

ISSUED: 1 JUNE 2017

SOME CHANGES YOU SHOULD KNOW ABOUT

On 1 July 2017, Energy Super's Death & Total and Permanent Disablement (TPD) and Extended Income Protection (IP) insurance cover policies and terms will change. The changes will affect the cost, benefits and some of the terms and conditions, so it's important you know why this is happening, and how it will affect you. There is also a change to the indirect costs for our Australian Shares investment option that you should be aware of.

OUR DEATH & TPD AND EXTENDED IP INSURANCE TERMS ARE CHANGING

Insurance costs rise every year, often by a little, sometimes by a lot. Energy Super's Death & TPD insurance premiums have been unchanged for five years. Yet during this time some funds have increased their premiums by up to 100% (in some cases even more).

WHY CHANGE?

It's important to us that our members continue to enjoy competitive insurance cover. We want what you want: affordable, sustainable insurance that brings you and your family peace of mind.

The cost of insurance for Death & TPD insurance will increase, but we've been able to limit the increase with some changes to the policy. And while an increase in costs is never ideal, we believe we've secured competitive arrangements to help protect you and your family in the event that you can no longer work or you experience terminal illness or death.

We've also taken the opportunity to update our Extended IP offering in line with our Standard IP policy. There's no price increase for Extended IP – just changes to the policy, terms and conditions including the amount payable to you.

All of the important changes are outlined in this notice. Just remember that not all of the changes may apply to you. For more information, please check the *Member Guide* and *Insurance Guide* relevant to you from 1 July 2017.

I DON'T HAVE DEATH & TPD OR EXTENDED IP COVER SO WHY AM I GETTING THIS NOTICE?

It's important that all members know what insurance options may be available to them. If you're an employee of NRG Gladstone Operating Services, these options may be available to you when you leave your employer. If you want to talk about your insurance options, call us on **1300 4 ENERGY** (1300 436 374) and ask to speak with an adviser.

I'M ON CLAIM. DO THESE CHANGES AFFECT ME?

You're covered by the current policies as at the date of your disablement, so these changes don't affect you in relation to your current claim. Any future claims you make where the date of your claimed event is on or after 1 July 2017, however, will be covered by these new policies, terms and conditions.

WHAT'S CHANGING?

