

## SCRIPT KEY



This is script that must be **read word for word** to the customer



This is script that must be **read word for word** to the customer, as and when it is applicable



This is script that must be read to the customer, but it can be said in your own words



This is **not** script and is positioned throughout to provide instruction and guidance

## LBG Island Premier/ Premier Plus Account Sales Script

I want to make sure I completely understand your needs and make any necessary adjustments.  
Does anything impact your ability to deal with or communicate with us?

If Yes – Based on your circumstances, how can we support you? and [click here](#)

If customer does not understand or misinterprets the question, please read below:

For example, if you have a visual or hearing impairment, welfare issues or anything else you feel is important for us to know about.

If there is a vulnerability flag – [click here](#)

Please can I confirm that you have listened to and understood the pre-recorded announcement at the beginning of the call?

If No – reconfirm the recorded greeting on the IVR addendum – [click here](#)

How many people do you want to include in any new upgrades today?

How many people do you want to include in a medical screening today?





If the customer is including cover for someone other than themselves, please read below:


Please can you confirm that you have the consent of those to be insured to record their personal information?






Continue over page to upgrade menu.

**Upgrade Menu**

Confirm with customer the upgrade(s) required.

				
<b>Trip Extension</b>	<b>Sports &amp; Activities</b>	<b>Additional Traveler</b>	<b>Excess Waiver</b>	

  
**Retrieve Upgrade Quote**

				
<b>Medical Screening (New)</b>	<b>Medical Screening (Renewal)</b>	<b>Medical Screening (Amendment)</b>	<b>Retrieve Medical Quote</b>	<b>Retrieve New Medical Draft</b>

## **Pre-Quote Questions**

Do you have any trips currently booked?

If Yes Please ask the customer for the following trip information;

- Booking Date
- Travel Destination
- Travel Dates

Please ensure the information above is included when adding your policy comment.

[click here](#)

If No Inform the customer that if they haven't scheduled any trips yet, they can contact us again before booking a trip to process a medical screening. Alternatively, they can access the Allianz Assistance Hub securely via their banking app or through Internet Banking.

If the customer would still like to go ahead with a medical screening [click here](#)

## **Data Privacy Statement**

We require your consent to collect and process your health and medical data solely for the insurance policy you are subscribed to.

Without your consent, we will be unable to provide the upgrade you may wish to purchase or process any claims you may have.

Are you happy to proceed?

If Yes      [click here](#)

If No      please advise that you are unable to continue with the quote

## Medical Screening Questions

At the time of booking the trip were you awaiting any tests, investigations, treatment, surgery or awaiting the results of any tests or investigations?

If Yes Please confirm what the customer was / is awaiting treatment, tests, investigations or the results of tests or investigations into and record this information.

In the 6 months prior to booking;

- had you been prescribed any medication; this includes one off, ongoing and repeat prescriptions whether taking them or not?
- had you received treatment for or consulted a doctor about any medical condition?
- had you attended a hospital or clinic as an out-patient or in-patient for any reason?
- had you been diagnosed as having a terminal condition?
- You have declared < list conditions that have prompted a 'Yes' response >. Do you have any other medical conditions to declare?

Screen all conditions that trigger a 'Yes' response, except where **ALL** of the customers pre-existing conditions are on the 'No Screen List'. Please review the No Screen List below.

### REMINDER

If the customer has answered "No" to all 5 questions - [click here](#)

If the customer has answered "Yes" to question 1 and they;

- Have started their treatment, it is ongoing, or it forms part of regular and ongoing monitoring of the condition (such as check-ups or follow ups), please answer "No" to this question and proceed to offer a further screening where necessary.
- Are waiting for treatment to begin / on a waiting list for surgery, and they have declared conditions not listed in the No Screen List, we are unable to proceed with the medical screening process. Please [click here](#)
- Are waiting or undergoing tests / investigation into undiagnosed symptoms, we are unable to proceed with the medical screening process. Please [click here](#)

## No Screen List

If **ALL** of the customers declared medical conditions appear in the list below – [click here](#)

- Achilles tendon injury
- Acid excess
- Acid reflux
- Acne
- ADHD (Attention Deficit Hyperactivity Disorder)
- Allergy (requiring no prescriptive treatment only)
- Allergy (with Epi-pen if prescribed)
- Alopecia
- Anal fissure / fistula
- Arthritis
- Asthma
- Athlete's foot
- Bell's palsy
- Benign prostatic enlargement
- Blepharitis
- Blindness
- Broken bone (not head or spine)
- Carpal tunnel syndrome
- Cataracts
- Chicken pox
- Coeliac disease
- Colitis (no hospital admission in last 12 months)
- Common cold / influenza
- Corneal graft
- Cosmetic surgery
- Crohn's disease
- Cuts and abrasions (non self-inflicted)
- Cyst – breast
- Cyst – sebaceous
- Cyst – testicular
- Cystitis
- Deafness
- Diabetes
- Diarrhoea and/or vomiting
- Dislocations (no joint replacement or hospital admission needed)
- Diverticulitis
- Dry eye syndrome
- Dyspepsia
- Eczema
- Epididymitis
- Epilepsy
- Essential tremor
- Fungal nail infection
- Gastric reflux
- Glandular fever (not within three months of the planned trip)
- Glaucoma
- Glue ear
- Goitre
- Gout
- Haemorrhoids
- Hayfever
- Hernia
- High blood pressure
- High cholesterol
- HIV (Human immunodeficiency virus, if viral load is undetectable)
- Hives
- Hyperthyroidism (overactive thyroid)
- Hypothyroidism (underactive thyroid)
- Hysterectomy (provided carried out more than six months ago)
- IBS (Irritable Bowel Syndrome)
- Impetigo
- Infections (only if fully resolved and no reoccurrence in the last 12 months)
- Insomnia
- Macular degeneration
- ME (Myalgic Encephalomyelitis, if only symptom is fatigue)
- Meniere's disease
- Menopause / HRT
- Menorrhagia
- Migraine (confirmed diagnosis, no ongoing investigations)
- Nasal polyps
- Neuralgia
- Neuritis
- Nut allergy
- Osteochondritis
- Osteoporosis
- Parkinson's
- Pelvic inflammatory disease
- PMT (Pre-menstrual tension)
- Pregnancy (no complications)
- Psoriasis
- Raynaud's disease
- Reflux oesophagitis
- Retinal detachment
- Rheumatism
- Rhinitis
- Rosacea
- RSI (Repetitive strain injury/tendinitis)
- Shingles
- Shoulder injury
- Sinusitis
- Sleep apnoea
- Tendon injury
- Tendonitis
- Testicular torsion (twisted testicle)
- Thrush
- Tinnitus
- Tonsillitis
- Urticaria
- Varicose veins - legs only (if doctor has confirmed fitness to travel)
- Vertigo

## REMINDER

### **Screening Outcome**

If after the completion of a further screening the following message is displayed.

