

# Heart & Cancer option

## schedule of benefits

HEART BENEFIT	COVER		NOTES
<b>In-patient, day-patient and out-patient treatment</b>			
<p>Diagnostic (after a confirmed diagnosis of a Heart condition)</p> <p>You are covered for: Consultations from a provider chosen from your hospital choice for all relevant tests, scans and aftercare</p> <hr/> <p>Surgical admission:</p> <p>Heart (cardiac) surgery including implanted prosthesis, including valves and related hospital charges</p> <hr/> <p>Non-surgical admission:</p> <p>Heart (cardiac) medical care including related hospital charges</p> <hr/> <p>Heart (cardiac) necessary aftercare; including diagnostics, specialist physiotherapy/ rehabilitation and supportive care including care of a registered Dietitian within 1 year from the date of admission for each acute condition treated.</p> <p>Or</p> <p>Acute episodes of a previously covered condition, to investigate and stabilise the symptoms in the short term.</p>	<b>COVERED*</b>	<b>Heart &amp; Cancer Comprehensive</b>	<b>Heart &amp; Cancer Limited</b>
<p style="text-align: right;">Consultant led Care, plus diagnostic tests, to aid diagnosis, monitor your treatment and to follow you up to 12 months after diagnosis according to your medical need. Includes ultrasound and other specialised scans.</p> <hr/> <p>This covers both open &amp; closed surgical procedures. Covered for accommodation, theatre costs and all related investigations and medical costs including physiotherapy and dietitian. All Surgeon and Anaesthetist 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.</p> <hr/> <p>Covered for accommodation, theatre and all related investigations &amp; medical cost and Consultant fees. Where a stay is either a day-patient or overnight patient is required for either diagnostic reasons or to treat and stabilise an acute condition by medical and by non-surgical means.</p> <hr/> <p>Following a privately funded hospital admission or an acute recurrence of a condition pre-authorized by CS Healthcare, you are also covered for consultations &amp; investigations including; CT, MRI, scans &amp; investigations, PET, DAT, MIBG, Myelogram, Thallium and Perfusion/ Ventilation scans.</p> <p>Covered for procedures such as angiograms, tranoesophageal echocardiograms, electrophysiological studies, cardioversion and pacemaker insertion and checks.</p> <p>If a new and separate heart condition requires admission as described above and this occurs during an already pre-authorized 12 month follow-up period, the period of necessary aftercare will be extended from the date of the new admission date accordingly.</p>			

CANCER BENEFIT

COVER

NOTES

In-patient, day-patient and out-patient treatment

	Heart & Cancer Comprehensive	Heart & Cancer Limited	
<p><b>Place of treatment:</b> You are covered for: treatment in a hospital from your chosen hospital choice or a Home care provider from your chosen hospital choice.</p>	<p><b>COVERED*</b></p>	<p><b>COVER LIMITED TO £50,000*</b> (Per person per condition for the lifetime of the policy)</p>	<ul style="list-style-type: none"> <li>■ Hospital – in-patient &amp; day-patient</li> <li>■ Hospital – out-patient</li> <li>■ At home</li> </ul> <p>For all accommodation, theatre, related hospital costs and Consultant fees related to a surgical or medical admission to treat your condition and any related complications</p>
<p><b>Diagnostic (after a confirmed diagnosis of a Cancer):</b> You are covered for: Consultations from a provider chosen from your hospital choice for all relevant blood tests, X-rays &amp; Scans, Biopsy and aftercare</p>			<ul style="list-style-type: none"> <li>■ Consultant led Care and Cancer Nurse Specialist Care plus diagnostic tests, to aid diagnosis, monitor your treatment and to follow you up to 5 years after diagnosis according to your medical need. Includes ultrasound and other specialised scans.</li> <li>■ Genetic &amp; predictive disease profiling associated with eligible conditions</li> </ul>
<p><b>Surgery :</b> You are covered for: Surgery from a provider chosen from your hospital choice and for Specialist/Consultant Fees involved in your care, including all related hospital, therapy and specialist nursing costs.</p>			<ul style="list-style-type: none"> <li>■ Removal of Primary &amp; Secondary cancers.</li> <li>■ Surgical Intervention for relief of symptoms and disease management, including palliative procedures.</li> <li>■ The initial reconstructive surgery within 5 years of the first procedure or on completion of Radiotherapy and Chemotherapy treatment.</li> </ul>
<p><b>Preventative:</b> You are covered for: Treatment in a hospital from your chosen hospital list or a Home care provider from your chosen hospital list.</p>			<ul style="list-style-type: none"> <li>■ Investigation as part of your disease management is covered.</li> <li>■ Bone Strengthening drugs and therapies to manage disease progression are covered.</li> </ul> <p>Vaccines – are not covered and are available from your NHS GP.</p>
<p><b>Drug therapy:</b> You are covered for: Home care or hospital from a provider chosen from your hospital choice and for the delivery of drug therapy to treat and control or maintain your disease and related symptoms.</p>			<ul style="list-style-type: none"> <li>■ Intravenous Chemotherapy &amp; Biological therapies</li> <li>■ Oral Chemotherapy &amp; Biological therapies from a recognised provider.</li> <li>■ Supportive drug therapy such as Steroids, anti sickness, antibiotics, pain relieving medications as an in-patient and 7 days take home drugs following an admission.</li> <li>■ Drugs licensed to treat specific cancers, which have been assessed by NICE as safe and effective.</li> <li>■ All accommodation, insertion of lines and related hospital costs and Consultant and specialist nursing fees.</li> </ul>

