

Sick Pay Individual Policy Summary

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This policy summary does not contain the full terms and conditions of the policy; these can be found in the policy wording.

Who is the insurer?

The insurance is underwritten by Lloyd's Syndicate 4444 which is managed by Canopius Managing Agents Limited. Canopius Managing Agents Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority.

Can I take out this cover?

To be eligible for the cover on the start date you must:

1. Be over 18 and under 61 years of age; and
2. Be living permanently and lawfully in the UK
3. Be paid for actively working more than 16 hours per week. Any person that is self-employed must be registered with HMRC for tax purposes.

Policy can be renewed up to the age of 68.

You may also include your partner, subject to the relevant premium being paid, if applicable.

What happens if I take out cover and then change my mind?

You can cancel your policy within 30 days of the policy start date or, if later, 30 days of the date you receive this Policy Document. We will refund any premiums you have paid as long as you have not made a claim and do not intend to make a claim.

You can cancel your policy at any other time but you will not be entitled to any refund of the premium you have already paid. For annually paid policies, at our discretion, we may return part of your premiums based on the date you cancelled the policy subject to no known or reported claims.

You may cancel the policy by writing to Compass Underwriting Limited at 50 Mark Lane, London EC3R 7QR

What cover does the policy provide?

The Sick Pay plan provides a maximum monthly income up to £2000, £1,500, £1,000 or £500 for up to six months if you are unable to work for longer than 30 days as a result of ill health or an accident. The maximum monthly benefit cannot exceed 85% of your gross monthly salary. You can see the full details of this in Section 3 "What is Covered" section of the policy wording.

Level of Cover	Monthly Benefit	Maximum Benefit
1	Up to £2,000 per month for up to 6 months or 85% of your gross monthly salary whichever is the lesser.	£12,000
2	Up to £1,500 per month for up to 6 months or 85% of your gross monthly salary whichever is the lesser.	£9,000
3	Up to £1,000 per month for up to 6 months or 85% of your gross monthly salary whichever is the lesser.	£6,000
4	Up to £500 per month for up to 6 months or 85% of your gross monthly salary whichever is the lesser.	£3,000

Please see your Certificate of Insurance for confirmation of the level of Sick Pay cover you have chosen.

Are there any limitations on the benefits?

There is an exclusion for any claim that arises out of any medical condition that existed (including treatment, monitoring, referral, consultations or whilst undergoing tests) in the 3-year period prior to the start date of your policy. This exclusion will not apply if you remain symptom free and do not need to seek treatment or medical advice for a continuous period of 24 months. You can see the full details of this in Section 4 "What is Not Covered" of the policy wording.

What am I NOT covered for under the policy?

The following are some of the key exclusions however you can see the full details of this in section 4 "What is Not Covered" of the policy wording.

We will not pay benefit if treatment is needed as a direct or indirect result or consequence of:

- For any back-related condition unless there is radiological evidence of a medical abnormality or a visible wound or bruising, or a doctor or consultant certifies that this is the only condition which prevents you from attending your usual place of employment.
- For any claim for psychological, psychotic or mental disorders unless a consultant certifies that this is the only condition which prevents you from attending your normal duties at your normal place of employment.
- hazardous sports (please see Section 4.F "What is Not Covered" for full details in your policy wording)
- Where your blood alcohol limit exceeds 80mg per 100ml of blood, solvent abuse or you deliberately taking an overdose of drugs, whether lawfully prescribed or otherwise, you taking controlled drugs otherwise than in accordance with a lawful prescription.

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- If an insured person was engaging in any sport as a professional or semi-professional.
- For any surgery or treatment that is not medically necessary, cosmetic surgery, reversing cosmetic surgery or any corrective treatment as a result of previous cosmetic surgery.
- For any claim resulting from an insured person committing suicide or attempting to commit suicide, or deliberately injuring themselves or putting themselves in danger (unless they were trying to save another person's life).
- For any claim arising from war, invasion, acts of foreign enemies, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection, military or usurped power, riot or civil commotion, terrorist activity of any kind.
- For any claim resulting from ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel.

You are not covered for illness benefits until after the relevant qualifying period of 90 days from the cover start date has passed. A 14 day qualifying period applies to an accident.

How long does the policy run for?

