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Zurich Adviser guide

(Wealth Protection, Active and Sumo)



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Section 1

Contact details

Contact details

Contact list	
Adviser Administration The Adviser Administration team can assist you with all your commission and agency enquiries.	Phone: 02 9995 3634 Fax: 02 9995 1755 Email: adviser.admin@zurich.com.au
Adviser Services The Adviser Services team will be able to support you with all your general enquiries.	Phone: 1800 500 655 Fax: 02 9995 3797 Email: adviser.service@zurich.com.au
Claims The Claims team will be able to assist you when reporting a claim. Once the claim is reported to this team, the appropriate paperwork will be sent. Once the paperwork is returned a claims specialist will be nominated to look after the processing.	Phone: 1800 500 655 Fax: 02 9995 3732 Email: life.claims@zurich.com.au
Tele-underwriting service For further information on this service, refer to page 9	Phone: 1800 501 608 Fax: 02 9995 3655 Email: life.tele@zurich.com.au
Underwriting pre-assessment service For further information on this service, refer to page 8	Phone: 1800 244 306 Email: life.preassessments@zurich.com.au
Underwriting Team Queries related to progress of applications	Phone: 1800 244 306
Where to send new business and outstanding requirements You can provide by email, fax or post	Fax: 02 9995 3822 Email: life.newbusiness@zurich.com.au Mail: Underwriting/New Business Locked Bag 994 North Sydney NSW 2059

Branch contacts

NSW	Phone: 1800 252 650 Fax: 02 9995 1375 Email: lifesales.nsw@zurich.com.au
QLD	Phone: 1800 252 650 Fax: 07 3839 6669 Email: lifesales.qld@zurich.com.au
SA	Phone: 1800 252 650 Fax: 08 8300 8488 Email: lifesales.sa@zurich.com.au
VIC/TAS	Phone: 1800 252 650 Fax: 03 9940 6455 Email: lifesales.vic@zurich.com.au
WA	Phone: 1800 252 650 Fax: 08 9481 6568 Email: lifesales.wa@zurich.com.au

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Section 2

Getting started

Getting started

Our underwriting philosophy

Our underwriting area is staffed by experienced Underwriters who have access to local and overseas specialist reinsurers and Chief Medical Officers.

Our team is located nationally in most state capitals, and work closely with their state sales team, customer care and new business teams.

Zurich's underwriting philosophy is for our Underwriting team to not only have the technical knowledge when assessing risk, but to be recognised as a valued business partner and business contributor. To do this, the customer experience delivered by each and every Zurich underwriter will focus on the following areas:

- intelligent underwriting practices and solutions
- consistency and flexibility in our underwriting approach
- pro-active, timely and clear communication
- technical excellence expertly delivered
- decisions must make sense and be fair and reasonable.

Pre-assessments

Zurich provides a pre-assessment service for difficult or unusual medical conditions, occupation ratings, financial positions or avocations.

These can be submitted to Zurich via email or phone.

Details are as follows:

Phone: 1800 244 306

Email: life.preassessments@zurich.com.au

The minimum information that needs to be supplied to us before we will consider a pre-assessment whether by phone or email is:

- client's first name and surname
- client's date of birth
- product type/s being applied for
- sum insured for each product type
- adviser name and number
- current existing insurance

Please note that all financial pre-assessments must be accompanied by a recommendation for a level of cover for each product, from you and supporting financial information.

Tele-underwriting

Zurich was the first life insurer in Australia to launch Tele-underwriting, and our service is now regarded as the best of its type.

Access to the Tele-underwriting service is available via our ZXpress eApplication, where you can elect to have the Life Insured's Statement completed by our specialised Tele-underwriting team.

We will contact your client within 24 hours of receiving the eApplication to start the process and the team will continue to make contact to arrange a suitable interview time – involving you as the need arises. The Zurich team will also book any medicals and bloods that may be required.

The Tele-underwriting interview checklist, available on ZXpress, will help you prepare your client for the next steps.

We also extend our Tele-underwriting service to all of our advisers where an Underwriter requires additional information or clarification to assess an application. We encourage you to allow us to contact your clients to collect this information, minimising the overall application process and allowing the Underwriter further flexibility in making the final decision.

Please note that Tele-underwriting is not suitable for persons under the age of 16 years, and persons who do not read, speak or understand English.

For further details on this service, please speak with your Business Development Manager, or alternatively contact our Tele-underwriting team directly:

Phone: 1800 501 608

Fax: 02 9995 3655

Email: life.tele@zurich.com.au

Our turnaround times

New business

Our underwriting turnaround is 24 hours for new business.

Our Underwriters or administration team will request all (known) outstanding requirements up front when the application is received. Please remember that sometimes receiving a requirement generates the need for another (eg. a PMAR can generate the need for a medical). If further information is necessary, the file will be placed in suspense and you will be advised.

Further requirements

The turnaround for outstanding requirements or correspondence is usually within 48 hours. Additional referrals to reinsurers and/or our Chief Medical Officer mean that it may take longer.

Once further requirements are received and the application reviewed, it will be accepted, offered with alternative terms or conditions, declined or placed in suspense to await other outstanding requirements.

Confidentiality and privacy

Zurich is bound by the Privacy Act 1988 (Cth). The type of information we hold varies depending on the product offered. In general, Zurich may hold the following personal information on your client:

- name and address
- date of birth
- contact details, which may include a telephone number
- gender
- occupation
- tax file number
- health information
- information relevant to the financial situation
- insurance claim information
- employer's name and address
- salary
- the name and addresses of the dependants or beneficiaries
- other information.

How do we use this information?

Zurich uses this information to assess the application and to provide products or services.

For further information about Zurich's Privacy Policy, a list of service providers and business partners that we may disclose your client's information to, a list of countries in which recipients of your client's information are likely to be located, details of how your client can access or correct the information we hold about them or how your client can make a complaint, please refer to the Privacy link on our homepage – www.zurich.com.au, contact us by telephone on 132 687, email us at privacy.officer@zurich.com.au, or write to:

The Privacy Officer
Zurich Financial Services Australia Limited
Locked Bag 994,
North Sydney NSW 2059

Non-disclosure considerations

The duty of disclosure applies to the answers of financial, lifestyle and medical questions, which form part of the application.

Zurich readily requests supporting documentation, both at underwriting and at the time of claim. If there is any misrepresentation of the true financial position, medical condition or lifestyle of the applicant, Zurich has various rights under the Insurance Contracts Act.

Acting on behalf of your client

For your convenience Zurich takes a flexible approach to allowing you to work on your client's behalf.

At new business stage, we are able to act on your instructions to:

- alter premium frequency and start dates
- alter commission types (provided premium is not affected)
- alter premium structure (stepped to level or vice versa).

With your permission we can also follow up outstanding requirements, including administrative, medical and financial requirements. Be sure to indicate on the application that you wish to take advantage of this service.

Where an alteration or change requires a new quote, Zurich will accept a revised quote from you on behalf on your client.

Certain rules apply for the revised quote and it is important that you include (on the quote itself or in a covering note):

- the application/policy number
- policy name
- a statement which confirms you have conveyed the details of the new quote to your client, and
- your signature

Where a revised quote introduces an entirely new cover or benefit, or removes an entire cover or benefit, the quote must also be signed by your client.

Interim cover

Interim cover will begin for the applicant from the date a paper or electronic Zurich Insurance Application form is properly completed and you receive initial premium (based on the ZXpress quote), completed payment authority, rollover authority or platform account details.

Full details are contained in the relevant PDS. Generally, interim cover, once effective, will end on the earlier of:

- 90 days from the date the interim cover started
- when insurance cover commences under another contract of insurance (whether interim or not) which covers the applicant and is intended to replace the cover provided under interim cover
- the application not being submitted within the required timeframe
- the application for cover being accepted or declined by us
- the application for cover being cancelled or withdrawn.

Revised terms

Revised terms are an alteration to the standard terms and conditions of the contract. They are offered when the risk of certain events or conditions fall outside the standard risk.

Zurich attempts to offer cover to as many applicants as possible, but not everybody can be offered standard terms or premium rates. It may be necessary for an Underwriter to offer revised terms in order to provide cover. This can be in the form of exclusions, premium loadings, alterations or a reduced term.

We will make every effort to ensure that your client receives a fair assessment. Decisions will be based on sound principles and in line with good industry practice.

Exclusions

An exclusion can be defined as a condition imposed on a policy for which we will not pay a claim.

Exclusions can be unpopular with applicants. An exclusion leaves a recognised gap in their protection, perhaps for a condition for which the applicant initially wanted insurance.

However, without the use of exclusions, many applicants with pre-existing conditions would have to pay very high premiums or have their applications declined.

Example

Consider income protection insurance for a carpenter with a back disorder. A premium loading could be prohibitively expensive, whereas an exclusion for the back will still enable a level of protection to be put in place.

Premium loadings

In many cases an exclusion is not appropriate. For example, where the applicant is outside the normal weight limits. What, in fact could be excluded?

Carrying extra weight is unhealthy, increasing the risk of heart attack, stroke, diabetes, gout, high cholesterol and generally affects lifestyle. The only real option in this case is to apply a premium loading on top of the standard premium to cover the additional risk.

A loading can come in two forms:

- as an additional premium (expressed as a percentage)
- as an extra dollar amount for every \$1,000 insured (expressed as 'per mille') for lump sum cover.

Example

Due to a medical condition, John has been offered his \$200,000 Death cover with \$3 per mille loading. John's total loading is calculated by multiplying an extra premium of \$3 for every \$1,000 sum insured.

This means $200 \times \$3.00 = \600.00 per year in addition to the standard premium.

Alterations to benefit, waiting period or policy term

As an alternative to premium loadings or exclusions on income protection policies, an increase in the waiting period or a decrease in the benefit period may enable your client to obtain cover at standard premium rates. For lump sum business, we may restrict the policy term.

This usually depends on the condition(s) of the applicant and clarification should be sought from the Underwriters.

Product and marketing material

The following resources are available via your BDM to help you service clients better:

- targeted marketing material
- administrative and underwriting Life Risk forms
- a range of calculators to help illustrate client needs
- information about our claims process.

Your BDM can also help you order additional copies of the PDS and all other marketing brochures produced by Zurich for your office.

Quoting and lodging applications

"ZExpress" provides a faster, smoother and reliable experience for quoting and lodging electronic applications.

Using ZExpress, you will be able to:

- quote and apply for the current Zurich Wealth Protection, Active and Sumo product suites
- quote and apply in offline mode when internet access is unavailable
- save and share your quotes and applications, including submitted applications, for later retrieval and access
- provide premium and commission calculations and projections
- update and correct quotes midway during the application process
- select from a choice of mixed premium frequencies within the same application
- lodge fresh applications, cloning data from previously submitted applications
- create a superannuation optimiser structure quite easily, by selecting the appropriate ownership and policy structure. Product features are automatically placed inside and outside of super with the premium split clearly displayed
- access look-up lists for occupations and their associated ratings, bank BSBs, address postcodes, medical practitioners, super funds (for rollovers) etc.

Adviser remuneration

Commission is generated as at the date the policy is put in force and is paid weekly to the dealer group each Monday. Zurich offers three commission options under Wealth Protection, Active and Sumo.

The rates of commission, inclusive of GST are:

Commission structure	Year one	Renewal
Upfront	115.5%	11.55%
Hybrid	88%	19.8%
Level	27.5%	27.5%

The commission structures available will be restricted for policies that commence within 5 years of the maximum entry age for any benefit type. The maximum entry age is the stepped premium entry age.

Where a policy includes multiple benefits with different maximum entry ages, the commission structure available for all benefits will be applied based on the lowest maximum entry age of benefits being applied for under the policy. For example, if the client is 64 and is applying for Death and TPD cover, the restriction will be based on the benefit with the lowest entry age, being the TPD benefit and only the level commission structure will be available.

Age of life insured at application				Commission structure available
Death	TPD, Income, Business Expenses	Trauma	Modified TPD, Active cover (Health events)	
65	55	54	60	Upfront, hybrid, level
66	56	55	61	Hybrid and level
67	57	56	62	Hybrid and level
68	58	57	63	Level only
69	59	58	64	Level only
70	60	59	65	Level only
71*	61*	60*	–	Level only
72*	62*#	61*	–	Level only
73*	63*#	62*	–	Level only
74*	–	63*	–	Level only

*out of limits maximum entry ages (not appearing in the PDS) only apply where the applicant is assessed as standard (no loadings or exclusions). Further, income protection is only available for replacement business to white collar professionals with maximum benefit period of 'to age 65'.

#TPD only.

Child Cover is not affected by maximum entry age restrictions.

Where restrictions apply to non-standard out of limits business or where sums insured are very large (jumbo), we will let you know what these restrictions are at the time of preparing the quote.

Out of limits ZXpress quotes will display the following:

The product/s and premium/s quoted in this illustration are outside standard product criteria, are indicative only and subject to assessment and confirmation by Zurich. Availability of cover is subject to assessment by Zurich underwriting.

Commission components

Commission is payable on the following components of the premium:

- base rates
- options
- loadings
- premium after size discount has been applied

Commission is only payable on premium received, it is not payable on:

- management fee
- explicitly charged stamp duty

Premium quotes prepared using ZXpress will calculate the commission payable for the first 5 years of the policy.

Year one commission

Year one commission is payable on:

- new business
- underwritten increases to existing cover
- increases to existing cover made under the Future insurability benefit and Business future cover option.

It is not payable on:

- business for which year one commission has already been paid
- business which replaces an existing policy, including continuation options
- indexation increases (however, renewal commission will be paid)
- cover which has been reinstated using buy back or trauma reinstatement provisions.

Commission alterations

The commission type and rate must remain the same when transferring or increasing cover on an inforce policy. New business commission will only be paid on the increased premium received.

