



RESERVE FORCES
MEMBER INSURANCE BENEFITS PROGRAMME

FREQUENTLY ASKED QUESTIONS

AON



REGULAR FORCES



CIVILIANS



RESERVE FORCES



DEFENCE COMMUNITY



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NZDF RESERVE FORCES

MEMBER INSURANCE BENEFITS PROGRAMME

FREQUENTLY ASKED QUESTIONS

The NZDF Member Insurance Benefit Programme (MIBP) was established in October 2014 to provide insurance benefits for members of the Armed Services and NZDF Civilian staff and their partners. This is the FAQ for members of the Reserve Forces. MIBP is made up of six key tiers. This FAQ covers the main benefits arising under Tiers 1, 2 and 3:

- TIER 1:** NZDF cover for you
Death by Accident, Physical Loss and ACC Top Up Insurance. The cost of this is fully paid through NZDF.
- TIER 2:** Top up cover for you
Voluntary top-up insurance benefits including Life, Terminal Illness, Physical Loss, Trauma and Income Protection. These enhanced benefits are paid by you and are a matter between you and the insurer.
- TIER 3:** Cover for your Partner/Spouse
Voluntary benefits for your Partner (does not apply if they are Members of NZDF) including Life, Terminal Illness & Trauma. These benefits are paid by you and are a matter between you and the insurer.
- TIER 4:** Cover for ex NZDF members
Allows access to Tier 2 benefits for ex NZDF members who were NZDF members between 1990 and 30 September 2014. These benefits are paid by you and are a matter between you and the insurer.
See the new NZDF MIBP website - <https://nzdf.synergyhealthltd.com/register/MIBP>
- TIER 5:** Cover for Defence Community
This Tier will introduce a range of benefits for the greater Defence Community. The first benefit will be a Funeral Plan to be introduced in August 2017.
See the new NZDF MIBP website - <https://nzdf.synergyhealthltd.com/register/MIBP>
- TIER 6:** Extra protection
Insurance cover over and above Tiers 1, 2 & 3, a range of insurance options, with personal advice from Aon, available to you and your partner / family at discounted rates.

TIERS 1, 2 & 3 BENEFIT SUMMARY

Insurance Benefit	Tier 1	Tier 2	Tier 3
Death by Accident	Yes	No	No
Life & Terminal Illness	No	Yes	Yes
Physical loss	Yes	Yes	No
ACC Top Up	Yes	No	No
Income Protection	No	Yes	No
Trauma Insurance	No	Yes	Yes

PLEASE NOTE:
This FAQ document is not a substitute for any Insurance Policy wordings or other specific product documentation. The Tier 1 Policy Documents are held by NZDF, with the Tier 2 & 3 Policy Documents being held by Perpetual Guardian as corporate trustee. Copies are available on the HR Toolkit, the Force Financial Hub: <http://www.nzdf.mil.nz/families/financial-hub/> and the Aon NZDF MIBP website: <https://nzdf.synergyhealthltd.com/register/MIBP>.



CONTACTS

NZDF Contacts

Contact either HRSC phone **0800 334 772**, or your local HRA.

Aon Contacts

Claims or questions should be directed initially to The NZDF's Insurance Brokers Aon New Zealand.

A free call number **0800 642 748** is available Monday to Friday 8.30 am – 5.00 pm (NZT) to answer any queries you may have. Otherwise email enquiries to nz.nzdf.enquiries@aon.com or refer to the new NZDF MIBP website: <https://nzdf.synergyhealthltd.com/register/MIBP>

A Disclosure Statement is available free of charge from Aon.

CHANGE OF INSURER

As at the 1 July 2017 the insurer for the NZDF MIBP changed from Sovereign to AIA New Zealand. This change was a result of a rigorous remarket exercise which NZDF requires every 5 years to ensure it is getting best value for money and also best terms and conditions for MIBP members. Five leading insurers who specialise in this type of insurance were asked to tender for the business. After a comprehensive evaluation carried out by NZDF and Aon the decision was made to appoint AIA New Zealand.

Under the change, no member is adversely affected in their benefit coverage. There is some increase in Tier 2 & Tier 3 premiums, generally less than 5% which is considerably less than what was otherwise proposed by Sovereign. Any Tier 2 & 3 increases will not occur until the October 2017 payments are deducted.

There have also been a number of benefit enhancements which are detailed in this FAQ.

If you have any questions contact Aon on **0800 642 748** or email nz.nzdf.enquiries@aon.com





TIER ONE NZDF Cover For You!

GENERAL INFORMATION

Q1: What Tier 1 benefits do I receive under MIBP?

As a member of MIBP you receive the following insurance benefits under Tier 1 whilst on active duty with NZDF. Active duty starts from the time you leave your home to attend that duty and ceases when you return home from that duty. These Tier 1 benefits are fully paid by NZDF. For examples of cover refer to Schedule 4 on page 36.

- Death by Accident – \$300,000
- Physical Loss up to \$50,000 – see Schedule 1 on page 25 of this FAQ, the HR Toolkit or on the Aon NZDF MIBP website <https://nzdf.synergyhealthltd.com/register/MIBP>
- ACC Top Up Benefits:
 - If you are injured whilst on NZDF Duty this benefit tops up the 80% of salary ACC benefit to 100% of the aggregate of your Civilian and your NZDF salary ACC entitlement.
 - Benefits are payable fortnightly in advance after a stand-down period of 30 days.
 - Benefits are payable for a period of up to 2 years, or age 65, or earlier recovery, whichever comes first.

These benefits apply worldwide 24 hours a day and seven days a week whilst on NZDF active duty and going to and from your home to that duty.

Q2: How do I get cover for these benefits?

You are automatically covered for these benefits, subject to the eligibility criteria in the policy wordings, from 1 October 2014 or when you join NZDF if later.

Q3: What is the eligibility criteria?

All active members of the NZDF Reserve Forces are covered.

Q4: How much does this cost me?

The premiums for Tier 1 are fully paid by NZDF meaning there is no cost to you.

Q5: Is there anything I am required to do?

No you are automatically covered when you join NZDF.

You can access a copy of your Tier 1 membership certificate of insurance and find additional information on Tiers 2 & 3 from the NZDF MIBP website: <https://nzdf.synergyhealthltd.com/register/MIBP>.

NB You are still covered under Tier 1 even if you don't request your Certificate of Insurance.

Q6: What is the definition of salary?

Reserve Forces salary is your base salary plus your Military Factor.

The rest of your Total Remuneration components are excluded from any MIBP benefit calculation.

Q7: Are “NZDF belligerent operations (Armed Combat and Major War Fighting)” anywhere in the world covered by these benefits?

In respect to specific Tiers:

Tier 1 Yes they are.

Tier 2 From 1 July 2017 Tier 2 Life cover is available for armed combat and major warfighting, some conditions apply, please see Tier 2 section - Q2 on page 12.



TIER ONE

GENERAL INFORMATION CONTINUED

Armed combat and major warfighting cover is not available for Tier 2 Income Protection and Trauma cover. All other duties are fully covered.

Armed combat and major warfighting cover for Physical Loss details are on the NZDF MIBP website: <https://nzdf.synergyhealthltd.com/register/MIBP>

Tiers 3 & 4 This cover is not available.

Q8: What happens if I am “Deployed” as a Regular Forces member overseas on NZDF business, am I covered?

Yes, in this instance you will be eligible for the Regular Force benefits under Tier 1 and any subsequent flow into Tier 2. To view the benefits provided when you are deployed see the Regular Forces FAQ at <https://nzdf.synergyhealthltd.com/register/MIBP>.

Q9: What happens when I return from the overseas deployment?

Upon your return your Tier 1 Regular Forces benefits will cease and your Tier 1 Reserve Forces benefits will resume.

- You will also be able to transfer your Tier 1 Regular Forces benefits into Tier 2 at your cost, you have 60 days from the date of your return to do this. As no evidence of health is required you seamlessly maintain your benefits at the Tier 2 concessionary premiums.
- If this might apply to you, please contact Aon at: nz.nzdf.enquiries@aon.com or telephone 0800 642 748.

Q10: Are there any age limits?

Tier 1 Death by Accident and Physical Loss insurance ceases when you turn age 80. ACC Top Up ceases at age 65 along with ACC income payments.

Q11: Can I assign my cover to another person?

No, cover is through a group plan and cannot be assigned by individual members. However if you go to the website: <https://nzdf.synergyhealthltd.com/register/MIBP>. You can source a certificate confirming your cover.

Q12: I am a Civilian employee and also a Reserve Force member do I receive both covers?

No, you will only be entitled to the Civilian benefits.

Q13: What happens if I take parental leave or leave without pay?

You will not be covered as Reserve Force members Tier 1 benefits are only covered whilst on duty.

Q14: If I leave NZDF can I continue some or all of my Tier 1 insurances at my own expense?

Tier 1 cover ceases when you leave NZDF. You will however be able to arrange continuation of this insurance through Tier 6.

Your Tier 2 & 3 cover, if you have any, can continue at the Tier 2 & 3 concessionary premiums.

If this might apply to you please contact Aon at nz.nzdf.enquiries@aon.com or telephone 0800 642 748.



TIER ONE

GENERAL INFORMATION CONTINUED

Q15: Can I top-up this Tier 1 Cover or purchase additional cover?

Yes, you can purchase additional cover via Tier 2.

