



HEALTH
INSURANCE.TRAVEL



REGENCY
for expats



INTERNATIONAL LIFE INSURANCE



HEALTH

INSURANCE.TRAVEL

“With clients in
over 120 countries
around the world”



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Welcome to REGENCY

Regency for Expats 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 for Expats 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 for Expats 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 workstreams, 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 for Expats is proud to 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 for Expats.

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 has 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 solutions forms a key driver for their insurance decisions.



Trusted protection

With over 10,000 insurance and financial services agents around the world, Regency for Expats 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 for Expats has developed a global support network for clients that means that wherever they are in the World, they will be able to feel confident that their coverage has the infrastructure in place to support their needs.



STRENGTH & SECURITY

As part of Regency Assurance, a regulated insurance and financial services company, clients can be confident that Regency for Expats products and services are delivered on a foundation of financial strength and security that is supported throughout by a customer focused ethos of trust and fairness.

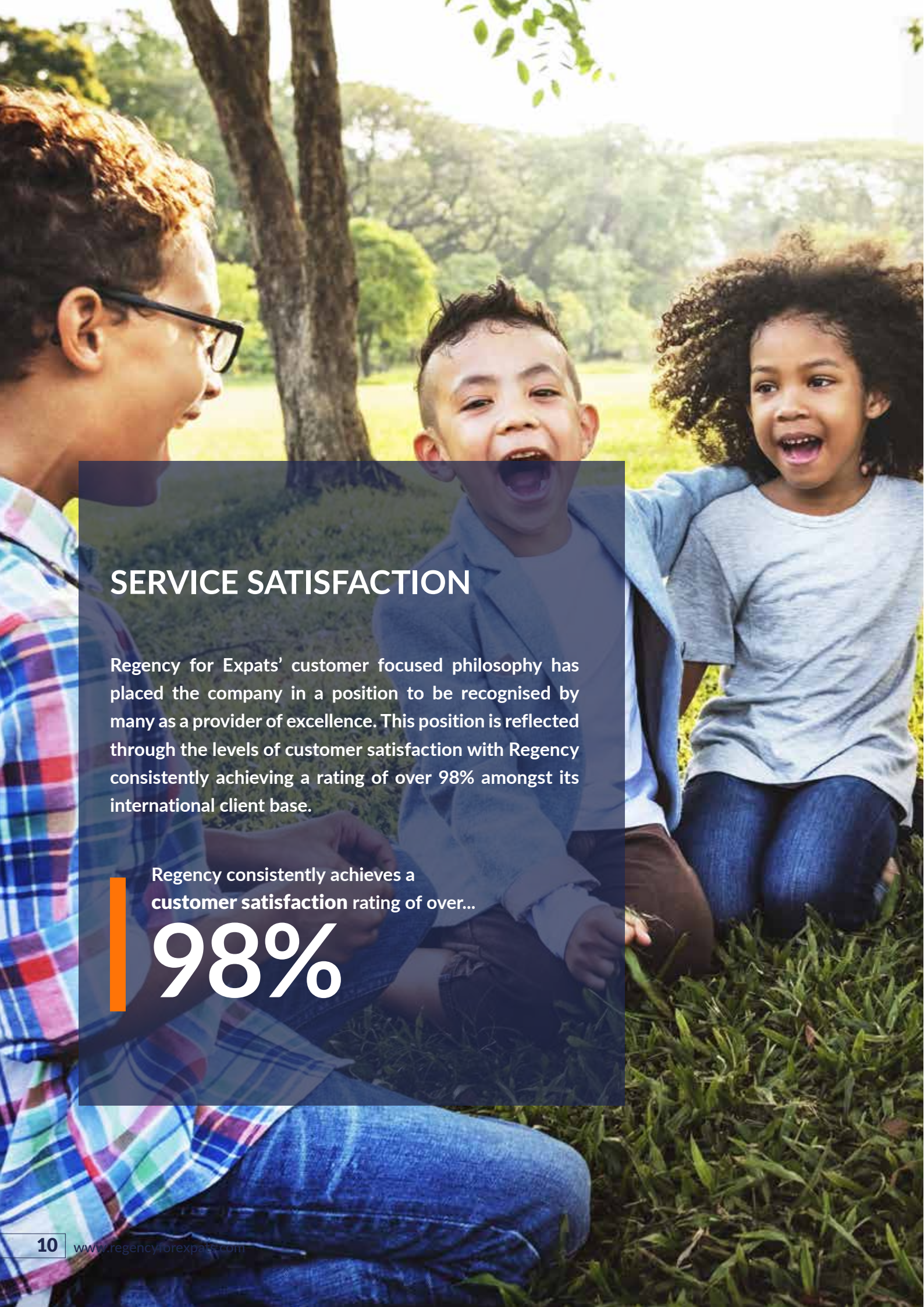
Compliance towards international insurance and financial services standards is at the very heart of the company which operates under long term insurance licenses issued, maintained and monitored through the FSRC. This not only ensures that the company's practices adhere to highest international standards but that Regency for Expats 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 for Expats' attitude towards building financial security and confidence has seen the company instigate an auditable practice. This means that Regency for Expats is able to meet any financial liabilities incurred through the provision of its insurance coverage and has a sustainable financial capacity to meet its operational responsibilities.



