Private medical insurance

Insurance Product Information Document

Company: AXA PPP healthcare Limited and AXA Global Healthcare (UK) Limited

Product: Islands Health Plan Core, Classic, Premier and Ultimate

AXA PPP healthcare Limited is authorised by the Prudential Regulation Authority (PRA) and regulated by the Financial Conduct Authority (FCA) and the Prudential Regulation Authority. Registered number 202947. AXA Global Healthcare (UK) Limited is authorised and regulated by the Financial Conduct Authority (FCA). Registered number 307140. Registered Address for both: 20 Gracechurch Street, London, EC3V 0BG.

The information provided in this document is a summary of the key features and exclusions of the plan and does not form part of the contract between us. Complete pre-contract and contractual information about the product will be provided in your plan documents.

What is this type of insurance?

Private medical insurance provides cover for the private treatment of new acute medical conditions that arise after joining the plan.

What is insured?

Inpatient and day patient treatment (all plans)

- ✓ Hospital fees paid in full at any hospital in the UK, the Channel Islands or Europe or any hospital or day patient unit in the Islands Health Plan Directory of Hospitals.
- ✓ No annual maximum for surgeons', anaesthetists' and physicians' charges.
- ✓ Hospital accommodation paid in full within your area of cover for one parent to stay with a child under 18.
- ✓ Hotel accommodation paid up to £100 a night up to £500 a year for a parent to stay nearby when a child is receiving eligible inpatient treatment at a hospital that is not in their home town.
- ✓ Treatment of cancer, including radiotherapy and chemotherapy.

Inpatient and day patient treatment (Classic, Premier, Ultimate)

- ✓ Up to eight weeks treatment for emergency inpatient treatment needed outside of Europe. Limited to £25,000 (Classic), £30,000 (Premier), £50,000 (Ultimate) a year.

Outpatient treatment (all plans)

- ✓ No annual maximum for surgical procedures.
- ✓ CT, MRI and PET scans paid in full at a facility in the UK, the Channel Islands, Europe or a scanning centre in the Islands Health Plan Directory of Hospitals.

Outpatient treatment (Classic, Premier, Ultimate)

- ✓ Up to £1,000 (Classic), £2,500 (Premier), No annual Maximum (Ultimate) in total for:
  - specialist consultations and diagnostic tests
  - complementary practitioner charges and physiotherapy.

Outpatient treatment (Premier, Ultimate)

- ✓ Up to £1,000 for treatment of psychiatric illness.

Other benefits (all plans)

- ✓ Ambulance transport paid in full when medically essential.
- ✓ Evacuation or repatriation service.
- ✓ Up to £1,500 for transportation to a Channel Island or the UK for treatment that is not available in your principal island of residence.
- ✓ Virtual Care from AXA. Access to telephone or video appointments with a Virtual Doctor service and Mind Health

What is not insured?

- ✗ Treatment of medical conditions that you had, or had symptoms of, before joining. If you join on different terms it will be shown on your plan documents.
- ✗ Treatment or monitoring of ongoing, recurrent and long-term conditions (also known as 'chronic conditions').
- ✗ Outpatient specialist consultations, diagnostic tests, complementary practitioner charges and physiotherapy if you have Core cover only.
- ✗ Pregnancy and childbirth.
- ✗ Routine dental procedures.
- ✗ Claims if you travelled outside of Europe to get treatment.

Are there any restrictions on cover?

- ! If you have an excess we will take your excess off the amount covered by your plan for the first claim for each person per membership year.
- ! Limited cover for treatment received in a hospital or day patient unit not in the Islands Health Plan Directory of Hospitals.
- ! Fees for treatment in the UK that are above the level shown in the schedule of procedures and fees.
- ! Fees for treatment outside of the UK that are above the level usually charged for that treatment.
- ! Inpatient stays are limited to 120 days per admission.

service. Access to a Second Medical Opinion service.

✓ £1,000 annual maximum cash benefit if you take part in a clinical trial for experimental cancer drugs.

✓ Up to £100 (Core), £300 (Classic), £500 (Premier), no annual maximum (Ultimate) for primary care charges from a general practitioner in your principal island of residence.

Other benefits (Premier, Ultimate)

✓ Up to £1,000 (Premier), £1,500 (Ultimate) for transportation to a Channel Island or the UK for cancer treatment that is not available in your principal island of residence.

Other benefits (Ultimate)

✓ 80% of the costs up to £350 per year for non-routine dental treatment.

✓ 80% of the costs up to £200 per year for prescribed contact lenses or spectacles and £25 for an eye test.

Optional Cover (Core, Classic, Premier)

- 80% of the costs up to £150 per year for non-routine dental treatment.
- 80% of the costs up to £100 per year for prescribed contact lenses or spectacles and £25 for an eye test.



Where am I covered?

✓ Cover is provided for private medical treatment received in the Channel Islands, Isle of Man, Europe and the United Kingdom.



What are my obligations?

- You must give us complete and accurate answers to any questions we may ask.
- If anything changes between the time you agreed to join and the start date you must contact us.
- You must pay any excess that applies to your plan.
- You must pay the premium on time.
- You must inform us if any of your personal details change, including your address.
- If you need to make a claim call our team of Personal Advisers to ensure your claim is covered under the plan.



When and how do I pay?

You can pay your premium in any of the following ways:

- Payment Link – including the option to pay by yearly, quarterly or monthly Direct Debit if you have a UK bank account (payment will be in Sterling), Credit Card, Apple Pay and Google Pay.
- Yearly, quarterly or monthly by credit or debit card.
- Quarterly or yearly by cheque.



When does the cover start and end?

Your membership will start on your chosen start date and lasts for one year. Your start date will be shown on your policy documents.



How do I cancel the contract?

You can cancel your membership by writing to or calling us within the first 14 days of receiving your membership pack. If you do this you will receive a refund of the premium you have paid provided that no claims have been paid in that time. If you do not cancel within this time, your membership will continue so long as you continue to pay your premium.

After your cooling off period:

- If you pay monthly, you can cancel your policy from the next monthly payment date.
- If you pay quarterly, you can cancel your policy from the next payment date.
- If you pay annually, you can cancel your policy and receive a pro-rata refund based on whole months remaining in the year. We will deduct an administration fee of £20 and the costs of any claims for that year.

If you cancel during the year, we will not pay for any claim for treatment you were given after the date of cancellation.