

POLICY ENHANCEMENT SUMMARY

For policyholders

8 May 2021



HEALTHIER, LONGER,
BETTER LIVES

Every year AIA Australia 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.

In addition to our regular product review, the Priority Protection Product Disclosure Statement and Policy Document (PDS) dated 8 May 2021 has been updated in response to the changes to Unfair Contract Terms (UCT) law.

The latest enhancements which are being passed back to existing policy holders are listed in this document. The enhancements to Income Protection CORE are only being passed back for existing customers on Priority Protection PDS dated from 16 January 2021 onwards.

It is important to read this Policy Enhancement Summary together with your existing PDS and any other policy notices. The enhancements outlined in this document now form part of your Policy.

These enhancements apply from 8 May 2021. 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.

The tables below are a summary only and should be read in conjunction with the full terms and conditions relating to the enhanced benefit in the Priority Protection PDS dated 8 May 2021.

The description of the benefit or term 'Prior to change' shown is as per the PDS dated 3 April 2021. The enhancement still applies to you if your existing PDS has a different description of this benefit.

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1. Updates to Income Protection CORE

Benefit	Prior to change	After change
Income Protection Plan, Superannuation Income Protection Plan		
Total Disablement under Income Protection CORE	<p>2. Total Disablement</p> <p>Occupation Categories – A1, A2, M, A3, A4</p> <p>If you are:</p> <ul style="list-style-type: none"> Totally Disabled and have received no income for at least one day*, and continuously disabled (either Totally Disabled or Partially Disabled) for the duration of the Waiting Period, and Totally Disabled from the end of the Waiting Period, a Total Disablement monthly benefit is payable provided you meet the Total Disablement definition that applies to you at the end of the Waiting Period. <p>*You must also at the time of making the claim, be disabled in a manner consistent with the Temporary Incapacity condition of release under the <i>Superannuation Industry (Supervision) Regulations 1994</i>.</p> <p>The benefit will continue to be paid throughout your selected Benefit Period as long as you continue to meet the relevant Total Disablement definition. Claim offsets and limitations may apply (see Section 5.2.4).</p> <p>If your disability does not meet the above definition your claim will be assessed under your Complimentary Income Protection CORE Extras policy and benefits paid if eligible.</p> <p>*Your state of ill health at the time of making a claim must be such as to cause you to cease to be employed or self-employed for gain or reward in any business, trade, profession, vocation, calling, occupation or employment.</p> <p>Occupation Categories – B, C, CT and D.</p> <p>If you are:</p> <ul style="list-style-type: none"> Totally Disabled and have received no income for at least one day*, and Totally Disabled for at least seven out of 12 consecutive days during the Waiting Period, and continuously disabled (either Totally Disabled or Partially Disabled) for the balance of the Waiting Period, and Totally Disabled from the end of the Waiting Period, a Total Disablement benefit is payable provided you meet the Total Disablement definition that applies to you at the end of the Waiting Period. <p>*You must also at the time of making the claim, be disabled in a manner consistent with the Temporary Incapacity condition of release under the <i>Superannuation Industry (Supervision) Regulations 1994</i>.</p> <p>The benefit will continue to be paid throughout your selected Benefit Period as long as you continue to meet the relevant Total Disablement definition. Claim offsets and limitations may apply (see Section 5.2.4).</p>	<p>2. Total Disablement</p> <p>Occupation Categories – A1, A2, M, A3, A4</p> <p>If you are:</p> <ul style="list-style-type: none"> Totally Disabled for at least one day, and continuously disabled (either Totally Disabled or Partially Disabled) for the duration of the Waiting Period, and Totally Disabled from the end of the Waiting Period, a Total Disablement monthly benefit is payable provided you meet the Total Disablement definition that applies to you at the end of the Waiting Period. <p>If your disability does not meet the above definition your claim will be assessed under your Complimentary Income Protection CORE Extras policy and benefits paid if eligible.</p> <p>Occupation Categories – B1, B2, C1, C2 and D</p> <p>If you are:</p> <ul style="list-style-type: none"> Totally Disabled for at least seven out of 12 consecutive days during the Waiting Period, and continuously disabled (either Totally Disabled or Partially Disabled) for the balance of the Waiting Period, and Totally Disabled from the end of the Waiting Period, a Total Disablement benefit is payable provided you meet the Total Disablement definition that applies to you at the end of the Waiting Period. <p>If your disability does not meet the above definition your claim will be assessed under your Complimentary Income Protection CORE Extras policy and benefits paid if eligible.</p> <p>All Occupation Categories</p> <p>You must also at the time of making the claim, be disabled in a manner consistent with the Temporary Incapacity condition of release under the <i>Superannuation Industry (Supervision) Regulations 1994</i>.</p> <p>Your state of ill health at the time of making a claim must be such as to have caused you to cease to be employed or self-employed for gain or reward in a business, trade, profession, vocation, calling, occupation or any other employment.</p> <p>In the event of a claim, Total Disablement benefits may be paid either under this policy or the Complimentary Income Protection CORE Extras policy which is also provided to everyone insured under Income Protection CORE. If your disability does not meet the above definition your claim will be assessed under your Complimentary Income Protection CORE Extras policy and benefits paid if eligible.</p> <p>For full details on Complimentary Income Protection CORE Extras please refer to Section 5.3.</p>

Benefit	Prior to change	After change
	<p>If your disability does not meet the above definition your claim will be assessed under your Complimentary Income Protection CORE Extras policy and benefits paid if eligible.</p> <p>*You must also at the time of the making of the claim, be disabled in a manner consistent, in our opinion, with the Temporary Incapacity condition of release under the Superannuation Industry (Supervision) Regulations. If your disability does not meet the above definition your claim will be assessed under your Complimentary Income Protection CORE Extras policy and benefits paid if eligible.</p> <p>All Occupation Categories</p> <p>If you have been Totally Disabled for 24 months or more from the end of your Waiting Period, your receipt of Total Disablement benefits for subsequent periods is subject to you being unable to perform the Material and Substantial Duties of a Suited Occupation.</p> <p>You can return to work at any time during the Waiting Period without the Waiting Period recommencing, provided you meet the requirements listed in the Waiting Period definition (see Section 12.1). These requirements are based on your Occupation Category and the Waiting Period selected.</p> <p>The benefit is calculated on a daily basis and paid monthly in arrears.</p>	<p>The benefit will continue to be paid throughout your selected Benefit Period as long as you continue to meet the relevant Total Disablement definition. Claim offsets and limitations may apply (see Section 5.2.4).</p> <p>If you have been Totally Disabled for 24 months or more from the end of your Waiting Period, your receipt of Total Disablement benefits for subsequent periods is subject to you being unable to perform the Material and Substantial Duties of a Suited Occupation.</p> <p>You can return to work at any time during the Waiting Period without the Waiting Period recommencing, provided you meet the requirements listed in the Waiting Period definition (see Section 12.1). These requirements are based on your Occupation Category and the Waiting Period selected.</p> <p>The benefit is calculated on a daily basis and paid monthly in arrears.</p>
<p>Partial Disablement under Income Protection CORE</p>	<p>3. Partial Disablement</p> <p>Occupation Categories – A1, A2, M, A3, A4</p> <p>If you are:</p> <ul style="list-style-type: none"> Totally Disabled and have received no income for at least one day*, and continuously disabled (either Totally Disabled or Partially Disabled) for the duration of the Waiting Period, and Partially Disabled from the end of the Waiting Period, <p>a Partial Disablement monthly benefit is payable provided you meet the Partial Disablement definition that applies to you.</p> <p>*You must also at the time of making the claim, be disabled in a manner consistent with the Temporary Incapacity condition of release under the <i>Superannuation Industry (Supervision) Regulations 1994</i>.</p> <p>The benefit will continue to be paid throughout your selected Benefit Period as long as you continue to meet the relevant Total Disablement definition. Claim offsets and limitations may apply (see Section 5.2.4).</p> <p>If during the waiting period you do not meet the above definition your claim will be assessed under your Complimentary Income Protection CORE Extras policy and benefits paid if eligible.</p> <p>*You must also at the time of the making of the claim, be disabled in a manner consistent, in our opinion, with the Temporary Incapacity condition of release under the Superannuation Industry (Supervision) Regulations. If your disability does not meet the above definition your claim will be assessed under your Complimentary Income Protection CORE Extras policy and benefits paid if eligible.</p>	<p>3. Partial Disablement</p> <p>Occupation Categories – A1, A2, M, A3, A4</p> <p>If you are:</p> <ul style="list-style-type: none"> Totally Disabled for at least one day, and continuously disabled (either Totally Disabled or Partially Disabled) for the duration of the Waiting Period, and Partially Disabled from the end of the Waiting Period, <p>a Partial Disablement monthly benefit is payable provided you meet the Partial Disablement definition that applies to you.</p> <p>The benefit will continue to be paid throughout your selected Benefit Period as long as you continue to meet the relevant Total Disablement definition. Claim offsets and limitations may apply (see Section 5.2.4).</p> <p>Occupation Categories – B1, B2, C1, C2 and D</p> <p>If you are:</p> <ul style="list-style-type: none"> Totally Disabled for at least seven out of 12 consecutive days during the Waiting Period, and continuously disabled (either Totally Disabled or Partially Disabled) for the balance of the Waiting Period, and Partially Disabled from the end of the Waiting Period, <p>a Partial Disablement monthly benefit is payable provided you meet the Partial Disablement definition that applies to you.</p> <p>The benefit will continue to be paid throughout your selected Benefit Period as long as you continue to meet the relevant Partial Disablement definition. Claim offsets and limitations may apply (see Section 5.2.4).</p>

