

ANZ LIFE INSURANCE – KEY FACTS

JUNE 2019

This fact sheet provides key information about this product. Please refer to the ANZ Life Insurance Product Disclosure Statement and Policy (PDS) dated 1 June 2019 for complete information about the cover and the conditions, exclusions and limits that apply.



WHAT'S COVERED UNDER THIS POLICY?

ANZ Life Insurance provides two types of cover:

Life Cover – provides a lump sum payment in the event of your death. We will also pay the Life Cover benefit if you are diagnosed as terminally ill with less than 12 months to live.

An Advance Assistance Benefit is also included in the policy. This is a \$15,000 advance payment of part of your Life Cover benefit which is paid within five business days of receiving your death certificate or other satisfactory evidence.

Critical Illness Cover (optional) – provides a lump sum payment if you suffer one of the listed injuries or illnesses covered under the policy.



WHAT'S NOT COVERED?

We do not pay any claim arising directly or indirectly from:

- suicide within the first 13 months of the policy
- war, hostilities, civil commotion or insurrection
- your intentional act or omission

If stated on your Policy Schedule we also do not pay a claim for a **pre-existing medical condition** in the 5 years before the policy start date.



CRITICAL ILLNESS COVER (OPTIONAL)

Conditions covered by Critical Illness Cover include:

- burns (severe)
- cancer (excluding less advanced cases)⁺
- coronary artery bypass surgery⁺
- heart attack (diagnosed)⁺
- kidney failure (end stage)
- loss or paralysis of limb (permanent)
- multiple sclerosis (diagnosed)⁺
- stroke (diagnosed)⁺

⁺ 90-day qualifying period applies.

We also pay partial payments under Critical Illness Cover for certain conditions (maximum payment of \$10,000).

The conditions covered are:

- angioplasty⁺
- burns (of limited extent)
- carcinoma in situ (of limited sites)⁺
- diabetes mellitus adult, insulin dependent diagnosed after age 30⁺
- endometriosis (severe requiring surgical intervention)⁺

⁺ 90-day qualifying period applies.

Refer to the PDS for definitions of the conditions covered.

If we pay you any amount for the Advance Assistance Benefit or Critical Illness Cover, we reduce your Life Cover, and Critical Illness Cover where applicable, by the same amount. Your premium will be reduced accordingly.



WHAT IS THE QUALIFYING PERIOD FOR CRITICAL ILLNESS COVER?

Some Critical Illness conditions⁺ are subject to a qualifying period of 90 days. This means you are not covered for these conditions if they first occur or become reasonably apparent during the first 90 days after the policy start date or the date of the most recent reinstatement of cover.



WHAT IS A PRE-EXISTING MEDICAL CONDITION?

A pre-existing medical condition is an illness, injury or condition that, in the 5 years before the policy start date:

- you were aware of, or
- a reasonable person in the circumstances could be expected to be aware of.

For example, if you have symptoms of an illness, injury or condition for which a reasonable person may be expected to have sought medical advice before the start of your policy, you may not be able to claim any benefit for that illness, injury or condition.

To determine whether your claim relates to a pre-existing medical condition, we may, amongst other things, request and review information relating to your medical history.



HOW DOES A PRE-EXISTING MEDICAL CONDITION EXCLUSION WORK?

Example scenarios	Within 5 years before policy start date	Am I covered?
You have had a medical condition that is fully resolved more than 5 years before the policy start date	You have had no recurrence of the condition or any related symptoms or treatment for that condition	✓ You are covered for that condition
You have had a medical condition less than 5 years before the policy start date	You have had symptoms of this condition	✗ You are not covered for that condition*
You have a medical condition diagnosed more than 5 years before the policy start date	You have ongoing treatment for this condition	✗ You are not covered for that condition*

* You are covered for unrelated conditions.



PREMIUMS AND PAYMENT FREQUENCY

You can choose between two premium types:

- **Stepped premiums** are recalculated each year in line with your age and they are likely to go up each year.
- **Level premiums** are calculated based on your age at the policy start date and will generally stay the same. Level premiums revert to stepped premiums at age 65.

Stepped premiums start out cheaper, but will get more expensive as you age. Level premiums start out more expensive but, depending on how long you keep your cover, can cost less over the life of the policy.

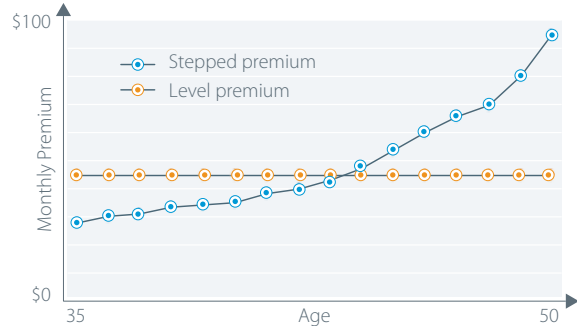
Indexation is only available where the Stepped premium payment option is selected. Refer to the indexation section for how this affects your policy.

Under both options premiums can increase if you increase your sum insured, if government charges increase or if we increase premiums rates for all policies within a defined risk group.

You can choose to pay your premiums fortnightly, monthly or annually by either credit card or direct debit.

Example[^]

35-year-old female, non-smoker with \$500,000 of Life Cover only.



[^] This is an Illustration only.



INDEXATION

If you choose Stepped premiums, your cover increases each year by the greater of either 5% or CPI[#] to broadly keep pace with inflation. This is called indexation. As your cover increases, your premium will also increase.

We send you an annual update which indicates how your policy will be affected. You can choose to opt out of the indexation increase in any year or permanently. Contact us on **13 16 14** if you want to discuss your options.

If you choose to opt out permanently, you won't be able to add this feature back on later.

Indexation does not apply while you are on Level premiums.

[#] CPI – Consumer Price Index.



DISCOUNTS

You may be eligible for a discount if your partner also holds an ANZ Life Insurance policy issued on or after 21 May 2016. Call us on **13 16 14** to find out if you're eligible.



HOW DO I MAKE A CLAIM?

To make a claim, call us on **13 16 14** or go to anz.com/insurance

You will need to complete some forms and we may need to request information on your medical history.

ANZ Life Insurance is issued by OnePath Life Limited (OnePath Life) ABN 33 009 657 176, AFSL 238341 and distributed by Australia and New Zealand Banking Group Limited (ANZ) ABN 11 005 357 522. ANZ is an authorised deposit-taking institution (Bank) under the *Banking Act 1959* (Cth). OnePath Life is the issuer of the product but is not a Bank. Except as set out in the issuer's contract terms (including the PDS), this product is not a deposit or other liability of ANZ or its related group companies. None of them stands behind or guarantees the issuer or its products.

The information provided is of a general nature and does not take into account your personal objectives, financial situation or needs. Before acting on this information, you should consider the appropriateness of the information, having regard to your personal objectives, financial situation and needs. You should read the ANZ Financial Services Guide and PDS (available online at anz.com or by calling 13 16 14) and consider whether the product is right for you before making a decision to acquire or continue to hold the product.



13 16 14 weekdays,
8am to 7pm (AEST)



anz.com/insurance