



**Gwent Hospitals
Contributory Fund**

Established since 1839



**South Wales
Chamber of
Commerce**
Strategic Partner

Health Cash Plan

From as little as £5 per month

No medical required

Chamber Scheme

Cash Benefits include:

- Dental Treatment
- Optical Treatment
- Hospital In-patient
- Hospital Day Surgery
- Chiropody & Podiatry
- Reflexology & Homeopathy
- Physiotherapy & Osteopathy
- Chiropractic & Acupuncture
- Personal Accident
- Maternity Benefit
- Medical Specialist Fees

Also includes:

- Helpline & Homecall
- Identity Theft Assistance
- **and, much, much more**

Freephone us for more information

0800 479 8003

www.ghcf.co.uk



Gwent Hospitals Contributory Fund



■ Why choose our Health Cash Plan?

Since 1839 Gwent Hospitals Contributory Fund has been providing cash assistance to people in their time of need - such as when an accident, ill health or other qualifying health related problem has occurred.

We pride ourselves on our efficiency of service and as a non-profit making organisation, you can be assured of outstanding value for money.

■ Here's how it works

You or your employer contributes a minimum of £5 per month to enrol you in our Chamber Scheme which has been designed for South Wales Chamber of Commerce. (You can upgrade and/or enrol your partner and children as well. Contact us on Freephone 0800 479 8003 if you want to know how to upgrade and/or enrol your partner and/or children and the costs involved). We provide you with peace of mind in the knowledge that cash will be available in your hour of need. Cash will be provided for such things as hospitalisation, personal accident, dental and optical treatment and many other health related areas. Indeed, we provide cash benefits in fifteen different areas and, in addition, we provide a useful Helpline and Homecall Service and Identity Theft Assistance.

We only offer our own products with the exceptions of Personal Accident cover which is underwritten by Chubb and Helpline and Homecall Service and Identity Theft Assistance which is provided by Europ Assistance.

■ What services will we provide for you?

You will not receive advice or a recommendation from us for our Health Cash Plans. You will need to make your own choice about how to proceed.

■ Who regulates us?

Gwent Hospitals Contributory Fund is authorised and regulated by the Financial Services Authority. Our FSA register number is 202166. We are required to give this document to you. Use this information to decide if our services are right for you.

You can check our details on the FSA Register by visiting their website www.fsa.gov.uk/register or by contacting the FSA on 0845 606 1234.

■ What to do if you have a complaint.

If you wish to register a complaint, please contact us either by writing to the Chief Executive, Gwent Hospitals Contributory Fund, 13 Cardiff Road, Newport NP20 2EH or by telephoning 01633 266152.

If you cannot settle your complaint with us, you may be entitled to refer it to the Financial Ombudsman Service, South Quay Plaza, 183 Marsh Wall, London E14 9SR, Tel: 0845 080 1800

Why Choose our Health Cash Plan?

Think of the cost of keeping you and your family healthy, then ask yourself the following questions:-

1. Am I really prepared?

2. What arrangements have I made?

3. Am I getting the best value for money?

Our Health Cash Plan provides great value by giving you cash back for a variety of everyday health care treatments and much more.

See the rest of this booklet for detailed information on how joining GWENT HOSPITALS CONTRIBUTORY FUND can help you with the cost of staying healthy.

JOIN OUR HEALTH CASH PLAN NOW!

Make sure you join now by completing and returning your Application Form or contact us direct - contact details on back cover or Freephone 0800 479 8003

Many Good Reasons for Joining our Health Cash Plan

Dental Benefit

£50-£200

Dependent on Plan Chosen

100% of the paid cost of treatment incurred from a qualified and registered practitioner* is payable to the member only **up to** the appropriate maximum in one benefit year. Benefits are not available for charges incurred under care contract schemes.

