



Your table of cover

Mercia Health Benefits Options with Funeral Grant

Please read this table of cover alongside your membership guide, welcome letter (or email) and premium table for the full terms of your cover.

1. Table of benefits and limits

This table of **benefits** and **benefit limits** outline what is available on your **cash plan**. Simply refer to the **benefits** listed down the side of the table, then across each row to find out the amount of cash you can claim for from your chosen **membership level** per **benefit year** (Note: Optical **benefit** has a two year **benefit** limit). You can change your **membership level** once in any **benefit year**, should your **cash plan** allow. Please refer to section 2.9 of your **membership guide** for more information.

Definitions of words and phrases highlighted in **bold italic** can be found in section 3 from page 6 onward.

Pre-existing conditions are covered for all **benefits**. You will be required to provide any information or proof to support your claim if we make a reasonable request for you to do so.

Membership type	Individual*		Family*		Eligibility	Cash back % or instance limit
Membership level	Level 1	Level 2	Level 3	Level 4		
Dental	up to £93	up to £93	up to £104	up to £175	main member and partner: benefit limit is per member covered child dependants : all child dependants covered collectively share benefit limit	100%
Optical Two year benefit	up to £105	up to £93	up to £104	up to £115	main member and partner: benefit limit is per member covered child dependants : all child dependants covered collectively share benefit limit	100%
Therapies Includes physiotherapy, osteopathy, chiropractic, acupuncture, homeopathy and reflexology	up to £470	up to £470	up to £580	up to £700	main member and partner: benefit limit is per member covered child dependants : all child dependants covered collectively share benefit limit	60%
Chiropody/podiatry	up to £70	up to £70	up to £82	up to £93	main member and partner: benefit limit is per member covered child dependants : all child dependants covered collectively share benefit limit	60%
Consultations	up to £470	up to £470	up to £580	up to £700	main member and partner: benefit limit is per member covered child dependants : all child dependants covered collectively share benefit limit	60%
Medical devices	up to £100	up to £100	up to £150	up to £200	main member and partner: benefit limit is per member covered child dependants : all child dependants covered collectively share benefit limit	60%
Heath screening	up to £120	up to £120	up to £180	up to £222	main member and partner: benefit limit is per member covered	60%
Home help	up to £470	up to £470	up to £580	up to £700	main member only	50%
Birth and adoption	£350	£350	£465	£585	main member only. One year qualifying period applies	per child born/adopted
Personal accident cover	up to £12,000				main member and partner (if covered)	per event
Bupa Cash Plan Helpline	✓	✓	✓	✓	all members aged 16 and over	not applicable
Funeral grant	£1,000	£1,000	£1,000	£1,000	main member only	payable upon death
Hospital in-patient (nights)						

*Individual membership is for the **main member** only. Family membership is for the **main member**, their **partner** and up to four **child dependants**.

Membership type	Individual*		Family*		Eligibility	Cash back % or instance limit
Membership level	Level 1	Level 2	Level 3	Level 4		
Main member	£38 per instance	£38 per instance	£50 per instance	£63 per instance	main member and partner : instance limit is per member covered child dependants : all child dependants covered collectively share benefit limit main member and partner joint admissions will count towards members' respective instance limits	up to 20 instances (nights) in total per benefit year
Partner	N/A	£38 per instance	£50 per instance	£63 per instance		
Main member and partner joint admission	N/A	£76 per instance	£100 per instance	£126 per instance		
Child dependants	N/A	£18 per instance	£23 per instance	£29 per instance		
Hospital day-case (days)						
Main member	£38 per instance	£38 per instance	£50 per instance	£63 per instance	main member and partner : instance limit is per member covered child dependants : all child dependants covered collectively share benefit limit main member and partner joint admissions will count towards members' respective instance limits	up to 20 instances (days) in total per benefit year
Partner	N/A	£38 per instance	£50 per instance	£63 per instance		
Child dependants	N/A	£18 per instance	£23 per instance	£29 per instance		

*Individual membership is for the **main member** only. Family membership is for the **main member**, their **partner** and up to four **child dependants**.

