

keyfacts

www.morgan-price.com

Morgan Price International Healthcare Ltd,
11a Forge Business Centre, Upper Rose Lane,
Palgrave, Diss, IP22 1AP, United Kingdom

morganprice
international healthcare
global thinking, personal care



The Financial Services Authority

Morgan Price International Healthcare Ltd is authorised and regulated by the Financial Services Authority (FSA) under license number 313738.

You can check this on the FSA website [http: www.fsa.gov.uk/register/](http://www.fsa.gov.uk/register/)



Whose products do we offer ?

These products are underwritten and claims are administered by Brit Insurance Limited. Brit Insurance Limited is registered in England and Wales and regulated by the Financial Services Regulatory Authority.

Registered Office: 55 Bishopsgate, London EC2N 3AS. Registered No. 3121594

Cega Air Ambulance Limited administers the claims on behalf of Morgan Price International Healthcare Ltd. Cega Air Ambulance Limited is registered in England and Wales and regulated by the Financial Services Regulatory Authority.

Registered Office: Funtington Park, Cheesemans Lane, Funtington, Chichester, PO18 8UE, Registered No. 1303318

Our service to you

We will not provide you with advice or a recommendation. We will provide you with details of our products and you will need to make your own decision about whether to proceed. We recommend that you obtain the advice of an independent intermediary if you are looking for a range of alternative options.

What you will pay for our services ?

We will provide you with a quotation based upon your particular details and this will show the insurance premium and any applicable taxes payable by you and on what frequency. You will pay no charges for the quotation stage.

Complaints

If you wish to register a complaint you may write to:

1. The Managing Director – Morgan Price International Healthcare Ltd, 11a Forge Business Centre, Upper Rose Lane, Palgrave, Diss, IP22 1AP, United Kingdom.

If you still remain dissatisfied after our response, you may write to:

2. Complaints Department – Brit Insurance Limited, 55 Bishopsgate, London, EC2N 3AS

If you still remain dissatisfied after their response, you may write to:

3. Financial Ombudsman Service – South Quay Plaza, 183 Marsh Wall, London E14 9SR, United Kingdom



POLICY SUMMARY

IMPORTANT – PLEASE READ

This policy summary has been designed to provide you with key information about this product and it is important that you read this information carefully. This summary does not contain the full standard terms and conditions that apply to this product which are contained in the policy wording.

Non standard terms may apply, and each customer must complete an application prior to being accepted by us for cover under the policy.

Summary

1. The underwriters

The insurance is underwritten by Brit Insurance Limited.

2. Type of insurance and what is covered

The insurance cover provided is for medical and associated treatment costs which include emergency evacuation benefits.

3. Benefits

A summary of Key benefits follow:

EXPATHEALTH PLANS

	Bronze	Silver	Gold
Overall Annual Limit	\$1,500,000 / £800,000 / €1,200,000	\$1,500,000 / £800,000 / €1,200,000	\$1,500,000 / £800,000 / €1,200,000
In-Patient Benefits (All in-patient treatment must be pre-approved by calling our helpline, otherwise co-payments will apply)			
Hospital Services	Full refund	Full refund	Full refund
Intensive Care	Full refund	Full refund	Full refund
Hospital Accommodation	Full refund	Full refund	Full refund
Cash Benefit (where treatment is obtained free of charge in a government or charitable hospital)	\$100 / £55 / €80 per day for up to 30 days	\$100 / £55 / €80 per day for up to 30 days	\$100 / £55 / €80 per day for up to 30 days
Organ Transplants (Heart, Lung and Kidney Only)	Not covered	Not covered	\$100,000 / £53,335 / €80,000
Day Patient Benefits			
Hospital Services	Full refund	Full refund	Full refund
Oncology			
Radio and Chemotherapy	Full refund	Full refund	Full refund
Radiology	Full refund	Full refund	Full refund

