829 (**Qantas Super**).



Changes to insurance

As a member of Qantas Super, you are automatically provided with standard insurance benefits for death and total and permanent disablement (TPD), up to age 60. Insurance benefits, when payable, are paid in addition to your super account balance.

The following changes will be made to your standard insurance benefits from 1 July 2013.

A new insurer

Up until now, whenever we pay an insurance benefit to a member, the amount is paid from Qantas Super's assets – this is called 'self insurance'. Under new superannuation law, self insurance will only be allowed in very limited situations. So to comply with this new law, we have taken out an insurance policy with MLC Limited ABN 90 000 000 402 (Insurer) to cover the insurance benefits of our members effective 1 July 2013.

What does this mean for me?

From 1 July 2013:

- Your standard insurance benefits for death and TPD in Qantas Super will be provided by MLC Limited (Insurer), under a group life policy issued by the Insurer to the Trustee of Qantas Super. The Trustee may change insurer at any time.
- The Insurer will assess all TPD claims (in the past, claims have been managed internally by the Qantas Super team) and will liaise with you directly if more information is needed to assess your claim. When a decision has been made by the Insurer about your claim, a letter will be sent to you advising the outcome.

For death benefit claims. Qantas Super will liaise with the relevant people about information needed for payment of your death benefit. We will write to all relevant parties once a decision has been made on how your death benefit will be distributed.

The Trustee of Qantas Super remains responsible for ensuring our members are provided with access to adequate insurance benefits. We will regularly monitor the services provided by the Insurer, including the timely assessment of claims.

Please note: There is no change to the way the dollar amount of your standard insurance benefits is calculated.

Pre-existing medical conditions will no longer apply

From 1 July 2013, your standard insurance benefits for death and TPD will no longer be reduced if your claim relates to a pre-existing medical condition you had before you joined Qantas Super.

What does this mean for me?

Up until 30 June 2013, if a Death or TPD Benefit is payable, the insurance benefit amount may be reduced if your claim relates to a pre-existing medical condition. From 1 July 2013, this no longer applies¹.

Please note this only applies to your **standard** insurance benefits for death and TPD. If you have purchased any additional voluntary insurance cover for death and TPD, that additional cover can still be reduced for pre-existing medical conditions. Please see the *Insurance Guide* for additional voluntary cover on our website for more information about voluntary cover.

Your TPD Benefit will still be reduced for pre-existing medical conditions if the new definitions outlined on page 3 of this document do not apply to your claim.

New definitions for TPD

From 1 July 2013, under the new insurance policy with the Insurer, a new definition will apply for TPD Benefits.

Benefit type	Old definition until 30 June 2013	New definition from 1 July 2013
Total and Permanent Disablement (TPD) Benefit	You are eligible for a TPD Benefit when, through illness or injury, you are rendered incapacitated to such an extent that you are unlikely ever to be able to resume work or to attend to any gainful profession or occupation for which you are reasonably qualified by education, training or experience.	You are eligible for a TPD Benefit if you meet the Insurer's definition as outlined in the Trustee's insurance policy. This means that: a) You have been absent from your occupation' solely through injury or illness for a period of 3 consecutive months and you are incapacitated to such an extent that, in the Insurer's opinion, after consideration of medical and other relevant evidence, you were, at the end of the period of 3 consecutive months absence from employment, unlikely to ever engage in or work for reward in any occupation for which you are reasonably suited by education, training or experience or b) You suffer from the permanent loss of use of two limbs or the sight of both eyes, or the permanent loss of use of one limb and the sight of one eye (where limb is defined as whole hand or the whole foot), in circumstances where the loss will never be regained. If you work less than 15 hours a week, then point a) above does not apply and is replaced with: a) You have been absent from your occupation¹ solely through injury or Illness for a period of 3 consecutive months and you are incapacitated to such an extent that, in the Insurer's opinion, after consideration of medical and other relevant evidence, you were, at the end of the period of 3 consecutive months absence from employment, unlikely to ever be able to perform at least two activities of daily living¹ without the physical help of someone else.

