

# Group Insurance

## Terms for late entrants to pension schemes

### Group Life Assurance Group Income Protection

#### Notes to Policyholder

- A late entrant is an employee who is entering the pension scheme after the date on which they first became eligible to join that pension scheme.
- The following terms and this form should only be used when all or part of the Life Assurance or Income Protection benefit to be insured is linked to pension scheme membership
- Only one set of circumstances will apply to each late entrant.

#### Late entrant conditions

	Employee's circumstances	Requirements to allow cover are as follows
1	Employee is joining due to auto enrolment but had the option to join the pension scheme earlier and benefits are within the policy free cover limit.	<ul style="list-style-type: none"> <li>• Is actively at work on the last working day prior to the date of joining the pension scheme.</li> </ul> <b>(Completion of late entrant form not required)</b>
2	Employee is joining due to a triennial re-enrolment exercise* and benefits are within the policy free cover limit.	<ul style="list-style-type: none"> <li>• Is actively at work on the last working day prior to the date of joining the pension scheme.</li> </ul> <b>(Completion of late entrant form not required)</b>
3	Employee joining has a total benefit above the policy free cover limit, irrespective of their date of joining the pension scheme.	<ul style="list-style-type: none"> <li>• All benefits not previously insured are subject to medical underwriting (not just benefits above the policy free cover limit). Initially we will require the completion of a Health Declaration which can be downloaded from our website, <a href="#">here</a>.</li> <li>• Any previous underwriting decisions allowed won't apply to the additional benefits.</li> <li>• Temporary cover available from date of joining pension scheme.</li> </ul> <b>(Completion of late entrant form not required)</b>
4	Employee is joining within six months of first becoming eligible, but not as a result of automatic enrolment, and has benefits within the policy free cover limit.	<ul style="list-style-type: none"> <li>• Is actively at work on the last working day prior to the date of joining the pension scheme</li> </ul> <b>(Completion of late entrant form not required)</b>
5	<ul style="list-style-type: none"> <li>• Employee is joining more than six months since first becoming eligible, but not as a result of automatic enrolment, and</li> <li>• for group income protection, scheme salary is <b>less than</b> £50,000 p.a. and/or</li> <li>• the group life assurance benefit (including the lump sum equivalent of any death in service pension) is <b>less than</b> £250,000.</li> </ul> Benefits must be within the policy free cover limit.	<ul style="list-style-type: none"> <li>• Is actively at work on the last working day prior to the date of joining the pension scheme.</li> </ul> <b>(Completion of late entrant form not required)</b>
6	<ul style="list-style-type: none"> <li>• Employee is joining more than six months since first becoming eligible, but not as a result of automatic enrolment, and</li> <li>• for group income protection, scheme salary is £50,000 <b>or more</b> p.a. and/or</li> <li>• the group life assurance benefit (including the lump sum equivalent of any death in service pension) is £250,000 <b>or more</b>.</li> </ul> Benefits must be within the policy free cover limit.	<ul style="list-style-type: none"> <li>• <b>Full and satisfactory completion of late entrant form.</b></li> </ul> Please note, cover is not in place until we provide formal confirmation.

\* An automatic enrolment date includes all re-enrolment exercises which should take place at minimum every three years for eligible jobholders.

Anyone who has previously been medically underwritten who subsequently left the pension scheme, but is joining again and gaining cover as a result will not automatically benefit from those terms. Please contact us for our requirements. Any previous declined terms will remain in force.

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### When will cover commence?

In respect of circumstances <b>1</b> and <b>2</b>	<ul style="list-style-type: none"><li>If the employee is actively at work on that day then cover will be provided from the date of joining the pension scheme.</li><li>If the employee is not actively at work on that day then 3 months' temporary cover will be provided (not applicable to Group Income Protection).</li></ul>
In respect of circumstances <b>3</b> and <b>6</b>	<ul style="list-style-type: none"><li>The date on which Canada Life formally accepts risk.</li></ul>
In respect of circumstances <b>4</b> and <b>5</b>	<ul style="list-style-type: none"><li>If the employee is actively at work on that day, then cover will be provided from the date of joining the pension scheme.</li><li>If the employee is not actively at work on that day, no cover will be provided under the Policy until he/she has completed seven consecutive working days actively at work.</li></ul>

### Terms and expressions

Actively at work	Means an employee: <ul style="list-style-type: none"><li>is present at their place of work</li><li>has not received any medical advice to refrain from work</li><li>is mentally and physically capable of fully performing the normal regular duties associated with the job they are engaged to do</li><li>is working their normal contracted number of hours, either at their normal place of business or at a place that the business requires</li></ul>
Automatic enrolment date:	the date on which a company-wide automatic enrolment exercise is completed.
Eligible jobholder:	an employee working in the UK earning above the trigger amount for automatic enrolment and aged 22 to SPA/State Pensionable Age.
First becoming eligible:	as defined under the rules of the pension scheme.
Temporary cover (Group Life Assurance only):	full cover applies unless: <ul style="list-style-type: none"><li>That person has previously had some or all of their benefit declined or postponed,</li><li>Medical evidence or other requirements previously requested have not been provided,</li><li>The person dies and their death is directly or indirectly linked to any medical condition that person has suffered from within the five years prior to the date temporary cover commences.</li></ul> Temporary cover does not apply to any part of the person's aggregate lump sum benefit if that exceeds £5,000,000.

### Late entrant details – to be completed by the employee

Name of the company you work for

Group policy number

Employee's full name

Date of birth (day, month, year)

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What was your assigned sex at birth?

