Insurance changes for the KPMG Executive Superannuation Plan

smartMonday PRIME



KPMG Executive Superannuation Plan

This factsheet provides detail on the reduced insurance fees that took effect from 1 July 2023, together with enhancements to the definitions of Total and Permanent Disablement (TPD) that took effect from 1 December 2023.

This factsheet should be read in conjunction with the notice issued to relevant members titled 'smartMonday insurance – KPMG Executive Superannuation Plan' that is linked to this factsheet. Together the documents comprise a Significant Event Notice (SEN). It is important to read these two documents together as they will help you to assess the impact of these changes to your personal financial needs, goals and circumstances. You can request a paper or electronic copy of the factsheet, free of charge, by contacting us on 1300 614 644.

For a comprehensive description of your insurance arrangements in smartMonday, please refer to the *KPMG Executive Superannuation Plan Product Disclosure Statement* and the *Insurance guide* dated 1 June 2024 available at <u>smartmonday.com.au/SP/KPMG-Exec-Super.</u>

Your insurance fees are displayed in your online account.

Insurance fees

The total cost of your insurance is referred to as 'Insurance fees'. Insurance fees include the insurance premium (which includes stamp duty) and an insurance administration fee of 5.00% (plus Goods and Services Tax and net of Reduced Input Tax Credits).

Insurance fee rates for Death Only or Death & TPD Standard cover from 1 July 2023

For Standard cover, the annual insurance fees per \$1,000 of sum insured for each type of cover are:

Death cover:	\$0.643
TPD cover:	\$0.970

KPMG makes additional employer contributions to your smartMonday account to cover the monthly deduction of insurance fees deducted from your account for Standard Cover. These contributions are included in your annual concessional contributions cap.

Insurance fee rates for Death Only or Death & TPD Voluntary cover from 1 July 2023

The annual insurance fees per \$1,000 of sum insured for each type of voluntary cover are shown in the table below.

Example: The insurance fees applicable to a female who, on 1 July, will be 46 years old at their next birthday with Voluntary Death and TPD cover of \$500,000 would be calculated as follows: $$500,000 \div 1,000 \times $1.08 = 540 p.a.

Age	Death Only (\$)		Death Only (\$) Death & TPD (\$)	
next birthday	Male	Female	Male	e Female
16	0.17	0.07	0.17	0.07
17	0.21	0.08	0.22	0.08
18	0.25	0.09	0.28	0.11
19	0.28	0.11	0.32	0.12
20	0.31	0.12	0.37	0.14
21	0.33	0.12	0.40	0.15
22	0.34	0.11	0.42	0.15
23	0.35	0.11	0.44	0.15
24	0.35	0.09	0.45	0.15
25	0.34	0.09	0.46	0.14
26	0.33	0.09	0.46	0.15
27	0.32	0.09	0.46	0.16
28	0.31	0.11	0.46	0.17
29	0.30	0.11	0.46	0.18
30	0.28	0.12	0.45	0.2
31	0.28	0.12	0.46	0.21
32	0.27	0.13	0.46	0.23
33	0.27	0.14	0.47	0.25
34	0.27	0.15	0.47	0.27
35	0.27	0.16	0.50	0.32
36	0.27	0.17	0.51	0.35
37	0.28	0.19	0.54	0.39
38	0.30	0.20	0.58	0.43
39	0.32	0.22	0.61	0.48
40	0.33	0.25	0.66	0.56