¹ This term is defined in the Trustee's insurance policy with the Insurer. The Trustee may change insurer or policy terms at any time. **Occupation** means the employment or activity in which you are employed. **Activities of daily living** means bathing and/or showering, or dressing, or moving from place to place including in and out of bed and in and out of a chair, or eating or drinking, or using the toilet.

What does this mean for me?

The new definition for TPD benefits will apply for any claim you submit from 1 July 2013, except if:

- you are not at work on the last working day before 1 July 2013, and you do not return to work! and you subsequently submit a TPD Benefit claim for an illness/ injury that first occurred or became apparent before 1 July 2013, or
- you have lodged a claim for a TPD before 1 July 2013 and a final decision has not yet been made on that claim.

If the new definitions do not apply to you, the old definitions will continue to apply.

Return to work means you are actively performing all the duties and work hours of your usual occupation with your employer, free of any limitation due to injury or Illness.

New conditions and features

Under the new insurance policy with the Insurer, other new conditions and features will also apply to your insurance benefits from 1 July 2013. The main changes are:

New conditions and features	What this means		
Restrictions on the amount of your insurance benefit	If your standard insurance benefits for death and TPD are more than \$2 million, we will restrict them to this amount until the Insurer advises otherwise. We may ask you to submit a separate application for the cover above \$2 million. ¹		
	You might need to have a medical check before any cover above the limit is provided. Restrictions, exclusions or loadings can apply to your insurance benefits above the limits.		
	Please note : if your insurance benefits at 1 July 2013 already exceed the maximum limit, you will still be covered for the higher amounts from 1 July 2013. However, your insurance benefits will be restricted to those higher amounts, and any future increases will need to be assessed and approved by the Insurer.		
Maximum benefits	Your insurance benefits (including any additional voluntary insurance cover you have purchased) will be subject to a maximum of \$10 million for death and \$3 million for TPD.		
New maximum applies if you have a terminal illness	If you are terminally ill, your death benefit from Qantas Super (equal to your insurance benefit plus your super account balance) may be paid to you prior to your death.		
	From 1 July 2013 a maximum of \$3 million will apply to the insurance benefit component of your death benefit that is paid prior to your death. Any remaining balance of your insurance benefit will be paid after your death to your dependants or your legal personal representative.		
When insurance cover stops	Your insurance benefits will cease on the earliest of the following events:		
	 When you cease to be a member of Qantas Super² you turn age 60 the day before you commence service in the armed forces of any country (excluding Australian Army Reservists not deployed overseas) 		
	 you effect a continuation option 24 months after you commence leave approved by your employer, unless otherwise approved by the Insurer when a Death or TPD Benefit is paid, or you receive your Death Benefit prior to your death you die. 		
Continuation option	Where your insurance cover ceases when you leave employment and you are under age 60, you may be eligible to continue the insurance cover you have in Qantas Super by buying a personal insurance policy direct with the Insurer – without having to provide further medical evidence. This is called a continuation option. You must have your continuation option approved and accepted by the insurer within 60 days of leaving employment. You will be responsible for paying premiums directly to the Insurer.		
	From 1 July 2013 a continuation option will be available for death and TPD (previously this was for death only) for eligible members. Please read our <i>Frequently Asked Questions</i> at www.qantassuper.com.au for more information.		

¹ If you have lodged an application to increase your insurance but you die in an accident (which is not a hazardous pastime or sport not normally covered under the Trustee's insurance policy) before that application is finalised, the Insurer may still pay the amount of insurance you have applied for. If this happens, Qantas Super will include the additional amount when calculating your Death Benefit for payment. For more information please read our *Frequently Asked Questions* at www.qantassuper.com.au.

The information provided is of a general nature, is not intended to constitute financial product advice has not been prepared taking into account your objectives, financial situation or needs. The Trustee recommends that before acting on any information contained in this document, you seek financial advice or other disclosure statements from a licensed financial adviser.

² If you cease employment and your super account is transferred to Division 8 of Qantas Super (the division for our Retained members), your insurance benefits for death and TPD will also be transferred to Division 8. For more information please read your *Product Disclosure Statement (Member Guide)*.