No medical screening is necessary / £0.00 [click here](#)

We are unable to offer cover for your medical condition [click here](#)

If ALL conditions are on the No Screen List [click here](#)

### **Price Presentation**

To confirm the upgrade will start on < DD/MM/YYYY > and run for a period of 12 months.

The total is £XX.

If the upgrade start date has been amended, read the statement below:

Please be aware that trip cancellation coverage will be effective on the date that your upgrade becomes active, not from the date you purchase it.

If the premium exceeds £100, read the statement below:

I need to advise that you may be able to obtain an alternative travel insurance policy by contacting the Money Helper travel insurance directory. For further details of the directory, you can contact them on 0800 138 7777, alternatively you can visit their website [www.moneyhelper.org.uk](http://www.moneyhelper.org.uk) and search for 'travel insurance directory'.

Would you like to continue with the quote I've given you today?

If Yes [continue with script](#)

If No [click here](#)

## **Important Statements**

Please note, if you or anyone included within the upgrade reach the policy age limit before the upgrades expiry date, your upgrade will be cancelled, and a pro-rata refund will be issued for the remainder of the upgrade.

This upgrade will not cover claims relating to existing medical conditions unless they have been declared and accepted by us. It is your responsibility to make sure all people covered by the insurance are aware of the health exclusions.

If there are any changes in your health or prescribed medication between now and booking a new trip you will need to call us to declare, this may result in an additional premium, or we may not be able to offer cover.

You will need to keep your bank account valid throughout the duration of the upgrade.

To complete the sale, are you happy to purchase the upgrade based on the limited information I have given you today?

If Yes    proceed with script below

If No    please advise that you cannot proceed with sale of the medical upgrade



## REMINDER

Please confirm:

- **email address** held on file for the customer and confirm this phonetically to the customer (if capturing a new email address, you must repeat this back phonetically)
- **mobile number** held on file for the customer (if capturing a new mobile number, you must repeat this back in full)

## Correspondence

Please confirm the email address held for the customer / ask for the email address and repeat phonetically.

Please confirm the mobile number held for the customer / ask for their mobile number.

Within the hour, you will receive an email confirming your upgrade purchase and a text message containing the password to open your medical declaration document. If you need any assistance with this, please do not hesitate to contact us again

Please check your purchase confirmation and medical declaration documents carefully and contact us again if anything needs correcting.

If postal documents are requested, please read below:

The upgrade confirmation will be posted to you, please contact us again if you do not receive this within 10 days.

Please check your purchase confirmation and medical declaration documents carefully and contact us again if anything needs correcting.

## **Contact Details**

If you need to make a claim, please visit the Allianz Assistance Hub found within your online banking or mobile banking app. You can also contact the Travel Claims team by telephone.

Would you like their number?

0345 300 1340 (Lloyds)

If you require emergency medical assistance, please call the 24-hour emergency line.

Would you like their number?

+44 208 239 4010 (Lloyds)

## **Cancellation Rights**

For full terms and exclusions of your policy, please refer to the Travel Insurance Terms booklet.

If you change your mind about the cover, you have the right to cancel this upgrade, without charge, within 14 days from receiving the upgrade confirmation, providing you have not travelled or made a claim.

## **Payment**

In a few moments you may hear a few beeps in your telephone's earpiece, this is our system entering into a secure payment line.

Enter the Semafone Payment Session reference into your Storm DTA dial pad.

Is the card that you wish to use in your own name?

If Yes    Continue with capture of card details

If No    Is the cardholder with you so that I can obtain consent to use their card?

Please can you tell me how your name appears on your card?

Capture and enter into Semafone

Now using your phone's keypad, can you please enter the 16-digit card number shown across the front / back of your card, without reading it out loud.

Please can you also tell me the expiration date?

Capture and enter into Semafone

Again, using your phone keypad, can you please enter the 3 digit security code into your phone's keypad, this can be found on the back of the card.

Once all details have been captured, click PAY.

## **Confirmation and Policy Comment**

You have contacted us today to go through your medical screening, we have completed this and it has cost £XX.XX. This covers < insert person > and runs from < insert date > to < insert date >

For any other topics you have discussed, summarise the policy holder's queries and what your resolution has been.

Is there anything else I can help you with today?

Thank you for calling Allianz Assistance, you've been speaking with < name >.

Enjoy the rest of your day.

Record conversation as a comment in the ABS Natural Person File – [click here](#)

*Script End*

*Script End*

*Script End*

*Script End*

*Script End*

## **Pre-Renewal Questions**

Do you have any trips currently booked?

If Yes [click here](#)

If No - Inform the customer that if they haven't scheduled any trips yet, they can contact us again before booking a trip to process a medical screening. Alternatively, they can access the Allianz Assistance Hub securely via their banking app or through Internet Banking.

If the customer would still like to go ahead with a medical screening [click here](#)

## **Data Privacy Statement**

We require your consent to collect and process your health and medical data solely for the insurance policy you are subscribed to.

Without your consent, we will be unable to provide the upgrade you may wish to purchase or process any claims you may have.

Are you happy to proceed?

If Yes [click here](#)

If No [please advise that you are unable to continue with the quote](#)

## **Medical Screening Questions**

Are you currently awaiting any tests, investigations, treatment, surgery or awaiting the results of any tests or investigations?

If Yes      Please confirm what the customer is awaiting treatment, tests, investigations or the results of tests or investigations into and record this information.

In the last 6 months;

- have you been prescribed any medication; this includes one off, ongoing and repeat prescriptions whether taking them or not?
- have you received treatment for or consulted a doctor about any medical condition?
- have you attended a hospital or clinic as an out-patient or in-patient for any reason?
- have you been diagnosed as having a terminal condition?
- You have declared < list conditions that have prompted a 'Yes' response >. Do you have any other medical conditions to declare?

