

Questions and Answers

Is there a waiting period before I can make a claim?

If you are hospitalised or require emergency dental treatment as a result of an accident you can claim immediately. Otherwise, like other plans of this type, you cannot make a claim in the first 6 months.

Are there any significant exclusions?

The main instances when you will not be covered are deliberate self-injury, riding on a motorcycle or working as a professional sportsperson. Also, any injury or condition you knew about prior to your application for cover (whether diagnosed or not) or for which you received advice, treatment or counselling in the 12 months before the start of your policy, AIDS related conditions, conditions due to drug and alcohol abuse or your criminal activity. A full list of exclusions can be found in Section 7 of your policy document.

How long is the contract?

This is a monthly contract and premiums are collected by direct debit. Your contract will cease if you die, when you fail to pay the monthly premium or if you or we cancel the cover. However, we will give you 30 days' written notice before any change to the monthly premium takes effect or any change to the terms of the policy.

Can I cancel my policy?

You may cancel your cover at any time with no strings attached within the first 14 days of receipt of your policy and receive a full refund of any premium paid. Simply call Pinnacle on 08707 200 745. After that you can cancel the policy by giving 30 days' written notice but no refund of premium will be payable.

How can I make a claim?

Claims are paid as soon as the required proof has been received and approved. The address to contact is the Claims Department, Pinnacle Insurance plc, Pinnacle House A1 Barnet Way, Borehamwood, Hertfordshire, WD6 2XX. Telephone 08707 200 745. On-line: <http://support.pinnacle.co.uk> Please ensure that you contact Pinnacle for a claim form within 90 days.

What happens if I have an enquiry or want to make a complaint?

Whilst it is always our intention to provide a first class standard of service, if you do have any concerns regarding insurance cover, please address them to: Customer Relations Manager, Pinnacle Insurance plc, Pinnacle House, A1 Barnet Way, Borehamwood, Hertfordshire WD6 2XX.

Should you remain dissatisfied with the outcome of any internal enquiries, you have the right to refer your complaint to: The Financial Ombudsman Service (FOS), South Quay Plaza, 183 Marsh Wall, London E14 9SR, Telephone: 0845 0801 800.

This procedure will not prejudice your right to take legal proceedings. However, please note there are some instances when the FOS cannot consider complaints. A leaflet detailing the full complaints/appeals process is available from Pinnacle on request.

How does the Customer Compensation Scheme work?

Pinnacle is covered by the Financial Services Compensation Scheme (the Scheme). You may be entitled to compensation from "the Scheme" if Pinnacle cannot meet its obligations. This depends on the type of business. Most types of insurance business are covered for 100% of the first £2,000 of a valid claim and 90% of the remaining amount of the loss.

Further information about compensation arrangements is available from the Financial Services Compensation Scheme, telephone number 020 7892 7300.

Choice of Law

The parties to this Group Policy are free to choose the law applicable to it. Without agreement to the contrary, English Law will apply. If you live in Scotland, Wales, Northern Ireland, the Channel Islands or the Isle of Man, you will be entitled to commence legal proceedings in your local courts. All communications will take place in English.

This is just a brief summary of the cover. Full details are contained within the policy document.

HCP-KFD-GEN.1

healthprotect®

keyfacts



Key Facts Document

healthprotect Policy Summary

The **healthprotect** Cash Plan pays cash sums to cover a range of everyday healthcare treatments to keep you fit and well. If you wish to make a claim under this plan, simply pay for the treatment, which must be given by a qualified practitioner who is registered with an appropriate, recognised organisation. You can then make a claim and once it is processed you will receive a cheque through the post made out to you - usually within three working days.

The **healthprotect** Cash Plan is underwritten by a UK based company - Pinnacle Insurance Plc (Pinnacle). Pinnacle have been providing insurance through major banks and building societies for many years. The contact details for Pinnacle can be found in the section entitled - How can I make a claim?

The information given in this document is only a summary of the main terms and conditions. Full details are contained within the enclosed policy document.

Key Features and Benefits

You can choose the level of benefit that you want to be covered for and this will be shown in the schedule accompanying your policy document. For full explanations of the features, benefits, exclusions and limitations, please read this document in conjunction with your policy wording Sections 4, 5, 6 and 7.

Significant features and benefits

Dental Fees You can claim up to 75% of the amount you pay to the dentist for treatment and check-ups	Benefit is not payable if you have an existing plan that covers dental treatment
Optical fees You can claim up to 75% of the amount paid directly to the optician, for prescription glasses, sight tests or permanent contact lenses	Benefit is not payable if you already have an existing plan that covers you for optical care, nor is it payable for disposable contact lenses
Chiropody You can claim up to 75% of the amount paid directly to a chiropodist	Treatment must be provided by a qualified chiropodist registered with an appropriate professional organisation
Specialist Consultation Costs You can claim up to 50% of the amount paid directly to a specialist physician or surgeon to cover x-rays, blood tests or other diagnostic tests	Benefit does not include treatment charges, medical examinations and reports, health screening services or visits to clinics / GP's

Significant features and benefits

Complementary Medicine You can claim up to 50% of the amount paid directly to a Physiotherapist, Osteopath, Chiropractor, Acupuncturist or Homeopath	A person qualified and registered with the appropriate professional organisation recognised by us must give treatment (a list is available on request). In respect of Homeopathy only consultation costs are covered
In-patient Admission A daily benefit paid for the period during which you are admitted for in-patient treatment in a hospital	Maximum payment of 91 days' benefit in any one year
Day case admission A benefit will be paid for each day case admission you have for investigations, treatment or diagnosis in a hospital	Maximum of 10 admissions in any one year
A&E Dental £2,500 to cover the cost of any emergency dental treatment and any follow up treatment required as a result of an accident	Limited to a maximum of 4 claims per year
NHS prescriptions If you are under 60 at the time of purchase you can receive the cost of up to four NHS prescriptions per year	This benefit is not available if you purchase the "recuperation only" cash plan or, the "Over 50's" plan and you already receive free prescriptions, you will receive the recuperation grant instead
Recuperation grant If you purchase the "Over 50's" plan you will automatically receive a single lump sum benefit payable following a continuous in-patient admission for 10 days or more when you reach age 60* * If you have taken the "recuperation only" cash plan then the age restriction does not apply	If you are under 50 this benefit is not available
Children's Cover If you purchase the "Under 50's" plan you can cover up to 4 dependent children at 100% of the adult benefit	Except In-patient and Day-Case admission, for which they will receive 50% of the adult benefit

Significant exclusions and limitations