



When we ask you to pay towards treatment - explained.



Why do you ask me to pay towards treatment?

We try to make sure your membership covers your treatment costs.

But there are two main situations when we ask you to pay towards the costs:



What is a 'shortfall'?

You'll sometimes see the word 'shortfall' used for an amount that we ask you to pay.

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When your plan includes an excess

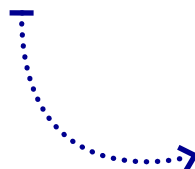
You can find our more in [our guide to paying an excess.](#)

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When there's a difference between your treatment cost and what your membership covers

If this happens, you may have to pay the difference, or a contribution towards it.

In this guide, we look at this type of payment – you can find out more on the following pages.



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Why doesn't my membership cover the cost?

All health insurers have to have limits on what they'll pay. If we didn't, the cost of health insurance would be higher for everyone.

Here are the main reasons you may need to pay towards treatment:



Your choice of specialist

- › You may need to pay when:
 - A specialist charges more than our agreed rates.
 - Your plan requires you to use a specialist we've sourced, or a hospital on a particular list, but you want to use a different specialist or hospital.
- › When you contact us we'll tell you if this is the case, and you'll have the chance to switch to a different specialist or hospital.
- › For more details, see 'Costs to do with your choice of specialist' on page 3.



You've used up a limit

- › You may need to pay when you have a yearly limit – for example an outpatient limit or specialist consultations limit – and you've used this up.
- › For more details, see 'Costs if you've used up a limit' on page 3.



The type of treatment

- › You may need to pay when your membership doesn't cover a specific treatment, or there's a limit on how much we'll pay for the treatment.
- › In some cases, you'll need to pay the full cost of this yourself, or transfer to the NHS. In other cases, we may make a contribution towards the treatment and you'll need to pay the rest.
- › For more details, see 'Costs to do with the type of treatment' on page 4.



Always contact us before your treatment so we can check if we'll pay in full

If you contact us before each stage of your treatment, we'll check if your membership covers the treatment in full.

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If we don't cover them in full, we'll let you know and talk you through your options.

When we ask you to pay towards treatment – explained.



Costs to do with your choice of specialist

If you need to see a specialist, it's easiest if you ask the GP for an 'open referral'.

This doesn't name a particular specialist, and it means we can source one for you whose fees we cover in full. With some plans, you must ask for an open referral – please check your membership documents to see if this applies to you.



You can find your membership documents in your online account – go to axahealth.co.uk and select 'Log in/Register'.

Before you arrange any treatment, please always get in touch.

When you contact us:

- › We'll either source a fully qualified specialist for you, or tell you if your membership covers your chosen specialist's fees in full.
- › If the specialist's fees aren't covered, we'll explain how much you may need to pay. We'll also offer to source a specialist whose fees we'll cover in full.



Costs if you've used up a limit

On some plans, you'll have a limit on how much treatment we'll pay for.

For example, we may pay for outpatient treatment up to £1,000 a year, or three specialist consultations.

Once you've used up this limit:

- › You can still have the treatment privately, but you'll need to pay for it yourself.
- › Or you can have the treatment on the NHS, if appropriate.

When you contact us about your treatment, we'll tell you how much of your limit is left.

We base this on the invoices we've received so far. If you're close to the limit, please contact your specialist or hospital and ask for an estimate of how much the treatment will cost. This will then give you an idea of whether you'll need to pay towards it. Your limit will reset at renewal.



If your membership doesn't cover something, we're still here for you.

You've got access to health and wellbeing services. You can find out more in your online account – go to axahealth.co.uk and select 'Log in/Register'.

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And you can talk through any concerns or questions with experienced health professionals at any time of the day or night. Just call **0800 328 2190**.



Costs to do with the type of treatment

Here are the situations when you may need to pay towards a specific treatment:

- With some plans, we only pay up to a set limit for some treatments. This limit could be:
 - time (for example, six weeks of treatment),
 - sessions (for example, 10 sessions)
 - money (for example, up to £5,000).
 If your treatment goes over this limit, you'll have to pay the difference in costs.
- For some treatments, we don't pay the whole cost. We may pay a contribution towards it, so long as we agree the costs beforehand.



You can find more information about how we cover specific treatments in your handbook.



How will I know if I'll have to pay anything?

When you contact us about your treatment, we'll tell you if there's anything to pay.

We'll explain why you need to pay, and who to pay. We'll also send you a claim update after your treatment that explains this.



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.

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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'.

