



The Islands Health Plan

Still by your side

Helping you access private healthcare
in the Channel Islands and Isle of Man,
and on the mainland

Once you leave your company, you'll no longer be covered on their international healthcare scheme. But don't worry, as the scheme was provided by AXA, it's easy for you and your family to continue your cover on one of our personal plans.

Continuing your international healthcare cover

What we're offering you:

- To keep your cover for previous and existing medical conditions. (Some of the benefit limits you had on your company plan may differ on a personal plan).
- Up to 3 months after leaving your company scheme to take this up.

You may find it difficult to get continued cover for any existing or previous medical conditions at a later date.

It's also important to note that if you decide to move insurers, you and any family members covered on your policy, wouldn't be guaranteed this continuity of cover.

By continuing your cover, you'll be able to:

Access any claims history or records you already have with AXA

- Any claims history you have can be transferred across from your company scheme - no need for paperwork or application forms.

Continue using our online member portal

- You'll still have access to your online account, where you can manage your account details and submit any claims. Or if you'd prefer, you can call us day or night.

Choose where you want treatment

- You can still choose to have treatment anywhere in the world - whether that's locally, back home with your family doctor, or with a specialist in a different country.

Different plan, same features

Don't forget, some of the great features and services that you had on your corporate scheme may still be available on your new individual plan.

As standard, all of our individual plans offer:

- 24/7 medical information at the end of a phone
- Emergency evacuation and repatriation as standard
- Access to an independent second medical opinion service.

And you can include optional cover for out-patient, dental and travel with upgrades on certain plans – tailoring your plan to suit your needs.

How to continue your cover

Call us today on our dedicated helpline: +44 (0) 1892 612 080.* We can help explain your options, go through what is and isn't covered and set up your cover for you.

*Lines are open Monday to Friday, 8am-6pm (UK time). We may record and/or monitor calls for quality assurance, training and as a record of our conversation.

If ill health strikes, it's reassuring to know that you can access the treatment you need quickly - locally, in mainland UK, or in Europe.

- ✓ Our Islands Health Plan is carefully designed to give you or your family fast access to care when you need it.
- ✓ AXA has supported customers in the Channel Islands and the Isle of Man for over 20 years.
- ✓ Access to our strong medical network on the islands and across the UK.
- ✓ Our plan gives you all the certainty of a predictable regular cost, not a sudden bill when you've had the treatment.

Access to over
5,300
medical facilities
across our network

The Islands Health Plan puts you in charge of your healthcare choices

Quick, reliable, easy access to healthcare

- ✓ You can use a hospital on the islands, in mainland UK, or throughout Europe.
- ✓ Walk into almost any hospital or clinic and they'll recognise the AXA brand and trust your cover.
- ✓ Our higher cover levels include GP fees too.
- ✓ If you can't get the care you need locally, AXA will help you with the costs of travelling to another island or the UK for treatment.
- ✓ For treatment in the UK, our Fast Track Appointments team can get you an appointment quickly - usually within two weeks¹ - and sort everything out for you.
- ✓ You can reach our expert, friendly team easily and quickly.
- ✓ You can get emergency treatment throughout Europe - or worldwide, with all but one of our cover levels.

Choose the plan that suits you

Our flexible plan can provide cover for you and your family. We'll help you customise the plan to suit your needs, and be on hand to help you with any questions, any time.

1

Which cover level suits you?

Choose the cover level that's right for you.

Core – for superb value, covering CT, MRI and PET scans, hospital stays and emergency transport

Classic – including out-patient treatment and emergency treatment outside Europe

Premier – including GP fees and a health check

Ultimate – our top-level cover, with extensive out-patient benefits and dental and optical cover included

2

Add an upgrade

Boost your cover with an upgrade.

Dental and optical cover
 Access to our extended hospital network – including more London hospitals

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3

Manage your costs with an excess

Add an excess to help bring your premiums down.

- £100
- £200
- £500
- £1,000
- £2,000

Here's an example:

David works in Saint Helier but often travels elsewhere for work and to visit family.

