



Health

Tailored to suit your growing business

Business Protect
healthcare cover
and benefits

Flexible to fit your business needs

Healthcare cover that works the way you want it to

Many business healthcare plans offer a catch-all solution. Which means you can end up paying for cover you don't want.

Business Protect works differently.

It's made up of options that you can fit together, so you can shape your plan to match your business needs.

You know your challenges. We have the solutions

You don't need insurance know-how to make Business Protect work. You're already an expert in all you need to know: your own company.

You know what your people want and how to support them.

It's easier than you think to choose your cover options

If you run a construction company or employ labour for heavy manual work, for example, then our physiotherapist support, available with the Therapies option, could benefit your team. If your business is family law, where difficult decisions are part of the everyday, our mental health cover could help. The choice is yours.

Just choose what matters to you and leave the rest to us

Pick the options that match your company's needs and tailor a plan that fits your budget.

Add family members to your cover too

You can give your employees the option to add a partner or a child to their Business Protect plan if you like. Contact a member of our team who can tell you more.



- Available to select
- Included with all
- Available to select with more than one choice.

¹ Powered by Doctor Care Anywhere.
Please see doctorcareanywhere.com/terms-conditions-axa for details

Start building your plan

Here are a few things to know before you start

- If you buy cover for one or two employees only, you'll need to include either our Treatment option or Diagnostics Only option in your plan.
- If you buy an Outpatient option or a Travel Cover option, you'll need to buy one of our Treatment options as well. You can't buy an Outpatient option with the Diagnostics Only option (see pages 4 and 5).
- If you'd like an Employee Assistance Programme (EAP) option you'll need to buy at least one other option as well.

Customise Business Protect for the cover you want, at a price you're happy with

With fewer than six employees, whatever plan you create needs to be the same for everyone. But with six or more employees, you can choose different cover for different groups of management and staff.

Each package you create needs to cover at least three employees and you can have up to six different packages. This gives you the flexibility to find the right balance of cover and budget for your business.

Some examples to help you choose

The pricing we've shown here is based on a group of six people, aged 25, 30, 35, 40, 45 and 50, living in Guildford, Surrey. Their employer is paying monthly and has chosen an excess of £100 and a two-year moratorium. Costs are representative as of April 2025, and prices will vary depending on location, cover options and ages.

Example 1

Diagnosis and support

One of your team has worsening stomach pains. All they need to do is contact our online GP service.¹

With our Diagnostics Only option, they can be referred to a specialist for a consultation and tests to find the cause of the problem, too.

Or perhaps a muscle strain means one of your key people is in pain and struggles to lift or carry anything. Our Therapies option provides hands-on care with a qualified therapist.

If one of your employees is struggling emotionally, maybe for family or financial reasons, they can take advantage of professional support over the phone with our EAP Essential.

Example 2

Diagnosis, treatment and support

This example offers the benefits of example 1 but includes Comprehensive Cancer Cover as part of the Treatment option, so you're ready to support your people should they need quick access to diagnosis and eligible treatment at one of the private hospitals on our list if they become ill.

Our Standard Outpatient option means that your employees can get up to two consultations with a specialist as well as diagnostic tests following referral by a specialist.

Example 3

Diagnosis, treatment and wellbeing

This example includes the benefits of example 2. And, because your employee assistance programme has been upgraded to EAP Premier, your people have access to up to eight sessions of face-to-face counselling as well as online live-chat counselling.

With our Full Outpatient option there are no restrictions on the number of specialist consultations your team can have, including diagnostic tests following referral by a specialist. And all your practitioner fees, including nurses, dieticians, orthoptists, speech therapists and audiologists, will be paid, too.

Importantly, the Mental Health option means your team is supported by access to consultations with a mental health specialist and treatment in a private hospital.

£40.59 per month
Equivalent to
£6.77 per person

£146.45 per month
Equivalent to
£24.41 per person

£209.01 per month
Equivalent to
£34.84 per person



Choose just one option, all on its own

If you only need one of our options, that's no problem. For example, just pick cashback on dentist and optician visits for you and your team, throughout the year. (Refer to the top of this page for details of the cover options which need to be purchased with other options. In addition, you'll need more than one option if you're covering one to two people.)

Your options explained

Look at these options then simply choose which ones you think are right for your business to build your plan. Full details of your cover, including exclusions and limitations, will be provided in your membership handbooks when you join.



Treatment with NHS Cancer Support

- Inpatient and day patient hospital costs including accommodation, diagnostic tests, surgery, drugs and dressings.
- Ambulance transport to another medical facility if your employee is receiving private treatment.
- Specialist fees for surgeons, anaesthetists and physicians if you have treatment as an inpatient or a day patient.
- Hospital accommodation for one parent when their child, covered by the plan, is receiving eligible treatment.
- Outpatient CT, MRI and PET scans.
- Outpatient surgery.

