



Security Plus Premier

Product Disclosure Statement

This document contains important information about this product, including the policy wording. It is important that *you* read and understand it and retain it in a safe place.



How this insurance is arranged

This insurance is issued/insured by:

AIG Australia Limited (AIG)
ABN 93 004 727 753, AFSL 381686
Level 13, 717 Bourke Street, Docklands Vic 3008

AIG issues/insures this product pursuant to an Australian Financial Services Licence ('AFSL') granted to *us* by the Australian Securities and Investments Commission.

AIG prepared this **Product Disclosure Statement**.

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Date Prepared: 01 May 2022
AH 10/001.4

Product Disclosure Statement (PDS)

1. What is the Product Disclosure Statement?

This **Product Disclosure Statement ('PDS')** contains information about key benefits and significant features of this Security Plus Premier Insurance.

The purpose of the PDS is to assist *your* purchasing decision and ability to compare this product with other insurance. This document also contains important information about *your* rights and obligations including the Cooling Off Period and the Duty to Take Reasonable Care Not to Make a Misrepresentation.

The terms and conditions of *your* insurance are contained in the **Policy Wording**. Details about the product issuer can be found under the heading '**How this insurance is arranged**' on **page 2**.

2. Target Market Determinations (TMDs)

From 5 October 2021, AIG Australia Limited (AIG) is required to have Target Market Determinations for its retail client insurance products in accordance with the Treasury Laws Amendment (Design and Distribution Obligations and Product Intervention Powers) Act 2019.

What is a TMD?

A TMD is a document created by AIG which seeks to offer customers, distributors and staff with an understanding of the class of customers for which the product has been designed and sets out:

- who is in the target market and who the product is not designed for;
- any distribution conditions and restrictions for the product;
- review periods and events that may trigger a review of the TMD; and
- reporting obligations for AIG's distributors.

The TMD is not intended and should not be treated as a full summary of the product's terms and conditions and is not intended to provide financial advice. Customers must refer to the Product Disclosure Statement (PDS) and any supplementary disclosure documents for the terms and conditions of the product when making a decision to acquire the product.

TMD's for all AIG retail products are available on AIG's website – <https://www.aig.com.au/tmd>

AIG is committed to offering high quality insurance products to meet *our* customer needs and which offer real value. AIG achieve this by taking a consumer-centric approach when designing and distributing our products.

3. Key Benefits of Your Policy

You can select from four (4) levels of **compensation** for a specified range of Events, occurring as a result of an **injury**, including:

- Accidental loss of life;
- Fractured bones;
- **Permanent** or **total loss** of the use of various body parts;
- Cash benefit when confined as a **bedcare** patient for more than forty-eight (48) consecutive hours.

Dependent upon the Event, *we* also provide the following Additional Benefits:

- Home renovation costs as a result of covered Events 1-4;
- Vocational Training Benefit for *you* or a covered **spouse**, as applicable, as a result of covered Events 1, 2 or 7;
- Education Fee Assist – If the **Family plan** is selected and following the accidental loss of life (Event 7) of a **dependant child's** parent; or, if *you* have selected the You and Your Dependent Children **plan**, and *you* suffer an **injury** resulting in Event 7.

Benefits are payable regardless of any workers' **compensation**, Medicare, superannuation, private health insurance or third party insurance payouts that *you* may be entitled to.

Cover can be selected for:

- *You*;
- *You* and *your dependent children*;
- *You* and *your spouse*; or
- **Family plan**, being *you*, *your spouse* and *dependent children*.

Full details of the benefits and maximum **compensation** payable for each **level** of **cover** are contained in the **Policy Wording** under the **Schedule of Benefits**.

Cover is limited to the benefits as listed in the Schedule of Benefits and is subject always to the terms, Conditions, Special Provisions and Exclusions in the Policy Wording.

This policy does not provide benefits for loss of income.

4. Important Information

This policy is subject to terms, Conditions, Special Provisions, and Exclusions. It is important that **you** read the Policy Wording carefully to familiarise **yourself** with these provisions. Specifically, please take special note of the following matters.

- The **Policy Wording** contains a **Definitions** section on **pages 11-12**, **Special Provisions** section on **page 12**, **Schedule of Benefits** on **page 16** and **Conditions** that apply to this insurance on **pages 13-14**.

- There are some circumstances where **cover** cannot be provided. These are covered in the **Policy Wording**. Please take special note of the **Exclusions** applicable to all sections of the policy listed on **page 13** of the **Policy Wording**.

We especially draw **your** attention to Exclusion 9 on page 13 which excludes **cover** for any bone fracture suffered by an **insured person** who had been diagnosed as having osteoporosis prior to the **policy commencement date**. If an **insured person** is diagnosed as having osteoporosis after the **policy commencement date**, **we** will pay for the first bone fracture after osteoporosis is diagnosed or, where the diagnosis is made in the course of treatment of the bone fracture, **we** will pay the **compensation** for that bone fracture. No **compensation** will be payable for any subsequent bone fractures suffered by that **insured person**, howsoever caused.

- **Age limits** apply to this policy. To be eligible to apply for **cover** under this policy **you** and/or **your spouse**, as applicable, must not be less than eighteen (18) years of age or have attained the age of seventy five (75) years.

- We will decide whether to offer to renew this policy at each **renewal date**. Unless the policy has been cancelled or expired beforehand, We will not offer to renew this policy once **you** or **your spouse** attain the age of eighty nine (89) years.

