



Your Choice: Guide to Cancer Care

Cancer care is covered under the Heart & Cancer module, which gives you access to Oncology (Cancer) treatment. Once a diagnosis has been confirmed you can access private care for oncology treatment. This can be accessed from a hospital listed in the Directory of Hospitals under your chosen option, Partnership or Extended.

All recognised investigations and specialised scans such as MRI, CT and PET scans, X-rays and ultrasounds are covered alongside your treatment and during the necessary aftercare period.

All Oncology care is pre-authorised with our Managed Care Team who will work closely with your treating Consultant regarding treatment plans, in line with your policy terms and conditions.

As part of your cover, you also have access to Lifeline, a 24 hour health advice line run by Healix Health Services. This service provides access to qualified medical doctors and nurse who can answer any questions you may have.

What if I require chemotherapy/radiotherapy or other drug-related treatment?

Oncology treatment may require medical hospital admissions and other supportive treatments and therapies. These are covered as part of your oncology care.

Is emergency treatment covered?

Emergency treatment (as defined in your policy document) is generally not covered under policy terms and conditions. However, should the admission be directly related to the cancer treatment the Society will consider cover for the admission.

We also work with **Healthcare at Home** who can administer chemotherapy and certain intricate procedures in your home by a specialist nurse (under the direction of your Consultant). For further information on Healthcare at Home please contact the Managed Care Team.

What if my cancer spreads?

If your cancer spreads or metastasises; we will cover treatment aimed to cure or stabilise the condition. In the event that your cancer becomes terminal; this will also be covered for symptom relief and control (palliative care).

What happens if I need to use a hospice?

If hospice care is required, a Hospice Donation of £400 per person per policy year payable directly to the hospice is available.

Can I use experimental and unlicensed treatments?

Any treatment that is experimental or unlicensed is not covered under policy terms and conditions. Any treatment, including the use of prosthesis not based on established medical practice, or proven to be

safe or effective by the National Institute for Health and Care Excellence (NICE) will not be covered under policy terms and conditions. However, where there is an alternative 'conventional' treatment available which the Society would have covered, we will offer the level of reimbursement we would have paid for the hospital, Consultant and Anaesthetist and allow three follow-up consultations post operatively. The total amount offered is inclusive of all hospital charges, Consultant and, Anaesthetist fees plus three follow-up consultations and 6 physiotherapy sessions, within 90 days post treatment. Should the treatment require a prosthesis, the Society would also cover up to the cost of the conventional prosthesis. The level of reimbursement will be subject to any co-payments or excess chosen on your policy. Any costs associated with direct complications of treatment which has not been proven to be safe and effective by NICE will not be covered by the Society and will need to be settled by you directly.

What happens if I decide to discontinue the unconventional treatment?

Should you wish to discontinue the unconventional treatment and revert to conventional treatment for this condition; any benefit that you have utilised will be deducted from the benefit made available to cover the cost of conventional treatment. Any resulting shortfall against the cost of conventional treatment will also be your liability.

Your Care Package

This package is a tailor-made **discretionary package** of care, agreed in advance of treatment, for those members electing to receive their treatment on the NHS in lieu of private treatment. We offer members a package of up to 10% of the cost of an equivalent private hospital admission. This package can be used to cover travel costs, childcare, pet care, domestic help and gardening expenses upon submission of receipts.

Members using the NHS for oncology treatment are also able to claim a Cash Allowance from their policy for admissions for the administration of chemotherapy and radiotherapy. The payment of this cash allowance will not be deducted from the value of any discretionary Your Care package that may be offered.

All claims are subject to policy Terms & Conditions.

Useful contacts

MCT: 020 8547 4998

MCT email address: mct@cshealthcare.co.uk

Lifeline: 020 8410 0415

Lifeline email address: lifeline@healix.com