2. Benefit descriptions

In this section you'll find a description of the **benefits** listed in section 1 (table of benefits and limits). This will help you to understand what we mean by each of these **benefits**, what we'll/ we'll not pay cash back towards and any additional information we think you may need to get the most out of your **cash plan**.

Benefit	Benefit description
Acupuncture	We'll pay cash back towards treatment or services provided by an acupuncturist .
Birth and adoption	<p>We'll pay cash benefits for each new child born to or adopted by the main member, up to the amount set out for your membership level and subject to the one year qualifying period, as referenced in the qualifying periods section of your membership guide.</p> <p>Birth note: please enclose a full copy of the birth certificate (as issued by the registry office) with your claim form. For the main member to claim, their name must be on the birth certificate.</p> <p>Adoption note: please enclose an adoption certificate with your claim form. For the main member to claim, their name must be on the adoption certificate. The adoption benefit may not be claimed in respect of children aged 16 and over.</p>
Bupa Cash Plan Helpline	<p>Call the Bupa Cash Plan Helpline on 0345 600 4989†.</p> <p>This offers three options:</p> <ul style="list-style-type: none"> ▪ 24-hour access to health information and guidance on almost any health-related issue, ranging from symptom advice and travel vaccinations to first aid queries and lifestyle changes. A team of experienced, specially trained nurses are on hand to answer all your queries. This service is available 365 days a year to the main member and all named dependants aged 16 and over. Calls may be recorded and to maintain the quality of our service a nursing manager may monitor some calls always respecting the confidentiality of the call ▪ Legal advice and assistance on personal matters, through a third party legal advice service provider ▪ Counselling advice and assistance: confidential support through a telephone helpline, available to the main member and all named dependants aged 16 and over, which is operated by qualified counsellors so you get immediate emotional support for a range of problems you may be experiencing. The helpline is available 24 hours a day, 365 days a year. If you are experiencing something that's causing you stress or upset, our qualified counsellors will listen and will suggest ways to resolve the problem or point you in the right direction. Here are just some of the problems we can help with: <ul style="list-style-type: none"> - relationship worries - coping with change - difficulties at work - depression - anxiety - emotional problems - substance misuse - bereavement - stress <p>†Calls may be recorded and to maintain the quality of our service we may monitor some calls always respecting the confidentiality of the call. Our counsellors will discuss our confidentiality policy with you when you call.</p> <p>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</p> <p>We also offer documents in Braille, large print or audio.</p>
Chiropody/podiatry	<p>We'll pay cash back towards:</p> <ul style="list-style-type: none"> ▪ chiropody/podiatry treatment or services provided by a chiropodist/podiatrist ▪ any items recommended or prescribed by a chiropodist/podiatrist (excluding medication). <p>Note: for items that have been recommended or prescribed we require written confirmation from the chiropodist/podiatrist to be able to pay your claim. If those items are purchased over the internet, they must be provided by a UK, Channel Islands or Isle of Man based and registered company, and you must be invoiced in pounds sterling.</p> <p>We'll not pay cash back towards sundry items such as insoles that are not recommended or prescribed by a chiropodist/podiatrist.</p>
Chiropractic	We'll pay cash back towards treatment or services provided by a chiropractor .
Consultations	<p>We'll pay cash back towards:</p> <ul style="list-style-type: none"> ▪ consultations with a consultant ▪ consultations with a dietician or occupational therapist recognised by Bupa ▪ diagnostic tests or scans for conditions specifically linked with/related to fertility treatment. <p>We'll not pay cash back towards:</p> <ul style="list-style-type: none"> ▪ any radiologist's fees or appointments with a general practitioner (GP), even if a receipted cost is incurred, or consultations provided by a medical or dental professional that is not a consultant ▪ non-health related consultations.
Dental	<p>We'll pay cash back towards:</p> <ul style="list-style-type: none"> ▪ dental treatment provided by a dental professional ▪ home use materials purchased from a dental professional eg mouthguards. <p>We'll not pay cash back towards:</p> <ul style="list-style-type: none"> ▪ any medications (prescribed or non-prescribed). Medication prescribed by a dental professional is covered by the prescription benefit (if applicable to your cash plan) ▪ home use materials and kits purchased independently.
Funeral grant	<p>We'll pay funeral grants where, upon the death of the scheme's main member, proof of death has been provided and attested by a coroner, a mortician, a GP, a consultant or an otherwise recognised medical professional.</p> <p>We'll not pay funeral grants where:</p> <ul style="list-style-type: none"> ▪ death has been self-inflicted ▪ death has been caused by a result of gross negligence on the part of the deceased party. <p>Your Funeral Grant benefit as part of your cash plan is underwritten by a third party life insurer, details of which are set out below: The Funeral Grant benefit part of this policy is provided and administered by Aviva Life & Pensions UK Limited. Registered in England No. 3253947. Registered office: Aviva, Wellington Row, York YO90 1WR. Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Member of the Association of British Insurers. Firm Reference Number 185896. You can check this on the Financial Services Register by visiting https://register.fca.org.uk or by contacting the Financial Conduct Authority on 0800 111 6768.</p> <p>We recommend that you keep a copy of this document alongside any last will and testament you may have.</p>

