



No.1 Police Healthcare Plan Handbook

Effective from 1 January 2013

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Welcome to the No.1 Police Healthcare Plan

This handbook explains all the benefits available to you under your Healthcare Plan, and details the procedures you should follow to make a claim.

Your Healthcare Plan is provided through a healthcare trust. The Plan is administered on behalf of the Trustees by Simplyhealth, who specialises in the management of corporate healthcare plans.

The Healthcare Plan has been tailored to provide you with fast access to treatment in the event of an illness or injury with maximum flexibility, choice of specialist and hospital location.

The Plan is operated in accordance with the terms of a healthcare trust. Healthcare trusts help contain costs and everyone benefits from the most advantageous tax treatment.

Please remember to call the Helpline before arranging any treatment. This enables an experienced advisor or nurse to answer any questions you may have, and check that your specialist is recognised by Simplyhealth, and that the Plan will pay for the treatment that you are planning to undergo.

We strongly recommend that you get authorisation from Simplyhealth for your treatment.

What the Plan will pay for

Your Healthcare Plan does not pay for every type of healthcare service. Therefore it is important that you read this handbook carefully as you will have to pay the costs of any treatment that is not a benefit under the Plan.

A full list of benefits available under the Plan can be found on page 11. Details of treatment that the Plan will not pay for is explained, in full, in Exclusions on page 16.

Please keep this handbook somewhere safe and refer to it if you need to make a claim.

Call the Helpline if you have any questions, and before arranging any treatment

0800 980 7419

Helpline Monday to Friday 8am to 6pm

How to use your Healthcare Plan

Where your GP has informed you that you need to be referred to a specialist and you wish to use the Plan to pay for treatment, you should contact the Helpline for authorisation before each stage of any treatment that is recommended. We ask you to do this so that you can be sure that you are not going to have treatment that the Plan will not pay for.

The Helpline is staffed by experienced personal care advisors and clinical care managers who will guide you through your claim and advise you about the terms and conditions and benefit limits of the Plan.

Remember that some treatments are available through the NHS. If you choose to have treatment as an NHS patient for which no charge is made, you may be able to claim a cash benefit. For emergency treatment and more complex surgical procedures, the NHS may provide better facilities than a private hospital.

Monitor your claims online

As a member of the Plan you have access to an online service that helps you to:

- Make a claim
- View the benefits available to you under the Plan
- Download a copy of the full terms and conditions of your membership
- Access useful healthcare links

Full details about the No.1 Police Healthcare Plan can be found on the Plan Microsite - www.no1policehealthcare.co.uk.

MyPlan

You can also access myPlan from this service, allowing you to view information about your personal membership and claims which have been paid.

To register email: dataservices@simplyhealth.co.uk.

Once registered simply log on to <https://myplan.simplyhealth.co.uk> where you will be able to:

- Check your membership details held on the Simplyhealth administration system
- Check the status of any invoices being processed by Simplyhealth
- Download a copy of the full terms and conditions of your membership

Call the Helpline if you have any questions, and before arranging any treatment

0800 980 7419
Helpline Monday to Friday 8am to 6pm

How to make a claim

1 If you are suffering from a musculoskeletal injury

- Call the Helpline on 0800 980 7419 as soon as possible – your Healthcare Plan has special arrangements for the treatment of musculoskeletal injuries through a managed network of physiotherapists, without the need for a GP referral.

2 If your GP refers you for a diagnostic test or to see a specialist or therapist

- Ask your GP for the name of the specialist or therapist.
- Call the Helpline on 0800 980 7419 to check whether the Plan will pay for the test or consultation before arranging this.

3 When you see the specialist or therapist

- Take your authorisation letter with you.

4 If your specialist or therapist recommends treatment, diagnostic tests, referral to another specialist or nursing at home

- Call the Helpline on 0800 980 7419 to check whether or not the Plan will pay for the treatment before arranging this.

5 If you need to be admitted to hospital

- Call the Helpline on 0800 980 7419 to check whether or not the Plan will pay for the treatment. We may arrange for your treatment to be monitored by our clinical care managers and, if the Plan pays for the treatment, will arrange to pay the hospital charges directly to the hospital.

6 When you leave hospital

- You will need to pay for personal expenses such as newspapers, telephone calls, alcoholic drinks or visitors' meals.

7 If your specialist or therapist recommends nursing at home or out-patient treatment

- Call the Helpline on 0800 980 7419 to check whether or not the Plan will pay for the treatment.

