



Insurance and your super

GESB Super and West State Super

To request this document in an alternative format such as Braille, call us on 13 43 72 or use our Live chat service at gesb.wa.gov.au.

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Important note

The information in this document forms part of the Product Information Booklets for GESB Super and West State Super, each dated 27 September 2023. 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 26 September 2023.

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 brochure 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 considered 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 review your investment objectives, financial situation and needs, and assess whether the information is appropriate for you. You should read this brochure in conjunction with the relevant Product Information Booklet and disclosure documents at gesb.wa.gov.au/brochures. You may also wish to seek advice specific to your personal circumstances from a suitably qualified adviser.



-  This icon will guide you to more information, which you may find useful, within this document.
-  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 interests in GESB Super or West State Super (as applicable), including this 'Insurance and your super' brochure, before making any decisions about the product.

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 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'.

Insurance and your super: a summary

As you know, life is full of unexpected surprises, and not always for the better. Have you considered what would happen if you weren't able to work for a period of time due to an accident, serious illness, death or disability? Could you still provide for your family or meet your financial obligations?

It's worth considering having death and disability insurance through your super.

Three types of insurance cover are available through GESB Super and West State Super. Depending on your circumstances you may be provided with cover automatically and you can also apply to tailor cover to meet your individual needs.

Type of insurance	Insurance benefit
Death cover	Provides a one-off lump-sum payment in the event of your death (and includes a terminal illness benefit ²)
Total and Permanent Disablement (TPD) cover	Provides a one-off lump-sum payment if you are totally and permanently disabled and cannot work due to that condition
Salary Continuance Insurance (SCI) cover	Provides a monthly income of up to 75% of your <i>Pre-Disability</i> Income for up to two years ³ if you become disabled due to sickness or injury. You may also be entitled to a Superannuation Top-Up Benefit

Who we are


We have over 80 years' experience managing the super savings of current and former WA public sector employees. With around 245,000 members and over \$36 billion in funds under management (as at 31 August 2023), we're the largest super fund in WA⁴. To learn more about who we are, visit gesb.wa.gov.au/about.

Eligibility for cover

If you're under the age of 65, you're automatically eligible for the three types of insurance cover we've listed above when you join GESB Super, or if you're already a West State Super member.

If you're aged 65 or over when you join GESB Super or West State Super, you'll only be eligible to apply for *Voluntary Cover*. Voluntary Total and Permanent Disablement and voluntary Salary Continuance Insurance cover aren't available if you're aged 67 or over, and voluntary Death cover isn't available if you're aged 70 or over.

Further eligibility conditions may apply – please refer to the insurance policy which is available by calling the Member Services Centre on 13 43 72.

 If you're a *Casual Employee*, different options apply to you. See the 'Insurance options for *Casual Employees*' section on page 8 for more information.

How we assess your eligibility

We assess your eligibility for insurance cover 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're eligible for insurance cover, and you haven't previously cancelled your cover or opted out, you'll be entitled to our default level of cover which we refer to as 'basic cover'.

From 1 October 2019, you won't be eligible for our basic Death cover, basic Death and TPD cover, or basic SCI cover, if you've either previously received or were eligible to receive a TPD benefit or a Terminal Illness Benefit from the Insurer as part of any past or present GESB Super or West State Super account you may have.

If you aren't eligible for basic cover, or if you'd 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 circumstances.

Your entitlement to cover is determined using the information that you or your employer have provided to us, such as your age and employment type. Your premiums (i.e. how much you are charged for your insurance) are also calculated based on your occupation and if you're male or female.

Occupations are categorised for insurance purposes, so it's important that you notify us if your occupation category changes in the future, or if it's incorrect.

 See table 3 on page 15 for information on occupation categories.

² Death cover also entitles you to claim for a terminal illness benefit. If two *Registered Medical Practitioners* have certified in writing 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.

³ See 'When your monthly benefit will cease' on page 24.

⁴ Research Solutions, Member and employer satisfaction research, 2022 and SuperRatings 2023 Annual Benchmarking Report.

Special Conditions Cover

From 12 September 2020, if you're a member of GESB Super or West State Super, and don't have insurance, we may automatically provide you with our basic level of insurance cover if you're a *Permanent Employee*, *Sessional Employee* or *Contractor* and you meet the Special Conditions Cover eligibility criteria below. The types of basic cover you can receive are (1) Death and TPD cover; and/or (2) SCI cover.

Special Conditions Cover eligibility

At the time we assess your eligibility for Special Conditions Cover, you'll only be eligible if you don't currently have that same type of cover with us, and you haven't previously chosen to opt-out of having that same type of cover with us.

What this means, is that:

- If you don't already have Death and/or TPD cover and haven't previously elected to opt-out of Death and/or TPD cover with us, you may be eligible to receive Death and TPD Special Conditions Cover
- If you don't already have SCI cover and haven't previously elected to opt-out of SCI cover with us, you may be eligible to receive SCI Special Conditions Cover

We assess your eligibility for Special Conditions Cover as at the date Special Conditions Cover is to commence (Agreed Date). You'll be eligible for one or more types of Special Conditions Cover if we've received an *SG contribution* from a *Participating Employer* in respect of your employment as a *Permanent Employee*, *Sessional Employee* or *Contractor* during the 35 days immediately prior to the Agreed Date, and as at that Agreed Date, **none** of the following apply:

- You currently hold or have previously elected to opt-out of having that type of insurance with us (as explained in the paragraph above), or
- You're eligible for basic cover that is applicable to all our members, or
- You've previously received or were eligible to receive an insurance benefit for terminal illness, TPD or SCI from us, or
- You've ceased to be a GESB Super or West State Super member, or
- You're aged 65 or over, or
- The member died, on or before the Agreed Date

Special Conditions Cover starts on the Agreed Date – which is a date set once a month by us and the Insurer. Each Agreed Date is set no later than 45 days after the previous Agreed Date. However, we may suspend the setting of an Agreed Date at our discretion. Any Special Conditions Cover that you're eligible for, will start on the first Agreed Date that happens after you first become eligible for Special Conditions Cover.

If you're eligible for Death and TPD cover, you will receive the same level of cover you would have received had you started basic cover on the Agreed Date. If you're eligible for SCI Special Conditions Cover, you will receive the same level of cover you would have received had you started basic cover on the Agreed Date, and your cover will be subject to the default *Waiting Period* of 90 days. For more information about the level and cost of Special Conditions Cover, refer to the information about basic cover in this brochure.

If you're entitled to have cover you previously held with us reinstated after Special Conditions Cover has commenced, this reinstated cover will replace your Special Conditions Cover. If your SCI cover starts on an Agreed Date as outlined above, and your *Income* supports a higher level of cover than the level of cover you were automatically provided with (see the 'Level of cover' table on page 18), you have the opportunity to increase your cover. You can increase your cover up to the lesser of \$4,200 per month and 85% of your *Income* (75% Income plus up to 10% as a superannuation benefit), without providing additional supporting evidence. If you'd like to take up this offer, you must apply within 120 days of that Agreed Date, and be *At Work* on the date your application is submitted. Any existing restrictions or limitations that apply to your existing cover will also apply to any increase.

Restrictions may apply to your Special Conditions Cover in the following circumstances:

1. If you were not *At Work* for 30 consecutive days immediately prior to receiving cover, your cover will be restricted to *Special Conditions New Events Cover* (see page 27) until you are *At Work* for 30 consecutive days
- Or
2. If you were entitled to any *SG contributions* from a *Participating Employer* in the 12 months immediately prior to receiving cover and any of these *SG contributions* were paid to a fund other than GESB Super or West State Super, your cover will be restricted to *Limited Cover* (see page 27) for at least one year, until such time after the one year period, you are *At Work* for 30 consecutive days

If both conditions 1 & 2 above apply to you, then only condition 2 will apply to your cover.

Note: the definition of *At Work* that applies to *Permanent Employees*, *Contractors* and *Sessional Employees* applies for the purposes of conditions 1 & 2 above. For more information about *Special Conditions New Events Cover*, *Limited Cover* and *At Work* conditions see, the 'Other things you need to know about Death, TPD and SCI cover' section on page 27.

If you elect to reduce or opt-out of Special Conditions Cover within 30 days of the date the cover commenced, you won't need to pay any premiums for that cover, and any premiums that were paid in respect of that cover will be refunded to your account. Accordingly, reduced or no insurance cover will be provided during that 30-day period.

If we do provide you with insurance, we will be in touch to let you know this has happened, and will let you know of any specific terms and conditions.

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:

- Our online member portal, Member Online – login or register at mol.gesb.wa.gov.au
- Your member statement or online statement summary
- The letter we send you when 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.

