

Benefits At A Glance - Business Healthcare

Some important facts about our Private Health Insurance policies are summarised over the next few pages. This summary of benefits does not describe a full terms, conditions and exclusions of this policy, which can be found in the policy documents.

In-Patient Benefits	BUSINESS PRIME*	MODULE 1	MODULE 2	BUSINESS ELITE
Accommodation, Nursing Care, Surgeon & Anaesthetist Fees	✓	✓	✓	✓
Theatre Costs, Intensive Care Costs, Drugs, Dressings & Consumables	✓	✓	✓	✓
Diagnostics including MRI & CT Scans	✓	✓	✓	✓
Physiotherapy	✓	✓	✓	✓
Oro-surgical Operations/Procedures	✓	✓	✓	✓
Treatment for Cardiovascular Conditions	✓	✓	✓	✓
Parent Accompanying Child (under 18)	✓	✓	✓	✓
Treatment for Cancer				
Treatment for Cancer whether or not relating to an in-patient admission. Includes Radiotherapy, Chemotherapy, Post Cancer Services, Advice on Cancer Treatment, Artificial Feeding, Speech Therapy & Monitoring	✓	✓	✓	✓
Cosmetic or Aesthetic Treatment				
Anti-Cancer Drugs, Preventative Treatment, Biological Therapies, Genetic Testing, Bone Strengthening Drugs & Bone Marrow or Stem Cell Transplants	✓	✓	✓	✓
External Prosthesis relating to a claim for cancer		£5,000	£5,000	£5,000
Experimental Drugs as part of an ethics committee approved randomised clinical trial pre agreed with us			£20,000	£20,000
Hospice Care (£75 donation per night) For Policy Lifetime	£7,500	£7,500	£7,500	£7,500
Palliative Treatment (and/or End of Life Care) For Policy Lifetime	✓	✓	✓	✓
Out-Patient Benefits				
Initial consultation & specialist fees including diagnostics & initial MRI & CT Scans	✓ (Relating to an in-patient admission)	£1,500	✓	✓
Subsequent consultation & specialist fees, diagnostics including MRI & CT Scans				
Physiotherapy & Complementary Medicine	£500 (Relating to an in-patient admission)	£500	£1,500	£2,000
Treatment for Cardiovascular Conditions	✓	✓	✓	✓
Out-patient Mental Health		£1,000	£1,000	£2,000
Maternity				
Complications of Pregnancy (defined conditions only)		✓	✓	✓
Maternity Cash Benefit			£150	£250
Private Maternity				£5,000
Dental				
Routine Consultations & Treatment, including Emergency Accident/Injury Benefit				£400
Optical				
Consultations & Eye Tests				£250
Spectacles & Contact Lenses				£250
Audiology				
Hearing Tests & Prescription Hearing Aids				£250
Cash Benefits				
NHS Cash Benefit (£250 per night/up to 30 nights)	£7,500	£7,500	£7,500	£7,500
Life Cash Benefit		£2,000	£2,000	£3,000
Personal Accident Cash Benefit			£1,000 per accident	£2,000 per accident
Temporary Disablement Cash Benefit			£100 per month for up to 6 months	£100 per month for up to 6 months
Critical Illness Cash Benefit		£2,000	£2,000	£2,000
Cover for Boarding Pets Cash Benefit				£250
Other Benefits				
Health & Wellbeing/Employee Assistance Services and Stress Counselling	✓	✓	✓	✓
24 Hour GP Advice Line/GP Video Consultation Appointments	✓	✓	✓	✓
Home Nursing		✓	✓	✓
Private Ambulance		✓	✓	✓
Prescription Costs				£100
GP Minor Surgery				£500
Private GP Services				£500
Emergency Medical Cover Outside The UK			£100,000	£100,000
Monitoring of a Pre-Cured Eligible Condition			£1,500 during a 24 month period	£2,000 during a 24 month period
Lifestyle Rewards	✓	✓	✓	✓

✓ Full refund subject to any limits or eligibility criteria as detailed in the Policy Document Part 1 – Your Policy General Terms and Conditions and Policy Document Part 2 A – Your Private Health Insurance, which includes your Schedule of Cover.