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Age	Death Only (\$)		Death	n & TPD (\$)
next birthday	Male	Female	Male	Female
41	0.36	0.26	0.73	0.62
42	0.37	0.30	0.76	0.69
43	0.39	0.33	0.83	0.78
44	0.42	0.36	0.92	0.86
45	0.45	0.38	1.00	0.96
46	0.50	0.42	1.11	1.08
47	0.54	0.46	1.23	1.19
48	0.58	0.50	1.37	1.31
49	0.65	0.54	1.54	1.45
50	0.72	0.58	1.74	1.59
51	0.80	0.62	1.96	1.75
52	0.89	0.67	2.22	1.92
53	0.99	0.73	2.52	2.11
54	1.12	0.78	2.89	2.31
55	1.25	0.85	3.29	2.57
56	1.39	0.94	3.73	2.88
57	1.57	1.04	4.25	3.23
58	1.75	1.16	4.83	3.65
59	1.96	1.29	5.48	4.12
60	2.20	1.43	6.25	4.69
61	2.49	1.60	7.17	5.31
62	2.81	1.80	8.22	6.06
63	3.18	2.01	9.43	6.88
64	3.62	2.25	10.86	7.81
65	4.10	2.51	12.48	8.84
66	4.66	2.79	N/A	N/A
67	5.28	3.10	N/A	N/A
68	5.98	3.44	N/A	N/A
69	6.76	3.78	N/A	N/A
70	7.63	4.17	N/A	N/A

Insurance fee rates for Death Only or Death & TPD cover in the retained and spouse/dependents categories

The table below shows the annual insurance fees per \$1,000 of Death Only or Death & TPD cover:

• in the retained category for former Executive Directors and Partners of KPMG, and

• for spouses/dependants who join the Plan and apply for cover.

Example: The insurance fees applicable to a female who, on 1 July, will be 46 years old at their next birthday with Death and TPD cover of \$500,000 would be calculated as follows: \$500,000 ÷ 1,000 x \$0.92 = \$460 p.a.

Age next			Death & TPD (\$)	
birthday	Male	Female	Male	Female
16	0.14	0.06	0.15	0.07
17	0.18	0.06	0.19	0.07
18	0.21	0.07	0.23	0.08
19	0.24	0.08	0.27	0.11
20	0.25	0.09	0.30	0.13
21	0.27	0.09	0.34	0.13
22	0.28	0.08	0.36	0.12
23	0.28	0.08	0.37	0.12
24	0.28	0.08	0.39	0.12
25	0.28	0.07	0.39	0.12
26	0.27	0.07	0.40	0.12
27	0.26	0.08	0.39	0.13
28	0.25	0.08	0.39	0.14
29	0.24	0.08	0.39	0.16
30	0.24	0.09	0.39	0.17
31	0.24	0.11	0.39	0.19
32	0.23	0.11	0.39	0.20
33	0.23	0.12	0.40	0.22
34	0.23	0.12	0.41	0.23
35	0.23	0.13	0.43	0.26
36	0.23	0.15	0.44	0.30
37	0.24	0.16	0.46	0.34
38	0.24	0.17	0.50	0.37
39	0.26	0.19	0.52	0.42
40	0.27	0.20	0.57	0.46

Age next	Death Only (\$)		Death	& TPD (\$)
birthday	Male	Female	Male	Female
41	0.30	0.22	0.61	0.54
42	0.31	0.24	0.66	0.59

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Age next	Age next Death Only (\$)		Death & TPD (\$)	
birthday	Male	Female	Male	Female
43	0.33	0.27	0.72	0.67
44	0.35	0.30	0.78	0.75
45	0.38	0.33	0.86	0.82
46	0.41	0.35	0.95	0.92
47	0.44	0.38	1.05	1.02
48	0.48	0.41	1.17	1.13
49	0.54	0.44	1.32	1.24
50	0.60	0.48	1.50	1.37
51	0.66	0.52	1.69	1.51
52	0.74	0.56	1.91	1.65
53	0.83	0.61	2.18	1.82
54	0.93	0.65	2.49	2.00
55	1.04	0.71	2.84	2.22
56	1.17	0.78	3.23	2.48
57	1.31	0.86	3.66	2.78
58	1.47	0.96	4.17	3.16
59	1.63	1.06	4.73	3.56
60	1.83	1.19	5.40	4.05
61	2.08	1.34	6.18	4.61
62	2.34	1.50	7.09	5.24
63	2.66	1.68	8.15	5.96
64	3.01	1.87	9.38	6.75
65	3.42	2.09	10.79	7.64
66	3.88	2.32	N/A	N/A
67	4.40	2.58	N/A	N/A
68	4.97	2.86	N/A	N/A
69	5.63	3.15	N/A	N/A
70	6.36	3.48	N/A	N/A

