# POLICY DOCUMENT **Domestic Cover**

This section provides most of the important stuff you need to know. If you do not understand any of the terminology used, please refer to the glossary for explanations.

### BENEFITS

Simply Staff Cover offers three core benefits – Simply Life, Simply Occupational Disability and Simply Funeral. Please refer to your Policy Schedule to see the type and level of cover you have selected.

## SIMPLY LIFE

#### **Payout:**

100% of the insured amount is paid in a lump sum when the insured person, your employee, dies. If they are diagnosed with a terminal illness and are expected to die within 12 months, they can choose to take 100% of the lump sum paid in advance to them or their beneficiaries. If your employee chooses this option, their cover will be terminated, even if they recover from their illness. We will require supporting medical evidence to confirm the doctor's diagnosis and that life expectancy is less than 12 months.

#### Additional benefits:

#### **Groceries**

The primary beneficiary receives an additional R500 cash towards buying groceries every month, for 6 months after your employee's death.

# SIMPLY OCCUPATIONAL DISABILITY

#### **Payout:**

A lump sum is paid if your employee has suffered total, permanent and irreversible disability. This can mean the loss of a body part, or the loss of the use of a body part. There is a 6 month deferred period before they are eligible for this benefit. This benefit only covers very specific injuries or illnesses. It doesn't cover everything that could affect their ability to work. The lump sum amount is calculated as follows:

Both hands or both feet (at or above the ankle joint/at or above the wrist): 100% of cover • One hand or one foot (at or above the ankle joint/at or above the wrist): 50% of cover • One hand and one foot (at or above the ankle joint/at or above the wrist): 100% of cover • Both eyes (permanent and irreversible loss of all vision with no light perception in both eyes): 100% of cover • Speech (permanent and irreversible loss of ability to speak as a result of injury or disease to vocal cords or brain): 100% of cover • 3rd degree burns >40% of body surface: 100% of cover • 3rd degree burns 20-40% of body surface: 50% of cover

# SIMPLY FUNERAL

## **Payout:**

A lump sum is paid when your employee or a family member (spouse or child) covered under the policy dies. The lump sum amount is calculated as follows:

Person	Payout
Main member or spouse	100% of cover
Child aged 14-21	100% of cover
Child aged 6-14	50% of cover
Child aged 0-6	50% of cover (maximum R10,000)







Simply Financial Services (Pty) Ltd is a registered financial services provider (FSP 47146), Ts&Cs apply, Policies Underwritten by Old Mutual Alternative Risk Transfer Ltd.

#### Adding children:

Additional children can be added to the funeral policy after the policy has been purchased (e.g. when a baby is born). The children have to be your employee's biological children or legally adopted by them to be eligible to be covered under this policy.

#### **Additional benefits:**

#### Premium waiver

If your employee dies, their spouse and dependents continue to receive funeral cover for a further 6 months without having to pay any premiums.

#### **Body Repatriation**

Your policy also provides for the repatriation (transportation) of the remains of your employee or the remains of any family member covered under this policy to a place of burial within South Africa. Other funeral assistance services are also offered. Please see the terms and conditions (T&C's) for further detail.

#### How long are they covered for?

Your employee is covered for as long as the monthly premium is paid.

### **PREMIUMS**

### Your monthly premium:

As the employer, you are the policyholder of this policy and you are responsible for paying the premium. The premiums are paid monthly in advance. Should you wish to stop paying the premium (e.g. if your employee moves on to another job), please inform us. We will give your employee's new employer (or your employee if they are South African ID holders) the option of taking over as policyholder and premium payer. Premiums increase by 5% every year. The cover does not increase unless you contact us to increase it. For an understanding of how the premiums will increase over the next 5 years, see your Policy Schedule.

#### Is my premium guaranteed?

Your premium (the amount you pay each month) is guaranteed not to change for the first year of your policy. Thereafter, we may revise it at any time with at least 30 days' notice. We will only make changes to premiums (on top of the standard 5% annual increase) if claims or administration expenses are very different to what we expected when we initially set the price, or if there is a major change in regulation.

