

# Making sure you're well protected

## Changes to the Protectionfirst range



### Effective from 27 September 2025

We've reviewed the Protectionfirst range and made some changes. A summary of the changes is shown below.

The flyer only describes the changes to your policy and should be read in conjunction with the full policy terms. This flyer can be found at [www.acenda.com.au/upgrades](http://www.acenda.com.au/upgrades). Alternatively, you can call us on **13 65 25** to request a paper or digital copy of the new wording.

The changes are in three categories:

- **Upgrades** – improvements.
- **Updates** – to medical terms, aligning with current medical diagnostic techniques and terminology.
- **Clarifications** – restructuring, corrections and rewording terms to better assist you in understanding the terms that apply.

The changes only apply if you have the insurance listed in the tables below. They won't apply to past or existing claims, or claims arising from health conditions or events that started or took place before the effective date. To see which of these changes are relevant to you, please refer to your Policy Schedule for the insurance types you have.

Please note, in the unlikely event that any upgraded or updated terms disadvantage you, we'll apply the prior term. Please refer to the Guarantee of upgrade as set out in your Policy Document.

The following tables provide a summary of the changes and which types of insurance and products they apply to. More details for each of these changes are provided immediately below the tables.

### Please keep this flyer with your Policy Document

The flyer should be read in conjunction with your full policy terms.

Description	Applicable insurance	Products							
		Protection – Life	Protection – Recovery Money	Protection – Flexible Recovery Money	Protection – Stand Alone Recovery Money	Protection – Income Gold	Protection – Income Excell	Protection – Income Daily Living	Protection – Income Business Expenses
Upgrades and Updates									
2.1 New Cover Bounce-back feature	All insurances	✓	✓	✓	✓	✓	✓	✓	✓
2.2 Medical definition changes	CI & IP insurances	✓	✓	✓	✓	✓	✓	✓	
Clarifications									
2.3 Permanent Incapacity	TPD insurance	✓	✓	✓	✓				
2.4 TPD definition changes	TPD insurance	✓	✓	✓	✓				

## 2.1 Introduction of the Cover Bounce-back feature

Upgrade	New policy wording
<p><b>Cover Bounce-back feature</b>  <b>All insurances (Available to non-super, SMSF and wrap-platform owned policies, under stepped premiums only)</b></p> <p>Your policy now includes the 'Cover Bounce-back' feature. This feature gives you the flexibility to temporarily reduce the amount of your insurance, and therefore your premiums, for an agreed period of up to 12 months. After the agreed period, you can restore the sum insured, up to its original amount, without further underwriting.</p>	<p><b>In the Lump Sum Policy Document, the existing section under A. General Provisions and Conditions, the following definition is added:</b></p> <p><b>A.22 Cover Bounce-back (Available to non-super, SMSF and wrap-platform owned policies)</b></p> <p>You can reduce the sum insured by your chosen amount (the Suspended Amount), for an agreed period of time (the Suspension Period). During the Suspension Period you will be insured only for the Remaining Amount and only pay premiums for the Remaining Amount.</p> <p>At the end of the Suspension Period, you can restore all or part of the Suspended Amount.</p> <p><b>Conditions of the Cover Bounce-back feature:</b></p> <ul style="list-style-type: none"> <li>• You must have held the insurance for at least two years.</li> <li>• The suspension periods available are 3, 6, 9, and 12 months.</li> <li>• You can exercise this feature up to a total of 12 months over the duration of the insurance.</li> <li>• This feature is not available if your premiums are in arrears.</li> <li>• To exercise this feature, you must notify us and complete the required steps before your next premium due date from which you wish to apply. When we receive your request, we will confirm the details in writing to you, including the length of the Suspension Period.</li> </ul> <p>You cannot exercise this feature:</p> <ul style="list-style-type: none"> <li>• At the same time as the Economiser feature.</li> <li>• At the same time as the Future Insurability feature.</li> <li>• If the Indexation (CPI) Benefit applies, it will continue to apply to the Remaining Amount during the Suspension Period.</li> <li>• If you exercise this feature, you also have to reduce the sum insured on any linked insurance and all terms for this feature shall also apply to the linked insurance.</li> <li>• When you exercise this feature the Remaining Amount cannot be reduced below the current minimum sum insured for the relevant insurance.</li> </ul> <p><b>Reduction of Liability Terms</b></p> <p>Insurance in respect of the Life Insured and our liability fully ceases for the Suspended Amount for the entire duration of the Suspension Period.</p> <p><b>No Liability Terms</b> - In respect of the Suspended Amount, no benefit shall be payable for any death, disability, sickness, injury, critical illness event (including partial critical illness event and child support benefit conditions) or any other insured event for which a benefit would ordinarily be payable where it:</p> <ul style="list-style-type: none"> <li>• First occurs during the Suspension Period; or</li> <li>• Arises from or is related to an injury, sickness, condition or symptom that first occurs during the Suspension Period which the Life insured: <ul style="list-style-type: none"> <li>– Was aware of, or a reasonable person in the Life Insured's position would have been aware of; or</li> <li>– Sought advice or treatment from a registered Medical Practitioner or other health professional during the Suspension Period (or a reasonable person in the Life Insured's position would have sought such advice or treatment).</li> </ul> </li> </ul> <p>The above No Liability Terms shall continue to apply to the Restored Amount for the entire duration of the insurance. It shall also continue to apply to the equivalent amount of the Restored Amount if you transfer the insurance to another Acenda policy for the entire duration of the insurance on the other Acenda policy.</p> <p>Transferring insurance means replacing the insurance, either the full or part of the sum insured, with insurance on another policy. For example, the Death Benefit on a Protection – Life policy outside super is replaced with Protection – Life Cover inside super.</p>

