

Vitality Health Insurance

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This document is prepared to aid your understanding of the health insurance coverage offered by Vitality. For official information on coverage and eligibility please refer to official Vitality documentation. If there are any differences between the information presented here and any official Vitality documentation then the official Vitality documentation will prevail. Errors and omissions in this document are excluded, rely only on official Vitality documentation when making decisions related to your health insurance coverage. Information contained herein is correct at the time of publishing but may be updated by Vitality from time to time so check directly with Vitality for up to date information.

What is health insurance?

Health insurance gives you access to private healthcare in the UK and helps cover the cost. This can range from private GP appointments to cancer treatment.

Health insurance is also called medical insurance, private medical insurance, or private health insurance. They're all the same thing.

What does health insurance cover?

Private medical insurance helps cover the cost of private medical treatment. This includes hospital stays, medicines, and surgical procedures where they are covered by the policy. Health insurance in the UK doesn't usually cover long-term conditions like diabetes or any you had before you bought your plan.

What's covered? (In all cases refer to official documentation for full information)

- Acute conditions (these are conditions where symptoms develop quickly and treatment is short-term. Examples include hernias and joint injuries).
- Private hospital stays
- Specialist consultations
- Diagnostic tests
- Cancer treatment
- Oral surgery

What's not covered?

- Long term, chronic conditions
- Conditions where symptoms appear slowly and can worsen over time. For example, diabetes.
- Pre-existing conditions
- Any treatment you receive outside the UK
- Pregnancy, childbirth and related conditions
- Cosmetic treatment
- Organ transplants
- Any treatments or practices that are experimental, unproven or unregistered
- Any treatment for learning and behavioural problems, or dementia.

Vitality Private Healthcare

Flashbay have chosen Vitality to be our private healthcare provider and the selected plan would provide comprehensive cover for in-patient and outpatient treatment with cover benefits for outpatient consultations, diagnostics, and additional benefits as per the bullet points below:

- In-patient treatment
- Full cover of consultant fees
- Full cover of diagnostic tests
- Full cover of out-patient treatment surgical procedures
- Out-patient cover
- Consultant appointments and diagnostic tests
- Physio-therapy cover
- Extended Cancer cover
- Follow up consultations
- Additional supporting benefits and cover (Vitality private video GP appointments)
- Face-to-face Private GP (£20 per consultation)
- Private prescriptions and minor diagnostic tests (Up to £100 per plan year to use towards Vitality GP referred minor diagnostic tests and most private prescriptions)
- GP led treatment pathway
- Wellness pathway
- NHS Hospital Cash benefit
- Childbirth cash benefit
- Mental Health benefit
- Home nursing
- Private Ambulance
- Oral surgery
- Rehabilitation
- £250 Vitality Linked Excess per person per year

What are the benefits to me?

Private Medical Insurance gives you fast access to high quality private medical facilities and medical treatments, at a time and place that suits you. It also plays an equally important role in helping fund the cost of early diagnosis and treatment of acute conditions.

- Fast access to private medical treatment
- Access to a wide range of hospitals
- Access to the latest drugs and treatment
- Choice of consultant
- Comfort and privacy at a time when you need it most

How much would it cost?

Flashbay will cover the cost of your health insurance premium and employees will pay the associated tax. The table below provides a guide on what you can expect to pay **per annum**. These values are indicative only and vary by actual age and number of people who sign up for the plan. e.g. the cost will be lower for a 31 year old than for a 35 year old.

Age Range	Cost to Employee @20% Tax Rate	Cost to Employee @40% Tax Rate
21-25	£40	£80
26-30	£46	£92
31-35	£50	£100
36-40	£55	£110
41-45	£62	£124
46-50	£70	£140
51-55	£90	£180
56-60	£114	£228

Please note if an employee was to obtain their own medical insurance independently the cost is generally much higher. Please see the case study below:

Employee A is 39 years old. Using Vitality's website, he has been quoted a cost of £615 for annual medical insurance. By opting to receive his medical insurance through Flashbay, he will receive that same medical cover at a cost of £55 if a lower rate tax payer or £110 if a higher rate tax payer.

