

Private medical insurance

Insurance Product Information Document



Company: AXA PPP healthcare Limited

Product: PHC Healthcover4life Plan 4

Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority with registered number 202947. Registered address 5 Old Broad Street London EC2N 1AD until 31 March 2021, and thereafter 20 Gracechurch Street, London EC3V 0BG.

The information provided in this document is a summary of the key features and exclusions of the plan and does not form part of the contract between us. Complete pre-contract and contractual information about the product will be provided in your plan documents.

What is this type of insurance?

Private medical insurance provides cover for the private treatment of new acute medical conditions that arise after joining the plan.



What is insured?

In-patient and day-patient treatment

- ✓ Private hospital and day patient unit charges paid in full at a facility in our Directory of Hospitals.
- ✓ Specialist fees – no yearly limit.
- ✓ Hospital accommodation for one parent while their child is receiving private treatment - paid in full.
- ✓ Costs towards a close relative or friend to stay in a hotel nearby when a member is having private treatment - up to £100 a night up to £500 a year.

Out-patient treatment

- ✓ Surgery – no yearly limit
- ✓ CT, MRI and PET scans paid in full at a hospital or scanning centre in our Directory of Hospitals, when your specialist refers you.
- ✓ Specialist consultations. Up to two per person per year.
- ✓ Physiotherapy treatment - up to 10 sessions per person per year and up to 10 session per person per year for treatment with chiropractors, osteopaths, acupuncturists and homeopaths – paid up to a combined limit of £500 per person per year
- ✓ Provision of external prosthesis – up to £5,000 a year.

Other benefits

- ✓ Nurse to give chemotherapy or antibiotics by intravenous drip at home which would otherwise have required admission as an in-patient or day-patient
- ✓ Expert Help. Direct telephone access to our healthcare experts for you and your family.
- ✓ Working Body – for muscle, bone or joint pain, members age 18 or over can speak to a physiotherapist over the phone without the need to see a GP first.
- ✓ Fast Track Appointments service can help the member find a suitable specialist and make an appointment.



What is not insured?

- ✗ Treatment of medical conditions that you had, or had symptoms of before joining.
- ✗ Treatment of ongoing, recurrent and long-term conditions (chronic conditions).
- ✗ Pregnancy and childbirth.
- ✗ Any general dental procedures.
- ✗ Treatment of psychiatric illness.
- ✗ Fees for services that would normally be carried out by a GP practice, dentist or optician.



Are there any restrictions on cover?

- ! If there is an excess on the plan we will take the excess off the amount covered by the plan for the first claim for each person per membership year.
- ! Working Body is only available to members age 18 or over.
- ! Treatment must be received at a facility that is in our Directory of Hospitals.
- ! Cancer treatment.

- ✓ AXA Doctor at Hand service. Access to telephone or video consultations with a GP at the AXA Doctor at Hand service.



Where am I covered?

- ✓ Cover is provided for private medical treatment received in the United Kingdom.



What are my obligations?

- You must give us complete and accurate answers to any questions we may ask.
- If anything changes between the time the group agreed to enter into the group insurance contract and the start date you must contact us.
- The premium must be paid on time.
- You must meet the terms set out in the group insurance contract.



When and how do I pay?

The group premium can be paid yearly by Direct Debit, cheque or bank transfer or monthly or quarterly by Direct Debit.



When does the cover start and end?

The group policy will start on the date shown on the certificate of insurance and is in place for one year



How do I cancel the contract?

The group insurance contract can be cancelled by writing to or calling us within the first 14 days after the start or renewal date. If this is done, the group will receive a refund of the premium that has been paid provided that no claims have been paid in that time. If the group insurance contract is not cancelled within this time, it will continue so long as the group premium continues to be paid.