SERVICE SATISFACTION

Regency for Expats' customer focused philosophy has placed the company in a position to be recognised by many as a provider of excellence. This position is reflected through the levels of customer satisfaction with Regency consistently achieving a rating of over 98% amongst its international client base.

Regency consistently achieves a
customer satisfaction rating of over...

98%



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 for Expats 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 for Expats' services are its people. A team of highly dedicated professionals committed to the overall visions 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.



BENEFITS REVIEW

✦ DEATH BENEFIT

✦ UPFRONT PAYMENT

✦ CHILD CHAPERONE

✦ BEREAVEMENT COUNSELLING

✦ MORTAL REMAINS REPATRIATION

✦ INTERNATIONAL ASSISTANCE

✦ GEOGRAPHIC EXTENSION



Death Benefit

When you take out Regency for Expats 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 for Expats' 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 for Expats' 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 for Expats 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 for Expats 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 for Expats 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 for Expats 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 for Expats' 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.



TABLE OF BENEFITS

This Life Insurance policy provides cover for the following benefits in the event of the death of the insured person. All benefits, are conditional upon receipt of official confirmation of the death of the insured person and will be subject to the terms, conditions, definitions, exclusions and warranties of the policy.

	Benefit Limit
Death Benefit Life Insurance payment to the beneficiary(ies) following the death of the insured person.	Sum insured shown on Certificate of Insurance
Upfront Payment Immediate proportion payment to the beneficiary(ies) following the death of the insured person.	10% of sum insured
Child Chaperone Travel costs of next of kin to escort unaccompanied minors following the death of the insured person.	Full cover
Bereavement Counselling Family, Friends and Colleagues telephone access to qualified psychologists provided by Regency for Expats following the death of the insured person.	Full cover
Mortal Remains Repatriation Repatriation of the insured person's mortal remains to power of attorney's chosen country following the death of the insured person.	Full cover
International Assistance 24-Hour access to Regency for Expats' international assistance services following the death of the insured person.	Full cover
Geographical Extension Geographical area of coverage for insured persons and beneficiaries to access Regency for Expats International Life Benefits.	Anywhere in the World

Please note that this is a summary only; please read and fully understand the full terms, conditions, definitions, exclusions and warranties of the Regency for Expats International Life Insurance policy wording.



POLICY WORDING

This policy document is only valid when issued in conjunction with a Regency for Expats Life Insurance Certificate of Insurance, and provided the required insurance premium has been paid.

The purpose of this insurance policy is to provide cover for losses arising as a result of medical expenses that occur during the period of cover.

The cover is subject to certain limits, excesses and co-insurance as set out in the table of benefits. The cover provided is subject to certain terms, definitions, conditions and exclusions as outlined within this document.

Please take the time to read and fully understand the content of this document including the table of benefits and the policy wording terms, conditions, exclusions and definitions and details of how to make a claim; if there is any element of these that you don't understand or that require clarification, please contact Regency for Expats directly.

'Cooling-Off' Period

Please read and fully understand the terms, conditions, definitions 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, less any applicable administration charge determined by us at that time. In order to receive a refund you must contact Regency for Expats and submit all required documents including completed Cancellation Form within 14 days of the purchase of this policy and not have made or attempted to make a claim.



DEFINITIONS



CONDITIONS



EXCLUSIONS



HOW TO MAKE A CLAIM



**CONTACT
REGENCY FOR EXPATS**



POLICY WORDING 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.

Acute: A medical condition which is brief, has a definite end point, and which we, on advice or general advice, determine can be cured by treatment.

Advice: Any consultation from a medical practitioner or specialist, including the issue of any prescriptions or repeat prescriptions.

