



Insurance Guide

1 April 2020

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The information in this document forms part of the relevant Super Member Guide – Product Disclosure Statement (PDS) and the Pension Member Guide (PDS), dated 1 April 2020. Issued for the Labour Union Co-operative Retirement Fund (LUCRF Super) USI LUC0001AU (Super) and USI LUC5140AU (Pension) ABN 26 382 680 883 by the Trustee of the Fund, L.U.C.R.F Pty Ltd ABN 18 005 502 090 AFSL 258481.

You should read the information in this document and the relevant Super Member Guide – Product Disclosure Statement (PDS) or the Pension Member Guide (PDS) before making a decision to invest. All documents are available at lucrf.com.au or by calling 1300 130 780. The information in this document is general only and does not take into account your personal financial situation, objectives or needs. It is essential that you read the PDS and consider obtaining financial advice tailored to your own circumstances before making a decision about the Fund.

The Trustee holds Australian Financial Services Licence No. 258481 which authorises it to provide personal financial advice.

This Insurance Guide, along with the PDS, the Super Member Guide – Additional Information, Fees and Costs booklet and Investments Guide, does not take the place of the Trust Deed, which is a legal document governing the operation of the Fund.

The Trust Deed is binding on the Trustee, all contributing employers and all members of the Fund. A copy of the Trust Deed and Rules is available at lucrf.com.au. Information contained in this document and the PDS is current at the date of preparation.

Insurance cover is provided by OnePath Life Limited ABN 33 009 657 176 | AFSL 238 341 (“OnePath”) and subject to the terms and conditions of the insurance policies issued to the Trustee of LUCRF Super by OnePath (“the Policies”). This Insurance Guide provides a summary of the key terms and conditions of the Policies. Where information is summarised other than in the Policies themselves, it does not represent a complete description of the terms on which insurance cover is provided. The Policies represent the concluded agreements between OnePath and the Trustee and in the event of an inconsistency with this guide, the terms of the Policies prevail.

Changes and updates

Where advance notice is not required or is otherwise impossible, information on changes will be provided as soon as practicable following the change. The most up-to-date copy of this document is available by contacting LUCRF Super on 1300 130 780, visiting lucrf.com.au, or writing to us at PO Box 211, North Melbourne VIC 3051.

Contact us

 **1300 130 780**

 **lucrf.com.au**





Our flexible insurance can provide you and your loved ones with greater financial security in the event of your death, terminal illness or a disabling injury or illness.

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Your insurance options at a glance

We offer flexible and affordable cover to give you peace of mind.

Type of insurance				
				
	Death & Total and Permanent Disablement (TPD)	Death Only	Terminal Illness	Income Protection (IP)
What payment (also known as a 'benefit') is provided?	Lump sum	Lump sum	Lump sum	Income (a monthly payment for up to two or five years)
When is a benefit provided?	If you become totally and permanently disabled or when you pass away	When you pass away	If you suffer an illness or injury that's likely to result in your death within 12 months	If you're unable to work through illness, injury or accident
Who receives the benefit?	You, or your dependants, beneficiaries or estate/legal personal representative (LPR) when you pass away	Your dependants, beneficiaries or estate/LPR	You	You
Is automatic cover provided?	Yes*	Yes*	Yes*	No**^
Age cover can start	14	14	14	14
Age cover ends	70	70	70	65
Is there a waiting period before a claim can be made?	Yes for TPD – at least 91 days	No	No	Yes – a choice of 30, 60 or 90 days
Can you make changes to your cover?	Yes	Yes	Yes	Yes
Can you nominate beneficiaries ?	Yes	Yes	Yes	Yes

* Automatic default cover is only provided to members aged 25 years and over with an account balance greater than \$6,000 (subject to eligibility). However, you may make an election to receive default cover within 90 days of joining (subject to eligibility). See pages 6 and 7 for details.

^ Default Income Protection insurance is available to permanent employees of Woolworths NSW. See page 42 for details.

Will your insurance be automatically cancelled?

The Federal Government has introduced two new pieces of legislation known as the *Protecting Your Super* package and the *Putting Members' Interests First* reforms. These changes may have an impact on your insurance with your super fund.

Protecting Your Super (PYS)

From 1 July 2019, if you have a super account that hasn't received an amount (such as a contribution or rollover) for 16 continuous months, any insurance cover you have with that account will be cancelled.

How do you know if your insurance will be automatically cancelled due to inactivity?

We'll contact you after each period of 9, 12 and 15 months where no contribution has been received into your account, before we have to cancel your insurance (if the 16-month period is reached).

Putting Members' Interests First (PMIF)

For existing members, if your super account balance was less than \$6,000 on 1 April 2020 and had never been \$6,000 or more since 1 November 2019, any insurance cover you have with that account will be cancelled on 1 April 2020.

How do you know if your insurance will be automatically cancelled due to a low account balance?

If you're an existing member, you would've received a letter or email from us outlining the PMIF reforms, if you're at risk of losing your insurance, and what you can do to keep your cover.

Can you elect to keep your insurance?

Yes! You can let us know that you'd like to opt in to keep your insurance. Simply complete the Insurance Opt-in Form at lucrif.com.au and return it to us. Your opt-in request will apply for as long as your account is open, or until you choose to cancel your insurance.

Have more questions?

Call us on **1300 130 780** or email mypartner@lucrif.com.au. We're here to help.

Duty of disclosure

We have an ongoing duty of disclosure to our insurer whereby we must tell them anything that we know, or could reasonably be expected to know, that may affect the insurer's decision to provide insurance to our members. In order for us to comply with the duty of disclosure, we require you to tell us and the insurer anything you know, or could reasonably be expected to know, that may affect the insurer's decision to insure you and on what terms.

If you do not tell the insurer something

If you do not tell us or the insurer anything you are required to, and the insurer would not have provided the insurance or entered into the same contract with us if you had told the insurer, the insurer may avoid the contract within three years of entering into it. If the insurer chooses not to avoid the contract or reduce the amount of insurance provided, the insurer may, at any time, vary the contract in a way that places the insurer in the same position it would have been in if you had told us and the insurer everything you should have. If the failure to tell the insurer is fraudulent, the insurer may refuse to pay a claim and may treat the contract as if it never existed.

Handy tip

Working out how much and what type of insurance you need can be challenging. To help you decide, complete the table on page 18. Alternatively, use our online insurance calculator to help tailor your cover according to your personal circumstances. Visit lucrif.com.au/how-much-do-you-need.

Death & TPD and Death Only

Protecting you and your loved ones.

Our Death & TPD cover provides a payment (also known as a benefit) to you if you become totally and permanently disabled (as defined by our insurer), or to your dependants, nominated beneficiaries or your estate/LPR when you pass away.

You have three options:

1. **Accept our automatic default cover** (if you're eligible to receive it).
2. **Elect to receive default cover** when you join us (if you're eligible to receive it).
3. **Choose your own cover.**

The following default* insurance is available:

- 2 units of Light Blue Fixed Premium Death & TPD cover (if you're between 14 and 64), or
- 2 units of Light Blue Fixed Premium Death & Restricted TPD cover (if you're between 65 and 69).

Automatic default cover

You'll automatically receive default cover on your account from the first day you're 25 years or older and your account balance is greater than \$6,000, if:

- you're working
- your account has received a Superannuation Guarantee (SG) contribution from your employer
- your account has had no previous insurance cover, and
- you haven't told us that you elect not to have insurance cover on your account (i.e. you 'opt out' of insurance cover).

You can let us know if you don't want to accept this default cover. However, you must tell us within 60 days of the date the cover commenced for it to be removed without having any insurance premiums deducted from your account. Please read the 'Opting out from receiving automatic default cover' section on page 7.

Due to the PMIF reforms (see page 5), we're unable to provide automatic default cover to new members who are under the age of 25 and/or have an account balance less than \$6,000. However, you may still be able to elect to receive default cover (as outlined under 'Elect to receive default cover when you join us').

Elect to receive default cover when you join us

If you're not eligible for automatic default cover and you:

- are working
- have an employer who pays SG contributions into your LUCRF Super account, and
- are under 25 **or** have an account balance less than \$6,000,

you may elect (within 90 days of the date of your welcome letter) to receive the default* cover as outlined on page 7 in 'Default cover explained'. Simply answer a few questions in the Insurance Election Form and, if our insurer is satisfied with your responses, you'll be provided with default cover.

Choose your own cover

You can apply for a maximum of \$5 million Death cover, and \$3 million TPD cover. To apply, complete an Insurance Election Form available at lucrf.com.au or by calling **1300 130 780**. You'll also need to complete a OnePath Personal Statement if you're applying for more than \$1.1 million of cover.

You can also increase, reduce, convert or cancel your cover at any time. See page 26 for more.

* Subject to additional eligibility criteria – see page 25. Issue of default cover (automatic or elected) is only available once per account. Any future LUCRF Super accounts you hold may also be eligible for default cover. You're only eligible for insurance cover on one LUCRF Super account at a time.

Death & TPD and Death Only

Default cover explained

2 units of **Light Blue Fixed Premium** Death & TPD cover **(or Restricted TPD cover)**

Each unit represents a dollar value of cover that's dependent on your age. See page 29.

This is the default work category. There are three work categories under which you can be insured. See page 8.

This means your insurance is set at a fixed cost per unit of cover. See page 9.

If you're between 65 and 69, you must meet TPD Definition 2, 3, 4 or 5 (on pages 31-32) to receive a benefit.

When does default cover start?

Automatic default cover starts on whichever is the later of:

- the date you commenced work with your employer
- the first date of the period for which the first super contribution is paid by your employer into your LUCRF Super account, or
- the first date you're aged 25 years or over and your LUCRF Super account is \$6,000 or more.

Elected default cover starts from the date your application is accepted (provided that your application is accepted by LUCRF Super within 90 days of the date of your welcome letter).

Opting out of receiving automatic default cover

If you decide you don't want to have any default cover automatically applied to your account, you can tell us that you'd like to 'opt-out'. This means that if you are or you become eligible for automatic default cover, it won't be applied to your account.

This doesn't mean you can't apply for cover in the future, and you can change your opt-out election at any time. However, you'll need to provide evidence of your health and medical history to the insurer who will decide whether or not to provide you with any cover, including whether to place exclusions on your cover.

Can you make changes to your default cover?

Yes! You can increase, reduce, convert or cancel your cover at any time, subject to terms and conditions. See page 26.

Insurance offer for new members

If you're eligible for automatic default cover or have elected to receive default cover, you can increase your default cover (automatic or elected) up to our automatic acceptance levels. This means that you may be able to get more cover without having to provide any medical evidence.

Simply answer some questions in the Insurance Election Form and, if our insurer is satisfied with your responses, you can increase your 2 units of Death & TPD default cover to either:

- a maximum of 8 units of Death & TPD cover
- OR
- a maximum of 8 units of Death Only cover.

Note: If you choose to change to Death Only cover, your TPD insurance will stop from the date your application is accepted.

You can apply to elect for default cover AND increase your cover above the default cover level on the same form.

IMPORTANT

For details about our Death & TPD and Death Only cover, including the ins and outs of default cover, eligibility and restrictions, turn to page 25.

Death & TPD and Death Only

Work categories

Because different jobs have different risks, there are three work categories under which you can be insured.

Light Blue is the default category applied to you unless you tell us otherwise.

Your work category is determined at the time you apply for insurance and lasts for as long as you're with us (even if you change jobs), or until you apply for additional cover.



Light Blue (default)

You:

- are a skilled or unskilled worker
- perform light manual work
- are involved in non-hazardous industries and/or tasks.



White Collar

You:

- are in a professional, administrative, clerical, secretarial, or similar desk-bound (sedentary) role
- do not perform any manual tasks
- work at least 80% of the time in an office environment.



Professional

You:

- currently earn an annual salary package (including Superannuation Guarantee contributions) of \$150,000 or more
- work at least 80% of the time in an office environment and you're:
 - a professional white-collar worker with a university degree qualification relevant to the field of your main occupation or
 - an executive or senior managerial white-collar worker and not self-employed.

IMPORTANT

Got a new job? If your work category changes while you have insurance with us, it's important you let us know so that you're correctly covered for the work you do and you're not paying more (or less) than you should be.

