

*This is all about our*

# **Health Cash Plan**

*from Standard Life*



STANDARD LIFE



# Cash for everything from dental bills to hospital stays

## Cut healthcare bills down to size

You can virtually guarantee that you or your family will need to pay for some kind of routine healthcare every year, so our Health Cash Plan is a sensible way to help pay these bills. Yet it also covers you for non-routine healthcare expenses.

There are 24 cash benefits in all, making a cash plan an excellent way to offset your healthcare costs.

### Low cost – high payouts

A Health Cash Plan from Standard Life Healthcare costs as little as £1.77\* a week, yet pays out tax-free cash sums towards a wide range of healthcare expenses.

### Cash for everyday healthcare

Up to £80 towards dental and £100 towards optical costs per year, mean these benefits alone can add up to big savings.

### Generous sickness benefit

Health Cash Plan takes care of non-routine healthcare expenses too. For example, if you can't work because of an accident or illness, the plan will pay you up to £400 in sickness benefit to help you cope with day-to-day expenses.

### Cover for hospital stays

You'll also receive a generous cash sum if you or one of your children have to stay in hospital – money that can be used for anything you wish such as out-of-pocket expenses or even a holiday to help you recuperate.

### Even covers alternative treatment

You'll even find cover for physiotherapy and alternative treatment – up to £300 a year for acupuncture, osteopathy, chiropractic and homeopathy.

*Save 5% when you pay annually*

## Affordable premiums – from just 26p\* a day

Cover type	Level 1		Level 2		Level 3		Level 4	
	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual
One adult plus any number of children	£8.05	£91.77	£13.63	£155.35	£17.60	£200.58	£23.35	£266.13
Two adults plus any number of children	£14.95	£170.43	£25.30	£288.42	£33.35	£380.19	£44.85	£511.29

Annual premiums are shown with 5% discount deducted.

\* Based on the annual premium for one adult with Level 1 cover.

# Cash for everyday health expenses

## Easy to claim – prompt payouts

Claiming your cash benefits is quick and easy. Simply settle a bill then send the original receipt to us with a claim form. We'll pay the amount covered by your plan directly into your bank account.

## No medical needed – and your premiums won't increase because of your age

The Health Cash Plan is open to anyone aged between 18 and 65, with no medical required and acceptance guaranteed as long as you are resident in the UK, including the Channel Islands and the Isle of Man. Unlike other types of health cover, everyone pays the same premiums whatever their age.

## All children covered at no extra costs

No matter which level of cover you choose, all children living with you aged 18 and under are covered at no extra cost. They are entitled to 50% of the adult cash amounts detailed on page 5.

## A choice of cover to suit every budget

You can choose from four levels of cover. Each provides the same 24 benefits, but when you opt for a higher level you receive a higher cash payout.



Cover from  
only £1.77\*  
a week

## Award-winning service

Your health is our priority and we are here to help you. Don't just take our word for it – for seven years running, specialist intermediaries and independent advisers have voted us Best for Customer Service at the Health Insurance Awards 2001 – 2007.

# Look how much you could claim back each year

## Up to\*:

£7,500 for hospital stays

£400 if you are off work

£100 towards opticians' bills

£80 towards your dental costs

£300 for physiotherapy and alternative treatments

£100 for specialist consultations

£300 for each newborn child

Plus 17 other valuable cash benefits

\*Based on Level 4 cover.

## Standard Life Healthcare – making health cover affordable

### Your money back guarantee

You risk nothing when you apply for a Standard Life Healthcare policy. Once you have received your policy document, you have a full 14 days to look through it and if you are not completely satisfied with any aspect of your policy you are free to cancel. Any premium that you have paid will be refunded to you in full, provided that you have not made a claim.

### When does your cover begin?

From the date the plan begins you must wait one month before you can make your first claim, except in the case of an accident admission to hospital when you may claim immediately. You are also covered for any treatment that takes place after the one month waiting time for conditions that arose during the waiting time. This waiting time is extended to one year for maternity/paternity benefit or complications of pregnancy benefit.