Levels of insurance cover

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

1. **Basic cover** – this is the default level of cover that's provided to eligible members. The default amount of cover is explained in the table below
2. **Voluntary Cover** – this is cover that needs additional underwriting by the Insurer and allows you to increase your level of insurance cover above basic cover to suit your own circumstances (subject to meeting eligibility criteria and approval by the Insurer)
3. **Special Conditions Cover** – this is automatically provided to eligible members at the same level as basic cover. The default amount of cover is explained in the table below

See 'Special Conditions Cover' from page 4 onwards for more information about Special Conditions Cover including eligibility criteria.

An overview of Death, TPD insurance and SCI for eligible members

	Death and Total & Permanent Disablement	Salary Continuance Insurance
Who is eligible for basic cover?	Members receiving <i>SG contributions</i> and aged less than 65. Eligibility conditions differ for <i>Casual Employees</i>	
Basic cover is provided automatically when we receive your first SG contribution	Cover of up to \$200,000, depending on your age	Up to \$4,200 per month determined by the number of hours per week that you work
Special Conditions Cover is provided automatically once you're eligible	Cover of up to \$200,000, depending on your age	Up to \$4,200 per month determined by the number of hours per week that you work
Changing your cover	You can apply to: <ul style="list-style-type: none"> • Increase or decrease • Opt out • Fix the amount of cover 	You can apply to: <ul style="list-style-type: none"> • Increase or decrease • Opt out • Change your <i>Waiting Period</i>
Maximum insurance cover	\$10 million for Death \$3 million for TPD	The lesser of 85% of your <i>Income</i> (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 (or in certain listed occupations in the Blue and Heavy Blue category), your cover will be limited to the lesser of \$15,000 per month ⁶ and 85% of your <i>Income</i> (75% income plus up to 10% as a superannuation benefit)

⁵ See 'When your monthly benefit will cease' on page 24.


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 \$15,000, 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', 'Security Officers and Guards', 'Miners', 'Mining Support Workers and Drillers Assistants', 'Power Generation Plant Operators', 'Deck 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.

Death and Total & Permanent Disablement

Salary Continuance Insurance

Premiums based on occupation category	There are five categories based on occupation and employment duties: <ul style="list-style-type: none"> • White Collar • Light Blue Collar • Blue and Heavy Blue Collar • Hazardous occupations • Members who meet salary and other eligibility criteria can apply to join the Professional and Executive occupation category⁷ 	
Waiting period	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 <i>Waiting Period</i> for any benefit payment is 90 days. You can change your <i>Waiting Period</i> to 30, 60, 120 or 180 days, which will affect the premium you pay – see page 20 for more information
Cover Expiry Age	<ul style="list-style-type: none"> • Death cover expires at age 70 • TPD cover expires at age 67 	<ul style="list-style-type: none"> • SCI cover expires at age 67

See 'Special Conditions Cover' from page 4 onwards for information about eligibility for Special Conditions Cover.

 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 8.

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 and asking for a copy of our '**Insurance application**' form. Insurance cover will be on the terms offered by the Insurer.

When does basic cover start?

If you're 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, as 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 and don't have cover, we may provide you with Special Conditions Cover subject to certain eligibility criteria. See 'Special Conditions Cover' from page 4 onwards.

If you're 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 that 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*:

- If you were not *At Work* (see definition on page 27) on the day that your cover started, your insurance will be '*New Events Cover*' (see page 27), 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 conditions that are either directly or indirectly related to the sickness or injury, which caused you not to 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 27) for at least 1 year and until such time as you are *At Work* for at least thirty (30) consecutive days after the first year has ended

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 1 year from the date your cover commences and until such time as you are *At Work* for at least thirty consecutive days after the first year has ended.

 See the 'Other things you need to know about Death, TPD and SCI cover' section on page 27 for more information on *Limited Cover*, *At Work* and *New Events Cover*.

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. See page 8 for more information on the Professional and Executive occupation category.

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 super account on a monthly basis. The cost of insurance cover varies according to your age, if you're male or female, occupation category, type and amount of cover and, for SCI, your *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 13. For SCI cover costs, see page 21.

The cost of your insurance is deducted from your account

The cost of your insurance will be automatically deducted from your GESB Super account on a monthly basis, unless you opt out of the default insurance cover or you cancel your cover with us. GESB Super claims a tax deduction on the insurance premiums. We pass on the benefit of the tax deduction to your account annually or at the time you exit the scheme.

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're eligible for automatic 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 our online member portal, 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

🔍 Read below for more information – or see page 9 for Death and TPD cover, or page 18 for SCI cover.

1. Fix your level of cover

You can apply to:

- Fix your Death and TPD cover at the level of cover you're automatically eligible for (provided you are aged under 61)
- Vary your 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. See page 8.

If you fix the level of your Death and TPD cover, your Death and TPD Amount Insured will not change until you turn 61, and your insurance premium will generally increase as your age increases. When you turn 61, your TPD Amount Insured will reduce annually on a lineal basis, until you reach age 65. From age 65 until the Cover Expiry Age, your TPD Amount Insured will be \$10,000. At the Cover Expiry Age (see page 6), the TPD and Death Amount Insured will reduce to zero. For more information, see page 11.

2. Reduce or opt out of part or all of your insurance cover

You can choose to reduce or opt out of either 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 67 (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
- Your insurance cover may be subject to loadings or exclusions
- 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 our online member portal, Member Online at mol.gesb.wa.gov.au
- Call your Member Services Centre on 13 43 72 to cancel over the phone or ask for a copy of the 'Insurance variation' form so you can cancel in writing

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

3. Transfer your insurance cover from another fund or retail policy

If you have death, TPD or SCI insurance cover under an insurance policy held through another superannuation fund or an individual retail policy (*Previous Policy*), you can apply to transfer that cover to GESB's Insurer. To do so, you must complete an 'Individual insurance transfer declaration' form and provide evidence of your cover held with the other fund or under the retail policy.

Full terms and conditions regarding transferring your insurance cover are available on the 'Individual insurance transfer declaration' form at gesb.wa.gov.au/forms or by calling your Member Services Centre on 13 43 72.

Your application to transfer insurance will only be approved if it meets the eligibility criteria required by GESB's Insurer and GESB.

Transferred cover will be provided based on the terms, conditions, premiums and occupation categories provided under the relevant GESB policy. However, any non-standard terms, loadings, restrictions or exclusions that applied to you under your *Previous Policy*, will apply to your cover held through the GESB policy.

Transferred death and TPD cover will be fixed *Voluntary Cover*, and any existing death, TPD or death and TPD cover you hold through the GESB policies will also become fixed cover on the *Date of Transfer*.

Transferred SCI cover will have the same *Waiting Period* and benefit period as applied under your previous SCI policy. Where the *Waiting Period* is not available under the GESB policies, the *Waiting Period* that applied to the transferred SCI cover will be rounded up to the next longest *Waiting Period* available under the GESB policies.

There is a limit to the maximum amount of cover that can be transferred. Further, the combined total of your transferred and existing cover cannot exceed the maximum benefit limit for that type of insurance.

No benefit will be payable with respect to transferred cover if the insurance held under the *Previous Policy* is not cancelled.

4. 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.

Professional	Executive
You earn a gross income of at least \$100,000 p.a. ⁸	
You're 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	
You hold a tertiary qualification or are a member of a professional institute or body approved by the Insurer ¹⁰	You're part of the Executive Management team of your employer ¹¹


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

Occupation category factors are shown in table 3, page 15 for Death and TPD, and table 5, page 23 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

choose to change it in the future). See table 1 on page 10. Please note that your premiums will generally increase as your age increases.

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

 If you'd like to opt in or find out more about Professional and Executive insurance, visit gesb.wa.gov.au/forms and download our 'Professional and Executive occupation category application' form or you can call your Member Services Centre on 13 43 72.

5. Insurance options for Casual Employees

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

Generally speaking, to be eligible to opt in for basic cover you must be:

- Employed on a casual basis
- Receiving *SG contributions* from your employer, and
- Aged 64 and under

You'll be eligible for basic cover, without the need for a medical assessment, provided you opt in within 90 days of us receiving your first *SG contribution* from your employer and you meet the *At Work* requirement (see definition on page 27).

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

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 brochure. 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, and don't have cover, we may provide you with Special Conditions Cover subject to certain eligibility criteria. See 'Special Conditions Cover' from page 4 onwards. If you otherwise 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.

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.

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 10, 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.

