



YOUR POLICY BOOK
ACCIDENT HEALTHCARE

SAGA
Experience is everything



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ACCIDENT HEALTHCARE BENEFITS

Saga aims to provide the highest level of care and service possible for customers, so your Saga Car Insurance/Saga Motorhome Insurance policy includes additional benefits, underwritten by Bupa Insurance Limited, that provide access to treatment after a road traffic accident.

Please read this additional Policy Book carefully, together with your Motor Insurance Policy Book, to make sure the insurance cover you have chosen is the most appropriate for you.

If you need to claim the Accident Healthcare benefits, you can find details of how to do so on [pages 6-9](#).

Saga is committed to giving customers different ways to access products. To contact us by Next Generation Text on any of the numbers listed in the Policy Book just prefix the number listed with 18001. For example, our Customer Service Team can be contacted by Next Generation Text on 18001 0800 056 9167.

Sight, speech or hearing difficulties?

Please let us know if you would like a braille, large print or audio copy of your documents. For people with hearing or speech difficulties, you can use the Relay UK service on your smart phone or text phone.

For further information visit www.relayuk.bt.com

You can call us with any questions about the Relay UK service on **0800 010 383**.

Calls to all the telephone numbers above may be recorded in case of subsequent query.

SECTION 1 – INTRODUCTION

What is the purpose of this Policy Book?

This Policy Book sets out the terms that apply to the Accident Healthcare benefits of your Saga Car Insurance/Saga Motorhome Insurance **policy**. It is an important document as it details:

- the benefits and limitations of this section of your **policy**; and
- how to make a claim.

Each section of this document looks at a different aspect of your cover and is set out in a similar style. At the beginning of each section you will find a short summary of the terms in that section, in a question and answer format. This is followed by a table containing more detailed **policy** wording.

Throughout this document certain words and phrases appear in bold type to indicate they have a special medical or legal meaning. You will find a glossary of these words opposite.

Accident Healthcare is underwritten by Bupa Insurance Limited, therefore any reference to ‘Bupa, we, us, our’ in this document means Bupa Insurance Limited. Where we refer to ‘you’ or ‘your’ throughout this document, we mean the **policyholder** and **spouse/partner**.

GLOSSARY

Throughout this document certain words and phrases appear in bold. Where these words appear they have a special medical or legal meaning. These meanings are set out below. To aid customer understanding some of these words and phrases have been approved by the Association of British Insurers and the Plain English Campaign. These particular terms will be commonly used by most medical insurers and are highlighted below by a ◇ symbol.

Benefits table	The table showing the maximum benefits we will pay you under this section of your policy .
Clinical practitioner	A practising member of certain professions allied to medicine who, in all cases, meets our recognition criteria for benefit purposes in their field of practice and who we have told in writing that we currently recognise them as a clinical practitioner for benefit purposes. However, we will only pay out-patient treatment benefits for such services when a specialist refers you to them (except where the benefits table allows otherwise). When such persons provide such services to you as part of your in-patient or day-patient treatment those services will form part of the private hospital charges. The professions concerned are dieticians, nurses, orthoptists, speech therapists, audiologists, physiotherapists, psychologists and psychotherapists. A full explanation of the criteria we use to determine these matters is available on request.

Complementary practitioner	<p>A medical practitioner with full registration under the Medical Acts, who specialises in acupuncture or a practitioner in osteopathy or chiropractic who is registered under the relevant Act; and who, in all cases, meets our criteria for complementary practitioner recognition for benefit purposes in their field of practice, and who we have told in writing that we currently recognise them as a complementary practitioner for benefit purposes in that field for the provision of out-patient treatment only.</p> <p>A full explanation of the criteria we use to decide these matters is available on request.</p>	Day-patient unit	<p>A centre in which day-patient treatment is carried out.</p>
Conventional treatment	<p>Treatment that:</p> <ul style="list-style-type: none"> • is established as best medical practice and is practised widely within the UK; and • is clinically appropriate in terms of necessity, type, frequency, extent, duration and the facility or location where the treatment is provided; <p>and has either:</p> <ul style="list-style-type: none"> • been approved by NICE (the National Institute for Health and Care Excellence) as a treatment which may be used in routine practice; or • been proven to be effective and safe for the treatment of your medical condition through high-quality clinical trial evidence (full criteria on request). 	Diagnostic tests ◇	<p>Investigations, such as x-rays or blood tests, to find or to help find the cause of your symptoms.</p>
Data Protection Legislation	<p>The General Data Protection Regulation ((EU) 2016/679) and any national implementing laws, regulations and secondary legislation, as amended or updated from time to time, in the UK.</p>	Eligible	<p>Those treatments and charges which are covered by your policy.</p> <p>In order to determine whether a treatment or charge is covered, all sections of this document should be read together, and are subject to all the terms, benefits and exclusions set out in this document.</p>
Day-patient ◇	<p>A patient who is admitted to a hospital or day-patient unit because they need a period of medically supervised recovery but do not occupy a bed overnight.</p>	External prosthesis	<p>An artificial, removable replacement for a part of the body.</p>
		GP	<p>A general practitioner on the General Medical Council (GMC) GP register.</p> <p>We will only accept referrals from your NHS GP practice.</p>
		Hospital	<p>Any establishment which is licensed as a medical or surgical hospital in the United Kingdom and is recognised by us for treatment you need.</p>
		Injury	<p>Physical injury to you caused by a road traffic accident involving a moving motor vehicle.</p>
		In-patient ◇	<p>A patient who is admitted to hospital and who occupies a bed overnight or longer, for medical reasons.</p>
		Medical condition	<p>Any disease or illness, which is directly attributable to and is caused by an injury.</p>
		Medical device	<p>Any instrument, apparatus, appliance, software implant, reagent, material or other article intended by the manufacturer to be used, alone or in combination, for human beings.</p>

