

# Bill Protector

Your monthly bills protected with:

- ✓ accident and illness cover, and
- ✓ unemployment cover

Renewable annual cover

Policy document

## Policy Summary

This summary shows the key facts that the Financial Services Authority has asked us to bring to your attention. They are not the full terms and conditions. These are detailed in the rest of the policy booklet. This summary does not form part of your contract of insurance.

## Type of insurance and cover

**Uinsure Bill Protector** is an optional bill payment insurance.

## Significant features and benefits

- This is a renewable annual contract, with premiums payable by monthly instalments by Direct Debit.
- The insurers can only amend the premiums, terms and conditions at renewal date.
- The policy is designed to protect your monthly bill payments if you are unable to work due to accident, illness or involuntary unemployment, including giving up work to become a full time carer.
- Once you have been off work for 30 days in a row one monthly benefit is payable. After that, 1/30<sup>th</sup> of the monthly benefit is then payable for each further day you are off work.
- Benefit payments are made monthly directly to you for up to a maximum of 12 months for each successful claim.
- The maximum monthly amount payable is £500.
- Accident and illness benefit can continue if you return to work on temporary reduced hours.

The full benefits of **Uinsure Bill Protector** can be found in sections 2 and 3 of the Policy Booklet.

## To qualify for cover

You can take out **Uinsure Bill Protector** so long as when the policy starts you are

- over 18 and under 65 years of age,
- permanently resident in the United Kingdom,
- working a minimum 16 hours per week within the UK, and have been so continuously for the previous 6 months,
- not absent from work due to illness or injury (other than minor illnesses such as a cold or flu),
- not aware of any job losses that are likely to affect you and
- not aware that you will have to give up work to become a carer.

## Significant and unusual exclusions or limitations

Like all policies of this type there are some things that this insurance does not cover. You will not be able to claim for:

- Any medical condition which you knew about in the 12 months before your cover starts unless you then go for 12 months without symptoms and without seeing your doctor about it.
- Mental/nervous and back disorders without certain medical evidence (for example a psychiatric specialist report / MRI scan or x-ray).
- Self inflicted injury, alcohol or drug abuse.
- Any unemployment which you knew about at the start of cover or which is notified to you during the 90 day period immediately following the start of cover, this includes giving up work to become a full-time carer.

All the policy exclusions are explained fully in Sections 2 and 3 of the Policy Booklet and there are special conditions regarding unemployment cover for fixed term contract workers explained in Section 2.

## Please also note

- You must be off for work for at least 30 days in a row in order to be entitled to any benefit.
- Any benefit you receive may affect your right to certain State benefits.

## Time to reconsider after you apply or renew your policy

This is known as the “cooling-off period”. If you decide that you do not want the insurance after all, simply return your insurance documents to the scheme administrators within 30 days of receiving them. All cover

will be cancelled and you will receive a refund of any premium paid provided that no claim has been made during the current period of insurance.

### **How to renew your policy**

The scheme administrators will contact you at least 30 days prior to the renewal date and advise you of the premium and terms and conditions that will apply for the following year. Your policy will renew automatically and the scheme administrators will continue collecting premiums unless you notify them that you wish to cancel the policy. You will have 30 days after the renewal date to cancel the policy and receive a refund as described in the paragraph above.

### **How long cover lasts and how to cancel**

Cover can last until your 65<sup>th</sup> birthday, or until you retire from work, whichever is earlier. The insurer recommends that you review your personal circumstances from time to time to make sure that this insurance is still suitable for you.

You can cancel cover at any time by writing to the scheme administrators. No premium will be refunded if you cancel after the “cooling-off period” because the premium is paid by monthly instalments.

### **How to claim**

If you need to make a claim simply ring 0844 412 4094. The telephone lines are open between 9am and 5pm Monday to Friday (excluding Bank Holidays). Further details about claiming can be found in policy Sections 2 and 3.

### **How to complain**

If you wish to make a complaint about any aspect of your policy please contact the insurer via the scheme administrator. Please write to: Direct Group Limited, Direct House, 4 Sidings Court, Doncaster DN4 5NU. Tel 0844 412 4095. The insurer has internal complaints handling procedures that are available on request. In the event that you remain dissatisfied you can refer the matter to Lloyd's. The contact details are: Policyholder & Market Assistance, Lloyd's Market Services, One Lime Street, London EC3M 7HA. Tel 020 7327 5693. Fax 020 7327 5225. E-mail [complaints@lloyds.com](mailto:complaints@lloyds.com).

