

# 保柏非凡自願醫保計劃 -在生命中每個階段, 妥善照顧你的健康需要

















非凡的你,需要非一般的醫療保障。特別為你而設的「保柏非凡自願醫保計劃」為合資格醫療費用提供多種全數賠償「保障,每年從港幣500萬元至港幣4,000萬元。你可選擇涵蓋亞洲、澳洲及新西蘭<sup>2,3</sup>或全球(美國除外)<sup>3</sup>地區的計劃,讓你安心獲得更優質的治療。本計劃更不設終身保障限額,無論索償金額多少,你的保額均會每年自動還原。

本計劃另一優點是設有家庭折扣優惠<sup>4</sup>,而且每個計劃級別下有四項自付費選擇,能讓你因應人生不同階段為健康作出適當的醫保規劃。你更可在指定歲數或發生重要人生事件<sup>5</sup>時,要求降低或免除自付費,或升級<sup>5</sup>計劃級別而無須重新核保。

保柏非凡自願醫保計劃除涵蓋自願醫保標準計劃要求的基本醫療保障外,更提供額外醫療保障6、身體檢查保障、免找數服務及自選門診或牙科保障7等,讓你享有一定的靈活性。

2

特點

## 特點



## 全數賠償主要醫療費用1,

不設細項賠償限額及終身保障 限額



**免找數服務**<sup>8</sup>,在指定醫院和 特選服務供應商提供,令你安心 無憂



### 靈活的選項以滿足你的需求,

提供六個計劃級別以及每個計劃級 別內的四個自付費選項可選擇



## 充裕的癌症治療賠償保障<sup>9</sup>,

如不幸被確診出患有癌症,則免除自付費(如有)

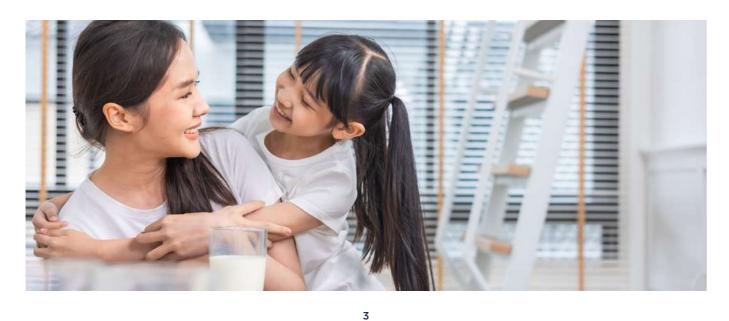


### 漸進式保障在生命中每個 階段為你提供適切保障,

你可在指定歲數或發生重要人生 事件<sup>5</sup>時,要求降低或免除自付費 一次,或升級<sup>5</sup>計劃級別一次而 無須重新核保



全面照顧康復需要,全數賠償 所有入院/日間手術前90日內及 出院/完成日間手術後365日內所 有相關門診護理的費用(智選、 倍智選、尊尚和倍尊尚計劃尊享)<sup>10</sup>





## 計劃概要

## 保障一覽表

ואו די						
	<b>精選</b> 港幣	<b>倍精選</b> 港幣	<b>智選</b> 港幣	<b>倍智選</b> 港幣	<b>尊尚</b> 港幣	<b>倍尊尚</b> 港幣
每年保障 限額	500萬	1,000萬	2,500萬	3,000萬	3,500萬	4,000萬
終身保障 限額			不設終身	保障限額		
保障地域 範圍	亞洲、澳洲及 新西蘭 <sup>2,3</sup>	全球 (但不包括美國) <sup>3</sup>	亞洲、澳洲及 新西蘭 <sup>2,3</sup>	全球 (但不包括美國)3	亞洲、澳洲及 新西蘭 <sup>2,3</sup>	全球 (但不包括美國)3
自付費選項	每保單年度 0 / 15,000 / 50,000 / 80,000		每保單年度 0 / 12,000 / 40,000 / 80,000			
病房級別	大房		香港、澳門、台灣及中國大陸: 半私家房標準私家房 其他亞洲、澳洲及新西蘭 <sup>2,3</sup> 地區: 標準私家房			仏家房
家庭折扣⁴	不適用		Ξ	兩名家庭成員- 名或以上家庭成員		折

## 投保資格

32 MIS (14		
	保單持有人	18歲或以上
	受保人	<ul><li>保單持有人</li><li>保單持有人之配偶、子女、孫子女</li><li>保單持有人或其配偶之父母、(外)祖父母、兄弟姊妹</li><li>保單持有人之同居伴侶或其父母、子女</li></ul>
	投保年齡	保單生效時年齡須為15日至80歲(包括首尾歲數)
	投保	投保前無須進行醫療檢查 <sup>11</sup>
	續保	保證終身續保12

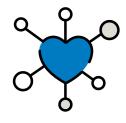
主要特點

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#### 全數賠償主要醫療費用1不設細項賠償限額及終身保障限額

無論你於任何所選保障地域範圍接受治療,項目如外科醫生費、深切治療、訂明診斷成像檢測、訂明非手術癌症治療等均可獲全數賠償,以每年保障限額為限。



#### 靈活撰項以滿足你的多元需要

保柏非凡自願醫保計劃為合資格醫療費用提供充裕的賠償保障,每年從港幣 500 萬元至高達港幣 4,000 萬元的保障金額<sup>1</sup>,並提供涵蓋亞洲、澳洲及新西蘭<sup>2,3</sup>或全球(美國除外)<sup>3</sup>地區的計劃供你挑選。

此外,你可以在每個計劃級別下選擇四個不同的自付費,以降低你的保費。



你知道**保柏非凡自願醫保計劃(精選)**的保障金額和覆蓋範圍嗎? 每年保障限額為港幣500萬元,足以覆蓋99%常見疾病的醫療費用<sup>13</sup>,包括重大手術或嚴重疾病。



#### 漸進式保障在生命每個階段守護你的健康

漸進式保障的特點是能靈活配合你轉變的需要,當發生了一件**人生事件**5時,包括結婚、生育、置業、升職或移民,保單持有人**可彈性提升5其計劃的每年保障限額**,從港幣500萬元提升至港幣1,000萬元,或從港幣1,000萬元至港幣2,500萬元,而無**須重新核保**。

你可選擇在續保日前30天,在50、55、60、65、70、75、80或85歲時(其中一個年齡), 或發生了一件人生事件時5,**減少或免除自付費**,而無須重新核保。這樣,你在面對人生事件 或退休5後的預算規劃時,就更能靈活調動資金。



#### 免找數服務®令你安心無憂

憑保柏非凡醫療卡,你可於保柏指定的本港私家醫院<sup>14</sup>及保柏非凡特選服務供應商<sup>15</sup>(包括診斷中心、專科醫生診所等)接受治療或求診,而無須找數,非常方便。如在海外接受治療,你只須預先致電保柏,便可於所選保障地域範圍的醫院享用此服務。我們會直接向醫院或服務供應商支付合資格費用(以你獲預先批核的限額為上限)<sup>16</sup>。



如果你在我們指定網絡之外的醫院或特選服務供應商就醫,你依舊可通過線上客戶服務 myBupa 來辦理線上索償,獲得無縫體驗,讓你能專注提升自身的健康。



#### 充裕保障 輕鬆應付癌症治療<sup>9</sup>

如確診癌症,我們會豁免你所選的自付費(如有)<sup>9</sup>,讓你的**癌症治療費用可直接獲得賠償**。 訂明非手術癌症治療,如化療、放射性治療(包括但不限於質子治療)、標靶治療、免疫治療 等,均可獲全數賠償,以每年保障限額為限。你可安心接受治療,無須擔心醫療開支預算。



我們可為你推薦符合保單保障範圍的治療方案,讓你從醫療保障中獲取最佳的價值。此外,我們還提供轉介服務,為你介紹網絡內值得信賴的醫療 惠業人員。



#### 全面照顧康復需要

本計劃延伸跟進護理保障,不論任何病症,均**全數賠償所有入院/日間手術<sup>10</sup>前90日內及** 出院/完成日間手術後365日內所有相關門診護理的費用。額外保障<sup>6</sup>更涵蓋康復治療、 註冊中醫師診症及人工裝置等,即使不幸患上慢性疾病或癌症等嚴重疾病,也可獲全面的 照顧。

其他特點

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#### 關注及支援情緒健康

本計劃為全港首個關注及支援情緒健康的自願醫保計劃,除住院精神科治療可獲全數賠償外,更設有免費 24 小時情緒解碼熱線 17 ,為你提供個人化情緒支援及面談輔導服務。



#### 涵蓋在醫院日症室及診所進行的手術

不設最低住院時數限制,診所手術及日症手術均可獲得賠償。



#### 保證續保

保柏保證每年續保你的保障至終身,無論你因保單生效後所患疾病索償多少,保費只會根據你的年齡而調整<sup>12</sup>。



#### 保障投保前未知的已有病症

投保前未知的已有病症及8歲起出現徵狀或確診的先天性疾病均可獲保障,受保單之一般不保事項約束。你亦可選擇通過核保及繳付附加保費,保障投保前已有病症。



### 符合稅項扣減資格

此計劃屬認可的自願醫保計劃,每年可用作申請稅項扣減的合資格保費上限為每名受保人 港幣 8,000 元 $^{18}$ 。



## 尊尚系列額外保障及服務



由第二個保單年度開始,每年免費享用健康檢查一次 (只適用於18歲或以上的受保人)



整骨及足病治療師7(門診保障受保人尊享)



接種疫苗保障 7 (門診保障受保人尊享)



**額外牙科項目及視力保障**7(牙科及視力保障受保人尊享)



外遊時需要**非緊急環球健康支援服務**,我們可助你尋找醫生或安排預約。



我們可為你**預約**你所選的醫療服務提供者。

自選保障 免費保障及服務



## 自選保障7



你可自選門診、牙科及其他保障,以應付你的各項醫療保 健需要。所有自選保障均適用於你的所選保障地域範圍19。



#### 門診保障

門診保障涵蓋普通科醫生、專科醫生、診斷成像及化驗、處方西藥、物理治療師、脊醫、中醫師、跌打醫師、 精神科相關治療及臨床心理輔導保障等。

如你投保門診保障,更可於網絡診所及服務供應商使用醫療卡享免找數及全數賠償服務20。此外,你更可享用視像 診症服務,安坐家中讓我們特選的醫生為你進行視像診症。詳情請瀏覽 www.bupa.com.hk/vc 。



牙科保障包括洗牙、補牙及脫牙、牙周手術、緊急意外治療等。



#### 產科保障

保障包括住院期間的診症、住院、產前檢查及產後檢查,以及住院期間新生嬰兒護理費用。



## 免費保障及服務7

本計劃特設一系列免費保障及服務,全面照顧你的身、心 健康。



即使你沒有投保門診保障,保柏通行證讓你以尊享價享用多種醫療保健服務,包括普通科、專科、中醫(包括中醫 骨傷治療、針灸)、物理治療、疫苗注射及健康檢查等。無須登記,只須在香港指定的診所和中心21出示你的保柏 非凡卡,即可以相宜的價格享用優質及方便的醫療服務。



#### 健康支援服務

我們時刻伴你左右,特設「健康支援服務」,由醫生、合資格護士和健康管理團隊為你提供個人化的健康支援及 協助,讓你安心無憂。當遇上較嚴重的疾病時,此服務更可提供額外支援,助你復原。

#### • 24小時健康專線

我們的合資格健康管理團隊22可為你提供協助及指導一由怎樣照顧患者親友,以至與你討論病情及治療 方案等。

#### • 健康顧問

我們的健康顧問可與你緊密聯絡,跟進你的索償、全程協助你的治療至康復過程,包括解釋你的治療 計劃和醫療開支以至安排跟進治療。當你入住本港私家醫院時並得到你的同意下,我們可前往醫院探望 你或致電慰問你。

#### • 第二醫療意見

我們可安排醫療專家為你提供專業的第二意見,讓你掌握病情從而決定治療方法。

#### • 醫療中心選擇

可根據你的指定情況或需要為你提供診所及醫院名單以供參考。

#### • 慢性疾病管理計劃

透過電話提供個人生活習慣建議及健康管理,助你積極控制慢性疾病如糖尿病。

免費保障及服務



### 癌症支援服務

癌症支援服務為你提供清晰明確的資訊及有效的支援,協助你面對癌症治療的種種挑戰,服務包括護士專線、個人化的治療計劃、特快預約服務等。



#### 一站式專科治療計劃

保柏在你健康路上的不同階段,一心守護你的健康。因此,保柏為受保人設立了一系列專注於不同專科的治療計劃。透過網絡供應商及健康支援團隊,提供個人化的服務及指導。你可盡享以下計劃優勢:

#### 健康・一心守護

- 涵蓋多項專科,照顧不同醫療需要
- 優質網絡診所及設施
- 資深醫療團隊由診症、治療以至跟進,全程提供支援
- 憑合資格醫療卡可享免找數服務

有關專科治療計劃的詳情及最新資訊,請瀏覽保柏網站。



#### 免費保柏國際援助計劃23

凡投保保柏非凡自願醫保計劃,均可獲贈「免費保柏國際援助計劃」。當你於海外或國內需要醫療支援時,此計劃 可為你提供協助。

11



## 保障、健康全掌握

你只需要一個myBupa 帳戶,即可連結兩個免費的保柏 手機應用程式,輕鬆管理保單及活出健康人生。



#### 網上管理你的保單

myBupa是一個全方位的客戶服務平台,你可隨時隨地管理你的保單、兌換獨家優惠、搜尋你偏好的網絡醫生和 診所、提交索賠等功能。



#### Blua Health 助你贏健康賺獎賞

健康是你最寶貴的財富,保持健康的身心,是對自己及家人最大的承諾。Blua Health應用程式透過 AI 科技助你管理健康,達成目標更可賺積分換禮品,輕鬆收獲健康!



免費使用多項健康互動功能



30秒 AI 評估你的 身心健康



與 AI 教練隨時隨地 一起健身

12



賺取積分以換領 健康獎賞



立即下載 Blua Health, 未來健康由你掌握!

如有任何關於醫療狀況的問題,請立即尋求醫生或其他合資格醫療服務提供者的建議。

Blua Health由保柏集團成員、香港註冊公司Horizon Health and Care Limited提供、發佈及營運。
Blua Health並不是醫療設備,也不會提供個性化的醫療建議。該應用程式的內容並不能代替專業醫護人員的醫療建議、診斷或治療。

# 案例示範24 - 職場新鮮人



保柏非凡自願醫保(倍精選): 特別適合剛畢業的職場新鮮人

24歲的Connie入職新公司,其僱主有提供基本的團體醫保,然而她希望以實惠的保費自行投保多一份個人醫療保險,為自己提供更多保障。參考不同的計劃後,她選擇了**保柏非凡自願** 醫**保(倍精選)**以補充原有由公司提供的團體醫保。

### Connie 的計劃詳情如下:



全數賠償合資格醫療費用限額最高可達每保單年度港幣 1,000萬元



每年自付費: 每保單年度 港幣 50,000 元

13



指定病房級別: 大房





專科醫生安排了內窺 鏡檢查和腹部掃描, 最終確診為胃癌。可 幸的是,其確診為早 期癌症,專科醫生建 議進行切除腫瘤的手 術。



Connie 在團體醫保 下提交了港幣 50,000元的索償, 她亦就保柏非凡自 願醫保計劃(倍精 選)提交了港幣 156,500元的索償。 在兩個計劃的保障 下,Connie 可獲全 數賠償合共港幣 206,500元的醫療 費用,她無須自付 任何費用。



#### 開支總額:

NIXMORK •		
項目	實際治療費用(港幣)	
入院前的門診護理及檢測		
入院前的門診護理(2次)	1,400	
訂明診斷成像檢測	9,000	
住院治療		
病房及膳食(2日)	2,200	
主診醫生巡房費(2日)	6,000	
外科醫生費	110,000	
麻醉科醫生費	30,000	
手術室費	35,000	
雜項開支	11,500	
出院後的門診護理		
出院後的門診護理(2次)	1,400	
總治療費用	206,500	

14

# 案例示範24 - 專業人士



保柏非凡自願醫保計劃(智選): 特別為尋求全面醫療保障的專業人士 而設計,以滿足他們多方面的需要

Peter是單身的專業人士,目前在一家跨國公司擔任高級IT經理的職位。他意識到全面的醫療保障極為重要,因此他於33歲時決定投保保拍非凡自願醫保計劃(智選)。

## Peter的計劃詳情如下:



全數賠償合資格醫療費用限額最高可達每保單年度港幣 2,500 萬元



每年自付費: 每保單年度 港幣 40,000 元



指定病房級別: 半私家房



Peter於投保兩年後 發現有間歇胸痛、持 續咳嗽和咳血的症 狀,求診後醫生建議 進行CT掃描以作進 一步檢查。隨後他確 診患上肺癌。





Peter被診斷患有癌症,符合癌症之全額賠償一豁免自付費<sup>25</sup>標準。因此,他將豁免自付費及獲得全數賠償,助他減輕癌症治療的經濟負擔。



Peter在團體醫保下提 交了港幣 8,000元的 CT掃描費用索償<sup>25</sup>, 由於免除了自付費,他 隨後從他的保柏非凡自 願醫保計劃(智選)中 索償了剩餘的港幣 685,400元,賠償總 額為港幣 743,400元。 額為港幣 743,400元。 這兩個計劃完全覆蓋了 所有的醫療費用,他無 須自付任何費用。

#### 盟 支總額:

用文總額:		
項目	實際治療費用 (港幣)	
入院前的護理及檢測		
訂明診斷成像檢測—CT掃描	8,000	
入院前的門診護理(2次)	1,400	
住院治療		
病房及膳食(7日)	16,000	
主診醫生巡房費(7日)	17,500	
外科醫生費	120,000	
麻醉科醫生費	33,000	
手術室費	35,000	
雜項開支	70,000	
出院後的護理及治療		
化療(6次療程)	200,000	
放射治療(10次)	240,000	
出院後的門診護理(2次)	2,500	
總治療費用	743,400	

16



## 保柏-你的明智之選

保柏是國際醫療保健專家,我們致力 為客戶提供多元化的醫療保險計劃, 助你應付不同人生階段的需要。



### 信譽卓著的醫療保健專家

我們於香港及世界各地提供醫療 保險及醫療保健服務

- 於全球服務超過3,800萬客戶
- 不設股東,以客為本
- 作為保柏集團的一份子,卓健醫療透過逾1,600個服務點,包括旗下卓健醫療中心,連同聯營診所,為市民及社區服務



#### 賠償服務承諾

我們承諾為你提供快捷簡便的 索償服務

- 收妥所需文件後,5-7個 工作天內即可完成賠償處理
- 網上索償服務
- 當賠償辦妥後,你將收到通知

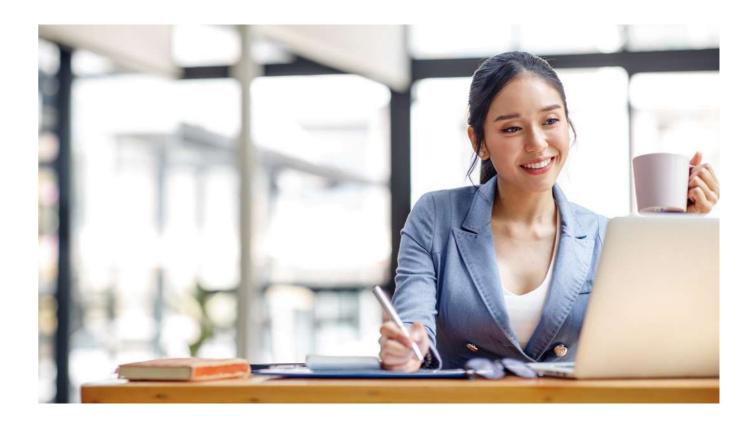
17



#### 24小時支援

全面支援,讓你隨時隨地管理 保單及掌握健康

- 24小時客戶服務專線
- 客戶服務網站myBupa



## 立即投保!

投保「保柏非凡自願醫保計劃」,盡享非凡保障。請透過 以下途徑投保或了解更多詳情。



#### 致電投保

致電保柏的健康管理顧問或聯絡你的保險顧問投保。



#### 網上報價

瀏覽我們的網站www.bupa.com.hk/hero。



### 常見問題

請瀏覽保柏網站 (www.bupa.com.hk/hero) 或掃描 二維碼以了解常見問題。



#### 備註

- 有關全數賠償所涵蓋的項目,請參閱保障摘要。全數賠償只適用於合資格費用,並受限於保障摘要所列的每年保障限額、 自付費及指定病房級別。詳情請參閱保單。
- 2. 亞洲、澳洲及新西蘭指阿富汗、澳洲、孟加拉、不丹、文萊、柬埔寨、中國大陸、香港、印度、印尼、日本、哈薩克、吉爾吉斯、老撾、澳門、馬來西亞、馬爾代夫、蒙古、緬甸、尼泊爾、新西蘭、北韓、巴基斯坦、菲律賓、新加坡、南韓、斯里蘭卡、台灣、塔吉克、泰國、東帝汶、土庫曼、烏茲別克及越南。
- 3. 於所選保障地域範圍以外招致的認可產品下的合資格費用,只可根據自願醫保標準計劃條款及保障作出賠償。詳情請參閱 保單。
- 4. 家庭折扣只適用於認可產品之標準保費及其附加保費,不適用於保柏非凡自願醫保計劃下其他自選保障的保費。合資格家庭成員須全部同時受保於另一個保柏非凡自願醫保計劃,方可獲得折扣。家庭折扣不適用於保柏非凡自願醫保計劃(精選及倍精選)。
- 5. 僅保柏非凡自願醫保計劃(精選及倍精選)允許在重要人生事件發生時升級計劃等級或降低自付費。當受保人結婚、生育、 置業、升職或移民時,他們有一次性的選擇權,可以在不重新核保的情況下降低或取消自付費,或升級計劃等級。詳情請 參閱保單。
- 6. 額外保障不適用於保柏非凡自願醫保計劃(精選)。
- 7. 自選保障(門診、產科、牙科及視力保障)及免費保障及服務並不屬自願醫保認可產品的一部分,有關之保費不可用作申請 稅項扣減,亦不適用於家庭折扣。
- 8. 免找數服務並不適用於認可產品之保障摘要上1) 基本保障下所列的項目 (k) 及 (l),以及 2) 額外保障下所列的項目 (c) (j) (如適用)。保柏非凡卡並不適用於本港私家醫院的門診部。如在海外接受治療,你只須預先致電保柏作出所須安排,便可享用免找數服務。你須按照所訂程序並向保柏索取初步保障審核以享免找數服務。
- 9. 癌症之全額賠償 豁免自付費不適用於在保障表中顯示為零元(\$O)自付費選項的「保柏非凡自願醫保計劃」(倍精選、智選、倍智選、尊尚或倍尊尚)及「保柏非凡自願醫保計劃」(精選)(不論自付費選項)。
- 10. 投保了保柏非凡自願醫保計劃(精選或倍精選)的受保人可選擇在入院前或日間手術前30日使用2次門診,及出院後或日間手術完成後90日內,使用20次(精選)或30次(倍精選)的跟進門診。詳情請參閱保障表。
- 11. 如你於投保時的身高體重比例屬過重、過輕或年齡為 65 歲或以上,保柏或會要求你提交健康檢查報告,以便處理你的申請。
- 12. 保柏保證每年續保你的保障至終身,惟你須符合保單條款及細則內所列明的續保要求。
- 13. 截至2023年12月,保柏過去五個合約年度的賠償數據顯示,保柏現有的個人大房保障計劃的賠償率為超過99%。
- 14. 你可瀏覽保柏網站 (www.bupa.com.hk/hero),查閱指定的香港私家醫院名單。此名單可能會不時更改。
- 15. 請登入保柏的客戶服務網站 myBupa 查閱最新的保柏非凡特選服務供應商名單。此名單可能會不時更改。
- 16. 保柏會向醫院及服務供應商直接支付你的合資格醫療費用,以你的初步保障審核信上所示的信用額及你的保單下可用保障限額為限,如有任何不合資格的醫療費用和自付費,你須退還有關費用。詳情請參閱 https://www.bupa.com.hk/tc/-medical-insurance/hero/常見問題。

- 17. 24 小時情緒解碼熱線適用於 18 歲或以上的受保人,18 歲以下的受保人需於保單持有人或監護人陪同下使用此服務。受條款及細則約束,詳情請參閱保單。
- 18. 每名投保合資格醫療保障計劃(獲醫務衞生局認可之自願醫保計劃)的納稅人均可就合資格保費扣稅。每年可用作申請稅項扣減的保費上限為每名受保人港幣8,000元。受保人與保單持有人之關係須列載於稅務局的《稅務條例》(第112章)「指明親屬」列表上。保費須於課稅年度內繳付方符合該課稅年度的申請稅項扣減資格。稅項扣減適用於2019年4月1日起生效的認可產品,不包括其他自選保障。每名納稅人可申請稅項扣減的受保人數及/或保單數目不設上限。為同居伴侶、孫子女、同居伴侶之父母/子女購買的保單並不符合稅項扣減的資格。請瀏覽www.bupa.com.hk/taxfaq了解更多稅項扣減 註情。
- 19. 所選保障地域範圍以外引致的自選保障相關費用將不獲賠償。詳情請參閱保單。
- 20. 要享用全數賠償,你必須於網絡保障下的保柏非凡特選服務供應商求診並受限於每保單年度的診治次數上限及每年最高賠 償額。詳情請參閱保障摘要。
- 21. 指定醫療服務供應商保留權利可在未事先通知的情況下修改及/或修訂名單。有關詳細條款和細則,請參閱 my Bupa 中的保柏誦行證單張。
- 22. 醫生會於辦公時間內支援護士解答問題。辦公時間為星期一至五,上午9時至下午6時(香港時間),公眾假期除外。
- 23. 免費保柏國際援助計劃並不屬自願醫保認可產品的一部分。若你不希望獲得此免費保障,請透過書面通知保柏。
- 24. 此等案例示範純屬虛構,並僅供說明用途。此等案例不構成及不能被視為保柏接納任何保險索償及承認任何責任。你的保 障範圍取決於相關保險保單的特定條款。
- 25. 在受保人的主診註冊醫生的書面證實確診癌症前,醫療服務所收取的費用及/或其他費用並未能自付費豁免(如有)。



