



About Freedom Health Insurance	3
Our service promise to you	4
Welcome to Freedom Worldwide	6
Summary of benefits	10
Underwriting and membership	14
Making a claim	15
How to contact Freedom Health Insurance	16

Who this product is for

The Freedom Worldwide DE brochure is designed for brokers based in Germany providing cover to individuals and families residing in an EEA country. For members outside the EEA, please refer to our Freedom Worldwide brochure.

About Freedom Health Insurance

Founded in 2003, Freedom Health Insurance is an award-winning private medical insurance (PMI) provider aiming to offer exceptional customer service and simple yet flexible products at competitive premiums for people living in the United Kingdom (UK) and overseas.

Friendly and helpful service

At Freedom, we take care to place our supporting brokers and their clients at the heart of everything we do and aim to provide the highest quality of customer service at all times.

Our friendly and knowledgeable teams understand how important it is to develop strong long-term business relationships and continuously provide exceptional levels of customer service.

With clients based in many countries all around the world and our experienced team based in Poole, Dorset (mainland UK), Freedom is a well-established business always prepared to go the extra mile to make sure you and your clients feel supported.

Protected clients

We understand how important it is for your clients to feel protected when they take out worldwide health insurance. That's why our Freedom Worldwide policy is underwritten by respected insurers. The insurer for each policy will depend on the areas selected - please refer to Freedom for more information.

Freedom Worldwide policies are administered by Freedom Health Insurance, a trading name of Freedom Healthnet Limited which is authorised and regulated by the Financial Conduct Authority, registration number 312282.



Taking care of tomorrow

Investing in the future

With continuing investment building Freedom's infrastructure and a focus on providing sustainable premiums for clients, we are well placed to enjoy a promising future and we look forward to working with you.

Our service promise to you

We understand how important it is to have an insurance provider you can rely on and trust, and who can get things done quickly and accurately. This is exactly what Freedom aims to continuously deliver.

Our service standards are published below.

Quotations and new business

- Telephone calls will be answered within five rings.
- Quotations will be provided within two working days of receipt of all relevant information.
- New business documentation will be issued within five working days of receipt of all relevant information.

Existing policies

- Telephone calls will be answered within five rings.
- Policy amendments will be actioned within two working days.
- Revised policy documents will be issued within five working days.
- Renewal invitations will be issued at least four weeks in advance of the renewal date.
- All other general correspondence will be responded to within five working days.



Customer service with you in mind

A previous winner in the Best Customer Service by a Provider category at the Health Insurance & Protection Awards, Freedom is a customer-focused company with a genuine passion for health insurance and we understand how important it is to continuously provide you with exceptional levels of customer service.

Claims

- Telephone calls will be answered within five rings.
- Emails will be responded to within two working days.
- New claims will be authorised or declined within two working days of receiving all the required information.
- Authorisation letters will be issued within one working day.
- Invoices will be processed within five working days of receipt.
- Payments to policyholders will be issued within 21 working days of being processed.
- All other general correspondence will be responded to within five working days.



Complaints

- We recognise that complaints can arise and when they do, prompt resolution and communication to customers is essential. At Freedom we will listen, react and respond to complaints in a timeframe that meets the needs of our customers.
- For more information about making a complaint, please ask for a copy of our complaints procedure.

Welcome to Freedom Worldwide

Freedom Worldwide is an international private medical insurance plan offering five levels of cover designed to meet the differing needs of your clients.

