

Mercer MyChoice

Insurance Booklet

20 June 2025

The information in this document forms part of the Product Disclosure Statement for Mercer MyChoice, a plan in the Retail Division of the Mercer Super Trust, dated 20 June 2025.



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About this booklet

This *Insurance* booklet (Booklet) is a summary of the key terms and conditions (including exclusions) of the insurance arrangements applicable to Mercer MyChoice (your Plan) and forms part of the Mercer MyChoice Product Disclosure Statement (PDS).

The description of Benefits in this Booklet relates to insurance Benefits in Mercer MyChoice only and does not include any benefit within any other account in the Mercer Super Trust.

You should consider the information in this Booklet, the PDS and any other important information booklets referred to in this Booklet and the PDS before making a decision about your super. You can get a copy of the PDS and the booklets that are part of the PDS at mercersuper.com.au/pds or by calling the Helpline.

It is important that you understand the information in this Booklet. Ask us or a person you trust, such as your advisor, for help if you have difficulty understanding any information about your super or the options available to you.

If you are having difficulty due to a disability, understanding English or for any other reason, we have accessibility support. Please contact our Helpline.

This Booklet contains general information only and does not take into account your individual objectives, personal financial situation or needs. Before acting on this information, you should consider whether it is appropriate to your individual objectives, personal financial situation and needs. You should get financial advice tailored to your personal circumstances.

The product's Target Market Determination setting out the class of people for whom the product may be suitable can be found at mercersuper.com.au/TMD.

References to 'your Plan' throughout the PDS and this Booklet mean Mercer MyChoice in the Retail Division of the Mercer Super Trust.

See section 8 'Insurance definitions' in this Booklet for clarification on capitalised terms used in this Booklet.

This Booklet is issued by Mercer Superannuation (Australia) Limited (MSAL) ABN 79 004 717 533 Australian Financial Services Licence (AFSL) #235906 as the trustee of the Mercer Super Trust ABN 19 905 422 981. In this Booklet, MSAL is referred to as 'trustee', 'we', 'our' or 'us'.

MSAL is a wholly owned subsidiary of Mercer (Australia) Pty Ltd (MAPL) ABN 32 005 315 917, which is part of the Mercer global group of companies (Mercer).

MSAL is responsible for the contents of this Booklet and is the issuer of this Booklet. MAPL and the Insurer (TAL Life Limited ABN 70 050 109 450 AFSL 237848 (TAL)) are not responsible for the issue of, or any statements in this Booklet, the PDS or any of the other important information booklets referred to in this Booklet or the PDS. They do not make any recommendation or provide any opinion regarding Mercer MyChoice or an investment in it.

'MERCER' is an Australian registered trademark of MAPL.

Any insured benefit is subject to the terms, conditions and exclusions of the applicable insurance policy. Other conditions and restrictions may apply. Any benefit payable may be reduced if the Insurer does not pay out any or all of the insured benefit if a claim is made.

You should not rely on this Booklet as a full and complete description of the terms, conditions and exclusions of the insurance policy. All terms, conditions and exclusions of the insurance policy prevail over any inconsistency in this Booklet.

Updated information

The information in this Booklet, the PDS and the other information booklets that are part of the PDS is current as at the date of publication. Information in the PDS may change from time to time and if it is not materially adverse, will be made available online at mercersuper.com.au/pds.

A paper copy of any updated information will be given or an electronic copy made available on request at no charge by calling the Helpline.

We will advise you directly of any material changes as required by law.

Your Plan's Insurer

Your Plan's insurance is provided through a group insurance policy with TAL Life Limited ABN 70 050 109 450 AFSL 237848 (referred to as the Insurer throughout this Booklet) who has consented to being so named.

The trustee has the right to change the Insurer for your Plan.

1. Insurance in Mercer MyChoice

Mercer MyChoice includes insurance cover that can help provide financial support to your loved ones in the event of your death and allows you to focus on what's most important if the unexpected occurs such as stopping work due to Illness or Injury.

Premiums are automatically paid from your super balance, so there's no need to remember to pay them or factor them into your everyday budget. However, the costs of cover reduces your super account balance.

You may be entitled to automatic insurance without needing to answer any medical or personal questions.

1.1 Types of cover available

There are three types of insurance cover offered through Mercer MyChoice.

Type of cover...	This type of cover pays...
Death (including Terminal Illness) cover	A lump sum Benefit paid to you if you're diagnosed with a Terminal Illness, or to your beneficiaries if you die.
Total and Permanent Disablement (TPD) cover	A lump sum Benefit paid to you if you become Totally and Permanently Disabled and you can never work again. You cannot hold TPD cover without Death cover.
Income Protection (IP) cover	A monthly Benefit paid to you if you become Temporarily Disabled due to Total Disability or Partial Disability. A monthly benefit can help you focus on your recovery and return to work without draining your savings.

Your Mercer MyChoice account provides insurance cover that is available through Life Stages Cover and/or Voluntary Cover.¹

When you open a Mercer MyChoice account you will automatically receive two (2) units of pre-approved age based Life Stages Cover for Death and TPD, without the need for a medical assessment, as long as you meet the eligibility criteria. See section 2 'Life Stages Cover' in this Booklet for more information.

If you would like to customise the amount of insurance cover through Mercer MyChoice you can:

- 'Opt-up' your Life Stages Cover, where you can increase your cover up to three (3) or four (4) units in total without the need for underwriting, as long as you apply within 120 calendar days of your Life Stages Cover starting (see section 2.3), and/or
- Apply for Voluntary Cover (see section 3.1) that gives you the option of choosing the type and amount of cover that best suits your needs, and/or
- Increase your Voluntary Cover through Life Events Cover (see section 3.2 'What is Life Events Cover' for more information), and/or
- Transfer Cover from a Previous Policy into your Mercer MyChoice account (see section 3.3 'What is Transferred Cover' for more information).
- Apply for IP cover.

Applications to customise your cover may be subject to underwriting and acceptance by the Insurer. See section 3 'Voluntary Cover' in this Booklet for more information.

¹ You can only hold Life Stages Cover and/or Voluntary Cover in one Mercer MyChoice account at the same time.

2. Life Stages Cover

2.1 What is Life Stages Cover

Life Stages Cover provides a basic level of automatic insurance cover when you open a Mercer MyChoice account. As long as you meet the eligibility criteria, you will be provided with two (2) pre-approved units of Death and TPD cover.

Life Stages Cover is designed to give you the protection you need based on your life stage by automatically adjusting the level of Death and TPD cover as you get older.

IP cover is not provided automatically through Life Stages Cover. You need to apply for it and your application is subject to underwriting and acceptance by the Insurer. (See section 3 'Voluntary Cover' for more information).

From the date Life Stages Cover first starts, you have 120 calendar days where you can increase your cover to three (3) or four (4) units in total. See section 2.4 'Increase your Life Stages Cover through opt-up' in this Booklet for more information.

The Sum Insured scale which determines the amount of cover provided based on your age, along with the premiums that apply are detailed in section 2.5 'How your premium is calculated for Life Stages Cover' in this Booklet.



Important: A Limited Cover restriction applies to Life Stages Cover from the date cover starts. See 'Limited cover' under section 2.3 'When Life Stages Cover starts' for more information. Other exclusions may also apply. See section 4 'What's not covered' in this Booklet for more information.

2.2 Eligibility criteria for Life Stages Cover

To be eligible for Life Stages Cover, you must:

- Have a Mercer MyChoice account,
- Be an Australian Resident, and
- Meet the relevant entry age criteria shown below:

Type of Cover	Entry age	Age when cover ends ²
Death (including Terminal Illness)	15 to 64	On your 70th birthday
TPD	15 to 64	On your 65th birthday

You cannot hold TPD cover without Death cover, and for Life Stages Cover the TPD Sum Insured cannot be greater than Death cover.

2.3 When automatic Life Stages Cover starts

When automatic cover starts

If you are eligible for insurance cover, Life Stages Cover will generally automatically start on the date you meet Putting Member's Interests First (PMIF) requirements, which is when:

- You are aged 25 or older, and
- You have an account balance of at least \$6,000.

Automatic cover will not start if:

- You already hold Life Stages Cover, or
- You have previously cancelled, declined or opted out of Life Stages Cover.

You can opt out of automatic cover starting at any time but if you opt out, any future request for insurance cover will need go through underwriting and will be subject to acceptance by the Insurer. To opt out complete the *Managing your Insurance Cover form* available at mercersuper.com.au/login or by contacting the Helpline.

Opt-in to Life Stages Cover sooner

If you want your insurance to start sooner than the automatic cover start date, you can opt in.

To opt in, complete the *Managing your Insurance Cover form* available at mercersuper.com.au/login or by contacting the Helpline.

If you opt-in within 180 calendar days of receiving your Welcome letter, then cover will start once there is money in your account.

If you opt in outside the first 180 calendar days from the date on your Welcome letter, then you can apply for cover by answering questions about your employment, health and lifestyle, provided you haven't previously held or opted out of Life Stages Cover. Cover will start on the date the Insurer accepts your application as long as there is money in your account.

Once your Life Stages Cover has started, your first monthly insurance premium and insurance fee will generally be deducted on the last day of the month following the date your insurance starts and is paid monthly in arrears. You can cancel your cover at any time.

² Life Stages Cover may cease at an earlier date upon the occurrence of certain other events – see section 6.2 'When cover ends' in this Booklet for more information.

Limited Cover

Your Life Stages Cover will be restricted to Limited Cover. This means you can only claim for events arising from:

- An Illness, the symptoms of which first became apparent, or
- An Injury which first occurs,

on or after the date your insurance cover first starts or most recently started.

Life Stages Cover is subject to Limited Cover for a continuous period of 12 months from the date cover started. Limited Cover conditions will continue to apply until you have been in Active Employment for 30 consecutive calendar days.

You can remove Limited Cover

You can remove Limited Cover at any time, subject to underwriting and acceptance by the Insurer. To remove Limited Cover complete the *Apply for, or change your Voluntary Cover* form available at mercersuper.com.au/login, or by calling the Helpline.

2.4 Increase your Life Stages Cover through opt-up

You have the choice to increase your Life Stages Cover through opt-up. This allows you to increase cover to three (3) or four (4) units in total.

To opt-up, you can notify us within 120 calendar days of the date your Life Stages Cover starts by completing the *Managing your Insurance Cover form* available at mercersuper.com.au/login or by contacting the Helpline.

The increased cover through opt-up will start on the date the application is approved.

Any application to increase your Life Stages Cover after the opt-up period of 120 calendar days will be subject to full underwriting and acceptance at the Insurer's discretion.

2.5 How your premium is calculated for Life Stages Cover

Premium rates for Life Stages Cover are based on your age. No additional loadings are applied to Life Stages Cover based on your occupation or lifestyle.

The following table shows the Sum Insured scale that applies for Life Stages Cover for Death cover, and Death and TPD cover based on your age, and the monthly premium that applies.

These rates are inclusive of stamp duty.

Age next birthday	Sum Insured scale for one (1) unit	Monthly premium for 1 unit of cover (\$)	
		Death cover only	Death and TPD cover
16	\$50,000	\$2.00	\$4.22
17	\$50,000	\$1.96	\$4.28
18	\$50,000	\$1.95	\$4.18
19	\$50,000	\$1.95	\$4.18
20	\$50,000	\$1.97	\$4.27
21	\$100,000	\$3.89	\$8.59
22	\$100,000	\$3.83	\$8.62
23	\$100,000	\$3.76	\$8.34
24	\$100,000	\$3.78	\$8.24
25	\$100,000	\$3.83	\$8.45
26	\$125,000	\$4.86	\$10.77
27	\$125,000	\$4.94	\$11.03
28	\$125,000	\$5.00	\$11.28
29	\$125,000	\$5.05	\$11.61
30	\$125,000	\$5.15	\$12.41
31	\$125,000	\$5.31	\$13.15
32	\$125,000	\$5.49	\$14.04
33	\$125,000	\$5.70	\$14.94
34	\$125,000	\$5.90	\$15.98
35	\$125,000	\$6.31	\$17.25
36	\$125,000	\$6.73	\$18.58
37	\$125,000	\$7.16	\$19.90
38	\$125,000	\$7.64	\$21.50
39	\$125,000	\$8.09	\$23.09
40	\$120,000	\$8.33	\$23.88
41	\$117,500	\$8.78	\$24.98
42	\$115,000	\$9.30	\$26.25
43	\$112,500	\$9.84	\$27.51
44	\$106,875	\$10.10	\$28.12
45	\$99,375	\$10.16	\$27.98
46	\$91,875	\$10.19	\$27.55
47	\$84,375	\$10.04	\$26.89
48	\$76,875	\$9.85	\$26.18
49	\$71,250	\$9.81	\$25.82
50	\$65,625	\$9.81	\$25.49
51	\$60,000	\$9.70	\$25.01

Age next birthday	Sum Insured scale for one (1) unit	Monthly premium for 1 unit of cover (\$)	
		Death cover only	Death and TPD cover
52	\$54,375	\$9.46	\$24.62
53	\$48,750	\$9.08	\$23.95
54	\$43,125	\$8.64	\$23.06
55	\$37,500	\$8.05	\$21.72
56	\$33,750	\$7.78	\$21.20
57	\$30,000	\$7.41	\$20.39
58	\$26,250	\$6.98	\$19.25
59	\$22,500	\$6.42	\$17.61
60	\$18,750	\$5.74	\$15.66
61	\$15,000	\$4.91	\$13.30
62	\$13,125	\$4.59	\$12.33
63	\$11,250	\$4.06	\$10.87
64	\$9,375	\$3.48	\$9.30
65	\$8,625	\$3.28	\$8.76
66	\$7,500*	\$3.27	\$3.27
67	\$7,500*	\$3.49	\$3.49
68	\$7,500*	\$3.72	\$3.72
69	\$7,500*	\$3.97	\$3.97
70	\$7,500*	\$4.24	\$4.24

*Sum insured is death only cover from age next birthday 66.

