Target Market Determination

MMA Retail Group Personal Accident

This Target Market Determination (TMD) is effective from 05.10.2021 and relates to the MMA Retail Group Personal Accident and Illness Product Disclosure Statement and Policy Wording (1.10.21) that have been issued by Marsh & McLennan Agency Pty Ltd ABN33 000 668 584 AFSL 238984 as agents acting on behalf of certain underwriters at Lloyd's.

This TMD provides MMA's distributors and customers information regarding:

- which customers this product is suitable for (the target market) and which customers this product is unsuitable for;
- any distribution conditions for this product;
- reporting obligations and restrictions on distribution of our distributors; and
- the review period and events or circumstances that may trigger a review.

This TMD describes the customers within our target market. This TMD doesn't consider a customer's personal needs, objectives and financial situation, and is also subject to our acceptance criteria.

Where the product is part of a group or scheme policy and there are multiple claims payable which would otherwise result in the aggregate limits of liability being exceeded, this may have the effect of reducing the settlement amount each individual may receive.

A customer should always refer to the MMA Retail Group Personal Accident and Illness Product Disclosure Statement and Policy Wording (1.10.21), and any Supplementary Product Disclosure Statements (SPDS) that may apply, to ensure the product is right for them.

Key Objectives and Attributes of this Product

The key objectives of this product are to provide cover for customers in our target market in respect of:

- injury (up until attaining the age of 70 years) and
- illness (up until attaining the age of 65 years), which first occurs and/or manifests itself during the period of insurance.

This product offers a choice of cover for:

- Capital Benefits including Broken Bones Benefits
- Weekly Benefits Injury
- Weekly Benefits Illness

This product also includes the following additional benefits:

- Disappearance
- Exposure
- Hijack
- Modification Benefit
- Rehabilitation Expenses
- Escalation Benefit
- Accidental HIV Benefit
- Spouse and Dependant Child Benefit
- Emergency Ambulance Transport

The above are subject to the relevant terms and conditions including limits and applicable excess(es) of the policy wording.

Class of Customers

Capital Benefits

This cover has been designed for employers of individuals in the target market to provide for the likely needs, objectives and financial situation resulting from injuries which result in the death or permanent disablement (lump sum/capital benefits) of their employees.

Who is within the Target Market for Capital Benefits?

- ☑ employers (not being manufacturers) of less than 20 Individuals who want financial protection for injuries which result in their death or permanent disablement (lump sum/capital benefits) of their employees aged under 70 years;
- ☑ employers (being manufacturers) of less than 100 Individuals who want financial protection for injuries which result in their death or permanent disablement (lump sum/capital benefits) of their employees aged under 70 years.

Customers NOT within the Target Market for Capital Benefits

Customers are not within the target market if any of the following conditions apply:

- employers wishing to cover individuals aged 70 years or older;
- employers wishing to cover individuals who want insurance for their death or permanent disablement due to illness (lump sum payment/capital benefits);
- employers wishing to cover individuals who want insurance for any pre-existing condition;
- employers wishing to cover individuals who want insurance whilst they participate in or train for navel, military or air force service or in respect of professional sport of any kind;
- employers and/or employees who cannot afford the premium or for whom the payment options are not suitable;
- employers and/or employees who cannot afford to pay the excess amount(s) we offer or don't want an excess to apply for loss of income benefits, where the excesses apply (refer to PDS for further details);
- employers and/or employees who want cover for types of loss that we exclude, such as those found in the General Exclusions of the policy;
- any clubs or associations wishing to cover their members;
- any buying groups.

Weekly Benefits - Injury / Illness

This cover has been designed for individuals in the target market to provide financial protection for their loss of earnings due to injury or illness (weekly benefits). Cover is available for Weekly Benefits - Injury only or Weekly Benefits - Injury and Illness.

Who is within the Target Market for Weekly Benefits – Injury / Illness?

Customers are within the target market if all the following conditions apply:

- employers (not being manufacturers) of less than 20 Individuals who want financial protection for their loss of earnings due to injury or illness (weekly benefits) of their employees aged under 70 years;
- ☑ employers (being manufacturers) of less than 100 Individuals who want financial protection for their loss of earnings due to injury or illness (weekly benefits) of their employees aged under 70 years.

Customers NOT within the Target Market for Weekly Benefits – Injury / Illness?

Customers are not within the target market if any of the following conditions apply: Employers of individuals:

- whose income would not reduce in the event of a Temporary Disablement or whose income comes from Government benefits &/or interest &/or return on investments;
- who are not living in Australia;
- who want insurance for weekly benefits for injury who are aged 70 years or older;
- who want insurance for weekly benefits for illness who are aged 65 years or older;
- who want insurance for weekly benefits due to illness only;
- who want insurance for any pre-existing condition;
- who want insurance while they participate in, or train for navel, military or air force service or in respect of professional sport of any kind;
- who will not accept payments of weekly compensation on behalf of their employees.

