

# Yacht Havens Ltd - Group Private Medical Insurance Scheme

## Background

Yacht Havens Ltd provide a Private Medical Insurance scheme for eligible employees (entry point at 1<sup>st</sup> September each year). This announcement is designed to provide some basic information regarding the Private Medical Insurance scheme and the valuable benefits it provides.

## Who is eligible and how do I join?

All employees qualify for membership of the private medical insurance scheme. Your company contact for the scheme is Helen Grew whom is responsible for looking after the policy alongside our brokers: Towergate.

Please note that as soon as you leave employment of the company your private medical insurance benefit will cease on that date, even if you are mid-treatment schedule. However if you require ongoing cover this can be arranged through Towergate

Employee Benefits on a personal cover basis.

Should you wish to now be included within the cover you will have until the end of September to inform Helen Grew of this request, alternatively your next available opportunity to enter the scheme will not be until September next year.

## Which insurer is providing this benefit?

AXA-PPP Healthcare have been selected to provide the cover, AXA-PPP cover nearly two million members worldwide, including over 35,000 businesses in the UK. AXA-PPP's experience of providing access to healthcare for businesses means they can offer you the expertise, understanding and excellent customer service you expect from a global provider.

## What does Private Medical Insurance provide?

The cover will provide you with speedy access to diagnosis and prompt access to the latest treatments, drugs and medical technology. When you're ill, waiting for treatment or a consultation can mean more worry, more time off and a struggle to give your work the attention it demands. VIP cover can help you get back to work faster by giving you speedy access to private hospitals, specialists and clinicians.

Convenient appointments that fit around work with over 250 hospitals and scanning centres in AXA-PPP's directory and around 37,000 recognised specialists, we make sure you and your employees are able to choose a convenient time and location for your appointment.

Quality private health cover to help get you back to work quickly. Only hospitals and clinics that have met our selection criteria for their quality and range of services make it on to our network of providers, so you can expect quality healthcare.

Comfortable surroundings, AXA-PPP think it makes sense that you should get medical treatment where you can feel relaxed and comfortable. For example, if you have to stay in hospital you can usually expect an en suite private room with TV as well as a choice of gourmet meals.

## What exact benefits are provided?

Below are the details for the benefits of cover, noting that you would be offered 'Cover Level Two':

Benefits table for VIP		
Benefits	Cover level two (amount payable)	Cover level one (amount payable)
<b>In-patient &amp; day-patient treatment</b>		
1. <b>Private hospital and day-patient unit charges.</b> Including charges for accommodation, <b>diagnostic tests</b> , operating theatre charges, nursing care, drugs and dressings, physiotherapy, and surgical appliances used by the <b>specialist</b> during surgery.	Paid in full at a <b>private hospital or day-patient unit</b> listed in the <b>Directory of Hospitals</b> .	Paid in full at a <b>private hospital or day-patient unit</b> listed in the <b>Directory of Hospitals</b> and paid up to the normal daily rates for a private hospital or <b>day-patient unit</b> not listed in the <b>Directory of Hospitals</b> .
For more information on the above please see:		Page 43
2. Out of directory cash benefit. This benefit is payable if you receive private <b>in-patient</b> or <b>day-patient treatment</b> at a hospital or <b>day-patient unit</b> not listed in the <b>Directory of Hospitals</b> .	£100 each day for <b>day-patient treatment</b> .  £100 each night for <b>in-patient treatment</b> .	Not applicable.
For more information on the above please see:		Page 43
3. <b>Specialists' fees</b> (Surgeons', anaesthetists' and physicians').	No annual maximum.	
For more information on the above please see:		Page 43