## 重要資料

本冊子乃資料摘要,僅供參考之用。請務必細閱完整的保險保 單,以了解計劃之保障範圍、一般不保事項、條款及細則。

我們想幫助你在投保前了解本計劃。請細閱以下資料。

#### 等候期

本計劃下之認可產品及其他自選保障之等候期如下:

認可產品	• 不設等候期,保單生效後即可獲得保障。
	<ul> <li>懷孕併發症之保障只會賠償在保單生效日後首12個月之後受孕並因而引起的相關併發症。</li> </ul>
	• 尊尚系列下的身體檢查保障將於第二個保單年度起生效。
自選門診保障	不設等候期,保單生效後即可獲得保障。
自選牙科及視力保障	個別牙科項目於受保人連續受保於此保障六個月或以上,方可獲得賠償, 詳情請參閱保障摘要。
自選產科保障	受保人必須於本保障生效日之後受孕方可獲得賠償,首9個月等候期內不會獲得賠償。倘若因為終止懷孕或早產(妊娠20至37週之間的分娩),此產科保障將不會應用9個月等候期而作賠償,惟受保人必須於此產科保障生效日後受孕。為免存疑,若受保人於妊娠37週後但於9個月等候期內分娩,將不獲此產科保障賠償。

#### 冷靜期

若你並非完全滿意這份保單,你有權改變主意。你可於冷靜期內(即保單文件交付予你後 21 日內)取消你的保單。請以書面方式提出取消保單之要求,並連同所有保單文件交回保柏。若你並無獲得任何賠償,將可獲全數退還已繳保費。

詳情請參閱隨迎新信件附上的「保單冷靜期通知」。

#### 取消保單權益

你可在 3O 日前以書面方式通知保柏要求取消你的保單。但請留意取消保單只適用於該保單年度內沒有就保單獲得任何賠償的情況。

#### 有關核保之資料披露

在投保申請期間,你應以最高誠信向保柏披露所有重要事實。如果你不確定某個事實是否重要,則應將其披露。若你未有披露或披露失實資料以致影響保柏的風險評估,將會影響你的保障權益,後果包括保單被取消或索償款項被調低。

#### 自付費

自付費指每保單年度在保柏應付賠償金額前,必須由你承擔的合資格醫療費用。精選系列設有四項自付費選擇:港幣O元、港幣15,000元、港幣50,000元或港幣80,000元。智選及尊尚系列各設有四項自付費選擇:港幣O元、港幣12,000元、港幣40,000元或港幣80,000元。自付費不適用於任何自選保障,如門診保障。若你使用醫療卡支付費用,你須於稍後向保柏付還自付費金額。若你沒有使用醫療卡,有關自付費金額將在保柏應賠償支付的費用中扣除。詳情請參閱保單及保障摘要。

#### 索償步驟

任何索償須按照保柏所訂的索償程序進行。所有有關該索償的所須文件正本須於出院後或接受治療後90天內遞交,否則保柏 將不能處理你的賠償,或會導致索償被拒。

#### 保費調整

每名受保人的首期保費會根據年齡、健康狀況及保障選擇等因素而定。

你的保費並不會因曾作出索償而被調高。然而,續保保費或會因年齡遞增而相應調整。保柏可按醫療通脹、一般營運開支及因應醫療開支增加而作出的保障改動等因素,向所有同一類別保單調整標準保費率。在此情況下,同一類別保單指所有相同保障等級並具備相同條款及細則和保障表的保柏非凡自願醫保計劃保單(即港幣 O 元自付費的尊尚計劃、港幣 12,000 元自付費的尊尚計劃等均為獨立的類別)。

#### 續保

本保單生效期為期一年並會自動續保及收取保費,除非你以書面提出取消保單。無論你在投保後的健康狀況有任何改變,保柏保證每年續保你的保障至終身,只要你符合保單條款及細則內列明的續保要求。

我們了解每個人生階段有不同的保險需要,因此你可在每年續保時,靈活更改你的保障項目。若你選擇提升計劃等級、增加保障項目或減低自付費金額(如適用),你須填寫健康聲明作核保之用。核保須經保柏批准。請注意,你不可於保單生效日起或距離上次更改自付費後的24個月內申請減低自付費金額。

保柏可於每年續保時更改保單條款及保障,以符合自願醫保計劃認可產品的最新要求。所有改動將由醫務衞生局批核並於續保前以書面提前通知保單持有人。

#### 繳付保費

本計劃為醫務衞生局認可的自願醫保計劃,就認可產品所繳付的保費可用作申請稅項扣減(不包括其他自選保障)。詳情請瀏覽www.bupa.com.hk/taxfaq。

你應按申請時所選擇的繳費方式年繳或月繳保費。如你符合續保的資格條件,保柏將於保單續保時從自動轉賬戶口或信用卡戶 口自動扣取續保保費,除非我們接獲你的其他指示。

另外,保柏將給予60日繳交保費的寬限期,由保費到期日起計。你的保單於寬限期內仍然生效,惟在收到保費前,你將不會 獲支付任何賠償,直至保費已獲繳清。若在寬限期屆滿後你仍未繳清保費,你的保單會於保費到期日起終止。

#### 終止保單

你的保單將在以下情況時自動終止:

- 1. 在60日繳費寬限期屆滿時仍未繳交保費;
- 2. 受保人身故;或
- 3. 保柏不再獲《保險業條例》授權承保或繼續承保本保單。

#### 轉換至新的保險計劃

如你現時正受保於另一健康保障計劃並且取消該計劃以加入此計劃,你的保障範圍或會有所改變。例如,於你的前計劃下可獲 賠償的已存在病症將不獲受保,除非該些病症已被披露並獲保柏接納。當你轉換保險公司、從團體計劃轉換到個人計劃或從非 自願醫保計劃轉換到自願醫保計劃(反之亦然)時,請留意保障範圍的差異。

#### 一般不保事項

- 1. 任何非醫療所需治療、治療程序、藥物、檢測或服務的費用。
- 2. 若純粹為接受診斷程序或專職醫療服務(包括但不限於物理治療、職業治療及言語治療)而住院,該住院期間所招致的全部或部分費用。惟若該等程序或服務是在註冊醫生建議下因而進行醫療所需的診斷,或無法以為日症病人提供醫療服務的方式下有效地進行的傷病治療,則不屬此項。
- 3. 在保單生效日前,因感染或出現人體免疫力缺乏病毒("HIV")及其相關的傷病所招致的費用。不論保單持有人或受保人在遞交投保申請文件(若保柏在本保單之條款及保障第一部分第8節提出要求,則包括相關必需資料的任何更新及改動)時是否知悉,若此傷病在保單生效日前已存在,本條款及保障則不會賠償此傷病。若無法證明初次感染或出現此傷病的時間,則此傷病於保單生效日起計五(5)年內發病,將被推定為於保單生效日前已感染或出現;若在這五(5)年後發病,將被推定為於保單生效日後感染或出現。

惟本第3節的不保事項並不適用於因性侵犯、醫療援助、器官移植、輸血或捐血、或出生時受 HIV 感染所引致的傷病,有關賠償將按本條款及保障內其他條款處理。

- 4. 因倚賴或過量服用藥物、酒精、毒品或類似物質(或受其影響)、故意自殘身體或企圖自殺、參與非法活動、或性病及經由性接觸傳染的疾病或其後遺症(HIV及其相關的傷病將按本一般不保事項第3節處理)的醫療服務費用。
- 5. 以下服務的收費 -
  - (a) 以美容或整容為目的的服務,惟受保人因意外而受傷,並於意外後一(1)年内接受的必要醫療服務則不屬此項;或
  - (b) 矯正視力或屈光不正的服務,而該等視力問題可透過驗配眼鏡或隱形眼鏡矯正,包括但不限於眼部屈光治療、角膜激光矯視手術(LASIK),以及任何相關的檢測、治療程序及服務。
- 6. 預防性治療及預防性護理的費用,包括但不限於並無症狀下的一般身體檢查、定期檢測或篩查程序、或僅因受保人及/或 其家人過往病歷而進行的篩查或監測程序、頭髮重金屬元素分析、接種疫苗或健康補充品。為免存疑,本第6節並不適用 於 -
  - (a) 為了避免因接受其他醫療服務引起的併發症而進行的治療、監測、檢查或治療程序;
  - (b) 移除癌前病變;
  - (c) 為預防過往傷病復發或其併發症的治療;及
  - (d) 任何受保於本保單之條款及保障補充文件二第2及3節身體檢查的保障。
- 7. 牙科醫生進行的牙科治療及口腔領面手術的費用,惟受保人因意外引致在住院期間接受的急症治療及手術則不屬此項。出院後的跟進牙科治療及口腔手術則不會獲得賠償。
- 8. 除受保於本保單之條款及保障補充文件一第2(e)節懷孕併發症的保障外,下列醫療服務及輔導服務的費用 產科狀況及其 併發症,包括但不限於懷孕、分娩、墮胎或流產的診斷檢測;節育或恢復生育;任何性別的結紮或變性;不育(包括體外 受孕或任何其他人工受孕);以及性機能失常,包括但不限於任何原因導致的陽萎、不舉或早泄。
- 9. 購買屬耐用品的醫療設備及儀器的費用,包括但不限於輪椅、床及家具、呼吸道壓力機及面罩、可攜式氧氣及氧氣治療儀器、血液透析機、運動設備、眼鏡、助聽器、特殊支架、輔助步行器具、非處方藥物、家居使用的空氣清新機或空調及供熱裝置。為免存疑,住院期間、日間手術當日或受保於本保單之條款及保障補充文件一第2(k)節的指定保障下所租用的醫療設備及儀器則不屬此項。
- 10. 除受保於本保單之條款及保障補充文件一第2(h)節住院或指定治療後由註冊中醫師提供之診症或針灸的保障外,傳統中醫治療的費用,包括但不限於中草藥治療、跌打、針灸、穴位按摩及推拿,以及另類治療,包括但不限於催眠治療、氣功、按摩治療、香薰治療、自然療法、水療法、順勢療法及其他類似的治療。

- 11. 按接受治療、治療程序、檢測或服務所在地的普遍標準(或尚未經當地認可機構批准)界定為實驗性或未經證實醫療成效的醫療技術或治療程序的費用。
- 12. 受保人年屆八 (8) 歲前發病或確診的先天性疾病所招致的醫療服務費用。
- 13. 已獲任何法律,或由任何政府、僱主或第三方提供的醫療或保險計劃賠償的合資格費用。
- 14. 因戰爭(不論宣戰與否)、內戰、侵略、外敵行動、敵對行動、叛亂、革命、起義、或軍事政變或奪權事故所招致的治療費用。

#### 醫療所需

保柏只會根據「醫療所需」和「合理及慣常」的原則,為受保人所需支付的費用及/或開支作出賠償。

「醫療所需」是指按照一般公認的醫療標準,就診斷或治療相關傷病接受醫療服務的需要,而醫療服務必須符合下列條件:

- 需要註冊醫生的專業知識或轉介;
- 符合該傷病的診斷及治療所需;
- 按良好而審慎的醫學標準及主診註冊醫生審慎的專業判斷提供,而非主要為對受保人、其家庭成員、照顧人員或主診註冊 醫生帶來方便或舒適而提供;
- 在環境最適當及符合一般公認的醫療標準的設備下,提供醫療服務;及
- 按主診註冊醫生審慎的專業判斷,以最適當的水平向受保人安全及有效地提供。

評估該次住院是否醫療所需的考慮因素包括:急症治療、全身麻醉、醫院專用設備的必要性等。如該次住院被視為非醫療所需,保障賠償將會作出調整。

#### 合理及慣常

「合理及慣常」是指就醫療服務的收費而言,對情況類似的人士(例如同性別及相近年齡),就類似傷病提供類似治療、服務或物料時,不超過當地相關醫療服務供應者收取的一般收費範圍的水平。合理及慣常的收費水平由我們合理及絕對真誠地決定, 在任何情況下,此收費不得高於實際收費。

保柏必須參照以下資料(如適用)以釐定合理及慣常收費:

- 由保險或醫學業界進行的治療或服務費用統計及調查;
- 公司內部或業界的賠償統計;
- 政府憲報;及/或
- 提供治療、服務或物料當地的其他相關參考資料。

#### 器官移植手術的特別條款

器官移植手術的賠償將因應手術所進行的地區而有所不同。如手術於所選保障地域範圍(香港除外)進行,你應取得保柏的預 先批准,以享有本計劃下的最高賠償。

香港	所選保障地域範圍(香港除外)
無須預先批准,賠償以保障摘要上所示的每年保障限額 為限:	必須取得保柏的預先批准,賠償以保障摘要上「其他限額」 所示的金額為限:
• 精選計劃:每保單年度\$5,000,000	• 精選計劃:每保單年度 \$420,000
• 倍精選計劃:每保單年度 \$10,000,000	• 倍精選計劃:每保單年度\$500,000
• 智選計劃:每保單年度\$25,000,000	• 智選計劃:每保單年度 \$1,000,000
• 倍智選計劃:每保單年度\$30,000,000	• 倍智選計劃:每保單年度 \$1,200,000
• 尊尚計劃:每保單年度\$35,000,000	• 尊尚計劃:每保單年度 \$1,500,000
• 倍尊尚計劃:每保單年度\$40,000,000	• 倍尊尚計劃:每保單年度 \$1,800,000

重要資料

如你未有取得必須的預先批准,或於所選保障地域範圍以外地區進行手術,保障將根據自願醫保標準計劃條款及保障作出賠償。

#### 選擇病房級別及自願升級的調整

不論你在住院時入住任何病房級別,合資格醫療費用均可獲得賠償。然而,如入住的病房級別高於所選計劃的保障摘要內列明的病房級別,所獲的賠償將會按下述作出調整:

指定的病房級別	實際住院病房級別	調整	
大房	半私家房	乘以 50% 的調整值	
大房	標準私家房	秦以 25% 的調整值	
大房	高於標準私家房 (包括總統套房、貴賓房或豪華房)	將應用自願醫保標準計劃條款及 保障的賠償限額	
半私家房	標準私家房	乘以 50% 的調整值	
半私家房	高於標準私家房	將應用自願醫保標準計劃條款及 保障的賠償限額	
標準私家房	(包括總統套房、貴賓房或豪華房)		

25

惟因以下原因入住較高級別的病房則除外:

- 在接受急症治療的情況下醫院指定病房級別或較之為低的病房級別床位短缺;
- 需要住院隔離導致需要入住特定級別的病房;或
- 任何其他不涉及受保人個人對住院病房級別偏好的原因。

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### 保柏(亞洲)有限公司

香港九龍觀塘 海濱道77號 海濱匯第2座6樓

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本計劃由保柏 (亞洲) 有限公司承保。保柏 (亞洲) 有限公司已獲保險業監管局授權於香港特別行政區經營一般保險,並受其監管。



# Bupa Hero VHIS Plan taking care of you at different stages of your life

















We understand an elite person like you demands extraordinary health insurance that goes above and beyond. The Bupa Hero VHIS Plan provides full cover¹ for eligible expenses from HK\$5 million to HK\$40 million per year.

You can choose from plans covering Asia, Australia and New Zealand<sup>2,3</sup> or worldwide excluding the United States<sup>3</sup>. With this plan, you can be assured of receiving high-quality medical treatment without any worries. Additionally, **with no lifetime benefit limit**, your coverage will be restored each year no matter how much you claim.

Featuring the family discount<sup>4</sup> and four deductible options under each plan level, this plan allows you to better prepare for your health at different stages of your life. You can also lower or remove your deductible, or upgrade<sup>5</sup> your plan level at a specific age or an important life event<sup>5</sup> without re-underwriting.

The Bupa Hero VHIS Plan provides enhanced benefits<sup>6</sup>, medical check-up benefit, cashless service, optional clinical, dental benefits<sup>7</sup>, and more.

Highlights Plan overview

## **Highlights**



# Full cover on key medical expenses<sup>1</sup>

without sub-limit or lifetime benefit limit



Enjoy peace of mind with our cashless service<sup>8</sup> at

designated hospitals and healthcare service providers



Flexible options to suit your needs, with six plan levels and four deductible options to choose from within each plan level



Generous protection for cancer treatment<sup>9</sup>, with a waived deductible (if any) if you are unfortunately diagnosed with cancer



Progressive coverage safeguarding every stage of your life, you may lower or remove your deductible, or upgrade<sup>5</sup> plan level once at a specific age or an important life event<sup>5</sup> without re-underwriting



Comprehensive care for a full recovery, with full cover for all related outpatient expenses within 90 days before or 365 days after confinement or day case procedure (exclusive to Advance, Advance Pro, Deluxe and Deluxe Pro plans)<sup>10</sup>





## **Plan overview**

## Cover at a glance

	_					
	Core HK\$	Core Pro HK\$	Advance HK\$	Advance Pro	<b>Deluxe</b> HK\$	Deluxe Pro HK\$
Annual benefit limit	5 million	10 million	25 million	30 million	35 million	40 million
Lifetime benefit limit	2			benefit limit		
Area of cover	Asia, Australia and New Zealand <sup>2,3</sup>	Worldwide (exclude US) <sup>3</sup>	Asia, Australia and New Zealand <sup>2,3</sup>	Worldwide (exclude US) <sup>3</sup>	Asia, Australia and New Zealand <sup>2,3</sup>	Worldwide (exclude US) <sup>3</sup>
Deductil option		0 / 15,000 / 50,000 / 80,000 per Policy Year		0 / 12,000 / 40,000 / 80,000 per Policy Year		
Room level	W	Ward		For Hong Kong, Macau, Taiwan and Mainland China: Semi-private room For other areas in Asia, Australia and New Zealand <sup>2,3</sup> : Standard private room		
Family discoun	t <sup>4</sup> N	N/A		members enro	•	

## Eligibility

3	
Policy holder	Aged 18 or above
Insured Person	<ul> <li>Policy holder</li> <li>Policy holder's spouse, child, grandchild</li> <li>Policy holder or policy holder's spouse's parents, grandparents, siblings</li> <li>Policy holder's domestic partner, their parents or child</li> </ul>
Issue age	Aged 15 days to 80 years (inclusive) at policy commencement
Application	No medical examinations required <sup>11</sup>
Renewal	Guaranteed lifelong renewal <sup>12</sup>

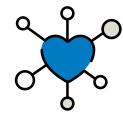
Key features Key features

## **Key features**



## Full cover on key medical expenses<sup>1</sup> without sub-limit or lifetime benefit limit

Expenses such as surgeon fees, intensive care, prescribed diagnostic imaging tests and prescribed non-surgical cancer treatments are covered in full up to your annual benefit limit for treatments in your chosen area of cover.



#### Flexible options to suits your needs

Bupa Hero provides generous cover from **HK\$5 million to HK\$40 million every year**<sup>1</sup> and choices of coverage in Asia, Australia and New Zealand<sup>2,3</sup>, or worldwide (excluding the United States)<sup>3</sup>.

You may also choose from 4 deductible options under each plan level to lower your premium.



Do you know that the **Bupa Hero VHIS Plan (Core)** with an annual benefit limit of HK\$5M is sufficient to cover 99% of your medical expense<sup>13</sup> on common disease (including major surgeries or serious illness)?



#### A progressive coverage safeguarding every stage of your life

Progressive coverage is specifically designed to adapt to evolving needs with the occurrence of **important life events**<sup>5</sup>, including marriage, childbirth, acquisition of individual residential property, job promotion, or migration. Policy holders have the **flexibility to upgrade**<sup>5</sup> **their plan's annual benefit** from HK\$5 million to HK\$10 million, or from HK\$10 million to HK\$25 million, **all without the need for re-underwriting**.

You can choose to **lower or remove your deductible** 30 days before the renewal date without re-underwriting once at any of the following ages: 50, 55, 60, 65, 70, 75, 80 or 85 or upon an important life event<sup>5</sup>. This provides more flexibility for budget planning after an important life event or retirement<sup>5</sup>.



#### Enjoy peace of mind with our cashless service8

With your Bupa Hero card, you can **enjoy cashless service** at designated private hospitals<sup>14</sup> and Bupa Hero appointed service providers<sup>15</sup> (including diagnostic centres, specialist clinics, etc.) in Hong Kong. For overseas hospitalisation, you can enjoy this service in your chosen area of cover by calling Bupa to make the necessary arrangements. We'll settle your eligible expenses directly with the hospital or service provider (subject to your pre-approved limit)<sup>16</sup>.



If you've visited a hospital or service provider outside of our designated network, you can still enjoy a seamless experience by using our online customer service portal, myBupa, to submit claims online. This enables you to focus on your well-being.



#### Generous protection for cancer treatment9

With this plan, you don't need to worry about medical bills adding up if you're diagnosed with cancer. We'll waive your chosen deductible (if any)<sup>9</sup> so that all your **cancer treatment expenses will be covered straightaway**. Treatments such as chemotherapy, radiotherapy (including but not limited to proton therapy), targeted therapy, immunotherapy, and more are fully covered up to your annual benefit limit, allowing you to focus on recovery.



We can recommend treatments that are covered under your policy, enabling you to optimise the value of your medical coverage. Additionally, we can provide you with referrals to trusted healthcare professionals within our network.



#### Comprehensive care for a full recovery

This plan offers extended follow-up care for any condition. You can **enjoy full cover for all related outpatient expenses within 90 days before or 365 days after confinement or a day case procedure**<sup>10</sup>. The enhanced benefits<sup>6</sup> also include coverage for rehabilitation, consultation with a registered Chinese medicine practitioner, prosthetic devices and so on. You'll be well protected in case of chronic diseases or serious illnesses like cancer.

## **Other features**



#### Mental health support

This plan is the first VHIS plan in Hong Kong to prioritise mental health, offering full cover for inpatient psychiatric treatments. Additionally it includes a free 24-hour Mental Health Service Hotline<sup>17</sup>, which provides personalised emotional support and face-to-face counselling services.



#### **Outpatient surgery in hospitals and clinics**

With no minimum length of stay required, surgeries performed in a clinic or day case unit of a hospital are also covered.



#### **Guaranteed renewal**

Bupa guarantees that your cover can be renewed every year for life. Your premium will only be based on your age no matter how much you claim after your policy is in effect<sup>12</sup>.



#### **Enhanced cover including unknown pre-existing conditions**

Your policy can cover unknown pre-existing conditions and congenital conditions with symptoms appearing or diagnosed from age 8, subject to the policy's General Exclusions. You can also choose cover for pre-existing conditions, subject to underwriting and an additional premium.



#### Eligible for tax deduction

This plan is certified as VHIS compliant. You can claim a tax deduction on qualifying premiums up to a limit of HK\$8,000 per insured person each year<sup>18</sup>.



# Extra coverage and services for Deluxe plans



Receive a free medical check-up each year starting from the second policy year (for insured persons aged 18 or above).



Osteopath and podiatrist vists<sup>7</sup> (exclusive to insured persons enrolled in Clinical Benefit).



**Vaccination benefit**<sup>7</sup> (exclusive to insured persons enrolled in Clinical Benefit).



**Extra Dental items and Optical Benefit**<sup>7</sup> (exclusive to insured persons enrolled in Dental and Optical Benefit).



Non-emergency global healthcare support while travelling, we can help you find a doctor or make an appointment.



**Appointments making** with your preferred healthcare service providers.

Optional benefits Free benefits and services



## Optional benefits<sup>7</sup>

Enhance your coverage with optional benefits for doctor's visits, dental care, and more. Choose any or all optional benefits to meet your healthcare needs. All optional benefits offer coverage in your chosen area of cover<sup>19</sup>.



#### **Clinical Benefit**

The Clinical Benefit includes general practitioners, specialists, diagnostic imaging and laboratory tests, prescribed Western medication, physiotherapists, chiropractors, Chinese herbalists, Chinese bonesetters, psychiatric-related treatments and psychological counselling etc.

If you've enrolled in the Clinical Benefit, you can also enjoy cashless service and full cover<sup>20</sup> at network clinics and service providers. Additionally, you can benefit from video consultation services to consult our selected doctors through a video call comfortably and safely at home. Visit www.bupa.com.hk/vc for details.



#### Dental Renefit

Our Dental Benefit covers a wide range of dental expenses, including scaling and polishing, fillings and extractions, periodontal surgery, accident emergency treatment, and more.



#### **Maternity Benefit**

The benefit covers obstetrician's fees, hospitalisation charges, prenatal and postnatal check-up costs and nursery care for a newborn baby during hospital confinement.



## Free benefits and services<sup>7</sup>

This plan is specially designed with a series of complimentary benefits and services to take care of both your physical and mental health.



#### **Bupa Pass**

Even if you have not enrolled in Clinical Benefit coverage, Bupa Pass allows you to access a diverse range of medical services at privileged rates. These include general and specialist outpatient practices, traditional Chinese medicine (including Chinese bone setting and acupuncture), physiotherapy, vaccination and health checks. No registration is required; simply present your Bupa Hero card at designated clinics and centres<sup>21</sup> in Hong Kong to access quality and convenient medical services at an affordable price.



#### **Health Coaching Services**

We're here for you at all times. Our Health Coaching Services offer personalised healthcare support and guidance delivered by a team of doctors, qualified nurses and health management professionals to minimise your worries and give you peace of mind. For complicated conditions, Health Coaching Services can provide extra assistance for a smooth recovery.

#### 24/7 Healthline

Our team of qualified health management professionals<sup>22</sup> can provide assistance and guidance – from caring for a sick relative to discussing symptoms, treatments, and more.

#### Care Manager

Our Care Manager can follow up on claims and assist you throughout treatment and recovery, from explaining your treatment plan and overseeing costs to arranging follow-up consultations. If you're admitted to a local private hospital, our Care Manager will make a courtesy call or visit, with your consent.

#### Second medical opinion

We'll arrange for you to receive medical advice from a panel of medical specialists to clarify your doubts, enabling you to make informed decisions about your treatment.