Employment status <i>Full-Time Equivalent (FTE)</i>	Basic level of cover (per month) for SCI
At least 0.4 FTE	\$2,000
Less than 0.4 FTE	\$1,600

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

Checklist and next steps

- **Check your entitlement and details of cover**

We recommend that you read all the information in this brochure and make note of all the information that is 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 right cover you need – for example, that your occupation category hasn't changed and that you're not paying for cover you no longer need

- **Revisit your insurance often**

Review your insurance needs as your life changes to ensure you have the right level of cover. Changes might include starting a new job or receiving a pay rise, or a change in family and household circumstances, such as having children or buying a house

- **Make changes to your cover as you need**


You can do this through Member Online at mol.gesb.wa.gov.au or by calling your Member Services Centre on 13 43 72 and asking for an 'Insurance variation' or 'Insurance application' form

Death and Total & Permanent Disablement insurance

Although it's not something we like to think about, it's important to consider cover if you were to pass away or were no longer able to work due to illness or disability. Death and Total & Permanent Disablement (TPD) insurance cover provides you or your estate with a lump sum benefit if you die, you're 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 met.

Please be aware that although you may satisfy the Insurer's definition of eligibility for payment of a terminal illness, TPD or SCI benefit, we're unable to pay these amounts to you unless and until a 'condition of release' is met and we've processed the claim (see page 16). This is because legislative requirements restrict the circumstances in which such benefits can be paid, and this can only be actioned once the conditions that are 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 Automatic cover

Subject to eligibility requirements discussed in this brochure, the level of your automatic cover for Death and for TPD insurance is based on your current age. Automatic cover includes basic cover and Special Conditions Cover.

Table 1: Automatic Death and TPD cover

Your current age	Death cover	TPD cover
	Column A	Column B
15–45	\$200,000	\$200,000
46	\$190,000	\$190,000
47	\$180,000	\$180,000
48	\$170,000	\$170,000
49	\$160,000	\$160,000
50	\$150,000	\$150,000
51	\$140,000	\$140,000
52	\$130,000	\$130,000
53	\$120,000	\$120,000
54	\$110,000	\$110,000
55	\$100,000	\$100,000
56	\$90,000	\$90,000
57	\$80,000	\$80,000
58	\$70,000	\$70,000
59	\$60,000	\$60,000
60	\$50,000	\$50,000
61	\$50,000	\$40,000
62	\$50,000	\$30,000
63	\$50,000	\$20,000
64	\$50,000	\$10,000

Note: the table above outlines the level of automatic cover provided if you are eligible for basic Death and TPD cover. If you have cover in place prior to turning age 65, cover will continue until you reach your Cover Expiry Age or another termination event occurs. For more information, see 'Reasons why your Death cover will cease' and 'Reasons why your TPD cover will cease', on page 15.

Changing your level of Death and/or TPD cover

You can elect to:

- Increase your Death cover and/or TPD cover (this includes if you're eligible to apply for cover, but not eligible for basic cover or Special Conditions Cover)
- Decrease or cancel your Death cover and/or TPD cover
- Fix the level of Death and TPD cover

Increasing your Death and/or TPD cover at any time

If you'd like to increase your insurance cover, you'll need to provide medical and/or other evidence for assessment by the Insurer. This includes if you'd like to apply for cover, but you aren't eligible for basic cover or Special Conditions Cover.

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

Decreasing or cancelling your level of Death and/or TPD cover

You have the option of cancelling or decreasing your level of insurance cover at any time. However, if in the future you'd like to reinstate or increase your insurance cover, you can only do so subject to:

- You being under the age of 67 (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 that's been requested by the Insurer

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

Fixing your level of Death and TPD 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 11.

If you have basic cover or Special Conditions Cover for Death and TPD, you can elect to fix your current *Amount Insured* at any time prior to your 61st birthday – by written request to us – again subject to the table on page 11.

If your cover is fixed, your *Amount Insured* will work as follows:

Death Amount Insured	TPD Amount Insured
Your <i>Death Amount Insured</i> will remain the same on each birthday until cover ceases under the policy	<ol style="list-style-type: none"> From age 15 to 60 (inclusive): your <i>TPD Amount Insured</i> will remain the same on each birthday From age 61 to 64 (inclusive) the following Cover reductions will apply: <ol style="list-style-type: none"> At age 61 your <i>TPD Amount Insured</i> will be four fifths (4/5) times the <i>TPD Amount Insured</i> you held on the date before turning age 61 At age 62 your <i>TPD Amount Insured</i> will be three-quarters (3/4) times the <i>TPD Amount Insured</i> you held on the date before turning age 62 At age 63 your <i>TPD Amount Insured</i> will be two-thirds (2/3) times the <i>TPD Amount Insured</i> you held on the date before turning age 63 At age 64 your <i>TPD Amount Insured</i> will be one-half (1/2) times the <i>TPD Amount Insured</i> you held on the date before turning 64 <p>For each of (a) to (d) above, where the result would be an amount not a multiple of \$10,000, then the TPD Insured Amount will be the result of the calculation rounded up to the nearest multiple of \$10,000</p> From age 65 until attaining the Cover Expiry Age, your <i>TPD Amount Insured</i> will be \$10,000. Your <i>TPD Amount Insured</i> will reduce to zero at the Cover Expiry Age

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

Death Amount Insured	TPD Amount Insured
<ol style="list-style-type: none"> From age 15 to 45 (inclusive): your <i>Death Amount Insured</i> will remain the same on each birthday From age 46 to 64 (inclusive): <ol style="list-style-type: none"> If your <i>Death Amount Insured</i> is greater than the default level of Death cover for your age according to table 1 'Automatic Death and TPD basic cover', your <i>Death Amount Insured</i> will reduce by \$10,000 on that birthday, or If your <i>Death Amount Insured</i> is equal to or less than the default level of Death cover for your age according to table 1 'Automatic Death and TPD basic cover', your <i>Death Amount Insured</i> will remain the same on that birthday From age 65 to Cover Expiry Age (inclusive): <ol style="list-style-type: none"> If your <i>Death Amount Insured</i> is greater than \$50,000 on your birthday, the <i>Death Amount Insured</i> will reduce by \$10,000 on that birthday, or If your <i>Death Amount Insured</i> is equal to or less than \$50,000 on your birthday, the <i>Death Amount Insured</i> will remain the same on that birthday 	<ol style="list-style-type: none"> From age 15 to 45 (inclusive): your <i>TPD Amount Insured</i> will remain the same on each birthday From age 46 to 60 (inclusive): <ol style="list-style-type: none"> If your <i>TPD Amount Insured</i> is greater than the default level of TPD cover for your age according to table 1 'Automatic Death and TPD Basic cover', your <i>TPD Amount Insured</i> will reduce by \$10,000 on that birthday, or If your <i>TPD Amount Insured</i> is equal to or less than the default level of TPD cover for your age according to table 1 'Automatic Death and TPD basic cover', your <i>TPD Amount Insured</i> will remain the same on that birthday From age 61 to 64 (inclusive) the following reductions will apply: <ol style="list-style-type: none"> At age 61 your <i>TPD Amount Insured</i> will be four fifths (4/5) times the <i>TPD Amount Insured</i> you held on the date before turning age 61 At age 62 your <i>TPD Amount Insured</i> will be three-quarters (3/4) times the <i>TPD Amount Insured</i> you held on the date before turning age 62 At age 63 your <i>TPD Amount Insured</i> will be two-thirds (2/3) times the <i>TPD Amount Insured</i> you held on the date before turning age 63 At age 64 your <i>TPD Amount Insured</i> will be one-half (1/2) times the <i>TPD Amount Insured</i> held on the date before turning age 64 <p>For each of (a) to (d) above, where the result would be an amount not a multiple of \$10,000, then the TPD Insured Amount will be the result of the calculation rounded up to the nearest multiple of \$10,000.</p> From age sixty-five (65) until attaining Cover Expiry Age your <i>TPD Amount Insured</i> will be \$10,000. Your <i>TPD Amount Insured</i> will reduce to zero at the Cover Expiry Age

If you are under age 61, you can apply to:

- Fix your Death and TPD cover at the level for which you're 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're a *Casual Employee* who opts in for cover, then the value of your Death and TPD cover will be fixed automatically unless you choose to change it again in the future.

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

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:

- His Death and TPD cover is \$180,000 for each year he is under the age of 61 (unless John chooses to change this value in the future)
- From age 61, his TPD cover reduces linearly at each birthday, to become \$10,000 at age 65. His TPD Cover will then remain at \$10,000 until he turns age 67, when it will reduce to zero
- His Death cover will remain fixed at \$180,000 until age 70 (unless John chooses to change this value in the future)

How do I change my level of Death and/or TPD cover?


The table on page 13 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're 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 for them to finalise their assessment. All Death and TPD insurance benefits are paid to your super account and can be accessed when a condition of release is met.

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

Type of change (Death/TPD cover)	How to make the change	Assessment required by the Insurer
Increasing your cover <ul style="list-style-type: none"> In excess of any existing cover If you are a <i>Casual Employee</i> who opted in for cover 	Apply through Member Online at mol.gesb.wa.gov.au or complete our 'Insurance application' form	Yes
Decreasing or cancelling 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, if you're male or female, occupation category, type and amount of cover. If you need to be assessed by the Insurer, the Insurer may also take other things into account.

