

Suncorp Life Protect

Policy Document

This product and policy document is issued by Asteron Life & Superannuation Limited ABN 87 073 979 530, AFSL 229880 (Asteron). Asteron is part of the TAL Dai-ichi Life Australia Pty Limited ABN 97 150 070 483 group of companies (TAL). Asteron is authorised to use the Suncorp brand.

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1 Important information

When reading this *policy document*, please refer to Section 8, the Glossary, which shows the meaning of various terms *italicised* throughout.

For details on How to contact us, please refer to Section 7.

This *policy document*, together with the *schedule*, constitutes *your insurance policy* and is evidence of *your insurance with us*. You should read this document in conjunction with the *schedule* because together they contain important information relating to *your policy*. Please keep this *policy document* and *schedule* in a safe place. We have issued this *policy* to you based on the information provided by you, to us on your application for insurance.

This *policy document* and *your schedule* are issued by Asteron Life & Superannuation Limited ABN 87 073 979 530, AFSL 229 880 (*Asteron*). AAI Limited ABN 48 005 297 807 a Suncorp Group company, trading as Suncorp, is not responsible for this *policy document*. Asteron takes full responsibility for the whole of this *policy document*.

Asteron is related to TAL Life Limited ABN 70 050 109 450, AFSL 237848 (*TAL Life*) and to the distributor TAL Direct Pty Limited ABN 39 084 666 017, AFSL 243260 (*TAL Direct*). *Asteron*, *TAL Life* and *TAL Direct* are part of the *TAL Dai-ichi Life Australia Pty Limited* ABN 97 150 070 483 group of companies (*TAL*).

Suncorp Life Protect is not a savings plan. The primary purpose is to provide a *benefit* under the terms and conditions of the *policy* in the event of a claimable event.

You are the sole *policy owner* and *insured person* listed on the *schedule*. You are covered for the insured events under *your policy* 24 hours a day, 365 days a year. If *premiums* payable under this *policy* are paid (please refer to Section 5 Your premium), *your policy* will continue until *your 99th birthday*, unless *your policy* stops earlier (please refer to Section 3 When does cover start and stop?).

From time to time we may also make improvements to *your policy* with no resulting increase to *your premium*. If we make a change to *your policy* which, in *your opinion* was adverse to you, we will, if you make a claim, assess *your claim* on the terms of the *policy* in existence before the change took place.



2 Cooling off period

You have 30 days from the *policy commencement date* to check that this insurance meets *your* needs. This is the cooling off period.

If *you* wish, *you* can cancel *your policy* during this cooling off period by notifying *us* in writing or verbally. If *you* notify *us* verbally, *you* will need to answer certain questions to confirm *your* identity. Provided *you* have not made a claim, *you* will receive a refund in full of money *you* have paid.

3 When does cover start and stop?

Your policy will start on the *policy commencement date* shown on *your schedule*, subject to *us* having received correct payment details.

Your cover will stop on *your* 99th birthday. Cover will also stop under this *policy* on the earlier of the following events:

- *you* ask *us* to cancel *your policy*;
- the date *your policy* is cancelled due to non-payment of outstanding *premiums*;
- the date the Terminal Illness is paid; or
- the date *you* die.

We will not consider any claim, unless the event giving rise to the claim occurred while *your policy* was still in force. We may also cancel this *policy* on any grounds permitted under relevant law by telling *you* in writing.

4 Benefits under this policy

This section outlines the benefits payable under *your* Suncorp Life Protect *policy*. *You* are entitled to all the benefits under Suncorp Life Protect.

Payment of a benefit is subject to *our* acceptance of *your* claim (please refer to Section 6 Claims). The most *we* will pay under this Suncorp Life Protect *policy* is the *sum insured*. The maximum amount *we* will pay across all yearly renewable term life insurance policies issued by *us* since May 2010 for the same *insured person* is \$1,000,000 (plus indexation – please refer to Section 4.7 Automatic Indexation Benefit).



No *benefit* will be paid under this *policy* if the event giving rise to the claim is, directly or indirectly, as a result of an intentional self-inflicted act within 13 months of the *policy commencement date*. Please note that if we accept an increase to *your sum insured*, the 13 month intentional self-inflicted act exclusion will apply for the increased portion only.

