

Your guide to the Zurich Life Protection portal

Financial Adviser Guide



Purpose

Our guide to the adviser portal is designed to equip new and existing advisers with everything they need to know when navigating around the Zurich Life Protection platform.

It features a series of step-by-step guides with handy tips to help you make the most of navigation, ensuring we're always easy to do business with.

From information about best practice and getting started post registration, to quoting and applying, and all the way through to servicing and retention.

We've included links to useful tools, guides and resources meaning everything you need is right here, all in one place.

We make regular improvements to our platform, products and ways of working based directly on feedback from our customer and adviser community. This means that some of the content or guidance may change over time. If you need more targeted support or assistance please reach out to your regular Zurich contact for additional help or take a look at our range of webinars for more information.

What's inside?



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Handy Links and Bookmarks

What it is	What it does	Hyperlink
Zurich for Intermediaries	Zurich's intermediary website.	Zurich for intermediaries (zurichintermediary.co.uk)
Webinar programme & registration	A range of seasonally led CPD qualifying webinar programmes.	Zurich Webinar Programme 2025 (office.com)
Document library	Provides a range of different documents including policy T&C's, blank trust deeds, sales aids and key facts across Zurich's product range.	Document Library Zurich for intermediaries (zurichintermediary.co.uk)
Advice Matters	Useful articles and information including new product launches and improvements designed to keep you updated.	Zurich Advice matters Zurich for intermediaries (zurichintermediary.co.uk)
Contact Information	Contact details for the Zurich Life Protection Team by area.	Contact Zurich for Advisers (zurichintermediary.co.uk)
Tools & guides	A broad range of tools, video guides and calculators designed to help.	Tools and guides Zurich for intermediaries (zurichintermediary.co.uk)
Adviser support	Step by step guides and FAQ's covering each step of the quote, apply, issue and servicing steps within the journey.	Adviser Protection Support Zurich for intermediaries (zurichintermediary.co.uk)
Underwriting	Contains a range of useful information on our underwriting approach, philosophy and need to knows.	Underwriting Zurich for intermediaries (zurichintermediary.co.uk)
Large case underwriting	Targeted at high sum assured/ high net worth business these pages cover everything you need to know & how to get in touch.	Large case underwriting Zurich for intermediaries (zurichintermediary.co.uk)

Handy Links and Bookmarks

What it is	What it does	Hyperlink
Zurich Customer Website	Offering a range of useful information, resources and FAQ's our customer website includes a series of easy-to-use online forms & targeted live chat support.	Manage my Life Insurance Zurich UK
Zurich Customer Portal	The customer portal offers always on secure self-serve access allowing customers to view and download key information about their policy with the flexibility to make a range of changes online.	If your life insurance policy starts with 'PR' Zurich

Best practice when using our online services.

A little bit of knowledge can go a long way, making it easier for you to make the most of our online services.

Here's how:

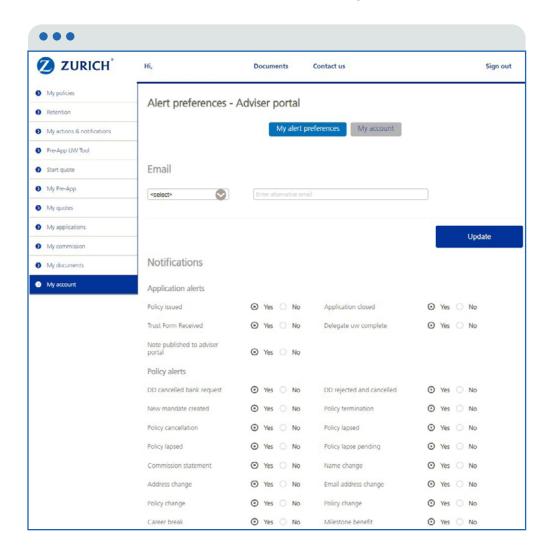
- Never share usernames or passwords when accessing our portal. Sharing passwords and user ID's not only compromises your client's data security, it can materially impact system responsiveness resulting in timeouts and errors when attempting to retrieve applications and other portal requests.
- Clearing your cookies, caches and browsing history can help improve responsiveness of web pages by reducing some of the load on your device.
- Keeping your software and device security regularly updated is important to make sure you have the best possible experience and to keep your devices (and data) protected.
- Use the latest browser to improve responsiveness and reduce page load times. Our platform is optimised for use on Microsoft Edge.
- A networked connection tends to be more stable than mobile or even Wifi, so where you can, connect this way.
- Avoid storing old links and URL's. Because we regularly release upgrades to our platform, using old links or stored documents means you may not be benefiting from the very latest versions available.
- And just so you know, in peak periods of activity the amounts of data being processed may affect responsiveness so stick with us, it just means lots of people are using our portal (it's great to be popular).

Let's get started – using our services for the first time & setting up your account

Before you do anything else, make sure you check your details and preferences in the 'My Account' section of your portal. This is really important because it dictates if (and how) you'll receive time critical alerts on actions needed or and notifications on progress of your applications.

Here's how:

- First click on the blue 'My alert preference' button shown on screen. Notifications in this section are automatically set to 'Yes'. This means you'll receive any policy or application alerts shown unless you explicitly opt out.
 - Once an alert or notification alert is generated, it will be visible in the 'My actions and notifications' section of the menu (we'll cover that in more detail later on).
 - Making sure you're opted in to receive these ensures you'll benefit from time critical updates, including actions which may be required by you in order to progress an application or service a policy.
- Toggling to the 'My account' section of this page using the grey button will show your contact details, the terms of business into which you've entered with us and commission options available.
 - We recommend you check the information we hold in this section is accurate and kept regularly updated. If you need to change your contact details you can simply 'edit' these using the option shown and then 'save' your changes.



Let's get started – using our services for the first time & setting up your account

The 'My actions and notifications' section of your portal is one of the key areas to get really familiar with as it's one you'll use regularly.

Actions – These are usually time critical activities we need you to act on. You'll usually receive an email notifying you an action is needed as well as a portal alert, just to be on the safe side.

Notifications – These are generally updates for awareness. We don't send emails on these to avoid clogging up your inbox so it's really important to check your 'My actions and notifications' menu really regularly, especially if you're awaiting an update on the progress of an application and always before calling.



Good to know:

If you'd like notifications to be sent to an alternative email address you can do this by adding a new email address in the 'email' section of this page where indicated and pressing 'update' to save it.

Remember: Once updated, all notifications will be sent to the new email specified so please check it's correct to ensure you continue to receive time critical updates and actions.



Which bit does what?

Menu option	What it does
My policies	Allows you to view information relating to existing policies using either the list displayed or by searching on surname, policy number or status.
Retention	Provides a searchable list of existing policies which are underpaid. This shows the date the policy is expected to go off risk (lapse), the amount of premium outstanding (the 'arrears') and the initial commission at risk if the policy does lapse. This data can be exported to excel if required.
My actions & notifications	Shows a list of policies/applications with corresponding actions or notifications you need to be aware of or take action on. This information can also be exported to excel.
Pre-App UW Tool	Allows you to obtain an indicative view of underwriting decisions and or terms available <i>before</i> applying. Once you've obtained your results, you can choose to 'chat with an expert' to discuss these with one of our Underwriters. You can also view and retrieve them from the 'My pre-app' section of your portal menu.
Start quote	Allows you to obtain a quotation for your client. Once you've completed the quotation, it will be viewable from the 'My Quote' section of your portal menu.
My Pre-App	Allows you to view and retrieve results obtained through the pre-app underwriting tool.
My Quotes	Allows you to view and retrieve any quotes previously undertaken. This section shows the quotation & application references, the product type & life assured details, along with the quote date and expiry.
My applications	Allows you to view and retrieve details of applications you've undertaken, their status and progress. You can also close an application from this section if required. This data is exportable to excel for pipeline management purposes.
My commission	Allows you to view details of commission arrangements on policies issued, including the commission type and basis, date, and amount.
My documents	A document repository containing documents issued in respect of your client's applications/policies stored in PDF format.

Which bit does what?

Menu option	What it does
My account	The 'My alert preferences' section allows you to opt in/out of notifications and alerts relating to new applications and existing policies. You can also choose to amend the email address to which any email alerts are sent in this section. In the 'My account' section you'll see a summary of your details & those of your firm, the terms of business applicable to your firm and commission options available.



Across the top of your screen there are a series of options displayed horizontally as shown above.

The table below explains what they do and where they link out to, just so you know:

What it's called	What it tells you
Documents	This links out to the document library on Zurich for intermediaries where you can find a broad range of documents, resources, and sales aids. You can access this here: Document Library Zurich for intermediaries (zurichintermediary.co.uk)
Contact us	This links out to the 'contact us' page on Zurich for intermediaries which provides contact details for the different areas and departments you may need. You can access this here: Contact Zurich for Advisers (zurichintermediary.co.uk)
Sign Out	This signs you out of the adviser portal. You will automatically be signed out of the portal for security purposes after an extended period of inactivity.

What can the tool do?

- The tool will be able to cover **90% of all pre-app enquiries** we previously received by phone.
- It allows you to gain an indicative decision without needing to email our underwriters, saving you time and speeding up the application process for your clients.
- It is fully integrated with our underwriting rules engine, meaning decisions are accurate and always up-to-date.
- It provides decisions on a range of products and benefits, not only the ones you select, helping to provide more protection options for your client.
- Each pre-app case is given a unique reference to help if you would like to discuss the case with us.
- All cases are automatically saved in one simple dashboard under 'My pre-apps'
- It allows you to skip some questions and a standard assumption made if the information isn't available, removing barriers in the process.

How does it work?

It's super quick and easy to obtain indicative underwriting decisions without the need to disclose any personally identifiable customer information, saving you the time and effort of going through the full quote process.

You can also use the tool to check income protection occupation eligibility, although the maximum benefit and dual deferred period calculators are both accessible here under the 'tools & guides' section of the website.

And don't forget, once you've got your pre-app results, if you do have questions or need additional support, you can choose to chat with one of our experienced underwriting experts 'in the moment' using our unique live chat service.

To use the tool simply:

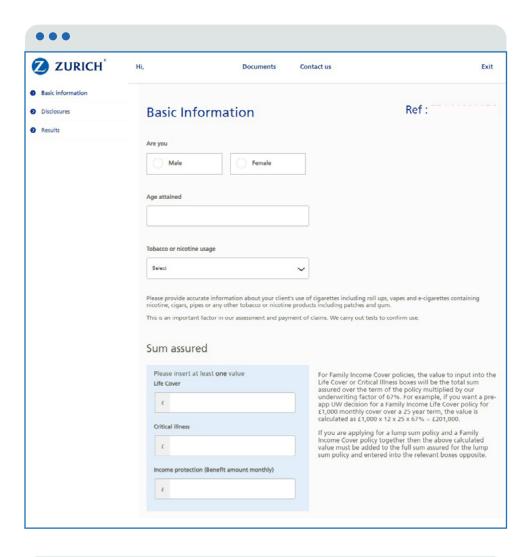
Enter some basic information such as age, gender, height, weight, family history and nicotine usage.

