



Financial Adviser Guide

MLC Life Cover Super (LCS) and MLC Personal Protection Portfolio (PPP)



Issue date:
27 October 2008

MLC Nominees Pty Limited
ABN 93 002 814 959
AFSL 230702 RSE L0002998

Trustee for The Universal
Super Scheme R1056778
ABN 44 928 361 101

MLC Limited
ABN 90 000 000 402
AFSL 230694

Welcome to MLC's Financial Adviser Guide.

Your guide to MLC's product, underwriting requirements and practices.

It has been produced to assist you in writing MLC insurance by giving you access to our underwriting philosophy, underwriting requirements and product information.

The guide is comprehensive but you may still have the need to discuss particular issues or aspects of applications with one of MLC's BDM's or experienced underwriters.

Our MLC Service team are there to help you at all times and we encourage you to call us about any underwriting, new business, maintenance or product enquiry you may have.

Underwriting Hotline: 1800 811 861

Underwriting queries, pre-assessments

Adviser Hotline: 133 652

All other insurance queries

Email: insurance_mlc@mlc.com.au

Submitting applications/outstanding requirements

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Insurance Applications

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Insurance Applications

MLC Service Centre process for MLC Life Cover Super and MLC Personal Protection Portfolio

Receipt of New Applications:

Original new business application	Application received	Underwriting assessment	Completions or requirements
<p>Send paper application to: MLC Service Centre PO Box 200 North Sydney NSW 2060</p> <p>Fax 1800 550 081</p> <p>Email insurance_mlc@mlc.com.au</p> <p>Submit online application via mlc.com.au. For further details see page 195.</p>	<p>Application is scanned onto workflow system. It can be tracked on mlc.com.au through 'My Work Tracker'.</p> <p>Application is indexed to a designated service team.</p> <p>Proposal set up on MLC registry system.</p>	<p>Initial underwriting assessment performed.</p> <p>If required, phone calls are made to you or your client to get more information where possible.</p>	<p>Completions Policy issued for accepted applications.</p> <p>Further requirements PMARs requested from Unified Health Care Group (UHG) where applicable.</p> <p>Other outstanding requirements requested from you via mlc.com.au and notification email. Or MLC arrange through UHG.</p> <p>Applications placed in suspense and followed up by you, MLC and UHG.</p>
Outstanding requirements	Requirement received	Underwriting assessment	Completions or requirements
<p>Send requirements to: MLC Service Centre PO Box 200 North Sydney NSW 2060</p> <p>Fax 1800 550 081</p> <p>Email insurance_mlc@mlc.com.au</p>	<p>Requirement is scanned onto workflow system.</p> <p>Requirement indexed to a designated service team.</p> <p>Requirement marked off as received on MLC registry system.</p> <p>Requirement information updated on 'My Work Tracker' on mlc.com.au</p>	<p>Further underwriting assessment performed.</p> <p>Phone calls made to you or your client to clarify any issues.</p> <p>Case potentially referred to a Senior Underwriter Chief Medical Officer or Reinsurer as part of the assessment process.</p>	<p>Completions Policy issued for accepted applications.</p> <p>Amended terms Notification sent to you.</p> <p>Further requirements Other outstanding requirements asked for from you via mlc.com.au and notification email.</p>

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Underwriting Philosophy

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Underwriting Philosophy

MLC is dedicated to **delivering** a superior underwriting service. As part of this commitment we have:

- **State Underwriting Managers** in all Underwriting Teams
- a **Technical Underwriting Team**
- **Large Case Teams to support all states**
- **Field Development Underwriters supporting all states.**

How we make the Underwriting process run smoothly

We **will** give you a unique underwriting reference number when we perform a pre-assessment advice for you to record on your clients' application forms.

- We **will** keep in touch with you regularly when:
 - the final decision includes modified terms or if cover is unable to be offered, the case is challenging or may pose a large risk,
 - there are multiple risk factors—pre-positioning the final decision,
 - there are unusual delays with the assessment process, and
 - additional requirements are subsequently needed because of the information received.

- We **will** offer you expert technical knowledge and advice.
- We **will** simplify and improve the gathering of information by using telephone underwriting practices.
- We **will** let you know our decisions and the reasoning behind them—in plain English.
- We **will** arrange medical evidence if requested by you.

The assessment of your clients' applications is helped by the gathering of data. The underwriter can obtain: PMARs, blood tests, medical examination reports, tax returns, financial accounts, questionnaires, ECGs and any other test or requirement based on the sum insured or disclosed/known history.

The underwriter will always consider the cover applied for, the conditions/terms attached to it, combined with the applicant's overall status. This gives the underwriter a better understanding of the actual risk presented by recognising that the risk may increase or decrease, depending on the benefit and/or policy applied for.

- All personal, medical, financial and other sensitive information will be secured and remain strictly confidential.
- We will observe the industry body's (IFSA) underwriting guidelines and standards.
- We will observe Federal, State and Territory legislation affecting underwriting.

Underwriting Philosophy

Large Case Teams

The Large Case Teams provide:

- Large Case support across states – with teams located in NSW, VIC, QLD and WA;
- specialisation in Large Cases for Business Insurance;
- highly trained Underwriters offering expert advice and support;
- dedicated administration support;
- Field Development Underwriter support;
- accounting support;
- reinsurance support.

A Large Case has been defined as an application, which meets one of the following criteria:

- annual premium greater than \$10,000 for individual lives, or
- sum insured or greater than those listed below.

Cover type	Sum insured
Life	> \$2 million
Total and Permanent Disability	> \$1.5 million
Critical Illness	> \$1 million
Income Protection	> \$15,000 per month
Business Expenses	> \$15,000 per month

What you can do to help

- The more information we have the faster we can assess and approve your clients' application.
- Give us authority for Telephone Underwriting that lets our underwriters call your clients directly to resolve any missing details, or clarify information provided.
- Where possible, provide medical notes and/or additional financial notes and expand on the medical conditions.
- Where possible, explain occupational duties and any risky pastime pursuits fully.
- If you take advantage of our pre-assessment services you are more likely to obtain a satisfactory outcome.
- Create a complete picture of your client and their application
- Check mandatory requirements and arrange as soon as possible. Refer to the ASB quote or the requirement tables in this guide.

Privacy

New Privacy legislation came into effect in Australia on 21 December 2001.

This legislation is based upon a set of National Privacy Principles and is designed to protect the public from unauthorised disclosure and inappropriate use of personal information. Personal information includes not only factual information about a person but also any recorded opinions, judgements or risk assessments.

The legislation includes provision for people to access personal information held on them. This means that MLC could be required to provide an Applicant / Life Insured / Policy Owner access to information on our files and systems.

It is the practice of MLC to release medical information provided by third parties via the customer's medical practitioner rather than to an individual. This approach is taken due to the risk of misunderstanding or misinterpretation of medical information that may lead to unnecessary concern on the part of the customer or interference with their medical management. Medical reports may also contain information that had not been disclosed to the customer by their doctor in the best interest of the management of the condition; serious damage could be caused by direct disclosure of this information.

Alternative Terms and Policy Amendments

Loadings and Exclusions

It is our aim to offer insurance to as many people as possible. Sometimes due to a person's health or pastimes we may apply an extra premium or exclusion. At times we will also consider limiting the term of cover, and for Income Protection, changing the waiting period and benefit period.

Why do we offer exclusions?

There are times when the only way a person can be insured is with an exclusion. Exclusions are offered only after exhaustive efforts to provide standard terms.

This may include offering the risk to the facultative reinsurance market.

Exclusion wordings may vary according to information provided and the circumstances of each case but the scope of the exclusion where possible will be limited to the specific condition, joint, etc. For instance, a back exclusion is perhaps the most common exclusion and the wording is necessarily lengthy due to the complexity of the spine itself. However, whenever possible, MLC will limit the exclusion to a localised spinal area, eg the cervical spine only (the top part of the spine), the lumbo-sacral spine only (the bottom section of the spine), etc.

Can exclusions be reviewed?

Sometimes an exclusion may be applied due to the recent nature of a condition or because full recovery has not yet been achieved. If the exclusion may not be required in the future, the underwriter will advise when the client should apply for the exclusion to be reviewed. Naturally, exclusions can be reviewed by request at any time should there be a change in the condition or circumstances.

If your client is in an accident, will their claim be considered?

Not only does coverage apply for a multitude of accidents and sickness other than the excluded condition but may even apply to the excluded condition. For instance, if an individual has a back exclusion limited to the lumbar region (see diagram overleaf) and was subsequently paralysed as a result of serious spinal injuries in a car accident or struck by a falling object, which fractured his or her spine, then all else being equal, the claim would be paid.

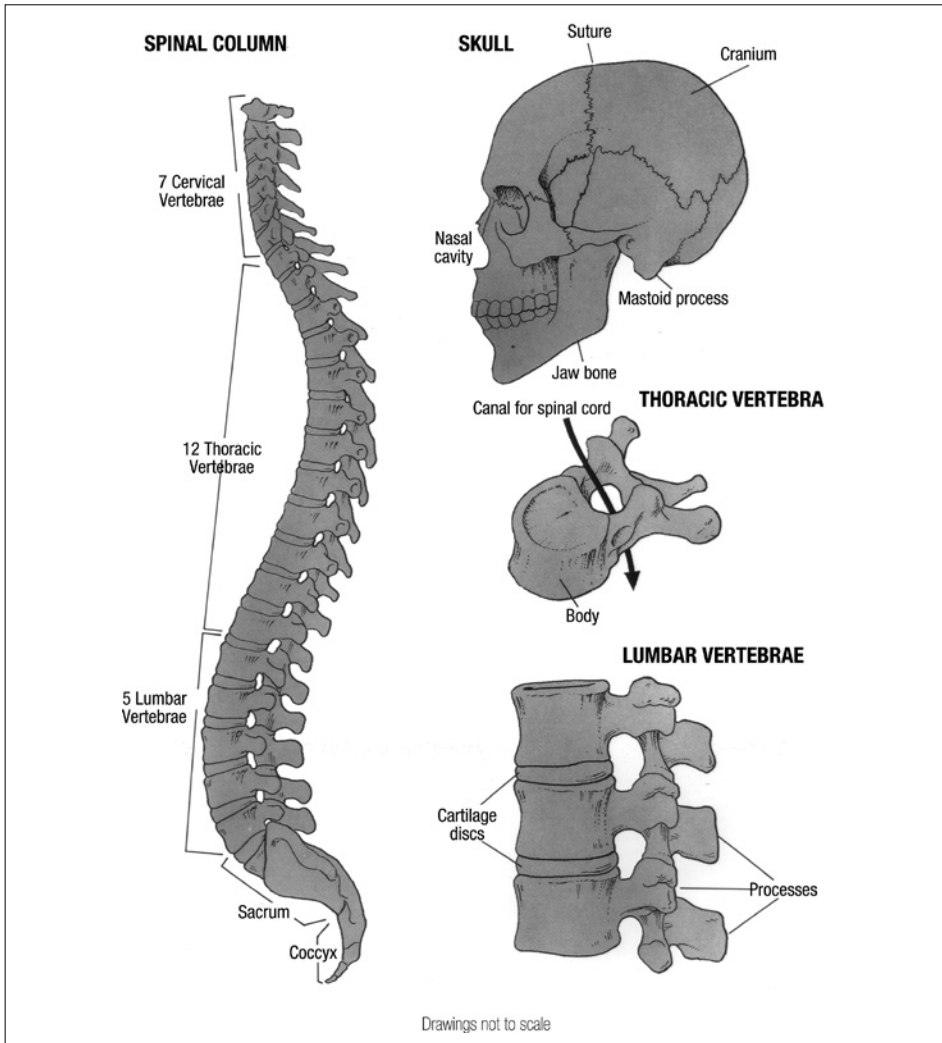
Similarly, if a disease completely unrelated to the reasons for the exclusion, such as cancer or osteomyelitis, suddenly afflicted the spine and if all other requirements for the claim are met, the claim would be paid. In other words, if the individual would unquestionably have been totally disabled and the recovery not complicated or prolonged because of a pre-existing condition, then MLC will favourably consider the payment of the claim.

The primary decision as to interpretation of an amendment wording does lie with the company, but at all times such interpretation must be reasonable.

We suggest that exclusions or other amendments are discussed at the time of proposal.

MLC's Application Form assists in this regard by including a provision for the acceptance of exclusions in the personal statement.

Skull, Spinal Column and Vertebrae



Fixed Term insurance cover

Where MLC is unable to offer insurance cover for the full duration of the insurance contract, an offer of cover with a shorter fixed term may be made. This may occur as a result of financial or medical circumstances. All commission structures are available for Fixed Term contracts between 11–20 years. Level commission is only available for Fixed Term contracts between 5–10 years.

Financial underwriting

Fixed Term cover may be considered where a high level of cover has been requested to cover a short term need, such as a loan. Cover may be considered for the period of the loan.

Medical underwriting

Fixed Term cover may also be considered where the Life to be Insured has a medical condition that may present an acceptable risk in the short term but over time will result in an insurance risk too high to cover only with a premium loading.

Fixed Term may also be considered as an alternative offer where medical loadings are very high and may be reduced with a shorter contract term.

Options such as Income Protection 'Extra benefits option' may not be available with Fixed Term cover offered due to medical history. These options will be underwritten on an individual basis.

Example: Type I diabetes mellitus provides an example of where Fixed Term cover may be offered as a result of a medical risk, where cover would be otherwise declined. The risk of developing health complications increases the longer a person has diabetes mellitus.

A 28 year old client who was diagnosed with diabetes mellitus 7 years ago, maintains optimal control of his condition and has had no complications and no other risk factors, may be considered for Income Protection cover for a 20 year term. The insurance cover would terminate 20 years from the Date of Commencement. A premium loading would still apply to cover the increased risk within the 20 year period of coverage.

Contact MLC Underwriting to discuss the individual circumstances of clients who you believe to be acceptable only on heavily loaded terms or possibly uninsurable. Through the use of a Fixed Term contract, we will, wherever possible, endeavour to provide your clients with valuable protection.

Critical Illness – Special Cardiovascular and Cancer Risks

MLC has the ability to allow MLC underwriters to offer limited Critical Illness cover to a range of clients who would otherwise be declined for Critical Illness insurance as a result of a high cardiovascular or cancer risk.

This provides an alternative for clients for whom Critical Illness is only available subject to a full malignant cancer exclusion. This allows the client the option of a lower premium but also provides less comprehensive coverage.

A significant number of Critical Conditions covered under Critical Illness insurance relate to either cardiovascular related risks or cancer related risks. In the past, clients with a history of certain medical conditions which significantly increased the risk of cardiovascular related events or cancer, or even a strong family history of some of these conditions, were unable to obtain cover under Critical Illness insurance.

MLC is now able to consider an amended Critical Illness cover excluding most of the risks associated with either cardiovascular conditions or cancer, with pricing adjusted to account for these exclusions. This allows us to offer cover to some clients who would in the past have otherwise been declined Critical Illness cover.

Three possible versions of the amended Critical Illness cover may be offered according to the medical history, excluding Critical Conditions relevant to history of:

1. cardiovascular conditions
2. cancer conditions without radiotherapy in thoracic region
3. cancer conditions with radiotherapy in thoracic region

The offer of the amended cover is made by the underwriter only when Critical Illness cover would otherwise be declined on specified risk profiles or as an alternative to a malignant cancer exclusion on full priced Critical Illness. It will not be offered as an alternative to a premium loading or exclusion on the full Critical Illness Plus or Standard cover other than for malignant cancer.

It is also important to note that the underwriter will also take into account the full risk profile when considering these special risks.

There will still be medical conditions that mean we may not be able to offer any Critical Illness.

The risk presented by some cardiovascular and cancer risks will be so high that Critical Illness will remain unavailable and the cover declined.

Other restrictions:

- Buy back option will not be available
- Critical Illness Extra benefits option will not be available
- Increase without medical evidence will be deleted
- TPD as a Critical Condition will not be available.

The table below shows the conditions that will be excluded under each of the amended Critical Illness covers, compared to those covered under the full Critical Illness Plus and Critical Illness Standard insurance. Additional exclusions or premium loadings may also apply according to individual medical history.

Critical conditions not covered

If the life has/had Cancer Conditions without radiotherapy in the Thoracic region

Malignant cancer

Major organ transplant

Intensive care

Loss of independence

Benign brain tumour

If the life has/had Cancer Conditions with radiotherapy in the Thoracic region

Malignant cancer

Major organ transplant

Intensive care

Loss of independence

Aplastic anaemia

Benign brain tumour

Coronary artery angioplasty

Coronary artery angioplasty – triple vessel

Coronary artery bypass surgery

Heart attack

If the life has/had Cardiovascular Conditions

Cardiomyopathy

Coronary artery angioplasty

Coronary artery angioplasty – triple vessel

Coronary artery bypass surgery

Heart attack

Intensive care

Loss of independence

Major organ transplant

Open heart surgery

Out of hospital cardiac arrest

Primary pulmonary hypertension

Stroke

Blindness

Coma

Deafness

Loss of speech

Paralysis

Kidney Failure

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Underwriting Requirements

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Medical Requirements

The usual medical requirements for new business are set out in the following pages. These are MLC's minimum requirements. MLC reserves the right to call for a medical examination, additional tests or reports if it considers the circumstances warrant it.

The requirements for life insurance depend on:

- the age of the applicant; and
- the total 'amount of risk'.

MLC defines the 'amount of risk' as the total amount payable by MLC on death, disability, trauma or disablement, across all insurance plans held with MLC.

Medical Requirements – New Business

The medical requirements depend on the amount of risk as set out on page 26.

The limits apply to the total amount proposed, including concurrent proposals and existing MLC Life Cover, Total and Permanent Disability stand alone cover and Critical Illness stand alone cover. Where an existing policy provides a decreasing death risk (eg Decreasing Cover), the current amount at risk should be used.

Medical Requirements – Increases

Medical evidence for increases is determined by adding the previous total in force MLC cover to the increase amount and applying the medical requirements table. However, when increasing a standard rated policy where an insured has previously undergone medical requirements, it may not be necessary to repeat those same medical requirements ie only the additional requirements may be needed.

Example: A 37 year old effected \$800,000 Life Cover over 12 months ago. The medical requirement at that time was B—a blood screen test. The client now has a need for an additional \$1,800,000 cover. The medical requirement for \$1,800,000 is a personal statement only. The medical requirements for the new total cover of \$2,600,000 are AB (refer medical requirements table page 26).

As B has already been provided, the current requirements would be an Application for Increase (form no. 64201) and a medical examination.

Medical Requirements – Business Safeguard Option

The medical underwriting requirements during initial underwriting will be based on three times the level of cover being applied for. For example, if the option is proposed to apply to \$1m of life cover, the normal medical requirements applying to \$3m of life cover will be required.

Medical Requirements

To assist you in determining the correct medical requirements for a new business application, the requirements for age and cover applied for are printed on the last page of PPP/LCS quotation.

Life Cover, TPD Standalone and where Critical Illness cover up to \$500,000, combined sum insured:

Table A	Age next birthday						
Sum Insured	Up to 35	36-40	41-45	46-50	51-55	56-60	61 & over
Up to \$100,000							A
\$100,001 to \$250,000							A
\$250,001 to \$350,000						A	B
\$350,001 to \$500,000						A	C
\$500,001 to \$750,000				E	D	F	C
\$750,001 to \$1,000,000				E	G	G	H
\$1,000,001 to \$1,500,000			E	G	G	G	H
\$1,500,001 to \$2,500,000			G	G	G	G	H
\$2,500,001 to \$3,000,000	F	F	G	G	G	G	H
\$3,000,001 to \$5,000,000	I	I	I	I	I	I	I
\$5,000,001 to \$10,000,000	J	J	J	J	J	J	J
Over \$10,000,000	K	K	K	K	K	K	K

Additional requirements for Critical Illness over \$500,000

Table B	Age next birthday					
Sum Insured	Up to 35	36-40	41-45	46-50	51-55	56-60
\$500,001 to \$750,000				E	F	F
\$750,001 to \$1,000,000			F	F	G	G
\$1,000,001 to \$1,500,000	F	F	F	G	L	L
\$1,500,001 to \$2,000,000	M	M	M	M	M	M

Legend (medical requirements in addition to personal statement)

- A** Private Medical Attendant's Report (PMAR) – to be arranged by MLC.
- B** Private Medical Attendant's Report (PMAR) – to be arranged by MLC
+ Blood test for Multiple Biochemical Analysis (MBA)
+ Hepatitis B & C serology.
- C** Medical Examination by the insured's usual doctor or paramedical examination
+ Blood test for Multiple Biochemical Analysis (MBA)
+ Hepatitis B & C serology.
- D** Private Medical Attendant's Report (PMAR) – to be arranged by MLC
+ Blood Screen including HIV (AIDS) antibody test
+ Multiple Biochemical Analysis (MBA)
+ Hepatitis B & C serology.
- E** Mini Health Check (including height, weight and abdomen measurement, blood pressure reading and urine dipstick test for glucose, albumin and blood) by the insured's usual doctor or paramedical service provider
+ Blood Screen including HIV (AIDS) antibody test
+ Multiple Biochemical Analysis (MBA)
+ Hepatitis B & C serology.
- F** Medical Examination by the insured's usual doctor or paramedical examination
+ Blood Screen (including HIV (AIDS) antibody test
+ Multiple Biochemical Analysis (MBA)
+ Hepatitis B & C serology).
- G** Medical Examination by the insured's usual doctor or paramedical examination
+ Blood Screen including HIV (AIDS) antibody test
+ Multiple Biochemical Analysis (MBA)
+ Hepatitis B & C serology
+ Electrocardiogram (ECG).
- H** Medical Examination by the insured's usual doctor or paramedical examination
+ Blood test for Multiple Biochemical Analysis (MBA)
+ Hepatitis B & C serology
+ Electrocardiogram (ECG).
- I** Medical Examination by an independent General Practitioner (GP), NOT the insured's usual doctor. (this may be arranged with a mobile GP medical service provider)
+ Blood Screen including HIV (AIDS) antibody test
+ Multiple Biochemical Analysis (MBA)
+ Hepatitis B & C serology
+ Full Blood Count
+ Electrocardiogram (ECG)
+ Private Medical Attendant's Report (PMAR) – to be arranged by MLC
- J** Medical Examination by a specialist or consultant physician nominated by MLC
+ Blood Screen including HIV (AIDS) antibody test
+ Multiple Biochemical Analysis (MBA)
+ Hepatitis B & C serology + Full Blood Count
+ Microanalysis (MSU)
+ Exercise Electrocardiogram (ECG)

Medical Requirements

- K** Medical Examination by a specialist or consultant physician nominated or approved by MLC
- + Blood Screen including HIV (AIDS) antibody test
 - + Multiple Biochemical Analysis (MBA)
 - + Hepatitis B & C serology
 - + Full Blood Count
 - + Microurinalysis (MSU)
 - + Exercise Electrocardiogram (ECG)
 - + Stress Echocardiogram (refer to your MLC Underwriting team)
 - + Chest X-ray (to be arranged by specialist physician approved by MLC)
 - + Private Medical Attendant's Report (PMAR) – to be arranged by MLC
- L** Medical Examination by the insured's usual doctor or paramedical examination
- + Blood Screen including HIV (AIDS) antibody test
 - + Multiple Biochemical Analysis (MBA)
 - + Hepatitis B & C serology
 - + Prostate Specific Antigen (PSA) for males or Mammogram for females
 - + Exercise Electrocardiogram (ECG)
- M** Medical Examination by the insured's usual doctor or paramedical examination
- + Blood Screen including HIV (AIDS) antibody test
 - + Multiple Biochemical Analysis (MBA)
 - + Hepatitis B & C serology
 - + Full Blood Count
 - + Microurinalysis (MSU)
 - + Prostate Specific Antigen (PSA) for males or Mammogram for females
 - + Exercise Electrocardiogram (ECG)
 - + Private Medical Attendant's Report (PMAR) – to be arranged by MLC

Note:

- 1 All medical requirements are based on MLC only cover.
- 2 For the purposes of determining the initial requirements, the current Life Cover, Total and Permanent Disability stand alone and Critical Illness stand alone cover under any MLC in force policy on the same life must be added to the cover proposed under the new application—see medical requirements for increases on page 25.
- 3 Life Cover risks exceeding \$15,000,000 and IP risks exceeding \$20,000 per month require the support of reinsurers. Additional medical and/or financial requirements may apply. Please call your MLC Underwriting team in advance for advice regarding requirements.
- 4 Where Critical Illness is applied for in combination with Life Cover or TPD Standalone, look up the requirements in each of the tables above. The medical requirements to apply will be the comprehensive requirements.

Where Critical Illness over \$500,000 is applied for in combination with Life Cover or TPD, the Critical Illness requirements shown in the table will apply in addition to those required for the total combined sum insured.

- 5 Where there is overlap in requirements, the final medical requirements will be the most comprehensive requirements (e.g. where ECG and Exercise ECG are indicated, arrange only the exercise ECG).
- 6 Blood screen test should be done after an overnight fast or a fast of at least 8 hours—ie no food or drink other than water.

Income Protection

Sum insured	Monthly Benefit			
	Up to \$6,000	\$6,001 to \$7,500	\$7,501 to \$10,000	\$10,001 and over
Age next birthday				
Up to 40			N	D
41–50			N	D
51–55		N	D	D
56–60	A	D	D	D

Legend (medical requirements in addition to personal statement)

N Blood Screen (including HIV (AIDS) antibody test, Multiple Biochemical Analysis (MBA), Hepatitis B and C serology test)—to be arranged by the Financial Adviser or MLC if requested.

A Private Medical Attendant’s Report (PMAR)—to be arranged by MLC

If the insured does not have a regular doctor, a medical examination by a GP approved by MLC or a paramedical service provider (eg UHG or Lifescreen) will be required.

D Personal Medical Attendants Report (PMAR) to be arranged by MLC

- + Blood Screen including HIV (AIDS) antibody test
- + Multiple Biochemical Analysis (MBA)
- + Hepatitis B+C serology

Medical Requirements

Business Expenses

Blood Screen required when monthly benefit is \$15,001 and over.

Income Protection and Business Expenses combined

Ages up to 50nb: Blood Screen required when either the Income Protection monthly benefit is \$7,501 and over OR the combined monthly benefit is \$15,001 and over.

Ages 51 and over: Blood Screen required when either the Income Protection monthly benefit is \$6,001 and over OR the combined monthly benefit is \$15,001 and over.

Blood Testing and Paramedical Services

Does my client need to fast for a Blood Screen?

Yes. Food and drink consumed in the hours before Biochemical Analysis can create a temporary effect on the blood test results. Fasting allows a more accurate indication of overall health. For this reason, the Blood Screen Test should be done after an overnight fast or a fast of at least 8 hours, ie no food or drink (except water) 8 hours prior to the test.

How do I arrange a Blood Screen Test?

1. Complete the 'Pathology Request for Insurance' form. When arranging a Blood Screen, always complete the 'Pathology Request for Insurance' form at the back of the MLC Application Form and leave it with the client to give to the person collecting the blood. This form includes the client's consent for the test and important information about the HIV antibody blood test.
2. Arrange a paramedical service provider to collect the client's blood, otherwise they may go to their doctor or a pathology collection centre for the blood test. Blood Screen Tests may be arranged through a paramedical service provider such as UHG, Lifescreen or Pathrec. These services may also be used to provide paramedical evaluations or examinations.

How do I arrange a Blood Screen and/or Standard Health Evaluation through UHG?

1. Call **1800 101 984** to advise UHG what is required to be organised; or
2. Give MLC permission to arrange all medical requirements through UHG.

We will arrange for UHG to contact your client to have all necessary requirements completed.

How do I arrange a Blood Screen and/or Standard Health Evaluation through Lifescreen?

3. Complete a Lifescreen 'Health Evaluation Request' form and fax it to the toll free number on the form, or phone Lifescreen's National Telereferral Service on **1800 686 000**.
4. The MLC 'Pathology Request for Insurance' form should also be completed for Blood Screens and left with the client.

How do I arrange a Blood Screen and/or Paramedical examination through Pathrec?

1. Complete a Pathrec medical Request form and fax it to the toll free number **1800 631 582**, or phone Pathrec on **1800 066 895**, or complete and send the Pathrec Medical Request form on the website Pathrec.com.
2. The MLC 'Pathology Request for Insurance' form should also be completed for Blood Screens and left with the client.

Can I arrange the Blood Screen with another paramedical service provider?

Yes

Medical Requirements

Personal Medical Attendants Report

UHG, our third party provider, obtains Personal Medical Attendant Report, (PMAR's) for MLC. Ensure you have had the medical authority completed so we can obtain this report if necessary. You can view the progress of this request via My Work Tracker.

What is a Mini Health Check?

A Mini Health Check ('Q' Check/Express Check) is an alternative to a standard health evaluation or a medical examination. It is a short examination and it takes approximately 15 minutes to complete and includes:

- measurements of height, weight, pulse and blood pressure
- a urine examination (dip stick)
- abdominal girth.

How do you arrange a Mini Health Check?

You can print a Mini Health Check from mlc.com.au or order through Easy Order and give to your client to attend the doctor of their choice.

To have UHG arrange a Mini Health Check call **1800 101 984** for them to organise for you or indicate that you want MLC to arrange this in the application form.

Can you arrange an examination equivalent to a Mini Health Check?

'Q' check can be arranged by phoning Pathrec on **1800 066 895** or visiting their web site www.pathrec.com where requests can be submitted on-line or you can print and fax your request to **1800 631 582**.

Express Check can be arranged through Lifescreen by phoning **1800 686 000**.

Underwriting Questionnaires

MLC provides a range of questionnaires to assist in the underwriting process.

For convenience, the most commonly used questionnaires are included in the Application Form.

Additionally, questionnaires are available from Adviser Switchboard, the **mlc.com.au** website or as standard stationery items, as indicated in the table below.

Completed questionnaires should be submitted with the application as this may avoid delays caused by obtaining medical reports or statements from clients.

Questionnaire Description	Application Form	Adviser Switchboard	mlc.com.au	Easy Order
Asthma	•	•	•	
Aviation	•	•	•	
Back/Neck Disorder	•	•	•	
Blood Pressure/Cholesterol	•	•	•	
Cyst/Mole/Skin Lesion	•	•	•	
Epilepsy		•	•	
Financial Questionnaire		•	•	•
Hazardous Sports & Recreation		•	•	
Joint/Musculoskeletal	•	•	•	
Mental Health	•	•	•	
Mini Health Check			•	•
Motor Car/Cycle/Boat Racing	•	•	•	
Personal Financial Questionnaire	•		•	
Standard Medical Examination		•	•	•
Ulcer/Reflux		•	•	
Underwater Diving	•	•	•	

Other forms available as standard stationery items include:

- Alteration to Non-smoker (form 52196)
- Application for Increase (form 64201)
- Declaration of Changes (form 52195)
- Application for Replacement (form 50897)
- Application for Increase without medical evidence (pdf only) (form 50170)

These can be ordered from Easy Order
Phone: 133 652 (option 7)
Online on **mlc.com.au**

Financial Requirements

Introduction

Why financially underwrite?

A question often encountered when discussing financial underwriting with Financial Advisers is ‘why don’t we just allow the cover they want—they are willing to pay the premiums so why limit the cover?’

There are many reasons for financially underwriting applications. Primarily we perform financial underwriting to ensure the amount of cover requested is within the boundaries of the applicant’s needs.

Financial underwriting also allows the underwriter to:

- Prevent over insurance situations which create the potential for moral risks and increased claims;
- Ensure the policy owner has an insurable interest in the insured;
- Reduce the risk of anti-selection;
- Reduce the risk of fraud;
- Protect the interests of MLC’s policy holders and shareholders.

The main broad purposes of insurance cover are:

- personal insurance, including estate equalisation,
- business insurance, including :–
 - Asset protection / Loan cover
 - Revenue Protection / Keyperson insurance
 - Ownership Protection / share purchase / buy-sell.

Sums insured for the purpose of determining financial underwriting requirements must include cover from all sources.

The financial documentation required to support an application for insurance will depend upon the:

- Insurance type (eg Life Cover, Income Protection)
- Age of the Life to be Insured
- Cover amount
- Purpose of the insurance (eg personal, business).

Financial Underwriting for Lump Sum – Personal Insurance

Although we financially underwrite all cases irrespective of the sum insured, it is not practical (or necessary) to obtain full financial profiles for each and every application. Information beyond that provided in the insurance application may be requested where:

- The need or reason for the level of cover requested is unclear;
- The cover amount seems excessive based on the information given in the application (perhaps based on income, occupation, age);
- The sum insured exceeds the levels set by MLC, see table opposite.

Mandatory Financial Evidence Limits and Maximum Sums Insured for Personal Insurance

The table below shows the maximum cover amounts available and the amounts at which financial evidence is a mandatory requirement.

Cover type	Maximum sum insured limit	Sum insured applied for	Financial Evidence Requirements
Life Cover	Amount that can be financially justified.	Up to \$4,000,000	Nil if multiple of earnings requirement met, see overleaf
		Over \$4,000,000	MLC Financial Questionnaire and any other information required by the underwriter to support the cover eg tax returns, loan documents.
Critical Illness ¹	\$2,000,000	Up to \$1,000,000	Nil if multiple of earning requirements met, see overleaf
		\$1,000,001 to \$1,500,000	MLC Financial Questionnaire
		\$1,500,001 to \$2,000,000	MLC Financial Questionnaire supported by last 2 years tax returns.
TPD ¹	\$3,000,000 ²	Financial Evidence as for Life Cover	

Notes

- ¹ Financial evidence requirements for combined Life Cover, TPD stand alone and Critical Illness stand alone are based on the benefit that requires the most comprehensive financial evidence.
- ² TPD 'Own Occupation' and TPD 'Any Occupation' cover may be taken in combination as long as the combined benefit does not exceed \$3,000,000, including cover across all insurers.

