

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

The insurer of this policy is Astrenska Insurance Limited. Status Global Insurance provides all services relating to the general administration of the policy including the issue of documents and collection of premiums. Services relating to claims handling and case management, evacuation and assistance under this policy are provided by Intana, a trading style of Collinson Insurance Services Limited. Non-standard terms may apply, and each customer must complete an application form prior to being accepted by us for cover under the policy.

All benefits are payable to each insured person in each period of insurance unless otherwise stated.

	Level 1 <i>Essential</i> £/€	Level 2 <i>Standard</i> £/€	Level 3 <i>Super</i> £/€	Level 4 <i>Maximum</i> £/€
Item 1 - Hospital & Nursing-at-home Benefit				
a) Hospital in-patient. b) Parental stay for a hospitalised insured child under age 19. c) Nursing-at-home following an in-patient stay. Note: These benefit limits apply to a), b) & c) combined per person per period of insurance. Note: A 90 Day Wait Period applies to this benefit in respect of pre-existing medical conditions^ only. Note: Benefits are not payable for Items 1a) and 1b) for the first night of any in-patient stay.	100 10 per night	200 10 per night	300 15 per night	400 20 per night
Item 2 - Hospital Travel & Parking				
75% cash back* for public transport to and from hospital or hospital car parking costs for an eligible in-patient stay in excess of 48 hours. Note: This benefit applies only for eligible in-patient stays for the insured person.	10	20	50	75
Item 3 - Physician & Consultant Services				
75% cash back* for the services of a physician and/or consultant including: diagnostic tests; investigations including ECG, X-rays, pathology, histology, MRI/CT/PET scans; and minor surgery in a doctors' clinic/consulting rooms. Note: A 90 Day Wait Period applies to this benefit in respect of pre-existing medical conditions^ only.	100	200	300	400
Item 4 - Routine Dental Benefits				
75% cash back* for annual check-up, annual hygienist visit, extractions, X-rays, moulds, fillings using amalgams or composite materials, new or repairs to porcelain crowns, new or repairs to bridgework and treatment for the relief of an infection including temporary fillings. Note: A 90 Day Wait Period applies to this benefit. Note: Orthodontic work, root canal treatment, precious metals, gingivitis, periodontosis, gum disease and prescribed drugs or medicines are all excluded.	50	125	150	200
Item 5 - Emergency Dental Treatment				
100% cash back* for dental treatment for immediate pain relief where required as a direct result of an accident. Only treatment received during the first 5 days following the date of the accident is covered. Note: Injuries or damage caused by eating, drinking, normal wear and tear, oral hygiene or any other means other than extra-oral impact are excluded. Note: Restorative work, remedial work, precious metals, orthodontic work, prescribed drugs, gingivitis, periodontosis and gum disease are all excluded.	50	125	150	200
Item 6 - Optical Benefit				
75% cash back* for annual vision/eye test, fitting fees, prescribed glasses and contact lenses, spectacle frames, repairs to spectacle frames, prescription sunglasses, prescription swimming goggles and laser eye surgery. Note: A 90 Day Wait Period applies to this benefit.	75	125	150	200
Item 7 - Physiotherapy & Complementary Treatments				
75% cash back* for Physiotherapy, Osteopathy, Chiropractic treatment, Acupuncture and Homeopathy provided by a licensed practitioner. Note: A 90 Day Wait Period applies to this benefit in respect of pre-existing medical conditions^ only.	50 Max 3 visits	100 Max 3 visits	150 Max 5 visits	200 Max 10 visits
Item 8 - Chiropody & Podiatry Benefit				
75% cash back* for chiropody and podiatry provided by a licensed practitioner. Note: A 90 Day Wait Period applies to this benefit.	Not Covered	50	100	150
Item 9 - Prescription Drugs & Vaccinations				
100% cash back* for prescription drugs and medicines; adult vaccinations and immunisations, including flu vaccine. Note: A 90 Day Wait Period applies to this benefit in respect of pre-existing medical conditions^ only.	Not Covered	25 Max 1 Prescriptions	40 Max 2 Prescriptions	50 Max 3 Prescriptions
Item 10 - Wellness Benefit				
75% cash back* for wellness screening including cancer screening and a number of routine health tests for insured persons aged 30 years or over. Note: A 12 Month Wait Period applies to this benefit.	Not Covered	25	40	50