Screen all conditions that trigger a 'Yes' response, except where **ALL** of the customers pre-existing conditions are on the 'No Screen List'. Please review the No Screen List below

### **REMINDER**

If the customer has answered "No" to all 5 questions - [click here](#)

If the customer has answered "Yes" to question 1 and they;

- Have started their treatment, it is ongoing, or it forms part of regular and ongoing monitoring of the condition (such as check-ups or follow ups), please answer "No" to this question and proceed to offer a further screening where necessary.
- Are waiting for treatment to begin / on a waiting list for surgery, and they have declared conditions not listed in the No Screen List, we are unable to proceed with the medical screening process. Please [click here](#)
- Are awaiting or undergoing tests / investigation into undiagnosed symptoms, we are unable to proceed with the medical screening process. Please [click here](#)



## No Screen List

If **ALL** of the customers declared medical conditions appear in the list below – [click here](#)

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- Benign prostatic enlargement
- Blepharitis
- Blindness
- Broken bone (not head or spine)
- Carpal tunnel syndrome
- Cataracts
- Chicken pox
- Coeliac disease
- Colitis (no hospital admission in last 12 months)
- Common cold / influenza
- Corneal graft
- Cosmetic surgery
- Crohn's disease
- Cuts and abrasions (non self-inflicted)
- Cyst – breast
- Cyst – sebaceous
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- Diarrhoea and/or vomiting
- Dislocations (no joint replacement or hospital admission needed)
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## REMINDER

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No medical screening is necessary / £0.00 [click here](#)

We are unable to offer cover for your medical condition [click here](#)

If ALL conditions are on the No Screen List [click here](#)

### **Price Presentation**

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The total premium is £XX.

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Would you like to continue with the quote I've given you today?

If Yes [continue with script](#)

If No [click here](#)

## **Important Statements**

Please note, if you or anyone included within the upgrade reach the policy age limit before the upgrades expiry date, your upgrade will be cancelled, and a pro-rata refund will be issued for the remainder of the upgrade.

This upgrade will not cover claims relating to existing medical conditions unless they have been declared and accepted by us. It is your responsibility to make sure all people covered by the insurance are aware of the health exclusions.

If there are any changes in your health or prescribed medication between now and booking a new trip you will need to call us to declare again, this may result in an additional premium, or we may not be able to offer cover.

You will need to keep your bank account valid throughout the duration of the upgrade.

To complete the sale, are you happy to purchase the upgrade based on the limited information I have given you today?

If Yes    proceed with script below

If No    please advise that you cannot proceed with sale of the medical upgrade

## REMINDER

Please confirm:

- **email address** held on file for the customer and confirm this phonetically to the customer (if capturing a new email address, you must repeat this back phonetically)
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## Correspondence

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Please confirm the mobile number held for the customer / ask for their mobile number.

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Enter the Semafone Payment Session reference into your Storm DTA dial pad.

Is the card that you wish to use in your own name?

If Yes    Continue with capture of card details

If No    Is the cardholder with you so that I can obtain consent to use their card?

Please can you tell me how your name appears on your card?

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Now using your phone's keypad, can you please enter the 16-digit card number shown across the front / back of your card, without reading it out loud.

Please can you also tell me the expiration date?

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Again, using your phone keypad, can you please enter the 3 digit security code into your phone's keypad, this can be found on the back of the card.

Once all details have been captured, click PAY.

## **Confirmation and Policy Comment**

You have contacted us today to go through your medical screening, we have completed this and it has cost £XX.XX. This covers < insert person > and runs from < insert date > to < insert date >

For any other topics you have discussed, summarise the policy holder's queries and what your resolution has been.

Is there anything else I can help you with today?

Thank you for calling Allianz Assistance, you've been speaking with < name >.

Enjoy the rest of your day.

Record conversation as a comment in the ABS Natural Person File – [click here](#)

*Script End*

*Script End*

*Script End*

*Script End*

*Script End*



## **Change in Health**

Have you booked any new trips since you made your last health declaration?

If Yes [click here](#)

If No please ask the customer for the following trip information;

- Travel Destination
- Travel Dates
- Health Change Circumstances

Please ensure the information above is included when adding your policy comment.

As you have not booked any new trips since your last health declaration and you were unaware of your change in health for the trip(s) mentioned, we will honour cover for your change in health.

You will need to contact us again when you are intending or have booked a new trip so that we can reassess your health circumstances. This may incur an additional premium, or we may be unable to provide cover.

If the customer is planning to book a trip in the near future and would like to know how the change in health circumstances may affect their existing coverage, please [click here](#)

### **IMPORTANT!**

If the caller is not the beneficiary of the medical upgrade, verbal consent must be obtained from the beneficiary before proceeding. Without consent you must not disclose any medical information to anyone other than the beneficiary of the medical upgrade.

## **Data Privacy Statement**

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Without your consent, we will be unable to provide the upgrade you may wish to purchase or process any claims you may have.

Are you happy to proceed?

If Yes [click here](#)

If No please advise that you are unable to continue with the quote

## Medical Screening Questions

At the time of booking the trip were you awaiting any tests, investigations, treatment, surgery or awaiting the results of any tests or investigations?

If Yes Please confirm what the customer was / is awaiting treatment, tests, investigations or the results of tests or investigations into and record this information.

In the 6 months prior to booking;

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- had you attended a hospital or clinic as an out-patient or in-patient for any reason?
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## REMINDER

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No medical screening is necessary / £0.00 [click here](#)

We are unable to offer cover for your medical condition [click here](#)

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You will need to keep your bank account valid throughout the duration of the upgrade.

To complete the sale, are you happy to purchase the upgrade based on the limited information I have given you today?

If Yes    proceed with script below

If No    please advise that you cannot proceed with sale of the medical upgrade

## REMINDER

Please confirm:

- **email address** held on file for the customer and confirm this phonetically to the customer (if capturing a new email address, you must repeat this back phonetically)
- **mobile number** held on file for the customer (if capturing a new mobile number, you must repeat this back in full)

## Correspondence

Please confirm the email address held for the customer / ask for the email address and repeat phonetically

Please confirm the mobile number held for the customer / ask for their mobile number.

Within the hour, you will receive an email confirming your upgrade purchase and a text message containing the password to open your medical declaration document. If you need any assistance with this, please do not hesitate to contact us again

Please check your purchase confirmation and medical declaration documents carefully and contact us again if anything needs correcting.

If postal documents are requested, please read below:

The upgrade confirmation will be posted to you, please contact us again if you do not receive this within 10 days.

Please check your purchase confirmation and medical declaration documents carefully and contact us again if anything needs correcting.

## **Contact Details**

If you need to make a claim, please visit the Allianz Assistance Hub found within your online banking or mobile banking app. You can also contact the Travel Claims team by telephone.

Would you like their number?

0345 300 1340 (Lloyds)

If you require emergency medical assistance, please call the 24-hour emergency line.

Would you like their number?