Alternative Therapies Treatment: Treatment of a medical condition by homeopathy, naturopathy, osteopathy,

acupuncture and traditional Chinese medicine only. Benefit amounts are per policy year.

Annual Medical Check-ups: Medical tests/screenings that are conducted by a medical practitioner without any clinical symptoms being present.

Appliances: Devices, implants and equipment when used as an integral part of a surgical procedure administered by 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.

Chronic: A disease, illness or injury that has at least one of the following characteristics:

- It continues indefinitely and has no known cure;
- It comes back or is likely to come back
- It is permanent;
- Members need to be rehabilitated or specially trained to cope with it;
- It needs long-term monitoring, consultations, checkups, examinations, tests, or medication;
- Is described as chronic by a medical doctor; or
- Is generally medically accepted to be a chronic condition.

Chronic Conditions Benefit: Routine drugs and dressings for the treatment of a chronic medical condition.

Coinsurance: The percentage of the total value of incurred expenses for which the member is responsible.

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.

Day Patient: A member who is admitted to a hospital bed but does not stay overnight.

Death Benefit: Life Insurance payment to the next of kin or estate following the death of the insured person.

Deductible: An amount that we may deduct from our reimbursement to you when making a claim for treatment received outside the direct settlement network, and which is equivalent to any coinsurance that would normally be the responsibility of the member.

Dental Practitioner: A person who is licensed by the relevant licensing authority to practice dentistry in the country where dental treatment is given.



POLICY WORDING DEFINITIONS

Dependants: One spouse or adult partner and/or unmarried children who are not more than 18 years old and residing with the member, 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 member in a similar relationship. All dependants must be named in the certificate of insurance.

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

Direct Settlement: When your bill is settled directly by us either because the provider is contracted to our direct settlement network or because we have received and agreed to make a onetime direct settlement.

Please Note - Where members receive treatment for a medical condition that is not covered within the terms of the policy, the member remains liable for the costs of such treatment, which must be settled in full upon request.

Failure to act accordingly will result in the suspension or cancellation of your cover, without refund of premium.

Drugs and Dressings: Essential drugs, dressings and medicines prescribed by a medical practitioner or specialist and which are not available without prescription.

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.

Emergency Assistance: Access to telephone assistance provided by Regency for Expats for the administration of covered benefits in the event of an emergency.

Emergency Dental: Treatment on natural sound teeth following an accident and received in an emergency room for the immediate relief of pain only.

Emergency Room Treatment: Treatment received in an emergency room of a hospital within 24 hours following a medical emergency.

Evacuation and Repatriation: Where treatment is not available at the place of the incident, the costs incurred in moving a member from the place of incident to the nearest country with appropriate medical facilities, as determined by the attending medical practitioner or specialist in conjunction with our medical advisors. All airline tickets are limited to economy class.

Excess: The amount payable by a member in respect of expenses incurred before any benefits are paid under the policy, as specified in their certificate of insurance.

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

Eye Test: Examination of eyes to test visual acuity, pupil function and extra ocular muscle motility by an optometrist.

General Advice: Advice from our appointed medical expert to establish medical practice and/or established medical opinion in relation to any medical condition or treatment.

General Nursing Care: Care given by the nursing staff of a hospital not including a private nurse.

GP Consultation Fees: General Practitioner Consultation and examination fees.

Hazardous Activity: An action, activity or undertaking which customarily demonstrates at least one of the following characteristics:

- The activity ordinarily requires safety training or a safety briefing;
- It is generally accepted or advisable for safety equipment and/or protective clothing to be used during the activity;
- The activity is ordinarily facilitated or supervised by an instructor, licensed practitioner or by a person holding themselves out as an expert;
- The member is ordinarily required to sign a document or waiver which acknowledges safety risks in completing the activity;
- The member knowingly participates in an activity that they do not have sufficient skill or knowledge to undertake; or
- The activity carries a risk of danger or injury which a reasonable person would identify as greater than routine daily tasks.

Hazardous activities may include, but are not limited to:

- Playing competitive sports and/or taking part in motor sports of any kind;
- Mountaineering, including potholing, spelunking or caving;
- High altitude trekking over 2,500 meters;
- Skiing off-piste or any other winter sports activity carried out off-piste; or
- Arctic or Antarctic expeditions.

Hereditary: A disease or disorder that is inherited genetically.

Hijacking: Detainment on a means of public transport due to it being hijacked by persons using violence or threat of violence.

Hospice: A facility that provides palliative treatment and does not provide a cure.

