

保柏僱健康  
中小企醫療保障計劃  
Bupa Empower  
SME Health  
Insurance  
Scheme



® Sun Flower Insurance Brokers Limited

Room 1105-08, Hing Yip Commercial Centre, 282 Des Voeux Road Central, Hong Kong  
Tel: 2521 1881 Fax: 2521 1919 Email: [vip@sunflowergroup.com.hk](mailto:vip@sunflowergroup.com.hk) [www.sunflowerVIP.com](http://www.sunflowerVIP.com)

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.





## 極致靈活，全面照顧僱員健康

相信大部分僱主都明白為僱員提供健康保障的重要性，然而中小企資源有限，市場上大部分團體醫保計劃都未必能符合你的實際需要，為僱員選擇醫療保障變成一大難題。

**保柏僱健康中小企醫療保障計劃**正是特別為本港的廣大中小企而設。本計劃按你的需要及預算提供兩種計劃級別，如希望針對僱員的日常醫療需要，更可獨立投保門診保障。不論公司規模或行業，我們都能為你提供一系列的保健服務，支援僱員的健康。透過全面的僱員福利和服務，我們希望能助你提高公司的生產力，留住寶貴人才。

保柏認為，中小企不應局限於少數的團體醫保計劃選擇。在本計劃下，你可為僱員自由配搭保障項目，度身訂造切合僱員需要的完美方案。有保柏僱健康作為你的健康夥伴，你及僱員都可為未來做好準備，輕鬆接受任何挑戰。

## Ultimate flexibility to take care of your employees' health and wellness

Most employers recognise the importance of providing health coverage for their employees. But for small- or medium-sized enterprises (SMEs) with more limited resources, this can be a challenge. A majority of the existing group schemes in the market can't fully meet your needs.

We're proud to launch **Bupa Empower SME Health Insurance Scheme**, which is specifically tailored for a wide range of SMEs in Hong Kong. This scheme is divided into two tiers based on your needs and budget. We've even included a standalone Clinical Benefit, if you'd like to focus on employees' day-to-day medical needs. No matter your size or industry, we can offer a range of wellness services to support your employees' health. In turn, this holistic approach will boost productivity and help you retain talented team members.

Companies like SMEs shouldn't be limited to a few choices of health insurance schemes. Our mix-and-match approach will provide the perfect solution just for you. With Bupa Empower as your health and wellness partner, you and your employees will be prepared for whatever the future holds.

市場上典型的中小企醫保計劃 Typical SME medical schemes in the market	VS	保柏僱健康 Bupa Empower
<ul style="list-style-type: none"><li>☹️ 對企業規模及行業有所限制</li><li>☹️ Restrictions on company size or industry</li></ul>		<ul style="list-style-type: none"><li>😊 低至2名僱員即可投保</li><li>😊 不論企業規模，均無須核保</li><li>😊 適合任何行業及職業</li><li>😊 Coverage for a <b>minimum of 2 employees</b></li><li>😊 No underwriting for SMEs of all sizes</li><li>😊 All industries and occupations included</li></ul>
<ul style="list-style-type: none"><li>☹️ 通常採用劃一設計，保障選項有限</li><li>☹️ Usually one size fits all, with limited options</li></ul>		<p>靈活組合：</p> <ul style="list-style-type: none"><li>😊 2種計劃級別及多項保障選擇，<b>共超過700種保障組合</b></li><li>😊 提供廣泛的網絡服務供應商，助你控制成本</li><li>😊 可選不設個別保障項目限額的計劃，靈活性高</li></ul> <p>Flexible combinations:</p> <ul style="list-style-type: none"><li>😊 2 plan tiers including multiple options, for <b>more than 700 combinations</b> in total</li><li>😊 An extensive provider network to control costs</li><li>😊 A plan without item limits for greater flexibility</li></ul>
<ul style="list-style-type: none"><li>☹️ 沒有或只提供有限的僱員保健服務</li><li>☹️ None to few services for employee health and wellness</li></ul>		<ul style="list-style-type: none"><li>😊 設有多項保健服務，包括牙科服務、眼科及身體檢查，以及健康支援服務和健康應用程式<b>Bupa4Life</b></li><li>😊 <b>A wide range of wellness services</b> including dental service, optical check, health assessment, as well as health coaching services and our wellness app <b>Bupa4Life</b></li></ul>



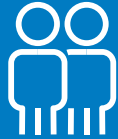




# 目錄 Contents



計劃結構及概要  
Plan structure  
and overview



例子：2人初創  
Example:  
A 2-person start-up



例子：40名僱員的中小企  
Example:  
A 40-employee SME



計劃特點 — 在支援僱主方面  
Scheme features -  
to support employers  
like you



計劃特點 — 在支援僱員方面  
Scheme features -  
to support your  
valuable employees



自選保障  
Optional  
benefits



免費保障及服務  
Free benefits  
and services



網上管理你的計劃  
Manage your scheme  
online



保柏 — 你的明智之選  
Why choose Bupa



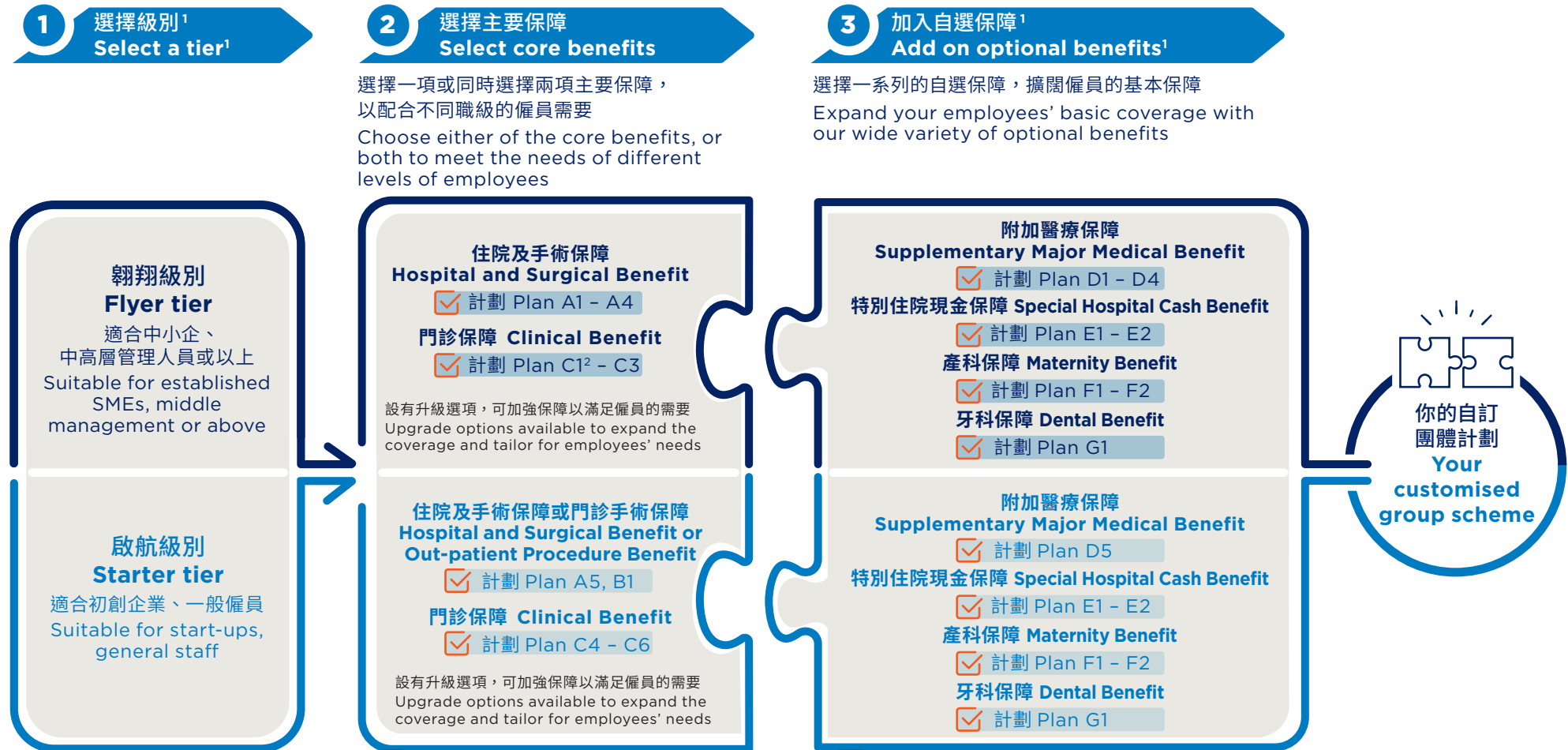
常見問題  
Frequently asked  
questions



# 計劃結構及概要 Plan structure and overview

你可為不同職級的僱員選擇不同計劃級別及保障組合。

You can select different tiers and benefit combinations for groups of employees within your company.



<sup>1</sup> 2至4名僱員的企業只可選擇啟航級別下的主要保障及自選牙科保障。

<sup>2</sup> 翱翔級別的門診保障計劃 C1 只適用於 10 名或以上僱員的企業，並有最少 5 名僱員投保此計劃選項。

<sup>1</sup> Companies with 2 to 4 employees can only choose the Starter tier's core benefit(s) with optional Dental Benefit.

<sup>2</sup> Flyer tier's Clinical Benefit Plan C1 is only applicable to companies with 10 or more employees and with at least 5 employees enrolled in this plan option.



