



Excepted Group Life

MEMBER GUIDE

Excepted Group Life

In the event of your death while an eligible employee, a lump sum payment will be made. Your employer will be able to tell you the benefits available to you.

This guide is intended to provide high-level factual information about the life assurance cover available as part of your employer's scheme and not the suitability of the cover for any particular member. For full information please refer to the Excepted Group Life technical guide or policy terms and conditions or go to our website.

How does it work?

Your employer will inform you whether you are eligible for cover. Once you meet the eligibility conditions you are covered for life assurance and you will not normally be asked to provide medical information. If, for example, your level of benefit is very high, you do not meet the eligibility conditions or you don't join the scheme when you are first able to do so, we'll ask you to complete an online questionnaire about your health and lifestyle. Based on your responses, and sometimes on additional evidence or medical tests we might require, we'll decide if cover can be provided and, if so, on what terms.

The life assurance is provided through a discretionary trust set up by your employer. In the event of your death while a member of the scheme, any lump sum benefit will be paid to the trustees, who have absolute discretion as to whom benefits are paid, but who will usually pay the benefit to any beneficiaries you have nominated. You can nominate your beneficiaries by completing a nomination of beneficiary form – you should ask your employer how to do this.

How long does the cover last?

You will have cover for as long as you remain a member of the scheme. If you're absent from work due to illness or injury you will continue to be covered until you reach the age cover ceases as stated in the policy schedule. If you're absent due to maternity, paternity or adoption leave, the cover will continue while you remain eligible for membership of the scheme. If you remain an employee after you reach the age cover ceases and you continue to meet the eligibility conditions, you will be required to complete a medical assessment before cover can continue. In any event, the cover cannot continue beyond your 75th birthday.

Life cover under this policy ceases on the day you leave employment.

What is not covered?

There are no standard exclusions under this policy. However, there is a maximum limit to the policy as a whole which will be applied in the event of one or more deaths occurring as a result of a single event or whilst travelling together on business.

Making a claim

Your employer (on behalf of the trustees of the scheme) is responsible for making claims under this policy. Lump sums will be paid to the trustees who will decide to whom payments are made, taking into account your wishes as set out in your nomination of beneficiaries form.

Taxation

For excepted group life schemes, lump sum benefits will not count towards your pension lifetime allowance and will not be subject to income tax. They will be subject to the normal tax rules applicable to excepted life trusts. The benefits payable to your beneficiaries will normally be free from inheritance tax.

Questions and complaints

If you have any queries, please contact your employer in the first instance. If you wish to raise any query with us or make a complaint, please contact our Group complaints team at:

AIG Life Limited
The AIG Building
58 Fenchurch Street
London
EC3M 4AB

by email to groupcomplaints@aiglife.co.uk

or by calling 0330 303 9974 (calls may be recorded for training and monitoring purposes).

If you are still dissatisfied following a formal response to your complaint, you can approach the Financial Ombudsman Service at:

Financial Ombudsman Service Ltd
Exchange Tower
London
E14 9SR

Tel 0800 023 4567



www.aiglife.co.uk

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