

Combined Product Disclosure Statement and Policy Wording



Public Service Association NSW Personal Injury Insurance Policy



Bring on tomorrow



HOW THIS INSURANCE IS ARRANGED

This insurance is issued/insured by:

AIG Australia Limited (AIG)
ABN 93 004 727 753
AFSL 381686
Level 12
717 Bourke Street
Docklands Vic 3008

AIG issues / insures this product pursuant to an Australian Financial Services License ('AFSL') granted to Us by the Australian Securities and Investments Commission.

AIG prepared this **Product Disclosure Statement**.

RETAIL CLIENTS

'Retail Clients' are required to be provided with a Product Disclosure Statement prepared by AIG.

A Retail Client means an individual or small business.

'Small business' means:

- (a) a manufacturing entity with 100 employees or fewer, or
- (b) a non-manufacturing entity employing 20 individuals or less.

Code of Practice, Dispute Resolution and Cooling Off Period provisions under this insurance will generally apply only to Retail Clients.

Date Prepared: 13 June 2014
S/O PDS JM 09/01416.4

This document contains your Insurance Policy, Terms, Conditions, Provisos and Exclusions. It is important that you read and understand it and retain it in a safe place.



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Product Disclosure Statement

Public Service Association NSW – Personal Injury Insurance Policy

WHAT IS THE PRODUCT DISCLOSURE STATEMENT?

The **Product Disclosure Statement ('PDS')** contains information about key benefits and significant features of this Public Service Association Personal Injury Insurance.

The purpose of the PDS is to assist Your purchasing decision and ability to compare this product with other similar insurance products. This document also contains important information about Your rights and obligations including the Cooling Off Period.

The terms and conditions of Your insurance are contained in the **Policy Wording**.

Details about AIG can be found on the inside cover of this document under '**How this insurance is arranged**'.

KEY BENEFITS OF YOUR POLICY

Cover is available to members of the Public Service Authority NSW to insure their Spouse and/or Dependant Children against a range of Events as outlined in the table below.

Capital Sum Insured: \$60,000

THE EVENTS		THE COMPENSATION EACH INSURED PERSON PAYABLE AS A % OF THE CAPITAL SUM INSURED
Injury, as defined, resulting in:		
1	Death	50%
2	Permanent Paraplegia	100%
3	Permanent Quadriplegia	100%
4	Permanent Total Disablement	50%
5	Permanent Total Loss of use of both hands or both feet	50%
6	Permanent Total Loss of sight of both eyes	50%
7	Permanent Total Loss of hearing	
	(a) both ears	38%
	(b) one ear	10%
8	Permanent Total Loss of speech	38%
9	Permanent Total Loss of use of one hand or one foot	25%
10	Permanent Total Loss of sight of one eye	25%
11	Permanent Total Loss of use of a thumb and one finger	8%
12	Permanent Total Loss of use of a thumb, either hand	5%
13	Permanent Total Loss of use of one or more fingers	2.5%
SECTION B – ADDITIONAL BENEFITS		
Injury, as defined, resulting in:		
14	Bed Care Patient, as defined, for not less than twenty-four (24) consecutive hours. Aggregate Period is up to one hundred and four (104) weeks	\$50 per day
15	Domestic Home Help – Non Income Earners, as defined Aggregate Period is fifty-two (52) weeks	For Non-Income Earners, 80% of the actual expenses incurred up to a maximum of \$150 per week
16	Home Tutorial – Non Income Earners, as defined Aggregate Period is fifty-two (52) weeks	For Non-Income Earners 80% of the actual expenses incurred up to a maximum of \$150 per week



Cover for each of all of the above is subject to acceptance of the risk by AIG. Cover is limited to the benefits and maximum sums insured listed in the **Policy Schedule** and are subject to the terms, conditions, provisos and exclusions in the **Policy Wording**.

IMPORTANT INFORMATION

Please read the **Policy Wording** carefully for full details about lodging a claim, when benefits are payable, the terms, conditions, provisos and exclusions that apply to this insurance. Take special note of the following:

- 1 The **Policy Wording** contains a **Definitions** section starting on **page 9** and **Conditions** that apply to this insurance starting on **page 12**.
- 2 **Special Provisions** apply to this **Policy Wording** that may impact upon the compensation payable starting on **page 11**. It is important that You carefully read the sections of the **Policy Wording**.
- 3 There are some circumstances where cover cannot be provided. These are covered in the **Policy Wording**. Please take special note of the **Exclusions** applicable to all sections of the policy listed on **page 11** of the **Policy Wording**.
- 4 **Aggregate Limit of Liability, Aggregate Period, Elimination Period** or **Excess** may apply to one or more of the sections of cover selected. Details are provided in the **Policy Wording**.