Special Life Events - you can add under Tier 2 an additional \$50,000 Life & Terminal Illness cover automatically without any health questions under any of the following events:

- A marriage or civil union
- Divorce or legal separation
- The birth or adoption of a child
- An annual NZDF salary increase - limited to 5 x increase in salary
- Taking full-time care of a dependant relative i.e. your spouse/partner, mother, father, brother, sister, son, daughter, grandfather or grandmother
- The tertiary education of a child
- A mortgage - the taking out or increasing of a mortgage by you, or your child where you are acting as a guarantor for the mortgage. You can take a maximum benefit amount of \$150,000 if this applies.
- Your child starting secondary school education
- The death of a spouse or partner as defined in the Property (Relationships) Act 1976.

The maximum top up of Life & Terminal Illness cover permitted under special events is \$150,000 pa to the policy maximum of \$250,000. Conditions may apply.

For all other top ups refer to Tier 2 section, page 12 in this FAQ, or the HR Toolkit or the HRSC or your HRA All Tier 1 top ups are managed under Tier 2 and premiums are payable by monthly direct debit.

Contact Aon – Phone: **0800 642 748** or email nz.nzdf.enquiries@aon.com.

Q16: Is any cover available for my spouse / partner?

Yes, Tier 3 provides some insurance options for your partner.

Refer to Tier 3 section, page 20 in this FAQ.

Q17: Are any Death or Physical Loss or ACC Top Up claim payments subject to KiwiSaver or other superannuation contributions?

No, benefits paid under Tiers 1, 2 & 3 are not liable for any contributions to KiwiSaver or any other superannuation scheme.

Q18: Would KiwiSaver, Veteran Pensions or any other superannuation payment impact on any claim benefit payments received?

There are no reductions if you are in receipt of KiwiSaver Veteran pensions or superannuation payments.

Q19: What other cover is available for me or my spouse / partner or children?

Tier 6, provides a range of insurance options not covered in Tiers 1, 2 & 3. If this is of interest to you please email Aon at nz.nzdf.enquiries@aon.com or phone Aon on: **0800 642 748**.



TIER ONE

DEATH BY ACCIDENT & PHYSICAL LOSS

Q1: How does the Death by Accident insurance work?

Death by Accident provides an automatic lump sum payment of \$300,000 if you die from an accident, whilst on active Reserve Forces duty for NZDF or going to or from home to that duty. Currently the payments are paid as a tax free lump sum.

Q2: If I die who is the death benefit paid to?

The death benefit will be paid to your estate, therefore it is very important to have an up-to-date Will.

Q3: As the payment of a death claim can sometimes be delayed with estate issues, can an advance Funeral Benefit be paid?

Yes it can. Subject to NZDF and Insurer approval, a Bereavement Support Benefit of up to \$15,000 can be advanced from the \$300,000 Death by Accident Benefit to cover approved funeral expenses.

Enquiries about a Claim for a Bereavement Support Benefit should be directed to an HRA or Aon, **0800 642 748**.

Your estate should check for any other entitlement with NZDF and/or Veterans Affairs New Zealand.

Q4: How does the Physical Loss Insurance work?

The Physical Loss Insurance is an accident benefit whilst on active Reserve Forces duty for NZDF or going to and from home to that duty, based on a specified list of events and a payment associated with each event. The maximum amount under Tier 1 is \$50,000. Refer to Schedule 1 Physical Loss on page 25 of this FAQ to see the scale of payments. If a Physical Loss benefit is paid the balance of the Physical Loss benefit is reduced by the amount of benefit paid.

Q5: How long am I covered for under this Plan?

The Tier 1 Death by Accident and Physical Loss Insurance benefits cover you until you either leave NZDF, attain the age of 80, or if a Death claim is paid under this policy.

ACC Top-Up payments cease at age 65 along with ACC income payment and are separate to any Death by Accident insurance benefits.

Q6: Are Physical Loss payments in addition to ACC (AEP)?

Yes, all Physical Loss payments are additional to any ACC payments.



TIER ONE

ACC TOP UP INSURANCE

Q1: How does this ACC Top Up Insurance work?

If you are injured whilst on NZDF duty and you qualify for a continuation of your Civilian salary via an ACC Payment. This payment is equal to 80% of your Civilian salary and NZDF earnings to the maximum AAC salary level (Liable Earnings), currently \$122,063.

Under the ACC Top Up the benefit will top up the 20% shortfall of your ACC payment.

Q2: How much is my benefit and how long is the Tier 1 benefit paid for?

Your benefit is 20% of the aggregate of your NZDF and your Civilian salary subject to the ACC Liable Earnings cap at the time of your claim.

The Tier 1 benefit payment will cease upon your recovery, attainment of age 65 or two years, whichever occurs first.

Q3: I already have a personal income protection policy how will this work?

It is important you understand how this works. If you have another income protection policy please contact Aon to discuss the implications. The policies are unlikely to pay duplicate benefits in respect of the same disablement. If this applies to you please contact Aon by email nz.nzdf.enquiries@aon.com or telephone **0800 642 748**.

Q4: How long am I covered for under this Plan?

The ACC Top Up benefit payments under Tier 1 will cease:

- Once you stop being injured/disabled
- If you die
- When you reach age 65 or at the end of the 2 year benefit period, whichever is the sooner
- Whilst you are in jail or otherwise detained as a result of a criminal act
- You make a false, dishonest or fraudulent claim or support any claim with false evidence
- You do not undertake medical treatment and/or rehabilitation which would assist you to return to work.

Q5: What sort of disabilities or events that might prevent me from working are not covered?

Some examples of disabilities or events that can prevent you from working that are not covered include:

- intentional self-inflicted bodily injury or illness
- all illness related disabilities
- the taking of non-prescription drugs other than for therapeutic reasons
- the deliberate misuse of prescribed drugs, and
- participation in a criminal act.

Q6: If my Civilian salary is above the ACC maximum benefit level can I claim for the additional amount?

No, the ACC maximum salary for benefits is currently \$122,063 and this is the level at which payment calculations are capped.

Q7: Is there a stand down period before a claim can be made?

Yes – there is a stand down or waiting period, before the ACC top-up benefit commences, this is 30 calendar days from the date of your disablement.

The claim payment is then made fortnightly in advance following completion of the 30 day stand down.



TIER ONE

ACC TOP UP INSURANCE

Q8: What will I be paid in the 30 Day stand down?

You will qualify for the normal ACC benefit i.e. 80% of salary up to a maximum salary of \$122,063.

Q9: How often are claim payments made?

Claim payments are made fortnightly in advance. The first payment will be made at the end of the 30 day stand down.

Q10: If I am only partially disabled can I claim?

Yes, if an ACC claim is accepted.

Q11: Once I am on the ACC Top Up claim what happens next?

Depending upon the severity of your disablement, the insurer will contact you from time to time to ascertain your disablement condition to ensure you are still entitled to payments.

Q12: If I claim who makes the medical assessment. What happens if I have claims issues or my claim is declined?

The insurer makes all medical assessments in respect of your claim. If there are any issues you should contact your local HRA or Aon.

Q13: Is the ACC benefit taxable?

Yes – your ACC Top Up benefit is income and therefore taxable just like your salary. The benefit paid to you will include tax and you will be responsible to pay the tax to the IRD.





TIER TWO Top up benefits for you!

GENERAL INFORMATION

Tier 2 offers insurance benefits you may not be able to obtain in a retail policy and premiums are often lower. Upon joining NZDF and within a 60 day Special Offer Period, and up to certain limits, most pre-existing conditions are fully protected without undergoing a health assessment providing you can answer no to two health questions on the application form.

Q1: What extra insurance benefits are available to me under Tier 2?

All Reserve Force members are eligible for:

Life, Terminal Illness & Physical Loss Insurance

Life and Terminal Illness is available in units of \$50,000 up to a maximum Tier 2 amount of \$1 million.

Physical Loss is increased by \$50,000 in addition to the Tier 1 benefit.

Income Protection Insurance

Reserve Force members are able to insure their civilian salaries under the Tier 2. Details are:

1. • Benefit 75% of salary
 - Stand down period 90 days
 - Benefit payment period 2 years.
2. Top up options
 - Extend the benefit payment period to five (5) years, or
 - Extend the benefit payment period to age 70.
3. To apply for cover you must be earning a salary or wage or prove income.

Trauma Insurance

Provides a cash injection benefit, available in units of \$5,000 up to a maximum amount of \$250,000.

Special Events

As a Tier 1 member you are also eligible for Special Events cover. Refer to Q15, page 8.

Q2: I understand that there may be some important joining concessions for me under Tier 2, what are they?

Concessionary Cover & Full Pre-existing Conditions Protection

Concessionary cover up to the limits detailed below is available if you apply for Tier 2 options within 60 days of you joining NZDF. The pre-existing conditions cover applies, subject to you being able to answer 'No' to two health questions and signing the declaration on the Tier 2 Quote Acceptance Form:

1. Life, & Terminal Illness insurance

- a) You can buy units in multiples of \$50,000 to a total of \$300,000. Additional units may be purchased subject to health assessment.
- b) Physical Loss is automatically included in the 1st \$50,000 unit, it is not available separately.

2. Income Protection Insurance

75% of your civilian salary to a maximum benefit of \$48,000 (equates to a salary of \$64,000) (90 day stand down, two year benefit period). You can also top up above the \$48,000 benefit to 75% of your actual salary and extend the benefit payment period to five years or age 70 subject to health assessment.

3. Trauma insurance

You can buy units in multiples of \$5,000 up to a total of \$60,000.

4. NZDF Operational Services – Armed Combat and Major War Fighting

Tier 2 Reserve Forces benefits provide cover for all NZDF Operational services, except for Armed Combat and Major War Fighting. If you are deployed as a Regular Forces member your Tier 2 life cover up to \$300,000 will include Armed Combat and Major War Fighting after six months of Tier 2 membership.



GENERAL INFORMATION

How to apply for top up cover within the joining concession limits

When you join NZDF you have a Special Offer period of 60 days to apply for top cover without any health assessment and this includes full pre-existing conditions protection to the limits detailed under each policy, subject to you being able to answer no to two health questions on the application form.