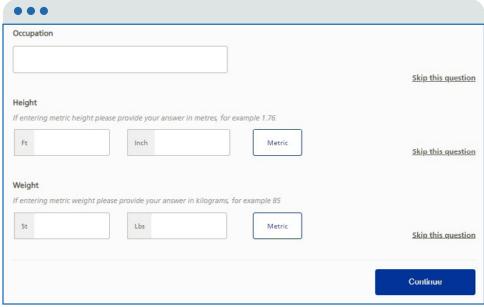
Enter a sum assured for at least one product.

Disclose any additional information on your client, such as lifestyle and medical details.

Review the indicative decision on the results page. This is automatically saved so you can revisit or edit as needed. You can also save a copy of both your pre-app results and anv chat transcripts for compliance purposes too.

Here's what it looks like:



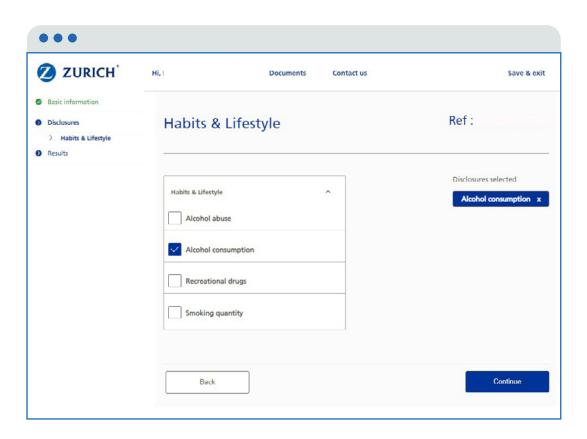


There may be some questions you choose to 'skip'. If you choose to skip a question we'll apply an assumption which won't generate any ratings or which is low risk. If this information changes at application stage the outcome of the underwriting decision may also change.

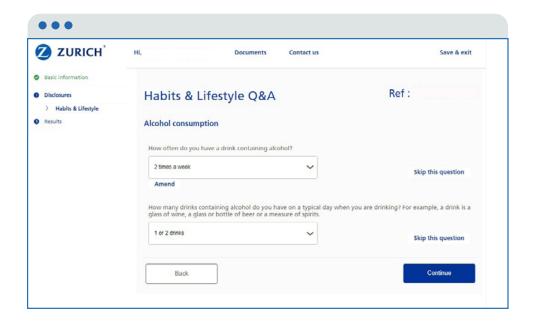
The disclosures section allows you to enter information relating to family and medical history, habits & lifestyle, occupational risks, pursuits, and travel.

We recommend you always choose the 'habits & lifestyle' category as a minimum and complete the 'alcohol consumption' section. This is important because it's a key factor in our risk assessment.

You can find out more about our stance on alcohol here.



In this section we'll ask a combination of questions regarding frequency and volume of alcoholic drinks consumed per week. This provides a much more rounded view than simply asking about units.





Top Tip:

If you're struggling to find your client's medical condition try using the 'search' facility at the top of the medical menu. It may be listed under a different condition name.

If you still can't find it use 'symptoms of ill health' in the medical menu then select 'something else'.

You'll be prompted to email us with your pre-app reference (ZPA) to provide more details on the specific condition to enable us to provide you with an accurate indicative decision. If you prefer you can also choose to live chat with one of our underwriting experts there and then.

Your pre-app results:

Once you've entered all the information your pre-app results will be generated with a unique ZPA reference.

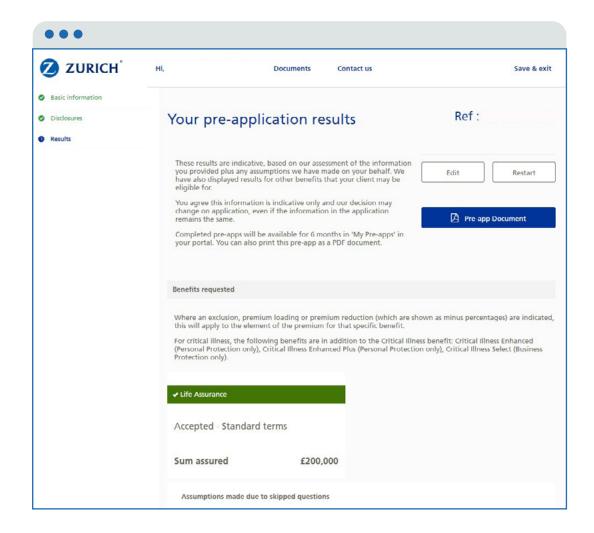
Your results will show not only the cover you enquired about but any other products and benefits we can offer and the expected terms available.

This includes any anticipated exclusions or loadings, and whether we think medical evidence will be required. At this point you can also opt to chat live with one of our Underwriting Experts if you have any questions - we'll explain more about this option later on.

If you skipped any questions these will be indicated.

Your results can be downloaded in a PDF format and will remain available for 6 months, viewable from your 'My Pre-Apps' section of the portal.

At the foot of the page, you'll see a drop down. This collapsible section allows you to see the basis on which we've assessed the enquiry including the sum assured and type of product details (including age, gender, smoker status, occupation, and BMI), along with any disclosures.



What we've assessed

Sum assured

Life Assurance £200000

Details

BMI 21

Gender Female

Age 50

Smoker status Non-Smoker

Occupation Office Manager

Disclosures

Alcohol consumption

How often do you have a drink containing alcohol? 2 times a week

How many drinks containing alcohol do you have on a typical day when you are drinking?

For example, a drink is a glass or wine, a glass or bottle of beer or a measure of spirits.

1 or 2 drinks

Once you've obtained your results you can either 'save & exit' to return to the main portal menu (you'll automatically be returned to the 'My Pre-apps' section where your results will be stored), 'edit' your current pre-app or 'restart'.

Want to see it in action?

Take a look at our video guide showing how to use the pre-app UW tool here.



Top Tip:

Once you've obtained your pre-app results if you've got questions you can choose to chat with one of our experienced underwriters there and then using our 'chat with an expert' option (you'll see it displayed at the bottom right of your screen).

This makes it quick and easy to obtain any additional information or clarification required 'in the moment'. You'll also have the option to save and download a copy of your chat transcript. This can be especially useful to keep for compliance purposes along with your pre-app results.

Please bear in mind that at this early stage we can't provide an indication of the expected premium, only an indicative view of terms based on the information you've provided. We'll cover off the quote and apply elements of the journey later on.



NB: Some firms may use their own in house portal to obtain quotations instead of our Zurich Life Protection Platform, if that is the case, you may not see this option.

To start a quote simply click on the 'Start quote' option from your portal menu, then select either business or personal protection by clicking on the image displayed.

You'll see your adviser details and panel selection information displayed on the next screen. If you have different deal options/clawbacks these will be displayed in the drop down allowing you to toggle between them.

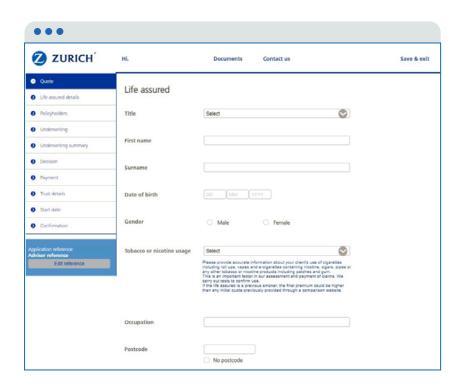
The underwriting option is defaulted to 'interactive'. We recommend this as it significantly increases the likelihood of an immediate underwriting decision.

Quotes are usually valid for 30 days. based on the rates quoted and current age. They may be subject to change once we've fully assessed your application.



Top Tip:

It's especially important to check the tobacco and nicotine usage question is answered accurately because it's a key risk factor. If the information is wrong it could affect a claim payment further down the line too and since we routinely sample policies post issue, it's one of the things we check.

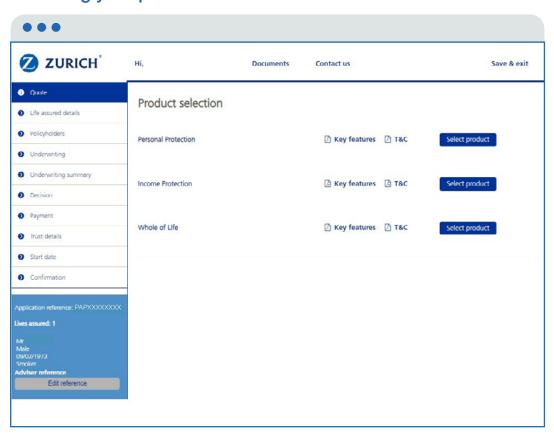


you'll need to tell us when they stopped smoking completely If a client is a by selecting the option available from the drop-down.

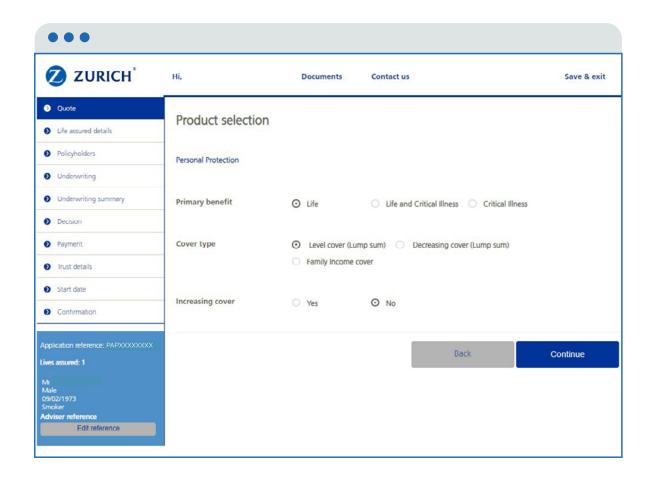
From here you can either press 'continue' to move to the next page or choose to add another life assured's details.

On the next page, select the product you'd like to quote for from the options available (NB: this page will only display the products that have been setup). You can provide a copy of the key features and terms and conditions to your client by simply clicking on the PDF's shown:

Selecting your product:



Now select the product you want to quote on. On the next screen you'll then be able to select the primary benefit, cover type and whether you want increasing cover.





Top Tip:

If you select increasing or decreasing cover you can choose the level by which the cover will increase or reduce based on the options shown on the next screen and outlined in the policy terms and conditions.

On policies with increasing cover, we'll make the change automatically each year on the anniversary of the policy start date and let your client know 8 weeks in advance to explain how much the cover will increase by and how much extra they'll need to pay.

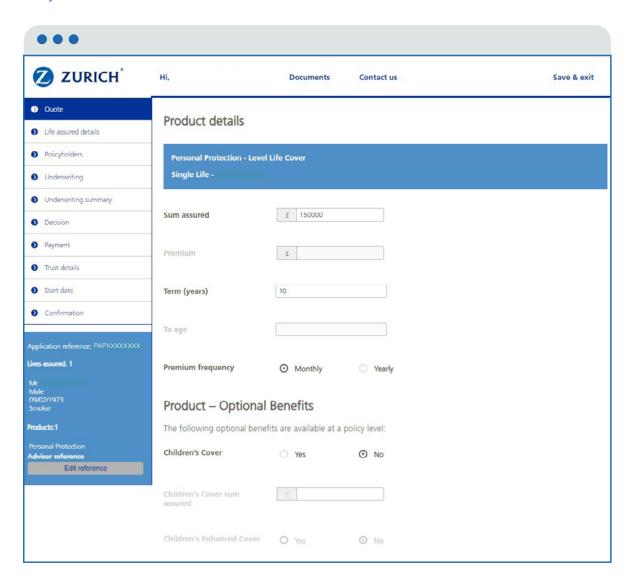
On policies with decreasing cover, the sum assured reduces each month in line with the decreasing cover interest rate % you specify which must be an even number. This means the cover will reduce to zero by the end of the policy term, although the premiums will remain fixed meaning your client will continue to pay the same over the term of the policy.