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

Hospital Cash Benefit: Where treatment is received in a state or charitable hospital and no claim is submitted under this policy for re-imburement providing that the medical condition is eligible under the policy.

Hostage Negotiations: Professional negotiations with kidnappers in the event of members being taken hostage but not including the payment of any ransoms or provision of any items or undertakings connected with the negotiations or outcome or potential outcome of the negotiations.



POLICY WORDING DEFINITIONS

Imaging and Lab Tests: Diagnostic procedures performed by a medical practitioner to determine the cause of medical symptoms.

Inpatient: A member who stays in a hospital bed and is admitted for one or more nights solely to receive treatment.

Inpatient Cover: Treatment received by an insured person when admitted to a hospital bed for an overnight stay of one or more nights.

Intensive Care: Standard accommodation and food provided in an intensive care unit of a hospital including general nursing care.

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

Local Ambulance to Hospital: Road vehicle used for transportation to hospital in the event of a medical emergency.

Major Dental: Treatment of teeth including fillings and extractions only.

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 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, consultation or treatment, which in the opinion of our medical advisor(s) meets all of the following criteria:

- i) is appropriate and consistent with the diagnosis;
- ii) is in accordance with treatment guidelines for any condition;
- iii) is in accordance with generally accepted medical standards and not primarily for the convenience or desire of the member;
- iv) could not have been omitted without resulting in significant impairment or grievous loss of amenity to the member; and
- v) does not incur more costs than an alternative course of treatment at least as likely to result in an equivalent therapeutic or diagnostic result.

Member / Insured Person / You / Your: The policyholder and/or the 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.

Mugging: Where treatment is received in a hospital as a result of an act of attacking and robbing a member in a public place.

New Born: A baby who is within the first 32 weeks of its life following delivery.

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.

Oncology Cover: Specialist consultation fees, diagnostics, surgery, radio-therapy and chemotherapy relating to cancer and its diagnosis.

Organ Transplant Cover: The replacement of vital organs (including bone marrow) as a consequence of an underlying medical condition.

Outpatient: A member who receives treatment at a recognised medical facility, but is not admitted to a hospital bed as an inpatient or day patient.

Outpatient Cover: Treatment received without admission to a hospital bed.

Outpatient Surgical: Minor surgical procedures carried out by a medical practitioner.

Overall Plan Limit per year: The most we will pay for each insured person in any period of cover.

Palliative Treatment: Any treatment given, on advice or general advice, for the purpose of offering temporary relief of symptoms. Palliative treatment is not given to treat the underlying medical condition causing the symptoms. For the purposes of this policy, palliative treatment will include renal dialysis.

Parental Accommodation: One added bed in the hospital room for a parent to stay with their child whilst admitted into hospital for an injury or an illness covered by this policy.

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 or any subsequent renewal date, as applicable.

Personal Coaching: Telephone access to personal coaches provided by Regency for Expats.

Physiotherapy: Treatment received within 3 months of an injury or illness by a physiotherapist upon referral by a medical practitioner. Benefit amounts are per policy year.

Plan Limit: The maximum amount payable for each insured person in any period of cover.

Policy: The health 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, table of benefits and policy wording terms, conditions and exclusions, and any other supporting documentation.

Policyholder: The person named as policyholder in the policy schedule or certificate of insurance.



POLICY WORDING DEFINITIONS

Post-hospitalisation: Treatment received within 2 months of an injury or illness that required admission into hospital as an inpatient.

Pre-hospitalisation: Treatment and diagnosis received within 2 months of an injury or illness that required admission into hospital as an inpatient.

Prescribed Medication: Drugs and medicines prescribed by a medical practitioner.

Private Room: Single occupancy accommodation in a hospital but not including VIP suites.

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

Provider Network: A supplier of treatment participating in the direct settlement network.

Psychology Counselling: Telephone access to qualified psychologists and counsellors provided by Regency for Expats.

Qualified Nurse: A qualified nurse whose name is currently on any register or roll of nurses, maintained by any Statutory Nursing Registration Body within the country in which he/she is resident.

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.

Rehabilitation Cover: Assisting a member who, following a medical condition, requires physical therapy and assistance in independent living to restore them, as much as medically necessary or practically able, to the position in which they were in prior to such medical condition occurring.

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.

Room and Board: Hospital accommodation and food provided by a hospital as standard.

Routine Dental: Routine examinations of teeth including check-ups, x-rays, cleaning and polishing.

Semi-Private Room: Dual occupancy accommodation in a private hospital.

