

Inbuilt temporary incapacity benefits for Defined Benefit Division members



As a DBD member, you may be able to access a temporary incapacity benefit should you suffer an illness or injury and be unable to work.

What is a temporary incapacity benefit?

A temporary incapacity benefit is an inbuilt feature of the Defined Benefit Division membership and is calculated using a formula in the Trust Deed.

If you're assessed as meeting the definition of temporary incapacity in the UniSuper Trust Deed, you'll be eligible to receive a temporary incapacity benefit.

To make a claim, a temporary incapacity benefit is defined as a state of health which, in the opinion of the Trustee, leaves you unable to perform your own duties or any other duties for which you're reasonably qualified by training and experience at your place of employment where:

- you've met the 'waiting period'. This means:
 - being absent from employment through injury or illness for 60 days—pro-rata if you work part time—within a period of twelve consecutive months immediately prior to lodging your claim, or
 - if your injury/illness occurred before 1 July 2019, being absent from employment for the lesser of 60 days—pro-rata if you work part time—or three months within a period of twelve consecutive months immediately prior to lodging your claim, and
- the Trustee is satisfied that your state of health isn't due to or induced by any wilful action on your part to obtain a benefit.

You're eligible to claim a temporary incapacity benefit while on approved leave without pay from your employer but you must have used all your paid sick leave.

How to make a temporary incapacity claim

1. Call us on **1800 331 685** to request the relevant forms
2. Have the following forms completed and return them to us as soon as possible so we can start to assess your claim:
 - a. 'Member's statement' in the *Temporary incapacity benefit application form* (you must be absent from work due to injury or illness on the date you sign the Member's statement)
 - b. Employer's statement
 - c. Attending doctor's medical report*
 - d. Attending specialist's medical report*, and
 - e. Medicare forms if you've been a DBD member for less than three years.

* Both medical reports must be completed by legally qualified medical practitioners.

The sooner you submit your forms, the sooner we can start assessing your claim. We must receive all forms and supporting documents within 90 days of the date we start receiving documents from you—otherwise, you'll need to re-submit your initial form and start the claim process again.

How long does it take to assess?

The time it takes to assess claims varies. We assess claims according to the medical evidence provided. We may need to contact you to request additional information or documentation, further medical reports (historical and current) from your treating doctors, or to request that you attend an independent medical examination. If we require more information or documentation, this can delay the processing of your application.

When does payment commence?

If your claim is approved, your temporary incapacity benefit will commence from the later of:

- the date your 'waiting period' ends, and
- the date your paid sick leave expires.

However, to be eligible to receive a temporary incapacity benefit, you'll need to demonstrate that due to injury or illness, your employment has terminated—or if your employment is continuing, that you're no longer receiving a salary or paid sick leave.

Prior to your first payment, you'll need to submit a *Tax file number declaration* form (if you're under age 60) and your financial institution account details, along with certified proof of identity documents. We've included instructions for providing certified proof of identity at the end of this fact sheet.

How is it paid?

Temporary incapacity benefits are paid as a monthly benefit into your nominated financial institution account. Once the payments have commenced, the benefit amount will automatically increase in line with the Consumer Price Index (CPI) on 1 July each year.

For information about how temporary incapacity benefits are calculated, refer to the *Defined Benefit Division and Accumulation 2 Product Disclosure Statement*, available on our website.

When are temporary incapacity benefits not payable?

Temporary incapacity benefits won't be payable in a number of circumstances including:

- you meet the definition of temporary incapacity and you've completed less than three years contributing service after becoming a DBD member, and the Trustee considers that your temporary incapacity arose out of a pre-existing condition for which there are no special or exceptional circumstances;
- you meet the definition of temporary incapacity and the Trustee considers that your temporary incapacity is due to, or induced by, wilful action on your part to access a benefit;
- you're a DBD member and you cease contributing service and elect to defer your defined benefit component and the date of temporary incapacity is more than 90 days after ceasing service.



MORE INFORMATION

You'll find more details on temporary incapacity benefits in the *Defined Benefit Division and Accumulation 2 Product Disclosure Statement*, available at unisuper.com.au/pds.

This information is of a general nature only and includes general advice. It has been prepared without taking into account your individual objectives, financial situation or needs. Before making any decision in relation to your UniSuper membership, you should consider your personal circumstances, the relevant product disclosure statement for your membership category and whether to consult a licensed financial adviser.

This information is current as at July 2019 and is based on our understanding of legislation at that date. Information is subject to change. To the extent that this fact sheet contains information which is inconsistent with the UniSuper Trust Deed and Regulations (together the Trust Deed), the Trust Deed will prevail.

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