This is a fact sheet for AMP Flexible Super. The AMP Flexible Super fact sheets are important documents. You should read them with the product disclosure statement (PDS) (personal super and retirement account) to understand how AMP Flexible Super works.

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The information in this document forms part of the product disclosure statement for AMP Flexible Super dated 15 May 2020 (PDS). To understand how AMP Flexible Super works, read this fact sheet with the PDS and fact sheets.

Issued by N.M. Superannuation Proprietary Limited (NM Super) ABN 31 008 428 322, AFSL No. 234654, RSE Licence No. L0002523, the trustee of the Super Directions Fund ABN 78 421 957 449 and is referred to as NM Super, trustee, we, us, or our in this document. AMP Flexible Super is part of the Super Directions Fund. In this

Insurance cover through AMP Flexible Super is provided under an insurance policy issued by AMP Life Limited (AMP Life) ABN 84 079 300 379 to the Trustee.

Information in this document may change from time to time. We may update information which is not materially adverse to you and make it available at amp.com.au/pdsupdates. A paper copy of the update can also be obtained (at no charge) by calling us on 131 267 or from your financial adviser.

The information provided in this document is general information only and does not take into account your personal financial situation or needs. You should obtain financial advice tailored to your personal circumstances.

No other company in the AMP group of companies or any of the investment managers of the investment options:
– is responsible for any statements or representations made in this document
– guarantees the performance of NM Super’s obligations to members or assumes any liability to members in connection with AMP Flexible Super.

Except as expressly disclosed in the PDS or a fact sheet:
– investments in the investment options are not deposits or liabilities of NM Super, AMP Bank Limited ABN 15 081 596 009 (AMP Bank), any other member of the AMP group or any of the investment managers
– no person guarantees the performance of this super product or any of the investment options, any particular rate of return or the repayment of capital.

The trustee may enter into financial or other transactions with related bodies corporate in relation to AMP Flexible Super. That related body corporate may be entitled to earn fees, profits, reimbursements or expenses or other benefits in relation to any such appointment or transaction and to retain them for its own account.

AMP Flexible Super is managed and administered in accordance with the PDS and fact sheets. We may change the way AMP Flexible Super is managed and administered at any time with, in the case of an increase in fees, at least 30 days’ notice. Otherwise, notice will be provided before or as soon as practicable after the change occurs.

This offer is available only to persons receiving (including electronically) the PDS and fact sheets within Australia.
Insurance through super

Your super is a tax-effective way to provide cover for you, and those who are important to you.

Important changes to insurance through super

Changes to super laws have affected how insurance inside your super works. We are no longer able to provide automatic insurance cover when you join your super fund if you are under 25 years and/or have a super balance less than $6,000, or if you have an inactive account (no contribution or rollover for 16 months), unless; you elect to have insurance or, your employer sponsors 100% of your insurance premiums.

For information on insurance inside super and how it works visit amp.com.au/whyinsurance.

How to use this fact sheet

This fact sheet is for members who have transferred from Super Directions for Business Rollover Section, or from CustomSuper upon ceasing employment with your employer, and you:

1. were insured through either Simple Protection, Tailored Protection or Business Protection insurance in the CustomSuper product at the time your employment ceased, or
2. were insured through Super Directions for Business Rollover Section, and

If the statement you receive welcoming you to AMP Flexible Super shows you as holding Rollover Protection insurance, this fact sheet contains information about insurance and the terms and conditions that apply to you.

If the statement you receive welcoming you to AMP Flexible Super does not show you as holding Rollover Protection insurance, the fact sheet that applies to you is not this one, and you should refer to the AMP Flexible Super insurance fact sheet for personal super.

If you are unsure whether this document applies to you or you would like further information, please contact us on 131 267, email askamp@amp.com.au, or visit amp.com.au/flexiblesuper.

Personal Insurance

If you have Rollover Protection insurance cover you have full access to the insurance features in this fact sheet, and can apply for additional cover, change your existing cover, or remove a portion or all of your existing cover.

There are two types of personal insurance cover available through AMP Flexible Super - Rollover Protection:

- Death cover
- Total and Permanent Disablement cover

Note: Salary Continuance cover is not available for AMP Flexible Super - Rollover Protection. If you held this cover in your employer’s plan, it is cancelled once we have been notified you have ceased employment.

You can apply for Temporary Incapacity cover with an underwritten application through AMP Flexible Super’s Super Protection. However, you should be aware that you cannot hold both Rollover Protection (Death only or Death and TPD) cover and Super Protection (Temporary Incapacity) cover together.
Applying for Temporary Incapacity cover after you leave your employer

This means that once your Super Protection Temporary Incapacity cover is approved, you’ll need to cancel your Rollover Protection Death only or Death and TPD cover.

