

# Your guide to Hospital Treatment Insurance.

The Westfield Health  
Hospital Treatment Plan

# Hello.

A warm welcome to your health cover from Westfield Health.  
We've been dedicated to supporting the health of the nation since 1919.

Almost a century on and we still have the same beliefs, vision and values we've always had – to support you throughout your working life with innovative, best in class health cover.

## **A little bit about us.**

We are Westfield Health. From humble beginnings, we've evolved to become a leading health and wellbeing provider.

We encourage positive changes in the wellbeing of our customers and the wider population across the UK. Together, we can help everyone to live healthier lives through better choices, ongoing support and a more proactive approach to healthcare.

As a not for profit company, we reinvest our surplus in products and services that directly benefit our customers. Through our charitable donations, we support the NHS and medically related charities to help our customers and the community to lead healthier lives.

## **Getting started.**

Take a look through your handy little guide, which provides everything you need to help you get the most from your cover. If you have any questions at all, just give our friendly UK based Customer Care Team a call on **0114 250 2000**.

**Don't forget to read the full Terms and Conditions at the back of this guide.**



**We're not  
satisfied unless  
you are.**

At Westfield Health, we're renowned for our customer care and we continue to be recognised as offering 'world class service' by the Institute of Customer Service. So when you talk to us, you know we'll be fully committed to working harder for you.



# Introducing your cover.

Our Hospital Treatment Plan gets you on the road to recovery fast.

## Taking better care of you.

Waiting for surgery can be a long and stressful time. Your Hospital Treatment Plan makes private surgery more accessible for you, so you can be treated quicker and back to your fit and healthy best.

Your policy provides you with immediate cover for new conditions and fast access to fixed price private treatment packages, should you need surgery or a medical procedure. Giving you the reassurance that you can access private treatment quickly. Your policy aims to get you treated in complete comfort, taking into account your needs and preferences and getting you on the road to recovery as soon as possible.

Access and Premier cover also provides you with outpatient events including money towards specialist consultations and scans, or cash benefits if you choose to have these through the NHS.

It's different from Private Medical Insurance. You can choose to receive treatment at any hospital in the UK where a fixed price private treatment package is available.



## The treatment you need, when you need it most.

Your policy provides you with cover for a substantial number of surgical and medical procedures. Surgical procedures are defined as:

- Medical procedures requiring a general anaesthetic
- Medical procedures requiring a regional or local anaesthetic in conjunction with an incision involving a surgical knife
- Endoscopic fibre optic procedures

Cover is available for conditions such as:

- Slipped discs
- Varicose veins
- Hip replacement
- Knee replacement
- Abdominal hernias
- Sinus problems
- Cataracts
- Tonsils
- Prostate problems
- Gynaecological problems
- Gallstones

You can view the full list of surgical and medical procedures covered at [www.westfieldhealth.com/hospital-treatment-plan](http://www.westfieldhealth.com/hospital-treatment-plan)

If you require treatment for heart or cancer procedures, you'll need to arrange your own private treatment package or choose NHS treatment. Please send us your completed claim form. If your claim is approved by us, we'll contribute towards the cost of your surgery.

Steve twisted his knee whilst playing rugby with friends and was still experiencing pain weeks after. His GP referred him to a specialist Consultant and further investigations showed that he needed keyhole surgery to repair his internal knee ligaments.

Thanks to Steve's Hospital Treatment Plan, arranging treatment was one less thing to worry about. His case manager organised his care and his treatment was quick and in the comfort of a local, private hospital.

# It feels good to be covered.

Take a look at the table below to see what your cover provides. You'll need to check your accompanying letter and policy documentation to see what level you're on.

**Important information.**

Please refer to the full Terms and Conditions within this guide.

\*Cash payout to the policyholder or the employer. If the employer is paying for your cover they will choose who receives the NHS cash payout.

\*\*We do not arrange private treatment for heart or cancer. We will tell you the band for the medical procedure and pay the maximum for that band, so that you can arrange your own private treatment for your medical procedure. We will need proof that you are having private treatment for the medical procedure before we pay the claim.

†We won't cover the policy excess. We will deduct £100 from the first outpatient event claim for each insured person, per policy year.

<b>Cover for each insured person</b>
<b>Private outpatient events</b>
Specialist consultations
Diagnostic tests
CT and MRI scans
PET scans
<b>NHS outpatient events</b>
Specialist consultations*
Diagnostic tests*
CT and MRI scans*
PET scans*
<b>Medical procedures (except for heart or cancer)</b>
Private medical procedures
NHS medical procedures*
<b>Medical procedures – heart or cancer</b>
Private medical procedures**
NHS medical procedures*

	Essential	Access	Premier
<b>Excess per policy year</b>			
<b>£100</b> Deducted from your first claim each year†	-	Up to £300	Up to £1,000
	-	-	
	-	Up to £750	Up to £1,500
	-	Up to £1,500	Up to £1,500
<b>Claims per policy year</b>			
<b>1</b>	-	£50	£50
	-	-	
<b>1</b>	-	£75	£75
	-	£100	£100
<b>Claims per policy year</b>			
<b>3</b>	<p>Each medical procedure is classified into one of 12 bands.</p> <p>Please refer to the Medical Procedures table on page 9, showing the amount for each band.</p>		
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# Medical procedures.

Each medical procedure is classified into one of 12 bands according to its medical complexity.

Band 1 contains the least complicated medical procedures and Band 12 the most complicated medical procedures.

The table opposite tells you what we will pay for each band.

## Schedule of Procedures

We do all the hard work arranging your private treatment for you (except for heart or cancer where you will need to arrange your own private treatment package or choose NHS treatment). Our Schedule of Procedures simply lists all the different operations and the bands that we have put them into. Visit [www.westfieldhealth.com/hospital-treatment-plan](http://www.westfieldhealth.com/hospital-treatment-plan) to view our Schedule of Procedures.

You can look up your operation on the schedule if you want to know the most that we will spend on your private treatment package or the NHS cash payout if you have NHS treatment.

Classification of Medical Procedure	Private Treatment (except heart or cancer)	Private Treatment for heart or cancer	NHS cash payout
Band 1	Up to £850	£850	£200
Band 2	Up to £1,500	£1,500	£350
Band 3	Up to £2,500	£2,500	£650
Band 4	Up to £3,500	£3,500	£850
Band 5	Up to £4,500	£4,500	£1,200
Band 6	Up to £6,000	£6,000	£1,500
Band 7	Up to £7,500	£7,500	£2,000
Band 8	Up to £10,000	£10,000	£2,500
Band 9	Up to £12,500	£12,500	£3,000
Band 10	Up to £15,000	£15,000	£3,500
Band 11	Up to £20,000	£20,000	£4,000
Band 12	Up to £25,000	£25,000	£5,000

**More information can be found in the Terms and Conditions within this guide.**

# Giving you choice and control.

## **Private treatment.**

We're on hand to help source the right private treatment package for you.

Once we've confirmed that you're covered and you've booked a date for your medical procedure, we'll arrange your private treatment package.

Following referral from a consultant, you'll be allocated a case manager who will source and arrange a private treatment package to suit your needs. You don't have to be concerned about the cost of treatment as it is all taken care of, up to the maximum allowance allocated for your surgical procedure.

You can choose to receive treatment at any one of the many hospitals in the UK where a fixed price private treatment package is available and you won't be restricted to a specified list of private hospitals.

Each surgical procedure is categorised into one of twelve bands depending on the complexity of the procedure, and each band has a benefit allowance to cover the cost of most private treatment.

Benefit allowances are subject to review to ensure they'll meet the cost of fixed price private treatment packages at most UK hospitals. Certain hospitals, in London for example, may be an exception to this. If you prefer a more expensive hospital, you can do so by topping up the cost.

## **NHS treatment.**

If you prefer NHS treatment, or are assessed as unsuitable for a private treatment package by a healthcare professional, we'll pay an NHS Benefit. This is a cash benefit determined by the band for your surgical procedure.

If you pay for your own cover, we'll pay the NHS Benefit to you. If it's your employer who is paying the premium, they'll tell us at the start of their company scheme whether the NHS Benefit is payable to you or them. If you're entitled to receive the NHS Benefit, you can spend this money however you'd like.

The letter enclosed with this plan guide confirms who the NHS Benefit is payable to.



## What's included?

### Outpatient events

If your cover includes outpatient events (Access and Premier levels only), please see the table on pages 6 and 7 to see what you're covered for. This may include:

- Specialist consultations
- Diagnostics tests such as x-rays, blood tests and ultrasounds
- MRI, CT and PET scans

Exactly what's included in a fixed price private treatment package will differ depending on the procedure required.

What remains the same is our commitment to working harder for you.

### The package would typically include:

- The consultant surgeon/physician fees
- The anaesthetist fees
- The private hospital charges relating to
  - the operating theatre
  - accommodation either as an in-patient or day case
  - personal meals
  - drugs and dressings
  - in-patient tests
  - x-rays, pharmacy and occasionally physiotherapy
- The cost of treating any surgical complications relating to the treatment that occur during the operation whilst in hospital or within 30 days of your original surgical procedure. (Surgical complications that arise more than 30 days after your operation will only be covered if they qualify as a separate surgical procedure, and will be treated as a separate claim).