Diamond (2,000,000 €/£/\$)

- Inpatient and day-patient treatment
- Cancer cover
- Outpatient treatment – covered in full
- Minor dental treatment – 1,500
- Major dental treatment – 1,500
- Repatriation
- Maternity cover
- Emergency medical cover (outside of area)
– 50,000
- Compassionate emergency visit benefit

Platinum (1,500,000 €/£/\$)

- Inpatient and day-patient treatment
- Cancer cover
- Outpatient treatment – 10,000
- Minor dental treatment – 1,000
- Major dental treatment – 1,000
- Repatriation
- Maternity cover
- Emergency medical cover (outside of area)
– max. 60 days up to 40,000
- Compassionate emergency visit benefit

Gold (1,000,000 €/£/\$)

- Inpatient and day-patient treatment
- Cancer cover
- Outpatient treatment – 5,000
- Minor dental treatment – 750
- Major dental treatment – 750
- Repatriation
- Maternity cover
- Emergency medical cover (outside of area)
– max. 30 days up to 30,000
- Compassionate emergency visit benefit

Silver (750,000 €/£/\$)

- Inpatient and day-patient treatment
- Cancer cover
- Outpatient treatment – 2,500
- Repatriation
- Compassionate emergency visit benefit

Bronze (500,000 €/£/\$)

- Inpatient and day-patient treatment
- Cancer cover
- Outpatient treatment – 1,000
- Repatriation
- Compassionate emergency visit benefit

For full details about cover and limits see the summary of benefits on pages 10 to 13.



Freedom Worldwide can be personalised with further options:

Areas of cover

Freedom Worldwide can provide benefits for three areas:

- Europe
- Worldwide excluding USA
- Worldwide



Voluntary excesses

Premiums can be reduced by including a voluntary excess:

Excess per person, per year (€/£/\$)	Premium reduction
50	5%
100	10%
250	15%
500	20%
1,000	25%
2,500	30%
5,000	40%

The excess applies to each insured person for each period of insurance unless otherwise stated. Discounts may be changed without notice.

Payment of the premium

The premium can be paid in Euros, Pound Sterling or US Dollars. The benefit will be paid in the same currency.

The premium can be paid in full at the start of the policy by SEPA direct debit (euros only), credit card or bank transfer. The premium can also be paid by monthly SEPA direct debit or quarterly by credit card or bank transfer (details available on request).

What is not covered?

As with most health insurance policies, there are things we do not cover. Some examples of these are shown below. This is not a full list of all the exclusions so please ask for a copy of our Insurance Product Information Documents (IPIDs) or the full terms and conditions for further information.

- Treatment outside the geographical area of cover unless for emergencies.
- Treatment not pre-authorised in advance.
- Care and/or treatment of drug addiction or alcoholism.
- Pre-existing conditions (unless we have approved treatment relating to them).
- Cosmetic surgery.
- Excess (optional).
- Professional sports injuries.
- Self-inflicted injuries.
- Sexual dysfunction.
- Weight loss surgery.

A policy may include cover for some of our exclusions depending on the specific cover purchased.

Ask us for more information

For more detailed information about the benefits provided by Freedom Worldwide, including the relevant limits that apply, please see pages 10 to 13 of this brochure. Alternatively, please ask for a copy of our Insurance Product Information Documents (IPIDs) and policy documents.



Summary of benefits

Freedom Worldwide	Diamond	Platinum	Gold	Silver	Bronze
Maximum limit, per policy year	2,000,000	1,500,000	1,000,000	750,000	500,000
Currency	€/£/\$	€/£/\$	€/£/\$	€/£/\$	€/£/\$

Note: All benefit limits apply to each insured person in each period of insurance unless otherwise stated.