8 If you receive any invoices for treatment

- You will need to send these within six months of treatment to:
Simplyhealth, James Tudor House, 90 Victoria Street, Bristol BS1 6GH.
- Please attach a note giving your name (or the patient's name if it is for someone else), Healthcare Plan name and authorisation number.

Rapid Access Physiotherapy Service

Simplyhealth has teamed up with Nuffield Health to offer an early diagnosis service with qualified physiotherapists providing assessment, advice and treatment. You don't need to see your GP in order to use the service.

If you are suffering from pain in your back, joints or muscles, or have had an injury, you will be offered direct access to a Nuffield Health physiotherapist when you contact the Helpline. You will be able to choose a convenient time for a physiotherapist to contact you by telephone to discuss your condition in detail.

During the telephone conversation the physiotherapist will spend time understanding your condition and will offer you appropriate advice and treatment depending on your symptoms. This may be referral for face to face treatment with one of Nuffield's accredited physiotherapists, a referral to a consultant (if this happens you will need to call the Helpline for authorisation), or a self help programme. In all cases the physiotherapist will give you information to help you effectively manage your condition.

The benefits of this service to you include:

- immediate help and support from a qualified physiotherapist ensuring that you get prompt treatment
- appointments at times to suit you
- no need to see your GP first
- face to face treatment only where absolutely necessary, saving you time and effort in getting to a clinic
- providing you with the tools to manage your own health
- if you need face to face treatment, appointments arranged at an accredited clinic close to your home or work place
- regular follow-ups with a physiotherapist to help guide you through your treatment

Call the Helpline if you have any questions, and before arranging any treatment

0800 980 7419
Helpline Monday to Friday 8am to 6pm

Telephone Advice and Counselling

As a member of the Plan you have access to the Telephone Advice and Counselling line.

This is a service intended to help you deal with any of a wide range of personal issues which may adversely affect your work, personal life or well-being.

The Advice and Telephone Counselling lines are available on 0800 975 3348, 24 hours a day, 365 days a year. You will be asked for the name of your Plan, but calls are confidential.

Joining and leaving the Healthcare Plan

Adding a newborn

A newborn child may be added to the Plan from their date of birth without the need to provide a health declaration, providing the administrator has received written notification within three months of their birth.

Maximum age dependants

Benefit will be provided for children and grandchildren registered on the Plan until their 24th birthday.

Leaving the Plan

Costs incurred after your last day of cover will not be paid for by the Plan even if they have been authorised by Simplyhealth before you leave the Plan.

Call the Helpline if you have any questions, and before arranging any treatment

0800 980 7419

Helpline Monday to Friday 8am to 6pm

Pre-existing conditions

There are a number of conditions for which the Plan will not pay for treatment. The Plan will not pay for treatment of an illness which you, or your dependants are suffering from or already had before the start of your membership.

This is known as a pre-existing condition and applies to any medical condition which that person has received medication, advice, treatment or your dependant has experienced symptoms, whether the condition has been diagnosed or not.

Summary of benefits

Your Plan is designed to pay for treatment for curable short term disease, illness or injury (known as acute conditions).

Member contribution

The member contribution is the amount which you have to pay towards the cost of any eligible treatment. The member contribution on the Plan is:

£150 per member per rolling twelve month period

This will be deducted from the first eligible invoice(s) processed by Simplyhealth. Simplyhealth will notify you where you need to pay this amount directly to a treatment provider (for example the hospital where you were treated).

Questions and answers

Q: Am I covered abroad?

A: No. The Plan does not provide benefits for treatment abroad.

For travel overseas, we recommend you purchase travel insurance. This should cover medical expenses, including emergency repatriation where necessary, and will usually cover cancellation and curtailment, baggage, legal expenses, delays etc.

Q: What happens in an emergency?

A: If you have an accident or are taken seriously ill, you will automatically receive emergency treatment under the NHS. In these instances, the NHS provides the best treatment available.

Q: Can I move from the NHS to a private room following an accident or emergency?

A: If you need to remain in hospital you may be able to choose to continue your treatment as a private patient, if available within that NHS hospital, or at another hospital. Please note this is dependent on your suitability to transfer and the availability of a recognised private medical facility that can provide the treatment required. Simplyhealth requires written approval from the specialist treating you. Please contact the Helpline to confirm that this benefit is available to you.