Financial Requirements

When is a Personal Financial Questionnaire required?

Most employed persons are acceptable for up to \$1,000,000 of Life Cover, Critical Illness and TPD insurance (from all sources) without the need to provide financial evidence beyond earnings details in the application.

The applicant's earnings is one of the main criteria MLC considers for personal insurance. Our practice is to use a multiple of earnings to determine a reasonable sum insured. The multiples used are shown below. We also take existing cover into account. If the proposed sum insured exceeds the amount calculated by applying the multiple of earnings, we will also consider family liabilities and dependents. However, we may still ask for a Personal Financial Questionnaire. You can pre-empt this by completing the Personal Financial Questionnaire in the Supplementary Underwriting Questionnaire Booklet.

Example:

If a 40 year old applicant with annual earnings of \$75,000 requests Life Cover of \$1,500,000, (20 x earnings) no additional information will be required. If the same applicant requests \$2,500,000 then we will ask for a Personal Financial Questionnaire.

MLC understands that individual circumstances vary and should your recommendations based on the Fact Find and Statement of Advice exceed the multiples outlined below, please discuss this with one of our experienced Underwriters as additional financial evidence may be required.

Within the mandatory limits set out on page 35, you may submit the Fact find or Statement of Advice in place of the Personal Financial Questionnaire if it contains the same information as requested in the Questionnaire.

Age Group (age next birthday)	Multiple of Earnings	
	Life Cover	Critical Illness / TPD
Up to 40	20	12
41 - 55	15	10
56 and over	10	8

Homemakers and Non-working Applicants

Homemakers up to age 46 next birthday are generally limited to \$1,000,000 sum insured for Life Cover and TPD, and \$750,000 for Critical Illness cover.

Homemakers age 47 next birthday and over are generally limited to \$750,000 sum insured for Life Cover and TPD, and \$500,000 for Critical Illness cover.

If there is a need to provide cover beyond these levels, a detailed report from the Financial Adviser must be provided with the application, including the specific need for cover and how the sum insured was calculated (eg calculations based on providing an income stream for a number of years based on number and age of dependents, funds required to discharge debts, etc).

Financial Underwriting for Lump Sum– Business Insurance

The key to underwriting business insurance is in understanding the purpose of the cover and how the level of cover was calculated.

Life Cover up to \$1,500,000 and Critical Illness up to \$1,000,000 on professional lives can usually be considered without additional financial evidence, providing the need for the insurance is clear. A supporting statement from the Financial Adviser is always helpful in this regard.

Ideally this would include information about the business structure, the involvement and responsibilities of the Life to be Insured in the business, and how the sum insured was calculated. Above these amounts mandatory financial evidence requirements apply, these are set out in the table on the following page.

Financial information required depend on the type of business insurance requested as set out in the table on the following page.

Financial Requirements

Mandatory Financial Evidence Limits and Maximum Sums Insured for Business Insurance

The table below shows the maximum cover amounts available and the amounts at which financial evidence is a mandatory requirement.

Cover Type	Maximum Sum Insured ¹	Sum Insured	Financial Requirements		
			Asset Protection/ Loan Guarantee Insurance	Revenue Protection/ Key Person Insurance	Ownership Protection/ Buy/Sell Insurance
Life Cover	No Maximum only what can be financially justified	> \$2,500,000	<ul style="list-style-type: none"> • MLC Financial Questionnaire • Full business accounts, all associated entities last 2yrs² • Business and individual tax returns last 2yrs • Copy of loan agreement 	<ul style="list-style-type: none"> • MLC Financial Questionnaire • Full business accounts, all associated entities last 2yrs² • Business and individual tax returns last 2yrs 	<ul style="list-style-type: none"> • MLC Financial Questionnaire • Full business accounts, all associated entities last 2yrs² • Business and individual tax returns last 2yrs
		> \$5,000,000			<ul style="list-style-type: none"> • Valuation • Buy/Sell Agreement
Critical Illness	\$2,000,000 ¹	up to \$1,000,000	Nil	Nil	Nil
		> \$1,000,000	<ul style="list-style-type: none"> • MLC Financial Questionnaire • Full business accounts, all associated entities last 2yrs² 	<ul style="list-style-type: none"> • MLC Financial Questionnaire • Full business accounts, all associated entities last 2yrs² 	<ul style="list-style-type: none"> • MLC Financial Questionnaire • Full business accounts, all associated entities last 2yrs²
TPD	\$3,000,000 ¹	As per Life Cover			

¹ This is the maximum sum insured across all insurers and can not be exceeded.

² Where the last two years of financial accounts are not available, the following financial information should be provided:

- established business—the most recent accounts available
- new business—interim account, financial projections and business plan.

Business Insurance Underwriting

What is the underwriter looking for when underwriting business insurance?

Firstly, the underwriter will consider the purpose of the cover. This will then influence other factors to be considered.

Ownership Protection or Buy/Sell Insurance

Ownership protection or buy/sell insurance is intended to provide cover on all partners or shareholders in a small business. In the event of a shareholder's death or disablement, the policy provides capital to allow the remaining partners/shareholders to purchase the deceased/disabled person's share of the business.

As such, the cover on each of the partners/shareholders should be proportionate to their respective share in the business. The factors that the underwriter needs to take into account include:

- Level of cover proposed reflects the value of the business as demonstrated by independent valuation, financial accounts and other supporting information available;
- Level of cover reflects the percentage ownership of the life to be insured;
- Level of personal cover proposed or in place for the life to be insured;
- There is a buy/sell agreement in place or being put in place;
- All business partners are effecting insurance.

Supporting information that should be provided in addition to the mandatory financial requirements applicable to the proposed insured include:

- Copy of the business valuation including the method of valuation;
- Copy of the buy sell agreement, or draft agreement if not finalised.

Financial Requirements

Revenue Protection/ Key Person Insurance

Where there is an individual or individuals critical to the financial health of a business, there may be a need to have insurance on that person. Revenue Protection cover is used to offset the expected loss experienced by a business if a key individual(s) within the organisation dies or becomes disabled.

A key person may possess specific knowledge and experience, valuable personal contacts, and may provide financial support to the business so that in the event of their death or disability the business may not be able to continue without a replacement or will suffer a significant financial loss. The form of the loss may be a reduction of profitability, an interruption to the business activities or the ability of the business to service its commitments. Recruitment costs may also be incurred in finding a replacement.

The factors that the underwriter needs to take into account include:

- Level of cover proposed reflects the value of the Key Person;
- Method used to value the Key Person is reasonable;
- Business structure, turnover, net profit;
- Key Person's financial interest/share in the business;
- Key Person's remuneration package;
- Other cover in force on the Key Person;
- For arms length employees, cover will usually be restricted to 10 x the remuneration package.

Asset Protection/ Loan Guarantee Insurance

Where a business has debts this insurance can be used to pay the debt if the insured person dies or is disabled. This prevents any short or medium term financial difficulty that may come about if the person was key to the business and their loss affects the running of the business and ability to service debt.

The factors that the underwriter needs take into account include:

- Loan amount;
- Proportion of loan the insured is responsible for;
- Reason for the loan;
- Lending institution;
- Term of the loan;
- All loan participants should be effecting insurance;
- Is the insurance a condition to the granting of the loan?

Joint and Several Liability

Where there is more than one business owner, liability for a business loan will often be shared. MLC has adopted a standard approach to determine the maximum amount insurable for each life sharing responsibility for the loan.

MLC will consider applications for the full debt amount on each owner only for small business debts of up to \$500,000 for 2 or 3 owner businesses.

Otherwise, where business ownership is equal or close to equal, each business owner may be covered for a proportion of the debt as shown here:

No. of business owners	% debt covered
2 owner business	100% of the first \$2 million debt, 75% of excess
3 owner business	100% of the first \$1 million debt, 75% of next million, 50% of excess
4 owner business	100% of the first \$1 million debt, 75% of next million, 25% of excess
> 4 owner business	% of debt equal to % business ownership

This is subject to the following:

- maximum of \$10 million debt per business;
- only business owners working in the business are included;
- the standard maximum covers for Total and Permanent Disability and Critical Illness apply.

If the percentage of business ownership is not equal or close to equal or the business debt exceeds \$10,000,000, each owner can only apply for their business ownership percentage of the business debt.

Financial Requirements

Business Safeguard Option

Where this option is applied for, an MLC Financial Questionnaire (form no. 01063) must always accompany the application. In addition, depending on the purpose of the insurance, the client must supply the following:

If insurance is purchased for:	Client to supply a copy of:
Ownership Protection/Buy/sell agreement	Buy/sell agreement and current valuation of the business
Asset Protection/ Loan guarantee insurance	Loan deed or equivalent
Revenue Protection/Key person insurance	Current valuation of the key person's value/ worth to the business

MLC is also entitled to request any other contractual or financial evidence required to satisfy itself as to the value of the financial interest.

This financial information is required to support the current amount of cover proposed and to provide a basis for comparison for future increases under the option. The valuation method used at the time of increase must be the same method used when this option was originally applied for.

If you have any questions regarding the medical and/or financial underwriting requirements applying for this option, please call your MLC Underwriting team.

Financial Underwriting for Income Protection Insurance

Income Protection Insurance is designed to provide a regular income in the event of the insured being unable to work due to illness or injury.

Indemnity – v – Agreed Value

Income Protection Plus – Agreed Value

MLC does not always require financial evidence at application time, if we have, generally we do not require the same information at claim time. Providing at the time of application the information provided was accurate and complete and has been accepted by us, the benefit issued will be the benefit paid at claim's time.

Income Protection Plus – Indemnity

This option is available when you choose Income Protection Plus.

The cost is lower if you choose the Indemnity Option.

This option offers the features of Income Protection Plus on an indemnity basis.

The only difference is that if the life insured's earnings have decreased since taking out the Income Protection Plus insurance we will reduce the monthly benefit at time of claim so that the amount you receive is no more than 75% of your earnings before disability.

Income Protection – Standard

If the life insured’s earnings decrease after taking out the cover, we will reduce the monthly benefit at time of claim so that the amount they receive is no more than 75% of their earnings before disability.

Where Indemnity Cover or Income Protection Standard has been proposed we may still request clarification of income if there is a need to do so.

It is important to note for an indemnity contract, that we issue and accept premium for a benefit amount that the client’s future income is likely to be able to support. The availability of this option is still subject to current earnings, earnings history as well as indications of future earnings.

Financial Requirements for Income Protection Insurance

Mandatory Financial Evidence Limits

Mandatory financial evidence depends on age, occupation class, monthly benefit proposed and employment status.

Mandatory financial evidence requirements apply for monthly benefits above those shown in the tables below:

Income Protection Plus (no indemnity option)

Age Group (age next birthday)	Occupation Class			
	AAA, ML, ACT	AA	A	BBB, BB, B & C
19–55	15,000	12,500	7,500	4,000
56–60	15,000	12,500	7,500	N/A

Income Protection Standard and Income Protection Plus with indemnity option

Age Group (age next birthday)	Occupation Class	
	ML, ACT, AAA, AA, A	BBB, BB, B & C
19–55	15,000	7,500
56–60	15,000	NIL

Financial Requirements

The financial evidence required will depend upon the monthly benefit requested, as set out in the table below:

Employment Status	Monthly Benefit	Financial Evidence Requirements ¹
Employee with no ownership	Up to \$15,000 \$15,001–\$20,000 \$20,001–\$30,000	A or B or C A, C and F A, C and G
Sole Trader	Up to \$15,000 \$15,001–\$20,000 \$20,001–\$30,000	A A, F A, G
Partnership	Up to \$15,000 \$15,001–\$20,000 \$20,001 – \$30,000	A, D A, D, F A, D, G
Owner of a company	Up to \$15,000 \$15,001–\$20,000 \$20,001–\$30,000	A, E A, E, F A, E, G

Legend

A Individual tax returns and assessment notices for the last 2 years

B 3 consecutive pay slips

C Letter from employer confirming current remuneration package and breakdown of packaged items

D Partnership accounts, including profit and loss and balance sheets, tax returns and assessment notices for the last 2 years

E Full company accounts, including notes to the accounts profit and loss, accounts, balance sheets, tax returns and assessment notices, for main trading accounts and any associated entities (trust accounts, service accounts etc.) for the last 2 years

F Investment or unearned income received for the last 2 years

G MLC financial questionnaire including details of investment and unearned income and a statement of assets and liabilities.²

Notes:

1 Additional financial evidence may be requested by Underwriting, such as accounts for associated business entities (eg trust accounts)

2 The monthly benefit available may be reduced or the benefit period limited, where the Life to be Insured has high levels of investment or unearned income and/or net assets.

Calculating the Monthly Benefit

Maximum benefits are limited to:

Earned Income	Maximum Benefit available
Up to \$240,000	75% of earnings
Over \$240,000	75% of the first \$240,000 of earnings, plus 50% of the next \$240,000 of earnings, plus 25% of the next \$240,000 earnings

The maximum monthly benefit, including cover with other insurers, that MLC will consider is \$30,000.

Earnings

Definition of earnings varies according to whether the person is self-employed or an employee.

Self-employed – Directly or indirectly owns part or all of a business or practice. Earnings means the income of the business or practice generated by the personal effort of the life insured after the deduction of their appropriate share of business or practice expenses in generating that income.

This income may include:

- Share of 'net operating profit' (a net loss will be deducted from earnings)
- Salary/wage
- Directors fees

- Superannuation contributions for Life to be Insured and spouse not working in the business
- Salary/wage to spouse not working in the business (paid for tax purposes only)
- Depreciation up to 10% of the gross trading profit.

Other expenses that represent personal benefits may also be considered subject to underwriting approval.

Employee – Does not directly or indirectly own part or all of a business or practice. Earnings means the total remuneration paid by the employer to the life insured.

Remuneration components may include:

- Salary/wage
- Regular commissions
- Fees
- Regular bonuses
- Regular overtime
- Non contributory superannuation
- Motor vehicle leases
- Motor vehicle parking
- Fringe benefits paid in lieu of direct remuneration.

Note: Whether self-employed or employed, earnings do not include investment income and are calculated before tax.

Financial Requirements

Other personal benefits as earnings

Earned income may include benefits not taken as cash. These benefits are often included in the salary packages of executives and higher income employees.

Salary packaging can include many benefits such as superannuation, parking, motor vehicles (and related running costs) and health insurance premiums.

For self-employed persons the following can be considered as earnings:

- **Insurance premiums** – allow up to 100% of non-business insurance premiums. This excludes Income Protection insurance premiums as these are waived in the event of a claim for a period of disability.
- **Motor Vehicle** – Some profit and loss accounts will show the proportion of motor vehicle expenses applicable to business use and personal use.

Tradespersons could be expected to require a work vehicle to be used almost 100% for business purposes. Professionals such as doctors or solicitors are more likely to have a higher component of personal vehicle use. To simplify the matter however, MLC has adopted a standard approach regardless of occupation.

1. Accounts show expenses for one vehicle only.

MLC may apply a standard approach of including 30% of the expense as earnings.

Note that the full vehicle expense may be included under Business Expenses insurance, as long as the expense is not duplicated in the earnings calculation to determine the Income Protection benefit.

2. Accounts for a tradesperson or professional in a single practice showing expenses for 2 vehicles may be accompanied by a statement that only one is a work vehicle and the other is 100% for private use by the Life Insured or spouse.

Donations

These can be included as earnings where listed as an expense on a business.

Income Distribution to Spouse/Defacto/Life partner

Spouses who work together can be considered for Income Protection under the following conditions:

- if it is evident that both parties work full time in the business, and
- the working arrangement has not been structured simply for tax purposes.

Full details of their separate responsibilities, duties and income will be required with the applications for insurance.

MLC will not consider those persons working from home doing accounts, book keeping or secretarial work for the business of their spouse or partner as being eligible for Income Protection.

Consideration can be given to an Income Protection benefit, based on the full earnings amount, where:

- that person generates the business income, and
- their spouse or partner does not work in the business, but receives income from the business simply for tax purposes.

The Financial Adviser should provide additional information with the application on the income distribution arrangement.

Depreciation

Depreciation represents the writing down of goods and assets values over time, in line with wear and tear and the reduction in value over the life of the asset.

Depreciation is listed as a business expense on the Profit and Loss Account although it does not represent a physical payment or expense incurred by the business.

MLC will consider allowing inclusion of reasonable levels of depreciation amount as part of the earnings calculation. MLC will include depreciation of up to 10% of the gross profit from trading as earnings.

The Life to be Insured may request that depreciation be covered under concurrent Business Expenses cover. This is acceptable to MLC as long as the loss is not covered under both Business Expenses and Income Protection insurance.

Financial Requirements

Commissions

Commission income can fluctuate from year to year and can be considered in determining the monthly benefit available where it is shown as being at a consistent level over a period of 3 years.

Generally, ongoing commissions that would continue to be paid after the Life Insured has ceased working are not included in the earnings calculation for the purposes of determining the benefit amount allowable.

Factors the underwriter would consider:

- What is the trail commission based on? (eg persistency of business such as a loan with a lending institution)
- For how long is the trail commission paid?
- What effort is required to maintain the payment? (eg yearly review of client portfolio)
- Are there others in the business who could maintain the income stream? (eg employees of a real estate agency managing rental properties)
- Percentage of time involved in maintaining this income stream? (time on new business vs existing business)

Bonuses

As part of an Employee's remuneration, they may receive bonuses. We will consider the inclusion of bonuses in some situations when calculating the maximum monthly benefit.

The underwriter will require:

- On what basis is the bonus paid?
- What has been paid in bonuses over the last 3 years?
- What is the frequency of the bonuses?

Unearned Income and Assets

Income that the applicant receives other than through personal exertion in their occupation is known as unearned income. Unearned income may include such things as dividends, interest, rent, or pensions. As such, unearned income continues to be received by the applicant even if he/she becomes disabled.

Investment Income and Assets

With individuals who earn very high incomes a percentage of the income is usually invested. This is then a source of unearned income which will continue whether the individual is working or not. We look at investment income and assets as these are sources of unearned income.

Claims experience demonstrates that the level of income or benefit received can dramatically influence the duration of a claim. In order to reduce this effect, MLC requires information regarding investment and other unearned income where the proposed Income Protection benefit exceeds \$15,000 and information regarding assets where the proposed benefit exceeds \$20,000. This information can be provided on the MLC Personal Financial Questionnaire, which is in the application form.

Below is a summary of MLC's treatment of investment income and assets –

1. Proposed monthly benefit up to \$15,000:

– investment income and asset position not required, as a general rule.

2. Proposed monthly benefit from \$15,001 - \$20,000:

Where investment or unearned income exceeds \$250,000, offset investment or unearned income as follows:

$$\frac{(\text{Earned income} + \text{unearned income}) \times \text{replacement ratio less unearned income}}{12}$$

3. Proposed monthly benefit from \$20,001 to \$30,000:

- where investment or unearned income exceeds \$250,000 offset as above, or

- where net asset exceeds \$5,000,000 (excluding the family home) Offset 5% of total net asset value,

$$\frac{(\text{earned income} + 5\% \text{ of net asset value}) \times \text{replacement ration less 5\% of net asset value}}{12}$$

Where investment or unearned income exceeds \$250,000 and net asset value exceeds \$5,000,000 apply whichever of the above calculations generates the higher offset.

Financial Requirements

Newly Self-Employed

Income Protection Plus is not normally available to applicants who have been self-employed for less than 12 months. In such circumstances Income Protection Standard may be available.

Individual consideration will be given where the applicant has relevant training or experience or has purchased an existing well established and profitable business or where income is guaranteed under a contract. These cases should be referred to your MLC Underwriting team.

Working at Home

An applicant who primarily works at home, rather than having a separate location where work is performed, may present underwriting concerns, and in the unfortunate event of a claim, establishing disablement may prove difficult. To assist in the consideration of these applications, we recommend proposing insurance with a waiting period of at least one month. This guideline does not apply to professionals whose practice adjoins, or is part of, their residence.

Bankruptcy

A person is automatically discharged from bankruptcy three years after the date that they filed their Statement of Affairs (unless there is an objection to the discharge by the trustee or the official receiver).

Consideration can be made for cover of TPD and Income Protection one year after discharge for an employee (with no ownership interest in the business which employes him or her) and 2 years after discharge for the self employed applicant.

Where an insured answers 'yes' to the bankruptcy question in the application, the following information is required:

1. date of bankruptcy
2. level of debt incurred at time of bankruptcy
3. has the debt been fully discharged
4. date of discharge
5. nature of business at time of bankruptcy
6. circumstances of the bankruptcy.

Where an applicant has returned to a self employed situation, we will require evidence of earnings for the past 2 years eg tax returns, business accounts, also a supporting statement demonstrating that the business is and has been operating profitably.

Depending on the circumstances for each applicant, if cover is able to be offered, it may be on a limited basis.

It is important to note that a medical attendant's report will be required in most cases.

Breaks in Employment – new applications

Income Protection is not generally available to any applicant not currently working or with an intention to cease work for an extended period (3 months or more), for any reason, within 3 months of the date of the application.

Where the leave is stated not to exceed 12 months, cover may be considered with a minimum waiting period at least equal to the duration of leave.

Breaks in Employment – in force cover

MLC automatically allows for continuation of inforce cover of up to one year for a break in employment (ie not doing paid work). This means any absence from work including such events as holiday leave, having a child, attending to personal matters or even being unemployed.

Absence from work for purposes such as long service leave or a paid sabbatical is not considered to be a break in employment and is not limited. Official absence from work granted by an employer for more than one year for extended leave or an unpaid sabbatical is routinely approved for periods of up to two years.

Longer periods of cover for breaks in employment may be approved on a case by case basis. Premiums must continue to be paid.

Service Pensions

Service pensions affect eligibility for Income Protection. Eligibility will depend on the type and amount of the pension. A pension is unearned income and payment will continue even if the recipient is totally disabled. This continued income will reduce the need for income protection.

It is important to establish the type of pension, eg a person in receipt of an invalid type of pension would not usually be eligible for cover.

MLC may be able to provide cover on a restricted basis when a pension is based on years of service in the armed forces.

The formula for calculating the maximum possible benefit is:

Maximum monthly benefit =
(Earnings from full time occupation plus pension) x 75% less pension.

Financial Requirements

Public Service Guideline and Employer Insurance Benefits

Some members of the workforce are employed by Federal, State, Territory or Local Government. As government employees, they may be eligible for various forms of employer-sponsored disability benefits. Benefit entitlements vary widely between state, territory or government organisations; some government superannuation schemes are particularly generous.

Some other employers also provide insurance benefits. We ask for details of those insurance benefits and if there is more than 90 days accumulated sick leave.

MLC Income Protection is available subject to published guidelines for occupation, duties, etc. An offset will apply so that combined benefits do not exceed 75% of pre-disability earnings.

If there is overlap between existing insurance and the application with MLC we may apply on offset or change the waiting period.

The Guidelines do not apply to

- graduates doing internship or residency in a Commonwealth, Territory or State Hospital;
- self-employed persons contracted to government and not classed as employees.

Graduate Insurance

Doctors, Accountants, Solicitors, Dentists and Physiotherapists can apply for Income Protection provided that they have graduated within the last 12 months and they have been employed for at least 3 months prior to the proposal date. Graduates fitting this criteria are eligible to apply for the following monthly benefits, regardless of current income level, without providing proof of income at the time of application:

Occupation	Monthly Benefit
Doctor	\$5000
Accountant	\$3000
Dentist	\$5000
Solicitor	\$3000
Physiotherapist	\$2500
Pharmacist	\$2500

Eligibility is subject to underwriting and cover is available at the above levels.

Income Protection – Farmer Package

Mandatory financial evidence requirements apply for Income Protection—Farmer Package, as set out in the table below:

Benefit Period	Monthly Benefits	Mandatory Financial Evidence Requirements
2 years	Up to \$5000	<ul style="list-style-type: none"> • Copy of Balance Sheets for the last two financial years
5 years	Lesser of: <ul style="list-style-type: none"> • \$5000; or • 30% of the gross farm turnover for the last 12 months (eg turnover \$150,000 x 30% = \$45,000/12 = \$3,750 monthly benefit) 	<ul style="list-style-type: none"> • Copy of Balance Sheets for the last two financial years • Copy of Profit and Loss Statement for the last financial year • Signed statement from the Life to be Insured advising the anticipated gross farm turnover for the current year

Business Expenses

Proof of expenses in the form of a profit and loss account is required to support a monthly benefit in excess of those shown in the table below:

Age Group (age next birthday)	Occupation Class			
	AAA, ML, ACT	AA, A	BBB, BB, B	C
19–55	15,000	10,000	5,000	N/A
56–60	10,000	10,000	N/A	N/A

The maximum monthly benefit available under Business Expenses insurance is \$60,000.

Financial Requirements

Business Expenses cover helps ensure a self-employed client's business continues as a going concern by insuring the normal operating expenses of the business whilst the client is totally disabled and unable to work due to injury or sickness. It covers those normal and customary business expenses actually incurred by the client in the operation of the client's office, business or practice.

The life insured can cover up to 100% of eligible business expenses subject to underwriting requirements.

Partners of small partnerships (up to six partners) can apply to insure their share of partnership expenses.

The principals of a small business with up to **six employees** can apply for Business Expenses insurance. MLC will consider conservative benefit amounts only for this category.

Expenses covered:

Covered expenses are the reasonable and regular operating expenses of the business or practice the life insured owns and manages (or the appropriate share if a partnership).

These expenses include the following:

- rent or mortgage payments (incl. principal and interest)
- rates and taxes
- equipment or vehicle lease costs
- electricity, heating and water costs
- cleaning and laundry costs
- depreciation on office equipment and premises that the business owns
- salaries of employees not generating business income
- costs of accounting services
- fees for membership of professional associations
- business insurance premiums.

Expenses that are not covered are:

- payment or other benefits of any kind to the life insured or the life insured's replacement in the business
- any expense that was not normally paid before the disability
- repayment of the principal of a loan or mortgage that started less than 12 months before the disability
- the cost of equipment or merchandise for the business.

General Information

New Immigrants

Persons with permanent residency status only may be considered for insurance cover.

Applications for Income Protection cover within 12 months of immigration to Australia will be considered under the following conditions:

- Permanent residency status obtained
- Permanent full time employment in a professional occupation or other satisfactory employment.

These cases should be referred to your MLC Underwriting team.

English Interpretation

It is important that the applicant have a full understanding of the product being purchased and the questions asked in the application.

If the applicant does not read or understand English, interpretation is to be provided by an independent person of standing in the community (eg Justice of the Peace or minister).

Please ring your MLC Service team, prior to completing the application, to obtain a declaration for the person acting as interpreter to complete.

Pending Claims

Income Protection cover is not usually available to applicants who have a disability claim pending (including third party action, workers' compensation).

Individual consideration will be given based upon:

- the type of claim and the claim status,
- type and severity of the injury,
- current state of health.

Requests should be made via your MLC Underwriting team.

Replacement Business

MLC will consider replacement of cover from another life company without requiring the usual mandatory medical requirements for age and sum insured. Where you are replacing Critical Illness type cover held with another life company, the qualifying periods that apply to the critical conditions under the MLC policy will be waived to the extent that these conditions are covered under the policy being replaced.

Conditions

Applications for Replacement can be considered:

1. For lives up to age 55 next birthday, and in the case of Life Cover, up to age 60 next birthday.
2. Subject to original acceptance at standard rates, or with a medical exclusion or premium loading not exceeding 50%. We can also consider premium loadings and/or exclusions for sports and pastimes.
3. If the policy being replaced was initially and fully underwritten within the last 5 years.
4. Subject to MLC's underwriting of medical, financial, occupational and pastime risks.

5. Maximum benefit levels:

Life Cover	\$3,000,000
TPD	\$2,000,000
Critical Illness	\$1,000,000
Income Protection and Business Expenses	\$15,000 ¹ per month each

¹ for Income Protection in excess of \$10,000 per month a Private Medical Attendant's Report (PMAR) will be requested and financial evidence may also be required.

6. The existing policy must be cancelled once the MLC policy is issued.

Requirements

1. Completed Application for Replacement (form no. 50897). If there are two or more lives to be insured, separate Applications for Replacement are required.
2. Copy of proof of acceptance and currency of policy to be replaced—original policy schedule and certificate of currency or renewal notice dated within the last six months.
3. Replacement Statement of Advice.

Note

1. For replacement business not meeting the conditions outlined above normal underwriting requirements will apply.
2. Consideration will be given to the waiver of the qualifying periods under Critical Illness insurance providing currency of the existing policy is provided, and the critical conditions are comparable to MLC's.
3. Consideration will be given to the waiver of the 13 month suicide exclusion on life cover, providing currency of the existing policy is provided.
4. Where the exact cover has been held with MLC within the previous 5 years level commission may apply. Please refer to your Business Development Manager

Smoker and Non-smoker Status

MLC offers a discounted premium rate for 'non-smokers'. To be eligible for non-smoker rates the client must have not smoked tobacco or any other substance, or used any nicotine containing products in the previous 12 months.

Any level of consumption will attract smoker rates. A client who only smokes socially or only has one a week will be rated as a smoker.

Alteration to Non-smoker Rates

Where a life insured has cover in force at smoker rates and has not smoked tobacco or any other substance, or used any nicotine containing products (eg nicorettes; nicotine patches) in the last 12 months, they may apply to MLC to alter the premium to non-smoker rates.

Application for non-smoker rates may be made by completion of Form 52196 Alteration to Non-Smoker.

Any history, since original application, of medical conditions that are smoking related or for which smoking is considered a risk factor must be considered in the assessment of these applications. This may mean nonsmoker rates may not apply.

Overseas Travel and Temporary Residence

The issue of overseas residence and travel is a challenging one prompted by the current climate of political instability, differing levels of personal health and safety and the global effects of war and terrorism.

MLC does not usually charge an additional premium for coverage unless the Life to be Insured intends travelling to a country or region where these extra hazards exist. Depending on the extra hazards to which the Life to be Insured may be exposed, MLC may offer cover subject to special conditions such as a premium loading, war and terrorism exclusion, exclusion of cover in certain regions, or even decline the cover outright for high risk locations.

In order to maintain a consistent approach in assessing overseas risks, MLC closely monitors the 'risk assessment' provided by the Australian Department of Foreign Affairs and Trade (DFAT). The travel advisories can be found at either of the following internet locations:

<http://www.smartraveller.gov.au/zw-cgi/view/Advice/Index>, or
<http://www.dfat.gov.au>.

The nature and extent of these risks can change overnight. If the Life to be Insured is planning to travel, or is currently travelling or residing overseas, we recommend you discuss each individual situation with your MLC Underwriting Team.

Individual consideration will be given based on the following details of overseas travel or residence:

- Date(s) of departure
- Duration
- Location
- Reason/Need for travel.

Please note that we are unlikely to be able to offer terms on applications made immediately prior to the travel date.

Backdating Applications

Backdating of applications is available for all cover, except Critical Illness. Critical Illness can only be backdated when the 3 month waiting period has been waived (ie Replacement Business). The policy cannot be backdated prior to the date of the application. Requests for backdating will be considered on their merits and will be granted at MLC's discretion.

If backdating at the time of application:

- Unpaid premiums will be required up to and including the month the application is accepted.
- If the Life to be Insured has an age increase after submission of the application:
- Unpaid premiums will be required up to and including the month the application is accepted; or
- the policy can be issued at the higher age rates subject to confirmation from the financial adviser or the client.

New Business Follow-up Procedures

The following is a guide to the procedures that will be adhered to where an application has Outstanding Requirements:

Requirement	Follow up	Cancellation
PMAR (known as UMAR)	Follow ups for UMAR's are conducted by our outsourcing company Unified Healthcare Group (UHG).	60 days
Medical Examination	Monthly with Adviser	60 days
Pathology	Monthly with Adviser	60 days
ECG	Monthly with Adviser	60 days
Underwriting Signed Statement (UWST)	Monthly with Adviser	60 days
New Business Signed Statement (NBST)	Monthly with Adviser	60 days
Questionnaires	Monthly with Adviser	60 days
Quote	Monthly with Adviser	60 days
Direct Debits / Credit Card/ Masterkey Account Details	Monthly with Adviser	60 days
Premium	Monthly with Adviser	60 days
Letter Of Offer	Monthly with Adviser	30 days
Declaration	Monthly with Adviser	30 days

If further requirements have been added within 10 days of the cancellation date it will be necessary to extend the cancellation date by 30 days from the last request. The only exceptions to this rule is where an Underwriter has requested a repeat blood test or a private medical attendants report, under these circumstances the case would need to be referred to the team leader to determine if an extension should be granted and if so for how long.

Reinstatement of a Cancelled Application

Applications are not held in suspense for more than 90 days. Consequently, if all Outstanding Requirements are not received within the 90 days the application will be cancelled.

Within a month of cancellation, the application may be reinstated subject to the following requirements:

- All outstanding requirements forwarded to MLC and a Declaration of Changes since the initial application.
- Thereafter we will require all outstanding requirements and a new application.

Reinstatement of Lapsed Cover

A lapsed policy will automatically be reinstated without health evidence upon payment of outstanding premiums within 2 months of the premium due date.