## 2.1 Introduction of the Cover Bounce-back feature continued

Upgrade	New policy wording
	<p><b>How you can restore your Suspended Amount at the end of the Suspension Period</b></p> <p>We will notify you prior to the end of the Suspension Period and you can restore all or part of the Suspended Amount. The amount restored will be the Restored Amount. There is no further medical or financial underwriting as the original disclosures you made at the time you applied for the insurance and any increase continue to apply.</p> <p>If you direct that only part or none of the Suspended Amount be restored, your direction will be binding and cannot be amended 30 days after the end of the Suspension Period.</p> <p>If you do not request an extension, we will automatically restore the full Suspended Amount to your insurance, unless you have directed otherwise.</p> <p>If you make a claim during the Suspension Period:</p> <ul style="list-style-type: none"> <li>• Subject to these Cover Bounce-back terms, the terms of your insurance continue to apply during the Suspension Period.</li> <li>• If you make a claim on your insurance that is subject of these Cover Bounce-back terms, your insurance terminates on payment of the Remaining Amount.</li> <li>• If a Buy Back option applies to your insurance, your insurance will be restored to the amount of insurance prior to the Suspension Period.</li> </ul> <p>For this feature only:</p> <ul style="list-style-type: none"> <li>• <b>Suspended Amount</b> means the amount, being a portion of the sum insured, that we agree is temporarily deducted from the sum insured for the relevant insurance.</li> <li>• <b>Suspension Period</b> means the agreed period of time that a Suspended Amount applies to the relevant insurance.</li> <li>• <b>Remaining Amount</b> means the balance of the sum insured, after deduction of the Suspended Amount, that applies to the relevant insurance during the Suspension Period (see your Policy Schedule issued when you exercise this feature).</li> <li>• <b>Restored Amount</b> means the Suspended Amount, either in full or the agreed portion that is added back to the sum insured at the end of the Suspension Period.</li> </ul>
	<p><b>In the Income Protection Policy Document, the existing section under A. General Provisions and Conditions, the following definition is added:</b></p> <p><b>A.16 Cover Bounce-back</b>  <b>(Available to non-super, SMSF and wrap-platform owned policies)</b></p> <p>You can reduce the sum insured by your chosen amount (the Suspended Amount), for an agreed period of time (the Suspension Period). During the Suspension Period you will be insured only for the Remaining Amount and only pay premiums for the Remaining Amount.</p> <p>At the end of the Suspension Period, you can restore all or part of the Suspended Amount.</p>

