

Your guide to

Benenden Healthcare

May 2026



In this document

1

Welcome to Benenden Health

Page 4

Introducing you to Benenden Healthcare and everything that makes us, us.

2

Before you get started

Page 7

Key principles and information that'll help you better understand how our services work and any limitations. This section also features our glossary which lists important words and their definitions.

3

Services summary

Page 11

A snapshot of the various healthcare services that can be accessed or requested as part of your membership.

4

Our services

Page 15

All the information you need about the services you can access and request.



5

Membership advantages

Page 37

There's more to Benenden Healthcare than just feeling better. This section showcases features of your membership designed to support your health and wellbeing.

6

Other important information

Page 41

Key details about your membership. Including important information and contact details, making sure you have everything you need.



Your guide to Benenden Healthcare

1

Welcome to

Benenden Health



Welcome to Benenden Health

If you're reading this, you've joined (or are thinking about joining!) the 870,000+ members, including employees of over 2,000 businesses, who already benefit from affordable private healthcare with Benenden Health.

In this guide, we'll walk you through all the services and benefits we offer.

Maybe you need a quick answer from a GP, or you need support to get a medical diagnosis. Or perhaps you've got fitness goals to hit or need somebody to talk to about your mental health. Where we can help, we will.

A little bit about us

We're proud to be a mutual organisation focused on our members – not any shareholders. As a not-for-profit, we focus on helping our members and not on maximising profits – reinvesting and actively engaging members to shape our products and services.

That's what we've been doing since 1905. That's over 120 years of commitment to providing an affordable way for people to look after their health – together.

Our rulebook explains how the Society is run. Check it out here:

 benenden.co.uk/rulebook.

A little bit about our healthcare

Making private healthcare more accessible is what we do.

Our healthcare service is designed to meet the demands and needs of someone seeking non-insured discretionary access to GP services, diagnostics, selected surgical treatments, physiotherapy, and mental health support, as well as private medical insurance to cover the risk of contracting tuberculosis. We are not a substitute for full private medical insurance.

We offer a different approach to private healthcare and if you need a wider range of cover then PMI (private medical insurance) may be more suitable for you.

This guide talks you through all the services we offer, alongside what is and isn't included in each one – *so please give it a careful read through.*

A difference: we're discretionary

We provide private healthcare, but we do it a little differently.

We work on a discretionary basis. This means that our Board decides which services are provided and what's available in each service.

(The only exception is tuberculosis, which we cover on an insured basis instead – [see page 40.](#))

When we change our services, we'll update our website or we'll get in touch with you directly. So all of our members should, at any time, be aware of what's available to them, and what we do and don't provide.

A mutual for all our members

When you join our healthcare you become a member of our mutual society – not a customer.

From voting on important decisions, to sharing your views with fellow members and putting forward ideas, there's lots of ways to have your say. It's completely up to you how involved you want to be, but we encourage all our members to help shape a better Benenden Health.

In fact, our **Neurodiversity and Disability Advice Service** was originally a member suggestion – which just goes to show the impact our members can have.

To find out more, visit: benenden.co.uk/have-your-say



2

Before you get started





Before you get started

Before you dive into the detail of our services, please read the principles below as they'll help you understand how our healthcare works and what you can and can't expect from us.

As well as this information, each individual service also has its own instructions on how to ask for our support, along with what we can and can't help with. (You can also find membership details in our [🔍 Other important information on page 41.](#))

About our healthcare

- Benenden Healthcare is designed for everyday health needs and not to help with emergencies or urgent referrals.
- We don't refund or reimburse services you used before getting authorisation from us.
- Our membership is designed for people living in the UK. (Although our GP and Mental Health Helplines can be accessed while you're travelling overseas.)
- We don't offer ongoing support or monitoring for any long-term conditions.
- If a member is a child or young person, some services may differ or be unavailable. This is explained in the individual services pages.
- We work with third-party service providers who deliver the services outlined in this guide, either directly or through their own healthcare networks. This is explained further in [🔍 Other important information on page 41.](#)

What to be aware of before accessing a service

- For some services, you'll have to get our approval first. Please check "How to get started" on each service page for more information – if you don't have approval, we don't cover the costs.
- When we approve Medical Diagnostics or Surgical Treatment, you'll use our network of approved locations and consultants.
- We don't help with getting a second opinion on any clinical decisions or advice you've already received.
- We take NHS waiting times into account for Medical Diagnostics (3+ weeks) and Surgical Treatment (5+ weeks) when determining if we can help.
- For Medical Diagnostics we'll need an NHS Referral. ([🔍 See our glossary on page 10.](#)) For Surgical Treatment we'll need you to send us your consultant's report.
- You can only have one open service at a time for Physiotherapy, Medical Diagnostics, or Surgical Treatment. However, if you need another one of these services on the same body part, for the same condition, we may still be able to help.
- In some cases, we might refer you back to your GP or the NHS for treatment – even if we've already authorised support.
- For Physiotherapy, Medical Diagnostics and Surgical Treatment, we don't help with the same medical issue in the same area of your body if it's within 2 years of when we first authorised support.
- Please note, if a member is under 16, accessing some of our services may require an adult to be present. We'll let you know if this is the case when accessing these services.



Glossary

We have a few words we use in this guide which have specific meaning:

Benenden Health

The brand name of The Benenden Healthcare Society Limited (the provider of Benenden Healthcare).

Benenden Healthcare

The name of our healthcare product that includes services made available to members as described within this guide.

Cost of membership

This is the monthly cost charged to members for membership. In our rulebook this is referred to as contributions and contribution rate.

Member

This is a person who has joined Benenden Health as a member or a person who has been added to someone's membership.

NHS Referral

An official referral given by any NHS clinician. This may include (but is not limited to), GP, Advanced Nurse Practitioner, Advanced Care Practitioner and Physiotherapist. A referral from an optician may be accepted if you need support for cataract diagnostics.

Please note – your referral letter must specify your registered GP practice.

United Kingdom

The United Kingdom of Great Britain and Northern Ireland.