Open referral	Where your GP states that treatment is necessary and which type of specialist you require that treatment from, but does not specify the specialist's name.
Out-patient ◇	A patient who attends a hospital , consulting room, or out-patient clinic and is not admitted as a day-patient or an in-patient .
Policy	The insurance contract between you and us. Its full terms are set out in the current versions of the following documents as sent to you from time to time: <ul style="list-style-type: none"> • these terms and the benefits table setting out your cover • your Saga Motor Insurance Schedule.
Policyholder	The first person named on the policy Schedule.
Road	A public highway, private road or car park to which the public has a normal right of access.
Scanning centre	A centre in which out-patient CT (computerised tomography), MRI (magnetic resonance imaging) and PET (positron emission tomography) is performed.
Specialist	A registered medical or dental practitioner who, at the time you receive your treatment is on our recognised consultant list for the relevant benefit and type of treatment. The practitioners on the list will change from time to time. You can ask us whether a medical or dental practitioner is on our list and the type of treatment we recognise them for or you can access these details at finder.bupa.co.uk

Specialist (Cont.)	For out-patient treatment only: a medical practitioner with full registration under the Medical Acts, who specialises in psycho-sexual medicine, musculoskeletal or sports medicine, or a practitioner in surgical dentistry or podiatric surgery who is registered under the relevant Act; and who, in all cases, meets our criteria for limited specialist recognition for benefit purposes in their field of practice, and who we have told in writing that we currently recognise them as a specialist for benefit purposes in that field for the provision of out-patient treatment only. A full explanation of the criteria we use to decide these matters is available on request.
Spouse/partner	The policyholder's current spouse or civil partner or any person (whether or not of the same sex) living permanently in a similar relationship with the policyholder .
Surgical procedure	An operation or other invasive surgical intervention listed in the Schedule of Procedures and Fees.
Treatment ◇	Surgical or medical services (including diagnostic tests) that are needed to diagnose, relieve or cure a disease, illness or injury .
United Kingdom (UK)	Great Britain and Northern Ireland, including the Channel Islands and the Isle of Man.
Year	Twelve calendar months from when your policy began or was last renewed, as shown on your Saga Motor Insurance Schedule.

SECTION 2 – YOUR COVER

The purpose of your policy

2.1 This section of your **policy** is designed to cover you whether you are a driver, passenger, cyclist, motorcyclist or pedestrian, for **treatment** made necessary as a direct result of an **injury** sustained in a **road** traffic accident involving a moving motor vehicle in the **United Kingdom**, and which occurred on or after the date you joined this **policy**.

We will pay for the diagnosis and/or necessary active **treatment** of an **injury**:

- if the **road** traffic accident giving rise to the need for **treatment** was reported to the Police or the driver's motor insurer within 24 hours of its occurrence, unless this was not reasonably possible;
- provided the charges actually incurred are for items listed in your **benefits table** and subject to any limits shown there; except when the **treatment** is excluded by the **policy**.

This section of your **policy** does not cover you for:

- 2.1.1** Any **treatment** which is not directly attributable to a physical **injury** sustained in a **road** traffic accident which involved a moving motor vehicle.
- 2.1.2** Any **treatment** of an **injury** sustained at any time before the date you joined this **policy**.
- 2.1.3** **Treatment** needed in the accident and emergency department of the **hospital** or any immediate **treatment** needed in an intensive therapy unit or **treatment** which is received more than 12 months after the date of the **road** traffic accident. Cover commences when you no longer require **treatment** in an intensive therapy unit.
- 2.1.4** **Treatment** of an **injury** sustained as the driver or passenger in a vehicle taking part in racing or rallying of any kind or in any off-road activity.

2.1.5 **Treatment** received by you as the driver of any vehicle involved in a **road** traffic accident if, at the time of the **road** traffic accident, you

- did not hold a valid licence to drive the vehicle; or
- were not insured to drive the vehicle; or
- had more than the maximum legally permitted limit of alcohol in the blood; or
- were under the influence of drugs or substances, other than in accordance with a doctor's prescription.

2.1.6 **Treatment** of any **injury** sustained outside the **United Kingdom**.

2.2 The full terms of the insurance contract between the **policyholder** and us are set out in the current versions of the following documents, which are sent to the **policyholder** from time to time:

- your Saga Car Insurance/Saga Motorhome Insurance Schedule, and
- the terms set out in this document and the **benefits table** setting out your cover.

2.3 We will consider your claims carefully against all the terms, benefits and exclusions set out in this document, which should all be read together.

SECTION 3 – RECEIVING TREATMENT AND MAKING A CLAIM

The procedure you should follow to arrange treatment and make a claim.

To ensure your claim proceeds smoothly, please follow these simple steps.

Report the accident to the police or the driver's motor insurer within 24 hours of its occurrence, unless this is not reasonably possible.

If you have not required emergency **treatment**, visit your **GP**.

If your **GP** advises you need **specialist treatment** please tell them you wish to go private and ask the **GP** for an '**open referral**'. Alternatively they may refer you directly to a **specialist**.

Please, contact the Saga Motor Insurance Claims Line on 0800 027 1339.

The team will pass your details on to the Claims Helpline at Bupa Insurance Limited. We will contact you within two working days to assess whether your **treatment** is **eligible**.

Guided Care

We have a team who can help you find a **specialist**. This service is available if your **GP** has given you an **open referral**, meaning they do not specify the **specialist's** name.

We can also support you if you would like an alternative to the **specialist** your **GP** has referred you to.

If you already have a referral, help us by having the following details available:

- **Specialist/specialist** type or group practice name.
- **Hospital** name and any admission dates if you know them.
- A procedure code if you are having a **surgical procedure**.

(Note: if you ask your **GP** to complete the claim form they may make a charge, which we will not refund.)

If we have asked you to fill out a claim form, complete your section and, where required, ask the **specialist** to complete theirs and return it to Bupa Insurance Limited.

