

POLICY BOOKLET.

INTRODUCTION

Words that appear in bold are explained in the section headed 'Definitions'.

This Policy Booklet shows **you** the features, benefits and exclusions (things that are not covered) that apply to this product.

WHO IS COVERED?

The **life insured** is covered.

PREMIUMS

Premiums can be paid either monthly or annually and start on the **policy start date**.

Guaranteed premiums

Your premiums are guaranteed and will not change unless **you** make changes to the policy using the options available in section headed 'Changing **your** policy'.

Increasing cover

You may have the option to choose an increasing policy, the premiums will increase in line with the changes in the Retail Prices Index (RPI) multiplied by 1.5 subject to a maximum increase of 15% per annum.

The RPI provides an indication of inflation on a monthly basis. The RPI measures and tracks the average change in the purchase price of goods and services such as housing expenses and mortgage interest payments.

If **you** choose to add Private Diagnostics it will not be included as part of the annual review of **your** policy.

If **you** choose Fracture Cover it will not be included as part of the annual review of **your** policy.

WHAT HAPPENS IF THE PREMIUMS ARE NOT PAID?

We are entitled to cancel the policy if any premiums are not paid within 60 days of their due date. If **we** cancel the policy, **your** cover will end and no further premiums will be payable. **We** will not refund any premiums already paid.

WHAT HAPPENS TO AN ANNUAL PREMIUM IF A CLAIM IS PAID?

If the premium is paid annually and claim is paid, **we** will pay a pro-rata refund of the premium for the remaining months of that year. The policy will end when a claim is paid and no further premiums will be payable.

AMOUNT OF COVER

Level cover

If **you** choose level cover the amount of cover will stay the same unless **you** change it using the options available in the section headed 'Changing **your** policy' during the period of cover.

Increasing cover

You may have the option to choose increasing cover, the amount of cover will increase in line with changes in inflation on each policy anniversary with no need to answer further questions about **your** health.

The amount of cover, including any increases **you** have already accepted, will increase in line with the changes in the Retail Prices Index (RPI) over a 12 month period. If **we** cannot use the RPI, **we** will use an index comparable to the RPI instead.

We will contact **you** at least three months before the policy anniversary to tell **you** what the increase in the amount of cover and premium will be.

If the change in the RPI is less than 1% **we** will not increase the amount of cover.

If the change in the RPI is more than 10% **we** will only increase the amount of cover by 10% per annum.

Your options

Accept the increase

If **you** choose to accept the increase **you** do not need to take any action. **We** will increase the amount of cover and the premium and update **your** direct debit.

In the event of a claim, the amount of cover will continue as described above. This will not apply if **you** declined the increase to the amount of cover in the future.

Decline the increase

When **we** notify **you** of an increase, **we** will also give **you** the option to decline the increase. To decline an increase, **you** must complete and return the form in the letter **we** send to **you** by the date shown.

If you choose to decline the increase to the amount of cover and premium, then **we** will withdraw the option and **you** will not be given the option to increase the amount of cover in the future.

If **you** choose to add Private Diagnostics it will not be included as part of the annual review of **your** policy.

If **you** choose Fracture Cover it will not be included as part of the annual review of **your** policy.

HOW LONG IS COVER FOR?

You are covered from the **policy start date** until the **policy expiry date** unless one of the following occurs first:

- The amount of cover is paid out, or
- If the policy is cancelled by **you** or **us**.

Cover will stop when the policy ends and no further premiums will be payable.

WHAT IS COVERED?

The amount of cover, subject to the exclusions defined in the section headed 'What you are not covered for' is paid if, before the **policy expiry date**, the **life insured**:

- dies
- is diagnosed with a terminal illness

whichever occurs first.

If **you** choose a joint life policy, the amount of cover is paid when either **life insured** dies or is diagnosed with a terminal illness.

Terminal Illness Cover

This is an advance payment of the amount of cover where the **life insured** has a terminal illness.

Terminal illness is defined as a definite diagnosis by **your** hospital consultant of an illness that satisfies both of the following:

- The illness either has no known cure or has progressed to the point where it cannot be cured; and
- In the opinion of **your** hospital consultant and **our** Medical Officer (a qualified doctor employed by Legal & General), the illness is expected to lead to death within 12 months.

No terminal illness claim can be made after the death of the **life insured**.

WHAT YOU ARE NOT COVERED FOR

• Death in the first year

The policy will be cancelled if within the first year of the policy, the **life insured** dies as a result of:

- Suicide, or
- Intentional and serious self-injury, or
- An event where, in **our** reasonable opinion, the **life insured** took their own life.

Assessing a claim for death in the first year

If a suicide verdict is not given **we** may decide in **our** reasonable opinion that the **life insured** has taken their own life. **We** will take into account:

- The method and timing of death.
- The evidence available from the time and place of death.
- Any documentation left by the deceased or available from others.
- Previous medical history that **we** are reasonably entitled to obtain.

