

PG Mutual Medical Care Plan

Insurance Product Information Document (IPID)

Company: HMCA Insurance Limited

Product: PG Mutual Medical Care Plan

HMCA Insurance Limited (www.hmcainsurance.gi) registered in Gibraltar (Reg. No. 96060) with registered address: 33/2 Cannon Lane, Gibraltar, GX11 1AA is an insurer and is authorised and regulated by the Gibraltar Financial Services Commission (GFSC). This can be verified by visiting the GFSC's website www.gfsc.gi or by contacting the GFSC on +350 200 40283. HMCA Insurance Limited is authorised by the Financial Conduct Authority to passport in to the UK, reference number 452264.

This document provides a summary of the key information relating to the plan. The full terms and conditions of the plan and other important information are included in the enclosed information.

What is this type of insurance?

This insurance is designed to provide cover for members who permanently live in the UK for treatment of an acute condition such as a disease, illness or injury of rapid onset, severe symptoms and brief duration.



What is insured?

In-hospital treatment

- ✓ Accommodation charges in a hospital on our hospital list of over 500 hospitals
- ✓ NHS cash benefit of £200 per night for up to 30 nights
- ✓ Surgical charges for each stay in hospital
- ✓ Theatre fees, consumables, drugs and surgical dressing for each stay in hospital
- ✓ Pathology, investigations & Physiotherapy
- ✓ Prostheses for each stay in hospital
- ✓ Intensive care / high dependency
- ✓ Physician fees for non surgical stays in hospital

Personal accident benefits

- ✓ Personal accidental death benefit
- ✓ Personal accident disability cover

Day Case and Outpatient Benefits

- ✓ Day case surgery
- ✓ Consultations/Physiotherapy or Complementary Medicine
- ✓ Investigations, Pathology, X-Rays, Scans



What is insured? Continued...

Other additional benefits

- ✓ Radiotherapy/Chemotherapy grant
- ✓ Parent/Guardian accompanying a child
- ✓ Home-nursing
- ✓ Private ambulance
- ✓ Maternity grant
- ✓ Long-term illness grant
- ✓ No excess. This is available by ringing our helpline on 01423 796262 for more details.
- ✓ Children up to 26 included in a family plan.
- ✓ If you are transferring from another provider we will cover future claims made for acute conditions originating when you were participating in the previous plan. However, at the time of joining if you or your dependants are undergoing treatment or investigations these are excluded unless fully disclosed and accepted by us. If you think this may apply please contact our confidential helpline on 01423 799949 and the team will be happy to help.

Dental & overseas benefits

- ✓ Dental treatment is payable only where specialist treatment is necessary
- ✓ Overseas cover for up to six months



What is not insured?

These are some of the core exclusions, please refer to the Description of Benefits in the enclosed information.

- ✗ Long term or chronic conditions
- ✗ Pre-existing conditions if you have no previous cover, but may be covered after the first 12 months, see exclusion 2.2.1.
- ✗ If you are under investigation or treatment at the time of joining these are excluded unless declared and accepted by us.
- ✗ Pregnancy or childbirth, except in cases of complications in childbirth
- ✗ Infertility
- ✗ Alcohol and drug abuse
- ✗ Rehabilitation, convalescence or time spent in a community hospital
- ✗ Cosmetic surgery
- ✗ Dialysis in chronic renal failure
- ✗ Drugs and dressings prescribed on an out-patient basis
- ✗ Accident or emergency admissions but we will pay the NHS benefit
- ✗ Joint and back problems in the first 12 months; this does NOT apply to members who transfer from another provider
- ✗ Revision or repeat treatment to a joint problem



Are there any restrictions on cover?

! Some benefits have a specific limit, please refer to the Description of Benefits in the enclosed information. Alternatively ring our helpline on 01423 799949 and we will be happy to go through the benefits. You can view them on line at www.hmca.co.uk/docs/pgmmedcare2022.pdf



Where am I covered?

- ✓ You are covered in the United Kingdom. Cover continues whilst travelling overseas but cannot exceed more than 6 months in any membership year.



What are my obligations?

- If you are transferring, you must advise us if you (or anybody to be covered) are undergoing or have had in the last 6 months any treatment or investigations or if you are experiencing any symptoms that may lead to you needing to seek advice.
- If anything changes between the time you agreed to join and your start date you must contact us.
- In the event of a claim, please ensure you contact our claims team on 01423 793023.
- All members must also ensure they provide all information we ask to enable us to process their claim.



When and how do I pay?

- You can pay your subscription annually, monthly, quarterly or half yearly by direct debit.



When does cover start and end?

- Cover commences when we receive your communication to join. If you are transferring your membership we will commence when your previous plan expires. The term of the contract is 12 months and we will write before your contract comes to an end confirming your cover and we will automatically renew unless we hear from you.



How do I cancel my contract?

- If you wish to change your mind you have the right to cancel within 14 days of receipt of your membership certificate and any subscriptions paid will be refunded. After the first 14 days you may cancel your cover at the next annual renewal date by contacting HMCA Members, Beech Hall, Knaresborough, Yorkshire HG5 0EA. Telephone 01423 796262.