MSK Direct Access

When you experience muscle, bone or joint pain, it is important that you get the most appropriate support early.

With 'MSK Direct Access' you can get access to advice and **treatment** without the need for a **GP** referral.

If you develop a problem, just call the Claims Helpline, who will first check your cover and then offer a free telephone or video physiotherapist assessment, within 48 hours. If you use MSK Direct Access for advice this will not affect your current benefits, as it works alongside these benefits. However, if a MSK Direct Access physiotherapist recommends **treatment**, then we may need to go through some checks before any **treatment** can be authorised and claims are paid, subject to the terms of your policy.

Please note:

Age limits apply to who can use the service. Further details about the Direct Access service, including the age limits that apply, can be found on bupa.co.uk/direct-access or you can contact us.

If you require further **treatment** contact us to confirm your cover.

Send in any outstanding accounts for **treatment** to Bupa Insurance Limited.

Please send any correspondence to:

Accident Healthcare Claims Team, Bupa Claims, Bupa Place, 102 The Quays, Salford M50 3SP.

What happens if I require emergency treatment?

This section of your **policy** does not cover you for **treatment** needed in the accident and emergency department of the **hospital** or for the immediate **treatment** needed in the intensive therapy unit of a **hospital**. However if you are admitted as an **in-patient** at an NHS **hospital**, please ask somebody to telephone us as you may be able to claim for the NHS cash benefit shown in the **benefits table** on [page 19](#).

How are my medical bills settled?

We normally receive bills for **treatment** directly from **specialists** or **hospitals**.

However, if you receive a bill for payment, please forward it to us. We can settle **eligible** bills direct with the **hospital** or **specialist**.

Do I need to tell the place where I have my treatment that I have private medical insurance with Saga?

Yes, you must tell the place where you have your **treatment** that you have private medical insurance with Saga (which is underwritten by Bupa Insurance Limited). This will mean that the fees charged for your **treatment** are those Bupa have agreed with the **facility**.

What happens if I've paid the bills myself already, or if I receive a bill?

If you paid your medical bills yourself and your **treatment** is covered, we will refund you the rates we have agreed with the **hospital** or centre, minus any excess. Please send the original receipts from the **specialist** or **hospital** to Bupa Claims, Bupa Place, 102 The Quays, Salford M50 3SP.

You should send us any receipts for **treatment** within 6 months after you've had your **treatment**, unless this is not reasonably possible.

If you receive a bill, please call us and we'll explain what to do next.

What must I provide when making a claim?

- 3.1** Before we can consider a claim you must ensure that:
- you obtain and complete any form required by us in order to provide us with the necessary information and necessary legal permissions to handle your medical information and to assess your claim. You will need to do this before starting any **treatment** in order to obtain authorisation for your claim from us; and
 - we receive original invoices for **treatment** costs either from you or directly from whoever has provided your **treatment**; and

- you give us all the information we request.

Do I need to provide any other information?

- 3.2** It may not always be possible to assess the eligibility of your claim from the pre-authorisation request alone. On occasion, we may require additional information and it is your responsibility to provide any reasonable additional information to enable us to assess your claim.

In order to establish the eligibility of any claim, we may request access to your medical records including medical referral letters. If you unreasonably refuse to agree to such access we will refuse your claim and will recoup any previous monies that we have paid in respect of that medical condition.

- 3.3** There may be instances where we are uncertain about the eligibility of a claim. If this is the case, we may at our own cost ask a **specialist**, chosen by us, to advise us about the medical facts relating to a claim or to examine you in connection with the claim. In choosing a relevant **specialist** we will take into account your personal circumstances. You must co-operate with any **specialist** chosen by us or we will not pay your claim.

What should I do if I have cover on another insurance policy?

- 3.4** You must tell us if you can claim any of the cost from another insurance policy.

If another insurance policy is involved we will only pay our proper share.

What should I do if the benefits I am claiming for relate to an injury or medical condition caused by another person?

- 3.5** When you claim for **treatment** you need because of an injury or **medical condition** that was caused by or was the fault of someone else (a 'third party') it is your responsibility to notify us as soon as reasonably possible and ensure our interests are

protected in any legal action required so that we are able to recover any costs that we have paid for your **treatment**. This includes:

- Notifying us as soon as you become aware that you require (or may require) **treatment** that was caused by or was otherwise the fault of a third party. You can contact us with this information on 0800 028 6850* or email infothirdparty@bupa.com[^]
- Taking steps we ask of you to recover from the third party the cost of the **treatment** paid for by us. This includes ensuring that we are able to liaise with you and your legal representative (if you appoint one) in relation to this and that you or your legal representative regularly keep us updated as to progress with any recovery action.
- Ensuring that where you agree settlement with a third party, the settlement includes the cost of **treatment** that we have paid for you in full, and that you pay such sum (and applicable interest) to us as soon as reasonably possible.

*We may record or monitor our calls.

[^]If you need to send us sensitive information you can email us securely using Egress. For more information and to sign up for a free Egress account, go to <https://switch.egress.com>. You will not be charged for sending secure emails to a Bupa email address using the Egress service.

Other insurance cover

You can only claim for **eligible** private medical costs once. This means if you have two policies that provide private medical cover, the cost of your **treatment** may be split between Bupa and the other insurance company. You will be asked to provide us with full details of any other relevant insurance policy at the time of claim.

SECTION 4 – TYPE OF TREATMENT

What treatments are not covered?

There are a number of **treatments** (listed under 4.2) that your **policy** does not cover.

These include **treatments** that may be considered a matter of personal choice (such as cosmetic **treatment**) and other **treatments** that are excluded from cover to keep premiums at an affordable level (such as **out-patient** drugs and dressings).