Note: If you wish to continue to hold Death only or Death and TPD cover with your Temporary Incapacity cover, you can apply for this Death only or Death and Permanent Incapacity cover with an underwritten application through AMP Flexible Super’s Super Protection.

To avoid a gap in your insurance cover you should only cancel your Rollover Protection cover when your application for Death, Permanent Incapacity and Temporary Incapacity cover is approved under AMP Flexible Super’s Super Protection. As always, if you have any questions about your insurance you can contact us.

Deciding how much cover you need

There are many factors affecting the level of cover you may need.

Ask yourself the following questions:

– If you were to become too sick or injured to work, how long could you keep your lifestyle and pay your bills?
– If you were to pass away, who would repay your debts? What sort of lifestyle would your beneficiaries/family have?

To help you consider your insurance needs AMP offers a number of online tools you can access at any time:

– AMP insurance calculator – this easy to use calculator can help you work out how much insurance you should have based on your commitments and expenses (visit amp.com.au/insuranceneeds).
– Insurance inside super – this web resource covers the main types of insurance in super and how they can help protect you and your family in times of trouble (visit amp.com.au/insuranceinsuper).
More about our insurance offer

When your cover starts

If you are eligible to maintain your insurance cover when you transferred from another product, your cover starts immediately. We will deduct the costs of your cover from the day the insurance started.

Your membership summary will give details of the level of any cover provided and the annual premium payable. Your annual statement will also show your current level of insurance cover.

Costs of your cover

The costs of your insurance cover is known as your insurance premium and depends on many factors. Insurance premiums (including any applicable stamp duty) are deducted on a monthly basis from your super account.

Factors that can affect the calculation of your insurance premium include:

– type of cover
– age
– gender
– smoking status
– amount of insurance cover
– occupation
– state of health
– waiting period and benefit period
– sports/recreational activities
– optional extras, and
– stamp duty.

Depending on your circumstances, each of these factors may affect the amount you need to pay.

We can change AMP Flexible Super premium rates at any time.

If we increase your premium, we will notify you at least 30 days in advance unless the increase is due to:

– age or CPI-based recalculations on 1 July each year
– you changing your insurance, or
– a stamp duty change or new government charge.

If we reduce premium rates (or increase discounts), we may keep the premium you pay the same by increasing your insured amount. We will write to you before we do this.

What impact does insurance have on your super

Where you have insurance cover through your superannuation account, it is important to be aware that any insurance premiums that are funded from your account will reduce your super balance over time. While insurance cover is an important benefit to many members, the trustee generally considers that where insurance premiums for default insurance cover exceed 1% of salary, this may inappropriately reduce (or erode) your super balance, although in some circumstances the trustee may consider an alternative benchmark as being more appropriate for specific groups of members. You should regularly review your insurance and consider whether the cost of that insurance is appropriate for you. When undertaking this review, you may determine that a benchmark cost other than 1% of salary is more appropriate for you. You should consider talking to a financial adviser to discuss your insurance needs and the best way to meet them.

You can log in to My AMP at any time to check your current arrangements and visit amp.com.au/insuranceinsidesuper to find out more about what insurance is right for you.
Our approach to claims

We recognise that your situation is unique. We will work with you transparently, fairly and with respect and empathy. Together we will select the best solution for you based on your situation, providing the right support and management at the right time.

We provide more than financial assistance. Wherever we can, we will help you return to work.

How to make a claim

We have a four step claims process.

**Step 1: Contact us**

You can contact our Claims team by calling 1300 366 214.

We will let you know what information you need to provide us with so that we can assess your claim. This will vary depending on the type of claim you are making and on your individual situation.

Informing us early about your illness or injury will help us process your claim more efficiently. If a delay affects our ability to assess a claim, we may reduce the benefit paid to take that into account.

**Step 2: Send us the claim requirements**

If you require any assistance in providing us with the claim requirements, please call us on the above number and our experienced claims staff will assist you.

Please send the claim requirements as soon as reasonably possible to:

AMP Limited
PO Box 300
PARRAMATTA NSW 2124

**Step 3: We will assess your claim**

On reviewing the claim requirements we may require additional medical or other information. We will pay the costs of obtaining this information. In all other cases, you must pay the costs of providing information in support of your claim.

Throughout this time, your dedicated claims assessor will keep in regular contact with you and inform you of the progress of your claim.

**Step 4: We will assist you with your claim payment and wherever we can, support you in returning to work**

If your claim is accepted, payment will be made as soon as possible.

**Please note:** If your claim is declined, you have the right to request written reasons which we are obliged to respond to within 28 days of receiving the request.

