

POLICY ENHANCEMENT SUMMARY

For policyholders

15 October 2023



HEALTHIER, LONGER,
BETTER LIVES

Periodically, AIA Australia (AIAA), upgrades its Priority Protection and Priority Protection for Platform Investors benefit range to ensure that the features and benefits offered to our customers and policy holders meet their changing needs.

It is important to read this Policy Enhancement Summary together with your existing Priority Protection Product Disclosure Statement and Policy Document (PDS) and any other policy notices. The enhancements outlined in this document form part of your Policy.

These enhancements apply from 15 October 2023. The improved features and benefits outlined below are only effective on and from this date. The enhancements override your existing policy terms and conditions, except to the extent where you are disadvantaged in any way, in which case the previous policy wording will apply. We will not apply these benefit improvements to:

- the assessment of claims which relate to any health conditions that you already had when the improvements took effect, except in the assessment of claims for a Progressive Event under the Crisis Recovery Stand Alone, Crisis Recovery, Double Crisis Recovery, Crisis Extension, Family Protection and Complimentary Family Protection benefits; or
- any Policy previously issued to you which is not in force when the benefit improvement is made.

The information provided is a summary only and should be read in conjunction with the full terms and conditions relating to the enhanced benefit in the PDS version 29 dated 15 October 2023. The description of the benefit or term 'Prior to change' shown is as per the PDS version 28 dated 16 April 2023.

In addition, we have made an update to policies with Crisis Recovery or Crisis Recovery Stand Alone and policy commencement dates prior to 1 February 2006.

The enhancement still applies to you if your existing PDS has a different description of this benefit.

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1. UPDATED POLICY FEE, PREMIUM STRUCTURE, RATE GUARANTEE AND DISCOUNTS

We have updated some information related to policy fee, premium structure, rate guarantees and discounts.

Benefit	Prior to change	After change								
All benefits	<p>Change: Updated policy fee which was indexed as per policy terms effective 1 October 2023.</p> <p>Policy fee</p> <p>As of the date of this PDS, the policy fee is \$94.27 per year, per Life Insured regardless of the number of plans, benefits or Policies purchased under Priority Protection.</p> <p>If you have cover under a Superannuation Plan and you have also purchased Linked Benefits that are held under a separate Policy, the policy fee will be applied to the Superannuation Plan.</p> <p>The policy fee is charged in addition to the premiums applicable per benefit and any other fees and charges that apply to your Policy, and will be subject to any premium frequency charge and stamp duty applicable to your Policy.</p> <p>From time to time and as set out under 'Changes to fees and charges' we may vary the method and rules we use to determine the timing and amount of any change in the policy fee, including indexing of the fee.</p> <p>The policy fee will automatically increase each year effective from 1 October by the percentage increase in the CPI over the 12 months ending on 30 June prior to the effective date of the increase in the policy fee (1 October).</p> <p>There will be no more than one policy fee increase in a year.</p> <p>Each year any increase in the policy fee on your Policy will apply at the Policy Anniversary on or after the date of the policy fee increase (1 October).</p>	<p>Policy fee</p> <p>The policy fee you are charged depends on your premium frequency.</p> <p>As of the date of this PDS, the policy fee is:</p> <table border="1" data-bbox="911 663 1517 819"> <thead> <tr> <th data-bbox="911 663 1118 685">Premium frequency</th> <th data-bbox="1214 663 1318 685">Policy fee</th> </tr> </thead> <tbody> <tr> <td data-bbox="911 707 991 730">Monthly</td> <td data-bbox="1214 707 1286 730">\$ 8.99</td> </tr> <tr> <td data-bbox="911 752 1023 775">Half-yearly</td> <td data-bbox="1214 752 1286 775">\$52.46</td> </tr> <tr> <td data-bbox="911 797 975 819">Yearly</td> <td data-bbox="1214 797 1286 819">\$99.92</td> </tr> </tbody> </table> <p>per Life Insured regardless of the number of plans, benefits or Policies purchased under Priority Protection.</p> <p>If you have cover under a Superannuation Plan and you have also purchased Linked Benefits that are held under a separate Policy, the policy fee will be applied to the Superannuation Plan.</p> <p>The policy fee is charged in addition to the premiums applicable per benefit and any other fees and charges that apply to your Policy, and will be subject to any premium frequency charge and stamp duty applicable to your Policy.</p> <p>From time to time and as set out under 'Changes to fees and charges' we may vary the method and rules we use to determine the timing and amount of any change in the policy fee, including indexing of the fee.</p> <p>The policy fee will automatically Increase each year effective from 1 October by the percentage increase in the CPI over the 12 months ending on 30 June prior to the effective date of the increase in the policy fee (1 October).</p> <p>There will be no more than one policy fee increase in a year.</p> <p>Each year any increase in the policy fee on your Policy will apply at the Policy Anniversary on or after the date of the policy fee increase (1 October).</p>	Premium frequency	Policy fee	Monthly	\$ 8.99	Half-yearly	\$52.46	Yearly	\$99.92
Premium frequency	Policy fee									
Monthly	\$ 8.99									
Half-yearly	\$52.46									
Yearly	\$99.92									