• **You** will not be eligible to make a claim under the policy chosen if:

- the **life insured** doesn't meet the definitions for cover as described in the section(s) headed:
 - 'What is Covered'
 - Waiver of Premium
- the premiums under the policy are not up to date.
- The policy is offered or issued subject to the cancellation of a specified policy(ies), and **you** did not cancel it (them).
- During the application process **we** will ask **you** questions about **your** personal circumstances and **we** may request additional information from **you** in order to make an assessment and offer **you** a policy. The **life insured** is required to answer all of **our** questions honestly and accurately.
- a) If **you** (or an agent acting on **your** behalf) deliberately or recklessly provide inaccurate information **we** are entitled to cancel the policy and refuse to pay the amount of cover. In these circumstances **we** may not refund any premiums **you** have already paid.
- b) If **you** (or an agent acting on **your** behalf) provide inaccurate information through carelessness, **we** are entitled to amend the policy to reflect the terms that would have been offered had the accurate information been known. In these circumstances:
 - i. if **we** would not have issued the policy had the accurate information been provided, **we** are entitled to cancel the policy, however **we** will refund any premiums **you** have already paid;
 - ii. if **we** would have issued the policy on different terms and conditions (other than those relating to premiums) had the accurate information been provided, **we** may make changes to the policy terms and conditions and treat the policy as if it had been issued on the different terms and conditions;
 - iii. in addition, if **we** would have issued the policy with higher premiums had the accurate information been provided, **we** may reduce the amount of cover to reflect the higher premiums that would have applied had the accurate information been provided. The following formula will be used in these circumstances:

$$\text{New amount of cover} = \frac{\text{Premium actually charged} \times \text{original amount of cover}}{\text{Higher Premium}}$$

FRACTURE COVER

You can choose to add Fracture Cover for an additional cost at the start of the policy as long as this is before the **life insured's** 64th birthday. If **you** choose a joint life policy **you** can add Fracture Cover for one or both lives insured.

Fracture Cover is insured by **AXIS Specialty London (the insurer)** with all claims processed by **Trustedoctor**. Fracture Cover is arranged through Legal & General Partnership Services Limited as agent of **the insurer**.

When does cover apply?

Fracture Cover is an annually renewable benefit. It begins at the inception date of **your** policy but will not be renewed if:

- the policy ends, in which case it will end on the **policy end date**; or
- **you** can't renew the benefit because:
 - the **life insured** is resident outside of the **UK**; or
 - **our** relationship with **Trustedoctor** or **AXIS Specialty London** comes to an end; or
 - there has been any change of law, regulatory requirement or taxation which means **we** can no longer offer Fracture Cover.

There may be circumstances where **we** are no longer able to offer this benefit. If this applies, then **we** will contact **you** with reasonable notice, remove the benefit from **your** policy and recalculate **your** premiums accordingly.

We will contact **you** 30 days before the **renewal date** to let **you** know if **your** premium or the terms and conditions of the benefit have changed. **We** will let you know what you need to do and if:

- **you** chose to opt out from automatically renewing. If so, **your** cover will stop the day before the **renewal date**. **You** can still renew **your** cover by contacting us at least five days before the **renewal date** using one of the methods shown in the section headed 'Useful Contacts'
- **you** chose to automatically renew. If so, **your** cover will automatically continue on the **renewal date**, even if the premiums have changed. **You** must tell **us** at least five days before the **renewal date** if you don't want to renew. **You** can cancel the automatic renewal feature at any time, using one of the methods shown in the section headed "Useful Contacts"
- **we** won't renew the option. If this happens, the policy will continue without Fracture Cover and **we** will recalculate **your** premium
- the scenario arises where **your** policy is due to end in less than 12 months at the **renewal date**. If this happens the benefit will end at the same time as **your** policy.

You can cancel the benefit at any time. If **you** do the premium for **your** policy will be recalculated. The benefit cannot be reinstated later.

What is covered?

The insurer will cover the **life insured** if they fracture a bone, dislocate a joint, rupture a tendon or tear a ligament as listed in the table below. A payment will only be made to the life insured if the injury happens more than seven days after the policy start date.

Where **you** make a claim for multiple injuries as a result of the same event the policy will pay only the injury with the highest payment amount. There is no limit to the number of claims for separate events you can make during the term of the policy however the maximum amount **the insurer** will pay out for each person that is covered in any policy year is £4,000. A policy year runs from the start date of the policy to the day before the policy anniversary date, and each subsequent anniversary date.

You will need to make sure the premiums for **your** policy continue to be paid until the insurer agrees to pay the claim. As this type of claim doesn't end the policy, **your** cover will continue with no change to your amount of cover. **You** will need to ensure your premiums are paid after the insurer has paid the claim if you want to continue with Fracture Cover as an additional benefit.

The insurer will pay the amount specified for each **fracture, dislocation, tendon rupture or ligament tear** shown in the table below, or in the event of multiple injuries the highest of the amounts shown, subject to the annual limit of £4,000 per policy year.

	Type of injury
Payment per injury	Fracture The specified fractures are covered unless the fracture is classified as avulsion, fatigue, stress, hairline, chip or microfracture.
£750	Breast bone: Sternum Foot: Metatarsals, Cuneiform, Cuboid, Navicular, Calcaneus excluding all digits (phalanges) Hand: Metacarpal excluding digits (phalanges) Shoulder blade: Scapula
£1,000	Collar bone: Clavicle Facial and jaw bones: Zygomatic, Mandible, Maxila, Nasal, Lacrimal, Palatine, Vomer, Inferior nasal concha Ribs
£1,500	Lower arm: Radius, Ulna Wrist: Distal radius, Distal ulna, Carpal bones
£2,000	Lower leg/ankle: Tibia, Fibula, Talus Spine: Vertebra, Cervical, Thoracic, Lumbar, Sacrum, Coccyx excluding injury to the spinal discs Upper arm: Humerus
£2,500	Knee: Patella Pelvis: Ilium excluding ramus
£3,000	Upper leg/hip: Femur
£4,000	Skull: Cranium only excluding facial bones and jaw bone
Payment per injury	Dislocation All joints are covered for dislocation except fingers, thumbs and toes (phalanges). This is defined as the displacement of bone from its normal position at the joint requiring either regional, local, spinal or general anesthesia (not including sedation).
£1,500	Shoulder
£2,000	Elbow Jaw Middle ear bones: Ossicular chain disruption Wrist
£2,500	Ankle: Talus Knee: Joint, Patella Spine: Vertebra, Cervical, Thoracic, Lumbar, Sacrum, Coccyx excluding injury to the spinal discs
£3,000	Hip
Payment per injury	Achilles tendon rupture This covers the complete transection of the Achilles tendon.
£2,000	Achilles tendon
Payment per injury	Knee ligament tear This covers the complete tear of a cruciate knee ligament . Tears to collateral knee ligaments are not covered.
£2,000	Knee: Anterior cruciate ligament (ACL), Posterior cruciate ligament (PCL)

