

Making a claim for Total and Permanent Disablement (TPD)

14.3% Defined Benefit members only

This fact sheet is for 14.3% Defined Benefit members who would like to know more about making a claim for Total and Permanent Disablement (TPD) in the APSS. SG Defined Benefit members are ineligible for a TPD benefit.

About the TPD benefit

14.3% Defined Benefit members will be paid a TPD benefit in the event of total and permanent disablement. Members up to age 60 are covered 24 hours a day, 7 days a week while they are employed by Australia Post or an Associated Employer (such as Startrack) and remain an APSS 14.3% Defined Benefit member. Members are also covered for up to 12 months while on approved unpaid leave. The benefit is provided at no cost to members.

When can I claim TPD?

You can claim TPD if you meet the definition of Total and Permanent Disablement. How TPD is defined depends on when you became a member of the APSS. The full definition of TPD is set out below:

If you last became a member on or before 30 June 2014

TPD is defined as disablement due to illness or injury as a result of which the member has suffered the loss of two limbs or the sight of both eyes or the loss of one limb and the sight of one eye (where limb is defined as the whole hand or the whole foot).

OR

Disablement due to illness or injury as a result of which:

- the member has been continuously absent from work for a period of not less than six months or such lesser period (if any) as may be agreed between Australia Post and the Trustee from time to time either generally or in any particular case,

AND

- the Trustee receives a certificate signed on behalf of the Claims Assessor to the effect that, in the opinion of the Claims Assessor, the member is incapacitated to such an extent as to render the member unlikely ever to engage in regular employment for which the member is, for the time being, reasonably qualified by reason of education, training or experience.

If you became a member on or after 1 July 2014

TPD is defined as ill-health (whether physical or mental) and the Trustee is reasonably satisfied that the member is unlikely, because of ill-health, to engage in gainful employment for which the member is reasonably qualified by education, training or experience.



Making a claim for Total and Permanent Disablement (continued)

How do I know if I'm eligible?

To be eligible to make a TPD claim, you must:

- have been a 14.3% Defined Benefit member at the time your disablement occurred

AND

- have stopped working with Australia Post or an Associated Employer **because of** your Total and Permanent Disablement.

You are ineligible if:

- You are aged 60 or over.
- You chose to leave the APSS Defined Benefit and your disablement occurred after you left.
- You were on probation when your disablement occurred.

If you're not sure about whether you are eligible to make a claim, call *SuperPhone* on **1300 360 373**. Other exclusions may apply in particular circumstances, as mentioned in *Your Defined Benefit and Member Savings Product Disclosure Statement* available at apss.com.au or by calling *SuperPhone*.

Am I covered for TPD while on unpaid leave?

Yes, you are covered while on all types of approved unpaid leave **for up to 12 months**.

You are not covered for TPD for more than one year of approved unpaid leave.

How do I make a TPD claim?

The first thing to do is call *SuperPhone* on **1300 360 373** and our service representatives will be able to guide you through the process and send you the relevant forms. If you became a member on or before 30 June 2014, for the forms to be sent to you, you must have stopped work and have been continuously absent for not less than six months. In certain circumstances this waiting period can be reduced or waived, for example for members who are terminally ill.

A number of forms will need to be completed by you and your treating doctor(s). The information provided in these forms, together with any other medical information or evidence received by the APSS, is used by the Claims Assessor (or the Trustee as relevant) to make a decision about whether your claim meets the definition of TPD and other eligibility requirements under the APSS Trust Deed.

What claim forms will I need to complete?

- ✓ **APSS TPD form 2** – to be completed by you.
- ✓ **APSS TPD form 3** – to be completed by two treating doctors (one must be a specialist).
- ✓ **Workers Compensation Consent form** (if applicable)
- ✓ **Privacy Consent Form**
- ✓ **Certified copy of your identification.**

Each of the forms must be completed in order for the Claims Assessor to consider your claim. If you do not provide your consent for the APSS to obtain all relevant information needed to consider your claim, you may be ineligible for a TPD payment.

You are responsible for the costs associated with providing the Claims Assessor with all of the forms listed above.

Making a claim for Total and Permanent Disablement (continued)

Who makes the decision about my claim?

The APSS Claims Assessor is appointed by the Trustee to form an opinion about your TPD claim. If you became a member on or before 30 June 2014, the Claims Assessor's opinion alone will be applied to consider whether you meet the definition of TPD. If you became a member on or after 1 July 2014, the Trustee will consider the Claim Assessor's opinion when reasonably satisfying itself about whether you are eligible for a TPD benefit.

The Claims Assessor may rely on medical information you supplied to Australia Post or your Associated Employer during your employment. More information about the Claims Assessor's duties is in the *TPD Guidelines* available from apss.com.au.