Compensation for all existing **insured persons** will be reduced on the next **renewal date** when the eldest **insured person** reaches age seventy five (75), as set out in the Schedule of Benefits.

If **you** select the You and Your Dependent Children **plan** or the “Family” **plan**, then, once **you** or **your spouse**, as applicable, reaches seventy five (75) years of age, the **cover** will cease on the next **renewal date** following such person’s birthday. However, should **you** wish to continue being covered by this insurance, **you** are able to continue under a replacement You Only **plan** or a You and Your Spouse **plan**. Please note that these replacement **plans do not** provide any insurance cover for **dependent children**.

Full details of age limits and eligibility criteria can be found on **page 10** of the **Policy Wording**.

- This **PDS** and **Policy Wording** also contains important information about the rights and obligations of **insured persons** including information about Privacy, Duty to Take Reasonable Care Not to Make a Misrepresentation, and the General Insurance Code of Practice.

Words that are emphasised by the use of italics and bold have the meaning given to them in the **Definitions** section on **pages 11-12**.

5. Costs

Premiums calculated on a monthly basis and are payable monthly or annually as **you** choose. They will be set out in the application form or quoted to **you** online or over the telephone by the AIG representative, as applicable, and in **your policy schedule**. The **premium** varies depending on whom **you** choose to take out **cover** for and the **level of compensation** selected.

The **premium** for **insured persons** aged seventy five (75) years and over applies to existing **insured persons** only. **You** are not able to apply for **cover** for **you** and/or **your spouse** if either **you** and/or **your spouse** are aged seventy five (75) years or more.

THE PLANS	LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
You	\$8.45	\$16.10	\$21.20	\$25.45
You and Your Dependent Children	\$13.55	\$24.60	\$35.65	\$46.70
You and Your Spouse	\$15.25	\$29.70	\$38.20	\$45.85
Family - You, Your Spouse and Dependent Children	\$18.65	\$33.95	\$49.25	\$64.55

The age limits and eligibility for each **plan** are summarised in the section titled “**Important Information**” above and full details can be found on page 10 of the **Policy Wording**.

A portion of this **premium** covers the cost of Premier Rewards and is payable by AIG to the provider of Premier Rewards, The Rewards Factory Limited, the owner and operator of My Rewards.

The **premium** amount will also be shown on **your policy schedule** and includes government charges such as stamp duty and GST.

6. Premium Payments

Premium payments can be made annually or by way of a monthly debit from either **your** nominated financial institution account or credit card.

In the event that any monthly **premium** is not paid and **we** are not able to obtain the **premium**, for whatever reason, **we** will advise **you** in writing of the outstanding amount and that, if the **premium** is not paid within one (1) month after the **premium due date**. Once the policy has been cancelled, neither **you** nor any **insured person** will have any **cover** under this policy.

7. Cooling Off Period

Once **cover** has commenced **you** have a twenty one (21) day Cooling Off Period within which **you** may cancel the policy and receive the full refund of all **premiums** paid. To cancel **your** policy during the Cooling Off Period, please send **us your** written request to cancel the policy.

The Cooling Off Period ceases if **you** make a claim before the twenty one (21) day Cooling Off Period has expired.

8. How to Make a Claim

Information on claims can be found under the section titled “**Conditions**” in the **Policy Wording**. **Please read this carefully.**

You, or someone else on **your** behalf, must contact **us** as soon as reasonably practicable after any event happens which is likely to lead to a claim. **You** can do this by calling **1800 331 013** or by emailing **austadmin@aig.com**. Alternatively, **you** can download a claim form at **<https://www.aig.com.au/claims>**.

9. Renewals and Confirmations

Each year before **your renewal date** **we** will give **you** a notice which states whether **we** will renew **your** policy and, if **we** will, the **premium** which will apply for that year. If **we** decide not to renew **your** policy, it will expire on that **renewal date**.

If **we** offer to renew **your** policy, please read it carefully and inform **us** of any changes **you** would like to make. If **you** are paying a monthly **premium**, **we** will automatically renew **your** policy on the terms set out in the renewal notice unless **you** tell **us you** do not wish to do so. If **you** have any questions about **your** policy or would like **us** to provide **you** with a written or electronic confirmation of a renewal, or of any other policy transaction, please contact **us** on:

Telephone: 1800 331 013

Email: austadmin@aig.com

10. Code of Practice

AIG is a signatory to the General Insurance Code of Practice. This aims to raise the standards of practice and service in the insurance industry, improve the way claims and complaints are handled and help people better understand how general insurance works. Information brochures on the Code are available upon request.

Further information, or a copy of the Code, can be obtained from www.codeofpractice.com.au or upon request from us.

11. Complaints and Feedback

Learning about **your** experiences with **us** and **our** service partners helps to improve the way **we** do business with **you**. If **you** have feedback, or an issue **you** would like resolved **we** encourage **you** to make contact. Below is information on how to contact **us** and how **we** will work together to resolve any concerns **you** have.

How to provide feedback

1. Speak to our Complaints team

Our complaints team can be contacted on **1800 339 669**. To get the best out of **your** call with **us**, please have **your** policy and/or claim number available and any specific information about the issue.

2. Provide your feedback in writing

If **you** would prefer to provide **your** feedback or complaint in writing **you** can do so by lodging **your** complaint on **our** website, or by writing to:

The Complaints Team
AIG Australia Limited
Level 13, 717 Bourke Street
Docklands VIC 3008

Email: aucomplaints@aig.com

What happens if you make a complaint?