We, our, us

Where this guide refers to services using terms such as "we", "our" or "us", this means either Benenden Health or, where a service is described in this guide as provided by a third party service provider, that third party service provider. Additional benefits are provided by Benenden Health and third parties.

You

Where this guide refers to services using terms such as "you", this means a member.

3

Services

summary



Services, at a glance

As a member you can access and request a wide range of services to support your health and wellbeing!

We've summarised them so that you can quickly get a sense of your membership – but please make sure you read the following pages before accessing or requesting any services.

24/7 GP Helpline

Do you or a family member need to speak to a GP? You can book a telephone or video consultation.

 [See page 16](#)

24/7 Mental Health Helpline

Don't struggle in silence – call our Mental Health Helpline at any time, 24/7. We can offer advice and signposting for mild to moderate mental health challenges – things like stress, anxiety, or low mood. Help with legal or debt worries is also available.

 [See page 18](#)

Adult Care Advice Service

You can request to speak with advisers who are on hand to give advice and guidance on all aspects of anything care related. That could be short or long-term care for yourself or your family.

 [See page 20](#)

Neurodiversity and Disability Advice Service

If you want advice on neurodiversity and/or disability for yourself or your family, then you can request to speak with an adviser. They'll answer your questions, offer advice and signpost how to get extra support.

 [See page 22](#)

Medical Diagnostics

Been referred for a test or consultation by your GP? We might be able to help you get quicker access to the answers you need when you're facing a wait on the NHS.

 [See page 24](#)

Physiotherapy

You can request support to help recover from injuries and improve your overall physical health. Following a quick assessment, we may offer short-term structured support focused on getting you back to your best.

 [See page 27](#)

Mental Health Support

As well as our 24/7 Mental Health Helpline, you can also request more short-term structured support. This focuses on mild to moderate mental health challenges – things like stress, anxiety, low mood or if you're dealing with a tough situation.

 [See page 29](#)

Cancer Advice Service

We're here to help you navigate cancer with support and care. You can request a dedicated care team to answer your questions and give you practical and emotional support when you need it most.

 [See page 31](#)

Surgical Treatment

When you need an operation, timely access can make a big difference to you feeling well again. That's why if you've been referred for surgical treatment and are facing a wait on the NHS, you can ask for help with selected surgeries in our approved network.

 [See page 33](#)



Access your membership on the go with the Benenden Health App

You can easily access benefits of your membership while you're on the go (or anywhere, really) with our app. If you're a member, it's a really handy way to access loads of our services and manage your account. It's also home to our Wellbeing Hub, which includes all kinds of extras like healthy recipes, exercise videos and live classes.

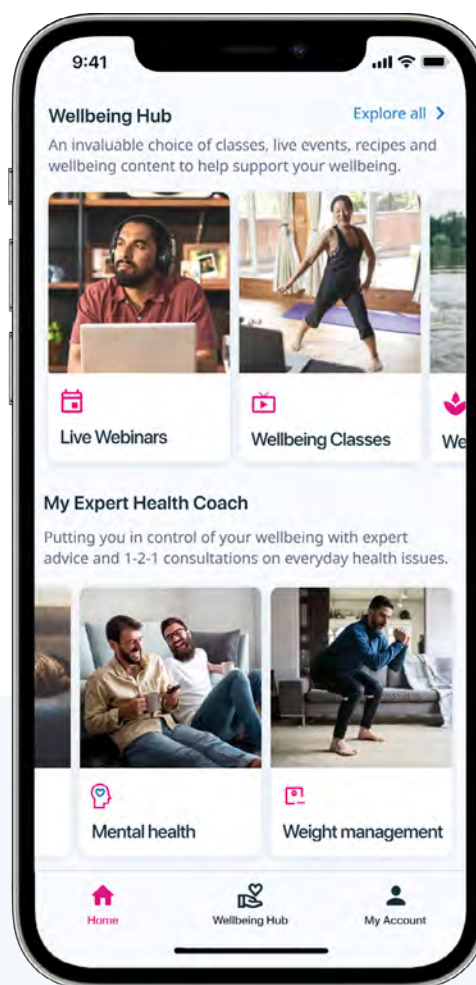
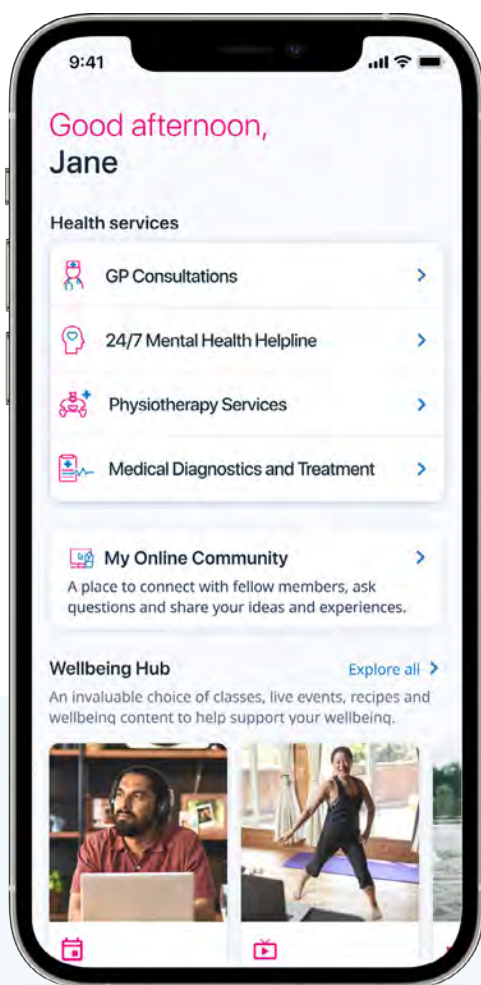
If you want to access the app, you'll need to use your My Benenden account credentials to log in. (If you don't have an account, create one at [My.Benenden.co.uk](https://my.benenden.co.uk))

Scan the QR code to download the app



Download on the
App Store

GET IT ON
Google Play



4

Our

services



24/7 GP Helpline

In a nutshell:

We know it's not always easy to book a clinician at your General Practice surgery. So, if you have a problem, our helpline gives you quick and easy access to a qualified UK-based doctor to help.

