





"With clients in over 120 countries around the world"



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Welcome to REGENCY

Regency Employee Benefits is a provider of comprehensive Life Insurance protection for globally mobile individuals throughout more than 120 countries. Our life Insurance policies are designed to form part of your long term financial planning, offering cost effective financial protection for you, your family members, your employees and their family members in the event of an untimely loss.

Regency Employee Benefits is part of the international insurance and finance company - Regency Assurance - an organisation that brings together a tradition of financial strength and security with a forward thinking and customer focused approach to the underwriting and management of insurance and pension programs.

As the preeminent provider of insurance and pension solutions to individuals, companies and governmental organisations around the world, Regency Assurance is recognised for its ability to implement risk managed and results driven solutions.

With licences to carry out multiple insurance and pension lines of business, the company's position within the global financial industry has led the company to be considered by many as the first port of call for integrated financial risk management products and services.

Today, Regency Employee Benefits products can be found in over 120 countries around the world, with its influence on international financial markets and business practices going beyond those geographical jurisdictions.





UNITED NATIONS GLOBAL COMPACT

The UN Global Compact is a strategic policy initiative for businesses that are committed to aligning their operations and strategies with ten universally accepted principles in the areas of human rights, labour, environment and anti-corruption. By doing so, business, as a primary driver of globalisation, can help ensure that markets, commerce, technology and finance advance in ways that benefit economies and societies everywhere.

As social, political and economic challenges (and opportunities) - whether occurring at home or in other regions affect business more than ever before, many companies recognise the need to collaborate and partner with governments, civil society, labour and the United Nations.

This ever-increasing understanding is reflected in the Global Compact's rapid growth. With over 12,000 corporate participants and other stakeholders from over 145 countries, it is the largest voluntary corporate responsibility initiative in the world.

Endorsed by chief executives, the Global Compact is a practical framework for the development, implementation and disclosure of sustainability policies and practices, offering participants a wide spectrum of work streams, management tools and resources - all designed to help advance sustainable business models and markets.

As the world's largest corporate citizenship and sustainability initiative, Regency Employee Benefits is proud to be a member of and support the United Nations Global Compact and has integrated the principles of the program within the overall visions, values and international operating standards of Regency Employee Benefits.

GLOBAL REACH

Supporting the international community in over 120 countries around the world

Regency Assurance has been recognised for its truly global reach and its ability to implement worldwide solutions that have not only provided international consistency for clients but have also ensured that insured persons can receive peace of mind that coverage is able to reflect their environment no matter where they are in the world.



Cross-border solutions

This international experience has been especially beneficial for the expatriate community where global mobility is a key characteristic of their lives and the need for cross-border financial solutions.



Trusted protection

With over 10,000 insurance and financial services agents around the world, Regency Employee Benefits has been able to establish itself as the preferred choice for the international community, with industry professionals trusting Regency to deliver the protection that their clients require.



Global support network

In addition, Regency Employee Benefits has developed a global support network for clients that means wherever they are in the world, they will be able to feel confident that their family's future financial security is protected and their needs supported.



STRENGTH & SECURITY

As part of Regency Assurance, a regulated insurance and financial services company, clients can be confident that Regency Employee Benefits' Life Insurance is delivered on a foundation of financial strength and security that is supported throughout by a customer focused ethos of trust and fairness.

Compliance towards international insurance and financial services standards is at the very heart of the company which operates under long term insurance licenses issued, maintained and monitored through the Nevis Financial Services Regulatory Commission. This not only ensures that the company's practices adhere to highest international standards, but that Regency Employee Benefits is able to meet all liabilities financially whilst sustaining sufficient margins of solvency.