Once a policy has been put into force, the commission cannot be changed ie. a policy which was originally issued with upfront commission cannot be altered to a level commission at a later point in time.

Advisers writing business on their own lives

Upfront commission is not available to advisers writing business on their own lives, or where the adviser writes business for a direct family member or colleague, for example their partner or a member of the same financial services practice.

Commission restrictions

When the annual premium (excluding stamp duty and management fee) exceeds certain thresholds, the default commission structure changes, as explained below:

Annual premium	Upfront	Hybrid	Level
up to \$30,000	Yes	Yes	Yes
\$30,001 – \$50,000	No	Yes	Yes
\$50,000+	No	No	Yes

Commission discounts – flexible dial down

Year one and renewal commission can be adjusted to fund a client premium discount.

The table below illustrates several commission dial down options, however any premium discount percentage can be selected within the minimum and maximum range; there is a direct relationship between the premium discount percentage selected and the commission percentage in year one and at renewal.

Commission structure	Premium discount	Year 1 commission	Renewal commission
Upfront	0.00%	115.50%	11.55%
	5.00%	101.75%	8.80%
	10.00%	82.50%	6.05%
Hybrid	0.00%	88.00%	19.80%
	5.00%	77.00%	15.40%
	10.00%	66.00%	11.00%
	15.00%	55.00%	6.60%
	20.00%	44.00%	2.20%
Level	0.00%	27.50%	27.50%
	5.00%	22.00%	22.00%
	10.00%	16.50%	16.50%
	15.00%	11.00%	11.00%
	20.00%	5.50%	5.50%
	25.00%	0.00%	0.00%

The corresponding commission discount is a reflection of the premium discount and is applied in the same year in which the commission is reduced.

For example, a Hybrid commission structure with premium discount of 12.50% will result in an initial commission rate of 60.50% and a renewal commission rate of 8.80%.

For the upfront structure, the maximum premium discount you can provide in year one is 10%, i.e you must receive a minimum of 82.5% commission in year one and 6.05% renewal.

Similarly for hybrid, the maximum premium discount you can provide in year one is 20%, i.e you must receive a minimum of 44% commission in year one and 2.20% renewal.

Under the level structure you can discount the premium by up to 25%. The full 25% premium discount generates nil commission (year one and ongoing).

Responsibility period

There is a responsibility period that applies to new business in relation to the commission that has been paid. The proportion of commission paid that will be reversed if cover lapses or is cancelled within the responsibility period is shown in the Zurich commission schedule provided to your dealer group as part of their distribution agreement with Zurich.

If cover lapses or is cancelled within the responsibility period shown, we will deduct the appropriate proportion of commission paid from the dealer group's commission payments at the next payment date.

For renewal commission paid more than 12 months after the commencement of the policy, commission will be reversed if a premium on which commission has been paid is refunded to the client.

Where an extended responsibility period (longer than 12 months) applies, we will let you know what this is at the time of preparing the quote. The proportion of commission paid that will be reversed is also detailed in your Zurich commission schedule.

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Section 3

Cover at a glance

Cover at a glance

Multiple solutions

At Zurich, we recognise that not all your clients are the same, and that each client will have their own insurance needs. Zurich is proud to offer a range of life insurance products designed to meet the needs of our dynamic client base.

Our multiple solutions offer flexibility to match evolving client preferences, backed by a global brand.

Wealth Protection

Zurich Wealth Protection allows you to select a combination of traditional life insurances and ownership structures to meet your client's needs. The following products can be taken under Wealth Protection.

Protection Plus



Death cover

Death cover provides a lump sum payment if the life insured dies or is diagnosed with a terminal illness.



Total and permanent disablement (TPD) cover

TPD cover provides a lump sum payment if the life insured suffers total and permanent disablement in accordance with the TPD definition provided by your policy. It can also provide partial payments at earlier stages of disablement and for less severe conditions via the Partial impairment benefit, if Platinum TPD is selected.



Trauma cover

Trauma cover provides a lump sum payment if the life insured suffers a specified trauma condition for which he/she is covered.

Child Cover



Child cover

Child cover provides a lump sum payment if the insured child suffers one of the insured trauma conditions. It also includes death, terminal illness and carer benefits.

Income Protector



Income protection cover

Income protection provides a monthly benefit that contributes towards a replacement income if the life insured is unable to work and is disabled, in most cases, for longer than the specified waiting period.

Business Expenses



Business expenses cover

Business expenses cover provides a monthly benefit that reimburses either allowable business expenses or key person replacement costs if the life insured is disabled, in most cases, for longer than the specified waiting period.

Active

Zurich Active provides an alternative to traditional insurance products with a simple design to last a lifetime. Claims are paid based on the severity of the health event – the more serious the condition, the greater the benefit. Active typically covers more conditions than traditional life insurance policies, and it also introduces lower thresholds for many conditions so your client can start claiming as needed. Unlike many policies, Zurich Active allows multiple claims over the lifetime of the policy. Zurich Active keeps life insurance simple and understandable. The following products can be taken under Active.

Active Cover



Health events, terminal illness & death cover

We will pay a lump sum on the occurrence of covered health events, (such as heart attack, stroke, cancer, digestive conditions, psychiatric conditions and many others), terminal illness and death. The amount payable for a health event depends on how serious the condition is. An important aspect of this cover is that we will pay a benefit if the health event meets the specific criteria set out under the policy and falls into one of the benefit categories.

Child Cover



Child cover

Child cover provides a lump sum payment if the insured child suffers one of the insured trauma conditions. It also includes death, terminal illness and carer benefits.

Income Protector



Income protection cover

Income protection provides a monthly benefit that contributes towards a replacement income if the life insured is unable to work and is disabled, in most cases, for longer than the specified waiting period.

Sumo

Zurich Sumo offers a unique combination of product, service and benefit levels that make it stand apart in the Australian market and provides your clients with a level of cover not easily attainable elsewhere in the Australian market (including TPD up to \$15,000,000 and trauma up to \$10,000,000). The following products can be taken under Sumo.

Life Insurance



Death cover

Death cover provides a lump sum payment if the life insured dies or is diagnosed with a terminal illness.



Total and permanent disablement (TPD) cover

TPD cover provides a lump sum payment if the life insured suffers total and permanent disablement in accordance with the TPD definition provided by your policy.



Trauma cover

Trauma cover provides a lump sum payment if the life insured suffers a specified trauma condition for which he/she is covered.

Income Protection



Income protection cover

Income protection cover provides a monthly benefit that contributes towards a replacement income if the life insured is unable to work and is disabled, in most cases, for longer than the specified waiting period.

Minimum and maximum cover amounts

Benefit	Product suite	Minimum	Maximum
Death cover	Wealth Protection	\$50,000	Subject to individual assessment
	Active	\$100,000	Subject to individual assessment (the Additional death cover option must be purchased for sums insured over \$4,000,000)
	Sumo	\$2 million	Subject to individual assessment
Total and Permanent Disablement (TPD)	Wealth Protection	\$50,000	\$5 million for any combination of definitions ¹ \$2 million modified TPD \$2 million domestic duties TPD
	Sumo	\$3 million	Maximum \$15 million (but not more than the Life insurance sum insured) Cover will be structured using the following tiers of cover: <ul style="list-style-type: none"> • Standard TPD tier (up to \$5 million) <ul style="list-style-type: none"> – Own occupation TPD • Sumo TPD tier <ul style="list-style-type: none"> – Any occupation TPD (up to \$10 million when combined with the Standard TPD tier), then – Activities of Daily Working TPD definition
Health events cover	Active	\$100,000	\$4 million (includes cover for Extended care option)

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The minimum benefit increase for Death, TPD or Trauma cover is \$50,000.

The minimum premium for each life (excluding the management fee) is \$160 per year for Death, TPD or Trauma policies.

¹ TPD cover maximum reduces to \$3,000,000 on the policy anniversary following the 64th birthday.

Benefit	Product suite	Minimum	Maximum
Trauma cover	Wealth Protection	\$50,000	\$2 million \$1 million domestic duties
	Sumo	\$2 million	\$10 million (but not more than the Life Insurance sum insured) Cover will be structured using the following tiers: <ul style="list-style-type: none"> • Standard Trauma tier <ul style="list-style-type: none"> – cover up to \$2 million for standard trauma conditions • Sumo Trauma tier <ul style="list-style-type: none"> – cover for Sumo trauma conditions up to \$8 million
Child cover	Wealth Protection	\$10,000	\$500,000 Maximum applies to all child trauma cover combined across all insurers
	Active	\$10,000	\$500,000 Maximum applies to all child trauma cover combined across all insurers
Needlestick cover	Wealth Protection	\$50,000	\$1 million ²

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The minimum benefit increase for Death, TPD or Trauma cover is \$50,000.

The minimum premium for each life (excluding the management fee) is \$160 per year for Death, TPD or Trauma policies.

² Occupationally acquired HIV or occupationally acquired Hepatitis B and C cover with Zurich (available under Extended trauma and the Needlestick cover option) and all other insurers cannot exceed \$2,000,000.

Benefit	Product suite	Minimum	Maximum
Income cover	Wealth Protection	\$1,500 per month	\$30,000 per month, plus an additional \$30,000 per month restricted to a one or two year benefit period Restricted to \$10,000 per month for SR occupations
	Active	\$1,500 per month	\$30,000 per month, plus an additional \$30,000 per month restricted to a one or two year benefit period Restricted to \$10,000 per month for SR occupations
	Sumo	\$30,000 per month	\$30,000 per month, plus an additional \$30,000 per month restricted with a benefit period of up to 10 years
Business expenses cover	Wealth Protection	\$1,000 per month	\$60,000 per month Restricted to \$10,000 per month for SR occupations

The minimum benefit increase for Income or Business expenses cover is \$500 per month.

The minimum premium for each life (excluding the management fee) is \$200 for Income and Business expenses policies.

At application, total combined cover with Zurich and other insurers cannot exceed \$60,000 per month for income protection and \$60,000 per month for business expenses.

Multiples of income guidelines

Personal cover is proposed where a client wishes to protect their family, including lifestyle and future income earning potential. Where cover applied for exceeds the guidelines in the table below, further information may be required by Underwriting to support the cover applied for.

Age	Death, TPD & Health Events	Trauma
up to 40	up to 25 x annual income	up to 15 x annual income
41 – 50	up to 20 x annual income	up to 10 x annual income
51 – 55	up to 15 x annual income	up to 8 x annual income
56 – 60	up to 10 x annual income	up to 5 x annual income
> 61	up to 5 x annual income	up to 2 x annual income

We understand circumstances vary for each client. If you have advised cover amounts outside of these multiples, please attach your SOA or supporting documentation.

Income protection cover

For Wealth Protection, Active and Sumo:

- the monthly equivalent of 75% of the first \$320,000
- then 50% of the next \$240,000
- and 25% of the balance of your client's annual income,

subject to the minimum and maximum cover amounts.

Business expenses cover

There are two types of Business expenses cover available under Wealth Protection (subject to the minimum and maximum cover amounts):

- Ongoing fixed expenses: provides an indemnity benefit that will cover the insured's share of most fixed business expenses up to a maximum of the insured monthly benefit if they are unable to work due to sickness or injury and are totally disabled or partially disabled for longer than the specified waiting period
- Key person replacement: reimburses up to 75% of the direct remuneration costs associated with a locum or replacement employee for up to a maximum of the insured monthly benefit while the life insured is unable to work due to sickness or injury and is totally or partially disabled. Any income generated by the locum or replacement employee does not offset the benefit payable

The intention of this insurance is to ensure that a life insured has a business to return to in the event of a short-term period of disability.

For queries regarding your client's eligibility for either type of business expenses cover, contact our Underwriting team.

Minimum and maximum entry ages for cover

Benefit	Wealth Protection	Active	Sumo
Life and additional death cover	10-70 (stepped) 10-63 (level)	15-65 (stepped) 15-60 (level)	15-70
Total and Permanent Disablement (TPD)	15-60 15-65 (modified TPD)	–	15-60
Health events cover	–	15-65 (stepped) 15-60 (level)	–
Trauma cover	15-59	–	15-65
Child cover	2-17	2-17	–
Needlestick cover	19-65	–	–
Income cover	19-60 ¹ 19-53 (SR occupations)	19-60 ¹ 19-53 (SR occupations)	19-60
Business expenses cover	19-60 19-53 (SR occupations)	–	–
Home support option	19-48 (partner)	19-48 (partner)	–

¹ The age 70 benefit period is available to occupation categories A1, A1M, A1L, A2 and A3 only. From the policy anniversary following the 65th birthday, cover cannot be increased, any extra-cost options will end and the amount payable under the policy will reduce on a sliding scale.

Cover expiry ages

(policy anniversary following this age)

Benefit	Wealth Protection	Active	Sumo
Life and additional death cover	99	99	99
Total and Permanent Disablement (TPD)	99 65 If linked to trauma TPD definition changes at age 65	–	99 TPD definition changes at age 65
Health events cover	–	99 Health Events cover changes at age 70. Occupational Impairment and Extended care option end at age 65	–
Trauma cover	99 if linked to Death 75 in all other cases Trauma definition changes at age 75	–	99 Trauma definition changes at age 70
Child cover	18	18	–
Needlestick cover	75	–	–
Income cover	65 60 (SR occupations) 70 (with age 70 benefit period or if cover extension applies)	65 60 (SR occupations) 70 (with age 70 benefit period or if cover extension applies)	65 70 if cover extension applies
Business expenses cover	65 60 (SR occupations)	–	–
Home support option	55 (partner) (or benefit expiry)	55 (partner) (or benefit expiry)	–

Applying for benefits

	Wealth Protection		Active		Sumo	
	TPD	Income cover	Health events cover	Income cover	TPD	Income cover
Minimum hours	<p>Must be gainfully employed for at least 16 hours per week at the time of application for own/any occupation definitions.</p> <p>Domestic duties definition may be available if the primary role is as a home duties person.</p> <p>Modified TPD may be allowed if working less than this amount and some occupations will attract an additional loading for this definition.</p>	<p>Must be gainfully employed for at least 24 hours per week at the time of application.</p>	<p>Must be gainfully employed for at least 16 hours per week at the time of application, for own/any occupational impairment definition.</p> <p>Domestic duties impairment level may be available if the primary role is home duties.</p>	<p>Must be gainfully employed for at least 24 hours per week at the time of application.</p>	<p>Must be gainfully employed for at least 30 hours per week at the time of application.</p>	
Maximum hours	Further information will be requested if working > 60 hours per week.					
More than one occupation	We will only cover a client for their principal occupation. However, the occupation rating will take into consideration the duties of any second occupation, which may result in the downgrade of the occupation rate or an exclusion for the second occupation.					
Less than 12 months in current job	For consideration of any disability benefit, we will require details of the last three years work history.					