An **Aggregate Limit of Liability** is the maximum amount We will pay for all claims arising during one Policy Period. Limits will be shown in the **Policy Schedule**.

An **Aggregate Period** is the maximum amount of time for which benefits will be payable (generally up to a maximum of 52 or 104 weeks for **Section B**). Different **Aggregate Periods** may apply based on application details and acceptance. Such periods will be shown in the **Policy Schedule**.

An **Elimination Period** is a period under the policy for which no Compensation is payable. Different Elimination Periods apply to particular events covered under this policy. Details will be shown in the **Policy Schedule**.

Excess is the amount shown in the **Policy Schedule** that You will have to pay for each and every claim You make under the applicable section of the policy

- 5 **Age limits** apply to this policy. You must be over the age of 18 and under 65 to take out this Insurance. To be eligible for cover Your Spouse must be over the age of 18 and under 65. Dependant Children must be over six (6) months of age and under nineteen (19) years of age; or under twenty-five (25) years of age while they are full-time students at an accredited institution of higher learning.

This **PDS** and **Policy Wording** booklet also contains important information about the rights and obligations of insured persons including information about Privacy, Duty of Disclosure and the General Insurance Code of Practice.

COSTS

An annual premium of \$11.00 applies.

The premium amount will be shown on Your **Policy Schedule** and includes Government charges such as Stamp Duty and GST that will be shown separately on the **Policy Schedule**.

COOLING OFF PERIOD

If You are a Retail Client You have 14 days after You receive this policy to check that the policy and benefits meet Your needs. This is known as the Cooling Off Period. Within the Cooling Off Period You may cancel the policy and receive a full refund of all premiums paid.



To cancel the policy during the Cooling Off Period, please send Us:

- Your written request to cancel the policy; and
- the policy document.

The Cooling Off Period ceases if a claim is made before the 14 day Cooling Off Period has expired.

HOW TO MAKE A CLAIM

Information on claims can be found under the section titled '**Conditions – 5. Claims Procedure**' in the **Policy Wording**. Please read this carefully.

A claim needs to be submitted with original supporting documentation such as doctor's reports, receipts, and where requested, additional **Proof of Loss - 'Conditions - 11'**. A claim should be delivered to the address shown on the outside cover of this document. In the event of claims under some policy sections, an Elimination &/or Aggregate Period or an Excess may apply.

Please refer to the **Policy Wording** for further details about the above.

CODE OF PRACTICE

AIG is a signatory to the General Insurance Code of Practice. This aims to raise the standards of practice and service in the insurance industry, improve the way the claims and complaints are handled and help people better understand how general insurance works. Information brochures on the Code are available upon request.

DISPUTE RESOLUTION

We are committed to handling any complaints about Our products or services efficiently and fairly.

If You have a complaint:

1. Contact Us on Our dedicated complaints line – 1800 339 669.
2. If Your complaint is not satisfactorily resolved You may request that the matter be reviewed by management by writing to:
The Compliance Manager
AIG
Level 12, 717 Bourke Street
Docklands VIC 3008
3. If You are still unhappy, You may request that the matter be reviewed by Our Internal Dispute Resolution Committee ("Committee"). We will respond to You with the Committee's findings within 15 working days.
4. If You are not satisfied with the finding of the Committee, You may be able to take Your matter to an independent dispute resolution body, Financial Ombudsman Service (FOS). This external dispute resolution body can make decisions with which AIG are obliged to comply.

Contact details are:

Financial Ombudsman Service
Phone: 1300 78 08 08 (local call fee applies)
Email: info@fos.org.au

Internet: <http://www.fos.org.au>

GPO Box 3, Melbourne, VIC 3001



PRIVACY NOTICE

This notice sets out how AIG collects, uses and discloses personal information about:

- You, if an individual; and
- other individuals You provide information about.

Further information about Our Privacy Policy is available at www.aig.com.au or by contacting Us at australia.privacy.manager@aig.com or on 1300 030 886.

How We collect Your personal information

AIG usually collects personal information from You or Your agents.

AIG may also collect personal information from:

- Our agents and service providers;
- other insurers;
- people who are involved in a claim or assist Us in investigating or processing claims, including third parties claiming under Your policy, witnesses and medical practitioners;
- third parties who may be arranging insurance cover for a group that You are a part of;
- providers of marketing lists and industry databases; and
- publically available sources.

