



Health Cash Plan

Rules

Call Us 0151 363 5290
www.forcesmutual.org

Forces
Mutual

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1. Introduction

- 1.1 Where words or phrases are capitalised, they have the special meaning for the purposes of the Plan, as detailed in the Definitions sections.
- 1.1 The Plan is a discretionary cash plan provided by Us for Your benefit.
- 1.2 All Benefits provided under the Plan are granted at the absolute discretion of the Board.

2. Eligibility

- 2.1 Subject to the discretion of the Board any person shall be entitled to apply to become a Member of the Plan provided the person:
 - 2.1.1 has completed an application in a form and manner approved by the Board;
 - 2.1.2 is aged between 18 years and 65 years old; and
 - 2.1.3 is resident in the United Kingdom.
- 2.2 Membership will automatically cease when the Member attains the age of 70.
- 2.3 Satisfy yourself that the Plan is right for You. We will not provide any advice in this regard but You may wish to speak with a professional advisor.
- 2.4 Children can be included on an individual policy and a family policy provided they are under the age of 18 and permanently residing with You. Foster children are not eligible.
- 2.5 The Board reserves the right to refuse admission notwithstanding that an individual would normally be eligible.
- 2.6 A register of Members shall be maintained by the Company but it is not open to inspection by the Members or the public or any other party except to the extent (if any) required by law.
- 2.7 We reserve the right to decline any application notwithstanding your eligibility and, in such an instance, We will refund any fees you have paid, provided that We have not paid any claim during that period.

3. This Contract

- 3.1 Unless You have failed to adhere to these Rules or have given notice to Us that You do not wish to continue with the Plan, Your subscription will automatically continue every twelve (12) months.
- 3.2 Following notification from Us of any variation, amendment or modification of a term of the Plan, You shall be entitled to terminate the Plan with immediate effect by notice given to Us in writing within thirty (30) days of service of such notice. In the absence of service of notice by You within thirty (30) days, You will be deemed to have accepted the changes notified by Us.
- 3.3 Upon termination of Your Plan for any reason, We will pay to You any amounts due but not yet paid in respect of applications for Benefit

that have been accepted by Us. You shall not be entitled to any further Benefits or any refund of subscriptions or other sums which have been paid in advance or any other payments.

- 3.4 You may terminate this Plan at any time provided that no less than thirty (30) days prior written notice of such termination has been served by You on Us.
- 3.5 We may terminate this Plan at any time by giving no less than thirty (30) days' prior written notice to You.
- 3.6 We reserve the right to cancel Your Plan at any time (with retrospective effect if necessary), if:
 - 3.6.1 You or Your employer (as applicable) fail to contribute any sum due to Us within thirty (30) days of the due date;
 - 3.6.2 You provided false information or otherwise behaved dishonestly or fraudulently when either (i) subscribing to the Plan; or (ii) securing a Benefit;
 - 3.6.3 You commit any material breach of these Rules;
 - 3.6.4 there is a material change in the nature of Our business;
 - 3.6.5 You behave in a way that is likely, in the reasonable opinion of the Board, to prejudice the interests or reputation of Us or Our business.
- 3.7 Your subscription to the Plan is not transferable and shall cease on Your death.

4. Subscriptions

- 4.1 Subject to clause 4.3, You shall pay a monthly subscription in order to be entitled to apply for Benefits. The subscription rates shall be such sums as the Board shall from time to time determine.
- 4.2 Subject to the Rules of the Plan you are eligible to apply for Benefits thirteen (13) weeks from the date of enrolment in the Plan providing that Your subscriptions are up to date. No Benefit will be paid in respect of treatment commenced during this qualifying period, irrespective of the future duration of that course of treatment.
- 4.3 We will not grant any Benefits until We have received a payment that covers the date for which You are seeking that Benefit.
- 4.4 From time to time, We may need to increase the subscription rates, amend the Benefits or amend these Rules and will do so in accordance with these Rules. If We decide to make any such changes, We will give You reasonable notice in writing to enable You to decide if You do not wish to continue with the Plan.

