



Fair Value Product Assessment

Product Name: Active (Voluntary)

Target Market: The Active product is primarily aimed at the voluntary payroll corporate market.

Any identified markets for whom the product is not suitable: This product is not suitable for individuals resident outside of the UK.

Number	Assessment Question/ Category	Assessment
1.	Details of the nature of the product	Health Cash Plan.
2.	Coverage that the product provides.	Refer to Active 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)	<p>RESTRICTIONS</p> <ul style="list-style-type: none"> • Annual Benefit allowances. • Birth of a Child benefit has a 12 month waiting time • Claims must be received within 26 weeks of the treatment date or date of accident. • First night of any hospital stay is not covered • PA ends on 66th birthday • Pre-existing conditions are not covered for hospital claims for 3 years from policy inception • Up to four dependent children are covered at no extra cost, up to their 19th birthday if in full time education, claiming half of the adult entitlement for the benefits as specified on the benefit table. Some benefits are not provided for dependants.

		<p>NOT INSURED</p> <ul style="list-style-type: none"> • Treatment provided by your immediate family. The first night of any inpatient stay. • Treatment, purchases or accidents which occur outside of the UK. • Any charges you may have to pay to fill in a claim form, or charges for any medical information we may need to support your claim. • Personal Accident cover ceases on your 66th birthday. • Children are not covered for Accidental Death.
4.	Type & quality of the services to be provided	<p>Policyholders will have access to all the benefits specified on the benefit table. Named dependants will have access as outlined on the benefit table.</p> <p>Access to the My Medicash app for claim submission and mProve, access to policy documents and ancillary services. Claims can also be submitted through the website or by post.</p> <p>Customer support from Medicash by both telephone and email.</p> <p>Ancillary services can provide virtual services, for example Virtual GP appointments, Phio and Skinvision.</p> <p>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.</p> <p>Ancillary services are 24/7, 365 days a year.</p> <p>Payment is ordinarily made by bank transfer using a fast payment service, meaning that following authorisation, claims are credited to the policyholder's bank account by the end of the following working day and often within 24 hours. Claims can also be made by cheque if the policyholder prefers.</p> <p>The 'Medicash Assist' service is available for policyholders with characteristics of vulnerability (Medicash Assist Medicash).</p>
5.	Is the product net priced?	All premiums include Insurance Premium Tax.

6.	Total price to be paid by the customer	<table border="1" data-bbox="624 219 1382 342"> <thead> <tr> <th></th> <th>Bronze</th> <th>Silver</th> <th>Gold</th> <th>Platinum</th> <th>Platinum Plus</th> </tr> </thead> <tbody> <tr> <td>Solo</td> <td>£6.95</td> <td>£13.90</td> <td>£22.25</td> <td>£33.40</td> <td>£41.75</td> </tr> <tr> <td>Dual</td> <td>£12.85</td> <td>£25.70</td> <td>£41.05</td> <td>£61.20</td> <td>£76.50</td> </tr> </tbody> </table>		Bronze	Silver	Gold	Platinum	Platinum Plus	Solo	£6.95	£13.90	£22.25	£33.40	£41.75	Dual	£12.85	£25.70	£41.05	£61.20	£76.50
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7.	Details of the pricing model used to calculate the risk premium i) for the initial policy term, ii) for any future renewal	<p>The policy is monthly renewable and the pricing model is community underwriting.</p> <p>Price increases are rare, with prices often remaining the same for years. Any changes are communicated to policyholders at least 30 days in advance of the changes.</p>																		
8.	Breakdown of the overall cost of the insurance product	<p>Active standard charges are:-</p> <table border="1" data-bbox="624 869 1382 992"> <thead> <tr> <th></th> <th>Bronze</th> <th>Silver</th> <th>Gold</th> <th>Platinum</th> <th>Platinum Plus</th> </tr> </thead> <tbody> <tr> <td>Solo</td> <td>£6.95</td> <td>£13.90</td> <td>£22.25</td> <td>£33.40</td> <td>£41.75</td> </tr> <tr> <td>Dual</td> <td>£12.85</td> <td>£25.70</td> <td>£41.05</td> <td>£61.20</td> <td>£76.50</td> </tr> </tbody> </table>		Bronze	Silver	Gold	Platinum	Platinum Plus	Solo	£6.95	£13.90	£22.25	£33.40	£41.75	Dual	£12.85	£25.70	£41.05	£61.20	£76.50
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9.	Details of the remuneration of each party in the distribution chain where this is part of the premium or otherwise paid directly by the customer	<p>The Active plan is ordinarily sold directly by Medicash to retail customers.</p> <p>The Medicash sales team are bonused.</p> <p>In the event a broker is responsible for a sale, the usual 10% commission rate applies. This does not affect the premium paid by the retail customer.</p>																		
10.	Are any changes expected to the total price a customer will pay during the period that they hold the product (including at the first or any subsequent renewal or any other point in time?)	<p>There are no changes expected to the price paid during the period the product is held.</p> <p>This is a monthly renewable policy.</p> <p>Price increases are rare, with prices often remaining the same for years. Any changes are communicated to policyholders at least 30 days in advance of the changes.</p>																		

11.	Is any change to the insured risk expected over time, for example to the nature, financial value or a customers usage of an underlying good to which the insurance relates?	There is no change to the insured risk expected. The plan is provided as specified with no changes built in. See 10 for further details.
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12.	Is the number of expected 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.	There is nothing inherent built into the product which would result in expected claims variation or changes to policyholder needs and risk. See 10 for further details.
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13.	<p>Could the total premiums expected to be paid over the length of time a customer would hold the product, exceed the benefits that could be received from claims for example due to cover limits applying across the foreseeable period?</p>	<p>It is possible that on an individual policyholder basis, premiums may exceed claims. This is an insurance product.</p> <p>However, if the maximum is claimed for both dental and optical benefit annual benefit allowances is claimed then almost all premiums will be recouped and that is before any other benefits are claimed (which would automatically see higher payments out than premiums paid).</p> <p>This also does not factor in the value of the numerous ancillary benefits provided for through the plan, including services and savings through the My Medicash app, Skinvision, Virtual GP, Medicash Extras, Helplines, Phio.</p>
14.	<p>Could benefits offered by the policy at inception not be available at subsequent renewals, due to exclusions or claim limits, without any commensurate reduction in the premium?</p>	<p>This is a monthly renewable policy and changes to premiums and benefits are not built in to the plan, irrespective of usage. There are no individually weighted premiums or excesses introduced.</p> <p>If any changes are made to the Active plan, these will be communicated to policyholders at least 30 days in advance and such changes are very rare, with the plan often remaining unaltered for a number of years.</p>

15.	Could 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?	Refer question 14.
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Fair value assessment satisfactorily completed: YES

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

Version date: 1 September 2023

Next review date: 1 September 2024

Yearly update:

1 September 2023	No changes to cover or any significant variance to outcomes since previous annual review.
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