Complaints that cannot be resolved by Lloyd's may be referred to the Financial Ombudsman Service. Further details will be provided at the appropriate stage of the complaints process. This complaints procedure is without prejudice to your right to take legal proceedings.

### **Compensation**

The insurer is covered by the Financial Services Compensation Scheme. You may be entitled to compensation from the scheme if it is unable to meet its obligations to you under this contract. If you are entitled to compensation under the Scheme, the level and extent depends on the nature of this contract. Further information can be obtained from the Financial Services Compensation Scheme (7th Floor Lloyds Chambers, Portsocken Street, London E1 8BN) by phone on 020 7892 7300 and on its website at [www.fscs.org.uk](http://www.fscs.org.uk)

### **The insurer**

This insurance is underwritten by Lloyd's Syndicate 5820. The Lloyd's Managing Agent for Lloyd's Syndicate 5820 is Jubilee Managing Agency Limited.

## Contents

### What you'll find in this Policy Booklet

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#### IMPORTANT – YOUR INSURANCE DOCUMENTS

The rest of this policy booklet explains the full insurance terms, conditions and exclusions of **Uinsure Bill Protector**. This booklet, together with your personal Insurance Schedule, is your official Insurance Policy which is also your Evidence of Cover and it is a legal document.

Please keep your insurance documents in a safe place.

## Section one

### An introduction to your Uinsure Bill Protector policy

Welcome to **Uinsure Bill Protector**. This policy booklet explains all the terms and conditions of this insurance.

#### What the policy provides

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If *you* become unable to *work* due to accident or illness (this is called “*disability*”) or due to *unemployment* through no fault of *your* own, the policy pays *you* a *monthly benefit*. The *monthly benefit* will be paid straight to *you* so that *you* can decide how best to use it.

#### Benefit limits

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The maximum level of *monthly benefit* is £500. Please note that the benefits paid by this insurance may, in some cases, affect *your* entitlement to certain State benefits

#### Who to talk to

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**Uinsure Bill Protector** is managed by Direct Group Limited, the scheme administrator. It has been chosen because it is a specialist in this type of insurance with many years of experience.

The scheme administrator will be there to help *you* throughout the lifetime of *your* policy, answer any questions *you* might have about *your* policy, collect *your* monthly premiums and deal with *your* claim. Details about how to contact the scheme administrator are in section five.

#### Understanding the cover

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Certain words and phrases in this policy will have the same meaning wherever they appear. To make them easier to recognise when they are being used, they will be shown in *italics*.

They will help *you* to understand the cover and are called Policy Definitions. *You* can find them all listed and explained in section seven.

All insurance documentation and communication to *you* whether written or spoken will be in easy to understand English.

#### To qualify for cover

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*You* can take out **Uinsure Bill Protector** as long as, on the *start date of cover*, *you* are

1. over 18 and under 65 years of age,
2. permanently resident in the United Kingdom,
3. *working* at least 16 hours per week within the United Kingdom, and have been so continuously for the previous 6 months,
4. not absent from *work* due to illness or injury (other than minor illnesses such as a cold or flu),
5. not aware of any job losses to be imposed by *your* employer that are about to happen and are likely to affect *you* and
6. not aware that *you* will have to give up *work* to become a *carer*.



### **If you move abroad**

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For advice on how this will affect *your* policy, please call the scheme administrator if *you* move abroad or *work* abroad after *your* cover starts.

### **The “cooling off period”**

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If *you* decide that *you* do not want the insurance after all, simply return *your* personal insurance schedule to the scheme administrator within 30 days of receiving it or within 30 days of the *renewal date*. All cover will be cancelled without charge.

### **When cover begins**

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*Your* cover will begin on the *start date* shown on *your* insurance schedule. Please note that *you* cannot claim for *unemployment* that is notified to *you* during the first 90 days of cover and *you* cannot claim for giving up *work* to become a *carer* in the first 90 days of cover.

The duration of this contract is one year and the premium is payable by monthly instalments. It will continue until *you* cancel it. The insurers will not terminate *your* policy during the period of cover unless *you* do not pay the premium instalments when they fall due.

The scheme administrators will contact *you* to arrange a further *period of cover* at least 30 days prior to each *renewal date*.

### **Fraudulent Claims or misleading information**

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To help prevent fraud, insurers sometimes share information. Details about *your* insurance application and any claim *you* make may be exchanged between insurers.