5. Benefits

- 5.1 Provided Your subscription payments are up to date You may be entitled to apply to Us for Benefits following an incident
- 5.2 Benefits are available from Your date of registration at the applicable Plan level.
- 5.3 Benefits are payable subject to maximum financial limits per named person. (Including named children. Where benefit is provided for named children the maximum amount is shared among all children included on the plan).
- 5.4 We will not grant any Benefits:
 - 5.4.1 unless an application is submitted in accordance with clause 6;
 - 5.4.2 where You or anyone covered under these Rules, are in breach of these Rules;
 - 5.4.3 at the discretion of the Board.
- 5.5 **24/7 GP Consultation Service**
Members have telephone access to HealthHero for the provision of a confidential GP telephone consultation service, available 24 hours a day, every day of the year, from any location in the world. Members pay the cost of the telephone call to book the appointment.
To book an appointment:
 - 1. Call 0345 222 5802
 - 2. Visit policemutual.gpsurgery.uk.com

6. Procedure to apply for Benefits

- 6.1 For all other request for Benefits the following applies:
 - 6.1.1 You can obtain an application form to request Benefits by calling 0151 363 5290.
 - 6.1.2 You should forward the completed application form with receipts (showing the date of the consultation, treatment or service and the name of the person for whom charges were made directly by the practitioner or service provider). Please forward this onto us at Healthcare at Forces Mutual, Alexandra House, Queen Street, Lichfield, Staffordshire, WS13 6QS.
 - 6.1.3 You must submit an application form to request Benefits within 13 weeks of:
 - 6.1.3.1 the date of the original receipted account for consultation and associated charges, or
 - 6.1.3.2 the date on the original receipted account for other charges made; where such treatment continues over an extended period then further applications need to be submitted periodically, at intervals not exceeding 13 weeks.
- 6.2 Receipts are retained by and become Our property.
- 6.3 You shall authorise the disclosure of any medical or other information relevant to Your

application which is required by Us. Failure to provide such authorisation may result in a failed application for Benefits.

- 6.4 Benefits may not be applied to cover more than the total cost of consultation and associated fees nor for more than the total cost of defined therapy, health screening, dental or optical treatment. In the event that You have insurance to cover the incident, the Benefit will be restricted to the amount not recoverable from the insurance. The Benefit is only payable in respect of expense which is Your direct responsibility.
- 6.5 Payment of Benefit will always be made direct to You, an individual policy or a family member or as otherwise directed.

7. Notices

- 7.1 Any notice, application or other communication to be given by You to Us shall be in writing and shall be served by addressing it to Us, delivering it personally (which includes delivery by courier) or sending it by pre-paid first class post to the registered office of the Company from time to time, or by sending it via email to healthcare@pmas.co.uk
- 7.2 Any notice or other communication to be given by Us to You may be served by delivering it personally (which includes delivery by courier) or sending it by pre-paid first class post to Your address or last known residential address or by electronic communications to the email address which has been given by You to Us for communications.

8. General

- 8.1 To ensure that the information which We maintain about You is accurate, You shall immediately notify Us of any change of particulars such as for example, a change of name or address.
- 8.2 You shall not own or have any rights to any of the assets of the Plan.
- 8.3 No provision of these Rules is enforceable by any person other than You or Us and no third party shall be entitled to enforce any of these Rules whether under the Contracts (Rights of Third Parties) Act 1999 or otherwise.
- 8.4 All Benefits provided under these Rules are granted at the absolute discretion of the Board, whose decision shall be final and binding.
- 8.5 If there is any dispute as to the interpretation of any of these Rules, the decision of the Board shall be final and binding.
- 8.6 Any formal written complaint should be addressed to the Group Complaints Team – Healthcare at Forces Mutual, Alexandra House, Queen Street, Lichfield, Staffordshire, WS13 6QS.
- 8.7 We shall aim to resolve a complaint and send a final response within eight (8) weeks of receipt of the complaint.