If **you** make a complaint, **we** will record **your** complaint and make sure that **your** concerns are addressed as quickly as possible and seek to achieve a fair outcome for both parties.

We will assess **your** complaint upon receipt. During the complaints process as set out in this notice, **we** will meet the following requirements in respect of **your** complaint.

- Acknowledge **your** complaint within one (1) business day.
- **We** will tell **you** who will handle **your** complaint and their contact details.
- **We** will, where applicable, keep **you** informed via **your** preferred method of communication of the progress of **your** complaint every ten (10) business days, more frequently or necessary or as agreed by both of **us**.
- **We** will treat **your** complaint respectfully and handle all personal information in accordance with **our** Privacy Policy.
- Within 30 calendar days from the date **we** receive **your** complaint, **we** will provide a response to **your** complaint

If **we** cannot meet any of the stated time frames, **we** will communicate to **you** the reasons why this has not been possible. **We** will also advise **you** when **you** should expect to receive a response or decision, **your** right to complain to the Australian Financial Complaints Authority (AFCA) if **you** are dissatisfied with such reasons and provide **you** with the contact details for AFCA.

What you can do if you are not happy with our response or handling of your complaint

If **you** are not satisfied with **our** response or the handling of **your** complaint, **you** may wish to have the matter reviewed by **our** Internal Dispute Resolution Committee (“Committee”).

If **you** wish to have **your** complaint reviewed by the Committee, please telephone or write to the complaints team as per the details above. As part of **your** request, please include detailed reasons for requesting the review and the outcome **you** are seeking. This information will assist the Committee in carrying out its assessment and review of **your** complaint.

A written response setting out the final decision of the Committee and the reasons for this decision will be provided to **you**.

If **we** are unable to provide a response within 30 calendar days of receipt of the initial complaint, **we** will inform **you** of (i) the time frame for when **your** complaint will be heard by the Committee, (ii) when **you** should expect to receive a response from the Committee; (iii) the reasons for such delay; (iv) **your** right to complain to AFCA if **you** are dissatisfied with such reasons; and (v) the contact details for AFCA.

You can take **your** complaint to AFCA at any time, including:

- if **we** have been unable to resolve **your** complaint within 30 calendar days;
- **you** are dissatisfied with the outcome of **your** complaint; or
- **you** are dissatisfied with the findings of the Committee.

AFCA provides a fair and independent financial services complaint resolution service that is free to consumers. AFCA can make decisions with which **AIG** is obliged to comply.

Under AFCA Rules, **your** complaint may be referred back to **us** if it has not gone through **our** complaints process.

AFCA's contact details are:

Australian Financial Complaints Authority (AFCA)
GPO Box 3
Melbourne VIC 3001
Website: www.afca.org.au
Email: info@afca.org.au
Phone: 1800 931 678 (free call)

The use of AFCA does not preclude **you** from subsequently exercising any legal rights which **you** may have if **you** are still unhappy with the outcome. Before doing so however, **we** strongly recommend that **you** obtain independent legal advice.

If **your** complaint does not fall within AFCA's Rules, **we** will advise **you** to seek independent legal advice or give **you** information about any other external dispute resolution options where available to **you**.

12. Financial Claims Scheme

The protection provided under the Federal Government's Financial Claims Scheme (**Scheme**) applies to the Policy. In the unlikely event that **we** are unable to meet **our** obligations under this policy, **you** may be entitled to payment under the Scheme (access to the Scheme is subject to eligibility criteria). Information about the Scheme can be obtained from the APRA website at <https://www.fcs.gov.au>.

13. Privacy Notice

This notice sets out how AIG collects, uses and discloses personal information about:

- *you*, if an individual; and
- other individuals *you* provide information about.

Further information about *our* Privacy Policy is available at www.aig.com.au or by contacting *us* at privacy.manager@aig.com or on 1300 030 886.

How we collect your personal information

AIG usually collects personal information from *you* or *your* agents.

AIG may also collect personal information from:

- *our* agents and service providers;
- other insurers;
- people who are involved in a claim or assist *us* in investigating or processing claims, including third parties claiming under *your* policy, witnesses and medical practitioners;
- third parties who may be arranging insurance cover for a group that *you* are a part of;
- providers of marketing lists and industry databases; and
- publicly available sources.

Why we collect your personal information

AIG collects information necessary to:

- underwrite and administer *your* insurance cover;
- improve customer service and products, and carry out research and analysis, including data analytics; and
- advise *you* of *our* and other products and services that may interest *you*.

You have a legal obligation under the Insurance Contracts Act 1984 to disclose certain information. Failure to disclose information required may result in AIG declining cover, cancelling *your* insurance cover or reducing the level of cover, or declining claims.

To whom we disclose your personal information

In the course of underwriting and administering *your* policy *we* may disclose *your* information to:

- your or our agents;
- entities to which AIG is related, reinsurers, contractors or third party providers providing services related to the administration of *your* policy;
- banks and financial institutions for policy payments;
- assessors, third party administrators, emergency providers, retailers, medical providers, travel carriers, in the event of a claim;
- other entities to enable them to offer their products or services to *you*; and
- government, law enforcement, dispute resolution, statutory or regulatory bodies, or as required by law.

