



Accelerated Protection Policy  
TOWER Protection Policy

# PRODUCT UPGRADE IN DETAIL

November 2008

TOWER is committed to improving the quality of our life insurance product suite. Our product improvements will deliver important benefits to your clients and provide choice and efficiency for your business.

**Our product improvements offer the right solutions.**

As valued business partners, TOWER listens to advisers during our every interaction. You provide us with ongoing advice about our products and how we can make improvements that will benefit your clients and your business. We value this feedback and would like to thank you for it.

This latest review demonstrates that we wish to continue providing you with the tools that allow you to give expert advice. This document outlines all improvements and updates made to the Accelerated Protection Policy and the TOWER Protection Policy.

I trust that these latest enhancements to our products and service meet your needs, and look forward to working together towards success in 2009.



**Belinda Howell**  
Head of Marketing and Retail Life Product

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# PRODUCT ENHANCEMENTS SUMMARY

At TOWER, we believe in continually improving our products and services to provide you and your clients with a comprehensive and sustainable offering.

This latest review of the Accelerated Protection Policy and TOWER Protection Policy provides significant improvements to our product range.

For APP, the product enhancements apply to policies issued under the PDS dated 1 July 2007. For TPP, it applies to policies of Series 27 and 28, that is, policies issued under the PDS' dated 2 April 2007 or 30 April 2008.

## ACCELERATED PROTECTION POLICY

### TPD

- Stand-Alone TPD now available
- Advancement Payment added for Loss of a Single Limb or Loss of Sight of one eye
- Long Term Care definition upgraded. Loss of Limbs, Total Blindness and Loss of Independent Existence now included
- Significant Cognitive Impairment now included in the TPD/Critical Illness Loss of Independent Existence definition

### Critical Illness

- Stand-Alone Critical Illness now available
- Angioplasty cap increased to \$50,000
- Meningococcal Disease and Pneumonectomy added as Critical Illness events
- Chronic Lung Failure definition improved

### Income Plan

- Partial Disability definition improved
- Waiting Period definition improved
- IP through TOWER Superannuation Fund now available
- Death Benefit added to Income Protection Plan – Standard

### Superannuation

- 'Own Occupation' TPD allowed through the TOWER Superannuation Fund

### Rates and pricing

- Level premiums for all insurance types
- Over 45s pricing improved for lump sum products
- Accident Benefit Option pricing reduced

## TOWER PROTECTION POLICY

### Life Protection Plan

- Financial Planning Benefit to offset the cost of financial planning
- Accommodation Benefit now available to cover the costs of accommodation for family members

### Crisis Protection Plan

- Financial Planning Benefit and Accommodation Benefit introduced
- Angioplasty cap increased to \$50,000
- Partial Benefits added for either Loss of Sight in one eye, Loss of Hearing in one ear or Loss of a Single Limb
- Major Organ Transplant definition improved to cover patients on a transplant waiting list
- The following definitions have improved and a full benefit is now payable upon diagnosis:
  - Dementia and Alzheimer's
  - Motor Neurone Disease
  - Multiple Sclerosis
  - Muscular Dystrophy
  - Parkinson's Disease
  - Primary Pulmonary Hypertension
- Severe Burns definition improved and now provides cover when third degree burns occur to at least 50% of face or hands rather than 100%
- Intensive Care added as a crisis event

### Income Protection Plan

- Waiting Period definition improved
- Scheduled Illness Option improved
- Death Benefit improved from three times to six times the monthly IP benefit payment
- Removed the maximum indexation increase limits

### Business Expense Plan

- Removed the maximum indexation increase limits

### Rates and pricing

- Multi-Benefit Discount for the Crisis Protection Plan has improved

# ACCELERATED PROTECTION POLICY (APP)

## TOTAL AND PERMANENT DISABILITY (TPD)

### Stand-Alone Total and Permanent Disability (TPD) (APP Policy Document, page 7)

Clients can now purchase Stand-Alone Total and Permanent Disability Benefit. That is, it is no longer compulsory for a Life Plan Sum Insured to be purchased in order to purchase the TPD benefit.

If a Life Plan Sum Insured has been selected, any claim paid under the Stand-Alone TPD Benefit will not reduce the Life Plan Sum Insured.

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#### In summary:

- Maximum sum insured is \$2.5M across all TPD cover (Stand-Alone and Rider)
- Maximum Entry Ages:
  - Stepped Premiums; Age 16 – 60 Next Birthday
  - Level Premiums; Age 16 – 55 Next Birthday
- Expiry Age: 65
- Any Occupation or Own Occupation definition available
- This benefit is not available under the Accelerated Protection Policy (Super).

### Advancement Benefit (APP Policy Document, page 10)

An Advancement Benefit is now available in the Total and Permanent Disability Benefit. This benefit will pay 25% of the TPD sum insured, to a maximum of \$500,000, upon the Loss of a Single Limb, or the Loss of Sight in an Eye. This does not apply under the Accelerated Protection Policy (Super).

#### New

#### Additional to TPD Benefit Definition

Except where this benefit has been purchased through the Accelerated Protection Policy (Super) an advanced payment will be made under this Benefit when the Life Insured suffers the total and irrecoverable Loss of a Single Limb or the Loss of Sight in an Eye. The amount payable will be the lesser of 25% of the Total and Permanent Disability sum insured or \$500,000. This is payable only once and the Total and Permanent Disability Benefit sum insured will be reduced by the amount paid for the Loss of a Single Limb or the Loss of Sight in One eye. This advanced payment is payable only if the condition or the circumstances leading to the claim first occurs after the plan start date.

This section of the product is new, therefore there was no previous text.

### Long Term Care definition of TPD (APP Policy Document, page 7)

The 'Long Term Care Definition' of TPD, which applies when a life insured reaches age 65 has been improved to cover 'Loss of Limbs', 'Blindness' and 'Loss of Independent Existence'.

#### New

Where the 'Long Term Care' definition applies 'Total and Permanent Disability' and 'Totally and Permanently Disabled' means that we are satisfied that the Life Insured suffers:

- Loss of Limbs, or
- Total Blindness, or
- Loss of Independent Existence.

#### Previously

Where the 'Long Term Care' definition applies 'Total and Permanent Disability' and 'Totally and Permanently Disabled' means that we are satisfied that the Life Insured has become so disabled by bodily Sickness or Injury that he or she is unlikely ever to be able to perform at least two of the following five numbered Activities of Daily Living, without the physical assistance of another person:

1. Bathing – the ability to shower and bathe,
2. Dressing – the ability to put on and take off clothing,
3. Toileting – the ability to get on and off, and use the toilet,
4. Mobility – the ability to get in and out of bed and a chair, or
5. Feeding – the ability to get food from a plate into the mouth.