4.1 Death Benefit

If *you* die during the life of *your policy*, we will pay the *sum insured* as a lump sum to *your nominated beneficiaries* (if applicable), otherwise to *your estate*.

We must receive notice of any claim for payment of a Death Benefit as soon as reasonably possible.

The Death Benefit stops on *your* 99th birthday, unless cover stops earlier (please refer to Section 3 When does cover start and stop?).

4.2 Terminal Illness Benefit

If *you* are diagnosed with a *terminal illness* by a *registered doctor* during the life of *your policy*, we will advance *your full Death Benefit*.

We must receive notice of any claim for payment of a Terminal Illness Benefit as soon as reasonably possible after *you* have been diagnosed with a *terminal illness*.

The Terminal Illness Benefit stops on *your* 99th birthday, unless cover stops earlier (please refer to Section 3 When does cover start and stop?).

4.3 Funeral Advancement Benefit

If *you* die during the life of this *policy*, we will advance \$10,000 of the Death Benefit to *your primary nominated beneficiary* (if applicable), otherwise *your estate*. This payment will usually be made within 24 hours of receiving the necessary claim requirements (please refer to Section 6 Claims).

The Funeral Advancement Benefit is an advance on *your* Death Benefit and will therefore reduce the proportion of *your* final Death Benefit payable to *your primary nominated beneficiary* by \$10,000. The payment of this Benefit is not

an admission of any liability to pay the balance of the Death Benefit.

The Funeral Advancement Benefit stops on *your* 99th birthday, unless cover stops earlier (please refer to Section 3 When does cover start and stop?).

4.4 Suncorp Premium Protector Benefit

If *you* are *disabled* and unable to work for at least 90 consecutive days due to *sickness* or *injury*, we will pay the cost of *your personal insurance policies* (held in *your* name and/or in *your partner's* name) with Suncorp for the following 12 months, up to a maximum of \$2,000 over the life of *your* Suncorp Life Protect *policy*.

The Suncorp Premium Protector Benefit will not be paid if *your disability* relates to a *sickness* or *injury* which *you* sought or which would cause a reasonable and prudent person to have sought advice or treatment for prior to the *policy commencement date* or the date we confirm reinstatement.

The Suncorp Premium Protector Benefit stops on *your* 99th birthday, unless cover stops earlier (please refer to Section 3 When does cover start and stop?).

4.5 Lifestyle Increase Benefit

You can increase *your sum insured* each year by \$100,000, without having to provide any medical information if *you* are under the age of 60 and *you*:

- get married;
- or *your partner* give birth to or adopt a child;
- have a child starting high school for the first time;
- purchase a home; or
- suffer the death of *your partner*.

You can also increase *your sum insured* under this benefit on *your second policy anniversary*.

To apply for this benefit, simply contact *us* for a Lifestyle Increase Benefit Application Form or download the form from www.suncorp.com.au/lifeprotect.

Subject to the maximum *sum insured* limits explained in Section 4, Benefits under this policy, *you* can increase *your sum insured* using this benefit up to the value of *your* original

sum insured. For example, if *your original sum insured* was \$400,000, *you can increase your sum insured* by a further \$400,000.

Increases to *your sum insured* using this benefit must occur within 30 days of *your policy anniversary* following the event and they will be offered on the same terms as *your original insurance with us*. Only one increase can occur each *policy anniversary*. The intentional self-inflicted act exclusion will apply from the date we accept *your increase* for the increased portion only (please refer to Section 4 Benefits under this policy).

Once we accept *your application*, we will confirm *your increased sum insured* and we will advise *you of your new premium*.

This Lifestyle Increase Benefit stops on *your 60th birthday*, unless cover stops earlier (please refer to Section 3 When does cover start and stop?).

4.6 Premium Pause Benefit

If *you are unable to pay your premiums*, *you can contact us* and request *your premium* to be paused for up to 3 months over the life of the *policy*. To activate the Premium Pause Benefit, *you must have paid premiums* for the previous 12 consecutive months and *your policy* must have no outstanding *premium payable* at the time of *your request*.