A.	Inpatient & day-patient benefit	Diamond	Platinum	Gold	Silver	Bronze
1	Hospital accommodation – costs of a standard single en-suite room.					
2	Nursing fees, medical expenses and ancillary charges.					
3	Prescription drugs and dressings.					
4	Operating theatre charges, surgical drugs and dressings.					
5	Surgeon's, anaesthetist's and consultant's fees.					
6	Surgical appliances which form a permanent and integral part of the body.					
7	Organ transplant – surgical procedure in performing the following organ and/or tissue transplants: heart, heart/valve, heart/lung, liver, pancreas, pancreas/kidney, kidney, bone marrow, parathyroid, muscular/skeletal and corneal transplants.	Covered up to 300,000	Covered up to 250,000	Covered up to 200,000	Covered up to 100,000	No cover available
8	Oral surgical procedures as specified in our definition.					
9	Emergency dental treatment required to restore your oral health following a serious eligible accident that requires you being admitted to hospital.					
10	Diagnostic tests, including pathology and radiology.					
11	MRI/CT/PET scans.					
12	Physician and therapist fees including physiotherapy during an inpatient stay.					
13	Psychiatric treatment. 12 month waiting period applies.	Covered up to 30 nights	Covered up to 30 nights	Covered up to 15 nights	Covered up to 15 nights	No cover available
14	Parent accommodation (child aged up to 18).					
15	Inpatient cash benefit where treatment has been received and no charges have been made.	Covered to 200 per night	Covered to 200 per night	Covered to 100 per night	Covered to 100 per night	Covered to 50 per night
16	External prosthesis related to an in/daypatient surgical procedure.	Covered up to 2,500	No cover available			
17	Kidney dialysis - when temporarily for sudden kidney failure resulting from a disease, illness or injury that has been covered by this insurance policy.	Covered up to 20,000 lifetime limit	No cover available			
18	Rehabilitation benefit received on an inpatient basis following from a disease, illness or injury that has been covered by this insurance policy.	Covered up to 13 weeks	Covered up to 13 weeks			
19	Home nursing benefit immediately following or instead of an inpatient stay.	Full refund - 26 weeks	Full refund - 26 weeks	Full refund - 12 weeks	Full refund - 3 weeks	No cover available
20	Local ambulance.					
						Covered in full

Summary of benefits (continued)

B.	Outpatient benefit	Diamond	Platinum	Gold	Silver	Bronze
1	Medical practitioner's, specialist's and consultant's fees, prescribed medicines, drugs and dressings.	Covered in full	Covered up to 10,000	Covered up to 5,000	Covered up to 2,500	Covered up to 1,000 for post inpatient treatment (up to a maximum of 90 days after discharge)
2	Diagnostic tests, including pathology and radiology.					
3	Treatment that maintains and provides relief of symptoms of a chronic medical condition that has been diagnosed after the start date of the policy or agreed to be covered by us at the time of application.					
4	Physiotherapy by a registered physiotherapist, when referred by a medical practitioner, specialist or consultant.	Covered up to 2,000	Covered up to 1,500	Covered up to 1,000	Covered up to 500	No cover available
5	Chiropractic, osteopathic, homeopathic, Chinese herbal medicine and acupuncture.	Covered up to 2,000	Covered up to 1,500	Covered up to 1,000	Covered up to 500	No cover available
6	MRI/CT/PET scans.				Covered in full	
7	Outpatient surgery.				Covered in full	
8	Emergency dental treatment required to restore your oral health following a serious eligible accident.				Covered in full	
9	Psychiatric treatment. 12 month waiting period applies.	Covered to 30 visits	Covered to 15 visits	Covered to 10 visits	Covered to 5 visits	No cover available
10	Hormone replacement therapy.	Covered up to 350	Covered up to 250	Covered up to 250	Covered up to 250	No cover available
11	Routine health checks including cancer screening. 12 month waiting period applies.	Covered up to 1,000	Covered up to 500	Covered up to 200	Covered up to 100	Covered up to 50
12	Vaccinations (excluding travel vaccinations). 12 month waiting period applies.	Covered up to 300	Covered up to 200	Covered up to 200	Covered up to 100	No cover available
13	Medical aids and devices - including the hire of mobility aids (such as crutches, casts, splints, canes, slings, trusses, braces, orthotics and the temporary rental of a wheelchair when prescribed by a Physician or Surgeon). 12 month waiting period applies.	Covered up to 2,000	Covered up to 1,500	Covered up to 1,000	Covered up to 500	No cover available
14	Hearing test. 12 month waiting period applies.	One per year	One per year	No cover available	No cover available	No cover available
15	Hearing aid benefit. 12 month waiting period applies.	Covered up to 300	Covered up to 150	No cover available	No cover available	No cover available

Summary of benefits (continued)

