

Enhancements to OneCare

Product updates

September 2013

Your OneCare policy is now even better. Here's what the upgrades mean for you.

Your OneCare policy includes a guarantee of upgrade. That means that when we improve the terms and conditions of OneCare, we pass the enhancements on to you as an existing OneCare customer if they do not result in a premium increase. These enhancements come at no extra cost to you.

We're pleased to announce the following upgrade, effective 14 September 2013. That means these improvements will apply to future claims from that date[^].

What do you need to do?

You don't need to do anything to take advantage of this automatic upgrade. However, we do recommend that you keep details of this upgrade in a safe place – perhaps with your policy terms or other insurance records.

Which improvements apply to you?

The improvements that apply to your policy will depend on the types of cover and options you've selected – i.e. an improvement only applies to you if the cover type or option being improved is already included in your policy. Your latest OneCare Policy Schedule sets out the covers and options that apply to your policy, and will help you understand which of these improvements are relevant to you. Your policy will not be worse off as a result of the upgrade. If you are inadvertently disadvantaged in any way, then the previous benefit wording will stand.

Any questions?

If you have any questions about the improvements outlined in this upgrade announcement, or you need more information about your policy, please contact your financial adviser or call Customer Services on 133 667. For the full Policy Terms, please go to onepath.com.au or call Customer Services for a free copy.

OneCare policy enhancements

What cover types are affected?	Summary of enhancement and what it means	OneCare	OneCare Super	OneCare External Master Trust	OneCare SMSF														
Trauma Cover	<p>New Trauma conditions names</p> <p>We have introduced new names for some of our existing trauma conditions. This change has been made to make it easier to find the conditions that we cover by having the condition named first, followed by the description. These new names replace the current names in all of your policy documentation (including any references to current names in your Policy Schedule).</p> <table border="1"> <thead> <tr> <th>Current Name</th> <th>New Name</th> </tr> </thead> <tbody> <tr> <td>Benign brain tumour</td> <td>Brain tumour (benign)</td> </tr> <tr> <td>Benign tumour of the spine</td> <td>Spinal tumour (benign)</td> </tr> <tr> <td>Blindness</td> <td>Blindness (severe)</td> </tr> <tr> <td>Chronic kidney failure</td> <td>Kidney failure (chronic)</td> </tr> <tr> <td>Chronic liver disease</td> <td>Liver disease (chronic)</td> </tr> <tr> <td>Chronic lung disease</td> <td>Lung disease (chronic)</td> </tr> </tbody> </table>	Current Name	New Name	Benign brain tumour	Brain tumour (benign)	Benign tumour of the spine	Spinal tumour (benign)	Blindness	Blindness (severe)	Chronic kidney failure	Kidney failure (chronic)	Chronic liver disease	Liver disease (chronic)	Chronic lung disease	Lung disease (chronic)	✓	X	X	✓
Current Name	New Name																		
Benign brain tumour	Brain tumour (benign)																		
Benign tumour of the spine	Spinal tumour (benign)																		
Blindness	Blindness (severe)																		
Chronic kidney failure	Kidney failure (chronic)																		
Chronic liver disease	Liver disease (chronic)																		
Chronic lung disease	Lung disease (chronic)																		

[^] They apply only to claims for events or conditions which first occur, are first diagnosed, or for which symptoms first became reasonably apparent, on or after 14 September 2013. They do not apply to past or current claims, or any claims arising from conditions which first occurred, or were first diagnosed, or for which symptoms first became reasonably apparent, before 14 September 2013. Also, if an exclusion is noted on your Policy Schedule, you are not eligible to claim on any new or upgraded benefit where the claim relates to the same or relate illness or injury for which your exclusion applies.

