

PLAN & PROTECT

BODY COVER TERMS & CONDITIONS BOOKLET
(PPBC D 2020)



SCOTTISH WIDOWS

CONTACTING US



If you have a question about your policy, please call us on:

0345 608 0378



Or write to us at:

**SCOTTISH WIDOWS LIMITED, 15 DALKEITH ROAD,
EDINBURGH, EH16 5BU**

If you ever wish to complain, please refer to 'How to Complain' on page 5.

CLAIMS



If you need to make a claim, please refer to 'How to Claim' on page 3 and call us on:

0345 601 4839

We are open from 9am to 5pm, Monday to Friday. Calls may be recorded and monitored to help us improve our service.

You can also make a claim using the online claim form on our website.

It will help if you can quote your policy number (shown on your policy schedule) when you contact us.



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WELCOME TO PLAN & PROTECT

THIS BOOKLET TELLS YOU HOW YOUR PLAN & PROTECT BODY COVER INSURANCE WORKS. YOU SHOULD READ THIS ALONGSIDE YOUR POLICY SCHEDULE, WHICH GIVES MORE DETAILS OF THE COVER YOU HOLD.

PLEASE KEEP THESE DOCUMENTS IN A SAFE PLACE. IT MIGHT ALSO BE A GOOD IDEA TO LET YOUR FAMILY KNOW YOU HAVE THIS COVER.

If you suffer one of the illnesses the policy covers between the start and end dates on your policy schedule, a claim can be made. You will need to live for seven days or more after the diagnosis to be able to claim.

When we use the word 'we', 'us' or 'our', we mean Scottish Widows Limited. When we say 'you' or 'your', we mean the person named in the policy schedule.

This is a contract between us and you, or anyone to whom you transfer the legal ownership of the policy. Nobody else has any rights under this contract.

Just to let you know, we'll always communicate with you in English. You can ask for information from us in large print or braille.

PLEASE DOUBLE-CHECK YOUR INFORMATION

Please check the details on your application summary as it's really important that you gave us honest and complete information when you took out this policy.

You should also check your policy schedule to make sure both your personal information and the details of your cover are correct.

If any information you gave us wasn't honest or complete, we may not pay a claim or we may reduce the amount we pay. Please see 'What will stop us paying out?' on page 4.



HOW TO CLAIM

If the person covered by this policy suffers one of the illnesses it covers, call **0345 601 4839** or let us know through the claim form on our website. Please see page 6 for 'What illnesses are covered?'

We'll take the person making the claim through the claim process as quickly as possible. We'll need to see your birth certificate and confirmation of the diagnosis of the illness from a consultant specialising in the relevant area of medicine. We could also ask you to attend a medical examination.

We may also have other requirements. For example, we may ask your doctor for information that shows you gave honest and complete answers to our medical questions when you took out the policy. However, we'll never ask for more information than we believe is reasonable to assess the claim.

We'll also need to make sure we pay out to the right person.



When we pay a claim

If you're claiming for early stage cancer

Once we've all the information we need to accept that you're suffering from an 'early stage cancer', we'll pay an 'early help payment' of £5,000. You'll find more information on early stage cancer in 'What illnesses are covered?' on page 6. We also explain on that page some restrictions that apply.

The policy will continue after we pay an early help payment. This means you can make a further claim in future.

If you've got more than one Plan & Protect policy, we'll only pay one early help payment across all of your policies.

If you're claiming for another illness

Once we've all the information we need to accept that you're suffering from one of the illnesses covered, we'll pay the cover amount as shown in your policy schedule. This doesn't apply to early stage cancer. See 'What will be paid out?' below.

The illnesses we cover are explained in 'What illnesses are covered?' on page 6.

Only one claim will be paid, and once we've paid it, the policy will end.

All claims

We'll pay the money to you, unless you've transferred the legal right to any money from the policy (for example, by using a trust). If that's the case, we'll pay it to whoever has that right. We'll need proof they're entitled to the money before we can pay it.

WHAT WILL BE PAID OUT?

For an early stage cancer claim, please see 'If you're claiming for early stage cancer' above.

For all other claims, we'll pay the cover amount as shown in your policy schedule.

What will stop us paying out?

If you live for less than seven days after the illness was first diagnosed, we'll pay nothing and the policy will end.

We might not pay all of a claim, or we may pay nothing if:

- any information given to us turns out not to be honest or complete, or
- we don't receive all the information we ask for at the time of a claim, or
- we believe that your illness isn't one of those covered – in this instance your policy will continue.

If we pay less, it will reflect the cover we could have provided for your monthly payments had we been given honest and complete information at the start.