After 65 days from the premium due date, the policy may be reinstated subject to the following requirements:

- an Application for increase (form no. 64201) with the Reinstatement box checked.
- payment of the outstanding premiums.

After 6 months, policies cannot be reinstated. However, the client can reapply for a new policy, and full underwriting will be required.

Continuation Options for Group Insurance

Continuation Options entitle a member who leaves a fund/group policy to convert the amount of death or salary continuance cover (that has been accepted under the previous fund) to an individual MLC policy, without provision of medical evidence. Eligibility for a continuation option will differ according to the member's group plan or mastertrust. The Life Cover Buy Back Option and Indexed Claim Benefit are not available, and Extra Benefits Option under Income Protection Plus may not be available when exercising a Continuation Option.

To consider the Continuation Option, MLC require the following:

- A fully completed, signed and dated current Continuation Option form from the client. Note, this form is issued by MLC Group Insurance or Mastertrust Administration.

- The new benefit must also be proposed in a current application form in the relevant Product Disclosure Statement. The following details must be completed on that form:
 - Policy owner information/Applicant information
 - Life to be Insured information
 - Nomination of Beneficiary (as appropriate)
 - General Declarations, signed and dated by all relevant parties
 - Statement of Advice (SOA) questions
 - DDR/Credit Card authority as required
 - Copy of the premium quotation

The Income Protection policy must be the **indemnity version** of Income Protection Plus.

The continuation option must normally be exercised within 60 days from the date the client leaves the previous fund. The expiry date will be clearly set out on the Continuation Option form.

Alterations to Existing Policies

Type of Alteration	Requirements
Adding a life insured(s)	<ul style="list-style-type: none"> • PDS Application Form (current issue)
Adding a new benefit(s)	<ul style="list-style-type: none"> • Personal Questionnaire in application form to be completed in full
Adding the following benefit option(s): <ul style="list-style-type: none"> • Buy-back option; • Business Safeguard Option; • Terminal Illness Support Insurance; • Critical Illness – Extra Benefits Option (applicable to Critical Illness Plus as an extension to Life Cover and Standalone. This option is not available to Critical Illness Standard as an extension to Life Cover); • Short waiting period for accidental injury option (this option is only available as part of Income Protection Plus that has either a 14 or 30 day waiting period); • Indexed Claim benefits option; • Extra benefits option; • Occupational HIV, Hepatitis B or C Lump Sum benefit; • Inflation Linked option ie CPI * (specific instructions advising if the CPI is to apply to the whole policy or an individual benefit(s). 	<ul style="list-style-type: none"> • All relevant supplementary underwriting questionnaires within the application form • Tick placed in the 'Addition of a new insurance to an existing policy' box on the front page of the application form • Application to be signed and dated by ALL existing policy owner(s) • Client to be provided with the SPDS where applicable which modifies/ updates the current PDS • MLC quote • Covering letter (optional)
Removing the HIV/AIDS exclusion discount option	
Changing TPD occupation class from 'Any' to 'Own'	
Changing an existing benefit(s) from 'Standard' to 'Plus'	

Type of Alteration	Requirements
<p>Changing an existing benefit(s) from 'Plus' to 'Standard'</p> <hr/> <p>Exercising the Buy-Back option</p>	<ul style="list-style-type: none"> • PDS Application Form (current issue) without the Personal Questionnaire • Tick placed in the 'Addition of a new insurance to an existing policy' box on the front page of the Application Form • Application to be signed and dated by ALL existing policy owner(s) • Client to be provided with the SPDS where applicable which modifies/ updates the current PDS • MLC quote • Covering letter (optional)

Alterations to Existing Policies

Type of Alteration	Requirements
Changing the occupation class from: <ul style="list-style-type: none"> • C, BBB, BB, B to A, AA, AAA, ACT, ML • C to BBB, BB, B • A to AA, AAA, ACT, ML • AA to AAA, ACT, ML • AAA to ACT, ML. Important Note: The client MUST have worked at least 12 months in the new occupation class.	<ul style="list-style-type: none"> • Application for Increase form • MLC quote • Covering letter (optional) • Appropriate questionnaire if available for exclusion review for example, client needs to complete the Back Questionnaire to review a back exclusion
Reducing the waiting period on Income Protection and/or Business Expenses from: <ul style="list-style-type: none"> • 24 months to 14 days or 1, 3, 12 months • 12 months to 14 days or 1, 3 months • 3 months to 14 days or 1 month • 1 month to 14 days. 	
Increasing the benefit period on Income Protection from: <ul style="list-style-type: none"> • 2 years to age 65 • 5 years to age 65 • 2 years to 5 years. 	
Review of a loading or exclusion Note: No quote is required when applying to review an exclusion	
Changing the premium structure from: <ul style="list-style-type: none"> • Decreasing to Level • Decreasing to Stepped. 	
Reinstatement of a policy	
Increasing the sum insured on a benefit(s)	

Type of Alteration	Requirements
Reducing the benefit period for Income Protection from: <ul style="list-style-type: none"> • Age 65 to 5 years • Age 65 to 2 years • 5 years to 2 years. 	<ul style="list-style-type: none"> • A letter signed and dated by ALL existing policy owners, specifically requesting and detailing the necessary changes • MLC quote (optional and/or where applicable)
Reducing the sum insured on a benefit(s)	
Deleting a non-binding nominated beneficiary	
Changing TPD occupation class from 'Own' to 'Any'	
Changing the premium structure from: <ul style="list-style-type: none"> • Stepped to Level • Stepped to Decreasing • Level to Stepped • Level to Decreasing 	
Increasing the waiting period on Income Protection and/or Business Expenses from: <ul style="list-style-type: none"> • 14 days to 1, 3, 12 or 24 months • 1 month to 3, 12, 24 months • 3 months to 12, 24 months • 12 months to 24 months. 	

Alterations to Existing Policies

Type of Alteration	Requirements
Cancel whole or part of a policy	<p>A letter from the client is required. The letter must contain the following:</p> <ul style="list-style-type: none"> • Date • Policy number(s) • Full name of policy owner(s) • Date of birth of policy owner(s) • Mailing address of policy owner(s) • Request to cancel whole or part of the policy. If cancelling part; then we require the details of which life insured(s) and/or benefit(s) are to be cancelled. • Signed by ALL policy owners • Reason for cancellation (optional)
Change of Name	<p>A letter from the client is required. The letter must contain the client's old and new signatures and a certified copy of one of the following is required:</p> <ul style="list-style-type: none"> • Marriage Certificate • Decree Nisi (Divorce Decree) • Deed Poll • A copy of their passport or drivers licence

Type of Alteration	Requirements
Rejecting CPI permanently	<ul style="list-style-type: none"> • Client needs to contact MLC. All policy owner(s) may be required to describe some information for security purposes <p>Or</p> <ul style="list-style-type: none"> • Client needs to provide a signed and dated notification letter to MLC <p>The letter must contain the following information:</p> <ul style="list-style-type: none"> • Date • Policy number(s) • Full name of policy owner(s) • Date of birth of policy owner(s) • Mailing address of policy owner(s) • Specific instructions advising if the CPI is to apply to the whole policy and/or an individual benefit(s) • Specific instruction advising that the rejection is 'permanent' • Signed by ALL policy owner(s)

Alterations to Existing Policies

Type of Alteration	Requirements
<p>Rejecting CPI one year</p> <p>Important Note: A CPI rejection can only be requested within 2 months of the policy anniversary date. This is for all payment methods (monthly, half yearly or yearly).</p>	<p>Requests to reject the CPI for one year only, will be accepted:</p> <ol style="list-style-type: none"> 1. Over the phone from the policy owner(s) and/or their adviser, provided they meet security checking procedures. Consent must be obtained from ALL policy owners, and/or 2. A letter from the policy owner(s), containing the following information: <ul style="list-style-type: none"> • Date • Policy number(s) • Full name of policy owner(s) • Date of birth of policy owner(s) • Mailing address of policy owner(s) • Specific instructions advising if the CPI is to apply to the whole policy and/or an individual benefit(s) • Specific instruction advising that the rejection is for 'one year' only • Signed by ALL policy owner(s)
<p>Change of Address</p>	<p>Requests to change the address, will be accepted:</p> <ol style="list-style-type: none"> 1. Over the phone from ALL the policy owner(s) and/or their adviser, provided they meet security checking procedures. 2. A letter from the policy owner(s)
<p>Changing the method of payment on a Life Cover Super policy to draw premiums from an existing MasterKey Super policy</p> <p>Important Note: Payments can only be deducted from a MasterKey Personal Super policy NOT MasterKey Business Super policy (due to LCS being a personal product).</p>	<p>The client needs to complete a MLC MasterKey Deduction Authority.</p>

Type of Alteration	Requirements
Changing payment frequency for MasterKey Deductions	<ul style="list-style-type: none"> • Client letter (signed and dated).
Separating Policies	<ul style="list-style-type: none"> • PDS Application Form (current issue) without the Personal Questionnaire if the sum insured and/or benefits are being maintained. If there is any increase in risk, completion of full application form is required. • Application to be signed and dated by ALL policy owner(s) • Cancellation letter to be signed and dated by ALL policy owner(s) for the existing policy. Client needs to specify which cover is being transferred and whether the entire policy is to be cancelled upon completion of the new policy. • Full MLC quote
<p>Transfer of Ownership</p> <p>Important Note: If the ownership of a PPP is to be transferred from individual ownership to a self managed super fund (or vice versa), this should be processed as a Transfer of Cover into a new policy, due to restrictions on assignments under S66 of the SIS Act.</p>	<ul style="list-style-type: none"> • Transfer of Ownership form • Original policy document or, Application for Replacement Policy form to be completed if policy document is lost or destroyed • Cheque for \$60.00 made payable to MLC Limited if replacement document required • Cheque for stamp duty if applicable
Alteration to Non-Smoker	<ul style="list-style-type: none"> • Alteration to Non-Smoker form, or • Client needs to contact MLC. A declaration will be read to the Life Insured.

Type of Alteration	Requirements
<p>Transfer of Cover (no increase to the benefit amount) from a:</p> <ul style="list-style-type: none"> • PPP to LCS (or vice versa) <p>Scenarios include transferring cover between:</p> <ul style="list-style-type: none"> – Life Cover or TPD or Income Protection from PPP to LCS (or vice versa) – TPD or Critical Illness (CI) Stand Alone from PPP to TPD or CI Extension as a Connected Benefit to another PPP policy <ul style="list-style-type: none"> • Stepped premium to level premium (or vice versa) 	<ul style="list-style-type: none"> • Client statement/letter (signed and dated) • PDS Application Form without the personal statement section. • Advisers to note in the 'Special Instructions' that this is a transfer of cover. • MLC Premium Quotation <p>Note: This enables clients to transfer their existing cover without underwriting provided that there is no increase in benefits.</p> <ul style="list-style-type: none"> • Client statement/letter (signed and dated) or • the Application for Increase / Reinstatement / Alteration form (without the personal statement section) • MLC Premium Quotation

Occupation Guide

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This section of the guide covers a wide variety of occupations.

In some cases, an occupation classification may be straightforward for Income Protection whilst other occupations may be a little more complex.

If you need help, don't forget we are always available. A quote reference number can be provided to confirm the underwriting advice provided. This reference number should be displayed on the application form if an application is submitted.

Determining Occupation Classifications

An occupation classification is determined not by title but by duties. For example, the managing director of a small construction company who is a licensed plumber by trade and performs manual work on building sites is not a classification AA risk because of his title as managing director, but is a classification BB risk due to his manual duties as a plumber.

Always give full details of the applicant's actual duties in the proposal. Do not use general terms such as 'company director', 'manager', 'contractor', 'driver', 'labourer' alone. The business or industry should be stated together with the particular occupation.

Where the duties of the person proposing include driving a vehicle, working with or near machinery, animals or explosives, state this.

If there is any doubt about the appropriate classification, ring your service team or base the initial quotation on the higher risk classification. If MLC then arrives at a lower risk classification, the premium will be adjusted accordingly.

Unlisted Occupations

If the client has provided you with an occupation title or duties that do not fit into MLC's listed occupation guide, please contact your Underwriting team. The occupation category will always be based on the duties performed not the occupation title.

When contacting your Underwriting team additional information will be requested so the occupation can be classified and given an occupation rating.

Refer below for questions that will assist in determining a rating.

- What is the client's occupation?
- What are the clients duties? We will need to know the clients exact duties and the percentage of time spent on each.
- Does the client do manual work? If not, when was the last time the client did manual work and is the client likely to do any manual work in the future?
- Does the client perform any hazardous duties? eg underground, working at heights, with explosives?
- Does the client have ownership in the company? If so, what is the percentage of ownership.
- What training has the client undertaken?
- What qualifications does the client have?
- Does the client work from home? If so, full details of the home office set up are required.
- Does the client travel for business purposes? If so, where and how long?

- How many years of experience does the client have in the industry?
- How many years has the client been working in this occupation?
- How many years has the client been working for this employer?
- What is the clients income?

Based on this information your Underwriting Team should be able to provide you with an occupational rating that fits the clients occupational duties.

Please do not issue a quote without contacting your service team or further discussion with underwriting.

Dual Occupations

Where an applicant has more than one occupation, they will be rated for the occupation which represents the higher risk. For example, a clerk who has a second job as a waiter would be rated as Class B. Consideration to a more favourable rating will be given where the applicant spends less than 20% of the total work time in the higher risk occupation.

Earnings from both jobs and time spent in each occupation must be stated separately on the Application Form.

Generally only the income from the main occupation is insurable.

Total and Permanent Disability – Homemakers

Homemakers can apply for Total and Permanent Disability benefits up to a maximum of \$1,000,000. The following definition will be used for the purposes of determining eligibility for a claim.

The life insured is totally and permanently disabled if they have a disability caused by an injury or sickness and they satisfy the criteria in (a), (b) or (c) below:

(a)

- as a result of their disability they are completely unable to do any Normal Physical Domestic Duties and are unlikely ever to be able to do so again; and
- these circumstances have existed continuously for at least 6 months.

or

(b)

- they suffer a permanent impairment of at least 25% of whole person function (as defined in the American Medical Association publication 'Guides to the Evaluation of Permanent Impairment', current edition as at the date of impairment, or an equivalent guide to impairment approved by us); and
- as a result of this impairment, they are disabled to such an extent that they are completely unable to do any Normal Physical Domestic Duties and are unlikely ever to be able to do so again.

Please note if the life insured has taken out TPD as a Stand Alone insurance, they must survive for 6 months for us to consider a claim under section (a) or (b);

or

(c)

they have suffered from the total and irrecoverable loss of:

- the use of both hands; or
- the use of both feet; or
- the sight in both eyes; or
- the use of one hand and one foot; or
- the use of one foot and the sight in one eye; or
- the use of one hand and the sight in one eye.

Please note if the life insured has taken out TPD as a Stand Alone insurance, they must survive for 14 days after the loss for us to consider a claim under section (c).

Normal Physical Domestic Duties means cleaning, cooking meals, doing the laundry, shopping for groceries and taking care of dependent children.

Total and Permanent Disability – Part-Time Workers

Part-time workers will only be considered for total and permanent disability benefits if weekly hours regularly worked exceed 25.

Income Protection – Permanent Full-Time Workers

Persons who are employed on a full-time basis and regularly work at least 25 hours a week are classified as full-time workers.

Income Protection – Permanent Part-Time Workers

Persons who are employed on a part-time basis and regularly work at least 25 hours a week are eligible for income protection.

Seasonal Workers

Applicants such as fruit pickers, who work only during a particular time of the year, are not eligible for income protection.

Financial Planners - Degree Qualified

Financial Planners who met the following criteria are eligible for our Income Protection occupation category AAA, and TPD category 1, (own occupation definition).

- hold a relevant tertiary degree. Eg finance, accounting, business, Masters in Financial Planning
- been a financial planner for at least 2 years
- have earned at least \$100,000 pa for the past two years

Financial Planners who have not met this criteria are rated AA for Income Protection, and TPD category 1 (any occupation definition)

Professional Sports People

Professional sports people are not eligible for Income Protection.

Apprentices

First year apprentices will usually be considered for Income Protection cover at occupation class C rates only and TPD class 3. Apprentices who have passed their first year apprenticeship may be considered for Income Protection and TPD cover with the occupation rating applicable to their trade.

Armed Forces

Armed services personnel are not eligible for TPD, Income Protection, Business Expenses or Premium Waiver.

Members of the Australian Reserve Forces may be offered cover, without restriction, unless they are about to undertake active duty.

Working at heights

Where an applicant works above 15 metres an additional premium will apply. For some occupations where the applicant works at heights greater than 15 metres cover may not be available.

Working more than 60 hours per week

In general, applicants working up to 60 hours per week can be considered for Income Protection cover without restriction. Additional care needs to be taken where the applicant regularly works longer hours, and in many cases an Income Protection Standard contract should be offered.

In general, additional clarification will be required to present an understanding of the reason for and anticipated duration of these working hours. Each risk will be subject to individual consideration of the information provided and should be referred to your MLC Underwriting team to obtain details of the specific information required.

Rating Classification and Description

Classifications are grouped in the following categories:

Income Protection and Premium Waiver

AAA

This classification is restricted to 'Professional white collar occupations' as specified in the guide. An AAA rating may also apply to tertiary qualified business executives who are well established and earning a net minimum of \$100,000 per annum.

ACT

This classification is restricted to accountants who have the relevant accounting degree and/or CPA qualification.

ML

This classification is for certain medical and legal professionals such as doctors, dentists and solicitors as specified in the guide.

AA

This classification applies to 'Professional' applicants as specified in the guide.

It may also apply to those working in a strictly clerical and business environment with no manual duties or exposure to unusual occupational hazards.

For consideration as AA, the following criteria must be met:

- Tertiary or professional qualification such as a degree; and
- Earning a net minimum of \$75,000 per annum.
- OR
- In current occupation for at least 3 years; and
- Earning a net minimum of \$75,000 per annum.

A

This classification includes those engaged in clerical or business occupations with either no manual duties or very light-skilled duties such as bank teller or lab technician. They should meet the following requirements:

- have no exposure to unusual occupational hazards; and
- an emphasis on mental rather than physical work.

Classification A includes office staff and salespersons not engaged in heavy lifting or deliveries.

BBB

This classification includes those who engage in jobs involving less than 20% light manual work or direct supervision of manual workers (eg site foreman)

BB

This classification consists mainly of certified or licensed tradesmen doing skilled or specialised manual work.

B

This classification consists of applicants who do manual, but not hazardous work (eg painters or panel beaters).

C

This classification consists of applicants in hazardous occupations or in occupations which present special underwriting difficulties (eg security guards).

RFO

Rate for usual occupation. No restrictions or loadings apply.

R

Refer this risk to an Underwriter.

NI

Non insurable.

Change to Occupation

Where an applicant or life insured has changed occupation and is now in an improved occupation class, but has not been in that occupation for over one year they may not get the improved occupation class.

Total and Permanent Disability (TPD) Classifications

This includes the following:

1. Occupations with no or very low levels of risk eg Doctor, Lawyer, Clerical, some Sales Assistants, Commercial Traveller.
2. Occupations with slight risk eg Engravers, Jewellers, Hairdressers, Locksmiths.
3. Occupations with moderate to heavy risk eg Cleaners, Plumbers, Carpenters, Farmers.

'Own Occupation' (TPD)

This optional benefit is only available to selected AAA, ML, ACT, AA, A, BB occupations as specified in the Occupation list, who qualify as standard lives.

Farmer Package

Farmer Package is only available to the principal farm owners in selected farming occupations as specified in the Occupation list.

Occupation Rating Classification

Column	Product
IP/PW	Income Protection/Premium Waiver
TPD	Total and Permanent Disability
LC	Life Cover
CI	Critical Illness

Occupations

	IP/PW	TPD	LC	CI
A				
Abattoir supervisor	B	3	Std	Std
worker or slaughterer	NI	NI	Std	Std
Accountant				
degree qualified + CPA	ACT	1*	Std	Std
other	A	1*	Std	Std
Accounts clerk, bookkeeper	A	1*	Std	Std
Actor, Actress	NI	NI	Std	Std
Actuary	AAA	1*	Std	Std
Acupuncturist				
(qualified Aust registered)	AAA	1*	Std	Std
Administrator	A	1*	Std	Std
Advertising executive				
meeting AAA requirements	AAA	1*	Std	Std
meeting AA requirements	AA	1*	Std	Std
other	A	1	Std	Std
Aerobics instructor	B	3	Std	Std
Agronomist	AAA	1*	Std	Std
Air conditioning installer	BB	2	Std	Std
Airline personnel		see Aviation		
Alarm installer	BB	2	Std	Std
Ambulance officer/driver	B	3	Std	Std
Amusement parlour/centre	BB	2	Std	Std

	IP/PW	TPD	LC	CI
Amway salesperson				
full time	A	1	Std	Std
part time	NI	NI	Std	Std
Anaesthetist	AAA	1*	Std	Std
Analyst, programmer		see Computer industry		
Animal				
breeder	B	2	Std	Std
groomer	B	2	Std	Std
trainer	R	R	Std	Std
shooter	NI	NI	Std	Std
Announcer – radio or television	R	R	Std	Std
Antenna erector	C	NI	Std	Std
Antique dealer				
sales and office only	A	1	Std	Std
restoration	BB	2	Std	Std
delivery	B	3	Std	Std
Apiarist, beekeeper	B	2	Std	Std
Aquarium shop	BB	2	Std	Std
Archaeologist				
office only	*AAA	1*	Std	Std
field work	A	2	Std	Std
Architect	AAA	1*	Std	Std

* Eligible for TPD 'own occupation' definition

	IP/PW	TPD	LC	CI
Archivist	AA	1*	Std	Std
Armed services	(if aviation is involved see Aviation)			
Air Force				
all ranks – no special hazards	NI	NI	Std	Std
Army				
all ranks – no special hazards	NI	NI	Std	Std
Special Air Services	NI	NI	2.00	2.00
Military Pilots	NI	NI	5.00(x)	5.00(x)
Navy				
all ranks – no special hazards	NI	NI	Std	Std
divers (no special hazards)	NI	NI	Std	Std
bomb disposal	NI	NI	2.00	2.00
submarines	NI	NI	Std	Std
Armoured van driver	C	NI	Std	Std
Art dealer	A	1	Std	Std
Artist				
commercial only	A	1	Std	Std
painter or sculptor	NI	NI	Std	Std
Artist supplies shop	A	1	Std	Std
Asbestos worker	NI	NI	R	R
Asphalt layers	C	3	Std	Std
Assessor – insurance	A	1	Std	Std
Astronomer	AAA	1*	Std	Std
Auctioneer	A	1	Std	Std
Audiologist	AAA	1*	Std	Std
Auditor				
qualified	AAA	1*	Std	Std
other	A	1	Std	Std

	IP/PW	TPD	LC	CI
Author	NI	NI	Std	Std
Auto electrician	BB	2*	Std	Std
Aviation industry – ground staff				
cleaner	B	3	Std	Std
management and clerical	A	1	Std	Std
air traffic controller	NI	NI	Std	Std
baggage handler, porter	C	3	Std	Std
aircraft maintenance				
qualified, skilled worker	BB	2	Std	Std
unskilled worker	C	NI	Std	Std
refueller	C	3	Std	Std
security	C	NI	Std	Std
Aviation – Pilots				
agriculture (crops, cattle mustering)				
0–250 hours per annum	NI	NI	5.00(x)	5.00(x)
over 250 hours per annum	NI	NI	10.00(x)	10.00(x)
charter (professional pilot)				
0–250 hours per annum	NI	NI	Std	Std
over 250 hours per annum	NI	NI	3.00(x)	3.00(x)
parachutists				
military (not Special Air Services)	NI	NI	Std	Std
instructors	NI	NI	2.00(x)	2.00(x)
regular public transport (pilots and crew)	NI	NI	Std	Std
test pilots	NI	NI	NI	NI
Avon salesperson	R	NI	Std	Std

* Eligible for TPD 'own occupation' definition

	IP/PW	TPD	LC	CI
B				
Baby shop	A	1	Std	Std
Backhoe, bobcat or bulldozer owner, operator established 3 years	B	3	Std	Std
others	C	NI	Std	Std
Bailiff	BB	2	Std	Std
Baker	BB	2	Std	Std
Bank, building society, credit union				
qualified senior managers	AA	1*	Std	Std
manager, clerk, teller	A	1	Std	Std
security staff	C	NI	Std	Std
Barber	BB	2*	Std	Std
Barrister	MIL	1*	Std	Std
Bartender	C	3	Std	Std
Battery fitting	B	3	Std	Std
Beach inspector	B	3	Std	Std
Beautician				
salon only	BB	1	Std	Std
working from home/mobile	NI	2	Std	Std
Bedding store	A	1	Std	Std
Beekeeper, apiarist	B	2	Std	Std
Bicycle store	BB	2	Std	Std

	IP/PW	TPD	LC	CI
Biochemist	AAA	1*	Std	Std
Biologist	AAA	1*	Std	Std
Blacksmith, farrier	C	3	Std	Std
Blastier or explosive handler	NI	NI	2.00	2.00
Blind, awning, screen manufacturer/installer	BB	3	Std	Std
Boarding house owner	NI	NI	Std	Std
Boat builder	B	3	Std	Std
Bobcat, backhoe or bulldozer owner operator established 3 years	B	3	Std	Std
others	C	NI	Std	Std
Boilermaker	BB	3	Std	Std
Bookkeeper	A	1*	Std	Std
Bookmaker (licensed)	C	NI	Std	Std
Book shop	A	1	Std	Std
Bootmaker	BB	2	Std	Std
Botanist	AAA	1*	Std	Std
Bottle dealer	C	NI	Std	Std
Boxing (professional)	NI	NI	2.50	NI
Brassware shop	A	1	Std	Std
Bread/cake shop	BB	2	Std	Std

* Eligible for TPD 'own occupation' definition

	IP/PW	TPD	LC	CI
Brewery				
chemist	AA	1*	Std	Std
supervisor	BB	2	Std	Std
labourer	C	NI	Std	Std
Bricklayer	C	3	Std	Std
Bricklayer's labourer	C	NI	Std	Std
Brickworks employee – unskilled	C	NI	Std	Std
Builder – qualified	BB	3	Std	Std
Builder – unqualified	B	3	Std	Std
Builder's labourer	NI	NI	Std	Std
Building and construction industry				
air conditioning installer	BB	2	Std	Std
antenna erector	C	NI	Std	Std
architect	AAA	1*	Std	Std
backhoe, bobcat or bulldozer				
owner operator established 3 years	B	3	Std	Std
others	C	NI	Std	Std
bricklayer	C	3	Std	Std
bricklayer's labourer	C	NI	Std	Std
builder's labourer	C	NI	Std	Std
building/construction supervisor	BB	3	Std	Std
cabinet maker – qualified	BB	3	Std	Std
carpenter – qualified	BB	3*	Std	Std
carpenter – unqualified (5 yrs)	B	3	Std	Std
ceiling fixer	C	3	Std	Std
cement renderer	C	3	Std	Std

	IP/PW	TPD	LC	CI
concrete				
concrete	NI	NI	Std	Std
cutter	NI	NI	Std	Std
other worker	NI	NI	Std	Std
crane operator	C	3	Std	Std
decorator	B	3	Std	Std
demolition worker (no explosives)	C	NI	Std	Std
drainer	B	3	Std	Std
draftsperson – qualified	AA	1*	Std	Std
earthmovers				
owner operator established 3 years	C	3	Std	Std
others	C	NI	Std	Std
electrician	BB	3	Std	Std
elevator mechanic	B	3	Std	Std
glazier	B	3	Std	Std
gyprock fixer	C	3	Std	Std
handyman	C	NI	Std	Std
houserestumper	C	3	Std	Std
joiner – qualified	BB	3*	Std	Std
joiner – unqualified	B	3	Std	Std
labourer	NI	NI	Std	Std
lift erector/mechanic	B	3	Std	Std
painter	B	3	Std	Std
paver	C	NI	Std	Std
plasterer	NI	NI	Std	Std

* Eligible for TPD 'own occupation' definition

	IP/PW	TPD	LC	CI
plumber				
roof	C	3	Std	Std
other	BB	3	Std	Std
riggers	C	NI	Std	Std
roof worker – tiler, fixer, repairer	NI	NI	Std	Std
steel erector/fixer	C	NI	Std	Std
tiler				
floors and walls	C	3	Std	Std
roof	NI	NI	Std	Std
Building society	see Bank, building society, credit union			
Bus driver/conductor				
local	B	2	Std	Std
interstate	C	NI	Std	Std
Business executive				
meeting AAA requirements	AAA	1*	Std	Std
meeting AA requirements	AA	1*	Std	Std
other	A	1	Std	Std
Butcher				
qualified (no slaughtering)	BB	3	Std	Std
Butler	BB	2	Std	Std

	IP/PW	TPD	LC	CI
C				
Cabinet maker – qualified	BB	3	Std	Std
Cabinet maker – unqualified (less than 5 years)	B	3	Std	Std
Cafe – owner/worker	B	2	Std	Std
Camerman				
studio	A	1*	Std	Std
aviation	R	R	R	R
other	BB	2	Std	Std
Cane shop	A	1	Std	Std
Canoeing, kayaking professional	NI	NI	Std	Std
Caravan park owner/manager	C	3	Std	Std
Card shop	A	1	Std	Std
Cardiologist	AAA	1*	Std	Std
Caretaker	C	2	Std	Std
Carnival owner or employee	NI	NI	Std	Std
Carpenter				
qualified	BB	3*	Std	Std
not qualified established 5 yrs	BB	3	Std	Std
not qualified less than 5 yrs	B	3	Std	Std
Carpet layer	C	3	Std	Std
Carpet, floor coverings store – sales only	A	1	Std	Std

* Eligible for TPD 'own occupation' definition

	IP/PW	TPD	LC	CI
Cartographer	AA	1*	Std	Std
Cashier				
financial institution	A	1	Std	Std
supermarket	BB	2	Std	Std
Casino (government licensed)				
senior management	AA	1*	Std	Std
clerical	A	1	Std	Std
waiter	B	2	Std	Std
cashier	A	1	Std	Std
croupier	BB	2	Std	Std
bar staff	C	3	Std	Std
security staff	C	NI	Std	Std
Caterer	BB	2	Std	Std
Ceiling fixer	C	3	Std	Std
Cement renderer	C	3	Std	Std
Chauffeur	BB	2	Std	Std
Chef	BB	2	Std	Std
Chemist				
pharmacy	AA	1*	Std	Std
industrial, non hazardous	AAA	1*	Std	Std
other	R	R	Std	Std
Chemist shop				
pharmacist	AA	1*	Std	Std
shop assistant	A	1	Std	Std

	IP/PW	TPD	LC	CI
Child, day care centre				
not working at home – qualified	A	1	Std	Std
other	R	R	Std	Std
China and glassware shop	A	1	Std	Std
Chiropractist	AA	1*	Std	Std
Chiropractor				
government registered	AA	1*	Std	Std
other	R	1	Std	Std
Cinema		see Theatre, cinema		
Circus worker/performer	NI	NI	R	R
Cleaner				
carpet	B	3	Std	Std
office, factory or school	B	3	Std	Std
suburban home	B	3	Std	Std
window				
suburban home only	B	3	Std	Std
city or industrial	C	NI	Std	Std
brick	C	NI	Std	Std
street	C	NI	Std	Std
Clergyman	A	1	Std	Std

* Eligible for TPD 'own occupation' definition

	IP/PW	TPD	LC	CI
Clothing industry				
salesperson (no deliveries)	A	1	Std	Std
management (no manual work)	A	1	Std	Std
fashion designer (not working at home)	A	1	Std	Std
tailor or dressmaker in shop				
or department store	BB	2	Std	Std
tailor or dressmaker working at home	NI	NI	Std	Std
process worker, machinist	NI	NI	Std	Std
patternmaker	BB	2	Std	Std
Club employees				
senior management	AA	1*	Std	Std
clerical	A	1	Std	Std
waiter	B	2	Std	Std
bar staff	C	3	Std	Std
security staff	C	NI	Std	Std
Commercial artist	A	1	Std	Std
Commodity broker	AA	1*	Std	Std
Computer industry				
analyst, consultant, programmer				
degree qualified	AAA	1*	Std	Std
other	AA	1*	Std	Std

	IP/PW	TPD	LC	CI
engineer, technician	A	1	Std	Std
keypunch operator	B	2	Std	Std
salesman	A	1	Std	Std
Computer shop	A	1	Std	Std
Concrete worker				
concrete	NI	NI	Std	Std
cutler	NI	NI	Std	Std
other worker	NI	NI	Std	Std
Confectionery shop	A	1	Std	Std
Construction industry	see Building and construction industry			
Cook	B	2	Std	Std
Coroner	AAA	1*	Std	Std
Conveyancer				
degree qualified	AAA	1*	Std	Std
Not degree qualified	AA	1*	Std	Std
Correctional Officer	C	3	Std	Std
Courier				
driver – owner established 2 years	B	3	Std	Std
driver – other	C	3	Std	Std
motorcycle bicycle	NI	NI	Std	Std
Crane operator	C	3	Std	Std

