



Employees' Guide to HealthFund



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Your employer has chosen to provide you with access to comprehensive private healthcare benefits, provided by HealthFund Limited, which is authorised and regulated by the Financial Services Authority.

This Guide gives you an overview to your employer's HealthFund scheme.

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HEALTHFUND MEDICAL HELPLINE NUMBERS:

24 hour Medical Helpline (General Enquires):

Medical Advice Helpline please phone:

0845 070 4635

(Open 24 hours)

General advice and information on a wide range of medical issues

Medical Claims Helpline (Specific Treatment Enquiries):

Medical Claims Helpline please phone:

0845 070 4634

(Open 9am-5pm – Monday to Friday)

Specific advice and assistance on proposed treatments or claims

1. How does the HealthFund scheme work?

How does it work for you as a member?

As a member of your employer's HealthFund scheme the provision of private healthcare benefits will work in a similar way to any other private medical insurance arrangement. If you require medical consultations or treatments which are eligible under the insurance then these are provided for you within the terms of the scheme. The detail will be explained later in this Guide.

Your Employee Insurance Schedule will show the level of excess that your employer has chosen but this does not affect your own benefits as treatment costs below this level will be paid for from your employer's HealthFund Account (see below).

Your employer may, at their discretion, ask you to contribute towards treatment costs but if this is the case you will be notified separately of this.

How does it work for your employer?

However, for your employer, a HealthFund scheme works slightly differently than most private medical insurance schemes, in that they have chosen to meet the costs of the first part of any claim up to the insurance excess level. A segregated HealthFund Account has been set up by your employer to meet these costs. The costs of treatments above the chosen excess level will be paid for by the insurance in the normal way.

This combination of a higher excess insurance level (the choices are £1,500, £3,000 and £5,000) and a HealthFund Account is a very efficient way of your employer providing comprehensive private healthcare protection as it has an element of "self-insurance". For many very large employers a degree of "self insurance" is the norm so there is nothing unusual in this arrangement, except that HealthFund has now brought the concept to all employers.

Who is the insurer?

The insurance is provided by Lloyd's of London syndicates managed by Hardy (Underwriting Agencies) Ltd.

2. What is covered by the health insurance?

The insurance covers acute medical conditions only. An acute medical condition is a disease, illness or injury that is likely to respond quickly to treatment and aims to return the member to the state of health they were in immediately before suffering the disease, illness or injury, or which leads to a full recovery.

Insurance Benefit Table

Below is a table summarising the comprehensive benefits covered by the insurance. This covers the costs of eligible treatment above the employer's chosen excess level. See the Policy Conditions (Certificate of Insurance) for full terms and conditions. These can be viewed or downloaded from the HealthFund website at www.healthfund.co.uk

Benefits*	Cover above chosen excess
Inpatient and Day-patient Treatment	
Hospital Treatment	Covered
Specialists Fees	Covered
Diagnostic Tests	Covered
Diagnostic Scans	Covered
Psychiatric Treatment	£10,000 lifetime limit (includes Inpatient and Outpatient treatment)
Outpatient Treatment	
Specialist Consultations	Covered
Diagnostic Tests	Covered
Diagnostic Scans	Covered
Therapies: to include Physiotherapy, Osteopathy, Acupuncture, Chiropody/Podiatry, Chiropractic Care, Homoeopathy	Covered (covered up to 8 sessions on GP referral, thereafter the referral of a Specialist or Consultant is required)
Outpatient Procedures	Covered
Pre-Admission Tests	Covered
Psychiatric Treatment	£10,000 lifetime limit (includes Inpatient and Outpatient treatment)
Cancer Treatment	
Radiotherapy and Chemotherapy	Covered
Additional Benefits	
Nursing at Home	Covered
Private Road Ambulance	Covered
Parent & Child accommodation (for a Child aged 16 or under)	Covered

*** Notes on the Benefits:** Many Private Hospitals have different priced rooms in much the same way as hotels do so members are covered as an inpatient for accommodation in a standard single en-suite room, where the hospital is able to provide this facility. Your HealthFund medical team will be able to confirm this when you speak to them and to provide help and guidance.

