

# **SIMPLE LIFE**

**INSURANCE FOR  
LIFE-CHANGING EVENTS,  
MADE SIMPLE.**

Product Disclosure Statement (PDS) and  
Policy Document.  
Preparation Date: 01 November 2018



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### About us

The issuer and insurer for Simple Life is The Colonial Mutual Life Assurance Society Limited ABN 12 004 021 809, AFSL 235035 (CMLA) and all premiums are paid to and benefits are paid from CMLA's Statutory Fund No.5. CMLA is a wholly owned subsidiary of the Commonwealth Bank of Australia ABN 48 123 123 124. The Commonwealth Bank of Australia and its subsidiaries (other than CMLA to the extent provided for in this document) do not guarantee the obligations or performance of CMLA or the products CMLA offers. Commlnsure is a registered business name of CMLA.

### About this document

This PDS is designed to help you decide whether to buy Simple Life. The information it contains does not take into account your personal objectives, financial situation or needs and you should consider its appropriateness before acting.

All examples are only intended to demonstrate how certain benefits are calculated. All benefits will be determined in accordance with the relevant policy terms. All references to monetary amounts in this PDS are references to Australian dollars. The policy is governed by the laws of the State of New South Wales.

This whole document is the PDS for Simple Life, however, page 4 onwards is also the policy document. CMLA is responsible for the entirety of this PDS. This Product Disclosure Statement (PDS) is made up of the PDS and the Medical Definitions Reference Guide which is incorporated by reference into the PDS. The Medical Definitions Reference Guide is available at [commbank.com.au/SLD](http://commbank.com.au/SLD)

The information in this PDS is current as at the date stated on the cover, however it is subject to change. If we make a change that is materially adverse, it will be communicated to existing policyholders, in writing, by way of a Supplementary Product Disclosure Statement (SPDS) or a new PDS. Where a change in information is not materially adverse we will not notify existing policyholders or issue a new PDS or SPDS. However you will be able to find information about any changes at [commbank.com.au](http://commbank.com.au) or you can contact us to request details of the changes in writing which we will send you free of charge.

### Meaning of words

Some words in this document have a particular meaning. To help you read this document we have **bolded** many of the important terms and have included them in one section. See *What the words mean* on page 17.

### In this document

We/Us/Our – refers to CMLA.

You – depending on the context, means either:

- The person applying for cover, before Simple Life is purchased; or
- The policy owner and person insured who are the same, after Simple Life is purchased.

Our principal office of administration is Level 1, 11 Harbour Street, Sydney NSW 2000.

# WELCOME TO SIMPLE LIFE

## WHAT YOU CAN COVER AND HOW TO APPLY.

### Applying for Simple Life

Simple Life is available to permanent Australian residents aged between 18 and 50. Applications from outside Australia will not be accepted.

You cannot apply for another policy under Simple Life if you already have an existing Simple Life policy – see One Simple Life policy on page 6.

#### How to apply

You can find out how to apply online by visiting [commbank.com.au/simplelife](http://commbank.com.au/simplelife) or you can call us on **13 39 82**. Simple Life offers a range of covers that can be taken in any combination or individually (see page 5).

When you apply, all we ask you is your age, gender and **smoker** status.

It's important that you're truthful and accurate when answering these questions. Your answers help us determine what you pay – see *Changes to your premium rates* on page 14 for more information.

### Overview of policy limitations

We've called out some of the important limitations so you also understand when you're not covered.

#### Things we don't cover

Simple Life does not cover you for a **pre-existing condition** (see page 9) and other circumstances like suicide. See pages 10–13 for full exclusions.

A no claim period applies to Critical Illness Cover within 90 days of their **cover start date** – see page 6 for more information.

You are not covered if your claim arises from working in **hazardous conditions** – see page 17.

