

Health Cash Options

Benefits and exclusions



This document contains all of the benefits and exclusions for Health Cash Options from PruHealth. To help make it easier to understand, we've also included the 'Definitions' section.

We have tried to make sure this document is as clear and straightforward as possible by writing the terms in plain English. There are however certain words that have special meaning that we'd like to draw to your attention:

We/us/our – means PruHealth

You/your – means the **insured member** and **insured dependants**. Where the words 'you' or 'your' refer specifically to the **insured member**, we'll say 'you (the **insured member**)'

We have printed the remaining defined words in bold to help you identify them as you read through this document. You'll find a full explanation of each word in the 'Definitions' section.

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Level 2

Level 3

Health Cash Options Level 1

In this section we've set out the rules on paying benefits under your health cash options and the specific exclusions that apply to each benefit. Other exclusions applying to your health cash options are contained within the 'What's not covered' section. All benefits are per insured person unless stated otherwise.

Optical care		
What's covered	We will pay	We will not pay
<p>The fees paid to an optician for</p> <ul style="list-style-type: none"> eyesight tests prescription spectacles and lenses prescription contact lenses prescription sunglasses monthly payment scheme costs for prescription contact lenses <p>We'll pay for a maximum of two eyesight tests per plan year.</p>	<p>up to a maximum of £100 per plan year</p>	<ul style="list-style-type: none"> for the cost of eye tests, spectacles or contact lenses covered by an optical care scheme or for more than our share of any claim where cover is also provided under another insurance plan any interest or credit charges relating to a monthly payment scheme for prescription contact lenses for non-prescribed lenses, spectacles, sunglasses and contact lenses for optical items (e.g. solutions for contact lenses) any fees associated with laser treatment of long/short sight for lenses for cosmetic reasons for repairs to or replacement of spectacles and contact lenses due to accidental damage fees in respect of treatment for medical conditions fitting fees

Health Cash Options – benefits and exclusions

Level 1

Dental care		
What's covered	We will pay	We will not pay
<p>The fees paid to a dental practitioner for</p> <ul style="list-style-type: none"> • routine check-ups • dental treatment • treatment for an accidental dental injury <p>We'll pay for a maximum of two routine check-ups per plan year.</p>	<p>up to a maximum of £100 per plan year</p>	<ul style="list-style-type: none"> • for the cost of check-ups or dental treatment covered by a dental care scheme or for more than our share of any claim where cover is provided by another insurance plan • for cosmetic dentistry, including teeth whitening • for prescription charges, sundry items (e.g. toothbrushes) and missed appointment fees
Physiotherapy and alternative treatments		
What's covered	We will pay	We will not pay
<p>75% of the fees incurred for one or more of the following treatments</p> <ul style="list-style-type: none"> • physiotherapy • acupuncture • chiropractic • homeopathy • osteopathy 	<p>up to a maximum of £350 per plan year</p>	<ul style="list-style-type: none"> • for any fees incurred during the waiting time
Specialist consultation and tests		
What's covered	We will pay	We will not pay
<p>75% of the fees paid to a specialist for a consultation including any tests or investigations undertaken at the same time and as part of that consultation.</p> <p>You must have been referred to the specialist by your GP.</p>	<p>up to a maximum of £250 per plan year</p>	<ul style="list-style-type: none"> • for any fees incurred during the waiting time • treatment charges • for consultations for legal, insurance or employment reasons • for health screening services • for consultations for cosmetic surgery
Maternity/paternity		
What's covered	We will pay	We will not pay
<p>We will pay a cash amount for the birth or adoption of each new child.</p> <p>This benefit will be payable to the insured member only.</p>	<p>£250</p>	<ul style="list-style-type: none"> • for any birth or adoption during the waiting time of 10 months • for claims made by any insured dependant child members

Level 1

Level 2

Level 3

Health Cash Options Level 2

In this section we've set out the rules on paying benefits under your health cash options and the specific exclusions that apply to each benefit. Other exclusions applying to your health cash options are contained within the 'What's not covered' section. All benefits are per insured person unless stated otherwise.