## What if you miss a payment?

There is a 30 days grace period if you fail to pay a premium. This means your employee will still be covered until the following premium is due. If that payment also fails, your employee's cover will become inactive, and any claims received after this point would not be paid. We will continue to try to collect a premium and the cover will start again as soon as a premium is received. See below for rules on reactivation.

## What if the cover has stopped, but you want to re-activate it?

If your policy lapses because you haven't paid the last premium, but you don't want to lose the policy, you can restart it. This is called a reinstatement. Simply will continue to try to contact you, and to deduct the premium due for a period after your cover has become inactive. However, after 2 additional attempts, we will give up and the policy will be cancelled. You will receive a notification of this cancellation. You will still have one week after this to contact us, pay a premium and restart the cover. You can re-instate your policy in this way a maximum of 5 times. If you do not use this option you will need to take out a brand new policy, potentially at a different premium. New medical questions will also be asked, and a new waiting period will apply.





## **WAITING PERIOD**

## Policy waiting period

This refers to the period directly after you've taken out the policy. During the waiting period, you will need to pay premiums but the cover is limited until you have paid 6 premiums and the policy has been in force for at least 180 days. After the waiting period, your employee will enjoy full cover.

## What if a claim is submitted during the waiting period?

Death or disability resulting from accidental causes are covered during the waiting period. Death or disability resulting from natural causes are not.

#### What happens to the premiums during the waiting period?

If your employee dies of natural causes during the waiting period, your premiums will be paid back.

## COOLING OFF

If you change your mind within 31 days of taking out your policy, you can cancel your policy with a full return of any premium you have paid

## BENEFICIARIES

The beneficiary is the person who receives the lump sum if your employee dies. Your employee can change or add a beneficiary at any time – just let us know. However, neither you nor any member of your family may be added as a beneficiary to this policy. Your employee can have up to four beneficiaries on one policy. If your employee has not chosen a beneficiary, the payout goes into their estate. If the beneficiary is a minor (younger than 18), the payout goes to their legal guardian for the minor's benefit.

## CHANGING THE COVER

The cover can be decreased at any time, but not below our minimum cover amounts (refer to the T&C's). The cover can also be increased at any time. However, if increased:

- within 6 months of taking out the policy, your employee will need to complete a simple declaration of good health.
- more than 6 months after taking out the policy, your employee will need to re-answer all the relevant underwriting questions and a new waiting period will apply for the additional cover.

## THE CLAIMS PROCESS

We need to be notified within 90 days of the event leading to a claim, otherwise benefits may not be paid. Read our T&C's to see the documents that are required when a claim is submitted. We will also help your employee or their beneficiaries through the process when the time comes. You should make sure your employee and their loved ones know that you have taken out this policy. Tell them how to contact us if they ever need to claim. You should also make sure your employee and their loved ones understand the importance of being honest when submitting a claim. Failure to be honest might affect the payment of the claim.

## **READY TO CLAIM?**

Call: 087 625 0461 Email: claims@simply.co.za Website: www.simply.co.za





## **REASONS A CLAIM CAN'T BE PAID**

Unfortunately, no benefit can be paid if the death or injury is caused by one of the following:

- 1. Participation in any terrorist activity, riot, civil commotion, rebellion or war.
- 2. Radio activity or nuclear explosion.
- 3. Wilful and material violation of any criminal law.
- 4. Driving while the concentration of alcohol in their blood exceeds the legal limit.
- 5. Intentional intake of drugs, narcotics or medication, unless prescribed by a registered medical practitioner and used as prescribed.
- 6. For life/funeral cover: suicide or deliberate self-injury within 2 years of starting the policy. For disability cover: attempted suicide or deliberate self-injury at any time.
- 7. Refusal of treatment recommended by a registered medical practitioner.
- 8. Hazardous pursuits. See our glossary for a detailed description of 'hazardous pursuits'