## What you can get

<p>Choose one of these covers or take together with other cover ...</p>	<p><b>1</b></p> <p><b>Life Cover</b></p>	<p><b>2</b></p> <p><b>Critical Illness Cover</b></p>	<p><b>3</b></p> <p><b>Total &amp; Permanent Disability (TPD) Cover</b></p>
<p>Pays a benefit when ...</p>	<p>You die or become <b>terminally ill</b>.</p>	<p>You suffer a <b>critical illness (cancer, stroke, heart attack or coronary artery disease)</b>.</p>	<p>You become <b>permanently disabled</b>, like becoming a paraplegic.</p>
<p>You can choose cover from ...</p>	<p>\$100,000 - \$1,000,000 in \$25,000 increments.</p>	<p>\$30,000 - \$200,000 in \$10,000 increments.</p>	<p>\$100,000 - \$500,000 in \$25,000 increments.</p>
<p>Designed to help cover ...</p>	<p>Debt, assist dependents through school and provide financial support for your partner.</p>	<p>Out-of-pocket expenses such as medical bills and lifestyle costs e.g. relocating family during care.</p>	<p>Loss of income, immediate medical treatment and ongoing lifestyle changes.</p>
<p>For more details on each cover ...</p>	<p>See pages 9 and 10.</p>	<p>See pages 9 and 11.</p>	<p>See pages 9 and 12–13.</p>

# HOW A SIMPLE LIFE POLICY WORKS

### Individual policy

For Simple Life, you are both the policy owner and insured person. All benefits will be paid to you or on your death to your legal representative or estate as applicable. You cannot have cover for more than one person per Simple Life policy.

### One Simple Life policy

You can only ever have one Simple Life policy with us at any one time.

### When cover starts

Cover starts when we accept your application as stated by your **cover start date**. When this happens, we'll send you a **policy schedule** stating:

- Your **cover start date**
- Your cover
- Your premium.

Together, your application, the **policy schedule** and this policy document are your insurance contract (your 'policy') with us.

### Cooling-off period

If you change your mind about Simple Life within one calendar month, we'll give you back any premium paid. This is your cooling-off period and it starts on the earlier of:

- You receiving the **policy schedule**; or
- The end of the fifth day after the policy start date.

### Paying for your policy

Your first premium will be deducted on the date we have agreed with you and will be deducted in advance each month from this date.

Generally as you get older your premium will increase. This premium increase occurs each year on the same date your policy started and is referred to as your policy anniversary. See *How your premium is calculated* on page 14 to better understand this and other factors that impact how your premium is calculated.

Payments must be made by direct debit from a bank account or credit card accepted by us. It is your responsibility to ensure we have the correct account details and that your policy premiums are paid in full (we do not accept partial payments of premium).

### Policy upgrades

Your policy may be upgraded with improved terms. We will only change your policy terms if inclusion of the new term improves the cover for all policyholders.

For example, we may introduce new medical definitions to reflect changes in medical technology and practices, however, you are entitled to be able to rely on either the term current as at the date you purchase your policy or the term current as at the date of your diagnosis to ensure you are not unintentionally impacted by any upgrade.

### Renewal of cover

Life Cover, Total and Permanent Disability Cover and Critical Illness Cover continue provided you pay your premiums and your cover or your policy has not ended – see *When your policy ends* on this page.

### Cancellation when you don't pay your premiums

When your premium is overdue for more than one calendar month from the due date, we can choose to cancel your policy after this period. We will notify you when we do this. Claims for events that occur after the date the policy is cancelled will not be accepted.

### Reinstating your policy due to non-payment

If we cancel your policy when you don't pay your premiums, you can apply to reinstate your policy provided you:

- Let us know within one calendar month of us cancelling your policy (the reinstatement period); and
- Pay all outstanding premiums.

We will notify you if we have reinstated your policy. After the reinstatement period has expired, you must apply for a new policy again.

### Cancelling your policy

You can cancel your policy at any time. The policy and all cover under it will end on the day we process the cancellation request.

Simple Life has no cash or surrender value.

### When your policy ends

Your policy ends on the earliest of the following:

- You cancel your policy
- We cancel your policy
- You die
- We pay a death or terminal illness benefit
- All your covers come to an end
- Your policy anniversary after you turn 65

## Changing your policy

As your insurance needs change, you can change your policy to suit these needs by varying what cover you have or the level of cover. Changes to your lifestyle, such as becoming a **smoker** also impact your policy and you must keep us informed of these changes.

Below describes how these changes affect your policy.