## 2.1 Introduction of the Cover Bounce-back feature continued

Upgrade	New policy wording
	<p><b>Conditions of the Cover Bounce-back feature:</b></p> <ul style="list-style-type: none"> <li>• You must have held the insurance for at least two years.</li> <li>• The suspension periods available are 3, 6, 9, and 12 months.</li> <li>• You can exercise this feature up to a total of 12 months over the duration of the insurance.</li> <li>• This feature is not available if your premiums are in arrears.</li> <li>• To exercise this feature, you must notify us and complete the required steps before your next premium due date from which you wish to apply. When we receive your request, we will confirm the details in writing to you, including the length of the Suspension Period.</li> <li>• You cannot exercise this feature: <ul style="list-style-type: none"> <li>– at the same time as the Economiser feature.</li> <li>– If applicable to your policy, at the same time as the Guaranteed Insurability Option.</li> </ul> </li> <li>• If the Indexation (CPI) Benefit applies, it will continue to apply to the Remaining Amount during the Suspension Period.</li> <li>• If you exercise this feature, you also have to reduce the sum insured on any linked insurance and all terms for this feature shall also apply to the linked insurance.</li> </ul> <p>When you exercise this feature the Remaining Amount cannot be reduced below the current minimum sum insured for the relevant insurance.</p> <p><b>Reduction of Liability Terms</b></p> <p>Insurance in respect of the Life Insured and our liability fully ceases for the Suspended Amount for the entire duration of the Suspension Period.</p> <p><b>No Liability Terms</b> - In respect of the Suspended Amount, no benefit shall be payable for any death, disability, sickness, injury, critical illness event (including partial critical illness event and child support benefit conditions) or any other insured event for which a benefit would ordinarily be payable where it:</p> <ul style="list-style-type: none"> <li>• First occurs during the Suspension Period; or</li> <li>• Arises from or is related to an injury, sickness, condition or symptom that first occurs during the Suspension Period which the Life Insured: <ul style="list-style-type: none"> <li>– Was aware of, or a reasonable person in the Life Insured's position would have been aware of; or</li> <li>– Sought advice or treatment from a registered Medical Practitioner or other health professional during the Suspension Period (or a reasonable person in the Life Insured's position would have sought such advice or treatment).</li> </ul> </li> </ul> <p>The above No Liability Terms shall continue to apply to the Restored Amount for the entire duration of the insurance. It shall also continue to apply to the equivalent amount as the Restored Amount if you transfer the insurance to another Acenda policy for the entire duration of the insurance on the other Acenda policy.</p> <p>Transferring insurance means replacing the insurance, either the full or part of the sum insured, with insurance on another policy.</p>

## 2.1 Introduction of the Cover Bounce-back feature continued

Upgrade	New policy wording
	<p><b>How you can restore your Suspended Amount at the end of your Suspension Period</b></p> <p>We will notify you prior to the end of the Suspension Period and you can restore all or part of the Suspended Amount. The amount restored will be the Restored Amount. There is no further medical or financial underwriting as the original disclosures you made at the time you applied for the insurance and any increase continue to apply.</p> <p>If you direct that only part or none of the Suspended Amount be restored, your direction will be binding and cannot be amended 30 days after the end of the Suspension Period.</p> <p>If you do not request an extension, we will automatically restore the full Suspended Amount to your insurance, unless you have directed otherwise.</p> <p>If you make a claim during the Suspension Period:</p> <ul style="list-style-type: none"> <li>• Subject to these Cover Bounce-back terms, the terms of your insurance continue to apply during the Suspension Period.</li> <li>• If you make a claim on your insurance that is subject of these Cover Bounce-back terms, your insurance terminates on payment of the Remaining Amount.</li> <li>• If a Buy Back option applies to your insurance, your insurance will be restored to the amount of insurance prior to the Suspension Period.</li> </ul> <p>For this feature only:</p> <ul style="list-style-type: none"> <li>• <b>Suspended Amount</b> means the amount, being a portion of the sum insured, that we agree is temporarily deducted from the sum insured for the relevant insurance.</li> <li>• <b>Suspension Period</b> means the agreed period of time that a Suspended Amount applies to the relevant insurance.</li> <li>• <b>Remaining Amount</b> means the balance of the sum insured, after deduction of the Suspended Amount, that applies to the relevant insurance during the Suspension Period (see your Policy Schedule issued when you exercise this feature).</li> <li>• <b>Restored Amount</b> means the Suspended Amount, either in full or the agreed portion that is added back to the sum insured at the end of the Suspension Period.</li> </ul>

## 2.2 Medical definition review

Following a recent review, we have updated some medical definitions. In the unlikely event that you are disadvantaged by the change, we will apply the prior definition, provided it has not become obsolete (because it is no longer in use or is incapable of being applied in Australian health practice).

The following are medical definitions that have been changed and are a combination of upgrades and updates, based on the effective dates outlined.

Type of insurance this applies to:	Protection – Life	Protection – Recovery Money	Protection – Flexible Recovery Money	Protection – Stand Alone Recovery Money	Protection – Income Gold	Protection – Income Excell	Protection – Income Daily Living
Child Critical Illness Benefit	✓	✓	✓	✓			
Child Income Benefit					✓	✓	✓
Child Support Benefit		✓	✓	✓			
Critical Conditions Benefit					✓		✓
Critical Illness Benefit		✓	✓	✓			
Severe Illness Benefit		✓	✓	✓			

