

Summary of benefits

Global health plans - Individual

Choose the level of cover that suits you:					
The five levels of cover you can choose from	Foundation	Standard	Comprehensive	Prestige	Prestige Plus
Overall policy limit per member	Up to £100,000/€125,000/ \$160,000 each year	Up to £1,000,000/€1,275,000/ \$1,600,000 each year	Up to £1,500,000/€1,900,000/ \$2,400,000 each year	Up to £2,000,000/€2,550,000/ \$3,200,000 each year	Up to £5,000,000/€6,375,000/ \$8,000,000 each year
In-patient and day-patient cover					
In-patient and day-patient treatment including surgeons', anaesthetists', physicians' and consultants' charges, diagnostic tests and physiotherapy	Within your overall policy limit	Within your overall policy limit	Within your overall policy limit	Within your overall policy limit	Within your overall policy limit
Cash benefit for each night you receive free in-patient treatment and free hospital accommodation	Not included	£100/€125/\$160 a night	£100/€125/\$160 a night	£100/€125/\$160 a night	£150/€190/\$240 a night
Parent accommodation. Charges for one parent staying with a child member under 18	Within your overall policy limit	Within your overall policy limit	Within your overall policy limit	Within your overall policy limit	Within your overall policy limi
Hotel accommodation for one parent while a child is in hospital	£100/€160/\$125 a night up to £500/€625/\$800 per year	£100/€160/\$125 a night up to £500/€625/\$800 per year	£100/€160/\$125 a night up to £500/€625/\$800 per year	£100/€160/\$125 a night up to £500/€625/\$800 per year	£100/€160/\$125 a night up to £500/€625/\$800 per year
In-patient psychiatric treatment		100 days per lifetime membership		100 days per lifetime membership	
Out-patient cover Surgical procedures	Within your overall policy limit	Within your overall policy limit	Within your overall policy limit	Within your overall policy limit	Within your overall policy limi
Medical practitioner charges for consultations Diagnostic tests	within your overall policy limit	Within your overall policy limit	A combined overall limit of £3,500/€4,460/\$5,600	A combined overall limit of £5,750/€7,330/\$9,200	Within your overall policy limi Within your overall policy limi Within your overall policy limi
Consultations and treatment for psychiatric illness			£300/€380/\$480 limit on	£300/€380/\$480 limit on	Paid in full up to 30 sessions
Physiotherapy	Not included – optional upgrade available	Not included – optional upgrade available	complementary practitioner charges from the overall out-patient limit shown above	complementary practitioner charges from the overall out-patient limit shown above	within your overall policy limi Paid in full up to 35 sessions within your overall policy limi
Complementary practitioner charges			£300/€380/\$480 limit on	£300/€380/\$480 limit on	Paid in full up to 35 sessions within your overall policy limi
Vaccinations and their administration by a medical practitioner or nurse			vaccinations from the overall out-patient limit shown above	vaccinations from the overall out-patient limit shown above	Up to £500/€635/\$800 each ye
Chinese herbal medicine	Not included		Included within the complementary practitioner benefit limit	Included within the complementary practitioner benefit limit	Up to 15 sessions at £100/€125/\$160 per session within your overall policy limit
Out-patient drugs and dressings prescribed by a medical practitioner	Not included – available as part of the out-patient optional upgrade	Notincluded	Up to £500/€635/\$800 each year	Up to £750/€950/\$1,200 each year	Within your overall policy limi
Brain and Body Scans Computerised tomography (CT scan), magnetic resonance	Within your overall policy limit				
imaging (MRI scan) and positron emission tomography (PET scan). Received as an in-patient, day-patient or out-patient	Outside UK directory £100/\$160/€125	Within your overall policy limit	Within your overall policy limit	Within your overall policy limit	Within your overall policy limi
Cancer cover i) Radiotherapy and chemotherapy. Received as an	Within your overall policy limit	Within your overall policy limit	Within your overall policy limit	Within your overall policy limit	Within your overall policy lim
in-patient, day-patient or out-patient ii) Chemotherapy and/or biological drug treatment to prevent a recurrence of cancer or to maintain remission	Within your overall policy limit	Within your overall policy limit	Within your overall policy limit	Within your overall policy limit	Within your overall policy lim
iii) Experimental drug treatments as part of an ethically	Within your overall policy limit	Within your overall policy limit	Within your overall policy limit	Within your overall policy limit	Within your overall policy lim