## Benefits table for VIP

Benefits	Cover level two (amount payable)	Cover level one (amount payable)
4. <b>In-patient consultations.</b> Benefit for a consultation with a second <b>specialist</b> arranged by the treating <b>specialist</b> .	No annual maximum.	
For more information on the above please see: Page 43		
5. <b>Parent accommodation.</b> This benefit is for the cost of one parent staying in hospital with a child under 16 years old while the child is receiving <b>eligible private treatment</b> . The child must be covered by the policy and the benefit is paid from the child's benefits.	Paid in full.	
<b>Out-patient treatment</b>		
6. <b>Surgical procedures.</b>	No annual maximum.	
For more information on the above please see: Page 33		
7. <b>Specialist consultations.</b>	No annual maximum.	
For more information on the above please see: Page 43		
8. <b>Diagnostic tests on specialist referral.</b>	No annual maximum.	
For more information on the above please see: Page 43		
9. <b>Practitioner charges.</b> 10. <b>Therapist, acupuncturist and homeopath treatment charges.</b>	No annual maximum. However we will only pay for <b>therapist, acupuncturist and/or homeopath treatment</b> in any combination, up to an overall maximum of ten sessions a <b>year</b> under referral by your GP or, for therapist <b>treatment</b> , our Working Body team.	No annual maximum. However we will only pay for <b>therapist, acupuncturist and/or homeopath treatment</b> in any combination, up to an overall maximum of 20 sessions a <b>year</b> under referral by your GP or, for therapist <b>treatment</b> , our Working Body team.
For more information on the above please see: Page 43		

## Benefits table for VIP

Benefits	Cover level two (amount payable)	Cover level one (amount payable)
11. <b>Active treatment of cancer</b> , including charges for radiotherapy (the use of radiation to treat <b>cancers</b> ) and chemotherapy (the use of drugs to treat <b>cancers</b> ). This benefit also includes consultations with your <b>cancer treating specialist</b> (such as an oncologist, surgeon, radiotherapist or haematologist) and <b>diagnostic tests</b> that are ordered by your <b>cancer treating specialist</b> .	No annual maximum.	
For more information on the above please see: Page 39		
12. (i) Computerised tomography (CT), magnetic resonance imaging (MRI) and positron emission tomography (PET) on <b>specialist</b> referral.  (ii) Out of directory scanning cash benefit. This benefit is payable for using a CT, MRI or PET facility not listed as a <b>scanning centre</b> in the <b>Directory of Hospitals</b> .	Paid in full in a <b>scanning centre</b> listed in the <b>Directory of Hospitals</b> .  £100	Paid in full in a <b>scanning centre</b> listed in the <b>Directory of Hospitals</b> and paid up to the normal rates for a <b>scanning centre</b> not listed in the <b>Directory of Hospitals</b> .  Not applicable.
For more information on the above please see: Page 43		
Other benefits		
13. Ambulance transport.  When you are receiving private <b>in-patient</b> or <b>day-patient treatment</b> and it is medically necessary to use a road ambulance to transport you between a hospital and another medical facility.	Paid in full.	

## Benefits table for VIP

Benefits	Cover level two (amount payable)	Cover level one (amount payable)
<p>14. Hospital-at-home.</p> <p>This is for <b>treatment</b> provided at home or another clinically appropriate setting for the administration of intravenous chemotherapy for the <b>treatment</b> of <b>cancer</b> or intravenous antibiotics which otherwise would require you to be admitted for <b>in-patient</b> or <b>day-patient</b> <b>treatment</b>.</p>	<p>Paid in full when <b>treatment</b>:</p> <ul style="list-style-type: none"><li>• is provided by a <b>nurse</b> under the control of a <b>fee approved specialist</b>; and</li><li>• is provided through a healthcare services supplier which we have a contract with for such services; and</li><li>• has been agreed by us before the <b>treatment</b> begins.</li></ul>	
<p>15. NHS cash benefit.</p> <p>This benefit is paid for each night you receive <b>free treatment</b> under the NHS and only if:</p> <p>(i) you are admitted for <b>in-patient treatment</b> before midnight</p> <p>(ii) the <b>treatment</b> you receive under the NHS would have been <b>eligible</b> for benefit privately under this <b>policy</b>.</p> <p>There is no requirement for private <b>treatment</b> to have preceded any period in an NHS Intensive Therapy Unit or NHS Intensive Care Unit.</p>	<p>£100 a night up to £5,000 a year.</p>	
<p>16. <b>Day-patient</b> and <b>out-patient</b> NHS radiotherapy and chemotherapy cash benefit. This benefit is paid for <b>day-patient</b> or <b>out-patient</b> radiotherapy or chemotherapy you receive free under the NHS for the <b>treatment</b> of <b>cancer</b> and only if the <b>treatment</b> you receive under the NHS would have been <b>eligible</b> for benefit privately under this <b>policy</b>.</p>	<p>£50 a day up to £5,000 a year.</p>	
<p>For more information on the above please see:</p>		
<p>17. Childbirth benefit.</p> <p>We will pay this cash benefit for each birth occurring after one of the parents named on the birth certificate has been covered by this <b>policy</b> for 10 consecutive months or more.</p>	<p>£150</p>	