*Interested?*

*– Just complete and return your application form.*



# 24 cash benefits



Benefits	Level 1	Level 2	Level 3	Level 4
<b>Sickness benefit</b>	<b>up to</b>	<b>up to</b>	<b>up to</b>	<b>up to</b>
1 Absence from work up to 10 days	£70 (£7/day)	£150 (£15/day)	£250 (£25/day)	£400 (£40/day)
<b>Treatment benefits</b>	<b>up to</b>	<b>up to</b>	<b>up to</b>	<b>up to</b>
2 Optical benefit	£25	£50	£75	£100
3 Dental benefit	£20	£40	£60	£80
4 Physiotherapy and alternative medicines <sup>†</sup>	£50	£100	£200	£300
5 Specialist consultations <sup>†</sup>	£25	£50	£75	£100
6 Chiropody <sup>†</sup>	£10	£20	£30	£50
7 GP fees	£5	£10	£20	£30
8 Allergy testing	£12	£25	£50	£75
9 Hearing aids <sup>†</sup>	£10	£20	£30	£50
<b>Care benefits</b>	<b>up to</b>	<b>up to</b>	<b>up to</b>	<b>up to</b>
10 Hospital in-patient Up to 150 nights	£1,500 (£10/night)	£3,000 (£20/night)	£4,500 (£30/night)	£7,500 (£50/night)
11 Joint hospital in-patient Up to 150 nights per couple	£6,000 (£40/night)	£12,000 (£80/night)	£18,000 (£120/night)	£30,000 (£200/night)
12 Day-patient admission Up to 10 days	£100 (£10/day)	£200 (£20/day)	£300 (£30/day)	£500 (£50/day)
13 Accident admission Up to 150 nights	£1,500 (£10/night)	£3,000 (£20/night)	£4,500 (£30/night)	£7,500 (£50/night)
14 Hospital parent accommodation Up to 150 nights	£750 (£5/night)	£1,500 (£10/night)	£2,250 (£15/night)	£3,750 (£25/night)
15 Hospital in-patient overseas Up to 30 nights per trip	£300 (£10/night)	£600 (£20/night)	£900 (£30/night)	£1,500 (£50/night)
16 Maternity/paternity benefit Payable for each newborn child	£50	£100	£200	£300
17 Complications of pregnancy Up to 150 nights per claim	£1,500 (£10/night)	£3,000 (£20/night)	£4,500 (£30/night)	£7,500 (£50/night)
18 Psychiatric in-patient Up to 21 nights	£210 (£10/night)	£420 (£20/night)	£630 (£30/night)	£1,050 (£50/night)
19 Nursing home in-patient Up to 20 nights	£100 (£5/night)	£200 (£10/night)	£400 (£20/night)	£600 (£30/night)
20 Convalescent home Up to 14 nights	£70 (£5/night)	£140 (£10/night)	£280 (£20/night)	£420 (£30/night)
21 Long stay cash One-off payment	£105	£210	£420	£630
22 Recuperation grant Payable per claim	£25	£50	£75	£100
23 Home help <sup>†</sup> Payable per family per policy year	£75	£150	£300	£450
24 Private ambulance or taxi	£12	£25	£50	£75

All amounts are maximum per insured person per policy year unless stated otherwise. The benefit amounts are halved for insured children 18 years and under.

<sup>†</sup> For each claim we will reimburse you half the amount you have paid, up to the maximum amount shown per policy year.

# Policy summary

## keyfacts<sup>®</sup>

This section contains important information about our Health Cash Plan, wherever you see this symbol you will find further information.

The policy summary does not contain the full terms and conditions of this plan; these can be found in the policy document you receive when you join us (though please feel free to ask for one sooner if you want to).

The Health Cash Plan is provided and underwritten by Standard Life Healthcare Limited and is an annual contract, which means that premiums, terms and conditions can change at renewal.

## What isn't covered

There are a few things we do not pay for under this policy. These include treatment of any medical condition or related condition you had before your policy started. Treatment of alcohol or drug abuse, and treatment for conditions associated with old age.

We do not cover treatment received during the first month of cover under this policy except in the case of an accident admission to hospital. We also do not pay for routine medical examinations or health screenings.

Full details of these and other exclusions that apply can be found in the section 'What is not covered' in the policy document you receive when you take out this plan.

### **Your 14 day money-back guarantee**

When you decide to take out a policy with us, we will process your application and send your policy documents. You will then have a full 14 days in which to check you are entirely satisfied with the cover you have chosen. During this time you may change to a different plan, or cancel without penalty. If for any reason you choose to cancel, you will be entitled to a full refund of any premium you have paid, provided you have not already made a claim.

### **Your cancellation rights**

Thereafter, you may cancel your policy at any time by telephoning or writing to us at the address below. If you pay your premium annually we will refund any unused premiums that you have already paid, on a pro-rata basis. We do not refund premiums that are paid monthly or quarterly.

### **If you need to make a claim**

If you need to make a claim you can let us know by telephoning the customer care team that deals with your policy. The number you should call is 0845 602 1155.

You will receive a step-by-step guide to making a claim in your policy document, and our customer care staff will be pleased to help you with any questions you have.

### **If you have a complaint**

If you have a complaint about your policy we have a complaints procedure in place and will make every effort to resolve the issue. In the first instance, you should contact the Customer Care Team Manager at the Standard Life Healthcare office that deals with your policy. If you are dissatisfied with the way in which your complaint is handled you may contact our Chief Executive's office either in writing to Standard Life Healthcare Limited, Marshall Point, 4 Richmond Gardens, Bournemouth BH1 1JD, or by calling our main switchboard on 0845 279 8877.

If we are unable to resolve the matter to your satisfaction, you may have the right to refer your complaint to the Financial Ombudsman Service within six months of our notifying you of our final decision. The Financial Ombudsman Service will investigate your complaint at no cost to you, and their decision is binding on Standard Life Healthcare. If you do not agree with the Financial Ombudsman's decision, you will still have the right to take legal action. Your policy is bound by English law and comes under the jurisdiction of the UK courts.

### **Your rights under the Financial Services Compensation Scheme**

As a Standard Life Healthcare policyholder you will be protected by the Financial Services Compensation Scheme. This will pay you compensation should Standard Life Healthcare, as your insurer, be unable or likely to be unable to pay your claim because we have become insolvent or gone out of business.

More details about the Financial Services Compensation Scheme can be found on their website – [www.fscs.org.uk](http://www.fscs.org.uk)

**Pensions**  
**Mortgages**  
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For further information, please contact:

# Speak soon.

For more information or if there is anything about Standard Life Healthcare you need help with, please contact your Appointed Representative or financial adviser, or go to our website:

**[www.standardlifehealthcare.co.uk](http://www.standardlifehealthcare.co.uk)**

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