

AXA Health Private Medical Insurance

Yacht Havens Ltd provide a Private Medical Insurance scheme for eligible employees (entry point at 1st 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 Employee Benefits.

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 Health have been selected to provide the cover, AXA Health cover nearly two million members worldwide, including over 35,000 businesses in the UK. AXA Health'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. Business Health 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 Health'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 Health 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 ensuite private room with TV as well as a choice of gourmet meals.

Please see below for a full list of the benefits provided.

Treatment including Comprehensive Cancer Cover

- In-patient hospital costs including surgery, diagnostic tests, drugs and dressings and accommodation.
- Specialist and anaesthetist fees if you have treatment as an in-patient or day-patient.
- Out-patient CT, MRI and PET scans on specialist referral.
- Out-patient surgery.
- Radiotherapy and chemotherapy.
- Hospital accommodation for one parent while a child, covered by your plan and having treatment covered by it, is in hospital.
- Up to £100 a night, up to £500 a year towards hotel accommodation for one close relative or friend while a member is in hospital having treatment covered by the plan.
- Ambulance transport when you're having treatment covered by the plan and it's medically necessary to transfer you between two private facilities.

Full Out-patient

- No yearly limit for specialist consultations, including diagnostic tests upon specialist referral.
- Fees for practitioners including nurses, dieticians, orthoptists, speech therapists and audiologists.

Therapies

- No yearly limit for out-patient physiotherapy, acupuncture, osteopathy or chiropractic treatment.
- Up to overall maximum of ten sessions a year on GP referral. Extra sessions if your specialist refers you.

Mental health

- Face to face, email or phone counselling sessions through our mental health assessment and support service (available to members aged 18 and over).
- Psychiatric treatment as an in-patient or day-patient, including specialist fees.
- Out-patient fees for psychologists and cognitive behavioural therapists on specialist referral.

Dental & Optical

- 80% of your dentist's fees up to £400 a year.
- 80% of the cost of prescribed glasses and contact lenses up to £200 a year.
- Up to £25 a year for an eye test.

Primary care

- 24/7 Medical Helpline
- NHS Cash benefit £100 per night up to £5,000 per year
- NHS Cash benefit £50 per day/treatment for radiotherapy & chemotherapy up to £5,000 per year
- Stronger minds- mental health pathway
- Working body- musculoskeletal pathway
- Digital GP access through doctor care anywhere

Policy excess

There is no excess applied to this policy.

Contact details

- Questions about your plan: 0800 587 0955 option 4
- Claims: 0800 317 810
- Website: <https://www.axahealth.co.uk>

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 Health 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 this type 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 Health and pre-authorise your consultation / diagnosis / treatment plan. AXA Health's claims telephone number is 0800 317 810 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 musculoskeletal issue then there is no requirement to visit your GP and you can contact AXA Health Healthcare straight away for assistance.