During the period *your premiums* are paused, *your policy* will only cover *you* in the event *you die* as a result of an *accident*.

After the *premium pause* has ended and *you have started paying your premiums*, *you will be eligible for all the benefits under your policy* subject to their terms.

The Premium Pause Benefit stops on *your 99th birthday*, unless cover stops earlier (please refer to Section 3 When does cover start and stop?).

4.7 Automatic Indexation Benefit

We will automatically increase *your sum insured* on each *policy anniversary* by the greater of the *indexation factor* or 5%. We will recalculate *your premium* each year to reflect the increase in the *sum insured* in line with the *indexation factor* (and the *insured person's age*) and we will advise *you of your new premium* prior to *your policy anniversary* each year.

You can ask us not to apply the *indexation factor* to your *sum insured*. If you request that, your *sum insured* will not change.

The Automatic Indexation Benefit stops on your 99th birthday, unless cover stops earlier (please refer to Section 3 When does cover start and stop?).

4.8 Premium Freeze Benefit

You can ask us not to increase the cost of your *premium*, in which case, your future *premiums* will remain the same as the amount you froze them at resulting in your *sum insured* decreasing as you get older. We will advise you of your reduced *sum insured* prior to each *policy anniversary*. The Automatic Indexation Benefit will not apply while your *premiums* are frozen. You can ask us to end the premium freeze at any time by contacting us.

The Premium Freeze Benefit stops on your 99th birthday, unless cover stops earlier (please refer to Section 3 When does cover start and stop?).

4.9 10% Cash Back Benefit

If you have held this *policy* and paid continuously for 3 years, we will refund 10% of the *premiums* you have paid during the previous 3 years. If you continue to hold the *policy*, we will do this every 3 years after your *policy commencement date*, for example on your 3rd, 6th, 9th etc *policy anniversary*.

For example, if you have paid us \$1,500 in *premiums* in the first 3 years since your *policy commencement date*, we will refund to you \$150. If you pay \$1,800 in the next 3 years, we will refund to you \$180 after the 6th anniversary of your *policy commencement date*.

5 Your premium

Your *premium* pays for your cover, Government fees and charges and administration costs.

The *premium* you pay is determined by multiplying your *sum insured* by the applicable *premium rate*. Your *premium rate* is based on the following factors: your age, gender, smoking status and health. Discounts may also be applied. The *premium* stated in the *schedule* applies during the first 12 months after your *policy commencement date*.

Your premium rate is guaranteed not to change for 12 months from your policy commencement date. After this period, your premium will generally increase each year with age and increases in the sum insured for example, as a result of the Automatic Indexation Benefit (explained in Section 4.7). We will send you a notice prior to each policy anniversary confirming your premium. We can also change the premium rate for all policies of the same kind at any time. In the event we apply an increase to policies of the same kind, we will provide you with at least 30 days notice and you will be charged the new premium from your next policy anniversary.

Premiums received are paid into our No. 1 statutory fund. A policy issued in relation to Suncorp Life Protect is not eligible to participate in any surplus arising in our statutory funds.

5.1 Paying your premium

Your premiums are payable from the bank account or credit card you nominate. Your premium and the frequency (fortnightly, monthly or annually) you have chosen to pay your premium is detailed on your schedule.

You have up to 14 days (or 30 days if you pay monthly) from the date each premium is due to pay your premiums. This period is called the days of grace. If you are entitled to claim within the days of grace, we will pay the benefit if otherwise payable on the terms explained in this policy document, less the amount of any unpaid premium.

If your premium remains unpaid during the days of grace, we will send a notice to you specifying the date we will cancel the policy without any refund of premium. If the premium remains unpaid, we will also provide written notice of cancellation to you at the address last advised to us. We will not be liable for any claims after the date of cancellation.

If we cancel your policy due to non-payment of premiums, you can complete a Policy Alteration form and return it to us for consideration within 12 months of the policy's cancellation date. In order for us to process your Application for Reinstatement, we can ask for information relating to (but not limited to) your health and all outstanding premiums must be paid by you. If we accept your reinstatement, a 13-month intentional self-inflicted act exclusion will apply from the date of Reinstatement.