Product eligibility – Income protection

The following tables apply to Income protection cover under Wealth Protection and Active. Note the differences in eligibility which apply to the Special Risk occupation group (SR), which has restricted access to some elements of Income protection.

Product parameters	Income Protector		Income Protector Plus
	SR occupations	All other occupations	All except SR
Waiting period: 14 days	X	✓	✓
Waiting periods: 30, 60, 90 days	✓	✓	✓
Waiting periods: 180 days, 1 or 2 years	X	✓	✓
Benefit periods: 1, 2 or 5 years	✓	✓	✓
Benefit periods: to age 65 or 70*	X	✓	✓
Option availability:			
– Increasing claims option			
– Family care option	✓	✓	✓
– Home support option			
– Needlestick cover option			
– Super contributions option			
– Day 4 accident option			
– Lump sum accident option	X	✓	✓
– Future insurability option			
– Trauma advancement option			

*Available to occupation categories A1, A1M, A1L, A2 and A3 only.

Product eligibility – Business expenses cover

Note the differences in eligibility which apply to the Special Risk occupation group (SR), which has restricted access to some elements of Income protection.

Product parameters	Business Expenses	
	SR occupations	All other occupations
Waiting period: 14 days	X	✓
Waiting period: 30, 60, 90 days	✓	✓
Benefit period: 1 year	✓	✓
Day 4 accident option	X	✓

Third party ownership

The purpose of income protection insurance is to provide the life insured with replacement of income, so normally the owner of the policy is the life to be insured.

Third party ownership should only be considered in the following circumstances:

- where the life insured is an owner of, and a major shareholder in a company and is personally responsible for generating the income, then the policy owner may be the company
- where the life insured personally generates income and wishes the policy owner to be a family trust or family business. We will not consider the third party ownership in the case of a partner or other arm's length parties.

Sum insured discounts

A premium discount is available for large sums insured and is calculated at each anniversary based on the cover amount.

For lump sum, the discount is based on the total Death, TPD or Trauma sum insured. For Income protection and Business expenses, the discount is based on the total of the insured monthly benefit and the Super contributions monthly benefit, or the total Business expenses monthly benefit.

For level premium policies, any increased discount is applied only to the portion of cover relating to the most recent CPI (indexation) increase.

Wealth Protection

Death & TPD	
Sum insured	Discount
\$250,000 – \$499,999	11%
\$500,000 – \$749,999	21%
\$750,000 – \$999,999	22%
\$1,000,000 – \$1,999,999	29.5%
\$2,000,000 +	30%

Trauma	
Sum insured	Discount
\$100,000 – \$149,999	3%
\$150,000 – \$249,999	16%
\$250,000 – \$349,999	24%
\$350,000 – \$499,999	25.5%
\$500,000 – \$749,999	29%
\$750,000 – \$999,999	32%
\$1,000,000 +	36.5%

Income protection and Business expenses	
Insured monthly benefit	Discount
\$0 – \$2,499	+15%
\$2,500 – \$3,499	+12%
\$3,500 – \$4,999	5%
\$5,000 – \$7,499	8%
\$7,500 – \$9,999	10%
\$10,000 – \$14,999	12%
\$15,000 +	15%

Active

Death and Health events		
Sum insured	Discount Death	Discount Health Events
\$0 – \$299,999	0%	0%
\$250,000 – \$499,999	7%	3%
\$500,000 – \$749,999	15%	7%
\$750,000 – \$999,999	17%	10%
\$1,000,000 – \$1,999,999	22%	12%
\$2,000,000 +	24%	12%

Income protection	
Insured monthly benefit	Discount
\$0 – \$2,499	+15%
\$2,500 – \$3,499	+12%
\$3,500 – \$4,999	5%
\$5,000 – \$7,499	8%
\$7,500 – \$9,999	10%
\$10,000 – \$14,999	12%
\$15,000 +	15%

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Section 4

Superannuation optimiser (related policies)

Superannuation optimiser

Introduction

Zurich's superannuation optimiser refers to the concept of splitting cover across two related policies, where one policy is a super policy and the other is non-super, providing flexibility to reduce cost and meet client needs.

Superannuation optimiser refers to:

- linking two separate covers on two related policies (eg. Death cover on a non-super policy and Trauma cover on a super policy) and
- splitting a cover across two related policies so that part of the cover is held on a non-super policy and the other part is held on a super policy. In this situation, the cover has a 'non-superannuation component' and a 'superannuation component'.

Management fee

For Wealth Protection and Sumo, only one management fee will be payable when two related policies are set up, in line with the normal management fee allocation rule of one fee per life.

Related policy restrictions

The life insured on each related policy must be the same. The only time more than one life is permitted on either policy is if the Home support option is included on a non-super Zurich Income Protector policy.

A life insured can have one set of related lump sum policies and one set of related income policies (but not multiples of each type).

Commission

There is no restriction on commission specific to related policies, however commission type must be the same for both policies. Commission will be paid on both policies at the same time (when they both complete with the same commencement date).

Cover combinations

ZXpress will only allow valid combinations of cover. The product PDSs contains more detailed information about which benefits will sit on each related policy and how claims are paid.

Presentation

What policy owners receive

Two separate Zurich policies will be issued, and each will generate its own documentation:

- Policy schedule – will identify each policy as part of an optimised arrangement, will indicate whether it is the non-super policy or the super policy and will provide the policy number of the related policy.
- Anniversary notices – will remind policy owners of the related status of each policy.

What advisers see

The two policies are separate for the purpose of all adviser communications (including Commission statements and Risk Business Listing reports).

Evidence of policies being related will be available via the Zurich Document Archive, where policy owner documentation (including policy schedules) is available for viewing. In addition, related status (if applicable) will appear on the Certificate of Currency and Client Transaction Records.

Existing policies

It is possible to relate existing policies provided the two policies which are to be related will meet all of the eligibility rules (eg. eligible premium structure, appropriate cover combinations, same life insured, same policy series). If any of these parameters of an existing policy need to change, this must be done before the request to relate the policies is submitted. It is also possible to split an existing policy into two related policies.

For Zurich policies issued before 15 May 2017 under a Tailored super structuring arrangement, an **Application to relate policies form** must be used to relate the two policies or split an existing policy into two related policies.

Customers with policies issued after 15 May 2017 may apply to relate policies under Superannuation optimiser by completing the **Zurich Insurance application form**.

All requests to relate policies must be accompanied by a Zurich premium quote in order to link all the covers up correctly.

More information

More information can be found in the relevant PDS. The PDS and relevant forms can be accessed via your BDM.

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Section 5

Medical underwriting

Medical underwriting

As part of the application process, Underwriting will assess your client's medical history and any mandatory medical requirements for the total cover to be held with Zurich.

ZXpress will calculate any mandatory medical requirements for your client based on the total cover entered in the quote (including multiple policies, or where superannuation optimiser has been selected).

Refer to the following tables, using the total sum to be insured with Zurich and any other insurers, for requirements.

Mandatory medical requirements

To help you understand the medical acronyms included in the following tables:

Acronym	Medical requirement
MBA	Multiple biochemical analysis
EE	Express exam (quick check)
ME	Medical examination (to be completed by GP or specialist only)
FBC	Full blood count
MSU	Microscopic urinalysis
PMAR	Personal medical attendants report (Zurich will organise in all cases)
fPSA	Prostate specific antigen test including free PSA
HIV	Human immunodeficiency virus antibodies
HepB&C	Hepatitis B and C antibodies and antigens
SE	Exercise (stress) ECG
BrEx	Breast exam (females only)
PFTs	Pulmonary function tests (Lung function)
UDS	Urinary drug screen
Cotinine	Cotinine blood test (non-smokers only)
MAMM	Mammogram (females only)

Medical underwriting requirements

Wealth Protection and Active

Death & TPD						
Benefit amount	Age next birthday					
	up to 45	46-50	51-55	55-60	61-65*	66+*
up to \$500,000	–	–	–	–	–	–
\$500,001 – \$750,000	–	–	–	–	MBA, EE	
\$750,001 – \$1,000,000	–	–	–	MBA, EE		
\$1,000,001 – \$1,500,000	–	–	MBA, EE			
\$1,500,001 – \$2,500,000	–	MBA, EE				
\$2,500,001 – \$5,000,000	MBA, EE				MBA, ME, BrEx	
\$5,000,001 – \$10,000,000*	MBA, FBC, MSU, ME, SE		MBA, FBC, MSU, ME, SE, BrEx			
\$10,000,001+*	HIV, HepB&C, MBA, FBC, MSU, ME, SE	HIV, HepB&C, MBA, FBC, MSU, ME, SE, PMAR, BrEx			MBA, ME, BrEx, FBC, MSU, SE, PMAR, MSU, HIV, HepB&C	

*Applies to Death cover only. Sums insured in excess of \$5,000,000 are not available for TPD under Wealth Protection, or where the entry age is above 60.

Trauma					
Benefit amount	Age next birthday				
	up to 40	41-45	46-50	51-55	55-60
up to \$500,000	–	–	–	–	–
\$500,001 – \$1,000,000	–	–	–	–	MBA, EE
\$1,000,001 – \$1,500,000	HIV, HepB&C, MBA, EE			HIV, HepB&C, MBA, FBC, ME, BrEx, PMAR, SE	
\$1,500,001 – \$2,000,000	HIV, HepB&C, MBA, FBC, ME	HIV, HepB&C, MBA, FBC, ME, BrEx	HIV, HepB&C, MBA, FBC, ME, BrEx, PMAR	HIV, HepB&C, MBA, FBC, ME, BrEx, PMAR, fPSA, MSU	

When applying for Business future cover option the mandatory medical requirements will be based on three times the initial sum insured applied for (up to the available maximums for the cover type).

When applying for standalone TPD or Trauma, 50% of the sum insured should be added to the Death cover for determining mandatory medical requirements.

Health events				
Benefit amount	Age next birthday			
	up to 45	46-50	51-55	55-65
up to \$500,000	–	–	–	–
\$500,001 – \$1,000,000	–	–	–	HIV, HepB&C, MBA, FBC, EE
\$1,000,001 – \$2,500,000	–	HIV, HepB&C, MBA, FBC, EE		
\$2,500,001 – \$3,000,000	HIV, HepB&C, MBA, FBC, EE			HIV, HepB&C, MBA, FBC, ME, SE, fPSA
\$3,000,001 – \$4,000,000	HIV, HepB&C, MBA, FBC, ME	HIV, HepB&C, MBA, FBC, ME, fPSA, SE, MAMM		

Income protection & Business expenses		
Benefit amount	Age next birthday	
	up to 45	46+
up to \$10,000	–	–
\$10,001 – \$15,000	–	MBA, EE, HIV, HepB&C
\$15,001 – \$20,000	MBA, EE, HIV, HepB&C	
\$20,001 – \$40,000	MBA, ME, HIV, HepB&C, FBC, PMAR	
\$40,001 – \$60,000	MBA, ME, HIV, HepB&C, FBC, PMAR, MSU, SE	

When applying for Business expenses, medical requirements should be based on the greater of the Income protection insured monthly benefit and the Business expense insured monthly benefit.

Sumo

Death, TPD, Trauma				
Benefit amount	Age	Death	TPD	Trauma
\$2,000,000 – \$2,999,999	up to 45	–	n/a	HIV, HepB&C, MBA, FBC, ME
	46-55	–	n/a	HIV, HepB&C, MBA, fPSA ¹ , FBC, ME, SE
	56+	–	n/a	HIV, HepB&C, MBA, fPSA ¹ , FBC, ME, SE, PMAR
\$3,000,000 – \$4,999,999	All	HIV, HepB&C, MBA, ME, SE, PMAR		HIV, HepB&C, MBA, fPSA ¹ , FBC, ME ³ , SE, PMAR
\$5,000,000 – \$7,499,999	All	HIV, HepB&C, MBA, ME, SE, PMAR		HIV, HepB&C, MBA, fPSA ¹ , FBC, ME ⁴ , SE, PMAR, PFTs, MSU, UDS, Cotinine ²
\$7,500,000 – \$10,000,000	All	HIV, HepB&C, MBA, ME, SE, PMAR	HIV, HepB&C, MBA, fPSA ¹ , ME ⁴ , SE, PMAR, PFTs, MSU, UDS, Cotinine ²	HIV, HepB&C, MBA, fPSA ¹ , FBC, ME ⁴ , SE, PMAR, PFTs, MSU, UDS, Cotinine ²
\$10,000,001 – \$15,000,000	All	HIV, HepB&C, MBA, ME, SE, PMAR	HIV, HepB&C, MBA, fPSA ¹ , ME ⁴ , SE, PMAR, PFTs, MSU, UDS, Cotinine ²	n/a
\$15,000,001 – \$24,999,999	All	HIV, HepB&C, MBA, ME, SE, PMAR	n/a	n/a
\$25,000,000+	All	HIV, HepB&C, MBA, fPSA ¹ , ME ⁴ , SE, PMAR, PFTs, MSU, UDS, Cotinine ²	n/a	n/a

¹ fPSA required only for males over age 50.