DEATH & TPD INSURANCE		
CHANGE TO	CURRENT	NEW – FROM 1 JULY 2017
COST OF COVER		
Unit-based cover	<p>A sample of the current costs. For the complete tables, see the current Insurance Policy or Insurance Guide applicable to you.</p> <ul style="list-style-type: none"> • Standard Death Only cover – \$0.65 per unit per week • White Collar Death Only cover – \$0.52 per unit per week • Standard Death & TPD cover – \$0.99 per unit per week • White Collar Death & TPD cover – \$0.80 per unit per week 	<p>A sample of costs showing a premium increase of 15.5%. For the complete tables, see the Insurance Policy or the Insurance Guide applicable to you dated 1 July 2017.</p> <ul style="list-style-type: none"> • Standard Death Only cover – \$0.75 per unit per week • White Collar Death Only cover – \$0.60 per unit per week • Standard Death & TPD cover – \$1.14 per unit per week • White Collar Death & TPD cover – \$0.92 per unit per week
	<p>A sample of the current costs for CS Energy members. For the complete tables, see the current Insurance Policy or Insurance Guide applicable to you.</p> <ul style="list-style-type: none"> • Standard Death Only cover – \$0.88 per unit per week • White Collar Death Only cover – \$0.81 per unit per week • Standard Death & TPD cover – \$1.50 per unit per week • White Collar Death & TPD cover – \$1.22 per unit per week 	<p>A sample of costs for CS Energy members showing a premium increase of 15.5%. For the complete tables, see the current Insurance Policy or Insurance Guide applicable to you.</p> <ul style="list-style-type: none"> • Standard Death Only cover – \$1.02 per unit per week • White Collar Death Only cover – \$0.94 per unit per week • Standard Death & TPD cover – \$1.73 per unit per week • White Collar Death & TPD cover – \$1.41 per unit per week
Fixed cover	<p>A sample of the current costs. For the complete tables, see the current Insurance Policy or Insurance Guide applicable to you.</p> <ul style="list-style-type: none"> • Age 40 next birthday Death Only cover – \$0.57 per thousand sum insured • Age 40 next birthday Death & TPD cover – \$1.01 per thousand sum insured • Age 55 next birthday Death Only cover – \$2.08 per thousand sum insured • Age 55 next birthday Death & TPD cover – \$4.86 per thousand sum insured 	<p>A sample of costs showing a premium increase of 25%. For the complete tables, see the Insurance Policy or the Insurance Guide applicable to you dated 1 July 2017.</p> <ul style="list-style-type: none"> • Age 40 next birthday Death Only cover – \$0.71 per thousand sum insured • Age 40 next birthday Death & TPD cover – \$1.26 per thousand sum insured • Age 55 next birthday Death Only cover – \$2.60 per thousand sum insured • Age 55 next birthday Death & TPD cover – \$6.08 per thousand sum insured
DEFINITIONS		
Automatic Cover	<i>Not in policy.</i>	Means cover provided without evidence of insurability but does not include cover provided under the guaranteed future insurability benefit terms.
Date of Claim	<p>Means:</p> <ul style="list-style-type: none"> • with regard to a death claim, the date of the insured member's death; • with regard to a terminal illness claim, the date we receive medical information supporting the view that the life expectancy of the insured member is reduced to less than 12 months; • with regard to a TPD claim, the date last worked immediately prior to the insured member's disablement. 	<i>As per current, but change terminal illness life expectancy from 12 months to 24 months.</i>
Doctor / Medical Practitioner	Means a registered medical practitioner who is acceptable to us and who is not the insured member or spouse, family member, business partner, employee or employer of the insured member.	Means a registered medical practitioner who is qualified in an appropriate specialty in our opinion, and who is not the insured member or spouse, family member, business partner, employee or employer of the insured member.
Occupation	Means the employment or activity in which the insured member is employed.	<p>Means:</p> <ul style="list-style-type: none"> - If the insured member is employed, the employment in which the insured member is employed; - If the insured member is not employed, the employment the insured member engaged in immediately prior to not being employed; or - If the insured member is engaged in an Occupation which is classified as home duties, the normal physical domestic household duties undertaken by the insured member.

