



**Sun Flower Insurance Brokers Limited**

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Thank you for considering Sun Flower to be one of your selected intermediaries.

We are pleased to get in touch should you have any enquiry regarding the captioned insurance.

**Bupa**  
保柏

## **Corporate HealthNet Plus** 公司僱員健康網

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## **Membership Guide** 會員指引

## Bupa – Your choice for health protection

### Bupa Hong Kong

- Insuring more than 400,000 individuals and 3,200 companies in Hong Kong
- Quality health insurance provider for Hong Kong's civil servants for more than 20 years
- Offers a wide choice of doctors with one of the largest provider networks in Hong Kong

### Quality HealthCare

- One of Hong Kong's largest private clinic networks and has been part of Bupa since October 2013
- Services span across diagnostics, primary healthcare and day-care specialties
- Network of over 1,400 provider service points in the city including over 100 Quality HealthCare multi-specialty medical centres and affiliated clinics offering western medicine, traditional Chinese medicine, diagnostics & imaging, dental, physiotherapy, psychological and wellness services

## 保柏 – 你的健康保障選擇

### 保柏香港

- 在香港為超過 40 萬名會員及 3,200 間公司提供保障
- 為本港公務員提供優質醫療保障逾 20 年
- 透過擁有龐大的本港醫療網絡，給你更多醫生選擇

### 卓健醫療

- 香港領先的私營醫療中心聯網服務商之一，於 2013 年 10 月正式加入保柏
- 服務涵蓋診斷、基層保健及日症專科服務
- 透過逾 1,400 個服務點，包括旗下超過 100 間多項專科設施齊備的卓健醫療中心及多間聯營診所，提供西醫、中醫、診斷及造影、牙科、物理治療、精神健康及保健等服務

## Welcome Message

Welcome to Bupa's Corporate HealthNet Plus Group Health Insurance Scheme. We are proud to have the opportunity to build up a close and long-term relationship with you. Bupa has developed this scheme to help your employer take care of your health and care needs.

As a valuable asset of your employer, you will find yourself being well-protected by the comprehensive benefits of this scheme. This membership guide will present to you the coverage of this scheme and we sincerely suggest that you read it thoroughly.

Should you have any questions regarding this scheme or your membership, please do not hesitate to call your Human Resources Department or contact **Bupa Customer Care helpdesk**.

## 歡迎

歡迎你加入保柏的「公司僱員健康網」團體醫療保障計劃。能藉此機會和你建立密切和長久的關係，絕對是我們的榮幸！你的僱主為照顧你的個人醫療所需，誠意為你提供由保柏承保之醫療保險計劃。

正因為你是僱主的重要資產，此計劃所提供之保障務求能令你安枕無憂。本會員指引詳列了此計劃的保障，懇請你細心閱讀。

如果你對本計劃或你的會籍有任何疑問，歡迎隨時向你的人力資源部查詢或致電**保柏客戶服務專線**。

**Premium Service Booking Hotline**

**Service hours: 9am – 6pm Monday to Friday (except public holidays)**

**Premium Service Booking Hotline:** (852) 2517 5515

Looking for premium network service centres for specialist treatment, diagnostic imaging and laboratory tests, day surgery (e.g., endoscopy) or even dental treatment (if applicable)? Simply call our Premium Service Booking Hotline and our Bupa Medical Centres and Bupa Dental Centres are at your service.

**One-stop dedicated services:**

- Check your scheme's network eligibility
- Provide Bupa medical and dental centre choices with various specialities available and hassle-free pre-authorisation and/or pay and claim experience
- Assist in making appointments with the centres, so you can have access to comfortable, well-equipped premium facilities

**Bupa's Customer Care helpdesk**

**24-hour Customer Care helpdesk:** (852) 2517 5388

**Office hours**

9am to 7pm Monday to Friday (except public holidays)

We are pleased to answer all your enquiries.

**Outside office hours**

We are happy to answer the following enquiries:

- information of HealthNet Service Providers
- information of benefit entitlement
- claims and other policy administration procedures
- claim forms

**Fax:** (852) 3973 6970

**E-mail:** [customercare@bupa.com.hk](mailto:customercare@bupa.com.hk)

**Website:** [www.bupa.com.hk](http://www.bupa.com.hk)

**Bupa Pre-authorisation**

**Service hours: 9:00 am – 7:00 pm**

**Monday to Friday (except public holidays)**

**Email:** [preauthapp@bupa.com.hk](mailto:preauthapp@bupa.com.hk)

**Phone:** (852) 2517 5328

**Fax:** (852) 3973 6966

### 尊貴服務預約熱線

服務時間：上午 9 時至下午 6 時，星期一至星期五（公眾假期除外）

尊貴服務預約熱線：

(852) 2517 5515

要搜尋提供專科治療、診斷影像及化驗、日症（如內窺鏡）甚至牙科治療的高端網絡服務中心？只需致電保柏的尊貴服務預約熱線，我們的保柏醫療中心及保柏牙科中心隨時為你服務。

#### 一站式的貼心服務：

- 助你查閱計劃下的網絡資格（如適用）
- 提供保柏醫療及牙科中心選擇；中心設有不同專科服務，可協助辦理預先批核及/或申請索償
- 協助你預約服務中心，讓你安心使用舒適及配備齊全的優越服務

### 保柏客戶服務專線

24 小時客戶服務專線：

(852) 2517 5388

#### 辦公時間

星期一至五（公眾假期除外）上午 9 時至下午 7 時

我們樂意解答你的所有查詢。

#### 辦公時間以外

我們為你解答以下查詢：

- 網絡服務供應商資料
- 保障範圍
- 申請賠償程序及其他保單行政程序
- 賠償申請表

傳真：

(852) 3973 6970

電郵：

customer@bupa.com.hk

網站：

www.bupa.com.hk

### 保柏初步保障審核服務

服務時間：上午 9 時至下午 7 時  
星期一至星期五（公眾假期除外）

電郵：

preauthapp@bupa.com.hk

電話：

(852) 2517 5328

傳真：

(852) 3973 6966

## Web and mobile services

myBupa is your go-to place to easily manage your cover. You can:

- Check your membership details
- Submit claims online (if applicable)# and provide information to resolve pending claims
- Access your eMedical Card (if applicable)#
- View membership documents
- Check your claims status and any outstanding shortfall
- View e-Claims Statements and e-Shortfall Invoices, if applicable
- View clinical benefit usage (if applicable)
- Download claim forms and other frequently used forms
- Download your List of HealthNet Service Providers (if applicable) and Medpass Network Hospital List
- Search and get information for HealthNet Service Providers and night clinics

Register myBupa at [mybupa.bupa.com.hk](http://mybupa.bupa.com.hk). It's free.

To start using myBupa, simply follow the 6 steps for registration:

- (1) Go to myBupa website or mobile app and click "Register now";
- (2) Enter your membership number, HKID/passport number and date of birth, then click "Submit";
- (3) Enter your mobile number and email address, then click "Send Verification Code" to get the code sent to your email;
- (4) Enter the verification code;
- (5) Create your password;
- (6) Click "Submit" to complete the first-time registration.

You can also download the myBupa free mobile app:



# Whether you can use the hospital e-claims service and eMedical Card on myBupa is subject to the arrangement of your group health insurance scheme.

## SMS notification service

You will receive a e-notification once your claims are processed, followed by a claims statement sent to your office as usual (or by email if your company has opted for our e-Statement service).

To enjoy this SMS service, you can simply sign up by calling our Customer Care helpdesk at 2517 5388.

## Claims service pledge\*

Bupa promises to settle your claims within 5 - 7 working days after receiving the completed claim form and all required documents.

\* Applicable to Non-HealthNet Benefit

## 網上服務及手機應用程式

- myBupa 讓你輕易地使用此保障計劃的服務，你可：查閱會籍詳情
- 網上遞交索償（如適用）#及補充索償資料
- 使用電子醫療卡（如適用）#
- 瀏覽會籍文件
- 查閱賠償進度及所欠差額
- 查閱電子賠償單及電子差額通知書（如適用）
- 查閱門診保障使用量（如適用）
- 下載索償表格及其他常用表格
- 下載「網絡服務供應商目錄」（如適用）及「任中橫網絡醫院名單」
- 搜尋及即時獲得網絡醫療服務供應商及夜間診所的資料

請即瀏覽保柏網頁 [myBupa.bupa.com.hk](http://myBupa.bupa.com.hk) 免費登記使用 myBupa。

首次使用 myBupa 前，只需依照以下 6 個簡單步驟，便可完成登記手續：

- (1) 登入 myBupa 網頁或手機應用程式，然後按「立即登記」；
- (2) 輸入你的會員編號、香港身份證／護照號碼及出生日期，然後按「提交」；
- (3) 輸入你的電郵地址後，按「發送驗證編號」，驗證編號便會發送至你的電郵；
- (4) 輸入驗證編號；
- (5) 建立密碼；
- (6) 按「提交」，便完成首次登記手續。

myBupa 亦提供免費手機應用程式，立即掃瞄 QR 碼免費下載。



# 你是否可透過 myBupa 遞交住院索償及使用電子醫療卡，將以你的團體醫療保障計劃之安排為準。

## 賠償電子通知服務

在你的賠償辦妥後，我們將會發出電子通知。之後，你會如常從公司收取賠償單（如你的公司已登記使用我們的電子結算表服務，你便會收到電郵通知）。

你可致電保柏客戶服務專線 2517 5388 登記短訊通知服務。

## 賠償服務承諾\*

在收妥填妥之賠償申請表及全部所需文件後，保柏承諾可於 5 - 7 個工作天內支付你的賠償。

\*適用於非網絡保障

# Table of Contents

## 目錄

	Page 頁
1. Eligibility .....	8
參加資格 .....	35
2. Your benefits and membership card .....	8
你的保障及會員卡 .....	35
3. Coverage for endoscopy and viral warts and skin lesions procedures ....	9
有關內窺鏡和病毒性疣及皮損程序的保障.....	36
4. Treatments that require a referral letter .....	11
需有醫生轉介信之診治 .....	38
5. Situations that require pre-authorisation .....	12
需要初步保障審核的情況 .....	38
6. Making a claim .....	13
申請賠償 .....	39
7. Frequently asked questions .....	19
常見問題 .....	45
8. What's not covered .....	22
不受保障項目 .....	48
9. Glossary of terms .....	24
特別詞彙釋義 .....	49
10. Free Bupa Worldwide Assistance Programme .....	29
免費保柏國際援助計劃 .....	53
11. Your Personal Data.....	34
你的個人資料 .....	57

This is an introductory guide for reference only. If there is any conflict between the English version and the Chinese version, the English version shall prevail. If inconsistency arises between this membership guide and the Contract of Corporate HealthNet Plus Group Health Insurance Scheme, we shall follow the Contract for final interpretation.

此會員指引只供參考之用。中、英文版如有任何差別，概以英文版為準。如此會員指引與「公司僱員健康網」團體醫療保障計劃之合約內容有任何差別，概以合約為準。



## 1) Eligibility

All full-time permanent employees aged below 65 years are eligible to join the Scheme.

Your dependants may also be eligible to join the Scheme if dependant cover is provided under the Scheme. Dependants include:

- your lawful spouse aged below 65 years; and
- your unmarried child(ren) aged from 15 days to 17 years (or aged from 18 years to 22 years if they are full-time students with valid proof upon request).

## 2) Your benefits and membership card

A Bupa HealthNet (BHN) Card has been issued to you. With this card you can enjoy a hassle-free claim process when using our medical network. For a summary of your coverage and benefit limits, please refer to the Schedule of Benefits. For your medical cover and service details, please read all other sections in this membership guide. For Contract terms and conditions, please contact your Human Resources Department.

If you are covered under Clinical Benefit, you are entitled to both **HealthNet Benefit** and **Non-HealthNet Benefit** that give you access to medical services with optimum flexibility, convenience and cost-effectiveness.

- (a) **HealthNet Benefit** provides you with comprehensive medical network facilities and also full cover for your eligible medical expenses.
- (b) **Non-HealthNet Benefit** gives you the freedom in choosing your preferred doctor. What you need to do is pay all medical expenses yourself first and then follow our simple claim procedures (see section 6) for reimbursement. After our claim assessment, we will reimburse you for eligible medical expenses.

### Using Bupa HealthNet (BHN) Card to settle your clinical expenses

You are given a free BHN Card, which gives you the optimal convenience.



In order to enjoy full cover, simply present your BHN Card and referral letter (if required) to settle your eligible clinical expenses at any HealthNet clinic and diagnostic centre in Hong Kong and Macau. Please be reminded that pre-authorisation confirmation from Bupa is required for certain situations (see section 5) and if you are covered under Plan 6, 7, 8 or 9, you have to pay the co-payment amount as specified under the Schedule of Benefits for every visit to a General Practitioner, Specialist, Physiotherapist or Registered Chinese Medicine Practitioner within HealthNet.

### **Your BHN Card may not be accepted for the following reasons**

- excluded treatments or items (see section 8)
- no valid referral letter for Specialist treatment (except for dermatology, family medicine, gynaecology, ophthalmology, orthopaedics, otolaryngology, paediatric surgery, paediatrics and psychiatry), physiotherapy, diagnostic imaging or laboratory tests as required
- no pre-authorisation confirmation from Bupa as required

### **Video consultation services**

You can enjoy video consultation services with eligible medical card if you have network Clinical Benefit. Consult our designated network doctors through a video call comfortably and safely at home. Only eligible medical expenses are covered and all medication delivery charges shall not be payable. Visit [www.bupa.com.hk/vc](http://www.bupa.com.hk/vc) for details.

### **Loss and return of your BHN Card**

- you must inform your Human Resources Department within 24 hours in case of loss or theft of your BHN Card. The first card replacement is free. An administration fee of HK\$100 per card will be charged for subsequent replacements
- if you are no longer eligible to be a Member under this scheme, you must return the Card(s) to your Human Resources Department on or before your last working day

### **Shortfall**

Normally, a Shortfall will only occur when your eligible medical expenses exceed the benefit limit or your expenses are not covered under the Contract. Settlement of Shortfall should be made **within 14 days** after receipt of the Shortfall invoice.

## **3) Coverage for endoscopy and viral warts and skin lesions procedures**

### **For Plans 1 - 3**

#### **For day case or clinical procedures in Hong Kong**

After endoscopy or viral warts and skin lesions procedures performed at a clinic or day-case centre, you should settle your expenses with the service providers directly. Then file a claim for reimbursement following the steps in the “Making a claim” section of this guide.

Your eligible expenses will be covered up to the maximum limit per member of Non-HealthNet providers under Day Case Endoscopy Procedure Benefit and Day Case Viral Warts and Skin Lesions Procedure Benefit.

Please note that Supplementary Major Medical Benefit doesn't apply to day case endoscopy or viral warts and skin lesions procedures.

#### **For procedures performed during hospital confinement in Hong Kong**

Endoscopy and viral warts and skin lesions procedures performed during hospital confinement with an overnight stay will be reviewed by Bupa for medical necessity before any claims are paid.

- If hospital confinement is medically necessary, your eligible expenses will be covered under benefit items A1-A9 of Hospital and Surgical Benefit and Supplementary Major Medical Benefit, subject to the maximum limit per member.
- Otherwise, your claim (if eligible) will be paid up to the maximum limit per member of Non-HealthNet providers under Day Case Procedure Benefits only. Supplementary Major Medical Benefit will not be applicable.

For endoscopy and viral warts and skin lesions procedures performed outside Hong Kong, your eligible expenses will be covered under benefit items A1-A9 of Hospital and Surgical Benefit and Supplementary Major Medical Benefit.