Contact Aon on **0800 642 748** or nz.nzdf.enquiries@aon.com to request your new joining quotation and application form.

NB If you apply for Tier 2 options outside the Special Offer 60 day period, a full health assessment may be required and pre-existing conditions may not be covered or terms or exclusions could apply.

Q3: When are these Special Offers available?

- within 60 days of you joining NZDF (or completing your Initial Recruit Course), or
- when special windows are established for this purpose.

Q4: If I have taken advantage of an earlier Special Offer does this mean I can do it again?

- **Yes**, though you can only have one opportunity for the maximum special offer.
- If you have taken a lesser amount then you can top up or add a benefit you haven't previously taken.
- If you were previously declined cover or special conditions applied contact Aon and they will guide you.

What other concessions are available?

At each Renewal you can increase your Life and Terminal Illness and Trauma cover by 5% without any health assessment. If you take out Tier 2 cover Aon will contact you prior to each renewal to see if you would be interested in this increase.

Q6: How do I find out about how much these Tier 2 insurance benefits will cost me?

Refer to the NZDF MIBP website: <https://nzdf.synergyhealthltd.com/register/MIBP>.

Go to the New To NZDF tab and complete the MIBP Registration Form to receive a quotation, or contact Aon on:

Email: nz.nzdf.enquiries@aon.com, or

Tel: Aon 0800 642 748.

Q7: How do I take out the Tier 2 cover?

Contact Aon for a personalised quotation on 0800 642 748 or nz.nzdf.enquiries@aon.com. On receipt of your quotation complete and sign the Tier 2 application form and return to nz.nzdf.enquiries@aon.com.

If at any time you require additional cover or if you would like to apply for cover above the Special Offer limits contact Aon who will send you a personal quotation. Please note that a personal health statement will need to be completed for an application above the Special Offer limits.

Q8: What if I am unable to sign the declaration?

Contact Aon and they will provide assistance in this regard.

Q9: How do I pay for these Tier 2 insurance benefits?

By monthly direct debit from your bank account.

The Tier 2 application forms include a direct debit form, Tier 2 premiums will then be deducted from the Bank Account nominated by you on the 20th of each month, until you advise to the contrary.



TIER TWO

GENERAL INFORMATION CONTINUED

Q10: Can I have deductions made from my pay?

No, the only option is direct debit, this is a system constraint.

Q11: What happens if for some reason I miss my direct debit payment?

- If for some reason you miss a direct debit payment a double payment will be requested the next month.
- If you also miss payment the next month you will be requested to pay the missing amounts by cheque/ or bank transfer.
- If you miss three months direct debit payments your cover will lapse. If you are still a member of NZDF you can reapply to join the MIBP, however you will need to complete a health assessment for all cover. If you are no longer a member of the NZDF you will be unable to re-join Tier 2.
- If your premiums are in arrears, no claims under Tiers 2 & 3 will be paid until your premiums are up to date.

Q12: What is a health assessment?

Health assessment is required where you want cover above the automatic concession for that benefit or apply for cover outside any special offer period.

Initially the assessment is the completion of a health questionnaire. The insurer may also ask for a doctor's report or some tests, usually these tests will depend upon your age, the level of additional cover you want and your health history. The Insurer will cover the costs associated with your application process.

When undertaking health assessment some people are accepted at standard conditions and premiums, however some applicants are charged an additional premium or a medical condition might be excluded for cover. Very rarely the additional cover might be declined. In those instances the automatic benefits are not affected.

Q13: How long can I be covered for under Tier 2?

You are covered up to age 80 for life & terminal illness and age 70 for all other benefits unless you have been paid your full trauma benefit whereupon the trauma cover ceases. Your physical loss benefit will also cease where the full benefit has been paid, although your Life and Terminal Illness cover will continue.

Q14: What happens to my Tier 2 benefits if I leave NZDF?

As your premiums are paid by direct debit your cover will continue as long as the premiums are paid. You should contact Aon if you have any questions or want to change this cover.

Q15: If I leave NZDF what happens to my Tier 1 cover?

Your Tier 1 covers cease.

Q17: Who do I contact about claims or for general information?

For all claim and general information enquiries please contact Aon in the first instance: **0800 642 748**.

All other items please contact your HRA, HRSC or Aon on 0800 642 748 or email nz.nzdf.enquiries@aon.com.

Q18: Who is the Insurer?

The NZDF MIBP Tiers 1, 2, 3, 4, 5 & 6 Insurances are insured by AIA New Zealand.

Q19: Is suicide covered under my Tier 2 Life & Terminal Illness insurance?

Suicide is covered from 13 months after the date you take this insurance out.



TIER TWO

LIFE, TERMINAL ILLNESS & PHYSICAL LOSS

Q1: How does the Tier 2 Life & Terminal Illness Insurance work?

Life Insurance provides a lump sum payment of the amount you are insured for if you die, from any cause. If you are diagnosed as terminally ill, the lump sum may be paid in advance of death. Currently the payments are paid as a tax free lump sum.

Q2: If I die who is the death benefit paid to?

The death benefit will be paid to your estate, therefore it is very important to have an up-to-date Will.

Q3: How do I qualify for a Terminal Illness benefit and how is this benefit paid?

If your specialist diagnoses you as being terminally ill and likely to die within 12 months, the Insurer has an option to pay the death benefit early, i.e. payment in advance of death.

There are also a number of Advance Benefit conditions on which the Terminal Illness benefit will be paid upon diagnosis, refer to Schedule 2 on page 27. The amount of Terminal Illness Advanced Benefit payable is thirty percent (30%) of the Life amount Insured.

For more information contact Aon: Phone 0800 642 748 or email nz.nzdf.enquiries@aon.com.

Q4: What if I am paid out and then don't die from the terminal illness within 12 months?

You are not required to pay the money back. However the terminal illness payment is an early payment of the death benefit so when you do eventually die no further funds will be paid.

Q5: As the payment of a death claim can sometimes be delayed with estate issues, can an advance Funeral Benefit be paid?

- **Yes** it can. Subject to Policy Owner and Insurer approval, a Bereavement Support Benefit of up to \$15,000 can be advanced from your Tier 2 Life Benefit to cover approved funeral expenses.
- Enquiries about a Claim for a Bereavement Support Benefit should be directed to an HRA or Aon **0800 642 748**.
- Your estate should check for any other entitlement with NZDF and/or Veterans Affairs New Zealand.

Q6: How long am I covered for under this Plan?

The Tier 2 Life & Terminal Illness and Physical Loss Insurance benefits cover you until you either leave NZDF, attain the age of 80 or if a Death or Terminal Illness claim is paid under this policy. The Life & Terminal Illness benefit is not affected if a Physical Loss benefit is paid.

Q7: How does the Physical Loss Insurance work?

The Tier 2 Physical Loss Insurance is an accident benefit which provides worldwide 24/7 cover, based on a specified list of events and a payment associated with each event. The maximum amount under Tier 1 is \$50,000. Refer to the Schedule 1 Physical Loss on page 27 to this FAQ to see the scale of payments. If a Physical Loss benefit is paid the balance of the Physical Loss benefit is reduced by the amount of benefit paid.

Q8: Are Physical Loss payments in addition to ACC (AEP)?

Yes, all Physical Loss payments are additional to any ACC payments.



TIER TWO

INCOME PROTECTION INSURANCE

Q1: How does this Income Protection Insurance work?

Income Protection Insurance provides for continued payment of a percentage of your civilian salary if you become Disabled and unable to follow your usual occupation or trade.

Q2: What does Total Disablement mean?

Total Disablement means:

- because of accident & sickness you are incapable of performing your usual occupation or trade for more than 10 hours per week; and
- you are not earning remuneration from any other occupation, and
- you are under the regular care and attendance of a Medical Practitioner.

Disablement is from accident or sickness and can include sickness of a mental health nature.

Q3: How much is my benefit and how long is the benefit payment period?

Your benefit is calculated as 75% of your annual salary as advised by you at the previous annual review date or date of joining if later, before the deduction of income tax.

If your civilian income is not salary based the benefit will be based on your previous 12 months earnings.

The Base benefit payment period is to your recovery, 2 years, or to age 70 whichever occurs first.

If you are normally working less than full time you are still covered and your benefit will be based on your actual earnings.

Q4: How often are claim payments made?

Claim payments are made Fortnightly in advance. The first payment will be made at the end of the 90 day stand down period. This means it will be 90 days from the start of your disablement before you receive your first payment.

Q5: Can my Income Protection claim benefit be reduced by other income I receive?

Yes, potentially your Income Protection Claim benefit may be reduced by income paid by reason of:

- any injury and/or illness disability income benefits paid under any superannuation scheme or any other insurance policy or scheme. You can however receive National Superannuation, a Veterans Pension, a GSF pension and your KiwiSaver funds without any reduction
- ACC, weekly compensation, accident insurance, social security payment or any other state provided benefit, or
- salary, wages or other remuneration.

If this potential applies to you, contact Aon who will clarify your situation and answer any questions you may have.

Q6: Once I am on Income Protection claim what happens next?

Depending upon the severity of your disablement, the insurer will contact you from time to time to ascertain your disablement condition to ensure you are still entitled to payments.

Q7: Once on an income protection claim is my benefit ever increased?

Yes, once you are on an income protection claim the amount of benefit is reviewed at each annual claim anniversary and increased by the lesser of the percentage increase in the CPI index over the corresponding period or 5%.

Q8: If I have an Income Protection claim e.g. for a heart attack, recover and say a couple of years later I have another heart attack or even a cancer disability, can I make a fresh claim?

