

Significant changes to your International Swiss Medical plan

These changes are effective once your plan renews on or after 1st November 2024.

We have made a number of changes to the wording of your plan. This leaflet tells you about the significant changes we have made to the plan since you joined or your plan was renewed. Please keep it with your latest copy of your membership pack, so that you can refer to it if you need to.

You'll find your updated membership guide on MembersWorld from your renewal date, or you can get in touch to receive a paper, large print, audio or Braille version.

CHANGES TO TERMS

Cancellation periods

We have clarified the cancellation periods. After buying your policy you have an initial 30 days to withdraw from the policy. After this time, you will need to give 14 days' notice to cancel.

Obesity and weight management

We have clarified how we cover obesity and weight management claims.

Professional sports activities

We have clarified the definition of professional sports.

MAKING EXISTING TERMS CLEARER

Cancer treatment

We have expanded and clarified the treatments and services available to you as part of any treatment for cancer.

Medical evacuation and repatriation

We have clarified that we will cover costs for you to travel from hospital to the airport and vice versa where the travel is medically necessary and we have pre-authorised the travel.

Deliveries following assisted fertility treatment

We have clarified how we process claims for children born as a result of assisted fertility treatment.

Antenatal classes

We will not pay for antenatal classes.

Reasonable and customary

We have clarified that our reasonable and customary policies apply to all claims.

NEW OR ENHANCED BENEFITS

Prescribed out-patient medicine

We have added a limit to the post-hospitalisation drugs and dressings that you are covered for.

NEW EXCLUSIONS

Professional sports activities

We have added an exclusion to clarify that we do not cover treatment due to professional sports activities. This only applies to insurances with an original policy start date on or after 1 November 2024.

USING YOUR PLAN

Making a claim

We have changed the age that we will contact a dependant about their claims from 18 to 16.

Paying a claim

We have changed the age that we will directly reimburse a dependant for their claims from 18 to 16.

Pre-authorisation

We have clarified which benefits need to be pre-authorised. This is stated in the benefit explanations. We may not pay your claim for these benefits if you do not get pre-authorisation from us.