C.	Cancer benefit	Diamond	Platinum	Gold	Silver	Bronze
1	Oncology tests, drugs, consultant's fees including cover for chemotherapy and radiotherapy, when the treatment is aimed to cure the cancer.			Covered in full		
2	Treatment on an inpatient, day-patient or outpatient basis that maintains, monitors and provides relief of symptoms of cancer that is diagnosed as a chronic medical condition.			Covered in full		
3	Palliative treatment and end stage medical care of cancer that has been diagnosed as terminal.			Covered in full		

D.	Terminal illness benefit	Diamond	Platinum	Gold	Silver	Bronze
1	End of life (hospice care) medical care within a hospice.	Covered up to 14 nights	Covered up to 14 nights	Covered up to 14 nights	Covered up to 14 nights	No cover available
2	HIV and AIDS where contracted as a result of a blood transfusion.	Covered up to 7,500 (lifetime limit of 37,500)	Covered up to 5,000 (lifetime limit of 37,500)	Covered up to 2,500 (lifetime limit of 37,500)	No cover available	No cover available

E.	Dental and optical outpatient benefit (Note: Optical - If you wear glasses or contact lenses prior to the start date of your policy, replacement spectacles, contact lenses or laser eye surgery are excluded from benefit)	Diamond	Platinum	Gold	Silver	Bronze
1	Minor dental treatment – one annual check-up, diagnostic tests, and one annual scale and polish. 6 month waiting period applies.	Covered up to 1,500 (10% co-pay applies)	Covered up to 1,000 (10% co-pay applies)	Covered up to 750 (10% co-pay applies)	No cover available	No cover available
2	Major dental treatment - gum treatment, crowns, bridges, inlays and extractions are included. 6 month waiting period applies.					
3	Emergency outpatient dental treatment – treatment received for the immediate relief of dental pain, including temporary fillings, limited to 3 fillings per policy period, and/or the repair of damage caused in an accident. The treatment must be received within 24 hours of the emergency event. This does not include any form of dental prostheses or root canal treatment.	Covered up to 1,500 (10% co-pay applies)	Covered up to 1,000 (10% co-pay applies)	Covered up to 750 (10% co-pay applies)	No cover available	No cover available
4	Dental surgery to include extraction of teeth and root canal surgery. 6 month waiting period applies.					
5	Orthodontic treatment for an insured person under 19 years of age only. 12 month waiting period applies.					
6	Optical eye test. 12 month waiting period applies.	One visit per year	One visit per year	One visit per year	One visit per year	No cover available
7	Optical - vision aids (spectacles and contact lenses). 12 month waiting period applies.	Covered up to 300	Covered up to 100	No cover available	No cover available	No cover available
8	Laser eye surgery. 12 month waiting period applies.	Covered in full	Covered in full	Covered in full	No cover available	No cover available

Summary of benefits (continued)

F.	Medical evacuation & repatriation benefit	Diamond	Platinum	Gold	Silver	Bronze
1	Emergency evacuation to the nearest available and most appropriate medical centre if adequate treatment not available locally.			Covered in full		
2	Accommodation (4 and 5-star excluded) following discharge after evacuation of medically unable to return home.	Covered up to 7 nights				
3	Economy class return airfare to country of residence following completion of treatment.			Covered in full		
4	Hotel accommodation for ongoing treatment.			Covered in full		
5	Economy travelling expenses for a companion.			Covered in full		
6	Repatriation of mortal remains/local funeral when death is outside home country.			Covered in full		

G.	Compassionate emergency visit benefit	Diamond	Platinum	Gold	Silver	Bronze
1	Economy class return air ticket to return home in the event of the death of a close family member under 70 years of age.			Covered in full		