We won't pay for cancer treatment – you'll use the NHS or pay for treatment yourself. During treatment, if your specialist wants to use a licensed cancer drug which is approved for your treatment but that the NHS won't pay for, we'll pay for that drug and the cost of giving it to you. (This doesn't include outpatient drugs.)



Treatment with Comprehensive Cancer Cover

Upgrade to include cover for private cancer treatment such as chemotherapy and radiotherapy.

Subject to medical history.



Diagnostics Only

- No yearly limit on diagnostic outpatient surgery.
- Outpatient CT, MRI, PET scans covered in full.
- Up to two specialist outpatient consultations per year.
- No yearly limit for specialist-referred outpatient diagnostic tests.



Therapies

- Outpatient treatment by a physiotherapist, osteopath, chiropractor or acupuncturist, with no yearly limit on fees.
- Up to an overall maximum 10 sessions a year when your employee is referred by a GP or, for physiotherapist and osteopath treatment, when they have treatment through our muscles, bones and joints service. Available to members aged 18 and over.
- Further sessions (as long as we agree them first) when referred by a specialist.



Mental Health

- Private hospital and day-patient unit fees for psychiatric treatment, including accommodation, diagnostic tests and drugs, but not outpatient drugs.
- Inpatient specialist fees for psychiatric treatment.
- Outpatient specialist consultations for psychiatric treatment.
- Outpatient fees for psychologists and cognitive behavioural therapists when a specialist refers you.
- Face-to-face, email or telephone counselling through our mental health assessments and support service, without the need for a GP referral first. Only counselling sessions arranged through our mental health assessments and support service are covered by the plan. Your employees must be over 18 years of age to use this service.

Subject to medical history.



Private GP

- Up to £500 a year for visits to a private GP for consultations.



Dentist and Optician Cashback

- 80% of your dentist's fees, up to £400 a year.
- 80% of the cost of prescribed glasses and contact lenses, up to £200 a year.
- Up to £25 a year for an eye test.



Outpatient

Standard

- Up to two specialist consultations a year.
- No yearly limit on diagnostic tests on specialist referral.

Enhanced

- Up to four specialist consultations a year.
- No yearly limit for diagnostic tests on specialist referral and practitioner fees including nurses, dietitians, orthoptists, speech therapists and audiologists.

Full

- No yearly limit for specialist consultations.
- No yearly limit for diagnostic tests on specialist referral and practitioner fees including nurses, dietitians, orthoptists, speech therapists and audiologists.



Travel Cover

- European Travel Cover.
- Worldwide Travel Cover.

Both these options, provided by AXA Health, cover you if you need emergency medical treatment abroad.
For the most significant travel exclusions see page 7.



Employee Assistance Programme

Essential

- EAP helpline offering 24/7 support for mental health concerns.
- Life management for help with legal, debt, family, consumer and housing concerns.
- Online live chat support.
- Manager guidance and referrals through the EAP helpline.

Premier

- Includes everything in EAP Essential as well as up to eight face-to-face, video, or short-term counselling sessions with a counsellor or mental health professional.

Benefits and offers for everyone

Whatever cover options you choose, your plan gives you access to these benefits and offers as standard.

Support for muscles, bones and joints

Your employees don't need a GP referral to speak to a physiotherapist. Whatever's bothering them – whether it's a sore back, aching joints, or a sprained ankle from a weekend run – they can simply contact us to make a phone or online appointment with our physio service. Available for members aged 18 and over.

If it's a question of health, our medical professionals are here to help, 24 hours a day

Sometimes a quick chat is all it takes to feel reassured. For answers to health questions about everything from medication to pregnancy questions to mental wellbeing and more, your employees can call or email our healthcare professionals at our 24/7 health support line.

Nurse and counsellor helpline open 24/7, midwives and pharmacists available 8am to 8pm, Monday to Friday 8am to 4pm, Saturday 8am to 12pm, Sunday.

Access to discounted gym membership offers

Save 40% off monthly individual membership fees for you and your employees covered under your plan at Nuffield Health Fitness and Wellbeing centres. Or if going to the gym isn't an option, save 40% off their 24/7 online-only gym membership.

This discount is available to all members covered on our business healthcare plans. There is also a 20% discount on monthly membership fees available to any employee and their partner or spouse not covered by your AXA Health business healthcare plan.

The joining fee is £39 and may be subject to change by Nuffield Health.

Your team can also enjoy up to 40% off at Hushle with a Monthly+ pass, giving access to multiple gyms from a range of over 2,000.

