Insurance and your super

GESB Super and West State Super
Important note

The information in this document forms part of the Product Information Booklets for GESB Super and West State Super, each dated 1 October 2019. You should read the important information in this document, including our insurance options and the benefits available to GESB Super and West State Super members, as part of the relevant Product Information Booklet before making a decision. This document was prepared on 30 September 2019.

Insurance benefits are provided by the Insurer1 in accordance with a ‘Group life policy’ and a ‘Group supplementary income protection policy’ made between us and the Insurer. The information in this booklet is only an overview of the main terms and conditions of the insurance policies. The insurance policies will supersede the information in the Product Information Booklets, and in this document.

For full terms and conditions, please contact us for a copy of the insurance policies. We reserve the right to replace the Insurer and to alter the terms and conditions of the insurance policies, including the scope of cover, eligibility criteria, exclusions, limitations and premiums. If you have any questions about insurance, or would like a copy of the insurance policies, contact your Member Services Centre on 13 43 72.

This document contains information about the insured benefits that GESB Super and West State Super members may be entitled to. The information contained in this brochure is of a general nature, and does not constitute legal, taxation or personal financial advice. In providing this information, we have not taken into account your investment objectives, financial situation or needs. We are not licensed to provide financial product advice. Before acting or relying on any of the information in this brochure, you should read this document in conjunction with the relevant Product Information Booklet and disclosure documents at gesb.wa.gov.au/brochures, and consider whether the information is appropriate for you. You may also wish to consult a suitably qualified adviser to assist you.

1 The Insurer is AIA Australia Limited (ABN 79 004 837 861 AFS Licence No. 230043) and is hereafter referred to as ‘the Insurer’ or ‘AIA Australia’.

Having insurance cover is one of the best ways you can protect yourself and your loved ones if something unfortunate was to happen to you.

References to ‘GESB’, ‘us’, ‘we’ and ‘our’ in this document refer to the: Government Employees Superannuation Board ABN 43 418 292 917

Note: Italicised terms are defined in the glossary.

1 This icon will guide you to more information, which you may find useful, within this document
2 This icon refers to other information, which you may find useful when reading this document. It is important that you read and consider all the information relating to ‘Insurance and your super’ before making any decisions about the product.
Insurance and your super: a summary

Life is full of unexpected surprises, and not always for the better. If something happened to you such as an accident, serious illness, death or disability – or you were unable to work for a period of time – would you be able to maintain yours and your family’s lifestyle and cope with your financial obligations?

It makes sense to have death and disability insurance within your super. Being a member of either GESB Super or West State Super gives you automatic access to three types of insurance cover that can be tailored to your individual needs. As a not-for-profit member-focused organisation, we offer ‘value for money’ products and services. Our fees are below the industry median\(^2\). We offer the following types of insurance:

<table>
<thead>
<tr>
<th>Type of insurance</th>
<th>Insurance benefit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Death cover</td>
<td>Provides a one-off lump-sum payment in the event of your death (and includes a terminal illness benefit(^3))</td>
</tr>
<tr>
<td>Total and Permanent Disability (TPD) cover</td>
<td>Provides a one-off lump-sum payment if you are totally and permanently disabled and cannot work due to that condition</td>
</tr>
<tr>
<td>Salary Continuance Insurance (SCI) cover</td>
<td>Provides a monthly income of up to 75% of your pre-disability income for up to two years(^4) if you become disabled due to sickness or injury. You may also be entitled to a Superannuation Top-Up Benefit</td>
</tr>
</tbody>
</table>

**Eligibility for cover**

You are automatically eligible for the three types of insurance if you are under age 65 when you join GESB Super, or if you are already a West State Super member: Death (including terminal illness) cover, Total and Permanent Disablement (TPD) cover, and Salary Continuance Insurance cover.

If you are aged 65 or over when you join GESB Super or West State Super, you will only be eligible for Death cover. Total and Permanent Disablement and Salary Continuance Insurance cover are not available to members aged 65 or over. Death cover is not available to members aged 70 or over.

Further eligibility conditions apply (which differ for Casual Employees).

\(^3\) See the ‘Insurance options for Casual Employees’ section on page 6 for more information.

**For all members**

The trigger for assessing your eligibility is when we receive your first Superannuation Guarantee (SG) contribution from your employer. Generally speaking, to be eligible for automatic cover you must be employed by a Participating Employer; receiving SG contributions from your employer and be aged less than 65. If you are eligible for insurance cover, and you have not elected to opt out or previously cancelled cover, you will be entitled to a default level of cover called basic cover.

From 1 October 2019, you will not be eligible for basic Death cover, basic Death and TPD cover or basic SCI cover if you have previously received or were eligible to receive a TPD benefit or a Terminal Illness Benefit from the Insurer as part of any GESB Super or West State Super account.

If you are not eligible for basic cover, or if you would like to apply for a higher level of cover, you may also be able to apply for Voluntary Cover. This allows you to increase your level of insurance cover to suit your own circumstances.

Your entitlement to cover is determined using the information that you or your employer have provided to us, such as age and employment type. Premiums are also calculated based on your occupation and gender.

Occupations are categorised for insurance purposes and you are required to notify us if your occupation category changes in the future or is incorrect.

\(^4\) See table 3 on page 12 for information on occupation categories.

**For West State Super members**

The insurance offering for West State Super members changed on 1 July 2008. West State Super members who met the insurance eligibility criteria on 30 June 2008 were automatically covered under the new Death and Total & Permanent Disablement (TPD) and Salary Continuance Insurance (SCI) cover underwritten by the Insurer. As a West State Super member, your level of Death and TPD benefit may be adjusted if you are a ‘covered risk benefits Member’ (as defined in the State Superannuation Regulations 2001 [WA]), and are an eligible statutory West State Super member, are under age 60 and have not opted-out of your Death or TPD cover payable by the Insurer. There will be a top up paid by us if your entitlement under the State Superannuation legislation exceeds the amount payable by the Insurer.

**How can I check my entitlement?**

Your insurance details are available in:

- Member Online – login or register at mol.gesb.wa.gov.au
- Your member statement
- The letter we send you after you become a new GESB member

It’s important to keep us informed of any change to your personal details, particularly when you change jobs, as this may affect your insurance cover and premiums.

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2 SuperRatings Smart database as at 31 March 2019.
3 Death cover also entitles you to claim for a terminal illness benefit. If two Registered Medical Practitioners have certified in writing on or after 1 July 2016 that you are terminally ill and have less than 24 months to live, regardless of any treatment undertaken, you may be able to claim your full Death benefit as a one-off lump-sum payment. The claims process includes providing two medical statements. For more information, see ‘Understanding the insurance claims process’ at gesb.wa.gov.au/brochures.
4 See ‘When your monthly benefit will cease’ on page 19.
**Levels of insurance cover**

For most members, Death cover, TPD cover and SCI cover are provided as:

1. **Basic cover** – the default level of cover provided to eligible members. The default amount of cover is explained in the table below.
2. **Voluntary Cover** – cover requiring additional underwriting by the Insurer and allowing you to increase your level of insurance cover above basic cover to suit your circumstances (subject to meeting eligibility criteria and approval by the insurer).

**An overview of automatic basic cover for Death, TPD insurance and SCI for eligible members**

<table>
<thead>
<tr>
<th>Death and Total &amp; Permanent Disablement</th>
<th>Salary Continuance Insurance</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Who is eligible?</strong></td>
<td></td>
</tr>
<tr>
<td>Members receiving SG contributions and aged less than 65. Eligibility conditions differ for Casual Employees.</td>
<td></td>
</tr>
<tr>
<td><strong>Basic cover is provided automatically when we receive your first SG contribution</strong></td>
<td></td>
</tr>
<tr>
<td>Basic cover of up to $200,000, depending on your age</td>
<td>Up to $4,200 per month determined by the number of hours per week that you work</td>
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<tr>
<td><strong>Changing your cover</strong></td>
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<tr>
<td>You can apply to:</td>
<td></td>
</tr>
<tr>
<td>• Increase or decrease</td>
<td></td>
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<tr>
<td>• Opt out</td>
<td></td>
</tr>
<tr>
<td>• Fix the amount of cover</td>
<td></td>
</tr>
<tr>
<td><strong>Maximum insurance cover</strong></td>
<td></td>
</tr>
<tr>
<td>$10 million for Death</td>
<td></td>
</tr>
<tr>
<td>$3 million for TPD</td>
<td>The lesser of 85% of your income (calculated as 75% income plus up to 10% as a superannuation benefit) and $30,000 per month for up to two years(^5). If your occupation is classified as being in the Hazardous category, your cover will be limited to the lesser of $10,000 per month(^6) and 85% of your income (75% income plus up to 10% as a superannuation benefit) and cover above basic cover will be 1.5 times the premium rates.</td>
</tr>
<tr>
<td><strong>Premiums based on occupation category</strong></td>
<td>Five categories based on occupation and employment duties:</td>
</tr>
<tr>
<td>• White Collar</td>
<td></td>
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<tr>
<td>• Light Blue Collar</td>
<td></td>
</tr>
<tr>
<td>• Blue and Heavy Blue Collar</td>
<td></td>
</tr>
<tr>
<td>• Hazardous occupations</td>
<td></td>
</tr>
<tr>
<td>• Members who meet salary and other eligibility criteria can apply to join the Professional and Executive occupation category(^7)</td>
<td></td>
</tr>
<tr>
<td><strong>Waiting period</strong></td>
<td>Depending on the type of injury, you need to wait three months before you are eligible to receive a TPD benefit approved by the Insurer. The default waiting period for any benefit payment is 90 days. You can change your waiting period to 30, 60, 120 or 180 days, which will affect the premium you pay - see page 17 for more information.</td>
</tr>
<tr>
<td><strong>Maximum age for cover</strong></td>
<td>• Death cover expires at age 70</td>
</tr>
<tr>
<td>• TPD cover expires at age 65</td>
<td>• SCI cover expires at age 65</td>
</tr>
</tbody>
</table>

- Members employed on a casual basis do not receive cover automatically but may be eligible to opt in for basic cover. For more details, see the ‘Insurance options for Casual Employees’ section on page 6.
- Members not eligible for automatic cover can still apply for insurance by completing an ‘Insurance application’ through Member Online at mol.gesb.wa.gov.au, or by calling your Member Services Centre on 13 43 72 for a copy of our ‘Insurance application’ form. Insurance cover will be on the terms offered by the Insurer.

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5 See ‘When your monthly benefit will cease’ on page 19.
6 The following occupations, defined under the ASCO and/or ANZSCO occupation standards, are also limited to the hazardous restriction on the maximum SCI Amount Insured of $10,000, although the Insurer provides basic cover for Death, TPD and SCI at category 3 – Blue and Heavy Blue Collar. ‘Ambulance Officers and Paramedics’, ‘Blasting workers’, ‘Chemical, Petroleum and Power Generation Plant Operators’, ‘Chemical, Petroleum and Gas Plant Operators’, ‘Drillers’, ‘Drillers, Miners and Shot Firers’, ‘Forestry and Logging Workers’, ‘Guards and Security Officers’, ‘Miners’, ‘Mining Support Workers and Drillers Assistants’, ‘Power Generation Plant Operators’, ‘Seafarers and Fishing Hands’, ‘Timber and Wood Process Workers’ and ‘Travel Attendants’. ‘Mining and Material Engineers’ and ‘Mining Engineers’ are also limited to this hazardous restriction if any part of your role requires you to be in an underground mine at any time.
7 If you are working at least 0.6 FTE (Full-Time Equivalent) and earn an equivalent full-time salary of $100,000 p.a. or more, you meet the minimum salary criteria.
When does basic cover start?
If you are eligible for basic cover, there are two possible dates when your default basic cover will start:

1. The date that you started your employment with the WA public sector, so long as your employer advises us of this date and sends us your first SG contribution within 60 days of your start date.
2. If your employer sends us your first SG contribution more than 60 days after your employment start date, then we will use the date the SG contribution is received as the start date for basic cover.