Yes. Each disablement is treated separately and on its own merits. A new benefit period of up to two years will apply to each new claim. Talk to Aon for more guidance.



TIER TWO

INCOME PROTECTION INSURANCE

Q9: If I claim who makes the medical assessment? What happens if I have a claims issue or my claim is declined?

The insurer makes all medical assessments in respect of your claim. If there are any issues you should contact Aon.

Q10: What are the options available to me under Tier 2 Income Protection?

As a Reserve Force member you are able to buy Income Protection for your civilian (non NZDF) based income. There are a number of income protection options depending upon your requirements. To be eligible for cover you must be earning a civilian salary or wage or be able to prove reliable income.

Details are:

1.
 - Benefit 75% of salary
 - Stand down period 90 days
 - Benefit Payment Period 2 years.
2. **Add Top Up options**
 1. Extend benefit payment period to five (5) years, or
 2. Extend benefit payment period to age 70.

Note the following benefit scale applies:

75% of salary up to \$320,000 salary, plus 50% of the next \$80,000 salary, plus 25% of your remaining salary to a maximum benefit of \$300,000 pa

1. You can reduce the 90 day stand down period by paying an additional premium. The choices for a shorter stand down are 30 days or 60 days. This option is subject to health assessment.

Q11: Are the premiums I pay for Income Protection tax deductible?

Yes, as at 1 July 2017, they are tax deductible and Aon will give you an annual confirmation for submission to IRD provided you keep Aon notified of your current address.

Q12: I already have a personal income protection policy how will this work?

It is important you understand how this works. If you have another income protection policy, please contact Aon to discuss the implications. Email nz.nzdf.enquiries@aon.com or telephone **0800 642 748**.

Q13: When will a benefit stop being paid?

The Income Protection benefit payments will cease:

- Once you stop being disabled.
- If you die.
- When you reach age 70 or at the end of the 2 year benefit period, whichever is the sooner. (if you have selected an extended benefit period and paid for this, benefit payments may continue beyond the 2 year benefit period).
- Whilst you are in jail or otherwise detained as a result of a criminal act.
- You make a false, dishonest or fraudulent claim or support any claim with false evidence.
- You do not undertake medical treatment and/or rehabilitation which would assist you to return to work.

Q14: Where does ACC (NZDF AEP) fit? Do I get both?

No – you don't get both unless your MIBP benefit exceeds your ACC payments. ACC covers accidents, and MIBP responds for sickness and accidents not covered by ACC. If the ACC benefit is less than the sum assured under this policy (and you meet the definitions), this policy may pay the additional amount above the ACC payment.



TIER TWO

INCOME PROTECTION INSURANCE CONTINUED

Q15: If my salary is above the ACC maximum benefit level can I claim both?

Yes, provided you have applied for and been accepted for the appropriate benefits. The ACC maximum salary for benefits is currently \$122,063 (1st July 2017). If your salary is above this amount you may also be able to claim under the MIBP Income Protection as it has a difference in limits feature.

Q16: Is there a stand down period before a claim can be made?

Yes – there is a stand down or waiting period of 90 calendar days from the date of your disablement.

Upon acceptance of the claim the first payment is made upon completion of the 90 days and fortnightly thereafter i.e. benefits are paid fortnightly in advance.

Q17: What will I be paid in the 90 Day stand down?

You will not be paid by NZDF, each person's situation will be different depending upon their civilian employment:

- If you are concerned your arrangements are insufficient to cover the stand down period you can reduce your stand down period by paying an additional premium 2 to reduce your stand down to either 30 days or 60 days. Contact Aon for details.

Q18: If I am only partially disabled can I claim?

A Partial Disablement benefit may be payable where you are earning less income as a result of the disablement:

- Through accident and sickness you must have been totally unable to work for a minimum of 14 consecutive days and have returned to work for more than 10 hours per week.
- After the 90 day stand down period has expired and provided you are still Partially Disabled, you will be able to claim a Partial Disablement benefit. The benefit amount will be adjusted to reflect your new earnings.

Disablement is from accident or sickness and can include sickness of a mental health nature.

Contact Aon if you think this may apply to you. Phone: **0800 642 748** or email: nz.nzdf.enquiries@aon.com.

Q19: What happens if I have a reoccurrence of a condition previously claimed for?

Many people on Income Protection claim recover and return to work full time before the end of the benefit period, e.g. under Tier 1 this is two years.

- A few people on returning to work full time then have a disability relapse from the same or related causes and if this occurs within six months of returning to work the 90 day stand down period will not be applied. The claim may be treated as an extension of the earlier claim, in which case the benefit period will apply to both the earlier claim and the period following relapse for a combined total payment period of two years.
- If the relapse occurs after six months from returning to work a new claim will be initiated. A new 90 day stand down will apply and a new two year benefit period will also apply.

Q20: If I am disabled and receiving an Income Protection claim benefit am I able to receive any rehabilitation assistance?

Yes – this is at the Insurer's discretion to help cover the costs of specialised equipment or home alterations that have become necessary because of your disability. A lump sum of up to 13 times the fortnightly equivalent of your Income Protection benefit may be payable at the Insurer's discretion to help cover these costs. This is in addition to your fortnightly Income Benefit.

Q21: Is the Income Protection benefit taxable?

Yes – your Income Protection benefit is income and therefore taxable just like your salary. The benefit paid to you will include tax and you will be responsible to pay the tax to the IRD.



TIER TWO

TRAUMA INSURANCE

Q1: How does Trauma insurance work; and if I purchase Trauma insurance can a claim under it impact on my Life or Income Protection insurance?

Provided you meet the terms and conditions of the policy, and you survive for 14 days after a Trauma event diagnosis (not on life support) and your claim is accepted by the insurer.

- If you are diagnosed with any of the Trauma conditions listed, a lump sum will be paid to you.
- Any claims paid under the trauma insurance will not affect your MIBP life or income protection insurance.

Q2: What are the Trauma conditions?

There are 39 conditions covered. Please refer to the schedule 3 on page 28 of this FAQ; or to the policy on the HR Toolkit; or the NZDF MIBP website: <https://nzdf.synergyhealthltd.com/register/MIBP>

NB. Each Trauma critical condition is specifically defined in the policy document e.g. what actually is a heart attack? For example a very minor heart attack may not reach the policy definition of a "heart attack". The same principle may apply to other Trauma critical conditions. If you have any questions or any doubt on the above contact Aon New Zealand.

Q3: What are the options available to me under Trauma insurance?

Trauma insurance is available in units of \$5,000, up to \$60,000 without health assessment during the Special Offer period and as part of the joining concessions. The maximum amount of Trauma insurance you can buy is \$250,000.

Q4: How could I use a Trauma benefit?

A Trauma insurance payment may be used to cover additional expense or loss of income e.g. where a partner is required to give up work or go on reduced income to care for you.

Q5: What are the limitations on the Trauma benefits?

- Only new events diagnosed after you join MIBP Trauma are covered. The joining concession is still very important as there are many medical conditions that lead to an event that are still covered for example high blood pressure is often a precursor to heart or stroke conditions.
- When a Trauma benefit has been paid all cover ceases.
- There is an exclusion for certain events occurring in the first three months of your joining (refer to Schedule 3, page 28, of this FAQ).





TIER THREE Cover for your Partner/Spouse

GENERAL INFORMATION

You can obtain benefits for your Partner/Spouse (Partner who is not a member of NZDF) at your own cost.

Q1: What options are available to my partner under Tier 3?

The Partner of all full time and part time members of the Regular Forces, Reserve Force, and all permanent or fixed term Civilian employees are eligible for:

- Life & Terminal Illness insurance in units of \$50,000 to a maximum of \$1,000,000.
- Trauma insurance is available with an initial unit of \$10,000 and thereafter in units of \$10,000 to a maximum value of \$250,000.

NB The Tier 3 Trauma cover is an accelerated benefit which means Trauma cover can only be taken with the Life & Terminal illness cover and the Tier 3 Life benefit will be reduced by the amount of any Trauma claim payment.

Q2: What are Tier 3 “joining concessions”?

Automatic cover up to the limits detailed below is available for the special offer period when you first join NZDF, or you have a new partner or during any other special offering if your Partner applies for Tier 3 options within the special offer period. This means limited health assessment, i.e. your Partner being able to answer ‘no’ to two health questions and sign the declaration on the Application form then cover for pre-existing conditions applies.

Life & Terminal Illness insurance

Has an automatic cover of \$150,000 i.e. 3 x units of \$50,000. You do not have to take three units the minimum amount is 1 unit.

Trauma insurance

Has automatic cover of \$20,000 i.e. 2 x units of \$10,000. You do not have to take two units the minimum amount is 1 unit. All additional units need health assessment. If you respond after the Special Offer 60 day period you will need to be health assessed and the “joining concessions” cannot apply.

Q3: How does my Partner take out the Tier 3 cover?

Please contact Aon to advise them of your Partner’s date of birth and gender. Aon will then send you a Tier 3 quotation and application form. Your Partner will need to complete and sign the declaration on the form and return this to Aon.

Q4: Once my Partner has taken cover can they increase it?

Yes, Contact Aon.

At each Renewal your Partner can increase their Life and Terminal Illness and Trauma cover by 5% without any health assessment. If they take out Tier 3 cover Aon will contact you prior to each renewal to see if your partner wants this increase. At any other time increases may be subject to a health assessment.

Q5: What if my Partner is unable to sign the declaration?

Contact Aon and they will provide assistance in this regard.

Q6: Are there any exclusions?

Yes, the benefit will not be payable for a claim arising from suicide within the first 13 months. Only new events diagnosed after you join MIBP Trauma are covered. There is an exclusion for certain events occurring in the first three months of joining. Refer to Schedule 3 for details.

