

St.George Protection Plans

Enhancements Guide

Effective 5 April 2021

Your insurance policy now covers you for more – we've made enhancements to your St.George Protection Plans policy

At St.George, we're committed to continually reviewing and enhancing our life insurance features, ensuring the protection available to you is both comprehensive and includes up-to-date terms and conditions. We've enhanced your St.George Protection Plans policy to better assist you and your loved ones, if you need to make a claim or make changes to your policy.

These updates are part of your contract with us. Essentially, this means that in the event you need to make a claim, you are covered for more features and benefits at no extra charge¹.

This Policy Enhancements Guide (Guide) sets out the terms and conditions of the most recent enhancements, which we made to St.George Protection Plans on 5 April 2021.

Please refer to your St.George Protection Plans Product Disclosure Statement and Policy Document (PDS), as well as your *Policy Schedule, Membership Certificate or Renewal Summary* for full details of the benefits and features provided under your policy.

If you have any questions, or would like to discuss your cover, please contact your financial adviser or our Customer Relations Team on 1300 366 416, Monday to Friday, 8.00am to 6.30pm (Sydney time).

1. Please note that yearly adjustments to your premium amount (which may be based on age, Consumer Price Indexation (CPI), and a range of other aspects of your policy) will continue under your policy.

What's changed?

Policy terms and conditions

The following pages contain the detailed terms and conditions of the most recent enhancements that were made to St. George Protection Plans on 5 April 2021.

If you ever need to submit a claim on your St. George Protection Plans policy, we'll assess your *sickness or injury* against the most favourable enhancements available, from the day your policy commenced to the date of the *sickness or injury*.

Please note that your claim will not be assessed under the new terms and conditions outlined in this Guide if the *sickness* first became apparent, or the *injury* was sustained, before these changes were introduced on 5 April 2021.

Understanding this Guide and the fine print...

When you read this Guide, this is what we mean:

'We', 'us' and 'our' means the *Insurer*.

'Policy Owner' means the person (or entity) shown as the Policy Owner in the *Policy Schedule, Renewal Summary* or *Membership Certificate*. For Policies held inside *superannuation*, the Policy Owner is the trustee of the superannuation fund.

'Insured Person' means the person whose life is insured, or the life to be insured. The name of each Insured Person is set out in the *Policy Schedule, Renewal Summary* or *Membership Certificate* under the heading, Insured Person.

'You' and 'your' means the Insured Person for all Policies paid through a *Super Fund*, and for all other Policies means the Policy Owner.

You will notice that some words are in *italics*. These words have a particular meaning that can be found in your PDS. If you would like another copy of your PDS, please call us on 1300 366 416.

Not all enhancements specified in the following may apply to you or your policy. The following colour coded icons will help you understand which terms and conditions apply to you.

You can refer to your *Renewal Summary* to identify which of the enhancements apply to your cover.

TL	Term Life
TLS	Term Life as Superannuation
TPD Standalone	Standalone TPD Insurance
+TPD	TPD Benefit (as an additional benefit to a Term Life or Term Life as Superannuation Policy, unless specified otherwise)
LI Standalone	Standalone Living Insurance
+LI	Living Benefit (as an additional benefit to a Term Life or Term Life as Superannuation Policy)
NB	Needlestick Benefit
CB	Children's Benefit
IP Own	Income Protection with the <i>own occupation IP</i> definition
IP Home	Income Protection with the <i>home duties IP</i> definition
IP General	Income Protection with the <i>general cover IP</i> definition
IPS Own	Income Protection as Superannuation with the <i>own occupation IP</i> definition
IPP Own	Income Protection Plus with the <i>own occupation IP</i> definition
IPP Home	Income Protection Plus with the <i>home duties IP</i> definition
BOH	Business Overheads
KPI	Key Person Income

Additional information

Will these enhancements impact my premiums?

The enhancements set out in this Guide are part of the 'guaranteed upgrades' feature of your policy. They are now included in your policy at no additional cost to you and they will not impact your premiums.

Your premiums may be adjusted each year as a result of an increase to your cover (to protect it against the effects of inflation) and the age of the Insured Person. We will send you a *Renewal Summary* prior to your next policy anniversary with details of the premium amount owing for the following year.

Do the enhancements change what I am protected against?

You are still covered under the terms in the PDS that was issued to you when you took out your policy. Some of the benefits have been enhanced, which means that you now have more comprehensive cover.