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	<b>Heart &amp; Cancer Comprehensive</b>	<b>Heart &amp; Cancer Limited</b>	
<p><b>Radiotherapy:</b> You are covered for: Hospital from a provider chosen from your hospital choice and for the delivery of radiotherapy to treat and control or maintain your disease and related symptoms</p> <p><b>Palliative:</b> You are covered for: Care to treat, relieve and control symptoms, including pain relieving treatment, either independently or alongside surgery, or radiotherapy.</p> <p><b>End of life care</b> You are covered for: Hospice Donation:  Care and treatment in a hospital from your chosen hospital choice or a Home care provider from your chosen hospital choice, as a private patient when hospice care is unavailable.  Nursing at Home, as a private patient when hospice care is unavailable.</p> <p><b>Monitoring:</b> You are covered for: Supervision and monitoring of your treatment while receiving active care such as drug therapy or radiotherapy during primary or secondary care of your condition.  Necessary aftercare per Cancer condition including consultations, for up to 5 years following the initial diagnosis of your condition.</p>	<b>COVERED*</b>	<b>COVER LIMITED TO £50,000*</b> <b>(Per person per condition for the lifetime of the policy)</b>	<ul style="list-style-type: none"> <li>■ We cover external radiotherapy and internal radiotherapy, and brachytherapy.</li> <li>■ Treatment of primary and secondary cancers.</li> <li>■ Treatment for pain relief and to maintain remission.</li> <li>■ To treat recognised complications</li> </ul> <hr/> <ul style="list-style-type: none"> <li>■ Maintenance therapy including radiotherapy and drug therapy as described above.</li> <li>■ Complementary Therapies to relieve symptoms.</li> </ul> <hr/> <ul style="list-style-type: none"> <li>■ Hospice Donation £400 per person per policy year.</li> <li>■ For all accommodation, theatre, related hospital costs and Consultant fees related to a medical admission or home treatment to support your end of life care and any related complications.</li> <li>■ For care at home provided by a registered care provider.</li> </ul> <hr/> <ul style="list-style-type: none"> <li>■ You are covered for consultations and tests during a period of active care and for up to 5 years from the diagnosis of your condition and according to medical need including care of secondary conditions.</li> <li>■ Including cover for Ultrasound, CT, MRI &amp; PET, MIGB, Thallium, Perfusion &amp; Ventilation scans.</li> <li>■ If secondary disease occurs outside the 5 year monitoring period a maximum of 3 consultations will be covered following completion of drug therapy and radiotherapy or further surgical intervention.</li> <li>■ Counselling, under the direction of your consultant.</li> <li>■ Dietitian, under the direction of your consultant.</li> </ul>

## Other Benefits

**If Heart & Cancer Limited is selected these benefits will be deducted from the £50,000 overall benefit limit**

Convalescing and Nursing at Home	Up to a maximum of 14 days and £2,800 each admission immediately following a hospital admission either as an NHS or private patient under the specific direction of a Specialist/Consultant.
Private Road Ambulance	£250 per person per policy year where required out of medical necessity after hospitalisation
NHS Cash Allowance	For a surgical or medical admission; £150 each day/night after admission to a UK acute general NHS hospital for up to 28 days per person per policy year for eligible claims. OR For chemotherapy treatment; £60 per day case or overnight admission for the administration of intravenous chemotherapy at a UK acute general NHS hospital. OR For radiotherapy treatment; £30 per fraction of radiotherapy administered at an UK acute general NHS hospital
Your Care Package	The Your Care Package provides members with the option to receive a single payment for electing to receive treatment on the NHS in lieu of private treatment. The Your Care Package is available for complex surgery (classified major plus and complex major) and oncology treatment (radiotherapy and chemotherapy) only and must be agreed in writing with the Society prior to treatment taking place.

**\* All cost must be necessary, customary and reasonably incurred and benefit will be paid in accordance with the customary fees and charges for treatment received, provided you use a hospital on your list.**