What is this type of insurance?

The Pupils’ Healthcare Scheme private medical insurance covers private treatment of new and existing conditions including where the child has already received treatment. Within this arrangement AXA PPP healthcare Limited contracts with the school, with cover provided for the child.

What is insured?

In-patient and day-patient treatment

- Private hospital and day patient unit charges paid in full when the child uses a facility in our Directory of Hospitals.
- Specialist fees from a specialist on our ‘fee approved’ list - no yearly limit.
- Hospital accommodation for one parent while the child is receiving eligible treatment in hospital, paid in full.
- Costs towards a close relative or friend to stay in a hotel nearby when a member is having private treatment - up to £100 a night up to £500 a year.

Out-patient treatment

- Surgery - no yearly limit.
- CT, MRI and PET scans paid in full at a hospital or scanning centre in our Directory of Hospitals, when the child is referred by the treating specialist.
- Specialist consultations, diagnostic tests, practitioner charges and treatment fees with a physiotherapist, chiropractor, osteopath or acupuncturist as an out-patient - no yearly limit.
- Mental health treatment by psychologists up to 4 sessions a year when the child is referred by their GP.

Other benefits

- Oral surgery paid in full within a facility that we have an agreement with.
- Road ambulance transport between a hospital and another medical facility is paid in full if the child is having private in-patient or day-patient treatment and it is medically necessary.
- Expert Help. Direct access to our healthcare experts 24/7.
- Fast Track Appointments service can help find a suitable specialist to treat the child and make an appointment.

What is not insured?

- Treatment or monitoring of ongoing, recurrent and long-term conditions (also known as ‘chronic conditions’).
- Fees for services that would normally be carried out by a GP practice, dentist or optician.
- Any dental procedures.
- Preventative treatment or tests when there are no apparent symptoms.
- Fees for treatment with specialists we do not recognise.
- Fees for out-patient drugs or dressings.
- Treatment, investigation, assessment or grading for learning and development disorders.
- Treatment received outside the UK.

Are there any restrictions on cover?

- Fees for treatment received at a facility that is not in our Directory of Hospitals.
- Limited cover for recognised specialists not on our ‘fee approved’ list.
- Cover for treatment of psychiatric illness as an in-patient is limited to 45 days per person per year.
**Where am I covered?**

- Cover is provided for private medical treatment received in the United Kingdom.

**What are my obligations?**

- Complete and accurate answers must be given to any questions we may ask.
- We must be contacted if anything changes between the time you agreed to join and the start date.
- The subscription must be paid on time.
- We must be informed if any personal details change, including address.
- If your child needs to make a claim, call our team of Personal Advisers to ensure the claim is covered under the plan.

**When and how do I pay?**

Subscriptions to healthcare cover will be paid as part of the overall fees paid to the school, on a termly basis.

**When does the cover start and end?**

The child’s membership will start at the beginning of the school term if they are already at school or the next term if mid-way through the academic year, and is in place whilst the child remains at school or until the subscriptions are stopped. If we have agreed something different, it will be advised in written communications.

**How do I cancel the contract?**

The child’s cover can be cancelled either before cover begins or within 21 days of the date the cover for the child starts. The School Administrator should be contacted to request the cancellation. Provided no claims have been made under the scheme, a full refund of the subscription paid for that term will be given. If a claim has been made under the scheme during the 21 day period, no refund is payable. Cover cannot be cancelled outside of the 21 day period until the next renewal.