

HEALTH INSURANCE POLICY

These MajorCare policy wordings apply to policies with a Policy Inception Date of November 1 2003 or later.

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1. Policy benefits

Your *Sovereign* MajorCare policy can provide financial assistance if you incur major medical expenses. Details of the MajorCare benefits you have chosen and the names of the people insured for the MajorCare benefits (called the *life* or *lives assured*) are shown in the *schedule*. *Sovereign* will pay the MajorCare benefits to you, as the *policy owner* (s), an *eligible provider*, or to your estate. The MajorCare benefits provided are detailed in the attached *MajorCare benefits sheet*.

It is *Sovereign's* normal business practice to review the MajorCare benefits on a regular basis. This is to ensure it continues to provide cover for current medical treatments for common medical conditions at the time. It is also to ensure the insurance product remains commercially viable for *Sovereign*. A review of the MajorCare benefits may result in *Sovereign* changing the MajorCare benefits and updating this policy document accordingly. The following are examples of circumstances when *Sovereign* may wish to change the MajorCare benefits for all *policy owners*:

- > To increase the level of MajorCare benefits under the policy or to add new MajorCare benefits;
- > To move all *policy owners* to a refreshed policy document with a new drafting style/layout and similar levels of MajorCare benefits;
- > To allow for an unexpected increase in the type or level of claims that will not be sustainable long term based on the current *schedule* of *premium* rates or at any *premium* rates (uninsurable);
- > To take account of a significantly escalated or new public health threat e.g. a pandemic.

Sovereign will give you at least 30 days' notice of any pending MajorCare benefit and policy document change. Such notice will include an updated MajorCare policy document and *MajorCare benefits sheet* highlighting any change to the MajorCare benefits and will confirm the actual date from which the revised MajorCare benefits and policy changes will take effect. You always retain the right to cancel this policy at any time – see Section 3 Cancelling this policy.

2. Your payments

a) Premium

To ensure that your policy remains in force you must pay the *premium* on a regular basis as agreed with *Sovereign*. The initial *premium* is shown in the *schedule*, the first payment of *premium* is due to *Sovereign* on the first *premium due date*, which normally coincides with the *risk commencement date*. The *premium* may change from time to time (as described below) and you will need to pay the new *premium* from the next *premium due date* and thereafter. *Sovereign* will advise you in writing of the new *premium* 30 days before the change takes effect.

b) Method of paying premiums

You must pay all *premiums* to *Sovereign* at its head office in New Zealand (see Section 7d). *Premiums* are normally paid by direct debit. In addition we can offer facilities to pay *premiums* by credit card, or, you can pay *premiums* by cheque. Premium payments are not effective until after they have been cleared and credited to our bank account.

c) What happens if you do not pay the premium on time?

You have 30 days' grace in respect of any *premium* due. *Sovereign* will be entitled to cancel your policy by written notice to you at your last known address if a *premium* remains outstanding 31 days after a *premium due date*.

If you want to have this policy reinstated, you must write to *Sovereign*. *Sovereign* does not have to reinstate this policy but may do so on any conditions it considers appropriate.

If *Sovereign* has to pay a MajorCare benefit under this policy when a *premium* is overdue, the overdue *premium* may be deducted from the MajorCare benefit.

d) Change in premium amount

It's *Sovereign's* normal business practice to review *premiums* on a regular basis. This is usually done each year on the policy *anniversary date*. Please note that;

- > *Premium* increases will always be applied across the policy type.
- > There will not be an increase in *premium* for your own policy based on your claim history or experience.
- > *Premiums* for MajorCare benefits are related to the *life assured's* age, unless otherwise agreed to by *Sovereign*.
- > *Premiums* will increase each year and the *premium* increase will usually take effect from the policy *anniversary date*.
- > Any policy fee will increase each year on the *anniversary date* in line with the *consumer price index*.

The other circumstances in which your *premium* will change are as follows:

- > When you add or remove optional MajorCare benefits or adjust the excess
- > When you add or delete a life or lives assured to/from this policy.