If the Trustee considers that an insurer would have declined or reduced any TPD benefit available to you (for example, because you made misleading statements or failed to disclose any relevant fact about your state of health when you started employment), it may reduce any additional payment by an amount it believes the insurer would have declined.

During the claims assessment process, you may be required to sit additional medical tests or to attend further medical examinations. You will be notified in writing if this is the case and you will not be required to pay for these tests.

TPD will not include disablement as a result of illness or injury which in the opinion of the Claims Assessor (or the Trustee as relevant) has been inflicted, incurred or aggravated for the purposes of obtaining a payment from the APSS.

Do I have a time limit to lodge a TPD claim after I stop working?

There is no specific time limit, but keep in mind that your claim documentation must show that your total and permanent disablement occurred **at the time you stopped working**, not at some stage after that. It may be much more difficult to obtain reliable medical evidence about your medical condition at the time you stopped working if a long period has passed since then.

In addition, you may not be eligible to make a complaint about your TPD claim to the Australian Financial Complaints Authority if you didn't submit your original claim to the Trustee within 2 years of permanently stopping work.

How long does it take for the APSS to make a decision on my claim?

It is difficult to put a time frame on the time it takes to assess a TPD claim because each claim is very different. If you are required to attend additional medical examinations then the process will take longer. We will contact you as soon as possible after a decision has been made about your claim, or if we require more information from you.

The APSS aims to finalise all TPD claims as soon as possible after receiving all of the required paperwork for a claim.

If my TPD claim is accepted, what will I receive?

If your TPD claim is accepted, your lump sum benefit payment will consist of:

- ✓ your APSS benefit – made up of your accrued Defined Benefit (on the day you stop work) and any Member Savings you may have
- ✓ **PLUS** an additional TPD benefit – calculated as $14.3\% \times \text{your last Final Average Salary (FAS)}^* \times \text{the number of years from the date of disablement until your 60th birthday}$
- ✓ **LESS** tax payable. The amount of tax depends on your age, the nature of your disablement, the amount of your total APSS benefit and the taxable components of your benefit
- ✓ **LESS** any surcharge, family law or other offset account liability.

*Your FAS upon TPD is calculated differently to your current FAS both for calculating the additional TPD benefit and the accrued Defined Benefit. Refer to the relevant section of the *Your Defined Benefit and Member Savings PDS*.

Making a claim for Total and Permanent Disablement (continued)

If my claim is not accepted, can I submit further medical evidence?

If your claim is not accepted, you will be provided with a list of all the evidence considered by the Claims Assessor to make a decision about your claim. You may request a copy of any or all of the evidence considered in your claim.

You may also submit any **new and relevant medical evidence** and the Claims Assessor will re-consider your new information. You will be responsible for the costs associated with providing new and any additional medical evidence.

What happens if I'm not happy with the decision?

If your TPD claim is not accepted, we will write to you and provide you with an outline of the reasons why your claim was not accepted.

If you wish to object to the decision, you may submit a formal complaint to:

APSS Inquiries and Complaints Officer
Locked Bag A5005, Sydney South NSW 1235

We will let you know we have received your complaint and notify you as soon as possible after a decision has been made about your complaint. You are entitled to request written reasons for the decision.

If you are not happy with the complaint response, you may be eligible to submit a complaint to the Australian Financial Complaints Authority (AFCA), an independent body established by the Federal Government to review, consider and resolve complaints from consumers across the entire financial system, including the superannuation sector. Certain time limits apply to TPD-related complaints submitted to AFCA. Contact AFCA for more information on these time limits.

Contact AFCA via phone **1800 931 678**, email **info@afca.org.au** or write to **AFCA, GPO Box 3, Melbourne VIC 3001**. Go to **www.afca.org.au** for more details.

Do I need legal representation?

This is not something that the Trustee can advise you on. However, you may wish to consider seeking independent legal advice if you are not happy with the Trustee's initial decision about the TPD claim. The APSS cannot provide you with any legal advice.

More information

If you would like more information about making a TPD claim, call *SuperPhone* on **1300 360 373** to speak to an APSS Service Representative. Please also read the current *Your Defined Benefit and Member Savings Product Disclosure Statement*, available from **apss.com.au**.

This fact sheet contains general information for 14.3% Defined Benefit members of the Australia Post Superannuation Scheme (APSS). It is not intended to be financial product advice and does not take your personal circumstances into account. Before acting on any information contained in this document you should first consider its appropriateness to your own circumstances. You may wish to seek the advice of a licensed financial adviser. PostSuper Pty Limited is not licensed to provide you with financial product advice regarding your investment in the APSS. Neither Australia Post nor any Associated Employers holds an Australian Financial Services Licence and, therefore, neither is licensed to provide you with financial product advice. Australia Post Superannuation Scheme (ABN 42 045 077 895) Issuer: PostSuper Pty Ltd (ABN 85 064 225 841) RSE Licence Number L0002714 APSS Registration Number R1056549. Issued: July 2021.