We won't change your work category unless you complete the Change of Work Category Insurance Form (available at lucrf.com.au). We'll then confirm your new category in writing. Any changes to your work category will be effective from the date your application is accepted.

Death & TPD and Death Only

Fixed Premium vs Fixed Amount cover

We offer two types of Death & TPD or Death Only cover – Fixed Premium and Fixed Amount. What's the difference?

Fixed Premium

Our Fixed Premium cover is designed to make sure that your super balance isn't used to pay for excess cover you may not need when you're younger or older. Likewise, we want to make sure you're suitably covered at each stage of your life – particularly when you're likely to need the most.

You pay a fixed cost for every unit of cover you have according to your age. A unit represents a dollar value of insurance which varies depending on your age and the type of work you do.

The table on this page outlines the current cost per week for every two units of Light Blue Fixed Premium (the default) cover. See page 29 for a full table of costs and cover amounts.

Cost per week per 2 units of Light Blue Fixed Premium cover (default)

Current age	Death & TPD	Death Only
14-24	\$1.28	\$0.64
25-29	\$2.14	\$1.07
30-34	\$2.98	\$1.49
35-64	\$3.78	\$1.89
65-69*	\$2.55	\$1.28

*TPD cover is restricted to TPD Definition 2, 3, 4 or 5 once you're 65 and over on the event date (see 'TPD definitions' on pages 31 and 32 for more information).

Fixed Premium cover – case study 1

Dan

Age: 22

Occupation: Storeperson
(Light Blue work category)

Dan hasn't changed his level of cover from the default. He receives \$54,000 (2 units) of Light Blue Death & TPD cover for which he pays \$1.28 per week. His premium will stay at \$1.28 for the next two years as his cover amount increases slightly. When Dan turns 25, he'll start paying \$2.14 for 2 units (which will give him \$80,000 of cover).

For now, as a 22-year-old, Dan doesn't have a mortgage, school fees or hefty medical bills to consider. His current priorities are very different to those of an older member.



Death & TPD and Death Only

Fixed Premium cover – case study 2

Kelly
Age: 40
Occupation: Sales representative
(Light Blue work category)

Because Kelly's at an age where she has more financial responsibilities – a young family, a mortgage – she knows she needs to plan for a time when her circumstances may quickly change.

Kelly currently receives \$94,000 (2 units) of Light Blue Death & TPD cover for which she pays \$3.78 per week. Her premium will stay at \$3.78 until she turns 65, but her cover amount will decrease slightly each year to reflect her changing priorities.

Handy tip

Planning is key! While we try to determine your possible long-term needs at your current age, we can't accurately predict your individual circumstances. This is where you can start to take control of your future.

Our online insurance calculator can help tailor your insurance cover according to your personal circumstances – now, and in the future. You'll find it at lucrf.com.au/how-much-do-you-need.

Death & TPD and Death Only

Fixed Amount

With Fixed Amount cover, you pay a cost for every \$1,000 of cover you have. The cost of your insurance will change as you grow older, but the total amount you're insured for will stay the same.

See page 30 for a full table of costs and cover amounts.

Fixed Amount cover – case study

Anna

Age: 36

Occupation: Payroll manager
(White Collar work category)

Anna wants to lock in a fixed amount of Death & TPD cover so that her family can pay off the mortgage and have some money for the children's education in the event of her death, terminal illness or becoming totally and permanently disabled.

Based on Anna's current age and work category, a unit (or \$1,000) of cover will cost \$0.89 per year.

Anna selects 500 units so that she's covered for \$500,000 (500 units x \$1,000 per unit).

Her premium will be \$445 per year ($\0.89×500 units), or \$8.56 per week. This will be deducted from her super account on a quarterly basis.



Death & TPD and Death Only

Experiencing a big life change?

We know that things don't always stay the same. If you're going through a major change – such as having a baby, buying a house or getting married or divorced – you can apply to increase your cover without having to provide any medical evidence. See page 26.

Don't have an employer who pays super into your account?

If you join us when you don't have an employer contributing to your super account (for example, as the spouse of a member or because you're self-employed), you won't be given any default cover.

You can still apply for insurance, however. Simply complete an Insurance Election Form and a OnePath Personal Statement, available on our website or by calling us.

What about pre-existing conditions?

If you've suffered a previous health condition, an exclusion may be applied to your cover. This means you'll still be able to get cover, but you won't be able to claim a future benefit for this condition. See page 25 for more.

The choice is yours

Want more control over your insurance? You have the flexibility to choose and/or increase, reduce, convert or cancel your cover at any time, subject to terms and conditions. See page 26.

Opening up a LUCRF Retirement or Disability Pension account?

Your Death Only or Death & TPD insurance can carry over to your LUCRF Retirement or Disability Pension when you close your super account, and will continue until you turn 70 (restricted TPD cover applies from ages 65-69). Once you start your LUCRF Retirement or Disability Pension, you cannot change the amount of cover you have. However, you can choose to cancel the cover at any time. Call us for more information on insurance and your pension.

Please note that the *Protecting Your Super* (PYS) package (see page 5) applies to all accounts with insurance. If you choose to carry over your insurance from your super account to your retirement or disability pension, you'll automatically be electing to keep your cover under PYS. Please call us on **1300 130 780** if you have any questions.

Insurance matching or transferring

If you have Death & TPD or Death Only insurance with another super fund (other than a self-managed super fund), you can apply to have your existing level of insurance matched or transferred by us (subject to eligibility). See page 21.

Making a claim

All claims must be made in writing and sent to us with appropriate supporting documents. We'll then assess your claim along with our insurer and let you know of the outcome. See page 22 for information on how to make a claim.

Are you a jockey?

See page 34 to find out if you're eligible to receive default Death & TPD cover.

Income Protection

Giving you temporary financial support if you have to stop working due to illness, injury or accident.

Also known as salary continuance cover, Income Protection (IP) cover pays a monthly income to help support you and your family for a choice of up to two or five years.

How much cover can you apply for?

You can apply for cover of up to 85% of your pre-illness/injury salary. The first 75% is paid as income in arrears and anything over 75% is paid into your super account. The maximum monthly benefit payable is \$30,000. You'll need to send us satisfactory evidence of your income when you make a claim. Please note that acceptance of your application is up to our insurer.

How much does it cost?

The cost of IP cover depends on your age, gender, work category and the waiting and benefit periods you choose. See pages 39 and 40 for full tables of costs.

Handy tip

Not sure how to calculate the weekly cost of IP insurance? Follow these simple steps:

1. Work out how much cover per week you'd like to have.
2. Select a waiting period and your work category. Refer to the tables later in this section to see the weekly cost for \$100 of cover.

Are you eligible?

You can apply for IP insurance through us if you meet all of the following criteria:

- You're between 14 and 64 (cover stops at 65).
- You're an Australian citizen or an Australian permanent resident as defined in the *Migration Act (Cth)*.
- You hold a LUCRF Super account.

You must also be:

- a full-time or permanent employee working at least 15 hours per week

OR

- a contractor working at least 15 hours per week and on a fixed-term contract of at least one year

OR

- a casual employee working at least 30 hours per week (averaged over the previous six-month period). For information about eligibility for casual employees, see page 37.

Please note that jockeys are ineligible to receive IP cover.

Are you a Woolworths NSW employee?

See page 42 to find out if you're eligible for default IP cover.

Income Protection

Income Protection cover – case study

Matt

Age: 24

Occupation: Storeman

(Heavy Blue work category)

Current weekly income: \$588.24

Preferred waiting period: 90 days

Preferred level of IP cover: 85% of weekly income*
which is \$500 per week ($\$588.24 \times 85\% = \500)

Cost per \$100 weekly benefit: \$0.169 per week

Total cost for \$500 weekly benefit: \$0.85 per week
($\$0.169 \times 5$). This will be deducted from Matt's super
account each quarter.

*Paid as 75% salary and 10% super.



Income Protection

What's a benefit period?

A benefit period is the maximum length of time during which an IP benefit is paid. You can choose a benefit period of either two or five years regardless of whether you're a permanent or a casual employee. This means you'll receive a monthly income in arrears for your selected benefit period.

How do waiting periods work?

IP insurance has a waiting period from the time you become ill or injured and cannot work, to the time you're able to make a claim. This helps keep the cost of insurance low, given that people suffer from illnesses and injuries quite regularly, but not seriously enough to be unable to work for an extended period of time and need to make an insurance claim.

We offer a choice of three different waiting periods: 30 days, 60 days or 90 days. You choose the waiting period that's best for you. The longer the waiting period, the less expensive the cover will be. See page 37 for more.

Work categories

There are four work categories under which you can be insured for Income Protection.



Heavy Blue

You:

- are a skilled or semi-skilled manual worker or heavy-machine operator
- aren't exposed to high-risk accidents or health hazards
- aren't engaged in high-risk occupations.

This category isn't available for Death & TPD or Death Only insurance.



Light Blue

You:

- are a skilled or unskilled worker
- perform light manual work
- are involved in non-hazardous industries and/or tasks.

This category also covers supervisors of Heavy Blue workers or fully qualified tradespeople (details of qualifications must be provided).



White Collar

You:

- are in a professional, administrative, clerical, secretarial, or similar desk-bound (sedentary) role
- don't perform any manual tasks
- work at least 80% of the time in an office environment.

This definition is the same for Death & TPD and Death Only insurance.



Professional

You:

- currently earn an annual salary package (including Superannuation Guarantee contributions) of \$150,000 or more
- work at least 80% of the time in an office environment and you're:
- a professional white-collar worker with a university degree qualification relevant to the field of your main occupation, or
- an executive or senior managerial white-collar worker and not self-employed.

This definition is the same for Death & TPD and Death Only insurance.

Income Protection



Insurance offer for new members

If you have an employer who pays Superannuation Guarantee contributions into your super account, you can obtain, within 90 days from the date of your welcome letter, up to \$700 per week of IP cover with a two-year benefit period*. This means that as long as you satisfactorily answer a set of screening questions in the application form, you don't have to provide any medical evidence to obtain or increase your cover.

If you want to increase your cover to more than \$700 per week (or up to \$700 per week and the 90-day period has ended) you'll need to complete an Income Protection Form.

If you'd like to apply for a five-year benefit period, you'll need to complete an Income Protection Form and a OnePath Personal Statement available on our website or by calling us.

*The insurance offer for new members is only available once per account. Any future LUCRF Super accounts you hold may also be eligible for cover issued under an offer for new members. You're only eligible for insurance cover on one LUCRF Super account at a time.

How to apply for IP cover

Do you have an employer making Superannuation Guarantee contributions into your LUCRF Super account?

Complete an Income Protection Form. If you answer 'YES' to any of the health questions in the form, you'll also need to complete a OnePath Personal Statement and send both forms to:

LUCRF Super
PO Box 211
North Melbourne VIC 3051

Don't have an employer contributing to your LUCRF Super account?

You'll need to complete an Income Protection Form and a OnePath Personal Statement and send both forms to us for assessment.

Insurance matching or transferring

If you have Income Protection insurance with another super fund (other than a self-managed super fund), you can apply to have us match or transfer the amount of this cover (subject to eligibility) up to a maximum of \$6,000 per month. See page 21.

Making a claim

All claims must be made in writing and sent to us with appropriate supporting documents. Before any claim is approved, it must first be assessed and accepted by our insurer. See page 22 for information on how to make a claim.

IMPORTANT

To read about IP cover in more detail, including terms and conditions, see page 37.

Frequently asked questions

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How do you make a claim?	22



How much insurance cover do you need?

The tables below can help you calculate the level of insurance you might need. We believe they strike the right balance between the cover you need and the cover you can afford.

Our online insurance calculator can also help you tailor your cover according to your personal circumstances. Visit lucrf.com.au/how-much-do-you-need.

