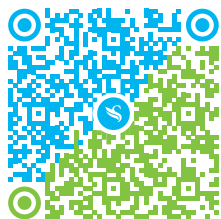




# MAXIMUM PROTECTOR PLUS



Wise Financial Thinking for Life



# GROWING OUR COMMUNITY

## ABOUT SAGICOR

Sagicor Life Inc is an insurance company existing under the laws of Barbados and operating in Barbados, Belize, Curaçao and Trinidad and Tobago.



# KEY FEATURES OF THE MAXIMUM PROTECTOR PLUS PLAN

## WHAT ARE KEY FEATURES?

Key Features are the important facts about an insurance product's design that help you decide whether it is right for you. Please read this document carefully so that you understand what you are buying, and then keep it safe for future reference.



## OTHER DOCUMENTS

You should review this Key Features Document along with the indicative illustration(s) generated for you based on the personal and coverage-related information you have provided.

## AIMS

Our insurance plans are designed to help protect against the impact of death on you and your family and where applicable and chosen by you, the impact of certain critical illnesses.

Your policy could be used to help pay off outstanding debt or everyday living expenses or to help protect your family's lifestyle.

Your policy is designed to cover you if you die or are diagnosed with one of the named critical illnesses we cover before the expiry date of coverage.

We will pay out a single lumpsum in the event of death or critical illness. After this happens, your policy will end, and you will no longer have coverage.

## YOUR COMMITMENT

- You must give us accurate information when applying for your policy as if you fail to give truthful and complete answers to the questions asked at application, this may result in your policy being nullified, in which event it will have no legal effect and we will not be required to pay any insurance benefits. Please provide complete health, lifestyle and other details as requested, even if you have agreed to our obtaining medical information from your doctor or any other source.
- If any information you gave us in your application changes before your policy is issued, you need to let us know.
- You are required to pay us premiums to maintain coverage under your policy. If you stop paying your premium, then your coverage will come to an end when the grace period stated below and any statutory period of notice you are entitled to has expired.



# BENEFITING YOU

## CORE BENEFITS

The Maximum Protector Plus plan is a 20 Year Term Plan which includes critical illness coverage, including accidental death, terminal illness, and accidental dismemberment and disability. You can decide on your level of coverage and coverage is available in varying amounts to persons between the ages of 18 to 55 years. Persons seeking coverage under this plan will not be required to undergo medical examination.

## CRITICAL ILLNESS BENEFITS

The insurance coverage under the policy (the 'Sum Assured') is payable on an initial diagnosis of stroke, cancer, heart attack, paralysis, coma, or major burns after the policy has been in force for at least 180 days. You have the flexibility of choosing one of the 4 coverage levels below:

CURRENCY	LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
BBD	20,000	30,000	50,000	100,000

The policy covers the illnesses listed below. For a claim to be approved and paid, the illness must meet its definition under the policy and must be verified by a doctor qualified in an area of medicine appropriate to the illness.

- Cancer - diagnosed not earlier than 180 days after the issue or reinstatement of the policy, excluding tumors described as pre-malignant, non-invasive or as cancer in situ, certain types of cancer present while HIV positive and skin cancer other than malignant melanoma.
- Heart Attack (Myocardial Infarction)
- Coma - for a continuous period of at least 96 hours and resulting in permanent neurological deficit except if induced by alcohol or drug misuse.
- Paralysis - of two limbs, completely, as a result of injury or disease.
- Major Burns - third degree burns covering at least 20% of the body's surface area having survived for at least 30 days.
- Stroke - death of brain tissue caused by thrombosis, hemorrhage or embolism. Transient ischemic attacks (TIA) are excluded.

Please review the terms and conditions of the policy to make sure that you understand who must verify each covered illness and exactly what is covered.

## DEATH BENEFIT

If the death of the Insured person (the 'Insured') occurs during the first year of the policy and is not as a result of an accident, a benefit equal to premiums paid will be payable. If the death of the Insured occurs during the second policy year and is not as a result of an accident, 25% of the Sum Assured is payable as a benefit. If the death of the Insured occurs on or after the second policy anniversary or is the result of an accident, 50% of the Sum Assured is payable as a benefit.

## TERMINAL ILLNESS - LIFELINE BENEFIT

Once the policy has been in force for at least 2 years and is not within 6 months of the expiry date, on receiving satisfactory proof that the Insured has a terminal illness, a benefit of 25% of the Sum Assured will be payable. Terminal illness means an illness diagnosed by a physician for which the prognosis is that the Insured is not expected to live for more than 6 months after the date of diagnosis. If the Insured dies within 6 months as prognosed, a further benefit of 25% of the Sum Insured will be payable. If the Insured does not die within 6 months as prognosed, then the benefit paid during the lifetime of the Insured will constitute an advance on any death benefit for which the Insured may later qualify and will be deducted therefrom, but is not otherwise recoverable by Sagicor.