## 計劃結構及概要 Plan structure and overview

### 保障一覽 Cover at a glance

#### 主要保障 Core benefits

- 住院及手術保障 Hospital and Surgical Benefit
- 門診手術保障 (只適用於啟航級別)  
Out-patient Procedure Benefit (applicable to Starter tier only)
- 門診保障 Clinical Benefit

#### 自選保障 Optional benefits

- 附加醫療保障 Supplementary Major Medical Benefit
- 特別住院現金保障 Special Hospital Cash Benefit
- 產科保障 Maternity Benefit
- 牙科保障 Dental Benefit

#### 免費保障及服務 Free benefits and services

- 免費保柏國際援助計劃  
Free Bupa Worldwide Assistance Programme
- 健康支援服務<sup>3</sup> Health Coaching Services<sup>3</sup>

#### 醫療卡 Medical card

有 Yes

#### 保障期 Period of cover

一年，如符合續保資格條件便可每年續保  
One year, renewable yearly if renewal eligibility requirements are met

### 投保資格 Eligibility

#### 公司規模 Company size

2 - 50名僱員 2 - 50 employees

#### 僱員 Employees

所有65歲以下的全職僱員 (可續保至69歲)  
All full-time employees aged under 65 (renewal up to age 69)

#### 僱員家屬 Employees' dependants

- 65歲以下的配偶 (可續保至69歲)  
Spouse aged under 65 (renewal up to age 69)
- 僱員的未婚子女，年齡介乎15日至17歲或未滿23歲的全日制學生 (當保柏要求時提供有效證明文件)  
Unmarried children aged between 15 days and 17 years, or under 23 years for full-time students (with valid proof upon request)

### 如何投保 How to enrol

- 與我們的專業團隊討論最適合貴公司的計劃選項建議
- 無須核保，請在申請表上填妥會員資料並連同正確保費及徵費，於月底前最少10個工作天交回
- 合約將於下月1號生效
- Talk to our dedicated team for recommendations of plan options that best suit your company
- No underwriting is required. Simply submit the completed application form with member details and relevant subscription and levy payment at least 10 working days before the end of the month
- Your contract will come into effect on the first day of the following month

<sup>3</sup> 健康支援服務只適用於翱翔級別的住院及手術保障計劃A1及A2，以及門診保障計劃C1。

<sup>3</sup> Health Coaching Services is only applicable to Flyer tier's Hospital and Surgical Benefit Plan A1 and A2, as well as Clinical Benefit Plan C1.





## 啟航級別計劃選項 — 初創企業及一般僱員的超值之選

### Starter tier plan options - the budget-savvy choice for start-ups and general staff

熱愛烹飪的陳小姐最近與拍檔開設了一間小型烘焙工作室。雖然只屬小生意，但陳小姐仍希望為自己及拍檔購買醫療保障，讓大家能放心拼搏，專注發展事業。然而，由於只得兩名僱員，預算又不多，市面上合資格可選擇的團體醫保寥寥可數。幸好有保柏僱健康為她們提供保障，陳小姐所選擇的保障組合包括：

Ms. Chan has always loved cooking and has just started a bakery workshop with her business partner. Although it's a small business, Ms. Chan would like to plan for their medical needs so they can rest easy and focus on success. With just 2 employees and a limited budget, Ms. Chan isn't eligible for many corporate health insurance schemes in the market. Luckily Bupa Empower is here to help with a personalised combination of benefits:



#### ✓ 住院及手術保障 (計劃 A5) Hospital and Surgical Benefit (Plan A5)

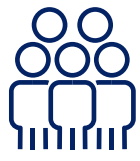
- 賠償診所手術、日症以及住院治療的費用
- 有齊網絡及非網絡服務供應商選擇，可自由選擇醫生及醫院，靈活性高
- Covers expenses for clinical operations, day cases as well as hospital treatment
- Covers network and non-network providers with free choice of doctors and hospitals for greater flexibility

#### ✓ 門診保障 (計劃 C4) Clinical Benefit (Plan C4)

- 有齊西醫、中醫保障，包括精神科相關治療及臨床心理輔導
- 保健服務—每名會員可於每合約年度享用一次洗牙服務
- Covers both Western medicine and Chinese medicine, including psychiatric-related treatments and psychological counselling
- Wellness Service – each member can enjoy one scaling and polishing each contract year

陳小姐以上的保障組合，每名會員每月保費低至HK\$171。當企業未來擴展規模時，還可於續保時選擇升級的保障以配合醫療需要。不論公司的規模如何，一律可享有 **myBupa** 僱主平台，輕鬆管理計劃。

Subscriptions per person per month for Ms. Chan's chosen plan are as low as HK\$171. If her company expands in the future, there's an option to upgrade the benefits upon renewal to meet their changing needs. No matter the size, any company can easily manage their scheme with the **myBupa** employer portal.



## 翱翔級別計劃選項 — 中小企及中高層管理人員的健康夥伴

### Flyer tier plan options - the wellness partner for established SMEs and middle management or above

袁先生是一間小型科技公司的人力資源部主管，其公司由初創企業一直發展成有近40名僱員的中小企。在保柏僱健康的支援下，袁先生的公司可保持正面積極及具生產力的工作環境。人力資源部亦發現在提供全面的僱員醫療及健康保障後，員工的流失率亦有所改善。袁先生為公司揀選的保障組合包括：

Mr. Yuen is head of HR at a small tech company. They've grown from a small start-up to employing around 40 people now. With support from Bupa Empower, Mr. Yuen's company can maintain a work environment that's both positive and productive. HR staff have noticed less turnover after providing customised, holistic medical and wellness benefits. The combination that Mr. Yuen has chosen for the company features:



#### 管理層及經理 Management and supervisors

##### ✓ 住院及手術保障 (計劃 A2)

###### Hospital and Surgical Benefit (Plan A2)

- 半私家房級別保障，每合約年度 HK\$300,000 保障額 (不設分項限額)
- HK\$300,000 in semi-private room coverage per contract year (no item limits)

##### ✓ 門診保障 (計劃 C1，並選擇每年最高賠償額的升級選項) Clinical Benefit (Plan C1, plus the upgrade option for Overall Annual Limit)

- 每合約年度 HK\$100,000 門診保障額 (不限診治次數)
- 保健服務—每名會員可任選牙科、眼科、健康檢查及足病診療服務，以每合約年度 HK\$1,500 為限
- HK\$100,000 in clinical coverage per contract year (no visit limits)
- Wellness Service - each member can enjoy dental service, optical check, health check and podiatry services, up to HK\$1,500 per contract year

#### 所有其他職員 All other staff

##### ✓ 住院及手術保障 (計劃 A4)

###### Hospital and Surgical Benefit (Plan A4)

- 大房級別保障，各保障項目設分項限額
- Ward level coverage, with item limits for each benefit item

##### ✓ 門診保障 (計劃 C3)

###### Clinical Benefit (Plan C3)

- 各保障項目設分項限額，每合約年度共 40 次診治
- 保健服務—每名會員可於每合約年度享一次牙科/眼科/健康檢查
- Each benefit item has an item limit, with a total of 40 visits per contract year
- Wellness Service - each member can enjoy one dental service/optical check/health check per contract year

袁先生更為所有僱員加入 **Bupa4Life** 應用程式，除可進行線上健康評估、免費參加健康課程及瀏覽健康貼士外，完成健康目標更可賺取積分換領獎賞。不論公司的規模如何，一律可享有 **myBupa** 僱主平台，輕鬆管理計劃。

Mr. Yuen has also enrolled in the **Bupa4Life** wellness app for all employees. They can complete an online health assessment, book into wellness classes for free, read health tips from experts, plus earn points to redeem rewards for healthy living. No matter the size, any company can easily manage their scheme with the **myBupa** employer portal.





## 計劃特點 — 在支援僱主方面

### Scheme features - to support employers like you



#### 極致靈活的保障組合

##### Ultimate flexibility with free combination

我們明白，創新及靈活性高的中小企均希望為僱員提供最佳的醫療保障。本計劃設有超過700種保障組合，你可自由配搭包含門診手術、住院，甚至只設門診的基本計劃。所有主要保障均設有升級選項，方便你為僱員設計更佳保障。你亦可為不同職級的僱員度身訂造不同的保障組合。

We understand innovative and agile SMEs like you are eager to provide the best medical insurance for your employees. This scheme offers ultimate flexibility for more than 700 benefit combinations – you can mix and match your base plan with benefits that cover out-patient procedures, hospitalisation or even just clinical visits. All core benefits provide upgrade options that expand the coverage to better suit your employees' needs. You can also tailor the benefit options for employees at different grades.



#### 設兩種計劃級別，配合你的預算

##### 2-tier plan options to suit your budget

你可按預算選擇「啟航」或「翱翔」級別下的計劃。初創企業可選擇以超值保費提供基本保障的啟航級別；而翱翔級別則特別為中小企而設，提供較高保障及靈活性的計劃選擇。你亦可為不同職級的僱員選擇不同的計劃級別，例如為一般僱員選擇啟航級別，中高層管理人員則可選擇翱翔級別。

You can choose from our plan options in 2 different tiers – Starter tier and Flyer tier – to better suit your budget. Start-up companies can choose the Starter tier with basic benefits at affordable rates. The Flyer tier is designed for established SMEs, providing plan options with higher coverage and flexibility. You can also select different tier plan options for groups of employees within your company, for example, Starter tier for general employees and Flyer tier for middle management or above.



## 計劃特點 — 在支援僱主方面

### Scheme features - to support employers like you



#### 按年齡組別劃分保費 Subscriptions by age group

本計劃的保費結構簡單，僱員及配偶的保費以5個年齡組別劃分，子女則設劃一保費。此外，享相同保障組合的僱員之保費將按該組別僱員的平均年齡計算。

例子：如5名享相同保障組合的僱員之平均年齡為38歲，他們的保費將按31至40歲組別的保費計算。

This scheme has a simple subscription structure with 5 age groups for employees and their spouses, and a flat rate for employees' children. What's more, the subscriptions for each class of employees with the same benefit options will be based on their average age.

For example, if the average age of the 5 employees under the same benefit option is 38, their subscriptions will be based on the 31-40 age group.



#### 兩名僱員即可投保 Low entry with just 2 employees

保柏照顧每名僱員的健康，本計劃的最低投保人數為2名僱員，任何行業的初創企業或中小企均歡迎投保。

為迎合延遲退休年齡的趨勢，本計劃可續保至69歲，全面照顧你的僱員的健康需要。

We look after the health and wellness of every employee. This scheme offers enrolment for a minimum of 2 employees to support start-up companies. Start-ups and SMEs in all industries are welcome.

To cope with the trend of retiring at a later age, this scheme also offers renewal up to age 69 to better take care of your employees.



#### 簡易投保及保單管理 Easy enrolment and policy management

投保簡易，無須進行醫療檢查。為方便你管理僱員的保障，你亦可免費使用保柏的 **myBupa** 僱主平台，隨時隨地增加或移除僱員及家屬、查閱索償狀況及差額紀錄。

No medical examination is required at application. To help you manage your employees' memberships easily, you'll also have free access to Bupa's employer portal **myBupa**. You can add or remove employees and dependants, check their claims status and shortfall history at any time.





