Applying for a terminal illness payment









If you're terminally ill, we understand it's an extremely difficult time for you and those close to you.

We're here to support you in any way we can, to help you get any payments you're entitled to as soon as possible.

This brochure will help you understand:

- **if you might qualify for a terminal illness payment**
- **how to apply, and**
- **what happens after you submit your claim.**

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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 Cbus Super.

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

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If you've been diagnosed with a terminal illness, you and your family will be doing it tough. A terminal illness benefit payment may help to reduce some of the financial stress.

What's a terminal illness benefit payment?

If you have death cover with Cbus Super and have been diagnosed with a terminal illness, you may be able to get a terminal illness benefit payment.

This payment can be made up of:

- **your super** account balance (less any fees that apply), and
- **an insurance payment** (based on how much death cover you have, your occupation category and your age when your terminal illness was diagnosed).

Are you covered?

Most Cbus Super members have death cover. To see if you do:

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

Your insurance cover needs to have been in place when your terminal condition was diagnosed – see the next section on when you can claim. Unfortunately, you won't have any cover through Cbus Super if you're over 70.

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.

When can you make a claim?

You may be able to claim a payment if:

- you had death cover when your terminal illness was diagnosed
- two doctors approved by our insurer certify that your condition is likely to lead to your death within 24 months from the date of diagnosis
- at least one of the doctors is a specialist practising in an area related to your condition, and
- our insurer is satisfied that you meet the definition of terminal illness in the insurance policy.

Is there a waiting period?

No, there's no waiting period for a terminal illness claim. You can apply straight away once your condition has been diagnosed by a treating specialist practising in an area relevant to your condition.

What if you don't have insurance?

If you don't have any insurance, you may be able to access your super (tax free) under a terminal medical condition of release.

You may be eligible if:

- two registered medical practitioners certify (jointly or separately) that you suffer from an illness, or have incurred an injury, that is likely to result in your death within 24 months of the certification date
- at least one of the registered medical practitioners is a specialist practising in an area related to your illness or injury, and
- the certification period has not ended.

If this applies to you, please call us and we'll explain what you need to do. Keep in mind that your super will only be tax free if it's paid as a lump sum within 24 months of the certification date.

Do you need a lawyer?

It's entirely your decision, but you should take into consideration that:

- we aim to help you through the process
- all claims are assessed fairly and reasonably on their merits, and most are paid
- timeframes and payment amounts are not influenced by legal representation
- we have a legal obligation to act in the best interests of our members
- lawyers' fees and disbursements may be considerable, so you should fully understand any costs involved when you engage a lawyer.

We're here for you

We understand that if you need to make a claim you're already going through a lot.

Our Claims team will get to know your situation, talk you (or an appointed representative) through the process, and tell you what you need to do. If you have any concerns along the way, contact us.

If you need some help, call us on **1300 722 152**, or you can email **claims@cbussuper.com.au**.



How to apply

There are a few steps involved in making a claim, but we'll let you know what you need to do and will keep you updated on your claim's progress. If you have any questions along the way, 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, and
- if you'd prefer to apply by phone or to complete paper forms.

After we have gathered your relevant information, we will send you a claim pack. If you don't have any insurance, you may be able to access your super (tax free) under a terminal medical condition of release.

What does the Claims team do?

Our Claims team will help you to understand the process and lodge your claim with the insurer. If you don't have any insurance, they'll talk you through next steps. They'll also work with you to make sure we have all the information required with the aim of assessing your claim as soon as possible.

If you have any questions, you can call our Claims team on **1300 722 152**.

2. Prepare your application

The next step is to supply some information so your claim can be assessed. Details will be in the claims pack we send you. You'll need to:

- ask your doctors to complete the forms about your condition and provide any medical reports, test results or other evidence to support your claim
- get a certified copy of your driver's licence (both sides) or passport and any other documents we ask for in our letter
- fill out a claim form (unless you've chosen to apply by phone), and
- confirm how you'd like to be paid if your claim is approved.

