



KEY FEATURES OF **PROTECT**

Flexible life and critical illness cover

keyfacts®

The Financial Conduct Authority is a financial services regulator. It requires us, ReAssure, to give you this important information to help you decide whether Protect is right for you. You should read this document carefully so you understand what you are buying and then keep it safe for future reference.



ReAssure

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We regularly update our literature. You or your financial adviser can confirm that this **August 2019** version is the latest by checking the literature library on our website at www.reassure.co.uk

PLEASE READ THIS **DOCUMENT CAREFULLY**

The purpose of this Key Features Document is to give you a clear and balanced summary of the information you need to help you make a decision.

Reading financial literature can be daunting, so we try to make our brochures and other documents as clear as possible, with no 'small print'. Where we cannot avoid technical expressions, we have included an explanation in plain English. We test our literature regularly to make sure that it can be understood by our customers.

Please read this Key Features Document in conjunction with your personal Key Features Illustration.

thank you

ABOUT REASSURE

We don't sell or promote our products directly to customers. Instead, we deal only through financial advisers.

We believe that decisions about your financial future are so important that you should always seek expert financial advice.

We do all we can to make sure that the people who are advising you about our products fully understand them and the risks that they need to consider with their customers. We also try to make our product information as clear as possible, in order to ensure you have all the information you need to make an intelligent choice about protection insurance.

Protect is provided by ReAssure Life Limited.

AIMS

PROTECT AND ITS BENEFITS

Protect life cover is designed to pay out a guaranteed cash sum when you, or others covered by the plan, die.

Protect critical illness cover is designed to pay out a guaranteed cash sum when you, or others covered by the plan, have one of the illnesses or conditions listed under Q8 and Q9. If life cover is included, the cash sum will pay out if somebody covered by the plan dies before suffering from a critical illness.

You can choose how long you want your cover to last – for a fixed period, for renewable ten-year periods, or throughout the life of the people insured.

YOUR COMMITMENT

WHAT YOU HAVE TO DO AS THE POLICYHOLDER

You must give us, completely and accurately, all the information we ask for before we set up your cover. If you do not, we may not be able to pay your claim.

You must pay regular monthly or yearly premiums for the period of cover you have chosen, or throughout your life.

You will need to tell us about any future changes of address or contact details so we can keep our records accurate and communicate with you.

 See 'Contact details' on page 15

When you make a claim, you must provide all the medical evidence we need to assess it.

RISKS

FACTORS THAT COULD AFFECT YOUR POLICY

- If you choose cover with a rolling term, your premiums will be lower at the start but you will need to increase them every ten years to ensure that your cover lasts for as long as you need it. The increases in premium will be significant as you get older and you should consider now whether you may be able to afford the cover in the future.

 See Q6 'How long will my cover last?' and Q5 'Will my regular premiums ever increase?'

- If you choose cover for a fixed period, it will end on the date you have chosen, and you will not be able to extend the period. You may be left without cover at a time when it is difficult or even impossible to get more, because of your age or your health.
- There are some circumstances in which we cannot accept a claim.

 See Q7 'Do you guarantee to pay my claims?'

- A Protect policy provides insurance only. It does not have a cash value or a surrender value at any time.

- If you stop making regular payments, your insurance will end 30 days after the first unpaid premium was due.
- If you increase your cover, your premiums may rise by a higher percentage than the increase in cover, particularly as you get older.
- If you add the cover reinstatement option to your policy, we will not be able to guarantee which critical illnesses and benefits will be included in the new after-claim policy until you apply for it.

 See Q4 'What extra cover options can I add on?'

QUESTIONS AND ANSWERS

Q1. COULD PROTECT BE RIGHT FOR ME OR NOT?

Protect could be suitable for you if you are resident in the UK and you are looking for:

- life insurance, critical illness insurance, or a combination of both
- insurance that pays a lump sum
- insurance that has flexibility for you to increase your cover and add some extra cover.

You can choose 'fixed term' cover, that lasts for a set number of years. This may be suitable for:

- where you have a fixed-term liability (such as a loan that ends on a set date)
- providing a cash lump sum for your family if you fall critically ill or die
- protecting your business interests, including a loan, should you, a business partner, or employee fall ill or die
- mortgage cover where an additional amount of personal cover is required.

