

ChildCare Personal Accident Insurance



POLICY SUMMARY

The purpose of this policy summary is to help an insured person understand the insurance by setting out the significant benefits, conditions and limitations of the group personal accident policy. Please read the group policy document for a full description of the terms of the insurance, including explanations of the policy definitions and refer to the schedule for the specific policy benefits, sums insured and the operative time which is available from the group policyholder. This policy summary does not form part of the policy document and does not contain the full terms of the policy. The full terms of the policy can be found in the policy document.

Froup policyholder

This insurance is provided by AIG Europe Limited Wallace High School

Purpose of the insurance

This insurance provides cover for bodily injury as a result of an accident which occurs during the operative time of cover and period of insurance that results in death, permanent disabilities, paralysis from the neck down, brain damage, permanent facial scarring, dental and medical expenses as described below.

Significant product features, benefits, limitations and what is not covered

The cover provided is subject to certain terms, conditions and limitations. The table below sets out the significant features of the cover and the conditions and limitations that apply. To ensure the group policy is suitable, you are advised to read the group policy wording which sets out all of the features, benefits, conditions, limitations and what is not covered. The cover should be reviewed periodically to ensure it continues to meet the needs of insured persons. The amounts shown below are the maximum amounts available. The policy schedule will show all the amounts payable.

Significant covers	Significant features and benefits	Policy limits	Policy reference
Section A – Catastrophic injuries	5		
Paralysis from the neck down Brain damage	Provides lump sum compensation following disablement caused by injuries resulting from an accident.	£75,000 £75,000	Page 4 – Policy definitions Page 8 – What is not covered Page 9 – Benefit limitations
Section B – Permanent disabiliti	es		
Permanent total disability Loss of sight in one or both eyes Loss of one or both hands or feet Loss of hearing in one or both ears Loss of speech Surgical removal or loss of: One lung One kidney The spleen	Provides lump sum compensation following disablement caused by injuries resulting from an accident.	£75,000 maximum £60,000 maximum £60,000 maximum £22,500 £15,000 £2,250 £1,125	Page 4 – Policy definitions Page 8 – What is not covered Page 9 – Benefit limitations
Lower jaw Loss of four fingers Loss of one thumb Loss of each finger Loss of toes Loss of use of shoulder, elbow, hip,		£10,500 £15,000 maximum £11,250 £3,750 maximum £15,000	
knee, ankle or wrist Other disabilities not specified above		£12,000 maximum £60,000	
Section C – Death	Provides lump sum compensation following death resulting from an accident that occurs within 24 months of the accident.	£7,500	Page 4 – Policy definitions Page 8 – What is not covered Page 9 – Benefit limitations
Section D – Permanent facial scarring	Provides lump sum compensation following facial scarring	maximum £750	Page 4 – Policy definitions Page 8 – What is not covered Page 9 – Benefit limitations
Section E – Burns	Provides lump sum compensation following burns affecting:		
	27% or more of the body's surface 18% - 26% of the body's surface 9% - 17% of the body's surface 4.5% - 8% of the body's surface	£7,500 £6,000 £4,500 £2,250	Page 4 – Policy definitions Page 8 – What is not covered Page 9 – Benefit limitations
Section F – Dental expenses	Up to £500 for each tooth for dental costs, examination and treatment not including repairs or charges paid under dental care contracts.	maximum £750	Page 4 – Policy definitions Page 8 – What is not covered Page 9 – Benefit limitations
Section G – Medical expenses	Expenses incurred in connection with a valid claim under Sections B, D or E of the above benefits.	maximum £375	Page 4 – Policy definitions Page 8 – What is not covered Page 9 – Benefit limitations

Significant product features, benefits, limitations and what is not covered continued...

What is not covered

We will not pay for bodily injury resulting from: war; intentional self-injury; suicide or attempted suicide; participation in any airborne activities, other than as a fare-paying passenger on a commercial flight; committing or attempting to commit a crime; taking a drug or drugs other than as prescribed by a doctor; taking a drug or drugs to treat drug addiction; being under the influence of alcohol or solvents; sickness or disease; any gradually operating cause; bodily injury resulting in a diagnosis of fibromyalgia, myalgic encephalomyelitis, chronic fatigue syndrome, post-traumatic stress disorder or other anxiety disorder, any mental disorder or any disease of the nervous system.

Page 8 – What is not covered

Page 9 - Benefit limitations

An insured person can only claim under one of the Sections A, B or C.

If an insured person dies within 26 weeks of the date of the accident we will only pay the benefit under Section C.