Optical care		
What's covered	We will pay	We will not pay
<p>The fees paid to an optician for</p> <ul style="list-style-type: none"> • eyesight tests • prescription spectacles and lenses • prescription contact lenses • prescription sunglasses • monthly payment scheme costs for prescription contact lenses <p>We'll pay for a maximum of two eyesight tests per plan year.</p>	<p>up to a maximum of £125 per plan year</p>	<ul style="list-style-type: none"> • for the cost of eye tests, spectacles or contact lenses covered by an optical care scheme or for more than our share of any claim where cover is also provided under another insurance plan • any interest or credit charges relating to a monthly payment scheme for prescription contact lenses • for non-prescribed lenses, spectacles, sunglasses and contact lenses • for optical items (e.g. solutions for contact lenses) • any fees associated with laser treatment of long/short sight • for lenses for cosmetic reasons • for repairs to or replacement of spectacles and contact lenses due to accidental damage • fees in respect of treatment for medical conditions • fitting fees

Health Cash Options – benefits and exclusions

Level 2

Dental care		
What's covered	We will pay	We will not pay
<p>The fees paid to a dental practitioner for</p> <ul style="list-style-type: none"> • routine check-ups • dental treatment • treatment for an accidental dental injury <p>We'll pay for a maximum of two routine check-ups per plan year.</p>	<p>up to a maximum of £125 per plan year</p>	<ul style="list-style-type: none"> • for the cost of check-ups or dental treatment covered by a dental care scheme or for more than our share of any claim where cover is provided by another insurance plan • for cosmetic dentistry, including teeth whitening • for prescription charges, sundry items (e.g. toothbrushes) and missed appointment fees
Physiotherapy and alternative treatments		
What's covered	We will pay	We will not pay
<p>75% of the fees incurred for one or more of the following treatments</p> <ul style="list-style-type: none"> • physiotherapy • acupuncture • chiropractic • homeopathy • osteopathy 	<p>up to a maximum of £350 per plan year</p>	<ul style="list-style-type: none"> • for any fees incurred during the waiting time
Chiropody		
What's covered	We will pay	We will not pay
<p>75% of the fees paid to a chiropodist for treatment.</p>	<p>up to a maximum of £100 per plan year</p>	<ul style="list-style-type: none"> • for any fees incurred during the waiting time
Specialist consultation and tests		
What's covered	We will pay	We will not pay
<p>75% of the fees paid to a specialist for a consultation including any tests or investigations undertaken at the same time and as part of that consultation.</p> <p>You must have been referred to the specialist by your GP.</p>	<p>up to a maximum of £250 per plan year</p>	<ul style="list-style-type: none"> • for any fees incurred during the waiting time • treatment charges • for consultations for legal, insurance or employment reasons • for health screening services • for consultations for cosmetic surgery
Allergy testing		
What's covered	We will pay	We will not pay
<p>75% of the fees paid to an allergist for allergy testing.</p>	<p>up to a maximum of £100 per plan year</p>	<ul style="list-style-type: none"> • for any fees incurred during the waiting time • treatment charges

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Level 2

Level 3

Hospital in-patient		
What's covered	We will pay	We will not pay
<p>Payable for each night spent in hospital for in-patient treatment.</p>	<p>£30 per night, up to a maximum of 40 nights per plan year</p> <p>The maximum number of nights that may be claimed within any 5 year period is limited to 100 for any insured member or insured dependant, even if there is a break in cover and the plan is rejoined.</p>	<ul style="list-style-type: none"> for any in-patient stay during the waiting time for convalescence care or rehabilitation for the first 10 nights in hospital for pre-natal, birth or post-natal reasons for cosmetic or reconstructive surgery, unless treatment is for a surgical operation to restore an insured person's appearance after an accident or illness

Day care admission		
What's covered	We will pay	We will not pay
<p>Payable for each attendance at a hospital for treatment as a day-patient on the recommendation of a GP or specialist.</p>	<p>£30 per visit, up to a total of 5 attendances per plan year</p>	<ul style="list-style-type: none"> for any admission during the waiting time for cosmetic or reconstructive surgery, unless treatment is for a surgical operation to restore an insured person's appearance after an accident or illness for maternity care for day-patient admission immediately before or after in-patient treatment for which the hospital in-patient benefit is being claimed

Accident admission		
What's covered	We will pay	We will not pay
<p>Payable for each night spent in hospital immediately following an accidental injury.</p>	<p>£30 per night, up to a maximum of 40 nights per plan year</p> <p>If you claim under this benefit, you cannot also claim under the hospital in-patient benefit for the same period of hospitalisation.</p>	<ul style="list-style-type: none"> for convalescence care or rehabilitation for the first 10 nights in hospital for pre-natal, birth or post-natal reasons for cosmetic or reconstructive surgery, unless treatment is for a surgical operation to restore an insured person's appearance after an accident

