

Waiver of premium benefit

Your guide to your claim



This leaflet provides you with general information about how we assess and deal with your claim. It's also designed to answer some of the more common questions.

You should also read your policy terms and conditions for specific information about your policy. The information in this leaflet does not replace or alter the terms of the contract in any way. If you need another copy of the terms and conditions you can access them through the customer portal, or we can send them to you.

Our commitment to you

We will deal with your claim as quickly as we can so, if we agree to your claim, we can start paying your premiums for you on the policy as soon as possible.

We look to pay all valid claims quickly and with the minimum of fuss but to protect the interest of all policy holders we will need medical evidence before we can assess your claim.

Data protection

This leaflet explains how we deal with your claim and that we may need to pass your personal details, and sometimes your health details, on to third parties.

When we do this the third party must keep your information confidential under data protection legislation and use it only for your claim.

Zurich holds your personal data as a Data Controller under data protection legislation. We process your data in accordance with that legislation. If you'd like to know more about data protection please ask your adviser for a leaflet, or contact our Data Protection Officer at Zurich Insurance Group, Tri Centre One, Newbridge Square, Swindon, SN1 1HN or by emailing the Data Protection Officer at GBZ.General.Data.Protection@uk.zurich.com.

If you have any concerns regarding our processing of your personal information, or are not satisfied with our handling of any request by you in relation to your rights, you also have the right to make a complaint to the Information Commissioner's Office. Their address is: First Contact Team, Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, SK9 5AF.

Making a claim

You will need to complete a claim form which we require to assess your claim.

The claim form is split into two parts. You should complete the first part as soon as possible and then send it to your doctor to complete the second part.

Please provide as much information as you can and make sure you complete it accurately and honestly, to the best of your knowledge. If you deliberately provide misleading or inaccurate information to claim benefits, you are not entitled to, we may refuse your claim.

The claim form includes a declaration you must sign to confirm the information you have provided is true and complete. By signing the declaration you also confirm that you understand;

- what information we may obtain or supply to third parties to assess your claim, and
- how we will manage your claim.

You should therefore read this leaflet fully before completing the claim form and signing the declaration.

As soon as you have completed section one of the claim form, ask your doctor to complete section two and send it to us in the prepaid envelope we provide. We will pay your doctor's fee for completing section two of the form.

Please return your completed claim form as soon as possible so we can start gathering all the information we need to assess your claim. Your authority to allow us to do this is included within the completed claim form so it's important that you don't delay.

Common questions and answers

What happens once you've received my claim form?

Often the information provided in the claim form will be enough to enable us to complete our assessment of your claim. If we need further information from your doctor, or any other hospital consultant who is responsible for your care, we'll let you know what information we have asked for. We will also keep you informed of progress by telephone, letter or text.

While we are considering your claim you must tell us if there is any change in your circumstances, for example if you are able to return to work part-time.

Will I have to have a medical examination?

After we've received the medical report or reports we may ask you to have an independent medical examination. An independent examiner may help us reach a fair decision for your claim and may also be able to suggest further investigations or treatment that could ease your symptoms or speed up your recovery. If this is necessary we'll supply the independent examiner with copies of any medical reports we had from your doctor or hospital consultant, or both, so the examiner has details of your medical history before conducting the examination.

It may be appropriate to supply your doctor, or any other insurance company who are also considering a claim for you, with a copy of the examiner's report. We will meet the cost of obtaining any medical reports.

Will you contact anyone else for information?

It may be necessary for us to contact your employer, the Department for Work and Pensions, or any other insurance company that you have made a claim with, to get a more complete picture. We may also ask your employer for any other information that is relevant to assess your claim, for example your job description.

We may also contact you by telephone if we need more information from you. If we contact you by telephone, we may record or monitor calls to help improve the quality of our service.

Is there anything I need to do while my claim is ongoing?

If we agree your claim we will start paying your premiums for you on the policy and send you a refund of premiums, if due. While the claim is ongoing you must tell us if there are any significant changes in your circumstances, for example if you return to any form of paid employment.

We'll regularly review your claim and this may mean we need information on your current situation. We may contact you by telephone or ask you to complete a further form so we have up to date information.

Separately to any possible independent medical examination, on occasions we may arrange for a claims visitor to call on you at your home to discuss your claim and circumstances and offer supportive advice.

Do you guarantee to accept my claim until my policy expires or matures?

We'll regularly review your claim, but after agreeing the claim, we will pay the premiums for your policy for as long as you remain incapacitated, as defined in your policy terms and conditions. However, we won't pay your premiums after the waiver of premium benefit on the policy ends. This may be before your policy ends.

If evidence shows that you are no longer incapacitated then we will stop paying the premiums. The benefit may also stop if your circumstances change, for example if the nature of your incapacity changes and we exclude it under the benefit.

What happens when I return to work?

You need to tell us immediately when you return to any sort of work so we can start collecting premiums from your bank account again, and you don't lose the financial protection provided by this policy.

Fraud and exaggerated claims

While most of the claims we receive are from people with genuine claims it is regrettably the case that we find a few claims are false or fraudulent.

To protect other policy holders and Zurich against fraudulent and exaggerated claims it is occasionally necessary to instruct a private investigator to help identify and detect these claims.

This can be necessary before we can agree the claim or while we are paying premiums. We will only instruct a private investigator if there is no other reliable alternative method available or if we have reasons to suspect the claim is exaggerated or fraudulent.

For the purposes of fraud prevention we may also share data with any of our associated companies or with any databases designed to help detect fraud. If we consider that we have enough evidence of fraud we may remove the waiver of premium benefit from the policy. Sometimes it may be necessary to refer the matter to the appropriate police authority.

Please let us know if you would like a copy of this in large print or braille, or on audiotape or CD.

Zurich Assurance Ltd

Registered in England and Wales under company number 02456671. Registered Office: The Grange, Bishops Cleeve, Cheltenham, GL52 8XX. Telephone: 01793 514514.

We may record or monitor calls to improve our service.