² Cotinine required only for non-smokers.

³ Mammogram required in females over age 40 who have a family history of breast cancer under age 60.

⁴ (a) Mammogram required in females over age 50, or females over age 40 who have a family history of breast cancer under age 60.

(b) faecal occult blood test over age 40 with a family history of bowel cancer under age 60.

(c) abdominal ultrasound in all cases over age 60.

Income protection			
Benefit amount	Age	1 or 2 year benefit period	5 or 10 year benefit period or to age 65
\$30,000 – \$39,999	All	HIV, HepB&C, FBC,ME, SE, PMAR	HIV, HepB&C, FBC,ME, SE, PMAR
\$40,000 – \$60,000	All	HIV, HepB&C, FBC, ME, SE, PMAR	HIV, HepB&C, MBA, fPSA ¹ , FBC, ME ⁴ , SE, PFTs, MSU, UDS, Cotinine ² , PMAR

¹ fPSA required only for males over age 50.

² Cotinine required only for non-smokers.

³ Mammogram required in females over age 40 who have a family history of breast cancer under age 60.

⁴ (a) Mammogram required in females over age 50, or females over age 40 who have a family history of breast cancer under age 60.

(b) faecal occult blood test over age 40 with a family history of bowel cancer under age 60.

(c) abdominal ultrasound in all cases over age 60.

Understanding our medical requirements

What is it?		What should the applicant expect?	How long is it valid?
Life Insured's Statement		A Declaration of health may be required between 3 and 6 months	6 months
HIV (Human Immunodeficiency Virus) Antibody Test	A sample of blood is drawn to test the body's reaction to exposure to the virus	A blood sample to be taken from a vein – usually from the arm	12 months
MBA20 (Multiple Biochemical Analysis) including HDL/LDL cholesterol	A blood profile which test the blood lipids (or fats) such as cholesterol Also tests liver function and blood glucose	A blood sample to be taken from a vein – usually from the arm	12 months
Hepatitis B and C antibodies and antigens	Hep B and C serologies detect whether the liver has been infected with either virus	A blood sample to be taken from a vein – usually from the arm	12 months
Express exam	Consists of a limited medical examination including height, weight, blood pressure readings and urine sample results	To attend an appointment (or have a qualified examiner visit the client) where blood pressure readings, height/weight measurements and urine sample to be taken	12 months
FBC (Full Blood Count)	A blood profile which shows the amount of various types of cells, or substances available in your blood	A blood sample to be taken from a vein – usually from the arm	12 months
HbA1C (Glycated Haemoglobin)	A blood test which shows an average of the blood glucose levels over previous 10–12 weeks	A blood sample to be taken from a vein – usually from the arm	Generally valid for 6 months

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What is it?		What should the applicant expect?	How long is it valid?
ACR (urine Albumin/ creatinine ratio)	A random urine sample for simultaneous measurement of albumen and creatinine	A urine sample to be collected	Generally valid for 6 months
PSA including free PSA (Prostate Specific Antigen) Males only	A blood profile which tests the blood for cancer cells	A blood sample to be taken from a vein – usually from the arm	12 months
MSU (Microscopic urinalysis)	Examination of a urine sample including testing for glucose, blood, ketones and proteins	A urine sample to be collected	12 months
Medical examination	Consists of a medical examination covering all major body systems For female applicants, applying for larger sums insured a breast examination will be included	To attend an appointment (can be completed at client's home) where blood pressure readings, height/weight measurements, heart sounds and urine sample to be taken	12 months
PMAR (Personal Medical Attendant's Report)	A report requested by an Underwriter when more detail is required in regard to a particular sickness or injury, or where the sum insured exceeds set limits	This report does not require any interaction from the applicant, unless there is query pertaining to the doctor's details	Generally valid for the current application only
Exercise ECG (Exercise/stress Electrocardiogram)	A test which measures the electrical activity of the heart during a time period, while the client is on a bicycle or treadmill	To have the examiner connect leads to the chest and limbs to record the electric current across those leads. The applicant will need to be in comfortable attire for this test	12 months

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What is it?		What should the applicant expect?	How long is it valid?
Pulmonary function test	A test which measures the lung function	A test of how much air you can exhale and how forcefully, by blowing into the mouthpiece of a spirometer whilst sitting	12 months
Cotinine	A blood test which measure for levels of nicotine to determine smoking status	A blood sample to be taken from a vein – usually from the arm	12 months
Urinary drug screen	A urine test to determine the presence or absence of specific drugs.	A urine sample to be collected	12 months
Breast exam	An examination by GP to detect any abnormalities in the breast	An physical examination by GP	12 months
Mammogram	An image of the breast to detect the presence of abnormalities	An image obtained by mammography	12 months
Abdominal Ultrasound	An image of the organs in the abdomen to detect the presence of abnormalities	An image obtained by ultrasonography	12 months
Faecal occult blood test (FOBT)	A test which detects blood in your bowel motions	A stool sample to be collected	12 months

Arranging medical requirements (excluding PMARs)

Zurich would like to make it easier, and in many cases faster for you by assisting in collecting and organising the medical requirements on your behalf, through our preferred paramedical provider. If you wish to take advantage of this service, ensure that you authorise this in the Adviser Report section of the Application form.

If you choose to arrange this yourself, the requirements on the quote (and included in the tables) are indicative only based on the sum insured, and do not include any tests required by Underwriting. Please await advice from the initial underwriting assessment before making arrangements to minimise any inconvenience for you or your client.

To contact our preferred paramedical providers, see the details below. Note that all requirements (whether organised by yourself of Zurich) can be tracked on the paramedical provider's portal.

Where underwriting requests medical evidence to support an application, Zurich is responsible for the cost and will pay a paramedical provider directly. Alternatively, if the client elects to use their own doctor, we can arrange reimbursement on receipt of the paid invoice.

Paramedical provider	Contact details
UHG (Unified Health Group)	Phone: 1300 558 583 Fax: 1800 707 697 Email: adviser.relations@uhg.com.au Online: https://unifier.uhg.com.au
Lifescreeen	Phone: 1800 673 123 Fax: 1800 804 758 Online: www.lifescreeen.com.au

PMAR requests

Where a PMAR is required, Zurich will organise these via UHG, who is Australia's largest provider of medical report retrieval services for the insurance industry, within agreed service levels with Zurich. UHG will manage all aspects of the request from initiating the request with the doctor/clinic, following up the progress of the report, making payment, and returning the completed report to Zurich.

Section 6

Financial underwriting

Financial underwriting

Financial underwriting is where we consider information in the Life Insured's Statement and supporting evidence to ensure the level of cover proposed is appropriate for the client, and their needs.

It is important to provide as clear a picture as possible for the Underwriter to understand the client's financial situation, the purpose of the cover required and how the level of cover was calculated. When we are financially assessing cover we consider: product type, level of cover, purpose and need for cover (personal and business), income and how it was generated, the nature of the occupation, business size and structure, number and ages of dependants, assets and liabilities and the total level of industry wide cover in place.

ZXpress will calculate any mandatory financial requirements for your client based on the cover entered in the quote (including multiple policies, or where superannuation optimiser has been selected).

Refer to the following tables, using the total sum to be insured with Zurich and any other insurers, for requirements. In all cases we encourage you to provide as much information as possible (including a copy of your SOA so that we can underwrite according to the advice you have given the client).

Further information in addition to the requirements shown in the following tables may be required on a case by case basis.

Mandatory financial requirements

To help you understand the financial requirements please refer to the following table:

Requirement	Description
PITR	Personal Income Tax Returns (Notices of Assessment not required)
BETR*	Business Entity Tax Returns
Financial Statements*	Include Profit and Loss Statements and balance Sheets for all business entities
SOA	Statement of Advice May be requested (or provided) to explain recommendation for the cover proposed

* To be provided for all entities that the client has an ownership interest in or some control over (directly or otherwise).

Full Financials

Financial requirements are dependent on a person's type of employment, ie whether they are an employee only or they are self-employed or a business owner as follows:

Full Financials	
Employees Only	We require any one of the following: <ul style="list-style-type: none">• PITRs for the past two years• PAYG Summaries or Group Certificates for the past two years• Signed and dated letter from employer on letterhead confirming employment status, clearly stating the remuneration package including details of salary/wage, superannuation and other benefits
Self-Employed or Business Owner (this includes clients who are employees of their own business)	<ul style="list-style-type: none">• PITRs for the past 2 years• BETRs for the past 2 years• Financial statements for the past 2 years

Financials will be required for all entities that make up the business structure that the client has an ownership interest in or some control over (directly or otherwise).

Where an employee has had a recent pay increase, to a higher level of income on which the benefit is to be based, please also provide the client's 2 most recent payslips.

For Sumo cover (regardless of the level of cover) we also require a completed Financial Questionnaire and will require full financials for the past 3 years.

Additional business requirements may be required where the purpose of the cover is for business reasons.

Lump sum – Mandatory financial requirements

Death, TPD and Health events				
Occupation category	A1, A1M, A1L, A2	Other	A1, A1M, A1L, A2	Other
	Personal		Business	
up to \$3,000,000	–		–	
\$3,000,001 – \$6,000,000	–	Full financials	–	Full financials
\$6,000,000 +	Full financials			

Trauma		
	Personal	Business
up to \$1,500,000	–	–
\$1,500,001 – \$2,000,000	Full financials	

Business cover

The following table outlines the additional business requirements where the purpose of cover is for business reasons. For some cases, Zurich may also require additional information to assess the need for the cover.

Type of cover	Business requirements
Buy/Sell Shareholder Protection	<p>Enables a business to continue with limited disruption in the event of death, injury or illness of a business partner.</p> <p>To assess, Underwriting will need to understand:</p> <ul style="list-style-type: none"> • Value of the business and the valuation methodology, for example, a multiple of net profit • Individual’s ownership interest in the business. • Is there a partnership or shareholders agreement in place? If so, what does it say in the event of death, injury or illness of a business partner.
Key Person Insurance	<p>Enables a business to cover any financial loss (including revenue or capital) to the business due to the death, injury or illness of a key individual in a business.</p> <p>To assess, Underwriting will need to understand:</p> <ul style="list-style-type: none"> • What are the expertise, experience and knowledge etc of the individual that make them a key person • Ability of the business to replace this person in the business (both financially, and resource wise) • Is the key person to be insured a condition of business lending? • What the other owners and employees in the business do or don’t do that contributes to the individual being a key person • Details of how the potential loss was calculated in determining the level of cover
Debt/Loan Protection	<p>Enables a business to protect their financial position by covering the value of a loan or debt that is required for business operation, where business operation can be affected by death, illness or injury of person/s responsible for the debt.</p> <p>To assess, Underwriting will need to understand:</p> <ul style="list-style-type: none"> • Details of the loans/debts, including details of the lender, borrower, purpose, type, amount, term and interest rate of the outstanding loan/debt. This could be provided in the form of a signed and dated letter on letterhead from the financial institution or a loan schedule

Business future cover option (BFCO)

When the Business future cover option is selected, the life insured can increase their benefit amount without further medical underwriting on the occurrence of a valid business event.

The financial requirements for BFCO are determined according to the purpose of the cover. A Financial Questionnaire or SOA and business requirements (according to the purpose of the cover) will be required in all cases.

It is very important in the initial application that the business purpose is clearly identified and a clear methodology is outlined as to how the cover was calculated for BFCO.

When exercising the option:

- Business increases request will need to be completed (for example, in the form of a letter requesting the increase)
- Business requirements relevant to the purpose of the cover will be required,
- The increase should be for the same business event that the cover was originally taken out for, and
- The increase should be determined using the same or similar methodology.

Please note, this option may not be available where Underwriting offers modified terms.

Income protection and business expenses – Mandatory financial requirements

When a client is seeking an insured monthly benefit amount equal to or greater than the amounts shown in the table below, full financials will be required. Please note that full financials will be required for all endorsed agreed value contracts irrespective of the insured monthly benefit applied for.

Agreed value		
Occupation category	Insured monthly benefit	Income equivalent (pa)
A1/A1M/A1L	\$20,000	\$320,000
A2	\$15,000	\$240,000
A3	\$15,000	\$240,000
A4	\$15,000	\$240,000
B1/B2	\$10,000	\$160,000
B3	\$10,000	\$160,000
SR	\$7,500	\$120,000

Indemnity & business expenses		
Occupation category	Insured monthly benefit	Income equivalent (pa)
A1/A1M/A1L	\$20,000	\$320,000
A2	\$20,000	\$320,000
A3	\$20,000	\$320,000
A4	\$20,000	\$320,000
B1/B2	\$20,000	\$320,000
B3	\$20,000	\$320,000
SR	\$10,000	\$160,000

Special risk occupations are limited to 75% of salary with maximum of \$10,000 per month (ie. salary of \$160,000 pa).

When applying for both income protection and business expenses, the financial requirements are based on the highest insured monthly benefit applied for.

Indemnity, agreed value and endorsed agreed value

When applying for income protection the type of contract selected will determine when financial evidence is required (as shown in the table above) and what will happen in terms of the claims process as shown in the table below.

Type of cover	Meaning
Indemnity	No mandatory financial evidence required for insured monthly benefits up to \$20,000 per month. Full financials will be required in the event of a claim to determine claimable income and the total disability benefit payable
Agreed value	No mandatory financial evidence is required up to the insured monthly benefit levels according to occupation category. Full financials will be required in the event of a claim to determine claimable income and the total disability benefit payable.
Endorsed agreed value	Full financials are required at application/underwriting stage and the insured monthly benefit is payable in the event of a total disability claim

Please note, Underwriting reserves the right to alter the type of contract based on the information received during the assessment process.

You can request to retrospectively convert an indemnity or agreed value contract to endorsed agreed value. Please contact Underwriting for details.