We're here for your family too. You can arrange an appointment for yourself, your partner, your children (below the age of 19 or in full-time education) or anyone you have a legal power of attorney for – even if they're not members.

What's included:

You can use our app or call to book an appointment for yourself 24 hours a day, 7 days a week. When booking your appointment with a doctor you can choose between a phone or video appointment. We can only book appointments for your family over the phone – not through the app.

If the doctor thinks it's right, they can give you a private prescription. You can choose to pick it up from a local pharmacy or have it sent directly to you. Just so you know, you'll have to pay the medication and delivery cost. (We'll let you know the costs before you make any decision).

You can use this service when travelling overseas, but private prescriptions will be unavailable.

When can I get an appointment?

When you get in touch, our app or adviser on the phone will tell you when the next available doctor is free to call you back, or you can choose another available time which suits you.

Telephone appointments are available 24 hours a day, 7 days a week. And our video consultations are available every day apart from Christmas Day, 8am to 10pm.



What's not included:

- We don't assess your condition when you get in touch to book an appointment, so if you think your situation is urgent call 📞 **111** or if it's an emergency 📞 **999**.
- Our helpline isn't designed to replace your registered GP doctor.
- We don't help with ongoing treatments, repeat prescriptions, investigations, or antenatal care.
- And if the doctor thinks it's right, they might refer you back to your registered GP doctor, if that's the most appropriate route forward.
- We don't accept a referral from the helpline to access a different service from us (for example, you would still need an NHS Referral to apply for any Medical Diagnostics or Surgical Treatments).
- This helpline's doctor can only issue private prescriptions, so you'll have to pay any prescription and delivery costs.
- We don't issue prescriptions if you're travelling overseas.



How to get started:

To get started you'll need to book an appointment.

Either log into the Benenden Health App or call us on 📞 **0800 414 8247**

If the appointment is for a family member then please call us – you can't book on the app.

Whether you book through the app or on a call, you'll be contacted by the doctor at your appointment time.

24/7 Mental Health Helpline

In a nutshell:

Supporting your mental health is just as important as your physical health. Some days you'll feel great, other days just okay, and sometimes you might feel low. Our helpline is here to help with mild to moderate mental health challenges – things like stress, anxiety, low mood or if you're dealing with a tough situation.

What we can help with:

We'll connect you with a Counsellor or Assistant Psychologist. They'll work with you to explore your feelings, find ways to feel better, and discuss strategies to manage everyday ups and downs.

We could support when you're experiencing everyday concerns such as mild to moderate stress, anxiety, low mood or if you're dealing with a tough situation. We can offer advice and signposting relating to bereavement, relationship challenges, legal and/or debt worries.

Members under the age of 16 will need to have their parent or guardian with them when they call.



What's included:

You don't need to book an appointment as you can access our helpline 24 hours a day, 7 days a week – even when travelling overseas.

We'll give immediate emotional support and guide you to appropriate services and resources.

Following an assessment, we may also offer structured short-term support.  **See our Mental Health Support service on page 29.**

You have to be at least 11 years old to use this service.

What's not included:

- If you need specialist or longer-term support, then we won't be able to help. If we think that's the case, we might be able to suggest alternative options and offer some signposting.
- Our helpline isn't suitable for ongoing care, support for long-term conditions or difficulties that need higher intensity therapies.

How to get started:

Call us on  **0800 414 8247** and pick option 2.

Or if you're abroad, use  **+44 800 414 8247** and pick option 2.

This helpline is not for mental health emergencies. If you or someone you're concerned about is in immediate danger of hurting themselves or someone else, then call  **999** or the Samaritans on  **116 123**. (This may be a different number if you're travelling overseas.)



Adult Care Advice Service

In a nutshell:

If you look after someone, there's lots of situations where you might find yourself having to get to grips with the adult care system. So if you find yourself arranging adult care, then you can request access to advisers who are ready to answer your questions and offer advice.

We're here for your family too. You can ask for advice for yourself, your partner, your children or your parents and your partner's parents – even if they're not members.

The types of adult care you can get advice on

There's a lot of different types of care we can advise you on, such as:

- Care at home
- Live-in care
- Residential care
- Nursing care
- Assisted living
- Respite care
- Hospital discharge

Some of the specific things they can talk you through are:

- Both short and long-term adult care.
- Working out your care needs, and which care provider will be most suitable.
- Finding out about state funding, including benefits and what you're entitled to.
- Understanding what happens when you get discharged from hospital, as well as how the NHS and Social Services work.
- Signpost you to information and resources to help with remaining independent at home, including home adaptations and assistive devices.



What's included:

You can request a call from an adviser who will discuss your situation, then talk you through next steps. They'll go over the financial, legal and practical aspects of arranging care, as well as offering ongoing support. And all their advice is completely impartial.

What's not included:

- We're an advice service so we don't arrange or fund care.

How to get started:

Call us on  **0300 304 5700** between 8am and 5pm (Monday-Friday). If we can help we'll arrange the first call with an adviser who'll talk you through your next steps.

Neurodiversity and Disability Advice Service

In a nutshell:

We understand the unique challenges faced by neurodiverse people and those with disabilities, and how it's often difficult to know where to turn for support. So, if you need advice, you can request access to advisers who are here to help. They can offer clear signposting, compassionate support and guidance — whether you have a diagnosis or not.

We're here for your family too. You can ask for advice for yourself, your partner, your children or your parents and your partner's parents – even if they're not members.



We can offer advice and guidance on a range of needs

Here are some of the most common:

- Autism
- ADHD
- Gifted
- Down's syndrome
- Specific learning differences (SpLD) including dyslexia, dyscalculia, dyspraxia and dysgraphia
- Physical disabilities, such as muscular dystrophy, cerebral palsy, blindness and visual impairment, and deafness and hearing impairment
- Sensory processing disorder (or SPD), for example being hypersensitive to sound, light, touch, or movement
- Social, emotional and mental health (SEMH) and behaviour issues
- Anxiety disorders or obsessive-compulsive disorders (OCD)
- Speech, language and communication needs (SLCN)

What's included:

We'll connect you to an adviser who'll work to understand your needs and the complexity of your situation, and then identify the best ways to support. They could help with:

- Advice on your condition
- Explaining how to access services, education and employment
- Support for your physical and mental wellbeing
- Understanding your legal rights
- Finding out about state funding, including benefits and what you're entitled to
- Understanding your rights (including employment rights) if you're a parent of a child needing care

What's not included:

- We're an advice service, so we don't arrange or fund diagnoses or care.