Some private treatment packages may also include a specified number of post-operative out-patient physiotherapy sessions.

Your case manager will carefully explain the details of your private treatment package, so you know what is included.

Some examples of items that are not covered in a fixed price private treatment package are:

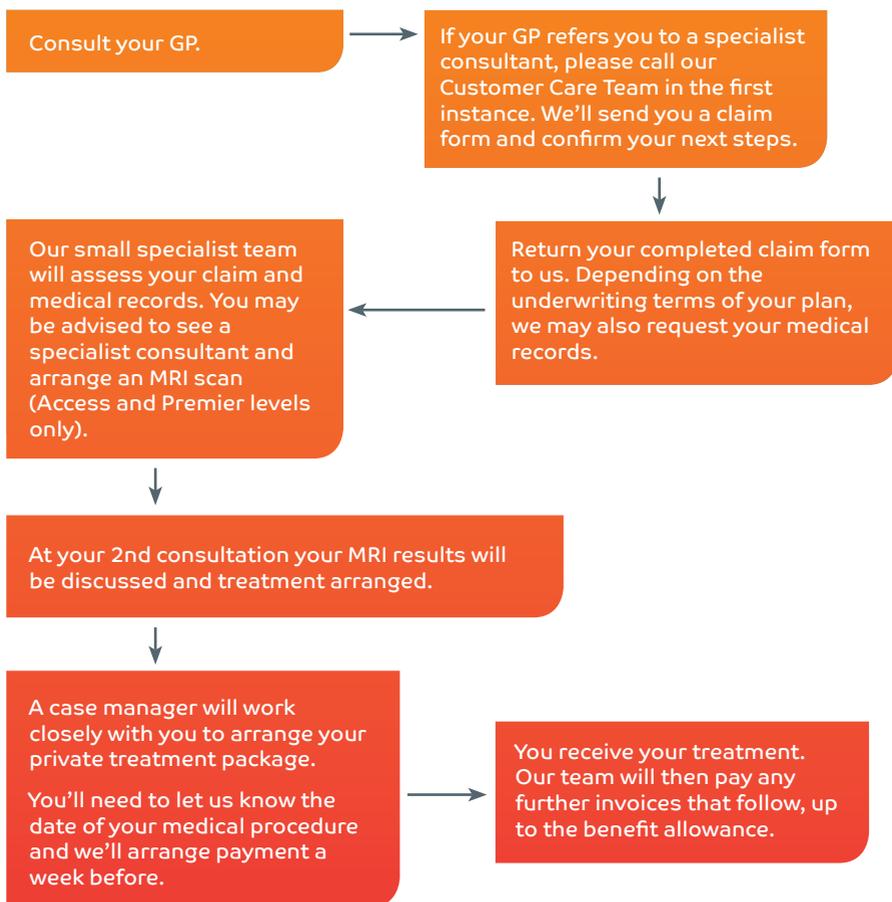
- Diagnostic tests or consultations prior to admission (not covered on Essential level only)
- Ambulance fees
- Travel costs
- Car parking
- Newspapers and other sundry items
- Telephone calls

# How it works.

Your step by step guide on how to make a claim.

A typical example/illustration.

More information can be found on page 17 in the Benefits section within this guide.



Remember, we're here to help you. If you have any questions contact our Customer Care Team on **0114 250 2000**.

Our small specialist team will be on hand to assist you and talk you through the process.

# We're here for you.

If there's anything you need to know about your Hospital Treatment Plan, or your claim, just get in touch. With our help, it's easy to start accessing the treatment you need to keep you at your healthy best.

## Monitoring and confidentiality.

To keep improving our service, we record and monitor all calls. This includes recording and monitoring information relating to health and medical conditions.

We will not discuss policy details with anyone other than the policyholder, unless you have given us specific approval for a relative or friend to obtain account information on your behalf. This may be verbal or written.

### Contact us:



#### Online

westfieldhealth.com



#### Email

enquiries@westfieldhealth.com



#### Phone

0114 250 2000  
8:30am-5:30pm,  
Mon-Fri (except  
public holidays)

# Our Privacy Promise.

We are committed to protecting the privacy of our users and customers whilst improving people's quality of life by enabling them to make healthier choices.

We believe in being open and up front with users and customers and have developed our Privacy Promise, a quick and simple summary explaining how we manage, share and look after your personal data.

We promise to collect, process, store and share your data safely and securely:

- **You're always in control:** Your privacy will be respected at all times and we will put you in control of your privacy with easy-to-use tools and clear choices.
- **We work transparently:** We will be transparent about the data we collect and how we use that data so that you can make fully informed choices and decisions.
- **We operate securely:** We have achieved ISO27001 certification and we will protect the data that you entrust to us via appropriate security measures and controls. We'll also ensure through the contracts we have in place, that other businesses we work with are just as careful with your data.
- **For your benefit:** When we do process your data, we will use it to benefit you and to make your experience better and to improve our products and services.

If you'd like to know more, please read our detailed Privacy Policy available on our website and **page 28** in this plan guide.

If you need to speak to us in relation to how your personal data is processed please feel free to contact our Data Protection Officer, whose details are provided below:

**Email:** [dpo@westfieldhealth.com](mailto:dpo@westfieldhealth.com)

**Post:** Data Protection Officer  
Westfield Health  
Westfield House  
60 Charter Row  
Sheffield  
S1 3FZ

# Everything you need to know.

This section contains important information about your cover, so please read it carefully.

If you have any questions, please get in touch.

The Westfield Health Hospital Treatment Plan	page 16
Benefits	page 17
General Terms and Conditions	page 20
Definitions	page 25
Our Privacy Policy	page 28

## The Westfield Health Hospital Treatment Plan

The information contained within this guide is effective from 1st April 2019 and replaces all previously published information.

This guide tells **you** everything that **you** need to know about your Hospital Treatment Plan cover. The special meaning that **we** have given to words in **bold type** is explained in the Definitions section at the back of this guide.



If there is anything about your cover that you do not understand please contact our Customer Care Team on 0114 250 2000 and we will be happy to help.

### Important information about your cover

- There are three levels of cover – Access, Essential and Premier
- The benefits for each **insured person** on each **plan** level are explained on page 17
- Each **medical procedure** is classified into one of 12 bands according to its medical complexity. Band 1 are the least complicated **medical procedures** and Band 12 are the most complicated **medical procedures**. The table on page 11 shows the maximum that **we** will pay for each band towards **private treatment** and the NHS cash payout for each band
- **Our schedule of procedures** shows the band that **we** have allocated to each **medical procedure**. Please visit [www.westfieldhealth.com/hospital-treatment-plan](http://www.westfieldhealth.com/hospital-treatment-plan) or contact **our** Customer Care Team for a printed copy
- The Hospital Treatment Plan covers **outpatient events** and **medical procedures** for **acute conditions** only: **chronic conditions** are excluded
- The Hospital Treatment Plan does not cover **outpatient events** or **medical procedures** to monitor a disease, illness or injury
- The Hospital Treatment Plan does not cover chemotherapy or radiotherapy treatment: cancer cover is limited to cover for **medical procedures** only
- **Private treatment** will not be covered if the **insured person** does not contact **us** before an **outpatient event**: **we** need to check whether the claim will be covered and you may be out of pocket if you don't contact **us** before incurring costs
- **Private treatment** (except for heart or cancer) will not be covered if the **insured person** does not contact **us** so that **we** can arrange their **medical procedure**: **private treatment** must not be arranged by you or your **medical specialist**
- **We** do not arrange **private treatment** for heart or cancer related **medical procedures**: the **insured person** must arrange their own **private treatment** for the **medical procedure**. Please contact **us** **before** arranging **private treatment**. **We** need to check whether the claim will be covered and explain the extent of any cover: you may be out of pocket if you don't contact **us** before incurring costs. **We** will tell you the band for the **medical procedure** and pay you the maximum amount for that band. **We** must have proof that the **insured person** is having **private treatment** for the **medical procedure** before **we** pay the claim. The amount that you receive may not cover the full cost of the **medical procedure**
- The **insured person** will be responsible for paying the shortfall if the cost of **private treatment** is more than their benefit entitlement
- If **private treatment** costs less than the maximum allowance for the band that **we** have allocated to the **medical procedure** **we** will not pay any cash surplus to the **policyholder** or the **insured person**
- **We** will pay the NHS cash payout if an **insured person** has **NHS treatment** for an eligible **outpatient event** or **medical procedure**
- The **insured person** must tell **us** if their **outpatient event** or **medical procedure** is covered under another Westfield Health plan, or by another insurer. If an **insured person** is claiming from another insurer **we** will pay **our** proportionate share of the cost, subject to the terms and conditions of the **plan**
- The **insured person** must tell **us** whether the cost of their **outpatient event** or **medical procedure** may be recovered from a third party: **we** reserve the right to commence proceedings against a third party in your name to recover the benefits that **we** have paid
- It is the **insured person's** responsibility to ensure that complete and accurate information is submitted with the claim. For audit purposes **we** will carry out checks on the information you and practitioners provide to **us**. If you submit a claim that is false **we** will terminate the **policy** and all benefits for the **policyholder** and their **dependants** will end immediately. **We** will not refund premiums paid for the **plan** and always take legal action for fraudulent claims