Benefit	Benefit description
Health screening	We'll pay cash back towards health screenings or assessments carried out in a hospital or any health screening or assessment centre. We'll not pay cash back towards: <ul style="list-style-type: none"> online health assessments health screenings or assessments not carried out in a hospital or health screening or assessment centre.
Home help	For the main member only, we'll pay cash back towards home help services you require, if provided at your home address by local authority services, social services or an authorised agent of these bodies.
Homeopathy	We'll pay cash back towards treatment or services provided by a homeopath practitioner .
Hospital day-case	We'll pay cash benefits, up to 20 days per benefit year , for hospital day-case admissions for treatment or investigation, including where the member receives cosmetic or reconstructive surgery to restore their appearance after an accident, surgery for cancer or gender reassignment surgery arising from gender dysphoria . Note: the limit of 20 instances (nights/days) in total per benefit year is a combined limit with the hospital in-patient benefit . By instance, we mean each night a member is admitted as a hospital in-patient or each day a member is admitted as a hospital day-case . We'll not pay cash benefits for: <ul style="list-style-type: none"> cosmetic or reconstructive surgery undergone for cosmetic or psychological reasons a hospital attendance for casualty or emergency treatment, which does not require a formal admission to a hospital bed any admissions that are not classed as hospital day-case eg treatment not in a hospital, respite care, out-patient check-ups or out-patient scans claims made for laser eye surgery, which can be claimed under the optical benefit only (if applicable to your cash plan).
Hospital in-patient	We'll pay cash benefits for: <ul style="list-style-type: none"> up to 20 nights per benefit year for hospital in-patient admissions, including where the member receives cosmetic or reconstructive surgery to restore their appearance after an accident, surgery for cancer or gender reassignment surgery arising from gender dysphoria parental stays if the main member or their partner (if covered) stays overnight in hospital with a child dependant, under age 16, whilst the child receives hospital in-patient treatment. Note: there is a limit of up to 20 instances (nights) in total per benefit year . By instance, we mean each night a member is admitted as a hospital in-patient . We'll not pay cash benefits for: <ul style="list-style-type: none"> cosmetic or reconstructive surgery undergone for cosmetic or psychological reasons a hospital attendance for casualty or emergency treatment which does not require a formal admission to a hospital bed hospital in-patient treatment, which is not provided by and where the overall responsibility does not rest with a consultant hospital admissions arranged for social or domestic reasons the first 10 nights of a member's maternity hospital in-patient stay, by which we mean any hospital in-patient stay during which a member gives birth. Members can claim from the 11th night of their maternity hospital in-patient stay. geriatric care convalescence care or rehabilitation mental health or addictive conditions.
Medical devices	We'll pay cash back towards: <ul style="list-style-type: none"> medical devices that are considered a medical necessity by a GP, consultant, physiotherapist, osteopath, chiropractor, acupuncturist, chiropodist/podiatrist or hospital mastectomy wear and wigs needed as a result of treatment for cancer. Note: Any claim for this benefit (excluding mastectomy wear and wigs needed as a result of treatment for cancer) must be accompanied by a note from the relevant medical professional confirming that the device is a medical necessity. Where medical devices are purchased over the internet, they must be provided by a UK, Channel Islands or Isle of Man based and registered company, and you must be invoiced in pounds sterling.
Optical	We'll pay cash back towards: <ul style="list-style-type: none"> glasses with prescribed lenses, prescribed contact lenses and routine sight tests when provided by a qualified ophthalmic practitioner corrective laser eye treatment carried out by an ophthalmic surgeon who is a consultant. Note: Where prescribed glasses or contact lenses are purchased over the internet, they must be provided by a UK, Channel Islands or Isle of Man based and registered company, and you must be invoiced in pounds sterling. We'll not pay cash back towards items including (but not limited to) solutions, chains, cases.
Osteopathy	We'll pay cash back towards treatment or services provided by an osteopath .
Personal accident cover	If the main member (and/or partner if covered by your policy) suffers any of the bodily injuries listed in section 5.2 of your membership guide while covered under the policy, the personal accident insurer will pay the amount shown, up to an overall maximum of £12,000 per member , per event for each of you in respect of accidental bodily injury . Please refer to section 5 of your membership guide for the full terms and conditions associated with personal accident cover.
Physiotherapy	We'll pay cash back towards treatment or services provided by a physiotherapist .
Reflexology	We'll pay cash back towards treatment or services provided by a reflexologist .

