



Reporting Standard SRS 251.0

Insurance

Objective of this reporting standard

This Reporting Standard sets out requirements for the provision of information to APRA relating to acquired insurance arrangements within a registrable superannuation entity or defined benefit registrable superannuation entity.

It includes *Reporting Form SRF 251.0 Insurance arrangements*, *Reporting Form SRF 251.1 Insurance coverage*, *Reporting Form SRF 251.2 Insurance payments*, *Reporting Form SRF 251.3 Insurance premiums* and associated specific instructions.

Authority

1. This Reporting Standard is made under section 13 of the *Financial Sector (Collection of Data) Act 2001*.

Purpose

2. Information collected under this Reporting Standard is used by APRA for the purposes of prudential supervision and publication. It may also be used by the Australian Securities and Investments Commission.

Application

3. This Reporting Standard applies to each registrable superannuation entity (RSE) licensee (RSE licensee) in respect of each RSE and defined benefit RSE within its business operations¹.

¹ For the purposes of this Reporting Standard, an RSE licensee's 'business operations' includes all activities it conducts as an RSE licensee (including the activities of each RSE of which it is the licensee), and all other activities of the RSE licensee to the extent that they are relevant to, or may impact on, its activities as an RSE licensee. For the avoidance of doubt, if the RSE licensee is trustee of more than one RSE or defined benefit

Commencement

4. This Reporting Standard commences on the day it is registered on the Federal Register of Legislation.

Reporting period

5. Reporting periods under this Reporting Standard are each year ending 30 June.

Historical information required²

6. RSE licensees must provide information required by this Reporting Standard under SRF 251.2 for each reporting period ending on or after 30 June 2016 but before 30 June 2021.
7. An RSE licensee to which this Reporting Standard applies must provide the information required by paragraph 6, by 30 September 2021.

Information required

8. RSE licensees must provide information required by this Reporting Standard under SRF 251.0, SRF 251.1, SRF 251.2 and SRF 251.3 for reporting periods ending on or after 30 June 2021.
9. An RSE licensee to which this Reporting Standard applies must provide the information required by paragraph 8, within 3 months after the end of the relevant reporting period.

Quarterly attestation required

10. An RSE licensee must provide APRA an attestation that the information it last provided APRA under this Reporting Standard is accurate every calendar quarter (i.e. the periods ending 30 September, 31 December, 31 March and 30 June each year).
11. An RSE licensee to which this Reporting Standard applies must provide information required under paragraph 10, within 28 days after the end of each calendar quarter.

Ad-hoc information required

12. Where an RSE licensee is required to disclose information relating to insurance to members and this results in a change to information reported on SRF 251.3 under this Reporting Standard, the RSE licensee must provide information on SRF 251.3 required by this Reporting Standard within 28 calendar days after the change.

Notices

RSE, the RSE licensee must separately provide the information required by this Reporting Standard for each RSE or defined benefit RSE within its business operations. An RSE licensee that does not have any RSEs or defined benefit RSEs within its business operations is not required to provide information under this Reporting Standard.

² This is a one off reporting requirement.

13. If, having regard to the particular circumstances of an RSE and defined benefit RSE, APRA considers it necessary or desirable to obtain information more or less frequently than as provided by paragraph 5, APRA may, by notice in writing, change the reporting periods for the particular RSE or defined benefit RSE.
14. Where APRA has changed the reporting periods under paragraph 13, the RSE licensee must provide the relevant information within the time specified by the notice in writing.
15. APRA may grant, in writing, an RSE licensee an extension of a due date with respect to one or more RSEs or defined benefit RSEs within its business operations, in which case the new due date for the provision of the information will be the due date on the specified notice of extension.

Note: For the avoidance of doubt, if the due date falls on a day other than a usual business day, an RSE licensee is nonetheless required to submit the information required no later than the due date.

Form and method of submission

16. The information required by this Reporting Standard must be given to APRA in electronic format using an electronic method available on APRA's website or by a method notified by APRA prior to submission.