# ACCELERATED PROTECTION POLICY (APP)

## TOTAL AND PERMANENT DISABILITY (TPD) cont.

### Loss of Independent Existence (APP Policy Document, page 25)

'Significant Cognitive Impairment' has been added as a qualifying condition to the definition of 'Loss of Independent Existence'.

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#### New

**Loss of Independent Existence** means Significant Cognitive Impairment or a condition as a result of a Sickness or Injury whereby the Life Insured is totally and irreversibly unable to perform at least two of the Activities of Daily Living.

#### Previously

Loss of Independent Existence means a condition as a result of a Sickness or Injury whereby the Life Insured is totally and irreversibly unable to perform at least two of the Activities of Daily Living.

**CRITICAL ILLNESS**

**Stand-Alone Critical Illness**

Clients can now purchase Stand-Alone Critical Illness. That is, it is no longer compulsory for a Life Plan Sum Insured to be purchased in order to receive the Critical Illness benefit.

If a Life Plan Sum Insured has been selected, any claim paid under the Stand-Alone Critical Illness Benefit will not reduce the Life Plan Sum Insured.

In summary:

- Maximum Sum Insured is \$1.5M across all CI covers (Stand-Alone and Rider)
- Maximum Entry Ages:
  - Stepped Premiums; Age 16 – 60 Next Birthday
  - Level Premiums; Age 16 – 55 Next Birthday
- Expiry Age: 70
- The Death Buy Back benefit does not apply
- A 14 day survival period applies
- This benefit is not available under the Accelerated Protection Policy (Super)
- Critical Illness Buyback option available.

**Angioplasty (APP Policy Document, page 9)**

We have increased the maximum amount payable under the Angioplasty benefit to \$50,000.

**New**

Payment for **Angioplasty** is limited to 25% of the sum insured, subject to a minimum of \$10,000 and a maximum of **\$50,000** (The Critical Illness Benefit sum insured is then reduced by the amount paid and the premium is reduced accordingly).

**Previously**

Payment for Angioplasty is limited to 10% of the sum insured, subject to a minimum of \$10,000 and a maximum of \$25,000 (The Critical Illness Benefit sum insured is then reduced by the amount paid and the premium is reduced accordingly).

**Meningococcal Disease (APP Policy Document, page 26)**

We have added Meningococcal Disease to the Critical Illness events covered.

**New**

**Meningococcal Disease** means the unequivocal diagnosis of meningococcal septicaemia resulting in at least a permanent 25% impairment of Whole Person Function or the life insured being totally and permanently unable to perform any one of the Activities of Daily Living.

This section of the product is new, therefore there was no previous text.

**Pneumonectomy (APP Policy Document, page 27)**

We have added Pneumonectomy to the Critical Illness events covered.

**New**

**Pneumonectomy** means the undergoing of surgery to remove an entire lung. This treatment must be deemed the most appropriate treatment and medically necessary.

This section of the product is new, therefore there was no previous text.

# ACCELERATED PROTECTION POLICY (APP)

**CRITICAL ILLNESS cont.**

**Chronic Lung Failure** (APP Policy Document, page 25)

We have enhanced this definition of Chronic Lung Failure to remove reference to the FEV1 test result of one litre.

**New**

**Chronic Lung Failure** means end stage lung disease with consistent pulmonary function test result on FEV1 less than 40% predicted and requiring permanent oxygen therapy. The diagnosis must be confirmed by an appropriate Specialist Medical Practitioner.

**Previously**

Chronic Lung Failure means end stage respiratory failure permanently requiring continuous oxygen therapy and with FEV1 test results of consistently less than one litre.

**Loss of Independent Existence** (APP Policy Document, page 25)

'Significant Cognitive Impairment' has been added as a qualifying condition to the definition of 'Loss of Independent Existence'.

**New**

**Loss of Independent Existence** means Significant Cognitive Impairment or a condition as a result of a Sickness or Injury whereby the Life Insured is totally and irreversibly unable to perform at least two of the Activities of Daily Living.

**Previously**

Loss of Independent Existence means a condition as a result of a Sickness or Injury whereby the Life Insured is totally and irreversibly unable to perform at least two of the Activities of Daily Living.

**INCOME PLAN**

**Partial Disability definition** (APP Policy Document, page 23)

The definition of Partial Disability has been improved with a new three tier definition.

**New**

Partial Disability and Partially Disabled mean that, solely because of a Sickness or Injury the Life Insured:

- is working in his or her Own Occupation or any Gainful Occupation but in a reduced capacity, and
- is following the advice of a Medical Practitioner, and
- has suffered a reduction of 20% or more, in the ability to:
  - generate Monthly Earnings; or
  - perform the income producing duties; or
  - maintain the same number of hours worked, in the Life Insured’s Own Occupation.

**Previously**

Partial Disability and Partially Disabled mean that, solely because of a Sickness or Injury the Life Insured:

- is working or is capable of working,
- is following the advice of a Medical Practitioner, and
- is:
  - unable to perform one or more of the important income producing duties in his or her Own Occupation, or
  - working in his or her Own Occupation or any Gainful Occupation for more than 10 hours per week, or
  - unable to generate at least 20% of his or her Monthly Earnings from personal exertion in his or her Own Occupation.

**Death Benefit** (APP Policy Document, page 14)

The existing Death Benefit available under Income Plan Comprehensive is now also available under Income Plan Standard.

**New**

**Death Benefit**

We will pay the Death Benefit if the Life Insured dies whilst the Income Plan remains in force.

The amount we pay under the Death Benefit is six times the Monthly Benefit.

If the Life Insured and you are the same person, we will pay the Death Benefit to your legal personal representative or a person we are permitted to pay under the Life Insurance Act.

This section of the product is new, therefore there was no previous text.

# ACCELERATED PROTECTION POLICY (APP)

## INCOME PLAN cont.

### Waiting Period (APP Policy Document, page 24)

The life insured will be permitted to return to work for up to five consecutive days during the Waiting Period, without restarting the Waiting Period.

### New

**Waiting Period** is stated on the Policy Schedule and means the period of time between the Life Insured suffering disability and disability benefits starting to accrue. If the Life Insured does not consult a Medical Practitioner concerning the Sickness or Injury causing disability within seven days of the Sickness starting, or the Injury occurring, the Waiting Period will start when the Life Insured consults a Medical Practitioner.

If the Life Insured returns to a full time Gainful Occupation during the Waiting Period for five consecutive days or less, the number of days that the Life Insured was working will be added to the Waiting Period remaining.