How to get started:

Call us on 📞 **0300 304 5700** between 8am and 5pm (Monday-Friday).

If we can help, we'll arrange the first call with an adviser who'll talk you through your next steps.



Medical Diagnostics

In a nutshell:

Sometimes specialised tests or consultations are needed to find out what's wrong with you. But nobody wants to face a long wait to know. That's why when you've been referred by the NHS and there's a wait longer than 3 weeks, you can request help with a private diagnosis up to the value of £2,500.

What could we help with?

Once you have an NHS Referral you can contact us for approval and next steps.

While we don't cover all diagnostic tests and consultations, we could help with:

- Outpatient consultations
- Tests – such as MRI & CT scans, X-rays and diagnostic camera investigations

We take NHS wait times into consideration before approving a request. Please visit benenden.co.uk/nhswait or call us on  **0300 304 5700**

Our network

If you're approved for a consultation or test, we'll refer you to our medical diagnostic network of hospitals and clinics. We'll give you some options, based on the details you give us. We might refer you to our Benenden Hospital in Kent, which is where we'll send you if you live within our calculation of a two-hour drive (and it has what you need).

What's included:

- You can ask for a private test or consultation when you have an NHS Referral and there's a waiting list on the NHS longer than 3 weeks. (See benenden.co.uk/nhswait to find out more).
- For some speciality areas such as joints (orthopaedics) or skin (dermatology), if we approve help, we'll carry out an assessment to work out how we can best help.
- All appointments must take place within 6 months of our initial authorisation.
- If needed, we might be able to help with further support, such as some additional tests and some injections. However, these will need further approval from us.

What's not included:

- We don't refund or reimburse the costs of any test or consultation you've booked by yourself – we'll need to give approval first. [🔍 See How to get started over the page.](#)
- This might sound obvious, but we don't cover any appointments that aren't for diagnosis.
- There are some types of consultations we don't cover – see [🔍 Diagnostics we don't cover.](#)
- We don't cover any costs that go over £2,500 (you can help avoid going over this limit by getting a price guide from the consultant or facility you're using).
- If your condition needs ongoing monitoring, we're unable to help with further tests, consultations or treatments.
- We don't cover any costs that happen 6 months or more after our initial approval.
- We don't help with the same medical issue in the same area of your body if it's within 2 years of when we first authorised support.
- You can only have one open service at a time for Physiotherapy, Medical Diagnostics, or Surgical Treatment. However, if you need another one of these services on the same body part, for the same condition, we may still be able to help.



Diagnostics we don't cover:

We don't help with appointments which are:

- Second opinion consultations
- Diagnostic tests under general anaesthetic
- Related to pregnancy
- Monitoring an ongoing condition
- Cosmetic concerns
- Alternative or complementary therapies, like homeopathy or acupuncture
- Invasive angiograms (such as cardiac catheterisation)
- Pain management
- Any diagnosis where, in our view, it may be safer for you to remain with the NHS (for example, psychiatry, a suspected cancer diagnosis, or when you might need long term support)

How to get started:

The first step is to get your NHS Referral. (This letter should include the details of the test type or consultation you've been referred for.) We'll need the NHS waiting time – your GP will give you this.

Then get in touch with us by logging into the Benenden Health App or call us on

 **0300 304 5700** (with your NHS Referral on hand).

Next, send us a copy of your NHS Referral.

If we're able to approve your request, we'll send you confirmation that your test or consultation is authorised, as well as your options of hospital or clinic where it'll take place.

Then you're good to go to make your appointments!

If you need any follow-up tests or appointments, just get in touch. Your original £2,500 limit applies. You won't need to get a new NHS Referral, but we will need to give you another authorisation.

Physiotherapy

In a nutshell:

If you're struggling with an injury or pain or want to increase mobility, our physio service might be the answer. You can request help with short-term structured support – such as bespoke exercise plans designed to gently tackle minor injuries or pains that have outstayed their welcome, or support from a Physiotherapist or Rehabilitation Therapist.

What's included:

We'll start with an assessment. If we think we can help (this service isn't right for everyone) then we'll provide a guided self-managed exercise plan, or treatment sessions.

Self-managed exercise plan

When this is recommended, a Physiotherapist will put together a bespoke exercise plan you can follow from the comfort of your home. Once you've got your plan, we'll arrange a call with you to make sure you're on the right track.

To get the most out of your exercise plan, it's important to follow the advice you're given and stick with your plan. Skipping parts can make it harder to reach your recovery goals.

Treatment sessions (video calls or in person)

On the other hand, we might recommend video calls with a Rehabilitation Therapist or face-to-face treatment with a Physiotherapist (in our physiotherapy network).

As well as being guided through these sessions, it's likely you'll also get exercises to do at home to support your recovery.

How many sessions?

If we think this is the right option for you, the exact number of sessions will depend on medical needs, as they're tailored to you. We can support up to 6 sessions, but we find that most issues are resolved within 4 to 5 sessions.



What's not included:

- This service isn't designed to help severe, long-term or recurring conditions or to provide longer therapy. As a result, there may be times where we're unable to support.
- We'll send you to a selected specialist in our physiotherapy network. This service doesn't refund or reimburse the costs of physiotherapy treatment you've booked yourself.
- If we've authorised Physiotherapy for the same condition, on the same body area, in the last 2 years, we won't be able to help.
- We can't help with ongoing monitoring of a condition or recurring symptoms.
- You can only have one open service at a time for Physiotherapy, Medical Diagnostics, or Surgical Treatment. However, if you need another one of these services on the same body part, for the same condition, we may still be able to help.

