

Medical Recovery Insurance

Insurance Product Information Document

Company: MyRecoveryCheque

Product: Accident and Sickness
Medical Recovery Insurance

Medical Recovery Insurance is underwritten by Lloyd's Syndicate 4444, which is managed by Canopius Managing Agents Limited. Registered in England and Wales no. 01514453 in the United Kingdom.

Canopius Managing Agents Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Firm Reference Number: 204847.

This document provides a summary only. Full details of the benefits, limitations and exclusions can be found in your Policy Document.

What is this type of insurance?

This insurance is designed to pay cash benefits should you undergo a medical procedure or suffer a heart attack.



What is insured?

✓ Medical Procedures

This policy provides fixed monetary benefits should an insured person undergo a medical procedure in hospital covered by this policy which has a treatment date during the period of cover.

Each medical procedure covered by the policy is allocated into one of four classifications (A-D) according to the usual expected recovery time following the medical procedure performed.

	Level 1	Level 2	Level 3
A	£250	£350	£500
B	£750	£1,000	£1,500
C	£3,000	£4,000	£6,000
D	£10,000	£15,000	£20,000

You can find a full list of the covered medical procedures and their classifications in your Policy Document.

For example, if you have selected Level 2 cover and an insured person requires a hip replacement (Orthopaedic Procedures - Joint or bone replacement) which has a classification of medical procedure C then once your claim has been approved a benefit of £4,000 will be paid.

Your Policy Schedule will confirm which Level of Cover you have chosen.

✓ Heart Attacks

This policy provides fixed monetary benefits should an insured person suffer a heart attack which requires an admission to hospital and results in permanent damage to the heart muscle as defined in this policy during the period of cover

	Level 1	Level 2	Level 3
C	£3,000	£4,000	£6,000



What is not insured?

This policy does not cover any claims related to, or in any way caused or contributed to by:

- ✗ Planned treatments are medical procedures that in the 12-month period prior to the policy start date, or at the date you increased the Level of Cover, a person either: 1) had a date scheduled for such medical procedure; or 2) was on a NHS waiting list for the medical procedure; or 3) had been aware or had been told by their GP or medical specialist that reasonable medical opinion would consider that a medical procedure may be required.
- ✗ Biopsies or endoscopic biopsies unless performed as a part of a listed surgical procedure such as arthroscopy, craniotomy, laparoscopy, nephroscopy or thoracostomy.
- ✗ Childbirth, whether natural or by caesarean section.
- ✗ Any dental condition or dentistry, including gum diseases and wisdom tooth extraction.
- ✗ Treatment for a specific cancer which exceeds a maximum of one episode of surgery, one course of chemotherapy and one course of radiotherapy.
- ✗ Recurrences of cancer previously diagnosed.
- ✗ Cosmetic surgery other than for reconstruction after trauma or malignancy.
- ✗ Obesity surgery and associated cosmetic surgery including abdominoplasty.
- ✗ Your failure to seek or follow medical advice.
- ✗ Medical procedures arising from professional sporting activities.
- ✗ Any medical condition resulting from a heart attack.

Other policy exclusions apply and these are explained in the Policy Document.



Are there any restrictions on cover?

- ! You must live in the United Kingdom, the Channel Islands or the Isle of Man for a minimum of 180 days a year;
- ! You must be 18 years of age and below the age of 75.
- ! You can make up to three claims can be made in any one year. Should you require more than one medical procedure at the same time or in succession then we will pay for the highest as explained in the policy document.
- ! One claim can be made in relation to the treatment of cancer during the lifetime of each insured person unless the cancer is either a planned treatment or a recurrent cancer in which case it is excluded. A treatment for cancer can include a maximum of one episode of surgery, one course of chemotherapy and one course of radiotherapy providing that the treatment is for the same cancer.

* Subject to payment of the required premium by you, your children can be added to this policy once they have become 3 years old and until they reach the age of 18 years old (or twenty-five years old if they are in full-time education). Benefits for children under the age of 18 are reduced by 50%.



Where am I covered?

You are covered for treatments in hospitals located in the United Kingdom, Channel Islands or the Isle of Man which have specialist facilities for medical procedures. Hospitals in other countries may be included in this definition at our discretion.



What are my obligations?

Disclosing important information

You must take reasonable care to provide complete and accurate answers to questions you are asked when you take out, make changes to, and renew your policy.

Making sure you are eligible for cover

You must ensure that you are eligible for this insurance. The eligibility requirements are advised to you when you apply for/purchase this insurance and are stated in full in your Policy Document.

When making a claim

You must inform Compass Underwriting Limited who are the administrator about anything which could lead to a claim under this policy within 60 days of a motor accident.

Please write to Compass Underwriting Limited (their contact details are given in the Policy Document). You must complete the claim form they send you and provide, at your expense, all receipts for your treatment.



When and how do I pay?

You pay for this insurance policy monthly annually in advance.



When does the cover start and end?

This is an annual policy which you can renew each year. If, at the end of your annual policy period, we decide to offer renewal, then at least 21 days before your policy period ends, you will receive details of your cover for the next 12 months, together with a new Policy Schedule. If we decide not to offer to renew your cover we will write to you advising you of this at least 60 days before your policy period ends.

Your cover will end automatically if you stop living in in the United Kingdom, Channel Islands or the Isle of Man for a minimum of 180 days a year, die or reach the age of 75.

Your cover will also end automatically if you do not pay any premium when it becomes due.



How do I cancel the contract?

You can cancel your cover simply by writing to the policy administrator within 30 days of the inception date or from when you receive your documents and we will return all your premiums unless you have made a claim or intend to make a claim.

You can also cancel your cover at any other time and providing that no claim has been made, you will be entitled to a portion of your premium back for the unexpired period of insurance. This will be based on the number of days remaining until the expiry date.