

# Making a total and permanent disablement claim

The options provided with your super can offer some peace of mind if you suffer from a total and permanent disablement. We're here to help you navigate the claims process as quickly and easily as possible.

When you suffer from a total and permanent disablement (TPD) or permanent incapacity, you can claim two different types of benefit payments: an insurance benefit (if you have cover), and the early release of your super.

When making a TPD claim, you can:

1. apply for the insurance in your super if you have Death and Total & Permanent Disablement (TPD) cover
2. apply to have your super balance released early because of permanent incapacity.

These two claims are assessed separately. The first type of claim is assessed by our insurer (OnePath Life Limited, or "OnePath"), while the second type of claim is assessed by us.

Where possible, and in most instances, we'll manage both cases as one claim to keep all the information together and to make it easier for you.

## Steps to making a TPD claim

### Step 1: Contact us first.

Call us on **1300 130 780** or email [claims@lucrf.com.au](mailto:claims@lucrf.com.au). If you email us, we'll call you to explain the claims process.

We'll conduct an initial review of your cover and let you know if you have (or had) TPD cover at the date you became disabled or when you were certified disabled. We'll review this again once we receive all your paperwork. We'll also ask you some screening questions before moving on to the next step.

The next steps depend on whether you have (or had) TPD insurance.

## If you have (or had) insurance

### Step 2: Complete the forms and lodge your claim.

After we've spoken to you, we'll send you a claims pack containing forms that must be completed, including an insurer's form that will need to be completed by your medical practitioner. We'll also ask you to provide the following:

1. The date you last worked.
2. The date you were medically certified with a TPD.
3. The date you were diagnosed with your medical condition.
4. The date you last worked in your normal duties.

When you return everything to us, make sure you attach all the documents as requested in the claims pack. Some documents may need to be certified – we'll include a handy fact sheet in your claims pack about how to do this.

You may also receive requests from OnePath for additional information to support your claim. Sometimes OnePath may request that you see one of their specialists. If this is required, OnePath will clearly explain the process to you, and book you in for a consultation with a specialist close to you.

### Step 3: Your claim is assessed.

Once you send us all the completed forms and required documents, we'll:

- verify that we've received everything needed to progress your claim further, and
- reassess your eligibility.

We'll then send all the required insurance information to OnePath for their assessment. They'll contact you directly with details of your case manager. They may also require more information either from you or your treating doctor and/or specialist.

## Contact us

 [lucrf.com.au](http://lucrf.com.au)  [mypartner@lucrf.com.au](mailto:mypartner@lucrf.com.au)

 **1300 130 780**  **PO Box 211 North Melbourne VIC 3051**

#### Step 4: A decision is made.

OnePath will decide the outcome of your insurance benefit claim. A decision on your claim can only be made once all relevant information and medical evidence has been sent to us and is considered by OnePath and us.

If you've lodged a claim for the early release of your super balance due to your permanent incapacity, we'll contact you about this while OnePath is deciding on your insurance claim. If we have everything we need, we can usually release your super before your insurance claim is accepted.

#### Step 5: Your benefit payment is made.

If your claim is successful, payment will be made to you. If your claim is successful, the money will be transferred to LUCRF Super by OnePath. We'll contact you immediately, and will let you know:

- how to withdraw some or all your insurance payment and super
- how withdrawals will be taxed, and
- any ongoing conditions you'll need to meet for transfer of your benefit to your elected bank account.

The payment will be the amount of insured cover that applied at the date you were deemed to be totally and permanently disabled (that is, the date of your event).

### If you don't have insurance

#### Step 2: Lodge your claim for the early release of super under Permanent Incapacity.

Send us two written medical certifications that confirm you've become permanently incapacitated. The certificates must be by two legally qualified medical practitioners and:

- state the following: "Because of ill health, it is unlikely that the person can ever be gainfully employed in a capacity for which they are reasonably qualified because of education, experience or training."
- be the originals (that is, not copies), and
- be printed on the treating medical practitioners' official letterhead.

#### Step 3: A decision is made.

We'll let you know if your claim has been successful.

#### Step 4: Your benefit payment is made.

If your claim is successful, your benefit will become payable to you.

### Important

Please note that a successful claim for the early release of super due to permanent incapacity doesn't automatically entitle you to an insurance payout.