Can I add a partner or child onto my healthcare plan?

Please contact HR for additional information and pricing.

How does the health insurance claims process work?

There are four types of claims:

1. Referrals to a consultant and further treatment
2. Physiotherapy
3. Mental health treatment
4. Private prescriptions/diagnostic tests issued by a Vitality GP

You can also self-refer for physiotherapy and some mental health treatments, so you don't have to wait to see a GP first. Unless you are self-referring, all other claims can be initiated via the Vitality GP App, Member Zone or via telephone.

Physiotherapy

You can self-refer to their Priority Physiotherapy Network to access virtual rehabilitation and face-to-face treatment. Providing you use a physiotherapist on their panel, your treatment costs will not be deducted from your Outpatient Cover limit, although you will need to pay any excess that applies to your plan. If you prefer to use a physiotherapist outside of their network you will need to pay any invoices directly and submit them to Vitality. You will be reimbursed up to £35 per session and the costs will be deducted from your Out-patient Cover limit.

Mental health treatment

To help support your mental wellbeing you can self-refer to their Mental Health Panel to access a range of clinically effective treatments including counselling and cognitive behavioural therapy (CBT). These treatments are delivered by accredited therapists located around the country.

Private prescriptions and diagnostic tests issued by a Vitality GP

You can claim back the cost of up to £100 worth of certain private prescriptions or minor diagnostic tests when issued/ordered by a Vitality GP. Following your Vitality GP consultation simply send a copy of your prescription/invoice, receipt and Vitality membership number. State that you'd like to claim from your Vitality GP benefit and if your claim is approved you will be reimbursed from your available balance within 10 working days.

Occasionally, Vitality will advise that further medical information is needed in order to initiate a claim - including physiotherapy and mental health claims. In this instance you will need to visit your medical practitioner who will need to complete a claim form.

Referrals to a consultant

To start a claim, follow the simple steps below:

1. Book a consultation with a Vitality GP through the Vitality GP app. Providing they can diagnose you on the call, the Vitality GP can arrange an onward referral for you and assess your claim, so you don't need to call Vitality.
2. Alternatively, visit an NHS GP, who will be able to review your symptoms and decide if you need to see a consultant. If you do need to see a consultant, ask the GP to provide you with an 'open referral', with details of your conditions, symptoms and diagnosis. Then contact Vitality so they can assess your claim and arrange for you to see a consultant on their panel.

What happens next?

As soon as your claim is approved Vitality will pass your details to their preferred consultant network panel who will choose the best consultant for you, based entirely on your medical needs. They'll usually call you the next working day or sooner to confirm all the details of your appointment. You'll be asked to make sure you give the consultant your claim acceptance number when you go for your consultation so they can bill Vitality directly.

When you receive the call to confirm your appointment options, you will be asked to provide your credit/debit card details. Please rest assured that this will only ever be used to cover any excess or charges you may need to pay that are not covered under your plan. Normally, Vitality will arrange for charges to be settled directly with the healthcare provider. If you settle any other bills yourself that aren't your responsibility, please send Vitality your receipt and invoice and they'll arrange payment for you.

Excess Payments

A range of fees are covered by the plan, details of these can be found at the end of this document under 'Details of the Cover'.

If you are required to pay an **excess**, then this will only be once per plan year. Even if you make two or more claims in the same plan year, you will only have to pay the excess once. If your claim carries on into the next plan year, you'll need to pay the excess again.

All employees will be 'bronze' status when they join with the excess amount set at £250. However, you can link your excess to your Vitality status and earn points through living a healthier lifestyle to progress to silver, gold or platinum. If you take steps to get healthier and improve your Vitality status, you can save on the excess payment, meaning you could end up not having to pay any excess at all if you need to make a claim.