## ACCIDENT-RELATED DISMEMBERMENT AND DISABILITY BENEFITS

In the event that the Insured suffers a qualifying physical impairment caused by an accident, Sagicor will pay a cash benefit as stated below.

EVENT	BENEFIT
Total and permanent disability	50% of the Sum Assured
Loss of two or more members	50% of the Sum Assured
Loss of one member	25% of the Sum Assured
Loss of thumb	10% of the Sum Assured
Loss of index finger	7½% of the Sum Assured
Loss of any other finger	5% of the Sum Assured

The following definitions apply to the benefits listed above:

- “Total and Permanent Disability” means either a state of incapacity resulting from an accident that prevents the Insured from engaging in any occupation or business for which he/she is suited by education, training or experience and which causes the Insured to be under the continuous care and attendance of a physician; or total and irreversible paralysis of all limbs diagnosed by at least two (2) independent physicians which is the result of an accident and has continued for 12 months.
- “Member” means a hand, a foot or sight of an eye.
- “Loss of a hand” means severance at or above the wrist joint; or total and irreversible paralysis for a period of at least 12 months.
- “Loss of a foot” means severance at or above the ankle joint; or total and irreversible paralysis for a period of at least 12 months.
- “Loss of the sight” of an eye means total and irrecoverable loss of the sight of the eye.
- “Loss of thumb, loss of index finger or loss of any other finger” means severance of the finger at or above the metacarpophalangeal joint.
- “Severance” means separation occurring not more than 90 days following the accident.

The maximum aggregate amount payable for the benefits listed under this heading is capped at 50% of the Sum Assured.

## EXCEPTIONS

No benefit will be payable in respect of events caused by accidents if the injury results, either directly or indirectly, from:

- Suicide or self-inflicted injuries;
- Committing, attempting or provoking an assault or criminal offence;
- Riot, civil commotion, insurrection or war;
- Bodily or mental infirmity or illness or disease of any kind;
- The Insured being under the influence of any narcotic, alcohol or drug; or
- Travel or flight in, or descent from any aircraft if the Insured is a member of the crew or a pilot of the aircraft, or if the flight is for the purpose of instruction or training or for dropping parachutists.



## OPTIONAL BENEFIT

### SURVIVAL BENEFIT RIDER

An optional Survival Benefit Rider may be added to the core benefits outlined above. If all required premiums have been paid and there have been no eligible claims for death or other covered events which occurred before expiry of coverage, Sagicor will pay a benefit equivalent to 50% of the total premiums paid.

This option is only available at the time of application and cannot be added after a policy has been issued.

## GENERAL PRODUCT FEATURES

### ELIGIBILITY

If you answer “Yes” to any of the below questions, unfortunately you are not eligible for this plan.

1. Have you ever been refused insurance or accepted on a rated basis due to medical reasons?
2. Have you ever been treated for or diagnosed with any form of cancer?
3. Have you ever been diagnosed with a condition that potentially could be cancerous, such as elevated PSA, abnormal Pap Smear or abnormal biopsy?
4. Have you ever been treated or diagnosed as being HIV positive?
5. Have you ever been treated or diagnosed with a Heart Attack or Angina Pectoris?
6. Have you ever been treated for or diagnosed with Paralysis?
7. Have you ever been treated for or diagnosed with a Stroke?

### REINSTATEMENT

If the policy lapses due to non-payment of premium, an application for reinstatement can be made within a maximum of 12 months, after lapse, upon submission of and satisfactory evidence of the good health and insurability of the Insured as at the date thereof. All overdue premiums with interest must be paid at that time in order to receive a Certificate of Reinstatement. Only three (3) reinstatements are permitted.

### SELF-DESTRUCTION

If the Insured commits suicide or suffers capital punishment within 2 years of the date of issue or reinstatement of the policy, we will only pay a benefit equal to the amount of premiums paid without interest. This does not affect the applicability of any self-destruction clause included in respect of any other benefit.

### LIMITS OF LIABILITY

We will not pay out any money where the event on which the claim does not meet the requirements of the policy including definitions of terms used or where any exclusions stated in the policy apply.



# SOLUTIONS YOU NEED

## QUESTIONS AND ANSWERS

### IS THIS PRODUCT SUITABLE FOR ME?

If you have any doubts about the policy's suitability for you, please call us at 1-800-744-7707 or use our live chat feature on [sagicor.com](https://www.sagicor.com) so we can provide customized guidance.

### WHAT IS THE PREMIUM REQUIREMENT?

- **When is the first premium payment due?**

The due date of the first premium is the date of issue of the policy.

- **How often are premium payments due?**

Once the first premium is paid, the frequency of subsequent premiums is as selected by the policyowner on the application form. The policyowner can also change the frequency of premium payment at the commencement of any policy year upon giving written notice to Sagicor. You can pay premiums monthly, quarterly, semi-annually, or annually.

- **What happens if the policyholder stops making payments?**

A grace period of 31 days is allowed for the payment of any premium, other than the first, during which time the Policy remains in force. If any premium is not paid within the grace period the policy will cease to be in force after the end of such period.