H.	Maternity benefit Cover only becomes available for treatment received 10 months after the policy inception	Diamond	Platinum	Gold	Silver	Bronze
1	Any medically necessary costs incurred during a routine, non-complicated pregnancy or childbirth, including hospital charges, specialist fees, the mother's pre- and post-natal care and midwife fees.	Covered up to 10,000	Covered up to 7,500	Covered up to 2,500	No cover available	No cover available
2	Newborn care after a covered pregnancy – we will provide cover for reasonable routine accommodation charges of your newborn. We will also provide cover for necessary examinations before discharge.					
3	Complications of pregnancy and childbirth (abnormal presentation, including ectopic pregnancy, miscarriage; missed abortion; pre-eclampsia, gestational diabetes, hydatidiform mole that arise during the antenatal stages of pregnancy and medically necessary caesarean sections).	Covered in full	Covered up to 15,000	Covered up to 10,000	Covered up to 2,500	No cover available
4	Birth defects and congenital abnormalities.	Covered up to 20,000	Covered up to 20,000	Covered up to 10,000	No cover available	No cover available
5	Newborn accommodation when staying in hospital with the mother.			Covered in full (maximum of 10 nights)		

I.	Emergency medical cover (Outside of area)	Diamond	Platinum	Gold	Silver	Bronze
1	Cover for emergency medical treatment outside your area of cover.	Covered up to 50,000	Covered up to 40,000 for a maximum of 60 days	Covered up to 30,000 for a maximum of 30 days	No cover available	No cover available

Underwriting and membership

The following pages outline our acceptance criteria for individual policies. However, all policies are subject to underwriting acceptance and we reserve the right to alter our acceptance terms without notice.

Individual policies			
Minimum adult age	18 years old at policy inception	Maximum adult age	74 years old at policy inception (ages 71-74 must be full medical underwriting)
Minimum child age	None		
Maximum child age	20 years at policy inception. Children can remain on the policy until the renewal date following their 21st birthday (or their 24th birthday if in full time education)		
Underwriting options available	<ul style="list-style-type: none">• Full medical underwriting• Continued personal medical exclusions• Moratorium underwriting• Switch moratorium underwriting		
Eligibility	This policy is available to eligible EEA individuals and their dependants in countries where the underwriter is legally permitted to transact private medical insurance. This policy is not available to residents of the USA residing in the USA, those persons who are subject to exchange controls or where the purchase of this policy is illegal under local legislation		