Sound Natural Teeth: Teeth that were stable, functional, free from decay and advanced periodontal disease, and in good repair at the time of the accident.

Specialist: A registered medical practitioner who currently holds a substantive consultant appointment in that specialty, which is recognised as such by the statutory bodies of the relevant country.

Specialist Consultation Fees: Consultation with a specialist upon referral by a medical practitioner.

State Medical Facility: A hospital funded and operated by the government of a state.

Table of Benefits: The schedule of benefits included within each level of cover and corresponding with the cover level as stated on the certificate of insurance.

Terrorism: Treatment received for physical injury as a result of violence and intimidation in the pursuit of political aims.

Treatment: Surgical, medical or other procedures, the sole purpose of which is the cure or relief of a medical condition.

Underwriters: The carrier of risk and payer of benefits as indicated in the policy documentation and certificate of insurance.

Vaccinations: Vaccinations and immunisations that are directly related to overseas travel requirements.

Waiting Period: Period of time from the commencement date where coverage will not apply.

Ward: Communal accommodation in a hospital where the patient is sharing the room with two or more other patients.

We/Our/Us: Shall mean Regency for Expats, a trading name of Regency Assurance.





POLICY WORDING CONDITIONS

The following conditions apply to all sections of this insurance:

Policy

This insurance contract consists of the application form and the policy documentation, including the certificate of insurance, table of benefits and policy wording. The rights of the policyholder; or any beneficiary will not be affected by any provision other than the one described above. Your policy documentation may be issued in soft copy only, which does not in any manner affect the validity or enforceability of any term, condition, definition, exclusion or warranty therein.

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.

Tax

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

Eligibility for Cover

New applicants will be eligible for cover up until the age of 65.

Termination of Cover

Cover may end if:

- i) You exhaust the maximum annual aggregate benefit under the plan;
- ii) You fail to reimburse us within 14 days of receipt of notice that we have made payment for an ineligible claim;
- iii) You fail to pay any due premiums on or prior to the time they are due. Outstanding premiums are considered a material breach of the policy; or
- iv) You breach any part 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) as follows: all costs incurred must be medically necessary and subject to reasonable and customary charges.

The insurance contract will provide cover for treatment given during the current period of cover.

Period of Cover

Your plan is in force for the period of cover noted in your certificate of insurance subject to our rights of termination of cover. In the event a future agreement is reached between the policyholder and us, the policyholder will be bound by the terms and conditions of any new agreement agreed between the parties. The policyholder or insured person bears the responsibility to enter into any new agreement with us. We accept no liability for the failure of a policyholder to enter into a new agreement.

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 that may affect our assessment and consideration of an application or claim should be declared at the earliest opportunity by the policyholder. A fact, whether disclosed by the policyholder or identified by us, is considered material if it would influence the assessment of risk attributable to the policy, or liability to the Insurer. Such examples include but are not limited to pre-existing health conditions, medical records, hazardous activities or being exposed to heightened risks over and above routine day-to-day dangers.

Failure to accurately and promptly provide fair and reasonable representation of facts may invalidate your cover, or lead to the cancellation of your policy and/or rejection of claims. 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 submitted in full as soon as is reasonably practical and no later than 2 months after the event which causes the claim. Failure to do so may result in our rejection of the claim or may result in you not receiving the full amount claimed for.

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.



The onus of proving the eligibility of any claim under this policy rests with the policyholder. No claim shall be eligible unless and until sufficient evidence is disclosed to facilitate the comprehensive adjudication of the claim and to establish eligibility. The absence of specific evidence or information to establish the ineligibility of a claim shall not automatically render a claim eligible.

Where any underlying cause and/or diagnosis is unknown or has not been established, we reserve the right to delay or pause the adjudication of a claim until such time as the cause and/or diagnosis is known and ratified by us.

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

If any representation, claim, or disclosure made under this policy is in any respect fraudulent, unfounded, or not made in good faith, all benefits paid and/or payable in relation to any claim shall be forfeited and recoverable. In addition, all cover in respect of the insured person(s) may be cancelled void from the date of entry. We reserve the right to disclose information to any third party, including any legal, regulatory, or other relevant authority.

Applicable Law

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

Right to Recover:

This policy constitutes an agreement between Regency for Expats and the member to provide insurance coverage for a 12-month period. Regency for Expats agrees to provide insurance coverage in accordance with the terms, conditions, definitions, and exclusions outlined within this brochure and the certificate of insurance. The member agrees to make all premium payments in full and in accordance with the frequency outlined within the certificate of insurance. In the event of any non-payment of the insurance premium, Regency for Expats reserves the right to seek recovery of any premium owed during any current or previous period of coverage.

