

INJURY CASH PROTECTION.

Keep your finances going if
you're accidentally injured.

Product Disclosure Statement.
Preparation date: 1 March 2012



Contents

Important information

Injury Cash Protection is issued by The Colonial Mutual Life Assurance Society Limited ABN 12 004 021 809 AFSL 235035 (CMLA), a wholly-owned subsidiary of the Commonwealth Bank of Australia ABN 48 123 123 124. The Commonwealth Bank of Australia and its subsidiaries (other than CMLA) do not guarantee the obligations or performance of CMLA or the products it offers.

CommInsure is a registered business name of CMLA.

CMLA's principal office of administration is:

Level 1
11 Harbour Street
Sydney NSW 2000

CMLA guarantees the benefits payable under Injury Cash Protection. All payments to and from CMLA under the Injury Cash Protection policies will be made to and from CMLA's Statutory Fund No.5. This policy has no savings element or surrender value and will not participate in the profits or surpluses of CMLA or the Statutory Fund No. 5.

The offer made in this document is currently only available to permanent residents of Australia.

All references to monetary amounts in this document are references to Australian dollars.

The information in this PDS has been prepared without taking into account your objectives, financial situation or needs. Before acting on this information you should consider the appropriateness of the information with regard to your own objectives, financial situation and needs. You should consider the PDS in making any decision about whether to acquire Injury Cash Protection.

All examples or illustrations in this PDS are only intended to demonstrate how certain benefits are calculated. All benefits will be determined in accordance with the relevant policy conditions.

In this PDS 'you/your' means:

- the person who is (or will be) the policyowner, and
- a life insured, who may be the policyowner or their spouse or partner,

as appropriate.

We will pay all benefits to the policyowner or the policyowner's estate (if applicable).

CommInsure is one of Australia's oldest trading life insurance companies, operating since 1873. It is the life insurance arm of the Commonwealth Bank Group and has over 3 million customers and an in-force premium of over \$1.5 billion.

CommInsure was awarded the Australia and New Zealand Life Insurance Company of the Year for 2010¹.

¹ Awarded by the Australian and New Zealand Institute of Insurance and Finance (ANZIIF).

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“I didn’t see that coming...”

Having an accident can change your way of life, sometimes permanently. If you’re stuck in bed not earning an income your debts are likely to be mounting up. You may also have to pay someone to do the things around the house you’d normally do yourself.

Imagine not being able to walk, dress yourself, or even make a cup of tea? We all want to believe ‘it won’t happen to me’, but there’s always a chance it will.

Two simple benefits

Injury Cash Protection covers you in a few important ways. If you have an accidental injury, we can pay:

- a daily amount if you’re confined to bed by your doctor (doubled if the injury happens overseas)
- an amount for reasonable homecare expenses
- a lump sum if you’re permanently and totally disabled.

The amount you receive depends on the plan you’ve chosen. Please see the ‘Summary of benefits’ on pages 4 and 5 for details.

It’s easy to apply

You can apply now by calling **1300 131 103** between 8am and 7pm Sydney time, Monday to Friday, otherwise we may call you.

You can also apply online at:

www.commbank.com.au/simplelifeinsurance

It’s simple:

- no medical examination is needed when you apply
- cover is pre-approved
- acceptance is guaranteed
- you can cover your spouse or partner on your policy
- cover is available to all permanent Australian residents aged between 18 and 50.

You’re under no obligation to apply for cover.

If you’d rather not receive a call from us, please call us on **1800 003 040** between 8am and 7pm Sydney time, Monday to Friday.

Summary of benefits

Type of cover	Standard plan	Premier plan	Premier Plus plan	See page...
Daily Bed Confinement benefit Pays a daily amount if you have an accidental injury and are confined to bed 24 hours a day under full-time care while you recover.	\$200/day	\$400/day	\$400/day	6
Out-of-Country Daily Bed Confinement benefit Pays an extra amount (on top of the Daily Bed Confinement benefit) if the accidental injury happens overseas and you're confined to bed.	\$200/day	\$400/day	\$400/day	6
Homecare Assistance benefit Pays an extra amount to cover reasonable homecare expenses for up to 45 days while you're confined to bed due to an accidental injury that happened in Australia.	Up to \$75/day	Up to \$150/day	Up to \$150/day	7
Permanent and Total Disability benefit Pays a single lump sum if an accidental injury leaves you permanently and totally disabled within 90 days of the accident in one of the ways listed below.				8
Both hands or both feet, or both eyes	\$100,000	\$200,000	\$300,000	
One hand and one foot				
One hand and one eye				
One foot and one eye				
One hand, one foot, or one eye	\$50,000	\$100,000	\$150,000	
Speech	\$75,000	\$150,000	\$225,000	
Hearing in both ears	\$75,000	\$150,000	\$225,000	

Important note: All benefit amounts are halved if the accidental injury occurs on or after your 75th birthday.