Why We collect Your personal information

AIG collects information necessary to:

- underwrite and administer Your insurance cover;
- maintain and improve customer service; and
- advise You of Our and other products and services that may interest You.

You have a legal obligation under the Insurance Contracts Act 1984 to disclose certain information. Failure to disclose information required may result in AIG declining cover, cancelling Your insurance cover or reducing the level of cover, or declining claims.

To whom We disclose Your personal information

In the course of underwriting and administering Your policy We may disclose Your information to:

- entities to which AIG is related, reinsurers, contractors or third party providers providing services related to the administration of Your policy;
- banks and financial institutions for policy payments;
- assessors, third party administrators, emergency providers, retailers, medical providers, travel carriers, in the event of a claim;
- other entities to enable them to offer their products or services to You; and
- government, law enforcement, dispute resolution, statutory or regulatory bodies, or as required by law.

AIG is likely to disclose information to some of these entities located overseas, including in the following countries: United States of America, United Kingdom, Singapore, Malaysia, the Philippines, India, Hong Kong, New Zealand as well as any country in which You have a claim and such other countries as may be notified in Our Privacy Policy from time to time.

You may request not to receive direct marketing communications from AIG.

Access to Your personal information

Our Privacy Policy contains information about how You may access and seek correction of personal information We hold about You. In summary, You may gain access to Your personal information by submitting a written request to AIG.

In some circumstances permitted under the Privacy Act 1988, AIG may not permit access to Your personal information. Circumstances where access may be denied include where it would have an unreasonable impact on the privacy of other individuals, or where it would be unlawful.



Complaints

Our Privacy Policy also contains information about how You may complain about a breach of the applicable privacy principles and how We will deal with such a complaint.

Consent

Your application includes a consent that You and any other individuals You provide information about consent to the collection, use and disclosure of personal information as set out in this notice.



Policy Wording

Public Service Association NSW – Personal Injury Insurance Policy

POLICY CONDITIONS

The Insured Person(s) specified in the Application Form/Policy Schedule are insured against Injury as shown in the Policy Schedule on the following terms.

AGREEMENT

All cover is subject to You or the Insured Person paying or agreeing to pay the premium We require, and is subject to all the Terms, Conditions, Provisos and Exclusions of this Policy including the Policy Schedules.

YOUR DUTY OF DISCLOSURE

What You must tell Us

When answering Our questions, You must be honest and You have a duty under law to tell Us anything known to You, and which a reasonable person in the circumstances, would include in answer to the question. We will use the answers in deciding whether to insure You and anyone else to be insured under the Policy, and on what terms.

Who needs to tell Us

It is important that You understand You are answering Our questions in this way for Yourself and anyone else whom You want to be covered by the Policy.

If You do not tell Us

If You do not answer Our questions in this way We may reduce or refuse to pay a claim, or cancel a Policy. If You answer Our questions fraudulently, We may refuse to pay a claim and treat the Policy as never having worked.

DEFINITIONS

1. **We/Our/Us** means AIG Australia Limited (AIG), ABN 93 004 727 753, AFSL 381686
2. **You/Your/Yourself/Insured** means the person who has completed the application form and is a Public Service Association NSW member.
3. **Insured Person** means Your Spouse and/or Dependant Children who is an Insured Person(s) under this Policy and is specified in the Policy Schedule
4. **Injury** means a bodily injury to an Insured Person resulting from an accident caused by violent, external and visible means and occurring solely and directly and independently of any other cause including any pre-existing physical or congenital condition (except to sickness or disease directly resulting from medical or surgical treatment rendered necessary by an Injury or to infection directly resulting from an Injury, provided that in each case the Injury itself is covered by this Policy; or to accidental food poisoning), provided the Injury:
 - (a) occurs on or after the Insured Person's Effective Date of Individual Insurance; and
 - (b) results in any of the Events specified in the Table of Events within twelve (12) calendar months from the date of such Injury.
4. **Permanent** means lasting twelve (12) calendar months and at the expiry of that period being beyond hope of improvement.
5. **Permanent Total Disablement** means total disablement which continues for twelve (12) consecutive months and at that time is certified by a registered and legally qualified medical practitioner (other than You or the Insured Person or a member of the Insured Persons immediate family) as being beyond hope of improvement and entirely preventing the Insured Person from forever engaging in any



business, profession, occupation or employment for which he or she is reasonably qualified by training, education or experience.