3. Cancelling this policy

a) When can you cancel your policy?

If for any reason you are not happy with this policy, you may return it to us within 15 days from the date your policy document is received. You will be deemed to have received your policy document three days after postage from *Sovereign*. In such cases *Sovereign* will promptly refund any *premiums* paid under your policy. Alternatively changes to your policy may be made and a replacement policy document issued.

You can cancel *your* policy at any time by giving *Sovereign* notice in writing. *Sovereign* does not have to refund any part of the *premium* you have paid. As there are annual MajorCare benefit entitlements within *your* policy, *you* may remain liable to pay any *premium* due on this policy through to the next *anniversary date*, this will be at *Sovereign's* discretion.

From (and including) the date that *Sovereign* receives notice of cancellation of *your* policy, *you* will not be entitled to any MajorCare benefits under this policy unless otherwise agreed and confirmed in writing by *Sovereign*.

b) When can *Sovereign* cancel this policy?

If *you* or a *life assured* has:

- > failed to disclose all *material* information to *us* prior to inception, variation or reinstatement of this policy; or
- > made a statement on the faith of which this policy was issued, renewed, varied or reinstated, that was, in terms of the Insurance Law Reform Act 1977:
 - *material*, and
 - *substantially incorrect*, and
 - for a life policy made either *fraudulently*; or
 - within the period of three years immediately preceding the date on which the policy is sought to be avoided or the date of death of the *life assured*, whichever is earlier.

Sovereign may, at its complete discretion, either:

- > Avoid from inception your entire policy (this means this policy is deemed never to have existed), or
- > Avoid from inception any individual benefit(s) provided by your policy (this means the individual benefit(s) are deemed never to have existed), or
- > Alter the terms upon which cover is provided under *your* policy. If we choose to alter the terms of *your* policy we may do so effective from the *risk commencement date*.

If this policy or any MajorCare benefit provided by this policy is avoided from inception *you* will forfeit and *we* will be entitled to retain all *premiums* paid in relation to the benefit or policy.

Sovereign can cancel this policy and decline liability in respect of any claim made under this policy if *you*, a *life assured* or anyone acting on *your* behalf makes a claim under this policy that is false or fraudulent in any respect. In the event that fraud is established after payment of the claim all amounts paid in relation to the false or fraudulent claim must be repaid to *Sovereign*.

Sovereign can cancel this policy if a *premium* has not been paid within 31 days of the *premium due date*.

4. How to claim a benefit

For any claim enquiries or before incurring any costs in respect of a claim a *life assured* should first call our MajorCare Claims Hotline on 0800 500 1080

There are two ways to claim a MajorCare benefit:

- > *you* can seek prior approval from *Sovereign* in accordance with section 4a below and *we* will arrange to pay the respective *eligible providers* or health providers directly, less any *excess*; or
- > *you* can pay for the medical costs incurred *yourself* and then submit *your* claim to *Sovereign* for reimbursement in accordance with section 4b below.

***Sovereign* strongly recommends that *you* utilise our prior approval service at all times.** This will ensure that *Sovereign* approves all medical treatments or procedures before *you* incur any costs.

a) Prior approval and direct payment process for claims:

Sovereign has preferred provider relationships with a number of health providers and *private hospitals*. Prior approval and direct payment processes to these *eligible providers* or health providers and *Sovereign approved facilities* are streamlined. *We* therefore encourage *you* to use these *eligible providers* or health providers and *Sovereign approved facilities*.