6 Claims

If entitled to make a claim, *you, your nominated beneficiary or legal personal representative* can contact *us* on 1800 604 689 and *we* will then send a claim pack that needs to be completed to *our* satisfaction and returned to *us*.

If *you* have made a valid nomination, which *we* will confirm with *you* in writing, *we* will pay any benefit payable as a consequence of *your* death in accordance with *your* nomination, subject to any relevant terms and conditions which may apply as explained on *your* Nomination of Beneficiaries form.

We may ask for information *we* might reasonably need and obtain medical and other records to ensure that the terms and conditions of the *policy* as set out in this *policy document* are satisfied.

To make a claim under the Suncorp Premium Protector Benefit, *you* are required to notify *us* as soon as reasonably possible after the date of *your disability*. The following information will be required:

- claim form completed by *you* and *your registered doctor*; and
- certified proof of identity (birth certificate, drivers licence or passport).

To make a claim under the Terminal Illness Benefit, *you* are required to notify *us* as soon as reasonably possible after the date *you* are diagnosed with a *terminal illness*. The following information will be required:

- claim form completed by *you* and *your* specialist practitioner who is also a *registered doctor*; and
- certified proof of identity (birth certificate, drivers licence or passport).

To make a claim under the Funeral Advancement Benefit, *your legal personal representative or primary nominated beneficiary* is required to notify *us* as soon as reasonably possible after the date of *your* death. The following information will be required:

- claim form completed by *your primary nominated beneficiary or legal personal representative*;
- certified copy of the death certificate or other evidence satisfactory to *us*; and



- certified proof of identity (birth certificate, drivers licence or passport).

To make a claim under the Death Benefit, *your legal personal representative or nominated beneficiary* are required to notify *us* as soon as reasonably possible after the date of *your* death. The following information will be required:

- claim form completed by *your legal personal representative or nominated beneficiaries*;
- certified copy of the death certificate or other evidence satisfactory to *us*;
- certified copy of *your* Will to confirm the executor of the estate;
- certified proof of identity (birth certificate, drivers licence or passport); and
- if *you* did not make a valid beneficiary nomination a certified copy of Probate or Letters of Administration (whichever is applicable).

Payment of benefits under this *policy* will be subject to relevant legislative requirements being adhered to and depending upon individual circumstances, additional information may be required by *us*.

You or your legal personal representative will be required to pay for the cost of satisfying these claim requirements, unless *we* notify *you* otherwise.

To assess *your* claim promptly, *we* need to ensure the information provided to *us* at the time of application is correct, for example *your* age and smoking status. If *we* have received any false information, *we* may refuse the claim, avoid the *policy*, adjust the *premiums* paid by *you* or the benefit payable by *us*.

We may refuse the claim if *we* are disadvantaged by any delay in notifying *us* of a claim.

All payments are made as a lump sum in Australian currency.

We will not consider any claim, unless the event giving rise to the claim occurred while *your policy* was still in force.

7 How to contact us

7.1 Administration queries and changes

If *you* would like to make any changes to *your policy*, including a change to *your* address or to *your* payment type, please contact *us* (please refer to the back page for contact details).

You can apply to increase or decrease *your sum insured* on an existing *policy* by contacting *us*.

During the life of this *policy*, *you* cannot assign ownership of this *policy* to any other person or party.

If *you* wish to apply for an increase to *your* existing *sum insured*, the maximum *sum insured* limits will apply (please refer to Section 4 Benefits under this *policy*) and the 13-month intentional self-inflicted act exclusion will apply from the date *we* accept the increase for the increased amount only. *You* will receive an updated endorsement schedule showing *your* updated *policy* information.

7.2 Complaints

If *you* have a complaint about this product or *our* services, we have established a complaints resolution process and are committed to working with *you* to resolve your concerns. You can call us on 1800 604 689 or contact the Customer Relations team at lifecustomerrelations@suncorp.com.au.

If an issue has not been resolved to *your* satisfaction, *you* can lodge a complaint with the Australian Financial Complaints Authority (AFCA). AFCA provides fair and independent financial services complaint resolution that is free to consumers.