For the full list of endoscopy and viral warts and skin lesions procedures covered under Day Case Procedure Benefits, please refer to the Documents section of Bupa's customer service portal myBupa. This list is subject to change from time to time.

#### **For Plans 4 - 9**

##### **For day case or clinical procedures in Hong Kong**

Pre-authorisation is required for endoscopy and viral warts and skin lesions procedures. Your eligible expenses will be reimbursed differently depending on what type of provider you choose:

- For procedures performed by HealthNet doctors at HealthNet Service Providers, you can enjoy full cover and cashless service for eligible expenses. Please visit a HealthNet Service Provider to enjoy cashless service with your BHN Card, after receiving pre-authorisation from Bupa.
- For procedures at Non-HealthNet providers, your eligible expenses will be covered up to the maximum limit per member of Non-HealthNet providers under Day Case Endoscopy Procedure Benefit and Day Case Viral Warts and Skin Lesions Procedure Benefit. You should apply for pre-authorisation beforehand and settle your expenses with the service providers directly. Then file a claim for reimbursement following the steps in the "Making a claim" section of this guide.

Please note that Supplementary Major Medical Benefit doesn't apply to day case endoscopy or viral warts and skin lesions procedures.

If you don't get pre-authorisation from Bupa for day case or clinical operations, you won't be entitled to any benefits and your medical expenses will not be paid.

##### **For procedures performed during hospital confinement in Hong Kong**

Endoscopy and viral warts and skin lesions procedures performed during hospital confinement with an overnight stay will be reimbursed differently depending on whether pre-authorisation was obtained:

- If you get pre-authorisation from Bupa, your eligible expenses will be payable under benefit items A1-A9 of Hospital and Surgical Benefit and Supplementary Major Medical Benefit, subject to the maximum limit per

- member.
- Otherwise, your claim (if eligible) will be paid up to the maximum limit per member of Non-HealthNet providers under Day Case Procedure Benefits only. Supplementary Major Medical Benefit will not be applicable.

### **Pre-authorisation procedures**

If you choose a Non-HealthNet provider, you should follow these steps to get pre-authorisation before your endoscopy or viral warts and skin lesions procedure:

1. Simply download the Pre-authorisation Form from our website or myBupa, or call our Customer Care helpdesk to obtain it.
2. Complete Part 1 of the form and ask your doctor to complete Part 2. Discuss with your doctor and choose your private hospital or day-case centre.
3. Send the form to us by email, fax or post.
4. If your pre-authorisation is approved\*, we'll inform you by phone/email or send you the Pre-authorisation Confirmation/Guarantee of Payment Letter upon request.

For endoscopy and viral warts and skin lesions procedures performed outside Hong Kong, your eligible expenses will be covered under benefit items A1-A9 of Hospital and Surgical Benefit and Supplementary Major Medical Benefit.

For the full list of endoscopy and viral warts and skin lesions procedures covered under Day Case Procedure Benefits, please refer to the Documents section of Bupa's customer service portal myBupa. This list is subject to change from time to time.

\* It should take around 2 business days to complete the pre-authorisation once all necessary information is received with a signed application form.

## **4) Treatments that require a referral letter**

- in-patient Specialist's services (except for services performed by a pathologist, radiologist or Physiotherapist during Hospital Confinement)
- treatment provided by a Physiotherapist, Chiropractor or Specialist (except when it is provided by a Specialist who specialises in dermatology, family medicine, gynaecology, ophthalmology, orthopaedics, otolaryngology, paediatric surgery, paediatrics and psychiatry if Clinical Benefit is applicable)
- diagnostic imaging or laboratory tests (if Clinical Benefit is applicable) (Bupa accepts written recommendation from a Registered Medical Practitioner for all diagnostic imaging and laboratory tests or written recommendation from a Registered Chinese Medicine Practitioner or Chiropractor\* for X-ray only and laboratory tests)
- private nursing services

A referral letter is valid for the same diagnosis or its related complications for a period of 6 months from the date of issuance. Another referral letter is required for unrelated diagnosis.

\* 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.

## 5) Situations that require pre-authorisation

To enjoy full cover under HealthNet Benefit of Clinical Benefit (if applicable), you need to obtain pre-authorisation confirmation from Bupa for the following situations:

- diagnostic imaging or laboratory tests (as required by Bupa's provider guidelines)
- any treatment by a Specialist referred by a HealthNet Registered Medical Practitioner (RMP) provided that the relevant specialty is not available within HealthNet

Pre-authorisation is a process to assist you in identifying the most cost-effective and appropriate medical approach to treat your illness by a HealthNet RMP. It also helps to confirm that benefit is available before using the medical services.

Please ask the HealthNet RMP to fill in a Pre-authorisation Form and fax it to us with your signature. If your pre-authorisation is approved, we'll inform you by phone/email or send you the Pre-authorisation Confirmation / Guarantee of Payment Letter ("GOP Letter") upon request. We'll fax the letter to the appointed hospital or day-case centre you have chosen. Please also note that your entitlement of the benefit will be subject to our final assessment after receipt of the claim form, receipts and relevant medical documents.

If pre-authorisation is required outside of our office hours, subsequent authorisation can be arranged on the next working day after the treatment provided that all other requirements are satisfied (e.g. treatment must be attended and referred by a HealthNet RMP).

If the pre-authorisation is not obtained as required, eligible medical expenses will be paid under Non-HealthNet Benefit.

## 6) Making a claim

If you use the BHN Card to settle your clinical expenses, you do not need to file a claim. Your claim will be sent by the clinic or diagnostic centre directly to us for assessment.

If you have paid the medical bills yourself, please retain all original receipts and send them to Bupa together with the referral letter (if required) and a completed claim form. The claim form can be obtained through your Human Resources Department or our 24-hour automated fax service at (852) 2517 5388, or Bupa's website at [www.bupa.com.hk](http://www.bupa.com.hk). You can also submit your claims online by using myBupa's e-claims service.

To enable us to respond to your claim promptly and accurately, please provide complete information and submit your claim as soon as possible. Remember that all bills and receipts must include:

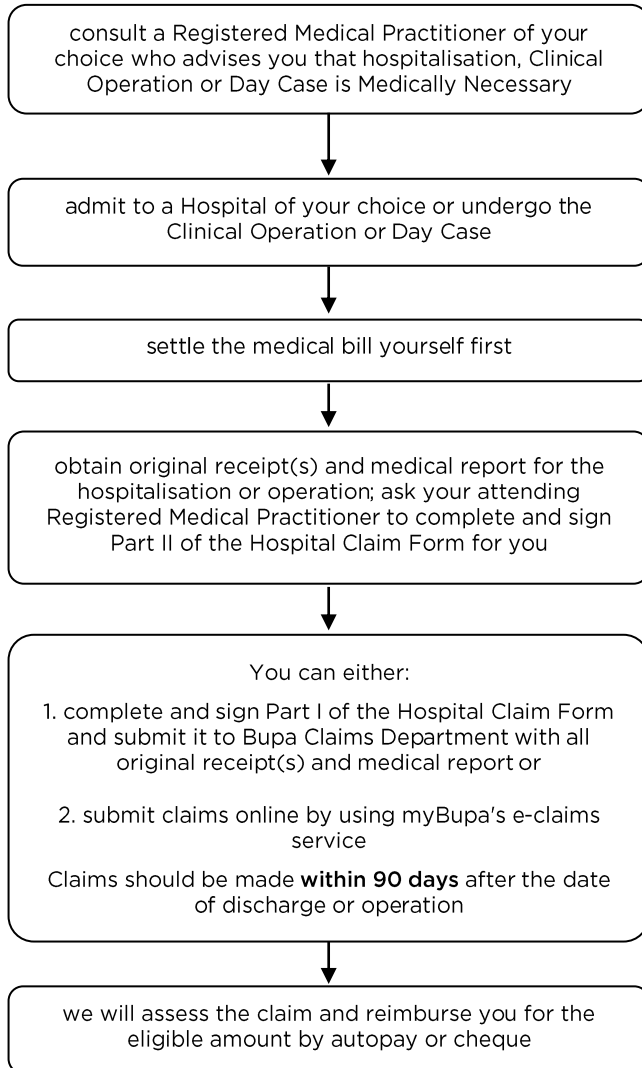
- date of consultation
- name of patient
- name and address of the service provider
- details of diagnosis & treatment (e.g. prescription, name of operation, etc.)
- nature and breakdown of charges
- Chinese Medicines prescription and the number of refills for the treatment (for consultation with a Registered Chinese Medicine Practitioner)
- official chop and signature of the service provider

Please note that original documents are required for claims processing, not copies. If you use myBupa's e-claims service, please upload the image of the original documents. Please keep them for 6 months from the date of claim submission. If you fail to provide the original documents, your claim submission via myBupa e-claims service may be affected.

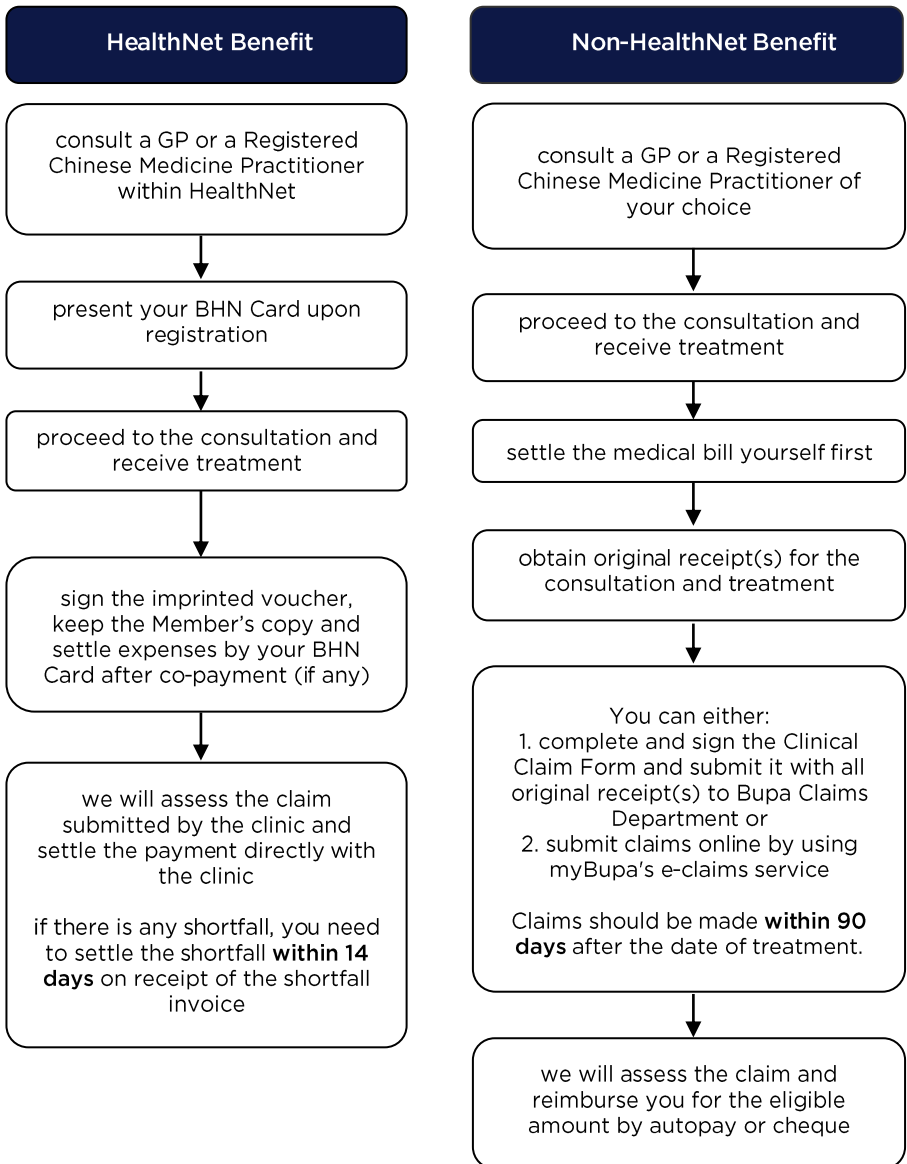
A claim request should be submitted **within 90 days** (i.e. calendar days) after treatment or discharge from Hospital, otherwise it may be declined. Once your claim is approved, reimbursement will be made by autopay or cheque in Hong Kong dollars. If you have any queries about the claim settlement, please contact our **Customer Care helpdesk at (852) 2517 5388**.

Claims procedures are included in later sections.

## Procedure for claiming Hospital and Surgical Benefit

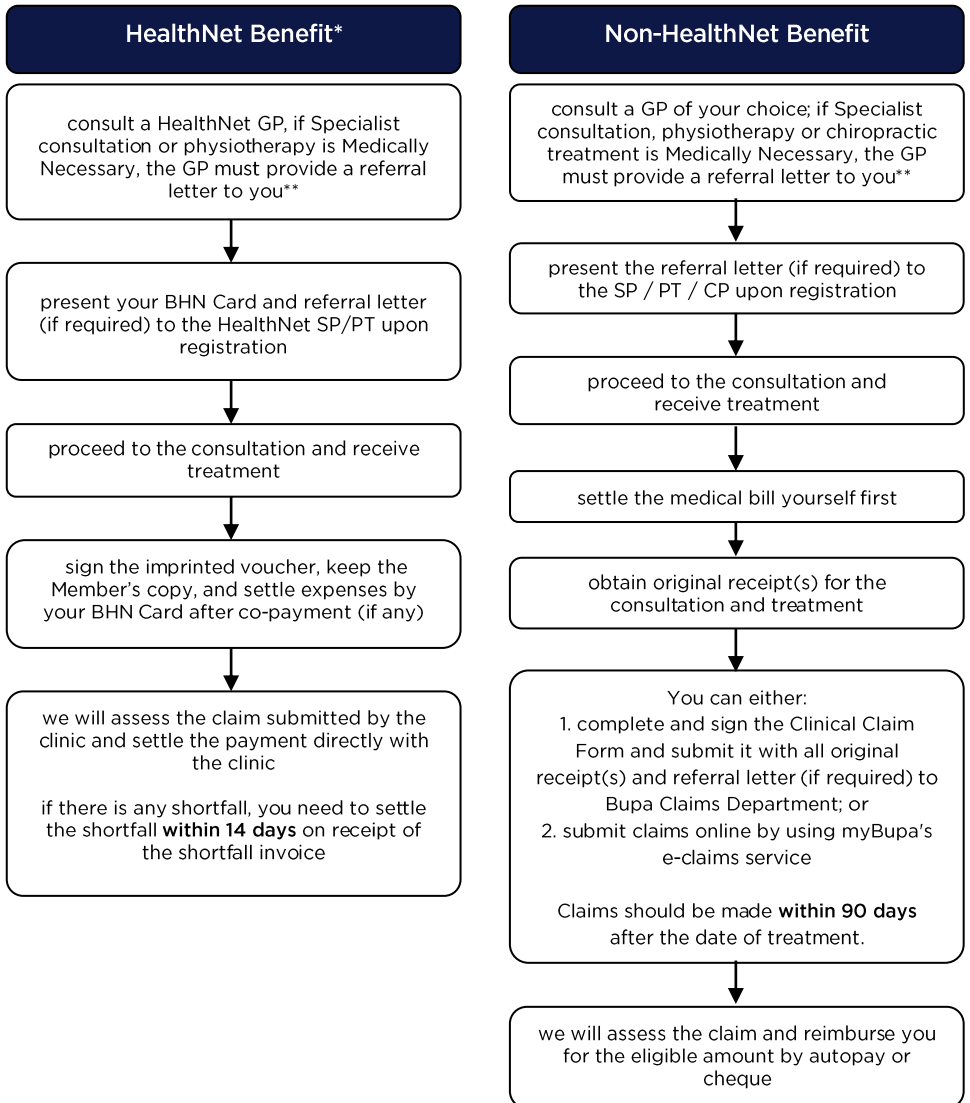


## Procedure for claiming Clinical Benefit – General Practitioner (GP) or Registered Chinese Medicine Practitioner (if applicable)