* Eligible for TPD 'own occupation' definition

	IP/PW	TPD	LC	CI
Crayfisherman	NI	NI	Std	Std
Credit union	see Bank, building society, credit union			
Curator (museum, art gallery, library)	AA	1*	Std	Std
Customs agent – clerical	A	1*	Std	Std
Customs officer	A	1	Std	Std
D				
Dance instructor	B	3	Std	Std
Debt collector				
not repossessions	BB	3	Std	Std
repossessions	C	NI	Std	Std
Delicatessen	BB	2	Std	Std
Demolition worker (no explosives)	C	NI	Std	Std
Dental hygienist/therapist	A	1*	Std	Std
Dental nurse	A	1	Std	Std
Dental/orthodontic technician	AA	1*	Std	Std
Dentist	ML	1*	Std	Std
Department store				
senior management	AA	1*	Std	Std
clerical and sales	A	1	Std	Std
deliveries, storeman	C	3	Std	Std
cleaner	B	3	Std	Std
Diamond cutter, polisher, setter	BB	2	Std	Std
Die maker	BB	3	Std	Std
Dietician (qualified and registered)	AAA	1*	Std	Std

	IP/PW	TPD	LC	CI
Disposal store sales	A	1	Std	Std
Diving – qualified professional				
military (no bomb disposal) or police	NI	NI	Std	Std
abalone	NI	NI	2.00(x)	2.00(x)
construction, bridge, dams, docks, piers etc.				
0–25 metres	NI	NI	2.00(x)	2.00(x)
over 25 metres	NI	NI	5.00(x)	5.00(x)
deep sea, commercial, scientific exploration (including off shore oil rigs)				
0–15 metres	NI	NI	2.00(x)	2.00(x)
16–45 metres	NI	NI	5.00(x)	5.00(x)
over 45 metres	NI	NI	10.00(x)	10.00(x)
instructor (professional)				
full time	NI	NI	2.00(x)	2.00(x)
other	R	R	2.00(x)	2.00(x)
Dock worker, stevedore	C	NI	Std	Std
Doctor	ML	1*	Std	Std
Drainer	B	3	Std	Std
Draftsperson – qualified	AA	1*	Std	Std
Dressmaker	see Clothing industry			
Drillers (water and mineral sample, not offshore)	C	NI	Std	Std

* Eligible for TPD 'own occupation' definition

	IP/PW	TPD	LC	CI
Driver				
ambulance	B	3	Std	Std
armoured car	C	NI	Std	Std
bus				
local	B	2	Std	Std
interstate, long distance	C	NI	Std	Std
chauffeur	BB	2	Std	Std
courier				
car, van – owner established 2 years	B	3	Std	Std
car, van – other	C	3	Std	Std
motorcycle, bicycle	NI	NI	Std	Std
crane driver	C	3	Std	Std
dairy deliveryman, milkman	B	3	Std	Std
driving instructor	BB	2	Std	Std
explosive	NI	NI	Std	Std
forklift	B	3	Std	Std
garbage collections	C	3	Std	Std
hire car – owner driver only	B	3	Std	Std
logging	C	NI	Std	Std
taxi				
owner driver established 2 years	B	3	Std	Std
taxi owner driver established less than 2 years	C	3	Std	Std

	IP/PW	TPD	LC	CI
Driver continued...				
other	C	NI	Std	Std
tow truck	C	NI	Std	Std
truck and van				
local – (200 km radius)				
in occupation 2 years	B	3	Std	Std
other	C	3	Std	Std
mid-distance				
(under 800 km AND same day return)	C	3	Std	Std
long-distance				
(over 800 km OR over night)	NI	NI	Std	Std
Dry cleaning	BB	2	Std	Std
Duty free shop	A	1	Std	Std
E				
Earthmovers				
owner operator established 3 years	C	3	Std	Std
others	C	NI	Std	Std
Economist	AAA	1*	Std	Std
Editor				
newspapers (etc.)	AA	1*	Std	Std
films	A	1	Std	Std

* Eligible for TPD 'own occupation' definition

	IP/PW	TPD	LC	CI
Electrical goods retailer sales	A	1	Std	Std
light manual delivery	BB	2	Std	Std
Electrician	C	3	Std	Std
Electronic supply store – sales	BB	3	Std	Std
Electroplater	A	1	Std	Std
Elevator mechanic	BB	3	Std	Std
Embalmer	B	3	Std	Std
Engineer – (degree qualified)	BB	2	Std	Std
consulting, office duties				
with minimal site work	AAA	1*	Std	Std
others (no manual work)	AA	1*	Std	Std
offshore or underground inspections	BB	3	Std	Std
Engraver	BB	2	Std	Std
Entertainer	NI	NI	Std	Std
ENT Surgeon	AAA	1*	Std	Std
Equipment and Plant Hire	B	3	Std	Std
Explosives worker	NI	NI	2.00	2.00
F				
Factory hand/worker	C	NI	Std	Std
Farmer – owners only, established 2 years				
beef cattle	B#	3	Std	Std
cotton	B#	3	Std	Std
dairy	B#	3	Std	Std
fruit grower, orchardist	C	3	Std	Std

	IP/PW	TPD	LC	CI
grain	B#	3	Std	Std
grape grower	B	3	Std	Std
mixed farming	B#	3	Std	Std
oyster	B	3	Std	Std
poultry	B	3	Std	Std
sheep	B#	3	Std	Std
sugar cane	B	3	Std	Std
wheat	B#	3	Std	Std
Farm employee or labourer	NI	NI	Std	Std
Farm manager	R	R	Std	Std
Farrier, blacksmith	C	3	Std	Std
Fashion designer		see Clothing industry		
Fast food, take away food	B	2	Std	Std
Fencing contractor	C	3	Std	Std
Ferry captain	B	2	Std	Std
Fibre glass moulder	B	3	Std	Std
Film and TV industry				
producer, director, editor	A	1	Std	Std
cameraman				
mainly studio	A	1	Std	Std
aviation	R	R	R	R
other	BB	2	Std	Std
actor	NI	NI	Std	Std
Financial Adviser/Planner/Consultant/				
tertiary qualified	R	1	Std	Std
other	AA	1	Std	Std
# Eligible for 'Farmer Package'				
* Eligible for TPD 'own occupation' definition				

	IP/PW	TPD	LC	CI
Firemen				
fire chiefs and senior officers	A	1	Std	Std
firemen				
city	C	NI	Std	Std
forestry	C	NI	Std	Std
airport	C	NI	Std	Std
oil and natural gas	NI	NI	7.00(x)	7.00(x)
volunteer firemen	RFO	RFO	Std	Std
Fish and chip shop	B	2	Std	Std
Fisherman	NI	NI	Std	Std
Fishmonger	B	2	Std	Std
Fitter	BB	3	Std	Std
Floor sander	C	3	Std	Std
Florist				
shopkeeper	A	1	Std	Std
delivery	B	3	Std	Std
Foundry	C	NI	Std	Std
French polisher	BB	2	Std	Std
Fruit grower, orchardist	C	3	Std	Std
Fruit picker	NI	NI	Std	Std
Funeral director	A	1	Std	Std
Furnishings retailer				
(cushions, fabrics, not furniture)	A	1	Std	Std
Furniture removalist	C	NI	Std	Std

	IP/PW	TPD	LC	CI
Furniture retailer (new furniture)				
sales only	A	1	Std	Std
light manual	BB	2	Std	Std
deliveries	C	NI	Std	Std
Furniture retailer (used furniture)	C	NI	Std	Std
Furrier	BB	2	Std	Std
G				
Garbage contractor	C	3	Std	Std
Garden shop	B	2	Std	Std
Gardener – domestic, landscape	C	3	Std	Std
Garment industry		see Clothing industry		
Gas industry				
inspector, meter reader or tester	A	1	Std	Std
fitter	BB	3	Std	Std
pipe layer	C	NI	Std	Std
Geologist				
consultant and office only	AAA	1*	Std	Std
some field work	A	1	Std	Std
mainly field work	BB	2	Std	Std
underground or offshore	BB	3	Std	Std
Gift shop	A	1	Std	Std
Glazier	B	3	Std	Std

* Eligible for TPD 'own occupation' definition

	IP/PW	TPD	LC	CI
Goldsmith, silversmith	BB	2	Std	Std
Golf instructor (not professional player)	BB	3	Std	Std
Graphic designer	AA	1*	Std	Std
Grape grower	B	3	Std	Std
Greengrocer	B	3	Std	Std
Greenkeeper	B	3	Std	Std
Gunsmith	BB	2	Std	Std
Gymnasium instructor	B	3	Std	Std
Gynaecologist/Obstetrician	AAA	1*	Std	Std
H				
Hairdresser	BBB	2	Std	Std
Harbour Pilot	B	3	Std	Std
Handyman	C	NI	Std	Std
Hardware retailer	BB	2	Std	Std
Health food store	A	1	Std	Std
Home maintenance contractor	C	NI	Std	Std
Homemaker	NI	2	Std	Std
Horse breaker trainer breeder riding instructor strapper	NI NI R B C NI	NI NI R 2 3 NI	Std Std Std Std Std Std	Std Std Std Std Std Std

	IP/PW	TPD	LC	CI
jockey				
flat	NI	NI	Std	Std
steeple	NI	NI	2.00(x)	2.00(x)
harness	NI	NI	Std	Std
rodeo (professional)	NI	NI	2.00(x)	1.00(x)
Hospital staff				
doctor	ML	1*	Std	Std
laboratory technician	A	1*	Std	Std
nurse, nursing sister	BB	3*	Std	Std
nurses aide	B	3	Std	Std
porter, wardman	B	3	Std	Std
Hotel/Motel industry				
managers				
administration only				
> 20 Full time employees	AA	1*	Std	Std
< 20 Full time employees	A	1	Std	Std
other	BB	2	Std	Std
bar staff	C	3	Std	Std
bouncer	NI	NI	Std	Std
kitchen hand	C	NI	Std	Std
security officer	C	NI	Std	Std
head waiters	BB	2	Std	Std
waiters, waitresses	B	2	Std	Std
housekeepers, chambermaids	B	3	Std	Std
House restumper	C	3	Std	Std
Hypnotherapist	AA	1*	Std	Std

* Eligible for TPD 'own occupation' definition

	IP/PW	TPD	LC	CI
I				
Ice cream parlour	BB	2	Std	Std
Importer, exporter – clerical	A	1	Std	Std
Inspector (health, buildings etc.)	A	1	Std	Std
Instrument maker	BB	1*	Std	Std
Insulation installer	C	NI	Std	Std
Interior decorator/designer				
consulting only	A	1	Std	Std
other	B	3	Std	Std
Interpreter	A	1	Std	Std
Investigator		see Private investigator		
Investor	NI	NI	Std	Std
J				
Jackeroo	NI	NI	Std	Std
Janitor	C	3	Std	Std
Jeweller				
retail	A	1	Std	Std
manufacture/repairer	BB	2	Std	Std
Jockey				
flat	NI	NI	Std	Std
harness	NI	NI	Std	Std
steeple	NI	NI	2.00(x)	2.00(x)
Jillaroo	NI	NI	Std	Std
Joiner				

	IP/PW	TPD	LC	CI
qualified	BB	3*	Std	Std
unqualified	B	3	Std	Std
other	C	NI	Std	Std
Journalist (no unusual hazards)	A	1*	Std	Std
Judge	AAA	1*	Std	Std
K				
Kennel proprietor	B	3	Std	Std
L				
Labourer				
farm labourers	NI	NI	Std	Std
others in regular employment	NI	NI	Std	Std
Lab technician – non hazardous	A	1*	Std	Std
Landscape architect (degree qualified)	AAA	1	Std	Std
Landscape architect – other	A	1	Std	Std
Landscape gardener	C	3	Std	Std
Lawnmower – sales and/or service	B	3	Std	Std
Lawnmowing contractor	C	3	Std	Std
Lawyer	ML	1*	Std	Std
Lecturer (university)	AAA	1*	Std	Std
Librarian	AA	1*	Std	Std
Light fittings store	A	1	Std	Std

* Eligible for TPD 'own occupation' definition

	IP/PW	TPD	LC	CI
Linesman – telephone or electrical	C	3	Std	Std
Liquor store	BB	2	Std	Std
Livestock broker, buyer, dealer	BB	2	Std	Std
Locksmith	BB	2	Std	Std
Logging in permanently located mill only	C	NI	Std	Std
in mobile mill	NI	NI	Std	2.00
tree feller	NI	NI	Std	1.00(x)
tree surgeon	C	NI	Std	Std
Loss adjuster	A	1*	Std	Std
Lumber (yard work)	C	NI	Std	Std
M				
Machinery, equipment hire	B	3	Std	Std
Machinist				
metal or wood – qualified	BB	3	Std	Std
clothing				
			see Clothing industry	
Mail contractor	B	3	Std	Std
Management consultant	AA	1*	Std	Std
Manicurist – not working at home	BB	2	Std	Std
Marina owner	B	2	Std	Std
Marine engineer (seaman)	NI	NI	Std	Std
Market gardener	C	3	Std	Std
Marital arts instructor	B	3	Std	Std
Masseur	B	3	Std	Std
salon only	B	3	Std	Std

	IP/PW	TPD	LC	CI
other	NI	NI	Std	Std
Meat packer	C	NI	Std	Std
Mechanic	BB	3*	Std	Std
Medical practitioner	ML	1*	Std	Std
Member of Parliament	NI	NI	Std	Std
Merchant banker	AAA	1*	Std	Std
Merchant marine	NI	NI	Std	Std
Merchant			see Shopkeeper	
Metal dealer (scrap)	C	NI	Std	Std
Metal fabricator	B	3	Std	Std
Metallurgist	AAA	1*	Std	Std
Meteorologist	AAA	1*	Std	Std
Meter reader (gas, electricity)	A	1	Std	Std
Milk vendor	B	3	Std	Std
Mining				
† 2 year accident and sickness cover on a non-occupational basis only with a one month waiting period				
executive manager	AA	1*	Std	Std
clerical	A	1	Std	Std
surface worker				
qualified tradesperson – no explosives	RFO	RFO	Std	Std
others – no explosives	C	NI	Std	Std
explosives handling	NI	NI	2.00	2.00
underground worker – larger established mines in Australia only				
supervisors	C†	NI	Std	Std

* Eligible for TPD 'own occupation' definition

	IP/PW	TPD	LC	CI
qualified tradesperson	C†	NI	Std	Std
explosives handling	NI	NI	3.00	3.00
other mining	NI	NI	2.00	2.00
Minister of religion	A	1	Std	Std
Model	NI	NI	Std	Std
Motel	see Hotel/Motel industry			
Motor vehicle				
salesman	A	1	Std	Std
detailer	B	3	Std	Std
mechanic	BB	3	Std	Std
trimmer	BB	3*	Std	Std
accessories and spare parts sales	BB	2	Std	Std
assembly worker	C	NI	Std	Std
wrecker	C	NI	Std	Std
Motorcycle				
salesman	BB	2	Std	Std
mechanic	BB	3*	Std	Std
Moulder	C	NI	Std	Std
Museum or gallery proprietor	A	1	Std	Std
Music teacher	A	1	Std	Std
Musical instrument				
sales only	A	1	Std	Std
lifting or deliveries	B	3	Std	Std

	IP/PW	TPD	LC	CI
Musician				
symphony orchestra	B	NI	Std	Std
employee of club or restaurant band	C	NI	Std	Std
other	NI	NI	Std	Std
N				
Nanny	R	2	Std	Std
Naturopath	AA	1*	Std	Std
Neurologist	AAA	1*	Std	Std
Newsagent	A	1	Std	Std
Newspaper staff				
editor	AA	1*	Std	Std
office worker	A	1	Std	Std
journalist or reporter (no unusual hazards)	A	1	Std	Std
photographer	BB	2	Std	Std
printer	BB	2	Std	Std
Nurse				
enrolled nurse/nurse's aide	B	3	Std	Std
intellectual disability	B	3	Std	Std
mothercraft	B	3	Std	Std
registered/nursing sister	BB	3	Std	Std
registered	BB	3	Std	Std

* Eligible for TPD 'own occupation' definition

	IP/PW	TPD	LC	CI
Nurseryman	B	2	Std	Std
O				
Obstetrician	AAA	1*	Std	Std
Occupational health and safety inspector	A	1*	Std	Std
Occupational therapist	AAA	1*	Std	Std
Office supplies/stationer	A	1	Std	Std
Office worker	A	1	Std	Std
Office equipment salesman	A	1	Std	Std
serviceman	BB	2	Std	Std
Oil and gas offshore workers				
geologists, engineers, laboratory technicians	R	R	Std	Std
derrickmen, crane drivers, labourers, tool pushers, drillers	C†	NI	Std	Std
onshore workers				
geologists, engineers, laboratory technicians	R	R	Std	Std
derrickmen, crane drivers, labourers, tool pushers, drillers	C†	NI	Std	Std
onshore workers				
geologists, engineers, laboratory technicians	A	1	Std	Std
derrickmen, crane drivers, labourers, tool pushers, drillers	C†	NI	Std	Std
Ophthalmologist	AAA	1*	Std	Std
Optical dispenser, mechanic, technician	A	1	Std	Std
Optometrist	AAA	1*	Std	Std

	IP/PW	TPD	LC	CI
Orchardist, fruit grower	C	3	Std	Std
Orthodontist	AAA	1*	Std	Std
Orthopaedic surgeon	AAA	1*	Std	Std
Osteopath	AA	1*	Std	Std
Outdoor supplies retailer (tents, BBQ)	A	1	Std	Std
P				
Paint/wallpaper store	BB	2	Std	Std
Painter	C	3	Std	Std
Panel beater	B	3	Std	Std
Parking station attendant	B	3	Std	Std
Parking warden	B	3	Std	Std
Park ranger	B	3	Std	Std
Pastry cook	BB	2	Std	Std
Pathologist	AAA	1*	Std	Std
Patternmaker (industrial leg foundry)	BB	2	Std	Std
Paver	C	NI	Std	Std
Pawnbroker	BB	2	Std	Std
Payroll guard	C	NI	Std	Std
Personnel consultant	AA	1*	Std	Std
Pest exterminator	BB	3	Std	Std
Pet shop	BB	2	Std	Std
Pharmacist	AA	1*	Std	Std
Photoengraver	BB	2	Std	Std
† 2 years accident and sickness cover on a non-occupational basis with a one month waiting period.				
* Eligible for TPD 'own occupation' definition				

	IP/PW	TPD	LC	CI
Photographer				
mainly studio	A	1	Std	Std
aviation	R	R	R	R
other	BB	2	Std	Std
Photographic store	BBB	2	Std	Std
Physician – specialist consultant	AAA	1*	Std	Std
Physiotherapist	A	1*	Std	Std
Piano tuner	BB	2	Std	Std
Picture framer	BB	2	Std	Std
Pilot				
aviation		see Aviation		
Plasterer	NI	NI	Std	Std
Plumber				
roof	C	3	Std	Std
other	BB	3*	Std	Std
Podiatrist	AA	1*	Std	Std
Police				
superintendents	A	1	Std	Std
other officers	C	3	Std	Std
motorcycle police	NI	NI	Std	Std
bomb disposal	NI	NI	2.00	2.00
dog squad	C	NI	Std	Std
special operations group	NI	NI	Std	Std
airwing	NI	NI	2.50(x)	2.50(x)

	IP/PW	TPD	LC	CI
Post office				
manager	A	1	Std	Std
counter clerk	A	1	Std	Std
postman	B	3	Std	Std
sorter	B	3	Std	Std
Potter	R	R	Std	Std
Poultry farmer	B	3	Std	Std
Printer	B	2	Std	Std
Prison warden	C	NI	Std	Std
Private investigator				
armed	C	NI	Std	Std
unarmed	B	NI	Std	Std
Process worker				
clothing industry	NI	NI	Std	Std
hazardous industries (eg munitions, acids)	NI	NI	Std	Std
other	C	NI	Std	Std
Professional sportsman	NI	NI	R	R
Professor – university	AAA	1*	Std	Std
Psychiatrist	ML	1*	Std	Std
Psychologist	AA	1*	Std	Std
Public servants	see Public Service guidelines			
Pulp and paper mill employees				
(in mill or yard only)	C	NI	Std	Std

* Eligible for TPD 'own occupation' definition

	IP/PW	TPD	LC	CI
Q				
Quantity surveyor	AA	1*	Std	Std
Quarry worker (no explosives)	C	NI	Std	Std
R				
Radio and television announcer	R	R	Std	Std
Radiographer	AA	1*	Std	Std
Radiologist	AAA	1*	Std	Std
Railway worker				
driver or guard	B	3	Std	Std
inspector	B	2	Std	Std
labourer	NI	NI	Std	Std
railway police	C	3	Std	Std
shunter	C	NI	Std	Std
signalman	B	2	Std	Std
station master	B	2	Std	Std
station assistant	B	2	Std	Std
track laying/maintenance	C	NI	Std	Std
Real estate agent				
licensed agent	AA	1*	Std	Std
other	A	1	Std	Std
Receptionist	A	1	Std	Std
Record shop	A	1	Std	Std
Refrigeration mechanic	BB	3	Std	Std
Rehabilitation consultant (medically qualified)	AAA	1*	Std	Std
Removalist	C	NI	Std	Std

	IP/PW	TPD	LC	CI
Repairman				
office equipment or household appliances	BB	2	Std	Std
Reporter (no unusual hazards)	A	1	Std	Std
Restaurant owner				
administration only, no cooking/waiting	A	1	Std	Std
other	BB	2	Std	Std
Restaurant employees				
chef	BB	2*	Std	Std
cook	B	2	Std	Std
waiter	B	2	Std	Std
Retail shops	see Shopkeeper			
Rigger	C	NI	Std	Std
Roadmaker	C	NI	Std	Std
Rolladoor Installer	B	3	Std	Std
Roof worker – tiler, fixer or repairer	NI	NI	Std	Std
Rubbish collector	C	NI	Std	Std
S				
Saddlemaker	B	3	Std	Std
Sailmaker	B	2	Std	Std
Sales Representative	A	1	Std	Std
Salesperson	see appropriate industry or merchandise involved			
Sandblaster	C	NI	Std	Std
* Eligible for TPD 'own occupation' definition				

	IP/PW	TPD	LC	CI
Sawmill worker	C	NI	Std	Std
permanently located mill				
mobile mill	NI	NI	Std	2.00
Scaffold erector	C	NI	Std	Std
Scrap dealer (metal)	C	NI	Std	Std
Seaman – navy	NI	NI	Std	Std
Second hand dealer	C	NI	Std	Std
Secretary	A	1	Std	Std
Security guard				
armed	C	NI	Std	Std
unarmed				
club/hotel security	C	NI	Std	Std
other	B	NI	Std	Std
Service station				
cashier, console operator	BB	2	Std	Std
mechanic	BB	3	Std	Std
proprietor	BB	2	Std	Std
Shearer	NI	NI	Std	Std
Sheet metal worker	BB	3	Std	Std
Shipwright	B	3	Std	Std
Shoemaker or repairer	BB	2	Std	Std
Shoe shop (retail sales, not repair)	A	1	Std	Std
Shopfitter	B	3	Std	Std
Shopkeeper				

	IP/PW	TPD	LC	CI
Where not already classified as 'A', consideration will be given to an A rating where the applicant's duties are limited to sales and managerial duties only.				
In such circumstances a full account of the occupational duties must be given.				
adult books and merchandise	BB	3	Std	Std
antique dealer				
sales and office only	A	1	Std	Std
restoration	BB	2	Std	Std
delivery	B	3	Std	Std
aquarium shop	BB	2	Std	Std
artist supplies	A	1	Std	Std
baby shop	A	1	Std	Std
bedding store	A	1	Std	Std
bicycle store	BB	2	Std	Std
boating equipment supply, chandler	A	1	Std	Std
bookshop	A	1	Std	Std
bootmaker	BB	2	Std	Std
brassware shop	A	1	Std	Std
bread/cake shop	BB	2	Std	Std
butcher				
no slaughtering	BB	3	Std	Std
slaughtering	C	NI	Std	Std
cafe	B	2	Std	Std

* Eligible for TPD 'own occupation' definition

	IP/PW	TPD	LC	CI
cane shop	A	1	Std	Std
card shop	A	1	Std	Std
carpet, floor coverings store sales only	A	1	Std	Std
chemist shop				
pharmacist	AA	1*	Std	Std
shop assistant	A	1	Std	Std
china and glassware shop	A	1	Std	Std
clothing store	A	1	Std	Std
computer shop	A	1	Std	Std
confectionery shop	A	1	Std	Std
delicatessen	BB	2	Std	Std
department store				
senior management	AA	1*	Std	Std
clerical sales only	A	1	Std	Std
deliveries, storemen	C	3	Std	Std
cleaner	B	3	Std	Std
disposal store	A	1	Std	Std
duty free shop	A	1	Std	Std
electrical goods retailer – delivery	C	3	Std	Std
electrical goods retailer – light manual	BB	2	Std	Std
electrical goods retailer – sales only	A	1	Std	Std
electronic supply store	A	1	Std	Std
fast food, take away food	B	2	Std	Std
fish and chip shop	B	2	Std	Std
florist				

	IP/PW	TPD	LC	CI
shopkeeper	A	1	Std	Std
delivery	B	3	Std	Std
furnishings retailer				
(cushions, fabrics, not furniture)	A	1	Std	Std
furniture retailer (new furniture)				
sales only	A	1	Std	Std
light manual	BB	2	Std	Std
deliveries	C	NI	Std	Std
furniture retailer (used furniture)	C	NI	Std	Std
garden shop	B	2	Std	Std
gift shop	A	1	Std	Std
greengrocer	B	3	Std	Std
gunsmith	BB	2	Std	Std
haberdasher	A	1	Std	Std
hardware retailer	BB	2	Std	Std
health food store	A	1	Std	Std
ice cream parlour	BB	2	Std	Std
jewellery store	A	1	Std	Std
light fittings store	A	1	Std	Std
liquor store	BB	2	Std	Std
locksmith	BB	2	Std	Std
milk bar	B	3	Std	Std
motor vehicle accessories and spare parts	BB	2	Std	Std
musical instruments				
sales only	A	1	Std	Std
lifting or deliveries	B	3	Std	Std

* Eligible for TPD 'own occupation' definition

	IP/PW	TPD	LC	CI
newsagent	A	1	Std	Std
nursery or garden shop	B	2	Std	Std
office supplies/stationer	A	1	Std	Std
outdoor supplies retailer (tents, BBQ)	A	1	Std	Std
paint/wallpaper store	BB	2	Std	Std
pawnbroker	BB	2	Std	Std
pet shop	BB	2	Std	Std
photographic store	BBB	2	Std	Std
produce merchant	B	3	Std	Std
record shop	A	1	Std	Std
second hand goods	C	NI	Std	Std
shoemaker or repairer	BB	2	Std	Std
shoe shop (retail sales not repair)	A	1	Std	Std
sporting goods store	A	1	Std	Std
supermarket				
administration only	A	1	Std	Std
cashier	BB	2	Std	Std
other	B	3	Std	Std
swimming pool supplies	BB	2	Std	Std
take away food shop	B	2	Std	Std
tobacconist	A	1	Std	Std
toy shop	A	1	Std	Std
video shop proprietor	A	1	Std	Std

	IP/PW	TPD	LC	CI
Signwriter	B	3	Std	Std
Singer	NI	NI	Std	Std
Skylight fitter	C	3	Std	Std
Social Worker	AA	1*	Std	Std
Solicitor	ML	1*	Std	Std
Speech therapist	AAA	1*	Std	Std
Sportsman – professional	NI	NI	R	R
Sporting goods store	A	1	Std	Std
Spray painter	B	3	Std	Std
Statistician	AAA	1*	Std	Std
Steel erector/fixer	C	NI	Std	Std
Steeplejack	NI	NI	2.00	2.00
Stockbroker	AAA	1*	Std	Std
Stevodore	C	NI	Std	Std
Steward (airline)	NI	NI	Std	Std
Stockman	NI	NI	Std	Std
Stock and station agent – no manual duties	A	1	Std	Std
Stonemason	B	3	Std	Std
Storeman	B	3	Std	Std
Student	NI	NI	Std	Std
Stuntman	NI	NI	R	R
Sugar cane farmer				
owner, established 2 years	B	3	Std	Std

* Eligible for TPD 'own occupation' definition

	IP/PW	TPD	LC	CI
Supermarket				
administration only	A	1	Std	Std
cashier	BB	2	Std	Std
other	B	3	Std	Std
Surfboard Shaper	C	3	Std	Std
Surgeon	AAA	1*	Std	Std
Surveyor				
mine	B	3	Std	Std
marine	B	3	Std	Std
field	A	1	Std	Std
office only	AA	1*	Std	Std
quantity	AA	1*	Std	Std
Swimming instructor	BB	3	Std	Std
Swimming pool builder	B	3	Std	Std
Swimming pool supplies	BB	2	Std	Std
T				
TAB agent	A	1	Std	Std
Tailor	see Clothing industry			
Take away food shop	B	2	Std	Std
Tanner	B	3	Std	Std
Tax consultant				
qualified	AAA	1*	Std	Std
other	A	1	Std	Std
Taxi				
owner driver established 2 years	B	3	Std	Std
owner driver established less than 2 years	C	3	Std	Std

	IP/PW	TPD	LC	CI
other	C	N1	Std	Std
Taxidermist	BB	2	Std	Std
Teacher (in a school, university or college)				
general primary and secondary				
teaching maths, science and arts	A	1	Std	Std
pre-school	A	1	Std	Std
music	see Music teacher			
cooking	A	1	Std	Std
physical education	A	1	Std	Std
agriculture	A	1	Std	Std
home science	A	1	Std	Std
metal work, wood work	A	1	Std	Std
headmaster, principal	AAA	1*	Std	Std
professor	AAA	1*	Std	Std
Teachers aide or helper	A	1	Std	Std
Telephone technician	BB	2*	Std	Std
Television industry	see Film and TV industry			
Tennis coach (not professional player)	BB	3	Std	Std
Theatre, cinema				
manager, ticket seller, usher	A	1	Std	Std
confectionery seller	A	1	Std	Std
projectionist	A	1	Std	Std
cleaner	B	3	Std	Std

* Eligible for TPD 'own occupation' definition

	IP/PW	TPD	LC	CI
Tiler	C	3	Std	Std
floors and walls				
roof	NI	NI	Std	Std
Timber merchant	B	2	Std	Std
Tobacconist	A	1	Std	Std
Toolmaker	BB	2*	Std	Std
Tour guide	B	3	Std	Std
Town planner	AA	1*	Std	Std
Tow truck driver	C	NI	Std	Std
Toy shop	A	1	Std	Std
Train driver/guard	B	3	Std	Std
Travel agent/consultant	A	1	Std	Std
Tree feller/lopper	NI	NI	Std	1.00(x)
Tree surgeon, arborist-qualified	C	NI	Std	Std
Truck driver		see Driver		
Tugboat crew (not deep sea)	C	NI	Std	Std
Tupperware salesperson	R	NI	Std	Std
TV technician	BB	2	Std	Std
Typesetter	A	1*	Std	Std
Typist	A	1	Std	Std
Tyre				
sales	A	1	Std	Std

	IP/PW	TPD	LC	CI
repair and fitting	C	NI	Std	Std
U				
Undertaker	A	1	Std	Std
Upholsterer	BB	2	Std	Std
Urologist	AAA	1*	Std	Std
V				
Valuer	AA	1*	Std	Std
Vending machine serviceman	BB	2	Std	Std
Veterinary nurse	B	2	Std	Std
Veterinary surgeon				
small animal	AA	1*	Std	Std
large animal	A	1*	Std	Std
Video shop proprietor	A	1	Std	Std
Vigneron	B	3	Std	Std
W				
Waiter, waitress (restaurant)	B	2	Std	Std
Wallpaper hanger	B	3	Std	Std
Watchmaker	A	1*	Std	Std
Waterproofers	C	3	Std	Std

* Eligible for TPD 'own occupation' definition

	IP/PW	TPD	LC	CI
Welfare officer	A	1*	Std	Std
Weider	BB	3	Std	Std
Wharf labourer	C	NI	Std	Std
Window cleaner				
suburban home only	B	3	Std	Std
city or industrial	C	NI	Std	Std
Window dresser	A	1	Std	Std
Window tinter				
motor vehicle/home/office	B	3	Std	Std
Wine merchant – wholesale and retail	BB	2	Std	Std
Wine maker				
(qualified) no manual labour	A	1*	Std	Std
(unqualified) no manual labour	BB	1	Std	Std
other	B	3	Std	Std
Wool broker/buyer	A	1*	Std	Std
Wool classer	BB	2*	Std	Std
Wrecker or demolisher (no explosives)	C	NI	Std	Std
X, Y and Z				
X-ray machine operator or technician	AA	1*	Std	Std
Zoologist	AAA	1*	Std	Std
Zoo worker	B	3	Std	Std

* Eligible for TPD 'own occupation' definition

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Pastimes Guide

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Pastimes Guide

Certain pastimes and activities carry an increased risk for insurance.

This section of the guide covers a wide variety of pastime pursuits including motor racing and aviation, etc.

In some cases, applying a loading may be straightforward, eg for amateur rugby league with income protection or a professional boxer wanting life cover, whilst other pastimes can be a little more complex.

If you need help, don't forget you can call your MLC Service team. A quote reference number can be provided to confirm the underwriting advice provided. This reference number should be displayed on the application form if an application is submitted. Where a loading has been quoted and it is acceptable to the client, the additional premium should be collected and sent to your MLC Service team with the application and the client's signed acceptance of the extra premium.

Legend – Pastimes Rating Classification

Std

Standard rates apply.

R

Refer this risk to your
MLC Underwriting team.

x

An exclusion must apply for this risk – the
exclusion also applies to the short waiting
period for accidental injury option.

2.00, 5.00 etc.

An extra premium of \$2.00 or \$5.00 etc.
per \$1,000 sum insured is chargeable
for this risk.