4.1 We pay for **eligible**:

- (a) **Diagnostic tests** ordered by a **GP** or ordered or performed by a **specialist**.
- (b) **Diagnostic tests** arranged by us when these tests are routinely required as part of your referral to a **specialist** to quickly and effectively diagnose or identify what **treatment** may be required.
- (c) Up to £5,000 towards the cost of an **external prosthesis** needed following an accident or surgery for a **medical condition**, providing:
 - you had cover with us at the time of the accident or surgery that led to the need for the prosthesis and have had continuous cover with us since; and
 - any claim for an **external prosthesis** is made within the 12 month period of cover following the date of the accident.If you want to claim this benefit please call our Claims Helpline so we can explain what to do next. Please remember to ask the provider of your **external prosthesis** for full receipts as we cannot pay claims without a receipt.
- (d) First reconstructive surgery to restore function or appearance after a **road** traffic accident, provided that:
 - we have covered you under this **policy** when the accident happened; and
 - it is done within 12 months of the date on which the **road** traffic accident occurred.

- (e) **In-patient** rehabilitation of up to 28 days when:
 - it is part of **treatment** of an acute condition that is covered by your **policy**; and
 - it is carried out by a **specialist** in rehabilitation; and
 - it is carried out in a recognised rehabilitation **hospital** or unit which we have written to confirming it is covered by the **policy**; and
 - it could not be carried out on a **day-patient** or **out-patient** basis or in another appropriate setting; and
 - the costs have been agreed by us before the rehabilitation begins.

4.2 What we do not pay for:

- (a) **Diagnostic tests** other than as detailed in 4.1(a) and 4.1(b).
- (b) Any **treatment** costs incurred as a result of engaging in or training for any sport for which you receive a salary or monetary reimbursement, including grants or sponsorship (unless you receive travel costs only).
- (c) Any **treatment** of an **injury** sustained at any time before the day you took out this **policy**.
- (d) Any drugs or dressings that:
 - you are given to take home following **in-patient**, **day-patient** or **out-patient treatment**; or
 - could be prescribed by your **GP** or bought without a prescription; or
 - are taken or administered when you attend a **hospital**, consulting room or clinic for **out-patient treatment**.
- (e) The costs of the purchase, hire or fitting of any external appliance, such as crutches, joints supports, braces, mechanical walking aids or other mobility aids, any external device such as **treatment** or monitoring devices, or any **external prosthesis**, except as detailed in 4.1(c).
- (f) The costs of any replacement teeth or hair, including wigs or hair transplants.
- (g) Cosmetic (aesthetic) surgery or **treatment**, or any **treatment** relating to previous cosmetic or reconstructive **treatment**.

- (h) Any **treatment** that is connected with the use of cosmetic (beauty) products or is needed as a result of using a cosmetic (beauty) product.
- (i) Any surgery or **treatment** required to receive an organ, donate an organ, **treatment** needed in preparation or as a result of a transplant, the cost of collecting donor organs, tissue or harvesting cells from a donor, or any related administration costs.
- (j) **Treatment** which arises from or is directly or indirectly caused by a deliberately self-inflicted injury or an attempt at suicide.
- (k) **Treatment** of any mental health conditions – except neuropsychiatric **treatment** needed as the result of a head **injury** – even when such illness is directly attributable to a **road** traffic accident.
- (l) Any charges which are incurred for social or domestic reasons or for reasons which are not directly connected with **treatment**.
- (m) Special nursing in **hospital** unless we have agreed beforehand that it is necessary and appropriate.
- (n) Any costs incurred as a consequence of **treatment** that is not **eligible** under your **policy**, including increased **treatment** costs.
- (o) Any **treatment** costs incurred as a result of your active involvement in criminal activity.

Will my policy cover me for dental treatment?

No, there is no cover for **treatment** provided by a dentist or for any dental procedures or orthodontics.

Will my policy cover me for new or unproven treatments?

Your **policy** only covers you for **treatment** and **surgical procedures** that are **conventional treatments**.

We define **conventional treatment** as **treatment** that:

- is established as best medical practice and is practised widely

within the **UK**; and

- is clinically appropriate in terms of necessity, type, frequency, extent, duration and the facility or location where the **treatment** is provided; and has either
- been shown to be safe and effective for the **treatment** of your **medical condition** through substantive peer reviewed clinical trials in published authoritative medical journals; or
- been approved by NICE (the National Institute for Health and Care Excellence) as a **treatment** which may be used in routine practice; or
- been proven to be effective and safe for the **treatment** of your **medical condition** through high quality clinical trial evidence (full criteria available on request).

Are there any additional requirements for drug treatments?

If the **treatment** is a drug, the drug must be:

- licensed for use by the European Medicines Agency or the Medicines and Healthcare products Regulatory Agency; and
- used according to that licence.

If you require new **treatments** you or your **specialist** must contact us at least 10 working days before **treatment**. This is so we can obtain full details of your **treatment**, support you with additional information and questions for your **specialist**, and advise you how much we will pay.

Are there any additional requirements for surgical treatments?

If the **treatment** is a **surgical procedure** it must also be listed and identified in our technical document, called the Schedule of Procedures and Fees, which includes all the **surgical procedures** we pay benefits for. If you would like a copy of the Schedule of Procedures and Fees please contact our Claims Helpline.

Are there any additional requirements for medical devices?

If the **treatment** involves a **medical device** (including surgical devices and implants), it must:

- be approved by current EU Medical Device Regulations; and
- have moderate or high quality evidence of safety and effectiveness from either:
 - systemic reviews of randomised controlled trials; or
 - clinical trial evidence with three years of follow-up data.

SECTION 5 – RECURRENT, CONTINUING AND LONG-TERM TREATMENT

5.1 We pay for **eligible**:

- (a) **Treatment** of a **medical condition** which is commonly known to respond quickly to **treatment**. When the **medical condition** has stabilised we will stop making payments.

5.2 What we do not pay for:

- (a) **Treatment** which is received more than twelve months after the date of the **road** traffic accident.
- (b) More than 180 days' **in-patient treatment** in respect of any **road** traffic accident.
- (c) Non-surgical **treatment** of a **medical condition** which does not respond quickly to **treatment** or which continues or recurs.
- (d) The monitoring of a **medical condition** once it has been stabilised.

