



Plan P Terms & Conditions (T&Cs) Changes Explained

The below shows changes to Terms & Conditions applicable to your upcoming renewal. These changes will only impact you if the benefit is available on your plan.

1. Existing T&Cs

Cooling off period

We have included the cooling off period rule. The rule now reads as follows:

2.5) The Policyholder will have 14 days to cancel the Policy. The 14 day period starts from the inception date of the Policy, or 2 days after the issue date of the Policy Details, whichever is the latter. In these circumstances We will refund the premium You have paid.

Cancelling / Terminating Your healthcare cover

The termination heading has been updated to also reflect the cancellation. The rule heading now reads as follows:

4) Cancelling / Terminating Your healthcare cover

Cancellation by the Policyholder

We have provided further clarity on the timeframe within which you can cancel your policy at time of joining or renewal. The rule now reads as follows:

4.1) At time of joining:

When the Policyholder signs up for a Policy, Vhi Healthcare will accept their instruction to cancel the Policy within 14 days. The 14 day period starts from the inception date of the Policy, or 2 days after the issue date of the Policy Details, whichever is the latter.

At renewal date:

The Policy will renew automatically on the date notified to the Policyholder on the Policy renewal documentation, unless the Policyholder contacts Us to cancel the Policy in advance of this Renewal Date. We will accept the Policyholder's instruction to cancel the policy up to 14 days after the Renewal Date. After the expiration of those 14 days the Policyholder will not be in a position to either cancel or make changes to the Policy until the next Renewal Date (subject to certain exceptions – contact Us for details).

Cancellation / Termination by Us

We have updated the rule to outline the circumstances within which we may terminate your contract. The rule now reads as follows:

4.2) We may cancel / terminate the Policy in the following circumstances:

i) In the event that payment of the premium does not commence in accordance with the T&Cs of the Policy, then no benefits will be paid under the Policy in these circumstances.

ii) In the event of non-payment of the premium during the course of the Policy term, such non-payment will constitute a breach of the Policy. In such circumstances, We reserve the right to cancel the Policy and no further benefits will be paid for that Policy term.

iii) In the event that You make or try to make a negligent misrepresentation or a fraudulent application or claim, which relates to Your Policy with Us or any other Health Insurance Contract, such action will constitute a breach of the Policy and We may terminate the Policy with immediate effect. We may also refuse to renew the Policy and/or refuse to pay any benefits under the Policy.

Updated rule

We have updated our termination rule to reflect scenarios relating to negligent misrepresentation or fraudulent applications/claims. The rule now reads as follows:

4.2, iii) In the event that a Customer makes, or tries to make, a negligent misrepresentation or a fraudulent application or claim, which relates to his/her Policy with Us or any other Health Insurance Contract, such action will constitute a breach of the Policy and We may terminate the Policy with immediate effect. Customers should be aware that We undertake regular audits of Claims and in all instances where negligent misrepresentation or fraud is suspected in respect of a particular claim, a full and comprehensive investigation will be carried out. In addition, We reserve the right to refer the details of any Claim submitted which is suspected to be fraudulent, to the appropriate authorities to take the appropriate action.

Updated rule

We have updated the rule to also include termination of a policy. The rule now reads as follows:

10, 2, c, i) group number, employee title and name (Policyholder), address, date of birth of the Policyholder, employee number, PPS number, effective date of the Policy, date of cancellation or termination of the Policy, level of cover, premium amounts, including where relevant name, date of birth and address (if different) for their partner and/or their dependants and shall not include any personally identifiable health related data.

Your policy Terms & Conditions contains full details of all your cover.

If you have any questions, please call us on **(056) 444 4444**.

Vhi Healthcare DAC trading as Vhi Healthcare is regulated by the Central Bank of Ireland. Vhi Healthcare is tied to Vhi Insurance DAC for health insurance in Ireland which is underwritten by Vhi Insurance DAC.