Optical Benefit

£50-£200

Dependent on Plan Chosen

100% of the paid cost of treatment incurred from a qualified and registered practitioner* for eye tests, new prescribed spectacles or lenses and repairs is payable to the member only **up to** the appropriate maximum in one benefit year. Benefits are not available for charges incurred under care contract schemes.

Medical Specialist Fees

£100-£400

Dependent on Plan Chosen

Benefit is payable to the member only towards **80%** of the cost of medical consultation fees **up to** the maximum payable in one benefit year including fees incurred and paid for diagnostic procedures. This does not apply to treatment.

Reflexology

Chiropody

Podiatry

Homeopathy

£105-£500

Dependent on Plan Chosen

60% of the paid cost of treatment incurred from a qualified and registered practitioner* is payable to the member only **up to** the appropriate maximum in one benefit year. The maximum benefit shown is the total for all 4 treatment types and not per treatment.

Physiotherapy

Osteopathy

Chiropractic

Acupuncture

£145-£700

Dependent on Plan Chosen

60% of the paid cost of treatment incurred from a qualified and registered practitioner* is payable to the member only **up to** the appropriate maximum in one benefit year. The maximum benefit shown is the total for all 4 treatments types and not per treatment.

*For details of the required practitioners' qualifications and registrations, please contact our office. Our full schedule of benefits, terms and conditions contains this information and is available from our office on request.

Many Good Reasons for Joining our Health Cash Plan

Hospital In-patient

Member Only

£15-£72 per night

Dependent on Plan Chosen

Benefit is payable for In-patient treatment in a registered hospital anywhere in the world. Benefit is payable to the member only and is subject to a maximum 30 nights of In-patient benefit in any one treatment year.

Hospital Day Surgery

£15-£70

Dependent on Plan Chosen

Benefit is payable for 12 days maximum per treatment year to the member for a procedure at a registered UK hospital for minor surgery.

Maternity Benefit

£100-£300

Dependent on Plan Chosen

Benefit is payable whether the birth is at home or in hospital. Normal hospital benefit will be paid after the first 5 nights of hospitalisation. The benefit is payable per child per member. See general conditions.

Health Screening

£40-£125

Dependent on Plan Chosen

80% of the paid cost for examinations, tests and screening is payable to the member when provided by medically qualified staff when attending a UK screening facility, **up to** the maximum payable in any one benefit year.

Helpline & Homecall

Please see benefit details on pages 7 and 8.

Identity Theft Assistance

Please see benefit details on pages 7 and 8.

For details of benefit amounts available to members' children, where enrolled, please see the Benefits Table on page 6. The proportions paid against costs incurred and terms and conditions under which benefit is payable remain the same.

Many Good Reasons for Joining our Health Cash Plan

Personal Accident

This benefit is underwritten by Chubb. The main rules applicable to this benefit are available from the Fund's office, but in summary include:

£5000-£25000

Dependent on Plan Chosen

| | Foundation | Bronze | Silver | Gold |
|---|---------------|----------------|----------------|----------------|
| Death (as a result of an accident) | £5,000 | £10,000 | £15,000 | £20,000 |
| Disablement (permanent & total) | £5,000 | £10,000 | £15,000 | £20,000 |
| Paralysis (permanent & incurable paralysis of all limbs) | £5,000 | £10,000 | £15,000 | £20,000 |
| Insanity (permanent & incurable) | £5,000 | £10,000 | £15,000 | £20,000 |
| Loss of sight (entire sight in both eyes) | £5,000 | £10,000 | £15,000 | £20,000 |
| (entire sight of one eye) | £2,500 | £5,000 | £7,500 | £10,000 |
| (permanent total loss of the lens in one eye) | £1,250 | £2,500 | £3,750 | £5,000 |
| Loss of hearing (permanent total loss in both ears) | £2,500 | £5,000 | £7,500 | £10,000 |
| (permanent total loss in one ear) | £750 | £1,500 | £2,250 | £3,000 |
| Loss of limbs -permanent and total loss of: | | | | |
| (a) both hands and feet | £5,000 | £10,000 | £15,000 | £20,000 |
| (b) one hand or one foot | £2,500 | £5,000 | £7,500 | £10,000 |
| (c) four fingers and thumb on either hand | £2,000 | £4,000 | £6,000 | £8,000 |
| (d) four fingers on either hand | £1,000 | £2,000 | £3,000 | £4,000 |
| (e) thumb on either hand | | | | |
| - both joints | £1,000 | £2,000 | £3,000 | £4,000 |
| - one joint | £500 | £1,000 | £1,500 | £2,000 |
| (f) fingers on either hand | | | | |
| - three joints | £250 | £500 | £750 | £1,000 |
| - two joints | £175 | £350 | £525 | £1,700 |
| - one joint | £100 | £200 | £300 | £400 |
| Loss of Toes - all on one foot | £750 | £1,500 | £2,250 | £3,000 |
| - big, both joints | £250 | £500 | £750 | £1,000 |
| - big, one joint | £100 | £200 | £300 | £400 |
| - other than big toe | £100 | £200 | £300 | £400 |
| Established non union of fractured leg or knee cap | £500 | £1000 | £1,500 | £2,000 |
| Shortening of leg (by at least 5cm) | £375 | £750 | £1,125 | £1,500 |
| Fracture of major bones | £75 | £150 | £225 | £300 |
| Total Sum Insured | £5,000 | £10,000 | £15,000 | £20,000 |

The Health Cash Plan

| | Foundation | Bronze | Silver | Gold |
|--|--|--|--|--|
| | £5 per month | £9.34 per month | £17.34 per month | £22.10 per month |
| Routine Cash Benefit | Adult/Child | Adult/Child | Adult/Child | Adult/Child |
| Dental | £50/£15 | £100/£30 | £170/£45 | £200/£50 |
| Optical | £50/£18 | £90/£35 | £150/£53 | £200/£60 |
| Medical Cash Benefit | | | | |
| Specialist Consultation | £100/£50 | £190/£63 | £330/£75 | £400/£100 |
| Chiropody/Podiatry/Homeopathy/Reflexology | £105/£28 | £260/£65 | £430/£107 | £500/£130 |
| Physiotherapy/Osteopathy/Chiropractic Acupuncture | £145/£60 | £320/£102 | £570/£164 | £700/£200 |
| Hospital Cash Benefit | | | | |
| In-patient admission (max 30 nights) | £15/£5 per person per night | £30/£9 per person per night | £60/£14 per person per night | £72/£18 per person per night |
| Day-patient admission (max 12 admissions) | £15/£5 per person per admission | £30/£7 per person per admission | £60/£12.50 per person per admission | £70/£18 per person per admission |
| Extra Cash Benefit | | | | |
| Maternity Benefit | £100 per child born adult member only | £150 per child born adult member only | £250 per child born adult member only | £300 per child born adult member only |
| Health Screening | £40 adult member only | £70 adult member only | £110 adult member only | £125 adult member only |
| Help Line/Homecall | ✓ | ✓ | ✓ | ✓ |
| Identity Theft Assistance | ✓ | ✓ | ✓ | ✓ |
| Personal Accident | 5k | 10k | 15k | 20k |

(All benefits shown are the maximum per person per treatment year dependent on the plan chosen unless otherwise stated)

Dependant children are children of the member, including legally adopted children, up to and including 17 years old who have been enrolled in the member's application for Fund membership or subsequently advised to the Fund in writing and who reside at the same address as the member.

Helpline & Homecall Assistance

Every Fund member and their immediate family members residing at the same address will have 24 hour access (see below for access times for Identity Theft Assistance) to a dedicated telephone helpline provided by Europ Assistance. This is permanently staffed by qualified legal advisors and counsellors.

Please see below for types of help available and attached policy wordings for full details.