AIG is likely to disclose information to some of these entities located overseas, including in the following countries: United States of America, Canada, Bermuda, United Kingdom, Ireland, Belgium, The Netherlands, Germany, France, Singapore, Malaysia, the Philippines, India, Hong Kong, New Zealand as well as any country in which *you* have a claim and such other countries as may be notified in *our* Privacy Policy from time to time.

You may request not to receive direct marketing communications from AIG.

Access to your personal information

Our Privacy Policy contains information about how *you* may access and seek correction of personal information *we* hold about *you*. In summary, *you* may gain access to *your* personal information by submitting a written request to AIG.

In some circumstances permitted under the Privacy Act 1988, AIG may not permit access to *your* personal information. Circumstances where access may be denied include where it would have an unreasonable impact on the privacy of other individuals, or where it would be unlawful.

Complaints

Our Privacy Policy also contains information about how **you** may complain about a breach of the applicable privacy principles and how **we** will deal with such a complaint.

Consent

Your application includes a consent that **you** and any other individuals **you** provide information about consent to the collection, use and disclosure of personal information as set out in this notice.

14. Premier Rewards

Security Plus Premier policyholders automatically become members of Premier Rewards, a value added service offering that My Rewards provides directly to **you**. My Rewards is owned and operated by The Rewards Factory Limited and **your** membership of Premier Rewards is subject to My Rewards standard terms and conditions of membership.

Premier Rewards is a member benefits program that offers a wide range of rewards and discounts in categories such as travel, entertainment, shopping, dining, health and lifestyle. Premier Rewards members can access these offers available throughout Australia and New Zealand, every day of the year. The offerings are outlined in the Premier Rewards documentation provided to **you** and on the Premier Rewards website www.premier.myrewards.com.au.

Things you should know about Premier Rewards

- The charge included in the **premium**, detailed under the heading **Costs** on page 4 covers the cost of **your** Premier Rewards membership.
- If **your** Security Plus Premier policy is cancelled or expires, **your** Premier Rewards membership will also cease.
- AIG is not the agent of The Rewards Factory Limited nor is The Rewards Factory Limited the agent of AIG. Further, AIG makes no representation in regard to the financial status of, or the services provided by, The Rewards Factory Limited and is not in any way liable for the services provided by My Rewards and/or any of the reward offerings **you** may avail **yourself** of under the Premier Rewards program.
- AIG reserves the right to cease this Premier Rewards benefit under **your** Security Plus Premier policy or change the service provider of Premier Rewards upon renewal of the policy, in which event **we** will advise **you** in writing. In the event that the Premier Rewards benefit ceases under the policy, the charge referred to above will no longer be included in the **premium**.



Policy Wording

Important Notes

- 1) This document contains **your** insurance policy terms and conditions. It is important that **you** read and understand it and retain it in a safe place.
- 2) Please inform **us** immediately of:
 - (a) any change in **your** address; and/or
 - (b) any other changes affecting the **insured persons** which will require an alteration to the policy.

Duty to Take Reasonable Care Not to Make a Misrepresentation

You have a duty to take reasonable care not to make a misrepresentation to **us** before the contract of insurance is first entered into. **You** have the same duty when **you** renew, extend, vary or reinstate the contract.

This means that **you** must take reasonable care to answer accurately and completely all of the questions **we** ask **you**. If **you** are unsure about the requirements of any of **our** questions, please tell **us**. If **you** need to check **your** records or other information before answering, please make sure **you** do so. In answering **our** questions, **you** should also make sure **you** provide accurate and complete answers for anyone else to whom the questions apply.

Your compliance with this duty is very important as **we** make **our** decisions whether to insure **you** and, if so, on what terms based on the information **you** provide.

If **you** fail to take reasonable care and make a misrepresentation to **us**, **we** may be entitled to:

- cancel **your** contract;
- deny a claim or reduce the amount **we** will pay **you** if **you** claim, or
- if the misrepresentation was made fraudulently, treat the policy as if it never existed.

Age Limits/Eligibility

To be eligible to apply for **cover** under this Policy:

- (a) **You** must be not less than eighteen (18) years of age (except **dependent children**) or not have attained the age of seventy five years.
- (b) If **your spouse** is to be covered under this policy, **your spouse** must not be less than eighteen (18) years of age or not have attained the age of seventy five (75) years.
- (c) If **your dependent children** are covered under this policy, they must be under nineteen (19) years of age.

We will decide each year whether to offer to renew this policy. Where we offer to renew, **Cover** can continue to the next **renewal date** for existing **insured persons** aged seventy five (75) years but less than eighty nine (89) years at the **renewal date** on the basis set out below.

- (a) The **compensation** payable for **your level** is reduced for all **insured persons** once **you** or **your spouse**, as applicable, attains seventy five (75) years of age. The reduced level of **compensation** is set out in the Schedule of Benefits.
- (b) Unless this policy has been cancelled or expired beforehand, **we** will not offer to renew this policy once **you** or **your spouse** attain the age of eighty nine (89) years.
- (c) If **you** have a You and Your Dependent Children **plan** or a "Family" **plan** and either **you** or **your spouse**, as applicable, turn seventy five (75) years of age, the **cover** will cease under this policy on the next **renewal date**, following such **insured person's** birthday. In such an event, **you** will be entitled to continue under a replacement You Only **plan** or You and Your Spouse **plan**. Please note that these replacement plans do not provide any insurance **cover** for **dependent children**.