Quality control

17. The information provided by an RSE licensee under this Reporting Standard must be the product of systems, procedures and internal controls that have been reviewed and tested by the RSE auditor of the RSE, or defined benefit RSE to which the information relates³. This will require the RSE auditor to review and test the RSE licensee's systems, procedures and internal controls designed to enable the RSE licensee to report reliable information to APRA. This review and testing must be done on:
 - (a) an annual basis or more frequently if necessary to enable the RSE auditor to form an opinion on the reliability and accuracy of information; and
 - (b) at least a limited assurance engagement consistent with professional standards and guidance notes issued by the Auditing and Assurance Standards Board as may be amended from time to time, to the extent that they are not inconsistent with the requirements of *Prudential Standard SPS 310 Audit and Related Matters* (SPS 310).
18. All information provided by an RSE licensee under this Reporting Standard must be subject to systems, processes and controls developed by the RSE licensee for the internal review and authorisation of that information. It is the responsibility of the Board and senior management of the RSE licensee to ensure that an appropriate set of policies, procedures and controls for the authorisation of information submitted to APRA is in place.

³ Refer also to *Prudential Standard SPS 310 Audit and Related Matters* (SPS 310).

Authorisation

19. When an officer or agent of an RSE licensee provides the information required by this Reporting Standard using an electronic format, the officer or agent must digitally sign the relevant information using a digital certificate acceptable to APRA.
20. If the information required by this Reporting Standard is provided by an agent who submits the information on the RSE licensee's behalf, the RSE licensee must:
 - (a) obtain from the agent a copy of the completed form with the information provided to APRA; and
 - (b) retain the completed copy.
21. An officer or agent of an RSE licensee who submits the information under this Reporting Standard for, or on behalf of, the RSE licensee must be authorised by either:
 - (a) the Chief Executive Officer of the RSE licensee; or
 - (b) the Chief Financial Officer of the RSE licensee.

Minor alterations to forms and instructions

22. APRA may make minor variations to:
 - (a) a form that is part of this Reporting Standard, and the instructions to such a form, to correct technical, programming or logical errors, inconsistencies or anomalies; or
 - (b) the instructions to a form, to clarify their application to the form, without changing any substantive requirement in the form or instructions.
23. If APRA makes such a variation, it must notify each RSE licensee that is required to report under this Reporting Standard.

Interpretation

24. In this Reporting Standard:

APRA means the Australian Prudential Regulation Authority established under the *Australian Prudential Regulation Authority Act 1998*.

Chief Executive Officer means the chief executive officer of the RSE licensee, by whatever name called, and whether or not he or she is a member of the Board of the RSE licensee⁴.

Chief Financial Officer means the chief financial officer of the RSE licensee, by whatever name called.

⁴ Refer to *Prudential Standard SPS 510 Governance*.

defined benefit RSE has the meaning of defined benefit fund in subsection 10(1) of the SIS Act.

due date means the relevant due date under paragraph 7, 9, 11, 12 or, if applicable, paragraph 15 of this Reporting Standard.

reporting period means a period mentioned in paragraph 5 or, if applicable, paragraph 13 of this Reporting Standard.

RSE means a registrable superannuation entity as defined in subsection 10(1) of the SIS Act that is not a defined benefit RSE, pooled superannuation trust, ERF, small APRA fund or single member approved deposit fund⁵.

RSE auditor means an auditor appointed by the RSE licensee to perform functions under this Reporting Standard.

RSE licensee has the meaning given in subsection 10(1) of the SIS Act.

SIS Act means *Superannuation Industry (Supervision) Act 1993*.

25. In this Reporting Standard, unless the contrary intention appears, a reference to an Act, Regulation, Prudential Standard, Reporting Standard, Australian Accounting Standard or Auditing Standard is a reference to the instrument as in force or existing from time to time.
26. Where this Reporting Standard provides for APRA to exercise a power or discretion, this power or discretion is to be exercised in writing.

⁵ For the purposes of this Reporting Standard, ‘pooled superannuation trust’ has the meaning given in subsection 10(1) of the SIS Act, ‘small APRA fund’ means a superannuation entity that is a regulated superannuation fund, within the meaning of the SIS Act, which has fewer than five members and ‘single member approved deposit fund’ means a superannuation entity that is an approved deposit fund, within the meaning of the SIS Act, which has only one member.

Reporting Form SRF 251.0

Insurance arrangements

Instruction Guide

This instruction guide is designed to assist in the completion of *Reporting Form SRF 251.0 Insurance arrangements* (SRF 251.0). This form collects information on the acquired insurance arrangements of a registrable superannuation entity (RSE) and defined benefit RSE.

General directions and notes

Reporting level

SRF 251.0 must be completed for each registrable superannuation entity (RSE) and defined benefit RSE.