Benefit	Prior to change	After change
All benefits	Clarification: Made clear how the discount terms and AIA Vitality discounts work..	
	<p>Page 180</p> <p>Premium discounts</p> <p>This section describes the Premium discounts that may apply to your Policy. The premium discounts described in this PDS do not constitute terms of your insurance policy and are not guaranteed. We will notify you if the premium discounts described in this PDS are withdrawn or varied, and any resulting changes to the premium payable for your Policy will be advised to you at least 30 days prior to such change taking effect.</p>	<p>Page 180</p> <p>Premium discounts</p> <p>This section describes the Premium discounts that may apply to your Policy. The premium discounts described in this PDS are not guaranteed. We will notify you if the premium discounts described in this PDS are withdrawn or varied, and any resulting changes to the premium payable for your Policy will be advised to you at least 30 days prior to such change taking effect.</p>
	<p>Page 181</p> <p>AIA Vitality membership discount</p> <p>If the Life Insured is a member of the AIA Vitality program (AIA Vitality) provided by AIA Australia, the premium in relation to your Policy may be discounted. Premium discounts do not constitute terms of your policy and are not guaranteed. Fees and charges may apply to AIA Vitality membership.</p> <p>...</p>	<p>Page 181</p> <p>AIA Vitality membership discount</p> <p>If the Life Insured is a member of the AIA Vitality program (AIA Vitality) provided by AIA Australia, the premium in relation to your Policy may be discounted. Premium discounts are not guaranteed. Fees and charges may apply to AIA Vitality membership.</p> <p>AIA Vitality discounts are dependent on your continued membership and activity in the AIA Vitality program. The AIA Vitality discount will reduce or end if certain conditions are not met, such as when the Life Insured hasn't participated in the AIA Vitality program. Alternatively, the AIA Vitality discount could increase (which will reduce premiums) based on the Life Insured's AIA Vitality activity.</p> <p>AIA Vitality discounts are not guaranteed and may change or cease if you decide to cease membership in the AIA Vitality program, the AIA Vitality program is changed or if AIA removes the AIA Vitality program. We will notify you if the premium discounts described in this PDS are withdrawn or varied, and any resulting changes to the premium payable for your Policy will be advised to you at least 30 days prior to such change taking effect. For more information go to www.aiavitality.com.au</p> <p>...</p>

2. UPDATED POLICY TERMS FOR LIFE COVER, SUPERANNUATION LIFE COVER PLAN AND CRISIS RECOVERY STAND ALONE PLAN

We have made changes and clarifications to enhance the product and understanding of cover.