Insuring Agreement

If, whilst this policy is in force, an **insured person** suffers an **injury** which results in an Event listed in the Schedule of Benefits on page 16, then **we** will pay the **compensation** shown for that Event in respect of the **level** selected by **you** and shown on **your policy schedule**, and, where applicable, any of the Additional Benefits that are payable as a result of the Event, subject always to the terms, Conditions, Special Provisions and Exclusions of this policy.

Definitions

Bedcare means confinement in bed under the regular daily attendance and care of a professional carer directly resulting from a covered *injury* and certified as reasonably necessary by a legally qualified medical practitioner. This does not include confinement in any of the following institutions in which an *insured person* resides at the time of the *injury* giving rise to the claim – nursing or convalescent home, a geriatric ward, a mental institution, a rehabilitation or extended care facility for the elderly or a place for the care or treatment of alcoholics or drug addicts.

Compensation means the amount of insurance payable under this policy in accordance with the *level* selected and an *insured person's* age.

Cover means the cover provided by this insurance policy during the *period of insurance* shown on *your policy schedule*.

Day means a completed period of 24 hours.

Dependent Children means *you* and *your spouse's* unmarried children, as long as they are under nineteen (19) years of age and living with *you* and/or *your spouse* and primarily dependent upon *you* and/or *your spouse* for maintenance and support. This includes step and legally adopted children.

Injury means a bodily injury resulting from an accident caused by violent, external, and visible means which occurs during the *period of insurance* and which results independently of any pre-existing condition or other cause in any of the Events specified in the Schedule of Benefits within twelve(12) calendar months from the date of its occurrence.

Insured person(s) shown on *your policy schedule* under *your plan*, means:

- (a) *you* only, if the “You Only” plan is shown on *your policy schedule*.
- (b) *you* and *your dependent children*, if the “You and Your Dependent Children” plan is shown on your *policy schedule*.
- (c) *you* and *your spouse*, if the “You and Your Spouse” plan is shown on *your policy schedule*.
- (d) *you, your spouse* and *your dependent children*, if the “Family” plan is shown on *your policy schedule*.

Level means the level of *premium* appropriate to the amount of *compensation you* have selected on *your* application form, or in *your* application made online or over the telephone with a AIG representative. *Your* selected *level* is shown on *your policy schedule*.

Limb means any part of the arm between the shoulder and wrist or any part of the leg between the hip and the ankle. It shall also mean the entire hand below the wrist or the entire foot below the ankle.

Paraplegia means total paralysis of both legs and part or whole of the lower half of the body.

Period of Insurance means the period shown on your *policy schedule*.

Permanent means lasting twelve (12) consecutive calendar months from the date of occurrence and at the end of that period is unlikely to materially improve.

Plan means the *plan* selected by *you* on *your* application form, or in *your* application made online or over the telephone with a AIG representative. *Your* selected *plan* is shown on *your policy schedule*.

Policy commencement date means the date of commencement of the first period of insurance for this policy as shown in *your policy schedule*.

Policy schedule means the document titled “Policy schedule” issued to *you*, or “Renewal notice” in relation to renewals, which forms part of this policy.

Premium means the *premium* payable by *you* under this policy for the *insured persons* in accordance with the *level* selected.

Premium due date means the end of each period when the *premium* is payable.

Quadriplegia means total paralysis of both legs and both arms.

Renewal date means the date on which the policy expires and is due for renewal.

Spouse means *your* husband or wife and includes a de-facto partner who, although not legally married to *you*, lives with *you* on a genuine domestic basis.

Total loss means, in relation to:

- (a) an insured body part or *limb*, the physical severance or entire loss of the use thereof;
- (b) an eye, the entire loss of all sight in the eye;
- (c) hearing, the entire loss of hearing;
- (d) speech, the entire loss of the ability to speak.

War means war, whether declared or not, or any warlike activities, including use of military force by any sovereign nation to achieve economic, geographic, nationalistic, political, racial, religious or other ends.

We/our/us/ourselves means AIG Australia Limited ABN 93 004 727 753 AFSL 381686.

You/your/yourself means the person shown as the policy holder on *your policy schedule*.

Special Provisions

1. **Compensation** shall not be payable for more than one of the Events 1 to 9 in respect of the same *injury*.
2. After the occurrence of any one of the Events 1 to 7 there shall be no further liability under this policy (other than any Additional Benefit payable in respect of such Event), or under any replacement policy, in respect of the same *injury*.
3. In the event of multiple *injuries* sustained in the same accident, only the Event insured for the highest amount will be compensated. This does not apply to Events 10a) to i) which will be paid in addition to any other benefit entitlement.
4. **Compensation** shall not be payable unless, as soon as reasonably practicable after the happening of any *injury* giving or likely to give rise to a claim, the *insured person* obtains and follows proper medical advice from a legally qualified medical practitioner.

Additional Benefits

1. Home Renovation Benefit

If, as a direct result of an *injury* resulting in any one of the **Events 1 to 4**, an *insured person* is required to renovate his or her existing residence (including but not limited to the installation of ramps for external or internal wheelchair access, internal guide rails, emergency alert system and similar disability aids), **we** will pay the actual costs incurred for such renovations up to the maximum amount for the *level you* have selected.

Provided always that, this benefit is only payable:

- (a) where such renovations are undertaken with the agreement of the *insured person's* attending medical practitioner; and
- (b) in respect of one residence only.

