# Total Care Plan

Policy Addendum

Dated 23 April 2007

### Policy Addendum for Total Care Plan

Please read this document and keep it in a safe place with your Total Care Plan Policy Document. It is important that you read this document in conjunction with your Policy Document and any other Policy Addenda or policy notices issued by The Colonial Mutual Life Assurance Society Limited ABN 12 004 021 809.

This Policy Addendum applies from 23 April 2007 and the improved conditions it provides are only effective on and from this date.

#### Note

The improved conditions must be read subject to, and in conjunction with, your existing policy terms and conditions. Any pre-existing condition at the time this improvement is offered may be excluded from being eligible for payment under any improved conditions.

#### Important information

This document is an agreement between you and The Colonial Mutual Life Assurance Society Limited ABN 12 004 021 809.

This document is issued by The Colonial Mutual Life Assurance Society Limited Level 7, 39 Martin Place, Sydney NSW 2000.

Feature/Benefit	Change	New policy wording
Definition of Occupation has been amended We now only consider your occupation just prior to disability regardless of whether you had been in that occupation for less than twelve months.	For the definition of Occupation that applied to you before 23 April 2007, please refer to your Policy Document.  The definition of Occupation, which is detailed in the adjacent 'New Policy Wording' column, has been amended to accommodate the upgrade of your policy.	Occupation Occupation means the full-time gainful occupation of the Life Insured immediately prior to Total and Permanent Disablement or Total Disability, as applicable.
The wording of the Guaranteed Insurability Option (Personal Events) has been amended There is no longer a limit of five cover increases. You can now increase your cover once per year up to expiry.  If your policy was issued before 21 November 2005, this upgrade does not apply to your policy.	For the wording of the Guaranteed Insurability Option (Personal Events) that applied to you before 23 April 2007, please refer to your Policy Document.  The wording of the Guaranteed Insurability Option (Personal Events), which is detailed in the adjacent 'New Policy wording' column, has been amended to accommodate the upgrade of your policy.  All other parts of the wording not referenced in the 'New Policy wording' column continue to apply.	The Guaranteed Insurability Option (Personal Events)  Premiums On the exercising of a right under this option, your Annual Premium will (whether or not the Level Premium Rate Option applies) be recalculated to take into account the increase in cover according to the premium rates current at the time and with regard to the age of the Life Insured at the time of the increase in cover.  The premium we charge you for Guaranteed Insurability Option (Personal Events) will cease to be payable on the earlier of the Cover Expiry Date, if any, and the Policy Anniversary Date following the 45th birthday of the Life Insured.  Restrictions The Life Care benefit and any Trauma Cover benefit can only be increased once every twelve months under this option.  A Trauma Cover benefit cannot be increased under this option if:  • the benefit exceeds \$2,000,000 or the increase would result in the benefit exceeding \$2,000,000  • it was issued subject to special conditions or exclusions or the premium payable for the benefit is subject to a premium loading.

Feature/Benefit	Change	New policy wording
The wording of the Guaranteed Insurability Option (Personal Events) has been amended (continued)		<ul> <li>a Life Care benefit does not apply under this Policy to the Life Insured for whom the Trauma Cover benefit applies</li> <li>a death, trauma or disablement benefit has been paid or is payable by us under this or any other policy issued in respect of the Life Insured or</li> <li>circumstances exist which, if the subject of a claim under this or any other policy issued in respect of the Life Insured, would result in a death, trauma or disablement benefit being payable by us for the Life Insured.</li> <li>The sum of all increases to the Trauma Cover benefit under this option cannot exceed the amount of the Trauma Cover benefit as at the date the benefit came into force.</li> </ul>
The wording of the Guaranteed Insurability Option (Business Events) has been amended You can now increase your sum insured up to 25% (previously 20%) after a relevant business event.  The requirement that the period between each increase cannot be more than three years has been removed. Cover can be increased once a year without medical underwriting as long as the business event has occurred in the last three years.  If your policy was issued before 21 November 2005, this upgrade does not apply to your policy.	For the wording of the Guaranteed Insurability Option (Business Events) that applied to you before 23 April 2007, please refer to your Policy Document.  The wording of the Guaranteed Insurability Option (Business Events), which is detailed in the adjacent 'New Policy wording' column, has been amended to accommodate the upgrade of your policy.  All other parts of the wording not referenced in the 'New Policy wording' column continue to apply.	Guaranteed Insurability Option (Business Events)  Business growth  If the Policy Owner indicated on the Application that this Policy is being applied for in respect of the value of a business in which both the Policy Owner and Life Insured are involved, the Policy Owner can, without the requirement to supply further medical evidence, apply for an increase in the Life Care benefit and, if applicable, the TPD Cover and Trauma Cover benefits in line with the growth in the value of the business. This increase is, however, subject to the following conditions:  • the revised valuation of the business must be calculated by a qualified accountant or by a valuer approved by us. We must agree to the financial basis for the revised sum insured, but such agreement will not be unreasonably withheld  • the maximum increase in the Life Care benefit is the lesser of:  - 25% of the Life Care benefit or  - the actual increase in the value of the business  • the maximum increase in the TPD Cover benefit is the lesser of:  - 25% of the TPD Cover benefit or  - the actual increase in the Trauma Cover benefit is the lesser of:  - 25% of the Trauma Cover benefit or  - the actual increase in the value of the business