If you subsequently change from casual to non-casual employment with the same employer, you will retain the same level of cover (which may be nil). In this circumstance, if you want cover or wish to increase any existing cover you have, you will need to apply for voluntary cover.

If you are employed on a casual basis and you opt in for basic cover, your cover starts on the date the application is accepted by the Insurer, provided your opt-in application is made within 90 days of the date your first SG contribution is received by us from your Participating Employer.

Limitations on basic cover
There are some limitations on basic cover that you should be aware of. If you are a Permanent Employee, Contractor or Sessional Employee:

- You must be ‘At Work’ (see definition on page 23) on the day that your cover starts in order to be fully covered for Death, TPD and SCI cover.
- If you were not at Work on the day that your cover started, due to sickness or injury, your insurance will be ‘New Events Cover’ (see page 23), until you are At Work and performing your normal duties and work hours for at least three consecutive months.
- New Events Cover will not cover any medical condition, or any directly or indirectly related conditions, which caused you to not be at Work on the date your cover commenced.
- If we receive the first SG contribution from your employer more than 120 days after you started your employment with them, your Death, TPD and/or SCI cover is subject to Limited Cover (see page 23) for at least 24 consecutive months and until such time as you are At Work for at least one day after the 24-month period.

If you are a Casual Employee and you elect to opt in to SCI cover, then your SCI cover is subject to Limited Cover for at least 24 months from the date your cover commences and until such time as you are At Work for at least one day after the 24-month period.

See the ‘Other things you need to know about Death, TPD and SCI cover’ section on page 23 for more information on Limited Cover, At Work and New Events Cover.

How much does insurance cover cost?
Insurance cover can be cost effective when included as part of your super.

Your insurance premiums will be deducted from your account on a monthly basis. The cost of insurance cover varies according to your age, gender, occupation category, type and amount of cover and, for SCI, the waiting period. If you need to be assessed by the Insurer, the Insurer may also consider other factors (such as your medical situation).

For details on the cost of Death and TPD cover, see page 8. For SCI cover costs, see page 15.

Choosing your insurance options
Generally, it makes sense to have Death and TPD cover and, like us, most super funds offer them as a combined policy. As a GESB Super or West State Super member, you can tailor your Death and TPD insurance to suit your individual needs by either choosing to have different levels of Death and TPD cover (subject to the terms of the Policies) or opting out of either Death or TPD cover.

If you are eligible for basic cover and decide to keep the insurance cover provided to you, then you don’t need to do anything.

You can elect to change your insurance cover at any time subject to the maximum policy limits and meeting the Insurer’s requirements. You can check and make changes to your insurance details in one of two ways:

- Use Member Online at mol.gesb.wa.gov.au
- Call your Member Services Centre on 13 43 72 and ask for a copy of our ‘Insurance variation’ form or ‘Insurance application’ form

For more information see below, or see page 8 for Death and TPD cover and page 15 for SCI cover.

1. Fix your level of cover
You can apply to:

- Fix your Death and TPD cover at the basic cover level for which you are automatically eligible (provided you are aged under 61)
- Vary the level of cover and fix the value of your Death and TPD cover at that amount
- Change your level of Death and TPD cover at any time in the future

If you are a Casual Employee who opts in for cover, then the value of your Death and TPD cover will be fixed automatically. You can elect to change your Amount Insured in the future. Increasing your insurance cover at a later date will be subject to certain criteria which you can see on page 6.

If you fix the level of your Death and TPD cover, your Death and TPD Amount Insured will not change and the insurance premium will generally increase as your age increases. When you turn 61, the amount of TPD cover to which you are entitled will reduce annually on a lineal basis, until it ceases at age 65. For more information, see page 8.

2. Reduce or Opt out of part or all of your insurance cover
You can choose to reduce or opt out of some or all of your insurance cover.

If you wish to reinstate or increase your insurance cover at a later date, it will be subject to certain criteria:

- You must be under the age of 65 (for SCI and TPD cover) or 70 (for Death) to reinstate insurance
- You must provide any evidence requested by the Insurer
- There is no automatic acceptance
• Your insurance cover will only be accepted subject to the satisfactory evaluation of your application by the Insurer.
• Any age based restrictions on the level of cover available.

You will need to complete a full ‘Insurance application’ through Member Online at mol.gesb.wa.gov.au. You can also contact your Member Services Centre on 13 43 72 and ask for a copy of the ‘Insurance application’ form.

You can opt out of part or all of your insurance in one of two ways:
• Use Member Online at mol.gesb.wa.gov.au
• Call your Member Services Centre on 13 43 72 and ask for a copy of the ‘Insurance variation’ form.

We recommend you seek financial advice before making any changes to your cover.

3. Opt in to the Professional and Executive occupation category

To be eligible to opt in to the Professional and Executive occupation category, you must meet the Professional or Executive definitions below.

<table>
<thead>
<tr>
<th>Professional</th>
<th>Executive</th>
</tr>
</thead>
<tbody>
<tr>
<td>You earn a gross income of at least $100,000 p.a.(^8)</td>
<td></td>
</tr>
<tr>
<td>You are working in an office environment and in a sedentary capacity(^9) no less than 80% of the time (excluding travel time from office to office), and</td>
<td></td>
</tr>
<tr>
<td>You hold a tertiary qualification or are a member of a professional institute or body approved by the Insurer(^10)</td>
<td>You are part of the Executive Management team(^11) of your employer</td>
</tr>
</tbody>
</table>

The premiums for the Professional and Executive occupation category will be calculated using a different occupation category factor than you are currently paying.

Occupation category factors are shown in table 3, page 12 for Death and TPD, and table 5, page 19 for SCI.

Once accepted by the Insurer, your Death and TPD cover will be fixed as at the age you applied, and your TPD cover will not start to decrease until you reach age 61 (unless you elect to change it in the future). See table 1 on page 8. Please note that your premiums will generally increase as your age increases.

You must notify us if your occupation category changes in the future.

To find out more or to opt in, visit gesb.wa.gov.au/forms for our ‘Professional and Executive occupation category application’ form or call your Member Services Centre on 13 43 72.

4. Insurance options for Casual Employees

If you started employment as a Casual Employee on or after 1 July 2010, you are not eligible for automatic basic cover but you can opt in for basic cover.

Generally speaking, to be eligible to opt in you must be:
• Employed on a casual basis
• Receiving SG contributions from your employer, and
• Aged 65 or under

You will be eligible for basic cover, without the need for a medical assessment, provided you opt in within 90 days of us receiving the first SG contribution from your employer and you meet the At Work requirement (see definition on page 23).

If you apply for cover after 90 days, or if you apply for a higher level of cover than the basic cover, this will be subject to an assessment by the Insurer of evidence of your health and other particulars that the Insurer may require to determine whether to accept your application and the terms on which it will accept.

\(^8\) If you are working at least 0.6 FTE (Full-Time Equivalent) and earn an equivalent full-time salary of $100,000 p.a. or more, you meet the minimum salary criteria.

\(^9\) The Insurer has provided special approval for the following occupations as meeting the requirement for primarily working in an office environment and sedentary capacity, even though they appear to be non-office based roles: Specialist Medical Practitioners, Generalist Medical Practitioners, Legal Professionals, Solicitors, Dental Practitioners, Legislators, Judicial and Other Legal Professionals, Pharmacists and School Principals (Note, Nurses and School Teachers do not meet the requirement of working in an office environment and sedentary capacity).

\(^10\) The Insurer has approved a set number of professional institutes and bodies. If you do not hold a tertiary qualification or work in an executive management position and are unsure if your professional institute or body qualifies, contact your Member Services Centre on 13 43 72.

\(^11\) You are considered part of the executive management team if you:
• Are the Chief Executive Officer or similar position, or
• Report directly to the Chief Executive Officer, or
• Are employed in the Senior Executive Service, or
• Are a Parliamentarian.
Your insurance cover will only be approved subject to the satisfactory evaluation of your application by the Insurer. Cover starts from the date your application is accepted by the Insurer. Basic SCI cover is subject to Limited Cover as defined under the ‘Other things you need to know about Death, TPD and SCI cover’ section later in this document. Cover that is not basic cover will be subject to any special terms on which the Insurer accepts your application.

If you subsequently change from casual to non-casual employment with the same employer, you will retain the same level of cover (which may be nil). In this circumstance, if you want cover or want to increase any existing cover, you will need to apply for voluntary cover which is subject to approval by the insurer.

**How much basic cover can Casual Employees opt-in for?**

**Death and TPD** - you can opt in for any amount up to the basic cover amount for your age, as shown in table 1, page 8, columns A and B.

**SCI** - you can opt in for any amount up to the basic cover amounts shown below, depending on the number of hours per week that you work.

If you are eligible, you can use the ‘Insurance opt-in for casual employees’ form to opt-in for cover, available at gesb.wa.gov.au/forms.

<table>
<thead>
<tr>
<th>Employment status Full-Time Equivalent (FTE)</th>
<th>Basic level of cover (per month) for SCI</th>
</tr>
</thead>
<tbody>
<tr>
<td>At least 0.4 FTE (at least Minimum FTE)</td>
<td>$2,000</td>
</tr>
<tr>
<td>Less than 0.4 FTE (less than Minimum FTE)</td>
<td>$1,600</td>
</tr>
</tbody>
</table>

**Checklist and next steps**

- **Check your entitlement and details of cover**
  We recommend that you read all the information in this document and make note of the details that are relevant to you.

- **Review your insurance options when your employment circumstances change**
  Whenever you change jobs or receive a substantial increase to your income, you should check that your level of SCI cover is appropriate. This will ensure that you continue to have the correct occupation classification and relevant cover. We strongly recommend you review your insurance situation regularly to avoid paying for insurance that you do not need. For example, you may be paying for insurance within other super funds that you have held while working for other employers outside the public sector. You can make adjustments to your cover through Member Online or by calling your Member Services Centre and asking for an ‘Insurance variation’ or ‘Insurance application’ form.

- **Revisit your insurance needs regularly**
  Some of the key decisions we make in life can lead to a change in your insurance needs. When you marry, have children or buy a house you should review your insurance needs in line with these lifestyle changes. It’s important to ensure you have the right level of cover to support your partner or family, should anything happen to you.

- **Contact your Member Services Centre on 13 43 72 if you have any questions regarding your insurance**
Death and Total & Permanent Disablement insurance

Death and Total & Permanent Disablement (TPD) insurance cover provides you or your estate with a lump-sum benefit if you die, are deemed to be terminally ill or become totally and permanently disabled.

All Death benefits (including terminal illness benefits) and TPD insurance benefits are paid into your super account and can be accessed when a condition of release is satisfied.

Please be aware that although members may satisfy the Insurer’s definition of eligibility for payment of a Death, TPD or SCI benefit, we are unable to pay these amounts to you (or your estate, in the case of a Death benefit) unless and until a ‘condition of release’ is satisfied and we have processed the claim (see page 13). This is because legislative requirements restrict the circumstances in which such benefits can be paid, until the conditions set out in the legislation have been satisfied.

For more information, see the ‘Accessing your super’ brochure at gesb.wa.gov.au/brochures.

Level of cover
Subject to eligibility requirements discussed previously, the level of your automatic basic cover for Death and for TPD insurance is based on your current age.