Benefit Enhancements

Specified medical event enhancements

We regularly review the *specified medical events* and *specified children's events* to ensure that they remain in line with latest advancements in medical testing and treatments.

Alzheimer's disease and other dementias – permanent and irreversible and of specified severity



Standalone



Own



Home

The definition of the 'Alzheimer's disease and other dementias – permanent and irreversible and of specified severity' *specified medical event* (full payment) has been updated as follows:

Dementia including Alzheimer's disease – permanent and irreversible and of specified severity

Means the *confirmed diagnosis* of dementia including Alzheimer's disease by a *suitably trained doctor*, who will generally be a consultant neurologist or geriatrician. The diagnosis must confirm permanent and irreversible failure of the brain function with cognitive impairment. A Mini-Mental State Examination score of 24 or less out of 30, or evidence from another neuro-psychometric test that indicates cognitive impairment of at least the same severity, is required.

Angioplasty – single or double vessel

LI

Standalone

+LI

The definition of the 'Angioplasty – single or double vessel' *specified medical event* (partial payment) has been updated as follows:

Angioplasty – single or double vessel

Undergoing either angioplasty, cardiac keyhole surgery or stent insertion on one or two coronary arteries, as considered necessary by a *suitably trained doctor*, who will generally be a cardiologist, to treat coronary artery disease.

Angiographic evidence is required to confirm the need for this procedure.

Angioplasty – triple vessel

LI

Standalone

+LI

IPP

Own

IPP

Home

The definition of the 'Angioplasty – triple vessel' *specified medical event* (full payment) has been updated as follows:

Angioplasty – triple vessel

Undergoing for the first time either angioplasty, cardiac keyhole surgery or stent insertion on 3 or more coronary arteries within a single procedure, or in two procedures no more than two months apart, as considered necessary by a *suitably trained doctor*, who will generally be a cardiologist to treat coronary artery disease.

Angiographic evidence is required to confirm the need for this procedure.

Burns (severe) – covering specified surface area



The definition of the 'Burns (severe) – covering specified surface area' *specified medical event* (full payment) and *specified children's events* has been updated as follows:

Burns (severe) – that meet specific surface area or treatment criteria

Tissue *injury* caused by third degree or full thickness burns to:

- a. at least 20% of the body surface area as measured by the 'Rule of Nines' or the Lund & Browder Body Surface Chart (or equivalent classification); or
- b. at least 50% of both hands, requiring surgical debridement and/or grafting; or
- c. at least 50% of both feet, requiring surgical debridement and/or grafting; or
- d. the face, requiring surgical debridement and/or grafting; or

The undergoing of treatment for tissue *injury* caused by burns by:

- a. mechanical ventilation required continuously for three days for inhalation burns; or
- b. skin grafting to greater than 20% Total Body Surface Area (TBSA) as measured by the 'Rule of Nines' or the Lund & Browder Body Surface Chart (or equivalent classification) due to full thickness or deep dermal burns; or
- c. escharotomy, fasciotomy or surgical amputation of *limb* or at least a whole finger.

Carcinoma in situ of female organs

LI

Standalone

+LI

The definition of the 'Carcinoma in situ of female organs' *specified medical event* (partial payment) has been updated as follows:

Carcinoma in situ of specified organs

The Insured Person is confirmed by biopsy to have localised cancer characterised by a focal autonomous new growth of carcinomatous cells, which has not yet resulted in the invasion of normal tissues. 'Invasion' means an infiltration and/or active destruction of normal tissue beyond the basement membrane.

Carcinoma in situ of the following sites are covered:

- a. Cervix-uteri (the tumour must be classified as Tis according to the TNM staging method or high grade squamous intraepithelial lesion (HSIL));
- b. Corpus-uteri (the tumour must be classified as Tis according to the TNM staging method).
- c. Fallopian tube (the tumour must be limited to the tubal mucosa and classified as Tis according to the TNM staging method).
- d. Ovary (the tumour must be classified as Tis according to the TNM staging method).
- e. Vagina (the tumour must be classified as Tis according to the TNM staging method).
- f. Vulva (the tumour must be classified as Tis according to the TNM staging method).
- g. Breast (the tumour must be classified as Tis according to the TNM staging method).