If we wouldn't have provided any cover, we'll pay nothing and we'll cancel the policy. We may not refund your payments, particularly if we reasonably believe you deliberately provided information that was incomplete or inaccurate.

CAN I HAVE MORE THAN ONE PLAN & PROTECT POLICY?

Yes, you can take out more than one policy. However, there is a limit on how much Body Cover you can have across all Plan & Protect policies. The limit is £500,000, but only up to £250,000 of that can be Body Cover taken out online.

If this policy takes you over either limit, we'll cancel the policy, refund any payments you've made and we won't accept any claim under it.



HOW DO I PAY FOR MY POLICY?

We'll collect the payments shown on your policy schedule each month by Direct Debit from a UK bank account in your name.

If we're not able to collect a payment, we'll get in touch and ask you to pay it.

If you miss three payments in a row, we'll cancel your policy three calendar months from the date of the first missed payment and you'll get nothing back.

If a claim is made before any missed payment is made up, we'll take away the missed payments from the amount we pay.

MAKING CHANGES

You can't make changes to your cover or to how much you pay, but you can ask us to change the date we collect your payments.

We'll need to know if you change your name, address or bank account details.

Changes we can make

We can make reasonable changes to your policy to allow for changes in the law, regulation or tax rules which affect you, us, or your policy.

If there's an error in your policy documents and it's fair to correct it, we can do that too.

We'll let you know 90 days before we make any change unless it's not practical to do so. If that ever happens, we'll tell you as soon as possible, which might be after we make the change.

CAN I CANCEL MY POLICY?

You can cancel your policy at any time.

If you cancel within 30 days of receiving your policy documents, we'll refund everything you've paid us. After this, you won't get any refund. Your policy has no cash-in value at any time.

To cancel your policy, call **0345 608 0378** or write to us at the address at the front of this booklet.



LAW THAT APPLIES TO THIS POLICY

The law that applies to this agreement will depend where you were resident when you took out the policy. For example, if your main home was in Scotland when you took out the policy, then Scots Law will apply.

HOW TO COMPLAIN

If something's gone wrong, we'd like the chance to put it right. Please call us on **0345 608 0378**.

Or write to us at the address at the front of the booklet.

If you're not happy with our response, or if we haven't responded after eight weeks, you can complain to the Financial Ombudsman Service. This is an impartial service which can make a decision about your complaint and tell us what to do in response.

Write The Financial Ombudsman Service
Exchange Tower London E14 9SR

Telephone **0800 023 4567**

Email **complaint.info@financial-ombudsman.org.uk**

Website **www.financial-ombudsman.org.uk**

Taking a complaint to the Financial Ombudsman Service doesn't affect your right to take legal action against us.

Alternatively, you can complain using the European Online Dispute Resolution (ODR) platform at **www.webgate.ec.europa.eu**. The ODR platform will pass on the complaint to the Financial Ombudsman Service.



WHAT ILLNESSES ARE COVERED?

Our Plan & Protect Body Cover is designed to cover you if you fall seriously ill with one of the illnesses covered by this policy. For each condition we cover, we've written a clear medical definition. This explains the criteria the illness should meet before the policy pays out. These definitions include medical terms that you may not be familiar with. If you think you have a valid claim, please contact us using the contact details at the start of this booklet. We'll be able to advise on whether you're covered. You could also show these medical definitions to your doctor who will be able to help.

Cancer

Only cancers which meet the following definitions are covered.

- **Invasive cancer**

A definite diagnosis made by your consultant physician of invasive cancer, evidenced by the uncontrolled growth of malignant cells and invasion of tissue. This also includes leukaemia, sarcoma, and lymphoma.

- **Skin cancer**

Malignant melanoma that has invaded beyond the outer layer of the skin (epidermis) or skin cancer that has spread to your lymph glands or distant organs.

- **Prostate cancer**

Prostate cancer with a TNM classification of T2bNOMO or above or a Gleason Score of 7 or above.

- **Early stage cancer**

An **early stage cancer** is one of the following:

- **Early stage cancer treated with surgery (other than non-invasive skin cancer or low-grade prostate cancer – set out below)**

Cancer in situ diagnosed by your consultant physician that has been treated by surgery to remove the tumour.

Any tumours treated with radiotherapy, laser therapy, cryotherapy, cone biopsy, LLETZ, or diathermy treatment are not covered.

- **Non-invasive skin cancer**

Malignant melanoma which is confined to the outer layer of skin (epidermis).

