

MMA *tandforsikring*



Finansforbundet's Group Policy not including dental examination & cleaning **Insurance Conditions**

Version 2 - July 2018

This English translation has no legal force and is provided to the customer for convenience only.
The conditions in the Danish language shall be binding and prevail in all respects.
The laws of Denmark shall apply.

Definitions

In these insurance conditions, the following terms have the following meanings:

Insurer

AmTrust International Underwriters DAC, 40 Westland Row, Dublin 2. Registered in Ireland with company number 169384. Regulated by the Central Bank of Ireland with reference number C33525.

AmTrust International Underwriters DAC is registered with the Danish Financial Supervisory Authority in Denmark with permission to conduct non-life insurance business in Denmark from abroad, which can be verified at www.finanstilsynet.dk.

AmTrust International Underwriters DAC (hereinafter "the Insurer") is member of the Guarantee Fund for Non-life Insurance Companies in Denmark.

Policyholder

Employer of the insured who has concluded the group policy agreement with the Insurer. The employer of the insured is a member of the Finance Sector Employers' Association (FA), which has concluded an agreement with Finansforbundet by which the insured is covered.

Insured

The Insured is a member of the group policy that the employer of the Insured has concluded with the Insurer. When the Insured has received from the employer a separate notice of membership and this has been communicated by the employer to the Insurer, the Insured will be covered by the group policy as of the indicated date (date of entry into force).

Dental apparatus

Dental apparatus means the teeth, gums, supporting tissues, jawbones and jaws of the Insured.

Insurance year

Comprises periods when the insurance is in force. The first insurance year runs from the date of entry into the group policy until the principal maturity date on 1 July each year. If the policy is still in effect, then a new insurance year will begin, which will last a year and so on.

Insurance period

Comprises the entire period during which the policy cover has been in effect from the date of entry into force until the policy terminates, see point 13: When does the policy terminate?

Claim

A claim is deemed to be an emerging condition requiring treatment which is detected and diagnosed by the duty dentist.

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1 AGREEMENT

The Group Dental Policy (hereinafter the policy) is established as a mandatory group dental policy underwritten by AmTrust International Underwriters DAC (hereinafter the Insurer). The cover includes the following dental treatment areas:

Treatment	Covered
Examination and dental hygiene	No
Fillings	Yes
X-ray	Yes
Sedation	Yes
Root canals	Yes
Periodontitis	Yes
Surgery	Yes
Cover of prosthetics under the Insurer's List of Treatments in point 18	Yes
Splint	Yes

At the end of these insurance terms and conditions, see point 18, the Insured can see a detailed list of the covered treatments.

In addition to these insurance conditions, the agreement consists of the master policy concluded between the Insurer and the employer of the Insured as the policyholder.

The policy is subject to Danish legislation if it has not been waived in the insurance conditions.

1.1 Risk information

The Insured must, on demand, provide the Insurer or his agent with full access to dental records and x-ray material to the extent that the Insurer or his agent considers it necessary to ensure that a compensation payment is made in accordance with the provisions of this agreement.

2 WHO CAN PARTICIPATE IN THE SCHEME?

Everyone in the company to which this group policy agreement applies must participate in the scheme.

Membership ends at the end of the calendar year in which the Finansforbundet member reaches the age of 85. In the master policy agreement, it will be further specified who must participate in the scheme.

In the event of termination of an Insured in the group policy agreement, for example, on termination of employment with the employer, the Insurer will be able to offer the Insured the continuation of the policy cover under individual conditions.

3 NOTICES

All notices from the Insurer to the Insured will be given by email or e-Box.

The policyholder is required to inform the Insurer of changes in the insured group policy members.

As the policyholder, the employer must inform the Insured that he is covered by the policy, make these insurance terms and conditions available to the Insured and issue notices about renewal and changes in the policy.

4 CONDITION OF COVER

The cover is effective when the Insured has had his membership of Finansforbundet scheme confirmed by the employer. This will be done by message from the employer or other administrator of the scheme.

5 WHAT THE POLICY COVERS

The policy covers the treatment areas mentioned in point 1 of these insurance conditions.