Q: Can I claim cash benefit if I am admitted to an NHS hospital in an emergency?

A: You can only claim cash benefit where you have chosen to receive elective treatment as an NHS patient without charge. This is where you have been advised by your specialist you need an operation, but choose to have NHS treatment rather than choosing private treatment.

Terms and conditions

This **Plan** has been specially designed to pay for private medical **treatment** following disease, illness or injury. The terms and conditions for the **Plan** are intended to be clear in language and layout but it is important that you understand the **Plan** and **your** own obligations in order to receive the full **benefits**. In these terms and conditions and in the **table of benefits** there are many words which have a special meaning in the context of this **Plan**. These words are printed in bold and their meaning is set out in the definitions section. These terms and conditions detail to what extent and how the **Healthcare Plan** will pay for private medical **treatment**.

Which hospitals can be used?

The **Plan** will pay for **treatment** at most private hospitals. It is important that you contact the Helpline to ensure that the **Plan** will pay for **treatment** at your chosen **hospital**.

Cover abroad

The **Plan** does not pay for **treatment** overseas. **We** strongly recommend that you buy travel insurance before you go abroad.

Call the Helpline if you have any questions, and before arranging any treatment

0800 980 7419
Helpline Monday to Friday 8am to 6pm

Table of benefits

Benefits payable subject to the terms and conditions of the Plan		
Annual Maximum	Annual Maximum	Maximum benefit per member per year £50,000
	Member contribution	£150 per member per rolling 12 months
In-patient and day-patient treatment	NHS pay-bed ¹ and private hospital charges for: Accommodation, nursing, operating theatre, drugs, dressing, eligible surgical appliances and prostheses used in connection with treatment , physiotherapy, other ancillary charges and diagnostic tests including pathology, x-rays, ECGs and all medical scanning and imaging techniques including MRI, CT and PET scans	Paid in full (subject to annual limit)
	Accommodation for one parent or guardian accompanying a dependant(s) under 12 years of age who is undergoing eligible in-patient treatment	Paid in full (subject to annual limit)
	Fees for consultations and treatment charged by specialists including surgeons, anaesthetists and physicians	Paid in full up to the amount shown in the fee schedule ²
	Treatment for cancer , including radiotherapy and chemotherapy	Paid in full (subject to annual limit)
Out-patient treatment	Consultations and diagnostic tests including pathology, radiology, ECGs and ultrasound scans. Physiotherapy provided by a state registered physiotherapist, Acupuncture, Chiropractic treatment, Osteopathy and Homeopathy	Up to £1,000 a year for consultations and diagnostic tests Up to £500 a year of the £1,000 for Physiotherapy and other therapies Up to £250 a year of the £1,000 for complimentary medicine
	All computerised tomographic scanning and medical imaging techniques including MRI, CT and PET scans	Paid in full (subject to annual limit)
	Radiotherapy and chemotherapy	Paid in full (subject to annual limit)
Other services	Nursing at home arranged by a specialist for medical reasons following in-patient or day-patient treatment	Up to £600 per year
	Transport by private ambulance in the UK when medically necessary for the purpose of treatment	Up to £60 for each single trip up to an overall max amount of £120
NHS cash benefit	When elective in-patient treatment is received as an NHS patient without charge	£100 per night

¹ An NHS pay bed is available to NHS patients who wish to pay for the privacy of a single en-suite room whilst their **treatment** remains on the NHS.

² Fee schedule: Please go to the Healthcare Professionals section of www.simplyhealth.co.uk to check fees ahead of **your treatment**.

1. Definitions

1.1 Acute condition

A disease, illness or injury that is likely to respond quickly to **treatment** which aims to return **you** to the state of health **you** were in immediately before suffering the disease, illness or injury, or which leads to **your** full recovery.

1.2 Administrator

The administrator of this **Healthcare Plan** is Simplyhealth. Simplyhealth is the trading name of Simplyhealth Administration Services Limited.

1.3 Alternative therapy

Acupuncture, chiropractic, homeopathic and osteopathic therapies administered by a **therapist**.

1.4 Authorisation

Permission gained from **us** before the commencement of any consultations, **diagnostic tests** or **treatment**.

1.5 Benefit year

The period agreed by the **Trustees** for **your Healthcare Plan**, during which benefits are payable, as defined in the **table of benefits**, issued by the **Trustees** under this **Plan**.