Your insurance is reviewed on 1 July each year and, if applicable, your Sum Insured and premium will change based on your age.

The actual premium deducted may be marginally lower or higher than shown as the premium rates have been rounded to two decimal places and due to the different number of days in a month.

You will receive at least 30 days' notice if the premium rates increase.



In addition to the insurance premium that is payable, an insurance fee of \$25 per annum will apply for insurance member services in relation to any Life Stages Cover and/or Voluntary Cover you may hold. This fee (calculated pro rata of the annual fee for the number of days in the month) will be deducted from your account balance at the end of each month). Refer to 'Other fees' in the 'Additional explanation of fees and costs' section of the *Product Guide* for more information.

3. Voluntary Cover

You can customise the type of cover and amount by applying to increase or adjust your insurance to better meet your needs.

There are various ways to customise your cover as described in this section. The table below summarises the ways you can increase or adjust your cover.

You can...	Death cover only	Death and TPD cover	Income Protection
Apply for Voluntary cover	Yes	Yes	Yes
Apply for a Life Events increase	Yes	Yes	Yes
Transfer insurance from another super fund	Yes	Yes	Yes
Opt-up by increasing Life Stages Cover	See section 2.4 in this Booklet for more information.		No
Reduce your cover	Yes anytime, subject to a minimum cover amount of \$50,000 for either Death cover or Death and TPD cover.		Yes anytime, subject to a minimum cover amount of \$1,000 per month.

3.1 What is Voluntary Cover?

Voluntary Cover in Mercer MyChoice gives you the option to apply for the type and amount of cover that best suits your needs.

Voluntary Cover includes Death cover or Death and TPD cover, as well as IP cover.

Voluntary cover allows you to:

- Apply for fixed dollar Death only or Death and TPD cover (which means an agreed amount of cover is provided to you and the amount of cover remains the same (unless your cover is indexed as per Section 3.8) as you get older, but the premiums change at each 1 July³), and/or
- Apply for IP cover.

IP cover

IP cover provides a regular monthly Benefit if you become Temporarily Disabled because of Illness or Injury.

There are two types of Benefits included within IP cover:

Total Disability Benefit	A monthly Benefit payable if you're Totally Disabled because of Illness or Injury.
Partial Disability Benefit	A monthly Benefit payable if you're Partially Disabled following a period of Total Disability.

You can apply for a fixed dollar amount of:

- Up to 75% of your Salary, and
- For an additional cost, you may choose to cover the Superannuation Contribution paid into your account of 12%.

See section 5 'What are the Benefits' in this Booklet for more information.

If you apply for IP cover, you will choose a Waiting Period and a Benefit Period. The premium you pay and the cover offered will vary depending on your choices.

Waiting Period	You can choose a Waiting Period of: <ul style="list-style-type: none"> • 30 days, or • 90 days.
Benefit Period	You can choose a Benefit Period of: <ul style="list-style-type: none"> • 2 years, or • 5 years.

For all fixed dollar Benefits within Voluntary Cover, the Sum Insured will automatically increase each year unless you choose otherwise (see section 3.8 'Protection against inflation' in this Booklet for more information).

The acceptance of any Voluntary Cover in your application is subject to the Insurer's assessment.

Eligibility criteria for Voluntary Cover

To be eligible for Voluntary Cover, you must:

- Have a Mercer MyChoice account,
- Be an Australian Resident, and
- Meet the relevant entry age shown in the following table.

3 Any fixed dollar Death cover, Death and TPD cover or IP cover you hold will automatically be indexed (increased) each year on 1 July, unless you opt out. See Section 3.8 'Protection from inflation' in this Booklet for more information. Any TPD cover you hold will automatically taper (decrease) from age 60.

Benefit	Entry age	Age when cover ends ⁴
Death (including Terminal Illness)	15 to 69	On your 70th birthday
TPD	15 to 64	On your 65th birthday
IP	15 to 64	On your 65th birthday

IP cover is only available to you if you are:

- Working in your Usual Occupation for at least 15 hours per week, and
- Not working in a Hazardous Occupation.

You will also need to comply with the Insurer's requirements in relation to your application for Voluntary Cover (including an increase or variation for Voluntary Cover), which may include providing medical information and undergoing medical examinations and tests that the Insurer requests.

How much cover you can apply for

You can choose to apply for Voluntary Cover subject to the limits listed in the table below.

Benefit type	Maximum Cover Limit
Death (including Terminal Illness)	<ul style="list-style-type: none"> • Unlimited for Death cover • \$3 million for Terminal Illness cover
TPD	<ul style="list-style-type: none"> • \$3 million
IP	<p>A fixed amount which is the lesser of:</p> <ul style="list-style-type: none"> • 75% of Salary plus 12% Super Contribution Benefit (if applicable), or • \$30,000 per month.

How to apply for Voluntary Cover

You can apply for Voluntary Cover by completing the *Apply for, or change your Voluntary Cover form*, available at mercersuper.com.au/login or by contacting the Helpline.

When applying for Voluntary Cover you can apply to hold a greater amount of TPD cover than Death cover however you must hold a minimum of \$50,000 Sum Insured of Death cover.

You cannot hold Terminal Illness cover or TPD cover without Death cover.

After you have lodged a completed application and while the Insurer is assessing your application for Voluntary Cover, you will be provided with Interim Accident Cover, subject to certain conditions. See section 3.6 'Interim Accident Cover' in this Booklet for more information.

Convert your Life Stages Cover to Voluntary Cover

If you have Life Stages Cover (see section 2 'Life Stages Cover' in this Booklet), you can choose to convert your Life Stages Cover for Death cover, or Death and TPD cover into Voluntary Cover at any time by completing the *Convert your Life Stages Cover to fixed Voluntary Cover form* available at mercersuper.com.au/login or by contacting the Helpline.

Cover will be converted to a fixed dollar amount of cover and will be rounded up to the nearest \$1,000. The change to your cover starts on the date your application is approved.

The premium payable for converted cover is:

- Payable from the date of acceptance,
- According to the Voluntary Cover premiums rates in Appendix C for Death and TPD cover, and
- Subject to the occupation classification based on the occupation provided by you.

If a Limited Cover restriction applied to your Life Stages Death cover, or Death and TPD cover immediately prior to converting Life Stages Cover to fixed Voluntary Cover, then it will continue to apply once your cover has been converted. You can apply to remove the Limited Cover restriction at anytime, subject to underwriting and acceptance by the Insurer.

Tapering (reduction) of fixed dollar Voluntary Cover for TPD

If you have fixed dollar Voluntary Cover for TPD, the cover will be automatically tapered (reduced) by 20% on 1 July each year after age 60 in accordance with the table below.

Your premiums will be re-calculated based on your reduced amount of cover.

Age Next Birthday	Amount of TPD cover that applies to you at 1 July
61	100%
62	80%
63	60%
64	40%
65	20%

⁴ Voluntary Cover may cease at an earlier date upon the occurrence of certain other events – see section 6.2 'When cover ends' in this Booklet for more information.

3.2 What is Life Events Cover?

Life Events Cover provides you the opportunity to increase your Death cover, Death and TPD cover, and/or IP cover without the need for underwriting.

You can apply for Life Events Cover at any time while you are a member of your Plan, subject to you meeting certain conditions.

The types of Life Events you can apply for are...

- The birth of your child,
- The adoption of your child,
- The start of your de facto relationship or marriage,
- Your dependent child starts secondary school,
- The end of your de facto relationship or divorce,
- Your completion of an undergraduate degree at a registered institution recognised on the register maintained by the Tertiary Education Quality and Standards Agency or a comparable Australian government body as applicable,
- You effecting a mortgage with a mortgage provider or lender who holds an Australian Credit Licence on the purchase of your primary place of residence (either alone or jointly with another person),
- Increasing an existing mortgage with a mortgage provider or lender who holds an Australian Credit Licence for the purposes of building or renovation on your primary place of residence, or
- If you are an Employee (and you are not Self-employed), your increase in Salary of more than 10%.

Eligibility criteria for Life Events Cover

To be eligible to apply for Life Events Cover, you must meet all of the following conditions at the date of application:

- Have existing Life Stages Cover or Voluntary Cover for Death cover, Death and TPD cover, and/or IP cover,
- Be under age 60,
- Not had any increase of cover from a Life Event during the 12 months preceding the date of your latest application for Life Events Cover,
- Be in Active Employment on the date of application for Life Events Cover, and
- You must properly complete the application form for Life Events Cover, including answering satisfactorily each of the Life events eligibility questions.



Important: For Death cover, TPD cover and/or IP cover, if you are not in Active Employment on the date of the increase in cover, your increased cover will be subject to Limited Cover for a continuous period of 12 months. Limited Cover conditions will apply until you are in Active Employment for 30 consecutive calendar days.

Timeframe to apply for Life Events Cover

An application for Life Events Cover must be submitted within the later of:

- 90 calendar days of the Life Event occurring, or
- 30 calendar days from the date we issued your most recent member statement following the Life Event.

Additional conditions for Life Events Cover

- Life Events Cover is subject to the conditions and exclusions outlined in this Booklet,
- The Insurer may accept or reject your application for Life Events Cover,
- The Insurer may at their sole discretion impose any individual restrictions, conditions, exclusions, or premium loadings to the Life Events Cover,
- The premium for the Life Events Cover is:
 - payable from the date of the Insurer's written acceptance,
 - according to the Voluntary Cover premium tables in Appendix C for Death and TPD cover and Appendix D for IP cover, and
 - subject to the occupation classification based on the occupation provided by you.
- The maximum amount of increase for each Life Event is as follows:

Benefit type	Maximum increase
Death only, and Death and TPD	<p>The lesser of:</p> <ul style="list-style-type: none"> • 50% increase of your existing amount of cover, • \$200,000 for Death and TPD cover, and • The total amount of mortgage or amount of increase of mortgage on the purchase or renovation of your primary place of residence. <p>The amount of total Death cover or Death and TPD cover after the increase of cover cannot exceed \$3 million.</p>
IP	<p>The lesser of:</p> <ul style="list-style-type: none"> • 25% of your existing amount of cover, and • \$2,000 per month. <p>The amount of the total IP cover Sum Insured after the increase cannot exceed \$30,000.</p>

How to apply for Life Events Cover

You can apply to increase your cover through Life Events Cover at any time while you are a member of Mercer MyChoice by completing the *relevant form*, available at mercursuper.com.au/login or by contacting the Helpline.

After you have lodged a completed application and while the Insurer is assessing your application for Life Events Cover, you will be provided with Interim Accident Cover, subject to certain conditions. See section 3.6 'Interim Accident Cover' in this Booklet for more information.

3.3 What is Transferred Cover?

You may already have insurance cover with another super fund, or life insurance you've taken out.

If you already have cover and are thinking about applying for insurance through Mercer MyChoice, you can apply to transfer any existing Death, TPD or IP cover from your individual insurance or other super fund to Mercer MyChoice.

Eligibility to transfer cover

To be eligible to apply to transfer cover, you must meet all of the following conditions:

- Be under age 60,
- Not be engaged in a Hazardous occupation, and
- Be covered under the Previous Policy or, if you're not covered under the Previous Policy solely as a result of you consolidating an account balance held with another superannuation fund into your membership account with the Fund, your application was received by us no more than 90 calendar days after you received the relevant transfer amount.