## UNDERWRITER

The underwriter of this policy is Old Mutual Alternative Risk Transfer Limited (OMART), a registered Longterm Insurer in the Old Mutual group. It's the responsibility of you and your employee to be absolutely truthful with us. OMART relies on this information to issue your policy and pay any claim. If either of you are not completely honest, or don't disclose all relevant information, or misrepresent any information to us, OMART has the right to cancel your policy, or change the terms of your policy. If any claim is based on false or incomplete information, OMART will not pay the claim. If, after OMART pays any claim, OMART finds that it was based on false or incomplete information, all claim payments must be refunded to them. For more information on OMART, please see the T&C's.



# GLOSSARY Domestic Cover

Life insurance is full of strange language. Hopefully these definitions will help.

## **ACCIDENTAL DEATH OR DISABILITY**

Death or disability caused by a sudden and unexpected event that happens at a clear time and place. An accident is usually something violent – something external and outside your control that happens TO you.

## BENEFICIARY

If the insured person dies or is disabled, the beneficiary is the person who receives the lump sum payment.

## **COOLING-OFF PERIOD**

A 31-day window after the policyholder takes out the policy, during which the policy can be cancelled with a full refund of premiums.

## **DEFERRED PERIOD**

This is the period between when an event happens and when benefits start being paid. So for example, if you are disabled, there may be a period between when you become disabled, and when the payout takes place. This is to confirm that your disability is permanent.

## **EXCLUSIONS**

There are a few reasons why the cover cannot be paid out. They are explained earlier on in this document.

## **GRACE PERIOD**

If you fail to pay a premium, your employee will remain covered for another 30 days ("the Grace Period"). At the end of this period, unless you have paid a premium, your employee's cover will become inactive, and any claims will not be paid. This does not mean the policy is cancelled immediately, and further attempts to collect the premium and reactivate the cover will be made.

## HAZARDOUS PURSUITS

These are unusually dangerous activities that the insured person engages in regularly, not occasionally. Examples include, but aren't limited to: big game hunting, boxing, mixed martial arts, outdoor rock climbing, skydiving, motor and boat racing, as well as white water rafting.

#### INSURED PERSON

The person whose life is covered by the policy. When the insured person dies or is disabled, a lump sum is paid out.

## **LUMP SUM**

A lump sum is the total amount of cover paid out in one payment, rather than the cover being paid out over time in smaller regular payments.

## **NATURAL CAUSES**

Causes of death or disability, like disease or old age, rather than those related to violence or an accident.

#### POLICYHOLDER

The person who takes out the policy and who is responsible for paying the monthly premium.

## UNDERWRITER

This is the company who will be responsible for paying any claims that are made.





# TERMS AND CONDITIONS Domestic Cover

Nobody likes to read the T&C's but there's important additional information in here. We've kept it as simple as possible, so please take a careful look.

## SIMPLY FINANCIAL SERVICES

Simply Financial Services (Pty) Ltd (SIMPLY), registration number 2011/132479/07, is an authorised financial services provider (FSP), FSP Number 47146, licensed by the Financial Sector Conduct Authority (FSCA) to supply long-term insurance products (Categories A & B).

## THE INSURER

The insurer is Old Mutual Alternative Risk Transfer Limited (OMART), registration number 1997/008994/06, a registered insurer with its offices at Mutual park, Jan Smuts Drive, Pinelands. The Insurer is a member of the Old Mutual Group. The Insurer's Compliance Officer can be contacted at 021 509 2191.

## **APPLICATION PROCESS**

SIMPLY distributes OMART insurance products online and through a call centre. Sign-up for an insurance policy is done telephonically or by completing an online application. By signing up for an OMART policy through SIMPLY, you agree to be bound by OMART and SIMPLY's T&C's. Once your application has been submitted to SIMPLY, SIMPLY will evaluate your application and check the personal and banking details provided to ensure that they are correct and relevant to you as an applicant. You will be able to review the application and correct any mistakes in your application. Once SIMPLY has received the application and accepted it on behalf of OMART, you can cancel the policy at any time by sending an email to: cancellations@simply.co.za. If you, as policyholder, cancel the policy, we will not collect any more premiums from you. The cover will continue until the next normal debit date.