Reporting tables

Tables described in this reporting form list each of the data fields required to be reported. The data fields are listed sequentially in the column order that they will appear in the reported data set. Constraints on the data that can be reported for each field have also been provided.

The Unique identifier column indicates which field or fields form the primary key of the table. Where a field has ‘Y’ in the Unique identifier column, this denotes that this field forms part of the primary key for the table. A blank cell in the Unique identifier column means that the field does not form part of the primary key for the table. Any specific combination of values in the fields that form the primary key of a table must not appear on more than one row in that table when reported.

Reporting basis and units of measurement

Amounts in SRF 251.0 are to be reported as whole numbers or whole dollars.

Items on SRF 251.0 must be reported as at the end of the reporting period.

Definitions

Terms highlighted in ***bold italics*** indicate that the definition is provided in *Reporting Standard SRS 101.0 Definitions for Superannuation Data Collections* (SRS 101.0).

Specific instructions

Table 1: Insurance arrangements

Report in table 1 all ***insurance policies***, currently or previously held by the ***RSE licensee*** which:

- 1) Were ***in force*** at any time during the reporting period or in the 5 years prior to the start of the reporting period; or
- 2) For which one or more of the following activities occurred during the reporting period:
 - a) Premiums were paid to the insurer; or
 - b) Claims were received, processed or paid.

Report each such ***group insurance policy*** as a separate line with a unique ***insurance cluster identifier***.

Aggregate into ***insurance clusters***, by insurer, all such individual insurance policies held by the RSE licensee. Report all ***insurance clusters*** that cover or covered five per cent or more of the total number of ***member accounts*** with ***individual insurance policies***.

Where the ***insurance policy*** has previously been reported, the same ***insurance cluster identifier*** should be used as when the ***insurance policy*** was last reported.

The insurance clusters reported will cover all ***group insurance policies***, but may not cover all ***individual insurance policies*** held by the RSE licensee in respect of members of the RSE or defined benefit RSE.

Column	Field name	Unique identifier	Applicable to	Valid values	Description
1	Insurance Cluster Identifier	Y	All filers	No more than 20 alpha-numeric characters (with no special characters).	Report the <i>insurance cluster identifier</i> .
2	Life Insurance Company Name Text		All filers	Free text	Report the <i>life insurance company name</i> .
3	Life Insurance Company Australian Business		All filers	11 digit valid ABN	Report the <i>life insurance company ABN</i> . Where the relevant organisation

Column	Field name	Unique identifier	Applicable to	Valid values	Description
	Number				does not have an <i>ABN</i> , leave the <i>life insurance company ABN</i> field blank e.g. where the organisation is domiciled in an overseas jurisdiction.
4	Associate Indicator		All filers	<ul style="list-style-type: none"> • Yes • No 	Report whether the <i>life insurance company</i> is an <i>associate</i> of the RSE licensee.
5	Insurance Cluster Policy Reporting Level Type		All filers	<ul style="list-style-type: none"> • <i>Single Policy</i> • <i>Aggregated Policies</i> 	Report the <i>insurance reporting level</i> of the <i>insurance cluster</i> .
6	Insurance Cluster Policy Type		All filers	<ul style="list-style-type: none"> • <i>Group Insurance Policy</i> • <i>Individual Insurance Policy</i> 	Report the <i>insurance policy type</i> of the <i>insurance cluster</i> .
7	Insurance Cluster Policy Count		All filers	Whole numbers	Report the number of <i>insurance policies</i> in the <i>insurance cluster</i> .
8	Insurance Policy Identifier		All filers	Free text	Report the <i>policy number</i> . Leave this field blank for <i>insurance clusters</i> with more than one <i>insurance policy</i> .
9	Insurance Cluster Open To New Members Indicator		All filers	<ul style="list-style-type: none"> • Yes • No 	Report whether the <i>insurance cluster</i> is open to new members.
10	Insurance Cluster Start Date		All filers	Date values (dd/mm/yyyy)	Report the <i>insurance cluster start date</i> .
11	Insurance Cluster End Date		All filers	Date values (dd/mm/yyyy)	Report the <i>insurance cluster end date</i> .

Reporting Form SRF 251.1

Insurance coverage

Instruction Guide

This instruction guide is designed to assist in the completion of *Reporting Form SRF 251.1 Insurance coverage* (SRF 251.1). This form collects information on the linkages between insurance policies and superannuation products, as well as the decisions that members are making in relation to their insurance cover within superannuation.

