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This section gives you a brief description of Health For You, health insurance from Health-on-Line. The policy is backed and underwritten by AXA PPP healthcare.

At Health-on-Line we understand health is one of the most important things to you, which is why we look after our customers.

We pride ourselves on the level of our customer service and the fantastic feedback from our customers on Feefo – we hope that you will feel your healthcare cover is in safe hands.

What’s more, being backed by AXA PPP healthcare means you have security from one of the largest health insurers in the UK.

This brochure doesn’t contain the full terms and conditions. These can be found in the policy handbook.

Customer Review

“Great service, very well explained and great value.”

Feefo, September 2017
1.1 > Summary of the Health For You policy

You can build a Health For You policy which is tailored to you. You can select as many ‘options’ as you wish to build your cover.

Your cover
With our Health For You policy we include ‘Core Cover’ as standard. ‘Core Cover’ includes your main benefits. You can then select from various ‘Options’ to tailor your policy to suit you. This means you only pay for the cover you want.

The Health For You policy covers you for treatment of new medical conditions that you get after you join.

We offer a range of underwriting options, which may provide you cover for existing medical conditions. We will be able to discuss these options with you.

» For further details please see Section 3.2, page 11.

My 24/7 Medical Helpline

Health at Hand is our dedicated medical helpline that’s available to all our members. This gives you direct telephone access to our healthcare experts for you and your family – 24 hours a day, 365 days a year.
Core cover includes:

If you are an in-patient or day-patient:

✓ Private hospital and day-patient unit fees as long as you use a hospital or day-patient unit in the hospital list
✓ No yearly limit on specialist fees as long as you use a Health For You specialist
✓ Hospital accommodation for one parent is paid in full while a child (under 16) is in hospital. We’ll also pay for one parent to stay in hotel accommodation near the hospital up to £100 a night up to £500 a year. This child must be covered by the policy and having treatment covered by it
✓ Ambulance transport when medically necessary to transport you between facilities.

If you are an out-patient:

✓ No yearly limit for surgery.

Other benefits:

✓ There are two levels of cancer cover, Comprehensive Cancer Cover or NHS Cancer Support

» For further details please see Section 1.3, page 7.
**1.2 > Summary of cancer cover on Health For You policies**

The Health For You 6 policy offers you the same benefits as Health For You but with the Six week Safety net included. The Six week Safety net means that your cover is for in-patient treatment, day-patient treatment, any surgical procedure and out-patient radiotherapy and chemotherapy, only if the NHS can’t give you that treatment within six weeks of when treatment should take place.

If you have the Health For You Six week Safety net, and the NHS can give you the hospital treatment you need within six weeks of the date on which treatment should be undertaken, then you must use the NHS.

Health For You and Health For You 6 come with two levels of cancer cover.

**Comprehensive Cancer Cover**

If you have Comprehensive Cancer Cover your cover includes:

- ✔ Radiotherapy and chemotherapy
- ✔ Surgery
- ✔ No time limit on cover for specialist cancer drugs, such as biological therapies (including Herceptin and Avastin) as long as they are used within the terms of their licence
- ✔ Specialist consultations with the specialist treating your cancer when you are an out-patient
- ✔ Unproven drug treatment – as long as you’re a participant in a clinical trial approved by an appropriate ethics committee and it’s agreed by us in advance.

» For further details please see Section 4.1a in the policy handbook.

**NHS Cancer Support**

- ✗ If you have NHS Cancer Support cover we will not pay for the treatment of cancer. You will need to use the NHS, or pay for the costs of treatment yourself.
- ✔ If you’re having cancer treatment on the NHS, there’s cover for licensed cancer drugs which the NHS will not pay for.

» For further details please see Section 4.1b in the policy handbook.
1.3 > Personalise your policy

All customers will have ‘Core Cover’ as standard. You can then tailor your policy to suit you by choosing which ‘Options’ you want. You can personalise your Health For You policy by choosing from the Options below.

Out-patient options:

**Standard out-patient**
- Up to three specialist consultations per year.
- No yearly limit on diagnostic tests or practitioner fees on specialist referral.
- CT, MRI or PET scans on specialist referral.

**Full out-patient**
- No yearly limit for specialist consultations.
- No yearly limit on diagnostic tests or practitioner fees on specialist referral.
- CT, MRI or PET scans on specialist referral.

Additional options:

**Mental Health**

**In-patient or day-patient**
- Private hospital and day-patient unit fees for psychiatric treatment up to 30 days a year.

**Out-patient**
- A combined limit of £1,000 a year for psychiatric specialist consultations and psychologist and cognitive behavioural therapist charges on specialist referral.

**Private GP Cover**
- Up to £500 a year to cover fees for visits to a private GP for consultations.
- Up to five telephone or online video consultations a year with a Doctor@Hand GP.

**Therapies**
- A combined yearly limit of £500 for out-patient physiotherapy, osteopathy, acupuncture, homeopathy or chiropractic treatment. (Up to an overall maximum of ten sessions a year when your GP refers you)

**Dentist and Optician Cashback**
- 80% of your dentist’s fees, up to £400 a year.
- 80% of the cost of prescribed glasses and contact lenses, up to £200 a year.
- Up to £25 a year for an eye test.

**European and Worldwide Travel Cover**
There are two levels of travel cover provided by AXA PPP healthcare. These give cover towards emergency medical treatment abroad.

For further details on the cover options available please refer to the policy handbook.
1.4 > The main things we don’t cover in the Health For You policies

Like all health insurance policies, there are a few things that your policy isn’t designed to cover.

We’ve listed a summary of the more significant things here.