If the Life Insured returns to a full time Gainful Occupation during the Waiting Period for more than five consecutive days, the Waiting Period will recommence from the day after the last day the Life Insured was last working.

Neither Total nor Partial Disability Benefits are paid during the Waiting Period. Some benefits are paid during the Waiting Period (eg. Bed Confinement) and this is specifically mentioned within the description of those benefits.

### Previously

Waiting Period means the period of time between the life insured suffering disability and disability benefits starting to accrue. If the life insured does not consult a Medical Practitioner concerning the Sickness or Injury causing disability within seven days of the Sickness starting, or the Injury occurring, the Waiting Period will start when the life insured consults a Medical Practitioner.

Neither Total nor Partial Disability Benefits are paid during the Waiting Period. Some benefits are paid during the Waiting Period (eg Bed Confinement) and this is specifically mentioned within the description of those benefits.

## TOWER SUPERANNUATION FUND

### Income Protection

Income Plan – Standard can now be issued under the TOWER Superannuation Fund through the Accelerated Protection Policy (Super), with the following modifications:

- the Recovery Support Benefit does not apply
- the Scheduled Injury Benefit does not apply
- Sick Leave and Workers' Compensation Offsets apply to all occupation classes
- The following options are not available:
  - Income Plan Comprehensive
  - Retirement Protection Option
  - Critical Illness Benefit.

### Own–Occupation TPD

Members will be permitted to select an 'Own Occupation' definition of Total and Permanent Disability through the Accelerated Protection Policy (Super).

**RATES AND PRICING**

**Level Premiums**

Level premiums will be introduced for all Accelerate Protection Policy benefits, with the following rules:

- Maximum Entry age is 55 Next Birthday for all benefits
- Minimum entry ages are as per Stepped premiums.

**Over 45s Rate Changes**

Based on positive feedback from financial advisers regarding the Accelerate product and the Accelerated Underwriting Process, this product is now attractively priced for all clients, not just those under age 45. There are reduced rates for clients over age 45 for lump sum benefits (average 4% for Death, 6% for TPD and 9% critical illness in the 45–55 age group).

The following tables show the approximate percentage drop in rates.

**Term Insurance**

ANB	Male NS	Male S	Female NS	Female S
46	2%	6%	1%	5%
47	2%	8%	2%	4%
48	2%	7%	4%	2%
49	2%	8%	2%	3%
50	1%	6%	1%	2%
51	5%	9%	7%	5%
52	5%	7%	6%	2%
53	4%	8%	5%	2%
54	5%	6%	4%	1%
55	5%	7%	4%	2%
56	7%	7%	4%	4%
57	7%	7%	4%	5%
58	7%	6%	6%	6%
59	7%	6%	8%	7%
60	5%	6%	8%	7%

**TPD Insurance**

ANB	Male NS	Male S	Female NS	Female S
46	5%	5%	18%	5%
47	5%	5%	17%	3%
48	5%	8%	9%	5%
49	7%	5%	7%	3%
50	9%	7%	9%	3%
51	5%	7%	6%	3%
52	5%	7%	5%	5%
53	5%	7%	5%	2%
54	5%	9%	6%	2%
55	5%	9%	5%	2%
56	5%	7%	7%	2%
57	3%	5%	5%	1%
58	2%	5%	5%	1%
59	9%	14%	7%	1%
60	11%	13%	7%	1%

**Critical Illness Insurance**

ANB	Male NS	Male S	Female NS	Female S
46	2%	9%	7%	11%
47	2%	11%	9%	11%
48	2%	11%	9%	11%
49	2%	11%	9%	13%
50	0%	13%	11%	16%
51	0%	15%	13%	16%
52	0%	13%	11%	13%
53	0%	11%	13%	13%
54	0%	11%	13%	13%
55	0%	15%	14%	17%
56	2%	13%	17%	17%
57	2%	15%	19%	18%
58	2%	15%	19%	22%
59	2%	15%	21%	24%
60	2%	13%	21%	24%

**IP Accident Benefit Option**

The pricing for the IP Accident Benefit Option will be reduced by up to 50%.

# TOWER PROTECTION PLAN (TPP)

## LIFE PROTECTION PLAN

### Financial Planning Benefit (TPP PDS, page 29)

The Standard Benefits now include a Financial Planning Benefit.

#### New

#### Financial Planning Benefit

If we pay 100% of the Death Benefit, Total and Permanent Disability Benefit or the Terminal Illness Benefit we will also reimburse the costs associated with preparation of a financial plan by a financial adviser for the person to whom we paid 100% of the Death Benefit, Total and Permanent Disability Benefit or Terminal Illness Benefit.

The following conditions apply to the Financial Planning Benefit:

- The maximum total amount we pay under the Financial Planning Benefit is \$1,000.
- The Financial Planning Benefit is only payable for the reimbursement of fees actually paid to a financial adviser for the preparation of a financial plan where the fees were paid by the person(s) to whom we paid 100% of the Death Benefit, Total and Permanent Disability Benefit or Terminal Illness Benefit (we will not pay any commission payable to the financial adviser as a result of decisions to implement recommendations made in the financial plan).
- We must receive evidence, which is acceptable to us, of the financial planning advice received before the Financial Planning Benefit is payable and the financial plan must be received by the client within 12 months of the payment of 100% of the Death Benefit, Total and Permanent Disability Benefit or Terminal Illness Benefit.
- The Financial Planning Benefit will only be paid once per life insured across all policies issued by us in respect of that life insured. The financial adviser who provides the financial plan must be an Australian Financial Services Licensee or an Authorised Representative of an Australian Financial Services Licensee.

This section of the product is new, therefore there was no previous text.

**Accommodation Benefit (TPP PDS, page 29)**

The Standard Benefits now include an Accommodation Benefit.

**New****Accommodation Benefit**

If we pay 100% of the Terminal Illness Benefit or Total and Permanent Disability Benefit for a life insured, and a Medical Practitioner certifies that the life insured must remain confined to bed due to the reason for which we paid 100% of the Terminal Illness Benefit or Total and Permanent Disability Benefit, and:

- the life insured is more than 100 kilometres from their home and an Immediate Family Member is required to travel from their home to be with the life insured; or
- an Immediate Family Member is required to travel more than 100 kilometres from their home to be with the life insured.

We will reimburse the accommodation costs of the life insured's Immediate Family Member up to a maximum of \$150 per day for each day that the life insured remains confined to bed and their Immediate Family Member remains away from their home, for a maximum of 14 days.