What cover types are affected?	Summary of enhancement and what it means		OneCare	OneCare Super	OneCare External Master Trust	OneCare SMSF
Trauma Cover continued	Current Name	New Name				
	Deafness	Deafness (severe)				
	Heart attack	Heart attack (major)				
	Major head trauma	Head trauma (major)				
	Major organ transplant	Organ transplant				
	Medically acquired HIV	HIV (medically acquired)				
	Minor heart attack	Heart attack (minor)				
	Occupationally acquired HIV	HIV (occupationally acquired)				
	Out of hospital cardiac arrest	Cardiac arrest (out of hospital)				
	Severe burns	Burns (severe)				
	Severe diabetes	Diabetes (severe)				
	Severe osteoporosis	Osteoporosis				
	Severe rheumatoid arthritis	Rheumatoid arthritis (severe)				
	Triple vessel angioplasty	Angioplasty - triple vessel				
	Adult insulin dependent diabetes mellitus	Diabetes mellitus – adult, insulin dependent				
	Melanoma	Melanoma (early stage)				
	Partial blindness	Blindness (partial)				
	Partial deafness	Deafness (partial)				
	Severe endometriosis	Endometriosis (severe)				
	New Trauma conditions					
Brain surgery (new partial payment)			✓	X	X	✓
<p>We have introduced a new partial payment Trauma Cover condition called 'Brain surgery'.</p> <p>This condition covers benign tumours of the pituitary gland requiring surgical intervention. The partial payment is 20% of the amount insured, up to a maximum of \$100,000 (doubled if the Premier Maximiser Option applies).</p> <p>This applies to Trauma Premier Cover only.</p> <p>Please insert the following definition of 'Brain surgery' (in alphabetical order) into the 'Trauma conditions defined' section of the Policy Terms.</p>						
<p>Brain surgery means the diagnosis of a benign (non-malignant) tumour of the pituitary gland requiring surgical intervention through a craniotomy.</p>						
Heart surgery (minor) (new partial payment)			✓	X	X	✓
<p>We have introduced a new partial payment Trauma Cover condition for 'Heart surgery (minor)'. This condition covers less invasive surgical techniques not covered by our 'Open heart surgery' full payment definition. The partial payment is 10% of the amount insured, up to a maximum of \$20,000 (doubled if the Premier Maximiser Option applies).</p> <p>This applies to both Trauma Comprehensive and Premier.</p> <p>Please insert the following definition of 'Heart surgery (minor)' (in alphabetical order) into the 'Trauma conditions defined' section of the Policy Terms.</p>						
<p>Heart surgery (minor) means the undergoing of a catheter based endovascular valve repair or valve implantation as a consequence of heart valve defects or abnormalities.</p>						