2.00 (x), 5.00 (x) etc.

As above but with an option to avoid the
extra premium by excluding the risk. For
your convenience, the Application Form has
provision for the acceptance of exclusions.

10%, 25%, 50%

The premium rate is to be increased by the
percentage indicated, to compensate for
the extra risk.

10% (x), 25% (x), 50%(x)

As above, but with an option to avoid the
extra premium by excluding the risk. For
your convenience, the Application Form has
provision for the acceptance of exclusions.

25%, (30 x) or (90 x)

This option is only available for amateur
football players of rugby union, rugby league
and Australian rules. As an alternative to the
25% loading, the client may choose to have
any claim relating to football excluded for the
first 1 month (A categories only) or 3 months
(B and C categories) of any claim. Where the
short waiting period for accidental injury
option has been requested, football cover
is not available and will be excluded from
the policy.

Pastimes

	IP/PW	TPD	LC	CI
A				
Abseiling	X	X	Std	Std
Aviation				
balloonists				
amateurs	RFO	RFO	Std	Std
competition	x	x	2.00(x)	1.00(x)
professionals	x	x	2.00(x)	1.00(x)
gliding				
0-100 launches per annum	RFO	RFO	Std	Std
over 100 launches per annum	20%(x)	Std	Std	Std
hang gliding				
powered	x	x	3.00(x)	1.50(x)
non powered	x	x	5.00(x)	2.50(x)
instructor	x	x	3.00(x)	1.50(x)
microlight				
0-50 hours per annum	x	x	3.00(x)	1.50(x)

	IP/PW	TPD	LC	CI
over 50 hours per annum	x	x	5.00(x)	2.50(x)
parachutist				
up to 25 jumps per annum	x	Std	Std	Std
over 25 jumps per annum	x	x	2.00(x)	1.00(x)
paragliding, paraskiers				
up to 25 flights per annum	x	Std	Std	Std
over 25 flights per annum	x	x	2.00(x)	1.00(x)
private flying				
student pilot				
0-75 hours per annum	Std	Std	Std	Std
75-250 hours per annum	10%(x)	x	2.50(x)	1.25(x)
over 250 hours per annum	15%(x)	x	2.50(x)	1.25(x)

	IP/PW	TPD	LC	CI
licensed pilot				
0–100 hours per annum	RFO	RFO	Std	Std
101–250 hours per annum	10%(x)	x	2.50(x)	1.25(x)
over 250 hours per annum	15%(x)	x	2.50(x)	1.25(x)
B				
Boxing				
Amateur	x	x	Std	Std
Professional	NI	NI	2.50	NI
C				
Canoeing, kayaking				
recreational	RFO	RFO	Std	Std
competition	x	Std	Std	Std
professional	NI	NI	Std	Std
D				
Diving				
amateur or recreational – qualified				

	IP/PW	TPD	LC	CI
0–40 metres	RFO	RFO	Std	Std
over 40 metres	R	R	R	R
amateur or recreational – unqualified	x	x	x	x
Caving, potholing	x	x	5.00(x)	5.00(x)
Night diving	R	R	Std	Std
F				
Football (soccer) no short waiting period available				
amateur	RFO	RFO	Std	Std
professional	x	x	Std	Std
Football (touch/tip/tag) no short waiting period available – amateur				
	RFO	RFO	Std	Std
Football (league/union/Australian rules) no short waiting period available				
amateur AAA,ACT,ML, AA and A categories	25%(90x)	RFO	Std	Std
amateur BBB, BB,B and C categories	25%(90x)	RFO	Std	Std
professional	x	x	Std	Std

	IP/PW	TPD	LC	CI
G				
Grid Iron				
professional	x	x	Std	Std
H				
Hockey (grass, ice)				
amateur	RFO	RFO	Std	Std
professional	x	x	Std	Std
Horse				
riding (amateur only)				
show jumping	25%(x)	RFO	Std	Std
recreation (including dressage)	RFO	RFO	Std	Std
rodeo (amateur only)	x	x	Std	x
rodeo (professional)	NI	NI	2.00(x)	1.00(x)
polo/polocross	25%(x)	RFO	Std	Std
J				
Judo, karate				
amateur	RFO	RFO	Std	Std
competition	x	x	Std	Std
professional	x	x	Std	Std

M	IP/PW	TPD	LC	CI
Martial arts				
Amateur	RFO	RFO	Std	Std
Competition	x	x	Std	Std
Professional	x	x	Std	Std
Motor cycle racing				
circuit racing	x	x	5.00(x)	2.50(x)
speedway	x	x	5.00(x)	2.50(x)
scramblers, hillclimbs, trials, motorcross	x	x	Std	Std
trail bike riding (non-competition)	R	R	Std	Std
trail bike racing (competition)	x	x	Std	Std
Motor racing (Income Protection and Total and Permanent Disablement Benefits are not available for motor racing professionals)				
drag racing				
funny cars	x	x	4.00(x)	2.00(x)
modified production, hot rod	NI	NI	2.00(x)	1.00(x)
pro stock, super stock, street altered	x	x	2.00(x)	1.00(x)
top fuel	x	x	5.00(x)	2.50(x)

	IP/PW	TPD	LC	CI
karting				
recreational only	Std	Std	Std	Std
enduro	x	x	5.00(x)	2.50(x)
Motor racing (Income Protection and Total and Permanent Disablement Benefits are not available for motor racing professionals) continued...				
formula E (superkarting, 250 international)	x	x	5.00(x)	2.50(x)
sprint	x	x	Std	Std
rallying				
national	x	x	2.00(x)	1.00(x)
restricted	x	RFO	Std	Std
saloons (circuit racing only)				
group A (touring cars)	x	x	3.00(x)	1.50(x)
HQ holden	x	x	3.00(x)	1.50(x)
series production	x	RFO	Std	Std
street sedans	x	RFO	Std	Std
single seater				

	IP/PW	TPD	LC	CI
Australian formula 2	x	x	15.00(x)	7.50(x)
formula brabham	x	x	15.00(x)	7.50(x)
formula libre	x	x	5.00(x)	2.50(x)
formula vee	x	x	5.00(x)	2.50(x)
speedway				
midget	x	x	3.00(x)	1.50(x)
Nascar/Auscar	x	x	5.00(x)	2.50(x)
production	x	x	4.00(x)	2.00(x)
sprint	x	x	3.00(x)	1.50(x)
sports cars				
clubman sports	x	x	2.50(x)	1.25(x)
Group 2	x	x	7.50(x)	3.75(x)
production cars	x	x	4.00(x)	2.00(x)
sports sedans, super saloons	x	x	4.00(x)	2.00(x)
super modified, super stock	x	x	5.00(x)	2.50(x)

	IP/PW	TPD	LC	CI
veteran, vintage, historic				
vintage events	Std	Std	Std	Std
other motor sports				
autocross	x	Std	Std	Std
cross country	x	Std	Std	Std
hill climbs, trials	RFO	RFO	Std	Std
marshals	R	RFO	Std	Std
motorcross, motorkhana	x	x	Std	Std
off road racing	R	RFO	Std	Std
rallycross	RFO	RFO	Std	Std
sand racing	x	Std	Std	Std
Motor, power boat racing				
up to 100 kph	x	x	Std	Std
100 to 150 kph	x	x	3.00(x)	1.50(x)
over 150 kph	x	x	5.00(x)	2.50(x)
Mountain climbing (Australia and NZ)	x	x	2.00(x)	1.00(x)
Mountain bike riding				
downhill	x	x	Std	Std
competitive	90x	x	Std	Std

	IP/PW	TPD	LC	CI
R				
Rockclimbing				
Indoors	Std	Std	Std	Std
Outdoors	x	x	IC	IC
S				
Sailing				
Australian waters	RFO	RFO	Std	Std
other	R	R	R	R
Skiing (snow)				
amateur	RFO	RFO	Std	Std
competition	x	x	Std	Std
professional	NI	NI	Std	Std
W				
Water skiing				
professional	NI	NI	Std	Std
regular competition	x	x	Std	Std
other	RFO	RFO	Std	Std
Wrestling				
amateur	x	RFO	Std	Std
professional	NI	NI	Std	Std

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Health Guide



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Health Guide

Health is a major consideration in the assessment of applicants for insurance.

It is vital that the applicant completes the Application Form fully and accurately. This will help expedite the issue of a policy.

In the following pages we have described some common medical conditions. We have some general information about them and what things the underwriter has to take into consideration in their assessment.

It is also important to note that the guide should only be used for individual medical conditions. Where there is a history of multiple medical conditions, the ratings and requirements may vary and the matter should be referred to your MLC Underwriting team.

In particular, the underwriting of Income Protection requires the consideration of a combination of factors including occupation, health, waiting period proposed etc, all of which can influence the final assessment.

Height and Weight

BMI (Body Mass Index) is the preferred measurement for most obesity researchers and other health professionals as well as the definition used in most published information on overweight and obesity.

BMI is derived from a calculation based on the height and weight of an individual and is not gender specific. It does not directly measure the percentage of body fat but is a more accurate indicator of overweight and obesity than relying on weight alone.

BMI is determined by dividing a person's weight in kilograms by their height squared in metres.

eg for a person whose weight is 88 kgs and height is 160 cm, the calculation is:

$$\begin{aligned}\text{weight} &= 88 \text{ kgs} / \text{height in meters squares} \\ &= 1.6 \text{ m} \times 1.6 \text{ m} = 2.56 \text{ m} \\ &88 \text{ kgs} / 2.56 \text{ m}\end{aligned}$$

$$\text{BMI} = 34.37$$

BMI Ranges – what do they mean?

Experts generally consider BMI below 20 to be underweight and a BMI of 20–25 to be healthy. BMI's of 25–30 are regarded as overweight and those that exceed 30 obese. BMI in the obese range generally require a loading for insurance purposes.

Underwriting requirements

In all cases below MLC's mandatory medical examination requirement level:

- Where BMI is between 18 and 33 and there are no other health problems no requirements are necessary.
- Where the BMI is 33 and above, and below 40 and where there is no other significant health problem eg diabetes, heart complaint, cancer, kidney disease, liver disease, high cholesterol etc, a special short form examination plus Multiple Biochemical Analysis and Hepatitis B and C serology is required. Otherwise a medical examination or a paramedical should be arranged.
- Where BMI is 40 or more and where there is no other significant health problem eg diabetes, heart complaint, cancer, kidney disease, liver disease, high cholesterol etc, a medical examination with usual doctor, Multiple Biochemical Analysis and Hepatitis B and C serology is required.

The short form examination, Mini Health Check, is available from mlc.com.au or either of the three major paramedical service providers, Pathrec who refer to the service as Quick 'Q' check and Lifescreen who call it 'Express Check' or UHG who refer to it as 'Mini Check.' Refer to page 30 and 31 for contact details.

If in doubt please contact your MLC Service team.

Smoking

The most common substance smoked in Australia is tobacco. Tobacco is a plant that contains the drug nicotine. The leaves of the tobacco plant can be prepared for smoking (cigarettes, pipes, cigars etc), chewing or inhaling. Tobacco use is the largest single preventable cause of death and disease in Australia today.

Using tobacco has been shown to increase the risk of health problems including:

- Ischaemic heart disease (IHD)
- Sudden cardiac death
- Stroke (cerebrovascular accident)
- Atherosclerotic peripheral vascular disease
- Aortic aneurysm
- Chronic obstructive pulmonary diseases (COPD)
- Lung cancer
- Other cancers (including mouth, pharynx, oesophagus, bladder, kidney, pancreas and stomach).

Underwriting Approach

MLC offers a discounted premium rate for 'non-smokers'. To be eligible for non-smoker rates the life insured must have not smoked tobacco or any other substance, or used any nicotine containing products in the previous 12 months.

Any level of consumption will attract smoker rates. The client who only smokes socially or only has one a week must still be rated as a smoker. Exceptions may be made for applicants who smoke no more than 3 cigars per year.

Use of marijuana in the past 12 months will attract smoker rates independent of any additional rating applied.

Where a life insured has cover in force at smoker rates and has not smoked tobacco or any other substance, or used any nicotine containing products (eg nicorettes; nicotine patches) in the last 12 months, they may apply to MLC to alter the premium to non-smoker rates.

Application for non-smoker rates may be made by completion of form 52196 MLC (Alteration to Non-Smoker). Any history, since original application, of medical conditions that are smoking related or for which smoking is considered a risk factor will be considered in the assessment of these applications.

Asthma

Asthma is a reversible narrowing of the airways in the lungs. Asthma symptoms include wheezing, coughing (particularly at night) chest tightness, difficult breathing and shortness of breath.

The prevalence of asthma in Australia is relatively high by international standards

- 14–16% of children (one in six)
- 10–12% of adults (one in nine)

Over 2.2 million Australians have currently diagnosed asthma.

Asthma is a treatable health condition. Although at present there is no cure, with good management people with asthma can lead normal active lives.

Most people with asthma lead normal lives and can participate competitively in sport. Many of Australia's leading sportsmen and women have asthma.

References;

National Asthma Council Australia 2007

Australian Bureau of Statistics (ABS) release
March 2007

Underwriting approach

The Underwriter assesses an applicant checking that their asthma is well controlled.

These checks include (but are not limited to):

- Regular use of preventative medication.
- No recent history of treatment with oral steroids or hospitalisation.
- Applicant is a non-smoker.
- Asthma is not exacerbated by the applicant's occupation.
- Applicant checks his/her peak flow with a favourable result.

Mild asthma, with no adverse risk factors will generally be accepted at standard rates.

An Asthma questionnaire is to be completed in all cases and subsequent medical evidence may also be requested to support the application.

Back/Neck Pain or Disorders

These include, but are not limited to:–

- Sciatica
- Spondylosis
- Wry Neck
- Whiplash
- Disc Prolapse
- Ligament or Muscular strain
- Non specific back/neck pain.

In order to underwrite back/neck pain or disorders the underwriter takes into account a number of different factors, these include: What the diagnosis is, date of diagnosis, prognosis, what caused the problem/disorder, results of x-rays, any time off work, type of treatment the client had or will be required to have, occupation (manual or non manual), duties they need to perform on a daily basis and any recurrences. The underwriter will look at any associated symptoms with the back/neck problem such as anxiety or depression.

Underwriting approach

With all the above information taken into account a weighting is applied to the type of condition it is, how much time they lost from work, the frequency of symptoms, the treatment they received and how long they have been symptom free.

With the weightings applied, the underwriter will look at the occupation class the client is under and whether an exclusion clause will apply.

Certain weightings will allow AAA to A rated occupation to be accepted at standard rates. The same weightings on BB to C rates could lead to a full spine exclusion.

If the client is to have back/neck surgery in the future we would decline all covers until the client made a full recovery, and for disability benefits, made a full return to work. If the client has a history of back surgery almost all cases would have a full spine exclusion applied.

There are circumstances where an applicant attends a chiropractor for 'preventative measures' or to 'maintain general health'. In these situations, attention will be paid to the reason for the original consultation, the duration and severity of the symptoms, the frequency of attendance and whether any recurrences are evident. Each case will be considered on its merits. We understand that preventative visits are good for general health and this will be taken into consideration when the underwriter is making their assessment.

Joint/Musculoskeletal Disorders

These include, but are not limited to:–

- Disease/disorder of any joint—eg Toes, ankles, hips, fingers, wrists, elbows etc
- Arthritic conditions including Rheumatoid Arthritis and osteoarthritis
- Bell's palsy
- Fractures of any bones
- Repetitive strain injuries
- Muscular/tendon injuries—such as pulled hamstrings, groin strains or torn bicep
- Gout.

A similar approach to that of Back/neck disorders is taken when underwriting joint/musculoskeletal disorders.

The underwriter will look closely at:– the diagnosis, date of diagnosis, prognosis, what caused the problem/disorder, results of any x-rays, any time off work, type of treatment the client had or will be required to have, what if any medication they are on, the dosage of that medication, the occupation (manual or non manual), duties they need to perform on a daily basis and any recurrences.

We also look at any associated symptoms such as anxiety or depression.

We need to be aware that, for example, a long standing right knee problem has the potential to affect other areas such as the clients back or hips or even the left knee due to the client compensating for the injured knee.

Underwriting Approach

Fracture

Simple fractures will generally be assessed without restrictions once a full recovery has been made.

Complex fractures with residual symptoms, including the insertion of pins and screws will attract an exclusion clause for the affected area.

Arthritis

This can occur in a single joint or be generalised. In most cases arthritis will be excluded, this will depend on the number of joints involved, the type of medication the client is on and if they have had time off work. Rheumatoid arthritis however is usually declined for disability insurance.

Muscular or Tendon injuries and Repetitive Strain injuries

When the client has a strain/injury with ongoing symptoms it is more than likely an exclusion will apply. Short-term injuries that have been excluded can be reviewed in the future, the underwriter will consider if it recurrent, duration of problem, occupation and pastimes.

Gout

Gout affects joints due to the deposit of sodium urate crystals in the joint. Depending on the extent of the condition an exclusion for gout may be applied as well as excluding the affected joint.

Sometimes a client can have multiple injuries/symptoms, some of which have recurring symptoms and require time off work. The underwriter might in such a case reduce the benefit period or extend the waiting period in order to cover the risk for IP and decline TPD. In rare cases the clients ability to do some activities of daily living may occur and this would result in the Loss of independence benefit being removed from Critical Illness insurance.

Skin Lesions

A skin lesion can be any area of the skin that has a change in appearance, and can range from a harmless lesion to a more sinister lesion, such as malignant melanoma or squamous cell carcinoma. The more common lesions are outlined below:

Sebaceous cysts

A sebaceous cyst is a sac-like growth in the skin, which may contain fluid or semi-solid material, they are usually harmless.

Moles (benign naevus)

A mole is an overgrowth of the skin's pigment cells, they are usually harmless.

Melanoma

A melanoma is a cancer of the cells which produces the brown skin pigment melanin. If not treated early, melanomas can spread through the body. Melanomas are important not only because they cause death, but also because these deaths can occur relatively early in life.

Sunspots (Solar Keratosis)

These are common skin spots and are benign or non-cancerous. Most will not affect the terms offered on insurance.

Basal Cell Carcinoma (BCC)

This is the most common form of skin cancer where there has been uncontrolled growth of the epithelial cells in the outermost layer of the skin.

Squamous Cell Carcinoma (SCC)

This is the next most common form of skin cancer and like BCC occurs in the outer layers of the skin, however the cancer has penetrated more layers of skin.

Facts and Figures

- Australia has the highest rate of skin cancer in the world.
- Non-melanoma skin cancer is the most frequently occurring cancer in Australia.
- Every year, doctors remove around 720,000 lesions from the skins of Australians because they are suspected skin cancers.
- Each year, over 374,000 Australians are diagnosed with non-melanoma skin cancer and over 8,800 Australians are diagnosed with melanoma.
- One in 25 males and one in 38 females will develop melanoma of skin by the age of 75. In 1998, melanoma of the skin was the most common cancer in men aged 15 to 19 and 25 to 54 and women aged 15 to 34. It was the second most common in women 35 to 54 years.

Source: The Cancer Council New South Wales.

Underwriting approach

MLC's application form includes a questionnaire for completion where the Life to be Insured discloses a history of skin lesion. Most skin lesion histories can be assessed based on the answers given on this questionnaire and most will not affect the acceptance terms offered. Further information may be sought from the client's doctor, particularly where a lesion has been removed by surgery in the last 12 months, where further testing or follow-up was required or where the lesion was found to be malignant – ie a skin cancer such as squamous cell carcinoma or basal cell carcinoma.

A history of squamous cell skin carcinoma or basal cell carcinoma may affect the acceptance terms offered depending on a number of factors including number of lesions, histopathology findings and time since the end of treatment. Depending on these findings, cover may only be available subject to exclusion of claims arising from skin cancer or, in some instances, all malignant tumours. No cover would be available if the cancer has spread to other parts of the body.

Availability of cover where there is a history of malignant melanoma will depend on a number of factors, including tumour thickness, the layers of skin involved and time since the end of treatment. Life Cover may be considered with a premium loading. Disability cover may be available subject to an exclusion. Where Critical Illness is offered, all malignant cancers will generally be excluded from the cover.

In some instances a melanoma specific exclusion may be offered under critical illness in lieu of a full cancer exclusion.

Diabetes

Diabetes arises where there is too much glucose in the blood. Diabetes contributes to early death, illness and disability. There are two main types of diabetes, with Gestational Diabetes and impaired glucose tolerance becoming more prevalent.

Type 1 Diabetes occurs when the body's immune system destroys the insulin-producing cells of the pancreas so that the pancreas stops producing insulin. Insulin is a hormone that lowers the levels of glucose in the blood. Glucose cannot enter the muscles and body cells resulting in a build of glucose in the blood. Type 1 diabetics require insulin injections to control their blood glucose levels. Type 1 diabetes used to be referred to as 'Insulin Dependent Diabetes' or 'Juvenile Onset' diabetes.

Type 2 Diabetes occurs when the pancreas provides insufficient insulin and the body does not use insulin properly. Type 2 diabetes used to be referred to as 'Non-insulin dependent' diabetes. Type 2 diabetes often responds to healthy eating, appropriate exercise and weight reduction, but medication in the form of tablets and later insulin injections may be required.

Gestational diabetes is a temporary form of diabetes that occurs during pregnancy. It is usually treated with healthy eating only and disappears after delivery. There does remain an increased risk of developing diabetes later in life.

Impaired glucose tolerance is where blood glucose is raised but is not high enough to be classified as diabetes. The body is not able to produce sufficient insulin to properly control blood glucose levels. This condition increases the risk of heart disease and may progress to diabetes if not controlled.

The majority of people with diabetes have Type 2. It usually arises in people over the age of 30 but may occur in younger people who are overweight or have a family history. The onset of Type 2 diabetes may be slow and unless glucose levels become very high, there may be no symptoms to alert a person to their condition.

A range of complications can result from diabetes, including nerve damage, kidney disease, eye disorders (eg retinopathy, cataract, glaucoma), heart disease, stroke, peripheral vascular disease which can lead to ulcers, gangrene and amputation.

The digestive system, skin and immune system can also be affected.

Underwriting approach

It is estimated that 800,000 Australians may have diabetes but not realise it.

The mandatory testing levels quite often reveal an increased blood sugar level, sometimes leading to a diagnosis of diabetes.

Factors considered by the underwriter in determining if insurance cover can be offered and if so, on what terms include –

- The age of the applicant
- The degree of control
- Compliance with recommended treatment
- Duration since the diagnosis.
- Whether there are any complications or co-morbidity factors such as obesity or smoking.

Life cover will be available to most applicants subject to an additional premium.

Availability of Critical Illness is usually restricted to those with optimal control, no complications and duration since diagnosis being less than 15 years. Cover may be limited to Critical Illness Special Risk, or a Limited Term may be offered.

Due to the range and incidence of potential complications, Income Protection and TPD is often not available or, in extremely favourable cases, may only be available on a Limited Term.

Blindness

Visual acuity is usually expressed numerically, 20/20 (or 6/6) representing normal vision. If following correction of vision the applicant can only achieve 20/200 (or 6/60, ie the applicant can just see at 6 metres what a person with normal eyesight would see at 60 metres) or worse, this is a level which causes severe incapacity or inability to work, although some occupations may be manageable.

Blindness may be unilateral or bilateral, congenital or caused by an accident or disease.

The diagnosis of blindness is through the measurement of visual acuity and visual fields.

The Causes of Blindness

The causes of blindness have changed considerably in the developed world in the last 60 years.

With the increasing elderly population the diseases particularly affecting this population are the common causes of blindness. Nearly two thirds of the blind population are over 65 years of age, and nearly half over 75.

The commonest causes of blindness today are:

- Macular degeneration
- Cataract
- Glaucoma
- Diabetic vascular disease (retinopathy)
- Accident or injury.

Underwriting approach

It is important to establish whether the loss of vision was caused by disease or other causes, and whether the loss of vision is unilateral (applying to one eye) or bilateral (applying to both eyes), progressive, mild, moderate or severe.

The assessment of life cover is not usually affected by blindness unless it was caused by disease. Then the disease itself is what is underwritten.

For mild to moderate blindness Critical Illness, Total and Permanent Disablement and Income Protection/Business Expenses may be considered with an exclusion.

Total Blindness (both eyes) would usually result in the declinature of disability cover. Individual consideration may be given if the applicant has been in stable employment for some years and performing the full duties of the occupation satisfactorily.

Sleep Apnoea

What is Sleep Apnoea?

Obstructive sleep apnoea (OSA) is a condition in which the muscles of the back of the throat and the tongue relax during sleep, to the point where they collapse and block the airway. When this happens, breathing stops.

After a period ranging from a few seconds to a minute, the brain registers that oxygen isn't being drawn into the body. The brain then sends out signals to rouse the person from sleep, forcing them to take a breath. This pattern can repeat itself many times during the night.

The severity of OSA is determined by the frequency of this cycle of stop/start breathing. People with OSA often complain of daytime sleepiness, fatigue, poor concentration and irritability.

What causes OSA?

Obesity is a common cause of OSA. In particular, middle-aged men with a large collar size are at risk. Other factors that increase the risk include:

- alcohol consumption, especially in the evenings, as it will further relax the throat muscles;
- a small or receding chin;
- large tonsils;
- medications such as sleeping tablets;
- nasal congestion; and
- medical conditions, such as diabetes or an underactive thyroid.

Why is the diagnosis of OSA important?

The excessive daytime sleepiness associated with OSA has been shown to increase the risk of accidents, in particular motor vehicle accidents. The condition also increases the risk of heart disease. High blood pressure, heart attacks, heart failure and strokes are all more common in people with OSA than in those not affected by the problem.

How is OSA diagnosed?

The diagnosis of OSA commonly involves an overnight sleep study, in which surface electrodes are taped to various sites on the body, including the face and scalp, to record sleep quality and breathing.

How is OSA treated?

Treatment depends on the severity of the condition. People who are affected only mildly will often respond sufficiently to changes in lifestyle. Such changes include losing weight, avoiding alcohol and sedatives at night, using a nasal spray if nasal congestion is a factor, and sleeping on the side rather than on the back.

For people who are more severely affected by OSA, nasal continuous positive airway pressure (CPAP) is the most common treatment to be added to the lifestyle changes.

This treatment involves wearing a close-fitting nasal mask at night. Air is pumped through the mask at low pressure to keep the upper airway open. While very effective, some people find this treatment difficult to tolerate. The use of a mouthguard is another treatment option. Wearing a mouthguard during sleep holds the jaw in a forward position, thus keeping the airway open. There are also surgical options available for people with resistant OSA.

Underwriting approach

The severity of the sleep apnoea as defined in the sleep studies (both pre and post treatment), the cause, compliance and success of treatment are all considered by the Underwriter. Lack of follow-up review (usually 12 monthly) often creates difficulty in assessing the success of treatment, and cover may be postponed until a review has taken place.

Providing there are no other complicating factors, a minimal loading can be considered for all types of cover for mild sleep apnoea. Income Protection will only be offered with a minimum of 1 month waiting period. More severe cases will attract a higher loading and in some instances cover may not be available, depending on the success or otherwise of the treatment.

Due to the nature of the disorder, and possible complications, an exclusion cause will not be considered.

References; MyDr, 2004

The Heart and How it Works

The heart is a double-sided muscular pump. The right side pumps into the lungs, where it's oxygenated. The left side receives this oxygenated blood and pumps it around the rest of the body where the oxygen and other nutrients are used by the cells of the body's tissues and organs. Each side of the heart has two chambers—the ventricle (the main chamber, which does most of the pumping work), and the atrium (or auricle, a smaller chamber which pumps blood into the ventricle).

The heart is the hardest working organ in the body. It pumps about 70 times a minute, every minute of every day. That's over two and a half billion beats in an average lifetime. To keep pumping at this rate, the heart itself needs a constant supply of oxygen. Supplying the muscles in the heart are three coronary arteries that encircle the heart and divide into a series of smaller arteries. As long as these arteries are healthy, they can keep the heart supplied with oxygen—even when the heart is pumping harder than normal, for example during exercise. But if there is disease of these arteries, and not enough blood gets through them to the heart muscle, then the heart starts malfunctioning.¹

Common Diseases of the Heart

Coronary Heart Disease

Coronary heart disease is actually a disease of the arteries of the heart, rather than a disease of heart muscle itself. It is caused by a build-up of fatty deposits in the lining of the walls of arteries – a process known as atherosclerosis.¹

Coronary heart disease causes one or more of the following conditions, alone or in combination:¹

- the chest pain known as angina
- death of heart tissue (myocardial infarction or heart attack)
- sudden stopping of the heart and collapse (cardiac arrest)
- gradual failure of the pumping function of the heart (heart failure).

Hypertension

Hypertension is the technical term for high blood pressure, a condition that affects almost three million Australians over the age of 25. It can be silent condition in the sense that someone who has high blood pressure usually doesn't know about it.

Hypertension describes the excessive pressure exerted by the blood within the arteries. The heart creates pressure as it pumps blood around the body. Blood pressure measurements have two readings. The higher value is called systolic and the lower value is called diastolic blood pressure. Over time, raised blood pressure can cause gradual damage to many organs in the body. This damage may be serious and irreversible; hypertension is one of the causes of stroke, heart disease, and kidney failure.¹

Cholesterol

Most cholesterol is manufactured in the liver from fats in our diet. The liver makes cholesterol and attaches it to carrier molecules made of fat and protein called lipoproteins. There are two major types of these 'carrier' lipoproteins—low-density lipoprotein (LDL) and high-density lipoprotein (HDL). LDL is the major carrier of cholesterol from the liver to the rest of the body. When cholesterol levels are excessive, LDL deposits cholesterol onto the arteries causing the damage. HDL, on the other hand, mops up cholesterol from the bloodstream and takes it back to the liver. So it reduces cholesterol, and lessens the chance of it being deposited in the arteries.¹

Facts and Figures

- While genetic factors play a part, 80% to 90% of people dying from coronary heart disease have one or more major risk factors that are influenced by lifestyle.
- Heart, stroke and vascular diseases kill more Australians than any other disease group—50,294 deaths (37.6% of all deaths) in 2002.
- Around 3.67 million Australians are affected by heart, stroke and vascular diseases.
- 1.1 million Australians are disabled long-term by heart, stroke and vascular diseases.
- Major preventable risk factors for cardiovascular disease are tobacco smoking, high blood pressure, high blood cholesterol, insufficient physical activity, overweight and obesity, poor nutrition and diabetes.

Underwriting Approach

Factors considered by the underwriter in determining if insurance cover can be offered and if so, on what terms, include:

- exact diagnosis of condition
- time since diagnosis of condition
- other related conditions (eg diabetes)
- compliance with treatment
- family history
- lifestyle (eg smoking)
- age of client

Each case involving heart disease will be underwritten taking individual factors into consideration. The underwriting outcomes can range from standard acceptance through to decline, with all variances in between. The factors mentioned in our underwriting approach will determine the outcome.

Note: medical evidence including specialist reports will always be required to underwrite heart disease.

Example 1. 56 year old, non smoking, male, accountant had a heart attack 4 years ago. Client had triple bypass performed following the heart attack. Client has since lost weight and modified his lifestyle, with current non rateable blood pressure and cholesterol readings. Based on this risk profile, we could potentially offer Life cover with a +250% loading. Critical Illness special risk (cardio deleted) would be available, disability benefits would be declined.

Example 2. 39 year old female clerk, history of raised blood pressure (hypertension), diagnosed 4 years ago with initial readings of 160/100. Treatment was commenced approx 4 years ago, and blood pressure readings have since been fully controlled. Client has no other cardio risk factors. Based on this risk profile, all benefits would be accepted at ordinary rates.

¹ABC Health and Wellbeing

Mental Health

Mental health problems and mental illness are among the greatest cause of disability, diminished quality of life and reduced productivity (NHS Survey 2004–2005).

In 2004–2005, 11% of all persons reported they currently have a long-term mental health or behavioural problem. This has increased in the last 3 NHS's. In 1995 the proportion was 5.9% and in 2001 it was 9.6%.

In 2005–2005, 19% of adults reported that they had some medication (pharmaceutical medication and/or vitamins, minerals or herbal treatments) for their mental wellbeing in the fortnight prior to the 2004–2005 NHS interview.

In 1997, 2.4 million people aged 18yrs and over (18% of all Adults) had experienced a mental disorder during the last 12 months.

About 800,000 Australians experienced depression each year. One in five people are likely to experience depression or anxiety in their lifetime. Almost 80% of those with a diagnosed depressive disorder also have an underlying anxiety problem.

Types of disorders:

Anxiety : (Generalised Anxiety Disorder, Phobias, Panic Disorder, Obsessive Compulsive Disorder (OCD) and Post Traumatic Stress Disorder (PTSD).

Depression : (Adjustment Disorder and Depressed Mood, Major (Clinical) Depression and Dysthymic Disorder).

Bipolar Disorder : (Previously known as manic Depression) – Mood Disorder comprised of both low (depressed) mood and High (manic) mood.

Post Natal Depression : is a term used to describe mood disorders occurring to women in the first year after birth of child.

Underwriting Consideration

- The duration
- Whether they have had a reoccurrence of the disorder or at risk of recurrence
- The cause (and is it still there?)
- Treatment (Counselling, pharmaceutical medication, vitamins etc)
- Was the episode debilitating?
- How much time did they have off work?
- Well established case history.

In many instances where there is a history of treated mental health issues MLC can offer cover with an exclusion. MLC will consider applicants that are on medication if the condition has been well controlled for over 12 months and any contributing circumstances are no longer present eg Moved occupations if work stress was a contributing factor.