The reimbursement of accommodation costs must be claimed within six weeks of 100% of the Terminal Illness Benefit or Total and Permanent Disability Benefit being paid. We must receive evidence which is acceptable to us of the life insured's confinement to bed and of the payment of the accommodation costs.

This section of the product is new, therefore there was no previous text.

# TOWER PROTECTION PLAN (TPP)

## CRISIS PROTECTION PLAN

### Financial Planning Benefit (TPP PDS, page 38)

The Standard Benefits now include the Financial Planning Benefit.

#### New

#### Financial Planning Benefit

If we pay 100% of the Crisis Benefit or Total and Permanent Disability Benefit we will also reimburse the costs associated with preparation of a financial plan by a financial adviser for the person to whom we paid 100% of the Crisis Benefit or Total and Permanent Disability Benefit.

The following conditions apply to the Financial Planning Benefit:

- The maximum total amount we pay under the Financial Planning Benefit is \$1,000.
- The Financial Planning Benefit is only payable for the reimbursement of fees actually paid to a financial adviser for the preparation of a financial plan where the fees were paid by the person(s) to whom we paid 100% of the Crisis Benefit or Total and Permanent Disability Benefit (we will not pay any commissions payable to the financial adviser as a result of decisions to implement recommendations made in the financial plan).
- We must receive evidence, which is acceptable to us, of the financial planning advice received before the Financial Planning Benefit is payable and the financial plan must be received by the client within 12 months of the payment of 100% of the Crisis Benefit or Total and Permanent Disability Benefit.
- The Financial Planning Benefit will only be paid once per life insured across all policies issued by us in respect of that life insured. The financial adviser who provides the financial plan must be an Australian Financial Services Licensee or an Authorised Representative of an Australian Financial Services Licensee.

This section of the product is new, therefore there was no previous text.

**Accommodation Benefit (TPP PDS, page 38)**

The Standard Benefits now include the Accommodation Benefit.

**New****Accommodation Benefit**

If we pay the full Benefit Amount for a life insured, and a Medical Practitioner certifies that the life insured must remain confined to bed due to the Crisis Event for which we paid the Crisis Protection Plan Benefit and:

- the life insured is more than 100 kilometres from their home and an immediate family member is required to travel from their home to be with the life insured; or
- an immediate family member is required to travel more than 100 kilometres from their home to be with the life insured.

We will reimburse the accommodation costs of the life insured's immediate family member up to a maximum of \$150 per day for each day while the life insured remains confined to bed and their immediate family member remains away from their home, for a maximum of 14 days.

The reimbursement of accommodation costs must be claimed within six weeks of the Crisis Protection Plan Benefit being paid. We must receive evidence which is acceptable to us of the life insured's confinement to bed and of the payment of the accommodation costs.

This section of the product is new, therefore there was no previous text.

# TOWER PROTECTION PLAN (TPP)

## CRISIS PROTECTION PLAN cont.

### Partial benefits for Loss of Hearing in one ear, Loss of Sight in one eye or Loss of a Single Limb (TPP PDS, page 37)

The Advancement Benefit now pays a partial benefit to cover the Loss of Hearing in one ear or the Loss of Sight in one eye or the Loss of a Single Limb.

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#### New

##### Advancement Benefit

The Advancement Benefit will be paid under this Benefit when the life insured suffers from the:

- Loss of Hearing in one ear; or
- Loss of Sight in one eye; or
- Loss of a Single Limb.

The amount to be paid will be 10% of the Benefit Amount to a maximum of \$50,000. This is payable only once for each of these events. The total Benefit Amount will be reduced by the amount paid for each of these events. The Advancement Benefit will only be paid if the condition or the circumstances leading to the claim first occurs after the Plan start date.

#### Previously

##### Advancement Benefit

The Advancement Benefit will be paid when the life insured is diagnosed by a Medical Practitioner as suffering from:

- motor neurone disease;
- multiple sclerosis;
- muscular dystrophy;
- Parkinson’s disease; or
- primary pulmonary hypertension.

For the purposes of the Advancement Benefit only, these conditions have their normal medical meaning rather than the meaning defined in the Crisis Event definitions referred to at page 43 of the Plan Conditions.

The Advancement Benefit will also be paid if the life insured has been placed on a waiting list to receive a major organ transplant and that procedure is unrelated to any previous procedure or surgery undergone by the life insured.

The amount to be paid will be 25% of the Benefit Amount, to a maximum payment of \$25,000. Only one Advancement Benefit will be paid in respect of the life insured. The Crisis Protection Plan Benefit Amount will be reduced by the Advancement Benefit paid.

### Loss of Hearing in one ear definition (TPP PDS, page 46)

#### New

**Loss of Hearing** in one ear means the total and irrecoverable loss of hearing in one ear, both natural and assisted, as a result of Sickness or Injury.

This section of the product is new, therefore there was no previous text.

### Loss of a Single Limb definition (TPP PDS, page 46)

#### New

**Loss of a Single Limb** means the total and irrecoverable loss of use of one Limb.

This section of the product is new, therefore there was no previous text.

**Angioplasty (TPP PDS, pages 36, 44 and 47)**

We have increased the maximum amount payable under the Angioplasty benefit up to \$50,000.

**New**

**Angioplasty** means the actual undergoing of Coronary Artery Angioplasty to correct a narrowing or blockage of one or more coronary arteries.

Triple Vessel Angioplasty means the actual undergoing for the first time of coronary artery Angioplasty to correct a narrowing or blockage of three or more coronary arteries within the same procedure.

In the case of Angioplasty, the amount to be paid is reduced to 25% of the Benefit Amount to a maximum payment of **\$50,000** per occurrence, unless a benefit is payable under Triple Vessel Angioplasty.

**Previously**

Angioplasty means the actual undergoing of Coronary Artery Angioplasty to correct a narrowing or blockage of one or more coronary arteries.

Triple Vessel Angioplasty means the actual undergoing for the first time of coronary artery Angioplasty to correct a narrowing or blockage of three or more coronary arteries within the same procedure.

In the case of Angioplasty, the amount to be paid is reduced to 25% of the Benefit Amount to a maximum payment of \$25,000 per occurrence, unless a benefit is payable under Triple Vessel Angioplasty.

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**Dementia and Alzheimer’s definition (TPP PDS, page 36)**

A partial benefit has been introduced for Dementia and Alzheimer’s disease.

**New**

If the life insured is unequivocally diagnosed with Alzheimer's disease or other dementia, as confirmed by a specialist Medical Practitioner, and if the meaning defined on page 45 of the Plan Conditions is not met, we will pay a partial benefit of 25% of the Benefit Amount to a maximum payment of \$50,000.