Please note regardless of your excess amount, this will be paid by you. Flashbay will not cover the cost of any excess amounts.

The Vitality Programme and Rewards

The Vitality Programme is designed to make employees healthier. By leading a healthier life with Vitality, you can access a range of discounts and rewards. All employees will join as a bronze member and can progress to Platinum through living a healthier lifestyle. Please read 'A guide to the Vitality Programme' pdf for more information.

Vitality Rewards includes but is not limited to:

- Annual Free Vitality Health Check (cholesterol, blood sugar, blood pressure checks) Discounts available of up to 81% for full health-screens through Bluecrest.
- Dedicated mobile app for all insurance and reward benefits
- 50% discount at Virgin Active, and selected David Lloyd and Nuffield health gyms
- Rewards for healthy living through regular exercise and eating correctly e.g. Free Amazon Prime, heavily discounted Apple Watch, FREE cinema tickets, movie downloads through Rakuten TV – one free movie each week and free coffee from Café Nero. Up to 25% cashback on healthy foods at Waitrose (Full details can be found in the Vitality Rewards brochure attached or at www.vitality.co.uk)

More Details of Cover (correct at time of publishing, check Vitality documentation for up to date information)

In-patient treatment

Full cover of hospital fees

Includes overnight stays, nursing, and any drugs you might need while in hospital. Vitality also cover the costs of intensive care treatment and operating theatre charges.

Full cover of consultant fees

Should the consultant be registered with an accredited body and recognised by Vitality, Vitality pay for in-patient in full, including the surgeons' and anaesthetists' fees, physicians' fees and other consultant appointments.

Full cover of diagnostic tests

Should you be admitted to hospital as an in-patient or a day-patient, Vitality pay for the diagnostic tests you need – things like blood tests and x-rays. Vitality also pay for any MRI, CT and PET scans if required.

Full cover of out-patient treatment surgical procedures

Vitality pay for surgical procedures where members are treated as an out-patient.

Out-patient cover

Out-patient Cover pays for out-patient costs, such as consultant appointments and physiotherapy, and diagnostic tests – MRI scans, blood tests and x-rays on a referral by a GP.

Consultant appointments and diagnostic tests

Consultant appointments up to £1000 per person per year Full cover for diagnostic tests Full cover for MRI, CT and PET. Vitality pay for these scans, as long as members have been referred by a consultant.

Physio-therapy cover

The Vitality Health physiotherapy network includes over 1,400 accredited physiotherapy clinics across the UK. This means that, more often than not, members will be able to have treatment at a convenient location, from their home or place of work.

Full cover for a physiotherapist within Vitality's network - treatment will be covered in full. Cover for a physiotherapist outside of Vitality's network will be limited to £35 per session.

Extended Cancer cover

Full cover for radiotherapy and chemotherapy

Full cover for radiotherapy, chemotherapy and follow-up consultations

Full cover for biological therapies

Full cover for hormone and bisphosphonate therapies

Full cover for cancer surgery and reconstructive surgery

Full cover for stem cell therapy

End-of-life home nursing care - Up to £1,000 per day for a maximum of 14 days

Wigs and restyling Up to £300 per claim

Full cover for scalp cooling Mastectomy bras and external prostheses - Up to £200 per claim

Follow up consultations

Full cover for consultations up to 5 years from last cancer treatment date. If your cancer is no longer treatable, Vitality pay for you to have care that can relieve their symptoms. This includes pain relief at the end stage of cancer. The limits apply for the whole of the time a member is covered by Vitality Health, whether under this plan or any other plan with Vitality. Follow-up consultations are covered for a maximum of five years from the last cancer treatment date and assuming you still have a plan with Vitality.