Trustedoctor portal

To make a claim the **life insured** will need to register for the **Trustedoctor** portal. The **life insured** will receive an email from **Trustedoctor**, or they can use the following link www.trustedoctor.com/landg-fracture-cover, which will provide the **life insured** with instructions on how to activate their account to get access to their personal dashboard. Once the **life insured** has activated their account they can access their personal dashboard at any time.

The **life insured** can claim at any time within the Fracture Cover policy term. All claims are managed by **Trustedoctor**.

When will a fracture claim not be paid?

AXIS Specialty London will not pay a claim for Fracture Cover:

- if the **fracture** is classified as **fatigue, hairline, stress, avulsion**, chip, or **microfracture**
- if injury occurs as a result of a surgical procedure (for example: **microfractures** performed in the context of a surgical operation with the purpose of helping to repair areas of damaged cartilage)
- if the injury occurs in the presence of **osteoporosis** or **pseudoarthrosis**
- if the injury is self-inflicted
- if the injury occurs as a result of a cosmetic surgical procedure
- if the injury occurs while taking part in any of the following:
 - extreme sports including, but not limited to, mountain boarding, parkour, cliff jumping, coasteering or base jumping
 - football
 - Gaelic football, hurling or shinty
 - horse riding
 - martial arts, boxing or cage fighting
 - motor car or motorcycle sport
 - mountaineering, rock climbing, abseiling, caving or potholing
 - off road mountain biking or BMX
 - private flying, gliding, paragliding or parachuting
 - rugby
 - skiing or snowboarding
- if the **life insured** is living abroad and does not get a diagnosis in one of the countries **we** accept (**UK**, countries that form part of the European Union, Channel Islands, Isle of Man, Australia, Canada, New Zealand, or the USA). If a report from one of the countries on the list is submitted in a language other than English, a translation must also be provided
- if the injury occurred before **you** took out the benefit (pre-existing condition)
- for any injury that has occurred within the first seven days of taking out a policy
- for a **bodily injury** arising directly or indirectly from a **cyber act**, under any circumstances. However, cover will be provided for **bodily injury** which is accidentally caused by or arises out of a **cyber incident**.

Conditions of Fracture Cover

- Option must be chosen at outset.
- Fracture Cover can only be added if the **life insured** does not already have it on another Legal & General policy.
- **You** can cancel this benefit at any time. If **you** do the premium for **your** policy will be recalculated. This benefit cannot be reapplied to **your** policy.
- Fracture Cover cannot be transferred to another product.
- Making a claim under Fracture Cover will not affect the core product or any other benefits.
- This benefit will end on the earlier of:
 - the day before the policy anniversary date unless renewed, or
 - if the policy ends, or
 - if there is a valid claim under full cover, or
 - if **you** cancel **your** policy or the benefit at any stage
 - if the **life insured** is turning 70 years old during the next **renewal period**.

PRIVATE DIAGNOSTICS

You can choose to add Private Diagnostics for an additional cost at the start of the policy. If **you** choose a joint life policy **you** can add Private Diagnostics for one or both lives insured.

Private Diagnostics is insured by **AXIS Specialty London (the insurer)** with all services provided by **Trustedoctor**. Private Diagnostics is arranged through Legal & General Partnership Services Limited as agent of **the insurer**.

When does cover apply?

Private Diagnostics is an annually renewable benefit. It begins at the inception date of your policy but will not be renewed if:

- the policy ends, in which case it will end on the **policy expiry date**; or
- **you** can't renew the benefit because:
 - **you** are resident outside of the **UK**; or
 - **our** relationship with **Trustedoctor** or **AXIS Specialty London** comes to an end; or
 - there has been any change of law, regulatory requirement or taxation which means **we** can no longer offer Private Diagnostics.

There may be circumstances where **we** are no longer able to offer this benefit. If this applies, then **we** will contact **you** with reasonable notice, remove the benefit from **your** policy and recalculate **your** premiums accordingly.

We will contact **you** 30 days before the **renewal date** to let **you** know if **your** premium or the terms and conditions of the benefit have changed. **We** will let **you** know what **you** need to do and if:

- **you** chose to opt out from automatically renewing. If so, **your** cover will stop the day before the **renewal date**. **You** can still renew **your** cover by contacting us at least five days before the **renewal date** using one of the methods shown in the section headed 'Useful Contacts'.
- **you** chose to automatically renew. If so, **your** cover will automatically continue on the **renewal date**, even if the premiums have changed. **You** must tell us at least five days before the **renewal date** if **you** don't want to renew. **You** can cancel the automatic renewal feature at any time, using one of the methods shown in the section headed "Useful Contacts".
- **we** won't renew the option. If this happens, the policy will continue without Private Diagnostics and **we** will recalculate your premium.
- the scenario arises where **your** policy is due to end in less than 12 months at the **renewal date**. If this happens the benefit will end at the same time as **your** policy.