You can choose 'rolling term' cover, that can be renewed every ten years for as long as you need it. This may be suitable for:

- where the end date of the liability is not known.
- providing a lump sum for your family if you fall critically ill or die
- protecting your business interests should you, a business partner, or employee fall ill or die
- providing a lump sum to help pay a potential inheritance tax liability when you and/or a spouse or partner die

You can choose 'guaranteed whole of life' cover, that can last for as long as you need it. This may be suitable for:

- where the end date of a liability is not known
- providing a lump sum to help pay a potential inheritance tax liability when you and/or a spouse or partner die
- creating or protecting a legacy to leave to your beneficiaries.

Protect is not suitable if you are looking for a product that provides:

- a regular income if you are unable to work
- cover that automatically reduces each year ('decreasing term') to cover a repayment mortgage
- cover that includes a savings or investment element that you can cash in
- the option to exclude children's cover. For example if you do not intend to have children or have children aged 22 or older.

Q2. HOW FLEXIBLE IS THE COVER?

Inflation

Every year, we will offer you the opportunity to maintain the true value of your cover and offset the effects of inflation. You can increase your cover by up to 5%, or by the current rate of inflation (up to a maximum of 10%), if that is higher. The increase in your premiums may be a higher percentage than the increase in your cover.

Even if you decide you do not want to accept the increase option in one or more years, we will continue to offer it as long as your cover lasts. When you accept an increase, we will not ask you to tell us about any changes in your health since your insurance started.

When you set up your policy, you can choose to have these increases happen automatically each year.

Special events

Whenever any of the events listed below happen in your life, you can increase your cover within certain limits. These options are available if we accepted your application on our standard terms, or in some cases where we charge you more because of your health (non-standard terms).

 See Q15 'What are 'standard terms'?'

QUESTIONS AND ANSWERS

(CONTINUED)

On such occasions, we will not ask for any more information about your health, even if it has worsened since your plan started.

i You can find full details of all the increases in our brochure [Explaining Protect](#)

The events are:

- marriage or civil partnership*
- divorce or dissolution of a civil partnership
- the birth or adoption of a child
- moving house or increasing your mortgage
- an increase to your salary
- when your liability to inheritance tax increases
- when the value of your business, a key person or a business loan increases (if your plan has been taken out to cover your business)
- when you retire, and life and/or critical illness cover included in your employer benefit scheme ends.

*As detailed in the Civil Partnership Act 2004.

If you want to increase your cover by a higher amount than we can offer through the inflation and special event increases, we will need full details of your state of health and lifestyle at that time. We may offer you a new policy for the increase, based on the terms and conditions available at that time, which may differ from your current policy.

Q3. WHO CAN BE INSURED?

- You alone, or
- you and another person. If you have a guaranteed whole life or rolling term life policy, you choose whether we will pay the cash sum after the first or the second person dies, or
- other people, providing you have an 'insurable interest'. This means that you would suffer financially from the other person's death or illness. For example, a husband and wife or civil partners have an insurable interest in each other's lives.

A company can take out a plan covering the death or critical illness of its key employees, and the partners or shareholders of a business can cover each other.

i See Q12 'Can I use Protect to cover my business?'

To apply for a Protect policy you must be at least 18 years old.

For life cover the person being insured, either you or someone else, must be aged between 16 and 85. If you choose a fixed term it's possible for the cover to last until the person covered is 100 years old.

i See Q6 'How long will my cover last?'

For critical illness cover the person being insured, either you or someone else, must be aged between 16 and 67. If you choose a fixed term it's possible for the cover to last until the person covered is 80 years old.

Q4. WHAT EXTRA COVER OPTIONS CAN I ADD ON?

You can choose to add to your policy for an extra cost:

Total permanent disability cover

We will pay the full amount of your cover if you become permanently disabled and are unable to work again. Your policy will end if we pay a claim for this cover. You cannot add this option to a guaranteed whole life policy or a rolling term policy on a joint life last death basis.

Premium protection benefit

If you are ill or have an accident and are unable to work for more than six months, we will pay your premiums until you recover, return to work, have an illness or a disability claim accepted, reach age 65, or die. If you have used the inflation option to increase your cover every year, we will continue to increase your cover while we pay the premiums.

i You can find full details of all the extra cover options in our brochure [Explaining Protect](#)

Cover reinstatement option

After you make a claim for a critical illness or disability you may find it very expensive, or even impossible, to get cover again. If you add this option to your policy, you can apply for more cover after your claim.

i See Q11 'Can I get more cover following a claim?'

If you choose guaranteed whole life cover, the only extra cover you can add to your policy is premium protection benefit.