The *policy owner* must comply with the following requirements when seeking *Sovereign's* prior approval and direct payment of any claims:

- > Prior approval requests should be made as soon as *you* are aware of a pending *private hospital* admission, MRI or CT scan. *We* need a minimum of *seven* working days to process a claim prior to the actual *private hospital* admission or procedure. Failure to notify *Sovereign* within the required time frame may result in a prior approval authorisation being declined, or, held up until *Sovereign* has had the opportunity to fully assess the claim.
- > The *policy owner* should provide *Sovereign* with:
 - details of the planned medical treatment or procedure; and
 - a copy of *your* health provider's referral certificate and any other relevant clinical notes that may be requested by *us* in order to satisfy *us* that the medical treatment or procedure being contemplated is medically necessary and that it falls within the terms and benefits of this MajorCare policy.
- > Where possible *you* should provide *Sovereign* with an estimate of the costs for the medical treatment or procedure, if the hospital and surgeon are not *Sovereign approved providers*.
- > Allow *Sovereign* in its sole discretion to:
 - contact the healthcare provider and obtain an estimate of the costs associated with the medical treatment or procedure under the claim;

- negotiate the proposed costs; and
- request that a second opinion is sought.

Subject to *you* requesting otherwise, *Sovereign* can nominate alternate providers of healthcare who *Sovereign* considers to be suitably qualified to perform the medical treatment or procedure under the claim.

Following assessment and approval of the medical treatment or procedure *Sovereign* will allocate a prior approval reference number to the claim and will fax or post *you* or, the *life assured* and the *Sovereign approved provider* a letter confirming that the claim has been approved.

You must ensure that the prior approval number is quoted on all of the invoices/accounts relating to the pre-approved claim that are sent to *Sovereign*.

Sovereign may in its sole discretion reimburse any health care provider or *eligible provider* directly.

If this MajorCare policy is cancelled for any reason and there are outstanding claims relating to any *insured event* occurring before the date of cancellation, *Sovereign* must receive the relevant claim forms within 30 days of the cancellation date, otherwise the claim(s) will not be payable.

Sovereign is not under any obligation to consider a claim unless all of the required information is provided to *us*. All claims are paid in New Zealand dollars.

You also need to use *your* best efforts to notify *Sovereign* within 24 hours after an emergency *private* or *public hospital* admission, procedure or scan has taken place.

b) When *you* pay for treatment *yourself* and then submit a claim for reimbursement:

You should give *Sovereign* notice of a claim as soon as possible by calling *our* MajorCare Claims Hotline. On such notification *Sovereign* will send *you* a claim form. *You* should complete the claim form and send it together with the *eligible provider's* or health provider's referral letter and / or medical certificate and all of the original receipts and itemised invoices, to *us*.

For any claim to be admissible:

- > the medical treatment or procedure must be medically necessary, as evidenced by the health provider's referral certificate and any other documentation requested by *Sovereign* to satisfy itself that the medical treatment or procedure is medically necessary; and
- > *premiums* must be fully paid at the time the medical treatment or procedure takes place.

Subject to the terms of this policy, *Sovereign* will pay all *reasonable charges* for medically necessary treatment up to the respective policy limits. If the costs of the medical treatment or procedure are greater than *Sovereign's* MajorCare benefit limits, or, the *reasonable charges*, the balance of the charges remaining after *Sovereign* has paid the *reasonable charges* will be *your* responsibility.

You must submit all claims to *Sovereign* within 12 months of the health provider performing the medical treatment or procedure.

5. Claims on other insurers

Where another insurer including but not limited to *ACC* may have a responsibility in respect of a claim the following provisions apply.

It is the *policy owner's* or *life assured's* responsibility to advise *Sovereign* that another insurer is involved in a claim that has been submitted to *Sovereign*.

Before *Sovereign* accepts a claim under this policy, *you* must firstly make a claim to other insurers for any expense recoverable from a third party or under any contract of indemnity or insurance. Any expenses recoverable in this way will be deducted from the reimbursement provided by *Sovereign* under this policy. For the purposes of this policy *ACC* is defined as another insurer.