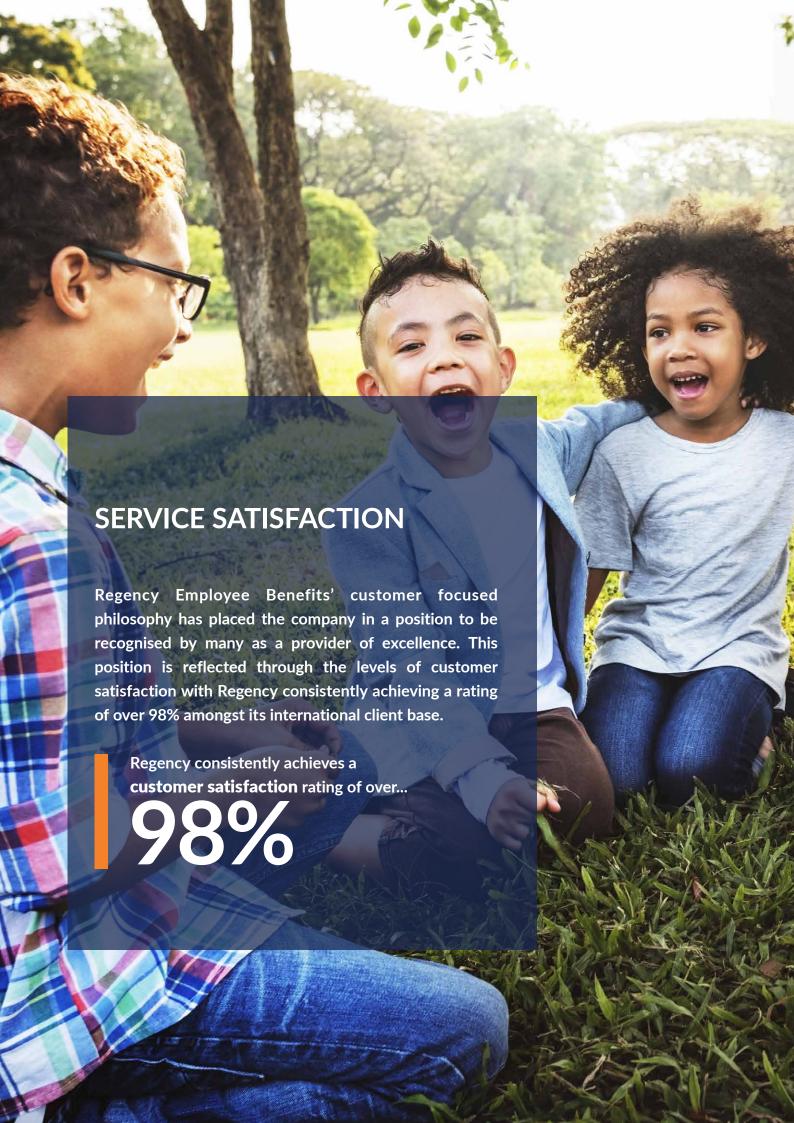




"Safe and secure provider of global insurance"

These regulatory standards have been put in place to lower the burden of risk for insured persons and dramatically increase the financial security that they receive when arranging their insurance programs.

Regency Employee Benefits' attitude towards building financial security and confidence has seen the company instigate an auditable practice. This means that Regency Employee Benefits is able to meet any financial liabilities incurred through the provision of its Life Insurance coverage and has a sustainable financial capacity to meet its operational responsibilities.





SERVICE SATISFACTION

Regency's high levels of customer service satisfaction are as a direct result of their investment in developing a service model that delivers upon clients' needs and requirements, creating a service structure that is tailored to the ever-evolving environment of the international community.

By using the latest technologies, Regency Employee Benefits has been able to streamline the customer experience and eliminate many of the obstacles that are traditionally part of the delivery of customer-centric products and services by the insurance and financial services sector.

At the heart of Regency Employee Benefits' services are its people. A team of highly dedicated professionals committed to the overall vision and values of the company and focused on delivering customer service excellence. Training and development well above industry standards ensures a team whose daily objectives are directly linked to the actual received customer experiences.





Death Benefit

When you take out Regency Employee Benefits Life Insurance the amount of benefit will be agreed and specified within the Certificate of Insurance. The Death Benefit is a vital part of financial planning that can provide peace of mind to your loved ones and family members who have been left behind.

Regency's Death Benefit is designed to provide your beneficiary with an income that will allow them to maintain their lifestyle, thereby removing the worry of financial hardship. If the beneficiary is no longer living, the payment will go to your estate in the event of your death.



Upfront Payment

Regency Employee Benefits' Life Insurance policies are designed to help your beneficiaries from the very first instance. Most claims are settled in full in less than 90 days (unless further information or clarification is required).

Beneficiaries in unfamiliar surroundings at the time of your death will need access to financial assistance to pay for flights and legal expenses; issues with visas, unaccompanied children and red tape may need to be addressed. Within 24-48 hours of receiving official confirmation of your death, Regency will pay 10% of the sum insured to cover these expenses, thereby avoiding unnecessary financial hardship at such a sensitive time.