Critical Illness Extra Benefits Option

For an additional cost, the applicant can apply for the Critical Illness Extra Benefits Option as part of Critical Illness Plus or Critical Illness standalone insurance

One or both of the following extra benefits can be added to the client's Critical Illness Plus insurance:

- additional critical conditions for which a partial benefit is payable; and
- an option to buy back your Critical Illness benefit.

Critical Illness Extra Benefits Option is subject to underwriting. The option may not be available or specified critical conditions may be excluded from the cover based on medical and/or family history. Most exclusions will be applied based on disclosed history without the need for further medical reports. MLC reserves the right to request additional medical evidence where it considers circumstances warrant it.

For each of the critical conditions covered under the Critical Illness Extra Benefits Option, the following table provides an indication of the likely underwriting outcome based on the applicant's medical history.

Critical Illness Extra Benefits Option

Critical Condition covered	Medical condition present or in history	Underwriting
Adult onset insulin dependent diabetes	Diabetes	Exclude-Decline
	Impaired fasting glucose	Exclude
	Family history – diabetes, insulin dependent	Exclude
	Family history – diabetes, non-insulin dependent x 2	Exclude
Advanced endometriosis	Endometriosis	Exclude
Carcinoma insitu – breast	Family history – breast cancer	Exclude
	Benign breast disease	Exclude
Chronic lymphocytic leukaemia	Acute leukaemia	Exclude-Decline
	Cronic leukaemia	Decline
	Unexplained lymphocytosis/ lymphoedema	Decline
Congenital abnormalities of a child	See note 1 overleaf	
Deafness in one ear	Hearing loss – partial/total – due to disease	Exclude
	Hearing loss – partial /total – due to injury	Exclude for affected ear
Death of a Child	See note 1 overleaf	
Diagnosed motor neurone disease	Motor neurone disease	Decline
Diagnosed multiple sclerosis	Multiple sclerosis	Decline
	Family history – multiple sclerosis	Exclude
Diagnosed muscular dystrophy	Family history – muscular dystrophy	Exclude
	Muscular dystrophy present or suspected	Decline
Diagnosed Parkinson's disease	Parkinson's disease present or suspected	Exclude-Decline
Facial reconstructive surgery and skin grafting	Facial reconstructive surgery / skin graft	Exclude
	Facial injury likely to require reconstructive surgery or skin graft	Exclude
Inability of a Child to gain independence	See note 1 overleaf	

Critical Condition covered	Medical condition present or in history	Underwriting
Loss of one foot/one hand	Loss/loss of use of hand/foot – partial and progressive	Exclude
	Loss/loss of use of hand/foot – partial, due to accident, not progressive	Standard
	Loss /loss of use – total	Exclude affected foot/hand
Loss of sight in one eye	Loss of sight – partial/total, due to disease	Exclude
	Loss of sight – partial, due to injury, not progressive	Standard
	Loss of sight – total, due to injury	Exclude affected eye
Melanoma	Melanoma	Exclude-Decline
	Non melenocytic skin cancer	Exclude
Placement on waiting list for major organ transplant	Organ disease or failure likely to require transplant	Decline
Prostate cancer	Prostate cancer	Decline
	PSA raised	Exclude-Decline
	Unexplained prostatic symptoms	Exclude-Decline
Serious accidental injury	See note 2 below	
Specified complications of pregnancy	Disseminated intravascular coagulation	Exclude
	Eclampsia	Exclude
	Pre-eclampsia	Exclude
	Ectopic pregnancy	Exclude
	Hydatidiform mole	Exclude
	Stillbirth	Usually Standard

Notes:

1. Congenital abnormalities of a child; Death of a Child, Inability of a Child to gain independence. No underwriting applies to these Critical Conditions based on the applicant's medical or family history. These Critical Conditions exclude pre-existing conditions.
2. Serious accidental injury will be underwritten as for the base Critical Illness Cover.

IFSA Standards and Guidelines

There are several pieces of legislation that prescribe how we must operate that impact underwriting: Disability Discrimination Act 1992 (Cth), and Insurance Contract Act 1984 (Cth). MLC is also obliged as a member of IFSA (Investment and Financial Services Association) to comply with several Standards and follow Guidelines. Specific ones relating to underwriting are described below.

Genetics

MLC's treatment of Genetic test complies with IFSA Standard No.11 Genetic Testing Policy. This policy summarises how insurance companies are to treat genetic test results and has applied since 1 January 2002.

The results of a genetic test are used by MLC in the underwriting process to either confirm a persons predisposition or eliminate the possibility that a person will develop a particular disease. In some cases, the genetic test will identify a disease that can be controlled through treatment which in turn may allow the person to become insurable.

It is important to note the following;

- MLC **will not** use your genetic test information to assess another family member's risk, for example genetic test information obtained from a parent will not be used to assess an insurance application made by the son or daughter.
 - MLC **will** take account of the benefits of special medical monitoring, early medical treatment, compliance with treatment and the likelihood of successful medical treatment when assessing overall risk.
 - MLC **will** ensure that genetic test results are only made available confidentially to the underwriters and reinsurance companies.
 - MLC **will** provide, the applicant or their medical practitioner, reasons for any adjustment to premiums or policy conditions after assessing the application.
- MLC **will not require** an applicant to undergo a genetic test when applying for insurance.
 - MLC require that the applicant makes available the results of any **previously undertaken** genetic tests upon request.

Questions & Answers for Risk Insurance Advisers

Q If my client has a family history of a hereditary condition, will a genetic test be requested by the insurer?

A NO. The decision whether to undertake a genetic test is the applicants to make. Insurers will not request genetic tests.

Q If my client has had a genetic test, do they have to disclose it?

A YES. The duty of disclosure applies to any medical test an applicant has had.

Q Will a genetic test result affect the underwriting of a case?

A This depends on the gene tested and the results.

Q If an applicant discloses they have had a positive genetic test result, should I still submit the application?

A YES. In all cases, whether genetic testing is involved or not, and whether or not in your opinion the case is acceptable, the application must be submitted to the insurer to make the decision.

Q Are genetic test results used to assess the risk of any other family member who may apply for insurance?

A NO. Each application is assessed on its merits and individual disclosures.

Q If my client has a family history, should I recommend they have a genetic test?

A NO. Any clinical course of action must be in consultation with the client's doctor.

IFSA Mental Health Guidelines (Guidance Note No. 15)

This is a guide for underwriting income protection applications for people who currently have or have a history of a mental health condition. The questions that we may ask are specified, these have been created with the assistance of medical professionals in the field. The guide also details a number of conditions, what their diagnostic criteria are, prognosis, and what are favourable and less favourable factors. This is used by MLC underwriters when assessing mental health.

IFSA Family History Standard No.16.00

This Standard came into force on 1 January 2006. It covers how insurance companies are to treat Family History, this is closely related to the Genetic Standard and specifies the collection and handling of family history information.

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Claims Procedures



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Claim Procedures

Claims Philosophy

We recognise that a time of claim is a time of need. We aim to ensure that making a claim with MLC is simple and convenient. We will manage claims fairly, ethically and in a timely manner whilst observing principles of privacy and confidentiality.

- We strive to ensure that making a claim with MLC is simple and convenient.
- We will treat all claimants with empathy and understanding.
- We will assess claims in a timely and efficient manner.
- We aim to maintain open and honest communication with our claimants regarding issues of concern.
- We will manage claims in the interests of all MLC insurance policyholders—sound and consistent management techniques will never be compromised.

Notification

We must be notified in writing or by phone that a claim is to be made.

The following details should be provided to MLC at that time:

- Policy number(s)
- Full name of policy owner(s)
- Full name of the life insured who is the subject of the claim
- Date of claim event
- Cause/nature of claim
- Name, address and phone number of the person to whom correspondence is to be sent.

MLC will then send out the necessary forms and instructions for completion and return of the claim forms.

Submission of Completed Claim Forms/Proof of Loss

- Completed forms must be sent back to MLC.
- Where a claim form requires completion by a doctor, if there is a charge for completion, it is the responsibility of the claimant.
- The policy document (or where an application is pending, evidence of Interim Accident Insurance) must be submitted for all lump sum claims.
- Where a claim is ongoing, MLC will advise the requirements. Generally for Income Protection and Business Expense claims this will require submission of monthly claim forms.
- Additional Proof of Loss may be required in some cases. Where this involves a financial audit or medical examination conducted by someone we appoint, MLC will pay for it.

Timing

It is important to report a claim to MLC as soon as possible.

- For income protection or business expenses insurance, claim notification should be given to MLC within 30 days of the claimable event. Initial claim forms must be returned within 90 days or as soon as possible.
- For other insurances, notification and proof of claim should be submitted as soon as possible to avoid unnecessary delays in the assessment of entitlements which may be payable.
- If you do not make a claim within the stated time period, you may prejudice your entitlement to benefits.

Contact Details

- For all policies arranged through the National Australia Group and for MLC policies serviced by Victorian or Tasmanian Advisers, please call our Melbourne Claims Team on **1300 857 113**. All correspondence should be sent to MLC Claims, GPO Box 4397, Melbourne Vic 3001.
- For all other business, please contact our Sydney Claims Team on **1300 135 241**. All correspondence should be sent to MLC Claims, PO Box 200, North Sydney NSW 2059.

MLC Insurance - Claims workflow (overview)

For policies arranged through the National Australia Group and Victorian/ Tasmanian Advisers Melbourne Claims Team – 1300 857 113
 For all other business Sydney Claims Team – 1300 135 241

Claim Notification (phone)	Claim form posted	Claim form and supporting documents received	Assessment of claim	Advice of acceptance or decline or further information needed	Payment of claim (if eligible)
<p>Claim Notification</p> <p>To speed up the process, have the following information available when you call:</p> <ul style="list-style-type: none"> • Policy number and claimant's contact details • Cause and date of death or disability • For Critical Illness nature of medical condition. 	<p>Claim Forms</p> <p>Forms are posted to the policy owner or Life Insured. Where requested forms can also be posted via the Adviser.</p> <p>Critical Illness Claims</p> <p>Forms are specific to Critical Illness conditions.</p>	<p>Supporting Documents</p> <p>In addition to the claim form, the following is required:</p> <p>Death Claims</p> <ul style="list-style-type: none"> • Claim Form¹ • Death Certificate • Certified Proof of Age • Policy Document <p>TPD and Critical Illness Claims</p> <ul style="list-style-type: none"> • 2 x Treating Doctors reports • Certified proof of age • Policy Document <p>Income Protection and Business Expenses Claims</p> <ul style="list-style-type: none"> • Treating Doctor's report • Financial documents <p>We will advise you if any other relevant information is required.</p> <p>1 Further information for super claims may be required by the Trustee</p>	<p>Assessment of Claim</p> <p>Assessment of the claim commences on receipt of a fully and accurately completed claim form and any other supporting documentation required.</p> <p>In most circumstances, the average turnaround for reviewing the paperwork is 5 working days from receipt.</p>	<p>Advice of Assessment Decision</p> <p>The Policy Owner and Adviser will be contacted to advise whether the claim is admitted¹, declined or if further information is needed. The adviser will receive a copy of the letter.</p> <p>1 For ongoing Income Protection and Business Expenses claims, ongoing eligibility to benefits is reviewed monthly on receipt of continuing claim forms.</p>	<p>Payment of Claim Lump Sum:</p> <p>Payments are made by cheque.</p> <p>Monthly payments:</p> <p>Monthly payments can be made by cheque or electronic funds transfer into the policy owner's bank account.</p>

This flowchart is a summary only. If you require further information, please call the claims department on the above numbers.

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Product Information

8

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Overview

The MLC Protection offer includes insurance inside super through MLC Life Cover Super (LCS) and insurance outside super through MLC Personal Protection Portfolio (PPP).

LCS provides a range of insurances to meet your needs and budget, conveniently packaged with a single policy fee and annual statement, within the superannuation environment. The insurances form part of a policy issued by MLC Limited to MLC Nominees Pty Limited as the Trustee of the Scheme. You can select from:

- Life Cover
- Total and Permanent Disability
- Income Protection
- Premium Waiver.

Premiums can be paid by deduction from eligible MLC MasterKey superannuation products or by other payment methods.

PPP offers a portfolio of insurances to suit your needs with a single policy fee - and because life is full of changes, you can modify your insurance cover in the future - making this an excellent insurance option for individuals and small family businesses or partnerships. You can select from:

- Life Cover
- Total and Permanent Disability
- Critical Illness
- Income Protection
- Business Expenses
- Premium Waiver.

Each policy can cover up to six lives, and each life insured can have different types of insurance and levels of cover.

The types of insurances offered under LCS and PPP are described below.

Life Cover insurance

This type of insurance provides a lump sum benefit on death of the life insured.

Total and Permanent Disability insurance

This type of insurance provides a lump sum benefit in the event of total and permanent disability resulting from injury or sickness prior to age 65. After age 65, this becomes Loss of Independence.

Key Features

Critical Illness insurance

This type of insurance provides a lump sum payment of the Critical Illness benefit upon the life insured suffering any one of the specified illness conditions. The insurance under Critical Illness Standard is renewable subject to possible changes to the Critical Illness definitions.

Income Protection insurance

This type of insurance provides a monthly benefit to replace earnings if the life insured is unable to work due to injury or sickness. The insurance for special risk occupations is not guaranteed renewable.

Business Expenses insurance

This type of insurance provides a monthly benefit to reimburse the fixed Business Expenses of self-employed clients if they are unable to work due to injury or sickness.

Premium Waiver insurance

This type of insurance provides for the nomination of a life insured for premium waiver. If the life insured is disabled or retrenched, all premiums for the policy are waived in accordance with the benefit definitions.

See the relevant sections of this guide for details.

A Range of Insurance Plans

Both LCS and PPP offer a choice of insurances for Life Cover, Total and Permanent Disability (TPD), Critical Illness (PPP only), and Income Protection.

- **Plus version** – incorporating a broad range of benefits and options; and
- **Standard version** – limited cover for lower premium.

It is possible to ‘mix and match’ the **Plus** and **Standard** options within the one policy. See relevant sections of this guide for the differences between ‘**Plus**’ and ‘**Standard**’ insurance.

This ‘mix and match’ approach gives even more flexibility in structuring your clients’ benefits to produce a fully tailored package of insurances to meet both your clients’ needs and budget.

MLC Life Cover Super

If a client takes LCS, they become a member of The Universal Super Scheme (the ‘Scheme’). The Trustee of the Scheme takes out a policy on the client and thus becomes the policy owner. Any benefit payable is paid to the Trustee.

The Trustee pays the benefit to the client’s beneficiaries in accordance with the Trust Deed for the Scheme and subject to superannuation laws and restrictions.

LCS allows only one person to be insured under each policy.

MLC Personal Protection Portfolio

Policy Ownership

One 'entity' owns the policy. Ownership must be the same for all insurances under the one policy. The 'entity' can be an individual (or up to 6 individuals as joint owners), a company, a partnership or the trustees of a family trust or superannuation fund.

You can nominate a beneficiary for the Life Cover insurance. To ensure the nomination is effective only a named person or legal personal representative should be nominated. A company or a charity cannot be nominated as a beneficiary.

Note: For PPP, nominations cannot be made by trustees of a trust or self-managed super fund.

Multiple Lives

PPP allows up to 6 people to be insured under the one policy for any number of insurances and insurance types. Insurable interest guidelines apply.

Where Income Protection is included in a Portfolio, there are some restrictions on ownership.

Income Protection Third Party Ownership

Generally, the life insured for Income Protection must be the policy owner.

As premiums are generally tax deductible to the policy owner and proceeds are generally assessable in the hands of the recipient, the person who pays the premium and the person who receives the benefit must be one and the same.

This means that if Income Protection is to be included in a policy, the life insured must own that policy. The policy cannot be jointly owned nor can any other Income Protection insurance be included for another life insured.

The only exceptions to the ownership rule is where the policy is owned by a Company (as a guide the person(s) insured would need to have a minimum 25% holding in the company), a **Partnership** or a **Company** which is the **Trustee of a Family Trust** or **superannuation fund**. In such cases the relationship must be clearly indicated on the Application Form.

The same rules apply for Business Expenses.

In the following example, Dr and Mrs Jones both work and require the cover shown here.

	Life Cover	Critical Illness	Income Protection
Dr Jones	\$300,000	\$200,000	\$8,000/month
Mrs Jones	\$150,000	\$90,000	

Dr Jones would have to own the policy as the Income Protection is on his life.

Mrs Jones could not take Income Protection under the same policy, unless, the policy is owned by a **Company**, a **Partnership** or a **Company** which is the **Trustee of a Family Trust** or **superannuation fund**.

Key Features

In the Jones' case, they could take out the policy for Dr and Mrs Jones as follows:

- If they were incorporated as a Company, the Company could own the policy.
- If one was established, the policy could be owned by the Trustee of their Family Trust (or Family Company).
- If they have a partnership agreement, the Partnership could own the policy.

Third party ownership is subject to insurable interest satisfactory to MLC and underwriting approval.

Note that Dr Jones could nominate Mrs Jones as his beneficiary for the Life Cover insurance (see details in the Life Cover section).

Ownership by a Trust or Self Managed Super Fund

Unlike an individual or a company, a trust is not a legal entity (note a Self Managed Super Fund (SMSF) is a form of trust) and therefore cannot own property in its own right.

A trust exists when a person or company acts/holds/manages certain property (as a Trustee) for the benefit of others (beneficiaries). The trust deed describes the relationship between the trustee and the beneficiaries ie that the trustee has ownership of some property and it will hold/dispose/otherwise deal with it for the benefit of the beneficiaries. The terms of the trust deed for the trust or SMSF will govern the obligations of that individual or company when they act for the trustee of a trust.

In these circumstances, PPP ownership must be registered in the name of the Trustee(s) (ie the individual(s) or company acting in this role). For example, the appropriate owner would be Susan Elizabeth Smith and Steven John Smith ATF [as trustee for] the Smith Family Super Fund or Smith Pty Ltd ATF Smith Family Super Fund. It will also be noted on the policy that those person(s) (or company) owning the policy do so as Trustee.

Please ensure these ownership details are provided correctly on the Application Form, as if forms are submitted with ownership details incorrectly completed for a trust situation (for example the Application Form completed with the owner being the trust or SMSF name rather than the trustee(s)) the form will need to be amended.

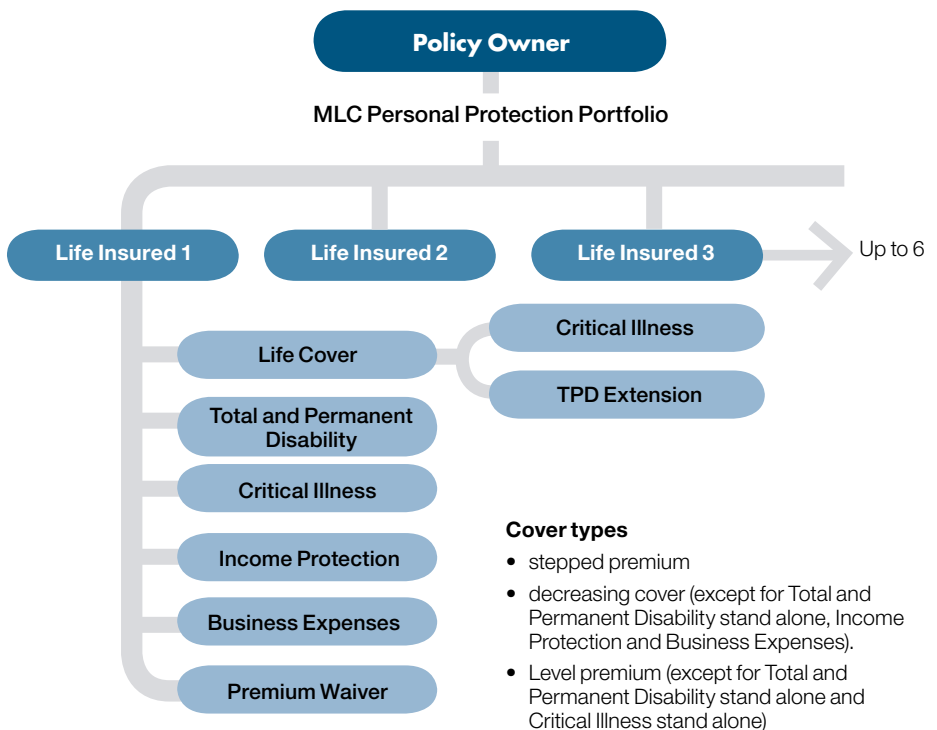
All of the insurances under PPP can be applied for when it is proposed that the owner of the policy will be a Trustee(s).

PDS and Application Form

All insurances for a life insured can be applied for on the Application Form contained in the Product Disclosure Statement ('PDS'). For PPP Supplementary Applications Forms are available for additional lives insured.

How the Package Concept Works

The policy structure and benefit relationships for PPP are shown in the diagram below.



Plain Talk

MLC has adopted a 'Plain Talk' approach for its products. That is, the documentation has been written in simple English that can be understood easily by clients.

One Policy Fee

Only one policy fee is charged whether there is one life with one benefit or many lives with many benefits on the policy.

However if Total and Permanent Disability and/or Critical Illness insurance is purchased as a Connected Benefit where the Life Cover is issued on a separate policy, only one policy fee will apply and the policy fee will be applied to the policy with the Life Cover. Note if the connected Life Cover policy is cancelled and the connected policy remains in force the current policy fee applicable at the time will be reinstated.

The fee will be increased annually with inflation effective 1 October each year.

Interim Cover

All clients are automatically provided with the following Interim Accident Insurance on application:

- up to the amount of Life Cover and Total and Permanent Disability insurance applied for but not exceeding \$1,000,000, if the client dies or is totally and permanently disabled as a result of an accident;

- up to the amount of Critical Illness insurance applied for but not exceeding \$600,000, if the client suffers one of coma, major brain injury, paralysis, major burns, blindness or loss of independence, as a result of bodily injury which is caused by accidental means;
- up to the amount of Income Protection applied for but not exceeding \$10,000 per month, where the client suffers an accidental injury and is unable to work.

Conditions Apply

If you or the life insured are applying to replace an existing policy, the amount of any benefit will be limited to the amount (if any) by which the sum proposed to be insured under the LCS or PPP application exceeds the sum insured under the policy to be replaced.

Interim Accident Insurance starts when we have received the clients completed application and one full instalment of premium, or a fully completed Direct Debit Request Schedule, Credit Card Deduction Authority or a MasterKey Superannuation Deduction Authority (in respect to LCS). The Interim Accident Insurance is void if the premium payment is dishonoured.

Interim Accident Insurance ceases on the earlier of the start date of the policy following acceptance of the application or the expiry of 90 days from the date the application is signed. Other conditions also apply.

Flexibility to Change

The client has the flexibility to change the amount of cover and lives insured as circumstances change.

Change of Servicing Adviser or Licensee

The following remuneration rules apply when there is a change in adviser or licensee servicing the client before and after completion of the business.

Remuneration rate

Where a client with an existing policy is transferred to another licensee (or if applicable, division of a licensee), the new licensee will be paid on that policy at the renewal remuneration rate that applied to the original licensee at the time the business was placed.

Change of authorised representative before completion

Where a request for change of adviser has been lodged after an application has been submitted but before the policy is completed, all remuneration including the initial remuneration will be paid to the licensee, and identified as attributable to the authorised representative, who are nominated in the request for change of adviser.

Clawback after change of authorised representative

Where MLC is entitled to claw back initial remuneration as set out in the Remuneration Schedule, it will claw back the amount of remuneration from the licensee, and identify the clawback as attributable to the authorised representative, who are nominated as the current servicing licensee and authorised representative at the time of the policy lapse or refund.

In case of a change of servicing licensee, MLC may at its absolute discretion choose to claw back initial remuneration from the authorised representative who received the initial remuneration, where there is satisfactory evidence that a new servicing authorised representative has identified significant detriment to the client in relation to the policy that should have been but was not explained to the client at the time of the original recommendation.

Key Features

Remuneration on “Buy Back” Benefits

When Life Cover or Critical Illness cover is being re-established due to a “Buy Back” option being exercised, initial commission will not be payable. However, renewal commission will be paid on the ongoing premiums of the new benefit.

Remuneration on Rewritten Business

When a policy is being established for benefits which had been held by MLC within the last 5 years, the remuneration for the new policy will be calculated on a Level Commission basis.

Substitute Business Rules

Where existing cover is being replaced, substitute business rules may apply.

Contained in the table below are some examples where cover is being rewritten, and how each scenario will be treated in relation to the remuneration being paid.

Scenario	Ruling using Remuneration Treatment
Transferring Between Products	
\$100,000 Life Cover is transferred from PPP to LCS.	As the same premium applies, initial commission will not be payable. Renewal commission will continue to be paid on the premium of the transferred benefit.
\$100,000 Life Cover is transferred from PPP to LCS and an additional \$50,000 Life Cover is added.	Initial commission will be payable on the premium for the \$50,000 cover increase. Renewal commission will continue to be paid on the existing premium for the transferred benefit (similar situation to when an additional benefit is added [or an additional life is added] under PPP).
\$100,000 Life Cover is transferred from National Protection Plan (NPP) to PPP.	Initial commission will not be payable. Renewal commission will continue to be paid on the premium of the transferred benefit.

Scenario	Ruling using Remuneration Treatment
Transferring Within A Product	
\$100,000 Life Cover is transferred from a Plus to Standard product.	Initial commission will not be payable. Renewal commission will continue to be paid on the premium of the transferred benefit (at the Standard commission rate and on the lower premium basis).
\$100,000 Life Cover is transferred from a Standard to Plus product and add \$50,000 extra Life Cover.	Initial commission will be payable on the premium increase. Renewal commission will continue to be paid on the premium of the transferred benefit (at the Plus commission rate and on the higher premium basis).
\$100,000 cover is transferred from a Plus to Standard product and TPD is added (the new premium is the same as the original premium payable).	Initial commission will be payable on the premium for the TPD benefit. Renewal commission will continue to be paid on the premium of the transferred benefit (at the Standard commission rate and on a lower premium basis).
An Income Protection monthly benefit of \$2,500 is transferred from stepped to level Premium.	Initial commission will be payable on the amount of the premium increase only. Renewal commission will continue to be paid on the premium of the transferred benefit.
\$100,000 Critical Illness (extension) is transferred and replaced with Critical Illness (stand alone).	Initial commission will not be payable (unless an increase in premium occurs). Renewal commission will continue to be paid on the premium of the transferred benefit (on a lower premium basis if applicable).
Transfer of Premium	
A client cancels their existing Life Cover (premium \$1,000) and replaces it with Income Protection of same premium.	This is a different type of benefit and initial commission will be payable on the new premium. Please note that initial commission on the original policy will be recovered if the policy is rewritten within the 12 month responsibility period.
A client cancels their existing TPD and increases Life Cover, but this leads to a reduced overall premium.	Initial commission will be payable on the amount of the increased premium for the Life Cover. Please note that the initial commission on the TPD will be recovered if the benefit is cancelled within the 12 month responsibility period.

For more details please refer to the MLC Protection Products—Remuneration Principles for Protection Policies available online at mlc.com.au.

Premium Discount

Premiums may be discounted (as per the commission schedule) by offsetting the amount of commission payable. The discount can apply at a benefit level, per life insured or to the entire policy. The policy fee and premium waiver benefit cannot be discounted.

Premium discounts cannot be applied to existing policies. Discounts can only be applied for new business, ie increases and new applications for insurance.

Premium discounts cannot be applied in conjunction with any other discount.

14 Day Cooling Off Period

The client can cancel the policy or part of the policy within the 14 days after receipt of the policy document and receive a refund of the premiums paid, less any government fees and charges.

Note, in the case of LCS premium contributions are not generally refunded because the money is typically preserved under superannuation law.

Please read the MLC Life Cover Super and MLC Personal Protection Portfolio Product Disclosure Statement for more details.

Inflation Linked Benefits

CPI indexation of the sum insured is automatically available. A minimum of 3% pa applies to Life Cover, Total and Permanent Disability and Critical Illness insurances.

Clients may reject CPI indexation yet it will still be offered to them in future years. If they do not want indexation in future years, either you or the client should let us know.

Note: CPI indexation is NOT available for decreasing cover premium structure or for Terminal Illness Support insurance.

Packaging Risk Insurance for your Clients

The following examples may help to illustrate the flexibility of the package.

All the following examples can each be set up under one PPP policy using one Product Disclosure Statement, and with only one policy fee payable.

Example 1

John, a single 34 year old self-employed butcher, buys a package consisting of:

Life Cover Standard	Critical Illness Plus	Income Protection Plus
\$250,000	\$90,000 with TPD option	\$4,000/month

Example 2

Bill (a Systems Manager) and his wife, Mary (a salesperson), buy a package consisting of:

Bill	Life Cover Standard \$200,000	Critical Illness Plus \$100,000	TPD Extension \$60,000
Mary	Life Cover Plus \$150,000	Critical Illness Standard \$100,000	TPD Extension \$50,000

In this example Bill and Mary can be joint owners of the policy. If either dies, the Life Cover benefit will be made payable to the surviving joint owner, thereby circumventing the need for Probate.

The other types of insurance will continue for the surviving life insured.

Example 3 Dr Smith and Mrs Smith (a homemaker) buy a package consisting of:

Packaging Risk Insurance for your Clients continued

Dr Smith	Life Cover Plus \$300,000	Critical Illness Plus \$200,000 with TPD option	TPD Extension –	Income Protection Plus \$8,000/month
Mrs Smith	Life Cover Standard \$150,000	Critical Illness Plus \$90,000	TPD Extension \$60,000	–

In this example, the policy owner must be Dr Smith as he has Income Protection insurance on his own life. (Refer to Income Protection Third Party Ownership on page 149).

To avoid probate delays, Dr Smith nominates Mrs Smith as the beneficiary for his Life Cover benefit.

Example 4 XYZ & Associates, a legal firm with six partners, buys a package consisting of:

Malcolm	Life Cover Plus \$1,000,000	Critical Illness Plus \$600,000 with Buy Back and TPD option	TPD Extension –	Income Protection Plus \$8,000/month
Jeanette	Life Cover Plus \$1,000,000	Critical Illness Plus \$600,000 with Buy Back	TPD Extension \$400,000 with Buy Back	Income Protection Plus \$10,000/month
Bruce	Life Cover Standard \$500,000	Critical Illness Standard \$250,000	TPD Extension \$100,000	Income Protection Standard \$5,000/month
Anne	Life Cover Standard \$500,000	Critical Illness Plus \$90,000 with TPD option	TPD Extension –	Income Protection Plus \$4,500/month
Sam	Life Cover Standard \$300,000	Critical Illness Standard \$180,000	TPD Extension –	Income Protection Standard –
Chris	Life Cover Plus \$300,000	Critical Illness Standard \$180,000	TPD Extension –	Income Protection Plus –

In this example, the policy owner will be XYZ & Associates. XYZ & Associates could also purchase Business Expenses insurances for each partner's share of expenses.

Structuring Insurance using Connected Benefits

When clients wish to purchase Life Cover within superannuation and also purchase Critical Illness and/or Total and Permanent Disability insurance outside superannuation they have historically had a number of options:

- **Option 1:** apply for Life Cover under superannuation using LCS and apply for Critical Illness or Total and Permanent Disability Stand Alone insurance under PPP (at greater cost for stand alone insurance); or
- **Option 2:** apply for Life Cover under superannuation using LCS and apply for additional Life Cover under PPP in order to apply for Critical Illness Extension or Total and Permanent Disability Extension insurance under PPP (potentially 'over insuring'); or
- **Option 3:** apply for some of their Life Cover needs under superannuation using LCS and apply for the remainder of their Life Cover needs under PPP such that they can apply for Critical Illness Extension or Total and Permanent Disability Extension insurance under PPP (not meeting the client's needs).

Each of these options limits the client from purchasing their insurance as cost effectively as possible.

With Connected Benefits, MLC provides greater flexibility in how clients can structure their insurance needs across policies and products where each policy has different owners for insurance on the same life insured.

The examples on the following pages illustrate how this concept works.

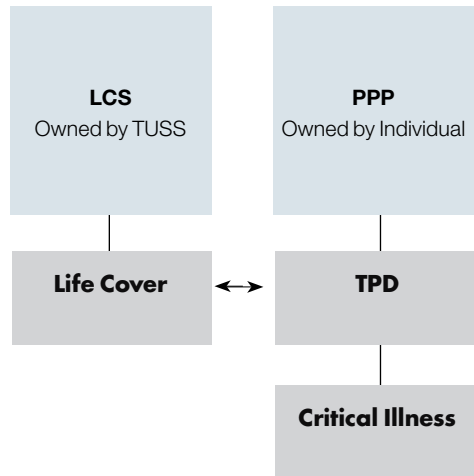
Key Features

Example 1 – Structuring insurance inside and outside Superannuation

Mary, a single 40 year old Accountant with 2 children living in NSW requires \$1,000,000 of Life Cover, \$200,000 of Total and Permanent Disability insurance and \$200,000 of Critical Illness insurance and wishes to pay her premiums annually.

Using Connected Benefits, Mary applies for Life Cover insurance within superannuation under a LCS policy owned by The Universal Super Scheme (TUSS), and has Total and Permanent Disability insurance and Critical Illness insurance under PPP which is issued as connected benefits to the Life Cover under the LCS policy as illustrated opposite.