You can find out more about these options in the policy terms and conditions.

Product details & optional benefits:

In this section you'll enter detail around the sum assured, term and premium frequency along with any optional product or life assured benefits.

Only benefits available will be shown as selectable:



Using the Rysaffe principle:

The Rysaffe principle can be a useful mechanism for IHT planning particularly on large case / high value applications.

If you are intending using this option, please remember to apply first for the total sum assured required. We'll then work with you to facilitate the splits needed and relevant trust arrangements.

You can find more useful information on the Rysaffe Principle in our FAQ section here.



Top Tip:

At the bottom of the page, you'll see a section called 'Adviser Information'. This section is deliberately shown partially collapsed for your confidentiality as it contains information about your commission. Click on the arrow to expand it.

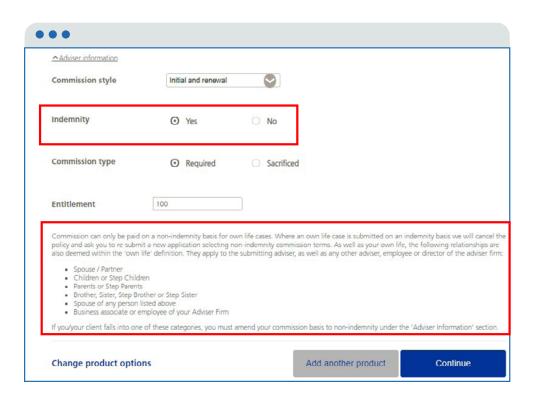
In this section you can also choose to sacrifice commission by reducing the level of entitlement you want to take (for example, reducing this to 70% to sacrifice 30% commission).

Indemnity commission is not payable on own life policies. If you're applying for an own life policy, you'll need to manually select 'No' on the indemnity commission radio button shown to reflect this.

As well as your own life, the following relationships are also deemed within the 'own life' definition. They apply to the submitting adviser, as well as any other adviser, employee, or director of the adviser firm:

- Spouse/partner
- Children or step children
- Parents or step parents
- Brother, sister, step brother or step sister
- Spouse of any person listed above
- Business associate or employee of your adviser firm

You'll see this information displayed on screen, in our commission guide and on the FAQ's on our website for completeness.

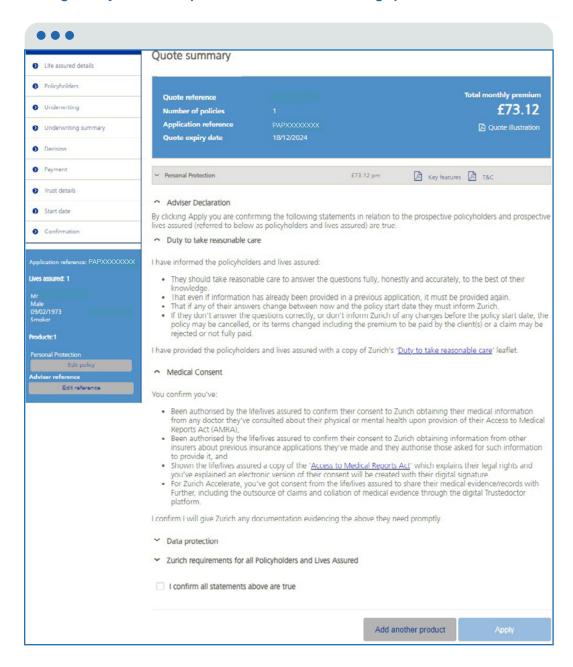


Quote Summary:

Once you've entered all the information required a quote illustration will be provided with an indicative monthly or annual premium.

You can download this in PDF format and provide a copy to your client, to be viewed in conjunction with the key features document. We recommend you check the commission summary shown on the final page of the quote illustration. This will provide an indication of the initial and renewal commission payable for your information.

The premium shown is indicative based on standard rates and current age. This means it could change subject to completion of the underwriting questions.



If your client is happy to proceed, simply check the box to confirm compliance with the statements shown on screen and then click the 'apply' button.

You'll need to provide a copy of the 'duty to take reasonable care' and 'access to medical records act' documents hyperlinked on the screen to your client.

Any information previously entered will automatically be pulled through, saving you time re-entering it.

Once we've made a decision on an application, terms will be valid for 120 days. Once terms expire we're unable to extend them and you'll need to reapply again.



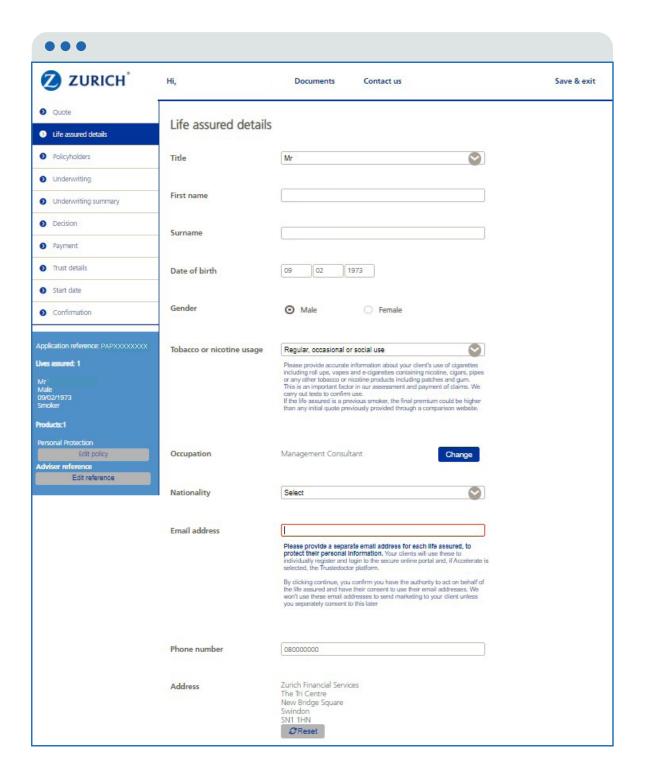
Top Tip:

We'll ask you to provide an email address for your client which we'll use to correspond with them. This could include emails relating to potentially sensitive medical information as part of our underwriting process.

Please do not enter your own email address in this field – if your client doesn't have an email address they'll need to create one before moving forward.

To ensure your client's data is kept secure please check the email address with them carefully. We also recommend that your client does not use a shared email address. This is especially important as their email will form part of their registration details if they choose to register for the Customer Portal.

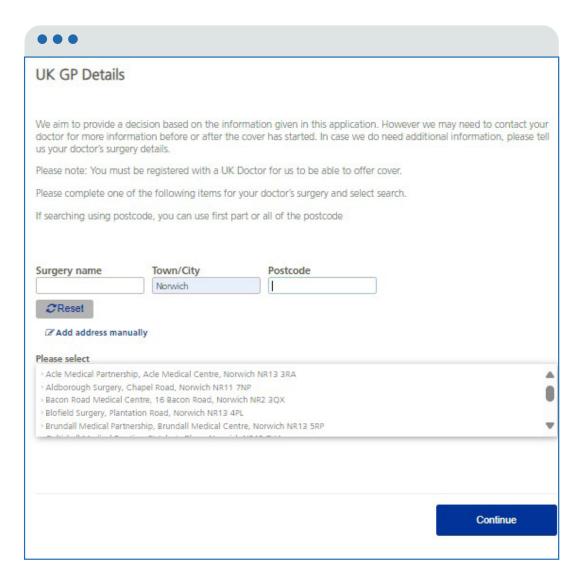




In this section of the life assured details page we'll ask for information about the GP practice your client is registered with. Please complete this accurately as we'll use this in conjunction with their AMRA consent if we need medical information to support the assessment of their application or as part of our routine post issue sampling.

Your client must be registered with a UK doctor for us to be able to provide cover.

Simply use the range of search options and drop downs available to find the GP practice required. Alternatively you can choose to add the address manually.



Policyholders page:

The policyholder details will be defaulted to the life assured details on this screen. If the policy is to be set up on a 'life of another' basis or you want to add another policyholder, simply de-select the life assured details shown by unticking the box. Then click the 'add policyholder' option shown in blue.'

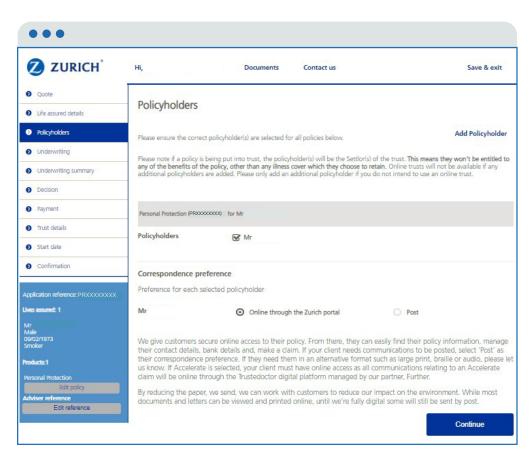
Remember when setting up a policy on a life of another basis, the relevant consents and authorities must be obtained from all policyholders and lives assured. We'll ask you to confirm this within the adviser declaration and reserve the right to ask you, on request, for evidence.

Communication preferences are defaulted to 'online through the Zurich portal' and can be selected individually for each policyholder.

Remember: To access their documents via this option they will need to register for the **Customer Portal.**

We'll invite them to register following issue of the policy via email with a unique registration link which is valid for 60 days. Please encourage your client to register as soon as possible to ensure they can access and check their policy documents.

To help them get started we've created a guide to the Customer Portal which we'll send to them when we invite them to register. You can access this here.



Now click 'continue' to move onto the Underwriting section of the journey.



Important:

The screenshots of the underwriting questions are for illustration purposes only and can change regularly.

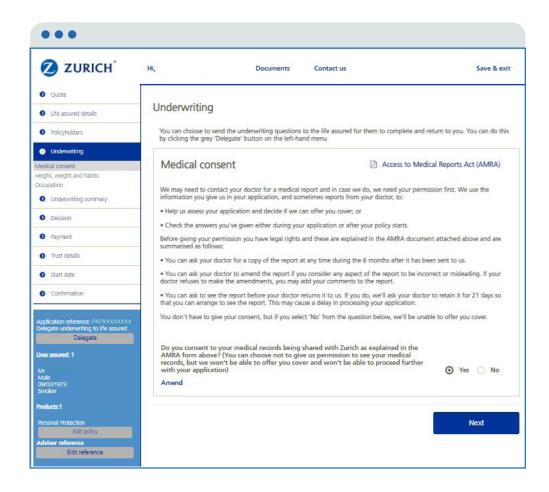
Underwriting questions:

The underwriting section is split into multiple parts covering the following:

- Medical consent
- Height, weight, and habits
- Occupation
- Past, recent, and current medical/family history

Before you can progress further your client will need to agree to the Medical Consent statement shown on screen by ticking 'Yes'.

