



Telephone Underwriting Consent Form

Important information

If you return this completed consent form to us we will arrange a telephone call to obtain the information we need to consider covering your full benefits.

Important

Please ensure you have the following available when completing this consent form if applicable:



Any recent medical examination report

What benefits am I entitled to?

Your company has an insurance policy with Canada Life and you may be eligible for one or more of the following benefits as part of this:

Life Insurance

A lump sum and/or pension payable to your dependants if you die

Income Protection

A proportion of your salary payable to you if you are off work ill for a defined period

Critical Illness

A lump sum payable to you if you are diagnosed with a defined serious illness eg heart attack, cancer

If you have any questions about which insurance benefit is provided then please contact your **Human Resources Department**.

Genetic testing

In accordance with the Association of British Insurer's policy on genetics and insurance, you will only need to tell us about a genetic test result you have had because of a medical condition running in your family if both of the following apply:

- The test was for Huntington's disease
- The total life insurance you are insured for with all companies is over £500,000.

However, you must tell us if you either have a family history of, are experiencing symptoms of, or are having treatment for, a medical condition including any genetically inherited condition.

Confidentiality Statement

We take your confidentiality seriously and follow strict processes regarding the information you provide on this form and anything else we receive about you. We have a confidentiality policy in place and all medical information is held securely. Access is limited to authorised individuals who need to see it. For reasons of added confidentiality you may wish to send part(s)/all of this form for the attention of the Medical Officer. Such correspondence will only be opened by the Assistant/Chief Underwriter or Medical Underwriting Team Leader who act on the Medical Officer's behalf and will supervise the underwriting until a final decision is made.

Please return this completed form to:



E-mail: medicalunderwriting@canadalife.co.uk



Medical Underwriting Team,
Canada Life Limited,
3 Rivergate,
Temple Quay,
Bristol BS1 6ER,
marked Private and Confidential



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1. Your details

Name of the company you work for

Surname

Forename(s)

Title

Gender

Male

Female

Date of birth

Home address

<input type="text"/>	
<input type="text"/>	Postcode

Contact telephone number

Contact e-mail address

Helpful Hint

We will contact you during office hours so please provide the most convenient contact details.

2. Doctor's details

Address of your doctor/surgery

<input type="text"/>	
<input type="text"/>	Postcode

Do you consult any other medical professionals?

Yes **No**

If you have answered 'Yes', please provide contact details below.

Address of your doctor/surgery

<input type="text"/>	
<input type="text"/>	Postcode

Speciality

Reason for consultation

Helpful Hint

Medical Professional includes; private Doctor, Consultant, Chiropractor, Psychiatrist.



3. Recent medical examinations

a Have you **had** a BUPA Wellness medical or Nuffield screen (or similar) or an insurance medical in the **last 12 months**? ●

Yes **No** **Please enclose a copy if available**

If you have not enclosed a copy please advise contact details of the company who conducted the medical examination.

If you have answered 'YES' to question 3a please complete questions b-d below.

b Was any follow up suggested as a result of the medical examination?

Yes **No**

c Did you attend these follow ups?

Yes **No**

d What was the reason for these follow ups?

Helpful Hint

We may be able to **save you time** by using results from a medical examination you have already had rather than asking you to attend another

4. Future medical examinations

Are you **intending** to have a BUPA Wellness medical or Nuffield screen (or similar) or an insurance medical in the **next month**? ●

Yes **No**

If Yes please advise:

- The **name of the company** who will be conducting the medical examination
- The **date** you will be having this medical examination

We will contact you to advise next steps.

Company name

Date

Helpful Hint

We may be able to **save you time** by using results from a medical examination you are **intending to have** rather than asking you to attend another



DATA PROTECTION NOTICE (DPN)

Canada Life Limited (referred to as '**Canada Life**', '**we**', '**us**' or '**our**' in this DPN) takes its privacy obligations very seriously. Any personal information provided to us, as data controller, by a policyholder, joint policyholder, employer policyholder, trustee, insured person, beneficiary, claimant or member (referred to as '**you**' or '**your**' in this DPN), will be treated in accordance with the Data Protection Act.

Using Personal Information

We use personal information to undertake activities relating to the setting up, administration and renewal of our policies, products and services. This includes processing applications and handling any claims. For the majority of our business we will rely on the performance of our contractual arrangements with you as the legal basis for processing.

We do not use policyholder or member personal data for marketing purposes and we do not make your personal information available to third parties for the purpose of direct marketing.

The nature of our business is to provide investments, life and pensions cover, critical illness, income protection and employer related group products. To do this we need to use the personal information provided to carry out analysis of actuarial risks (risks of gains or losses), mortality and morbidity risks and pricing. This will be carried out in accordance with the Institute & Faculty of Actuaries' data handling protocols.