Change scenario	How this affects your policy	Limitations
<p><b>Increasing cover or adding cover</b></p>	<p>When you increase existing cover or add cover we apply this from the date we accept your request.</p> <p>Your premium for the increased amount or added cover is calculated using your current age and a new premium applies from the date cover was increased or added.</p> <p>Your next payment will include the cost of covering you for the increased cover or added cover from the date we process your request to your next payment date.</p> <p>As an example, if you increase your cover from the 1st of the month and we accept your request, we will increase cover from this date. To continue this example, if your payment date is on the 7th of each month, then your next payment will be your new monthly premium plus 6 days of cover for the increased amount.</p> <p>The cover period for the increased amount or added cover will be aligned with your existing policy.</p> <p>We'll send you a notification confirming these details.</p>	<p>We will decline to increase or add cover when:</p> <ul style="list-style-type: none"> <li>• You apply to increase or add cover after you turn 51</li> <li>• You request to increase cover above the maximum cover levels stated on page 9 <i>Cover limits</i></li> <li>• You request to add cover where we have previously paid you a benefit</li> <li>• You request to add cover where we no longer offer this cover through Simple Life.</li> </ul>
<p><b>Decreasing cover or removing cover</b></p>	<p>When you decrease existing cover or remove cover we apply this from the date we process your request.</p> <p>Your new monthly premium will be calculated as your current premium less the cost of the cover you have reduced or removed and applies from the date of the decrease or removal of cover.</p> <p>Your next payment will be reduced by the cost of decreasing or removing cover from the date we process your request to your next payment date.</p> <p>As an example, if you decrease your cover from the 1st of the month and we accept your request, we will decrease cover from this date. To continue this example, if your payment date is on the 7th of each month, then your next payment will be your new monthly premium less 6 days of cover for the decreased amount.</p> <p>We'll send you a notification confirming these details.</p>	<p>We will decline to decrease cover when your request is below the minimum cover levels stated in the <i>Cover limits</i> on page 9.</p> <p>You may remove cover on your policy at any time, however, if you remove all cover your policy ends.</p>

## HOW A SIMPLE LIFE POLICY WORKS

### Changing your policy (continued)

Change scenario	How this affects your policy	Limitations
<b>Changing smoker status</b>	<p>Your <b>smoker</b> status affects the premium that you pay – see page 18 for the definition of <b>smoker</b>.</p> <p>If you have not smoked any substance, including cigarettes or tobacco and/or used chewing tobacco in the last 12 months, you can change your status to a non-smoker.</p> <p>Your premium rate will decrease from the date you're no longer a <b>smoker</b> (provided you tell us when this occurs) or increase when you become a <b>smoker</b>.</p>	<p>You must let us know when a change in <b>smoker</b> status occurs.</p>
<b>You're no longer a permanent Australian resident</b>	<p>You must notify us when you intend to live outside Australia for more than 12 consecutive months.</p> <p>By living outside Australia for more than 12 consecutive months you will stop being a <b>permanent Australian resident</b> and we will not pay a benefit for a claim event that occurs after this date.</p>	<p>You must be a <b>permanent Australian resident</b> to have Simple Life.</p>

### Cover changes to Simple Life

We may change or remove the covers that we offer through Simple Life from time to time. This means if you take out individual cover, for example Life Cover only and you do not add other types of cover to your policy, we may later choose not to offer other covers found in this PDS (see page 7-8) and you will be unable to add this to your Simple Life policy. We will tell you should we decide to do this.



# UNDERSTAND YOUR COVER

## Cover limits

Simple Life has minimum and maximum amounts for each cover type – you cannot have less than the minimum cover limit or more than the maximum cover limit stated in the table below.

Cover type	Minimum cover limit	Maximum cover limit	Cover must be taken in these increments
Life Cover	\$100,000	\$1,000,000	\$25,000
Critical Illness Cover	\$30,000	\$200,000	\$10,000
Total and Permanent Disability Cover (TPD)	\$100,000	\$500,000	\$25,000

### Pre-existing condition exclusion

Simple Life does not cover you for a pre-existing condition. This means we won't pay a benefit if your death, **terminal illness**, **permanent disablement** or **critical illness** is caused directly or indirectly by an illness, injury, medical condition or related symptom:

- a) of which you first became aware; or
- b) for which you sought or intended to seek **medical help**; or
- c) for which a reasonable person in your circumstances should have been aware or would have sought **medical help** at any time during the five years before your **cover start date**.

**Medical help** means medical consultation, treatment, care or services which includes tests, other diagnostic measures or referral to a specialist.

### Having other insurance

Simple Life can complement other life insurance you may have, for example with other providers.

### No claim period

Critical Illness Cover has a 90 day no claim period from the cover start date. This means we will not pay a benefit for a critical illness or related event (such as becoming aware you have symptoms of an illness) that occurs in this time.

