

FAQ

New Insurance Act Brazil



Summary

- According to the Insurer's analysis, what are the main objectives of the New Law?.....3
- In summary, what are the main impacts of the New Insurance Law?.....3
- What changes regarding the roles of the Policyholder under the New Law?.....3
- What changes regarding the duties of the Insurer under the New Law?.....3
- Can the communication materials provided by the Insurer before the New Law continue to be used?.....4
- What changes in sales and communication materials?.....4
- What changes should be made to the articles mentioned in the sales materials according to the Insurer's analysis?.....4
- How will situations and the analysis of proposals and reasons for refusals be handled?.....4
- Regarding changes to Billing, Suspension, and Cancellation, what procedures are guaranteed by the Insurer?...4
- What should be done in case of risk aggravation?.....5
- How does the mandatory highlight for exclusions, restrictions, and obligations work?.....5
- How will the Insurer address the topic of Containment and Salvage Expenses?.....5
- What approach will the Insurer adopt regarding transparency in relationships and documentation?.....5
- How does the new legislation impact large-risk policies and complex contracts, especially for corporate and international clients?.....5
- How is the Insurer preparing to initiate new procedures regarding Claims regulation?.....6
- How is the Insurer addressing the new guidelines applicable to co-insurance and reinsurance contracts?.....6
- Is the Insurer reviewing agreements with leading and participating reinsurers?.....6
- How is the Insurer preparing for the new prescription periods?.....6
- Regarding the start of the validity of the New Law, will it affect existing contracts or only new ones?.....7

According to the Insurer's analysis, what are the main objectives of the New Law?

The new legislation reinforces transparency, simplicity, and security for all parties involved. The main changes focus on:

- Clarity in policies, with simple texts and highlighted information, without “fine print” or unexplained technical terms.
- Extension of the proposal analysis period, which increases from 15 to 25 days.
- New processes and deadlines for default and policy cancellation.
- Adjustments to decision, communication, and claim payment timelines after approval.
- New prescription periods, counted from the insurer's denial.
- Requirement that contracts signed in Brazil must comply with Brazilian law. In case of arbitration, it must take place in Brazil.

In summary, what are the main impacts of the New Insurance Law?

The New Law brings greater clarity to all stages of insurance, from acceptance, renewal, and cancellation to claims regulation. It updates deadlines, rules for premium refunds, waiting periods, deductibles, age limits, and exclusions. It also reinforces the obligation for plain language, highlights for restrictions, and full transparency of information to the policyholder.

What changes regarding the roles of the Policyholder under the New Law?

Policyholder Rights:

- Receive complete and clear information about the entire process.
- Access the regulation report.
- Be indemnified within the legal timeframe after coverage recognition.

Policyholder Duties:

- Immediately report the claim.
- Submit all documentation required for regulation.
- Follow containment or salvage instructions.
- Cooperate with the insurer, under penalty of liability for damages.

What changes regarding the duties of the Insurer under the New Law?

The insurer must act with clarity, responsibility, and agility. Among its obligations:

- Act with probity and promptness.
- Define claim coverage within 30 days after receiving mandatory documentation.
- Pay indemnity within 30 days after coverage recognition.

Can the communication materials provided by the Insurer before the New Law continue to be used?

Zurich is gradually updating all materials to ensure compliance with the new legislation starting December 2025. Impacted items will be replaced and discontinued.

What changes in sales and communication materials?

Materials will include clear and accessible information on coverage, exclusions, risks, and restrictions. Technical terms will be accompanied by explanations, and language must always be simple.

What changes should be made to the articles mentioned in the sales materials according to the Insurer's analysis?

- Clear rules on coverage guarantee when there is a delay in premium payment after the policy is active.
- Free designation of beneficiaries in insurance products that allow this choice.
- Objective rules for acceptance and modification of insurance, with formal response from the insurer within 25 days.
- More direct guidelines for claim situations, including procedures and required documentation.

How will situations and the analysis of proposals and reasons for refusals be handled?

- The analysis period will be extended to 25 days and may be interrupted if the insurer requests additional documents.
- If there is no response within the deadline, the proposal will be tacitly accepted.
- In the event of refusal, the applicant will receive a formal justification.

Regarding changes to Billing, Suspension, and Cancellation, what procedures are guaranteed by the Insurer?