Claiming a TPD benefit and you die before the claim is accepted

If you die while your TPD claim is being considered, we will consider eligibility to claim under your death benefit instead. If a death benefit is paid, your TPD claim will be cancelled. AMP Life will not pay both the insured TPD benefit and the Death benefit. Only the higher benefit amount will be paid.
Duty of disclosure

Read this if you are applying for insurance as the policy owner, or if you will be an insured person under a policy owned by someone else.

What you need to tell us

When you apply for insurance, and up until the insurer accepts your application, you have a duty to tell us anything that you know, or could reasonably be expected to know, may affect the insurer’s decision to insure you and the terms of your insurance.

This includes answering all the questions in the application honestly, making sure you include all the information we ask for.

You have the same duty if anything changes, or you remember more information, while we’re processing your application.

If you want to change your insurance cover at any time, extend it or reinstate it, you’ll also have the same duty at that time to tell us anything that may affect the insurer’s decision to insure you and the terms of your insurance.

Where a policy owned by one person covers the life of another person, it’s important that the other person also gives us all the information that is required under the duty. If he or she doesn’t, then it can be treated as a failure by the owner of the policy to tell us something that the owner must tell us. Therefore you must give us all the required information - whether you’re the owner of the policy or a person insured under it.

If you don’t tell us something

If you don’t give all the required information, and the missing information would’ve affected the insurer’s decision to insure you or the terms of your insurance, the insurer may:

- treat the contract (or your cover) as if it never existed – the insurer can only do this within three years of your cover starting.
- reduce the amount you’ve been insured for – to reflect the premium you’ve been paying. There is a link between the premium you pay and your level of cover. If you fail to tell us something, your premiums may have been too low. The insurer may reduce the amount you’ve been insured for, taking into account the premium you would’ve had to pay if you’d told us everything you should’ve. For Death cover the insurer can only reduce the amount you’ve been insured for within three years of your cover starting.
- vary your cover – to take into account the information you didn’t tell us and put the insurer in the same position as it would’ve been if you’d told us. Variations could mean, for example, that waiting periods, exclusions or premiums may be different. The insurer can’t make variations to Death cover.

Your total insurance cover forms one insurance contract. If you don’t give us all the required information, the insurer may treat your different types of cover as separate contracts when it takes action to address this.

It’s fraudulent to deliberately leave out required information or give us incorrect information. In these situations the insurer may refuse to pay a claim and treat the contract (or your cover) as if it never existed.

What you don’t need to tell us

You don’t need to tell us anything:

- that reduces the insurer’s risk, or
- that’s common knowledge, or
- the insurer knows or should know as an insurer, or
- we’ve told you that you don’t need to tell us.

Worldwide cover

Worldwide cover is available 24 hours a day. You can have peace of mind with more effective all round protection. However, limitations may apply.

Repayment of benefits

If, for any reason, it is determined a benefit paid to you wasn’t actually payable under the terms of the insurance policy, all or part of the benefit must be repaid to the insurer.
Claims after your cover has ceased
If your cover has ceased and the insurer continues paying you a benefit, the insurance policy conditions which specifically relate to those claim payments will continue to apply until the insurer stops making claim payments.

Changes to member and other information
You must notify the insurer of any changes to your personal information or details while a member of the Fund. It is important the details the insurer has about you are kept up-to-date at all times.

Misstatement of age
If your age is misstated, the insurer reserves the right to adjust the premium or the benefit based on your correct age.

Currency
All Death and TPD claim payments are made in Australian dollars.
Insurance cover available

There are two types of insurance cover available to you through AMP Flexible Super Rollover Protection.

– Death cover
– Total and Permanent Disablement (TPD) cover

**Important information about Salary Continuance cover**
Salary Continuance cover is not available for AMP Flexible Super Rollover Protection. If you held this cover in your employer’s plan, it is cancelled once we have been notified you have ceased employment. If you wish to apply for Salary Continuance cover, you will need to apply for Super Protection cover. For further information, please refer to the AMP Flexible Super insurance fact sheet for personal super.

**Death cover**

This section gives you information about any eligible Death cover that may be transferred to your AMP Flexible Super account after your employer notified us that you have ceased employment.

The list of definitions and terms used in this section are contained in the definitions section.

Any cover provided by the Insurer is subject to the terms of the policy and in the event of any inconsistency between the terms and conditions of the insurance policies and this fact sheet, the terms and conditions of the insurance policy prevail.

Estate planning is an important aspect of any financial plan. In the event of your death, effective estate planning can help to ensure your family's needs are catered for and your estate is administered or distributed in accordance with your wishes.

On notification of a death claim, we will switch your account balance into AMP Super Cash, which is a low-risk investment option. If an insurance claim becomes payable to the us, it will also be invested in AMP Super Cash.

A death benefit payment is made up of:

– your super balance, plus
– the proceeds of any insurance claim paid by AMP Life.