+44 208 239 4010 (Lloyds)

## **Cancellation Rights**

For full terms and exclusions of your policy, please refer to the Travel Insurance Terms booklet.

If you change your mind about the cover, you have the right to cancel this upgrade, without charge, within 14 days from receiving the upgrade confirmation, providing you have not travelled or made a claim.



## **Payment**

In a few moments you may hear a few beeps in your telephone's earpiece, this is our system entering into a secure payment line.

Enter the Semafone Payment Session reference into your Storm DTA dial pad.

Is the card that you wish to use in your own name?

If Yes    Continue with capture of card details

If No    Is the cardholder with you so that I can obtain consent to use their card?

Please can you tell me how your name appears on your card?

Capture and enter into Semafone

Now using your phone's keypad, can you please enter the 16-digit card number shown across the front / back of your card, without reading it out loud.

Please can you also tell me the expiration date?

Capture and enter into Semafone

Again, using your phone keypad, can you please enter the 3 digit security code into your phone's keypad, this can be found on the back of the card.

Once all details have been captured, click PAY.

## **Confirmation and Policy Comment**

You have contacted us today to go through your medical screening, we have completed this and it has cost £XX.XX. This covers < insert person > and runs from < insert date > to < insert date >

For any other topics you have discussed, summarise the policy holder's queries and what your resolution has been.

Is there anything else I can help you with today?

Thank you for calling Allianz Assistance, you've been speaking with < name >.

Enjoy the rest of your day.

Record conversation as a comment in the ABS Natural Person File – [click here](#)

*Script End*

*Script End*

*Script End*

*Script End*

*Script End*

## **Renewal: Medical Screening Questions (Quick)**

Have there been any changes in your health since your last upgrade with us?

If Yes [click here](#)

If No [click here](#)

## **Data Privacy Statement**

We require your consent to collect and process your health and medical data solely for the insurance policy you are subscribed to.

Without your consent, we will be unable to provide the upgrade you may wish to purchase or process any claims you may have.

Are you happy to proceed?

If Yes [click here](#)

If No [please advise that you are unable to continue with the quote](#)

### **IMPORTANT!**

If the caller is not the beneficiary of the medical upgrade, verbal consent must be obtained from the beneficiary before proceeding. Without consent you must not disclose any medical information to anyone other than the beneficiary of the medical upgrade.

## **Renewal: Medical Screening Questions (Quick)**

Based on your last health declaration, you declared < list all conditions on previous screening >.

- 1) Are you currently awaiting any tests, investigations, treatment, surgery or awaiting the results of any tests or investigations? (Y/N)

If Yes, a full screening will need to be completed – [click here](#)

For more guidance on this question – [click here](#)

- 2) Have you had any newly diagnosed conditions in the last 6 months? This may include a visit to a doctor or clinic, or if you have been to hospital as an inpatient or outpatient (Y/N)  
A visit to a doctor, clinic or hospital is only applicable to new medicals conditions and not existing medical conditions.

If Yes, a full screening will need to be completed – [click here](#)

- 3) In the last 6 months have there been any changes to your existing medical conditions? (Y/N)  
Routine monitoring does not class as a Yes response.

If Yes, a full screening will need to be completed – [click here](#)

- 4) In the last 6 months has there been a change to any of the medication you have been prescribed for the conditions you have declared, or have you been prescribed any new medication? (Y/N)

If Yes, a full screening will need to be completed – [click here](#)

If the customer has answered 'No' to all questions above – [click here](#)

## **Renewal: Medical Screening Questions (Quick – Cont’d)**

In relation to your medical conditions, is there anything else you would like to declare before we continue with the renewal of your medical upgrade?

If Yes, a full screening will need to be completed – [click here](#)

If No – I will renew your medical upgrade based on the information provided last year.

[Click here](#)

### **REMINDER**

If the customer has answered “Yes” to question 1 and they;

- Have started their treatment, it is ongoing, or it forms part of regular and ongoing monitoring of the condition (such as check-ups or follow ups), please answer “No” to this question and proceed to offer a further screening where necessary.
- Are waiting for treatment to begin / on a waiting list for surgery, and they have declared conditions not listed in the No Screen List, we are unable to proceed with the medical screening process. Please [click here](#)
- Are awaiting or undergoing tests / investigation into undiagnosed symptoms, we are unable to proceed with the medical screening process. Please [click here](#)
- Return to screening questions. Please [click here](#)

## **Price Presentation**

To confirm the upgrade will renew on < DD/MM/YYYY > and run for a period of 12 months.

The total is £XX.

If the premium exceeds £100, read the statement below:

I need to advise that you may be able to obtain an alternative travel insurance policy by contacting the Money Helper travel insurance directory. For further details of the directory, you can contact them on 0800 138 7777, alternatively you can visit their website [www.moneyhelper.org.uk](http://www.moneyhelper.org.uk) and search for 'travel insurance directory'.

Would you like to continue with the quote I've given you today?

If Yes      [click here](#)

If No        [click here](#)



## **Important Statements**

Please note, if you or anyone included within the upgrade reach the policy age limit before the upgrades expiry date, your upgrade will be cancelled, and a pro-rata refund will be issued for the remainder of the upgrade.

This upgrade will not cover claims relating to existing medical conditions unless they have been declared and accepted by us. It is your responsibility to make sure all people covered by the insurance are aware of the health exclusions.

If there are any changes in your health or prescribed medication between now and booking a new trip you will need to call us to declare again, this may result in an additional premium, or we may not be able to offer cover.

You will need to keep your bank account valid throughout the duration of the upgrade.

To complete the sale, are you happy to purchase the upgrade based on the limited information I have given you today?

If Yes    proceed with script below

If No    please advise that you cannot proceed with sale of the medical upgrade

## REMINDER

Please confirm:

- **email address** held on file for the customer and confirm this phonetically to the customer (if capturing a new email address, you must repeat this back phonetically)
- **mobile number** held on file for the customer (if capturing a new mobile number, you must repeat this back in full)

## Correspondence

Please confirm the email address held for the customer / ask for the email address and repeat phonetically.

Please confirm the mobile number held for the customer / ask for their mobile number.

Within the hour, you will receive an email confirming your upgrade purchase and a text message containing the password to open your medical declaration document. If you need any assistance with this, please do not hesitate to contact us again

Please check your purchase confirmation and medical declaration documents carefully and contact us again if anything needs correcting.

If postal documents are requested, please read below:

The upgrade confirmation will be posted to you, please contact us again if you do not receive this within 10 days.

Please check your purchase confirmation and medical declaration documents carefully and contact us again if anything needs correcting.

