



TERMS OF BUSINESS AGREEMENT FOR CLIENTS

This Terms of Business Agreement (TOBA) sets out the nature and scope of the services MGM Health Ltd will be providing to you and other information required by law. This Terms of Business Agreement should be read alongside our Privacy Policy. These Terms can only be varied by agreement in writing between us.

About MGM Health Ltd and Who Regulates Us

MGM Health Ltd is an appointed representative of Premier Choice Healthcare Ltd. (PCH), a company authorised and regulated by the Financial Conduct Authority and its Financial Services Register number is: **312878**.

Our permitted business is to sell and administer general insurance products as an independent insurance intermediary. You can check this information on the Financial Services Register by visiting the FCA's website www.fca.org.uk or by contacting the FCA on 0800 1116768 or 0300 5008082.

MGM Health Ltd is registered as a Company in England and Wales (number 07625287), and our registered office is at Unit G, Kingsway Business Park, Oldfield Road, Hampton, Middlesex, TW12 2HD.

Whose products do we offer?

We offer products from a range of insurers for private medical insurance, cash plans, dental cover, group protection, individual protection, and income protection.

For consumer travel insurance we deal with BUPA Travel Services Ltd and Voyager Insurance Services Ltd only.

For group travel insurance we deal with BUPA Travel Services Ltd and Voyager Insurance Services Ltd.

Our Service to You

We will advise and make a personal recommendation for you after we have assessed your needs for: private medical insurance (UK and international), group protection, individual protection (life insurance and critical illness), income protection, cash plans and dental cover. We offer consumer travel insurance and group travel insurance on a non-advised basis. For consumer travel we will provide you with contact details for Voyager Insurance Services Ltd. This means we will not provide you with specific advice or a formal personalised recommendation on whether the policy is suitable for your needs. Voyager Insurance Services Ltd will provide you with sufficient information to make an informed decision on your purchase. You will then need to make your own choice about how to proceed. For group travel insurance we will not provide you with specific advice or a formal personalised recommendation on whether the policy is suitable for your needs, but will provide you with sufficient information from either BUPA Travel Services Ltd or Voyager Insurance Services Ltd to make an informed decision on your purchase. You will then need to make your own choice about how to proceed.

In making our recommendation we will carry out a fair and personal analysis of the market. This means that we will compare products from a wide range of Insurers in terms of the cover provided, quality of service and other relevant features. In arranging insurance for our customers, we act as an independent intermediary and act on your behalf. Our service includes: advising you on your insurance needs, arranging your insurance cover with the recommended insurers and helping you with any ongoing changes you have to make. Where you ask us to we will provide advice

and assistance on claims matters, however we will not become involved in the claims process in any other way and will not be involved in payment of claims. Claims generally are handled directly by insurers.

There may be exceptions to this, for example, business transacted on a non-advised, information only basis, or execution only (directly on your instructions whereby you will not have requested nor received advice) or on a restricted advice basis (where our recommendations are restricted by the providers available through us) or where we issue a renewal invitation and are unable to engage with you. If these situations exist, we will make it clear to you, and our responsibility to you will be limited accordingly.

Where received by us we will forward policy documentation to you.

We will communicate with you in various ways. In the main our communication method will be by way of electronic emails, however if your preference is to receive your communications from us in a paper format, please let us know.

At Renewal

We will write to you in good time prior to your renewal date, in order to assess if there are any changes to your needs. Should we be unable to engage with you, to ensure your cover is not compromised we, or your insurer may renew your policy automatically at the invited premium on a non-advised basis. This means we will not provide you with specific advice or a formal personalised recommendation on whether the policy is suitable for your needs, but will provide you with sufficient information to make an informed decision on the basis that your needs in terms of policy benefits and options are similar to those discussed previously.

Vulnerable Customers

If you suffer from any conditions that may hinder your ability to make an informed decision at any time during your association with MGM Health, please bring this to our attention. We will make a record of this, provide additional opportunities for you to ask questions about any information we have provided, and continuously seek confirmation that you have understood information that has been provided.