Table 1: Death and TPD basic cover

<table>
<thead>
<tr>
<th>Your current age</th>
<th>Basic Death cover</th>
<th>Basic TPD cover</th>
</tr>
</thead>
<tbody>
<tr>
<td>15-45</td>
<td>$200,000</td>
<td>$200,000</td>
</tr>
<tr>
<td>46</td>
<td>$190,000</td>
<td>$190,000</td>
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<tr>
<td>47</td>
<td>$180,000</td>
<td>$180,000</td>
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<td>48</td>
<td>$170,000</td>
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<tr>
<td>64</td>
<td>$50,000</td>
<td>$10,000</td>
</tr>
</tbody>
</table>

Changing your level of cover
You can elect to:
- Increase your Death cover and/or TPD cover (including members who are eligible to apply for cover but not eligible for basic cover)
- Decrease your Death cover and/or TPD cover
- Fix the level of Death and TPD cover

Increasing your cover at any time
If you would like to increase your insurance cover, you will need to provide medical and/or other evidence for assessment by the Insurer. This includes members who wish to apply for cover but are not eligible for basic cover.

Your insurance cover will only be approved subject to the satisfactory evaluation of your application by the Insurer. Your cover may also be approved subject to loadings or exclusions. Your application for Voluntary Cover could also be approved subject to loadings or exclusions or declined.

Decreasing your level of cover
You have the option to decrease your level of insurance cover at any time. However, if in the future you would like to reinstate or increase your insurance cover, you can only do so subject to:
- You being under the age of 65 (for SCI and TPD cover) or 70 (for Death)
- Completing a full ‘Insurance application’
- Any age based restrictions on the level of cover available
- Providing any evidence requested by the Insurer

Your insurance cover will only be approved subject to the satisfactory evaluation of your application by the Insurer. Your cover may also be approved subject to loadings or exclusions, or declined.

Fixing your level of cover
If your application for an increase or decrease in Death and/or TPD Cover is accepted by the Insurer, your Amount Insured is fixed at that level, subject to the table on page 9.

If you have basic cover for Death and/or TPD, you can elect to fix the then current Amount Insured at any time prior to your 61st birthday by written request to us – again subject to the table on page 9.
If your cover is fixed, your Amount Insured will work as follows:

<table>
<thead>
<tr>
<th>Death Amount Insured</th>
<th>TPD Amount Insured</th>
</tr>
</thead>
<tbody>
<tr>
<td>Your Death Amount Insured will remain the same on each birthday until cover ceases under the Policy</td>
<td></td>
</tr>
</tbody>
</table>
| 1. From age 15 to 60 (inclusive): your TPD Amount Insured will remain the same on each birthday  
2. From age 61 to 65 (inclusive): your TPD Amount Insured will reduce linearly on each birthday until it is zero at the age of 65 |

If you have not fixed your level of Death/TPD cover, the value of your Death cover and TPD cover will work as follows:

<table>
<thead>
<tr>
<th>Death Amount Insured</th>
<th>TPD Amount Insured</th>
</tr>
</thead>
</table>
| 1. From age 15 to 45 (inclusive): your Death Amount Insured will remain the same on each birthday  
2. From age 46 to 64 (inclusive):  
(a) If your Death Amount Insured is greater than the default level of Death cover for your age according to table 1 ‘Death and TPD basic cover’, your Death Amount Insured will reduce by $10,000 on that birthday, or  
(b) If your Death Amount Insured is equal to or less than the default level of Death cover for your age according to table 1 ‘Death and TPD basic cover’, your Death Amount Insured will remain the same on that birthday  
3. From age 65 to maximum age for cover (inclusive):  
(a) If your Death Amount Insured is greater than $50,000 on your birthday, the Death Amount Insured will reduce by $10,000 on that birthday, or  
(b) If your Death Amount Insured is equal to or less than $50,000 on your birthday, the Death Amount Insured will remain the same on that birthday  
3. From age 61 to Cover Expiry Age (inclusive): your TPD Amount Insured will reduce linearly on each birthday until it is zero at the age of 65. |
| 1. From age 15 to 45 (inclusive): your TPD Amount Insured will remain the same on each birthday  
2. From age 46 to 60 (inclusive):  
(a) If your TPD Amount Insured is greater than the default level of TPD cover for your age according to table 1 ‘Death and TPD basic cover’, your TPD Amount Insured will reduce by $10,000 on that birthday, or  
(b) If your TPD Amount Insured is equal to or less than the default level of TPD cover for your age according to table 1 ‘Death and TPD basic cover’, your TPD Amount Insured will remain the same on that birthday |

If you are under age 61 you can apply to:
- Fix your Death and TPD cover at the level for which you are automatically eligible under basic cover
- Vary the level of cover and fix the value of your Death and TPD cover at that amount

If you are a Casual Employee who opts in for cover, then the value of your Death and TPD cover will be fixed automatically unless you elect to change it again in the future.

If you fix the level of your Death and TPD cover, the insurance premium will generally increase as your age increases.

How do I change my level of cover?

The table on page 10 highlights the tools available to increase, decrease or fix the level of your Death or TPD cover and whether or not approval is required from the Insurer.

What are the waiting periods for TPD?

The waiting period for TPD is generally three months (except where you suffer the total and irrecoverable loss of limbs and/or sight) and starts from the date you are determined by both us and the Insurer as totally and permanently disabled and have ceased working due to that condition.

You are able to make a claim as soon as you meet the medical requirements, but there may be a waiting period before any benefit payment that has been approved by the Insurer is paid into your account.

If you submit a claim relatively early in the waiting period, then the Insurer may ask you to provide more up-to-date medical information at the end of the waiting period to undertake their assessment. All Death and TPD insurance benefits are paid to your super account and can be accessed when a condition of release is satisfied.

For more information, see our ‘Accessing your super’ brochure available at gesb.wa.gov.au/brochures.

Example

John is aged 40 and receives $200,000 of combined Death and TPD cover. If he opts to decrease this cover to $180,000 (which also fixes his cover) then:

- He will receive Death and TPD cover to the value of $180,000 for each year he is under the age of 61 (unless John opts to change the value in the future)
- From age 61, his TPD cover reduces linearly from age 61 at each birthday, to become nil at age 65
- His Death cover will remain fixed at $180,000 until age 70 (unless John opts to change the value in the future)
### Type of change (Death/TPD cover) | How to make the change | Assessment required by the Insurer
--- | --- | ---
**Increasing** your cover  
• In excess of any existing cover  
• If you are a *Casual Employee* who opted in for cover | Apply through Member Online at mol.gesb.wa.gov.au or complete our ‘Insurance application’ form | Yes

**Decreasing** your cover | Apply through Member Online at mol.gesb.wa.gov.au or complete our ‘Insurance variation’ form | No

**Fixing** your cover | Apply through Member Online at mol.gesb.wa.gov.au or complete our ‘Insurance variation’ form | No

For a copy of our ‘Insurance variation’ or ‘Insurance application’ form, call your Member Services Centre on 13 43 72.

### How much does Death and TPD cover cost?

The cost of insurance cover varies according to your age, gender, occupation category, type and amount of cover. If you need to be assessed by the Insurer, the Insurer may also consider other factors.

Occupations are categorised into broad groupings for insurance purposes and are shown in table 3 on page 12. In determining your occupation category, we rely on information provided by you or your employer. You are required to notify us if your occupation details are incorrect or if your occupation category changes in the future.

Your premiums for Death-only cover, TPD-only cover or combined Death and TPD cover are calculated using the equation below and will be deducted from your account each month.

\[
\text{Annual premium} = \text{Level of benefit (per } \$1,000\text{ of cover)} \times \text{Age and gender-based annual premium rate} \times \text{Occupation category factor}^{12}
\]

#### Example

Carly is a dental assistant\(^{13}\) and is 31 years old with $200,000 Death and TPD cover. Her insurance premium for combined Death and TPD cover is calculated as follows:

<table>
<thead>
<tr>
<th>Reference</th>
<th>How many $1,000s of cover</th>
<th>Age and gender-based premium rate</th>
<th>Occupation category factor</th>
<th>Annual premium(^{14})</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Carly’s Death and TPD cover premium based on her current age</strong></td>
<td>$200,000 (/$1,000 = 200)</td>
<td>X $0.62 (\times 1.050)</td>
<td></td>
<td>= $130.20 (\text{or } $10.85 \text{ per month})</td>
</tr>
</tbody>
</table>

| Fill in your details here | $ \(/$1,000 = \) | x $ | x \(\) | = $ |

\(^{12}\) An additional premium loading may also apply depending on your application for extra insurance cover. For example, if you have a pre-existing medical condition.

\(^{13}\) Dental assistants are classified as category 2 – Light blue collar occupation. See table 3 on page 12 for occupation category factors.

\(^{14}\) If you have extra insurance cover subject to a loading, the premium is calculated separately for the cover that is, and the cover that is not, subject to loading. For cover that is subject to a loading, the result needs to be multiplied by the loading.
<table>
<thead>
<tr>
<th>Year</th>
<th>Males</th>
<th>Females</th>
<th>Males</th>
<th>Females</th>
<th>Males</th>
<th>Females</th>
</tr>
</thead>
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<td></td>
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<td>Column E</td>
<td>Column F</td>
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<td>0.04</td>
<td>0.36</td>
<td>0.24</td>
</tr>
<tr>
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<td>0.24</td>
<td>0.08</td>
<td>0.08</td>
<td>0.44</td>
<td>0.32</td>
</tr>
<tr>
<td>17</td>
<td>0.42</td>
<td>0.28</td>
<td>0.16</td>
<td>0.11</td>
<td>0.58</td>
<td>0.39</td>
</tr>
<tr>
<td>18</td>
<td>0.50</td>
<td>0.32</td>
<td>0.16</td>
<td>0.08</td>
<td>0.66</td>
<td>0.40</td>
</tr>
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<td>0.11</td>
<td>0.79</td>
<td>0.46</td>
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<tr>
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<td>N/A</td>
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</tr>
</tbody>
</table>

*Death only cover ceases at age 70, TPD cover ceases at age 65.

**Note:** the rate used for Carly's example on page 10 has been highlighted in this table.
The insurance premium rates in table 2 are inclusive of stamp duty and GST. We reserve the right to review insurance premiums to ensure that the structure and level of premiums are appropriate. We will always inform you of any changes through our website at gesb.wa.gov.au or your member statement. We will give you at least 30 days’ written notice of any premium increases.

Reasons why your Death cover will cease

Your Death cover will cease at the end of the day on the earliest of one of the following events (note termination of cover will not affect your eligibility to make a claim where the **Incident Date** occurs during the period cover was in force):

- You turn age 65
- You cease to be a member of GESB Super or West State Super
- You die
- We receive your cancellation of cover (in writing)
- Your premium was not paid as a result of your account balance being insufficient (and remains unpaid)
- Your claim for a terminal illness benefit is paid
- Your claim for TPD is paid
- The Insurance Policy is terminated by us or the Insurer

Other limits and conditions may apply to Death and TPD insurance. For more information or a copy of the Insurance Policy terms and conditions, contact your Member Services Centre on 13 43 72.