We use underwriting software to process some applications and quotations which will use an element of automated decision making.

Exceptionally, we may rely on our legitimate interests to process your personal data. When we do, we will demonstrate compelling legitimate grounds for doing so.

For employer-related group insurance products

The Data Protection Act permits appropriate information about employees to be provided by an employer to an insurer without individual consent (including details of long-term absentees, current and previous claimants, and medical underwriting decisions).

For employer-related group products the Data Protection Act permits that members may individually withdraw their consent. In those instances Canada Life will be unable to provide cover for that individual.

When medically underwriting or assessing a claim we will obtain consent from the employee.

Sharing personal information

We share personal information only on the basis of the purposes for which it was collected. This notice is intended to illustrate the instances where data may be shared. However, we will share your data only for the limited and compatible purposes for which it was originally obtained:

- with other Canada Life group companies including those outside the European Economic Area (EEA);
- with any of our service providers, reinsurers and / or regulators;
- with other insurers and government agencies, including without limitation Her Majesty's Revenue and Customs (HMRC), Department of Work and Pensions (DWP);
- in order to prevent, detect or investigate financial crime including fraud or other criminal activity, we may share your data with other companies (including private investigators), organisations (including fraud prevention agencies and databases), public bodies (including the police) and associations and credit reference agencies;
- we will not share your medical information with anyone other than yourself without your consent except as described in the next bullet point. This includes your employer, spouse, other relatives, friends or your legal or financial adviser. In some circumstances, it may be appropriate to advise your employer about your medical information, for example, to recommend alternative supportive therapy. However, we will seek your consent in such circumstances;
- for employer-related products and services only, some medical information related to underwriting decisions and non-medical information about you necessary for lawful policy and claim administration purposes will be shared with your employer;
- we will not share non-medical information concerning you with your spouse, other relatives, friends or your legal or financial adviser unless you provide your consent to us in writing;
- for insurance related products, with your own doctor or relevant medical professionals; and/or
- in any circumstances if permitted or required to do so by law or if we have your consent to do so.

International Transfers

Given the global nature of our business, we use third party suppliers and outsourced services (including cloud based services), which can require transfers of personal information outside of the EEA. In doing so, we ensure that there are appropriate contractual arrangements and we will choose only those organisations with strict controls in place, via appropriate organisational and technical measures in place to protect your personal information.

Retention of your personal data

We will keep your personal data only for so long as is necessary and for the purpose for which it was originally collected. In particular, for so long as there is any possibility that either you or we may wish to bring a legal claim under this insurance, or where we are required to keep your personal data due to legal or regulatory reasons.

YOUR RIGHTS AND CONTACT DETAILS OF THE INFORMATION COMMISSIONER'S OFFICE (ICO)

You may have the right to require us to:

- provide you with further details on the use we make of your personal information or your special categories of data;
- provide you with a copy of the personal information that you have provided to us or which we hold;
- update any inaccuracies in the personal information we hold;
- delete any special category of data or personal information for which we no longer have lawful grounds to use;
- cease processing of your personal information that is based on consent, by withdrawing your consent to that particular processing;
- cease any processing based on legitimate interests grounds, unless our reasons for undertaking that processing outweigh any prejudice to your data protection rights; and
- restrict how we use your personal information whilst a complaint is being investigated.

In certain circumstances, we may need to restrict the rights listed above in order to safeguard the public interest (e.g. the prevention or detection of crime), our interests (e.g. the maintenance of our legal responsibilities) and for the performance of our contract with an employer who is the policyholder for employer-related products and services.

Data Protection Officer (DPO)

If you have any questions, or complaints, in relation to our use of your personal information, you should first contact our DPO, on the details below:

**Canada Life Limited, Group Insurance,
3 Rivergate, Temple Quay, Bristol, BS1 6ER
or by email at: dpo@canadalife.co.uk.**

In the unlikely event that you are dissatisfied with our response, you have the right to take the matter up with the Information Commissioner's Office (ICO), whose address is:

**Information Commissioner's Office,
Wycliffe House, Water Lane,
Wilmslow Cheshire, SK9 5AF**

The full version of our DPN can be found on our website, www.canadalife.co.uk or is available upon request by calling **0345 223 8000**.

This DPN is dated 5th March 2018. Any future updates will be made available as described above.



ACCESS TO MEDICAL REPORTS – YOUR RIGHTS

We may need to get medical reports in order to assess this claim in respect of you. Before we can ask any doctor that you have consulted to fill in a report, we need your permission under the Access to Medical Reports Act 1988.



YOUR RIGHTS UNDER THE ACT ARE AS FOLLOWS.