For claims involving *ACC*:

- It is the *life assured's* or *policy owner's* responsibility to submit any accident related claim to *ACC* in the first instance. Where surgery is indicated, the *life assured* or *policy owner* must seek or obtain prior approval from *ACC* for *private hospital* costs.
- In respect of any accident related hospital treatment *Sovereign* will not pay for MRI or CT scans required within seven days of the injury occurring. Under the *ACC Act* treatment within seven days of the injury occurring is deemed to be 'acute' requiring treatment to be undertaken in a *public hospital*.
- If due to the *policy owner's* or *life assured's* failure to comply with *ACC's* requirements *ACC* refuses to cover the claim or ceases claim cover, the *policy owner* or *life assured* will be deemed by *Sovereign* to not have made a reasonable effort to secure cover and will therefore be ineligible to claim under this policy.
- If *ACC* declines cover for *private hospital* treatment of an accident related condition, *Sovereign* reserves the right to apply to *ACC* for a review of that decision on the *policy owner's* or *life assured's* behalf.
- Where *ACC* agrees to contribute to the *policy owner's* or *life assured's* *private hospital* costs *Sovereign* may cover additional costs up to the *reasonable charges* or as specified in the *MajorCare benefits sheet*.
- Sovereign* will not be liable for any additional costs where a lead care provider of *ACC* is used to provide *private hospital* medical treatment or procedures.

6. How can *you* amend this policy?

a) Adding family members

You may apply to *Sovereign* in writing to extend cover under this MajorCare policy at any time to include:

- > The spouse or de-facto partner of a *life assured*,
- > Any child under the age of 21 of an adult *life assured*.

Sovereign is not under any obligation to add an additional *life assured(s)* unless we are satisfied that the *life assured(s)* is in good health.

Children are subject to an exclusion for congenital disorders as specified in Section 4 of the *MajorCare benefits sheet* unless *Sovereign* agrees otherwise.

Children of an adult *life assured* are automatically covered under this policy for the first three months after being born. For a child's cover to continue after the first three months, *you* must advise *us* in writing of the child's name, date of birth and gender. If *you* provide these details to *us* within this three-month period, the child will automatically be accepted for cover under this policy without the need to provide evidence of health. Details received outside of this period will result in the child having to be medically assessed.

If a child is added to *your* MajorCare policy and the child is the first child to be covered under this policy, a *premium* increase will be required. No *premium* increase will be necessary if one or more children are already on this policy.

If an additional adult is added then the appropriate *premium* will need to be calculated and paid. The additional adult will need to provide evidence of health unless *Sovereign* agrees otherwise.

b) Removing a family member / dealing with adult dependent children

- > Under normal circumstances children listed on the *schedule* are covered until the first *anniversary date* after their 21st birthday. *You* will receive written notification from *Sovereign* advising you that a child's cover under this policy is soon to expire prior to that *anniversary date*.
- > On reaching the age of 21 each child covered under this policy will be offered the opportunity to transfer to his/her own MajorCare policy without providing evidence of good health. However, the child must make a written application to *Sovereign* within three months after the *anniversary date* following his/her 21st birthday.
- > If a child insured under this policy has reached the age of 21 and falls within the definition of being a *dependent*, then *you* can apply to have them remain on this policy until he/she reaches the age of 25. *You* will be charged the appropriate age related *premium* for each *dependent* and cover will continue under this policy until the first *anniversary date* after their 25th birthday. On reaching the age of 25 each *dependent* will be offered the opportunity to transfer to his/her own MajorCare policy without providing evidence of good health. However, the *dependent* must make a written application to *Sovereign* within three months after the *anniversary date* following his/her 25th birthday. *Sovereign* may request that *you* provide proof to establish that a child insured under this policy falls within the definition of a *dependent*.

- > Any child or *dependent* who transfers to his/her own MajorCare policy will be issued with the MajorCare policy wording that is current at the date of transfer.

You may remove any *life assured* under this policy at the *anniversary date*. *You* must advise *us* that *you* wish to remove a *life assured* from this policy at least 30 days before the applicable *anniversary date*.

c) Adding or removing optional MajorCare benefits or adjusting your excess

You may make a request to *Sovereign* in writing to add or remove optional MajorCare benefits specified in Section 3 of the *MajorCare benefits sheet* or to change the *excess*. If *Sovereign* agrees to *your* request any changes to the MajorCare benefits or the *excess* can only take effect from the next *anniversary date*.