General directions and notes

Reporting level

SRF 251.1 must be completed for each *group insurance policy* within the RSE or defined benefit RSE which has been in force at any time during the reporting period.

Reporting tables

Tables described in this reporting form list each of the data fields required to be reported. The data fields are listed sequentially in the column order that they will appear in the reported data set. Constraints on the data that can be reported for each field have also been provided.

The Unique identifier column indicates which field or fields form the primary key of the table. Where a field has ‘Y’ in the Unique identifier column, this denotes that this field forms part of the primary key for the table. A blank cell in the Unique identifier column means that the field does not form part of the primary key for the table. Any specific combination of values in the fields that form the primary key of a table must not appear on more than one row in that table when reported.

Reporting basis and unit of measurement

Amounts in SRF 251.1 are to be reported as whole numbers or whole dollars.

Items on SRF 251.1 must be reported as at the end of the reporting period, as at the start of the reporting period or with respect to transactions that occurred during the reporting period as specified.

These instructions specify the reporting basis and unit of measurement that apply to each item.

Definitions

Terms highlighted in ***bold italics*** indicate that the definition is provided in *Reporting Standard SRS 101.0 Definitions for Superannuation Data Collections* (SRS 101.0).

Specific instructions

Table 1: Insurance offerings

Report columns 1 to 4 and 8 as at the end of the reporting period. Report column 5 as at the start of the reporting period. Report columns 6 and 7 with respect to transactions that occurred during the reporting period.

Column	Field name	Unique identifier	Applicable to	Valid values	Description
1	Insurance Cluster Identifier	Y	All filers	No more than 20 alpha-numeric characters (with no special characters).	Report the <i>insurance cluster identifier</i> .
2	Superannuation Product Identifier	Y	All filers	No more than 20 alpha-numeric characters (with no special characters)	Report the <i>superannuation product identifier</i> . The <i>superannuation product identifier</i> must correspond to a <i>superannuation product identifier</i> reported in SRF 605.0.

Column	Field name	Unique identifier	Applicable to	Valid values	Description
3	Insurance Cover Type	Y	All filers	<ul style="list-style-type: none"> • <i>Life Insurance</i> • <i>Total And Permanent Disability Insurance</i> • <i>Income Protection Insurance</i> • <i>Bundled Life And Total And Permanent Disability Insurance</i> • <i>Bundled Life And Income Protection Insurance</i> • <i>Bundled Total And Permanent Disability And Income Protection Insurance</i> • <i>Bundled Life Total And Permanent Disability And Income Protection Insurance</i> • <i>Other Insurance</i> 	Report the <i>insurance cover type</i> .
4	Insurance Default Cover Offered Indicator		All filers	<ul style="list-style-type: none"> • Yes • No 	Report if there is <i>default cover offered</i> for the specified <i>insurance cover type</i> .
5	Insurance Cover Superannuation Product Start Period Member		All filers	Whole numbers	Report the number of <i>member accounts</i> with insurance cover at the start of the reporting period.

Column	Field name	Unique identifier	Applicable to	Valid values	Description
	Accounts Count				
6	Insurance Cover Superannuation Product New Business Member Accounts Count		All filers	Whole numbers	Report the number of <i>member accounts</i> that had cover at the end of the reporting period that did not have cover at the start of the reporting period.
7	Insurance Cover Superannuation Product Ceased Member Accounts Count		All filers	Whole numbers	Report the number of <i>member accounts</i> that had cover at the start of the reporting period that did not have cover at the end of the reporting period.
8	Insurance Cover Superannuation Product End Period Member Accounts Count		All filers	Whole numbers	Report the number of <i>member accounts</i> with insurance cover at the end of the reporting period.

Table 2: Member insurance choice

Report Table 2 as at the end of the reporting period.

Column	Field name	Unique identifier	Applicable to	Valid values	Description
1	Insurance Cluster Identifier	Y	All filers	No more than 20 alpha-numeric characters (with no special characters).	Report the <i>insurance cluster identifier</i> .