Q7: How are the Tier 3 premiums paid?

You pay your Tier 3 premiums by monthly Direct Debit from your bank account or your Partner may elect to pay the premiums from their bank account. If so a separate Direct Debit Form will be required. Payments are made on the 20th of each month.



TIER THREE

GENERAL INFORMATION

Q8: What happens if for some reason I miss direct debit payment?

- If for some reason you miss a direct debit payment a double payment will be requested next month.
- If you also miss payment the next month you will be requested to pay the missing amounts by cheque / or bank transfer.
- If you miss three months direct debit payments the covers will lapse.
- If you are still a member of NZDF your Partner can reapply to join the MIBP Tier 3 however they will need to complete a health assessment for all cover. If you are no longer a member of the NZDF your Partner/Spouse will be unable to re-join Tier 3. However, your partner/spouse will be able to apply for Life & Terminal Illness and Trauma Insurance under the new Tier 5 Defence Community arrangement. If this applies to you please contact Aon on **0800 642 748** or email nz.nzdf.enquiries@aon.com. If premiums are in arrears no claims under Tiers 3 will be paid until premiums are up to date.

Q9: If I have a Trauma claim and then have a claim for a different event, do I get another benefit?

No. Once you have had a trauma claim the insurer's obligation to you under this policy ends. Your life cover will be reduced by the Trauma payment.

Q10: How long can my Partner be covered for under Tier 3?

Your Partner can continue to be covered up to age 80 for death and terminal illness and age 70 for the trauma benefits at the discounted rate.

Q11: If I leave NZDF can my Partner's Tier 3 benefits be retained to keep their insurance protection in place?

Yes they can, just continue your monthly Direct Debit payments.
Premiums continue at the discounted plan rate.

Q12: If my Partner should change, can my new Partner access Tier 3?

Yes they can, please contact Aon on 0800 642 748, and they will be able to help.

Q13: If my new Partner joins Tier 3 can my previous Partner remain covered?

Yes, as long as premiums continue to be paid.

TIER FOUR

COVER FOR EX NZDF MEMBER

Q1: What is available under Tier 4?

Tier 4 allows access to Tier 2 benefits for ex NZDF members who were NZDF members between 1990 and 30 September 2014. These benefits are paid by you and are a matter between you and the insurer. Refer to the new NZDF MIBP website for details - <https://nzdf.synergyhealthltd.com/register/MIBP>.



TIER FIVE

COVER FOR DEFENCE COMMUNITY

Q1: What is available under Tier 5?

Tier 5 will introduce a range of benefits for the greater Defence Community. The first benefit will be a Funeral Plan to be introduced in August 2017. Refer to the new NZDF MIBP website for details - <https://nzdf.synergyhealthltd.com/register/MIBP>.

TIER SIX

EXTRA PROTECTION SOLUTIONS FOR YOU AND YOUR FAMILY

You can obtain additional benefits, for yourself, your Partner and your children at your own cost.

Q1: What cover is available under Tier 6?

Insurance options not available under Tiers 2 & 3, e.g. additional life and trauma insurances, cover for adult children etc.

Q2: Are there any concessions?

Tier 6 is outside the spectrum of the group policies and is a retail option that is fully underwritten by AIA New Zealand. However any cover taken out via Tier 6 may attract a premium discount.

Q3: How do I get further information?

Attend a presentation or contact Aon on:

Email: nz.nzdf.enquiries@aon.com

Tel: Aon 0800 642 748

Or refer to the Force Financial Hub <http://www.nzdf.mil.nz/families/financial-hub/>.

ABOUT THE INSURER

All insurances available as part of the NZDF MIBP (Tiers 1, 2, 3, 4, 5 and 6) are underwritten by AIA New Zealand.

AIA New Zealand, the policy insurer, is part of AIA Group, the largest independent publicly listed pan-Asian life insurance group – with a presence in 18 markets around the Asia-Pacific region. Copies of AIA's disclosure statements are available on request, free of charge.

AIA has a Standard and Poor's Financial Strength Rating of AA- (Very Strong), and paid out over \$57.8 million in claims in the calendar year 2016. AIA's rating is given by Standard and Poors, an approved insurance rating agency. A copy of the scale, of which this rating forms part, is available from AIA.



MISCELLANEOUS

FAQS - GLIPS (ARMY & RNZAF GROUP LIFE INSURANCE PLANS)

Q1: What is the impact of these arrangements on the current GLIP's?

- The GLIP's ceased to accept new subscribers from 1st October 2014. GLIP subscribers as at 1 October 2014 are able to continue with their arrangements.
- If you are a current GLIP member and are considering moving your cover to Tier 2 it is recommended that you contact Aon as there are differences between the Tier 2 Trauma cover and GLIP cover.

Q2: What is the difference between Tiers 2 and 3 cover and the cover available under the GLIP's? – What is the cost difference?

- GLIP's provide Life, Terminal Illness and has Trauma insurance options but the acceptance by the Insurer was subject to full health assessment.
- Tiers 2 & 3 provide options for Life, Terminal Illness, Trauma and Income Protection insurance to supplement Tier 1 cover, but have certain "automatic joining concessions" that can provide cover up to generous limits without health assessment.
- The cover under the GLIP's cease at age 65 whereas MIBP life & terminal illness cover ceases at age 80 and all other covers under MIBP cease at age 70.

Q3: How will a GLIP subscriber be able to compare the current and the MIBP arrangements?

Contact Aon on 0800 642 748 or email nz.nzdf.enquiries@aon.com

Q4: Can I keep my GLIP covers and join Tier 2 as well?

Yes, you can keep your benefits under the GLIP's and choose any of the options under Tiers 2 & 3.

Please note the insurer for the GLIP's is Sovereign the previous MIBP insurer.





MISCELLANEOUS

SOUTHERN CROSS - MEDICAL INSURANCE



Q1: What does the Southern Cross medical insurance package offer NZDF personnel?

A number of cover options including some attractive premium discounts. Contact Southern Cross for all information - **0800 438 268**. Information is available on the HR Toolkit or the NZDF MIBP website: <https://nzdf.synergyhealthltd.com/register/MIBP>.

Q2: Are members able to sign up their family members?

Yes. Contact Southern Cross for all information – 0800 438 268.

Q3: Does the Southern Cross policy cover my medical costs if I am posted or deployed overseas?

No, generally Southern Cross only covers medical expenses incurred in NZ, some policies may have an allowance for some overseas treatment not otherwise available in NZ. You should check with Southern Cross.



SCHEDULES

SCHEDULE 1 - PHYSICAL LOSS

Insured Event - Events are only covered if they occur by Accident Causes \$50,000.

Insured events		% of sum insured payable
1. Diplegia	Total and permanent loss of function of both arms or both legs due to injury of the spinal cord	100%
2. Hemiplegia	Total and permanent loss of function of one side of the body due to brain injury	100%
3. Paraplegia	Total and permanent loss of function of both legs due to injury of the spinal cord	100%
4. Quadriplegia/Tetraplegia	Total and permanent loss of function of both upper and lower limbs due to injury of the spinal cord	100%
5. Permanent total loss of use of limbs (entire hand or entire foot)	Two or more limbs	100%
	One limb	50%
6. Permanent total loss of entire sight whether aided or unaided of	Both eyes	100%
	One eye	50%
7. Permanent total loss of entire sight of one eye (whether aided or unaided) and permanent total loss of use of one limb (entire hand or entire foot)		100%
8. Permanent loss of all hearing whether aided or unaided in	Both ears	100%
	One ear	20%
9. Permanent loss of use of 4 fingers and thumb of either hand	(fingers 2 joints or more, thumb one joint or more)	40%
10. Permanent loss of use of 4 fingers of either hand	2 joints or more	25%
11. Permanent loss of use of thumb of either hand	1 joint or more	25%
12. Permanent loss of use of 1 finger of either hand	2 joints or more	5%
13. Permanent loss of use of toes of 1 foot	All	15%
14. Permanent loss of use of toes of 1 foot	great (big toe) – both joints	5%
15. 3rd degree burns (covering more than 40% of body)	(Burns means damage caused by thermal, electrical or chemical agents resulting in tissue injury to a percentage of the body surface as measured by The Rule of Nines of the Lund and Browder Body Surface Chart)	50%
16. Fractured upper or lower leg or patella – non-union	(Fracture means the cracking or breaking of a bone as result of an accidental injury but specifically Excludes any fractures that result from excessive physical activity (e.g. stress fractures) or a Degenerative condition and not from any specific injury)	10%
17. Shortening of leg by at least 5cm		7.5%