## THE SIMPLY CONTRACT

Your contract consists of your application, the policy schedule and the policy documents. SIMPLY policies are underwritten by OMART, which means that OMART is responsible for paying claims to the beneficiaries and ensuring that you and your employee are provided with everything detailed in your policy document. SIMPLY markets, distributes and looks after the SIMPLY insurance policies, including your own. However, your agreement to pay a monthly premium in return for cover is directly with OMART. The cover your employee has with SIMPLY is explained fully in your policy document. Be sure to read your policy document carefully, double check all the details in the document and contact us if you have any questions.

## SIMPLY AS A BINDER HOLDER

OMART is the insurer of your policy, but SIMPLY is the binder holder. This means that SIMPLY performs key functions on behalf of the insurer, such as issuing and administering the policy and managing the claims process.

## CELL CAPTIVE ARRANGEMENT

SIMPLY is one of OMART's preference shareholders, which means SIMPLY shares in the profits and losses that result from the insurance business generated by SIMPLY. In the insurance industry, this is called a cell captive arrangement. As OMART's representative, SIMPLY markets and sells policies such as yours, in return for remuneration from OMART. SIMPLY is not an independent intermediary and only markets and sells SIMPLY policies.





## PREMIUM PAYMENT

SIMPLY facilitates the collection of your premium on behalf of OMART. You agree that you will pay the premium on the specified date(s), and authorise OMART to debit your bank account using the bank account information provided in your application. Premiums will be payable monthly in advance from the start date of your policy, and your obligation to pay a monthly premium will continue as long as your policy is in effect. We will attempt to deduct your premium on the debit order date you've selected, but we may track your bank account and deduct on another day. The Debit Order transaction will include the shortcode "SIMPLY", which will reflect on your bank statement.

## POLICY RE-INSTATEMENT

You are permitted to reinstate lapsed policies within 3 months of your first missed premium. However, SIMPLY and OMART reserve the right to limit the number of allowed reinstatements to 5 over the term of the policy.

## **TERM**

The cover will begin as soon as your policy starts, even if you have not yet paid your first premium. You will be informed as soon as the cover is in place. Your policy will automatically be renewed and will continue as long as you continue to pay premiums. In the case of Family Funeral plans, children are only covered until they turn 21. Non-South African employees are only covered as long as they remain legally able to live and work in South Africa. If they lose this right, the policy should be cancelled. Your employee must inform SIMPLY should they or any covered family member spend more than 90 days outside of South Africa within a calendar year. We reserve the right to discontinue their cover if this is the case.

## FINANCIAL ADVICE

SIMPLY is an authorised FSP, marketing, distributing and servicing long-term insurance products underwritten by OMART. SIMPLY's FSP license conditions stipulate that the company may not provide financial advice as defined by the Financial Advisory and Intermediary Services Act, 37 of 2002 (FAIS).

## REMUNERATION

SIMPLY is OMART's representative authorised to market and sell this policy. SIMPLY receives more than 30% of its total remuneration from OMART. SIMPLY sales consultants earn a salary and a percentage of sales as remuneration. The total remuneration paid by OMART will not exceed 3 and a half times the monthly premium in regard of this policy.