If any claim under this insurance is fraudulent or if any misleading or fraudulent means are used by *you* or anyone acting on *your* behalf to obtain benefit under this insurance, *your* right to any benefit under this insurance will end, *your* policy will be cancelled and the insurer will be entitled to recover any benefit paid and costs incurred as a result of any such fraudulent or misleading claim. The insurer may also inform the police.

## Section two

### Unemployment insurance

#### What is meant by “unemployment”

*Unemployment (or unemployed)* in this policy means being without paid *work* through no fault of *your* own. In this policy the benefits available for *unemployment* also apply if *you* give up *work* to become a *carer*.

- *you* will not be covered if, during the first 90 days after the *start date* shown in *your* personal insurance schedule:
  - *your* employer informs *you* that *you* are going to lose *your* job, or
  - *you* become a *carer*
- benefit is not payable for any period for which *you* are entitled to a payment from *your* employer instead of working *your* notice period (payment in lieu of notice), this applies whether or not *you* have registered as *unemployed* before the date *your* notice period ends.

*Unemployment* cover varies depending on the type of employment contract *you* had when *you* were made *unemployed*, that is, whether *you* held a *permanent contract* or a *fixed-term contract* or if *you* were *self-employed*.

#### 1. If you held a permanent contract

*you* are covered if *you* lost *your* job because of *compulsory redundancy* or dismissal, as long as it was not for misconduct.

#### 2. If you held a fixed-term contract

(a) *you* are covered if *your* employer ends *your* contract early and did not renew it again, as long as *your* employer had originally intended the contract to be renewable and either

- *you* had an annual contract and it had already been renewed at least once or
- *you* had *worked* for that employer for at least two continuous years or were previously employed by them under a *permanent contract*.

(b) if *your* contract and *work* record with *your* employer were not as described in (a) above, *you* are covered only if *your* employer ends *your* contract early (not if they did not renew it when it reached its end date), and please note that benefit will not be paid after the normal end date of *your* contract.

#### 3. If you were self-employed

*you* are covered if *you* stopped trading because *your* business became insolvent and *you* have told HM Revenue & Customs.

## The exclusions –what is not covered

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### Unemployment insurance benefit will not be paid for:

1. *Unemployment* you become aware of during the 90 day period immediately after the *start date*, because *your* employer informs *you* that *your* job will be affected.
2. *Unemployment* because *you* became a *carer* within the 90 day period immediately following the *start date of cover*.
3. *Unemployment* which *you* knew about at the *start date of cover*.
4. *Unemployment* if, at the *start date of cover*, *you* knew that *you* would have to give up *work* to become a *carer*.
5. Any period for which *you* have received a payment instead of *working* a notice period.
6. *Unemployment* which is normal or seasonal in *your* occupation.
7. Voluntary *unemployment*, resignation or retirement unless *you* have given up *work* to become a *carer*
8. *Unemployment* due to *your* misconduct, this means not following company rules or breaking the law.
9. War, invasion, acts of foreign enemies, hostilities (whether war is declared or not), civil war, rebellion, revolution, insurrection, military or usurped power, riot or civil commotion, terrorist activity of any kind.
10. Ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel.

## How the policy pays out for unemployment claims

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### Claim date

The *claim date* means the date *your* claim starts. It is the date *you* first register with an appropriate Employment Office in the United Kingdom (or any other Office acceptable to the insurer) as *unemployed*. If *you* receive a payment instead of *working* a notice period *your* claim cannot start until that notice period is over.

If *your unemployment* claim is because *you* have given up *work* to become a *carer*, the *claim date* is the effective date shown on *your* Award Notice.

Please note that the premium instalments must continue to be paid until the *renewal date*.

### Claim waiting period

Benefit becomes payable when *you* have been *unemployed* for 30 days in a row after the *claim date*. If *you* return to *work* before *you* have been *unemployed* for 30 days *you* will not be entitled to any benefit.

### Payment of benefit

As soon as the *claim waiting period* is over, *you* will be entitled to one complete *monthly benefit*. *You* will then be entitled to 1/30<sup>th</sup> of *your monthly benefit* for each further day *you* remain *unemployed* until the first of the following happens

1. *you* return to *work*,
2. *you* are paid the *maximum claim amount* (see below),
3. *your* 65<sup>th</sup> birthday,
4. *you* retire from *work* and do not plan to *work* again, or
5. if *you* are a *carer*, the date *you* no longer have a valid Award Notice.

The scheme administrator will make payments directly to *you* in 30 day intervals, providing *you* continue to provide satisfactory proof that *you* are still *unemployed*

## **The maximum claim amount**

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The most *you* will be paid for each new and separate claim is 12 *monthly benefits*.