Please refer to the *Identification requirements* brochure in the claims pack for the options available to provide proof of your identity.

What's a certified copy?

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 in your claims pack and at **cbussuper.com.au/cs/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.

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), 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 there may be 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.)

4. Your claim will be assessed

4a. If you don't have insurance

If you don't have insurance, we will review your claim as quickly as possible. We will update you on the progress and let you know if we need anything else to assess your claim.

We may ask you to review the information that's being used to assess your claim and provide any further medical or other evidence that could help support your claim for a terminal medical condition of release.

4b. If you have insurance

The insurer will assess your claim if you have death cover. They'll review the information they've received as quickly as possible, update you on progress, and let you know if they need anything else to assess your claim. They may:

- request more information from you or your doctors, or
- ask you to review the information that's being used to assess your claim and provide any further medical or other evidence that could help support your claim for the insurer to consider.

5. The insurer decides and we review

Based on the information provided, the insurer will decide if they're satisfied that you meet the terminal illness definition in the insurance policy. They'll advise us of their decision to accept, defer or decline your claim.

- **Accept:** If your claim is accepted and you've provided all the relevant information and proof of your identity, we'll make the payment according to your instructions (read the important information about your payment below).
- **Defer:** The insurer may decide to defer your claim for a period if they believe more time is needed to determine the full extent of your condition and whether it meets the terminal illness definition under the policy. They'll review your claim again at the end of this period.
- **Decline:** If we agree with the insurer's decision to decline your claim, we'll write to you to explain why and check if you'd like to claim a terminal medical condition of release payment.

What if we disagree with the insurer's decision?

If the insurer believes your claim should be deferred or declined, we'll review your claim independently and form our own opinion. The role of this review is to ensure the insurer's decision is fair and reasonable and complies with our insurance policy, trust deed and super laws.

If we disagree with the insurer's decision, we may ask them to reconsider the claim or ask for further medical evidence.

6. We'll tell you the final decision

At the end of the review, we'll let you know if your claim has been accepted, deferred or declined.

If your claim is not approved, you may still qualify for a total and permanent disablement or permanent incapacity payment. We'll let you know more about these options if they might apply to you.

If you disagree with the decision or you're not happy with how your claim has been managed, you can ask for a review or lodge a complaint – see page 6 for details.

About your payment

If your terminal illness benefit claim is successful, the money will go into your super account and be invested in your chosen investment options. We'll then get in touch to let you know:

- how you can withdraw some or all of your insurance payment and super
- how withdrawals will be taxed, and
- any ongoing conditions you'll need to meet for withdrawals after 2 years from payment of the insured benefit.

Your payment will be the lower of:

- the value of your death cover, or
- $3 million.

If you have death cover for more than $3 million, the rest can be paid to your beneficiaries as a residual death payment, as long as you're still a member when you die and premiums are paid until then.

Once your payment is approved, you won't have any more cover through Cbus Super (unless a residual death benefit applies). This means you or your family won't be eligible for any other insurance payments (including death, terminal illness or TPD).

Insurance premiums will stop being deducted from your account the day we receive your terminal illness benefit from the insurer.

You should get financial advice

We recommend you seek financial advice to understand the implications for you, and how your terminal illness benefit may affect other potential benefits such as Centrelink payments.

Call us on **1300 361 784** to speak to our Advice Services team or visit **cbussuper.com.au/advice** for more information.

Your local coordinator can help

Cbus Super coordinators are available to you and your family if you need help filling out your application. They may be able to help certify your identification and/or documents, or assist you to submit the application.

Visit **cbussuper.com.au/coordinators** to find your local coordinator.

If you'd like a review

We strive to provide great service to our members and resolve any issues as quickly as possible. 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/complaint**
- Call: **1300 361 784**
- Write to: Complaints Officer
  Cbus Super
  PO Box 24231
  Melbourne 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).

For more information about the types of complaints that AFCA can deal with and the information you'll need to provide:

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/complaint** or call us.



Need some help? Contact us

claims@cbussuper.com.au
cbussuper.com.au

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

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 fact sheet 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**.