



Global healthcare

Your cover, continued

Access to care abroad

 Still by your side

Islands exclusive

Islands Health Plan
Access private healthcare in the
Channel Islands, Isle of Man, UK
and Europe

Continuing your healthcare cover

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. And you can have it all set up before you leave.[†]



What we're offering you:

- A chance 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 to take up the offer, after leaving your company scheme. You can also benefit from this offer before you leave.

You may find it difficult to continue your 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 with AXA, 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 your online account

- You'll still have access to your online account, where you can manage your account details and submit any claims, and stay in touch with us.

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.



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.

[†]Due to restrictions in some countries, we might not be able to provide you with cover. To find out more, just get in touch.

*Lines are open Monday to Friday, 8am-5pm (UK time). We may record and/or monitor calls for quality assurance, training and as a record of our conversation.

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

Access the treatment you need - locally, in mainland UK or in Europe

- ✓ You can reach our dedicated, friendly islands team easily and quickly – with expert support available around the clock.
- ✓ If you can't get local help, AXA will support you with the costs for travelling to another island or the UK for treatment.
- ✓ For UK treatment, our Fast Track Appointments team can usually get you an appointment within two weeks¹.
- ✓ Our Islands Health Plan is like no other – carefully designed to give you, your family or employees faster access to care when you need it.

- ✓ With our Islands Health Plan you'll have access to our strong medical network on the islands and across the UK.

You can use the Islands [Directory of Hospitals](#) to see which hospitals this includes. You can also choose to extend your hospital network and gain access to a greater selection of hospitals in London.

- ✓ You'll have the certainty of a predictable cost, not a sudden bill after you've had the treatment.

You'll have confidence that the price you pay isn't determined by whether you claim or not. So this will not affect the price you're offered at renewal.

95% of our customers choose to stay with us at renewal².



Choose an Islands Health Plan that suits you

We'll help you choose a plan and be there to help with any questions you have, any time.

Which level of cover suits you?

Choose the cover that's right for you:

Core	Classic	Premier	Ultimate
Superb value that covers hospital stays; emergency transport; and CT, MRI and PET scans.	Includes out-patient treatment and emergency treatment outside Europe.	Includes GP fees and a health check.	Top-level cover that includes dental and optical, with extensive out-patient benefits.


Need to upgrade your cover?

Boost your cover with added benefits:

Core	Classic	Premier	Ultimate
+ Dental and optical cover	+ Dental and optical cover	+ Dental and optical cover	+ Access to extended hospital network
+ Access to extended hospital network	+ Access to extended hospital network	+ Access to extended hospital network	

All cover levels include access to the Virtual Doctor and Mind Health services.

+ Optional upgrade

 Choose your plan



Choose an Islands Health Plan that suits you (cont.)

We'll help you choose a plan and be there to help with any questions you have, any time.

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Further customise your cover

- ✓ When you choose the Islands Health Plan, you can choose if you'd like to pay monthly, quarterly or annually.
- ✓ You can also choose to add an excess. That means if you claim you'll agree to pay up to a certain amount per policy year. In return you'll pay less for your premiums.

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. He also knows that no matter which level of cover he chooses, he can speak to a doctor over the phone or online, 24/7, with the Virtual Doctor service.

More than 80% of claims are paid within 2 days³.



 Choose your plan

Support for you and your family

You have one of the world's leading insurers at your side, ready to support you whenever you need us.

Why AXA?



Appointment times that suit you

If you can't get the care you need on the islands, and need treatment in the UK, our Fast Track Appointments team can book you an appointment at a time and place that works best for you – to fit in around flights, for example.

If you've got an open referral, our team will take care of your appointment, usually sorting one within seven days¹ – meaning less time to worry.



Getting you where you need to be

If you have an accident or illness and can't get the help you need on your island, we'll pay towards getting you where you need to be – whether that's another island or mainland UK.



Support with access to local care

We work closely with trusted local healthcare providers across our network, so we can often pay claims directly. This means less hassle for you, as you're not left out-of-pocket.



Extra cancer support

Our Dedicated Care team is available by phone from 9am to 5pm for members receiving cancer treatment. They can:

- give you ideas on the questions to ask at appointments
- help you decide on a treatment plan
- advise on how to cope with chemotherapy
- simply just be there to listen.



Doctors around the clock

You need to see a doctor but you're struggling to find the time.

With Virtual Doctor from AXA, you can speak to an experienced doctor by video consultation or by phone, from wherever you happen to be, at a time that suits you. This is available no matter whether you choose a plan with GP fees included, or not.