Occupations we do not cover

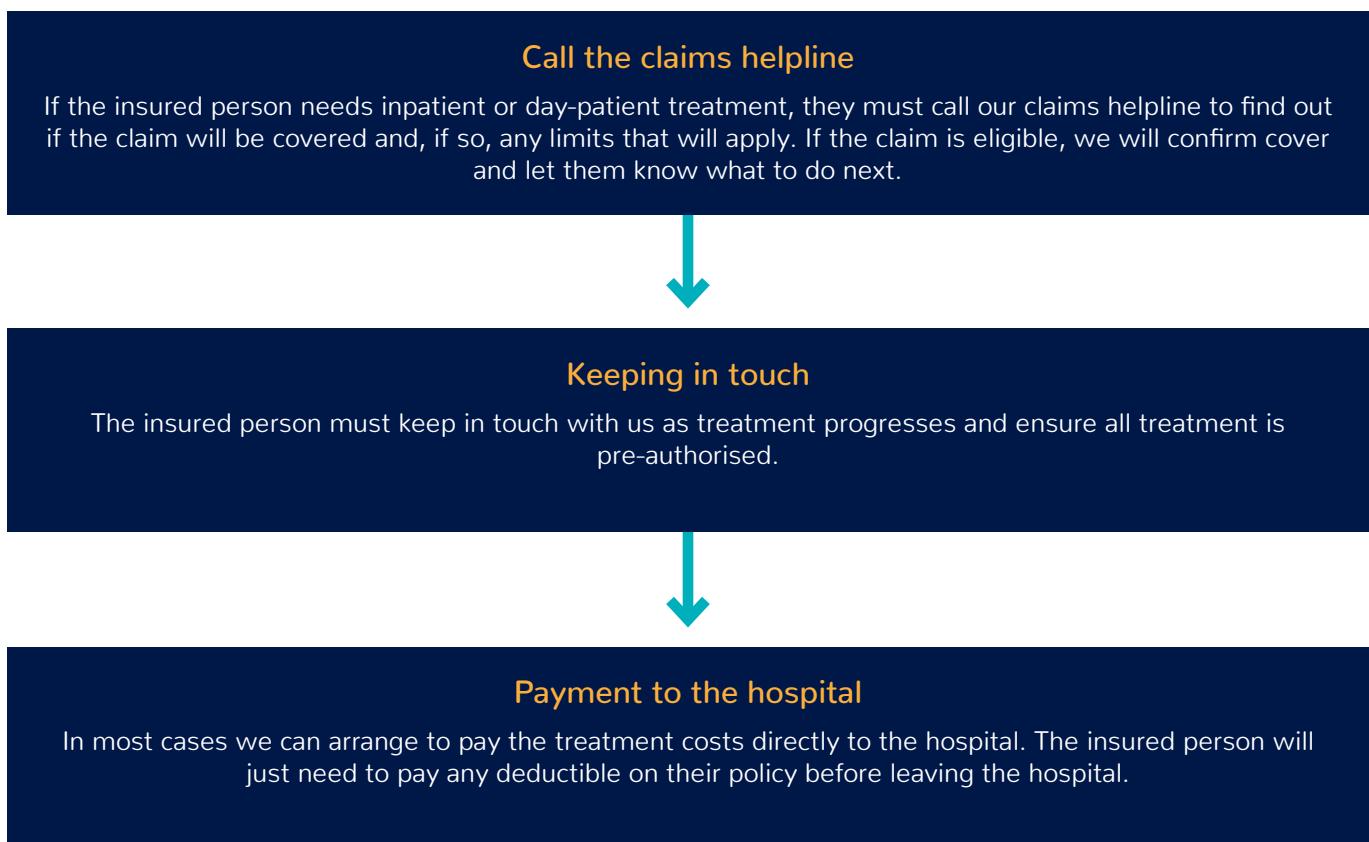
- Offshore workers.
- Entertainers including circus performers, dancers, acrobats, stunt persons. We will consider actors, musicians and singers.
- Underground workers (not including underground transport staff).
- Professional and semi-professional sports persons.
- Asbestos workers.
- Civil and heavy engineering workers (who work on site).
- Quarrying and mining workers.
- Underwater workers.
- Members of the armed forces or emergency services (Police, Fire, Ambulance).

This list contains a sample of occupations that we are unable to cover. Please contact us regarding specific occupations.

Making a claim

When an insured person needs to make a claim with Freedom Worldwide, they will find our process simple and straightforward. Our friendly and knowledgeable team aims to answer any questions they may have about their claim in a caring and understandable way.

Inpatient/day-patient claims:



Eligible outpatient claims are paid on a reimbursement basis.

Full details about the Freedom Worldwide claim process will be provided in the policy documents at the start of the policy.