## 計劃特點 — 在支援僱員方面

## Scheme features - to support your valuable employees



### 保障已存在病症 Covers pre-existing conditions

本計劃可保障已存在病症（受一年等候期約束<sup>4</sup>），為你的僱員提供更佳保障。

To better take care of your employees' wellbeing, this scheme can cover pre-existing conditions subject to a 1-year waiting period<sup>4</sup>.



### 第二索償現金津貼 Second claims incentive

本計劃提供第二索償現金津貼，如會員的住院費用先由其他保險公司作出賠償，其後向保柏索償，便可獲此津貼。

This scheme also provides a second claims incentive. We'll offer this incentive to members if their hospital expenses were paid by another insurer first, and then claimed from Bupa.



### 癌症及嚴重傳染病保障 Coverage for cancer and serious infectious diseases

如會員確診癌症或嚴重傳染病<sup>5</sup>，我們將會提升住院費用<sup>6</sup>（如手術、深切治療及住院雜費）的保障限額至120%，讓會員在關鍵時期接受更佳及更先進的治療。

If a member is diagnosed with cancer or a serious infectious disease<sup>5</sup>, we'll increase the benefit limit for hospital expenses<sup>6</sup> such as surgeries, intensive care and miscellaneous services to 120% to help the member afford better and more advanced treatment in these critical times.

<sup>4</sup> 已存在病症的保障只適用於最少10名僱員的企業。

<sup>5</sup> 嚴重傳染病包括登革熱、日本腦炎、2019冠狀病毒病等，以及任何未來根據世界衛生組織介定為國際關注的突發公共衛生事件。有關嚴重傳染病的詳細列表及定義，請參閱保障金額表及合約。

<sup>6</sup> 癌症及嚴重傳染病保障適用於住院及手術保障項目 A1-A9 及 A12-A13。

<sup>4</sup> Coverage for pre-existing conditions is only applicable to companies with at least 10 employees.

<sup>5</sup> Serious infectious diseases include Dengue Fever, Japanese Encephalitis, COVID-19 and more, as well as any future Public Health Emergency of International Concern according to the World Health Organisation. Please refer to the Schedule of Benefits for the detailed list of serious infectious diseases and the Contract for definitions.

<sup>6</sup> Cancer and Serious Infectious Disease Benefit applies to items A1-A9 and A12-A13 under Hospital and Surgical Benefit.

## 計劃特點 — 在支援僱員方面 Scheme features - to support your valuable employees



### 視像診症服務<sup>7</sup> Video consultation services<sup>7</sup>

受保於門診保障的會員更可享受視像診症服務，舒適安全地由我們特選的醫生進行視像診症。

Members with Clinical Benefit can also enjoy video consultation services to consult our selected doctors through a video call comfortably and safely.



### 全面的情緒健康保障 Comprehensive mental health coverage

為照顧僱員的情緒健康，本計劃提供住院及門診的精神科相關保障。當中門診保障更特設門診精神科相關治療及臨床心理輔導保障<sup>8</sup>，賠償包括精神、心理、情緒或行為症狀、認知障礙症（包括阿茲海默氏症）及帕金森病等門診治療的費用。

To take care of your employees' mental wellbeing, this scheme provides both in-patient and out-patient psychiatric-related coverage. In particular, our Clinical Benefit includes coverage for psychiatric-related treatments and psychological counselling<sup>8</sup>, such as out-patient treatments for psychiatric, psychological, mental or behavioural conditions, senile dementia (including Alzheimer's disease) and Parkinson's disease.



### 全面的保健支援 All-round wellness support

除醫療保障外，我們亦關心你的僱員的保健需要。我們的門診保障特設保健服務<sup>8</sup>，會員可於每合約年度選擇以下其中一項服務（適用資格按所選的保障而定）：

- 牙科服務
- 眼科檢查
- 健康檢查

受保於翱翔級別的門診保障計劃C1的會員更可享受以上所有服務及足病診療保障，總保障額以每合約年度HK\$1,500為限。

此外，你更可為你的僱員提供健康應用程式 **Bupa4Life**，幫助他們管理健康。詳情請參閱 **Bupa4Life** 部分。

Apart from providing medical coverage, we also take care of your employees' wellbeing. Our Clinical Benefit is specially designed to include a wellness benefit<sup>8</sup>. Members can choose one service each contract year (eligibility varies depending on the choice of benefits):

- Dental service
- Optical check
- Health check

For Flyer tier's Clinical Benefit Plan C1, members can even enjoy a combination of these services plus podiatry service up to a total benefit limit of HK\$1,500 per contract year.

What's more, you can also enrol your employees in our wellness app **Bupa4Life** to help them take charge of their health. Please refer to the "**Bupa4Life**" section for details.

<sup>7</sup> 詳情請瀏覽 [www.bupa.com.hk/vc](http://www.bupa.com.hk/vc)。受條款及細則約束。

<sup>8</sup> 不適用於啟航級別的門診保障計劃C6。

<sup>7</sup> Visit [www.bupa.com.hk/vc](http://www.bupa.com.hk/vc) for details. Terms and conditions apply.

<sup>8</sup> Not applicable to Starter tier's Clinical Benefit Plan C6.



## 計劃特點 — 在支援僱員方面 Scheme features - to support your valuable employees



### 使用醫療卡享免找數服務 Cashless service with medical card

保柏的網絡服務供應商為本港最龐大的私營醫療網絡供應商之一。持有保柏醫療卡的會員可於本港的指定私家醫院<sup>9</sup>、網絡服務供應商及指定的日症中心<sup>10</sup>享免找數服務（適用資格按所選的保障而定）。我們會按預先批核的限額直接支付合資格醫療費用，為會員免卻申請索償的煩惱。

Bupa has one of Hong Kong's largest private provider networks. With a Bupa medical card, members can enjoy cashless service at designated private hospitals<sup>9</sup>, network service providers and designated day case centres<sup>10</sup> in Hong Kong (eligibility varies depending on the choice of benefits). We'll pay the eligible medical expenses directly up to the pre-approved limit, so members don't have to submit any claims.



### 可獲終生續保 Access to lifelong cover

我們的團體會員可在人生不同階段（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」，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>11</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>12</sup>。

Our group members can enrol in Bupa VTop Health Insurance Scheme at different life stages (e.g., upon renewal of their group scheme, before or after changing jobs, before retirement) to boost their cover. Bupa guarantees that their application will be accepted without underwriting regardless of their health conditions<sup>11</sup>. Moreover, medical conditions protected by their group membership will be covered for life<sup>12</sup> under Bupa VTop.

<sup>9</sup> 有關指定私家醫院名單，請參考保障金額表。此為於印刷日時最新之網絡醫院名單，此名單可能會不時更改。你可於入院前致電保柏查詢最新名單。

<sup>10</sup> 請登入保柏的客戶服務網站查閱最新的適用網絡服務供應商及指定日症中心名單。這些名單可能會不時更改。

<sup>11</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>12</sup> 只要會員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，所有在其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。保柏保證會員在保柏易增值下的保障可獲每年續保至終生，只要他們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。會員可參閱他們的保柏易增值合約以了解詳情。

<sup>9</sup> For the list of designated private hospitals, please refer to the Schedule of Benefits. This list is current at the date of printing and it is subject to change from time to time. For the current list, please call Bupa before hospital admission.

<sup>10</sup> Please log in to Bupa's customer service portal to view the latest list of applicable network service providers and designated day case centres. These lists are subject to change from time to time.

<sup>11</sup> Please refer to the "Eligibility" section of the Bupa VTop Health Insurance Scheme brochure for details.

<sup>12</sup> All pre-existing conditions which are payable under a member's Bupa group scheme shall be covered under Bupa VTop if they 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 members' cover under Bupa VTop can be renewed every year for life as long as they meet the requirements as stated in the Renewal Clause of their contract. Bupa reserves the right to amend the subscription, benefits, terms and conditions upon their contract renewal. They can refer to their Bupa VTop contract for further details.



## 自選保障 Optional benefits

你亦可在僱員的基本保障上加入一系列的自選保障，提升保障安全網。

You can also expand your employees' basic coverage with a wide variety of optional benefits.



### 附加醫療保障<sup>13</sup> Supplementary Major Medical Benefit<sup>13</sup>

嚴重或長期疾病的醫療支出往往屬意料之外，自選附加醫療保障可為你的僱員減低自付費用。當醫療費用超出住院及手術保障<sup>14</sup>的賠償額時，附加醫療保障將賠償差額的8成，以指定的最高賠償額為限。

Some serious or long-term illnesses can rack up unexpected costs. The optional Supplementary Major Medical Benefit will help to reduce potential out-of-pocket expenses by boosting your employees' basic cover. It pays 80% of the medical expenses in excess of the amount covered by the Hospital and Surgical Benefit<sup>14</sup> up to the specified maximum limit.



### 產科保障<sup>13</sup> Maternity Benefit<sup>13</sup>

此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。

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



### 特別住院現金保障<sup>13</sup> Special Hospital Cash Benefit<sup>13</sup>

如會員因意外或癌症／嚴重傳染病而住院，可分別獲每日住院現金高達HK\$1,000或HK\$2,000。

If members are hospitalised due to an accident or cancer / serious infectious disease, they'll get a daily cash payment of up to HK\$1,000 or HK\$2,000 respectively.



### 牙科保障 Dental Benefit

牙科保障包括洗牙、補牙及脫牙、牙周手術、緊急意外治療等。如會員於指定網絡牙科中心<sup>15</sup>接受診治，更可就覆蓋的服務項目享用免找數服務及全數賠償<sup>16</sup>。

Covers dental expenses such as scaling and polishing, fillings and extractions, emergency consultations and more. If members receive treatment at designated network dental centres<sup>15</sup>, they can enjoy cashless service and full cover<sup>16</sup> for covered items.

<sup>13</sup> 附加醫療保障、特別住院現金保障及產科保障只適用於最少5名僱員的企業。

<sup>14</sup> 附加醫療保障不適用於入院前及出院後之門診護理、精神科治療、癌症及嚴重傳染病保障、第二索償現金津貼及門診手術額外現金。詳情請參閱保障金額表。

<sup>15</sup> 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、鯉魚涌、尖沙咀、將軍澳、沙田、青衣、東涌等。請登入保柏的客戶服務網站查閱最新的牙科中心地址。此名單會不時更改。

<sup>16</sup> 會員只需出示保柏醫療卡及香港身份證以作核實及紀錄，便可於指定網絡牙科中心享免找數服務及全數賠償。

<sup>13</sup> Supplementary Major Medical Benefit, Special Hospital Cash Benefit and Maternity Benefit are only applicable to companies with at least 5 employees.