DEATH & TPD INSURANCE

CHANGE TO	CURRENT	NEW – FROM 1 JULY 2017
DEFINITIONS		
Public Offer Member	<i>Not in policy.</i>	Means a member who has joined the Fund other than as an employee of an Energy Super employer, including a spouse of a member employed with an Energy Super employer.
TPD	<p><i>There are multiple parts to the current TPD definitions, see the current Insurance Guide for the parts that are applicable to you. The below parts of the TPD definitions will be replaced from 1 July 2017 onwards:</i></p> <p>Part (a) Own / Similar (Defined Contribution) Where an insured member is a Defined Contribution member of the Fund (as defined by the Fund’s Trust Deed), an insured member having been absent from his or her Occupation solely through injury or Illness for a period of three consecutive months and is incapacitated to such an extent that, in our opinion, after consideration of medical and other relevant evidence, the insured member was, at the end of the period of three consecutive months absent from employment, unlikely to ever engage in or work for reward in his or her own Occupation and any similar Occupation for which he or she is reasonably suited by education, training or experience.</p> <p>Part (e) Own/Similar (Defined Benefit Members) Where an insured member is a Defined Benefit member of the Fund (as defined by the Fund’s Trust Deed), having been absent from his or her Occupation solely through injury or illness for a period of three consecutive months means disablement such that the insured member’s physical or mental disability, bodily injury, illness, disease or infirmity is of a degree that, in our opinion, after obtaining the advice of one or more medical practitioners designated by us, the insured member was, at the end of the period of three consecutive months absent from employment, unlikely ever again to be able to undertake any suitable form of remunerative work for which the insured member is reasonably qualified by education, training or experience.</p> <p>Part (f) Any Occupation An insured member having been absent from his or her Occupation solely through injury or illness for a period of six consecutive months and is incapacitated to such an extent that, in our opinion, after consideration of medical and other relevant evidence, the insured member was, at the end of the period of six consecutive months from employment, unlikely to ever engage in or work for reward in any Occupation for which he or she is reasonably suited by education, training or experience.</p>	<p><i>Previous part (a) Own / Similar (Defined Contribution), part (e) Own/ Similar (Defined Benefit Members) and part (f) Any Occupation TPD definitions no longer apply from 1 July 2017 and will be replaced by the following TPD definition:</i></p> <p>Part (a) Any Occupation The insured member:</p> <ul style="list-style-type: none"> (i) has been absent from his or her Occupation solely through injury or illness for a period of six consecutive months; and (ii) has been regularly attending a Doctor and undertaking medical treatment recommended by a Doctor with respect to that injury or illness since ceasing work in the insured member’s Occupation solely through injury or illness; and (iii) is incapacitated to such an extent that, in our opinion, after consideration of medical and other relevant evidence, the insured member was, at the end of the period of six consecutive months absent from his or her Occupation, unlikely to ever engage in or work for reward. <p>For the purpose of this definition “medical and other relevant evidence” includes, but is not limited to:</p> <ul style="list-style-type: none"> • the prospect of improvement in the insured member’s capacity after treatment and rehabilitation that could reasonably be expected to be undertaken by the insured member; and • whether reasonable retraining or reskilling would render the insured member likely to engage in or work in any Occupation on a full-time or part-time basis. <p>These changes will apply where the insured member’s Date of Claim for death, terminal illness or TPD is on or after 1 July 2017.</p> <p>Part (b) Specific Loss, part (c) Activities of Daily Living, part (d) Home Duties TPD definitions remain unchanged from 1 July 2017.</p>
EXCLUSIONS		
Suicide / Self-Inflicted Injury	<i>Not in policy.</i>	<p>For all cover or increases to cover (except Automatic Cover, automatic increases to cover, or guaranteed future insurability benefits) which commence on or after 1 July 2017, the following exclusions apply:</p> <ul style="list-style-type: none"> (i) no death benefit is payable where the death is due to suicide within the first 13 months after the commencement or reinstatement of cover; (ii) no part of an increase to a death benefit is payable where the death is due to suicide within the first 13 months after the commencement of the increased cover; and (iii) no terminal illness benefit or TPD benefit is payable where the terminal illness or TPD respectively is due to any intentionally self-inflicted injury within the first 13 months after the commencement or reinstatement of cover; and (iv) no part of an increase to a terminal illness benefit or TPD benefit is payable where the terminal illness benefit or TPD benefit is due to self-inflicted injury within the first 13 months after the commencement of the increased cover.

