Applying for income protection payments









Being off work because of an accident or illness can be tough. We know you'll want a regular income, we aim to assess your claim as soon as possible.

This brochure will help you understand:

- **if you might qualify for income protection payments**
- **how to apply, and**
- **what happens after you submit your claim.**

September 2025

This information is about Cbus Super. It doesn't account for your specific needs. Please consider your financial position, objectives and requirements before making financial decisions. Read the relevant Product Disclosure Statement (PDS) and Target Market Determination to decide if Cbus Super is right for you. Call **1300 361 784** or visit **cbussuper.com.au**.

United Super Pty Ltd ABN 46 006 261 623 AFSL 233792 as Trustee for the Construction and Building Unions Superannuation Fund ABN 75 493 363 262 (Cbus and/or Cbus Super). Use of 'us', 'we', 'our' or 'the Trustee' is a reference to United Super Pty Ltd. Use of 'Fund' refers to Construction and Building Unions Superannuation Fund.

Insurance is issued under a group policy with our insurer, TAL Life Limited ABN 70 050 109 450 AFSL 237848.

1488.8 09-25 ISS7

Income protection cover provides a safety net in the form of monthly payments for eligible members whose working life is interrupted by disability.

What are income protection payments?

If you have income protection cover and need to stop working because of an accident or illness[1], you may be able to get a regular income to help see you and your family through while you can't do your usual job.

Payments will be for total or partial disability, depending on whether you can do some work or not. The insurer will decide this, based on information that you and your doctor provide.

Are you covered?

To see if you have income protection cover:

- log into your account at **cbussuper.com.au/login**
- check your latest statement – note that your cover may have changed since the statement was issued, or
- call us on **1300 722 152**.

If you're over 65 or a Personal Super member, you won't be insured for this type of benefit. If you're a Sole Trader or Corporate Super member, you may have received income protection automatically. Otherwise you'll only have income protection if you were eligible for it, you applied for it and your application was approved.

To find out more about eligibility and when cover may stop, see the insurance guide for your membership, available at **cbussuper.com.au/insurance** or call us for a copy.

You can't claim any income protection cover from Cbus Super if you've already got income protection through Media Super.

When can you make a claim?

You may be able to claim income protection payments if you can't work due to an accident or illness[1].

To receive payments, you must have had income protection cover when you became sick or injured and our insurer must be satisfied that you meet the policy terms and conditions.

Is there a waiting period?

Yes, a waiting period of 30 or 90 days will apply. This is how long you'll need to wait before any payments can start.

To check your waiting period, log into your account, see your latest statement or call us.

Your waiting period starts on the day your doctor certifies that you cannot work due to your accident or illness[1]. If your claim is accepted, you'll start receiving monthly payments once your waiting period ends. Or you may be able to delay your payments in some situations – see page 6 for more on this option.

If you return to your pre-disability duties and hours during your waiting period:

- for five days or less, and become totally disabled or partially disabled as a result of the same condition, those days will be added to your waiting period, or
- for more than five days, a new waiting period will start if you become totally disabled again.



[1] Prior to 1 April 2020, automatic income protection cover for Sole Trader Super members was for accidents only (not illnesses). So if your disability occurred before then, this may apply to you. Call us if you'd like further details.

How to apply

There are a few steps involved in making a claim, but we'll let you know what you need to do. If you have any questions along the way, please contact us.

1: Call our Claims team on 1300 722 152

During this call, we'll talk to you about your situation and check if you might qualify for a payment. We'll ask you about:

- your illness or injury
- the name and contact details of the employer where you last worked, and
- when you stopped working.

After we have gathered your relevant information, we will send you a claim pack.

What does the Claims team do?

Our Claims team will help you understand the process and lodge your claim with the insurer. They'll work with you to ensure we have all the required information with the aim of assessing your claim as soon as possible.