This policy is an annually renewable plan lasting for 12 months from the start date.

Your cover will end when the first of the following happens:

- you die;
- your policy is due for renewal after you reach the age of 68;
- you stop permanently residing in the UK;
- you or we cancel this policy as shown in the policy wording; or
- you stop paying your premium;

whichever is earlier.

How do I claim?

If you need to make a claim, please write to Compass Underwriting Ltd at: 50 Mark Lane, London EC3R 7QR or you can phone the claims desk on freephone 0800 032 7775 or go to www.getesmi.co.uk to get a claim form.

You must confirm proof of earnings at point of claim. To confirm proof of earnings you must either supply us with 4 months of payslips or if you are self-employed, you must provide at least two years of certified accounts or inland revenue approved tax returns, prepared by a professionally qualified accountant, to verify that you or they have been actively working for an average of 16 hours each week.

How do I make a complaint?

We always try to provide an excellent standard of service. But, if you want to complain it is important you know we are committed to providing you with an exceptional level of service and customer care. We realise that things can go wrong and there may be times when you feel that we have not provided the service you expected. When this happens we want to hear about it so that we can try to put things right.

Who to contact: so that your complaint is dealt with as quickly and efficiently as possible, you will need to make sure that:

- you are talking to the right person; and
- you are giving them the right information.

When you contact us

- Please give your name and phone number.
- Please give your policy or claim number and the type of policy you hold.
- Please explain the reason for your complaint clearly and briefly.

Step One:

Please contact: The Customer Service Manager, Compass Underwriting Limited, 50 Mark Lane, London EC3R 7QR. Tel: 0800 032 7775 (please note that calls are recorded). Email: info@compassuw.co.uk

Step Two:

If you remain dissatisfied with the outcome of your complaint please contact:

Complaints at Lloyd's, Fidentia House, Walter Burke Way, Chatham Maritime, Kent, ME4 4RN

Tel: +44 (0)20 7327 5693 Email: complaints@lloyds.com

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Step Three:

If it is not possible to reach an agreement, you have the right to make an appeal to the Financial Ombudsman Service. you may contact the Financial Ombudsman Service, Exchange Tower, London E14 9SR.

Telephone: if calling from a landline 0800 023 4567 or if calling from a mobile 0300 123 9123.

Fax: 020 7964 1001. Email: complaint.info@financialombudsman.org.uk

The above complaints procedure is in addition to your statutory rights as a consumer. For further information about your statutory rights contact your local authority Trading Standards Service or Citizens Advice Bureau.

Online Dispute Resolution

Alternatively, If you purchased your insurance online, please note that you can, if you wish, also submit your complaint via the Online Dispute Resolution (ODR) Platform set up by the European Commission. This service has been set up to help residents in the European Union (EU) who have bought goods or services online, get their complaint resolved. You can access the ODR Platform by clicking on the following link: <http://ec.europa.eu/consumers/odr/>

This does not affect your right to submit your complaint following the process above. Please note that under current rules the European Commission will ultimately redirect your complaint to the Financial Ombudsman Service (FOS).

Full details are shown in Section 9 "How to Make a Complaint" of the policy wording.

Other Important Information

This insurance is underwritten by Lloyd's Syndicate 4444, which is managed by Canopus Managing Agents Limited. Registered Office: Canopus Managing Agents Limited, Gallery 9, One Lime Street, London, EC3M 7HA. Registered in England no. 01514453.

Canopus Managing Agents Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Firm Reference: 204847.

This Insurance is administered by Compass Underwriting Limited.

Compass Underwriting Limited is a private company limited by shares incorporated in England under registered number 3332314 and is authorised and regulated by the Financial Conduct Authority under register number 304908 which can be checked at www.fca.org.uk/firms/systems-reporting/register/search or by calling them on 0800 111 6768.

Unless some other law is agreed in writing, this policy is governed by English law. If there is a dispute, it will only be dealt within the courts of England or of the country within the United Kingdom in which your main residence is situated.

In accordance with the Disability Discrimination Act 1995 we are able to provide upon request a text phone facility, audio tapes or large print documentation. Please advise us if you require any of these services to be provided so that we can communicate in an appropriate manner.

A copy of our complaints procedure is available on request from the address above.

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