## 2.2 Medical definition review continued

Definition name	Insurance					
	Child Critical Illness Benefit	Child Income Benefit	Child Support Benefit	Critical Conditions Benefit	Critical Illness Benefit	Severe Illness Benefit
Upgrades						
Benign Brain or Spinal Cord Tumour – of specified severity <sup>1</sup>	✓	✓	✓	✓	✓	
Coronary Artery Disease	✓	✓	✓	✓	✓	
Early Stage Benign Brain or Spinal Cord Tumour <sup>2</sup>						✓
Encephalitis – of specified severity	✓	✓	✓	✓	✓	
Major Organ Transplant Waiting List						✓
Updates						
Aplastic Anaemia – of specified severity	✓	✓	✓	✓	✓	
Breast Cancer – Other of specified severity						✓
Cancer – excluding specified early stage cancers	✓	✓	✓	✓	✓	
Coma – with specified criteria	✓	✓	✓	✓	✓	
Female Cancer – Other of specified severity						✓
Male Cancer – Other of specified severity						✓
Major Head Trauma – of specified severity	✓	✓	✓	✓	✓	
Meningitis and/or Meningococcal Disease – of specified severity	✓	✓	✓	✓	✓	
Prostate Cancer – Other of specified severity						✓
Type 1 Diabetes		✓	✓			

<sup>1</sup> This definition has been renamed and was previously called 'Benign Intracranial Tumour – of specified severity'

<sup>2</sup> This definition has been renamed and was previously called 'Early Stage Benign Intracranial Tumour – of specified severity'

## 2.2 Medical definition review continued

Definition name	New policy wording
<p><b>Aplastic Anaemia – of specified severity</b></p> <p>We have updated the definition with reference to current medical diagnostic techniques.</p>	<p><b>Aplastic Anaemia – of specified severity</b></p> <p>Means bone marrow failure which results in anaemia, neutropenia and thrombocytopenia requiring as a minimum one of the following treatments:</p> <ul style="list-style-type: none"> <li>a. marrow stimulating agents</li> <li>b. bone marrow transplantation (including haematopoietic stem cell transplantation)</li> <li>c. blood product transfusions</li> <li>d. immunosuppressive agents.</li> </ul>
<p><b>Benign Brain or Spinal Cord Tumour – of specified severity</b></p> <p>We have updated the definition name and upgraded the definition with reference to current medical diagnostic techniques, names various sites which are covered and added alternative assessment.</p> <p>This definition was previously called 'Benign Intracranial Tumour – of specified severity'</p>	<p><b>Benign Brain or Spinal Cord Tumour – of specified severity</b></p> <p>means a non-cancerous tumour in the brain, meninges, or intracranial section of a cranial nerve, or an acoustic neuroma, or a non-cancerous tumour of the spinal cord. The presence of the tumour must be confirmed by imaging studies such as CT scan or MRI, and result in:</p> <ul style="list-style-type: none"> <li>• at least 25% permanent whole person impairment (as defined in the American Medical Association publication 'Guides to the Evaluation of Permanent Impairment' current edition as at the date of impairment, or an equivalent guide to impairment approved by us), or</li> <li>• a permanent loss of the ability to perform one or more Activities of Daily Living (ADL) without physical help from someone else, or</li> <li>• the undergoing of neurosurgical intervention for its removal.</li> </ul> <p>The following are excluded:</p> <ul style="list-style-type: none"> <li>• intracranial cysts, granulomas and haematomas</li> <li>• intracranial malformation in or of the arteries and veins, and</li> <li>• tumours of the pituitary gland.</li> </ul>
<p><b>Breast Cancer – Other of specified severity</b></p> <p>We have updated the definition name and the definition with reference to current medical diagnostic techniques.</p>	<p><b>Breast Cancer – Other of specified severity</b></p> <p>means carcinoma in situ of the breast 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.</p> <p>The tumour must be classified as Tis according to the TNM staging method or AJCC* Stage 0.</p> <p>* AJCC refers to the staging method of the American Joint Committee on Cancer.</p>



## 2.2 Medical definition review continued

Definition name	New policy wording
<p><b>Cancer – excluding specified early stage cancers</b></p> <p>We have updated the definition name and the definition with reference to current medical diagnostic techniques.</p>	<p><b>Cancer – excluding specified early stage cancers</b></p> <p>means the presence of one or more malignant tumours, leukaemia or lymphomas.</p> <p>The following are excluded:</p> <ul style="list-style-type: none"> <li>• Chronic lymphocytic leukaemia in its early stages (less than RAI stage 1).</li> <li>• All prostate cancer unless: <ul style="list-style-type: none"> <li>– it is histopathologically described as at least TNM classification T1c, or another equivalent classification, or</li> <li>– the Gleason score is 6 or more, or</li> <li>– the person insured is required to undertake major interventionist therapy including radiotherapy, brachytherapy, chemotherapy, biological response modifiers or any other major treatment, or</li> <li>– the tumour is completely untreatable.</li> </ul> </li> <li>• Carcinoma in situ, cervical dysplasia CIN1, CIN2, and CIN3, or premalignant tumours.</li> <li>• Carcinoma in situ of the breast, except where it leads to the removal of the breast by a mastectomy or removal of the carcinoma in situ by breast conserving surgery (lumpectomy, complete local excision, wide local excision, partial mastectomy), together with radiotherapy or chemotherapy. The procedure must be performed as a direct result of the carcinoma in situ and specifically to arrest the spread of malignancy, and be considered the necessary and appropriate treatment.</li> <li>• Skin cancer other than melanoma that: <ul style="list-style-type: none"> <li>– shows signs of ulceration as determined by histopathological examination, or</li> <li>– is greater than 1.0 mm depth of invasion (Breslow), or</li> <li>– is at least Clark Level 3 of invasion.</li> <li>– Basal cell carcinoma of the skin.</li> <li>– Squamous cell skin carcinoma unless it has spread to other organs.</li> </ul> </li> <li>• All non-melanoma skin cancers unless having spread to the bone, lymph node or an other distant organ.</li> </ul>
<p><b>Coma – with specified criteria</b></p> <p>We have updated the definition with reference to current medical diagnostic techniques. The reference to a total loss of consciousness and responsiveness has been removed.</p>	<p><b>Coma – with specified criteria</b></p> <p>means a loss of consciousness and responsiveness in which the life insured is incapable of sensing or responding to external stimuli, resulting in a documented Glasgow Coma Scale of 6 or less, for a continuous period of at least 72 hours.</p>