### Table 3: Occupation category factors

<table>
<thead>
<tr>
<th>Occupation categories</th>
<th>Death only / TPD only / Death and TPD combined</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category 1 – White collar occupations e.g. accounting clerks, office managers, physiotherapists, counsellors, secondary school teachers</td>
<td>0.830</td>
</tr>
<tr>
<td>Category 2 – Light blue collar occupations e.g. dental assistants, registered and qualified child care workers, qualified cooks</td>
<td><strong>1.050</strong></td>
</tr>
<tr>
<td>Category 3 – Blue and heavy blue collar occupations e.g. electricians, commercial cleaners, registered nurses</td>
<td>1.075</td>
</tr>
<tr>
<td>Category 4 – Hazardous occupations e.g. police officers, fire fighters, prison officers</td>
<td>1.100</td>
</tr>
<tr>
<td>Category 5 – Professional and Executive subject to the eligibility criteria shown on page 6</td>
<td>0.664</td>
</tr>
</tbody>
</table>

**Note:** the rate used for Carly’s example on page 10 has been highlighted in this table.

### Reasons why your TPD insurance cover will cease

Your TPD insurance cover will cease at the end of the day on the earliest of one of the following events (note termination of cover will not affect your eligibility to make a claim where the **Incident Date** occurs during the period cover was in force):

- You turn age 65
- You cease to be a member of GESB Super or West State Super
- You die
- We receive your cancellation of cover (in writing)
- Your premium was not paid as a result of your account balance being insufficient (and remains unpaid)
- Your claim for a terminal illness benefit is paid
- Your claim for TPD is paid
- The Insurance Policy is terminated by us or the Insurer

Continuation of cover

Subject to the terms of the Policy, where you cease all employment for remuneration or reward (paid employment) with all your employers, Death and/or TPD cover automatically continues under the Policy.

Claiming your Death benefit

All Death benefits are payable to your estate, subject to limited exceptions. It is therefore important that you have an up-to-date will that specifies how you wish your estate to be distributed.

A claim for assessing a Death benefit can take quite some time. Once we have been notified of your death, we will send a letter to your legal personal representative (this will be the executor named in your will, or if there is no will, the administrator appointed under Letters of Administration) that explains the documentation we need to process the claim. It is often the case that the insurance component of the final benefit (if any) is paid to your super account relatively early in the process. Once it has been determined that the insurance benefit is payable, we will write to your legal personal representative to advise the amount of the entitlement and also explain the process they should follow when making an application for payment of your superannuation benefit. The insured component of your benefit is treated in the same way as your super balance.

Once we have received formal notification of death, the existing account balance and any insured amounts received will be invested in the Cash investment plan. This is done to provide greater certainty as to the benefit amount payable because cash investments are generally less volatile. If the Death benefit has not been paid at the date a Grant of Probate or Letters of Administration are issued, the executor or administrator has the right to choose which investment plan(s) the benefit is invested in until payment occurs.

For more information, see our ‘Accessing your super’ brochure available at gesb.wa.gov.au/brochures, as well as our ‘Understanding the insurance claims process’ fact sheet available at gesb.wa.gov.au/factsheets.

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15. Where a claim for TPD is paid, the value of Death cover that exceeds the value of the TPD benefit will continue until another one of the above events occurs.

16. Where a terminal illness benefit is paid (which is equal in value to your full Death benefit), the value of TPD cover which exceeds the value of the terminal illness benefit paid will continue until another one of the above events occurs.

17. Certified copy of Death Certificate, Coroner’s report, autopsy report, inquest finding, or a medical certificate completed by a Registered Medical Practitioner.
Claiming your TPD benefit

To claim against your TPD cover you must meet the definition of Total and Permanent Disablement (see definitions adjacent). You are able to submit a claim as soon as you meet the medical requirements, but there is generally a waiting period of three months (except where you suffer the total and irrecoverable loss of limbs and/or sight) before any benefit payment that is approved by the Insurer is paid into your account.

If you submit a claim early on in the waiting period, then the Insurer may ask you to provide more up-to-date medical information at the end of the waiting period to undertake their assessment.

Claims for payment of TPD benefits should be made within a reasonable period of time of you ceasing work as it helps the Insurer with making an assessment of your claim. Any delays could affect your complaint being addressed by an appropriate external dispute resolution body. For more information, see the ‘Making a complaint’ section on page 25.

If you are a West State Super member, your entitlement to an insured benefit may be affected if you do not apply within 12 months of ceasing employment. However, we can accept applications outside this period, at our discretion.

For more information, see our ‘Understanding the insurance claims process’ fact sheet available at gesb.wa.gov.au/factsheets.

TPD Definition

Total and permanent disability – unlikely to do a suited occupation ever again

Standard definition:
Total and Permanent Disablement is where you:
(a) While insured under the relevant Insurance Policy, as a result of injury, sickness or disease:

• Have not performed any work for an uninterrupted period of at least three consecutive months, solely due to the same injury, sickness or disease, and

• Are attending a Registered Medical Practitioner and have undergone all reasonable and usual treatment including rehabilitation for the injury, sickness or disease, and

• After consideration of all medical and such other evidence as the Insurer may require, have become in the Insurer’s opinion, incapacitated to such an extent as to render you unlikely ever to be able to engage in your own occupation and any occupation for which you are reasonably suited by education, training or experience.

OR

Total and permanent disability – loss of limbs and/or sight or permanent loss of intellectual capacity

(b) While insured under the relevant Insurance Policy, have suffered the total and irrecoverable loss of the:

• Sight of both eyes, or

• Use of two limbs18, or

• Sight of one eye and use of one limb, or

• Cognitive function,

Where limb is defined as the whole hand or whole foot, and the total and irrecoverable loss of ‘cognitive function’ is defined as a total and irrecoverable loss of intellectual capacity that requires the insured member to be under continuous care and supervision by another adult person for at least three consecutive months, and at the end of the three consecutive month period, the insured member is likely to require permanent ongoing continuous care and supervision by another adult person both according to the determination of the Insurer.

Other considerations for Death and TPD insurance claims – on leave

If you’re on paid leave, your insurance cover and your SG contributions from your employer continue as normal. If you commenced a period of leave without pay prior to 1 October 2019 or you go on leave without pay after this date, your insurance cover will continue provided that premiums continue to be paid (from the time your period of leave commenced). If you make a TPD claim where the Incident Date is on or after 1 October 2019, you will be assessed against the definition of TPD outlined in the previous section, not the definition which applied prior to 1 October 2019.

For more information, see our ‘Understanding the insurance claims process’ fact sheet available at gesb.wa.gov.au/factsheets.

18 Limb is defined as the whole hand or whole foot.
Note: Prior to 1 October 2019, the definitions used to assess a claim were based on your employment status at the
time that you ceased employment as a result of Total and Permanent Disablement. You should contact your Member
Services Centre on 13 43 72 to find out which definition applies to your TPD claim.

For more information or a copy of the Insurance Policy terms and conditions, or for a copy of the Previous Policy,
contact your Member Services Centre on 13 43 72.

Exclusions

You or your dependants will not be able to claim against your Death or TPD insurance:

• If Death or TPD is caused wholly or partly, directly or indirectly:
  – by active service in the armed forces of any country or international organisation\(^19\), or
  – from declared or undeclared war or any act of war, or
• If death is caused as a result of any intentional self-inflicted act, regardless of your state of mind at the time
  of the act, for any increase in the Amount Insured, within 13 months of acceptance of the increase\(^20\), or
• If TPD is caused as a result of any intentional self-inflicted act, regardless of your state of mind at the
  time of the act, for any increase in the insured amount

In addition to the above exclusions, for Casual Employees who opt in for basic Death and TPD cover,
if death or TPD is caused wholly or partly, directly or indirectly by any intentional self-inflicted act, regardless of your
state of mind at the time of the act, within 13 months of opting in for basic Death and TPD cover.

Further exclusions may apply to Voluntary Cover for pastimes (e.g. parachuting) and/or medical reasons (e.g. for
existing illness), and/or certain occupations may not be eligible for extra TPD cover. Exclusions will be assessed by the
Insurer when you apply for Voluntary Cover and you will be required to provide medical and/or other evidence.

For more information, or a copy of the Insurance Policy terms and conditions, contact your Member Services Centre
on 13 43 72.

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\(^{19}\) Where you are enrolled in the Australian Defence Force Reserves, this exclusion only applies when you have been called up for
active service.

\(^{20}\) In which case the amount payable is the insured amount prior to the increase.
Salary Continuance Insurance

Salary Continuance Insurance (SCI) provides a monthly benefit for up to 2 years if you become disabled due to injury or sickness, and this benefit is paid after a waiting period has been satisfied.

Where the Date of Disability is on or after 1 October 2019 and your Waiting Period ends before you reach 65 years of age, the monthly benefit is provided for up to the lesser of two years or 6 months after the age of sixty-five subject to continuing to satisfy the insurance policy terms and conditions. If your Waiting Period ends on or after you reach 65 years of age, the monthly benefit is provided for up to 6 months after the end of the Waiting Period.

Where the Date of Disability is prior to 1 October 2019, Salary Continuance Insurance (SCI) provides a monthly benefit for up to the lesser of two years or when you reach age 65.

SCI benefits are assessed on your pre-disablement income which is the average monthly income you earned over the 12 months prior to you becoming totally disabled (or if employed for less than 12 months, over your period of employment).

If you are under 65 years of age and are receiving SG contributions from your employer, you will generally be automatically covered for SCI. If you are newly employed on a casual basis you will not receive automatic SCI cover. However, if you would like insurance cover, you can choose to opt in, subject to some conditions. See ‘Insurance options for Casual Employees’ on page 6 for more information.

Basic cover

The basic level of cover for SCI is based on your employment status when we received your Participating Employer's first SG contribution.

<table>
<thead>
<tr>
<th>Employment status Full-Time Equivalent (FTE)</th>
<th>Basic level of cover (per month)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full time</td>
<td>$4,200</td>
</tr>
<tr>
<td>Between 0.8 and 0.99 FTE</td>
<td>$3,200</td>
</tr>
<tr>
<td>Between 0.6 and 0.79 FTE</td>
<td>$2,400</td>
</tr>
<tr>
<td>Between 0.4 and 0.59 FTE</td>
<td>$2,000</td>
</tr>
<tr>
<td>Less than 0.4 FTE (i.e. less than two days a week)</td>
<td>$1,600</td>
</tr>
</tbody>
</table>

Notes:
(a) Casual Employees with an FTE of 0.4 and above will be restricted to $2,000 per month.
(b) the basic level of cover is inclusive of your SCI income and superannuation benefit. Refer to the ‘Limits on Voluntary Cover’ section in the next column.

Limits on Voluntary Cover

If you increase the Amount Insured above the basic level of cover for your FTE, the Amount Insured for SCI benefits cannot be greater than:
- 75% of your pre-disablement income (SCI income) plus
- Up to 10% of your pre-disablement income, which represents a component for superannuation

However, if your monthly basic level of cover exceeds the Amount Insured, then you may be entitled to a Superannuation Top-Up Benefit. Refer to ‘Superannuation Top-Up Benefit’ on page 20 for more information.

Note: these amounts will never exceed the maximum cover values of $30,000 per month or $10,000 per month for Category 4 - Hazardous occupations and certain listed Category 3 - Blue and Heavy Blue collar occupations.

Limits on benefits payable

Note that regardless of whether you have Voluntary Cover or the basic level of cover, the maximum benefit payable by the Insurer will be the lesser of:
- The Amount Insured, and
- At the Date of Disability:
  - 75% of your pre-disablement income which excludes superannuation, plus
  - the Superannuation Top-up Benefit (refer to page 20 for more information)

Note: these amounts will never exceed the maximum cover values of $30,000 per month or $10,000 per month for Category 4 - Hazardous occupations and certain listed Category 3 - Blue and Heavy Blue collar occupations.

Working out how much cover you want

It is important that you make sure you have the right level of SCI cover.