Child Chaperone

Regency Employee Benefits' Life Insurance is the only policy to include Child Chaperone payments within its cover. It is vital that both you and your beneficiaries have peace of mind that in the event of your death, there will be both financial and practical assistance available to ensure the orphaned children are taken care of and don't become a ward of court. Money will be made available to cover travel expenses to allow next of kin or guardians to collect the children.



Bereavement Counselling

The death of a loved one is a devastating experience which can affect people in many different ways. Regency Employee Benefits offers a valuable Bereavement Counselling service to help family members come to terms with their loss. Beneficiaries are just a phone call away from highly trained Counselling specialists, providing access to vital support in such an emotional time. The policy includes:

- Access to a 24-hour Bereavement Counselling Helpline
- Practical advice
- Counselling by telephone
- Confidential Psychotherapy and Counselling in the event of the death



Mortal Remains Repatriation

In simple terms, Regency Employee Benefits Life Insurance covers the policy holder for the costs associated with repatriating your body to your home country and administrative requirements. Regency's Mortal Remains Repatriation service releases funds and provides access to a team of experienced international advisors. Working in accordance with religious sensitivities, cultural requirements and local laws, the access to upfront funds, support and advice can relieve your loved ones from the unnecessary worry of dealing with the costs of repatriation at such a stressful time.

Regency's Mortal Remains Repatriation also includes advice regarding:

- Clearing customs
- Transportation
- Liaising with local police
- Assistance in dealing with red tape
- Liaising with home country port authorities







24-hour International Assistance

Regency Employee Benefits offers beneficiaries access to a 24-hour multilingual hotline designed to provide practical assistance and peace of mind. Once a request for assistance has been made, the team can take charge of the situation and sort out any issues. The service is designed to ensure loved ones have access to experts who will coordinate the paperwork, logistics and associated costs of a death overseas, no matter where they are in the world. Regency's 24-hour international assistance includes:

- Support for shipping the body home (Mortal Remains Repatriation)
- Administration of all associated policy benefits
- 24-hour helpline
- Case management for the beneficiary
- Assistance in liaising with emergency services
- Review of the post-mortem
- Arrangement of Child Chaperone benefit
- Ensuring access to all policy benefits, including the coordination of access to other relevant Regency policies held by the insured person and/or the policyholder



Geographical Extension

As the leading global insurance provider, Regency Employee Benefits has developed its policies to include the widest range of benefits, including vital Geographical Extension. Regency is the only Life Insurance provider to offer Geographical Extension within its policies. Unlike other providers' policies which include a number of restrictions, Regency Employee Benefits' Life Insurance is geographically transferrable. This means when you buy a policy whilst based in one region (for example Thailand) and then relocate to another country (such as Hong Kong) or even another continent, your policy will follow you. No matter where you go in the world, you will be covered.



Benefit Limit Sum insured Death Benefit shown on Life Insurance payment to the beneficiary(ies) following the death Certificate of of the insured person. Insurance **Upfront Payment** 10% of sum Immediate proportion payment to the beneficiary(ies) following insured the death of the insured person. Child Chaperone Travel costs of next of kin to escort unaccompanied minors Full cover following the death of the insured person. **Bereavement Counselling** Family, Friends and Colleagues telephone access to qualified Full cover psychologists provided by Regency Employee Benefits following the death of the insured person. **Mortal Remains Repatriation** Repatriation of the insured person's mortal remains to power Full cover of attorney's chosen country following the death of the insured person. International Assistance 24-Hour access to Regency Employee Benefits' international Full cover assistance services following the death of the insured person. **Geographical Extension** Anywhere in Geographical area of coverage for insured persons and beneficiaries the World to access Regency Employee Benefits International Life Benefits. Please note that this is a summary only; please read and fully understand the full terms, conditions, exclusions and warranties of the Regency Employee Benefits International Life Insurance policy wording.





POLICY WORDING

This policy document is only valid when issued in conjunction with a Regency Employee Benefits International Life Insurance schedule and provided the required insurance premium has been paid.

The purpose of this insurance policy is to provide a single lump sum payment in the event of a covered death of the insured person.

The cover is subject to certain limits, terms, definitions, conditions and exclusions as set out within the policy wording and certificate of insurance.

Under no circumstances will benefit payments be made unless the terms and conditions of this policy are satisfied.