Financial underwriting – income protection

When applying for income protection, we recommend preparing your clients application and financial underwriting requirements by:

- understanding the nature of your client’s occupation and/or how their business generates income (where they are self-employed or a business owner)
- understanding the business structure (where they are self-employed or a business owner)
- determining the requirements to support the benefit level and facilitate financial underwriting of the application based on whether they are an employee only or self-employed (or a business owner)
- determining your client’s income and calculating their benefit level.

Please refer to the Zurich Income Protection Calculator when determining your client’s income and calculating the benefit level.

Where the client is self-employed or a business owner the client’s income is calculated based on all entities that make up the business structure (that the client has an ownership interest in or some control over, directly or otherwise). Income does not include investment income (such as rental income from third parties and interest) and generally does not include dividends, distributions and/or drawings.

Financial underwriting – business expenses

Completion of the Business Expenses Questionnaire will be required in all cases.

You will need to advise the type of business expenses cover.

Benefit types	Description
Ongoing fixed expenses	<p>The benefit payable in the event of a claim is based on the allowable business expenses incurred each month by the life insured up to a maximum of the insured monthly benefit. This may include items such as rent on a business premises, electricity, rates, etc.</p> <p>Up to 100% of allowable business expenses can be insured at application.</p>
Key person replacement	<p>The benefit payable in the event of a claim is based on the key person replacement costs incurred each month to replace the life insured within the business for up to a maximum of the insured monthly benefit.</p> <p>This means that in any given month, if no key person replacement costs are incurred, then no benefit will be payable for that month.</p> <p>Up to 75% of key person replacement costs can be insured at application.</p>

Ongoing fixed expenses

Ongoing fixed expenses covers up to 100% of normal ongoing fixed day to day expenses incurred in the life insured's business (referred to as allowable business expenses). This may include, but is not limited to:

- accounting and audit fees
- bank fees and charges
- cleaning costs
- electricity, gas and water charges
- property rates
- equipment hire
- motor vehicle leases, registration and insurance
- business related insurance premiums (not including this policy)
- interest payments on business loans and mortgages
- office leasing fees
- rents on business premises
- salaries (including superannuation) and payroll tax of employees not directly involved in the generation of income or revenue

- regular advertising costs
- telephone costs
- fees for professional associations
- cost of a locum less any earnings generated by the locum
- printing, postage and stationery costs
- contracted maintenance
- contracted advertising
- contracted security
- any other expenses agreed by us.

The following expenses are specifically not included:

- the life insured's personal remuneration, salary, fees or drawings from the business
- cost of goods or merchandise
- repayments of capital on a loan or mortgage (other than those repayments directly related to one or more identifiable business assets, which are no greater than the minimum repayments permitted or required by the loan or mortgage, and which have been in place for at least six consecutive calendar months prior to the life insured's disability)
- costs of implements of profession
- premiums payable on this policy
- salaries (including superannuation) and payroll tax of employees directly involved in the generation of income or revenue
- depreciation
- salaries of immediate family members (unless they were employed more than 30 days before the date of the life insured's disability).

Key person replacement cover

Key person replacement cover provides a short term solution to help a business fund the cost of a replacement where the business owner is a key person in their business, and a replacement is required if they are unable to do their duties during disablement.

We can cover up to 75% of the cost of a replacement where:

- the life insured is a business owner and a genuine key person in the business
- the business would most likely get a replacement if the client is unable to do their duties during disablement
- the replacement cost can be easily identifiable and clearly outlined

Please note, with Key person replacement cover any income generated by the locum or replacement employee does not offset the benefit payable.

For clients who choose Key person replacement cover, ordinary ongoing fixed income business expenses cover is not available and any income protection cover is subject to at least a 12 month waiting period and normal underwriting.

How to calculate a monthly benefit

Income protection

The cover amount for income protection is determined as per the replacement ratios shown in the table below subject to the minimum and maximum cover amounts.

Income	Replacement ratio %
Up to \$320,000 income per year	75%
\$320,001 – \$560,000 income per year	50%
In excess of \$560,000 income per year	25%

Examples

Employed applicant requesting the maximum 75% of his/her remuneration package (Wealth Protection or Active)	
Base Salary	\$100,000
Car Allowance	\$15,000
Superannuation	\$9,500
Total Remuneration Package	\$124,500
Maximum insured monthly benefit 75% of the first \$320,000	\$93,375
	\$93,375 per year or \$7,781 per month

Self-employed applicant requesting maximum of 75% of income (Wealth Protection or Active)	
A Business Income	\$190,000
– B Business Expenses	\$60,000
= C Net Income	\$130,000
+ Addbacks (income split salary to non-working partner)	\$20,000
Total income	\$150,000
Maximum insured monthly benefit 75% of the first \$320,000	\$112,500
	\$112,500 per year or \$9,375 per month

Self-employed applicant requesting maximum Sumo cover	
A Business Income	\$1,200,000
– B Business Expenses	\$195,000
= C Net Income	\$1,005,000
+ Addbacks (income split salary and super to non-working partner)	\$109,500
Total Income	\$1,114,500
Maximum insured monthly benefit	
75% of the first \$320,000	\$240,000
50% of the next \$240,000	\$120,000
25% of rest over \$560,000	\$138,625
	\$498,625 per year total combined benefit
	\$41,552 per month total combined benefit
	or \$30,000 per month (to age 65 or 70) plus
	\$11,552 per month with a benefit period of up to 10 years

Addbacks such as superannuation or wages paid to your client will also be considered.

If the Super contributions option is selected, the insured monthly benefit will be calculated as 75% of the applicant's salary/net income, plus 100% of their superannuation contribution.

Please refer to the Zurich Income Protection Calculator when determining your client's income and calculating the benefit level.

Business expenses

The cover amount for business expenses will depend on the type of cover as shown in the table below subject to the minimum and maximum cover amounts.

Business expenses type	Replacement calculation
Ongoing fixed expenses	Up to 100% of allowable business expenses
Key person replacement	Up to 75% of key person replacement costs

The total benefit payable in the event of a claim for either Ongoing fixed expenses or Key person replacement cover is limited to 12 times the insured monthly benefit (payable for up to 24 months).

Examples

Self-employed applicant who has requested maximum ongoing fixed expenses	
Total allowable expenses for past 12 months	\$120,000
Maximum insured monthly benefit (based on 100% of allowable business expenses)	\$120,000 for 12 months or \$10,000 per month

Self-employed applicant who has requested maximum key person replacement cover	
Key person replacement cost	\$120,000 per year
at 75%	\$90,000
Maximum insured monthly benefit	\$90,000 for 12 months or \$7,500 per month

Newly qualified professionals offer

We are able to offer maximum lump sum and income protection cover for recent graduates and newly qualified professionals in the eligible professional occupations shown in the table below – without usual financial documentation. Any amount below these maximum amounts is accepted. Cover in excess of these sums insured in the table is available subject to mandatory financial evidence.

Occupation	Life	TPD/ Active HE	Trauma	IP – Endorsed AV (insured monthly benefit)	IP – Indemnity top up (insured monthly benefit)
Accounting graduate	\$2,500,000	\$2,000,000	\$1,000,000	\$4,500	\$3,500
Accounting CPA or CA	\$4,000,000	\$2,500,000	\$1,500,000	\$6,000	\$4,000
Actuarial graduate	\$2,500,000	\$2,000,000	\$1,000,000	\$4,500	\$3,500
Actuarial Fellow	\$4,000,000	\$2,500,000	\$1,500,000	\$6,500	\$3,500
Barrister	\$4,000,000	\$2,500,000	\$1,500,000	\$6,250	\$3,750
Solicitor	\$3,000,000	\$2,000,000	\$1,500,000	\$6,250	\$3,750
Dentist	\$4,000,000	\$2,500,000	\$1,500,000	\$10,000	\$2,500
Dental Specialist	\$6,000,000	\$3,000,000	\$2,000,000	\$15,000	\$5,000
Medical Intern	\$4,000,000	\$2,500,000	\$1,500,000	\$10,000	N/A
Medical Resident	\$4,000,000	\$2,500,000	\$1,500,000	\$10,000	N/A
Medical Registrar	\$4,000,000	\$2,500,000	\$1,500,000	\$10,000	\$2,500
Medical Senior Registrar	\$4,000,000	\$2,500,000	\$1,500,000	\$10,000	\$3,500
General Practitioner	\$4,000,000	\$2,500,000	\$1,500,000	\$10,000	\$5,000
Medical Specialist	\$6,000,000	\$3,000,000	\$2,000,000	\$15,000	\$5,000
Architect	\$2,500,000	\$2,000,000	\$1,000,000	\$4,500	\$3,500

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Occupation	Life	TPD/Active HE	Trauma	IP – Endorsed AV (insured monthly benefit)	IP – Indemnity top up (insured monthly benefit)
Chemist/ Pharmacist	\$2,500,000	\$2,000,000	\$1,000,000	\$5,000	\$3,000
Chiropractor	\$2,000,000	\$2,000,000	\$1,000,000	\$4,000	\$3,500
Engineer	\$2,500,000	\$2,000,000	\$1,000,000	\$4,500	\$3,500
Optometrist	\$2,500,000	\$2,000,000	\$1,000,000	\$5,000	\$3,000
Osteopath	\$2,000,000	\$2,000,000	\$1,000,000	\$4,000	\$2,000
Physiotherapist	\$2,000,000	\$2,000,000	\$1,000,000	\$4,000	\$3,500
Podiatrist	\$2,000,000	\$2,000,000	\$1,000,000	\$4,000	\$3,500
Psychologist	\$2,000,000	\$2,000,000	\$1,000,000	\$4,000	\$3,500
Quantity Surveyor	\$2,000,000	\$2,000,000	\$1,000,000	\$4,000	\$3,500
Vet/Vet Surgeon	\$2,500,000	\$2,000,000	\$1,000,000	\$4,000	\$3,500

Please note, in the above table the Indemnity top-up for Dental Specialists & Medical Specialists is only available for those in private practice; it is NOT available for those who are employees only.

For the purpose of the newly qualified professionals offer where the client becomes totally disabled within 12 months of the policy commencement date, pre-disability income will be calculated based on the higher of the life insured's pre-disability income, and the average monthly income of the client for the period between the policy start date and the date immediately preceding the waiting period applying to the claim.

Qualifying criteria

To be eligible for cover approved under this offer, clients must:

- Have an appropriate degree and/or higher qualification, and have graduated and/or become registered/admitted into their current profession within the last 3 years, AND
- Be fully accredited and registered by the appropriate Australian professional body/ies where required, AND
- Be working a minimum of 24 hours per week and generating an income in one of the eligible professional occupations shown in the table above.

A graduate is someone who has completed the appropriate degree and who has been out of university and working in their professional occupation for less than 3 years.

Home duties

Zurich recognises the contribution made by a non-income producing partner to the everyday running of a household, and the cost associated with this in the event of illness or injury. As a guideline, we generally allow (subject to full underwriting):

Cover	Maximum sum insured
Death	\$2,000,000
TPD	\$2,000,000
Trauma	\$1,000,000
Health Events	\$2,000,000

Where the cover is in excess of \$1,500,000 Death, TPD and/or Health Events, a copy of your SOA should be provided to detail how the sum insured has been calculated. At this level cover will be considered subject to the following financial factors:

- number and ages of dependants
- residential mortgage amount
- working partner's income
- special needs of any children
- previous occupation and income
- future financial plans
- working partner having equal or greater levels of cover.

Net assets & unearned income

When income protection of more than \$20,000 per month is sought, the net assets/unearned income question in the Application must be answered. Where the answer to this question is yes, underwriting will seek further information before considering the application on a case by case basis.

Underwriting will determine available cover on a case by case basis after the review of either a completed Financial Questionnaire or statement of assets and liabilities which clearly outlines the assets and liabilities that the client owns or has some control over (directly or otherwise) and also outlines any unearned/investment income the client has.

Newly self-employed

Where the client has become newly self-employed within the last 12 months, we will consider cover on an indemnity basis and your Zurich underwriter may apply a newly self-employed clause (also referred to as a pre-disability income clause).

Where the client becomes totally or partially disabled within 12 months of the policy start date, the pre-disability Income clause allows for pre-disability income to be calculated based on the average of your client's monthly income for the period between the date they became disabled and the policy start date.

After 2 years, the client can elect to convert the Indemnity policy to an agreed value or endorsed agreed value policy with full supporting financial evidence.

If you have a client who has recently become self-employed, it is important to complete all the income figures in the application including their previous income figures from prior to their becoming self-employed. Please note, underwriting may request additional information that supports the benefit level.

On-going income

Where the client is self-employed or a business owner and in the event the client is unable to work the business is likely to continue to operate, generate revenue and make a profit we may apply an ongoing income clause.

The application of any on-going income clause will be on a case by case basis depending on the individual circumstances, and the estimated level of likely on-going income (profit after add-backs) of the business. If a clause is applied, it will generally be a 6 month on-going income clause, which commences after 6 months on claim.

During the months on claim that the ongoing income clause applies it has the effect of making the benefit amount being proportionate to the income loss. It is calculated on a monthly basis using the following formula.

$$\frac{\text{pre-disability business income} - \text{post-disability business income}}{\text{pre-disability business income}} \times \text{the monthly amount we would pay if the life insured was claiming for a Total disability benefit without an on-going income clause}$$

Please contact your Zurich underwriter, who will be able to assist you with further clarification.

Students, unemployed and other non-working persons

Cover of up to \$1,000,000 is generally available for Death, Health events or Modified definition TPD and \$500,000 for Trauma. Any cover in excess of these amounts will require further information (eg. SOA or methodology outlining the need for cover).

Superannuation cover

For underwriting purposes, the amount of benefit taken under the Super contributions option is added to the benefit for income protection and the financial and medical requirements are based on the total sum insured.