This section of the product is new, therefore there was no previous text.

**Intensive Care definition (TPP PDS, page 45)**

Intensive Care has been added as a crisis event.

**New**

**Intensive Care** means that a Sickness or Injury has resulted in the life insured requiring continuous mechanical ventilation by means of tracheal intubation for 10 consecutive days (24 hours per day) in an authorised intensive care unit of an acute care hospital. No amount will be paid where Intensive Care of the life insured results from the consumption of alcohol or the use of non-prescribed drugs.

This section of the product is new, therefore there was no previous text.

# TOWER PROTECTION PLAN (TPP)

## CRISIS PROTECTION PLAN cont.

### Crisis Benefit (TPP PDS, page 36)

The revised Crisis Benefit wording shown below includes the partial benefit for Dementia and Alzheimer's disease and the amended definitions of Intensive Care and Angioplasty.

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#### New

##### Crisis Benefit

When the life insured suffers a Crisis Event, the Benefit Amount will be paid. If the stand-alone Crisis Protection Plan has been selected, no payments will be made unless the life insured survives a Crisis Event for at least 14 days.

In the case of Angioplasty, the amount to be paid is reduced to 25% of the Benefit Amount to a maximum payment of **\$50,000** per occurrence, unless a benefit is payable under Triple Vessel Angioplasty.

If the life insured suffers more than one Crisis Event, the Benefit Amount is only payable for the first occurring Crisis Event (unless the first to occur is Angioplasty). If Angioplasty is the first Crisis Event to occur, the remaining Benefit Amount will be the basis used to determine payment in accordance with the Plan terms and conditions when the life insured suffers another Crisis Event.

More than one payment can be made for Angioplasty, subject to:

- the first Angioplasty procedure ever undergone by the life insured occurring after the commencement of the Plan;
- each subsequent Angioplasty procedure occurring at least six months after the previous Angioplasty procedure; and
- a maximum of three payments.

**If the life insured is unequivocally diagnosed with Alzheimer's disease or other dementia, as confirmed by a specialist Medical Practitioner, and if the meaning defined on page 45 of the Plan Conditions is not met, we will pay a partial benefit of 25% of the Benefit Amount to a maximum payment of \$50,000.**

If the Death and Terminal Illness Benefits are taken with the Crisis Benefit, any Crisis Benefit payment will reduce the Death and Terminal Illness Benefits by the amount paid.

If a stand-alone Crisis Protection Plan is linked to a Life Protection Plan, any Crisis Benefit payment will reduce the Life Protection Plan Benefit Amount by the amount paid.

#### Previously

##### Crisis Benefit

When the life insured suffers a Crisis Event, the Benefit Amount will be paid. If the stand-alone Crisis Protection Plan has been selected, no payments will be made unless the life insured survives a Crisis Event for at least 14 days.

In the case of Angioplasty, the amount to be paid is reduced to 25% of the Benefit Amount to a maximum payment of \$25,000 per occurrence, unless a benefit is payable under Triple Vessel Angioplasty.

If the life insured suffers more than one Crisis Event, the Benefit Amount is only payable for the first occurring Crisis Event (unless the first to occur is Angioplasty). If Angioplasty is the first Crisis Event to occur, the remaining Benefit Amount will be the basis used to determine payment in accordance with the Plan terms and conditions when the life insured suffers another Crisis Event.

More than one payment can be made for Angioplasty, subject to:

- the first Angioplasty procedure ever undergone by the life insured occurring after the commencement of the Plan;
- each subsequent Angioplasty procedure occurring at least six months after the previous Angioplasty procedure; and
- a maximum of three payments.

If the Death and Terminal Illness Benefits are taken with the Crisis Benefit, any Crisis Benefit payment will reduce the Death and Terminal Illness Benefits by the amount paid.

If a stand-alone Crisis Protection Plan is linked to a Life Protection Plan, any Crisis Benefit payment will reduce the Life Protection Plan Benefit Amount by the amount paid.

**New (continued)**

Crisis Events are:

- Heart conditions
  - Angioplasty\*
  - Aortic Surgery
  - Cardiomyopathy
  - Coronary Artery Bypass Surgery\*
  - Heart Attack\*
  - Heart Valve Surgery\*
  - Primary Pulmonary Hypertension
  - Triple Vessel Angioplasty\*
- Neurological conditions
  - Dementia
  - Encephalitis and Meningitis
  - Meningococcal Disease
  - Motor Neurone Disease
  - Multiple Sclerosis
  - Muscular Dystrophy
  - Paralysis
  - Parkinson's Disease
  - Stroke\*
- Blood disorders
  - Aplastic Anaemia
  - Medically Acquired HIV
  - Occupationally Acquired HIV
- Cancer
  - Cancer\*
  - Benign Brain Tumour
- Permanent conditions
  - Loss of Independent Existence
  - Loss of Limbs
  - Loss of Limbs and Sight
- Organ disorders
  - Blindness
  - Chronic Kidney Failure
  - Chronic Liver Failure
  - Chronic Lung Failure
  - Coma
  - Loss of Hearing
  - Loss of Speech
  - Major Head Trauma
  - Major Organ Transplant
  - Pneumonectomy
  - Severe Burns
- **Other events**
  - **Intensive Care**

\* In the case of these events, no benefit would be paid under the Plan if the condition occurred or was diagnosed, or the circumstances leading to diagnosis became apparent, within three months after:

- the Plan start date;
- the date of an applied for increase but only in respect of the increase; or
- the most recent date that we have agreed to reinstate either the Plan or Policy.

The Crisis Event definitions are referred to at page 44 of the Plan Conditions.

**Previously (continued)**

Crisis Events are:

- Heart conditions
  - Angioplasty\*
  - Aortic Surgery
  - Cardiomyopathy
  - Coronary Artery Bypass Surgery\*
  - Heart Attack\*
  - Heart Valve Surgery\*
  - Primary Pulmonary Hypertension
  - Triple Vessel Angioplasty\*
- Neurological conditions
  - Dementia
  - Encephalitis and Meningitis
  - Meningococcal Disease
  - Motor Neurone Disease
  - Multiple Sclerosis
  - Muscular Dystrophy
  - Paralysis
  - Parkinson's Disease
  - Stroke\*
- Blood disorders
  - Aplastic Anaemia
  - Medically Acquired HIV
  - Occupationally Acquired HIV
- Cancer
  - Cancer\*
  - Benign Brain Tumour
- Permanent conditions
  - Loss of Independent Existence
  - Loss of Limbs
  - Loss of Limbs and Sight
- Organ disorders
  - Blindness
  - Chronic Kidney Failure
  - Chronic Liver Failure
  - Chronic Lung Failure
  - Coma
  - Loss of Hearing
  - Loss of Speech
  - Major Head Trauma
  - Major Organ Transplant
  - Pneumonectomy
  - Severe Burns

\* In the case of these events, no benefit would be paid under the Plan if the condition occurred or was diagnosed, or the circumstances leading to diagnosis became apparent, within three months after:

- the Plan start date;
- the date of an applied for increase but only in respect of the increase; or
- the most recent date that we have agreed to reinstate either the Plan or Policy.