- **Low-grade prostate cancer**

Undergoing treatment for a malignant tumour (cancer) of the prostate. The cancer must be classified as having a Gleason Score between 2 and 6 inclusive and have a TNM classification between T1NOMO and T2aNOMO.

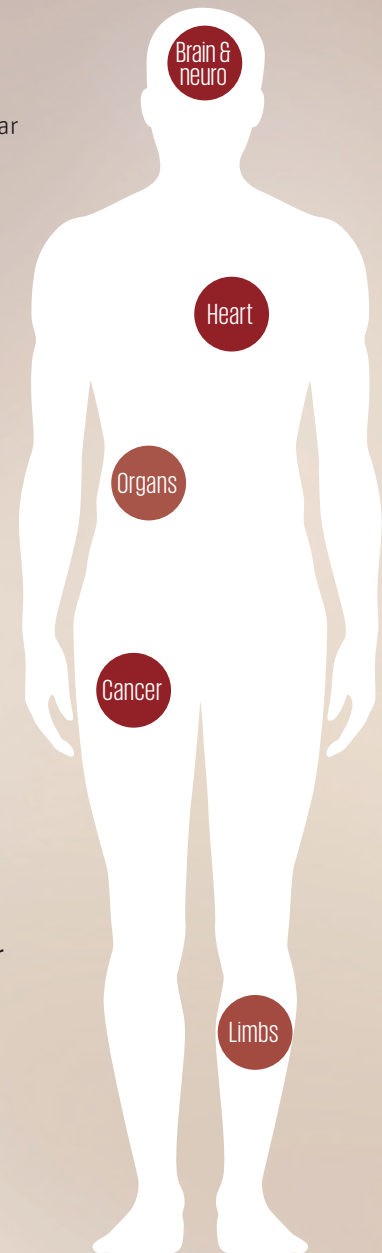
Restrictions for an early stage cancer claim

- We'll pay an early help payment for the first claim we accept for this type of cancer.

We'll only accept a further claim for this type of cancer if a different organ or a different type of tissue is affected from before.

For example, if we've previously paid for cancer in situ of a breast, we won't pay a later claim for cancer in situ of either breast. But we could pay a further early help payment for cancer in situ of the bowel.

- If you've got more than one Plan & Protect policy, we'll only pay one early help payment across all of your policies. For example, if you've got two policies and we accept a claim for 'non-invasive skin cancer', we'll only pay one early help payment for that claim. We won't pay twice.



Heart

- **Heart attack** – a definite diagnosis of a heart attack by your consultant physician confirmed by the following:
 - New blood test changes showing heart damage and,
 - New ECG changes
- **Heart surgery** – undergoing any of the surgeries listed below:
 - Coronary artery bypass surgery
 - Heart valve replacement or repair
 - Open heart surgery (cutting through the breastbone) to correct any heart abnormality
 - Aorta graft surgery
 - Inserting a defibrillator after cardiac arrest

Organs

- **Organ Transplant**
Receiving from a donor or being accepted on an official transplant list for any of the listed transplant surgeries.
 - Heart
 - Kidney
 - Liver (or whole lobe of the liver)
 - Lung (or whole lobe of the lung)
 - Pancreas
 - Bone marrow

You will also be covered if you meet the criteria for the official transplant list, but you are too ill or choose not to be placed on the list.
- **Kidney failure**
If both of your kidneys fail to function, resulting in permanent dialysis treatment.

Limbs

- **Paralysis**
Total and irreversible loss of muscle function to the whole of any one limb.
- **Loss of hand or foot**
Permanent physical severance of either your hand or your foot at or above the wrist or ankle joint.

Brain & neurological system

- **Brain**
A definite diagnosis by your consultant physician of any of the following conditions, resulting in brain damage with ongoing symptoms, supported by the relevant scan and/or test results.
 - Stroke
 - Traumatic Head Injury
 - Encephalitis
 - Bacterial Meningitis
- **Benign brain tumour**
A definite diagnosis by your consultant physician of a benign (non-cancerous) tumour or cyst originating from the brain, cranial nerves or meninges within the skull.

Tumours or cysts in or on the pituitary or pineal glands are not covered.
- **Dementia**
A definite diagnosis of Dementia or Alzheimer's disease where there is permanent loss of the ability to remember, reason, understand and express thoughts.
- **Neurological**
A definite diagnosis made by your consultant physician of any of the following conditions, which must be supported by the relevant scan and/or test results.
 - Multiple sclerosis (MS)
 - Parkinson's Disease
 - Motor Neurone Disease (MND)
 - Parkinson's Plus Syndrome/Atypical Parkinsonism
 - Creutzfeldt-Jakob Disease (CJD)
 - Devic's Disease





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