'Cooling-Off' Period

Please read and fully understand the terms, conditions and exclusions of this policy. If for any reason you feel that this cover or this policy is not suitable for you, you can cancel your policy and receive a full refund of any premiums paid. You must contact Regency Employee Benefits within 14 days of the purchase of this policy and not have made a claim in order to receive a refund.











POLICY WORDING 1 **DEFINITIONS**

The following words and phrases have specific meanings, and are defined as follows:

Accident: An unexpected, unforeseen and involuntary external event resulting in injury to a Member and occurring whilst this policy is in force.

Act of Terrorism: An act, including, but not limited to, the use of force or violence and/or the threat thereof, of any person or group(s) of persons, whether acting alone, on behalf of, or in conjunction with any organisation(s) or government(s), committed for political, religious, ideological or ethnic purposes or reasons, including the intention to influence any government and/or to put the public or any section of the public in fear.

Advice: Any consultation from a Medical Practitioner or specialist.

Benefits: The insurance cover provided by this policy and any applicable endorsements shown in a Member's Certificate of Insurance.

Bodily Injury: An injury that is caused solely by an Accident and results in the Member's dismemberment, disablement or other physical injury.

Certificate of Insurance: A schedule that provides Members with information regarding the plan and benefit options elected by the Policyholder, and lists those Members, including any Dependants, covered by the plan.

Child Chaperone: Travel costs for one economy class round trip for the person who is Next of Kin of Minor(s) who have become unaccompanied Minor(s) following and due to the death of the Insured Person, for the purpose of escorting those unaccompanied Minor(s). Unaccompanied shall be taken to mean without the presence of a responsible adult.

Commencement Date: The date shown on the Certificate of Insurance on which the policy came into effect.

Conflict/Civil Unrest: Any war, invasion, acts of foreign enemy hostilities (whether or not war is declared), civil war, rebellion, revolution, insurrection or military or usurped power, mutiny, riot, strike, martial law or state of siege or attempted overthrow of government or any Act of Terrorism.

Congenital **Anomaly:** Any genetic, physical or (bio)chemical defect, disease or malformation which existed at or before birth, and which may or may not be obvious at birth.

Country(ies) of Nationality: The country (or countries) for which Members hold a valid passport(s).

Country of Residence: The country in which Members habitually reside (for a period of no less than six months per Period of Cover) at the time this policy is first taken out or at each subsequent renewal date.

Cover: Benefits provided to the Member's policy as listed in the Certificate of Insurance.

Date of Entry: The date on which a Member was included under this policy without any break in cover.

Death Benefit: Life Insurance payment to the beneficiary(ies) nominated by the Insured Person and/or the Policyholder prior to the Insured Person's death or to the Insured Person's estate, following the death of the Insured Person.

Dependants: One spouse or adult partner and/or unmarried children who are not more than 18 years old and who are residing with the employee, or 26 years old if in full-time education, at the Date of Entry or any subsequent Renewal Date. The term partner shall mean husband, wife or the person permanently living with the employee in a similar relationship. All dependants must be named in the Certificate of Insurance.

Direct Family Member: Spouse, child, parent or sibling.

Elective: Planned treatment that is Medically

Necessary, but which is not required in an Emergency.

Emergency: A sudden, serious, and unforeseen acute Medical Condition or injury requiring immediate medical care.

Expatriate: Any persons living or working outside their country of citizenship, for a period exceeding six months per Period of Cover.

General Advice: Advice from the relevant professional body.

Hereditary: A disease or disorder that is inherited genetically.

Hospital: An establishment that is legally licensed as a medical or surgical hospital under the laws of the country in which it is situated.

Local National: Any persons living or working in their country of citizenship, for a period exceeding six months per Period of Cover.

Medical Check-ups: Medical tests/ screenings that are undertaken by a Medical Practitioner without any clinical symptoms being present.

Medical Condition: Any injury, illness or disease, including psychiatric illness.

Medical Practitioner: A person who has attained primary degrees in medicine or surgery by attending a medical school

(I) **POLICY WORDING DEFINITIONS**

recognised by the World Health Organisation and who is licensed by the relevant authority to practice medicine in the country where the treatment is given.

Medically Necessary: A medical service or treatment, which in the opinion of a qualified Medical Practitioner is appropriate and consistent with the diagnosis and which in accordance with generally accepted medical standards could not have been omitted without adversely affecting the Member's condition or the quality of medical care rendered.