- We will tell the **policyholder** if we receive a claim for one of their **dependants**, but we will not disclose Sensitive Personal Data such as data relating to health and **medical conditions** to **you** without the **dependant's** consent

## Benefits

### Outpatient events

#### Premier – each insured person is covered for...

- **Private treatment for specialist consultations** and/or **diagnostic tests** – up to a maximum of **£1,000** per **policy year**
- **Private treatment for CT and/or MRI scans** – up to a maximum of **£1,500** per **policy year**
- **Private treatment for PET scans** – up to a maximum of **£1,500** per **policy year**
- One **NHS** claim for a **specialist consultation** and/or **diagnostic tests** per **policy year** – **£50** cash payout
- One **NHS** claim for a **CT** and/or **MRI scan** per **policy year** – **£75** cash payout
- One **NHS** claim for a **PET scan** per **policy year** – **£100** cash payout

#### Access - each insured person is covered for...

- **Private treatment for specialist consultations** – up to a maximum of **£300** per **policy year**
- **Private treatment for CT and/or MRI scans** – up to a maximum of **£750** per **policy year**
- **Private treatment for PET scans** – up to a maximum of **£1,500** per **policy year**
- One **NHS** claim for a **specialist consultation** per **policy year** – **£50** cash payout
- One **NHS** claim for a **CT** and/or **MRI scan** per **policy year** – **£75** cash payout
- One **NHS** claim for a **PET scan** per **policy year** – **£100** cash payout

#### We will not cover...

- **Outpatient events** on **Essential**
- **Diagnostic tests** on **Access**
- The **policy** excess: we will deduct **£100** from the first **outpatient event** claim for each **insured person**, per **policy year**
- **Outpatient events** that arise as a result of certain

circumstances, please refer to section 6, Policy Exclusions

- **GP consultations/treatment**
- **Specialist consultations** if you do not have a **GP** referral letter
- **Diagnostic tests** if they have not been requested by a **medical specialist**: tests requested by a **GP** are not covered
- An **MRI, CT** and **PET scan** if it has not been requested by a **medical specialist**: scans requested by a **GP** are not covered
- More than the maximum amount for your level of cover. The **insured person** will be responsible for paying the shortfall if the cost of **private treatment** is more than their benefit entitlement
- Travel costs to or from an **outpatient event**, or the cost of a private ambulance
- Claims for **NHS treatment** received by **us** more than six months after the **outpatient event**
- Monitoring of any disease, illness or injury when there are no active symptoms.
- Any charges that a **medical specialist** or any other insured makes for filling in your claim form

**Claiming for private or NHS treatment is easy if the insured person follows these simple steps:**

#### Step 1

You must get a referral from your **GP** to see a **medical specialist** for a **specialist consultation, CT, MRI** and **PET scans** or **diagnostic tests** must be requested by a **medical specialist**.

#### Step 2

Contact **us** immediately on **0114 250 2000** so that **our** Customer Care Team can help you with your claim. Remember, if you have **NHS treatment** we will still need all the relevant information so that **we** can assess whether the claim is eligible for the NHS cash payout.

Please have the **policyholder's** name and **policy** number ready when you call. **We** will need to ask you certain questions about your **medical condition** e.g. when the symptoms started. **We** will then send **you** a claim form for completion.

#### Step 3

Fill in section 1 of the claim form. Send the completed form back to **us**.

#### Step 4

**We** check the information to find out whether you are covered. In order for **us** to assess the claim it will usually be necessary for **us** to request additional medical information from your **GP**, or any other doctor or practitioner who has been involved in your care. In accordance with the Access to Medical Reports Act 1988 **we** need permission, so please make sure that you give your consent on the claim form, for **you** or **your dependent child**. If **we** don't have your permission, or the information that **we** need is not available, **we** will not be able to pay the claim.

**We** will pay the cost of any report that **we** request from your **GP**.

#### Step 5

**We** will contact you to tell you whether cover is available. **We** recommend that you wait until **we** have approved the **outpatient event** before you incur any **private treatment** charges because if **you** are not eligible for cover you will not get your money back.

#### Step 6

**Our** friendly Customer Care Team will work with you to make sure your claim goes as smoothly as possible. If you have **NHS treatment** **we** must receive the completed claim form within six months of the **outpatient event**.

#### NHS cash payout

If an **insured person** has **NHS treatment** for an eligible **outpatient event** **we** will pay the **NHS** cash payout.

The **insured person** must send **us** a completed claim form and give **us** all the information that **we** need to verify the claim.

If the employer is paying the premiums they will decide when they apply for their group scheme whether the cash payouts for **NHS treatment** will be paid to them or to the **policyholder**. Details of the **NHS** cash payout are in the **policy certificate**.

Continued overleaf

## Medical procedures

### Premier, Access and Essential – each insured person is covered for...

- **Private treatment for medical procedures** (maximum limits apply please see the table on page 8)
- A cash payout for **NHS treatment**
- A maximum of three **medical procedures** per **policy year**
- A maximum of **£250,000** during the lifetime of your cover (if you have previously had cover under this **plan**, or any of **our** other similar surgery package plans, any claims **we** have paid may also count towards your **£250,000** lifetime benefit limit. Please contact **our** Customer Care Team to confirm whether **we** will take previous claims into account when assessing **your** entitlement to benefit and the amount of lifetime benefit available to you)

### We will not cover...

- More than the maximum amount for the band that **we** have allocated to the **medical procedure**. The **insured person** will be responsible for paying the shortfall if the cost of **private treatment** is more than their benefit entitlement
- Extended **treatment** due to unforeseen **surgical complications** that are not covered by the **private treatment package**: the **insured person** will be responsible for paying the shortfall
- Claims for **NHS treatment** received by **us** more than six months after the **medical procedure**
- **Medical procedures** that arise as a result of certain circumstances, please refer to section 6, Policy Exclusions
- **Private treatment** (except for a heart or cancer related **medical procedure**) if the **insured person** does not contact **us** so that **we** can arrange the **private treatment package**: the **private treatment package** must not be arranged by you or your **medical specialist**
- A heart or cancer related **medical procedure**, until we are satisfied that the **insured person** has had/will have **private treatment** for an eligible **medical procedure**. The **insured**

**person** must arrange their own **private treatment** for the **medical procedure** and give **us** any evidence that **we** ask for, so that **we** can verify the claim

- Chemotherapy or radiotherapy treatment: cancer cover is limited to **medical procedures** only
- Additional **in-patient** nights before or after your **private treatment package**: **we** will only cover the **in-patient** nights that **we** have arranged as part of your **private treatment package**
- Accommodation that is not part of the **private treatment package** e.g. hotel stays
- Accommodation for anyone accompanying the **insured person** e.g. a parent/guardian who is accompanying a **dependent child**
- Travel costs to or from the hospital/treatment centre, or the cost of a private ambulance
- **Treatment** carried out by a **GP** or **treatment** carried out in a **GP** surgery
- Monitoring of any disease, illness or injury when there are no active symptoms.
- Any charges that a **medical specialist** or any other person makes for filling in your claim form

### Our schedule of procedures

Each **medical procedure** is classified into one of 12 bands according to its medical complexity. Band 1 contains the least complicated **medical procedures** and Band 12 the most complicated **medical procedures**.

### Our schedule of procedures

shows the band that **we** have allocated to each **medical procedure**. You can see **our schedule of procedures** [www.westfieldhealth.com/hospital-treatment-plan](http://www.westfieldhealth.com/hospital-treatment-plan). Please contact **our** Customer Care Team if **you** would like **us** to send **you** a printed copy.

The table on page 11 shows the maximum that **we** will pay towards **private treatment** for each band and the NHS cash payout if you have **NHS treatment**.

**We** reserve the right to vary the benefit amounts to reflect any changes in medical technology or inflation of medical cost. **We** will notify **you** before **we** make these changes. However, if **your**

employer is paying for **your** cover **we** will tell them about the changes first and then **you** will be informed as soon as reasonably practicable.

The allocated banding of individual procedures under the **schedule of procedures** may be reviewed (either up or down) to reflect changes in technology or the cost of the **medical procedure**.

To ensure that the **schedule of procedures** is kept up to date and accurately reflects the cover provided by the Hospital Treatment Plan **we** may add or remove a **medical procedure** without notice. However, **we** will not make any changes to the **schedule of procedures** with the intention of reducing the extent of your cover, unless **we** notify **you** of the change.