Cardiac arrest - occurs out of hospital and of specified severity



The definition of the 'Cardiac arrest - occurs out of hospital and of specified severity' *specified medical event* (full payment) has been updated as follows:

Cardiac arrest - occurs out of hospital and of specified severity

Cardiac arrest occurring out of hospital not associated with any medical procedure and documented by an ECG or ECG rhythm strip showing cardiac asystole, ventricular fibrillation or ventricular tachycardia. If an ECG is not available, we will consider other evidence acceptable to us that confirms an out of hospital cardiac arrest event has occurred. Such evidence may include but is not limited to Automated External Defibrillator (AED) data, and ambulance and hospital medical reports confirming cardiac arrest.

Deafness (both ears) - permanent and irreparable



The definition of the 'Deafness (both ears) - permanent and irreparable' *specified medical event* (full payment) and *specified children's events* has been updated as follows:

Loss of hearing (both ears) - permanent, irreversible and of specified severity

Loss of hearing means irreversible loss of hearing, as a result of *sickness* or *injury*, in both ears, that:

- has permanent hearing loss of greater than 90 decibels at all frequencies from 500 hertz to 3,000 hertz, even with amplification, or
- has loss of hearing requiring the Life Insured to have undergone cochlear implantation.

The diagnosis must be confirmed by results from a specialist audiological assessment (including electrophysiological testing when required).

Deafness (one ear) – permanent and irreparable

LI

Standalone

+LI

The definition of the 'Deafness (one ear) – permanent and irreparable' *specified medical event* (partial payment) has been updated as follows:

Loss of hearing (one ear) – permanent, irreversible and of specified severity

Loss of hearing means irreversible loss of hearing, as a result of *sickness or injury*, in one ear, that:

- has permanent hearing loss of greater than 90 decibels at all frequencies from 500 hertz to 3,000 hertz, even with amplification, or
- has loss of hearing requiring the Life Insured to have undergone cochlear implantation.

The diagnosis must be confirmed by results from a specialist audiological assessment (including electrophysiological testing when required).

Diabetes (severe) – of specified severity



The definition of the 'Diabetes (severe) – of specified severity' *specified medical event* (full payment) has been updated as follows:

Diabetes (severe) – of specified severity

Severe diabetes mellitus, either insulin or non-insulin dependent, as certified by a *suitably trained doctor*, who will generally be a consultant endocrinologist this must result in at least two of the following criteria:

- a. severe diabetic retinopathy resulting in visual acuity whether aided or unaided of 6/36 or less in both eyes;
- b. severe diabetic neuropathy causing motor and/or autonomic impairment;
- c. diabetic gangrene leading to surgical intervention;
- d. severe diabetic nephropathy causing chronic irreversible renal impairment (as measured by a corrected creatinine clearance below the laboratory's measured normal range); or
- e. persistent sensory neuropathy.

Diabetes (Type 1 insulin dependent) – of specified severity



The definition of the 'Diabetes (Type 1 insulin dependent) – of specified severity' *specified medical event* (partial payment) has been updated as follows:

Diabetes (Type 1 insulin dependent) – of specified severity

Means a diagnosis of Type 1 insulin dependent diabetes mellitus, as certified by a *suitably trained doctor*, who will generally be a consultant endocrinologist, and resulting in at least two of the following criteria:

- a. urinary protein excretion of more than 300mg per day;
- b. diabetic retinopathy with a minimum severity of at least exudates and/or dot-blot haemorrhages; or
- c. persistent sensory neuropathy.

Encephalitis - resulting in significant impairment

LI

Standalone

+LI

IPP

Own

IPP

Home

CB

The definition of the 'Encephalitis - resulting in significant impairment' *specified medical event* (full payment) and *specified children's events* has been updated as follows:

Encephalitis - resulting in significant impairment

Severe inflammatory disease of the brain resulting in neurological deficit that causes either:

- a. *significant functional impairment*, as confirmed by a *suitably trained doctor*, who will generally be a consultant neurologist; or
- b. an inability to perform at least one of the activities of daily living (as defined in this chapter).

Heart attack – of specified severity



The definition of the 'Heart attack – of specified severity' *specified medical event* (full payment) has been updated as follows:

Heart attack – of specified severity

Death of heart muscle caused by inadequate blood supply, evidenced by typical rise and/or fall of cardiac biomarker blood tests with at least one of the following:

- a. Acute cardiac symptoms consistent with a heart attack;
- b. New serial electrocardiograph changes associated with heart attack; or
- c. Imaging evidence of new loss of viable myocardium or new regional wall motion abnormality.

If the above tests are inconclusive or superseded by technological advances, we will consider other appropriate and medically recognised tests in support of a diagnosis of a heart attack.