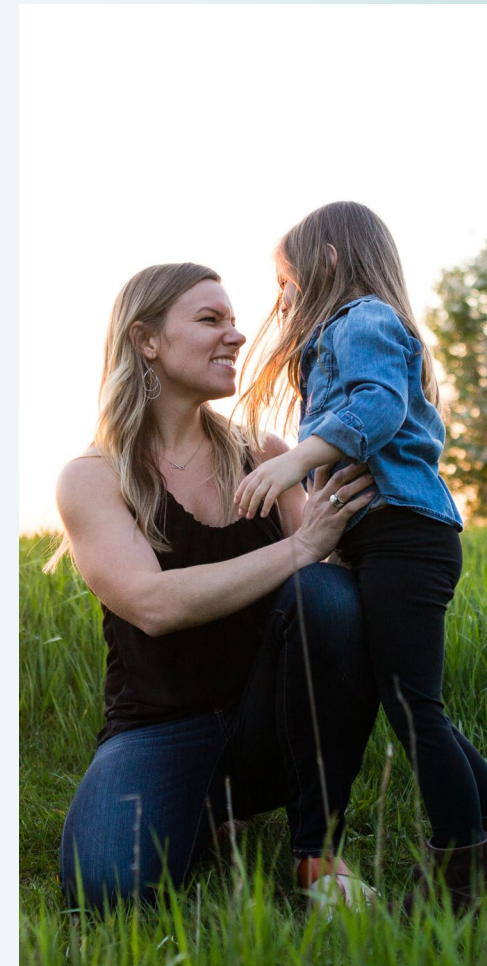
Support from a psychologist

Whatever you're facing, there's someone here for you to talk to. With the Mind Health service, you have access to fully qualified psychologists over the phone. Choose where and when to have your sessions and get the tools and guidance you need to help you. This is accessible via the Virtual Doctor service following a referral if required.



Second opinions from global experts

If you're ever unsure about a diagnosis, you can get a second opinion from independent experts. This service is offered by the same provider as our Virtual Doctor service. We can also arrange a medically trained case manager who can speak to local health providers in their language, which can be useful if you need treatment in Europe. They will support you and your family from diagnosis to recovery – helping you get back to full strength faster.



 Support for you
and your family

Plans in detail

For more information, see your membership handbook.

Islands Health Plan

What’s my area of cover?

Guernsey, Jersey, 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	✗	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	✗	£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	✗		Up to £1,000 per year	
Other out-patient treatment – combined limit, including:	✗	Up to £1,000 per year	Up to £2,500 per year	No annual maximum
• Specialist consultations • 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 (cont.)

For more information, see your membership handbook.

Summary of benefits

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 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	✓			
Hospice donation	✗		£100 per night	
External prostheses during active treatment of cancer	✗	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	✗	Up to £400 per year		
Transportation from the Islands to UK or another Island for eligible cancer treatment if local treatment is not available	✗		Up to £1,000 per year	Up to £1,500 per year

What's not covered?

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

- ✗ Treatment of medical conditions that you were aware of before you joined unless our medical history disregarded option is selected (only available for corporate groups of 10 or more).
- ✗ Routine follow-up consultations and monitoring 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.

Plans in detail (cont.)

For more information, see your membership handbook.

Summary of benefits

Other benefits	Core	Classic	Premier	Ultimate
Virtual Doctor service	No annual maximum			
Second Opinion service	No annual maximum			
Mind Health service	Up to six sessions			
GP fees	✗		Up to £500 per year	No annual maximum
Maternity cash benefit after one year of cover	✗		£150 per birth	
Health check – contribution towards cost	✗		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	✗		Up to £1,000 per year	
Dental and optical cover	+			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

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- ✗ 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.

We were not only a number, a case: there was personal care and support

Maya's story with AXA since 2006

“Kelly, the lady who is overlooking our case, has been fantastic. In such difficult times, when one's child is being treated with cancer, one needs all the support to allow a parent to be strong and instil strength in his/her child.

Kelly's sincere care and efficient attention went beyond professionalism. This is a tribute to AXA, your recruitment, your training and your culture. We were not only a number, a case: there was (and still is) personal care and support which exceeded our expectations. Kelly even sent a colouring book and colouring pencils for my child. I had tears in my eyes when she received them. Thank you for nurturing such a culture: it is indeed personalised care.”



 Personal stories

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.



How long do I have to use the offer?

You have 3 months from the date your corporate healthcare cover ends, to take up our offer. If you do, 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.



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.



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.



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.



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.



Want AXA by your side?

To find out more or get a quote, please get in touch.



Give us a call on
+44 (0)1892 596 418

Lines are open Monday - Friday
8am-5pm (UK time)



Email us at
internationalsales.health@axa.com

Visit our website
axaglobalhealthcare.com

 **Next steps**

¹ Based on AXA PPP healthcare's Fast Track Appointments service data between January – December 2020, 6.21 day average recorded from the date the member called the Personal Advisory team.

² Based on individual members on the Islands Health Plan, January – March 2021.

³ 82.8% of eligible claims submitted online between January 2020 and February 2021 were paid within 2 days.

The Virtual Doctor, Mind Health and Second Medical Opinion services are provided by Teladoc Health.

Cover photo by Luke Moss on Unsplash, page 7 photo by Henry Barnes on Unsplash.