2: Prepare your application

The next step is to supply some information so your claim can be assessed. Details will be in the letter we post or email to you. You'll need to:

- complete a claim form
- ask your doctor to complete a form about your condition and provide any medical reports, test results or other evidence to support your claim
- provide proof of identity (see options below)
- sign a form so the insurer can access information needed to assess your claim (such as medical records).

The insurer may contact your employer to confirm your employment details before you stopped working.

You can provide your proof of identity in one of three ways

Option 1. Electronic ID

Write the details of your ID on the forms you're sending us. We'll use the details you give us to do an electronic ID check. You'll need to have these handy:

- Medicare card **and**
- Australian driver's licence or Australian passport

Option 2. By email (Selfie ID)

Email us your form and electronic copies (scanned or clear photos) of your ID. Your ID doesn't need to be certified. Send us:

- a photo of you holding your Australian driver's licence and a clear photo of the back of the driver's licence **or**
- a photo of you holding your passport.

Take your selfie close-up so we can see the writing on your ID

Option 3. Provide a certified copy of your Australian driver's licence or Australian passport

You'll need to post or give us your form with certified copies of documents. To certify your documents:

1. **Make copies.** Remember to copy both sides if your ID is double-sided (for example, your driver's licence).
2. **Take the original documents and your copies to a post office or police station.** If you can't get to a post office or police station, see our *Identification requirements* brochure at **cbussuper.com.au/id** or call us to find out who else can certify your documents.
3. **Ask them to certify your copies.** They'll compare your original identification with the copies and certify them.
4. **Send us your certified copies.** Send your certified copies (not the originals) to us along with any other forms and documents we asked for. You can send certified documents to us in the post, or provide them to us in person by visiting a front counter or contacting your local Coordinator. Visit **cbussuper.com.au/contact** to find their details.

For help and further detail visit **cbussuper.com.au/id**

3: Check your application and send it to us

Before sending us your application, make sure:

- your doctor's form is fully completed and signed
- you've got everything we asked for in our letter (including certified copies of your ID) if required, and
- you've signed any forms you needed to complete.

It could take time for your doctor to complete the form, so you might need to schedule an appointment to see them. We recommend contacting your doctor to understand their requirements. Please note your doctor may charge an additional fee for completing this form, which will be your responsibility to cover.

When you have everything ready, please scan and email or post your completed forms to our Claims team. (Any certified copies **must** be posted or provided to us in person.)

Email: **claims@cbussuper.com.au**
Post: **Cbus Super, Locked Bag 5056 PARRAMATTA NSW 2124**

4: The insurer assesses your claim

The insurer will review the information they've received and let you know if they need anything else to assess your claim. They may:

- request additional financial records, especially if you're self-employed
- ask you about your condition and your work duties before your accident or illness, or
- contact the doctors you've seen about your condition.

In some situations, you'll be asked to review the information that's being used to assess your claim. You'll also be given the chance to provide any further medical or other evidence that could help support your claim for the insurer to consider.

5: We'll tell you the final decision

Based on the information provided, the insurer will decide your eligibility for cover and if they're satisfied that you meet the Income Protection definition in the insurance policy. They'll advise us of their decision to accept or decline your claim.

- **Accept:** If your claim is accepted, the insurer will contact you directly to confirm payment details and any ongoing claim requirements for continuing monthly benefits.
- **Decline:** If your claim is declined, we'll review all the evidence to determine if the decision is fair and reasonable and in accordance with the policy terms, trust deed and super laws. If we agree with the insurer's decision to decline your claim, we'll write to you to explain why.

If the final decision is to decline your claim, and you disagree with the decision or you're not happy with the way the claim has been managed, you can ask for a review or lodge a complaint – see page 8.

When the insurer won't pay

To be eligible for payments, your disability must have happened after your income protection cover started or restarted. You can't claim for anything that happened to you before this.