Connected Benefits between LCS and PPP Policies

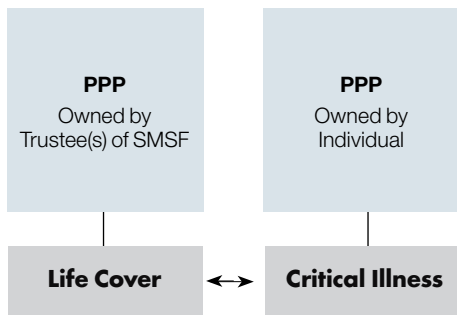


Example 2 – Structuring insurance inside and outside superannuation (with an external Trustee)

John, a married 43 year old company director, wishes to apply for Critical Illness insurance as part of his Life Cover but wants the Life Cover insurance owned by his Self Managed Super Fund and the Critical Illness insurance issued as a Connected Benefit under his own name as illustrated below.

Connected Benefits can also be used in other situations where clients wish to structure their insurance for business and personal purposes using the PPP product.

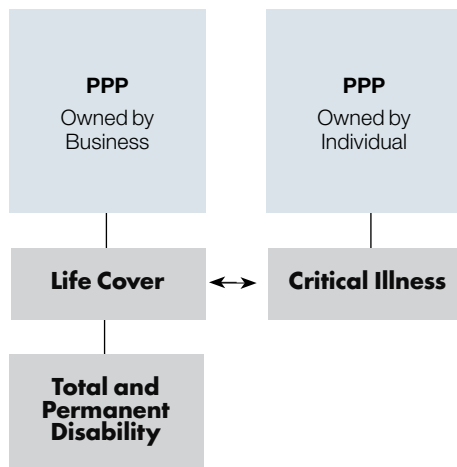
Connected Benefits between PPP Policies



Example 3 – Structuring insurance for business and personal purposes

David, a single 36 year old company director, wishes to apply for Critical Illness insurance as part of his Life Cover but wants the Life Cover and Total and Permanent Disability insurance owned by the business and the Critical Illness insurance issued as a Connected Benefit under his own name as illustrated below.

Connected Benefits between PPP Policies



Key Features

Each of those examples demonstrates how clients are able to purchase Critical Illness or Total and Permanent Disability as an 'extension' to their Life Cover which sits on a separate policy with a different policy owner and eliminate the risk of 'over insuring' or purchasing these insurances at stand alone rates.

Important Notes to consider when utilising Connected Benefits:

- Only the base Life Cover policy will be charged a policy fee. The connected benefits policy (TPD extension and/or CI extension) will not incur a policy fee.
- If the connected Life Cover policy is cancelled and the connected policy remains in force the current policy fee applicable at the time will be reinstated.
- Each policy can continue to have different payment methods.
- Stamp Duty is payable for the Connected Benefit at General Insurance rates based on the state of residence of the policy owner.
- The sum of the Extension benefits, including Connected Benefits, cannot exceed the Life Cover that it is connected to.
- The entry/start date of the connected extension must be equal to or later than the entry date of the Life Cover.
- Where a benefit is paid for a Connected Benefit, the connected Life Cover will be reduced accordingly
- A Life insured can have only one separate policy with Connected Benefits connected to their Life Cover.
- A Connected Benefit can only be connected to one Life Cover benefit.
- When a Life Cover benefit is cancelled, any Connected Benefits will also be cancelled.
- Policies with Connected Benefits will not complete until policies with Life Cover have been completed.
- Where the Life Cover Buy Back has been purchased on a Connected Benefit, the owner of the policy with the Life Cover must exercise the option.
- The process of setting up Connected Benefits for existing clients may require part or all of their existing policy(s) to be cancelled with a new policy(s) to be set up. If part or all of a policy is cancelled within the 12 month responsibility period this may result in commission being recovered. However the commission applicable will be paid under the new policy. If cover is cancelled outside the 12 month responsibility period Substitute Business Rules will apply.

In addition, the following product rules remain the same irrespective of whether Total and Permanent Disability or Critical Illness is purchased as a Connected Benefit:

- Business Safeguard Option
- Minimum and maximum entry ages
- Fixed Term contracts are available
- Substitute Business Rules.

Life Cover insurance

Overview

Life Cover insurance is guaranteed yearly renewable which provides clients with the flexibility to change their cover as their needs change.

We offer a choice of Life Cover insurance to suit your clients' needs and budget:

- Life Cover Plus – incorporating a broad range of benefits and options; and
- Life Cover Standard – limited cover for a lower premium.

Life Cover at a glance...

Cover for	LCS		PPP	
	Life Cover Plus	Life Cover Standard	Life Cover Plus	Life Cover Standard
Death	•	•	•	•
Terminal Illness	•	•	•	•
Financial planning benefit			•	•
Advance death benefit			•	•
Accidental injury	•		•	
Increases without medical evidence for personal / business events	•		•	
Terminal Illness Support Option (at additional cost)	•	•	•	•
Business Safeguard Option (at additional cost)	•	•	•	•
Total and Permanent Disability and Loss of Independence (at additional cost)	•	•	•	•
Critical Illness (at additional cost)			•	•

- Life Cover is guaranteed renewable until the review date after the life insured turns age 100 (65 if a level premium is chosen).
 - The client may nominate up to 6 people to receive a share of the benefit payable on the death of the life insured.
 - Life Cover also provides the following benefits:
 - Terminal Illness Support insurance
 - Continuation option to age 100 (stepped premium)
 - Conversion option to non-super for MLC Life Cover Super only.
 - Life Cover insurance can be taken as a stand alone or be extended to include:
 - Total and Permanent Disability insurance; and/or
 - Critical Illness insurance.¹
- ¹ Not available under MLC Life Cover Super.

Conditions

Conditions	Life Cover Super	Personal Protection Portfolio
Minimum entry age	16 next birthday	11 next birthday (16 for level premium)
Maximum entry age	65 next birthday (60 for level premium)	70 next birthday (60 for level premium)
Insurance renewable to	age 75 (then convertible to non-super) (policy anniversary after age 65 for level premium)	Policy anniversary after age 100 (policy anniversary after age 65 for level premium)
Minimum sum insured	\$25,000	\$25,000
Types of cover available	Stepped premium Decreasing cover Level premium	Stepped premium Decreasing cover Level premium

Benefits

Refer to the Product Disclosure Statement and the policy document for full details and definitions.

Nominating a Beneficiary

There are four options for beneficiary nominations under MLC Life Cover Super:

1. Non-binding death benefit nomination (trustee discretion)
2. Non-lapsing binding death benefit nomination
3. MLC Super Estate Optimiser (SEO) category selection
4. No nomination (trustee discretion)

Features	Option 1 Non-binding death benefit	Option 2 Non-lapsing binding death benefit	Option 3 SEO category selection	Option 4 No nomination
Trustee Involvement	The Trustee will generally take nominated beneficiaries into account, but depending on the circumstances at the time of death and the circumstances of potential beneficiaries, the Trustee may pay the benefit differently.	If the nomination is valid, the Trustee must pay the death benefit to the dependant(s) or legal personal representative that is nominated and in the proportions nominated.	The Trustee must pay the benefit according to the rules set out in the category of membership selection under the SEO facility. Trustee discretion applies when nomination expires.	Trustee discretion applies when there is no nomination.
Facilitates tax efficient estate planning	Possibly (depending on client's estate plan)	Possibly (depending on client's estate plan)	Enables the death benefit to be paid in a more tax efficient manner by paying the benefit as either a lump sum or pension payment.	Possibly (depending on client's estate plan)
Duration of Nomination	Valid until cancelled or modified by the client.	Valid until cancelled or modified by the client.	Valid until cancelled or modified by the client.	Valid until cancelled or modified by the client.

There are a number of business rules that apply to nominating a beneficiary using these options:

- The SEO facility is only available to those members of the The Universal Super Scheme that have an interest in MLC Life Cover Super
- A binding beneficiary nomination on any other product will not affect the category selection under the SEO facility for MLC Life Cover Super
- A non-lapsing binding death benefit nomination will become invalid if a nominated beneficiary (other than the legal personal representative) is not a dependant at the time of the life insured's death. The invalid beneficiary's portion will be subject to Trustee determination.

Claims under Life Cover

The table below shows how other insurances are affected for particular types of claims.

Reason for Claim		
Death	Accidental Injury	Terminal Illness
Full Life Cover benefit paid	Life Cover reduced by the amount of any payment	Life Cover reduced by the amount of any payment
Accidental Injury benefit ceases	Accidental Injury benefit paid (according to definition)	Accidental Injury reduced by the amount of any payment
Terminal Illness benefit ceases	Terminal Illness benefit is reduced by the amount of any payment	Terminal Illness benefit paid (according to definition)
Terminal Illness Support benefit ceases	Terminal Illness Support benefit is reduced by the amount of any payment	Terminal Illness Support benefit paid (according to definition)
TPD extension benefit ceases	TPD reduced by the amount of any payment, any excess reduces any Critical Illness benefit	TPD reduced by any excess over the Critical Illness amount
Critical Illness extension benefit ceases	Critical Illness reduced by any excess over the TPD amount	Critical Illness benefit is reduced by the amount of any payment, any excess reduces any TPD benefit

Note: Only Life Cover is affected in this way by these types of claim.

Other types of insurance in a policy such as Total and Permanent Disability stand alone, Critical Illness stand alone or Income Protection are not affected whilst the policy is in force (except where they terminate on death).

Total and Permanent Disability insurance

Overview

Total and Permanent Disability (TPD) insurance provides for payment of a lump sum benefit in the event of:

- Total and Permanent Disability (up to the policy review date after age 65);
- Loss of Independence (from the policy review date after age 65 until the policy expiry); under their respective definitions.

TPD at a glance ...

Cover for	LCS	PPP
Total and Permanent Disability and Loss of Independence as part of Life Cover insurance or as a connected benefit	•	•
Total and Permanent Disability and Loss of Independence as stand alone insurance		•
Financial Planning Benefit		•
Increases without medical evidence for personal / business event	•	•
You may be able to apply for an 'Own Occupation' definition for certain occupations (at additional cost).	•	•
Life Cover Buy Back Option (at additional cost) This option is only available if you choose TPD as part of your Life Cover insurance or as a connected benefit.	•	•
Business Safeguard Option (at additional cost)	•	•

Total and Permanent Disability insurance can be taken as an 'extension' or as a connected benefit to the Life Cover (for any amount up to the amount insured under the Life Cover) or as a stand alone benefit (PPP only).

Please note that when TPD insurance is purchased together with Critical Illness insurance, the combined benefit total may not exceed the Life Cover benefit amount.

If the TPD insurance is taken as a connected benefit, only the Life Cover on a separate policy will be charged a policy fee.

Total and Permanent Disability insurance

A Financial Planning Benefit is available when MLC pays a lump sum claim of at least \$100,000.

The following options can be included with Total and Permanent Disability insurance at additional cost:

- Buy Back Option (allows the Life Cover benefit to be restored within 30 days after the completion of the 14 day survival period) for TPD extension only
- Business Safeguard Option (until the review date after age 65).

Conditions

Conditions	Life Cover Super	Personal Protection Portfolio
Minimum entry age	16 next birthday	16 next birthday
Maximum entry age	60 next birthday (55 for level premium)	60 next birthday (55 for level premium) – not available for TPD stand alone
Insurance renewable to	Age 75 (then convertible to non-super) (age 65 for level premium)	Policy anniversary after age 100 (age 65 for level premium) – not available for TPD stand alone
Minimum sum insured	\$25,000	\$25,000
Maximum sum insured	\$3,000,000 ^{1,2}	\$3,000,000 ^{1,2}
Types of cover available	Stepped premium Decreasing cover Level premium	Stepped premium Decreasing cover } only not available for Level premium } TPD stand alone

¹ The maximum benefit payable for Loss of Independence is \$500,000.

² 'Own Occupation' TPD and 'Any Occupation' TPD cover may be taken in combination providing the overall maximum does not exceed \$3,000,000.

Where level premium TPD (extension) is chosen the client has the option, at the termination date, to continue cover as stepped premium.

Benefits

Refer to the Product Disclosure Statement and the policy document for full details and definitions.

Claims under TPD

The table below shows how a TPD extension or Loss of Independence claim affects other insurances.

Insurance	TPD (extension) Claim
Life Cover	Life Cover benefit reduced by the amount of any payment
Accidental Injury	Accidental Injury benefit reduced by the amount of any payment
Terminal Illness	Terminal Illness benefit reduced by the amount of any payment
Terminal Illness	Terminal Illness Support benefit reduced Support option by the amount of any payment
TPD or Loss of Independence	Benefit ceases
Critical Illness extension (without TPD)	Benefit may continue attached to any remaining Life Cover unless the claim also involves a critical condition
Critical Illness extension (with TPD)	Benefit ceases

Critical Illness insurance

Overview

Critical Illness insurance provides for the payment of a lump sum benefit in the event that a life insured is diagnosed with a critical condition defined under this insurance.

Critical Illness insurance is not available under MLC Life Cover Super.

Critical Illness insurance can be taken as an 'extension' or as a connected benefit to Life Cover (for any amount up to the amount insured under the Life Cover) or as a stand alone benefit. Please note that, when Critical Illness insurance is purchased together with TPD insurance, the combined benefit total may not exceed the Life Cover benefit amount.

If the Critical Illness insurance is taken as a connected benefit, only the Life Cover on a separate policy will be charged a policy fee.

We offer a choice of Critical Illness insurance to suit your clients' needs and budget:

- **Critical Illness Plus** – incorporating a broad range of benefits and options.
- **Critical Illness Standard** – limited cover for lower premium.

Critical Illness Plus is available as part of Life Cover insurance and as a stand alone insurance.

Critical Illness Standard is only available as part of Life Cover insurance.

Critical Illness at a glance...

Cover for	Critical Illness Plus ¹	Critical Illness Standard ¹
Critical Illness insurance as part of your Life Cover insurance or as a connected benefit	•	•
Critical Illness insurance as stand alone insurance	•	
A range of critical conditions ¹	40 conditions	5 conditions
Critical conditions and definitions cannot be limited on renewal	•	The conditions and definitions may change in the future
Financial planning benefit	•	•
Increases without medical evidence for personal / business events	•	
Extra benefits option (at additional cost) ²		
- Critical Illness Buy Back	•	
- Partial Benefits	•	
Life Cover buy back option (at additional cost)	•	•
You can apply to add TPD as a critical condition ('Any Occupation' or 'Own Occupation' definition at additional cost). This option is only available if you choose TPD as part of your Life Cover insurance or as a connected benefit.	•	•

¹ see following table detailing critical conditions covered

² MLC offers a Extra Benefits Option under Critical Illness Plus that provides clients with additional coverage for 20 extra critical conditions of less severity.

Conditions

Conditions	Personal Protection Portfolio
Minimum entry age	19 next birthday
Maximum entry age	60 next birthday (60 for level premium) , (55 with TPD for level premium)
Insurance renewable to	Policy anniversary after age 75 (65 for level premium)
Minimum sum insured	\$25,000
Maximum sum insured	\$2,000,000
Types of cover available	Stepped premium, Decreasing cover Level premium (not available for Critical Illness stand alone)

Insured Events Under Critical Illness

In the following table, although Critical Illness Standard appears to cover relatively few conditions compared to Critical Illness Plus, four of these conditions (ie heart attack, coronary artery bypass surgery, malignant cancer and stroke) account for 83% of all Critical Illness claims¹.

¹ Source: Swiss Re Life and Health, Critical Illness Report for year ending 31 December 1999.

The Critical Illness benefit is payable upon medical diagnosis of any of the following Critical Illness conditions:

Critical Condition	Critical Illness Plus	Critical Illness Standard
Aorta repair ²	•	
Aplastic anaemia	•	
Bacterial meningitis	•	
Benign brain tumour	•	
Blindness	•	
Cardiomyopathy	•	
Chronic kidney failure	•	
Chronic liver failure	•	
Chronic lung failure	•	
Coma	•	
Coronary artery angioplasty ^{2,3}	•	
Coronary artery angioplasty – triple vessel ²	•	
Coronary artery bypass surgery ²	•	•
Deafness	•	
Dementia or Alzheimer's disease	•	
Encephalitis	•	
Heart attack ²	•	•
Heart valve surgery ²	•	

Critical Condition	Critical Illness Plus	Critical Illness Standard
HIV contracted through medical procedures	•	
HIV contracted through your work	•	
Intensive care	•	
Loss of independence	•	•
Loss of speech	•	
Major brain injury	•	
Major burns	•	
Major organ transplant	•	
Malignant cancer ⁴	•	•
Meningococcal septicaemia	•	
Motor neurone disease	•	
Multiple sclerosis	•	
Muscular dystrophy	•	
Open heart surgery	•	
Out of hospital cardiac arrest	•	
Parkinson's disease	•	
Paralysis (includes paraplegia, quadriplegia, hemiplegia, diplegia, tetraplegia)	•	
Pneumonectomy	•	
Primary pulmonary hypertension	•	
Severe osteoporosis	•	
Severe rheumatoid arthritis	•	
Stroke ²	•	•
Total and permanent disability (TPD) – (optional – not available with stand alone cover)	•	•

Critical Illness insurance

- 2 MLC will not cover you for an appearance, happening or diagnosis of this condition (**'occurrence of the condition'**) which occurs in the first three months after this type of insurance began or was last reinstated, or you increased your Critical Illness benefit (**'qualifying period'**). However, if this condition later appears, happens or is diagnosed after the three month qualifying period has ended, MLC will cover you for that subsequent occurrence of the condition if it is independent of and not related to the earlier occurrence of the condition.
- 3 MLC will not cover you for an appearance, happening or diagnosis of this condition ('occurrence of the condition') which occurs:

 - in the first three months, if you have **Critical Illness Plus** cover (**'qualifying period'**), or
 - in the first six months, if you have **Critical Illness Standard** cover (**'qualifying period'**), after this type of insurance began or was last reinstated, or you increased your Critical Illness benefit. However, if this condition later appears, happens or is diagnosed after the relevant qualifying period has ended, MLC will cover you for that subsequent occurrence of the condition if it is independent of and not related to the earlier occurrence of the condition.
- 4 Coronary artery angioplasty benefit will only apply to insurance where the Critical Illness benefit is \$100,000 or more. When this is so, MLC will pay you 10% of the Critical Illness benefit, or \$20,000, whichever is less. You can claim for this condition only the first time you have this operation.

Benefits

Clients can still continue Critical Illness Extra benefits Option covering both Critical Illness Buy Back and Partial Benefits. However, they are also able to purchase Critical Illness Buy Back or Critical Illness Partial Benefits separately.

Refer to the Product Disclosure Statement and the policy document for full details and definitions.

Extra Benefits Option – Additional Critical Conditions and Maximum Partial Benefit Payable

Critical Condition	Maximum Benefit	
Adult onset insulin dependent diabetes mellitus	\$100,000	<p>1 MLC will not cover you for an appearance, happening or diagnosis of this condition ('occurrence of the condition') which occurs in the first three months after this Extra benefits option began or was last reinstated, or you increased your Critical Illness benefit ('qualifying period'). However, if this condition later appears, happens or is diagnosed after the three months qualifying period has ended, MLC will cover you for that subsequent occurrence of the condition if it is independent of and not related to the earlier occurrence of the condition.</p> <p>2 MLC will not cover you for an appearance, happening or diagnosis of this condition ('occurrence of the condition') which occurs in the first year after this Extra benefits option began or was last reinstated, or you increased your Critical Illness benefit ('qualifying period'). However, if this condition later appears, happens or is diagnosed after the one year qualifying period has ended, MLC will cover you for that subsequent occurrence of the condition if it is independent of and not related to the earlier occurrence of the condition.</p>
Advanced endometriosis		
Carcinoma in situ of the breast ¹		
Chronic lymphocytic leukaemia ¹		
Deafness in one ear		
Diagnosed motor neurone disease		
Diagnosed multiple sclerosis		
Diagnosed muscular dystrophy		
Diagnosed Parkinson's disease		
Facial reconstructive surgery and skin grafting		
Placement on waiting list for major organ transplant		
Prostate cancer ¹		
Serious accidental injury		
Loss of one foot or one hand	\$200,000	
Loss of sight in one eye		
Congenital abnormalities of a child ²	\$50,000	
Inability of a child to gain independence ²		
Death of a child ²	\$20,000	
Melanoma ¹		
Specified complications of pregnancy ²		

Claims under Critical Illness

The table below shows how a Critical Illness (extension) claim affects other insurances:

Insurance	Critical Illness (extension) Claim
Life Cover	Life Cover benefit reduced by the amount of any payment
Accidental Injury	Accidental Injury benefit reduced by the amount of any payment
Terminal Illness	Terminal Illness benefit reduced by the amount of any payment
Terminal Illness Support option	Terminal Illness Support option benefit reduced by the amount of any payment
TPD or Loss of Independence (extension)	Benefit may continue attached to any remaining (as a rider to Life Cover) Life Cover unless the claim involves TPD or Loss of Independence
TPD or Loss of Independence (extension)—as a Critical Illness condition	Benefit ceases
Critical Illness (extension)	Benefit ceases or is reduced if a partial payment is made.

Stamp Duty for Critical Illness as a Stand Alone Insurance

The Offices of State Revenue have stated that the Stamp Duty basis for Critical Illness (stand alone) should be at general insurance stamp duty rates (similar to Income Protection). This means that MLC pays stamp duty calculated as a percentage (varying by State) of all premiums received for this type of cover. However, currently, MLC's premium basis does not reflect this stamp duty basis.

It may be that MLC will change its premium formula to more correctly reflect the stamp duty basis. More information would be sent to you regarding how this will affect your clients before this calculation change is made.

Critical Illness as extension is subject to stamp duty on a different (less costly) basis. For this reason Critical Illness stand alone may be relatively expensive, and you should bear in mind that in some cases Critical Illness stand alone may be more expensive than combined Life Cover and Critical Illness as extension.

Income Protection insurance

Overview

Income Protection helps provide replacement earnings should an individual be unable to work due to injury or sickness. An interruption of a client's regular income can seriously threaten their family's lifestyle, assets and investments. Income Protection is therefore an essential element in any financial portfolio for employed or self employed people.

We offer a choice of Income Protection insurance to suit your clients' needs and budget:

- **Income Protection Plus** – incorporating a broad range of benefits and options.
- **Income Protection Standard** – limited cover for lower premium.
- **Income Protection Plus Farmer Package** – (see page181)

An optional package of extra benefits which provides additional benefits for extra premium is also available under **Income Protection Plus**.

An indemnity option is available under Income Protection Plus. The cost of this cover will be lower than the equivalent cover as Agreed value.

Conditions

Conditions	Life Cover Super and Personal Protection Portfolio
Minimum entry age	19 next birthday
Maximum entry age	AAA, ACT, ML, AA, A – 60 next birthday BBB, BB, B, C – 55 next birthday
Insurance renewable to	age 65
Minimum monthly benefit	\$500 per month
Maximum monthly benefit	\$30,000 per month
Types of cover available	Stepped premium / Level premium
Guaranteed renewable	AAA, ACT, ML, AA, A – professional and clerical occupations BBB, BB and B – general occupations
Cancellable / yearly renewable	C – special risk occupations
Waiting periods	14 days, 1 month, 3 months, 12 months (except for Class C), 24 months (except for Class C)
Benefit periods	2 years, 5 years, to age 65 (except for Class C)

Income Protection insurance

Income Protection plans at a glance...

Cover for	LCS		PPP	
	Income Protection Plus	Income Protection Standard	Income Protection Plus	Income Protection Standard
Total disability	Own occupation definition	2 years 'own occupation' definition, then 'any occupation' definition	Own occupation definition	2 years 'own occupation' definition, then 'any occupation' definition
Partial disability or Rehabilitation	Maximum up to end of benefit period	Maximum equal to 6 months benefits	Maximum up to end of benefit period	Maximum equal to 6 months benefits
Rehabilitation expense benefit			•	•
Rehabilitation bonus			•	
Premium waived while on claim	•	•	•	•
Return to work during the waiting period	•	•	•	•
Recurring disability benefit	•	•	•	•
Elective Surgery Benefit	•	•	•	•
Style of benefit	Agreed value / Indemnity option ¹	Indemnity benefit	Agreed value ² / Indemnity option ¹	Indemnity benefit
World-wide cover	•	•	•	•
Death benefit	•	•	•	•
Cover for disability due to mental disorders or drug abuse/ dependency	•	Only while under supervision	•	Only while under supervision

Cover for	LCS		PPP	
	Income Protection Plus	Income Protection Standard	Income Protection Plus	Income Protection Standard
HIV/AIDS exclusion discount	•	•	•	•
Indexed claim benefits option (at additional cost)	•	•	•	•
Short waiting period for accidental injury option (at additional cost)			•	
Extra benefits option (at additional cost)			•	
Occupational HIV, Hepatitis B or C lump sum benefit option (certain professional occupations only) (at additional cost)			•	

- 1 An Indemnity Option is also available under Income Protection Plus.
The cost of this Income Protection insurance will be lower if you choose the Indemnity option.
- 2 The trustee will not be able to release the Income Protection benefit to you unless you satisfy the criteria for temporary incapacity in superannuation legislation.

Benefits

Refer to the Product Disclosure Statement and the policy document for full details of benefits and definitions.

Income Protection insurance

Optional Lifetime Accident Benefit (AAA, ACT, ML, AA and A)

On 11 March 2004, this optional benefit ceased to be available for new business. Where a life insured already has this benefit at 11 March 2004, they may increase their existing benefit.

This option is only available as part of the Extra benefits option under **Income Protection Plus**.

Accidents can often result in serious injuries. For an additional cost, this option extends the benefit period for up to the life insured's lifetime for any injury:

- solely caused by accidental means; and
- which results (directly and independently of all other causes) in the life insured becoming totally disabled within 30 days of the accident.

Lifetime accident benefits will be paid for any one injury until the earliest of:

- the end of the total disability; and
- the death of the life insured.

If the accident happens after the life insured turns 63, MLC will pay up to a maximum of 2 years.

Income Protection Plus insurance (Farmer Package)

Overview

This type of Income Protection Plus insurance is tailored to meet the needs of principal farm owners who cannot work because of a disability. We pay a benefit each month that they are totally or partially disabled or under rehabilitation.

The benefit is based on the gross farm turnover, being the total revenue received by the farm business throughout one financial year. This benefit is usually payable monthly in arrears from the end of the waiting period they select.

This type of insurance is available to farmers who are the principal owners of their farming business where the farm has been in operation for a minimum of two years. This cover is only available where the farm has a positive balance sheet (ie total assets exceed total liabilities) over the past two financial years prior to application.

If you select Income Protection Plus (Farmer Package) you cannot also select Income Protection Plus or Income Protection Standard.

Income Protection Plus Insurance (Farmer Package) is not available under Life Cover Super.

Conditions

Conditions	Personal Protection Portfolio
Minimum entry age	19 next birthday
Maximum entry age	55 next birthday
Insurance renewable to	age 65
Minimum monthly benefit	\$500 per month
Maximum monthly benefit	\$5,000 per month
Types of cover available	Stepped premium Level premium
Guaranteed renewable	B – certain farming occupations
Waiting periods	1 month 3 months 12 months
Benefit periods	2 years 5 years

The Life Insured can choose a monthly Income Protection benefit up to \$5,000 per month with a two year maximum benefit period or the lesser of up to 30% of gross farm turnover and up to \$5,000 per month with a five year maximum benefit period.

Income Protection Plus insurance (Farmer Package)

Income Protection Plus (Farmer Package) at a glance...

Cover For	Income Protection Plus (Farmer Package)
Total disability	Own occupation definition
Partial disability or Rehabilitation period	Maximum of up to end of benefit
Rehabilitation expense benefit	•
Rehabilitation bonus	•
Premium waived while on claim	•
Return to work during the waiting period	•
Recurring disability benefit	•
Elective surgery benefit	•
Style of benefit	Agreed value benefit
World-wide cover	•
Death benefit	•
Cover for disability due to mental disorders or drug abuse/dependency	•
Indemnity option	
HIV/AIDS exclusion discount option	•
Indexed claim benefits option	•
Short waiting period for accidental injury option	
Extra benefits option	•
Occupational HIV, Hepatitis B or C lump sum benefit option	

Benefits

Refer to the Product Disclosure Statement and the policy document for full details of benefits and definitions.

Business Expenses insurance

Overview

Business Expenses insurance helps ensure a client's business continues as a going concern by insuring the normal operating expenses of the business whilst the client is totally disabled and unable to work due to injury or sickness. It covers those normal and customary Business Expenses actually incurred by the client in the operation of the client's office, business or practice.

Conditions

Conditions	Personal Protection Portfolio
Minimum entry age	19 next birthday
Maximum entry age	AAA, ACT, ML, AA, A – 60 next birthday BBB, BB, B – 55 next birthday
Insurance renewable to	age 65
Minimum monthly benefit	\$500 per month
Types of cover available	Stepped premium Level premium
Guaranteed renewable	AAA, ACT, ML, AA, A – professional and clerical occupations BBB, BB, B – general occupations
Waiting periods	14 days 1 month
Benefit period	1 year

Markets

Self-employed

The fixed Business Expenses of self-employed clients.

Partnerships

Partners of small partnerships (up to 6 partners) can apply to insure their share of partnership expenses.

Small Businesses

The principals of a small business with up to 6 employees can apply for Business Expenses insurance. MLC will consider conservative benefit amounts only for this category.

Benefits

Refer to the Product Disclosure Statement and policy document for full details of benefits and definitions.

Premium Waiver insurance

Overview

Premium Waiver insurance enables all premiums on a policy to be waived where the life insured is disabled or retrenched.

One life insured only can be nominated for Premium Waiver per policy. The life nominated must be insured for benefits under the policy.

Premium Waiver covers all benefits on all lives insured. The benefit is calculated as the total of all premiums on all lives under the policy (except for any Income Protection, Occupational HIV/Hepatitis or Business Expenses benefits for the life insured as these have an inbuilt waiver for disability, but including Income Protection, Occupational HIV/Hepatitis or Business Expenses premiums for other lives insured under the policy).

Condition

Conditions	Life Cover Super	Personal Protection Portfolio
Minimum entry age	19 next birthday	19 next birthday
Maximum entry age	55 next birthday	55 next birthday
Insurance renewable to	Policy anniversary after age 65	Policy anniversary after age 65
Waiting and Benefit Periods		
Total and Permanent Disability or Income Protection total disability	Duration of disability not beyond the earlier of the maximum benefit period (for total disability) or age 65	6 months
Retrenchment	12 months	not applicable

Not available for Class C lives.

Benefits

Refer to the Product Disclosure Statement and the policy document for full details of benefits and definitions.

Premium Information



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General Premium Information

Minimum Premium

Mode of payment	Minimum premium	Minimum increase
Yearly	\$250	\$250
Half yearly	\$130	\$130
Monthly	\$20	\$20

- The minimum premiums shown above are per life insured.
- The minimum premium is averaged over all lives and does not include the policy fee.

Note: If, for instance, there are three lives insured under one policy and the annual premium for just one of those lives insured is \$750, the minimum premium requirement for the other two lives will have been satisfied. For those two lives, only minimum sum insured requirements would then need to be met.

Benefit and Premium Structure

The premium structure can differ for each insurance benefit (extensions, however, must be the same structure as the benefit to which they attach). The benefit increases each year in line with CPI. This increase does not need to be accepted.

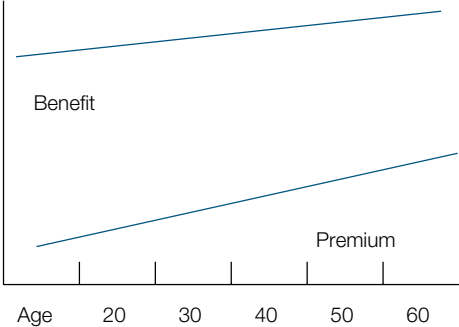
MLC’s premiums are based on rates which differ based on such things as the type of insurance, gender, smoker status, occupation category and other factors that are applied to the premium depending on the options selected.

Available structures are:

Stepped premium

The benefit stays the same and the premium will vary each year depending on the age of the life insured and MLC’s premium rates at the time subject always to any inflation linked option variations and other increases to the level of benefits. Inflation linked benefits are available up to the termination date.

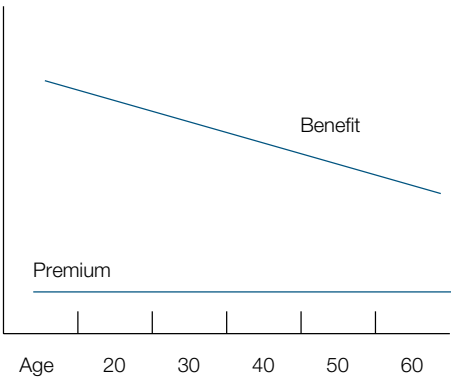
With Inflation Linked increases



General Premium Information

Decreasing cover

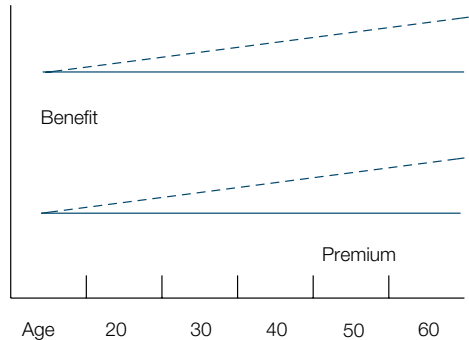
The premium stays the same each year and the benefit varies each year depending on the age of the life insured and MLC's premium rates at the time.



Note: Inflation linked benefits are not available for this structure.