## INSURER DISCLOSURES

## **Protection of Personal information**

We may use your information or obtain information about you for the following purposes:

- Underwriting
- · Assessment and processing of claims
- Where applicable, credit reference searches or verification, credit scoringand assessment and credit management
- Verification of personal information (including your identity, address andbanking details)
- Updating your personal information
- Claims checks (Industry Life & Claims Register(s))
- Tracing beneficiaries Debt tracing or debt recovery
- Tracing you where you are uncontactable
- Prevention and detection of fraud, crime, money laundering (including anti-money laundering screening) or other malpractice
- Market or customer satisfaction research or statistical analysis
- · Audit & record keeping purposes





 Compliance with legal & regulatory requirements and in connection with legal proceedings. Sharing information with service providers including appointed administrators (Simply Financial Services as at time of policy issue) we engage to process such information on our behalf or who render services to us. These service providers may be abroad, but we will not share your information with them unless we are satisfied that they have adequate security measures in place to protect your personal information.

You agree that we may view, search and update your information.

You may access your personal information that we hold and may also request us to correct any errors or to delete this information. In certain cases you have the right to object to the processing of your personal information.

You also have the right to complain to the Information Regulator, whose contact details are: http://www.justice.gov.za/inforeg/index.html

Tel: 012 406 4818 Fax: 086 500 3351

Email: inforeg@justice.gov.za

#### **Marketing**

The Old Mutual Group (of which OMART is a subsidiary) would like to offer you ongoing financial services and may use your personal information to provide you with information about products or services that may be suitable to meet your financial needs. Please sms your ID number to 30994 if you would prefer not to receive such information and/or financial services.

To view the Old Mutual Group full privacy notice and to exercise your preferences, please visit our website on https://www.oldmutual.co.za/privacy-notice/

## INTERMEDIARY DISCLOSURES

#### **Protection of Personal information**

Simply may use your information or obtain information about you for the following purposes:

- To provide you with our financial products and services, and maintain our relationship with you;
- · To provide you with intermediary services;
- To execute a transaction in accordance with your request;
- Where applicable, credit reference searches or verification, credit scoring and assessment and credit manaaement
- To comply with legislative and regulatory requirements, including codes of conduct and requirements of our regulators (including the Financial Sector Conduct Authority and Prudential Authority);
- To perform any risk analysis or for purposes of risk management to you or our business in general;
- To record and/or monitor and have access to your telephone calls (i.e. voice recordings), correspondence and electronic communications to/with us (or any of our employees, agents or contractors) in order to accurately carry out your instructions and requests, to use as evidence and in the interests of crime prevention;
- · For statistical analysis and research purposes;
- · For audit and record-keeping purposes;
- For purposes of proof and legal proceedings;
- To conduct market research and provide you with information about our products and services from time to time via email, telephone or other means (for example, invite you to events);
- To process your marketing preferences (where you have unsubscribed from certain direct marketing communications, keeping a record of your information and request to ensure that we do not send such direct marketing to you again);
- To prevent or control the spread of any disease; and For any purpose related to and compatible with the above.





You agree that we may view, search and update your information.

You may access your personal information that we hold and may also request us to correct any errors or to delete this information. In certain cases you have the right to object to the processing of your personal information.

You also have the right to complain to the Information Regulator, whose contact details are:

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Tel: 012 406 4818 Fax: 086 500 3351

Email: inforeg@justice.gov.za

#### **Marketing**

Simply Financial Services would like to offer you ongoing financial services and may use your personal information to provide you with information about products or services that may be suitable to meet your financial needs. If you prefer to no longer receive such information and/or financial services from Simply Financial Services please email your ID number to admin@simply.co.za

To view Simply's full privacy notice and find out how to exercise your preferences, please visit our website on www.simply.co.za

## DOCUMENTS NEEDED FOR A CLAIM

It is important that you submit the following documents when making a claim so that we can help you and your employee as quickly as possible. You should make sure that your employee's loved ones are aware of the documents that are required in order to make a claim. The documents needed are as follows:

#### Life cover claim

- o Certified copy of death certificate
- o Certified copy of insured person's ID
- o Certified copy of the beneficiary's ID
- o Completed death claim form
- o Completed medical report

## Funeral cover claim

- o Certified copy of death certificate
- o Certified copy of insured person's ID
- o Certified copy of the beneficiary's ID
- o Completed funeral claim form
- o DHA1663 notification of death register
- o Claimant/Beneficiary 1 month bank statement