Prosthetic treatments (crowns, bridges and implants) are covered according to the List of Treatments in point 18. Note the rules for remodeling under point 6.5.

Splint support due to significant wear and tear injury that already existed at the time of entry is not covered by the policy.

The coverable treatments are defined in the compensation summary in point 1 and the List of Treatments in point 18. Note that the List of Treatments can be adjusted, usually twice a year. The current List of Treatments can at all times be found in its updated form at www.mmatandforsikring.dk.

It is a condition that the treatment is performed by a practicing dentist in an EU/EEA country.

If the treatment is performed outside Denmark, the Insurer may require that documentation for processing including bill, dental record and similar material be translated into Danish by an authorised translator, at the Insured's expense, before compensation can be paid.

6 WHAT THE POLICY DOES NOT COVER

The policy does not cover costs of the following treatments for the Insured's teeth:

6.1 Cosmetic dental treatments

All kinds of cosmetic treatment.

Cosmetic treatments are deemed to be treatments whose primary purpose is to give the Insured's teeth a better appearance, without the treatment of an actual dental disease, including:

- Stain removal,
- Other treatment of discoloured teeth,
- Replacement of a dental filling that is not defective,
- Tooth adjustment, and
- Plastic and porcelain tooth veneers

as well as other types of treatment that can be equated with them.

6.2 Ongoing, planned or recommended treatments

If for prosthetic damage (crowns, bridges, etc.) satisfactory historical records/x-ray documentation (minimum 3 years) is not available, the Insurer's dental consultant will, on the basis of a dental examination, consider whether damage actually existed already at the time of entry. This means that, if a record had been preserved, the treatment needed would have to be regarded as having been recommended or diagnosed before.

6.3 Over-treatment

Treatment where there is no justification for the treatment based on objective dental practice.

6.4 Absent teeth

Teeth that do not exist in the Insured's dental apparatus (including areas with implants) or teeth that were broken before entry into the group policy.

6.5 Repeat of prosthetic work

The durability of prosthetic work (crowns, bridges, etc.), fully or partially covered by the Insurer must be at least 5 years in order to warrant repeat work.

For implant treatments covered by the Insurer, no new implant treatment is covered.

The Insurer does not cover crown treatment on clinically sound teeth, which is included as bridging material in a bridge structure, if there is no reason for the treatment.

Repeats of treatments previously covered by the Insurer will not be covered if the repeat is due to the inadequate quality of the work performed.

6.6 Consequential damages from jewelry and the like

All damage to the dental apparatus caused by the Insured's use of jewelry that is glued to the teeth, piercings in and around the mouth as well as other types of decorations that can be compared to them.

6.7 Warranty and defective treatment

Treatment covered by the guarantee scheme agreed between the dentist and the Insured, as well as any defective treatment which the dentist is required to replace or rectify.

6.8 Persistent, gross negligence and other forms

Damage to the Insured's dental apparatus, caused:

- intentionally,
- by gross negligence,
- under the influence of alcohol, drugs, medicines or other pharmaceuticals and/or toxins, and
- during fights and/or fistfights.

6.9 Disturbances and other special situations

All treatments that are a direct or indirect consequence of war, warlike conditions, terrorist acts, riots, rebellions, civil unrest, epidemics, nuclear impact or other forms of force majeure.

7 INSURANCE AMOUNT

The insurance amount is stated in the master policy agreement and is disclosed by the employer to the Insured.

At the entry into force of Finansforbundet's insurance agreement, the insurance amount is DKK 30,000 per insurance year per Insured.

The total compensation for an insurance year cannot exceed the insurance amount, irrespective of the number of treatments.

8 DEDUCTIBLE

The deductible is stated in the master policy agreement and can be disclosed by the employer to the Insured.

When the Finansforbundet Insurance agreement enters into force, the deductible is DKK 675 per insurance year per Insured.

If the Insured has dental treatments covered but below the deductible, the Insured can wait to submit the dental bills until, during the policy year, his dental bills reach a total that is higher than the deductible.

9 COVER RATE

The cover rate is stated in the master policy agreement and can be disclosed by the employer to the Insured.

At the date of entry into force of the Finansforbundet insurance agreement, the cover rate is 100%.