1.6 Cancer

A malignant tumour, tissues or cells, characterised by the uncontrolled growth and spread of malignant cells and invasion of tissue.

1.7 Chronic condition

A disease, illness, or injury that has one or more of the following characteristics:

- It needs ongoing or long term monitoring through consultations, examinations, check-ups, and/or tests.
- It needs ongoing or long term control or relief of symptoms.
- It requires **your** rehabilitation or for **you** to be specially trained to cope with it.
- It continues indefinitely.
- It has no known cure.
- It comes back or is likely to come back.

1.8 Commencement date

The date on which the **Healthcare Plan** commenced.

1.9 Customary clinical practice

Clinical Practice falling within the pattern of care most frequently practiced by the majority of **specialists** for the **treatment** of **your medical condition**.

1.10 Day-patient

A patient who is admitted to **hospital** or a day-patient unit because they need a period of medically supervised recovery, but does not occupy a bed overnight.

1.11 Dependant(s)

For the purpose of this **Healthcare Plan** a dependant is defined as:

- the husband, wife, civil partner or partner of either sex who lives with **you**.
- any children, stepchildren and grandchildren for which **you** are responsible, under the age of 24. They do not have to live with **you**.

1.12 Diagnostic tests

Investigations, such as X-rays or blood tests, to find or to help find the cause of **your** symptoms.

1.13 Elective treatment

Treatment which is chosen to be undertaken by the **specialist** or **member** as opposed to an emergency admission which is unpredictable and at short notice because of clinical need.

1.14 Emergency treatment when travelling abroad on business or holiday

Treatment which is medically necessary to enable **you** to return to the **UK**.

1.15 Exclusions

Medical conditions which are **pre-existing**, or any related **medical condition**, as notified by **us** as an exclusion. An exclusion could also be applied to a part of **your** body as well as to a specified condition.

1.16 Experimental treatment and drugs

Treatment or drugs which, in the opinion of **our** medical advisor, the safety and efficacy are unproven based on current and established practice in the **UK**.

1.17 General Practitioner (GP)

A Medical Practitioner in general practice who is registered under the Medical Acts and who is not a **specialist**.

1.18 Healthcare Plan

The Healthcare Trust provided by the **Trustees** for the provision of healthcare benefits.

1.19 Hospital

A private hospital registered with the Care Quality Commission or an NHS hospital which has written confirmation that the hospital is currently recognised by **us**.

1.20 Hospital charges

Accommodation, nursing care, drugs and dressings, **diagnostic tests**, prostheses and operating theatre costs. Accommodation charges for one parent or guardian accompanying a **dependant** under the age of 12 years.

1.21 In-patient

A patient who is admitted to **hospital** and who occupies a bed overnight or longer, for medical reasons.

1.22 Material facts

Any information that **we** would regard as likely to influence acceptance of an application to join the Plan or the **authorisation** of any part of a claim. If there is any doubt if certain information is material, it should be declared.

1.23 Medical condition

Any disease, illness or injury.

1.24 Member

Those **members** and **members'** **dependant(s)** who have been notified to **us** and accepted by the **Trustees** as members of the **Plan**.

1.25 NHS patient

A patient who is admitted for **treatment** to an NHS **hospital** without charge.

1.26 Nurse

A qualified nurse who is on the register of The Nursing and Midwifery Council (NMC) and holds a valid NMC personal identification number.

1.27 Nursing at home

The services of a **nurse** following **in-patient** or **day-patient treatment**. The services must be actively supervised by a **specialist** and be for medical and not domestic reasons.

1.28 Out-patient

A patient who attends a **hospital**, consulting room or out-patient clinic and is not admitted as a **day-patient** or **in-patient**.

1.29 Pre-existing condition

Any disease, illness or injury for which:
a) **You** have received medication, advice or **treatment**, or
b) **You** have experienced symptoms; whether the condition has been diagnosed or not.

1.30 Preventative treatment

Medical services that are used to identify whether **you** are likely to suffer from an illness, injury or disease in the future, but in a situation where no clinical symptoms are currently present. This includes **treatment** to prevent the occurrence of a specific **medical condition**.

1.31 Private ambulance

Transport by a registered ambulance on the recommendation of **your specialist** for **your** transfer between **hospitals** to undergo further **treatment** where medically necessary and for which a charge is made.

1.32 Related medical condition

Any symptom, disease, illness or injury, which reasonable medical opinion considers to be associated with another symptom, disease, illness or injury.

