

## List of Changes 2019

### International Health and Hospital Plan

We have made a number of changes to your insurance policy this year. This list tells you about the significant changes we have made to the insurance since you joined or your insurance policy was renewed last year.

We only state the most important changes such as changes to your cover and changes made in order to clarify your cover. You can find your fully updated product guide on myPage. All changes apply from your policy renewal date in 2019.

#### Alternative literature

If you would like a hard copy of your product guide, do let us know and we will send you a full printed version at no extra cost. Or if you would prefer to receive your health insurance literature in large print, audio or Braille format, we can arrange that too.

#### BENEFIT CHANGES

We have made some changes relating to the benefits shown in the List of Reimbursements. We outline the changes we have made in the table below (changes are shown in bold letters).

DIALYSIS		
Module	From 2018	To 2019
Hospital Plan	Outpatient treatment in a hospital or clinic Dialysis, intravenous drug infusion which is only available as an infusion (must be pre-approved by the <i>Company</i> )	Outpatient treatment in a hospital or clinic Dialysis ( <b>including home dialysis</b> ), intravenous drug infusion which is only available as an infusion (must be pre-approved by the <i>Company</i> )
<i>We have included cover for home dialysis under Hospital Plan.</i>		
HOSPICE AND PALLIATIVE CARE		
Module	From 2018	To 2019
Hospital Plan	Home nursing (...)	Home nursing (...)
<b>NEW</b>	Hospital cash benefit (...)	<b>Hospice and palliative care, max per lifetime EUR 30,500/ GBP 27,000/ USD 34,000</b>  Hospital cash benefit (...)
<i>We have added a new benefit for hospice and palliative care under Hospital Plan.</i>		
PHYSIOTHERAPY AND ERGOTHERAPY/OCCUPATIONAL THERAPY		
Module	From 2018	To 2019
Module 1	Physiotherapy, ergotherapy/occupational therapy, per consultation EUR <b>85</b> /GBP <b>65</b> / USD <b>85</b> per policy year, max EUR 1,050/ GBP 700/ USD 1,200	Physiotherapy, ergotherapy/occupational therapy, per consultation EUR <b>95</b> /GBP <b>70</b> / USD <b>95</b> per policy year, max EUR 1,050/ GBP 700/ USD 1,200
<i>We have increased the benefit limit for physiotherapy, ergotherapy/occupational therapy consultations under Module 1.</i>		
MEDICAL CHECK-UP		
Module	From 2018	To 2019
Module 1	Medical Check-Up all inclusive, per year EUR <b>540</b> / GBP <b>480</b> / USD <b>600</b>	Medical Check-Up all inclusive, per <b>policy</b> year EUR <b>900</b> / GBP <b>800</b> / USD <b>1,000</b>

<i>We have increased the benefit limit for medical check-up under Module 1.</i>		
MEDICAL APPLIANCES		
<b>Module</b>	<b>From 2018</b>	<b>To 2019</b>
Module 2	<b>Rental of medical appliances</b>	Medical appliances
<i>We have changed the benefit to cover both rental and purchase of medical appliances under Module 2.</i>		

#### CHANGES FOR CLARIFICATION

To improve clarity, we have made some changes and amendments to the wording in the List of Reimbursements, policy conditions and glossary. We outline the significant changes and amendments we have made in the table below (changes are shown in bold letters).

APPLICATION OF CHANGES AND BASE CURRENCY		
<b>Module</b>	<b>From 2018</b>	<b>To 2019</b>
All modules	Valid from <b>1 January 2018</b> . All amounts are in EUR / GBP / USD.	Valid from <b>commencement date or policy renewal in 2019</b> .  All amounts are in EUR / GBP / USD. <b>The currency chosen for the insurance at point of application is the currency all your reimbursements will be based on. This means that eg. when your base currency is EUR all your reimbursements will be based on the EUR benefit limits stated in the below List of Reimbursements although you might have been treated in eg. UK or the USA.</b>
<i>We have added wording to clarify that (i) all benefits are applicable from the policyholder's individual commencement/renewal date and that (ii) the base currency chosen at point of application is the currency all reimbursements are based on no matter where a treatment has taken place.</i>		
OUTPATIENT MEDICINE AFTER DISCHARGE		
<b>Module</b>	<b>From 2018</b>	<b>To 2019</b>
Hospital Plan	<i>Outpatient</i> medicine after discharge from hospital (medicine must be licensed for the condition which was treated while hospitalised), up to 7 days, max. USD 1,000	<b>Prescribed</b> <i>outpatient</i> medicine after discharge from hospital (medicine must be licensed for the condition which was treated while hospitalised), up to 7 days, max USD 1,000
<i>We have updated the wording for outpatient medicine after discharge from hospital to reflect that the medicine must be prescribed by a physician.</i>		
CANCER TREATMENT		
<b>Module</b>	<b>From 2018</b>	<b>To 2019</b>
<b>Hospital Plan</b>	<u>Outpatient treatment in a hospital or clinic</u> Surgery 100%  Cancer <i>treatment</i> 100% Once cancer has been diagnosed this benefit includes fees that are related specifically to planning and carrying out <i>active treatment for cancer</i> . This includes tests, diagnostic imaging, consultations and prescribed medicines (when receiving anti-hormonal drug as sole	<u>Outpatient treatment in a hospital or clinic</u> Surgery 100%  Cancer <i>treatment</i> 100%* Once cancer has been diagnosed this benefit includes fees that are related specifically to planning and carrying out <i>active treatment for cancer</i> . This includes tests, diagnostic imaging, consultations and prescribed medicines (when receiving anti-hormonal drug as sole