Occupations are categorised into broad groupings for insurance purposes and are shown in table 3 on page 15.

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 at any time in the future.

It's important you do this, so you have the correct cover and are being charged the correct premium.

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:

$$\begin{array}{c}
 \text{Level of benefit (per \$1,000 of cover)} \\
 \times \\
 \text{Age and male or female based annual premium rate} \\
 \times \\
 \text{Occupation category factor}^{12}
 \end{array}$$

Example

Carly is a dental assistant¹³ 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:

	How many \$1,000s of cover	Age and male or female-based premium rate	Occupation category factor	Annual premium ¹⁴
Reference	Cover amount divided by \$1,000	Annual premium rate from table 2, page 14	From table 3, page 15	
Carly's Death and TPD cover premium based on her current age	\$200,000 / \$1,000 = 200	X \$0.56	X 1.050	= \$117.60 (or \$9.80 per month)
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 15 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 2: Annual premium rates per \$1,000 Amount Insured

Your current age	Death only		TPD only		Death and TPD*	
	Males	Females	Males	Females	Males	Females
	Column A	Column B	Column C	Column D	Column E	Column F
15	0.26	0.17	0.06	0.04	0.32	0.21
16	0.31	0.21	0.08	0.08	0.39	0.29
17	0.36	0.24	0.15	0.10	0.51	0.34
18	0.43	0.28	0.15	0.08	0.58	0.36
19	0.50	0.30	0.20	0.10	0.70	0.40
20	0.56	0.30	0.17	0.11	0.73	0.41
21	0.57	0.30	0.22	0.10	0.79	0.40
22	0.57	0.29	0.22	0.08	0.79	0.37
23	0.55	0.28	0.24	0.09	0.79	0.37
24	0.53	0.25	0.24	0.12	0.77	0.37
25	0.47	0.24	0.22	0.14	0.69	0.38
26	0.45	0.24	0.21	0.15	0.66	0.39
27	0.41	0.25	0.21	0.15	0.62	0.40
28	0.43	0.27	0.21	0.16	0.64	0.43
29	0.43	0.28	0.24	0.19	0.67	0.47
30	0.45	0.30	0.27	0.21	0.72	0.51
31	0.45	0.31	0.28	0.25	0.73	0.56
32	0.47	0.33	0.32	0.29	0.79	0.62
33	0.47	0.36	0.34	0.35	0.81	0.71
34	0.47	0.37	0.40	0.42	0.87	0.79
35	0.49	0.41	0.46	0.46	0.95	0.87
36	0.52	0.43	0.53	0.51	1.05	0.94
37	0.51	0.46	0.64	0.54	1.15	1.00
38	0.58	0.52	0.75	0.63	1.33	1.15
39	0.66	0.54	0.84	0.73	1.50	1.27
40	0.69	0.61	0.93	0.85	1.62	1.46
41	0.77	0.64	1.08	0.98	1.85	1.62
42	0.85	0.68	1.27	1.11	2.12	1.79
43	0.97	0.69	1.45	1.20	2.42	1.89
44	1.11	0.74	1.66	1.42	2.77	2.16
45	1.25	0.82	1.91	1.66	3.16	2.48
46	1.41	0.88	2.20	1.93	3.61	2.81
47	1.59	0.96	2.56	2.25	4.15	3.21
48	1.70	1.02	2.77	2.50	4.47	3.52
49	1.79	1.09	2.99	2.68	4.78	3.77
50	1.91	1.14	3.24	2.83	5.15	3.97
51	2.01	1.22	3.45	3.03	5.46	4.25
52	2.13	1.29	3.71	3.43	5.84	4.72
53	2.30	1.49	4.35	3.93	6.65	5.42
54	2.47	1.59	5.08	4.57	7.55	6.16
55	2.65	1.71	5.94	4.94	8.59	6.65
56	2.86	1.84	6.95	5.58	9.81	7.42
57	3.13	1.97	8.11	6.33	11.24	8.30
58	3.48	2.21	9.28	6.80	12.76	9.01
59	3.93	2.46	10.30	7.30	14.23	9.76
60	4.52	2.68	11.46	7.67	15.98	10.35
61	5.20	2.93	12.62	8.21	17.82	11.14
62	5.78	3.18	13.92	8.78	19.70	11.96
63	6.43	3.44	15.36	9.52	21.79	12.96
64	7.15	3.71	17.00	10.28	24.15	13.99
65*	7.85	4.01	18.81	11.09	26.66	15.10
66*	8.54	4.28	20.82	11.97	29.36	16.25
67*	9.28	4.56	N/A	N/A	9.28 (Death Only)*	4.56 (Death Only)*
68*	10.18	4.98	N/A	N/A	10.18 (Death Only)*	4.98 (Death Only)*
69*	11.16	5.40	N/A	N/A	11.16 (Death Only)*	5.40 (Death Only)*

* Death only cover ceases at age 70. TPD cover ceases at age 67. For ages 67 and over the amounts in the Death and TPD columns are for Death cover only.

Note: the rate used for Carly's example on page 13 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 let you know of any changes on our website at gesb.wa.gov.au or in your member statement. We will give you at least 30 days' written notice of any premium increases.

Contributions Tax Rebate

Taxed schemes, like GESB Super, can claim certain tax deductions from their assessable income, which reduces the tax liability of the fund. GESB Super credits this tax benefit to your account as a Contributions Tax Rebate. The rebate is 15% of the administration, insurance and other relevant fees charged to your account. We reimburse this tax benefit to you annually or when you leave the scheme.

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

Occupation categories	Death only / TPD only / Death and TPD combined
Category 1 – White collar occupations e.g. accounting clerks, office managers, physiotherapists, counsellors, secondary school teachers, special needs teachers	0.830
Category 2 – Light blue collar occupations e.g. dental assistants, registered and qualified child care workers, qualified cooks	1.050
Category 3 – Blue and heavy blue collar occupations e.g. electricians, commercial cleaners, registered nurses	1.075
Category 4 – Hazardous occupations e.g. police officers, fire fighters, prison officers	1.100
Category 5 – Professional and Executive subject to the eligibility criteria shown on 7	0.664

Note: the rate used for Carly's example on page 13 has been highlighted in this table.

Reasons why your Death cover will cease

Your Death 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 70
- You cease to be a member of GESB Super or West State Super
- You die
- We receive your cancellation of cover
- 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 paid¹⁵
- The insurance policy is terminated by us or the Insurer

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 67
- You cease to be a member of GESB Super or West State Super
- You die
- We receive your cancellation of cover
- 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 paid¹⁶
- Your claim for TPD is paid
- The insurance policy is terminated by us or the Insurer

Continuation of Death and/or TPD 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.

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.

Your death benefit

Once we've received formal notification of death¹⁷, 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.

For accounts where no valid binding death nomination exists, once 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 those accounts where a valid binding death nomination is in place, investment switches are not permitted.

Once our Insurer has approved a Death claim, the cover amount is paid to your super account. How this is paid to beneficiaries will depend on if you have a valid binding death nomination in place or not.

No binding death nomination in place

If there is no valid binding death nomination in place, we will send a letter to your estate. This will be the executor named in your will, or if there is no will, the administrator appointed under Letters of Administration. We'll explain the documentation we will need to process the claim. It often happens that the insurance component of the final benefit is paid to your super account relatively early in the process. Once it's been determined that the insurance benefit is payable, we'll write to your estate to let them know how much the entitlement is, and let them know the process they should follow when they want to apply for payment of your superannuation benefit. The insured component of your benefit is treated in the same way as your super balance.

Binding death nomination in place

If there is a valid binding death nomination in place, payment will be made directly to the people you have nominated without need for formal Grant of Probate or Letters of Administration (unless you nominate a legal personal representative).

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.


Claiming your TPD benefit

To claim against your TPD cover you must meet the definition of Total and Permanent Disablement (see definitions adjacent). You're 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 for them to complete 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. Also, any delays could affect your complaint being addressed by an appropriate external dispute resolution body – should you have one in the future. For more information, see the 'Making a complaint' section on page 31.

If you're 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.

Where Total and Permanent Disablement occurs

If you make a TPD claim, the Insurer will make an assessment based upon the definition of Total and Permanent Disablement that applies to your cover. Payment of an insured TPD benefit is dependent upon you meeting the definitions.

Any insured benefit will be paid to your super account and you will be able to access this benefit once you meet a condition of release (i.e. we are satisfied you have ceased to be gainfully employed due to ill health and are unlikely to ever engage in gainful employment again, for which you are reasonably qualified by education, training or experience). This benefit can also be rolled into a complying pension, like our Retirement Income Pension, or annuity.