SECTION 6 – WHERE YOU ARE COVERED FOR TREATMENT

Which hospitals, day-patient units and other facilities do I have cover for?

You are covered for **treatment** in any **hospital, day-patient unit** or **scanning centre** in the **United Kingdom** that we recognise for the **treatment** you need and subject to any limits of this **policy**.

6.1 We pay for **eligible**:

- (a) Charges made by, or incurred in, a **hospital, day-patient unit** or **scanning centre** in the **UK**.
- (b) Charges made by, or incurred in a private **hospital** or any NHS hospital for ITU (Intensive Therapy Unit) **treatment** only when:
 - you are already having **eligible** private **treatment**; and
 - the ITU **treatment** immediately follows **eligible** private **treatment**; and
 - you or your next of kin have asked for the ITU **treatment** to be received privately; and
 - we have agreed the costs before you start the intensive care **treatment**.

6.2 What we do not pay for:

- (a) **Treatment** in an accident and emergency department of any **hospital** (except the cash benefit).
- (b) Immediate **treatment** needed in the intensive therapy unit of a **hospital** (except the cash benefit).
- (c) Any **treatment** received outside the **United Kingdom**.
- (d) Ancillary charges such as, but not limited to, newspapers, telephone calls and visitors' meals, incurred in a **hospital, day-patient unit** or **scanning centre**.
- (e) Transportation by taxi.

SECTION 7 – WHO WE PAY FOR TREATMENT

Your Accident Healthcare cover provides benefit for **eligible treatment** provided by **specialists, complementary practitioners** and **clinical practitioners**. (You will find our definitions of **specialist, complementary practitioner** and **clinical practitioner** in the glossary on [pages 3 to 5](#).)

How do I find out whether the person I want to see for treatment is recognised?

You need to ring us before receiving any **treatment**. This will allow us to check our database and confirm whether the person you have been referred to is **eligible** for benefit.

What services provided by specialists, complementary practitioners and clinical practitioners are eligible for benefit?

Specialists' fees for consultations, **diagnostic tests, treatment** in **hospital** and **surgical procedures** are **eligible** for benefit, subject to any limits of this **policy**.

Clinical practitioners' (with the exception of physiotherapists') charges for **treatment** are only covered if you are referred to them by your **specialist** for **eligible treatment**.

Complementary practitioners' and physiotherapists' charges for **treatment** are covered when you are referred to them by your **GP** for **eligible treatment** subject to any limits of this **policy**. We would then pay up to an overall maximum of ten sessions of **treatment** within 12 months from the date of your **road** traffic accident with a physiotherapist and/or a **complementary practitioner**. If you require more than the overall maximum for your cover level, such **treatment** must be under the control of a **specialist**. The **specialist** will then be able to establish whether the **treatment** you are receiving is the most appropriate form of **treatment** for your particular **medical condition**.

Will treatment charges be met in full?

We publish a document called the Schedule of Procedures and Fees which sets out what we will pay **specialists, complementary practitioners** and **clinical practitioners** for the services they provide to our customers. We will pay **eligible** fees in full with a **specialist, complementary practitioner** or **clinical practitioner**. Please visit <https://codes.bupa.co.uk/procedures> to review the Bupa Schedule of Procedures and Fees. This list is subject to change.

We strongly advise that you call us before you receive **treatment**, to confirm whether we will pay the **treatment** charges in full for the person you are planning to see. If we will not pay the fee in full we will tell you how much we will pay towards the cost of your **treatment**. We have identified **specialists, complementary practitioners** and **clinical practitioners** whose fees we pay in full, and these make up the majority of all **specialists** and practitioners.

What if an anaesthetist becomes involved in my treatment?

Before receiving surgical **treatment** it is advisable to establish which anaesthetist your **specialist** intends to use. This will mean we can tell you if that anaesthetist is one who we pay in full or, if this is not the case, what fee we will pay (as set out in the Schedule of Procedures and Fees). However, if you don't know when you call us which anaesthetist your **specialist** intends to use we will make every effort to notify you whether they commonly work with an anaesthetist who we do not pay in full.

7.1 We pay for **eligible**:

- (a) **Treatment** charges made by a **specialist** or **complementary practitioner** only when you are referred to one by a **GP** or dentist.
- (b) **Treatment** charges made by a **clinical practitioner** when you are referred to one by the treating **specialist**. However if your **GP** refers you for **treatment** with a physiotherapist and/or a **complementary practitioner** we will pay up to the levels detailed in the **benefits table**. If more than the overall

maximum number of sessions of **treatment** is required, further **treatment** must be referred by and be under the personal control of a **specialist**.

- (c) **Treatment** charges made at the level set out in our Schedule of Procedures and Fees or at the amount charged if lower than that level.

7.2 What we do not pay for:

- (a) Charges made by **specialists** or **complementary practitioners** unless you have been referred to one by a **GP** or dentist.
- (b) Any drugs or **treatment** when the person who refers you is a member of your family, or if the person who is treating you is a member of your family.
- (c) Charges made by anyone other than a **specialist, complementary practitioner** or **clinical practitioner** including charges for primary care services, such as any services of a **GP** or dentist.
- (d) Charges made by a **clinical practitioner** unless referred by a **specialist**. We will pay for **GP** referred physiotherapy as set out in the **benefits table** and 7.1(b).
- (e) **Treatment** charges made when they are above the level set out in our Schedule of Procedures and Fees.
- (f) **Treatment** charges made by a **specialist** or **complementary practitioner** or **clinical practitioner** (not referred to in 7.1(c)) who we have identified to you as someone whose fees we will pay in full if, without our prior agreement, they charge significantly more than their usual amount for **treatment**.
- (g) Any charges made for written reports or any other administrative costs.