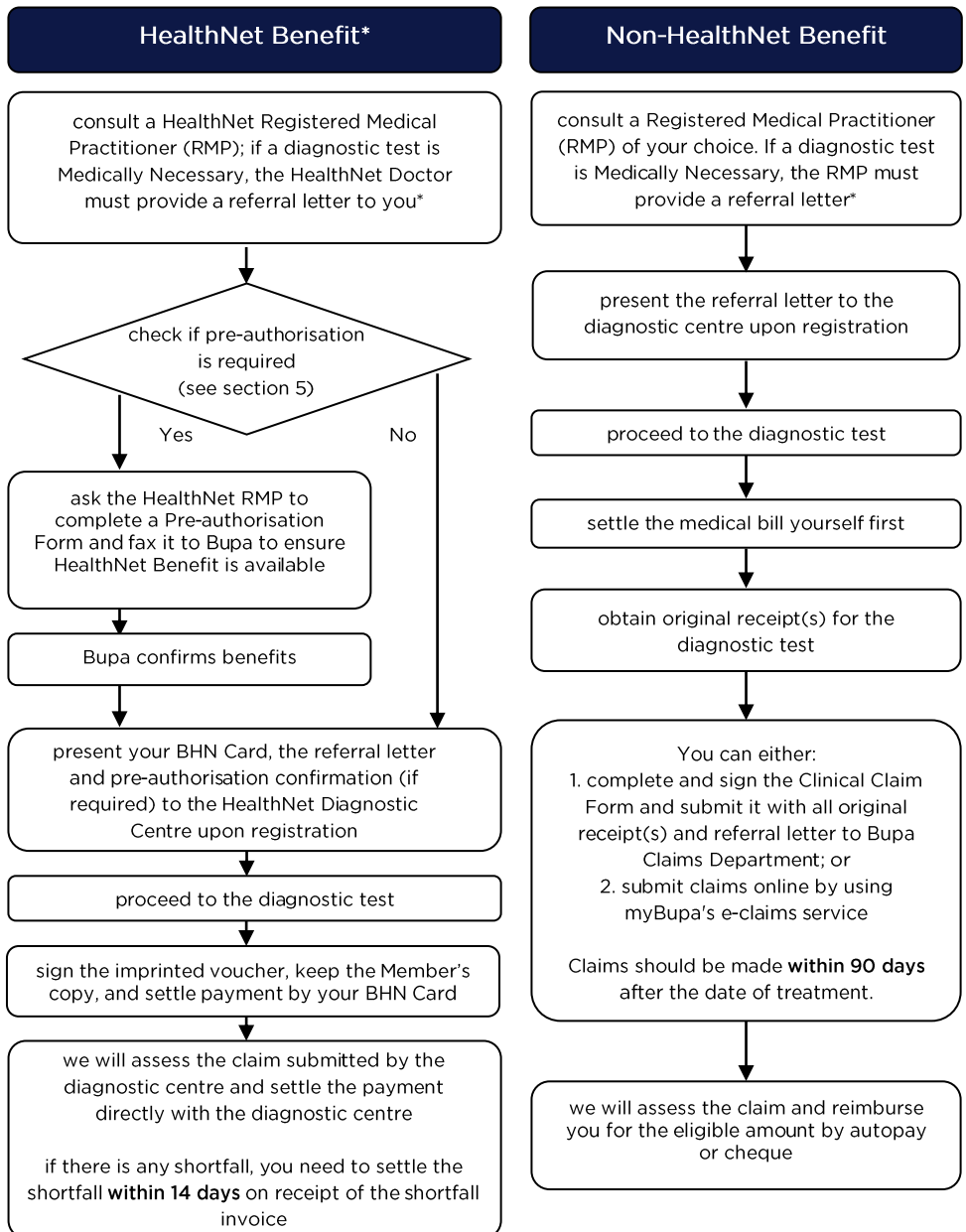
## Procedure for claiming Clinical Benefit – Specialist (SP) / Physiotherapist (PT) / Chiropractor (CP) (if applicable)



\* To enjoy HealthNet Benefit, pre-authorisation confirmation from Bupa is required for any treatment provided by a Specialist referred by a HealthNet Doctor where the relevant specialty is not available in the HealthNet. You need to pay the expenses by cash for such Specialist treatment and then, complete and return the Clinical Claim Form together with the pre-authorisation confirmation and all original receipts to our Claims Department **within 90 days** from the date of treatment.

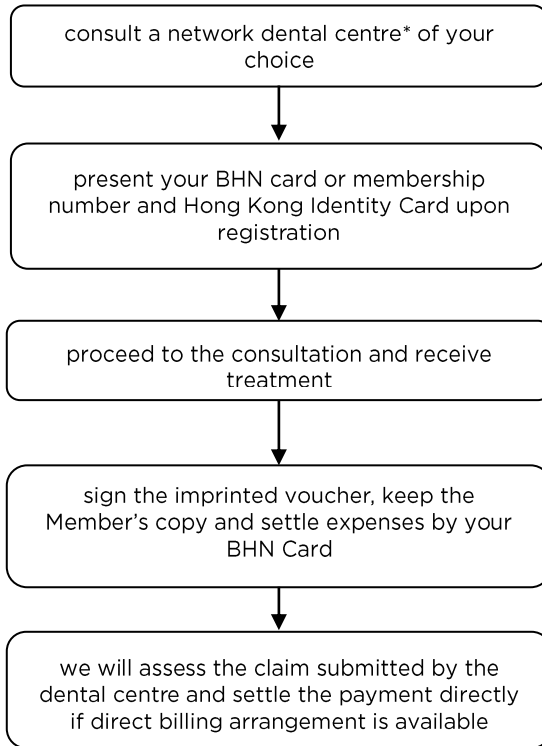
\*\* For both HealthNet and non-HealthNet benefit, referral letter is not required for SP consultation on dermatology, family medicine, gynaecology, ophthalmology, orthopaedics, otolaryngology, paediatric surgery, paediatrics or psychiatry.

## Procedure for claiming Clinical Benefit – Diagnostic Imaging and Laboratory Tests (if applicable)



\* Bupa also accepts written recommendation from Registered Chinese Medicine Practitioner or Chiropractor for X-ray only and laboratory tests. However, 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.

## Procedure for using Dental Benefit (if applicable)



\* Network Dental Centre refers to the network of dental service providers appointed by Bupa to provide dental services listed under "Network Dental Centre benefit" in the Schedule of Benefits. Locations of the Network Dental Centres include Admiralty, Causeway Bay, Quarry Bay, Tsim Sha Tsui, Tseung Kwan O, Sha Tin, Tsing Yi, Tung Chung, etc. Please log in to Bupa's member service portal myBupa to view the latest location list. This list is subject to change from time to time. Please contact the Network Dental Centres to understand their consultation hours.

## 7) Frequently asked questions

1. Will this scheme cover my medical expenses incurred outside Hong Kong?

Yes, your coverage is 24/7 worldwide and therefore all your eligible medical expenses will be covered wherever you are. Your medical bills in any currency other than Hong Kong dollars will be converted to Hong Kong dollars on the basis of the quoted exchange rate in effect on the date of treatment or date of Hospital discharge.

### **About Hospital and Surgical Benefit, Supplementary Major Medical Benefit**

2. If I have undergone a minor surgery in the day case unit of a Hospital or a clinic without hospitalisation, will I still be covered?

Yes, all your eligible medical expenses incurred resulting from a Day Case or Clinical Operation will be covered under the Hospital and Surgical Benefit of this scheme.

3. Do I need my attending Registered Medical Practitioner to complete and sign Part II of the Hospital Claim Form if I am admitted in a Hospital Authority's hospital?

If you are admitted in a Hospital Authority's hospital, you do not need to ask the attending Registered Medical Practitioner to complete Part II of the Claim Form given that the diagnosis and treatment details are provided on the receipts, medical report, Discharge Summary or Sick Leave Certificate.

4. How can I get the Second Claims Incentive?

You can get the Second Claims Incentive if you first file a hospital claim with another insurance company and then submit a claim to Bupa. This benefit shall be paid on a per day basis provided that actual room and board fees are charged by the hospital on the costs of accommodation and meals to the Member for such day of hospital confinement.

You don't need to use a specific claim form to get the Second Claims Incentive. When you file a hospital claim for reimbursement, remember to tick the checkbox and provide details under Part I 3a "Have you filed this claim with another Bupa contract or any other insurer / organisation?". Then submit together with the certified true copy of receipts and claims statement advice from the insurer. Bupa will consider if your Hospital Confinement is eligible for the Second Claims Incentive and pay the benefit accordingly.

5. How do I use the Supplementary Major Medical Benefit of this scheme?

If you are hospitalised or have undergone a Day Case or Clinical Operation in Hong Kong, however, your benefits under Hospital and Surgical Benefit (items 1 – 9) are exhausted, we will reimburse you for 80% of your eligible medical expenses incurred in excess of the benefits payable under items A1 – A9 of Hospital and Surgical Benefit (either exceeding the maximum limit or maximum number of days) up to the Maximum Limit of Supplementary Major Medical Benefit. This benefit also applies to hospitalisation or surgery occurred overseas provided that it is certified by a Registered Medical Practitioner and results from a medical Emergency. Please be reminded that this benefit is not payable for hospitalisation in suite/VIP/deluxe room, and an adjustment factor will be applied to room upgrade (see Schedule of Benefits). However, the adjustment factors and room class restrictions above are not applicable to Confinement in a higher room level due to room shortage for Emergency treatment or isolation that requires a specific room level.

**About Clinical Benefit (if applicable)**

6. Will this scheme reimburse me for the cost of medication without consultation? (for Members with Clinical Benefit)

No. This scheme will only pay your medication cost incurred together with a consultation, if eligible.

7. What if I haven't got a referral letter for an out-patient Specialist visit? (for Members with Clinical Benefit)

If you cannot provide any referral letters for your out-patient Specialist visit, we will pay the eligible amount subject to the General Practitioner Benefit limit of your Clinical Benefit (referral letter is not required for dermatology, family medicine, gynaecology, ophthalmology, orthopaedics, otolaryngology, paediatric surgery, paediatrics and psychiatry).

8. What if I haven't got a referral letter for receiving out-patient physiotherapy or chiropractic treatment? (for Member with Clinical Benefit)

If you cannot provide any referral letters for receiving out-patient physiotherapy or chiropractic treatment, no benefit will be payable.

9. What kind of documents is required in order to submit a claim for Chinese Herbalist Benefit or Chinese Bonesetter Benefit (if applicable)?

To claim for reimbursement under Chinese Herbalist Benefit or Chinese Bonesetter Benefit, please submit the original receipt and the original prescription together with the completed Clinical Claim Form or simply submit claims online by using myBupa's e-claims service.

## About other optional benefits (if applicable)

### 10. How can I enjoy the Smile Dental Benefit? (if applicable)

With our Dental Benefit, you'll receive full cover for fillings, simple extractions and more at our designated network dental centres. To enjoy cashless service and full cover, you must present your BHN card or membership number and Hong Kong Identity Card for verification and record. You may log in to myBupa to view the latest list of network dental centres.

## Others

### 11. Is there any option to boost my group coverage?

You can enrol in Bupa VTop Health Insurance Scheme at the same room level under Hospital and Surgical Benefit as your entitled room level under your current group scheme at different life stages (e.g., upon renewal of your group scheme, before or after changing jobs, before retirement) to boost your cover. Bupa guarantees that your application will be accepted without underwriting regardless of your health conditions<sup>1</sup>. Moreover, medical conditions protected by your group membership will be covered for life<sup>2</sup> under Bupa VTop.

You can enrol in Bupa VTop during any one of the following periods<sup>3</sup>:

1. Within 60 days of joining a Bupa group scheme;
2. Within 60 days after the Contract Anniversary Date of a Bupa group scheme;
3. Within 30 days before or after termination of a Bupa group scheme membership; or
4. Within 30 days after marriage or child's birth.

If you are interested in Bupa VTop, please visit [www.bupa.com.hk/VTop](http://www.bupa.com.hk/VTop) or contact Bupa Customer Care helpdesk.

<sup>1</sup> Please refer to the "Eligibility" section of the Bupa VTop Health Insurance Scheme brochure for details.

<sup>2</sup> All pre-existing conditions which are payable under your Bupa group scheme shall be covered under Bupa VTop if you have been continuously insured under a Bupa group scheme and/or Bupa VTop for a total of at least 12 consecutive months, with the exception of those specified under the General Exclusions of the Bupa VTop contract. Bupa guarantees that your cover under Bupa VTop can be renewed every year for life as long as you meet the requirements as stated in the Renewal Clause of your contract. Bupa reserves the right to amend the subscription, benefits, terms and conditions upon your contract renewal. You can refer to the Bupa VTop contract for further details.

<sup>3</sup> If the number of employees joining your company's Bupa group scheme is between 2 – 9, you can only enrol in Bupa VTop within 30 days before or after termination of your Bupa group scheme membership when your employment ends (except when you retire).

## 8) What's not covered

We want to help you understand the coverage. Below are the general exclusions:

1. Pre-existing conditions.
2. Treatment, medical service, medication or investigation which is not medically necessary.
3. Any illness or bodily injury for which compensation is payable under any laws or regulations or any other insurance policy or any other sources except to the extent that such charges are not reimbursed by any such compensation, insurance policy or sources.
4. Any charges for accommodation, nursing and services received in health hydros, nature cure clinics, convalescent home, rest home, home for the aged or similar establishments.
5. Any charges in respect of surgical or non-surgical cosmetic treatment (unless necessitated by injury caused by an accident and the member receives the medically necessary treatments or related services within one year of the accident), Hair Mineral Analysis (HMA), health supplements or body weight control (unless approved by Bupa).
6. Any charges in respect of preventive measures, including but not limited to routine blood tests, general check-ups, vaccinations or inoculations, hearing tests, eye refraction including but not limited to routine eye tests or any cost of fitting of spectacles or lens.
7. Congenital conditions, developmental conditions or hereditary conditions.
8. Treatment that commenced during the first five years from the coverage commencement date and which in any way arises from, is attributable to, or is consequential upon Human Immunodeficiency Virus Infection.
9. Sexually transmitted (venereal) diseases or their sequel.
10. Treatment relating to pregnancy, including diagnostic tests for pregnancy or resulting childbirth, abortion or miscarriage; 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 and premature ejaculation, regardless of cause.
11. Misuse or overdose of drugs or being under the influence of alcohol, self-inflicted injuries or attempted suicide.
12. Treatment relating to any illness or bodily injury resulting from participation in criminal activities.