Level premium

The benefit remains the same and the premium depends on the life insured's age at entry and MLC's premium rates each year subject always to any inflation linked options variations and other increases to the level of benefits. Inflation linked benefits are available up to the termination date and the premium is based on the age at which the inflation linked increase takes effect.



Note: Level premium rates may still increase over time due to rate, CPI and policy fee increases. However, unlike stepped premium, level premium (excluding CPI and policy fee) does not go up by age-related increases. The dashed line shows with Inflation Linked increases.

Level Premium Rates Guaranteed for Life Cover and TPD Extension

For Life Cover insurance and Total and Permanent Disability insurance taken out as part of your Life Cover or as a Connected Benefit under a level premium structure, MLC guarantees not to increase the level premium rate that applies to these insurances for a period of 5 years. The premium will still increase due to:

- Consumer Price Index (CPI) increases for the policy fee
- CPI increases for insurance increases under the Inflation Linked Option
- voluntary increases in the sum insured.

Important notes regarding Level Premium Rates Guaranteed for Life Cover and TPD Extension policy:

- Available for new clients until 30 September 2009. MLC will review this offer annually.
- It applies to the level premium rates (including Business Safeguard Option and TPD Buy Back for Life Cover) for Life Cover and TPD extension.
- It applies to both new and existing level premium Life Cover and TPD extension policies, including policies taken as Connected Benefits.
- It does not apply to the Policy Fee.
- It does not apply to Terminal Illness Support Option.

- If the Inflation Linked Option has been selected, premium will still go up by CPI. The premium for CPI increases is calculated using the premium rate for the current age at each policy anniversary.
- It applies to the level premium portion if the Life Cover and TPD extension has been split between Level and Stepped / Decreasing Cover.

Split Premium Structures

MLC also provides clients with greater flexibility by allowing these premium structures to be used in combination to assist with meeting a client's short term and long term affordability needs. For example where a client requires \$1,000,000 of Life Cover, \$500,000 can be taken on a stepped premium basis and \$500,000 on a level premium basis.

General Premium Information

Direct Debit System

You can arrange monthly, half yearly or yearly premium payments for MLC Life Cover Super and MLC Personal Protection Portfolio using the Direct Debit System.

If your client operates either a cheque account or a non-passbook savings account at any bank or financial institution in Australia, they can make automatic premium payments directly to MLC who will pay all transfer charges.

Direct Debit Request forms are contained in the Product Disclosure Statement or can be obtained separately from MLC EasyOrder.

Instructions for completion of the Direct Debit request are printed on the form.

The initial premium or a completed direct debit request must accompany the proposal.

BPAY Facility

BPAY is a facility set up with most Australian banks whereby a customer can pay bills using telephone or internet banking. This is done using a BPAY biller code along with a customer reference number. The money is then transferred from the account of the policy holder onto the account of the biller almost instantaneously if inside business hours.

For your clients this means a much quicker and simpler method of making payments.

The BPAY biller code is: **58289**

The client's customer reference number will be noted on all premium renewal notices sent to the client, arrears due and urgent payment request.

Note: This option is not available for the initial premium payment.

Adviser Switchboard

Adviser Switchboard (ASB) contains the quoting software for MLC Life Cover Super and MLC Personal Protection Portfolio.

You can download the current version of ASB from either the adviser section of **mlc.com.au** or AdviserPoint (for MLC aligned licensees). A password is required for each of these sites.

To obtain a password for these sites, please have your adviser number ready and contact one of the following:

- for **mlc.com.au** (adviser section) – contact the MLC Adviser Hotline on **133 652**, option 6; or
- for AdviserPoint – contact Threesixty on **134 360**, option 1, then option 3.
- National Australia Group Advisers will have their Adviser Switchboard software directly updated via the Groups Technology network.

How to Download ASB from the Internet

There are two parts to the installation:

- a) the downloadable file(s), and
- b) the accompanying Release Notes (describing the changes in this version of the software and providing the appropriate Registration Code (if required)).

1. Log into the relevant internet site as follows:

mlc.com.au:

- a) Go to **mlc.com.au**, click on the Adviser Link in the 'I'm considering MLC' or the 'I'm with MLC' section. Click on 'Resource Centre' Tab, then click on 'Tools and calculators'. Click on the Adviser Switchboard link in the 'other calculators' section. Log in as an Adviser, as normal.
- b) Click on the Adviser Switchboard link on the front page or go to the Learning Centre tab, then click on Calculators. This will take you to the Adviser Planning Tools / Calculators page. Then click on the Adviser Switchboard link on this page.

Adviser Point:

Once in Adviser Point, go to Software Tools and IT Strategic Advice, then click on the Adviser Switchboard link.

2. To download the file(s):

The files are available in 2 formats, the complete version (multiple files) and single file format. It is generally easier to download a single file from the Internet.

- For single file download for one computer or for a network, select 'click here' in the Single File Download area.
- For Multiple file download if you wish to copy to floppy disk, or for installation to other computers not on your network, select 'click here' in the Multiple Files Download area.

Note: During the download time, your computer may be used as normal.

3. Follow the on screen instructions – you may wish to print these before proceeding. This screen also contains links to information regarding the Release Notes and an Installation Guide.
4. Ensure you save the file to a location which you will easily find after the download is complete (eg C:\Temp).
5. Once the download is complete, launch Setup.exe from that file location.

The software's Installation Wizard will guide you through the installation process.

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MLC Online Applications and Client and Adviser Protection reporting on mlc.com.au

10

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Section 1

Introduction to mlc.com.au

The MLC website provides you with the tools to effectively and efficiently service your MasterKey and insurance clients – freeing up your time to focus on the things that add the most value to your business.

This introduction provides an overview of the website functionality from an insurance perspective and information on how to get started.

MLC Online Applications

In the continual effort to increase the efficiency of the application process for Advisers, MLC offers online applications for Advisers wanting to access MLC's products. MLC Online Applications is a web-based service that allows you to submit applications via the secure Adviser site of mlc.com.au. For an overview of MLC Online Applications please see section 2.

Benefits of using online applications

- **Availability** - you can lodge an online application 24 hours a day, 7 days a week
- **Time saving** - you are prompted for the information that is required, so you only enter what is needed in order to complete the application.
- **Improved Accuracy** - whatever you type into the online application is automatically entered into MLC's systems. There is no possibility of handwriting being misread or errors occurring when transposing the information.
- **Completeness** – You will be alerted if there are incomplete questions or information that is required before submitting the application. This results in less follow up.
- **Postage time** – MLC receives the application straight into its workflow removing up to three day's postage and sorting time.
- **Secure delivery** – The secure website removes the worry of paper applications being lost or opened before arriving at MLC.
- **Application tracking** – MLC will confirm receipt of the online application form and you can view and track its progress via 'My Worktracker' within hours.

Section 1 Introduction to mlc.com.au (continued)

My Work Tracker

- New insurance applications – through Application Tracking Online you have access to **real time** information on all of your clients' new business applications, not only for insurance business, but also for personal superannuation and retirement income products. You can view our online reports or create a number of PDF reports to help minimise the time your clients' applications are in suspense. For an overview of Application Tracking Online please see section 3.
- Inforce insurance business – once your clients' applications have completed you will be able to view all of their MLC insurance business in one place, where you are the servicing adviser. Like the new business applications, you can also view online reports or create a number of PDF and excel reports. For more details on Protection Reporting Online please see section 4.

Benefits for you

- **Reporting** – choose from a selection of online, PDF or excel reports.
- **Download option** – tailor the information to the format of your own reports for your client, a group of clients or your business.
- **Consolidated view** – see your selected client's portfolio in one place – including their existing accounts/policies and new application(s) for personal superannuation, retirement income and insurance, where you are the servicing adviser.¹
- **Up-to-date information** – for existing insurance business the information is updated daily as at close of business the previous day. For new business applications you can see the information on mlc.com.au as soon as it is entered into our system.
- **Unmet needs** – mlc.com.au can help you to identify unmet client needs using the detailed search facility and a variety of reports.

¹ A servicing adviser is the first adviser listed against an account/policy/application.

Need access?

To access the secure adviser site on **mlc.com.au**, a user name and valid password are required. If you:

- Don't know your user name,
- Don't have a password, or
- Require your password to be reset please contact the MLC Service Centre. An MLC customer service representative will guide you through your first login and/or assist you with your enquiry.

Login instructions:

1. Go to the MLC website – **www.mlc.com.au**
2. Click on the **Adviser tab**, located on the top right side of the page.
3. Click on the **MasterKey Login** link, located on the right hand side of the page.
4. Enter your user name and password.
5. Click on the **Login** button, the Adviser home page will be displayed.

Tips for using the website

For security reasons, if your website password is entered incorrectly three times your website account will be locked and you will need to contact the MLC Service Centre to have your password reset.

Quick search functionality: You can now go directly to your client of choice from the **mlc.com.au** adviser homepage. Once you have logged into **mlc.com.au**, enter your client's name, account/policy or customer number into the search box located on the right hand side of the homepage.

Centralised report retrieval centre:

You can now retrieve all your reports ordered on the **mlc.com.au** adviser website from one central area. Access the retrieval centre from the 'Reporting' menu and from various areas on the site where you request reports.

Section 2 MLC Online Applications

Online applications

Login to Adviser home page

MLC online applications

MLC Online Applications is a web-based service that lets you submit new client applications through the secure Adviser's My clients portal. MLC Online Applications allows you to save time and increase proposal accuracy, while also providing a more consistent client experience when using MLC's Adviser's My clients portal.

Take us to MLC Online Applications now!

Download the MLC Online Application user guide

Key features

- Online entry and submission of application forms
- Applicant data flows into MLC's workflow system, ready for processing
- Ability to print and track, and track application progress
- Not need to submit any proposal before considering a new business case, except for NAB (high net worth) applications
- For NAB, we will process the application and set up pending until we receive that approval from NAB.

Key benefits

- Streamlined and cutting-edge
- No data entry of applications with you, via My Share Tracker
- Full data validation to ensure accurate data is submitted with all necessary and correct

Click on 'My clients', then click on 'Online applications'

Online Application Home Page

Select Product: MLC Personal Protection Portfolio / MLC Life Cover Super.
Then click on 'Apply Now'.

Application Menu

The online application consists of 5 steps.

Section 2 MLC Online Applications (continued)

Step 1 : Person Details	
<p>Step 1: Person Details</p> <p>Provide personal details for each Policy Owner and Life to be insured associated with this application.</p> <p>No person details have been provided, please click on the Add New Person button to enter required information.</p> <p style="text-align: center;">Add New Person</p>	<p>This section covers all the personal details for the Life to be insured and policy owners. A new person will need to be created for each person associated with this application.</p>
Step 2: Policy Details	
<p>Step 2: Policy Details</p> <p>Provide policy information for each policy associated with this application.</p> <p>Note: This electronic application form can only be used for establishing new policies. For increases and/or additions to existing policies, please use the application form contained within the relevant Product Disclosure Statement.</p> <p>No policy details have been provided, please click on the Add New Policy button to enter required information.</p> <p>Product Type <input type="text" value="(select one)"/> Add New Policy</p>	<p>This section is where you create the policies that are associated with the application.</p>
Step 3: Match Policy with Life to be Insured and Benefits	
<p>Step 3: Match Policy with Life to be Insured and Benefits</p> <p>For each policy match the associated Life to be insured and benefits. Match</p>	<p>This section requires you to match the Life to be Insured and policy owners with the Policy and Benefits</p>
Step 4: Additional application information	
<p>Step 3: Match Policy with Life to be Insured and Benefits</p> <p>For each policy match the associated Life to be insured and benefits. Match</p>	<p>This section requires Adviser details to be inputted and any required attachments added to the application – including the Insurance Quote</p>
Step 5: Review and Finalise	
<p>Step 5: Review and Finalise</p> <p>Validate application for completeness. Review, finalise and submit application to MLC for processing. Validate Application Finalise</p>	<p>This is the final step in the application. This step allows you to Validate the application for completeness. Any errors will need to be corrected before you can Review and Finalise the application. Once you submit the application, you will be able to view the application in My Work Tracker.</p>

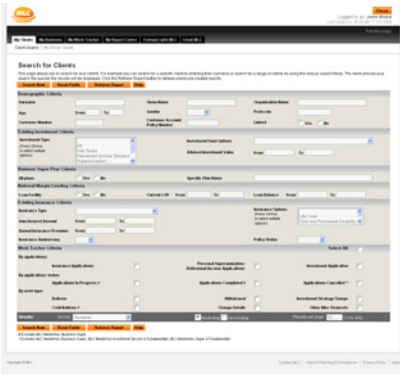
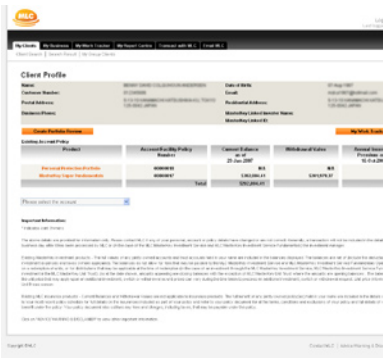
Who to contact

For all enquiries or feedback on MLC Online Applications contact the MLC Adviser Hotline on 133 652 or speak to your MLC Representative.

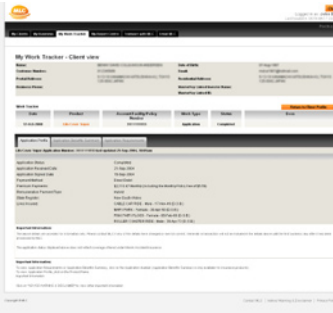
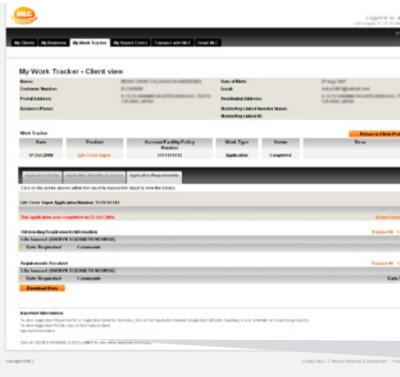
Section 3 Tracking your clients' new business applications (My Work Tracker)

My Work Tracker's features makes the tracking of your clients' applications easier. You can view your clients' applications online or by creating a number of reports.

Online you can:

Online reports	How you can use them
<p>Search for Clients</p> 	<p>Perform detailed searches by client or by the status and/or type of applications. See Section 5(A) page 212.</p> <div data-bbox="688 917 1041 989" style="background-color: #e0e0e0; padding: 10px; border-radius: 5px;"> <p>Search by status and type of applications</p> </div>
<p>Client profile</p> 	<p>Select a client for a consolidation view of their product holdings, along with the status of any applications in their name. See Section 5(A) page 212.</p> <div data-bbox="688 1332 1041 1404" style="background-color: #e0e0e0; padding: 10px; border-radius: 5px;"> <p>Listings of new application(s) for the client</p> </div>

Section 3 Tracking your clients' new business applications (My Work Tracker) (continued)

Online reports	How you can use them
<p>Application Profile</p> 	<p>View the details of the application ... See Section 5(A) page 212.</p>
<p>Application Requirements</p> 	<p>... and drill down to find out what information is required to progress the application. See Section 5(A) page 212.</p> <p>Click here to expand view</p> <p>Detailed outstanding requirements</p> <p>Click here to expand view</p> <p>Detailed outstanding requirements</p> <p>Tailor information to your report formats</p>

In addition to the online reports you can also:

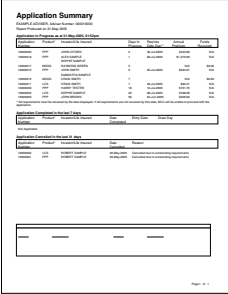

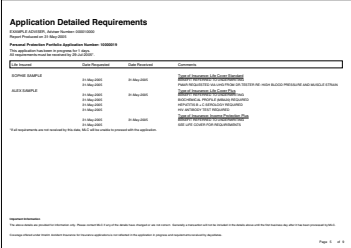

- Request PDF reports which provide the information in standard format, or
- Download data into an excel spreadsheet to tailor the information into your own report formats

There are 2 PDF reports that you can request to assist you in tracking your clients' new business applications.

We can send you an activity report that summarises your clients' applications that were altered the previous day. To be eligible to receive the reports you must have an email address. You can subscribe by:

- updating your profile, on **mlc.com.au**, with your email address details. Go to the **Business Management** drop down and select **Business Profile** option, or
- phone the MLC Service Centre.

For privacy reasons, the email can only be sent to your email address.

PDF reports	How you can use them
<p>Application Profile</p> 	<p>This report gives you a snapshot of your existing and recent client application by life insured/investor.</p> <p>For instructions on how to order this report see Section 5  page 213.</p>
<p>Application Detailed Requirements</p> 	<p>This report gives you a detailed view of all your clients' 'In progress' applications.</p> <p>For instructions on how to order this report see Section 5  page 213.</p>

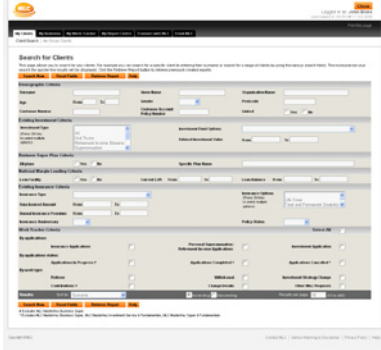
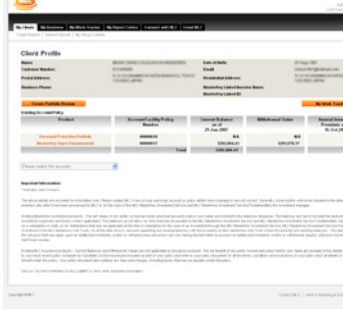
Section 4

Keeping up to date with your clients' Inforce business (Protection reporting Online)

In addition to the information on new business applications, **mlc.com.au** also provides details of your clients' inforce business. This data is displayed together with any new business application data so that you have a single view of your clients' business.

For existing client business you have access to a number of reports.

Online you can:

Online reports	How you can use them
<p>Search for Clients</p> 	<p>Perform detailed searches such as: by client, policy and/or benefit types, sum insured ranges, annual premium ranges, policy anniversaries.</p> <p>See Section 5(A) page 212.</p>
<p>Client Profile</p> 	<p>Select a client for a consolidation view of their product holdings.</p> <p>See Section 5(A) page 212.</p> <div data-bbox="647 1257 972 1321" style="background-color: #cccccc; padding: 5px; text-align: center;"> <p>Listing of existing account/policy for the client</p> </div>

Online reports

How you can use them

Policy Profile

The screenshot shows the 'Policy Profile' report in the MLC system. It includes a 'Client Profile' section with fields for Name, Address, and Contact Information. Below this is a table for 'Policy Information' with columns for Policy Number, Issue Date, Term, and Premium. The main body of the report contains detailed text regarding the policy's terms, conditions, and financial details.

View details of the existing policy, such as: start date, payment method, premium amount and frequency, policy fee.

See Section 5(A) page 212.

Policy Benefits Summary

The screenshot shows the 'Policy Benefits Summary' report in the MLC system. It includes a 'Client Profile' section with fields for Name, Address, and Contact Information. Below this is a table for 'Policy Information' with columns for Policy Number, Issue Date, Term, and Premium. The main body of the report contains detailed text regarding the policy's terms, conditions, and financial details.

View and/or download the policy coverage details, such as: life insured(s), types of insurance, benefit/premiums structure, benefit, benefit premium, waiting/period, period, policy fee and total premium.

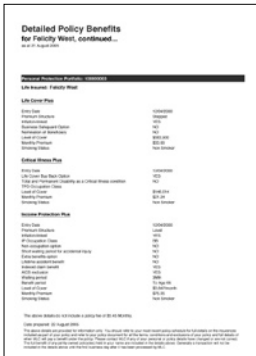
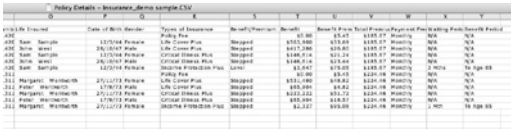
See Section 5(A) page 212.

Section 4

Keeping up to date with your clients' Inforce business (Protection reporting Online) (continued)

In addition to the online reports you can also request a number of PDF reports or downloads data into excel spreadsheets to tailor the information to your own report formats.

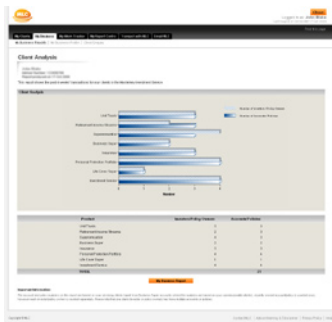
Here's a few of the most popular reports requested by advisers.

Reports	How you can use them
<p>Detailed Policy benefits</p> 	<p>This report displays detailed policy information, such as: life insured(s), types of insurance, entry date, premium structure, inflation-linked, level of cover, premium amount and frequency, smoking status. This report can be viewed online and/or downloaded as a PDF that is laid out professionally, which can be provided directly to your client.</p> <p>For instructions on how to order this report see Section 5(B) & (C) pages 212.</p>
<p>Policy details – Insurance</p> 	<p>This report displays insurance data such as policy number, entry date, policy owner(s) details, types of insurance, benefit amount, benefit premium, total premium, payment frequency, waiting and benefit periods. It provides a valuable business tool for you to gain additional insight into your clients' current holdings. It can be used to identify your clients that have unmet insurance needs.</p> <p>For instructions on how to order this report see Section 5(D) page 213.</p>

Reports

How you can use them

Client Analysis



This report shows the number of clients and accounts/policies across your MasterKey and Insurance client base.

For instructions on how to order this report see section 5E page 213.

Section 5

A summary of the reports and how to order them

The MLC adviser website provides a range of client and adviser business reporting.

Here's a list of all of the insurance reports available on mlc.com.au:

Report name	Focus of the report ie for Inforce business / new business application	My Clients	My Group Clients	My Business Reports	Where to find them in Section 5
Application Profile	New business application	Online			A
Application Requirements	New business application	Online and excel			A
Application Benefits Summary	New business application	Online			A
Policy Profile	Inforce business	Online and excel			A
Policy Benefits Summary	Inforce business	Online and excel			A
Recent Transactions	Inforce business	Online and excel			A
Policy Tax Summary	Inforce business	Online			A
Insurance – Policy Benefits Summary	Inforce business	Online and PDF	PDF		B and C
Insurance – Detailed Policy Benefits	Inforce business	Online and PDF	PDF		B and C
MasterKey Tax Summary	Inforce business	Online and PDF	PDF		B and C
MasterKey Portfolio Summary	Inforce business	Online and PDF	PDF		B and C
Client Profile	Inforce business	Excel			D
Policy Details – Insurance	Inforce business	Excel			D

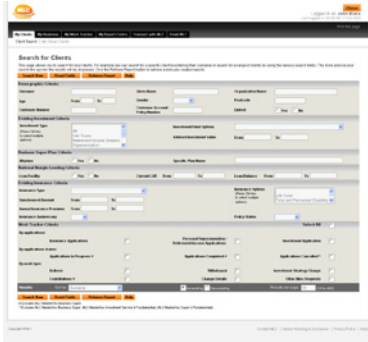
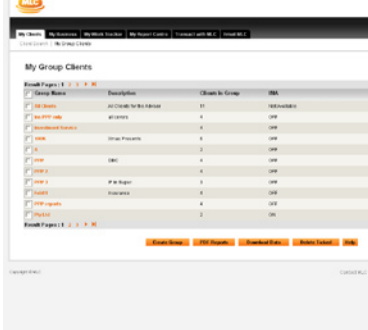
Report name	Focus of the report ie for Inforce business / new business application	My Clients	My Group Clients	My Business Reports	Where to find them in Section 5
Client Analysis	Inforce business	Online and Excel			E
Insurance Products	Inforce business	Online and Excel			E
Insurance Coverage	Inforce business	Online and Excel			E
Insurance Premium Ranges	Inforce business	Online and Excel			E
Insurance Premium History	Inforce business	Online and Excel			E
Application Summary	New business application		PDF		F
Application Detailed Requirements	New business application		PDF		F

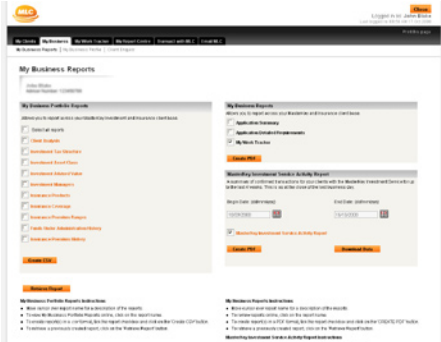
Section 5

A summary of the reports and how to order them

(continued)

To access the reporting sections, place your mouse over the Reporting tab at the top of the Adviser home page and click on the required reporting section. Some of these are outlined below:

Reporting Section	Available
<p>Option 1 – My Clients</p> 	<p>Search the database for your clients for which you are the servicing adviser, view/download information and produce reports for these clients individually.</p> <ul style="list-style-type: none"> • Individual Client Quick Reference Online Reports <ul style="list-style-type: none"> – View and/or download information for your clients and their holdings – Includes existing accounts/policies and/or applications • Individual Client Portfolio PDF Reports <ul style="list-style-type: none"> – Create and print professional review reports for your clients individually – Only applicable for existing accounts/policies
<p>Option 2 – My Group Clients</p> 	<p>Segment and create groups from your client base, produce reports and/or download information for these clients.</p> <ul style="list-style-type: none"> • Group Client Portfolio PDF Reports <ul style="list-style-type: none"> – Create and print professional review reports for a group of your clients—saving you administration time. – Only applicable for existing accounts/policies • Group Client Download Data Reports <ul style="list-style-type: none"> – Download information for a group of your clients for use by your business, that can also be included in your client management system – Only applicable for existing accounts/policies

Reporting Section	Available
<p>Option 3 – My Business Reports</p> 	<p>View your clients' existing and new business with MLC.</p> <ul style="list-style-type: none"> • My Business Portfolio CSV Reports <ul style="list-style-type: none"> – View and/or download segmented views of your existing business across MLC – Only applicable for existing accounts/policies • My Business Application PDF Reports <ul style="list-style-type: none"> – Create and print business reports displaying your client's applications (includes a summary report of all recent applications and a detailed report of all existing in progress applications) – Only applicable for applications

Please refer to the next page for the steps to produce client and business reports.

A Individual Client Online Reports

1. Go to the 'My Clients' section of the Adviser website.
2. Enter and/or select the criteria to search for your client(s). If there are multiple clients returned, click on the name of the client you wish to view. The 'Client Profile' page will be displayed.
3. Click on either the product name or number hyperlink to view the account/policy or application.
4. To access other pages, click on the 'Select Another Page' drop down menu at the top of the screen.
5. Click on the 'Create Report' button, located at the bottom of the page.
6. To view your report, click on the '**Retrieve Report**' button.
7. Click on the report name link for the required report. The report can now be printed and/or saved.

B Individual Client Portfolio PDF Reports

1. Go to the 'My Clients' section of the Adviser website.
2. Enter and/or select the criteria to search for your client(s). If there are multiple clients returned, click on the name of the client you wish to view.
3. The 'Client Profile' page will be displayed. Click on the 'Create Portfolio Review' button.
4. Select the report(s) required (note: reports with insurance details included are marked with a + symbol).
5. Click on the 'Create Report' button, located at the bottom of the page.
6. To view your report, click on the '**Retrieve Group Report**' button.
7. Click on the report name link for the required report. The report can now be printed and/or saved.

C Group Client Portfolio PDF Reports

1. Go to the '**My Group Clients**' section of the Adviser website.
2. Click on the group of clients required (to create a new group of clients, click on the '**Create Group**' button and follow the prompt(s)).
3. Click on the '**PDF Reports**' button
4. Select the report(s) required (note: reports with insurance details included are marked with a + symbol).
5. Click on the 'Create Report' button, located at the bottom of the page.
6. To view your report, click on the '**Retrieve Group Report**' button.
7. Click on the report name link for the required report. The report can now be printed and/or saved.

D **Group Client Download Data Reports**

1. Go to the **'My Group Clients'** section of the Adviser website.
2. Click on the group of clients required (to create a new group of clients, click on the **'Create Group'** button and follow the prompts).
3. Click on the **'Download Data'** button.
4. Enter the begin and end dates (note: does not apply to insurance).
5. Select the download method required.
6. Select the report format required.
7. Select the report required (note: order individually only).
8. Click on the **'Download Group Report'** button.
9. To view your report, click on the **'Retrieve Group Report'** button.
10. Click on the report name link for the required report. The report can now be printed and/or saved.

E **My Business Portfolio CSV Reports**

1. Go to the **'My Business Reports'** section of the Adviser website.
2. In the **'My Business Portfolio Reports'** section, select the report(s) required.
3. Click on the **'Create CSV'** button, located underneath the report names.
4. To view your report, click on the **'Retrieve Report'** button located on the bottom left hand side of the page.
5. Click on the report name link for the required report. The report can now be printed and/or saved.

F **My Business Application PDF Reports**

1. Go to the **'My Business Reports'** section of the Adviser website.
2. In the **'My Business Application Reports'** section, select the report(s) required.
3. Click on the **'Create PDF'** button, located underneath the report names.
4. To view your report, click on the **'Retrieve Report'** button, located on the bottom left hand side of the page.
5. Click on the report name link for the required report. The report can now be printed and/or saved.

How to identify unmet clients' needs (Section 6)

To identify unmet clients' needs:

1. Search for a group of your clients, using the search criteria available.
2. Select the identified clients.
3. Save these clients as a group.
4. Download the '**Client Profile**' and/or '**Policy Details – Insurance**' report for this-group.

Using the 'Client Profile' Report to Identify Unmet Needs

This report displays the personal details, total investment value and total insurance annual premium of the clients within the group selected.

Identifiable unmet needs include:

- Clients that have an inforce personal superannuation account, yet no inforce insurance policy.
- Clients that have an inforce personal superannuation account with an advised investment value of \$100,000 or more, yet no inforce insurance policy.
- Clients that are within a specified age bracket, with an inforce personal superannuation account, yet no inforce insurance policy.
- Clients that are within a specified age bracket, yet no inforce insurance policy.
- Clients that have an inforce Personal Protection Portfolio (PPP) policy, with an Income Protection benefit between \$500–\$6,000, yet no inforce investment account.

Using the 'Policy Details – Insurance' Report to Identify Unmet Needs

This report displays the insurance details for the clients within the group selected.

Identifiable unmet needs include:

- Clients that are within the age bracket 18–60, that have an inforce PPP, yet no inforce Income Protection benefit.
- Clients that have an upcoming policy anniversary, sort by either policy owner or life insured to review their existing insurance coverage and identify any unmet needs.

Product and Marketing Material

11

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Product and Marketing Material

MLC Life Cover Super and MLC Personal Protection Portfolio is supported by excellent promotional material and forms to support you in your sales efforts.

Product Disclosure Statement

The Product Disclosure Statement (PDS) is written in simple English for the benefit of you and your clients.

Premium Quotation Software

Adviser Switchboard is available from MLC or your MLC representative.

Promotional Brochures

A series of promotional brochures have been developed to help you.

See below for a listing of available material.

For you

	Order Number
• Guaranteed and True Agreed Value—What do they mean	62160
• How capable is your clients' insurance?	61710
• Personal Protection Portfolio Remuneration Philosophy Flyer	51171
• Underwriting Service Brochure	63559
• Underwriting Service Offer Large Case Team	63776

For you to use with your clients

	Order Number
• Business and Personal Protection Fact Find	53912
• Critical Illness 'Plain Talk' Guide	20156
• MLC Income Protection Insurance Claims	63624
• MLC Income Claims Process concept card	54327
• MLC Insurance Connected Benefits—making insurance more affordable	63660
• Level Premium - Making your insurance more affordable long-term	63659
• MLC Insurances—Nominating beneficiaries for your insurance	63661

Product and Marketing Material

- Why MLC is better for you and your clients 65516
- MLC Life Cover and Total and Permanent Disability Insurance Claims concept card 63625
- MLC Super Estate Optimiser concept card 63248
- The Business Succession and Protection Planning concept card 54507

For your clients

Order Number

- Business Insurance—Protect your business' future 63703
- Critical Illness—how to get back on track 62154
- Critical Illness Insurance DL Brochure—A Protection plan for women 20497
- Critical Illness with extra benefits 62155
- MLC LCS and MLC PPP PDS 62395
- Don't worry be happy 54330
- Life Cover—Actions speak louder than words 63580
- MLC Income Protection—A super way to protect your income 63658

Forms

Order Number

- Alteration to Non-smoker Form 52196
- Application for Increase/ Reinstatement/Alteration Form 64201
- Application for Increases without Medical Evidence form 50170
- Declaration of Changes Form 52195
- Financial Questionnaire 01063
- LIFA/AMA Standard Medical Examination Form
– Confidential Medical Report 05030
- Mini Health Check Form 63263



MLC Insurance

How to contact MLC

For more information call the MLC Adviser Service Centre from anywhere in Australia on 133 652 between 8am and 6pm EST or contact your MLC Representative

After Hours

Underwriting Service

8 pm – 9 pm
Monday to Thursday
5.30 pm – 9 pm EST, Friday
10.30 am – 5 pm EST.
Saturday, Sunday &
Public Holidays

For National

Australia Group

Tel: 0421 610 475

For all Other Business

NSW/SA Tel: 0421 054 225

VIC Tel: 0401 142 927

QLD Tel: 0413 308 784

WA Tel: 0448 739 299

Website: mlc.com.au

Postal address:

MLC Limited, PO Box 200
North Sydney, NSW 2059