

Intuit Australia Pty Limited

Group Salary Continuance Insurance Guide

August 2022

Summary

The Salary Continuance Insurance (SCI) policy was established by Intuit Australia Pty Limited (Intuit) to provide a monthly benefit to all eligible employees of Intuit in the event of illness or injury where you meet the policy's definition for Total Disability or Partial Disability. This insurance policy does not pay during the first 90 days of your disability (referred to as the Waiting Period). During this period you may be paid your accumulated sick leave and annual leave entitlements.

Benefits Summary

FEATURE	DETAILS
Benefits Provided	Total or Partial Disability
Benefit Amount	75% of Income 12
Waiting Period	90 days
Benefit Period	2 years
Automatic Acceptance Limit	\$13,000 per month
Indexation	CPI to a maximum of 5%
Maximum Cover age	65 years
Maximum Benefit Limit	\$30,000 per month (or \$360,000 per annum)
Premium Cost	Intuit currently meets all costs associated with the provision of this insurance cover
Insurer	AIA Australia Limited (AIA)
Policy Administrator	Marsh Pty Ltd trading as Mercer Marsh Benefits

- 1. **Income** means base salary
- Your benefit will be limited to the Automatic Acceptance Limit of the policy until such time the insurer approves a higher benefit.

Eligible Criteria

Salary continuance is compulsory for permanent employees working a minimum of 15 hours per week. You must be an Australian resident and be eligible to work in Australia.

All new employees who meet the eligibility conditions of the policy are automatically covered for 75% of their monthly income up to an annual benefit of \$156,000 (i.e. \$13,000 per month) in the event of disability (salary equivalent of \$208,000 p.a.). This amount is known as the Automatic Acceptance Limit (AAL).

Employees with an annual income in excess of \$208,000 will have to submit evidence of good health in order to be insured for their full benefit. Questionnaires to enable this assessment will be provided to individual employees, as appropriate.

Until the employee submits the required medical evidence and is accepted by the insurer, the monthly benefit is capped at \$13,000 per month.

Automatic Acceptance Limit (AAL)

The AAL is the maximum level of cover the insurer will provide before you will be required to submit evidence of good health.

The AAL for SCI under this policy is \$156,000 per annum (salary equivalent of \$208,000). If your sum insured exceeds this limit, you will be required to submit evidence of good health to allow the insurer to assess you for your full benefit entitlement.

Initially you will need to complete the insurer's Personal Statement which is a disclosure of your current and historical medical background. This statement may lead to the insurance company asking for more information, which may include a medical examination, blood tests and a medical history from your GP. You will be sent further details, if this applies to you.

Waiting Period

There is a waiting period of 90 days on this policy which commences from when you were medically certified as being totally or partially disabled. If you are still disabled at the end of the waiting period, and the insurer accepts your claim, benefits will accrue after this period.

Insurance Benefits - Definitions

Total Disability or Totally Disabled

Disablement resulting solely from injury or sickness which occurs while the Policy is in force and as a result of which the employee:

- Is Totally Disabled for at least 7 out of 12 consecutive days during the Waiting Period; and
- ii. Remains Disabled for the balance of the Waiting Period: and
- iii. Continues to be Totally Disabled after the expiry of the Waiting Period or after receiving a Partial Disability benefit is Totally Disabled immediately after ceasing to be Partially Disabled for the same or related condition.

Partial Disability or Partially Disabled means due to injury or sickness satisfies and continues to satisfy the definition of Partial Disability, a proportionate Monthly Benefit will be paid up to the applicable Benefit Period monthly in arrears if the employee:

- Is Totally Disabled for at least 7 out of 12 consecutive days during the Waiting Period; and
- ii. Remains Disabled for the balance of the Waiting Period: and
- iii. Continues to be Partially Disabled after the expiry of the Waiting Period or after receiving a Total Disability or Permanent Disability benefit is Partially Disabled immediately after ceasing to be Totally Disabled or Permanently Disabled for the same or related condition.

Additional Benefits

Death Benefit

If you die whilst on claim the insurer will pay an additional sum equal to 3 times the Total Disability monthly benefit.

Recurrent Disability

If within 12 months from the date a benefit payment ceases, you become Totally Disabled or Partially Disabled due to the same or related injury or illness, the waiting period will be waived and the insurer will recommence the benefit payment as a continuation of the earlier claim payable from the date you become Totally Disabled or Partially Disabled.

Rehabilitation Expenses

If you are totally disabled for at least the length of the waiting period, the insurer will pay a Rehabilitation Expense benefit. These expenses may include buying goods such as equipment to assist you re-enter the workforce and the expense of any approved rehabilitation program.

The amount paid will be equal to six times your monthly benefit. Further conditions apply.

Workplace Modification

If your workplace needs to be modified to allow you to return to paid work after being Totally Disabled, the insurer (at their discretion) will decide to pay the cost of these modifications provided they are approved in writing by the insurer before they are incurred. The benefit payable will be 3 times your monthly benefit.

Return to work during the waiting period

If you return to work only once during the waiting period for up to 10 consecutive days, the waiting period will be extended by the total number of days you had worked. If you return to work for more than 10 consecutive days, the waiting period starts again.

Other Policy Conditions

Leave of Absence (including Parental Leave)

If you are granted a period of leave of absence (including parental leave) by the Employer or a participating employer and there is a 'return to work' date prior to leave commencing, your cover will continue for up to 24 months provided premiums continue to be paid.

If you don't return to work by the expected 'return to work' date, your cover will automatically cease 30 days after the expected return date.