6. **Paraplegia** means Permanent and entire paralysis of both legs and part or whole of the lower half of the body.

7. **Quadriplegia** means Permanent and entire paralysis of both legs and both arms.

8. **Total Loss** means, in relation to:

- a) an insured body part, the physical severance or entire loss of the use thereof;
- b) an eye, the entire and irrecoverable loss of all sight in the eye;
- c) hearing, the entire and irrecoverable loss of hearing.
- d) speech, the entire and irrecoverable loss of speech

9. **Non-Income Earners** means a person who is not employed and does not earn any form of salary or wages from personal exertion.

10. **Spouse** means Your husband or wife or any de-facto partner who has continuously lived with You for at least three (3) calendar months prior to an Event giving rise to a claim.

11. **Domestic Home Help** means to assist in the care at home of an Insured Person who is not a Bed Care Patient, provided such services are certified by that Insured Person's legally qualified and registered medical practitioner, who is not the Insured Person or a member of the Insured Person's family, as being necessary for that Insured Person's recovery. Includes but is not limited to baby sitter fees, additional food expenses that would not ordinarily have been incurred, or additional expenses incurred by non-immediate family members required to care for the Insured Person.

12. **Bed Care Patient** means the Insured Person is confined in a bed under the regular daily attendance and care of a professional carer (not a family member) directly resulting from a covered Injury and certified as necessary by a legally qualified medical practitioner. This does not include confinement in any of the following institutions in which the Insured Person resides at the time of the Injury giving rise to the claim – nursing or convalescent home, a geriatric ward, a mental institution, a rehabilitation or extended care facility for the elderly.

13. **Home Tutorial** means professional tutorial services of a suitably qualified teacher holding a current teaching certificate equal to the level of education currently undertaken by the Insured Person, during the continuous ongoing restriction from attendance of school by the Insured Person. Provided such services are certified by that Insured Person's legally qualified and registered medical practitioner, who is not the Insured Person or a member of the Insured Person's family, as being necessary for that Insured Person's recovery.

14. **Dependant Children** means Your unmarried Dependant Children who are:

- (a) over six (6) months of age and under nineteen (19) years of age; or
- (b) under twenty-five (25) years of age while they are full-time students at an accredited institution of higher learning;

and at the time of an Event giving rise to a claim are primarily dependent on You for maintenance and support.

Dependant Children includes step or legally adopted children.

15. **Policy Period** means the period shown in the Policy Schedule or subsequent Renewal Notice issued by Us.

16. **War** means war, whether declared or not, or any warlike activities, including use of military force by any sovereign nation to achieve economic, geographic, nationalistic, political, racial, religious or other ends.



17. **Terrorist Act** means any actual or threatened use of force or violence directed at or causing damage, injury, harm or disruption, or committing of an act dangerous to human life or property, against any individual, property or government, with the stated or unstated objective of pursuing economic, ethnic, nationalistic, political, racial or religious interests, whether such interests are declared or not. Robberies or other criminal acts, primarily committed for personal gain and acts arising primarily from prior personal relationships between perpetrator(s) and victim(s) shall not be considered Terrorist Acts.

Terrorism shall also include any act, which is verified or recognized by the (relevant) Government as an act of Terrorism.

EXCLUSIONS

This Policy does not apply to any Event arising directly or indirectly out of:

1. War, civil war, invasion, insurrection, revolution, use of military power or usurpation of government or military power.
2. The intentional use of military force to intercept, prevent, or mitigate any known or suspected Terrorist Act.
3. Any loss arising out of any Terrorist Act.
4. The Insured Person engaging in any aerial activity, except as a passenger and not as a pilot or crewmember in any aircraft licensed to carry passengers.
5. Sickness, disease or any kind of infection however contracted, even if through Injury. This exclusion however, does not apply to sickness or disease directly resulting from medical or surgical treatment rendered necessary by an Injury or to infection directly resulting from an Injury, provided that in each case the Injury itself is covered by this Policy; or to accidental food poisoning.
6. An Insured Persons or any persons Intentional self-injury, suicide, or criminal or illegal act of the Insured Person who is the subject of the claim.
7. Pregnancy, childbirth or miscarriage.
8. Sexually transmitted disease, or Acquired Immune Deficiency Syndrome (A.I.D.S.) disease or Human Immunodeficiency Virus (H.I.V.) infection. This Exclusion does not apply to Accidental H.I.V. Infection as described under Special Provisions – Additional Benefits 5. Accidental H.I.V. Infection Benefit.
9. Training for or participating as a professional in any sport.
10. Racing in or on any motor powered device.
11. Radioactive contamination or radioactivity in any form whatsoever whether occurring naturally or otherwise.