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Enhancements to the disability definitions for TPD insurance cover

Arrangements before 1 December 2023

For claim events with a **Date of disablement**¹ up until midnight on 30 November 2023, one of the following TPD definitions listed needs to be satisfied to be eligible for an insurance benefit:

If you were working 15 hours a week	If you were working less than 15 hours a week
or more immediately prior to the date of disablement	immediately prior to the date of disablement
 Specified Medical Conditions definition, or Unlikely to Work definition, or Specific Loss definition, or Activities of Daily Living (ADL) definition 	 Specific Loss definition, or Activities of Daily Living (ADL) definition

New arrangements from 1 December 2023

For claim events with a **Date of disablement**¹ on or after 1 December 2023, one of the following TPD definitions listed needs to be satisfied to be eligible for an insurance benefit:

If you have been employed	If you have not been employed
in the last 16 months ^{2,3,4}	in the last 16 months ^{3,4}
 Specified Medical Conditions definition, or Unlikely to Work definition, or Specific Loss definition, or (New) Unable to do basic work activities ever again definition 	 Specific Loss definition, or (New) Unable to do basic work activities ever again definition

¹ See Appendix 3 for the definition of **Date of disablement**.

- ² The terms of the Specified Medical Conditions definition and Unlikely to Work definition have not changed (see Appendix 1 for the definitions) and will continue to be key definitions for members in regular employment. They will also apply to a broader range of members, i.e. if you have been in employment in the 16 months prior to the date of disablement. See Appendix 3 for definition of **Employed**.
- ³ The new *Unable to do basic work activities ever again* definition introduced as part of these changes replaced the ADL definition, see Appendix 2 for the new definition. The definition may be less stringent for some members than the previous ADL definition and is further enhanced by introducing a definition of **Mental illness** (in Part 2) to cater for situations where you are not claiming for a physical injury or illness.

⁴ The *Specific Loss* definition of TPD will continue to apply in addition to the *Specified Medical Conditions* definition, *Unlikely to Work* definition, and *Unable to do basic work activities ever again* definition. See Appendix 1 for the list of current definitions.

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Appendix 1. (Definitions not changing)

Specified Medical Conditions definition

You are absent from all work as a result of suffering cardiomyopathy, primary pulmonary hypertension, major head trauma, motor neurone disease, multiple sclerosis, muscular dystrophy, paralysis, dementia and Alzheimer's disease, Parkinson's disease, blindness, loss of speech, loss of hearing, chronic lung disease or severe rheumatoid arthritis,

And, based on medical or other evidence satisfactory to the insurer, it is in the insurer's opinion (having regard to all evidence available) that you have undertaken all reasonable treatment and are unlikely to ever engage in any occupation, whether or not for reward (the insurer will have regard to all evidence available to it in forming that opinion).

Unlikely to Work definition

As a result of illness or injury, you have been absent from all work for 180 consecutive days, and based on medical or other evidence satisfactory to the insurer, it is in the insurer's opinion that you have undertaken all reasonable treatment and are unlikely to ever engage in any occupation, whether or not for reward (the insurer will have regard to all evidence available to it in forming that opinion).

Specific Loss definition

As a result of illness or injury you suffer:

- The total and permanent loss of the use of two limbs; or
- Blindness in both eyes; or
- The total and permanent loss of the use of one limb and blindness in one eye, where:
 - Limb means the whole hand below the wrist or whole foot below the ankle; and
 - Blindness means the permanent loss of sight to the extent that visual acuity is 6/60 or worse, or to the extent that the visual field is reduced to less than 20 degrees in diameter.