1.33 Renewal date

The date on which this **Healthcare Plan** renews.

1.34 Specialist

A doctor who:
a) holds an NHS Consultant Post and
b) is on the Specialist Register held by the General Medical Council and holds a current licence to practice, or
c) has received written confirmation that they are currently recognised by **us**.

1.35 Start date

The date on which **you** joined the **Healthcare Plan**.

1.36 Surgical procedure

An operation (including oral surgery) as specified in the current schedule of surgical operations used by **us**.

1.37 Table of benefits

The current table of benefits which sets out the amounts payable by the **Trustees** under this **Plan** for **treatment**.

1.38 Therapist

A therapist is one of the following:

- a) A Physiotherapist registered with the Health Care Professions Council.
- b) An Osteopath who is a professionally qualified member of The Statutory Register of Osteopaths administered by the General Osteopathic Council.
- c) A Chiropractor who is a professionally qualified member of The Statutory Register of Chiropractors administered by the General Chiropractic Council.
- d) An Acupuncturist registered with:
 - i) The British Acupuncture Council or
 - ii) The British Medical Acupuncture Society or
 - iii) The Acupuncture Association of Chartered Physiotherapists.
- e) A Homeopath who is a member of the Faculty of Homeopaths and who is medically qualified.
- f) A Podiatrist registered with the Health Care Professions Council carrying out Gait Analysis or Biomechanical Studies on the referral of a **specialist**.

1.39 Treatment

Surgical or medical services (including **diagnostic tests**), that are needed to diagnose, relieve or cure a disease, illness or injury.

1.40 Trustee(s)

Trustee or Trustees for the time being of the **Plan**.

1.41 United Kingdom (UK)

For the purposes of this **Healthcare Plan**: Great Britain, Northern Ireland, The Channel Islands and The Isle of Man.

1.42 We/Us/Our

Simplyhealth, the **administrator** of your **Plan**.

1.43 You/your

The main member(s) or dependant(s) who are members of this **Healthcare Plan**.

2. General Conditions

2.1 Your membership of the **Healthcare Plan** will stop on the day that you leave the **Plan**.

- a) Membership of the **Healthcare Plan** stops the day before the **renewal date** unless it is renewed by mutual agreement between the Trust and the **administrator** with the consent of the **Trustees**.
- b) The Trust may offer to renew the **Healthcare Plan** with different terms and conditions, benefits or contributions, with the consent of the **Trustees**, and will notify the **members** in writing of any changes they propose.
- c) The **Trustees** may discontinue the **Healthcare Plan** at any time.
- d) Any contributions which **you** undertake to pay for **your** own membership or that of **your dependant(s)** must be paid in advance, at such times as the **Trustees** require. Entitlement to claim benefit shall commence when a contribution has been received in full and shall end when the period of entitlement corresponding to that contribution has expired.
- e) The **Trustees** reserve the right to discontinue a **member's** membership if a contribution is more than 31 days in arrears, or if a **member** is in breach of these terms and conditions.
- f) There will be no refund of any contribution, paid by **you**, on the death of any **member**.

2.2 The **Trustees** reserve the right to refuse to renew, cancel or vary the **Healthcare Plan** at any time despite any other terms if:

- a) The **member** has:
 - i) not acted in good faith and/or has misled the **administrator** by misstatement and/or withheld material facts or
 - ii) breached the terms and conditions of this **Healthcare Plan**.
- b) The Trust
 - i) has elected to discontinue a Trust paid **Healthcare Plan** or has offered an alternative to the same **member(s)** registered under this **Plan** either in addition to or in place of this **Healthcare Plan**.

- ii) refuses or fails to comply with its obligations under this **Healthcare Plan** whether demanded or not.
- iii) enters into a composition with its creditors, is wound up or goes into liquidation save for the bona fide reconstruction, takeover or amalgamation or where it is an unincorporated body becoming bankrupt.
- iv) has not acted in the utmost good faith and has misled the **Trustees** or **administrator** by mis-statement and/or concealment of material facts.