#### Healthcare centre choices

We can provide a list of clinics and hospitals based on your specific condition or needs for your reference.

#### Chronic Conditions programme

This programme offers lifestyle coaching and management, including personal phone calls to help you manage any chronic condition such as diabetes.

Free benefits and services Free benefits and services



#### Cancer Care

Cancer Care provides comprehensive support to help you navigate the complexities of cancer care. This includes a dedicated nurse hotline, personalised treatment plans, and fast-tracked booking services.



#### **One-stop specialist treatment programmes**

Bupa is here to support your health at different stages along your healthcare journey. That's why we offer a series of treatment programmes for insured persons focusing on various specialties, providing personalised care and guidance through network providers and a health coaching team. Through these programmes, you can enjoy the following benefits:

#### Supporting your health every day, every way

- Multiple specialties to meet different medical needs
- Quality-assured network clinics and facilities
- Experienced health professionals to guide you from consultation through treatment and follow-up
- · Cashless service with an eligible medical card

For more details and the latest updates about the specialist treatment programmes, please visit Bupa's website.



#### Free Bupa Worldwide Assistance Programme<sup>23</sup>

With the Bupa Hero VHIS Plan, you'll also receive our free worldwide assistance programme. It provides medical support and assistance if you need help while overseas or in mainland China.



## Insurance and wellness in your hands

With a single myBupa account, you can access two free Bupa apps designed to help you manage your policy and lead a healthier life.



#### Manage your policy online

myBupa is an all-in-one customer service portal that provides you with 24/7 access to manage your policy, redeem exclusive offers, search your preferred network doctors and clinics, submit claims and more.



#### Manage your health and earn rewards in Blua Health

Staying healthy is the greatest commitment you can make to yourself and your family. Blua Health helps you manage your health with Al powered health-tracking technology. You can also earn points to redeem rewards for healthy living. Keep moving to earn more!



Enjoy a variety of free health app features



Assess your health in 30 seconds with Al Technology



Exercise with AI coach anytime, anywhere



Earn points to redeem rewards for healthy living



Download **Blua Health** now and take control of your healthier future!



Blua Health is offered, distributed and operated by Horizon Health and Care Limited, a company registered in Hong Kong under the Bupa Group.

Blua Health is not a medical device, and it does not provide personalised medical advice. The contents of the mobile app cannot replace the medical advice, diagnosis and treatment of medical professionals.

If you have any question on your medical condition, please seek advice immediately from doctor or other qualified medical service provider.

Case illustration Case illustration

## Case illustration<sup>24</sup> - fresh graduate



Bupa Hero VHIS Plan (Core Pro): Especially suitable for young adults who have recently joined the workforce

At the age of 24, Connie joined a new company that provided basic group health coverage. To enhance her coverage at an affordable rate, Connie decided to purchase an individual insurance plan as a top-up. She chose the **Bupa Hero VHIS Plan (Core Pro)** to

supplement her existing coverage.





Full cover on eligible expense up to HK\$10 million per Policy Year



Here are the details of Connie's plan:

HK\$50,000 per Policy Year

13



Restricted room level: Ward



8 months after enrolling in the plan, Connie began experiencing persistent upper abdominal pain and back pain. She visited a general practitioner at a designated clinic, using her Bupa Hero card to access the privileged rates offered through the Bupa Pass Programme. Concerned about her symptoms, the general practitioner referred her to a specialist for further investigation.



The specialist arranged for Connie to undergo an endoscopy and an abdominal scan, which confirmed a diagnosis of stomach cancer. Fortunately, it was caught early, and surgery to remove the tumour was recommended.



Connie submitted a claim of HK\$50,000 from her group scheme and HK\$156,500 from her Bupa Hero VHIS Plan (Core Pro), totalling HK\$206,500 in expenses. The total expenses were fully covered under the two plans. eliminating any out-of-pocket costs for Connie.



After 3 years, Connie got married and saw it as an opportunity to leverage the progressive coverage offered by Bupa. Embracing her increased responsibilities, she decided to upgrade from the Bupa Hero VHIS Plan (Core Pro) to the Bupa Hero VHIS Plan (Advance) without re-underwriting. This upgrade provided her with enhanced coverage, ensuring protection against unexpected financial burdens.

#### **Total cost:**

Item	Actual treatment expenses (HK\$)
Pre-hospitalisation treatment and investigation	
Pre-confinement outpatient care (2 visits)	1,400
Prescribed diagnostic imaging tests	9,000
Hospitalisation	
Room and board (2 days)	2,200
Attending doctor's visit fee (2 days)	6,000
Surgeon's fee	110,000
Anaesthetist's fee	30,000
Operating theatre charges	35,000
Miscellaneous charges	11,500
Post-hospitalisation care and treatment	
Post confinement outpatient care (2 visits)	1,400
Total treatment expenses incurred	206,500

14

Case illustration Case illustration

## **Case illustration**<sup>24</sup> - working professional



Bupa Hero VHIS Plan (Advance): Tailored for working professionals seeking comprehensive coverage

Peter, a single Senior IT Manager in a multinational company, recognised the importance of comprehensive healthcare coverage and enrolled in the **Bupa Hero VHIS Plan (Advance)** at the age of 33.

#### Here are the details of Peter's plan:



Full cover on eligible expense up to HK\$25 million

per Policy Year



HK\$40,000 per Policy Year

15



Restricted room level: **Semi-private** 



2 years after enrolling in the Bupa Hero VHIS Plan (Advance), Peter began experiencing on-and-off chest pain, persistent cough, and coughing up blood. Subsequently, he underwent a CT scan which diagnosed him with lung cancer.



Devastated and worried, Peter sought immediate support by contacting the Bupa Cancer Care hotline. Bupa's dedicated nurse provided counselling and facilitated fast-tracked bookings for prompt cancer diagnostics and treatment. Through Bupa's cancer care pathways, Peter underwent necessary investigations, surgical removal of the cancer, chemotherapy, radiotherapy, and the post-operative rehabilitation smoothly.



As Peter was diagnosed with cancer, his chosen deductible under the Bupa Hero VHIS Plan was waived<sup>25</sup>. All expenses for his cancer treatment were fully covered and reimbursed, significantly easing his financial burden.



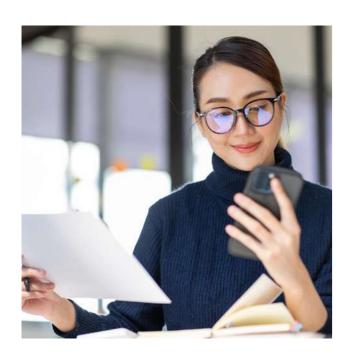
Peter submitted a claim of HK\$8,000 for the CT scan from his group scheme<sup>25</sup>. Since the deductible was waived due to his cancer diagnosis, he then claimed the remaining HK\$735,400 from his Bupa Hero VHIS Plan (Advance), totalling HK\$743,400 in expenses. Both plans fully covered the expenses, ensuring Peter had no out-of-pocket costs.

#### **Total cost:**

otal cost.				
Item	Actual treatment expenses (HK\$)			
Pre-hospitalisation treatment and investigation				
Prescribed diagnostic imaging tests (CT scan)	8,000			
Pre confinement outpatient care (2 visits)	1,400			
Hospitalisation				
Room and board (7 days)	16,000			
Attending doctor's visit fee (7 days)	17,500			
Surgeon's fee	120,000			
Anaesthetist's fee	33,000			
Operating theatre charges	35,000			
Miscellaneous charges	70,000			
Post-hospitalisation care and treatment				
Chemotherapy (6 cycles)	200,000			
Radiotherapy (10 sessions)	240,000			
Post confinement outpatient care (2 visits)	2,500			
Total treatment expenses incurred	743,400			

16

Why choose Bupa Enrol now



## Why choose Bupa

We're a global healthcare specialist providing a wide range of comprehensive and flexible insurance plans to suit every life stage and lifestyle.



## Reputation and expertise in healthcare

Providing healthcare funding and provision for people in Hong Kong and beyond

- Serving over 38 million customers worldwide
- With no shareholders, our customers are our focus
- As part of Bupa, Quality
  HealthCare provides
  primary care services
  through a network of over
  1,600 service points in
  Hong Kong, including
  Quality HealthCare
  Medical Centres and
  affiliated clinic



#### Claims service pledge

Promising you a quick and easy claims process

- All claims settled within 5-7 working days after receiving full documentation
- Submit claims online
- Notifications when your claim has been processed

17



## Round-the-clock support

Allowing you to manage your policy and your health at your convenience via

- 24-hour telephone support
- Online customer service portal myBupa



## **Enrol now!**

We hope you'll choose our Bupa Hero VHIS Plan for comprehensive coverage. You can enrol or learn more in the following ways.



#### **Phone enrolment**

Call Bupa's Health Management Consultant or contact your insurance consultant for enrolment.



#### Online quotation

Visit our website at www.bupa.com.hk/hero.



#### **Frequently Asked Questions**

18

Please visit Bupa's website (www.bupa.com.hk/hero) or scan the **QR code** to access the frequently asked questions.



Remarks

#### **Remarks**

- 1. Please refer to the Summary of Benefits for the items eligible for full cover. Full cover is only applicable to covered expenses and subject to the annual benefit limit, deductible and restricted ward class set out in the Summary of Benefits. Please refer to the Policy for details.
- Asia, Australia and New Zealand means Afghanistan, Australia, Bangladesh, Bhutan, Brunei, Cambodia, mainland China, Hong Kong, India, Indonesia, Japan, Kazakhstan, Kyrgyzstan, Laos, Macau, Malaysia, Maldives, Mongolia, Myanmar, Nepal, New Zealand, North Korea, Pakistan, the Philippines, Singapore, South Korea, Sri Lanka, Taiwan, Tajikistan, Thailand, Timor-Leste, Turkmenistan, Uzbekistan and Vietnam.
- For eligible expenses covered under the certified plan but incurred outside your chosen area of cover, benefits shall only be payable according to the VHIS Standard Plan Terms and Benefits. Please refer to the Policy for details.
- 4. Family discount will be applied to the standard premium and premium loading of the certified plan only, but not any other optional benefits under the Bupa Hero VHIS Plan. The discount will be valid as long as the eligible family members are all covered under a Bupa Hero VHIS Plan at the same time. Family discount is not applicable to Bupa Hero VHIS Plan (Core and Core Pro).
- 5. Upgrading of plan level or lowering deductible upon an important life event is exclusive to Bupa Hero VHIS Plan (Core and Core Pro). When an insured person experiences marriage, childbirth, acquisition of individual residential property, job promotion, or migration, they have the option to exercise the one-time right to lower or eliminate deductibles or upgrade their plan level without undergoing re-underwriting. Please refer to the Policy for details.
- 6. Enhanced benefits are not applicable to Bupa Hero VHIS Plan (Core).
- Optional benefits (Clinical, Maternity, Dental, Dental and Optical Benefit) and free benefits and services are not part of the VHIS certified plan. The premiums paid are not eligible for claiming tax deduction and any family discount.
- 8. Cashless service is not applicable to items (k) and (l) listed under 1) Basic Benefits and items (c) (j) listed under 2) Enhanced Benefits (if applicable) in the Summary of Benefits for the Certified Plan. Your Bupa Hero card is not applicable to the outpatient department of a local private hospital. For overseas hospitalisation, you can enjoy cashless service by calling Bupa to make the necessary arrangements. You need to follow the required procedures and obtain pre-authorisation from Bupa to enjoy cashless service.
- 9. First-dollar coverage Deductible waived for Cancer are not applicable to Bupa Hero VHIS Plan (Core Pro, Advance, Advance Pro, Deluxe or Deluxe Pro) with zero dollar (\$0) Deductible option shown in the Benefit Schedule and Bupa Hero VHIS Plan (Core) (regardless of its Deductible option).
- 10. For insured persons who enrolled in Bupa Hero VHIS Plan (Core or Core Pro), they can enjoy 2 prior outpatient visits and 20 (for Core) or 30 (for Core Pro) follow-up outpatient visits taking place within 30 days before admission or Day Case Procedure and 90 days after discharge from Hospital or completion of Day Case Procedure. Please refer to the Benefit Schedule for details.
- 11. If your Body Mass Index is considered as overweight, underweight or you're aged 65 or above at enrolment, Bupa may ask you to submit a check-up report as part of your health insurance application process.
- 12. Bupa guarantees that your cover can be renewed every year for life, as long as you meet the requirements as stated in the renewal provisions of your policy terms and conditions.
- 13. As of December 2023, based on claim data from Bupa's existing individual ward plan products in past 5 contract years, the reimbursement rate is over 99%.
- 14. Please visit Bupa's website (www.bupa.com.hk/hero) for the list of designated private hospitals in Hong Kong. This list is subject to change from time to time.
- 15. Please log in to Bupa's customer service portal myBupa to view the latest list of Bupa Hero appointed service providers. This list is subject to change from time to time.

- 16. Bupa will directly pay your eligible medical expenses to the hospitals and service providers subject to the credit limit stated in your pre-authorisation letter and the benefit limit available under your Policy. You will need to reimburse Bupa for any ineligible medical expenses and selected deductible, if any. Please refer to https://www.bupa.com.hk/en/medical-insurance/hero/ "Frequently Asked Questions" for details.
- 17. The 24-hour Mental Health Service Hotline is applicable to insured persons aged 18 or above. Insured persons aged below 18 must be accompanied by the Policy Holder or guardian to use this service. Terms and conditions apply. Please refer to the Policy for details.
- 18. Any Hong Kong taxpayer who has purchased an eligible health insurance plan (certified by the Health Bureau as VHIS) can claim a tax deduction on qualifying premiums up to HK\$8,000 per insured person each year. The relationship between the taxpayer and the insured person must be included in the list of "specified relatives" in Inland Revenue Ordinance (Cap. 112). You can claim the deduction in the same tax year when the premium was paid. The deduction is available for certified plans, but not any other optional benefits, with policy effective date of 1 April 2019 or later. There is no limit on the number of insured persons and/or policies claimed by each taxpayer. Policies purchased for a domestic partner, grandchild(ren) or domestic partner's parents/children are not eligible for tax deduction. For details about tax deduction, please visit www.bupa.com.hk/taxfaq.
- 19. For expenses incurred under optional benefits outside your chosen area of cover, no benefits shall be payable. Please refer to the Policy for details.
- 20. To enjoy full cover, you must visit Bupa Hero appointed service providers under the Network Benefit, subject to the maximum number of visits per policy year and the overall annual limit. Please refer to the Summary of Benefits for details.
- 21. The designated healthcare service provider reserves the right to amend and/or revise the listings without prior notice. For detailed terms and conditions, please refer to the Bupa Pass leaflet shown in myBupa for details.
- 22. Doctors will be available during scheduled office hours to support the nurses in answering enquiries. Office hours: Mon Fri, 9am to 6pm (Hong Kong time), except public holidays.
- 23. The Free Bupa Worldwide Assistance Programme is not part of the VHIS certified plan. Please inform Bupa in writing if you don't want to receive this free benefit.
- 24. These case illustrations are fictional and solely for illustration purpose. None of these illustrations constitute and can be construed as any admission of claim and liability on the part of Bupa Your coverage depends on the specific terms of the insurance policy.
- 25. Prior to a confirmed cancer diagnosis by the insured person's attending registered medical practitioner in writing, the fees and/or other charges for the medical services are not eligible for the waiver of the deductible (if any).

Important information Important information



## **Important information**

This brochure is a product summary for reference only. You are strongly advised to read and understand the coverage, general exclusions, terms and conditions of the complete insurance policy.

We want to help you understand this plan before you enrol. Please read the information below carefully.

#### **Waiting period**

The waiting period for the certified plan and other optional benefits are as follows:

Certified Plan	<ul> <li>No waiting period, coverage starts as soon as your policy is in effect.</li> <li>Complications of pregnancy will be payable provided that such complication results from a conception which occurred 12 months after the policy effective date.</li> <li>For Deluxe plans, the Medical Check-up Benefit is effective from the second policy year.</li> </ul>
Optional Clinical Benefit	No waiting period, coverage starts as soon as your policy is in effect.
Optional Dental and Optical Benefit	Certain dental items will be payable after you have been continuously covered under this benefit for six months or more. Please refer to the Summary of Benefits for details.
Optional Maternity benefit	This benefit is payable provided that the conception occurs after the commencement date of this benefit and no benefit shall be payable during the waiting period of the first 9 months. In the event of premature termination of pregnancy or premature birth (delivery that occurs between 20 and 37 weeks of gestation), this benefit shall be payable without the application of the 9 months' waiting period provided that the conception of such pregnancy occurs after the commencement date of this Maternity Benefit. For the avoidance of doubt, if delivery is occurred after 37 weeks of gestation but within the 9 months' waiting period, this Maternity Benefit shall not be payable.

#### **Cooling-off period**

If you're not fully satisfied with this plan, you have the right to change your mind. You can cancel your plan during the cooling-off period (i.e. within 21 days after the delivery of policy documents to you). You'll need to make your cancellation request in writing and return all your policy documents to Bupa. Then you'll receive a full refund of the premiums paid as long as no benefits have been paid.

Please refer to the "Notice on cooling-off period of your Policy" enclosed in your welcome pack for details.

#### **Cancellation rights**

You can cancel your policy at any time by giving 30 days' written notice to Bupa. However, cancellation is only available if no benefits have been paid during the relevant policy year.

#### Disclosure of information for underwriting

During the insurance application process, it's important that you act with utmost good faith and disclose all material facts to Bupa. If you are uncertain as to whether a fact is material, then it should be disclosed. If you fail to disclose or misrepresent a material fact which may impact Bupa's risk assessment, this will raise questions about your entitlement to insurance benefits. Consequences may include cancellation of your policy or reduction of entitlement to claims payments.

#### **Deductible**

A deductible is the amount of eligible expenses that you must pay each policy year before Bupa will reimburse your eligible medical expenses. Fore Core plans, you can choose from 4 deductible options: HK\$0, HK\$15,000, HK\$50,000, HK\$80,000. For Advance and Deluxe plans, you can choose from 4 deductible options respectively: HK\$0, HK\$12,000, HK\$40,000, HK\$80,000. The deductible won't apply to any optional benefits such as Clinical Benefit. If you use your medical card to pay your expenses, you'll need to reimburse Bupa for the deductible amount afterwards. If you don't use your medical card, then Bupa will reimburse your eligible medical expenses after subtracting the deductible amount. Please refer to the Policy and Summary of Benefits for details.

#### Claims procedure

Any claim must be made following Bupa's claim procedures. All necessary original documents must be submitted within 90 days after discharge from hospital or completion of medical service. Otherwise, we won't be able to process your claim and it may be rejected.

#### **Premium adjustment**

Each insured person's initial premium is primarily determined based on factors such as age, health conditions and choice of coverage.

Any claims you make won't affect your premium at renewal. However, renewal premiums may still increase as you get older. Bupa may adjust the standard premium rate on an overall portfolio basis with reference to factors such as medical inflation, general operating expenses and revision of benefits to cover increasing medical expenses. In this case, the portfolio is all Bupa Hero VHIS Plan policies with the same level of coverage under the same terms and conditions and benefit schedule (i.e., one portfolio each for all Deluxe plans with HK\$0 Deductible, HK\$12,000 Deductible and so on).

#### Renewal

This policy will last for 1 year and will be renewed with premium payments collected automatically, unless you submit a written request to cancel your policy. Bupa guarantees that your cover can be renewed every year for life as long as you meet the requirements as stated in the renewal provisions of your policy terms and conditions, regardless of any changes in your health condition.

We understand that your healthcare needs may change throughout your life, so you have the flexibility to change your benefits every year upon renewal. If you wish to upgrade your plan, add any benefit(s) or reduce your deductible in future (if applicable), you will need to complete a health declaration form for medical underwriting purposes. Approval will be subject to underwriting. Please note that you can't apply to reduce your deductible within 24 months of the policy effective date or any previous change in deductible. Bupa may revise the policy terms and benefits every year at renewal in order to comply with the latest VHIS requirements. All changes will be certified by the Health Bureau and are subject to prior written notice to the policy holder upon renewal.

#### Payment of premiums

This is a VHIS plan certified by the Health Bureau. The premiums paid under the certified plan are eligible for claiming tax deduction (excluding Optional Benefits). Please refer to www.bupa.com.hk/taxfaq for details. You should pay your premium annually or monthly, based on the payment method selected during the application process. If you've fulfilled the eligibility criteria for renewal, we will charge your premium automatically at the next policy renewal, unless we have received other instructions from you. In addition, you're allowed a 60-day grace period after the premium due date to complete the payment process. During that time, your policy will still be in effect but no benefits will be paid until the premium is paid. However, if you still haven't paid your premium when the grace period ends, your policy will be terminated from the premium due date.

#### **Termination of your policy**

Your policy will be terminated automatically in the following situations:

- 1. non-payment of premiums after a grace period of 60 days after the premium due date;
- 2. upon the death of the insured person; or
- 3. Bupa has ceased to have the requisite authorisation under the Insurance Ordinance to write or continue to write this policy.

#### Changing to a new insurance plan

If you're currently enrolled in a different health insurance plan and you cancel it to enrol in this plan, there may be changes to your coverage. For example, pre-existing conditions payable under your previous plan won't be covered unless they've been disclosed and accepted by Bupa. Please be mindful of the differences in coverage when you change insurers, from a group plan to an individual plan or from a non-VHIS plan to a VHIS plan (and vice versa).

Important information Important information

#### **General exclusions**

- 1. Expenses incurred for treatments, procedures, medications, tests or services which are not medically necessary.
- 2. Expenses incurred for the whole or part of the confinement solely for the purpose of diagnostic procedures or allied health services, including but not limited to physiotherapy, occupational therapy and speech therapy, unless such procedure or service is recommended by a registered medical practitioner for medically necessary investigation or treatment of a disability which cannot be effectively performed in a setting for providing medical services to a day patient.
- 3. Expenses arising from human immunodeficiency virus ("HIV") and its related disability, which is contracted or occurs before the policy effective date. Irrespective of whether it is known or unknown to the policy holder or the insured person at the time of submission of application, including any updates of and changes to such requisite information (if so requested by Bupa under Section 8 of Part 1 of the Policy Terms and Benefits) such disability shall be generally excluded from any coverage of the Terms and Benefits if it exists before the policy effective date. If evidence of proof as to the time at which such disability is first contracted or occurs is not available, manifestation of such disability within the first five (5) years after the policy effective date shall be presumed to be contracted or occur before the policy effective date, while manifestation after such five (5) years shall be presumed to be contracted or occur after the policy effective date. However, the exclusion under this entire Section 3 shall not apply where HIV and its related disability is caused by sexual assault, medical assistance, organ transplant, blood transfusions or blood donation, or infection at birth, and in such cases the other terms of the Policy Terms and Benefits shall apply.
- 4. Expenses incurred for medical services as a result of disability arising from or consequential upon the dependence, overdose or influence of drugs, alcohol, narcotics or similar drugs or agents, self-inflicted injuries or attempted suicide, illegal activity, or venereal and sexually transmitted disease or its sequelae (except for HIV and its related disability, where Section 3 of these General exclusions applies).
- 5. Any charges in respect of services for -
  - (a) beautification or cosmetic purposes, unless necessitated by injury caused by an accident and the insured person receives the medical services within one (1) year of the accident; or
  - (b) correcting visual acuity or refractive errors that can be corrected by fitting of spectacles or contact lens, including but not limited to eye refractive therapy, LASIK and any related tests, procedures and services.
- 6. Expenses incurred for prophylactic treatment or preventive care, including but not limited to general check-ups, routine tests, screening procedures for asymptomatic conditions, screening or surveillance procedures based on the health history of the insured person and/or his family members, hair mineral analysis (HMA), immunisation or health supplements. For the avoidance of doubt, this Section 6 does not apply to
  - (a) treatments, monitoring, investigation or procedures with the purpose of avoiding complications arising from any other medical services provided:
  - (b) removal of pre-malignant conditions;
  - (c) treatment for prevention of recurrence or complication of a previous disability; and
  - (d) any medical check-up benefits payable under Sections 2 and 3 of Supplement 2 of the Policy Terms and Benefits.
- 7. Expenses incurred for dental treatment and oral and maxillofacial procedures performed by a dentist except for emergency treatment and surgery during confinement arising from an accident. Follow-up dental treatment or oral surgery after discharge from hospital shall not be covered.
- 8. Except for the complications of pregnancy benefit payable under Section 2(e) of Supplement 1 of the Policy Terms and Benefits, expenses incurred for medical services and counselling services relating to maternity conditions and its complications, including but not limited to diagnostic tests for pregnancy or resulting childbirth, abortion or miscarriage; birth control or reversal of birth control; sterilisation or sex reassignment of either sex; infertility including in-vitro fertilisation or any other artificial method of inducing pregnancy; or sexual dysfunction including but not limited to impotence, erectile dysfunction or pre-mature ejaculation, regardless of cause.
- 9. Expenses incurred for the purchase of durable medical equipment or appliances including but not limited to wheelchairs, beds and furniture, airway pressure machines and masks, portable oxygen and oxygen therapy devices, dialysis machines, exercise equipment, spectacles, hearing aids, special braces, walking aids, over-the-counter drugs, air purifiers or conditioners and heat appliances for home use. For the avoidance of doubt, this exclusion shall not apply to rental of medical equipment or appliances during confinement, on the day of the day case procedure or specific benefit payable under Section 2(k) of Supplement 1 of the Policy Terms and Benefits.
- 10. Except for the consultation or acupuncture by a registered Chinese medicine practitioner after confinement or specific treatments benefit payable under Section 2(h) of Supplement 1 of the Policy Terms and Benefits, expenses incurred for traditional Chinese medicine treatment, including but not limited to herbal treatment, bone-setting, acupuncture, acupressure and tui na, and other forms of alternative treatment including but not limited to hypnotism, qigong, massage therapy, aromatherapy, naturopathy, hydropathy, homeotherapy and other similar treatments.