## **If your claim changes**

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If *you* are insured for both *unemployment* and *disability* and the reason why *you* are claiming changes from *unemployment* to *disability* this will not be treated as a new claim but will be treated as a continuation of the original claim and the *maximum claim amount* will apply to the claim as a whole.

## **Making further claims**

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If *you* return to *work* before the *maximum claim amount* has been paid but find *you* need to claim again, the way the insurer treats the next period of *unemployment* depends on how long *your* return to *work* lasted:

- if *you* return to *work* for less than three months in a row the next claim will be treated as part of the original claim. Any benefit already paid will count towards the *maximum claim amount*.
- If *you* return to *work* for three months in a row or more, any future *unemployment* will be treated as a completely new claim. *You* will again be entitled to the *maximum claim amount*.

## **When you have been paid the maximum claim amount**

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After the *maximum claim amount* for an *unemployment* claim has been paid, *you* need to return to *work* for six months in a row before *you* can claim again.

## **Temporary earnings during an unemployment claim**

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If during an *unemployment* claim *you* have the opportunity of temporary employment, the insurer can simply suspend *your* claim and will let *you* know *you* how long *your* claim will be suspended for. Please keep the scheme administrator informed so that *you* can take full advantage of **Uinsure Bill Protector**.

## **How to make a claim**

### **Step one – how to notify your claim**

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Read this policy first so that *you* are satisfied that *you* are covered for the claim *you* want to make. Read any exclusions that may apply and make sure *you* understand them.

Contact the scheme administrator for a claim form. Please have *your* policy number to hand, *you* can find this in *your* personal insurance schedule.

If *you* are not sure whether *you* can claim, please contact the scheme administrator who will be happy to help *you*.

### **Step two – after your claim is notified**

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The scheme administrator will send *you* a claim form, which *you* should fill in and return as soon as possible. The scheme administrator will then handle *your* claim directly with *you*.

The claim form includes information about the documents *you* need to send in and what *you* should do during *your* claim. Please read the notes carefully as they will help *your* claim to be handled fairly and promptly. If *you* need any help to fill in the claim form, please talk to the scheme administrator.

### **Step three – the claims procedure**

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The table that follows is a guide to help *you* understand what *you* need to do throughout *your* claim and what documents *you* may need to provide.

Following the procedure and any instructions or advice *you* are given by the scheme administrator will help *your* claim to run smoothly. If *you* do not follow the procedure and any other instructions or advice *you* are given *your* claim may be delayed or remain unpaid.

### **Important – costs you have in providing proof as part of your claim**

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The cost of providing proof of *your* claim is *your* responsibility.

## What you need to do to make an unemployment claim

1	<ul style="list-style-type: none"><li>• Register with the Employment Services in the United Kingdom as <i>unemployed</i> or with the Department of Work and Pensions as a <i>carer</i>.</li><li>• Have a Job Seekers Agreement and be receiving any unemployment benefit or National Insurance Credits <i>you</i> are entitled to.</li><li>• If <i>you</i> have given up <i>work</i> to become a <i>carer</i> <i>you</i> need to be receiving Carer's Allowance.</li></ul>
2	Contact the scheme administrator within 30 days and ask for a claim form. Call 0844 412 4094.
3	Fill in the claim form and send it back to the scheme administrator.
4	<ul style="list-style-type: none"><li>• Throughout <i>your</i> claim <i>you</i> need to show that <i>you</i> are still <i>unemployed</i> and looking for new <i>work</i>, (unless <i>you</i> have given up <i>work</i> to become a <i>carer</i>, in which case <i>you</i> need to show that <i>you</i> are still in receipt of Carer's Allowance) so that benefit under this policy can continue to be paid.</li><li>• The scheme administrator will send <i>you</i> a continuation claim form each month which includes a declaration that <i>you</i> have not <i>worked</i> or that <i>you</i> are still in receipt of Carer's Allowance.</li></ul>