Benefit	Prior to change	After change
	<p>Occupation Categories – B, C, CT and D</p> <p>If you are:</p> <ul style="list-style-type: none"> • Totally Disabled and have received no income for at least one day*, and • Totally Disabled for at least seven out of 12 consecutive days during the Waiting Period, and • continuously disabled (either Totally Disabled or Partially Disabled) for the balance of the Waiting Period, and • Partially Disabled from the end of the Waiting Period, a Partial Disablement monthly benefit is payable provided you meet the Partial Disablement definition that applies to you. <p>*You must also at the time of making the claim, be disabled in a manner consistent with the Temporary Incapacity condition of release under the <i>Superannuation Industry (Supervision) Regulations 1994</i>.</p> <p>The benefit will continue to be paid throughout your selected Benefit Period as long as you continue to meet the relevant Partial Disablement definition. Claim offsets and limitations may apply (see Section 5.2.4).</p> <p>If during the waiting period you do not meet the above definition your claim will be assessed under your Complimentary Income Protection CORE Extras policy and benefits paid if eligible.</p> <p>*Your state of ill health at the time of making a claim must be such as to cause you to cease to be employed or self-employed for gain or reward in any business, trade, profession, vocation, calling, occupation or employment.</p> <p>All Occupation Categories</p> <p>If you have been Partially Disabled for 24 months or more from the end of your Waiting Period, your Disablement will be assessed with regard to your ability to perform duties of a Suited Occupation (please refer to Section 12.1).</p> <p>You can return to work at any time during the Waiting Period without the Waiting Period recommencing, provided you meet the requirements listed in the Waiting Period definition (see Section 12.1). These requirements are based on your Occupation Category and the Waiting Period selected.</p> <p>To calculate your initial monthly benefit payment we take into account a number of factors including your Pre-disablement Income and your Insured Monthly Benefit. For further details on the monthly benefit calculation for Partial Disablement, see the Partial Disablement – Income Protection CORE definition in Section 12.1.</p> <p>The benefit is calculated on a daily basis and paid monthly in arrears.</p>	<p>All Occupation Categories</p> <p>You must also at the time of making the claim, be disabled in a manner consistent with the Temporary Incapacity condition of release under the <i>Superannuation Industry (Supervision) Regulations 1994</i>.</p> <p>Your state of ill health at the time of making a claim must be such as to have caused you to cease to be employed or self-employed for gain or reward in a business, trade, profession, vocation, calling, occupation or any other employment.</p> <p>In the event of a claim, Partial Disablement benefits may be paid either under this policy or the Complimentary Income Protection CORE Extras policy which is provided to everyone insured under Income Protection CORE. If your disability does not meet the above definition your claim will be assessed under your Complimentary Income Protection CORE Extras policy and benefits paid if eligible.</p> <p>For full details on Complimentary Income Protection CORE Extras please refer to Section 5.3.</p> <p>The benefit will continue to be paid throughout your selected Benefit Period as long as you continue to meet the relevant Partial Disablement definition. Claim offsets and limitations may apply (see Section 5.2.4).</p> <p>If you have been Partially Disabled for 24 months or more from the end of your Waiting Period, your Disablement will be assessed with regard to your ability to perform duties of a Suited Occupation (please refer to Section 12.1).</p> <p>You can return to work at any time during the Waiting Period without the Waiting Period recommencing, provided you meet the requirements listed in the Waiting Period definition (see Section 12.1). These requirements are based on your Occupation Category and the Waiting Period selected.</p> <p>To calculate your initial monthly benefit payment we take into account a number of factors including your Pre-disablement Income and your Insured Monthly Benefit. For further details on the monthly benefit calculation for Partial Disablement, see the Partial Disablement – Income Protection CORE definition in Section 12.1.</p> <p>The benefit is calculated on a daily basis and paid monthly in arrears.</p>
Enhancement	<p>Clarifications are added in response to the <i>Superannuation Industry (Supervision) Regulations 1994</i> for Total Disablement and Partial Disablement under Income Protection CORE.</p>	

2. Updates to Waiver of Premium

Definition	Prior to the change	After the change
Life Cover Plan, Superannuation Life Cover Plan, Recovery Stand Alone Plan		
Benefit overview under Waiver of Premium	<p>1. Waiver of Premium</p> <p>If you are Totally and Permanently Disabled (Ordinary and Superannuation Plans) or Partially and Permanently Disabled (Ordinary Plans only), we will Waive premiums during the Benefit Period for certain benefits (see below). The Waiver of your premiums will begin after the end of your qualifying period (either three or six months).</p>	<p>1. Waiver of Premium</p> <p>If you are Totally and Permanently Disabled (Ordinary and Superannuation Plans) or Partially and Permanently Disabled (Ordinary Plans only), we will Waive premiums during the Benefit Period for certain benefits (see below).</p> <p>If the premium of any benefit covered under Waiver of Premium has changed including as a result of alterations, claims and/or benefit indexation, the premium of the Waiver of Premium benefit will also be adjusted accordingly.</p> <p>The Waiver of your premiums will begin after the end of your qualifying period (either three or six months).</p>
Enhancement	Clarification is added for how the premium of Waiver of Premium works in relation to alterations, claims and or benefit indexation.	
Benefit overview under Waiver of Premium	<p>3. Voluntary increases in cover</p> <p>Premiums will not be Waived for benefits that have been voluntarily increased, repurchased or reinstated after the Waiver of Premium has commenced.</p> <p>The benefits that may be impacted by this are:</p> <p>Life Cover Plan</p> <ul style="list-style-type: none"> • Life Cover, including the: <ul style="list-style-type: none"> - repurchase of the Life Cover Sum Insured under the Crisis Recovery Buy-back benefit and TPD Buy-back benefit - purchase of Life Cover Sum Insured under Guaranteed Future Insurability, Business Safeguard Forward Underwriting and Forward Underwriting benefits, and - purchase of Life Cover under the Life Cover Purchase benefit. • Crisis Recovery, including the: <ul style="list-style-type: none"> - repurchase of the Crisis Recovery Sum Insured under Business Safeguard Forward Underwriting and Forward Underwriting benefits - Crisis Extension - Crisis Recovery Buy-back – Crisis Reinstatement - Family Protection (including the addition of a child) – Needlestick Injury, and - Term Cover. <p>Crisis Recovery Stand Alone Plan</p> <ul style="list-style-type: none"> • Crisis Recovery Stand Alone, including the: <ul style="list-style-type: none"> - purchase of Crisis Recovery Sum Insured under the Business Safeguard Forward Underwriting and Forward Underwriting benefits - Crisis Extension - Crisis Reinstatement, and - Family Protection (including the addition of a child). 	<p>3. Voluntary increases in cover</p> <p>Premiums will not be Waived for benefits that have been voluntarily increased, repurchased or reinstated after the Waiver of Premium claim has commenced at the end of its qualifying period (either three or six months).</p> <p>These impacted benefits are:</p> <p>Life Cover Plan</p> <ul style="list-style-type: none"> • Life Cover, including the: <ul style="list-style-type: none"> - repurchase of the Life Cover Sum Insured under the Crisis Recovery Buy-back benefit and TPD Buy-back benefit - purchase of Life Cover Sum Insured under Guaranteed Future Insurability, Business Safeguard Forward Underwriting and Forward Underwriting benefits, and - purchase of Life Cover under the Life Cover Purchase benefit. • Crisis Recovery, including the: <ul style="list-style-type: none"> - repurchase of the Crisis Recovery Sum Insured under Crisis Reinstatement - purchase of the Crisis Recovery Sum Insured under Business Safeguard Forward Underwriting and Forward Underwriting benefits - Crisis Extension - Crisis Recovery Buy-back – Crisis Reinstatement - Family Protection (including the addition of a child), and - Needlestick Injury. <p>Crisis Recovery Stand Alone Plan</p> <ul style="list-style-type: none"> • Crisis Recovery Stand Alone, including the: <ul style="list-style-type: none"> - repurchase of the Crisis Recovery Sum Insured under Crisis Reinstatement - purchase of Crisis Recovery Sum Insured under the Business Safeguard Forward Underwriting and Forward Underwriting benefits - Crisis Extension - Crisis Reinstatement, and - Family Protection (including the addition of a child).
Enhancement	Clarification is added for impacted benefits under the voluntary increase in cover.	

3. Updates to Eligible Rollover Fund

Definition	Prior to change	After change
Superannuation Life Cover Plan, Superannuation Income Protection Plan		
Membership fees and costs under AIA Insurance Superannuation Scheme No2	<p>Cancellation of your insurance and Scheme membership</p> <p>You can cancel some or all of your insurance cover through the Scheme. Where you cancel all your insurance cover, your membership of the Scheme will also cease, and vice versa. To cancel all your insurance cover and Scheme membership, or cancel some of your insurance cover, you will need to send your written cancellation request by mail, fax or email or in any other manner permitted by law, to us (refer to Section 10.2 for further information about cancelling insurance cover including information about any refund of premiums and cancellation charges that may apply). Once AIA Australia receives your cancellation request we will need to confirm your request with the trustee of the Scheme. The trustee of the Scheme will deal with any amounts refunded on cancellation of your insurance cover in accordance with superannuation tax and preservation rules. Any premium you paid as a superannuation contribution or by way of rollover into the Scheme (less allowable adjustments, for example, for taxes) must usually be preserved and cannot be refunded to you directly unless permitted under superannuation laws. You must provide details of another complying superannuation fund so that the trustee of the Scheme can transfer any preserved money into that fund, otherwise the trustee of the Scheme will transfer any preserved money to the Scheme's nominated ERF or to the ATO – see 'Transfer of Scheme monies' in this section.</p> <p>Cancellation of Scheme membership within cooling-off period</p> <p>The Scheme provides a cooling-off period of 28 days, commencing at the earlier of the day the trustee accepts your application for membership of the Scheme and the end of the 5th day after the date the trustee issues confirmation of your membership. During this period you can cancel your membership of the Scheme by sending your written cancellation request by mail, fax or email or in any other manner permitted by law to us and your insurance cover via the Scheme will also cease. Any premiums you have paid (including the policy fee) will be refunded to the Scheme and, after adjustment for any taxes payable by the trustee, will be in accordance with superannuation tax and preservation rules. You will lose the right to cancel your Scheme membership under the cooling-off regime if you have exercised any right or power under the Scheme (including under a Policy held through the Scheme). This means, for example, that premiums will not be refunded where you have made a claim and your Scheme membership will not cease until your claim (and any benefit payment, if applicable) is finalised. You must provide details of another complying superannuation fund so that the trustee of the Scheme can transfer any preserved money into that fund. Otherwise the trustee of the Scheme will transfer any preserved money to the Scheme's nominated ERF or to the ATO – see 'Transfer of Scheme monies' in this section.</p>	<p>Cancellation of your insurance and Scheme membership</p> <p>You can cancel some or all of your insurance cover through the Scheme. Where you cancel all your insurance cover, your membership of the Scheme will also cease, and vice versa. To cancel all your insurance cover and Scheme membership, or cancel some of your insurance cover, you will need to send your written cancellation request by mail, fax or email or in any other manner permitted by law, to us (refer to Section 10.2 for further information about cancelling insurance cover including information about any refund of premiums and cancellation charges that may apply). Once AIA Australia receives your cancellation request we will need to confirm your request with the trustee of the Scheme. The trustee of the Scheme will deal with any amounts refunded on cancellation of your insurance cover in accordance with superannuation tax and preservation rules. Any premium you paid as a superannuation contribution or by way of rollover into the Scheme (less allowable adjustments, for example, for taxes) must usually be preserved and cannot be refunded to you directly unless permitted under superannuation laws. You must provide details of another complying superannuation fund so that the trustee of the Scheme can transfer any preserved money into that fund, otherwise the trustee of the Scheme will transfer any preserved money to the ATO – see 'Transfer of Scheme monies' in this section.</p> <p>Cancellation of Scheme membership within cooling-off period</p> <p>The Scheme provides a cooling-off period of 28 days, commencing at the earlier of the day the trustee accepts your application for membership of the Scheme and the end of the 5th day after the date the trustee issues confirmation of your membership. During this period you can cancel your membership of the Scheme by sending your written cancellation request by mail, fax or email or in any other manner permitted by law to us and your insurance cover via the Scheme will also cease. Any premiums you have paid (including the policy fee) will be refunded to the Scheme and, after adjustment for any taxes payable by the trustee, will be in accordance with superannuation tax and preservation rules. You will lose the right to cancel your Scheme membership under the cooling-off regime if you have exercised any right or power under the Scheme (including under a Policy held through the Scheme). This means, for example, that premiums will not be refunded where you have made a claim and your Scheme membership will not cease until your claim (and any benefit payment, if applicable) is finalised. You must provide details of another complying superannuation fund so that the trustee of the Scheme can transfer any preserved money into that fund. Otherwise the trustee of the Scheme will transfer any preserved money to the ATO – see 'Transfer of Scheme monies' in this section.</p>

Definition**Transfer of Scheme monies under AIA Insurance Superannuation Scheme No2****Prior to change****11. Transfer of Scheme monies**

If money is held for you in the Scheme, it can, in some circumstances, be transferred to an Eligible Rollover Fund (ERF) or the ATO, where it will be held until it can be paid to you, a fund you nominate, or (if a death benefit) to your beneficiary or legal personal representative.