#### An example of how the no claim period works

Michael is diagnosed with prostate cancer three weeks after taking out Critical Illness Cover. Because this happened in the no claim period, we do not pay the Critical Illness Cover benefit.

# LIFE COVER

Life Cover applies when your **policy schedule** shows the words 'Life Cover'.

### What we cover

Life Cover pays the following benefits:

- A death benefit paid to your estate or legal representative when you die; or
- A terminal illness benefit paid to you when you become **terminally ill**.

**Terminal illness** or **terminally ill** means an illness or injury which, in the opinion of a **medical practitioner**, will likely lead to death within 24 months. The medical practitioner must certify that the **terminal illness** has occurred. Until we receive these certifications, **terminal illness** will not have occurred for the purpose of this definition.

### What we pay

The Life Cover benefit we pay is the Life Cover amount stated on your **policy schedule**. We will only pay this lump sum benefit once to you, i.e. if you die or become **terminally ill**.

### An example of how Life Cover works

Troy has a Simple Life policy with \$300,000 of Life Cover. A year later, he becomes aware of symptoms and is subsequently diagnosed with terminal cancer – doctors give him less than 24 months to live. Troy contacts us to claim and we pay him a \$300,000 terminal illness benefit. His policy ends as we have paid the Life Cover benefit.

### What we don't cover

We don't pay a Life Cover benefit if your death or **terminal illness** arises directly or indirectly from any of the following:

- A **pre-existing condition** (see *Pre-existing condition exclusion* on page 9)
- Suicide, attempted suicide or self-inflicted injury, whether you are sane or not
- As a result of war (whether declared or not)
- Participation in an illegal activity
- You have been living outside Australia for more than 12 consecutive months
- Working in hazardous conditions (see *Hazardous conditions* on page 17).

### When does cover start and end

Life Cover starts from the **cover start date** stated in your **policy schedule**. A new **cover start date** applies from the date we accept any increase to Life Cover, but only to the increased amount.

Life Cover ends on the earliest of the following:

- We pay a Life Cover benefit
- You remove Life Cover from your policy – see *Changing your policy* on page 7
- You or we cancel your policy – see *Cancellation when you don't pay your premiums* and *Cancelling your policy* on page 6
- When your policy ends – see *When your policy ends* on page 6.

# CRITICAL ILLNESS COVER

Critical Illness Cover applies when your **policy schedule** shows the words 'Critical Illness Cover'.

## What we cover

Critical Illness Cover pays a lump sum benefit to you when you are diagnosed with or suffer a **critical illness** and survive 30 days after diagnosis or the event occurring.

**Critical illness** means you are certified by a **medical practitioner** as meeting any one of the four medical conditions: **cancer, coronary artery disease requiring by-pass surgery, heart attack and stroke** as defined in the Medical Definitions Reference Guide available at [commbank.com.au/SLD](http://commbank.com.au/SLD)

## What we pay

The Critical Illness Cover benefit we pay is the Critical Illness Cover amount stated on your **policy schedule**. We will only pay this lump sum benefit once to you, i.e. if you meet any one of the **critical illness** medical conditions.

### An example of how Critical Illness Cover works

Monique takes out \$100,000 of Critical Illness Cover under Simple Life. Six years later, she notices a lump in her left breast and is diagnosed with breast cancer. To prevent spreading, doctors remove her whole breast. Simple Life pays her a Critical Illness Cover benefit of \$100,000 which she uses to help cover treatment costs and her Critical Illness Cover ends.

## What we don't cover

We don't pay a Critical Illness Cover benefit if your critical illness arises directly or indirectly from any of the following:

- A **pre-existing condition** (see *Pre-existing condition exclusion* on page 9)
- Attempted suicide or self-inflicted injury, whether you are sane or not
- As a result of war (whether declared or not)
- Participation in an illegal activity
- After you have been living outside Australia for more than 12 consecutive months
- Working in **hazardous conditions** (see *Hazardous conditions* on page 17)
- If you die within 30 days of being diagnosed with or suffering a critical illness.

The Critical Illness Cover benefit is also not paid for claims that arise or occur during the *No claim period* – see page 9.

## When does cover start and end

Critical Illness Cover starts from the **cover start date** stated in your **policy schedule**.

A new **cover start date** applies from the date we accept any increase to Critical Illness Cover, but only to the increased amount.