Out-patient Benefits	Bronze	Silver	Gold
Specialist Care GP Consultations Prescription Drugs MRI & CT Scanning Routine health checks after 24 months continuous membership	Not covered Not covered	\$10,000 / £5335 / €8,000 \$250 / £130 / €200	\$10,000 / £5335 / €8,000 \$250 / £130 / €200
Dental Benefits			
Emergency Dental Treatment (limited to treatment received within 48 hours of damage to sound natural teeth or permanently attached artificial teeth)	\$1,000 / £535 / €800	\$1,000 / £535 / €800	\$1,000 / £535 / €800
Routine dental treatment subject to 25% coinsurance per claim	Not covered	\$1,000 / £535 / €800	\$1,000 / £535 / €800
Maternity Benefits (After 12 months membership)			
Complicated Maternity	\$6,000 / £3,200 / €4,800	\$6,000 / £3,200 / €4,800	\$6,000 / £3,200 / €4,800
Routine Maternity	Not covered	Not covered	\$3,500 / £1,870 / €2,800
Evacuation and Transport Benefits			
	Bronze	Silver	Gold
Emergency Medical Transportation	Full refund	Full refund	Full refund
Compassionate Emergency Travel	\$3,000/£1,600/€2,400	\$3,000/£1,600/€2,400	\$3,000/£1,600/€2,400
Repatriation and Local Burial	\$5,000/£2,670/€4,000	\$5,000/£2,670/€4,000	\$5,000/£2,670/€4,000
Medical Travel	\$1,000/£535/€800	\$1,000/£535/€800	\$1,000/£535/€800
Home Country Cover			
	Bronze	Silver	Gold
Where home country falls within area of cover selected (except US and Canadian Nationals)	No restrictions	No restrictions	No restrictions
Where home country falls outside area of cover (except US and Canadian Nationals)	90 days	90 days	90 days
US and Canadian Nationals (must select AREA 3 worldwide)	90 days	90 days	90 days
Other Benefits			
Complementary/Alternative Medicine (Must be referred by a physician and is limited to specialist treatment by a registered practitioner)	\$2,500/£1,300/€2,000	\$2,500/£1,300/€2,000	\$2,500/£1,300/€2,000
Nursing at Home	12 weeks	26 weeks	26 weeks
Parent accompanying a child up to 14 yrs, and a child up to 14 accompanying and adult	Full refund	Full refund	Full refund
Local Road Ambulance Charges	Full refund	Full refund	Full refund
Psychiatric Care (Subject to 50% coinsurance and limited to 30 consultations per year)	Not covered	Not covered	\$1,000/£535/€800
Chronic Conditions Cash Benefit	Not covered	Not covered	\$500/£270/€400

4. Exclusions:

Benefit is not payable for:

- This policy has a two year moratorium. This means that pre-existing conditions will not be covered during the first two years of the policy. After this a pre-existing condition may be covered if a period of two consecutive years has elapsed since any symptoms, treatment, medication, tests or advice was received for that condition.
- The deductible/excess amount of any claim (where applicable);
- General health or well person checks and eye or dental examinations, vaccinations, prescribed drugs and dressings, except where shown in the benefits schedule.
- Cosmetic or aesthetic surgery.
- Routine maternity, except where shown in the benefits schedule.
- Psychiatric conditions, psychological disorders and mental disorders except where shown in the benefits schedule.
- Congenital and birth defects and deformities in respect of children under three years of age.
- Dental treatment, except as shown in the benefits schedule.
- Illnesses once they have been diagnosed as either chronic or terminal except where shown in the benefits schedule.
- Treatment and investigations of allergies, impotence and fertility/infertility, including sterilisation and reversal of sterilisation.
- Medically assisted reproduction or any consequence thereof.
- Treatment of any illness or disability which arises in any way from the HIV infection and the AIDS virus.
- Treatment for which the insured has travelled specifically outside the area of coverage, or travelled against medical advice.
- Any occupation, sport, pastime or other activity, in which a materially greater risk may be incurred in connection with this plan
- Treatment resulting from the Insured persons active participation in war, riot, civil commotion, or other illegal acts.
- Losses not incurred within the period of insurance and claims submitted later than 3 months after they were incurred.
- Charges for care or treatment by a family member, including prescription of drugs.

For a full list of benefits and exclusions please refer to the policy wording.

5. Duration of cover

The cover is from the date of inception renewable upon payment of the premium due and acceptance of the terms and conditions applicable at the renewal date. The period of cover will be shown on the Certificate of Insurance.

6. Your rights to cancel

You have the right to cancel the cover within 14 days of the effective date and receive a full refund provided you have not made any claims under the policy. If you have made a claim then we will refund your premium after deducting a charge for the cover provided from the beginning of the contract until the policy is cancelled. You may cancel at other times and may be entitled to a pro rata refund provided no claims have been made.

7. Making a claim

The details of making a claim under the policy are shown in section 5 claims procedures of the policy wording. In summary they are:

- For most out-patient claims – you have the treatment, pay for the treatment costs yourself and claim the costs back using the prescribed claim form which should be sent to: Morgan Price Claims, Funtington Park, Cheesemans Lane, Funtington, Chichester, PO18 8UE. Helpline +44 1243 621224 Fax +44 1243 790265*
- For in-patient and certain out-patient treatment (such as MRI scans) you will need to contact the helpline on +44 1243 621224 **prior** to incurring any costs.*
- In a medical Emergency you will need to contact our claims department as soon as possible on +44 1243 621567.*