2. Vocational Retraining Benefit

If *you* or *your spouse* suffer an *injury*, which results in **Events 1, 2 or 7**, and *you* have the *You and Your Spouse plan* or the "Family" *plan*, **we** will pay a monthly payment for reasonable expenses incurred for vocational retraining tuition or advice from a licensed vocational school for *you* or *your spouse*, as applicable, provided such tuition or advice is undertaken with the agreement of the *insured person's* attending medical practitioner.

Compensation under this Additional Benefit will be limited to the reasonable expenses incurred for the tuition or advice not exceeding \$500 per month and will be payable for a maximum of six (6) months (maximum policy benefit payable is \$3,000). This benefit reduces to nil once *you* or *your spouse* attains seventy-five (75) years of age.

3. Education Fee Assist

We will pay a lump sum payment for school tuition fees for up to three (3) *dependent children* in the following circumstances:

- (a) if *you* have selected the *You and Your Dependent Children plan* and *you* suffer an *injury* resulting in **Event 7**; or
- (b) if *you* have selected the "Family" *plan*, and *you* or *your spouse* suffer an *injury* resulting in **Event 7**,

we will pay up to \$2,000 per *dependent child*, up to a maximum policy benefit of \$6,000, towards the actual annual school tuition fees incurred in the current school year. This benefit reduces to nil once *you* or *your spouse* attains seventy-five (75) years of age.

Disappearance

If the *insured person's* body has not been found within twelve (12) calendar months from the date of the disappearance, sinking or wrecking of the conveyance in which the *insured person* was travelling at such date, **we** will presume that the *insured person* died as the result of *injury* and will pay the **compensation** specified for that Event.

Exposure

If any of the Events occurs as the result of unexpected exposure to the elements, **we** will assume that the *insured person* has sustained an *injury* and will pay the **compensation** specified for that Event.

Exclusions

We will not pay **compensation** for any Event directly or indirectly arising out of:

1. **war**, civil war, invasion, insurrection, revolution, use of military power or usurpation of government or military power;
2. an **insured person** being a pilot or crew member of any aircraft, or engaging in any aerial activity except as a passenger in any properly licensed aircraft;
3. deliberately self-inflicted injury or suicide or the criminal or illegal acts of an **insured person**;
4. sickness, disease or any kind of infection however contracted, even if through **injury**. This Exclusion however, does not apply to sickness or disease directly resulting from medical or surgical treatment rendered necessary by an **injury** or to infection directly resulting from an **injury**, provided that in each case the **injury** itself is covered by this policy or to accidental food poisoning;
5. the **insured person** having a blood alcohol content over the prescribed legal limit when driving or operating any motor vehicle, and/or being under the influence of intoxicating liquor and/or being under the influence of any drug other than a drug taken or administered by, or in accordance with the advice of, a legally qualified medical practitioner;
6. the **insured person** engaging in any professional sport, meaning **your** livelihood is substantially dependent on income received as a result of **you** playing such sport;
7. the **insured person** racing in or on any motor powered conveyance, excluding social club car rallies;
8. radioactive contamination or radioactivity, in any form, whatsoever, whether occurring naturally or otherwise;
9. any bone fracture suffered by an **insured person** who had been diagnosed as having osteoporosis prior to the **policy commencement date**;

However, notwithstanding this Exclusion, if an **insured person** is diagnosed as having osteoporosis after the **policy commencement date**, we will pay the **compensation** for the first bone fracture after osteoporosis is diagnosed or, where the diagnosis is made in the course of treatment of the bone fracture, we will pay the **compensation** for that bone fracture. No **compensation** will be payable for any subsequent bone fractures suffered by that **insured person**, howsoever caused.

10. We will also not pay any **compensation** for any consequential loss, whether financial or non-financial, including but not limited to any legal or other professional costs and/or travel expenses arising directly or indirectly out of:
 - (a) an **injury**; or
 - (b) any claim made by an **insured person** under this policy.

The insurer (**We**) shall not be deemed to provide cover and the insurer shall not be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose the insurer, its parent company or its ultimate controlling entity to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of Australia, the European Union or the United States of America.

Conditions

1. Policy Commencement

This policy commences on the first day of the **period of insurance**.

2. Premium

- (a) If any monthly **premium** is not paid, we may advise you in writing of the outstanding amount and that, if the **premium** is not paid within one (1) month after the **premium due date**, the policy will be cancelled.
- (b) **Your** insurance shall not be prejudiced by failure of **your** credit provider to transmit reports, pay **premium** or comply with any of the provisions of the policy, when such failure is due to inadvertent error or clerical mistake.
- (c) The **premium** applicable to the **level** selected is shown in the **policy schedule**. We may vary the amount of **premium** payable on renewal of this policy. Any **premium** variation will be notified to **you** in writing and will take effect from **your** next **renewal date** after receipt of the notice.

We will not pay any claim that arises from an **injury** which occurs after the policy has been cancelled or expires.

3. Cancellation

- (a) **You** may cancel this insurance at any time by giving **us** written notice.
- (b) We may cancel **your** policy as provided under section 60 of the Insurance Contracts Act 1984, including if **you** have breached any of its terms and conditions.

- (c) **We** may decide not to offer to renew **your** policy after the next renewal date. In that event **we** shall notify **you** in writing at least thirty (30) days before your cover ceases.

If **you** have other than You Only **plan cover** and die from any cause:

- (a) any **cover** for **your spouse** under the You and Your Spouse **plan** or “Family” **plan** will continue for ninety (90) days from the date of **your** death at no **premium** charge and then cease; and
- (b) any cover for **your dependent children** under the You and Your Dependent Children **plan** or the “Family Plan” will continue for ninety (90) days from the date of **your** death at no **premium** charge and then cease.

