

Priority Protection Policy Enhancement Summary

loss of independence.

1 December 2008

The Power of We



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Please read this Policy Enhancement Summary and keep it in a safe place with your Priority Protection Policy Document. It is important that you read this document together with any other policy notices.

These enhancements apply from 1 December 2008. The improved features and benefits outlined below are only effective on and from this date. These enhancements will not apply to any policy where a claim is pending or where a claim is in the process of being paid. 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) and are subject to any pre-existing conditions (with the exception of any increase in fees and charges).

Feature/Benefit/Description	Enhancement	What's changed?		
Life Cover & Term Cover				
Terminal Illness Benefit				
We will pay 100% of the sum insured, subject to a maximum of \$3,000,000.	We will pay 100% of the sum insured.	Uncapped with the payment of 100% of the sum insured once the definition of terminal illness is satisfied.		
Permanent Disablement & Permanent Disablement Stand Alone				
'Home Duties' Definition				
A person on full time 'Home Duties' will be offered and assessed against the 'Home Duties' definition at underwriting and at claim, respectively.	A person on full time 'Home Duties' will be offered the 'Any Occupation' definition at underwriting but will be assessed against the 'Home Duties' definition if that is the occupation at claim.	 Allows 'Home Makers' to re-enter the formal work force without the need to upgrade their permanent disablement definition. 		
'Any Occupation' Definition				
This feature was not included previously.	100% of the sum insured is payable even if the life insured returns to work in any occupation, after being absent from employment solely as a result of injury or sickness for an uninterrupted period of at least 3 months, if the occupation does not provide remuneration at a rate greater than 25% of the life insured's pre-disablement income.	 Allows claimants to return to work but still receive full claim payment. Removes the prejudice against claimants who can work to a lesser degree. 		
Loss of Independence				
This feature was not included previously.	Payable if satisfies the definition of 'Loss of Use of Limbs and Sight of One Eye'.	Cover is now extended to cater for the partial loss of limbs/ sight which contributes to the		

Feature/Benefit/Description	Enhancement	What's changed?		
Permanent Disablement & Permanent Disablement Stand Alone (continued)				
Partial and Permanent Disablement Benefit				
This feature was not included previously.	Pays a benefit if the life insured suffers the permanent loss of use of: One arm, or One leg, or The loss of sight in one eye. For the Permanent Disablement Stand Alone benefit, the life insured must survive 14 days before this benefit is payable. The benefit payable is the lesser of: 25% of the sum insured, and \$250,000. This benefit will only be paid once during the lifetime of the policy. The Permanent Disablement benefit sum insured will be reduced by any amount paid for a Partial and Permanent Disablement benefit.	Cover is now extended to cater for the partial loss of limbs/ sight.		
Crisis Recovery Benefit & Crisis Recovery Stand Alone				
Terminal Illness				
This feature was not included previously.	Included as a crisis event.	Terminal Illness is now a listed crisis event under Crisis Recovery Stand Alone.		
Female Crisis Assistance				
Carcinoma in Situ of Female Organs				
This feature was not included previously.	Covers fallopian tube.	Cover extended to fallopian tube.		
Disability Income				
Income Qualifications				
 75% of the first \$250,000 pa (equals \$15,625 pm) 50% of the next \$150,000 pa (equals \$6,250 pm) 25% of the balance income subject to various maximums. 	 75% of the first \$320,000 pa (equals \$20,000 pm) 50% of the next \$240,000 pa (\$10,000 pm) 	The income replacement ratio has been increased and simplified for easier calculation.		
Rehabilitation Expenses Benefit				
Requires the life insured to be on claim for the total disablement benefit for at least three months before the Rehabilitation Expenses benefit is payable.	Removes the three months requirement but continues to allow for a maximum benefit of 12 times the insured monthly benefit.	 Rehabilitation of the life insured can start immediately (during the waiting period) through a rehabilitation program that is approved by us. 		
Partial Disablement Benefit				
Requires the life insured to be totally disabled for at least 7 consecutive days from the start of the waiting period.	Removes the 7 consecutive days requirement for the life insured in occupational categories AAA, AA and A.	Claimants can receive payments even if they only suffer a partial disablement due to sickness or injury.		
PLUS - Crisis Recovery Benefit				
Terminal Illness was not listed previously.	Terminal Illness is now listed as a crisis event.	Increased coverage under the PLUS Optional benefit.		

