



The small business guide to health insurance

Your business health insurance questions answered

Business health insurance questions answered

What is private health insurance?

In most instances, private health insurance (sometimes referred to as private medical insurance (PMI) or private healthcare cover) covers the cost of private medical treatment for acute conditions that develop after your policy has started (depending on the details of your plan).

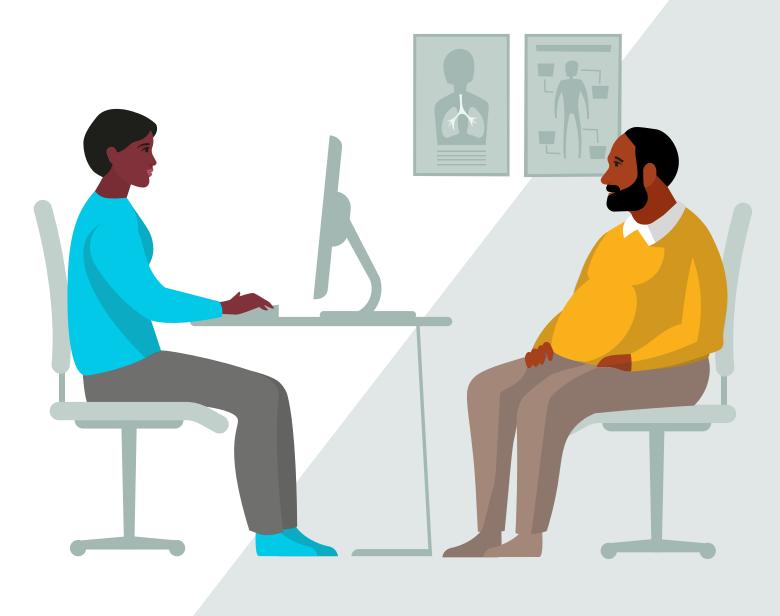
An acute condition is a disease, injury or illness that is likely to respond quickly to treatment which aims to return you to the state of health you were in immediately before suffering the disease, injury or illness, or which leads to your full recovery.

Private health insurance comes with the benefit that appointments can often be made at a time and location that's convenient for you.

Does private health insurance cover chronic conditions?

Private health insurance doesn't usually cover the cost of private medical treatment for chronic conditions. A chronic condition is a disease, illness or injury that has one or more of the following characteristics:

- It needs ongoing or long-term monitoring through consultations, examinations, check-ups and/or tests
- It needs ongoing or long-term control or relief of symptoms
- It requires your rehabilitation or for you to be specially trained to cope with it
- It continues indefinitely
- It has no known cure
- It comes back or is likely to come back



How might a small business owner benefit from small business health insurance?

When you own a small business, your team is often vital to its success. It takes a long time to build up a team around you who you fully trust to grow your business and support you in achieving your vision and goals. When you do find the right people, it's natural that you'd want to make sure that they feel supported and valued. Small business health insurance can benefit your business in a number of ways, including:

Employee retention

Including private health insurance in your employee benefits package can be a great way to retain top team members by showing them that they're a valued part of the business. It helps to show you're investing in their health and wellbeing as much as they're investing themselves in your business. It's also a benefit that's highly valued by employees. According to one survey, 29% of UK employees would like their company to offer private medical cover.¹



Recruitment

Not only can small business healthcare cover help to retain existing employees, it can also be a great incentive to help attract new team members. According to a 2017 study by Canada Life Group, 85% of employees are more likely to work for employers who offer clearly labelled benefits.² When you own a small business, it can be difficult to attract the best quality candidates for a position, particularly when you may not be able to offer the same level of salary that a larger company may be able to. Offering a benefits package that includes things such as private healthcare cover can therefore be a great added incentive.

Health information and support

Our small business health insurance gives you and your team access to health information and support online and over the phone.

Access to our online GP service, AXA Doctor at Hand, (provided by Doctor Care Anywhere) is included as standard, regardless of the cover options you choose. AXA Doctor at Hand is a 24/7 service, available wherever and whenever you need it. From a choice of appointments with a GP or Advanced Nurse Practitioner, so you can get an appointment at a time and place that suits you. Appointments are subject to availability. Doctor at Hand GPs are available 24/7. Advanced nurse practitioners are available 8am-10pm.

Plus, you and your team will have access to health information and support over the phone from our team of nurses, counsellors, midwives and pharmacists via our health information telephone helpline.

Flexible appointments

With small business healthcare cover, you and your team can have more flexibility and choice over your medical appointments, including where and when you're treated.



How might employees benefit from small business health insurance?