Benefits table for VIP		
Benefits	Cover level two (amount payable)	Cover level one (amount payable)
18. Travel Cover.	Optional.	
For more information on the above please see:		Page 47
19. Accidental Death Cover.	Not applicable.	£15,000.
For more information on the above please see:		Page 49
20. Expert Help Direct access to healthcare experts.	Included.	
For more information on the above please see:		Page 51
21. Additional expenses incurred to support you whilst you are undergoing <b>active treatment of cancer</b> .  Purchase of wigs: Provision of external prostheses:	Up to £150 per year. Up to £5,000 per year.	
For more information on the above please see:		Page 39
22. Hospice donation. This charitable donation is paid for each night you receive end of life care related to <b>cancer</b> in a registered hospice or hospice at home	£100 per night.	
For more information on the above please see:		Page 39

### Am I covered for past conditions?

A two year moratorium clause will apply to all newly insured persons (members with previous cover will retain their underwriting). If you have experienced symptoms or been treated for a medical condition in the last five years, they'll only be covered for that condition after:

- You've been covered by AXA-PPP for two consecutive years (this is the moratorium period)
- You've been completely free of any form of treatment, investigations, medical advice, drugs or medicines or special diets relating to that condition for a consecutive one-year period

### What happens about new conditions?

With all four types of underwriting, new conditions that arise after an employee joins will be covered for eligible treatment straight away.

### Typically what isn't covered?

AXA-PPP Healthcare does not cover the costs of recurrent, continuing or long-term treatment of chronic conditions. This section gives more information on what we mean by a chronic condition.

### *What is a chronic condition?*

As with most types of insurance, medical insurance is designed to cover claims following unexpected events. It isn't intended to cover claims for predictable events.

A chronic condition is a disease, illness or injury that has at least one 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 rehabilitation or for the person with condition 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.

What if a chronic condition gets worse?

If a chronic condition gets worse or flares-up due to an acute condition, we'll pay for treatment to bring the chronic condition quickly back to its controlled state. We'll write to tell the person with the condition when their treatment for a medical condition is no longer covered.

### **How do I go about making a claim?**

In general, the first step to making a claim is to receive a referral from your GP, it is at this point that you are able to contact AXA-PPP and pre-authorise your consultation / diagnosis / treatment plan. AXA-PPP's claims telephone number is 0800 364 524 and you should contact them to authorise your claim and they will explain the claims steps further with you from this point.

Please however be aware that if the claim relates to a musculo-skeletal issue then there is no requirement to visit your GP and you can contact AXA-PPP Healthcare straight away for assistance.

### **Is there an excess on the policy?**

We are pleased to advise that there is no excess on the policy.

### **Notes**

This document provides a summary of the main provisions of the Yacht Havens Ltd Private Medical Insurance Scheme. It is not intended to be exhaustive and the wording of the policy document prevails in the event of any discrepancy.

This document does not confer any contractual rights on you as a member of the Private Medical Insurance Scheme. The claimant can refer any dispute over claims to an independent ombudsman.

The Company reserves the right to amend or discontinue the Private Medical Insurance Scheme at any time. Any amendments will be communicated to you at the appropriate time.