13. Alternative treatment including but not limited to Chinese Medicines treatment, acupuncture, acupressure, tui na, hypnotism, rolfing, massage therapy and aromatherapy (unless it is payable under Chinese Herbalist Benefit or Chinese Bonesetter Benefit under Clinical Benefit).
14. Senile Dementia (including Alzheimer's disease), Parkinson's disease.
15. Psychological or psychiatric condition(s) of any and all kinds, including but not limited to psychoses, neuroses, depression, anxiety, anorexia nervosa, schizophrenia, behavioural disorders, delirium, insomnia and neurasthenia (unless it is payable under Psychiatric Treatment Benefit under Hospital and Surgical Benefit).
16. Any charges for the procurement or use of special braces and appliances, including but not limited to spectacles, hearing aids and other equipments such as wheel chairs and crutches.
17. Any treatment or investigation related to dental or gum conditions unless it is covered under Dental Benefit or Emergency treatment arising from Accidents or the extraction of impacted wisdom teeth during Hospital Confinement. Follow-up treatment which is related to such Hospital Confinement shall not be covered unless it is payable under Smile Dental Benefit.
18. Treatment arising from war, invasion, acts of foreign enemies, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection or military or usurped power or terrorist acts.
19. Non-medical services, including but not limited to guest meals, radio, telephone, photocopy, taxes (except the Value-Added Tax or Goods and Services Tax for medical services), medical report charges and the like.
20. Expenses incurred for experimental or unproven medical technology or procedure not in accordance with the standards of good and prudent medical practice.
21. Engaging or taking part in naval, military or airforce or any operation with any armed force; or any form of professional sports.



## 9) Glossary of terms

Capitalised words are either proper nouns or words with specific meaning as defined in the Contract of Corporate HealthNet Plus Group Health Insurance Scheme. Some important definitions are set out below.

- “Accident” means an external, sudden, violent and unexpected event of visible nature which shall, independently of any other cause, be the sole cause of bodily injury.
- “Chiropractor” means a person (other than the Member himself, his relatives, families and business partners unless approved by Bupa) legally qualified in Hong Kong or any other place where medical expenses are incurred to render chiropractic service through manipulation of joints and having qualifications at least equivalent to those of a chiropractor registered pursuant to the Chiropractors Registration Ordinance of Hong Kong.
- “Clinical Operation” means a surgical procedure which may effectively be undertaken at a clinic by a Registered Medical Practitioner where a stay in Hospital is not Medically Necessary provided that the surgical procedure falls under Bupa’s Schedule of Surgical Operations and is classified as Clinical Operation therein.
- “Congenital Conditions” means medical abnormalities existing at the time of birth, regardless of whether they are known or unknown to the Member or Subscriber. They shall include (but not to the exclusion of others which may medically be regarded as congenital conditions), strabismus (squint), hydrocephalus, undescended testicle, Meckel’s diverticulum, flat foot, heart septal defect and indirect inguinal hernias.
- “Day Case” means a surgical procedure, Non-surgical Cancer Treatment and kidney dialysis (if applicable under this contract) which may effectively be undertaken at a clinic or day case unit of a Hospital by a Registered Medical Practitioner where an overnight stay in Hospital is not Medically Necessary, provided that the surgical procedure falls under Bupa’s Schedule of Surgical Operations and is classified as Day Case therein.
- “Developmental Conditions” means abnormal development compared to what is expected at the given age level or stage of development. These impairments or disabilities originate before the age of eighteen (18), may be expected to continue indefinitely, and constitute a substantial impairment. Biological and non-biological factors are involved in these disorders. They shall include (but not to the exclusion of others which may medically be regarded as developmental conditions) language and learning disorders, autism and mental retardation.
- “Disability” means an injury or sickness, and shall include all disabilities arising from the same cause including any and all complications therefrom, except that after ninety (90) days following the latest discharge from Hospital or the last consultation during such time no treatment is received. Any subsequent disability from the same cause shall be considered as a separate disability.

“General Practitioner”	means a Registered Medical Practitioner who is registered in the General Register of the Medical Council of Hong Kong or equivalent.
“Hereditary Conditions”	means medical conditions genetically transmitted from parent to offspring.
“Hospital”	means any establishment licensed as a hospital by proper authority to provide medical services of the sick, injured or those who require medical treatment, which has government approved facilities for diagnosis, major surgery and twenty-four (24) hour nursing service and has a Registered Medical Practitioner in regular attendance. “Hospital” does not include any establishment or that portion of any establishment which is operated as a convalescent or nursing home, rest home, home for the aged, or an establishment for rehabilitation of alcoholics or drug addicts, or any similar purpose.
“Hospital Confinement”	means confinement in a Hospital for western medicine and surgical services as a result of a Medically Necessary condition and recommended by a Registered Medical Practitioner. For the purpose of this Contract, the Member must stay in the Hospital for the entire period of confinement and room and board charges must be incurred.

“Medically Necessary”

means the necessity to have a treatment, medical service or medication which is:

- a) consistent with the diagnosis and customary medical treatment for the condition at a Normal and Customary charge;
- b) in accordance with standards of good and prudent medical practice;
- c) necessary for such a diagnosis or treatment;
- d) not furnished primarily for the convenience of the Member, Registered Medical Practitioner, Registered Chinese Medicine Practitioner, Chiropractor, Physiotherapist, Qualified Nurse, Anaesthetist, Registered Dentist or any other Medical Service Providers;
- e) furnished at the most appropriate level which can be safely and effectively provided to the Member; and
- f) with respect to Hospital Confinement, not furnished primarily for diagnostic scanning purpose, imaging examination or physical therapy.

For the avoidance of doubt, the recommendation of the attending registered medical practitioner is not the sole factor to be considered when determining whether a treatment, medical service or medication is medically necessary.

Without prejudice to the generality of the foregoing, circumstances where a hospital confinement is considered medically necessary include, but are not limited to:

- (i) the member is having an emergency that requires urgent treatment which should be performed at a hospital;
- (ii) surgical procedures which are medically required to be performed under general anaesthesia;
- (iii) equipment for surgical procedure is available in hospital and procedure cannot be done on a day case basis;
- (iv) there is significantly severe co-morbidity of the member; and/or
- (v) taking into account the individual circumstances of the member and for the safety of the member, the medical service should only be conducted in hospital.

For the purposes of interpreting “standards of good and prudent medical practice”, Bupa shall consider the followings:

- I. standards that are based on clinically proven evidence in appropriately reviewed, independent medical journals;
- II. relevant specialty body recommendations; and
- III. in accordance with standards of generally accepted medical practice.

“Member”

means an Employee and his Dependants who are covered under the Contract.

“Non-surgical Cancer Treatment”

means cancer treatment for chemotherapy, radiotherapy, targeted therapy, immunotherapy and hormonal therapy.

“Network Dental Centre”	means the network of dental service providers appointed by Bupa to provide the covered dental services items as specified under the Schedule of Benefits. The particulars of these dental service providers are published by Bupa in either print or digital format and shall be amended from time to time.
“Normal and Customary”	<p>means, in relation to fees, such level which does not exceed the general range of charges being charged by the 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 Normal and Customary charges shall not in any event exceed the actual charges incurred.</p> <p>In determining whether a charge is Normal and Customary, Bupa shall make reference to the followings (if applicable) –</p> <ul style="list-style-type: none"> <li>(a) treatment or service fee statistics and surveys in the insurance or medical industry;</li> <li>(b) internal or industry claim statistics;</li> <li>(c) gazette published by the Hong Kong government; and/or</li> <li>(d) other pertinent source of reference in the locality where the treatments, services or supplies are provided.</li> </ul>
“Operating Theatre”	means any facility designated for and equipped to perform surgical operations or procedures, and have satisfied at least equivalent to the requirements stipulated in the Code of Practice for Day Procedure Centres or the Code of Practice for Hospitals issued by the Director of Health in Hong Kong, or any other applicable code of practice or regulation pursuant to the Private Healthcare Facilities Ordinance (Chapter 633, Laws of Hong Kong).
“Physiotherapist”	means a person (other than the Member himself, his relatives, families and business partners unless approved by Bupa) legally qualified in Hong Kong or any other place where medical expenses are incurred to render assessment and treatment service on physical disabilities by means of remedial exercises, manual therapy and mechanical, thermal or electrical energy and having qualifications at least equivalent to those of a physiotherapist registered pursuant to the Supplementary Medical Professions Ordinance of Hong Kong.
“Registered Chinese Medicine Practitioner”	means a Chinese medicine practitioner (other than the Member himself, his relatives, families and business partners unless approved by Bupa), legally authorised in Hong Kong or any other place where medical expenses are incurred to apply medicine treatment in Chinese traditional approach and having qualifications at least equivalent to those of a Chinese medicine practitioner registered pursuant to the Chinese Medicine Ordinance of Hong Kong.

“Registered Dentist”	means any person (other than the Member himself, his relatives, family or business partners unless approved by Bupa), who is legally authorised in Hong Kong or any other place where medical expenses are incurred to render dental services and has qualifications at least equivalent to those of a dentist registered pursuant to the Dentist Registration Ordinance (Chapter 156, Laws of Hong Kong).
“Registered Medical Practitioner”	means a General Practitioner, Specialist or any person (other than the Member himself, his relatives, families and business partners unless approved by Bupa), legally authorised in Hong Kong or any other place where medical expenses are incurred to render western medical and surgical services and having qualifications at least equivalent to those of a medical practitioner registered pursuant to the Medical Registration Ordinance of Hong Kong.
“Specialist”	means a Registered Medical Practitioner approved as such by Bupa or a Registered Medical Practitioner who is registered in the Specialist Register of the Medical Council of Hong Kong or equivalent and qualified to practise specialist care according to the qualified specialty.

## 10) Free Bupa Worldwide Assistance Programme

Bupa (Asia) Limited now offers our valued members international assistance services provided by Inter Partner Assistance (Hong Kong) Limited (“IPA”). When travelling abroad, should any need arise for medical or legal assistance in case of emergency, a comforting voice is only one phone call away. Please call IPA on (852) 2861 9229 who will provide you with 24-hour hotline services 365 days a year. Remember to carry the Worldwide Assistance Programme card with you all the time while travelling abroad.

IPA has more than 37 alarm centres located worldwide with professional staff and medical personnel who can speak your language and provide you with the following Worldwide Assistance Services:

### 1. Medical Assistance

- ◆ **Medical Advice Hotline**  
Member may call IPA's alarm centre for medical advice and evaluation.
- ◆ **Doctor/Hospital Referral**  
Member shall be referred to a medical specialist or medical facility for personal assessment.
- ◆ **Essential Medication/Medical Equipment**  
Upon request from a local attending Registered Medical Practitioner, IPA may, when possible and legally permissible, dispatch at the cost of the Member any essential medicine and/or medical equipment required for the Member which is not locally available.
- ◆ **Dispatch of Registered Medical Practitioner**  
In the event of an emergency which either the Member cannot be adequately assessed by telephone, or the Member cannot be moved and local treatment is unavailable, IPA may send an appropriate medical practitioner.
- ◆ **Medical Evacuation (Unlimited Cover)\***  
If the Member suffers from bodily injury or sudden illness such that IPA's medical team and the attending Registered Medical Practitioner recommend Hospital Confinement / in-patient treatment in another medical facility where the Member can be suitably treated, IPA may arrange and pay for necessary transportation expenses for:
  - (a) the transfer of the Member into the nearest medical facility more appropriately equipped for the particular medical condition, or
  - (b) the direct repatriation if his/her medical condition permits such repatriation.  
The medical team and attending Registered Medical Practitioner may determine the necessary arrangements according to the circumstances.
- ◆ **Repatriation after Treatment (Unlimited Cover)\***  
Following the medical evacuation and if medical treatment is necessary, IPA may repatriate the Member to an appropriate medical facility in his/her country of residence by scheduled airline flight (on economy class) or any other appropriate means of transportation. Any decision on such repatriation shall be made jointly and exclusively by both the attending Registered Medical Practitioner and IPA's alarm centre.

- ◆ **Deposit Guaranteeing of Hospital Admission**  
In case of hospitalisation duly approved by both the attending Registered Medical Practitioner and IPA's doctor and the Member is without means of payment of the required Hospital admission deposit, IPA may guarantee or provide such payment up to HK\$39,000. The Member will be required to repay any sum advanced and the costs of this service within forty-five (45) days (without interest). IPA will require valid credit authorisation from the Member or his/her representative, prior to advancement of funds for such admission.
- ◆ **Medical Monitoring**  
IPA may monitor a Member's condition during the Member's Hospital Confinement / in-patient treatment abroad and may keep the Member's employer/family informed.
- ◆ **Compassionate Visit**  
IPA may arrange and pay for the cost of an economy round trip transportation plus accommodation expenses up to HK\$16,000 for a person chosen by the Member, or a relative if the Member is unable to choose due to his/her condition, to join him/her if the Member has been in Hospital Confinement / in-patient treatment abroad for more than seven (7) consecutive days.
- ◆ **Additional Travel and Accommodation for Travelling Companion**  
IPA may arrange and pay for the additional travel and accommodation expenses incurred by a Member's travelling companion related to an incident requiring medical evacuation of this cover provided that such expenses shall not exceed HK\$15,000 for any one Member in any one event subject to a sub-limit of HK\$2,000 per day.
- ◆ **Return of Unattended Dependant Child(ren) to Country of Residence\***  
If any of the Member's travelling dependant child(ren) up to age eighteen (18) or age twenty-three (23) if in full time education, is left unattended by reason of the Member's Hospital Confinement / in-patient treatment, IPA may organise and pay for the return of child(ren) (on economy fare basis) to the Member's country of residence.
- ◆ **Hotel Room Accommodation for Convalescence**  
IPA may arrange and pay for reasonable hotel for convalescence, up to HK\$1,950 per day for a maximum of four (4) consecutive days, immediately after Member's discharge from the Hospital, and if deemed Medically Necessary by attending Registered Medical Practitioner and IPA's doctor.
- ◆ **Transportation for Return of Member to Original Work Site\***  
Following a Member's evacuation or repatriation by IPA within a one (1) month period, IPA may upon the Member's request arrange and provide a one-way economy air transportation to return the Member to the original work location. Member assumes the responsibility for the decision of whether or not he/she returns to work. Member is responsible for obtaining any medical releases to determine his/her suitability to travel or not, or to resume work or not. The decision and the results thereof are solely the responsibility of the Member and/or the Member's attending Registered Medical Practitioner. IPA is not involved in such decisions.

- ◆ **Repatriation of Mortal Remains/Ashes (Unlimited Cover)**  
Upon the death of a Member, IPA may arrange and pay for the repatriation of the Member's body or ashes to the Member's country of residence for burial.
- ◆ **Unexpected Return to the Country of Residence\***  
In the event of the death of a Member's close relative in his/her country of residence while he/she is travelling overseas (excluding the case of immigration) that necessitates an unexpected return to his/her country of residence, IPA may arrange and pay for the cost of a scheduled airline ticket (economy class) for the return of the Member.
- ◆ **Additional Hospital Benefit after a Medical Evacuation and Repatriation back to Hong Kong (provided by Bupa)**  
If benefits payable under the Hospital and Surgical Benefit and Supplementary Major Medical Benefit are exhausted, eligible medical expenses for treatment during hospitalisation in Hong Kong immediately following the repatriation of this cover are covered up to a further HK\$120,000.

\* Member (and/or his/her travelling companion if applicable) shall surrender unused return tickets to IPA if IPA arranges new tickets or transportation for them.

