

# Insurance Product Information Document

## Company: Westfield Health Product: Foresight Health Cash 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 and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. 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. The benefits and services available on your plan are included in the plan guide.

### What is this type of insurance?

This product is health insurance and provides reimbursement for everyday health needs up to a maximum allowance for each benefit. For full details of benefits covered please see the plan guide.



#### What is insured?

- ✓ A health cash plan provides cover up to set limits for routine healthcare. This includes optical costs, 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?

- ✗ 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 in the plan guide



#### Are there any restrictions on cover?

- ! Pre-existing medical conditions are not covered on Dental Accident cover
- ! A corporate paid policyholder must be aged 16-65 to apply for an upgrade option or apply to transfer to a higher plan level
- ! An additional adult must be aged 18-65 to apply or to upgrade their cover
- ! Claims must be received within 26 weeks of the date of each payment made for treatment, goods or services provided by a practitioner
- ! You must live in the UK, Channel Islands or Isle of Man for a minimum of 180 days each year
- ! Dependent children covered up to their 22nd birthday
- ! We do not accept professional sports people for cover on the plan
- ! For all the restrictions on the cover please refer to your terms and conditions in the plan guide



#### Where am I covered?

- ✓ Some claims can be submitted if you are temporarily outside of the UK, Channel Islands or Isle of Man; restrictions apply. Please refer to your terms and conditions in the plan guide



#### What are my obligations?

- Premium payments must be made
- Update us with any change in your personal details and/or circumstances
- Claims must be received within 26 weeks
- Claims must be submitted with supporting information required such as receipts
- Claim according to the claims procedures in your plan guide and to not act in a fraudulent manner



#### When and how do I pay?

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



#### 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 at [enquiries@westfieldhealth.com](mailto:enquiries@westfieldhealth.com) or write to us at our address Westfield Health, PO Box 340, Sheffield S98 1XB.
- 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.
- Your policy contains a 14-day cooling off period from the date we accept your application. If you decide to change your mind during this cooling off period you should contact us. Providing that you have not made, or intend to make a claim, we will refund the full premium paid by you.