

International Health Insurance

Insurance Product Information Document



Company: Bupa Insurance Limited

Product: Guernsey Scheme

Bupa Insurance Limited (trading as Bupa Global), registered in the United Kingdom. Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority, registration number 203332.

This is a summary of the insurance cover. Before purchase, further information can be found in your quotation and/or additional documents; the full terms and conditions are available on request. Full terms and conditions of the policy are contained in the membership guide and insurance certificate which you will receive after your purchase. It is important that you read all of these documents carefully.

What is this type of insurance?

International Private Medical Insurance which is designed to cover the costs of private healthcare, from inpatient treatment, preventive check-ups, to diagnosis of medical illnesses and necessary treatment, both in the country of residence and in the chosen region(s).



What is insured?

Annual maximum of £500,000 per person, unless a sublimit is mentioned

Hospital treatment

- ✓ Cancer treatment incl. prescribed medicines
- ✓ Intensive care
- ✓ Surgical operations and theatre charges
- ✓ Doctors' and anaesthetists' fees
- ✓ Medicines and dressings
- ✓ Advanced imaging, pathology, radiology and diagnostic tests
- ✓ Transplant services: £150,000
- ✓ Prosthetic implants and appliances
- ✓ Prosthetic devices: £2,000
- ✓ Rehabilitation
- ✓ Mental health treatment
- ✓ Kidney dialysis
- ✓ Cash benefit: £100 each night to a maximum of 30 nights

Transportation

- ✓ Local road ambulance, including travel to UK: £200

Out-patient treatment

- ✓ Specialists consultations and doctor's fees
- ✓ Pathology, radiology, diagnostic tests, surgical operations, physiotherapy, osteopathy, chiropractors, mental health/psychiatric treatment, dietetic guidance and treatment by therapists, practitioners and qualified nurses: £1,000

For all benefits, limits and restrictions, see full terms and conditions



What is not insured?

- ✗ Addictive conditions and Disorders
- ✗ Chronic conditions
- ✗ Area of conflict if you are an active participant or put yourself in danger
- ✗ Congenital conditions, except cancer and emergency operation undertaken with fourteen days of birth
- ✗ Cosmetic treatment (non-medically essential)
- ✗ Routine health checks
- ✗ Excluded conditions
- ✗ HIV/AIDS
- ✗ Infertility treatment
- ✗ Maternity
- ✗ Out-patient drugs and dressing
- ✗ Pre-existing conditions

Other exclusions apply, see full terms and conditions



Are there any restrictions on cover?

- ! Cover is always subject to eligibility criteria
- ! Limitations per person per policy year unless stated otherwise:
 - 30 days: Rehabilitation
 - 90 days lifetime: In-patient mental health
 - 3 visits: Dietetic guidance
 - 25 visits: Specialists consultations and doctor's fees
- ! Limitations under "What is insured" are applied as follows:
 - Per membership year – transplant services, cash benefit, local road ambulance, pathology, radiology, diagnostic tests, surgical operations, physiotherapy, osteopathy, chiropractors, mental health/psychiatric treatment, dietetic guidance and treatment by therapists, practitioners and qualified nurses
 - Per device – Prosthetic devices
- ! Pre-existing conditions are subject to underwriting and may be excluded
- ! Should you choose to have treatment or services with a healthcare provider outside of our Bupa Global network, we will only cover eligible costs which we consider to be the 'reasonable and customary' amount for such treatment or services. This means that, if you chose an 'out of network' provider, you would be responsible for paying for any costs in excess of reasonable and customary levels. Please refer to the membership guide

Other restrictions apply, see full terms and conditions



Where am I covered?

- ✓ This plan covers you the main member and any additional people on your plan worldwide



What are my obligations?

- You must pay your premium
- You must provide medical history as required
- You must provide any information we require to assess your claim
- You must tell us straight away if you move to a different country
- You must obtain pre-authorisation prior to treatment for any benefits where it is stated that this is required in the membership guide
- You must let us know if you have other insurance which also covers your benefits
- If the main member or any additional people die we should be notified in writing within 30 days



When and how do I pay?

- You can pay by credit card (monthly/quarterly/annually), by bank transfer (quarterly/annually) or direct debit (monthly/quarterly/annually provided you pay in GBP)



When does the cover start and end?

- The term of the contract is 12 calendar months. Your policy will be renewed automatically and payment taken, unless you choose not to continue
- You can find your policy start and end date in your quote or in your membership certificate



How do I cancel the contract?

- You can cancel the membership (or remove any additional people individually from cover) at any time by telephoning or emailing us, with effect from the 1st day of the following month. If such cancellation is requested within 28 days of you receiving your first insurance certificate for such cover and no claims have been made, the premium paid for that cover will be refunded in full. Should you have made a claim during this initial period, or should you cancel after this initial period, we will refund any premium paid in relation to the period following cancellation. No administrative fee will be charged. To cancel, call Bupa Global on +44 (0) 1273 718379 or email to Service.uk@bupaglobal.com or write to Bupa Global, Victory House, Trafalgar Place, Brighton, BN1 4FY, United Kingdom.

Please refer to the full terms and conditions for further information