If **you** have the You and Your Dependent Children **plan** or the “Family” **plan** and either **you** or **your spouse**, as applicable, turn seventy five (75) years of age, all **cover** under this policy will cease with effect from the next **renewal date** following such **insured person’s** birthday.

You may however replace the coverage under this policy by continuing under a replacement You Only **plan** or You and Your Spouse **plan**. Please note that these replacement plans do not provide any insurance **cover** for **dependent children**.

4. **Australian Law**

This policy is governed by the laws of the Australian state or territory it was issued in and any dispute or action in connection therewith shall be conducted and determined in Australia.

5. **Currency**

All **compensation** amounts shown in this policy are in Australian currency (AUD).

6. **Claims Procedure**

- (a) **You** or someone else on **your** behalf must contact **us** as soon as reasonably practicable after any event happens which is likely to lead to a claim. **You** can do this by calling 1800 331 013 or by emailing austadmin@aig.com writing to **us**. Alternatively, **you** can download a claim form at <https://www.aig.com.au/claims>
- (b) The claim needs to be submitted with reasonable supporting documentation such as doctor’s reports, receipts and, where reasonably requested, additional proof of loss. **You** must provide this information to **us** in a reasonable time. **You** should keep a copy of any documents that may be required to support **your** claim.
- (c) **We** may require the **insured person** to be medically examined at **our** expense, when reasonably required in order to assess a claim, or arrange an autopsy unless this is illegal in the country in which the autopsy is to be performed.
- (d) **Compensation** will be paid as soon as **we** have investigated and verified the information supplied and the claim falls within the policy.
- (e) **Compensation** owing to an **insured person** at the date of their death will be paid in accordance with the beneficiary designation in force at the time of claim or to the **insured person’s** estate. All other **compensation** will be payable to **you**.

7. **Fraud**

Any fraud, misstatement or concealment by **you** or an **insured person**, either in the application on which this insurance is based, or in relation to any other matter affecting this insurance, or in connection with the making of any claim thereunder, may give **us** the rights provided for in the Insurance Contracts Act 1984, (Cth) including, where appropriate, the right to reduce or refuse payment of any claim or to cancel or avoid the policy contract.

Schedule of Benefits and Additional Benefits – Important Information

Please Note:

1. *This benefit only provides cover for accidental death that results from an *injury*. The maximum accidental loss of life *compensation* payable for a *dependent child* is \$5,000 regardless of the *level* selected.
2. When more than one bone/bone site is fractured as the result of an *injury*, the benefits are added together (eg. Thigh + Hand + Cheekbone). A fracture sub-limit applies which limits the maximum *compensation* payable for any one *injury*, Events 10a) to i) inclusive. The sub-limit is specified in the Schedule of Benefits.

We will only pay for one fracture in respect to each bone/bone site specified in the Schedule of Benefits even if it is fractured in more than one place. This means for example, if *you* break all of the three bones which make up *your* Finger or one of the Finger bones in more than one place *you* would receive \$110 in total for *level* 1 if *you* are aged under seventy five (75) years.

3. Some Exclusions apply, including in relation to osteoporosis, which may impact upon benefits under the *plan*. Please refer to page 13 for more details.
4. **The *compensation* for “Age 75 and over” applies to *all insured persons* once *you* or *your spouse*, as applicable, attain seventy five (75) years of age. Where *we* offer renewal after that, *we* will not offer to renew this policy once *you* or *your spouse* attain the age of eighty nine (89) years.



Schedule of Benefits

If, whilst this policy is in force, an *insured person* suffers an *injury* resulting in an Event listed below, then *we* will pay the *compensation* shown for that Event in respect of the *level* of cover shown on *your policy schedule*, subject always to the terms, Conditions, Special Provisions and Exclusions of this policy.