The vast majority of Specialists in private practice charge fees which fall within a pricing structure which, with our wide experience, we would regard as "customary and reasonable". Where a Specialist charges in excess of this "customary and reasonable" fee structure for a specific procedure we may not be able to meet the full cost. Once again the HealthFund medical team will be able to confirm this when you speak to them.

What isn't covered?

As with other health insurance policies, your insurance does not cover chronic long term medical conditions and has certain exclusions built in to the standard cover. Depending on the underwriting method your employer chose there may be additional exclusions for pre-existing conditions. This is covered in the next section. (See the Policy Conditions for a full explanation of cover)

How do the underwriting choices affect my cover?

Your employer will have chosen between three underwriting options: Moratorium, Full Medical Underwriting (FMU) or in certain circumstances, Continued Personal Medical Exclusions (CPME).

HealthFund will be pleased to give guidance as to the operation of these underwriting options in the context of specific existing conditions. For example, unlike some insurers we do not routinely exclude heart conditions and stroke where an individual was simply taking statins to control raised cholesterol, or medication to control blood pressure.

The underwriting choice which applies to you is shown on your Employee's Insurance Schedule, which is given to you when the insurance commences.

Moratorium:

Under a Moratorium basis, treatment for any pre-existing conditions for which you received treatment and/or medication, or asked advice, or had symptoms during the 5 years prior to the commencement date of your insurance, will be excluded from cover.

Following the commencement date of the insurance, if you remain free from treatment, advice, symptoms and medication for any pre-existing conditions, and any directly related conditions, for two continuous years, cover under the insurance for such pre-existing conditions shall be reinstated.

You should not delay seeking medical advice or treatment for a pre-existing medical condition simply to obtain cover under this insurance.

As with FMU and CPME, new medical conditions arising after the start of your insurance will be covered immediately subject to the Policy Conditions.

Full Medical Underwriting (FMU):

Under a FMU basis, you will have made a full medical declaration, which will include pre-existing conditions, on a health questionnaire. As a result certain additional exclusions for any existing medical conditions may be applied, which will be stated on your Employee's Insurance Schedule.

Any new medical conditions arising after the insurance commencement date will be covered immediately subject to the Policy Conditions.

Continued Personal Medical Exclusions (CPME):

On a scheme which has switched to HealthFund on a CPME basis, any exclusions imposed by a previous insurer on any member (the Insured Person) will continue to be excluded from cover. In all CPME cases a Moratorium underwriting basis will additionally apply to any treatments required which are directly or indirectly related to cancer, stroke or heart conditions where these were "pre-existing conditions", as defined in the Policy Conditions, at the time of the switch to HealthFund.

In the case of the previous insurer operating on a moratorium basis, a Moratorium underwriting basis will also apply to this insurance.

New entrants to a HealthFund scheme which has a CPME basis of underwriting will be underwritten on a Moratorium basis if they were not covered under the previous scheme.

Any new medical conditions arising after the insurance commencement date will be covered immediately subject to the Policy Conditions.

3. What is my taxable Benefit in Kind (P11D)?

The principle your employer is required to use under a HealthFund scheme to calculate the P11D "Benefit in Kind" is the same as that of a traditional health insurance scheme in that the tax charge is based on the total cost of your scheme benefit to your employer.

In calculating the costs of the HealthFund scheme in each tax year the employer will add the total cost of the insurance premiums to the total cost of any treatments they have paid out below the insurance excess, if any, to arrive at a total cost for the whole scheme in that year. This will then be apportioned on a pre-determined basis between the members of the scheme and this cost for each employee, and any dependants, will be shown on the employee's P11D form. You will then have an income tax liability on this amount in the usual way.

As an employer is likely to take out a HealthFund scheme because the insurance premiums are lower than under a traditional plan, the employee tax charge will also be lower unless the treatments paid out of the HealthFund Account for the scheme exceed the insurance premium savings. So the interests of the employees and the employer are aligned in keeping costs down whilst maintaining comprehensive cover for members.