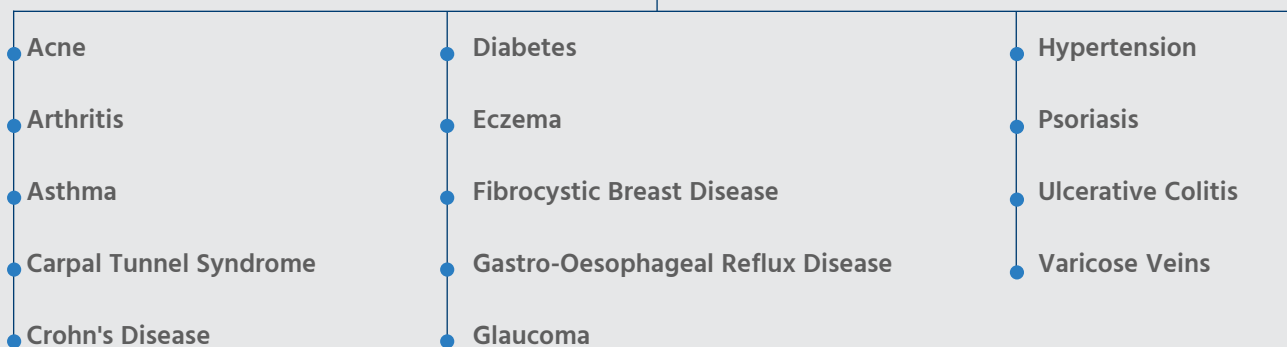
* Business Prime has an annual overall maximum benefit limit of £50,000 per person. **Note:** Unless stated otherwise, any limits shown are per membership year.
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Ways to Enhance your Scheme

You can enhance your scheme by, for example, choosing Module 1 instead of Business Prime or Freedom Hospitals instead of First Choice Hospitals. You should select the level of cover and hospital choice that best suits your needs and budget, but you can also choose to add any of the following options to enhance the benefits available from your healthcare scheme.

Cover for pre-existing conditions

Cover for up to two pre-existing conditions, chosen at outset from the following list of defined conditions:



For an additional premium, you can extend any members' cover for up to two of the pre-defined conditions. The cover is subject to an annual limit of £1,000 which rolls up year on year to a maximum of £10,000 after 10 years, provided cover has been continuous and there have been no claims relating to the pre-existing condition.

This option has helped some people to consider Private Health Insurance for the first time and has caused others with cover elsewhere, to switch to General & Medical.

Cover for In-patient Mental Health

This option gives members cover for both in-patient and day-patient treatment if they are diagnosed with a mental health condition. Full cover is given for up to 28 days followed by up to an additional 12 days on a 50% co-share basis. A 12 month qualifying period may apply and full terms and conditions are given in your relevant policy documents.

Channel Islands Cover

Residence of the Channel Islands can choose this upgrade specifically designed to offer additional benefit to supplement the treatment available to them.

For an additional premium we will cover the services provided by their Channel Islands G.P, including prescription costs, consultations and routine minor surgery. Cover is available for return travel costs to another Bailiwick or the UK, where you require medical treatment unavailable in the Bailiwick of your residency.

The cover will also provide benefit for travel and accommodation costs for parents or a qualified nurse accompanying a child for treatment. Benefit limits will be shown in the Schedule of Cover if this upgrade has been selected.

Enhanced Benefit Option

This discretionary benefit offers enhancements to certain standard limitations on our schemes to better suit your requirements, including:

- 50% increase in limit for Therapies benefit where applicable to the cover chosen.
- We will allow charges from Consultants and Anaesthetists to exceed our published limits for treatment costs from Consultants and Anaesthetists by up to 20%, where necessary.
- We will extend our standard 90 day limit for receipt of invoices after treatment to 120 days.
- We will allow self-referral to a consultant for a consultation without the need to see a GP first.
- Claim 24/7 - there may be times when a claim needs to be authorised for a diagnosis to be undertaken almost immediately, this gives you the ability to pre-authorise an initial claim and then notify us to confirm full authorisation by our underwriters and we will then "reset the clock" enabling you to preauthorise another claim.