The main things we don’t cover:

• Pregnancy and childbirth
• Treatment of cancer if you do not have Comprehensive Cancer Cover
• Treatment of medical conditions you had, or had symptoms of before you joined
• Treatment of ongoing, recurrent and long-term conditions (chronic conditions)
• Fees if you choose to use a hospital that is not in our hospital list (see 1.5).

If you have the Six week Safety net Option, we don’t cover the following, in addition to the list above:

• In-patient treatment, day-patient treatment, any surgical procedure and cancer treatment available on the NHS within six weeks of when treatment should take place
• Emergency or urgent treatment.

Customer Review

“Excellent service. Contacted me the same day as my enquiry and explained the cover options simply taking into account my requests. Further contact was arranged and cover sorted out quickly over the phone with the same account manager spoken to previously. Hassle free thank you and very reasonable prices with a good choice of cover.”

Health-on-Line Customer, Feefo
The main things we don’t cover depending on the Options you have:

- If you don’t have an Out-patient Option, you don’t have any cover for out-patient consultations or diagnostic tests including CT, MRI and PET scans
- If you don’t have the Therapies Option, you don’t have cover for fees for physiotherapists, osteopaths, chiropractors, acupuncturists or homeopaths
- If you don’t have the Mental Health Option, you don’t have cover for any psychiatric treatment
- If you don’t have the Dentist and Optician Cashback Option, you don’t have cover for dentists’ or opticians’ fees.

» For more details, see Sections 3 and 4 in the policy handbook

1.5 > Our Hospital List and Health For You specialists

The hospital list includes details of the hospitals that customers can use. We would always recommend that if you need treatment, you have it at one of the hospitals on the list. This will mean you can go ahead with your treatment knowing that their fees will be covered.

Health For You specialists are chosen specially to provide treatment to our customers. If you have treatment from them, you can relax knowing that their charges will be covered.

» For more details on the hospitals you can search our hospital list at health-on-line.co.uk/hospitals

Introducing Doctor@Hand

With our Private GP Cover Option booking a GP appointment has never been easier. Just go online whenever you like and select a time that suits you best – whether that’s while you’re at home, work or abroad.
2. Ways to reduce your premium

2.1 > Six week Safety net
This is a great way to save on your premium yet still avoid long NHS waiting times. The Six week Safety net means if in-patient treatment, day-patient treatment, any surgical procedure and cancer treatment is available on the NHS within six weeks from the date it should take place then you’ll use the NHS. However, if the wait for treatment is longer than six weeks then you can contact us to arrange for private treatment.

2.2 > Excess levels
You have the option of including an excess to reduce your premium. If you choose to have an excess, the minimum excess is £100. This means you’ll pay the first £100 of eligible claims – but only once per policy year – for each person covered. To reduce your premium further you can add an excess of £250, £500, £1,000*, £2,500* and £5,000*.

*£1,000, £2,500 and £5,000 excesses are not available with the ‘Standard Out-patient Option’.

2.3 > No Claims Discount (NCD)
There are different steps of our no claims discount (NCD) from 0% to 80%. When you join we will tell you the NCD level to which you’re entitled.
3. Important information and FAQs

3.1 > How long is my cover?
Your policy will be in place for 12 months from the start date on your statement.

3.2 > What about medical conditions I already have?
If you’re already aware that you have (or may have) any kind of medical condition, there are likely to be limits on the cover for this condition. However, we may be able to offer you an option that means you could still get cover for the condition in the future. Please contact us to discuss your options.

Two Year Watch and Wait period
You may see this called a ‘moratorium’.
• You don’t fill in a medical declaration when you join
• You’ll only have cover for medical problems that you’ve experienced in the last five years:
  – after you’ve been a member for two years in a row, and
  – once you’ve had a period of two years trouble-free from that condition.

If you do need to make a claim we may need to ask to see your medical records. We need your consent to do this and we will get it from you first.

By trouble-free, we mean that you haven’t:
– seen any medical professional, including GPs, specialists, practitioners, osteopaths or physiotherapists
– taken any drugs (even over the counter drugs) or followed a special diet
– had any medical treatment.
Fully underwritten or full medical underwriting

• You fill in a medical declaration when you join
• If necessary, we may ask your GP or hospital for a medical report
• We won’t cover any conditions that you’re already suffering from or aware of
• We’ll tell you which conditions are not covered and whether we’ll be able to review that in the future.

» For further information please see ‘How your policy works with pre-existing conditions and symptoms of them’ section in the policy handbook.

3.3 > Does my policy cover every hospital in the UK?
We would always recommend that you use a Health For You specialist at a hospital in the hospital list. This will mean you can go ahead with treatment knowing that the costs will be covered.

If you choose to use any other hospital or specialist, your policy will only cover part of the costs, and you’ll need to pay the rest yourself. This could be a significant amount of money. In some cases, the fees may not be paid at all.

3.4 > What happens if I change my mind?
You have the legal right to cancel your policy up to 14 days from the day that your policy contract begins, or the day that you receive the full policy terms and conditions, whichever comes last. This is known as the ‘cooling off period’. If you cancel during this period, you’ll not have to pay anything, as long as you haven’t made a claim within that period.
4. Customer Benefits

As a customer of Health-on-Line we aim to offer you the best possible customer service. Not only that, but you’ll also have access to a range of benefits including 24 hour telephone access to medical professionals.

Manage your policy online

Alongside your Health for You policy, you are also given access to our member only website – Customer Online.

Backed by AXA

AXA PPP healthcare has been underwriting our policies since 2005, so it was a natural progression that in 2012 we became part of the AXA Group.
Your policy documents are available in other formats. If you would like a Braille, large print or audio version, please contact us.