EXTENDED IP INSURANCE

CHANGE TO	CURRENT	NEW – FROM 1 JULY 2017
PAYMENT OF YOUR BENEFIT		
Maximum amount payable	<p>The lesser of:</p> <ul style="list-style-type: none"> – 85% of Monthly Income; and – the number of units of cover or benefit level elected by the insured member. 	<p>Members of the Fund with a 30, 60 and 90 day waiting period: The lesser of:</p> <ul style="list-style-type: none"> – 80% of Monthly Income; or – the number of units of cover elected by the insured member. <p>Members of the Fund with a 14 day waiting period: The lesser of:</p> <ul style="list-style-type: none"> – 80% of Monthly Income; or – the weekly benefit as per Appendix A (after its 5% annual indexation), elected by the insured member.
Superannuation Benefit	15%	10%
Benefit level for additional units of cover	<p>1 additional unit of cover = \$5,420.25 gross benefit per week 2 additional units of cover = \$6,820.05 gross benefit per week 3 additional units of cover = \$8,219.85 gross benefit per week 4 additional units of cover = \$9,619.65 gross benefit per week</p>	<p>1 additional unit of cover = \$5,360.25 gross benefit per week 2 additional units of cover = \$6,700.05 gross benefit per week 3 additional units of cover = \$8,039.85 gross benefit per week 4 additional units of cover = \$9,379.65 gross benefit per week</p>
Frequency	Payments made monthly in arrears.	Payments made fortnightly in arrears.
Cessation of cover	<p>All insurance cover under this policy for an insured member will cease on the earliest of the following:</p> <ul style="list-style-type: none"> • the date the insured member retires or ceases to be employed; • 60 days after the date the insured member no longer qualifies as an insured member under this policy; • 60 days after a premium is due and the premium remains unpaid; • the date cover ceases in respect of the insured member under the Fund’s weekly sickness and injury policy; • the date the insured member attains the ceasing age stated in the schedule; • the day before the insured member commences service with the armed forces of any country (not including the Australian Army Reserve); • the date of the insured member’s death; • the date the Fund receives a request from the insured member to cancel their cover under this policy; • 60 days after the date the insured member ceases to be a member of the Fund; • the date this policy terminates or is cancelled. <p>Termination of this policy, or the cessation of cover for an insured member, shall not prejudice any entitlement to make a claim for an event which happened prior to the cessation of cover.</p>	<p>Cover for an insured member under this policy ceases at 12:01 am on the day:</p> <ul style="list-style-type: none"> • when the insured member elects to no longer have this cover either in writing or by calling the policy owner where the call is recorded; or • when the insured member reaches the ceasing age stated in schedule; or • when the insured member has been unemployed for a continuous period of 6 months; or • 30 days after the date the Fund is unable to draw premiums from an insured member’s account due to insufficient funds in the account; or • whichever is the earlier of 60 days after the insured member leaves the Fund or the date insurance commences with the insured member’s new superannuation arrangements; or • when all cover for every insured member under this policy ceases, subject to Financial Services Council Guidance Note No. 11 – Group Insurance Takeover Terms; or • if premiums are unpaid, 30 days after the premium due date; or • 24 months after the commencement of unpaid leave; or • when the insured member dies.
Limitation of benefits	<p>The Total Disability and Partial Disability benefits payable under this policy will be reduced by any other income which the insured member may be entitled to from other sources, whether that income was actually received or not. Income from other sources includes:</p> <ul style="list-style-type: none"> • any other income derived as a result of disability from employment under any other insurance policy; and • any benefit under any workers’ compensation or other similar compensation under state or federal legislation, but not including payments in respect of medical treatment, rehabilitation and permanent impairment or permanent loss of use of a body part; and • monies paid in respect of any claim for past or future economic loss arising from any claim by the insured member for personal injury. 	<p>The amount of any benefit payable for Total Disability or Partial Disability will be reduced by the amount of any:</p> <ul style="list-style-type: none"> • sick leave or other employer paid benefit; • Statutory Benefit; • damages for personal injury resulting from the legal liability of any other party but excluding punitive damages; or • benefit under any other policy of insurance, excluding group life policies that arises from the disability.

