

This plan meets the demands and needs of companies who wish to pay for their employees to have private health insurance and/or wellbeing services, to help treat curable conditions and get support/advice on medical issues. Please review this overview of the plan benefits carefully to ensure your chosen plan level (ie, GP Plus, Level 3, 2 or 1) meets the needs of your company.

Practical health and wellbeing support		Most popular plans			
		GP Plus £9 pppm	Level 3 £23 pppm	Level 2 £41 pppm	Level 1 £66 pppm
24/7 GP service	<ul style="list-style-type: none"> Unlimited GP appointments - book via the Equipsme App 24/7, 365 days a year - by phone or online Private prescription delivery service, private fit notes and open referral letters 	✓	✓	✓	✓
Nurse helpline	<ul style="list-style-type: none"> 24/7 support line Talk to trained nurses, midwives and pharmacists 	✓	✓	✓	✓
Cancer and heart support	<ul style="list-style-type: none"> Dedicated cancer & heart specialist nurse for guidance and support – for members and their families 	✓	✓	✓	✓
Male and female health	<ul style="list-style-type: none"> Request to speak to a male or female GP Health guides including menopause, breast, prostate and testicular cancer 	✓	✓	✓	✓
Health and wellbeing perks	<ul style="list-style-type: none"> 40% off Nuffield and Huzzle gym membership 30% off Vision Express glasses/free eye test (with £50 spend) 25% off Nuffield in person health check 	✓	✓	✓	✓
Elder care support	<ul style="list-style-type: none"> Discounts off personal alarms and support services Free practical information 	✓	✓	✓	✓
Personalised health checks from Thriva	<ul style="list-style-type: none"> Online health profile on all levels to track health One free home blood test from a choice of tests 20% off any additional Thriva health check 	Online health profile only.	Annual home blood test and personal report.	Annual home blood test and personal report.	Annual home blood test and personal report.

Health insurance benefits provided by AXA Health

Physiotherapy (MSK), muscles, joints, and bones support.	<ul style="list-style-type: none"> No need for GP referral first Phone assessment with self-help support for pre-existing conditions In-person physio sessions (plus Osteo and Chiro) 	✓ Up to 5 sessions. No excess.	✓ Up to 5 sessions. No excess.	✓ Up to 8 sessions. No excess.	✓ No yearly limit. No excess.
Cancer diagnosis pathways	<ul style="list-style-type: none"> No need for GP referral first AXA health and Check4Cancer support members with a quicker health journey when concerned about cancer Pathways include; Breast, Skin and Prostate 	✗	✓ No excess.	£150 total excess payable once per person, per plan year across Consultations, Diagnosis and Hospital Treatment.	✓ No excess.
Diagnosis – Private specialist consultations and tests and scans	<ul style="list-style-type: none"> No yearly limit on specialist consultations and specialist referred diagnostic tests, MRI scans, Xrays and CT scans including up to cancer diagnosis Second opinion service with a second consultant Private specialist pathways available for Digestive, Dermatology, Urology, Neurology and Cardiology 	✗	✓ No excess.		✓ No excess.
Treatment - Private patient in hospital	<ul style="list-style-type: none"> No yearly limit on hospital treatment includes specialists, surgeons, room, dressings and drugs No cancer treatment but covered up until cancer diagnosed 		✗		

Company funded optional extras – for all employees on cover

Stress Support (EAP) £1.50 pppm	<ul style="list-style-type: none"> 24/7 helpline support on a range of work related, personal and lifestyle matters Telephone, online or face-to-face counselling (up to 8 sessions) for employee member Other telephone/online support on matters such as financial, legal and family care 	These benefits extend to family members that they add, at no extra cost.
Dental & Optical £13.00 pppm	<ul style="list-style-type: none"> Claim back £200 for NHS or Private dental check-ups and treatment. Claim back £100 on prescription specs / lenses and £25 towards annual sight test 	

Employee options - within 21 day selection window

Upgrade between levels	<ul style="list-style-type: none"> Pay the difference between levels by monthly Direct Debit. Eg: Upgrade from GP+ (£9) to Level 3 (£23) - £14 difference 21 day upgrade window prior to inception and every renewal
Add Family coverage	<ul style="list-style-type: none"> Add spouse/partner for the same monthly amount Add up to 6 children aged under 25 for 50% of the monthly rate Add spouse/partner & children any time during plan year