Additional supporting benefits and cover**Vitality (Private video appointments) GP**

Vitality GP offers members access to a GP at a time and place that suits them. Using the Vitality GP app you will be able to talk directly to a Vitality GP and have a private GP video appointment. You will be offered a choice of GPs, based on your gender and you will have the ability to securely upload images taken with a smartphone for them to view.

Face-to-face Private GP

Vitality understand that there will be cases when a virtual consultation with a GP is not appropriate. Face-to-Face GP enables every member in Greater London access to a minimum of two consultations from Vitality's network of Private GPs for only £20 per consultation.

Private prescriptions and minor diagnostic tests

When a private prescription is issued by a Vitality GP, members can choose to have their prescription posted to their home address or to a Lloyds Pharmacy. If you choose to have it delivered to a Lloyds Pharmacy you can pick up your medication at the pharmacy. No excess is

payable for a private prescription. Up to £100 per plan year to use towards Vitality GP referred minor diagnostic tests and most private prescriptions

GP led treatment pathway

The Vitality GP can refer members for the most appropriate onward treatment meaning you often will not have to make an additional call or online claim. (Claiming through consultant select - details available upon request)

Wellness pathway

Because the Vitality GP has access to members Vitality Age and Health check results, they can advise you on how to get healthier and help manage any long-term conditions.

1 The Vitality GP app is available on Apple (iOS 8 or later) and Android (5.0 or later) platforms only.

2 The video consultation service is available from 0800–1900 Monday to Friday and 0900–1300 Saturdays, excluding bank holidays.

NHS Hospital Cash benefit

If members choose to get treatment on the NHS, rather than being treated privately through their plan, Vitality give you a cash amount. In-patient treatment: £250 per night up to a maximum of £2,000 Day-patient treatment: £125 per day up to a maximum of £500

Childbirth cash benefit

Vitality will give members a cash payment following the birth or adoption of a child (the payment following a birth only applies if you have been on the plan for at least 10 months). Vitality pay once per child even if both parents are covered on the plan. £100 per child

Mental Health benefit

Talking therapies, Cognitive Behavioural Therapy or counselling where treatment is agreed as clinically appropriate and arranged through Vitality's mental health panel. 8 sessions of Cognitive Behavioural Therapy (CBT) or counselling. Access to online anonymous forums and mindfulness apps.

Home nursing

Should your consultant recommend home nursing instead of more in-patient treatment, Vitality pay for it. It can get you back on your feet after a stay in hospital. Full cover.

Private Ambulance

The use of a private ambulance for transfer between hospitals, whether NHS or private, if a consultant recommends it as medically necessary. Full cover.

Oral surgery

Vitality cover surgical removal of impacted teeth, partially erupted teeth causing repeated pain or infections and complicated buried roots, surgical drainage of a facial swelling, removal of cysts of the jaw, and apicectomy. If you have an accident Vitality can also cover some kinds of dental surgery. Full cover in specified circumstances.

Rehabilitation

Vitality cover rehabilitation treatment following a stroke or serious brain injury. Cover - up to 21 days immediately following eligible in-patient treatment.

£250 Vitality Linked Excess per person per year- Members can take steps to get healthier and improve their Vitality Status to save on their excess payment should they need to make a claim. By

getting to Silver Status the excess is reduced to £100 per person per year and gold and platinum carry no excess. (Full details of how to earn points through regular exercise, eating correctly, not smoking and losing weight can be found in the Vitality Rewards brochure attached or at www.vitality.co.uk)

Moratorium Underwriting - Vitality will not cover any pre-existing conditions and related conditions which any applicant has received treatment and/or medication for, or had symptoms of, or asked advice on, or were aware of during the 5 years before cover starts under the plan. However if you do not have any treatment, medication or advice for those pre-existing conditions for two continuous years from your plan start cover date, then after that the conditions may be considered eligible for benefit subject to the plans terms and conditions.

Consultant Select Network

Hospitals UK wide using Vitality's Consultant Select panel of peer recommended consultants who will choose the most appropriate hospital for treatment based on your condition and geographical location.