



Outpatient cover and limits - explained.



Outpatient treatment is when you go to hospital or other medical facility for a consultation, tests or treatment, and don't need to recover with medical supervision afterwards.

The outpatient cover you have on your plan will depend on how your plan is set up. You may have:



You'll find more information about any limits or rules in your handbook.



When you contact us to tell us you're having treatment, we'll tell you:

If the treatment counts as outpatient treatment

If the treatment will come out of your outpatient or consultations limit

> What's left from your outpatient or consultations limit.



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How do the different limits work?

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Consultations

> Specialist consultations come out of the limit.

Treatment, tests and scans

- Treatment (other than outpatient surgery) comes out of the limit.
- Some tests also come out of the limit, such as x-rays, ultrasound scans, blood tests and other simple tests.
- > However, in most of our plans MRI, CT and PET scans don't come out of this limit.

Treatment with other healthcare professionals

- Treatment with other healthcare professionals that's covered by your plan (such as physiotherapy), may come out of this limit.
- You may also have a limit on the number of sessions you can have, such as 10 sessions a year.

How the limit is applied

> The limit is per person and per membership year.

For example

- > With an outpatient limit of £1,000, you could have:
 - A specialist consultation to discuss symptoms
 - Some blood tests
 - A follow-up consultation to discuss results.
- So long as this all adds up to less than £1,000, and is covered by your plan, we'll cover the costs.

Don't forget

Some outpatient tests or treatments, including blood tests, can be expensive. Please check the cost of treatment with your specialist or hospital beforehand to make sure there's enough left from your outpatient limit to pay for the treatment.

Specialist consultations limit

Consultations

- > All specialist consultations come out of this limit, even if they are with the same specialist each time.
- It doesn't matter whether the outpatient consultation is before treatment, or a follow-up after treatment.

Treatment, tests and scans

 If you have outpatient tests, scans and treatment, these don't affect the consultations limit.

Treatment with other healthcare professionals

- Treatment with other healthcare professionals that's covered by your plan (such as physiotherapy), won't come out of this limit.
- However, you may have a limit on the number of sessions you can have, such as 10 sessions a year.

How the limit is applied

> The limit is per person and per membership year.

For example

- > With a limit of three consultations, you could have:
 - A first consultation to discuss your symptoms
 - An MRI test and some blood tests
 - A second consultation to discuss the results
 - An operation (if your membership covers this)
 - A follow-up third consultation after the operation.

Don't forget

If you need more specialist consultations than your limit, you'll need to pay for these yourself, or arrange them through the NHS.



How do limits work with my excess?

If there's an excess or similar contribution on your plan, you'll need to pay it on the first invoice we receive for outpatient treatment.

We'll take the excess off what we pay for the first invoice in the year, including if it's outpatient treatment. This treatment will still come out of your outpatient or consultations limit, even if you've paid for it.

Here's an example of how it works:

- > Rhea has an outpatient limit of £2,000 and an excess of £500.
- Rhea's first treatment this year costs £1,200. She pays £500 of this, because she has to pay her excess.
- However, we still need to take £1,200 off her outpatient limit, even though she paid her excess towards the treatment. This is because we take the treatment cost off the limit, regardless of who paid for the treatment.

For example, if Rhea has an outpatient limit of £2,000



We've used the word 'excess' in this explanation. You may have a benefit limitation or cost share, which work in similar ways.



Outpatient treatment

You go to hospital for a consultation, tests or treatment and leave again straight afterwards.

You don't need to recover with a medical professional looking after you, and you don't need someone to take you home.

Day patient treatment

You need a medical professional looking after you as you recover from your test or treatment.

You might have tests where you need sedation or other preparation for the test. For example, camera tests to look inside your body.

You may be 'admitted' to hospital and given a wristband with your name on.

You may need to wear a hospital gown.

Inpatient care

You stay in hospital overnight or for several nights.



Are there any kind of outpatient treatment or tests that my membership doesn't cover?

It doesn't cover:

- Emergency treatment that you'd have at A&E The NHS is best set up for this.
- Treatment that your GP, optician or dentist would usually carry out This is known as primary care.

Most plans also don't cover the following – but check your membership handbook:

- 😢 Outpatient tests your NHS GP or any other private GP refers you for
- 😣 Routine childbirth and pregnancy
- Drugs, dressings or prescriptions even if they're used as part of your outpatient care or if you're given them to take home after the treatment.

You'll find the details of what you're covered for in your handbook.



Need some more help?

Understanding the jargon can be tricky, so if you need help, send us a message from your online account or via livechat, or give us a call.

You'll find information about what you're covered for and how your membership works in your membership documents.

Go to **axahealth.co.uk** and select 'Log in/Register'.