## What documents you may need to produce

1	Completed claim form (this is essential).
2	Job Seekers Agreement/Award Notice in respect of Carer's Allowance, Redundancy notice/severance letter and <i>your</i> P45.
3	<ul style="list-style-type: none"><li>• Continuation claim form (provided by the scheme administrator).</li><li>• Confirmation from the Employment Services that <i>you</i> are still registered as <i>unemployed</i> and any other evidence required by the scheme administrator to show that <i>you</i> are looking for new <i>work</i> or confirmation from the Department of Work and Pensions that <i>you</i> are still a <i>carer</i>.</li><li>• If <i>you</i> were <i>self-employed</i> <i>you</i> will need to provide an Accountant's Certificate to confirm insolvency of <i>your</i> business and be able to show that HM Revenue &amp; Customs are aware that <i>you</i> have ceased trading.</li><li>• Any other evidence required by the scheme administrator to show that <i>you</i> are still looking for new <i>work</i>.</li></ul>

## Section three

### Disability insurance (accident and illness)

#### What is meant by “disability”

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*Disability (or disabled)* in this policy means being unfit to *work* because of an accident or illness. A *doctor* must issue *you* with a medical certificate to say that *you* are totally unable to carry out the duties of *your* normal job.

- *your disability* must begin after the *start date* shown in *your* personal insurance schedule and
- *you* cannot claim during any period of *disability* when *you* are receiving payment for any *work you do* (other than sick pay from *your* normal job).

#### Does disability cover still apply if I go back to my job on temporary reduced hours?

Yes. The insurers want to help *you* on *your way* back to full time *work*. So *your* claim will continue and the FULL *monthly benefit* will continue to be paid for up to a maximum of 3 months, provided that:

1. *you* have already received at least one *monthly benefit* for *your disability* claim and
2. *your doctor* continues to issue medical certificates and confirms the number of hours (or days) that have been agreed. This must be no more than 75% of *your* normal hours and
3. *your* reduced hours (or days) do not become permanent.

#### Will I be able to claim for medical conditions I already have?

Yes, but in order to claim *you* must be able to prove that *you* have been symptom free and have not consulted a *doctor* about the condition for a period of 12 months in a row. (see exclusion 1. below)

#### The exclusions –what is not covered

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##### Disability insurance benefit will not be paid for:

1. A medical condition that *you* had before *you* applied for cover under this policy (this is called a pre-existing medical condition). A pre-existing medical condition means any condition, injury, illness, disease or related condition and/or associated symptoms, whether diagnosed or not, which in the 12 month period immediately before the *start date* shown in *your* personal insurance schedule:
  - *you* knew about, or should reasonably have known about or
  - *you* had seen, or arranged to see, a *doctor* about.

This exclusion will not apply once *you* have been symptom-free and have not consulted a *doctor* or sought treatment or advice for the same condition for 12 months in a row.
2. Backache unless there is additional medical evidence of abnormality (for example an MRI scan or X-ray) or *your doctor* can provide evidence that a specialist consultant has confirmed that *your* back condition is medically abnormal.
3. Any condition caused or aggravated by any psychiatric illness or any mental, nervous or stress related disorder, unless *you* are receiving care and attention from a psychiatric specialist or psychiatric nurse.
4. Deliberate self-inflicted bodily injury or alcohol or drug abuse.
5. War, invasion, acts of foreign enemies, hostilities (whether war is declared or not), civil war, rebellion, revolution, insurrection, military or usurped power, riot or civil commotion, terrorist activity of any kind.
6. Ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel.

## How the policy pays out for disability claims

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### Claim date

The date *your* claim starts, this is the date *you* are first issued with a medical certificate by a *doctor*.

### Claim waiting period

Benefit becomes payable when *you* have been *disabled* for 30 days in a row after the *claim date*. If *you* return to *work* before *you* have been *disabled* for 30 days *you* will not be entitled to any benefit.

### Payment of benefit

As soon as the *claim waiting period* is over *you* will be entitled to one complete *monthly benefit*. *You* are then entitled to 1/30<sup>th</sup> of *your monthly benefit* for each further day *you* remain *disabled* until the first of the following happens

1. *you* return to *work*,
2. *you* have been paid the *maximum claim amount*,
3. *your* 65<sup>th</sup> birthday, or
4. *you* retire from *work* and have no intention of *working* again.

The scheme administrator will make payments directly to *you* in 30 day intervals, providing *you* continue to provide satisfactory proof that *you* are still *disabled*.

Please note that the premium instalments must continue to be paid until the *renewal date*.

### The maximum claim amount

---

The most *you* will be paid for each new and separate claim event is 12 *monthly benefits*.

### If your claim changes

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If *you* are insured for both *disability* and *unemployment* and the reason why *you* are claiming changes from *disability* to *unemployment* this will not be treated as a new claim but will be treated as a continuation of the original claim and the *maximum claim amount* will apply to the claim as a whole.