## 2. **Travel and Pre-trip Assistance**

- ◆ **Pre-trip and Travel Information**  
Member may contact IPA to obtain the following information before starting or during his/her journey:
  - Updated immunisations and vaccinations requirements and needs.
  - Weather, exchange rates, banking days, language, passport and visa requirements.
  - Airport taxes or customs requirements.
  - Arrangement of interpreter services or children escort.
  - Transmission of urgent messages for medical reasons.
- ◆ **Assistance on Luggage Retrieval**  
In the event of loss or misrouting of the Member's luggage by a common carrier, IPA may liaise with the relevant entities such as but not limited to airline companies, customs officials, and will organise the dispatch of such luggage, if recovered, to such place as the Member may direct.
- ◆ **Emergency Rerouting Arrangements**  
IPA may assist the Member in reorganising his/her flight schedule should an emergency oblige him/her to alter his/her original plan.
- ◆ **Administration Assistance of the Loss of Travel Document**  
IPA may provide the Member with the necessary information regarding the formalities requested by local authority in order to obtain the replacement of such lost or stolen documents.



◆ **MedPass Service**

If a Member suffers from bodily injury or sudden illness and needs to be hospitalised in The People's Republic of China ("PRC") for emergency medical treatment, the Member may visit the nearest Hospital under IPA's China Hospitals Network ("MedPass Network"). Upon presenting the valid Bupa Worldwide Assistance Programme Card and travel document, the Hospital will provide medical treatment without requiring admission deposit directly from Member up front. IPA shall provide the Hospital with the relevant guarantee of deposit for Hospital admission. The Member shall fully and directly settle the medical expenses including the Hospital admission deposit guaranteed by IPA when the Member is discharged from Hospital. IPA will not pay for any expenses incurred.

**3. Legal Assistance**

◆ **Legal Referral**

IPA may provide the telephone numbers and addresses of the lawyers and solicitors firms.

◆ **Legal Assistance**

In the event of an accident occurring in a situation not related to the work, business, profession or employment of the Member, IPA may:

- (a) provide for the defence of the Member in legal proceedings against him/her for civil liability to the Civil Laws in force in the country, and
- (b) conduct proceedings in order to obtain an indemnity from an identified third party for the Member following personal injury and/or damages to the Member's personal belongings if such damages are estimated to be in excess of HK\$5,000.

In all such cases, the counsel and/or lawyer appointed by IPA shall act in a legal capacity for the Member without any recourse to, responsibility of, or indemnification by IPA by reason of its appointment of counsel and/or lawyer. The counsel and/or lawyer's fee will be settled by IPA up to a limit of HK\$40,000.

◆ **Advance of Bail Bonds**

IPA may deposit up to HK\$40,000 on behalf of the Member as the security required from him/her in order to guarantee the payment of the fees for the procedures in the event of the Member being detained by the relevant local authority following a road accident. No deposit shall be made by IPA for covering the civil liabilities, fines or personal indemnities to be paid by the Member and/or the release of the Member. The deposit made by IPA shall be considered as a loan made by IPA to the Member and should be fully repaid by the Member to IPA within thirty (30) days of such advance. This advance of bail bond excludes any claim related to professional and/or criminal situations, as well as any claim arising out of the driving of any motor vehicle.

**4. Local Assistance - only available in Hong Kong**

- ◆ IPA may assist the Member to arrange or provide the name, telephone number and address of the service provider for baby-sitting and/or private nursing and/or temporary domestic helper service, licensed technician to repair the failure of his/her electricity supply system or a locksmith to open the door or solve relevant problems.

## 5. **General Exclusions**

### ◆ **Excluded Cases**

Services and assistance under this cover shall not be available with respect to bodily injury or sudden illness of the Member arising from:

- Pre-existing Conditions and any illness the symptoms of which would cause an ordinary prudent person to seek diagnosis, care or treatment before the Member's Coverage Commencement Date, or a condition for which medical advice or treatment was recommended by a medical practitioner before the Member's Coverage Commencement Date.
- Any services rendered without the authorisation and/or intervention of IPA.
- Childbirth, pregnancy or any complications within three (3) months from delivery date notwithstanding that such event may have been accelerated or induced by Accident.
- Bodily injuries arising directly or indirectly as a result of participation in any professional or competitive sports, water sports, winter sports, racing, rallies, potholing, rock climbing or mountaineering normally involving the use of ropes of guides, parachuting or martial arts.
- Costs, which would have been payable if the event giving rise to the intervention of IPA, had not occurred.
- All other exclusions of the Member's medical insurance contract.
- The benefits mentioned apply worldwide outside country of residence unless specified otherwise.
- The benefits will become ineffective when Member's medical insurance contract is terminated for any reason.

### ◆ **Force Majeure**

Bupa and IPA shall not be held responsible for delays or failures in providing assistance caused by any strike, war, invasion, act of foreign enemies, armed hostilities (regardless of a formal declaration of war), civil war, rebellion, insurrection, terrorism, political coup, riot and civil commotion, administrative or political impediments or radioactivity or acts of God or any other event of force majeure which prevents IPA from providing such assistance services.

*Note: Bupa is not liable for any services provided by IPA under the Free Bupa Worldwide Assistance Programme.*

## 11) Your personal data

1. Keeping your personal data confidential is very important to us. From time to time, it may be necessary for Bupa to collect personal information relating to you or your dependant including without limitation your or your dependant's name, identity card number (and copy of identity card), or passport number (and copy of passport), contact information, health and medical information and financial information ('Personal Information') in connection with the provision of health insurance services or the processing of health insurance claims (including where relevant, credit information and claims history). Failure to supply such Personal Information will result in Bupa being unable to process/provide insurance products/ services and other related services to you.
2. Any Personal Information collected or held by Bupa, whether contained in the application form or obtained in any claim processing procedure or otherwise from time to time may be used by Bupa only for the purposes of:
  - (a) processing the application and providing subsequent services;
  - (b) processing any claims analysis and/or medical or other insurance-related checks;
  - (c) provision and design of insurance products and services of Bupa;
  - (d) detecting and preventing fraud (whether or not relating to the policy issued in respect of any application or claim);
  - (e) data matching, statistics and research reasonably incidental to or related to the insurance products and/or services provided by Bupa;
  - (f) communication with you or your dependants in relation to any of the purposes set out in Part 2 of this section
  - (g) enabling an actual or proposed assignee, transferee, participant or sub-participant of all or a substantial part of Bupa's rights or business to evaluate the transaction intended to be the subject of the assignment, transfer, participation or sub-participation; and
  - (h) making disclosure to satisfy any applicable legal or regulatory requirements.
3. Such Personal Information may be transferred for the purposes as specified in paragraph 2 of this section to any of the following classes of transferees (within or outside Hong Kong): any company within the Bupa group of companies, any insurance intermediaries, any reinsurance companies authorised by Bupa, healthcare professionals and hospitals, your employer, any agents, contractors or third party service providers who provide administrative, telecommunications, computer, payment, data processing or storage, printing, research or other services to Bupa in connection with the operation of Bupa's business (including without limitation insurers, banks, lawyers, accountants, claims investigators, debt collection agencies, data processing companies, fraud prevention agencies, organisations that consolidate claims and underwriting information for the insurance industry, research agencies and professional advisors), any actual or proposed assignee, transferee, participant or sub-participant of all or a substantial part of Bupa's rights or business; any person to whom Bupa is under an obligation to make disclosure under the requirements of any law, rules, regulations, codes of practice or guidelines binding on Bupa including, without limitation, any applicable regulators, governmental bodies, industry recognised bodies, credit reference agencies, the Courts, and where otherwise required by law.
4. You shall have the right to access and request correction of your Personal Information held by us. You can contact the Data Protection Officer of Bupa (Asia) Limited at 6/F, Tower 2, The Quayside, 77 Hoi Bun Road, Kwun Tong, Kowloon, Hong Kong. If you have any questions, please contact our Customer Care helpdesk at (852) 2517 5388.

## 1) 參加資格

年齡為 65 歲以下的全職僱員均可參加本計劃。

如本計劃提供家屬保障，則你的家屬亦可參加本計劃。家屬包括：

- 你的合法配偶，年齡須為 65 歲以下；及
- 你的合法未婚子女，年齡須介乎出生後 15 日至 17 歲（或 18 歲至 22 歲若能在保柏要求時出示有效證明之全職學生）。

## 2) 你的保障及會員卡

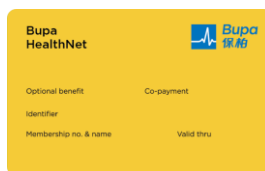
你已獲發一張「保柏網絡醫療卡」。在醫療網絡內使用此卡，你可免除索償手續。有關保障摘要及保障金額，請參閱保障金額表。請參閱此會員指引其他內容，以便了解更多保障及服務細則。如欲了解合約條文，請聯絡你的人力資源部。

假如你享有門診保障，你將同時享有「網絡保障」及「非網絡保障」，目的是為你提供最具彈性、最方便及最高成本效益之醫療服務。

- (a) 「網絡保障」為你提供最完善之醫療網絡設施，並全數賠償合資格的醫療費用。
- (b) 「非網絡保障」讓你自由選擇你信賴之醫生。你只須先繳付所有醫療費用，然後辦理簡單之索償手續（請參閱項目 6），於賠償審核完畢後，我們會向你賠償合資格的醫療費用。

### 使用保柏網絡醫療卡支付門診醫療費用

免費之保柏網絡醫療卡  
為你帶來無限方便



要享有全數賠償，你可於港澳任何一間網絡診所及診斷中心出示你的「保柏網絡醫療卡」及轉介信（如需要），以繳付合資格之門診開支。但切記在指定之情況下，你必須獲得保柏之初步保障審核確認（請參閱項目 5）。若你屬計劃 6、7、8 或 9 之會員，你每次求診於網絡內之普通科醫生、專科醫生、物理治療師或註冊中醫師時，必須支付保障金額表內所述之自負費用。

### 你的保柏網絡醫療卡或因以下原因不被接納

- 不受保障之治療或項目（請參閱項目 8）
- 接受專科治療、物理治療、診斷影像或化驗時不能出示所需之有效轉介信（皮膚科、家庭醫學科、婦科、眼科、骨科、耳鼻喉科、小兒外科、兒科及精神科則除外）
- 未能出示所需的保柏初步保障審核確認信

## 視像診症服務

如你有網絡門診保障，你可憑合資格醫療卡享用視像診症服務，安坐家中讓我們指定的網絡醫生為你進行視像診症。只有合資格的醫療費用方可獲得保障，任何藥物運費均不獲賠償。詳情請瀏覽[www.bupa.com.hk/vc](http://www.bupa.com.hk/vc)。

## 遺失及退還保柏網絡醫療卡

- 若你的「保柏網絡醫療卡」遺失或被盜竊，必須於 24 小時內通知你的人力資源部，於第一次遺失後，我們會免費補發新卡，其後之補發將會收取每張港幣 100 元之手續費
- 若你已不合資格成為此計劃之會員，你必須於離職前的最後一個工作天或之前退還你的「保柏網絡醫療卡」予你的人力資源部

## 差額

賠償差額大部分是由於你的合資格醫療開支超出保障上限或有關費用並不屬於保障範圍之內。你必須於收到差額通知書後 14 天內將差額繳清。

## 3) 有關內窺鏡和病毒性疣及皮損程序的保障

### 適用於計劃 1 – 3

#### 如屬於香港進行的日症或診所手術

於診所或日症中心進行內窺鏡或病毒性疣及皮損程序後，請直接向服務供應商繳付你的費用，然後依循此指引「申請賠償」部分所示的步驟提交索償申請。

你的合資格費用將於「日間內窺鏡程序保障」和「日間病毒性疣及皮損程序保障」下賠償，並以非網絡供應商之每位會員最高賠償額為限。

請注意，「附加醫療保障」並不適用於日間內窺鏡或病毒性疣及皮損程序。

#### 如屬於香港進行的住院程序

就需要過夜的住院期間進行的內窺鏡和病毒性疣及皮損程序，保柏將在作出賠償前審核其是否屬醫療必需。

- 如住院屬醫療必需，你的合資格費用將於「住院及手術保障」A1 - A9 項及「附加醫療保障」（如適用）下賠償，並以每位會員最高賠償額為限。
- 否則，你的索償（如合資格）只可於「日間手術保障」下賠償，並以非網絡供應商之每位會員最高賠償額為限，「附加醫療保障」將不適用。

如於香港以外的地方進行內窺鏡和病毒性疣及皮損程序，你的合資格費用將於「住院及手術保障」A1 - A9 項及「附加醫療保障」（如適用）下賠償。

有關受「日間手術保障」所保障之內窺鏡和病毒性疣及皮損程序的完整列表，請於保柏客戶服務網站 myBupa 上的會籍文件頁面查閱。此列表可能會不時更改。

## 適用於計劃 4 – 9

### 如屬於香港進行的日症或診所手術

內窺鏡和病毒性疣及皮損程序必須獲取初步保障審核。你的合資格費用將根據你所選擇的供應商類別而有不同的賠償方式：

- 如於網絡服務供應商由網絡醫生進行有關程序，你的合資格費用可獲全數賠償及享免找數服務。請在獲得保柏的初步保障審核後，於網絡服務供應商使用「保柏網絡醫療卡」以享免費找數服務。
- 如於非網絡供應商進行有關程序，你的合資格費用將於「日間內窺鏡程序保障」和「日間病毒性疣及皮損程序保障」下賠償，並以非網絡供應商之每位會員最高賠償額為限。你須預先申請初步保障審核，並直接向服務供應商繳付你的費用，然後依循此指引「申請賠償」部分所示的步驟提交索償申請。

請注意，「附加醫療保障」並不適用於日間內窺鏡或病毒性疣及皮損程序。

如你未有就日症或診所手術取得保柏的初步保障審核，你將不會獲得任何保障及醫療費用賠償。

### 如屬於香港進行的住院程序

就需要過夜的住院期間進行的內窺鏡和病毒性疣及皮損程序，將視乎你有否獲取初步保障審核而有不同的賠償方式：

- 如已獲取保柏的初步保障審核，你的合資格費用將於「住院及手術保障」A1 - A9 項及「附加醫療保障」（如適用）下賠償，並以每位會員最高賠償額為限。
- 否則，你的索償（如合資格）只可於「日間手術保障」下賠償，並以非網絡供應商之每位會員最高賠償額為限，「附加醫療保障」將不適用。

### 索取初步保障審核的步驟

如你選擇非網絡供應商，你必須在進行內窺鏡或病毒性疣及皮損程序前，依循以下步驟獲取初步保障審核：

1. 於保柏網站或 myBupa 下載「初步保障審核表格」，或致電我們的客戶服務專線索取。
2. 請自行填妥第一部分，及請你的主診醫生填妥第二部分，請與你的主診醫生商量選擇入住的私家醫院或日症中心。
3. 請將已填妥的表格電郵、傳真或郵寄給我們。
4. 如果你的初步保障審核成功獲得批核\*，我們會以電郵或電話形式通知你，或按你的要求向你寄出「初步保障審核確認/付款保證信」。

如於香港以外的地方進行內窺鏡和病毒性疣及皮損程序，你的合資格費用將於「住院及手術保障」A1 - A9 項及「附加醫療保障」（如適用）下賠償。

有關受「日間手術保障」所保障之內窺鏡和病毒性疣及皮損程序的完整列表，請於保柏客戶服務網站 myBupa 上的會籍文件頁面查閱。此列表可能會不時更改。

\* 當保柏收妥所有所需資料及已簽署的申請表後，約兩個工作天即可完成初步保障審核。

#### 4) 需有醫生轉介信之診治

- 住院專科醫生巡房（病理學家、放射學家及物理治療師在住院期間所提供之服務則除外）
- 由物理治療師、脊醫或專科醫生提供的治療（如有門診保障，皮膚科、家庭醫學科、婦科、眼科、骨科、耳鼻喉科、小兒外科、兒科及精神科專科醫生則除外）
- 診斷影像或化驗（如有門診保障）（保柏接受由註冊西醫書面建議之所有影像及化驗，而註冊中醫或脊醫\* 書面建議只限 X 光及化驗）
- 私家看護服務