3. Definitions

Some of the words we use in this table of cover have specific meanings. In this section you'll find a definition of the terms used in ***bold italic*** throughout. This will help you to understand what we mean when we use these terms.

Defined term	Definition
<i>Accident/accidental</i>	Means a sudden unforeseen and fortuitous identifiable <i>event</i> , or unavoidable exposure to severe weather. The word accidental shall be construed accordingly.
<i>Acupuncturist</i>	Means an acupuncturist, <i>recognised by Bupa</i> or registered as a Member or Fellow of the British Acupuncture Council (MBAcC or FBACc), British Medical Acupuncture Society (BMAS), or Acupuncture Association of Chartered Physiotherapists (AACP), at the time you receive your treatment. You can contact the organisations on www.aacp.org.uk (AACP), www.medical-acupuncture.co.uk (BMAS) or www.acupuncture.org.uk (MBAcC) to see if the practitioner is registered.
<i>Agreement</i>	Means the agreement between <i>Bupa</i> and the <i>main member</i> or the <i>sponsor</i> which provides the terms of your cover (please see your <i>membership guide</i> for the definition specific to your policy).
<i>Benefit</i>	Means each of the benefits set out in this table of cover, to which you are entitled as a <i>member</i> of the policy.
<i>Benefit limit</i>	Means the maximum amount that we will pay for each <i>benefit</i> of the <i>cash plan</i> during each <i>benefit year</i> . You can find the benefit limits for each <i>benefit</i> on this table of cover. For the optical <i>benefit</i> only, the benefit limit applies for a period of two <i>benefit years</i> , meaning the limit will refresh at the start of every other <i>benefit year</i> .
<i>Benefit year</i>	Means a 12 month period starting on 1 January. This is applicable to all <i>members</i> .
<i>Bodily injury</i>	Means an injury to the <i>main member</i> (and/or <i>partner</i> if covered by your policy) which solely and independently of any other cause results, within 24 months of the date of the <i>accident</i> , in your (and/or your <i>partner's</i> if covered by your policy) death, permanent disability (as listed in section 5.2 of your <i>membership guide</i>) or fracture or break of a specified bone or bones.
<i>Bupa</i>	Means Bupa Insurance Limited, being the company that provides the insurance cover. Registered in England and Wales No. 3956433. Registered office: 1 Angel Court, London EC2R 7HJ. Bupa may act through Bupa Insurance Services Limited, and the term <i>Bupa</i> may also refer to other companies in the Bupa group, where indicated in the <i>agreement</i> .
<i>Cash plan</i>	Means the <i>benefits</i> we provide, as shown on this table of cover, subject to the terms and conditions of the <i>agreement</i> .