It is your responsibility to ensure any premium payments are received by Regency for Expats on or before their due date. We are under no obligation to provide warnings of any missed payments, and in the event of such non-payment of premium shall be entitled to lapse the policy without further recourse to you.

In the event a member's policy is cancelled or lapses due to non-payment of premium and the member subsequently commences a new policy with Regency for Expats, any outstanding premium payment from a previous policy shall be considered an outstanding debt owed to us. As creditor, we reserve the right to withhold or apportion payment of any future claims made under the member's existing policy until any such debt is settled.

Payment of Claims on Periodic Policies

In the event the member pays their insurance premium on a periodic basis and makes a claim under the terms and conditions of this policy, any and all remaining premium payments for the 12-month policy duration will constitute a debt owed to Regency for Expats which will be recoverable in the event of non-payment of any instalment.

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 due to any injury, illness or medical condition insured persons sustain to the full extent of the benefits provided or to be provided by the policy. If insured persons receive any payment from any other party or from any other insurance cover as a result of an injury, illness or medical condition, 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 or medical condition, 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 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 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 person's 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 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 your application. We reserve the right to apply additional options, exclusions or premium increases to reflect any circumstances the insured person 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 and Investigation

We reserve the right to request further tests and/or evaluation.

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

All information 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.

You must attend and engage in any examinations, investigations, or appointments as determined necessary by us. Any failure to attend or engage in such appointment, failure to provide or delays in the provision of any requested information may invalidate your claim.

If an insured person dies, we have the right to ask for a post mortem examination.

Waiver

Any deviation from the specific terms, conditions, exclusions and warranties of the policy by us at any time shall not constitute a waiver of our right to implement, rely or insist upon compliance with such provisions at any other time. This includes but is

not limited to the payment of premiums or benefits. This shall apply irrespective of the context of any such waiver of any right under the policy, including repeat circumstances.

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:

- i) Misled us by misstatement;
- ii) Claimed benefits for any purpose other than as are provided for under this policy;
- iii) Agreed to any attempt by a third party to obtain an unreasonable pecuniary advantage to our detriment; or
- iv) Otherwise failed to observe the terms and conditions of this policy or failed to act with good faith.

Liability

Our liability shall cease immediately, and such cessation shall apply retroactively upon the non-payment of any premium, or cessation of the policy for whatever reason, including without limitation the natural expiry of the policy or termination of the policy.

Minimising 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.

Undue Influence

We reserve the right to cancel the policy, reject or invalidate any claim submitted thereunder, or impose any other sanction deemed necessary in the event that the policyholder, insured persons or any of their representatives, use threatening, coercive, abusive, harassing or intimidating or damaging action, behaviour or communications as determined by us. We reserve the right to recover any unpaid premium in the event of cancellation owing to any of the above actions, or recover any costs or losses incurred. This provision shall survive the termination of the policy.

Alterations or Adjustments

We reserve the right to alter or discontinue the benefits, terms, conditions, definitions, exclusions, warranties, or premiums of your policy at each renewal date. It is your responsibility to ensure that you have read and fully understand the terms, conditions, definitions, and exclusions of your policy. Your decision to renew your policy shall constitute your acceptance that you have received, reviewed, understand, and agree to all terms, conditions, exclusions, and warranties contained within your policy for each period of cover and accept to be bound by the same.

Parties to the Contract

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





POLICY WORDING EXCLUSIONS



General exclusions apply to all sections of this insurance.

We will not cover the following:

- 1.** Any claim relating directly or indirectly to any medical condition or related condition that existed prior to the date of entry. Conditions for which you have received treatment, had symptoms of, had knowledge existed or should have known existed, or you sought advice for or existed without your knowledge prior to your date of entry (preexisting medical condition) will not be covered.
- 2.** Any claim relating directly or indirectly to an incident, injury or illness that existed at or before the time you purchased this insurance or at or before the time this insurance policy was taken out.
- 3.** Chronic supportive treatment of renal failure, including dialysis unless the Chronic Conditions benefit is part of your plan.
- 4.** Any costs relating to a chronic medical condition unless the Chronic Conditions benefit is part of your plan.
- 5.** Any costs relating to cancer and its diagnosis unless the oncology benefit is part of your plan. All eligible claims relating to cancer are settled within oncology benefits, and only where they appear on your benefits schedule.
- 6.** Treatment, tests or costs which we determine on general advice, is either experimental, unproven, novel, unlicensed or not medically necessary.
- 7.** Treatment received on an inpatient basis where it is available on an outpatient basis or customary to be received as an outpatient. The consideration for this may only be on the basis of medical necessity relating to the specific treatment being carried out.
- 8.** Treatment for a terminal illness or any costs incurred from a hospice.
- 9.** Costs incurred or treatment received at an institution such as a convalescent or nursing home.
- 10.** Any claim relating directly or indirectly to a congenital anomaly or conditions, birth injuries, birth defects or any hereditary medical conditions of any kind.