If you select 'No' to this question the application will be automatically declined following completion of the underwriting questions.





Top Tip:

Use our 'delegate' feature, accessible from the menu on the left-hand side (circled below) to send your client their underwriting questions, allowing them to complete these in private.

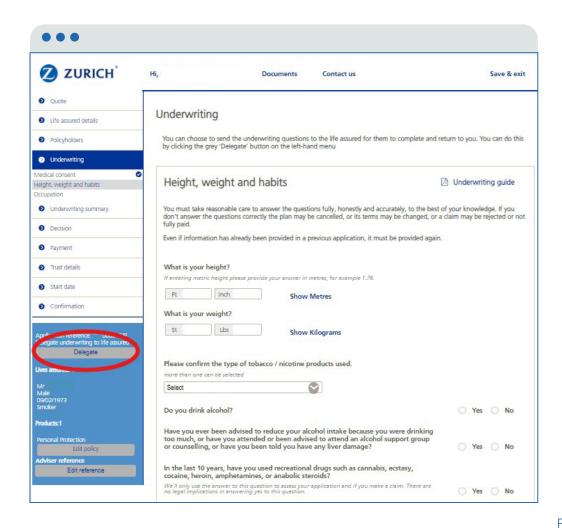
This saves you time, as well as ensuring more accurate disclosures, especially if your client needs to source extra information about their medical condition or history.

To do this, simply click on the grey 'delegate' option, select the life assured details you'd like to send the questions to and click 'delegate'.

We'll send them an email to the email address you've previously provided with a link, allowing them to complete the questions. This link is valid for 30 days.

Once your client has completed their questions, we'll send you a notification to let you know, so you can pick the application back up and progress it as normal.

To ensure you receive this, make sure you're opted in for all alerts and notifications in the My Account section of the portal mentioned earlier.



You can find out more about the option and why other advisers find it so valuable, by clicking on the link here or watching the video.

Questions in these sections are dynamic, this means that depending on your answers, and the type of cover and benefits selected additional questions may be presented to obtain additional information. Some of these questions allow for free text information to be provided if needed.

As you progress through the underwriting questions you'll see our 'Underwriting Guide' is displayed in the top right-hand side of the screen.

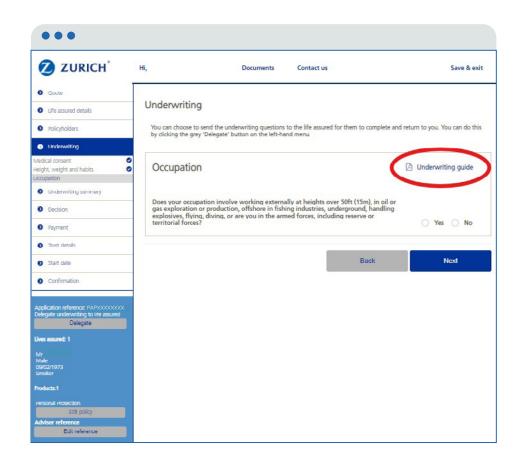
This handy resource provides guidance on some of the most common medical disclosures, including an explanation of each and the type of medical evidence we may need to obtain in order to make a decision.

This also includes an explanation of rating factors like BMI, how it's calculated, and the classification based on height and weight.

You can view the guide here.

Answering questions accurately and honestly within the Underwriting section is critical to ensuring we can provide the right cover, at the right price for your client.

This is especially important as we conduct routine post issue sampling as standard.





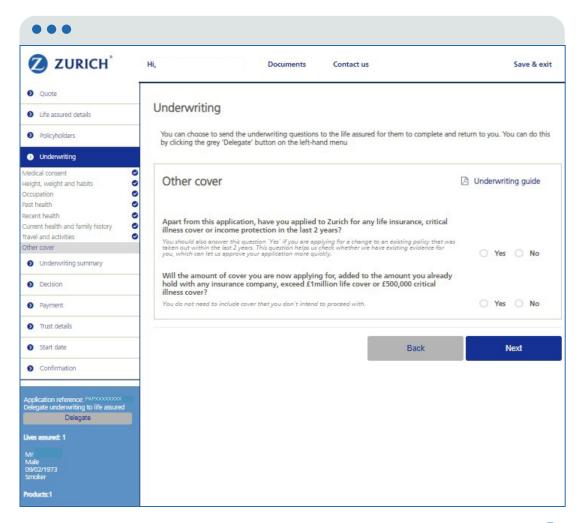
Good to know:

We ask the question about 'other cover' in this section of the Underwriting questions for a couple of reasons.

- Firstly, if your client already has a policy with us and they took that out within the last 2 years, we may be able to use any existing evidence in support of this new application if it's required, saving time and effort for you and your client.
- Secondly, this helps us assess the compound effect of the sum assured across the two policies to ensure it doesn't exceed our non-medical limits.

If the new policy is intended to replace an existing one we'll ask you to let us know the policy number again later on.

This enables us to cancel the old policy for you, to be replaced by the new one. **There are some** really important checks you need to be aware of when it comes to cancelling and replacing we'll cover these in more detail later in the section relating to the 'Start Date' screen.



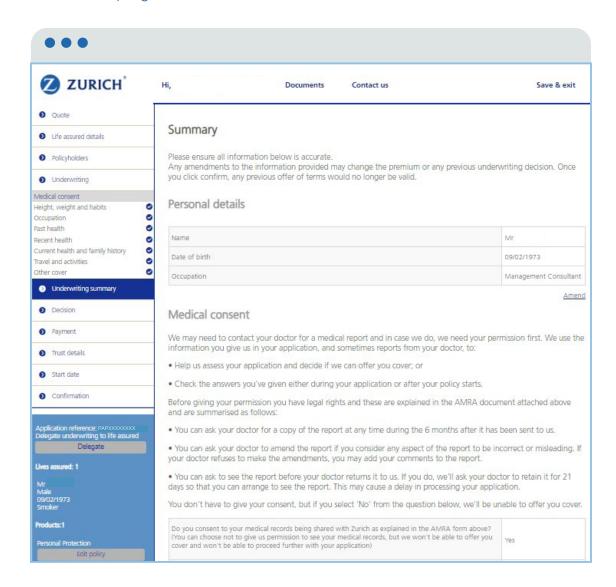
Summary:

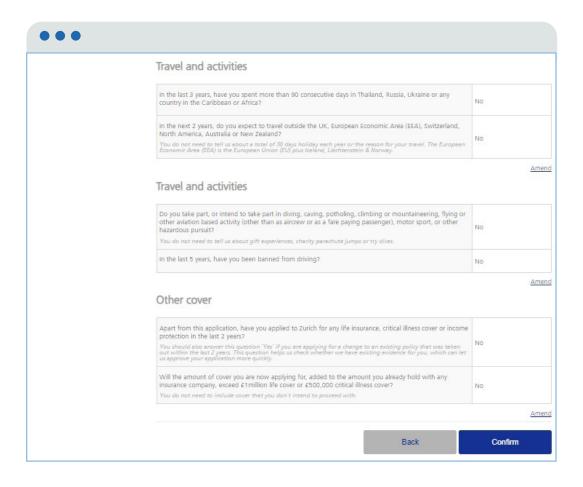
Once you've completed the answers to the underwriting questions a summary of all the information provided will be shared on screen.

Please review these with your client to ensure the information provided is correct as this is the basis on which we'll make a decision on the terms we can provide.

If anything needs to be changed you can simply click on the hyperlinked 'Amend' option shown to change this.

If you don't need to make any changes and you're happy all the information is correct simply click 'Confirm' to progress to the next screen.



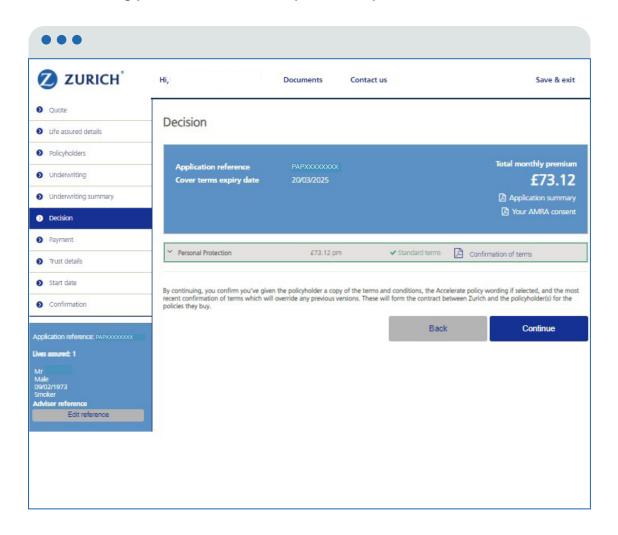




Decision outcome:

From here you'll see a summary of the cover and terms we are able to offer, including the monthly / annual premium based on the premium frequency selected. You can download and share a copy of the application summary, AMRA and confirmation of terms with your client in this section too.

If you're not ready to issue right away simply click on the 'Save and Exit' button shown on the top right-hand side of your screen. This will automatically save the application in your 'My Applications' menu, allowing you to retrieve it when you're ready to issue.



To find out more about the terms and cover offered simply click the collapsible 'V' option shown here.

This is especially useful if a rating, loading or exclusion has been applied to help you understand more about the terms offered.

We'll explain how you can also use this to find information about your commission on the next page.



Good to know:

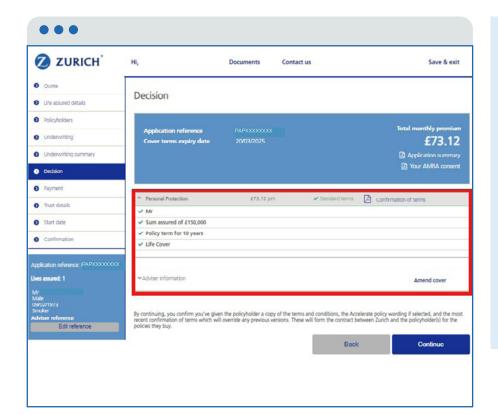
If a decision has been provided and you've not yet continued past the decision page, you can still choose to amend your commission terms, without needing to push the application back through underwriting.

You can do this by simply clicking on the drop-down arrow shown in the screen shot below in the 'Adviser Information' section.

This will show the amount of initial and renewal commission (if applicable) payable based on your commission terms.

If you want to change your commission arrangement, sacrifice commission or reduce the sum assured, simply click 'amend cover' without having to go back to Quote.

Once you've continued past this page you'll will need to go back through the application including the underwriting questions, to enable the commission to be amended - we can't retrospectively adjust commission on a policy once it's issued.



Don't forget to check your commission:

You can view your initial & renewal commission payable in the 'Adviser information' section on screen shown here. It's also viewable in the 'commission summary' section on the final page of the confirmation of terms.