The Crisis Event definitions are referred to at page 43 of the Plan Conditions.

# TOWER PROTECTION PLAN (TPP)

## CRISIS PROTECTION PLAN cont.

### Major Organ Transplant definition (TPP PDS, page 46)

The definition of Major Organ Transplant has been improved allowing the full benefit to be paid on diagnosis.

#### New

**Major Organ Transplant** means either the undergoing of, or upon the advice of a Specialist Medical Practitioner the placement on a waiting list of a Transplantation Society of Australia and New Zealand recognised transplant unit for, the human to human transplant from a donor to the life insured of bone marrow or one of the following organs, or a permanent mechanical replacement of one of the following organs:

- kidney;
- heart;
- lung;
- liver;
- pancreas; or
- small bowel.

The transplant of all other organs, parts of organs or any other tissue transplant is excluded.

#### Previously

Major Organ Transplant means the human to human transplant from a donor to the life insured of bone marrow or one of the following organs, or a permanent mechanical replacement of one of the following organs:

- kidney;
- heart;
- lung;
- liver;
- pancreas; or
- small bowel.

The transplant of all other organs, parts of organs or any other tissue transplant is excluded.

### Motor Neurone Disease definition (TPP PDS, page 46)

The definition of Motor Neurone Disease has been improved allowing the full benefit to be paid on diagnosis.

#### New

**Motor Neurone Disease** means the unequivocal diagnosis of a progressive form of debilitating Motor Neurone Disease.

#### Previously

Motor Neurone Disease means the unequivocal diagnosis of Motor Neurone Disease, with persistent neurological deficit resulting in at least a permanent 25% impairment of Whole Person Function or the life insured being totally and permanently unable to perform any one the Activities of Daily Living.

### Multiple Sclerosis definition (TPP PDS, page 46)

The definition of Multiple Sclerosis has been improved allowing a lump sum benefit to be paid on diagnosis.

#### New

**Multiple Sclerosis** means a disease characterised by demyelination in the brain and/or spinal cord. Multiple Sclerosis must be unequivocally diagnosed. There must be more than one episode of well-defined neurological deficit with persisting neurological abnormalities. Neurological investigations such as lumbar puncture, MRI (Magnetic Resonance Imaging) evidence of lesions in the central nervous system, evoked visual responses, and evoked auditory responses are required to confirm diagnosis.

#### Previously

Multiple Sclerosis means the unequivocal diagnosis of Multiple Sclerosis, where the condition is characterised by the demyelination in the brain and/or spinal cord resulting in neurological deficit and at least a permanent 25% impairment of Whole Person Function or the life insured being totally and permanently unable to perform any one the Activities of Daily Living.

### Muscular Dystrophy definition (TPP PDS, page 46)

The definition of Muscular Dystrophy has been improved allowing the full benefit to be paid on diagnosis.

#### New

**Muscular Dystrophy** means the unequivocal diagnosis of muscular dystrophy.

#### Previously

Muscular Dystrophy means the unequivocal diagnosis of Muscular Dystrophy with Significant persistent neurological deficit resulting in at least a permanent 25% impairment of Whole Person Function or the life insured being totally and permanently unable to perform any of the Activities of Daily Living.

**Parkinson's Disease definition (TPP PDS, page 47)**

The definition of Parkinson's Disease has been improved allowing the full benefit to be paid on diagnosis.

**New**

**Parkinson's Disease** means the unequivocal diagnosis of degenerative idiopathic Parkinson's Disease as characterised by the clinical manifestation of one or more of the following: rigidity, tremor, akinesia, resulting in the degeneration of the nigrostriatal system. All other types of Parkinsonism are excluded (eg. secondary to medication).

**Previously**

Parkinson's Disease means the unequivocal diagnosis of Parkinson's Disease where the condition cannot be controlled with treatment and the person shows signs of progressive incapacity with at least a permanent 25% impairment of Whole Person Function or the life insured being totally and permanently unable to perform any one of the Activities of Daily Living.

**Primary Pulmonary Hypertension definition (TPP PDS, page 47)**

The definition of Primary Pulmonary Hypertension has been improved allowing the full benefit to be paid on diagnosis. The previous requirement for permanent physical impairment has been removed.

**New**

**Primary Pulmonary Hypertension** means the unequivocal diagnosis of Primary Pulmonary Hypertension with right ventricular enlargement established by investigations including cardiac catheterisation.

**Previously**

Primary Pulmonary Hypertension means the life insured has Primary Pulmonary Hypertension with substantial right ventricular enlargement established by investigations including cardiac catheterisation, resulting in permanent irreversible physical impairment to the degree of at least Class 3 of the New York Heart Association Classification of Cardiac Impairment.

**Severe Burns definition (TPP PDS, page 47)**

The Severe Burns definition now provides cover when third degree burns occur to at least 50% of face or hands (rather than 100%).

**New**

**Severe Burns** means tissue injury caused by thermal, electrical or chemical agents causing third degree or full thickness burns to:

- at least 20% of the body surface area as measured by the Lund and Browder Body Surface Chart, or
- at least 50% of both hands, requiring surgical debridement and/or grafting, or
- at least 50% of the face, requiring surgical debridement and/or grafting.

**Previously**

Severe Burns means tissue injury caused by thermal, electrical or chemical agents causing third degree or full thickness burns to:

- at least 20% of the body surface area as measured by the Lund and Browder Body Surface Chart; or
- the whole of both hands, requiring surgical debridement and/or grafting; or
- the whole of the face, requiring surgical debridement and/or grafting.

**Chronic Lung Failure definition (TPP PDS, page 45)**

We have enhanced this definition to remove reference to the FEV1 test result of one litre.

**New**

**Chronic Lung Failure** means end stage lung disease with a consistent pulmonary function test result of FEV1 less than 40% predicted and requiring permanent oxygen therapy.

**Previously**

Chronic Lung Failure means end stage respiratory failure permanently requiring continuous oxygen therapy and with FEV1 test results of consistently less than one litre.

