



MEMBERSHIP CERTIFICATE 2009

EMPLOYER NAME : MECMAR DRIERS (2000) LTD
 EMPLOYER NUMBER : 659423
 BENEFIT START DATE : 03/02/2006
 RENEWAL DATE : 03/02/2010

PRINCIPAL MEMBER NAME : MR S MCBCMBGBKFDH
 POLICY NUMBER : 802625530
 PLAN DESCRIPTION : SME HEALTHCARE PLAN
 HOSPITAL NETWORK : National
 PRUHEALTH FEE MAXIMA : Apply

BENEFIT TABLE

SME HEALTHCARE PLAN	
INPATIENT CARE	
Hospital charges	Covered
Specialist, consultant fees	Covered
Diagnostic tests	Covered
Radio- and chemotherapy	Covered
Psychiatric care	None
OUTPATIENT CARE	
Specialist consultations	Combined limit of £1,000 per Policy Year
Diagnostic tests: MRI, CT and PET scans	Covered at a provider from your selected hospital list
Diagnostic tests: other	Combined limit of £1000 per policy year
Physiotherapy	Combined limit of £1000 per policy year
Chiropractic and osteopathy	Combined limit of £1000 per policy year
Radio- and chemotherapy	Covered
Psychiatric treatment	Limit of £1,000 per Policy Year
OTHER BENEFITS	
Complementary and alternative therapies	None
Childbirth cash benefit	£100 per child
Home nursing	£3,000 limit per Policy Year
Private ambulance	£60 per trip
Parental accomodation	Yes (children 12 and under, 1 parent)
NHS hospital cash benefit	£50 per day (overall annual limit of £2,000)

- 'Covered' means we will pay in full where charges are within the Pruhealth fee maxima and the tariff for the services provided.
- The combined limit means that the cost of any treatment paid for out of those benefits accumulates towards the overall limit. There may be sub-limits within the overall combined limit.



PERSONAL HEALTH FUND	:	£ 200
PERSONAL HEALTH FUND BENEFITS	:	Maternity costs (excluding delivery itself)
	:	Health screens
	:	Consultations for chronic conditions
	:	Eligible benefits without GP referral

Your personal health fund can be used to pay for services not included as standard on your health cover. Please check the Member Zone for full details of how to use this and the benefits you have.

RENEWAL REWARD* : Cash Back

* Available once the Health Review has been completed and bank details provided.

Your renewal reward table

	Bronze	Silver	Gold	Platinum
FAMILY COVER				
£0 to £0	£50.00	£100.00	£200.00	£300.00
£1 to £250	£0.00	£50.00	£100.00	£200.00
£251 to £500	£0.00	£0.00	£50.00	£100.00
£501 to £1,000	£0.00	£0.00	£0.00	£50.00
£1,000+	£0.00	£0.00	£0.00	£0.00



EXCESS : £ 100

UNDERWRITING

Your employer has chosen the following underwriting type(s) to apply to you and your dependants:

UNDERWRITING TYPE : Moratorium

UNDERWRITING PERIOD : 03/02/2006 - 02/02/2008

Moratorium (MO)

Under this type of underwriting for the first two years of your membership any medical conditions which existed in the five years prior to the date your policy started are excluded. We will cover these conditions two years after your joining date, provided they are eligible under the terms and conditions of the scheme. This applies to all members shown on this certificate.

MEMBER DETAILS

STATUS	SURNAME	FIRST NAME	TITLE	SEX	DATE OF BIRTH	DATE OF ENTRY	MEMBERSHIP NUMBER
Principal	MCBCMBGBKFDH	STBCMBGBKFDH	MR	M	03/10/1955	03/02/2006	1201518436
Spouse	MCBCMBGBKFFF	JABCMBGBKFFF	MRS	F	06/01/1957	03/02/2006	1201518444
Child	MCBCMBGBKFGB	PABCMBGBKFGB	MR	M	23/09/1991	03/02/2006	1201518451

EXCLUSIONS

No exclusions applicable

ISSUED ON: 24/11/2009