What cover types are affected?	Summary of enhancement and what it means	OneCare	OneCare Super	OneCare External Master Trust	OneCare SMSF
Trauma Cover continued	Improved trauma definitions continued The following trauma definitions have been improved. Please insert each of the highlighted definitions into the 'Trauma conditions defined' section of the Policy Terms in the place of the existing definitions (using the new trauma condition names where applicable):				
	Angioplasty – triple vessel means the undergoing of angioplasty (with or without insertion of a stent or laser therapy) to three or more coronary arteries during a single surgical procedure, or two procedures no more than two months apart, that is considered necessary on the basis of angiography evidence to correct the narrowing or blockage of three or more coronary arteries.	✓	✗	✗	✓
	This applies to both Trauma Comprehensive and Premier.				
	Aortic Surgery means the undergoing of surgery or endovascular repair that is considered necessary to correct any narrowing, dissection or aneurysm of the thoracic or abdominal aorta. The insertion and/or removal of intra-arterial balloon pumps into and/or out of the aorta are not covered.	✓	✗	✗	✓
	This applies to both Trauma Comprehensive and Premier.				
	Brain tumour (benign) means the diagnosis of a benign (non-malignant) tumour in the brain which results in the life insured or the insured child*: <ul style="list-style-type: none"> • suffering at least 25% permanent impairment as defined in the American Medical Association 'Guides to the Evaluation of Permanent Impairment', 5th edition or an equivalent guide to impairment approved by us; or • being permanently unable to perform at least one of the activities of daily living without the physical assistance of another adult person; or • undergoing surgery to remove the tumour. Cysts, granulomas, malformations in or of the arteries or veins of the brain, haematomas and tumours in the pituitary gland or spine are not covered. <small>*In the event a claim is for an infant, impairment will be based on the Functional Independence Measure for Children (WeeFIM) and /or the Paediatric Evaluation of Disability Inventory (PEDI).</small>	✓	✗	✗	✓
This applies to both Trauma Comprehensive and Premier.					
Burns of limited extent means tissue injury caused by thermal, electrical or chemical agents causing full thickness burns to either: <ul style="list-style-type: none"> • at least 9%, but less than 20%, of the body surface area as measured by the 'Rule of Nines' or the Lund and Browder Body Surface Chart • the whole of one hand or 50% of the surface area of both hands combined, requiring surgical debridement and/or grafting • the whole of one foot or 50% of the surface area of both feet combined, requiring surgical debridement and/or grafting; or • burns requiring escharotomy surgery. 	✓	✗	✗	✓	
This applies to Trauma Premier Cover only.					
Burns (severe) means tissue injury caused by thermal, electrical or chemical agents causing full thickness burns to: <ul style="list-style-type: none"> • 20% or more of the body surface area as measured by the 'Rule of Nines' or the Lund and Browder Body Surface Chart; • 50% or more of both hands, requiring surgical debridement and/or grafting; • 50% or more of both feet, requiring surgical debridement and/or grafting; • 50% or more of the face, requiring surgical debridement and/or grafting; or • the whole of the skin of the genitalia, requiring surgical debridement and/or grafting. 	✓	✗	✗	✓	
This applies to both Trauma Comprehensive and Premier.					

What cover types are affected?	Summary of enhancement and what it means	OneCare	OneCare Super	OneCare External Master Trust	OneCare SMSF
Trauma Cover continued	<p>Cancer means the presence of one or more malignant tumours including leukaemia, lymphoma and Hodgkin's disease characterised by the uncontrollable growth and spread of malignant cells and the invasion and destruction of normal tissue.</p> <ul style="list-style-type: none"> Melanomas are covered if they: <ul style="list-style-type: none"> have evidence of ulceration or are at least Clark Level 3 depth of invasion or are at least 1.0mm Breslow thickness, as determined by histological examination. Prostatic cancer is covered if it is: <ul style="list-style-type: none"> a TNM classification of at least T1c or a Gleason score of at least 6 or required to have 'major interventionist treatment' to arrest the spread of malignancy. <p>'Major interventionist treatment' includes removal of the entire prostate, radiotherapy, chemotherapy, hormone therapy or any other similar interventionist treatment.</p> <ul style="list-style-type: none"> Carcinoma in situ* of the breast is covered if: <ul style="list-style-type: none"> treatment requires the removal of the entire breast, or treatment requires surgery and adjuvant therapy (such as radiotherapy and/or chemotherapy) Carcinoma in situ* of the testicle is covered if treatment requires the removal of the testicle. <p>* Carcinoma in situ is covered where the procedures are required to be performed specifically to arrest the spread of malignancy and are considered the appropriate and necessary treatment.</p> <p>The following cancers are not covered:</p> <ul style="list-style-type: none"> all hyperkeratoses or basal cell carcinomas of the skin all other melanomas all other prostatic cancers all squamous cell carcinomas of the skin unless there has been a spread to other organs chronic lymphocytic leukaemia less than Rai Stage 1 all other tumours showing the malignant changes of carcinoma in situ (including cervical dysplasia CIN-1, CIN-2, and CIN-3), or which are histologically described as pre malignant, or which are classified as FIGO Stage 0, or which have a TNM classification of Tis. 'FIGO' refers to the staging method of the International Federation of Gynaecology and Obstetrics. <p>This applies to both Trauma Comprehensive and Premier.</p>	✓	✗	✗	✓
	<p>Heart valve surgery means the undergoing of open heart surgery that is considered necessary to correct or replace cardiac valves as a consequence of heart valve defects or abnormalities.</p> <p>This applies to both Trauma Comprehensive and Premier.</p>	✓	✗	✗	✓
	<p>Melanoma (early stage) means the presence of one or more malignant melanomas as determined by histological examination.</p> <p>The melanoma:</p> <ul style="list-style-type: none"> must have no evidence of ulceration; and be less than 1.0mm Breslow thickness; and be less than Clark Level 3 depth of invasion. <p>The malignancy must be characterised by the uncontrollable growth and spread of malignant cells and the invasion and destruction of normal tissue.</p> <p>This applies to Trauma Premier Cover only.</p>	✓	✗	✗	✓