In the case of a combination of dental services covered by this insurance, where the total cost after deduction of cover from other policies or other parties exceeds the deductible, the Finansforbundet insurance agreement will trigger a 100% refund of the amount over the deductible, but only up to the maximum compensation indicated in the List of Treatments in point 18. This means that all eligible dental apparatus claims, exceeding the deductible in an applicable insurance year, will be fully reimbursed up to the maximum compensation in the List of Treatments in point 18 and up to the maximum insurance amount per year in point 7. Note that the benefit list can be adjusted, usually twice a year. The current List of Treatments can at all times be found in its updated form at www.mmatandforsikring.dk.

10 NOTIFICATION OF CLAIM

The Insured must, as soon as possible after treatment, report the claim to the Insurer's agent, Marsh & McLennan Agency A/S. Under point 8, however, the Insured can wait to submit the dental bills until, during an insurance year, his dental bills reach a total that is higher than the deductible.

In the individual cases where the Insurer or his agent may consider it necessary to assess eligibility for cover, it will be a condition that the Insured submits a copy of their dental records including the relevant X-ray material and the paid invoice for the treatment.

If the required documentation is not available or the documentation is illegible, the Insurer or his agent is entitled to reject a notice of claim.

Notification must be performed by the Insured to the Insurer's agent, Marsh & McLennan Agency A/S, by either

- submitting a copy of the paid dental bill to tandforsikring@mmc.com
- or uploading a copy of the paid dental bill to www.mmatandforsikring.dk

The document can either be scanned or a clear photo of the entire dental bill can be taken with a smartphone or tablet.

Together with the upload of the paid dental bill to www.mmatandforsikring.dk, or by email if the dental bill is submitted by email, the Insured must indicate whether

- the Insured is a member of "Danmark" and of which group (1, 2 or 5), and
- whether the treatment costs are fully or partially covered by the state beyond what the dentist has already deducted from the dental bill or under another policy, such as an

occupational injury insurance, patient insurance, accident insurance or similar.

11 CALCULATION OF COVER

The Insured's expenses for treatment will be compensated up to the amounts shown in the current List of Treatments at the time of treatment.

The List of Treatments is available at: www.mmatandforsikring.dk.

For treatments not included in the List of Treatments, only reasonable and necessary expenses will be covered, as determined by the Insurer in the specific case. The decision will be taken entirely at the Insurer's discretion.

The total compensation for an insurance year is calculated as the amount of eligible expenses for treatments covered by this insurance, and after deduction of cover from other policies or other parties, diagnosed/recorded by the Insured's dentist during the policy year less the deductible stated in point 8, at the cover rate stated in point 9, and up to the maximum insurance amount per year in point 7.

It is not critical when the claim is made or the treatment is initiated or terminated, but only when the condition requiring treatment is diagnosed/recorded.

If a claim or injury, based on a normal dental assessment, requires more than one treatment, it will be regarded as a single claim, even if the treatments are carried out over more than one insurance year. The compensation can never exceed the actual treatment costs.

12 PAYMENT OF PREMIUM

The policy - and its payment by the employer - is established through a collective, compulsory group policy agreement with the employer of the Insured or another administrator of the group scheme.

13 WHEN DOES THE POLICY TERMINATE?

13.1 Automatic termination of insurance cover

Insurance cover automatically ends in the following situations:

- on termination of membership of the group entitled to the insurance - e.g. on termination of the relationship with the employer, or
- at the end of the calendar year when the Insured reaches 85, or
- on the death of the Insured.

14 CHANGE OF INSURANCE CONDITIONS

The Insurer is entitled to make changes to the insurance conditions with the employer as the group policyholder with 3 months' notice to the renewal date.

The employer will inform the Insured if the insurance conditions have changed and provide a new set of insurance terms and conditions to the Insured, in accordance with point 3.

15 COVERAGE OF THIRD-PARTY COSTS

If treatment costs are covered in whole or in part by the state or under another policy, such as occupational injury insurance, patient insurance, accident insurance or the sickness policy "Danmark", these expenses are not covered by the Insurer, which only covers the remaining proportion under the terms of these insurance conditions, so that the Insured's total compensation does not exceed the Insured's paid contribution.