Critical Illness Cover ends on the earliest of the following:

- We pay a Critical Illness Cover benefit
- You remove Critical Illness Cover – see *Changing your policy* on page 7
- You or we cancel your policy – see *Cancellation when you don't pay your premiums* and *Cancelling your policy* on page 6
- When your policy ends – see *When your policy ends* on page 6.

# TOTAL AND PERMANENT DISABILITY (TPD) COVER

Total and Permanent Disability (TPD) Cover applies when your **policy schedule** shows the words 'Total and Permanent Disability Cover'.

### What we cover

TPD Cover pays a lump sum benefit to you when you become **permanently disabled**.

**Permanently disabled or permanent disablement** means you are certified by a **medical practitioner** as meeting one of the criteria outlined on page 13.

### What we pay

The TPD Cover benefit we pay is the TPD Cover amount stated on your **policy schedule**. We will only pay this lump sum benefit once to you, i.e. if you meet any one of the **permanently disabled** criteria.

### An example of how TPD Cover works

Sharon is a working mother of three and takes out Simple Life, including \$250,000 of TPD Cover and Life Cover. When a severe car accident leaves her paralysed from the waist down, medical evidence confirms her permanently paraplegic. We pay Sharon's claim as she has met the TPD loss of function criteria and Sharon uses the \$250,000 to help with medical costs and lifestyle adjustments. Her TPD Cover ends while her Life Cover continues.

### What we don't cover

We don't pay the TPD Cover benefit if your **permanent disablement** arises directly or indirectly from any of the following:

- A **pre-existing condition** (see *Pre-existing condition exclusion* on page 9)
- Attempted suicide or self-inflicted injury, whether you are sane or not
- As a result of war (whether declared or not)
- Participation in an illegal activity
- You have been living outside Australia for more than 12 consecutive months
- Working in **hazardous conditions** (see *Hazardous conditions* on page 17).

### When does cover start and end

TPD Cover starts from the **cover start date** stated in your **policy schedule**. A new **cover start date** applies from the date we accept any increase to TPD Cover, but only to the increased amount.

TPD Cover ends on the earliest of the following:

- We pay a TPD Cover benefit
- You remove TPD Cover from your policy – see *Changing your policy* on page 7
- You or we cancel your policy – see *Cancellation when you don't pay your premiums* and *Cancelling your policy* on page 6
- When your policy ends – see *When your policy ends* on page 6.

# TOTAL AND PERMANENT DISABILITY (TPD) COVER (CONTINUED)

Criteria	This means ...	Additional information
<b>Loss of function</b>	<p>The complete and irrecoverable loss of use of function due to illness or injury of:</p> <ul style="list-style-type: none"> <li>• Two or more of the following: <ul style="list-style-type: none"> <li>- A hand</li> <li>- A foot</li> <li>- Loss of sight in an eye,</li> </ul> </li> <li>Or</li> <li>• Loss of hearing in both ears.</li> </ul> <p>This may include <b>quadriplegia, paraplegia, diplegia</b> and <b>hemiplegia</b> as defined in the Medical Definitions Reference Guide available at <a href="http://commbank.com.au/SLD">commbank.com.au/SLD</a></p>	<p>Where:</p> <ul style="list-style-type: none"> <li>• The hand means the whole hand below the wrist</li> <li>• The foot means the whole foot below the ankle</li> <li>• Loss of sight (in one eye or both eyes as applicable) is defined as: <ul style="list-style-type: none"> <li>- Corrected visual acuity is 6/60 or less, or</li> <li>- Irrespective of corrected visual field, a constriction within 10 degrees or less of arc of central fixation.</li> </ul> </li> <li>• Loss of hearing in both ears is defined as complete and irrecoverable loss of hearing from both ears as a result of illness or injury, as certified by a <b>medical practitioner</b>. This definition is not met if the person's hearing has been restored through any natural or assisted means, unless the assisted means is a device implanted in the cochlea.</li> </ul>
<b>Loss of independent existence</b>	<p>Due to injury or illness, you are permanently and irreversibly unlikely to ever perform any two of the following activities unassisted by another person:</p> <ul style="list-style-type: none"> <li>• Feeding – to get food and drink to the mouth</li> <li>• Mobility – to get in and out of bed or a chair</li> <li>• Washing – to bathe and shower</li> <li>• Dressing – to dress and undress</li> <li>• Continence – to have good control of bowel and bladder function.</li> </ul>	Not applicable.
<b>Unlikely to ever work</b>	<p>As a result of illness or injury, a state of physical incapacity which:</p> <ul style="list-style-type: none"> <li>• Results in you being unlikely to ever work in any capacity (regardless of whether you receive remuneration, gain or reward), for at least six consecutive months; and</li> <li>• In our opinion, after considering medical evidence and/or other evidence, results in you being unlikely to ever again perform any occupation for which you are reasonably qualified by education, training or experience.</li> </ul>	<ul style="list-style-type: none"> <li>• You must have been <b>employed</b> for at least 180 consecutive days before you became <b>permanently disabled</b> to meet this criteria</li> <li>• You cannot be <b>employed</b> and performing <b>home duties</b> at the same time.</li> </ul> <p>See page 17 and 18 for what we mean by <b>employed</b> and performing <b>home duties</b>.</p>
<b>Unlikely to ever perform home duties</b>	<p>As a result of illness or injury, a state of physical incapacity which:</p> <ul style="list-style-type: none"> <li>• Results in you being unlikely to ever perform <b>home duties</b> for at least six consecutive months; and</li> <li>• In our opinion, after considering medical evidence and/or other evidence, results in you being unlikely to ever perform <b>home duties</b> again.</li> </ul>	<ul style="list-style-type: none"> <li>• You must have been performing <b>home duties</b> before you became <b>permanently disabled</b> to meet this criteria.</li> <li>• You cannot be <b>employed</b> and performing <b>home duties</b> at the same time.</li> </ul> <p>See page 17 and 18 for what we mean by <b>employed</b> and performing <b>home duties</b>.</p>