The Insurer will assess an application to transfer cover from the Previous Policy, and may accept the transfer of cover under the Previous Policy provided:

- You are in Active Employment on the date the Transferred Cover starts,
- You have cover under the Previous Policy that is current and in force on the day immediately preceding the date the Insurer accepts the Transferred Cover or, if not covered under the Previous Policy solely as a result you consolidating an account balance held with another superannuation fund into their membership account with the Fund, your application was received by us no more than 90 calendar days after you received the relevant transfer amount,
- You cancel the cover under the Previous Policy upon commencement of the Transferred Cover and you do not exercise any continuation option or reinstate cover under the Previous Policy,
- The Insurer is satisfied with all of the conditions, restrictions or exclusions which applied to your cover under the Previous Policy,
- You have not been diagnosed with, or do not suffer from, any Illness or Injury that may cause permanent inability to work or reduces, or is likely to reduce, your life expectancy to less than 12 months from the date of application,
- You have not had an application for Death, TPD or IP cover declined or been offered cover on alternate terms (except where the Insurer is satisfied with the alternative terms),
- You have not previously been declined additional cover under the Previous Policy, and

- You are not eligible to be paid for a claim, have never claimed, are not entitled to claim, and are not applying for a claim, for any Injury or Illness through the Mercer Super Trust, workers' compensation, other government benefits (e.g. sickness benefit or invalid pension) or any insurance policy providing TPD cover, or accident or sickness type cover.



Important: For Death cover, TPD cover, and IP cover, if you are not in Active Employment on the date cover is transferred, your increased cover will be subject to Limited Cover for a continuous period of 12 months. Limited Cover conditions will apply until you are in Active Employment for 30 consecutive calendar days.

Additional conditions of Transferred Cover

Transferred cover is subject to the following terms and conditions:

- The Transferred Cover will be subject to terms and conditions (and exclusions) in the trustee's policy with the Insurer,
- The premium payable for Transferred Cover is:
 - payable from the date of acceptance,
 - according to the Voluntary Cover premiums rates in Appendix C for Death and TPD cover and Appendix D for IP cover, and
 - subject to the occupation classification based on the occupation provided by you.
- The Transferred Cover cannot exceed the level of cover provided under the Previous Policy subject to the maximum of \$2 million for Death and TPD cover and \$10,000 per month for IP cover,
- The maximum Sum Insured after the transfer of cover, inclusive of any current Sum Insured, is \$3 million for Death and TPD cover and \$30,000 per month for IP cover,
- The Transferred Cover will be fixed cover and converted to an amount equivalent to the applicable cover held under the Previous Policy rounded to the nearest \$1, subject to the terms of the Policy,
- Any restrictions, conditions, exclusions or premium loadings that applied to your cover under the Previous Policy may continue to apply to the Transferred Cover if required by the Insurer, and
- The Insurer may impose any restrictions, conditions, exclusions or premium loadings to the Transferred Cover at their discretion.

How to apply to transfer cover

You can apply to transfer cover you hold under a Previous Policy into your Mercer MyChoice account by completing the *Individual Insurance Transfer form*, available at mercersuper.com.au/login or by contacting the Helpline.

3.4 Duty to take reasonable care

When applying for insurance, you will be asked a number of questions.

The Insurer's questions will be clear and specific which will include things such as your health and medical history, occupation, income and lifestyle.

There is a legal duty to take reasonable care not to make a misrepresentation to the Insurer before the contract of insurance is entered into. To meet this duty, each person whose life is to be insured must also take reasonable care not to make such a misrepresentation. See Appendix B 'Duty to take reasonable care' in this Booklet for more Information.

3.5 When cover starts

If you apply for:

- Voluntary Cover, cover will only start on the date the Insurer approves your application provided you satisfy the eligibility conditions and your account balance is greater than nil.

If you apply for:

- Life Events Cover, or
- Transferred Cover,

cover will only start on the date we advise you your application has been approved by the Insurer provided you satisfy the eligibility conditions.



Important: For Voluntary Cover and Transferred Cover, if your automatic Life Stages Cover hasn't already started, it will also start as long as you haven't previously cancelled it.

3.6 Interim Accident Cover

If you apply for Voluntary Cover or Life Events Cover for Death cover, TPD cover and/or IP cover, you may be entitled to Interim Accident Cover for the type and amount of cover you applied for while the Insurer is assessing your application. This cover is provided on the terms and conditions (and exclusions) set out in this section.

You do not have to pay any premium for Interim Accident Cover. Unless otherwise stated, terms used in this section have the same meaning as in the relevant Voluntary Cover or Life Events Cover you have applied for.

Period of Interim Accident Cover

Interim Accident Cover starts on the day we receive a properly completed application and will cease on the earliest of the following:

- 90 calendar days after we receive the properly completed insurance application,
- The application for cover is withdrawn,
- The Insurer declines the application for cover,
- We receive the Insurer's decision to accept your application for cover with or without imposing special terms, exclusions or premium loadings,
- You cease to meet the eligibility criteria for Voluntary Cover or Life Events Cover,
- A Benefit under Interim Accident Cover becomes payable to you, or
- You cease to be an insured person.

Payment of an Interim Accident Cover Benefit

Interim Death and TPD Benefit

If you are eligible for Interim Accident Cover for Death cover, or Death and TPD cover and you die or are Totally and Permanently Disabled as a result of an Accident, the interim Benefit will be the amount of Voluntary Cover or Life Events Cover you applied for subject to the Maximum Cover Limit.

Interim IP Benefit

If you are eligible for Interim Accident Cover for IP cover and become Temporarily Disabled, the interim Benefit will be the lesser of:

- The amount of Voluntary Cover or Life Events Cover you applied for, and
- \$15,000 per month less any Sum Insured payable under existing cover of the same type for you in Mercer MyChoice.

If you become Temporarily Disabled, the interim Benefit will be payable until the earliest of:

- The first day, in the Insurer's reasonable opinion, that you are no longer Totally Disabled or Partially Disabled,
- On your 65th birthday,
- The date of your death, and
- The end of the applicable Benefit Period.

An IP Benefit payable with respect to Interim Accident Cover will be reduced by Other Payments.

When an Interim Accident Cover Benefit is not paid

An Interim Accident Cover Benefit will not be payable if:

- You were aware of, or a reasonable person in your position would have been aware of the Illness or Injury that resulted in the Total and Permanent Disability, Total Disability or Partial Disability prior to submitting your application for Voluntary Cover or Life Events Cover, or
- Any of the exclusions outlined in section 4 'What's not covered' in this Booklet apply, or
- You failed to comply with your disclosure obligations when applying for cover. See section 3.4 'Duty to take reasonable care' in this Booklet.

What happens after your application is assessed

Once we've received your completed application for Voluntary Cover or Life Events Cover, the Insurer will assess your application.

The Insurer may accept or decline your application. Alternatively, the Insurer may accept your application subject to conditions, that is, the level or extent of cover offered may be different to what you applied for. For example, insurance may be offered at a lower Sum Insured, at a higher premium (as a result of an occupational or health loading) or with certain exclusions applying for certain types of claims. If this happens, the Insurer will notify you and obtain your agreement before proceeding with the application on these terms.

In some cases, the Insurer may not accept your application for cover at all. We will write and tell you if this occurs.

If your application has been approved by the Insurer, you will be notified of such approval, together with any special conditions that apply, and you will receive an *Insurance Certificate* which sets out the details of your insurance. This is an important document which you should read carefully and keep in a safe place.

3.7 How your premium is calculated when you customise your cover

The premium calculation depends on a variety of factors including:

- The type of insurance you have,
- The amount of insurance you have (including indexation increases),
- Your age, gender and occupation (see Appendix A 'Occupation categories' in this Booklet for more information),
- Stamp duty and any other taxes, duties, levies or charges applicable,
- Benefit Period and Waiting Period (applies to IP cover only),
- The Insurer's scales of premium rates, and
- Any loading specified in your *Insurance Certificate*.

Your premium is calculated when your insurance starts and is recalculated on 1 July each year and will change based on your age. Your premium is payable monthly in arrears.

Your premium will generally increase with age. You will be notified of your new premium in your annual statement. If the Insurer accepts any requested changes to your cover (e.g. a Sum Insured increase), your premium will be recalculated at the date of change. In this case, we will confirm your new premium in writing.

Your cover may be cancelled if you do not have enough money in your account to pay your insurance premium amount and insurance fee.

The premium rates for Voluntary Cover are provided in Appendix C for Death and TPD cover and Appendix D for IP cover. These rates are inclusive of stamp duty.

You will receive at least 30 calendar days' notice if the premium rates described in this Booklet increase.

If you have IP cover, your premium will be waived while you are receiving a Total Disability or Partial Disability Benefit.



In addition to the insurance premium that is payable, an insurance fee of \$25 per annum will apply for insurance member services in relation to any Life Stages Cover and/or Voluntary Cover you may hold. This fee (calculated pro rata of the annual fee for the number of days in the month) will be deducted from your account balance at the end of each month). Refer to 'Other fees' in the 'Additional explanation of fees and costs' section of the *Product Guide* for more information.

3.8 Protection against inflation

To protect the value of any fixed dollar Voluntary Cover against erosion by inflation, the amount of your Benefit(s) will automatically index (increase) on 1 July each year (to a maximum cover limit allowed for each type of cover).

The increase will normally be based on an Indexation Factor. On 1 July each year:

- Benefits under Voluntary Cover for Death cover (including Terminal Illness) and TPD cover will be increased by the lesser of the Indexation Factor or 5%, and
- Benefits under IP cover will be increased by the lesser of the Cover Indexation Factor or 5%.

The Indexation Factor will not apply to any Interim Accident Cover or to Life Stages Cover.

Opting out of indexation increases

You can decide not to index your fixed dollar Voluntary Cover Benefits, either for the current year only or ever again, by advising us in writing within 30 calendar days of the date of your annual statement.

You can reapply to add indexation increases at anytime, and the indexation calculation will occur at 1 July following acceptance of your request.

If you reinstate cover, the indexation nomination that applied to your cover would apply to your re-instated cover.

If you have opted out of indexation increases in respect of IP cover, the monthly Disability Benefit after any Disability claim ends will be equal to the monthly Disability Benefit that applied to you prior to the commencement of the claim.

You can apply to opt out or opt back into indexation increases by completing the *Managing your Insurance Cover form*, available at mercersuper.com.au/login or by contacting the Helpline.

4. What's not covered

Like every insurance policy, there are certain exclusions you need to be aware of.

In addition to the exclusions in this section, the Insurer will not make any Benefit payment under the policy if the payment would cause the Insurer to infringe any Health Insurance Legislation.

Death (including Terminal Illness) and TPD cover

No Benefit will be payable for Death and TPD cover under Life Stages Cover or Voluntary Cover if a claim is caused by, or is in any way contributed to by:

- For Death (including Terminal Illness) cover: your suicide within the first 13 months of commencing or increasing cover,
- For TPD cover: any intentional self-inflicted act or Injury or attempted suicide by you within the first 13 months of commencing or increasing cover, or
- Any exclusions or restrictions the Insurer applied to you as a condition of acceptance of cover.

IP cover

A Temporary Disability Benefit will not be payable under IP cover if a claim is caused by, or is in any way contributed to by:

- An intentional self-inflicted injury,
- Uncomplicated pregnancy or childbirth unless Temporary Disability continues for longer than three (3) months after the pregnancy ends, in which case the Temporary Disability will be considered to have started at the date the pregnancy ends,
- War,
- Service in the armed forces of any national or international organisation (other than non-active service within Australian armed forces reserve units within Australia) where the services was in the five years prior to the Date of Claim, or
- Any exclusion or restriction the Insurer may apply to you as a condition of acceptance of cover.

5. What are the Benefits

When you make a claim, a Benefit is payable subject to the Benefit payment terms and conditions (and exclusions) in this section and throughout this Booklet.

5.1 Paying your Benefits

Death (including Terminal Illness) or TPD Benefit

While a member of Mercer MyChoice, you will need to meet the Insurer's definition of Terminal Illness or TPD before being eligible for one of these Benefits.

At the time of a TPD claim, the part of the TPD definition you will be assessed against will be determined by your status immediately prior to the Date of Claim.

The trustee must meet various legal requirements before it can pay a Benefit to you or your beneficiary. While we make every effort to pay Benefits quickly, there may be a significant time between the date of Death or TPD and the Benefit payment.

The trustee can only pay a Benefit if:

- The Insurer has accepted the claim,
- The insurance proceeds have been received from the Insurer, and
- You satisfy a relevant condition of release under superannuation law.

Refer to the *Accessing Your Super* Fact Sheet at mercersuper.com.au/pds for details about the conditions of release under superannuation law.

