

International Health Insurance

Insurance Product Information Document



Company: Bupa Insurance Limited

Product: Major Medical Global Health Plan

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 policy maximum of £2,000,000/€2,500,000/
\$3,400,000 per person, unless a sublimit is mentioned
Annual deductible: £5,000/€6,200/\$8,500

Hospital treatment

- ✓ Cancer treatment incl. prescribed medicines
- ✓ Intensive care
- ✓ Surgeries (incl. specialist surgery such as obesity, cancer preventing and reconstructive)
- ✓ Doctors' and anaesthetists' fees
- ✓ Medicines and dressings
- ✓ Advanced imaging, pathology, radiology and diagnostic tests
- ✓ Home nursing
- ✓ Hospice and palliative care: £25,000 /€31,000/\$42,000
- ✓ Rehabilitation
- ✓ Transplant services: £500,000/€625,000/\$850,000
- ✓ Prosthetics: £4,000/€5,000/\$6,800
- ✓ Mental health
- ✓ Physiotherapist, speech therapists, dietician

Transportation

- ✓ Evacuation and repatriation
- ✓ Travel cost for accompanying person/children
- ✓ Local air and road ambulance

Out-patient treatment

- ✓ Pre-and post-hospitalisation
- ✓ Medicines, dressings and durable medical equipment prescribed at the hospital following in-patient or day-patient treatment: £700/€870/\$1,190

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



What is not insured?

- ✗ Artificial life maintenance more than 90 days
- ✗ Complementary therapists
- ✗ Conflict and disaster if you are an active participant or put yourself in danger
- ✗ Convalescence
- ✗ Cosmetic treatment (non medically essential)
- ✗ Developmental problems
- ✗ Experimental/unproven treatment
- ✗ Harmful/hazardous use of alcohol/drugs/medicine
- ✗ Illegal activity
- ✗ Infertility treatment
- ✗ Maternity and childbirth
- ✗ Obesity treatment (except surgery)
- ✗ Sexual problems
- ✗ Sleep disorders
- ✗ Unrecognised medical practitioner, hospital or healthcare facility (refer to membership guide)

Other exclusions apply, see full terms and conditions



Are there any restrictions on cover?

- ! Cover is always subject to eligibility criteria
- ! Limited number of visits, per person per policy year:
 - 60 days: Post-hospitalisation
 - 45 visits: Rehabilitation
 - 30 days: Pre-hospitalisation and home nursing
- ! Waiting periods (time you need to be our customer before you can claim on this benefit):
 - First 24 months: Obesity surgery
 - Per policy year – Home nursing, rehabilitation, prescribed medicines and dressing, durable medical equipment
- ! Limitations under “What is insured” are applied as follows:
 - Per device – Prosthetics
 - Per lifetime – Hospice and palliative care
 - Per condition – Transplant services
- ! We only cover medically necessary treatment as listed in the membership guide
- ! Pre-existing conditions may be agreed to be covered, subject to additional premium in some circumstances – this will be discussed individually with you
- ! We only cover medically necessary treatment as listed in the membership guide

This section is continued on page 2



Are there any restrictions on cover? (continued)

- ! 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 policy holder 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 obtain pre-authorization prior to treatment for any covered benefits where it is stated that this is required in the membership guide
- You must pay your deductible each policy year towards covered expenses before we start paying. The deductible on this plan is £5,000/€6,200/\$8,500 as standard
- You must provide any information we require to assess your claim
- You must tell us straight away if you move to a different country or your specified country of residence or specified country of nationality changes
- You must let us know if you have other insurance which also covers your covered benefits
- If the policyholder or a dependant dies 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. Cancellation will take effect 14 days after you, the main member, notifies us of the request. If such cancellation is requested within 30 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