Sovereign is not under any obligation to agree to any optional benefit addition or removal or change in *excess* unless *we* are satisfied that the *life assured* is in good health. The *life assured* may be required to provide further health information before an optional benefit is added or removed, or change to an *excess* is made.

Any optional benefit addition, or removal, or change to an *excess* may result in a change to *your premium*.

Any change in *premium*, MajorCare benefits, or, *excess* to *your* policy will start from the date notified to *you* by *Sovereign* in the applicable policy endorsement.

7. Miscellaneous

Your *Sovereign* MajorCare policy is classified as a *term life insurance* policy.

a) What forms part of this policy contract?

All the terms of this policy are contained in and based on:

- > This policy document including the *MajorCare benefits sheet*, *schedule* and any alterations made to this policy document, the *MajorCare benefits sheet* or *schedule* as permitted under this policy.
- > Any application forms and declarations made by *you*, at any time, concerning this policy.
- > All statements, which a *life assured*, has made to *Sovereign*.
- > Any provisions which any legislation states must be included in this policy, unless those provisions can be contracted out of, in which case they are not included.
- > The *policy illustration*.

Nothing else forms part of this contract.

b) Law or Government Authority changes affecting Sovereign or this policy

If changes in the law occur after the policy commencement date and we believe on reasonable grounds that those changes will affect:

- > Our liability for tax, or
- > The tax treatment of *premiums* payable or claims receivable, or
- > The way in which the policy works or the amount of benefit payable

Then we can change the provisions of the policy but only to take into account the effect of the law change.

c) Policy subject to laws of New Zealand

The laws of New Zealand govern this policy, which has been issued in New Zealand.

d) Notices

When *you* write to *Sovereign* about this policy, *you* must send all correspondence to *Sovereign's* head office in New Zealand or to a substitute address provided to *you* by *Sovereign*. The mailing address for *Sovereign's* head office is:

**Private Bag Sovereign
Victoria Street West
Auckland 1142**

The street address for *Sovereign's* head office is:

**Sovereign House
74 Taharoto Road
Takapuna
Auckland**

If more than one person owns this policy, all of the *policy owners* must sign any correspondence sent to *Sovereign*. However, *Sovereign* will not be liable to any *policy owner* if we act on correspondence signed by one or more, but not all, of the *policy owners*.

Sovereign is not bound by anything contained in a letter or notice *you* send unless *we* actually receive the letter or notice at *Sovereign's* address.

When *Sovereign* writes to *you* about this policy, *we* will send the letter or notice to the address for the *policy owner* shown in the *schedule*, or a substitute address that *you* have given to *us*.

You must immediately notify *Sovereign* of any changes to *your* postal or residential address. Every notice required to be given to *you* by *Sovereign* shall be deemed to be delivered three days after having been posted.

e) Transfer of ownership

You may assign *your* policy at any time by completing the Memorandum of Transfer printed at the back of this policy. More than one person can own or take an assignment of this policy. A trust or trustee cannot own this policy. To be valid the assignment must be registered with *Sovereign*. No charge is payable in respect of an assignment of this policy.

f) Information about *your* policy

Shortly before each *anniversary date*, *Sovereign* will send *you* a letter containing information about *your* policy.

You may at any time write to *Sovereign* or *your Sovereign* adviser for further information about *your* policy.

g) No surrender value

This policy does not participate in the profits of *Sovereign*. This policy has no surrender value or cash value if it is cancelled.

h) Suspension of cover

You may write to *Sovereign* requesting suspension of cover under this MajorCare policy for the following reasons:

- > a *life assured* is traveling overseas for a period of two to 12 months; or
- > a *life assured* is registered as unemployed for a period of two to six months.