Column	Field name	Unique identifier	Applicable to	Valid values	Description
2	Insurance Cover Type	Y	All filers	<ul style="list-style-type: none"> • <i>Life Insurance</i> • <i>Total And Permanent Disability Insurance</i> • <i>Income Protection Insurance</i> • <i>Other Insurance</i> 	Report the <i>insurance cover type</i> .
3	Insurance Default Cover Offered Indicator	Y	All filers	<ul style="list-style-type: none"> • Yes • No 	Report the <i>default cover offered</i> indicator. i.e. would the member have cover at the end of the reporting period if they had made no elections or applications regarding insurance cover.
4	Insurance Current Level Cover Type	Y	All filers	<ul style="list-style-type: none"> • <i>No Cover</i> • <i>Less Cover Than Default</i> • <i>Default Level Of Cover</i> • <i>More Cover Than Default No Underwriting</i> • <i>More Cover Than Default With Underwriting</i> 	Report the <i>current level of cover</i> . i.e. how does the member's current level of cover compare the level of cover that they would have should they have made no elections or applications regarding insurance cover.
5	Insurance Cover Member Accounts Count		All filers	Whole numbers	Report the number of <i>member accounts</i> with insurance cover.
6	Insurance Cover		All filers	Whole dollars	Report the <i>aggregate cover</i> of

Column	Field name	Unique identifier	Applicable to	Valid values	Description
	Aggregate Amount				<i>member accounts</i> with insurance cover. For <i>IP Insurance</i> this must be specified as an annual amount.

Reporting Form SRF 251.2

Insurance payments

Instruction Guide

This instruction guide is designed to assist in the completion of *Reporting Form SRF 251.2 Insurance payments* (SRF 251.2). This form collects information on premium payments made to insurers and the claims management process.

General directions and notes

Reporting level

SRF 251.2 must be completed for each RSE or defined benefit RSE.

Reporting tables

Tables described in this reporting form list each of the data fields required to be reported. The data fields are listed sequentially in the column order that they will appear in the reported data set. Constraints on the data that can be reported for each field have also been provided.

The Unique identifier column indicates which field or fields form the primary key of the table. Where a field has ‘Y’ in the Unique identifier column, this denotes that this field forms part of the primary key for the table. A blank cell in the Unique identifier column means that the field does not form part of the primary key for the table. Any specific combination of values in the fields that form the primary key of a table must not appear on more than one row in that table when reported.

Reporting basis and unit of measurement

Amounts in SRF 251.2 are to be reported as whole dollars.

Items on SRF 251.2 must be reported as at the end of the reporting period or with respect to transactions that occurred during the reporting period. Unless otherwise specified, report information with respect to transactions that occurred during the reporting period.

These instructions specify the reporting basis and unit of measurement that applies to each item.

Definitions

Terms highlighted in ***bold italics*** indicate that the definition is provided in *Reporting Standard SRS 101.0 Definitions for Superannuation Data Collections* (SRS 101.0).

Specific instructions

Table 1: Premiums paid

Report all premiums paid to insurers or rebates received during the reporting period.

Column	Field name	Unique identifier	Applicable to	Valid values	Description
1	Insurance Cluster Identifier	Y	All filers	No more than 20 alpha-numeric characters (with no special characters).	Report the <i>insurance cluster identifier</i> .
2	Insurance Cover Type	Y	All filers	<ul style="list-style-type: none"> • <i>Life Insurance</i> • <i>Total And Permanent Disability Insurance</i> • <i>Income Protection Insurance</i> • <i>Other Insurance</i> 	Report the <i>insurance cover type</i> .
3	Insurance Cover Year Date	Y	All filers	Date (yyyy)	Report the <i>year of cover</i> .
4	Insurance Premium Collected Amount		All filers	Whole dollars	Report the <i>insurance premium collected</i> .
5	Insurance Premium Paid Amount		All filers	Whole dollars	Report the <i>insurance premium paid</i> to the insurer.

Column	Field name	Unique identifier	Applicable to	Valid values	Description
6	Insurance Premium Rebate Amount		All filers	Whole dollars	Report the <i>insurance premium rebate received</i> from the insurer.
7	Insurance Premium Rebate Paid to Members Amount		All filers	Whole dollars	Report the <i>insurance premium rebate</i> paid to members.

Table 2: Claims admitted

Report all claims that were admitted during the reporting period.

Column	Field name	Unique identifier	Applicable to	Valid values	Description
1	Insurance Cluster Identifier	Y	All filers	No more than 20 alphanumeric characters (with no special characters).	Report the <i>insurance cluster identifier</i> .
2	Insurance Cover Type	Y	All filers	<ul style="list-style-type: none"> • <i>Life Insurance</i> • <i>Total And Permanent Disability Insurance</i> • <i>Income Protection Insurance</i> • <i>Other Insurance</i> 	Report the <i>insurance cover type</i> .
3	Insurance Incident Year Date	Y	All filers	Date (yyyy)	Report the <i>year of incident</i> .
4	Insurance Claim Admitted Count		All filers	Whole numbers	Report the number of <i>claims admitted</i> . For example, for <i>IP Insurance</i> report the total number of <i>IP Insurance</i> claims admitted during the period.