For more information about when you're not covered, or when

the cover ends, read pages 10 and 17 respectively.

Daily Bed Confinement benefit

We'll pay this benefit if:

- a doctor confines you to bed for 24 hours a day as a direct result of an accidental injury
- you're confined to bed within 90 days of the date of the accidental injury, and
- you're under the full-time care of a person acceptable to us.

We'll pay for up to 90 days while you're confined to bed, starting from the second day of your bed confinement.

If you're confined to bed for more than seven days, we need a written confirmation from a doctor at least every seven days. We will only accept the doctor's written confirmation for the period of bed confinement after the date the confirmation is written.

If you need a second period of bed confinement for the same accidental injury, then we'll pay the benefit for up to 90 days in total, including the initial period of bed confinement.

The amount we pay depends on your age at the time of the accidental injury and the plan chosen:

Your age	Standard plan	Premier plan	Premier Plus plan
Up to 75	\$200/day	\$400/day	\$400/day
75 and over	\$100/day	\$200/day	\$200/day

Out-of-Country Daily Bed Confinement benefit

When we pay the Daily Bed Confinement benefit because of an accidental injury that happens while you're overseas, we'll also pay an Out-of-Country Daily Bed Confinement benefit, starting from the second day of your bed confinement.

The Out-of-Country Daily Bed Confinement benefit pays the same amount as the Daily Bed Confinement benefit for the same maximum period of 90 days, except that you must be confined to bed within 30 days of the injury, instead of 90.

If you need a second period of bed confinement for the same accidental injury while still outside Australia, then we'll pay the benefit for up to 90 days in total, including the initial period of bed confinement.

If you return to Australia the Out-of-Country Daily Bed Confinement benefit will cease.

The amount we pay depends on your age at the time of the accidental injury and the plan chosen:

Your age	Standard plan	Premier plan	Premier Plus plan
Up to 75	\$200/day	\$400/day	\$400/day
75 and over	\$100/day	\$200/day	\$200/day

Homecare Assistance benefit

When we pay you the Daily Bed Confinement benefit because of accidental injury that happened in Australia, and you also incur reasonable homecare expenses (other than medical expenses) because of the bed confinement, we'll re-imburse those expenses up to the amount of the daily Homecare Assistance benefit.

We'll pay this benefit for up to 45 days, starting from the second day of your bed confinement.

The amount we pay depends on your age at the time of the accidental injury, the homecare expense, and the plan chosen:

Your age	Standard plan	Premier plan	Premier Plus plan
Up to 75	Up to \$75/day	Up to \$150/day	Up to \$150/day
75 and over	Up to \$37.50/day	Up to \$75/day	Up to \$75/day

Permanent and Total Disability benefit

If you suffer an accidental injury and, as a direct result, become permanently and totally disabled within 90 days of the accidental injury in any of the ways described on page 4, we'll pay a lump sum.

We'll pay this benefit once for each life insured during the life of the policy. If one accidental injury causes multiple disabilities we'll pay the largest applicable amount.

The amount we pay depends on the type of disability, your age at the time of accidental injury and the plan chosen (see the table below).

Permanent and total disability to	Your age	Standard plan	Premier plan	Premier Plus plan
Both hands or both feet, or both eyes	Up to 75	\$100,000	\$200,000	\$300,000
	75 and over	\$50,000	\$100,000	\$150,000
One hand and one foot				
One hand and one eye				
One foot and one eye				
One hand, one foot, or one eye	Up to 75	\$50,000	\$100,000	\$150,000
	75 and over	\$25,000	\$50,000	\$75,000
Speech	Up to 75	\$75,000	\$150,000	\$225,000
	75 and over	\$37,500	\$75,000	\$112,500
Hearing in both ears	Up to 75	\$75,000	\$150,000	\$225,000
	75 and over	\$37,500	\$75,000	\$112,500

Important note: Please see the definition of permanent and total

disability on page 18 to better understand the nature of the disability.