approved drug trial iv) Follow up consultations if you remain a member and	Not included – optional	Not included – optional			
your policy covers this	upgrade available	upgrade available	Membership lifetime	Membership lifetime	Membership lifetime
Nurse to give you chemotherapy for cancer or antibiotics by intravenous drip at home	Up to 14 days	Notincluded	Up to 14 days	Up to 28 days	Up to 28 days
Purchase of wigs during active treatment of cancer	Not included	Up to £150/€190/\$240	Up to £150/€190/\$240	Up to £150/€190/\$240	Up to £150/€190/\$240
Day-patient radiotherapy & chemotherapy cash benefit when treatment and accommodation has been free of charge	£50/€60/\$80 a day up to £2,000/€2,400/\$3,200 per year	£50/€60/\$80 a day up to £5,000/€6,375/\$8,000 per year	£50/€60/\$80 a day up to £5,000/€6,375/\$8,000 per year	£50/€60/\$80 a day up to £5,000/€6,375/\$8,000 per year	£150/€190/\$240 a day up to £5,000/€6,375/\$8,000 per yea
Chronic cover Routine follow up consultations and 120 day limit on	Not included	Not included	Included	Included	Included
in-patient treatment Kidney dialysis. In-patient, day-patient or out-patient treatment	Not included	Notincluded	Up to £25,000/€31,875/\$40,000	Up to £50,000/€63,750/\$80,000 per year	£75,000/€95,625/\$120,000
Pregnancy cover Routine pregnancy and childbirth (a moratorium applies,			peryear	per year	per year
please speak to an adviser for details) HIV/AIDS	Not included	Notincluded	Notincluded	Up to £10,000/€12,750/\$16,000	Up to £12,000/€15,300/\$19,20
HIV/AIDS treatment including Antiretroviral Treatment (ART)	Not included	Notincluded	Notincluded	Notincluded	Up to £40,000/€51,000/\$64,00
Palliative care Palliative care	Not included	Not included	Notincluded	Up to 30 days (Cancer diagnosis only)	Up to 30 days
Emergency treatment				(Cancer diagnosis only)	
Emergency treatment in the USA. Emergency in-patient and day-patient treatment of a medical condition which arises suddenly whilst you are in the USA. Applicable only	Not included	Up to 6 weeks up to a limit of £10,000/€12,750/\$16,000	Up to 6 weeks up to a limit of £15,000/€19,125/\$24,000	Up to 10 weeks up to a limit of £20,000/€25,500/\$32,000	Up to 10 weeks up to a limit o £30,000/€38,250/\$48,000
for plans with 'worldwide excluding USA' area of cover Emergency out-patient treatment whilst you are in the USA (not applicable with USA upgrade)	Notincluded	Notincluded	Notincluded	Notincluded	Up to £2,000/€2,550/\$3,200
Ambulance transport for emergency transport to or between hospitals	Within your overall policy limit	Within your overall policy limit	Within your overall policy limit	Within your overall policy limit	Within your overall policy lim
Evacuation and repatriation service Health and wellbeing cover	Included	Included	Included	Included	Included
Non-routine dental treatment, for example,	Not included	50% of costs incurred up to	50% of costs incurred up to	50% of costs incurred up to	
replacing crowns Routine dental treatment. For example, check ups, scale and polish	Notincluded	£320/€405/\$510 per year Not included	£320/€405/\$510 per year Not included – optional upgrade available	£500/€635/\$800 per year Not included – optional upgrade available	80% of costs incurred up to £3,500/€4,450/\$5,600 per yea
Accidental damage to teeth	Upto£5,000/€6,375/\$8,000 peryear	Up to £10,000/€12,750/\$16,000 peryear	Up to £10,000/€12,750/\$16,000 peryear	Up to £10,000/€12,750/\$16,000 peryear	Up to £10,000/€12,750/\$16,00 per year
Prescription glasses and contact lenses	Not included	Not included	Up to £100/€125/\$160 per year	Up to £100/€125/\$160 per year	Up to £200/€255/\$320 per yea
Eyesight test cover	Not included	Not included	Paid in full for one eye test per year	Paid in full for one eye test per year Up to £300/€380/\$480 each year towards a health check for each	Paid in full for one eye test per y Up to £400/€510/\$640 toward
Health check	Not included	Notincluded	Notincluded	member on the policy	a health check for each memb on the policy Up to £100,000/€127,500/\$160,
Disability compensation cover Spinal supports, knee braces and aircasts.	Notincluded	Notincluded Upto£1,500/€1,900/\$2,400	Notincluded Upto£2,000/€2,550/\$3,200	Up to £50,000/€63,750/\$80,000 per year Up to £2,500/€3,200/\$4,000	Up to £100,000/€127,500/\$160, per year Up to £3,500/€4,450/\$5,600
External prostheses during active treatment of cancer Support and helplines	Not included	peryear	peryear	peryear	per year
	Included	Included	Included	Included	Included
Personal Medical Case Management			I .	· ·	
Health at Hand Doctor, Dental, Optical helpline Travel insurance	Included Included	Included Included	Included Included	Included Included	Included Included