因診斷相同之病症或有關之併發症所簽發的醫生轉介信，有效期為發出日起計 6 個月。若病症被診斷為無關之病症，則需另一轉介信。

\* 部分診斷影像中心或不接受由註冊中醫及／或脊醫轉介的某些 X 光及化驗。如有疑問，請直接聯絡有關中心。

#### 5) 需要初步保障審核的情況

若要享有「網絡保障」下之全數賠償，你必須在以下情況，取得保柏之初步保障審核確認：

- 之診斷影像或化驗（按保柏供應商指引之要求）
- 由網絡註冊西醫轉介之專科治療，但該專科未列於網絡內

透過初步保障審核之過程，你可更了解網絡註冊西醫如何為你提供最有經濟效益及最適當之治理。此審核亦能助你於接受醫療服務前確定保障範圍。

請你要求網絡註冊西醫替你填寫初步保障審核表格並於簽署後傳真給我們。當你的初步保障審核申請獲批核後，保柏會以電郵或電話形式通知你，或按你的要求向你寄出付款保證信。我們亦會將此信傳真到你的特選醫院或日症中心。請注意，保障有效與否將以保柏收到所有索償表格、收據及有關之醫療報告後所作之最後批核為準。

若於我們的辦公時間以外申請初步保障審核，該審核可於入院或治療日之下一個工作日補辦，但必須符合其他條件（例如必須由網絡註冊西醫轉介及診治）。

若初步保障審核未能按規定完成，合資格之醫療費用將根據「非網絡保障」賠償。

## 6) 申請賠償

若你以「保柏網絡醫療卡」繳付醫療開支，你無須提出索償。診所或診斷中心會直接向我們提交索償文件作審批。

若你先自行繳付醫療費，請保留所有收據正本並連同轉介信（如需要）及填妥之賠償申請表寄回保柏。賠償申請表可於你的人力資源部或透過保柏 24 小時電話傳真服務專線 (852) 2517 5388 索取，或於保柏網站[www.bupa.com.hk](http://www.bupa.com.hk)下載。你亦可使用 myBupa 於網上遞交索償。

為了讓我們更快捷準確地處理你的索償，請提供詳盡資料並儘快提交索償申請，切記所有賬單及收據上均須列有：

- 診治日期
- 病人姓名
- 服務供應商姓名／名稱及地址
- 病症及診治詳情（例如藥方、手術名稱等）
- 收費類別及項目
- 中藥藥方及購買相同處方藥物之次數（適用於註冊中醫診治）
- 服務供應商之蓋印及簽署

請注意，所有索償文件必需為正本，副本恕不被接納。

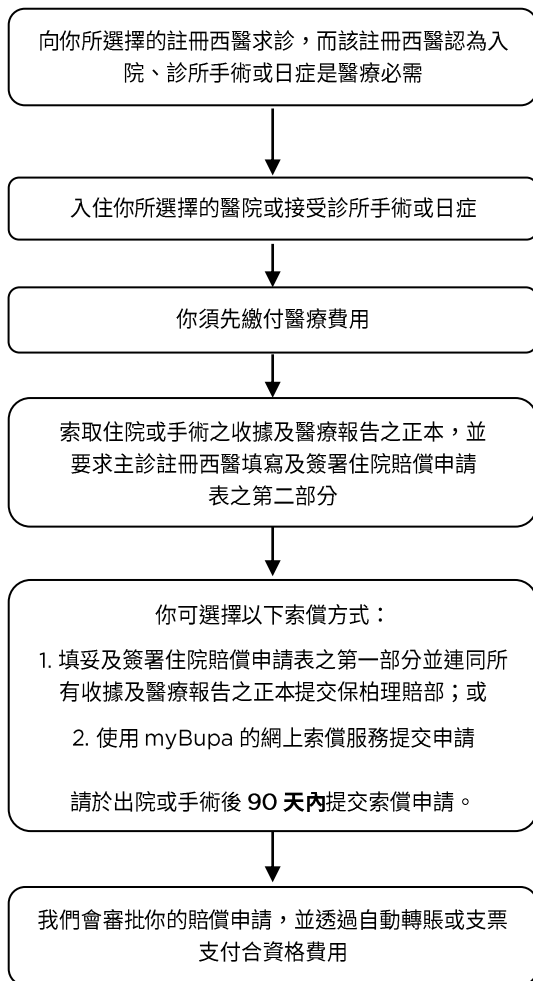
如你使用 myBupa 的網上索償服務，請上載索償文件正本的相片，並在遞交賠償申請後的 6 個月內保留所有文件的正本。若你未能提供文件正本，你於網上遞交賠償申請的服務可能會受影響。

索償必須於診治或出院後 **90 天（曆日）內**提交，否則賠償可被拒絕。賠償批核後，將透過自動轉賬或支票以港元支付。若對賠償有任何查詢，請即致電**保柏客戶服務專線 (852) 2517 5388**。

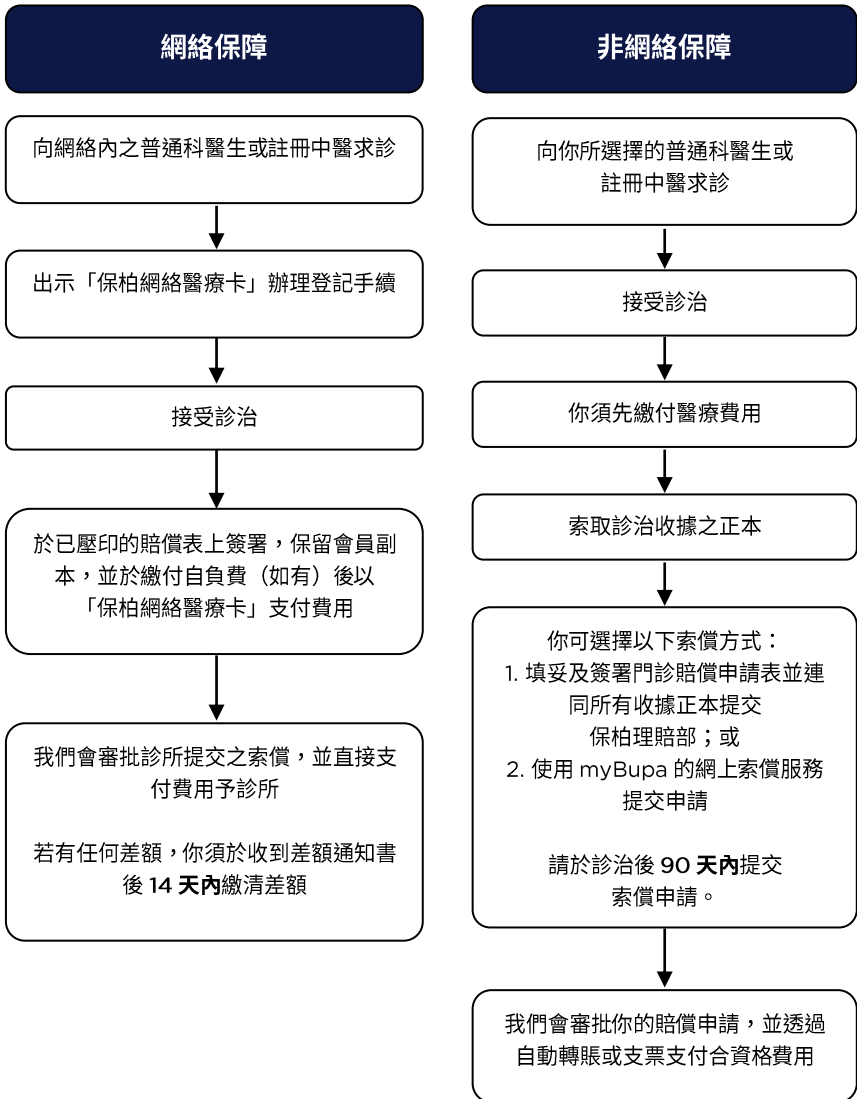
索償程序已詳列於隨後部分。



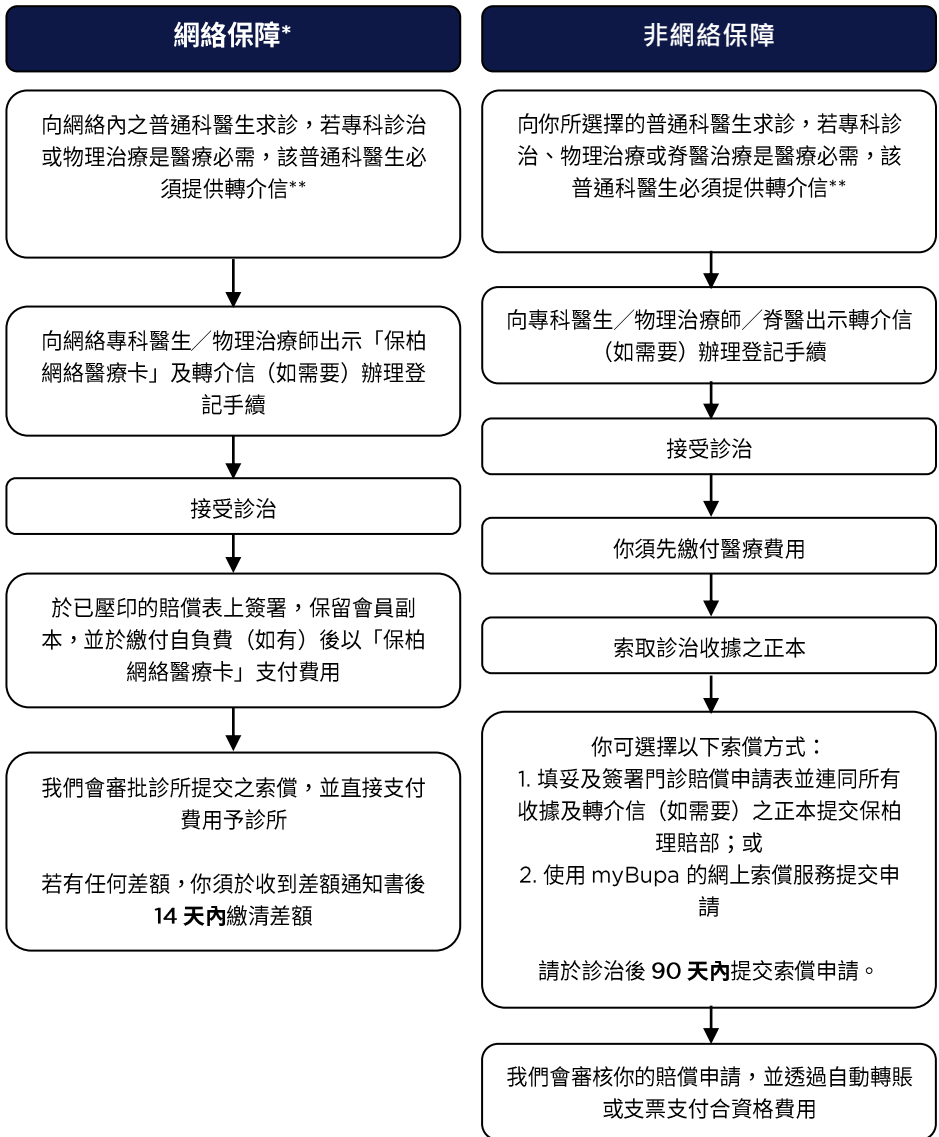
## 索償住院及手術保障的步驟



## 索償門診保障的步驟 – 普通科醫生或註冊中醫（如適用）



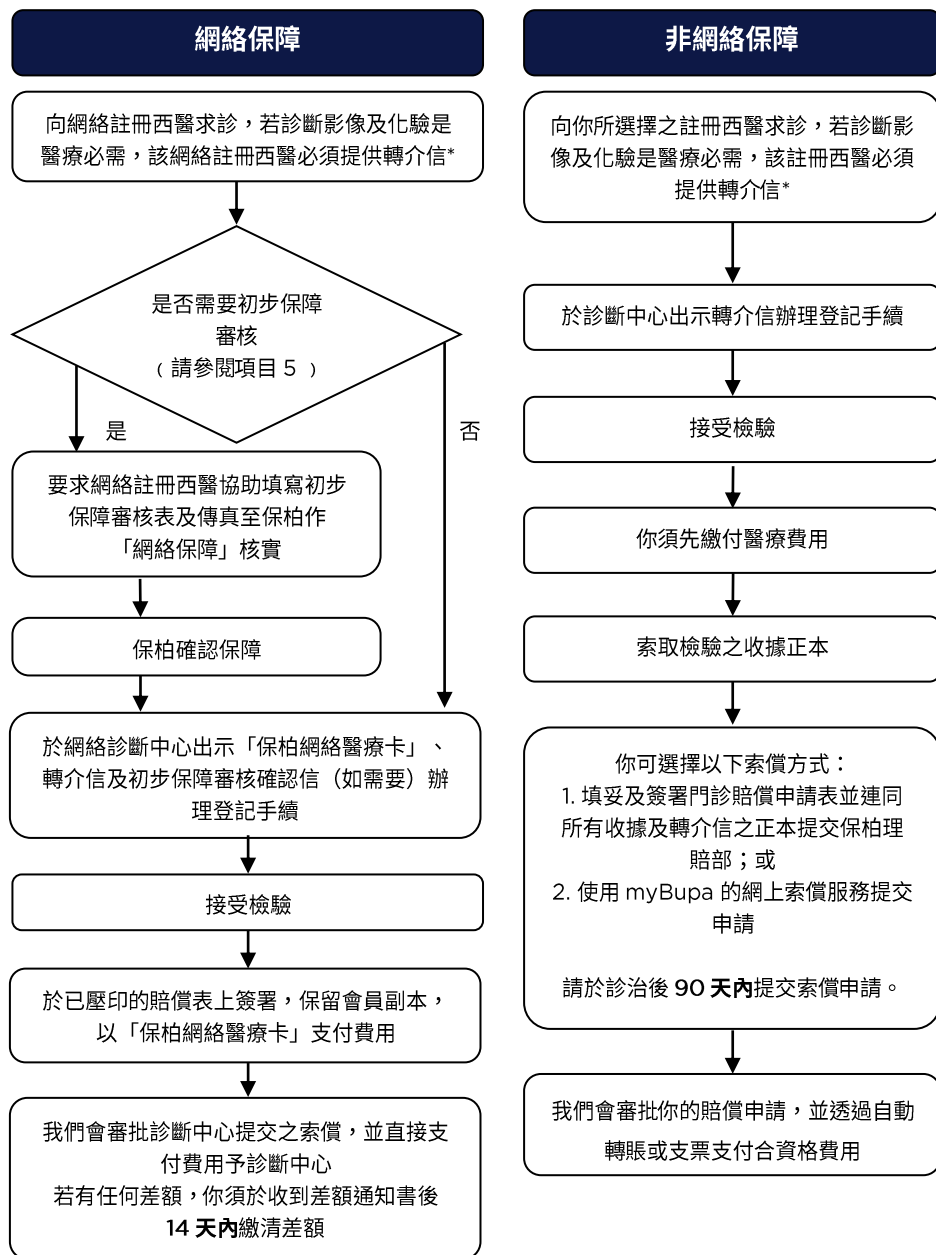
## 索償門診保障的步驟 – 專科醫生／物理治療師／脊醫（如適用）



\* 如經由網絡醫生轉介專科治療，而有關專科並不列於網絡內，你必須取得保柏初步保障審核確認。你亦須於繳付專科診治費用後，填妥門診賠償申請表，並連同此確認信及所有收據正本於診治後 **90 天內**呈交保柏理賠部，方可享有「網絡保障」。