For full terms and conditions, please visit axahealth.co.uk/terms/gym-discount

Offers are subject to change and do not form part of the insured benefits.

Online GP appointments, whenever, wherever²

Employees can connect to our online GP service, AXA Doctor at Hand (powered by Doctor Care Anywhere), for a video or phone consultation with an experienced GP or an Advanced Clinical Practitioner from 8am to 10pm. We offer no-rushed appointments, with plenty of time for you to discuss any worries you may have.

If someone needs to be referred to a specialist and you've also got an Outpatient option or the Diagnostics Only option on your plan, the clinician can pass details of the referral directly to us so we can authorise the consultation and book an appointment with an appropriate specialist.³

No one has to spend time visiting a chemist either. If your Doctor Care Anywhere clinician needs to prescribe something for you, they'll arrange for this to be delivered to your home or a local pharmacy.⁴

“ I was very happy with all of the stages from start to finish, all operatives were very pleasant and helpful. ”

AXA HEALTH MEMBER

² Subject to appointment availability. Please see doctorcareanywhere.com/axamembership for details.

³ Depending on the level of cover you have chosen, an excess and outpatient limit may apply. If you don't include an outpatient option or the Diagnostics Option with your plan, any specialist referrals would need to be self-funded. All referrals and treatment recommended are on a private basis. The GPs and Advanced Clinical Practitioners are unable to refer to the NHS. Your membership needs the appropriate benefits in place for onward treatment to be paid for.

⁴ Available in most circumstances. Outpatient prescriptions and delivery are not covered by the plan and may cost more than on the NHS. Prescriptions are only available in the UK.

Exclusions and ways to save

What isn't covered?

As with many insurance plans, there are things that Business Protect doesn't cover. The exclusions will depend on the options you choose but the main exclusions are:

- Treatment of medical conditions your employees had, or had symptoms of, before they joined, unless you've chosen a 'continuing medical exclusions' or 'medical history disregarded' plan.
- Treatment of long-term, on-going or recurrent conditions (chronic) like diabetes or asthma.
- Routine pregnancy and childbirth.
- Cosmetic treatment.

We'll provide full details of your cover, including exclusions and limitations, when you join.

There are also Travel Cover exclusions to consider

Here are our most significant exclusions. Please also remind employees to always listen to government or medical advice before they travel.

- Any costs incurred when travelling against Foreign, Commonwealth and Development Office advice.
- If you aren't medically fit to travel, travel against medical advice or where you have failed to exercise all reasonable care.
- For any claims for medical treatment, loss of deposit, cancellation and curtailment where the insured member is terminally ill. Most other pre-existing conditions are covered.

Using facilities and specialists we haven't approved

If you choose to have treatment at a hospital or day-patient unit that's not in our hospital list, we'll only pay 60% of the charges from that hospital or day-patient unit, as long as they charge up to the normal rates published and charged by that hospital or day-patient unit. You'll be responsible for paying the balance of the cost.

If your treatment is provided by a specialist who is not a Business Protect-approved specialist but who is recognised by AXA Health, we'll only pay 60% of the charges that would normally be paid by us. If your treatment is provided by a specialist who is neither a Business Protect-approved specialist nor recognised by AXA Health, you will be responsible for paying the full amount of the charges.

More ways to save your company money

Business Protect is flexible to fit your budget. But there are other ways to adjust the price of your cover too.

- **Pay up front and save 5%**, with a yearly instead of monthly subscription.
- **Choose the level of excess for each employee** from £0 to £750. Please note, an excess is not available for some cover options. Speak to our account managers to find out more.

You'll need to choose your underwriting options too

Decide how to cover your team members for conditions they might have before joining us. Underwriting options depend on the options that you choose and affect the cost of your plan in different ways.

- **Fully underwritten.** We ask for details of your employees' medical history and use these to tailor any personal exclusions for pre-existing conditions.
- **Moratorium.** With moratorium underwriting, you won't have cover for treatment of medical problems you had in the five years before you joined us, until:
 - you've been a member for two years in a row, and
 - you've had a period of 12 consecutive months since you joined that have been trouble-free from that condition.

What does 'trouble-free' mean?

It means that for your medical condition you haven't:

- had a medical opinion from a medical practitioner, including a GP or a specialist
 - taken medication (including over the counter drugs)
 - followed a special diet
 - had medical treatment, or
 - visited a clinical practitioner, therapist, homeopath, acupuncturist, optician or dentist.
- **Continuing medical exclusions.** We continue your medical underwriting from your previous healthcare insurer. The terms and conditions for your new plan apply.
 - **Medical history disregarded.** We cover existing medical conditions, subject to membership terms. Available for cover of 15 or more people.

**To find out more
or to get a quote, contact
your intermediary.**



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