Health Cash Options – benefits and exclusions

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Maternity/paternity		
What's covered	We will pay	We will not pay
<p>We will pay a cash amount for the birth or adoption of each new child.</p> <p>This benefit will be payable to the insured member only.</p>	£275	<ul style="list-style-type: none"> for any birth or adoption during the waiting time of 10 months for claims made by any insured dependant child members

Hospital parental accommodation		
What's covered	We will pay	We will not pay
<p>Payable for each night you or your insured dependant accompany your child who has been admitted to hospital for treatment as an in-patient.</p> <p>Your child must be under the age of 14 and insured under this plan.</p> <p>This benefit will be payable to the insured member only.</p>	£30 per night, up to a maximum of 15 nights per plan year	<ul style="list-style-type: none"> for any in-patient stay during the waiting time unless this follows an accidental injury

Recuperation grant		
What's covered	We will pay	We will not pay
<p>Payable when a hospital in-patient stay has been for seven consecutive nights or more.</p> <p>We will only pay this benefit once for each insured member or insured dependant in any one plan year.</p>	£75	<ul style="list-style-type: none"> for any in-patient stay during the waiting time

Health screening		
What's covered	We will pay	We will not pay
<p>A cash contribution towards a health screen provided by a recognised provider. The health screen must be pre-authorised by us and paid for in advance by you.</p> <p>We will only pay this benefit once for each insured member or insured dependant in any one plan year.</p>	£75	<ul style="list-style-type: none"> for any health screen that takes place during the waiting time for more than the cost of the health screen if this is less than £75

Health Cash Options – benefits and exclusions

Level 2

Level 1	Personal accident		
Level 2	What's covered	We will pay	We will not pay
Level 3	We will pay the following benefits if an insured member or insured dependant suffers an accidental injury during any one plan year .	up to a maximum of £12,000 per plan year	<ul style="list-style-type: none"> • whilst participating in any sport as a professional • if in active service in any of the Armed Forces • for deliberate exposure to danger, except in an attempt to save a human life • for a breach of the law • for injuries arising from participation in hazardous or dangerous sports, such as mountaineering or rock climbing, hang gliding, parachuting, bungee jumping, pot-holing, racing of any kind, winter sports, underwater activities and flying (except as a fare-paying passenger on a commercial aircraft) • for occupational accidents to workers involved in stunt work, abattoirs, blast furnacing, handling explosives, foundries, underground working, marine engineering, diving, working at heights over 50 feet, working on rigs at sea, quarrying and wharfing
a) death as a result of an accidental injury	£10,000		
b) permanent total disablement	£10,000		
c) complete and permanent loss of sight in one or both eyes	£10,000		
d) permanent total loss of use of one or both hands or feet	£10,000		
e) complete and permanent loss of speech	£10,000		
f) total and incurable paralysis	£10,000		
g) complete and permanent loss of hearing in one ear	£5,000		
h) complete and permanent loss of hearing in both ears	£10,000		
i) loss of a thumb	£1,000		
j) loss of a finger	£500		
k) loss of a big toe	£1,000		
l) loss of any other toe	£500		

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Level 3

Health Cash Options Level 3

In this section we've set out the rules on paying benefits under your health cash options and the specific exclusions that apply to each benefit. Other exclusions applying to your health cash options are contained within the 'What's not covered' section. All benefits are per insured person unless stated otherwise.

Optical care		
What's covered	We will pay	We will not pay
<p>The fees paid to an optician for</p> <ul style="list-style-type: none"> • eyesight tests • prescription spectacles and lenses • prescription contact lenses • prescription sunglasses • monthly payment scheme costs for prescription contact lenses <p>We'll pay for a maximum of two eyesight tests per plan year.</p>	<p>up to a maximum of £150 per plan year</p>	<ul style="list-style-type: none"> • for the cost of eye tests, spectacles or contact lenses covered by an optical care scheme or for more than our share of any claim where cover is also provided under another insurance plan • any interest or credit charges relating to a monthly payment scheme for prescription contact lenses • for non-prescribed lenses, spectacles, sunglasses and contact lenses • for optical items (e.g. solutions for contact lenses) • any fees associated with laser treatment of long/short sight • for lenses for cosmetic reasons • for repairs to or replacement of spectacles and contact lenses due to accidental damage • fees in respect of treatment for medical conditions • fitting fees

