



Health Cash Benefits Cover claim form

1	Membership details	
	policyholder's full name	
	policyholder's address	
		Postcode
	Date of birth	D D M M Y Y Y Y
	Membership number	
	Phone number	
	Email address	
2	Patient's details	
	Patient's full name If different from the lead member's name above	
	Date of birth	D D M M Y Y Y Y

AXA PPP healthcare is a trading name used by AXA PPP healthcare Limited, AXA PPP healthcare Administration Services Limited and AXA PPP Administration Services Limited. If you have an insured healthcare plan, your insurance plan is underwritten by AXA PPP healthcare Limited (Registered in England no. 3148119). Should you be part of a Trust arrangement, your plan will be administered by either AXA PPP healthcare Administration Services Limited (Registered in England no. 3429917) or AXA PPP Administration Services Limited (Registered in England no. 05961472). All companies have their registered office at 5 Old Broad Street, London EC2N 1AD.

AXA PPP healthcare Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority with reference number 202947. Registered Office: 5 Old Broad Street, London EC2N 1AD, United Kingdom. We may record and/or monitor calls for quality assurance, training and as a record of our conversation.

3 Benefits claimed

 > Please tick the below benefits that you would like to claim for: Dental care Dental accident Dental emergency Optical care Health screening > Please complete a seperate line in the table below for each benefit, enetering the name of the person making a claim, the type of treatment, date and the amount paid per receipt. > Please send us all relevant invoices and reciepts for consultation and associated charges with the dates on them. 					
	Name of person claiming	Benefit being claimed	Date	Amount being claimed	

> Please note, for treatment that continues over an extended period then claims need to be sent periodically, at intervals not more than 13 weeks.

4 Declaration and consent

:	Make sure that you read and understand the 'About your information and medical reports' section at the end of this form before you sign.
	I wish to claim benefit and I declare that all the information I have given on this
	form is correct to the best of my knowledge.
	I consent to AXA PPP healthcare Limited:
	a) requesting medical and health information from the patient's healthcare practitioner and/or hospital
	 b) the healthcare practitioner and/or hospital providing that health information in reports, or by copies of my health records and medical information, to AXA PPP healthcare Limited c) the healthcare practitioner and/or hospital involved in the patient's care
	reviewing medical information and discharge arrangements with AXA PPP healthcare Limited for the following reasons: (Please tick yes or no for each of the following)
	■ to assess and subsequently review my claim and apply policy terms/exclusions*
	to audit healthcare practitioner and hospital records to review their
	performance and ensure that AXA is being billed correctly Yes No
	*if you tick no we may not be able to assess your claim.
	> If the patient is under 16, their parent or guardian must complete this section.
Name	
	□ I am the patient □ I am the guardian or parent
Signature	
Date	
	 I wish to see any report from the medical practitioner and/or hospital before it's sent to AXA PPP healthcare Limited. We may only keep full copies of information we get from your medical records for three months after we've reviewed your claim. We'll then delete them from our system. This means that if you later claim for a different medical condition, we may need to request them again.

Help us process your claim quickly

Have you:

- answered all questions
- signed the form
- enclosed all relevant reciepts/invoices along with this form

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Where to send your form

You can mail to AXA PPP healthcare Limited Saga Personal Advisory Team Phillips House, Crescent Road Tunbridge Wells, Kent TN1 2PL, UK

important mior m	
	> Please remove this 'Important information' page and keep it for your information.
Data protection	■We'll handle your personal data in accordance with the Data Protection Legislation.
	You are entitled to see information we hold about you.
	You can write to us to ask for a copy of any personal information about you in any independent reports we request.
	If you would like a copy of a medical report that your medical practitioner has sent to us, it will be quickest if you contact them direct because we will have to get their permission to release it to you.
	We process claims outside the European Economic Area.
	If any medical records we receive show that a medical condition should have been declared on your plan application, we may change the terms of your plan.
	■ For our full Privacy Policy please see axappphealthcare.co.uk/privacynotice.
Access to Medical Reports Act 1988	It's important that you understand your rights under the Access to Medical Reports Act 1988 before you agree to us requesting a report from the GP or hospital treating you.
	Medical reports
	If we ask for a medical report:
	 You don't have to give your consent. If you don't give your consent we cannot request the medical report so may not be able to process your claim.
	We will contact you to tell you the date we requested it.
	You can see the report before it is sent to us. If you want to do this, you must contact the medical practitioner within 21 days of the date of our request. Please tick the box in section A2.
	If you don't tick the box but then change your mind, you can contact your medical practitioner and ask to see the report. You have 21 days from the date of your initial request to see it.
	If you disagree with the information in the report, you can ask the medical practitioner to change it. If the medical practitioner does not agree with you, they will ask you to write a statement to go with the report that is sent to us.
	 You can ask the medical practitioner to see the report at any time within six months of the medical practitioner sending it to us.
	 Your medical practitioner may charge you for a copy of the report. This charge is not covered by your scheme.
	 Your medical practitioner does not have to show you parts of the report if they think it could cause harm to your physical or mental health, or if it shows future plans for your care that the medical practitioner doesn't want you to see.
	 If the report includes information about someone else, the medical practitioner will not show you that part of the report.
	These rights do not relate to reports from practitioners who are not treating you and who we might ask for an opinion.

Important information continued

Auditing and
prevention of crimeWe may audit the medical records of medical practitioners and hospitals to:• prevent and detect crime, particularly fraud;
• review the performance of specialists;
• ensure that we are being correctly billed for their services.

Audits may be part of a programme or in response to a specific event.

Sharing information

We may need to share information with third parties, including medical experts, other insurers, the NHS Counter Fraud Security Management Service and the General Dental Council. In certain circumstances, we are required by law to disclose information to law enforcement agencies about suspicions of fraudulent claims and other crimes. This may involve adding non-medical information to databases that can be viewed by other insurers and law enforcement agencies. We are required to tell the General Medical Council, or other relevant regulatory body, about any issue where we have reason to doubt a medical provider's fitness to practise.

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