

These **key facts** are a summary of this plan: for full details please refer to the enclosed personalised Description of Benefits and Levels of Cover and the definitions, exclusions and conditions on the reverse.

- **The plan** is underwritten by The Care Insurance Company Limited, 33/2 Cannon Lane, Gibraltar, GX11 1AA. It is governed by English law and all documents will be provided in English.
- **The Medical Care Plan** provides a range of benefits for the private treatment of acute surgical and medical conditions which are listed on the enclosed Description of Benefits and levels of cover.
- **The term of the contract** is 12 months and your subscription is quoted on the enclosed correspondence. If you wish to change your mind you have the right to cancel within 30 days of receipt of your certificate and any subscriptions paid will be refunded. After the first 30 days you may cancel your cover at any payment date thereafter by writing to HMCA, Beech Hall, Knaresborough, Yorkshire HG5 0EA.
- **To make a claim telephone 01423 866985 or write to the Claims Department, HMCA, Beech Hall, Knaresborough, Yorkshire, HG5 0EA.**

- **HMCA operates a three-stage complaints procedure**

If you have a complaint please write to The Directors of HMCA, Beech Hall, Knaresborough, Yorkshire, HG5 0EA. If you are dissatisfied with the response you should write to The Care Insurance Company Limited, 33/2 Cannon Lane, Gibraltar, GX11 1AA. If after their review you are still dissatisfied, your complaint can be referred to the Financial Ombudsman Service at South Quay Plaza, 183 Marsh Wall, London, E14 9SR.

- **SIGNIFICANT FEATURES AND EXCLUSIONS**

The Medical Care Plan provides benefits for in-hospital, out-patient treatment, for overnight and longer stays.

An NHS benefit of £200 a night is paid if treatment is carried out in an NHS hospital.

An NHS grant is payable when treatment is received free as an NHS patient, as accident or emergency admissions are not covered (exclusion 2.28 refers).

A Maternity Grant of £750 is paid when both parents are members.

A free Medical Information Helpline is provided.

When you transfer to the PG Mutual Medical Care Plan from an existing plan, conditions that originated whilst you had cover with your previous provider will be covered. This is called the HMCA Transfer Facility (see condition 3.3 for a full description).

There is no age limit for enrolment in the PG Mutual Medical Care Plan.

Long-term conditions which are recurrent, persistent or incurable are not covered. These are commonly known as chronic conditions. (See condition 3.3.2 for a full description).

There are some restrictions in the first year for claims for joint and back conditions (see exclusion 2.24). This does not apply to those enrolling under the transfer facility.

- **Compensation**

The Care Insurance Company Limited is covered by the Financial Services Compensation Scheme (FSCS). You may be entitled to compensation from the scheme in the unlikely event that The Care Insurance Company Limited cannot meet its obligations. This depends on the type of business and circumstances of the claim and would provide cover for 100% of the first £2,000 and 90% of the remainder of the claim without any upper limit. Further information about compensation scheme arrangements is available from the FSCS. (www.fscs.org.uk - telephone 0207 892 7300.)

THE DIRECT DEBIT GUARANTEE



- This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits.
- If there are any changes to the amount, date or frequency of your Direct Debit HMCA/S PLC will notify you 3 working days in advance of your account being debited or as otherwise agreed. If you request HMCA/S PLC to collect a payment, confirmation of the amount and date will be given to you at the time of the request.
- If an error is made in the payment of your Direct Debit by HMCA/S PLC or your bank or building society you are entitled to a full and immediate refund of the amount paid from your bank or building society.
- If you receive a refund you are not entitled to, you must pay it back when HMCA/S PLC asks you to.
- You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.

HMCA only administers Private Health Plans underwritten by The Care Insurance Company Limited. We do not offer advice and the information sent will allow you to make a choice of how to proceed.