Peace of mind

As well as having benefits for the business, small business health insurance also has a number of benefits for your team. When one of your employees has a health worry, it can be difficult for them to concentrate on anything else. It can start to impact their sleep and their productivity at work.

Small business health insurance can provide peace of mind that, should your employees have a health worry, they can access help and support promptly via services such as an online GP and health information telephone helpline.



Convenient appointments

Medical appointments can be difficult for employees to attend, particularly when they're at inconvenient times or locations. With private healthcare cover, your team will have much more control over their appointments. They could have an appointment in the evening after work, or at the weekend. At AXA Health, our small business health insurance provides access to our 24/7 (subject to appointment availability) online GP service, AXA Doctor at Hand (powered by Doctor Care Anywhere). This gives you and your team access to a phone or video appointment with a GP or Advanced Nurse Practitioner, lasting up to 20 minutes, at a time and place that suits them. (Advanced Nurse Practitioners available 8am to 10pm).

Treatment in a private hospital

It also comes with the benefit that employees will receive eligible treatment in a private hospital, usually with their own private room.



Access to 24/7 health information

At AXA Health, our small business health insurance also gives your team access to our 24/7 medical information telephone helpline.

Whether they have a question about a prescription or are feeling burnt out at work, they'll be able to pick up the phone and speak to a nurse, pharmacist, counsellor or midwife at a time and place that's convenient for them.*

*Nurses and counsellors are available 24/7, midwives and pharmacists are available 8am-8pm Monday-Friday, 8am-4pm Saturday and 8am-12pm Sunday



How does private health insurance differ from other health plans?

Getting you and your team back to work quickly

The aim of small business health insurance is to get you and your team back to work quickly through prompt access to diagnosis and eligible treatment. This differs from a number of other health plans that are available, including:

- Health cash plans. Health cash plans can be used to spread the cost of everyday, routine healthcare bills including dental check ups and eye tests. Whereas private health insurance aims to get you and your team back to work quickly by giving you fast access to eligible treatment, health cash plans allow you to subsidise the cost of routine healthcare check ups for you and your team.
- Critical illness cover. Critical illness cover will pay out a lump sum if you're diagnosed with a specified critical illness. It doesn't usually cover the cost of private medical treatment.
- Accident, sickness and unemployment cover/income protection. This provides you with a set monthly payment if you're out of work due to accident, sickness or unemployment in order for you to cover the cost of certain bills. It doesn't usually cover the cost of private medical treatment.
- Life insurance. With life insurance, a cash sum is paid out to nominated beneficiaries in the event of death.
- Key person insurance. Key person insurance compensates the business for financial losses that would arise as a result of the death or extended incapacity of an important member of the business.



What underwriting options are available and what can't I claim for?

Find the option to suit your business

Underwriting allows you to decide how you'll cover team members for any conditions they might have before joining us. The underwriting option that you choose can affect the cost of your healthcare cover. The underwriting options available are:

- Fully underwritten. This means that any pre-existing medical conditions that you or your team might have aren't covered. This option requires you and your employees to declare your medical history when you join.
- Two-year moratorium. Any pre-existing medical conditions may be covered after two years continuous cover, provided you've been completely trouble free from advice, treatment or a special diet for at least a continuous year after joining. A pre-existing condition is any disease, injury or illness that:
 - You have received medication, advice or treatment for, or
 - You have experienced symptoms of, in the five years before the start of cover.

- Joining us from another private health insurance provider, you can continue any underwriting arrangements that you had with your previous provider across to your new plan. The rules and benefits of your new plan with AXA Health will apply.
- This underwriting option means that we'll cover you and your team for preexisting medical conditions, subject to your membership terms. This option is available if you're looking to cover 15 people or more. With this option, we don't ask for medical history declarations from you and your team. All pre-existing conditions are accepted subject to the rules and benefits of the plan.

Conditions that you and your team can't claim for

Exclusions are conditions that you and your team wouldn't be able to claim for under your small business health insurance plan. As with most healthcare cover, there are certain things that our small business healthcare plans don't cover. Here are some of the more significant exclusions:

- Treatment of any medical conditions your employees had, or had symptoms of, before they joined, unless you've chosen a 'continued medical exclusions' or 'medical history disregarded' policy.
- Routine pregnancy and childbirth.
- Outpatient drugs and dressings.
- Treatment of long-term, on-going or recurrent conditions (chronic), for example diabetes or asthma.
- Treatment needed as a result of training for or taking part in any sport for which you are paid, receive a grant or sponsorship (not counting travel costs) or are competing for prize money.

- Cosmetic treatment.
- Fees if you choose to use a hospital that is not in our Directory of Hospitals.

Full details of what we cover, any limits to cover and the exclusions can be found in the membership handbook.