When you're not covered

Cover is not provided if the accidental injury:

- is due to war or act of war, whether declared or not (except death while on war service)
- occurs while you're under the influence of alcohol where your blood alcohol level is 80mg of alcohol per 100ml of blood or higher, or any other drug, other than a drug taken or used as prescribed by a doctor
- occurs while you're acting either as a pilot or crew member, or while a passenger, other than a fare-paying passenger, in any aircraft
- results directly or indirectly from you committing or attempting to commit an assault, battery or criminal offence or act of terrorism
- is intentionally self-inflicted or directly or indirectly due to attempted suicide or directly or indirectly due to self harm
- occurs while you're participating in any professional sport
- occurs while you're driving or riding in any kind of race or trial
- is caused by, either wholly or in part, arises out of or is connected with any disease, bodily or mental infirmity, or medical or surgical treatment of these
- is caused by post-traumatic stress disorder.

We will also not make a payment if it would cause us to breach the Health Insurance Act 1973 (Cth) or the National Health Act 1953 (Cth).

Some case studies

John – Daily Bed Confinement

John is 76. He falls off his roof one day while doing some tile repairs, breaking a leg and knocking himself unconscious. His doctor says he has a multiple fracture and a serious concussion and orders him to bed confinement.

John spends the next 30 days in bed, under the full-time care of a nurse, recovering and letting his leg heal. Once a week his doctor sends us a letter confirming that John is confined to bed for 24 hours a day. As John's on the Standard plan and is over 75, we pay him \$100 per day for 29 days (\$2,900).

A few days after he's up and about again, John suffers a relapse of his concussion and is ordered back to bed by his doctor for 20 days, so we pay him \$100 per day for 20 days (\$2,000).

John spends a total of 50 days in bed, 49 of which are covered by his policy. If John had another relapse, we'd cover him for up to another 41 days (90 days – 49 = 41).

Kiera – Out-of-Country Daily Bed Confinement Benefit

Kiera, 25, has a motorcycle accident while holidaying in the mountains of Thailand. She breaks a leg and an arm and suffers severe bruising and grazes, so the doctor orders her to bed confinement for the next five days under the full-time care of a nurse.

Kiera's on a Premier Plus plan, so we pay her \$800 per day for four out of those five days (\$400 for the Daily Bed Confinement benefit, plus an extra \$400 for the Out-of-Country Daily Bed Confinement benefit), a total of \$3,200.

Helen – Homecare Assistance benefit

Helen is a 38-year-old single mother with two children. While on a skiing holiday in Australia, she has a bad fall fracturing a hip. Her doctor orders her to bed confinement for 14 days to recover under the care of her sister.

Helen arranges for a domestic housekeeping service to clean the house, do the laundry and cook the meals at a cost of \$200 per day. As she has the Premier plan, we pay \$150 of this daily cost for 13 days, a total of \$1,950, on top of the Daily Bed Confinement benefit.

Some case studies

Andrew – Permanent and Total Disablement benefit

When using a circular saw to cut some timber for his home renovations, Andrew, 52, slips and drops the saw. It slices through his hand and then falls onto one foot, leaving him permanently and totally disabled in one hand and one foot.

As Andrew is on the Premier plan we pay him a benefit of \$200,000. His Injury Cash Protection policy then ends.

When you apply

Choosing the level of cover that's right for you

When you apply for an Injury Cash Protection policy, as the policyowner you:

- nominate the level of cover you want by selecting one of the following plans: Standard, Premier and Premier Plus, which offer increasing levels of Permanent and Total Disability cover, for higher premiums
- decide whether you want to include your spouse or partner as a life insured under the policy.

See 'Summary of benefits' on page 4 for the benefit limits we pay for each level.

We'll send you a policy schedule confirming your choices and the premium you have to pay for the policy.

When your cover starts

If we agree to cover you, we'll send you a policy schedule and policy document that define all the details of your cover and the terms and conditions under which we've issued it. Your cover starts from the commencement date shown on your policy schedule.

Cooling off period

You have a 30-day 'cooling off period' from the date you receive your policy document, to decide whether Injury Cash Protection meets your needs.

Within this period you can cancel the policy and we'll refund in full any premiums you've paid.

Worldwide cover

Once your policy is issued, subject to the terms and conditions of the policy, it will cover you 24 hours a day, wherever you are in the world.

How much it costs

Two things affect the cost of the policy:

- the plan you choose
- whether the policy covers just you, or your partner/spouse as well.

This table shows the monthly cost of the policy:

Plan	One person	Two people
Standard plan	\$9.95	\$17.90
Premier plan	\$19.90	\$35.80
Premier Plus plan	\$29.85	\$53.70

Paying your premiums

As the policyowner, you're responsible for paying all premiums.

You pay your premiums monthly in advance, on the day of the month shown on your policy schedule. You can pay by direct debit from a bank account or by credit card.

You can change the way you pay at any time as long as we have a current and acceptable payment authority from you authorising this method.