Commission is payable from the actual start date specified which may be a date in the future, as opposed to the date the policy is issued.

Amending your application:

In the same way you can amend your commission, you can also choose to reduce the sum assured or the term of the policy, as well as adding or removing optional benefits without the need to go back through underwriting again. This makes it quick and easy to model a range of different options to meet your clients cover and affordability objectives.

To do this, simply click on the 'amend cover' option shown on screen and adjust the sum assured or term as required, ticking or unticking the optional benefits shown.

Pressing 'continue' will take you to the decision screen where you'll be able to view the revised terms offered and the new premium, based on the changes you've made.



Important:

You can't increase the sum assured or term beyond the level originally underwritten at this point without going back to 'quote stage' and re-underwriting the application based on the increased cover required.

What if I want to model a range of different options?

We can help with that too.

Let's look at an example:

- You originally obtained an underwritten decision based on a sum assured of £100,000.
- Using the process described above you reduced this to £80,000 and obtained an updated decision & price.
- Now you want to see what the impact is of changing the sum assured to £90,000 is instead.
- Simply click on the 'amend cover' option exactly as you did before.
- Now before entering the revised sum assured, click the 'reset product' option shown on screen.
- This will revert the application back to the original £100,000 after which you can then proceed to reduce the sum assured to £90,000 without needing to go back through underwriting all over again.

You can find more useful information about modelling different options as well as alternative cover and revised terms offers in our handy article here.



Top Tip:

If your application generates a referral it's best practice to wait until after an underwriting decision is made before attempting to complete the trust screens.

This is especially important on joint life applications because if one of the lives assured is declined, it could change the trust arrangements, so getting that certainty is key.

Once a decision is made, we'll let you know via an update in your portal. You can then retrieve the application and progress it through to issue and place the policy in trust. We'll explain how to do that later on in this guide.

Different decisions, different outcomes:

Depending on the answers to the questions completed as part of the application process there could be a variety of different decision outcomes – these include:

Decision Outcome	What it means	What you need to do
Standard (as shown in our example)	Shown outlined in green, this confirms we're able to offer cover based on our standard terms, with no loadings, exclusions or additional information required.	If you're happy to proceed simply click 'continue' to add bank details and progress to issue. If you want to amend the cover, simply click the drop down shown on screen and then click 'amend cover'.
Refer	Shown outlined in amber a 'refer' means our underwriters need to take a look at the application in a little more detail.	To enable our underwriters to assess your application & make a decision you must click the 'Continue and submit to Underwriters' button.
		If you don't, the application will not progress any further and the application will show in your 'My applications' window with a status of 'Decision referred'. This means it's awaiting action by you to submit to Underwriting. Take a look at our handy article here.
		Once you've submitted it, the status will change to 'In Underwriting'.

Decision Outcome	What it means	What you need to do
Alternative Cover (also known as 'revised' or 'alternative terms'	The application has been accepted but on revised (or 'alternative') terms. This could include a rating, loading or exclusion. Wherever possible, we'll try and offer options. These are usually displayed side by side, one showing the original sum assured applied for with a revised premium, the other showing a revised sum assured based as closely as possible to the original premium. This is designed to provide an 'at a glance' set of options, coupled with the ability to then further tailor those options to meet your client's needs and budget.	Take a look at the article here which explains this option in more detail and how you can either 'select this cover' to proceed based on the alternative cover offered or choose to 'amend cover' to tweak the original requested cover.
Declined	We're unable to provide the cover or terms requested based on the information provided	If an application is declined we'll provide an explanation to let you know why, so you can manage your client's expectations. If the reason for the decline is linked to medical information provided following a GP report or medical screening, for confidentiality reasons we may be unable to disclose the specifics of those conditions.
Deferred (also known as postponed)	There may be a number of scenarios where our underwriters defer or postpone a decision to offer terms. These include scenarios where a client is awaiting the outcome of diagnostic tests or investigations or for other medical reasons.	Where this happens we'll communicate the reason for the defer decision and explain next steps. NB : This application will be closed and a new quote and application will need to be submitted once test / investigations have been completed.

What happens if my application is referred to Underwriting?

If your application generates a referral to Underwriting you need to click 'Continue and submit to Underwriters' button on screen to send it for assessment. It won't be sent automatically to our Underwriters.

Once our underwriting experts have received your application they'll review the information provided and determine what happens next.

Wherever possible our Underwriters will call your client directly if there's any additional information needed and before requesting medical evidence, so it's really important to include an up-to-date mobile number.

If we decide medical evidence is required we'll contact your client's GP surgery, either electronically using the iGPR system or by writing to their surgery using the information you've provided as part of their application.

During this time and whilst we're awaiting return of medical evidence the application status will continue to show as 'In Underwriting' when you view the application from your 'My Applications' section of the portal.

This doesn't mean nothing's happening with your application, it simply means we're awaiting the information we need to make a decision around the terms we can offer.

You can find out more about the process of requesting medical information, where you can see updates on progress and how regularly we chase, by clicking here.

Retrieving an application:

To make changes at quote or apply stage, such as updating your client's details, amending or adding medical disclosures, you'll need to first retrieve the application. You can do this by selecting the 'My Application' option from the portal menu and following the steps shown below.

To do this simply:

Select the application from the list shown on screen or

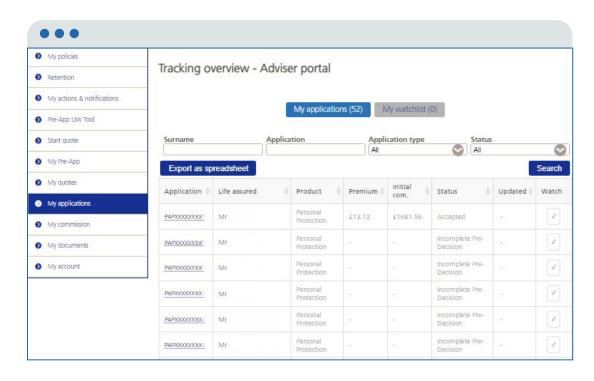
Search by Surname, application number (it always begins PAP) from the search menu at the top of the screen.

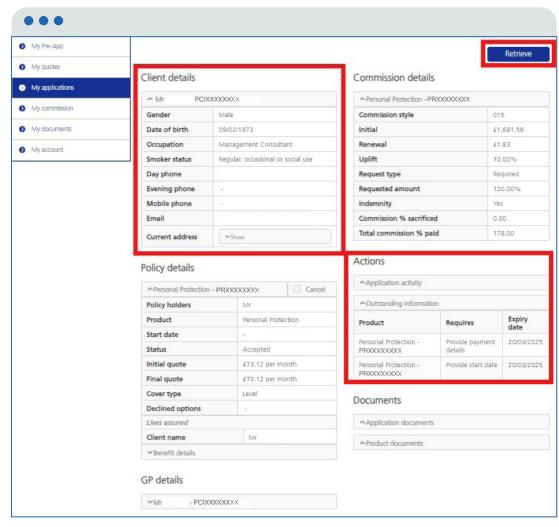
Once you've clicked on the application you'd like to view it will open the 'application details' screen.

This is a really handy 'at a glance' view as it shows everything you need to know, all on one page.

On this page we'll also show the GP details (shown in the drop-down box indicated) as well as any application or product documents. For example, the initial quote, application etc.

If you want to retrieve the application simply click on the 'retrieve' button shown at the top of the page and indicated below. Remember to always progress a retrieved application to the decision screen before saving and exiting. If you exit an application before reaching the decision screen your application will show a status of 'Incomplete Pre-Decision'. Applications in this state will automatically be closed 60 days or more after the original creation date.





How to find updates on an application:

From the page above simply navigate to the 'actions' section of the page highlighted and select the collapsible sections entitled 'application activity' and 'outstanding information'.

We use these two sections for two slightly different things, let us explain:

Application activity:

This includes notes we've published on any activity undertaken to let you know what's happening. This includes things like chasing your client's GP surgery if we need medical evidence, or letting you know we've received their report back.

Outstanding information:

This section will show any information we're waiting for from you – for example, payment details or a start date in order to issue the policy.

Always check back to these two sections for any key progress updates or time critical actions needed.

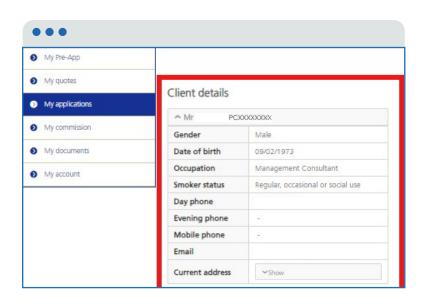


Top Tip:

Not sure which update relates to which life assured if there's more than one?

Don't worry, we've got you covered. Each life assured will have a unique customer identifier shown on the client details page next to your client's name which starts PCI – you can see this on the example shown here.

This unique identifier will be shown in any notes we've published in the application activity section making it easy to identify the life assured the update relates to.



Using your watchlist:

To make it easier to keep tabs on time critical applications we've designed the 'watchlist'.

This allows you to create your own tightly curated list of cases you can 'watch' in your tracking overview, meaning you'll never need to go searching for them. You can even export this information to excel, allowing your administrators or paraplanners to chase up any activity needed to make sure things move along as quickly as possible.

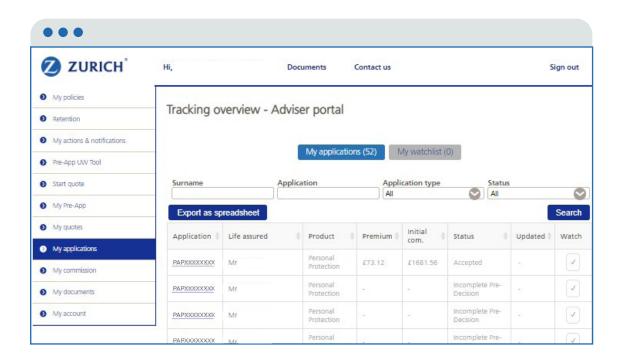
To add an application to your watchlist simply navigate to your 'My Applications' option from your portal menu.

Find the application you want to track from the list displayed.

Tick the 'watch' button on the far-right hand side of the screen

Once ticked you'll see this indicated in the grey 'My watchlist' option which you can toggle between from this page.

To remove a case from your watchlist, simply untick the box.



From the decision screen shown earlier simply click 'Continue' to proceed to issue and navigate onto the payment screen.

There are a few key fields on this page which it's helpful to know about:

- If the bank account the premiums are to be paid from requires more than one signatory you'll need to send us a paper direct debit mandate, signed by both parties. You can still proceed as normal; however, we'll need this for our records. The guidance on screen explains this including a link to the mandate and an email address to send this to us.
- If the premiums are being paid by someone other than the policyholders or lives assured we'll need to know the relationship of the payer to them and their nationality. This is required as part of your 'Know Your Customer' checks. It's also important because it ensures we can keep in touch with them in the event of any issues with the direct debit or regular payments. We'll write to you following issue of the policy to ask for this information as standard or you can provide it pre-emptively by simply emailing us as outlined on screen.
- Checking the collection date with your client prior to issuing is critical to ensure they're clear on when their first and regular payments will come out of their account and to make certain that the collection date selected works for them from a budget perspective. Use the DD collection tool shown on screen to help. You can take a look at our FAQ here, which explains how our DD collection tool can help you work out initial and future collection dates and best practice when it comes to payment timescales.