Feature/Benefit	Change	New policy wording
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The wording of the Guaranteed Insurability Option (Business Events) has been amended (continued)		Key person  If the Policy Owner indicated on the Application that this Policy is being applied for in respect of the value of a Life Insured to a business in which the Policy Owner is involved, the Policy Owner can, without the requirement to supply further medical evidence, apply for an increase in the Life Care benefit and, if applicable, the TPD Cover and Trauma Cover benefits in line with the growth in the value of the Life Insured to the business. This increase is, however, subject to the following conditions:
		<ul> <li>the Life Insured must, in our opinion, be a person who is crucial to the operation of the business</li> </ul>
		<ul> <li>the revised valuation of the value of the Life Insured to the business must be calculated by a qualified accountant or by a valuer approved by us. We must agree to the financial basis for the revised sum insured, but such agreement will not be unreasonably withheld</li> </ul>
		the maximum increase in the Life Care benefit is the lesser of:
		- 25% of the Life Care benefit or
		- \$2,000,000 per annum or
		<ul> <li>the actual increase in the value of the Life Insured to the business</li> </ul>
		the maximum increase in the TPD Cover benefit is the lesser of:
		- 25% of the TPD Cover benefit or
		<ul> <li>the actual increase in the value of the Life Insured to the business</li> </ul>
		<ul> <li>the maximum increase in the Trauma Cover benefit is the lesser of:</li> </ul>
		- 25% of the Trauma Cover benefit or
		<ul> <li>the actual increase in the value of the Life Insured to the business</li> </ul>
		Financial interest  If the Policy Owner indicated on the Application that this Policy is being applied for in respect of the value of a Life Insured's financial interest in a business in which the Policy Owner also has a financial interest, the Policy Owner can, without the requirement to supply further medical evidence, apply for an increase in the Life Care benefit and, if applicable, the TPD Cover and Trauma Cover benefits in line with the growth in the value of the Life Insured's financial interest in the business. This increase is, however, subject to the following conditions:

Feature/Benefit	Change	New policy wording
The wording of the Guaranteed Insurability Option (Business Events) has been amended (continued)		<ul> <li>the Life Insured must hold his or her financial interest in the business in the capacity of a partner, shareholder or unitholder and the Life Insured's interest must be the subject of a buy/sell share purchase or business succession agreement</li> <li>the revised valuation of the Life Insured's financial interest in the business must be calculated by a qualified accountant or by a valuer approved by us. We must agree to the financial basis for the revised sum insured, but such agreement will not be unreasonably withheld</li> <li>the maximum increase in the Life Care benefit is the lesser of:  - 25% of the Life Care benefit or  - \$2,000,000 per annum or  - the actual increase in the value of the Life Insured's financial interest in the business</li> <li>the maximum increase in the TPD Cover benefit is the lesser of:  - 25% of the TPD Cover benefit or  - the actual increase in the value of the Life Insured's financial interest in the business</li> <li>the maximum increase in the Trauma Cover benefit is the lesser of:  - 25% of the TPD Cover benefit or  - the actual increase in the Value of the Life Insured's financial interest in the business</li> <li>the maximum increase in the Value of the Life Insured's financial interest in the business in the Value of the Life Insured's financial interest in the business in the Value of the Life Insured's financial interest in the Policy Owner and Life Insured are borrowers, the Policy Owner can, without the requirement to supply further medical evidence, apply for an increase in the Life Care benefit and, if applicable, the TPD Cover and Trauma Cover benefits in line with an increase in the amount of the business loan. This increase is, however, subject to the following conditions:</li> <li>the increase in the amount of the business loan must be evidenced by loan documentation acceptable to us. We must agree to the financial basis for the revised sum insured, but such agreement will not be unreasonably withheld.</li> </ul>

Feature/Benefit	Change	New policy wording
The wording of the Guaranteed Insurability Option (Business Events) has been amended (continued)		<ul> <li>the maximum increase in the Life Care benefit is the lesser of:</li></ul>

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Feature/Benefit	Change	New policy wording
The wording of the Business Safe Cover Option has been amended  The Business Safe Cover Option can now apply to Trauma Cover.  The option no longer expires on the third anniversary of the policy commencing. Instead cover can be increased if the relevant business event has occurred in the last three years.  For Life Care, the expiry of this option has changed from age 60 to the policy anniversary prior to age 70.  If your policy was issued before 21 November 2005, this upgrade does not apply to your policy.	For the wording of the Business Safe Cover Option that applied to you before 23 April 2007, please refer to your Policy Document.  The wording of the Business Safe Cover Option, which is detailed in the adjacent 'New Policy Wording' column, has been amended to accommodate the upgrade of your policy.  All other parts of the wording not referenced in the 'New Policy wording' column continue to apply.	Business Safe Cover Option Business growth  If the Policy Owner indicated on the Application that this Policy is being applied for in respect of the value of a business in which both the Policy Owner and Life Insured are involved, the Policy Owner can, without the requirement to supply further medical evidence, apply for an increase in any Life Care benefit, Trauma Cover benefit and TPD Cover benefit in line with the growth in the value of the business. This increase is, however, subject to the following conditions:  • the revised valuation of the business must be calculated by a qualified accountant or by a valuer approved by us. We must agree to the financial basis for the revised sum insured, but such agreement will not be unreasonably withheld  • the maximum permitted increase in any Life Care benefit, Trauma Cover benefit and TPD Cover benefit is the actual increase in the value of the business  • if, as at the date the relevant benefit came into force, the amount of any Life Care benefit, Trauma Cover benefit or TPD Cover benefit is less than the total value of the business then any increase in the relevant benefit under this option will be capped so that the increased benefit does not, at the time it takes effect, form a percentage of the then total value of the business which is greater than the percentage the relevant benefit formed of the total value of the business as at the date the relevant benefit came into force  • the maximum sum insured for a Life Insured before medical underwriting recommences for increases in the Life Care benefit is the lesser of:  - \$10,000,000 or  - three times the amount of the Life Care benefit as at the date the benefit came into force (plus any applied indexation increases) or  - the value of the business.