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Appendix 2.

Unable to do basic work activities ever again definition

Part 1. You:

- have for a continuous period of at least three consecutive months, been disabled by illness or injury to such an extent that you have been unable to perform, without the assistance of another person, at least two of the activities listed below as certified by a medical practitioner, and
- are, after the end of the three-month period, permanently unable to perform the relevant activities, and
- are under the regular treatment, and following the advice of, a medical practitioner.

You will not be considered unable to perform the relevant activity if you can still perform the relevant task with the assistance from another adult (with aids and adaptations*).

The activities include:

- Mobility: the ability to:
 - Bend, kneel or squat to pick something up from the floor and straighten up again, and get into and out of a standard sedan; or
 - Walk more than 200 metres at a normal pace on a level surface without stopping due to breathlessness as a result of a medical condition.
- Seeing: the ability to read ordinary newsprint and pass the standard eye test for a car licence (even with glasses or contact lenses) and your vision is better than legal blindness. Legal blindness is as certified by an ophthalmologist.
- Lifting: the ability to lift with your hands (from bench height) and carry a five (5) kg weight a distance of ten (10) metres and place the item back down at bench height.
- **Communicating**: the ability to speak in your first language with sufficient clarity such that you can hold a conversation in a quiet room by understanding a simple message and relaying that message to another person.
- Manual dexterity: the ability to use:
 - at least one hand to pick up or manipulate small objects precisely with your hand or fingers (such as picking up a coin from desk height, using cutlery, tying shoelaces or fastening buttons), or
 - a pen, pencil or keyboard to write a short note that can be understood by another person in your first language.

Where you are unable to perform one or mor of the above activities when cover commenced, that activity will not be taken into consideration by the insurer as part of the TPD assessment.

* Aids and adaptations refers to equipment or fixtures which assist the member to carry out the activities.

Or

Part 2. You:

- are under the regular treatment, and following the advice, of a medical practitioner, and
- have, in the insurer's opinion, a mental illness that:
 - Your treating psychologist or medical practitioner believes the condition won't improve, and
 - Have been assessed by a psychiatrist appointed by the insurer as having an impairment of 19% or more on the Psychiatric Impairment Rating Scale and in the psychiatrist's opinion the condition is permanent.

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Appendix 3.

Other relevant definitions

Date of disablement means the later of:

- the date on which a medical practitioner examines you and certifies in writing that you suffer from an illness or injury that is the principal cause of your total and permanent disablement for which a claim is made; and
- the date you cease all work.

However:

- If you participate in a rehabilitation program and are incapable of returning to work within 12 months from the date you commenced your absence from work, the date of disablement is the date that would have applied if you had not participated in the rehabilitation program.
- The date of disablement must occur while you are insured for total and permanent disablement under this policy.

Employed means you:

- are employed (including self-employed unless specifically excluded); and
- have worked and are expected to receive an income, or received an income, from paid work;

in any business, trade, profession, vocation, calling, occupation or employment.

Mental illness means you have been diagnosed by a psychiatrist who is a medical practitioner under the latest edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM) issued by the American Psychiatric Association (or a similar diagnostic tool determined by the Royal Australian and New Zealand College of Psychiatrists Board).

Our smartCoaches can help you

If you would like to discuss these changes further, or any other superannuation matter, our smartCoaches offer guidance on insurance, investments, and contributions. This is a benefit provided to all members of smartMonday.

You can contact our smartCoach team on **1300 262 241**, Monday to Friday 9am to 5pm AEST or email <u>smartcoach@smartmonday.com.au</u>.

We're here to help

If you would like more information or have any questions about the above changes, or your account in general, please contact us on **1300 614 644**, Monday to Friday 9am to 5pm AEST.

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