Death & TPD or Death Only insurance				
Step	Item	Description	Example	You
A	Annual expense to be covered	How much money do you spend each year? (This includes all bills and other living expenses).	\$70,000	
B	Subtract any other sources of income	This could include a spouse's income, interest/rental income or dividends from shares.	\$15,000	
C	Net annual income required	A minus B	\$55,000	
D	Cover required to provide net annual income	This is equal to C divided by 0.07 (this assumes any insurance payment would be invested in a 'balanced' investment option, such as our MySuper Balanced option).	$(\$55,000/0.07\%) = \$785,714$	
E	Add debt to be covered	How much existing debt would you like to pay off? (This could include home loans, personal loans and credit cards).	\$120,000	
F	Add funeral and legal expenses	These are one-off costs associated with finalising your estate (generally around \$20,000).	\$20,000	
G	Total cover required to provide net income and to cover expenses	D plus E plus F	\$925,714	
H	Subtract any other assets/investments	Add up any other investments (this could include super accounts or an investment property).	\$200,000	
I	Total cover required	G minus H	\$725,714	

Income Protection insurance				
Step	Item	Description	Example	You
A	Gross weekly salary	How much salary do you receive before tax every week?	\$700	
B	85% of A	What is 85% of your gross salary?	$(\$700 \times 0.85\%) = \595	
C	The waiting period (choice of 30, 60 or 90 days)	How long could you wait before payments commenced? (Note: The longer the waiting period, the cheaper the premium. You may be able to use up any paid leave from your employer during the waiting period).	60 days	
D	The benefit period (choice of 2 or 5 years)	Over what length of time would you like to receive IP benefits? (Note: The shorter the benefit period, the cheaper the premium).	2 years	
E	Units of cover available and cost	Units are provided in \$100 lots and cannot exceed 85% of your salary. Any cover in excess of 75% of your salary, up to a maximum of 10%, is paid into your super (\$595 [from B] would be rounded up to 6 units).	6	

What forms do you need to complete?

What insurance are you applying for (if you have an employer contributing to your super account)?

Fixed Premium cover

Default insurance (when joining)

2 units of Light Blue Death & TPD

Elect Default Insurance Form, or Insurance Election Form or Jockeys Insurance Election Form (if you're a licensed jockey)

Note: If you don't choose any insurance upon joining, this cover is automatically applied to your account provided you meet the eligibility requirements to receive automatic cover.

Insurance offer for new members (see p.6)

Within automatic acceptance levels and 90 days of joining:

8 units of Death & TPD

OR

8 units of Death Only

Insurance Election Form or Jockeys Insurance Election Form (new members)

Note: No medical evidence is required unless total cover exceeds \$1.1 million, in which case you'll need to complete a OnePath Personal Statement. You'll also need to complete a OnePath Personal Statement if you answer 'yes' to any health questions on the application or insurance election forms.

Cover above automatic acceptance levels or up to \$1.1 million (and after 90 days of joining)

Insurance Election Form or Jockeys Insurance Election Form

Note: If you answer 'yes' to any health questions on this form, you'll also need to complete a OnePath Personal Statement.

Cover above \$1.1 million

Insurance Election Form or Jockeys Insurance Election Form and OnePath Personal Statement

Fixed Amount cover

Up to \$1.1 million

Insurance Election Form or Jockeys Insurance Election Form

Note: If you answer 'yes' to any health questions on this form, you'll also need to complete a OnePath Personal Statement.

Over \$1.1 million

Insurance Election Form or Jockeys Insurance Election Form and OnePath Personal Statement

Income Protection insurance

Up to \$30,000 per month

Income Protection Form and OnePath Personal Statement

Note: Woolworths NSW employees need to complete the Elect Default Insurance or Insurance Election Form to apply for default Death & TPD **and** Income Protection cover. They only need to complete the Income Protection Form and OnePath Personal Statement if they want to increase their IP cover above the default level (see page 42 for details).

What forms do you need to complete?

Do you want to make a change to your existing cover?

Convert your cover

Fixed Premium to Fixed Amount (you must be under 60 and at work to be eligible)	Insurance Conversion Form Note: Your cover will be rounded up to the next \$1,000 upon conversion.
Fixed Amount to Fixed Premium	Insurance Conversion Form Note: Your cover will be rounded up to the next whole unit. If you answer 'yes' to any health questions on this form, you'll also need to complete a OnePath Personal Statement.

Make other changes

Change your work category	Change of Work Category Insurance Form
Increase cover due a significant life event	Life Events Form to Increase Death & TPD cover
Change your waiting or benefit period	Change of Income Protection Insurance Waiting and/or Benefit Period Form
Match/transfer your insurance with another fund	Insurance Matching/Transfer Form
Opt-in to keep cover	Insurance Opt-in Form
Opt-out of receiving automatic Death & TPD cover	Opt-out of Automatic Default Insurance Form
Apply to recommence cover cancelled under PYS	Application Form to Recommence Insurance Cancelled Under PYS
Apply to recommence cover cancelled under PMIF	Application Form to Recommence Insurance Cancelled Under PMIF (available until 31 May 2020)

Personal Plan members (if you don't have a contributing employer)

You're required to have sufficient funds in your account balance to pay your premiums before any insurance cover is provided and/or altered. You must also complete the forms below:

- Insurance Election Form
- OnePath Personal Statement.

Can we match or transfer insurance?

Yes! To apply for us to match or transfer the amount of your existing Death & TPD or Death Only insurance and/or the amount of your existing Income Protection insurance held with another fund, follow the steps below.

Step 1.

Complete an Insurance Matching/Transfer Form. You must answer all of the screening questions in the form to the satisfaction of the insurer.

Step 2.

Attach a copy of your most recent statement detailing the type and level of cover you have with the other fund. If your cover has changed since this statement was issued, you'll need to provide evidence of the new type and level of cover.

Step 3.

Attach a copy of any special acceptance terms that were agreed upon with your other fund (e.g. any restrictions, exclusions or limitations) if applicable.

What type of cover are you applying to match or transfer?

Death & TPD or Death Only

You can only apply for the matching or transferring of cover if you're under 61.

We'll only match or transfer cover up to \$1 million. Any amount over this needs to be assessed by our insurer. If your application is accepted, your new insurance cover will be subject to our terms and conditions. These may differ from your existing policy (or policies), so please take care to read our terms and conditions before you cancel any other policies.

We'll provide you with a sufficient number of Fixed Premium units to ensure that the amount of insurance provided, as a minimum, matches the cover held with your other super fund.

Income Protection

You can only apply for the matching or transferring of IP cover if you're under 61 and you haven't made, or you're not entitled to make, a claim in relation to your cover held with the other fund. If accepted by us, this cover will replace any existing IP cover you may have with us.

We'll only match or transfer cover where it's not subject to a premium loading. If there are any medical or lifestyle exclusions attached to the cover, these may continue to apply to your new cover. A maximum benefit period of two or five years will apply to the matched or transferred cover.

The maximum amount of cover you can have matched or transferred is \$1,400 per week (before tax), subject to total IP cover being less than \$1,600 per week (before tax). The waiting period for cover with the other fund must be 90 days or less.

IMPORTANT

Do not cancel your existing insurance arrangements until you've received confirmation in writing that we've accepted your application. Further terms and conditions apply. Contact us for more information.

If you do not cancel your previous cover within 30 days of when your matched or transferred cover starts with us, then, in the event of a claim, our insurer will reduce any benefit payable under this policy by the amount of any benefit paid or payable under your previous policy.

How do you make a claim?

Making an insurance claim is easier than you might think. Simply follow the steps below and remember that we're always here to help you.



Step 1.

Contact us first. One of our dedicated member service representatives will explain what happens when you make a claim and then send you the necessary forms and paperwork. They'll work with you to ensure that your claim is processed as smoothly as possible.

Step 2.

Complete our forms and lodge your claim. After speaking with us, you'll need to complete and send in the forms provided to you and supply all requested information (which may include medical reports and employment records) in order for your claim to be further assessed. Many of our forms can be received and/or submitted electronically or in paper form. When you return everything to us, please attach all the documents requested in the claims pack we'll send you.

What happens next?

Once we receive your application, we'll check to make sure you're eligible to make a claim. We'll then forward all your documents and information to our insurer who will assess your claim and make a decision.

Handy tip

We've put together an in-depth step-by-step guide to making an insurance claim, available at [lucrf.com.au](https://www.lucrf.com.au). We also have dedicated staff who can help you make your claim, or answer any questions you may have about your insurance – call us on **1300 130 780**.

How do you make a claim?

Making a Death & TPD or Death Only claim

All claims for the payment of an insured benefit must be made in writing with appropriate supporting documentation. Claims are jointly assessed by us and our insurer and approved or declined in accordance with the terms and conditions of the insurance policy document and the LUCRF Super Trust Deed.

Making an Income Protection claim

Before any claim is approved, it must first be assessed and accepted by our insurer. In order for your claim to be accepted, you must, solely as a result of an injury or illness, be:

- medically certified as being incapable of performing one or more duties of your *usual occupation* necessary to produce income
- following the advice of a medical practitioner
- not engaged in any occupation.

If you're unemployed or working less than 15 hours per week (or less than 20 hours per week for casual employees), you're not eligible to make a claim for any injury or illness that occurs during that time. However, you're still eligible to make a claim for those injuries or illnesses that occurred during the time you were employed for more than 15 hours per week if permanently employed, or at least 20 hours per week for casual employees.

You may be entitled to a *partial disability* benefit if you were *totally disabled* for at least 7 out of the first 12 consecutive days of the waiting period, then *totally or partially disabled* for the remainder of the waiting period and:

- you return to work in your *usual occupation* or another occupation and you're no longer capable of performing all the duties of your *usual occupation*, or
- you work in a reduced capacity or reduced hours

and your monthly income is less than your pre-disability monthly income or salary solely as a result of your injury or illness.

What happens to your premiums while you're making a claim?

Once you've submitted a claim form, your premiums will continue to be deducted from your account until your claim is approved. This will ensure that you're covered for all other events during this period, even if your claim is denied.

Please note: Words that appear in *italics* throughout this section have special meanings that are explained on pages 32 and 33 (for defined terms relevant to TPD cover) and page 41 (for defined terms relevant to IP cover).

What if your claim is denied?

To be eligible to receive a claim, you must satisfy the terms and conditions of the policy. If your claim is not successful, you'll receive a letter explaining the reason why it was denied. If you don't agree with the decision, we'll facilitate a review process. This will include an independent review by our claims review committee to ensure a fair decision is made.

If you'd like to lodge an objection to our decision and request a review by the claims review committee, you must follow these steps:

Step 1.

Lodge your objection in writing and include the reasons for your objection and any additional information in support of your claim.

Step 2.

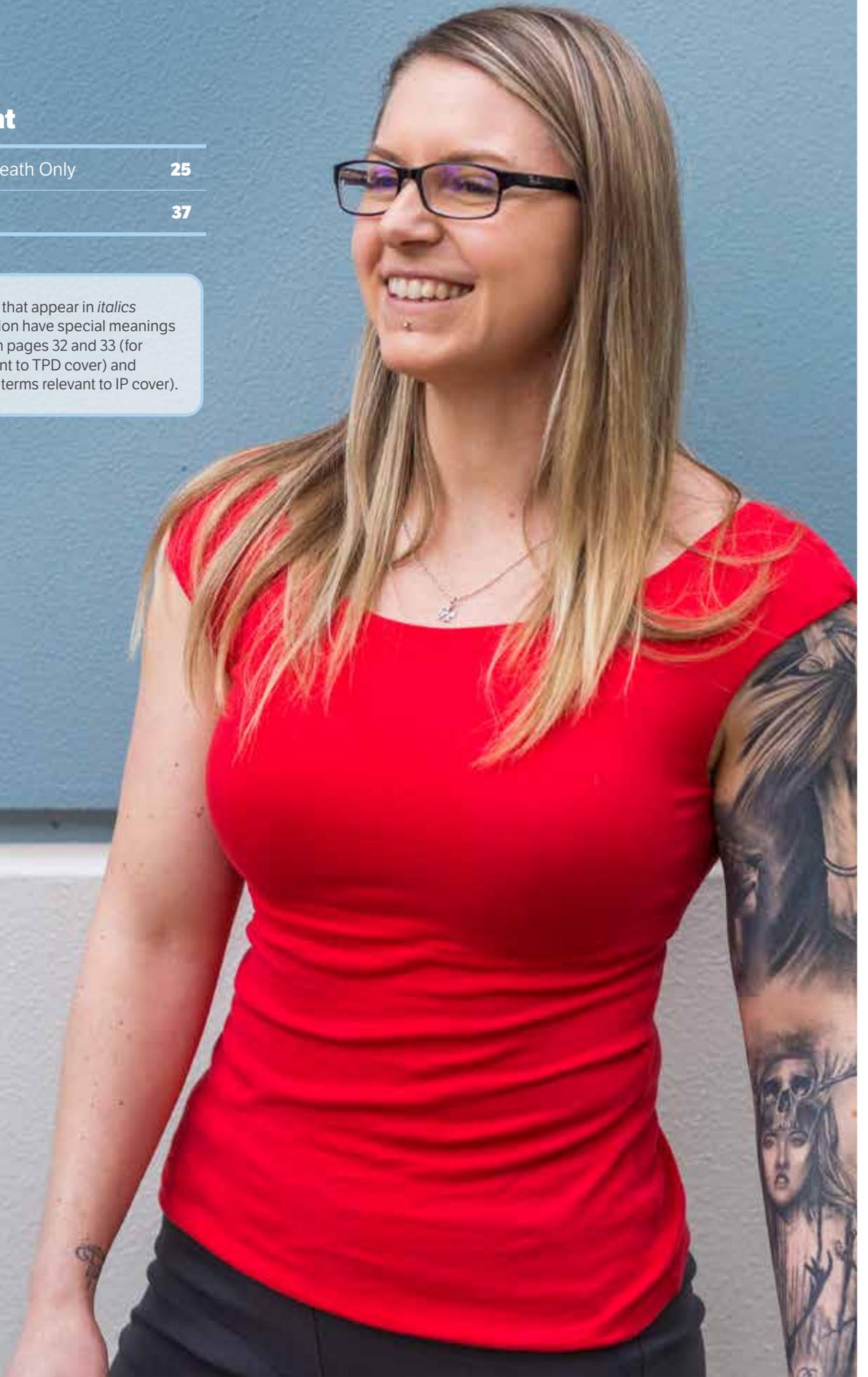
Send your written objection to:
The Complaints Officer
PO Box 211
NORTH MELBOURNE VIC 3051

Your written objection must be received by us within 28 days of you receiving the letter denying your claim.