<sup>14</sup> Supplementary Major Medical Benefit is not applicable to Pre-admission and Post-hospitalisation Out-patient Care, Psychiatric Treatment Benefit, Cancer and Serious Infectious Disease Benefit, Second Claims Incentive as well as Out-patient Surgery Cash Allowance. Please refer to the Schedule of Benefits for details.

<sup>15</sup> 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 customer service portal to view the latest location list. This list is subject to change from time to time.

<sup>16</sup> Members can enjoy cashless service and full cover at designated Network Dental Centres by presenting their Bupa medical card and Hong Kong Identity Card for verification and record.

## 免費保障及服務 Free benefits and services

### 免費保柏國際援助計劃 Free Bupa Worldwide Assistance Programme

你的僱員均可免費使用保柏國際援助計劃。當他們於海外或國內需要醫療支援時，此計劃可提供協助。

Your employees will have free access to our worldwide assistance programme. It provides medical support and assistance if they need help while overseas or in mainland China.

### 健康支援服務<sup>3</sup> Health Coaching Services<sup>3</sup>



#### 24小時健康專線 24/7 Healthline

我們的合資格健康管理團隊可為會員提供協助及指導，背後更有醫生作為顧問<sup>17</sup>—由怎樣照顧患者親友，以至與會員討論病情及治療方案等。我們亦可根據會員的指定情況或需要提供診所及醫院名單以供參考，更可協助預約選定的診症及治療服務。

Our team of qualified health management professionals, supported by doctors<sup>17</sup> can provide assistance and guidance—from how to care for a sick relative to discussing symptoms, treatment and more. We can also provide a list of clinics and hospitals based on each member's specific condition or needs for their reference, as well as set up appointments for their selected consultations and treatments.



#### 第二醫療意見 2<sup>nd</sup> medical opinion

我們可安排醫療專家為會員提供專業的第二意見，讓他們掌握病情從而決定治療方法。

We'll arrange for members to get medical advice from a panel of medical specialists to clarify their doubts. Then they can make informed decisions about treatment.



#### 健康顧問 Care Manager

如不幸患上危疾，我們的健康顧問可與會員緊密聯絡，跟進索償、全程協助治療至康復過程，包括解釋治療計劃和醫療開支以至安排跟進治療。當會員入住本港私家醫院時並得到其同意下，我們可前往醫院探望或致電慰問。

In case of critical illnesses, our Care Manager can be in touch with the member to follow up on claims and assist them throughout treatment and recovery, from explaining their treatment plans and overseeing costs to arranging follow-up consultations. If the member is admitted to a local private hospital, our Care Manager will make a courtesy call or visit, with their consent.

<sup>3</sup> 健康支援服務只適用於翱翔級別的住院及手術保障計劃A1及A2，以及門診保障計劃C1。

<sup>17</sup> 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。

<sup>3</sup> Health Coaching Services is only applicable to Flyer tier Hospital and Surgical Benefit Plan A1 and A2, as well as Clinical Benefit Plan C1.

<sup>17</sup> 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.





## 網上管理你的計劃 Manage your scheme online

保柏的一站式客戶服務平台 **myBupa** 讓你及僱員隨時隨地管理計劃。你可使用 **myBupa** 僱主平台網上管理僱員的保障及索償。**myBupa** 同時設有手機應用程式，方便會員搜尋網絡醫生、提交索償，甚至領取會員特別優惠！

Bupa's one-stop online customer service portal **myBupa** provides quick and easy access to your scheme whenever you and your employees need it. You can use our **myBupa** employer portal to manage your employees' benefits and claims online. **myBupa** is also available as a smartphone app for members to search for network doctors, submit claims and redeem exclusive offers anytime, anywhere!

### 僱主 For employers like you



#### 管理會員資料 Manage member profiles

只需點擊幾下，輕鬆新增或移除僱員及家屬。  
Add or remove employees and dependants in just a few clicks.



#### 更新會員保障 Update member coverage

按僱員職級分配保障，你亦可網上更新僱員的賠償銀行戶口資料。  
Assign benefits to different employees according to their grade. You can also update their bank account for reimbursement online.



#### 管理索償 Manage claims

隨時查閱僱員的索償狀態、差額紀錄及所欠差額，輕鬆管理成本。  
Check employees' claims status, shortfall history and outstanding shortfall at any time for cost control.



#### 會員轉移總結 Member movement summary

如你曾網上更改會員資料，將會收到會員轉移總結以作紀錄。  
You'll receive a member movement summary report for record if you've made any changes to member profiles.

### 僱員 For your employees



#### 會籍文件 e-Documents

查閱及下載重要的會籍文件，包括保障金額表及會員指引等。  
View and download important documents including the Schedule of Benefits, membership guide and more.



#### 搜尋網絡醫生 Network doctors finder

透過地點或專科分類，搜尋網絡醫生及診所資料。  
Search for network doctors and clinics around Hong Kong by location or specialty.



#### 網上索償 Claims assistance

網上提交住院、日症及門診索償、查詢索償狀況，或查閱差額通知書。  
Submit hospital, day case and clinical claims, track claims status or view shortfall invoices.



#### 尊享優惠 Exclusive offers

查閱及領取各式服務及產品的特別優惠。  
View and redeem special offers on a variety of services and products.



## Blua Health 助你及僱員贏健康賺獎賞

# You and your employees can manage your health and earn rewards in Blua Health

健康是最寶貴的財富，保持健康的身心，是對自己及僱員最大的承諾。**Blua Health** 應用程式透過 AI 科技助你及僱員管理健康，達成目標更可賺積分換禮品，輕鬆收獲健康！

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



免費使用多項健康互動功能  
Enjoy a variety of free health app features



30秒AI評估你的身心健康  
Assess your health in 30 seconds with AI technology



與AI教練隨時隨地一起健身  
Exercise with AI coach anytime, anywhere



賺取積分以換領健康獎賞  
Earn points to redeem rewards for healthy living

立即下載 **Blua Health**，未來健康由你掌握！

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



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。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 is offered, distributed and operated by Horizon Health and Care Limited which is 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.



## 保柏—你的明智之選 Why choose Bupa

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。

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



### 信譽卓著的醫療保健專家 Our reputation and expertise in healthcare

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

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 clinics



### 賠償服務承諾 Our claims service pledge

我們承諾提供快捷簡便的索償服務

- 收受所需文件後，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，會員將收到通知

Promising a quick and easy claims process

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



### 24小時支援 Our round-the-clock support

全面支援，讓你隨時隨地管理保單

- 24小時客戶服務專線
- 客戶服務網站

Allowing you to manage your policy at your convenience via

- 24-hour telephone support
- Online customer service portal





## 常見問題 Frequently asked questions

### 1. 「啟航級別」的計劃選項與「翱翔級別」有甚麼分別？

「啟航級別」的計劃選項特別為初創企業及一般僱員而設，以超值保費提供基本保障，主要保障設住院及手術保障、門診手術保障及門診保障以供選擇。

「翱翔級別」的計劃選項則為中小企及中高層管理人員而設，提供較高保障額及靈活性，主要保障設住院及手術保障和門診保障。

啟航級別及翱翔級別均設有4項自選保障：附加醫療保障、特別住院現金保障、產科保障及牙科保障，你可按僱員的需要自由加入不同的自選保障。

### 2. 我可以為不同職級的僱員投保不同級別的保障組合嗎？當我的企業擴充時，我可以提升僱員的保障嗎？

你可為不同職級的僱員靈活組合不同的保障。例如你可為中高層管理人員投保「翱翔級別」下的住院及手術保障計劃A1及門診保障計劃C1，另外為一般僱員投保「啟航級別」下的門診手術保障計劃B1。然而同一職級的僱員須投保同一保障組合。個別保障及計劃設有最低僱員人數要求，詳情請參閱保障金額表。

當你的企業擴充時，你可在續保時向保柏提出升級你的計劃，例如將中高層管理人員的門診保障計劃C1提升至無須自負費且非網絡保障為100%賠償率的「升級選項」，甚至加入自選附加醫療保障。

### 3. 甚麼是「門診手術保障」？

「門診手術保障」是「啟航級別」下獨有的保障選項。此保障涵蓋會員於卓新服務供應商診所或日症中心進行的受保外科手術，以保障金額表上所列的每年最高賠償額為限。受保外科手術涵蓋4項專科，包括皮膚科、腸胃科、耳鼻喉科及眼科，以及8種常見手術類型，如內窺鏡、白內障手術、痔瘡切除等。詳細的受保外科手術列表可於合約及保柏的客戶服務網站myBupa上的保障金額表查閱。

### 1. What's the difference between Starter tier and Flyer tier plan options?

Starter tier is designed for start-ups and general staff, offering basic benefits at affordable rates. There're 3 core benefits to choose from – Hospital and Surgical Benefit, Out-patient Procedure Benefit and Clinical Benefit.

The Flyer tier is designed for SMEs and middle management or above, providing plan options with higher coverage and flexibility. There're 2 core benefit options – Hospital and Surgical Benefit and Clinical Benefit.

Both Starter tier and Flyer tier offer 4 optional benefits to meet your employees' needs: Supplementary Major Medical Benefit, Special Hospital Cash Benefit, Maternity Benefit and Dental Benefit.

### 2. Can I enrol in different benefit combinations for employees of different grades? Can I upgrade their benefits when my company expands in the future?

Yes, you can choose different benefit combinations for employees at different grades. For example, you can enrol in Flyer tier's Hospital and Surgical Benefit Plan A1 and Clinical Benefit Plan C1 for middle management or above, and Starter tier's Out-patient Procedure Benefit Plan B1 for general staff. However, all employees of the same grade must be enrolled in the same benefit combination. A minimum number of employees applies for specific benefits and plans. Please refer to the Schedule of Benefits for details.

When your company expands, you can contact Bupa to upgrade your plan upon renewal. For example, you can upgrade middle management's Clinical Benefit Plan C1 to the "upgrade option" which has no deductible and 100% reimbursement under Non-HealthNet Benefit, or even add the optional Supplementary Major Medical Benefit.

