Hospital Cash Plan Insurance



Company: Personal Assurance PLC Product: Hospital Plan Policy

This policy is underwritten by Personal Assurance PLC, John Ormond House, 899 Silbury Boulevard, Central Milton Keynes, MK9 3XL, who are registered in England and who are authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Firm reference 202682.

This document provides a summary of the key information relating to the Hospital Plan policy. Complete pre-contractual and contractual information on the product is provided in the full policy documentation.

What is this type of insurance?

This is a Hospital Cash Plan Insurance Policy. You will receive a payment if you are admitted overnight for hospital treatment or attend day patient surgery or an outpatient appointment.



What is insured?

- All accidents, all illnesses, all sports injuries and all pre-existing conditions.
- Pregnancy and childbirth.
- ✓ Up to 730 nights hospital inpatient treatent / day patient surgery benefit for each ongoing claim.
- Double first night benefit for your first night in hospital, for any new claim.
- Two hospital outpatient treatments in each calendar year.
- The benefit payable for NHS community hospital, rehabilitation units or hospice treatment is half that payable for hospital inpatient treatment.



What is not insured?

X Attempted suicide or self-inflicted injury.

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- X The consumption of Alcohol or the taking of drugs other than under medical advice.
- X Surgery or treatment for non-medical reasons.
- X The pregnancy of, or any pregnancy related condition of, an eligible child.



Are there any restrictions on cover?

- Policy ceases on your 70th birthday or your 18th birthday if you are an eligible child.
- The NHS community hospital must be in the United Kingdom.
- Inpatient treatment for mental health conditions. Alzheimer's Disease and Dementia is limited to 20 nights benefit in any 12 month rolling period.
- The maximum benefit payable is £125 per night/ for each day patient surgery.



Where am I covered?

Worldwide.



What are my obligations?

- · You must tell us as soon as reasonably possible if any of the details you have told us change.
- Your claim should be made within 6 months of the date of the treatment or discharge from hospital for the condition claimed for.



When and how do I pay?

- The premium is due on the start date of your plan.
- You will pay by payroll deduction or by direct debit.





When does the cover start and end?

- Your cover will begin once the insurer receives confirmation of your offer acceptance. Benefits can be paid once the first premium has been received.
- The term of this policy is the same as your payment frequency (weekly, fortnightly, 4-weekly or monthly). Provided you maintain the payments the policy will renew for another term.



How do I cancel the contract?

- You have the right to cancel your Hospital Plan Policy within 30 days of receiving your policy documentation. If you cancel your policy within this time you will receive a full refund of any premiums paid up to the point. Your policy will be cancelled from the start date and no benefits will be paid.
- You may cancel your policy at any time after this, but you will not receive a refund of any premiums paid, your benefits will cease from your cancellation date and any premium received by us after this date will be returned to you.

Telephone: 0800 542 5930*email:CRM@personalgroup.com*Calls to and from Personal Group may be monitored and/or recorded for quality and training purposes.