Your Member Roundup

The Exeter Health & Life insurance

Ask the experts - How to help ensure your health insurance claim gets paid

We caught up with Cheryl and Kerri, two of our expert claims' specialists at The Exeter, to uncover their top tips on making the claims process as smooth and successful as possible - so you're well prepared if you ever need to make one.

Useful definitions

Standard moratorium: Conditions that you had symptoms, medication, treatment or advice for in the five years before your policy started won't be covered. But a pre-existing condition will be covered if you don't have any of the above for a two-year period after your policy starts.

Full medical underwriting: When you're asked about your full medical history at the point of application. Once your cover is in place, you'll know exactly what is and isn't included. We may apply exclusions for pre-existing conditions.

Trouble-free period: The period of time in which you haven't experienced symptoms of the pre-existing condition.

Primary care: The first clinical step in your journey e.g. GP, dentist or optician.

Secondary care: The treatment you receive after being referred by your GP. It usually involves seeing a specialist and other healthcare professionals e.g. a physiotherapist.

Documentation & process

What documents or information should members have ready before making a claim?

Cheryl: "Definitely a GP referral that tells us what the symptoms are and when they started and any medical history relevant to the claim."

Kerri: "The more information the better! It makes it easier to get the claim moving."

The Exeter is a trading name of Exeter Friendly Society Limited, which is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority (Register number 205309) and is incorporated under the Friendly Societies Act 1992 Register No. 91F with its registered office at Lakeside House, Emperor Way, Exeter, England EX1 3FD.

Your Member Roundup

The Exeter Health & Life insurance

Are there any common mistakes members make when submitting claims that could be easily avoided?

Kerri: "Leaving out details. Members might think it doesn't matter or need to be shared, but we need this information to make sure you're treated fairly. Always be open and honest from the beginning to avoid delays or disappointment."

Cheryl: "I agree! Keeping us informed at every stage is also really important. We need to approve each stage of a claim because the approval of the first appointment doesn't mean everything will be approved thereafter. We need to know what the consultant wants to do and at which hospital to make sure you're covered. Always call back in to update us. It's so important that we have all the details of the claim and proposed treatment."

What's the best way for members to check if a treatment or condition is covered before they proceed?

Cheryl: "Call or email your claims team! You can reach us on 0300 123 3253 or at pmi-claims@the-exeter.com to speak to a member of the team."

Member mindset & expectations

What key points would you like members to understand about how claims are assessed?

Cheryl: "I guess it's mainly about a checklist of what we need for the claim to be assessed. The GP letter that we spoke about before is absolutely essential and anything else the claims assessor requests. I'd like members to understand the depth of the information we might need to assess and why."

How do we support members who might be vulnerable or going through a difficult time during the claims process?

Cheryl: "The claims team are trained on how to support those with any additional vulnerabilities or who might be experiencing a difficult time. If members make the call handler aware, they can update it on our system so that anyone they speak to thereafter is also aware and can offer support. If we know that someone has a vulnerability, we will support and work with the member to do that.

"We also have our cancer nurses who will make direct contact with the member as soon as a cancer claim is authorised. The nurses will be with member throughout their entire journey to help navigate all aspects of cancer treatment.

"A lot of our call handlers have had 'Dementia Friends' training too from the Alzheimer's society."

Understanding the basics

What are the most common reasons a claim might be delayed or declined?

Cheryl: "A common reason is where a member chooses standard moratorium underwriting but there is evidence of symptoms, treatment, or advice occurring in the five years before they joined and there hasn't been a two-year trouble-free period yet. Another reason is where members make claims for conditions or treatment that aren't covered by the policy.

"We also find that a lot of members either don't understand what the standard moratorium underwriting means or have bought their policy to claim and therefore haven't fully understood the terms. We want members to feel confident and avoid any

The Exeter is a trading name of Exeter Friendly Society Limited, which is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority (Register number 205309) and is incorporated under the Friendly Societies Act 1992 Register No. 91F with its registered office at Lakeside House, Emperor Way, Exeter, England EX1 3FD.

surprises when they need reassurance most. That's why we're working closely with financial advisers, so they can help explain things clearly."