How can I save money on private health insurance and how does it impact tax?

Cost saving options

At AXA Health, we have a number of cost-saving options available that can help you to look after the health and wellbeing of your team while keeping costs down. Our cost-saving options include:

- Paying annually. Save 5% by paying your subscription yearly instead of monthly.
- Choose your excess. Depending on what you choose for your plan, you may be able to reduce your annual subscription by including an excess of between £50 to £750 per employee.
- Choose your underwriting options. The underwriting options that you choose can affect the cost of your plan.

Tax implications

When you provide private health insurance to your team, it's considered a 'benefit-in-kind'. This means that your employees will need to pay tax on the benefit amount.

At the end of each tax year, employers have to complete a P11D expenses and benefits form for every employee who has received expenses or benefits in addition to their salary. (This doesn't include routine business expenses and benefits like travel and company car fuel.)



Why choose AXA Health for your small business health insurance?

At AXA Health, our small business health insurance comes with a number of benefits for you, your team and your business.

24/7 health support team

Our small business health insurance gives you and your team access to our 24/7 health information telephone helpline. Whether it's a question about a prescription or a pregnancy-related query, our team of nurses, counsellors, midwives and pharmacists is just a phone call away.*

*Nurses and counsellors are available 24/7, midwives and pharmacists are available 8am-8pm Monday-Friday, 8am-4pm Saturday and 8am-12pm Sunday

Online GP service

Our small business health insurance gives you and your team access to our 24/7 online GP service, AXA Doctor at Hand (powered by Doctor Care Anywhere). With AXA Doctor at Hand, you'll have access to an appointment with a GP or Advanced Nurse Practitioner. Appointments are up to 20 minutes long and can be online or over the phone, at a time and place that suits you (subject to appointment availability). This could be in the evening or at the weekend, so you can minimise the amount of time that you and your team need to be away from work. (Advanced Nurse Practitioners available 8am to 10pm).

Muscle, bone and joint support

Musculoskeletal problems (issues affecting the muscles, bones and joints) can have a big impact on all areas of someone's life. With our muscles, bones and joints service, you and your team can speak to a physiotherapist over the phone, without the need for a GP referral. They'll assess the symptoms, discuss what they could mean and help to plan what to do next. Our muscles, bones and joints service comes as standard on all small business healthcare cover plans. This service is available to our healthcare members aged 18 years or over. Any face-to-face treatments, tests, or consultations are only payable under the plan if you have relevant cover options.

Cancer and heart care

If one of your team is affected by cancer or a heart condition, it has a big effect on the whole team. Our experienced team of nurses are there for your people at the end of the phone. They know all about the side effects, medication and how your employee may be feeling. They're also on hand to support family and colleagues too.

Health and wellbeing benefits

Wellbeing incentives such as access to discounted gym memberships to keep your employees fit and healthy.

What different cover options are available?

You know your business better than anybody. That's why we think that the best way for you to get the healthcare cover that's right for you and your team is to give you the chance to build your plan yourself. We're offering a choice of private medical insurance cover options and benefits that you can choose from, so you only pay for the cover you need.*

Included as standard

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Whatever options you choose, all new SME customers will have access to the following as standard:

- **AXA Doctor at Hand.** Access to AXA Doctor at Hand, our online GP service, available by video or over the phone 24/7 (subject to availability), powered by Doctor Care Anywhere.
- Muscle, bone and joint support. Our muscles, bones and joints service gives you access to a physiotherapist over the phone without the need for a GP referral. They can offer guidance and support for issues affecting the muscles, bones and joints. This service is available to members aged 18 or over.
- **Heart and cancer nurses.** Heart and cancer nurses, available by phone, who are dedicated to supporting you and your family.
- **Health information phone line.** Our telephone helpline is open 24/7 for health information and support from nurses and counsellors. Pharmacists and midwives are available from 8am-8pm Monday to Friday, until 4pm on Saturday, and until 12pm on Sunday.
- Wellbeing incentives. Such as access to discounted gym membership to keep your employees fit and healthy.



To find out more about the options available, including what is and isn't covered, call our small business experts on 0800 389 7413

Lines are open 8.30am-5.30pm Monday to Friday. We may record and/or monitor calls for quality assurance, training and as a record of our conversation.

^{*}If you are buying cover for 1-2 people only, you will need to include either the Treatment option or the Diagnostics Only option in your plan.