The fine print

Death & TPD and Death Only	25
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Please note: Words that appear in *italics* throughout this section have special meanings that are explained on pages 32 and 33 (for defined terms relevant to TPD cover) and page 41 (for defined terms relevant to IP cover).



Death & TPD and Death Only

All the extra bits we need to tell you about our Death & TPD and Death Only cover.

Default cover

Eligibility

Our offer of default insurance cover (automatic or elected) applies to any member who:

- is between 14 and 69
- is an Australian citizen, permanent resident or the holder of a valid visa, or is temporarily residing outside of Australia (for up to three years)
- has an employer contributing to their LUCRF Super account.

Issue of default cover (elected or automatic) is only available once per account. Any future LUCRF Super accounts you hold may also be eligible for default cover.

Please note that Death & TPD and Death Only insurance cover isn't offered to people aged 70 or over, or to those who don't meet the residency requirements.

You're ineligible to receive our default insurance cover if you've previously elected not to have default insurance cover, reached age 70, or you're a *Claiming Terminal Illness Member*. If you're a *Claiming TPD Member*, you're only eligible to receive default Death Only cover. Please refer to page 32 for definitions of *Claiming TPD Member* and *Claiming Terminal Illness Member*.

Restrictions for elected default cover

New events cover will apply from your cover start date until you've been *at work* for 60 consecutive days.

Restrictions for automatic default cover

New events cover will apply from your cover start date for at least 12 consecutive months, and will be converted to full cover when you have been *at work* for 30 consecutive days immediately prior to the expiry of the 12-month period. If you're not *at work* for 30 consecutive days immediately prior to the expiry of the 12-month period, *new events cover* will continue until you've been *at work* for 30 consecutive days.

Please refer to pages 32 and 33 for definitions of *at work*, *new events*, *new events cover* and *pre-existing conditions*.

Medical and lifestyle exclusions

When you're assessed on your current health and you've suffered a previous health condition, an exclusion may be applied whereby you won't be able to claim a future benefit for this condition. While this underwriting will consider your full medical history, some conditions may be disregarded from the decision where a full recovery has been made and a relapse of further consequence is unlikely.

However, where the insurer does see a high risk, an exclusion will apply. An exclusion allows you to attain insurance cover that will give you financial protection in the event of an illness or injury, other than for any occurrence of an event associated with the exclusion listed. We'll inform you if an exclusion is to apply, and we'll need your acceptance of the new terms before your cover can commence. If you don't agree with the exclusion, call us to request that the insurer reviews their decision.

If you don't meet some of the eligibility conditions relating to default cover, the default cover you receive may be restricted to only covering you for *new events* and not also for *pre-existing conditions*.

Death & TPD and Death Only

Choosing insurance outside the default cover

When applying for Death & TPD or Death Only insurance, you can choose either Fixed Premium or Fixed Amount cover. If you have Death & TPD insurance or Death Only insurance, it must be either Fixed Premium or Fixed Amount. You cannot have a combination of both.

Where you have both Death & TPD and an additional amount of Death Only insurance, one part can be Fixed Premium and the other part can be Fixed Amount. You can apply for a maximum of \$5 million Death cover and \$3 million TPD cover.

Changing or cancelling your cover

You can increase, reduce, convert or cancel your cover at any time, subject to terms and conditions. You can cancel the TPD part of your Death & TPD cover, or your entire Death & TPD cover. You cannot cancel the Death cover component only while retaining the TPD cover. To make any changes to your Death & TPD cover, including changing your work category, complete the Insurance Election Form.

To cancel your insurance cover, you must send a signed instruction to us at the address below. Your cancellation will become effective from the date your request is received or a date in the future that you specify in writing. Send your cancellation request to:

LUCRF Super
PO Box 211
North Melbourne VIC 3051

Life events cover

Within 90 days of a specified life event occurring, you may qualify for some additional cover without having to provide any medical evidence.

Life events include the birth or adoption of a child, a dependent child starting secondary school, taking out a new mortgage (or increasing an existing mortgage by at least \$100,000) on your principal place of residence, completing an undergraduate degree, completing an apprenticeship, death of a spouse, and getting married or divorced.

You'll need to complete a Life Events Form to Increase Death & TPD cover and submit it within 90 days of the life event happening. A maximum of three applications for additional cover can be made, and only one application can be made in any 12-month period.

You won't be eligible for this additional cover if you've already made or you're entitled to make a claim under your existing cover with us (or cover for a similar benefit you hold outside of LUCRF Super).

When does voluntary cover start?

Voluntary cover starts once we've assessed and accepted your application. While we're assessing your application, interim accidental cover applies. This means that you may be covered for the amounts you've applied for (subject to the maximum limit of \$2 million) should you suffer an accident.

The following situations are not considered accidents, and any claims arising from them while your application is being assessed won't be covered:

- where one or more of the following was a contributing cause of injury or death:
 - illness
 - disease
 - allergy
 - any gradual onset of a physical or mental infirmity
- where the injury or death was the result of an intentional act or omission of the *insured member*
- where the *insured member* was injured or died as a result of an activity in respect of which they assumed the risk or courted disaster, irrespective of whether they intended injury or death.

Death & TPD and Death Only

When does cover stop?

Your insurance cover will stop:

- if your membership ceases
- if you write to us to cancel your cover (which will be cancelled from the date your request is received)
- on the last day of the month where there's not enough money in your account to cover the premium payment for you during that month
- on the date the insurer approves a terminal illness benefit for an amount equal to your Death cover
- when you reach the benefit expiry age (70 years for Death & TPD insurance)
- for TPD, on the date the insurer approves your TPD claim
- for Death, on the date of death*
- if no formal notification is received of 'employer-approved' leave (as defined by the insurer) in excess of 24 months
- if you're not an Australian resident:
 - 31 days after the date you no longer hold a visa
 - 90 days after you depart Australia (where you continue to permanently reside in Australia), or
 - 31 days after you depart Australia (where you no longer permanently reside in Australia)
- if you commence active service with the armed forces of any country, or, if you're a member of the Defence Force Reserve, the date you become the subject of a call-out order
- if your account is inactive for a continuous period of 16 months (inactive as defined under superannuation legislation) and where you haven't told us you'd like your insurance to continue. See the next section if your insurance has stopped under this condition and you'd like to have it recommence.

*If the Death sum insured is greater than the TPD sum insured and a TPD benefit is paid, the difference between the TPD sum insured and the Death sum insured will continue as Death Only cover.

Recommencement of insurance cover after 16 months of inactivity

If your insurance cover is cancelled because your account has been inactive for a continuous period of 16 months, you can apply to recommence it by:

1. completing the Application Form to Recommence Insurance Cover Cancelled due to the Protecting Your Super Package, available at lucrf.com.au, and sending it to us, and
2. having a contribution paid into your account (not required for pension accounts).

Both these steps must be done **within 60 days** from the date your insurance cover was cancelled by the requirements of the *Protecting Your Super* package.

Your application for recommencement will be sent to our insurer for approval. If your cover is cancelled due to the *Protecting Your Super* package on or after 1 July 2019, the insurer will require you to declare that you are currently *at work*.

For insurance cover that was cancelled on or after 1 July 2019, if you are not *at work* at the time the application was sent to us, you will only be covered for *new events* until you are *at work* for 30 consecutive days.

New events means you'll only be covered for an insured event that arose on or after the day the cover commences.

If your cover recommences, it will recommence at the later of:

- the date your application is submitted to us, or
- the date a contribution is paid into your account.

There may also be a gap in cover between the date your cover was cancelled and the date it recommenced. You won't be insured for any events during this period.

Your account must also have a sufficient balance to pay the insurance premium next due.

Any exclusions or restrictions that applied to your insurance cover immediately prior to cancellation will continue to apply from the date your cover is recommenced.

Should you wish to recommence cover cancelled due to the *Protecting Your Super* package **after 60 days**, you may make an application. **After 60 days**, any cover provided is subject to the insurer's written acceptance.

Death & TPD and Death Only

Recommendation of insurance cover cancelled under the *Putting Members' Interests First (PMIF)* reforms on 1 April 2020

For existing members, if your insurance cover is cancelled on 1 April 2020 because your account balance was below \$6,000 between 1 November 2019 and 1 April 2020, you can apply to recommence it by completing the Application Form to Recommence Insurance Cover Cancelled due to the Putting Member's Interests First Reforms, available at lucrf.com.au, and sending it to us. We must accept your application **before 31 May 2020**.

If your application is valid, your cover will recommence on the date the application is accepted by LUCRF Super if you have enough funds in your account to cover the cost of the insurance. From the date your cover is recommenced, you'll only be covered for *new events* until you are *at work* for 30 consecutive days.

New events means you'll only be covered for an insured event that arose on or after the day the cover commences.

There may also be a gap in cover between the date your cover was cancelled and the date it recommenced. You won't be insured for any events during this period.

Your account must also have a sufficient balance to pay the insurance premium next due.

Any exclusions or restrictions that applied to your insurance cover immediately prior to 1 April 2020 will continue to apply from the date your cover is recommenced.

Should you wish to recommence cover cancelled due to the PMIF reforms **after 31 May 2020**, you may make an application. **After 31 May 2020**, any cover provided is subject to the insurer's written acceptance.

Maintaining your cover

There are times when a change in your life may affect your insurance cover. We've outlined here what happens to your insurance if some of these changes apply to you.

Parental and other 'employer-approved' leave

Your insurance cover continues for up to 24 months while you're on parental or other leave (paid or unpaid) as long as your employer approves your leave. Before your leave begins, your employer should record the start date of your leave and the date it's expected to end.

If you're taking more than 24 months' leave, you must let us know as we'll need to apply to our insurer for your cover to continue before the end of this 24-month period. The final decision rests with the insurer.

Overseas cover

If you're an *insured member* and an Australian Resident and you're away from Australia for any reason, you'll receive worldwide, 24-hour cover. This cover will continue until it ends for any reason under 'When does cover stop?' on page 27.

If you're not an Australian Resident but you hold a visa and you're outside of Australia, your cover will continue for up to three consecutive months, as long as you continue to hold a visa and haven't permanently left Australia. The three-month period begins on the date you first leave Australia.

Continuation option

If your cover stops because you're no longer a member, you can apply for an individual Death Only insurance policy with our insurer. You must make this application and pay the first premium within 60 days of your membership ending. There may be restrictions on this policy, which can only be for a level of cover up to the amount you already had. Other eligibility criteria also apply.