Please be aware that although you may satisfy the Insurer's definition of eligibility for payment of a Death (including Terminal Illness), TPD or SCI benefit, we're unable to pay these amounts to you unless and until a 'condition of release' is met. This is because legislative requirements restrict the circumstances in which such benefits can be paid, and this will only happen when the conditions that have been set out in the legislation have been met.

If you meet *Eligibility Condition 1(e) of the Policy*, you can apply to us to have your TPD claim assessed as at 1 October 2019. This will be assessed under the definition of TPD in the Policy effective 1 October 2022 and not under the definition of TPD that was in place immediately before 1 October 2019. Any amount that might become payable will be determined with an *Incident Date* and *Amount Insured* as at 1 October 2019.

Please contact us on 13 43 72 if you need more information.

¹⁷ Certified copy of Death Certificate, Coroner's report, autopsy report, inquest finding, a medical certificate completed by a Registered Medical Practitioner or we identify this has occurred via the WA Registry of Births, Deaths and Marriages.

TPD definition

Total and Permanent Disablement – if you're 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 Disablement – 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 limbs, 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.

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 Policy that was effective immediately before 1 October 2019, 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 organisation¹⁸,
 - from participation in declared or undeclared war or participation in 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 increase¹⁹, 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.

¹⁸ Where you are enrolled in the Australian Defence Force Reserves, this exclusion only applies when you have been called up for *Active Service*.

¹⁹ 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 two years if you become disabled due to injury or sickness. Your benefit is paid after a *Waiting Period* has been satisfied.

Where the *Date of Disability* is on or after 19 June 2021, if your *Waiting Period* ends prior to attaining age 67, your monthly benefit is provided for the lesser of 2 years, and 6 months after attaining age 67.

Where the *Date of Disability* is on or after 19 June 2021, if your *Waiting Period* ends on or after attaining age 67, your monthly benefit is provided for 6 months.

Where the *Date of Disability* is on or after 1 October 2019 but before 19 June 2021, and your *Waiting Period* ends before you reach 65 years of age, your monthly benefit is provided for up to the lesser of two years, and 6 months after the age of 65. This is subject to continuing to satisfy your insurance policy terms and conditions²⁰. If your *Waiting Period* ends either when you are 65 years of age, or after you've reached 65 years of age, your 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 65²⁰.

SCI benefits are assessed on your *Pre-Disability Income* which is generally 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'd like insurance cover, you can choose to opt in, subject to some conditions.

See 'Insurance options for *Casual Employees*' on page 8 for more information.

Basic cover and Special Conditions Cover

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

If you're eligible for Special Conditions Cover, your level of cover for SCI is based on your *FTE* on the date Special Conditions Cover commences (i.e. the Agreed Date).

Employment status <i>Full-Time Equivalent (FTE)</i>	Level of cover (per month)
Full time (1.0 <i>FTE</i>)	\$4,200
Between 0.8 and 0.99 <i>FTE</i>	\$3,200
Between 0.6 and 0.79 <i>FTE</i>	\$2,400
Between 0.4 and 0.59 <i>FTE</i>	\$2,000
Less than 0.4 <i>FTE</i> (i.e. less than two days a week)	\$1,600

Notes:

- Casual Employees* with an *FTE* of 0.4 and above will be restricted to \$2,000 per month.
- The level of cover in the table above is inclusive of your SCI income and superannuation benefit. Refer to the 'Limits on *Voluntary Cover*' section below.

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-Disability Income* (SCI income) plus
- Up to 10% of your *Pre-Disability Income*, which represents a component for superannuation

However, if your monthly 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 24 for more information.

Note: these amounts will never exceed the maximum cover values of \$30,000 per month or \$15,000 per month for: Category 4 – Hazardous occupations and certain listed Category 3 – Blue and Heavy Blue collar occupations.

²⁰ See 'When your monthly benefit will cease' on page 24.

Limits on benefits payable

Regardless of whether you have *Voluntary Cover*, *Special Conditions 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-Disability Income* which excludes superannuation, plus
 - the Superannuation Top-up Benefit (refer to page 24 for more information)

Note: these amounts will never exceed the maximum cover values of \$30,000 per month or \$15,000 per month for Category 4 – Hazardous occupations and certain listed Category 3 – Blue and Heavy Blue collar occupations.

Work out how much SCI cover you want

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

If you're 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 that you'd receive is actually less than 75% of your *Income* – so you may need to increase it.

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

It's also possible that you have insurance with other super funds or insurers. We strongly recommend you review your insurance situation regularly to ensure that you have enough cover for your own circumstances, or you avoid paying for insurance that you don't need. You may also have a reduction in benefits or no payment on claim because of certain offsets being applied. For examples of offsets see 'Reductions to the amount of SCI benefits payable' on page 23.

To work out how much cover you might need as part of your super, use the calculator on page 19. We've included an example to help you.

Example

Sally is aged 39 and earns \$66,000 per annum. She wants her SCI cover to be enough to cover herself for the full 75% of her current *Income*, plus contribute 10% to her super. It's important to note that Sally may want to change her SCI cover in the future if her salary either increases or decreases.

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

Insurance cover calculation

		Sally	You
Annual <i>Income</i>	A	\$66,000	\$
Monthly <i>Income</i> : (A \$66,000) divided by 12	B	\$5,500	\$
What % of monthly <i>Income</i> do you want paid to you? (The maximum is 75%)	C	75%% maximum of (75%)
Multiply B (\$5,500) by C (75%)	D	\$4,125 per month	\$ per month
What % of monthly <i>Income</i> do you want paid to your super account? (The maximum is 10%)	E	10%% maximum of (10%)
Multiply B (\$5,500) by E (10%)	F	\$550 per month	\$ per month
Add D (\$4,125) and F (\$550) together	G	\$4,675 per month	\$ per month
Monthly insurance amount (G) rounded down to closest \$200	H	\$4,600 per month	\$ per month

Why not work it out for yourself? Whether you're a West State Super or GESB Super member, you can fill out 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 below:

Maximum SCI Amount Insured (per month) =	Your annual Income	x 0.070833
Fill in your details here:	\$	x 0.070833
Result rounded down to the nearest even \$200	\$	

Note: the 0.070833 figure used in the table is derived by combining elements 'B', 'D' and 'F' of the 'Insurance cover calculation' together (1/100*85/12).

Changing your level of SCI cover

- You can choose to decrease your SCI cover by increments of \$200 per month (or you can opt out altogether)
- You can apply to increase your SCI cover by increments of \$200 per month up to an *Amount Insured* – which is the lesser of:
 - your SCI benefit (i.e. 75% of your *Income*) plus a superannuation component of up to 10% of your *Income*, and
 - \$30,000 per month (or a lower amount, as determined by the Insurer based on your occupation)

The purchase of *Voluntary Cover* above the basic level of cover (including any extra *Voluntary Cover* where you have previously opted out or reduced your cover), is subject to approval by the Insurer unless as outlined in the 'Increasing your level of cover without providing medical information' section below. The Insurer may ask for more information in order to assess your application, which may include medical evidence or proof of *Income*. If approved, your extra *Voluntary Cover* begins from the date of the Insurer's letter of acceptance unless otherwise specified. Your cover may be approved subject to loadings or exclusions. Your application for *Voluntary Cover* could also be declined.

Increasing your level of SCI cover without providing medical information

Normally when you apply for more insurance, your application is assessed by the Insurer and you may have to provide extra medical information. But this may not apply in the following instance:

Within 120 days of your cover commencing

If you receive basic cover of less than \$4,200 per month but your *Income* supports a higher level of basic cover (see the 'Level of cover' table on page 18), you can apply to increase your cover. This can be increased up to the lesser of \$4,200 per month and 85% of your *Income* (75% income plus up to 10% as a superannuation benefit) without having to provide any medical or other evidence. You must be *At Work* (see definition on page 27) on the day you complete the application. However, you need to apply within 120 days of your cover commencing.

Casual Employees who opt in for basic cover, can only increase cover by completing an 'Insurance application' and applying for extra *Voluntary Cover*. Call your Member Services Centre on 13 43 72 for a copy of this form. Your application is subject to approval by the Insurer.

If we provide you with Special Conditions Cover, you may also be able to increase your level of cover without providing medical information. See 'Special Conditions Cover' from page 4 onwards to understand your options, as different rules apply.

Increasing your SCI cover at any time

You'll need to provide medical and/or other evidence for assessment by the Insurer if you're not eligible for the options above and want to increase your cover.

The maximum benefit payable is capped at the *Amount Insured*. Your *Amount Insured* you apply for cannot be greater than the lesser of:

- your SCI income per month (i.e. 75% of *Pre-Disability Income*) plus a superannuation component of up to 10% your *Pre-Disability Income*, and
- \$30,000 per month (or \$15,000 per month for Category 4 – Hazardous occupations and certain listed Category 3 – Blue and Heavy Blue collar occupations²¹)

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 SCI cover

You can choose to decrease your level of insurance cover. However, if you'd later like to reinstate or increase your insurance cover, you can only do so subject to the following: you being under the age of 67, by completing a full 'Insurance application', and 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.