AMP Life will pay the proceeds of an insurance claim:

– while the policy is in force
– before your cover ends, and
– before you reach the benefit expiry age for Death cover.

We must ensure the benefits are paid to your dependants as defined in the Fund’s Trust Deed, applicable superannuation law and/or your legal personal representative.

For more information, please refer to the your beneficiaries section in the getting to know your AMP Flexible Super fact sheet.

**Eligibility criteria for Death Cover**

You are eligible for Death cover to continue upon transfer to AMP Flexible Super if:

1. made an election to maintain your insurance cover, or
2. you are over age 25 and have a super balance greater than $6,000

AND

– we have your current address
– for Death cover you are aged 14 or more but less than 70
– you are an Australian resident and you reside in Australia.

Upon transfer to AMP Flexible Super:

– the amount of cover provided will change to a fixed (nominated) amount, and
– the insurance premium is recalculated.
If no cover has been transferred

If you do not have Death cover after you have transferred to AMP Flexible Super, you will not be able to apply for Rollover Protection cover. You will need to apply for insurance cover under different arrangements. For further information, please refer to the AMP Flexible Super insurance fact sheet for personal super to apply for insurance cover under Super Essential Protection or Super Protection.

How to increase your existing Death Cover

You may be able to apply to increase your Death cover by an amount you nominate. To do this, you will need to provide evidence of your health, financial or other information (eg occupation) to AMP Life when you apply to increase your existing Death cover. Once your evidence of health has been assessed, AMP Life may impose a higher premium, may apply exclusions and restrictions, or in some cases decline the additional cover based on the health evidence, occupation, financial or other information provided.

If your application is accepted by AMP Life, we will write to you to confirm the increase in cover and the premium you will pay. Your new cover will not start until AMP Life advises us that your cover has started. Until then, your current level of cover, if any, will apply.

Interim Accidental Death

If you apply to increase your Death cover, AMP Life provides you with Interim Accidental Death cover equal to the new cover applied up to a maximum of $1 million.

Interim Accidental Death cover starts from the date your application to increase your Death cover is received by AMP Life. Interim Accidental Death cover automatically ends as soon as one of the following happens:

– the insurer accepts, limits or rejects the cover you have applied for
– you withdraw your application
– 60 days pass from the date Interim Accidental Death cover commenced, or
– your cover would have otherwise ceased. Refer to when Death cover ceases section.

A benefit is only payable in the event of your accidental death during the period in which Interim Accidental Death cover applies. Please note this means a benefit is not payable under the Interim Accidental Death cover if you suffer total and permanent disablement or are diagnosed as suffering from a terminal illness during the period of Interim Accidental Death cover.

Accidental means bodily injury caused directly and solely by violent accidental external and visible means shall not include suicide or an intentionally self-inflicted injury.

Premiums will be charged for the period of interim cover based on the amount and type of cover requested and under assessment, in accordance with the premium rates set out in your welcome letter.

Terminal Illness benefit

If you become terminally ill, AMP Life will pay us the Terminal Illness benefit, which is an advance payment of your insured death benefit up to $1 million. After your death, if the total death benefit exceeds $1 million, the remainder will then be payable.

If you have Death cover, AMP Life will pay a Terminal Illness benefit if you become terminally ill:

– while this policy is in force
– before your cover ends, and
– before you reach the benefit expiry age for Death cover.

Refer to the definitions section for the definition of Terminal Illness that you will need to meet.

If a Terminal Illness claim is admitted, AMP Life will pay the insured amount to us and will be invested into a AMP Super Easy Cash, a low-risk investment option. Then, if you satisfy a condition of release under superannuation law, we will make the proceeds available to you as a lump sum.

Your Death cover and TPD cover will be reduced by the amount of any Terminal Illness benefit that is paid.

Please note that under superannuation law the terminal illness test for release of funds is broader and operates on a 24 month timeframe. This is different to the operation of your insurance policy, please refer to the section below for important information.
Differences between the insurance policy and superannuation law

Under superannuation law, a member who is certified by two doctors (one who is a specialist in the field of the Insured Member’s illness) as having a life expectancy of 24 months or less from the date of certification will be considered to have met a Terminal Medical condition of release. If you have met a condition of release and choose to withdraw your full account balance, your superannuation account will be closed and any insurance cover that you held through your account will be cancelled from the date of closure. If you close your account between the 24 and 12 month period and subsequently die, your beneficiaries will not be able to claim against any insurance cover (due to it being cancelled).

Before closing your account, Terminally Ill members should seek financial advice to ensure that you fully understand the impact that this will have on your ability to claim against any insurance cover that you hold through your superannuation account. If you leave your superannuation account open with sufficient funds to pay your ongoing insurance premiums, your insurance cover will continue. If you subsequently meet the definition of Terminally Ill (your life expectancy is 12 months or less) under the insurance policy, you will be able to claim against your insurance policy.