You can cancel the benefit at any time. If **you** do the premium for **your** policy will be recalculated. The benefit cannot be reinstated later.

What is covered?

Private Diagnostics allows the **life insured** and/or their **child** access to a **specialist** in order to speed up **specialist** consultations and diagnostic testing for **Oncology, Cardiology, Neurosurgery**.

Virtual consultation

A **virtual consultation** appointment with a **specialist** of **your** choice can be made if **you** or **your child** is referred by a General Practitioner (GP) or Physician to one of the following specialties:

- **Oncology**
- **Cardiology**
- **Neurosurgery.**

To access this benefit, you must provide:

- a letter or an email from a UK GP or specialist/physician detailing the reason for the referral
- a referral following a preventive cancer screening
- a medical report from a specialist/physician requesting or documenting the investigation of the suspected conditions.

This benefit includes a support service which will assist the **life insured** in choosing and arranging the **virtual consultation** with a **specialist** through the **Trustedoctor** customer portal.

This benefit covers any of the **life insured's children** that are aged from birth up to their 22nd birthday at the date of starting the **virtual consultation** process.

How many virtual consultations can be booked?

This benefit offers a maximum of:

- a) 3 **virtual consultations**; or
- b) 4 **virtual consultations** when a biopsy is recommended as a result of a prior **virtual consultation**; per policy year for each unique investigation that is the subject of the benefit request.

The purpose of a **virtual consultation** is for the **specialist** to interpret the results of any diagnostic tests available and recommend further diagnostic tests, if required, to progress in the investigation.

In addition to the **virtual consultations** described above, this benefit offers one last virtual consultation to discuss the results of all diagnostic tests previously requested and finalise the response to the request.

For the avoidance of doubt, all lines of investigation that refer to the suspicion of one underlying medical condition will be considered as a single unique investigation.

What diagnostic tests are covered?

- The **specialist** will decide the diagnostic test(s) that are optimal in determining a clinical diagnosis.
- The cost of all **non-invasive diagnostic tests** that the **specialist** recommends will be covered.
- The cost of the following invasive diagnostic tests that the **specialist** recommends will be covered:
 - biopsy
 - endoscopy
 - blood tests

These tests will be carried out in a UK private hospital or facility and will be sourced and arranged via the **Trustedoctor** customer portal.

How many diagnostic tests can be booked?

There is no maximum to the number of diagnostic tests for each unique investigation subject of a valid medical referral. The **specialist** will determine the diagnostic tests required in determining a clinical diagnosis.

If a biopsy is required there is a maximum of one biopsy per unique investigation. However, an additional biopsy may be performed in the event the results of the first biopsy are inconclusive.

Trustedoctor portal

To make a claim the **life insured** will need to register for the **Trustedoctor** portal. The **life insured** will receive an email from **Trustedoctor**, or they can use the following link www.trustedoctor.com/landg-private-diagnostics, which will provide the **life insured** with instructions on how to activate their account to get access to their personal dashboard. Once the **life insured** has activated their account they can access their personal dashboard at any time.

The **life insured** can claim at any time within the Private Diagnostics policy term. All claims are managed by **Trustedoctor**.

What's not covered?

- The cost of any **virtual consultation** or diagnostic test that has not been arranged and authorised through the **Trustedoctor** portal.
- The cost of any expenses for accommodation, travel or taking time off work to attend the **virtual consultation** or the completion of the approved diagnostic tests.
- Any request related to an investigation where symptoms or findings (signs) began before the **policy start date**.
- The cost of any diagnostic test that has not been recommended by a **specialist** as a result of a **virtual consultation**.
- Diagnostic tests for the **life insured's child** if before the **policy start date**:
 - their symptoms existed; or
 - the **illness** or condition had occurred; or
 - either parent received counselling or medical advice in relation of the condition or have been aware of the increased risk of the condition before the **policy start date** or before the legal adoption of the **child**.
- **The insurer** will provide cover for **illness** which is accidentally caused by or arises out of a **cyber incident**. However, they will not provide any cover under any circumstances for **illness** arising directly or indirectly from a **cyber act**.

Conditions of Private Diagnostics

- Premiums must be maintained.
- The benefit cannot be transferred to another product.
- Making a claim under Private Diagnostics will not affect the core product or any other benefits.
- The **life insured** is only eligible for the Private Diagnostics benefit if they don't already have the option on any other Legal & General policy.
- This benefit will end on the earlier of:
 - the day before the policy anniversary date unless renewed, or
 - if the policy ends, or
 - if there is a valid claim under full cover, or
 - if **you** cancel **your** policy or the benefit at any stage.

WAIVER OF PREMIUM

You may have the option to choose Waiver of Premium at the start of the policy, it will be an additional cost.

If the **life insured** meets **our** definition of incapacity for 26 consecutive weeks, **you** won't have to pay premiums. This benefit will start after the 26th consecutive week of incapacity and continue until the earlier of:

- The end of the period of incapacity, or
- Payment of the amount of cover, or
- On the **policy expiry date**.

Incapacity

Depending on the **life insured's** employment status when a claim is made, incapacity is defined as:

The **life insured** is totally incapable of carrying out their normal occupation by reason of an illness or injury which occurred after the **policy start date**, necessitating medical or surgical treatment and is not carrying out any other occupation or paid employment.