You can contact AFCA via the following:

- Website: www.afca.org.au
- Email: info@afca.org.au
- Telephone: 1800 931 678 (free call)
- In writing to: Australian Financial Complaints Authority,
GPO Box 3,
Melbourne VIC 3001.

8 Glossary

Where any of the below words appear in this *policy document italicised*, whether the first letter is in upper or lower case, their meanings are listed below.

Where applicable, with respect to the definitions, singular includes the plural and vice versa.

accident: means an event which solely and directly causes *injury* as a result of violent, external and visible means.

Asteron, we, us and our: means Asteron Life & Superannuation Limited, ABN 87 073 979 530 AFSL 229880.

disabled: means as a result of *sickness or injury*, you are unable to perform each and every duty of *your* occupation that *you* were engaged in, and in relation to which *you* were receiving income, immediately prior to *your disability*.

If *you* were a fulltime home-maker immediately prior to *your disability*, *disabled* will mean as a result of a *sickness or injury*, *you* are unable to engage in *normal domestic duties*.

expiry date: means the date *your policy* ends as stated on the *schedule*.

immediate family members: means *your partner*, parents, siblings or children.

indexation factor: means the percentage change in the consumer price index (CPI) which is the weighted average of the 8 Australian capital cities combined as published by the Australian Bureau of Statistics or any body which succeeds it and in respect of the 12 month period finishing on 30 September. The *indexation factor* will be applied from 1 March the following year. If the *CPI* is not published by this date, the *indexation factor* will be calculated upon a retail price index which we consider most nearly replaces it.

injury: means physical damage to *your* body which occurs as a result of violent, external and visible means while this *policy* is active.

insured person: means the person who has been accepted by *us* and listed on the *schedule* as the *insured person* under this *policy*.



legal personal representative: means the executor or administrator of *your* estate, or any other person(s) who is authorised by law to administer and distribute *your* estate.

nominated beneficiary/ies: means the person(s) *you* nominate using the Nomination of Beneficiaries form to receive the Death and Funeral Advancement Benefits under this *policy*.

normal domestic duties: means the domestic duties normally performed by a person who remains at home and is not working in regular employment for income, including cleaning the home, doing the washing, shopping for food, cooking meals and, if applicable, looking after children.

partner: means a person living with *you* as *your* spouse on a domestic basis in good faith. He or she can be the same sex as *you*.

personal insurance policies: means for the purposes of this *policy* only, policies branded by Suncorp that are not business related, but include home, contents, motor vehicle insurance and this *policy*.

policy: means *your* Suncorp Life Protect insurance, which consists of this *policy document*, the *schedule* and information provided in *your* application.

policy anniversary: means the anniversary of the *policy commencement date*.

policy commencement date: means the date *we* accept *your* application for cover or application for reinstatement as shown on the *schedule*.

policy owner: means the person listed on the *schedule* as the owner of this *policy*.

premium: means the amount *you* pay *us* for the insurance.

primary nominated beneficiary: means the person *you* list first on *your* Nomination of Beneficiaries form.

registered doctor: means a doctor who is legally qualified and a properly registered medical specialist. The doctor cannot be *yourself* or a member of *your* family. If practising outside Australia, the doctor must have qualifications equivalent to Australian Standards.

schedule: means a document issued by *us* which shows important information about *your policy*, including *your policy number, premiums, sum insured, special conditions (if applicable) and policy commencement date.*

sickness: means an illness or disease *you* suffer while cover for the applicable benefit was in force under this *policy.*

sum insured: means the amount *you* apply for and *we* accept as varied (for example if *you* apply for a decrease or through increases under the Automatic Indexation Benefit) by agreement.

terminal illness: means a *sickness* which *you* have been diagnosed with, that in *our* opinion, having considered any evidence *we* may require, means that *your* life expectancy is not greater than 12 months, regardless of any available treatment.

you and **your:** means the *policy owner* who is also the *insured person* who has been accepted by *us* and is shown on the *schedule.*

Contact us



Call
1800 604 689



Online
suncorp.com.au/lifeprotect



Local store



Write to
Suncorp Life Customer Service
GPO Box 3950 Sydney NSW 2001



suncorplife@suncorp.com.au



1300 552 345