Contact us if you'd like to apply for an individual insurance policy upon leaving us. Please allow enough time to obtain the application forms, a quotation and to arrange payment of your new premium.

War exclusion

In the event of war, our insurer may increase premiums, or exclude payment of an insurance claim if the reason for the claim is war-related.

Death & TPD and Death Only

Amount and cost of Death & TPD and Death Only insurance

The default cover is 2 units of Light Blue Fixed Premium Death & TPD.

Fixed Premium cover					
Current age	Amount of cover per unit			Cost per week per unit of cover	
	Light Blue	White Collar	Professional	Death & TPD	Death Only
14-15	\$22,500	\$36,500	\$42,500	\$0.64	\$0.32
16	\$23,000	\$37,500	\$43,500		
17	\$23,500	\$38,500	\$44,500		
18	\$24,000	\$39,000	\$45,000		
19	\$24,500	\$40,000	\$46,000		
20	\$25,000	\$40,500	\$47,000		
21	\$26,000	\$42,500	\$49,000		
22	\$27,000	\$44,000	\$51,000		
23	\$28,500	\$46,500	\$53,500		
24	\$30,000	\$49,000	\$56,500		
25	\$40,000	\$65,000	\$75,500	\$1.07	\$0.54
26	\$45,000	\$73,500	\$85,000		
27	\$50,000	\$81,500	\$94,500		
28	\$52,500	\$85,500	\$99,000		
29	\$55,000	\$89,500	\$103,500		
30	\$57,500	\$93,500	\$108,500	\$1.49	\$0.75
31	\$60,000	\$97,500	\$113,000		
32	\$62,500	\$102,000	\$118,000		
33	\$65,000	\$106,000	\$122,500		
34	\$67,500	\$110,000	\$127,000		
35	\$67,500	\$110,000	\$127,000		
36	\$67,500	\$110,000	\$127,000		
37	\$67,500	\$110,000	\$127,000		
38	\$67,500	\$110,000	\$127,000		
39	\$57,500	\$93,500	\$108,500		
40	\$47,000	\$76,500	\$88,500		
41	\$40,500	\$66,000	\$76,500		
42	\$35,000	\$57,000	\$66,000		
43	\$32,000	\$52,000	\$60,500		
44	\$30,000	\$49,000	\$56,500		
45	\$26,500	\$43,000	\$50,000		
46	\$23,000	\$37,500	\$43,500		
47	\$20,000	\$32,500	\$37,500		
48	\$18,000	\$29,500	\$34,000		
49	\$16,000	\$26,000	\$30,000		
50	\$14,500	\$23,500	\$27,500		
51	\$13,000	\$21,000	\$24,500		
52	\$11,500	\$18,500	\$21,500		
53	\$10,500	\$17,000	\$20,000		
54	\$9,500	\$15,500	\$18,000		
55	\$8,500	\$14,000	\$16,000		
56	\$8,000	\$13,000	\$15,000		
57	\$7,500	\$12,000	\$14,000		
58	\$7,000	\$11,500	\$13,000		
59	\$6,500	\$10,500	\$12,500		
60	\$6,000	\$10,000	\$11,500		
61	\$5,500	\$9,000	\$10,500		
62	\$5,000	\$8,000	\$9,500		
63	\$4,500	\$7,500	\$8,500		
64	\$4,000	\$6,500	\$7,500		
65-69*	\$3,500	\$5,500	\$6,500	\$1.28	\$0.64

*TPD cover is restricted to TPD Definition 2, 3, 4 or 5 once you're 65 and over on the event date (see 'TPD definitions' in this section for more information).
 Note: This is the net insurance cost you pay from your account balance. We pay the gross cost to our insurer, but because we're able to claim a tax deduction for the cost of providing insurance (which we pass onto members), you pay the lower net (after-tax) cost.

Death & TPD and Death Only

Amount and cost of Death & TPD and Death Only insurance

Fixed Amount cover (Annual cost per \$1,000 of cover)						
Current age	Light Blue (default)		White Collar		Professional	
	Death & TPD	Death Only	Death & TPD	Death Only	Death & TPD	Death Only
14-15	\$1.47	\$0.74	\$0.91	\$0.45	\$0.78	\$0.39
16	\$1.45	\$0.72	\$0.88	\$0.44	\$0.77	\$0.38
17	\$1.41	\$0.71	\$0.86	\$0.43	\$0.75	\$0.37
18	\$1.39	\$0.69	\$0.85	\$0.43	\$0.74	\$0.37
19	\$1.35	\$0.68	\$0.83	\$0.42	\$0.72	\$0.36
20	\$1.33	\$0.66	\$0.82	\$0.41	\$0.71	\$0.35
21	\$1.28	\$0.64	\$0.78	\$0.39	\$0.68	\$0.34
22	\$1.22	\$0.61	\$0.76	\$0.37	\$0.65	\$0.32
23	\$1.16	\$0.58	\$0.71	\$0.36	\$0.62	\$0.31
24	\$1.11	\$0.55	\$0.68	\$0.34	\$0.59	\$0.30
25	\$1.39	\$0.69	\$0.85	\$0.43	\$0.73	\$0.37
26	\$1.22	\$0.61	\$0.75	\$0.37	\$0.65	\$0.32
27	\$1.11	\$0.55	\$0.68	\$0.34	\$0.59	\$0.29
28	\$1.05	\$0.53	\$0.65	\$0.32	\$0.56	\$0.28
29	\$1.00	\$0.50	\$0.62	\$0.31	\$0.54	\$0.26
30	\$1.34	\$0.67	\$0.82	\$0.42	\$0.71	\$0.36
31	\$1.29	\$0.65	\$0.79	\$0.40	\$0.69	\$0.34
32	\$1.24	\$0.62	\$0.76	\$0.38	\$0.65	\$0.33
33	\$1.19	\$0.60	\$0.73	\$0.37	\$0.63	\$0.31
34	\$1.15	\$0.57	\$0.71	\$0.35	\$0.61	\$0.31
35	\$1.45	\$0.73	\$0.89	\$0.45	\$0.77	\$0.39
36	\$1.45	\$0.73	\$0.89	\$0.45	\$0.77	\$0.39
37	\$1.45	\$0.73	\$0.89	\$0.45	\$0.77	\$0.39
38	\$1.45	\$0.73	\$0.89	\$0.45	\$0.77	\$0.39
39	\$1.71	\$0.86	\$1.05	\$0.53	\$0.91	\$0.45
40	\$2.09	\$1.05	\$1.28	\$0.65	\$1.11	\$0.56
41	\$2.43	\$1.22	\$1.49	\$0.75	\$1.28	\$0.65
42	\$2.81	\$1.41	\$1.73	\$0.87	\$1.49	\$0.75
43	\$3.08	\$1.54	\$1.90	\$0.95	\$1.62	\$0.82
44	\$3.28	\$1.64	\$2.01	\$1.00	\$1.74	\$0.88
45	\$3.71	\$1.86	\$2.29	\$1.15	\$1.96	\$0.99
46	\$4.28	\$2.14	\$2.63	\$1.32	\$2.26	\$1.13
47	\$4.92	\$2.47	\$3.03	\$1.51	\$2.63	\$1.32
48	\$5.47	\$2.74	\$3.33	\$1.67	\$2.89	\$1.45
49	\$6.15	\$3.08	\$3.78	\$1.90	\$3.28	\$1.64
50	\$6.78	\$3.40	\$4.18	\$2.10	\$3.58	\$1.79
51	\$7.57	\$3.79	\$4.68	\$2.35	\$4.01	\$2.01
52	\$8.55	\$4.28	\$5.31	\$2.66	\$4.57	\$2.30
53	\$9.37	\$4.69	\$5.79	\$2.90	\$4.92	\$2.47
54	\$10.35	\$5.19	\$6.34	\$3.18	\$5.47	\$2.74
55	\$11.57	\$5.80	\$7.02	\$3.52	\$6.15	\$3.08
56	\$12.29	\$6.16	\$7.57	\$3.79	\$6.55	\$3.29
57	\$13.12	\$6.57	\$8.19	\$4.11	\$7.02	\$3.52
58	\$14.05	\$7.04	\$8.55	\$4.28	\$7.57	\$3.79
59	\$15.13	\$7.58	\$9.37	\$4.69	\$7.87	\$3.94
60	\$16.39	\$8.21	\$9.83	\$4.93	\$8.55	\$4.28
61	\$17.88	\$8.96	\$10.93	\$5.47	\$9.37	\$4.69
62	\$19.67	\$9.86	\$12.29	\$6.16	\$10.35	\$5.19
63	\$21.80	\$10.95	\$13.12	\$6.57	\$11.57	\$5.80
64	\$24.59	\$12.33	\$15.13	\$7.58	\$13.12	\$6.57
65-69*	\$18.95	\$9.47	\$12.05	\$6.03	\$10.20	\$5.10

*TPD cover is restricted to TPD Definition 2, 3, 4 or 5 once you're 65 and over on the event date (see 'TPD definitions' in this section for more information).

Note: This is the net insurance cost you pay from your account balance. We pay the gross cost to our insurer, but because we're able to claim a tax deduction for the cost of providing insurance (which we pass onto members), you pay the lower net (after-tax) cost.

Death & TPD and Death Only

TPD definitions

Set out below are the insurer's definitions of 'total and permanent disablement'. You're considered to be totally and permanently disabled if you meet one of the definitions described here.

Terms that appear in *italics* have special meanings which are explained on pages 32 and 33. The final decision on TPD claims is made by the Trustee.

Please note that in determining if you meet TPD Definition 1, TPD Definition 2, TPD Definition 3, TPD Definition 4 or TPD Definition 5, the insurer may have regard to all relevant information available to it from the *event date*. This includes information relevant to your future capability, and, for TPD Definition 1 and TPD Definition 2, *reasonable retraining*. Any factors unrelated to your capability, solely because of injury or illness, will not be considered. These include external factors such as availability of work and geographical location, as well as your personal circumstances such as your length of time out of the workforce or any other factors which may be relevant to the likelihood of you returning to work.

TPD Definition 1

An *insured member* satisfies all of the following:

- a) is under 65 on the *event date*
- b) is *gainfully working* on the day immediately prior to the *event date*
- c) has been employed for at least the *minimum average hours*, and
- d) in the insurer's opinion, based on medical or other evidence satisfactory to the insurer, solely because of the same injury or illness that is the subject of the *event date*, the *insured member*:
 - (i) has not worked (whether or not for reward) during the entire *waiting period*
 - (ii) since the *event date*, has continuously been following the advice of a *medical practitioner* in relation to the injury or illness for which they are claiming, and
 - (iii) as at the *date of disablement*, is unlikely ever to work in any *gainful employment* for which he or she:
 - is reasonably suited to by *previous education, training or experience*, or
 - may be reasonably suited to due to *reasonable retraining*.

TPD Definition 2

An *insured member* satisfies all of the following:

- a) is *gainfully working* on the day immediately prior to the *event date*
- b) solely because of the same injury or illness that is the subject of the *event date*, the *insured member* suffers a permanent impairment of at least 25% of the whole person impairment as defined in the American Medical Association publication 'Guides to the Evaluation of Permanent Impairment (5th Edition)', or an equivalent guide approved by the insurer, and
- c) in the insurer's opinion, based on medical or other evidence satisfactory to the insurer, solely because of the same injury or illness that is the subject of the *event date*, the *insured member*:
 - (i) since the *event date*, has continuously been following the advice of a *medical practitioner* in relation to the injury or illness for which they are claiming, and
 - (ii) as at the *date of disablement*, is unlikely ever to work in any *gainful employment* for which he or she:
 - is reasonably suited to by *previous education, training or experience*, or
 - may become reasonably suited to due to *reasonable retraining*.

TPD Definition 3

In the insurer's opinion, based on medical or other evidence satisfactory to the insurer, solely because of the same injury or illness that is the subject of the *event date*, the *insured member* satisfies all of the following:

- a) since the *event date*, has continuously been following the advice of a *medical practitioner* in relation to the injury or illness for which they are claiming, and
- b) as at the *date of disablement*, is:
 - (i) totally and irreversibly incapable of performing at least two of the *activities of daily living* (a person will be considered totally incapable of performing an *activity of daily living* if they cannot perform the activity independently, without the assistance of another adult person or suitable aids), and
 - (ii) unlikely ever to work in any *gainful employment* for which he or she is reasonably suited to by *previous education, training or experience*.