The circumstances in which money held for you can be transferred to an ERF or the ATO include:

- if the Superannuation Life Cover Plan or Superannuation Income Protection Plan Policy is cancelled and the trustee is holding contributions or rollovers/transfers into the Scheme that have not yet been applied towards payment of premiums
- the cancellation results in a refund of premiums by AIA Australia to the trustee of the Scheme, or
- the trustee is unable to pay your insured benefit to you because you do not meet a condition of release.

The trustee will transfer your money in the Scheme (after giving you prior written notice of its intention to do so) if you do not inform the trustee of an alternative superannuation fund within the time frame set out in the notice. Your consent to the transfer is not required.

If your money in the Scheme is transferred to the ATO:

- you will have ATO-held super, from where it may be claimed once you've met certain conditions or transferred to another complying superannuation fund in which you are a member
- the ATO will not be able to accept any ongoing contributions from you or your employer, however other amounts from other superannuation funds may also be transferred to your ATO-held super, and
- the ATO-held super does not provide insurance benefits. Any insurance cover you had as part of the Scheme will lapse on transfer to the ATO (if it has not previously ceased for some other reason).

You can find information about ATO-held super at ato.gov.au or through a myGov account linked to the ATO.

If your money in the Scheme is transferred to an ERF:

- you will become a member of the ERF, which means that your money will be governed by the
- ERF's rules, including the ERF's fee structure
- the ERF may not be able to accept any ongoing contributions from you or your employer, but rollovers from other superannuation funds may be permitted, and
- an ERF does not offer insurance benefits. Any insurance cover you had as part of the Scheme will lapse on transfer to an ERF (if it has not previously ceased for some other reason).

After change**11. Transfer of Scheme monies**

If money is held for you in the Scheme, it can, in some circumstances, be transferred to the ATO, where it will be held until it can be paid to you, a fund you nominate, or (if a death benefit) to your beneficiary or legal personal representative.

The circumstances in which money held for you can be transferred to the ATO include:

- if the Superannuation Life Cover Plan or Superannuation Income Protection Plan Policy is cancelled and the trustee is holding contributions or rollovers/transfers into the Scheme that have not yet been applied towards payment of premiums
- the cancellation results in a refund of premiums by AIA Australia to the trustee of the Scheme
- the trustee is unable to pay your insured benefit to you because you do not meet a condition of release, or
- the trustee may also voluntarily transfer amounts to the ATO in certain circumstances where the trustee believes it is in the best interests of the member.

The trustee will transfer your money in the Scheme (after giving you prior written notice of its intention to do so) if you do not inform the trustee of an alternative superannuation fund within the time frame set out in the notice. Your consent to the transfer is not required.

If your money in the Scheme is transferred to the ATO:

- you will have ATO-held super, from where it may be claimed once you've met certain conditions or transferred to another complying superannuation fund in which you are a member
- the ATO will not be able to accept any ongoing contributions from you or your employer, however other amounts from other superannuation funds may also be transferred to your ATO-held super, and
- the ATO-held super does not provide insurance benefits. Any insurance cover you had as part of the Scheme will lapse on transfer to the ATO (if it has not previously ceased for some other reason).

The ATO is able to reunite and consolidate the lost or unclaimed amounts with their owners (where they can be identified) and manages the funds in the interim. You can find information about ATO-held super at ato.gov.au or through a myGov account linked to the ATO.

Enhancements

The references to Eligible Rollover Fund (ERF) have been removed in response to the Treasury Laws Amendment (Reuniting More Superannuation) Bill 2020.

4. Updates to General Definitions

Definition	Prior to change	After change
All Plans		
Accidental Death	Accidental Death means that death is a result of a physical injury which is caused solely and directly by violent, external and unexpected means that is not traceable, even indirectly, to your state of mental or physical health before the event. Death resulting from a Sickness does not constitute 'Accidental Death'.	Accidental Death means death as a result of a physical injury which: <ul style="list-style-type: none"> • is caused solely and directly by violent, external and unexpected means; and • would have occurred in the absence of any mental or physical health condition which you were subject to at or prior to the relevant accident event. <p>Death resulting from a Sickness does not constitute 'Accidental Death'.</p>
Enhancement	The wording 'accidental' and 'indirectly' have been replaced with wordings with more clarification.	
Accidental Injury	Accidental Injury means a physical injury which is caused solely and directly by violent, accidental, external and visible means, and which occurs entirely independently of a health condition or any other cause whilst the benefit is in force. Sickness resulting from medical or surgical treatment rendered necessary by the physical injury will not constitute an 'Accidental Injury'	Accidental Injury means a physical injury which: <ul style="list-style-type: none"> • is caused solely and directly by violent, external and unexpected means; and • would have occurred in the absence of any mental or physical health condition which you were subject to at or prior to the relevant accident event. <p>Sickness resulting from medical or surgical treatment rendered necessary by the physical injury will not constitute an 'Accidental Injury'.</p>
Enhancement	The wording 'accidental' has been replaced with wordings with more clarification. The wordings of 'which occurs entirely independently of a health condition or any other cause whilst the benefit is in force' have been removed.	
Pre-existing Condition	Pre-existing Condition means a health condition: <ul style="list-style-type: none"> • that first occurred before the commencement, reinstatement or increase of the relevant cover; and • which you had at the relevant time been aware of, or which a reasonable person in your position could have been expected to have been aware of. <p>If, in relation to a health condition, you had suffered symptoms which, to a reasonable person, would have indicated the presence of that health condition or the need to seek medical treatment or investigation that would have revealed the presence of that health condition prior to the commencement, reinstatement or increase of the relevant benefit, that health condition will be a Pre-existing Condition notwithstanding that you were not in fact aware of it and you will not be covered in respect of it if we would have declined to cover you or applied a loading or exclusion in respect of it if we had knowledge of it.</p>	Pre-existing Condition means a health condition: <ul style="list-style-type: none"> • that first occurred before the commencement, reinstatement or increase of the relevant cover; and • which you had at the relevant time been aware of, or which a reasonable person in your position could have been expected to have been aware of. <p>If, in relation to a health condition, you had suffered symptoms which, to a reasonable person, would have indicated the presence of that health condition or the need to seek medical treatment or investigation that would have revealed the presence of that health condition prior to the commencement, reinstatement or increase of the relevant benefit, that health condition will be a Pre-existing Condition notwithstanding that you were not in fact aware that you had the health condition.</p>
Sum Insured definition	Sum Insured means the Sum Insured applicable to that benefit as shown on the Policy Schedule, as adjusted in accordance with the Policy terms and conditions	Sum Insured means the Sum Insured applicable to that benefit as shown on the Policy Schedule, as adjusted in accordance with the Policy terms and conditions and notified to the Policy Owner, such as any applicable Benefit Indexation.
Enhancement	The wording 'and notified to the Policy Owner' has been added for clarification.	

Definition	Prior to change	After change
Income Protection Plan, Superannuation Income Protection Plan		
Pre-disablement Income (Income Protection CORE)	<p>Pre-disablement Income (Income Protection CORE) is the greater of your average monthly Income for:</p> <ul style="list-style-type: none"> the 12 consecutive months preceding the commencement of disablement, and the latest financial year preceding the commencement of disablement. <p>If the insured can demonstrate that their Income has reduced by 25% or more over the previous 12 month period, Pre-disablement Income (Income Protection CORE) will be the greater of your average monthly Income for;</p> <ul style="list-style-type: none"> the 24 consecutive months preceding the commencement of disablement, and the latest financial year preceding the commencement of disablement. 	<p>Pre-disablement Income (Income Protection CORE) is the greater of your average monthly Income for:</p> <ul style="list-style-type: none"> the 12 consecutive months preceding the commencement of disablement, and the latest financial year preceding the commencement of disablement. <p>If your Income has reduced by 25% or more over the previous 12 month period, Pre-disablement Income (Income Protection CORE) will be the greater of your average monthly Income for;</p> <ul style="list-style-type: none"> the 24 consecutive months preceding the commencement of disablement, and the latest financial year preceding the commencement of disablement.
Enhancement	The wording of ‘the insured can demonstrate’ has been replaced with ‘your Income’:	
Total Disablement (Income Protection CORE) under General Definitions	<p>Total Disablement (Income Protection CORE) means</p> <p>In the first 24 months of the Benefit Period that you are:</p> <ul style="list-style-type: none"> solely as a result of Injury or Sickness, unable to perform the Material and Substantial Duties of your Own Occupation (Income Protection CORE), and under the regular care of, and following the advice and treatment of a Medical Practitioner in relation to that Injury or Sickness; and not working in any occupation and not capable of working in your Own Occupation (whether paid or unpaid). <p>After the expiry of the first 24 months and for the balance of the Benefit Period, that you are:</p> <ul style="list-style-type: none"> solely due to that Injury or Sickness, unable to perform the Material and Substantial Duties of a Suited Occupation, and under the regular care of, and following the advice and treatment of a Medical Practitioner in relation to that Injury or Sickness; and not working in any occupation and not capable of working in a Suited Occupation (whether paid or unpaid). <p>In determining whether you are capable of working in your Own Occupation or a Suited Occupation (as applicable), we will take into account available medical evidence (including the opinion of your Medical Practitioner) and any other relevant considerations directly related to your medical condition (including information provided by you).</p> <p>Where you were unemployed or on maternity or paternity leave for more than 12 consecutive months immediately preceding the occurrence of an event giving rise to a claim, you will only be considered to be totally disabled where you are unable to perform the Material and Substantial Duties of a Suited Occupation. Please refer to Section 5.3.2 for the applicable full definition of disability.</p> <p>If at the time of the making of the claim, you are not disabled in a manner consistent with the Temporary Incapacity condition of release under the <i>Superannuation Industry (Supervision) Regulations 1994</i>, your benefit may be paid under your Complimentary Income Protection CORE Extras policy.</p>	<p>Total Disablement (Income Protection CORE) means</p> <p>In the first 24 months of the Benefit Period that you are:</p> <ul style="list-style-type: none"> solely as a result of Injury or Sickness, unable to perform the Material and Substantial Duties of your Own Occupation (Income Protection CORE), and under the regular care of, and following the advice and treatment of a Medical Practitioner in relation to that Injury or Sickness; and not working in any occupation and not capable of working in your Own Occupation (whether paid or unpaid). <p>After the expiry of the first 24 months and for the balance of the Benefit Period, that you are:</p> <ul style="list-style-type: none"> solely due to that Injury or Sickness, unable to perform the Material and Substantial Duties of a Suited Occupation, and under the regular care of, and following the advice and treatment of a Medical Practitioner in relation to that Injury or Sickness; and not working in any occupation and not capable of working in a Suited Occupation (whether paid or unpaid). <p>In determining whether you are capable of working in your Own Occupation or a Suited Occupation (as applicable), we will take into account available medical evidence (including the opinion of your Medical Practitioner) and any other relevant considerations directly related to your medical condition (including information provided by you).</p> <p>Where you were unemployed or on maternity or paternity leave for more than 12 consecutive months immediately preceding the occurrence of an event giving rise to a claim, you will only be considered to be totally disabled where you are unable to perform the Material and Substantial Duties of a Suited Occupation. Please refer to Section 5.3.2 for the applicable full definition of disability.</p> <p>If at the time of the making of the claim, you are not disabled in a manner consistent with the Temporary Incapacity condition of release under the <i>Superannuation Industry (Supervision) Regulations 1994</i>, your benefit may be paid under your Complimentary Income Protection CORE Extras policy.</p>