We will deduct any applicable tax from your Benefit payment.

IP Benefit

You will need to meet the Insurer's definition of Total Disability or Partial Disability before being eligible for an IP monthly Temporary Disability Benefit.

If your claim is accepted, your monthly Temporary Disability Benefit payments will:

- Be paid monthly in arrears,
- Be net of Pay As You Go (PAYG) tax and usually made at the end of each month following the end of the Waiting Period,
- Continue up to the nominated Benefit Period as long as you remain Totally Disabled, and
- Pro-rated where a Benefit is payable for less than a whole month.

If you are Partially Disabled, you will receive a portion of the monthly Temporary Disability Benefit that takes into account your Return to Employment Earnings and Other Payments.

Premiums for your IP cover will stop being deducted from your super account while you are receiving a Benefit.

If you have a Benefit Period greater than two years, your Benefit will be indexed and the Benefit Indexation Factor is applied on 1 July.

The Insurer will generally review your case monthly to determine if you remain eligible for your IP Benefit. You will need to provide the Insurer with medical and other information if required.

5.2 How your Benefits are calculated

Death (including Terminal Illness)

If you die, a lump sum will be paid equal to the amount of your Death Benefit calculated as at the Date of Claim.

If you suffer a Terminal Illness, a lump sum will be paid equal to the amount of the Death Benefit calculated as at the Date of Claim (up to a maximum of \$3 million).

If the Terminal Illness Benefit paid is less than your Sum Insured for TPD, then your Sum Insured for TPD will be reduced by the amount paid and your reduced cover will continue subject to the terms of the policy.

If your Death Benefit is greater than \$3 million, the remaining balance of the Death Benefit will be paid if you die before your cover ends (subject to the terms and conditions (and exclusions) outlined above).

For Voluntary Cover, your Death Benefit includes any Sum Insured increases as a result of indexation (see section 3.8 'Protection against inflation' in this Booklet for more information).

However, your Benefit will be reduced by:

- Any TPD Benefit paid or payable under your cover for Death and TPD, and
- Any Terminal Illness Benefit paid or payable under your cover for Death or Death and TPD.

TPD

A lump sum will be paid equal to the amount of your TPD Benefit at the Date of Claim (subject to the maximum Sum Insured).

Fixed dollar Voluntary Cover will include any Sum Insured increases as a result of indexation (see section 3.8 'Protection against inflation' in this Booklet for more information).

Your TPD Benefit will be reduced by any Terminal Illness Benefit paid or payable under your cover for Death or Death and TPD.

IP

Temporary Disability Waiting Period

A monthly Temporary Disability Benefit will be paid to you for each day you are Temporarily Disabled after the Waiting Period while you have IP cover. The Waiting Period will start on the Date of Claim and you must be:

- Totally Disabled for at least 14 consecutive days of the Waiting Period, and
- Then continue to be Temporarily Disabled for the remainder of the Waiting Period for a Temporary Disability Benefit to be payable.

If, during the Waiting Period, after 14 consecutive days of being Totally Disabled, you do not meet the definition of Totally Disabled for more than five consecutive days, then a new Waiting Period will start from when you are next Totally Disabled.

Total Disability Benefit calculation

A monthly Total Disability Benefit will be paid to you for each day you are Totally Disabled after the Waiting Period while you have IP cover. The Monthly Benefit payable to you will be the lesser of:

- The amount of cover the Insurer has agreed to provide to you,
- The amount calculated by multiplying 75% by your Monthly Pre-disability Earnings, and
- \$30,000 per month.

The amount of this Benefit is reduced by any income received from other sources (see 'When an IP Benefit is reduced' in section 5.3 in this Booklet for more information).

If you are entitled to a Total Disability Benefit, it will be paid to you as follows:

- Where you have a Superannuation Contribution Benefit nominated then this amount will be paid into your Mercer MyChoice account, and the remaining Total Disability Benefit will be paid to you.

- If you do not have a Superannuation Contribution Benefit nominated then 100% of the Total Disability Benefit will be paid to you.

Partial Disability Benefit calculation

If you are Partially Disabled, you will be earning some income from employment, but you are not able to perform at full physical capacity as per normal for work. In this case, a monthly Partial Disability Benefit will be paid to you for each day you are Partially Disabled after the Waiting Period while you have IP cover. Your monthly Partial Disability Benefit is calculated as follows:

Monthly Pre-disability Earnings – Return to Employment Earnings	X	Monthly Benefits
Monthly Pre-disability Earnings		

The amount of this Benefit is reduced by any income received from other sources (see 'When an IP Benefit is reduced' in section 5.3 in this Booklet for more information).

If you are entitled to a Partial Disability Benefit, it will be paid to you as follows:

- Where you have a Superannuation Contribution Benefit nominated then it will be paid into your Mercer MyChoice account, and the remaining Partial Disability Benefit will be paid to you.
- If you do not have a Superannuation Contribution Benefit nominated then 100% of the Partial Disability Benefit will be paid to you.

When a Temporary Disability Benefit ceases to be paid

A monthly Temporary Disability Benefit will be paid to you monthly in arrears until the earliest of the following events:

- You are no longer Temporarily Disabled, or
- Your Benefit Period ends, or
- Your cover for IP ends (see section 6.2 'When cover ends' in this Booklet), or
- In the case where you are residing or traveling outside Australia, 6 months after the end of the Waiting Period unless you can provide supporting medical evidence to the Insurer's satisfaction of continued Temporary Disablement from a Medical Practitioner, or
- The date you refuse to undertake reasonable treatment or rehabilitation as recommended by an appropriate Medical Practitioner which could, in the Insurer's opinion, be expected to assist your ability to return to Gainful Employment on any basis, or
- The date you, in the Insurer's opinion, fail to take all reasonable steps to return to your Usual Occupation if you have the capacity to do so.

Benefit indexation while on claim

The Insurer will increase the IP Benefit and your Monthly Pre-disability Earnings at each 12 month anniversary of when the Benefit first became payable on the current claim. The increase (indexation) will be the lesser of the annual change in the Benefit Indexation Factor or 5%. Benefit indexation does not apply to a 2 year Benefit Period.

5.3 IP Benefit payment conditions

What happens when a Total Disability or Partial Disability reoccurs

If you have a subsequent period of Temporary Disability, it will be deemed to be a continuation of an earlier period of Temporary Disability as long as your cover continues to be in force and your Temporary Disability is caused, directly or indirectly, by the same or related Illness or Injury.

For a Temporary Disability to be deemed a continuation of an earlier period of Temporary Disability then it needs to occur:

- Within six months of the date your previous claim ceased (that is, the date you were no longer Temporarily Disabled), then the Insurer will:
 - treat the subsequent period of Temporary Disability as a continuation of the previous claim, and
 - waive the Waiting Period for the subsequent period of Temporary Disability, or
- If the Temporary Disability is greater than six months after the date your previous claim ceased, a new Waiting Period will be required to be served and the Benefit Period will be the agreed Benefit Period, less the period for which a claim has already been paid for the same or related Illness or Injury.

Claiming an IP Benefit when you are on Employer Approved Leave

You can lodge a claim for an IP Benefit if you have taken Employer Approved Leave for up to 24 months, provided the required premiums and other charges in respect of the cover are paid.

Where you become Temporarily Disabled during a period of unpaid Employer Approved Leave for up to 24 months, the Temporary Disablement Benefit will start to accrue from the later of:

- The day after the expiry of the Waiting Period, and
- The return to work date agreed with the employer.

When an IP Benefit is not paid

No benefit is payable:

- After the Benefit Period has ended,
- When the cover ends (see section 6.2 'When cover ends' in this Booklet), and
- If Total Disability or Partial Disability is caused by more than one Illness or Injury, a Benefit will only be paid in respect of one Illness or Injury at any one time.

Please also see section 4 'What's not covered' in this Booklet for more information on exclusions that apply.

When an IP Benefit is reduced

The Total Disability Benefit and Partial Disability Benefit may be reduced by any amounts paid or payable to you, known as Other Payments, in relation to the Injury or Illness from the following sources:

- another income protection insurance policy, salary continuance insurance policy, loan protection insurance policy, or similar policy, in any jurisdiction;
- any workers' compensation, motor accident compensation, statutory compensation or similar scheme, however named, in any jurisdiction or other similar state, federal, territory or extraterritorial legislation;
- common law or under state, federal, territory or extraterritorial legislation unless excluded below;
- employer-funded sick leave, personal leave or any other employer-paid leave in any jurisdiction (except if the sick leave entitlements must be requested by you to be paid and they have not requested the payment for the relevant period);
- any out of court settlement sum, or any award of money sum by a court, tribunal, arbitrator or government body in any jurisdiction;

It does not include:

- an amount paid or payable under the Policy or Return to Employment Earnings;
- Centrelink, Department of Veterans Affairs, or any equivalent or replacement agencies;
- a total and permanent disability, terminal illness or critical illness type lump sum benefit;
- annual leave or long service leave; or
- a pension or annuity paid from a superannuation fund other than a disability pension,

The Insurer will not consider any portion of an amount paid or payable to you to be an Other Payment, if you establish to the Insurer's satisfaction, acting reasonably, that it represents or covers compensation for or payment in respect of:

- pain and suffering;
- the loss of a part, or the use of a part of the body to the extent that such compensation is not income or capital (as those terms are understood having regard to normal accounting standards and practice);
- medical expenses; or
- reasonable legal expenses,

Temporary Disability Benefit Calculation

The Insurer will reduce the Total Disability Benefit they pay in a month such that the Temporary Disability Benefit plus Other Payments plus Return to Employment Earnings does not exceed:

- 75%* of your Monthly Pre-Disability Earnings if Totally Disabled; or
- 100% of your Monthly Earnings if Partially Disabled.

* This percentage increase to 87% if you have elected a Superannuation Contribution Benefit.

Example 1: Temporary Disability Benefit offset for workers compensation

	Calculations	Description
Monthly Pre-Disability Earnings	\$10,000	
Temporary Disability Benefit	$75\% \times \$10,000 = \$7,500$	75% of Monthly Pre-Disability Earnings
Other Payment	\$3,000 per month	Amount received for workers compensation
Potential earnings from all sources	$\$7,500 + \$3,000 = \$10,500$	Temporary Disability Benefit plus Other Payment. As the earnings from all sources (\$10,500) is more than 75% of Monthly Pre-Disability Earnings (\$7,500) an offset will apply.
Total Offset amount	$\$10,500 - \$7,500 = \$3,000$	Earnings from all sources less 75% of Monthly Pre Disability Earnings.
Benefit Payable	$\$7,500 - \$3,000 = \$4,500$	Temporary Disability Benefit less Other Payment amount.

Example 2: Partial Disability Benefit offset for motor accident compensation

	Calculations	Description
Monthly Pre-Disability Earnings	\$9,000	
Monthly Benefit	$\$9,000 \times 75\% = \$6,750$	The amount agreed with the Insurer or 75% of Monthly Pre-Disability Earnings
Return to Employment Earnings	\$4,000	Any Earnings which, in the Insurer's opinion, you could reasonably be expected to earn while Temporarily Disabled during that month.
Temporary Disability Benefit	$(\$9,000 - \$4,000) / \$9,000 \times \$6,750 = \$3,750$	$(A - B) / A \times C$ where: <ul style="list-style-type: none"> • A is your Monthly Pre-Disability Earnings • B is your Return to Employment Earnings • C is your Monthly Benefit
Other Payments	\$2,000 per month	Amount received for motor accident compensation
Potential Earnings from all sources	$\$4,000 + \$3,750 + \$2,000 = \$9,750$	Return to Employment Earnings plus Partial Disability Benefit plus Other Payments Since this amount exceeds 100% of the pre-Disability Earnings, the Benefit will be reduced.
Total Offset amount	$\$9,750 - \$9,000 = \$750$	Earnings from all sources less 100% of Monthly Pre Disability Earnings.
Benefit Payable	$\$3,750 - \$750 = \$3,000$	The Partial Disability Benefit less the total offset amount

Where an Other Payment is in the form of a lump sum or is commuted to a lump sum, the Monthly Benefit will be reduced by an amount equal to one sixtieth (1/60) of the lump sum over a period of sixty months or the remainder of the Benefit Period, whichever is the less.

For example: A lump sum paid for \$180,000 for loss of earnings due to a motor vehicle accident would be converted to a monthly amount of \$3,000 (\$180,000/60). The offset would then be applied as per the Total and Partial Disability Benefit offset examples shown above.

6. Other important information

6.1 Cooling off period

If you cancel your cover within 30 calendar days of the cover start date, and you haven't made a claim, we will refund any insurance premiums you've already paid.