16 FORFEIT OF CLAIM

If the cover expires, any claim for compensation for damage sustained or found during the policy period must be made in writing to the Insurer within 6 months.

In other situations, the applicable law on limitation will apply at all times.

17 COMPLAINT RIGHTS

In the event of disagreements with the Insurer, you will at all times have the opportunity to complain to:

Claims Manager Marsh & McLennan Agency A/S

Initially, we would ask you to contact our claims manager at Marsh & McLennan Agency A/S, requesting a review of the decision. If the contact does not lead to a satisfactory result, you can appeal to the complaints manager of the Insurer.

Complaints manager of the Insurer

Any complaint about insurance cover or a claim can be notified to the complaints manager of the Insurer.

The complaint can be submitted to:

AmTrust International Underwriters DAC

FAO: The Complaints Manager
c/o Marsh & McLennan Agency A/S
Teknikerbyen 1
2830 Virum

Marsh & McLennan Agency A/S will then ensure that the complaint is referred to the Insurer.

Insurance Appeals Board

If the application to the complaints manager of the Insurer does not lead to a satisfactory result, you can appeal to the Insurance Appeals Board.

Complaints to the Insurance Appeals Board can be made online at www.ankeforsikring.dk or by submitting a special complaint form that may be obtained from the Consumer Council, the Insurance Information Office or the Secretariat of the Appeals Board.

At the time of filing a complaint, a fee set by the Insurance Appeals Board will be payable, which will be paid back if the complaint is fully or partially upheld.

The Appeal Board's address is:

Insurance Appeals Board

Anker Heegaards Gade 2
PO Box 360
1572 København V

Tel. 33 15 89 00 between 10:00 and 13:00.

18 ANNEX - LIST OF TREATMENTS

Treatment	Treatment description	Compensation amount in DKK up to a maximum of:
1150	Bitewings	206,54
1180	Examination of patient referral from dentist	125,20
1300	X-ray recording	147,69
1415	Periodontal examination and diagnostics (PUD)	466,46
1431	Dental hygiene	104,75
1440	Surgical periodontal treatment	1.608,00
1501	Dental fillings. Not combined, silver amalgam	200,12
1502	Dental fillings. Combined, silver amalgam	273,25
1503	Dental fillings. Double combined, silver amalgam	498,33
1504	Plastic single-sided, if the occlusion is affected by wear	988,00
1505	Dental fillings. Plastic, single-layer	415,00
1506	Dental fillings. Plastic, multi-layer	765,00
1507	Dental fillings. Glass ionomer, single-layer	415,00
1509	Plastic multi-layer, if the occlusion is affected by wear	1.395,00
1554	Plastic single-layer, gradual extrusion, where the occlusion is affected by wear	988,00
1555	Dental fillings. Plastic, single layered, gradual eclipse	415,00
1556	Dental fillings. Plastic, multilayered, gradual eclipse	565,00
1557	Dental fillings. Glass ionomer, single-layer, gradual eclipse	415,00
1558	Dental fillings. Glass ionomer, multi-layer, gradual eclipse	492,00
1559	Plastic multi-layer, gradual eclipse, where the occlusion is affected by wear	1.395,00
4514	Plastic filling premolar	1.395,00
4524	Plastic filling molar	1.395,00
1600	Root treatment (pulp overcapping)	196,83
1601	Root treatment (coronary amputation)	228,52
1605	Root treatment (emergency opening)	228,52
1606	Root treatment (apical amputation and root fill per canal)	1.025,00
1701	Dental extraction per tooth	325,81
1705	Stopping of bleeding	113,47
1801	Operational removal of tooth (amotio)	2.450,00
2920	Individual preventive treatment (IFB)	160,54
3020	Consultation without treatment	255,67
9901.1	Implant, single-tooth total price (implant surgery, fixture, abutment and crown)	19.500,00
9901.2	Implant-based bridge per part	5.800,00
9901.3	Implant for cover or hybrid prosthesis per implant with retention	5.800,00
9905	Moulded structure in precious metal in connection with crown/final abutment	3.300,00
9906	Gold and porcelain inserts	5.600,00
9907	Crown - gold, ceramic, zircon and similar	5.800,00
9910	Partial crown	5.600,00
9911	Long-term trial of implant treatment	3.000,00
9912	Root cap with retention	2.500,00
9913	Attachment	1.250,00