## 2.2 Medical definition review continued

Definition name	New policy wording
<p><b>Coronary Artery Disease</b> (Applicable to Protection – Recovery Money, Flexible Recovery Money and Stand Alone Recovery Money: Critical Illness Benefit)</p> <p>We have updated the definition with reference to current medical diagnostic techniques.</p> <p>Multiple procedures can now be completed within a three month period. Previously, a two month period was allowed</p>	<p><b>Coronary Artery Disease</b></p> <p>means the actual undergoing of coronary artery angioplasty to correct a narrowing or blockage of three or more different coronary arteries. This procedure can be completed in one procedure or via multiple procedures within a three month period. Angiographic evidence, indicating obstruction of three or more different coronary arteries is required to confirm the need for this procedure. The procedure must be considered necessary by a cardiologist to correct or treat Coronary Artery Disease.</p> <p>A partial benefit is payable under MLC Protection - Recovery Money, Flexible Recovery Money and Stand Alone Recovery Money for this condition if the procedure is to treat one or two coronary arteries. The partial benefit is limited to 25% of the sum insured as stated on the Policy Schedule or \$50,000 whichever is the lesser. A partial benefit is only payable if the sum insured is \$40,000 or more. Partial benefits can only be paid once under this condition and the remaining sum insured for death, critical illness or disability benefits will be reduced by the amount paid</p>
<p><b>Coronary Artery Disease</b> (Applicable to Protection – Income Gold and Income Daily Living: Critical Conditions Benefit)</p> <p>We have updated the definition with reference to current medical diagnostic techniques. Multiple procedures can now be completed within a three month period. Previously, a two month period was allowed.</p>	<p><b>Coronary Artery Disease</b></p> <p>means the actual undergoing of coronary artery angioplasty to correct a narrowing or blockage of three or more different coronary arteries. This procedure can be completed in one procedure or via multiple procedures within a three month period. Angiographic evidence, indicating obstruction of three or more different coronary arteries is required to confirm the need for this procedure. The procedure must be considered necessary by a cardiologist to correct or treat Coronary Artery Disease.</p>
<p><b>Early Stage Benign Brain or Spinal Cord Tumour</b></p> <p>We have updated the definition name and upgraded the definition with reference to current medical diagnostic techniques, names various sites which are covered and added alternative assessment.</p> <p>This definition was previously called 'Early Stage Benign Intracranial Tumour – of specified severity'</p>	<p><b>Early Stage Benign Brain or Spinal Cord Tumour</b></p> <p>means a non-cancerous tumour in the brain, meninges, or intracranial section of a cranial nerve, or an acoustic neuroma, or a non-cancerous tumour of the spinal cord. The presence of the tumour must give rise to symptoms of increased intracranial pressure such as papilledema, mental symptoms, seizures, or sensory/motor skills impairment. The diagnosis must be confirmed by a consultant neurologist and the presence of the condition must be confirmed by imaging studies such as CT scan or MRI.</p> <p>The following are excluded:</p> <ul style="list-style-type: none"> <li>• intracranial cysts, granulomas and haematomas</li> <li>• intracranial malformation in or of the arteries and veins, and</li> <li>• tumours of the pituitary gland.</li> </ul>