### 3. What is the Out-patient Procedure Benefit?

The Out-patient Procedure Benefit is an option exclusive to Starter tier. This benefit is payable for covered surgical procedures performed at a QualityNet Service Provider's clinic or day case centre, subject to the applicable overall annual limit as stated in the Schedule of Benefits. The covered surgical procedures include 4 specialities such as dermatology, gastroenterology, otorhinolaryngology and ophthalmology, as well as 8 common types of procedures including endoscopy, cataract surgery, haemorrhoidectomy and more. Please refer to the contract and the Schedule of Benefits on Bupa's customer service portal myBupa for the detailed list of covered surgical procedures.



## 常見問題 Frequently asked questions

### 4. 我可以只為僱員投保門診保障嗎？

可以，本計劃下的主要保障，包括住院及手術保障／門診手術保障（只適用於「啟航級別」）及門診保障均可獨立或組合投保。

### 5. 甚麼是「升級選項」？

本計劃下的所有主要保障均設有升級選項，例如可將非網絡保障的賠償率由80%提升至100%、將門診保障的總診治次數由30或40次提升至不限次數（仍受個別保障項目的分項次數所限）等，方便你為僱員設計最佳的保障。

### 6. 僱員的索償紀錄會影響我公司將來的續保保費嗎？

不會，本計劃的保費並不會因僱員曾作出索償而被調高。影響每年保費率的因素包括醫療通脹、一般營運開支及因應醫療開支增加而作出的保障改動等。

### 7. 本計劃的最高保障年齡是多少？

僱員及配偶可保障至69歲；未婚子女可保障至18歲，如未婚子女為全日制學生，可保障至23歲（當保柏要求時提供有效證明文件）。

### 4. Can I enrol in Clinical Benefit only for my employees?

Yes, you can enrol in just one or a combination of the core benefit(s) available under this plan, including Hospital and Surgical Benefit/Out-patient Procedure Benefit (applicable to Starter tier only) and Clinical Benefit.

### 5. What is an “upgrade option”?

All core benefits under this plan provide upgrade options that expand the coverage to better suit your employees' needs. For example, you can upgrade the reimbursement percentage of Non-HealthNet Benefit from 80% to 100%, increase the maximum number of visits under Clinical Benefit in aggregate from 30 or 40 to unlimited (also subject to sub-limits on the number of visits for each benefit item) and so on.

### 6. Will my employees' claims affect the renewal subscription of my company's Bupa Empower scheme?

No, any claims that your employees make won't affect the subscription at renewal. Factors affecting subscription rates each year include medical inflation, general operating expenses and revision of benefits to cover increasing medical expenses.

### 7. What is the maximum cover age for this scheme?

For employees and their spouses, they are covered up to age 69. Unmarried children of employees are covered up to age 18, or up to age 23 if the unmarried child is a full-time student (with valid proof upon request).

## 重要資料 Important information

本冊子乃資料摘要，僅供參考之用。請務必細閱完整的保險合約，以了解計劃之保障範圍、不受保障項目、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

除以下保障外，本計劃的其他保障均不設等候期，合約生效後即可獲得保障：

住院及手術保障	已存在病症，除非本合約下的投保僱員不少於10人，且會員自合約開始日起已連續受保不少於12個月。
產科保障（自選保障）	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，惟會員必須於此產科保障生效日後受孕。為免存疑，若會員於妊娠37週後但於9個月等候期內分娩，將不獲此產科保障賠償。

### 冷靜期及取消合約權益

本計劃不設冷靜期。在合約週年日前，你不能取消合約。

### 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，將會影響會員的保障權益，後果包括合約被取消或索償款項被調低。

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

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

### Waiting period

There's no waiting period except for the benefits below. Coverage starts as soon as your contract is in effect.

Hospital and Surgical Benefit	Pre-existing conditions, unless the number of employees enrolled under the contract is not less than 10 and the member has been insured continuously for not less than 12 months from the coverage commencement date.
Maternity Benefit (Optional)	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 and cancellation rights

This scheme has no cooling-off period. You may not cancel your contract before it expires on the contract anniversary date.

### 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 members' entitlement to insurance benefits. Consequences may include cancellation of your contract or reduction of entitlement to claims payments.





## 重要資料 Important information

### 索償步驟

任何索償須按照保柏所訂的索償程序進行。會員須於求診、診所手術、日症或出院後 90 天內遞交所有有關該索償的所須文件正本，否則保柏將不能處理會員的賠償，或會導致索償被拒。

### 保費調整

每名會員的首期保費會根據年齡、保障選擇等因素而定。

保費並不會因會員曾作出索償而被調高。影響每年保費率的因素包括醫療通脹、一般營運開支及因應醫療開支增加而作出的保障改動等。

### 續保

本合約生效期為期一年。無論會員在投保後的健康狀況有任何改變，只要你符合合約內列明的續保要求，你的合約便可每年續保。保柏可於每年續保時更改保障、合約條款及細則，有關改動將於續保時以書面通知你。

### 繳付保費

你須以年繳方式繳付保費。如更改會員人數或會員的保障項目，你便須在收到繳費單後，按比例繳付有關保費。

### 終止合約

你的合約將在下列最早出現的情況下自動終止：

1. 在保費到期日屆滿時仍未支付保費；或
2. 投保公司破產或無力償債或類似程序開始當日。

你的合約下的會員之保障將於你的合約終止時或他們已不再符合本計劃的資格時終止。詳情請參閱本冊子及合約內的資格條件。

### Claims procedure

Any claim must be made following Bupa's claim procedures. Members should submit all necessary original documents within 90 days after clinical visit, clinical operation, day case or discharge from hospital. Otherwise, we won't be able to process their claim and it may be rejected.

### Subscription adjustment

Each member's initial subscription is primarily determined based on factors such as age and choice of coverage.

Any claims that members make won't affect the subscription at renewal. Factors affecting subscription rates each year include medical inflation, general operating expenses and revision of benefits to cover increasing medical expenses.

### Renewal

This contract will last for 1 year and may be renewed every year as long as you meet the requirements as stated in the Renewal Clause of your contract, regardless of any changes in members' health condition. Bupa may revise the benefits, contract terms and conditions every year at renewal. During the renewal process, we'll notify you in writing if there are any changes.

### Payment of subscription

You'll need to pay your subscription yearly. When there's a change in the number of members or in the benefits of a member, you'll need to pay the relevant subscription on a pro-rata basis upon presentation of the invoice.

### Termination of contract

Your contract will be terminated automatically in the following situations, whichever is earliest:

1. when the subscription is unpaid by the subscription due date; or
2. when bankruptcy or insolvency or analogous proceedings are commenced against the subscriber.

The coverage of members under your contract will cease when your contract is terminated or when they're no longer eligible for the scheme. Please refer to the eligibility requirements in this brochure and contract for details.



## 重要資料

### Important information

#### 不受保障項目

- 已存在病症，除非根據本合約投保的僱員人數不少於10人且會員已根據本合約自保障開始日起連續投保不少於12個月。
- 不是醫療必需的治療、醫療服務、藥物或檢驗。
- 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。
- 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。
- 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1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，除非獲保柏批准。
- 預防措施，包括但不限於常規驗血、例行檢驗、預防注射或接種疫苗、聽覺測驗及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（受門診保障下的「保健服務保障」涵蓋則除外）。
- 先天性疾病、發育異常或遺傳性疾病。
- 由本合約保障開始日起首5年內，因感染人體免疫力缺損病毒所引致的治療。
- 性病或其後遺症。
- 與懷孕有關的治療，包括診斷性產科檢查、生育、墮胎或小產（受產科保障涵蓋則除外）；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；或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）。
- 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。
- 任何因參與犯罪活動而引致之疾病或身體損傷。

#### General exclusions

- Pre-existing conditions, unless the number of employees enrolled under the contract is not less than 10 and the member has been insured continuously for not less than 12 months from the coverage commencement date.
- Treatment, medical service, medication or investigation which is not medically necessary.
- 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.
- 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.
- 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 1 year of the accident), Hair Mineral Analysis (HMA), health supplements or body weight control (unless approved by Bupa).
- 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 (unless it is payable under Wellness Service Benefit under Clinical Benefit).
- Congenital conditions, developmental conditions or hereditary conditions.
- Treatment that commenced during the first 5 years from the coverage commencement date and which in any way arises from, is attributable to, or is consequential upon Human Immunodeficiency Virus Infection.
- Sexually transmitted (venereal) diseases or their sequel.
- Treatment relating to pregnancy, including diagnostic tests for pregnancy or resulting childbirth, abortion or miscarriage (unless it is payable under Maternity Benefit); 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 pre-mature ejaculation, regardless of cause.
- Misuse or overdose of drugs or being under the influence of alcohol, self-inflicted injuries or attempted suicide.
- Treatment relating to any illness or bodily injury resulting from participation in criminal activities.



## 重要資料

### Important information

- 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）。
- 老年性痴呆（包括阿茲海默氏症）、帕金森病（受門診保障下的「精神科相關治療保障」或「臨床心理輔導保障」涵蓋則除外）。
- 心病或精神病，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（受住院及手術保障下的「精神科治療保障」或門診保障下的「精神科相關治療保障」或「臨床心理輔導保障」涵蓋則除外）。
- 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、拐杖的費用。
- 任何與牙齒或牙肉疾病有關的治療或檢查，根據「牙科保障」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（受牙科保障涵蓋則除外）。
- 因戰爭、入侵、外敵行動、開戰（不論是否已宣戰）、內戰、暴動、革命、叛亂或軍人奪權、恐怖活動等直接或間接引致的治療。
- 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。
- 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。
- 從事或參與海軍、陸軍或空軍任務或任何武裝部隊之行動；或除休閒和健康目的以外，以專業或非業餘身份參與或參加運動，並通過該參與或參加獲取收入或報酬。
- 未經保柏認可的醫生、醫院或醫療保健機構產生的任何費用。
- 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).
- Senile Dementia (including Alzheimer's disease), Parkinson's disease (unless it is payable under Psychiatric-related Treatments Benefit or Psychological Counselling Benefit under Clinical Benefit).
- 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, or Psychiatric-related Treatments Benefit or Psychological Counselling Benefit under Clinical Benefit).
- 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.
- 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 Dental Benefit.
- 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.
- 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.
- Expenses incurred for experimental or unproven medical technology or procedure not in accordance with the standards of good and prudent medical practice.
- Engaging or taking part in naval, military or airforce or any operation with any armed force; or in a sport in a professional or non-amateur capacity other than for leisure and health purpose and receives or earns an income or remuneration from engaging or taking part in it.
- Any charges incurred at a medical practitioner, hospital or healthcare facility unrecognised by Bupa.