Death & TPD and Death Only

TPD Definition 4

In the insurer's opinion, based on medical or other evidence satisfactory to the insurer, solely because of the same injury or illness that is the subject of the *event date*, the *insured member* satisfies all of the following:

- a) suffers the total and permanent loss of the use of:
 - (i) two limbs (where 'limb' is defined as the whole hand or the whole foot), or
 - (ii) the sight in both eyes, or
 - (iii) one limb and the sight in one eye
- b) since the *event date*, has continuously been *following the advice of a medical practitioner* in relation to the injury or illness for which they are claiming, and
- c) as at the *date of disablement*, is unlikely ever to work in any *gainful employment* for which he or she is reasonably suited to by *previous education, training or experience*.

TPD Definition 5

In the insurer's opinion, based on medical or other evidence satisfactory to the insurer, solely because of the same injury or illness that is the subject of the *event date*, the *insured member* satisfies all of the following:

- a) suffers *cognitive loss*
- b) since the *event date*, has continuously been *following the advice of a medical practitioner* in relation to the injury or illness for which they are claiming, and
- c) as at the *date of disablement*, is unlikely ever to work in any *gainful employment* for which he or she is reasonably suited to by *previous education, training or experience*.

List of defined terms

Activities/activity of daily living means:

- a) bathing – bathing and showering
- b) dressing – dressing and undressing
- c) feeding – eating and drinking
- d) mobility – the extent of being able to get in and out of bed or a chair, and move from place to place without using a wheelchair
- e) toileting – the ability to use a toilet.

At work means an eligible person:

- a) is
 - (i) *gainfully working* and working at the relevant time and not on leave – he or she, in the insurer's opinion, is actively performing all the usual duties of his or her normal occupation, working his or her usual hours free from any limitation due to illness or injury, or
 - (ii) *gainfully working* and where the person is an employee, is on leave approved by their employer or, where the person is self-employed, is on leave other than leave which is taken for reasons related to injury or illness – he or she, in the insurer's opinion, is capable of actively performing all the usual duties of his or her normal occupation and capable of working his or her usual hours free from any limitation due to illness or injury, and

- (iii) engaged exclusively in domestic duties at the relevant time – he or she is actively performing all their unpaid domestic duties free from any limitation due to illness or injury, or
 - (iv) unemployed at the relevant time for reasons other than illness or injury – he or she is capable of actively performing all the usual duties of his or her normal occupation (being the occupation performed by the eligible person when they last worked) and capable of working his or her usual hours free from any limitation due to illness or injury, and
- b) is not in receipt of, or entitled to claim, income support benefits from any source including but not limited to workers' compensation benefits, statutory motor accident benefits or disability income benefits (including government income support benefits of any kind).

An eligible person who does not meet these requirements is correspondingly described as not *at work*.

Claiming Terminal Illness Member means you:

- a) had a claim admitted
 - b) are eligible to receive a benefit
 - c) are in a waiting period for a benefit, or
 - d) are in the process of claiming a benefit
- for terminal illness from LUCRF Super, or from another superannuation fund or life insurance policy.

Claiming TPD Member means you:

- a) had a claim admitted
 - b) are eligible to receive a benefit
 - c) are in a waiting period for a benefit, or
 - d) are in the process of claiming a benefit
- for total and permanent disablement from LUCRF Super, or from another superannuation fund or life insurance policy.

Cognitive loss means a total and permanent deterioration or loss of intellectual capacity due to the loss of or damage to neurons in the brain (or through acquired brain injuries or progressive neurodegenerative disease) which:

- a) has been clinically observed and evidenced in the *insured member* by a standardised test of a type which is accepted and endorsed by a relevant professional medical body or college in Australia
- b) has required the *insured member* to be under continuous care and supervision by an adult person for at least six consecutive months, and
- c) is likely, following the period of continuous care and supervision, to require the *insured member* to have ongoing continuous care and assistance by another adult person to perform any of the *activities of daily living*.

Date of disablement means:

- a) for TPD Definition 1, the first day after the expiry of the *waiting period*
- b) for TPD Definition 2, TPD Definition 3 and TPD Definition 4, the *event date*
- c) for TPD Definition 5, the first day after the expiry of the six-consecutive-month period following the *event date*.

Death & TPD and Death Only

Event date means:

- a) for TPD Definition 1, the first day of the *waiting period* during which the *insured member*, in the insurer's opinion, solely because of injury or illness, has not worked
- b) for TPD Definition 2, the date on which the *insured member* suffers a permanent impairment of at least 25% of whole person function as described in the the Evaluation of Permanent Impairment (5th edition)', or an equivalent guide to impairment approved by us, that results in the *insured member's* total and permanent disablement
- c) for TPD Definition 3, the first day that the *insured member*, in the insurer's opinion, solely because of injury or illness, is totally incapable of performing at least two *activities of daily living*
- d) for TPD Definition 4, the date the *insured member* suffers the loss of the use of two limbs (where 'limb' is defined as the whole hand or the whole foot), the sight in both eyes, or the sight in one eye and the use of one limb
- e) for TPD Definition 5, the date on which the *insured member* suffers a total and permanent deterioration or loss of intellectual capacity that results in the *insured member's* total and permanent disablement.

Following the advice of a medical practitioner means the *insured member* is under the regular care and following the advice of their treating *medical practitioner(s)*, on an ongoing basis, including following all recommended courses of treatment and rehabilitation.

Gainful employment means (a) or (b), as the context requires:

- a) in the context of TPD Definition 1, TPD Definition 2, TPD Definition 3, TPD Definition 4 and TPD Definition 5, and *gainfully working*, any occupation or work for reward or financial benefit, or the hope of reward or financial benefit, whether on a permanent or temporary basis, and whether or not of a lesser grade, status or level of remuneration or for lesser hours than the *insured member's* occupation(s) held prior to the *event date*
- b) in all other contexts of the policy, any occupation or work for reward or financial benefit, or the hope of reward or financial benefit, whether full-time or part-time, on a permanent or temporary basis.

Gainfully working/gainfully worked means a person:

- a) is engaged in *gainful employment*
- b) is an employee engaged in *gainful employment* and on unpaid or paid employer-approved leave for up to a period of 24 consecutive months
- c) is engaged in self-employment in an occupation or work for reward or financial benefit, or the hope of reward or financial benefit, whether full-time or part-time, and on unpaid or paid leave for up to a period of 24 consecutive months
- d) is engaged in self-employment in an occupation or work for reward or financial benefit, or the hope of reward or financial benefit, whether full-time or part-time, or
- e) has entered into a contract for services or a contract of service with an employer which requires the person to commence new *gainful employment* within 60 days of the date that they most recently ceased *gainful employment*.

Insured member is an eligible person for whom cover has been provided under the terms of the policy.

Medical practitioner means a medical practitioner who is medically qualified and properly registered in Australia, and not related, or connected by personal or business relationship, to the relevant *insured member*. If practising overseas, and not registered as a medical practitioner in Australia, it means the person is approved by the insurer and has qualifications equivalent to Australian standards. Chiropractors, physiotherapists, psychologists and alternative therapy providers are not regarded as *medical practitioners*.

Member means a member of LUCRF Super admitted pursuant to the trust deed of the industry division, personal division or pension division as the context requires.

Minimum average hours means 15 hours per week averaged over the six consecutive months immediately prior to the *event date*.

New event means a sickness which first becomes apparent, or an injury which first occurs on or after the date that cover last commenced, recommenced, or was reinstated in respect of the *member*.

New events cover means the *member* only being covered for claims arising from a *new event*.

Pre-existing condition means an injury, illness, condition or related symptom, whether it was diagnosed by a *medical practitioner* or not, which in the insurer's opinion:

- a) the *insured member* (or a reasonable person in their position) was aware of, or should have been aware of
- b) the *insured member* had, or was intending to have, a medical consultation for, or
- c) a reasonable person in the circumstances of the *insured member* would have had a medical consultation for,

as at, or prior to, the cover commencement date or date cover increased (with respect to the increased insured amount of cover only).

Previous education, training or experience means any education, training, experience or rehabilitation the person has undertaken prior to the *event date*.

Reasonable retraining means:

- a) any further education, training, experience or rehabilitation the person has undertaken since the *event date*, or
- b) any further education, training, experience or rehabilitation the person, in the insurer's opinion, has capacity to undertake and can be reasonably expected to do.

Waiting period means a 91-consecutive-day period.

For events that occurred prior to 15 February 2016, please contact us on **1300 130 780** for a copy of the relevant definitions. A different TPD definition applies for claims with an *event date* prior to 1 October 2018.

Death & TPD and Death Only

Cover when you join us as a jockey

If you're a licensed jockey, you're *at work* and you're receiving Superannuation Guarantee (SG) contributions from your state's Principal Racing Authority (PRA), and you meet the eligibility requirements (as set out on page 25), you may receive the following default insurance:

- up to 70 years of age: 2 units of Light Blue Fixed Premium Death & TPD cover
- 70 and over: no insurance.

If you're under 25 or have under \$6,000 in your account, you can elect to have default cover by completing the Jockeys Insurance Election Form within 90 days of the date of your welcome letter (subject to eligibility).

Once you turn 25, or if you're already over 25 and under 70, you'll automatically be allocated the default cover when your account balance reaches \$6,000 (subject to eligibility). You can opt-out of receiving automatic default cover – see page 7.

Certain restrictions will apply to your insurance cover, depending on whether it is automatic or elected. Please see page 25 for more information.

The cost of insurance is deducted directly from your super account. See page 29 for full tables of costs and cover amounts.

Insurance offer for new members

If you're eligible for default cover, you may increase your default cover (automatic or elected) up to our automatic acceptance* levels. This means that provided you answer a set of screening questions in the application form (to the insurer's satisfaction), you don't have to provide any medical evidence to increase your 2 units of Death & TPD default cover to either:

- a maximum of 8 units of Death & TPD cover

OR

- a maximum of 8 units of Death Only cover (by choosing to increase your Death Only cover, your TPD cover will cease from the date your application is received).

Once TPD cover has increased above the default cover, all TPD cover for jockeys (including the default cover) is solely based upon restricted cover (*specific loss, loss of independent existence or cognitive loss*). Further terms and conditions apply. To find out more, please call us on **1300 130 780**.

*Issue of default cover (automatic or elected) and the insurance offer for new members is only available once per account. Any future LUCRF Super accounts you hold may also be eligible for default cover or cover issued under an offer for new members. You're only eligible for insurance cover on one LUCRF Super account at a time.

Duty of disclosure

When insurance is provided to you, you must provide us with any information that could affect our insurer's decision to offer you cover. This is known as your 'duty of disclosure'. Refer to page 5 for full details of your duty of disclosure obligations.

Changing or cancelling your cover

You can increase, reduce, convert or cancel your cover at any time, subject to terms and conditions. You can cancel the TPD part of your Death & TPD cover, or your entire Death & TPD cover. You cannot cancel the Death cover component only while retaining the TPD cover. To make any changes to your Death & TPD cover complete the Jockeys Insurance Election Form. Where you apply for additional cover on top of your default cover, different TPD definitions will apply to the two layers of cover. Please see page 36 for the definitions.

To cancel your insurance cover, you must send a signed instruction to us at the address below. Your cancellation will become effective from the date your request is received or a date in the future that you specify in writing. Send your cancellation request to:

LUCRF Super
PO Box 211
North Melbourne VIC 3051

When does default cover start?

Automatic default cover starts on whichever is the latest of the following:

- the date your PRA became liable to pay SG contributions
- the start date of the contribution period covered by your PRA's first contribution to LUCRF Super, or
- the first date you're aged 25 years or over and your LUCRF Super account is greater than \$6,000.

Elected default cover, if accepted, starts from the date your application is accepted by LUCRF Super (within 90 days of the date of your welcome letter).

When does voluntary cover start?

Voluntary cover starts once we've assessed and accepted your application. While we're assessing your application, interim accidental cover applies. This means that you may be covered for the amounts you've applied for (subject to the maximum limit of \$2 million) should you suffer an accident.

The following situations are not considered accidents, and any claims arising from them while your application is being assessed won't be covered:

- where one or more of the following was a contributing cause of injury or death:
 - illness
 - disease
 - allergy
 - any gradual onset of a physical or mental infirmity
- where the injury or death was the result of an intentional act or omission of the *insured member*
- where the *insured member* was injured or died as a result of an activity in respect of which they assumed the risk or courted disaster, irrespective of whether they intended injury or death.

