

Insurance Product Information Document



UK Healthcare is the trading name of Bolton & District Hospital Saturday Council which is an Appointed Representative of Westfield Contributory Health Scheme Ltd (company number 303523) the insurer of your scheme and is registered in England and Wales. Additionally Westfield Contributory Health Scheme Ltd is authorised by the Prudential Regulation Authority (PRA) and regulated by the Financial Conduct Authority (FCA) and the Prudential Regulation Authority. Details of this registration can be found by accessing the Financial Services Register online at either the PRA or FCA websites or by contacting the PRA on 020 7601 4878 or the FCA on 0800 111 6768. The financial services registration number is 202609.

Company: Westfield Contributory Health Scheme Ltd

Product: Corporate Health Cashplan

Full details of the pre-contractual and contractual information on this product are detailed in the Terms & Conditions with the policy document

What is this type of insurance?

[Routine Healthcare Insurance]



What is insured?

- ✓ A health cash plan provides cover for routine healthcare. This includes new glasses, dental treatment, physiotherapy payments etc. In addition, payments for stays in hospital are covered. For a full list of what is covered please refer to the benefit table.
- ✓ These payments are based on the amount of benefit available on the level of cover selected by you coupled with the reimbursement rate for that benefit, please refer to the benefit table.
- ✓ The plan guide details the particular benefits and claims limits.
- ✓ The plan also includes a range of services designed to help support your overall health and wellbeing.



What is not insured?

- ✗ Payments for more than the benefit balance you have available, detailed in your benefit table up to your maximum allowance, for a range of everyday healthcare expenses
- ✗ For a full description of what is not covered please refer to your terms and conditions



Are there any restrictions on cover?

- ! You must be aged 18-70 to apply for cover or to upgrade your cover
- ! Claims must be received within 13 weeks of the date of each payment made for treatment, goods or services provided by a practitioner, within 13 weeks of the date that the patient is discharged as an in-patient or attends for day surgery
- ! You must live in the UK
- ! Dependent children are covered up to their 24th birthday (as long as they remain in full time education)



Where am I covered?

- ✓ Claims can be submitted if you are temporarily outside of the UK (up to 28 days). You must be resident in the UK.



What are my obligations?

- Premium payments must be made when due
- Update us with any change in your contact details
- Claims must be received within 13 weeks of the treatment date
- Claim form must be completed and submitted with supporting information required such as receipts or proof of a hospital stay



When and how do I pay?

- Premiums are paid monthly.
- Premiums are paid from your salary via your employer or paid by your bank account via direct debit, depending on the payment method agreed for your plan.



When does the cover start and end?

- Cover starts from the date stated on your welcome letter. This is a monthly renewable contract.
- Cover ends when
 - You cancel your cover
 - We cancel your cover
 - We don't receive premiums



How do I cancel the contract?

- To cancel your policy please contact our Customer Service Team on 01204 522775, email us or write to us at our address.
- If we receive notice that you wish to cancel - we require one month's notice in writing. We will not pay a claim for any benefit beyond the date that you have paid up to, which will be one month following your final direct debit or salary deduction unless your salary deduction is on a weekly basis when it will be one week following your final salary deduction.