Sovereign will require evidence of overseas travel or unemployment before agreeing to a suspension of this policy. No *premiums* will be payable and no cover will be provided under this MajorCare policy during the period of suspension. Cover under this MajorCare policy will be reinstated as long as *premiums* recommence when the overseas travel or unemployment ends or within the maximum time allowances, whichever comes first.

During the term of this MajorCare policy, the total suspension period is a maximum of 12 months for overseas travel, and a maximum of six months for registered unemployment.

i) Complaints Procedures

Complaints by *policy owners* to *Sovereign* must be made in writing to the address specified in Section 7d or a substitute address provided by *Sovereign*. If the *policy owner* is not satisfied with the outcome of the complaint they have the right to refer the complaint to the Insurance and Financial Services Ombudsman. The Ombudsman can only deal with a complaint after *Sovereign's* internal complaints procedure has been exhausted and a letter acknowledging this has been sent to the complainant.

8. Key terms

In this policy the following words have defined meanings:

ACC	The Accident Compensation Corporation of New Zealand or its successor.
ACC Act	The Parliamentary Act of New Zealand that regulates ACC, which is in effect at the time of an accident occurring.
anniversary date	The annual anniversary of the <i>risk commencement date</i> of this policy.
consumer price index	The <i>consumer price index</i> (all groups) issued by the New Zealand Government Statistician or any index, which may replace that index.
day stay clinic	A <i>Sovereign</i> approved surgical centre or clinic where minor surgery is carried out and where patients are not required to stay overnight.
dentist	A person registered to practise dentistry under the terms of the Dental Act 1988 or any subsequent replacement legislation.
dental practitioner	A recognised health professional, who is registered with the Dental Council of New Zealand (or its successor).
dependent	Any child of a life assured or any child under the legal guardianship of a <i>life assured</i> covered under this policy and aged between 21 and 25 years, who is financially <i>dependent</i> on the <i>life assured</i> (for example; a 22 year old attending a full time tertiary course).
eligible provider	A “registered health professional” as defined in Section 4(1) of the Health and Disability Commissioner Act 1994 (excluding any person registered or enrolled under the Psychologists Act 1981 or any replacement legislation), or, any other provider which <i>Sovereign</i> advises is acceptable.
excess	The amount applied to and deducted from the MajorCare benefits under this policy by <i>Sovereign</i> as specified in the <i>schedule</i> .

fraudulently	A statement is made fraudulently if the person making the statement makes it; <ul style="list-style-type: none"> > Knowing it is incorrect; or > Without belief in its correctness; or > Recklessly, without caring whether it is correct or not.
general practitioner	A medical practitioner who is registered to practice medicine in New Zealand and who specialises in the delivery of primary healthcare services.
insured event	A medical treatment, procedure or other event included under the MajorCare benefits.
life or lives assured	The life or lives assured listed in the <i>schedule</i> .
MajorCare benefits sheet	The most recently updated MajorCare benefits sheet issued by <i>Sovereign</i> , which forms part of this policy and explains the benefits payable under MajorCare.
material	A statement is <i>material</i> only if that statement would have influenced the judgment of a prudent insurer in fixing the <i>premium</i> or in determining whether he/she would have taken or continued the risk upon substantially the same terms.
oral surgeon	A <i>Sovereign</i> approved dental Specialist who has specific registration to perform complex oral surgery.
physician	A <i>Sovereign</i> approved medical practitioner who is qualified in a specialist field of medicine and is registered as a physician with the New Zealand Medical Council.
policy fee	The administration fee charged by <i>Sovereign</i> detailed in the <i>policy illustration</i> .
policy illustration	The <i>Sovereign</i> illustration enclosed with and forming part of this policy document.
policy owner, you, your and yourself	The <i>policy owner</i> listed in this policy document.