- 11.** Preventive medicines, and routine tests and physical examinations by a medical practitioner, including gynaecological investigations unless they appear on your benefits schedule. Normal hearing tests are excluded.
- 12.** Non-medical / natural degenerative eye defects, including, but not limited to, myopia, presbyopia and astigmatism and any corrective surgery for non-medical/natural degenerative sight defects. Normal eye tests are excluded unless they appear on your benefits schedule.
- 13.** Costs of spectacles, lenses, contact lenses or any corrective eye devices.
- 14.** Rehabilitation benefits unless they appear on your benefits schedule.
- 15.** Physiotherapy benefits unless they appear on your benefits schedule.
- 16.** Treatment received in health spas, nature cure clinics, spas, or similar establishments. Services such as massages, hydrotherapy, Reiki, or other non-medical treatments.
- 17.** Cost incurred while in or relating to a private room of a medical facility unless they appear on your benefits schedule.
- 18.** Treatment given at establishments or a hospital where that facility has become the member's home or permanent abode or where admission is arranged wholly or partly for domestic reasons.
- 19.** Costs relating to aesthetic clinics, cosmetic treatment or corrective treatment or any consequence thereof.
- 20.** Costs relating to weight loss or weight problems including, but not limited to bariatric procedures, obesity surgery or treatment, diet pills or supplements, health club memberships, diet programs and treatment in a residential treatment facility for eating disorders. Any complications arising from weight loss or other excluded procedures are not covered.
- 21.** Alternative therapies unless they appear on your benefits schedule.
- 22.** Any costs relating to organ transplants are excluded unless they appear on your benefits schedule.
- 23.** Costs incurred in connection with locating a replacement organ or any costs incurred for removal of the organ from the donor, transportation costs of the same and all associated administration costs.
- 24.** Any claim relating directly or indirectly to pregnancy, pregnancy terminations, pregnancy complications, antenatal classes or midwifery costs, delivery costs, postnatal costs or any medical conditions relating to pregnancy or childbirth.
- 25.** Costs relating to premature birth or neo-natal care, new-born or well-baby visits including but not limited to developmental assessments, examinations, testing, treatment or care.
- 26.** Treatment, tests or costs relating to impotence or any related condition or consequence thereof.



27. Costs directly or indirectly arising from (or required in connection with) male and female birth control, sterilization (or its reversal). Infertility/fertility consultations, testing and treatment (including assisted conception) is excluded. Any complications of pregnancy and routine pregnancy costs resulting from infertility treatment (including assisted conception) are excluded.

28. Treatment, tests or costs associated with a sex change and any consequence thereof.

29. Any costs relating to human papillomavirus, venereal disease or any sexually transmitted diseases or related condition.

30. Treatment, tests or costs relating 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.

31. Costs in respect of a counselor, psychiatrist, psychotherapist or psychologist unless they appear on your benefits schedule.

32. Treatment, tests or costs relating to learning difficulties, hyper-activity, attention deficit disorder, speech therapy and developmental, social or behavioural problems.

33. 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.

34. Any claim relating to suicide or attempted suicide, bodily injury or illness, which is wilfully self-inflicted or due to negligent or reckless behaviour.

35. Any claim relating directly or indirectly to the member acting or attempting to act illegally, or being a participant or wilful bystander during the committing of, any offence.

36. Costs incurred while an inmate of a prison, jail or any correctional facility or while in any mental institution.

37. Costs and expenses incurred where a member has travelled against general advice or medical advice.

38. Evacuation expenses unless they appear on your benefits schedule. Air rescue, sea rescue or mountain rescue costs.

39. Travel and accommodation costs unless specifically agreed by us in writing prior to travel. No travel and accommodation costs are payable where treatment is obtained solely as an outpatient, including the costs of a hired car. Transportation costs from a ship, oil-rig platform or similar oil-shore location are not covered.

40. Treatment, tests or costs related to sleep related disorders (including but not limited to snoring, fatigue and jet lag), stress, anxiety, or any related condition.