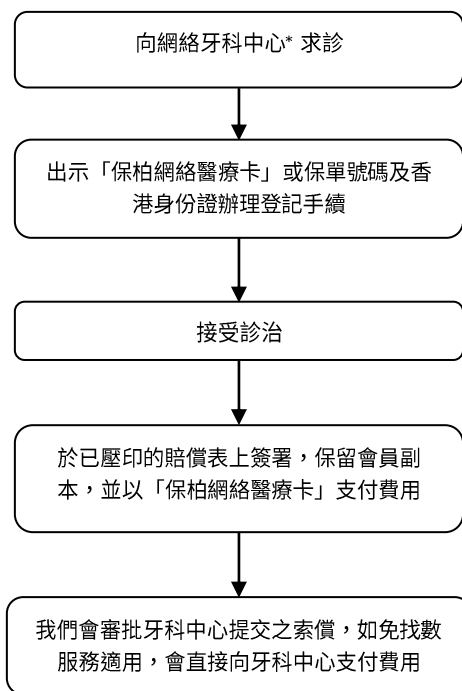
\*\* 在網絡保障及非網絡保障下，皮膚科、家庭醫學科、婦科、眼科、骨科、耳鼻喉科、小兒外科、兒科及精神科的專科診症無須轉介信。

## 索償門診保障的步驟 – 診斷影像及化驗 (如適用)



\* 保柏亦接受由註冊中醫及脊醫發出用於 X 光及化驗的書面轉介。然而，部分診斷影像中心或不接受由註冊中醫及／或脊醫轉介的某些 X 光及化驗。如有疑問，請直接聯絡有關中心。

## 使用牙科保障的步驟 (如適用)



- \* 網絡牙科中心指由保柏委任的牙科中心網絡以提供保障金額表上「網絡牙科中心保障」所列的牙科服務項目。網絡牙科中心地點包括金鐘、銅鑼灣、鰂魚涌、尖沙咀、將軍澳、沙田、青衣、東涌等。請登入保柏會員服務網站 myBupa 查閱最新的牙科中心地址。此名單會不時更改。有關診症時間請向個別網絡牙科中心查詢。

## 7) 常見問題

### 1. 此計劃會否賠償我在香港以外的醫療費用？

會。你的保障範圍屬 24 小時世界性，所以無論你身處何方，你所有合資格醫療費用均獲保障。凡以港幣以外任何貨幣結算的醫療賬單，我們將會根據接受治療或出院當日的外幣兌換率，折算為港幣辦理。

### 關於「住院及手術保障」、「附加醫療保障」

### 2. 若我於醫院的日症房或診所進行小型手術而無須入住醫院，有關的醫療費用可否於此計劃得到賠償？

可以。所有合資格的日症或診所手術費用將於此計劃之住院及手術保障下賠償。

### 3. 若我入住醫管局轄下的醫院，我須要求醫生填寫賠償申請表的第二部分嗎？

如你入住醫管局轄下的醫院，而有關收據、醫療報告、出院證明紙或病假紙已提供病症及診治詳情，則無須要求醫生填寫賠償申請表的第二部分。

### 4. 我可如何享有「第二索償現金津貼」？

如你先向其他保險公司提交住院索償，然後再向保柏索償，便可獲得「第二索償現金津貼」。此保障將就會員住院當天被醫院收取實際住房及膳食費的情況下，按每日住院支付賠償。

你無須另行提交指定的索償申請表以享有「第二索償現金津貼」，當你提交住院賠償申請表時，緊記勾選第一部分3a節「你是否已透過保柏其他合約或其他保險公司 / 組織提出索？」一欄，並連同核實副本收據及有關保險公司的賠償結算通知書一併提交。若你的住院符合「第二索償現金津貼」的賠償資格，保柏將作出賠償。

### 5. 如何使用此計劃的附加醫療保障？

若你須於香港入住醫院或進行日症或診所手術，但你的住院及手術保障（項目 1-9）已經耗盡，我們會對你任何超出按住院及手術保障下 A1 - A9 項（不論超出最高賠償額或最多日數之合資格醫療費用作 8 成賠償至你的附加醫療保障最高保障金額。此保障亦適用於由註冊西醫證明為醫療緊急之外地住院或手術。請注意，此保障並不包括入住醫院的總統套房／貴賓房／豪華房。若病房升級，賠償計算將加入有關調整值（請參閱保障金額表）。然而，有關調整值及以上住房級別限制不適用於在緊急情況接受治療的情況下因床位短缺而須入住較高住房級別，或因隔離原因而須入住指定住房級別的情況。

## 關於門診保障（如適用）

6. 此計劃會否賠償沒有診症的純藥費？  
（只適用於有門診保障之會員）

不會。此計劃只賠償連同診症費之處方藥物費用（如合資格）。

7. 若我向專科醫生求診但沒有所需的轉介信，可否得到賠償？  
（只適用於有門診保障之會員）

若你未能提供有效之專科門診轉介信，我們將根據你的普通科門診保障限額賠償合資格的專科門診費用（皮膚科、家庭醫學科、婦科、眼科、骨科、耳鼻喉科、小兒外科、兒科及精神科專科治療則無須轉介信）。

8. 若我接受物理治療或脊醫之門診治療但沒有所需的轉介信，可否得到賠償？  
（只適用於有門診保障之會員）

若你未能提供有效之物理治療或脊醫門診治療的轉介信，則有關的物理治療或脊醫治療將不獲賠償。

9. 如申請中醫師保障或跌打醫師保障賠償（如適用），我須要提交甚麼文件？

如申請中醫師保障或跌打醫師保障賠償，請將收據正本和處方正本連同已填妥之門診賠償申請表一併提交，你亦可透過 myBupa 的網上索償服務提交申請。

## 關於其他自選保障（如適用）

10. 我可如何享用微笑護齒保障（如適用）？

如你享有牙科保障，你在指定網絡牙科中心接受補牙、簡單脫牙等牙科治療時可享全數賠償。你必須出示「保柏網絡醫療卡」或保單號碼及香港身份證以作核實及紀錄，以享免找數及全數賠償服務。請登入myBupa查閱最新的網絡牙科中心名單。

## 其他

### 11. 我想在團體醫保上更添保障，有甚麼選擇呢？

你可在人生不同階段（如團體醫保續保時、離職前後／退休前），加入「保柏易增值醫療保障計劃」，享有與現有團體計劃相同住房級別的「住院及手術保障」，為自己更添保障。不論健康狀況如何，均無須核保及保證接受申請<sup>1</sup>，而且所有於團體計劃中受保的疾病均可在保柏易增值內獲終生保障<sup>2</sup>。

你可於以下任何一段時間投保<sup>3</sup>：

1. 加入保柏團體醫保計劃的 60 天內；
2. 保柏團體醫保計劃的合約週年日後 60 天內；
3. 保柏團體醫保計劃終止前或後 30 天內；或
4. 在結婚或子女出生後 30 天內。

若你對「保柏易增值醫療保障計劃」感興趣，請瀏覽[www.bupa.com.hk/VTop](http://www.bupa.com.hk/VTop)或聯絡保柏客戶服務專線。

<sup>1</sup> 詳情請參閱「保柏易增值醫療保障計劃」產品冊子的「投保資格」部分。

<sup>2</sup> 只要你受保於保柏團體醫保及／或保柏易增值合共最少連續 12 個月，所有在你的保柏團體計劃下可獲賠償的已存在病症將於保柏易增值下受到保障，除非該病症於保柏易增值合約內列明為不受保障項目。保柏保證你在保柏易增值下的保障可獲每年續保至終生，只要你符合合約內所列明的續保要求。保柏保留在合約續保時更改保費、保障、條款及細則的權利。你可參閱保柏易增值合約以了解詳情。

<sup>3</sup> 若你所屬的企業參加保柏團體醫保計劃的僱員人數為 2 - 9 人，你只可於離職時（退休除外），在你的保柏團體醫保計劃終止前或後 30 天內投保保柏易增值醫療保障計劃。



## 8) 不受保障項目

我們希望幫助你了解保障範圍。以下是不受保障項目：

1. 已存在病症。
2. 不是醫療必需的治療、醫療服務、藥物或檢驗。
3. 任何在法例下或其他保險計劃內或從其他途徑可獲賠償之治療疾病或損傷費用，除非此等費用未能在該等補償、保險計劃或途徑獲得賠償。
4. 在水療中心、天然治療中心、康復院、療養院、老人院或類似機構所提供之住宿、護理或服務的費用。
5. 手術性或非手術性整容或整形治療（會員因意外而受傷，並於意外後一年內接受醫療上必需的服務則不屬此項）、毛髮礦物質含量分析、健康補品或體重控制（經保柏批准則除外）的費用。
6. 預防性措施，包括但不限於常規驗血、例行檢驗、預防注射或接種疫苗、聽覺測驗、因視力不正常而引致之治療，包括但不限於常規視力測驗或所需之眼鏡或鏡片費用。
7. 先天性疾病、發育異常或遺傳性疾病。
8. 由保障開始日起首5年內，因感染人體免疫力缺損病毒所引致的治療。
9. 性病及其後遺症。
10. 與懷孕有關的治療，包括診斷性產科檢查、生育、墮胎或小產；與男女任何一方的節育、絕育或變性有關的治療；由於不育而直接或間接進行的治療，包括體外受孕，任何非自然受孕或人工受孕；與性功能失常有關之治療，包括但不限於陽萎、不舉及早泄（不論任何原因導致）。
11. 誤用或服用過量藥物或受酒精影響、蓄意自傷身體或意圖自殺而直接或間接引致的治療。
12. 任何因參與犯罪活動而引致之疾病或損傷。
13. 另類治療，包括但不限於中藥治療、針灸、穴位按摩、推拿、催眠治療、羅爾夫按摩療法、按摩治療、香薰治療（受門診保障下的「中醫師保障」或「跌打醫師保障」涵蓋則除外）。
14. 老年性痴呆（包括阿茲海默氏症）、帕金森病。
15. 心理病或精神病症，包括但不限於精神病、神經機能病、抑鬱、焦慮、神經性厭食、精神分裂、行為失常、譫妄症、失眠、神經衰弱等直接或間接引致的治療（計劃內已包括之保障除外）。

16. 購買或使用輔助器具，包括但不限於眼鏡、助聽器及其他設備例如輪椅、柺杖的費用。
17. 任何與牙齒或牙肉疾病有關的治療或檢查，受牙科保障涵蓋或因意外引致緊急入院治療或住院脫除阻生智慧齒則除外。但不包括該住院後之跟進治療（受微笑護齒保障涵蓋則除外）。
18. 因戰爭、入侵、外敵行動、開戰（不論是否已宣戰）、內戰、叛亂、革命、起義或軍人奪權、恐怖活動等直接或間接引致的治療。
19. 非醫療性服務，包括但不限於客人膳食、收音機、電話、影印、稅項（就醫療服務所徵收的增值稅或商品及服務稅除外）、醫療報告等費用。
20. 因不符合「良好及謹慎的醫療標準」的實驗性或未經證實醫療成效的醫療技術或治療程序而招致的費用。
21. 從事或參與海軍、陸軍或空軍任務或任何武裝部隊之行動；或從事或參與任何類形之專業運動。

## 9) 特別詞彙釋義

某些詞彙於「公司僱員健康網」團體醫療保障計劃的合約內有特定的意思，以下為一些重要詞彙的定義。

意外	指外在、突發、強烈及不可預料而可見的事件，此事件是導致身體受傷的唯一原因並且與其他事件無關。
脊醫	指於香港或引致醫療費用的任何其他地方擁有最少等同香港《脊醫註冊條例》下的脊醫資格，並從事藉矯正關節以提供脊骨療法的具法定資格人士（會員本身、其親屬、家人及業務伙伴則除外，除非經保柏批准）。
診所手術	指註冊西醫於診所進行之醫療必需手術而無必要留院，同時該手術須列於外科手術表為診所手術。
先天性疾病	指自出生已存在之醫學異常，不論會員或投保人知道與否。這包括（但不排除在醫學上視為先天性疾病之其他病症）斜視、腦積水、羣丸未降、美克爾氏憩室、扁平足、心間隔缺損及腹股溝斜疝（小腸氣）。
日症	指註冊西醫於診所或醫院日症房可有效地進行之手術、非手術癌症治療及洗腎（如適用於此合約）而留院過夜乃非醫療必需，但該手術須列於外科手術表為日症手術。
發育異常	指相較於同年齡或同發育階段之預期發育情況而出現之發育異常。這些缺陷或殘障出現於18歲之前，並可能預期會不確定的延續下來，從而造成實質上的損害。這些障礙情況包含生物性及非生物性的因素在內。這包括（但不排除醫學上被視為發育異常的其他病症）語言及學習障礙、自閉症及智力遲鈍。
病症	指損傷或疾病，包括所有由同一原因而起的病症及所有由此而起的併發症，除非此傷病與最近一次出院或最近一次診症已相隔90日或以上而期間並沒有進行治療。任何隨後由同一原因而起的病症均視為獨立的病症。
普通科醫生	指在香港醫務委員會以普通科登記或具其他同等資歷的註冊西醫。
遺傳性疾病	指通過基因由父母遺傳給子女的疾病。
醫院	指任何對患病、受傷、或需要藥物治療人士提供醫療照顧的機構，該機構必須有政府批核的醫療設備，包括能進行檢驗、大手術及提供24小時看護服務，並有一位註冊西醫駐診。療養院、護理中心、老人院、濫用藥物或酗酒復康中心（包括位於醫院中的同類型部門）均不計算在內。
住院	指由註冊西醫轉介接受以西方醫療及外科手術服務的醫療必需之住院。根據合約所訂，會員必須在整個入院時段都住在醫院內，而醫院有向會員收取住房及膳食費用。

## 醫療必需

指醫療上必需的治療、醫療服務或藥物：

- (a) 以正常及慣常費用對診斷作出相應及慣常之治療；
- (b) 符合良好及謹慎的醫療標準；
- (c) 就有關診斷或治療所需的；
- (d) 非純為會員、有關註冊西醫、註冊中醫、脊醫、物理治療師、合資格護士、麻醉科醫生、註冊牙醫或任何其他醫療服務供應商提供方便；
- (e) 以最合適之程度向會員提供安全及有效的治療；及
- (f) 住院非純為診斷掃描目的、影像學檢驗或物理治療。

為免存疑，在考慮治療、醫療服務或藥物是否醫療必需時，主診註冊西醫的建議並不是唯一的考慮因素。

在不損害上述的一般性條件的原則下，符合醫療所需條件的住院情況包括但不限於以下例子：

- (i) 會員因急症需要在醫院接受緊急治療；
- (ii) 手術在醫學上需要在全身麻醉下進行；
- (iii) 醫院具備手術或治療程序所需的設備，有關手術或治療程序並不能以日症病人的方式進行；
- (iv) 會員同時發生的傷病屬明顯嚴重；及/ 或
- (v) 考慮到會員的個人情況及會員安全後，所需的醫療服務應在醫院內進行。