CONTINUED NEXT PAGE



SCHEDULES

SCHEDULE 1 - PHYSICAL LOSS CONTINUED

Insured events	% of sum insured payable
18. Hospitalization due to traumatic brain injury at 15th consecutive day of hospitalization Note 1: Duration of hospitalization includes dates on which member is transported from the injury site to a hospital facility, admitted to the facility, transferred between facilities, and released from the facility	50%
19. Genitourinary Losses	
Anatomical loss of the penis Anatomical loss of the penis is defined as amputation of the glans penis or any portion of the shaft of the penis above the glans penis (i.e. closer to the body) or damage to the glans penis or shaft of the penis that requires reconstructive surgery	100%
Permanent loss of use of the penis Permanent loss of use of the penis is defined as damage to the glans penis or shaft of the penis that results in complete loss of the ability to perform sexual intercourse that is reasonably certain to continue throughout the lifetime of the member	100%
Anatomical loss of one testicle Anatomical loss of the testicle(s) is defined as the amputation of, or damage to, one or both testicles that requires testicular salvage, reconstructive surgery, or both.	50%
Anatomical loss of both testicles See above – Same definition as anatomical loss of one testicle	100%
Permanent loss of use of both testicles Permanent loss of use of both testicles is defined as damage to both testicles resulting in the need for hormonal replacement therapy that is medically required and reasonably certain to continue throughout the member's lifetime	100%
Anatomical loss of the vulva, uterus, or vaginal canal Anatomical loss of the vulva, uterus, or vaginal canal is defined as the complete or partial amputation of the vulva, uterus, or vaginal canal or damage to the vulva, uterus, or vaginal canal that requires reconstructive surgery	100%
Permanent loss of use of the vulva or vaginal canal Permanent loss of use of the vulva or vaginal canal is defined as damage to the vulva or vaginal canal that results in complete loss of the ability to perform sexual intercourse that is reasonably certain to continue throughout the lifetime of the member	100%
Anatomical loss of one ovary Anatomical loss of the ovary(ies) is defined as the amputation of one or both ovaries or damage to one or both ovaries that requires ovarian salvage, reconstructive surgery, or both	50%
Anatomical loss of both ovaries See above – Same definition as anatomical loss of one ovary	100%
Permanent loss of use of both ovaries Permanent loss of use of both ovaries is defined as damage to both ovaries resulting in the need for hormonal replacement therapy that is medically required and reasonably certain to continue throughout the member's lifetime	100%
Total and permanent loss of urinary system function Total and permanent loss of urinary system function is defined as damage to the urethra, ureter(s), both kidneys, bladder, or urethral sphincter muscle(s) that requires urinary diversion and/or hemodialysis, either of which is reasonably certain to continue throughout the lifetime of the member	100%
20. Traumatic injury resulting in inability to perform at least 2 Activities of Daily Living (ADL)	
At 60th consecutive day of ADL loss	50%
At 180th consecutive day of ADL loss - an additional	50%
Current definition of ADL's; after consideration of medical and other appropriate evidence, the insurer is satisfied that the member has been absent from their usual employment due to an accident for a minimum period of 60 consecutive days from the date of disablement, and is totally and irreversibly unable, as a result of that accident, to perform without assistance at least two of the following activities for themselves: bathing and showering, dressing and undressing, eating and drinking, using a toilet, moving from place to place by walking, in a wheelchair or with a walking aid.	



SCHEDULES

SCHEDULE 2 - TERMINAL ILLNESS

Terminal Illness Advance Benefit Conditions

The Terminal Illness Advance Benefit Conditions are:

- a) Motor Neurone Disease; or
- b) Advanced Huntington's Disease; or
- c) Stage 3 or 4 Exocrine Pancreatic Cancer; or
- d) Stage 4 non-small Cell Lung Cancer; or
- e) Stage 4 Distal Oesophageal Cancer; or
- f) Stage 4 Malignant Melanoma; or
- g) Advanced Organ Failure.

In the event that you are diagnosed with one of the terminal illnesses listed above, **thirty percent (30%)** of the Life Amount Insured will be payable.

1. Advanced Huntington's disease means a definite diagnosis of advanced Huntington's disease by an appropriate specialist Medical Practitioner and for which the formal prognosis of life expectancy is less than twenty-four (24) months.

Advanced Organ Failure means end stage organ failure that is non-amenable or responsive to medical treatment including organ transplant and for which the formal prognosis of life expectancy is less than twenty-four (24) months.

Organ means:

- a) Heart; or
- b) Both Lungs; or
- c) Liver; or
- d) Both kidneys.

2. AIA New Zealand may alter this list of Terminal Illness Advance Benefit Conditions from time to time as a result of the conditions becoming curable or improvements in the medical outlook for the condition.



SCHEDULES

SCHEDULE 3 - TRAUMA - MIBP TIERS 2 & 3

Covered Trauma Conditions

- Alzheimer's disease and dementia
- Angioplasty
- Aplastic anaemia
- Cancer
- Chronic liver failure
- Chronic lung disease
- Chronic renal failure
- Heart Attack
- HIV (accidental infection)
- Intensive Care Treatment
- Major Burns
- Major transplant surgery
- Stroke
- Loss of functionality
- Loss of independent existence
- Permanent Blindness
- Permanent Loss of Speech
- Permanent Loss of Hearing
- Permanent Loss of Two or more Limbs
- Loss of one hand or one foot and sight of one eye
- Meningitis/ Meningococcal Disease
- Major cardiovascular disease
 - Aortic Surgery
 - Cardiomyopathy
 - Coronary artery Bypass surgery
 - Heart Valve Surgery
 - Out of Hospital Cardiac Arrest
 - Pulmonary Hypertension
- Major neurological disease (other than stroke)
 - Benign Brain Tumour
 - Coma
 - Encephalitis
 - Parkinson's Disease
 - Major Head Trauma
- Motor Neurone Disease
 - Multiple Sclerosis
 - Muscular Dystrophy
 - Peripheral Neuropathy
- Paralysis
 - Diplegia
 - Hemiplegia
 - Paraplegia
 - Quadriplegia
- Pneumonectomy

NB Each Trauma critical condition is specifically defined in the policy document e.g. what actually is a heart attack? For example a very minor heart attack may not reach the policy definition of a "heart attack". The same principle may apply to other Trauma critical conditions. If you have any questions or any doubt on the above contact Aon New Zealand.

A trauma benefit shall not be payable for the following conditions if you know you already have the condition prior to joining MIBP or suffer the condition for the first time within three months of commencement of this insurance under MIBP. The conditions that fall under this no claim benefit period are:

- Angioplasty
- Aortic surgery
- Cancer
- Chronic liver disease
- Chronic lung disease
- Coronary artery by-pass surgery
- Heart attack
- Heart valve surgery
- Multiple sclerosis
- Permanent blindness
- Stroke

After the no claim benefit period is up, full cover for all trauma conditions applies though a condition would be excluded without separate approval if you have previously suffered that trauma event prior to joining the plan. If you have any questions or any doubt on the above contact Aon New Zealand.



SCHEDULES

CRITICAL CONDITIONS

The Trauma Insurance Policy Definitions as at 1 July 2017 are as follows.

The following critical conditions are covered under this policy:

1. Accidental HIV Infection

Infection with the human immunodeficiency virus (HIV) acquired by accident or violence during the course of the Insured Member's normal occupation or through the medium of a blood transfusion, transfusion of blood products, organ transplant, assisted reproduction technique or other medical procedure or operation performed by a doctor or at a recognised medical facility. Sero-conversion evidence of the HIV infection must occur within six months of the accident. HIV infection transmitted by any other means, including but not limited to sexual activity or non-medical intravenous drug use, is not Accidental HIV Infection under the Policy.

Any accident giving rise to a potential claim must be reported to the Company within thirty days and be supported by a negative HIV antibody test taken within seven days after the accident. We must be given access to test independently all blood samples used, if we require. The Company retains the right to take further independent blood tests or other medically accepted HIV tests.

2. Alzheimer's Disease

Dementia resulting in permanent failure of brain function with Significant Cognitive Impairment due to no recognisable cause, confirmed by a consultant neurologist. Significant Cognitive Impairment means a permanent deterioration or loss of intellectual capacity that requires the Insured Member to be under continual care and supervision by someone else for at least four (4) hours per day. Significant Cognitive Impairment which is directly or indirectly caused by alcohol or drug abuse is excluded.

3. Angioplasty (Triple Vessel)

Undergoing Angioplasty (with or without insertion of a stent) to three or more coronary arteries within the same procedure to treat coronary artery disease. Angiographic evidence, indicating obstruction or three or more coronary arteries, is required to confirm the need for this procedure.

4. Aplastic Anaemia

Bone marrow failure that results in anaemia, neutropenia and thrombocytopenia requiring treatment.

5. Benign Brain Tumour

A non-cancerous tumour in the brain or spinal cord which is histologically described and which:

- produces neurological damage and functional impairment which we consider is likely to be permanent; or
- requires cranial surgery for its removal.

Neurological damage and functional impairment includes but is not limited to: memory loss, impaired speech, weakness of limbs and visual field defects.

The following are excluded:

- cysts, granulomas and cerebral abscesses; or
- malformations in, or of the arteries or veins of the brain; or
- haematomas; or
- tumours in the pituitary gland unless it is sufficiently large that it requires open craniotomy to remove it, or in the opinion of a specialist Medical Practitioner, there is significant and permanent neurological damage such as visual field defects.

6. Blindness

That as a result of disease or accident and certified by an ophthalmologist:

- the visual acuity on the Snellen Scale after correction by suitable lenses is less than 6/60 in both eyes; or
- the field of vision is constricted to 20 degrees or less of arc around central fixation in the better eye irrespective of corrected visual activity (equivalent to 1/100 white test object); or
- the combination of visual defects results in the same degree of vision impairment as that occurring in (a.) or (b.) above.



SCHEDULES

CRITICAL CONDITIONS CONTINUED

7. Cardiomyopathy

A condition of impaired ventricular function of variable aetiology resulting in permanent physical impairment to the degree of at least Class III (three) of the New York Heart Association classification of cardiac impairment. Cardiomyopathy that is directly related to alcohol or drug abuse is excluded.

The New York Heart Association classifications are:

- Class I no limitation of physical activity, no symptoms with ordinary physical activity.
- Class II slight limitation of physical activity, symptoms occur with ordinary physical activity.
- Class III marked limitation of physical activity and comfortable at rest, symptoms occur with less than ordinary physical activity.
- Class IV symptoms with any physical activity and may occur at rest, symptoms increased in severity with any physical activity.

8. Chronic Liver Disease / Failure

End stage liver failure, together with two of the following conditions:

- a. permanent jaundice; or
- b. ascites; or
- c. hepatic encephalopathy

Chronic Liver Disease / Failure directly related to alcohol or drug abuse is excluded.