If you undergo more than one **medical procedure** at the same time **we** will pay for the procedure in the highest band only. Except for **bilateral procedures** where **we** will pay one band higher than the cost of the procedure performed on a single side unless otherwise indicated.

**Claiming for private or NHS treatment is easy if the insured person follows these simple steps:**

#### Step 1

Contact **us** immediately on **0114 250 2000** so that **our** Customer Care Team can help you with your claim. Remember, if you have **NHS treatment** **we** will still need all the relevant information so that **we** can assess whether the claim is eligible for the **NHS** cash payout.

Please have the **policyholder's** name and **policy** number ready when you call. **We** will need to ask you certain questions about your **medical condition** e.g. when the symptoms started. **We** will then send **you** a claim form for completion.

#### Step 2

You fill in section 1 of the claim form. Your **medical specialist** must complete section 2 and attach a copy of your **GP** referral. For **treatment** in a **private hospital** **we** need the **medical specialist** to fill in section 2 before **we** can make the arrangements for your **medical procedure**.

If you are having a heart or cancer related **medical procedure** **we**

need the **medical specialist** to fill in section 2 **before** we can assess the claim.

For **NHS treatment** section 2 is filled in when you have your **medical procedure**. Send **us** the completed claim form together with your copy of your discharge summary.

### Step 3

**We** check the information to find out whether you are covered. In order for **us** to assess the claim it will usually be necessary for **us** to request additional medical information from your **GP**, or any other doctor or practitioner who has been involved in your care. In accordance with the Access to Medical Reports Act 1988 **we** need permission, so please make sure that you give your consent on the claim form. If the claim is for **your dependent child** **we** usually need a separate consent form completing by a parent or guardian. If **we** don't have your permission, or the information that **we** need is not available, **we** will not be able to pay the claim.

**We** will pay the cost of any report that **we** request.

### Step 4

**We** will contact you to tell you whether cover is available. Once **we** have confirmed that you are covered and you have booked a date for the **medical procedure**, **we** will arrange the **private treatment package** (except for a heart or cancer related **medical procedure**). If the cost of your **private treatment package** is more than the maximum **we** pay for that **medical procedure** you can pay the shortfall, or choose to have **NHS treatment** instead.

Once **we** have confirmed that you are covered for a heart or cancer related **medical procedure** **we** will tell you the band for the **medical procedure**: **we** will pay the maximum for that band. **We** do not arrange a **private treatment package** for any heart or cancer related **medical procedures**. You can decide whether you want to arrange your own **private treatment**, or choose to have **NHS treatment** instead.

### Step 5

**Our** friendly Customer Care Team will work with you to make sure your claim goes as smoothly as possible.

Remember, if you have **NHS treatment** **we** must receive the completed claim form and your discharge summary within six months of your **medical procedure**.

### How does a fixed price private treatment package work?

- One of **our** case managers will contact **you** and they will work closely with **you** to arrange the most appropriate **private treatment package** possible for your **medical procedure** (except for heart or cancer related **medical procedures**)
- **We** will arrange a **private treatment package** for you in a **private hospital**. **We** will spend up to the maximum allowance allocated for that **medical procedure** in **our** schedule of procedures. **We** may use a third party service to source and arrange the **surgical procedure**
- If your **private treatment package** costs more than the maximum allowance allocated for that **medical procedure** in **our** schedule of procedures you must pay the shortfall to the **private hospital**
- If **private treatment** costs less than the maximum allowance for the band that **we** have allocated to the **medical procedure** **we** will not pay any cash surplus to the **policyholder** or the **insured person**

### What will usually be included in a private treatment package?

- The **medical specialist's** and **anaesthetist's** fees
- The **private hospital** charges relating to the use of the operating theatre
- Accommodation either as an **in-patient** or **day patient**
- Drugs and dressings used while you are an **in-patient/day patient**
- **In-patient** tests and treatment such as x-rays and physiotherapy
- Personal meals
- **Surgical complications** relating to your **medical procedure** that occur within 30 days of the original **medical procedure**
- A specified number of post-operative **outpatient** physiotherapy sessions are also included in some **private treatment packages**

Your case manager will carefully explain the full details of the **private treatment package**, so that you know exactly what is included.

### What isn't included in a private treatment package?

- Out of pocket expenses such as telephone calls, magazines and entertainment packages
- Travel costs to or from the **private hospital**, or the cost of a private ambulance
- **Surgical complications** that arise more than 30 days after **your medical procedure**: these will only be covered if they qualify as a separate **medical procedure** and will be treated as a separate claim
- Additional medication or dressings e.g. pain relief once you have left the **hospital/treatment centre** (although you may be sent home with a small supply as part of the private treatment package)

### Is private treatment suitable for everyone?

It is the intention of the **policy** to provide your care in a **private hospital** if that's what you want, but sometimes **we** cannot arrange a **private treatment package** that is suitable for you. The decision to decline to provide you with **private treatment** will be at the absolute discretion of Westfield Health, or one of **our** representatives.

### What are the reasons why a private treatment package may not be suitable?

- A **private treatment package** may not be appropriate for you for medical reasons
- A private treatment package may not be available within the monetary limit for the **medical procedure** and the **insured person** does not want to pay the shortfall
- **Private hospitals** decline to provide a package price for a particular case

### What if I need a heart or cancer related medical procedure?

**We** do not arrange a **private treatment package** for a heart or cancer related **medical procedure**.

The **insured person** must send **us** a completed claim form and give **us** all the information that **we** need to verify the claim. **We** will then explain the extent of any cover so that you can decide whether you want to arrange your own **private treatment**, or choose to have **NHS treatment** instead.

Continued overleaf

### What if I have NHS treatment?

If a **private treatment package** is not available; you do not want to pay any shortfall; or you just prefer to have **NHS treatment**, we will pay the **NHS** cash payout for an eligible **medical procedure**. The **insured person** must send us a completed claim form and give us all the information that we need to verify the claim. If the employer is paying the premiums they will decide when they apply for their group scheme whether we will pay the cash payout for **NHS treatment** to them or to **you**. Details of the **NHS** cash payout are in the **policy certificate**.

## General terms and conditions

### 1. Who can have Hospital Treatment Plan cover?

#### Eligibility:

- **You** must be aged 18 to 79 on your **commencement date**
- If **your partner** is included on the **policy** they must be aged 18 to 79 on their **commencement date**
- Cover can continue when **you/your partner** reach 80 years old if **your policy** is renewed without a break every year
- **You** can add cover for **dependent children** aged between 1 and 21 years old (or under 25 while they are still in full time education)
- **You** can only add cover for **your partner** on your **commencement date** or **your annual renewal date**
- **You** can only add cover for **your dependent children** on **your commencement date**; **your annual renewal date**; the **dependent child's** first birthday
- An **insured person** must live in the **UK** for at least 180 days in each **policy year** to be eligible for cover

#### When will your cover end?

- At the end of the **policy** term specified on the **policy certificate** (unless the **policy** is renewed)
- If **you die**
- If the premium for **your policy** has not been paid within 30 days of the normal due date
- If **your** premiums are paid by **your** employer as part of a group scheme and the

agreement between Westfield Contributory Health Scheme Ltd. and **your** employer comes to an end

- If **you** leave **your** employment, or otherwise lose entitlement to cover as part of a group scheme
- If **we** notify **you** (or **your** employer if they are paying for **your** cover) that **we** are cancelling the **policy**

### 2. What are the underwriting options?

An **insured person** will be covered for eligible **outpatient events/medical procedures** relating to new **medical conditions** i.e. **medical conditions** that arise after their **commencement date**. Cover is subject to the exclusions in section 6, Policy Exclusions, on pages 22 to 24. Any cover for **pre-existing conditions** depends upon the underwriting terms that apply to **your policy**.

**You** (or the employer if they are paying for **your** cover) can choose one of these underwriting options:

#### Moratorium

**You** (or **your** dependants) do not need to have a medical examination or declare any **pre-existing conditions** before being accepted on a moratorium basis.

Moratorium underwriting means that:

- An **insured person** will not be covered for any **medical condition** (or **related medical condition**) that they knew about, or had symptoms, received **advice** or **treatment** in the 3-year period prior to their **commencement date**. An **insured person** can only have an eligible **medical procedure** for a **pre-existing condition** once they have been free of symptoms, **treatment** or **advice** for 2 continuous years from their **commencement date**
- The moratorium period starts again for a **pre-existing condition** or **related medical condition** each time you receive **treatment**, medication, or **advice**
- Long-term or **chronic conditions** usually require regular or periodic **treatment**, medication or **advice**. This means that a long-term **pre-existing condition** or **related medical condition** may never

be eligible for cover because it is unlikely that there would ever be 2 continuous years without any **treatment**, medication or **advice**. You should not delay seeking medical **advice** or **treatment** for a **pre-existing condition** in order to become eligible for cover on the **plan**

#### Continuation of Personal Medical Exclusion (CPME)

If **you/your** employer want to transfer **your** cover from another insurance company to **our** Hospital Treatment Plan, **we** may agree to accept **you** for cover on a CPME basis.