23

- 11. Expenses incurred for experimental or unproven medical technology or procedure in accordance with the common standard, or not approved by the recognised authority, in the locality where the treatment, procedure, test or service is received.
- 12. Expenses incurred for medical services provided as a result of congenital condition(s) which have manifested or been diagnosed before the insured person attained the age of eight (8) years.
- 13. Eligible expenses which have been reimbursed under any law, or medical program or insurance policy provided by any government, company or other third party.
- 14. Expenses incurred for treatment for disability arising from war (declared or undeclared), civil war, invasion, acts of foreign enemies, hostilities, rebellion, revolution, insurrection, or military or usurped power.

#### **Medically necessary**

We only cover the expenses of the insured person when they are medically necessary and reasonable and customary.

"Medically necessary" means the need for a medical service for the purpose of investigating or treating the relevant disability in accordance with the generally accepted standards of medical practice. This service must:

- require the expertise of, or be referred by, a registered medical practitioner;
- be consistent with the diagnosis and necessary for the investigation and treatment of the disability;
- be in accordance with standards of good and prudent medical practice, and not be primarily for the convenience or the comfort of the insured person, his/her family, caretaker or the attending registered medical practitioner;
- be provided in the setting that is most appropriate in the circumstances and in accordance with the generally accepted standards of medical practice for the medical services; and
- be at the most appropriate level which, in the professional judgment of the attending registered medical practitioner, can be safely and effectively provided to the insured person.

Additional factors will be considered to assess whether a hospitalisation is medically necessary, e.g. the need for emergency treatment, general anaesthesia, specific equipment in hospital, etc. If a hospitalisation is considered not medically necessary, benefits payable will be adjusted.

#### Reasonable and customary

In relation to a charge for medical services, "reasonable and customary" means a level which does not exceed the general range of charges being charged by relevant service providers in the locality where the charge is incurred for similar treatment, services or supplies to individuals with similar conditions, e.g. of the same sex and similar age, for a similar disability, as reasonably determined by Bupa in utmost good faith. The reasonable and customary charges shall not in any event exceed the actual charges incurred.

In determining whether a charge is reasonable and customary, we will make reference to the following (if applicable):

- treatment or service fee statistics and surveys in the insurance or medical industry:
- internal or industry claim statistics;
- gazette published by the government; and/or
- other relevant sources in the locality where the treatments, services or supplies are provided.

#### Special conditions for organ transplant surgery

For organ transplant surgery, your benefits will be paid differently depending on the location of the surgery. If your surgery is performed in your chosen area of cover (but not in Hong Kong), you should get pre-approval from Bupa to maximise your cover.

In Hong Kong	In your chosen area of cover (except Hong Kong)
No pre-approval required, with coverage up to the annual benefit limit in the Summary of Benefits:	Pre-approval from Bupa is required, with coverage up to the amount shown in Other Limits in the Summary of Benefits:
• Core: HK\$5,000,000	Core: HK\$420,000
• Core Pro: HK\$10,000,000	Core Pro: HK\$500,000
Advance: HK\$25,000,000	Advance: HK\$1,000,000
<ul> <li>Advance Pro: HK\$30,000,000</li> </ul>	Advance Pro: HK\$1,200,000
• Deluxe: HK\$35,000,000	• Deluxe: HK\$1,500,000
Deluxe Pro: HK\$40,000,000	Deluxe Pro: HK\$1,800,000

#### Important information

If you don't get the necessary pre-approval or receive surgery outside your chosen area of cover, the VHIS Standard Plan Terms and Benefits will apply.

#### Choice of ward class and adjustment for voluntary upgrade

Your eligible expenses will be covered regardless of your confined ward class. However, if your confined ward class is higher than the ward class listed in your Summary of Benefits, your coverage will be adjusted as follows:

Restricted ward class	Actual confined ward class	Adjustment	
Ward room	Semi-private room	Multiplied by a 50% adjustment factor	
Ward room	Standard private room	Multiplied by a 25% adjustment factor	
Ward room	Above standard private room including suite, VIP or deluxe room	The benefit limits of the VHIS Standard Plan Terms and Benefits shall apply	
Semi-private room	Standard private room	Multiplied by a 50% adjustment factor	
Semi-private room	Above standard private room including suite, VIP or deluxe room	The benefit limits of the VHIS Standard Plan Terms and	
Standard private room		Benefits will apply	

The adjustments above will apply except when the upgrade in ward class is due to:

- unavailability of a restricted or lower ward class due to room shortage at the hospital for emergency treatment;
- confinement in isolation that requires a specific ward class; or
- any other reason not involving the insured person's own individual preference for the confined ward class.

25

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### **Bupa (Asia) Limited**

6/F, Tower 2,
The Quayside,
77 Hoi Bun Road,
Kwun Tong, Kowloon,
Hong Kong

Telephone: (852) 2517 5175 Facsimile: (852) 2548 1848

www.bupa.com.hk

This plan is insured by Bupa (Asia) Limited. Bupa (Asia) Limited is authorised and regulated by the Insurance Authority in Hong Kong to carry out general insurance business in the HKSAR.



#### 保障摘要 Summary of Benefits

2024年9月1日版本 1 September 2024 Edition

⊕ 尊尚系列獨有保障及服務
Exclusive coverage and services for Deluxe plans

倍尊尚 Deluxe Pro

全球但不包括美國②

Worldwide excluding the United

保柏非凡自願醫保計劃(尊尚、倍尊尚)提供以下選擇(括號內數字為自願醫保認可產品編號):

Bupa Hero VHIS Plan (Deluxe, Deluxe Pro) offers the options below (VHIS certification numbers in brackets):

#### 尊尚 Deluxe

- \$0 自付費 Deductible (F00040-05-000-04)
- 。 \$12,000 自付費 Deductible (F00040-06-000-04)
- 。 \$40,000 自付費 Deductible (F00040-07-000-04)
- 。 \$80,000 自付費 Deductible (F00040-08-000-04)

計劃選項 Plan option

保障地域範圍

Area of cover

#### 倍尊尚 Deluxe Pro

尊尚 Deluxe

亞洲、澳洲及新西蘭①

Asia, Australia and New

- 。 \$0 自付費 Deductible (F00040-13-000-02)
- 。 \$12,000 自付費 Deductible (F00040-14-000-02)
- ° \$40,000 自付費 Deductible (F00040-15-000-02)
- 。\$80,000 自付費 Deductible (F00040-16-000-02)

#### A 認可產品之保障摘要 Summary of Benefits for the Certified Plan

	Area or cover	Zealand <sup>①</sup>	States <sup>②</sup>	
	指定病房級別 <sup>⑪</sup> Restricted ward class <sup>⑪</sup>	標準私家房 Standard Private Room	標準私家房 Standard Private Room	
D	1) 基本保障及 2) 額外保障下所有保障項目之自付費 Peductible for all benefit items under 1) Basic Benefits and 2) Enhanced Benefits	每保單年度港元 \$0 / \$12,000 / \$40,000 / \$80,000 per Policy Year		
	癌症 <sup>③③</sup> 之全額賠償 – 豁免自付費 irst-dollar coverage – Deductible waived for Cancer <sup>③⑤</sup>	若受保人 - 。 患上癌症 <sup>③⑤</sup> ;及 。 在主診註冊醫生的書面建議下直接因癌症 <sup>③⑥</sup> 接受任何醫療服務,而其按		
1)	基本保障 Basic Benefits	尊尚 Deluxe        倍尊尚 Deluxe Pro		
	保障項目 <sup>®</sup> Benefit items <sup>®</sup>	賠償限額 (港元) Benefit limit (in HKD)		
a	病房及膳食 Room and board	全數賠償® Full cover®		
b	雜項開支 Miscellaneous charges	全數賠償 <sup>®</sup> Full cover <sup>®</sup> (受 2)額外保障下保障項目(i)「人工裝置」的賠償限額所規限) (Subject to benefit limit of benefit item (i) Prosthetic Device under 2) Enhanced Benefits)		
С	主診醫生巡房費 Attending doctor's visit fee			
d	專科醫生費 <sup>③</sup> Specialist's fee <sup>③</sup>			
е	深切治療 Intensive care			
f	外科醫生費 (不限手術類別) Surgeon's fee (regardless of the surgical category)	7. db-ca	r <del>i</del>	
g	麻醉科醫生費 (不限手術類別) Anaesthetist's fee (regardless of the surgical category)	全數則 Full co		
h 	手術室費 (不限手術類別) Operating theatre charges (regardless of the surgical category)			
i	訂明診斷成像檢測 <sup>⑤⑥</sup> Prescribed Diagnostic Imaging Tests <sup>⑤⑥</sup>			
j	訂明非手術癌症治療 <sup>①</sup> Prescribed Non-surgical Cancer Treatments <sup>①</sup>			
k	入院前或出院後/日間手術前後的門診護理 <sup>③</sup> Pre- and post-Confinement / Day Case Procedure outpatient care <sup>⑤</sup>	<ul> <li>住院/日間手術前90日內所</li> <li>出院/日間手術後365日內</li> <li>Full cover® for the folk</li> <li>1 prior outpatient visit or Emerge Day Case Procedure taking place admission or Day Case Procedur</li> <li>All prior outpatient visits or Eme Confinement/Day Case Procedu before admission or Day Case Pr</li> <li>All follow-up outpatient visits pe</li> </ul>	目所進行的一次門診或急症診症; 所進行的所有門診或急症診症;及 的所有跟進門診 owing specified visits <sup>®</sup> : ency consultation per Confinement/ e more than 90 days before e; crgency consultations per re taking place within 90 days	
Τ	精神科治療 Psychiatric treatments	全數賠償⑧	Full cover®	



2)	額外保障 Enhanced Benefits	尊尚 Deluxe	倍尊尚 Deluxe Pro	
	保障項目 <sup>⑥</sup> Benefit items <sup>⑥</sup>	賠償限額 (港元) Benefit limit (in HKD)		
а	私家看護費 <sup>⑤</sup> Private nursing <sup>⑤</sup>	全數賠償® (每保單年度最多90日) Full cover® (Maximum 90 days per Policy Year)		
b	陪床費 Companion bed	全數賠償® Full cover®		
С	急症意外門診保障 Emergency outpatient treatment for Accidents			
d	日症病人洗腎 <sup>⑤</sup> Day Patient kidney dialysis <sup>⑥</sup>			
е	<ul> <li>懷孕併發症 Complications of pregnancy</li> <li>本保障只會賠償在保單生效日後首12個月之後受孕並因而引起的相關 併發症</li> <li>This benefit shall only be payable for complications resulting from a conception occurring after the first 12 months from the Policy Effective Date</li> </ul>	每保單年度 \$180,000 per Policy Year	每保單年度 \$230,000 per Policy Year	
f	康復治療 Rehabilitation	每日\$3,150 per day	每日\$3,300 per day	
	Kendalikation	(Maximum 90 days per c	.) (必須取得保柏之預先批准) lisability per Policy Year) pproval by Bupa)	
g	善終服務及緩和治療 <sup>③</sup> Hospice and palliative care <sup>⑤</sup>	每保單年度\$120,000 per Policy Year	每保單年度\$150,000 per Policy Year	
h	住院或指定治療後由註冊中醫師提供之診症或針灸 Consultation or acupuncture by a Registered Chinese Medicine	每次\$750 per visit	每次\$850 per visit	
	Practitioner after Confinement or specific treatments	(每保單年度最多20 次)(Maximum 20 visits per Policy Year)		
i	人工裝置 <sup>⑤</sup> Prosthetic Device <sup>⑤</sup>	每保單年度每項裝置 \$120,000 per item per Policy Year	每保單年度每項裝置 \$150,000 per item per Policy Year	
j	因中風而提升家居設備 <sup>⑤</sup> Home facility enhancement due to Stroke <sup>⑤</sup>	每保單年度\$80,000 per Policy Year	每保單年度\$100,000 per Policy Year	
	Tionie facility emiancement due to stroke-	(須於中風出院後緊接其後的180日內完成) (Completed within 180 days after discharge from Hospital due to Stroke)		
k	非住院睡眠窒息症測試 <sup>③</sup> Non-Confinement sleep apnea test <sup>③</sup>	全數賠償®非住院睡眠窒息症測試及以下列明的診症®:  property pr		

#### 3) ♥身體檢查保障 **Medical Check-Up Benefit**

- 若受保人受保於本計劃(不論其自付費選項)連續12個月或以上,可由第二個保單年度開始,於每個保單年度享受以下任可一種身體檢查保障 -(i) 於指定之香港健康檢查供應商出示保柏發出的換領信,以接受免費身體檢查服務一次(不適用於年齡18歲以下之受保人);或 (ii) 申請索償一次或多次於保單年度內在所選保障地域範圍接受身體檢查服務之費用,以每保單年度港元4,000(尊尚計劃)或港元4,800(倍尊尚計劃)最高賠償限額為 限。

If the Insured Person has been continuously covered under this plan (regardless of its Deductible option) for 12 months or more, the Insured Person can enjoy either one of the following medical check-up benefits per Policy Year starting from the second Policy Year

- (i) Redeem one free medical check-up service at designated healthcare providers in Hong Kong by presenting the redemption letter issued by Bupa (not applicable to Insured Persons below Age 18); or
- (ii) Reimburse the fees charged for one or more medical check-up service(s) received in the chosen area of cover within the Policy Year up to an aggregate maximum benefit limit of HK\$4,000 for Deluxe or HK\$4,800 for Deluxe Pro per Policy Year.



4) 其他限額 Other Limits	尊尚 Deluxe	倍尊尚 Deluxe Pro	
進行器官移植手術並按 1) 基本保障下保障項目(a) - (i) 及 (k),以及 2) 額 外保障下保障項目(a)、(b)、(f)、(g)、(h) 及 (i) 的總保障限額 <sup>®</sup> Aggregate benefit limit for benefit items (a) - (i) and (k) under 1) Basic Benefits and (a), (b), (f), (g), (h) and (i) under	亞洲、澳洲及新西蘭 <sup>①</sup> (香港除外) Any area in Asia, Australia and New Zealand <sup>①</sup> excluding Hong Kong	任何地方但不包括美國 <sup>②</sup> 及香港 Any area excluding the United States <sup>③</sup> and Hong Kong	
2) Enhanced Benefits for organ transplant surgery®	每保單年度 \$1,500,000 per Policy Year	每保單年度\$1,800,000 per Policy Year	
	(必須取得保柏之預先批准) (Subject to pre-approval by Bupa)		
	香港 Hong Kong	香港 Hong Kong	
	受每年保障限額所規限 Subject to Annual Benefit Limit		
1) 基本保障及 2) 額外保障下所有保障項目的每年保障限額 Annual Benefit Limit for all items under 1) Basic Benefits and 2) Enhanced Benefits	每保單年度\$35,000,000 per Policy Year	每保單年度\$40,000,000 per Policy Year	
1) 基本保障及 2) 額外保障下所有保障項目的終身保障限額 Lifetime Benefit Limit for all items under 1) Basic Benefits and 2) Enhanced Benefits	無 Nil		

#### 註解Notes

- (2) 「亞洲、澳洲及新西蘭」指阿富汗、澳洲、孟加拉、不丹、文萊、柬埔寨、中國大陸、香港、印度、印尼、日本、哈薩克、吉爾吉斯、老趙、澳門、馬來西亞、馬爾代夫、蒙古、緬甸、尼泊爾、新西蘭、北韓、巴基斯坦、菲律賓、新加坡、南韓、斯里蘭卡、台灣、塔吉克、泰國、東帝汶、土庫曼、烏茲別克及越南。於亞洲、澳洲及新西蘭以外招致的醫療費用,其1)基本保障下之保障項目將根據自顯醫保標準計劃條款及保障的相應賠償限額賠償及2)額外保障下的保障將不獲賠償。詳情請參閱補充文件五。
  ② 於美國以內所招致的醫療費用,其1)基本保障下之保障項目將根據自顯醫保標準計劃條款及保障的相應賠償限額賠償及2)額外保障下的保障將不獲賠償。詳情請參閱補充文件五。
  ③ 詳情請參閱補充文件六。癌症的定義受不保條件限制。
  ④ 除非另有註則,同一項目的合資格費用或受保障之費用不可獲1)基本保障下(a) (l)及2)額外保障下(a) (l)項多於一個保障項目的賠償。

- ⑤ 保柏有權要求有關書面建議的證明,例如轉介信或由主診醫生或註冊醫生在索價申請表內提供的陳述。 ⑥ 檢測只包括電腦斷層掃描 ("CT" 掃描 )、磁力共振掃描 ("MRI" 掃描 )、正電子放射斷層掃描 ("PET" 掃描 )、PET-CT 組合及 PET-MRI 組合。
- 治療只包括放射性治療 、化療、標靶治療、免疫治療及荷爾蒙治療
- 全數賠償是指不設分項賠償限額。 就住院 / 日間手術 / 非住院睡眠窒息症測試前的門診或急症診症 (如適用) 所招致之合資格費用索償,須於 (a) 受保人出院當日或 (b) 進行日間手術 / 非住院睡眠窒息症測試當日 (視情況而定 ) 起90天內提交予本公司。
- 詳情請參閱補充文件五
- ⑩ 你必須於特定地域入住指定病房級別或以下的病房。若你住院時自願地入住指定病房級別以上的病房,所有合資格賠償將根據保單條款作出調整。詳情請參閱補充文件五。
- (i) "Asia, Australia and New Zealand" means Afghanistan, Australia, Bangladesh, Bhutan, Brunei, Cambodia, mainland China, Hong Kong, India, Indonesia, Japan, Kazakhstan, Kyrgyzstan, Laos, Macau, Malaysia, Maldives, Mongolia, Myanmar, Nepal, New Zealand, North Korea, Pakistan, the Philippines, Singapore, South Korea, Sri Lanka, Taiwan Tajikistan, Thailand, Timor-Leste, Turkmenistan, Uzbekistan and Vietnam. For medical expenses incurred outside Asia, Australia and New Zealand, the benefits payable for the benefit items under 1) Basic Benefits will be subject to the corresponding benefit limits under the VHIS Standard Plan Terms and Benefits and no benefits shall be payable
- under 2) Enhanced Benefits. Please refer to Supplement 5 for details.
  For medical expenses incurred in the United States, the benefits payable for the benefit items under 1) Basic Benefits will be subject to the corresponding benefit limits under the VHIS Standard Plan Terms and Benefits and no benefits shall be payable under 2) Enhanced Benefits. Please refer to Supplement 5 for details

  Please refer to Supplement 6 for details. The definition of Cancer is subject to excluded conditions.
- Unless otherwise specified, Eligible Expenses or covered expenses incurred in respect of the same item shall not be recoverable under more than one benefit item in the table for items (a) (l) of l) Basic Benefits and items (a) (k) of 2) Enhanced Benefits.
- Bupa shall have the right to ask for proof of recommendation e.g. written referral or testifying statement on the claim form by the attending doctor or Registered Medical Practitioner
- Tests covered here only include computed tomography ("CT" scan), magnetic resonance imaging ("MRI" scan), positron emission tomography ("PET" scan), PET-CT combined and PET-MRI combined.

  Treatments covered here only include radiotherapy, chemotherapy, targeted therapy, immunotherapy and hormonal therapy.

- Full cover shall mean no itemised benefit sublimit.
   Claims for the Eligible Expenses incurred on prior outpatient visits or Emergency consultations (if applicable) shall be submitted to the Company within 90 days after (a) the date on which the Insured Person is discharged from the Hospital or (b) the date on which the Day Case Procedure/non-Confinement sleep apnea test is performed, as the case may be.
- ® You must be Confined at the restricted ward class or lower in the specified geographical area. If you are voluntarily Confined in a room at a higher level, benefits payable in respect of all eligible claims shall be adjusted based on the terms of your Policy. Please refer to Supplement 5 for details.

詳情請瀏覽 www.bupa.com.hk/bupaheropolicy 參閱保單及保障資料。 Please refer to the Policy and Benefit Information at www.bupa.com.hk/bupaheropolicy for details.



以下為保柏非凡自願醫保計劃(尊尚、倍尊尚)的免費保障及服務,並非認可產品的一部分。

The following free benefits and services under Bupa Hero VHIS Plan (Deluxe, Deluxe Pro) are not part of the Certified Plan.

B 免費保障及服務 Free Benefits and Services

#### 1) 「保柏非凡卡」 及免找數服務

#### **Bupa Hero Card and cashless service**

- 投保本計劃後,你將獲發「保柏非凡卡」(須符合有關資格)。憑卡於指定的香港私家醫院住院、或於保柏非凡特選服務供應商接受日間手術、訂明非手術癌症治療或訂明診斷成像檢測可享免找數、免索償服務。 請於住院或接受治療/手術前最少兩個工作天向保柏提交初步保障審核表格(有關初步保障審核之步驟,請參閱會員指引),並於登記時出示保柏非凡卡及/或初步保
- 保柏會直接向醫院或服務供應商支付你的合資格醫療費用,以初步審核確認/付款保證信之信用額為限。而超過信用額的醫療費用,保單特有人須自行繳付,然後向保

- 相提出系值。 請參閱保柏網站 (www.bupa.com.hk/hero) 查閱最新的指定香港私家醫院名單。此名單可能會不時更改。 請登入保柏的客戶服務網站myBupa查閱最新的保柏非凡特選服務供應商名單。此名單可能會不時更改。 如在海外接受治療,你只須預先致電保柏,便可於所選保障地域範圍的醫院享用此服務。 免找數服務並不適用於 1) 基本保障下所列的項目 (k) 入院前或出院後/日間手術前後的門診護理及項目 (l) 精神科治療,以及 2) 額外保障下所列的項目 (c) (j)。醫療主並不適用於 1) 基本保障下所列的項目 (c) (j)。醫療主並不適用於 1) 基本保障下所列的項目 (c) (j)。醫療主義
- 如有任何差額和自付費,保單持有人須向保柏退還有關費用,詳情請參閱保單。
- You'll receive a Bupa Hero Card (BH card) after enrolling in this plan subject to the eligibility requirements of Bupa. You can use your BH card to enjoy cashless service without submitting any claims for Confinement at designated private Hospitals in Hong Kong, or Day Case Procedure, Prescribed Non-surgical Cancer Treatment or Prescribed Diagnostic Imaging Test received at Bupa Hero Appointed Service Providers.
- Please submit a pre-authorisation form to Bupa at least 2 working days before Confinement and treatment/procedures (please refer to the Membership Guide for the pre-authorisation procedure), and present your BH card and/or pre-authorisation document at registration.

  Bupa will settle your eligible medical expenses with the Hospital or service provider directly, subject to the approved credit limit as stated in the
- pre-authorisation confirmation / guarantee of payment letter. For medical expenses exceeding the credit limit, the Policy Holder will need to pay first and then submit a claim to Bupa for reimbursement.
- Please refer to Bupa's website (www.bupa.com.hk/hero) for the latest list of designated private Hospitals in Hong Kong. This list is subject to change from time to time.
- Please log in to Bupa's customer service portal myBupa to view the latest list of Bupa Hero Appointed Service Providers. This list is subject to change from time to time.
- For overseas hospitalisation, you can enjoy this service in your chosen area of cover by calling Bupa to make the necessary arrangements
- Cashless service is not applicable to item (k) pre- and post-Confinement/Day Case Procedure outpatient care and item (l) psychiatric treatments listed under 1) Basic Benefits and items (c) (j) listed under 2) Enhanced Benefits. Medical card is not applicable to the outpatient department of a Ocal private hospital. Please settle your payment first and submit a claim to Bupa.
  You may need to reimburse Bupa for the amount of selected Deductible and Shortfall, if any. Please refer to the Policy for more details.

#### 2) 健康支援服務

#### **Health Coaching Services**

「健康支援服務」由醫生、合資格護士和健康管理團隊組成,為你提供個人健康管理支援服務,包括:

#### 24 小時健康專線

提供每天24小時支援服務,為你解答健康問題並提供指引,根據病徵或病況建議合適的做法

營 醫療中心選擇及預約診症 可根據你的指定情況或需要為你提供診所及醫院名單以供參考,更可為你預約選定的醫生診症

若入住本港私家醫院,保柏的健康顧問會全程協助,讓你了解你的治療詳情和醫療開支預算,替你處理有關入院、出院後跟進治療及索償等事宜

如在診斷和治療上遇到各種疑慮,我們可安排醫療專家為你提供專業的第二意見,讓你掌握病情從而決定治療方法

#### 慢性疾病管理計劃

提供控制慢性疾病如糖尿病、高血壓的建議,包括生活習慣建議及跟進病情等服務

#### ♥ 非緊急環球健康支援

無論你身在海外時遇上健康問題需要支援,或計劃於海外接受治療,均可為你尋找合適醫生、預約及協助安排翻譯服務

The Health Coaching Services give you access to personal healthcare support delivered by a team of doctors, qualified nurses and health management professionals including:

#### 24-hour Healthline

24/7 guidance on health-related queries, suggesting a suitable course of action based on your symptoms and condition

#### The Healthcare Centre Choices and Appointment Making

Provide a list of clinics and hospitals based on your specific condition or needs for your reference as well as set up appointments with your selected doctors

#### Care Manager

A personal Care Manager will follow you throughout your hospital stay in a local private Hospital to help you understand your treatment plan and obtain cost estimates, as well as facilitate admission, follow-up treatments after discharge and claims

#### Second Medical Opinion

Clarify any doubts about your diagnosis and proposed treatment by obtaining medical advice from a panel of medical specialists

#### **Chronic Conditions Programme**

Lifestyle coaching and follow-up services to help you manage chronic conditions such as diabetes and hypertension

#### ♥ Non-emergency Global Healthcare Support

Locate suitable doctors, arrange medical appointments and support language translation either when you are in need overseas, or plan to travel for treatment

請瀏覽保柏網站 www.bupa.com.hk/health-coaching-services 查閱健康支援服務的條款及細則。

Please refer to Bupa's website at www.bupa.com.hk/health-coaching-services for the terms and conditions of the Health Coaching Services.