Or

If the **life insured** is not in paid employment and they are unable to do three or more of the following Specified Work Tasks as a direct result of an illness or injury which occurred after the **policy start date**:

The Specified Work Tasks are:

Walking	The ability to walk more than 200 metres on a level surface.
Climbing	The ability to climb up a flight of 12 stairs and down again, using the handrail if needed.
Lifting	The ability to pick up an object weighing 2kg at table height and hold for 60 seconds before replacing the object on the table.
Bending	The ability to bend or kneel to touch the floor and straighten up again.
Getting in and out of a car	The ability to get into a standard saloon car, and out again.
Writing	The manual dexterity to write legibly using a pen or pencil, or type using a desktop personal computer keyboard.

The **life insured** may be required to have a medical examination by an appropriate medical specialist appointed by **us** regardless of the incapacity definition applied at claim.

Countries where this benefit is provided

The **life insured** is covered for Waiver of Premium if they:

- reside or travel within the UK,
- reside or travel within the European Union, or
- travel outside of the UK or European Union for no more than three consecutive months in any 12 months.

If the **life insured** travels outside of the UK or the European Union for more than three consecutive months in any 12 months **we** will act reasonably when assessing whether the **life insured** meets the definition of incapacity.

For details about how to make a Waiver of Premium claim, please see the section headed 'Making a claim'.

CHANGING YOUR POLICY

On the occurrence of specified events **you** have the option to increase the amount of cover without the need for further medical information. To do this the policy must be taken out before the **life insured's** 55th birthday. This option may not be available if **we** apply a premium increase to **your** cover as a result of the information **you** give **us** in **your** application. **Your** policy documents will explain if this option is available to **you**.

If the following do not apply when **you** want to change **your** cover then there are alternative ways outlined in the section headed 'Other Changes'.

You can increase the amount of cover without answering any more medical information in the event of:

- a) the **life insured** entering into marriage or a registered civil partnership, or
- b) the **life insured** gets divorced or dissolves a registered civil partnership, or
- c) the birth of the **life insured's child**, or
- d) the **life insured** legally adopting or becoming the legal guardian of a **child**, or
- e) an increase in the **life insured's** earnings due to a change of employment or promotion, or
- f) an increase to the **life insured's** rent by reason of an increase imposed by the **landlord** or moving in to a new rental property.

This option must be used within six months of the event and if **we** request relevant documents in relation to the events, **you** must provide them to **us**.

The amount cover can increase by

For all increases, the amount of cover may only be increased on each occasion by the lower of:

- 100% of the original cover, or
- £1,400 per month, or
- If e) above applies, the percentage increase in **your** monthly earnings, or
- If f) above applies, the amount of the increase in the **life insured's** rent.

The option can be used multiple times, but the total of all increases must not exceed the maximum total permitted of £1,400 per month.

How we provide cover for an increase

If **you** use this option an additional policy will be issued in respect of the increase, which will:

- not allow **you** to increase **your** cover without additional medical evidence,
- not extend beyond the **life insured's** 65th birthday or one year after the **policy expiry date** of this original policy, whichever is earlier,
- only have increasing cover if this option is selected when the policy is taken out and the option to increase has been accepted by **you** at all policy anniversary dates and,
- be subject to the premiums, terms and conditions for such policies at the time the additional policy is issued.

In circumstances where **we** no longer offer the chosen policy at the time **you** wish to use this option, **we** will offer **you** a reasonable available alternative.

When this option is not available

This option will not be available to **you**:

- After the **life insured's** 55th birthday. If two people are covered this applies to the older **life insured**.
- If a claim under Waiver of Premium has been made until the end of the period of incapacity,
- If the **life insured** has been diagnosed with or is receiving or has received medical treatment for **our** definition of:
 - A terminal illness

JOINT LIFE POLICY SEPARATION

If **you** take out a joint life policy **you** can separate it if:

- a) **you** divorce, or
- b) **you** dissolve **your** registered civil partnership, or
- c) either of **you** take out a different rental agreement in one name:

We will cancel this policy and start a new single life policy for each **life insured**.

You must make the request within six months of the event being finalised.

What we need to process your request

- a) Evidence to support **your** request in the form of:
 - i. A decree absolute if **you** get divorced, or
 - ii. A final order for the dissolution of **your** registered civil partnership, or
 - iii. Proof of the rental agreement.
- b) The consent of both lives insured by completing and returning an amendment form issued by **us**, which includes a short questionnaire about the **life insured's** health, medical history, residency and leisure activities.
- c) If either **life insured** answers 'yes' to any of the questions in the amendment form, **we** will require **you** to complete a full application form in order to set up a single life policy. Where **we** undertake a full medical and lifestyle assessment, depending on the answers there may be circumstances where **we** may not be able to offer cover to both of the lives insured.

How we will provide cover

- a) The new single life policies will include the same cover as the original policy. **We** will not change the cover in any other way, other than making it a single life policy.
- b) The new single life policies will be subject to premiums, terms and conditions available at the time **you** make the change.
- c) The maximum amount of cover for each new policy will be the lower of:
 - The amount of cover on the original joint life policy, or
 - £5,000 per month.
- d) The term of each new policy will not extend beyond the **life insured's** 70th birthday or one year after the **policy expiry date**, whichever is earlier.