CPME underwriting means that:

- An **insured person** will not be covered for any **medical condition** that was excluded from the private medical insurance (PMI) cover at the time that cover is transferred to **our** Hospital Treatment Plan
- **You**, or the employer if they are paying for **your** cover, must provide **us** with details of all excluded **medical conditions** and **we** will hold this information in order that **we** can administer the **plan**
- **You** (or the employer) cannot claim for any **outpatient event/medical procedure** that was **planned** prior to the start of **your** Hospital Treatment Plan cover
- There must be no break in cover

**Your policy certificate** details the underwriting terms that apply to **pre-existing conditions** on **your policy**. If **you** are not sure whether a **medical condition** qualifies please contact **us** and **we** will be happy to confirm the extent of any cover.

#### Chronic Conditions

The Hospital Treatment Plan does not cover **outpatient events** or **medical procedures** for **chronic conditions**.

A **chronic condition** is a disease, illness or injury that has **one or more** 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 your rehabilitation or for you 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

If a **medical condition** has failed to improve following a **medical procedure** we may consider it to be a **chronic condition** that is not eligible for cover e.g. more than one hip replacement revision.

We do not cover monitoring of **medical conditions** e.g. we may decline to cover repeated gastroscopies or colonoscopies. We may cover a **chronic condition** if there is evidence of a new acute phase (a flare-up), however we will not cover frequent flare-ups.

### 3. How to apply for cover

You must satisfy **yourself** that the Westfield Health Hospital Treatment Plan, and the level of cover, is right for **you** and where applicable **your dependants**. We will not provide any advice in this regard but **you** are of course free to seek information or advice from a professional advisor.

We, like any responsible insurer, and to the extent permitted by all applicable laws, reserve the right to decline an application for a **policy** or a request to upgrade **your** cover. If an application is not accepted, we will refund any premium paid for the cover that we have declined to offer (providing we have not paid a claim under that cover).

#### Group schemes – when the employer is paying the premiums

If you are covered as part of a group scheme we will agree the underwriting terms with the employer who is paying for **your** cover. The employer will complete a group scheme application form. The employer can ask us to add cover for new employees and their **dependants** mid term. Westfield Health cannot accept any responsibility for loss of benefits which may arise in the event of us being unable to arrange cover by any specific date.

You must make sure that the information that **you** are asked to give regarding the application for **your/your dependants'** cover on a group scheme is correct.

#### Paying for your own cover

- Choose the level of cover that is right for **you**

- Complete the application form, indicating **your** underwriting choice (see section 2)
- For a moratorium application please sign the moratorium declaration
- For a CPME application, please complete all the medical questions and enclose a copy of **your** previous insurer's certificate. We may need to ask for additional medical information in order to consider **your** application

Applications should be sent to us at:

Westfield Health (PHI Team)  
60 Charter Row  
Sheffield  
S1 3FZ

Please remember that the application form, together with any information that **you** give, forms part of the contract of insurance. If **you** do not give us all the information that we ask for it may affect the benefits that an **insured person** can claim.

### 4. The contract between Westfield Health and you

#### Group schemes – when the employer is paying your premiums

**Your** cover will continue on condition that **your** employer continues to pay the premiums for **your** cover to Westfield Health. Because it is **your** employer who is paying **your** premiums, they must notify us if **your** cover is to be cancelled.

If **you** leave **your** employment, or otherwise lose eligibility for group scheme cover, **your** cover will cease on the date that **your** premium has been paid up to.

**Your** employer has chosen this cover for **you** from the range of products offered by Westfield Health. If **your** employer decides to change the cover available to **you** we will notify **you** as soon as reasonably practicable. **Your** cover will cease if the agreement between **your** employer and Westfield Health comes to an end. We will try to offer **you** an alternative Westfield Health product; however, this may not be on the same terms as **your** current cover.

**Cooling off period – If you are paying for your own cover**  
You have 14 days from the receipt of **your policy** documents, or 14 days from **your annual renewal date** to cancel this agreement if **you** do not wish to go ahead with it.

To cancel **your policy** please contact our Customer Care Team on **0114 250 2000**, email [enquiries@westfieldhealth.com](mailto:enquiries@westfieldhealth.com), or write to us at the address on the back of this guide. If **you** cancel **your policy** please return **your policy** documents to us.

#### Renewing your policy – If you are paying for your own cover

We will send **you** a renewal notice each year at least 21 days prior to **your annual renewal date**. We will tell **you** if **your** premium is changing and about any changes that we intend to make to **your** cover.

#### Cancellation – If you are paying for your own cover

After the 14 day cooling off period **you** can still cancel **your policy**.

**You** must give us at least 10 working days notice if **you** would like to cancel **your policy**.

If **you** or **your dependants** have made any claims during the current **policy year**:

- If **you** pay by monthly Direct Debit **you** must pay us the balance of **your** full annual premium within 14 days of **your** cancellation date
- **You** will not be entitled to a refund of **your** premium if **you** pay annually

If **you** or **your dependants** have not made any claims during the current **policy year**:

- If **you** pay by monthly Direct Debit we will not collect any further premiums
- If **you** pay annually we will refund **your** premium on a pro rata basis for the remainder of the current **policy year**

#### Termination of your cover by Westfield Health – All policyholders

We reserve the right to cancel **your** cover at any time, (with retrospective effect where appropriate), if:

- Under the terms and conditions of the **plan you** are not eligible for cover

- **You** or the employer provided false information and/or failed to disclose all the relevant required information with an application for cover
- **You** or **your dependants** provided false information and/or failed to disclose all the relevant required information when submitting a claim
- **You** or **your dependants** fail to comply with **our** request for information relating to a claim or an application for cover
- **You** or **your dependants** submit a claim that is fraudulent or that **we** reasonably believe to be intentionally false, and/or misleading, and/or exaggerated
- **You** or **your dependants** act in a threatening or abusive manner, e.g. violent behaviour; verbal abuse; sexual or racial harassment, towards a member of **our** organisation, or one of **our** suppliers
- **You** or **your dependants** fail to abide by any of the terms and conditions of the Hospital Treatment Plan
- **We** have not received payment of premiums within 30 days of the date that they should have been paid

If **we** cancel **your** cover **you, your dependants** or **your** employer will not have any right to make any further claims on the **plan**. In addition, **we** may also seek to recover any monies from **you** that **we** have paid to provide **private treatment** or **outpatient events** for **you** or **your dependants**; or paid to **you**/the employer that **you**/the employer were not due to under the Terms and Conditions of this **plan**.

If premiums for **your** cover have been paid in advance **we** may refund premiums paid beyond the date for which **you** have had the benefit of cover. However, **we** retain the right to withhold such premiums if **you** or the employer owes **us** money.

**We** will notify **you** in writing **our** reason for cancelling **your** cover and **you** have the right to appeal to **us** through **our** published Complaints Procedure, which is available on request.

If **your policy** is terminated **we** will not accept **you** for cover with **us** again on any Westfield Health product.

## 5. Premiums

**We will not pay a claim if your premiums are not paid up to and including the date of the outpatient event/medical procedure.**

All premiums must be made payable to Westfield Contributory Health Scheme Ltd. Premiums are payable at the start of the **policy** and on the **annual renewal date**. The **policy certificate** details the payment method (e.g. cheque, Direct Debit) and whether the payments are due annually or monthly. If **you** choose to pay by monthly Direct Debit **we** will tell **you** the monthly collection date.

**Your** cover will lapse if the premium has not been received by **us** within 30 days of the date that it should have been paid.

If **you** are part of a group scheme **your** cover will continue providing that **your** employer continues to pay the premiums for **your** cover to Westfield Health.

**We** may change the amount of **your** premium on **your annual renewal date**.

Premiums include Insurance Premium Tax at the current rate and are subject to review in respect of any changes in taxation.

### Death of a policyholder

If **you** die the **policy** will end.

If **we** have not paid any claim in the current **policy year**:

- **We** will not collect any further monthly Direct Debit premiums or
- **We** will refund **your** premium on a pro rata basis for the remainder of the current **policy year**, if **you** pay annually

### Death of a dependant

If **your partner** or **your dependent child** dies please let **us** know so that **we** can amend **your** policy.

**We** will only permit mid-term cancellation of **dependant** cover because the **dependant partner** or **your dependent child** covered has died.

If **we** have not paid any claim in the current **policy year** for the **dependant** cover that **you** are cancelling:

- **We** will reduce **your** monthly Direct Debit premium or

- **We** will refund the difference in premium on a pro rata basis for the remainder of the current **policy year**, if **you** pay annually

## 6. Policy exclusions

**Outpatient events and medical procedures** that arise as a result of certain circumstances will not be covered. **You should read this list of policy exclusions before applying for private treatment or claiming the NHS cash payout.**

### Premier does not cover:

1. Any outpatient investigations that are not **CT, MRI, PET scans** or **diagnostic tests** (see Definitions section).

### Access does not cover:

2. Any outpatient investigations that are not **CT, MRI** or **PET scans** (see Definitions section): e.g. Access does not cover x-rays, ultrasound scans, urodynamics and DEXA scans.