Any:

- Employers and/or employees who cannot afford the premium or for whom the payment options are not suitable;
- Employers and/or employees who cannot afford to pay the excess amount(s) we offer or don't want an excess to apply for loss of income benefits, where the excesses apply (refer to PDS for further details);
- Employers and/or employees who want cover for types of loss that we exclude, such as those found in the General Exclusions of the policy;
- clubs or associations wishing to cover their members;
- buying groups for employers.

Applicable to both Capital Benefits & Weekly Benefits – Injury / Illness

An employer and employee are only in our target market for this product where they meet the eligibility criteria for the issue (including new business, renewals and variation as applicable) of the product that has been approved by us in writing (Approved Eligibility Process). We advise as part of the Approved Eligibility Process if an employer and employee are eligible or not.

As part of the eligibility criteria, an employer and employee must want cover for this product and that we can agree to provide cover within our underwriting rules, subject to the excess(es), terms (including the amount of premium) conditions, limits and exclusions that apply.

Distribution Conditions

This product has been appropriately designed to be distributed through Australian Financial Services Licensees (AFSL), being general insurance brokers and their authorised representatives. The product has been designed for a customer seeking insurance through an Insurance Broker. It is not available for direct purchase by any person who is not the holder of an AFSL.

This product can only be sold to those customers who meet our underwriting guidelines.

Marsh & McLennan Agency has taken reasonable steps to understand the key product attributes and align distribution to customers in the target market.

Distribution Restrictions

This product can only be sold via AFSL holders

It can be sold to customers within the target market without the customer being provided with any financial product advice or, with either general or personal advice.

Distribution Method

This product is not available for customers to purchase directly.

Reporting Obligations for Distributors

Distributors of this product are required to provide MMA with complaints information about this product through the agreed complaints submission process including:

- the number of complaints the distributor has received about this product during the reporting period;
- a brief summary about the nature of the complaint raised and any steps taken to address the complaint; and
- any general feedback our distributor may have received on this product.

Distributors should include sufficient details about the complaint that would allow MMA to identify whether the TMD may no longer be appropriate to the class of customers.

Reporting Period: monthly or as otherwise agreed with you and no later than 10 business days after the agreed complaints reporting date.

Other Reporting Requirements of Distributors

Distributors of this product who become aware of:

- information as agreed by you in writing with us that would reasonably enable us to promptly identify Review Triggers or other events and circumstances that have occurred which would reasonably suggest the TMD is no longer appropriate in accordance with ss994B(8) of the Corporations Act. To be reported within the time frames agreed for each type of information that are reasonable having regard to the matters specified in ss994B((7) of the Corporations Act.
- information identified to or by you that would reasonably suggest to you that the TMD is no longer appropriate in accordance with ss994B(8) of the Corporations Act.
 To be reported as soon as practicable and in any case within 10 business days, after you form the view.

Dealings outside the target market

Distributors of this product who become aware of a dealing outside the target market that has not been approved by MMA, must report to MMA information such as:

- the date (or date range) that the dealing occurred;
- description of the dealing and why it was not consistent with the TMD;

- details including whether the dealing is considered to be significant;
- how the dealing was identified; and
- details of the steps or actions taken since identifying the dealing.

Reporting Period: As soon as practicable and, subject to our distribution agreement, no later than 10 business days of the date on which the Distributor became aware of the dealing.

TMD Reviews

Review Period The initial review of this TMD will occur no later than 1 years from the date this TMD is first published and every 2 years thereafter.

What may trigger a review prior to periodic review

The events or circumstances that may suggest the product is no longer suitable to the target class of customers and would trigger a review (prior to the scheduled periodic review date) include, but are not limited to, MMA becoming aware of:

- a significant increase in the number of complaints, cancellations or lapses relating to the product received by MMA or reported by or about distributors; including customer feedback;
- a material change to information, assumptions or circumstances taken into account when developing the TMD, such as changes to the Approved Eligibility Process, the design or distribution of the product and/or Product Disclosure Statement, underwriting guidelines, pricing, or reinsurance requirements or the number of policies sold, including penetration rates;
- a change of relevant law, regulatory guidance or industry code which has a material effect on the terms or distribution of the product including feedback from a regulator such as ASIC or APRA or other interested parties such as the Insurance Council of Australia and Code Governance Committee;
- the product being distributed and purchased in a way that is significantly inconsistent with this TMD;
- trends in policy or claims data indicating the product is not performing to customer expectations; data on product claim ratios, the number, nature and magnitude of claims paid, denied and withdrawn and the average claim duration.