- 「健康支援服務」建議的服務之有關費用由受保人自付,除非該費用在保單下屬受保項目。
- 醫生會於辦公時間內支援護士解答問題。辦公時間為星期一至五,上午9時至下午6時(香港時間),公眾假期除外。
- 「健康支援服務」由保柏與保柏委任的服務供應商提供
- Any fees for the services suggested by Health Coaching Services will be paid by the Insured Person unless otherwise covered under the Policy.
- Doctors will be available during scheduled office hours to support the nurses in answering enquiries. Office hours: Mon Fri, from 9am to 6pm (Hong Kong time), except public holidays
- Health Coaching Services are provided by Bupa and providers appointed by Bupa.



#### 3) 24 小時情緒解碼熱線

#### 24-hour Mental Health Service Hotline

此服務由保柏特選的服務供應商及其經驗豐富的合資格輔導人員及臨床心理學家團隊提供。你可隨時致電熱線以獲得輔導人員的免費情緒支援及個人化輔導服務。如有需要,輔導人員更可為你安排接受臨床心理學家的面談輔導服務(每保單年度四次)。請放心,你所提供的資料均會保密。

This service is provided by our selected service providers and their team of qualified and experienced counsellors and clinical psychologists. Through the hotline, counsellors offer free emotional support and personalised advice. They can also arrange face-to-face counselling services with a clinical psychologist if needed (four times per Policy Year). Rest assured that all information provided will be kept in strict confidence.

請瀏覽保柏網站 www.bupa.com.hk/hero 查閱 24 小時情緒解碼熱線的條款及細則。

Please refer to Bupa's website at www.bupa.com.hk/hero for the terms and conditions of the 24-hour Mental Health Service Hotline.

- 。 24 小時情緒解碼熱線適用於18 歲或以上的受保人,18 歲以下的受保人需於保單持有人或監護人陪同下使用此服務。
- The 24-hour Mental Health Service Hotline is applicable to Insured Persons aged 18 or above. Insured Persons aged below 18 must be accompanied by the Policy Holder or guardian to use this service.

#### 4) 免費保柏國際援助計劃

#### Free Bupa Worldwide Assistance Programme

提供海外及中國住院按金墊支服務,全數支付緊急醫療運送費用及送返香港後高達港元12萬的額外住院保障,並設有24小時熱線提供旅遊、醫療或法律資訊及支援。 Provides admission deposit in the event of hospitalisation overseas and in China, unlimited cover for emergency medical evacuation and repatriation, and an extra hospital benefit of HK\$120,000 after repatriation to Hong Kong. A 24-hour hotline for travel, medical or legal information and assistance is also available.

- 免費保柏國際援助計劃並不屬自願醫保認可產品的一部分。若你不希望獲得此免費保障,請以書面通知保柏。
- 。 這項服務是保柏聘用之服務供應商(「服務供應商」)負責提供並受條款及細則約束。服務供應商為獨立的承辦商,並非保柏的代理。保柏不須就受保人因服務供應商或其代理提供之服務或建議或該等服務之供應而直接或間接蒙受或招致之任何損失、損害、費用、起訴、訴訟或法律程序,向保單持有人或受保人承擔任何責任。
- The Free Bupa Worldwide Assistance Programme is not part of the VHIS Certified Plan. Please inform Bupa in writing if you don't want to receive this free benefit.
- These services are provided by the Service Provider(s) engaged by Bupa and terms and conditions apply. The Service Provider is a third party service provider, which is an independent contractor and is not an agent of Bupa. Bupa shall not be liable to the Policy Holder or Insured Person in any respect of any loss, damage, expense, suit, action or proceeding suffered or incurred by the Insured Person, whether directly or indirectly, arising from or in connection with the services provided or advice given by the Service Provider(s) or its agent, or the availability of such services.



以下為保柏非凡自願醫保計劃(尊尚、倍尊尚)的自選保障,並非認可產品的一部分並且不適用於申請稅項扣減及家庭折扣。 The optional benefits of the Bupa Hero VHIS Plan (Deluxe, Deluxe Pro) shown below are not part of the Certified Plan, and are not eligible for claiming tax deduction and family discount.

C 自選保障之保障摘要 Summary of Benefits for Optional Benefits

	賠償限額 (港元) Benefit limit (in HKD)				
1)	門診保障(自選保障)	尊尚D	Peluxe	倍尊尚 Deluxe Pro	
	Clinical Benefit (Optional Benefit)	網絡保障 <sup>®</sup> Network Benefit <sup>®</sup>	非網絡保障 Non-Network Benefit	網絡保障 <sup>®</sup> Network Benefit <sup>®</sup>	非網絡保障 Non-Network Benefit
	保障地域範圍 Area of cover		及新西蘭 <sup>®</sup> nd New Zealand <sup>®</sup>		包括美國 ng the United States
	每年最高賠償額 Overall Annual Limit	\$200	0,000	\$250	),000
	保柏非凡特選服務供應商數目 <sup>®</sup> No. of Bupa Hero Appointed Service Providers <sup>®</sup>	約 Around 2,200	不適用 N/A	約Around 2,200	不適用 N/A
a	普通科醫生® General practitioner®	<b>入</b> 數 10 / / /		>⇒ ₩ ₩	
b	<ul> <li>専科醫生®® Specialist®®</li> <li>須獲註冊醫生書面轉介,皮膚科、家庭醫學科、婦科、眼科、骨科、耳鼻喉科、小兒外科、兒科及精神科除外</li> <li>Subject to written referral from a Registered Medical Practitioner, except for dermatology, family medicine, gynaecology, ophthalmology, orthopaedics, otolaryngology, paediatric surgery, paediatrics and psychiatry</li> </ul>	全數賠償 (包括診症費及最多5日之 基本醫療所需西藥費用) Full cover (Includes consultation fee and up to 5 days of basic Medically Necessary Western Medication)	全數賠償(只限診症費) Full cover (Consultation fee only)	全數賠償 (包括診症費及最多5日之 基本醫療所需西藥費用) Full cover (Includes consultation fee and up to 5 days of basic Medically Necessary Western Medication)	全數賠償(只限診症費) Full cover (Consultation fee only)
С	家中應診 Home consultation	不適用 N/A		不適用 N/A	
e	<ul> <li>物理治療師® Physiotherapist®</li> <li>須獲註冊醫生書面轉介</li> <li>Subject to written referral from a Registered Medical Practitioner</li> <li>脊醫® Chiropractor®</li> <li>須獲註冊醫生書面轉介</li> <li>Subject to written referral from a Registered Medical Practitioner</li> </ul>	全數賠償(只限診療費) Full cover (Treatment fee only)			
f	中醫師®		每次診治\$500		每次診治\$600
	Chinese herbalist®	全數賠償 (包括診症費及最多兩劑之 基本醫療所需中藥費用) Full cover	(包括診症費、基本醫療所需中藥費用、針灸治療及推拿;亦支付由註冊中醫師處方並由合法來源(不論是否於該註冊中醫師的門診診所)取得之基本醫療所需中藥費用) \$500 per visit (Includes consultation fee, basic Medically Necessary Chinese Medicines,	全數賠償 (包括診症療乃最多兩劑之 基本醫療所需中藥費用) Full cover	(包括診症費、基本醫療所需中藥費用、針灸治療及推拿;亦支付由註冊中醫師處方並由合法來源(不論是否於該註冊中醫師的門診診所)取得之基本醫療所需中藥費用) \$600 per visit (Includes consultation fee basic Medically Necessary Chinese Medicines,
g	跌打醫師 Chinese bonesetter	(Includes consultation fee and up to 2 doses of basic Medically Necessary Chinese Medicines)	acupuncture and tui na; also payable for basic Medically Necessary Chinese Medicines prescribed by a Registered Chinese Medicine Practitioner and obtained at a legitimate source (at or outside the treating Registered Chinese Medicine Practitioner's clinic))	(Includes consultation fee and up to 2 doses of basic Medically Necessary Chinese Medicines)	acupuncture and tui na; also payable for basic Medically Necessary Chinese Medicines prescribed by a Registered Chinese Medicine Practitioner and obtained at a legitimate source (at or outside the treating Registered Chinese Medicine Practitioner's clinic))
h	精神科相關治療 <sup>®</sup> Psychiatric-related treatments <sup>®</sup>	全數賠償 (只包括由精神科醫生訂明 的診症費、醫療所需西藥、 診斷成像及化驗) Full cover (Includes consultation fee, Medically Necessary Western Medication, diagnostic imaging and laboratory tests prescribed by a Psychiatrist only)	每次診治\$1,000 (包括診症費、醫療所需西藥、中藥、針灸治療、診斷成像及化驗) \$1,000 per visit (Includes consultation fee, Medically Necessary Western Medication, Chinese Medicines, acupuncture, diagnostic imaging and laboratory tests)	全數賠償 (只包括由精神科醫生訂明 的診症費、醫療所需西藥、 診斷成像及仕驗) Full cover (Includes consultation fee, Medically Necessary Western Medication, diagnostic imaging and laboratory tests prescribed by a Psychiatrist only)	每次診治\$1,200 (包括診症費、醫療所需西藥、中藥、針灸治療、診斷成像及化驗) \$1,200 per visit (Includes consultation fee, Medically Necessary Western Medication, Chinese Medicines, acupuncture, diagnostic imaging and laboratory tests)
i	臨床心理輔導® Psychological counselling® ○ 須獲精神科醫生書面轉介 ○ Subject to written referral from a Psychiatrist	全數賠償 Full cover	每保單年度\$30,000 per Policy Year	全數賠償 Full cover	每保單年度 \$33,000 per Policy Year
j	♥ 整骨治療師 Osteopath	不適用 N/A	每次診治\$1,000 (只包括診治肌肉、骨骼和 關節的費用) \$1,000 per visit (Includes treatment fee for muscles, bones and joints only)	不適用 N/A	每次診治\$1,200 (只包括診治肌肉、骨骼和 關節的費用) \$1,200 per visit (Includes treatment fee for muscles, bones and joints only)

## 保柏非凡自願醫保計劃(尊尚、倍尊尚) Bupa Hero VHIS Plan (Deluxe, Deluxe Pro)



賠償限額(港元) Benefit limit (in HKD)

1)	門診保障 (自選保障) Clinical Benefit (Optional Benefit)	尊尚 Deluxe		倍尊尚 Deluxe Pro	
k	♥ 足病治療師® Podiatrist® 9	不適用 N/A	每次診治\$1,000 (包括診症費、醫療所需外 塗藥物、矯形機械服務及 治療等醫療費用) \$1,000 per visit (Includes consultation fee and charges for Medically Necessary topical medicament, orthomechanical services and procedures)	不適用 N/A	每次診治\$1,200 (包括診症費、醫療所需外塗藥物、矯形機械服務及治療等醫療費用) \$1,200 per visit (Includes consultation fee and charges for Medically Necessary topical medicament, orthomechanical services and procedures)
I	診斷成像及化驗 <sup>®</sup> Diagnostic imaging and laboratory tests <sup>®</sup> • 須獲註冊醫生 (適用於所有診斷影像及化驗) 或註冊中醫師/脊醫 <sup>®</sup> (只適用於X光及化驗) 書面轉介  • Subject to written referral from a Registered Medical Practitioner for all diagnostic imaging and laboratory tests, or from a Registered Chinese Medicine Practitioner or Chiropractor <sup>®</sup> for X-ray only and laboratory tests	全數賠償 Full cover			
m	處方西藥 Prescribed Western Medication	每保單年度\$30,00	00 per Policy Year	每保單年度\$33,00	00 per Policy Year
	Prescribed Western Medication	(經由註冊醫生處方並由合法來源取得之醫療所需西藥費用) (Medically Necessary Western Medication prescribed by a Registered Medical Practitioner and obtained at a legitimate source)			
n	♥接種疫苗 Vaccination	每保單年度\$8,000 per Policy Year 每保單年度\$9,000 per Policy Year			
	vaccination	(包括乙型肝炎、卡介苗、小兒麻痺、白喉、百日咳、破傷風混合、麻風、日本腦炎、腦膜炎、 甲型肝炎、麻疹、流行感冒及其他由香港政府或世界衛生組織不時推薦的疫苗接種) (Covers vaccinations for Hepatitis B, Bacillus Calmette-Guerin (BCG), polio (poliomyelitis), diphtheria-pertussis-tetanus, Leprosy, Japanese encephalitis, Meningitis, Hepatitis A, Measles, Influenza and other vaccinations recommended by the Hong Kong Government or World Health Organisation from time to time)			

以「網絡保障」及「非網絡保障」合計,每保單年度以上項目(a) - (k) 之診治次數上限合共為 40 次,其中項目(f) - (g)、項目(h) - (i) 及項目(j) - (k) 之診治次數上限合共為每保 單年度各20次。每一項目以每日最多一次為限。

Maximum number of visits for both Network Benefit and Non-Network Benefit in aggregate per Policy Year for items (a) - (k) above is 40 in total, with a sub-limit of 20 visits per Policy Year for items (f) - (g), items (h) - (i) and items (j) - (k) respectively. Subject to a maximum of one visit per item per day.

- 所不的totes 「亞洲、澳洲及新西蘭」指阿富汗、澳洲、孟加拉、不丹、文萊、柬埔寨、中國大陸、香港、印度、印尼、日本、哈薩克、吉爾爾、新西蘭、北韓、巴基斯坦、菲律賓、新加坡、南韓、斯里蘭卡、台灣、塔吉克、泰國、東帝汶、土庫曼、烏茲別克及越南 有關「門診保障」之「網絡保障」 吉爾吉斯、老撾、澳門、馬來西亞、馬爾代夫、蒙古、緬甸、尼泊
- - 已投保門診保障的受保人可使用「保柏非凡卡」於網絡保障下享用全數賠償服務,惟必須依循以下的所有規定: 你的門診治療必須由保柏非凡特選服務供應商提供及於其診所內進行;

    - 於進行任何網絡保障下的診斷成像或化驗前,必須按保柏供應商指引之要求獲得保柏的初步保障審核;及 請在求診登記時出示你的保柏非凡卡,並以此卡繳付醫療費用。
- 如沒有依循以上第()節網絡保障的所有規定,你的合資格醫療費用將於「非網絡保障」下作出賠償。你須先直接向供應商繳付醫療費用,然後向保柏申請索償。
- 有關保柏非凡特選服務供應商
- 請登入保柏的客戶服務網站myBupa查閱最新的保柏非凡特選服務供應商名單。此名單會不時更改。
- 有關普通科醫生、專科醫生及中醫師保障 門診保障下的普通科醫生、專科醫生及中醫師亦涵蓋視像診症服務供應商由普通科醫生、專科醫生及中醫師進行的醫療診症服務的診症費。此保障亦涵蓋由指定視像診症服務供應商 的藥物運送費用(只包括普通科醫生及中醫師)。指定的視像診症服務供應商名單可於本公司的網站查閱,此名單可能會不時更改及更新。 ⑥ 於轉介信發出日起計六個月內,可就相同或相關病症使用該轉介信。若須診治全新或不相關的病症,則須提交新的轉介信。 ⑥ 此保障適用於精神、心理、情緒或行為症狀、認知障礙症(包括阿茲海默氏症)及帕金遜病的門診診治(因濫用藥物及酗酒而引致或相關的症狀或疾病除外)。若此保障下的費用亦同時受保於
- 型 瓜味啤週用於病神、心理、清緒或行為症状、節紅陣線症(巴括阿兹海默氏症)及阿查透納的门部診治(因濫用)門診保障下的其他項目,有關費用只可獲此項目(h)的賠償,而不會獲得其他項目之賠償。 ® 部分診斷影像中心或不接受由註冊中醫師及/或脊醫轉介的某些×光及化驗。如有疑問,請直接聯絡有關中心。
- "Asia, Australia and New Zealand" means Afghanistan, Australia, Bangladesh, Bhutan, Brunei, Cambodia, mainland China, Hong Kong, India, Indonesia, Japan, Kazakhstan, Kyrgyzstan, Laos, Macau, Malaysia, Maldives, Mongolia, Myanmar, Nepal, New Zealand, North Korea, Pakistan, the Philippines, Singapore, South Korea, Sri Lanka, Taiwan, Tajikistan, Thailand, Timor-Leste, Turkmenistan, Uzbekistan and Vietnam.
- - About Network Benefit under Clinical Benefit

    (i) The Insured Person enrolled in Clinical Benefit may use the BH card to enjoy full cover under Network Benefit if all of the following requirements are fulfilled:

    - Your clinical treatment must be performed by a Bupa Hero Appointed Service Provider and carried out at their clinic(s);
       Pre-authorisation must be obtained from Bupa before any diagnostic imaging or laboratory tests under Network Benefit as required by Bupa's provider guidelines; and Please present your BH card upon registration for treatment and use it to pay the medical expenses.

      If the Network Benefit requirements in (i) above are not fully satisfied, your claims, if eligible, will be reimbursed under Non-Network Benefit. You are required to pay the
  - medical expenses to the provider directly and then submit a claim to Bupa.
- About Bupa Hero Appointed Service Providers
- Please log in to Bupa's customer service portal myBupa to view the latest list of Bupa Hero Appointed Service Providers. This list is subject to change from time to time.
- About general practitioner, Specialist, Chinese herbalist benefits

  General practitioner, Specialist and Chinese herbalist under Clinical Benefit also covers the consultation fee charged by the general practitioners, Specialists and Chinese herbalists of video consultation service providers. This benefit shall also cover the medication delivery charge incurred by the designated video consultation service provider (general practitioner and Chinese herbalist only). The list of designated video consultation service providers can be found on the Company's website. The list may be updated and amended by the Company from time to time.
- A referral letter is valid for the same or related medical condition for six months from the issue date. Another referral letter is required for treatment of a new or unrelated medical condition.
- This benefit is applicable to treatment for psychiatric, psychological, mental or behavioural conditions, senile dementia (including Alzheimer's disease) and Parkinson's disease (except for conditions caused by or related to drug abuse and alcoholism). If the expenses under this benefit are also covered under other benefit items in this Clinical Benefit, the expenses for such items shall be exclusively paid under this item (h) and no benefit shall be payable under other benefit items.
- ® Some diagnostic centres may not accept referrals from a Registered Chinese Medicine Practitioner and/or Chiropractor for certain X-ray and laboratory tests. If you have any queries, please contact the centres directly.

## 保柏非凡自願醫保計劃(尊尚、倍尊尚) Bupa Hero VHIS Plan (Deluxe, Deluxe Pro)



賠償限額(港元) Benefit limit (in HKD)

知 原体語(ルル) Benefit IIIIIt (III AND)			
2) ❤牙科及視力保障(自選保障) Dental and Optical Benefit (Optional Benefit)	尊尚 Deluxe	倍尊尚 Deluxe Pro	
保障地域範圍 Area of cover	亞洲、澳洲及新西蘭 <sup>®</sup> Asia, Australia and New Zealand <sup>®</sup>	全球但不包括美國 Worldwide excluding the United States	
牙科保障 Dental Benefit			
<ul> <li>洗牙 Scaling and polishing</li> <li>定期口腔檢査 Routine oral examination</li> <li>口腔 X 光及藥物 Intraoral X-ray and medications</li> <li>補牙及脫牙 Fillings and extractions</li> <li>膿瘡排放 Drainage of abscesses</li> <li>齒尖或齒邊修復 Pins for cusp restoration</li> <li>牙髓治療(杜牙根) Root canal treatment</li> <li>牙周手術 Periodontal surgery</li> <li>緊急意外治療(包括 X 光、緊急牙痛舒緩、臨時補牙、藥物、膿瘡切割及排放) Accident emergency treatment (including X-ray, temporary pain relief, temporary fillings, medication, incision and drainage of abscess)</li> <li>活動假牙、牙冠及牙橋(只適用於因意外而必須安裝) Dentures, crowns and bridges (Only if necessitated by an Accident)</li> <li>受保人必須連續受保於此保障六個月或以上,方可獲得以下項目之賠償。</li> </ul>	每保單年度\$8,000 per Policy Year	每保單年度\$9,000 per Policy Year	
The following items are payable provided that the Insured Person has been co	ntinuously covered under this Benefi	t for six months or more.	
<ul> <li>牙冠及牙橋 Crowns and bridges</li> <li>根尖切除術 Apicoectomy</li> <li>鑲牙 Gold inlay</li> <li>部分或全軟組織阻生 Partial and complete soft-tissue impaction</li> <li>牙骨阻生 Bony impaction</li> <li>牙齒矯正 Orthodontic treatment</li> <li>全視牙照 Panoramic film</li> <li>牙膠 Night-guard or mouth-guard</li> </ul>	每保單年度\$9,000 per Policy Year	每保單年度 \$10,000 per Policy Year	
視力保障 Optical Benefit			
<ul> <li>此保障將支付由註冊醫生或註冊視光師進行之診症費、眼科檢查或檢驗,以及矯正視力的隱形眼鏡或一副眼鏡。</li> <li>This benefit shall cover the expenses incurred for consultation, eye check or examinations performed by a Registered Medical Practitioner or Registered Optometrist, as well as contact lenses or one pair of glasses for optical correction.</li> </ul>	每保單年度\$2,000 per Policy Year	每保單年度 \$3,000 per Policy Year	
3) 產科保障 (自選保障) Maternity Benefit (Optional Benefit) (只適用於年齡介乎18至49歲之女性受保人 Only applicable to female Insured Persons from Age 18 to 49)	尊尚 Deluxe	倍尊尚 Deluxe Pro	
保障地域範圍 Area of cover	亞洲、澳洲及新西蘭 <sup>®</sup> Asia, Australia and New Zealand <sup>®</sup>	全球但不包括美國 Worldwide excluding the United States	
a 順產 Normal delivery	每次懷孕\$50,000 per pregnancy	每次懷孕 \$55,000 per pregnancy	
b 剖腹生產 Caesarean section	每次懷孕\$75,000 per pregnancy	每次懷孕 \$80,000 per pregnancy	
c 流產 Miscarriage	每次懷孕\$25,000 per pregnancy	每次懷孕 \$30,000 per pregnancy	

- 產科保障將支付因懷孕引致之醫療費用,包括醫院住院、註冊醫生診症及處方的西藥、診斷化驗、產前檢查及產後檢查,以及住院期間新生嬰兒護理費用。 此保障不包括新生嬰兒在醫院住院期間之任何醫療費用,或任何因懷孕而引致或相關的精神科、心理、情緒或行為問題之治療。
- 世际库代·巴加州工安元社通讯任况新闻之任问通源复历。发生时间接受证的基本的情况,但是是一个原理的原始的原理的原始,但是是一个原理的原始的原始,此產科保障將不會應 受保人必須於本保障生效日之後受孕方可獲得賠償,首9個月等候期內不會獲得賠償。倘若因為終止懷孕或早產(妊娠20至37週之間的分娩),此產科保障將不會應 用9個月等候期而作賠償,惟受保人必須於此產科保障生效日後受孕。為免存疑,若受保人於妊娠37週後但於9個月等候期內分娩,將不獲此產科保障賠償。
- 所有因懷孕或產科相關的醫療費用僅在本產科保障獲得賠償,並不會於認可產品或其他自選保障下獲得賠償(與產科相關的精神科狀況並受認可產品及/或門診保障有 關項目覆蓋則除外)。
- The Maternity Benefit shall cover medical expenses incurred during pregnancy, including Hospital Confinement, consultation of a Registered Medical Practitioner and prescribed Western Medication, diagnostic tests, prenatal check-up and postnatal check-up, as well as nursery care of a newborn baby during Confinement.
- This benefit does not cover any medical expenses incurred by the newborn baby during Hospital Confinement or any treatments for psychiatric,
- psychological, mental or behavioural conditions arising from or in connection with maternity conditions.

  This benefit is payable provided that the conception occurs after the commencement date of this benefit and no benefit shall be payable during the waiting period of the first 9 months. In the event of premature termination of pregnancy or premature birth (delivery that occurs between 20 and 37 weeks of gestation), this benefit shall be payable without the application of the 9 months' waiting period provided that the conception of such pregnancy occurs after the commencement date of this Maternity Benefit. For the avoidance of doubt, if delivery is occurred after 37 weeks of
- gestation but within the 9 months' waiting period, this Maternity Benefit shall not be payable.
  All pregnancy or maternity related medical expenses shall be exclusively payable under this Maternity Benefit and no benefit shall be payable under the Certified Plan or other optional benefits (except for those maternity related psychiatric conditions covered under the Certified Plan and/or relevant Clinical Benefit items).

所有條款及保障以保單為準。All terms and benefits are subject to the Policy.

保柏 (亞洲)有限公司 Bupa (Asia) Limited

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## 保障摘要 Summary of Benefits

2024年9月1日版本1 September 2024 Edition

保柏非凡自願醫保計劃(智選、倍智選)提供以下選擇(括號內數字為自願醫保認可產品編號):

Bupa Hero VHIS Plan (Advance, Advance Pro) offers the options below (VHIS certification numbers in brackets):

## 智選 Advance

- 。 \$0 自付費 Deductible (F00040-01-000-04)
- 。 \$12,000 自付費 Deductible (F00040-02-000-04)
- 。 \$40,000 自付費 Deductible (F00040-03-000-04)
- 。 \$80,000 自付費 Deductible (F00040-04-000-04)

## 倍智選 Advance Pro

- ° \$0 自付費 Deductible (F00040-09-000-02)
- 。 \$12,000 自付費 Deductible (F00040-10-000-02)
- 。 \$40,000 自付費 Deductible (F00040-11-000-02)
- 。 \$80,000 自付費 Deductible (F00040-12-000-02)

## A 認可產品之保障摘要 Summary of Benefits for the Certified Plan

計劃選項 Plan option	智選 Advance	倍智選 Advance Pro	
保障地域範圍 Area of cover	亞洲、澳洲及新西蘭 <sup>①</sup> Asia, Australia and New Zealand <sup>①</sup>	全球但不包括美國 <sup>②</sup> Worldwide excluding the United States <sup>②</sup>	
	香港、澳門、台灣及中國大陸 For Hong Kong, Macau, Taiwan and mainland China	香港、澳門、台灣及中國大陸 For Hong Kong, Macau, Taiwan and mainland China	
###	半私家房Semi-private Room	半私家房Semi-private Room	
指定病房級別 <sup>®</sup> Restricted ward class <sup>®</sup>	其他亞洲、澳洲及新西蘭地區 For other areas in Asia, Australia and New Zealand	全球其他地方但不包括美國 For other areas worldwide excluding the United States	
	標準私家房 Standard Private Room	標準私家房 Standard Private Room	
1) 基本保障及 2) 額外保障下所有保障項目之自付費 Deductible for all benefit items under 1) Basic Benefits and 2) Enhanced Benefits	每保單年度港元 \$0 / \$12,000 / \$40,000 / \$80,000 per Policy Year		
癌症 <sup>③⑤</sup> 之全額賠償 – 豁免自付費 First-dollar coverage – Deductible waived for Cancer <sup>③⑤</sup>	若受保人 - 。 患上癌症 <sup>③⑤</sup> ;及 。 在主診註冊醫生的書面建議下直接因癌症 <sup>③⑥</sup> 接受任何醫療服務,而其 1) 基本保障下保障項目 (a) - (l) 及/或2) 額外保障下保障項目 (a) - (k) 應付的賠償,則餘下的自付費餘額 (如有) 將於確診後就該醫療服務被 少至零元 (\$0)。 The remaining balance of Deductible (if any) after diagnosis shall reduced to zero dollars (\$0) for the Medical Services if the Insure Person - 。 suffers from Cancer <sup>③⑤</sup> ; and 。 upon the written recommendation of the attending Registered Medical Practitioner, receives any Medical Services as a direct result of the Cancer <sup>③⑤</sup> for which benefits are payable under benefit items (a) to (l) of 1) Basic Benefits and/or (a) to (k) of 2) Enhanced Benefits.		



