# Insurance Product Information Document

## Company: Westfield Health

UK Healthcare is the trading name of Bolton & District Hospital Saturday Council which is an Appointed Representative of Westfield Contributory Health Scheme Ltd, the insurer of the scheme. Westfield Contributory Health Scheme Ltd is registered in England & Wales company number 303523 and is authorised by Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. The financial services registration number is 202609

## Product: Senior Health Cash Plan

This document provides a summary of cover only, full details of the pre-contractual and contractual information on this product are detailed in the Terms & Conditions in the plan guide.

### What is this type of insurance

This product provides reimbursement for everyday health needs up to a maximum allowance for each benefit.

### What is insured?

This cash plan has three levels of cover. An individual over the age of 50 can take out a personal policy. Additional adults can be added and each benefit has an annual limit we will pay up to, for each person covered. The table of benefits will provide you with more information.

- ✓ **Optical** - the annual limits payable for this benefit range from £50 for level one to £150 for level three. We pay 100% of your receipt up to the annual limit.
- ✓ **Dental** - the annual limits payable for this benefit range from £30 for level one to £90 for level three. We pay 100% of your receipt up to the annual limit.
- ✓ **Wellbeing Treatments (Physiotherapy, Acupuncture, Chiropractic, Osteopathy)** - the annual limits payable for this benefit range from £250 for level one to £450 for level three. We pay 100% of your receipt up to the annual limit although payments are capped at £20 per session.
- ✓ **Special Consultation and Diagnostics** - the annual limits payable for this benefit range from £60 for level one to £175 for level three. We pay 100% of your receipt up to the annual limit.
- ✓ **Chiropody** - the annual limits payable for this benefit range from £110 for level two to £350 for level three. We pay 100% of your receipt up to the annual limit. This benefit is not available on level 1.
- ✓ **Hospital Benefit** – payments for each day or night you are admitted, up to a maximum of 25 days/nights each policy year. The amounts payable for this benefit range from £20 per day/night for level one to £75 for level four.
- ✓ **Other benefits** – reimbursements or payments for for Hospice stays and Benevolent Grants.
- ✓ The plan also includes a range of services designed to help support your overall health and wellbeing. It provides as standard 24/7 access to a counsellor and team and access to gym discounts, access to an exclusive rewards website.
- ✓ The benefits table provides full details of the benefits and claims limits.

### What is not insured?

- ✗ Pre-existing medical conditions except on Optical, Dental and some services
- ✗ 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
- ✗ Treatment carried out before the start date of the policy
- ✗ Treatment by someone who is not on the appropriate practitioner register

### Are there any restrictions on cover?

- ! You must be aged over 50 to apply for cover or to upgrade your cover
- ! You must live in the UK
- ! Qualifying periods apply to most benefits
- ! There are 1 year benefit period limits on most benefits

### Where am I covered?

- ✓ Some 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?

You must

- Abide by the terms and conditions and ensure any information you provide is complete and accurate
- Pay premiums when they are due
- Submit claims within 26 weeks of treatment and include supporting information such as receipts or proof of a hospital stay or within 26 weeks of the child's birth or adoption
- Update us if any personal or contact information changes

### When and how do I pay?

- Premiums are paid monthly.
- Voluntary 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 and will renew automatically each month until it is cancelled or you allow it to lapse.
- 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 Care 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.
- You have 14 days from the date you receive your membership certificate to change your mind. Providing a claim has not been made we will refund your premium.