

Income Protection (IP) Benefits

How to make a claim

Preparation

When you advise Sunsuper that you wish to make an Income Protection (IP) claim we'll:

- send you the IP claim forms for completion, and
- advise you of the documents and information you need to provide for the claim to be assessed, including:
 - a *Treating doctor's report* describing the nature and extent of your injury or illness,
 - an Employer statement to be completed by your employer
 - certified copy of your ID as proof of your identity, for example a drivers license or passport,
 - a Centrelink authority (where you are in receipt of Centrelink benefits),
 - an Authority to release personal Medicare and Pharmaceutical Benefits Scheme Claims information to a third party (where your insurance cover was underwritten),
 - a Tax file number declaration,
 - a *Income protection claim - bank account nomination* form, and
 - any other medical evidence that may support your application.

Please note that you are required to meet the cost of providing this evidence.

Lodgement

Complete and sign the IP claim forms, attach all the documents requested and return everything to Sunsuper. It saves a lot of time if you provide all the information and fill the forms in correctly the first time. If we have to ask for the information again it will delay your claim.

Co-ordination

Your claim will be assigned to a dedicated Claims Officer. The Claims Officer may be a Sunsuper Claims Officer or a Claims Officer from one of our insurers, some of whom will work within Sunsuper premises in order to provide efficient service to you.

Your Claims Officer will check your application and request any further information required to begin the assessment of your claim.

Once all initial requirements have been received the assessment of your claim will begin.

Assessment

The insurer will use the information you, your employer and your treating doctor provide when making its assessment.

They may also:

- ask for additional reports from your doctor/s
- ask you to provide more information

Call 13 11 84 (+61 7 3121 0700 when overseas) | Web sunsuper.com.au | Mail GPO Box 2924 Brisbane Qld 4001 | Fax 07 3016 7722

Disclaimer and disclosure This fact sheet has been prepared and issued by Sunsuper Pty Ltd, referred to as 'Sunsuper'. While it has been prepared with all reasonable care, no responsibility or liability is accepted for any errors, omissions or misstatements however caused. All forecasts and estimates are based on assumptions. If those assumptions change, our forecasts and estimates may also change.

This fact sheet contains general information only and does not take into account the objectives, financial situation or needs of any particular individual. You need to apply the concepts to your own situation and consider the appropriateness of any general advice before making an investment decision. You should obtain and consider the Product Disclosure Statement (PDS) before making any decision to acquire the product. The PDS is available by calling 13 11 84 or visiting sunsuper.com.au. Contributions to superannuation are subject to the preservation rules.

We are committed to respecting your privacy. Our privacy policy sets out how we do this. If you would like a copy of Sunsuper's privacy policy, please call us on 13 11 84 or go to our website at sunsuper.com.au. If you do not want to receive this publication in the future, please let us know.

Sunsuper Pty Ltd
ABN 88 010 720 840
AFSL No. 228975
RSE Licence No. L0000291

Trustee and issuer of the
Sunsuper Superannuation Fund
ABN 98 503 137 921
SPIN SSR 0100 AU

- ask your employer for more information, and / or
- make an appointment for you to have a medical examination with an independent specialist/s.

The insurer will pay for any additional medical reports they request and any examinations they arrange for you to attend.

Approval

The insurer assesses your claim and decides if it will admit or decline your claim. If your claim is admitted, we will contact you to advise that your claim has been approved and arrange for payment directly to your bank account. A payment confirmation letter will also be sent to you.

Ongoing payment

If your claim is admitted and you remain unable to work, each month you will be asked to fill in a progress claim form, and arrange for your treating doctor to complete a medical attendant's statement form, so that the insurer can consider further payments. These forms will be sent to you after each payment and you will be requested to return them at least 10 working days before your next payment is due. This should ensure you receive your next payment on time, unless further medical evidence is required. Please note you are required to meet the cost for completion of these forms.

Your payments will cease:

- if you no longer satisfy the definition of Total Disability or Partial Disability, or
- when you have reached the end of the benefit payment period,
- when you have reached age 65, or
- on your death.

If your claim is declined

If your claim is declined by the insurer it generally means that the insurer doesn't regard you as being Totally Disabled or Partially Disabled according to the policy definition. All claims declined by the insurer are then referred to the Sunsuper Trustee for independent assessment. If the Sunsuper Trustee declines your claim and you disagree with the decision you may lodge a complaint in writing with Sunsuper. Your complaint will be investigated, and if the decision to decline your claim is confirmed by the Fund, you may ask the Superannuation Complaints Tribunal (SCT) whether you are eligible to submit a complaint. There are time limits on when you can make a complaint to the SCT. Call the SCT on **1300 780 808** for more information or visit their website www.sct.gov.au.

If you have any questions

All questions should be directed to your Claims Officer by calling the direct number listed on your original paperwork, or by calling our contact centre on **13 11 84**.