Law and jurisdiction

The group policy will be governed by English law, and the group policyholder and we agree to submit to the courts of England and Wales to determine any dispute arising under or in connection with it, unless the group policyholder resides in Scotland, Northern Ireland or the Isle of Man, in which case the law applicable to that jurisdiction will apply and its courts will have exclusive jurisdiction, unless agreed to the contrary by the group policyholder and us before the start date of cover.

The terms and conditions of the policy will only be available in English and all communication relating to the policy will be in English.

Period of insurance

Cover for an insured person starts from the date they were included in the group policy. Cover remains in force until the end of the period of insurance as specified in the group policy schedule provided that the premium is paid or may stop earlier as shown in the 'Start and finish of cover for an insured person' section of the group policy.

Rights of cancellation & Cooling off period

We may cancel the policy by giving 30 days notice in writing to the group policyholder at the group policyholder's last known address. The group policyholder may cancel the policy by giving 30 days notice in writing to us. The group policyholder is responsible for notifying insured persons that the policy has been cancelled.

Other than as described in the cooling-off period, an insured person may cancel their inclusion in the policy at any time by giving notice to the group policyholder. An insured person has no right to cancel the policy held by the group policyholder, only the right not to be included.

If the premium is paid in advance or is paid by or collected from an insured person, the premium for the period up to the date when the cancellation takes effect will be calculated and any unused portion of the premium that has been paid will be returned to the group policyholder. The group policyholder is responsible for passing any return premium to the insured person if the premium has been paid by them. If the premium is not collected from an insured person, no return will be given to an insured person.

We will not return any premium for an insured person who has made a claim unless the claim is made during the cooling off period.

Cooling off period

Where the insurance does not meet the insured person's needs and they have paid the premium, they can choose not to be covered by the policy by notifying the group policyholder and returning the documentation provided to them within 15 days of the date that the insured person was included or the date upon which the insured person receives their insurance documents, whichever is the later. If the premium has been paid by or collected from an insured person, the premium for the period up to the date when the cancellation takes effect will be calculated and any unused portion of the premium will be returned to the group policyholder, less any claims. The group policyholder is responsible for passing any return premium to the insured person.

Claim notification

We must be notified as soon as reasonably practicable after the accident, by completing a claim form and returning it to us. The claim may be rejected if it is made so long after the accident happens that we are unable to investigate the claim fully or may result in the insured person not receiving the full amount claimed if the amount claimed is increased as a result of the delay. Claims are to be notified to:

Personal Accident Claims Department, AIG Europe Limited, 2-8 Altyre Road, Croydon CR9 2LG.

Tele: +44 (0) 345 602 9429. Email: <u>claimsuk@aig.com</u>

Please quote the name of the group policyholder, the policy number, your name and contact details along with name of the person to whom the claim relates.

Your right to complain

We are committed to providing a first class service at all times, however, we recognise that occasionally the group policyholder or insured person (or parent or legal guardian if the insured person is under 18 years of age) may be unhappy with some aspect of this service. If they are not satisfied with the service they have received, they should contact one of the following.

If the complaint is about a claim, please contact:

Personal Accident Claims Manager, AIG Europe Limited, 2-8 Altyre Road, Croydon CR9 2LG.

Telephone: +44 (0) 345 602 9429 Email: claimsuk@aig.com Online: http://www.aig.co.uk/your-feedback

If the complaint is not about a claim, please contact:

Customer Relations, AIG Europe Limited, 2-8 Altyre Road, Croydon CR9 2LG.

Telephone: +44 (0) 800 012 1301 Email: uk.customer.relations@aig.com Online: http://www.aig.co.uk/your-feedback

The group policyholder should quote their name as shown on the schedule and the policy number. An insured person (or their parent/legal guardian) should quote their surname, initials, and the name of the group policyholder shown on the schedule and the claim number if known.

We will do our best to resolve any difficulty directly with the group policyholder or insured person (or parent or legal guardian if the insured person is under 18 years of age), but if we are unable to do this you may be entitled to refer any dispute to the Financial Ombudsman Service. Using the Financial Ombudsman Service does not affect the right to take legal action. The address is:

The Financial Ombudsman Service, Exchange Tower, London E14 9SR.

Are we covered by the Financial Services Compensation Scheme (FSCS)?

We are covered by the Financial Services Compensation Scheme (FSCS). If we are unable to meet our financial obligations you may be entitled to compensation from the scheme. Further information about compensation scheme arrangements is available from the FSCS. Please see the policy for details.

This Insurance is underwritten by AIG Europe Limited which is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority (FRN 202628). This can be checked by visiting the FS Register (http://www.fca.org.uk). Registered in England: company number 1486260. Registered address: The AIG Building, 58 Fenchurch Street, London EC3M 4AB, United Kingdom.

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