Kerri: "We also see members who may have switched to us or have full-medical underwriting, not telling us about pre-existing conditions or treatment which means we may have to decline their claim and add terms depending on an underwriting review."

What's the one thing members often misunderstand about what their policy covers?

Kerri: "Well, it's a tricky one. Sometimes it can be a misunderstanding of the underwriting that's on their policy. For example, if you've chosen standard moratorium underwriting, you can only make a claim for a pre-existing condition if you've had a two-year trouble-free period since the policy started. Members often don't realise this or forget this. We want to help people understand that if they take out cover, it's important to know their underwriting and how it's applied."

Cheryl: "We always try and remind members too, that their choice of underwriting can mean that it can take different amounts of time to get their claim authorised. Depending on how much information you've given us at application, there might be a different journey at claim stage."

Kerri: "We also see a misunderstanding of what primary care is. Members can sometimes think that their policy is a replacement for going to their GP. This isn't the case and whilst we offer remote GP appointments through our HealthWise member benefits app, it's not what the policy itself is for. The policy is to provide a pathway to access secondary care once your primary care consultant refers you.

It's important to remember that the policy isn't designed to replace the NHS, but to compliment it. They work side by side."

"The policy isn't designed to replace the NHS, but to compliment it"

Communication & support

What's the best way for members to get help if they're unsure about something in their policy?

Cheryl: "It depends on what they're unsure about. If it's something to do with their policy like their premiums or how to change their cover, then they should contact our Member Support team. If it's about anything to do with their claim, then it should go to the claims team. Our teams can always help by transferring members over to the correct team if they're in the wrong place or are phoning about multiple things."

What role do advisers play in helping members get their claims right the first time?

Kerri: "Their role is huge. They're the ones who tell the member how their policy works at the very beginning. We rely on advisers to guide on any product their client is buying, including making sure the member knows the claims process and what they're covered for, to get the claim right first time. But it loops back round to us to make sure we're educating advisers correctly on our products to make sure there's no surprises for our members when they come to claim."

Cheryl: "We give advisers that support through our claims roadshow sessions that we run, and we've had a great response from advisers who are committed to learning."

The Exeter is a trading name of Exeter Friendly Society Limited, which is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority (Register number 205309) and is incorporated under the Friendly Societies Act 1992 Register No. 91F with its registered office at Lakeside House, Emperor Way, Exeter, England EX1 3FD.

Your Member Roundup

The Exeter
Health & Life insurance

Thinking forward

What's one tip you'd give to every new member that would help them when making a claim?

Cheryl: "My top tip is to read your policy document and familiarise yourself with what you've bought. It sounds simple but don't just put it away in a drawer and forget about it, it has everything you need to know, so it's worth the read. The claims process and exclusions sections are important to read. Making sure you understand what you've bought from day one is essential, so you don't start paying money for something to later be disappointed."

Kerri: "Mine would be don't go ahead with any treatment unless you've got it approved first. You wouldn't get any work done to your car without checking with your insurance provider first, your healthcare should be treated the same."

Cheryl: "Yes, we want you to have a good experience with us and we'll always support your eligible claims and try to ensure the process is as smooth as possible.

"As a bit of reassurance, we paid 90% of registered health claims last year, totalling £38.1m between 10,599 members."

Need to get in touch?

Member support:

Phone - 0300 123 3201

Email – member@the-exeter.com

Claims team:

Phone - 0300 123 3253

Email - pmi-claims@the-exeter.com

The Exeter is a trading name of Exeter Friendly Society Limited, which is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority (Register number 205309) and is incorporated under the Friendly Societies Act 1992 Register No. 91F with its registered office at Lakeside House, Emperor Way, Exeter, England EX1 3FD.