- 8.8 We are committed to handling all complaints fairly. If you feel your complaint has not been treated fairly and you would like an independent review of the outcome provided by us, then please let us know by writing to us on complaints@forcesmutual.org and we'll be able to arrange independent adjudication via the Centre for Effective Dispute Resolution (CEDR). CEDR is an independent company who offer structured negotiation, assisted by a trained mediator. Whilst they cannot enforce a course of action, they will review the facts of the case and your concerns and attempt to mediate a solution that is satisfactory to all parties. There is no cost to you for using this service. However, please note that a referral to CEDR can only be made via mutual consent between PMHC and yourself.
- 8.9 These Rules may be revoked, supplemented or varied from time to time, or new Rules introduced in their place, by a resolution of the Board. Save in the case of any minor alteration or any alteration which the Board consider in their absolute discretion to be necessary or desirable so as to comply with law, which shall take effect immediately, any change to the Rules shall take effect from the date specified by the Board being no earlier than the date which falls 30 days from the date of the resolution of the Board or if the Board failed to specify a date, the date which falls thirty (30) days from the date of the resolution of the Board.
- 8.10 A copy of the current Rules shall be provided to You from time to time upon request and also posted on the Company's website.
- 8.11 Where You have provided information about another person You should ensure that You have their consent to do so.
- 8.12 The Board may at any time delegate any of their duties or powers to one or more members of the Board or to any person they deem appropriate on such terms as they may decide. If there is any inconsistency between these Rules and any other documentation these Rules shall prevail

9. Privacy Policy

9.1 How we will use your personal data

PMHC Limited (Forces Mutual) is committed to respecting and protecting your personal data. This sets out what we will do with your information and the arrangements we will make to keep that information private and safe. It also explains your rights.

If you have any questions or comments regarding this privacy notice, or if you're not happy with the way we use your information, please contact us using the following details:

- Post: Data Protection Officer, Royal London, Royal London House, Alderley Road, Wilmslow, Cheshire, SK9 1PF.
- Email: GDPR@royallondon.com

9.2 How will we use the information we collect?

We will use the information we collect about you in the following ways:

- To provide you with a Healthcash Plan and to administer that plan
- To notify you about important changes or developments to the features and operation of products and services
- To carry out market and brand research and analysis
- To develop, test the performance of and manage our brands, products, services and internal processes
- To develop new products, services and propositions
- To inform you about products, services, offers, competitions and promotions
- To administer offers, competitions and promotions
- To show you selected content and advertisements via social media (for example, using Facebook Custom Audiences and Google Custom Match). You can use the preference settings of the social media provider to manage how and if these appear. For more information view our Social Media Policy at www.forcesmutual.org
- To develop and test the effectiveness of marketing activities

We are required by law to have a specific reason for collecting and using your personal data:

- We rely on the contract between us when providing products and/or services
- In certain circumstances, we have a legal obligation to disclose your personal information to a third party, for example, to HMRC for tax purposes
- Provided your fundamental rights are not overridden to pursue our legitimate interest, for example, to conduct market and brand research, undertake product, service and proposition development and direct marketing by post and telephone
- We rely on consent when using your information for direct marketing activities by SMS and email, as well as when we process certain categories of data such as health information and details of criminal convictions

9.3 Who might we share your information with and why?

We might share your information with third parties in certain circumstances including those listed below:

- One or more of the Royal London Group companies trading as Forces Mutual as listed below in order to keep your information up

to date and for direct marketing purposes:

- Royal London Mutual Insurance Society Limited: provides pensions, savings, investments, equity release, protection products and wellbeing activities
- PMGI Limited: is an insurance intermediary, a credit broker and provides a referral service for mortgage and protection advice and independent financial advice
- Credit reference agencies to:
 - Check your identity for the purposes of complying with the Money Laundering Regulations (the agency will note this check on your file but it will not be available to third parties and it will not affect your credit rating)
 - Cleanse our data to ensure it remains accurate and up to date and to try and trace you if you move house and don't tell us
- Specialist providers of market research, statistical analysis and customer profiling to help us improve our processes, products and services
- Providers of our IT systems and associated support services to ensure they continue to operate effectively
- Law enforcement agencies, financial services organisations and industry bodies for the purpose of fraud prevention
- Providers of printing and mailing services to produce and issue statements or other correspondence necessary to ensure you are kept suitably informed
- Specialist media providers, to manage your preferences for receiving direct marketing
- HMRC, so they can monitor compliance with ISA, pension and other applicable regulations
- Auditors and regulatory bodies, as part of their oversight of our activities
- If you need to make a claim we will need to collect some information about your medical condition so that we can share this with the healthcare provider
- Providers of healthcare services that are included in your membership

9.4 **What precautions do we take to protect your information?**

We take appropriate technical and organisational measures to prevent the loss, misuse or alteration of your personal information.

If personal information is processed outside of the UK we will ensure that adequate safeguards to protect data are in place, such as, appropriate contractual arrangements and assurances. Assurances may include recognised certification schemes, such as, the US Privacy Shield.

In the event of a personal data breach

we will notify you and the Information Commissioner's Office if we are legally required to do so, or there is a risk to your rights and freedoms as a result of the breach.

View our Security Policy at www.forcesmutual.org for more information.

9.5 **How long do we keep hold of your information?**

We will retain a record of your personal information for as long as you hold a product or use a service provided by us. We will also retain that information for a period of time after you cease holding a product or use a service to ensure we are able to comply with applicable regulatory and legal requirements. Typically, this means we will retain your information for one to seven years.

9.6 **Your rights**

Where you have given consent to use your personal data, you have the right to withdraw that consent at any time by emailing nomarketing@forcesmutual.org or by calling 0151 363 5290. Without your consent, the service we provide may be limited.

You have the right to request a copy of the information that we hold about you.

In some specific circumstances you may have the right to request that we provide you with the information we hold about you in an electronic format so that you can transfer it to another provider.

We want to make sure that your personal information is accurate and up to date. You can ask us to correct information you think is inaccurate.

In certain circumstances, you may have the right to object to us using your personal information, to restrict processing of your information, or to have your information deleted. You also have the right to object to your personal data being used for direct marketing purposes.

For more details or to exercise any of these rights, please contact our Customer Services Team on 0151 363 5290 or write to us at: Forces Mutual, Customer Services, Alexandra House, Queen Street, Lichfield. WS13 6QS. We will provide a response within 30 days, if not sooner. There is normally no charge for exercising any of your rights.

Complaints

If you have any concerns about the way we use your information, you can raise these with us by following our complaints procedure. To find out more call 0151 363 5290. You also have the right to refer your complaint to the Information Commissioner's Office at ico.org.uk or by calling 0303 123 1113.

You can view a full copy of our privacy policy at www.forcesmutual.org

Appendix 1 – Definitions

Benefit means the benefits listed in Appendix 2.

Board means the board of directors of PMHC Limited.

Member means any person who has been accepted for membership and continues in membership as a member of the Scheme from time to time as determined by these rules.

Plan means the Health Cash Plan Scheme.

Rules means these Rules which form part of the contract between Us and You for the provision of the Plan.

We/Us/Our means PMHC Limited.

You/Your/Yourself means the named subscriber to the Plan.

Appendix 2 - Benefits Available under the Plan

Benefits available under the Plan and, in relation to each of them, details of financial limits and the treatments and other matters which may or may not be included in an application for Benefits under these Rules.

| | Membership Type | |
|-------------------------------|-----------------|--------|
| | Single | Family |
| Cost (£ per month) | 8.50 | 16.50 |
| Yearly Benefit Limit's in £'s | | |
| Dental | 75 | |
| Dental Trauma | 200 | |
| Optical | 75 | |
| Diagnostic Consultations | 200 | |
| Therapies | 200 | |
| Health Screening | 100 | |

Please note the benefit limit refers to the period of 1st January - 31st December of each year with the limit being reset in January the following year.

