



FREEDOM ELITE SUMMARY



This guide should be read in conjunction with your policy documents and insurance certificate



What is private health insurance?

Private health care is an insurance plan that typically covers the cost of accessing diagnosis and treatment for eligible conditions in private hospitals or wards, with a choice of a specialist
Designed to cover you for unknown acute medical conditions, and to restore you to your previous state of health.



Benefits of Private healthcare insurance

- Short or No waiting lists
- Choice of Hospital
- Choice of consultant
- Private room or ward (better food)
- Speedy Diagnostics (blood tests, x-rays, MRI, CT & PET scans)
- In/Day-patient treatment & Advanced Cancer Care as core cover
- Therapies (physio, chiropractic, osteo, chiropody, podiatry)
- Mental Health cover

Group Underwriting

When joining a group Private Medical Insurance policy, you must be underwritten. Your group underwriting is set up on a moratorium basis and this means that when you join the policy there are no medical forms to complete or GP report to send in, instead, the below moratorium clause will apply:

“any treatment/medical conditions you have suffered with in the five years prior to joining the policy will not be covered immediately. However, if you complete two years of cover, without any further treatment, advice, medication or symptoms of those previous conditions, they will become covered once again”.

What is not covered:

- Chronic conditions
- Accident and emergency
- Alcohol, substance abuse and addiction
- Pregnancy
- Non-GP referral (please see your guide for exceptions to this)

What is a chronic condition?

A **chronic condition** is the opposite of an **acute condition**. It is persistent and long-lasting in its effects and, in most cases, cannot be cured and only kept under control.

Chronic conditions are often life-long and limiting in terms of quality of life. Such as arthritis, asthma, Epilepsy, some Mental illness, Parkinson's disease.

Please see your policy guide for more details.

Summary of Your Benefits

Full refund treatment is subject to insurers fee guidelines / Please refer to your policy guide & membership certificate for full details of cover

Inpatient and daypatient treatment	Limits
<ul style="list-style-type: none"> Specialist Fees Hospital charges MRI, CT and PET scans Cancer cover 	Full refund Full refund when using a hospital within the policy list Full refund (specialist referral only) Detailed in our leaflet 'Cancer Cover Explained'
Outpatient treatment - Specialist Fees & physiotherapy	Limits
<ul style="list-style-type: none"> Consultations with a specialist Diagnostic tests Minor surgical procedures 	Full refund
Mental Health	Limits
Fees charged by a psychiatric specialist and hospital for inpatient, daypatient and outpatient treatment of an acute mental or psychiatric illness.	Inpatient and day patient treatment – full refund up to 45 days. Outpatient treatment – Full Refund.
Alternative therapies	Limits
<ul style="list-style-type: none"> Acupuncturist Chiropractor Homeopath Osteopath 	Up to £1,500 limit (Up to 6 sessions of GP referred Physiotherapy)
Dental, optical and private GP costs	Limits - compulsory £50 excess applies
<ul style="list-style-type: none"> Routine dental costs Accidental dental injury Optical costs Private GP 	Up to £300 Up to £600 Up to £200 Up to £300

**London Plus
Hospital List**

**Policy Excess
£100
Per person per year**

Benefits explained

The policy has a £100 excess per person per policy year

- This is the amount that must be paid by you at the point of your first claim.
- Freedom will then settle the remaining payment directly with the consultant or hospital You will only pay an excess once during the policy year regardless of how many claims you make.

In & Day-patient treatment

- This would be when you require a hospital bed, for the day, overnight or longer
- This includes your consultant costs, diagnostic tests, complex scans such as MRI, CT & PET scans, hospital charges for accommodation, surgery, nurses and drugs and dressings.

Cancer care

- Important part of any private medical cover and includes everything from the initial investigations and diagnosis any ongoing monitoring as well as for surgical treatment, chemotherapy and radiotherapy
- A key point is that cancer will never be deemed chronic so there is no time limit on cancer treatment.
- Please see the cancer guide provided in policy documents for more information

Out-patient cover

- Any treatment that does not require a hospital bed and includes things like, consultations with a specialist, minor diagnostic tests, complex scans, minor surgeries and physiotherapy.

Mental health

- Freedom cover you for up to 45 days per year for any in and day patient treatment and up to £2,000 per year for out-patient treatment
- This covers fees charged by the hospital and any specialist or consultant you see.

Alternative therapies

- This includes sessions with a chiropractor, Acupuncturist, homeopath and osteopath.

Dental, Optical & Private GP cashback

- As you can see you have up to £300 to claim back on routine dental costs, Up to £200 on optical and £300 on Private GPs
- There is a separate one off £50 excess, which is deducted from your first claim.

Hospital coverage

- Which includes most UK private & NHS facilities
- please refer to the hospital list included in your policy guide.

How to make a claim

The Freedom Elite claims process

Visit your GP or Virtual GP (Freedom's GP24)

If an insured person feels unwell or suffers from any injury, they must first see their GP or use the virtual GP for advice. If the GP wants to refer the insured person to a specialist for treatment, the GP will write a referral letter to the specialist detailing the reason for the referral.

Call the claims helpline

If the insured person is referred for private treatment, they must then call our claims helpline to find out if the claim will be covered by their policy and, if so, any limits that apply. If we accept the claim, we will give them a claim number and let them know what to do next.

