

THE PG MUTUAL MEDICAL CARE PLAN

DESCRIPTION OF BENEFITS AND LEVELS OF COVER

EFFECTIVE 1 JULY 2017

This leaflet should be read in conjunction with the full terms and conditions overleaf. The maximum benefit payable for each person named on the Membership Certificate for acute surgical or acute medical conditions, in each subscription year, is £250,000.

IN-HOSPITAL TREATMENT

FOR OVERNIGHT OR LONGER STAYS	£
ACCOMMODATION CHARGES IN A HOSPITAL ON OUR HOSPITAL LIST	Full refund
WARD NURSING CHARGES FOR EACH STAY IN HOSPITAL	Full refund
NHS TREATMENT For the duration of medical treatment carried out solely as a National Health patient in a public ward of an NHS hospital.	200 a night for up to 30 nights a year
SURGICAL CHARGES FOR EACH STAY IN HOSPITAL	
Surgeons' and Anaesthetists' Combined Fees including aftercare.	
Major Plus Operation	up to 1525
Major Operation	up to 1100
Intermediate Operation	up to 735
Minor Operation	up to 420
Additional Benefit for an operation requiring specialised operative techniques	up to 2100
THEATRE FEES, CONSUMABLES, DRUGS AND SURGICAL DRESSINGS FOR EACH STAY IN HOSPITAL	
Major Plus Operation	up to 2280
Major Operation	up to 1515
Intermediate Operation	up to 990
Minor Operation	up to 715
Additional Benefit for an operation requiring specialised operative techniques	up to 2725
PATHOLOGY, INVESTIGATIONS & PHYSIOTHERAPY	
When charged individually by the hospital	up to 1000
When charged as part of a package price	up to 500
WARD DRUGS & CONSUMABLES FOR EACH STAY IN HOSPITAL	
When charged separately for in-hospital treatment.	Full refund
PROSTHESES FOR EACH STAY IN HOSPITAL	
Prostheses payable in accordance with the operation.	
Major Plus Operation	up to 2700
Major Operation	up to 1210
Intermediate Operation	up to 715
Minor Operation	up to 440
Additional Benefit for an operation requiring specialised operative techniques	up to 1350
PHYSICIAN FEES FOR NON SURGICAL STAYS IN HOSPITAL	
First 3 days	up to 120 for each day
After 3 days	up to 60 for each day
INTENSIVE CARE / HIGH DEPENDENCY	
Benefit is payable for medical treatment in an intensive care or high dependency unit.	each year up to 2100

PERSONAL ACCIDENT BENEFITS

PERSONAL ACCIDENTAL DEATH BENEFIT	£ 5000
PERSONAL ACCIDENT DISABILITY COVER	1000

DAY CASE & OUTPATIENT BENEFITS

SPECIALIST SERVICES COMBINED OVERALL ANNUAL LIMIT	£	£2350
Consultations/Physiotherapy or Complementary Medicine	up to	450
Investigations, Pathology, X-Rays, Scans	up to	1250
Day Case Surgery	up to	2350
Within this benefit the annual overall maximum cannot exceed £2350		

OTHER ADDITIONAL BENEFITS

RADIOTHERAPY/CHEMOTHERAPY	£	each year up to 800
A grant is given towards treatment.		
PARENT/GUARDIAN ACCOMPANYING A CHILD		each day up to 300
For a child under 16 years of age, HMCA will pay the accommodation charge for one parent for a period not exceeding 20 days a year.		
HOME-NURSING		each year up to 3600
Following treatment at a private hospital, or treatment arranged on a private basis at an NHS hospital for a qualified nurse for medical reasons.		
PRIVATE AMBULANCE		each year up to 350
For transport by a private ambulance to or from a hospital for medical reasons.		
MATERNITY GRANT		for each birth 800
When both parents have been members for a year.		
LONG-TERM ILLNESS GRANT		up to 1000
Long-Term conditions which are not covered are those that are recurrent, persistent or incurable. After enrolment, a member receiving treatment that ceases to be short-term qualifies for a grant. This benefit can be given at the discretion of HMCA.		

DENTAL & OVERSEAS BENEFITS

DENTAL TREATMENT	
Benefit is payable only where specialist in-hospital and day-case treatment is necessary.	
OVERSEAS COVER	Benefits as for the U.K.
Cover continues when you travel abroad on holiday or business for a period not exceeding 6 months. Excluded are general practitioners' services and hotel expenses. Before travelling obtain form EHIC from the Post Office or telephone 0845 606 2030 for reciprocal arrangements in EEA countries.	

FREE MEDICAL INFORMATION HELPLINE SERVICE

This service is provided free of charge to all HMCA Medical Care Plan members. It is operated by qualified medical staff, counsellors and health advisers and provides non-diagnostic advice on medical matters irrespective of whether you are making a claim for medical treatment. Advice can be sought by members on behalf of themselves and their immediate family even if the latter are not members.