### Essential does not cover:

3. Procedures which solely involve needle injections, needle biopsies, or needle procedures for **diagnostic** or therapeutic reasons with or without radiographic guidance.
4. **CT, MRI** or Ultrasound scans or procedures requiring **CT, MRI** or Ultrasound scans for guidance, such as **CT** guided needle biopsies.
5. **Medical procedures** relating to **chronic conditions**, except when there is evidence of a new acute phase.
6. **Medical procedures** relating to cosmetic **treatment**, or relating to the removal of undiseased tissue: whether or not required for psychological or religious purposes or following accident, illness or injury. Also, cover will not be provided for **treatment** either directly or indirectly arising from or associated with cosmetic **treatment** or the removal of undiseased tissue.

### Premier and Access do not cover:

7. Physiotherapy, psychiatry and **specialist consultations** relating to mental health.
8. **Outpatient events and medical procedures** relating to **chronic conditions**, except when there is evidence of a new acute phase.

9. **Outpatient events** and **medical procedures** relating to cosmetic **treatment**, or relating to the removal of undiseased tissue: whether or not required for psychological or religious purposes or following accident, illness or injury. Also, cover will not be provided for **treatment** either directly or indirectly arising from or associated with cosmetic **treatment** or the removal of undiseased tissue.
  10. Procedures which solely involve needle injections, needle biopsies or needle procedures for **diagnostic** or therapeutic reasons, unless occurring as part of a **CT** or **MRI scan** during an **outpatient event**.
  11. **Outpatient events** to investigate whether the **insured person** may have a potential illness or disease unless they have symptoms e.g. genetic testing is not covered.
- Premier, Access and Essential do not cover:**
12. **Medical procedures** that are not listed in **our schedule of procedures** (except when at **our** discretion **we** agree to cover a procedure that does not substantially differ from one of those listed). Please refer to page 26 for the definition of a **medical procedure**.
  13. Radiotherapy or chemotherapy **treatment**.
  14. **Private treatment** for a **medical procedure** that has not been arranged by **us** (or **our** appointed representative); except for **private treatment** for a heart or cancer related **medical procedure**.
  15. Any claim that arises as a result of a **pre-existing condition** (or **related medical condition**), until the **insured person** has been free of symptoms, **treatment** or **advice** for 2 continuous years from their **commencement date**, if their cover is underwritten on a moratorium basis.
  16. Any claim that arises as a result of an excluded **medical condition** or **planned treatment** if cover is underwritten on the basis of the continuation of personal medical exclusions (CPME).
  17. Any charges that a **hospital/treatment centre**, practitioner or any other organisation makes for filling in a claim form.
  18. Private ambulance fees; the cost of transport to or from an **outpatient event** or **medical procedure**.
  19. **Treatment** carried out by a **GP** or **treatment** carried out in a **GP surgery**.
  20. **Emergency procedures**.
  21. Renal failure – supportive **treatment** including dialysis.
  22. Insertion of hormonal or therapeutic implants.
  23. Investigation and/or correction of congenital abnormalities.
  24. Developmental delays, including learning difficulties or speech/language disabilities.
  25. Dental conditions – any dental condition or dentistry, including gum conditions and wisdom tooth extraction.
  26. Fertility or infertility **treatment**, or any **treatment** relating to fertility, low fertility or infertility.
  27. Any type of contraception.
  28. Vasectomy or sterilisation/ reversal of vasectomy or sterilisation.
  29. **Treatment** for sexual dysfunction whatever the cause e.g. impotence.
  30. Sex change/gender reassignment, whether or not it is for psychological purposes, or any other **treatment** arising from or directly or indirectly associated with gender reassignment.
  31. Organ transplant or organ donation.
  32. Pregnancy and/or childbirth, or any **treatment** or investigations relating to pregnancy or childbirth e.g. foetal operations, termination of pregnancy, caesareans.
  33. Procedures relating to colposcopy other than knife cone biopsies.
  34. **Endoscopic procedures** the following **endoscopic procedures** are excluded unless they are carried out as part of an examination under general anaesthetic:
    - a. Nasal sinus endoscopy
    - b. Pharyngoscopy
    - c. Laryngoscopy
    - d. Flexible and rigid sigmoidoscopy
    - e. Hysteroscopy
  35. Services or **treatment** at any long-term care facility, nursing home, spa hydro-clinic or sanatorium that is not a **hospital/treatment centre**.
  36. **Medical conditions** either directly or indirectly arising from or associated with alcohol, solvent abuse, and/or drug dependency.
  37. Any claim if the **insured person** does not seek and follow the medical advice of a **medical specialist** relating to the **treatment** of a specific condition.
  38. Self-inflicted injuries, illness, disease or any condition intentionally self-inflicted or self-infected or arising from suicide attempts, including **treatment** required as a result of attempted suicide.
  39. Psychiatric Treatment – **treatment** associated with psychiatric conditions and any **related medical condition**.
  40. **Treatment** directly or indirectly arising from, or as a consequence of:
    - a. War, riots, civil disturbances, **terrorism** or acts against any foreign hostility, whether war has been declared or not.
    - b. **Terrorism** whether or not this involves the use or release or threat thereof of any nuclear weapon or any chemical or biological agents.
    - c. Natural perils and nuclear risks.
  41. **Treatment** directly or indirectly arising from, or as a consequence of, a pandemic illness.

Continued overleaf

42. **Treatment** required as a consequence of any criminal action the **insured person** has undertaken.
43. **Treatment** directly or indirectly arising from or as a consequence of:
- Work that involves handling explosives, toxic chemicals, deep-sea diving or outdoor activity at heights above 50 feet.
  - Professional Sports where a fee is received for training or playing.
  - Injury sustained whilst participating in dangerous or hazardous sporting activity including, but not limited to: mountaineering; rock climbing; motor sports, including motor cycle sport; aviation, other than as a fare paying passenger; ballooning; bungee jumping; hang gliding; microlighting; parachuting; paragliding or parasailing; potholing or caving; power boat racing; white water rafting; competitive yachting or sailing; bobsleighbing; competitive canoeing or kayaking; judo or martial arts; scuba diving or extreme sports such as free-diving, base jumping, ski-racing and ice climbing.
44. Any claim arising from a sexually transmitted disease.
45. Breast augmentation or breast reduction, whether or not required for psychological or religious purposes or following accident, illness or injury. Also, cover will not be provided for **treatment** either directly or indirectly arising from or associated with breast augmentation or breast reduction.
46. **Treatment** associated with AIDS or HIV infection.
47. **Treatment** for weight loss e.g. gastric bands, gastric by-pass.
48. Laser eye surgery or any procedure for the correction of eyesight e.g. myopia, hyperopia, astigmatism or presbyopia.

49. Sleep disorders e.g. **treatment** for sleep apnoea or snoring.
50. Preventative **treatment** (prophylactic **treatment**).
51. Monitoring of any disease, illness or injury when there are no active symptoms.
52. **Treatment** that is experimental or that has not been approved by the National Institute for Health and Care Excellence (NICE).

## 7. Making a complaint

**We** are committed to providing the highest possible level of service to **our** customers.

However, if the services provided do not meet **your** expectations please contact **our** Customer Care Team at Westfield Health, Westfield House, 60 Charter Row, Sheffield, S1 3FZ or call them on **0114 250 2000**.

**Our** complaints procedure will be sent to **you** on request. If **you** remain dissatisfied with **our** final response **you** can refer **your** complaint to the Financial Ombudsman Service by visiting [www.financial-ombudsman.org.uk](http://www.financial-ombudsman.org.uk) or writing to Insurance Enquiries Division, Exchange Tower, London E14 9SR. The Ombudsman will only consider **your** complaint after **you** have written confirmation that **our** internal complaints procedure has been applied in full or if it takes **us** longer than eight weeks to resolve **your** complaint.

## 8. Compensation

Westfield Health is covered by the Financial Services Compensation Scheme.

In the unlikely event that **we** are unable to meet **our** obligations, **you** may be able to claim compensation. Further information is available from the Financial Services Compensation Scheme, 10<sup>th</sup> Floor, Beaufort House, 15 St Botolph Street, London EC3A 7QU and by visiting [www.fscs.org.uk](http://www.fscs.org.uk).

## 9. General Conditions

### Governing Law

Once **your** application to register for the **plan** has been accepted by **us**, this **agreement** shall be governed by and construed in accordance with the laws of England and the parties irrevocably and unconditionally submit to the exclusive jurisdiction of the courts

of England in respect of any dispute or difference between them arising out of this **agreement**.

### General Conditions

From time to time upon renewal it may be necessary for **us** to increase the amount of the premium for the **plan**, alter the benefits payable under the terms of the **plan** or amend the rules relating to the **plan**. If **we** decide to make any such changes **we** will give **you** reasonable notice to enable **you** to decide if **you** do not wish to continue **your policy**, except when it is not possible for **us** to do this, for example changes required by law.