The following are specifically excluded:

- other acute coronary syndromes, including but not limited to angina pectoris;
- takotsubo cardiomyopathy; and
- any elective percutaneous procedure for coronary artery disease, which is the sole cause of a rise in cardiac biomarkers.

Hepatitis B or C – occupationally acquired

NB

The definition of the ‘Hepatitis B or C – occupationally acquired’ has been updated as follows:

Hepatitis B or C – occupationally acquired

Occupationally acquired hepatitis B or hepatitis C where the virus was acquired due to an *accident* occurring while the Insured Person was engaging in their *usual occupation* as a medical professional and proof of sero-conversion from:

- a. Hepatitis B surface antigen negative to hepatitis B surface antigen positive; or
- b. Hepatitis C antibody negative to hepatitis C antibody positive, being demonstrated by testing within six months of the *accident*.

Hepatitis B or hepatitis C acquired in any other manner is excluded.

Exclusions

- The Insured Person will be deemed not to have Hepatitis B – occupationally acquired if any cure is found for hepatitis B; or
- The Insured Person will be deemed not to have Hepatitis C – occupationally acquired if the Insured Person achieves a Sustained Virologic Response (SVR) six months after the cessation of anti-viral therapy for Hepatitis C infection. A SVR is defined as the lack of detectable Hepatitis C virus RNA at least six months following completion of antiviral therapy for Hepatitis C.
- The Insured Person will be deemed not to have Hepatitis B or C – occupationally acquired if after infection, the Insured Person had elected not to take a medical treatment that is available prior to the making of a claim.

Idiopathic pulmonary arterial hypertension – resulting in significant permanent impairment



The definition of the 'Idiopathic pulmonary arterial hypertension – resulting in significant permanent impairment' *specified medical event* (full payment) has been updated as follows:

Idiopathic pulmonary arterial hypertension – resulting in significant permanent impairment

Idiopathic pulmonary arterial hypertension associated with right ventricular enlargement, established by cardiac catheterisation, resulting in significant permanent physical impairment to the degree of at least Class 3 of the New York Heart Association classification of cardiac impairment as confirmed by a *suitably trained doctor*, who will generally be a cardiologist.

Loss of limbs – complete and irrecoverable



The definition of the 'Loss of limbs – complete and irrecoverable' *specified medical event* (full payment) and *specified children's events* has been updated as follows:

Loss of use of limbs – complete and irrecoverable

The complete and irrecoverable loss of use of both hands or both feet, or one hand and one foot, as a result of *sickness or injury*.

Loss of single limb – complete and irrecoverable

LI

Standalone

+LI

The definition of the 'Loss of single limb – complete and irrecoverable' *specified medical event* (partial payment) has been updated as follows:

Loss of use of single limb – complete and irrecoverable

The complete and irrecoverable loss of use of one hand or one foot as a result of *sickness or injury*.

Loss of sight (both eyes) – of specified severity

LI

Standalone

+LI

IPP

Own

IPP

Home

CB

The definition of the 'Loss of sight (both eyes) – of specified severity' *specified medical event* (full payment) and *specified children's events* has been updated as follows:

Loss of sight (both eyes) – of specified severity

Loss of sight (both eyes) means the permanent loss of sight:

- a. as a result of *sickness or injury*; and
- b. certified by a *suitably trained doctor*; and
- c. either:
 - i. after the correction of suitable lenses, the visual acuity on the Snellen scale is 6/60 or less in both eyes; or
 - ii. whether or not there has been a correction of lenses, the field of vision is constricted to 20 degrees or less of arc around the central fixation in both eyes (equivalent to 1/100 test object).

Loss of sight (single eye) – of specified severity

LI

Standalone

+LI

The definition of the 'Loss of sight (single eye) – of specified severity' *specified medical event* (partial payment) has been updated as follows:

Loss of sight (single eye) – of specified severity

Loss of sight (single eye) means the permanent loss of sight:

- a. as a result of *sickness or injury*; and
- b. certified by a *suitably trained doctor*; and
- c. either:
 - i. after the correction of suitable lenses, the visual acuity on the Snellen scale is 6/60 or less in one eye; or
 - ii. whether or not there has been a correction of lenses, the field of vision is constricted to 20 degrees or less of arc around the central fixation in the affected eye (equivalent to 1/100 test object).

Muscular dystrophy

LI

Standalone

+LI

IPP

Own

IPP

Home

The definition of the 'Muscular dystrophy' *specified medical event* (full payment) has been updated as follows:

Muscular dystrophy

Means a *confirmed diagnosis* of muscular dystrophy which is an inherited disease characterised by progressive damage and weakening of muscles over time. The diagnosis must be made by a *suitably trained doctor* who will generally be a consultant neurologist.