### Making further claims

If *you* return to *work* before the *maximum claim amount* has been paid but find *you* need to claim again, the way the insurer treats the next period of *disability* depends on how long *your* return to *work* lasted:

- If *you* return to *work* for less than three months in a row the next claim will be treated as part of the original claim. Any benefit already paid will count towards the *maximum claim amount*.
- If *you* return to *work* for three months in a row or more, any future *disability* will be treated as a completely new claim. *You* will again be entitled to the *maximum claim amount*.

### When you have been paid the maximum claim amount

After the *maximum claim amount* for a *disability* claim has been paid, *you* need to return to *work* for six months in a row before *you* can claim for the same or a related condition – or for one month if the next *disability* is totally unrelated.

## How to make a claim

### Step one – how to notify your claim

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Read this policy first so that *you* are satisfied that *you* are covered for the claim *you* want to make. Read any exclusions that may apply and make sure *you* understand them.

Contact the scheme administrator for a claim form. Please have *your* policy number to hand, *you* can find this in *your* personal insurance schedule.

If *you* are not sure whether *you* can claim, please contact the scheme administrator who will be happy to help *you*.

### Step two – after your claim is notified

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The scheme administrator will send *you* a claim form, which *you* should fill in and return as soon as possible. The scheme administrator will then handle *your* claim directly with *you*.

The claim form includes helpful information about the documents *you* need to send in and what *you* should do during *your* claim. Please read the notes carefully as they will help *your* claim to be handled fairly and promptly. If *you* need any help to fill in the claim form, please talk to the scheme administrators.

### Step three – the claims procedure

---

The table that follows is a guide to help you understand what *you* need to do throughout *your* claim and the documents *you* may need to provide.

Following the procedure and any instructions or advice *you* are given by the scheme administrator will help *your* claim to run smoothly. If *you* do not follow the procedure and any other instructions or advice you are given *your* claim may be delayed or remain unpaid.

### Important – costs you have in providing proof as part of your claim

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The cost of providing proof of *your* claim is *your* responsibility. However, if the insurer requires more than just medical certificates from *your doctor*, the cost of any medical examiner's fee for any additional medical or psychiatric examinations *you* are asked to attend will be paid for by the insurer.

What you need to do to make a disability claim	
1	See a <i>doctor</i> .
2	Contact the scheme administrator within 30 days and ask for a claim form.
3	Complete the claim form and send it to the scheme administrator.
4	<ul style="list-style-type: none"><li>Throughout <i>your</i> claim <i>you</i> need to show that <i>you</i> are certified by a <i>doctor</i> as unfit for <i>work</i>.</li><li>The scheme administrator will send <i>you</i> a continuation claim form each month which includes a declaration that <i>you</i> have not <i>worked</i> between claim payments.</li></ul>
What documents you may need to produce	
1	Completed claim form (this is essential).
2	<ul style="list-style-type: none"><li>Medical certificates for the period <i>you</i> are claiming.</li><li>For claims in respect of back disorders and mental or nervous disorders <i>you</i> will need to supply suitable evidence from an appropriate specialist.</li></ul>
3	Continuation claim form (provided by the scheme administrator).

## Section four – Renewing or cancelling your policy

### Cancellation or amendment by the insurer – your rights

#### How your policy renews

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Your policy is an annual contract. The scheme administrators will contact *you* at least 30 days prior to the *renewal date* and advise *you* of the premium and terms and conditions that will apply for the following year. Your policy will renew automatically and the scheme administrators will continue collecting premiums unless *you* notify them that *you* wish to cancel the policy. *You* will have 30 days after the renewal date to cancel the policy and receive a refund as described in Section one.

#### How long cover lasts

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##### Automatic cancellation

Your cover ends automatically when any of the following happens

- non-payment of the monthly premium when due,
- *your* 65<sup>th</sup> birthday or
- *you* retire from *work* and have no intention of *working* again.

##### Cancellation by you

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*You* can cancel cover at any time simply by writing to the scheme administrators. No premium will be refunded if *you* cancel after the “cooling-off period” because the premium is paid by monthly instalments unless *you* have made a claim in the current *period of cover* in which case all instalments must be made until the next *renewal date*. The scheme administrators may, at their discretion, deduct the outstanding premium instalments from any claim.

##### Change of circumstances

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The insurers recommend that *you* review *your* personal circumstances from time to time to make sure that this insurance is still suitable for *you* and that *you* would still be able to claim. If *you* want any advice about how any change in *your* personal circumstances will affect *your* cover *you* should contact the scheme administrators.