Treatment	Treatment description	Compensation amount in DKK up to a maximum of:
9914	Brickwork in gold, ceramics and similar per part	5.800,00
9919.1	Retrograde root filling or root-tip amputation single-rooted	1.850,00
9919.2	Retrograde root filling or root-tip amputation of multiple-rooted tooth	2.650,00
9919.3	Bone structure prior to implant treatment	4.500,00
9919.4	Sinus lift prior to implant treatment	3.500,00
9937.1	Soft splint	1.450,00
9937.2	Hard splint	2.700,00
9944.1	Panoramic x-ray (OP)	600,00
9944.2	Conebeam x-ray	2.200,00
9944.3	Tomography	1.300,00
9945	Anesthesia, local anesthesia, nitrous oxide, sedation	250,00
9949	Re-cementing	475,00
9955	Plastic construction with pin anchoring	1.250,00
9956	Complete prosthesis upper jaw/lower jaw	6.000,00
9958	Complete prosthetic set	11.500,00
9959	Unitor (cast frame)	9.600,00
9960	Mucus-assisted acrylic sub-prosthesis	3.500,00

Subject to any printing errors. The above compensation prices apply as per 1 June 2018. The latest updated prices will at all times be available from www.mmatandforsikring.dk



MARSH & McLENNAN
COMPANIES



PRIVACY AND DATA PROTECTION NOTICE

1. DATA PROTECTION

AmTrust International Underwriters DAC (the Data Controller) is committed to protecting and respecting your privacy in accordance with the current Data Protection Legislation (“Legislation”).

2. HOW WE USE YOUR INFORMATION

We may use the personal data we hold about you in the following ways:

- For the purposes of providing insurance, handling claims and any other related purposes. This may include underwriting decisions made via **automated** means – this is for the performance of the insurance contract between you and us.
- For offering renewal, research or statistical purposes – this is for our legitimate interests: for us to analyse historic activity, to improve our rating algorithms and to help predict future business impact. To further our commercial interests, to enhance our product offering and to develop new systems and processes.
- To provide you with information, products or services that you request from us or which we feel may interest you - where you have consented to be contacted for such purposes.
- To notify you about changes to our service – this is for our legal and regulatory obligations.
- To safeguard against fraud and money laundering and to meet general legal or regulatory obligations - this is for our legal and regulatory obligations.

2.1 Sensitive (Special) Personal Data (such as information relating to health), may be required by us for the specific purposes of underwriting and fraud detection, or as part of the claims handling process. The provision of such data is conditional for us to be able to provide insurance or manage a claim and, whilst you can withdraw your consent for us to process such data, this may result in us not being able to continue cover, or to process any claims. Where such data is provided to us, it will only be used for the purposes set out above, and will be treated securely and in line with this notice.

3. DISCLOSURE OF YOUR PERSONAL DATA

We may disclose your personal data to third parties involved in providing products or services to us, or to service providers who perform services on our behalf. These include:

- a. Our group companies,
- b. Affinity partners;
- c. Brokers, agents, third party administrators, reinsurers and other insurance intermediaries;
- d. Medical service providers;
- e. Fraud detection agencies;
- f. Loss adjusters;
- g. External law firms;
- h. External auditors;
- i. Regulatory authorities; and
- j. As may be required by law

We may also disclose your personal information:

- a. In the event that we sell or buy any business or assets, in which case we may disclose your personal data to the prospective seller or buyer of such business or assets.
- b. If any AmTrust company or substantially all of its assets are acquired by a third party, in which case personal data held by it about its customers will be one of the transferred assets.
- c. To protect the rights, property, or safety of AmTrust, our customers, or others.