Column	Field name	Unique identifier	Applicable to	Valid values	Description
5	Insurance Claim Admitted Amount		All filers	Whole dollars	Report the aggregate cover of claims admitted . For example, for Life Insurance report the total value of Life Insurance claims admitted during the period. For IP Insurance report the total annual insured amount for the admitted claims.
6	Insurance Average Claim Duration Number		All filers	Whole numbers	Report the average claim duration in days for claims admitted during the period.

Table 3: Claims paid

Report all claims that were paid during the reporting period.

Column	Field name	Unique identifier	Applicable to	Valid values	Description
1	Insurance Cluster Identifier	Y	All filers	No more than 20 alpha-numeric characters (with no special characters).	Report the insurance cluster identifier .
2	Insurance Cover Type	Y	All filers	<ul style="list-style-type: none"> • Life Insurance • Total And Permanent Disability Insurance • Income Protection Insurance • Other Insurance 	Report the insurance cover type .

Column	Field name	Unique identifier	Applicable to	Valid values	Description
3	Insurance Incident Year Date	Y	All filers	Date (yyyy)	Report the <i>year of incident</i> .
4	Insurance Claim Admitted Year Date	Y	All filers	Date (yyyy)	Report the <i>year of admittance</i> .
5	Insurance Claim Payer Type	Y	All filers	<ul style="list-style-type: none"> • RSE Licensee • Insurer • Other • Not Applicable 	Report the <i>claims paid to member by</i> .
6	Insurance Claim Paid Count		All filers	Whole numbers	Report the number of <i>claims paid</i> in the reporting period. For example, for <i>IP Insurance</i> report the total number of <i>IP Insurance</i> claims paid during the period.
7	Insurance Claim Paid Amount		All filers	Whole dollars	Report the value of <i>claims paid</i> during the period. For example, for <i>IP Insurance</i> report the total value of <i>IP Insurance</i> claims for the period.

Table 4: Claims processing

Report all claims that were processed during the reporting period.

Column	Field name	Unique identifier	Applicable to	Valid values	Description
1	Insurance Cluster Identifier	Y	All filers	No more than 20 alpha-numeric characters (with no special characters).	Report the <i>insurance cluster identifier</i> .

Column	Field name	Unique identifier	Applicable to	Valid values	Description
2	Insurance Cover Type	Y	All filers	<ul style="list-style-type: none"> • <i>Life Insurance</i> • <i>Total And Permanent Disability Insurance</i> • <i>Income Protection Insurance</i> • <i>Other Insurance</i> 	Report the <i>insurance cover type</i> .
3	Insurance Claim Start Period Undetermined Count		All filers	Whole numbers	Report the number of <i>undetermined claims</i> as at the beginning of the reporting period.
4	Insurance Claim Received Count		All filers	Whole numbers	Report the number of <i>claims received</i> .
5	Insurance Claim Reopened Count		All filers	Whole numbers	Report the number of <i>claims re-opened</i> .
6	Insurance Claim Withdrawn Count		All filers	Whole numbers	Report the number of <i>claims withdrawn</i> .
7	Insurance Claim Admitted Count		All filers	Whole numbers	Report the number of <i>claims admitted</i> .
8	Insurance Claim Declined Count		All filers	Whole numbers	Report the number of <i>claims declined</i> .
9	Insurance Claim Finalised Other Count		All filers	Whole numbers	Report the number of <i>claims finalised - other</i> .
10	Insurance Claim End Period Undetermined Count		All filers	Whole numbers	Report the number of <i>undetermined claims</i> as at the end of the reporting period.
11	Insurance Claim Average Undetermined Duration Number		All filers	Whole numbers	Report the average <i>undetermined claim duration</i> in days as at the end of the reporting period.

Table 5: TPD assessment

Report TPD claims that were processed during the reporting period.