EXTENDED IP INSURANCE

CHANGE TO	CURRENT	NEW – FROM 1 JULY 2017
PAYMENT OF YOUR BENEFIT		
<p>Limitation of benefits</p>	<p>Any income from other sources which is in the form of a lump sum or is commuted for a lump sum, will be treated as a monthly equivalent of one-sixtieth of the lump sum over a period of 60 months, to calculate the reduction in monthly benefits under this policy.</p> <p>Income from other sources does not include:</p> <ul style="list-style-type: none"> • income earned from investments; and • any lump sum total and permanent disablement benefit. <p>The reduction will be sufficient to ensure that the amount we pay in Total Disability or Partial Disability benefits, together with the aggregate of the other payments or entitlements, will not exceed the insured member’s monthly benefit entitlement.</p> <p>When an insured member’s entitlement to workers’ compensation payments is in dispute, we will pay the full amount of the benefits due under this policy on a conditional basis until the dispute is resolved. If the insured member is declared entitled to workers’ compensation payments it is a condition of this policy that you will repay to us that part of any benefit payment representing the proceeds received by way of compensation which would otherwise not have been paid, if not for the conditional payment. We may at our discretion obtain payment of this amount by offsetting it against any amounts that may subsequently become due to you.</p>	<p>Where a benefit of the kind referred to in the previous paragraph (“offset benefit”) is received in the form of a lump sum, we may determine on a reasonable basis how much of that lump sum represents compensation for loss of income and the period of disability it relates to and then convert that amount to the equivalent weekly amount in order to determine how much of the benefit we pay under this policy is reduced or how much we are entitled to recover.</p> <p>If we make benefit payments under this policy in relation to an insured member, and the insured member is entitled to an offset benefit, we may recalculate and adjust the amount of the benefit payable in relation to the insured member correspondingly.</p> <p>If the insured member receives an offset benefit, after a benefit in relation to the same period has been paid by us under this policy, then we are entitled to a full repayment of the difference between what we paid and the recalculated benefit amount as a debt.</p> <p>The difference between the benefit paid and the recalculated benefit must be repaid to us if we request repayment. If we have not been fully repaid, we may reduce any further benefits in respect of the insured member until the unpaid amount has been set off.</p> <p>You must, as soon as you practically can, inform us if the insured member has received or is entitled to a benefit that would reduce the amount of a benefit we would otherwise pay in relation to them under this policy.</p> <p>If a Medical Practitioner deems the insured member to be capable of returning to work on modified work hours or duties and suitable duties within these limitations are either:</p> <ul style="list-style-type: none"> • made available by the employer and the insured member declines to perform the duties; or • not made available by the insured member’s employer <p>then the benefit payable under the policy will be reduced to 25% of the benefit that would have been paid if the insured member were totally disabled or the benefit payable under any other applicable condition of this policy, whatever is the lesser.</p> <p>Where an overpayment is identified that arises from, or is contributed to by, the insured member providing incorrect information or failing to provide information:</p> <ol style="list-style-type: none"> a) We will provide you with written notice that we wish to seek recovery of the overpayment and evidence as reasonably required by you that the overpayment arose from, or was contributed to, by the insured member providing incorrect information or failing to provide information; and b) subject to us proving to your reasonable satisfaction that the overpayment arose from, or was contributed to, by the insured member providing incorrect information or failing to provide information, either: <ol style="list-style-type: none"> (i) you may at your discretion either: <ol style="list-style-type: none"> (a) appoint us as your agent to recover at our discretion the amount of the overpayment from the insured member (irrespective of when the overpayment arose) and we may retain any such amounts recovered; or (b) pay us the amount of the overpayment; or (ii) we may, after consulting with you, instead recover the amount of the overpayment by offsetting it against any amounts that may subsequently become due in respect of the particular insured member under this policy.

EXTENDED IP INSURANCE

CHANGE TO	CURRENT	NEW – FROM 1 JULY 2017
DEFINITIONS		
Actual Monthly Income	<i>Not in policy.</i>	<p>For members who are not self-employed: means the Monthly Income earned through the personal exertion of the insured member from his or her Occupation before personal deductions and income tax, and including overtime and all allowances actually paid to the insured member in that month.</p> <p>For self-employed members: means the monthly gross income generated by the business or practice due to the insured member's personal exertion or activities less their share of business expenses necessarily incurred in that month.</p>
Base Salary	<i>Not in policy.</i>	Means the ordinary regular salary paid by the employer, earned through the personal exertion of the insured member. This excludes any additional allowances or overtime for which the insured member may be eligible.
Doctor / Medical Practitioner	Means a registered Medical Practitioner who is acceptable to us and who is not the insured member or spouse, family member, business partner, employee or employer of an insured member.	Means a Medical Practitioner legally qualified and registered to practice medicine in Australia and is a person other than the insured member, their relatives, business partners, shareholders or employees. Where the Medical Practitioner is outside Australia, the Medical Practitioner must hold qualifications which would be recognised by the Australian Medical Association as being of consistent standard to practising medicine in Australia. Note: Chiropractors, physiotherapy and alternative therapy providers are not regarded as Medical Practitioners.
Monthly Income	<p>For members who are not self-employed: Means the insured member is an employee, who does not directly or indirectly own part or all of a business or practice – one-twelfth of the insured member's average weekly income before personal deductions and income tax, and including all overtime and all allowances actually paid to the insured member which was earned from personal exertion from their usual employment during the 52 week period immediately preceding the last pay period prior to the insured member's injury or "illness" resulting in payment of benefits covered by the policy. Note only overtime and all allowances actually paid in respect of the insured member will be averaged over the previous 3 years.</p> <p>For self-employed members: The insured member is self-employed, that is directly or indirectly owns part or all of a business or practice – one-twelfth of the insured member's gross income earned less all business expenses incurred in earning that income. In the event of a claim the insured member will be required to supply their income tax assessment relating to previous years.</p>	<p>For members who are not Defined Benefit or not self-employed: Means the monthly amount earned through the personal exertion of the insured member from his or her usual Occupation and calculated by either:</p> <ul style="list-style-type: none"> a) 1/12th of the Base Salary last agreed between the insured member and their employer at the time of Total Disability; or b) the average weekly income before personal deductions and income tax, and including overtime and all allowances actually paid to the insured member during the immediate 12 months prior to the injury or illness resulting in payment of benefits covered by this policy. <p>Clause a) will be used to calculate Monthly Income unless the insured member elects clause (b) above and provides the necessary proof of earnings.</p> <p>For Defined Benefit members: Means 1/12th of the superannuation salary as defined in the Trust Deed regulating the operation of the Fund.</p> <p>For self-employed members: Where the insured member is self-employed, a working director or a partner in a partnership, Monthly Income means 1/12th of the gross income earned generated by the business or practice due to the insured member's personal exertion or activities less their share of business expenses necessarily incurred as shown in the insured member's most recent individual, partnership, company or trust tax return/assessment notice.</p>