How to get started:

Start your assessment by either logging into the Benenden Health App or calling us on  **0300 304 5700**

Once you've completed an assessment, we'll see if we can help. If so, we'll authorise support and let you know the next steps to begin your recovery journey.

Mental Health Support

In a nutshell:

Sometimes we all need a bit of extra help, especially when it comes to our mental health. You can request support for mild to moderate mental health challenges – things like stress, anxiety, low mood or if you're dealing with a tough situation. If it's clinically beneficial we can help with a short course of structured support.

What's included:

To begin with, we'll run a telephone assessment with you and talk about what you're going through – this will allow us to see if we can help.

Then, if we can, we'll recommend either:

Wellbeing counselling

We'll put you in touch with a Counsellor or Assistant Psychologist in our mental health network, who will guide you through a short course of up to 6 sessions. These can be by video call, over the phone, or in person, depending on what's recommended.

Supported self help

Sometimes developing personal coping strategies can help. If we think that could be the case for you, we'll offer a guided self-help programme, based on cognitive behavioural therapy (CBT).

You'll receive materials and exercises, either online or paper-based, that you work through on your own. To help, a Psychological Wellbeing Practitioner will call you at the start and end of your programme. They'll talk through the exercises and practical techniques for overcoming negative feelings.



What's not included:

If you need specialist or longer-term support, then we won't be able to help. If after our initial assessment we think that's the case, we may offer some signposting.

- We can't initiate, monitor or review any mental health medications, such as anti-depressants.
- We can't offer this service if you're already getting mental health support (for example, from an NHS or private Therapist, Community Psychiatric Nurse, Psychiatrist, or Psychologist or as part of a recovery programme).
- You have to be at least 11 years old to use this service.

How to get started:

Call us on  **0800 414 8247** to see if we can help. If yes, we'll approve support and let you know the next steps.

For members under the age of 16, your parent or guardian will need to call for you. You'll be supported by a clinician experienced with helping children and young people.



Cancer Advice Service

In a nutshell:

There's no sugarcoating how frightening a cancer diagnosis is. A huge part of it is all the unknowns you're suddenly confronted with. That's why you can request access to a dedicated care team to help answer your questions – so whatever you're facing, you won't face it alone.

That extra support when you need it

We're really proud of the difference our service can make to people affected by cancer. It's designed to support with practical and emotional help – not replace the main guidance and treatment you're getting, whether it's from the NHS or a private consultant.

What's included:

We'll start with an introductory call with a nurse and then a dedicated care team will be on hand for 8 additional calls (up to 20 minutes each). They'll discuss specific concerns or questions you may have. As part of your support you can email and message them too.

Everyone's experience with cancer is different, which is why the advice will be tailored to your situation. Here's some of the things they can help with:

- Understanding your diagnosis, and what it might mean for you
- Preparing questions ahead of a consultation, or discussing it afterwards
- Signposting to NHS services and other organisations. They may also recommend Benenden Healthcare services like the 24/7 Mental Health Helpline, Mental Health Support or Physiotherapy
- Emotional support and practical advice for all aspects of living with cancer, including going back to work when you're ready

Since the team is experienced in supporting patients with cancer, they could help spot any gaps in the support you're getting. If they think it's right, they can help in other ways like:

- Offering extra resources, such as relevant reading materials
- Advice on rehabilitation and the importance of physical exercise and healthy diet
- Signposting you to the Benenden Charitable Trust which could help with things like equipment, complementary therapies, special clothes, head coverings (like wigs) or prosthetics ([see page 40 for more info](#))

What's not included:

- This service doesn't refund or reimburse you for anything you buy yourself.
- This service is not available for members diagnosed with basal cell carcinomas.
- If we've helped with our Cancer Advice Service in the last 2 years we don't provide support again if it's the same area of the body.
- This service is unavailable to members under 18 years old.

How to get started:

Call us on [0300 304 5700](tel:03003045700) to see if we can help.

If yes, we'll approve support and let you know the next steps.



Surgical Treatment

In a nutshell:

While the NHS can be brilliant, it's stressful to have to wait for an operation. We're here to help. You can request access to selected surgical treatments when there's a wait on the NHS longer than 5 weeks.

Our network

All operations we help with take place at our approved treatment network of hospitals. That includes our very own Benenden Hospital in Kent, which is where we'll send you if you live within our calculation of a two-hour drive of it (and it offers the operation you need).

How do we choose the surgical treatments on our list?

Like all the services included in our healthcare, surgical treatments are paid for by our membership fees, so we make sure the ones we choose are the best possible value – for all of our members. We do that by following the principles below.

The treatments we cover are:

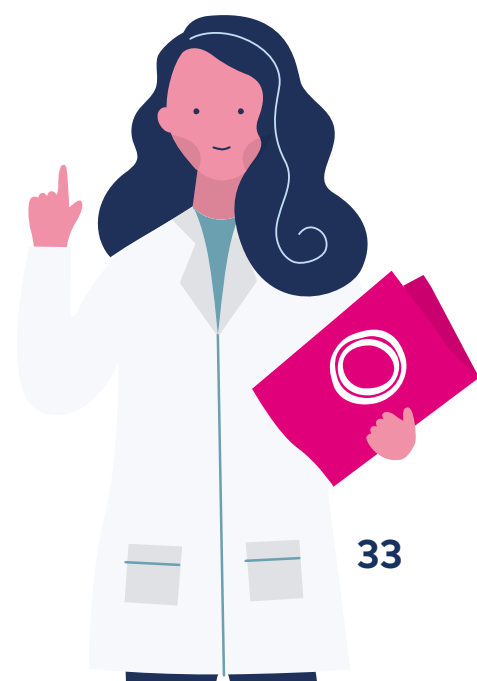
- Carefully chosen so our funds can help as many members as possible.
- Relatively simple, so not big or complicated.
- Generally ones that need under 24 hours in hospital.
- Single operations that don't need repeat procedures or additional monitoring.

Examples of some of the treatment we don't cover:

- Brain, heart and cancer, which the NHS already does well.
- Cosmetic, joint replacements, and varicose veins.