Your Responsibilities

Disclosure of Information and Changes in Circumstances

Consumer Insurance Contracts

You are responsible for providing us and the insurers with the information we request from you to enable us to seek the cover you require. It is important that you understand that any information, statements or answers made by you to us or the insurers are your responsibility and must be accurate and complete. Any failure to answer questions honestly, carefully and accurately may invalidate your insurance cover in part or whole. Please do consult us if you are in any doubt on any aspect. Further information on your duty to take reasonable care in answering questions will be detailed in your statement of demands and needs.

Commercial Contracts

Duty of Fair Presentation: In order to fulfil our collective duty with you to provide the insurer with a fair presentation of the insurance risk involved, you must disclose every material circumstance which you know or ought to know, or failing that, you must provide the insurer with sufficient information to put a prudent insurer on notice that it needs to make further enquiries for the purpose of revealing those material circumstances.

A 'material circumstance' is one which would influence the judgement of a prudent insurer in determining whether to take the risk and if so on what terms and it is our collective duty to carry out a reasonable search in respect of these circumstances.

Examples of such circumstances could be any ongoing serious medical conditions such as cancer and heart conditions as well as planned medical treatment. Please note these examples are for illustrative purposes only and are by no means exhaustive or conclusive.

It is important that you understand that any information, statements or answers made by you to us or the insurers are your responsibility and must be correct. Any failure to disclose material circumstances to the insurer or any inaccuracies in your answers may invalidate your insurance cover in part or whole.

Please note that not only does this apply at the commencement or renewal of your policy but also at any time during the lifetime of your policy. You should therefore advise us as soon as reasonably practical of any changes in your circumstances (including changes of address) which may affect our service to you or the cover provided under your policy. This should include any changes to scheme membership (if relevant).

Importance of Reading Your Policy Documentation

You are responsible for reviewing the evidence of insurance cover and other related documents which will be sent to you to confirm that it accurately reflects the cover, conditions, limits and other items that you require. Particular attention should be paid to policy conditions as failure to comply may invalidate your cover. If there are any discrepancies, please contact us immediately.

You are advised to keep copies of all documentation sent to or received from us for your own records.

Payment of Premiums

You must provide settlement with cleared funds of all monies due in good time, direct to an Insurer in accordance with the payment date(s) as specified in either the policy documentation or other relevant payment documentation (payment date). Failure to pay by the payment date may lead to insurers cancelling your policy. Premiums will include insurance premium tax at the prevailing rate (where applicable).

Client Money

We are unable to hold client money in any way.

Our Remuneration

Our remuneration may be commission paid by the insurer or a fee paid by you. Should we decide to charge a fee for our services this will be discussed with you and confirmed in writing. The commission we receive is based on a percentage of the total annual premium. On occasion we may pay a performance bonus to people who work under our Authorisation. Our Remuneration policy clearly states that our remuneration scheme is designed to reflect employees experience and performance, balanced with the requirement to ensure that their remuneration does not conflict with their obligations to our clients.

If you require us to disclose the level and indemnity term of our commission receivable from an Insurer, please ask and we will send you a letter setting out the amount we receive. This applies to both consumer (Individual) clients, and commercial (Group) clients. If you are a client with an individual protection product, then we will automatically inform you of the level of commission we earn from the Insurer at the quotation stage.

On occasion we may be remunerated by both commission and a fee. This will be discussed with you and confirmed in writing.

Cancellation within the cooling off period

We will give you enough information and help so you can make an informed decision before you make a final commitment to buy your insurance policy. If you are a consumer (that is an individual buying insurance for personal use only i.e. wholly outside your business or profession) you will have the right to cancel your insurance policy within 14 days for general insurance e.g. private medical insurance or travel. For protection policies there is a 30-day cancellation period e.g. term life or critical illness. Please note, that these cancellation periods can vary between insurers and may exceed the minimum number of days as stated here. This information will be confirmed to you in your policy documentation.

The cancellation period begins (the later of):

- the day of the conclusion of the contract (for general insurance contracts),
- the day after the customer was informed that the contract was concluded (for pure protection contracts); or
- if later, the day after the customer receives full policy documentation.