<i>Child dependant</i>	Means any child of yours or your <i>partner's</i> , including any child for whom you or your <i>partner</i> is a legal guardian or foster parent. See section 2.2 of your <i>membership guide</i> for more details.
<i>Chiropodist</i>	Means a person, <i>recognised by Bupa</i> or registered as a chiropodist with the Health and Care Professions Council (HCPC), at the time you receive your treatment. You can contact the HCPC on www.hcpc-uk.org to see if the practitioner is registered. The HCPC is governed by the Professional Standards Authority (PSA).
<i>Chiropractor</i>	Means a chiropractor, <i>recognised by Bupa</i> or registered as a member of the General Chiropractic Council (GCC), at the time you receive your treatment. You can contact the GCC on www.gcc-uk.org to see if the practitioner is registered. The GCC is governed by the Professional Standards Authority (PSA).
<i>Consultant</i>	Means a specialist licensed and registered with the General Medical Council (GMC) or General Dental Council (GDC). You can contact the GMC on www.gmc-uk.org or the GDC on www.gdc-uk.org to see if the consultant is registered. There is a requirement for a consultant to hold a license from 18 November 2009 in addition to the GMC registration. The licence is managed by the GMC.
<i>Consultation</i>	Means a meeting with a <i>consultant</i> to assess your health.
<i>Counsellor</i>	Means a counsellor employed or <i>recognised by Bupa</i> and registered with the British Psychological Society (BPS), the British Association for Counselling and Psychotherapy (BACP) or the UK Council for Psychotherapists (UKCP). You can contact the BPS on beta.bps.org.uk/about-us/contact-us , BACP on www.bacp.co.uk/contact/ or UKCP on www.psychotherapy.org.uk/contact-us/
<i>Dental professional</i>	Means anyone that is registered with the General Dental Council (GDC) and practises in the UK. You can contact the GDC on www.gdc-uk.org to see if the dental professional is registered.
<i>Dietician</i>	Means a person <i>recognised by Bupa</i> or registered as a dietician with the Health and Care Professions Council (HCPC), at the time you receive your treatment. You can contact the HCPC on www.hcpc-uk.org to see if the practitioner is registered. The HCPC is governed by the Professional Standards Authority (PSA).
<i>Event</i>	Means any one occurrence or all occurrences of a series consequent upon or attributable to one source or original cause.
<i>Gender dysphoria</i>	Means a condition where a person experiences discomfort or distress because there's a mismatch between their biological sex and gender identity, sometimes known as gender identity disorder, gender incongruence or transgenderism.
<i>Gender reassignment surgery</i>	Means genital surgery and bilateral mastectomy only.
<i>General practitioner (GP)</i>	Means a doctor who is on the UK General Medical Council's General Practitioner Register. You can contact the GMC on www.gmc-uk.org to see if the GP is registered.