Once you've entered the account details on this page simply click 'validate' – this will then confirm the bank name and address the account number and sort code corresponds to.

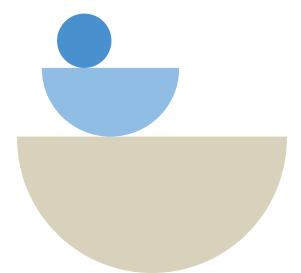
From here click 'continue' to progress to the trust screen.

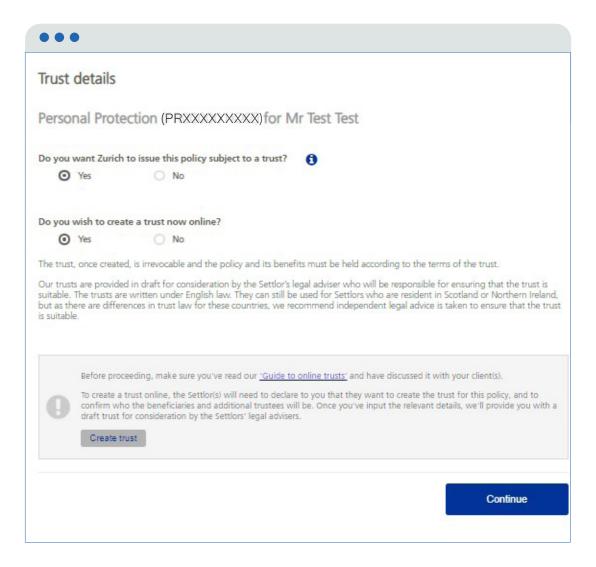
Trust Screen:

From this screen your client can choose to place their policy in trust at outset using our range of online trusts, including appointing beneficiaries.

Remember placing a policy in trust is a 'irrevocable act' so getting it right first time is critical.

Check out our 'Guide to online trusts' hyperlinked on this screen which explains the types of trusts which are available online and which products they're applicable to.





It's important your client understands the implications of placing their policy in trust, including the advantages and 'need to know' facts. This includes:

- Once a policy is placed in trust the appointed trustees become the legal owners of the policy.
- This means they'll have a say in day-to-day administration of the policy including agreeing to any changes which may be required.
- The trustees will also receive copies of some correspondence relating to the policy such as underpaid letters.

Your client can normally choose to place their policy in trust from the point of issue using the online trust options available or a paper trust. You can also choose to place the policy in trust post issue using a paper trust form.

The exception to this rule is Business Protection.

If you're setting up a Business Protection Policy it's important to know that you must complete the trust at outset to avoid the capital gains tax risk. Take a look at our helpful guide to setting up a business protection policy for everything you need to know right here. Remember, you cannot apply the trust retrospectively once the policy has issued. If this happens, you'll need to cancel the original policy and reapply again.

With our online trusts, your client simply needs to specify who they want to include as beneficiaries and any additional trustees. We'll then create a pre-filled trust form in draft format. Once you've completed the trust screens, the trust request will be held as part of the application and the policy issued subject to the trust. There's no need for your clients to physically sign it.

If you'd prefer to use a paper trust form, you can let us know in this section. You'll then simply need to download a copy of the trust form, arrange for your client to complete, and sign it, then return it to us. We'll place a 'block' on the application to prevent it issuing pending return of the trust and once received and processed, we'll send you a notification to let you know so you can retrieve the application and issue it as normal, subject to trust.



If your client **doesn't** wish to place their policy in trust:

Simply click 'No' to the relevant questions displayed on screen and click 'continue' to proceed to the start date screen.



If your client **does** want to place their policy in trust:

They'll be invited to complete some additional information to enable us to set this up, including:

- Settlor benefits
- Trustee details (including the option to add up to 3 additional trustees online, you can choose to add more using a paper trust option)
- Beneficiary details this includes the requirement to specify the share each beneficiary will receive as a %. The total of which must add up to 100%.

Once all the relevant information has been entered simply click 'continue'.

From here you'll be able to download a draft copy of the trust, along with a copy of the 'Guide to being a Trustee'.



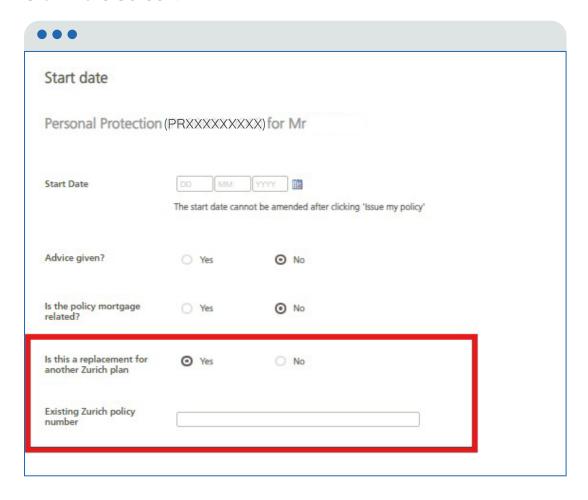
Top Tip:

If your application generates a referral it's best practice to wait until after an underwriting decision is made before attempting to complete the trust screens. This is especially important on joint life applications because if one of the lives assured is declined, it could change the trust arrangements, so getting that certainty is key.

If you've got any questions relating to tax, trusts or any other product related questions, you can contact our highly experienced team of Technical experts using the experts below:



Start Date Screen:



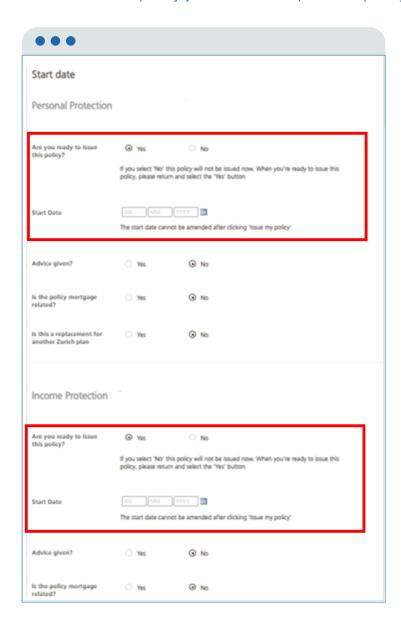
Multi-applications:

Based on your feedback we've recently made some changes to our adviser platform to enable you to issue applications in a multi-app scenario independently of each other.

This means that, if you have an application with personal protection and income protection for example and you want to issue the income protection element straight away and the personal protection later on, you now have the flexibility to do that quickly and easily in just a few clicks.

Here's how:

- On the start date screen for applications with multiple policies, you'll now see each shown independently.
- Each policy will ask you to specify if you're ready to issue ('yes' or no'). For ease this field will always be defaulted to 'yes'.
- And for each policy you'll have the option to specify the start date required.



In this example, let's assume we want to issue the income protection policy straight away, but we're still awaiting a completion date on the new property sale to put the personal protection element of the cover in place.

In this case we'd simply:

- Select 'No' to the 'Are you ready to issue this policy?' question under the personal protection policy.
- On the income protection policy, we'd leave the radio button under the 'Are you ready to issue this policy?' question as 'Yes' and complete the start date field accordingly.

You can then continue to complete the remaining steps as you would normally to proceed to issue the income protection policy, leaving the personal protection element ready to retrieve and return to, whenever you're ready to issue it.



Important:

Always check the start date is correct before clicking 'issue my policy' this is really important because you won't be able to change it once it's issued.





Top Tip:

If the new policy is designed to replace an existing policy with Zurich Life Protection please complete the relevant question and provide the policy number in the field shown. This allows our admin team to cancel the old policy, effective from the date the new one starts, to ensure there's no break in cover.

If the new policy is to replace an old legacy Life Protection policy (these are Zurich life protection policies which don't have the PR prefix) then it's worth remembering that these policies run up to the end of the month, so bear that in mind when syncing up the start date with your new one.

Important information:

If you're cancelling an existing policy to be replaced by a new one it's important to make sure the start date, paid to date and payment collection dates are all sync'd up. This prevents your client paying twice for cover under both the old and the new policy. This is especially important when it comes to annually paid policies as we don't offer partial refunds.

Take a look at this handy article for everything you need to know on replacements.

Your need to knows before you issue:

Making sure everything is ship-shape before you press the button to issue is key to ensuring a great first impression for your client.

Take a look at our top tips:

- Always check your client's address before issuing. This is really important because if the application is linked to a mortgage or house move and their address has changed mid-way through the application, you may have the old address listed. Checking this ensures their policy documents (including their personal details confirmation, which includes potentially sensitive medical information) goes to the right address.
- Check nothing's changed. If there's been a gap between the original application and the proposed start date, it's important to validate with your client that there haven't been any changes in their health or lifestyle and that all the information captured originally remains unchanged.

Once you've checked everything is correct, simply select 'Issue my Policy'.

What happens next?

- Your client will receive a copy of the access to medical records act (AMRA), along with their personal detail confirmation in the post. This replays their answers to the questions provided as part of the application process. It asks them to check this and confirm the information provided is correct.
- If their correspondence preference is set to 'online via the portal' their documents will also be immediately accessible online, however they'll need to register in order to access these.
- To enable them to do that they'll receive an email from us including a unique registration link, valid for 60 days. We'll also include a guide to the portal to help them get started. Please ask your customer to register as soon as possible.
- You can view details of your client's documents in the 'My Document' section of your adviser portal.
- You can also access their policy information by searching in the 'My Policies' section of the portal and simply retrieving the policy required.

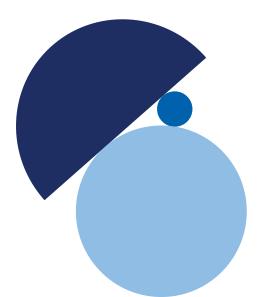
A word on customer wellbeing:

We want all our customers to be able to interact with us in a way that works for them, and we offer a range of different communication channels, including:

- Customer portal
- Live chat
- Email/post
- Phone
- Website/online forms

If your client has any communication or accessibility needs they'd like us to be aware of when interacting with them about their policy they can let us know by completing our online form, or by getting in touch with our team.

For more information about the support we provide for customer wellbeing, take a look at our website.



Policy information & servicing

Our Adviser platform provides you with the flexibility to view and make changes on your client's behalf, ensuring their policy can flex with them.

It's good to get acquainted with this section as it can prove really useful when conducting regular product and lifestyle reviews, meaning everything you need is readily available, without the need to call for plan information.

