

# Female Cancer Insurance

## Insurance Product Information Document



This insurance is underwritten by Antares Managing Agency Limited who are the managing agent for Antares Syndicate 1274 at Lloyd's. Antares Managing Agency Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority (Registration Number 06646629).

**Company:** Antares Managing Agency Limited **Product:** Female Cancer Policy

This policy has been arranged for you by AIM Risk Services Ltd as intermediary. AIM Risk Services Limited is an Appointed Representative of James Hallam Limited and is authorised and regulated by the Financial Conduct Authority. The information provided in this document is a summary of the key features and exclusions of the policy. Complete pre-contractual and contractual information about the product can be found in your policy documentation.

### What is this type of insurance?

This cancer insurance is designed to provide you with financial support if you are diagnosed for the first time with a covered female cancer.



#### What is insured?

The insurer will pay out the following benefits if an insured person is diagnosed with a covered female cancer during the period of insurance and after the 90 day waiting period has passed.

Female cancer means cancer of the breast, ovaries, fallopian tubes, uterus, cervix, vagina or vulva.

This must be the first diagnosis of female cancer in your lifetime and the benefit will be paid once only.

INSURED PERSON		
✓	<b>Diagnosis benefit</b>	£6,000
✓	<b>Hospital benefit</b> (max. 100 days)* Up to 2 years from cancer diagnosis	£100 per day
✓	<b>Surgery benefit</b> Up to 2 years from cancer diagnosis	£3,000
✓	<b>Income benefit</b> (max. 12 months)	£500 per month

FEMALE CHILD		
✓	<b>Diagnosis benefit</b>	£3,000
✓	<b>Hospital benefit</b> (max. 100 days)* Up to 2 years from cancer diagnosis	£50 per day
✓	<b>Surgery benefit</b> Up to 2 years from cancer diagnosis	£1,500

\* The hospital benefit must be for treatment or surgery directly related to your cancer and it will be paid up to 100 days in total (they do not have to be consecutive)



#### What is not insured?

We will not pay benefits for female cancer if you:

- ✗ Have any medical condition directly or indirectly related to cancer (whether diagnosed or not) for which at any time in the 36 months prior to your start date, you received medication or treatment; or experienced symptoms and/or had abnormal medical tests
- ✗ Knew you had female cancer or have already been diagnosed with any female cancer in the past or during the waiting period
- ✗ Are diagnosed with a female cancer histologically classified as: pre-malignant, non-invasive, in-situ cancer, having borderline or low malignant potential
- ✗ have been diagnosed with HIV and/or AIDS
- ✗ have a dependency on and/or abuse alcohol or drugs
- ✗ have not survived a period of 30 days from the diagnosis of a female cancer



#### Are there any restrictions on cover?

- ! There is a waiting period of 90 days following the start date in which benefits are not payable should you be diagnosed with a female cancer during this period
- ! Applicants must be aged at least 1 and not yet have reached 60 at the start date of the policy
- ! You must be under 65 years old at diagnosis to be eligible for the benefits
- ! If you are diagnosed with female cancer where the same condition was diagnosed as benign during the three years before the policy start date you will not be eligible to claim the benefits. However, we will pay if you have been medically declared free of the condition for a period of three years.



## Where am I covered?



United Kingdom (England, Scotland, Wales, Northern Ireland, the Channel Islands and the Isle of Man)



## What are my obligations?

- You must pay the premium on time
- You must live permanently in the UK, meaning at least 185 days in a policy year, to receive benefits
- Any claim should be notified to AmTrust Europe Limited in writing within 90 days of the occurrence giving rise to a claim
- You must provide, at your own expense, any medical reports, treatment plans and other reasonable evidence to support your claim
- You must give the claims handler permission to obtain medical reports/records from any practitioner who has treated you
- You must take care when answering any questions we ask by ensuring that all information provided is accurate and complete. If we establish that you deliberately or recklessly provided us with false or misleading information we will treat the policy as if it never existed and decline your claim



## When and how do I pay?

You can pay your premium in monthly instalments by direct debit



## When does the cover start and end?

Your insurance begins on the policy start date chosen by you and stated on your schedule following our acceptance of your application and payment of the premium. You may apply to include your female partner and dependent female children aged between 1 and 18, or 23 if in full time education. The start date for each insured person will be shown on your policy schedule.

Your cover will end in the following situations:

- If you do not pay the premium when due
- The first day of the month following your 65<sup>th</sup> birthday (your partner/child cover will remain in place)
- If you or we cancel the policy
- If you no longer live in the United Kingdom
- On the date you are diagnosed with a covered cancer. Benefits will continue to be paid but you no longer have to pay premiums
- If you die
- Child cover will end on the child's 18th birthday, or their 23rd if they are in full-time education



## How do I cancel the contract?

If for any reason you decide to cancel your plan, please notify us by telephone or in writing to:

Coverwell  
11 Pipers Field  
Uckfield  
East Sussex  
TN22 5SD  
E-mail: [info@myfamilyguard.co.uk](mailto:info@myfamilyguard.co.uk)

Coverwell is a trading style of Aim Risk Services Ltd.

If you cancel this insurance within the 14 day cooling-off period and you haven't made a claim, you will be entitled to a full refund of premium. No refund will be given if a claim has been made.

After the 14 day cooling off period, if you wish to cancel your policy you should notify the plan administrator. Your cover will terminate at the end of the monthly period that has already been paid.