Member/Insured Person/You/Your: The Policyholder and/or the insured person and/or Dependants named on the Policy schedule or Certificate of Insurance.

Minor: A living person under the age of 18 years who is a family relative of and was in the direct care and custody of, the deceased Insured Person named in the Certificate of Insurance at the time of the death of the Insured Person named in the Certificate of Insurance.

Next of Kin: The closest living relative by blood or marriage OR in the cases of a ward of court, adoption or fostering, a person named by a court of law to represent the role of next of kin.

Period of Cover: The period of cover set out in the Certificate of Insurance. This will be a 12 month period starting from the Date of Entry/Commencement Date or any subsequent Renewal Date, as applicable. Renewal of this Policy is dependent on the Insured Person being alive on the date of expiry/the end date set out on the prevailing Certificate of Insurance

Plan Limit: The maximum amount payable for each Insured Person in any Period of Cover.

Policy: The life insurance policy, our contract of insurance with the Policyholder providing Cover as detailed in the Policy Documentation.

Policy Documentation: The set of policy documents that form a contractual agreement between us and the Policyholder.

These documents include any application forms, the Certificate of Insurance, Benefits and Policy wording terms, conditions and exclusions, and any other supporting documentation.

Policyholder: The person named policyholder in the Policy schedule or Certificate of Insurance.

Provider: A provider who is legally licensed to supply treatment and or services in the country in which it is provided.

Reasonable and Customary Charges: The average amount charged in respect of valid services or treatment costs, as determined by our experience in any particular country, area or region and substantiated by an independent third party, being a practicing surgeon/physician/specialist or government health department.

Related Condition: Any injuries, illnesses or diseases are related conditions if we, on general advice, determine that one is a result of the other or if each is a result of the same injury, illness or disease.

Renewal Date: The anniversary of the Commencement Date of the Policy.

Underwriters: The carrier of risk and payer of Benefits as indicated in the Policy Documentation and Certificate of Insurance.

We/Our/Us: Regency Assurance.



POLICY WORDING CONDITIONS

Policy

This insurance contract consists of the application form and the Policy Documentation, including the Certificate of Insurance, and policy wording. The rights of the Policyholder; or any beneficiary will not be affected by any provision other than the one described above.

Language

This policy is written in English. This Policy may only be completed and interpreted in English and all other information and communications relating to this Policy will also be in English.

Eligibility for Cover

Insured Persons will be eligible for Cover up until the age of 65.

Termination of Cover

Cover may end if:

- You exhaust the maximum aggregate benefit under the plan.
- You fail to reimburse us within 14 days of receipt of notice that we have made payment for a Medical Condition or claim not covered within the terms and conditions of the Policy.

Cover

We will pay the insurance Benefits (specific Benefits will not exceed the corresponding payment limit and the total amount of Benefits will not exceed the mutually agreed maximum insured amount of the Policy).

The insurance contract will provide Cover for deaths occurring during the current Period of Cover.

Tax

We reserve the right to reflect any changes in insurance premium tax or other government levies as may be imposed upon us.

Period of Cover

Your plan and its Benefit(s) are in force for the period of cover noted in your Certificate of Insurance.

Certificate of Insurance

We will provide a Certificate of Insurance for each Member and any eligible Dependants benefitting from Cover under this Policy.

Contribution

If you, or any Dependant named on your Policy, are entitled to claim from any other insurance policy for any of the costs, charges or fees for which you are insured under this contract, you must disclose the same to us and we shall not be liable to pay or contribute more than our rateable proportion.

Change of Risk

The Policyholder or Insured Person must inform us as soon as reasonably possible of any material changes that affects information given in connection with the application for Cover under this Policy. We reserve the right to alter the Policy terms or cancel Cover for an Insured Person following a change of risk.

Declaration of Material Facts

All material facts (e.g., a pre-existing health condition or involvement in a hazardous activity) that may affect our assessment and consideration of an application should be declared. Failure to do so may invalidate your Cover. If you are in doubt whether a fact is material then it should be disclosed.

Break in Cover

Where there is a break in Cover, for whatever reason, we reserve the right to reapply exclusion clause 1 in respect of pre-existing medical conditions.

Claim Adjudication

All claims must be notified as soon as is reasonably practical after the event which causes the claim. Failure to do so may result in our rejection of the claim if it is made so long after the event that we are unable to investigate it fully, or may result in you not receiving the full amount claimed for if the amount claimed is increased as a result of any delay.