1)	基本保障 Basic Benefits	智選 Advance	倍智選 Advance Pro
	保障項目 <sup>®</sup> Benefit items <sup>®</sup>	賠償限額 (港元) Benefit limit (in HKD)	
a	病房及膳食 Room and board	全數賠償® Full cover®	
b	雜項開支 Miscellaneous charges	全數賠償 <sup>®</sup> Full cover <sup>®</sup> (受 2)額外保障下保障項目(i)「人工裝置」的賠償限額所規限) (Subject to benefit limit of benefit item (i) Prosthetic Device under 2) Enhanced Benefits)	
С	主診醫生巡房費 Attending doctor's visit fee		
d	專科醫生費 <sup>⑤</sup> Specialist's fee <sup>⑥</sup>		
е	深切治療 Intensive care		
f	外科醫生費 (不限手術類別) Surgeon's fee (regardless of the surgical category)	全數則	立/營③
g	麻醉科醫生費 (不限手術類別) Anaesthetist's fee (regardless of the surgical category)	Full co	
h	手術室費 (不限手術類別) Operating theatre charges (regardless of the surgical category)		
i	訂明診斷成像檢測 <sup>⑤⑥</sup> Prescribed Diagnostic Imaging Tests <sup>⑤⑥</sup>		
j	訂明非手術癌症治療 <sup>①</sup> Prescribed Non-surgical Cancer Treatments <sup>①</sup>		
k	入院前或出院後 / 日間手術前後的門診護理 <sup>③</sup> Pre- and post-Confinement / Day Case Procedure outpatient care <sup>③</sup>	全數賠償®以下列明的診症®:	
<u> </u>	精神科治療 Psychiatric treatments	全數賠償® Full cover®	
2)	額外保障	ESAMBR THE COVE	
2)	Enhanced Benefits	智選 Advance	倍智選 Advance Pro
	保障項目 <sup>⑥</sup> Benefit items <sup>⑥</sup>	賠償限額(港元) Ber	nefit limit (in HKD)
а	私家看護費 <sup>③</sup> Private nursing <sup>⑤</sup>	全數賠償®(每保單年度最多90日) Full cov	er® (Maximum 90 days per Policy Year)
b	陪床費 Companion bed		· · · · · · · · · · · · · · · · · · ·
C	急症意外門診保障 Emergency outpatient treatment for Accidents	Full co	
d e	日症病人洗腎 <sup>⑤</sup> Day Patient kidney dialysis <sup>⑥</sup> 懷孕併發症 Complications of pregnancy		
	<ul> <li>本保障只會賠償在保單生效日後首12個月之後受孕並因而引起的相關 併發症</li> <li>This benefit shall only be payable for complications resulting from a conception occurring after the first 12 months from the Policy Effective Date</li> </ul>	每保單年度 \$150,000 per Policy Year	每保單年度 \$165,000 per Policy Year
f	康復治療 Rehabilitation	每日 \$2,000 per day (每保單年度每傷病最多 90 日	
	善終服務及緩和治療 <sup>③</sup> Hospice and palliative care <sup>③</sup>	(Maximum 90 days per Disability per Polic 每保單年度 \$100,000 per Policy Year	y Year) (Subject to pre-approval by Bupa) 每保單年度 \$110,000 per Policy Year
g h	住院或指定治療後由註冊中醫師提供之診症或針灸	每次\$650 per visit	每次\$700 per visit
	Consultation or acupuncture by a Registered Chinese Medicine Practitioner after Confinement or specific treatments	(每保單年度最多20次)(Maxim	num 20 visits per Policy Year)
i	人工裝置 <sup>⑤</sup> Prosthetic Device <sup>⑤</sup>	每保單年度每項裝置\$100,000 per item per Policy Year	每保單年度每項裝置\$110,000 per item per Policy Year
j	因中風而提升家居設備 <sup>⑤</sup> Home facility enhancement due to Stroke <sup>⑤</sup>	每保單年度 \$50,000 per Policy Year (須於中風出院後緊接 (Completed within 180 days after dis	
k	非住院睡眠窒息症測試 <sup>⑤</sup> Non-Confinement sleep apnea test <sup>⑤</sup>	(Completed within 180 days after discharge from Hospital due to Stroke)  全數賠償®非住院睡眠窒息症測試及以下列明的診症®:  非住院睡眠窒息症測試前超過90日所進行的一次門診;  非住院睡眠窒息症測試前90日內所進行的所有門診;及  非住院睡眠窒息症測試後 365 日內的所有跟進門診 Full cover® for non-Confinement sleep apnea test and the following specified visits®:  1 prior outpatient visit per non-Confinement sleep apnea test taking place more than 90 days before such sleep apnea test;  All prior outpatient visits per non-Confinement sleep apnea test taking place within 90 days before such sleep apnea test; and  All follow-up outpatient visits per non-Confinement sleep apnea test (within 365 days after completion of such sleep apnea test)	



3) 其他限額 Other Limits	智選 Advance	倍智選 Advance Pro	
進行器官移植手術並按 1) 基本保障下保障項目 (a) - (i) 及 (k),以及 2) 額 外保障下保障項目 (a) \ (b) \ (f) \ (g) \ (h) 及 (i) 的總保障限額 <sup>⑩</sup> Aggregate benefit limit for benefit items (a) - (i) and (k) under 1) Basic Benefits and (a), (b), (f), (g), (h) and (i) under	亞洲、澳洲及新西蘭 <sup>①</sup> (香港除外) Any area in Asia, Australia and New Zealand <sup>①</sup> excluding Hong Kong	任何地方但不包括美國 <sup>②</sup> 及香港 Any area excluding the United States <sup>③</sup> and Hong Kong	
2) Enhanced Benefits for organ transplant surgery®	每保單年度 \$1,000,000 per Policy Year	每保單年度 \$1,200,000 per Policy Year	
	(必須取得保柏之預先批准) (Subject to pre-approval by Bupa)		
	香港 Hong Kong	香港 Hong Kong	
		限額所規限 ual Benefit Limit	
1) 基本保障及 2) 額外保障下所有保障項目的每年保障限額 Annual Benefit Limit for all items under 1) Basic Benefits and 2) Enhanced Benefits	每保單年度\$25,000,000 per Policy Year	每保單年度\$30,000,000 per Policy Year	
1) 基本保障及 2) 額外保障下所有保障項目的終身保障限額 Lifetime Benefit Limit for all items under 1) Basic Benefits and 2) Enhanced Benefits	無 Nil		

### 註解 Notes

- ③ 详情萌参阅補允文件穴。 器症的定義 文 不採條件限制。 ④ 除非另有註明,同一項目的合資格費用或受保障之費用不可獲 1) 基本保障下(a) (l) 項及 2) 額外保障下(a) (k) 項多於一個保障項目的賠償。 ⑥ 保柏有權要求有關書面建議的證明,例如轉介信或由主診醫生或註冊醫生在索償申請表內提供的陳述。 ⑥ 檢測只包括電腦斷層掃描 ("CT" 掃描)、磁力共振掃描 ("MRI" 掃描)、正電子放射斷層掃描 ("PET" 掃描)、PET-CT 組合及 PET-MRI 組合。 ⑦ 治療只包括放射性治療、化療、標靶治療、免疫治療及荷爾蒙治療。

- ② 全數賠償是指不設分項賠償限額。③ 就住院/日間手術/非住院睡眠室息症測試前的門診或急症診症(如適用)所招致之合資格費用索償,須於(a)受保人出院當日或(b)進行日間手術/非住院睡眠窒息症測試當日(視情況而定) 起90天內提交予本公司。 詳情請參閱補充文件五。
- 你必須於特定地域入住指定病房級別或以下的病房。若你住院時自願地入住指定病房級別以上的病房,所有合資格賠償將根據保單條款作出調整。詳情請參閱補充文件五。
- ① "Asia, Australia and New Zealand" means Afghanistan, Australia, Bangladesh, Bhutan, Brunei, Cambodia, mainland China, Hong Kong, India, Indonesia, Japan, Kazakhstan, Kyrgyzstan, Laos, Macau, Malaysia, Maldives, Mongolia, Myanmar, Nepal, New Zealand, North Korea, Pakistan, the Philippines, Singapore, South Korea, Sri Lanka, Taiwan, Tajikistan, Thailand, Timor-Leste, Turkmenistan, Uzbekistan and Vietnam. For medical expenses incurred outside Asia, Australia and New Zealand, the benefits payable for the benefit items under 1) Basic Benefits will be subject to the corresponding benefit limits under the VHIS Standard Plan Terms and Benefits and no benefits shall be payable under 2) Enhanced Benefits. Please refer to Supplement 5 for details.
- the VHIS Standard Plan Terms and Benefits and no benefits shall be payable under 2) Enhanced Benefits. Please refer to Supplement 5 for details
- Please refer to Supplement 6 for details. The definition of Cancer is subject to excluded conditions.
   Unless otherwise specified, Eligible Expenses or covered expenses incurred in respect of the same item shall not be recoverable under more than one benefit item in the table for items (a) – (l) of l) Basic Benefits and items (a) – (k) of 2) Enhanced Benefits.

  Bupa shall have the right to ask for proof of recommendation e.g. written referral or testifying statement on the claim form by the attending doctor or Registered Medical
- Practitioner.
- Tests covered here only include computed tomography ("CT" scan), magnetic resonance imaging ("MRI" scan), positron emission tomography ("PET" scan), PET-CT combined and PET-MRI combined.

  Treatments covered here only include radiotherapy, chemotherapy, targeted therapy, immunotherapy and hormonal therapy.
- Full cover shall mean no itemised benefit sublimit.
- Claims for the Eligible Expenses incurred on prior outpatient visits or Emergency consultations (if applicable) shall be submitted to the Company within 90 days after (a) the date on which the Insured Person is discharged from the Hospital or (b) the date on which the Day Case Procedure/non-Confinement sleep apnea test is performed, as the case may be
- Please refer to Supplement 5 for details.
- 10 You must be Confined at the restricted ward class or lower in the specified geographical area. If you are voluntarily Confined in a room at a higher level, benefits payable in respect of all eligible claims shall be adjusted based on the terms of your Policy. Please refer to Supplement 5 for details.

詳情請瀏覽 www.bupa.com.hk/bupaheropolicy 參閱保單及保障資料

Please refer to the Policy and Benefit Information at www.bupa.com.hk/bupaheropolicy for details.



以下為保柏非凡自願醫保計劃(智選、倍智選)的免費保障及服務,並非認可產品的一部分。

The following free benefits and services under Bupa Hero VHIS Plan (Advance, Advance Pro) are not part of the Certified Plan.

B 免費保障及服務 Free Benefits and Services

## 1) 「保柏非凡卡」 及免找數服務

## **Bupa Hero Card and cashless service**

- 。 投保本計劃後,你將獲發「保柏非凡卡」(須符合有關資格)。憑卡於指定的香港私家醫院住院、或於保柏非凡特選服務供應商接受日間手術、訂明非手術癌症治療或訂明診斷成像檢測可享免找數、免索償服務。
- 請於住院或接受治療/手術前最少兩個工作天向保柏提交初步保障審核表格(有關初步保障審核之步驟,請參閱會員指引),並於登記時出示保柏非凡卡及/或初步保障審核文件。
- 保柏會直接向醫院或服務供應商支付你的合資格醫療費用,以初步審核確認/付款保證信之信用額為限。而超過信用額的醫療費用,保單持有人須自行繳付,然後向保 柏提出索償。
- 。 請參閱保柏網站 (www.bupa.com.hk/hero) 查閱最新的指定香港私家醫院名單。此名單可能會不時更改。
- 。 請登入保柏的客戶服務網站myBupa查閱最新的保柏非凡特選服務供應商名單。此名單可能會不時更改。
- 如在海外接受治療,你只須預先致電保柏,便可於所選保障地域範圍的醫院享用此服務
- 。如任何乃安之元原,师代原原元或亳际伯,使可原则通际岸也域制国的通际学用此版榜。 免找數服務並不適用於 1) 基本保障下所列的項目(k)入院前或出院後 / 日間手術前後的門診護理及項目(I) 精神科治療,以及 2) 額外保障下所列的項目(c) - (j)。醫療卡並不適用於本港私家醫院的門診部。請先支付醫療費用,然後再向保柏申請索償。
- 。 如有任何差額和自付費,保單持有人須向保柏退還有關費用,詳情請參閱保單。
- You'll receive a Bupa Hero Card (BH card) after enrolling in this plan subject to the eligibility requirements of Bupa. You can use your BH card to enjoy
  cashless service without submitting any claims for Confinement at designated private Hospitals in Hong Kong, or Day Case Procedure, Prescribed Nonsurgical Cancer Treatment or Prescribed Diagnostic Imaging Test received at Bupa Hero Appointed Service Providers.
- Please submit a pre-authorisation form to Bupa at least 2 working days before Confinement and treatment/procedures (please refer to the Membership Guide for the pre-authorisation procedure), and present your BH card and/or pre-authorisation document at registration.
   Bupa will settle your eligible medical expenses with the Hospital or service provider directly, subject to the approved credit limit as stated in the pre-
- Bupa will settle your eligible medical expenses with the Hospital or service provider directly, subject to the approved credit limit as stated in the preauthorisation confirmation / guarantee of payment letter. For medical expenses exceeding the credit limit, the Policy Holder will need to pay first and then submit a claim to Bupa for reimbursement.
- Please refer to Bupa's website (www.bupa.com.hk/hero) for the latest list of designated private Hospitals in Hong Kong. This list is subject to change from time to time.
- Please log in to Bupa's customer service portal myBupa to view the latest list of Bupa Hero Appointed Service Providers. This list is subject to change from time to time.
- For overseas hospitalisation, you can enjoy this service in your chosen area of cover by calling Bupa to make the necessary arrangements.
- Cashless service is not applicable to item (k) pre- and post-Confinement/Day Case Procedure outpatient care and item (l) psychiatric treatments listed under 1) Basic Benefits and items (c) (j) listed under 2) Enhanced Benefits. Medical card is not applicable to the outpatient department of a local private hospital. Please settle your payment first and submit a claim to Bupa.
- You may need to reimburse Bupa for the amount of selected Deductible and Shortfall, if any. Please refer to the Policy for more details.

## 2) 健康支援服務

## **Health Coaching Services**

「健康支援服務」由醫生、合資格護士和健康管理團隊組成,為你提供個人健康管理支援服務,包括:

## 24小時健康專線

是供每天 24 小時支援服務,為你解答健康問題並提供指引,根據病徵或病況建議合適的做法

## 醫療中心選擇

可根據你的指定情況或需要為你提供診所及醫院名單以供參考

## 健康顧問

若入住本港私家醫院,保柏的健康顧問會全程協助,讓你了解你的治療詳情和醫療開支預算,替你處理有關入院、出院後跟進治療及索償等事宜

## 第二醫療意見

如在診斷和治療上遇到各種疑慮,我們可安排醫療專家為你提供專業的第二意見,讓你掌握病情從而決定治療方法

## 慢性疾病管理計劃

提供控制慢性疾病如糖尿病、高血壓的建議,包括生活習慣建議及跟進病情等服務

The Health Coaching Services give you access to personal healthcare support delivered by a team of doctors, qualified nurses and health management professionals including:

## 24-hour Healthline

24/7 guidance on health-related queries, suggesting a suitable course of action based on your symptoms and condition

## Healthcare Centre Choices

Provide a list of clinics and hospitals based on your specific condition or needs for your reference

## Care Manager

A personal Care Manager will follow you throughout your hospital stay in a local private Hospital to help you understand your treatment plan and obtain cost estimates, as well as facilitate admission, follow-up treatments after discharge and claims

## Second Medical Opinion

Clarify any doubts about your diagnosis and proposed treatment by obtaining medical advice from a panel of medical specialists

## **Chronic Conditions Programme**

Lifestyle coaching and follow-up services to help you manage chronic conditions such as diabetes and hypertension

請瀏覽保柏網站www.bupa.com.hk/health-coaching-services 查閱健康支援服務的條款及細則。

Please refer to Bupa's website at www.bupa.com.hk/health-coaching-services for the terms and conditions of the Health Coaching Services.

- 。 「健康支援服務」建議的服務之有關費用由受保人自付,除非該費用在保單下屬受保項目。
- 一陸康文振成例, 建藏的旅粉之有關負用由文标公目的,除非該負用任保单下屬文保項目。醫生會於辦公時間內支援護士解答問題。辦公時間為星期一至五,上午9時至下午6時(香港時間),公眾假期除外。
- 。 「健康支援服務」由保柏與保柏委任的服務供應商提供。
- Any fees for the services suggested by Health Coaching Services will be paid by the Insured Person unless otherwise covered under the Policy.
- Doctors will be available during scheduled office hours to support the nurses in answering enquiries. Office hours: Mon Fri, from 9am to 6pm (Hong Kong time), except public holidays.
- Health Coaching Services are provided by Bupa and providers appointed by Bupa.



## 3) 24 小時情緒解碼熱線

## 24-hour Mental Health Service Hotline

此服務由保柏特選的服務供應商及其經驗豐富的合資格輔導人員及臨床心理學家團隊提供。你可隨時致電熱線以獲得輔導人員的免費情緒支援及個人化輔導服務。如有需要,輔導人員更可為你安排接受臨床心理學家的面談輔導服務 (每保單年度四次 )。請放心,你所提供的資料均會保密。

This service is provided by our selected service providers and their team of qualified and experienced counsellors and clinical psychologists. Through the hotline, counsellors offer free emotional support and personalised advice. They can also arrange face-to-face counselling services with a clinical psychologist if needed (four times per Policy Year). Rest assured that all information provided will be kept in strict confidence.

請瀏覽保柏網站www.bupa.com.hk/hero 查閱 24 小時情緒解碼熱線的條款及細則。

Please refer to Bupa's website at www.bupa.com.hk/hero for the terms and conditions of the 24-hour Mental Health Service Hotline.

- 。 24 小時情緒解碼熱線適用於18 歲或以上的受保人,18 歲以下的受保人需於保單持有人或監護人陪同下使用此服務。
- The 24-hour Mental Health Service Hotline is applicable to Insured Persons aged 18 or above. Insured Persons aged below 18 must be accompanied by the Policy Holder or guardian to use this service.

## 4) 免費保柏國際援助計劃

## Free Bupa Worldwide Assistance Programme

提供海外及中國住院按金墊支服務,全數支付緊急醫療運送費用及送返香港後高達港元12萬的額外住院保障,並設有24小時熱線提供旅遊、醫療或法律資訊及支援。 Provides admission deposit in the event of hospitalisation overseas and in China, unlimited cover for emergency medical evacuation and repatriation, and an extra hospital benefit of HK\$120,000 after repatriation to Hong Kong. A 24-hour hotline for travel, medical or legal information and assistance is also available

- 。 免費保柏國際援助計劃並不屬自願醫保認可產品的一部分。若你不希望獲得此免費保障,請以書面通知保柏。
- 。 這項服務是保柏聘用之服務供應商(「服務供應商」)負責提供並受條款及細則約束。服務供應商為獨立的承辦商,並非保柏的代理。保柏不須就受保人因服務供應商或其代理提供之服務或建議或該等服務之供應而直接或間接蒙受或招致之任何損失、損害、費用、起訴、訴訟或法律程序,向保單持有人或受保人承擔任何責任。
- The Free Bupa Worldwide Assistance Programme is not part of the VHIS Certified Plan. Please inform Bupa in writing if you don't want to receive this
  free benefit
- These services are provided by the Service Provider(s) engaged by Bupa and terms and conditions apply. The Service Provider is a third party service provider, which is an independent contractor and is not an agent of Bupa. Bupa shall not be liable to the Policy Holder or Insured Person in any respect of any loss, damage, expense, suit, action or proceeding suffered or incurred by the Insured Person, whether directly or indirectly, arising from or in connection with the services provided or advice given by the Service Provider(s) or its agent, or the availability of such services.



以下為保柏非凡自願醫保計劃(智選、倍智選)的自選保障,並非認可產品的一部分並且不適用於申請稅項扣減及家庭折扣。 The optional benefits of the Bupa Hero VHIS Plan (Advance, Advance Pro) shown below are not part of the Certified Plan, and are not eligible for claiming tax deduction and family discount.

C 自選保障之保障摘要 Summary of Benefits for Optional Benefits

賠償限額 (港元) Benefit limit (in HKD)

		始貨限銀(港元)Benefit IImit (In HKD)				
1)	)門診保障(自選保障) Clinical Benefit		dvance	·····································	vance Pro	
	(Optional Benefit)	網絡保障 <sup>®</sup> Network Benefit <sup>®</sup>	非網絡保障 Non-Network Benefit	網絡保障 <sup>®</sup> Network Benefit <sup>®</sup>	非網絡保障 Non-Network Benefit	
	保障地域範圍 Area of cover		l及新西蘭 <sup>®</sup> nd New Zealand <sup>®</sup>		全球但不包括美國 Worldwide excluding the United States	
	每年最高賠償額 Overall Annual Limit	\$100	,000	\$150	,000	
	保柏非凡特選服務供應商數目 <sup>®</sup> No. of Bupa Hero Appointed Service Providers <sup>®</sup>	約 Around 2,200	不適用 N/A	約 Around 2,200	不適用 N/A	
b	<ul> <li>普通科醫生® General practitioner®</li> <li>專科醫生®® Specialist®®</li> <li>須獲註冊醫生書面轉介,皮膚科、家庭醫學科、婦科、眼科、骨科、耳鼻喉科、小兒外科、兒科及精神科除外</li> <li>Subject to written referral from a Registered Medical Practitioner, except for dermatology, family medicine, gynaecology, ophthalmology, orthopaedics, otolaryngology, paediatric surgery, paediatrics and psychiatry</li> </ul>	全數賠償 (包括診症費及最多5日之 基本醫療所需西藥費用) Full cover (Includes consultation fee and up to 5 days of basic Medically Necessary Western Medication)	賠償 80% (只限診症費) 80% reimbursement (Consultation fee only)	全數賠償 (包括診症費及最多5日之 基本醫療所需西藥費用) Full cover (Includes consultation fee and up to 5 days of basic Medically Necessary Western Medication)	賠償80% (只限診症費) 80% reimbursement (Consultation fee only)	
С	家中應診 Home consultation	不適用 N/A		不適用 N/A		
d e	物理治療師® Physiotherapist®      須獲註冊醫生書面轉介      Subject to written referral from a Registered Medical Practitioner	全數賠償(只限診療費) Full cover (Treatment fee only)	賠償80%(只限診療費) 80% reimbursement (Treatment fee only)	全數賠償(只限診療費) Full cover (Treatment fee only)	賠償80%(只限診療費) 80% reimbursement (Treatment fee only)	
f	中醫師 <sup>®</sup> Chinese herbalist <sup>®</sup> 跌打醫師 Chinese bonesetter	全數賠償 (包括診症費及最多兩劑之 基本醫療所需中藥費用) Full cover (Includes consultation fee and up to 2 doses of basic Medically Necessary Chinese Medicines)	賠償80%,上限為 每次診治\$500 包括診症費、基本醫療所 需中藥費用、針灸治療及推 拿;亦支付由註冊中醫師處 方並由合法來源 (不論是否於該註冊中醫師 膀門診診所)取得之基本醫 療所需中藥費) 80% reimbursement up to \$500 per visit (Includes consultation fee, basic Medically Necessary Chinese Medicines, acupuncture and tui na; also payable for basic Medically Necessary Chinese Medicines prescribed by a Registered Chinese Medicine Practitioner and obtained at a legitimate source (at or outside the treating Registered Chinese Medicine Practitioner's clinic))	全數賠償 (包括診症費及最多兩劑之 基本醫療所需中藥費用) Full cover (Includes consultation fee and up to 2 doses of basic Medically Necessary Chinese Medicines)	賠償80%,上限為每次診治\$600 包括診症費、基本醫療所需中藥費用、針灸治療及推拿;亦支付由註冊中醫師處方並由合法來源(不論是否於該註冊中醫師的門診診所)取得之基本醫療所需中藥費) 80% reimbursement upto \$600 per visit (Includes consultation fee, basic Medically Necessary Chinese Medicines, acupuncture and tuina; also payable for basic Medically Necessary Chinese Medicines prescribed by a Registered Chinese Medicine Practitioner and obtained at a legitimate source (at or outside the treating Registered Chinese Medicine Practitioner's clinic))	



賠償限額 (港元) Benefit limit (in HKD)

	ADMINISTRACTION CONTINUE (IIII IIII)				
1)	門診保障 (自選保障) Clinical Benefit (Optional Benefit)	智選 Advance		倍智選 Advance Pro	
h	精神科相關治療® Psychiatric-related treatments®	全數賠償 (只包括由精神科醫生訂明 的診症費、醫療所需西藥、 診斷成像及仕驗) Full cover (Includes consultation fee, Medically Necessary Western Medication, diagnostic imaging and laboratory tests prescribed by a Psychiatrist only)	賠償80%,上限為每次診治\$1,000 (包括診症費、醫療所需 西藥、中藥、針灸治療 診斷成像及化驗) 80% reimbursement up to \$1,000 per visit (Includes consultation fee, Medically Necessary Western Medication, Chinese Medicines, acupuncture, diagnostic imaging and laboratory tests)	全數賠償 (只包括由精神科醫生訂明 的診症費、醫療所需西藥、 診斷成像及化驗) Full cover (Includes consultation fee, Medically Necessary Western Medication, diagnostic imaging and laboratory tests prescribed by a Psychiatrist only)	賠償80%,上限為每次診治\$1,200(包括診症費、醫療所需西藥、中藥、針灸治療、診斷成像及化驗)80% reimbursement up to \$1,200 per visit (Includes consultation fee, Medically Necessary Western Medication, Chinese Medicines, acupuncture, diagnostic imaging and laboratory tests)
i	umage	全數賠償 Full cover	賠償 80%,上限為 每次診治 \$1,000 80% reimbursement up to \$1,000 per visit	全數賠償 Full cover	賠償 80%,上限為 每次診治 \$1,200 80% reimbursement up to \$1,200 per visit
j	診斷成像及化驗 <sup>®</sup> Diagnostic imaging and laboratory tests <sup>®</sup>	全數賠償 Full cover	賠償80%,上限為每保單 年度 \$10,000 80% reimbursement up to \$10,000 per Policy Year	全數賠償 Full cover	賠償80%,上限為每保單 年度 \$12,000 80% reimbursement up to \$12,000 per Policy Year
k	處方西藥 Prescribed Western Medication	每保單年度\$8,000 per Policy Year		每保單年度 \$10,00	0 per Policy Year
		(經由註冊醫生處方並由合法來源取得之醫療所需西藥費用) (Medically Necessary Western Medication prescribed by a Registered Medical Practitioner and obtained at a legitimate source)			

以「網絡保障」及「非網絡保障」合計,每保單年度以上項目 (a) - (i) 之診治次數上限合共為 40 次,其中項目 (f) - (g) 及項目 (h) - (i) 之診治次數上限合共為每保單年度各 20 次。每一項目以每日最多一次為限。

Maximum number of visits for both Network Benefit and Non-Network Benefit in aggregate per Policy Year for items (a) – (i) above is 40 in total, with a sub-limit of 20 visits per Policy Year for items (f) – (g) and items (h) – (i) respectively. Subject to a maximum of one visit per item per day.