If the Super contributions option is requested, then the following evidence will be required for employees if they request an amount that is greater than the usual superannuation guarantee charge, and will be required for all self-employed people.

- employee only – a letter from the employer (outlining the super contributions by the employer) or superannuation statement – only if the contribution is greater than the legislated minimum Superannuation Guarantee amount or if the maximum contribution base is exceeded.
- self-employed or business owner – superannuation statement in all cases.

The maximum Super contributions option cover amount we will insure is 15% of income.

Section 7

Occupation guidelines

Occupation guidelines

In general, occupations present few concerns in the assessment of Death cover or Trauma cover.

In contrast, occupation is of vital importance when assessing Income protection, TPD and Health events cover. The appropriate categories will depend upon the actual duties performed and cannot always be based upon occupational title. For example, 'company director' does not give an indication of the actual duties performed.

A breakdown of these duties is needed to determine a classification. It is therefore important to provide details in the application confirming your client's duties and the percentage of time spent in those duties. The following pages provide some guidance on Zurich's occupation ratings.

A comprehensive list of Zurich's occupation ratings, along with qualification and duties requirements, is available at the click of a button on *ZXpress*. Simply start a new quote for any cover type, create a new life and type in an occupation.

Death and Trauma covers

For the few hazardous occupations that require an occupational loading, that loading is expressed as an extra premium per \$1,000 sum insured (known as 'per mille' loading). For example, an additional \$2 per \$1,000 based on a sum insured of \$300,000 will result in an extra premium of \$600 per year in addition to the standard base premium.

Total and permanent disablement (TPD) cover

For this insurance, our liability is related to the risk of an individual being permanently unable to work as a result of an sickness or injury.

TPD occupation classification	'own occ' TPD	'any occ' TPD
1 Professional white collar	✓	✓
2 Other white collar	✓	✓
3 Skilled tradespeople	✓	✓
4 High risk skilled manual workers	✗	✓
5 Unskilled manual workers	✗	✓
U Uninsurable risks for TPD cover	✗	✗

Health events cover

For this insurance, our liability is related to the risk of an individual suffering a listed health event.

Health event classification	Health event occupation
H1	White collar / minimal risk
H2	Light risk occupations and home duties
H3	Skilled manual workers and trades
H4	Unskilled manual workers
H5	Excessive risk

Income protection and business expenses cover

For these insurances, our liability is related to the risk of an individual being unable to earn an income in their occupation as a result of sickness or injury.

Consequently the more hazardous an occupation, the greater the risk and the higher the resulting premium.

Please note where there is no qualification for the occupation, we require a minimum of 2 years experience.

Income protection occupation classifications	
A1	<p>Selected professional occupations where membership of a professional or government body is required – for example: actuary, barrister or chartered accountant (medical professions are not eligible for this group).</p> <p>or</p> <p>Executives or other professionals in other occupations, who meet the following criteria:</p> <ul style="list-style-type: none"> • work is confined to office environment only, plus • no unusual hazards, plus • current role has been held for a minimum of 2 years, plus • minimum net earnings of \$120,000 p.a., plus • university degree pertaining to occupation or • without university degree and current role has been held for minimum of 5 years.
A1M	Qualified practitioners in the medical field – for example surgeon, dentist
A1L	Qualified practitioners in the legal field – for example solicitor, barrister

(continued next page)

Income protection occupation classifications

A2	<p>Other professional occupations with tertiary qualifications where work is confined to an office environment.</p> <p>Executives who meet the following criteria may also qualify:</p> <ul style="list-style-type: none">• no unusual hazards,• the same or similar position has been held for 2 years, and• minimum net earnings of \$100,000
A3	<p>Other office based managerial, administrative and clerical occupations that involve absolutely no manual or field work</p>
A4	<p>Professional/technical and/or mobile occupations that involve car travel/field work and occasional hands on/light manual work</p> <ul style="list-style-type: none">• for example real estate agent, building inspector or dental nurse
B1	<p>Positions involving supervision of manual work or involvement in a small amount (less than 10%) of light manual work in highly skilled occupations. Most retail sales positions are also included</p> <ul style="list-style-type: none">• for example a building foreman or trade supervisor
B2	<p>Tradespeople and other qualified manual workers</p> <ul style="list-style-type: none">• for example auto electrician, screen printer or registered nurse
B3	<p>Skilled manual workers in higher risk trades, with at least two years experience</p> <ul style="list-style-type: none">• for example farm manager or diesel mechanic
SR	<p>High risk occupations, including semi-skilled manual workers, unqualified but experienced tradespeople and those in some occupations with increased hazards. In most cases at least two years experience will be required</p> <ul style="list-style-type: none">• for example concrete contractor, roof tiler or plant operator
U	<p>Uninsurable risks for income protection insurance</p>
Refer	<p>Refer to an Underwriter for consideration</p>

Occupation categories

Income protection examples:

- Managing Director of a computer company holding a degree in computer science, with a salary package of \$150,000 – category A1
- Accountant with BEc CPA earning \$93,000 pa – category A1
- Doctor holding a MBBS degree working in a public hospital – category A1M
- Advertising manager with a relevant degree earning \$100,000 pa employed by a major advertising agency – category A2
- Licensed electrician with five employees sub contracting, supervising only 90% of the time – category B2

Clients with two occupations

If both occupations are insurable, classification will usually be based on the occupation presenting the higher risk. If the second occupation is unrelated, the maximum insured monthly benefit will be based on the income derived from the principal occupation only, ie. the occupation where your client works the majority of their hours.

Please note if your client has more than 2 occupations, cover is not available.

Part-time workers

Clients must work on a permanent part-time basis and average at least 24 hours per week to be eligible for income protection insurance. This averaging does not include seasonal or casual occupations such as harvesting.

Farmers

We are able to consider Income protection for farm managers under occupation B3, and Any occupation TPD cover under occupation class 4. This offer is available for farm managers only, and does not include non-manager farm workers (e.g. labourers, jackaroos, shearers etc).

Income protection is only available on an Indemnity basis with a 5 year benefit period where full financials are NOT provided. Farmers who elect to provide full financials can do so for consideration of agreed value or endorsed agreed value, subject to normal underwriting (with all benefit periods up to age 65 available).

Where farmers are seeking cover to provide funding for a replacement to do their duties during disablement so the farm can continue to operate we are able to provide, as an alternative, Business Expenses Key person replacement cover where we can cover up to 75% of the cost of a replacement.

Please note, with Key person replacement cover any income generated by the locum or replacement employee does not offset the benefit payable.

Seasonal/casual workers

Casual workers often work part time hours but can, at times, be required to work excessive hours. Work and hours are not guaranteed and, as a result, income earned is often variable, and/or inconsistent. This creates uncertainty from an underwriting perspective.

If a client has at least 3 years experience in their role and has been with their current employer for 2 years, working consistent/set days of at least 24 hours per week, then IP cover may be considered with a 30 day wait, 5 year benefit and on an indemnity basis. Please discuss these cases with our Underwriting team.

We will not consider any income protection cover for clients who are employed seasonally.

Apprentices

For apprentices in non hazardous trades and in their second or third year, income protection cover may be considered under an SR occupation rating and under indemnity cover only. TPD cover may also be considered under occupation class 5 with an Any occupation definition.

Apprentices in their 4th year may generally be considered for cover based on the relevant trade qualification. We are unable to consider any income protection for first year apprentices, however cover may be considered under Modified definition TPD or Active Health events.

Mining and Oil/Gas industries

These industries often require applicants to be located in remote areas of Australia. As a result of this, income can include living away from home allowances, penalty rates and other benefits.

Often this can result in higher than average incomes for the equivalent occupations based in cities and towns.

For these reasons the level of income protection cover available will be subject to the following restrictions:

- Business Expenses cover is not available
- The maximum insured monthly benefit will be restricted by occupation category as per below:
 - A4, B1 and B2 occupation classes with > 2 years experience in the industry: \$8,000 per month
 - B3 and Special Risk with > 2 years experience in the industry: \$6,250 per month.

These insured monthly benefit restrictions will apply to cover being applied for as part of the quote/application only.

Applicants with existing income protection cover that is being retained will have their application referred to Underwriting for further assessment.

- Fly-in fly-out workers may attract further restrictions – refer to Underwriting
- Applicants with < 2 years experience – refer to Underwriting, and generally will be limited to Indemnity only with a 5 year benefit period

Note these guidelines apply to occupations where the applicant is located in Australia or Australian waters only.

Important notes

Assessing the appropriate occupational category will depend on the actual duties disclosed in the Life Insured Statement. These may be different to what is implied in the applicant's job title. The premium rate will depend on final assessment by the Underwriter in all situations.

A tertiary qualification does not automatically mean that a category A1, A1L or A1M classification will apply.

What if my client does not fit into an occupation category?

To allow our Underwriting team to provide you with an accurate occupation pre-assessment, please obtain the following information:

- age and gender of applicant
- job title
- industry
- duties – what percentage are manual? are there any hazardous duties?
- income and income history for the previous 2 years
- qualifications
- length of time in the current role – if this is less than 2 years, what was the applicant's previous occupation?

Please refer to contact details for Underwriting pre-assessments.

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Section 8

Other underwriting guidelines

Other underwriting guidelines

Activity guidelines

It is important to consider whether a particular sport or pastime would normally incur an additional premium loading or exclusion for a particular type of insurance cover. Where a person participates in an activity on a professional basis, Underwriting will consider this as part of the Occupation Assessment. Please refer to our occupation guidelines or call Underwriting to discuss.

Example: If you participate in amateur football and you have an 'A' occupation class, we will apply an additional 25% loading or 30 day football exclusion. All other occupations will have applied an additional 25% loading or 90 day football exclusion. The Day 4 accident option is not available.

If the particular activity is not listed in the Activity guidelines table (available online or from your BDM), full details should be supplied in our Life Insured's Statement. Premium loadings for Death, Trauma and Health Events cover are expressed as an extra premium for every \$1,000 sum insured (per mille).

Note: for Death cover and Trauma cover, where a per mille loading is indicated, an exclusion may be possible. Please discuss the option with Underwriting.

Example: Travelling on a commercial airline is considered acceptable for clients. However, private flying for 400 hours per year would constitute a premium loading or exclusion due to the increased level of risk. Logically it is unfair to increase premium rates for all people applying for the same insurance simply because a small proportion participate in activities that are considered high risk.

Information must be provided for each activity and it is necessary that a full and precise description be given.

A comprehensive list of Activity guidelines is available from your BDM.

Bankruptcy

We will in the first instance require a bankruptcy questionnaire to determine the reason for bankruptcy, dates and other implications of bankruptcy. If the life insured has been declared bankrupt and has not been discharged, the only cover available is Death cover and Trauma cover under Wealth Protection.

Refer to Underwriting before submitting an application for Death or Trauma cover for consideration on a case by case basis.

Discharged bankrupt

Clients who have been declared discharged from bankruptcy may be considered if they are self employed and have been operating a profitable business for a minimum of three years, or working as an employee only for a minimum of 12 months. If discharged within the last 3 years, full financials for the past 3 years and completion of the bankruptcy questionnaire will be required.

Liquidation/Administration/Receivership

Refer to Underwriting for consideration of individual circumstances on a case by case basis.

BMI/obesity

BMI is determined by weight in kilograms divided by height in metres squared. A healthy BMI is between 20 and 25. A BMI below 20 indicates that a person may be underweight; a BMI above 25 indicates that a person may be overweight.

Zurich will generally allow standard rates for clients with a BMI up to 35 if there are no other health concerns. Where a client has a BMI over 34, additional medical information may be requested.

For clients with a BMI above 35 we recommend contacting Underwriting for a pre-assessment.

Genetic testing

Applicants who have immediate family members (parents, siblings) with a history of significant medical conditions such as heart disease or cancer, may have additional premium loadings applied provided the underwriting decision is based on sound actuarial data. We will not initiate any genetic tests on applicants but if they disclose they have undergone a genetic test previously, we may request that a copy of their results be made available to Zurich for the purposes of risk classification.

Needlestick injuries

Needlestick injuries can occur in many occupations and Zurich offers an option specifically designed for this. However if your client has suffered from a recent needlestick injury, we require your client to have completed and returned satisfactory results for all of the recommended tests (ie. immediate, 3 month and 6 month tests), before we can offer cover.

Other Insurance

Zurich takes into account total cover across the industry in conjunction with what is being applied for (if not replacing the other cover).

Financially, we underwrite the total amount to be held with Zurich and other insurers, and apply our financial limits on the total.

Medically, we underwrite the cover to be held with Zurich only.

If Zurich cover is replacing other cover, a replacement business clause will appear on the policy schedule. This clause confirms that the new policy is replacing existing cover and is subject to this cancellation occurring. The clause is applied to prevent over insurance situations where medical and financial requirements have not been met.

If you are writing replacement business, you should nominate a date when you would like the new policy to begin which will allow time to cancel the existing cover, avoiding any double up of premium. Zurich will not refund premiums paid while the cover being replaced remains in force.

Overseas travel

For clients intending to travel overseas, cover is subject to the country and area which the applicant is travelling to and the length of stay.

Our guidelines for travel are considered in line with current government warnings and other advice at the time of application.

Please contact Underwriting for further information.

Residency

Zurich cannot offer cover to applicants residing outside of Australia at the time of application. As a Global Insurer, Zurich operates in many countries around the world and has identified risks arising in ensuring compliance with the many and varied licensing laws of foreign lands.

All parties to any policy issued must be Australian residents, including policy owners, lives insured, payors and beneficiaries nominated.

Reviews of exclusions/loadings or other Underwriting decisions

In many circumstances we are able to review our assessment after a given period of time.

Once a decision has been made, your Underwriter will advise if and when a review is possible. This will depend on the actual condition, the date since the last recurrence of symptoms and improved health status.

Should the applicant wish to have a decision reviewed after the policy has been accepted please advise Underwriting in writing.

