

1 December 2018

Insurance, Fees and Costs Guide

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The information in this document forms part of the Product Disclosure Statement for Nationwide Super dated 1 December 2018. This document is issued by the Trustee of the Russell Investments Master Trust (Fund, Plan or Nationwide Super), Total Risk Management Pty Ltd (Trustee), ABN 62 008 644 353. The Trustee's Australian Financial Services Licence (AFSL) number is 238790. Nationwide Super a division of the Russell Investments Master Trust ABN is 89 384 753 567. The information in the PDS is correct at the time of publication of each document comprising the PDS. However, the information may change from time to time and if there is a material change to any of the information in any document, the Trustee will issue an updated document. However, if the change is not materially adverse to members, the Trustee may instead provide the updated information to members via the website nationwidesuper.com.au/trusteerequireddisclosure. A paper copy of this information will be sent to any member, free of charge on request. NW_PDS_IBR_IFC_V1F_1812

1. Insurance in your superannuation

The following insurance information is incorporated into section 8 of the Product Disclosure Statement (PDS):

It is important that you understand any eligibility and other conditions attached to your insurance. If you have any questions, you should contact the Plan.

If you are eligible for insurance cover and you make a claim for a disablement benefit, the Trustee of the Plan and the insurer will determine whether you meet the relevant definition (as set out below) to receive an insured disablement benefit. Similarly, in the event of your death, the Trustee will determine who should receive your death benefit (unless you have a valid binding death benefit nomination).

The insurance cover provided is subject to the terms and conditions contained in the insurance policy issued to the Trustee by the insurer. The terms and conditions of the insurance policies prevail over any inconsistency between the information in this document and the insurance policy.

2. Types of insurance cover within Nationwide

The types of insurance cover available in the Fund is detailed below.

- **Death cover** pays a lump sum on your death or the diagnosis of a terminal illness. Maximum coverage of \$10 million is available for Death cover. Terminal Illness cover is included as part of Death cover but the maximum Terminal Illness coverage is \$3 million.
- **TPD cover** pays a lump sum if you become totally and permanently disabled and are unlikely to ever work again in a job for which you are reasonably qualified by education, training and experience. The maximum TPD coverage available is \$3 million.
- **Income Protection cover** provides a replacement income of up to 85% (including 10% contribution to super) of your income if you are unable to work due to illness or injury. Also known as 'Salary Continuance Insurance', it provides a monthly benefit for up to 2 years or to age 65, depending on your selection and offers various waiting periods to suit your needs. You are not automatically covered for Income Protection insurance, you must apply for and be accepted for it by the Insurer

IMPORTANT NOTE:

This Insurance, Fees and Costs Guide relates to the following products:

- Nationwide Super – Employer
- Nationwide Super - Personal

Please ensure you refer to the correct sections below.

3. Death and Total and Permanent Disablement (TPD) for Nationwide Super – Employer

3.1 Automatic Death and TPD cover

In Nationwide Super – Employer, you are automatically covered for Death and TPD if you are under age 70, joined us through your employer and meet the eligibility conditions, see ‘Who can have automatic cover?’ below. You can reduce or cancel your automatic cover at any time – see ‘Changing your insurance cover’ section of this guide. You can also apply to increase your Death and TPD cover – see section Voluntary Death and TPD insurance cover.

The amount and cost of your automatic Death and TPD insurance cover varies automatically according to your age. Insurance fees are calculated daily and deducted from your account on a monthly basis on the last Friday of the month. The rate may change in the future.

Automatic cover Death and TPD

Age next birthday	Insured benefit		Insurance fee (\$ per week) *
	Death (\$)	TPD (\$)	
12 - 24	22,500	54,000	2.33
25 - 31	100,000	81,000	3.50
32 - 37	140,000	90,000	3.50
38	140,000	85,500	3.50
39	135,000	81,000	3.50
40	120,000	72,000	3.50
41	105,000	63,000	3.50
42	93,000	55,800	3.50
43	87,000	51,574	3.50
44	85,000	51,574	3.50
45	83,000	51,574	3.50
46	78,000	46,800	3.50
47	69,000	41,400	3.50
48	60,000	34,468	3.50
49	55,000	34,468	3.50
50	53,000	34,468	3.50
51	51,000	30,600	3.50
52	43,500	26,100	3.50
53	37,020	22,212	3.50

Age next birthday	Insured benefit		Insurance fee (\$ per week) *
	Death (\$)	TPD (\$)	
54	30,000	22,212	3.50
55	24,680	14,808	2.33
56	21,000	12,600	2.33
57	18,000	10,800	2.33
58	15,000	9,000	2.33
59	12,500	6,809	2.33
60	10,000	6,809	2.33
61	9,000	6,809	2.33
62	8,000	6,809	2.33
63	7,000	6,809	2.33
64	6,000	6,809	2.33
65	5,000	6,809	2.33
66	4,500	2,539	2.33
67	4,000	2,233	2.33
68	3,500	1,962	2.33
69	3,000	1,724	2.33
70	2,500	1,514	2.33

The insurance fee depends on your age, the type of cover selected and how the insurer classifies your occupation (your 'Occupational Category' or 'Occupational Rating'). The above insured benefits are for the Standard Occupational Rating. Members may apply to qualify as White collar or Professional, and if accepted, will receive a higher insured benefit at no extra cost. Please note that you will be classified under the standard Occupational Rating, until you apply to be rated otherwise. You can also apply to change your Occupational Rating.

Occupational Ratings	Multiply cover amount by:
Professional	2.4
White collar	2

3.2 Who can have automatic cover?

You will receive automatic Death and TPD insurance cover, provided:

- You are a Nationwide Super - Employer member and aged between 11 and 69;
- Your employer is a Nationwide Super participating employer sponsor;

- You are in Active Employment on the cover start date, otherwise you will receive Limited Cover until you have returned to Active Employment; and
- You have joined Nationwide Super within six months of starting work with your employer, otherwise you will receive Limited Cover for the first 12 months of your cover. Limited Cover converts to full cover once you are in Active Employment after the 12 month period has ceased.
- You have not previously been paid, lodged a claim for or are entitled to be paid, a TPD or terminal illness benefit from Nationwide Super, or another fund or policy.

3.3 When does automatic cover start?

For new members, your automatic Death and TPD insurance cover with Nationwide Super will commence when we first receive a contribution on your behalf from your employer. At this time, your premium cost will be deducted and back-dated to the effective start date of your automatic insurance cover. The effective start date of your automatic cover will be:

The later of:

- The date you first commenced employment with your employer
- The start of the time period covered by your first employer contribution (or if unknown, the date the contribution was received); and
- 4 months prior to your first employer contribution being received by Nationwide Super.

3.4 Limited Cover

You will receive Limited Cover in some circumstances, including:

- If you are not eligible for full automatic cover, as you were not in Active Employment when your cover began;
- Where you joined Nationwide Super more than six months after starting work with your employer; or
- Where your cover was increased due to a change in your occupation category.

Limited Cover means that you are only covered for an illness or injury that first occurs or becomes apparent after your cover start date.

The Limited Cover restriction will be removed as follows:

- If Limited Cover applies because you were not in Active Employment when your cover started, until you return to Active Employment.
- If Limited Cover applies because you joined Nationwide Super more than six months after starting work with your employer, the later of:
 - when you return to Active Employment; and
 - 12 months from the date your cover started.
- If Limited Cover applies due to a change in your occupation category, the later of:
 - when you return to Active Employment for 30 consecutive days; and
 - 12 months from the date your additional cover was applied.

Your eligibility for full cover or Limited Cover will be assessed at the time of claim.

3.5 Voluntary Death and TPD cover

When you apply for voluntary Death and/or TPD cover, you can select to hold your cover on either a unitised or fixed basis.

- **Unitised cover** means that the amount of Death and TPD cover provided per unit will change with your age, however your monthly premium will remain fixed.
- **Fixed cover** means that your level of cover remains fixed and your premium changes with your age. Fixed cover is available in multiples of \$10,000 Fixing the amount of your cover (an alternative to cover in units)

3.6 Unitised cover

The default cover type is unitised cover. This means that the amount of death and TPD cover provided per unit will change with your age, however your monthly premium remains the fixed.