Definition	Prior to change	After change
	<p>No Total Disablement benefits will be payable at any time you qualify for Partial Disablement Benefits.</p> <p>The amount of benefit payable will be adjusted for any claim offsets (see condition 5.2.4).</p>	<p>Your state of ill health at the time of making a claim must be such as to have caused you to cease to be employed or self-employed for gain or reward in a business, trade, profession, vocation, calling, occupation or any other employment.</p> <p>No Total Disablement benefits will be payable at any time you qualify for Partial Disablement Benefits.</p> <p>The amount of benefit payable will be adjusted for any claim offsets (see condition 5.2.4).</p>
Enhancement	Clarifications are added in response to the <i>Superannuation Industry (Supervision) Regulations 1994</i> for Total Disablement under Income Protection CORE.	
Partial Disablement (Income Protection CORE) under General Definitions	<p>Partial Disablement (Income Protection CORE) means:</p> <p>In the first 24 months of your Benefit Period that, you are:</p> <ul style="list-style-type: none"> • solely due to Injury or Sickness, unable to perform some of the Material and Substantial Duties of your Own Occupation (Income Protection CORE); and • capable of working in your Own Occupation, or working in any occupation; and • earning an income which is less than 80% of your Pre-disablement Income; and • under the regular care and following the advice of a Medical Practitioner in relation to that Injury or Sickness. <p>Following the first 24 months of your Benefit Period that you are:</p> <ul style="list-style-type: none"> • solely due to Injury or Sickness, unable to perform some of the Material and Substantial Duties of a Suited Occupation; and • capable of working in a Suited Occupation, or working in any occupation, for no more than, the lower of: <ul style="list-style-type: none"> - 40 hours or - 80% of the average weekly hours worked by you in the 12 months prior to disability; and • earning an income which is less than 80% of your Pre-disablement Income; and • under the regular care and following the advice of a Medical Practitioner in relation to that Injury or Sickness. <p>Where you were unemployed or on maternity or paternity leave for more than 12 consecutive months immediately preceding the occurrence of an event giving rise to a claim, you will only be considered to be partially disabled where you are unable to perform the Material and Substantial Duties of a Suited Occupation. Please refer to Section 5.3.3 for the applicable full definition of disability.</p> <p>If at the time of the making of the claim, you are not disabled in a manner consistent with the Temporary Incapacity condition of release under the <i>Superannuation Industry (Supervision) Regulations 1994</i>, your benefit may be paid under your Complimentary Income Protection CORE Extras policy.</p> <p>If you are Partially Disabled and are not working to the extent of your capability, or working in a reduced capacity which is less than your capability (having regard to your Injury or Sickness), and this situation continues for at least two months, then your benefit will be calculated based on what you could reasonably be expected to earn if you were working to the extent of your capability.</p>	<p>Partial Disablement (Income Protection CORE) means:</p> <p>In the first 24 months of your Benefit Period that, you are:</p> <ul style="list-style-type: none"> • solely due to Injury or Sickness, unable to perform some of the Material and Substantial Duties of your Own Occupation (Income Protection CORE); and • capable of working in your Own Occupation, or working in any occupation; and • earning an income which is less than 80% of your Pre-disablement Income; and • under the regular care and following the advice of a Medical Practitioner in relation to that Injury or Sickness. <p>Following the first 24 months of your Benefit Period that you are:</p> <ul style="list-style-type: none"> • solely due to Injury or Sickness, unable to perform some of the Material and Substantial Duties of a Suited Occupation; and • capable of working in a Suited Occupation, or working in any occupation, for no more than, the lower of: <ul style="list-style-type: none"> - 40 hours or - 80% of the average weekly hours worked by you in the 12 months prior to disability; and • earning an income which is less than 80% of your Pre-disablement Income; and • under the regular care and following the advice of a Medical Practitioner in relation to that Injury or Sickness. <p>Where you were unemployed or on maternity or paternity leave for more than 12 consecutive months immediately preceding the occurrence of an event giving rise to a claim, you will only be considered to be partially disabled where you are unable to perform the Material and Substantial Duties of a Suited Occupation. Please refer to Section 5.3.3 for the applicable full definition of disability.</p> <p>If at the time of the making of the claim, you are not disabled in a manner consistent with the Temporary Incapacity condition of release under the <i>Superannuation Industry (Supervision) Regulations 1994</i>, your benefit may be paid under your Complimentary Income Protection CORE Extras policy.</p> <p>Your state of ill health at the time of making a claim must be such as to have caused you to cease to be employed or self-employed for gain or reward in a business, trade, profession, vocation, calling, occupation or any other employment.</p> <p>If you are Partially Disabled and are not working to the extent of your capability, or working in a reduced capacity which is less than your capability (having</p>

Definition	Prior to change	After change
	<p>Your capability (having regard to your Injury or Sickness) and what you could reasonably be expected to earn if you were working to the extent of your capability will be determined reasonably by taking into account available medical evidence (including the opinion of your Medical Practitioner) and any other relevant considerations directly related to your medical condition (including information provided by you).</p> <p>If we are making monthly benefit payments and these are adjusted in accordance with the terms of the Policy, we will notify you 30 days prior to this taking place.</p> <p>The amount of benefit payable will be adjusted for any claim offsets (see condition 5.2.4).</p>	<p>regard to your Injury or Sickness), and this situation continues for at least two months, then your benefit will be calculated based on what you could reasonably be expected to earn if you were working to the extent of your capability.</p> <p>Your capability (having regard to your Injury or Sickness) and what you could reasonably be expected to earn if you were working to the extent of your capability will be determined by taking into account available medical evidence (including the opinion of your Medical Practitioner) and any other relevant considerations directly related to your medical condition (including information provided by you).</p> <p>If we are making monthly benefit payments and these are adjusted in accordance with the terms of the Policy, we will notify you 30 days prior to this taking place.</p> <p>The amount of benefit payable will be adjusted for any claim offsets (see condition 5.2.4).</p>
Enhancement	Clarifications are added in response to the <i>Superannuation Industry (Supervision) Regulations 1994 for Partial Disablement under Income Protection CORE</i> .	
Waiting Period (Income Protection CORE) under General Definitions	<p>Waiting Period (Income Protection CORE) is stated on the Policy Schedule and means, in respect of the Sickness or Injury that is causing your disablement, the number of days at the beginning of a period of disablement in respect of which no Total or Partial Disablement benefit is payable.</p> <p>The Waiting Period begins on the earlier of the day:</p> <ul style="list-style-type: none"> • of your first consultation with a Medical Practitioner about the condition that gave rise to the claim, and • that you first cease work due to that condition as long as it is not more than seven days before you first consult a Medical Practitioner about the condition and the Medical Practitioner provides reasonable medical evidence about when the disablement began. <p>You can return to work at any time during the Waiting Period, without the Waiting Period recommencing, subject to the following criteria being satisfied:</p>	<p>Waiting Period (Income Protection CORE) is stated on the Policy Schedule and means, in respect of the Sickness or Injury that is causing your disablement, the number of days at the beginning of a period of disablement in respect of which no Total or Partial Disablement benefit is payable.</p> <p>The Waiting Period begins on the earlier of the day:</p> <ul style="list-style-type: none"> • of your first consultation with a Medical Practitioner about the condition that gave rise to the claim, and • that you first cease work due to that condition as long as it is not more than seven days before you first consult a Medical Practitioner about the condition and the Medical Practitioner provides reasonable medical evidence about when the disablement began. <p>You can return to work at any time during the Waiting Period, without the Waiting Period recommencing, subject to the following criteria being satisfied:</p>
Occupation Waiting Period Category	30 days, 60 days, 90 days or 2 years	Occupation Waiting Period Category
A1, A2, M, A3, A4	<ul style="list-style-type: none"> • You are Totally Disabled and have received no income for at least one day*, and • You are Totally Disabled or Partially Disabled due to the same sickness or injury which was causing your disablement at the commencement of the Waiting Period for the duration of the Waiting Period. 	A1, A2, M, A3, A4
B, C, CT and D	<ul style="list-style-type: none"> • You are Totally Disabled and have received no income for at least one day*, and • You are Totally Disabled for at least seven out of 12 consecutive days during the Waiting Period, and • You are Totally Disabled or Partially Disabled due to the same sickness or injury which was causing your disablement at the commencement of the Waiting Period for the balance of the Waiting Period. 	B1, B2, C1, C2 and D
	<ul style="list-style-type: none"> • You are Totally Disabled for at least one day, and • You are Totally Disabled or Partially Disabled due to the same sickness or injury which was causing your disablement at the commencement of the Waiting Period for the duration of the Waiting Period. 	
	<ul style="list-style-type: none"> • You are Totally Disabled for at least seven out of 12 consecutive days during the Waiting Period, and • You are Totally Disabled or Partially Disabled due to the same sickness or injury which was causing your disablement at the commencement of the Waiting Period for the balance of the Waiting Period. 	

Definition	Prior to change	After change
	<p>The benefit will continue to be paid throughout your selected Benefit Period as long as you continue to meet the relevant Total or Partial Disablement definition. Claim offsets and limitations may apply (see Section 5.2.4).</p> <p>Note: group salary continuance</p> <p>Where:</p> <ul style="list-style-type: none"> the Waiting Period under your Policy is two years, as stated on the Policy Schedule you are insured by us under a current group salary continuance with a two-year benefit period, and you return to work on a full-time basis following payment of a disablement benefit under a group salary continuance policy and the same or related disablement recurs within 12 months of returning to work, then the Waiting Period under your Policy in respect of the recurring disablement will not recommence. <p>If you return to work for more than 12 months, then the Waiting Period applicable to you in respect of recurring disablement will restart from the day after the last day worked.</p>	<p>You must also at the time of making the claim, be disabled in a manner consistent with the Temporary Incapacity condition of release under the <i>Superannuation Industry (Supervision) Regulations 1994</i>.</p> <p>Your state of ill health at the time of making a claim must be such as to have caused you to cease to be employed or self-employed for gain or reward in a business, trade, profession, vocation, calling, occupation or any other employment.</p> <p>In the event of a claim, Total Disablement or Partial Disablement benefits may be paid either under this policy or the Complimentary Income Protection CORE Extras policy which is also provided to everyone insured under Income Protection CORE. If your disability does not meet the above definition your claim will be assessed under your Complimentary Income Protection CORE Extras policy and benefits paid if eligible.</p> <p>For full details on Complimentary Income Protection CORE Extras please refer to Section 5.3.</p> <p>The benefit will continue to be paid throughout your selected Benefit Period as long as you continue to meet the relevant Total or Partial Disablement definition. Claim offsets and limitations may apply (see Section 5.2.4).</p> <p>Note: group salary continuance</p> <p>Where:</p> <ul style="list-style-type: none"> the Waiting Period under your Policy is two years, as stated on the Policy Schedule you are insured by us under a current group salary continuance with a two-year benefit period, and you return to work on a full-time basis following payment of a disablement benefit under a group salary continuance policy and the same or related disablement recurs within 12 months of returning to work, then the Waiting Period under your Policy in respect of the recurring disablement will not recommence. <p>If you return to work for more than 12 months, then the Waiting Period applicable to you in respect of recurring disablement will restart from the day after the last day worked.</p>
Enhancement	Clarifications are added in response to the <i>Superannuation Industry (Supervision) Regulations 1994</i> for Waiting Period (Income Protection CORE).	