In addition to the above Exclusions

12. We will not be liable to provide any coverage or make any payment hereunder if to do so would be in violation of any sanctions law or regulation which would expose AIG Australia, its parent company or its ultimate controlling entity to any penalty under any sanctions law or regulation.

EXPOSURE

If an Insured Person suffers an Event as a direct result of exposure to the elements, We will pay the Compensation shown for that Event.

DISAPPEARANCE

If an Insured Person disappears and after twelve (12) calendar months it is reasonable for Us to believe they have died due to an insured Injury, We will pay the Compensation shown for Event 1. (Death) subject to receipt of a signed undertaking by You that any such Compensation shall be refunded if it is later demonstrated that the Insured Person did not die as a result of an Injury.



SPECIAL PROVISIONS

1. Compensation payable under Event 1. (Death) is payable to the nominated beneficiary as indicated on Your Application Form or to the Insured Persons estate if a beneficiary has not been listed, any other Compensation is payable to the Insured.
2. In respect to Section A – Capital Benefits:
 - (a) In the event of multiple Injuries sustained in the same accident, only the Event insured for the highest amount will be compensated.
 - (b) If an Insured Person suffers an Injury resulting in any one of the Events 2 to 4 We will not be liable under this Policy for any subsequent Injury to that Insured Person.
3. Compensation is not payable:
 - (a) For more than one Event under Section B – Events 14, 15 or 16 in respect of the same period of time.
 - (b) For longer than the Aggregate Period shown in the Policy Schedule in respect of Section B – Event 14, 15 and 16 for any one Injury.
 - (c) Unless as soon as possible after the happening of any Injury giving or likely to give rise to a claim, the Insured Person obtains and follows proper medical advice from a registered and legally qualified medical practitioner who is not the Insured Person or a member of the Insured Persons immediate family.
- 4.. Aggregate Limit Of Liability
 - (a) Except as provided under 4.(b), Our total liability for all claims arising during any one Policy Period will not exceed the amount shown in the Policy Schedule. This includes any liability provided under the sub limit in 4(b) below.
 - (b) Our total liability for all claims arising under this Policy during any one Policy Period relating directly to air travel in aircraft whose flights are not conducted in accordance with fixed schedules to and from fixed terminals over established routes will not exceed the amount shown in the Policy Schedule.
5. Age Limits
We will not be liable for any Event that happens to an Insured Person unless at the date of the Event they are over the age of 18 and under 65 in respect of a Spouse and for Dependant Children over six (6) months of age and under nineteen (19) years of age; or under twenty-five (25) years of age while they are full-time students at an accredited institution of higher learning.

CONDITIONS

1. Cover

This Policy provides the Insured Person(s) with insurance cover under those Sections of the Policy selected by You and/or the Insured Person in Your and/or the Insured Person's Application Form for this insurance. The selected cover is shown in the Policy Schedule.

2. Effective Date Of Individual Insurance

The insurance of any Insured Person (as specified in the Policy Schedule) will become effective on the latest of the following dates:

- (a) on the commencing date of the Policy Period set out in the Policy Schedule;
- (b) on the date such Insured Person becomes eligible for insurance hereunder;
- (c) where an Application Form is required by Us, on the date of Our acceptance of the Insured Person's written Application Form;

provided always that if such Insured Person is not regularly performing all the usual duties of his or her occupation or is not fit to do so on the date his or her Application Form for insurance would otherwise become effective, then this insurance will only take effect on the date of return to the regular performance of all of his or her usual duties or when he or she is certified fit to do so.



3. **Effective Date of Individual Terminations**

The insurance of any Insured Person will immediately terminate on the earliest of the following dates:

- (a) on the date this Policy is terminated;
- (b) on the date the Insured advises Us that the Insured Person be deleted as an Insured Person;
- (c) on the date that You are no longer a financial member of the Public Service Association NSW ;
- (d) on the premium due date if You fail to pay the required premium except as the result of inadvertent error;
- (e) on the date the Insured Person ceases to be a Your Spouse and/or Dependant Children;
- (f) on the date an Insured Person reaches the maximum Age Limit for that Insured Person; or
- (g) on the date such Insured Person ceases to be eligible for insurance hereunder.