Costs of cover per unit

Type of cover	Insurance fee (\$) (per week)
Death and TPD	1.17
Death only	0.57
TPD only	0.68

Unitised cover – amount of cover per unit

Age Next Birthday	Insured benefit per unit					
	Standard		White collar		Professional	
	Death (\$)	TPD (\$)	Death (\$)	TPD (\$)	Death (\$)	TPD (\$)
Up to 24	11,250	27,000	22,500	54,000	27,000	64,800
25 - 31	33,333	27,000	66,667	54,000	80,000	64,800
32 - 37	46,667	30,000	93,333	60,000	112,000	72,000
38	46,667	28,500	93,333	57,000	112,000	68,400
39	45,000	27,000	90,000	54,000	108,000	64,800
40	40,000	24,000	80,000	48,000	96,000	57,600
41	35,000	21,000	70,000	42,000	84,000	50,400
42	31,000	18,600	62,000	37,200	74,400	44,640
43	29,000	17,191	58,000	34,383	69,600	41,259
44	28,333	17,191	56,667	34,383	68,000	41,259
45	27,667	17,191	55,333	34,383	66,400	41,259
46	26,000	15,600	52,000	31,200	62,400	37,440
47	23,000	13,800	46,000	27,600	55,200	33,120
48	20,000	11,489	40,000	22,979	48,000	27,574

Age Next Birthday	Insured benefit per unit					
	Standard		White collar		Professional	
	Death (\$)	TPD (\$)	Death (\$)	TPD (\$)	Death (\$)	TPD (\$)
49	18,333	11,489	36,667	22,979	44,000	27,574
50	17,667	11,489	35,333	22,979	42,400	27,574
51	17,000	10,200	34,000	20,400	40,800	24,480
52	14,500	8,700	29,000	17,400	34,800	20,880
53	12,340	7,404	24,680	14,808	29,616	17,770
54	10,000	7,404	20,000	14,808	24,000	17,770
55	12,340	7,404	24,680	14,808	29,616	17,770
56	10,000	6,300	21,000	12,600	25,200	15,120
57	12,340	5,400	18,000	10,800	21,600	12,960
58	10,500	4,500	15,000	9,000	18,000	10,800
59	6,250	3,405	12,500	6,809	15,000	8,171
60	5,000	3,405	10,000	6,809	12,000	8,171
61	4,500	3,405	9,000	6,809	10,800	8,171
62	4,000	3,405	8,000	6,809	9,600	8,171
63	3,500	3,405	7,000	6,809	8,400	8,171
64	3,000	3,405	6,000	6,809	7,200	8,171
65	2,500	3,405	5,000	6,809	6,000	8,171
66	2,250	1,270	4,500	2,539	5,400	3,047
67	2,000	1,117	4,000	2,233	4,800	2,680
68	1,750	981	3,500	1,962	4,200	2,354
69	1,500	862	3,000	1,724	3,600	2,069
70	1,250	757	2,500	1,514	3,000	1,817

3.7 Fixed cover

IMPORTANT NOTE:

This Fixed cover information relates to the following products:

- Nationwide Super – Employer
- Nationwide Super - Personal

With fixed cover, your level of cover remains fixed and your insurance fee changes with your age. Fixed cover is available in multiples of \$10,000. Please note that fixed TPD cover begins decreasing from age 65, please refer to the table below.

The insurance fee depends on your age, the type of cover selected, your gender and how the insurer classifies your occupation (your 'Occupational Category' or 'Occupational Rating'). The below insured benefits are for the Standard Occupational Rating. Members may apply to qualify as White collar or

Professional, and if accepted, will receive a adjusted insurance fee. Please note that you will be classified under the Standard Occupation Rating, until you apply to be rated otherwise. You can also apply to change your Occupational Rating.

Occupational Ratings	Multiply cover amount by:
Professional	0.85
White collar	1.00
Standard	2.20

Fixed cover – amount per \$1,000 of cover for Standard occupational category

Age next birthday	Death & TPD per \$1,000 of cover (\$ p.a.)		Death only per \$1,000 of cover (\$ p.a.)		TPD only per \$1,000 of cover (\$ p.a.)	
	Male	Female	Male	Female	Male	Female
Up to 34	0.82	0.42	0.53	0.24	0.31	0.21
35	0.82	0.46	0.53	0.27	0.31	0.23
36	0.87	0.51	0.53	0.29	0.41	0.29
37	0.92	0.60	0.53	0.31	0.46	0.39
38	1.02	0.67	0.53	0.34	0.62	0.41
39	1.10	0.76	0.57	0.38	0.67	0.49
40	1.23	0.87	0.62	0.40	0.77	0.59
41	1.37	1.02	0.67	0.47	0.90	0.69
42	1.52	1.16	0.73	0.51	1.02	0.82
43	1.71	1.26	0.79	0.54	1.18	0.95
44	1.92	1.40	0.88	0.59	1.33	1.05
45	2.18	1.50	0.97	0.60	1.56	1.18
46	2.46	1.63	1.05	0.63	1.84	1.31
47	2.75	1.78	1.14	0.64	2.11	1.51
48	3.12	1.99	1.27	0.71	2.40	1.71
49	3.49	2.21	1.39	0.75	2.74	1.97
50	3.74	2.37	1.45	0.78	3.04	2.12
51	3.99	2.56	1.51	0.80	3.27	2.36
52	4.48	2.91	1.65	0.91	3.75	2.71
53	5.06	3.30	1.81	1.02	4.32	3.10
54	5.63	3.73	1.95	1.13	4.88	3.52
55	6.29	4.14	2.15	1.25	5.57	3.94

Age next birthday	Death & TPD per \$1,000 of cover (\$ p.a.)		Death only per \$1,000 of cover (\$ p.a.)		TPD only per \$1,000 of cover (\$ p.a.)	
	Male	Female	Male	Female	Male	Female
56	6.97	4.54	2.33	1.35	6.20	4.32
57	7.71	4.98	2.55	1.48	6.90	4.75
58	8.57	5.45	2.78	1.61	7.77	5.19
59	9.56	5.95	3.05	1.76	8.76	5.65
60	10.71	6.46	3.36	1.91	9.91	6.16
61	11.97	7.00	3.70	2.07	11.17	6.67
62	13.41	7.67	4.07	2.27	12.59	7.31
63	14.88	8.43	4.43	2.49	14.14	8.05
64	16.58	9.46	4.84	2.81	15.88	8.96
65	18.36	10.63	5.27	3.14	17.75	10.14
66	20.87	12.08	5.85	3.48	20.40	11.68
67	23.75	13.75	6.50	3.86	23.46	13.43
68	27.02	15.66	7.21	4.30	27.01	15.47
69	30.75	17.80	7.98	4.78	31.07	17.75
70	35.01	20.29	8.86	5.28	35.72	20.46

3.8 Example of Death and TPD insured benefit calculation

Unitised cover (for Nationwide Super - Employer members only)

Jim is a 35-year-old office worker (or 36 Age Next Birthday). Jim’s occupational category is ‘Standard’.

Jim has one unit of Death and TPD insurance

Death benefit would be \$46,667

TPD benefit would be \$30,000

The insurance fee would be \$1.17 per week (\$60.84 p.a.).

Jim has decided to increase his death only cover by an additional 2 units.

Death benefit would be \$140,001 (\$46,667 x 3 units)

TPD benefit would be \$90,000 (\$30,000 x 3 units)

The insurance fees would be (\$1.17 x 3) = \$3.51 per week (\$182.52 p.a.)

Fixed cover

Jim wants \$150,000 of Death and TPD insurance. \$0.87 (rate for Male, Death and TPD age next birthday 36) with a Occupational rating of standard which is a multiple of 2.20.

Death & TPD benefit would be \$150,000

$$(150,000/1000) = 150$$

$$0.87 \times 2.20 = 1.914$$

$$150 \times 1.914 = \$287.10 \text{ p.a.}$$

The insurance fee would be \$5.52 per week (\$287.10 p.a.)

4. Death and Total and Permanent Disablement (TPD) for Nationwide Super - Personal

4.1 Automatic Death and TPD cover

Nationwide Super - Personal members are not eligible for Automatic Death and TPD Cover. Please refer to the Voluntary cover section below.

4.2 Voluntary Death and TPD cover

Nationwide Super - Personal members can apply for Death and TPD, Death only, TPD only or Income Protection insurance cover that is paid for out of your Nationwide Super account, up to the following maximum limits:

- Death cover - \$10 million*
- TPD cover - \$3 million

* Terminal Illness cover is included as part of Death cover, the maximum Terminal Illness coverage is \$3 million.

Fixed cover is available in multiples of \$10,000. With fixed cover, your level of cover remains fixed and your insurance fee changes with your age. Please note that fixed TPD cover begins decreasing from age 65, please refer to the table in Section 3.7 – Fixed cover.

The insurance fee depends on your age, the type of cover selected, your gender and how the insurer classifies your occupation (your 'Occupational Category' or 'Occupational Rating'). Refer to Section 5. Death and Total and Permanent Disablement (TPD) - Occupational Category.

Fixed cover insured benefits displayed in the insurance fee table are for the Standard Occupational Rating. Members may apply to qualify as a white collar or professional worker, and if accepted, will receive an adjusted insurance fee. Refer to Section 3.7 Fixed cover section above for the detailed insurance fee tables and Occupational Ratings.

4.3 Death and TPD cover – Occupational Category

For more information on Occupational Categories please refer to section 5. Death and Total and Permanent Disablement (TPD) - Occupational Category.

4.4 When Death and TPD insurance cover start?

Insurance cover begins once your application for insurance is accepted by the insurer. The amount and cost of your cover will be confirmed to you in writing and subsequently detailed each year on your annual statement.

