

Group Salary Continuance (GSC) Insurance

What is GSC Insurance?

GSC insurance (also known as Income Protection) is cover that can provide you an income if you are unable to work due to illness or injury. For Employer Sponsored and Personal Division Members GSC cover is available where you apply for this cover and it's been approved by the insurer.

Why is it important to lodge a GSC claim early in the process?

Lodging a claim early allows the insurer to start to consider services that will help you get back to full health as soon as you are able.

What options do I have to lodge a claim?

When you call legalsuper to lodge your claim, you will be given the choice of either lodging online or being provided with physical forms which will need to be completed and returned.

The online option is typically a faster process and the insurer will be better placed to assist and help you to gather your information.

When can I lodge a claim?

You are encouraged to lodge a claim as soon as it becomes apparent that you are suffering a medical condition that will mean you are unable to work for a period longer than the waiting period that applies to you. With GSC cover the waiting period can be 30, 60 or 90 days. Your waiting period appears on your Annual statement.

The earlier you lodge a claim, the sooner the insurer will be able to complete an assessment and determine what additional help could be made available.

How long does the assessment of a GSC claim take?

The insurer aims to make a decision within two months to meet obligations under the Life Insurance Code of Practice however, it may take longer if there are circumstances beyond the insurer's control. If this applies to your claim the insurer will let you know.

When will benefits commence?

GSC benefits start to accrue once you have met the waiting period and the insurer has approved your claim. Benefits are paid monthly in arrears but no payment is made for the waiting period.

What can I expect?

The insurer will appoint a case manager who will deal directly with you in respect of your claim. They will also keep you updated on progress as the assessment is undertaken.

During the assessment of your claim the insurer may reach out to your doctors to better understand your condition. It might also require you to attend independent doctor/s if this is considered necessary and also request assessments by other professionals with relevant occupational experience.

The insurer may also request and obtain medical files from your treating doctor/s and could request files from a workers' compensation or another insurer that you could have lodged a claim with.

Where the insurer assesses and approves your claim, you will be advised accordingly.

Will any offsets apply to the benefits I receive and why is this the case?

The purpose of GSC cover is to provide members with income support while they are unable to work due to illness or injury. Benefits are structured and priced so that members are not placed into a financial position where they could be better off being ill rather than being at work as this wouldn't support the purpose of GSC.

Your benefits may be reduced for other benefits you might receive from another source such as, other income protection policies, workers' compensation, compulsory third party (CTP) or from Government or other social security schemes in respect of loss of income.

Sick leave, annual leave and long service leave entitlements, inheritances, tax refunds, investment income, and other such payments of the same kind or nature received by you will not reduce your benefits. Benefits are also not reduced for Total and Permanent Disability benefits, trauma benefits, terminal illness benefits and other superannuation benefits.

How long are benefits paid for?

Benefits are paid while you are unable to work for the period up to the benefit period of the cover you hold. For example, if you have two-year cover, you can be paid a benefit for up to two years. Benefits cannot be paid beyond the expiry age of your cover (typically age 65 unless you have chosen benefits to age 60). If you meet the requirement for a partial benefit this can be paid where you undergo a graduated return to work, further supporting you to get well. You can check your most recent annual statement to understand if you hold GSC and what waiting period and benefit period might apply if you do.

What about my GSC insurance premiums while I'm on claim?

While you are receiving a benefit from the insurer for Total Disability or Partial Disability your GSC insurance premiums will be waived.

Will a superannuation contribution benefit be paid by the Insurer?

If the amount of your cover exceeds 75% of your pre-disability income, an amount may be payable to your legalsuper superannuation account. The maximum rate applicable for events from 1 November 2025 is 12%. A lower rate applies for claims where the event occurred prior to that date.

What happens if the insurer believes there might be evidence that doesn't support your claim?

The insurer will conduct a process known as procedural fairness. This means the insurer will write to you and provide you details of the evidence being relied on to make a decision about your claim.

If this happens, you can review the material provided and provide the insurer with a submission and/or further evidence to ensure it has an adequate understanding of your medical conditions and how these are impacting on your ability to return to work.

What if my claim isn't approved by the insurer?

If a claim is not approved by the insurer, it will be forwarded through to the legalsuper Trustee to consider if the insurer's decision is in line with the terms of the policy and is fair and reasonable. You will be advised once a decision has been made.

What are your options if the Insurer declines your GSC claim?

You can provide further information and request a review of the claim decision at any time. You also have the option to lodge a complaint and have the matter referred to the Australian Financial Complaints Authority (AFCA) for a review of your claim. AFCA enables a low-cost avenue for the review of a complaint. You should be aware that in some circumstances time limits can apply to lodging an AFCA complaint.

AFCA contact details
phone: 1800 931 678
email: info@afca.org.au

postal address:
Australian Financial Complaints Authority Limited
GPO Box 3
Melbourne VIC 3001

Need more information?



For further information, please refer to the *Employer Sponsored Super & Personal Super Additional Information* guide available at legalsuper.com.au

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We're here to help

If you have any questions, please don't hesitate to call us on **1800 060 312** between 8am and 8pm AEST/AEDT Monday to Friday or email us at mail@legalsuper.com.au

 legalsuper.com.au

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