## **Contact Details**

If you need to make a claim, please visit the Allianz Assistance Hub found within your online banking or mobile banking app. You can also contact the Travel Claims team by telephone.

Would you like their number?

0345 300 1340 (Lloyds)

If you require emergency medical assistance, please call the 24-hour emergency line.

Would you like their number?

+44 208 239 4010 (Lloyds)

## **Cancellation Rights**

For full terms and exclusions of your policy, please refer to the Travel Insurance Terms booklet.

If you change your mind about the cover, you have the right to cancel this upgrade, without charge, within 14 days from receiving the upgrade confirmation, providing you have not travelled or made a claim.

## **Payment**

In a few moments you may hear a few beeps in your telephone's earpiece, this is our system entering into a secure payment line.

Enter the Semafone Payment Session reference into your Storm DTA dial pad.

Is the card that you wish to use in your own name?

If Yes    Continue with capture of card details

If No    Is the cardholder with you so that I can obtain consent to use their card?

Please can you tell me how your name appears on your card?

Capture and enter into Semafone

Now using your phone's keypad, can you please enter the 16-digit card number shown across the front / back of your card, without reading it out loud.

Please can you also tell me the expiration date?

Capture and enter into Semafone

Again, using your phone keypad, can you please enter the 3 digit security code into your phone's keypad, this can be found on the back of the card.

Once all details have been captured, click PAY.

## **Confirmation and Policy Comment**

You have contacted us today to go through your medical screening, we have completed this and it has cost £XX.XX. This covers < insert person > and runs from < insert date > to < insert date >

For any other topics you have discussed, summarise the policy holder's queries and what your resolution has been.

Is there anything else I can help you with today?

Thank you for calling Allianz Assistance, you've been speaking with < name >.

Enjoy the rest of your day.

Record conversation as a comment in the ABS Natural Person File – [click here](#)

*Script End*

*Script End*

*Script End*

*Script End*

*Script End*



*Script End*

*Script End*

*Script End*

*Script End*

*Script End*



## **Trip Extension**

Your policy provides cover for 62 days per trip.

The trip extension upgrade can provide cover up to a maximum of 279 days per trip. You can choose to extend the cover to either 93, 186 or 279 days per trip.

Which option would you like to proceed with?

All terms and conditions of your policy remain the same, however you will be increasing the trip duration for a single trip from 62 days to < XX > per trip throughout the duration of this upgrade.

[Continue to Price Presentation](#)

[Quote for Another Upgrade](#)

## **Additional Traveller**

In order to keep the upgrade valid, you will need to ensure the additional traveller is travelling with the account holder or the account holders' partner throughout the duration of the trip. This will be checked at the point of making a claim.

Please capture the additional traveller's details in AgentMode and add to basket.

The travel insurance does not cover claims related to existing medical conditions unless they have been declared to and accepted by us.

Does the additional traveller need to declare any pre-existing medical conditions?

If Yes   [Continue to Medical Screening](#)

If No   [Continue to Price Presentation](#)

[Quote for Another Upgrade](#)

## **Excess Waiver**

Your policy includes an excess of £75 that applies to most sections of the policy.

The excess only applies to the insured adults on the policy.

By removing the excess, all terms and conditions of your policy will remain the same, however there will be no excess applicable under any sections of your policy throughout the duration of this upgrade.

[Continue to Price Presentation](#)

[Quote for Another Upgrade](#)

## **Additional Sports & Activities**

For the full list of sports and activities available within the upgrade – [click here](#)

Your policy covers you for many sports and activities, the Sports and Activities upgrade will also provide cover for < activity >.

You can find a full list of the activities covered within the upgrade on the Allianz Assistance Hub.

All terms and conditions of your policy remain the same, but with purchase of this upgrade, you will be covered for the additional activities listed on the Allianz Assistance Hub throughout the duration of this upgrade.

[Continue to Price Presentation](#)

[Quote for Another Upgrade](#)

## **Worldwide Cover**

Your policy provide cover for travel within Europe as per the definition in your policy wording.

All terms and conditions of your policy will remain the same, however, by purchasing the Worldwide upgrade, this will allow coverage for travel to any destination worldwide, as long as you review and follow the guidance provided by the Foreign, Commonwealth and Development Office (FCDO).

[Continue to Price Presentation](#)

[Quote for Another Upgrade](#)

## **Price Presentation**

To confirm the upgrade would start on < DD/MM/YYYY > and end on < DD/MM/YYYY >.

The total is £XX.

If the upgrade start date has been amended, read the statement below:

Please be aware that trip cancellation coverage will be effective on the date that your upgrade becomes active, not from the date you purchase it.

Would you like to continue with the quote I've given you today?

If Yes      [continue with script](#)

If No      [click here](#)

## **Automatic Renewal**

Would you like the upgrade set to automatically renew next year?

If Yes      [continue with script](#)

If No      [click here](#)

You have agreed to set up continuous payments. We will automatically renew your upgrade each year and charge your payment card until you instruct us to stop.

We will contact you at least 21 days before your upgrade expires. If you are still eligible for cover, we will renew your upgrade using your latest payment details. If you need to make changes or you do not wish to renew, please contact us before your renewal date.

## **Important Statements**

Please note, if you or anyone included within the upgrade reach the policy age limit before the upgrades expiry date, your upgrade will be cancelled, and a pro-rata refund will be issued for the remainder of the upgrade.

You will need to keep your bank account valid throughout the duration of the upgrade.

To complete the sale, are you happy to purchase the upgrade based on the limited information I have given you today?

If Yes      proceed with script below

If No      please advise that you cannot proceed with sale of the upgrade

## **Contact Details**

If you need to make a claim, please visit the Allianz Assistance Hub found within your online banking or mobile banking app. You can also contact the Travel Claims team by telephone.

Would you like their number?

0345 300 2292      (Lloyds)

If you require emergency medical assistance, please call the 24-hour emergency line.

Would you like their number?

+44 208 239 4010      (Lloyds)

## REMINDER

Please confirm:

- **email address** held on file for the customer and confirm this phonetically to the customer (if capturing a new email address, you must repeat this back phonetically)

## Correspondence

Please confirm the email address held for the customer / ask for the customer's email and repeat phonetically.

You will receive an email confirming your upgrade purchase within the hour.

Please check your purchase confirmation documents carefully and contact us again if anything needs correcting.

If postal documents are requested, please read below:

The upgrade confirmation will be posted to you, please contact us again if you do not receive this within 10 days.

Please check your purchase confirmation documents carefully and contact us again if anything needs correcting.

