

Typical examples of cancer conditions:

Important note:

The examples below are designed to show our general policy on cancer conditions and how we would deal with them for a member with the appropriate level of cover. For **your choice** members - If you opt not to have all 4 main **your choice** options, some elements of care will not be covered.

Example 1:

Beverley has been with CS Healthcare for five years when she is diagnosed with breast cancer. Following discussion with her specialist she decides to have the breast removed followed by breast reconstruction. Her specialist also recommends a course of radiotherapy and chemotherapy. In addition she is to have hormone therapy tablets for several years. Will her insurance cover this treatment plan and are there any limits to the cover?

Beverley will be covered for removal of her breast (mastectomy) and breast reconstruction either immediately, or within 2 years of the original surgery or on completion of the recommended radiotherapy & chemotherapy. If hormone therapy is recommended and available by GP prescription we would not cover the out-patient prescription unless the prescribed treatment was not available to her via her GP. As long as Beverley remained a CS Healthcare policy holder with the appropriate cover options we would cover the 5 year follow-up period for Consultations, diagnostic scans and other related investigations.

Example 2:

Cara has previously had breast cancer which was treated under her existing policy by lumpectomy, radiotherapy and chemotherapy. She now has a recurrence in her other breast and has decided to have a mastectomy, radiotherapy and chemotherapy. Will her insurance cover this and are there any limits to the cover? Some policies have financial limits which will be discussed with you when pre-authorising your claim.

Cara would be covered for this treatment of mastectomy, chemotherapy and radiotherapy - if recommended by her supervising Consultant. Depending upon the length of time that has passed since the original diagnosis of breast cancer and Cara remaining a CS Healthcare policy holder; we would continue to cover follow-up consultations under the original 5 year monitoring period which would also cover diagnostic scan and other related investigations. If Cara was outside the 5 year monitoring period we would cover 3 follow-up consultations on completion of the radiotherapy or chemotherapy. If treatment of acute symptoms still required supervision or treatment following the radiotherapy or chemotherapy, this would be covered subject to medical report and treatment plan being submitted from Cara's treating Consultant.

Example 3:

Monica, who was previously treated for breast cancer under her existing policy, has a recurrence which has unfortunately spread to other parts of the body. Her specialist has recommended the following treatment plan:

- o A course of six cycles of chemotherapy aimed at destroying cancer cells to be given over the next six months.
- o Monthly infusions of a drug to help protect the bones against pain and fracture. This infusion is to be given for as long as it is working (hopefully years).
- o Weekly infusions of a drug to suppress the growth of the cancer.
- o These infusions are to be given for as long as they are working (hopefully years). Will her insurance cover this treatment plan and are there any limits to the cover?

We will cover Monica for the six cycles of chemotherapy, along with 12 months of bone strengthening treatment, and infusions to suppress growth of the cancer. After 12 months an assessment of Monica's treatment plan would be undertaken with her supervising Consultant and where ongoing treatment was required indefinitely we would look to withdraw cover back under the care of the NHS if available as the your choice policy does not cover long-term monitoring or preventative treatment.

Example 4:

Sharon would like to be admitted to a Hospice for care aimed solely at relieving symptoms. Will her insurance cover this and are there any limits to the cover?

Sharon would be able to use a privately funded Hospice. Where a Hospice does not charge for the care services a donation of £400 per policy year will be made directly to the Hospice.

PLEASE NOTE that the above examples are based on the assumption that the individual has not been excluded for treatment relating to the medical conditions and are subject to the relevant policy terms and conditions being met.

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