Feature/Benefit Change	New policy wording
The wording of the Business Safe Cover Option has been amended (continued)	the maximum sum insured for a Life Insured before medical underwriting recommences for increases in the Trauma Cover benefit is the lesser of:  \$\times\$ \$\times\$ \$\times\$ the amount of the Trauma Cover benefit as at the date the benefit came into force (plus any applied indexation increases) or  the amount of any Life Care benefit or  the value of the business  the maximum sum insured for a Life Insured before medical underwriting recommences for increases in the TPD Cover benefit is the lesser of:  \$\times\$2,500,000 or  three times the amount of the TPD Cover benefit as at the date the benefit came into force (plus any applied indexation increases) or  the amount of any Life Care benefit or  the value of the business   Key person  If the Policy Owner indicated on the Application that this Policy is being applied for in respect of the value of a Life Insured to a business in which the Policy Owner is involved, the Policy Owner can, without the requirement to supply further medical evidence, apply for an increase in any Life Care benefit, Trauma Cover benefit and TPD Cover benefit in line with the growth in the value of the Life Insured to the business. This increase is, however, subject to the following conditions:  the Life Insured must, in our opinion, be a person who is crucial to the operation of the business  the revised valuation of the value of the Life Insured to the business must be calculated by a qualified accountant or by a valuer approved by us. We must agree to the financial basis for the revised sum insured, but such agreement will not be unreasonably withheld  the maximum permitted increase in any Life Care benefit, Trauma Cover benefit and TPD Cover benefit is the actual increase in the value of the Life Insured to the business.

The wording of the Business Safe Cover Option has Cover Option has been amended (continued)  On the business than the total value of the Life Insured to the business then any increase in the relevant benefit under this option will be capped so that the increased benefit closs not, at the time it takes effect, form a percentage of the them to total value of the Life Insured to the business which is greater than the percentage the relevant benefit come of the Life Insured to the business which is greater than the percentage the relevant benefit come of the total value of the Life Insured to the business as at the date the relevant benefit came into force  • the maximum sum insured for a Life Insured before medical underwriting recommences for increases in the Life Care benefit is the lesser of:  - \$10,000,000 or  - three times the amount of the Life Care benefit as at the date the benefit came into force (plus any applied indexation increases) or  - the value of the Life Insured to the business  • the maximum sum insured for a Life Insured before medical underwriting recommences for increases in the Trauma Cover benefit is the lesser of:  - \$2,000,000 or  - three times the amount of the Trauma Cover benefit as at the date the benefit came into force (plus any applied indexation increases) or  - three times the amount of the Trauma Cover benefit as at the date the benefit came into force (plus any applied indexation increases) or  - three times the amount of the Trauma Cover benefit as at the date the benefit came into force (plus any applied indexation increases) or  - the walue of the Life Insured to the business  • the maximum sum insured for a Life Insured before medical underwriting recommences for increases in the TPD Cover benefit is the lesser of:  - \$2,500,000 or  - three times the amount of the TPD Cover benefit as at the date the benefit came into force (plus any applied indexation increases) or  - three times the amount of force (plus any applied indexation increases) or	Feature/Benefit	Change	New policy wording
- the value of the Life Insured to the business	Business Safe Cover Option has been amended		<ul> <li>if, as at the date the relevant benefit came into force, the amount of any Life Care benefit, Trauma Cover benefit or TPD Cover benefit is less than the total value of the Life Insured to the business then any increase in the relevant benefit under this option will be capped so that the increased benefit does not, at the time it takes effect, form a percentage of the then total value of the Life Insured to the business which is greater than the percentage the relevant benefit formed of the total value of the Life Insured to the business as at the date the relevant benefit came into force</li> <li>the maximum sum insured for a Life Insured before medical underwriting recommences for increases in the Life Care benefit is the lesser of:  - \$10,000,000 or  - three times the amount of the Life Care benefit as at the date the benefit came into force (plus any applied indexation increases) or  - the value of the Life Insured to the business</li> <li>the maximum sum insured for a Life Insured before medical underwriting recommences for increases in the Trauma Cover benefit is the lesser of:  - \$2,000,000 or  - three times the amount of the Trauma Cover benefit as at the date the benefit came into force (plus any applied indexation increases) or  - the amount of any Life Care benefit or  - the value of the Life Insured to the business</li> <li>the maximum sum insured for a Life Insured before medical underwriting recommences for increases in the TPD Cover benefit is the lesser of:  - \$2,500,000 or  - three times the amount of the TPD Cover benefit as at the date the benefit came into force (plus any applied indexation increases) or  - the amount of any Life Care benefit or  - the amount of any Life Care benefit or  - the amount of any Life Care benefit or  - the amount of any Life Care benefit or  - the value of the Life Insured to the business</li> </ul>

Feature/Benefit	Change	New policy wording
The wording of the Business Safe Cover Option has been amended (continued)		Financial interest  If the Policy Owner indicated on the Application that this Policy is being applied for in respect of the value of a Life Insured's financial interest in a business in which the Policy Owner also has a financial interest, the Policy Owner can, without the requirement to supply further medical evidence, apply for an increase in any Life Care benefit, Trauma Cover benefit and TPD Cover benefit in line with the growth in the value of the Life Insured's financial interest in the business. This increase is, however, subject to the following conditions:
		<ul> <li>the Life Insured must hold his or her financial interest in the business in the capacity of a partner, shareholder or unitholder and his or her interest must be the subject of a buy/sell share purchase or business succession agreement</li> </ul>
		<ul> <li>the revised valuation of the Life Insured's financial interest in the business must be calculated by a qualified accountant or by a valuer approved by us. We must agree to the financial basis for the revised sum insured, but such agreement will not be unreasonably withheld</li> </ul>
		<ul> <li>the maximum permitted increase in any Life Care benefit, Trauma Cover benefit and TPD Cover benefit is the actual increase in the value of the Life Insured's financial interest in the business</li> </ul>
		• if, as at the date the relevant benefit came into force, the amount of any Life Care benefit, Trauma Cover benefit or TPD Cover benefit is less than the total value of the Life Insured's financial interest in the business then any increase in the relevant benefit under this option will be capped so that the increased benefit does not, at the time it takes effect, form a percentage of the then total value of the Life Insured's financial interest in the business which is greater than the percentage the relevant benefit formed of the total value of the Life Insured's financial interest in the business as at the date the relevant benefit came into force
		<ul> <li>the maximum sum insured for a Life Insured before medical underwriting recommences for increases in the Life Care benefit is the lesser of:</li> </ul>
		- \$10,000,000 or
		<ul> <li>three times the amount of the Life Care benefit as at the date the benefit came into force (plus any applied indexation increases) or</li> </ul>
		- the value of the Life Insured's financial interest in the business.