4. INTERNATIONAL TRANSFERS OF DATA

We may transfer your personal data to destinations outside the European Economic Area (“EEA”). Where we transfer your personal data outside of the EEA, we will ensure that it is treated securely, and in accordance with this privacy notice and the Legislation. We only transfer data to countries deemed as having adequate protection by the European Commission or, where there is no adequacy decision, we use the European Commission approved ‘Standard Contractual Clauses’ with such parties to protect the data. A copy of the ‘Standard Contractual Clauses’ can be obtained by writing to: **The Data Protection Officer, AmTrust International, 2 Minster Court, Mincing Lane, London, EC3R 7BB England.**



5. YOUR RIGHTS

You have the right to:

- a. Ask us not to process your data for marketing purposes.
- b. See a copy of the personal information we hold about you.
- c. Ask us to delete any of your personal data (subject to certain exemptions).
- d. Have any inaccurate or misleading data corrected or deleted.
- e. Ask us to provide a copy of your data to any controller.
- f. Lodge a complaint with the local data protection authority.

For access to your personal data please write to: **The Data Protection Officer, AmTrust International, 2 Minster Court, Mincing Lane, London, EC3R 7BB England.**

6. MARKETING

Where you have provided consent, we may share personal data that you provide to us within the AmTrust Group of Companies and with other companies that we establish commercial links with. They and we may contact you (by mail, e-mail, telephone, text, or other agreed means) in order to tell you about products, services or offers that we believe will be of interest to you, or to provide you with commercial updates.

7. RETENTION

Your data will not be retained for longer than is necessary, and will be managed in accordance with our data retention policy. In most cases the retention period will be for a period of seven (7) years following the expiry of the insurance contract, or our business relationship with you, unless we are required to retain the data for a longer period due to business, legal or regulatory requirements.

USE OF PERSONAL INFORMATION

In order to provide services as an insurance agency, Marsh & McLennan Agency A/S collects and uses Personal Data, such as your name and contact information, which may also include special categories of Personal Data (e.g. health data). The purposes for which we collect Personal Data include the assessment and offering of insurance coverage, the processing of claims and the prevention of crime. Further information about our use of personal data can be found in the Marsh & McLennan Agency A/S Privacy Notice, available at www.mmatandforsikring.dk/Persondatapolitik. A copy of Marsh & McLennan Agency A/S's Privacy Notice may also be obtained by written inquiry to Marsh & McLennan Agency A/S's personal data officer. We recommend you read the full Privacy Notice.

Marsh & McLennan Agency A/S may disclose Personal Data to third parties such as insurers, reinsurers, loss adjusters, subcontractors, Marsh & McLennan Agency A/S affiliates, insurance brokers, as well as to certain authorities that may need the customer's Personal Data for the purposes as stated in Marsh & McLennan Agency A/S's Privacy Notice.

Depending on the circumstances, the use of Personal Data, as stated in this notice, may include the transfer of information outside the UK and the European Economic Area (EEA). However, this will be done subject to the appropriate security measures

Customer consent to the use of Personal Data:

Under certain circumstances, Marsh & McLennan Agency A/S may need to obtain and use Sensitive Personal Data (e.g. health information). In such cases, Marsh & McLennan Agency A/S needs your consent to provide the relevant services, and you hereby consent to such treatment. You can withdraw your consent at any time. However, this may result in Marsh & McLennan Agency A/S being unable to provide the services, to handle requests or claims and hence be unable to provide insurance cover.

When a customer provides Marsh & McLennan Agency A/S with personal information about a person other than themselves, the customer agrees to inform the person concerned about the use of his/her Personal Data by Marsh & McLennan Agency A/S and to obtain his/her consent to Marsh & McLennan Agency A/S's use of any special categories of personal data such as health information. The customer agrees that Marsh & McLennan Agency A/S's delivery of the services is conditional upon the customer informing the third party concerned of the use of their Personal Data by Marsh & McLennan Agency A/S and obtaining their consent. Any third party whose Personal Data is being held by Marsh & McLennan Agency A/S can withdraw their consent at any time. In that case, Marsh & McLennan Agency A/S may, however, be unable to provide services to that person (and possibly to the customer), which may mean that Marsh & McLennan Agency A/S is unable to process queries or claims and that the relevant insurance cover ends.

For further information about how Marsh & McLennan Agency A/S processes Personal Data and how the customer can exercise his rights in relation to this information, please refer to the [Marsh & McLennan Agency A/S Privacy Notice](#).