Item 11 - New Child Benefit New child cash benefit payable on the birth/adoption of each child subject to: - the child being born/adopted at least 12 months after the mother's entry date to the policy; and - no claim being made for pregnancy or childbirth against any other item of the policy.	Not Covered	100	200	300
Item 12 - Broken Bone Benefit Cash benefit payable upon the breakage of the major arm bones (radius, ulna, humerus) and major leg bones (femur, tibia or fibula).	Not Covered	100	150	200
Item 13 - Common Carrier Accidental Death Cash benefit payable if an insured person suffers accidental loss of life as a direct result of a collision, crash or sinking of a duly licensed common carrier while riding as a fare paying passenger inside such common carrier. The accident must occur within the period of insurance and loss must occur within one year of the accident.	Not Covered	1,000	5,000	10,000
Item 14 - Excess Buy-Back Cover Excess(es) you have had to pay during the period of insurance for settled claim(s) on a personal insurance policy that you have bought and paid for as named here in the summary of benefits. Note: A 12 Month Wait Period applies to this benefit. Note: Motor claims relating to anything other than social, domestic and pleasure use, including commuting to or from your permanent place of work, are excluded. Note: Motor claims arising from breakdown, misfuelling, windscreen repair or replacement or any glass repair or replacement to your vehicle are excluded.	Not Covered	Not Covered	100 Private Medical Insurance Policies Only	200 Home, Motor, Private Medical or Travel Insurance Policies Only
Item 15 - Hearing Aids 75% cash back* towards the cost of annual hearing test and hearing aid (including fitting charges) where prescribed by an audiologist/ENT consultant for an insured person aged 70 years and over. Note: A 24 Month Wait Period applies to this benefit. Note: Hearing aids under this benefit are available only once in every 36 month period.	Not Covered	Not Covered	Not Covered	300

Optional Add-On Benefits:

These benefits only apply if you have selected each optional add-on, have paid the required additional premium and the optional benefit is shown on Your Certificate of Insurance.

Item 16 - Personal Accident & Accidental Death	Sum Insured £/€ Per Unit
Accidental bodily injury that results in the following:	
Common Carrier Accidental Death	100,000
Accidental Death	25,000
Permanent Total Disablement*	25,000
Total & Permanent Loss of Sight (one/both eyes)	25,000
Total & Permanent Loss of one or more limbs	25,000
Total & Permanent Loss of one eye & one limb	25,000
Total & Permanent Loss of hearing in both ears	10,000
Total & Permanent Loss of speech	10,000
Full-Thickness Burns or Fourth Degree Burns (affecting more than 10% of body surface)	5,000
Deep Partial-Thickness Burns (affecting more than 10% of body surface)	2,500
* (Which entirely prevents an Insured Person from any occupation to which he or she is suited by way of education, training or experience and which lasts 12 months at expiry and at expiry of this period is beyond expectation of improvement).	
A maximum of 3 Units may be Purchased for persons aged 19 to 64. A maximum of 1 Unit may be purchased for children aged under 19.	
Children Under 19: the maximum payable under any one section or in total is 5,000.	
Maximum Benefit – The total amount payable for benefits listed here within Item 16 shall not exceed 100% of the amount shown in the summary of benefits for Accidental Death (other than Common Carrier Accidental Death).	

Item 17 - Income in Hospital Benefit	Sum Insured £/€ Per Unit
Cash benefit for each day an insured person aged between 19 and 64 years (inclusive) is admitted to hospital for an in-patient stay in excess of 7 days for a valid claim under Item 1a).	100 Per Day Per Unit
The daily income benefit is payable from the 8th day of hospitalisation.	
A maximum of 3 units may be purchased. A lifetime limit applies to this benefit.	
Note: Pre-existing medical conditions^A are excluded. Note: Pregnancy and/or childbirth is excluded.	
	25,000 Lifetime Maximum Per Unit applies

Item 18 - 24 Hr Emergency European Medical Assistance	Sum Insured £/€
Emergency Assistance Line	Included
European Emergency Medical Evacuation and Repatriation Cover	100,000
Overseas Burial/Cremation/Return of Mortal Remains Cover	10,000
Emergency Local Ambulance and Transportation	2,500
Emergency Travel Support from Relative or Friend	2,500
Return of Unaccompanied Children under 19 years of age	1,000
<p>Note: Pre-existing medical conditions[^] are excluded.</p> <p>Note: Pregnancy and/or childbirth is excluded.</p> <p>Note: Emergency Medical Treatment, other than Emergency Medical Treatment approved by us and necessarily incurred during an Emergency Medical Evacuation, is excluded.</p> <p>Note: Costs relating to transfer in country of residence following an Emergency Medical Evacuation, travel, accommodation, search and/or rescue operations or air/sea rescue operations are all excluded.</p>	

Significant Definitions

* Cash back

The percentage of a claim that we shall pay against each benefit, up to the annual benefit limit, as shown on the summary of benefits and in accordance with your chosen level of cover.