Benefit	Prior to change	After change
Crisis Extension	<p>Change: We regularly review our medical definitions in line with updates to medical guidelines and regulatory requirements. We have updated the Advanced Invasive Cancer medical definition to include cover for blood cancers which require stem cell transplant for treatment.</p>	
	<p>Page 198</p> <p>Advanced Invasive Cancer means:</p> <ul style="list-style-type: none"> • Cancer at a stage III or greater using the TNM classification • Acute Myeloid Leukaemia or Acute Lymphocytic Leukaemia • Chronic Lymphocytic Leukaemia or Small Lymphocytic Lymphoma at stage III or stage IV using the Rai staging system or stage C using the Binet staging system. • Hodgkin's/Non-Hodgkin's lymphoma stage III or IV using the Lugano (Ann Arbor with Cotswold Modification) staging system. • Multiple Myeloma Stage III using the Revised International Staging System. • Any blood cancer requiring bone marrow transplant for treatment • Squamous Cell Carcinoma or Basal Cell Carcinoma of the Skin <ul style="list-style-type: none"> - with extensive cortical or medullary bone involvement, - with invasion of the base of the cranium, - with any distant spread to another organ, or - measuring greater than 4cm or with erosion of the muscle, cartilage, bone, lymphatics or peri neural invasion. • Brain tumours classified as grade III or grade IV using the World Health Organization grading for tumours of the central nervous system. 	<p>Page 198</p> <p>Advanced Invasive Cancer means:</p> <ul style="list-style-type: none"> • Cancer at a stage III or greater using the TNM classification • Acute Myeloid Leukaemia or Acute Lymphocytic Leukaemia • Chronic Lymphocytic Leukaemia or Small Lymphocytic Lymphoma at stage III or stage IV using the Rai staging system or stage C using the Binet staging system. • Hodgkin's/Non-Hodgkin's lymphoma stage III or IV using the Lugano (Ann Arbor with Cotswold Modification) staging system. • Multiple Myeloma Stage III using the Revised International Staging System. • Any blood cancer requiring bone marrow or stem cell transplant for treatment • Squamous Cell Carcinoma or Basal Cell Carcinoma of the Skin <ul style="list-style-type: none"> - with extensive cortical or medullary bone involvement, - with invasion of the base of the cranium, - with any distant spread to another organ, or - measuring greater than 4cm or with erosion of the muscle, cartilage, bone, lymphatics or peri neural invasion. • Brain tumours classified as grade III or grade IV (CNS WHO grade 3 or 4) using the World Health Organization grading for tumours of the central nervous system.