##### Changing your policy

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Please contact the scheme administrators if *you* need to change the level of *monthly benefit*. They will tell *you* what to do. Please note that the *unemployment* exclusions 1, 2, 3 and 4 (in Section two), and the *disability* exclusion 1 (in Section three) will be re-applied to the increased level of benefit, from the date that the increase becomes effective.

##### Your rights if the insurer cancels or changes your policy

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If the insurer ever cancels **Uinsure Bill Protector** or amends the terms of cover or price, *you* will be given at least 30 days written notice which will be sent to *your* last known address. *You* will not have to pay any more premiums but *you* will continue to receive any benefits for a valid claim if *your claim* date was before the policy was cancelled.

## Section five

### The scheme administrators

#### Customer service and complaints

#### The scheme administrators

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Direct Group Limited has been appointed as the scheme administrator for **Uinsure Bill Protector**. It has been chosen because it is a specialist in this type of insurance with many years of experience and will give *you* all the help and advice *you* need throughout the lifetime of *your* policy.

The scheme administrators will be there to

- answer any questions *you* have about the insurance cover and terms,
- collect *your* monthly premiums and
- deal with *your* claim.

The contact details are

Direct Group Limited  
Direct House  
4 Sidings Court  
Doncaster  
DN4 5NU

Telephone: 0844 412 4095 (for *your* protection telephone calls may be recorded or monitored)

If *you* have any disability that makes communication difficult, please tell them and they will be pleased to help.

#### Customer service

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The scheme administrator is dedicated to providing *you* with a high quality service at all times. Every effort will be made to sort out any enquiry or problem that *you* may have.

#### How to complain

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If *you* wish to make a complaint about any aspect of *your* policy, the monthly premiums or about any claims matter please contact the scheme administrator, contact details are shown above.

If *you* are not happy with the way *your* complaint has been dealt with *you* can refer the matter to Lloyd's at

Policyholder & Market Assistance  
Lloyd's Market Services  
One Lime Street  
London EC3M 7HA.

Phone: 020 7327 5693      Fax    020 7327 5225      E-mail [complaints@lloyds.com](mailto:complaints@lloyds.com)

Complaints that cannot be resolved by Lloyd's may be referred to

The Financial Ombudsman Service  
South Quay Plaza, 183 Marsh Wall  
London, E14 9SR.

Phone: 0845 080 1800.

Further details will be provided at the appropriate stage of the complaints process.

The scheme administrator has internal complaints handling procedures which *you* can ask to see.

This complaints procedure does not affect *your* legal rights.

## Section six

### The insurer

#### Regulatory and legal information

##### The insurer

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**Uinsure Bill Protector** is underwritten by Lloyd's Syndicate 5820.

The Lloyd's Managing Agent for Lloyd's Syndicate 5820 is Jubilee Managing Agency Limited. It is entered in the Register of Lloyd's Managing Agents. Registered Office: Sidcup House, 12-18 Station Road, Sidcup, Kent DA15 7EX . Registered in England number 04434499

##### Financial Services Authority Registrations

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Jubilee Managing Agency is authorised and regulated by the Financial Services Authority and entered on its register under number 226696.

Uinsure Limited is authorised and regulated by the Financial Services Authority and entered on its register under number 463689.

The scheme administrator, Direct Group Limited is authorised and regulated by the Financial Services Authority and entered on its register under number 307332.

##### The Financial Services Compensation Scheme

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The insurer is covered by the Financial Services Compensation Scheme. *You* may be entitled to compensation from the Scheme if the insurer is unable to meet its obligations to *you* under this contract.

If *you* are entitled to compensation under the Scheme, the level and extent of the compensation would depend on the nature of this contract. Further information can be obtained from The Financial Services Compensation Scheme, 7<sup>th</sup> Floor Lloyds Chambers, Portsoken Street, London, E1 8BN Tel: 020 7892 7300 Website: [www.fscs.org.uk](http://www.fscs.org.uk)

##### Data Protection Act

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The insurer will collect certain information about *you* in the course of considering, processing and managing *your* insurance cover, administering claims and fraud prevention. *Your* information may be passed to a qualified medical practitioner, other insurers, reinsurers and loss adjusters and to Uinsure for these purposes. This may involve the transfer of *your* information to countries that do not have data protection laws. *You* may have the right of access to, and correction of, information that is held about *you*. Please contact the insurer's Compliance Officer to exercise these rights.

