# How to claim an Income Protection benefit



**Information sheet** 

September 2024

#### NGS Super offers 3 ways to lodge a claim



Tele-Claim over the phone



**Online** via member portal



Paper mail or email form

A key advantage of Tele-Claim is that most of the information gathering is done verbally by our Insurer. You can skip unnecessary questions based on your individual circumstances, minimising the number of follow-up questions. You can request a copy of the information provided in a Tele-Claim conversation so you can make any corrections.

## How do I qualify for an Income Protection payment?

To get IP payments, you must prove that you remain unable to do your usual work duties. We, as the trustee, will consider you to have a disability if you become sick or injured and, as a result, you:

- cannot perform one or more of the important duties of your occupation (i.e. the duties that are necessary to produce your Pre-Disability Income)
- earn less than your Pre-Disability Income and
- are under the regular care of a registered medical practitioner.

If your medical practitioner believes that your condition may continue longer than your waiting period and you meet the conditions listed above, you can apply for IP payments. With the help of the Insurer, we will assess your claim and make a decision based on the medical facts. After your initial waiting period, while you still have a disability, your monthly payments continue for up to a maximum of the benefit period that applies to your cover, which will be either:

- 2 years
- 5 years
- to age 65 or
- to age 67.

1. If you're aged between 65 and 67, your cover maximum is 70% of your Pre-Disability Income, and nil super contribution.



## Notes before you make a claim

Generally, you should only have IP cover with one Insurer. If you are receiving income from other sources while eligible for an IP payment, your benefit amount may be reduced.

Income from other sources – referred to as Disability Income – includes:

- paid sick leave
- amounts paid or payable under legislation, such as workers' compensation or motor accident compensation
- benefits or other income you may receive which, in the Insurer's opinion, you could reasonably be expected to earn while Totally or Partially Disabled
- any benefits payable under other IP policies.

### How do I make a claim?

If you're injured or sick and are unable to work for your waiting period (90 days for Default Cover), follow these steps to make your IP claim.

What you need to do	What our Insurer will do
Step 1	
Call us on <b>1300 133 177</b> to tell us you'd like to make a claim.	Our claims team will ask for information to confirm if you're eligible to claim.
	Our Insurer will assign you a case manager. They'll contact you to discuss your claim and the process involved, as well as answer any questions you have.
	To support your claim, our Insurer will need information from you, your employer and your treating doctor or specialist.
Step 2	
Return any requested forms or documentation to us or our Insurer. Your case manager will let you know when they've received your documents.	Our Insurer will assess your claim
	They will ask your employer to confirm your employment details. They will assess your claim using the medical and other information given.
	Your case manager will regularly update you on the progress of your claim and any outstanding requirements
	They will assess your claim and make a decision in a considered and efficient manner, based on the information given. Everyone's situation is unique; the time it takes to assess your claim depends on factors including:
	• the type and complexity of your claim
	<ul> <li>the amount of information they must review</li> </ul>
	<ul> <li>how quickly they are given the information needed.</li> </ul>
	If they need more information
	If they need a report or more information from your doctor or specialist, they will let you know. They may also ask you to see an independent doctor or specialist.
Step 3	
Provide any additional information or medical evidence requested.	Our Insurer will assess your claim, taking into account any additional information supplied. (continued over)

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# How do I make a claim? (continued)

What you need to do	What our Insurer will do	
Step 4		
<ul> <li>If your claim is accepted</li> <li>Our Insurer will need your identification and a completed claim payment form with your bank account details for payment of your benefits. The Insurer will make your monthly payments in arrears.</li> <li>Income tax is payable on IP payments, so you'll need to complete a tax file number (TFN) declaration form.</li> <li>You will need to continue treatment with your medical practitioner - our Insurer will ask for updates from them when needed to continue the assessment of your claim.</li> </ul>	Our Insurer will monitor your recovery and provide ongoing support If you're able to start working reduced hours or duties, your payments will be adjusted to incorporate any salary you earn. If your injury is determined to be permanent and you qualify for a Total and Permanent Disablement (TPD) benefit, your IP payments will still continue till the end of the selected benefit.	
Step 5		
If your claim is not accepted, you have the right to appeal against the decision. You should provide any new evidence you may have to support your case, and your claim will be re-assessed. Once we have reviewed your claim, the decision will be further reviewed by the Fund's Claims Review and Insurance Committee before we advise you of the decision. If you are still dissatisfied with the decision, you may put your concerns in writing to NGS Super's <b>Complaints Officer</b> and further action taken to further review your claim. If you are still not satisfied with the decision, you can lodge a complaint within 2 years with the Australian Financial Complaints Authority (AFCA). <b>Australian Financial Complaints Authority (AFCA)</b> Mail: GPO Box 3 MELBOURNE VIC 3001 Phone: 1800 931 678 (free call) <b>Email:</b> info@afca.org.au Online: afca.org.au This is a free service to you.	If our Insurer declines your claim, we'll complete an independent review of the decision and the evidence relied upon. The review will determine whether the decision was fair and reasonable. If we disagree with the Insurer's decision, we will have your claim reassessed. Our Insurer then may ask for more evidence. If the decision to decline is upheld, we'll write to you to let you know.	

### Do you need more information?

If you'd like to know more about Income Protection cover, or would like to make a claim, please call us on **1300 133 177**, Monday to Friday, 8am–8pm (AEST/AEDT) or visit the website at **ngssuper.com.au/pds** to download a copy of the **NGS Accumulation Product Disclosure Statement** and **Insurance guide**.

We also offer low-cost tailored advice through NGS Financial Planning. To make an appointment, call us on **1300 133 177** or complete the **Financial Advice Enquiry Form** or visit **ngssuper.com.au/advice** for more information.

#### Important information

You should consider all the information contained in the **NGS Accumulation Product Disclosure Statement**, **FSG** and **Target Market Determination** before making a decision about investing in NGS Super. The content provided in this information sheet is general information only and does not take into account your objectives, financial situation or needs. Before making a financial decision, please assess the appropriateness of the information to your individual circumstances and consider seeking professional advice.

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