Keeping in touch

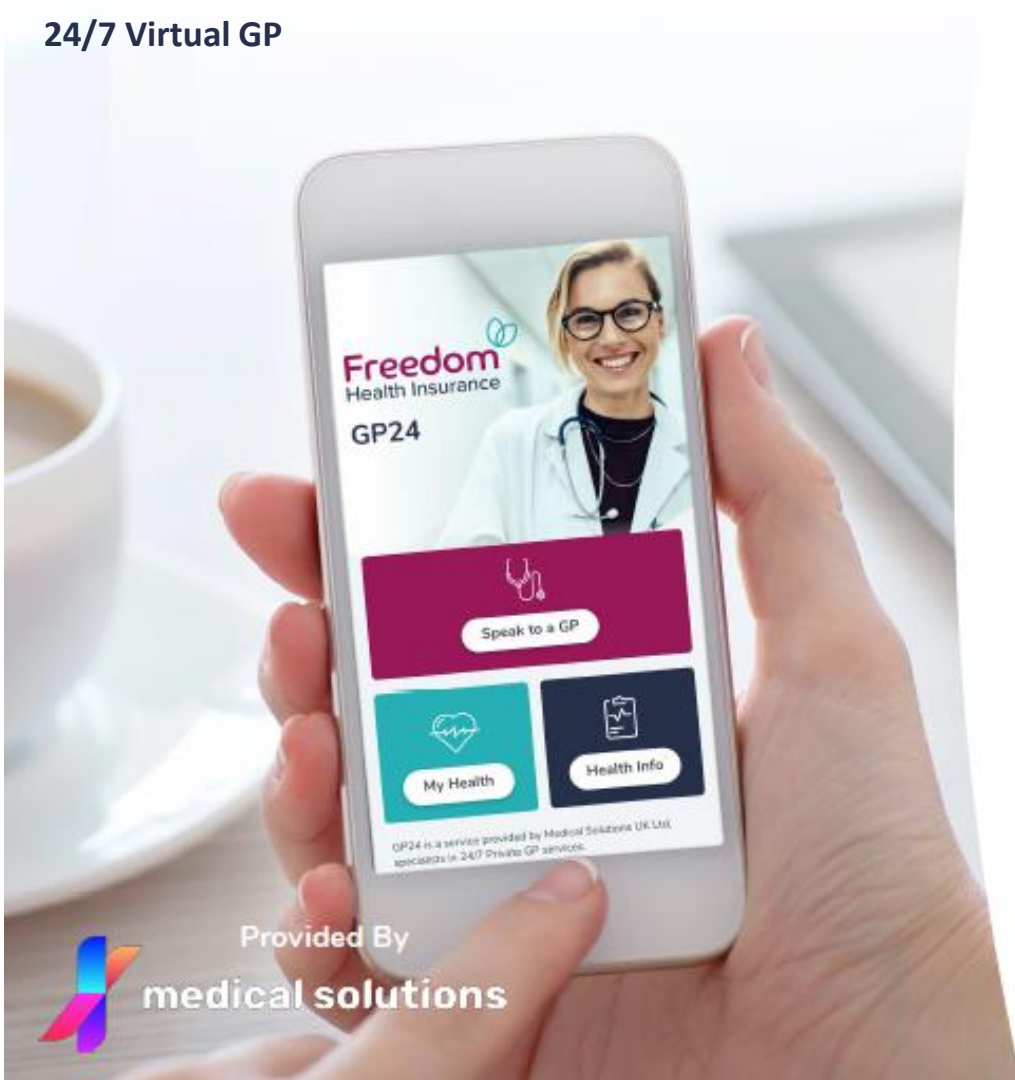
The insured person must keep in touch with us as treatment progresses, particularly if daypatient or inpatient treatment is needed as specific limits may apply. If they do not let us know about future treatment in advance, it may not be covered by us.

Submitting claims

We prefer to settle invoices directly with the providers, but if an insured person does settle any invoices themselves, they can send them to us. This includes claims for NHS cash benefit and maternity cash benefit.



24/7 Virtual GP



Provided By
 **medical solutions**



**24/7 Access
To a GP**



**Private
Prescriptions**



**Face-to-Face
eConsultations**



**Health
Information**

To book a virtual GP appointment 24/7 call:

0345 222 3706*

Or access the web application at: <https://freedom/gp24.co>

How do I save the web application?

Visit <https://freedom.gp24.co> and then follow the instructions below:



iOS Device

In your mobile web browser click the icon (shown left) and select 'Add to Home Screen'



Android Device

In your browser click the icon (shown left) and select 'Add to Home Screen'



Laptop/Desktop

Right click with the mouse to display the menu and select 'Create Shortcut'



Freedom General Enquiries

Phone: 0800 999 2013 or 01202 756 350

Email: info@freedomhealthinsurance.co.uk

Making a claim

Phone: 01202 283 580

Email: claims@freedomhealthinsurance.co.uk

Please call the claims helpline if:

- You want to make a new claim.
- you need further treatment.
- you have a question about an existing claim or
- you want to know whether a specific treatment would be covered.

Hooray Health & Protection

Hooray Health & Protection – hello@hoorayinsurance.co.uk