5. Death and Total and Permanent Disablement (TPD) - Occupational Categories

When you join your occupation is automatically classified by the insurer as 'Standard'. However, you may be eligible to apply for another Occupational Category ('White Collar' or 'Professional') which can either impact the level of cover (united cover) or the cost of insurance fees (for fixed cover) than those which apply for the 'Standard' Occupational Category. If you believe you may qualify for a different Occupational Category you can complete the Occupational Category declaration form available online . The table below provides a description of the three Occupational Categories.

Description of Occupational Category for Death & TPD

Occupational Categories for Death & TPD	
White collar	To qualify as a white-collar worker, you need to: <ul style="list-style-type: none"> • Have occupational duties which are limited to white collar tasks (e.g. administrative, managerial, clerical); • Perform at least 80% of your occupational duties within an office environment; and • Not perform any manual work
Professional	To qualify as a professional worker, you need to meet the above white collar requirements as well as: Earn at least \$100,000 per annum; and either of the following: <ul style="list-style-type: none"> • Hold a tertiary qualification or be a member of a professional institute, or registered with a government body; or • Be a member of your employer's executive leadership team with more than 10 years industry experience.
Standard	If you do not qualify as white collar or professional worker. If you do not meet the required criteria, then you are classified as having a standard occupational rating.

6. Income Protection cover

You can apply for Income Protection insurance cover that is paid for out of your Nationwide Super account, up to the maximum of the following:

- \$30,000 per month; and
- 75% of your monthly income (+ 10% superannuation contribution benefit).

When you apply, the level of cover you choose is:

- 75% of your monthly income + 10% superannuation contribution benefit or
- 75% of your monthly income only or
- a monthly value of cover as agreed by the insurer (provided it does not exceed the maximum cover)

Income Protection cover provides a replacement income if you are unable to work due to illness or injury. It is also known as 'salary continuance insurance' and in Nationwide Super you can also choose your preferred waiting period (i.e. 30, 60 or 90 days) and your preferred benefit period (i.e. 2 years or through to age 65). The waiting period is the number of days from which a Medical Practitioner certifies you as being disabled for which you must be disabled or partially disabled before you become eligible for benefits. Please refer to definitions within the Insurance cover definitions section for full details. Benefits are paid monthly in arrears. The benefit period* is the maximum period for which the Insurer will pay a disability or partial disability benefit for the same or related illness.

** Please refer to definitions within the Insurance cover definitions section for full details.*

6.1 Who can apply for Income Protection cover?

You are eligible to apply for Income Protection insurance cover if:

- You are a member of Nationwide Super and under age 65; and
- You are employed for at least 15 hours per week.

6.2 When does my Income Protection cover start?

Any Income Protection insurance cover begins once your application for insurance is accepted by the Insurer. The amount and cost of your cover will be confirmed to you in writing and subsequently detailed each year on your annual super statement.

6.3 When does my Income Protection cover end?

Your Income Protection insurance cover with Nationwide Super will cease on the earliest date of one of the following events:

- Your 65th birthday
- You cease to be a member of Nationwide Super;
- Nationwide Super receives your written request for cover to end (unless your request specifies a later date, in which case, the date specified in your request);
- The first day your Nationwide Super account has insufficient funds to pay insurance fees. Your insurance fees are calculated on a daily basis but are deducted monthly. Therefore, the cover could cease part way through a month;
- You die (however an Income Protection Death benefit is payable if you were entitled to receive an Income Protection benefit at the time of your death);
- You commence active duty with the armed forces of any country; or
- Nationwide Super's Group Income Protection Policy with the Insurer ceases.

6.4 When is a benefit payable?

You will be eligible for an Income Protection benefit if you meet the definition of Disability or Partial Disability at the end of your waiting period. Benefits are paid monthly in arrears. The benefit will cease being paid, upon the earlier of when you:

- Are no longer disabled or partially disabled;
- Die;
- Reach age 65; or
- Reach the end of your benefit period.

6.5 What benefit amount is payable?

The maximum monthly benefit that will be paid to you by the Insurer in the event of an approved claim is the lower of:

- The amount of Income Protection cover that you hold with Nationwide Super;
- 75% of your monthly pre-disability income (plus a 10% superannuation contribution benefit paid to your super fund); and
- \$30,000 per month.

If you are partially disabled, you will be paid a portion of the maximum monthly benefit. The partial disability benefit is calculated as follows:

$$(A - B) \div A \times \text{monthly benefit}$$

Where:

- A is your pre-disability monthly income; and
- B is the greater of the salary you are earning or are capable of earning, for the month that the disability benefit is payable.

Your benefit amount will be calculated on a daily basis and paid monthly in arrears. The benefit amount will be further increased each year where benefits have been paid continuously for 12 months by the lesser of:

- The percentage increase in the Consumer Price Index during the previous year (to the last quarter);
- 5%; or
- An amount which increases your benefit to \$30,000 per month.

The Insurer may reduce any benefit payable by any amounts payable to you as a result of your disability:

- As sick leave payments;
- Through workers' compensation or any similar legislation or any settlement under common law;
- Under social security, statutory or other government payments;
- Any amounts payable in respect of loss of income;
- Under any statutory accident compensation scheme; or
- By any other disability, injury or accident policy (other than lump sum TPD).

Any income described above that is received in the form of a lump sum or is exchanged for a lump sum will be apportioned as a monthly income equivalent of 1/60th of the lump sum (i.e. the lump sum is amortised over a period of 60 months).

6.6 How is my pre-disability income determined?

Your income is defined differently depending on whether you are a permanent employee, not employed permanently or self-employed at the time your injury or illness first occurred. For permanent employees, your income is the total monthly regular income received from your employer for personal exertion for your usual occupation. Your income includes salary sacrifice and commissions, but excludes overtime, profit distributions, director fees and other non-regular payments. Commissions and bonuses will be averaged over a 3 year period. For those not employed permanently, your income is the average of your regular income over the previous 12 months or the actual period if less (minimum 6 months).

For the self-employed, your income is the average gross revenue generated by the business as a result of your personal exertion less eligible business expenses over the previous 12 months. Your income excludes investment income and mandated superannuation contributions. Your amount of Income Protection cover held with Nationwide Super will not increase automatically if your income increases. You will need to submit an application for increased cover.

6.7 Superannuation contribution benefit

The superannuation contribution benefit may be payable in addition to the monthly benefit amount in the event of a claim, where your Income Protection cover held with Nationwide Super is greater than 75% of your pre-disability income. The amount payable is up to 10% of your pre-disability income. Any superannuation contribution benefit will be paid to your Nationwide Super account as an concessional contribution.

6.8 Death benefit

If you were entitled to receive an Income Protection benefit at the date of your death, a Death benefit equal to 3 times the amount of your monthly Income Protection cover will be paid.

6.9 Rehabilitation program

A range of Rehabilitation and recovery programs are available at no expense, including return to work and wellness programs.

6.10 Income Protection Occupational Category

The insurance fee for Income Protection depends on your age, the type of cover (i.e. waiting period and benefit period selected), your gender and occupation rating.

The rate that applies to your age, gender and cover type (waiting and benefit periods) can be obtained from the below annual insurance fee tables. You then need to adjust the annual insurance fee rate for your Occupational Category, as follows:

Occupational Category	Multiply cover amount by:
Professional	0.80
White collar	1.00
Light manual	1.88
Heavy manual	3.50

Occupational Categories are based on the classification that the Insurer applies to the nature of your occupation. The below descriptions may assist you determine which Occupational

Category applies to you. You can contact Nationwide Super to determine which Occupational Category is applicable to you.

Description of Occupational Category for Income Protection

Occupational Categories	Description	Examples
White collar	To qualify as a white-collar worker, you need to: <ul style="list-style-type: none"> • Have occupational duties which are limited to white collar tasks (e.g. administrative, managerial, clerical); • Perform at least 80% of your occupational duties within an office environment; and • Not perform any manual work 	Receptionist, IT worker, Accounts clerk
Professional	To qualify as a professional worker, you need to meet the above white collar requirements as well as: Earn at least \$100,000 per annum; and either of the following: <ul style="list-style-type: none"> • Hold a tertiary qualification or be a member of a professional institute, or registered with a government body; or • Be a member of your employer's executive leadership team with more than 10 years industry experience. 	Pharmacist, Qualified Accountant (CA, CPA), Lawyer
Light manual	Light manual workers include skilled workers and qualified tradespeople involved in non-hazardous industries doing light-manual work.	Carpenter, Café owner, Travelling salesperson
Heavy manual	Heavy manual workers include workers without qualifications or those who work in higher risk occupations.	Warehouse worker, Labourer, Bricklayer

6.11 Insurance fees

Insurance fees for Income Protection depend on your type of cover (i.e. waiting period and benefit period), age, gender and Occupational Category. Insurance fees for Income Protection cover are deducted monthly from your account on the last Friday of the month. The insurance fees deducted from your account are net of the tax deduction that the Fund can claim for insurance expenses.