41. Dietary supplements or nutritional supplements and related substances

that can be purchased with or without prescription, including, but not limited to, vitamins, minerals, organic substances, and infant formula given orally.

42. Home visits by a medical practitioner, specialist or qualified nurse unless specifically agreed by us in writing prior to consultation.

43. External prostheses, including their maintenance or fitting, any hearing aids or other equipment, medical or otherwise.

44. Any claim relating to a Hazardous Activity, unless declared to and accepted by us prior to the policy commencing.

45. Any claim arising as a result of your use of any two-wheeled motor vehicle unless:

1) As a passenger you wear a crash helmet and the driver has passed a practical motorcycle driving test, and holds a full motorcycle license which permits them to drive an unrestricted two-wheeled motor vehicle, and motor vehicle insurance coverage including benefits for personal injury has been arranged for you and is valid for and at the time of the accident; or

2) As a driver you wear a crash helmet, have passed a practical motorcycle driving test, you hold a full motorcycle license which permits you to drive an unrestricted two-wheeled motor vehicle, and motor vehicle insurance coverage including benefits for personal injury has been arranged and is valid for and at the time of the accident.

46. Any claim arising as a result of you participating in motor racing, rally or vehicle racing of any kind.

47. Any claim involving you taking part in manual labour.

48. Any claim arising as a result of you failing to get the inoculations and vaccinations that you are reasonably required to receive.

49. Any claim arising from you acting in a way which goes against the general advice or advice of a medical practitioner.

50. Any costs for the following:

1) Telephone calls;

2) Taxi fares;

3) Food and drink (unless these form part of your hospital costs if you are kept as an inpatient).

51. Self-treatment, or treatment provided by a direct family member. This includes, but is not limited to, prescribed medication, diagnostic tests and surgical procedures.

52. All benefits are excluded unless they appear on your benefits schedule.

53. Any claim relating directly or indirectly to conflict/civil unrest or act of terrorism unless they appear on your benefits schedule.

54. Services which have not been recommended and prescribed by your attending physician or specialist.

55. Any consequential loss.

56. Costs incurred as a result of ionizing radiation, radioactive contamination, chemical contamination or nuclear contamination of any kind.

57. Costs incurred outside your geographical area of cover as stated on your certificate of insurance.



POLICY WORDING EXCLUSIONS

58. Costs incurred outside the period of cover or in any period in which the appropriate premium has not been paid.

59. Any excess, deductible or co-insurance for each benefit per condition per year.

60. Any second or subsequent medical opinions from a medical practitioner or specialist for the same medical condition unless agreed in writing by us.

61. Expenses which are recoverable from a third party.

62. Treatment, tests or costs relating to genetics; including but not limited to genetic testing, gene therapy, gene manipulation, genetic engineering or any action, treatment or assessment relating to the alteration of genes.

63. Treatment, test or costs for, or arising from, deafness caused by ageing.

64. Costs relating to loss of hair and or any hair replacement.

65. Any costs relating to ear or body piercing or tattooing.

66. Costs incurred for the completion of any claim forms or the provision of any documents or reports needed to adjudicate a claim.

67. Costs relating to cryopreservation, implantation or reimplantation of living cells or living tissue.

68. Vaccinations or inoculations unless they appear on your benefits schedule.

69. Costs incurred due to complications caused by an illness, disease, injury or treatment for which cover is excluded or limited within this policy.

70. Any claim relating to menopause or any natural biological process.

71. Treatment, tests or costs relating to the requirement to repeat, correct or re-evaluate Treatment which in the opinion of our medical advisor(s) has been unsuccessful.

72. Any claim relating to a future incident, illness or event which you had knowledge of, or would reasonably be expected to have knowledge of, prior to your date of entry which is likely to result in a claim being made under this policy.

73. Any claim relating to general advice, Treatment or advice given by a Medical Practitioner, Qualified Nurse or member of staff of a medical facility which is given or administered erroneously, negligently, or in any scenario where due care and attention is not given by representatives of the treating facility.

74. Any claim resulting from a failure or refusal to receive treatment for a Medical Condition.

75. Any claim made where the Insured Person has not died during the Period of Cover.

76. 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.





POLICY WORDING HOW TO MAKE A CLAIM



Regency for Expats' 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 for Expats' 24-hour international assistance can manage the financial and administrative aspects on the beneficiary's behalf.



Complaints

Our goal at Regency for Expats 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@regencyforexpats.com

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



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