

Applying for a Total & Permanent Disablement payment

This fact sheet provides information about how to apply for a Total & Permanent Disablement (TPD) benefit payment if you become totally and permanently disabled.

This fact sheet will help explain:

- what TPD is and how it works,
- what happens when you claim and who's involved, and
- what happens if your application is approved.



What is TPD?

TPD cover can pay you a lump sum benefit if you become totally and permanently disabled and can no longer work. A lump sum can help cover the costs of rehabilitation, debt repayments and the future cost of living.

Not sure if you have TPD cover?

Log into your account or call us on **1300 667 387** to find out. If you used to be a member and you think you had TPD cover at the time your injury or illness occurred, call us on **1300 667 387** and we can check for you.

Is your illness or injury covered?

All illness and injury types are considered unless an exclusion has been applied to your cover. Eligibility to claim a TPD benefit payment is determined by the Insurer¹. You must meet the policy terms and conditions, including some specific TPD definitions.

If you're not sure if you should apply, call us on **1300 667 387** and we can help you work out the next steps.

What you need to tell us

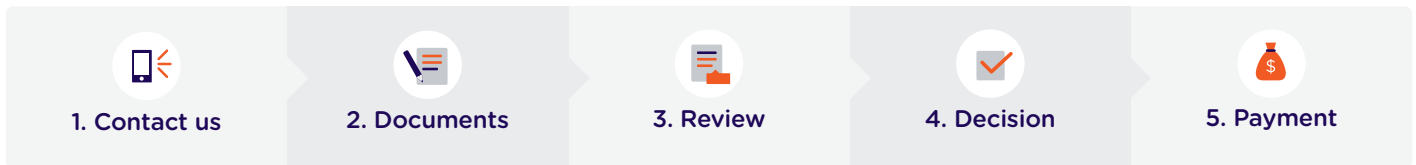
When you call us, you'll need to know:

- the date you were considered totally and permanently disabled by your doctor,
- the date you last performed the normal duties of your job, and
- the date you last worked in any capacity.



¹ The insurance provider may differ depending on the date of your illness or injury. AustralianSuper insurance is currently provided by TAL Life Limited (the Insurer) ABN 70 050 109 450, AFSL 237848.

What happens when you make a claim



Step	What happens
1. Contact us	Call 1300 667 387 from 8.30am to 5pm AEST/AEDT weekdays. If you're not sure if you should apply, call us and we'll help you work out the next steps.
2. Documents	<p>We'll send you some forms to complete including a Medical Attendant's Statement (MAS), which you'll need to take to your treating doctor to complete. You'll need to pay any fees associated with this step.</p> <p>We'll work with you to make sure we receive all of the information required to process your application.</p> <p>The Insurer will start reviewing your application for benefit payments when they've received your MAS. IF you can't have your MAS completed, please contact us for help with progressing your claim.</p>
3. Review	The Insurer will review your completed claim documents and assign a dedicated claims consultant to assess your claim. The Insurer may request further medical information from your doctors, and if so, will cover the cost of these reports.
4. Decision	<p>Once the Insurer makes a decision on your claim, they'll let you know in writing and confirm any amount payable as well as any requirements to commence payments.</p> <p>If your claim isn't approved, the Insurer will notify the Fund and we'll complete an independent review of the Insurer's decision. We'll contact you and let you know of the outcome of our review and provide a reason for the decision.</p>
5. Payment	<p>If your claim is approved, the Insurer will pay your benefit into your super account. A dedicated case manager will contact you to discuss your options with accessing your benefit and account balance.</p> <p>You'll be paid:</p> <ul style="list-style-type: none">• the amount of cover the Insurer has determined is payable based on the policy, and• your super account balance. <p>The Insurer will pay your benefit payment into your super account and from there we'll contact you to confirm your payment preference.</p> <p>You won't be able to withdraw your benefit payment from your account until we've received the two completed certificates of release from you. The certificates are valid for 18 months from the date they're completed so if your application takes longer, you may need to provide new certificates of release.</p> <p>It's possible your TPD benefit payment may result in financial or tax implications so you may also want to consider getting independent advice².</p>

² Personal financial product advice is provided under the Australian Financial Services Licence held by a third party and not by AustralianSuper Pty Ltd. Some personal advice may attract a fee, which would be outlined before any work is completed and is subject to your agreement. With your approval, the fee for advice relating to your AustralianSuper account(s) can be deducted from your AustralianSuper account.

Roles and responsibilities

When it comes to applying for a TPD payment, a number of parties have a role to play in the claim process.

Party	Responsibilities
You	<ul style="list-style-type: none">• Complete any documentation sent to you.• Provide any further information requested by your claims consultant.• Keep your claims consultant updated of any changes, for example:<ul style="list-style-type: none">- a change in contact details,- if you return to work, or- any scheduled surgery.
The Insurer	<ul style="list-style-type: none">• Review your documentation and see if more information is needed.• Assign a Claims Consultant to:<ul style="list-style-type: none">- explain the claims process to you and guide you through your claim,- respond to any queries you may have,- keep you updated on the progress of your claim.• Decide if you're able to receive a payment based on whether or not you meet the policy definitions.
Us	<ul style="list-style-type: none">• Oversee the claims process.• Oversee the conduct of the Insurer and other service providers.• Complete an independent review when the Insurer doesn't believe a payment should be made.

How long will it take for a decision to be made?

The Insurer will aim to make a decision within six months from when we receive your MAS. It may take longer if:

- your injury or illness happened several years ago,
- your treatment is ongoing, or
- you've returned to work in some capacity.

Your claims consultant will provide you with progress updates at least every 20 business days. You can also contact them anytime you have questions.



We're here to help

Visit australiansuper.com

Email claims@australiansuper.com

Call **1300 667 387** (8.30am to 5pm AEST/AEDT weekdays)



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