Please refer to the following tables in order to determine the insurance fee, the below tables are based on the waiting period:

- 30 day waiting period
- 60 day waiting period
- 90 day waiting period

6.12 Income Protection cover – 30 day waiting period

The annual premium rates per \$100 of monthly Income Protection benefit with a 30 day waiting period are as follows:

Age next birthday	Male Benefit - 2 year (\$)	Female Benefit - 2 year (\$)	Male Benefit - up to age 65 (\$)	Female Benefit - up to age 65 (\$)
16	2.02	2.47	5.73	7.15
17	2.06	2.55	5.93	7.40
18	2.14	2.62	6.11	7.64
19	2.16	2.67	6.18	7.76
20	2.19	2.71	6.34	7.92
21	2.26	2.86	6.50	8.38
22	2.18	2.85	6.48	8.49
23	2.16	2.89	6.53	8.79
24	2.13	2.90	6.55	9.01
25	2.09	2.95	6.63	9.30
26	2.06	2.98	6.70	9.60
27	2.09	3.09	6.91	10.12
28	2.13	3.20	7.16	10.72
29	2.16	3.34	7.50	11.32
30	2.23	3.51	7.90	12.03
31	2.31	3.69	8.25	12.85
32	2.38	3.86	8.73	13.63
33	2.50	4.08	9.22	14.56
34	2.62	4.31	9.76	15.57
35	2.74	4.54	10.37	16.58
36	2.89	4.78	11.02	17.65
37	3.03	5.08	11.69	18.91
38	3.22	5.40	12.49	20.27
39	3.39	5.71	13.26	21.54
40	3.60	6.07	14.20	23.06
41	3.81	6.43	15.13	24.54
42	4.03	6.83	16.08	26.13
43	4.29	7.25	17.10	27.80

Age next birthday	Male Benefit - 2 year (\$)	Female Benefit - 2 year (\$)	Male Benefit - up to age 65 (\$)	Female Benefit - up to age 65 (\$)
44	4.55	7.71	18.25	29.58
45	4.86	8.16	19.40	31.36
46	5.16	8.69	20.55	33.34
47	5.50	9.23	21.84	35.26
48	5.87	9.81	23.15	37.32
49	6.25	10.39	24.57	39.21
50	6.70	11.09	26.06	41.41
51	7.18	11.80	27.56	43.60
52	7.71	12.57	29.16	45.76
53	8.26	13.40	31.08	47.27
54	8.88	14.32	33.10	48.67
55	9.58	15.33	35.16	50.02
56	10.36	16.42	36.91	51.67
57	11.22	17.67	37.46	52.36
58	12.15	19.00	38.03	52.31
59	13.24	20.51	38.05	51.51
60	14.44	22.18	37.35	49.81
61	15.89	24.24	34.46	45.35
62	17.54	26.58	32.10	41.82
63	19.44	29.26	28.63	37.91
64	18.37	27.49	25.79	33.67
65	10.09	15.11	15.36	19.16

6.13 Income Protection cover – 60 day waiting period

The annual premium rates per \$100 of monthly Income Protection benefit with a 60 day waiting period are as follows:

Age next birthday	Male Benefit - 2 year (\$)	Female Benefit - 2 year (\$)	Male Benefit – up to age 65 (\$)	Female Benefit – up to age 65 (\$)
16	1.38	1.64	4.89	6.04
17	1.42	1.67	5.05	6.24
18	1.47	1.73	5.20	6.43
19	1.51	1.76	5.24	6.57
20	1.52	1.76	5.39	6.68
21	1.55	1.87	5.52	7.08
22	1.49	1.85	5.52	7.16
23	1.46	1.86	5.58	7.44
24	1.42	1.86	5.58	7.61
25	1.38	1.88	5.63	7.88
26	1.36	1.89	5.73	8.11
27	1.36	1.96	5.86	8.54
28	1.38	2.04	6.11	9.04
29	1.40	2.10	6.36	9.56
30	1.43	2.21	6.73	10.17
31	1.48	2.30	7.03	10.86
32	1.53	2.39	7.41	11.51
33	1.59	2.52	7.86	12.31
34	1.67	2.66	8.33	13.15
35	1.75	2.78	8.82	14.00
36	1.85	2.95	9.39	14.93
37	1.94	3.11	9.96	15.98
38	2.07	3.31	10.63	17.10
39	2.19	3.52	11.29	18.20
40	2.35	3.74	12.10	19.48
41	2.49	3.99	12.87	20.73
42	2.67	4.26	13.68	22.09
43	2.86	4.56	14.58	23.48

Age next birthday	Male Benefit - 2 year (\$)	Female Benefit - 2 year (\$)	Male Benefit - up to age 65 (\$)	Female Benefit - up to age 65 (\$)
44	3.06	4.88	15.54	24.99
45	3.30	5.25	16.53	26.48
46	3.53	5.61	17.51	28.16
47	3.81	6.01	18.59	29.80
48	4.11	6.46	19.72	31.52
49	4.43	6.90	20.92	33.14
50	4.78	7.40	22.19	34.98
51	5.19	7.93	23.48	36.84
52	5.63	8.51	24.84	38.67
53	6.12	9.13	26.47	39.93
54	6.66	9.79	28.17	41.13
55	7.28	10.52	29.95	42.24
56	7.93	11.31	31.42	42.73
57	8.67	12.17	31.98	43.14
58	9.50	13.08	32.45	42.66
59	10.42	14.11	32.41	41.55
60	11.44	15.23	31.74	39.63
61	12.68	16.59	29.11	35.36
62	14.10	18.12	26.98	31.88
63	15.67	19.89	23.92	27.34
64	14.38	18.15	21.31	23.86
65	6.97	9.07	12.03	12.75

6.14 Income Protection cover – 90 day waiting period

The annual premium rates per \$100 of monthly Income Protection benefit with a 90 day waiting period are as follows:

Age next birthday	Male Benefit - 2 year (\$)	Female Benefit - 2 year (\$)	Male Benefit – up to age 65 (\$)	Female Benefit – up to age 65 (\$)
16	0.89	1.00	2.81	3.63
17	0.90	1.01	2.87	3.68
18	0.93	1.04	2.96	3.85
19	0.94	1.06	3.00	3.88
20	0.94	1.06	3.01	3.97
21	0.97	1.13	3.07	4.19
22	0.90	1.09	3.00	4.08
23	0.85	1.06	2.90	4.08
24	0.81	1.05	2.81	4.17
25	0.77	1.05	2.75	4.17
26	0.73	1.04	2.72	4.23
27	0.71	1.06	2.79	4.36
28	0.71	1.11	2.83	4.68
29	0.71	1.14	2.87	4.81
30	0.71	1.14	3.01	4.93
31	0.73	1.18	3.11	5.20
32	0.74	1.21	3.29	5.37
33	0.77	1.26	3.38	5.63
34	0.81	1.31	3.57	5.83
35	0.84	1.33	3.69	5.90
36	0.90	1.42	3.94	6.40
37	0.94	1.47	4.20	6.64
38	1.04	1.59	4.56	7.30
39	1.11	1.69	4.95	7.88
40	1.21	1.84	5.45	8.51
41	1.33	1.99	5.97	9.25
42	1.46	2.19	6.52	10.20
43	1.61	2.42	7.14	11.16

Age next birthday	Male Benefit - 2 year (\$)	Female Benefit - 2 year (\$)	Male Benefit - up to age 65 (\$)	Female Benefit - up to age 65 (\$)
44	1.76	2.66	7.84	12.11
45	1.98	2.95	8.57	13.43
46	2.17	3.22	9.35	14.51
47	2.40	3.52	10.26	15.77
48	2.68	3.89	11.23	17.23
49	2.99	4.27	12.31	18.66
50	3.31	4.66	13.49	20.13
51	3.70	5.11	14.83	21.63
52	4.12	5.56	16.15	23.12
53	4.61	6.05	17.72	24.09
54	5.14	6.57	19.43	25.05
55	5.74	7.12	21.22	25.84
56	6.41	7.71	23.06	26.31
57	7.14	8.31	24.83	26.61
58	7.95	8.94	25.67	26.86
59	8.84	9.59	26.41	26.80
60	9.85	10.30	26.61	26.24
61	11.05	11.15	25.03	23.07
62	12.40	12.05	23.88	21.10
63	13.93	13.15	22.96	19.89
64	12.11	11.10	20.13	16.58
65	4.39	4.02	10.34	7.41

6.15 Example of Income Protection insured benefit calculation

Jim is a 35-year-old café owner (or 36 Age Next Birthday) who works full-time and earns a base salary of \$50,000 a year. Jim's waiting period is 60 days with a benefit to age 65. Jim's occupational category is 'light manual'

Jim has an Income Protection cover which is calculated as follows:

= Base Salary x 85%
= \$50,000 x 85%
= \$42,500 per year
= \$3,541.67 per month

The insurance fees would be calculated as:

= Annual benefit / \$100
= \$3541.67 / 100
= 35.42

Male, 36 Age Next Birthday, waiting period of 60 days and benefit to age 65 = \$9.39 annual premium.
Light manual occupational category 1.88

= 9.39 x 1.88
= 17.65 insurance fee per \$100 of monthly benefit

Total insurance
= 35.42 x 17.65
= \$625.28

7. Changing your insurance cover

7.1 Upon joining Nationwide Super

Double your automatic cover (Nationwide Super – Employer members only)

You can apply to double your automatic Death and TPD insurance cover within six months of starting work with your employer. If you elect this option, your number of Death and TPD units and premium cost will be doubled upon acceptance.