	<p><i>treatment</i> for cancer, only the anti-hormonal drug expenses are covered) Dialysis, intravenous drug infusion which is only available as an infusion (must be pre-approved by the <i>Company</i>)</p> <p>*Pre-examinations that are medically necessary in order to perform the <i>surgery</i> are covered up to 30 days prior to <i>surgery</i>. Check-ups that are medically necessary in order to verify that the <i>insured</i> is recovering successfully from the <i>surgery</i> are covered up to 180 days after <i>surgery</i>. Physiotherapy following <i>surgery</i> must be evaluated and pre-approved by the <i>Company</i>.</p>	<p><i>treatment</i> for cancer, only the anti-hormonal drug expenses are covered) Dialysis, intravenous drug infusion which is only available as an infusion (must be pre-approved by the <i>Company</i>)</p> <p>*Pre-examinations that are medically necessary in order to perform the <b><i>treatment/surgery</i></b> are covered up to 30 days prior to <b><i>treatment/surgery</i></b>. Check-ups that are medically necessary in order to verify that the <i>insured</i> is recovering successfully from the <b><i>treatment/surgery</i></b> are covered up to 180 days after <b><i>treatment/surgery</i></b>. Physiotherapy following <b><i>treatment/surgery</i></b> must be evaluated and pre-approved by the <i>Company</i>.</p>
<p><i>For clarity, we have amended the wording for pre- examinations and check-ups under Hospital Plan in order to correctly reflect that these benefits also apply to cancer treatment.</i></p>		
PSYCHOLOGIST		
<b>Module</b>	<b>From 2018</b>	<b>To 2019</b>
<b>Module 1</b>	<p>General Practitioners and Specialists (...) Psychiatrists <b>and psychologist</b>, per consultation EUR 190/ GBP 120/ USD 195</p>	<p>General Practitioners and Specialists (...) Psychiatrists, per consultation EUR 190/ GBP 120/ USD 195</p> <p><b><u>Psychologist</u></b> Psychologist, per consultation EUR 190/ GBP 120/ USD 195</p>
<p><i>We have moved psychologist consultation to a separate benefit in order to clarify that a psychologist is not a medical specialist.</i></p>		
COVER BY THIRD PARTIES		
<b>Article</b>	<b>From 2018</b>	<b>To 2019</b>
Art. 14.1.1 <b>New</b>	<p>Art. 14.1: Where there is cover by another <i>insurance</i> policy or healthcare plan, this must be disclosed to the <i>Company</i> when claiming reimbursement and the cover under this <i>insurance</i> shall be secondary to any such other <i>insurance</i> policy or healthcare plan.</p>	<p>14.1: Where there is cover by another <i>insurance</i> policy or healthcare plan, this must be disclosed to the <i>Company</i> when claiming reimbursement and the cover under this <i>insurance</i> shall be secondary to any such other <i>insurance</i> policy or healthcare plan.</p> <p><b>14.1.1.: Upon receipt of an itemized statement from another insurer and a copy of the reimbursed bills the Company will apply the amount reimbursed by that other insurer to write down the existing deductible and/or co-insurance on the insured's Bupa Global health insurance plan(s) if the reimbursed benefits would have been covered by Bupa Global.</b></p>
<p><i>We have added a new article to clarify that any reimbursement by another health insurance will be applied to the insured's Bupa Global health insurance's deductible/co-insurance if the reimbursed benefits would also have been reimbursed by Bupa Global.</i></p>		
THIRD PARTY AUTHORISATION		
<b>Article</b>	<b>From 2018</b>	<b>To 2019</b>
Art. 16.4 <b>New</b>		<b>The Company fully complies with applicable data protection legislation (see also art. 19.1). Generally, we therefore</b>