6.2 When cover ends

For Life Stages Cover and Voluntary Cover

Cover will continue until the earliest of:

- For Death cover (including Terminal Illness), on your 70th birthday,
- For TPD cover, on your 65th birthday,
- For IP cover, on your 65th birthday,
- The date we receive your request to cancel cover,
- The date you die,
- The date a Terminal Illness Benefit has been paid that equals your Sum Insured for Death and the Sum Insured for TPD,
- The date a TPD Benefit has been paid that equals the Sum Insured for Death,
- Cover for all Benefits in respect of you ceases,
- Two calendar months from the last date a premium was deducted, or from last day of the month in which cover starts,
- The date you cease to be a Mercer MyChoice account holder,
- The date the policy issued by the Insurer ends,
- For IP cover, the date of expiry of the maximum 24 month Employer Approved Leave taken without pay, unless otherwise agreed by the Insurer before the expiry of such leave, or
- The date where we have not received any contributions or rollovers into your account for a continuous period of 16 months, and you have not elected to have or keep your cover.

6.3 Changing or cancelling cover

You can change or cancel insurance at any time.

To change your cover, complete the *Managing your Insurance Cover form* available at mercersuper.com.au/login or by calling the Helpline.

If you change your cover, we will send a notice of change to you which shows the effective date of the change. For Voluntary Cover, any notice we send to you forms part of your Insurance Certificate.

You can cancel your cover at mercersuper.com.au/login or by calling the Helpline.

6.4 Account inactivity

If we have not received any contributions or rollovers into your account for a continuous period of 16 months, and you have not elected to have or keep your cover, we are required by law to cancel your cover due to inactivity. This does not apply where you are an Australian Defence Force (ADF) Super member, or if you are a person who would be an ADF Super member if you had not chosen a fund – in which case you must tell us.

To opt in to maintain your cover even if your account becomes inactive, contact the Helpline.

6.5 How to reinstate your cover

If your Life Stages Cover and/or Voluntary Cover has been cancelled, or lapses due to non-payment of insurance premiums, you can apply to have your cover reinstated.

As long as your reinstatement request is received within 60 calendar days after the date that the cover was cancelled, the Life Stages Cover and/or Voluntary Cover will be reinstated subject to the following conditions:

- You have a Mercer MyChoice account, and you meet the applicable entry age for the relevant Benefit(s), and
- All outstanding amounts due in relation to the insurance are paid in full within 60 calendar days of cover ceasing.

If your reinstatement application is accepted, cover will be reinstated from the date cover was cancelled such that there is no gap in cover.

If your request is received more than 60 calendar days after the effective date of cover cancellation, new cover will be issued at the sole discretion of the Insurer from the date that the Insurer agrees in writing to provide cover.

You can apply to reinstate your cover by completing the *Reinstate your Insurance Cover form*, available at mercersuper.com.au/login or by contacting the Helpline.

6.6 How and when premiums are paid

We will deduct your premiums from your Mercer MyChoice account on the last day of the month, charged monthly in arrears.

In addition to any insurance premium, an insurance fee of \$25 per annum will apply for insurance member services in relation to any Life Stages Cover and/or Voluntary Cover you may hold. This fee (calculated pro rata of the annual fee for the number of days in the month) will be deducted from your account balance at the end of each month. Refer to 'Other fees' in the 'Additional explanation of fees and costs' section of the *Product Guide* for more information.

Where your premiums or any other amounts payable are overdue, we will notify you prior to your cover ending. Your insurance will be cancelled if these amounts are not paid within the timeframe specified in our notice to you.

Premiums may be adjusted if there is a delay in, or incorrect provision of, relevant information to calculate your premium.

6.7 Employer Approved Leave without pay

Life Stages Cover and Voluntary Cover will continue if you are on Employer Approved Leave without pay for up to 24 months. Your cover remains subject to the general policy end of cover rules outlined in section 6.2 'When cover ends' in this Booklet.

There is also no Insurer restrictions on payment of a Death, Terminal Illness, TPD or IP Benefit while on leave without pay. However, an IP Benefit will start to accrue from the later of:

- The day after the expiry of the Waiting Period, and
- The return to work date agreed with your employer.

6.8 Worldwide cover

You must advise us if you are working overseas permanently or no longer intend to work in Australia whilst being a member of your Plan. Keep your contact details up to date by contacting the Helpline so we can provide you with more information about what will happen to your insurance arrangements and other benefits under your Plan.

You will continue to be covered while overseas, subject to the terms outlined in this Booklet, provided there continues to be a sufficient account balance to deduct your premiums.

7. How to make a claim

A claim for Death, Terminal Illness, TPD or IP may be made if you die, or have an Illness or Injury, or become Terminally Ill.

You, your beneficiaries or estate must advise us as soon as reasonably possible of any claim or potential claim. We will provide you, your beneficiaries or estate with regular updates throughout your claim and we'll support you through the claim process. If you need help at any stage, call the Helpline.

1. Contact us

Use the contact details provided in the 'How to contact us' section at the front of this Booklet.

2. Confirm eligibility

We will ask you to provide us with information relating to your claim.

If we assess that you are not eligible to make a claim, we will explain this in writing and give you the opportunity to provide more information.

3. Claims pack

A claims pack will be emailed or posted to you within five business days.

Note: you will need to meet the costs associated with completing the claim pack (including the completion of any forms).

4. Claims assessment

You and your Medical Practitioner must provide the necessary documents and complete all application requirements to make a claim.

Once we have received all required documents and claim information, the Insurer will commence their assessment.

Where the Insurer needs further information to assess your claim, the Insurer may pay the cost to obtain this information.

Assessing a TPD claim can take around six to 12 months and an IP claim can take around three to six months. However, in many circumstances assessment can be completed sooner.

The Insurer needs to assess medical and other evidence for a TPD or IP claim. If you are overseas, you may have to return to Australia at your own expense for medical treatment or assessment, or the Insurer may require your medical treatment and assessment to be equivalent to Australian standards. If you are living or travelling overseas, you will need to pay the cost of returning to Australia.

We may refund the premiums to your account either:

- For the period the Insurer identifies you are not eligible to claim for any Life Stages Cover
- If you make a claim that is accepted and your cover ceases under the terms of the policy on the date you became eligible to claim.

The Insurer may, subject to law, consider your claim withdrawn or refuse to pay your claim if you do not meet the Insurer's requirements.

5. Trustee review

The trustee is committed to ensuring that the assessment you receive from the Insurer is fair and transparent, and that all final claim decisions are fair and reasonable.

We have a dedicated team who review your claim and will request any clarification or challenge decisions on your behalf, or in some cases, seek further information from you to support your claim.

6. Benefit payments

If you are eligible for a Death, Terminal Illness or TPD Benefit, the Benefit will be paid into your Mercer MyChoice account.

We can only release the Benefit to you if you meet the conditions of the Trust Deed and a condition of release for superannuation law purposes. If you do not meet these conditions, you will not be eligible for a TPD Benefit to be paid into your Mercer MyChoice account, nor to you personally.

For more information, see section 5 'What are the Benefits' in this Booklet and the 'Paying Your Benefits' section in the *Product Guide* for more information.



You must notify the trustee when your circumstances change. If you move or travel overseas for extended periods, you may lose your insurance cover.

8. Insurance definitions

Accident

Means an unforeseen violent, external and visible event.

Active Employment

Means you:

- Are employed by an employer and are performing, or capable of performing your identifiable duties,
- In the Insurer's opinion, are not restricted by Illness or Injury from being capable of performing your identifiable duties for at least 30 hours per week, even if not actually employed to work 30 hours per week,
- Are not in receipt of or entitled to claim Income Support Benefits from any source, and
- Have not previously been paid a TPD or terminal illness benefit from any source.

Australian Defence Force (ADF) Super member

Means a member of the Permanent Forces or a continuous full-time Reservist, defined in the Australian Defence Force Superannuation Trust Deed 2015 as a 'serving ADF Super member'.

Australian Resident

Means an Australian citizen or a New Zealand citizen living in Australia, or a permanent resident of Australia with an appropriate visa.

Benefit

Means the insured benefit payable under the Mercer MyChoice policy if you die, or you suffer a Terminal Illness, or you become Totally and Permanently Disabled, or you suffer a Temporary Disability as detailed in this Booklet.

Benefit Indexation Factor

In relation to IP, means the percentage change in the Consumer Price Index (CPI) (Weighted Average All Capital Cities) as last published by the Australian Bureau of Statistics in respect of the 12 month period finishing on 30 September each year.

This factor will be determined at 30 November each year and applied, where applicable, for the following calendar year, i.e. the CPI for the year ending 30 November 2023 will apply from 1 July 2024.

If this CPI is no longer produced, the Benefit Indexation Factor will be calculated based on a retail price index that the Insurer considers to be a reasonable replacement.

If the percentage change in this CPI (or any substitute for it) is negative, the Benefit Indexation Factor will be taken as zero.

Benefit Period

Means the maximum period for which the Insurer will pay a Monthly Disability Benefit in relation to the same or related Illness or Injury.

Cover Expiry Age

Means the age when your cover for a particular Benefit will cease.

Cover Indexation Factor

Means the percentage change in the Consumer Price Index (Weighted Average All Capital Cities) as last published by the Australian Bureau of Statistics in respect of the 12-month period finishing on 31 March of each year.

This factor will be determined at 1 July each year and applied, where indicated, for the following calendar year. If the Consumer Price Index (Weighted Average All Capital Cities) is no longer produced, then the Indexation Factor will be calculated based upon a retail price index We consider to be a reasonable replacement.

If the percentage change in the Consumer Price Index (Weighted Average All Capital Cities), or any substitute for it, is negative, the Indexation Factor will be taken as zero.

Date of Claim

Means in respect of a claim for a:

- a) Death Benefit, the date of death,
- b) Terminal Illness Benefit, the date (if two different dates, the later date) on which two Medical Practitioners (at least one of whom is a Specialist Medical Practitioner) certify that your life expectancy is likely reduced to 24 months or less,
- c) TPD Benefit, the later of the following:
 - i) the date you cease to work due to Injury or Illness, and

- ii) the later of the dates a Medical Practitioner:
 - a. first examines you in relation to the Illness or Injury for which you are claiming, and
 - b. has stated, in a written format acceptable to the Insurer, as being the date that you suffered from the Illness or Injury that is the principal cause of your inability to work,

d) Temporary Disability Benefit, the later of the following:

- i) the date you cease to work due to Illness or Injury, and
- ii) the date a Medical Practitioner has stated, in a written format acceptable to the Insurer, as being the date that you suffered from the Illness or Injury that is the principal cause of your inability to work.

If (ii) is less than seven (7) days after (i), then the Waiting Period will start on the date determined under (i), otherwise it will be the date determined under (ii).

DSM

Means the latest edition of the *Diagnostic and Statistical Manual of Mental Disorders* issued by the American Medical Association. If the *Diagnostic and Statistical Manual of Mental Disorders* is no longer used or published, the Insurer will use another manual, as agreed between us and the Insurer, which is similar to it for the determination as determined by the Royal Australian and New Zealand College of Psychiatrists.

Earnings

Means a member who is:

- a) An employee (who is not Self-employed), the remuneration package including:
 - i) salary, wages, director's fees, allowances, packaged fringe benefits, pre-tax superannuation contributions, plus
 - ii) regular (having regard to the last 3 years) commissions, bonuses and overtime payments,
- b) Self-employed, your share of the net profit and/or net loss of the business, whether the income is paid to you or not.

Income from your business is calculated after the deduction of expenses necessarily incurred or normally required in producing that income but before the deduction of tax.

Where the business income, expenses, profits or losses are accounted for in multiple business entities and/or structures, the Insurer will consider all these entities in determining Earnings.

Where income is split with or paid to a family member who is not involved in the generation of that income, the Insurer will allocate that income (minus remuneration expenses commensurate with the role of the family member) to you.

In the case where you have multiple roles to whom a combination of these situations applies, these elements of your Usual Occupation are taken together.

Income paid from other disability income policies, retirement plans, lump sum disability payments, rental income and investment income are some examples of income we would not consider part of Earnings.

Employee

Means a person who is Gainfully Employed by the employer.

Employer Approved Leave

Means leave (including unpaid leave) that has been granted to an employee by their employer in accordance with the employer's employment practices, supportable by documentary evidence.