If you are a full-time employee earning income of more than $67,200 per annum, the automatic basic monthly SCI benefit cover of $4,200 per month is less than 75% of your income and may need to be increased.

Similarly, if you earn Income of less than $67,200 per annum, you may want to reduce your cover.

It is also possible that you have insurance with other super funds or insurers, so we strongly recommend you review your insurance situation regularly to ensure that you have sufficient cover and to avoid paying for insurance that you do not need or may have a reduced or nil payment on claim due to offsets being applied. For examples of offsets see ‘Reductions to the amount of SCI benefits payable’ on page 19.

To work out how much cover you might need as part of your super, use the calculator on page 16. We’ve included an example to help you.
Example

Sally is aged 39 and earns $66,000 per annum. She wants SCI cover to be sufficient to cover herself for the full 75% of her current income plus contribute 10% to her super. Note that Sally may want to change her SCI cover if her salary subsequently increases or decreases.

So, $4,125 is 75% of Sally’s monthly income and the level of cover she is insured for paid as income replacement. If Sally’s income remains the same, this will be the amount (less any tax) paid directly into her bank account subject to the terms of the insurance policy. The remainder ($4,600 – $4,125) constitutes the super component and this is paid as a contribution to Sally’s current GESB Super account.

### Insurance cover calculation

<table>
<thead>
<tr>
<th>Monthly income A ($66,000) divided by 12</th>
<th>B</th>
<th>$5,500</th>
<th>$</th>
</tr>
</thead>
<tbody>
<tr>
<td>What % of monthly income do you want paid to you? (The maximum is 75%)</td>
<td>C</td>
<td>75%</td>
<td>..........% maximum of (75%)</td>
</tr>
<tr>
<td>Multiply B ($5,500) by C (75%)</td>
<td>D</td>
<td>$4,125 per month</td>
<td>$ per month</td>
</tr>
<tr>
<td>What % of monthly income do you want paid to your super account? (The maximum is 10%)</td>
<td>E</td>
<td>10%</td>
<td>..........% maximum of (10%)</td>
</tr>
<tr>
<td>Multiply B ($5,500) by E (10%)</td>
<td>F</td>
<td>$550 per month</td>
<td>$ per month</td>
</tr>
<tr>
<td>Add D ($4,125) and F ($550) together</td>
<td>G</td>
<td>$4,675 per month</td>
<td>$ per month</td>
</tr>
<tr>
<td>Monthly insurance amount (G) rounded down to closest $200</td>
<td>H</td>
<td>$4,600 per month</td>
<td>$ per month</td>
</tr>
</tbody>
</table>

Whether you are a West State Super or GESB Super member, you can insert your details into the table above to estimate how much insurance cover you may need.

Note: cover above the default SCI cover limit will be subject to assessment by the Insurer and you may have to provide extra medical information.

If you simply want to work out the maximum Amount Insured per month that you can currently apply for, you can use this formula:

\[
\text{Maximum SCI amount insured (per month)} = \text{Your annual income} \times 0.070833
\]

Fill in your details here: $ x 0.070833

Result rounded down to the nearest even $200 $
The maximum benefit payable is capped at the Amount Insured. Your Amount Insured cannot be greater than the lesser of:
- your SCI income per month (i.e. 75% of pre-disablement Income) plus a superannuation component of up to 10% your pre-disablement Income, and
- $30,000 per month (or $10,000 per month for Category 4 - Hazardous occupations and certain listed Category 3 - Blue and Heavy Blue collar occupations22 and for this group, 1.5 times the premium rates will apply to cover above basic cover).

Your insurance cover will only be approved subject to the satisfactory evaluation of your application by the Insurer. Your cover may also be approved subject to loadings or exclusions. It is possible that your application for Voluntary Cover could be declined.

Decreasing your level of cover

You can choose to decrease your level of insurance cover. However, if you would later like to reinstate or increase your insurance cover, you can only do so subject to you being under the age of 65, by completing a full ‘Insurance application’ and providing any evidence requested by the Insurer.

<table>
<thead>
<tr>
<th>Change</th>
<th>How to make the change</th>
<th>Approval required from the Insurer</th>
</tr>
</thead>
</table>
| **Increasing** SCI cover up to $4,200 per month  
  • Within 90 days of us receiving the first SG contribution from your employer | Apply through Member Online at mol.gesb.wa.gov.au or complete our ‘Insurance variation’ form | No |
| **Increasing** SCI cover  
  • If total cover will exceed $4,200 per month; or  
  • More than 90 days after we receive your first SG contributions from your employer; or  
  • If you are a Casual Employee who previously opted in for cover | Apply through Member Online at mol.gesb.wa.gov.au or complete our ‘Insurance application’ form | Yes |
| **Decreasing** SCI cover or opting out | Apply through Member Online at mol.gesb.wa.gov.au or complete our ‘Insurance variation’ form | No |
| **Decreasing** waiting period  
  e.g. from 90 days to 60 days | Apply through Member Online at mol.gesb.wa.gov.au or complete our ‘Insurance application’ form | Yes |
| **Increasing** waiting period  
  e.g. 90 days to 120 days | Apply through Member Online at mol.gesb.wa.gov.au or complete our ‘Insurance variation’ form | No |

For a copy of our ‘Insurance variation’ or ‘Insurance application’ form, call your Member Services Centre on 13 43 72.

**How much does SCI cover cost?**

The cost of SCI cover varies according to your age, gender, occupation category, amount of cover and waiting period selected. If you need to be assessed by the Insurer, they may also consider other factors.

Your premium is calculated using the equation on the right23 and will be deducted from your super account each month.

```
Level of benefit (per $1,000 of monthly benefit) x Age and gender-based annual premium rate x Occupation category factor x Waiting period factor
```

22 The following occupations, defined under the ASCO and/or ANZSCO occupation standards, are also limited to the hazardous restriction on the maximum SCI Amount Insured of $10,000, although the Insurer provides basic cover for Death, TPD and SCI at Category 3 – Blue and Heavy Blue Collar, ‘Ambulance Officers and Paramedics’, ‘Blasting workers’, ‘Chemical, Gas, Petroleum and Power Generation Plant Operators’, ‘Chemical, Petroleum and Gas Plant Operators’, ‘Drillers’, ‘Drillers, Miners and Shot Firers’, ‘Forestry and Logging Workers’, ‘Guards and Security Officers’, ‘Miners’, ‘Mining Support Workers and Drillers Assistants’, ‘Power Generation Plant Operators’, ‘Seafarers and Fishing Hands’, ‘Timber and Wood Process Workers’ and ‘Travel Attendants’. ‘Mining and Material Engineers’ and ‘Mining Engineers’ are also limited to this hazardous restriction if any part of your role requires you to be in an underground mine at any time.

23 If you have extra insurance cover subject to a loading, the premium is calculated separately for the cover that is, and the cover that is not, subject to loading. For cover that is subject to a loading, the result needs to be multiplied by the loading.
Example

Ben is aged 38 and earns $80,000 a year as a Registered Nurse. If Ben accepts the default basic level of cover of $4,200 per month and the default waiting period of 90 days, his SCI premium would be calculated as follows:

Reference: Divide SCI cover amount per month by $1,000.
Age and gender-based premium rate for SCI: From table 4, Column A.
Occupation category factor for SCI: From table 5, page 19.
Waiting period factor: From table 6, page 19.
Annual premium: $215.65 (or $17.97 per month).

Ben's SCI total cover = $4,200 / $1,000 = 4.2 per month

Fill in your details here: $ / $1,000 = per month

Table 4: Age and gender based annual premium rate for SCI (per $1,000 monthly benefit)

<table>
<thead>
<tr>
<th>Your current age</th>
<th>Males</th>
<th>Females</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Column A</td>
<td>Column B</td>
</tr>
<tr>
<td>15</td>
<td>9.14</td>
<td>11.54</td>
</tr>
<tr>
<td>16</td>
<td>9.14</td>
<td>11.54</td>
</tr>
<tr>
<td>17</td>
<td>9.14</td>
<td>11.54</td>
</tr>
<tr>
<td>18</td>
<td>9.14</td>
<td>11.54</td>
</tr>
<tr>
<td>19</td>
<td>9.14</td>
<td>11.54</td>
</tr>
<tr>
<td>20</td>
<td>9.14</td>
<td>11.54</td>
</tr>
<tr>
<td>21</td>
<td>9.14</td>
<td>11.54</td>
</tr>
<tr>
<td>22</td>
<td>11.22</td>
<td>14.17</td>
</tr>
<tr>
<td>23</td>
<td>12.75</td>
<td>16.12</td>
</tr>
<tr>
<td>24</td>
<td>13.87</td>
<td>17.54</td>
</tr>
<tr>
<td>25</td>
<td>14.74</td>
<td>18.63</td>
</tr>
<tr>
<td>26</td>
<td>15.48</td>
<td>19.56</td>
</tr>
<tr>
<td>27</td>
<td>16.22</td>
<td>20.52</td>
</tr>
<tr>
<td>28</td>
<td>17.10</td>
<td>21.58</td>
</tr>
<tr>
<td>29</td>
<td>18.15</td>
<td>22.92</td>
</tr>
<tr>
<td>30</td>
<td>19.41</td>
<td>24.52</td>
</tr>
<tr>
<td>31</td>
<td>20.90</td>
<td>26.39</td>
</tr>
<tr>
<td>32</td>
<td>22.60</td>
<td>28.54</td>
</tr>
<tr>
<td>33</td>
<td>24.45</td>
<td>30.91</td>
</tr>
<tr>
<td>34</td>
<td>26.75</td>
<td>33.78</td>
</tr>
<tr>
<td>35</td>
<td>29.45</td>
<td>37.19</td>
</tr>
<tr>
<td>36</td>
<td>32.56</td>
<td>41.11</td>
</tr>
<tr>
<td>37</td>
<td>35.85</td>
<td>45.30</td>
</tr>
<tr>
<td>38</td>
<td>39.72</td>
<td>50.19</td>
</tr>
<tr>
<td>39</td>
<td>44.01</td>
<td>55.58</td>
</tr>
<tr>
<td>40</td>
<td>49.08</td>
<td>61.99</td>
</tr>
<tr>
<td>41</td>
<td>54.97</td>
<td>69.44</td>
</tr>
<tr>
<td>42</td>
<td>61.44</td>
<td>77.61</td>
</tr>
<tr>
<td>43</td>
<td>66.07</td>
<td>83.44</td>
</tr>
<tr>
<td>44</td>
<td>70.94</td>
<td>89.62</td>
</tr>
<tr>
<td>45</td>
<td>75.98</td>
<td>95.98</td>
</tr>
<tr>
<td>46</td>
<td>81.18</td>
<td>102.57</td>
</tr>
<tr>
<td>47</td>
<td>86.59</td>
<td>109.37</td>
</tr>
</tbody>
</table>

Note: the rate used for Ben’s example has been highlighted in table 4.

The premium rates in table 4 are inclusive of stamp duty and GST. We reserve the right to review insurance premiums to ensure that the structure and level of premiums are appropriate. We will always inform you of any changes through gesb.wa.gov.au or through your member statement. We will give you at least 30 days’ notice of any premium increases.

