

# Health Cash Plan



## Insurance Product Information Document

HSF HSF Health Plan (Malta) Ltd, with company registration number C 93406 and registered office address at No. 4, Triq Sant' Andrija, Valletta VLT 1341, Malta, is the trading company of The Hospital Saturday Fund, a Registered Charity in the UK No 1123381 and in Ireland Registered Charity No 20104528. HSF Health Plan (Malta) Limited is authorised under the Insurance Business Act (Chapter 403 of the Laws of Malta) and regulated by the Malta Financial Services Authority to carry on business of insurance in Malta.

**Company: HSF Health Plan (Malta) Ltd**

**Product: Everyday Wellness Plans**

This document provides a summary of the key information relating to this product, but it is not personalised to you. Full details of the pre-contractual and contractual information on this product are available in our Policy Terms & Conditions which are included in the application brochure.

### What is this type of Insurance?

This is a health cash plan which reimburses you for health related expenses listed in the range of benefit categories provided.



#### What is Insured?

- ✓ Dental
- ✓ Optical
- ✓ General Practitioner
- ✓ Physiotherapy
- ✓ Osteopathy
- ✓ Chiropractic
- ✓ Acupuncture
- ✓ Homeopathy
- ✓ Chiropody/Podiatry
- ✓ Consultations
- ✓ Medical Tests
- ✓ Health Screening
- ✓ Allergy Testing
- ✓ Birth & Adoption Grant
- ✓ Hospital Stay
- ✓ Recuperation
- ✓ Day Case Surgery



#### What is not Insured?

- ✗ Pre-Existing medical conditions (for the first 5 years)
- ✗ Costs for Medical Procedures
- ✗ Invasive Investigations
- ✗ Procedures requiring anaesthetic
- ✗ Hospital fees
- ✗ Consultant Treatment fees.



#### Are there any restrictions on cover?

- ! Pre-Existing medical conditions. There is a waiting period of 5 years before you are able to claim for medical conditions which already existed at inception of your policy. When upgrading to a higher level of cover, there is an additional 2 year waiting period before you can claim for medical conditions which exist under your current plan.
- ! Minimum age of joining is 18.
- ! You are only eligible to claim for Maternity related claims (including Infertility Treatment and Birth/Adoption Grants) following a qualifying period of 10 months from inception of cover.
- ! You are only eligible to claim for Eye Laser Treatment following a qualifying period of 6 months from inception of cover.
- ! You are only eligible to claim for all other benefits following a qualifying period of 3 months from inception of cover.



#### Where am I covered?

- Health Cash Plan**
- ✓ Islands of Malta
  - ✗ Outside of Malta



#### What are my obligations?

- Maintain premium payments
- Make claim(s) within 6 months of the date of receipt
- Keep us updated in regards to your circumstances, such as change of address or employer



#### When and how do I pay?

- Premiums are paid monthly, weekly, fortnightly or four weekly depending on your salary frequency
- Premiums are automatically deducted from your salary by your employer



#### When does the cover start and end?

Cover will start from the date shown on your Policy Certificate. Any qualifying periods will start from that date too. Cover continues on a rolling monthly contract until:

- Your policy is cancelled
- You cease premium payments
- You no longer work for your employer



#### How do I cancel the contract?

You have a right to cancel the contract within 14 days of receiving your certificate of cover and we will refund any past premiums, unless you have already made a claim. To do this you must provide written notification (either posted letter or e-mail) to HSF Health Plan (Malta) Ltd. After the initial 14 day period, you can cancel at any time by written notification, but past payments of premiums will not be refunded. Entitlement to claim will continue throughout any period of time covered by premiums paid.

If you wish to make a complaint, you should in the first instance contact our customer services department at [enquiries@hsfhealthplan.com.mt](mailto:enquiries@hsfhealthplan.com.mt). If, after 15 days, your issue has not been resolved, your complaint should be sent to: The Financial Services Arbiter (Office of the Arbiter for Financial Services), 1st Floor, St Calcedonius Square, Floriana FRN 1530, Malta, Telephone 8007 2366 or 21249245 or [complaint.info@financialarbiter.org.mt](mailto:complaint.info@financialarbiter.org.mt)