Q5. WILL MY REGULAR PREMIUMS EVER INCREASE?

If you choose fixed term cover or guaranteed whole life cover, we guarantee that your premiums will never change unless you ask us for more cover.

 See Q6 'How long will my cover last?'

If you choose cover with a rolling term your premiums are guaranteed for periods of ten years. If you ask us to increase the cover, the premium will also increase and will be guaranteed for the remainder of the ten year period.

After the first ten years you will be given the choice to:

- continue with the same amount of cover but at a higher premium, or
- continue with the same premium but at a reduced level of cover, or
- you can ask to continue at a premium or level of cover different from that offered – subject to our limits at the time.

If we do not hear back from you your cover will automatically continue for another ten years with the same premium and a reduced level of cover.

The increases in premium are based on your age at the time of the renewal and will be significant as you get older.

We will tell you what the first two or three increases will be (depending on your age) before you decide to take out the policy. If you want to know more than the first two or three you can ask us.

Rolling term premiums will be lower to start with than the premiums of a guaranteed whole life policy with the same level of cover, but will increase significantly above the level of a guaranteed whole life premium as you get older.

 You can find more details about rolling term cover in our brochure [Explaining Protect](#)

Q6. HOW LONG WILL MY COVER LAST?

You can choose from three different periods of cover:

- **Fixed term** – lasts for a set period which cannot be extended; your premiums are guaranteed not to change.
- **Rolling term** – can last throughout your life; your premiums are guaranteed for ten-year periods.
- **Guaranteed whole life cover** – lasts throughout your life; your premiums are guaranteed not to change.

For each of these periods of cover, if you increase the amount of cover your premiums will increase.

For critical illness cover, you can choose between a fixed or rolling term. All three periods of cover are available for life cover policies.

Q7. DO YOU GUARANTEE TO PAY MY CLAIMS?

Yes, unless:

- you do not give us completely and accurately all the information we ask for before we set up your cover
- your illness, disability or surgery does not meet the definition in our policy terms.

If you have critical illness cover, total permanent disability or premium protection cover and you are outside the UK for extended periods of time we may not be able to pay a claim. We will consider these on a case by case basis and may require confirmation by a UK doctor.

 You can find more details of what we exclude in our brochure [Explaining Protect](#)

QUESTIONS AND ANSWERS

(CONTINUED)

Q8. WHAT ILLNESSES AND CONDITIONS ARE COVERED?

Full payment conditions

If you have any of these critical illnesses or treatments which meet the definition, we will pay the full amount of your cover. These are only brief descriptions of what is covered.

You can find full definitions and explanations of the critical illnesses we cover in [Your guide to illnesses covered by Protect](#) available at www.reassure.co.uk.

Aorta graft surgery

Aplastic anemia –

with permanent bone marrow failure

Bacterial meningitis –

resulting in permanent symptoms

Benign brain tumour –

resulting in permanent symptoms or specified treatment

Benign spinal cord tumour –

resulting in permanent symptoms or specified treatment

Blindness –

permanent and irreversible

Brain injury due to trauma, anoxia or hypoxia –

resulting in permanent symptoms

Cancer –

excluding less advanced cancers

Cardiac arrest –

with insertion of a defibrillator

Cardiomyopathy –

of specified severity

Coma –

with associated permanent symptoms

Coronary artery by-pass grafts

Creutzfeldt-Jakob disease

Crohn's disease –

with specified surgery

Deafness –

permanent and irreversible

Dementia including Alzheimer's disease –

resulting in permanent symptoms

Encephalitis –

resulting in permanent symptoms

Heart attack –

of specified severity

Heart failure –

of specified severity

Heart valve replacement or repair

HIV infection –

caught from a blood transfusion, a physical assault or at work

Intensive care for seven days continuous duration

Interstitial lung disease

Kidney failure –

requiring permanent dialysis

Liver failure

Loss of hand or foot –

permanent physical severance

Loss of independence

Loss of speech –

permanent and irreversible

Major organ transplant –

from another donor

Mental illness –

of specified severity

Motor neurone disease and specified diseases of the motor neurones –

resulting in permanent symptoms

Multiple sclerosis –

where there have been symptoms

Neuromyelitis optica (Devic's Disease) –

with persisting symptoms

Paralysis of limbs –

total and irreversible

Parkinson's disease –

resulting in permanent symptoms

Parkinson plus syndromes –

resulting in permanent symptoms

Peripheral vascular disease –

with bypass surgery

Pneumonectomy

Primary pulmonary arterial hypertension –

of specified severity

Pulmonary artery graft surgery

Respiratory failure –

of specified severity

Rheumatoid arthritis –

resulting in a loss of the ability to do

specified physical activities

Spinal stroke –

resulting in permanent symptoms

Stroke –

of specified severity

Structural heart surgery

Syringomyelia or syringobulbia –

requiring surgery

Systemic lupus erythematosus –

of specified severity

Terminal illness –

where death is expected within 12 months

Third degree burns

Ulcerative colitis –

treated with total colectomy (removal of the entire bowel)