If we think that the evidence of the claim submission and the information provided is incomplete, then you will be informed promptly of the required supplementary information. Benefit payments are conditional upon the satisfaction of all terms and conditions, the absence of any applicable exclusions and the complete provision of any required medical or documentary evidence requested by Regency.

We will not pay any interest on any amount payable under this policy.

If any claim is in any respect fraudulent or unfounded, all Benefits paid and/or payable in relation to that claim shall be forfeited and (if appropriate) recoverable. In addition, all Cover in respect of the Insured Persons shall be cancelled void from the Date of Entry.

Applicable Law

The law applicable to this policy shall be construed according to the laws of Nevis.

Subrogation

The policy shall be subrogated to all rights of recovery that Insured Persons have against any other party with respect to any payment made by that party to Insured Persons and/or the Policyholder due to the death of Insured Persons or due to any injury, illness, medical condition Insured Persons sustain to the full extent of the Benefits provided or to be provided by the Policy. If Insured Persons and/or the



Policyholder receive any payment from any other party or from any other insurance cover as a result of an injury, illness, medical condition or death, we have the right to recover from, and be reimbursed by them, for all amounts we have paid and will pay as a result of that injury, illness, medical condition or death, from such payment, up to and including the full amount received. We shall be entitled to full reimbursement from any other party's payments, even if such payment will result in a recovery that is insufficient to fully compensate the Insured Person in part or in whole for the damages sustained.

Insured Persons and/or Policyholders are required to fully cooperate with us in our efforts to recover any payments made including any legal proceedings that we may conduct and proceed with on their behalf at our sole discretion. Insured Persons and/or Policyholders are required to notify us within 30 days of the date when any notice is given to any party, including an insurance company or lawyer, of the Insured Persons' and/or Policyholders' intention to pursue or investigate a claim to recover damages or obtain compensation due to injury, illness or Medical Condition sustained by the Insured Person.

Other than with our written consent, Insured Persons and/or Policyholders have no entitlement to admit liability for any eventuality or give promise of any undertaking that is binding upon them. In the event that any claim or dispute is made in respect of this subrogation or any

part thereof, including, but not limited to, any right of recovery provision which is ambiguous or questions arise concerning the meaning or intent of any of its terms, we shall for the avoidance of doubt have the sole authority and discretion to resolve all disputes regarding the interpretation of this provision.

Membership Applications

We maintain the right to ask you to provide proof of age and/or a declaration of health of any person included in his/her application. We reserve the right to apply additional options, exclusions or premium increases to reflect any circumstances the Insured Person(s) and/or Policyholder(s) advises in their application form or declares to us as a material fact.

You must tell us if you know about anything which may affect our decision to accept your insurance

Medical Evaluation

We reserve the right to request further tests and or evaluation where we have decided that a condition being claimed for may be directly or indirectly related to an excluded condition.

You must give us all the documents needed to deal with any claim as determined by Regency Employee Benefits and you will be responsible for the costs involved in doing so.

policy wording CONDITIONS

All required documents, including but not limited to medical reports, claim submissions, receipts and any other documents needed to deal with any claim must be written in English. You will be responsible for any costs involved in translating any documents.

You must give us permission to obtain any medical reports or records needed from any Medical Practitioner who has treated any Insured Person.

We may ask you to attend one or more medical examination(s). If we do, we will pay the cost of the examination(s) and for any medical reports and records.

If an Insured Person dies, we have the right to ask for a post-mortem examination.

Waiver

Our deviation from specific terms of the Policy Documentation hereunder at any time shall not constitute a waiver of our right to implement or insist upon compliance with that provision at any other time or times. This includes, but is not limited to, the payment of premiums or Benefits. This applies whether or not the circumstances are the same.

Our Right of Cancellation

In the event of any non-payment of premium by the Policyholder, we shall be entitled to cancel the Policy and any related Cover/ plan. We may, at our discretion, reinstate Cover if the full premium is subsequently paid, though terms of Cover may be subject to variation. We may at any time terminate a Member's Cover if he/she or the Policyholder has at any time:

- Misled us by misstatement
- Knowingly claimed Benefits for any purpose other than as are provided for under this Policy
- Agreed to any attempt by a third party to obtain an unreasonable pecuniary advantage to our detriment
- Otherwise failed to observe the terms and conditions of this Policy or failed to act with good faith.