premium(s)	The amount of <i>premium</i> payable by you to Sovereign under this policy comprising the cost of the MajorCare benefits chosen by the <i>policy owner</i> plus the policy fee if any as detailed in the <i>schedule</i> .	routine screening	Any preventative treatment, health surveillance testing, or investigative procedures performed by a health care provider where the <i>policy owner</i> or <i>life assured</i> has no medical symptoms.
premium due date	The date on which the <i>premium</i> is payable under the policy, as agreed with Sovereign.	schedule	The latest (in time) <i>schedule</i> of policy details including endorsements that forms part of this policy document.
private hospital	A Sovereign approved privately owned hospital which is licensed as a <i>private hospital</i> in accordance with the Health and Disability Services (Safety) Act 2001.	Sovereign approved facility	Any hospital, day stay centre, or clinic licensed in accordance with the Health and Disability Services (Safety) Act 2001 approved or accredited by <i>Sovereign</i> .
prostheses	The artificial parts used to replace bodily parts when specific types of surgery are undertaken.	Sovereign approved provider	Any health provider who has been approved by <i>Sovereign</i> as having the appropriate qualifications/ registration to provide healthcare services to <i>Sovereign</i> or its <i>policy owners</i> and <i>life assureds</i> .
public hospital	A hospital service or institution licensed in accordance with the Health and Disability Services (Safety) Act 2001 directly or indirectly owned or funded by the New Zealand Government or any of its agencies.	Sovereign, we, our or us	Sovereign Assurance Company Limited.
reasonable charges	Charges for medical treatment that are determined by <i>Sovereign</i> in its sole discretion to be reasonable and within a range of fees charged under similar circumstances by persons of equivalent experience and professional status in the area in which the medical treatment is provided.	Sovereign benefit maximums	The listing established by <i>Sovereign</i> , which specifies the maximum amounts payable by <i>Sovereign</i> for the supply of <i>prostheses</i> and disposable laparoscopic equipment.
Registered Medical Practitioner	A person, who is registered and practicing as a medical practitioner in New Zealand that is approved by <i>Sovereign</i> , other than; <ul style="list-style-type: none"> > you; > the <i>life assured</i>; > a member of the <i>life assured's</i> family or your immediate family; > the <i>life assured's</i> or your business partner or associate. 	Sovereign Criteria	A set of criteria <i>Sovereign</i> uses to consider and approve chemotherapy or radiotherapy treatments under the Private Hospital Non-Surgical benefit in order to ensure the treatment falls within <i>reasonable charges</i> . The criteria is determined by: <ul style="list-style-type: none"> > Whether the medicine is recommended for public funding by the Pharmaceutical Therapeutics Advisory Committee (or its successor); > The medical advice of the treating oncologists; > International evidence of clinical effectiveness; > Other factors that <i>Sovereign</i> reasonably assesses as relevant.
registered nurse	A person registered as a nurse (whether as a comprehensive nurse, or a general nurse, or otherwise), or as a midwife, under the Nurses Act 1977.		
Risk commencement date	The commencement date that cover under this policy takes effect.	specialist(s)	A <i>Sovereign</i> approved medical practitioner who is qualified in a specialist field of medical or surgical practice and is registered as a

	specialist with the New Zealand Medical Council.	terrorist act	Any actual or threatened use of force or violence directed at or causing damage, injury, harm or disruption, or commission of an act dangerous to human life or property, against any individual, property or government, with the stated or unstated objective of pursuing economic, ethnic, nationalistic, political, racial or religious interest, whether such interests are declared or not, and shall include any act which is verified or recognised by the (relevant) Government as an act of terrorism. Robberies or other criminal acts primarily committed for personal gain and acts arising primarily from prior personal relationships between perpetrator(s) and victim(s) shall not be considered terrorist acts.
substantially incorrect	A statement is substantially incorrect only if the difference between what was stated and what is actually correct would have been considered <i>material</i> by a prudent insurer.		
term life insurance policy	A policy as defined in Section 2A of the Securities Regulations 1983 that is not a security or a life insurance policy for the purposes of the Securities Act 1978.		