What cover types are affected?	Summary of enhancement and what it means	OneCare	OneCare Super	OneCare External Master Trust	OneCare SMSF
Trauma Cover continued	<p>Rheumatoid arthritis (severe) means the unequivocal diagnosis of severe rheumatoid arthritis by a rheumatologist. To fulfil the criteria for severe rheumatoid arthritis there must be:</p> <ul style="list-style-type: none"> diagnosis of Rheumatoid Arthritis as specified by the '2010 Rheumatoid Arthritis Classification Criteria'*; and symptoms and signs of persistent inflammation (arthralgia, swelling, tenderness) in at least 20 joints or four large joints (ankles, knees, hips, elbows, shoulders); and have failed at least six months of intensive treatment with two conventional disease-modifying antirheumatic drugs (DMARDs). This excludes corticosteroids and non-steroidal anti-inflammatories; and the disease must be progressive and non-responsive to all conventional therapy[^]. <p>* American College of Rheumatology and European League Against Rheumatism. [^] Conventional therapy includes those medications available through the Australian Pharmaceutical Benefits Scheme excluding those on the 'specialised drugs' list for Rheumatoid Arthritis.</p> <p>This applies to both Trauma Comprehensive and Premier.</p>	✓	✗	✗	✓
	<p>Spinal tumour (benign) means the diagnosis of a benign (non-malignant) tumour in the spinal cord which results in the life insured or the insured child*:</p> <ul style="list-style-type: none"> suffering at least 25% permanent impairment as defined in the American Medical Association 'Guides to the Evaluation of Permanent Impairment', 5th Edition, or an equivalent guide to impairment approved by us; or being permanently unable to perform at least one of the activities of daily living without the physical assistance of another adult person; or undergoing surgery to remove the tumour. <p>* In the event a claim is for an infant, impairment will be based on the Functional Independence Measure for Children (WeeFIM) and/or the Paediatric Evaluation of Disability Inventory (PEDI).</p> <p>This applies to both Trauma Comprehensive and Premier.</p>	✓	✗	✗	✓
	<p>Improved Trauma Cover Reinstatement Option</p> <p>We have improved the Trauma Cover Reinstatement Option by allowing Trauma Cover to be reinstated when the original Trauma Cover was reduced by a claim under the linked TPD Cover which would have also been payable under one of our listed Trauma Condition definitions.</p> <p>Please replace Policy Term 4.5.3 with the following:</p> <p>4.5.3 Trauma Cover Reinstatement Option (This option only applies to Trauma Cover for a life insured if it is shown on the Policy Schedule.)</p> <p>If we:</p> <ul style="list-style-type: none"> pay (or begin to pay), the full Trauma Cover lump sum (or instalment) amount insured; or pay (or begin to pay), the full TPD Cover lump sum (or instalment) amount insured where: <ul style="list-style-type: none"> the TPD Cover is linked to Trauma Cover; or the TPD Cover is linked to Trauma Cover and Life Cover <p>for a life insured under this policy, we will offer to reinstate the Trauma Cover for that life insured on the following basis:</p> <ul style="list-style-type: none"> For the following trauma conditions: <ul style="list-style-type: none"> - Alzheimer's disease - blindness (severe) - deafness (severe) - dementia - loss or paralysis of limb - multiple sclerosis - Parkinson's disease 	✓	✗	✗	✓