If you were not in Active Employment on the date of starting work with your employer, you will receive Limited Cover until you have returned to Active Employment.

To apply to double your automatic cover under this option, you will need to make an election on your Member Application Form or complete an Application for Double Insurance Cover form.

Income Protection opt-in

You can apply to opt-in to Income Protection insurance cover with a 2 year benefit period within six months of starting work with your Nationwide Super employer, up to the following maximum limits:

- For Standard occupation category - \$6,000 per month;
- For White Collar occupation category - \$8,000 per month; and
- For Professional occupation category - \$10,000 per month.

To apply to opt-in to Income Protection insurance cover under this option, you will need to complete an Income Protection Opt-in form, available by contacting us.

Opt-out

You can opt-out of all insurance cover by electing this option on your Member Application Form.

Once you have opted-out of insurance cover, you can only obtain insurance again by completing a full application for insurance which is accepted by the Insurer.

7.2 Applying to increase your cover

You can apply for Death and TPD, Death only, TPD only or Income Protection insurance cover that is paid for out of your Nationwide Super account, up to the following maximum limits:

- Death cover - \$10 million*;
- TPD cover - \$3 million; and
- Income Protection cover - \$30,000 per month (and up to 85% of your annual income).

* Terminal Illness cover is included as part of Death cover, the maximum Terminal Illness benefit payment is \$3 million.

How to apply for additional cover

To apply for voluntary Death, TPD or Income Protection insurance cover, you need to complete an application for insurance cover by:

- Downloading an Application for Insurance form from nationwidesuper.com.au/forms; or
- By requesting an Application for Insurance form to be sent out to you by email or post,

by contacting us.

You will be required to complete a Personal Statement as evidence of your health, income, occupation, lifestyle and pastimes. Before agreeing to provide you with insurance, the Insurer may require you to have a medical examination, depending on your health, and the amount of insurance cover you seek. The Insurer may accept your application, decline to issue cover or may impose special terms such as loadings, restrictions or exclusions.

Interim accident cover

Once the Insurer has received your completed application for insurance cover, you are provided with interim accident cover equal to the amount of insurance you have applied for, up to the following amounts:

- Death or TPD - \$2 million; and
- Income Protection cover - \$20,000 per month.

Interim accident cover provides insurance in the event you suffer an accident which results in your death, total and permanent disablement or disability (depending on the type of cover applied for).

Interim accident cover ends at the earlier of:

- The date the Insurer makes a decision on your application;
- You withdrawing your application for cover;
- 180 days have passed since the Insurer received your application.
- Interim income protection accident cover is payable for a maximum benefit period of two years.

Transferring cover from another regulated super fund

You can apply to match any existing similar insurance cover you hold through another super fund when transferring your entire account balance with the other fund to Nationwide Super, up to the following limits:

- \$2 million for Death and/or TPD cover; and
- \$20,000 per month for Income Protection cover.

These limits include any existing insurance cover that you hold with Nationwide Super.

To apply to transfer your existing insurance cover held with another super fund, you will need to request a transfer of your cover by completing a Request to Transfer Insurance Cover form, answering a few short health questions and providing a recent statement or letter showing your existing insurance cover.

Upon acceptance of your request to transfer cover from another super fund, your new insurance cover will be treated as follows:

- Any exclusions or premium loadings that apply to your cover held with another super fund will also be applied to your new cover with Nationwide Super;
- Your Death and/or TPD insurance cover will be rounded up to the nearest \$10,000;

- For Income Protection insurance cover, where your existing waiting period is different to Nationwide Super's available options, your new waiting period will be the next longest available; and
- For Income Protection insurance cover, where your existing benefit period is different to Nationwide Super's available options, your new benefit period will be the next shortest available.

You must transfer your entire super benefit and cancel your insurance cover with your other super fund to be eligible for transferring your insurance cover. If it is found that you have continued the insurance cover held with your other super fund, any benefit payable to you under the Nationwide Super Policy will be reduced by the amount of cover that was continued.

Increasing cover for life events

You can request an increase of up to 2 units of Death and/or TPD cover (or the equivalent amount of fixed cover rounded down to the nearest \$10,000) when you experience one of the following life events:

- Marriage or commencement of a de facto relationship;
- Birth or adoption of a child;
- Taking out or increasing a home mortgage;
- Completing an undergraduate degree;
- Death of a spouse;
- Divorce or termination of a de facto relationship;
- Becoming a carer of a family member;
- Child commencing primary or secondary school; or
- A salary increase of at least 15%.

To apply for additional cover under the life events feature, you will need to complete a Request to Increase Insurance – Life Event form, answering a few short health questions and provide sufficient evidentiary proof of the life event.

7.3 Cancelling or reducing your cover

You can reduce or cancel your insurance cover at any time, by completing a Request to Change Insurance form or by sending your request to Nationwide Super in writing.

Before cancelling any cover, you should carefully consider whether it is in your best interest to have no insurance cover and the impact this may have on you or your family if something were to happen to you. You should consider obtaining personal advice about your insurance needs from a licensed financial planner.

The effective date of your cancellation will be the date your cancellation request is processed.

We will confirm receipt of your instructions in writing and advise you of the date your insurance cover and insurance fees will be reduced or cancelled.

You will not be able to make a claim for insurance benefits for events or conditions that arise after your cover is cancelled.

If you are replacing your insurance cover with alternative cover, you should not cancel your insurance cover until the replacement cover is in place.

If you cancel your insurance cover, and you later wish to restart your cover, you will need to apply and provide health evidence to the insurer, who will decide whether to accept (on standard or non-standard terms) or decline your application.

8. Important information regarding your insurance cover

8.1 Notice of changes

Members will be given written notice of any changes to standard premium rates or levels of cover that are applicable across the entire Fund. This written notice may be in the form of a letter, a note on your annual super statement or in the Fund's Annual Report.

Any amendments will also be reflected in the Product Disclosure Statement which is available at nationwidesuper.com.au/PDS or by contacting Nationwide Super.

8.2 When does my Death and TPD insurance cover end?

Your automatic and/or voluntary Death and TPD insurance cover will cease, without the need for Nationwide Super or the Insurer to notify you, on the earliest date of one of the following events:

- Your 70th birthday
- You cease to be a member of Nationwide Super;
- Nationwide Super receives your written request for cover to end (unless your request specifies a later date, in which case, the date specified in your request);
- For automatic cover only, when your Nationwide Super account balance is less than \$200 and has not received any contributions or transfers in for 12 consecutive months;
- The first day your Nationwide Super account has insufficient funds to pay insurance fees. Your insurance fees are calculated on a daily basis but are deducted monthly. Therefore, the cover could cease part way through a month;
- You die;
- You are paid a TPD benefit, however the remainder of any Death cover amount that was in excess of your TPD cover amount will continue as Death Only fixed cover, rounded up to the nearest \$10,000 multiple;
- You commence active duty with the armed forces of any country; or
- Nationwide Super's Group Life Insurance Policy with the Insurer ceases.

If your cover ceases and you wish to be covered again, you will need to submit a new application for insurance, which the Insurer may or may not accept, or may impose conditions.

8.3 How do I make a claim?

If you would like to make a claim for a Terminal Illness benefit, a TPD benefit, an Income Protection benefit or advise the Plan of a member's death, please contact the Plan on 1800 025 241 for the appropriate forms and documents to be sent to you.

All claims involving insurance are assessed by both the insurer and the Trustee.

You should notify the Plan as soon as possible of any claim for a TPD benefit so that we can assist you with the claim process. It is highly recommended that you obtain medical evidence

documenting the state of your health and your ability to work in any occupation, for which you are suited by education, training or experience, at or shortly after the time you stop working. This will help to avoid any potential delay in processing your claim. If the insurer declines to pay your claim, the benefit is restricted to your account balance.

Successful claims and insurance proceeds

If your TPD or Terminal Illness claim is successful, any insurance proceeds will be credited to your account with the Plan. The insurance proceeds will be invested in the Australian Cash option, until you instruct us otherwise.

Any insurance proceeds received in the event of your death are placed into your account with the Plan and will remain invested in the Plan until the Trustee has made a determination on how your account balance is to be distributed. Note, death insurance proceeds will be invested in the Australian Cash option until the death benefit is paid from the Plan.

If your Income Protection claim is successful, the payments from the insurer are generally paid directly to you by cheque or by EFT to your nominated bank account. PAYG tax will be deducted.

8.4 Worldwide cover

Under the Death and TPD insurance cover, you are covered for 24 hours a day worldwide. In the event of a TPD, Terminal Illness or Income Protection claim, you may be required to return to Australia at your own expense to be assessed.