Everyday Work Activities

Means the following activities:

- a) Mobility – you can do the following:
 - i) walk without assistance more than 200 metres on a level surface without stopping, and
 - ii) bend, kneel or squat to pick something up from the floor from a standing position and straighten up again,
- b) Communicating – you can do the following:
 - i) speak in your first language to be understood in a quiet room,
 - ii) understand a simple message in your first language and relay that message to another person, and
 - iii) hear, which means you have not suffered the profound irrecoverable loss of all hearing in both ears, resulting in an auditory threshold of 91 decibels or greater, averaged at frequencies 500 hertz, 1000 hertz, and 3000 hertz, both natural and assisted, as certified by an appropriate Specialist Medical Practitioner approved by the Insurer,
- c) Vision – the ability to see which means you have not suffered the total and irrecoverable loss of sight (whether aided or unaided) of both eyes as a result of Illness or injury to the extent that:
 - i) visual acuity in both eyes, on a Snellen Scale after correction by the suitable lens is less than 6/60, or
 - ii) the visual field is reduced to 20 degrees or less of arc,

- d) Lifting – you can lift a 5 kilogram weight with either or both hands from a bench/table height, carry it over a 5-metre distance and place it back down at a bench/table height, and
- e) Manual dexterity – you can use your hands or fingers to manipulate small objects with precision (such as picking up a coin or fastening shoelaces or buttons, using cutlery, or using a pen or keyboard to write a short note).

Gainfully Employed or Gainful Employment

Means employed or self-employed for gain or reward, or in the expectation of 'gain or reward' in any business, trade, profession, vocation, calling, occupation or employment.

Note: 'gain or reward' envisages the receipt of remuneration, such as salary, wages, business income, bonuses, commissions, fees or gratuities, in return for personal exertion

Hazardous Occupation

Means an occupation that the Insurer determines as an occupation involving hazardous or very heavy manual work or presenting particular underwriting difficulties.

Health Insurance Legislation

Means the National Health Act 1953 (Cth), Health Insurance Act 1973 (Cth), Private Health Insurance Act 2007 (Cth) or any similar legislation or regulation in connection with health insurance, as amended from time to time.

Illness

Means a sickness or disease.

Income Producing Duty

Means a duty of your Usual Occupation which generates your Earnings.

Duties means the activities or tasks that are normally required for, and form a significant and integral part of, the performance of your occupation that cannot be omitted or modified.

Duties do not include:

- Activities or tasks which are not necessary to perform the occupation within the trade/profession (for example, duties that are not necessary with another employer or within another business), or
- The commute to and from a place of work.

Income Support Benefits

Means monetary benefits which are paid or entitled to be paid to replace your loss of income or income earning capacity as a result of Injury or Illness and include, but are

not limited to, the following categories of benefits:

- Benefits payable under Commonwealth or State legislation to replace loss of income or income earning capacity due to disability,
- Benefits payable under an insurance policy to replace loss of income due to disability, whether or not those benefits are payable directly to you,
- Benefits payable under a superannuation fund in respect of your temporary incapacity.

Indexation Factor

Means the percentage change in the Consumer Price Index (Weighted Average All Capital Cities) as last published by the Australian Bureau of Statistics in respect of the 12-month period finishing on 31 March of each year.

This factor will be determined at 1 July each year and applied, where indicated, for the following calendar year. If the Consumer Price Index (Weighted Average All Capital Cities) is no longer produced, then the Indexation Factor will be calculated based upon a retail price index the Insurer considers to be a reasonable replacement.

If the percentage change in the Consumer Price Index (Weighted Average All Capital Cities), or any substitute for it, is negative, the Indexation Factor will be taken as zero.

Injury

Means bodily injury solely resulting from an Accident.

Insurer

Means TAL Life Limited (ABN 70 050 109 450, AFSL 237848).

Interim Accident Cover

Means cover provided in the event of death, TPD or Temporary Disablement (as applicable) as a result of an Accident that the Insurer may provide to you while assessing your application for the relevant cover.

Life Event

Means one of the following events that occurs to you for which the Insurer may provide additional cover to you:

- The birth of your child,
- The adoption of a child by you,
- The start of your de facto relationship or marriage,
- A dependent child of yours starts secondary school,
- The end of your de facto relationship or divorce,
- The completion of your undergraduate degree at a registered institution recognised on the register maintained by the Tertiary Education Quality and Standards Agency or a comparable Australian government body as applicable,

- Effecting a mortgage with a mortgage provider or lender who holds an Australian Credit Licence on the purchase of your primary place of residence (either alone or jointly with another person),
- Increasing an existing mortgage with a mortgage provider or lender who holds an Australian Credit Licence for the purposes of building or renovation on your primary place of residence, or
- If you are an Employee (and are not Self-employed), you have an increase in Salary of more than 10%.

Limited Cover

Means cover provided in Mercer MyChoice for you is only with respect to claims arising from:

- a) An Illness, the symptoms of which first became apparent, or
- b) An Injury which first occurred,

on or after the date cover commenced, or the date cover was increased (as applicable).

The Illness or Injury referred to in paragraph (a) and (b) respectively cannot be caused by, or in any way contributed to by, any Illness or Injury you were aware of, or a reasonable person in your position would have been aware of, at any time prior to the commencement of Limited Cover.

Maximum Cover Limit

Means the maximum amount of cover you can apply for and are entitled to be paid.

Medical Practitioner

Means, unless the Insurer agrees otherwise, a medical practitioner legally qualified and registered with the Australian Health Practitioner Regulation Agency (AHPRA) to practice in Australia, but shall not include chiropractors, physiotherapists, psychologists or alternative health providers.

The Medical Practitioner cannot be:

- You,
- Your spouse or partner in a de facto relationship, parent, child, sibling or close family relative,
- Your business partner, associate, employer or employee, or
- Your fellow shareholder or unit holder in a company or trust that is not a publicly listed company or trust.

Monthly Benefit

For IP means the lesser of:

- The amount calculated as 75% of your Pre-Disability Earnings, and where applicable a Superannuation Contribution Benefit of 12%,
- The amount of cover the Insurer has agreed to provide in respect of you, or
- \$30,000 per month.

Monthly Pre-Disability Earnings

For IP means if you are:

- Self-employed or unemployed, your average monthly Earnings over the last two financial years that have ended immediately before the start of the Waiting Period, or
- An employee (and you are not Self-employed), your average monthly Earnings immediately before the start of the Waiting Period.
- If you are on unpaid Employer Approved Leave for up to 24 months, your average monthly Pre-Disability Earnings will be calculated based on the period immediately before you went on unpaid Employer Approved Leave for up to 24 months.

If you have multiple roles to which a combination of these situations applies, the elements of your Pre-Disability Earnings are taken together.

Other Payments

Means, subject to paragraphs (d) and (e) of this definition, any amount paid or payable in connection with, or arising out of, the Illness or Injury causing your Temporary Disability which you may receive or be entitled to receive during a month a benefit is payable including but not limited to:

- a) Any amount paid or payable:
 - i) under another income protection insurance policy, salary continuance insurance policy, loan protection insurance policy, or similar policy, in any jurisdiction,
 - ii) under any workers' compensation, motor accident compensation, statutory compensation or similar scheme, however named, in any jurisdiction or other similar state, federal, territory or extraterritorial legislation,
 - iii) under unwritten law or under state, federal, territory or extraterritorial legislation,
 - iv) as employer-funded sick leave, personal leave or any other employer-paid leave in any jurisdiction (except if the sick leave entitlements must be requested by you to be paid and you have not requested the payment for the relevant period),

- b) Any out of court settlement sum, or any award of money sum by a court, tribunal, arbitrator or government body in any jurisdiction,
- c) Whether an amount under paragraph (a) of this definition is:
- i) a lump sum, a periodic payment, a combination of a lump sum and a periodic payment, or otherwise, or
 - ii) in the nature of a capital payment or income payment (as those terms are understood having regard to normal accounting standards and practice),
- has no bearing on whether that amount is an Other Payment or otherwise,
- d) Note that an Other Payment does not include:
- i) an amount paid or payable under this policy or Return to Employment Earnings,
 - ii) payment from Centrelink, Department of Veterans Affairs, or any equivalent or replacement agencies,
 - iii) a TPD, terminal illness or critical illness type lump sum benefit,
 - iv) annual leave or long service leave, or
 - v) a pension or annuity paid from a superannuation fund other than a disability pension,
- whether a lump sum, a periodic payment, a combination of a lump sum and a periodic payment, or otherwise,
- e) In addition to the amounts, benefits and payments excluded under paragraph (d), the Insurer will not consider any portion of an amount paid or payable to you to be an Other Payment, if you establish to the Insurer's satisfaction, acting reasonably, that it represents or covers compensation for or payment in respect of:
- i) pain and suffering,
 - ii) the loss of a part, or the use of a part of the body to the extent that such compensation is not income or capital (as those terms are understood having regard to normal accounting standards and practice),
 - iii) medical expenses, or
 - iv) reasonable legal expenses,
- and, for clarity, to the extent that you cannot establish to the Insurer's satisfaction, acting reasonably, that any portion of an amount paid or payable to you represents compensation for or payment in respect of those items set out in (i) to (iv) above, the entirety of that amount will be deemed to be an Other Payment, and
- f) Where an Other Payment is in the form of a lump sum or is commuted to a lump sum, unless we and

the Insurer agree otherwise, the Monthly Benefit will be reduced by an amount equal to one sixtieth (1/60) of the lump sum over a period of 60 months or the remainder of the Benefit Period, whichever is the less.

Partial Disability or Partially Disabled

Means that solely because of Illness or Injury, you are:

- Working (whether or not for remuneration) in a reduced capacity or capable of performing at least one of your Income Producing Duties,
- Following the advice and treatment plan of a Medical Practitioner in relation to the Illness or Injury,
- Not capable of working more than 80% of your usual average working hours in the 12 months immediately before the start of the Waiting Period. The usual average working hours immediately before the start of the Waiting Period will be limited to 40 hours a week (if you were working more than 40 hours a week), and
- Unable to perform at least one Income Producing Duty necessary to generate income in your Usual Occupation.

You will be considered to be able to perform an Income Producing Duty of your Usual Occupation if you refuse to accept:

- Any reasonable modification or substitution of that duty, or
- The use of any appropriate assistive aids, including those available to you through the Insurer's rehabilitation service, that would enable you to perform that duty.

Previous Policy

Means the insurance policy in respect of you, which is a life policy as defined under the Life Insurance Act 1995 (Cth) which:

- Provided death cover, or total and permanent disablement cover, or salary continuance cover,
- That was in force on the day before your cover started under Mercer MyChoice, and
- That the Insurer agrees to treat as a Previous Policy for the purposes of Mercer MyChoice.

Psychiatric Impairment Rating Scale

Means the scale for assessing the whole-person impairment of a psychiatric disorder as applied by a Specialist Medical Practitioner who has undergone appropriate training in this assessment method. If the psychiatric impairment rating scale is no longer used or published, the Insurer will use another similar scale for the determination as determined by the relevant medical body.

Psychiatrist

Means a Medical Practitioner who is legally qualified as a practicing psychiatrist and registered with the Australian Health Practitioner Regulation Agency (AHPRA).

Return to Employment Earnings

For IP means, if you are Temporarily Disabled, the Earnings received by you during the month you make or which, though not actually received during the month, the Insurer reasonably apportions to you for the month, and any Earnings which, in the Insurer's opinion, you could reasonably be expected to earn while Temporarily Disabled during that month.

The potential Return to Employment Earnings will take into consideration your Return to Employment Earnings compared to the number of hours worked, and your capability to work compared to your average weekly working hours in the 12 months immediately before the start of the Waiting Period. The average working hours immediately before the start of the Waiting Period will be limited to the lesser of:

- Your normal average weekly working hours (excluding overtime), and
- 40 hours a week.

The potential Return to Employment Earnings will also take into consideration medical advice, which may include the opinion of your Medical Practitioner, the advice of experts in remuneration levels in the occupations that you are capable of performing, and other relevant information that the Insurer considers to be appropriate.

Salary

Means the remuneration components paid by the employer to you at the relevant time.

Self-Employed

Means you directly or indirectly own all or part of the business in which your work is performed, including where the business operates under a company structure (ignoring shares in publicly listed companies and shareholdings less than 5%).

Severe Cognitive Impairment

Means a total and permanent deterioration or loss of intellectual capacity has required you to be under continuous care and supervision of another adult person for at least six consecutive months and, at the end of those six consecutive months, you are likely to require permanent ongoing continuous care and supervision by another adult person.

Specialist Medical Practitioner

For Death and TPD Cover means a Medical Practitioner who is a specialist as determined by the relevant medical registration boards and registered with the Australian Health Practitioner Regulation Agency (AHPRA) and is currently practicing in a specialist area related to the Illness or Injury that the claim is for.