The insurer won't be able to accept your claim if it directly or indirectly results from:

- normal and uncomplicated pregnancy or childbirth (including multiple pregnancy, threatened or actual miscarriage, participation in IVF or a similar program, discomfort commonly associated with pregnancy such as morning sickness, backache, varicose veins, ankle swelling or bladder problems)
- you participating in or contributing to, an act of terrorism, war, war-like operation or civil commotion
- war (declared or not), military activity or insurrection
- any other individual exclusion imposed by the insurer when they assessed your cover, or
- an illness, if you had accident-only cover when you became disabled.

Any claims from members working in excluded occupations can't be accepted, as these members aren't eligible for income protection cover.

The insurer will also not pay an income protection claim if it would cause them to break any health insurance laws.

For a full list of exclusions, please refer to your insurance guide at **cbussuper.com.au/forms**.

If your cover is limited to new events, you'll only receive a benefit for an illness or injury that first occurred on or after the date cover started, restarted or increased.

About your payments

If your claim is accepted, you'll receive monthly payments to replace some of your income.

How much will you get?

How much you receive will depend on how much income protection cover you had and if you can do some work or not. Here's how your monthly payments will be worked out:

Your monthly payment =

The lower of:
- the amount of income protection cover you have
- 87% of your pre-disability monthly income, or
- $30,000 a month.

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Any other disability income or post-disability income you receive (or are due to receive) that month.

Your benefit will only be reduced when the sum of the benefit and other disability income or post-disability income exceeds 87% of your pre-disability monthly income. See page 7 to understand what counts as other disability income and post-disability income.

You'll get:
- **In your pocket:** 75/87^{ths} paid directly to you (less tax[1]), and
- **In your super:** 12/87^{ths} paid into your Cbus super account.

[1] Tax will be taken out of your payments at the applicable rate and you'll receive a payment summary at the end of the financial year.

When will payments start?

You'll start receiving monthly payments (in arrears) after your waiting period ends, as long as:
- you were totally disabled for the first 14 days of your waiting period
- you were still totally disabled or were partially disabled for the rest of your waiting period, and
- you continue to be totally or partially disabled after your waiting period.

See page 7 for more on what total disability and partial disability mean.

How often do you need to see your doctor?

Under the insurance policy, you need to be under the regular care and attention of a doctor while receiving income protection payments.

In most cases, this means you'd need to see your doctor at least once a month and undergo any treatment they recommend for your condition, unless there are legitimate reasons for you not to do so.

Talk to our Claims team if you have any questions.

How long will payments last?

You can receive payments for up to 2 years or up to 5 years, depending on which benefit payment period you:
- received automatically when your income protection cover started, or
- chose when you applied for or changed your income protection cover.

To check your payment period, log into your account, see your latest statement or call us.

Your payments will stop if:
- you're no longer totally or partially disabled
- your payment period ends
- you turn 65
- you're no longer getting care from a doctor (see opposite)
- you're overseas for longer than the insurer has agreed to (see page 6 and contact us for more information if you're overseas when you need to make a claim)
- you don't give the insurer the information they need to assess your claim
- you make a fraudulent claim, or
- you die.

Your payments may increase annually

If you have a 5-year payment period, your income protection payments will increase at the end of each 12-month period for which you're being paid.

Payments will increase by the Consumer Price Index (CPI) percentage increase for that 12-month period or 5% (whichever is less), up to $30,000 a month if you're an Industry, Corporate or Sole Trader Super member.

This increase won't apply if you have a 2-year payment period.

If you're overseas

If you're overseas when your claim is accepted, you may be able to receive income protection payments for up to three months.

To continue receiving payments after that, you must:

- return to Australia (at your own expense), or
- provide evidence that your condition is preventing you from returning (contact us to discuss your situation if this applies to you).

Your payments will restart once you're back in Australia or the insurer agrees to continue payments based on your condition.

Other insurance payments

If you have a TPD or terminal illness payment approved while you're receiving income protection payments, you'll keep getting paid until the end of your payment period (unless your payments stop for another reason listed on page 5).