Death & TPD and Death Only

When does cover stop?

Your insurance cover will stop:

- if your membership ceases
- if you write to us to cancel your cover (which will be cancelled from the date your request is received)
- on the last day of the month where there's not enough money in your account to cover the premium payment for you during that month
- on the date the insurer approves a terminal illness benefit for an amount equal to your Death cover
- when you reach the benefit expiry age (70 years for Death & TPD insurance)
- for TPD, on the date the insurer approves your TPD claim
- for Death, on the date of death*
- if no formal notification is received of 'employer-approved' leave (as defined by the insurer) in excess of 24 months
- if you're not an Australian resident:
 - 31 days after the date you no longer hold a visa
 - 90 days after you depart Australia (where you continue to permanently reside in Australia), or
 - 31 days after you depart Australia (where you no longer permanently reside in Australia)
- if you commence active service with the armed forces of any country, or, if you're a member of the Defence Force Reserve, the date you become the subject of a call-out order
- if your account is inactive for a continuous period of 16 months (inactive as defined under superannuation legislation) and where you haven't told us you'd like your insurance to continue. See page 27 if your insurance has stopped under this condition and you'd like to have it recommence.

*If the Death sum insured is greater than the TPD sum insured and a TPD benefit is paid, the difference between the TPD sum insured and the Death sum insured will continue as Death Only cover.

Maintaining your cover

There are times when a change in your life may affect your insurance cover. We've outlined here what happens to your insurance if some of these changes apply to you.

Parental and other 'employer-approved' leave

Your insurance cover continues for up to 24 months while you're on parental or other leave (paid or unpaid) as long as your employer approves your leave. Before your leave begins, your employer should record the start date of your leave and the date it's expected to end.

If you're taking more than 24 months' leave, you must let us know as we'll need to apply to our insurer for your cover to continue before the end of this 24-month period. The final decision rests with the insurer.

Overseas cover

If you're an *insured member* and an Australian Resident and you're away from Australia for any reason, you'll receive worldwide, 24-hour cover. This cover will continue until it ends for any reason under 'When does cover stop?'

If you're not an Australian Resident but you hold a visa and you're outside of Australia, your cover will continue for up to three consecutive months, as long as you continue to hold a visa and haven't permanently left Australia. The three-month period begins on the date you first leave Australia.

Continuation option

If your cover stops because you're no longer a member, you can apply for an individual Death Only insurance policy with our insurer. You must make this application and pay the first premium within 60 days of your membership ending. There may be restrictions on this policy, which can only be for a level of cover up to the amount you already had. Other eligibility criteria also apply.

Contact us if you'd like to apply for an individual insurance policy upon leaving us. Please allow enough time to obtain the application forms, a quotation and to arrange payment of your new premium.

War exclusion

In the event of war, our insurer may increase premiums, or exclude payment of an insurance claim if the reason for the claim is war-related.

Note: Terms that appear in italics throughout this section has special meanings which are explained on pages 32, 33 and 36.

Death & TPD and Death Only

TPD definitions for jockeys

The final decision on Total and Permanent Disablement insurance claims is made by the Trustee. You're considered to be totally and permanently disabled if you have insurance cover with us and meet one of the definitions described below.

The definition that will apply will depend on whether you have the default level of cover only, or an increased amount.

Where you have two units of default insurance:

You must meet the standard definitions, as per page 31, to be eligible to receive a TPD benefit.

Where you have applied for more than your default cover:

You must satisfy one of the three parts of the following TPD definition, to be eligible to receive a TPD benefit.

Note: Terms that appear in *italics* on this page have special meanings which are explained on pages 32 and 33.

Part 1 – Specific loss

As a result of illness or injury, the *insured member*:

- a)** is disabled to such an extent, as a result of this impairment, that they are unlikely ever to engage in any occupation, business, profession, or employment for which they are reasonably suited by their *previous education, training or experience*, and
- b)** suffers the total and permanent loss of the use of:
 - two limbs (where 'limb' is defined as the whole hand or the whole foot), or
 - the sight in both eyes, or
 - one limb and the sight in one eye.



Part 2 – Loss of independent existence

As a result of illness or injury, the *insured member*:

- a)** is disabled to such an extent, as a result of this impairment, that they are unlikely ever to engage in any occupation, business, profession, or employment for which they are reasonably suited by their *previous education, training or experience*, and
- b)** suffers loss of independent existence.

Part 3 – Cognitive loss

As a result of illness or injury, the *insured member*:

- a)** is disabled to such an extent, as a result of this impairment, that they are unlikely ever to engage in any occupation, business, profession, or employment for which they are reasonably suited by their *previous education, training or experience*, and
- b)** suffers *cognitive loss*.

Income Protection

All the extra bits we need to tell you about our IP cover.

IP cover for casual employees

Casual employees are required to provide payslips or other evidence to the insurer which show both your income and the hours you were employed. To be eligible for cover, you must be working at least 30 hours per week (averaged over the previous six months). These documents must cover the six months prior to the date you completed this application. In the event of making a claim, a further six months of payslips are required to demonstrate you've worked at least 20 hours per week, averaged over the previous six months and to ensure you receive the correct benefit.

More about waiting periods

The waiting period begins when you're *totally disabled*, provided this date is after your IP cover has started. To be eligible for a *total disability benefit* or a *partial disability benefit*, you must be totally disabled for at least 7 out of the first 12 consecutive days of the waiting period, and then either *totally disabled* or *partially disabled* for the remainder of, and immediately after the waiting period. Please refer to page 41 for definitions of *totally disabled* and *partially disabled*.

If you return to work performing your normal duties and hours during the waiting period, then the waiting period starts again, unless your return to work only happens once (for no more than five consecutive days). If this happens, then the number of days worked will be added to the waiting period.

Please note that all IP claims are paid 30 days in arrears. This means if your waiting period is 60 days, your first benefit will not be paid until after 90 days.

When does cover stop?

Your IP cover ends on whichever is the earliest of the following:

- You cease to be a member.
- You provide written instructions cancelling your cover.
- You reach the benefit expiry age (65).
- The last day of the month where there is not enough money in your account to cover the premium payment for your cover during that month.
- You've been on paid or unpaid leave for longer than 24 months.
- If you're not an Australian Resident:
 - 31 days after the date you no longer hold a visa, or
 - 90 days after the date you depart Australia.

- You commence service with the armed forces in any country (excluding regular reserve training).
- You pass away.
- You transfer your entire super account balance to a pension account.
- Your account has been inactive for a continuous period of 16 months (inactive as defined under superannuation legislation) and you haven't told us you'd like your insurance to continue. See below if your insurance has stopped under this condition and you'd like to have it reinstated.

Recommencement of insurance cover after 16 months of inactivity

If your insurance cover is cancelled because your account has been inactive for a continuous period of 16 months, you can apply to recommence it by:

1. completing the Application Form to Recommence Insurance Cover Cancelled due to the Protecting Your Super Package, available at lucrf.com.au, and sending it to us, and
2. having a contribution paid into your account (not required for pension accounts).

Both these steps must be done **within 60 days** from the date your insurance cover was cancelled by the requirements of the *Protecting Your Super* package.

Your application for recommencement will be sent to our insurer for approval. If your cover is cancelled due to the *Protecting Your Super* package on or after 1 July 2019, the insurer will require you to declare that you are currently *at work*.

For insurance cover that was cancelled on or after 1 July 2019, if you are not *at work* at the time the application was sent to us, you will only be covered for *new events* until you are *at work* for 30 consecutive days.

New events means you'll only be covered for an insured event that arose on or after the day the cover commences.

Income Protection

If your cover recommences, it will recommence at the later of:

- the date your application is submitted to us, or
- the date a contribution is paid into your account.

There may also be a gap in cover between the date your cover was cancelled and the date it recommenced. You won't be insured for any events during this period.

Any exclusions or restrictions that applied to your insurance cover immediately prior to cancellation will continue to apply from the date your cover is recommenced.

Your account must also have a sufficient balance to pay the insurance premium next due.

Should you wish to recommence cover cancelled due to the *Protecting Your Super* package **after 60 days**, you may make an application. **After 60 days**, any cover provided is subject to the insurer's written acceptance.

Recommencement of insurance cover cancelled under the PMIF reforms on 1 April 2020

For existing members, if your insurance cover is cancelled on 1 April 2020 because your account balance was below \$6,000 between 1 November 2019 and 1 April 2020, you can apply to recommence it by completing the Application Form to Recommence Insurance Cover Cancelled to the *Putting Members' Interests First* reforms, available at lucrf.com.au, and sending it to us. We must accept your application **before 31 May 2020**.

If your application is valid, your cover will recommence on the date the application is accepted by LUCRF Super if you have enough funds in your account to cover the cost of the insurance. From the date your cover is recommenced, you'll only be covered for *new events* until you are *at work* for 30 consecutive days.

New events means you'll only be covered for an insured event that arose on or after the day the cover commences.

Any exclusions or restrictions that applied to your insurance cover immediately prior to cancellation will continue to apply from the date your cover is recommenced.

There may also be a gap in cover between the date your cover was cancelled and the date it recommenced. You won't be insured for any events during this period. Your account must also have a sufficient balance to pay the insurance premium next due.

Should you wish to recommence cover cancelled due to the PMIF reforms **after 31 May 2020**, you may make an application. **After 31 May 2020**, any cover provided is subject to the insurer's written acceptance.

Reduction of benefits

Your benefit may be reduced if you're in receipt of any other disability income from other illness or injury policies, or from another super fund, workers compensation or accident compensation.

Benefit exclusions

Benefit payments won't be made if your injury or illness is caused directly or indirectly:

- by war or an act of war
- by an intentional self-inflicted act
- as a result of your pregnancy, childbirth or miscarriage, unless you're disabled for more than three months from the date the pregnancy finishes or disability commences. When this occurs, the disability will be taken as starting at the later date. If your disability is a result of an event not related to your pregnancy, then the pregnancy exclusion won't apply.

Benefit payments may be reduced or refused:

- if the premium hasn't been paid
- while you're imprisoned
- if you don't comply with the claim requirements
- if you don't provide notice as soon as reasonably possible after your disability starts, to the extent the assessment or management of your claim is prejudiced.

Income Protection

Cost of Income Protection cover – two-year benefit period

This table outlines the weekly cost of cover per \$100 weekly benefit if you choose a two-year benefit period.

Weekly premium per \$100 weekly benefit (30-day waiting period)								
Current age	Heavy Blue		Light Blue (default)		White Collar		Professional	
	Male	Female	Male	Female	Male	Female	Male	Female
14–19	0.452	0.482	0.306	0.329	0.176	0.176	0.161	0.161
20–24	0.467	0.498	0.322	0.345	0.184	0.184	0.168	0.168
25–29	0.505	0.567	0.345	0.391	0.192	0.207	0.176	0.189
30–34	0.605	0.743	0.414	0.513	0.238	0.268	0.216	0.245
35–39	0.804	1.018	0.551	0.697	0.314	0.368	0.286	0.335
40–44	1.102	1.385	0.758	0.949	0.429	0.498	0.391	0.454
45–49	1.553	1.867	1.064	1.278	0.605	0.674	0.551	0.613
50–54	2.265	2.525	1.553	1.737	0.880	0.911	0.802	0.829
55–59	3.451	3.504	2.372	2.410	1.339	1.263	1.219	1.150
60–64	3.925	3.665	2.693	2.517	1.523	1.324	1.386	1.205

Weekly premium per \$100 weekly benefit (60-day waiting period)								
Current age	Heavy Blue		Light Blue (default)		White Collar		Professional	
	Male	Female	Male	Female	Male	Female	Male	Female
14–19	0.261	0.291	0.184	0.199	0.092	0.100	0.085	0.091
20–24	0.276	0.299	0.192	0.207	0.092	0.100	0.085	0.091
25–29	0.299	0.345	0.207	0.238	0.100	0.115	0.091	0.106
30–34	0.360	0.452	0.245	0.306	0.123	0.153	0.113	0.140
35–39	0.475	0.620	0.329	0.429	0.161	0.215	0.147	0.196
40–44	0.681	0.880	0.467	0.605	0.230	0.299	0.210	0.272
45–49	0.964	1.194	0.666	0.819	0.329	0.406	0.300	0.369
50–54	1.523	1.714	1.049	1.179	0.521	0.590	0.475	0.537
55–59	2.334	2.395	1.607	1.645	0.796	0.819	0.725	0.746
60–64	2.732	2.479	1.882	1.706	0.934	0.850	0.850	0.773

Weekly premium per \$100 weekly benefit (90-day waiting period)								
Current age	Heavy Blue		Light Blue (default)		White Collar		Professional	
	Male	Female	Male	Female	Male	Female	Male	Female
14–19	0.161	0.176	0.123	0.138	0.062	0.069	0.057	0.063
20–24	0.169	0.184	0.131	0.138	0.062	0.069	0.057	0.063
25–29	0.161	0.207	0.123	0.161	0.062	0.077	0.057	0.070
30–34	0.169	0.222	0.131	0.169	0.062	0.085	0.057	0.077
35–39	0.222	0.299	0.169	0.230	0.085	0.115	0.077	0.106
40–44	0.352	0.482	0.268	0.368	0.131	0.184	0.119	0.168
45–49	0.567	0.750	0.429	0.574	0.215	0.284	0.196	0.259
50–54	0.995	1.179	0.758	0.896	0.375	0.444	0.342	0.405
55–59	1.760	1.722	1.347	1.316	0.666	0.651	0.607	0.593
60–64	1.997	1.607	1.530	1.232	0.758	0.612	0.690	0.558

Note: This is the net cost you pay. The above rates include estimated stamp duty of 9%.