5. Updates to Medical Definitions

Medical Definition	Prior to change	After change
Life Cover Plan, Crisis Recovery Stand Alone Plan, Superannuation PLUS under Superannuation Life Cover Plan		
Severe Rheumatoid Arthritis with significant functional impairment definition under Crisis Extension	<p>Severe Rheumatoid Arthritis with significant functional impairment means Severe Rheumatoid Arthritis that has resulted in either:</p> <ul style="list-style-type: none"> the total and permanent inability to perform at least two of the Activities of Daily Living; or an impairment of at least 25% in whole person function, attributable to the above condition, as defined in the latest edition of the American Medical Association's <i>Guides to the Evaluation of Permanent Impairment</i>. <p>Diagnosis of must be confirmed by a consultant rheumatologist.</p>	<p>Severe Rheumatoid Arthritis with significant functional impairment means Severe Rheumatoid Arthritis (failed conventional DMARDs and one bDMARD) that has resulted in either:</p> <ul style="list-style-type: none"> the total and permanent inability to perform at least two of the Activities of Daily Living; or an impairment of at least 25% in whole person function, attributable to the above condition, as defined in the latest edition of the American Medical Association's <i>Guides to the Evaluation of Permanent Impairment</i>. <p>Diagnosis of must be confirmed by a consultant rheumatologist.</p>
Enhancement	The label has been updated to clarify the relevant definition applied.	

6. Other updates in response to Unfair Contract Terms laws

The following table shows changes to certain phrases and expressions throughout the PDS.

Change	Prior to change	After change
Life Cover Plan, Superannuation Life Cover Plan		
Terminal Illness under Life Cover	<p>Terminal Illness means the diagnosis of an illness which, in the reasonable opinion of an appropriate specialist Medical Practitioner, is likely to result in you passing away within 24 months of the diagnosis regardless of any treatment that may be undertaken.</p> <p>In addition to the above requirements, under a Superannuation Plan a condition will only constitute a Terminal Illness where two Medical Practitioners, one of whom must be a specialist practising in an area related to the condition, must certify that the condition is likely to result in you passing away within 24 months of the date of the certificate (certification period) and for each of the certificates, the certification period must not have ended.</p>	<p>Terminal Illness means the diagnosis of an illness which, in the reasonable opinion of an appropriate specialist Medical Practitioner, is likely to result in you passing away within 24 months of the diagnosis regardless of any treatment that may be undertaken.</p> <p>In addition to the above requirements, under a Superannuation Plan a condition will only constitute a Terminal Illness where two Medical Practitioners, one of whom must be a specialist practising in an area related to the condition, must certify in their reasonable opinion that the condition is likely to result in you passing away within 24 months of the date of the certificate (certification period) and for each of the certificates, the certification period must not have ended.</p>
Enhancement	The wording 'in their reasonable opinion' has been added for clarification.	
Accidental Death under Accidental Death Cover	<p>Accidental Death means death that results from a physical injury (or combination of physical injuries) caused solely and directly by a violent, accidental and unexpected event and which occurs within six months of the relevant event. A death which is traceable, even indirectly, to your state of mental or physical health before the event, or which results from a Sickness (including a Sickness caused by an Accidental Injury), will not constitute Accidental Death.</p>	<p>Accidental Death means death as a result of a physical injury which:</p> <ul style="list-style-type: none"> • is caused solely and directly by violent, external and unexpected means; and • would have occurred in the absence of any mental or physical health condition which you were subject to at or prior to the relevant accident event. <p>Death resulting from a Sickness does not constitute 'Accidental Death'.</p>
Enhancement	The wording 'accidental' and 'indirectly' have been replaced for clarification. The requirement of the event 'which occurs within six months' has been removed.	
Life Cover Plan, Superannuation Life Cover Plan (Superannuation PLUS only), Crisis Recovery Standalone		
Proof of positive diagnosis under Crisis Extension	<p>Proof of positive diagnosis</p> <p>...</p> <p>The person(s) confirming the diagnosis must act reasonably when determining their opinion and must base that diagnosis on our definition of the relevant Crisis Extension Event (as set out in Section 12.2 Medical Definitions), after a study of the relevant and reasonably necessary histological material and clinical presentation based on the medical history, physical examination, radiological studies, and the results of any other diagnostic procedures performed on you.</p>	<p>Proof of positive diagnosis</p> <p>...</p> <p>The person(s) confirming the diagnosis must act reasonably when determining their opinion and must base that diagnosis on our definition of the relevant Crisis Extension Event (as set out in Section 12.2 Medical Definitions), after a study of the relevant and reasonably necessary histological material and clinical presentation based on the medical history, physical examination, radiological studies, and the results of any other diagnostic procedures performed on you or your Child.</p>
Enhancement	The wording 'your Child' has been added for clarification.	

Change	Prior to change	After change
Income Protection Plan, Superannuation Income Protection Plan (Advantage Optional and PLUS Optional only)		
Rehabilitation Expenses under Income Protection and Income Protection Accident Only, Income Protection CORE and Complimentary Income Protection CORE Extras	<p data-bbox="331 282 587 309">Rehabilitation Expenses</p> <p data-bbox="331 324 911 555">We will pay the costs of your participation in an approved rehabilitation program that is part of a structured return to work program and is necessary to assist in your rehabilitation back to work. We won't pay the costs of your participation in certain types of rehabilitation programs. For example, we will not reimburse costs of participating in the following types of programs:</p> <ul data-bbox="331 560 911 846" style="list-style-type: none"> • Programs which provide treatment as defined by the Life Insurance and Health Insurance Acts • Ongoing services that do not lead to an increase in function • Programs that do not have the primary purpose of returning you to paid employment • Programs that do not have goals incorporated into the plan that can be measured • Programs that are for general wellbeing and are not part of an occupational rehabilitation program. <p data-bbox="331 862 911 1037">We recommend you seek our approval of the program prior to your participation otherwise there is the risk that you'll be out of pocket for the costs incurred. We won't unreasonably delay letting you know whether or not we'll reimburse you for the proposed rehabilitation program.</p> <p data-bbox="331 1052 911 1227">This benefit also covers the reimbursement of occupational services, aides, equipment and/or modifications that are considered necessary as part of the structured return to work program. These expenses must be approved by us and are limited to the maximum benefit of 12 times the Insured Monthly Benefit.</p> <p data-bbox="331 1243 911 1292">This benefit is payable in addition to any other benefit paid.</p> <p data-bbox="331 1308 911 1361">We will not pay this benefit for expenses that are reimbursed from any other source.</p>	<p data-bbox="940 282 1195 309">Rehabilitation Expenses</p> <p data-bbox="940 324 1517 477">We will pay the costs of your participation in a rehabilitation program approved by us that is part of a structured return to work program and is necessary to assist in your rehabilitation back to work, following your Illness or Sickness.</p> <p data-bbox="940 488 1517 542">We will pay this benefit for the following types of programs:</p> <ul data-bbox="940 546 1517 857" style="list-style-type: none"> • graded exercise programs • wellness programs • business coaching • graded return-to-work programs • modification of work environments • work-related counselling • career advice and redirection • re-skilling or retraining • the supply of ergonomic equipment • other types of programs which we approve from time to time. <p data-bbox="940 873 1517 927">However, we will not reimburse costs of participating in any program where the relevant program:</p> <ul data-bbox="940 931 1517 1243" style="list-style-type: none"> • Involves 'treatment' as defined by the Life Insurance and Health Insurance Acts • Provides ongoing services that do not have the specific and stated objective of leading to an increase in function • Does not have the primary purpose of returning you to paid employment • Does not have goals incorporated into the plan that can be measured; or • Is of a type ordinarily engaged in for general health and wellbeing. <p data-bbox="940 1258 1517 1433">We recommend you seek our approval of the program prior to your participation otherwise there is the risk that you'll be out of pocket for the costs incurred. We won't unreasonably delay letting you know whether or not we'll reimburse you for the proposed rehabilitation program.</p> <p data-bbox="940 1449 1517 1624">This benefit also covers the reimbursement of occupational services, aides, equipment and/or modifications that are considered necessary as part of the structured return to work program. These expenses must be approved by us and are limited to the maximum benefit of 12 times the Insured Monthly Benefit.</p> <p data-bbox="940 1639 1517 1693">This benefit is payable in addition to any other benefit paid.</p> <p data-bbox="940 1709 1517 1765">We will not pay this benefit for expenses that are reimbursed from any other source.</p>
Enhancement	Information has been disclosed of what rehabilitation programs we will pay. Clarification has been added on the approver of the rehabilitation.	

Change	Prior to change	After change
Income Protection Plan, Superannuation Income Protection Plan (PLUS Optional only)		
Rehabilitation Incentive benefit under Income Protection	<p>22. Rehabilitation Incentive benefit</p> <p>We will pay a benefit of three times your Insured Monthly Benefit if you return to paid Full-time Employment after attending a rehabilitation program that is part of a structured return to work program that has previously been verified by a Medical Practitioner as being reasonably necessary to assist in your rehabilitation back to work, or is otherwise approved by us, and you remain in paid Full-time Employment for six consecutive months. We will pay this benefit once only.</p> <p>We recommend you seek our approval of the program prior to your participation otherwise there is the risk that you will not receive this benefit. We won't unreasonably delay letting you know whether or not we approve the program for the purpose of this benefit.</p>	<p>22. Rehabilitation Incentive benefit</p> <p>We will pay a benefit of three times your Insured Monthly Benefit if you return to paid Full-time Employment after attending a rehabilitation program that is reasonably necessary to assist in your rehabilitation back to work, following your Illness or Sickness, or is otherwise approved by us, and you remain in paid Full-time Employment for six consecutive months. We will pay this benefit once only.</p> <p>We will pay this benefit where you participated in the following types of programs:</p> <ul style="list-style-type: none"> • graded exercise programs • wellness programs • business coaching • graded return-to-work programs • modification of work environments • work-related counselling • career advice and redirection • re-skilling or retraining • the supply of ergonomic equipment • other types of programs which we approve from time to time. <p>However, we will not pay this benefit where the relevant program:</p> <ul style="list-style-type: none"> • Involves 'treatment' as defined by the Life Insurance and Health Insurance Acts • Provides ongoing services that do not have the specific and stated objective of leading to an increase in function • Does not have the primary purpose of returning you to paid employment • Does not have goals incorporated into the plan that can be measured; or • Is of a type ordinarily engaged in for general health and wellbeing. <p>We recommend you seek our approval of the program prior to your participation otherwise there is the risk that you will not receive this benefit. We won't unreasonably delay letting you know whether or not we approve the program for the purpose of this benefit.</p>
Enhancement	Information has been disclosed of what rehabilitation programs we will pay. Clarification has been added on the approver of the rehabilitation.	