3. Plan conditions

3.1 The **Trustees** will only pay benefit for **treatment of acute conditions**:

- a) which has been given for a specific **medical condition** and has been arranged by the **member's GP**, except where **treatment** has been received through the Musculoskeletal Network when authorised by the Helpline.
- b) in cases where it was not possible for the **member's GP** to arrange the **treatment** because of an emergency, the **Trustees** will pay benefit for eligible **treatment** provided the **member's GP** has been kept fully informed of the **treatment** undertaken and supports the claim.
- c) which has been supervised by a **specialist**. In cases where the **treatment** has been given by a **therapist**, the **Trustees** will pay benefit for the first eight sessions of **treatment** or as deemed necessary by the **administrator** without them having been supervised by a **specialist**.
- d) a **specialist, nurse or therapist** has given.
- e) if it was for an allergy, it must have been given by a **specialist** who holds a consultant position within that specialty in an **NHS hospital** at the time the **treatment** was provided.

3.2 The **Trustees** may not pay **your** claim for **treatment** or may restrict the amount they pay if:

- a) The expenditure incurred was not:
 - i) Reasonable,
 - ii) Necessary for the **treatment** of the **medical condition**, or
 - iii) Wholly and exclusively for the purpose of providing **treatment**.
- b) The **specialist's** fees were higher than those in the Simplyhealth fee schedule.
- c) The **treatment** provided was not in accordance with **customary clinical practice**.
- d) The **member** has:
 - i) Not acted in good faith, or
 - ii) Has misled the **Trustees** or a previous medical expenses **Healthcare Plan** by mis-stating or withholding **material facts**, or
 - iii) Breached the **Plan terms and conditions**.

3.3 The **Trustees** will pay the actual cost of any **treatment** up to the maximum amount (if any) specified in the **table of benefits** applicable at the time **treatment** was received.

3.4 The **Trustees** will retain for their own benefit the cost of any healthcare **treatment**:

- a) recovered as damages; or
- b) refunded by any providers of **treatment**.

3.5 The **Trustees** will use the appropriate local equivalents when applying these terms and conditions in cases where you have received **treatment** overseas.

4. Exclusions

Your **Healthcare Plan** is designed to pay for **treatment** of curable, short term disease, illness or injury (known as **acute conditions**).

The Trustees will NOT pay benefits for:

4.1 Addictive conditions

Treatment for alcoholism, alcohol abuse, solvent abuse, drug abuse or addictive conditions of any kind, and **medical conditions** arising directly or indirectly from, or related to, any such abuse or addiction.

4.2 Ageing, menopause and puberty

Treatment to relieve symptoms commonly associated with any bodily change arising from any physiological or natural cause such as ageing, menopause or puberty and which is not due to any underlying disease, illness or injury.

4.3 Allergies or allergic disorders

Treatment to de-sensitise any allergic condition or disorder.

4.4 Breast reduction or augmentation operations

Whether or not for psychological reasons, except where the **treatment** is to correct disfigurement caused by an accident or specific disease of the breast.

4.5 Chronic conditions

Treatment of chronic conditions.

4.6 Contamination, wars and riots

Treatment directly or indirectly arising from or consequent upon nuclear or chemical contamination, civil war, riot, invasion, terrorism, disturbance, rebellion, revolution, insurrection, military or usurped power except for a documented police duty related incident.

4.7 Cosmetic treatment

Cosmetic treatment, whether or not for psychological reasons, except where **treatment** is to correct an **acute medical condition** caused as a result of an accidental bodily injury or illness sustained during membership.

Treatment of a **medical condition** which is related to previous cosmetic surgery which the **Plan** would not have paid for.

4.8 Criminal activity

Treatment of an illness, injury or condition which arises from **your** own criminal act.

4.9 Dangerous sports

For the purposes of this **policy**, dangerous sports are:

- a) ballooning, hang gliding, parachuting or bungee jumping, flying (except where a fee paying passenger)
- b) motor racing
- c) scuba diving or free diving
- d) potholing, rock climbing or mountaineering where ropes or guides should be used
- e) any form of martial art
- f) off piste skiing or snowboarding.

4.10 Dental treatment

Dental treatment other than an oral **surgical procedure** carried out by an oral surgeon to treat an **acute condition** (not a dental condition), in a facility which is recognised by **us**.

Removal of impacted wisdom teeth (except where there is a pathological cause necessitating removal).

4.11 Dialysis

Regular and/or long term dialysis in respect of chronic or end stage renal failure.

4.12 Drugs and dressings

Drugs, dressings and medicines, except where provided as an integral part of **in-patient** or **day-patient** treatment.