He's chosen Premier cover level so that he's covered for visits to his GP, and added the dental and optical upgrade to help with the cost of his glasses. Then he's cut costs by adding an excess of £200.



Plans in detail

1 of 2

For more information, see your membership handbook.

Islands Health Plan

What's my area of cover?

Guernsey, Jersey and Isle of Man, UK and Europe.

Which hospital network can I use?

The Islands Health Plan Directory of Hospitals for UK and Channel Islands hospitals, any hospital in Europe.

Access to our extended network of hospitals

As well as access to hospitals in Europe, the Channel Islands and the UK (as listed in the Islands Health Plan Directory of Hospitals), you can choose to extend your hospital network and gain access to a greater selection of hospitals in London.

What upgrades can I add?

Dental and optical cover

For Core, Classic and Premier, you can add cover to include:

- ✓ 80% of the cost for non-routine dental treatment, up to £150 each year
- ✓ 80% of the cost for prescription glasses and contact lenses, up to £100 each year
- ✓ Up to £25 towards an eye test each year
- ✓ **Dental and optical cover is automatically included on Ultimate plans.**

Summary of benefits

In-patient & day-patient treatment	Core	Classic	Premier	Ultimate
Hospital and accommodation charges	Paid in full			
Out of directory cash benefit when a member receives treatment at a facility in the UK not listed in the Islands Health Plan Directory of Hospitals	£100 each day / night			
Specialist fees (surgeons, anaesthetists and physicians)	No annual maximum			
Parent accommodation: Charges for one parent staying in hospital with a child under the age of 18 and covered by the policy	Paid in full			
Hotel accommodation for one parent while a child is in hospital	£100 a night up to £500 per year			
Emergency outside of Europe cover	No cover	Paid in full for up to 8 weeks treatment in any year up to a total of £25,000 a year	Paid in full for up to 8 weeks treatment in any year up to a total of £30,000 a year	Paid in full for up to 8 weeks treatment in any year up to a total of £50,000 a year
Cash benefit for each night you receive free in-patient treatment and free hospital accommodation within the UK or Channel Islands	No cover	£50 per night up to £2,000 per year		£100 per night up to £2,000 per year
In-patient psychiatric treatment	100 days per member lifetime			
Out-patient cover	Core	Classic	Premier	Ultimate
Surgical procedures	No annual maximum			
CT, MRI and PET scans received as an in-patient, day-patient or out-patient at any hospital in Europe and scanning centre within the Islands Health Plan Directory of Hospitals	Paid in full			
CT, MRI and PET scans per visit for using a CT, MRI or PET facility in the UK that is not listed as a scanning centre in the Islands Health Plan Directory of Hospitals	£100 each visit			
Psychiatric – out-patient consultations and treatment	No cover		Up to £1,000 per year	
Other out-patient treatment – combined limit, including:	Not included	Up to £1,000 per year	Up to £2,500 per year	No annual maximum
Specialist consultations	No cover			
Complementary practitioner charges				
Physiotherapy				
Diagnostic tests				
	Treatment for GP referred physiotherapy and/or complementary practitioner treatment up to 10 sessions per year. Further sessions available under specialist referral up to your out-patient limit			

Plans in detail continued

2 of 2

For more information, see your membership handbook.