4. **Cancellation**

- (a) You may cancel this Policy at any time by giving Us written notice of cancellation
- (b) We may cancel the Policy at any time in accordance with Sections 59 & 60 of the Insurance Contracts Act 1984, in which case We will refund the proportion of the premium for the unexpired Policy Period.

5. **Claims Procedure**

(a) Written notice of claim must be given to Us at any of Our offices in Australia within thirty (30) days after the occurrence of any Event in respect of which a claim has arisen or may arise.

(b) All certificates and evidence required by Us shall be furnished at the expense of the Insured Person/You for any claimant hereunder and shall be in such form and of such nature as We shall prescribe.

(c) We may have the Insured Person medically examined at Our expense when and as often as We may reasonably require after a claim has been made, or in the Event of the Insured Persons Death arrange an autopsy unless this is illegal in the country in which the autopsy is to be performed.

8. **Australian Law**

This Policy is governed by the laws of the Australian State or Territory in which it was issued in and any dispute or action in connection therewith shall be conducted and determined in Australia.

9. **Fraud and Misstatement**

Any fraud, misstatement or concealment by the Insured Person and/or You either in the Application on which this insurance is based or in relation to any other matter affecting this insurance or in connection with the making of any claim there under may give Us certain rights provided for in the Insurance Contracts Act 1984, including the right to reduce or refuse payment of any claim, cancel or avoid the Policy.

10. **Tax Or Imposts**

Where We are, or believe We will become liable for any tax or other imposts levied by any Commonwealth or State Government, authority or body in connection with this Policy, We may reduce, vary or otherwise adjust any amounts (including but not limited to premiums, charges and benefits), under this Policy in the manner and to the extent that We determine to be appropriate to take account of the tax or impost.

11. **Proof Of Loss**

After We receive notice of a claim We will provide the Insured Person or You with Our usual claim forms for completion. The claim forms must be properly completed and all evidence required by Us shall be furnished in a timely manner at the expense of the Insured Person or You and be in such form and of such nature as We may require.

13. **Currency**

All amounts shown in this Policy are in Australian currency (AUD). If expenses or losses are incurred in a foreign currency, then the rate of currency exchange used to calculate the amount payable in Australian currency (AUD) will be the rate at the time of incurring the expense or suffering the loss.



14. Assignability

This Policy and any rights there under shall not be assignable without Our agreement and prior written consent.

15. Subrogation Clause

In the event of any payment under this Policy, We shall be subrogated to all the Insured Person's/Your rights of recovery thereof against any person or organisation and the Insured Person/You shall execute and deliver instructions and papers and do whatever else is necessary to secure such and enable enforcement of such rights. The Insured Person/You shall take no action to prejudice such rights.



TABLE OF EVENTS

SECTION A - CAPITAL BENEFITS – Sum Insured \$60,000

THE EVENTS		THE COMPENSATION EACH INSURED PERSON
Injury, as defined, resulting in:		
1	Death	50%
2	Permanent Paraplegia	100%
3	Permanent Quadriplegia	100%
4	Permanent Total Disablement	50%
5	Permanent Total Loss of use of both hands or both feet	50%
6	Permanent Total Loss of sight of both eyes	50%
7	Permanent Total Loss of hearing	
	(a) both ears	38%
	(b) one ear	10%
8	Permanent Total Loss of speech	38%
9	Permanent Total Loss of use of one hand or one foot	25%
10	Permanent Total Loss of sight of one eye	25%
11	Permanent Total Loss of use of a thumb and one finger	8%
12	Permanent Total Loss of use of a thumb, either hand	5%
13	Permanent Total Loss of use of one or more fingers	2.5%
SECTION B – ADDITIONAL BENEFITS		
Injury, as defined, resulting in:		
14	Bed Care Patient, as defined, for not less than twenty-four (24) consecutive hours. Aggregate Period is up to one hundred and four (104) weeks	\$50 per day
15	Domestic Home Help – Non Income Earners, as defined Aggregate Period is fifty-two (52) weeks	For Non-Income Earners, 80% of the actual expenses incurred up to a maximum of \$150 per week
16	Home Tutorial – Non Income Earners, as defined Aggregate Period is fifty-two (52) weeks	For Non-Income Earners 80% of the actual expenses incurred up to a maximum of \$150 per week

Head Office

Sydney

Level 19, 2 Park Street Sydney NSW 2000
GPO Box 9933 Sydney NSW 2001

Melbourne

GPO Box 9933 Melbourne VIC 3001

Brisbane

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Perth

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Bring on tomorrow