Helpline Assistance

Telephone Advice

- Legal
- Relationship
- Tax
- Employment
- Benefits/Welfare
- Identity Theft Assistance
- Medical Information

Counselling Support

- Stress
- Debt
- Crisis
- Addiction
- Bereavement
- Domestic Relationship Breakdown

Homecall Assistance

Whilst your home insurance will cover damage to carpets, furniture and other items caused by plumbing or drainage emergency, finding reliable tradesmen quickly may be difficult. Europ Assistance will arrange for a repairer to render assistance. You remain responsible for paying all the charges arising in connection with the call-out, labour and parts or materials used.

Identity Theft Assistance

This service is linked to the Helpline & Homecall Service provided in partnership with Europ Assistance. They will provide telephone access to a dedicated specialist, who will be able to give advice and guidance to the contributor in respect of concerns about being or becoming a victim of identity theft.

The Identity Theft Assistance service is available Monday to Friday 8am to 6pm.

Helpline Service

This added service is available to members and their immediate family members residing at the same address only. For first class assistance in an emergency, simply telephone the HELPLINE number which is provided when you become a member. Helpline services include:

Stress Counselling

Europ Assistance will provide you with:

- Telephone help on how to identify and recognise emotional or stressful personal problems.
- Advice on the physiological changes which can occur in your body.
- Practical help on how to manage stressful situations and counselling to support you through this process.
- Advice on how to contact appropriate practitioners specialising in relaxation techniques. Any form of therapy we may suggest must be approved by your own medical practitioner.

What is not covered:

- Advice on existing or impending medical treatments.

Debt Counselling

Europ Assistance will provide you with practical advice on:

- Financial planning to meet obligations by assessing resources and advising how these should be used to meet the demands of creditors, and how to negotiate revised terms of repayment.
- Mortgage commitments and the course of repossession proceedings, and how to handle threatened or actual court proceedings in connection with your debt.

What is not covered:

- Advice on the choice of an individual body or organisation for refinancing debt.

Bereavement Counselling

If there is a bereavement during the period of cover Europ Assistance will provide the following administrative help and advice to the family of the bereaved. For up to 90 days following the bereavement they will provide.

- Immediate advice on how to register death, explanation and advice on duties of the coroner together with information on documents required by the registrar.
- Referral to local funeral directors, if necessary, and advice on practical details.
- Advice on locating wills, obtaining grant of probate or letters of administration, or the need to consult a solicitor.
- Advice on benefits available, notifying insurers and budget planning for the future.

Medical Information

Europ Assistance will provide:

- Information on how to access details of the length of hospital waiting lists for the major medical areas.
- Details of facilities generally available through social services.
- Details of additional sources of information including societies who specifically deal with particular disabilities or ailments.
- General medical advice which can reasonably be provided by telephone.
- The medical information service is staffed by counsellors and trained nurses who will provide information in a sympathetic manner, with no restriction on the frequency of calling. Should an answer not be readily available, the service will undertake research and then call you back. The aim of the service is not to interfere with the relationship between doctor and patient but to provide support and information.

The service will not:

- Provide diagnostic or prescriptive advice.
- Comment with regard to treatment being provided by your own doctor.
- Suggest any course of medical treatment.

Addiction

Europ Assistance will provide:

- Europ Assistance will provide help and support on alcohol and drug related problems.

What is not covered:

- Europ Assistance are not able to provide help or advice which cannot reasonably be provided by telephone

Crisis Counselling

Europ Assistance will provide:

- Europ Assistance will provide help and support on terminal and serious illness and relationship break downs.

What is not covered:

- Europ Assistance are not able to provide help or advice which cannot reasonably be provided by telephone.

Identity Theft Assistance

Europ Assistance will provide:

- Telephone access to a dedicated specialist, who will be able to give advice and guidance to the contributor in respect of concerns about being or becoming a victim of identity theft.

What is not covered:

- Europ Assistance are not able to provide help or advice which cannot reasonably be provided by telephone.