Sick leave

As we do not have a sick leave offset in our non-super income protection product, we may need to offset sick leave during the underwriting process (benefit payments under income protection with super ownership are restricted by sick leave entitlements).

As a guideline, this will only need to apply where a person's accumulated sick leave overlaps significantly with the waiting period applied for.

As an alternative to the sick leave offset clause, it may be possible to extend the waiting period applied for.

Please contact Underwriting to discuss.

Section 9

Policy maintenance and administration

Policy maintenance and administration

ZXpress quotes

Backdating quotes

Zurich is able to consider backdating the start date of a policy if the Zurich Insurance Application form and the Life Insured's Statement are received by Zurich prior to the requested start date, to allow you some flexibility to align commencement dates where cover is being replaced or to allow cover to be issued prior to your client's birthday.

Zurich must be notified of your intention to backdate, prior to policy completion, and it will be approved by Underwriting taking into consideration the type of cover and the circumstances of the application. A policy cannot be backdated prior to the date of application completion.

Honouring quotes

Where a client has had a birthday after a quote has been prepared but prior to the acceptance of the policy, Zurich may agree to honour the quote provided the application is received within one calendar month from the quote presentation date.

Clients should be made aware that while honouring a quote will initially provide lower premiums (a year one discount), stepped premium will align to the actual age at the first policy anniversary, leading to an exaggerated rise in premiums.

New quotes

If a ZXpress quote is more than one calendar month old when it is received at New Business and the applicant has had a birthday in that month, we will request a new ZXpress quote.

For example, if we receive an application on 1 April, the life insured's birthday is 15 March and the quote date is in February, a new quote will be requested.

Lapses and reinstatements

Should a premium not be received by the due date the policy owner is given 30 days grace. A Cancellation advice will be sent at the end of the 30 days overdue period advising that cover has ceased.

Wealth Protection and Active

In the first 30 days after lapse, we will reinstate cover immediately if we receive a request and all outstanding premiums are paid. Please contact the Zurich Customer Care team to arrange this.

After that period, a Reinstatement application form will be necessary to re-activate the cover.

The basic principle behind the Reinstatement application is to confirm that the applicant is still in good health and not reinstating because of ill health and desire to claim.

If 12 months has elapsed since the last premium was paid we will require a new Zurich Insurance Application form and Life Insured's Statement to be completed. We would then treat the application as new business and there is no guarantee that the application will be accepted or if accepted that the terms will be the same as the original policy.

No claims will be paid where any condition, sickness or injury first occurs or first becomes apparent between the time the policy lapsed and the time the policy is reinstated.

Sumo

Reinstatement of a lapsed Sumo policy will require individual consideration. Please contact the Underwriting team for requirements.

Cancellations and NPWs

Cancellations

Requests to cancel all or part of an application can be made over the phone or in writing by you or your client before an underwriting decision has been made.

After an underwriting decision has been made, cancellation must be provided by the policy owner/s either over the phone or in writing.

Applications Not Proceeded With (NPW)

To ensure that applications are regularly followed up, and reminders are sent regarding outstanding requirements, our system automatically generates reminders and approaching 'NPW' notifications. If there are instances when these deadlines cannot be met, please contact Underwriting for information on approving deadline extensions.

If an application is NPW but the applicant does wish to proceed, Underwriting will need to assess the eligibility of the application, including the time lapsed since the original application and the reason for the delay. Please note that as a minimum requirement we will need all outstanding requirements to be submitted at the point of review.

Please contact Underwriting for further information.

ZLife

ZLife is a convenient and easy to use application, providing you with information about your customers.

The ZLife Mobile App allows you to:

- access key client information via your iOs or Android device
- view policy and application information
- tailor notifications so you can track applications in progress
- access Certificates of currency
- tag VIP clients

More information about ZLife and the ZLife Mobile App is available on our website or via your BDM.

How to request specific alterations

The following pages outline the requirements for alterations to current Zurich policies as applicable. Completed forms should be submitted to the return address provided on the form.

Alterations marked with an asterisk (*) can be completed either in writing or over the phone by policy owners. Some transactions resulting in a reduction of risk may also be processed over the phone where there is a single individual policy owner. For more details, contact Customer Care on 131 551.

Alteration required	Form / Other requirement
Agreed value to indemnity*	<ul style="list-style-type: none"> Letter from all policy owners/trustees and life insured
Alter from Zurich Income Protector Plus to Zurich Income Protector	<ul style="list-style-type: none"> Letter from all policy owners/trustees
Alter from Zurich Income Protector to Zurich Income Protector Plus	<ul style="list-style-type: none"> New Application to add policy options
Benefit period decrease*	<ul style="list-style-type: none"> Letter from all policy owners/trustees
Benefit period increase	<ul style="list-style-type: none"> New Zurich Insurance Application, including LIS (any medical evidence already received for previous applications is usually valid for up to 12 months)
Conversion of Child Cover policy to a death and/or trauma policy	<ul style="list-style-type: none"> Letter from all policy owners New application New quote
Exercise Future insurability option (Income protection)	<ul style="list-style-type: none"> Request to exercise the future insurability benefit (Zurich Income Replacement and Zurich Income Protector/Plus) form
Exercise Future insurability benefit (lump sum, business)	<ul style="list-style-type: none"> Letter from all policy owners/trustees Contact UW for any further requirements
Exercise Future insurability benefit (lump sum, personal)	<ul style="list-style-type: none"> Application to exercise the future insurability benefit form
Exercise Future insurability benefit (Business expenses)	<ul style="list-style-type: none"> Request to exercise the future insurability benefit (Zurich Business Expenses)
Indemnity to agreed value after 12 months of policy issue	<ul style="list-style-type: none"> New quote New Zurich Insurance Application LIS sections 3 (Insurance history), 5 (Occupation) and 6 (Income) Declaration of health (Financial evidence may be required, contact UW) Note: This does not apply to policies that commenced under a continuation option.

(continued next page)

Alteration required	Form / Other requirement
Indemnity to agreed value within 12 months of policy issue	<ul style="list-style-type: none"> • New Zurich Insurance Application • New quote • LIS sections 3 (Insurance history), 5 (Occupation) and 6 (Income) (Financial evidence may be required, contact UW) Note: This does not apply to policies that commenced under a continuation option.
Linked to stand-alone cover where all cover is being retained (eg. Death and TPD becomes stand-alone Death and stand-alone TPD)	<ul style="list-style-type: none"> • New Zurich Insurance Application, including LIS
Linked to stand-alone cover where some cover is being cancelled (eg. Death and TPD becomes stand-alone TPD)	<ul style="list-style-type: none"> • Letter from all policy owners/trustees or new Application
Reject indexation offer/s*	<ul style="list-style-type: none"> • Request to reject indexation increases form
Review medical loading/exclusion	<ul style="list-style-type: none"> • Letter from all policy owners/trustees • LIS
Review occupation category for IP, TPD or Health events (eg. from manual to clerical or from 'any' to 'own')	<ul style="list-style-type: none"> • Letter from all policy owners/trustees (including full duties of the life insured) • LIS
Review of occupational, residency or activity based loading/exclusion	<ul style="list-style-type: none"> • Letter from all policy owners/trustees Contact UW for any further requirements
Sum insured decrease/removal of optional extra benefit*	<ul style="list-style-type: none"> • Letter from all policy owners/trustees
Sum insured increase after 2 years of commencement for Wealth Protection or Active, and sum insured increases at any time for Sumo	<ul style="list-style-type: none"> • New Zurich Insurance Application, including LIS
Sum insured increase within 2 years of commencement (not including Sumo)	<ul style="list-style-type: none"> • New Zurich Insurance Application • Express underwriting form
Waiting period decrease	<ul style="list-style-type: none"> • New Zurich Insurance Application, including LIS (any medical evidence already received for previous applications is usually valid for up to 6 months)
Waiting period increase*	<ul style="list-style-type: none"> • Letter from all policy owners/trustees
Waiting period reduction due to GSC arrangements	<ul style="list-style-type: none"> • Waiting period reduction feature application

(continued next page)

Alteration required	Form / Other requirement
Application for optional extra benefits	
Add Home support option	<ul style="list-style-type: none"> • Application for Home support option
Add Needlestick cover option	<ul style="list-style-type: none"> • Application for Needlestick cover option
Add optional extra benefit/s to policy	<ul style="list-style-type: none"> • New Application to add policy options
Add/Increase Optional Protection Benefits to existing ZSP	<ul style="list-style-type: none"> • Adding/increasing optional protection benefits to existing ZSP application form • ZSP LIS • Letter from life insured/member
General alterations to policy	
Alter or update nominated beneficiaries (non super)	<ul style="list-style-type: none"> • Nomination of beneficiaries form
Alter personal details*	<ul style="list-style-type: none"> • Change of details form
Alter a level premium policy	<ul style="list-style-type: none"> • Letter from policy owner (where there is a decrease in risk, the age at commencement will be used to determine the new premium. Where there is an increase in risk, the current age will be used)
Apply for replacement policy document (when original policy is lost/missing)	<ul style="list-style-type: none"> • Application for replacement policy including statutory declaration + \$100 lost policy fee + original certified ID of all policy owners
Cancel a policy	<ul style="list-style-type: none"> • Letter signed by all policy owners/trustees
Change of financial adviser	<ul style="list-style-type: none"> • Change of financial adviser form
Change to payment instructions	<ul style="list-style-type: none"> • Direct debit request form or instruction over the phone from account/card holder
Exercise premium holiday*	<ul style="list-style-type: none"> • Premium holiday application
Make a binding nomination (risk-only super)	<ul style="list-style-type: none"> • Zurich Binding Death Benefit Nomination brochure and form
Pay insurance premiums by rollover (risk-only super)	<ul style="list-style-type: none"> • Rollover authority form (for one-off or ongoing automatic)
Reclassify contributions (risk-only super)	<ul style="list-style-type: none"> • Contribution advice form
Smoker to non-smoker status	<ul style="list-style-type: none"> • Application for non-smoker rates
Stepped to level or level to stepped*	<ul style="list-style-type: none"> • Letter from all policy owners/trustees

(continued next page)

Alteration required	Form / Other requirement
Reinstatement of cover	
Reinstatement of cancelled policy	<ul style="list-style-type: none"> • New Zurich Insurance Application, including LIS
Reinstatement of lapsed Child Cover policy	<ul style="list-style-type: none"> • New Zurich Child Cover policy application form
Reinstatement of lapsed policy (Wealth Protection/Active only)	<ul style="list-style-type: none"> • Reinstatement application (super/non-super)
Transfer of ownership / Superannuation optimiser application	
Related policies inside/outside super (refer section 4)	<ul style="list-style-type: none"> • New Zurich Insurance Application, including LIS • New quote
Transfer of ownership from: Non-super to non-super SMSF to another SMSF SMSF to non-super	<ul style="list-style-type: none"> • Original Memorandum of transfer form • Original Policy document (or if the policy is lost, Application for replacement policy including statutory declaration + \$100 lost policy fee + original certified ID of all policy owners) <p>OR</p> <ul style="list-style-type: none"> • New Zurich Insurance Application (Application, Declaration and Payment authority sections only)
Transfer of ownership from: Non-super to SMSF Non-super to Zurich trustee SMSF to Zurich trustee	<ul style="list-style-type: none"> • New Zurich Insurance Application (Application, Declaration and Payment authority sections only, plus Zurich Master Superannuation Fund Membership application if ownership is being transferred to Zurich trustee)
Transfer of ownership: Zurich trustee to SMSF Zurich trustee to non-super	<ul style="list-style-type: none"> • Continuation – Conversion of cover form
Transfer between platforms	<ul style="list-style-type: none"> • Refer to requirements outlined in Section 10 – Platform

Existing customers & cover increases from 15 May 2017

Alterations to Wealth Protection policies (series 1 or 2)

Series 1 and series 2 Wealth Protection are a closed Zurich pricing series. They include business written as Wealth Protection from early 1998 to 14 May 2017.

Customers who have series 1 or series 2 Wealth Protection premium rates, particularly those with loyalty or SmartValue discounts, are welcome to keep their policy as series 1 or 2, even if they wish to alter it (ie. increase, decrease, add cover/options, change ownership), however in some instances, it may be necessary to issue a new series 3 Wealth Protection policy.

Please ensure any quotes to alter series 1 or series 2 policies are requested via Adviser Services. It is possible to alter an existing series 1 or 2 Wealth Protection policy via *ZXpress*, however you will need to attach the manual quote provided to you by Adviser Services.

Reminder message on *ZXpress*:

Increases to existing Wealth Protection policies

To increase series 1 or 2 Wealth Protection policies via *ZXpress* or Tele-underwriting, you must attach a manual quote, available from Adviser Services on 1800 500 655. Enter the increase (not the total) amount in *ZXpress* and provide details of existing cover in the application. Manually quoted premiums override those on *ZXpress*.

Change to existing policy	Eligibility	How to apply
Transfer existing series 1 or series 2 policy to series 3 policy	Yes Full underwriting performed	Quote and apply as new business on <i>ZXpress</i>
Increase or add cover/option to existing series 1 or series 2 policy	Yes Underwriting performed on the increase in cover	Quote and apply as new business on <i>ZXpress</i> , attaching manual quote (via Adviser Services on 1800 500 655), Zurich Insurance Application & LIS
Change of ownership or creation of a series 1 or series 2 related policy set	Yes Underwriting performed on the increase in risk (if applicable)	Complete Zurich Insurance Application, Memorandum of transfer or Application to relate policies forms as applicable

- New business commission is payable only on the increase in cover
- Additions will have the same commission type as the in-force policy
- Existing cover moved to a new series policy will retain the same renewal commission, unless that renewal commission amount is not offered in that series.

Alterations to Active policies (series 1)

Series 1 Active includes all business written as Active before 15 May 2017.