This isn't a full list of what we don't cover. To see what's included visit our approved surgical treatment list at

benenden.co.uk/business-treatments



What's included:

You can ask for private surgical treatment when you have a consultant's report for an operation we can help with and there's a wait on the NHS (see benenden.co.uk/nhswait to find out more).

You can find the full, up-to-date list of what we currently help with, including all the CCSD Codes (see "What's a CCSD code?" over the page) at benenden.co.uk/business-treatments. Please check this regularly as it may change from time to time. We offer selected surgeries and here's an idea of the specialities we could help with:

- Orthopaedic (bones, tendons, muscles and nerves)
- Urology (urinary organs, like kidneys, and the bladder)
- Gynaecology (women's reproductive health)
- Ophthalmology (your eyes)
- Ear, nose and throat
- General surgery (which covers a lot of things that don't fall into one of the categories above)

If the operation you need is on our list, and we approve it ([see How to get started over the page](#)), we'll give you the information to help you make your appointments, and we'll cover the costs directly with the authorised consultant and hospital.

What's not included:

- We don't refund or reimburse the costs of any appointments you've booked by yourself – even if it's one that's on our surgical treatment list. We'll need to give approval first.
See How to get started below.
- And we don't support with any surgical treatments that aren't on our approved surgical treatment list.
- We don't help with any surgical treatment where it might be safer, or more appropriate, for you to stay with the NHS. (You'll be advised and we'll explain why if that's the case.)
- We don't help with the same medical issue in the same area of your body if it's within 2 years of when we first authorised support.
- We don't help with monitoring or treatment for ongoing conditions.
- If your operation requires multiple CCSD codes all CCSD codes must be on our approved list for us to be able to help.

- We won't be able to help if your operation requires more than one surgeon and it's therefore appropriate for you to remain on the NHS.
- You can only have one open service at a time for Physiotherapy, Medical Diagnostics, or Surgical Treatment. However, if you need another one of these services on the same body part, for the same condition, we may still be able to help.

How to get started:

Send a request by logging into the Benenden Health App or call us on  **0300 304 5700**. You'll need to provide your CCSD code and details of the NHS waiting time for your operation – your consultant will give you this.

The next step is to send us your consultant's report. We'll explain how to do this.

Once we've got it, we'll see if we're able to help. If we can, we'll get back in touch with you and advise on next steps.

What's a CCSD code?

CCSD stands for Clinical Coding & Schedule Development, and it's the code used to identify individual operations. It's a capital letter followed by four numbers, and your consultant should be able to let you know what it is.

Adding family

Add your family to your Benenden Health membership

If you've joined Benenden Health through your employer, you can choose to add your family (this could be your partner or your children) to your membership. You'll simply pay an additional cost of membership for each person you add.

What your family will have access to

Anyone you add to your membership will be able to use or request the same Benenden Health services as you. They'll have the same procedures available as you (found at benenden.co.uk/business-treatments). **But when they can start requesting some services** may be different depending on when you add them:

If you add your family within your first 60 days

Your family members will be able to access **all Benenden Health services from day one** of their membership.

If you add your family after 60 days

From day one, they can:

- Use the 24/7 GP Helpline
- Use the 24/7 Mental Health Helpline
- Request to use the Adult Care Advice Service
- Request to use the Neurodiversity and Disability Advice Service

After 6 months, they can request:

- Medical Diagnostics
- Physiotherapy
- Cancer Advice Service
- Mental Health Support
- Help for Tuberculosis

Surgical Treatment they can request:

- after **6 months** of membership, **unless**
- they're living in **Northern Ireland**, in which case they can request after **24 months**

This waiting period is linked to the date they joined and won't change if they move elsewhere in the UK.

Want to add family members?

To find out how much it costs to add someone to your membership, speak to your employer or call us on  **0800 414 8470**.

5

Membership

advantages



Membership advantages

You might think it's only worth glancing at this guide when you're not feeling 100% – but if that's the case, you'll miss out on a whole bunch of features of your healthcare. We've added them all into this section for you.

From discounts from high street brands and online retailers, to handy content to boost your wellbeing, there's a range of perks you can use from day one. These features are designed to help you take care of your money, your wellbeing and your health.

From day 1

Discounts and savings

As a member, you automatically get access to discounts that could make a difference to your pocket. Here are the types of things you may be able to get savings on:

- Gift cards and shopping vouchers
- Gym memberships
- Tech products
- Car leasing and car parking
- Fun days out
- Everyday household appliances

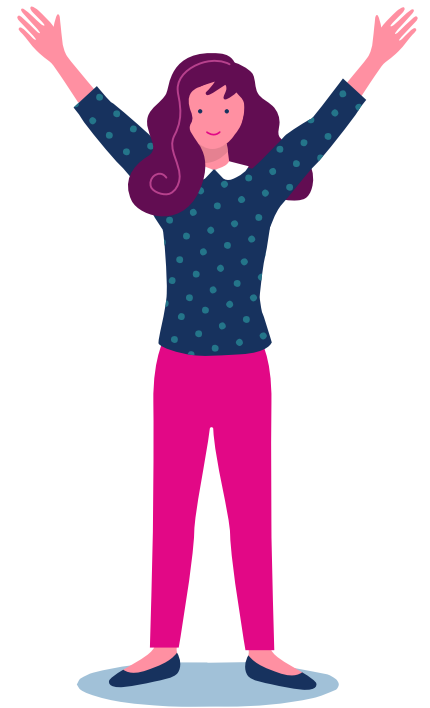
We update these from time to time, so log into our app or [My.Benenden.co.uk](https://my.benenden.co.uk) to find out what's currently available and to check the terms and conditions.

Savings on other products offered by our group

You can also benefit from savings on Benenden Health Assessments, to help you understand your health better and take proactive steps to improve it, and on Benenden Travel Insurance for your next holiday.

And membership gives you the ability to buy the Benenden Health Cash Plan, which helps with everyday healthcare costs such as dental check-ups and eye tests.

To find out more log into [My.Benenden.co.uk](https://my.benenden.co.uk)



Your member magazine – Be Healthy

As a member, you can receive our online magazine, Be Healthy. It's packed full of information from the world of health and wellbeing, as well as features on how to get the most out of your membership.