Column	Field name	Unique identifier	Applicable to	Valid values	Description
1	Insurance Cluster Identifier	Y	All filers	No more than 20 alpha-numeric characters (with no special characters).	Report the <i>insurance cluster identifier</i> .
2	Assessment Criteria Total And Permanent Disability Type	Y	All filers	<ul style="list-style-type: none"> • <i>Activities Of Daily Life</i> • <i>Any Occupation</i> • <i>Own Occupation</i> • <i>Other</i> 	Report the <i>TPD assessment criteria</i> .
3	Assessment Criteria Other Total And Permanent Disability Description Text	Y	All filers	Free text	Where 'Other' has been selected in column 2, report the description of the other <i>TPD assessment criteria</i> . Please use separate entries should there be multiple definitions that need to be reported. Report 'not applicable' or '0' for this item if ' <i>Activities Of Daily Life</i> ', ' <i>Any Occupation</i> ', or ' <i>Own Occupation</i> ' have been selected for Column 2 of this table.
4	Insurance Claim Assessment Type	Y	All filers	<ul style="list-style-type: none"> • <i>Admitted</i> • <i>Declined</i> • <i>Finalised Other</i> 	Report the <i>claim assessment</i> .
5	Insurance Claim Total And Permanent Disability Count		All filers	Whole numbers	Report the number of <i>claims</i> .

Column	Field name	Unique identifier	Applicable to	Valid values	Description
6	Insurance Claim Total And Permanent Disability Amount		All filers	Whole dollars	Report the <i>aggregate cover</i> of <i>TPD insurance</i> claims finalised.

Reporting Form SRF 251.3

Insurance premiums

Instruction Guide

This instruction guide is designed to assist in the completion of *Reporting Form SRF 251.3 Insurance premiums* (SRF 251.3). This form collects information on insurance premiums disclosed to members on a forward-looking basis.

General directions and notes

Reporting level

SRF 251.3 must be completed for each group insurance policy within an RSE or defined benefit RSE in force as at the end of the reporting period.

Reporting tables

Tables described in this reporting form list each of the data fields required to be reported. The data fields are listed sequentially in the column order that they will appear in the reported data set. Constraints on the data that can be reported for each field have also been provided.

The Unique identifier column indicates which field or fields form the primary key of the table. Where a field has ‘Y’ in the Unique identifier column, this denotes that this field forms part of the primary key for the table. A blank cell in the Unique identifier column means that the field does not form part of the primary key for the table. Any specific combination of values in the fields that form the primary key of a table must not appear on more than one row in that table when reported.

Reporting basis and unit of measurement

Items on SRF 251.3 must be reported as at the end of the reporting period, or, where an RSE licensee is submitting ad-hoc information, as at the date of the change.

These instructions specify the reporting basis and unit of measurement that applies to each item.

Definitions

Terms highlighted in ***bold italics*** indicate that the definition is provided in *Reporting Standard SRS 101.0 Definitions for Superannuation Data Collections* (SRS 101.0).

Specific instructions

Table 1: Insurance tables

Table 1 defines insurance tables that are used to group premiums disclosed in Table 2. Report under Table 1 to define all insurance tables for each ***group insurance policy*** within the RSE.

Column	Field name	Unique identifier	Applicable to	Valid values	Description
1	Insurance Table Identifier	Y	All filers	No more than 20 alphanumeric characters (with no special characters).	Report the <i>insurance table identifier</i> .
2	Insurance Cluster Identifier		All filers	No more than 20 alphanumeric characters (with no special characters).	Report the <i>insurance cluster identifier</i> .
3	Insurance Cluster Subgroup Text		All filers	Free text	Report the <i>insurance cluster subgroup</i> .

Column	Field name	Unique identifier	Applicable to	Valid values	Description
4	Insurance Cover Type		All filers	<ul style="list-style-type: none"> • <i>Life Insurance</i> • <i>Total And Permanent Disability Insurance</i> • <i>Income Protection Insurance</i> • <i>Bundled Life And Total And Permanent Disability Insurance</i> • <i>Bundled Life And Income Protection Insurance</i> • <i>Bundled Total And Permanent Disability And Income Protection Insurance</i> • <i>Bundled Life Total And Permanent Disability And Income Protection Insurance</i> • <i>Other Insurance</i> 	Report the <i>insurance cover type</i> .
5	Worker Category Text		All filers	Free text	Report the <i>worker category</i> .
6	Worker Category Default Indicator		All filers	<ul style="list-style-type: none"> • Yes • No 	Report the <i>default worker category</i> indicator.