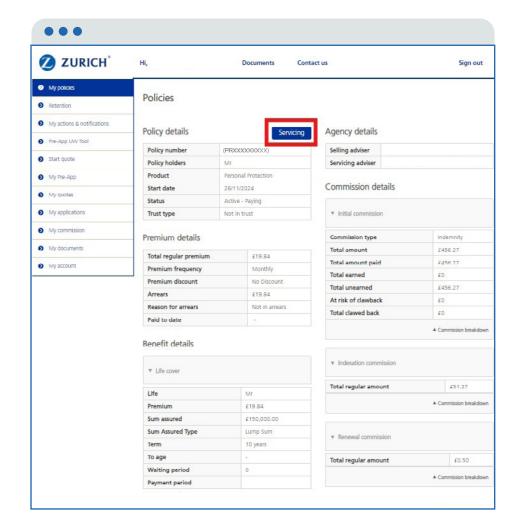
Depending on the type of policy your client has and the options available you may be able to make the following changes:

- Policy changes
- Milestone benefit
- Career break

To view plan information or make changes simply navigate to the 'My Policies' option from the menu on the left-hand side of the screen.

Search for the policy you'd like to view and click on the hyperlink. You can also search by surname and policy status.

This will open up the policy record as shown below.



Policy information & servicing

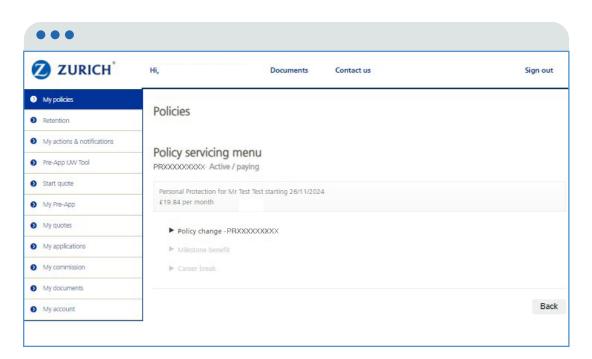
What else is shown in this section?

The policy details screen shows information about the policy selected including:

- Policy details
- Premium details
- Benefit details
- Information about your agency
- Details about your commission

To make changes, click on the 'Servicing' button shown above or go 'back' to the 'My Policies' page.

Policy Servicing Menu:





Good to know:

If you're quoting to increase the sum assured, either as a requested increase or by using the milestone benefit, the amount of cover shown on the illustration produced will be based on the total sum assured, inclusive of the increase rather than just the amount you're increasing by.

For example, if you have an existing policy with a sum assured of £200,000 and want to quote to increase that to £250,000. The quote will show the full (£250,000) sum assured rather than just the additional £50,000.

Your commission details shown on the quote will therefore be based on your original commission paid, plus any additional commission due as a result of the change.

Policy information & servicing

What changes can I make?

Depending on the type of policy and benefits selected you may be able to:

- Add some benefits (subject to the policy terms and conditions)
- Remove certain benefits
- Increase the amount of cover*
- Reduce the amount of cover
- Change the term of the policy
- Remove the increasing cover option

Just so you know:

Restrictions apply in the adviser portal meaning that any change must become effective on the next monthly policy anniversary before another change can be made.

If you need help, please contact our customer service team.

*If you want to increase the sum assured on the policy there are two ways in which you can do this, either as a policy change (also known as a 'requested increase' or 'contractual change') or alternatively by using the milestone benefit option. We'll explain both of these below:

Requested increase – You can request an increase to the sum assured at any time, subject to underwriting. We'll let you know if we can offer the cover requested and work out any changes in the premium based on each life assured's details, any changes in their health or lifestyle, age and let you know the cost of those changes over the remainder of the policy term.

Milestone benefit – If the policy includes the milestone benefit option this allows you to request an increase 'underwriting free' within 90 days of a 'significant life event'. Please refer to the relevant policy terms and conditions which outline the maximum level of increase which can be applied for and what we define as a 'significant life event'.



Important:

Increases applied using the milestone benefit require evidence to be provided within **90 days** of the 'significant life event'. Refer to the policy terms & conditions to see what evidence is required in what circumstances. We'll write to your customer to request this evidence so please encourage them to send this as soon as possible. If we don't receive the evidence required within 90 days of the event the increase will be removed and you'll need to reapply for a requested increase instead.

To find out what options are available across our broad range of products take a look at this helpful guide to cover flexibility.

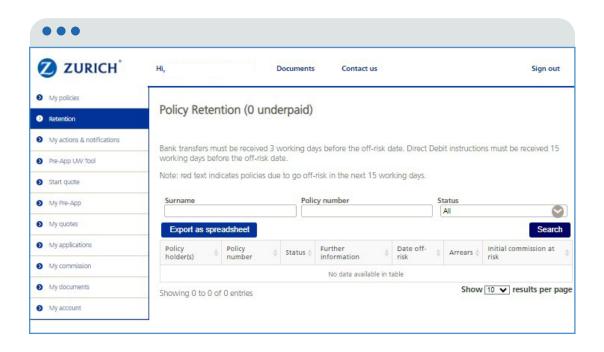
Retention

Missed premiums & policy lapses:

The 'My Retention' option accessible from the menu within your adviser portal provides a useful early warning indicator of potential lapse activity, enabling you to take immediate action to retain more of the business you write, for longer.

This section shows policies which are underpaid or in arrears and when the policy will be lapsed if payment is not received. You will also be able to see the expected impact on your commission if this happens.

Policies due to lapse within the next 15 working days are highlighted in red to make these easier to view and you can also choose to export the information into Excel if needed, making it easier to work offline.



Retention

To help you de-code some of the statuses you might see in your Policy Retention view and what action is required, we've included a couple of examples:

What it says in the 'status' field	What it means	What action is needed
DD bounced	This means the direct debit was rejected due to insufficient funds when we attempted to collect payment. We'll reattempt collection again usually within 15 working days and we'll write to the premium payer to let them know. If the payment rejects a second time due to insufficient funds the direct debit instruction will be cancelled, and the status will show as 'DD failed'.	Early intervention at this stage is key. We recommend you contact your client to ensure they can make arrangements for funds to be available ready for payment to be reattempted. This de-risks the chances of the policy lapsing due to underpayment and negates the need for a new direct debit instruction.
DD Failed	This means the direct debit instruction has either been cancelled by your client directly or it's automatically been cancelled after 2 previously unsuccessful attempts to collect payment.	We'll now need a new direct debit instruction as soon as possible, along with back payment in full of all outstanding premiums to prevent the policy lapsing. Payment of any outstanding premiums must be via direct credit. We'll write to the premium payer explaining what's due, by when and how they can do this.

What happens if my client misses a premium?

If your client doesn't pay their premium or it's returned by their bank we'll write to let them know and explain what they need to do to ensure their cover continues.

We'll reattempt collection of a missed or returned payment however, after 2 unsuccessful attempts the direct debit instruction will automatically be cancelled. At this point a new instruction will be required, along with a one-off payment of any outstanding premiums payable to us by direct credit to the account details we'll provide. If your client doesn't pay their premium within 2 months of the premium due date, the policy will automatically be cancelled, and the cover will end.

Once a policy has lapsed or cancelled we cannot reinstate, the client would need to apply for a new one.

Retention

Can a client pay over the phone if they've missed premiums?

No. We don't accept phone-based payments by credit or debit card, this has to be done via a bank transfer to our account.

We explain this in the letter we send to the client to let them know there is an outstanding payment due and confirm the deadline for this to be received to prevent the policy lapsing.

Bank transfers must be received into our account at least 3 working days before the off-risk date, along with a valid direct debit instruction to ensure regular premium collections can be resumed.

What support exists for customer's struggling to pay their premiums?

We have a range of resources on both our intermediary and customer websites designed to support those in financial difficulty.

Zurich Support Services is provided as standard for existing customers and offers a broad range of services designed to help with life events big and small.

Our product is designed with flexibility in mind allowing customers to adjust the level of cover and term required, as well as choosing to remove optional benefits in order to reduce cost.

You can explore these options in the Servicing menu as outlined previously.



Top Tip:

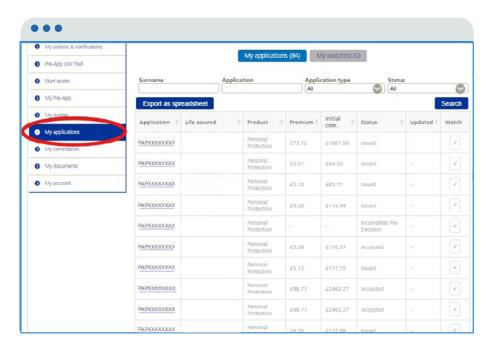
You can find more information about a range of retention related options including product flexibility, the benefits of annual statements and guidance around missed premiums on our intermediary website here, along with a handy infographic.



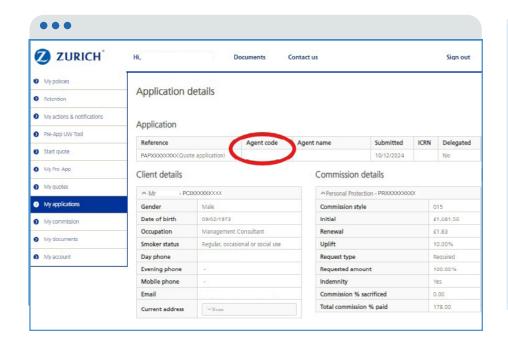


Where can I find my agency code?

From the main menu, select "My applications" and then click on one of your current applications.



Your Agency Code will be shown in the Application information summary at the top of the page (below)





Good to know:

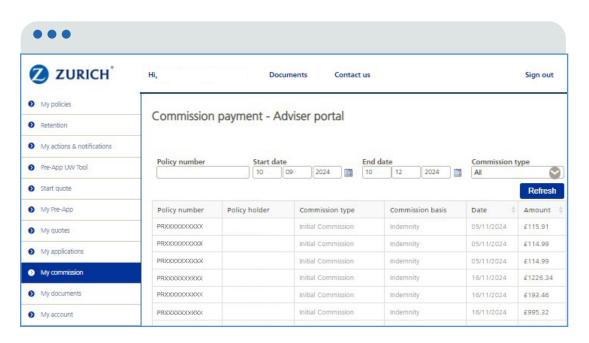
We recommend making a note of your Agency code, as you'll be asked to provide this if you need to call our team at any point for assistance.



How do I download a copy of my commission statement?

The ability to download a commission statement is restricted to users with 'administrator' access. Your firm administrator will be able to help you.

In the meantime, you can view information about your commission arrangements in the 'My Commission' section of the portal, accessible from the menu shown here:

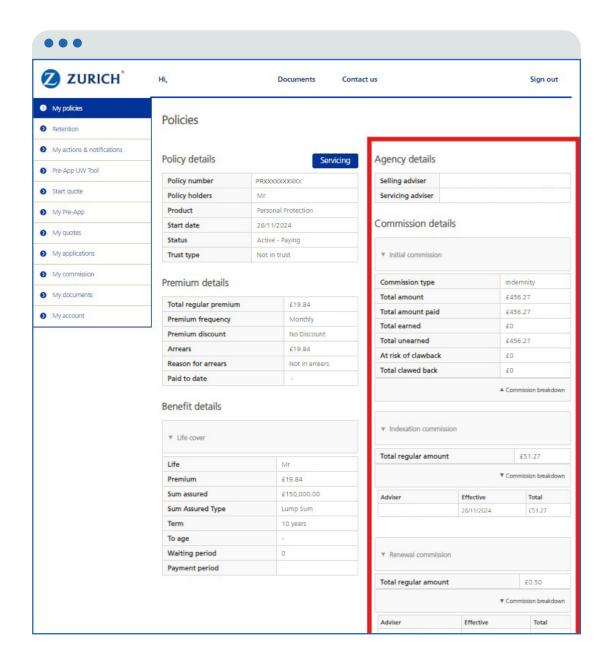


This allows you to view your commission details at a headline level, with the option to search by date range, commission type and policy number.