24 Registered Nurses are classified as category 3 - Blue/Heavy Blue occupation, see table 5 on page 19.
25 If you have extra insurance cover subject to a loading, the premium is calculated separately for the cover that is, and the cover that is not, subject to loading. For cover that is subject to a loading, the result needs to be multiplied by the loading.
Table 5: Occupation category factors for Salary Continuance Insurance (SCI)

<table>
<thead>
<tr>
<th>Occupational categories</th>
<th>Salary Continuance Insurance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category 1 - White collar occupations e.g. accounting clerks,</td>
<td>1.00</td>
</tr>
<tr>
<td>office managers, physiotherapists, counsellors, secondary</td>
<td></td>
</tr>
<tr>
<td>school teachers</td>
<td></td>
</tr>
<tr>
<td>Category 2 - Light blue collar occupations e.g. dental</td>
<td>1.50</td>
</tr>
<tr>
<td>assistants, registered and qualified child care workers,</td>
<td></td>
</tr>
<tr>
<td>qualified cooks</td>
<td></td>
</tr>
<tr>
<td>Category 3 - Blue and heavy blue collar e.g. electricians,</td>
<td>2.10</td>
</tr>
<tr>
<td>commercial cleaners, registered nurses</td>
<td></td>
</tr>
<tr>
<td>Category 4 - Hazardous occupations e.g. police officers,</td>
<td>2.60</td>
</tr>
<tr>
<td>fire fighters, prison officers</td>
<td></td>
</tr>
<tr>
<td>Category 5 - Professional and Executive, subject to meeting</td>
<td>0.90</td>
</tr>
<tr>
<td>the eligibility criteria shown on page 6</td>
<td></td>
</tr>
</tbody>
</table>

Table 6: Waiting period factors for Salary Continuance Insurance

<table>
<thead>
<tr>
<th>Waiting period (in days)</th>
<th>Waiting period factor</th>
</tr>
</thead>
<tbody>
<tr>
<td>30</td>
<td>3.20</td>
</tr>
<tr>
<td>60</td>
<td>1.85</td>
</tr>
<tr>
<td>90</td>
<td>1.00</td>
</tr>
<tr>
<td>120</td>
<td>0.90</td>
</tr>
<tr>
<td>180</td>
<td>0.80</td>
</tr>
</tbody>
</table>

Reasons why your insurance cover will cease

Your SCI cover will cease on the earliest of one of the following events:
- You turn age 65
- You cease to be a member of GESB Super or West State Super
- You die
- We receive your cancellation of cover (in writing)
- Your premium was not paid as a result of your account balance being insufficient (and remains unpaid)
- 120 days have elapsed since your last SG contribution was received
- The Insurance Policy is terminated by us or the Insurer

Your monthly benefit

The maximum benefit payable is the lesser of:
- The Amount Insured, and
- At the Date of Disability:
  - 75% of your pre-disability Income which excludes superannuation (SCI income), plus
  - The Superannuation Top-Up Benefit

Where a monthly benefit becomes payable, this will be paid at the end of each month that you’re entitled to be paid. For a Total Disability Benefit for a part month, you will be paid 1/30th of the benefit for each day of disability.

When your monthly benefit will cease

The SCI benefit will continue to be paid until the earliest of the:
- Expiry of the lesser of the two year maximum benefit period or the date that is 6 months after attaining the age of 65 if you are aged less than 65 years when your Waiting Period ends
- 6 months after the end of the Waiting Period if you are aged 65 years or over when your Waiting Period ends, provided the Date of Disability happens before you reach age 65
- Date you are no longer totally or partially disabled
- Date of your death

Reductions to the amount of SCI benefits payable

The benefit payable to you in relation to any injury or sickness will be reduced by any amount which is paid or required to be paid to you under:
- Workers’ Compensation, social security, transport accident compensation or similar legislation in relation to the injury or sickness, or
- Other salary continuance or income protection benefits from other insurance companies, or
- Any eligible sick leave entitlements

If you continue to receive any other income from your employer whilst receiving SCI benefits, these amounts will also offset any SCI benefit entitlements.

If any of these payments are in the form of a commuted lump sum, the value of these payments will be converted to an equivalent monthly payment deemed to be 1/60th of the lump-sum payment.

Other limits and conditions may apply to Salary Continuance Insurance (SCI). For more information or a copy of the Insurance Policy terms and conditions call your Member Services Centre on 13 43 72.

26 The following occupations, defined under the ASCO and/or ANZSCO occupation standards, are also limited to the hazardous restriction on the maximum SCI Amount Insured of $4,200, although the Insurer provides basic cover for Death, TPD and SCI at category 3 – Blue and Heavy Blue Collar. ‘Ambulance Officers and Paramedics’, ‘Blasting workers’, ‘Chemical, Gas, Petroleum and Power Generation Plant Operators’, ‘Chemical, Petroleum and Gas Plant Operators’, ‘Drillers’, ‘Drillers, Miners and Shot Firers’, ‘Forestry and Logging Workers’, ‘Guards and Security Officers’, ‘Miners’, ‘Mining Support Workers and Drillers Assistants’, ‘Power Generation Plant Operators’, ‘Seafarers and Fishing Hands’, ‘Timber and Wood Process Workers’ and ‘Travel Attendants’. ‘Mining and Material Engineers’ and ‘Mining Engineers’ are also limited to this hazardous restriction if any part of your role requires you to be in an underground mine at any time.
If you’re receiving a Superannuation Top-Up Benefit, the payment will continue until the earlier of any of the reasons listed on page 19, or if any of the following occurs:

- You access part or all of your super benefit from your GESB Super or West State Super account for retirement purposes
- Your GESB Super or West State Super account is closed

**Superannuation Top-Up Benefit**

Where your disablement occurs on or after 1 January 2009, the SCI benefit will provide a Superannuation Top-Up Benefit where your Amount Insured is greater than 75% of your pre-disablement income.

The maximum amount of this Superannuation Top-Up Benefit is determined by age.

The Superannuation Top-Up Benefit will be preserved in your super and you will need to satisfy another condition of release to access this amount. For more information on super conditions of release, read our ‘Accessing your super’ brochure available at gesb.wa.gov.au/brochures.

The amount paid as the Superannuation Top-Up Benefit will be based on the difference between 75% of your pre-disablement income and the *Amount Insured*.

The amount is limited to a maximum of 75% or 25% of pre-disablement income - whichever is applicable based on age, as set out in the table below. Where the *Amount Insured* is less than 75% of your pre-disablement income, no Superannuation Top-Up Benefit will be paid.

<table>
<thead>
<tr>
<th>Age</th>
<th>Top-up to super from SCI benefit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under age 55</td>
<td>Up to an extra 75% of pre-disablement income</td>
</tr>
<tr>
<td>Age 55 and over</td>
<td>Up to an extra 25% of pre-disablement income</td>
</tr>
</tbody>
</table>

This Superannuation Top-Up Benefit is treated as a concessional contribution and will count towards your concessional contributions cap.

For more information on these caps, see our ‘Contributing to your super’ brochure at gesb.wa.gov.au/brochures.

### Example

Jane is aged 44 and works full time. She has a basic level of cover of $4,200 per month and her annual salary is $62,000. If she was to become totally disabled and her claim for SCI cover was approved by the Insurer, she would receive a benefit paid as follows:

<table>
<thead>
<tr>
<th>Gross monthly benefit</th>
<th>How is this benefit paid</th>
</tr>
</thead>
<tbody>
<tr>
<td>75% pre-disablement income (75% of $62,000/12)</td>
<td>$3,875 Paid to Jane’s bank account (less any tax)</td>
</tr>
<tr>
<td>Top-up to super</td>
<td>$325 Paid as a Superannuation Top-Up Benefit to Jane’s super account</td>
</tr>
<tr>
<td>Total benefit paid</td>
<td>$4,200</td>
</tr>
</tbody>
</table>

The maximum benefit payable in this example is $4,200. The maximum Superannuation Top-Up Benefit allowed in this example is $325 i.e. the difference between the SCI income and the *Amount Insured*.

### Claiming your SCI benefit

To claim against your SCI cover you must meet the definition of Total Disability or Partial Disability.

The definition is different depending on the hours you work in the 13 weeks immediately prior to you ceasing work as a result of Total Disability (see below).

You are able to make a claim as soon as you meet the medical requirements but there is a waiting period before you become entitled to receive a benefit payment approved by the Insurer. Benefits are payable monthly in arrears.

If you submit a claim relatively early in the waiting period, then the Insurer may ask you to provide more up-to-date medical information at the end of the waiting period to undertake their assessment.

You are permitted to return to work for up to five consecutive days (30-day waiting period) and up to ten consecutive days (for waiting periods greater than 30 days), without recommencing the waiting period. Any days worked during the waiting period will be added to the end of the relevant waiting period.

If SCI benefits are payable to you and the same injury or sickness recurs within 12 months of a previous return to work, no waiting period will apply. However, the recurrent claim will be deemed to be a continuation of the original claim. Any income payments will cease after a period of two years27 (taking into account any previous payments made as part of the original claim). However, if the same injury or sickness recurs more than 12 months from a previous return to work, the injury or sickness will be treated as a new claim and a new waiting period and benefit period will apply.

SCI benefits are assessed on your pre-disablement income, which is the average monthly income you earned over the 12 months prior to you becoming totally disabled. The 12-month period includes any periods of paid annual leave and unpaid leave. Where you have been employed less than 12 months your pre-disablement income is averaged over your period of employment.

For more information, see our ‘Understanding the insurance claims process’ fact sheet available at gesb.wa.gov.au/factsheets.
Members working at least 0.4 FTE and working a minimum of 13 hours per week averaged over the 13 weeks immediately prior to the Date of Disability

Standard Total Disability definition:
Total Disability means that solely as a result of injury or sickness you:
• Are unable to perform one or more important duties of your own occupation, and
• Remain under the regular care, attendance and following the advice of a Registered Medical Practitioner in relation to that injury or sickness, and
• Are not engaged in any occupation, whether paid or unpaid

Standard Partial Disability definition:
If you are assessed as being partially disabled, beyond the end of the waiting period, and have been totally disabled for at least seven out of 10 consecutive days, a Partial Disability benefit will be payable. Partial Disability means that solely due to the injury or sickness, which directly caused the Total Disability, you:
• Remain under the regular care, attendance and following the advice of a Registered Medical Practitioner in relation to that injury or sickness, and
• Are able to perform one or more important duties of your own occupation, but unable to perform all of the duties, and
• Are earning an income from your own occupation or another occupation at a monthly rate of less than your pre-disability income, or are capable of working, whether paid or unpaid

The Insurer will notify you of the amount of the Partial Disability benefit payable.

Members who do not meet the requirement of working at least 0.4 FTE and working a minimum of 13 hours per week, averaged over the 13 weeks immediately prior to the Date of Disability and all Sessional Employees.

Any Occupation Total Disability definition:
Total Disability means that solely as a result of injury or sickness you:
• Have been incapacitated to such an extent as to render you unable to engage in your own occupation or any occupation for which you are reasonably suited by education, training and experience, and
• Remain under the regular care, attendance and following the advice of a Registered Medical Practitioner in relation to that injury or sickness, and
• Are not engaged in any occupation, whether paid or unpaid

Any Occupation Partial Disability definition:
If you are assessed as being partially disabled, beyond the waiting period, and have been totally disabled for at least seven out of 10 consecutive days, a Partial Disability benefit will be payable. Partially disabled means that solely due to the sickness or injury which directly caused the Total Disability, you:
• Remain under the regular care, attendance, and following the advice of a Registered Medical Practitioner in relation to that sickness or injury, and
• Are able to perform one or more important duties of your own occupation or any occupation for which you are suited by education, training and experience, but unable to perform all the duties, and
• Are earning an income from your own occupation or another occupation at a monthly rate of less than your pre-disability income, or are capable of working, whether paid or unpaid

The Insurer will notify you of the amount of the Partial Disability benefit payable.

