Claiming a total and permanent disablement benefit



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Information for REI Super Issued by REI Superannuation Fund Pty Ltd ABN $68\,056\,044\,770$

What is Total and Permanent Disablement cover (TPD)

A TPD benefit is designed to provide a lump sum payout if you become totally and permanently disabled. This amount is to assist you with financial support, when you can no longer work, due to injury or illness, and may help cover costs of rehabilitation.

The amount of your lump sum payout will depend on how much cover you have and on your eligibility. The benefit payable is made up of both an insured component and your Fund account balance.

Our current definitions can be found in our Insurance guide available on our website. Our dedicated claims manager can assist with past definitions.

Do you have insurance cover?

Not every member of REI Super has TPD insurance. You can check if you have insurance cover by logging into your online account at reisuper.com.au.

Having insurance cover doesn't necessarily mean you'll receive a payment – your application will help us determine if you're eligible to receive a TPD payment. If you are not eligible to claim for TPD, we will explain why.

If you do not have TPD insurance through REI Super but you're no longer able to work because of injury or illness, you may still be able to apply to have your account balance paid to you on the grounds of 'Permanent Incapacity'. This is a separate process from applying for TPD. Please refer to the Claiming permanent incapacity benefit information sheet at reisuper.com.au

Your Claims Manager

At REI Super, we know that making an insurance claim can be stressful, that's why we have a dedicated claims manager to provide the assistance and support you need to navigate through the claims process.

How long does the claims process take?

There are several steps involved in assessing a claim. We and the Insurer aim to finalise most claims within six months or sooner and to reasonably attempt to keep you updated every 20 business days as to the current status of your claim - until a decision has been made. The actual length of time necessary though, depends on the availability of information required from you, your employer, and your doctors (including specialists), to adequately assess your claim.

Is there a waiting period?

The waiting period for TPD is the amount of time you may need to prove you have been absent from work as a result of your claimed disability. The current policy stipulates a TPD waiting period of 6 months.

Need financial advice?

REI Super offers qualified financial advice limited to your REI Super account at no cost. To make an appointment, call us on **1300 13 44 33**.

How to apply for a TPD payment

The steps below outline what's involved in submitting, assessing, and processing your TPD claim.

1. Contact us!

If you believe you could be eligible to claim a TPD benefit, call our helpline on **1300 13 44 33** to commence your claim. We will ask you a few questions to assist in determining the correct benefit you may be entitle to. When you call, please have the following information on hand:

- Your REI Super member number,
- Date of the last day you were at work,
- Details of your employer(s) you were employed with at date of ceasing work; and
- The date you were considered totally and permanently disable by your doctor.

You will be assigned a claims manager who will review the information held and provided by you, to confirm your eligibility to claim. This includes confirming you have cover in place and that your premiums were paid. They will send you some forms to complete. A copy of this Information Sheet and other summary material of the claims process will also be sent to you.

Various timeframes apply to this part of the claims process, including 5 business days for sending forms, taking telephone appointment information and 10 business days for initial eligibility to claim assessment with acknowledgement of that to you.

2. Documents

The following documents will be sent to you for completion:

- Initial Information Statement to be completed by you,
- Employer Statement to be completed by your employer at the time you ceased work,
- Medical Statement to be completed by your treating doctor (GP) and specialist(s). Copies of relevant medical reports from your GP and specialists and test results that support your injury or illness should be attached to the completed report. Any costs associated with completing this form will need to be covered by you; and









 Certified proof of identity - For security purposes, certified proof of your identity such as your driver's licence or passport is required. A certified copy is simply a photocopy of an original document that has been sighted, signed and stamped as being a 'certified true copy' by an authorised person. Photocopies of certified documents cannot be accepted. More information on how to certify documents can be found on our website.

3. Assessment

Once we receive the documents, we will lodge your claim with our Insurer.

The Insurer will use the information you provide when making its assessment. They may also request additional information for you, from yourself, your employer, or doctors. The Insurer will pay for any additional medical reports it requests and any examinations it arranges for you to attend.

They will assess your claim against the terms of the Group Life policy held by REI Super's Trustee with the Insurer, at the claimed date of your injury or illness resulting in TPD, including having regard to any exclusions and pre-existing conditions you may have.

4. Decision

Once the Insurer has finalised their assessment, they will advise us if your claim has been accepted or declined.

If your claim is approved by the Insurer, we will complete an independent review of the Insurer's decision and come to our own independent conclusion in respect of your claim to a TPD benefit. We'll write to you with the outcome of our own decision and our reason(s) and if necessary, outlining your rights to a further review.

If your claim is declined by the Insurer, we'll complete an independent review of the Insurer's decision and come to our own independent conclusion in respect of your claim for a TPD benefit. We'll write to you with the outcome of our review and conclusion, explaining the reason(s) for the decision and outlining your rights to a further review. 15 business days is the timeframe applicable to issue of correspondence at this point.

Should this occur and/or if you disagree with the decision, you can lodge a complaint with the Trustee. You will have the opportunity to provide any further evidence to support your claim. All TPD complaints are treated as formal complaints and are independently assessed by both the Insurer and Trustee. Unless your matter has complications, the Trustee and Insurer aim to complete this part of the claims process within 45 days of receipt of your complaint.

Should you not agree with the Insurer and Trustee's final decision on your complaint, an external dispute resolution process exists in the form of the Australian Financial Complaints Authority. Please refer the Trustee's Inquiries and Complaints Policy at **www.reisuper.com.au** for contact details to download a copy or call our helpline on **1300 13 44 33** to be sent a copy.

5. Payment

If our Insurer approves the insurance component of your claim, the Trustee's Administrator will pay the insurance payment into your REI Super account to form a final total benefit amount. This total benefit amount may be paid to you once the Trustee approves the claim. The Trustee's Administrator will also provide you with payment options and seek your instructions.

The benefit can be paid to you as:

- partial lump sum withdrawals from your super account when you need the funds, or
- as an income stream (pension) to provide you with regular income payments, or
- a full benefit payment to you via EFT.

Tax may be payable on your benefit depending on your personal circumstances. Before deciding on method of payment, you may wish to seek independent financial advice.

Roles and responsibilities

When it comes to applying for a total and permanent disability benefit payment, several parties have a role to play in the claim process.

Party	Responsibilities
You	Complete any documentation sent to you. Provide any information requested by your claims manager, Insurer or the Administrator.
Your Claims Manager	The primary liaison and co-ordinator between the Trustee office, the Insurer and the Administrator regarding your claim. Explain the application process to you and guide you through your claim. Respond to any queries you might have. Keep you updated on the progress of your claim.
The Insurer	Review your documentation and see if more information is needed. Assess your eligibility to claim and make the decision on your application.
Us	Oversee the claim process. Oversee the conduct of the Insurer and other service providers. Assess your eligibility for an IP benefit. Complete an independent review and come to a decision on any complaint received.

Need help?