## Cancellation Rights

For full terms and exclusions of your policy, please refer to the Travel Insurance Terms booklet.

If you change your mind about the cover, you have the right to cancel this upgrade, without charge, within 14 days from receiving the upgrade confirmation, providing you have not travelled or made a claim.



## **Payment**

In a few moments you may hear a few beeps in your telephone's earpiece, this is our system entering into a secure payment line.

Enter the Semafone Payment Session reference into your Storm DTA dial pad.

Is the card that you wish to use in your own name?

If Yes    Continue with capture of card details

If No    Is the cardholder with you so that I can obtain consent to use their card?

Please can you tell me how your name appears on your card?

Capture and enter into Semafone

Now using your phone's keypad, can you please enter the 16-digit card number shown across the front / back of your card, without reading it out loud.

Please can you also tell me the expiration date?

Capture and enter into Semafone

Again, using your phone keypad, can you please enter the 3-digit security code into your phone's keypad, this can be found on the back of the card.

Once all details have been captured, click PAY.

## **Confirmation & Policy Comment**

You have contacted us today to purchase < insert upgrade >, we have completed this and it has cost £XX.XX. This covers < insert persons > and runs from < insert date > to < insert date >

For any other topics you have discussed, summarise the policy holder's queries and what your resolution has been.

Is there anything else I can help you with today?

Thank you for calling Allianz Assistance, you've been speaking with < name >.

Enjoy the rest of your day.

Record conversation as a comment in the ABS Natural Person File – [click here](#)

*Script End*

*Script End*

*Script End*

*Script End*

*Script End*

## **Complete Saved Medical Quote**

Have you booked any new trips since making your last health declaration?

If Yes      please delete the existing quote from the basket and [click here](#)

If No      [click here](#)

## **Medical Declaration**

- Please list the medical conditions recorded on the medical screening quote.
- Reconfirm the answers that have been given to the detailed medical questionnaire.
- If any changes are required, edit the existing quote before going to price presentation.

## **Price Presentation**

To confirm the upgrade would start on < DD/MM/YYYY > and run for a period of 12 months.

The total premium is £XX.

If the upgrade start date has been amended, read the statement below:

Please be aware that trip cancellation coverage will be effective on the date that your upgrade becomes active, not from the date you purchase it.

If the premium exceeds £100, read the statement below:

I need to advise that you may be able to obtain an alternative travel insurance policy by contacting the Money Helper travel insurance directory. For further details of the directory, you can contact them on 0800 138 7777, alternatively you can visit their website [www.moneyhelper.org.uk](http://www.moneyhelper.org.uk) and search for 'travel insurance directory'.

Would you like to continue with the quote I've given you today?

If Yes      [continue with script](#)

If No      [click here](#)

## **Important Statements**

Please note, if you or anyone included within the upgrade reach the policy age limit before the upgrades expiry date, your upgrade will be cancelled, and a pro-rata refund will be issued for the remainder of the upgrade.

This upgrade will not cover claims relating to existing medical conditions unless they have been declared and accepted by us. It is your responsibility to make sure all people covered by the insurance are aware of the health exclusions.

If there are any changes in your health or prescribed medication between now and booking a new trip you will need to call us to declare again, this may result in an additional premium, or we may not be able to offer cover.

You will need to keep your bank account valid throughout the duration of the upgrade.

To complete the sale, are you happy to purchase the upgrade based on the limited information I have given you today?

If Yes    proceed with script below

If No    please advise that you cannot proceed with sale of the medical upgrade

## REMINDER

Please confirm:

- **email address** held on file for the customer and confirm this phonetically to the customer (if capturing a new email address, you must repeat this back phonetically)
- **mobile number** held on file for the customer (if capturing a new mobile number, you must repeat this back in full)

## Correspondence

Within the hour, you will receive an email confirming your upgrade purchase and a text message containing the password to open your medical declaration document. If you need any assistance with this, please do not hesitate to contact us again

Please check your purchase confirmation and medical declaration documents carefully and contact us again if anything needs correcting.

If postal documents are requested, please read below:

The upgrade confirmation will be posted to you and should arrive within 10 days. If it does not arrive, please contact us again.

## **Contact Details**

If you need to make a claim, please visit the Allianz Assistance Hub found within your online banking or mobile banking app. You can also contact the Travel Claims team by telephone.

Would you like their number?

0345 300 2292 (Lloyds)

If you require emergency medical assistance, please call the 24-hour emergency line.

Would you like their number?

+44 208 239 4010 (Lloyds)

## **Cancellation Rights**

For full terms and exclusions of your policy, please refer to the Travel Insurance Terms booklet.

If you change your mind about the cover, you have the right to cancel this upgrade, without charge, within 14 days from receiving the upgrade confirmation, providing you have not travelled or made a claim.



## **Payment**

In a few moments you may hear a few beeps in your telephone's earpiece, this is our system entering into a secure payment line.

Enter the Semafone Payment Session reference into your Storm DTA dial pad.

Is the card that you wish to use in your own name?

If Yes    Continue with capture of card details

If No    Is the cardholder with you so that I can obtain consent to use their card?

Please can you tell me how your name appears on your card?

Capture and enter into Semafone

Now using your phone's keypad, can you please enter the 16-digit card number shown across the front / back of your card, without reading it out loud.

Please can you also tell me the expiration date?

Capture and enter into Semafone

Again, using your phone keypad, can you please enter the 3 digit security code into your phone's keypad, this can be found on the back of the card.

Once all details have been captured, click PAY.

## **Confirmation and Policy Comment**

You have contacted us today to go through your medical screening, we have completed this and it has cost £XX.XX. This covers < insert person > and runs from < insert date > to < insert date >

For any other topics you have discussed, summarise the policy holder's queries and what your resolution has been.

Is there anything else I can help you with today?

Thank you for calling Allianz Assistance, you've been speaking with < name >.

Enjoy the rest of your day.

Record conversation as a comment in the ABS Natural Person File – [click here](#)

*Script End*

*Script End*

*Script End*

*Script End*

*Script End*

## **Saved Medical Screening Draft**

Since you last declared your medical conditions, have you booked any new trips, experienced any changes in your health, or been prescribed any new medication?

If Yes      [click here](#)

If No      [click here](#)

## **Complete Saved Upgrade Quote**

Please reconfirm the details of the quote; including how many people are included, their names and date of birth and the type of upgrade. If any changes are required, please edit the existing quote before proceeding to the price presentation.

## **Price Presentation**

To confirm the upgrade would start on < DD/MM/YYYY > and end on < DD/MM/YYYY >.

The total premium is £XX.