OTHER CHANGES

You can request any of the following changes to the policy:

- Increase or decrease the amount of cover.
- Extend or reduce the period of cover.
- Remove a **life insured**, if joint life cover is chosen.
- Change the frequency of **your** premiums between annually and monthly.

What we may need to process your request

- a) **Your** consent to the changes by completing and returning an amendment form issued by **us**, which includes a short questionnaire about the **life insured's** health, medical history, residency and leisure activities.
- b) If the **life insured** answers 'yes' to any of the questions in the amendment form, **we** may require **you** to complete a full application in order to make the changes to the policy. Where **we** undertake a full medical and lifestyle assessment, depending on the answers there may be circumstances where **we** may not be able to offer cover to both of the lives insured.
- c) Any documents reasonably required by **us** to support **your** request.

How we will provide cover

We will confirm if the change **you** have requested means the original policy has to be cancelled and a new policy issued, which may have different terms and conditions.

Any changes **you** make may affect the premiums that are payable.

We will confirm the change **you** have made.

GENERAL CONDITIONS

- **We** may make changes to the policy terms and conditions that **we** reasonably consider are appropriate due to a change in any applicable legislation, regulation or taxation. In such circumstances, **we** will notify **you** in advance of any changes being made.
- **We** have the right by notifying **you** to:
 - i. cancel this policy; and
 - ii. not pay a claim on this policy; and
 - iii. take other reasonable action

in order to comply with laws, regulations, sanctions regimes, international guidance and/or demands from any authorities, relating to Financial Crime Risk Management Activity.
- The policy is governed by English Law.
- All communication in relation to the policy will be in English.
- The right to exercise any option under the policy or to exercise any right conferred by the policy is limited to such as are allowed in the terms of the policy and as are compatible with the requirements of Paragraph 19(3) of Schedule 15 of the Income and Corporation Taxes Act 1988 for a qualifying policy.

MAKING A CLAIM

Notifying us of a claim

To make a claim under the policy, please notify **us** using **our** claims contact details in the section headed 'How to Contact us'. When claiming **we** will need the policy number, the **life insured's** GP/Doctors contact details and **your** contact details.

Type of Claim	What we need
Life cover	The date of death
Terminal Illness Cover	Details of the illness and diagnosis
Fracture Cover	<p>To make a claim the life insured will need to register for the Trustedoctor portal. The life insured will receive an email from Trustedoctor, or they can use the following link www.trustedoctor.com/landg-fracture-cover, which will provide the life insured with instructions on how to activate their account to get access to their personal dashboard. Once the life insured has activated their account they can access their personal dashboard at any time.</p> <p>The life insured can claim at any time within the Fracture Cover policy term. All claims are managed by Trustedoctor.</p>
Private Diagnostics	<p>To make a claim the life insured will need to register for the Trustedoctor portal. The life insured will receive an email from Trustedoctor, or they can use the following link www.trustedoctor.com/landg-private-diagnostics, which will provide the life insured with instructions on how to activate their account to get access to their personal dashboard. Once the life insured has activated their account they can access their personal dashboard at any time.</p> <p>The life insured can claim at any time within the Private Diagnostics policy term. All claims are managed by Trustedoctor.</p> <p>Trustedoctor will help them navigate the customer portal and assist the life insured in selecting an appropriate specialist for their presenting symptoms.</p>
Waiver of Premium	<p>You must notify us of a claim within 16 weeks of the start of the life insured's incapacity, otherwise we will consider the start of their incapacity to be 16 weeks before the date we are told. We may not insist on this if there are exceptional medical or other reasons why you cannot tell us within 16 weeks of the start of incapacity.</p>

ASSESSING YOUR CLAIM

We may send **you** a claim form to complete and return to **us**. In order to assess **your** claim **we** will require different evidence depending on the type of claim **you** are making.

We may also ask for the Policy Booklet and any other documents **we** may reasonably require for the claim **you** are making.

Type of Claim	Evidence required
Life Cover	The death certificate of the life insured
Terminal Illness Cover	Proof that the definition has been met
Fracture Cover	If the life insured makes a claim for Fracture Cover they will be asked for copies of medical evidence from a doctor or surgeon confirming full details of the fracture or injury. Trustedoctor reserve the right to obtain radiological images or other objective evidence to confirm the claim.
Private Diagnostics	The life insured must provide written evidence from their GP or Physician of the referral, either in the form of a letter or email detailing the reason for the referral.
Waiver of Premium	Proof that the relevant incapacity definition has been met

If **you** do not provide any information or documentation that would reasonably be required to assess the claim, **we** will not process the claim until the information or documentation is made available.

WHO WE PAY THE COVER TO

The amount of cover is paid to **you**. In most cases, this means that **we** will make payment directly to the legal owner of the policy, or if that person is dead, to their personal representative (usually the executor named in their will). This also means that if the policy has been placed in trust, **we** will make payment to the trustees, and if the policy has been assigned, **we** will make payment to the assignees.

PAYMENT OF COVER

We will pay a claim for any of the cover described in the section headed 'What is covered' as a **monthly benefit**. **You** may request to receive the amount of cover as a **commuted lump sum**. Cover can only be paid in pound sterling (GBP) to a bank account in the UK. If **you** wish to receive payments outside the UK, then arrangements for such transfers must be made at **your** own expense.

REPLACEMENT COVER

If **you** choose to take out a joint life policy and one of the lives insured makes a valid claim under full cover, as defined in the section headed 'What is covered', **you** can request to continue cover for the other **life insured** as a new single life policy.

You must request this option within six months of a valid claim under full cover being paid.