A person who is not a party to this **agreement** shall not have any rights under or in connection with it by virtue of the Contracts (Rights of Third Parties) Act 1999 except where such rights are expressly granted in these terms and conditions but this does not affect any right or remedy of a third party which exists, or is available, apart from that Act. The rights of the parties to terminate, rescind or agree any variation, waiver or settlement under this **agreement** is not subject to the consent of any person that is not a party to this **agreement**.

### Marketing Preferences

**We** may occasionally use **your** At Westfield Health, **we** help people to lead healthier lives and feel their best. **We** occasionally send out communications with ideas and information on health and wellbeing, plus special offers that **we** think are of value to **you**, invitations to take part in **our** research panel Westfield Insiders, and on the products **we've** designed to help keep **you** and **your** loved ones healthy and happy.

**We'll** never make **your** data available to anyone outside Westfield Health for them to use for their own marketing purposes, **we'll** treat **your** data with respect and will keep **your** details safe and secure.

**You** can let **us** know what **you** want to hear about and how **you** want to hear about it by visiting [westfieldhealth.com](http://westfieldhealth.com) to register or log in to **My Westfield** where **you** can also update **your** details.

**We'd** like to bring to **your** attention **our** Privacy Policy which details how **your** data is used and stored, and how to exercise **your** privacy rights.

Visit [www.westfieldhealth.com/about-us/legal/privacy-policy](http://www.westfieldhealth.com/about-us/legal/privacy-policy).

Westfield Contributory Health Scheme Ltd (company number 303523), Westfield Health & Wellbeing Ltd (company number 9871093) are collectively referred to as Westfield Health and are registered in England & Wales.

### Language

In accordance with regulatory guidance **we** confirm the language **we** will use for communication purposes. It is: English.

### Additional Information

**We** are required to notify **you** that there may also be other taxes or costs which are not paid through, or imposed by, the insurance underwriter.

## Definitions

This section explains the special meaning that **we** have given to words in **bold type**.

### E

**United Kingdom** pounds sterling.

### Acute condition

A disease, illness or injury that is likely to respond quickly to treatment which aims to return you to the state of health you were in immediately before suffering the disease, illness or injury, or which leads to your full recovery.

### Advice

Any consultation regarding a **pre-existing condition** or **related medical condition** from a **GP, medical specialist**, therapist or allied healthcare specialist: this includes the issue of any prescription or repeat prescription.

### Agreement

The contract between Westfield Health and **you** for the provision of the Hospital Treatment Plan cover governed by the terms and conditions set out in this guide.

### Angiography

A method of assessing the patency and characteristics of selected blood vessels by the injection of contrast medium.

### Angioplasty

A method of attempting to alter the blood flow through a blood vessel by using either, or a combination of, a balloon, stent or laser.

### Annual renewal date

Paying for your own cover – the anniversary of the **policyholder's commencement date**.

or

Group Schemes – the anniversary of the date that the employer's Hospital Treatment Plan contract with **us** commenced. The same date applies to all **policyholders/dependants** whose cover is paid for by that employer.

### Bilateral procedures

The identical **medical procedure** occurring on different sides of the body.

### Cancer

A malignant tumour, tissues or cells, characterised by the uncontrolled growth and spread of malignant cells and invasion of tissue.

### Chronic condition

A disease, illness or injury that has **one or more** 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 your rehabilitation or for you 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

### Commencement Date

The date that the **insured person** first becomes insured under this **policy**

or

The date that the **insured person's** cover starts again in the event that their cover is cancelled, lapses, or is not renewed.

### CT scan

Computed tomography (also known as **CT, CT scan**, CAT, or computerized axial tomography) scan using x-rays to produce precise cross sectional images of anatomical structures, including the interpretation of that scan by a **medical specialist**.

### Day patient

A patient who is admitted to a **hospital/treatment centre** because they need a period of medically supervised recovery, but does not occupy a bed overnight.

### Dependants

The **policyholder's partner** and/or **dependent children**.

### Dependent child

A child who:

Is **your child, your partner's** child, a child that **you/your partner** have legally adopted or have legal guardianship of

And on their **commencement date** and on the **policy's annual renewal date**:

- Is at least one year old **and**
- Is under 21 years old (or under 25 years of age if they are in full time education) **and**
- Is not married/not in a civil partnership **and**
- Is living with **you** or is financially dependent on **you**

Continued overleaf

If a **dependent child** loses eligibility their cover will finish at the end of that **policy year**.

### Diagnosed/diagnosis/diagnostic

The unequivocal discovery and identification of a **medical condition** from the examination of symptoms using investigations such as x-rays or blood tests, by a **medical specialist**.

### Diagnostic tests

Investigations, such as x-rays or blood tests, to find or to help to find the cause of the **insured person's** symptoms.

### Emergency procedures

Procedures usually carried out in an Accident and Emergency Department or procedures carried out following admission into a **hospital/treatment centre** via an Accident and Emergency Department or procedures carried out following same-day referral to the **hospital/treatment centre** by a **GP** or **medical specialist** or any other person.

### Endoscopic procedures

Procedures using an illuminated optical instrument used for internal investigations or for assistance with procedures associated with body cavities or organs. Some **endoscopic procedures** not carried out under general anaesthetic are not covered (see section 6, Policy Exclusions).

### GP

General Practitioner i.e. a physician registered with the General Medical Council, who is currently in general practice and is not a **medical specialist**.

The **GP** must not be **you**, **your partner** or a member of **your** family.

### Hospital/treatment centre

A medical facility that:

- Has permanent facilities for caring for patients as an **in-patient** and/or a day case patient **and**
- Has facilities for medical practitioners to diagnose and treat injured or sick people **and**
- Provides nursing services from qualified nurses/midwives who are on the Nursing and Midwifery Council (NMC) register (or an equivalent register if the **hospital/treatment centre** is outside the **UK**, Channel Islands

or Isle of Man) **and**

- Is **not** a nursing home; **hospice**; convalescent home; residential care home; prison; health spa/hydro.

### In-patient

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

### Insured Person

The **policyholder** and any of the **policyholder's dependants** whose premiums have been paid for cover on this **policy**, as listed in **your policy certificate**.

### Medical condition

Any symptom, illness, disease or injury.

### Medical procedure

For the purpose of this **plan** a **medical procedure** is:

An intervention carried out by a **medical specialist** in a **hospital/treatment centre** involving one or more of the following:

- A general anaesthetic
- A regional or local anaesthetic in conjunction with an incision involving a surgical knife
- An **endoscopic procedure**
- **Angiography** and **angioplasty** (treatment of blood vessels)

The **medical procedures** covered by this **policy** are listed in the **schedule of procedures** that is available to download at [www.westfieldhealth.com/hospital-treatment-plan](http://www.westfieldhealth.com/hospital-treatment-plan).

A printed copy is available on request from Westfield Health.

Please refer to section 6, Policy Exclusions for details of **treatment** that the **plan** does not cover.

### Medical specialist

A Doctor who:

- Holds an NHS Consultant post **and**
- Is on the Specialist Register held by the General Medical Council **or**
- Who is otherwise approved by Westfield Health prior to any **medical procedure**

### MRI scan

Magnetic resonance imaging scan producing images of anatomical structures, including the interpretation of that scan by a **medical specialist**.

### NHS (National Health Service)

The NHS (National Health Service) means the free-to-use public health service in the **UK**.

### NHS treatment

NHS-subsidised **outpatient events/medical procedures**.

### Outpatient events

- A visit to a Consultant who is a **medical specialist**
- An **MRI scan**
- A **CT scan**
- A **PET scan**
- A **diagnostic test** (Premier cover ONLY)

### Partner

- A person **you** live with that **you** are married to, or a person that **you** permanently live with as if **you** are married to them

**or**

- A person **you** live with in a civil partnership, or a person that **you** permanently live with as if **you** are in a civil partnership

### PET scan

Positron emission tomography producing images of anatomical structures, including the interpretation of that scan by a **medical specialist**.

### Plan

The Hospital Treatment Plan cover detailed in this guide.

### Planned/Planned treatment

Means any **medical condition** for which an **insured person**:

- Has a date scheduled for an **outpatient event/medical procedure** **or**
- Is on an NHS waiting list for an **outpatient event/medical procedure** **or**
- In the 3 months period prior to their commencement date, has been told by a **GP** or **medical specialist** that reasonable medical opinion would consider may require an **outpatient event/medical procedure**

### Policy

The contract, comprising of the **policy certificate** and terms and conditions in this guide, between Westfield Health and:

- **You** if **you** are paying **your** own premiums
- The employer if they are paying the premiums for **you/your dependants**

### Policy certificate

The document accompanying **your policy** which lists each **insured person**; each **insured person's commencement date**; any special provisions relating to **your cover** and/or **your dependants'** cover.

### Policy year

12 Calendar months from:

- The **policyholder's commencement date** if **you** are paying **your** own premiums
- The start of the group **scheme** if the employer is paying **your** premiums
- The **annual renewal date**

### Policyholder

The person named as the **policyholder** on the **policy certificate** in whose name the **plan** is held.