Cancer cover	Core	Classic	Premier	Ultimate
Radiotherapy and chemotherapy received as an in-patient, day-patient or out-patient	No annual maximum			
Drug treatment to prevent recurrence of cancer (excluding pre-existing conditions)	No annual maximum			
Follow-up consultations	No cover	No annual maximum within out-patient limit		No annual maximum
Day-patient and out-patient radiotherapy and chemotherapy cash benefit when treatment and accommodation has been free of charge	£50 per day up to £5,000 per year			
Experimental treatment for cancer	Costs and conditions to be agreed before treatment			
Hospital-at-home	Paid in full			
Palliative care	Included			
Hospice donation	No cover		£100 per night	
External prostheses during active treatment of cancer	No cover	Up to £1,500 per year	Up to £2,500 per year	Up to £5,000 per year
Purchase of wigs during active treatment of cancer	No cover	Up to £150 per year		
Transportation from the Islands to UK or another Island for eligible cancer treatment if local treatment is not available	No cover		Up to £1,000 per year	Up to £1,500 per year
Other benefits	Core	Classic	Premier	Ultimate
GP fees	No cover		Up to £500 per year	No annual maximum
Maternity cash benefit after one year of cover	No cover		£150 per birth	
Health check – contribution towards cost	No cover		Up to £100 every two years	Up to £200 every two years
Ambulance transport – for road ambulance for emergency transport to or between hospitals	Paid in full			
Evacuation and repatriation service	Paid in full			
Transportation from the Islands to UK or another Island if local treatment is not available	Up to £1,500 per year			
Accidental damage to teeth	No cover		Up to £1,000 per year	
Dental and optical cover	No cover – optional upgrade available			Non-routine dental treatment: 80% refund up to £350 per year Optical cover: 80% refund £200 per year Up to £25 for an eye test

What's not covered?

As with most health insurance, there are limits and exclusions on these plans. They don't cover:

- ✗ Treatment of chronic conditions.
- ✗ Routine dental check-ups.
- ✗ Routine pregnancy and childbirth except for complications.
- ✗ Preventative treatment.
- ✗ Claims if you have travelled outside of Europe to get treatment.
- ✗ For treatment in the UK, any in-patient or day-patient treatment, MRI, CT or PET scans and oral surgical procedures not received in a hospital, scanning centre or facility listed in the Islands Health Plan directory of hospitals.

Common questions

If you're thinking about continuing your healthcare cover, let us help.



What is the continuation of cover offer?

If you begin your personal plan within the 3 month period after your corporate scheme ends, you can stay covered for your previous and existing medical conditions, subject to the benefits and terms of the new plan you've chosen.



Do I have to wait until I've left my company before setting up my new plan?

No, you can talk to us anytime about your new plan and we can set it up to start the day you leave your company scheme. You don't need to give us any documentation from your company and if you have any questions about your new cover, we can go through them over the phone.



How long do I have to qualify for the offer?

You have 3 months from the date your corporate healthcare cover ends, to take up our offer. You'll have no gaps in your cover and you can choose from our range of personal plans.



Can I add my family members?

Yes, you can add family members to your new policy. If any of your dependents were also covered on your corporate scheme, they'll be able to continue their cover too, as long as you let us know within 3 months.



Can I choose the day my new policy starts?

Although you have 90 days to contact us, we'll always start your new policy on the date you left your company plan. This makes sure there's no gap in your cover. So get in touch early and make the most of your new plan right away.