What we need to process your request

- The consent of the **life insured** who hasn't claimed under full cover, by completing and returning a replacement cover form issued by **us**, which includes a short questionnaire about the **life insured's** health, medical history, residency and leisure activities.
- If the **life insured** who hasn't claimed under full cover, answers 'yes' to any of the questions in the replacement cover form, **we** will require **you** to complete a full application form in order to set up a single life policy. Where **we** undertake a full medical and lifestyle assessment, depending on the answers there may be circumstances where **we** may not be able to offer cover to the **life insured**.

How we will provide cover

- a) The new single life policy will include the same cover as the original policy. **We** will not change the cover in any other way, other than making it a single life policy.
- b) The amount of cover will be the same as the original policy.
- c) The term of the new policy will not extend beyond the **life insured's** 70th birthday or one year after the **policy expiry date**, whichever is earlier.
- d) The new single life policy will be subject to premiums, terms and conditions available at the time **you** make the change.

USEFUL CONTACTS

Reason for contact	Contact details	Contact address
General Enquiries Change the policy Cancel the policy	0370 010 4080 * protection.customerenquiries@landg.com	Legal & General Assurance Society Limited City Park The Droveaway Hove East Sussex BN3 7PY
Claims for: Death or Terminal Illness Cover Waiver of Premium	0800 137 101* 0800 068 0789*	Legal & General Assurance Society Limited City Park The Droveaway Hove East Sussex BN3 7PY
Claims for: Fracture Cover and Private Diagnostics	Fracture Cover Web: www.trustedoctor.com/landg-fracture-cover Email: landgfracturecover@trustedoctor.com Private Diagnostics Web: www.trustedoctor.com/landg-private-diagnostics Email: landgprivatediagnostics@trustedoctor.com	Trustedoctor PO Box 77845 London SE10 1FH
Make a complaint: Legal & General	0370 010 4080*	Legal & General Assurance Society Limited Knox Court 10 Fitzalan Place Cardiff CF24 0TL
Make a complaint: Fracture Cover and Private Diagnostics	AXIS Specialty London Tel: 0207 050 9000 Fax: 0207 050 9001 Email: complaints@axiscapital.com	Complaints AXIS Specialty London C/o 52 Lime Street London EC3M 7AF

***We** may record and monitor calls. Call charges will vary.

HOW TO CANCEL THE POLICY

You can cancel the policy at any time. Once the policy starts **we** will provide **you** with a notice of **your** right to cancel.

If **you** cancel the policy within 30 days of receiving both the notice and the policy, **we** will refund any premiums paid.

If **you** cancel the policy after 30 days and pay monthly premiums, **you** will not get any money back. If **you** pay annually, **you** will receive a proportionate refund of **your** annual premium.

If **you** cancel the policy, the cover will end and no further premiums will be payable.

HOW TO MAKE A COMPLAINT

If **you** wish to complain about the service **you** receive from **us**, or **you** would like **us** to send **you** a copy of **our** internal complaints handling procedure, please contact **us**.

If **you** remain dissatisfied, **you** can complain to:

The Financial Ombudsman Service
Exchange Tower
London
E14 9SR

Telephone:

- 0800 023 4567
- 0300 123 9 123

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

Website: www.financial-ombudsman.org.uk

Making a complaint will not affect **your** legal rights.

THE FINANCIAL SERVICES COMPENSATION SCHEME (FSCS)

The FSCS is designed to pay compensation if a firm is unable to pay claims, because it has stopped trading or been declared in default.

So, if **we** run into financial difficulties, **you** may be able to claim via the FSCS, for any money you've lost. However, before looking to pay compensation, the FSCS will first see if they can arrange for the continuity of **your** current policy. The FSCS may arrange for the policy to be transferred to another insurer or arrange for a new policy to be provided.

Most of **our** customers, including most individuals and small businesses, are covered by the FSCS. Whether or not **you** can claim, and the amount **you** could claim, will depend on the specific circumstances of **your** claim. The FSCS will pay 100% of the value of the claim.

You can find out more about the FSCS, including eligibility to claim, by visiting its website

www.fscs.org.uk

or calling

0800 678 1100.

The rules of the FSCS might change in the future and the FSCS may take a different approach on their application of the above, depending on what led to the failure.

SOLVENCY AND FINANCIAL CONDITIONS REPORT (SFCR)

Legal & General are required to publish an annual Solvency and Financial Condition Report (SFCR) describing **our** Business and its Performance, **our** System of Governance, Risk Profiles, Valuation for Solvency Purposes and Capital Management. **Our** latest SFCR is available at:

www.legalandgeneralgroup.com/investors/library.

DEFINITIONS

Avulsion fracture - is a bone fracture that occurs when a fragment of bone detaches from the main bone due to the pulling away of a ligament, tendon, joint capsule, or fascia that is attached to it.

AXIS Specialty London or the insurer for Fracture Cover and Private Diagnostics - **AXIS Specialty London** is a trading name of AXIS Specialty Europe SE. AXIS Specialty Europe SE is authorised and regulated by the Central Bank of Ireland. Authorised by the Prudential Regulation Authority. Subject to regulation by the Financial Conduct Authority and limited regulation by the Prudential Regulation Authority. Details about the extent of our regulation by the Prudential Regulation Authority are available from us on request. Our privacy policy can be viewed at: www.axiscapital.com/who-we-are/about-axis/privacy-policy

Benefit renewal period -The 12 month period between the **policy start date** to the day before the anniversary of the policy, and each 12 month period thereafter if the benefit has been renewed.

