

# 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 payment 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 in to your account or mobile app 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, or you don't have online access, please call us on **1300 667 387** and we can check for you. If you don't have TPD cover but have been assessed as unable to ever return to work, you can still apply for the early release of your super account balance through Permanent Incapacity.

## Is your illness or injury covered?

All illness and injury types are considered unless an exclusion has been applied to your cover, or you have limited cover. Eligibility to claim a TPD benefit payment is determined by the Insurer<sup>1</sup>. 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're ready to lodge your claim, you'll need to have:

- details of your medical condition and treating doctors,
- details of your last employer, including date last worked and occupational history,
- details of any other claims, such as Workers Compensation or other insurance policies,
- any medical reports or information at hand ready to upload to your claim, and
- identification, such as Drivers License, Passport or Medicare card to validate your identity online.

This information will help us determine your date of disablement.

Your date of disablement is the date your illness or injury, as certified by your doctor, causes you to cease to work. Or, if you're not working, the date you're unable to perform your usual occupation. If you've never worked, it's the date the doctor certifies you're unable to perform your usual unpaid domestic duties on a full-time basis.

We use this date to confirm the amount of cover you had, and which insurance policy is relevant.



<sup>1</sup> 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
<b>1. Claim</b>	<p>Make a TPD claim in two ways:</p> <ol style="list-style-type: none"> <li>1. Online through your account online or the mobile app. Log in to your account online, go to <i>Insurance</i>, then <i>Manage insurance</i>, and select <i>Make a claim</i>. In the app, go to <i>Insurance</i>, and select <i>Make a claim</i>.</li> <li>2. Tele-lodgement: Call us on <b>1300 667 387</b> from 8.30am to 5pm AEST/AEDT weekdays and our claims consultant will submit a claim for you. There are times when online or tele-lodgement aren't available for your claim. If this applies to you, we'll discuss this with you when you call us.</li> </ol>
<b>2. Documents</b>	<p>Once you've made a claim either online or through tele-lodgement, we'll let you know what documents are required.</p> <p>There may be forms you need to take to your doctor and you'll need to pay any fees associated with this step.</p> <p>You'll also have the option to submit existing medical information as part of your claim.</p>
<b>3. Review</b>	<p>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.</p>
<b>4. Track</b>	<p>You can track the status of your claim anytime through the app or your account online. Simply go to <i>Insurance</i>, <i>Manage insurance</i>, then go to the Actions list at the top right and select <i>Manage insurance</i>, then <i>Track your claim</i>. In the app, go to <i>Insurance</i>, <i>Manage insurance</i> and select <i>Track your claim</i>. You can also submit supporting documents and add and view payment details.</p>
<b>5. Decision</b>	<p>Once the Insurer makes a decision on your claim, they'll let you know in writing and confirm the insured benefit payable.</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 the outcome of our review and provide a reason for the decision.</p>
<b>6. Payment</b>	<p>If your claim is approved, your insured benefit will be paid into your super account and form part of your overall account balance. A dedicated claims consultant 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"> <li>• the amount of cover the Insurer has determined is payable based on the policy.</li> </ul> <p>You can access:</p> <ul style="list-style-type: none"> <li>• your super account balance.</li> </ul> <p>You won't be able to withdraw from your account until we confirm you meet a condition of release. We may require two completed certificates of release<sup>2</sup> from you. We'll let you know if these are required.</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 advice<sup>3</sup>.</p>

<sup>2</sup> 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.

<sup>3</sup> Personal financial product advice is provided under the Australian Financial Services Licence held by a third party and not by AustralianSuper Pty Ltd. Fees may apply.

## Roles and responsibilities

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

Party	Responsibilities
The Insurer	<ul style="list-style-type: none"><li>• Assign a claims consultant to:<ul style="list-style-type: none"><li>– explain the claims process to you and guide you through your claim,</li><li>– respond to any queries you may have,</li><li>– keep you updated on the progress of your claim</li><li>– keep you updated on the progress of your claim</li><li>– request any additional information from you if applicable and decide whether your claim meets the policy definitions.</li></ul></li></ul>
You	<ul style="list-style-type: none"><li>• Provide any information requested by your claims consultant.</li><li>• Keep your claims consultant updated of any changes to your personal or medical circumstances, such as a change your contact details, medical treatment or if you return to work.</li></ul>
Us	<ul style="list-style-type: none"><li>• Oversee the claims process.</li><li>• Oversee the conduct of the Insurer and other service providers.</li><li>• Complete an independent review when the Insurer doesn't believe a payment should be made.</li></ul>

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

The Insurer will aim to make a decision within six months from when they receive sufficient medical information to assess your claim. 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 and you can contact them anytime if you have questions. You can also track the progress of your claim at anytime by logging in to your account online or the app and selecting *Insurance*.



### We're here to help

Visit [australiansuper.com](https://australiansuper.com) Email [claims@australiansuper.com](mailto:claims@australiansuper.com)  
Call **1300 667 387** (8.30am to 5pm AEST/AEDT weekdays)



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