## 2.2 Medical definition review continued

Definition name	New policy wording
<b>Encephalitis – of specified severity</b> We have upgraded the definition by removing the HIV exclusion.	<b>Encephalitis – of specified severity</b> means severe inflammation of the brain resulting in permanent neurological deficit, resulting in either: <ul style="list-style-type: none"> <li>a. at least 25% whole person impairment (as defined in the American Medical Association publication 'Guides to the Evaluation of Permanent Impairment' current edition as at the date of impairment, or an equivalent guide to impairment approved by us), as certified by a consultant neurologist, or</li> <li>b. the insured person being totally and permanently unable to perform any one of the following 'Activities of Daily Living':                             <ul style="list-style-type: none"> <li>i. bathing and showering</li> <li>ii. dressing and undressing</li> <li>iii. eating and drinking</li> <li>iv. using a toilet to maintain personal hygiene,</li> <li>v. moving from place to place by walking, wheelchair or with assistance of a walking aid.</li> </ul> </li> </ul>
<b>Female Cancer – Other of specified severity</b> We have updated the definition name and the definition with reference to current medical diagnostic techniques.	<b>Female Cancer – Other of specified severity</b> means carcinoma in situ 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 is covered: <ul style="list-style-type: none"> <li>• cervix-uteri: where the tumour must be classified as Tis according to the TNM staging method or FIGO* Stage 0 (excluded are Cervical Intraepithelial Neoplasia (CIN) classifications including CIN 1 and CIN 2)</li> <li>• fallopian tube: where the tumour must be limited to the tubal mucosa and classified as Tis according to the TNM staging method or FIGO* Stage 0</li> <li>• ovary: where the tumour must be classified as Tis according to the TNM staging method or FIGO* Stage 0</li> <li>• vagina: where the tumour must be classified as Tis according to the TNM staging method or FIGO* Stage 0</li> <li>• vulva: where the tumour must be classified as Tis according to the TNM staging method or FIGO* Stage 0.</li> </ul> *FIGO refers to the staging method of The Federation Internationale de Gynecologie et d'Obstetrique.
<b>Major Head Trauma – of specified severity</b> We have updated the definition name and the definition with reference to current medical diagnostic techniques. Whole person function has been replaced with whole person impairment.	<b>Major Head Trauma – of specified severity</b> means a cerebral injury resulting in permanent neurological deficit, resulting in either: <ul style="list-style-type: none"> <li>a. at least 25% whole person impairment (as defined in the American Medical Association publication 'Guides to the Evaluation of Permanent Impairment' current edition as at the date of impairment, or an equivalent guide to impairment approved by us), or</li> <li>b. the insured person being totally and permanently unable to perform any one of the following 'Activities of Daily Living':                             <ul style="list-style-type: none"> <li>i. bathing and showering,</li> <li>ii. dressing and undressing,</li> <li>iii. eating and drinking,</li> <li>iv. using a toilet to maintain personal hygiene,</li> <li>v. moving from place to place by walking, wheelchair or with assistance of a walking aid.</li> </ul> </li> </ul>

## 2.2 Medical definition review continued

Definition name	New policy wording
<b>Major Organ Transplant Waiting List</b> We have upgraded the definition to now include New Zealand on the waiting list for organ transplant.	<b>Major Organ Transplant Waiting List</b> means the life insured has been placed on a waiting list within Australia or New Zealand for an organ transplant from a human donor of a major organ that is listed in the definition of Major Organ Transplant. The transplant must be considered medically necessary, and the condition must be untreatable by any other means other than organ transplant, as confirmed by an appropriate specialist.
<b>Male Cancer – Other of specified severity</b> We have updated the definition name and the definition with reference to current medical diagnostic techniques.	<b>Male Cancer – Other of specified severity</b> <b>Carcinoma in situ of the penis</b> means the life insured is confirmed by biopsy to have localised pre-invasive cancer in the penis with a TNM Classification of Tis (penile intraepithelial neoplasia [PeIN]) where cancer cells do not penetrate the basement membrane nor invade the surrounding tissues. 'Invade' means to infiltrate and/or destroy the tissue of origin or surrounding tissue. <b>Carcinoma in situ of the testicle</b> means the life insured is confirmed by biopsy to have localised pre-invasive cancer in one or both testicles with a TNM Classification of Tis (germ cell neoplasia in situ) where the cancer cells do not penetrate the basement membrane nor invade the surrounding tissues, and one or both of the testicles are removed by radical orchidectomy. The removal must be considered to be the appropriate and necessary treatment and is performed specifically to arrest the spread of malignancy. 'Invade' means to infiltrate and/or destroy the tissue of origin or surrounding tissue.
<b>Meningitis and/or Meningococcal Disease – of specified severity</b> We have updated the definition name and the definition with reference to current medical diagnostic techniques. Whole person function has been replaced with whole person impairment.	<b>Meningitis and/or Meningococcal Disease – of specified severity</b> means meningitis or meningococcal septicaemia, resulting in either: a. at least 25% permanent whole person impairment (as defined in the American Medical Association publication 'Guides to the Evaluation of Permanent Impairment' current edition as at the date of impairment, or an equivalent guide to impairment approved by us), as defined by the latest edition of the Guide to the Evaluation of Permanent Impairment, American Medical Association, as certified by a consultant neurologist, or b. the insured person being totally and permanently unable to perform at least two of the following 'Activities of Daily Living': i. bathing and showering, ii. dressing and undressing, iii. eating and drinking, iv. using a toilet to maintain personal hygiene, v. moving from place to place by walking, wheelchair or with assistance of a walking aid.
<b>Prostate Cancer – Other of specified severity</b> We have updated the definition name and the definition with reference to current medical diagnostic techniques.	<b>Prostate Cancer – Other of specified severity</b> means prostatic cancers that are excluded under the definition of Cancer – excluding specified early stage cancers in this Policy, and are histopathologically described as TNM classification T1(a) or T1(b) or another equivalent classification, or lesser classification with a Gleason score of less than six.
<b>Type 1 Diabetes</b> We have updated the definition with reference to current medical diagnostic techniques and removed reference to insulin injections.	<b>Type 1 Diabetes</b> Diabetes mellitus type 1 with an early onset, which requires insulin to control the disease.