# TOWER PROTECTION PLAN (TPP)

## CRISIS PROTECTION PLAN cont.

### Multi-Benefit Discount

A discount will apply to the Crisis Protection Plan (CPP) premium only when a Life Protection Plan (LPP) or Stand-Alone Total and Permanent Disability (SATPD) benefit is purchased. When purchased with the Income Protection Plan, a 7.5% Multi-Benefit Discount will apply to the Crisis Protection Plan premium only.

The enhanced Multi-Benefit Discount is:

CPP linked and CPP Stand-Alone sold with LPP or SATPD eg LPP with linked CPP or SATPD with linked CPP.

	Crisis Protection Plan Discount (From)	Crisis Protection Plan Discount (To)
LPP or SATPD Sum Insured (\$)		
0 to \$249,999	Nil	Nil
\$250,000 to \$999,999	7.5%	15%
> or equal to \$1,000,000	15%	15%

Multi-Benefit Discount rules for CPP with death remain unchanged. Crisis Protection Plan with Death sold with LPP or SATPD, there is no change to current arrangements:

	Crisis Protection Plan Discount
LPP or Stand-Alone TPD Sum Insured (\$)	
0 to 249,999	Nil
250,000 to 999,999	7.5%
> or equal to 1,000,000	15%

There will be no change to premium rates except for the Multi-Benefit Discount which applies to linked policies.

Based on the Multi-Benefit Discount, changes will be made to commissions:

- Commission is paid as a percentage of premiums and we will be making small changes to the calculation of the premiums received by us by factoring the Multi-Benefit Discount into the calculation of premiums
- Commission is to be calculated on the 'net' premium after Multi-Benefit Discount has been deducted rather than the 'gross' premium. That is, we currently pay commission on the premium before the Multi-Benefit Discount is applied. This change will result in us paying commission on the premium after the Multi-Benefit Discount is applied, that is the 'net' premium.

**INCOME PROTECTION PLAN AND BUSINESS EXPENSE PLAN**

**Waiting Period definition (TPP PDS, page 61)**

The definition of the Waiting Period has been improved so that the client has the ability to return to work during the Waiting Period and still qualify for the benefits.

**New**

**Waiting Period** means the period of time between the life insured suffering disability and disability benefits starting to accrue.

If the life insured does not consult a Medical Practitioner concerning the Sickness or Injury causing disability within seven days of the Sickness starting, or the Injury occurring, the Waiting Period will start when the life insured consults a Medical Practitioner.

If the life insured returns to a full time Gainful Occupation during the Waiting Period for five consecutive days or less, the number of days that the life insured was gainfully employed will be added to the Waiting Period remaining.

If the life insured returns to a full time Gainful Occupation during the Waiting Period for more than five consecutive days, the Waiting Period will recommence from the day after the last day the life insured was gainfully employed.

Neither Total nor Partial Disability Benefits are paid during the Waiting Period. Some benefits are paid during the Waiting Period (eg. Bed Confinement) and this is specifically mentioned within the description of those benefits.

**Previously**

Waiting Period means the period of time between the life insured suffering disability and disability benefits starting to accrue. If the life insured does not consult a Medical Practitioner concerning the Sickness or Injury causing disability within seven days of the Sickness starting, or the Injury occurring, the Waiting Period will start when the life insured consults a Medical Practitioner.

Neither Total nor Partial Disability Benefits are paid during the Waiting Period. Some benefits are paid during the Waiting Period (eg. Bed Confinement) and this is specifically mentioned within the description of those benefits.

**Death Benefit (TPP PDS, page 50)**

The Death Benefit has been improved from three times to six times the monthly IP benefit payment.

**New**

If the life insured dies while receiving Total or Partial Disability benefits we will pay a lump sum equal to six times the monthly Benefit Amount, to a maximum \$60,000.

**Previously**

If the life insured dies while receiving Total or Partial Disability benefits we will pay a lump sum equal to three times the monthly Benefit Amount, to a maximum \$60,000.

# TOWER PROTECTION PLAN (TPP)

## INCOME PROTECTION PLAN AND BUSINESS EXPENSE PLAN cont.

### Scheduled Illness Option (TPP PDS, page 53)

The Scheduled Illness Option has been improved to pay a lump sum benefit equal to six times the monthly benefit, should the life insured suffer one of the listed Crisis Events.

#### New

When the life insured suffers a Crisis Event listed below, we will pay the Scheduled Illness Benefit.

The amount to be paid under the Scheduled Illness Benefit is six times the monthly Benefit Amount. The Scheduled Illness Benefit is paid as a lump sum in addition to any Total or Partial Disability entitlements.

We will only pay a benefit for one Scheduled Illness Option Crisis Event occurring in any six-month period. This period will be deemed to have commenced on the date of the first Crisis Event.

At the end of six months, eligibility for other benefits will be based on appropriate Plan Conditions being satisfied.

The Crisis Events covered are:

- Heart conditions
  - Aortic Surgery
  - Cardiomyopathy
  - Coronary Artery Bypass Surgery\*
  - Heart Attack\*
  - Heart Valve Surgery\*
  - Primary Pulmonary Hypertension
  - Triple Vessel Angioplasty\*
- Neurological conditions
  - Dementia
  - Encephalitis and Meningitis
  - Meningococcal Disease
  - Motor Neurone Disease
  - Multiple Sclerosis
  - Muscular Dystrophy
  - Paralysis
  - Parkinson's Disease
  - Stroke\*
- Blood disorders
  - Aplastic Anaemia
  - Medically Acquired HIV
  - Occupationally Acquired HIV
- Cancer
  - Cancer\*
  - Benign Brain Tumour
- Permanent conditions
  - Loss of Independent Existence

#### Previously

When the life insured suffers a Crisis Event listed below, Total Disability will be deemed to exist for six months. The Total Disability Benefit for the Income Protection Plan will be paid for six months, however the Waiting Period will not apply.

Should you be already receiving a Total or Partial Disability Benefit under the Income Protection Plan when the Crisis Event occurs, the total benefit payable will not exceed the Benefit Amount.

We will only pay a benefit for one Scheduled Illness Option Crisis Event occurring in any six-month period. This period will be deemed to have commenced on the date of the first Crisis Event.

Should you have the Retirement Protection and/or Disability Plus options, payment will be made if the Plan Conditions for these options are met. Payment will stop on the earliest of the following events:

- the expiry of six months;
- the end of the Benefit Period; or
- the Plan end date.

At the end of six months, eligibility for other benefits will be based on appropriate Plan Conditions being satisfied.