Changes to premiums

The policyowner can change the policy at any time, subject to the terms and conditions of the policy. Your premiums will change if you change your plan (e.g. from Standard to Premier) or if you add or remove a spouse or partner (see page 16). We'll send you written confirmation of the change.

We can change the premium rate by giving you three months' notice. We will only do this if we are changing the premiums for all policies that have the same terms as yours.

Taxation

Generally, your premiums are not tax-deductible and any benefits you receive do not count as income for tax purposes. Individual circumstances differ, so please check with your tax adviser. This tax statement is based on the continuation of laws as at the preparation date of this PDS.

Making a claim

If you suffer an accidental injury, call us as soon as possible:

- in Australia, call **1300 131 103**
- from overseas, call **+61 13 10 56**

We are available between 8am and 7pm Sydney time, Monday to Friday.

Evidence supporting your claim

When you make a claim we'll ask you to complete a claim form, and we may ask you for evidence that supports your claim.

Evidence we request will usually include a medical certificate from a doctor confirming the permanent and total disability or bed confinement. The policy document outlines the types of evidence we require.

You must provide all certificates and evidence (including any medical examinations or tests) at your own expense.

Paying claims

If we approve a claim, we'll make the payment to the policyowner or the policyowner's estate if applicable.

Changing and ending your policy

The policyowner can change or end the policy at any time, subject to the terms and conditions of the policy.

Adding a partner or spouse

If you start the policy just for yourself, you can add your partner or spouse to the policy at any time by giving us a call on **1300 131 103** between 8am and 7pm Sydney time, Monday to Friday.

If we agree to cover them, they'll be insured on the same plan as you. We'll send you confirmation of the date their cover started and we'll increase your premium from that date.

Changing your plan

If you change your plan we'll send you a new policy schedule and adjust your premiums accordingly. If your partner or spouse is also on the policy, the plan will change for them too.

Cancelling the policy

If you want to cancel your policy, either:

- call us on **1300 131 103** between 8am and 7pm Sydney time, Monday to Friday, or
- write to us at:
Commlnsure,
Reply Paid 8446
PARRAMATTA WESTFIELD NSW 2150
and include your Policy Schedule.

The cancellation date is either the day you call us or the day we receive your written notice of cancellation.

The policy doesn't have a cash value when it's cancelled.

When does the policy end?

The policy ends if:

- the policyowner or we cancel the policy
- the policyowner doesn't pay the premiums for more than one month after the due date and we cancel the policy
- the policyowner dies or becomes permanently and totally disabled
- the policyowner turns 99 (policy ends on the next policy anniversary date).

Cover for your spouse or partner under the policy also ends if:

- the policyowner or we cancel the spouse or partner cover
- they die or become totally and permanently disabled
- they turn 99 (spouse or partner cover ends on the next policy anniversary date)
- the policy ends.

If you don't pay the premiums

If you don't pay the premiums for the policy for more than one month after the due date, we'll give you written notice that we intend to cancel the policy. We'll write to you before cancelling the policy.

What the words in this PDS mean

For the purposes of this PDS, these words have the following meanings:

accidental injury means physical injury caused solely and directly by violent, external and visible means (independently of sickness, medical or surgical treatment, or any other cause). The accidental injury must occur on or after the policy commencement date, or where a spouse or partner has been added to the policy, after their commencement date of cover.

bed confinement or confined to bed means on the advice of a doctor (confirmed in writing and if required by us, confirmed by a doctor we appoint), and because of accidental injury the life insured is, for a specific period, confined to bed rest for 24 hours per day under the full-time care of a person acceptable to us (such a person need not be medically qualified).

doctor means a registered medical practitioner registered in Australia who is not you, a life insured, or a relative or de facto partner of you or an insured person.

If practising other than in Australia, your doctor must have qualifications equivalent to a doctor registered in Australia. We must be satisfied of the doctor's qualifications.

life insured means a person whose life is insured under the policy. This can be the policyowner and their partner or spouse.

policy commencement date means the date stated in your policy schedule as your cover commencement date. It is the date cover under your policy starts.

permanent and total disablement means (as it applies) due to an accidental injury:

- for a hand, complete and permanent severance at or above the wrist joint or permanent and total loss of use to a hand
- for a foot, complete and permanent severance at or above the ankle joint or permanent and total loss of use to a foot
- the total and irrecoverable loss of the entire sight of an eye or both eyes (as applies)
- the total and irrecoverable loss of speech, or
- the total and irrecoverable loss of hearing in both ears.

permanent and total disability and permanently and totally disabled has the same meaning.

we/us/our/CMLA/CommInsure means The Colonial Mutual Life Assurance Society Limited ABN 12 004 021 809.

you/your means a:

- policyowner or the person who will be the policyowner, or
- the life insured which may be the policyowner or the policyowner's partner or spouse,

as is appropriate.