# YOUR PREMIUMS

## HOW WE CALCULATE YOUR PREMIUM.

### How your premium is calculated

Your monthly premium is stated in your **policy schedule**. All premiums are inclusive of stamp duty. Your premium will never be less than our minimum premium for the policy.

The following significant factors also affect how much you pay for Simple Life:

#### Nominated cover

The greater your level of cover, the higher your premium.

Your premium will be higher the more types of cover you have.

#### Age

Your current age affects your premium. As you get older, your premium will typically increase.

The annual notice we send you before your policy anniversary will state your new premium – see *Annual notification* on page 19.

#### Individual factors

Your gender and whether you're a **smoker** affect your premium.

If you're a **smoker** you can typically expect to pay a higher premium than if not.

Refer to page 18 for our definition of **smoker**.

### Changes to your premium rates

If we become aware that you have incorrectly stated your age or smoker status we may vary your premium to take into account your correct status, notwithstanding any other rights we may have in law.

There may also be times when we change premium rates. When this happens we will change the premium for all policies issued on the same terms, i.e. we won't single you out, and give you notice as required by the law.

#### Taxation

Generally, premiums for the Life, TPD and Critical Illness Covers are not tax deductible and in most situations, benefits paid to you or your estate are not subject to personal tax.

This information on taxation is of a general nature only and is based on the continuance of present taxation laws, rulings and their interpretation. As individual circumstances differ, you should seek assistance from your tax adviser.

# CLAIMS

## WHAT WE MAY REQUIRE TO ASSESS YOUR CLAIM.

You or your representative should contact us as soon as reasonably possible after your death; diagnosis of **terminal illness**; you become **permanently disabled**, or you suffer a **critical illness**.

### **Paying claims**

Once we've received all the necessary documents and assessed the validity of your claim, we'll pay your claim as soon as possible.

### **Medical evidence**

We rely on the information provided during a claim. We must receive sufficient evidence and in some circumstances support from our medical officer, before we pay a benefit. You must provide the medical evidence required at your own expense except where we ask for a medical examination or other tests.

If overseas, we may require you to return to Australia at your expense for assessment of a claim. When you return, you must be under the immediate care of a **medical practitioner**. Payment of any benefit under this policy is conditional on you returning for such an assessment, if required.

### **Independent assessment**

When necessary, we may require access to your medical records and test results so we can independently verify the existence and the extent of an illness, injury or other event. We can make any reasonable enquiries about the claim and we may require you to have a medical examination by a doctor we nominate. See *Privacy* on page 16 to understand why we collect and how we use customer information.

### **Employment evidence**

When necessary, in order to prove your claim we may require an Employer statement as evidence.

# PRIVACY

## WHY WE COLLECT CUSTOMER INFORMATION, HOW WE COLLECT, USE AND PROTECT IT.

### Privacy of your personal information

Customer information is information about a customer. It includes personal information such as name, age, gender, contact details, as well as your health and financial information.