Feature/Benefit	Change	New policy wording
The wording of the Business Safe Cover Option has been amended (continued)		<ul> <li>the maximum sum insured for a Life Insured before medical underwriting recommences for increases in the Trauma Cover benefit is the lesser of:  - \$2,000,000 or  - three times the amount of the Trauma Cover benefit as at the date the benefit came into force (plus any applied indexation increases) or  - the amount of any Life Care benefit or  - the value of the Life Insured's financial interest in the business</li> <li>the maximum sum insured for a Life Insured before medical underwriting recommences for increases in the TPD Cover benefit is the lesser of:  - \$2,500,000 or  - three times the amount of the TPD Cover benefit as at the date the benefit came into force (plus any applied indexation increases) or  - the amount of any Life Care benefit or  - the value of the Life Insured's financial interest in the business</li> <li>the increase must be applied for within 30 days of the date the qualified accountant or valuer issues a written revaluation of the Life Insured's financial interest in the business. You must supply to us all requested financial information relating to the valuation of the Life Insured's financial interest in the business</li> <li>once we agree to the financial basis for the revised sum insured, the increase in cover will take effect from the next Premium Due Date.</li> </ul>

Feature/Benefit	Change	New policy wording
The wording of the Business Safe Cover Option has been amended (continued)		Business loan  If the Policy Owner indicated on the Application that this Policy is being applied for in respect of a business loan under which both the Policy Owner and the Life Insured are borrowers, the Policy Owner can, without the requirement to supply further medical evidence, apply for an increase in any Life Care benefit, Trauma Cover benefit and TPD Cover benefit in line with an increase in the amount of the business loan. This increase is, however, subject to the following conditions:.
		the increase in the amount of the business loan must be evidenced by loan documentation acceptable to us. We must agree to the financial basis for the revised sum insured, but such agreement will not be unreasonably withheld
		the maximum permitted increase in the Life Care benefit,     Trauma Cover benefit and TPD Cover benefit is the actual increase in the amount of the business loan
		• if, as at the date the relevant benefit came into force, the amount of the Life Care benefit, Trauma Cover benefit or TPD Cover benefit is less than the amount of the business loan then any increase in the relevant benefit under this option will be capped so that the increased benefit does not, at the time it takes effect, form a percentage of the increased amount of the business loan which is greater than the percentage the relevant benefit formed of the amount of the business loan as at the date the relevant benefit came into force
		<ul> <li>the maximum sum insured for a Life Insured before medical underwriting recommences for increases in the Life Care benefit is the lesser of:</li> </ul>
		- \$10,000,000 or
		<ul> <li>three times the amount of the Life Care benefit as at the date the benefit came into force (plus any applied indexation increases) or</li> </ul>
		- the amount of the business loan
		<ul> <li>the maximum sum insured for a Life Insured before medical underwriting recommences for increases in the Trauma Cover benefit is the lesser of:</li> </ul>
		– \$2,000,000 or
		<ul> <li>three times the amount of the Trauma Cover benefit as at the date the benefit came into force (plus any applied indexation increases) or</li> </ul>

Feature/Benefit	Change	New policy wording
The wording of the Business Safe Cover Option has been amended (continued)		<ul> <li>the amount of any Life Care benefit or</li> <li>the maximum sum insured for a Life Insured before medical underwriting recommences for increases in the TPD Cover benefit is the lesser of:</li> <li>\$2,500,000 or</li> <li>three times the amount of the TPD Cover benefit as at the date the benefit came into force (plus any applied indexation increases) or</li> <li>the amount of any Life Care benefit or</li> <li>the amount of the business loan</li> <li>the increase must be applied for within 30 days of the date of the increase in the amount of the business loan. You must supply to us all requested financial information relating to the increase in the amount of the business loan</li> <li>once we agree to the financial basis for the revised sum insured, the increase in cover will take effect from the next Premium Due Date.</li> <li>Premiums</li> <li>On the exercising of a right under this option, your Annual Premium will (whether or not the Level Premium Rate Option applies) be recalculated to take into account the increase in cover according to the premiums current at the time and with regard to the age of the Life Insured at the time of the increase in cover.</li> <li>The premium we charge you for this option will cease to be payable on the date it can no longer be exercised.</li> <li>Restrictions</li> <li>The following restrictions apply to this option:</li> <li>only one increase in any Life Care benefit, Trauma Cover benefit and TPD Cover benefit is permitted each twelve months under this option and the event to which the increase relates must not have occurred more than three years before you apply for the increased unless the other is also increased and both must be increased unless the other is also increased and both must be increased unless the other is also increased and both must be increased unless the other is also increased and both must be increased by the same proportion.</li> </ul>