Some of the information may be classed as 'sensitive'. This is information about physical and mental health and employment records. Data Protection laws impose specific conditions in relation to sensitive information including, in some circumstances, the need to obtain *your* explicit consent before the insurer processes the information. When *you* apply for this insurance, consent is given to the processing and transfer of information described in this notice. Without consent the insurer would not be able to offer this insurance.

##### Law that applies to this policy

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Whilst the parties to this insurance are free to choose the law applicable to it, the insurer proposes the law of England and Wales and in the absence of any other agreement, the law of England and Wales will be used.

##### Safeguarding your premium and claim payments

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All premium payments from *you* and due to the insurer for this policy will be held by the scheme administrator on behalf of the insurer. The scheme administrator will also hold any premium refund that is due to *you* from the insurer together with any claim benefits that are due to *you* from the insurer.

In this capacity the scheme administrator is acting as an authorised agent of the insurer. This means that once a premium is paid to the scheme administrator it is deemed to have been received by the insurer and that all claims benefits and premium refunds from the insurer are not deemed to have been paid until *you* have actually received them.

## **Certification**

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This policy wording and *your* schedule of cover are *your* full insurance policy documents. They are also evidence that *you* are covered under the Master Policy. The Master Policy is the contract that governs this insurance and which the insurer has agreed with the Uinsure. A copy is available upon request. In return for payment of *your* premiums the insurer will insure *you* in accordance with the terms and conditions stated in these documents and which are confirmed in the Master Policy.

## Section seven

### Policy definitions

The words and phrases listed below have the same meaning wherever they appear in this policy and are shown in *italic type*.

“*carer*” being a full-time carer and in receipt of Carer’s Allowance from the Department of Work and Pensions.

“*claim date*” the date *your* claim starts

- for *disability* claims it is the date *you* are first issued with a medical certificate by a *doctor*
- for *unemployment* claims it is the date *you* first register with an Employment Office in the United Kingdom (or any other Office acceptable to the insurer) as *unemployed*. Please note that if *you* receive a payment instead of completing a notice period *your* claim cannot start until that notice period ends, whether or not *you* have already registered as *unemployed*. If *your unemployment* claim is due to *you* giving up *work* to become a full-time *carer*, it is the effective date shown on *your* Award Notice.

“*claim waiting period*” the period of 30 days in a row of *disability* or *unemployment* immediately following the *claim date*. During this period *you* will not receive any payment of *monthly benefit* and if *you* return to work before the end of the 30 day period *you* will not be entitled to any benefit.

“*compulsory redundancy*” receiving written notice from *your* employer that the *permanent contract* of employment *you* held is being terminated against *your* wishes because either:

- *your* employer has stopped trading (or soon will do) either totally or just in the place they employed *you*;  
or
- *your* employer has decided that the specific job *you* do for them is (or soon will be) no longer needed. (Please remember that if *you* take voluntary redundancy *you* will not be able to claim.)

“*disability/disabled*” being unfit to *work* because of an accident or illness. This must be certified by a *doctor* and leave *you* totally unable to carry out *your* normal occupation.

“*doctor*” a Registered Medical Practitioner in the United Kingdom or any other physician acceptable to the insurer.

“*fixed-term contract*” a formal written contract of employment which is for a specific term.

“*maximum claim amount*” the most *you* will be paid for each new and separate claim which is twelve *monthly benefits*.

“*monthly benefit*” the monthly amount payable when *you* have a valid claim. The amount will be confirmed in *your* personal Insurance Schedule. Also see *benefit limits* in Section one.

“*permanent contract*” a formal written open ended contract of employment with no specific termination date and which could continue until *you* retire.

“*renewal date*” the date one year after the *start date* of *your* policy when the scheme administrators will contact *you* to agree a further *period of cover*.

“*self-employment/self-employed*” a sole trader, director or partner or a shareholder of 25% or more in a company which employs *you*.

The insurers will also consider *you* to be *self-employed* if *you* are employed in a company or business where *your* husband, wife, person *you* live with as if *you* were married, civil partner, parent, child, brother or sister meet any of these conditions.

“*start date*” the date *your* cover starts as shown on *your* personal Insurance Schedule.

“*Unemployment/unemployed*” being without paid *work* through no fault of *your* own. This includes giving up *work* to become a *carer*.

“*work/working*” receiving payment for working at least 16 hours per week under a *permanent contract* or a *fixed-term contract*. It does not include *self-employment*.

*“you/your”* the person covered by this insurance, who must be eligible and specified in the personal insurance schedule.