4.13 Excluded medical conditions

Medical conditions which are pre-existing and have been notified by **us** as an exclusion, or any **related medical condition** (refer to 1.15 Exclusions).

4.14 Experimental treatment and drugs

Treatment whose safety and efficacy, in the opinion of **our** medical advisor, is unproven based on current and established medical practice in the **UK**.

4.15 Eye treatment

Surgery or **treatment** where the sole purpose is to correct short (myopia), or long (hypermetropia) sightedness, astigmatism or any other refractive error.

4.16 Gender re-assignment

Surgical or medical **treatment** in connection with, or is in any way related to, gender re-assignment whether or not this is for psychological reasons.

4.17 General Practitioner (GP) services

General Practitioner services, or services from any person who is acting in such a capacity, except for a contribution towards the cost of **your GP** completing a claim form.

4.18 HIV/AIDS

Any investigation, test or **treatment** which is directly or indirectly related to Human Immunodeficiency Virus (HIV) and/or any HIV related illness including Acquired Immune Deficiency Syndrome (AIDS) and/or mutant derivatives or variations however caused unless contracted during a documented police duty related incident.

4.19 HRT

Hormone Replacement Therapy except in cases where the **member** has a total hysterectomy and bilateral oophorectomy operation, when benefit will be paid for up to two implants.

4.20 Implantable electronic devices

Monitoring of any implanted devices e.g. cardiac pacemakers, internal defibrillators and nerve stimulators after insertion, including adjustments and replacement batteries/devices.

4.21 Infertility

Treatment in any way related to infertility or to any form of assisted reproduction including any investigations into the causes of infertility.

4.22 Learning difficulties and behavioural/developmental problems

Treatment related to learning difficulties such as dyslexia or behavioural problems such as Attention Deficit Disorder (ADD) or developmental problems such as shortness of stature or delayed speech.

4.23 Medical reports

Charges in obtaining medical reports or for the completion of claim forms.

4.24 Non medical treatment and additional care for domestic reasons

Accommodation or **treatment** received in a health hydro, nature clinic or similar establishment even if the establishment is registered as a private **hospital**.

A residential stay in **hospital** wholly or partly for domestic reasons and which is not directly related to the **treatment** of a **medical condition**.

4.25 Nursing at home

Nursing at home arranged wholly or partly for domestic reasons and which is not directly related to the **treatment** of an **acute medical condition**.

4.26 Obesity

Surgical or medical **treatment** in connection with, or is in any way related to obesity or weight problems.

4.27 Outside of membership

Treatment received after the day you leave the **Plan** regardless of whether the **treatment** has been authorised.

4.28 Overseas treatment

Treatment received outside the **United Kingdom**.

4.29 Physical aids and devices

Glasses, contact lenses, hearing aids, false teeth, oral appliances, for example a gumshield, and orthotics, for example insoles.

4.30 Pregnancy and childbirth

Treatment arising from pregnancy and childbirth, including contraception, sterilisation or termination of pregnancy and any **related medical condition** except for:

- a) **Treatment** required for an **acute medical condition** that requires hospitalisation or an obstetric procedure recognised by **us** and which arises from and during the antenatal stages of pregnancy before the onset of labour.
- b) **Treatment**, including caesarean section, required for a **medical condition** that necessitates a specific obstetric **surgical procedure** arising from and during childbirth.

4.31 Preventative treatment

- a) **Preventative treatment**, for example, sight tests, regular monitoring, consultations, check-ups, examinations or tests to assess **your** state of health, screening and follow up appointments.
- b) Preventative surgery or medical **treatment** to prevent the occurrence of a specific **medical condition**.

4.32 Psychiatric conditions

Treatment of psychiatric conditions.

4.33 Self-inflicted illness and injury

Treatment required directly or indirectly as a result of self-inflicted illness or injury, including **treatment** required as a result of attempted suicide.

4.34 Sexually transmitted infection/disease

Any **diagnostic test** or **treatment** which is directly or indirectly related to a sexually transmitted infection or disease.

4.35 Surgical appliances and prostheses

Prostheses and surgical or dental appliances except when they are used as an integral part of a **surgical procedure** and when, generally but not always, they are implanted within the body for **treatment** purposes.

4.36 Transplants

Treatment involving

- a) Donor or transplantation operations or **treatment** associated with such operations other than corneal or skin grafting, coronary artery bypass grafts or mosaicoplasty.
- b) Autologous plasmapheresis, transplants of bone marrow or stem cells, autologous blood transfusions or similar procedures.