## 重要資料 Important information

### 醫療必需

保柏只會根據「醫療必需」和「正常及慣常」的原則，為會員所需支付的費用及／或開支作出賠償。

醫療必需指醫療上必需的治療、醫療服務或藥物：

- (a) 以正常及慣常費用就病症之診斷提供相應之治療；
- (b) 符合良好及謹慎的醫療標準；
- (c) 就有關診斷或治療而所需的；
- (d) 非純為會員、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、註冊視光師、精神科醫生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

### Medically necessary

We only cover the expenses of the member when they are medically necessary and normal and customary.

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, registered optometrist, psychiatrist 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 purposes, 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



## 重要資料

## Important information

(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。

### 正常及慣常

「正常及慣常」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。「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：

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

practice”，Bupa shall consider the following:

- 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.

### Normal and customary

In relation to fees, “normal and customary” means 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.

In determining whether a charge is “normal and customary”, Bupa shall make reference to the followings (if applicable):

- (a) treatment or service fee statistics and surveys in the insurance or medical industry;
- (b) internal or industry claim statistics;
- (c) gazette published by the Hong Kong government; and/or
- (d) other pertinent source of reference in the locality where the treatments, services or supplies are provided.

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。

本冊子中、英文之意思如有任何差別，概以英文為準。

This scheme 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.

In the event of any discrepancy in respect of the meaning between the Chinese version and the English version of this brochure, the English version shall prevail.

**保柏（亞洲）有限公司**  
**Bupa (Asia) Limited**

香港九龍觀塘  
海濱道 77 號  
海濱匯第 2 座 6 樓  
6/F, Tower 2,  
The Quayside,  
77 Hoi Bun Road,  
Kwun Tong, Kowloon,  
Hong Kong

電話 Telephone: (852) 2517 5175  
傳真 Facsimile: (852) 2548 1848  
[www.bupa.com.hk](http://www.bupa.com.hk)



Bupa Hong Kong





# 保柏僱健康中小企醫療保障計劃 (啟航級別)

## Bupa Empower SME Health Insurance Scheme (Starter Tier)



### 保障金額表 Schedule of Benefits

2024年1月1日版本 1 January 2024 Edition

#### 主要保障 Core Benefits

請選擇以下其中一項 Please choose one of the options below:

- A. 住院及手術保障 Hospital and Surgical Benefit
- B. 門診手術保障 Out-patient Procedure Benefit
- C. 門診保障 Clinical Benefit
- A. 住院及手術保障 Hospital and Surgical Benefit + C. 門診保障 Clinical Benefit
- B. 門診手術保障 Out-patient Procedure Benefit + C. 門診保障 Clinical Benefit

翱翔級別的計劃選項只適用於5名或以上僱員的企業。2至4名僱員的企業請選擇啟航級別的計劃選項。

The Flyer tier plan options are applicable to companies with 5 or more employees. For companies with 2 to 4 employees, please choose from the Starter tier plan options.

A 住院及手術保障 <sup>①</sup> Hospital and Surgical Benefit <sup>①</sup>		每位會員最高賠償額 (港幣) Maximum Limit per Member (HK\$)	
		計劃 Plan A5 大房 <sup>②</sup> Ward <sup>②</sup>	
卓新網絡醫院 <sup>③</sup> QualityNet Hospitals <sup>③</sup>		卓新網絡保障 <sup>④</sup> QualityNet Benefit <sup>④</sup> (只適用於香港 HK coverage only)	非卓新網絡保障 Non-QualityNet Benefit (適用於世界各地 Worldwide coverage)
嘉諾撒醫院 Canossa Hospital 香港中文大學醫院 CUHK Medical Centre 港怡醫院 Gleneagles Hong Kong Hospital 香港浸信會醫院 HK Baptist Hospital 明德國際醫院 Matilda International Hospital 聖保祿醫院 St. Paul's Hospital 聖德肋撒醫院 St. Teresa's Hospital 仁安醫院 Union Hospital		不適用 N/A	
賠償率 Reimbursement percentage		基本選項 Basic option	升級選項 Upgrade option
		100%	80%
		100%	100%
1 住院及膳食費 (每合約年度計每病症最多120日) Room and Board (Maximum 120 days per Disability per Contract Year)		每日 500 each day	
2 住院雜費 (每合約年度計) Miscellaneous Hospital Services (Per Contract Year)		6,000	
3 深切治療 (住房及膳食費之補足) (每合約年度每病症計) Intensive Care (Supplement to Room and Board) (Per Disability per Contract Year)		5,000	
4 私家看護費 Private Nursing		不適用 N/A	
5 外科醫生費及巡房費 (只適用於外科手術) (每合約年度每病症計) Surgeon and Attendance Fees (For surgical case only) (Per Disability per Contract Year)			
◦ 複雜 Complex		26,000	
◦ 大型 Major		13,000	
◦ 中型 Intermediate		6,500	
◦ 小型 Minor		3,250	
6 麻醉科醫生費 (每合約年度每病症計) Anaesthetist's Fees (Per Disability per Contract Year)			
◦ 複雜 Complex		7,800	
◦ 大型 Major		3,900	
◦ 中型 Intermediate		1,950	
◦ 小型 Minor		975	
7 手術室費用 (每合約年度每病症計) Operating Theatre Fees (Per Disability per Contract Year)			
◦ 複雜 Complex		7,800	
◦ 大型 Major		3,900	
◦ 中型 Intermediate		1,950	
◦ 小型 Minor		975	
8 住院醫生巡房費 (只適用於非手術治療) (每合約年度計每病症最多120日) In-patient Physician's Fees (For non-surgical case only) (Maximum 120 days per Disability per Contract Year)		每日 500 each day	
9 住院專科醫生費 (每合約年度計) In-patient Specialist's Fees (Per Contract Year)		3,000	
◦ 須獲主診註冊西醫以書面轉介 <sup>⑤</sup> (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除外)			
◦ Subject to written referral <sup>⑤</sup> from the attending Registered Medical Practitioner (except for services performed by pathologist, radiologist or Physiotherapist during Hospital Confinement)			
日間手術保障 <sup>⑥</sup> Day Case Procedure Benefits <sup>⑥</sup>			
◦ A10 至 A11 項將支付(i)由註冊西醫於診所或醫院日症房進行診所手術或日症或(ii)無需過夜的住院的費用。「卓新網絡保障」只支付已獲取初步保障審核的費用。附加醫療保障(如有)並不適用。			
◦ 單獨賠償在沒有獲取初步保障審核的情況下,於需要過夜的住院期間進行以下程序而引致的合資格費用,以「非卓新網絡保障」之每位會員最高賠償額及賠償率為限,附加醫療保障(如有)並不適用。如需要過夜的住院已獲取初步保障審核,合資格費用將在「卓新網絡保障」(如入住卓新網絡醫院)或「非卓新網絡保障」(如入住其他醫院)下A1-A9項及附加醫療保障(如適用)下賠償。			
◦ Items A10 - A11 cover expenses incurred for (i) Clinical Operations or Day Case at a clinic or day-case unit of a Hospital performed by a Registered Medical Practitioner or (ii) Hospital Confinement without an overnight stay. Expenses are payable under QualityNet Benefit only when pre-authorization has been obtained. Supplementary Major Medical Benefit (if any) will not be applicable.			
◦ Exclusively payable for eligible expenses incurred by the procedures below performed during overnight Hospital Confinement without pre-authorization obtained up to the Maximum Limit per Member of Non-QualityNet Benefit only, subject to the reimbursement percentage. Supplementary Major Medical Benefit (if any) will not be applicable. If pre-authorization is obtained for Hospital Confinement with an overnight stay, eligible expenses shall be payable under benefit items A1 - A9 of QualityNet Benefit for Confinement at QualityNet Hospitals or Non-QualityNet Benefit for Confinement at other hospitals, and Supplementary Major Medical Benefit (if applicable).			
10 日間內窺鏡程序 (每合約年度每病症計) Day Case Endoscopy Procedure (Per Disability per Contract Year)		5,200	
11 日間病毒性疣及皮損程序 <sup>⑦</sup> (每合約年度計) Day Case Viral Warts and Skin Lesions Procedure <sup>⑦</sup> (Per Contract Year)		5,200	