- You do not need to give your permission, but if you do not, we may not be able to assess this claim in respect of you.
- You can ask to see the report before the doctor returns it to us. If this is the case, we will tell the doctor to keep the report for 21 days so that you can arrange to see it. If you have not made arrangements to see the report within this time, your doctor will send the report to us.
- If you choose not to see the report at this stage, you may ask the doctor for a copy within six months of it being sent to us. We can send a copy of the report to your doctor if you ask to see it at a later date.
- If you think that any part of the report is not correct or is misleading, you may ask the doctor to amend it. If your doctor refuses to make the amendments, you may ask him or her to attach a statement outlining your views, which will then accompany the report.
- Your doctor can withhold access to the report if he or she feels that it would cause physical or mental harm to you or others.

THE MEDICAL REPORT YOUR DOCTOR FILLS IN ASKS ABOUT THE FOLLOWING.

1 YOUR CURRENT HEALTH.

- Any care, medication or treatment you are currently receiving.
- The results of referrals or tests you are waiting for.
- Any time off work in the last three years.

2 YOUR PAST HEALTH.

- Details of any relevant illness, trauma, or referrals for specialist advice or treatment, hospital admissions, consultations with your GP or any other medical adviser, therapist or counsellor, in particular whether you have a history of:
 - malignancy (cancer), cardiovascular (heart) disease, diabetes, and degenerative (gradually worsening) diseases;
 - musculoskeletal disease or injury, for example, arthritis, rheumatism, back problems or any other disorder of the joints or muscles;
 - anxiety, depression, neurosis (such as phobias, obsessions and so on), psychosis (a mental disorder where you lose contact with reality), stress or fatigue; suicidal thoughts or attempts at suicide; or
 - conditions related to drug or alcohol misuse or smoking or chewing tobacco.
- Details of any biopsies, blood tests, electrocardiograms (heart tests), height, weight if measured in the last two years, urinalyses (tests on urine), x-rays or other investigations.
- Any blood pressure readings in the last three years.

3 ANY HISTORY OF DISEASE AMONG YOUR PARENTS OR BROTHERS OR SISTERS THAT YOU HAVE TOLD YOUR DOCTOR ABOUT.

- We have asked your doctor not to reveal information about:
 - negative tests for HIV, hepatitis B or C;
 - any sexually-transmitted diseases unless there could be long-term effects on your health; or
 - predictive genetic test results unless there is a favourable test result which shows that you have not inherited a condition your family suffers from.

If you have any questions about your rights under the act or questions relating to the process of getting, assessing or storing medical information, please write to the DATA PROTECTION Manager at Canada Life.



Your Declaration and Consent

- I confirm that I have answered the questions in this form honestly and have taken reasonable care to ensure those answers are correct.
- I confirm that in the period before the acceptance of this cover, I will inform Canada Life of any matter or fact that would make answers to the questions in this form incomplete, incorrect or untrue.

You should provide the answers on this form personally. If the answers are filled in by anyone else then they must be read over and agreed by you before the declaration is signed. Any amendments or alterations should be completed and initialled by you.

I agree to Canada Life:

- Obtaining relevant information about me, including without limitation, my physical or mental health, lifestyle, occupation duties and potentially hazardous activities from:
 - Any medical professional that has attended me;
 - Any medical examination or tests that Canada Life arranges;
 - Any telephone interview Canada Life arranges;
 - My employer or their agent;
 - Other insurers who you have applied to or may cover you for life, critical illness, sickness, disability, accident or private medical insurance.
- Using and sharing my personal information as set out in the Data Protection Notice included on this form.

Please ensure you tick one of the following boxes in respect of your rights under the Access to Medical Reports Act 1988. If you wish to see the report you have 21 days to make arrangements to visit your doctor:

I DO NOT want to see any report from my doctor before it is sent to Canada Life.

I DO want to see any report from my doctor before it is sent to Canada Life.

If you are submitting this form on behalf of another person, by signing this form you confirm that you have their consent for Canada Life to obtain, use and share their personal information as set out above.

Signature

Date (day, month, year)

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This policy is underwritten by Canada Life Limited (the Company).


Helpful Hint

Please provide a handwritten (ie not electronic) signature

What happens next?

Please return this completed form to:

 E-mail: medicalunderwriting@canadalife.co.uk

 Medical Underwriting Team, Canada Life Limited,
3 Rivergate, Temple Quay, Bristol BS1 6ER,
marked Private and Confidential.

Please ensure that:

- All details on pages 2 and 3 have been fully completed.
- You have signed and dated above.
- A copy of your recent medical examination is enclosed, if applicable.

You will be contacted shortly to arrange a convenient appointment for your Telephone Interview.



For more information please read 'Your guide to telephone interviews'.



If you have any further questions please feel free to contact our **Customer Service Team** on **0345 223 8000**.