The Helpline, Homecall and Identity Theft Assistance service are run by Europ Assistance on behalf of Gwent Hospitals Contributory Fund

Some Questions Answered

● How to Join

Contact your employer who will provide you with the forms required. Complete and return the application and health declaration forms. Alternatively, call us on Freephone 0800 479 8003. We will send you an application pack promptly and liaise direct with your employer when you return the completed forms to us.

● Who is Eligible to Join?

Employees as agreed with your employer, subject to the employer being a member of the South Wales Chamber of Commerce. New members are not normally accepted once they have reached their 66th birthday. Existing members can continue their membership after their 66th birthday.

● No Medical Requirement

A medical examination is not required as a condition of joining our Health Cash Plan. You only need to complete and sign a health declaration when you apply. There is, however, a qualifying period of three months before claims can be made against a new plan and 12 months for known medical conditions.

● Transfer of Employment

If you are already a Fund member and become an employee of a company which has enrolled with us under the Chamber Scheme, please notify us of your new circumstances. You will have the option of continuing your present membership or transferring to the Chamber Scheme.

If you leave this employer you are able to continue as a Fund member on our alternative schemes. Please notify us as soon as possible so we can discuss your options with you.

● Dependants

Dependant children of the member, including legally adopted children, up to and including 17 years old, and who reside at the same address as the member, can be enrolled the Chamber Scheme.

● How to Claim

To claim your benefits; send an original receipt to the Fund's office e.g. a prescribed optical or dental receipt, or hospital claim form. All claims must be made within three months of the date of payment or within three months of discharge from hospital or date of treatment received. Receipts must be signed, original, identifiable, dated and stamped by the treatment provider.

Altered receipts/hospital claim forms or copies of receipts/hospital claim forms are **NOT** accepted. If treatment has been obtained by both contributor and partner, the amounts for each must be clearly stated. Hospital claim forms can be obtained from the Fund's office. When submitting claims it helps us identify you if you let us have a separate note of your full name, address and membership number. Many members submit their membership cards with claims and we return these with our benefit cheques.

● Claims for optical items purchased via the Internet:

In all cases we will require original, paid, identifiable receipts provided by the supplier. In addition, we will require sight of the original prescription provided by a qualified practitioner registered with the General Optical Council of the United Kingdom. It is understood that such prescriptions can be used for 2 years so we will take a copy of the original document and keep it on file for reference if needed within the 2 years. The original will be returned to the member.

● Our Commitment to You

We know that the speed, the quality of response and the simplicity of the application process are important factors in the consideration of Health Cash Plans.

The objective of the Gwent Hospitals Contributory Fund team is to make everything as easy as possible. We are not only committed to providing value for money plans, we are dedicated to giving you excellent service - from the initial application to simple and quick turnaround of qualifying cash benefit payments and long term management of your plan, all at no extra charge to you.

● What is a Benefit or Treatment Year?

The benefit or treatment year mentioned in the benefit descriptions on pages 3 & 4 is defined as:-

1. The 12 month period commencing on the date of a claim or first claim in a series of claims for any benefit.
2. This period ends at midnight on the day immediately before the first anniversary of the initial claim for this benefit.
3. In a series of claims for the same benefit, on expiry of the 12 month period after the first claim, the member will once again be eligible for the benefit paid for the first claim. The same principle will apply for subsequent claims.
4. All claims remain subject to other conditions or limitations for each benefit type.

