

### The key facts of Medicash Reward

This section provides a summary of the key features of Medicash Reward. It does not include the full terms of the policy, these can be found in the Terms and Conditions and your Schedule of Membership. Medicash Reward offers cover that gives you money back for a range of everyday healthcare expenses and is provided by Medicash Health Benefits Limited and is governed by English law and the English courts shall have jurisdiction in any legal proceedings.

### The key features and benefits of Medicash Reward

- Five levels of cover on a single basis paid for by your employer
- If you cease to be eligible to be a member of Medicash Reward, due to a change of employment, Medicash may offer you the opportunity to transfer, on preferential terms, to one of its other Health Cash Plan products
- Cover is provided without the need for a medical
- Claims can be made as soon as the Plan has commenced for all benefits
- Payment of set amounts directly to you to cover the costs of expenses incurred for everyday healthcare such as for Optical, Dental, Complementary and Alternative Therapies within annual limits
- Payment of set amounts directly to you for consultations with a Specialist Consultant or to reimbursement of a Private Medical Insurance (PMI) excess payment
- Provision of Worksite Health Screening Sessions and access to Discounted Gym Membership
- Access to Telephone Helplines providing a counselling and advisory service with access to a maximum of 6 face to face counselling sessions.

### The key limitations and exclusions of Medicash Reward

- There is no age restriction on joining the Plan provided you are an employee and your employer is paying premiums (see Section 2.5 in the Terms and Conditions)
- The Plan is only available through your employer and you will cease to be a member if you leave the employment of a participating employer as your premiums will not be paid up to date (see Section 3.6 and 7.4 in the Terms and Conditions)
- Claims must be made within 26 weeks of the date that treatment was received otherwise we will not accept any liability to pay such claims (see Section 5.7 in the Terms and Conditions)
- We will not pay claims for any treatment required as a result of participation in any hazardous sports (see Section 1 in the Terms and Conditions) and pursuits or through self-inflicted injury (see Section 5.9 in the Terms and Conditions).

### The duration of the Plan

Your Plan will automatically be renewed on a monthly basis provided your employer continues to pay the premiums and that you comply with the Terms and Conditions of the Plan.

### Making a claim

If you wish to make a claim simply call our Claims Team on 0151 702 0265. Full details of how to claim are included elsewhere in this pack. Alternatively you can download a claim form from [www.medicash.org](http://www.medicash.org)

### Making a complaint

If you are dissatisfied with the service provided to you or if you feel that an incorrect decision has been made, please contact us. If you are dissatisfied with the outcome of our investigation, you can ask to refer your complaint to the British Health Care Association. If you are still not satisfied you can refer your complaint to the Financial Ombudsman Service for consideration. Full details of how to complain are included in Section 8.4 of the Terms and Conditions.

### Statutory compensation arrangements

In the unlikely event that Medicash Health Benefits Limited becomes insolvent and is unable to pay the benefits provided under the Plan, you are protected by the Financial Services Compensation Scheme (FSCS). Under this scheme the first £2,000 of a claim or policy is protected in full. Above this threshold, 90% of the rest of the claim or value of unused premiums may be met. Further information can be found at [www.fscs.org.uk/consumer](http://www.fscs.org.uk/consumer)