Liability

Our liability shall cease immediately upon termination of the Policy for whatever reason, including without limitation nonrenewal and non-payment of premium.

Minimizing Loss

You must take all reasonable steps to avoid or reduce any loss which may mean you have to make a claim under this insurance.

Alterations or Adjustments

We reserve the right to alter or discontinue the Benefits, terms, conditions or premiums of this Policy at each Renewal date. We shall notify you of such changes at least 15 days prior to the Renewal date. If you fail to receive such notice for whatever reason this shall not invalidate the change.

Parties to the Contract

The only parties to this contract are the Policyholder and us.



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POLICY WORDING EXCLUSIONS

General exclusions apply to all sections of this policy. We will not cover the following:

- **1.** Any claim relating directly or indirectly to any Medical Condition or related condition for which the Insured Person received treatment, had symptoms of, had knowledge existed or should have known existed, or sought Advice for prior to the Date of Entry (pre-existing medical condition).
- 2. Any claim relating directly or indirectly to an incident, injury or illness which the Insured Person was aware of at the time this insurance was purchased and which could reasonably be expected to lead to a claim.
- **3.** Any claim relating directly or indirectly to or as a consequence of having received treatment, which we determine on general advice, is either experimental, unproven, unlicensed or not Medically Necessary.
- **4.** Any claim relating directly or indirectly to a Congenital Anomaly or conditions, birth injuries, birth defects or any Hereditary Medical Conditions of any kind.
- **5.** Any claim relating directly or indirectly to cosmetic treatment or corrective treatment or any consequence thereof.

- **6.** Any claim relating directly or indirectly to pregnancy, pregnancy terminations, pregnancy complications or any Medical Conditions relating to pregnancy or childbirth.
- **7.** Any claim associated with a sex change and any consequence thereof.
- **8.** Any claim relating directly or indirectly to any venereal disease or any other sexually transmitted diseases or any related condition.
- 9. Any claim relating directly or indirectly to Human Immunodeficiency Virus (HIV) or HIV related illness, including Acquired Immune Deficiency Syndrome (AIDS) or AIDS related complex (ARC) or any similar infections, illnesses, injuries or Medical Conditions relating directly or indirectly to these conditions.
- **10.** Any claim relating to alcohol, alcoholism, drug or substance abuse or any addictive condition of any kind and any injury or illness arising directly or indirectly from such abuse, addiction or use.

- **11.** Any claim relating to suicide or attempted suicide, Bodily Injury or illness, which is wilfully self-inflicted or due to negligent or reckless behaviour.
- **12.** Any claim relating to any injury, illness or death sustained directly or indirectly as a result of the Member acting illegally or committing or helping to commit a criminal offence.
- **13.** Any injury or death sustained while an inmate of a prison, jail or any correctional facility or while in any mental institution.
- **14.** Any claim relating to any injury, illness or death sustained where a Member has travelled against advice.
- **15.** The following hazardous activities are excluded: playing professional sports and/or taking part in motor sports of any kind; mountaineering, including potholing, spelunking or caving; high-altitude trekking over 2,500 metres; skiing off-piste or any other winter sports activity carried out off-piste; and Arctic or Antarctic expeditions.
- **16.** Any claim arising as a result of the Insured Person's use of a two-wheeled motor vehicle unless:
- as a passenger the Insured Person wears a crash helmet and it is reasonable for them to believe that the driver holds a license to drive the two-wheeled motor vehicle under the laws of the country in which the Accident occurs (if such a license is required under the laws of the country in which the Accident occurs);

- 2. as a driver the Insured Person wears a crash helmet and they hold a license which permits them to drive the two-wheeled motor vehicle under the laws of the country in which the Accident occurs and they have arranged adequate motor vehicle insurance coverage (if such a license and or insurance is required under the laws of the country in which the Accident occurs).
- **17.** Any claim arising as a result of the Insured Person participating in motor racing, rally or vehicle racing of any kind.
- **18.** Any claim involving the Insured Person taking part in manual labour.
- **19.** Any claim arising as a result of the Insured Person failing to get the inoculations and vaccinations that they are reasonably required to receive.
- **20.** Any claim arising from the Insured Person acting in a way which goes against the Advice of a Medical Practitioner.
- **21.** Any claim arising from self-treatment, or treatment provided by a Direct Family Member. This includes, but is not limited to, prescribed medication, diagnostic tests and surgical procedures.
- **22.** All Benefits are excluded unless they appear on your Benefits schedule.
- **23.** Any claim relating directly or indirectly to Conflict/Civil Unrest or Act of Terrorism.
- 24. Any consequential loss.