5. Claims procedure

5.1 If **you** need **treatment** funded by the **Plan**, **you** must notify **us** about all **treatment** before it occurs. **We** will confirm whether the proposed **treatment** is eligible under **your Plan**.

5.2 If **you** do not notify **us** about any **treatment**, the **Plan** may not pay the costs of that **treatment** or **you** will need to pay an additional member contribution on **your** claim.

5.3 If **you** are unable to obtain **authorisation** for **treatment** because it is an emergency **you** must notify **us** as soon as possible after the event. **Your GP** must be kept informed of **your** circumstances and to enable them to support **your** claim in retrospect.

5.4 **You** must submit a completed claim form, if we ask for one, and supporting invoices within six months of the **treatment** being received.

5.5 The **administrator** may require a medical report to be submitted, at **your** expense, in respect of any claim **you** make and may appoint, at their expense, an independent medical examiner.

5.6 **You** must advise the **administrator** if the cost of **treatment** is covered under any other medical expense **Plan** or by a third party. The **Trustees** reserve the right to pursue an alternative medical expense **Plan** or third party in the name of the **member** to recover these costs. If the **Trustees** choose to do this, the **member** must provide all reasonable assistance to the **Trustees** and account to the **Trustees** for any amount recovered.

5.7 The **administrator** will pay benefit in pounds sterling. Claims for benefits submitted in other currencies will be converted to pounds sterling at the exchange rate prevailing at the date of settlement of the claim.

5.8 **We** can pay any benefit due directly to the healthcare provider, to **you** or to a legally appointed representative.

Please read 'How to use your Healthcare Plan' on page 2. This details the steps you should take when making a claim.

6. Summary of benefits

You can only claim benefits for **treatment** detailed in the **table of benefits**. The **treatment** must take place whilst the **Plan** is in effect.

7. Changes to benefits

The **Trustees** may change the benefits under the **Plan** and the terms and conditions under which **you** and **your dependants** are entitled to them. Following a change, claims for **treatment** will be assessed according to the updated benefits. This may mean that the **Plan** might not pay for **treatment** that falls within the **table of benefits** set out in this handbook or payment may be subject to additional or different conditions. The **Plan** will pay for **treatment** which **we** have already provided **authorisation** for before the change, subject to the **table of benefits** and terms set out in this handbook.

How information we hold about you will be used

We will hold and use information relating to **you**. This information may include medical information. **We** call this information personal data.

The main purpose for which **we** hold and use personal data is to enable **us** to administer the benefits under the **Healthcare Plan**. Other purposes which **we** use personal data for are to identify, analyse and calculate **Plan** risks and costs, for statistical purposes, for reporting to the **Trustees** and the employer, to improve **our** services to **you** and **our** customers generally, to comply with legal obligations which **we** are subject to, to protect **our** interests and for fraud detection and prevention.

We may receive and share personal data with persons appointed by **you** or who provide a service to **you**, for example your **GP** and other healthcare providers.

We may provide **your** personal data to persons appointed by the **Trustees** or the employer to enable them to obtain quotes for the provision of administration services and other healthcare arrangements, including insurance. **We** may also provide **your** personal data to other **Plan Administrators** or to insurers who are appointed by the **Trustees** or the employer.

We may provide personal data to persons who provide services to **us**, including companies operating outside of the United Kingdom and to persons engaged in fraud prevention.

We operate strict procedures to ensure that personal data is kept secure.

You have the right to see personal data which is held by **us**. There may be a charge if **you** want to do this.

If **you** have any questions or concerns about the personal data **we** hold and how **we** use it please call our helpline on 0800 980 7419. **Your** calls may be recorded and monitored for training and quality assurance purposes. Alternatively, please write to:

The Data Protection Officer
Simplyhealth
Hambleden House
Waterloo Court
Andover
Hampshire
SP10 1LQ

Complaints

We have every reason to believe that **you** will be totally satisfied with **your Healthcare Plan**.

However, if **you** have cause for concern relating to **your Healthcare Plan** or **our** service, please write quoting **your** full name and **your** company name, together with full details of **your** complaint, to:

The Customer Services Manager
Simplyhealth
James Tudor House
90 Victoria Street
Bristol BS1 6GH
Fax: 0800 980 8540

Simplyhealth
James Tudor House
90 Victoria Street
Bristol BS1 6GH

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