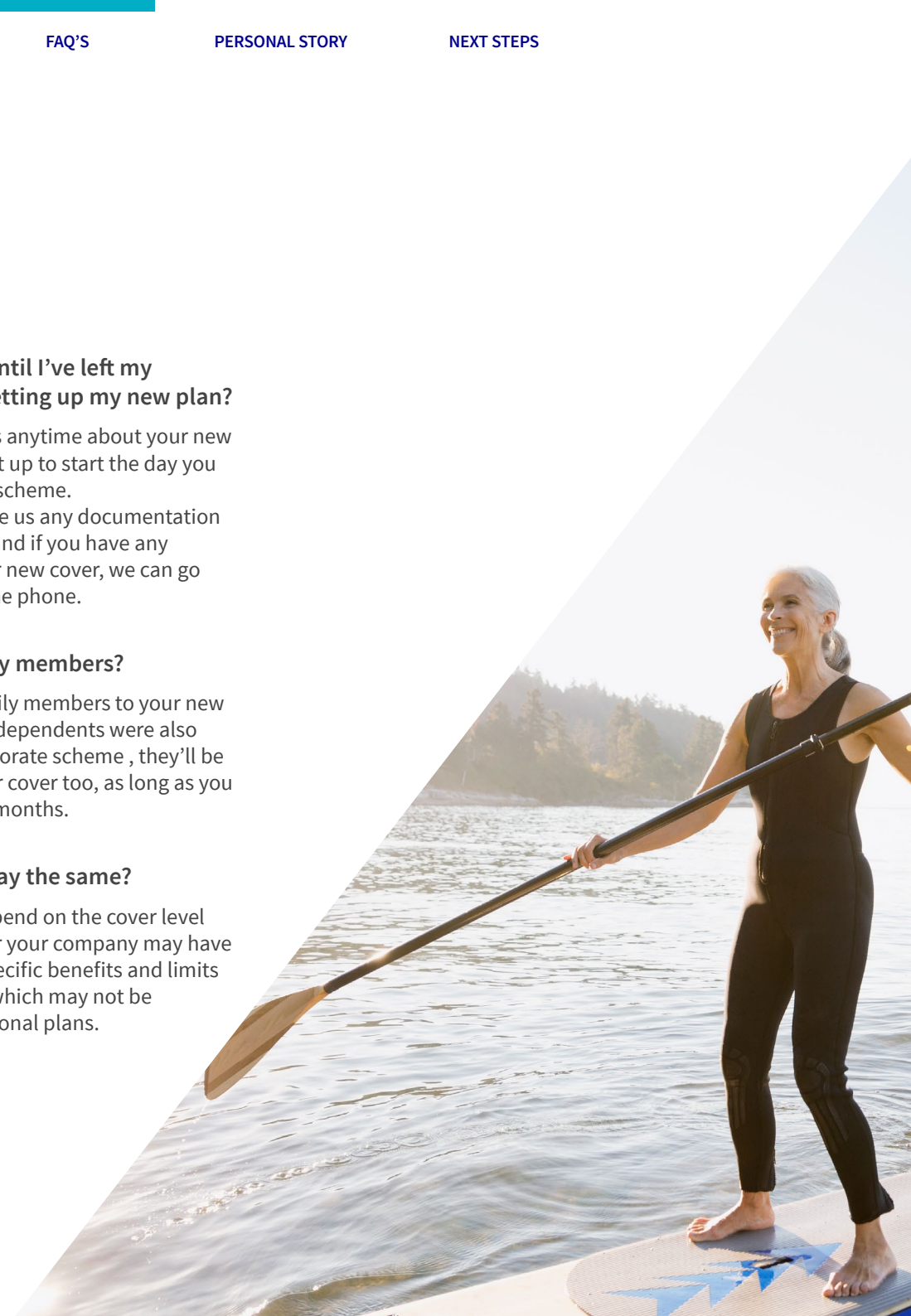
Will my benefits stay the same?

Your benefits will depend on the cover level you choose. However your company may have chosen to include specific benefits and limits for their employees which may not be available on our personal plans.



Why is it important to take the offer now?

After the first 3 months, we can't guarantee that we'll be able to offer you continuous cover so if you still need healthcare insurance, it's best to speak to us straight away. Plus if you decide to move insurers, they may not be able to offer you cover for medical conditions you or your family had while you were with us.



Stephen's Story

“I felt that I actually had someone on my side with that first phone call... I felt like I had someone who was going to help me find the answers and point me in the right direction.”

Stephen had his treatment plan for prostate cancer modified after getting a second medical opinion.

“I believe
I'm the
luckiest
person in
the world”



Still want AXA by your side?

To help find a plan that suits your needs and budget and to get a free quote* please simply get in touch.



Give us a call on
+44 (0)1892 708 101

We are open 8am-6pm
Monday-Friday (UK time).



Email us at
internationalsales.health@axa.com

Visit our website
axaglobalhealthcare.com/en

*Always make sure you check your new policy documentation for more information on your plans benefits and limitations.

¹Based on AXA PPP healthcare's 2017 Fast Track Appointments service data, recorded from the date the member called the Personal Advisory team. ²SME Group Secretary research carried out by Prescient in 2017.

The people used for the images in this document are models.

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