		每位會員最高賠償額 (港幣) Maximum Limit per Member (HK\$)	
A 住院及手術保障 <sup>①</sup> Hospital and Surgical Benefit <sup>①</sup>		計劃 Plan A5 大房 <sup>④</sup> Ward <sup>④</sup>	
		卓新網絡保障 <sup>②</sup> QualityNet Benefit <sup>②</sup> (只適用於香港 HK coverage only)	非卓新網絡保障 Non-QualityNet Benefit (適用於世界各地 Worldwide coverage)
12 入院前及出院後之門診護理 (每合約年度計) Pre-admission and Post-hospitalisation Out-patient Care (Per Contract Year)	<ul style="list-style-type: none"> <li>包括一次引致住院、診所手術或日症的門診及所有在出院、診所手術或日症後 6 星期內的跟進療程門診護理</li> <li>賠償包括診症、醫療必需的西藥、診斷測試及物理治療的費用</li> <li>Including one out-patient visit resulting in a Hospital Confinement, Clinical Operation or Day Case and all related follow-up visits on an out-patient basis within six weeks after discharge from Hospital, Clinical Operation or Day Case</li> <li>Payable for consultation fee, Medically Necessary Western Medication, diagnostic tests and physiotherapy</li> </ul>	1,500	
13 精神科治療 (每合約年度計) (只適用於香港) Psychiatric Treatment (Per Contract Year) (Applicable to Hong Kong only)		不適用 N/A	3,000
14 癌症及嚴重傳染病 <sup>⑤</sup> (每合約年度每病症計) Cancer and Serious Infectious Disease <sup>⑤</sup> (Per Disability per Contract Year)	<ul style="list-style-type: none"> <li>如會員確診或因癌症或嚴重傳染病接受治療，住院及手術保障項目 A1-A9 及 A12-A13 的最高賠償額將會提升至所列的最高百分比。</li> <li>為免存疑，本保障金額表上所列的適用最高日數及賠償率將於所有情況下均維持不變。</li> <li>If the Member is diagnosed with or receives treatment due to Cancer or a Serious Infectious Disease, the Maximum Limits of items A1-A9 and A12-A13 under Hospital and Surgical Benefit shall be increased up to the maximum percentage as specified.</li> <li>For the avoidance of doubt, the applicable maximum number of days and reimbursement percentage as shown in this Schedule of Benefits shall remain unchanged under all circumstances.</li> </ul>	項目 A1-A9 及 A12-A13 的最高賠償額之 120% 120% of the Maximum Limits of items A1-A9 and A12-A13	
15 第二索償現金津貼 (每合約年度計最多 120 日) Second Claims Incentive (Maximum 120 days per Contract Year)	<ul style="list-style-type: none"> <li>如根據住院及手術保障可獲得住院賠償，而該賠償已由其他保險公司支付 (保柏或保柏集團內的任何公司除外)，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。</li> <li>If any reimbursement is payable in respect of a Hospital Confinement under Hospital and Surgical Benefit and such reimbursement has been paid by an insurance company other than Bupa or any company within the Bupa group of companies, 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.</li> </ul>	每日 250 each day	
16 門診手術額外現金 Out-patient Surgery Cash Allowance	<ul style="list-style-type: none"> <li>在無獲得任何住房及膳食費賠償的情況下，此保障將在外科醫生費及巡房費之上支付以下任何由註冊西醫在診所或醫院日症房進行的合資格手術：關節鏡檢查、支氣管鏡檢查、結腸鏡檢查、陰道鏡檢查、膀胱鏡檢查、上消化道內視鏡檢查、痔瘡動脈結紮術 / 痔瘡橡皮圈結紮法、子宮鏡檢查、子宮頸電環切術、痔瘡環狀切除手術</li> <li>Payable in addition to Surgeon and Attendance Fees for any of the following eligible surgeries performed at a clinic or day-case unit of a Hospital by a Registered Medical Practitioner, provided that no Room and Board Benefit is payable: Arthroscopy, Bronchoscopy, Colonoscopy, Colposcopy, Cystoscopy, Esophagogastroduodenoscopy, Haemorrhoid Artery Ligation (HAL)/Rubber Band Ligation (RBL), Hysteroscopy, Loop Electro-surgical Excision Procedure (LEEP), Stapled Haemorrhoidectomy</li> </ul>	每日 250 each day	
		每位會員最高賠償額 (港幣) Maximum Limit per Member (HK\$)	
B 門診手術保障 Out-patient Procedure Benefit		計劃 Plan B1	
		卓新網絡保障 <sup>②</sup> QualityNet Benefit <sup>②</sup> (只適用於香港 HK coverage only)	
卓新網絡服務供應商的數目 No. of QualityNet Service Providers		約 Around 70	
<p>如會員於卓新網絡服務供應商診所或日症中心由卓新網絡註冊西醫進行受保外科手術，此保障將賠償以下 B1 - B5 項的合資格費用，以每年最高賠償額為限。受保外科手術涵蓋的專科包括皮膚科、腸胃科、耳鼻喉科及眼科。</p> <p>This Benefit is payable for eligible expenses of the following items B1 - B5 incurred for the following covered surgical procedures performed at a QualityNet Service Provider's clinic or day case centre by a QualityNet Registered Medical Practitioner, subject to the applicable Overall Annual Limit. The covered surgical procedures include the specialties of dermatology, gastroenterology, otorhinolaryngology and ophthalmology.</p> <p>受保外科手術<sup>⑥</sup> Covered surgical procedures<sup>⑥</sup>:</p> <ul style="list-style-type: none"> <li>內窺鏡 (例如胃鏡及腸鏡) Endoscopy e.g. gastroscopy and colonoscopy</li> <li>皮膚科手術 Dermatological procedures</li> <li>耳鼻喉科手術 Ear, nose and throat procedures</li> <li>眼科手術 Eye procedures</li> <li>痔瘡注射或結紮 Haemorrhoid injection or ligation</li> <li>切割及引流 Incision and drainage</li> <li>小型切除、去除異物 / 皮下組織 Minor excision, removal of foreign/substaneous object</li> <li>縫合、傷口修復及護理、敷料 Suturing, wound repair and care, office dressings</li> </ul>			
每年最高賠償額 Overall Annual Limit	基本選項 Basic option	100,000	
	升級選項 Upgrade option	200,000	
1 外科醫生費及巡房費 (只適用於外科手術) Surgeon and Attendance Fees (For surgical case only)	全數支付合資格的醫療費用 (以每年最高賠償額為限) Full cover for eligible medical expenses (Subject to the Overall Annual Limit)		
2 麻醉科醫生費 Anaesthetist's Fees			
3 手術室費用 Operating Theatre Fees			
4 日症雜項服務 Miscellaneous Day Case Services			
5 術前門診護理 Pre-surgical Procedure Out-patient Care			
<ul style="list-style-type: none"> <li>包括一次引致診所手術或日症的門診</li> <li>賠償包括於診所手術或日症當日之診症、醫療必需的西藥及診斷測試的費用</li> <li>Including one out-patient visit resulting in a Clinical Operation or Day Case</li> <li>Payable for consultation fee, Medically Necessary Western Medication and diagnostic tests on the same day of Clinical Operation or Day Case</li> </ul>			

每位會員最高賠償額 (港幣) Maximum Limit per Member (HK\$)

C 門診保障 Clinical Benefit		計劃 Plan C4	計劃 Plan C5	計劃 Plan C6
		卓新網絡保障® QualityNet Benefit®		
卓新服務供應商的數目 No. of QualityNet Service Providers		約 Around 600	約 Around 500	約 Around 400
此保障全數支付以下合資格的醫療費用 (如有自付費除外), 以每合約年度診治總次數及個別保障項目的分項次數為限。 This Benefit fully covers the eligible medical expenses shown below subject to co-payment (if any), maximum number of visits in aggregate and sub-limits on the number of visits for each benefit item per Contract Year.				
自付費 (每次診治計) Co-payment (Per visit)	基本選項 Basic option	項目 Item C1: \$30 項目 Items C2 - C3, C7 - C8: \$50	項目 Item C1: \$30 項目 Items C2 - C3: \$50	項目 Item C1: \$30 項目 Items C7 - C8: \$50
	升級選項 Upgrade option	\$0	\$0	\$0
診治總次數 (每合約年度計) Maximum number of visits in aggregate (Per Contract Year) ◦ 診治總次數亦受下列個別保障項目的分項次數所限, 每一項目以每日最多一次為限 ◦ The maximum number of visits in aggregate is also subject to the sub-limits below on the number of visits for each benefit item and a maximum of one visit per item per day	基本選項 Basic option	項目 Items C1 - C3, C7 - C11: 共30次 30 visits in total	項目 Items C1 - C3, C9 - C11: 共30次 30 visits in total	項目 Items C1, C7 - C8: 共30次 30 visits in total
	升級選項 Upgrade option	不限次數 No visit limit	不限次數 No visit limit	不限次數 No visit limit
1 普通科醫生 General Practitioner ◦ 診症 (包括診症費及於普通科醫生診所處方及取得的最多5日之基本醫療必需西藥) ◦ Consultation (Including consultation fee and up to 5 days of basic Medically Necessary Western Medication prescribed and obtained at the General Practitioner's clinic)		每合約年度30次 30 visits per Contract Year	每合約年度30次 30 visits per Contract Year	每合約年度30次 30 visits per Contract Year
2 專科醫生 Specialist ◦ 診症 (包括診症費及於專科醫生診所處方及取得的最多5日之基本醫療必需西藥。該診症須獲註冊西醫書面轉介 <sup>④</sup> , 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) ◦ Consultation (Including consultation fee and up to 5 days of basic Medically Necessary Western Medication prescribed and obtained at the Specialist's clinic. Subject to written referral <sup>④</sup> from a Registered Medical Practitioner, except for dermatology, family medicine, gynaecology, ophthalmology, orthopaedics, otolaryngology, paediatric surgery, paediatrics and psychiatry)		每合約年度30次 30 visits per Contract Year	每合約年度10次 10 visits per Contract Year	不適用 N/A
3 物理治療師 Physiotherapist ◦ 只限診症費及須獲註冊西醫書面轉介 <sup>④</sup> ◦ Treatment fee only and subject to written referral <sup>④</sup> from a Registered Medical Practitioner		每合約年度30次 30 visits per Contract Year	每合約年度10次 10 visits per Contract Year	
4 脊醫 Chiropractor		不適用 N/A	不適用 N/A	不適用 N/A
5 診斷影像及化驗 Diagnostic Imaging and Laboratory Tests				
6 醫生處方西藥 Prescribed Western Medication				
7 中醫師 Chinese Herbalist ◦ 診症 (包括診症費及當日由註冊中醫在診所處方並由合法來源取得之基本醫療必需中藥費用) ◦ 此保障將支付由註冊中醫進行的天灸治療 ◦ Consultation (Including consultation fee and basic Medically Necessary Chinese Medicines prescribed at a Registered Chinese Medicine Practitioner's clinic and obtained at a legitimate source on the same day of consultation) ◦ Payable for tianjiu performed by a Registered Chinese Medicine Practitioner		每合約年度共30次 30 visits in total per Contract Year	不適用 N/A	每合約年度共10次 10 visits in total per Contract Year
8 跌打醫師 Chinese Bonesetter ◦ 診症 (包括診症費及當日由註冊中醫在診所處方並由合法來源取得之基本醫療必需中藥費用) ◦ Consultation (Including consultation fee and basic Medically Necessary Chinese Medicines prescribed at a Registered Chinese Medicine Practitioner's clinic and obtained at a legitimate source on the same day of consultation)				
9 精神科相關治療® Psychiatric-related Treatments®		每合約年度共5次 5 visits in total per Contract Year	每合約年度共5次 5 visits in total per Contract Year	不適用 N/A
10 臨床心理輔導 Psychological Counselling ◦ 須獲精神科醫生書面轉介 <sup>④</sup> ◦ Subject to written referral <sup>④</sup> from a Psychiatrist				
11 保健服務 Wellness Service 每名會員可於指定中心享用以下服務: ◦ 牙科服務 (洗牙) Each Member is entitled to the following service at a designated centre: ◦ Dental service (scaling and polishing)		每合約年度1次 1 visit per Contract Year	每合約年度1次 1 visit per Contract Year	不適用 N/A