#### Disability cover claim

- o Certified copy of insured person's ID
- o Completed disability claim form
- o Completed medical report form together with copies of any specialist reports and investigations relating to the claim cause

If your employee dies within the first 2 years of the policy, extra documentation may be needed such as:

- Police report/statement completed by the police
- Copy of the post-mortem report
- Result of any forensic laboratory investigations
- Inquest findings (if appropriate)
- Full verdict in the case of a murder (if appropriate)
- Completed medical report form together with copies of any specialist reports and investigations relating to the claim cause





We reserve the right to request additional supporting documents where required.

## MINIMUM BENEFIT LEVELS

Minimum amounts of cover can be selected for each type of insurance (life/disability/funeral). For each type of insurance, the cover amount cannot be less than:

Life: R50 000 Funeral: R15 000 Disability: R200 000

### TAX

Your premiums are not tax deductible, and the benefits you receive will not be taxed as income.

## **BODY REPATRIATION BENEFIT**

This benefit is offered as part of the Family Funeral cover ONLY. In summary it provides:

- Assistance in locating the deceased's body if required
- Overnight accommodation for the next-of-kin in order to identify the body (up to R500)
- Repatriation of mortal remains from within the borders of South Africa to a place of burial also within the borders of South Africa
- · Referral to a pathologist if an autopsy is required
- Referral to a reputable undertaker, and assistance with funeral arrangements
- · Advice on how to apply for death certificate
- · Referral to counselling services for support and advice

The benefit is limited to services to the total value of R15,000 per policy, per policy year, regardless of how many lives are claimed for in that year. The benefit is not exchangeable for cash. The same limitations and exclusions that apply to claims on the main benefit also apply to the repatriation benefit.

## **ADVERTISING**

All models depicted in our advertising have no material relationship to any brand or person mentioned in our advertising.

## COMPLAINTS

Should you have any complaints about the service Simply has provided, please contact us or the insurer immediately so that we can attempt to resolve your problem or complaint. We are committed to helping you in every way we can.

## **SIMPLY Complaints**

complaints@simply.co.za

## OMART (Insurer)

OMARTComplaints@oldmutual.com Office of Internal Arbitration at Old Mutual Postal Address: P O Box 455, Cape Town, 8000

#### Office of Internal Arbitration at Old Mutual

Postal Address: P O Box 455, Cape Town, 8000

E-mail: arbitrator@oldmutual.com





In the event that you have exhausted all internal complaints channels and you are not satisfied with the outcome, please contact National Financial Ombud Scheme (NFO) as per below:

## National Financial Ombud Scheme (NFO)

E-mail: <u>info@nfosa.co.za</u> Tel: 0860 800 900

Website: www.nfosa.co.za

If you want to complain about the way this policy was sold, please contact The Ombudsman for Financial Advisory and Intermediary Services (FAIS):

## **Simply Compliance Officer**

E-mail: compliance@simply.co.za

## **FAIS Ombud**

E-mail: info@faisombud.co.za Tel: 012 762 5000/ 012 470 9080 Website: www.faisombud.co.za

### **DISCLOSURES**

1. SIMPLY's business details are:

Company Registration Number: 2011/132479/07

Physical Address: 3rd floor, Grove Exchange, 9 Grove Avenue, Claremont, 7708

FSP Number: 47146

Postal Address: 3rd floor, Grove Exchange, 9 Grove Avenue, Claremont, 7708

Website: www.simply.co.za
Email: admin@simply.co.za

Phone: 021 045 1513

- 2. The Compliance Officer deals with issues relating to Simply's FAIS compliance.
- 3. Our consultants who do not meet the full Fit and Proper Requirements as defined by FAIS render services under management supervision.
- 4. Simply has professional indemnity insurance.
- 5. Simply has and maintains an Anti-Money Laundering Policy in accordance with FIAS.