2) 牙科保障 (自選保障) Dental Benefit (Optional Benefit)	智選 Advance	倍智選 Advance Pro
保障地域範圍 Area of cover	亞洲、澳洲及新西蘭 <sup>®</sup> Asia, Australia and New Zealand <sup>®</sup>	全球但不包括美國 Worldwide excluding the United States
<ul> <li>洗牙 Scaling and polishing</li> <li>定期口腔檢查 Routine oral examination</li> <li>口腔X光及藥物 Intraoral X-ray and medications</li> <li>補牙及脫牙 Fillings and extractions</li> <li>膿瘡排放 Drainage of abscesses</li> <li>齒尖或齒邊修復 Pins for cusp restoration</li> <li>牙髓治療(杜牙根) Root canal treatment</li> <li>牙周手術 Periodontal surgery</li> <li>緊急意外治療(包括 X光、緊急牙痛舒緩、臨時補牙、藥物、膿瘡切割及排放)</li> <li>Accident emergency treatment (including X-ray, temporary pain relief, temporary fillings, medication, incision and drainage of abscess)</li> <li>活動假牙、牙冠及牙橋(只適用於因意外而必須安裝)</li> <li>Dentures, crowns and bridges (Only if necessitated by an Accident)</li> </ul>	每保單年度 \$5,000 per Policy Year	每保單年度\$6,500 per Policy Year



賠償限額(港元) Benefit limit (in HKD)

3)	產科保障 (自選保障) Maternity Benefit (Optional Benefit) (只適用於年齡介乎18至49歲之女性受保人 Only applicable to female Insured Persons from Age 18 to 49)	智選 Advance	倍智選 Advance Pro
	保障地域範圍 Area of cover	亞洲、澳洲及新西蘭 <sup>®</sup> Asia, Australia and New Zealand <sup>®</sup>	全球但不包括美國 Worldwide excluding the United States
a	順產 Normal delivery	每次懷孕 \$28,000 per pregnancy	每次懷孕 \$30,000 per pregnancy
b	剖腹生產 Caesarean section	每次懷孕 \$42,000 per pregnancy	每次懷孕 \$46,000 per pregnancy
С	流產 Miscarriage	每次懷孕 \$14,000 per pregnancy	每次懷孕 \$18,000 per pregnancy

- 產科保障將支付因懷孕引致之醫療費用,包括醫院住院、註冊醫生診症及處方的西藥、診斷化驗、產前檢查及產後檢查,以及住院期間新生嬰兒護理費用。 此保障不包括新生嬰兒在醫院住院期間之任何醫療費用,或任何因懷孕而引致或相關的精神科、心理、情緒或行為問題之治療。 受保人必須於本保障生效日之後受孕方可獲得賠償,首9個月等候期內不會獲得賠償。倘若因為終止懷孕或早產(妊娠20至37週之間的分娩),此產科保障將不會應 用9個月等候期而作賠償,惟受保人必須於此產科保障生效日後受孕。為免存疑,若受保人於妊娠37週後但於9個月等候期內分娩,將不獲此產科保障賠償。
- 所有因懷孕或產科相關的醫療費用僅在本產科保障獲得賠償,並不會於認可產品或其他自選保障下獲得賠償 (與產科相關的精神科狀況並受認可產品及/或門診保障 有關項目覆蓋則除外)。
- The Maternity Benefit shall cover medical expenses incurred during pregnancy, including Hospital Confinement, consultation of a Registered Medical Practitioner and prescribed Western Medication, diagnostic tests, prenatal check-up and postnatal check-up, as well as nursery care of a newborn baby during Confinement
- This benefit does not cover any medical expenses incurred by the newborn baby during Hospital Confinement or any treatments for psychiatric,
- psychological, mental or behavioural conditions arising from or in connection with maternity conditions.

  This benefit is payable provided that the conception occurs after the commencement date of this benefit and no benefit shall be payable during the waiting period of the first 9 months. In the event of premature termination of pregnancy or premature birth (delivery that occurs between 20 and 37 weeks of gestation), this benefit shall be payable without the application of the 9 months' waiting period provided that the conception of such pregnancy occurs after the commencement date of this Maternity Benefit. For the avoidance of doubt, if delivery is occurred after 37 weeks of gestation but within the 9 months' waiting period, this Maternity Benefit shall not be payable.

  All pregnancy or maternity related medical expenses shall be exclusively payable under this Maternity Benefit and no benefit shall be payable under
- the Certified Plan or other optional benefits (except for those maternity related psychiatric conditions covered under the Certified Plan and/or relevant Clinical Benefit items).

## 註解Notes

- 题,不知识,澳洲及新西蘭」指阿富汗、澳洲、孟加拉、不丹、文萊、柬埔寨、中國大陸、香港、印度、印尼、日本、哈薩克、吉爾吉斯、老撾、澳門、馬來西亞、馬爾代夫、蒙古、緬甸、尼泊爾、新西蘭、北韓、巴基斯坦、菲律賓、新加坡、南韓、斯里蘭卡、台灣、塔吉克、泰國、東帝汶、土庫曼、烏茲別克及越南。 ⑤ 有關「門診保障」之「網絡保障」
- - 已投保門診保障的受保人可使用「保柏非凡卡」於網絡保障下享用全數賠償服務,惟必須依循以下的所有規定:

    - 你的門診治療必須由保柏非凡特選服務供應商提供及於其診所內進行; 於進行任何網絡保障下的診斷成像或化驗前,必須按保柏供應商指引之要求獲得保柏的初步保障審核;及
    - 請在求診登記時出示你的保柏非凡卡,並以此卡繳付醫療費用。
  - 如沒有依循以上第(i)節網絡保障的所有規定,你的合資格醫療費用將於「非網絡保障」下作出賠償。你須先直接向供應商繳付醫療費用,然後向保柏申請索償。
- 有關保柏非凡特選服務供應商
- 請登入保柏的客戶服務網站 my Bupa 查閱最新的保柏非凡特撰服務供應商名單。此名單會不時更改。

- "Asia, Australia and New Zealand" means Afghanistan, Australia, Bangladesh, Bhutan, Brunei, Cambodia, mainland China, Hong Kong, India, Indonesia, Japan, Kazakhstan, Kyrgyzstan, Laos, Macau, Malaysia, Maldives, Mongolia, Myanmar, Nepal, New Zealand, North Korea, Pakistan, the Philippines, Singapore, South Korea, Sri Lanka, Taiwan, Tajikistan, Thailand, Timor-Leste, Turkmenistan, Uzbekistan and Vietnam.
- - About Network Benefit under Clinical Benefit

    (i) The Insured Person enrolled in Clinical Benefit may use the BH card to enjoy full cover under Network Benefit if all of the following requirements are fulfilled:
    - Your clinical treatment must be performed by a Bupa Hero Appointed Service Provider and carried out at their clinic(s);
      Pre-authorisation must be obtained from Bupa before any diagnostic imaging or laboratory tests under Network Benefit as required by Bupa's provider guidelines; and
- Please present your BH card upon registration for treatment and use it to pay the medical expenses.
   (ii) If the Network Benefit requirements in (i) above are not fully satisfied, your claims, if eligible, will be reimbursed under Non-Network Benefit. You are required to pay the medical expenses to the provider directly and then submit a claim to Bupa.
- About Bupa Hero Appointed Service Providers
- Please log in to Bupa's customer service portal myBupa to view the latest list of Bupa Hero Appointed Service Providers. This list is subject to change from time to time.
- About general practitioner, Specialist, Chinese herbalist benefits

  General practitioner, Specialist and Chinese herbalist under Clinical Benefit also covers the consultation fee charged by the general practitioners, Specialists and Chinese herbalists of video consultation service providers. This benefit shall also cover the medication delivery charge incurred by the designated video consultation service provider (general practitioner and Chinese herbalist only). The list of designated video consultation service providers can be found on the Company's website. The list may be updated and amended by the Company from time to time
- A referral letter is valid for the same or related medical condition for six months from the issue date. Another referral letter is required for treatment of a new or unrelated. medical condition.
- This benefit is applicable to treatment for psychiatric, psychological, mental or behavioural conditions, senile dementia (including Alzheimer's disease) and Parkinson's disease (except for conditions caused by or related to drug abuse and alcoholism). If the expenses under this benefit are also covered under other benefit items in this Clinical Benefit,
- the expenses for such items shall be exclusively paid under this item (h) and no benefit shall be payable under other benefit items.

  Some diagnostic centres may not accept referrals from a Registered Chinese Medicine Practitioner and/or Chiropractor for certain X-ray and laboratory tests. If you have any queries, please contact the centres directly

所有條款及保障以保單為準。All terms and benefits are subject to the Policy.

MP283/9/0924



## 保障摘要 Summary of Benefits

2024年9月1日版本1 September 2024 Edition

保柏非凡自願醫保計劃(精選、倍精選)提供以下選擇(括號內數字為自願醫保認可產品編號):

Bupa Hero VHIS Plan (Core, Core Pro) offers the options below (VHIS certification numbers in brackets):

### 精選Core

- 。 \$0 自付費 Deductible (F00040-17-000-01)
- 。 \$15,000 自付費 Deductible (F00040-18-000-01)
- 。 \$50,000 自付費 Deductible (F00040-19-000-01)
- 。 \$80,000 自付費 Deductible (F00040-20-000-01)

## 倍精選 Core Pro

- 。 \$0 自付費 Deductible (F00040-21-000-01)
- 。 \$15,000 自付費 Deductible (F00040-22-000-01)
- 。 \$50,000 自付費 Deductible (F00040-23-000-01)
- 。 \$80,000 自付費 Deductible (F00040-24-000-01)

## A 認可產品之保障摘要 Summary of Benefits for the Certified Plan

計劃選項 Plan option	精選Core	倍精選 Core Pro
保障地域範圍 Area of cover	亞洲、澳洲及新西蘭 <sup>①</sup> Asia, Australia and New Zealand <sup>①</sup>	全球但不包括美國 <sup>②</sup> Worldwide excluding the United States <sup>②</sup>
指定病房級別 <sup>⑪</sup> Restricted ward class <sup>⑪</sup>	大房Ward Room	大房Ward Room
1) 基本保障及 2) 額外保障 (如適用)下所有 保障項目之自付費 Deductible for all benefit items under 1) Basic Benefits and 2) Enhanced Benefits (if applicable)	每保單年度港元 \$0 / \$15,000 / \$50,000 / \$80,000 per Policy Year	
癌症 <sup>③③</sup> 之全額賠償-豁免自付費 First-dollar coverage – Deductible waived for Cancer <sup>③⑤</sup>	不適用 N/A	若受保人 -  。 患上癌症③⑤;及 。 在主診註冊醫生的書面建議下直接因癌症③⑥接受任何醫療服務,而其按1)基本保障下保障項目(a) - (I)及/或2)額外保障下保障項目(a) - (J)有應付的賠償,則餘下的自付費餘額(如有)將於確診後就該醫療服務被減少至零元(\$0)。 The remaining balance of Deductible (if any) after diagnosis shall be reduced to zero dollars (\$0) for the Medical Services if the Insured Person -  。 suffers from Cancer③⑤; and 。 upon the written recommendation of the attending Registered Medical Practitioner, receives any Medical Services as a direct result of the Cancer③⑤ for which benefits are payable under benefit items (a) to (I) of 1) Basic Benefits and/or (a) to (j) of 2) Enhanced Benefits.

MP443/1/0824



1)	基本保障 Basic Benefits	精選 Core	倍精選 Core Pro	
	保障項目 <sup>④</sup> Benefit items <sup>④</sup>	賠償限額 (港元) Benefit limit (in HKD)		
a	病房及膳食 Room and board	全數賠償⑧	Full cover®	
b	雜項開支 Miscellaneous charges	全數賠償 <sup>®</sup> Full cover <sup>®</sup>	全數賠償® Full cover® (受2)額外保障下保障項目(i)「人工裝置」的賠償限 額所規限) (Subject to benefit limit of benefit item (i) Prosthetic Device under 2) Enhanced Benefits)	
С	主診醫生巡房費 Attending doctor's visit fee			
d	專科醫生費 <sup>③</sup> Specialist's fee <sup>③</sup>			
е	深切治療 Intensive care			
f	外科醫生費 (不限手術類別) Surgeon's fee (regardless of the surgical category)			
g	麻醉科醫生費 (不限手術類別) 麻醉科醫生費 (不限手術類別) Anaesthetist's fee (regardless of the surgical category)	全數賠償® Full cover®		
h	手術室費 (不限手術類別) Operating theatre charges (regardless of the surgical category)			
i	訂明診斷成像檢測 <sup>⑤⑥</sup> Prescribed Diagnostic Imaging Tests <sup>⑤⑥</sup>			
j	訂明非手術癌症治療 <sup>①</sup> Prescribed Non-surgical Cancer Treatments <sup>①</sup>			
k	入院前或出院後 / 日間手術前後的門診護理 <sup>③</sup> Pre- and post-Confinement / Day Case Procedure outpatient care <sup>⑤</sup>	全數賠償®以下列明的診症®:  ct院/日間手術前超過30日所進行的1次門診或急症診症;  定於正;  http:// 中間手術前30日內所進行的2次門診或急症診症;及  http:// 中間手術後90日內所進行的20次跟進門診。  http:// 中間手術後90日內所進行的20次跟進門診。  full cover® for the following specified visits®:  full cover® for the following place within 30 days before admission or Day Case Procedure; and  full cover® for the following specified visits per confinement/Day Case Procedure (within 90 days after discharge from Hospital or completion of Day Case Procedure).	全數賠償®以下列明的診症®:  住院/日間手術前超過30日所進行的1次門診或急症診症;  住院/日間手術前30日內所進行的2次門診或急症診症;及  出院/日間手術後90日內所進行的30次跟進門診。 Full cover® for the following specified visits®:  1 prior outpatient visit or Emergency consultation per Confinement/Day Case Procedure taking place more than 30 days before admission or Day Case Procedure;  2 prior outpatient visits or Emergency consultations per Confinement/Day Case Procedure taking place within 30 days before admission or Day Case Procedure; and  30 follow-up outpatient visits per Confinement/Day Case Procedure (within 90 days after discharge from Hospital or completion of Day Case Procedure).	
I	精神科治療 Psychiatric treatments	全數賠償⑧	Full cover®	
2)	額外保障 Enhanced Benefits	精選Core	倍精選 Core Pro	
	保障項目 <sup>④</sup> Benefit items <sup>④</sup>	賠償限額 (港元) Ber	nefit limit (in HKD)	
a	私家看護費 <sup>⑤</sup> Private nursing <sup>⑥</sup>	不適用 N/A	全數賠償®(每保單年度最多90日) Full cover® (Maximum 90 days per Policy Year	
b c d	陪床費 Companion bed 急症意外門診保障 Emergency outpatient treatment for Accidents 日症病人洗腎 <sup>⑤</sup> Day Patient kidney dialysis <sup>⑥</sup>	不適用 N/A	全數賠償® Full cover®	
е	<ul> <li>懷孕併發症 Complications of pregnancy</li> <li>本保障只會賠償在保單生效日後首12個月之後受孕並因而引起的相關併發症</li> <li>This benefit shall only be payable for complications resulting from a conception occurring after the first 12 months from the Policy Effective Date</li> </ul>	不適用 N/A	每保單年度\$100,000 per Policy Year	
f	康復治療 Rehabilitation	不適用 N/A	每日\$1,500 per day (每保單年度每傷病最多90日) (必須取得保柏之預先批准) (Maximum 90 days per Disability per Policy Year (Subject to pre-approval by Bupa)	
g	善終服務及緩和治療 <sup>③</sup> Hospice and palliative care <sup>③</sup>	不適用 N/A	每保單年度\$80,000 per Policy Year	
h	住院或指定治療後由註冊中醫師提供之診症或針灸 Consultation or acupuncture by a Registered Chinese Medicine Practitioner after Confinement or specific treatments	不適用 N/A	每次\$550 per visit (每保單年度最多20次) (Maximum 20 visits per Policy Year)	
i	人工裝置 <sup>⑤</sup> Prosthetic Device <sup>⑤</sup>	不適用 N/A	每保單年度每項裝置\$80,000 per item per Policy Year	
j	因中風而提升家居設備 <sup>⑤</sup> Home facility enhancement due to Stroke <sup>⑤</sup>	不適用 N/A	每保單年度\$40,000 per Policy Year (須於中風出院後緊接其後的180日內完成) (Completed within 180 days after discharge from Hospital due to Stroke)	



3) 其他限額 Other Limits	精選 Core	倍精選 Core Pro	
進行器官移植手術並按 1) 基本保障下保障項目(a) - (i)及(k),以及 2) 額外保障下保障項目(a)、(b)、(f)、(g)、(h)及(i)的總保障限額 <sup>®</sup> (如適用) Aggregate benefit limit for benefit items (a) - (i)	亞洲、澳洲及新西蘭 <sup>①</sup> (香港除外) Asia, Australia and New Zealand <sup>①</sup> excluding Hong Kong	任何地方但不包括美國 <sup>®</sup> 及香港 Any area excluding the United States <sup>®</sup> and Hong Kong	
and (k) under 1) Basic Benefits and (a), (b), (f), (g), (h) and (i) under 2) Enhanced Benefits for organ transplant surgery® (if applicable)	每保單年度\$420,000 per Policy Year 每保單年度\$500,000 per Policy Year  (必須取得保柏之預先批准)  (Subject to pre-approval by Bupa)		
	香港 Hong Kong	香港 Hong Kong	
	受每年保障限額所規限 Subject to Annual Benefit Limit		
1) 基本保障及 2) 額外保障 (如適用)下所有保障項目的 每年保障限額 Annual Benefit Limit for all items under 1) Basic Benefits and 2) Enhanced Benefits (if applicable)	每保單年度\$5,000,000 per Policy Year	每保單年度 \$10,000,000 per Policy Year	
1) 基本保障及 2) 額外保障 (如適用 )下所有保障項目的 終身保障限額 Lifetime Benefit Limit for all items under 1) Basic Benefits and 2) Enhanced Benefits (if applicable)	不適用 N/A		

- 註解 Notes
  ①「亞洲、澳洲及新西蘭」指阿富汗、澳洲、孟加拉、不丹、文萊、柬埔寨、中國大陸、香港、印度、印尼、日本、哈薩克、吉爾吉斯、老撾、澳門、馬來西亞、馬爾代夫、蒙古、緬甸、尼泊爾、新西蘭、北韓、巴基斯坦、菲律賓、新加坡、南韓、斯里蘭卡、台灣、塔吉克、泰國、東帝汶、土庫曼、烏茲別克及越南。於亞洲、澳洲及新西蘭以外招致的醫療費用,其1)基本保障下之保障項目將根據自顧醫保標準計劃條系及保障的相應賠償限額賠償及2)額外保障下的保障將不獲賠償。詳情請參閱補充文件五。
- ② 於美國以內所招致的醫療費用,其1)基本保障下之保障項目將根據自願醫保標準計劃條款及保障的相應賠償限額賠償及 2)額外保障下的保障將不獲賠償。詳情請參閱補充文件五。 ③ 詳情請參閱補充文件六。癌症的定義受不保條件限制。

- 6 除非另有註明,同一項目的合資格費用或受保障之費用不可獲1)基本保障下(a) (l)項及2)額外保障下(a) (j)項多於一個保障項目(如適用)的賠償。
   6 除非另有註明,同一項目的合資格費用或受保障之費用不可獲1)基本保障下(a) (l)項及2)額外保障下(a) (j)項多於一個保障項目(如適用)的賠償。
   6 檢測只包括電腦斷層掃描("CT"掃描)、磁力共振掃描("MRI"掃描)、正電子放射斷層掃描("PET"掃描)、PET-CT組合及PET-MRI組合。
   6 治療只包括放射性治療、化療、標靶治療、免疫治療及荷爾蒙治療。
- 全數賠償是指不設分項賠償限額
- 就住院/日間手術前的門診或急症診症(如適用)所招致之合資格費用索償,須於(a)受保人出院當日或(b)進行日間手術當日(視情況而定)起90天內提交予本公司。
- ⑩ 你必須於特定地域入住指定病房級別或以下的病房。若你住院時自願地入住指定病房級別以上的病房,所有合資格賠償將根據保單條款作出調整。詳情請參閱補充文件五。
- "Asia, Australia and New Zealand" means Afghanistan, Australia, Bangladesh, Bhutan, Brunei, Cambodia, mainland China, Hong Kong, India, Indonesia, Japan, Kazakhstan, Kyrgyzstan, Laos, Macau, Malaysia, Maldives, Mongolia, Myanmar, Nepal, New Zealand, North Korea, Pakistan, the Philippines, Singapore, South Korea, Sri Lanka, Taiwan, Tajikistan, Thailand, Timor-Leste, Turkmenistan, Uzbekistan and Vietnam. For medical expenses incurred outside Asia, Australia and New Zealand, the benefits payable for the benefit items under 1) Basic Benefits will be subject to the corresponding benefit limits under the VHIS Standard Plan Terms and Benefits and no benefits shall be payable under 2) Enhanced Benefits. Please refer to Supplement 5 for details
- For medical expenses incurred in the United States, the benefits payable for the benefit items under 1) Basic Benefits will be subject to the corresponding benefit limits under the VHIS Standard Plan Terms and Benefits and no benefits shall be payable under 2) Enhanced Benefits. Please refer to Supplement 5 for details.
- Please refer to Supplement 6 for details. The definition of Cancer is subject to excluded conditions
- Unless otherwise specified, Eligible Expenses or covered expenses incurred in respect of the same item shall not be recoverable under more than one benefit item in the table for items (a) (l) of 1) Basic Benefits and items (a) (j) of 2) Enhanced Benefits (if applicable).
- The Company shall have the right to ask for proof of recommendation e.g. written referral or testifying statement on the claim form by the attending doctor or Registered Medical Practitioner
- ® Tests covered here only include computed tomography ("CT" scan), magnetic resonance imaging ("MRI" scan), positron emission tomography ("PET" scan), PET-CT combined and PET-MRI combined.
- ① Treatments covered here only include radiotherapy, chemotherapy, targeted therapy, immunotherapy and hormonal therapy,
- ® Full cover shall mean no itemised benefit sublimit
- (9) Claims for the Eligible Expenses incurred on prior outpatient visits or Emergency consultations (if applicable) shall be submitted to the Company within 90 days after (a) the date on which the Insured Person is discharged from the Hospital or (b) the date on which the Day Case Procedure is performed, as the case may be.
- ® You must be Confined at the restricted ward class or lower in the specified geographical area. If you are voluntarily Confined in a room at a higher level, benefits payable in respect of all eligible claims shall be adjusted based on the terms of your Policy. Please refer to Supplement 5 for details.

詳情請瀏覽 www.bupa.com.hk/bupaheropolicy 參閱保單及保障資料。

Please refer to the Policy and Benefit Information at www.bupa.com.hk/bupaheropolicy for details.



以下為保柏非凡自願醫保計劃(精選、倍精選)的免費保障及服務,並非認可產品的一部分。

The following free benefits and services under Bupa Hero VHIS Plan (Core, Core Pro) are not part of the Certified Plan.