Our forms are available to download from our website: www.canadalife.co.uk/group

Canada Life Limited, 3 Rivergate, Temple Quay, Bristol BS1 6ER. Telephone 0345 223 8000

Canada Life Limited, registered in England no. 973271. Registered Office: Canada Life Place, Potters Bar, Hertfordshire EN6 5BA. CLFIS (UK) Limited, registered in England no. 04356028 is an associate company of Canada Life Limited. Registered Office: Canada Life Place, Potters Bar, Hertfordshire EN6 5BA. Canada Life Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority.

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Your guide to telephone interviews

What are the advantages of a telephone interview over me completing a Health Declaration?

- We complete the paperwork for you and will send you a copy so you can confirm the accuracy.
- We ensure no questions are missed meaning no further correspondence is needed from you on these points.
- We can get a better picture of your answers by talking through any issues that are not always easy to document.
- We call you at a time convenient to you.

What will the telephone interview cover?

The interviewer will collect information regarding your health, lifestyle, business travel, occupation duties and potentially hazardous activities.

The telephone call will be recorded.

How long does it last?

30
minutes

The duration of the interview can vary greatly, but you should allow at least 30 minutes.

What will I need to do before the telephone interview?

As you will be asked personal questions about your health, you should plan for the interview to take place somewhere where you are able to speak freely and will not be disturbed.

We are happy to call you on a mobile number but will not conduct the interview if you are driving, even on a hands free mobile.

Please have the following details ready for the call:

- Any medication you are currently taking (including the name and dosage).
- Any past or present medical condition suffered (other than very minor ailments such as the common cold).
- Any tests or investigations - in particular any blood pressure and cholesterol readings. You may wish to phone your GP or whoever did these tests, to get the results.
- Details of any serious condition, such as cancer, heart attack or stroke, suffered by a member of your immediate family (your mother, father, brothers or sisters).
- Your height and weight. If you do not know your weight, please try and weigh yourself prior to the interview.
- If you have had a company medical in the last year it would help to have a copy of this to hand before the interview.
- If you are not comfortable disclosing some information over the phone, then please advise the interviewer and this information can be sent instead to the **Medical Officer, Canada Life Ltd, 3 Rivergate, Temple Quay, Bristol BS1 6ER.**
- If you are not sure whether something is important, then it is best to mention it.



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How will you be contacted?

We will call on the specified number at the time agreed.



What information do you need to tell the interviewer?

We rely on the information you give us to make our decision about insuring you. If you are in any doubt about the need to tell us something, please give us the information in full as it's better to tell us a fact that turns out not to be relevant than to miss out something that later causes problems.

We regard you as entirely responsible for what is disclosed to us. If at any time we find that we have received incomplete or false information, then this may result in the loss or cancellation of the cover being assessed.

What happens after the interview?

A copy of the questions and your answers completed by the interviewer will be sent to you. Please check that the details are correct, then sign and date and return this with details of any amendments.

In most cases we will be able to make our underwriting decision with just the information you provide during the call. A decision letter will be issued to your Scheme Administrator based on this information.

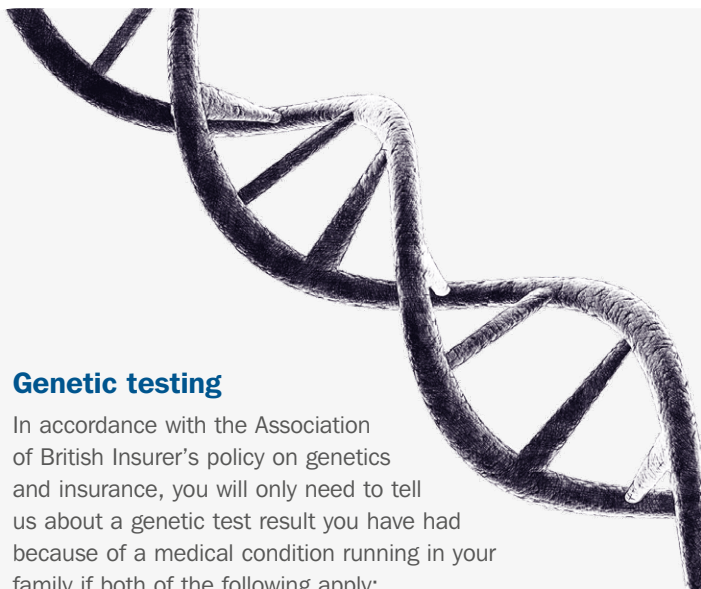
In a few cases we may need further information or medical evidence, and if that is the case, we will notify your Scheme Administrator.

Genetic testing

In accordance with the Association of British Insurer's policy on genetics and insurance, you will only need to tell us about a genetic test result you have had because of a medical condition running in your family if both of the following apply:

- The test was for Huntington's disease
- The total life insurance you are insured for with all companies is over £500,000.

However, you must tell us if you either have a family history of, are experiencing symptoms of, or are having treatment for, a medical condition including any genetically inherited condition.



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