- Zurich is adjusting processes and systems to fully comply with the new regulation:
- If the first installment or single payment is not settled, the contract will be automatically canceled.
- For subsequent installments, the insurer will notify the policyholder, granting a minimum period of 15 days for payment.
- If the client does not pay within this period, coverage will be suspended for 30 days.
- During the suspension, there will be no coverage for claims occurring after the original due date of the installment.
- Each product will have its own process for regularization through the Customer Service Center (SAC).
- If payment is not made by the end of the suspension period, automatic cancellation will occur.
- All records of notification and suspension will be duly documented.
- To re-contract, a new proposal must be submitted.

What should be done in case of risk aggravation?

The policyholder must immediately notify Zurich.

The insurer may, within 20 days from the notification, adjust the premium.

If the new risk is not technically acceptable, the contract may be canceled within 30 days, upon notification with proof of receipt.

How does the mandatory highlight for exclusions, restrictions, and obligations work?

All points that limit the policyholder's rights will be presented with emphasis, including exclusions for illnesses, age limits, waiting periods, and deductibles. This rule applies to both general conditions and proposals.

How will the Insurer address the topic of Containment and Salvage Expenses?

Each product line will define, in specific clauses:

- The role of the policyholder when requesting guidance before hiring third-party services.
- The limit for containment and salvage expenses, which shall not exceed 20% of the Insured Amount (LMI), without reducing coverage.
- When Zurich recommends specific containment measures, it will fully assume the costs, even if they exceed the stipulated limit.
- The primary guidance will always be to use the assistance services contracted by Zurich.
- Life insurance does not cover containment, salvage, or preventive repair expenses.

What approach will the Insurer adopt regarding transparency in relationships and documentation?

Zurich is adjusting processes to ensure:

- Delivery of documents supporting claim denials, when requested, except in cases of legal confidentiality or risk of harm to third parties.
- Availability of the regulation report whenever requested, with exceptions only in cases provided by law.

How does the new legislation impact large-risk policies and complex contracts, especially for corporate and international clients?

Zurich is updating clauses and aligning them with national and international partners. Contracts executed in Brazil will follow local regulations, and arbitration, when applicable, will be conducted in Brazil.

How is the Insurer preparing to initiate new procedures regarding Claims regulation?

Processes have already been adjusted to ensure:

- Clear formal communication to the policyholder, including guidelines, required documents, and deadlines.
- Analysis and decision within 30 days after receiving documentation, with the possibility of suspending the deadline once (for claims up to 500 minimum wages and motor) or twice (for claims above 500 minimum wages).
- Application of the principle of benefit to the policyholder in case of doubt regarding coverage.
- Claims adjusters aligned and prepared to meet deadlines and responsibilities.
- Payment of the claim within 30 days after a favorable decision.

How is the Insurer addressing the new guidelines applicable to co-insurance and reinsurance contracts?

Zurich is reviewing agreements according to the characteristics of each contract, always aligning the parties' interests with the new legal framework.

Is the Insurer reviewing agreements with leading and participating reinsurers?

Yes. Zurich is analyzing all agreements, adjusting clauses to the new legal terms, and reinforcing clarity, quality, and trust in contracts.

How is the Insurer preparing for the new prescription periods?

The clauses, systems, and processes are being updated to ensure compliance:

I – One-year prescription period, counted from the date of knowledge of the triggering event:

- a) The insurer's claim for premium collection;
- b) Claims by brokers, agents, representatives, and policyholders' representatives for remuneration;
- c) Claims between co-insurers;
- d) Claims between insurers, reinsurers, and retrocessionaires.

II – One-year prescription period, counted from the date of knowledge of the express denial:

Policyholder's claim to demand indemnity, capital, mathematical reserve, overdue installments, and premium refund.

III – Three-year prescription period, counted from the date of knowledge of the triggering event:

Claims by beneficiaries or third parties who have suffered damages.

Procedures:

- The policyholder must promptly report the claim.
- The prescription period begins on the date of formal denial.
- In the event of a request for reanalysis, the period is suspended until a new decision is issued.

Regarding the start of the validity of the New Law, will it affect existing contracts or only new ones?

Zurich will manage both bases simultaneously: contracts signed before the new framework and those under the New Law.

The legislation will apply to new agreements, new issuances, renewals, and renegotiations, which will already follow the new legal text.

Zurich Brasil Seguros

Av. Jornalista Roberto Marinho, 85 - 23º andar

Brooklin Novo – 04576-010

São Paulo, SP – Brasil

