

Critical Illness Policy

Introduction

Global Corp (UK) LIMITED

- Critical illness insurance provides a lump sum benefit to a member when diagnosed with one of the defined medical conditions or after undergoing one of the surgical procedures defined as critical illness events. Definitions are available in the user guide.
- Pre-existing medical conditions are excluded. Full explanations are provided in the user guide.
- Coverage varies based on the chosen plan: Base or Base and Extra.
- Benefits become payable if the member survives for 14 days after the illness event (the "survival period").
- Eligibility includes employees, equity partners, barristers, or members of a Limited Liability Partnership as detailed in the coverage section.
- Optional coverage is available for a spouse or partner.
- Children are automatically covered for 25% of the member's benefit, capped at £25,000.

This policy includes:

1. The coverage document outlining key terms and your chosen cover.
2. A user guide containing the general terms and daily practical guidance.

Together, the coverage document and user guide constitute the policy.

Policy Coverage

Key Terms

- Benefits are available if the member, spouse, partner, or child suffers a covered critical illness and survives 14 days.

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- Eligibility criteria and coverage levels vary per category.
- Cover begins on the designated start date and ends at the chosen age or under special circumstances (e.g., divorce).
- Members typically receive coverage up to an automatic entry limit. Exceeding that requires medical assessments.
- A pre-existing condition exclusion means no further claims for related conditions post-event.
- Premiums are calculated based on provided information and adjusted annually or as needed.

Claims Process

- Notify the insurer as soon as possible after the event, ideally within 21 days.
- Claim forms must be submitted within 90 days. Delays may lead to denial or limitation.

Policyholder Obligations

Information Sharing

- Accurate, updated member information is crucial.
- Failure to provide required details can void or limit coverage.
- Claims depend on full cooperation from the member and employer.

Membership Management

- Premiums may change if membership numbers shift significantly.
- The insurer may cancel the policy if minimum requirements are not met.
- Major business changes must be reported.
- Policy terms applicable to a claim are those in effect at the event date.

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Complaints

- Complaints can be made to the Customer Resolution team.
- If unresolved in 8 weeks, you may escalate to the Financial Ombudsman Service (FOS).
- Final Response Letters are issued after investigation. FOS complaints must be made within 6 months of the letter.

Coverage Summary

Dates

- Start Date: 1 June 2021
- Effective Date: 1 January 2023
- Review Date: 1 January 2025

Insured Company

- Global Corp PHARMA (UK) LIMITED

Policy Provision

- A special advisor arrangement applies, requiring a minimum of 100 members.
- Terms may change if the advisor relationship ends or eligibility is no longer met.

Categories Overview

Category 1: Global Corp Pharma UK Limited Employees

- Eligibility: All PAYE-taxed employees
- Entry Ages: 16 to 69
- Cease Age: 70

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- New Entrants: Daily
- Benefits: Units of £10,000, up to 25 units
- Change Events: Lifestyle events (e.g., parental leave, marriage, redundancy)

Other Coverage Details

- Cover basis: Base and Extra
- Total and permanent disability: Inability to do own occupation again
- Temporary absence: Cover continues for illness/injury or up to 3 years otherwise

Category 2: Employee Partners

- Eligibility: Spouses, civil or dependent partners of employees
- Same entry ages, benefit units, and coverage limits as Category 1
- Additional conditions and eligibility similar to those for employees

Disability Basis

- Defined as an inability to care for oneself