If the upgrade start date has been amended, read the statement below:

Please note that coverage for trip cancellation will commence when the upgrade takes effect, rather than on the date of the sale.

Would you like to continue with the quote I've given you today?

If Yes      [continue with script](#)

If No      [click here](#)

## **Automatic Renewal**

Would you like the upgrade set to automatically renew next year?

If Yes      [continue with script](#)

If No      [click here](#)

You have agreed to set up continuous payments. We will automatically renew your upgrade each year and charge your payment card until you instruct us to stop.

We will contact you at least 21 days before your upgrade expires. If you are still eligible for cover, we will renew your upgrade using your latest payment details. If you need to make changes or you do not wish to renew, please contact us before your renewal date.

## **Important Statements**

Please note, if you or anyone included within the upgrade reach the policy age limit before the upgrades expiry date, your upgrade will be cancelled, and a pro-rata refund will be issued for the remainder of the upgrade.

You will need to keep your bank account valid throughout the duration of the upgrade.

To complete the sale, are you happy to purchase the upgrade based on the limited information I have given you today?

If Yes      proceed with script below

If No      please advise that you cannot proceed with sale of the upgrade

## **Contact Details**

If you need to make a claim, please visit the Allianz Assistance Hub found within your online banking or mobile banking app. You can also contact the Travel Claims team by telephone.

Would you like their number?

0345 300 2292    (Lloyds)

If you require emergency medical assistance, please call the 24-hour emergency line.

Would you like their number?

+44 208 239 4010    (Lloyds)

## REMINDER

Please confirm:

- **email address** held on file for the customer and confirm this phonetically to the customer (if capturing a new email address, you must repeat this back phonetically)

## Correspondence

Within the hour, you will receive an email confirming your upgrade purchase and a text message containing the password to open your medical declaration document. If you need any assistance with this, please do not hesitate to contact us again

Please check your purchase confirmation and medical declaration documents carefully and contact us again if anything needs correcting.

If postal documents are requested, please read below:

The upgrade confirmation will be posted to you and should arrive within 10 days. If it does not arrive, please contact us again.

## Cancellation Rights

For full terms and exclusions of your policy, please refer to the Travel Insurance Terms booklet.

If you change your mind about the cover, you have the right to cancel this upgrade, without charge, within 14 days from receiving the upgrade confirmation, providing you have not travelled or made a claim.

## **Payment**

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Is the card that you wish to use in your own name?

If Yes    Continue with capture of card details

If No    Is the cardholder with you so that I can obtain consent to use their card?

Please can you tell me how your name appears on your card?

Capture and enter into Semafone

Now using your phone's keypad, can you please enter the 16-digit card number shown across the front / back of your card, without reading it out loud.

Please can you also tell me the expiration date?

Capture and enter into Semafone

Again, using your phone keypad, can you please enter the 3 digit security code into your phone's keypad, this can be found on the back of the card.

Once all details have been captured, click PAY.



## **Confirmation and Policy Comment**

You have contacted us today to go through your medical screening, we have completed this and it has cost £XX.XX. This covers < insert person > and runs from < insert date > to < insert date >

For any other topics you have discussed, summarise the policy holder's queries and what your resolution has been.

Is there anything else I can help you with today?

Thank you for calling Allianz Assistance, you've been speaking with < name >.

Enjoy the rest of your day.

Record conversation as a comment in the ABS Natural Person File – [click here](#)

*Script End*

*Script End*

*Script End*

*Script End*

*Script End*

## **IVR Addendum**

Our calls are recorded and monitored for training, legal and regulatory purposes.

This policy is underwritten by AWP P&C SA and is administered by Allianz Assistance a trading name of AWP Assistance UK Ltd. There is certain information that we need to know as it may affect the terms of the insurance cover we can offer you.

You must, to the best of your knowledge, give accurate answers to all questions when asked. If you do not answer the questions truthfully it could result in your policy being invalid and could mean that all or part of a claim may not be paid.

[Return to Top](#)

## Vulnerable Customer Addendum

### Step 2. Record the Vulnerability

Are you happy for me to make a note on our records of what you've shared today?

This will help us consider your circumstances and help us provide you with the appropriate support.

[Return to Top](#)

**If Yes** – ensure that the vulnerability is recorded in the Vulnerability section of the customers Natural Person File or as you complete the sale within Agent Mode.

#### ABS example:

Vulnerability	
Type	Health
Comment	Vulnerability Adjustment Any other relevant information

#### Agent Mode example:

Please select your vulnerability type:

☒ **Capability**  
Areas where there may be gaps in skills or resources needed to achieve your goals.

☐ **Health**  
Any physical or mental health conditions that may increase your risk of illness.

☐ **Life Events**  
Unexpected life events that might affect your well-being, such as job loss.

☐ **Resilience**  
Challenges you may face in recovering from setbacks.

Please describe your vulnerabilities.  
**Vulnerability; Adjustment; Any other relevant information**

**If No** – continue as usual with providing the assistance / service, but do not record it.

[Return to Top](#)

### Step 3. Take appropriate action

This will very much depend on the customers vulnerability, but we should use the information the customer has provided to make our decision on how we can best support them. For example, if they tell us they are visually impaired and we are arranging to send out documents, do they need their documents to be posted in a larger print.

If you encounter any situation, where you are unsure what we can offer / how best to support a vulnerable customer, please reach out to your [Customer Vulnerability Champions](#), Live Desk or Team Manager for guidance.

#### [Adjustments List](#)

### Step 4. Continually assess any ongoing need

If a vulnerability flag is present on the customers Natural Person File, we should check if this information is still correct or if they would they like us to update this information first and ask at every subsequent contact.

#### Existing vulnerability

I note you previously informed us that you are < state permanent vulnerability > and will require < state adjustment >.

Based on your current situation is there anything else that impacts your ability to deal with or communicate with us?

#### [Return to Top](#)

## **Medical Conditions Declined**

We are very sorry that we're unable to offer you insurance for your pre-existing medical conditions on this occasion. Please note that your base travel insurance policy still remains in force, however, we are unable to cover any claims relating to your pre-existing medical conditions. This includes claims made by any other insured persons where the claim is related to your pre-existing medical conditions.

You may be able to obtain an alternative travel insurance policy by contacting the Money Helper travel insurance directory for people with serious medical conditions. For further details of the directory, you can contact them on 0800 138 7777 or visit their website at [www.moneyhelper.org.uk](http://www.moneyhelper.org.uk) and search for 'travel insurance directory'.

You have contacted us today to go through your medical screening, we have completed this and it was unfortunately declined. I have offered you the details for Money Helper Service.