Optional upgrades

Once you've chosen your level of cover, you can choose from our optional upgrades. The optional upgrades available for each level are below:

ut-patient treatment		
Medical practitioner charges for consultations		
Diagnostic tests	Combined limit £2,500/€3,200/\$4,000 per year	
Consultations and treatment for psychiatric illness	Complementary practitioner charges limited to £300/€380/\$480 from the overall out-patient limit shown above Vaccinations are limited to £100/€125/\$160 from the overall out-patient limit shown above	
Physiotherapy		
Complementary practitioner charges		
Vaccinations administered by a medical practitioner or nurse	Out-patient drugs and dressings prescribed by	
Out-patient drugs and dressings prescribed by a medical practitioner	a medical practitioner - £100/€125/\$160	
tandard		
ut-patient treatment		
Medical practitioner charges for consultations	Combined overall limit: £750/€950/\$1,200 per year	
Consultations and treatment for psychiatric illness	Complementary practitioner charges limited to	
Complementary practitioner charges including Chinese herbal medicine	£200/€250/\$320 from the overall out-patient limit shown above	
Diagnostic tests and physiotherapy	Vaccinations are limited to £150/€190/\$240 from	
Vaccinations administered by a medical practitioner or nurse	the overall out-patient limit shown above	
nternational Travel Plan		
Annual business travel and holiday cover that takes into account the medical cover you already have – so you don't end up paying twice	Up to 95 days cover allowed on any single trip abroad (up to 183 days per renewal year)	
omprehensive		
ental care		
Increased dental benefit including the addition of routine care such as check-ups, scale and polish	80% up to £1,000/€1,275/\$1,600 per year	
nternational Travel Plan		
Annual business travel and holiday cover, that takes into account the medical cover you already have - so you don't end up paying twice	Up to 95 days cover allowed on any single trip abroad (up to 183 days per renewal year)	
restige		
ental care		

Excess

You can help control the cost of your premium by adding an excess to your policy. We offer five levels of excess, per person, per year:









 $Increased\ excess\ available\ for\ Standard\ plans\ without\ out\ -patient\ upgrade.$ Excess per person, per year:



Exclusions

$What \hbox{'s not included in the health plans}\\$

Our global health plans are designed to cover treatment of medical conditions that respond quickly to treatment - known as acute conditions. Like most health insurance policies, there are a number of exclusions and $limitations \, on \, the \, plans \, and \, this \, is \, just \, a \, summary \, of \, the \, most \, significant \, exclusions$ and limitations:

- Treatment of medical conditions you had, or had symptoms of, before you joined • Out-patient cover excluded on Foundation and Standard plans unless the
- out-patient option has been selected
- Routine dental check-ups for Foundation, Standard, Comprehensive or Prestige $plans \, (available \, as \, an \, optional \, upgrade \, to \, Comprehensive \, and \, Prestige \, plans)$
- $\bullet \ \ Routine\ pregnancy\ and\ child birth\ on\ Foundation, Standard\ or\ Comprehensive\ plans$
- $\bullet \ \ \mathsf{Preventative} \ \mathsf{treatment}$ • Treatment of conditions that last a long time or come back (also known as chronic
- conditions) if you have a Foundation or Standard plan • Any treatment costs incurred as a result of engaging in or training for any sport for which you receive a salary or monetary reimbursement, including grants or
- sponsorship (unless you receive travel costs only). $\bullet \ \ Claims\ if you\ travel\ outside\ your\ area\ to\ get\ treatment\ or\ against\ medical\ advice$
- USA cover excluded on all plans unless this has been selected with your cover
- Treatment that you receive in the UK from providers that are not listed in our
- ${\sf Directory}\, of\, {\sf Hospitals}\, unless\, you\, have\, a\, {\sf Prestige}\, {\sf Plus}\, {\sf plan}$ • The costs of arranging treatment
- Full details of what members are and are not covered for are $provided \, in \, the \, membership \, handbook, or \, are \, available \, on \, request.$