What cover types are affected?	Summary of enhancement and what it means	OneCare	OneCare Super	OneCare External Master Trust	OneCare SMSF
Trauma Cover continued	<p>we will offer the Trauma Cover Reinstatement Option six months after the later of:</p> <ul style="list-style-type: none"> - the date we received your fully completed claim form; or - the date the life insured satisfied the trauma condition definition. <ul style="list-style-type: none"> • For all other trauma conditions, we will offer the Trauma Cover Reinstatement Option 12 months after the later of: <ul style="list-style-type: none"> - the date we received your fully completed claim form; or - the date the life insured satisfied the trauma condition definition. • The condition giving rise to the TPD Cover claim must satisfy one of the trauma cover condition definitions. • We will offer to reinstate the full Trauma Cover lump sum (or instalment) amount insured we paid (or are paying) for the life insured. • We must receive written acceptance from you within 30 days of the offer being made. • The premium for the reinstated Trauma Cover will be calculated based on the premium rates applying to Trauma Cover at the time you choose to exercise this option. We will apply any medical, occupational or pastimes loadings, or any other loadings that applied to the original and subsequent Trauma Cover(s). • The benefit payment type which will apply to the new Trauma Cover will be the same benefit payment type which applied to the original and subsequent Trauma Cover(s). • Any exclusions which applied to the original Trauma Cover will also apply to the reinstated Trauma Cover. • Indexation, Future Insurability, Business Guarantee Option increases and the Value Protector Option are not available in relation to the reinstated Trauma Cover. <p>You cannot exercise the Trauma Cover Reinstatement Option if:</p> <ul style="list-style-type: none"> • We have previously paid a benefit for terminal illness in respect of the life insured; or • we pay (or begin to pay) only a part of the Trauma Cover lump sum (or instalment) amount insured. However, if we subsequently pay (or begin to pay) the full balance of the Trauma Cover lump sum (or instalment) amount insured in relation to another trauma condition, you can exercise this option in relation to the total of the Trauma Cover amount paid; or • we have previously paid a TPD benefit in respect of the life insured that was not in relation to a defined trauma condition covered by this policy. <p>We will not pay a claim under the reinstated Trauma Cover for:</p> <ul style="list-style-type: none"> • the same trauma condition for which we paid a claim under the original or subsequent Trauma Cover(s) or for the trauma condition for which we paid a claim under the TPD Cover which resulted in the Trauma Reinstatement Option being triggered • angioplasty – triple vessel, aortic surgery, cardiac arrest (out of hospital), cardiomyopathy, coronary artery by-pass surgery, heart attack (major), kidney failure (chronic), open heart surgery or primary pulmonary hypertension if we paid a claim for any of these trauma conditions under the original or subsequent Trauma Cover(s) • loss or paralysis of limb or blindness (severe) (where either of these trauma conditions are caused by a cerebrovascular accident) or stroke, if we paid a claim for angioplasty – triple vessel, aortic surgery, cardiac arrest (out of hospital), cardiomyopathy, coronary artery bypass surgery, heart attack (major), kidney failure (chronic), liver disease (chronic), open heart surgery or primary pulmonary hypertension under the original or subsequent Trauma Cover(s) or the original TPD Cover(s) 	✓	X	X	✓