For any other topics you have discussed, summarise the policy holder's queries and what your resolution has been.

Is there anything else I can help you with today?

Thank you for calling Allianz Assistance, you've been speaking with < name >.

Enjoy the rest of your day.

Record conversation as a comment in the ABS Natural Person File – [click here](#)

## **Customer has answered ‘No’ to all 5 medical screening questions**

As you have answered ‘No’ to all 5 of our medical screening questions no additional premium is required.

However, if there are any changes in your health or prescribed medication between now and booking a new trip, you will need to contact us again to re-declare. This might result in a premium to be paid or we might not be able to offer cover.

You can contact us again by telephone or by visiting the Allianz Assistance Hub, this can be securely accessed through your mobile banking app or by using Internet Banking.

For any other topics you have discussed, summarise the policy holder’s queries and what your resolution has been.

Is there anything else I can help you with today?

Thank you for calling Allianz Assistance, you’ve been speaking with < name >.

Enjoy the rest of your day.

Record conversation as a comment in the ABS Natural Person File – [click here](#)

## **All condition(s) declared appear on No Screen List**

The pre-existing medical conditions that you have declared are covered automatically within the no screen medical conditions list and therefore no additional premium will be required.

A record of the medical condition(s) that you have declared will be added to your policy. If there are any changes in your health, between now and booking a new trip, you will need to call us to declare again. That might result in a premium to be paid or we might not be able to offer cover.

You can contact us again by telephone or by visiting the Allianz Assistance Hub, this can be securely accessed through your mobile banking app or by using Internet Banking.

For any other topics you have discussed, summarise the policy holder's queries and what your resolution has been.

Is there anything else I can help you with today?

Thank you for calling Allianz Assistance, you've been speaking with < name >.

Enjoy the rest of your day.

Record conversation as a comment in the ABS Natural Person File – [click here](#)



### **No medical screening is necessary / £0.00**

As a result of the pre-existing medical conditions that you have declared and your responses to our further screening questions, we are prepared to cover the conditions without an additional premium required.

A record of the medical condition(s) that you have declared will be added to your policy. If there are any changes in your health, between now and booking a new trip, you will need to call us to declare again. That might result in a premium to be paid or we might not be able to offer cover.

You can contact us again by telephone or by visiting the Allianz Assistance Hub, this can be securely accessed through your mobile banking app or by using Internet Banking.

For any other topics you have discussed, summarise the policy holder's queries and what your resolution has been.

Is there anything else I can help you with today?

Thank you for calling Allianz Assistance, you've been speaking with < name >.

Enjoy the rest of your day.

Record conversation as a comment in the ABS Natural Person File – [click here](#)

## **Medical Quote Declined by Customer**

I would like to inform you that your base travel insurance policy still remains in force, however, we are unable to cover any claims relating to your pre-existing medical conditions. This includes claims made by any other insured persons where the claim is related to your pre-existing medical conditions.

Please note we can only save your medical declaration for up to 7 days. After this time our prices can be subject to change. If you do call back wishing to complete your purchase, we will confirm your declaration again with the representative that you speak to.

Alternatively, you can purchase the upgrade at your own convenience by visiting the Allianz Assistance Hub, which can be securely accessed via your internet banking or phone's banking app.

For any other topics you have discussed, summarise the policy holder's queries and what your resolution has been.

Is there anything else I can help you with today?

Thank you for calling Allianz Assistance, you've been speaking with < name >.

Enjoy the rest of your day.

Record conversation as a comment in the ABS Natural Person File – [click here](#)

## **Upgrade Quote Declined by Customer**

Please note we are only able to save quotes for 7 days. After this time our prices can be subject to change. If you do call back wishing to purchase the upgrade, you will be taken through the details of the upgrade with the representative that you speak to.

Alternatively, you can purchase the upgrade at your own convenience by visiting the Allianz Assistance Hub, which can be securely accessed via your internet banking or phone's banking app.

For any other topics you have discussed, summarise the policy holder's queries and what your resolution has been.

Is there anything else I can help you with today?

Thank you for calling Allianz Assistance, you've been speaking with < name >.

Enjoy the rest of your day.

Record conversation as a comment in the ABS Natural Person File – [click here](#)

## **Adding a Comment**

### **General Enquiry**

A comment must be added to the Account Holders Natural Person File on each and every contact and should include the following.

- Who called and why?
- What action you have taken to support with the customers enquiry?

#### **See example.**

*PH called to check if their 19-year-old son was covered under the policy.*

*Confirmed that son is currently in FTE and meets dependent child definition.*

*Advised I will send PW to PH's email address.*

### **Upgrade Quote/Sell**

- Who called and why?
- What upgrade type was quoted and who was included in the upgrade?
- Upgrade number (where an upgrade has been sold)

#### **See example.**

*PH called to obtain quote for 93-day TE.*

*93-day TE purchased for PH, wife and 10 year old son.*

*CLRGBAXXXXXXXXXX*

**Continue over page for medical screening.**

## **Medical Screening**

In addition to the above guidance, where a customer has declared pre-existing medical conditions, your comment should include the following.

- If it is a new medical screening, a renewal, an amendment.
- Trip details.
- How the customer responded to the 5 medical screening questions i.e., NYYNN
- What medical conditions were declared and who they were for
- Medical screening outcome i.e. quoted £XX – customer declined / paid £XX / all condition(s) covered on NSL / No premium required / cover declined and advised of MH.
- Upgrade number (where an upgrade has been sold)

### **See example.**

*PH called to declare PEMC for her husband.*

*New Medical Screening*

*Trip 1 Spain DD/MM/YYYY – DD/MM/YYYY (booked MM/YYYY)*

*Trip 2 France DD/MM/YYYY – DD/MM/YYYY (booked MM/YYYY)*

*NYYNN*

*Conditions declared for husband: DT1, HBP, HC – paid £XX*

*CLRGBAXXXXXXXXXXXXXX*

## **Reminder**

If the customer has answered “Yes” to question 1 and they;

- Have started their treatment, it is ongoing, or it forms part of regular and ongoing monitoring of the condition (such as check-ups or follow ups), please answer “No” to this question and proceed to offer a further screening where necessary.
- Are waiting for treatment to begin / on a waiting list for surgery, and they have declared conditions not listed in the No Screen List, we are unable to proceed with the medical screening process. Please [click here](#)
- Are awaiting or undergoing tests / investigation into undiagnosed symptoms, we are unable to proceed with the medical screening process. Please [click here](#)

[Return to Medical Screening Questions](#)