### Pre-existing condition

Any disease, illness or injury for which:

- An **insured person** has received consultation, medication, monitoring, **advice** or **treatment**

or

- An **insured person** has experienced symptoms - in the 3 years prior to the **insured person's commencement date** (whether the condition has been **diagnosed** or not).

### Private hospital

An independent **hospital/treatment centre** or NHS pay bed, or any other establishment which Westfield Health may decide to treat as a **private hospital** for the purpose of the **plan**.

### Private treatment

An **outpatient event** or **medical procedure** that is not **NHS treatment** whether in an **NHS hospital/treatment centre** or a **private hospital**.

### Private treatment package

The **private treatment** arranged by **us** for the **insured person's medical procedure** in a **private hospital**. Please refer to page 6 and 7 for more information.

### Related medical condition

Any condition, symptom, disease, illness or injury, which is medically considered to be associated with another condition, symptom, disease, illness or injury.

### Schedule of procedures

The Hospital Treatment Plan **schedule of procedures** classifying **medical procedures** according to their complexity. Band 1 are the least complicated procedures and Band 12 the most complicated procedures. The Hospital Treatment Plan **schedule of procedures** is available to download at [www.westfieldhealth.com/hospital-treatment-plan](http://www.westfieldhealth.com/hospital-treatment-plan). A printed copy can be requested from Westfield Health.

### Specialist Consultation

An assessment of **your** health by a **medical specialist** in the form of a medical history and, if required, manual examination.

### Surgical complication

An adverse and unintended medical event resulting directly from the **medical procedure**, which requires medical or surgical intervention.

### Terrorism

An act of **terrorism** means an act, including but not limited to the use of force or violence and/ or the threat thereof, of any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organisation(s) or government(s), committed for political, religious, ideological, or ethnic purposes or reasons including the intention to influence any government and/or to put the public, or any section of the public, in fear.

### Treatment

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

### UK/United Kingdom

The **United Kingdom** of Great Britain and Northern Ireland i.e. England, Scotland, Wales and Northern Ireland.

### We/us/our

Westfield Contributory Health Scheme Ltd., or someone appointed by **us** to administer **your** Hospital Treatment Plan cover.

### You/your/yourself

The named Hospital Treatment Plan **policyholder**.

## Our Privacy Policy

### Who we are:

“Westfield Health” (referred to as “we”, “us” or “our”) is a trading name of: Westfield Contributory Health Scheme Ltd, Westfield House, 60 Charter Row, Sheffield, S1 3FZ. Company Registration Number: 0303523. ICO registration number: Z5678949.

We have a Data Protection Officer who can be contacted in the following ways should you have any questions, complaints or feedback about your privacy. Please email: [dpo@westfieldhealth.com](mailto:dpo@westfieldhealth.com) or write to them via the above address.

### What information we collect:

In relation to your plan, you may provide us with your personal details including:

- Your title, full name, postal and billing addresses, email address, phone number and date of birth;
- Your payment details;
- Information in relation to your health, including any pre-existing medical conditions;
- Details in relation to your partner, friends or dependents for the purposes of adding them to your plan/policy or in order to create their own. Where you have provided information about another person you should ensure that you have their approval to do so.

### How we use it:

Information provided to us or collected in relation to your plan will be used by Westfield Health, or selected third parties to:

- Fulfill your order;
- Provide the benefits for which you have applied;
- Manage and maintain your records;
- Manage the underwriting and/or claims handling procedures (including your dependants' claims);
- Handle complaints and improve customer service;
- Administer marketing on behalf of Westfield Health. (You can change your details and preferences at anytime by logging into and using your “My Westfield” account or by calling our friendly Customer Helpline on **0114 250 2000**);
- Prevent and detect fraud;

- Understand our customers better in order to provide tailored communications, a better experience and to improve our services.

We will record, and monitor telephone calls made to and from Westfield Health's sales and customer service teams. We do this in order to continuously improve our service to customers and for training purposes. This will also include the recording and monitoring of data relating to health and medical conditions. We do not record the element of telephone calls where any form of payment is being made.

We may share information, including your health and medical information, with third parties or individuals. These may include:

- Other insurance providers in order to process your claims;
- For purposes of national security; taxation; criminal investigations or when we are obliged to do so by law;
- To prevent and detect fraud. This will include the recording and monitoring of Special Category data, such as health and medical conditions for all claims processed under your plan;
- Your employer (if they are paying some or all of the premium for your cover) where we have a reasonable belief that the claims activity is in serious breach of our terms and conditions and/or may be fraudulent;
- Marketing agencies or mailing houses acting on our behalf.

We'll never make your personal data available to anyone outside Westfield Health for them to use for their own marketing purposes without your prior consent.

### How we look after your data:

We have achieved ISO27001 certification and we will protect the data that you entrust to us at all times via appropriate security measures and controls. We'll also ensure through the contracts we have in place, that other businesses we work with are just as careful with your data.

All the personal data we process is processed by our staff in the UK and stored on servers located inside the European Economic Area (EEA).

### How long we keep your data:

We will keep your personal data for a number of purposes, as necessary to allow us to carry out our business. Your information will be kept securely for up to 6 years following the date you cease to remain an active customer, after which time it will be archived, deleted or anonymised. In some cases for the purposes of processing your existing or future claims and for underwriting purposes, we may keep personal information for longer. Where we, at present, cannot technically erase the data we will ensure this is securely archived with restricted access.

### Your Rights:

- **Right to be Informed:** We will always be transparent in the way we use your personal data. You will be fully informed about the processing through relevant privacy notices.
- **Right to Access:** You have a right to request access to the personal data that we hold about you and this should be provided to you. If you would like to request a copy of your personal data, please contact our Data Protection Officer.
- **Right to Rectification:** We want to make sure that the personal data we hold about you is accurate and up to date. If any of your details are incorrect, please let us know and we will amend them. You can also visit the “My Westfield” section of the website and update your details at any time.
- **Right to Erasure:** You have the right to have your data 'erased' in the following situations:
  - Where the personal data is no longer necessary in relation to the purpose for which it was originally collected or processed.
  - When you withdraw consent.
  - When you object to the processing and there is no overriding legitimate interest for continuing the processing.
  - When the personal data was unlawfully processed.
  - When the personal data has to be erased in order to comply with a legal obligation.If you would like to request erasure of your personal data, please contact our Data Protection Officer. Please note that each request will be reviewed on a case

by case basis and where we have a lawful reason to retain the data or where exceptions exist within our retention policy, then it may not be erased.

- **Right to Restrict Processing:**

You have the right to restrict processing in certain situations such as:

- Where you contest the accuracy of your personal data, we will restrict the processing until you have verified the accuracy of your personal data.
- Where you have objected to processing and we are considering whether Westfield Health's legitimate grounds override your legitimate grounds.
- When processing is unlawful and you oppose erasure and request restriction instead.
- Where Westfield Health no longer need the personal data but you require the data to establish, exercise or defend a legal claim.

- **Right to Data Portability:** You have the right to data portability in certain situations. You have the right to obtain and reuse your personal data for your own purposes via a machine-readable format, such as a .CSV file. If you would like to request portability of your personal data, please contact our Data Protection Officer, this only applies:

- To personal data that you have provided to us;
- Where the processing is based on your consent or for the performance of a contract; and
- When processing is carried out by automated means.

- **Right to Object:** You have the right to object to the processing of your personal data in the following circumstances:

- Direct marketing (including profiling). Remember you can opt out at any time from marketing communications via our Marketing Preferences, available in "My Westfield"; and
- Where the processing is based on legitimate interests.

- **Rights in Relation to Automated Decisions Making Including Profiling:**

You have the right to not be subject to a decision when it is based on automated processing.

If you have any questions in relation to how your information is processed in this way, then please contact our Data Protection Officer.

### **Not Happy?**

If you feel that "Westfield Health" has not upheld your rights, we ask that you contact our Data Protection Officer so that we can try and help.

If you are not satisfied with how Westfield Health processes your data, or believe we are not processing your data in accordance with the law you have the right to lodge a complaint with the Information Commissioner's Office (ICO). Please visit: [www.ico.org.uk](http://www.ico.org.uk).



## Notes

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Remember, our  
friendly Customer  
Care Team is here  
to help.

.....



**Online**

[westfieldhealth.com](https://westfieldhealth.com)

.....



**Email**

[enquiries@  
westfieldhealth.com](mailto:enquiries@westfieldhealth.com)

.....



**Phone**

0114 250 2000  
8:30am-5:30pm,  
Mon-Fri (except  
public holidays)



Registered Office.  
Westfield Health  
Westfield House  
60 Charter Row  
Sheffield  
South Yorkshire  
S1 3FZ

Westfield Health is a trading name of Westfield Contributory Health Scheme Ltd and is registered in England & Wales company number 303523. We are authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Our financial services registration number is 202609.

Westfield Health is a registered trademark.