Exclusions for Death cover

Suicide and self harm

There is no exclusion for suicide applied to your Death cover where your cover is transferred to AMP Flexible Super and had previously been accepted under the terms of automatic acceptance (AAL) in your previous employer’s plan.

Where you have chosen to increase your cover, a suicide clause will apply to the amount of cover underwritten. In these instances, no benefit (voluntary insurance cover) will be paid for death from an intentional act within 13 months of this voluntary insurance cover commencing or subsequent increase in the voluntary insurance cover or reinstatement of cover.

War

The insurer will decline to pay or reduce the benefit and reserves the right to vary the premium basis in the event of war, whether declared or undeclared.

When Death cover ceases

Your Death cover will cease as soon as:
- your membership in AMP Flexible Super ceases
- you request to cancel your cover
- you reach age 70
- payment of a Death or Accidental Death benefit has been made to you
- payment of a Terminal Illness benefit if it equals the total death benefit payable. If a Terminal Illness benefit paid is less than the Death benefit payable, the cover will cease when the balance of the Death benefit is paid on your death
- premiums are not received either by non-payment of contributions or insufficient account balance
- if no contributions or rollovers have been received into your account for a period of 16 months, we may be required to cancel your insurance (unless you've told us in writing that you want to keep your insurance: you can do this online at amp.com.au/insurancecancellation.)
- if you had insurance because, your employer funded the full cost of insurance and notified us of this and then the employer ceases to fund your insurance - if you are under age 25, or have a balance below $6,000 and you have not elected to have insurance, then we are required to cancel your insurance. You can make an election online at amp.com.au/whyinsurance
- if we've determined that you're employed in a dangerous occupation and have notified you that you'll be provided cover on this basis and you change occupation (to one which is not classed as dangerous) - if you are under age 25, or have a balance below $6,000 and you have not elected to have insurance, then we are required to cancel your insurance. You can make an election online at amp.com.au/whyinsurance
- if you make a fraudulent claim
- when you no longer meet the eligibility terms applicable
- cover for all insured persons stops when the policy between the trustee and the insurer ends, or
- as specified by superannuation law.

1 The suicide clause (death) and attempted suicide, self-inflicted injury applies to any members of AMP Flexible Super who apply for an increase in cover or new cover and are underwritten.
**Total Permanent Disablement cover**

This section gives you information about any eligible Total and Permanent Disablement (TPD) cover that may be transferred to your AMP Flexible Super account after your employer notified us that you have ceased employment.

The list of definitions and terms used in this section are contained in the definitions section.

Any cover provided by the Insurer is subject to the terms of the policy and in the event of any inconsistency between the terms and conditions of the insurance policies and this fact sheet, the terms and conditions of the insurance policy prevail.

**Eligibility criteria for TPD cover**

You are eligible for TPD cover to continue upon transfer to AMP Flexible Super if:

1. made an election to maintain your insurance cover, or
2. you are over age 25 and have a super balance greater than $6,000

AND

– we have your current address
– you are aged 14 or more but less than 56, and
– you are an Australian resident and you reside in Australia.

Upon transfer to AMP Flexible Super:

– the amount of cover provided will change to a fixed (nominated) amount, and
– the insurance premium is recalculated.

**If no TPD cover has been transferred**

If you do not have TPD cover after you have transferred to AMP Flexible Super but have Death cover, you will be able to apply for TPD by an amount you nominate up to the amount of your Death cover.

To do this, you will need to provide evidence of your health, financial or other information (eg occupation) to AMP Life.

Once your evidence of health has been assessed, AMP Life may impose a higher premium, may apply exclusions and restrictions, or in some cases decline the additional cover based on the health evidence, occupation, financial or other information provided.

If your application is accepted by AMP Life, we will write to you to confirm the increase in cover and the premium you will pay. Your new cover will not start until AMP Life advises us that your cover has started. Until then, your current level of cover, if any, will apply.

**How to increase your existing TPD cover**

You may be able to apply to increase your TPD cover by an amount you nominate up to your existing Death cover.

To do this, you will need to provide evidence of your health, financial or other information (eg occupation) to AMP Life when you apply to increase your existing Death cover.

Once your evidence of health has been assessed, AMP Life may impose a higher premium, may apply exclusions and restrictions, or in some cases decline the additional cover based on the health evidence, occupation, financial or other information provided.

If your application is accepted by AMP Life, we will write to you to confirm the increase in cover and the premium you will pay. Your new cover will not start until AMP Life advises us that your cover has started. Until then, your current level of cover, if any, will apply.
TPD benefit

If you have TPD cover AMP Life will pay the TPD benefit if you are sick or injured and meet the insurer’s definition of totally and permanently disabled. You will be asked to provide the insurer with medical evidence of your disability to enable them to determine whether you qualify for the payment of the TPD benefit.