Additional payment conditions

 You can find more details of the additional critical illnesses in [Explaining Protect](#).

We will pay the lower of £25,000 and 25% of your cover for any of these conditions. Any payment we make for these will not affect your premiums or reduce your cover and your policy will continue in full.

Aortic aneurysm –
with endovascular repair

Brain abscess drained via craniotomy

Cancer in situ –
with surgery

Cancer in situ of the larynx –
with specified treatment

Cancer in situ of the urinary bladder –
with specified severity

Carotid artery stenosis –
treated by endarterectomy or angioplasty

Cauda equina syndrome –
with permanent symptoms

Central retinal artery or vein occlusion –
resulting in permanent visual loss

Cerebral or spinal aneurysm –
with surgery or radiotherapy

Cerebral or spinal arteriovenous malformation –
with surgery or radiotherapy

Coronary angioplasty –
with specified treatment

Crohn's disease –
treated with surgical resection

Diabetes mellitus type 1 –
requiring permanent insulin injections*

Drug resistant epilepsy –
with specified surgery

Gastrointestinal stromal tumour (GIST) or Neuroendocrine tumour (NET) of low malignant potential –
with surgery

Guillain-Barré syndrome –
with persisting clinical symptoms

Haematoma of the brain –
with surgery

Heartbeat abnormalities with permanent pacemaker insertion

Myasthenia gravis –
with persisting clinical symptoms

Ovarian tumour of borderline malignancy/low malignant potential –
with surgical removal of an ovary

Pituitary tumour –
with specified treatment

Prostate cancer –
low grade

Removal of one or more lobe(s) of the lung –
for disease and trauma

Serious accident –
requiring hospitalisation for 28 consecutive days

Significant visual impairment –
permanent and irreversible

Skin cancer –
advanced stage as specified

Testicular cancer of low grade –
requiring removal of a testicle

Third degree burns –
less extensive (5%)

* Not available on children's cover.

QUESTIONS AND ANSWERS

(CONTINUED)

Surgery benefit

If you are included on a waiting list for one of the surgeries listed below, and your condition meets the relevant critical illness definition, we will pay the full amount of cover. This means you could choose to pay for the cost of private treatments rather than waiting for the operation under the NHS.

- Aorta graft surgery
- Removal of all or part of a benign brain tumour
- Removal of a benign spinal cord tumour
- Insertion of an implantable cardioverter-defibrillator following a cardiac arrest
- Heart valve replacement or repair
- Major organ transplant
- Pneumonectomy
- Pulmonary artery surgery
- Structural heart surgery
- Colectomy for ulcerative colitis

Additional care benefit

The Additional Care Benefit provides £50,000, or an amount equal to your cover if lower, in addition to the full amount of your cover. You can claim the additional amount if you claim for a critical illness covered by the policy, or total permanent disability, that leaves you with severe and permanent physical or mental symptoms. You can find details of these symptoms in [Explaining Protect](#).

Q9. ARE CHILDREN COVERED?

Children are automatically covered when you include critical illness cover. If you don't have children, but are planning a family in the future, they'll be covered automatically too.

Full payment conditions

Children are covered from birth to their 22nd birthday for all of the full payment conditions listed in Q8 and the following child-specific conditions:

Cerebral palsy

Craniosynostosis –
requiring surgery

Cystic fibrosis

Diabetes mellitus Type 1 –
requiring permanent insulin injections

Down's syndrome

Hydrocephalus –
treated with the insertion of a shunt

Muscular dystrophy

Spina bifida

For each of these conditions we pay the lower of £25,000 and 50% of your cover. If each parent has a separate critical illness policy, or both parents are the lives assured of a joint policy, we pay double this amount.

Additional payment conditions

Your children are also covered for all of the additional payment conditions listed in Q8, except for Diabetes which is covered by the child specific conditions above.