What are the Waiting Periods?

The *Waiting Period* for SCI starts from the date you are first examined and certified by a *Registered Medical Practitioner* that you are totally disabled as a result of the condition you have claimed, and that you have ceased work due to that condition.

You're able to make a claim as soon as you meet the medical requirements, but there is a *Waiting Period* before you're entitled to receive a benefit payment approved by the Insurer. The default *Waiting Period* for SCI payments is 90 days, but you can choose from four other options: 30, 60, 120 and 180 days. This may affect the premium you pay.

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 finalise their assessment.

How to make changes

The table below shows you how to either increase or decrease your level of SCI cover, or change your *Waiting Period* and which form to use. It also shows whether or not you need approval from the Insurer.

²¹ 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 \$15,000, 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', 'Security Officers and Guards', 'Miners', 'Mining Support Workers and Drillers Assistants', 'Power Generation Plant Operators', 'Deck 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.

Change	How to make the change	Approval required from the Insurer
Increasing SCI cover up to \$4,200 per month (you must apply within 120 days of the date cover commenced)	Apply through Member Online at mol.gesb.wa.gov.au or complete our 'Insurance variation' form	No
Increasing SCI cover <ul style="list-style-type: none"> If total cover will exceed \$4,200 per month; or more than 120 days after your cover commenced; 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 <i>Waiting Period</i> 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 <i>Waiting Period</i> 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 depending to your age, if you're male or female, occupation category, amount of cover and *Waiting Period* selected. If you need to be assessed by the Insurer, they may also take other things into consideration.

Your premium is calculated using the equation below²² and will be deducted from your super account each month.

$$\begin{array}{c}
 \text{Level of benefit (per \$1,000 of monthly benefit)} \\
 \times \\
 \text{Age and male or female based annual premium rate} \\
 \times \\
 \text{Occupation category factor} \\
 \times \\
 \text{Waiting Period factor}
 \end{array}$$

Example

Ben is aged 38 and earns \$80,000 a year as a Registered Nurse²³. 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	How many \$1,000s of cover	Age and male or female based premium rate for SCI	Occupation category factor for SCI	Waiting Period factor	Annual premium ²⁴
	Divide SCI cover amount per month by \$1,000	Annual premium rate from table 4, Column A	From table 5, page 23	From table 6, page 23	
Ben's SCI total cover	\$4,200 / \$1,000 = 4.2 per month	X 24.45	X 1.75	x 1.00	= \$179.71 (or \$14.98 per month)
Fill in your details here	\$ / \$1,000 = per month	x \$	x	x	= \$

²² 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.

²³ Registered Nurses are classified as category 3 – Blue/Heavy Blue occupation, see table 5 on page 23.

²⁴ 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 4: Annual premium rate for SCI (per \$1,000 monthly benefit)

Your current age	Males	Females	Your current age	Males	Females
	Column A	Column B		Column A	Column B
15	9.14	11.54	41	32.56	41.11
16	9.14	11.54	42	35.85	45.30
17	9.14	11.54	43	39.72	50.19
18	9.14	11.54	44	44.01	55.58
19	9.14	11.54	45	49.08	61.99
20	9.14	11.54	46	54.97	69.44
21	9.14	11.54	47	61.44	77.61
22	9.14	11.54	48	66.07	83.44
23	10.18	12.86	49	70.94	89.62
24	11.22	14.17	50	75.98	95.98
25	11.92	15.06	51	81.18	102.57
26	12.75	16.12	52	86.59	109.37
27	13.74	17.38	53	95.34	120.45
28	13.87	17.54	54	104.25	131.68
29	14.42	18.20	55	114.41	144.54
30	14.74	18.63	56	125.45	158.48
31	15.48	19.56	57	137.23	173.37
32	16.22	20.52	58	150.11	189.63
33	17.10	21.58	59	163.92	207.07
34	18.15	22.92	60	178.51	225.51
35	19.41	24.52	61	194.02	245.09
36	20.90	26.39	62	209.02	264.04
37	22.60	28.54	63	233.45	294.90
38	24.45	30.91	64	260.74	329.37
39	26.75	33.78	65	291.21	367.86
40	29.45	37.19	66	245.94	310.69

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'll always let you know about changes to insurance on our website at gesb.wa.gov.au or in your member statement. We'll give you at least 30 days' notice in writing of any premium increases.

Contributions Tax Rebate

Taxed schemes, like GESB Super, can claim certain tax deductions from their assessable income, which reduces the tax liability of the fund. GESB Super credits this tax benefit to your account as a Contributions Tax Rebate. The rebate is 15% of the administration, insurance and other relevant fees charged to your account. We reimburse this tax benefit to you annually or when you leave the scheme.

Table 5: Occupation category factors for Salary Continuance Insurance (SCI)

Occupational categories	Salary Continuance Insurance
Category 1 – White collar occupations e.g. accounting clerks, office managers, physiotherapists, counsellors, secondary school teachers, special needs teachers	1.00
Category 2 – Light blue collar occupations e.g. dental assistants, registered and qualified child care workers, qualified cooks	1.50
Category 3 – Blue and heavy blue collar ²⁵ occupations e.g. electricians, commercial cleaners, registered nurses	1.75
Category 4 – Hazardous occupations e.g. police officers, fire fighters, prison officers	2.60
Category 5 – Professional and Executive, subject to meeting the eligibility criteria shown on page 8	0.90

Table 6: Waiting Period factors for Salary Continuance Insurance

Note: the factor used for Ben's example on page 21 has been highlighted in this table.

Waiting Period (in days)	Waiting Period factor
30	2.60
60	1.85
90	1.00
120	0.90
180	0.80

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 (see further information about this in the next column), or
- Any eligible sick leave entitlements

If you are Partially Disabled and continue to receive any other *Income* from your employer whilst receiving SCI benefits, these amounts will also reduce your SCI benefit entitlements in line with the formula used to calculate Partial Disability benefit.

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.

If you are Totally Disabled and hold income protection type cover with another insurer, there will not be an offset of any amount which is paid or required to be paid by that policy except to the extent that the income replacement or compensation amounts from all sources (including the benefit otherwise payable to you and any Benefit Offsets) is more than 75% of your *Pre-Disability Income*.

If you are Partially Disabled and hold income protection type cover with another insurer, there will not be an offset of any amount which is paid or required to be paid by that policy except to the extent that the income replacement or compensation amounts from all sources (including the benefit otherwise payable to you and any Benefit Offsets) is more than 100% of your *Pre-Disability Income*.

If your *Date of Disability* occurs prior to 1 October 2022, any benefits payable for a period prior to 1 October 2022 will continue to be subject to the Offset Benefit terms under the policy in place at the *Date of Disability*. However, any benefit payable on or after 1 October 2022 will be subject to the Offset Benefit terms under the policy that is effective from 1 October 2022.

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

Reasons why your insurance cover will cease

Your SCI cover will cease on the earliest of one of the following events:

- You turn age 67
- You cease to be a member of GESB Super or West State Super
- You die
- We receive your cancellation of cover
- Your premium was not paid as a result of your account balance being insufficient (and remains unpaid)
- 180 days have elapsed since your last *SG contribution* was received
- The insurance policy is terminated by us or the Insurer

²⁵ 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 \$15,000, 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', 'Security Officers and Guards', 'Miners', 'Mining Support Workers and Drillers Assistants', 'Power Generation Plant Operators', 'Deck 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.

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 reaching the age of 67 if you're aged less than 67 years when your *Waiting Period* ends
- 6 months after the end of the *Waiting Period* if you're aged 67 years or over when your *Waiting Period* ends, provided the *Date of Disability* happens before you reach age 67
- Date you are no longer totally or partially disabled
- Date of your death

If you're receiving a Superannuation Top-Up Benefit, the payment will continue until the earlier of any of the reasons listed above, or if any of the following occurs:

- Your GESB Super or West State Super account is closed
- Where your *Date of Disability* is prior to 19 June 2021, you access part or all of your super benefit from your GESB Super or West State Super account for retirement purposes

Superannuation Top-Up Benefit

Where your disablement occurs on or after 1 January 2009, your SCI benefit will provide a Superannuation Top-Up Benefit where your *Amount Insured* is greater than 75% of your *Pre-Disability 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'll 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-Disability Income* and the *Amount Insured*.

