

Product Name: WELLBEING

Target Market: UK resident, individual policyholders (retail customers).

Any identified markets for whom the product is not suitable: Non-UK residents.

Numb	Assessment	Assessment
er	Question/	
	Category	
1.	Details of the nature of the product	Health Cash Plan.
2.	Coverage that the product provides.	Refer to Wellbeing Benefit Table. Terms & Conditions: https://www.medicash.org/wp- content/uploads/2022/01/Medicash Voluntary Terms and Conditions 2021.pdf
3.	Limitations in relation to coverage (including but not limited to exclusions, limits of liability, excesses)	RESTRICTIONS Annual benefit allowances. Claims must be received within 26 weeks of the treatment date or date of accident. Dental Accident & Injury claims require attendance for a dental emergency appointment within five days of the accident or injury. Up to four dependent children are covered at no extra cost, up to their 19 th birthday if in full time education, claiming half of the adult entitlement for the benefits as specified on the benefit table. Any charges for completion of claim forms or any medical information we need to support your claim. NOT INSURED Treatment provided by immediate family. Pre-existing conditions for hospital claims Trially to fany inpatient stay Birth of a child in relation to babies born within the first 12 months of the policy
4.	Type & quality of the services to be provided	Policyholders will have access to all the benefits specified on the Benefit Table. Named dependants will have access as outlined on the Benefit Table.

		Access to the	ne Mv Media	rash ann fo	r claim sub	mission and	mProve access	
		Access to the My Medicash app for claim submission and mProve to policy documents and ancillary services. Claims can also be su through the website or by post.						
		Customer support from Medicash by both telephone, email and app messages. Ancillary services can be provided virtually, for example Virtual GP appointments, Phio and Skinvision. Telephone lines are open 8am to 5pm, Monday to Friday (excluding bank holidays), with 80% of calls answered within 20 seconds and less than 5% abandoned. Emails to Medicash are responded to within 2 working days.						
		Ancillary services are 24/7, 365 days a year.						
		Payment is ordinarily made by bank transfer using a fast payment service, meaning that following authorisation, claims are ordinarily credited to the policyholder's bank account by the end of the following working day and often within 24 hours. Claims can also be paid by cheque if the policyholder prefers.						
		The 'Medic	ash Assist' s	ervice is av	ailable for	policyholde	rs with	
			tics of vulne				<u>ash</u>).	
5.	Is the product net priced	All premiun	ns include In	surance Pr	emium Tax	ζ.		
6.	Total price	Level	1	2	3	4		
	to be paid	Solo	£7.20	£17.05	£28.90	£42.75		
	by the policyholder	Dual	£14.40	£34.10	£57.80	£85.50		
7.	Details of the pricing model used to calculate the risk premium i) for the initial policy term, ii) for any future renewal	The policy is monthly renewable and the pricing model is community underwriting. Price increases are rare, with prices often remaining the same for years. Any changes are communicated to policyholders at least 28 days in advance of the changes.						
8.	Breakdown	Level	1	2	3	4		
	of the	Solo	£7.20	£17.05	£28.90	£42.75		
	overall cost of the	Dual	£14.40	£34.10	£57.80	£85.50		
	insurance product							
9.	Details of	The Wellbe	ing plan is o	rdinarily so	ld directly	by Medicas	h to retail	

par dist cha this of t pre oth paid by t	ty in the racribution cuin where s is part che mium or erwise d directly	the event a broker is responsible for a sale, the usual 10% commission te applies. This does not affect the premium paid by the retail istomer.
10. Are cha exp the price cus will dur per the the (inc the any sub ren any	any Thinges projected to total Thice a tomer Project pay Aring the iod that y hold product cluding at first or esequent ewal or other not in Thinges Project P	nere are no changes expected to the price paid during the period the roduct is held. In this is a monthly renewable policy. In this is a monthly renewable policy.
11. Is a cha the risk exp over for to the trial custom usa und good white institutions.	ny Thange to spanies insured spected er time, example	nere is no change to the insured risk expected. The plan is provided as secified with no changes built in. See 10 for further details.
	nber of ex	nere is nothing inherent built into the product which would result in spected claims variation or changes to policyholder needs and risk. See of for further details.

claims that may be made, or financial value of any such claim, expected to change over time due to the nature of the product, the customer's needs or any relevant features of the insured risk, for example i) as a result of expected depreciation in the value of the insured asset, ii) where the customer's need or eligibility for certain cover may change for example in a customer's usage. 13. Could the This is a general insurance product and It is possible that a policyholder's total premiums may exceed claims. This is an insurance product. premiums expected to However, if the maximum is claimed for both a dental and optical benefit annual allowance then almost all premiums will be recouped and that is be paid over the length before any other benefits are claimed. Claims may reach or exceed of time a premiums paid. If additional benefits are also claimed, then premiums exceed claims. customer would hold the product, Ancillary services are factored into the underwriting of the product itself. exceed the These include services and savings through the My Medicash app, benefits Skinvision, Virtual GP, Medicash Extras, Helplines, Phio. that could be received from claims

	for example	
	due to cover	
	limits	
	applying	
	across the	
	foreseeable	
	period.	
14.	Could	This is a respettive representation and showers to property and box of the
14.	benefits	This is a monthly renewable policy and changes to premiums and benefits
		are not built in to the plan, irrespective of usage. The plans are
	offered by	community underwritten and there are no individually weighted
	the policy at	premiums or excesses imposed.
	inception	
	not be	If any changes are made to the Wellbeing plan, these will be
	available at	communicated to policyholders at least 30 days in advance and such
	subsequent	changes are very rare, with the plan often remaining unaltered for a
	renewals,	number of years.
	due to	- 1
	exclusions	
	or claim	
	limits,	
	without any	
	commensur	
	ate	
	reduction in	
	the	
	premium?	
15.	Could	Refer question 14.
	customers	
	be	
	discouraged	
	from or	
	unable to	
	_	
	renew due	
	to the level	
	of ongoing	
	premiums	
	including	
	increases at	
	renewal	
	meaning	
	they may	
	not be	
	receiving	
	the full	
	intended	
	benefits of	
	the product.	

If 'N', mitigating actions to be detailed below.

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