How to contact Freedom Health Insurance

Get a quote & general enquiries

Phone: +44 (0)1202 283 581

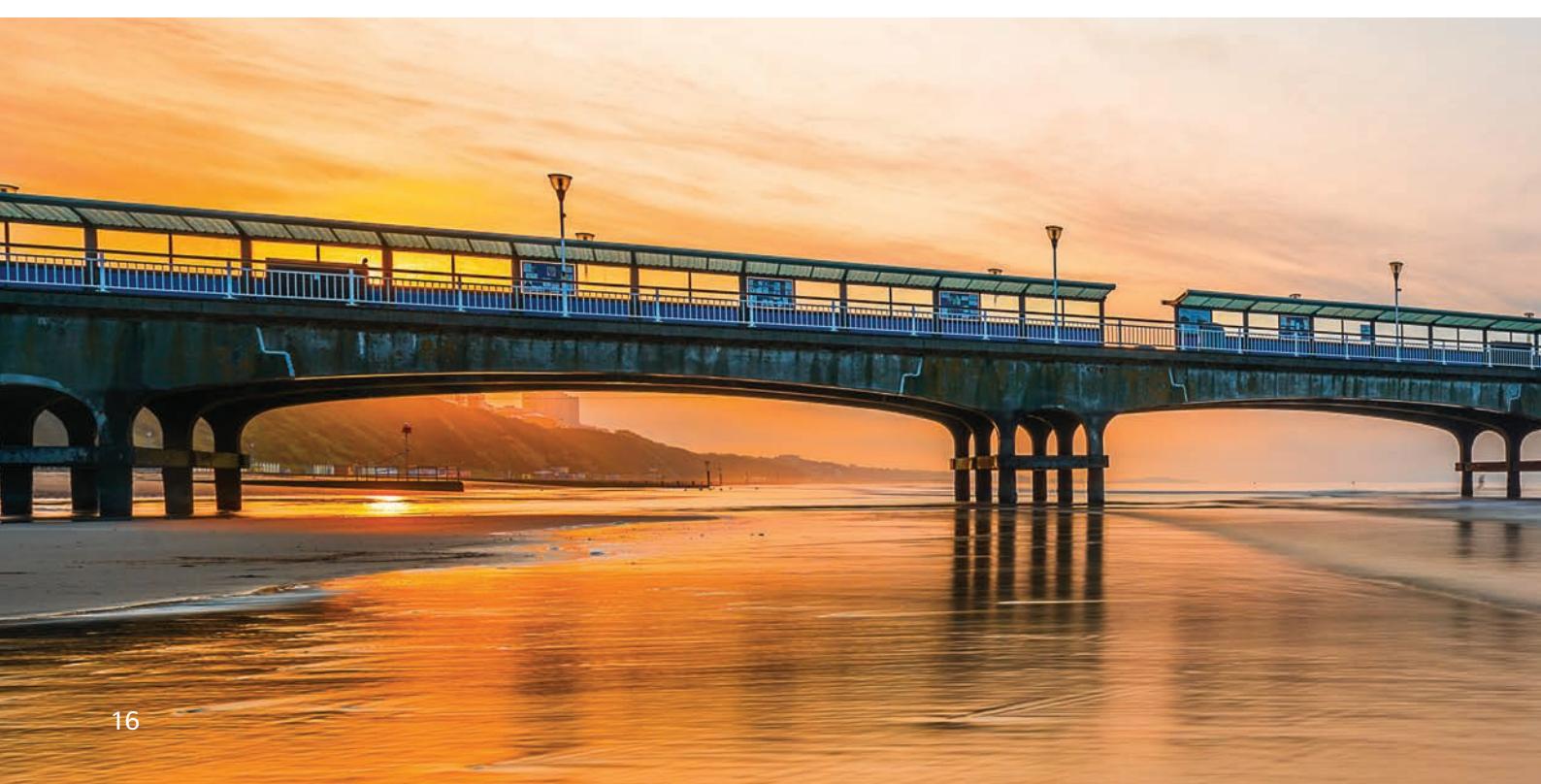
Email: info@freedomhealthinsurance.de

Making a claim

Phone: +44(0)1202 755 578 or +44 (0) 1202 756 350

Email: intclaims@freedomhealthinsurance.de

An insured person can call the claims helpline if they want to make a new claim, if they need further treatment, if they have a question about an existing claim or if they want to know whether a specific treatment would be covered.



Become a Freedom intermediary

Phone: +44 (0)1202 283 582

Email: info@freedomhealthinsurance.co.uk

International call charges may apply when calling from outside the UK.
For more information, please contact your network provider.

Calls may be recorded and monitored for training and quality purposes.

Our address

All written correspondence should be sent to:

Freedom Health Insurance
County Gates House
300 Poole Road
Poole
Dorset
BH12 1AZ
United Kingdom

www.freedomhealthinsurance.co.uk





www.freedomhealthinsurance.co.uk

FREEDOM WORLDWIDE DE | BROCHURE | 01/09/2021

Freedom Health Insurance is a trading name of Freedom Healthnet Limited.

Freedom Healthnet Limited is authorised and regulated by the Financial Conduct Authority with the registration number 312282.

Registered address: County Gates House, 300 Poole Road, Poole, BH12 1AZ. Company registration number: 04815524.