## 2.3 Permanent Incapacity

Clarification	New policy wording
<p><b>Total and Permanent Disability – Permanent Incapacity</b></p> <p>We have clarified that the trustee(s) of your super fund may require two Medical Practitioners to certify that the Life Insured meets Permanent Incapacity, to assess eligibility for tax concessions before the Trustee releases the benefit.</p>	<p><b>In the Lump Sum Policy Document, the existing wording under G. Definitions, the following definition is replaced with:</b></p> <p><b>G.55 Permanent Incapacity and Permanently Incapacitated</b></p> <p>Means the life insured's ill-health (whether physical or mental) which makes it unlikely that the life insured will ever engage in Gainful Employment for which the life insured is reasonably qualified by education, training or experience.</p> <p>Note, the trustee(s) of a superannuation fund may require two Medical Practitioners to certify that the life insured meets the definition of Permanent Incapacity, to assess eligibility for tax concessions before the Trustee releases the benefit.</p>

## 2.4 TPD Definition changes

Clarification	New policy wording
<p><b>Total and Permanent Disability</b></p> <p>We have made clarification changes to the following TPD definitions: Any Occupation and Own Occupation and Home Duties.</p>	<p><b>In the Lump Sum Policy Document, the existing wording under H.2 Disability Benefit Option, the following definition is replaced with:</b></p> <p><b>H.2 Disability Benefit Option</b></p> <p>Subject to the provisions of this Policy, if you suffer Total and Permanent Disability after the commencement of the Disability Benefit, and while the Policy is in force, we will pay the Disability Benefit. The Death Benefit (if applicable) and Critical Illness Benefit (if applicable) provided by the Policy shall be reduced by any amount paid under the terms and conditions of this Disability Benefit.</p> <p>Prior to the Policy anniversary preceding age 65 the following definition of Total and Permanent Disability applies.</p> <p><b>Definition</b></p> <p>Total and Permanent Disability means that:</p> <p>a. you have suffered total and irrecoverable loss of the:</p> <ul style="list-style-type: none"> <li>i. sight of both eyes, or</li> <li>ii. use of two limbs (where a limb is defined as one whole hand or one whole foot), or</li> <li>iii. sight of one eye and the use of one limb, or</li> </ul> <p>b. you have been unable to perform your own occupation for an uninterrupted period of at least three months due to Sickness or Injury and we believe, after consideration of medical and any other evidence, you are so disabled that you are unlikely ever to be able to perform your own occupation or other occupation for which you are suited by education training or experience which would pay remuneration at a rate greater than 25% of your earnings during your last 12 months of consecutive work, or</p> <p>c. as a result of Sickness or Injury, you are totally and permanently unable to perform at least two of the following five "Activities of Daily Living":</p> <ul style="list-style-type: none"> <li>i. bathing and showering</li> <li>ii. dressing and undressing</li> <li>iii. eating and drinking</li> <li>iv. using a toilet to maintain personal hygiene</li> <li>v. moving from place to place by walking, wheelchair or with assistance of a walking aid.</li> </ul> <p>For superannuation policies only where the Disability Benefit first commenced after 30 June 2014, you must also be Permanently Incapacitated.</p> <p>For the purposes of paragraph (b), 'unlikely ever' includes having regard to, but is not limited to, the prospect of improvement after treatment or rehabilitation recommended by a Medical Practitioner and which you could reasonably be expected to undertake.</p> <p>Unless otherwise specified in the Policy Schedule the above definition will apply.</p> <p>Where Own Occupation is shown on the Policy Schedule, part (b) of the Definition of Total and Permanent Disability shall be substituted by the following definition, namely;</p> <p>That you have been unable to perform your own occupation for an uninterrupted period of at least three months due to Sickness or Injury and we believe, after consideration of medical and any other evidence, you are so disabled that you are unlikely ever to be able to perform your own occupation.</p> <p>Own occupation for this purpose means the occupation in which you were engaged immediately prior to the date of disability.</p> <p>For superannuation policies only the Own Occupation definition of Total and Permanent Disability "Own occupation" definition (being part (b) of the total and permanent disability) is not available to you if you do not have this definition as at 30 June 2014.</p>