Key features of the Plan

- Available if your business is registered on Companies House or with HMRC for self-assessment - the plan will be paid for from a UK business bank account and the business pays the cost per employee and is not recovering any portion from its employees.
- Choose a mixture of cover levels to suit your business needs and budget, for two or more employees. The plan will last for 12 months (unless otherwise agreed) and is subject to annual renewal thereafter.
- The price is the same for all employees aged 16-69 years based on their plan start date (cover continues beyond age 70 once on cover) and all applicable taxes are included.
- Cover available for residents of England, Wales, Scotland and Northern Ireland only - Channel Islands, Isle of Man and Jersey are excluded.
- Members must receive treatment in the UK and use an approved medical network. They must contact AXA Health first to arrange physiotherapy, consultations, diagnosis and treatment because if the person or clinic seen is not recognised by AXA Health the bills will not be covered. Bills will be settled by AXA Health as long as medically necessary, not a pre-existing condition and authorised by AXA Health.

What's NOT included in the Equipsme health insurance plan?

The Equipsme health insurance plan is about protecting your employees if the unexpected happens, and to help put things right. Brand new medical conditions are covered as long as they continue to respond to treatment but the plan won't cover the Physiotherapy, Diagnosis or Treatment cost of any health problem that anyone included under the plan already had symptoms of in the last three years – what we call “pre-existing conditions”. A pre-existing condition is any disease, illness or injury that members:

- have received medication, advice or treatment for in the three years before the start of cover, or
- have experienced symptoms of in the three years before the start of cover; whether or not the condition was diagnosed.

Members may need to provide more information to make sure the condition isn't pre-existing. A medical information form may need to be completed and if a member's NHS GP needs to send details about the medical condition, the member may need to give consent for access to their medical records.

Other important exclusions to be aware of include:

- **Treatment of Cancer** – the plan does not cover the treatment of cancer. However, members on cover Level 1, 2 or 3, have cover up to the point at which cancer has been diagnosed so we can help find out what's wrong fast.
- **Pregnancy and childbirth** – but the plan will pay to treat certain medical conditions that arise during pregnancy (depending on cover Level including Treatment). We do not cover investigation or treatment of infertility and assisted reproduction or treatment designed to increase fertility.
- Ongoing, recurrent and long-term conditions – we call these “**chronic conditions**”.
- **Treatment received outside the UK.**
- **Mental health conditions** – the plan does not cover the treatment of these conditions but if you have included the Stress Support extra cover, we can help with telephone and face-to-face counselling.
- The plan does not cover any treatment, investigations, assessment or grading to do with learning and development disorders or **neurodivergent diagnosis**.
- **Gender re-assignment** or gender conformation or any connected treatments are not covered under this plan.

We've listed the most significant things here. Full contractual information regarding the insurance cover and non-insurance services is provided in more detail in the following documents:

- The Company Guide and Agreement and the Company Schedule (for you as the company buying the plan).
- The Membership Handbook and the Membership Certificate (for employee members you include under your plan).

How can the plan be cancelled?

Employers can cancel the plan without charge during the cooling off period (14 days from the start date in the company schedule or the day on which the plan documentation or renewal documentation is received, whichever the later). After the cooling off period, we will charge the premium due from the start date or renewal date to the cancellation date.

Customer care and complaints

- If at any time you wish to complain about the insurance cover you should contact the insurer either in writing or by phone at: AXA Health, International House, Forest Road, Tunbridge Wells, Kent TN2 5FE. Tel: 0800 917 9472.
- If your complaint about the insurance cover is not settled to your satisfaction, you may be entitled to refer it to the Financial Ombudsman Service. You can find more information on their website financial-ombudsman.org.uk or by calling 0800 0234567.
- If at any time you have a complaint relating to the non-insurance benefits under your plan you may contact us either in writing or by phone at: Equipsme, Third Floor, 1 New Fetter Lane, London EC4A 1AN. Tel: 020 3965 6410.

About Equipsme plans

The Equipsme health insurance plan contains two types of benefits. The first is non-insurance services which include, GP consultations, health checks and stress support via an employee assistance programme. The second is insurance cover for physiotherapy, diagnosis and treatment of health conditions and treatment by a dentist or an optician.

Your non-insurance services are provided by Equipsme Insurance Services Ltd which is registered in England and Wales. Our registered office is: Third Floor, 1 New Fetter Lane, London, EC4A 1AN.

AXA PPP healthcare limited are the insurers for the insurance cover part of this plan. AXA Health is a trading name of AXA PPP healthcare Limited, registered in England and Wales No. 3148119. Registered office: 20 Gracechurch Street, London, EC3V 0BG. AXA PPP healthcare Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority. Equipsme is an insurance intermediary who act as an agent of AXA PPP healthcare when administering your insurance cover and Equipsme Insurance Services Ltd is regulated by the Financial Conduct Authority.