## Things you should know about TPD insurance claims

### How is 'total and permanent disablement' defined?

For your insurance 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 be engaged in any occupation.

In addition, when you make a TPD insurance claim, your claim will be assessed against OnePath's definitions of 'total and permanent disablement' as outlined below.

### If the illness or injury that caused you to stop working occurred on or after 1 April 2021

You must meet one of the following definitions:

- TPD Definition 1: Unlikely to work
- TPD Definition 2: Incapable of ever working
- TPD Definition 3: Permanent loss
- TPD Definition 4: Domestic duties

For full definitions, please see our Insurance Guide available at [lucrf.com.au](http://lucrf.com.au).

### If the illness or injury that caused you to stop working occurred before 1 April 2021

You'll be assessed against a different set of TPD definitions as follows:

Date of the illness or injury that caused you to stop working	Applicable OnePath TPD definitions
1 October 2018 - 31 March 2021	<ul style="list-style-type: none"> <li>• TPD Definition 1: Unlikely to work</li> <li>• TPD Definition 2: Permanent impairment</li> <li>• TPD Definition 3: Activities of daily living</li> <li>• TPD Definition 4: Permanent loss</li> <li>• TPD Definition 5: Cognitive loss</li> </ul>
15 February 2016 - 30 September 2018	<ul style="list-style-type: none"> <li>• TPD Definition 1: Unlikely to work</li> <li>• TPD Definition 2: Activities of daily living</li> </ul>

Please contact us for more information on the TPD definitions that apply to events that occurred before 1 April 2021.

### Exclusions

Some members may have exclusions applied to their insurance. When you lodge a claim, we'll inform you if you have any exclusions applicable to your case. For full definitions, terms and conditions, please refer to our Insurance Guide.

## New events cover

New events cover means you'll be covered for an illness or injury which first becomes apparent on or after the date that your cover last commenced, recommenced, or was reinstated. You won't be covered for any illness or injury that occurs prior to your cover starting. When you lodge a claim, we'll let you know if new events cover is applicable to your case. For more information on new events cover, please see our Insurance Guide.

## Is there a waiting period for TPD claims?

Yes, with all TPD claims there is a waiting period of at least 91 days. This is the period you must wait before any benefit is assessed and, if accepted, paid.

## Do you need a solicitor to make a TPD claim?

It's entirely up to you to decide if you'll need a solicitor to make your claim – we can't advise you. However, the following points may help you make an informed decision if you're considering legal advice:

- You'll have a dedicated OnePath claims assessor managing your claim.
- We have a legal obligation to act in your best interests.
- Hiring a solicitor will not influence the time frames or the final payment amount of your claim, and all legal costs will be paid by you.

## When are you ineligible to make a TPD claim?

A claim is not an eligible claim if, at the date of your injury or illness:

- you were 70 or older
- you requested your insurance to be cancelled
- you weren't a member of LUCRF Super
- you returned 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 worked in a reduced capacity or reduced hours
- you became the subject of a call-out order if you commenced active service with the armed forces of any country, or, if you're a member of the Defence Force Reserve
- your account was inactive for a continuous period of 16 months and you never told us you wanted your insurance cover to continue
- you're not an Australian resident, and your insurance has stopped\*.

\* If you're not an Australian resident, your insurance stops:

- 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).

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## What happens to your premiums while you're making a TPD 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.

## What if your claim is denied by the insurer?

To be eligible to receive a claim, you must satisfy the terms and conditions of the policy. If your claim is unsuccessful, you'll receive a letter explaining the reason why. 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 OnePath has made a fair and reasonable decision.

You can make an objection to a decision or a complaint directly with us or by contacting the Australian Financial Complaints Authority (AFCA).

AFCA is an independent body set up by the federal government to assist members, or their beneficiaries, resolve certain complaints and is an alternative to tribunals and courts. AFCA may be able to assist you in resolving your complaint, but will only become involved after your complaint has been considered under our internal dispute resolution process. To find out how to lodge your complaint with AFCA, or if it can be handled by them, contact them at:

### Australian Financial Complaints Authority

GPO Box 3  
Melbourne VIC 3001  
Phone: 1800 931 678 (free call)  
Email: [info@afca.org.au](mailto:info@afca.org.au)  
Website: [afca.org.au](http://afca.org.au)