## B 免費保障及服務 Free Benefits and Services

## 1) 「保柏非凡卡」 及免找數服務

## **Bupa Hero Card and cashless service**

- 。 投保本計劃後,你將獲發「保柏非凡卡」(須符合有關資格)。憑卡於指定的香港私家醫院住院、或於保柏非凡特選服務供應商接受日間手術、訂明非手術癌症治療或訂明診斷成像檢測可享免找數、免索償服務。
- 。 請於住院或接受治療/手術前最少兩個工作天向保柏提交初步保障審核表格 (有關初步保障審核之步驟,請參閱會員指引),並於登記時出示保柏非凡卡及/或初步保 障審核文件。
- 。 保柏會直接向醫院或服務供應商支付你的合資格醫療費用,以初步審核確認/付款保證信之信用額為限。而超過信用額的醫療費用,保單持有人須自行繳付,然後向保 柏提出索償。
- 。 請參閱保柏網站(www.bupa.com.hk/hero)查閱最新的指定香港私家醫院名單。此名單可能會不時更改。
- 。 請登入保柏的客戶服務網站myBupa查閱最新的保柏非凡特選服務供應商名單。此名單可能會不時更改。
- 。 如在海外接受治療,你只須預先致電保柏,便可於所選保障地域範圍的醫院享用此服務
- 。 知任海外接交后源,你只想展先致电压相,使可比所越压降型域制国的营际学用加版榜。 免找數服務並不適用於 13 基本保障下所列的項目 (k) 入院前或出院後/日間手術前後的門診護理及項目 (l) 精神科治療,以及 2) 額外保障下所列的項目 (c) - (j) (如適 用)。醫療卡並不適用於本港私家醫院的門診部。請先支付醫療費用,然後再向保柏申請索償。
- 。 如有任何差額和自付費,保單持有人須向保柏退還有關費用,詳情請參閱保單。
- You'll receive a Bupa Hero Card (BH card) after enrolling in this plan subject to the eligibility requirements of Bupa. You can use your BH card to enjoy cashless service without submitting any claims for Confinement at designated private Hospitals in Hong Kong, or Day Case Procedure, Prescribed Non-surgical Cancer Treatment or Prescribed Diagnostic Imaging Test received at Bupa Hero Appointed Service Providers.
- Please submit a pre-authorisation form to Bupa at least 2 working days before Confinement and treatment/procedures (please refer to the Membership Guide for the pre-authorisation procedure), and present your BH card and/or pre-authorisation document at registration.
- Bupa will settle your eligible medical expenses with the Hospital or service provider directly, subject to the approved credit limit as stated in the preauthorisation confirmation / guarantee of payment letter. For medical expenses exceeding the credit limit, the Policy Holder will need to pay first and then submit a claim to Bupa for reimbursement.
- Please refer to Bupa's website (www.bupa.com.hk/hero) for the latest list of designated private Hospitals in Hong Kong. This list is subject to change from time to time.
- Please log in to Bupa's customer service portal myBupa to view the latest list of Bupa Hero Appointed Service Providers. This list is subject to change from time to time.
- For overseas hospitalisation, you can enjoy this service in your chosen area of cover by calling Bupa to make the necessary arrangements.
- Cashless service is not applicable to item (k) pre- and post-Confinement/Day Case Procedure outpatient care and item (l) psychiatric treatments listed under 1) Basic Benefits and items (c) (j) listed under 2) Enhanced Benefits (if applicable). Medical card is not applicable to the outpatient department of a local private hospital. Please settle your payment first and submit a claim to Bupa.
- You may need to reimburse Bupa for the amount of selected Deductible and Shortfall, if any. Please refer to the Policy for more details.

## 2) 健康支援服務

## **Health Coaching Services**

「健康支援服務」由醫生、合資格護士和健康管理團隊組成,為你提供個人健康管理支援服務,包括:

## 24小時健康專線

24小時候康季級 提供每天24小時支援服務,為你解答健康問題並提供指引,根據病徵或病況建議合適的做法

## 醫療中心選擇

可根據你的指定情況或需要為你提供診所及醫院名單以供參考

## 健康顧問

若入住本港私家醫院,保柏的健康顧問會全程協助,讓你了解你的治療詳情和醫療開支預算,替你處理有關入院、出院後跟進治療及索償等事宜

## 第二醫療意見

如在診斷和治療上遇到各種疑慮,我們可安排醫療專家為你提供專業的第二意見,讓你掌握病情從而決定治療方法

## 慢性疾病管理計劃

提供控制慢性疾病如糖尿病、高血壓的建議,包括生活習慣建議及跟進病情等服務

The Health Coaching Services give you access to personal healthcare support delivered by a team of doctors, qualified nurses and health management professionals including:

## 24-hour Healthline

24/7 guidance on health-related queries, suggesting a suitable course of action based on your symptoms and condition

## Healthcare Centre Choices

Provide a list of clinics and hospitals based on your specific condition or needs for your reference

## Care Manager

A personal Care Manager will follow you throughout your hospital stay in a local private Hospital to help you understand your treatment plan and obtain cost estimates, as well as facilitate admission, follow-up treatments after discharge and claims

## Second Medical Opinion

Clarify any doubts about your diagnosis and proposed treatment by obtaining medical advice from a panel of medical specialists

## Chronic Conditions Programme

Lifestyle coaching and follow-up services to help you manage chronic conditions such as diabetes and hypertension

請瀏覽保柏網站www.bupa.com.hk/health-coaching-services 查閱健康支援服務的條款及細則。

Please refer to Bupa's website at www.bupa.com.hk/health-coaching-services for the terms and conditions of the Health Coaching Services.

- 。 「健康支援服務」建議的服務之有關費用由受保人自付,除非該費用在保單下屬受保項目。
- 。 醫生會於辦公時間內支援護士解答問題。辦公時間為星期一至五,上午9時至下午6時(香港時間),公眾假期除外。
- 「健康支援服務」由保柏與保柏委任的服務供應商提供。
- ・ 大阪大文技術が1 山水山大水川は大川山大水川は大川山大水 同族内 (中国 Any fees for the services suggested by Health Coaching Services will be paid by the Insured Person unless otherwise covered under the Policy.
- Doctors will be available during scheduled office hours to support the nurses in answering enquiries. Office hours: Mon Fri, from 9am to 6pm (Hong Kong time), except public holidays.
- Health Coaching Services are provided by Bupa and providers appointed by Bupa.



## 3) 24 小時情緒解碼熱線

## 24-hour Mental Health Service Hotline

此服務由保柏特選的服務供應商及其經驗豐富的合資格輔導人員及臨床心理學家團隊提供。你可隨時致電熱線以獲得輔導人員的免費情緒支援及個人化輔導服務。如有需要,輔導人員更可為你安排接受臨床心理學家的面談輔導服務(每保單年度四次)。請放心,你所提供的資料均會保密。

This service is provided by our selected service providers and their team of qualified and experienced counsellors and clinical psychologists. Through the hotline, counsellors offer free emotional support and personalised advice. They can also arrange face-to-face counselling services with a clinical psychologist if needed (four times per Policy Year). Rest assured that all information provided will be kept in strict confidence.

請瀏覽保柏網站www.bupa.com.hk/hero 查閱 24 小時情緒解碼熱線的條款及細則。

Please refer to Bupa's website at www.bupa.com.hk/hero for the terms and conditions of the 24-hour Mental Health Service Hotline.

- 。 24 小時情緒解碼熱線適用於18 歲或以上的受保人,18 歲以下的受保人需於保單持有人或監護人陪同下使用此服務。
- The 24-hour Mental Health Service Hotline is applicable to Insured Persons aged 18 or above. Insured Persons aged below 18 must be accompanied by the Policy Holder or guardian to use this service.

## 4) 免費保柏國際援助計劃

## Free Bupa Worldwide Assistance Programme

提供海外及中國住院按金墊支服務,全數支付緊急醫療運送費用及送返香港後高達港元12萬的額外住院保障,並設有24小時熱線提供旅遊、醫療或法律資訊及支援。 Provides admission deposit in the event of hospitalisation overseas and in China, unlimited cover for emergency medical evacuation and repatriation, and an extra hospital benefit of HK\$120,000 after repatriation to Hong Kong. A 24-hour hotline for travel, medical or legal information and assistance is also available

- 。 免費保柏國際援助計劃並不屬自願醫保認可產品的一部分。若你不希望獲得此免費保障,請以書面通知保柏。
- 。 這項服務是保柏聘用之服務供應商 (「服務供應商」) 負責提供並受條款及細則約束。服務供應商為獨立的承辦商,並非保柏的代理。保柏不須就受保人因服務供應商或 其代理提供之服務或建議或該等服務之供應而直接或間接蒙受或招致之任何損失、損害、費用、起訴、訴訟或法律程序,向保單持有人或受保人承擔任何責任。
- The Free Bupa Worldwide Assistance Programme is not part of the VHIS Certified Plan. Please inform Bupa in writing if you don't want to receive this free benefit.
- These services are provided by the Service Provider(s) engaged by Bupa and terms and conditions apply. The Service Provider is a third party service
  provider, which is an independent contractor and is not an agent of Bupa. Bupa shall not be liable to the Policy Holder or Insured Person in any respect
  of any loss, damage, expense, suit, action or proceeding suffered or incurred by the Insured Person, whether directly or indirectly, arising from or in
  connection with the services provided or advice given by the Service Provider(s) or its agent, or the availability of such services.



以下為保柏非凡自願醫保計劃 (精選、倍精選)的自選保障,並非認可產品的一部分並且不適用於申請稅項扣減。 The optional benefits of the Bupa Hero VHIS Plan (Core, Core Pro) shown below are not part of the Certified Plan, and are not eligible for claiming tax deduction.

C 自選保障之保障摘要 Summary of Benefits for Optional Benefits

賠償限額 (港元) Benefit limit (in HKD)

		賠償限額 (港元 ) Benefit limit (in HKD)				
1)	門診保障 (自選保障) Clinical Benefit (Optional Benefit)	精選 Core		倍精選 Core Pro		
		網絡保障 <sup>®</sup> Network Benefit <sup>®</sup>	非網絡保障 Non-Network Benefit	網絡保障 <sup>®</sup> Network Benefit <sup>®</sup>	非網絡保障 Non-Network Benefit	
	保障地域範圍 Area of cover	亞洲、澳洲及新西蘭 <sup>®</sup> Asia, Australia and New Zealand <sup>®</sup>		全球但不包括美國 Worldwide excluding the United States		
	每年最高賠償額 Overall Annual Limit		\$80,		000	
	保柏非凡特選服務供應商數目 <sup>®</sup> No. of Bupa Hero Appointed Service Providers <sup>®</sup>	約Around 2,200	不適用 N/A	約 Around 2,200	不適用 N/A	
b	<ul> <li>普通科醫生® General practitioner®</li> <li>專科醫生®® Specialist®®</li> <li>須獲註冊醫生書面轉介,皮膚科、家庭醫學科、婦科、眼科、骨科、耳鼻喉科、小兒外科、兒科及精神科除外</li> <li>Subject to written referral from a Registered Medical Practitioner, except for dermatology, family medicine, gynaecology, ophthalmology, orthopaedics, otolaryngology, paediatric surgery, paediatrics and psychiatry</li> </ul>	全數賠償 (包括診症費及最多5日之 基本醫療所需西藥費用) Full cover (Includes consultation fee and up to 5 days of basic Medically Necessary Western Medication)	賠償80% (只限診症費) 80% reimbursement (Consultation fee only)	全數賠償 (包括診症費及最多5日之 基本醫療所需西藥費用) Full cover (Includes consultation fee and up to 5 days of basic Medically Necessary Western Medication)	賠償80% (只限診症費) 80% reimbursement (Consultation fee only)	
С	家中應診 Home consultation	不適用 N/A		不適用 N/A		
d e	物理治療師® Physiotherapist®      須獲註冊醫生書面轉介      Subject to written referral from a Registered Medical Practitioner	全數賠償(只限診療費) Full cover (Treatment fee only)	賠償80%(只限診療費) 80% reimbursement (Treatment fee only)	全數賠償(只限診療費) Full cover (Treatment fee only)	賠償80%(只限診療費) 80% reimbursement (Treatment fee only)	
g	中醫師® Chinese herbalist® 跌打醫師 Chinese bonesetter	全數賠償 (包括診症費及最多兩劑之 基本醫療所需中藥費用) Full cover (Includes consultation fee and up to 2 doses of basic Medically Necessary Chinese Medicines)	賠償80%,上限為 每次診治\$400 (包括診症費、基本醫療所 需中藥費用、針灸治療及 推拿;亦支付由註冊中醫 師處方並由合法來源(不 論是否於該註冊中醫師的 門診診所)取得之基本醫 療所需中藥費) 80% reimbursement up to \$400 per visit (Includes consultation fee, basic Medically Necessary Chinese Medicines, acupuncture and tui na; also payable for basic Medically Necessary Chinese Medicines prescribed by a Registered Chinese Medicine Practitioner and obtained at a legitimate source (at or outside the treating Registered Chinese Medicine Practitioner's clinic))	全數賠償 (包括診症費及最多兩劑之 基本醫療所需中藥費用) Full cover (Includes consultation fee and up to 2 doses of basic Medically Necessary Chinese Medicines)	賠償80%,上限為每次診治\$400 (包括診症費、基本醫療所需中藥費用、針灸治療及推拿;亦支付由註冊中醫師處方並由合法來源(不論是否於該註冊中醫師的門診診所)取得之基本醫療所需中藥費) 80% reimbursement up to \$400 per visit (Includes consultation fee, basic Medically Necessary Chinese Medicines, acupuncture and tuina; also payable for basic Medically Necessary Chinese Medicines prescribed by a Registered Chinese Medicine Practitioner and obtained at a legitimate source (at or outside the treating Registered Chinese Medicine Practitioner's clinic))	



賠償限額 (港元) Benefit limit (in HKD)

1)	門診保障 (自選保障) Clinical Benefit (Optional Benefit)	精選 Core 倍精選 Col		ore Pro	
h	精神科相關治療® Psychiatric-related treatments®	全數賠償 (只包括由精神科醫生訂明 的診症費、醫療所需西藥、 診斷成像及仕驗) Full cover (Includes consultation fee, Medically Necessary Western Medication, diagnostic imaging and laboratory tests prescribed by a Psychiatrist only)	賠償80%,上限 為每次診治\$800 (包括診症費、醫療所需 西藥、中藥、針灸治療、 診斷成像及化驗) 80% reimbursement up to \$800 per visit (Includes consultation fee, Medically Necessary Western Medication, Chinese Medicines, acupuncture, diagnostic imaging and laboratory tests)	全數賠償 (只包括由精神科醫生訂明 的診症費、醫療所需西藥、 診斷成像及仕驗) Full cover (Includes consultation fee, Medically Necessary Western Medication, diagnostic imaging and laboratory tests prescribed by a Psychiatrist only)	賠償80%,上限 為每次診治\$800 (包括診症費、醫療所需 西藥、中藥、針灸治療、 診斷成像及化驗) 80% reimbursement up to \$800 per visit (Includes consultation fee, Medically Necessary Western Medication, Chinese Medicines, acupuncture, diagnostic imaging and laboratory tests)
i	臨床心理輔導® Psychological counselling® 。 須獲精神科醫生書面轉介 。 Subject to written referral from a Psychiatrist	全數賠償 Full cover	賠償80%,上限為 每次診治 \$800 80% reimbursement up to \$800 per visit	全數賠償 Full cover	賠償80%,上限為 每次診治 \$800 80% reimbursement up to \$800 per visit
j	診斷成像及化驗 <sup>®</sup> Diagnostic imaging and laboratory tests <sup>®</sup>	全數賠償 Full cover	賠償80%,上限為每保單 年度\$8,000 80% reimbursement up to \$8,000 per Policy Year	全數賠償 Full cover	賠償80%,上限為每保單 年度 \$8,000 80% reimbursement up to \$8,000 per Policy Year
k	處方西藥 Prescribed Western Medication	每保單年度 \$6,000 per Policy Year 每保單年度 \$6,000 per Policy Year  (經由註冊醫生處方並由合法來源取得之醫療所需西藥費用)  (Medically Necessary Western Medication prescribed by a Registered Medical Practitioner and obtained at a legitimate source)			

以「網絡保障」及「非網絡保障」合計,每保單年度以上項目(a) - (i) 之診治次數上限合共為 40 次,其中項目(f) - (g) 及項目(h) - (i) 之診治次數上限合共為每保單年度各 20 次。 每一項目以每日最多一次為限。

Maximum number of visits for both Network Benefit and Non-Network Benefit in aggregate per Policy Year for items (a) – (i) above is 40 in total, with a sub-limit of 20 visits per Policy Year for items (f) – (g) and items (h) – (i) respectively. Subject to a maximum of one visit per item per day.

2) 牙科保障 (自選保障) Dental Benefit (Optional Benefit)	精選Core	倍精選 Core Pro	
保障地域範圍 Area of cover	亞洲、澳洲及新西蘭 <sup>®</sup> Asia, Australia and New Zealand <sup>®</sup>	全球但不包括美國 Worldwide excluding the United States	
<ul> <li>洗牙 Scaling and polishing</li> <li>定期口腔檢查 Routine oral examination</li> <li>口腔 X 光及藥物 Intraoral X-ray and medications</li> <li>補牙及脱牙 Fillings and extractions</li> <li>膿瘡排放 Drainage of abscesses</li> <li>齒尖或齒邊修復 Pins for cusp restoration</li> <li>牙髓治療(杜牙根) Root canal treatment</li> <li>牙周手術 Periodontal surgery</li> <li>緊急意外治療(包括 X 光、緊急牙痛舒緩、臨時補牙、藥物、膿瘡切割及排放)</li> <li>Accident emergency treatment (including X-ray, temporary pain relief, temporary fillings, medication, incision and drainage of abscess)</li> <li>活動假牙、牙冠及牙橋(只適用於因意外而必須安裝)</li> <li>Dentures, crowns and bridges (Only if necessitated by an Accident)</li> </ul>	每保單年度 \$3,500 per Policy Year	每保單年度\$3,500 per Policy Year	



賠償限額(港元) Benefit limit (in HKD)

3)	產科保障 (自選保障) Maternity Benefit (Optional Benefit) (只適用於年齡介乎18至49歲之女性受保人 Only applicable to female Insured Persons from Age 18 to 49)	精選Core	倍精選 Core Pro	
	保障地域範圍 Area of cover	亞洲、澳洲及新西蘭 <sup>®</sup> Asia, Australia and New Zealand <sup>®</sup>	全球但不包括美國 Worldwide excluding the United States	
a	順產 Normal delivery	每次懷孕 \$18,000 per pregnancy	每次懷孕 \$18,000 per pregnancy	
b	剖腹生產 Caesarean section	每次懷孕 \$35,000 per pregnancy	每次懷孕 \$35,000 per pregnancy	
С	流產 Miscarriage	每次懷孕 \$10,000 per pregnancy	每次懷孕 \$10,000 per pregnancy	

- 產科保障將支付因懷孕引致之醫療費用,包括醫院住院、註冊醫生診症及處方的西藥、診斷化驗、產前檢查及產後檢查,以及住院期間新生嬰兒護理費用。此保障不
- 包括新生嬰兒在醫院住院期間之任何醫療費用,或任何因懷孕而引致或相關的精神科、心理、情緒或行為問題之治療。 受保人必須於本保障生效日之後受孕方可獲得賠償,首9個月等候期內不會獲得賠償。倘若因為終止懷孕或早產(妊娠20至37週之間的分娩),此產科保障將不會應用9個月等候期而作賠償,惟受保人必須於此產科保障生效日後受孕。為免存疑,若受保人於妊娠37週後但於9個月等候期內分娩,將不獲此產科保障賠償。
- 所有因懷孕或產科相關的醫療費用僅在本產科保障獲得賠償,並不會於認可產品或其他自選保障下獲得賠償(與產科相關的精神科狀況並受認可產品及/或門診保障 有關項目覆蓋則除外)。
- The Maternity Benefit shall cover medical expenses incurred during pregnancy, including Hospital Confinement, consultation of a Registered Medical Practitioner and prescribed Western Medication, diagnostic tests, prenatal check-up and postnatal check-up, as well as nursery care of a newborn baby during Confinement
- This benefit does not cover any medical expenses incurred by the newborn baby during Hospital Confinement or any treatments for psychiatric,
- psychological, mental or behavioural conditions arising from or in connection with maternity conditions.

  This benefit is payable provided that the conception occurs after the commencement date of this benefit and no benefit shall be payable during the waiting period of the first 9 months. In the event of premature termination of pregnancy or premature birth (delivery that occurs between 20 and 37 weeks of gestation), this benefit shall be payable without the application of the 9 months' waiting period provided that the conception of such pregnancy occurs after the commencement date of this Maternity Benefit. For the avoidance of doubt, if delivery is occurred after 37 weeks of gestation but within the 9 months' waiting period, this Maternity Benefit shall not be payable.

  All pregnancy or maternity related medical expenses shall be exclusively payable under this Maternity Benefit and no benefit shall be payable under
- the Certified Plan or other optional benefits (except for those maternity related psychiatric conditions covered under the Certified Plan and/or relevant Clinical Benefit items).

## 註解Notes

- 题,不知识,澳洲及新西蘭」指阿富汗、澳洲、孟加拉、不丹、文萊、柬埔寨、中國大陸、香港、印度、印尼、日本、哈薩克、吉爾吉斯、老撾、澳門、馬來西亞、馬爾代夫、蒙古、緬甸、尼泊爾、新西蘭、北韓、巴基斯坦、菲律賓、新加坡、南韓、斯里蘭卡、台灣、塔吉克、泰國、東帝汶、土庫曼、烏茲別克及越南。 ⑤ 有關「門診保障」之「網絡保障」
- - 已投保門診保障的受保人可使用「保柏非凡卡」於網絡保障下享用全數賠償服務,惟必須依循以下的所有規定:

    - 你的門診治療必須由保柏非凡特選服務供應商提供及於其診所內進行; 於進行任何網絡保障下的診斷成像或化驗前,必須按保柏供應商指引之要求獲得保柏的初步保障審核;及
    - 請在求診登記時出示你的保柏非凡卡,並以此卡繳付醫療費用。
- 如沒有依循以上第(i) 節網絡保障的所有規定,你的合資格醫療費用將於「非網絡保障」下作出賠償。你須先直接向供應商繳付醫療費用,然後向保柏申請索償。
- 有關保柏非凡特選服務供應商
- 請登入保柏的客戶服務網站 my Bupa 查閱最新的保柏非凡特撰服務供應商名單。此名單會不時更改。

- 請登入保柏的客戶服務網站myBupa查閱最新的保柏非凡特選服務供應商名單。此名單會不時更改。 ⑤ 有關普通科醫生、專科醫生及中醫師保障 。 門診保障下的普通科醫生、專科醫生及中醫師亦涵蓋視像診症服務供應商由普通科醫生、專科醫生及中醫師進行的醫療診症服務的診症費。此保障亦涵蓋由指定視像診症服務供應商的藥物運送費用(只包括普通科醫生及中醫師)。指定的視像診症服務供應商名單可於本公司的網站查閱,此名單可能會不時更改及更新。 ⑥ 於轉介信發出日起計六個月內,可就相同或相關病症使用該轉介信。若須診治全新或不相關的病症,則須提交新的轉介信。 ⑥ 的數分信發出日起計六個月內,可就相同或相關病症使用該轉介信。若須診治全新或不相關的病症,則須提交新的轉介信。 ⑤ 世代 6 世代 6 世代 6 部分診斷影像中心或不接受由註冊中醫師及/或脊醫轉介的某些×光及化驗。如有疑問,請直接聯絡有關中心。
- "Asia, Australia and New Zealand" means Afghanistan, Australia, Bangladesh, Bhutan, Brunei, Cambodia, mainland China, Hong Kong, India, Indonesia, Japan, Kazakhstan, Kyrgyzstan, Laos, Macau, Malaysia, Maldives, Mongolia, Myanmar, Nepal, New Zealand, North Korea, Pakistan, the Philippines, Singapore, South Korea, Sri Lanka, Taiwan, Tajikistan, Thailand, Timor-Leste, Turkmenistan, Uzbekistan and Vietnam.
- About Network Benefit under Clinical Benefit
  - The Insured Person enrolled in Clinical Benefit may use the BH card to enjoy full cover under Network Benefit if all of the following requirements are fulfilled:
    - Your clinical treatment must be performed by a Bupa Hero Appointed Service Provider and carried out at their clinic(s);
    - Pre-authorisation must be obtained from Bupa before any diagnostic imaging or laboratory tests under Network Benefit as required by Bupa's provider guidelines; and
  - Please present your BH card upon registration for treatment and use it to pay the medical expenses.
  - (ii) If the Network Benefit requirements in (i) above are not fully satisfied, your claims, if eligible, will be reimbursed under Non-Network Benefit. You are required to pay the medical expenses to the provider directly and then submit a claim to Bupa.
- About Bupa Hero Appointed Service Providers
  - Please log in to Bupa's customer service portal myBupa to view the latest list of Bupa Hero Appointed Service Providers. This list is subject to change from time to time.
- ® About general practitioner, Specialist, Chinese herbalist benefits
- General practitioner, Specialist and Chinese herbalist under Clinical Benefit also covers the consultation fee charged by the general practitioners, Specialists and Chinese herbalists of video consultation service providers. This benefit shall also cover the medication delivery charge incurred by the designated video consultation service provider (general practitioner and Chinese herbalist only). The list of designated video consultation service providers can be found on the Company's website. The list may be updated and amended by the Company from time to time.
- A referral letter is valid for the same or related medical condition for six months from the issue date. Another referral letter is required for treatment of a new or unrelated. medical condition
- This benefit is applicable to treatment for psychiatric, psychological, mental or behavioural conditions, senile dementia (including Alzheimer's disease) and Parkinson's disease (except for conditions caused by or related to drug abuse and alcoholism). If the expenses under this benefit are also covered under other benefit items in this Clinical Benefit, the expenses for such items shall be exclusively paid under this item (h) and no benefit shall be payable under other benefit items.
- ® Some diagnostic centres may not accept referrals from a Registered Chinese Medicine Practitioner and/or Chiropractor for certain X-ray and laboratory tests. If you have any queries, please contact the centres directly.

所有條款及保障以保單為準。All terms and benefits are subject to the Policy.