Under the Income Protection insurance cover, you are covered 24 hours a day, worldwide. The maximum period for which the Insurer will pay a claim where the claimant is located outside of Australia is 12 months from the date the waiting period ends, unless the insurer believes it is not medically possible for you to return to Australia.

8.5 Exclusions

No benefit will be paid by the Insurer where the payment of such benefit would expose the Insurer, Nationwide Super or you to any sanction, prohibition or restrictions under United Nations resolutions or the trade or economic sanctions, laws or regulations of Australia, the European Union or the United States of America.

For Death and TPD Benefit

No benefit will be paid by the Insurer if your Death or TPD is caused directly or indirectly by:

- war outside of Australia; or
- as a result of suicide or attempted suicide, self-inflicted injury or taking of drugs, other than prescribed, within 12 months of obtaining voluntary cover (Note: default cover is not affected by this exclusion).

For Income Protection benefit

No benefit will be paid by the Insurer if your disability is caused directly or indirectly by:

- Any intentional self-inflicted injury or attempt to commit suicide;
- War; or
- Normal pregnancy, childbirth, caesarean birth, threatened miscarriage, participation in medically assisted fertilisation techniques or normal discomforts of pregnancy.

8.6 Where to find more information

For further detailed information about Nationwide Super's insurance cover, see the Nationwide Super Group Life Insurance Policy and Nationwide Super Group Income Protection Policy. A copy of the Policies may be obtained by contacting the Nationwide Super team on 1800 025 241.

8.7 Notice of the duty of disclosure from our Life Insurer to you

Before a person enters into a life insurance contract in respect of their life or the life of another person, they have a duty to tell the insurer anything that they know, or could reasonably be expected to know, may affect the insurer's decision to provide the insurance and on what terms.

The person entering into the contract has this duty of disclosure until the insurance is provided.

The person who has entered into the contract has the same duty before they extend, vary or reinstate the contract.

The person entering into the contract does not need to tell the insurer anything that:

- reduces the risk of the insurance; or
- is common knowledge; or
- the insurer knows or should know as an insurer; or
- the insurer waives the duty to tell the insurer about.

If the insurance is for the life of another person and that person does not tell the insurer something that they know, or could reasonably be expected to know, may affect the insurer's decision to provide the insurance and on what terms, this may be treated as a failure by the person entering into the contract to comply with their duty of disclosure.

If the person entering into the contract does not tell us something

In exercising the following rights, the insurer may consider whether different types of cover can constitute separate contracts of life insurance. If the insurer does, it may apply the following rights separately to each type of cover.

If the person entering into the contract does not tell the insurer anything they are required to, and the insurer would not have provided the insurance if they had been told, the insurer may avoid the contract within 3 years of entering into it.

If the insurer chooses not to avoid the contract, it may, at any time, reduce the amount of insurance provided. This would be worked out using a formula that takes into account the premium that would have been payable if the person entering the contract had told the insurer everything they should have. However, if the contract has a surrender value or provides cover on death, the insurer may only exercise this right within 3 years of entering into the contract.

If the insurer chooses not to avoid the contract or reduce the amount of insurance provided, it may, at any time, vary the contract in a way that places the insurer in the same position it would have been in if the person entering the contract had told the insurer everything they should have. However, this right does not apply if the contract has a surrender value or provides cover on death.

If the failure to comply with the duty of disclosure is fraudulent, the insurer may refuse to pay a claim and treat the contract as if it never existed.

8.8 CommInsure's Privacy Policy

CommInsure's Privacy Policy can be found at commbank.com.au or upon request at any Commonwealth Bank Australia (CBA) branch. It describes their handling practices, information on how to make a complaint and how they deal with your complaint.

8.9 Terminal Illness benefit

You may be able to access your death benefit before your death if you are diagnosed with a *Terminal Medical Condition* as defined in superannuation legislation.

To access the insured component of your death benefit prior to your death, up to a maximum of \$3 million, you must also meet the insurer's definition of Terminal Illness. You can find this in 'The insurer's definitions' section of this guide.

8.10 Payment of insurance fees

Insurance fees for insurance cover are deducted from your account on the last Friday of each month. If your account balance becomes insufficient to meet the cost of your insurance, the insurance cover relating to those fees may be cancelled as per the policy definition below:

If the Insured Member's account has insufficient funds to enable You to deduct the next premium due in respect of that Insured Member, the later of the following dates:

(i) the end of the month for which the Insured Member had sufficient funds to enable You to deduct the next premium due in respect of that Insured Member; or

(ii) where the Insured Member has sufficient funds to enable You to deduct a portion of the next premium due, the last date (determined on a pro-rata basis) for which the portion of the premium applies.

It is important to note that this will be done without warning. It is your responsibility to maintain a sufficient balance within the Fund if you want to retain your insurance benefits.

9. The insurer's definitions

Below are the insurance cover definitions in the insurance policy. Please contact us if you require a full list of insurance policy definitions.

Active Employment means a member who is Employed and in the Insurer's opinion is capable of performing their identifiable duties without restriction by an Illness or Injury for at least 30 hours per week (whether or not they are actually working those hours).

Australian Resident means a person who resides in Australia and is either an Australian citizen or is a holder of a permanent visa as identified by the Australian Department of Immigration and Citizenship.

Carer means a person who provides daily care and attention to someone who is disabled, suffers a medical condition, or is frail aged where the daily care and attention is required for 7 or more hours per day.

Date of Disablement means the later of the date on which a Medical Practitioner examines and certifies in writing that the covered member is Disabled and when the member ceases all work.

Consumer Price Index or CPI means the consumer price index (weighted average of 8 capital cities combined) as published by the Australian Bureau of Statistics as at the relevant date. If the Index is not published the increase shall be calculated by reference to such other retail price index which in the Insurer's opinion most closely replaces it.

Death by Accident means death as a result of Injury where death occurs within 365 days of the Injury.

Dependant means the definition outlined in the Superannuation Industry (Supervision) Act, 1993 (Cth):

- A spouse whether married, de facto, or same gender but does not include any former spouse;
- A child either by birth, ex-nuptial or adopted, regardless of age;
- A financial dependant; or
- Any person with whom there is an interdependency relationship.

Disability Income means any income earned or in the Insurer's opinion capable of being earned by an insured member from personal exertion while Disabled or Partially Disabled when the Income is from their Occupation, or any other occupation.

Disabled (for Income Protection cover) means solely as a result of Illness or Injury occurring whilst this Policy is in force if an insured member has ceased to be gainfully employed and is:

- a) unable to perform at least one Income Producing Duty of his or her Occupation;
- b) not working in any occupation, whether or not for reward; and
- c) under the regular care and following the advice of a Medical Practitioner.

Domestic Duties means duties normally performed by a person who remains at home who is not working in regular employment for income; these duties include cleaning the home, laundry, shopping for food, cooking meals, and, where applicable, looking after a Dependant.

Employed means being engaged by an employer under a contract of employment or under an award, Australian workplace agreement or certified agreement; or being Self-Employed.

Fixed Cover means insurance cover that is fixed and for the premium to adjust each year on the insured member's birthday using the applicable premium rate for this cover.

Illness means sickness, disease or disorder.

Incident Date means date of disablement, date of death or the date we agree the insured member is certified to have a Terminal Illness.

Income means:

Employed in Permanent Employment - The total monthly regular income received from an employer for personal exertion for their usual occupation (including salary sacrifice amounts but excluding overtime, profit distributions, directors fees and any other non-regular payments); where this income includes commission and bonuses these components will be averaged over a three year period.

Not Employed in Permanent Employment or not Employed:- The average of their regular income as defined above over the previous 12 months or the actual period if less, subject to a minimum averaged period of 6 months.

Self-Employed:- Earnings include the gross revenue generated by the business as a result of the person's exertion less eligible business expenses. Earnings exclude investment income, business expenses and mandated superannuation contributions. Monthly income is the average over the previous 12 months for such individuals.

Employed but absent from Employment due to being on leave without pay: The total monthly regular income received from an employer (as defined in Employed in Permanent Employment), immediately before leave without pay commencing.

Income Producing Duty means a duty of the insured member's Occupation that generates at least 20% of the member's

Injury means bodily injury which is caused solely and directly by external, violent and accidental means and is independent of any other cause.

Limited Cover means the insured member is only covered for an Illness that first becomes apparent, or an Injury that first occurs, on or after the date cover commenced.

Medical Practitioner means a person who is registered and practicing as a medical practitioner in Australia other than:

- a) the member;
- b) the member's family member;
- c) the member's manager, employee or colleague;
- d) the member's business partner or associate sharing business interests.

Monthly Income is the pre-disability Income earned by the insured member in one calendar month.

Occupation means the employment or activity in which the insured member is principally employed.

Partially Disabled (for Income Protection cover) means an insured member:

- a) has been Disabled for at least 14 days;
- b) is unable to work in their Occupation at full capacity as a result of the Illness or Injury resulting in Disability;
- c) is working in their Occupation or any other occupation but only in a reduced capacity;
- d) is earning a monthly Disability Income less than their Monthly Income; and
- e) is under the regular care and following the advice of a Medical Practitioner.