For IP cover means a Medical Practitioner who:

- If the claimed Illness is a mental health condition is a Psychiatrist, who has diagnosed the condition as a mental disorder using criteria outlined in the DSM, or
- Is a Medical Practitioner who is a specialist as determined by the relevant medical registration boards and registered with the Australian Health Practitioner Regulation Agency (AHPRA), and is currently practicing in a specialist area related to the Sickness or Injury that the claim is for.

The Specialist Medical Practitioner cannot be you, your spouse, a partner in a de facto relationship, a relative, business associate or partner, a fellow security holder in the same company/trust (ignoring publicly listed companies), employer or employee.

Sum Insured

Means the amount of cover that is in place for you under Mercer MyChoice which is agreed and calculated in accordance with the applicable number of units of Life Stages Sum Insured scale in section 2.5 in this Booklet and/or Voluntary Cover.

Superannuation Contribution

Means a compulsory contribution by the employer to a superannuation fund regulated by and complying with the Superannuation Industry (Supervision) (SIS) Act 1993 (Cth), on behalf of an Employee or a Contractor.

Temporary Disability or Temporarily Disabled

Means Total Disability or Partial Disability, as applicable.

Terminal Illness or Terminally Ill

Means:

- Two Medical Practitioners have separately certified in writing, 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 not more than 24 months after the date of the certification,
- At least one of the registered Medical Practitioners is a Specialist Medical Practitioner,
- The Illness or Injury and certification referred to in paragraph (a) occurs while you continue to have cover in Mercer MyChoice,

- For each of the certificates, the certification period has not ended, and
- The Insurer is satisfied, on medical or other evidence, that despite reasonable medical treatment, the Illness or Injury will lead to your death within 24 months of the date of the certifications.

Total and Permanent Disablement or TPD

Means you satisfy Part 1 or Part 2 of the TPD definition as applicable to you, based upon the following criteria while you have TPD cover in place under Mercer MyChoice:

Where you:	Applicable part of the TPD Definition
Satisfy all the following: a) You were less than 65 years of age at the Date of Claim, and b) You were either: i) Gainfully Employed at any time in the 16 months before the Date of Claim, or ii) On Employer Approved Leave at any time in the 24 months before the Date of Claim.	Part 1 or Part 2
Do not satisfy the criteria above.	Part 2

In forming their opinion with respect to Parts 1 and 2 of the definition, the Insurer will have regard to factors including, but not limited to:

- Any treatment, rehabilitation, training, retraining, re-skilling, work, or voluntary work that has been undertaken by the time the Insurer forms their opinion or could reasonably be expected to be undertaken by you following the time the Insurer forms their opinion, and
- All evidence available to the Insurer (medical or otherwise) for the period up to the time they form their opinion.

Part 1 of the TPD definition – unable to ever again engage in a suited occupation

Means in the Insurer's opinion, solely and directly as a result of an Illness or Injury, you:

- Have been continuously absent from Gainful Employment for an uninterrupted period of three (3) consecutive months immediately following the Date of Claim and continuing up to the date the Insurer forms their opinion,
- Are regularly attending and under the ongoing and appropriate care and treatment of a Medical Practitioner, including compliance with advice and treatment given by that Medical Practitioner, continuing up to the date the Insurer forms their opinion,
- Have exhausted all reasonable treatment options (medical or otherwise) and are not expected to attain any further improvement or recovery from the Illness or Injury, and

- Are disabled to such an extent that you will be unable to ever again engage in any occupation for which you are reasonably suited by education, training or experience at the end of the three consecutive month period immediately following the Date of Claim and by the time the Insurer forms their opinion.

Part 2 of the TPD definition – Everyday Working Activities or suffering from a severe chronic mental health condition or Severe Cognitive Impairment

Means in the Insurer's opinion, solely and directly as a result of an Illness or Injury, you:

- Satisfy the criteria in Part 1 and either (i), (ii) or (iii) below:
 - due to that Illness or Injury:
 - you have been prevented from being able to perform at least two Everyday Work Activities without assistance from another adult person, despite the use of appropriate aids, for at least six (6) consecutive months, and
 - you are unable to ever again be able to perform at least two of the Everyday Work Activities without assistance from another adult person, despite the use of appropriate aids, or
 - the Illness is a severe chronic mental health condition that:
 - has been diagnosed by a Specialist Medical Practitioner using criteria outlined in the DSM, and
 - you have been assessed by a suitably qualified Specialist Medical Practitioner, approved by the Insurer, under the Psychiatric Impairment Rating Scale as having an impairment of 19% or above, or
 - you have been assessed by a suitably qualified Specialist Medical Practitioner, approved by the Insurer, as having reached Severe Cognitive Impairment.

Total Disability or Totally Disabled

Means that solely because of Illness or Injury, you are:

- Not working in any capacity (this includes full-time, part-time and casual), whether or not for remuneration,
- Following the advice and treatment plan of a Medical Practitioner in relation to the Illness or Injury, and
- For the first 2 years of the Benefit Period, unable to perform all the Income Producing Duties necessary to generate income your Usual Occupation. If you had been working in more than one occupation, Usual Occupation will include all of those occupations, and
- After expiry of the first 2 years of the Benefit Period, unable to perform Any Occupation.

You will be considered to be able to perform an Income Producing Duty of your Usual Occupation if you refuse to accept:

- Any reasonable modification or substitution of that duty, or
- The use of any appropriate assistive aids, including those available to you through the Insurer's rehabilitation service, that would enable you to perform that duty.

Transferred Cover

Means insurance cover transferred from a Previous Policy.

Usual Occupation

Means the occupation or business in which you were working immediately before the start of the Waiting Period, unless you:

- Were Unemployed or on unpaid Approved Employer Leave for more than 24 consecutive months immediately before the start of the Waiting Period, 'Usual Occupation' will be replaced with 'Any Occupation', or
- Were Unemployed or on unpaid Approved Leave for less than six consecutive months immediately before the start of the Waiting Period, 'Usual Occupation' means the most recent occupation in which you were working prior to the start of the Waiting Period.

If you were Self-employed or worked on a contract basis and you have not performed any duties that directly generate income, or your business has not generated any income for more than six consecutive months before the start of the Waiting Period, 'Usual Occupation' has the same meaning as 'Any Occupation'.

Waiting Period

Means a continuous period of 30 days or 90 days, as selected by you when you apply for IP cover.

War

Means:

- Any invasion, act of armed aggression, hostilities (whether declared or not), civil war, rebellion, revolution, insurrection, or military or usurped power, nationalisation, by or under the order of any Government, foreign nation or Public authority,
- Acts of terrorists or other insurgent organisations, and
- Persons actively taking part in riots, civil commotions or civil unrest.

Appendix A:

Occupation categories

Occupation categories

The following occupation categories apply when you customise your cover. Your occupation category determines the occupation adjustment factor (that is used when calculating how much you pay for your insurance), as well as the type of insurance you can apply for. An occupation category does not apply to Life Stages Cover.

Occupation category	Description
Professional	You will be considered for the Professional category if you work in a low-risk clerical or management occupation and earn more than \$80,000 a year (including superannuation guarantee contributions). The \$80,000 per year may be adjusted on a pro-rata basis if you are a part-time employee.
White Collar	Office-based, including professionals such as accountants or lawyers and other occupations such as administrators or other tertiary educated people who work in sedentary positions.
Light Blue Collar	Not purely office-based and not only in sedentary roles. Occupational duties are not of a manual nature or within a hazardous environment. Some trade supervisory roles also fall into this category.
Blue Collar	Mostly manual occupational duties including occupations such as tradesmen, security guards and manufacturing type of occupations, including apprentices. For IP cover, for certain occupations within this category, a maximum Benefit Period of two or five years will apply.
Heavy Blue Collar	Majority of employees' occupations include heavy manual occupations and duties in hazardous environments, including occupations such as cleaners. For IP cover, the maximum Benefit Period is five years. For certain occupations within this category, the maximum Benefit Period is two years.

Occupation adjustment factor

An occupation adjustment factor is one factor that determines the cost of your insurance. The premium rates in Appendices C and D of this Booklet are shown for the 'White Collar' occupation rating. An occupation adjustment factor may apply for other categories shown above, which will change the premium rate that applies to any Voluntary Cover. The premium rates in Appendices C and D should be multiplied by the relevant occupation adjustment factor below if you are not in the 'White Collar' occupation category:

Occupation category	Occupation adjustment factor for Death cover	Occupation adjustment factor for TPD cover	Occupation adjustment factor for IP cover
Professional	0.9	0.9	0.9
White Collar	1	1	1
Light Blue Collar	1.3	1.5	1.5
Blue Collar	1.6	2	2
Heavy Blue Collar	2	2.5	3

Appendix B:

Duty to take reasonable care

Underwriting

When you apply for life insurance, the Insurer conducts a process called underwriting. It's how the Insurer decides whether they can cover you, and if so, on what terms and at what cost.

The Insurer will ask questions they need to know the answers to. These will be about your personal circumstances, such as your health and medical history, occupation, income, lifestyle, pastimes, and current and past insurance. The information you give in response to the questions is vital to the Insurer's decision.

The duty to take reasonable care

The trustee has entered into a life insurance contract to provide insurance arrangements for you. When applying for insurance, there is a legal duty to take reasonable care not to make a misrepresentation to the Insurer before the contract of insurance is entered into.

A misrepresentation is a false answer, an answer that is only partially true, or an answer which does not fairly reflect the truth.

This duty applies to a new contract of insurance and also applies when extending or making changes to existing insurance, and reinstating insurance.

If you do not meet your duty

If you do not meet your legal duty, this can have serious impacts on your insurance. There are different remedies that may be available to us. These are set out in the Insurance Contracts Act 1984 (Cth). These are intended to put us in the position we would have been in if the duty had been met.

Your cover could be avoided (treated as if it never existed), or its terms may be varied. This may also result in a claim being declined or a Benefit being reduced.

Please note that there may be circumstances where we later investigate whether the information given to us was true. For example, we may do this when a claim is made.

Before we exercise any of these remedies, we will explain our reasons and what you can do if you disagree.

Guidance for answering our questions

You are responsible for the information provided to us. When answering our questions, please:

- Think carefully about each question before you answer. If you are unsure of the meaning of any question, please ask us before you respond.
- Answer every question.
- Answer truthfully, accurately and completely. If you are unsure about whether you should include information, please include it.
- Review your application carefully before it is submitted. If someone else helped prepare your application (for example, your adviser), please check every answer (and if necessary, make any corrections) before the application is submitted.

Changes before your cover starts

Before your cover starts, we may ask about any changes that mean you would now answer our questions differently. As any changes might require further assessment or investigation, it could save time if you let us know about any changes when they happen.

If you need help

It's important that you understand this information and the questions we ask. Ask us or a person you trust, such as your adviser, for help if you have difficulty understanding the process of buying insurance or answering our questions.

If you're having difficulty due to a disability, understanding English or for any other reason, we're here to help. If you want, you can have a support person you trust with you.

Notifying the Insurer

If, after the cover starts, you think you may not have met your duty, please contact us immediately and we'll let you know whether it has any impact on the cover.

Appendix C: Premium rate table for Voluntary Cover – Death and TPD

How to calculate the cost of Voluntary Cover – Death cover, and Death and TPD cover

To estimate the monthly cost of your Death cover, or Death and TPD cover:

- Firstly, determine the Sum Insured you want for either Death cover, or Death and TPD cover. Divide this amount by 1,000.
- Multiply this number by the premium rate based on your age next birthday and gender (found in the table below).
- Multiply this number by the occupation adjustment factor applicable to you in Appendix A 'Occupation categories', and
- Add the annual insurance fee of \$25.

To estimate a monthly cost, divide by 12.

Example: Female office manager (White Collar), turning age 35 next birthday, with \$300,000 of Death cover

Sum insured	= \$300,000 Death cover
Insurance premium	= $(300,000 \div 1,000) \times (0.3450 \times 1)$ = \$103.50
Insurance fee	= \$25
Estimated annual cost	= \$103.50 + \$25 = \$128.50
Estimated monthly cost	= $\$128.50 \div 12$ = \$10.71

Annual premium per \$1,000 of cover (for white collar occupation category⁵)

Premium rates are inclusive of stamp duty.