### Why we collect customer information

We collect personal information (including full names, addresses, and contact details) so that we can administer our customer relationships, and give customers like you the products and services they request, as well as information on the Commonwealth Bank Group's products and services.

The law may require us to identify our customers. When we do this, we do so by collecting and verifying information about you. We may also collect and verify information about persons who act on your behalf.

Collecting and verifying information helps protect against identity theft, money laundering and other illegal activities.

### How we use it

We use your customer information to manage our relationship with you, give you the products and services you request and also tell you about the products and services offered by the Group, affiliated providers and external providers for whom we act as agent. We may disclose information to outsourced providers to whom we outsource certain functions. In all circumstances where we have outsourced certain functions we have confidentiality arrangements with those providers. We may also disclose customer information where required by law. If we have your email or mobile phone details we may contact you including by SMS. You may also receive information on the Group's products and services electronically.

### What we collect

As an individual, the type of information we may collect and verify includes your full name, date of birth and residential address.

If you are commonly known by two or more different names, you must give us full details of your other name or names.

### Protecting customer information

We comply with the National Privacy Principles as incorporated into the Privacy Act 1988 (Cth). We disclose customer information to other members of the Commonwealth Bank Group (including overseas members), so that the Group may have an integrated view of its customers and to facilitate the integrated treatment of its customers. It also enables other members of the Group to give you information about their products and services.

### Viewing your information

You can (subject to permitted exceptions) request access to your personal information by contacting Customer Relations (see page 22 for contact details).

We may charge you for providing access. For more information about our privacy and information handling practices, please refer to the Commonwealth Bank Group Privacy Policy Statement, which is available through [commbank.com.au](http://commbank.com.au) or on request from any Commonwealth Bank branch.



# GLOSSARY

### Medical Definitions Reference Guide

You should also refer to the Medical Definitions Reference Guide available at [commbank.com.au/SLD](http://commbank.com.au/SLD) for further information on some of the medical definitions used.

### What the words mean

**Cover start date** – the date we accept your application for cover, including requests to add and/or increase cover. This date is stated in your **policy schedule**. A new **cover start date** applies when you add cover or increase cover, but only in respect of the added cover or increased cover.

**Critical illness** – any one of the four medical conditions, including **cancer, coronary artery disease requiring by-pass surgery, heart attack** and **stroke** as defined in the Medical Definitions Reference Guide available at [commbank.com.au/SLD](http://commbank.com.au/SLD)

**Employed** – means you are:

- Working in one of the eligible types of employment explained in the box below and you carry out identifiable duties in relation to that employment; and
- Actually performing or capable of performing those duties; and
- In our opinion, not restricted by illness or injury, from performing those duties on a full-time basis, where full-time basis means 20 hours per week.

#### Eligible types of employment

##### Permanently employed

- You've been working for at least 20 hours per week in a continuous, permanent and regular employment that is not seasonal in nature and for at least 180 consecutive days.

##### Working under a fixed term contract

- You're working under one or more contracts providing at least 20 hours per week of continual and regular employment, where the contract or contracts is or are:

- For salary or wages;
- For a specific period;
- With the same employer; and
- For a combined period of at least 180 consecutive days.

**Hazardous conditions** – this means we won't pay a benefit if you die, become **terminally ill**, are **permanently disabled** or suffer a **critical illness** directly or indirectly from working in these hazardous conditions:

##### Hazardous conditions and occupation examples not covered

- Working above heights of 15m outside of a building or above 15m in a building under construction. **Examples include tree loppers, window cleaners, construction workers**
- Working below the surface, either underground, underwater or outside of a building or in a building under construction. **Examples include miners, construction workers, divers**
- Work requiring the handling or transport of explosives or firearms. **Examples include Police officers, armed security work, on-site construction workers**
- Working offshore. **Examples include work on offshore oil, gas platforms or ships, commercial fishing.**

**Home duties** – this means your main occupation is to maintain your family home which includes performing all of the following duties:

- Cleaning the usual place of dwelling
- Purchasing household food and items used for cleaning
- Preparing meals for the household
- Performing for the household laundry services such as washing or ironing

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## GLOSSARY (CONTINUED)

- Driving or transporting family to and from school, sport, work or social events (where applicable)
- Taking care of a child or dependent family members (where applicable).