From 15 May 2017, Zurich introduced series 2 Active, where separate policies are issued for each lump sum and income protection. Customers who have a series 1 Active policy are welcome to keep their policy as series 1, even if they wish to alter it (ie. increase, decrease, add cover/options, change ownership), however in some instances, it may be necessary to issue a new series 2 Active policy.

Change to existing policy	Eligibility	How to apply
Transfer existing series 1 policy to series 2 policy, no change in cover	No	n/a
Increase or add cover/option to existing series 1 policy	Yes Underwriting performed on the increase in cover	Quote and apply as new business via the Insurance Online Application
Add series 2 income protection to existing series 1 policy	New series 2 Active IP policy issued. Existing series Active policy will remain unaltered. Underwriting performed on the increase in cover	Quote and apply as new business on ZXpress
Change of ownership or super optimise existing series 1 policy	Yes Underwriting performed on the increase in cover (if applicable)	Complete Zurich Insurance Application or Memorandum of transfer forms as applicable

- New business commission is payable only on the increase in cover
- Additions will have the same commission type as the in-force policy
- Existing cover moved to a new series policy will retain the same renewal commission, unless that renewal commission amount is not offered in that series.

Alterations to Sumo policies (series 1)

Series 1 Sumo includes all business written as Sumo before 15 May 2017.

From 15 May 2017, Zurich introduced series 2 Sumo. Customers who have series 1 Sumo policies are welcome to keep their policy as series 1, even if they wish to alter it (ie. increase, decrease, add cover, change ownership), however in some instances, it may be necessary to issue a new series 2 Sumo policy.

Change to existing policy	Eligibility	How to apply
Increase or add cover to existing series 1 policy	Yes Underwriting performed on the increase in cover	Quote and apply as new business via the Insurance Online Application
Change of ownership or super optimise existing series 1 policy	Yes Underwriting performed on the increase in cover (if applicable)	Complete Zurich Insurance Application or Memorandum of transfer forms as applicable

- New business commission is payable only on the increase in cover
- Additions will have the same commission type as the in-force policy
- Existing cover moved to a new series policy will retain the same renewal commission, unless that renewal commission amount is not offered in that series.

Management fees

The current management fees are set out in the relevant PDSs.

If more than one policy is applied for at the same time, for the same life insured, only one management fee will be charged.

Billing dates for monthly payments

The initial billing date will be the date the policy goes into force. If this date is the 29th, 30th or 31st of the month, the policy commencement date will be the 28th of that month.

Our regular billing dates are:

Source	Dates
Bank account	5, 10, 11, 14, 20, 25
Credit Union	
Building Society	
Credit Card	4, 9, 17, 24

The next payment will occur on the next regular billing date unless you tell us otherwise on the Advisers Report in the Zurich Insurance Application form.

We do not pro-rata days; 12 monthly payments will be taken over the period of a year.

Changing policy ownership

A memorandum of transfer (MOT) can be used to transfer ownership on certain policies including:

- Non-super to non-super
- Self Managed Super Fund (SMSF) to another SMSF
- SMSF to non-super.

However, where superannuation entities are involved, there are a number of instances when using an MOT could breach SIS rules. For this reason, Zurich will not accept an MOT for any other type of transfer. Instead, transfers of ownership in all other instances will be actioned via cancel and replace.

Please refer to the Alterations table starting on page 82 for information about requirements.

It is important to note that certain benefits may be restricted or become unavailable when cover is transferred from non-super to super ownership.

Change of financial adviser

We are aware that clients may sometimes make a hasty or ill-informed decision to change their financial adviser without prior intimation. The 'Change of financial adviser' form is intended to alert the client to the impact of altering servicing arrangements on their policies.

If your client decides to switch to a new financial adviser and submits a Change of financial adviser form, Zurich will alert you before processing the change, to give you the opportunity, if required, to make contact with your client.

A fully completed Change of financial adviser form will only be actioned 5 days after we notify you that we have the request, either by phone or email.

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Section 10 Platform

Platform

Our product range is available via investment and superannuation platforms. Please speak with your BDM for details on which platform providers we have an agreement with for the provision of individual insurance.

To help you understand what insurance cover we offer on platform, please see the below table.

	Non Super	Super
Death	✓	✓
TPD	own occupation any occupation domestic duties modified TPD	any occupation domestic duties modified TPD
Trauma	✓	n/a
Health events	✓	n/a
Income protection	endorsed agreed value agreed value indemnity	indemnity

Although restrictions apply to the cover available under super, additional cover can be held in a related policy via superannuation optimiser. More information can be found in Section 4 (Superannuation optimiser).

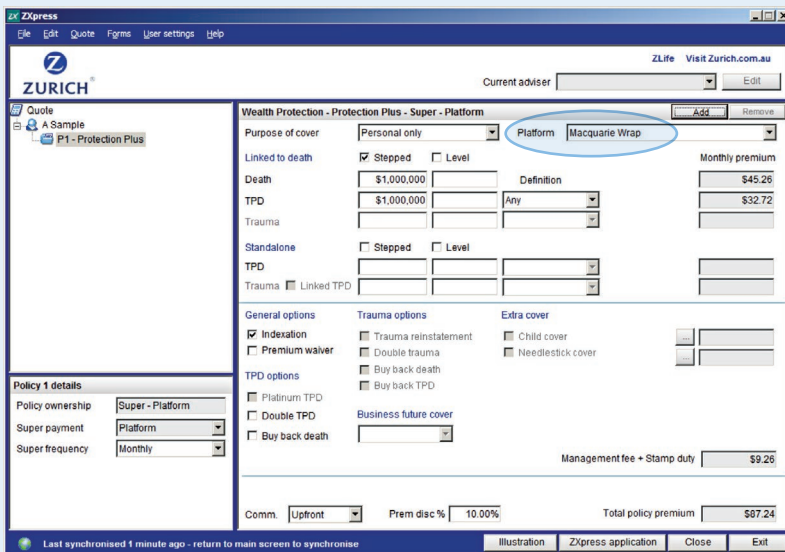
How to apply

When quoting in ZXpress, you should make a selection from the 'Policy structure' list of either:

- Platform super (cover via a superannuation platform)
- Platform non super (cover via an investment platform with non super ownership)
- Platform SMSF (cover via an investment platform with SMSF ownership).

You will also need to select a Platform name and provide a platform member number for the life insured. You don't have to enter the member number if it is not yet available, but we cannot issue a policy without it, so it will become an outstanding requirement if it is not included in the quote.

You can apply using the online eApplication via ZXpress.



Transfer of Zurich policies to and from platform

It is possible to transfer an existing Zurich insurance policy to and from a platform arrangement without underwriting. Please refer to the table below for requirements.

Type of transfer	Requirements
Transfer to non-super platform (including SMSF)	Transfer of existing policy to platform form (non-super)
Transfer to super platform	Transfer of existing policy to platform form (super)
Transfer from non-super platform (including SMSF) no change of ownership	Letter from policy owner AND new Direct debit request form
Transfer from non-super platform (including SMSF) with change of ownership	Letter from policy owner AND new Direct debit request form AND relevant transfer of ownership documentation*
Transfer from super platform with change of ownership	New Zurich Insurance Application form (Application, Declaration and Payment authority sections only)

* Refer to the Alterations table in Section 9, Policy maintenance and administration, for documentation required to transfer ownership.

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Section 11 Claims

Claims

Zurich and life insurance claims

We recognise claim time is the moment of truth not just for the claimant, but for Zurich, as it is the point at which we deliver on the promise. And the more we deliver on that promise, the greater the confidence you and your client will have in recommending Zurich and the importance of life insurance cover.

When you recommend Zurich, you can do so with the confidence that your clients are in safe hands.

Our claims philosophy

Our claims philosophy is based on the assumption that all claims are lodged for genuine reasons, and that our role is to manage claims fairly, look for ways to pay genuine claims promptly, not for ways to deny them.

We aim to manage claims:

- promptly
- fairly
- consistently
- transparently and
- sensitively

We will treat all clients with empathy, be open and honest in our communication

How our team works with you

All claims are allocated to a dedicated case manager, so you have just one point of contact.

Our experienced claims specialists employ a flexible approach when partnering with advisers to seek the best possible outcomes for clients.

Claims procedures

Initial notification

To notify us of a potential claim, call **1800 500 655** and speak to one of our Claims specialists, who can clarify our requirements.

To make the notification process easier we recommend you have the following information:

- policy number(s)
- full name of policy owner(s)
- full name of life insured who is subject of the claim
- date of claim event
- cause/nature of claim
- name, address and telephone number of the person to whom correspondence is to be sent

At this stage we will contact them promptly and put their mind at ease.

If your client, or their representative, calls us directly, one of our specialists will discuss your client's situation with them, explaining how we will manage their claim and what type of information we will require. We will also answer any questions they may have.

Claims kit sent

Following the initial discussion with your client, we will send them a claims kit containing:

- a summary of our claims process
- a list of documentation we require to assess the claim, and how to obtain it, claims forms and authorities specific to that claim
- Frequently Asked Questions (FAQs)

Note: We will generally send the claims kit within 24 hours of the discussion with your client, and will send you a copy of this correspondence.

Initial requirements by claim type

A list of our initial documentary requirements by claim type is set out on the following pages. An easy way to facilitate the prompt and smooth processing of a claim is to ensure all requirements are provided as soon as possible.

Requirements in relation to death claims may vary depending on policy ownership or whether beneficiaries have been nominated.

If you are unsure as to how to satisfy some of the requirements listed, call our Claims team on 1800 500 655 for assistance.

Please note that depending on individual circumstances we may from time to time seek information over and above that listed here.

Dedicated case manager allocated

Completed claim forms must be returned to us.

Please note where a claim form requires completion by a doctor, the claimant will be responsible for paying all associated costs.

The original policy documents (or Lost Policy Declaration if original policy document cannot be located) must be completed for all lump sum claims.

Once initial requirements have been received, a claims case manager will be assigned to the claim, providing you and your client with a single point of contact. The case manager will keep you fully informed of the progress of the claim.

Where a claim is ongoing, we will advise the specific requirements. For income protection and business expense claims, the requirements usually include submission of Progress Claim Forms completed by both the client and their treating doctor.

Additional information may be required in certain circumstances e.g. financial information, reports from your client's treating doctor, appropriately qualified independent medical examination arranged by Zurich. Where we have requested an appointment for your client we will meet the associated costs of that appointment.

Key contact details

Phone: 1800 500 655

Fax: (02) 9995 3732

Email: life.claims@zurich.com.au

Post: Zurich Life Risk Claims
Locked Bag 994
North Sydney NSW 2059

Downloadable claims documents

Our claims kits can also be download from our website at www.zurich.com.au/lifeclaims

Claim requirements

Type of claim	Initial requirements	Who to complete/provide
Income protection	Income Protection Claim Form <i>Part one – Insured’s statement</i> <i>Part two – Physicians report</i>	Life insured and Life insured’s treating doctor
	Claim Declaration and Authority	Life insured
	Medicare and Pharmaceutical Benefits Scheme Release Authority	Life insured
	Certified copy of birth certificate, passport or drivers licence	Life insured
	Additional requirements for agreed value and indemnity policies only Full financials for the 2 years prior to claim (agreed value and indemnity) and full financials for the 2 years prior to risk commencement (agreed value only). Full financials can also include (in addition to those outlined on page 51) trading accounts and Notices of Assessment. Please note, for partial disability claims we may require additional financial information.	Life insured and/or their registered accountant
Business expenses	Business Expenses Claim Form <i>Part one – Insured’s statement</i> <i>Part two – Physicians report</i>	Life insured and Life insured’s treating doctor
	<i>Claim Declaration and Authority</i>	Life insured
	<i>Medicare and Pharmaceutical Benefits Scheme Release Authority</i>	Life insured
	<i>Certified copy of birth certificate, passport or drivers licence</i>	Life insured
	Evidence of: <ul style="list-style-type: none"> allowable business expenses incurred eg monthly Profit & Loss statements, or key person replacement costs incurred (as applicable) and details of any payments received while on claim. Please note, for partial disability claims we may require additional financial information	Life insured and/or their registered accountant

(continued next page)

Type of claim	Initial requirements	Who to complete/provide
Trauma, Health Events and terminal illness	Claimant's Statement Form	Life insured and policy owner
	Treating Specialist Report	Treating specialist
	Claim Declaration and Authority	Life insured
	Original policy documents (or Lost Policy Declaration if original cannot be located)	Policy owner
	Medicare and Pharmaceutical Benefits Scheme Release Authority	Life insured
	Certified copy of birth certificate, passport or drivers licence	Life insured
Death	Death Claim Form	Executor of estate of the life insured
	Full death certificate (original or certified copy), obtained from Registrar of births, deaths and marriages in each state	Executor of estate of the life insured
	Proof of age of deceased – certified copy of birth certificate, passport or drivers licence	Executor of estate of the life insured
	Statutory Declarations 211 and 212	Executor of estate of the life insured
	Certified copy of will (if applicable)	Executor of estate of the life insured
	Letters of administration or probate	Executor of estate of the life insured
	Original policy documents (or Lost Policy Declaration if original cannot be located)	Executor of estate of the life insured
	Certified Identification of the Policy Owner or nominated beneficiaries (if applicable)	Executor of estate of the life insured

(continued next page)

Type of claim	Initial requirements	Who to complete/provide
TPD	TPD Claim Form <i>Part one</i> <i>Part two – physicians report</i>	Life insured Life insured’s treating doctor
	Employer’s Statement (if applicable)	Last employer of the life Insured
	Employment and education history form	Life insured
	Claim declaration and authority	Life insured
	Certified copy of birth certificate, passport or drivers licence	Life insured
	Original policy documents (or Lost Policy Declaration if original cannot be located)	Life insured/policy owner
	Medicare and Pharmaceutical Benefits Scheme Release Authority	Life insured

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