^ Pre-Existing Medical Condition

In relation to benefits under Items 1, 3, 7 and 9 only:

Any medical condition, psychological condition or 'related condition' for which you have received treatment, suffered any symptoms (whether investigated or not) or sought advice **in the 12 months immediately prior to your date of entry to this policy**, except routine check-ups for a pre-existing medical condition where there has been no treatment provided and no change of dosage up or down nor any change of any prescription medication.

In relation to benefits under Items 17 and 18 only:

Any medical condition, psychological condition or 'related condition' for which you have received treatment, suffered any symptoms (whether investigated or not) or sought advice **at any time prior to your date of entry to this policy**, except routine check-ups for a pre-existing medical condition where there has been no treatment provided and no change up or down to any prescription medication.

A 'related condition' is deemed to be any medical condition that is either an underlying cause of, or directly attributable to, the medical condition subject to claim.

A wait period or exclusion applies to certain benefits under this policy for pre-existing medical conditions, as noted within each Item of benefit within the Summary of Benefits above.

Significant Conditions and Exclusions

Geographical Area

The geographical area in which you may receive treatment and services is dependent upon the level of cover chosen, as follows:

Level 1 (Essential) and Level 2 (Standard) : comprises the insured person's country of residence only.

Level 3 (Super) and Level 4 (Maximum) : comprises all countries within the European Economic Area**.

There is no cover under any section of this policy whilst travelling outside the geographical area, except for Item 18 - 24 Hour Emergency European Medical Assistance, where cover extends to the entire European Economic Area** if the insured person has selected this optional add-on and has paid the required additional premium.

**European Economic Area

The geographical area consisting of the following countries only: Austria, Belgium, Bulgaria, Croatia, Cyprus, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Iceland, Ireland, Italy, Latvia, Liechtenstein, Lithuania, Luxembourg, Malta, Netherlands, Norway, Poland, Portugal, Romania, Slovakia, Slovenia, Spain, Sweden and United Kingdom.

General Exclusions

- Any claim or expense of any kind arising from alcoholism, drug and substance abuse/dependency, or treatment due to the insured person being under the influence and/or suffering from the effects of alcohol, intoxicants, drugs or narcotics. (See General Exclusions 1, 2, and 3)

- Any claim or expense of any kind arising from impotence and fertility/infertility, including sterilisation and reversal of sterilisation, medically assisted reproduction or any consequences of this treatment, including any resulting pregnancy, childbirth or complications of pregnancy or childbirth. (See General Exclusions 6 and 7)
- Congenital and birth defects and deformities. (See General Exclusion 12)
- Any claim or expense of any kind arising from the HIV infection and the AIDS virus. (See General Exclusion 14)
- Any claim or expense of any kind arising from experimental and/or unproven treatment or the use of unlicensed drugs or medicines. (See General Exclusions 15 and 16)
- Cosmetic surgery or remedial surgery unless as a direct result of an accident or surgery for cancer which occurs during the period of insurance and is covered by this policy. (See General Exclusion 19)
- This policy excludes participating in or practicing for certain sports, pursuits and activities as listed in General Exclusion 25. An insured person should refer to this list to check whether cover is available for any activity they may be undertaking. (See General Exclusion 25)
- Losses not incurred within the period of insurance and claims submitted later than 6 months after they were incurred. (See General Exclusion 29)

For a full list of benefits and exclusions please refer to the policy wording (available upon request).

Eligibility

This policy is designed for insured individuals and their eligible spouse/partner and child dependants living within the European Economic Area.

New applicants must be under age 75 at their date of entry. They will remain eligible for cover until the renewal date immediately after their 85th birthday as long as they continue to accept and pay the renewal premium as per the terms offered.

