

# Voluntary Code of Practice in Insurance

Annual Code Compliance Report FY22

Req ID	Requirement wording	Total	% within SLA
4.15	We will include clear instructions on how to cancel or reduce your insurance cover in your insurance welcome pack, our disclosure information, your annual statement, and on our website. If you request a cancellation form, we will send it to you within five business days.	77	90.91%
4.20	<p>If we stop your cover on these grounds, we will confirm this in writing within two weeks of the date your cover was stopped. This communication will include the following:</p> <ul style="list-style-type: none"> <li>a) details about the insurance cover that stopped (for example sum insured, premium);</li> <li>b) the reasons for the cover stopping;</li> <li>c) the date the cover stopped;</li> <li>d) your options to restart your cover, when available, including any terms and conditions which may apply;</li> <li>e) confirmation that you may still claim insured benefits for any events or conditions that occurred before your cover was stopped;</li> <li>f) general information that you can get independent financial advice to help you make a decision;</li> <li>g) general information about the impact of insurance premiums on retirement savings, should you choose to restart your cover.</li> </ul>	45,508	100%
7.12	If you tell us that you wish to make a claim, we will help you provide the information for your claim or direct you to the appropriate forms or information online or email these to you by the next business day. If you require hard copy forms, we will send these within five business days.	2,715	76.43%
7.13	<p>If we receive a claim submission from you, within five business days we will:</p> <ul style="list-style-type: none"> <li>a) acknowledge receipt of the claim;</li> <li>b) assess whether you have provided all of the necessary information and documentation;</li> <li>c) carry out an initial eligibility assessment to assess whether you have insurance cover based on the information available;</li> <li>d) provide you with a summary of the claim process (if this has not already been provided to you when you tell us you wish to make a claim; and</li> <li>e) either provide the claim to the insurer, or tell you that you are not eligible to make a claim based on the information available.</li> </ul>	10,016	67.44%

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7.17	If you have a query about your claim while it is being assessed, we will respond: a) with an acknowledgment by the next business day; and b) with a full response within ten business days.	1,176	97.62%
7.18	You will receive progress updates at least every 20 business days (unless a different timetable is agreed with you). If there are any issues delaying assessment of your claim, we will let you know what these are.	98	88.77%
7.22	Once the insurer has made its decision on your claim, if the insurer informs us that it intends to make a payment to us, we will carry out a review within five business days to assess whether you have met the requirements for the money to be released from your superannuation account. We will also have oversight processes in place to confirm that the insurer is paying the correct amount, either to us or directly to you.	907	95.37%
7.24	If the insurer informs us that it has decided not to pay the claim, we will carry out our review within 15 business days. As part of our review, we will determine whether the insurer has provided you with the below, and we will provide you with any of the below that you have not yet received: a) an explanation in plain language to enable you to understand the reasons for the insurer's view; b) an outline of the evidence relied upon in forming that view; c) a list of all documents obtained by the insurer and us during the assessment, and an opportunity to receive any documents on request; d) an opportunity to make further representations and submissions or provide further information in relation to your claim.	1,610	100%
7.27	If we obtain new information or assessments, or you make further representations and submissions or provide further information, we will have another 15 business days from receipt of the new information to review that information.	315	100%
7.28	If our review results in us querying the insurer's decision, we will tell the insurer within five business days of completing our review. If we believe the claim has a reasonable prospect of success, we will advocate on your behalf. We will keep you informed as the claim proceeds.	16	100%

Req ID	Requirement wording	Total	% within SLA
7.30	<p>If the claim is approved and paid to us by the insurer, we will confirm this with you as soon as we have carried out our assessment of whether you have met the requirements for the money to be released from your superannuation account.</p> <p>Within five business days of confirmation being given, we will release the claim money to you, provided that:</p> <ul style="list-style-type: none"> <li>a) valid identification, and payment instructions and other necessary documents have been received from you;</li> <li>b) we have confirmed that the legal requirements for release of funds from your superannuation account have been satisfied; and</li> <li>c) for death benefit claims, we have contacted all potential beneficiaries where relevant and given them the opportunity to provide submissions in support of their claim to be paid a benefit.</li> </ul>	77	90.91%
7.31	<p>If your claim is declined, we will tell you within 5 business days of completion of our review:</p> <ul style="list-style-type: none"> <li>a) the reasons for the decision in plain language</li> <li>b) that you can request copies of the documents and information relied on in line with the standards in section 13; and</li> <li>c) how you can make a complaint if you are not satisfied with the decision.</li> </ul>	Not available	Not available
10.4	If you tell us that you want to reduce your cover or make any other changes that do not require the approval of the insurer, we will confirm your changes and the date on which your cover has changed in writing within five business days of receiving your instructions.	68,285	85.14%
10.5	If you tell us that you want to increase your cover, replace cover you have in another fund, or make any other changes that we determine will require assessment and approval by the insurer, we will explain the process to you within five business days. You will be given contact details for the primary contact during the application process.	39,836	86.48%
10.16	If you have been transferred to another division which changes the type or terms of the cover you receive from us, we will contact you to explain the changes and your options for changing or cancelling this cover.	0	Not applicable
13.3	<p>We will respond to your enquiry:</p> <ul style="list-style-type: none"> <li>a) with an acknowledgment by the next business day; and</li> <li>b) with a full response within ten business days.</li> </ul>	3,649	54.73%

Req ID	Requirement wording	Total	% within SLA
13.14	You will receive progress updates at least every 20 business days (unless a different timetable is agreed with you). If there are any issues delaying assessment of your complaint, we will let you know.	Not available	Not available
13.15	We will provide a final response to your complaint in writing within 45 calendar days of receiving your complaint. In exceptional cases, we will need more time to investigate and respond to your complaint. In these cases, we will tell you that we need more time, and will clearly communicate our revised expected timeframe, which will not exceed 90 calendar days.	Not available	Not available