Income Protection

Cost of Income Protection cover – five-year benefit period

This table outlines the weekly cost of cover per \$100 weekly benefit if you choose a five-year benefit period.

Weekly premium per \$100 weekly benefit (30-day waiting period)

Current age	Heavy Blue		Light Blue (default)		White Collar		Professional	
	Male	Female	Male	Female	Male	Female	Male	Female
14–19	0.804	0.794	0.545	0.542	0.314	0.290	0.287	0.265
20–24	0.844	0.831	0.581	0.575	0.332	0.307	0.303	0.280
25–29	0.930	0.962	0.634	0.663	0.352	0.352	0.323	0.321
30–34	1.139	1.287	0.778	0.890	0.447	0.465	0.407	0.425
35–39	1.543	1.804	1.059	1.235	0.603	0.652	0.549	0.595
40–44	2.171	2.512	1.492	1.722	0.845	0.902	0.769	0.822
45–49	3.136	3.480	2.148	2.382	1.221	1.255	1.112	1.143
50–54	4.706	4.845	3.227	3.332	1.829	1.747	1.666	1.591
55–59	7.399	6.950	5.086	4.780	2.872	2.504	2.614	2.280
60–64	7.102	6.109	4.874	4.196	2.755	2.207	2.508	2.008

Weekly premium per \$100 weekly benefit (60-day waiting period)

Current age	Heavy Blue		Light Blue (default)		White Collar		Professional	
	Male	Female	Male	Female	Male	Female	Male	Female
14–19	0.586	0.720	0.414	0.493	0.207	0.246	0.190	0.226
20–24	0.632	0.746	0.439	0.516	0.211	0.249	0.193	0.227
25–29	0.694	0.875	0.481	0.603	0.232	0.292	0.212	0.268
30–34	0.853	1.168	0.581	0.793	0.290	0.397	0.267	0.361
35–39	1.150	1.632	0.797	1.128	0.390	0.564	0.355	0.515
40–44	1.678	2.369	1.151	1.627	0.566	0.804	0.516	0.732
45–49	2.433	3.287	1.680	2.255	0.831	1.117	0.755	1.016
50–54	3.940	4.846	2.713	3.332	1.347	1.666	1.228	1.518
55–59	6.217	6.974	4.280	4.790	2.120	2.385	1.930	2.171
60–64	6.031	5.963	4.156	4.104	2.062	2.043	1.876	1.859

Weekly premium per \$100 weekly benefit (90-day waiting period)

Current age	Heavy Blue		Light Blue (default)		White Collar		Professional	
	Male	Female	Male	Female	Male	Female	Male	Female
14–19	0.332	0.435	0.253	0.340	0.127	0.170	0.116	0.156
20–24	0.348	0.457	0.269	0.343	0.127	0.172	0.116	0.157
25–29	0.340	0.527	0.260	0.410	0.130	0.196	0.119	0.178
30–34	0.366	0.581	0.283	0.441	0.133	0.221	0.122	0.201
35–39	0.493	0.797	0.374	0.613	0.187	0.306	0.170	0.282
40–44	0.803	1.319	0.611	1.005	0.297	0.503	0.272	0.459
45–49	1.325	2.113	1.003	1.616	0.502	0.798	0.458	0.728
50–54	2.397	3.419	1.826	2.598	0.904	1.288	0.824	1.174
55–59	4.364	5.152	3.339	3.939	1.651	1.947	1.503	1.774
60–64	4.014	3.878	3.077	2.974	1.523	1.478	1.386	1.347

Note: This is the net cost you pay. The above rates include estimated stamp duty of 9%.

Income Protection

Defined Income Protection cover terms

Set out below are the insurer's definitions of relevant terms. Definitions for *italicised* terms that do not appear here can be found on pages 32 and 33.

At work means an eligible person:

- a) is
 - (i) *gainfully working* and working at the relevant time and not on leave – he or she, in the insurer's opinion, is actively performing all the usual duties of his or her normal occupation, working his or her usual hours free from any limitation due to illness or injury, or
 - (ii) *gainfully working* and where the person is an employee, is on leave approved by their employer or where the person is self-employed, is on leave other than leave which is taken for reasons related to injury or illness – he or she, in the insurer's opinion, is capable of actively performing all the usual duties of his or her normal occupation and capable of working his or her usual hours free from any limitation due to illness or injury, and
- b) is not in receipt of, or entitled to claim, income support benefits from any source including but not limited to workers' compensation benefits, statutory motor accident benefits or disability income benefits (including government income support benefits of any kind).

An eligible person who does not meet these requirements is correspondingly described as *not at work*.

Following the advice of a medical practitioner means the *insured member* is following the regular advice of their treating *medical practitioner* on an ongoing basis, including following all recommended courses of treatment and rehabilitation.

Insured member is an eligible person for whom cover has been provided under the terms of the policy.

Medical practitioner means a medical practitioner who is medically qualified and properly registered in Australia, and not related, or connected by personal relationship, to the relevant *insured member*. If practising overseas, and not registered as a medical practitioner in Australia, it means the person is approved by the insurer and has qualifications equivalent to Australian standards. Chiropractors, physiotherapists, psychologists and alternative therapy providers are not regarded as *medical practitioners*.

New events restriction means we will only pay a benefit that arises directly from an illness which became apparent to the *insured member*, on or after the cover commencement date or the date cover increased (in respect of the increased insured amount of cover only) and provided the said injury or illness is not a *pre-existing condition*.

Partial disability and partially disabled means, in the insurer's opinion based on the satisfactory evidence available to them at the relevant time, solely as a result of injury or illness the *insured member* is:

- a) *following the advice of a medical practitioner* in relation to their illness or injury for which they are claiming, and
- b) is not capable of performing all of the duties of their *usual occupation*, but:
 - (i) has returned to work in their *usual occupation* or is working in another occupation and has a monthly income less than their pre-disability salary, or
 - (ii) is capable of working (or is working) in his or her *usual occupation* in a reduced capacity or reduced hours, and is not capable of earning (or is not earning) a monthly salary that is equal to or more than his or her pre-disability salary.

Pre-existing condition means an injury, illness, condition or related symptom, whether it was diagnosed by a *medical practitioner* or not, which in the insurer's opinion:

- a) the *insured member* (or a reasonable person in their position) was aware of, or should have been aware of
- b) the *insured member* had, or was intending to have, a medical consultation for, or
- c) a reasonable person in the circumstances of the *insured member* would have had a medical consultation for,

as at, or prior to, the cover commencement date or date cover increased (with respect to the increased insured amount of cover only).

Total disability/totally disabled/total disablement means solely as a result of injury or illness, the *insured member* is:

- a) medically certified as being incapable of performing one or more duties of his or her *usual occupation* necessary to produce salary
- b) not engaged in any occupation (whether or not for reward), and
- c) *following the advice of a medical practitioner* in relation to the illness or injury for which they are claiming.

Usual occupation means the occupation(s) in which the *insured member* is regularly engaged at the time they suffer an injury or illness which leads to their disability. For periods of disability which occur while the *insured member* who:

- a) is an employee and was on employer-approved leave, or
- b) is self-employed and was on leave,

it means the last occupation(s) the *insured member* performed immediately before the employer-approved leave commenced.

Income Protection

Income Protection cover for Woolworths NSW employees

When you first join us as a permanent Woolworths NSW employee, you're eligible to be provided with default IP cover (automatic or elected) of \$500 per week of Light Blue cover with a 30-day waiting period in addition to the default Death & TPD cover.

You have three options when you join us:

1. **Accept our automatic default cover** (if you're eligible to receive it).
2. **Elect to receive default cover** when you join us (if you're eligible to receive it).
3. **Choose your own cover.**

The conditions that apply to accepting, electing or opting-out to receive default Death & TPD cover (pages 6 and 7) also apply to IP cover for Woolworths NSW employees.

Eligibility

You must be under 65, a full-time or permanent part-time employee working more than 15 hours a week and accruing both annual and sick leave entitlements.

Casual employees

If you're a casual employee and you're working at least 30 hours per week (averaged over the previous six-month period), you can apply for IP cover by completing an Income Protection Form. You must be paid on an hourly basis for the period you work, and must not be entitled to accrue annual or sick leave.

Please update us if your employment status changes from casual to permanent so that we can automatically allocate you with the default cover specified above.

How much does IP cover cost?

It depends on your age, gender, work category and the waiting and benefit periods you choose. Please let us know if you wish to apply to change your work category from Light Blue to White Collar or Professional, where lower premiums will apply. Your work category will not change until you complete the occupational questions on the Change of Work Category Insurance Form. We'll then advise you in writing of your new classification.

What about a waiting period?

This cover has a two-year benefit period. If you'd like a five-year benefit period, you must apply separately by completing an Income Protection Form and a OnePath Personal Statement.

Restrictions for elected default cover

New events cover will apply from your cover start date until you've been at work for 60 consecutive days.

Restrictions for automatic default cover

New events cover will apply from your cover start date for at least 12 consecutive months, and will be converted to full cover when you have been at work for 30 consecutive days immediately prior to the expiry of the 12-month period. If you're not *at work* for 30 consecutive days immediately prior to the expiry of the 12-month period, *new events cover* will continue until you've been at work for 30 consecutive days.

Please refer to pages 32 and 33 for definitions of *at work*, *new events*, *new events cover* and *pre-existing conditions*.

You may have this limited form of cover if, for example, your employer does not pay your first contribution to your super account within six months of you starting work. In this case, the restriction on cover will apply for at least 12 months from the day your cover commences but might continue beyond this if you're not *at work* at the end of those 12 months.

Or, if you're not *at work* on the day your cover is due to start, the restriction will apply until you've been *at work* for at least two consecutive months. Please refer to page 41 for definitions of *at work* and *pre-existing conditions*.

Insurance offer for new members

If you're a new member and Woolworths NSW is making contributions into your LUCRF Super account, you can apply to increase your cover (automatic or elected) from \$500 per week up to \$700 per week IP insurance provided that LUCRF Super accepts your application within 90 days from the date of your welcome letter.

This means that as long as you answer a set of screening questions in the Income Protection Form (to the satisfaction of the insurer), you don't have to provide any medical evidence to increase cover.

Applying to increase your cover

The maximum cover you can have is up to 85% of your pre-illness/injury salary (as defined by the insurer). Of this, up to 75% is paid as income payable in arrears, with the remaining balance (up to 10%) paid into your super account. The maximum benefit payable is \$30,000 per month. The cost of any increased cover depends on your age, gender, the type of work you do and the waiting period you choose.

Note: Issue of default cover (automatic or elected) is only available once per account. Any future LUCRF Super accounts you hold may also be eligible for default cover. You're only eligible for insurance cover on one LUCRF Super account at a time.



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