9. Chronic Lung Disease

End stage respiratory failure requiring permanent oxygen therapy, with:

- a. FEV 1 test results consistently showing less than one (1) litre; or
- b. continuous oxygen therapy with PaO₂ 55mmHg; or
- c. as a result of Chronic Lung Disease the total and irreversible inability of the Insured Member to perform at least one (1) of the Activities of Daily Living without the assistance of another adult person as certified by an appropriate Medical Practitioner.

10. (Significant) Cognitive Impairment

A permanent deterioration or loss of intellectual capacity that requires the Insured Member to be under continual care and supervision by someone else for at least four (4) hours per day. Significant Cognitive Impairment which is directly or indirectly caused by alcohol or drug abuse is excluded.

11. Coma

A state of unconsciousness causing the incapability of sensing or responding to external stimuli or internal need, resulting in a documented Glasgow Coma Scale of 6 or less, for a continuous period of at least 72 hours. Coma as a result of alcohol or drug abuse is excluded.

12. Coronary Artery Bypass Surgery

13. Critical Cancer

The presence of one or more malignant tumours, characterised by the uncontrolled growth and spread of malignant cells and the invasion of tissue, provided the Diagnosis is unequivocal as confirmed by histopathology. This includes leukaemia, lymphomas, Hodgkin's disease, and malignant bone marrow disorders, but excludes the following tumors:

- a. malignant melanoma which are less than 1.5mm maximum thickness as determined by histological examination based on Breslow thickness unless the melanoma is graded higher than Clark Level 2 depth of invasion or has evidence of ulceration as determined by histological examination; or
- b. all other types of skin cancers unless there is evidence of metastases; or
- c. a growth histologically described as carcinoma-in-situ (including cervical dysplasia CIN-1, CIN-2 and CIN-3) or which are histologically described as pre-malignant or non-invasive unless they result in radical surgery. We will allow cover for carcinoma-in-situ of the breast where it results in the entire removal of the breast, or the Insured Member has other surgery



SCHEDULES

CRITICAL CONDITIONS CONTINUED

and adjuvant therapy (such as radiotherapy and / or chemotherapy). This procedure must be the appropriate and necessary treatment as recommended by an appropriate Medical Practitioner and undertaken specifically to arrest the spread of malignancy. Chemotherapy means the use of drugs specifically designed to kill or destroy cancer cells. Adjuvant endocrine manipulation therapy, hormonal manipulation therapy and non-endocrine adjuvant therapy are excluded; or

- d. all tumours of the prostate histologically classified as having a Gleason score less than 6, or less than TMN classification T2. We will allow cover for prostate tumour classified as TNM classification T1 (all categories) or of an equivalent classification, if the tumour is confirmed by histological examination and requires the Insured Member to undertake major interventionist therapy including radiotherapy, brachytherapy, chemotherapy, biological response modifiers or any other major treatment, or if the tumour is completely untreatable.

14. Dementia

Permanent failure of brain function with significant cognitive impairment confirmed by a consultant neurologist. Dementia directly related to alcohol or drug abuse is excluded.

15. Encephalitis

The severe inflammatory disease of the brain resulting in neurological deficit causing:

- a. at least 25% permanent 2 Whole Person Function impairment; or
- b. a total and irreversible inability to perform at least one (1) of the Activities of Daily Living without the assistance of another adult person.

16. Heart Attack

The death of a portion of the heart muscle as a result of inadequate blood supply to the relevant area. The Diagnosis must be confirmed by a cardiologist and evidenced by typical rise and / or fall of cardiac biomarker blood test (Troponin T, Troponin I or CK-MB) with at least one level above the 99th percentile of the upper reference limit, plus:

- a. acute cardiac symptoms and signs consistent with myocardial infarction; or
- b. new serial ECG changes with the development of any of the following: ST elevation or depression, T wave inversion, pathological Q waves or left bundle branch block (LBBB); or
- c. imaging evidence of new loss of viable myocardium or new regional wall motion abnormality.

If the above tests are inconclusive we will consider other appropriate and medically recognised tests.

The following are excluded:

- a. other acute coronary syndromes including but not limited to angina pectoris; or
- b. a rise in biological markers as a result of an elective percutaneous procedure for coronary artery disease.

17. Heart Valve Surgery

Surgery to replace or repair a cardiac valve or valves as a consequence of heart valve defects or abnormalities.

This includes minimally invasive surgery, keyhole and all percutaneous valve replacement or repair procedures.

18. Intensive Care Treatment

An accident or illness resulting in the Insured Member requiring continuous mechanical ventilation by means of tracheal intubation for at least three (3) consecutive days (24 hours per day) or to be admitted to the intensive care ward of a registered medical hospital for at least five (5) consecutive days (24 hours per day) at the recommendation of an appropriate specialist.

19. Kidney Failure

End stage renal failure, which presents as chronic irreversible failure of both kidneys to function, as a result of which regular renal dialysis is initiated or renal transplantation carried out.

20. Loss of Independence

The Insured Member is constantly and permanently unable to perform at least two (2) of the numbered Activities of Daily Living without the physical assistance of someone else (if the Insured Member can perform the activity on their own by using special equipment, the Company will not treat the Insured Member as unable to perform that activity).



SCHEDULES

CRITICAL CONDITIONS CONTINUED

21. Loss of Use of Limbs / Sight of One Eye

The total and irrecoverable loss by disease or trauma of any of:

- the use of both hands; or
- the use of both feet; or
- the use of one hand and one foot; or
- the use of one hand and the sight of one eye (to the extent of 6/60 or less); or
- the use of one foot and the sight of one eye (to the extent of 6/60 or less).

22. Major Burns

Full thickness burns to at least:

- 20% of the body surface area as measured by The Rule of 9 of the Lund and Browder Body Surface Chart; or
- 25% of the face, requiring surgical debridement and / or grafting; or
- 50% of the total combined area of both hands, requiring surgical debridement and / or grafting.

23. Major Head Trauma

An injury to the head causing either:

- the Insured Member to suffer at least 25% impairment of Whole Person Function that is permanent; or
- the Insured Member to be constantly and permanently unable to perform at least one (1) of the Activities of Daily Living without the physical assistance of someone else (if the Insured Member can perform the activity on their own by using special equipment, the Company will not treat the Insured Member as unable to perform that activity).

Major Head Trauma as a result of alcohol, drug or substance abuse is excluded.

24. Major Organ Transplant

The Insured Member undergoes, or has been placed on a New Zealand waiting list approved by us for, an organ transplant from a human donor to the Insured Member for one or more of the following organs:

- kidney
- heart
- lung
- liver
- pancreas
- small bowel; or
- the transplant of bone marrow.

The transplantation of all other organs or parts of any organ or of any other tissue is excluded.

25. Meningitis / Meningococcal Disease

The unequivocal Diagnosis of Meningitis and / or Meningococcal Disease including meningococcal septicaemia causing either:

- a 25% impairment of Whole Person Function that is permanent; or
- the total and irreversible inability to perform at least one (1) of the Activities of Daily Living without the assistance of another adult person

26. Motor Neurone Disease

The unequivocal Diagnosis of a progressive form of debilitating Motor Neurone Disease, as confirmed by a Medical Practitioner who is a consultant neurologist.



SCHEDULES

CRITICAL CONDITIONS CONTINUED

27. Multiple Sclerosis

A disease characterised by demyelination in the brain and spinal cord. Multiple Sclerosis must be unequivocally Diagnosed by a consultant neurologist. There must be more than one episode of well-defined neurological deficit with persisting neurological abnormalities causing:

- a. at least 25% permanent Whole Person Function impairment; or
- b. a total and irreversible inability to perform at least one (1) of the Activities of Daily Living without the assistance of another adult person; or
- c. being assigned a 7.5 or higher score on the Expanded Disability Status Scale (EDSS) by a consultant neurologist.

Neurological investigations such as lumbar puncture, MRI (Magnetic Resonance Imaging) evidence of lesions in the central nervous system, evoked visual responses, or evoked auditory responses which are required to confirm the Diagnosis.

28. Muscular Dystrophy

The unequivocal Diagnosis of Muscular Dystrophy, where the condition causes either:

- a. at least 25% impairment of Whole Person Function that is permanent; or
- b. constant and permanent inability to perform at least one (1) of the Activities of Daily Living without the physical assistance of someone else. The ability to perform the activity by using special equipment will be regarded as being able to perform that activity.

29. Open Heart Surgery

The undergoing of Open Heart Surgery for treatment of a cardiac defect, cardiac aneurysm or benign cardiac tumour. Repair via catheter surgery, minimally invasive, keyhole, or similar techniques are specifically excluded.

30. Out of Hospital Cardiac Arrest

Cardiac arrest that is not associated with any medical procedure and is documented by an electrocardiogram and occurs out of hospital and is due to cardiac asystole, or ventricular fibrillation with or without ventricular tachycardia.

31. Paralysis

The permanent and total loss of function as a result of injury to or disease of the spinal cord or brain as defined below:

- a. Quadriplegia - loss of function of both arms and legs
 - b. Paraplegia - loss of function of both legs
 - c. Diplegia - loss of function of both sides of the body
 - d. Hemiplegia - loss of function of one side of the body
- Paralysis as a result of alcohol, drug or substance abuse is excluded.

32. Parkinson's Disease

The unequivocal Diagnosis, confirmed by consultant neurologist, of idiopathic Parkinson's Disease as characterised by the clinical manifestation of one or more of the following:

- a. rigidity; or
- b. tremors; or
- c. akinesia

resulting in the degeneration of the nigrostriatal system causing either:

- a. at least 25% permanent Whole Person Function impairment; or
- b. a total and irreversible inability to perform at least one (1) of the Activities of Daily Living without the assistance of another adult person.