Defined term	Definition
Homeopath practitioner	Means a person registered as a homeopath practitioner with the Society of Homeopaths or the Federation of Holistic Therapists (Complementary Healthcare Therapist Register) at the time you receive your treatment. You can contact the organisations on www.homeopathy-soh.org and www.fht.org.uk to see if the practitioner is registered.
Hospital	Means any NHS or private hospital which has facilities for major surgery or which exists principally for the provision of treatment by consultants .
Hospital day-case	Means admission to a hospital ward (with discharge before midnight on the same day), where the member is required to stay in hospital over the course of one day for treatment or investigation.
Hospital in-patient	Means admission to a hospital ward (before midnight) where the member is required, for medical reasons, to stay in hospital overnight or longer.
Legal advice service provider	Means © 2017 Slater and Gordon (UK) LLP a Limited Liability Partnership registered in England and Wales (OC371153). Slater and Gordon (UK) LLP is authorised and regulated by the Solicitors Regulation Authority. Slater and Gordon (UK) LLP is authorised and regulated by the Financial Conduct Authority (FCA) for insurance mediation activity. This provider may change from time to time. Please see section 2.8 of your membership guide for changes we can make.
Main member	Means the person who is covered under the agreement by virtue of being eligible in his or her own right, rather than as a named dependant .
Medical device	Means any instrument, apparatus, appliance, material or other article, for the use of: diagnosis, prevention, monitoring, treatment or alleviation of disease, injury or handicap, investigation, replacement or modification of the anatomy or of a physiological process.
Member	Means the main member of the policy and/or any named dependant covered under the policy.
Membership guide	Means the document that sets out the general terms and conditions of your membership, including, but not limited to, sections explaining how your membership works, how to claim, your right to cancel and making a complaint.
Membership level	Means the level of cover chosen by you or the sponsor . This determines your benefit limits . Your membership level is shown on your welcome letter .
Named dependant	Means your partner and any child dependants as notified to us who are named as members of the policy.
Occupational therapist	Means a person recognised by Bupa or registered as an occupational therapist with the Health and Care Professions Council (HCPC), at the time you receive your treatment. You can contact the HCPC on www.hcpc-uk.org to see if the practitioner is registered. The HCPC is governed by the Professional Standards Authority (PSA).
Osteopath	Means an osteopath, recognised by Bupa or registered as a member of the General Osteopathic Council (GOC), at the time you receive your treatment. You can contact the GOC on www.osteopathy.org.uk to see if the practitioner is registered. The GOC is governed by the Professional Standards Authority (PSA).
Partner	Means the main member's husband, wife, civil partner or the person they live with in a relationship similar to that of a marriage or civil partnership.
Personal accident insurer	Means the entity defined in the glossary and section 5 of your membership guide .
Physiotherapist	Means a person, recognised by Bupa or registered as a physiotherapist with the Health and Care Professions Council (HCPC), at the time you receive your treatment. You can contact the HCPC on www.hcpc-uk.org to see if the practitioner is registered. The HCPC is governed by the Professional Standards Authority (PSA).
Podiatrist	Means a person, recognised by Bupa or registered as a podiatrist with the Health and Care Professions Council (HCPC), at the time you receive your treatment. You can contact the HCPC on www.hcpc-uk.org to see if the practitioner is registered. The HCPC is governed by the Professional Standards Authority (PSA).
Premium table	Means the document we send you that outlines the monthly and annual premium associated with each membership level available on your policy.
Qualifying period	Means a set period of time that must pass before we will accept and pay claims for particular benefits . If an event happens during this set period of time (for example, a birth or adoption), the benefit will not be payable. This applies to each member , starting from the date they joined the policy or from the date they increased their benefit limits .
Recognised by Bupa	Means a person that is registered and accepted by us and can be found on finder.bupa.co.uk
Reflexologist	Means a person recognised by Bupa or registered as a reflexologist with the Association of Reflexologists (www.aor.org.uk) the International Federation of Reflexologists or the British Association of Reflexology.
Sponsor	Means the entity with whom Bupa have entered into an agreement to provide cover.
Start date	Means the date your policy is effective from. You can find this in the welcome letter we sent you when you joined.
Welcome letter	Means the letter we send you confirming your membership level and your start date . We will send you a welcome letter at the start of your policy, and we will send subsequent letters confirming any changes if we/you make changes to your cover.

Bupa Cash Plan Helpline is not regulated by the Financial Conduct Authority or the Prudential Regulation Authority.

Bupa Cash Plan Helpline is provided by:

Bupa Occupational Health Limited. Registered in England and Wales No. 631336.

Registered office: 1 Angel Court, London EC2R 7HJ.

Legal advice and assistance are provided by a third party.

Bupa cash plan is provided by:

Bupa Insurance Limited. Registered in England and Wales No. 3956433. Bupa Insurance Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority.

Arranged and administered by:

Bupa Insurance Services Limited, which is authorised and regulated by the Financial Conduct Authority. Registered in England and Wales No. 3829851.

Registered office: 1 Angel Court, London EC2R 7HJ

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