EXTENDED IP INSURANCE

CHANGE TO	CURRENT	NEW – FROM 1 JULY 2017
DEFINITIONS		
Partial Disability / Partially Disabled	<p>Means that immediately following a period of Total Disability where the insured member has been in receipt of weekly sickness or injury benefits from the Fund and as a direct result of injury or illness which caused the Total Disability, the insured member has returned to work in his or her own or another Occupation and is:</p> <ul style="list-style-type: none"> • continuously unable to perform the important duties of his or her own Occupation; and • earning less than his or her Monthly Income prior to Total Disability; and • under the continuous care and following the advice for treatment of a Doctor in relation to that illness or injury. 	<p>Means when, after a period of Total Disability, the insured member returns to work but as a result of the injury or illness for which the insured member was Totally Disabled, the insured member is:</p> <ul style="list-style-type: none"> • unable to perform all the duties of their usual Occupation; or • restricted in the hours for which they are capable of performing their usual Occupation; or • earning less than their income prior to Total Disability.
Public Offer Member	<i>Not in policy.</i>	Means a member who has joined the Fund other than as an employee of an Energy Super employer, including a spouse of a member employed with an Energy Super employer.
Statutory Benefit	<i>Not in policy.</i>	<p>Means any amount paid or payable in respect of the insured member as a result of an entitlement:</p> <p>a) to a benefit under workers' compensation legislation or a policy of insurance entered into in connection with the requirements of such legislation; or</p> <p>b) under any statutory motor accident compensation scheme.</p>
Total Disability / Totally Disabled	<p>Means that solely as a result of injury or illness, the insured member is continuously:</p> <ul style="list-style-type: none"> • unable to perform at least one of the important duties of his or her own Occupation; • under the care of and following the regular and continuous advice for treatment from a Doctor in relation to that Illness or injury; and • not engaged in any Occupation, paid or unpaid. 	<p>Means that, as a result of injury or Illness, the insured member is completely and continuously prevented from engaging in his or her usual Occupation and is under the regular care of and acting in accordance with the instructions or professional advice of a Medical Practitioner. The insured member must not be engaged in any Occupation, paid or unpaid.</p>
White Collar/ Professional	<p>Means a member who is engaged in an Occupation with minimal manual labour and who has no exposure to unusual occupational hazards and spends at least 90% of their working hours in an office environment. A member with technical skills or expertise who may be required to use their skills and judgement in a variety of tasks outside of the office environment, and who has some exposure to unusual occupational hazards, may still be considered White Collar/Professional.</p>	<p>Means an insured member who is engaged in an Occupation with minimal manual duties or very light skilled duties and who has no exposure to unusual occupational hazards and spends at least 90% of their working hours in an office environment. An insured member with technical skills or expertise who may be required to use their skills and judgement in a variety of tasks outside of the office environment, and who has some exposure to unusual occupational hazards, may still be considered White Collar/Professional.</p>
EXCLUSIONS		
	<p>Benefits are not payable under this policy in respect of an Insured Member for disability or loss arising directly or indirectly from:</p> <ul style="list-style-type: none"> • any intentional self-inflicted injury or attempted suicide, whether the insured member was sane or insane; • normal and uncomplicated pregnancy, childbirth or miscarriage; • war or warlike operations; • service in the armed forces of any country (not including the Australian Army Reserve); or • any other event or matter referred to in the schedule or otherwise by way of a special condition noted in the schedule. <p>Benefits are not payable under this policy if, immediately on commencement of the waiting period, the insured member is not in receipt of a weekly sickness or injury benefit from the Fund.</p>	<p>Benefits are not payable under this policy if the disability giving rise to a claim is directly caused by or resulting from:</p> <ol style="list-style-type: none"> 1. Any consequence of war, invasion or civil war. 2. Intentional self-inflicted injury or Illness, including any attempt at suicide. 3. Normal and uncomplicated pregnancy or childbirth. 4. A criminal act for which the insured member has been charged and found guilty. No benefits will be payable if charged until such time as the insured member is found to be not guilty or charges are dismissed. 5. Any disablement which immediately results from the consumption of illicit substances prohibited by Australian Federal Law. 6. Service in the armed forces of any country (not including the Australian Defence Force Reserve).