Age next birthday	Death cover only (\$)		TPD cover only ⁶ (\$)		Death and TPD cover (\$)	
	Male	Female	Male	Female	Male	Female
16	0.3286	0.2378	0.3523	0.4720	0.6809	0.7099
17	0.3265	0.2321	0.3350	0.4513	0.6615	0.6834
18	0.3288	0.2285	0.2898	0.4309	0.6186	0.6594
19	0.3294	0.2227	0.2665	0.4239	0.5959	0.6466
20	0.3272	0.2289	0.2435	0.4182	0.5706	0.6471
21	0.3253	0.2311	0.2248	0.4109	0.5501	0.6419
22	0.3244	0.2247	0.2076	0.3919	0.5320	0.6166
23	0.3277	0.2120	0.1612	0.3649	0.4889	0.5769
24	0.3299	0.2090	0.1414	0.3670	0.4713	0.5760
25	0.3276	0.2151	0.1521	0.3750	0.4797	0.5902
26	0.3253	0.2311	0.1637	0.3778	0.4890	0.6088
27	0.3258	0.2423	0.1829	0.3775	0.5088	0.6197
28	0.3310	0.2455	0.1980	0.3847	0.5289	0.6302
29	0.3346	0.2454	0.2113	0.4016	0.5459	0.6470
30	0.3322	0.2569	0.2627	0.4288	0.5949	0.6857
31	0.3298	0.2796	0.3047	0.4530	0.6344	0.7326
32	0.3298	0.2980	0.3563	0.4827	0.6861	0.7808

⁵ Different premium rates apply for other occupation categories. See Appendix A 'Occupation categories' for more information.

⁶ Premium rates for TPD only are shown separately to help estimate premiums where you have different cover amounts for your Death and TPD components. However, TPD cover is not available without Death cover.

Age next birthday	Death cover only (\$)		TPD cover only ⁶ (\$)		Death and TPD cover (\$)	
	Male	Female	Male	Female	Male	Female
33	0.3350	0.3087	0.4024	0.5129	0.7374	0.8216
34	0.3416	0.3169	0.4471	0.5489	0.7887	0.8659
35	0.3492	0.3450	0.4912	0.5926	0.8404	0.9377
36	0.3648	0.3758	0.5318	0.6337	0.8966	1.0094
37	0.3877	0.3984	0.5631	0.6850	0.9508	1.0834
38	0.4167	0.4167	0.5949	0.7509	1.0116	1.1677
39	0.4490	0.4296	0.6228	0.8132	1.0718	1.2428
40	0.4909	0.4613	0.6446	0.8850	1.1355	1.3463
41	0.5419	0.4926	0.6607	0.9497	1.2026	1.4423
42	0.6002	0.5228	0.6809	1.0021	1.2811	1.5249
43	0.6627	0.5527	0.7074	1.0631	1.3701	1.6158
44	0.7277	0.6003	0.7556	1.1363	1.4833	1.7366
45	0.8068	0.6543	0.8092	1.2149	1.6160	1.8692
46	0.8892	0.7133	0.8634	1.2868	1.7527	2.0001
47	0.9635	0.7618	0.9419	1.3840	1.9054	2.1458
48	1.0406	0.8220	1.0364	1.4967	2.0770	2.3187
49	1.1250	0.8852	1.1553	1.6396	2.2803	2.5248
50	1.2320	0.9685	1.3145	1.8179	2.5465	2.7864
51	1.3470	1.0313	1.5265	1.9911	2.8735	3.0224
52	1.4550	1.0911	1.7942	2.2198	3.2492	3.3109
53	1.5736	1.1529	2.0946	2.5058	3.6682	3.6588
54	1.7215	1.2156	2.4153	2.8284	4.1368	4.0440
55	1.8850	1.2554	2.7642	3.1674	4.6493	4.4228
56	2.0422	1.3165	3.1361	3.5284	5.1784	4.8449
57	2.1999	1.3878	3.5206	3.9090	5.7206	5.2968
58	2.3913	1.4952	3.8776	4.2943	6.2689	5.7895
59	2.6190	1.6046	4.2476	4.6617	6.8665	6.2662
60	2.8544	1.7489	4.6328	4.9965	7.4872	6.7454
61	3.0885	1.9132	4.9763	5.2865	8.0647	7.1997
62	3.3305	2.1140	5.2333	5.6570	8.5638	7.7710
63	3.4674	2.2157	5.4062	5.8256	8.8736	8.0413
64	3.6124	2.3157	5.5604	5.9681	9.1728	8.2839
65	3.7446	2.4012	5.7097	6.1349	9.4543	8.5361
66	4.3622	2.5934	n/a	n/a	4.3622	2.5934
67	4.7109	2.7645	n/a	n/a	4.7109	2.7645
68	5.0873	2.9469	n/a	n/a	5.0873	2.9469
69	5.4939	3.1413	n/a	n/a	5.4939	3.1413
70	5.9330	3.3485	n/a	n/a	5.9330	3.3485

⁶ Premium rates for TPD only are shown separately to help estimate premiums where you have different cover amounts for your Death and TPD components. However, TPD cover is not available without Death cover.

Appendix D: Premium rate table for Voluntary Cover – IP

How to calculate the cost of Voluntary Cover – IP

To estimate the monthly cost of your IP cover:

- Firstly, determine the Sum Insured you want for IP cover per month. Divide this amount by 1,000.
- Multiply this number by the premium rate based on your age next birthday, gender, and the Waiting Period and Benefit Period you want (found in the table below).
- Multiply this number by the occupation adjustment factor applicable to you in Appendix A 'Occupation categories', and
- Add the annual insurance fee of \$25 (if applicable)*.

To estimate a monthly cost, divide by 12.

Example: Male coffee shop owner (Light Blue Collar), turning age 37 next birthday, with \$7,000 per month of IP cover (5 year Benefit Period and 90 day Waiting Period)

Sum insured = \$7,000 per month for IP cover

Insurance premium = $(7,000 \div 1,000) \times (22.59 \times 1.5)$
= \$237.20

Insurance fee* = \$25

Estimated annual cost = $\$237.20 + \25^*
= \$262.20*

Estimated monthly cost = $\$262.20 \div 12$
= \$21.85

*If you already hold Death cover, or Death and TPD cover, then you will not have to pay an insurance fee if you hold IP cover as well.

Annual premium per \$1,000 of Monthly Benefit (IP with a Benefit Period of 2 or 5 years for a white collar occupation category⁷)

Premium rates are inclusive of stamp duty.

Benefit Period	2 Years				5 Years			
Waiting Period	30 days		90 days		30 days		90 days	
Age next birthday	Male	Female	Male	Female	Male	Female	Male	Female
16	29.88	38.67	12.99	14.85	47.94	60.24	21.78	24.45
17	29.88	38.67	12.99	14.85	47.94	60.24	21.78	24.45
18	29.88	38.67	12.99	14.85	47.94	60.24	21.78	24.45
19	29.88	38.67	12.99	14.85	47.94	60.24	21.78	24.45
20	29.88	38.67	12.99	14.85	47.94	60.24	21.78	24.45
21	29.88	38.67	12.99	14.85	47.94	60.24	21.78	24.45
22	29.10	39.06	12.12	15.00	46.95	61.23	20.49	24.81
23	28.38	39.45	11.37	15.12	46.14	62.25	19.32	25.23
24	27.78	39.84	10.71	15.24	45.48	63.30	18.33	25.59
25	27.27	40.26	10.11	15.36	45.00	64.38	17.46	25.98
26	26.82	40.68	9.63	15.51	44.61	65.49	16.77	26.40
27	26.85	41.61	9.36	16.38	45.00	67.50	16.44	28.11
28	27.12	42.96	9.21	17.10	45.78	70.14	16.29	29.58

⁷ Different premium rates apply for other occupation categories. See Appendix A 'Occupation categories' for more information.

Benefit Period	2 Years				5 Years			
Waiting Period	30 days		90 days		30 days		90 days	
Age next birthday	Male	Female	Male	Female	Male	Female	Male	Female
29	27.60	44.67	9.12	17.70	46.92	73.38	16.29	30.81
30	28.32	46.71	9.18	18.24	48.45	77.25	16.47	31.98
31	29.22	49.05	9.30	18.81	50.37	81.69	16.83	33.15
32	30.33	51.75	9.51	19.35	52.62	86.70	17.34	34.38
33	31.62	54.72	9.84	20.04	55.23	92.31	18.00	35.79
34	33.12	58.02	10.23	20.85	58.23	98.43	18.87	37.44
35	34.77	61.62	10.71	21.81	61.53	105.15	19.92	39.42
36	36.63	65.46	11.31	22.98	65.25	112.41	21.12	41.82
37	38.70	69.63	12.03	24.42	69.33	120.21	22.59	44.64
38	40.95	74.01	12.84	26.13	73.80	128.58	24.30	48.09
39	43.38	78.69	13.80	28.20	78.66	137.49	26.28	52.14
40	46.05	83.67	14.94	30.60	84.00	146.97	28.59	56.88
41	48.90	88.89	16.23	33.39	89.73	157.02	31.23	62.40
42	52.05	94.41	17.73	36.57	96.00	167.70	34.32	68.76
43	55.41	100.20	19.47	40.20	102.84	178.98	37.86	75.96
44	59.07	106.29	21.45	44.31	110.22	190.89	41.94	84.15
45	63.03	112.71	23.70	48.87	118.26	203.49	46.62	93.30
46	67.32	119.43	26.25	53.94	127.02	216.84	51.96	103.50
47	71.97	126.54	29.22	59.49	136.56	230.97	58.11	114.75
48	77.04	134.04	32.58	65.55	146.94	245.94	65.13	127.11
49	82.56	141.96	36.36	72.15	158.31	261.84	73.11	140.58
50	88.56	150.30	40.71	79.26	170.73	278.73	82.20	155.19
51	95.13	159.18	45.57	86.88	184.35	296.70	92.49	170.94
52	102.30	168.63	51.06	95.01	199.29	315.93	104.13	187.86
53	110.16	178.68	57.24	103.65	215.70	336.51	117.27	205.86
54	118.80	189.45	64.14	112.77	233.76	358.56	132.09	225.00
55	128.25	200.97	71.94	122.37	253.62	382.32	148.74	245.19
56	138.69	213.39	80.58	132.36	275.61	407.94	167.40	266.40
57	150.15	226.80	90.27	142.80	299.85	435.66	188.25	288.60
58	162.84	241.29	101.04	153.60	326.64	465.72	211.44	311.61
59	176.85	257.04	112.95	164.70	356.37	498.48	237.27	335.46
60	192.39	274.23	126.15	176.10	389.34	534.21	265.26	359.01
61	209.64	293.01	140.76	187.74	399.81	535.92	271.98	349.62
62	228.84	313.65	156.87	199.56	378.66	494.64	258.30	314.19
63	250.20	336.36	173.34	209.97	337.53	431.28	227.46	262.23
64	219.90	292.26	140.13	163.47	258.60	327.12	165.09	183.33
65	96.84	129.15	45.51	51.99	112.98	143.43	53.10	57.75

How to contact us

Phone

Call the Helpline on **1800 682 525** or if calling from outside Australia on **+61 3 8306 0900** from 8am to 7pm (AEST/AEDT) Monday to Friday.

We can help you in a number of languages, simply ask for a translator when you call.

Online

[mercersuper.com.au](https://www.mercersuper.com.au)

Our website is available 24 hours per day, seven days per week. However, the website may not be available when we need to carry out scheduled updates or maintenance. If, for any reason, our online services are not available, you may call the Helpline for assistance. If our online services are not available, we are not responsible for any loss because you were unable to perform transactions during that time.

Mail

Mercer Super Trust
GPO Box 4303
Melbourne VIC 3001

Please include your Plan name and your member number when writing to us.

Member privacy

We collect, use and disclose personal information about you in order to manage your super benefits and give you information about your super. Our Privacy Policy outlines the type of information we keep about you and how we, and any organisations we appoint to provide services on our behalf, will use this information. If you do not provide the personal information requested, we may not be able to manage your super. You can read our Privacy Policy online at [mercersuper.com.au/privacy](https://www.mercersuper.com.au/privacy) or you can obtain a copy by calling the Helpline.

The Privacy Policy also includes details about how you may lodge a complaint about the way we have dealt with your information and how we will handle that complaint.

TAL privacy

Your privacy is important to the Insurer. By becoming a member, or otherwise interacting or continuing your relationship with the Insurer directly or via a representative or intermediary, you confirm that you agree and consent to the collection, use (including holding and storage), disclosure and handling of personal and sensitive information in the manner described in the TAL Privacy Policy on the Insurer's website (www.tal.com.au/privacy-policy) as updated from time to time.



Keep your contact details up to date

We can only send you information if we have your current contact details. You can update your details at [mercersuper.com.au](https://www.mercersuper.com.au) (sign in using your personal login) or call the Helpline.

If the law permits, we may send member communications to you electronically (including member statements and significant event notices) by:

- Email, and/or
- SMS, and/or
- A link to a website so you can download them.

We can also post any documents to you. When you receive your personal login details, simply update your communication preferences online under 'Personal Details' or call the Helpline.