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Dental care		
What's covered	We will pay	We will not pay
<p>The fees paid to a dental practitioner for</p> <ul style="list-style-type: none"> • routine check-ups • dental treatment • treatment for an accidental dental injury <p>We'll pay for a maximum of two routine check-ups per plan year.</p>	<p>up to a maximum of £150 per plan year</p>	<ul style="list-style-type: none"> • for the cost of check-ups or dental treatment covered by a dental care scheme or for more than our share of any claim where cover is provided by another insurance plan • for cosmetic dentistry, including teeth whitening • for prescription charges, sundry items (e.g. toothbrushes) and missed appointment fees

Physiotherapy and alternative treatments		
What's covered	We will pay	We will not pay
<p>75% of the fees incurred for one or more of the following treatments</p> <ul style="list-style-type: none"> • physiotherapy • acupuncture • chiropractic • homeopathy • osteopathy 	<p>up to a maximum of £450 per plan year</p>	<ul style="list-style-type: none"> • for any fees incurred during the waiting time

Chiropody		
What's covered	We will pay	We will not pay
<p>75% of the fees paid to a chiropodist for treatment.</p>	<p>up to a maximum of £150 per plan year</p>	<ul style="list-style-type: none"> • for any fees incurred during the waiting time

Specialist consultation and tests		
What's covered	We will pay	We will not pay
<p>75% of the fees paid to a specialist for a consultation including any tests or investigations undertaken at the same time and as part of that consultation.</p> <p>You must have been referred to the specialist by your GP.</p>	<p>up to a maximum of £325 per plan year</p>	<ul style="list-style-type: none"> • for any fees incurred during the waiting time • treatment charges • for consultations for legal, insurance or employment reasons • for health screening services • for consultations for cosmetic surgery

Allergy testing		
What's covered	We will pay	We will not pay
<p>75% of the fees paid to an allergist for allergy testing.</p>	<p>up to a maximum of £150 per plan year</p>	<ul style="list-style-type: none"> • for any fees incurred during the waiting time • treatment charges

Health Cash Options – benefits and exclusions

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Hospital in-patient		
What's covered	We will pay	We will not pay
<p>Payable for each night spent in hospital for in-patient treatment.</p>	<p>£45 per night, up to a maximum of 40 nights per plan year</p> <p>The maximum number of nights that may be claimed within any 5 year period is limited to 100 for any insured member or insured dependant, even if there is a break in cover and the plan is rejoined.</p>	<ul style="list-style-type: none"> for any in-patient stay during the waiting time for convalescence care or rehabilitation for the first 10 nights in hospital for pre-natal, birth or post-natal reasons for cosmetic or reconstructive surgery, unless treatment is for a surgical operation to restore an insured person's appearance after an accident or illness
Day care admission		
What's covered	We will pay	We will not pay
<p>Payable for each attendance at a hospital for treatment as a day-patient on the recommendation of a GP or specialist.</p>	<p>£45 per visit, up to a total of 5 attendances per plan year</p>	<ul style="list-style-type: none"> for any admission during the waiting time for cosmetic or reconstructive surgery, unless treatment is for a surgical operation to restore an insured person's appearance after an accident or illness for maternity care for day-patient admission immediately before or after in-patient treatment for which the hospital in-patient benefit is being claimed
Accident admission		
What's covered	We will pay	We will not pay
<p>Payable for each night spent in hospital immediately following an accidental injury.</p>	<p>£45 per night, up to a maximum of 40 nights per plan year</p> <p>If you claim under this benefit, you cannot also claim under the hospital in-patient benefit for the same period of hospitalisation.</p>	<ul style="list-style-type: none"> for convalescence care or rehabilitation for the first 10 nights in hospital for pre-natal, birth or post-natal reasons for cosmetic or reconstructive surgery, unless treatment is for a surgical operation to restore an insured person's appearance after an accident