SECTION 8 – ADDITIONAL INFORMATION

Where can I find more information about the quality and cost of private treatment?

You can find independent information about the quality and cost of private **treatment** available from doctors and hospitals on the Private Healthcare Information Network www.phin.org.uk

What we do with your personal data

Here is a summary of the data privacy policy that you can find on our websites at: saga.co.uk/privacy-policy and bupa.co.uk/privacy. If you do not have access to the internet and would like a paper copy, please write to Bupa Data Protection, Willow House, 4 Pine Trees, Chertsey Lane, Staines-upon-Thames, Middlesex TW18 3DZ. If you have any questions about how we handle your information, please contact us at dataprotection@bupa.com

Please make sure that everyone covered by this **policy** reads this summary and the full data privacy policies on our websites. If you would like a copy of either of our full policies call us on the contact numbers contained in this Policy Book and we'll send you one.

We want to reassure you we never sell your personal information to third parties. We will only use your information in ways we are allowed to by law, which includes collecting only as much information as we need. We will get your consent to process information such as your medical information when it's necessary to do so.

Where use of your information by us relies on your consent you can withdraw your consent, but if you do we may not be able to process your claims or manage your **policy** properly.

Much of the personal information Saga and the underwriter of your **policy**, Bupa Insurance Limited, hold about you is obtained when you apply for a Saga Accident Healthcare **policy**, and when a claim is made. This may include medical information we obtain from medical practitioners and other health consultants. We may also obtain information from third party suppliers of information such as credit reference agencies.

Saga will keep your information securely and use it to provide the highest standard of service in the administration of this **policy** and other products that you hold with Saga. Saga will also use it for audit, underwriting and pricing purposes and, in certain circumstances, claims mediation and market research, and to maintain management information for business analysis.

Bupa Insurance Limited will handle your information on a confidential basis and use it to process claims, for underwriting and pricing purposes, to maintain management information for business analysis, for research and to find out more about you. They will disclose your information, including your health information, to Saga only to the extent necessary for the purposes of audit, managing your **policy** and claims. Saga may also use the health information shared with them for other purposes but they will only do so in line with **Data Protection Legislation**.

In the event of a claim, Bupa Insurance Limited may have to give some information about you and/or your **spouse/partner** to those involved in your/their **treatment** or care, but this will be done confidentially. With your/their consent Bupa Insurance Limited may also disclose information to a representative you/your **spouse/partner** have chosen.

The fact that a **spouse/partner** has claimed (but not the full details of the claim) may be disclosed to the **policyholder** in order for Saga to properly manage the **policy**.

You should be aware that Saga and Bupa Insurance Limited do not supply any information about you to anyone unless we believe it is lawful to do so, or when we are requested to do so by you and have your consent in advance. We may, at our discretion, appoint third parties to service the **policy** and claims, including other companies based outside the European Economic Area, and which may be in a country that does not offer the same level of data protection as within the European Economic Area. We will always use every reasonable effort to ensure sufficient protections are in place to safeguard your personal information.

Marketing policy

Saga may share your personal information, and your medical data, with other Saga Group (Saga plc and its subsidiaries) companies. Saga uses the data they collect from you, including special categories of personal data, to contact you and personalise their communication. Saga and Bupa Insurance Limited also use it for administrative purposes to provide the service you requested and for preparing quotations. If Saga has obtained your permission to do so, they will also contact you by post, telephone, email or other means to tell you about offers, products and services that may be of interest to you. At any time you can opt out of receiving such information, revise the products you would like to hear about or change the method they use to communicate with you. You can update these preferences by calling 0330 018 1587. For further information about how the Saga Group uses your personal information, please visit www.saga.co.uk/privacy-policy or contact the Saga Group Data Protection Officer by email: data.protection@saga.co.uk or post: Saga Services Limited, 3 Pancras Square, London N1C 4AG.

Obtaining a copy of the information we hold about you

You have rights to access your information and to ask for it to be corrected, erased and for its use to be restricted. You also have the right to object to your information being used; to ask for it to be transferred; to withdraw any permission you have given regarding its use; and the right for it not to be subjected to automated decisions which produce legal effects on you. If you wish to access your personal information, or have any questions, comments, complaints or any other concerns about the way in which we process information about you, including to exercise any of your rights, please contact:

The Data Protection Officer at Saga Group via 0330 018 1587 (for Saga). Alternatively you can write to Saga at: Saga Services Limited, 3 Pancras Square, London N1C 4AG or contact The Data Protection team at Bupa via dataprotection@bupa.com. You can also use this email address to contact Bupa's Data Protection Officer. Alternatively you can write to Bupa at: Bupa Data Protection, Willow House, 4 Pine Trees, Chertsey Lane, Staines-upon-Thames,

Middlesex TW18 3DZ. You also have a right to make a complaint to your local privacy supervisory authority.

Our main office is in the UK, where the local supervisory authority is the Information Commissioner, who can be contacted at: Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire SK9 5AF, United Kingdom.

Phone: 0303 123 1113 (local rate).

Crime prevention and detection and legal requirements

Saga and Bupa Insurance Limited are required by law, in certain circumstances, to disclose information to law enforcement agencies about suspicions of fraudulent claims and other crime. Saga and Bupa Insurance Limited will disclose information to third parties including other insurers for the purposes of prevention or investigation of crime including reasonable suspicion about fraud or otherwise improper claims. This may involve adding non-medical information to a database that will be accessible by other insurers and law enforcement agencies. Additionally, Bupa Insurance Limited will investigate possible medical malpractice and is obliged to notify the General Medical Council or other relevant regulatory body about any issue where they have reason to believe a medical practitioner's fitness to practise may be impaired.

Keeping information

Saga and Bupa Insurance Limited will hold your personal information in accordance with the principles of the General Data Protection Regulation (and associated legislation) and in line with our Data Retention Policies. We are entitled and permitted by law and regulation to retain certain types of data for a reasonable period of time. We will then dispose of your information in a responsible way.