## HOW ARE PREMIUMS SET?

The premiums you pay include all the costs of administration, commission, claims and selling expenses. Sagicor has the right to change the premium rate at any time. The new premium rate will only apply to premiums due after we provide you with written notice 45 days in advance of any such change. In determining whether a change is merited, we will look at:

- number, timing and cost of claims we've paid and claims we expect to pay in the future;
- insurance industry claims experience;
- expected impact of future medical advances; and
- changes to applicable laws, regulation or tax treatment.

The new premium rate will be based on the Attained Age of the Insured at the date of change, as defined under the Policy, and not the Insured as an individual.

## WHAT IF I WANT TO CANCEL AND WHAT IS THE REFUND POLICY?

You can cancel your policy at any time.

When we issue your policy, we'll send you a cancellation notice. If you cancel within 10 days of receiving the notice, we'll refund any premiums you have paid.

If you cancel your policy at a later stage, you will not get any money back.

## CAN I INCREASE MY COVERAGE?

This plan does not allow for any increase in coverage. You can however purchase an additional policy subject to the maximum coverage allowed in Barbados.

## WHAT IS THE PROCESS FOR MAKING A CLAIM?

Claims should be made using the company's form for the type of claim and submitted to the claims department using the contact information provided below.

To avoid delays please ensure that any claims requirements set out in the policy are met and that the company has been authorized to pay by electronic funds transfer where this is an option is available and is preferred.

Before settling any claim, Sagicor will request proof of title of the claimant and any other information/evidence in respect of the claim. We may also require the delivery of the policy to us.

## WHAT ABOUT CLAIMS SETTLEMENT SPEED AND RELATED CONSIDERATIONS?

The lump sum settlements we pay out under this plan are free from tax, however, the Government is free to change its tax position at any time. Where payment is made to the representative of an estate, the tax liability of the estate will require separate assessment and the claimant will need to obtain a Grant of Representation from the Court before we can make a payment.

Any premiums outstanding at the time of the death of the Insured will be deducted from the payout amount.

Where you direct payment to one or more beneficiaries, this should help to ensure that policy proceeds can be paid to the person(s) named quickly (generally within 2 weeks of claim), without any lengthy legal process.

You may wish to establish a trust to manage settlement proceeds. This can be done to enable minor children to receive financial support from the money before they reach adulthood and also to restrict full access to policy proceeds if desired. For more information on setting up a trust, please contact your Attorney-at-law.

## WHO REGULATES SAGICOR?

We are licensed and regulated by the Financial Services Commission in Barbados.

ADDRESS	TELEPHONE	FAX
Chief Executive Officer	1-(246)-437-3924	1-(246)-421-2146
Financial Services Commission	1-(246)-421-2142	
Bay Corporate Building		
Bay Street		
St. Michael		
Barbados		

## HOW DO I COMPLAIN?

If you have a complaint about our service, please contact us at [servicequality@sagicor.com](mailto:servicequality@sagicor.com)

If you're not happy with the way we handle your complaint, you can contact our regulator using the information provided above.

Making a complaint does not affect your legal rights.

## HOW DO I CONTACT SAGICOR?

For general inquiries please call our Customer Service Department. Call charges may apply and we may monitor or record calls. Alternatively, you can visit our website at [sagicor.com](http://sagicor.com) or send an email to [info@sagicor.com](mailto:info@sagicor.com).

Our contract and all related communications are governed by the laws of Barbados. The policy's terms and conditions and all related communications will be available in English.

ADDRESS	TELEPHONE	FAX
Sagicor Life Inc.	1-(246)-467-7500	1-(246)-429-4148
Sagicor Financial Centre		
Lower Collymore Rock		
St. Michael,		
Barbados		

The purpose of this brochure is to provide you with clear information about this insurance product to enable you to make an informed decision based on your financial goals. It is not intended as a substitute for advice based on your personal situation.

# **MAXIMUM PROTECTOR PLUS**

Speak to your Sagicor Advisor for details on how this product can be a part of a wise approach to your complete financial well-being.

## **SAGICOR LIFE INC**

### **Barbados**

Sagicor Financial Centre  
Lower Collymore Rock  
St. Michael

### **Contact:**

T (246) 467-7500

F (246) 436-6829

E [contactus@sagicor.com](mailto:contactus@sagicor.com)



Wise Financial Thinking for Life

The **Maximum Protector Plus** plan is one of the solutions offered by Sagicor to help you reach your financial goals. Please ask your Sagicor Advisor how this product can be part of a wise approach to your complete financial well-being. Information is valid as of June 2022.

- **INSURANCE • INVESTMENTS • RETIREMENT PLANNING**
- **HOME OWNERSHIP • EDUCATION • SAVINGS • SAVINGS PLAN**
- **MONEY MANAGEMENT**



Sagicor Life Inc. is rated A- (excellent) by A.M. Best company.