Alternative benefit for Medically Discharged WA Police Officers
If you are a WA Police Officer and have your employment terminated due to Medical Discharge prior to age 65 on or after 1 October 2019, your Date of Disability (being the date the Waiting Period commences) and last day of your Waiting Period will be the date of your employment termination due to Medical Discharge.

On the date of employment termination due to Medical Discharge, the definition of totally disabled at or above the Minimum FTE will have been deemed to have been met.

Where you are employed in any occupation other than as a WA Police Officer, and are in receipt of an Income from employment other than as a WA Police Officer, you will be assessed against the Standard Partial Disability definition (see left column) excluding the words ‘If you are assessed as being partially disabled, beyond the end of the waiting period, and have been totally disabled for at least seven out of 10 consecutive days, a Partial Disability Benefit will be payable’. Subject to this definition being met, benefits will be paid in accordance with the Partial Disability benefit formula as notified to you by the Insurer.

If any benefit is payable, the monthly payment will be reduced by the total of any amounts previously paid by the Insurer as a benefit under a SCI policy from GESB Super or West State Super for you in your role as a WA Police Officer (Previous Benefit), over the duration of the payment of the benefits after being Medically Discharged. The reduction will be effected by reducing each monthly payment by an amount equal to:

Previous Benefit
24

until such monthly payment ceases to be paid.

If you are a Medically Discharged WA Police Officer, offsets will apply (see ‘Reductions to the amount of SCI benefits payable’ on page 19) if you are in receipt of any other benefits during the same period the Insurer is paying a benefit following a Medical Discharge. Any amounts payable from a future Medically Disabled Officer Compensation Scheme will not fall within the offsets.
Other things you need to know about SCI

If you’re on paid leave, your insurance cover and your SG contributions from your employer continue as normal. If you go on leave without pay your SCI cover will continue for up to 24 months (from the time your period of leave commenced) subject to the continued payment of premiums. Regardless of this, your SCI cover will cease after 120 days of the last SG contribution from your employer, unless you make an election to us for your SCI cover to continue while on leave without pay. If it has been 75 days since we last received a SG contribution from your employer, we will attempt to contact you to remind you that you will need to make such an election for your SCI cover to continue.

You can apply to extend the period beyond 24 months, which is subject to approval by the Insurer.

If you suffer a partial or total disability during the period of leave without pay and the Date of Disability is within the 24 month period (or where an extension of cover beyond the 24 months is approved by the Insurer, within the extended period of leave approved by the Insurer), your pre-disablement income will be determined as the average monthly income you earned over the 12 months prior to you commencing leave without pay (or if you had been employed for less than 12 months, over your period of employment). SCI benefits are assessed on your pre-disablement income, which is the average monthly income you earned over the 12 months prior to you becoming totally disabled (or if you have been employed for less than 12 months, over your period of employment). The 12-month period includes any periods of paid annual leave.

You may be able to reinstate SCI cover that ceased during a period of leave without pay

Where your SCI cover has ceased due to us not receiving your employer contributions during a period of leave without pay, you will be able to apply to reinstate your SCI cover without assessment by the Insurer subject to the:
- Application being made prior to your approved return to work date from approved leave without pay
- Payment of premiums during the period of approved leave
- Provision of written evidence of the approved leave without pay when applying
- Agreed return to work date being within 24 months of going on leave without pay (or, where an extension was approved beyond the 24 months by the Insurer, within the extended period approved)

If your SCI cover has been reinstated as described above and you have not returned to work on the approved return to work date, your cover will cease 30 days after the approved return to work date (unless an employer contribution is received by us in respect of your account within thirty [30] days after your agreed return to work date). If this occurs, you will have to re-apply to the Insurer for any reinstatement of cover.

Existing members whose cover increased on 1 July 2016

If your SCI cover increased on 1 July 2016 due to the new default amounts and you met the ‘At Work’ definition for 30 consecutive days immediately prior to 1 July 2016, your increased SCI cover is not subject to ‘Limited Cover’.

If your SCI cover increased on 1 July 2016 due to the new default amounts and you did not meet the ‘At Work’ definition for 30 consecutive days immediately prior to 1 July 2016, your increased SCI cover is ‘Limited Cover’ until such time as you are ‘At Work’ for 30 consecutive days.

Note: a different definition of At Work applied prior to 1 July 2016 and continues to apply to existing members as at that date in relation to SCI Cover for Permanent Employees, Contractors and Sessional Employees - see the definition of At Work on page 23.

Exclusions

You will not be able to claim against your Salary Continuance Insurance if your disability is caused directly or indirectly from:
- Any intentional self-inflicted injury, attempted suicide or self-destruction regardless of your state of mind, or
- Declared or undeclared war or any act of war, or
- Active service in the armed forces of any country or international organisation, or
- Uncomplicated pregnancy, childbirth or miscarriage

Further exclusions may apply to Voluntary Cover for pastimes (e.g. parachuting) and/or medical reasons (e.g. for existing illness). Exclusions will be assessed by the Insurer if you apply for Voluntary Cover and you will be required to provide medical and/or other evidence.

Note: a different definition of At Work applied prior to 1 July 2016 and continues to apply to existing members as at that date in relation to SCI Cover for Permanent Employees, Contractors and Sessional Employees - see the definition of At Work on page 24.

For more information or for a copy of the Insurance Policy terms and conditions, contact your Member Services Centre on 13 43 72.
Other things you need to know about Death, TPD and SCI cover

**Limited Cover**
Your insurance cover is subject to Limited Cover if:

1. The first SG contribution from your employer is received by us more than 120 days after you commenced employment with them, or
2. You are employed on a casual basis and opt in for SCI cover, or
3. You received the automatic increase to your SCI Amount Insured on 1 July 2016 and you were not At Work for 30 consecutive days immediately prior to 1 July 2016. The extra cover is Limited Cover until you are At Work for 30 consecutive days, after which time the cover will no longer be Limited Cover.

**Limited Cover** means insurance cover which applies only in respect of events or conditions which arise entirely after your insurance cover commenced.

Other than the Limited Cover which may apply as a result of an automatic increase to your SCI Amount Insured (described at item 3 above), Limited Cover will apply for two years from your insurance cover commencement date. After two continuous years of Limited Cover, these restrictions will be removed, subject to you meeting the At Work criteria at the end of that two-year period, as defined in the Insurance Policy.

If the At Work criteria is not met after the two-year period, Limited Cover will continue to apply until you meet the At Work criteria.

Note: a different definition of At Work applied prior to 1 July 2016 and continues to apply to existing members as at that date in relation to SCI Cover for Permanent Employees, Contractors and Sessional Employees - see the definition of At Work below.

**At Work**
You must be At Work on the day that your cover commences to be covered for Death, TPD and SCI cover.

For Permanent Employees, Contractors and Sessional Employees, At Work means you must be actively (or capable of) performing all the duties of your occupation with your Participating Employer and not receiving, or be entitled to receive, any form of income support benefits (including workers’ compensation benefits, statutory transport accident benefits and disability income benefits). If you were not At Work on the day that your cover commenced, for reasons other than sickness or injury (for example, if you were on approved leave), you will be provided with full cover provided that:

- You were At Work on the day preceding the first day of your leave, and
- You were not disabled due to an event (e.g. sickness or injury) occurring on a date preceding the commencement date of your cover while on approved leave.

If you were not At Work on the day that your cover commenced due to sickness or injury, you will be provided with New Events Cover from the commencement of your cover.

Full cover will be provided to you once you return to work and perform your normal duties and work hours for a period of three consecutive months.

For Casual Employees, At Work means on the date of signing the insurance application, the member is engaged in their full or normal duties and is working normal hours without limitation or restriction due to sickness or injury, or is capable of performing their full and normal duties on a full time basis for at least 30 hours per week, even though their employment may be on a casual basis, and the member is not in receipt of any and is not entitled to receive income support benefits (including workers’ compensation benefits, statutory transport accident benefits and disability income benefits).

If you are a Casual Employee and do not meet the At Work criteria on the Insurance opt-in form, you are not eligible for basic cover.

Note: If you need to meet the definition of At Work under the SCI Policy in effect prior to 1 July 2018 and you were covered as a Permanent Employee, Contractor or Sessional Employee, you could only satisfy the definition of At Work if you were actively performing all the duties of your usual occupation with a Participating Employer (it is not sufficient if you were capable of performing these duties) and not in receipt of, or entitled to claim, any income support benefits from any source including (but not limited to) workers’ compensation benefits, statutory transport accident benefits and disability income benefits.

**New Events Cover**
New Events Cover means cover other than cover in relation to the medical condition or any directly or indirectly related conditions arising from sickness or injury, which caused the member to be not At Work on the day that their cover commenced.

**Travelling and working overseas**
Cover will continue automatically for an unlimited period of time where you travel or work overseas, subject to the payment of your insurance premiums.

In the event of a claim or where SCI benefits are being paid, the Insurer may require you to return to Australia at your own expense for medical treatment and assessment where you are overseas or travelling overseas.

The Insurer will continue to consider a claim or pay SCI benefits if you intend to travel overseas, but must be advised in advance and approve of, any overseas travel. SCI benefits will be limited to 12 months unless you continuously reside in Australia, New Zealand, Sweden, the United Kingdom, the United States of America or in any other country to which the Insurer agrees in writing.
Cover for non-Australian citizens

Cover is available to non-Australian citizens who are not permanent residents of Australia during their stay in Australia and meet other eligibility criteria. In the event of a claim, the Insurer reserves the right to request that the member remains in Australia for claims assessment.

Privacy and your insurance

For information about your privacy relating to insurance arrangements with AIA Australia Limited, a full copy of AIA’s privacy policy is available on their website at aia.com.au.

Partial and Permanent Disablement benefits for West State Super members

Eligibility

Your eligibility for a Partial and Permanent Disablement (PPD) benefit depends on a number of factors. To be eligible for the benefit you must:

- Have been employed or currently be employed in the WA public sector and have received an SG contribution from your employer to your West State Super account and ceased work due to disability
- Be less than 60 years of age
- Be a covered risk benefits member (as defined in the State Superannuation Regulations 2001 [WA]) who is an eligible statutory West State Super member, and
- Have never opted out of Death and/or TPD insurance cover
- Be able to satisfy the definition of ‘partial and permanent disablement’ in the State Superannuation Regulations 2001 (WA)

The definition of PPD is the physical or mental incapacity to the extent we consider you are, and until turning 60 will remain:

- Unable to perform your own duties, but
- Able to perform duties of another job (in the public or private sector) for which we consider you:
  - are suited by reason of education, training or experience, or
  - would be suited if retrained

You remain eligible for PPD benefits as defined in the WA State Superannuation legislation, if:

- At the time when you first suffered from the illness or injury, you were eligible for supplementary risk benefits (if any) provided by us

How to calculate your level of benefit

Your maximum PPD lump-sum benefit (before tax) at any point in time is determined by your total super benefit plus your insured component.

Your Total Superannuation Benefit is the amount that has accumulated in your West State Super account over the life of your membership.

Your insured component is calculated using the following formula:

\[ \text{Insured Component} = \frac{MNS}{12} \times 9.5\% \times R \]

- Where \( MNS \) is Months of Notional Service to age 60.
- Where \( 9.5\% \) represents the current Superannuation Guarantee amount.
- Where \( R \) is your Remuneration. This is calculated in accordance with the State Superannuation Regulations and discounted by the annual amount of the remuneration that we consider you have the capacity to earn after becoming disabled.