## 2.4 TPD Definition changes continued

Clarification	New policy wording
	<p><b>Partial Disability</b></p> <p>If you have selected the any occupation or own occupation test a partial benefit is payable if you have suffered the total and irrecoverable loss of the:</p> <ul style="list-style-type: none"> <li>• sight of one eye or</li> <li>• use of one limb (where a limb is defined as one whole hand or one whole foot)</li> </ul> <p>The partial benefit is limited to 25% of the disability Sum Insured or \$500,000 whichever is the lesser. Where 25% of the disability Sum Insured is less than \$10,000 then no benefit will be payable.</p> <p>The partial benefit is not available for superannuation policies.</p> <p><b>Home Duties</b></p> <p>Home Duties means you have been engaged in full-time normal domestic duties in your own residence for more than six months. If your occupation immediately before the start of Total and Permanent Disability can be described as 'Home Duties', then Total and Permanent Disability shall mean that you have, for an uninterrupted period of three months, been under medical supervision with complete inability to perform at least four of the Normal Domestic Duties. And we also believe that, after consideration of medical and any other evidence, you are unlikely ever to recover.</p> <p>For the purpose of defining 'unlikely ever', this includes having regard to, but is not limited to, the prospect of improvement after treatment or rehabilitation recommended by a Medical Practitioner and which you could reasonably be expected to undertake.</p> <p><b>Normal Domestic Duties</b></p> <p>The household duties normally performed by a person who remains at home completing full-time unpaid domestic duties. It does not include a person working in a regular occupation including part-time and/or paid voluntary work that provides an income. Normal Domestic Duties specifically includes:</p> <ul style="list-style-type: none"> <li>• cooking and preparing meals – meaning the ability to prepare meals using kitchen appliances,</li> <li>• cleaning the home – meaning the ability to carry out the basic internal household chores using domestic equipment such as a vacuum and mop,</li> <li>• washing clothes – meaning the ability to do the household's laundry,</li> <li>• shopping for groceries – meaning the ability to purchase general household grocery items (excluding online shopping),</li> <li>• safely driving a car – the physical ability to drive a car, and</li> <li>• caring for Children – meaning the ability to care for and supervise Children (where applicable).</li> </ul> <p>You will be considered to be unable to carry out Normal Domestic Duties if you are unable to perform four or more of these duties.</p> <p><b>Definition after Policy anniversary preceding age 65</b></p> <p><b>Following the Policy anniversary preceding age 65 the following definition of Total and Permanent Disability applies:</b> Total and Permanent Disability means you are correctly diagnosed as being unable to perform the "Activities of Daily Living" as defined in provision H.3.</p> <p>For superannuation policies only where the Disability Benefit first commenced after 30 June 2014, you must also be Permanently Incapacitated.</p> <p>Following the Policy anniversary preceding age 65, the above definition applies irrespective of your occupation and irrespective of whether the Policy Schedule shows Own Occupation or Any Occupation.</p>

## 2.4 TPD Definition changes continued

Clarification	New policy wording
	<p><b>Proof of disability</b></p> <p>Written notice of Total and Permanent Disability must be given to us as soon as is reasonably possible. Due proof of Total and Permanent Disability must be provided to us and may include an examination of you by a Medical Practitioner designated by us. No Disability Benefit will be paid for a Total and Permanent Disability which commenced more than one year before we received proof of the Disability.</p> <p><b>Exclusions</b></p> <p>No Benefits shall be payable under this Option if Total and Permanent Disability occurs as a result of:</p> <ul style="list-style-type: none"> <li>a. attempted suicide, or</li> <li>b. intentionally self inflicted Injury; or</li> <li>c. participation in insurrection.</li> </ul>

### We're here to help

If you have any questions, please speak with your financial adviser or call us on **13 65 25** between 8.30am and 6pm (AEST/AEDT), Monday to Friday, or visit our website **acenda.com.au**

#### Postal address:

Acenda  
PO Box 23455  
Docklands VIC 3008

Nippon Life Insurance Australia  
and New Zealand Limited  
ABN 90 000 000 402  
AFSL 230694

PO Box 23455  
Docklands VIC 3008

Tel 13 65 25  
**www.acenda.com.au**

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