What regulatory protection do I have?

The Financial Conduct Authority

Saga Services Limited is authorised and regulated by the Financial Conduct Authority. Bupa Insurance Limited is authorised by the

Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Bupa Insurance Services Limited is authorised and regulated by the Financial Conduct Authority.

Saga Services Limited Financial Services Register Number is 311557. Bupa Insurance Limited Financial Services Register Number is 203332. Bupa Insurance Services Limited Financial Services Register Number is 312526.

The FCA have set out rules which regulated the sale and administration of general insurance which all of the above parties must follow when they deal with you.

The Financial Services Compensation Scheme (FSCS)

We are also participants in the Financial Services Compensation Scheme established under the Financial Services and Markets Act 2000. The scheme is administered by the Financial Services Compensation Scheme Limited (FSCS). The scheme may act if it decides that an insurance company is in such serious financial difficulties that it may not be able to honour its contracts of insurance. The scheme may assist by providing financial assistance to the insurer concerned, by transferring policies to another insurer, or by paying compensation to eligible policyholders.

Further information about the operation of the scheme is available on the FSCS website: fscs.org.uk.

COMPLAINTS

Not happy with our service?

We hope you're happy with the service you've received so far and that this continues. However, if you do have a complaint about our services, the most important thing for us is to help you resolve this as quickly and easily as possible. We'll do all we can to address your concerns when they are first raised to us, but if we can't do this, we'll contact you within five working days to acknowledge your complaint and explain the next steps. Letting us know you're unhappy with our service gives us the opportunity to put things right for you and improve our service for everybody.

No matter how you decide to communicate your concerns, we'll listen.

To help us resolve your complaint, we'll need the following:

- Your name and policy details
- A contact telephone number
- A description of your complaint
- Any relevant information relating to your complaint that we may not have already seen.

For queries and complaints not related to a claim

If you have a query or complaint about private health insurance that is not regarding a claim, you can call Saga on 0330 018 0796 or write to Saga at:

The Customer Relations Department
Saga Services Limited
PO Box 253
Seaham DO SR7 1BN

Email: services.customer-relations@saga.co.uk

How do I complain to Bupa?

If you have a complaint, please follow the below guidance and our team will help as soon as possible.

Talk to us: Webchat is open between 9am-5pm Monday to Friday.

Call us: 0345 606 6739 - We may record or monitor our calls.

Our opening hours are Monday to Friday 8am to 6pm.

Email us: customerrelations@bupa.com.

Please be aware that information you send to this email address may not be secure unless you send us your email through Egress.

For more information and to sign up for a free Egress account, go to <https://switch.egress.com>. You will not be charged for sending secure emails to a Bupa email address using the Egress service.

For people with hearing or speech difficulties you can use the Relay UK service on your smartphone or textphone. For further information visit www.relayuk.bt.com. We also offer documents in Braille, large print or audio.

Write to us: Customer Relations, Bupa, Bupa Place, 102 The Quays, Salford M50 3SP

For queries and complaints related to a claim

We will generally issue our final response within eight weeks from when you originally contacted us. However, we will respond sooner than this, if we are able.

Taking your complaint further

If we cannot respond fully to your complaint within eight weeks, or you are unhappy with our final response, you can refer your complaint to the Financial Ombudsman Service for an independent review.

The Financial Ombudsman Service resolves disputes in an independent and fair way and can be contacted at:

The Financial Ombudsman Service,
Exchange Tower, Harbour Exchange Square,
London E14 9SR.

Email: complaint.info@financial-ombudsman.org.uk

Telephone: **0300 123 9123** or **0800 023 4567**

Important note

The Financial Ombudsman Service will only consider your complaint if you have already given us the opportunity to resolve the matter. However, if we have not provided a final response within eight weeks you can refer your complaint straight to the Financial Ombudsman Service.

If you follow this complaint procedure, it does not affect your legal rights.

Legal rights and responsibilities

8.1 Your rights and responsibilities

- (a) You must make sure that whenever you are required to give any information, all the information you give Bupa Insurance Limited and Saga is sufficiently true, accurate and complete so as to give us a fair presentation of the risk we are taking on. If we discover later it is not then we can cancel the **policy** or apply different terms of cover in line with the terms we would have applied had the information been presented to us fairly in the first place.
- (b) You and we are free to choose the law that applies to this **policy**. In the absence of an agreement to the contrary, the law of England and Wales will apply.
- (c) Only the **policyholder** and we have legal rights under this **policy** and it is not intended that any clause or term of this **policy** should be enforceable, by virtue of the Contract (Rights of Third Parties) Act 1999, by any other person including a **spouse/partner**.
- (d) As your Accident Healthcare benefits form an integral part of your Saga Car Insurance/Motorhome Insurance **policy** you are unable to cancel your Accident Healthcare benefits alone. If you wish to cancel your Accident Healthcare benefits, either during the 14 day cooling-off period or after, you must cancel your Saga Car Insurance/Saga Motorhome Insurance **policy**, including the Accident Healthcare benefit,

in accordance with paragraphs 5 or 6 (as applicable) of the 'General conditions applicable to all of the policy' section of the Saga Car Insurance/Saga Motorhome Insurance Policy Book). You can then reapply for a Saga Car Insurance/Saga Motorhome Insurance **policy** without the Accident Healthcare benefits.

- (e) If you require **eligible treatment** as the result of a **road** traffic accident which occurred prior to you cancelling the Saga Car Insurance/Saga Motorhome Insurance **policy**, you are **eligible** to receive **treatment** for up to 12 months after the date of the **road** traffic accident, regardless of whether the Saga Car Insurance/Saga Motorhome Insurance **policy** has been cancelled.
- (f) We, or any person or company that we nominate, have subrogated rights of recovery of the **policyholder** or any **spouse/partner** in the event of a claim. This means that we will assume the rights of **policyholders** or any **spouse/partner** to recover any amount to which they are entitled, for example from someone who caused your injury or another insurer, and which we have already covered under this **policy**. The **policyholder** must provide any reasonable assistance we may need to enable us to exercise these subrogated rights and must not do anything to prejudice such rights at any time. We reserve the right to deduct from any claims payment otherwise due to you or an amount equivalent to the amount you could recover from a third party. We may use external legal, or other, advisers to help us do this.