Feature/Benefit	Change	New policy wording
The wording of the Business Safe Cover Option has been amended (continued)		If both the Life Care and TPD Cover benefits apply, one benefit cannot be increased unless the other is also increased and both must be increased by the same proportion. The TPD Cover benefit can never exceed the Life Care benefit and any increase must comply with the conditions of this option.  This patient access to apply for a Life Japanet.
		This option ceases to apply for a Life Insured:
		<ul> <li>when the Life Care benefit, Trauma Cover benefit or TPD Cover benefit for the Life Insured can no longer be increased under this option</li> </ul>
		<ul> <li>when a benefit for the Life Insured has been paid or is payable under this Policy or when circumstances exist which, if the subject of a claim, would give rise to the payment of a benefit for the Life Insured under this Policy</li> </ul>
		on the date you cancel the option
		<ul> <li>on the Policy Anniversary Date preceding the Life Insured's 60th birthday, but only to the extent to which the option provides for a right to apply for an increase in any Trauma Cover benefit or TPD Cover benefit</li> </ul>
		<ul> <li>on the Policy Anniversary Date preceding the Life Insured's 70th birthday</li> </ul>
		whichever happens first

Feature/Benefit	Change	New policy wording
The wording of Trauma Cover has been amended There are three new	For the wording of Trauma Cover that applied to you before 23 April 2007, please refer to your Policy Document.  The wording of Trauma Cover, which is	Trauma Cover The Trauma Cover benefit applies when the words 'Trauma Cover' appear under the 'Plan Benefits' section in the Policy Schedule. The Trauma Cover benefit cannot apply to a person
trauma conditions under Trauma Cover	detailed in the adjacent 'New Policy wording' column, has been amended	if the Child Cover benefit applies to that person.  Subject to the Qualifying Period, we will pay you the Trauma
- Advanced Diabetes	to accommodate the upgrade of your policy.	Cover benefit if you:
- Cancer of the Vulva or Perineum	All other parts of the wording not referenced in the 'New Policy wording'	<ul> <li>suffer from Loss of Independent Existence (as defined in this Policy Document) before the Trauma Cover benefit ceases to apply or</li> </ul>
- Multiple Sclerosis of limited extent (results in a	column continue to apply.	<ul> <li>are found to have one of the other conditions listed below under 'Trauma Cover conditions' and as defined in this Policy Document before the earlier of the following dates:</li> </ul>
partial benefit).		- the Policy Anniversary Date preceding your 70th birthday
		- the date the Trauma Cover benefit ceases to apply.
		The Trauma Cover benefit ceases to apply:
		<ul> <li>from the Policy Anniversary Date preceding the Life Insured's 80th birthday</li> </ul>
		• from the Cover Expiry Date, if any
		when this Policy terminates
		and, subject to the Trauma Cover Buy Back described in this Policy Document, the Trauma Cover benefit also ceases to apply:
		<ul> <li>once we have become liable to pay the Trauma Cover benefit for any condition other than Coronary Artery Angioplasty, Serious Injury, Critical Care, Removal of Carcinoma in situ of the Breast, Loss of One Hand or One Foot, Placement on a Waiting List for Major Organ Transplant or Multiple Sclerosis of limited extent,</li> </ul>
		• if the benefit reduces to less than \$10,000
		whichever happens first.
		If we become liable to pay the Trauma Cover benefit for Coronary Artery Angioplasty, Serious Injury, Critical Care, Removal of Carcinoma in situ of the Breast, Loss of One Hand or One Foot, Placement on a Waiting List for Major Organ Transplant or Multiple Sclerosis of limited extent, the Trauma Cover benefit is reduced by the amount we have become liable to pay (including any Trauma Cover Loyalty Bonus Benefit). If, as a result of this reduction, the Trauma Cover benefit would be less than \$10,000 the Trauma Cover benefit will cease.

Feature/Benefit	Change	New policy wording
The wording of Trauma Cover has been amended (continued)		Trauma Cover conditions Heart Disorders Heart Attack Out of Hospital Cardiac Arrest Coronary Artery Disease Requiring By-pass Surgery Coronary Artery Angioplasty Coronary Artery Angioplasty Coronary Artery Angioplasty — Triple Vessel Repair and Replacement of a Heart Valve Surgery for Disease of the Aorta Cardiomyopathy Primary Pulmonary Hypertension Open Heart Surgery Nervous System Disorders Stroke Major Head Trauma Motor Neurone Disease Multiple Sclerosis of limited extent Muscular Dystrophy Paraplegia Quadriplegia Hemiplegia Diplegia Tetraplegia Dementia and Alzheimer's Disease Coma Encephalitis Parkinson's Disease Body Organ Disorders Cancer Cancer of the Vulva or Perineum Removal of Carcinoma in situ of the Breast Benign Brain Tumour Biinchess Chronic Kidney Failure Major Organ or Bone Marrow Transplant Placement on a Waiting List for Major Organ Transplant Severe Burns Loss of Speech Loss of Speech Loss of Hearing Chronic Liver Disease Chronic Liver Disease Severe Rheumatoid Arthritis

Feature/Benefit	Change	New policy wording
The wording of Trauma Cover has been amended (continued)		Blood Disorders Occupationally Acquired HIV Medically Acquired HIV Aplastic Anaemia Advanced Diabetes Other Events
		Serious Injury Critical Care Loss of Limbs or Sight Loss of One Hand or One Foot Loss of Independent Existence
		Partial payments The amount of the Trauma Cover benefit (excluding any Trauma Cover Loyalty Bonus Benefit) payable for any of the following:
		the procedure that is Coronary Artery Angioplasty
		Serious Injury
		Critical Care
		Removal of Carcinoma in situ of the Breast
		Loss of One Hand or One Foot     Pleasement on a Waiting Light for Major Organ Transplant
		Placement on a Waiting List for Major Organ Transplant is the greater of:
		is the greater of:
		<ul> <li>10% of the Trauma Cover benefit (up to a maximum of \$25,000 for Coronary Artery Angioplasty) or</li> </ul>
		• \$10,000.
		The amount of the Trauma Cover benefit (excluding any Trauma Cover Loyalty Bonus Benefit) payable for Multiple Sclerosis of limited extent is the lesser of:
		25% of the Trauma Cover benefit
		• \$50,000
		but will be no less than \$10,000.
		We will not pay the Trauma Cover benefit for the procedure that is Coronary Artery Angioplasty where the procedure occurs within six months after a prior procedure for which the Trauma Cover benefit was paid.
		We will not pay the Trauma Cover benefit for Serious Injury, Critical Care, Removal of Carcinoma in situ of the Breast, Loss of One Hand or One Foot, Placement on a Waiting List for Major Organ Transplant or Multiple Sclerosis of limited extent on more than one occasion for a Life Insured under this Policy.