General Conditions

1. All employees, up to and including 65 years of age, of members of the South Wales Chamber of Commerce may apply to join our Chamber Scheme Health Cash Plan. Once a member, your membership may continue up to any age subject to your employment continuing with the Chamber member and payment of your contributions. See point 2 also.
2. On leaving your employer, membership under the Chamber Scheme ends on your date of leaving unless otherwise agreed with your employer. However, you can choose to remain a Fund member on our alternative schemes subject to agreement with us on your continued membership
3. Persons wishing to rejoin the Fund following cancellation of membership will be subject to a review of past claims prior to re-admittance. The decision to allow re-admittance is at the sole discretion of the Fund's Directors. Re-joining within 12 months of cancelling is not permitted unless payment of back dues is made.
4. We reserve the right to decline applications for membership. We also reserve the right to terminate membership by giving one month's notice.
5. Other than for known medical conditions at the time of joining, there is no qualifying period before claims can be made for hospital admissions and/or treatment. There is a qualifying period of 3 months before any other claim can be made with the exception of claims for known medical conditions on joining, where no hospital claims will be paid for the first 12 months of membership. Hospital benefits will be paid at the original rate for all known medical conditions for the first 12 months from upgrading. There is no qualifying period if a hospital admission or attendance is required because of an accident.
6. Maternity benefits are neither payable within 12 months of joining the Fund nor at the increased rate within 12 months of upgrading from an existing scheme. In the case of upgrading, the benefit will be paid at the previous scheme benefit level.
7. We do not pay for any amounts that a hospital or doctor or other persons may charge for completing your claim form and/or for medical information requested by us in support of your claim. These charges will be your responsibility.
8. **Benefits:** -
 - a. Will only be paid when contributions are paid up to date at the date of a claim.
 - b. Will only be paid to UK residents.
 - c. Are reviewed periodically by the Fund's Directors.
 - d. Will not be paid where the amount payable is less than £1.00.
9. All claimants will need to satisfy the Fund with validity of their membership and claims. Personal and/or employment details may be requested.
10. Benefits for members' enrolled children will cease on their 18th birthday at which time they can apply for membership in their own right.
11. It is your responsibility to ensure that your contributions are paid at the correct rate and frequency (not applicable to corporate members).
12. For any child benefits to be claimed, the child must be enrolled with the Fund and must reside at the same address as the member. Where both parents are members of the Scheme children can only be enrolled against one parent and child benefit claims can be made by this parent only.
13. Members cannot make claims for any other members of their family residing at the same or other addresses.
14. We reserve the right to recover any overpayment of benefits paid to you.
15. **Upgrades:** - Requests to upgrade will be considered at the discretion of the Board of Directors whose decision will be final. Fresh Health Declarations will be required in every case. Upgrades will not be permitted once a member reaches 66 years of age
16. **Changing your mind:** - You have 14 days from receipt of your welcome pack in which to change your mind and cancel your membership. This is provided no claims have been made within this period. After this period standard cancellation rights apply.
17. Should you subsequently wish to cancel, we require one month's notice of cancellation in writing to the Fund's office at 13 Cardiff Road, Newport NP20 2EH or via your employer's HR department.
18. We will give you one month's notice by post, at the address shown in our records, of any increase in contributions or any changes made to your benefits and conditions. Your employer will also receive at least one month's notice of any such changes
19. To protect all members, if we feel it is appropriate we will take legal action against anyone who makes a dishonest or fraudulent claim.
20. **Complaints:** - Gwent Hospitals Contributory Fund strives to provide all members with the highest levels of customer service. We hope you never have reason to complain about our service, but if you do, in the first instance please make your complaint, preferably in writing, to our Chief Executive at 13 Cardiff Road, Newport NP20 2EH. If you are not happy with our Chief Executive's response you may have the right to refer your complaint to the Financial Ombudsman Service: - Telephone: 0845 080 1800 E-mail: complaint.info@financial-ombudsman.org.uk Letter: Financial Ombudsman Service, South Quay Plaza, 183 Marsh Wall, London E14 9SR For further information, website: www.financial-ombudsman.org.uk

- All benefits are subject to the rules and conditions in this brochure and other notices issued by the Fund.
- Insurance Premium Tax is included.
- All information in this booklet is correct at the time of print

Authorised and regulated by the Financial Services Authority.

Please contact the Fund's office if you require a full schedule of the Fund's Rules and Conditions. These rules supersede all previously published rules.



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A company limited by Guarantee

Company No. 534054 England

Authorised and regulated by the Financial Services Authority

Chamber Scheme 2 – 11/2011