Children must be under 19 (or under 25 if in full time education) and unmarried at their date of entry. Children may remain covered until the renewal date after their 19th (or 25th) birthday or marriage.

Alterations to the Policy

If you move home, you may change your country of residence within the European Economic Area during your period of insurance without incurring any additional charges. However, changes to level of cover can only be made at the annual renewal date of the policy and only up to and including the age of 74. Once the insured person reaches the age of 75, applications to change the level of cover shall no longer be considered.

Governing Law

This insurance is governed by the laws of England and Wales unless we agree otherwise.

Duration of cover

The cover is normally for a period of 12 months from the date of inception and, as long as you continue to be eligible for cover, is 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.

Your rights to cancel

You have the right to cancel the cover within 30 days of receipt of the policy documents and receive a full refund, provided you have not made any claims under the policy. You may cancel at other times and may be entitled to a pro-rata refund provided no claims have been made and/or pre-authorisation given. Please refer to Section 2 – Cooling off period, and Section 9 – General policy conditions, of the policy wording for full details.

Making a claim

The details of making a claim are shown under Section 3 – How to claim and contact us, of the policy wording. In summary they are:

- If you have medical treatment, you should pay the costs yourself and obtain a receipt. For all claims you should send the prescribed claim form, together with any other supporting documentation and receipts, to Intana, PO Box 637, Haywards Heath, West Sussex, RH16 1WR, United Kingdom.
- In a medical emergency occurring under Item 18 – 24 Hour Emergency European Medical Assistance, you will need to contact our claims department to obtain pre-authorisation on +44 (0) 1444 44 28 70.
- You may request a claim form by:
 - Sending an email to: StatusCash@intana-assist.com
 - Contacting us on the following number: +44 (0) 1444 44 28 70
 - Downloading one from the following website: www.statusmedicalinsurance.com

What to do if you have a complaint?

For complaints about the way this policy was sold to you or about how the policy has been administered, please contact:

Status Insurance Management Limited
10a High Street
Billericay
Essex CM12 9BQ
England
UNITED KINGDOM

Tel: + 44 (0) 1277 637581

Fax: + 44 (0) 1277 634046

Email: enquiries@statusmedicalinsurance.com

For all other complaints, including the claims service, please contact:

Quality Department
Astrenska Insurance Limited
PO Box 637
Haywards Heath
West Sussex
RH16 1WR
England
UNITED KINGDOM

Email: quality@astrenska.com

If you cannot settle your complaint directly you may be entitled to refer it to the Financial Ombudsman Service, Exchange Tower, London E14 9SR.

Are we covered by the Financial Services Compensation Scheme (FSCS)?

We are covered by the FSCS. You may be entitled to compensation from the scheme if we cannot meet our obligations. This depends on the type of business and the circumstances of the claim.

Further information about compensation scheme arrangements is available from the FSCS.

Demands and Needs Statement

This European Health Cash Plan Product and its four levels of cover (Essential, Standard, Super and Maximum) meets the demands and needs of individuals, families and corporate groups within the UK and EEA, who wish to ensure there is financial assistance to help pay for the costs of routine healthcare, such as hospital, physician & consultant visits, physiotherapy treatment, dental care and optical expenses. Advice as to the suitability of the European Health Cash Plan is not available from Status Medical Insurance Solutions as they can only provide information about Our products to aid the understanding of what is covered in order to assist in the decision-making process. It is important to check, when choosing the level of cover, that it meets the specific demands and needs of the person(s) to be insured, and to check, at intervals, that it continues to do so.

Status Medical Insurance Solutions is a brand of Status Global Insurance, which is a trading name of Status Insurance Management Limited which is authorised and regulated by the Financial Conduct Authority (FCA) in the United Kingdom. Their FCA number is 305697.

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UK Administration Office	:	10 High Street, Billericay, Essex, CM12 9BQ, United Kingdom
France Office	:	1 Rue de Four, 82210 Castelmeyran, Tarn et Garonne, France

www.statusmedicalinsurance.com

Astrenska Insurance Ltd. Reg. No. 01708613. PO Box 637, Sussex House, Perrymount Road, Haywards Heath, West Sussex, RH16 1WR.

UK Registered Address: Cutlers Exchange, 123 Houndsditch, London, EC3A 7BU. Authorised by the Prudential Regulation Authority and Regulated by the Financial Conduct Authority and Prudential Regulation Authority – registration number 202846.