Change	Prior to change	After change
Income Protection Plans, Superannuation Income Protection Plans		
Benefit Period	<p>Benefit Period</p> <p>2 Years⁵ 5 Years⁵ To Age 65 To Age 70 2 Year Benefit to Age 70</p> <ol style="list-style-type: none"> 1. If you are Occupation Category E, Income Protection CORE, Advantage Optional and PLUS Optional are not available for any of the Benefit Period options. 2. Agreed Value Income Protection insurance cover is only available if the Policy is replacing an existing Priority Protection Agreed Value Income Protection insurance cover from AIA Australia and the cancel and replace is being performed to facilitate a change of ownership or correct an administrative error affecting the existing policy. Agreed Value Income Protection insurance cover is not available for new business policies or when an existing Agreed Value Income Protection insurance cover with AIA Australia is being cancelled and replaced for any other reason than stated above. Neither Agreed Value nor Extended Indemnity cover are available under Income Protection CORE. 3. If you are Occupation Category D or E, Agreed Value is not available. 4. To Age 70 Benefit Period is available under Advantage Optional and PLUS Optional cover, however the enhanced benefits related to Advantage Optional and PLUS Optional will cease at the Policy Anniversary prior to your 65th birthday. 5. For 2 and 5 year benefit periods, benefit payments will cease on the earlier of the end of the 2 or 5 year benefit payment period or the anniversary of the policy commencement date prior to the life Insured's 65th birthday. 	<p>Benefit Period</p> <p>2 Years⁵ 5 Years⁵ To Age 65⁶ To Age 70⁶ 2 Year Benefit to Age 70⁶</p> <ol style="list-style-type: none"> 1. If you are Occupation Category E, Income Protection CORE, Advantage Optional and PLUS Optional are not available for any of the Benefit Period options. 2. Agreed Value Income Protection insurance cover is only available if the Policy is replacing an existing Priority Protection Agreed Value Income Protection insurance cover from AIA Australia and the cancel and replace is being performed to facilitate a change of ownership or correct an administrative error affecting the existing policy. Agreed Value Income Protection insurance cover is not available for new business policies or when an existing Agreed Value Income Protection insurance cover with AIA Australia is being cancelled and replaced for any other reason than stated above. Neither Agreed Value nor Extended Indemnity cover are available under Income Protection CORE. 3. If you are Occupation Category D or E, Agreed Value is not available. 4. To Age 70 Benefit Period is available under Advantage Optional and PLUS Optional cover, however the enhanced benefits related to Advantage Optional and PLUS Optional will cease at the Policy Anniversary prior to your 65th birthday. 5. For 2 and 5 year benefit periods, benefit payments will cease on the earlier of the end of the 2 or 5 year benefit payment period or the anniversary of the policy commencement date prior to the life Insured's 65th birthday. 6. All references to benefit periods "To age 65", "To age 70" and "2 Year Benefit to Age 70" in this PDS are defined as covering the Life Insured up to the Policy Anniversary prior to their 65th and 70th birthdays respectively.
Enhancement	The 6th footnote has been added for clarification.	
Instances of 'reasonably' under Partial Disablement (Complimentary Income Protection CORE Extras), Partial Disablement (Income Protection CORE) and Partial Disablement – Income Protection Capability Clause	Your capability (having regard to your Injury or Sickness) and what you could reasonably be expected to earn if you were working to the extent of your capability will be determined reasonably by taking into account available medical evidence (including the opinion of your Medical Practitioner) and any other relevant considerations directly related to your medical condition (including information provided by you).	Your capability (having regard to your Injury or Sickness) and what you could reasonably be expected to earn if you were working to the extent of your capability will be determined by taking into account available medical evidence (including the opinion of your Medical Practitioner) and any other relevant considerations directly related to your medical condition (including information provided by you).
Enhancement	The wordings 'will be determined reasonably by' have been replaced by 'will be determined by'.	

Change	Prior to change	After change
Business Expenses Plan		
Partial Disablement under Business Expense	<p>Partial Disablement benefit amount</p> <p>The benefit is calculated on a daily basis and will be paid monthly in arrears.</p> <p>It will be the lesser of the:</p> <ul style="list-style-type: none"> • Business Expenses Insured Monthly Benefit as amended in accordance with policy terms, and • your share of the business expenses actually incurred which relate to the period you are Partially Disabled, less <ul style="list-style-type: none"> - any such expense that have been reimbursed, and - your share of the business turnover for that period. <p>Business turnover for a period will be the gross income of the business for that period.</p> <p>Your share of business expenses actually incurred or of business turnover will be determined based on the reasonable review of relevant financial information about your business that you are required to provide to us.</p> <p>When you are Partially Disabled and not working, 'business turnover' will be reasonably determined by taking into consideration the opinion of your Medical Practitioner and Medical Practitioners reasonably nominated by us.</p> <p>Payment of the Partial Disablement benefit starts to accrue from the day after:</p> <ul style="list-style-type: none"> • you are no longer Totally Disabled, or • the end of the Waiting Period <p>whichever is the latter, and will stop,</p> <ul style="list-style-type: none"> • at the end of the Benefit Period, • on your passing away, or • on your recovery, <p>whichever occurs first.</p>	<p>Partial Disablement benefit amount</p> <p>The benefit is calculated on a daily basis and will be paid monthly in arrears.</p> <p>It will be the lesser of the:</p> <ul style="list-style-type: none"> • Business Expenses Insured Monthly Benefit as amended in accordance with policy terms, and • your share of the business expenses actually incurred which relate to the period you are Partially Disabled, less <ul style="list-style-type: none"> - any such expense that have been reimbursed, and - your share of the business turnover for that period. <p>If you are Partially Disabled and are not working to the extent of your capability, or working in a reduced capacity which is less than your capability (having regard to your Injury or Sickness), then your benefit will be calculated based on what you could reasonably be expected to earn if you were working to the extent of your capability.</p> <p>Your capability (having regard to your Injury or Sickness) and what you could reasonably be expected to earn if you were working to the extent of your capability will be determined reasonably by taking into account available medical evidence (including the opinion of your Medical Practitioner) and any other relevant considerations directly related to your medical condition (including information provided by you).</p> <p>Business turnover for a period will be the gross income of the business for that period.</p> <p>Your share of business expenses actually incurred or of business turnover will be determined based on the reasonable review of relevant financial information about your business that you are required to provide to us.</p> <p>Payment of the Partial Disablement benefit starts to accrue from the day after:</p> <ul style="list-style-type: none"> • you are no longer Totally Disabled, or • the end of the Waiting Period <p>whichever is the latter, and will stop,</p> <ul style="list-style-type: none"> • at the end of the Benefit Period, • on your passing away, or • on your recovery, <p>whichever occurs first.</p>
Enhancement	Information regarding what the benefit calculation will be based on has been added.	

Change	Prior to change	After change
Business Expenses Plan		
Business Expenses not Covered under Business Expense	<p>Business Expenses not covered</p> <p>Business Expenses not covered under this benefit include the following:</p> <ul style="list-style-type: none"> • salaries and other related costs (e.g. payroll, tax, superannuation, FBT) for yourself and income-generating employees of the business other than a locum • salaries and other related costs for any of your relatives or the Policy Owner's relatives unless that person was employed for at least 60 consecutive days prior to your disablement • commissions or bonuses payable to yourself • repayments of principal of any loan or other finance agreement • any costs of a capital nature including the cost of any books, equipment, fittings, fixtures, furniture goods, implements, merchandise or stock • depreciation on real estate • losses on investments • taxes, other than in respect of related costs for non-income generating employees, and • any payment which we determine on a fair and reasonable basis not to be a regular operating expense. 	<p>Business Expenses not covered</p> <p>Business Expenses not covered under this benefit include the following:</p> <ul style="list-style-type: none"> • salaries and other related costs (e.g. payroll, tax, superannuation, FBT) for yourself and income-generating employees of the business other than a locum • salaries and other related costs for any of your relatives or the Policy Owner's relatives unless that person was employed for at least 60 consecutive days prior to your disablement • commissions or bonuses payable to yourself • repayments of principal of any loan or other finance agreement • any costs of a capital nature including the cost of any books, equipment, fittings, fixtures, furniture goods, implements, merchandise or stock • depreciation on real estate • losses on investments • taxes, other than in respect of related costs for non-income generating employees, and • any payment which is not a regular operating expense.
Enhancement	The wording 'we determine on a fair and reasonable basis' has been removed.	
All Plans		
Cancelling your Policy (other than during a cooling-off period)	<p>Cancelling your Policy (other than during a cooling-off period)</p> <p>You or the trustee, as applicable, can cancel your Policy or individual benefits within the Policy at any time. The Policy may also be cancelled by us in accordance with the provisions of the <i>Life Insurance Act 1995 (Cth)</i> or any relevant legislation. Any request to cancel the Policy must be made in writing and authorised by the Policy Owner. Cancellation requests can be sent to us by mail, fax or email or in any other manner permitted by law.</p>	<p>Cancelling your Policy (other than during a cooling-off period)</p> <p>You or the trustee at your direction, as applicable, can cancel your Policy or individual benefits within the Policy at any time. Any request to cancel the Policy must be made in writing and authorised by the Policy Owner. Cancellation requests can be sent to us by mail, fax or email or in any other manner permitted by law.</p>
Enhancement	The wording in relation to the <i>Life Insurance Act 1995 (Cth)</i> or any relevant legislation has been removed.	