You have the choice of having the benefits paid as either:

- a lump sum payment in advance; or
- monthly in arrears.

If you have chosen to receive the benefits monthly (i.e. not as a lump sum) and the life insured dies before the end of six months, we will pay any remaining monthly benefits as a lump sum to their estate.

The Crisis Events covered are:

- Heart conditions
  - Aortic Surgery
  - Cardiomyopathy
  - Coronary Artery Bypass Surgery\*
  - Heart Attack\*
  - Heart Valve Surgery\*
  - Primary Pulmonary Hypertension
  - Triple Vessel Angioplasty\*

**New (continued)**

- Organ disorders
  - Chronic Kidney Failure
  - Chronic Liver Failure
  - Chronic Lung Failure
  - Coma
  - Loss of Hearing
  - Loss of Speech
  - Major Head Trauma
  - Major Organ Transplant
  - Pneumonectomy
  - Severe Burns

\* In the case of these events no benefit will be paid if the condition occurred or was diagnosed, or the circumstances leading to diagnosis became apparent, within three months after:

- the Plan start date;
- the date of an applied-for increase (but only in respect of the increase); or
- the most recent date that we have agreed to reinstate either the Plan or Policy.

These Crisis Events are defined on page 44.

We will only pay once for each Scheduled Illness Option Crisis Event condition under this benefit for the life of the Policy.

When the life insured is eligible for payment under the Scheduled Injury Benefit, Day One Accident Option and Scheduled Illness Option, the greater of these benefit payments will be paid.

The Scheduled Illness Option is only available for Waiting Periods up to and including 13 weeks.

**Previously (continued)**

- Neurological conditions
  - Dementia
  - Encephalitis and Meningitis
  - Meningococcal Disease
  - Motor Neurone Disease
  - Multiple Sclerosis
  - Muscular Dystrophy
  - Paralysis
  - Parkinson's Disease
  - Stroke\*
- Blood disorders
  - Aplastic Anaemia
  - Medically Acquired HIV
  - Occupationally Acquired HIV
- Cancer
  - Cancer\*
  - Benign Brain Tumour
- Permanent conditions
  - Loss of Independent Existence
- Organ disorders
  - Chronic Kidney Failure
  - Chronic Liver Failure
  - Chronic Lung Failure
  - Coma
  - Loss of Hearing
  - Loss of Speech
  - Major Head Trauma
  - Major Organ Transplant
  - Pneumonectomy
  - Severe Burns

\* In the case of these events no benefit will be paid if the condition occurred or was diagnosed, or the circumstances leading to diagnosis became apparent, within three months after:

- the Plan start date;
- the date of an applied-for increase (but only in respect of the increase); or
- the most recent date that we have agreed to reinstate either the Plan or Policy.

These Crisis Events are defined on page 45.

We will only pay once for each Scheduled Illness Option Crisis Event condition under this benefit for the life of the Policy.

When the life insured is eligible for payment under the Scheduled Injury Benefit, Day One Accident Option and Scheduled Illness Option, the greater of these benefit payments will be paid.

The Scheduled Illness Option is only available for Waiting Periods up to and including 13 weeks.

# TOWER PROTECTION PLAN (TPP)

## INCOME PROTECTION PLAN AND BUSINESS EXPENSE PLAN cont.

### Inflation Protection Benefit (TPP PDS, page 23)

For the Inflation Protection Benefit, we have removed the maximum indexation increases under IPP and BEP.

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#### New

##### Does the amount of cover increase with inflation?

Once your Policy is in place there is a built in Inflation Protection Benefit, designed to preserve the real value of your benefit. Each year your Benefit Amount is increased by the greater of the Consumer Price Index and three per cent. While the increase will occur automatically on each Policy anniversary (unless your premium is being waived under the Waiver of Premium benefit), you can choose not to have this apply to your Policy. All you have to do is let us know. The choice is up to you.

If your benefit increases it makes sense that a new premium is then calculated on the new Benefit Amount. When we do this we will take into account the life insured's age and premium type, just as we did when the Policy commenced. We will not however take into account any changes in the life insured's health, occupation or pastimes.

Increases under the Inflation Protection Benefit will cease on the earlier of the Policy anniversary prior to the life insured's 65th birthday or when you ask us not to increase the Benefit Amount.

If your Benefit Amount is not agreed value, in considering whether to accept an Inflation Protection increase to your Benefit Amount, you should keep in mind the formula explained above in "How much can I apply for?".

#### Previously

##### Does the amount of cover increase with inflation?

Once your Policy is in place there is a built in Inflation Protection Benefit, designed to preserve the real value of your benefit. Each year your Benefit Amount is increased by the greater of the Consumer Price Index and three per cent. While the increase will occur automatically on each Policy anniversary (unless your premium is being waived under the Waiver of Premium benefit), you can choose not to have this apply to your Policy. All you have to do is let us know. The choice is up to you.

If your benefit increases it makes sense that a new premium is then calculated on the new Benefit Amount. When we do this we will take into account the life insured's age and premium type, just as we did when the Policy commenced. We will not however take into account any changes in the life insured's health, occupation or pastimes.

While the Inflation Protection Benefit is there to ensure the value of the Plan keeps pace with inflation the overall benefit cannot be increased past a maximum amount. Under the Inflation Protection Benefit the maximum amount that your benefit can be increased is:

- \$30,000 a month for the Income Protection Plan;
- \$3,000 a month for the Retirement Protection Option;
- \$15,000 a month for the Disability Plus Option; and
- \$30,000 a month for the Business Expense Plan.

Increases under the Inflation Protection Benefit will cease on the earlier of the Policy anniversary prior to the life insured's 65th birthday or when you ask us not to increase the Benefit Amount.

If your Benefit Amount is not agreed value, in considering whether to accept an Inflation Protection increase to your Benefit Amount, you should keep in mind the formula explained above in "How much can I apply for?".

**Thank you for taking the time to assess the 2008  
TOWER Australia retail life insurance product range.**

Our APP and TPP offering for November 2008 has been designed to allow you to provide your clients with peace of mind. They will know that if they receive a TOWER product, it will be competitively priced, meet their needs, and be backed by quality service throughout the life of the policy and at claim time.

We believe that by offering you this package, you will be a greater success in today's increasingly competitive market. Being your partner is our business, we have listened to you and adjusted the APP and TPP range to better meet your business requirements.

We look forward to continuing our business relationship with you in the year ahead and, by working with you, achieve success for us both.

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Where a policy is structured through superannuation, in limited circumstances, benefits payable under the Policy could be withheld by the superannuation trustee due to superannuation laws or the governing rules of the superannuation fund.