What cover types are affected?	Summary of enhancement and what it means	OneCare	OneCare Super	OneCare External Master Trust	OneCare SMSF
Trauma Cover continued	<p>Improved Trauma Cover Reinstatement Option continued</p> <ul style="list-style-type: none"> • cancer, carcinoma in situ (CIS), chronic lymphocytic leukaemia or melanoma (early stage), if we paid a claim for any of these trauma conditions under the original or subsequent Trauma Cover(s) or the original TPD Cover(s) • angioplasty, angioplasty – triple vessel, aortic surgery, cardiac arrest (out of hospital), cardiomyopathy, coronary artery by-pass surgery, heart attack (major), heart attack (minor), heart surgery (minor), heart valve surgery, kidney failure (chronic), liver disease (chronic), open heart surgery, primary pulmonary hypertension or, stroke if we paid a claim for diabetes (severe) under the original or subsequent Trauma Cover(s) or the original TPD Cover(s) • diabetes (severe), if we paid a claim for angioplasty, angioplasty – triple vessel, aortic surgery, cardiac arrest (out of hospital), cardiomyopathy, coronary artery bypass surgery, heart attack (major), heart attack (minor), heart valve surgery, heart surgery (minor), kidney failure (chronic), liver disease (chronic), open heart surgery, primary pulmonary hypertension or stroke under the original or subsequent Trauma Cover(s) or the original TPD Cover(s) • kidney failure (chronic), liver disease (chronic), lung disease (chronic) or primary pulmonary hypertension, if we paid a claim for systemic sclerosis under the original or subsequent Trauma Cover(s) or the original TPD Cover(s) • loss of independent existence, if the cause is any trauma condition which we have already paid a claim for under the original or subsequent Trauma Cover(s) or the original TPD Cover(s) • Alzheimer’s disease or dementia, if we paid a claim for either of these trauma conditions under the original or subsequent Trauma Cover(s) or the original TPD Cover(s). <p>There is no cover and no benefit will be payable under the reinstated Trauma Cover for any trauma condition if:</p> <ul style="list-style-type: none"> • the trauma condition first occurs, or is first diagnosed; or • the symptoms leading to the trauma condition occurring, being diagnosed, or first become reasonably apparent, before the date of reinstatement of the Trauma Cover. 				
Child Cover	<p>Maximum sum insured increased (updated)</p> <p>We have increased the maximum sum insured available from \$150,000 to \$200,000.</p> <hr/> <p>Trauma definitions (improved)</p> <p>Several improvements to the trauma definitions listed above under Trauma Cover (including the changes to the trauma condition names) also apply to Child Cover. These include ‘Brain tumour (benign)’, ‘Spinal tumour (benign)’, ‘Cancer’ and ‘Burns (severe)’.</p>	✓	X	X	X
Income Secure Cover	<p>Trauma definitions (improved)</p> <p>Several enhancements to the trauma definitions listed above under Trauma Cover (including the changes to the trauma condition names) also apply to both the Trauma Recovery Benefit and the Booster Option within Income Secure Cover. These include ‘Brain tumour (benign)’, ‘Spinal tumour (benign)’, ‘Cancer’, ‘Burns (severe)’, ‘Heart valve surgery’, ‘Rheumatoid arthritis (severe)’ and ‘Aortic surgery’.</p>	✓	X	X	✓

New options in OneCare

The following options are now available under OneCare:

- **New fixed term instalment**

We have added in a new fixed term instalment benefit payment type of 15 years. This is now available in addition to the current 3, 5 and 10 year options.

- **Value Protector Option**

The Value Protector Option can only be selected where the benefit payment type is a fixed term instalment. While on claim, the monthly instalment amount will increase each year on the claim anniversary by 3%.

Not all options are available for all Policy types. Please refer to the appropriate current OneCare Product Disclosure Statement, available at onepath.com.au, for further information about these new options before making a decision.

Customer Services

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Address

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This publication is current as at September 2013 and may be subject to change. The information provided is of a general nature and does not take into account your personal needs and financial circumstances. You should consider the appropriateness of this information, having regard to your objectives, financial situation and needs. OneCare is issued by OnePath Life Limited (OnePath Life) (ABN 33 009 657 176 AFSL 238341) and OneCare Super is issued by OnePath Custodians Pty Limited (OnePath Custodians) (ABN 12 008 508 496 AFSL 238346 RSE L0000673). You should read the Product Disclosure Statement (PDS), available at onepath.com.au, in deciding whether to acquire, or to continue to hold the product. OnePath Life receives premiums for any insurance cover you obtain from us. Our employees and directors receive a salary from us. They do not receive commissions, however, they may be eligible for performance related bonuses and other staff related benefits.