

Introducing the HVCA Health Care Scheme



The HVCA Health Care Scheme has been carefully chosen on behalf of the Heating and Ventilating Contractors' Association by Welplan Ltd to offer you the benefits of private medical cover. As an HVCA Health Care Scheme member you can have the reassurance of access to prompt private medical treatment should you need it and the benefit of a HVCA dedicated Bupa helpline service to support you through arranging and claiming for your treatment.

Important information

Your cover is provided under an agreement between Welplan Ltd and Bupa Insurance Limited and is subject to the terms and conditions of that agreement. There is no contractual agreement between you and Bupa covering your membership. Only Welplan Ltd and Bupa have legal rights under the agreement, although we will allow anyone covered under the agreement access to our complaints process.

These pages only contain a brief summary of the HVCA Health Care Scheme

Changes to the scheme may have been agreed between Welplan Ltd and Bupa under the agreement. If any changes do apply they could affect for example the amount and type of benefits payable and/or the exclusions set out in these summary pages. Also, the agreement is an annual one and the terms of your cover may change from time to time particularly at renewal. The helpline can provide further details, although you may need to contact Welplan Ltd for full details of the cover under the agreement.

Summary of cover and benefits

The type of treatment covered

You are only covered for eligible treatment. By this we mean treatment of an acute condition together with the products and equipment used as part of the treatment that:

- are consistent with generally accepted standards of medical practice and representative of best practices in the medical profession in the UK
- are clinically appropriate in terms of type, frequency, extent, duration and the facility or location where the services are provided
- are demonstrated through scientific evidence to be effective in improving health outcomes, and
- are not provided or used primarily for the expediency of you or your consultant or other healthcare professional

and the treatment, services or charges are not excluded under the terms and conditions of the agreement between Welplan Ltd and Bupa.

Treatment must be on the initial referral of your GP. The consultant in overall charge of your treatment must be a Bupa recognised consultant.

Bupa recognised practitioners and facilities

Your cover depends on you using certain Bupa recognised medical practitioners and treatment facilities. Who you use can affect the level of benefits you are covered for. Also, they may only be recognised by us for certain types of treatment or levels of benefits. The type of treatment and/or level of benefit that we recognise them for can change from time to time.

What is not covered

There are certain medical conditions and treatments that you are not covered for. There are some exceptions to the exclusions. Further details are available from the helpline although you may need to contact Welplan Ltd for full details.

The excluded medical conditions and treatments include: treatment for ageing, menopause and puberty; AIDS/HIV; allergies; birth control, conception, sexual problems or sex changes; chronic conditions; complications from excluded conditions; treatment resulting from contamination, wars, riots or terrorist acts; convalescence care, rehabilitation or general nursing care; cosmetic, reconstructive or weight loss treatment; treatment for deafness or to correct eyesight; dental or oral treatment; dialysis; experimental drugs and treatment; HRT and bone densitometry; intensive care (other than routinely needed after private day-patient treatment or in-patient treatment); learning difficulties, behavioural and developmental problems; pregnancy and childbirth; screening and preventive treatment; sleep problems and disorders; speech disorders; temporary relief of symptoms; out-patient drugs and dressings; physical aids and appliances; repatriation.

Summary of cover table for the HVCA Health Care Scheme

Benefits	Maximum benefit available	Notes
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When you are not admitted to hospital

out-patient consultations and treatment

<p>out-patient consultations with a consultant</p> <p>out-patient therapies and complementary medicine on GP or consultant referral</p> <p>hospital charges for out-patient tests and investigations on consultant referral</p>	<p>up to a total of £1000 each year - this limit includes £250 for complementary medicine treatment</p>	<p>with a scheme recognised consultant</p> <p>with a scheme recognised therapist or complementary medicine practitioner (acupuncture, chiropractic, homoeopathy and osteopathy only)</p>
<p>out-patient MRI, CT and PET scans on consultant referral</p>	<p>paid in full</p>	<p>in a scheme recognised imaging centre for the type of scan you need</p>

When you are admitted to hospital

out-patient surgical operations, day-patient or in-patient treatment

<p>consultants' fees for medical and surgical hospital treatment</p>	<p>paid in full</p>	<p>with a Bupa partnership consultant and in a partnership network hospital - benefit limits apply for Bupa recognised non-partnership consultants</p>
<p>hospital charges for: accommodation, theatre charges, nursing care, drugs and surgical dressings, intensive care, diagnostic tests and MRI, CT and PET scans, therapies, prostheses and appliances</p> <p>parent accommodation</p>	<p>paid in full</p>	<p>in a partnership network hospital and for intensive care in a scheme recognised critical care unit: a list of the prostheses and appliances covered is available on request</p> <p>one parent only, accompanying a child under 12 who is a member of the scheme and receiving eligible in-patient treatment</p>
<p>treatment at home</p>	<p>discretionary benefit</p>	<p>with a scheme recognised medical treatment provider - call the helpline for details</p>

Benefits	Maximum benefit available	Notes
Additional benefits		
private ambulance	£320 each year - maximum £80 any single trip	when medically necessary and related to private eligible day-patient or in-patient treatment
home nursing	£600 each year	when immediately following private eligible in-patient treatment
overseas emergency treatment	discretionary benefit	call the helpline for details
NHS cash benefit	£50 a night for 182 nights a year	for NHS hospital in-patient treatment that would otherwise be covered under the scheme
pregnancy cash benefit	£75 each pregnancy	cover for pregnancy cash benefit applies to female members who have been in continuous membership of the scheme for at least 10 months before the start of their pregnancy and when their pregnancy has reached 28 weeks.

Benefits for specific medical conditions

<p>cancer treatment - as for other treatment set out in this table except for:</p> <ul style="list-style-type: none"> out-patient consultations with a consultant out-patient therapies and complementary medicine on GP or consultant referral hospital charges for out-patient tests and investigations on consultant referral out-patient MRI, CT and PET scans on consultant referral hospital charges and consultants' fees for bone marrow and stem cell transplants consultant oncologists' fees for chemotherapy and radiotherapy hospital charges for out-patient cancer drugs 	paid in full	<ul style="list-style-type: none"> with a scheme recognised consultant with a scheme recognised therapist or complementary medicine practitioner (acupuncture, chiropractic, homoeopathy and osteopathy only) in a scheme recognised imaging centre for the type of scan you need with a Bupa partnership consultant and in a specialist treatment centre - benefit limits apply for Bupa recognised non-partnership consultants with a Bupa partnership consultant in a partnership network hospital or specialist treatment centre - benefit limits apply for Bupa recognised non-partnership consultants in a partnership network hospital or specialist treatment centre
psychiatric treatment	discretionary benefit	call the helpline for details



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This is page 4 of 4 which should be read together. These pages are for the summary of the HVCA Health Care Scheme from 1 April 2008. These pages only provide a brief summary of the cover and full details including general terms and conditions, exclusions and benefit limits are not set out on these pages. Further details are available from the helpline although you may need to contact Welplan Ltd for full details of the cover under the agreement.