

## Essential – schedule of benefits (D1)

BENEFIT	COVER	NOTES
<b>Hospital care for in-patient, day-patient treatment and out-patient surgery for pre-authorized treatment that takes place in any hospital from your chosen hospital list</b>		
Surgical admissions and related hospital charges	Covered*	Where you require surgery (including endoscopic procedures) cover will apply according to the average length of stay (for your surgical procedure) either as a day-patient or in-patient.
Medical admissions and related services	Covered*	Where a stay as either a day-patient or in-patient is required for either diagnostic reasons or to treat and stabilise an acute condition by medical and by non-surgical means.
Consultant/Specialist fees	As per the CS Healthcare Fee Schedule	All Consultant/Specialist fees will be paid according to the rates of the CS Healthcare Fee Schedule. Please refer to the medical fees section of our website <a href="http://www.cshealthcare.co.uk">www.cshealthcare.co.uk</a> or call our Claims Helpline on 020 8410 0440 for full details.
Specialised scans	Covered*	You are covered for CT, MRI, PET, DAT, MIBG, Myelogram, Thallium and Perfusion/Ventilation scans.
Surgeon and Anaesthetist fees	As per the CS Healthcare Fee Schedule	All Surgeon and Anaesthetist fees will be paid according to the rates of the CS Healthcare Fee Schedule. Please refer to 'Surgeon and Anaesthetist Fees' section within the Policy Document and the medical fees section of our website <a href="http://www.cshealthcare.co.uk">www.cshealthcare.co.uk</a> or call our Claims Helpline on 020 8410 0440 for full details.
Out-patient surgery and related charges	Covered*	
Pre-operative tests to assess your fitness for surgery	Covered*	For up to 2 weeks prior to an authorised hospital admission to cover blood and urine tests, chest X-ray, ECG and assessment with an anaesthetist if required.
Post-operative consultations, investigations, tests and physiotherapy	Covered*	As a part of necessary aftercare within 90 days immediately following a planned pre-authorized private hospital admission.
Private road ambulance	Up to £250 per person per policy year	Where required out of medical necessity after hospitalisation.
Nursing at home or convalescence benefit	Up to 14 days each admission	Immediately following surgery after hospital admission either as a NHS or private patient under the specific direction of a Consultant/Specialist.
Parent accommodation	Covered*	For one or both insured parents staying with an insured child up to age of 16.
NHS cash allowance	£150 each day/night after admission to a UK NHS acute general hospital	Up to 28 days per person per policy year for eligible claims under this option.

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<b>Additional features</b>		
Your Care Package	Covered*	Available to those undergoing NHS care in lieu of private treatment - a tailor made care package aimed at giving additional support while having treatment.
Out of band hospital benefit	Covered*	When using a hospital not included in our Directory of Hospitals, or included in your level of cover, we will pay a sum equivalent to that for a hospital on the list.
Lifeline	24 hour availability 365 days a year	Health advice line with Doctor call back service.
GraceCare	9am - 5.30pm Monday to Friday	Advice line to help choice of convalescent care, respite care, help at home or long-term residential care, should the need arise.
Voluntary excess options	£100, £300, £500, £1000	Voluntary excess chosen will only apply to Essential cover, Expert Diagnostics and Heart & Cancer. Please refer to the 'Voluntary Excess and Co-payment options' section within the Policy Document for further details.
Co-payment option	15% of claims up to £1500 per person per policy year	The co-payment option will only apply to Essential cover, Expert Diagnostics and Heart & Cancer. Please refer to the 'Voluntary Excess and co-payment options' section within the Policy Document for further details.

**\*Please note: by 'Covered' we mean that all cost must be necessary and reasonably incurred and benefit will be paid in accordance with the customary fees and charges for treatment received.**

#### IMPORTANT NOTES:

- Heart and cancer conditions are not covered by Essential. If you are having symptoms investigated which are diagnosed as a heart or cancer condition, cover will cease under this option once the necessary aftercare period has passed. Heart conditions that arise as a complication alongside another eligible condition will be covered. Please see the 'Heart & Cancer-schedule of benefits' within this Policy Document for clarification of what is exactly covered.
- You are not covered for emergency admissions that require life saving treatment, including immediate life saving surgery or critical care. Urgent admissions where a patient is admitted to a general ward may be covered provided you no longer require critical care or special monitoring of vital signs. For full details of what we **will not pay**: please refer to the 'General Policy Exclusions' and 'Specific Treatment Exclusions and Advice' sections in this Policy Document.
- You will be covered after you have been discharged for a **90 day period of necessary aftercare**. This will include cover up to a maximum of 3 post-operative or follow-up consultations, 6 sessions of physiotherapy, where related directly to your surgery or medical admission to check your progress or treat any complications. Wound care, dressings and small procedures will also be covered when they are a direct consequence of your surgery or medical admission.
- Where diagnostic endoscopies, biopsies or similar procedures are performed we will cover one follow-up consultation to collect the results. Ongoing consultations for diagnostic purposes or to plan a further procedure are not covered. Where genuine post-operative complications have occurred, or stabilisation of a medical condition is still being sought within the 90 day necessary aftercare period, we will give further consideration to cover on submission of a treatment plan from either the Consultant/Specialist.
- NHS cash allowance is payable for admissions into care in an acute general hospital for treatment of acute conditions, only where no transfer or admission from or to private care takes place for the same or related medical or surgical episode and any related complications; this excludes transfers into rehabilitation facilities, long-stay or psychiatric hospitals.