

Insurance Product Information Document

Insurer: Simplyhealth Access, which is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority, Financial Services Register number 202183. Simplyhealth is registered and incorporated in England and Wales.

Product: Simply Cash Plan

This document provides a summary of the key information relating to this policy but it is not personalised to you. The other documents you receive from us, before and after the policy starts, will tell you what you need to know about the policy.

What is this type of insurance?

This policy is a cash plan. It gives you money back towards a selection of health benefits that you pay for and claim back from us, up to an annual limit. You can add your partner and up to four of your children to the policy.



What is insured?

This cash plan has four levels of cover. Depending on the level you select, each benefit has an annual limit we will pay up to, for each person covered. The table of cover will provide you with more information.

- ✓ **myWellbeing** - speak to a GP over the phone 24/7. Also provides 24/7 access to telephone counselling and wellbeing and lifestyle guidance.
- ✓ **Dental** - the annual limits payable for this benefit range from £95 for level one to £195 for level four. We pay 100% of your receipt up to the annual limit.
- ✓ **Optical** - the annual limits payable for this benefit range from £90 for level one to £190 for level four. We pay 100% of your receipt up to the annual limit.
- ✓ **Physiotherapy, osteopathy, chiropractic, acupuncture, homeopathy** - the annual limits payable for this benefit range from £50 for level one to £200 for level four. We pay 75% of your receipt up to the annual limit.
- ✓ **Diagnostic consultation** - the annual limits payable for this benefit range from £150 for level one to £400 for level four. We pay 75% of your receipt up to the annual limit.

Insured on levels two, three and four only

Chiropody / podiatry - the annual limits payable for this benefit range from £50 for level two to £150 for level four. We pay 75% of your receipt up to the annual limit.

Hospital - we pay for each day or night you are admitted, up to a maximum of 20 days/nights each policy year. The amounts payable for this benefit range from £10 for level two to £20 for level four.

New child payment - paid once for each child, the benefit ranges from £100 for level two to £300 for level four.



What is not insured?

- ✗ People living outside the United Kingdom.
- ✗ People aged 80 and over are not able to join the policy, and if you have a policy you won't be able to increase the level of cover once you are aged 80 or over.



Are there any restrictions on cover?

- ! There is an annual limit for each benefit on this policy.
- ! For some benefits, we only pay part of each receipt that you claim for. For example 75%.
- ! Each benefit has a number of exclusions, please read the full policy documentation to find out what these are.
- ! A partner covered by this policy must live with the policyholder.
- ! A child covered by this policy must be under 18.
- ! Pre-existing conditions are not covered for the first 12 months of cover under the hospital benefit.
- ! New child payment is not payable for the first 12 months of cover.



Where am I covered?

- ✓ Treatment and services are covered in the UK only. The 'speak to a GP' service can be used outside the UK.



What are my obligations:

- **at the start of the contract?** Give us honest, accurate and complete information when buying the policy, check your policy documentation when you receive it to make sure you have the cover you need and expect.
- **during the term of the contract?** Pay the premium on time, let us know of changes to your address.
- **when making a claim?** Give us the information that we need to assess the claim properly.



When and how do I pay?

We accept payment by monthly Direct Debit.



When does the cover start and end?

The cover starts from the date we include you on the policy and lasts for one year. It will renew automatically if it is not cancelled. If you buy or renew this product, your summary of cover will show these dates.



How do I cancel the contract?

You can cancel your policy by writing to us or calling us.

If you cancel within 14 days of receiving your policy documentation or within 14 days of the renewal date, we will refund the premium, unless you have made a claim. After that you can end the contract by giving us one month's notice. We can end the contract from a renewal date.