Column	Field name	Unique identifier	Applicable to	Valid values	Description
7	Occupation Category 1 Cover Included Indicator		All filers	<ul style="list-style-type: none"> • Yes • No 	Report the <i>includes cover for category 1 occupations</i> indicator.
8	Occupation Category 2 Cover Included Indicator		All filers	<ul style="list-style-type: none"> • Yes • No 	Report the <i>includes cover for category 2 occupations</i> .
9	Occupation Category 3 Cover Included Indicator		All filers	<ul style="list-style-type: none"> • Yes • No 	Report the <i>includes cover for category 3 occupations</i> indicator.
10	Occupation Category 4 Cover Included Indicator		All filers	<ul style="list-style-type: none"> • Yes • No 	Report the <i>includes cover for category 4 occupations</i> indicator.
11	Occupation Category 5 Cover Included Indicator		All filers	<ul style="list-style-type: none"> • Yes • No 	Report the <i>includes cover for category 5 occupations</i> indicator.
12	Occupation Category 6 Cover Included Indicator		All filers	<ul style="list-style-type: none"> • Yes • No 	Report the <i>includes cover for category 6 occupations</i> indicator.
13	Smoker Status Type		All filers	<ul style="list-style-type: none"> • <i>Smoker</i> • <i>Non Smoker</i> • <i>Aggregate</i> 	Report the <i>smoker status</i> .
14	Smoker Status Default Indicator		All filers	<ul style="list-style-type: none"> • Yes • No 	Report the <i>default smoker status</i> indicator.
15	Insurance Cover Valuation Basis Type		All filers	<ul style="list-style-type: none"> • <i>Agreed Value</i> • <i>Indemnity Value</i> • <i>Not Applicable</i> 	Report the <i>cover valuation basis</i> .

Table 2: Insurance premiums

Report the items in Table 2 for each premium disclosed for each insurance table defined in Table 1 as at the end of the reporting period. This table collects information on insurance premiums disclosed to members on a forward-looking basis.

Column	Field name	Unique identifier	Applicable to	Valid values	Description
1	Insurance Table Identifier	Y	All filers	No more than 20 alpha-numeric characters (with no special characters).	Report the <i>insurance table identifier</i> .
2	Sex Type	Y	All filers	<ul style="list-style-type: none"> • <i>Female</i> • <i>Male</i> • <i>Other</i> • <i>Not Stated Or Inadequately Described</i> • <i>Aggregate</i> 	Report the <i>sex</i> of the insured person.
3	Member Age Number	Y	All filers	Whole numbers	Report the <i>age</i> of the insured person.
4	Insurance Income Protection Waiting Period Number	Y	All filers	Whole numbers	<p>Report the <i>income protection waiting period</i> in days.</p> <p>If the premium charged does not include cover for <i>income protection insurance</i>, report 999.</p>

Column	Field name	Unique identifier	Applicable to	Valid values	Description
5	Insurance Income Protection Benefit Period Type	Y	All filers	<ul style="list-style-type: none"> • <i>Up To 1 Year</i> • <i>Up To 2 Years</i> • <i>Up To 5 Years</i> • <i>Until Age 60</i> • <i>Until Age 65</i> • <i>Until Age 67</i> • <i>Until Age 70</i> • <i>Other</i> • <i>Not Applicable</i> 	Report the <i>income protection benefit period</i> .
6	Insurance Cover Default Life Insurance Cover Level Amount		All filers	Whole dollars	Report the <i>default level of cover</i> for life insurance as a dollar amount.
7	Insurance Cover Default Total And Permanent Disability Insurance Cover Level Amount		All filers	Whole dollars	Report the <i>default level of cover</i> for total and permanent disability insurance as a dollar amount.
8	Insurance Cover Default Income Protection Insurance Cover Level Amount		All filers	Whole dollars	Report the <i>default level of cover</i> for income protection insurance as a dollar amount.
9	Insurance Cover Default Cover Level Salary Percent		All filers	Percentage to 2 decimal places	Report the <i>default level of cover</i> as a percentage of salary.
10	Insurance Cover Cost Amount		All filers	Whole dollars	Report the annual <i>cost of cover</i> for the <i>default level of cover</i> . Where the default level of cover has been expressed as a percentage of salary, report the annual <i>cost of cover</i>

Column	Field name	Unique identifier	Applicable to	Valid values	Description
					per \$1000 of cover.
11	Insurance Premium Members Tax Rebate Amount		All filers	Whole dollars	Report the <i>premium tax rebate provided to members</i> .