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Cover options*

Choose from the below options to create a plan that works best for your business and budget:

- Treatment option. Cover for hospital procedures and operations, including surgery. With this option, you can choose from NHS Cancer Support or Comprehensive Cancer Cover. Cover includes radiotherapy and chemotherapy for cancer when you include Comprehensive Cancer Cover. (Cover is subject to previous medical history.) NHS Cancer Support does not cover private cancer treatment, so your employees would use the NHS instead.
- Diagnostics Only option. Waiting for a health condition to be diagnosed can be a worrying time. This option aims to fast-track the process of finding out what's wrong if you or one of your employees becomes unwell.
- Outpatient option. Cover if you or your team need to see a specialist about a health concern. When you use our appointment booking service, appointments can be

arranged at a time and place that's convenient for you. Choose from Standard, Enhanced or Full outpatient cover, depending on the level of benefits you want to offer.

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- Therapies option. This option pays for fees for outpatient treatment by a therapist (physiotherapist, osteopath or chiropractor) or acupuncturist.
- Mental Health option. This includes psychiatric treatment by psychologists and cognitive behavioural therapists when referred by a specialist. Your employees won't need a GP referral to access help and support. They can simply call our mental health assessment and support service to arrange an assessment with a counsellor or psychologist. Our mental health assessment and support service is available to members aged 18 and over.



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- Extended Cover option. This option gives your team greater flexibility and choice over where they're treated. Plus, extra cover for planned, pre-approved treatment abroad and cover for the routine management of a number of specified chronic conditions including asthma, diabetes and epilepsy.
- Private GP option. This option makes it easy for you and your employees to see a private GP in person, promptly, at a time that's convenient for you and your business.
- Employee Assistance Programme.
 When members of your team are going through difficult times, such as divorce or money problems, they may find it hard to concentrate on work. This option gives them a professionally trained expert to talk to, whenever they need it. (Our EAP options are not available on their own, without other cover options in the plan)

Dentist and Optician Cashback. Help your employees look after their teeth and eyesight with cashback towards dentists' fees, glasses, contact lenses and eye tests.



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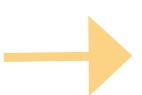
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How does the claims process usually work?

The diagram below briefly explains how the claims process usually works:

1 Ask your GP for an open referral

If your GP recommends you see a specialist, tell them that you want to go private and ask for an open referral (an open referral is where your GP states that treatment is necessary and which type of specialist you require that treatment from, but they do not specify the specialist's name). This means our appointment booking service can help you find a suitable specialist and make a convenient appointment for you. (Your consultation will be covered if you include an Outpatient option with your plan).



2 Call us before you see the specialist/start any treatment

Call as soon as you've seen your GP.
This will mean that you won't end up paying for treatment that you're not covered for.



We'll check your cover and let you know what happens next

We may ask you to provide more information, for example from your GP.

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Small business health insurance terminology explained

Decoding the jargon

- Acute condition: An acute condition is a disease, illness or injury that is likely to respond quickly to treatment that aims to return you to the state of health you were in immediately before suffering the disease, illness or injury, or which leads to your full recovery.
- Chronic condition: A chronic condition is a disease, illness or injury that has one or more of the following characteristics:
 - It needs ongoing or long-term monitoring through consultations, examinations, check-ups or tests.
 - It needs ongoing control or relief of symptoms.
 - It requires your rehabilitation, or for you to be specially trained to cope with it.
 - It continues indefinitely.
 - It has no known cure.
 - It comes back or is likely to come back.

- Day patient: A patient who is admitted to a hospital or day patient unit because they need a period of medically supervised recovery but does not occupy a bed overnight.
- **Directory of Hospitals:** The list of hospitals, day-patient units and scanning centres that are available for you to use under the terms of your plan.
- **Excess:** Excess is the amount you'll need to pay towards a claim that you make on your health insurance. Your excess is paid yearly and can be different for each person covered on the plan.
- Inpatient: A patient who is admitted to hospital and who occupies a bed overnight or longer, for medical reasons.
- Open referral: An open referral is where your GP states that treatment is necessary and which type of specialist you require that treatment from, but they do not specify the specialist's name.
- Outpatient: A patient who attends a hospital, consulting room, or outpatient clinic and is not admitted as a day patient or an inpatient.

- Pre-existing medical conditions: A pre-existing medical condition is any disease, illness or injury that:
- You have received medication, advice or treatment for in a pre-determined amount of time before the start of your cover, or
- You have experienced symptoms of in the five years before the start of your cover whether or not the condition was diagnosed.
- Subscription (sometimes called a premium):
 This is the financial cost of insurance cover. It can be paid annually or in monthly instalments during the duration of the insurance policy.
- Underwriting: The process of underwriting involves insurance companies deciding:
- What levels of cover it can offer you.
- How much your subscription should be.
- How to cover any existing medical conditions you may have.

AXA Health small business health insurance

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