

International Health Insurance

Insurance Product Information Document



Company: Bupa Global Designated Activity Company

Product: International Health and Hospital Plan

Bupa Global Designated Activity Company (Bupa Global DAC), trading as Bupa Global, registered in Ireland under company no. 623889, is regulated by the Central Bank of Ireland.

This is a summary of the insurance cover. You can find more information in your quotation and other documents before you buy. If you'd like a copy of the full terms and conditions, please let us know. After you buy, we'll send you a membership guide which includes the full terms and conditions of the policy, together with a policy certificate. It's important that you read these documents carefully.

What is this type of insurance?

International Private Medical Insurance which is designed to cover the costs of private healthcare when needed, depending on any agreed terms, both in the country where you live and your chosen region(s).



What is insured?

Annual policy maximum of €3,600,000 / £3,000,000 / \$4,400,000 for each person

Hospital Plan

- ✓ Hospital services — during hospitalisation
- ✓ Cancer treatment
- ✓ Advanced therapy medicinal products (ATMP)
- ✓ Out-patient treatment in a hospital or clinic
- ✓ Childbirth (subject to a 12 month waiting period)
- ✓ Organ transplant
- ✓ Emergency room treatment
- ✓ Local medical transport
- ✓ In-patient rehabilitation
- ✓ Home nursing
- ✓ Hospice and palliative care
- ✓ Hospital cash benefit
- ✓ Emergency dental treatment

Module 1: Non-Hospitalisation Benefits

- ✓ General practitioners and specialists
- ✓ Psychologist and psychotherapist
- ✓ Therapists
- ✓ Full health screening
- ✓ Examinations and other medical assistance

Module 2: Medicine and Appliances

- ✓ Hearing aids
- ✓ Other appliances
- ✓ Medicine

Module 3: Medical Evacuation and Repatriation

- ✓ Transportation expenses by aeroplane or helicopter
- ✓ Accompanying person
- ✓ Return journey to residential address abroad/home country within three months after completion of treatment
- ✓ Statutory arrangements in case of death, such as embalming and zinc coffin
- ✓ Transportation of the urn/coffin

Modules 4A and 4B: Dental and Optical

- ✓ Dental treatment
- ✓ Special dental treatment
- ✓ Glasses and contact lenses
- ✓ Eye check

Further benefits

- ✓ Healthline services
- ✓ Bupa LifeWorks, your Global Employee Support Programme

Please refer to the 'What is not covered?' section

See the full terms and conditions of the policy for details of what is and isn't covered



What is not insured?

- ✗ Medical expenses incurred for any disease, illness or injury known to the policyholder and/or the dependant at the time of application, unless agreed upon with the Company
- ✗ Any expenses as a result of non-medically essential or cosmetic surgery and treatment
- ✗ Treatment for obesity
- ✗ Harmful or hazardous use of alcohol, drugs and/or medicines
- ✗ Contraception, including sterilisation
- ✗ Induced abortion unless medically prescribed
- ✗ Infertility test and/or treatment
- ✗ Treatment for sexual problems
- ✗ Treatment by naturopaths and naturopathic medications and other alternative methods of treatment, unless specified in the Table of Benefits or the insurance certificate
- ✗ Treatment of diseases during military service
- ✗ Treatment as a result of conflict and disaster
- ✗ Treatment from medical practitioners, hospitals or healthcare facilities that we do not recognise (refer to membership guide)
- ✗ Experimental or unproven treatment
- ✗ Artificial life maintenance lasting more than 90 days

See the full terms and conditions of the policy for other exclusions



Are there any restrictions on cover?

- ! Cover depends on eligibility criteria
- ! Limitations for each person every policy year unless stated otherwise:
 - 30 days: Hospice
 - 30 days: Pre-examinations that are medically necessary order to perform the surgery or treatment which is to take place during hospitalisation
 - 180 days: Check-ups that are medically necessary in order to verify that the customer is recovering successfully from the surgery or treatment received while hospitalised after hospitalisation.
 - 10 sessions: Physiotherapy following surgery
 - 90 days: In-patient rehabilitation
 - 40 days: Home nursing
 - 60 nights: Hospital cash benefit
- ! Waiting Periods (the policy does not cover treatment you have during a waiting period)
 - 12 months: Maternity
 - 3 months: Return journey
 - 24 months: Orthodontics (tooth adjustment)

This section is continued on page 2



Are there any restrictions on cover? (continued)

- ! There are different types of limits to your cover. These are:
 - Each membership year –prescribed out-patient medicine, home nursing, hospital cash benefit, dietetic guidance, speech therapy per consultation, full health screening
 - For the whole of your lifetime – advanced therapy medicinal products (ATMPs), hospice and palliative care
- ! We may exclude pre-existing conditions - we'll discuss this with you before you buy
- ! Conditions apply when adding newborn children on your policy
- ! The policy covers only medically necessary treatment and wellbeing care as listed in the membership guide
- ! If you choose to have treatment or services with a healthcare provider outside our Bupa Global network, we will only cover costs which we consider the 'reasonable and customary' amount for that treatment or services. This means that if you choose an 'out of network' provider, you are responsible for paying any costs above reasonable and customary levels. You can find more information in the membership guide.

See the full terms and conditions of the policy for other restrictions



Where am I covered?

- ✓ This plan covers you in the chosen region as stated in the insurance certificate.



What are my obligations?

- You must give us your medical history when you apply
- For some treatments we ask you to contact us before you have the treatment. The membership guide clearly shows which treatments we ask you to contact us about.
- You must provide the information we ask for to assess your claim
- You must make sure that other people on the policy are comfortable with you providing us with their information
- You must make sure that you have provided a copy of our privacy notice to any other people whose information has been provided to us
- You must tell your sponsor straight away if you move to a different country or your specified country of residence or specified country of nationality changes
- You must let your sponsor know if you have other insurance which also covers your treatment
- You must notify your sponsor in writing of any changes to you or your dependant's membership
- Your sponsor may have agreed variations to this benefit table with your insurer. If so, your sponsor will let you know of these variations.



When and how do I pay?

- Your sponsor has to pay any and all premiums and any other payment due for your membership and that of your dependants and every other person covered under the agreement, together with any other charges (such as insurance premium tax) that may be payable.



When does the cover start and end?

- The contract lasts 12 months.
- If you do not want your membership (and therefore that of your dependants) or the individual membership for any of your dependants to renew at the renewal date you must notify your sponsor at any time in advance of the renewal date.
- If you wish to end your membership (and therefore that of your dependants) the following terms apply:
- You may end your membership (and therefore the membership of your dependants) by informing the sponsor within 30 days of either:
 - the date you receive your terms and conditions (including your membership certificate) confirming your membership, or
 - the effective date of your membership
- Your sponsor can decide on the renewal of your membership as part of our agreement.
- Your membership will automatically end:
 - if the agreement between Bupa Global and your sponsor is terminated
 - if your sponsor does not renew your membership
 - if your sponsor does not pay subscriptions or any other payment due under the agreement for you or for any other person
 - if your membership ends
 - upon your death



How do I cancel the contract?

- You can cancel the membership (and therefore the membership of your dependants) by informing the sponsor within 30 days of either:
 - the date you receive your terms and conditions (including your membership certificate) confirming your membership, or
 - the effective date of your membership
- Your sponsor can end your membership, or that of any of your dependants (if applicable), from the first day of a month by writing to us.
- We cannot backdate the cancellation of your membership.

See the full terms and conditions of the policy for more information