DO YOU NEED TO REVIEW YOUR INSURANCE?

Change can force you to think about things in a new light. When was the last time you reviewed your insurance? Has your personal situation changed? What about your level of cover – do you have too much? Too little?

Visit our website for more information from 1 July 2017 or call us on **1300 4 ENERGY** (1300 436 374). Our advisers can give personal advice about your Energy Super insurance cover over the phone at no additional cost to you.

WHAT YOU NEED TO KNOW ABOUT OUR AUSTRALIAN SHARES INVESTMENT OPTION

Each of our investment options includes what's called an Indirect Cost Ratio (ICR). This ICR includes percentage-based administration costs and expenses, and investment management costs. These indirect costs are deducted from the investment earnings – not from your account directly – which is why they're called "indirect" costs.

The ICRs for each investment option are detailed in our Fees and Other Costs Guide, Annual Report and your annual Member Statement. We update these documents regularly to reflect any changes to the ICRs. In addition, Energy Super has taken the decision that where any of these change more than 10%, we'll advise our members directly.

To that end, we advise that the ICR for our Australian Shares investment option (both Pension and Accumulation) has increased by more than 10%.

AUSTRALIAN SHARES ICR	ADMINISTRATION COSTS	BASE (INCLUSIVE OF UNDERLYING FEES)	PERFORMANCE (ESTIMATE)	TOTAL INVESTMENT	TOTAL ICRS (ESTIMATE)
2016/17	0.22%	0.30%	0.12%	0.42%	0.64%
2017/18	0.22%	0.33%	0.24%	0.57%	0.79%

The ICR for 2017/18 is an estimate for the 2017/18 financial year based on the tactical asset allocation of each investment option as at 1 May 2017. It includes estimated performance costs (where relevant) which are based on an assumption about the extent to which managers are expected to outperform their benchmark.

In fact, this is precisely the reason the performance fee has increased for the Australian Shares option, as the investment manager has performed strongly relative to the market and to the benchmark. Good news for members who have invested in this option.

Our product disclosure statements, guides and website will be updated on 1 July 2017.

WE'RE HERE TO HELP

W energysuper.com.au

T **1300 4 ENERGY (1300 436 374)**

8.30am and 5.00pm Monday to Friday

E info@energysuper.com.au

Please note: The policy wording in this notice is not final and some minor differences may exist between this notice and the final Insurance Policy. If there are any inconsistencies between the terms of the Energy Super Trust Deed or the Insurance Policy and this notice, the terms of the Trust Deed and Insurance Policy prevail. To obtain a copy of the Trust Deed or Insurance Policy, email us at info@energysuper.com.au or call 1300 4 ENERGY (1300 436 374) from 1 July 2017.

Electricity Supply Industry Superannuation (Qld) Ltd (ABN 30 069 634 439) (AFSL 336567) is the Trustee and issuer of Energy Super (ABN 33 761 363 685). A Product Disclosure Statement (PDS) is available from energysuper.com.au or by calling 1300 4 ENERGY (1300 436 374). Advice contained in this document is general in nature and not specific to your particular circumstances. Before making an investment decision or acting on this advice you should consider your financial situation, the PDS and whether Energy Super is right for you. If you need help, talk to one of our financial advisers.

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