SCHEDULES

CRITICAL CONDITIONS CONTINUED

33. Peripheral Neuropathy

The irreversible inflammation or degradation of a peripheral nerve, Diagnosed by an appropriate specialist approved by the Company. The Insured Member must have also sustained a neurological deficit causing at least 25% permanent impairment of Whole Person Function, or inability to perform at least one (1) of the Activities of Daily Living. Peripheral Neuropathy as a result of alcohol, drug or substance abuse is excluded.

34. Permanent Loss of Hearing

The complete and irrecoverable loss of hearing, both natural and assisted, from both ears as a result of injury or illness, as certified by an appropriate medical specialist.

35. Permanent Loss of Speech

The total loss of speech both natural and assisted as a result of injury or illness for a continuous period of at least three months and the subsequent Diagnosis that loss of speech both natural and assisted will be total and permanent.

36. Pneumonectomy

The undergoing of surgery to remove an entire lung. The treatment must be considered medically necessary by a specialist Medical Practitioner.

37. Pulmonary Arterial Hypertension (Primary)

Primary idiopathic pulmonary hypertension associated with right ventricular enlargement established by cardiac catheterisation, resulting in significant irreversible physical impairment of at least Class III (three) of the New York Heart Association classification of cardiac impairment.

Pulmonary hypertension in association with Chronic Lung Disease is specifically excluded. Other forms of hypertension (involving increased blood pressure) are specifically excluded.





CRITICAL CONDITIONS CONTINUED

38. Stroke (resulting in functional loss)

The suffering of a stroke as a result of a cerebrovascular event. There must be clear evidence on a CT (Computed Tomography), MRI, or similar appropriate scan that a stroke has occurred and of either:

- a. infarction of brain tissue; or
- b. intracranial or subarachnoid haemorrhage.

The following are excluded:

- a. cerebral symptoms due to transient ischaemic attacks;
- b. migraine;
- c. cerebral injury resulting from trauma or hypoxia; and
- d. vascular disease affecting the eye, optic nerve or vestibular functions.

39. Surgery to Aorta

Surgery to correct any narrowing, dissection, or aneurysm of the thoracic or abdominal aorta.

¹Activities of Daily Living are defined as:

Type of Activity		Description
1	Washing	The ability to wash in the bath or shower (including getting into or out of the bath or shower) or wash satisfactorily by other means
2	Dressing	The ability to put on, take off, secure and unfasten all garments and, as appropriate, any braces, artificial limbs or other surgical appliances.
3	Feeding	The ability to feed oneself once food has been prepared and made available.
4	Toileting	The ability to use the lavatory or otherwise manage bowel and bladder function so as to maintain a satisfactory level of personal hygiene.
5	Mobility	The ability to move from place to place by walking, wheel chair or with assistance of a walking aid.

² **Whole Person Function** is defined as per the American Medical Association publication 'Guides to the Evaluation of Permanent Impairment', 6th edition, or an equivalent guide to impairment approved by AIA.



SCHEDULES

SCHEDULE 4 – RESERVE FORCES EMPLOYMENT OFFICIAL DUTY

EXAMPLES 1 – MEMBER OF THE RESF WORKING IN THE NORMAL EMPLOYMENT CONTEXT.

Ser.	Type	Injury Example	Covered
1	Week day night parade Leave home c.1800 for night parade between 1830– 2130 Return home c.2200.	Death or injury travelling to or from training.	Yes
2		Death or injury while at training on Defence property.	Yes
3		Death or injury while at training at designation location other than Defence property.	Yes
4		After training, stays at the Garrison Club (equivalent) and then heads home c.2 hours later.	Yes
5		After training, heads to the pub with the team and then returns home c.2 hours later.	Yes
6	Day Training Leave home c.0600 for day training between 0800-1630 Return home c.1700.	Death or injury travelling to or from training.	Yes
7		Death or Injury while at training on Defence property.	Yes
8		Death or injury while at training at designation location other than Defence property.	Yes
9		After training, stays at the Garrison Club (equivalent) and then heads home c.2 hours later.	Yes
10		After training, heads to the pub with the team and then returns home c.2 hours later.	Yes
11	Weekend Training (Paid Friday night until Sunday evening) Leave home Friday 1900 for weekend training on Saturday & Sunday. Returns home Sunday c.1900.	Death or injury travelling to or from training.	Yes
12		Death or injury while at training on Defence property.	Yes
13		Death or Injury while at training at designation location other than Defence property.	Yes
14		After training, stays at the Garrison Club (equivalent) and then heads home c.2 hours later.	Yes
15		After training, heads to the pub with the team and then returns home c.2 hours later.	Yes
16		Saturday night soldiers have stand-down for the night and go to the local shopping mall and death or injury occurs while there.	Yes
17	Weekend Training (Not paid Friday night until Sunday evening). Leave home Friday 1900 for weekend training on Saturday & Sunday. Returns home Sunday c.1900.	Death or injury travelling to or from training.	Yes
18		Death or injury while at training on Defence property.	Yes
19		Death or injury while at training at designation location other than Defence property.	Yes
20		After training, stays at the Garrison Club (equivalent) and then heads home c.2 hours later.	Yes
21		After training, heads to the pub with the team and then returns home c.2 hours later.	Yes
22		Friday night, after checking into the Unit, goes to the local pub or Garrison Club and death or injury occurs while there prior to the commencement of training.	Yes
23		Saturday night soldiers have stand-down for the night and go to the local shopping mall and death or injury occurs while there.	Yes
24	Course, AFX in NZ (Paid from leaving home, travel to location i.e. WMC and then returns home)	Death or injury travelling to or from training.	Yes
25		Death or injury while at training on Defence property.	Yes
26		Death or Injury while at training at designation location other than Defence property.	Yes
27		After training, stays at the Garrison Club (equivalent).	Yes
28		After training, heads to the pub with the team and then returns home.	Yes
29		Friday night, after checking into the Unit, goes to the local pub or Garrison Club and death or injury occurs while there.	Yes
30		Saturday night, soldiers have stand down for the night and go to the local shopping mall and death or injury occurs while there.	Yes



EXAMPLES 2 – MEMBER OF THE RESF WORKING OUTSIDE THE NORMAL EMPLOYMENT CONTEXT BUT IN AN OFFICIAL CAPACITY.

Ser.	Type	Injury Example	Covered
1	Assistance (unpaid) Requested to assist in local military activity and is unpaid.	Death or injury travelling to or from training.	Yes
2		Death or injury while at training on Defence property.	Yes
3		Death or injury while at training at designation location other than Defence property.	Yes
4		After training, stays at the Garrison Club (equivalent) and then heads home c.2 hours later.	Yes
5		After training, heads to the pub with the team and then returns home c.2 hours later.	Yes
6	Assistance (paid) Requested to assist in local military activity and is paid,	Death or injury travelling to or from training.	Yes
7		Death or Injury while at training on Defence property.	Yes
8		Death or injury while at training at designation location other than Defence property.	Yes
9		After training, stays at the Garrison Club (equivalent) and then heads home c.2 hours later.	Yes
10		After training, heads to the pub with the team and then returns home c.2 hours later.	Yes
11	Attendance (unpaid) Attends activity, i.e. ANZAC Day in uniform but not part of official party/roles.	Death or injury travelling to or from training.	Cover only applies if on authorised NZDF duties.
12		Death or injury while at training on Defence property.	
13		Death or Injury while at training at designation location other than Defence property.	
14		After training, stays at the Garrison Club (equivalent) and then heads home c.2 hours later.	
15		After training, heads to the pub with the team and then returns home c.2 hours later.	
16	Full-Time Duties equivalent Working on daily ResF pay Monday to Friday, and entering 0800-1630 on a daily basis.	Death or injury travelling to or from training.	Yes
17		Death or injury while at training on Defence property.	Yes
18		Death or injury while at training at designation location other than Defence property.	Yes
19		After work, stays at the Garrison Club (equivalent) and then heads home c.2 hours later.	Yes
20		After work, heads to the pub with the team and then returns home c.2 hours later.	Yes
21		On the way home, heads to the shopping mall where death or injury occurs.	Yes
22		Alter getting home, goes out to the shopping mall where death or Injury occurs.	No
23	International Exchange/ Training (paid) As individual and team. travel for a period of time.	Death or injury travelling to or from exchange.	Yes
24		Death or injury while at work on Defence property.	Yes
25		Death or injury while at work at designation location other than Defence property.	Yes
26		After work, stays at the Garrison Club (equivalent).	Yes
27		Has 'stand-down' and after work, heads to the local pub with the team and then returns back to barracks sometime later.	Yes
28		Has 'stand-down' and after work, heads to the shopping mall where death or Injury occurs.	Yes
29		While overseas takes 'leave' (unpaid for ResF) prior to travelling home at NZDF expense, and death or injury occurs.	On Leave - No Travelling Home - Yes

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SCHEDULES

SCHEDULE 4 – RESERVE FORCES EMPLOYMENT OFFICIAL DUTY

Ser.	Type	Injury Example	Covered
30	Civil Defence emergency Local civil emergency and soldier In uniform presents to the local CD location to assist.		Yes if on authorised NZDF duty.
31	Operational Deployment (OE16) ResF on short-term RF engagement.		Regular Force conditions apply.
32	Official visit to Operational AO (ResF pay) ResF visit AO i.e. Solomon Islands.		Yes
33	Expatriate Training ResF lives in London and completes ad hoc work for NZDF.		Yes if on authorised NZDF duties.
34	International Visit ResF holidaying in UK and pays visit to affiliate unit		Only if on authorised NZDF duties





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