You can access the magazine in the Benenden Health App, or you can get a copy direct into your inbox by updating your email marketing permission in your My Benenden account, in our app or by calling us.

Health Tool Kit

Like checking your credit score or giving a car an MOT, there's something reassuring about getting a quick review when you need one. Our Health Tool Kit in the Benenden Health App brings together a selection of (you guessed it) tools to see exactly how you're getting on.

To find out what's available, log into the Benenden Health App or head to benenden.co.uk/mobile

Wellbeing Hub

Available in the Benenden Health App, you can access the Wellbeing Hub, with a wide-ranging choice of articles, videos, live events, live and on-demand classes, recordings and much more to support your mental health, fitness and nutritional needs.



Help for Tuberculosis

Benenden Health started in 1905 to care for postal workers with tuberculosis (TB), and we're proud to continue that support today.

If you're diagnosed with TB, we'll cover the cost of treatment. (You'll also have access to the same support we offer through our **Cancer Advice Service** to help you through your treatment.)

And just so you know, treatment for TB is the one service we offer on an insured (not discretionary) basis, so we'll always cover your treatment.

Unlocked after 6 months

Benenden Charitable Trust

We understand that life can sometimes take unexpected turns. Our Benenden Charitable Trust is here to help if you're experiencing financial difficulties or distress because of a health condition or an unexpected change in circumstances – here are some of the things we could support towards:

- Medical treatment not available through the NHS or Benenden Healthcare
- Specialised equipment, like wheelchairs, mobility scooters or stairlifts
- Home adaptations and household repairs
- Short term care and childcare fees
- Everyday living costs

You can apply once you've been a member for 6 months and can still apply even if you're no longer an active member.

Find out more at: benenden.co.uk/charitable-trust



6 Other important information





Other important information

Here you'll find regulatory and other important information, as well as key details about your membership, so please give it a careful read.

Please note: No personal recommendation has been given on the suitability of this product. If in doubt you should seek independent advice.

Calling us

You may get charged when you call us.

Calls to 03 numbers from UK landlines and mobiles cost the same as national rate calls to 01 or 02 numbers. If your landline or mobile tariff includes free calls to 01 or 02 numbers, calls to 03 numbers will also be included. 0800 and 0808 calls are free of charge from UK landlines and mobile phones.

And if you do phone us, your call may be recorded for training and quality purposes.

Becoming a member

Anyone over the age of 16 who lives in the UK can become a member. If you're a paying member you can also add family to your membership, no matter their age.

If you plan to move outside the UK, you can remain a member but the range of services you can access will become much more limited. If you do plan to move abroad, then please let us know.

Adding family to your membership

If you're a paying member (or if your employer pays for you) you can protect your family by adding them to your membership.

 **Find out more on page 36.**

To add them:

If your employer pays for you, you'll have to speak to them first, or call us on

 **0800 414 8470.**

When your services start

Access to the services starts from the date you join. From this date you can access the 24/7 GP and Mental Health helplines. You can also request Adult Care Advice Service, Neurodiversity and Disability Advice Service, Medical Diagnostics, Physiotherapy, Mental Health Support, Cancer Advice Service, Surgical Treatment and Help for Tuberculosis.

Are there any restrictions?

We've highlighted general restrictions in  **Before you get started on page 7**. And we've highlighted any restrictions to a particular service in the "What's not included" section for each service.

When there are additional exclusions relating to a specific service, we'll let you know about these in our letter of authorisation.

Changes to our services

As we've mentioned, we work on a discretionary basis (the exception is our Help for Tuberculosis, which we cover on an insured basis –  **see page 40**). This means that our Board decides which services are provided and what's available in each service.

We regularly review our services and may make updates from time to time. If we make any changes, we'll keep you informed through our website or by contacting you directly.

Costs and payments

We regularly review the Cost of Membership, and if we take payment direct from you we'll contact you about any changes in advance.

Your membership will continue unless payments stop, or we cancel your membership.  **See What we expect from you on page 45.**

If you've joined through your employer, you can always find the current cost on our website at  **benenden.co.uk/business**.

It's important to keep your payments up to date. If your payment method is cancelled, withdrawn, or stopped and payment falls behind, then you won't be able to request or use our services – even if we've already authorised a service.

Continuing your membership

If your employer ends your membership with us, your access to our services may come to a stop. But don't worry, you've got the option to keep things going by switching to a personal membership and paying the Cost of Membership yourself (you can always find the current cost on our website at  **benenden.co.uk/healthcare**). Get in touch with us and we can help.

How to cancel your membership

If your membership through your employer ends but you've added family and pay us by Direct Debit, then we'll update your payment to include your Cost of Membership. We'll let you know if this happens. If you don't want your Direct Debt to increase, please contact us.

We hope you never leave us, but if you do, you have 14 days from the day you get your first welcome pack to cancel your membership. If you cancel within that time, we'll refund any payments you've made.

If you cancel after the initial 14-day period, your membership will stop at the end of the month you cancel in, and your payments will stop at that time. If you've paid for your membership quarterly or annually in advance, we'll refund the cost of any full months you've paid for already.

When you cancel, you'll still be able to use and request services until the end of the month, covered by your last payment.

To cancel your membership, you can:

- Call us on  **0800 414 8480**
- Email us at  **memberrelations@benenden.co.uk**
- Write to us at:
Membership Team
Benenden Health
Holgate Park Drive
York
YO26 4GG

Please include your membership number in any emails or letters.

If you joined through a corporate scheme, you'll need to tell your scheme to cancel your membership. They'll also process any refunds owed. And if you've joined through an employer's flexible benefits scheme, your right to cancel may be restricted by the rules of that scheme.

If you have a complaint

We always aim to offer a caring and effective service, but if there's a problem with your membership or any of the services we offer, we want to hear about it. Your feedback helps us to do and be better.

We'll handle your concerns as quickly and effectively as possible, and if we've made a mistake, we'll do our best to put things right.

If you need to make a complaint, you can:

- Call us on  **0300 304 5700** or send us a message via our website.
- Email us at  **complaints@benenden.co.uk**.