Your income protection cover will stop on the day your TPD or terminal illness claim is accepted. So while payments can continue for the condition you're already being paid for, you won't be able to make a new income protection claim in the future.

Insurance costs will be waived

Income protection premiums will stop being deducted from your super account while you're receiving income protection payments.

They'll start being deducted again when your payments end, unless you no longer have cover. For more on when your cover may stop, see the insurance guide for your membership at **cbussuper.com.au/forms**.

Delaying your payments

If you have income protection cover through your employer or another insurance policy, you can choose a flexible waiting period and delay your Cbus Super payments for up to two years.

This means you could get paid through your other policy first, and start your Cbus Super payments once the other payments have stopped (as long as you still qualify for payments).

To take up this option you must:

- have a 2-year payment period, and
- tell us you'd like to defer your payments before your waiting period ends – otherwise your payments will start at the end of your waiting period and will be reduced by any amounts you receive or are entitled to receive from other sources.

You can't defer your payments for any more than two years, even if your other cover is paid for longer than this.

Workers' compensation, compulsory third party, motor vehicle accident and TAC insurance are not considered other income protection policies, so you can't defer your Cbus Super payments while receiving those benefits.



Getting back to work

Paying for your rehabilitation

The insurer may pay for your rehab if they think it could help you get back to work. This may include the cost of a program, device or treatment, up to six times your monthly income protection payment amount or $60,000 (whichever is less).

The insurer will pay any approved rehabilitation expenses directly to the provider, not to you. So you'll need to get the insurer's written agreement before the expense is incurred. If the insurer doesn't agree to pay, you'll need to cover the cost.

The insurer can't pay for medical treatment. See page 7 for more on what counts as approved rehabilitation.

What if your disability happens again?

A new waiting period won't apply if:

- you're partially or totally disabled again within six months of when your payments stopped, and
- your disability is caused by the same medical condition as the previous claim (or a related condition).

Otherwise a new waiting period will apply.

In either case, you can then get income protection payments for the rest of your original 2 or 5 year payment period (unless your payments stop for another reason listed on page 5).

What certain words mean

Some words have specific meanings in the insurance policy, as outlined below. If you have any questions or would like any more information, call our Claims team.

Accident: An event that leads to bodily injury which:
- is caused solely and directly by violent, accidental, external and visible means and independent of any other cause
- results in total or partial disability within 12 months, and
- occurs after your income protection cover has started or restarted.

Approved rehabilitation: A program, device or course of treatment that your doctor or other health professional believes is needed for your rehabilitation, excluding:
- any program providing hospital treatment or general treatment within the meaning of the *Private Health Insurance Act 2007 (Cth)*, and
- any other program which might cause the policy to stop being exempt from the *Private Health Insurance Act 2007 (Cth)* or *Health Insurance Act 1973 (Cth)* or any similar health insurance laws.

Excluded occupations: Members working in some occupations are not eligible to be covered for income protection. For a full list of excluded occupations, please refer to your insurance guide at **cbussuper.com.au/pds**.

Illness: A sickness, disease or disorder.

Monthly income: What counts as your monthly income depends on your work:
- **If you're an employee:** 1/12th of your current pre-tax annual salary from your employer (averaged over the 12 months just before your waiting period starts or whatever shorter period you were continuously employed), but not including any director's fees, commissions, overtime payments, bonuses, or penalty or shift allowances, or
- **If you're self-employed:** 1/12th of your pre-tax annual share of business income generated by your personal exertion (averaged over the 12 months just before your waiting period starts or whatever shorter period you were continuously self-employed), after deducting your share of business expenses, or any other income approved by the insurer.

Your monthly income does not include income from investments, deferred compensation plans, disability policies or retirement plans or any other income not derived from work activities, unless the insurer has agreed otherwise.

Other disability income: Any income that you're entitled to receive in a month for which your income protection claim is being assessed (whether you actually received it or not), including:
- any income for incapacity under any other insurance policy
- workers' compensation, motor accident compensation or other payments under similar state, federal or territory laws, and
- sick leave or other payments for incapacity from your employer.