Health Cash Options – benefits and exclusions

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Maternity/paternity		
What's covered	We will pay	We will not pay
<p>We will pay a cash amount for the birth or adoption of each new child.</p> <p>This benefit will be payable to the insured member only.</p>	£350	<ul style="list-style-type: none"> for any birth or adoption during the waiting time of 10 months for claims made by any insured dependant child members
Hospital parental accommodation		
What's covered	We will pay	We will not pay
<p>Payable for each night you or your insured dependant accompany your child who has been admitted to hospital for treatment as an in-patient.</p> <p>Your child must be under the age of 14 and insured under this plan.</p> <p>This benefit will be payable to the insured member only.</p>	£45 per night, up to a maximum of 15 nights per plan year	<ul style="list-style-type: none"> for any in-patient stay during the waiting time unless this follows an accidental injury
Recuperation grant		
What's covered	We will pay	We will not pay
<p>Payable when a hospital in-patient stay has been for seven consecutive nights or more.</p> <p>We will only pay this benefit once for each insured member or insured dependant in any one plan year.</p>	£100	<ul style="list-style-type: none"> for any in-patient stay during the waiting time
Health screening		
What's covered	We will pay	We will not pay
<p>A cash contribution towards a health screen provided by a recognised provider. The health screen must be pre-authorised by us and paid for in advance by you.</p> <p>We will only pay this benefit once for each insured member or insured dependant in any one plan year.</p>	£100	<ul style="list-style-type: none"> for any health screen that takes place during the waiting time for more than the cost of the health screen if this is less than £100

Health Cash Options – benefits and exclusions

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Personal accident		
What's covered	We will pay	We will not pay
We will pay the following benefits if an insured member or insured dependant suffers an accidental injury during any one plan year .	up to a maximum of £12,000 per plan year	<ul style="list-style-type: none"> whilst participating in any sport as a professional if in active service in any of the Armed Forces for deliberate exposure to danger, except in an attempt to save a human life for a breach of the law for injuries arising from participation in hazardous or dangerous sports, such as mountaineering or rock climbing, hang gliding, parachuting, bungee jumping, pot-holing, racing of any kind, winter sports, underwater activities and flying (except as a fare-paying passenger on a commercial aircraft) for occupational accidents to workers involved in stunt work, abattoirs, blast furnacing, handling explosives, foundries, underground working, marine engineering, diving, working at heights over 50 feet, working on rigs at sea, quarrying and wharfing
a) death as a result of an accidental injury	£10,000	
b) permanent total disablement	£10,000	
c) complete and permanent loss of sight in one or both eyes	£10,000	
d) permanent total loss of use of one or both hands or feet	£10,000	
e) complete and permanent loss of speech	£10,000	
f) total and incurable paralysis	£10,000	
g) complete and permanent loss of hearing in one ear	£5,000	
h) complete and permanent loss of hearing in both ears	£10,000	
i) loss of a thumb	£1,000	
j) loss of a finger	£500	
k) loss of a big toe	£1,000	
l) loss of any other toe	£500	

Worldwide cover for in-patient treatment		
What's covered	We will pay	We will not pay
Payable for each night an insured person receives hospital in-patient treatment whilst abroad.	<p>£45 per night, up to a maximum of 40 nights per plan year</p> <p>If you claim under this benefit, you cannot also claim under the hospital in-patient or accident admission benefit for the same period of hospitalisation.</p>	<ul style="list-style-type: none"> for any claim incurred during the waiting time for any claim where the trip abroad is more than 30 days duration for convalescence care or rehabilitation for the first 10 nights in hospital for pre-natal, birth or post-natal reasons for cosmetic or reconstructive surgery, unless treatment is for a surgical operation to restore an insured person's appearance after an accident or illness

What's not covered

These are the exclusions that apply to this section of your plan.

We will not pay claims arising from:

- the **treatment** of any medical condition for which in the 12 months immediately before your **cover start date**
 - you received **in-patient** or **day-patient treatment**, or
 - you received advice, medication or **treatment**

until you have been insured with us for 12 consecutive months

(This exclusion is in addition to the one month **waiting period** but does not apply to the dental care, optical care or accident admission benefits).

- the **treatment** of any psychiatric, mental or nervous conditions
- the result of an accident whilst the insured person is driving with more alcohol in the blood than is allowed by law
- extra accommodation costs for going into hospital early or leaving late because of your or your **insured dependant's** domestic circumstances or where there is no required **treatment**
- regular or long-term dialysis in chronic or final kidney failure
- any medical condition which is of an incurable or long-term nature

General exclusions

In addition to the specific exclusions detailed, the following general exclusions apply:

- **treatment** of alcoholism, **drug abuse** or any addiction including the **treatment** of any **related condition** resulting from these
- **treatment** of any self-inflicted illness or injury, or any **treatment** related to them, or **treatment** arising from attempted suicide
- **treatment** of any illness or injury which is medically considered to be linked directly or indirectly with Human Immunodeficiency Virus (HIV) and/or Acquired Immune Deficiency Syndrome (AIDS) and/or any form or variation of HIV or AIDS, however caused
- **treatment** arising from nuclear or chemical contamination, war, invasion, act of foreign enemy, hostilities (whether war is declared or not), civil war, riot, civil disturbance, rebellion, revolution, military force or coup, act of terrorism
- **treatment** received after the period covered by any premium or after the plan has been cancelled
- **treatment** received outside the UK

Definitions

These definitions are shown in bold print throughout this benefits and exclusions document and have the same meaning wherever they appear.

