

Underwriting Explained

This is your guide to how we underwrite your medical insurance policy. It contains important information to explain how we underwrite your policy and the options open to you.

Why we use Medical Underwriting

There are two methods that we can use to accept your application for cover – Moratorium or Medical History Declaration.

Like other medical insurers our schemes are designed to provide you with benefit for the cost of treating medical conditions that arise after the date you have been accepted for cover. This means that we exclude from your cover medical conditions that you had before the start date of your cover, we call these pre-existing medical conditions.

As with other types of insurance, medical insurance is designed to protect you against the cost of unforeseeable events. We do not allow people to make a claim for benefit for those medical conditions they already have. If we allowed members to do this our premiums would have to be much higher. Excluding pre-existing medical conditions from cover makes the basis of the cover fair to all those members who take up the scheme.

We have two different ways of clarifying pre-existing conditions that will be excluded from your cover. The choice of underwriting method is entirely yours and you will need to select your underwriting option on your Application Form. To help make your decision there follows an explanation of the two options with examples of how both underwriting methods work in practice.

Your two underwriting options

Option 1. Moratorium

We will not ask you to give details of your medical history. Instead we will not cover any medical condition (diagnosed or undiagnosed) that existed in the last five years before joining the scheme. However, provided you do not have symptoms, or receive treatment, medication, tests and advice (from your GP or a Specialist) for that condition for a continuous period of two years after the policy starts, then the conditions will become eligible for benefit subject to the terms and benefits of the scheme. This two year period is known as the Moratorium.

It is important to understand that you will probably never be covered for long-term medical conditions that are likely to need regular or periodic treatment, medication or advice. This is because each time you need such treatment the Moratorium period starts again, so it is unlikely that there would ever be two clear years during which you do not have any symptoms, treatment, advice and medication.

Any new, unexpected eligible conditions arising after the start of your membership will be covered immediately, subject to the terms and conditions of your Policy Document and Policy Summary.

Important Notice:

You should not delay getting medical advice or treatment, simply to get cover.

How the options work in practice

Example 1 Jack's Story

Jack has a seemingly benign lump on his left arm but has not seen his GP about this or received any diagnosis. Jack wants to know if he will be covered for investigations or treatment once his cover has begun.

Moratorium Underwriting

No. Because Jack was aware of the condition during the 5 year period before the start of the plan he will not be covered. He would not qualify for benefits for at least the first two years of his membership.

Medical Declaration

Jack should tell us about his condition on the Application Form. The information disclosed is considered by our underwriters and it is likely that Jack will receive an exclusion for any treatment to the lump on his left arm and possibly any associated conditions. The exclusion will appear on Jack's Membership Certificate.

Example 2 Tim's Story

Some time after Tim's cover begins, during a routine visit, his doctor diagnoses a heart condition. Although Tim had experienced no symptoms this condition had obviously developed before his cover began. Tim wants to know if he has cover for this condition.

Moratorium Underwriting

As Tim was not aware of the condition, has had no treatment for an obviously related condition such as high blood pressure or chest pains, and had no symptoms during the five year period before his cover commenced, benefit would be available.

We may ask Tim's GP to confirm that Tim was not aware of any symptoms when applying for cover.

Medical Declaration

As Tim was not aware of the condition at the point of underwriting he would be eligible for benefit.

We may ask Tim's GP to confirm that he was not aware of any symptoms when applying for cover and we will check that the condition is not directly related to any other exclusion that we may have placed on his membership.

Option 2. Medical History Declaration

Alternatively, you can choose to complete a Medical History Declaration.

This declaration asks you to give details of the medical history for each person to be insured. It is important that you give all the information that you are asked for as any disease or condition of health which existed before the date of enrolment, will not qualify for benefit unless it has been fully disclosed and accepted by us. We will use the information provided to decide if there are any specific pre-existing conditions that are likely to need treatment in the future. We will exclude these pre-existing conditions from cover and clearly show any exclusions on the Membership Certificate that you receive along with your policy documents.

Any new, unexpected eligible conditions arising after the start of your membership will be covered immediately, subject to the terms and conditions of your Policy Document and Policy Summary.

Further important information:

Before undergoing any private treatment for which you wish to make a claim you need to submit a fully completed claim form. If you submit your fully completed claim form before commencement of treatment, we will be able to discuss with you your benefit entitlement in advance.

If you have concerns about any part of your cover or how the two underwriting options are applied please discuss these with your broker or call the BCWA Helpdesk on 0117 929 5588.

Example 3 Lisa's Story

Lisa suffers from asthma for which she uses an inhaler. Lisa wants to know if she would be covered if she needed to go to hospital to receive treatment related to her asthma.

Moratorium Underwriting

No. As Lisa receives regular treatment for her condition she would not be covered for any treatment that is directly related to her condition.

Medical Declaration

No. We ask Lisa to declare this information under her Medical Declaration and we will place an exclusion on her membership for any condition directly related to asthma. We will show this exclusion on her Membership Certificate

Example 4 Sarah's Story

Following the commencement of her cover Sarah injures her previously healthy knee in a sporting accident. Sarah's GP tells her that she will need surgery to repair the damage done to her knee. Sarah wants to know if she would be covered.

Moratorium Underwriting

Yes. As the treatment required is related to an incident that occurred following the commencement of her cover Sarah is eligible to claim for benefit under the rules of her scheme.

Medical Declaration

Yes. As the treatment required is related to an incident that occurred following the commencement of her cover Sarah is eligible to claim for benefit under the Rules of her scheme.



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