Contacting us

As the policyowner, if you have any questions, please call us on **1300 131 103** between 8am and 7pm (Sydney time), Monday to Friday.

We will post any correspondence to your last known address. You will be deemed to have received correspondence after allowing for ordinary postal delivery times.

Please send all correspondence to:

Commlnsure
Reply Paid 8446
PARRAMATTA WESTFIELD NSW 2150

What to do if you have a complaint

We accept that sometimes we can get things wrong, and when this happens we're determined to make them right again. Most problems can be resolved quickly and simply by talking with us.

To get help resolving your problem, call us on **1300 131 103**.

If you need further assistance, contact Customer Relations:

- by email to **CustomerRelations@cba.com.au**, or
- in writing to:
Customer Relations
Commonwealth Bank Group
GPO Box 41
SYDNEY NSW 2001

You can also contact us through a third party, providing you give us written authority to deal with them about the complaint.

The National Relay Service may assist anyone who is deaf, or who has a hearing or speech impairment.

National Relay Service
TTY/Voice: 133 677
SSR: 1300 555 727
www.relayservice.com.au

If you make a complaint to us we will:

- acknowledge your complaint and make sure we understand the issues
- do everything we can to fix the problem
- keep you informed of our progress
- keep a record of your complaint
- give you our name, a reference number and contact details so that you can follow up if you want to, and
- provide a final response within 45 days.

If we can't provide a final response to your complaint within 45 days, we will:

- inform you of the reasons for the delay
- advise of your right to complain to the Financial Ombudsman Service (FOS), and
- give you the FOS contact details.

External dispute resolution

If you're not happy with our response, you can refer your complaint to the Financial Ombudsman Service (FOS). FOS offers a free, independent dispute resolution service for the Australian banking, insurance and investment industries.

You can contact FOS:

- by calling 1300 780 808
- online at www.fos.org.au
- by writing to:
Financial Ombudsman Service
GPO Box 3
MELBOURNE VIC 3001

Privacy of your personal information

Collecting information

'Customer Information' is information about a customer. It includes personal information such as name, age, gender, contact details as well as your health and financial information.

Why we collect customer information

We collect personal information (including full names, addresses and contact details) so that we can administer our customer relationships, and give customers like you the products and services they request as well as information on the Commonwealth Bank Group's products and services. The law may require us to identify our customers. When we do this, we do it by collecting and verifying information about you.

We may also collect and verify information about persons who act on your behalf. Collecting and verifying information helps to protect against identity theft, money laundering and other illegal activities.

How we use it

We use your customer information to manage our relationship with you, give you the products and services you request and also tell you about the products and services offered by the Group, affiliated providers and external providers for whom we act as agent. If we have your email or mobile phone details we may contact you electronically. You may also receive information on the Group's products and services electronically.

How we collect it

We can collect and verify customer information in different ways and we will advise you of the most acceptable ways to do this. We may disclose your customer information in carrying out verification – e.g. we may refer to public records to verify information and documentation, or we may verify with an employer that the information you have given us is accurate.

What we collect

Depending on whether you are an individual or an organisation, the information we collect will vary. For instance, if you are an individual, the type of information we may collect and verify includes your full name, date of birth and residential address. If you are commonly known by two or more different names, you must give us full details of your other name or names.

Accuracy

You must provide us with accurate and complete information. If you do not, you may be in breach of the law and also we may not be able to provide you with products and services that best suit your needs.

Protecting customer information

We comply with the National Privacy Principles as incorporated into the Privacy Act 1988 (Cth). We disclose customer information to other members of the Commonwealth Bank Group (including overseas members), so that the Group may have an integrated view of its customers and to facilitate the integrated treatment of its customers. It also enables other members of the Group to give you information about their products and services.

Viewing your information

You can (subject to permitted exceptions) request access to your personal information by contacting:

Customer Relations
Commonwealth Bank Group
Reply Paid 41
SYDNEY NSW 2000
Telephone: **1800 805 605**
Facsimile: 1800 028 542

We may charge you for providing access.

For more information about our privacy and information-handling practices, please refer to the Commonwealth Bank Group Privacy Policy Statement, which is available through commbank.com.au or on request from any Commonwealth Bank branch.

For more information call

1300 131 103

8 am - 7 pm (Sydney time)

Monday to Friday

or go to

commbank.com.au/simplelifeinsurance