In all situations the onus is on the individual concerned to contact Mercer Marsh Benefits and request insurer approval.



Cover Whilst Overseas

You are provided with cover 24 hours a day 7 days a week provided premium continue to be paid.

If you are an Australian citizen or Australian permanent resident and are also working overseas for the Employer or a participating employer, cover is available for up to 5 years. To extend cover beyond 5 years the insurer's prior consent is required. If you are travelling or holidaying outside Australia, cover will continue without restriction.

Exclusions

No benefits will be payable if caused wholly or partly, directly or indirectly by:

- War
- Active service in the armed forces of any country, territory, foreign or international organisation;
- Participation in a combat or fighting force of any country, territory or foreign organization;
- Engagement in (including planning or preparing for) any terrorism act in Australia or any foreign country;
- Any deliberate self-inflicted injury/sickness or
- attempted suicide or self-destruction while either sane or insane;
- Uncomplicated pregnancy, childbirth or miscarriage; or
- Any other exclusions imposed by AIA Australia on an employee.

Reduction or offset on monthly benefit

Benefits payable for Total Disability or Partial Disability will be reduced by:

- All benefits or other payments in relation to the injury or illness of the employee, under any:
 - Workers' compensation scheme, motor accident compensation or similar legislation or scheme;
 - ii. Social security or similar legislation;
 - iii. Statute, or damages under common law for loss of income, loss of earning capacity or any other economic loss whether paid as a lump sum or not; or
 - iv. Disability income type insurance policy (other than a lump sum TPD benefit received under any insurance policy);
- Any other loss of income, loss of earning capacity or other economic loss component of a lump sum payment paid or required to be paid in relation to the injury or illness of the employee;
- Any paid parental leave received by the employee where they continue to suffer a Disability during a period of paid parental leave.

Cessation of Cover

Insurance cover under this policy will cease on the earliest of the following:

- You reach the cover expiry age;
- This policy terminates;
- 60 days after you ceases employment;
- 60 days after you cease to meet the eligibility criteria;
- 60 days after the premium payment ceases;
- You no longer meet the eligibility conditions while on leave without pay or during your overseas cover.
- The insurer accepts or decline your application for continuation option
- If you no longer meet the residency requirements.

Extended Cover

Cover will continue for a maximum of 60 days after you cease to meet the eligibility criteria under this Policy.

Extended cover will cease on the earlier of:

- the date the cover terminates under this Policy;
- 60 days after you cease to meet the eligibility criteria; and
- The date the insurer accepts or declines your continuation option application.

Continuation Option

When you leave Intuit you may be eligible to continue your existing cover at your own cost. To be eligible, you must be under 60 years of age, have found alternative employment elsewhere, and not be leaving employment for reasons of ill health.

You must apply for this individual policy within 60 days of leaving Intuit. Minimal medical evidence may be required. If you wish to take advantage of this option, please immediately contact Mercer Marsh Benefits on 1300 265 741.

All effort has been made to ensure that the following information is accurate and correct at the time prepared. The information contained in this summary is to be used as a guide only.

The terms and conditions of the applicable insurance policy will ultimately prevail at all times. The insurer and/or policy may change from time to time as determined by the policy owner.

MORE INFORMATION

For policy, underwriting and claims, please email clientoperations@mercermarshbenefits.com

Or call 1300 265 741

Marsh Pty Limited (Australian Financial Services Licensee # 238983) trading as Mercer Marsh Benefits™ is the broker and administrator for Intuit Australia Pty Limited's Insurance policies. The information contained in this summary is to be used as a guide only and it does not take into account your particular financial situation. Any group insurance benefit you may be entitled to will be governed by the terms and conditions of the insurance policy under which the benefit is provided. A copy of the policy documents can be obtained from Intuit Australia Pty Limited.

FREQUENTLY ASKED QUESTIONS

How is a claim lodged?

You should notify the local HR contact immediately if you think you may be eligible for a benefit. This will ensure the relevant paperwork is provided to initiate the claim as soon as possible.

What happens if the claim is admitted by the insurer?

If the insurer accepts your claim and the waiting period has passed, benefits are paid monthly in arrears to your employer. Intuit will pay you via their payroll system and the benefit will be taxed as normal income.

Is there anything else I need to do once my claim is accepted?

To allow the insurer to assess continued disability and further entitlement to monthly benefits, it is essential that you submit regular continuing claim forms. These forms are requested from you (normally monthly) with each claim payment. Any costs associated with the completion and/or the provision of information for these forms, and with a claim, are at your own cost, not your employer or the insurer.

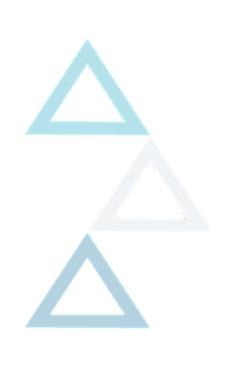
Failure to provide regular continuing claim forms and/or information requested by the insurer will result in the insurer ceasing further benefit payments until they are satisfied with the information provided. The onus is on you (the employee) to provide this information to ensure regular payment of the monthly benefit.

Why do I have to deal with Mercer Marsh Benefits and not the insurer or my employer?

Mercer Marsh Benefits is engaged by Intuit to assist with the administration of its group SCI policy.

What happens if I already have a similar insurance arrangement elsewhere?

If you have a personal policy elsewhere, you will need to check the terms and conditions of the policy. Generally in the case of an SCI claim, the benefit payable under the group policy may be offset against the personal policy, meaning that you may not receive more than 75% of your salary in total from both policies. This may mean that you are ineligible to receive any benefit from this policy.





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