POLICY WORDING EXCLUSIONS

- **25.** Any claim relating to ionizing radiation, radioactive contamination, chemical contamination or nuclear contamination of any kind.
- **26.** Any claim relating to an injury, illness or death occurring outside the Insured Person's geographical area of cover as stated on the Certificate of Insurance.
- **27.** Any claim relating to an injury, illness or death occurring outside the Period of Cover or in any period in which the appropriate premium has not been paid.
- **28.** Any second or subsequent medical opinions from a Medical Practitioner or specialist for the same medical condition unless agreed in writing by us.
- **29.** Expenses which are recoverable from a third party.
- **30.** Costs incurred for the completion of any claim forms or the provision of any documents or reports needed to adjudicate a claim.
- **31.** Any claim due to complications caused by an illness, disease, injury or treatment for which Cover is excluded or limited within this policy.
- **32.** Any claim resulting from a failure or refusal to receive treatment for a Medical Condition.
- **33.** Any claim made where the Insured Person has not died during the Period of Cover.
- **34.** Any claim relating directly or indirectly or as a consequence to obesity if the Insured Person's Body Mass Index has exceeded 30 during the Period of Cover or since the Date of Entry.







Regency Employee Benefits' Life Insurance claims process is designed to provide maximum support with minimum fuss, thereby relieving your loved ones and family of the burden of making difficult decisions and dealing with the costs associated with a death abroad, at such a difficult time.



24-hour Assistance

Beneficiaries have access to a 24-hour multilingual hotline to provide practical assistance. Regency can be relied upon to handle all cases sensitively, taking care of all administrative, cultural and religious requirements, making the process as smooth and stress free as possible.



Beneficiary Claim Form

The first step of the claims process is to complete the claim form and to send it to Regency together with the Certified Copy of the Death Certificate (or similar official notification depending upon the country). Alternatively you can contact our 24-hour claims helpline at the number provided within your member pack or email us at **claims@regency-ga.com** to request assistance.



Assessing your claim

The progress of a claim can vary depending upon the circumstances of individual cases, how quickly we receive the necessary information and whether there are any complications. We will keep you updated with the progress each step of the way.



When your claim has been accepted

Upon acceptance of a claim we can initiate a prompt upfront payment and provide practical assistance. Regency Employee Benefits' 24-hour international assistance can manage the financial and administrative aspects on the beneficiary's behalf.



COMPLAINTS

Our goal at Regency Employee Benefits is to provide you with the highest levels of service and to ensure that your experience with Regency is second to none. In the unlikely event that you are not entirely satisfied with the service or the coverage you have received, please contact us directly by writing to:

Attention: Managing Director info@regency-eb.com

We will investigate any query or complaint and respond to all correspondence within 4 working days.

CONTACT (



AFRICA



SOUTH AFRICA

+27 87 5502 426 General: Claims: +27 87 5518 359 Email: info@regency-eb.com

AMERICAS



BRAZIL

+55 21 3500 8882 General: Claims: +55 21 3500 2751 info@regency-eb.com Email:



UNITED STATES

General: +1 347 875 3156 +1 646 448 0331 Claims: Fmail: info@regency-eb.com

ASIA



CHINA

+852 5819 0028 General: +852 5819 4888 Claims: info@regency-eb.com Email:



HONG KONG

+852 5819 0028 General: Claims: +852 5819 4888 Email: info@regency-eb.com



ASIA



EUROPE





MIDDLE EAST



INDONESIA

General: +62 21 515 7680 Claims: +62 21 515 7681 Email: info@regency-eb.com

THAILAND

General: +66 2 105 4284 Claims: +66 2 105 4285 Email: info@regency-eb.com

SPAIN

General: +34 91 1984 206 Claims: +34 91 1231 189 Email: info@regency-eb.com

UNITED KINGDOM

General: +44 20 3129 1544 Claims: +44 20 3129 5004 Email: info@regency-eb.com

DUBAI

General: +971 4 319 7682 Claims: +971 4 319 7682 Email: info@regency-eb.com