You may be required to pay for the time on risk should you invoke cancellation, and this will be at the discretion of the insurer.

Cancellation of this agreement

Our arrangement may be terminated by either party upon the giving of notice in writing to the other party. In the event our services are terminated by you, we will be entitled to receive all fees payable and any commission(s) payable in respect of the current policy year.

Confidentiality and Data Protection

We will treat any information in our possession which relates to you as confidential. It will be necessary however, for us to disclose information that you consider confidential to insurers or other parties when acting on your behalf, where we reasonably consider such information to be material to the risks being covered, or for internal review and audit purposes.

MGM Health Ltd together with PCH is committed to safeguarding all the information that is provided to us in the course of our business and to support the changes in European data law, known as the General Data Protection Regulation (GDPR). Full details of how we handle your data are included in our Privacy Policy which accompanies this document.

COMMERCIAL CLIENTS ONLY

Data Protection Legislation: the UK Data Protection Legislation and (for so long as and to the extent that the law of the European Union has legal effect in the UK) the General Data Protection Regulation ((EU) 2016/679) and any other directly applicable European Union regulation relating to privacy.

UK Data Protection Legislation: any data protection legislation from time to time in force in the UK including the Data Protection Act 1998 or 2018 or any successor legislation.

Applicable Laws: (for so long as and to the extent that they apply) the law of the European Union, the law of any member state of the European Union and/or Domestic UK Law; and Domestic UK Law means the UK Data Protection Legislation and any other law that applies in the UK.

MGM Health Ltd and PCH will comply with all applicable requirements of the Data Protection Legislation and all Applicable Laws. We will require you to adhere to the same standard of compliance. This obligation is in addition to, and does not relieve, remove or replace, either party's obligations under the Data Protection Legislation.

For the purposes of the Data Protection Legislation, MGM Health Ltd is a data controller (where Data Controller has the meaning defined in the Data Protection Legislation). In our contractual relationship with PCH we are Joint Data Controllers as both parties have a degree of independence in processing the 'Data Subjects' personal data. Please note that for the purposes of this notice, the Data Controller is defined as a person that determines the purposes for which, and the manner for which, any personal data are processed, in line with article 4(7) of the General Data Protection Regulation ((EU) 2016/679).

You must ensure that you have all necessary appropriate consents, notices and data security measures in place to enable lawful transfer of the Personal Data for the duration and purposes of this engagement.

If you are not happy with our service

It is our intention to provide you at all times with a high level of customer service. However, if you have any reason to be unhappy with the arrangement or servicing of your insurance, please contact: -

Geetha Muralee, MGM Health Ltd at the address at the bottom of this agreement or by emailing geetha.muralee@mgmhealth.com.

Alternatively, you may contact Premier Choice Healthcare Ltd direct, also at the address given below.

If you remain dissatisfied following our final response to your complaint you may refer your complaint to the Financial Ombudsman Service. Their contact address is as follows: -

Financial Ombudsman Service
Exchange Tower
Harbour Exchange Square
London E14 9SR
0800 0234567
www.financial-ombudsman.org.uk

Are we covered by the Financial Services Compensation scheme (FSCS)?

We are covered by the FSCS through PCH. You may be entitled to compensation from the scheme if we cannot meet our obligations. This depends on the type of business and the circumstances of the claim. Insurance advising, and arranging is covered for 90% of the claim without any upper limit. Further information about the compensation scheme is available from the FSCS website www.fscs.org.uk

Introducer Arrangements

Where we have an Introducer Arrangement in place for the purpose of making introductions for advice to a 3rd party introductions will only be made with the client's agreement.

Third Party Rights

Unless otherwise agreed between us in writing no term of this Agreement is enforceable under the Contracts (Right of Third Parties) Act 1999, except by a member of the PCG Group of companies.

Governing Law

This Agreement, which sets out the terms of our relationship with you, will be governed by and construed in accordance with English Law and any dispute arising under it shall be subject to the exclusive jurisdiction of the English courts.

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