Feature/Benefit/Description	Enhancement	What's changed?
PLUS – Guaranteed Future Insurability		
Dollar cap at \$1,000.	Dollar cap revised to \$1,500.	Increase in dollar cap.
Definitions		
Cancer		
'Carcinoma in situ of the breast' is not excluded if the entire breast is removed specifically to arrest the spread of malignancy, and this procedure is the appropriate and necessary treatment as confirmed by an appropriate specialist acceptable to us. (For carcinoma in situ of the breast, the benefit payable will be limited to 25% of the sum insured, subject to a maximum payment of \$25,000 under all policies we have issued covering the life insured.)	'Carcinoma in situ of the breast' is not excluded. The full Sum Insured will be paid for 'carcinoma-in-situ of the breast' where the entire breast is removed specifically to arrest the spread of malignancy, and this procedure is the appropriate and necessary treatment as confirmed by an appropriate specialist acceptable to us. 25% of the Sum Insured, subject to a maximum payment of \$25,000 under all policies We have issued covering the life insured, will be paid for 'carcinoma-in-situ of the breast' where no mastectomy is performed.	Clarification that the full sum insured is payable where a mastectomy is performed.
Coronary Artery Angioplasty		
This benefit payable for angioplasty of one or two coronary arteries is limited to 25% of the sum insured subject to a maximum payment of \$25,000 under all policies we have issued covering the life insured. 100% of the sum insured will be payable for three or more coronary arteries. After any payment for coronary artery angioplasty the sum insured will be reduced by the payment made.	25% of the sum insured, with a maximum of \$25,000 will be payable where one coronary artery is obstructed and corrected with the use of angioplasty, atherectomy, laser therapy or the insertion of up to two stents. 50% of the sum insured, with a maximum of \$50,000 will be payable where two coronary arteries are obstructed and corrected with the use of either angioplasty, atherectomy or laser therapy, or, the insertion of more than two stents (regardless of the number of coronary arteries involved). 100% of the sum insured will be payable where three or more coronary arteries are obstructed and corrected with the use of angioplasty, atherectomy, laser therapy or stents. After any payment for coronary artery angioplasty the sum insured will be reduced by the payment made.	Additional level of payment where 50% of the sum insured payable for obstruction of two arteries or insertion of two or more stents.
Heart Attack		
Means the death of a portion of the heart muscle as a result of inadequate blood supply to the relevant area. The diagnosis for this must be evidenced by:	Means the death of heart muscle as a result of inadequate blood supply to the relevant area. The diagnosis must be confirmed by a cardiologist and evidenced by:	The international definition of heart attack is now adopted. This admits claims for milder forms of heart attack.

- new and permanent ECG changes consistent with Myocardial Infarction; and
- · elevation of biochemical marker (such as troponin or cardiac enzymes) consistent with Myocardial Infarction.

We will not pay for other causes of severe non-cardiac chest pain, heart failure or angina.

If the above tests are inconclusive, we will consider other appropriate and medically recognized tests in support of a diagnosis.

- · typical rise and fall of cardiac biomarker blood test (Troponin T, Troponin I or CK-MB) with at least one level above the 99th percentile of the upper reference limit PLUS
 - acute cardiac symptoms and signs consistent with myocardial infarction (e.g. chest pain)

OR

- new serial ECG changes with the development of any of the following: ST elevation or depression, T wave inversion, pathological Q waves or left bundle branch block (LBBB).

Other acute coronary syndromes including but not limited to angina pectoris are excluded.

This is a summary only. Full terms and conditions are outlined in the Priority Protection policy document dated 1 December 2008. Alternatively, for more information about our Priority Protection product range or for a paper copy of this Policy Enhancement Summary, which will be provided free of charge, please contact AIA Australia on Freecall 1800 333 613.

administrative charges).

paid a yearly or half-yearly premiums (less

pay for the cover that you

can use.