就「良好及謹慎的醫療標準」之詮釋，保柏將會考慮以下事項：

- I. 醫療標準為必須經過適當審查的獨立醫學期刊中臨床證明所界定；
- II. 相關專業機構的建議；及
- III. 符合良好醫療守則標準。

## 會員

指在本合約下受保障之僱員及其家屬。

## 非手術癌症治療

指治療癌症的化療、放射性治療、標靶治療、免疫治療及荷爾蒙治療。

## 網絡牙科中心

指由保柏委任的牙科中心網絡以向會員提供保障金額表所列的牙科服務項目，並由保柏支付會員的合資格醫療費。此牙科服務供應商資料目錄由保柏以印刷版或電子版提供並不時進行修訂。

正常及慣常	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。正常及慣常的收費水平由保柏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）以釐定正常及慣常收費 - <ul style="list-style-type: none"> <li>(a) 由保險或醫學業界進行的治療或服務費用統計及調查；</li> <li>(b) 公司內部或業界的賠償統計；</li> <li>(c) 香港政府憲報；及 / 或</li> <li>(d) 提供治療、服務或物料當地的其他相關參考資料。</li> </ul>
手術室	指任何指定並配備進行外科手術或程序的設施，及至少符合香港衛生署署長發出的《日間醫療中心實務守則》或《醫院實務守則》或根據香港法例第 633 章《私營醫療機構條例》規定的任何其他適用的實務守則或規例的要求。
物理治療師	指於香港或引致醫療費用的任何其他地方擁有最少等同香港《輔助醫療業條例》下的註冊物理治療師資格，並從事以運動、人手治療及以機械能、熱能或電能就身體殘疾予以評估及醫治的具法定資格人士（會員本身、其親屬、家人及業務夥伴則除外，除非經保柏批准）。
註冊中醫	指於香港或引致醫療費用的任何其他地方擁有最少等同香港《中醫藥條例》下的註冊中醫資格並從事中藥治療的法定認可中醫或任何人士（會員本身、其親屬、家人及業務夥伴則除外，除非經保柏批准）。
註冊牙醫	指於香港或引致醫療費用的任何其他地方擁有最少等同香港《牙醫註冊條例》（香港法例第 156 章）下的註冊牙醫資格並從事牙科服務的法定認可牙醫或任何人士（會員本身、其親屬、家人及業務夥伴則除外，除非經保柏批准）。
註冊西醫	指普通科醫生、專科醫生或任何人於香港或治療當地擁有最少等同香港醫務委員會法定的西醫資格並提供西方醫療及外科手術服務的人士（會員、其親屬、家人及業務夥伴則除外，除非經保柏批准）。
專科醫生	指保柏承認為專科醫生之註冊西醫或在香港醫務委員會以專科登記的註冊西醫或具其他同等資歷的人士並從事專科治療。

## 10) 免費保柏國際援助計劃

保柏現正為尊貴的會員送上由國際救援（亞洲）有限公司（簡稱「IPA」）提供之國際援助服務。當會員出外旅遊時，請隨身攜帶國際援助計劃卡。若遇上緊急情況需要醫療或法律支援，只須致電卡上所載之電話號碼（852）2861 9229 向 IPA 之 24 小時緊急援助中心求助，即可透過自己熟悉的語言獲得支援服務。

IPA 擁有超過 37 間緊急援助中心遍佈世界各地，並聘用了能操多種國家語言的服務員及專業的醫護人員，為會員提供下列各項國際援助服務：

### 1. 醫療援助服務

#### ◆ 電話醫療建議

會員可致電 IPA 的緊急中心詢問當值註冊西醫有關醫療建議及評估。

#### ◆ 醫生／醫院轉介服務

IPA 可轉介會員至專科醫生或醫院為會員作個人醫療評估。

#### ◆ 必要藥物及醫療器材

若會員所需的必要藥物及／或醫療器材未能於當地取得，在當地主診註冊西醫要求時，IPA 將在可行及法律許可之情況下，運送該等藥物及／或醫療器材到會員身處之地，費用由會員支付。

#### ◆ 遣派註冊西醫

於危急情況如會員未能透過電話得到足夠之醫療建議，或會員不宜走動但當地醫療缺乏下，IPA 可安排適當醫生應診。

#### ◆ 醫療護送（不設上限）\*

若會員身體受傷或患上突發疾病，而 IPA 之醫療隊伍及當值註冊西醫均建議會員在另一醫療機構住院接受所需之適當治療時，IPA 會安排和支付所需交通費用：

(a) 護送會員至最就近的一間備有合適醫療設備的醫療機構；或

(b) 直接運返其居住國家（如情況許可）。IPA 之醫療隊伍及主診註冊西醫會視乎環境而決定所需之安排。

#### ◆ 治療後送返居住國家（不設上限）\*

於接受此保障的醫療護送服務後，如會員須接受治療，IPA 將安排會員乘坐固定班次之航機（經濟客位）或其他合適之交通工具，護送會員返回其居住國家的適當醫療機構。任何有關安排送返居住國家服務之事宜，須由主診註冊西醫及 IPA 緊急中心共同決定。

#### ◆ 墊支住院按金

經會員的主診註冊西醫及 IPA 之醫生共同正式同意，認為會員須要入住醫院，而會員又無法支付住院按金的情況下，IPA 將提供最高達港幣 39,000 元之住院按金或作為該筆住院按金之擔保人，但會員將須在 45 日內清付所墊支的款項及該項服務費用（不須繳付利息）。IPA 在墊支住院按金前會向會員或其代表索取有效之貸款授權。

#### ◆ 跟進病情

當會員身在居住國家以外地方接受住院治療，IPA 將會跟進會員的醫療狀況，並向會員之僱主或家屬匯報最新病況。

#### ◆ 安排家屬前往探望

若會員於外地住院達連續七天以上，IPA 將安排一位會員指定之人士或其親屬（如會員因病未能指示）乘搭客機（經濟客位）前往探望會員，並代其支付來回機票及一般酒店住宿，最高達港幣 16,000 元。

#### ◆ 同行伙伴之額外交通及住宿費

IPA 將安排並支付與會員同行之伙伴因會員發生事故而接受此保障的醫療護送所引致的額外交通及住宿費用，每位會員於每一事故最高可享受有港幣 15,000 元，並以每日港幣 2,000 元為限。

#### ◆ 安排乏人照顧之子女返回居住國家\*

若會員於外地入院而未能照顧其同行之 18 歲或 23 歲（如屬全職學生）以下受供養子女，則 IPA 將安排及支付該名（或多名）子女乘坐客機（經濟客位）返回其居住國家。

#### ◆ 出院後療養住宿

若會員之主診註冊西醫及 IPA 之醫生均認為會員於出院後即時入住當地酒店繼續療養乃醫療必需，IPA 將為會員安排及支付該等合理酒店住宿費用，以每天最高港幣 1,950 元及最多連續 4 天為限。

#### ◆ 安排返回原來工作地點\*

在由 IPA 醫療護送或送返居住國家接受治療後的一個月內，如會員提出要求，IPA 會安排及提供單程經濟客位機票予會員返回原來工作地點。會員須負責決定是否恢復工作，並須負責取得醫生有關文件以證明其是否適合乘坐飛機或恢復工作，而會員及／或其主診註冊西醫須負上此決定之一切責任。IPA 並不牽涉在內。

#### ◆ 遺體或骨灰運送服務（不設上限）

如會員不幸身故，IPA 將安排其遺體或骨灰由身故地方運返其居住國家安葬，IPA 並將支付有關運送費用。

#### ◆ 臨時安排返回居住國家\*

當會員身在海外（不包括移民）而獲悉親人在居住國家身故，並須立即折返其居住國家，IPA 將安排和支付會員乘坐定期航班（經濟客位）返回其居住國家及支付有關的機票費用。

#### ◆ 醫療護送及返港後之額外住院保障（由保柏提供）

若住院及手術保障及附加醫療保障已耗盡，並根據此保障內之「治療後送返居住國家」返回香港後即時入院，合資格之住院費將額外賠償至最高達港幣 120,000 元。

\* 如 IPA 為會員重新安排機票或交通，會員（及／或其同行伙伴，如適用）須把未使用之回程機票交回 IPA。

## 2. 旅遊支援服務

### ◆ 旅遊資料

在旅程之前或期間，會員可致電 IPA 查詢以下資料：

- 最新的免疫及防疫要求及需要。
- 世界各地天氣、貨幣兌換率、銀行工作日、當地語言、護照及簽證要求。
- 機場稅或海關條例。
- 提供傳譯員轉介服務或護送小童服務。
- 因醫療緣故傳遞緊急訊息。

### ◆ 代尋並轉送行李

如會員行李於運送途中遺失或由同一承運商誤運往錯誤路線，IPA 會協助聯絡有關單位如航空公司、海關人員，並安排尋回的行李送返會員指定地方。

- ◆ **緊急行程調配安排**

若緊急事故迫使會員更改其原來計劃，IPA 將會協助會員重新安排其乘坐之飛機班次。

- ◆ **遺失旅遊證件的行政協助**

IPA 將提供會員有關向當地機構補領遺失或被竊證件的手續等資料。

- ◆ **任中橫服務**

倘若會員遇上身體受傷或突發疾病並需要於中華人民共和國（「中國」）入住醫院接受緊急治療，會員可入住在 IPA 之中國醫院網絡（稱為「任中橫網絡」）內最就近之醫院。會員須出示有效的保柏國際援助計劃卡及旅遊證件，醫院便會在無須會員直接支付住院按金的情況下提供治療。IPA 須向醫院提供會員入院所需的按金擔保。會員出院時須直接付清全部醫療費用，包括由 IPA 所擔保之入院按金。IPA 並不會支付任何費用。

### 3. **法律援助**

- ◆ **提供法律轉介**

IPA 可提供各地律師或律師行的電話號碼及地址。

- ◆ **法律援助**

如會員在不涉及工作、業務、專業或受僱情況下遇上意外，IPA 將會：

- (a) 為會員在法律程序中提供有關國家民事法律上的民事責任的辯護；及
- (b) 為會員在遇上個人損傷及／或個人物品遭損壞後（而有關損害估計超過港幣 5,000 元）進行法律程序向可識別的第三方追討賠償。

在以上種種情況，由 IPA 委任的大律師及／或律師，須以法律身份代表會員，IPA 無須因其委任大律師及／或律師而被行使任何追索權、承擔責任或作出彌償。聘用大律師及／或律師的費用將會由 IPA 支付，最高為港幣 40,000 元。

- ◆ **保釋金墊支**

IPA 將會代會員預付最高港幣 40,000 元的保證金，以擔保會員在交通意外後被有關當地機構拘留時可支付有關程序所需之費用。IPA 不會代會員預付任何涉及民事法律責任、罰款或個人補償及／或獲釋的款項。IPA 提供的預付，將會一律被視為由 IPA 向會員提供的貸款，會員須在該墊支款項日起 30 日內全數清還 IPA。此保釋金墊支不包括與專業及／或刑事有關的申索以及因駕駛汽車引致的申索。

### 4. **本地支援服務 – 只適用於香港**

- ◆ IPA 可協助會員安排褫母及／或私家看護及／或臨時家庭傭工、合資格技工上門維修電路故障或安排鎖匠上門開鎖或解決相關問題，或提供服務提供者的名稱、電話號碼及地址。



## 5. 不受保障項目

### ◆ 不保事項

若會員所遭遇之身體受傷或突發疾病乃由下列原因所造成，此保障下之服務及支援，將不能提供：

- 已存在病症及於會員的保障開始日前其病徵會促使一般審慎人士尋求診斷、護理或治療的任何疾病，又或於會員的保障開始日前經已由醫生提供醫療意見或建議治療的病症。
- 任何未經 IPA 授權及／或參與的服務。
- 會員懷孕、分娩或於產期前三個月內的併發症，即使這些情況是由意外所引致或加速形成。
- 會員因參與職業或比賽性質的運動、水上運動、冬季運動、賽馬、賽車、洞穴探險、攀石或攀山、綁繩跳崖、跳傘或習武等直接或間接引起的身體受傷。
- 任何未經 IPA 預先同意下所使用服務的費用。
- 其他所有於會員所屬之醫療保障合約列明之不保事項。
- 除文意另有所指，此保障之支援服務適用於會員居住國家以外之地區。
- 如會員所屬之醫療保障合約終止，此保障的服務及保障便告失效。

### ◆ 不可抗力之免責事由

因罷工、戰爭、敵國入侵、武裝衝突（不論是否正式宣戰）、內戰、叛亂、起義、恐怖行動、政變、暴動、群眾騷擾、政治或行政干預、輻射能或天災等妨礙 IPA 提供支援服務的不可抗力事項，使 IPA 之救助行動延誤或無法進行者，保柏及 IPA 不負任何責任。

附註：保柏並不會對 IPA 於免費保柏國際援助計劃所提供之服務承擔任何責任。

## 11) 你的個人資料

1. 我們非常重視你的個人資料的保密。保柏須不時收集你或你家屬的個人資料以提供醫療保險服務或辦理閣下提出之醫療保險索償之用，包括但不限於你或你家屬的姓名、身份證號碼（身份證影印本）、護照號碼（護照影印本）、聯絡資料、健康及醫療信息和財務信息（以下簡稱「個人資料」）（包括信用資料和以往申索紀錄，如適用）。如你未能提供這些個人資料，保柏可能無法為你處理或提供保險產品／服務或其他相關服務。
2. 所有申請表格中包含的、或透過任何索償程序或其他途徑，保柏不時收集或持有的個人資料，保柏將僅作以下用途：
  - (a) 處理申請及提供售後服務；
  - (b) 處理任何索償分析及／或與醫療或其他保險有關的查核；
  - (c) 提供及設計保柏的產品及服務；
  - (d) 偵測及防止欺詐行為（無論是否與就此申請而簽發之保單及相關的任何申請或索償）；
  - (e) 與由保柏提供之保險產品及／或服務有關之資料核對、統計及研究；
  - (f) 就任何於第二部分中所述的用途與閣下或你的家屬聯絡；
  - (g) 允許保柏全部或部分的權益或業務的實際或建議承讓人、受讓人、參與人或次參與人，就涉及的轉讓、出讓、參與或次參與的交易進行評估；及
  - (h) 為遵守適用的法律或監管要求而作出披露。
3. 個人資料將會轉讓至以下任何受讓人（包括香港以內及以外）以作為本部分第二段所述之用途：任何屬於保柏集團的公司；任何保險代理人；任何由保柏授權的再保險公司；醫護專業人員及醫院；你的僱主；任何代理人、承包商、或向保柏提供行政、電訊、電腦、付款、資料處理或儲存、印刷、研究或其他就保柏業務的營運向保柏提供服務的第三方服務供應商（包括但不限於保險公司、銀行、律師、會計師、理賠調查員、收數公司、資料處理公司、防止欺詐組織、為保險業界整合申索及承保資料之組織、研究服務機構及專業顧問）；保柏的任何全部或部分的權益或業務的實際或建議承讓人、受讓人、參與人或次參與人；為遵守任何法例之要求，或根據監管或其他機關所發出對保柏具有約束力或要求其遵守的規則、規例、實務守則或指引，而作出披露，包括但不限於適用監管機構、政府機構、相關行業認可機構、信貸資料服務機構或法院，及在其他情況下，法律規定保柏必向其披露的人士或機構。
4. 你有權要求查閱及更正我們持有的個人資料。你可聯絡保柏（亞洲）有限公司的保障資料主任，地址如下：香港九龍觀塘海濱道77號海濱匯第2座6樓。如有任何查詢，請隨時致電我們的客戶服務專線(852) 2517 5388。

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