

This document provides a summary of key changes affecting your policy this year and clarifies the rules for long-term (chronic) conditions. This document is presented in the same sequence as 'A Guide to Your Policy'. Please read the sections highlighted in your new guide. If you have any queries, please do not hesitate to contact our Customer Support Team on 01823 625270.

What is covered

Core Cover

There are now 2 levels of Core Cover available – Essential and Essential Plus. Essential Plus offers the same level of core benefits as Essential but with extra benefits for everyday expenses such as routine dental treatment, optical treatment, physiotherapy and other therapies.

Within the Essential benefit option, customers are also covered for a maximum of one MRI or CT scan arranged by their GP.

Enhanced Therapy

GP referral for ultrasound scans/x-rays has been enhanced to now include blood tests. This benefit is now known as 'Diagnostic tests (GP)'.

Overseas Treatment

Your policy only covers treatment in the UK unless you have the Worldwide Emergency Cover Extra.

Enhanced Dental

There is no longer a 3 month qualifying period for General Dental Treatment under the Enhanced Dental Option.

The Defined Oral Problems benefit has been replaced by the Oral Cancer benefit which covers in-patient and out-patient treatment up to £10,000 per policy year, under the care of a recognised Consultant Oral/Maxillo-Facial Surgeon/recognised specialist, when this is required as a direct result of oral cancer treatment.

- Benefit will be paid in line with The WPA Dental Schedule which is available in 'A Guide to Your Company Policy' or by visiting wpa.org.uk/dentalschedule
- This benefit also provides cover for NHS Cash Benefit of £200 per day-patient/in-patient up to £2,000 per policy year as well as Parent & Child hospital accommodation charges;
- For a guideline of customary & reasonable fees contact WPA or visit wpa.org.uk/guideline

Wellness

Children under 18 are free and will enjoy 100% of the adult benefit limits if the adult under whom they are enrolled also holds cover. Previously, children received 50% of the adult benefit.

What is not covered

⊗ Long-term (chronic) conditions

- Your policy covers short term, not long term, treatment of acute medical conditions which start after you have taken out your policy;
- Your policy does not cover treatment for conditions that keep on coming back or need long term monitoring and management. Some examples include: diabetes, glaucoma, Alzheimer's disease, macular degeneration, ulcerative colitis, rheumatoid or juvenile arthritis, Crohn's disease and recurrent urinary tract infections;
- In the unfortunate event that your treatment becomes recurrent, continuing or long-term, the costs of treatment for this long term condition – including monitoring, consultations and check-ups – and associated conditions will not be covered. We will write to let you know if this is the case;
- There are certain conditions that are likely to require on-going treatment such as Crohn's disease, Multiple Sclerosis and long term depressive illnesses – which require management of recurrent episodes where the condition's symptoms deteriorate. Because of the ongoing nature of these conditions we will write to tell you when benefit for that condition will no longer be available;
- We may provide cover for initial investigations needed to diagnose a new long-term (chronic) condition and the initial short term treatment up to the point of stabilisation - a period not exceeding 3 months. You should contact us for pre-approval;
- ⊙ We will also cover the in-patient treatment of new severe or life-threatening complications which have not been previously experienced in order to quickly return the chronic condition to its controlled state. You should contact us in these circumstances for pre-approval;
- This would not include investigations such as endoscopies that are primarily diagnostic or treatment for relief of symptoms relating to a long term illness e.g. pain relief injections;
- We do not consider cancer as a long term (chronic) condition.



Policy Administration

Joining terms

You can join Enterprise Flexible Benefits on either a Fully Underwritten or Moratorium basis.

For groups with 5 or less employees, new joiners are not covered for any medical conditions/symptoms, whether or not diagnosed, if these arise in the first 14 days of cover.

New joiners aged 70 or above can only join on a Fully Underwritten basis.

Moratorium – if you have chosen moratorium underwriting you will not be covered for at least 2 years for any pre-existing conditions (including any related conditions) which you had during the 5 years before cover starts. If you do not have symptoms, treatment, medication or advice for pre-existing conditions for 2 continuous years after the policy starts, cover will then become available.

Minimum group size

We require a minimum of 2 employees, partners or proprietors of the company (not including family members), who reside at separate UK addresses, to be on cover at the start of the policy and at future renewals. Please let us know if your company no longer has the required members. Failure to do so could invalidate your policy.

Child members

Your company can include a maximum of 5 children per employee on your policy. Any additional children will not be eligible for cover on the company policy.

Continuation options

Continuation options are only offered to members who leave the employment of the company and the company scheme remains with WPA.

If the group make alternative arrangements for insurance with another provider, continuation options will not be offered for any members of that group.

Cancellation

If you cancel your policy and wish to rejoin you will be required to rejoin as a new customer.

Group policy members

Over 65 year olds

In previous years it was a requirement for new joiners over the age of 65 to have a £3,000 Shared Responsibility (SR) level per policy year. From this renewal this is no longer a requirement for new joiners.

Any existing member with a £3,000 SR p.a. level can now have their SR reduced at each renewal by one level at a time. For example from a £3,000 to £1,000 level at this renewal and from £1,000 to £500 at the next renewal. Decreasing the level of SR will result in an associated higher premium.



WESTERN PROVIDENT ASSOCIATION LIMITED

Head Office & Registered Office: Rivergate House, Blackbrook Park, Taunton, Somerset TA1 2PE
Telephone: 01823 625270 | Website: wpa.org.uk | Registered in England No. 475557 | VAT No. 567 6817 88
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wpa.org.uk



When it comes to your health you want the best – and that’s exactly what you get from WPA.

Award-winning Customer Service

Recognised as the UK’s Best Health Insurer for Customer Service.



Freedom to choose

We believe our customers should have the freedom to choose the treatment provider of their choice based upon clinical need.

Not-for-profit

A heritage of over 110 years, driven by the satisfaction of our customers, not shareholders. Providing excellent value to our customers, not short-term shareholder gains.

Making the most of your WPA membership

24/7 Employee Assistance Helplines

Telephone counselling, Health and Medical information along with Financial and Debt advice. If you have the Wellness option you also receive the Medical Legal helpline.

Gym membership discounts

Preferential rates at selected Fitness First and Nuffield Fitness & Wellbeing Gyms.

Nuffield health screening and assessment discounts

Well Man & Well Woman (*exceptions may apply*).

Spa discounts

Enjoy 15% off all spa experiences and monetary vouchers purchased online nationwide at Europe’s largest spa travel service.

Golf discounts

£50 off all bookings for 4 or more people at over 1,000 golf courses nationwide.

£20 Specsavers discount †

For customers spending £99 or more in store – can also be used in conjunction with other Specsavers offers, such as 2 for 1 – discount provided upon joining WPA.



† Voucher must be presented prior to sight test. Premium Club discount applies to selected in-store offers only – cannot be used with over 60s discount, student discount, the sale or easycare. All terms for in-store offers apply. Ask in-store for details. Excludes contact lenses. A current prescription will be required and you may need a sight test (ask Specsavers for their charge). Vouchers are not for resale and cannot be exchanged for cash. Cannot be used by any persons under 16. One voucher per transaction. UK only.



WPA is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and Prudential Regulation Authority (Registration number 202608).

This flyer is effective for use until 31/05/2017

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