For a more detailed view at an individual policy level simply retrieve the policy you want to view from your 'My Policies' menu and click on the hyperlink.

This will open up a more comprehensive view (shown on next page) with information including:

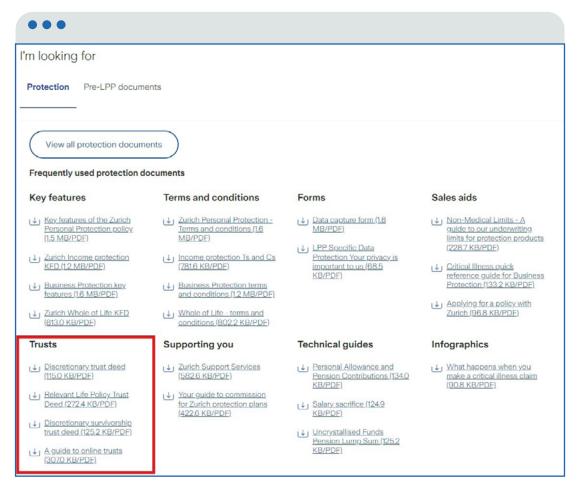
- Your commission type
- A breakdown covering your:
 - Initial commission
 - Including paid, earned, at risk of clawback and total clawed back
 - Renewal commission
 - Including regular amount and commission breakdown





Where can I find blank trust forms?

It's quick and easy to find a range of trust information including guides and deeds in our <u>Document</u> Library, accessible from the intermediary website shown below:



You can also search for the specific type of trust required or filter your content by type using our advanced search options to narrow things down even further.



What happens if my client wants to add or remove a trustee or beneficiary?

We have a range of handy FAQs on our customer website which cater for this exact scenario (as well as a whole heap of other trust related questions).

To enable us to change or retire a trustee or change/add a beneficiary we'll need your client to complete the relevant forms to enable us to prepare the updated deed(s).



Changing or retiring a Trustee



Changing or adding a beneficiary



Can I take back control of an application if I've delegated the underwriting questions to my client?

Yes. You can take back control of the underwriting questions at any time, allowing you to complete them in conjunction with your client. To do this simply:

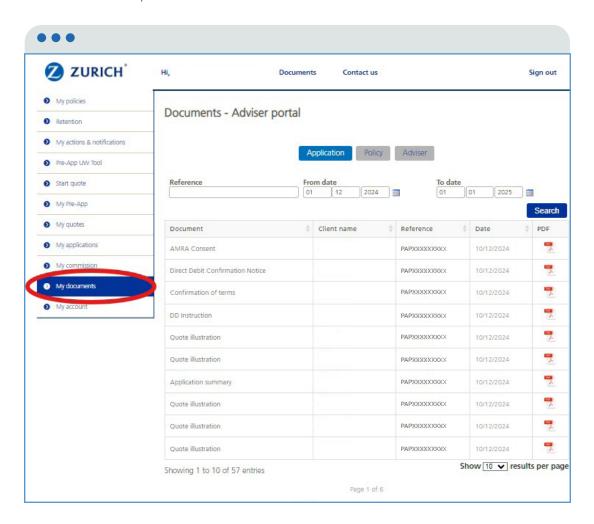
- Retrieve the application as you would normally.
- Click 'unlock'.



Where can I find documents?

Documents created pre or post issue are viewable in the 'My documents' section of the portal shown here.

This includes documents such as the quote illustration, application summary, confirmation of terms, as well as other information such as AMRA consent and direct debit confirmation notices for example.



You can also view pre-issue application documents for a specific application by simply clicking on the case you want to view in the 'My applications' menu.

This enables you to view application or product documents specific to that particular case in isolation.

If you're looking for more generic documents, guides or sales aids you can find these on the intermediary website stored in the document library.



How does my client make a claim?

We recognise that the claims experience is a key moment of truth for our customers, giving us the opportunity to deliver on our promises.

If your client needs to make a claim, it's likely they are going through a difficult time in their life, so we'll help make the claim process as stress free and straightforward as possible from the moment they first contact us.

As always, your client will have access to Zurich Support Services, a free and comprehensive service that offers counselling and full support whenever they need it.

We've also produced a helpful guide to supporting customer's through a bereavement. This covers not only the Zurich process of making a claim but the often much wider considerations when it comes to things like probate etc. Take a look here.

Life, Critical Illness, Income Protection, Children's Cover, TPD, Waiver of **Premium and Multi-Fracture**



0370 240 0073



zurichmulticlaims@uk.zurich.com

Zurich Assurance **Protection Operations** PO Box 4157 Swindon

SN44QB

We will require the following information for Life Claims:

- Policy number
- Name of deceased
- Cause, date and place of death if known
- Name, contact details and relationship to the deceased of the individual claiming

Don't forget, in addition to phone, email and post your client can also notify us of a claim digitally via the website or via their customer portal.

It's important to notify us of a claim as soon as possible to ensure we can gather any supporting information, including medical evidence so we can assess and pay the claim as quickly as we can.

For Critical Illness, Income Protection, Children's Cover, TPD, Waiver of Premium and Multi-Fracture we will require the following information:

- Policy number
- Details of the claim
- GP and Medical Specialist contact details
- Copies of any medical reports relevant to the claim that your client may have

Income protection policies have specific deferred period (4, 8, 13, 26, 52 or 104 weeks) after which benefit is payable. We strongly recommend your client notifies us of their absence as soon as possible as it may be that we can support them by using the services of our Rehabilitation team before the end of the deferred period.

To find out more about the process of making a claim take a look at our claims page on the intermediary website for everything you need to know here.



Does my client have access to a customer portal?

Yes.

When your client takes out a policy we'll invite them to register for the customer portal via email with a unique, time-limited registration link. This link is valid for 60 days, so we recommend they register as soon as possible.

Once registered they'll benefit from 'always on' access to a range of great features, designed to put them in control. This means they can:

- View information about their policy including the sum assured, the type of cover available and the term of their policy.
- Change their address, contact details and the way they choose to receive their documents, including the option to go paperless.
- View and download their policy documents, so they're always to hand.
- Change their bank account details and preferred collection date.

To help your client get acquainted we include a link of our customer portal guide when we invite them to register. Take a look here and feel free to share this with your client.



How can I access plan information on my client's existing policy?

It's quick and easy to access all the information you need by simply searching for the policy you want to enquire on from the 'My Policies' section of your portal, without ever needing to call.

Take a look at our handy article right here for everything you need to know.



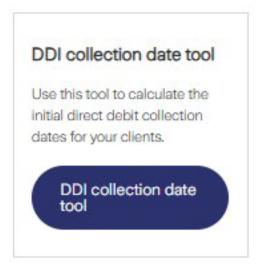
How does the DD collection tool work?

When setting up a policy for your client it's important they're clear on when their first and subsequent collections will come out of their account based on the collection date they've selected.

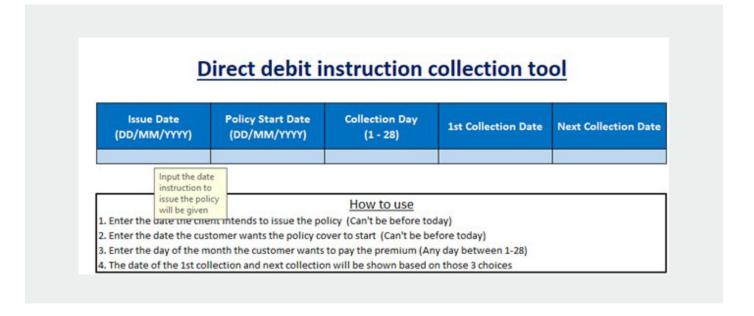
This is especially important if the collection date selected is in close proximity to the date you issue the policy.

Let's start at the top:

- Navigate to the 'tools and guides' page here.
- Scroll to the bottom of the page and click on the DDI collection date tool (shown here):



- The tool will show in your download menu on your computer as an excel file.
- Click on 'open file'.
- The tool will look like this:



- Now simply enter the issue date and policy start date in the format requested and select your client's preferred collection day.
- The tool will then populate with the 1st and next collection dates when payments are due so you can communicate this to your client.

Let's look at a real example

- In this case the issue and commencement dates are the 22nd March and the customer has selected the 28th of the month as their regular collection day.
- This means their first payment will be collected on the 11th April this is because we allow a minimum 10-day advance notice period in line with BACS rules, plus a little extra time to communicate with customers when setting up a new direct debit instruction. As a result, the 11th will be the earliest available date we can collect.
- The next collection will then happen on the 28th April and thereafter each month on the same day.

In this example, it's really important to let the customer know that they'll have 2 x payments debited from their account in a single month. This ensures your client can budget for the double collection and de-risks the chances of the policy accidentally becoming underpaid.

Direct debit instruction collection tool **Policy Start Date** Collection Day **Issue Date** 1st Collection Date **Next Collection Date** (DD/MM/YYYY) (DD/MM/YYYY) (1 - 28)22/03/2025 22/03/2025 11/04/2025 28/04/2025 Choose a date to start the policy. no earlier than How to use today's date 1. Enter the date the client intends to (Can't be before today) 2. Enter the date the customer wants the policy cover to start (Can't be before today) 3. Enter the day of the month the customer wants to pay the premium (Any day between 1-28) 4. The date of the 1st collection and next collection will be shown based on those 3 choices



What is the Rysaffe principle & how does it work in practice?

The Rysaffe principle can be a useful tool for helping to avoid potential tax charges which may apply on the proceeds of life insurance claims where the value of the claim exceeds the nil rate band set by HMRC, and the policy hasn't been written in trust.

By using the Rysaffe principle you can split the total sum assured required on a single high value policy into multiple policies with smaller sums assured, each placed in trust. This helps mitigate the IHT implications of any periodic charges which may apply, provided the sums assured of each of the individual policies fall within the nil rate band.

In practice:

- It's important to apply for the total sum assured required first as a single application.
- Then contact our large case underwriting team or your Protection Specialist to let them know you'd like to split the sum assured using the Rysaffe principle.
- We'll then work with you to facilitate the splits needed and the relevant trust arrangements to ensure everything runs smoothly.
- The premium payable across the individual applications will always aggregate up to the same premium based on the total sum assured originally applied for.

You can find out more about the Rysaffe principle including a practical example of how this works in our handy article here.



How can I turn on 'dark mode' within the adviser portal?

The easiest way to do this is simply to change the contrast settings on the web browser you use to access the portal.

Here's how:

- · Click on your windows start menu on your computer and select 'settings'
- Scroll down to 'Accessibility'
- Now select 'Contrast themes'
- From here you can select various difference options shown in preview.
- To select the option you'd like to apply, simply select from the drop downs shown and click 'apply'
- To remove the background simply click 'none' and 'apply' again to revert it back to its original setting.

You can find out more about digital accessibility and options to customise your experience on our website.