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

Age	Top-up to super from SCI benefit
<i>Date of Disability</i> prior to the <i>Relevant Age</i>	Up to an extra 75% of <i>Pre-Disability Income</i>
<i>Date of Disability</i> on or after the <i>Relevant Age</i>	Up to an extra 25% of <i>Pre-Disability Income</i>

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:

	Gross monthly benefit	How is this benefit paid
75% <i>Pre-Disability Income</i> (75% of \$62,000/12)	\$3,875	Paid to Jane's bank account (less any tax)
Top-up to super	\$325	Paid as a Superannuation Top-Up Benefit to Jane's super account
Total benefit paid	\$4,200	

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. Different definitions apply depending on whether your *Date of Disability* is before or after 19 June 2021 (see 'Alternative Definitions' below for more information).

You're able to make a claim as soon as you meet the medical requirements, but there's a *Waiting Period* that applies before you're entitled to receive a benefit payment approved by the Insurer. Benefits are paid at the end of each month that you're entitled to be paid.

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* in order to finalise their assessment.

You're permitted to return to work for up to five consecutive days (30-day *Waiting Period*) and up to 10 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*²⁶.

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 years²⁶. This takes 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-Disability Income*, which generally means the average monthly *Income* you earned over the 12 months prior to you becoming totally disabled (*WA Police Officers* have a different definition). The 12-month period includes any periods of paid annual leave and unpaid leave. Where you've been employed less than 12 months your *Pre-Disability 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

Total and Partial Disability definitions

Members claiming an SCI benefit will be assessed against the following definitions of total or partial disability:

Total Disability definition

Total Disability means that solely as a result of injury or sickness you:

- Are unable to perform one or more important duties²⁷ 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

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.

Alternative Definitions

Prior to 19 June 2021, members are assessed as to whether they are 'Partially Disabled' or 'Totally Disabled' under different definitions depending upon whether they are working at least 0.4 FTE, or less than the 0.4 FTE, in the 13 weeks immediately before their *Date of Disability*. Please contact us if you would like more information about this.

Alternative benefit for Medically Discharged WA Police Officers

If you are a *WA Police Officer* and had your employment terminated due to *Medical Discharge* prior to age 65 between 1 October 2019 and 19 June 2021, or prior to age 67 on or after 19 June 2021, 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 will have been deemed to have been met.

Where you're employed in any occupation other than as a *WA Police Officer*, and you're receiving an *Income* from employment other than as a *WA Police Officer*, you'll be assessed against the Standard Partial Disability definition (see left column). This will exclude 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 that have been previously paid to you by the Insurer, as a benefit under an SCI policy from GESB Super or West State Super for you in your role as a *WA Police Officer* (Previous Benefit). This will

²⁶ See 'Your monthly benefit' on page 24.

²⁷ An important duty is one that involves 20% or more of your overall tasks.

occur 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're a *Medically Discharged WA Police Officer*, offsets will apply (see 'Reductions to the amount of SCI benefits payable' on page 23) if you're receiving any other benefits during the same period that the Insurer is paying a benefit following a *Medical Discharge*. Any amounts payable from a *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 180 days of the last *SG contribution* from your employer, unless you make an election to us for your SCI cover to continue while you're on leave without pay. If it's been 75 days since we last received a *SG contribution* from your employer, we'll try to contact you to remind you that you'll need to make an election to us for your SCI cover to continue.

You can apply to extend this 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-Disability 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-Disability 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'll 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 haven't 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 30 days after your agreed return to work date). If this happens, you'll 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 didn't 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're '*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*. Refer to the terms and conditions of the Policy as at that date for more details. You can access a copy of this Policy by contacting your Member Services Centre on 13 43 72.

Exclusions

You won't be able to claim against your SCI 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
- Participation in declared or undeclared war or participation in any act of war, or
- *Active Service* in the armed forces of any country or international organisation²⁸, 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.

²⁸ Where you are enrolled in the Australian Defence Force Reserves, this exclusion only applies when you have been called up for *Active Service*.

Other things you need to know about Death, TPD and SCI cover

Limited Cover from 19 June 2021

Limited Cover means insurance cover which applies only in respect of events or conditions which arise entirely after your insurance cover commenced. For Death/TPD cover, this also excludes any death or disablement caused as a result of any self-inflicted injury or suicide.

If you receive Special Conditions Cover, different *Limited Cover* rules apply. See 'Special Conditions Cover' from page 4 onwards for details on when *Limited Cover* conditions may apply.

Your insurance cover (other than Special Conditions 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*

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 at least one year from your insurance cover commencement date. After one continuous year of *Limited Cover*, these restrictions will be removed provided you meet the *At Work* criteria for at least thirty consecutive days after the first year has ended.

If the *At Work* criteria is not met for at least thirty consecutive days after the one year period, *Limited Cover* will continue to apply until you meet the *At Work* criteria for at least thirty consecutive days.

Note: different definitions of *At Work* applied prior to 1 July 2016 and from 1 July 2016 to 19 June 2021 and continue to apply to existing members as at that date in relation to SCI Cover for *Permanent Employees, Contractors and Sessional Employees*. Refer to the terms and conditions of the Policy as at that date for more details. You can access a copy of this Policy by contacting your Member Services Centre on 13 43 72.

At Work

For cover other than Special Conditions Cover, for *Permanent Employees, Contractors and Sessional Employees*, if you did not meet the *At Work* definition on the day that your cover commenced, you will be provided with *New Events Cover* from the commencement of your cover. *New Events Cover* will cease to apply once you meet the *At Work* definition and are performing your normal duties and work hours for a period of three consecutive months. '*New Events Cover*' does not apply in circumstances where '*Limited Cover*' applies.

If you receive Special Conditions Cover, different *At Work* rules apply. See 'Special Conditions Cover' from page 4 onwards, for the *At Work* requirements that may be applicable to your cover.

From 19 June 2021, for *Casual Employees*, *At Work* means on the date of signing the insurance application, you were actively performing or capable of performing (including if currently unemployed) all the full and normal duties of your usual occupation with your employer and in the Insurer's opinion were not restricted by sickness or injury from actively performing or, being capable of performing (including if currently unemployed) the full and normal duties of your usual occupation with your employer for at least 20 hours per week (even if not working at least 20 hours each week), and you weren't in receipt of any, nor were you entitled to receive any income support benefits. This includes workers' compensation benefits, statutory transport accident benefits and disability income benefits.

If you're a *Casual Employee* and don't meet the *At Work* criteria on the Insurance opt-in form, you're not eligible for basic cover.

New Events Cover and Special Conditions New Events Cover

New Events Cover means cover other than cover in relation to the medical condition(s) or any directly or indirectly related conditions arising from sickness or injury, which caused you to not be *At Work* on the date that your cover commenced.

Special Conditions New Events Cover means cover other than cover in relation to the medical condition(s) or any directly or indirectly related conditions arising from sickness or injury, which caused you to not be *At Work* in the thirty (30) consecutive days immediately prior to the date your Special Conditions Cover commenced.

New Events Cover or *Special Conditions New Events Cover* applies if you are working in a reduced capacity and/or on a reduced salary due to an injury or illness.

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

If you are a non-Australian citizen who is not a permanent resident, cover is available during your stay in Australia if you meet other eligibility criteria. In the event of a claim, the Insurer reserves the right to request you remain 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:

MNS

12

X

11%

X

R

- Where **MNS** is Months of Notional Service to age 60
- Where **11%** 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

If we determine you are partially and permanently disabled for the purposes of the *State Superannuation Regulations 2001 (WA)*, and approve a PPD payment, your potential future earning capacity will be considered when determining the amount of Insured Component payable.

A PPD benefit will always be lower than a TPD benefit. The full formula used to calculate your benefit is detailed in the State Superannuation legislation.

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 your PPD benefit

When your benefit ceases

Your PPD benefit ceases automatically on your 60th birthday or when you're 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'll 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.

Glossary

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.

Term	Explanation
<i>Amount Insured</i>	Means the amount certified from time to time by us as your 'Amount Insured' as described in the relevant insurance policy.
<i>Active Service</i>	Means whether in Australia or overseas, participation in the armed forces of any country or organisation, war service or engagement in a theatre of war but excludes operations authorised by the Australian Commonwealth Government to provide natural disaster and/or humanitarian relief where these operations are not undertaken while on war service or in a theatre of war. For the avoidance of doubt, where you are enrolled in the Australian Defence Force Reserve you are only on "Active Service" where you have been called up for service, and then only if such service otherwise satisfies this definition of "Active Service".
<i>At Work</i>	<p>a) Permanent Employees, Contractors and Sessional Employees: means you are actively performing or capable of performing (including if currently unemployed) all the duties of your usual occupation with the <i>Participating Employer</i> and you're 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</p> <p>b) Casual Employees: means that on the day of signing the relevant form, you are:</p> <ul style="list-style-type: none"> i) actively performing or capable of performing (including if currently unemployed) all the full and normal duties of your usual occupation with the <i>Participating Employer</i>, ii) 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, and iii) In the Insurer's opinion, not restricted by sickness or injury from actively performing or being capable of performing (including if currently unemployed) the full and normal duties of your usual occupation with your <i>Participating Employer</i> for at least twenty (20) hours each week (even if not working at least twenty (20) hours each week). <p>If you do not meet these requirements, you are correspondingly described as 'not At Work'.</p> <p>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 27 for more information.</p>
<i>Casual Employee</i>	Means you are engaged by a <i>Participating Employer</i> 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 <i>Permanent Employee</i> , <i>Sessional Employee</i> or <i>Contractor</i> .
<i>Contractor</i>	Means you have been provided a written contract of employment for a specific period by a <i>Participating Employer</i> and are entitled to be paid annual leave and sick leave.