Partial Disability Monthly Benefit means a Benefit payable in accordance with the following formula:

$$\frac{\text{Monthly Income} - \text{Disability Income}}{\text{Monthly Income}} \times \text{Disability Monthly Benefit}$$

Participating Employer means an employer who contributes to the Fund in respect of employees who are admitted as members of the Fund.

Permanent Employment means a person is Employed by an employer under a single and ongoing contract that:

- a) is of indefinite duration or is for a fixed term of no less than 6 months;
- b) requires the person to perform identifiable duties;
- c) requires the person to work a regular number of hours each week;
- d) provides for paid annual leave, sick leave and long service leave; and
- e) is not employed on a casual basis.

Professional means a person is able to satisfy the White Collar definition and:

- a) is earning in excess of \$100,000 per annum; and
- b) holds a tertiary qualification or is a member of a professional institute or registered by a government body; or
- c) is a member of the executive leadership team of the employer with more than 10 years' experience in the applicable industry.

Self-Employed means an individual who directly or indirectly owns part or all of the business or professional practice from which the person earns a regular income.

Terminal Illness means:

- a) two Medical Practitioners, one of whom specialises in the member's Illness, certifies in

writing that despite reasonable medical treatment the Illness or Injury is likely to result in the member's death within 24 months of the date of the certification; and

- b) the Insurer is satisfied, on medical or other evidence, that despite reasonable medical treatment the Illness or Injury is likely to result in the member's death within 24 months of the date of the certification referred to in paragraph (a).

The Illness or Injury from which the member suffers must occur, and the date of the certification referred to in paragraph (a) must be made while the member is covered under this Policy and the Policy must be current at the time the claim is lodged.

If an insured member suffers a Terminal Illness, a Terminal Illness benefit will be paid, which is an advanced payment of the Death benefit (up to \$3 million).

Total and Permanent Disablement (TPD) means:

A - When an insured member is under age 65 and was Employed in regular remunerative employment for at least 15 hours per week within the 12 months prior to their Date of Disablement if all of the following applies:

The member has, solely due to Illness or Injury, been unable to work (whether or not for reward) for three consecutive months commencing from the Date of Disablement and due to that same Illness or Injury also satisfies the following:

- a) has continued to remain absent from all work (whether or not for reward) since the Date of Disablement;
- b) is under Regular and Ongoing Care; and
- c) the Insurer determines that:
 - I. as at the Date of Disablement; and
 - II. for the following 3 consecutive months; and

continuously since then the member is unlikely to ever engage in or work, whether or not for reward, in any occupation or work for which he or she is or may become reasonably suited by education, training or experience irrespective of where the occupation or work is located and in making this determination, the Insurer will consider any past or future retraining or rehabilitation that the member could reasonably undertake or has undertaken.

B - Applies to all insured members, (i.e. where they cannot meet the criteria for other TPD definitions). The member satisfies (i), (ii) and (iii) below:

- I. Solely as a result of Illness or Injury, the member is permanently unable to perform the basic activities normally undertaken as part of everyday life. The insurer must be satisfied that the member is permanently and irreversibly unable to perform without the assistance of another person any two of the following activities:
 - Bathing – to wash in the bath or shower (including getting into and out of the bath or shower) or wash satisfactorily by other means
 - Dressing – to put on, take off all garments and if needed any braces, artificial limbs or other medical apparatus
 - Feeding – the ability to feed him or herself when food has been prepared and made

available

- Mobility – to get out of a bed and into an upright chair or a wheelchair and back again
- Maintain Personal Hygiene – the ability to maintain a satisfactory level of personal hygiene by using the toilet or otherwise managing bladder and bowel function.

If the member can perform the activity by using special equipment they will be considered able to undertake that activity; and

- II. the member is under Regular and Ongoing Care of a Medical Practitioner who specialises in the Illness or Injury; and
- III. the member is unlikely to ever engage in or work, whether or not for reward, in any occupation or work for which he or she is or may become reasonably qualified by education, training or experience, irrespective of where the occupation or work is located and in making this determination the Insurer will consider any future retraining or rehabilitation that the member could reasonably undertake or has undertaken.

C - When an insured member is under age 65 and was engaged in unpaid Domestic Duties at own residence. The member satisfies (i), (ii) and (iii) below:

- I. Solely as a result of Illness or Injury, the member has become permanently unable to perform the domestic duties normally undertaken as part of everyday life for three consecutive months. The insurer must be satisfied that that the member is permanently and irreversibly unable to perform without the assistance of another person all of the following activities:
 - Cleaning the usual place of dwelling
 - Purchasing household food and items used for cleaning
 - Preparing meals for the household
 - Performing the household laundry services such as washing or ironing
 - Driving or transporting family to and from school, sport, work or social events (where applicable)
 - Taking care of a child or family dependents (where applicable)
- II. the Insured Member is under Regular and Ongoing Care of a Medical Practitioner who specialises in the Illness or Injury;
- III. the member is unlikely to ever engage in or work, whether or not for reward, in any occupation or work for which he or she is or may become reasonably qualified by education, training or experience, irrespective of where the occupation or work is located and in making this determination the Insurer will consider any future retraining or rehabilitation that the member could reasonably undertake or has undertaken.

D - When an insured member is under age 65 and was Employed in regular remunerative employment for at least 15 hours per week within the 12 months prior to their Date of Disablement and suffers from a specified medical condition. The member has, solely due to Illness or Injury, been unable to work as a result of suffering cardiomyopathy, primary pulmonary hypertension, major head trauma, motor neurone disease, multiple sclerosis, muscular dystrophy,

paraplegia, quadriplegia, hemiplegia, diplegia, tetraplegia, dementia and Alzheimer's disease, Parkinson's disease, blindness, loss of speech, loss of hearing, chronic lung disease, severe burns or severe rheumatoid arthritis (each as defined); and due to that same Illness or Injury also satisfies the following:

- a) has continued to remain absent from all work (whether or not for reward) since the Date of Disablement;
- b) is under Regular and Ongoing Care; and
- c) the member is unlikely to ever engage in or work, whether or not for reward, in any occupation or work for which he or she is or may become reasonably qualified by education, training or experience irrespective of where the occupation or work is located and in making this determination the Insurer will consider any past or future retraining or rehabilitation that the Insured Member could reasonably undertake or has undertaken.

Regular and Ongoing Care means the Insured member:

- a) is under the regular and ongoing care of a Medical Practitioner who specialises in the Illness or Injury;
- b) is complying with reasonable medical advice and all treatment options; and
- c) has, in the insurer's opinion, reached maximum medical improvement possible despite reasonable treatment options based on their Illness or Injury.

Regular remunerative employment means the person is working on a regular basis in any employment, business, profession or occupation, for reward or hope of reward. A person who is on employer approved leave (including leave without pay) will be considered to be in regular remunerative employment

Total and Permanent Disablement by Accident means Total and Permanent Disablement as a result of Injury, where the Date of Disablement occurs within 365 days of the Injury

Waiting Period means the continuous period of days, commencing from the date a Medical Practitioner examines and certifies that an insured member is Disabled and for which an insured member has to be Disabled or Partially Disabled before a benefit starts to accrue under this Policy, subject to the following requirements:

- a) the insured member must be Disabled for at least the first 7 days of the waiting period to qualify for a benefit; and
- b) if the insured member returns to work at full capacity during the waiting period, the waiting period starts again unless the insured member returns to work only once and it is for a period of no more than 5 consecutive days. If the insured member returns to work only once for a period of 5 consecutive days or less, the number of days worked will be added to the waiting period.

War includes an act of war (whether declared or not), revolution, invasion, rebellion or civil unrest.

White Collar means duties of a person's occupation are limited to professional, managerial, administrative, clerical, secretarial or similar 'white collar' tasks which do not involve manual work and are undertaken entirely (or at least 80%) within an office environment (excluding travel time from one office environment to another).

Specified Medical Conditions

Cardiomyopathy	Condition of impaired ventricular function of variable aetiology (often not determined) resulting in significant physical impairment, i.e. Class 3 on the New York Heart Association classification of cardiac impairment.
Primary Pulmonary Hypertension	Primary Pulmonary Hypertension associated with right ventricular enlargement established by cardiac catheterisation resulting in significant permanent physical impairment to the degree of at least Class 3 of the New York Heart Association classification of cardiac impairment.
Major Head Trauma	Injury to the head resulting in neurological deficit causing either: <ul style="list-style-type: none"> a) a permanent whole person impairment of at least 25% (as defined in the 6th edition of the American Medical Association's publication 'Guides to the Evaluation of Permanent Impairment'); or b) the permanent and irreversible inability to perform without the assistance of another person any one of the activities of daily living, as certified by a consultant neurologist.
Motor Neurone Disease	Motor Neurone Disease diagnosed by a consultant neurologist.
Multiple Sclerosis	The unequivocal diagnosis of Multiple Sclerosis as confirmed by a consultant neurologist and characterised by demyelination in the brain and spinal cord evidenced by Magnetic Resonance Imaging or other investigations acceptable to Us. There must have been more than one episode of well-defined neurological deficit with persisting neurological abnormalities.
Muscular Dystrophy	The unequivocal diagnosis of muscular dystrophy by a consultant neurologist.
Paraplegia	The permanent loss of use of both legs or both arms, resulting from spinal cord illness or injury.
Quadriplegia	The permanent loss of use of both arms and both legs resulting from spinal cord illness or injury.
Hemiplegia	The total loss of function of one side of the body due to illness or injury, where such loss of function is permanent.
Diplegia	The total loss of function of both sides of the body due to illness or injury where such loss of function is permanent.
Tetraplegia	The total and permanent loss of use of both arms and both legs, together with loss of head movement, due to brain illness or injury or spinal cord illness or injury.