Male                  Female

Occupation

Postcode of normal place of work

Scheme salary

**NB: The Scheme salary is defined in the Policy**

£

Date of joining employer's service (day, month, year)

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Date of joining pension scheme (day, month, year)

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Reason for late entry

Were you actively at work (as defined above) on the last working day prior to the date of joining the pension scheme?

Yes

No

This form only requires completion in circumstance **6** as defined on the previous page. In any of the other circumstances please refer to the terms indicated on the previous page.

# Group Insurance

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### Important information

- We may need to send your details and relevant medical reports to our reinsurers for their opinion or agreement of the terms offered.
- We have a confidentiality policy in place which means we hold your medical information securely and access is limited to authorised individuals who need to see it. For example, for the purpose of administering the employee benefit arrangements of which you are a member and for the purpose of underwriting, claims management under the insurance we provide.

### Genetic testing

In accordance with HM Government and the Association of British Insurer's Code on Genetic Testing 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.

If you wish to provide evidence about a favourable predictive genetic test result we will take this into account when assessing your cover.

### Medical questions

Please answer all questions honestly and take reasonable care to ensure that those answers are correct. If you do not answer the questions honestly or correctly, any claim in respect of you may be rejected or reduced.

#### Important note

If you answer 'Yes' to any questions Canada Life reserves the right to request a more detailed health declaration.

- |                                                                                                                                                                                                                                  |     |    |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1. Have you consulted a doctor or a member of the medical profession for the same condition on two or more occasions in the past year?                                                                                           | Yes | No |
| 2. Are you undergoing any form of medical treatment or investigation (there is no need to inform us of tablets, medicine or drugs taken for colds, flu, routine vaccinations, routine contraception or uncomplicated pregnancy)? | Yes | No |
| 3. Have you ever tested positive for HIV/AIDS or are you awaiting the results of such a test?                                                                                                                                    | Yes | No |

If you have answered 'Yes' to any of the above questions please complete the following section giving full details.

	Condition 1	Condition 2 (if applicable)
Date (day, month, year)		
Condition		
Are you fully recovered?		
What was the date of your last symptoms? (day, month, year)		
How long were you off work?		
How many episodes have you had?		
What treatment has been given in the past?		
What treatment is currently being given?		

An additional sheet should be completed if information regarding further medical conditions needs to be provided.

# Group Insurance

## Data Protection Notice (DPN)

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You may interact with Canada Life Limited (referred to as ‘Canada Life’, ‘we’, ‘us’ or ‘our’ in this DPN) in any one (or more) of the following capacities: as data controller, a policyholder, joint policyholder, employer policyholder, trustee, insured person, professional adviser, beneficiary, next of kin, personal representative, executor claimant, or member. No matter which capacity you interact with Canada Life, you will be referred to as ‘you’ or ‘your’ in this DPN. Any personal data about yourself (provided by you or about you by another party) or which you provide about someone else will be treated in accordance with the applicable laws and regulations in any relevant jurisdiction relating to privacy or the use or processing of personal data; Canada Life takes its privacy obligations very seriously.

By signing this form you consent to Canada Life using and sharing your personal data as set out in this notice including, without limitation, the processing of special category personal data.

If submitting personal data about another person, by signing this form you confirm that you have their consent to provide such information to Canada Life and for their information to be used as set out in this notice.

### Using Personal Data

We use personal data 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 personal data for marketing purposes and we do not make your personal data 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 data 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 DPA 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 DPA 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 data

We share personal data 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 professional 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 professional 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 data outside of the EEA. In doing so, we will ensure there are contractual arrangements in place with those organisations who have appropriate organisational and technical measures to protect your personal data.

### 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.

### Post Brexit – UK departure from the European Union

On 31 January 2020 the UK left the European Union (‘EU’), ceasing to be a member. EU law requires that all entities processing the data of EU citizens that are not established in the EU designate in writing a Representative in the EU to be addressed in addition to or instead of that entity by EU citizens on all issues related to data processing. In order to meet our requirements, each Canada Life entity listed above which processes the personal data of EU citizens has designated Canada Life Irish Holding Company Limited, an Irish registered entity within the Canada Life group, as its Representative. The Representative may also be called upon to cooperate with competent supervisory authorities with regard to ensuring compliance with the General Data Protection Regulation (‘GDPR’).

Contractual clauses in place between Canada Life and its group entities and external suppliers are compliant with the GDPR, which ensures that personal data provided to Canada Life is processed in accordance with our instructions and the requirements of the GDPR. Canada Life will continue to follow and apply all appropriate data protection legislation including that provided by the UK Government and the Information Commissioner’s Office (ICO) with regards to data protection.

# Group Insurance

## Data Protection Notice (DPN)

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### 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 data or your special categories of data;
- provide you with a copy of the personal data that you have provided to us or which we hold;
- update any inaccuracies in the personal data we hold;
- delete any special category of data or personal data for which we no longer have lawful grounds to use;
- cease processing of your personal data 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 data 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 data, you should first contact our DPO, on the details below:

**Canada Life Limited,  
Canada Life Place,  
Potters Bar,  
Hertfordshire EN6 5BA**  
or by email at: [dpo@canadalife.co.uk](mailto: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](http://www.canadalife.co.uk) or is available upon request by calling **0345 223 8000**.

This DPN is dated 1st May 2021. Any future updates will be made available as described above.

# Group Insurance

## Your declaration

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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 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.

I agree to Canada Life using and sharing my personal information as set out in the Data Protection Notice included on this form.

Signature

Date (day, month, year)

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

If, following receipt of this form, we are unable to accept the cover or provide a decision we will require additional information, this may include completion of a Health Declaration.

### + Helpful Hint

- We can accept an original or electronic signature

### Please ensure that:

All questions have been fully completed.



You have signed and dated above.



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