- Write to us at:
Customer Complaints team
Benenden Health
Holgate Park Drive
York
YO26 4GG

If your complaint is related to a specific service, then we may need to refer you to the relevant service provider, but we'll let you know who to speak with and how.

Not happy with the resolution?

If you're still unhappy after we've investigated your complaint through our internal complaints procedure (available at benenden.co.uk/complaints), you may be able to refer your complaint to the Financial Ombudsman Service. They'll be able to advise you on whether they can review your complaint:

Financial Ombudsman Service
Exchange Tower
London
E14 9SR

✉ complaint.info@financial-ombudsman.org.uk

☎ **0800 023 4567** (Calls are free from mobiles and landlines)

🖱 financial-ombudsman.org.uk

If the Financial Ombudsman Service is unable to review your complaint, we can direct you to an alternative dispute resolution service. Please email us at ✉ complaints@benenden.co.uk if you'd like more information.

Financial Services Compensation Scheme

In the unlikely event that we can't meet our financial obligations for Benenden Health's contractual business (🔍 [See Help for Tuberculosis](#)), you may be entitled to compensation from the Financial Services Compensation Scheme. This will depend on the circumstances of your claim. The FSCS may arrange to transfer your tuberculosis cover to another insurer, provide a new policy or, where appropriate, provide compensation. More information is available at www.fscs.org.uk or by calling the FSCS on ☎ **0800 678 1100** or **020 7741 4100**.

What we expect from you

It's important to keep your personal details current, correct, and complete. The quickest way to update your details is by logging into My Benenden or our app – alternatively you can call us.

We don't tolerate misuse or abuse of our services. If you verbally or physically abuse or threaten any of our employees or representatives, we may refuse further services and cancel your membership.

If you miss a medical appointment that we've authorised or has been arranged, you might not be allowed to ask for further services for the same healthcare issue.

If you're discharged from a diagnostic or treatment facility (or any other medical establishment) due to behaviour or against medical advice, you may no longer be eligible for further services for that healthcare issue, and your membership may be cancelled.

If you misuse our funds or knowingly provide false information when asking to use a service, you may have to repay any related costs. We may also cancel your membership.

Need extra assistance accessing services?

We understand some members may have different communication needs when contacting us. That's why we're here to help you access our services and information.

Some benefits can be directly accessed via the Benenden Health App – you can download the app from the Apple App Store or Google Play Store.

If this isn't suitable for you, or you need extra support, please call  **0300 304 5700** or email us at  **memberservices@benenden.co.uk** and we'll update our records to make sure we support your needs the best we can.

We also offer Relay UK, which is a free service designed to help people with hearing loss, deafness, or speech impairments to communicate over the phone.

If you need our printed materials in large print or braille, let us know. You can also call us, email or write to:

Membership Team
Benenden Health
Holgate Park Drive
York
YO26 4GG

Sharing information about your support needs

Although we may be aware of your support needs, we don't share this information with our third-party healthcare providers. They'll follow their own processes for accommodating your additional needs, based on information you provide as well as any clinical assessments and/or advice from your GP.

Support with managing your membership

In some situations, you may need to allow someone else to access or manage your membership. Contact us on  **0300 304 5700**

for more information on setting up a third party representative, or notifying us of a power of attorney or a Court of Protection Order.

Support following the death of someone close to you

Losing someone close is always a difficult time. We're here to help make it as easy as possible to stop a membership. Contact us on  **0300 304 5700** and we'll provide you with all the relevant information and guidance – we'll need their name, date of birth, address and the date they passed away. There's no need to send us any documentation unless we ask you to.

Privacy notice

We follow the UK's data protection laws, including the Data Protection Act 2018 and the UK General Data Protection Regulation (GDPR). We use your personal information to manage your membership, answer your questions, give you information about our products and meet our legal and regulatory obligations.

Our full Privacy Notice is available at  benenden.co.uk/privacy-policy or by calling us on  **0300 304 5700**.

If you have any privacy-related queries or want to exercise your data rights, you can contact our Data Protection Officer at  dataprotection@benenden.co.uk.

Our service providers

We work with third-party service providers who deliver the services outlined in this guide, either directly or through their own healthcare networks. When you access services you'll have a direct relationship with them and will be subject to their terms and conditions as well as their privacy policy.

When this applies, you can access their terms and privacy policy on the Benenden Health App, or the service providers will let you know how to access them.

We're always your main point of contact for membership, payments, and complaints. And we're responsible for approving requests to access the services outlined in this guide.

To learn more about our current service providers and which service(s) they provide, visit  benenden.co.uk/provider-information

How our staff are paid

Our staff are salaried, and might also get a performance-related bonus based on sales or non-sales activity.

Language and law

All our communications are in English, and everything in this guide is covered by English law. Any disputes in respect of the guide will be subject to the exclusive jurisdiction of the English court.



Phone numbers you need

If you need us, call us:

Member Services

 **0300 304 5700**

Add family to your membership

 **0800 414 8470**

24/7 GP Helpline

 **0800 414 8247**

(select option 1)

24/7 Mental Health Helpline

 **0800 414 8247**

(select option 2)

Benenden Charitable Trust

 **0300 304 5704**

Calls to 03 numbers from UK landlines and mobiles cost no more than a national rate call to 01 or 02 numbers. If you receive inclusive free calls to 01 or 02 numbers with your landline or mobile tariff, calls to 03 numbers will also be included.

Phone lines are open 9am-5pm Monday to Friday, except Bank Holidays. Please check the website for up-to-date information on our opening hours.

Please note that your call may be recorded for our mutual security and also for training and quality purposes.

The Benenden Healthcare Society Limited is an incorporated Friendly Society, registered under the Friendly Societies Act 1992, registered number 480F. The Society's contractual business (the provision of tuberculosis benefit) is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority, FRN 205351. Verify our registration at register.fca.org.uk. The remainder of the Society's business is undertaken on a discretionary basis.

Registered Office: The Benenden Healthcare Society Limited, Holgate Park Drive, York, YO26 4GG.
CORP/LFT/MAY2026_B2B_GUIDE/7933WRAPPED/05/26/v1