If also in paid employment, you must be working less than 20 hours per week, otherwise we will not consider you performing **home duties** for the purpose of this definition.

**Home duties** do not include duties performed outside the person's family home for salary, reward or profit.

**Medical help** – see page 9

**Medical practitioner** – as defined in the Medical Definitions Reference Guide at [commbank.com.au/SLD](http://commbank.com.au/SLD).

We must be satisfied with the **medical practitioner's** qualifications.

**Permanent Australian resident**

– means you have been living in Australia for at least 12 months and are an Australian resident for tax purposes. For the purpose of this definition, you will stop being a **permanent Australian resident** when you live outside Australia for more than 12 consecutive months.

**Permanently disabled, permanent disablement** – see page 12

**Policy schedule** – the document we send you confirming your cover and **cover start date**, and any subsequent endorsements.

**Pre-existing condition** – see page 9

**Smoker** – you are a smoker if you have smoked any substance including cigarettes or tobacco and/or used chewing tobacco in the last 12 months.

**Terminal illness** – see page 10

## OUR ONGOING RELATIONSHIP

# OUR ONGOING RELATIONSHIP

### Contact us

Whether you need something clarified, would like to update your personal or policy details or adjust your billing, we're happy to help.

You can always get in contact with us in one of the following ways:

### Email us

[simplelife@cba.com.au](mailto:simplelife@cba.com.au)

### Call us

**13 39 82** between 8.00am and 8.00pm (Sydney time).

### Write to us

Commlnsure Life. Insurance Services.  
PO Box 328, Silverwater NSW 2128

### National Relay Service

The National Relay Service may assist anyone who is deaf or has a hearing or speech impairment.

- TTY/Voice: 133 677
- SSR: 1300 555 727

[www.relayservice.com.au](http://www.relayservice.com.au)

### Electronic notices

You can choose to receive notices for your policy electronically. When you do this we will send you important notices (for example your annual notification and any cancellation of cover) to the email address we have recorded as your nominated email address.

It's therefore important to keep us informed of any changes to your email address and mobile number to ensure you're aware of all notices relating to your policy.

All notices are said to be sent by us and deemed to be received by you when our system shows that the email has left our system for delivery to your email address.

### Annual notification

We'll send you a notification each year before your policy anniversary to confirm your latest policy details, including your cover and premium.

If you have not already, you should advise us of any lifestyle changes that may affect your policy – see *Changing your policy* on page 8.

### What to do if you need to claim

When the unexpected happens, we're here to help. Simply call us on **13 39 82** between 8.00am and 8.00pm (Sydney time), Monday to Friday and

we'll explain what is needed to assess your claim.

Once you've returned the claim forms we send you together with the required supporting evidence, we'll keep you updated through the assessment process.

### What to do if you have a complaint

We accept sometimes we get things wrong and when we do, we're determined to help make them right again. Most problems can be resolved quickly by simply talking with us on **13 39 82**.

For further assistance, contact Customer Relations on **1800 805 605** or email to [customerrelations@cba.com.au](mailto:customerrelations@cba.com.au) or by writing to: CBA Group Customer Relations, Reply Paid 41, Sydney NSW 2001.

Please mark your letter 'Notice of Complaint'.

When you make a complaint we will:

- acknowledge your complaint
- give you a reference number and contact details so that you can follow up if you want to
- make sure we understand the issues and investigate the cause of your concern
- do everything we can to fix the problem
- respond to you as quickly as possible
- keep you informed of our progress if the matter can't be resolved quickly
- keep a record of your complaint.

### What to do if you have a complaint

#### - External dispute resolution

If you are dissatisfied with the response you receive or our decision, you may refer your complaint to the Australian Financial Complaints Authority (AFCA). AFCA offers a free independent dispute resolution service for consumer and small business complaints.

You can contact AFCA on **1800 931 678** between 9 am and 5 pm (Sydney time), Monday to Friday from anywhere in Australia, online at [www.afca.org.au](http://www.afca.org.au), or by writing to:

Australian Financial Complaints Authority  
GPO Box 3  
Melbourne VIC 3001

You can always get in contact with us in one of the following ways:

Email:

**[simplelife@cba.com.au](mailto:simplelife@cba.com.au)**

Call us:

**13 39 82**

8.00am and 8.00pm (Sydney time).

Write to us:

**CommInsure Life Insurance  
Services.**

**PO Box 328 Silverwater, NSW 2128**