Change	Prior to change	After change
Pre-existing Condition under General terms and conditions	<p>Pre-existing Condition</p> <p>Your Policy will not provide cover in respect of any Pre-existing Condition, except if:</p> <ul style="list-style-type: none"> • you disclosed the Pre-existing Condition to us before the commencement, reinstatement or increase of the applicable benefit and we did not limit or exclude cover provided under that benefit in respect of that Pre-existing Condition or apply a loading on the basis of it; or • you did not disclose the Pre-existing Condition to us before the commencement, reinstatement or increase of the applicable benefit in circumstances where cover provided under that benefit would not have been declined, limited or excluded by us, nor would we have applied a loading, on the basis of that Pre-existing Condition. <p>If, in relation to a health condition, you had suffered symptoms which, to a reasonable person, would have indicated the presence of that health condition or the need to seek medical treatment or investigation that would have revealed the presence of that health condition prior to the commencement, reinstatement or increase of the relevant benefit, that health condition will be a Pre-Existing Condition notwithstanding that you were not in fact aware of it.</p>	<p>Pre-existing Condition</p> <p>Your Policy will not provide cover in respect of any Pre-existing Condition, except if:</p> <ul style="list-style-type: none"> • you disclosed the Pre-existing Condition to us before the commencement, reinstatement or increase of the applicable benefit and we did not limit or exclude cover provided under that benefit in respect of that Pre-existing Condition; or • you did not disclose the Pre-existing Condition to us before the commencement, reinstatement or increase of the applicable benefit in circumstances where cover provided under that benefit would not have been declined, limited or excluded by us, nor would we have applied a loading, on the basis of that Pre-existing Condition. <p>Note: The Pre-Existing Condition exclusion above does not apply to the Complimentary Family Final Expenses benefit.</p>
Enhancement	<p>The wording of 'or apply a loading on the basis of it' has been removed. The wording of the last paragraph has been clarified to be consistent with information provided in the GETTING STARTED section of the PDS.</p>	
About this PDS under Important	<p>The information in this PDS is current as at the date of preparation of the PDS. Information contained in this PDS may change from time to time. The PDS may be updated or replaced at any time, and you can obtain a copy of a current PDS free of charge on request, by calling us on 1800 333 613. We or the trustee of the Scheme, as applicable, will advise you of material changes to the PDS or significant events as required by law. If there is a change to information in the PDS that is not materially adverse to you, that information will be updated online at aia.com.au. A paper or electronic copy of any updated information can be obtained free of charge on request, by calling us</p>	<p>The information in this PDS is current as at the date of preparation of the PDS. In accordance with the ASIC Corporations (Updated Product Disclosure Statements) Instrument 2016/1055, the information contained in this PDS may be updated or replaced in a manner that is not materially adverse. Such updated or replaced information will not amend the terms of Policies issued prior to the date of the update or replacement, unless they result in improvements which are automatically applied to the terms of existing Policies in accordance with the Policy terms and conditions (see "Policy upgrades" in Section 10.2 of this PDS). Where such a change is made, notice of the relevant change will be made available online at aia.com.au. A paper or electronic copy of any updated information can be obtained free of charge on request, by calling us on 1800 333 613.</p>
Enhancement	<p>Information in relation to the ASIC Corporations (Updated Product Disclosure Statements) Instrument 2016/1055 and additional clarification regarding updated or replaced information have been added. A phone number has also been added for convenience.</p>	

Change	Prior to change	After change
Instances of 'directly or indirectly'	<p>Exclusions – Complimentary Family Final Expenses</p> <p>No Complimentary Family Final Expenses benefit will be payable in relation to:</p> <ul style="list-style-type: none"> • an event directly or indirectly caused by intentional self-inflicted injury or any such attempt by the Child 	<p>Exclusions – Complimentary Family Final Expenses</p> <p>No Complimentary Family Final Expenses benefit will be payable in relation to:</p> <ul style="list-style-type: none"> • an event caused by intentional self-inflicted injury or any such attempt by the Child
	<p>Exclusions – Accidental Death</p> <p>A benefit is not payable for Accidental Death in the following circumstances:</p> <ul style="list-style-type: none"> • death occurring more than six months after the accident • death arising as a result of: <ul style="list-style-type: none"> - suicide - an event directly or indirectly caused by intentional self-inflicted injury or any such attempt by you - the direct or indirect effects of alcohol and/or drug abuse - war (whether formally declared or not), hostilities, civil commotion or insurrection - any form of aviation activity other than as a fare-paying passenger on a scheduled airline - participation in or training for professional sports or speed contests, or - engaging in any unlawful acts. 	<p>Exclusions – Accidental Death</p> <p>A benefit is not payable for Accidental Death in the following circumstances:</p> <ul style="list-style-type: none"> • death occurring more than six months after the accident • death arising as a result of: <ul style="list-style-type: none"> - suicide - an event caused by intentional self-inflicted injury or any such attempt by you - the direct or indirect effects of alcohol and/or drug abuse - war (whether formally declared or not), hostilities, civil commotion or insurrection - any form of aviation activity other than as a fare-paying passenger on a scheduled airline - participation in or training for professional sports or speed contests, or - engaging in any unlawful acts.
	<p>Exclusions – Total and Permanent Disablement and Accidental Total and Permanent Disablement</p> <p>A benefit is not payable for TPD or Accidental TPD in relation to any event or disablement which is directly or indirectly caused by intentional self-inflicted injury or any such attempt by you.</p>	<p>Exclusions – Total and Permanent Disablement and Accidental Total and Permanent Disablement</p> <p>A benefit is not payable for TPD or Accidental TPD in relation to any event or disablement which is caused by intentional self-inflicted injury or any such attempt by you.</p>
	<p>Exclusions – Universal Total and Permanent Disablement</p> <p>A benefit is not payable for Universal TPD in relation to any event or disablement which is directly or indirectly caused by intentional self-inflicted injury or any such attempt by you.</p>	<p>Exclusions – Universal Total and Permanent Disablement</p> <p>A benefit is not payable for Universal TPD in relation to any event or disablement which is caused by intentional self-inflicted injury or any such attempt by you.</p>

Change**Prior to change****After change****Exclusions – Crisis Recovery**

No Crisis Recovery benefit payment will be made in relation to:

- death from suicide in the first 13 months from the date this benefit commenced, was reinstated or increased (but only in relation to the increased amount; Crisis Recovery Stand Alone only)*
- any Crisis Event or disablement, directly or indirectly caused by intentional self-inflicted injury or any such attempt by you,

or

- an event directly or indirectly caused by intentional self-inflicted injury or any such attempt by you.

*This exclusion will be waived in respect of any Death benefit under the Policy provided the Policy is replacing the death benefit from us or a previous insurer and the full suicide exclusion period under the in force policy to be replaced has elapsed. The waiver only applies to the amount of the death benefit that has been replaced by the Policy.

*This exclusion will be waived in respect of any Death benefit under the Policy provided the Policy is replacing the death benefit from us or a previous insurer and the full suicide exclusion period under the in force policy to be replaced has elapsed. The waiver only applies to the amount of the death benefit that has been replaced by the Policy.

Limitations – Needlestick Injury benefit under Income Protection

- Infection in any other manner, caused directly or indirectly including by an intentional self-inflicted act, sexual activity or recreational intravenous drug use is specifically excluded.

Limitations – Needlestick under Complimentary Income Protection CORE Extras

- Infection in any other manner, caused directly or indirectly including by an intentional self-inflicted act, sexual activity or recreational intravenous drug use is specifically excluded.

Limitations – Double Total and Permanent Disablement

The Double TPD benefit is not payable if:

- a claim for Terminal Illness is in progress or has previously been paid by us or any other insurer, or
- you pass away within 14 days from the date you suffered the Injury or Sickness which directly or indirectly caused your Total and Permanent Disablement.

After the Double TPD benefit becomes payable, Benefit Indexation does not apply to the Life Cover Sum Insured. You also cannot exercise Guaranteed Future Insurability to increase the Life Cover Sum Insured due to Personal or Business Events.

Exclusions – Double Total and Permanent Disablement

No Double TPD benefit payment will be made in relation to any event or disablement which is directly or indirectly caused by intentional self-inflicted injury or any such attempt by you.

Exclusions – Crisis Recovery

No Crisis Recovery benefit payment will be made in relation to:

- death from suicide in the first 13 months from the date this benefit commenced, was reinstated or increased (but only in relation to the increased amount; Crisis Recovery Stand Alone only)*
- any Crisis Event or disablement, caused by intentional self-inflicted injury or any such attempt by you, or
- an event caused by intentional self-inflicted injury or any such attempt by you.

*This exclusion will be waived in respect of any Death benefit under the Policy provided the Policy is replacing the death benefit from us or a previous insurer and the full suicide exclusion period under the in force policy to be replaced has elapsed. The waiver only applies to the amount of the death benefit that has been replaced by the Policy.

*This exclusion will be waived in respect of any Death benefit under the Policy provided the Policy is replacing the death benefit from us or a previous insurer and the full suicide exclusion period under the in force policy to be replaced has elapsed. The waiver only applies to the amount of the death benefit that has been replaced by the Policy.

Limitations – Needlestick Injury benefit under Income Protection

- Infection in any other manner, caused including by an intentional self-inflicted act, sexual activity or recreational intravenous drug use is specifically excluded.

Limitations – Needlestick under Complimentary Income Protection CORE Extras

- Infection in any other manner, caused including by an intentional self-inflicted act, sexual activity or recreational intravenous drug use is specifically excluded.

Limitations – Double Total and Permanent Disablement

The Double TPD benefit is not payable if:

- a claim for Terminal Illness is in progress or has previously been paid by us or any other insurer, or
- you pass away within 14 days from the date you suffered the Injury or Sickness which caused your Total and Permanent Disablement.

After the Double TPD benefit becomes payable, Benefit Indexation does not apply to the Life Cover Sum Insured. You also cannot exercise Guaranteed Future Insurability to increase the Life Cover Sum Insured due to Personal or Business Events.

Exclusions – Double Total and Permanent Disablement

No Double TPD benefit payment will be made in relation to any event or disablement which is caused by intentional self-inflicted injury or any such attempt by you.

Change	Prior to change	After change
	<p>Limitations – Double Universal Total and Permanent Disablement</p> <p>The Double Universal TPD benefit is not payable if:</p> <ul style="list-style-type: none"> • a claim for Terminal Illness is in progress or has previously been paid by us or any other insurer, or • you pass away within 14 days from the date you suffered the Injury or Sickness which directly or indirectly caused your Total and Permanent Disablement (Universal). <p>After the Double Universal TPD benefit becomes payable, Benefit Indexation does not apply to the linked Life Cover Sum Insured. You also cannot exercise Guaranteed Future Insurability and increase the Life Cover Sum Insured due to Personal or Business Events.</p>	<p>Limitations – Double Universal Total and Permanent Disablement</p> <p>The Double Universal TPD benefit is not payable if:</p> <ul style="list-style-type: none"> • a claim for Terminal Illness is in progress or has previously been paid by us or any other insurer, or • you pass away within 14 days from the date you suffered the Injury or Sickness which caused your Total and Permanent Disablement (Universal). <p>After the Double Universal TPD benefit becomes payable, Benefit Indexation does not apply to the linked Life Cover Sum Insured. You also cannot exercise Guaranteed Future Insurability and increase the Life Cover Sum Insured due to Personal or Business Events.</p>
	<p>Exclusions – Double Universal Total and Permanent Disablement</p> <p>No Double Universal TPD benefit payment will be made in relation to any event or disablement which is directly or indirectly caused by intentional self-inflicted injury or any such attempt by you.</p>	<p>Exclusions – Double Universal Total and Permanent Disablement</p> <p>No Double Universal TPD benefit payment will be made in relation to any event or disablement which is caused by intentional self-inflicted injury or any such attempt by you.</p>
	<p>Exclusions – Waiver of Premium</p> <p>Waiver of Premium will not apply in relation to an event or disablement that is directly or indirectly caused by intentional self-inflicted injury or any such attempt by you.</p>	<p>Exclusions – Waiver of Premium</p> <p>Waiver of Premium will not apply in relation to an event or disablement that is caused by intentional self-inflicted injury or any such attempt by you.</p>
	<p>Exclusions – Crisis Extension</p> <p>No Crisis Extension benefit payment will be made in relation to:</p> <ul style="list-style-type: none"> • any Crisis Extension Event or disablement directly or indirectly caused by intentional self-inflicted injury or any such attempt by you, or • an event directly or indirectly caused by intentional self-inflicted injury or any such attempt by you. 	<p>Exclusions – Crisis Extension</p> <p>No Crisis Extension benefit payment will be made in relation to:</p> <ul style="list-style-type: none"> • any Crisis Extension Event or disablement caused by intentional self-inflicted injury or any such attempt by you, or • an event directly or indirectly caused by intentional self-inflicted injury or any such attempt by you.
	<p>Survival period – Double Crisis Recovery</p> <p>You must survive for a period of 14 days from the date of suffering the Injury or Sickness that directly or indirectly caused your Crisis Event.</p>	<p>Survival period – Double Crisis Recovery</p> <p>You must survive for a period of 14 days from the date of suffering the Injury or Sickness that caused your Crisis Event.</p>
	<p>Limitations – Double Crisis Recovery</p> <p>A Double Crisis Recovery benefit is not payable if:</p> <ul style="list-style-type: none"> • a claim for Terminal Illness is in progress or has previously been paid by us or any other insurer, and • you pass away within 14 days from the date you suffered the Injury or Sickness which directly or indirectly caused your Crisis Event. <p>...</p>	<p>Limitations – Double Crisis Recovery</p> <p>A Double Crisis Recovery benefit is not payable if:</p> <ul style="list-style-type: none"> • a claim for Terminal Illness is in progress or has previously been paid by us or any other insurer, and • you pass away within 14 days from the date you suffered the Injury or Sickness which caused your Crisis Event. <p>...</p>
	<p>Exclusions – Double Crisis Recovery</p> <p>No Double Crisis Recovery benefit payment will be made in relation to:</p> <ul style="list-style-type: none"> • any Crisis Event or disablement, directly or indirectly caused by intentional self-inflicted injury or any such attempt by you, <p>or</p> <ul style="list-style-type: none"> • an event directly or indirectly caused by intentional self-inflicted injury or any such attempt by you. 	<p>Exclusions – Double Crisis Recovery</p> <p>No Double Crisis Recovery benefit payment will be made in relation to:</p> <ul style="list-style-type: none"> • any Crisis Event or disablement, caused by intentional self-inflicted injury or any such attempt by you, or • an event directly or indirectly caused by intentional self-inflicted injury or any such attempt by you.