| Benefit | Benefits for which you can claim | What we will not pay for |
|---------------|---|---|
| Dental | <ul style="list-style-type: none">• Dental Examination• Dental Treatment• Dentures | <ul style="list-style-type: none">• Denture repairs• Any prescription charges• Consumables such as toothbrushes, toothpaste, etc• Veneers or whitening procedures• Premiums in respect of any form of dental insurance,• Dental care contract schemes or for any dental administration fees |
| Dental Trauma | <p>As a result of Dental Trauma and provided by a qualified dental practitioner</p> <ul style="list-style-type: none">• Dental Examination• Treatment costs to teeth and gums | <ul style="list-style-type: none">• Denture replacements and repairs• Mouth guard or gum-shield replacements• Any injury incurred as a result of the influence of alcohol or drugs• The cost of any routine dental treatment and examinations• Injuries incurred whilst participating in a contact sport where the appropriate mouth guard was not in place• Veneers or whitening procedures• Damage to teeth caused entirely due to pre-existing deterioration and not related to the injury claimed to have caused, or aggravated the condition |
| Optical | <ul style="list-style-type: none">• Sight tests, spectacles, lenses or contact lenses supplied or provided at the patients cost for which the net payment is made directly to a qualified optical practitioner registered with the General Optical Council• Laser eye surgery performed by a recognised laser eye clinic | <ul style="list-style-type: none">• Repairs, frames only, cleaning solutions and sundries• Cataract surgery• Spectacles or lenses purchased under an optical care contract scheme• Sunglasses other than prescription sunglasses |

| Benefit | Benefits for which you can claim | What we will not pay for |
|--|---|--|
| Diagnostic Consultation | <ul style="list-style-type: none"> • Diagnostic consultations by a medical or surgical specialist holding a consultant status in an NHS or registered private hospital, on recommendation of the beneficiaries General Practitioner • Within the maximum financial limits stated, test used by the consultant which are required as part of the process are covered | <ul style="list-style-type: none"> • Consultations in connection with pension, insurance, emigration or employment matters or for legal or industrial actions • Cost of any treatment • Cost of room charges • Health screening • Consultations which are covered under 'Therapies', below |
| Therapies | <ul style="list-style-type: none"> • Physiotherapy services provided by a qualified practitioner who is on the Register of Physiotherapists of the Health Professions Council • Osteopathic services provided by a qualified practitioner registered with the General Osteopathic Council • Chiropractic services provided by a qualified practitioner registered with the General Chiropractic Council • Acupuncture services provided by a professionally qualified and registered acupuncturist • Homeopathy services provided by a professionally qualified and registered homeopath • Chiropody services provided by a qualified practitioner who is on the Register of Chiropodists/Podiatrists of the Health Professions Council | <ul style="list-style-type: none"> • Treatment by practitioners other than as defined • Homeopathic medicines or remedies |
| Health Screening | <ul style="list-style-type: none"> • Health screening performed in a hospital or health screening centre by medically qualified staff for WellWoman, WellMan, mammography, osteoporosis and heart disease screening | <ul style="list-style-type: none"> • Any screening other than as stated above (and specifically not for tests carried out at a retail outlet, health club, fitness centre or the like) • Screening or examinations in respect of pension, insurance, emigration or employment matters or for legal or industrial actions |
| GP Helpline Private GP Telephone Consultations 24 hours a day, 7 days a week provided by HealthHero | <ul style="list-style-type: none"> • Private GP Telephone Consultations 24 hours a day, 7 days a week • The doctor can provide advice, diagnosis, reassurance and a course of action as necessary. All advice is specific to you taking into account your own personal medical history • You can call as often as you need; consultations can be as long as appropriate. • You can call about any health or medical concerns you would normally ask your own GP but the service is not intended to replace your own NHS GP. In an emergency, you should always contact your NHS GP or the Emergency Services • A trained operator takes the call and consultations are scheduled with the doctor who calls you back at a convenient time. There is plenty of time for an in-depth consultation if required | |