EVENTS	COMPENSATION							
	LEVEL 1		LEVEL 2		LEVEL 3		LEVEL 4	
Injury resulting in:	Age 74 Years and below	Age 75 Years and over**	Age 74 Years and below	Age 75 Years and over**	Age 74 Years and below	Age 75 Years and over**	Age 74 Years and below	Age 75 Years and over**
1. <i>Permanent Quadriplegia</i>	\$100,000	\$50,000	\$200,000	\$100,000	\$300,000	\$150,000	\$400,000	\$200,000
2. <i>Permanent Paraplegia</i>	\$100,000	\$50,000	\$200,000	\$100,000	\$300,000	\$150,000	\$400,000	\$200,000
3. <i>Permanent total loss</i> of use of two <i>Limbs</i>	\$50,000	\$25,000	\$100,000	\$50,000	\$150,000	\$75,000	\$200,000	\$100,000
4. <i>Permanent total loss</i> of entire sight of both eyes	\$50,000	\$25,000	\$100,000	\$50,000	\$150,000	\$75,000	\$200,000	\$100,000
5. <i>Permanent total loss</i> of hearing in								
a) both Ears	\$50,000	\$25,000	\$100,000	\$50,000	\$150,000	\$75,000	\$200,000	\$100,000
b) one Ear	\$12,500	\$6,250	\$25,000	\$12,500	\$37,500	\$18,750	\$50,000	\$25,000
6. <i>Permanent total loss</i> of speech	\$50,000	\$25,000	\$100,000	\$50,000	\$150,000	\$75,000	\$200,000	\$100,000
7. Accidental Loss of Life*	\$25,000	\$12,500	\$50,000	\$25,000	\$75,000	\$37,500	\$100,000	\$50,000
8. <i>Permanent total loss</i> of use of one limb	\$25,000	\$12,500	\$50,000	\$25,000	\$75,000	\$37,500	\$100,000	\$50,000
9. <i>Permanent total loss</i> of entire sight of one eye	\$25,000	\$12,500	\$50,000	\$25,000	\$75,000	\$37,500	\$100,000	\$50,000
10. <i>Fracture</i> of the:								
a) Hip, Pelvis, Vertebrae of the Neck (Cervical)	\$1,650	\$825	\$3,300	\$1,650	\$4,950	\$2,475	\$6,600	\$3,300
b) Skull, Shoulder Blade (excluding Cheekbone)	\$1,100	\$550	\$2,200	\$1,100	\$3,300	\$1,650	\$4,400	\$2,200
c) Upper Leg, Collarbone, Sternum	\$825	\$415	\$1,650	\$825	\$2,475	\$1,240	\$3,300	\$1,650
d) Upper Arm, Kneecap, Elbow	\$550	\$275	\$1,100	\$550	\$1,650	\$825	\$2,200	\$1,100
e) Forearm, Lower Leg, Jaw	\$440	\$220	\$880	\$440	\$1,320	\$660	\$1,760	\$880
f) Ankle, Foot, Wrist, Cheek, Hand	\$330	\$165	\$660	\$330	\$990	\$495	\$1,320	\$660
g) Ribs, Vertebrae not covered in 10a) above	\$275 each	\$140 each	\$550 each	\$275 each	\$825 each	\$415 each	\$1,100 each	\$550 each
h) Nose	\$220	\$110	\$440	\$220	\$660	\$330	\$880	\$440
i) Fingers or Thumbs or Toes	\$110 each	\$55 each	\$220 each	\$110 each	\$330 each	\$165 each	\$440 each	\$220 each
Maximum Compensation payable for Events 10a) to i) inclusive	\$4,400	\$2,200	\$8,800	\$4,400	\$11,000	\$5,500	\$16,500	\$8,250
11. <i>Extra Cash:</i> If, as the result of <i>injury</i> listed above under Events 1 to 6 and 8 to 10 <i>you</i> are confined to <i>bedcare</i> for more than forty-eight (48) consecutive hours, <i>we</i> will pay the <i>compensation</i> shown for the period of such confinement for a maximum period of thirteen (13) weeks.	\$50 per Day to a maximum \$4,550	\$25 per Day to a maximum \$2,275	\$100 per Day to a maximum \$9,100	\$50 per Day to a maximum \$4,550	\$150 per Day to a maximum \$13,650	\$75 per Day to a maximum \$6,825	\$200 per Day to a maximum \$18,200	\$100 per Day to a maximum \$9,100

** The *compensation* for "Age 75 and over" applies to all *insured persons* once *you* or *your spouse*, as applicable, attain seventy five (75) years of age. Where *we* offer renewal after that, *we* will not offer to renew this policy once *you* or *your spouse* attain the age of eighty nine (89) years.

* This benefit only provides for accidental death that results from an *injury*. The maximum accidental loss of life *compensation* payable for a *dependent child* is \$5,000 regardless of the level selected.

Additional Benefits

(see page 12 for full details of these benefits)

EVENTS	COMPENSATION							
	LEVEL 1		LEVEL 2		LEVEL 3		LEVEL 4	
<i>Injury resulting in:</i>	Age 74 Years and below	Age 75 Years and over**	Age 74 Years and below	Age 75 Years and over**	Age 74 Years and below	Age 75 Years and over**	Age 74 Years and below	Age 75 Years and over**
1. Home Renovation Benefit	Actual costs up to a maximum of \$5,000	Actual costs up to a maximum of \$2,500	Actual costs up to a maximum of \$10,000	Actual costs up to a maximum of \$5,000	Actual costs up to a maximum of \$15,000	Actual costs up to a maximum of \$7,500	Actual costs up to a maximum of \$20,000	Actual costs up to a maximum of \$10,000
2. Vocational Retraining Benefit Benefit applies to You and Your Spouse and “Family” <i>plans</i> only	Reasonable expenses up to a maximum of \$500 per month for a maximum of 6 months	NIL	Reasonable expenses up to a maximum of \$500 per month for a maximum of 6 months	NIL	Reasonable expenses up to a maximum of \$500 per month for a maximum of 6 months	NIL	Reasonable expenses up to a maximum of \$500 per month for a maximum of 6 months	NIL
3. Education Fee Assist Benefit applies to You and Your Dependent Children and “Family” <i>plans</i> only	Actual fees up to \$2,000 per <i>dependent child</i> up to a maximum of \$6,000 in all	NIL	Actual fees up to \$2,000 per <i>dependent child</i> up to a maximum of \$6,000 in all	NIL	Actual fees up to \$2,000 per <i>dependent child</i> up to a maximum of \$6,000 in all	NIL	Actual fees up to \$2,000 per <i>dependent child</i> up to a maximum of \$6,000 in all	NIL

** The *compensation* for “Age 75 and over” applies to all *insured persons* once *you* or *your spouse*, as applicable, attain seventy five (75) years of age. Where *we* offer renewal after that, *we* will not offer to renew this policy once *you* or *your spouse* attain the age of eighty nine (89) years.