TPD sum insured reduction

Where the benefit basis used to determine your TPD benefit does not reduce your TPD benefit to nil by age 65, an over-riding reducing formula will be automatically imposed. This reducing formula will result in the TPD sum insured reducing progressively from age 60 to zero at age 65.

If you held Simple Protection or Tailored Protection insurance through your CustomSuper employer plan, TPD benefits commence reducing at age 55. If you are between age 55 and 59 when you are transferred from a CustomSuper employer plan, your TPD benefits will stop reducing at the time of transfer. When you reach age 60, they will re-commence reducing, and will reduce progressively to zero at age 65.

If you were transferred from Super Directions from Business Rollover Section and were a prior Simple Super or Tailored Super member, TPD benefits commence reducing at age 55. If you are between age 55 and 59 when you are transferred from a CustomSuper employer plan, your TPD benefits will stop reducing at the time of transfer. When you reach age 60, they will re-commence reducing, and will reduce progressively to zero at age 65.

Who the TPD benefit is paid to

If a TPD claim is admitted, AMP Life will pay the insured amount to us. Then, if you satisfy a condition of release under superannuation law, we will make the proceeds available to you as a lump sum.

Payment of TPD benefits

If you receive a TPD benefit your Death cover will end.

Upon acceptance of a TPD claim, your account balance will remain in your current superannuation investment option whilst your TPD benefit will be invested into a AMP Super Easy Cash, a low risk cash option.

If the Trustee determines you’re entitled to receive your benefit from the Fund, the benefit will be available to you as a lump sum.

You can choose to retain some or all of the benefit in the Fund or withdraw the benefit. You may also roll over the benefit to another super fund or a deferred or immediate annuity or pension. This latter option may have some tax or other benefits, which you can discuss with your plan’s financial adviser.

Exclusions TPD cover

TPD benefits from another super fund

A total and permanent disablement benefit will not be paid for a person insured, if the person received a benefit payment from another super fund which included a total and permanent incapacity benefit and is directly or indirectly related to a condition that applied prior to the person being accepted as a person insured.

Suicide of self-inflicted injury

There is no exclusion for attempted suicide or self-inflicted injury or sickness applied to your TPD cover where your cover is transferred to AMP Flexible Super and had previously been accepted under the terms of automatic acceptance (AAL) in your previous employer’s plan.

Where you have chosen to increase your cover and have been underwritten, a suicide clause will apply² to the amount of cover underwritten. In these instances, no benefit (voluntary insurance cover) will be paid for death from an intentional act within 13 months of this voluntary insurance cover commencing or subsequent increase in the voluntary insurance cover or reinstatement of cover.

Restrictions to TPD cover if not permanently employed 15 hours or more per week

If in the unfortunate circumstance of you needing to claim a TPD benefit (where provided), for member’s whose TPD cover commenced prior to 1 July 2014, you will be eligible under any of the three parts (a), (b) or (c) of the TPD definition.

For member’s whose TPD cover commenced after 1 July 2014, you will be eligible under any of the three parts (a), (b) or (c) of the TPD definition when engaged in full time regular remunerative work, or parts (b) and (c) of the TPD definition when you are employed in regular remunerative work on a part time or casual basis. Refer for the definitions section.

War

AMP Life will decline to pay or reduce the benefit and reserves the right to vary the premium basis in the event of war, whether declared or undeclared.

2 The suicide clause (death) and attempted suicide, self-inflicted injury applies to any members of AMP Flexible Super who apply for an increase in cover or new cover and are underwritten.
When TPD cover ceases

Your TPD cover will cease as soon as:

– your membership in AMP Flexible Super ceases.
– you request to cancel your cover.
– you reach age 65.
– payment of a Death, Accidental Death or TPD benefit has been made to you.
– if no contributions or rollovers have been received into your account for a period of 16 months, we may be required to cancel your insurance (unless you’ve told us in writing that you want to keep your insurance: you can do this online at amp.com.au/insurancecancellation.)
– if we’ve determined that you’re employed in a dangerous occupation and have notified you that you’ll be provided cover on this basis and you change occupation (to one which is not classed as dangerous) - if you are under age 25, or have a balance below $6,000 and you have not elected to have insurance, then we are required to cancel your insurance. You can make an election online at amp.com.au/whyinsurance
– if you had insurance because, your employer funded the full cost of insurance and notified us of this and then the employer ceases to fund your insurance - if you are under age 25, or have a balance below $6,000 and you have not elected to have insurance, then we are required to cancel your insurance. You can make an election online at amp.com.au/whyinsurance
– payment of a Terminal Illness benefit has been made to you.
– premiums are not received either by non-payment of contributions or insufficient account balance.
– if you make a fraudulent claim.
– when you no longer meet the eligibility terms applicable.
– cover for all insured persons stops when the policy between the trustee and the insurer ends, or
– as specified by superannuation law.
Cost of cover

Once you have transferred to AMP Flexible Super, your premium is recalculated each time the amount of your cover changes and at 30 June each year. The premium rates used to calculate your insurance premium can be altered by AMP Life after providing you with at least 30 days’ notice.

