

Insurance Product Information Document

Company: Westfield Health Product: Westfield Employee Purchased Health Plan

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 (PRA) and regulated by the Financial Conduct Authority (FCA) and the PRA. Details of this registration can be found by accessing the Financial Services Register online at either the PRA or the FCA websites or by contacting the PRA on 020 7601 4878 or the FCA on 0800 111 6768. Our financial services registration number is 202609.

Full details of the pre-contractual and contractual information on this product are detailed in the Terms & Conditions in the plan guide.

What is this type of insurance?

Routine Healthcare Insurance



What is insured?

- ✓ A health cash plan provides cover for routine healthcare. This includes new glasses, dental treatment, physiotherapy, payments to help gain faster access to diagnosis and treatment.
- ✓ These payments are based on the amount of benefit available on the level of cover selected by you coupled with the reimbursement rate for that benefit.
- ✓ The plan guide details the particular benefits and claims limits. The plan also includes a range of services designed to help support your overall health and wellbeing.



What is not insured?

- ✗ Pre-existing medical conditions except on Optical, Dental and some services
- ✗ Payments for more than the benefit balance you have available, you will receive a variable percentage reimbursement, detailed in your benefit table up to your maximum allowance, for a range of everyday healthcare expenses
- ✗ For a full description of what is not covered please refer to your Terms and conditions



Are there any restrictions on cover?

- ! Pre-existing medical conditions are not covered for some benefits
- ! Qualifying periods apply to most benefits
- ! You must be aged 16-65 to apply for cover or to upgrade your cover
- ! Claims must be received within 13 weeks of the date of each payment made for treatment, goods or services provided by a practitioner
- ! You must live in the UK, Jersey or Isle of Man for a minimum of 180 days each year
- ! Dependent children covered up to their 18th birthday



Where am I covered?

- ✓ Claims can be submitted if you are temporarily outside of the UK, Jersey or Isle of Man. You must be resident in the UK, Jersey or Isle of Man.



What are my obligations?

- Premium payments must be made
- Update us with any change in your contact details
- Claims must be received within 13 weeks
- Claims must be submitted with supporting information required such as receipts



When and how do I pay?

- Premiums are paid monthly.
- Premiums are paid from your salary via your employer or paid by your bank account via direct debit, depending on the payment method agreed for your plan.



When does the cover start and end?

- Cover starts from the date stated on your welcome letter, it will be the first of the month, this is a monthly renewable contract
- Cover ends when
 - You cancel your cover
 - We cancel your cover
 - We don't receive premiums



How do I cancel the contract?

- To cancel your policy please contact our Customer Care Team on 0114 250 2000, email us or write to us at our address.
- If we receive notice that you wish to cancel before the 15th day in any month we will cancel your monthly contract for that month and refund the premium paid by you for that month. If we receive notice of cancellation on or after the 15th day of the month, then we will not refund your premium for that month but any further premiums will not be payable. Any premium that you have paid, in advance or that is not due following cancellation will be refunded to you. We will not pay a claim for any benefit beyond the date that you have paid up to.