

Applying for a Total & Permanent Disablement payment

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

This fact sheet will help explain:

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

What's TPD

TPD cover can pay you a lump sum 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 and go to *My insurance* 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. To receive a TPD payment you must meet the insurance policy terms and conditions, including some specific 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 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. Case manager	You'll be assigned a case manager to help you through the process. They'll ask you some initial questions and look after your application from start to finish.
3. Documents	Your case manager will send you some forms to complete. They'll work with you to make sure we receive all of the information required to process your application including: <ul style="list-style-type: none"> › a Medical Attendant's Statement (MAS), and › two certificates of release that need to be completed by two different doctors so that your super can be paid to you before retirement. You'll need to arrange for a doctor to complete the MAS and one of the certificates of release. A different doctor will need to complete the other certificate. You'll need to pay any fees associated with this step. <p>The insurer can't start reviewing your application for payment until they receive your MAS. You can send your completed certificates of release to us separately at a later date.</p>
4. Review	The insurer will review your application and if they need more information, we'll let you know. Sometimes the insurer will request a specific medical report, but they'll pay for any fees associated with this step.
5. Decision	If your application for payments is approved, we'll let you know in writing and confirm the amount payable. If your application isn't approved, we'll complete an independent review of the insurer's decision. We'll write to you with the outcome of our review, explaining the reason for the decision.
6. Payment	If your application is approved, the insurer will make the payment into your super account. You won't be able to withdraw your 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.

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 information requested by your case manager.› Keep your case manager 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.
Your case manager	<ul style="list-style-type: none">› Explain the application process to you and guide you through your claim.› Respond to any queries you might have.› Keep you updated on the progress of your claim.
The insurer	<ul style="list-style-type: none">› Review your documentation and see if more information is needed.› 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 claim 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 try to make a decision as quickly as possible but, at a minimum, they'll 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 case manager will provide you with progress updates at least every 20 business days. You can also contact them anytime you have questions.

How much will you be paid and when?

If your application is approved and you've met the conditions of release, you'll be paid:

- › the amount of cover the insurer has determined is payable based on the insurance policy, and
- › your super account balance.

The insurer will make payment to your super account and from there we'll contact you to confirm your payment preference.

It's possible your TPD payment may result in financial or tax implications so you may also want to consider getting independent advice.

Contact us

Call **1300 667 387**
(8.30am to 5.00pm AEST/AEDT weekdays)

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