For a PPD payment to be made, we must be satisfied that:

- You are permanently incapacitated from your normal duties, and
- You are capable of alternative duties of another job

If approved, the PPD payment would equal the balance in your account, plus a reduced insured component based on your assessed loss in income earning capacity. This insured component will depend upon our assessment of your income earning capacity, taking into account your education, work history, functional disability and other relevant factors. If you receive any other benefit in relation to the same illness or injury, the insured component may be reduced for the amount of that benefit. At a minimum, if we have approved the payment of a disability benefit, you are entitled to the balance in your account.

Opting out of your insurance cover

By opting out of your entitlement to any cover for Death and/or TPD, you also opt out of any entitlements for PPD benefits specified in State Superannuation legislation.

Before opting out of part or all of your Death and/or TPD insurance cover, you should also be aware that if you wish to reinstate your insurance at a later date, it will be subject to the satisfactory completion of a full "Insurance application" form and any evidence requested by the Insurer. There is no automatic acceptance. You may wish to seek financial advice before making any changes to your insurance cover.
**Other information about the PPD benefit**

**When your benefit ceases**
Your PPD benefit ceases automatically on your 60th birthday or when you are no longer working in the WA public sector. It will only lapse at an earlier age if you go on leave without pay for more than two years.

**PPD benefits while you are on leave**
If you’re on paid leave, your entitlement to PPD benefits and your employer’s contributions continue as normal. Your entitlement to a PPD benefit during a period of leave without pay will continue but will gradually decrease because it is calculated based on your average salary for the previous two-year period. After two years of leave without pay, your entitlement will cease.

**Claiming your PPD insurance benefit**
If you make a claim against your insurance, the Insurer will make an assessment of your claim based upon the definition of TPD that applies to your cover. If your claim for a TPD benefit is declined, we will automatically assess your eligibility for a PPD benefit.

**When to apply**
You should apply to be assessed for a PPD benefit within 12 months of ceasing work due to your disablement. After this time, we have discretion to accept or reject your claim.

**Making a complaint**
As a current or former member, you (or a person acting on your behalf), can make a complaint verbally or in writing. You can:

- Call your Member Services Centre on 13 43 72
- Email memberservices@gesb.com.au
- Write to: Member Services - Feedback, PO Box J 755, Perth WA 6842

We will call you or send you a letter or email to acknowledge your complaint. You’ll be provided with a contact name and telephone number for one of our staff who you can talk to about any issues related to your complaint. In most cases, we’ll be able to resolve your concern over the phone, or promptly if it’s a written complaint.

We will try to resolve your complaint within 30 days. If you are not satisfied with the outcome, you can ask for an independent internal review.

If you are still not satisfied with the outcome, you have the right to appeal to an independent, external dispute resolution body established by the Commonwealth Government.

For details on our complaints process or complaining through the external dispute resolution body, please refer to the ‘**Resolving your complaint**’ brochure. This is available at gesb.wa.gov.au/brochures.
Some words in this document have special meaning in the Insurance Policies. Please note the defined terms in the Insurance Policies will supersede the information in the Product Information Booklets, and in this document.

<table>
<thead>
<tr>
<th>Term</th>
<th>Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amount Insured</td>
<td>Means the amount certified from time to time by us as your Amount Insured.</td>
</tr>
</tbody>
</table>
| At Work                                 | (a) **Permanent Employees, Contractors and Sessional Employees**: means you are actively actively performing or capable of performing (if currently unemployed) all the duties of your usual occupation with the Participating Employer and is not in receipt of, or entitled to claim, any income support benefits from any source including (but not limited to) workers’ compensation benefits, statutory transport accident benefits and disability Income benefits  

(b) **Casual Employees**: means that on the day of signing the relevant form, you are:  

(i) engaged in your full and normal duties and is working normal hours without limitation or restriction due to sickness or injury, or  

(ii) capable of performing your full and normal duties on a full-time basis (for at least 30 hours per week) even though your actual employment may not be on a full-time basis, and  

(iii) is not in receipt of and/or entitled to claim Income support benefits from any source including workers’ compensation benefits, statutory transport accident benefits and disability income benefits  

If you do not meet these requirements, you are correspondingly described as ‘not At Work’.  

**Note**: Definition of ‘At Work’ has changed over time, see ‘Other things you need to know about Death, TPD and SCI cover – At Work’ on page 23 for more information.  

| Casual Employee                         | Means you are engaged by a Participating Employer if you are paid at an hourly rate and are not entitled to be paid annual leave or sick leave in your employment. This also includes any other person not defined as a Permanent Employee, Sessional Employee or Contractor.                                                                                                                                                    |
|                                        |                                                                                                                                                                                                                                                                                                                                                                                                |
| Contractor                              | Means you have been provided a written contract of employment for a specific period by a Participating Employer and are entitled to be paid annual leave and sick leave.                                                                                                                                                                                                                       |
| Eligibility Condition 1(e) of the Policy| Means that you are an **Insured Member** who:  

• had TPD cover under the Policy immediately prior to 1 October 2019;  

• continues to have TPD cover at 1 October 2019;  

• had a TPD Incident Date prior to 1 October 2019, and  

(i) you have not lodged a TPD claim under the policy which applied prior to 1 October 2019 and “Part C” (Activities of Daily Living) of the definition of TPD applied and your claim is subsequently declined once a TPD claim is lodged; or  

(ii) you previously lodged a TPD claim under the policy which applied prior to 1 October 2019 and “Part C” (Activities of Daily Living) of the definition of TPD applied and your TPD claim was declined; or  

(iii) you previously lodged a TPD claim under the policy which applied prior to 1 October 2019 and “Part C” (Activities of Daily Living) of the definition of TPD applied, and your TPD claim is currently being considered by the Insurer as at 1 October 2019 and is subsequently declined.  

Where the above applies to you, you can apply to have your TPD claim assessed as at 1 October 2019 and subject to the TPD definition applying from that date, with the amount insured determined as at 1 October 2019.  

<p>| Date of Disability                      | Means the day the Waiting Period commences.                                                                                                                                                                                                                                                                                                                                                      |
|                                        |                                                                                                                                                                                                                                                                                                                                                                                                |
| Full-Time Equivalent (FTE)              | Unit of measure to indicate workload of an employed person. An FTE of 1.0 is equivalent to a full-time workload, whilst an FTE of 0.5 is equivalent to half of a full-time workload. See also Minimum FTE definition on page 27.                                                                                                                                                    |</p>
<table>
<thead>
<tr>
<th>Term</th>
<th>Explanation</th>
</tr>
</thead>
</table>
| Incident Date                 | **Means:**  
  (a) For Death benefits - the date you die.  
  (b) For Terminal Illness benefits - the date you are certified as being Terminally Ill. The date of certification is the later of the dates that two *Registered Medical Practitioners* certify in writing that you are Terminally Ill.  
  (c) For TPD benefits other than those covered by (d):  
    (i) the date you suffer the total and irrevocable loss of:  
      • Sight of both eyes, or  
      • Use of two limbs\(^{30}\), or  
      • Sight of one eye and use of one limb, or  
    (ii) the first day of the three consecutive month period:  
      • as described in the Standard definition of TPD (see page 21 for definition); or  
      • that requires you to be under continuous care and supervision by another adult person following the total and irrevocable loss of ‘cognitive function’.  
  (c) For TPD benefits of *Insured Members*, who meet Eligibility Condition 1(e) of the Policy, 1 October 2019. |
| Income                        | **Means:**  
  (a) if you are not self-employed: Income means your basic wage or income. Income includes your total remuneration package, salary and fees, but does not include bonuses, overtime earnings, mandated superannuation contributions, additional commissions and unearned income such as investment or interest income.  
  (b) if you are self-employed, a working director or partner in a partnership: Income means the income generated by the business or practice due to your personal exertion or activities, less your share of necessarily incurred business expenses. |
| Insured Member                | In respect of death and TPD cover it is a member of GESB or West State Super with cover greater than nil under that Policy.  
Means a member of GESB Super or West State Super with SCI cover greater than nil under the Policy. |
| Limited Cover                 | Means insurance cover which applies only in respect of events or conditions which arise entirely after the date that your cover commences.                                                                                                                                                                                                 |
| New Events Cover              | Means cover other than cover in relation to the medical condition or any directly or indirectly related conditions arising from sickness or injury which caused you to be not At Work on the date that your cover commenced.                                                                                                                                                |
| Medical Discharge or Medically Discharged | Means that a *WA Police Officer* has had their employment terminated on medical grounds under section 33ZE of the Police Act 1892 (WA) (or any replacement of it), and that termination has not been revoked.                                                                 |
| Medically Disabled Officer Compensation Scheme | Means a compensation scheme for *WA Police Officers* to compensate such persons for termination of their employment as *WA Police Officers* due to work related sickness or injury, that is passed through legislation in Western Australia.                                                                |
| Minimum FTE                   | Means at least 0.4 Full-Time Equivalent (FTE), and is working a minimum of 13 hours per week for the Employer.                                                                                                                                                                                                                             |
| Participating Employer        | Means an employer that is eligible to make contributions to GESB Super or West State Super.                                                                                                                                                                                                                                             |
| Permanent Employee           | Means you are permanently employed by a Participating Employer and are entitled to be paid annual leave and sick leave. A Board member is also to be considered to be a Permanent Employee.                                                                                                                                 |
| Previous Policy               | Means the policy in effect immediately prior to 1 October 2019.                                                                                                                                                                                                                                                                         |
| Registered Medical Practitioner | Means a legally qualified and properly registered medical practitioner. It does not include you, your employer, an employee of your employer or your immediate family or business partner.                                                                                                                                     |

\(^{30}\) Limb is defined as the whole hand or whole foot.
<table>
<thead>
<tr>
<th>Term</th>
<th>Explanation</th>
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<tbody>
<tr>
<td><strong>Sessional Employee</strong></td>
<td>Means you are an employee, but not employed under a contract of employment, who is paid for undertaking work within a specific period or an ad hoc arrangement to meet varying agency needs for a Participating Employer.</td>
</tr>
</tbody>
</table>
| **Superannuation Guarantee (SG) or SG contribution** | (a) a superannuation contribution which an employer is required to make in respect of an employee pursuant to the Superannuation Guarantee (Administration) Act 1993 (Cth), in order to avoid the imposition of the Superannuation Guarantee Charge, other than a voluntary salary sacrifice contribution; or  
(b) any similar or equivalent contribution (other than a voluntary salary sacrifice contribution) which a Participating Employer is required under law, to contribute in respect of an employee who is a member of the Plan. |
| **Terminal Illness or Terminally Ill** | Means:  
(a) Two Registered Medical Practitioners have certified, jointly or separately, that you suffer from an illness, or have incurred an injury that is likely to result in your death within a period (the certification period) that ends no more than 24 months after the date of the certification, and  
(b) At least one of the Registered Medical Practitioners is a specialist practicing in an area related to your illness or injury, and  
(c) For each of the certificates, the certification period has not ended  
The Insurer reserves the right to validate the certifications from the two Registered Medical Practitioners. |
| **WA Police Officer**            | Means a person who is entitled to leave and allowances under regulation 1304 of the Police Force Regulations 1979 (or any amendment or replacement of it).                                                                 |
| **Waiting Period**               | Means (subject to the General Condition in the SCI Policy that permits you to work for a specified number of days without the Waiting Period recommencing), the number of continuous days which must elapse before SCI benefits begin to accrue.  
The number of continuous days, as shown in the Policy Schedule, which must elapse before benefits begin to accrue.  
The Waiting Period:  
(a) commences from the date the Insured Member is first examined and certified by a Registered Medical Practitioner as Totally Disabled in relation to a condition that gave rise to a claim and the Insured Member ceased work, due to that condition; or  
(b) both commences and ceases on the date the Insured Member is Medically Discharged in respect of a WA Police Officer. |