Term	Explanation
<i>Eligibility Condition 1(e) of the Policy</i>	<p>Means that you are an <i>Insured Member</i> who:</p> <ul style="list-style-type: none"> • had TPD cover under the Policy immediately prior to 1 October 2019; • continued to have TPD cover at 1 October 2019; • had a TPD <i>Incident Date</i> prior to 1 October 2019, and <p>i) you have not lodged a TPD claim under the policy which applied prior to 1 October 2019 or any subsequent endorsements to that policy, 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</p> <p>ii) you previously lodged a TPD claim under the policy which applied prior to 1 October 2019 or any subsequent endorsements to that policy, and “Part C” (Activities of Daily Living) of the definition of TPD applied and your TPD claim was declined; or</p> <p>iii) you previously lodged a TPD claim under the policy which applied prior to 1 October 2019 or any subsequent endorsements to that policy, and “Part C” (Activities of Daily Living) of the definition of TPD applied, and your TPD claim was being considered by the Insurer as at 1 October 2019 and was/is subsequently declined.</p> <p>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 at that date, with the <i>Amount Insured</i> determined as at 1 October 2019.</p>
<i>Date of Disability</i>	Means the day the <i>Waiting Period</i> commences.
<i>Date of Transfer</i>	Means the date the Insurer accepts your application to transfer cover held under a <i>Previous Policy</i> .
<i>Full-Time Equivalent (FTE)</i>	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.
<i>Incident Date</i>	<p>Means:</p> <p>a) For Death benefits – the date you die.</p> <p>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 <i>Registered Medical Practitioners</i> certify in writing that you are Terminally Ill.</p> <p>c) For TPD benefits other than those covered by (d):</p> <p>i) the date you suffer the total and irrecoverable loss of:</p> <ul style="list-style-type: none"> • Sight of both eyes, or • Use of two limbs²⁹, or • Sight of one eye and use of one limb, or <p>ii) the first day of the three consecutive month period:</p> <ul style="list-style-type: none"> • as described in the Standard definition of TPD (see page 25 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’. <p>d) For TPD benefits of <i>Insured Members</i>, who meet Eligibility Condition 1(e) of the Policy, 1 October 2019.</p>
<i>Income</i>	<p>Means:</p> <p>a) if you are not self-employed: <i>Income</i> means your basic wage or <i>income</i>. <i>Income</i> 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.</p> <p>b) if you are self-employed, a working director or partner in a partnership: <i>Income</i> means the income generated by the business or practice due to your personal exertion or activities, less your share of necessarily incurred business expenses.</p>

29 Limb is defined as the whole hand or whole foot.

Term	Explanation
<i>Insured Member</i>	<p>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.</p> <p>In respect of SCI cover it is a member of GESB Super or West State Super with SCI cover greater than nil under that Policy.</p>
<i>Limited Cover</i>	Means insurance cover which applies only in respect of events or conditions which arise entirely after the date that your cover commences, and for Death/TPD cover also excludes any death or disablement caused as a result of any self-inflicted injury or suicide.
<i>Medical Discharge or Medically Discharged</i>	Means that a <i>WA Police Officer</i> 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.
<i>Medically Disabled Officer Compensation Scheme</i>	Means a compensation scheme for <i>WA Police Officers</i> to compensate such persons for termination of their employment as <i>WA Police Officers</i> due to work related sickness or injury, that is passed through legislation in Western Australia.
<i>New Events Cover</i>	<p>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 <i>At Work</i> on the date that your cover commenced.</p> <p><i>New Events Cover</i> applies if you are working in a reduced capacity and/or on a reduced salary due to an injury or illness.</p>
<i>Participating Employer</i>	Means an employer that is eligible to make contributions to GESB Super or West State Super.
<i>Permanent Employee</i>	Means you are permanently employed by a <i>Participating Employer</i> and are entitled to be paid annual leave and sick leave. A Board member is also to be considered to be a <i>Permanent Employee</i> .
<i>Pre-Disability Income</i>	<p>Means the average monthly Income earned by the Insured Member over the twelve (12) months (or if the Insured Member has been employed for less than twelve (12) months, over the Insured Member's period of employment):</p> <ol style="list-style-type: none"> immediately prior to the date of commencement of Total Disability; or where the Insured Member is a <i>WA Police Officer</i> who has been <i>Medically Discharged</i>, immediately prior to the date the <i>WA Police Officer</i> ceased their usual duties as a <i>WA Police Officer</i> due to the relevant sickness or injury causing the Total Disability.
<i>Previous Policy</i>	Means death, total permanent disability, death and total permanent disability, or salary continuance cover under an insurance policy held through another superannuation fund or an individual retail policy.
<i>Registered Medical Practitioner</i>	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.
<i>Relevant Age</i>	<p>Means:</p> <ol style="list-style-type: none"> If the Insured Member was born before 1 July 1960, the Relevant Age is 55 If the Insured Member was born between 1 July 1960 and 30 June 1961, the Relevant Age is 56 If the Insured Member was born between 1 July 1961 and 30 June 1962, the Relevant Age is 57 If the Insured Member was born between 1 July 1962 and 30 June 1963, the Relevant Age is 58 If the Insured Member was born between 1 July 1963 and 30 June 1964, the Relevant Age is 59 If the Insured Member was born after 30 June 1964, the Relevant Age is 60.

Term	Explanation
<i>Sessional Employee</i>	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 <i>Participating Employer</i> .
<i>Special Conditions New Events Cover</i>	<p>Means Cover other than Cover in relation to the medical condition(s) or any directly or indirectly related condition(s) arising from sickness or injury which has caused you to not be At Work in the thirty (30) consecutive days immediately prior to the date Cover commences under the Policy.</p> <p><i>Special Conditions New Events Cover</i> applies if you are working in a reduced capacity and/or on a reduced salary due to an injury or illness.</p>
<i>Superannuation Guarantee (SG) or SG contribution</i>	<p>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</p> <p>b) any similar or equivalent contribution (other than a voluntary salary sacrifice contribution) which a <i>Participating Employer</i> is required under law, to contribute in respect of an employee who is a member of the Plan.</p>
<i>State Superannuation Regulations 2001 (WA)</i>	Subsidiary legislation made under the <i>State Superannuation Act 2000 (WA)</i> .
<i>Terminal Illness or Terminally Ill</i>	<p>Means:</p> <p>a) Two <i>Registered Medical Practitioners</i> 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</p> <p>b) At least one of the <i>Registered Medical Practitioners</i> is a specialist practicing in an area related to your illness or injury, and</p> <p>c) For each of the certificates, the certification period has not ended</p> <p>The Insurer reserves the right to validate the certifications from the two <i>Registered Medical Practitioners</i>.</p>
<i>WA Police Officer</i>	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).
<i>Waiting Period</i>	<p>Means (subject to the General Condition in the SCI Policy that permits you to work for a specified number of days without the <i>Waiting Period</i> recommencing), the number of continuous days which must elapse before SCI benefits begin to accrue.</p> <p>The number of continuous days, as shown in the Policy Schedule, which must elapse before benefits begin to accrue.</p> <p>The <i>Waiting Period</i>:</p> <p>a) commences from the date the <i>Insured Member</i> is first examined and certified by a <i>Registered Medical Practitioner</i> as Totally Disabled in relation to a condition that gave rise to a claim and the <i>Insured Member</i> ceased work, due to that condition; or</p> <p>b) both commences and ceases on the date the <i>Insured Member</i> is <i>Medically Discharged</i> in respect of a <i>WA Police Officer</i>.</p>
<i>Voluntary Cover</i>	Means cover obtained under Eligibility Condition 3(b) of the Group Life Insurance Policy No. MP 9908 and Policy No. MP 9936 or the Group Supplementary Income Protection Policy No. MP 9908 and Policy No. MP 9936.

Disclaimer: 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 considered 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 review your investment objectives, financial situation and needs, and assess whether the information is appropriate for you. You should read this brochure in conjunction with the relevant Product Information Booklet and disclosure documents at gesb.wa.gov.au/brochures. You may also wish to seek advice specific to your personal circumstances from a suitably qualified adviser

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