8.2 Saga and Bupa Insurance Limited's rights and responsibilities

- (a) Under the Accident Healthcare section of your **policy**, we will pay for **eligible treatment** costs incurred for a period of 12 months from the date of the **road** traffic accident provided the premium has been paid for the period when the **road** traffic accident occurred.
- (b) We and other service providers will not provide cover or pay claims under this **policy** if doing so would expose us or

the service provider to a breach of international economic sanctions, laws or regulations, including but not limited to those provided for by the European Union, **United Kingdom**, United States of America or under a United Nations resolution. We will do this even if you have permission from a relevant authority to continue cover or receive payments under a **policy**. If a potential breach is discovered, where possible we will advise you in writing as soon as we can. If you know that you or your **spouse/partner** are on a sanctions list or subject to similar restrictions you must let us know within seven days of finding this out.

SECTION 9 – BENEFITS TABLE

The table that follows shows the benefits available to you for the cost of **treatment**. These benefits are explained fully in the preceding pages of this document. You must read this table in conjunction with the rest of the terms of your Accident Healthcare cover.

This section of your **policy** provides cover for **treatment** made necessary as a direct result of **injury** sustained in a **road** traffic accident in the **United Kingdom** involving a moving motor vehicle.

The cover does not include **treatment** needed in the accident and emergency department of the **hospital**, or any immediate **treatment** needed in an intensive therapy unit (except the cash benefit).

Please make sure you call the Saga Motor Insurance Claims Line prior to **treatment** so that Bupa Insurance Limited can contact you to confirm the extent of your cover and any limitations that may apply.

Benefits	Accident Healthcare benefit level	Where can I find more information?
Accident Healthcare benefit limit: We will pay up to the maximum shown for each person covered by the policy for the 12 month period following the date of the accident.	£1,000,000	
In-patient and day-patient treatment		
1. Hospital charges: including charges for accommodation, diagnostic tests , operating theatre charges, nursing care, drugs and dressings, physiotherapy, and surgical appliances used by the specialist during surgery.	Paid in full in any hospital or day-patient unit within your Accident Healthcare benefit limit	Page 12
2. Specialists' fees (Surgeons', anaesthetists' and physicians').	Covered within your Accident Healthcare benefit limit	Pages 12-14
3. In-patient consultations – benefit for a consultation with a second specialist arranged by the treating specialist .	Covered within your Accident Healthcare benefit limit	Pages 12-14
Out-patient treatment		
4. Surgical procedures.	Covered within your Accident Healthcare benefit limit	Pages 9-14
5. Specialist consultations including remote consultations by telephone or video link instead of you going to an out-patient clinic.	Covered within your Accident Healthcare benefit limit	Pages 12-14

Benefits	Benefit level	Where can I find more information?
Out-patient treatment (continued)		
6. Clinical practitioner charges (including physiotherapy).	Covered within your Accident Healthcare benefit limit.	Pages 12-14
7. Complementary practitioner charges.	We will pay for up to an overall maximum of ten sessions of treatment within 12 months from the date of your road traffic accident, for GP referred physiotherapy and/ or complementary practitioner treatment	
8. Diagnostic tests performed by your specialist or on specialist referral.	Paid in full within your Accident Healthcare benefit limit	Pages 12-13
9. Computerised tomography (CT), magnetic resonance imaging (MRI) and positron emission tomography (PET).	Paid in full within your Accident Healthcare benefit limit	Page 12
Other benefits		
10. Ambulance transport – when you are receiving private in-patient or day-patient treatment and it is medically necessary to use a road ambulance to transport you between a hospital and another medical facility.	Paid in full within your Accident Healthcare benefit limit	

Benefits	Benefit level	Where can I find more information?
<p>11. NHS cash benefit. This benefit is paid for each night you receive free treatment under the NHS when all of the following applies:</p> <p>(i) You are admitted for in-patient treatment before midnight for treatment of an injury caused by a road traffic accident</p> <p>(ii) The treatment you receive under the NHS would have been eligible for benefit privately under this policy.</p> <p>(This benefit is also paid for each night you receive treatment in an accident and emergency ward or intensive therapy unit.)</p>	<p>£100 a night up to £2,000 for each accident</p>	<p>Page 12</p>
<p>12. External prosthesis</p>	<p>Up to £5,000 for the lifetime of your Accident Healthcare. We will pay this benefit towards the cost of providing an external prosthesis.</p>	<p>Pages 9-10</p>

NOTES

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HELPLINES

CUSTOMER SERVICE

**For questions about your Accident
Healthcare benefits**

from the UK **0800 056 9167**

Monday to Friday 8.30am to 5.30pm,
Saturday 8.30am to 1pm.

HOW TO MAKE A CLAIM

For claims

from the UK **0800 027 1339**

from abroad **+44 1303 772 154**

24 hours a day, 7 days a week.

Please have your policy number to hand when calling.

If you have a hearing or speech impairment, you can also contact us by emailing dda@saga.co.uk

Saga Services Limited has arranged for its Accident Healthcare insurance to be underwritten by Bupa Insurance Limited. Registered office: 1 Angel Court, London EC2R 7HJ. Registered in England and Wales No. 3956433. Financial Services Register No. 203332.

Bupa Insurance Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority.

Saga Services Limited is a wholly owned subsidiary of Saga plc and is registered in England and Wales (Company No. 732602). Registered Office: 3 Pancras Square, London N1C 4AG. Authorised and regulated by the Financial Conduct Authority.