Feature/Benefit	Change	New policy wording
The wording of the Trauma Cover Buy Back Benefit has been amended The wording now	For the wording of the Trauma Cover Buy Back Benefit that applied to you before 23 April 2007, please refer to your Policy Document. The wording of the Trauma Cover Buy	Trauma Cover Buy Back Benefit The Trauma Cover Buy Back Benefit applies if a claim for the Trauma Cover benefit is paid which results in a reduction of the benefit to less than \$10,000. If the Trauma Cover Buy Back Benefit applies then, twelve months following the date of
makes reference to the three new trauma conditions under Trauma Cover.	Back Benefit, which is detailed in the adjacent 'New Policy Wording' column, has been amended to accommodate the upgrade of your policy.	payment of the Trauma Cover claim which resulted in the Trauma Cover benefit reducing to less than \$10,000, the Trauma Cover benefit will be reinstated to the amount which would have applied under the Policy had no Trauma Cover benefits ever been paid.
	All other parts of the wording not referenced in the 'New Policy Wording'	The Trauma Cover Buy Back Benefit will not apply to a Life Insured if:
	column continue to apply.	<ul> <li>the Trauma Cover Buy Back Benefit previously applied to the Life Insured</li> </ul>
		<ul> <li>a TPD Benefit or a benefit for Terminal illness has been paid for the Life Insured</li> </ul>
		<ul> <li>only a partial payment was made under the original Trauma Cover in respect of the Life Insured or</li> </ul>
		<ul> <li>under the original Trauma Cover, we paid a claim for Cardiomyopathy, Primary Pulmonary Hypertension, Motor Neurone Disease, Multiple Sclerosis, Dementia and Alzheimer's Disease, Parkinson's Disease, Chronic Kidney Failure, Chronic Liver Disease, Chronic Lung Disease, Occupationally or Medically Acquired HIV, Advanced Diabetes or Loss of Independent Existence in respect of the Life Insured.</li> </ul>
		The Trauma Cover Buy Back Benefit will cease to apply:
		<ul> <li>from the Policy Anniversary Date preceding the Life Insured's 70th birthday</li> </ul>
		<ul> <li>from the Cover Expiry Date, if any,</li> </ul>
		when this Policy terminates
		<ul> <li>once we have become liable to pay the Trauma Cover benefit for any condition other than Coronary Artery Angioplasty, Serious Injury, Critical Care, Removal of Carcinoma in situ of the Breast, Loss of One Hand or One Foot, Placement on a Waiting List for Major Organ Transplant or, Multiple Sclerosis of limited extent</li> </ul>
		whichever happens first.

Feature/Benefit	Change	New policy wording
The wording of the Trauma Cover Buy Back Benefit has been amended (continued)	Criange	If we pay the reinstated Trauma Cover benefit for Coronary Artery Angioplasty, Serious Injury, Critical Care, Removal of Carcinoma in situ of the Breast, Loss of One Hand or One Foot, Placement on a Waiting List for Major Organ Transplant or Multiple Sclerosis of limited extent the Trauma Cover benefit is reduced by the amount we have to pay. If, as a result of this reduction, the reinstated Trauma Cover benefit would be less than \$10,000 then the reinstated Trauma Cover benefit will cease.  In respect of the reinstated Trauma Cover:  • any exclusions, medical, occupational or pastime loadings which applied to the original cover will also apply to the reinstated Trauma Cover, and  • the Guarantee Insurability Option (both Personal Events and Business Events), Trauma Cover Loyalty Bonus Benefit, Trauma Cover Severe Hardship Booster Benefit will not apply.  The Trauma Cover Buy Back Benefit only applies to Trauma Cover Benefits paid after 1 September 2006.  We will not pay a claim under the reinstated Trauma Cover in respect of the Life Insured:  • for any trauma condition that first occurred or is first diagnosed, or symptoms leading to the condition occurring or being diagnosed first become reasonably apparent, before the date of reinstatement of the reinstated Trauma Cover  • for the same trauma condition as paid for under the original cover  • for Chronic Liver Disease, Chronic Lung Disease, Chronic Kidney Failure, Loss of Speech, Major Organ or Bone Marrow Transplant, Placement on a Waiting List for Major Organ Transplant or Stroke if we paid for Cancer or Cancer of the Vulva or Perineum under the original cover and, in the opinion of a Medical Practitioner nominated by us, the condition for which you claim under the reinstated Trauma Cover is directly or indirectly related to, or is a complication of, or is a treatment for the Cancer or Cancer of the Vulva or Perineum for which we paid under the original cover  • for any condition listed under Heart Disorders, Dementia and Alzheimer's Disease, Advanced Diab