Benefit	Prior to change	After change
Crisis Recovery & Double Crisis Recovery	<p>Clarification: Aligned wording with LGBTQI+ guidelines. Gender names have been removed.</p> <p>Page 43</p> <p>Carcinoma in situ (limited to certain bodily sites) – must be confirmed by histopathology:</p> <ul style="list-style-type: none"> • Carcinoma in situ of the breast – where no mastectomy is performed and is confirmed by a biopsy. • Female cancers <ul style="list-style-type: none"> - vagina, ovary, vulva and fallopian tube where the tumour must be classified as TIS according to the TNM staging method, and - cervix-uteri with a grading of either TNM stage TIS or CIN 3 or above. • Male cancers – penis and testicle where the tumour must be classified as TIS according to the TNM staging method. <p>The full Sum Insured will be paid for Carcinoma in situ of the breast where the entire breast is removed or where other surgery and adjuvant therapy (such as radiotherapy and/or chemotherapy) is performed specifically to arrest the spread of malignancy, and this procedure is the appropriate and necessary treatment as confirmed by an appropriate specialist Medical Practitioner.</p>	<p>Page 43</p> <p>Carcinoma in situ (limited to the following bodily sites) – must be confirmed by histopathology:</p> <ul style="list-style-type: none"> • breast – where no mastectomy is performed and is confirmed by a biopsy • vagina, ovary, vulva and fallopian tube – where the tumour must be classified as TIS according to the TNM staging method • cervix-uteri – with a grading of either TNM stage TIS or CIN 3 or above, or • penis and testicle – where the tumour must be classified as TIS according to the TNM staging method. <p>The full Sum Insured will be paid for Carcinoma in situ of the breast where the entire breast is removed or where other surgery and adjuvant therapy (such as radiotherapy and/or chemotherapy) is performed specifically to arrest the spread of malignancy, and this procedure is the appropriate and necessary treatment as confirmed by an appropriate specialist Medical Practitioner.</p>
	<p>Page 124</p> <p>Carcinoma in situ (limited to certain bodily sites) (must be confirmed by histopathology)</p> <p>Carcinoma in situ of the breast where no mastectomy is performed and is confirmed by a biopsy.</p> <p>Carcinoma in situ – female cancers:</p> <ul style="list-style-type: none"> • vagina, ovary, vulva and fallopian tube where the tumour must be classified as TIS according to the TNM staging method, and • cervix-uteri with a grading of either TNM stage TIS or CIN 3 or above. <p>Carcinoma in situ – male cancers:</p> <ul style="list-style-type: none"> • penis and testicle where the tumour must be classified as TIS according to the TNM staging method. <p>The full Sum Insured will be paid for Carcinoma in situ of the breast where the entire breast is removed or where other surgery and adjuvant therapy (such as radiotherapy and/or chemotherapy) is performed specifically to arrest the spread of malignancy, and this procedure is the appropriate and necessary treatment as confirmed by an appropriate specialist Medical Practitioner.</p>	<p>Page 124</p> <p>Carcinoma in situ (limited to the following bodily sites) – must be confirmed by histopathology:</p> <ul style="list-style-type: none"> • breast – where no mastectomy is performed and is confirmed by a biopsy • vagina, ovary, vulva and fallopian tube – where the tumour must be classified as TIS according to the TNM staging method • cervix-uteri – with a grading of either TNM stage TIS or CIN 3 or above, or • penis and testicle – where the tumour must be classified as TIS according to the TNM staging method. <p>The full Sum Insured will be paid for Carcinoma in situ of the breast where the entire breast is removed or where other surgery and adjuvant therapy (such as radiotherapy and/or chemotherapy) is performed specifically to arrest the spread of malignancy, and this procedure is the appropriate and necessary treatment as confirmed by an appropriate specialist Medical Practitioner.</p>
Accidental Death and Accidental TPD	<p>Change: Updated Sum Insured limits:</p> <ul style="list-style-type: none"> • Accidental Death Sum Insured limit increased to \$2 million • Accidental TPD (Home Duties occupation category) aligned to \$1 million 	

3. CLARIFICATION FOR INCOME PROTECTION CORE

We have clarified Premium Freeze for IP CORE.

Benefit	Prior to change	After change
Premium Freeze	Clarification: Added Premium Freeze benefit into the IP CORE Built-in summary tables as this benefit is available for IP CORE as a built-in benefit.	

4. CRISIS RECOVERY EVENT BENIGN BRAIN TUMOUR ADDED 1 FEBRUARY 2006

We introduced a new Crisis Recovery event for Benign Brain Tumour on 1 February 2006 but was not included in the enhancement summary document at the time. This has now been included to enhance our customers' understanding. This is only relevant to policies issued prior to 1 February 2006. For updates to this medical definition please refer to Policy Enhancement Summaries dated 1 December 2009, 24 May 2010, 4 May 2015 and 16 December 2017. Only the updates dated prior to the date of a Crisis Recovery event will be relevant.

Benefit	PDS dated prior to 1 February 2006	After change (1 February 2006)
All benefits	Clarification: To be explicit on how the large sum insured discounts work on the increased portion at a late stage. Not available	'BENIGN BRAIN TUMOUR' means a noncancerous tumour on the brain giving rise to symptoms of increased intracranial pressure such as papilledema, mental symptoms, seizures and sensory or motor skills impairment as confirmed by a consultant neurologist. The tumour must result in permanent neurological deficit, resulting in either: (a) at least 25% impairment of whole person function, as defined in Guides to the Evaluation of Permanent Impairment 5th edition, American Medical Association, or (b) the life insured being totally and permanently unable to perform any one of the following 'Activities of Daily Living': (i) bathing, (ii) dressing, (iii) eating, (iv) toileting, (v) transferring. The presence of the underlying tumour must be confirmed by imaging studies such as CT scan or MRI (Magnetic Resonance Imaging). Cysts, granulomas, cholesteatomas, malfunctions in or of the arteries or veins of the brain, haematomas and tumours in the pituitary gland or spine are not covered.