Bodily injury - Means identifiable physical injury which is caused by an accident.

Cardiology -The area of specialism for the diagnosis and treatment of heart disease.

Child or children - A natural **child**, legally adopted **child** (from the date of adoption) or stepchild (by marriage or registered civil partnership) of the **life insured**, where that **child** is younger than 22 years during the period of cover.

Commuted lump sum -The **commuted lump sum** is the amount of money **we** would calculate by multiplying the **monthly benefit** by the number of months remaining until the policy expiry date. **We** would then, acting fairly and reasonably, reduce this total amount to reflect the fact that **you** would be receiving all of the **monthly benefits** due in advance.

This reduction would reflect the expected return **we** would have received on the commuted lump sum payment if **we** had paid the amount of cover to **you** as a series of monthly benefits rather than as a single lump sum payment in advance.

Computer system - Any computer, hardware, software, communications system, electronic device (including, but not limited to, smart phone, laptop, tablet, wearable device), server, cloud or microcontroller, including any similar system or any configuration of the aforementioned and including any associated input, output, data storage device, networking equipment or back up facility, owned or operated by **you** or any other party.

Cyber act - For the purpose of this document **cyber act** means:

- i. a deliberate, unauthorised, malicious or criminal act;
- ii. a series of related deliberate, unauthorised, malicious or criminal acts; or
- iii. any threat or hoax relating to i and/or ii above,

regardless of time and place, involving access to or the processing, use or operation of any **computer system**.

Cyber incident - For the purpose of this document **cyber incident** means:

- i. any error or omission or series of related errors or omissions involving access to or the processing, use, or operation of any **computer system**; or
- ii. any partial or total unavailability or failure or series of related partial or total unavailability or failures to access, process, use or operate any **computer system**.

Dislocation -The displacement of bone from its normal position at the joint requiring surgical intervention undertaken in a medical facility, which includes local injection.

Fracture/s - a break in the full thickness of a bone which is identified by an x-ray, or in the case of a fracture which is unable to be x-rayed, by confirmation from a qualified medical practitioner in the form of a medical discharge summary.

Illness - means **your** sickness or disease the symptoms of which first appear during the period of insurance and which results solely and independently of any other cause in **your** total disablement within twelve consecutive months after the symptoms first appear.

Landlord –The person(s) who owns the property that the rental agreement applies to.

Life insured -The person whose life is covered under the policy. If there is more than one life covered then this definition covers all lives insured.

Ligament tear - A complete tear of a cruciate ligament in the knee joint confirmed by radiological imaging.

Microfracture - is a microdamage that accumulates in bone as a result of physiological loading. The damage is often manifested as microcracks, which are typically 50-100mm long.

Monthly benefit – This is the amount of cover, paid to **you** in monthly instalments until the end of the policy, unless **you** choose for it to be paid as a **commuted lump sum**.

Neurosurgery - The area of specialism for the diagnosis and treatment for conditions of the brain, spine, and nervous system.

Non-invasive diagnostic tests - means any diagnostic tests that do not necessitate a medical device invading the human body, either through an incision (creating a point of entry cutting skin or tissue) or utilising an existing body orifice.

Oncology - The area of specialism for the diagnosis and treatment of cancer.

Osteoporosis - A disease that causes thinning of the bone.

Our, us or we - Legal & General Assurance Society Limited.

Physician - A person who is qualified to practise medicine who is registered, or provisionally registered, with the General Medical Council and licensed to practice in the UK.

Policy expiry date - The date that cover under the policy will end.

Policy start date - The start date of the policy.

Pre-existing injury - any injury which were reported, diagnosed, treated or which showed related medically documented symptoms or findings (signs) before signing up for an insurance policy. This includes multiple injuries sustained over time by insured in the same place as the claimed injury.

Pseudarthrosis - Pseudarthrosis or non-union is a disease that occurs when a broken bone fails to heal after a **fracture** unless intervention (surgery) is performed.

Renewal date - The annual anniversary of the start date.

Self-inflicted - an injury is self-inflicted when it is the result of the act of intentionally harming one's own body.

Specialist - A doctor registered, or provisionally registered, with the General Medical Council and licensed to practice in the UK accessed through the **Trustedoctor** platform.

Stress/fatigue/hairline fracture - is a small crack in one of the bones caused by repetitive force.

Tendon rupture - An injury involving the rupture of a tendon requiring surgical intervention.

Trustedoctor - Trustedoctor is a company that specialises in the development of technology solutions and services, including Fracture Cover and Private Diagnostics. These technology solutions and services can be found in the products designed and operated by its sister company, **Further Underwriting International SLU** (registered address at Paseo de Recoletos 12, 28001, Madrid, Spain, registered in the Mercantile Registry in Madrid number m-327635, tomo 18794, folio 76 and tax number (CIF) ESB83644484).

UK - England, Northern Ireland, Scotland, and Wales, Crown employee (member of the **UK** armed forces, a civil servant or a diplomat), or merchant Navy.

Virtual consultation - A virtual meeting conducted through the **Trustedoctor** portal.

You or your - The owner(s) of the policy who is/are legally entitled to receive the amount of cover when a valid claim is made. This may include trustee(s), assignee(s) or personal representative(s) (where appropriate) and may be the **life insured**.

Alternative formats

If you would like a copy of this in large print, braille, PDF or in an audio format, call us on **0370 010 4080**. We may record and monitor calls. Call charges will vary.



www.legalandgeneral.com

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Registered in England and Wales No. 00504500

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