The premium rates for Death and TPD cover are based on composite rates for smoker/non-smoker and male/female and are dependent on your age. They apply to all occupational types.

### Annual premium rates per $1,000 sum insured – Death only and Death and TPD

<table>
<thead>
<tr>
<th>Age last birthday</th>
<th>Death Only($)</th>
<th>Death &amp; TPD($)</th>
<th>Age last birthday</th>
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Premium rates are inclusive of stamp duty and 20 per cent commission.
## Definitions

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accidental death</td>
<td>Death directly resulting from an unforeseen and unintentional accident caused by violent, external and visible means.</td>
</tr>
<tr>
<td>Accidental injury</td>
<td>An injury which first occurred after the cover under the policy between the trustee and insurer began, including interim cover, and which is caused solely and directly by violent, accidental, external and visible means; occurs independently of any other cause; and is not the unintended and unexpected consequence of an intended act, such as the application of unintentionally excessive force or the creation of unintended excessive force or the creation of unintended excessive pressure or strain.</td>
</tr>
<tr>
<td>At work</td>
<td>The person was: (a) either: i. performing all their duties of their normal occupation without restriction due to injury or illness or would have been capable of doing so, had the relevant day not been a public holiday or weekend day, or ii. on employer approved leave (except leave caused by any injury or illness or was absent for reasons other than injury or illness) and the person would be capable of attending work and performing all their duties of their normal occupation without restriction, and (b) in the Insurer's opinion, not restricted by injury or illness from being capable of performing their normal occupation on a full-time basis, for at least 30 hours per week even though actual employment may be on a full-time, part-time, casual or contract basis, and (c) not receiving or claiming and/or entitled to claim income support benefits from any source, including but not limited to, workers' compensation benefits, statutory transport accident benefits and disability income benefits.</td>
</tr>
<tr>
<td>Family member</td>
<td>Means in relation to you, your spouse (including legal spouse, de facto or same sex partner), mother, father, mother in law, father in law, child (including adopted child, stepchild or ex-nuptial child).</td>
</tr>
<tr>
<td>Full-time permanent employee</td>
<td>Means a person who is employed by the participating employer on a permanent basis and whose average normal working hours in that employment are at least 15 hours per week. For the purpose of assessing a claim for total and permanent disablement if you continue to be an insured person after you leave the participating employer, <strong>full-time permanent employee</strong> will also include a person employed by any employer at the time of injury or sickness.</td>
</tr>
<tr>
<td>Group insurance policy</td>
<td>Is a policy of life insurance, the owner of which is a person or entity (the owner) who is not a person insured, which offers cover for more than one life.</td>
</tr>
<tr>
<td>Limited cover</td>
<td>Benefits will only be paid if the death, terminal illness, total and permanent disablement or total disability was caused by any medical condition, injury or sickness the person insured was first diagnosed with, happened or first suffered from, or had symptoms of, or was treated for, after the date the insured person first became covered under this policy. Limited cover will not apply to death, terminal illness, total and permanent disablement or total disability that was caused by any medical condition, injury or sickness: – the person insured was not reasonably aware of, and – a reasonable person in the circumstances could not be expected to have been aware of; At the time first becoming covered under this policy.</td>
</tr>
<tr>
<td>Medical practitioner</td>
<td>Medical practitioner means a registered medical practitioner who is appropriately qualified to treat the person insured his or her injury or sickness. The medical practitioner cannot be you or your family member, business partner, employee or participating employer nor can it be the person insured or his or her family member, business partner, employee or participating employer.</td>
</tr>
<tr>
<td>Policy</td>
<td>The Group Life Policy issued to the policy owner, the Group Life proposal, each application for cover, the policy schedule, and any variation of the policy. The policy does not form part of this document. The policy constitutes the legal agreement between the parties.</td>
</tr>
<tr>
<td>Regular remunerative work</td>
<td>You are engaged in <strong>regular remunerative work</strong> if you are doing work in any employment, business or occupation. You must be doing the work for reward – or hope of reward – of any type.</td>
</tr>
<tr>
<td>Terminal Illness</td>
<td>Terminal illness means: In relation to a person insured whose cover commenced before 1 July 2014, the person insured suffers from an illness that: – is diagnosed by two registered medical practitioners as being terminally ill, one of which must be nominated by us, – that illness stops the person insured working, and – in our opinion the person insured is not expected to live more than 12 months. In relation to a person insured whose cover commenced on or after 1 July 2014, the person insured suffers from an illness that: – is diagnosed by two registered medical practitioners as being terminally ill, – stops the person insured working, and – in AMP Life’s opinion means the person insured is not expected to live more than 12 months.</td>
</tr>
</tbody>
</table>
Definition Term

where:

- one of the medical practitioners is nominated by AMP Life,
- one of the medical practitioners is a specialist practicing in an area related to the illness suffered by the person insured,
- the two medical practitioners have certified, jointly or separately that the person insured suffers from an illness that has caused a reduction in life expectancy to 12 months or less, and
- for each of the certificates, 12 months has not elapsed from the date certification was provided.

The registered medical practitioner cannot be a family member, business partner, employee or employer of you or the person insured.

The sickness resulting in the terminal illness must occur, and the date any medical practitioner first certifies the person insured as being terminally ill must take place, while the person insured is covered under the policy.

Terminal illness and terminally ill shall have a corresponding meaning.

Total and permanent disablement means:

For a person insured whose cover commenced prior to 1 July 2014 the definition of total and permanent disablement comprises of three parts:

- Part (a) Unable to work
- Part (b) Specific loss and
- Part (c) Future care

The person insured is totally and permanently disabled if he or she is:

**Part (a) Unable to work**

When all of the following apply to the person insured:

- an injury or sickness has stopped the person insured working in his or her usual occupation continuously for 6 months, and
- after considering all evidence which we believe is necessary to reach our view, in our opinion the person insured is unable ever again to be able to work in any business, occupation or regular duties for which he or she is reasonably qualified by education, training or experience.

**or**

**Part (b) Specific loss**

The person insured has suffered an injury or sickness which first became apparent while he or she was a person insured and as a result of the injury or sickness has suffered the total loss of (or total loss of the use of):

- both hands or feet, or
- one hand and one foot, or
- the sight of both eyes, or
- one hand or foot and the sight in one eye,

in circumstances where the loss will never be regained.

**or**

**Part (c) Future care**

When the person insured satisfies all the following conditions:

- the person insured suffers an injury or sickness which first occurs, while he or she is a person insured, and
- because of that injury or sickness, in our opinion, the person insured is permanently unable to perform at least two of the five ‘activities of daily living’ listed below, without assistance:
  - bathing/showering,
  - dressing/undressing,
  - eating/drinking,
  - using the toilet to maintain personal hygiene,
  - getting in and out of bed, a chair, a wheelchair or moving from place to place by walking, a wheelchair or with a walking aid.

A person insured whose cover commenced on or after 1 July 2014 is Totally and Permanently Disabled if permanent disability commenced while the person insured is:

- engaged in Regular remunerative work:
  i. as a full-time employee, and meet the definition in Parts (a), (b) or (c);
  ii. other than as a full-time employee, and meet the definition in Parts (b) or (c), or
- in the Personal division, not engaged in Regular remunerative work and meet the definition in Parts (b) or (c).

**Part (a) Unable to work**

The person insured suffers an injury or sickness that stops him or her from working in any business, occupation or regular duties continuously for six consecutive months from the last day at work prior to the injury or sickness.
<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
</table>
| **Part (b) Specific Loss** | The person insured has suffered an injury or sickness which first became apparent while he or she was insured person and as a result of the injury or sickness, the person insured has suffered the total loss of (or total loss of the use of):  
  – both hands or feet, or  
  – one hand and one foot, or  
  – the sight of both eyes, or  
  – one hand or foot and the sight in one eye,  
in circumstances where the loss will never be regained. |
| **Part (c) Future Care** | When all of the following apply to a person insured:  
  – the person suffers an injury or sickness which first occurs, while insured person; and  
  – because of that injury or sickness, in NMLA’s opinion, the person is permanently unable to perform at least two of the five “Activities of Daily Living” listed below, without assistance:  
    – bathing/showering,  
    – dressing/undressing,  
    – eating/drinking,  
    – using the toilet to maintain personal hygiene,  
    – getting in and out of bed, a chair, a wheelchair or moving from place to place by walking, a wheelchair or with a walking aid.  
Total and permanent disablement, totally and permanently disabled and TPD shall have a corresponding meaning. |
Contact us

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       8am to 7pm Sydney time Monday - Friday
fax    02 8837 7856
web    amp.com.au/flexiblesuper
email  askamp@amp.com.au
mail   Flexible Super
       Customer Service
       Locked Bag 5400
       PARRAMATTA NSW 1741