But your other disability income does not include:
- income earned from investments
- annual leave or long service entitlements
- Centrelink or employer termination payments, or
- any lump sum super payments or lump sum payments for total and permanent disablement, trauma or terminal illness.

Any other disability income that's a lump sum, or commuted for a lump sum, has a monthly equivalent of the fraction of the lump sum that the insurer reasonably determines should apply. If part of the lump sum is compensation for pain and suffering, or the loss of use of part of the body, the insurer will not count that part as other disability income. Where a common law, workers' compensation or statute payment is received as a lump sum and pain and suffering can't be isolated from loss of earnings, the insurer will convert this to income on the basis of 1% of the lump sum for each month a disability benefit is paid.

Partial disability: You'll be considered partially disabled if you're no longer totally disabled and:
- you're back at work, or the insurer believes (based on medical and other evidence) that you're capable of returning to partial work duties
- as a result of the accident or illness that caused your total disability, your post-disability income is less than your monthly income
- you're getting continuous and regular care from a doctor and having appropriate treatment, and
- you satisfy all of the insurer's claim requirements.

Post-disability income: Any income you get from working in a month where your claim is being assessed, after your waiting period has started. If you're partially disabled and haven't received such income, your post-disability income will be the amount the insurer believes you could earn by working, given the extent of your partial disability.

Total disability: You'll be considered totally disabled if you have a disability caused by an accident or illness and as a result:
- you can't do your usual job
- you're not otherwise employed or engaged in any other business activity
- you're getting regular and continuous care from a doctor and having appropriate treatment, and
- you satisfy all of the insurer's claim requirements.

You'll be assessed against your ability to do the last job you were in before becoming disabled. If you had more than one job, you'll be assessed against the one where you were working the most hours.

The insurer will accept that you can't do your usual job if satisfactory medical evidence confirms the disability prevents you from carrying out the material and substantial duties of that occupation.

If you'd like a review

We strive to provide great service to our members and resolve any issues promptly. So if you're not happy with how your claim was managed or the final decision, it's important we hear from you.

1. Tell us your complaint

- Online: **cbussuper.com.au/complaints**
- Call: **1300 722 152**
- Write to:
  Complaints Officer
  Cbus Super
  PO Box 24231
  Melbourne VIC 3001

2. We'll investigate

- We'll investigate your complaint, making sure it's dealt with fairly and promptly.
- We may also ask you to provide more information so we can fully understand the issues you're not happy about.

3. We'll let you know the outcome

- In most cases, we'll write to you to let you know the outcome of our review, the reasons for our decision and what else you can do if you're still not satisfied.
- If your concerns are resolved by phone within five days of receiving your complaint, we won't follow up with a written response unless you ask for one.

You can also lodge your complaint with the Australian Financial Complaints Authority (AFCA).

Write to: AFCA, GPO Box 3, Melbourne VIC 3001
Call: **1800 931 678**
Email: **info@afca.org.au**
Visit: **afca.org.au**

For more about the complaint process and the timeframes that apply, go to **cbussuper.com.au/complaints** or call us.



Need some help? Contact us

1300 722 152 8am to 5.30pm (AEST/AEDT)
Monday to Friday

claims@cbussuper.com.au
cbussuper.com.au
Log in to chat to us online

Visit us in person in Adelaide, Brisbane, Melbourne, Perth and Sydney.
Details: **cbussuper.com.au/contact**

Contact your local Cbus Super coordinator if you need additional support in your area.
Details: **cbussuper.com.au/coordinators**

Cbus Super, Locked Bag 5056
PARRAMATTA NSW 2124

This brochure is a summary, and benefits will only be paid in accordance with the Trust Deed and the full eligibility terms and conditions in the relevant insurance policy. For more information on insurance cover visit **cbussuper.com.au/insurance**.