Change**Prior to change****After change****Exclusions – Family Protection**

No Family Protection benefit will be payable in relation to:

- any disease, sickness or incapacity other than a Crisis Event that occurs during the period the Family Protection Rider Benefit remains in force
- death from suicide in the first 13 months from the commencement or re-instatement of the benefit*
- an event intentionally caused by the Insured Child's parent, guardian or relative, or someone who lives with or supervises the Insured Child, or
- any Crisis Event or disablement, directly or indirectly caused by intentional self-inflicted injury or any such attempt by you or the Insured Child.

...

Exclusions – Needlestick Injury

No Needlestick Injury benefit will be payable in relation to:

- an event directly or indirectly caused by intentional self-inflicted injury or any such attempt by you
- infection in any other manner, caused directly or indirectly, including by an intentional self-inflicted act, sexual activity or recreational intravenous drug use
- where a cure for HIV, AIDS, Hepatitis B or Hepatitis C has become available to the Life Insured prior to the accident giving rise to a claim, or
- if you acquire HIV, AIDS, Hepatitis B or Hepatitis C from activities other than from performing the duties of your normal occupation.

Exclusions – School Fees Protector

No School Fees Protector benefit will be payable in relation to:

- death from suicide in the first 13 months from commencement or re-instatement of the benefit*
- any Crisis Event or disablement, directly or indirectly caused by intentional self-inflicted injury or any such attempt by you, or
- an event directly or indirectly caused by intentional self-inflicted injury or any such attempt by you.

*This exclusion will be waived in respect of any Life Cover under the Policy provided the Policy is replacing life cover from us or a previous insurer and the full suicide exclusion period under the in force policy to be replaced has elapsed. The waiver only applies to the amount of life cover that has been replaced by the Policy.

Exclusions – Income Protection Lump Sum

No Income Protection Lump Sum Benefit payment will be made in relation to:

- disablement due to intentional self-inflicted injury or any such attempt by you
- disablement due to you engaging in or taking part in service in the armed forces of any country
- normal pregnancy, uncomplicated childbirth or miscarriage, or
- an event directly or indirectly caused by intentional self-inflicted injury or any such attempt by you.

Exclusions – Family Protection

No Family Protection benefit will be payable in relation to:

- any disease, sickness or incapacity other than a Crisis Event that occurs during the period the Family Protection Rider Benefit remains in force
- death from suicide in the first 13 months from the commencement or re-instatement of the benefit*
- an event intentionally caused by the Insured Child's parent, guardian or relative, or someone who lives with or supervises the Insured Child, or
- any Crisis Event or disablement, caused by intentional self-inflicted injury or any such attempt by you or the Insured Child.

...

Exclusions – Needlestick Injury

No Needlestick Injury benefit will be payable in relation to:

- an event caused by intentional self-inflicted injury or any such attempt by you
- infection caused by an intentional self-inflicted act, sexual activity or recreational intravenous drug use
- where a cure for HIV, AIDS, Hepatitis B or Hepatitis C has become available to the Life Insured prior to the accident giving rise to a claim, or
- if you acquire HIV, AIDS, Hepatitis B or Hepatitis C from activities other than from performing the duties of your normal occupation.

Exclusions – School Fees Protector

No School Fees Protector benefit will be payable in relation to:

- death from suicide in the first 13 months from commencement or re-instatement of the benefit*
- any Crisis Event or disablement, caused by intentional self-inflicted injury or any such attempt by you, or
- an event caused by intentional self-inflicted injury or any such attempt by you.

*This exclusion will be waived in respect of any Life Cover under the Policy provided the Policy is replacing life cover from us or a previous insurer and the full suicide exclusion period under the in force policy to be replaced has elapsed. The waiver only applies to the amount of life cover that has been replaced by the Policy.

Exclusions – Income Protection Lump Sum

No Income Protection Lump Sum Benefit payment will be made in relation to:

- disablement due to intentional self-inflicted injury or any such attempt by you
- disablement due to you engaging in or taking part in service in the armed forces of any country
- normal pregnancy, uncomplicated childbirth or miscarriage, or
- an event caused by intentional self-inflicted injury or any such attempt by you.

Change	Prior to change	After change
	<p>Exclusions – Repayment Relief</p> <p>No Repayment Relief benefit payment will be made in relation to:</p> <ul style="list-style-type: none"> Any period of Involuntary Unemployment commencing within 180 days of policy commencement, you suffering unemployment, directly or indirectly, because: <ul style="list-style-type: none"> a period of casual, seasonal or temporary work ends, a fixed-term contract or specified period of work ends, of an unsuccessful probationary period or dismissal due to unsatisfactory performance, of deliberate or serious misconduct, of incarceration, of a loss of licence to perform some or all of the duties of your occupation, or you resign, accept voluntary redundancy, retire early or abandon your employment. Involuntary Unemployment which occurs while you are working outside of Australia, death from suicide in the first 13 months from the date this benefit commenced, was reinstated or increased (but only in relation to the increased amount), or an event directly or indirectly caused by intentional self-inflicted injury or any such attempt by you. 	<p>Exclusions – Repayment Relief</p> <p>No Repayment Relief benefit payment will be made in relation to:</p> <ul style="list-style-type: none"> Any period of Involuntary Unemployment commencing within 180 days of policy commencement, you suffering unemployment, because: <ul style="list-style-type: none"> a period of casual, seasonal or temporary work ends, a fixed-term contract or specified period of work ends, of an unsuccessful probationary period or dismissal due to unsatisfactory performance, of deliberate or serious misconduct, of incarceration, of a loss of licence to perform some or all of the duties of your occupation, or you resign, accept voluntary redundancy, retire early or abandon your employment. Involuntary Unemployment which occurs while you are working outside of Australia, death from suicide in the first 13 months from the date this benefit commenced, was reinstated or increased (but only in relation to the increased amount), or an event caused by intentional self-inflicted injury or any such attempt by you.

Enhancement The wording 'directly or indirectly' has been removed.

Interim Cover

This cover does not apply and Exclusions under Complimentary Interim Accidental Crisis Recovery Cover

This cover does not apply:

- to a claim resulting directly or indirectly from a health condition that existed prior to the date we received your completed application
- to an Accidental Injury that occurs after this cover ends
- if you pass away within 14 days of the Accidental Injury
- if an application for a similar type of policy with any insurer has been declined, cancelled or withdrawn, or
- if the application is one that we would not normally accept under our standard assessment guidelines and practices.

Exclusions

This complimentary interim cover does not cover Accidental Injury caused directly or indirectly by any of the following:

- war (whether declared or not), invasion or civil war
- intentional self-inflicted injury or any such attempt by you or the proposer
- suicide
- your participation in any occupation, sport or pastime that we would not normally cover on standard terms
- an injury or sickness that was not disclosed to us with the application
- football injuries (all codes), or
- the direct or indirect effects of alcohol and/or drug abuse.

This cover does not apply:

- to a claim resulting directly or indirectly from a health condition that existed prior to the date we received your completed application
- to an Accidental Injury that occurs after this cover ends, or
- if you pass away within 14 days of the Accidental Injury.

Exclusions

This complimentary interim cover does not cover Accidental Injury caused directly or indirectly by any of the following:

- war (whether declared or not), invasion or civil war
- intentional self-inflicted injury or any such attempt by you or the proposer
- suicide
- your participation in any occupation, sport or pastime that we would not normally cover in our occupation and pastime guidelines*
- an injury or sickness that was not disclosed to us with the application
- any injuries due to your participation in any organised football (all codes), or
- the direct or indirect effects of alcohol and/or drug abuse.

*Speak with your financial adviser for more information.

Change	Prior to change	After change
Exclusions Under Complimentary Interim Accidental Income Protection Cover	<p>Exclusions</p> <p>This complimentary interim cover does not cover Total Disablement caused directly or indirectly by any of the following:</p> <ul style="list-style-type: none"> • war (whether declared or not), invasion or civil war • intentional self-inflicted injury or any such attempt by you or the proposer • your participation in any occupation, sport or pastime that we would not normally cover on standard terms • an injury or sickness that was not disclosed to us with the application • football injuries (all codes) • normal pregnancy, uncomplicated childbirth or miscarriage • disease or illness • AIDS, AIDS-related conditions or HIV, or • the direct or indirect effects of alcohol and/or drug abuse. 	<p>Exclusions</p> <p>This complimentary interim cover does not cover Total Disablement caused directly or indirectly by any of the following:</p> <ul style="list-style-type: none"> • war (whether declared or not), invasion or civil war • intentional self-inflicted injury or any such attempt by you or the proposer • your participation in any occupation, sport or pastime that we would not normally cover in our occupation and pastime guidelines* • an injury or sickness that was not disclosed to us with the application • any injuries due to your participation in any organised football (all codes) • normal pregnancy, uncomplicated childbirth or miscarriage • disease or illness • AIDS, AIDS-related conditions or HIV, or • the direct or indirect effects of alcohol and/or drug abuse. <p>*Speak with your financial adviser for more information.</p>
Enhancement	The wording 'on standard terms' has been replaced by 'in our occupation and pastime guidelines'.	

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