Feature/Benefit	Change	New policy wording
The wording of the Child Cover Option has been amended When a child insured under Child Cover reaches age 18, they are offered a Continuation Option which now extends to Trauma Cover.  If your policy was issued before 21 November 2005, this upgrade does not apply to your policy.	For the wording of the Child Cover Option that applied to you before 23 April 2007, please refer to your Policy Document.  The wording of the Child Cover Option, which is detailed in the adjacent 'New Policy wording' column, has been amended to accommodate the upgrade of your policy.  All other parts of the wording not referenced in the 'New Policy wording' column continue to apply.	Child Cover Option  Partial payments The amount of the Child Cover benefit (excluding any Child Cover Loyalty Bonus Benefit) payable for any of the following:  • the procedure that is Coronary Artery Angioplasty • Serious Injury • Critical Care • Loss of One Hand or One Foot • Placement on a Waiting List for Major Organ Transplant is the greater of: • 10% of the Child Cover benefit • \$10,000.  We will not pay the Child Cover benefit for the procedure that is Coronary Artery Angioplasty where the procedure occurs within six months after a prior procedure for which the Child Cover benefit was paid.  We will not pay the Child Cover benefit for Serious Injury, Critical Care, Loss of One Hand or One Foot or Placement on a Waiting List for Major Organ Transplant on more than one occasion for a Child Life Insured under this Policy.   Child Continuation Option  If, within 30 days before the Child Cover Expiry Date, the Child Life Insured asks us in writing to provide death and trauma cover under a new individual policy on his or her life, we will issue such a policy without evidence of insurability provided that:  • the cover which applies to the Child Life Insured under this policy ceases to apply from the Child Cover Expiry Date and no earlier  • we receive the first premium payable under the new individual policy before the Child Cover Expiry Date  • no benefit is, or is about to be, payable for the Child Life Insured under this Policy and no circumstances exist which, if the subject of a claim under this Policy, would result in a benefit being payable for the Child Life Insured under this Policy.

Feature/Benefit	Change	New policy wording
The wording of the Child Cover Option has been amended		<ul> <li>the premium payable in respect of the Child Life Insured's cover under this Policy is not overdue as at the Child Cover Expiry Date</li> </ul>
(continued)		our minimum policy issue requirements are met
		<ul> <li>our underwriting requirements for residency, occupation and pastimes are met and, if necessary, a non-smoking declaration is completed.</li> </ul>
		The death and trauma cover issued under this continuation option will be issued:
		<ul> <li>under a new individual policy owned by the Child Life Insured that provides a death and trauma benefit no greater than the amount of the Child Cover benefit which applied to the Child Life Insured under this Policy on the day before the Child Cover Expiry Date</li> </ul>
		<ul> <li>effective from the day after the Child Cover Expiry Date and no earlier</li> </ul>
The wording of Total and Permanent Disability Cover (TPD Cover) has	For the wording of Total and Permanent Disability Cover (TPD Cover) that applied to you before 23 April 2007, please refer to your Policy Document.	Total and Permanent Disability Cover (TPD Cover) The TPD Cover benefit applies when the words 'Total and Permanent Disability Cover' appear under the 'Plan Benefits' section in the Policy Schedule.
The minimum sum insured for TPD Cover has been required.	That part of the wording of Total and Permanent Disability Cover (TPD Cover), which is detailed in the adjacent 'New Policy Wording' column, has been amended to accommodate the upgrade of your policy.  All other parts of the wording not referenced in the 'New Policy Wording' column continue to apply.	Subject to the conditions of this Policy, we will pay you the TPD Cover benefit if, while the TPD Cover benefit applies, the Life Insured suffers Total and Permanent Disablement.
		The TPD Cover benefit ceases to apply:
from \$25,000 to \$10.000. This means		on payment of the benefit
your TPD cover will now end when it reduces to less than \$10,000 rather than \$25,000.		• if the benefit reduces to less than \$10,000
		<ul> <li>from the Policy Anniversary Date preceding the Life Insured's 80th birthday</li> </ul>
		from the Cover Expiry Date, if any
		<ul> <li>when this Policy terminates</li> </ul>
		whichever happens first

Feature/Benefit	Change	New policy wording
Definition of Coronary Artery Angioplasty – Triple Vessel has been amended The requirement for angiographic evidence of at least 50% obstruction of each of the arteries treated has been removed.	For the definition of Coronary Artery Angioplasty – Triple Vessel that applied to you before 23 April 2007, please refer to your Policy Document. The definition of Coronary Artery Angioplasty – Triple Vessel, which is detailed in the adjacent 'New Policy wording' column, has been amended to accommodate the upgrade of your policy.	Coronary Artery Angioplasty – Triple Vessel Undergoing in the same procedure coronary artery angioplasty to three or more coronary arteries, where the procedure is considered necessary by a cardiologist to treat coronary artery disease.
Definition of Major Head Trauma has been amended  The definition has been broadened by adding an alternative measure based on the ability to perform Activities of Daily Living (ADL).	For the definition of Major Head Trauma that applied to you before 23 April 2007, please refer to your Policy Document.  The definition of Major Head Trauma, which is detailed in the adjacent 'New Policy Wording' column, has been amended to accommodate the upgrade of your policy.	Major Head Trauma Injury to the head resulting in neurological deficit causing either:  a permanent loss of at least 25% whole person function (as defined in the 5th edition of the American Medical Association publication 'Guides to the Evaluation of Permanent Impairment'); or  the permanent and irreversible inability to perform without the assistance of another person any one of the 'Activities of Daily Living' (as defined under Loss of Independent Existence); as certified by a consultant neurologist.
Definition of Multiple Sclerosis has been amended  The requirement for permanent loss of at least 25% whole body function has been removed.	For the definition of Multiple Sclerosis that applied to you before 23 April 2007, please refer to your Policy Document.  The definition of Multiple Sclerosis, which is detailed in the adjacent 'New Policy Wording' column, has been amended to accommodate the upgrade of your policy.	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.
Definition of Multiple Sclerosis of limited extent has been added	The definition of Multiple Sclerosis of limited extent did not apply to you before 23 April 2007.	Multiple Sclerosis of limited extent The unequivocal diagnosis of Multiple Sclerosis as defined above but without the existence of persisting neurological abnormalities.
Definition of Coma has been amended The requirement for continuous assisted ventilation to maintain life has been reduced from 96 to 72 consecutive hours.	For the definition of Coma that applied to you before 23 April 2007, please refer to your Policy Document.  The definition of Coma, which is detailed in the adjacent 'New Policy Wording' column, has been amended to accommodate the upgrade of your policy.	Coma A state of total unconsciousness with no reaction to external stimuli or internal needs, requiring continuous assisted ventilation to maintain life for at least 72 consecutive hours.