Pneumonectomy – removal of a complete lung



The definition of the 'Pneumonectomy – removal of a complete lung' *specified medical event* (full payment) has been updated as follows:

Pneumonectomy – removal of a complete lung

The undergoing of surgery to remove an entire lung. This treatment must be deemed the most appropriate treatment and medically necessary by a *suitably trained doctor*.

Stroke – of specified severity



The definition of the 'Stroke – of specified severity' *specified medical event* (full payment) and *specified children's events* has been updated as follows:

Stroke – of specified severity

Any cerebrovascular accident (CVA) or incident resulting in neurological deficit. The stroke must:

- a. be confirmed by a *suitably trained doctor*, this will generally be a consultant neurologist; and
- b. be evidenced by neuro-imaging (e.g. CT, MRI or similar scanning technique).

The following are specifically excluded:

- cerebral events with reversible neurological deficits, including but not limited to transient ischemic attack;
- cerebral symptoms due to migraine;
- cerebral *injury* resulting from head trauma or hypoxia; and
- neurovascular disease or incident affecting the eye, optic nerve or vestibular functions.

Other Changes

We have made minor wording changes to the below sections of the PDS.

Suitably trained doctor



Replaced all references to a 'doctor acceptable to us' and 'doctor approved by us' to 'suitably trained doctor', which is defined as a doctor or specialist that has the appropriate training, qualifications and experience to provide an opinion, diagnosis and treatment.

Specified medical events, Living Benefit Advancement Benefit, Child Support Benefit, Children's Benefit, and Interim Living Benefit



Removed all references to 'we are satisfied' to ensure terms remain objective, and fair.

When your premiums will change

Deleted 'in the event of war or invasion involving Australia, we may give immediate notice of premium change.'

New discount available

New discount, known as IP60, to eligible Income Protection policies

IP60 gives you a 10% discount on your Income Protection² premiums for up to 2 years if your income protection benefit is less than or equal to 60% of your current salary.

How do I know if I am eligible?

To receive this discount, you must meet the following criteria;

1. be working;
2. have an income protection benefit that is less than or equal to 60% of your current salary;
3. earn an annual salary³ of less than or equal to \$320,000; and
4. your Income Protection policy commenced after March 1998.

For example, if your monthly pre-tax salary is \$5,000 and your monthly benefit is \$3,000 or less, you will qualify for the discount.

You may apply for the IP60 discount, through the My Wellbeing Portal at btlifemywellbeing.com

The IP60 discount is only available for the period it appears on our website and does not constitute a permanent change to the policy wording.

2. Business Overheads and Key Person Income are not eligible for IP60.

3. Salary means, if you are a PAYG employee, the normal annual value of income paid to you by your employer, including wages, superannuation contributions, fees, commissions, regular overtime, regular bonus payments and packaged fringe benefits. All amounts are calculated before the deduction of income tax. Salary does not include income which is not derived from your personal exertion or activities, such as interest or dividend payments. Or, if you are self-employed, the normal annual income earned by your business due to your personal exertion or activities, less your share of the expenses of the business, that were necessarily incurred in producing your income. All amounts are calculated before the deduction of income tax.

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For further information



Ask at any branch.



Call us on 13 33 30, 8.00am to 8.00pm
Monday to Friday (AEST).



Visit stgeorge.com.au



This information is current as at 5 April 2021, but is subject to change thereafter.

St.George Protection Plans are issued by Westpac Life Insurance Services Limited ABN 31 003 149 157 AFSL 233728 (WLISL), except for Term Life as Superannuation and Income Protection as Superannuation which are issued by BT Funds Management Ltd ABN 63 002 916 458 AFSL 233724 (BTFM) as trustee of the Retirement Wrap ABN 39 827 542 991. WLISL and BTFM are wholly owned subsidiaries of Westpac Banking Corporation ABN 33 007 457 141 (the Bank). The Bank does not guarantee the insurance.

This information has been prepared without taking into consideration your personal needs and financial circumstances. You should consider the appropriateness of this information with regard to your objectives, financial situation and needs. Before making a decision in relation to St.George Protection Plans, you should review your St.George Protection Plans Product Disclosure Statement (PDS) and consider whether the product is right for you. The PDS explains conditions, terms, limits and exclusions. If you need another copy of your PDS, call us on 1300 366 416.

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