For each of these conditions we pay the lower of £25,000 and 25% of your cover. If each parent has a separate critical illness policy, or both parents are the lives assured of a joint policy, we pay double this amount.

Surgery benefit

Children are covered for the same surgeries as listed in Q8. For each of these we pay the lower of £25,000 and 50% of your cover. If each parent has a separate critical illness policy, or both parents are the lives assured of a joint policy, we pay double this amount.

Advanced illness

If you make a children's cover claim and the illness you claim for meets our definition of an advanced illness we will pay an additional £10,000.

We define advanced illness as an advanced or rapidly progressing and incurable condition with a life expectancy of no greater than 12 months.

Overseas treatment for children

If a treatment that is effective, curative, or prevents further deterioration for one of the illnesses covered by the policy is only available outside of the UK, we will double the normal children's cover payment.

Children's life cover

Life cover of £5,000 is automatically included for children from 24 weeks of pregnancy to their 22nd birthday.

First time cover

When a child reaches their 22nd birthday they will no longer be covered. First Time Cover gives them the opportunity to apply for their own, independent cover without having to answer any health questions. They can apply for up to £25,000, or £50,000 if each parent has a separate critical illness policy, or both parents are the lives assured of a joint policy.

Q10.
WHAT ADDITIONAL COVER IS INCLUDED WITH LIFE INSURANCE COVER?

Terminal illness cover

We include terminal illness cover with policies which have a fixed or rolling term. For policies with life cover only we will pay the cash sum if you are diagnosed as having less than 12 months to live. You cannot claim for this cover within the last 12 months of a fixed term life cover policy.

 See Q6 'How long will my cover last?'

Disability conversion option

We include disability conversion for policies which have a rolling or whole life term. Before you are 65, you can choose to convert some or all of your life cover to make monthly care payments should you become disabled or mentally impaired in the future.

 You can find more about converting life cover, and accidental death cover, in our brochure [Explaining Protect](#)

Accidental death cover

We will pay the lower of your cover amount and £500,000 if you die as a result of an accident in the time between your application for Protect and when your cover takes effect.

Q11.
CAN I GET MORE COVER FOLLOWING A CLAIM?

Cover reinstatement option

You can add this option when you first apply for the cover for an extra cost. If you make a claim for critical illness or a disability, you can use the option to apply for a new policy following the claim, without having to answer any further health questions. The premium for your new cover will be based on your age at the time you apply, but we will not increase your premiums because your health is worse than when you first took out your cover.

 You can find more about cover following a claim in our brochure [Explaining Protect](#)

Continuing cover option

If your insurance covers two people and one of you makes a claim, the policy will end when we pay it. However, the person who does not claim can apply for further cover, without any further health questions, no matter what their state of health. This option is automatically included at no extra cost when you choose cover for two people in the same policy.

Q12.
CAN I USE PROTECT TO COVER MY BUSINESS?

If you own a company, you may wish to insure against the financial effects of losing one of your key people through illness or death. Such a loss can affect profits and the availability of business loans. If you need cover for an employee, insurance for a short, fixed period may be suitable. However, if you want to cover an owner of the business for a longer period, you may want to choose a Protect policy that can last throughout life.

 You can find more about protecting your business in our brochure [Explaining Protect](#)

You can also use Protect if you are a shareholder or partner in a business. If one of your fellow shareholders or partners dies, the plan can provide the cash to buy their share from their family.

Your financial adviser can give you more details of how Protect might cover you and your business.

Q13.
HOW DO I PAY MY PREMIUMS?

You can choose to pay your premiums either monthly or yearly. The minimum payments are £10 a month or £120 a year.

Premiums are paid by direct debit and you can choose on which day of the month we will collect them.

QUESTIONS AND ANSWERS

(CONTINUED)

Q14. CAN I CANCEL MY COVER?

You can cancel your application for Protect within 30 days after you receive your policy documents. If you wish to do so, please write to us at our customer service centre. We will refund any money you have paid.

 See 'Contact details' on page 15

If you want to cancel your cover after this period, please send us your policy documents. We will not refund any of the premiums you have paid.

If you stop paying premiums, your cover will end after 30 days.

Q15. WHAT ARE 'STANDARD TERMS'?

They are the range of covers and the premium levels that we offer to most people who are in good health and who we do not consider to have a hazardous occupation or take part in any potentially dangerous leisure activities. If you do not meet our criteria for these, we may offer you 'non-standard terms', which means that we ask you to pay an increased premium. Alternatively, we may remove some benefits or options from your policy, or be unable to offer you total permanent disability or premium protection cover.