Feature/Benefit	Change	New policy wording
Definition of Encephalitis has been amended	For the definition of Encephalitis that applied to you before 23 April 2007, please refer to your Policy Document.	Encephalitis The severe inflammation of brain substance which results in significant neurological sequelae causing either:
The definition has been broadened by adding an alternative measure based on the ability to perform activities of Daily Living (ADL).	The definition of Encephalitis, which is detailed in the adjacent 'New Policy wording' column, has been amended to accommodate the upgrade of your policy.	<ul> <li>a permanent loss of at least 25% whole person function (as defined in the 5th edition of the American Medical Association publication 'Guides to the Evaluation of Permanent Impairment'); or</li> <li>the permanent and irreversible inability to perform without the assistance of another person any one of the 'Activities of Daily Living' (as defined under Loss of Independent Existence); as certified by a consultant neurologist.</li> <li>Encephalitis as a result of HIV infection is excluded.</li> </ul>
Definition of Cancer of the Vulva or Perineum has been added	The definition of Cancer of the Vulva or Perineum did not apply to you before 23 April 2007.	Cancer of the Vulva or Perineum  Any lesion described by a histopathologist as carcinoma of the vulva or perineum that meets the criteria of either Stage 3 or 4 (tumour of any size with contiguous invasion of local organs) of the 1988 International Federation of Gynaecology and Obstetrics (FIGO) surgical staging system.
Definition of Chronic Liver Disease has been amended  The exclusion for disease related to alcohol abuse or intravenous drug use has been removed.	For the definition of Chronic Liver Disease that applied to you before 23 April 2007, please refer to your Policy Document.  The definition of Chronic Liver Disease, which is detailed in the adjacent 'New Policy wording' column, has been amended to accommodate the upgrade of your policy.	Chronic Liver Disease Permanent liver failure resulting in permanent jaundice, ascites and/or encephalopathy.
Definition of Advanced Diabetes has been added	The definition of Advanced Diabetes did not apply to you before 23 April 2007.	Advanced Diabetes Severe diabetes mellitus (either Insulin or Non-Insulin dependent) as certified by a consultant endocrinologist and resulting in at least two of the following criteria:  Severe Diabetic Retinopathy resulting in visual acuity uncorrected and corrected of 6/36 or worse in both eyes  Severe Diabetic Neuropathy causing motor and/or autonomic impairment  Severe Diabetic Nephropathy causing chronic irreversible renal impairment (as measured by a corrected creatinine clearance below the laboratory/ies measured normal range)  Diabetic Gangrene leading to surgical intervention  Diabetes Complication (as defined below) is excluded.

Feature/Benefit	Change	New policy wording
Definition of Advanced Diabetes has been added (continued)		Diabetes Complication means Diagnosis of Type 1 Insulin dependent diabetes mellitus as certified by a consultant endocrinologist and resulting in at least two of the following criteria:  urinary protein excretion of more than 300mg per day  diabetic retinopathy with a minimum severity of at least exudates and/or dot-blot haemorrhages  persistent sensory neuropathy.
Definition of Benign Brain Tumour has been amended The definition now refers to the 5th edition of the American Medical Association publication 'Guides to the Evaluation of Permanent Impairment' with respect to describing permanent 25% impairment of whole person function.	For the definition of Benign Brain Tumour that applied to you before 23 April 2007, please refer to your Policy Document.  The definition of Benign Brain Tumour, which is detailed in the adjacent 'New Policy wording' column, has been amended to accommodate the upgrade of your policy.	Benign Brain Tumour A non-cancerous tumour in the brain giving rise to characteristic symptoms of increased intracranial pressure such as papilloedema, mental symptoms, seizures and sensory impairment as confirmed by a Medical Practitioner who is a consultant neurologist. The tumour must result in permanent neurological deficit:  • causing at least a permanent 25% impairment of whole person function (as defined in the 5th edition of the American Medical Association publication 'Guides to the Evaluation of Permanent Impairment') or  • requiring cranial surgery for its removal.  The presence of the underlying tumours must be confirmed by imaging studies such as CT Scan or MRI. Cysts, granulomas, malformations in or of the arteries or veins of the brain, haematomas, and tumours in the pituitary gland or spine are excluded.
Definition of Blindness has been amended The definition now articulates who must certify the permanent loss of sight.	For the definition of Blindness that applied to you before 23 April 2007, please refer to your Policy Document.  The definition of Blindness, which is detailed in the adjacent 'New Policy Wording' column, has been amended to accommodate the upgrade of your policy.	Blindness The permanent loss of sight in both eyes, whether aided or unaided, due to Sickness 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.
Definition of Motor Neurone Disease has been amended	For the definition of Motor Neurone Disease that applied to you before 23 April 2007, please refer to your Policy Document.  The definition of Motor Neurone Disease, which is detailed in the adjacent 'New Policy Wording' column, has been amended to accommodate the upgrade of your policy.	Motor Neurone Disease  Motor Neurone Disease diagnosed by a consultant neurologist.

Notes	

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Write to: Manager, Customer Relations, CommInsure Life Insurance, PO Box 320, Silverwater NSW 2128.