4. What happens if I need treatment or medical support?

All HealthFund members, including employees' dependants, if included in the scheme, will have full access to two Medical Helplines, both staffed exclusively by nurses and doctors.

Note: The Medical Helplines are only available to HealthFund members, so you should have your membership details to hand before you call.

The Medical Advice Helpline, which is open 24 hours a day, should be used for general enquiries about symptoms and individual concerns, travel health and lifestyle health issues, information on post-operative treatments and patient drugs, as well as access to our comprehensive medical information database.

Medical Advice Helpline please phone:

0845 070 4635

(Open 24 hours)

General advice and information on a wide range of medical issues

The Medical Claims Helpline should be used when you require a specific treatment or where you need to make a claim under your health insurance. Our nurses will guide you through the necessary steps to identify and book relevant treatments and handle your health insurance claims. They can also provide the same range of advice and assistance available via the Medical Advice Helpline. The Medical Claims Helpline is open during weekdays, between 9am and 5pm as this coincides with the usual opening hours of private hospital administrative units who handle the booking of treatment for patients.

Medical Claims Helpline please phone:

0845 070 4634

(Open 9am-5pm – Monday to Friday)

Specific advice and assistance on proposed treatments or claims

Important Note: See the further information below on the importance of using the Medical Claims Helpline

What happens if my GP or specialist says I need medical treatment?

The HealthFund medical team are there to help all members make sure that HealthFund works best for them.

If your GP or specialist says you need to have medical treatment, please call us as soon as you can on **0845 070 4634** between 9am and 5pm, Monday to Friday. If you are unable to do this then please ask someone else to do it on your behalf. This should be a relative or person involved with your medical treatment.

It is very important that you do this because any treatment that is likely to be covered under your health insurance must be pre-authorised via the HealthFund medical team before you commit to it. If you go ahead without talking to us, you may incur costs which may not be covered and you could suffer a financial loss.

There are also many other personal reasons why you should contact the HealthFund medical team, as we have a unique approach to providing our members with help and assistance when they need it.

One of the big differences you'll find when you call us about medical treatment or advice, is that you will always be speaking to a medically qualified nurse or doctor about your condition, rather than a claims assessor with no medical qualifications.

What will the Medical Claims Helpline do when I call?

- ✓ Answer questions you or your relative may have forgotten to ask the doctor or specialist
- ✓ Let you know whether the condition will be covered by the insurance
- ✓ Provide information on all conditions and treatment options
- ✓ Provide information on the NHS and private facilities that could treat you quickly.
- ✓ Pay all bills
- ✓ Arrange a second opinion, where needed
- ✓ Be your advocate throughout the whole process

As part of our service, we'll arrange treatment for you with the hospital or consultant at a time that suits you, and we'll pay the hospital and consultants directly, so all that you have to worry about is getting better.

Why is it important to have medically qualified staff on our Medical Helplines?

It helps to speed up the process of understanding the medical conditions you need help with. This saves time and possible frustration at a stressful time. It is also far less embarrassing to give personal details about a medical condition to a medical professional.

With medically qualified staff it means that in most cases we can authorise treatment under your insurance right away, providing the illness is covered by the insurance.

If you prefer to choose the NHS for your treatment, our staff know how the NHS works and the bottlenecks that can cause delays to treatment and advise you accordingly.

What information can you provide about the NHS?

We can routinely provide, where publicly available, information on NHS services so that you can make informed decisions about where and when you have your treatment. This information includes but is not limited to:

- ✓ Waiting lists for consultants
- ✓ Hospital cleanliness and infection rates
- ✓ Mortality and Morbidity rates
- ✓ Advice on how to access relevant NHS services

5. How do I find out more?

If you need any further information about the operations of the HealthFund scheme, as it applies to you, please talk to your employer.

For general information about HealthFund or how to contact us you can visit our website at www.healthfund.co.uk. You can view the Key Facts and Policy Conditions on the site.

Schemes for employees are covered under the Business headings and Business FAQs.

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