If you accept any non-standard terms we offer, any increases to your cover will also be more expensive.

Q16. CAN I HAVE CRITICAL ILLNESS COVER WITHOUT LIFE COVER?

Critical illness is available with or without life cover. If you choose to have a critical illness policy without life cover, we will only accept a claim if you survive for 14 days after the diagnosis of your illness or following surgery.

Q17. WILL TAX BE PAYABLE ON THE MONEY FROM A CLAIM?

The amount paid on a claim is normally free from UK income tax and capital gains tax.

On death, inheritance tax may be due on these payments. You may be able to reduce the effects of inheritance tax by using an appropriate trust. We strongly recommend that you speak to your financial adviser before making any decisions regarding trusts.

 You can find more information about putting a policy in trust in our brochure **Explaining Protect**

You can choose to have the cash sum paid in four equal instalments. This may have tax advantages for companies.

The Government might change this tax position in future.

Q18. WHAT WILL HAPPEN IF I STOP PAYING PREMIUMS?

If you miss paying a premium, you will have 30 days to make the payment. If you have not paid it by then, all your cover will end immediately.

You may be able to reinstate your cover up to 12 months after the date your missed payment was due. We will need full information about your state of health at that time.

Q19. WHAT DO I NEED TO DO TO MAKE A CLAIM?

Please contact us as soon as possible after any event that could give rise to a claim. We will provide a claim form and details of the information we will need.

 You can find more information about making a claim and what we will need in our leaflet **Your guide to making a claim**, available from your financial adviser.

ReAssure Claims Department
Old Mutual House
Portland Terrace
Southampton
SO14 7AY
Phone: 023 8072 6996
Fax: 023 8048 1261

OTHER INFORMATION

CONTACT DETAILS

If you need any further information about Protect, please contact your financial adviser. If you wish to contact us directly, you can do so by:

Phone: 0808 171 2600
E-mail: info@reassure.com

Postal address:
ReAssure Life Limited
Old Mutual House
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Southampton
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ABOUT THE TERMS AND CONDITIONS

This Key Features Document gives a summary of Protect. It does not include all the definitions, exclusions or policy terms and conditions.

For a copy of [Explaining Protect](#) or the policy terms, please ask your financial adviser. Protect is governed by the law of England and Wales. Your policy terms will confirm this.

All our literature, and any other communications with you, will be in English.

REGULATORY PROTECTION

Under Financial Conduct Authority (FCA) rules, we classify all our customers as 'retail clients' which means you benefit from the highest level of regulatory protection.

FINANCIAL STABILITY

ReAssure Life Limited is required to prepare and publish a Solvency and Financial Condition Report (SFCR) each year for the UK regulator under the Solvency II regulations. This report details the financial position of the organisation and will enable a comparison with other life assurance firms' financial positions. You can access this document from our website www.reassure.co.uk/about-us/our-business

COMPLAINT PROCEDURES

Customer satisfaction is very important to us at ReAssure, but if you do have any cause to complain about the services provided, either by your financial adviser or by us, clear procedures are laid down by the FCA to ensure that your complaint is dealt with fairly.

If your complaint relates to the advice you have been given, you should write in the first instance to your financial adviser. If it concerns the service you have received from us, please write to us at the address provided above and we will do everything we can to resolve the problem.

If you are not satisfied with the response you receive, you can complain to:

Financial Ombudsman Service
Exchange Tower
London E14 9SR

Complaining to the Ombudsman will not affect your legal rights.

POLICYHOLDER PROTECTION

The Financial Services Compensation Scheme (FSCS) acts as a safety net for customers of financial services providers. If ReAssure Life Limited cannot meet its liabilities, the FSCS may arrange to transfer your policy to another insurer, provide a new policy or, if these actions are not possible, provide compensation. For long-term insurance (such as pension plans and life assurance), the level of compensation you can receive from the scheme is as follows:

The Scheme covers payment to 100% of the value of a policy in liquidation.

Further information about compensation arrangements is available from the Financial Services Compensation Scheme website www.fscs.org.uk

ReAssure Life Limited, which provides Protect, is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority.

ReAssure

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www.reassure.co.uk

ReAssure Life Limited, Registered Office: Windsor House, Telford Centre, Telford, Shropshire, TF3 4NB.

Registered in England No. 1363932.

Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority.

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