Dementia and Alzheimer's Disease	<p>Clinical diagnosis of dementia (including Alzheimer's disease) as confirmed by a consultant neurologist, psycho-geriatrician, psychiatrist or geriatrician.</p> <p>The diagnosis must confirm permanent, irreversible failure of brain function resulting in significant cognitive impairment for which no other recognisable cause has been identified.</p> <p>Significant cognitive impairment means a deterioration in the person's Mini-Mental State Examination scores to 24 or less and deterioration would continue but for any effective treatments. Dementia related to alcohol or drug abuse is excluded.</p>
Parkinson's Disease	<p>The unequivocal diagnosis of Parkinson's Disease by a consultant neurologist where the consultant neurologist confirms that the condition:</p> <ul style="list-style-type: none"> • is the established cause of two or more of the following: <ul style="list-style-type: none"> • muscular rigidity • resting tremor • bradykinesia; and • has caused significant progressive physical impairment, likely to continue progressing but for any treatment benefit. The person must be following the advice and treatment of a specialist neurologist.
Blindness	<p>The permanent loss of sight in both eyes, whether aided or unaided, due to illness or injury to the extent that visual acuity is 6/60 or less in both eyes or to the extent that the visual field is reduced to 20 degrees or less of arc, as certified by an ophthalmologist.</p>
Loss of Speech	<p>The total and irrecoverable loss of the ability to produce intelligible speech as a result of permanent damage to the larynx or its nerve supply or the speech centres of the brain. The loss must be certified by an appropriate medical specialist.</p>
Loss of Hearing	<p>Complete and irrecoverable Loss of Hearing from both ears as a result of illness or injury, as certified by a specialist We consider appropriate. This definition is not met if the person's hearing has been restored through any natural or assisted means, unless the assisted means is a device implanted in the cochlea.</p>
Chronic Lung Disease	<p>Permanent end stage respiratory failure with FEV1 test results of consistently less than one litre, requiring continuous permanent oxygen therapy.</p>

<p>Severe Burns</p>	<p>Tissue injury caused by thermal, electrical or chemical agents causing deep (third degree) burns to:</p> <ul style="list-style-type: none"> • 20% or more of the body surface area as measured by the age appropriate use of the 'The Rule of Nines' or the Lund and Browder Body Surface Chart or • Both hands, requiring surgical debridement and/or grafting or • The face, requiring surgical debridement and/or grafting.
<p>Severe Rheumatoid Arthritis</p>	<p>The life insured meets one of the following:</p> <p>(a) Diagnosis of severe rheumatoid arthritis by an appropriate medical specialist where all of the following applies:</p> <ul style="list-style-type: none"> • the diagnosis has been confirmed by appropriate radiology and blood tests • the Insured Member has undergone all reasonable treatment regimens, including immunosuppressive and biological agents, as recommended by the Insured Member's medical specialist for the rheumatoid arthritis • despite undergoing the recommended treatment regimes, the rheumatoid arthritis has caused the Insured Member's permanent impairment of at least 25% (as defined in the 6th edition of the American Medical Association's publication 'Guides to the Evaluation of Permanent Impairment'); or <p>b) The unequivocal diagnosis of severe rheumatoid arthritis by a rheumatologist. The diagnosis must be supported by, and evidence, all of the following criteria:</p> <ul style="list-style-type: none"> • at least a six week history of severe rheumatoid arthritis which involves three or more of the following joint areas: <ul style="list-style-type: none"> proximal interphalangeal joints in the hands metacarpophalangeal joints in the hands metatarsophalangeal joints in the foot, wrist, elbow, knee or ankle • simultaneous bilateral and symmetrical joint soft tissue swelling or fluid (not bony overgrowth alone) • typical rheumatoid joint deformity and at least two of the following criteria: <ul style="list-style-type: none"> morning stiffness rheumatoid nodules erosions seen on x-ray imaging <p>the presence of either a positive rheumatoid factor or the serological markers consistent with the diagnosis of severe rheumatoid arthritis.</p> <p>Degenerative osteoarthritis and all other arthritides are excluded.</p>

10. Fees and costs

The following information is incorporated into section 6 of the PDS:

Type of fee or cost	Amount	How and when paid
Investment fee	0.36%* p.a. of your account balance.	The investment fee is deducted from investment returns before the unit price is declared and is not deducted from your account.
Administration fee	0.25% p.a. of your account balance. Plus, a fixed-dollar fee of \$78 p.a.	The administration fee is deducted from your account on the last business day of each month. The fixed-dollar fee will be indexed with AWOTE [^] at 1 July each year. <i>The Trustee passes on the tax deductions it receives so the actual amount deducted from your account would be 0.213% p.a. Plus, a fixed-dollar fee of \$66.30 p.a.</i>
Buy-sell spread	These spreads vary depending on the investment option(s) you choose. For more information, please visit nationwidesuper.com.au/buysellspread	You can read more about the buy-sell spread in the 'Additional explanation of investment fees and costs' section of your Investment Guide.
Switching fee	Nil	Not applicable.
Exit fee	\$99.12 per payment.	This fee applies when you take part or all of your benefits out of the Fund and is deducted from your account at the time of the payment. This fee will be indexed with AWOTE [^] at 1 July each year. <i>The Trustee passes on the tax deductions it receives so the actual amount deducted from your account would be \$84.25 per payment.</i>
Advice fees[∇] relating to all members investing in a particular MySuper product or investment option	Nil for general and simple personal advice related to your interests in Nationwide Super. An advice fee for complex personal advice may be payable.	For Advice fees, refer to the 'Additional explanation of fees and costs' section of your Super Guide.
Other fees and costs	Insurance fee: For insurance fees, refer to 'Types of insurance cover within Nationwide Super' section of this guide.	The insurance fee is calculated monthly and deducted from your account on the last Friday of the month.
	Family fees: Family Law fees are payable for information requests and for payment splits.	For Family Law fees, refer to the 'Additional explanation of fees and costs' section of your Super Guide.
Indirect Cost Ratio (ICR)	0.29% p.a. of your account balance, which comprises: Estimated Performance Related Fee of 0.06% p.a. Estimated Other Indirect Costs of 0.23% p.a. Operational Risk Reserve of 0.00% p.a.	These costs have already been accounted for in the unit price. Refer to the Additional Explanation of Fees and Costs section of the Investment Guide.

* The Investment fee varies according to the option you invest in. The quoted fee here is for the MySuper option.

[^] AWOTE means Average Weekly Ordinary Time Earnings.

[∇] Additional fixed-dollar or percentage-based fees may apply depending on the type of advice you need. These fees will be agreed upfront between you and the adviser.

10.1 Example of annual fees and costs for the MySuper option

The table below provides an example of how the fees and costs in the MySuper option of Nationwide Super can affect your superannuation investment over a one year period.

You should use this table to compare this product with other superannuation products. As noted on this document, fees and costs can be paid directly from your account, or deducted from your investment returns.

Example: MySuper		Balance of \$50,000*
Investment fees:	0.36% p.a. of your account balance.	For every \$50,000 you have in this option, you will be charged \$180 each year.
PLUS Administration fees:	0.25% p.a. of your account balance. Plus \$78 p.a. (\$6.50 per month).	And, you will be charged \$125 in administration fees. Plus, a fixed-dollar fee of \$78 p.a. regardless of your balance. <i>The Trustee passes on the tax deductions it receives so the actual amount deducted from your account would be \$106.25 p.a. Plus, a fixed-dollar fee of \$66.30 p.a.</i>
PLUS Indirect costs for the MySuper option	0.29% p.a. of your account balance.	And, each year an indirect cost of \$145 will be deducted from your investments.
EQUALS Total cost of product		If your balance is \$50,000, then for that year you will be charged fees of \$528 [^] for the superannuation product. <i>The Trustee passes on the tax deductions it receives so the estimated cost to you would be \$497.55 p.a.</i>

Important note:

For more information on the fees and costs related to the investment options, please refer to your Investment Guide. For the 'Additional Explanation of Fees and Costs' and a list of Defined Fees as per superannuation law, please refer to your Super Guide.

[^] Additional fees may apply. And, if you withdraw all or part of your balance from Nationwide Super you will be charged a gross exit fee of \$99.12 (indexed by AWOTE at 1 July each year) for each payment.