		cannot disclose any personal or sensitive information (eg. medical information) nor discuss cases with anyone not authorised by the <i>insured</i> in question. It is therefore recommended that the <i>insured</i> authorises any person he or she wants to share information with. A third party authorisation form will be provided by <i>the Company</i> on request.
We have added a new article to clarify that generally we cannot disclose information about an <i>insured</i> to a third party without the consent of the <i>insured</i> . Please note, however, that there are exceptions to this and there may in some instances be other legal grounds for disclosing information than consent.		
TERMINATION OF INSURANCE		
Article	From 2018	To 2019
Art. 17.2.2	<p>Art. 17 Assignment, cancellation and expiry</p> <p>17.2.2: The <i>policyholder</i> has the right to withdraw from the purchase of the <i>insurance</i>. The period during which the <i>insurance</i> can be withdrawn lasts 28 days and begins on the date on which the <i>policyholder</i> has entered into the <i>insurance</i> agreement. This will normally be on the date on which the <i>policyholder</i> has purchased the <i>insurance</i> and/or received the <i>insurance documents</i>. Under the Danish <i>Insurance Contracts Act</i> the <i>policyholder</i> has a right to receive certain information about the right to cancel the <i>insurance</i> and about the <i>insurance</i>. The notice period for cancellation does not commence <b>before</b> the <i>policyholder</i> has received this information in writing (e.g. on paper or by email). If, for example, the <i>policyholder</i> receives the <i>insurance documents</i>, and also has received the above information, eg on Monday the 1st, he/she can cancel the <i>insurance</i> until and including Monday the 29th. If the period expires on a public holiday, Saturday or Sunday, the <i>policyholder</i> can wait until the following day. <b>If the <i>insurance</i> has entered into force before the withdrawal, the <i>policyholder</i> will be charged premium for the time he/she has been covered. The <i>Company</i> will refund the difference between the premium that would be payable for the shorter period of cover and the premium paid.</b> If the <i>policyholder</i> wants to withdraw the <i>insurance</i> the <i>Company</i> must be notified by letter, email or phone. The <i>Company's</i> contact details are listed at the end of this document. It is sufficient that the <i>Company</i> is contacted before the expiry of the notice period.</p>	<p>Art. 17 Assignment, cancellation, <b>termination</b> and expiry</p> <p>17.2.2: The <i>policyholder</i> has the right to withdraw from the purchase of the <i>insurance</i>. The period during which the <i>insurance</i> can be withdrawn lasts 28 days and begins on the date on which the <i>policyholder</i> has entered into the <i>insurance</i> agreement. This will normally be on the date on which the <i>policyholder</i> has purchased the <i>insurance</i> and/or received the <i>insurance documents</i>. Under the Danish <i>Insurance Contracts Act</i> the <i>policyholder</i> has a right to receive certain information about the right to cancel the <i>insurance</i> and about the <i>insurance</i>. The notice period for cancellation does not commence <b>until</b> the <i>policyholder</i> has received this information in writing (e.g. on paper or by email). If, for example, the <i>policyholder</i> receives the <i>insurance documents</i>, and also has received the above information, eg on Monday the 1st, he/she can cancel the <i>insurance</i> until and including Monday the 29th. If the period expires on a public holiday, Saturday or Sunday, the <i>policyholder</i> can wait until the following day. If the <i>policyholder</i> wants to withdraw the <i>insurance</i> the <i>Company</i> must be notified by letter, email or phone. The <i>Company's</i> contact details are listed at the end of this document. It is sufficient that the <i>Company</i> is contacted before the expiry of the notice period.</p>
For clarity, we have amended the wording to correctly reflect that we will not change premium if the <i>insurance</i> is cancelled in accordance with this article.		

PRIVACY NOTICE

Article	From 2018	To 2019
19.1	<p>The confidentiality of patient and customer information is of paramount concern to the companies in the Bupa group. To this end, <i>Bupa Global</i> fully complies with applicable data protection legislation and medical confidentiality guidelines.</p> <p><b><i>Bupa Global</i> sometimes uses third parties to process data on our behalf. Such processing, which may be undertaken outside the EEA (European Economic Area), is subject to contractual restrictions with regard to confidentiality and security in addition to the obligations imposed by the applicable data protection legislation. For full details of how <i>Bupa Global</i> process personal data please visit our privacy policy at <a href="https://www.bupaglobal.com/en/legal/gb/privacy-policy">https://www.bupaglobal.com/en/legal/gb/privacy-policy</a>.</b></p>	<p>The confidentiality of patient and customer information is of paramount concern to the companies in the Bupa group. To this end, <i>Bupa Global</i> fully complies with applicable data protection legislation and medical confidentiality guidelines. <b>Please see the Bupa Global Privacy Notice above the glossary section.</b></p>
<p><i>This change is to inform you that we have added our privacy notice above the glossary section.</i></p>		