Accidental dental injury

A dental accident is a sudden unforeseen external blow to the face, teeth and jaws which occurs at an identifiable place and time and results in dental injury. Dental injury is an injury to your teeth and gums caused by direct extra-oral impact.

Accidental injury

An injury directly caused by something accidental, outside the body, violent and visible. It does not include sickness, disease or any naturally occurring or deteriorating condition.

Acupuncture

A type of alternative medicine that must be carried out by a member of the British Acupuncture Council, or the Acupuncture Association of Chartered Physiotherapists, or by a medical practitioner who holds a Certificate of Basic Competence issued by the British Medical Acupuncture Society or a Diploma of Medical Acupuncture.

Annual renewal date

The date, 12 months after the **plan start date** and each anniversary after that date.

Chiropractic

A type of alternative medicine that must be carried out by a member of the General Chiropractic Council.

Company

The employer who has agreed with us to operate a scheme for employees, paid for by the employer.

Cover start date

The date on which each insured person's cover starts.

Day-patient

A patient who is admitted to a hospital or day-patient unit because they need a period of medically supervised recovery but does not occupy a bed overnight.

Dental practitioner

A registered licensed **dental practitioner** in general practice.

Dental treatment

Dental procedures undertaken by your **dental practitioner** which are clinically necessary for the maintenance and/or restoration of oral health and are provided in accordance with accepted standards of dental practice.

Diagnostic tests

Investigations, such as x-rays or blood tests, to find or to help find the cause of your symptoms.

Drug abuse

The taking of any drug, substance or solvent unless it was as prescribed by a **GP** or **specialist**.

General practitioner (GP)

A registered licensed medical practitioner in general practice.

Homeopathy

A type of alternative medicine that must be carried out by a member of The Faculty of Homeopathy, Society of Homeopaths or Alliance of Registered Homeopaths.

In-patient

A patient who is admitted to hospital and who occupies a bed overnight or longer, for medical reasons.

Insured dependant

- Your insured husband, wife or partner, who live at the same address as you.
- Your insured children, who must be under the age specified in your certificate of insurance at the **cover start date** and at each **annual renewal date**.

Insured member

Any qualifying employee or person in the **company** whom we accept for cover.

Osteopathy

A type of alternative medicine that must be carried out by a member of the General Osteopathic Council (GOsC).

Permanent total disablement

A mental or physical condition caused by an **accidental injury** which, within two years from the date of the accident, renders you permanently and totally unable to carry out each and every part of your regular occupation and to follow any occupation for which you are reasonably suited by training, education or experience.

If you were not in full-time employment prior to the date of the accident, **permanent total disablement** will mean the total and permanent inability to perform three or more of the following activities unaided:

- dressing and undressing
- washing and bathing
- eating and drinking
- climbing up and down stairs
- walking, or
- general household duties

Physiotherapy

Treatment carried out by a person who is registered with the Health Professions Council (HPC) as a physiotherapist.

Plan start date

The date on which the plan began.

Plan year

A period of 12 months from the **plan start date** or from any **annual renewal date**.

Related condition

Any symptom, disease, illness or injury which reasonable medical opinion considers to be associated with another symptom, disease, illness or injury.

Specialist

A medical practitioner who is fully registered with the General Medical Council, and who is recognised by us in writing. They must either:

- hold or have held a substantive consultant post with the NHS, or hold a Certificate of Completion of Training (CCT) and be registered on the Specialists Register, or
- fulfil the qualification criteria requirements set by the Postgraduate Medical and Educational Training Board (PMETB) and be registered on the Specialists Register.

We reserve the right to withhold or remove recognition of any **specialist**, at our discretion, due to reasons such as fraud or unreasonable charges.

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Treatment

Surgical or medical services (including **diagnostic tests**) that are needed to diagnose, relieve or cure a disease, illness or injury.

Waiting time

The one month which must pass after an insured person's **cover start date** before they can claim for any benefit. **Waiting time** is waived in the event of an **accidental injury** which qualifies for payment under the accident admission benefit and also for claims under both optical and dental care.

However, **waiting time** is extended to 10 months for claims under the maternity/paternity benefit.