# 保柏僱健康中小企醫療保障計劃 (啟航級別)

## Bupa Empower SME Health Insurance Scheme (Starter Tier)



### 自選保障 Optional Benefits

	Maximum Limit per Member (HK\$) 每位會員最高賠償額 (港幣)	
<b>D 附加醫療保障 (自選保障) (只適用於5名或以上僱員的企業)</b> <b>Supplementary Major Medical Benefit (Optional)</b> <b>(Only applicable to companies with 5 or more employees)</b>	計劃 Plan D5 大房 <sup>®</sup> Ward <sup>®</sup> (只適用於選擇了附有升級選項的住院及手術保障計劃 A5 Only applicable if choosing Hospital and Surgical Benefit Plan A5 with upgrade option)	
<b>賠償率 Reimbursement percentage</b>	80%	
<ul style="list-style-type: none"> <li>此保障支付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) 可獲賠償之在港住院、日症及診所手術的合資格費用 (經由註冊西醫證明, 因在香港以外發生緊急事故導致在外地住院或進行手術則除外), 以本保障之最高賠償額為限。</li> <li>此保障並不會就入住總統套房/ 貴賓房/ 豪華房的住院費用而作出賠償。</li> <li>如會員住院時並非根據原有之計劃住房, 保障額將因應升級住房而作出調整:                             <ul style="list-style-type: none"> <li>- 大房至半私家房: 50%</li> <li>- 大房至私家房: 25%</li> </ul> </li> <li>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。</li> <li>This Benefit is payable for any eligible expenses incurred during Hospital Confinement, Day Case and Clinical Operation in Hong Kong (unless the hospitalisation or surgery overseas is directly resulting from medical Emergency outside Hong Kong as certified by a Registered Medical Practitioner) 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), which is subject to the Maximum Limit of this benefit.</li> <li>This Benefit shall not be payable for Hospital Confinement in class of suite/VIP/deluxe room of a Hospital.</li> <li>Adjustment factors for room upgrade will be applied if a Member is hospitalised not in accordance with plan level:                             <ul style="list-style-type: none"> <li>- From Ward to Semi-private Room: 50%</li> <li>- From Ward to Private Room: 25%</li> </ul> </li> <li>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.</li> </ul>	50,000 (每合約年度每病症計) (Per Disability per Contract Year)	
<b>E 特別住院現金保障 (自選保障) (只適用於5名或以上僱員的企業)</b> <b>Special Hospital Cash Benefit (Optional)</b> <b>(Only applicable to companies with 5 or more employees)</b>	計劃 Plan E1	計劃 Plan E2
<b>1 意外住院現金<sup>®</sup> (每合約年度最多120日)<sup>®</sup></b> <b>Accidental Hospital Cash<sup>®</sup> (Maximum 120 days per Contract Year)<sup>®</sup></b> <ul style="list-style-type: none"> <li>由因意外住院第一天開始支付</li> <li>Payable from the first day of Hospital Confinement due to an Accident</li> </ul>	每日1,000 each day	每日500 each day
<b>2 癌症及嚴重傳染病住院現金<sup>®</sup> (每合約年度最多120日)<sup>®</sup></b> <b>Cancer and Serious Infectious Disease Hospital Cash<sup>®</sup> (Maximum 120 days per Contract Year)<sup>®</sup></b> <ul style="list-style-type: none"> <li>由因癌症或嚴重傳染病住院第一天開始支付 (就嚴重傳染病的情況, 會員須於同一次入院期間連續入住深切治療病房至少10日)</li> <li>Payable from the first day of Hospital Confinement due to Cancer or Serious Infectious Disease (in the event of Serious Infectious Disease, the Member must be confined in the Intensive Care Unit for at least 10 consecutive days in one Hospital admission)</li> </ul>	每日2,000 each day	每日1,000 each day
<b>F 產科保障 (自選保障) (只適用於5名或以上僱員的企業)</b> <b>Maternity Benefit (Optional)</b> <b>(Only applicable to companies with 5 or more employees)</b>	計劃 Plan F1	計劃 Plan F2
<b>賠償率 Reimbursement percentage</b>	100%	100%
<b>順產 (每次懷孕計) Normal Delivery (Per pregnancy)</b>	40,000	25,000
<b>剖腹生產 (每次懷孕計) Caesarean Section (Per pregnancy)</b>	60,000	32,000
<b>流產 (每次懷孕計) Miscarriage (Per pregnancy)</b>	20,000	11,000
<ul style="list-style-type: none"> <li>產科保障將支付因受孕引致以下項目之醫療費用, 包括住院、註冊西醫診症及醫生處方西藥、診斷化驗、產前檢查及產後檢查, 以及初生嬰兒護理費用。</li> <li>此保障不包括任何初生嬰兒在住院期間之醫療費用, 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。</li> <li>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, 惟會員必須於此產科保障生效日後受孕。為免存疑, 若會員於妊娠37週後但於9個月等候期內分娩, 將不獲此產科保障賠償。</li> <li>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, 並不會於住院及手術保障/門診手術保障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住院及手術保障及/或門診保障有關項目覆蓋則除外)。</li> <li>The Maternity Benefit shall cover medical expenses incurred for the following 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 newborn baby.</li> <li>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.</li> <li>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 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.</li> <li>All pregnancy or maternity related medical expenses shall be exclusively payable under this Maternity Benefit and no benefit shall be payable under the Hospital and Surgical Benefit/Out-patient Procedure Benefit or other optional benefits (except for those maternity related psychiatric conditions covered under relevant Hospital and Surgical Benefit and/or Clinical Benefit items).</li> </ul>		

		每位會員最高賠償額 (港幣) Maximum Limit per Member (HK\$)	
G 牙科保障 (自選保障) (每合約年度計) Dental Benefit (Optional) (Per Contract Year)		計劃 Plan G1	
		網絡牙科中心保障 Network Dental Centre benefit	非網絡牙科中心保障 Non-Network Dental Centre benefit
網絡牙科中心數目 No. of network dental centres		12	不適用 N/A
適用範圍 Eligibility	只適用於在網絡牙科中心 <sup>®</sup> 診症時間以內由註冊牙醫 (所有適用項目) 或註冊牙齒衛生員 (只適用於項目 G1) 進行的合資格牙科服務 Only applicable to covered dental service items performed by a Registered Dentist (for all applicable items) or Registered Dental Hygienist (for item G1 only) at Network Dental Centres <sup>®</sup> within consultation hours	適用於在網絡牙科中心以外由註冊牙醫 (所有適用項目) 或註冊牙齒衛生員 (只適用於項目 G1) 進行的牙科服務, 或於網絡牙科中心保障以外的項目。所有合資格費用將以下列的最高賠償額為限。請先直接向牙科服務供應商支付費用, 然後再向保柏申請索償。 Applicable to dental services from a Registered Dentist (for all applicable items) or Registered Dental Hygienist (for item G1 only) which are not performed at Network Dental Centres or covered under Network Dental Centre benefit. All eligible dental expenses will be subject to the maximum limits below. Please settle the expenses with the dental providers directly and submit your claim to Bupa.	
賠償率 Reimbursement percentage		不適用 N/A	100%
1 洗牙 Scaling and polishing		每合約年度共一次 One visit in total per Contract Year	
2 定期口腔檢查 Routine oral examination			
3 口腔 X 光及藥物 Intra-oral X-rays and medications		全數賠償 <sup>®</sup> Full cover <sup>®</sup>	
4 補牙及脫牙 Fillings and extractions		全數賠償 <sup>®</sup> Full cover <sup>®</sup> (只適用於蛀牙或患嚴重牙周病之牙齒之大牙 (銀粉) 或門牙 (瓷粉) 補牙。脫除智慧齒、複雜脫牙、口腔手術脫除牙腳、需移走牙骨或牙齒、任何口腔手術或因矯正牙齒而脫牙將不包括在保障內) (Applicable to fillings and extractions due to tooth decay or gum disease only, including amalgam (silver) fillings for premolar and molar teeth and white (composite) fillings for front teeth. Extraction of wisdom teeth, complicated extractions, extractions requiring bone removal, surgical extractions or extractions for orthodontic reasons are excluded)	
5 膿瘡排放 Drainage of abscesses		全數賠償 <sup>®</sup> Full cover <sup>®</sup> (只適用於緊急牙科狀況下的膿瘡切割及排放) (Includes incision and drainage of abscesses for dental emergency cases only)	
6 齒尖或齒邊修復 Pins for cusp restoration		不適用 N/A	
7 活動假牙、牙冠及牙橋 (只適用於因意外而導致) Dentures, crowns and bridges (only in case of an Accident)		不適用 N/A	
8 牙周病治療 Periodontal (gum) treatment		全數賠償 <sup>®</sup> Full cover <sup>®</sup> (只限由普通科註冊牙醫進行之輕微至中度的牙周病治療, 包括清洗牙周袋內的牙菌膜及牙根刮治等牙科治療) (Includes treatment of mild to moderate Periodontal (gum) disease, which involves curettage and root planing with medication as required, and is limited to treatment by a general Registered Dentist)	
9 牙痛急症處理 Emergency consultation and treatment		全數賠償 <sup>®</sup> Full cover <sup>®</sup> (只適用於緊急牙痛舒緩 (包括敷料及藥物)) (Includes emergency pain relief of toothache (including dressing and medication) only)	

免費服務 Free Service

H 免費保柏國際援助計劃 (每合約年度計)  
Free Bupa Worldwide Assistance Programme (Per Contract Year)

提供海外及國內住院按金墊支服務, 全數支付緊急醫療運送費用及送返香港後高達港幣 12 萬元的額外住院保障, 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 Mainland 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.



# 保柏僱健康中小企醫療保障計劃 (啟航級別)

## Bupa Empower SME Health Insurance Scheme (Starter Tier)



### 附註 Notes

#### ① 有關住院及手術保障

- 同一項目的合資格費用不可獲「住院及手術保障」表中多於一個保障項目的賠償。
- 合資格之診所手術或日症，將於「住院及手術保障」下賠償。診所手術及日症指註冊西醫於診所或醫院日症房進行之醫療必需手術而無必要留院，但該等手術須獲保柏分類為診所手術或日症手術。於「住院及手術保障」下的保障項目中所列之最多日數乃指於卓新網絡醫院及非卓新網絡醫院合併計算之總住院日數。

#### ② 入住怡怡醫院接受治療前，請瀏覽 [www.bupa.com.hk/pdf/ghk.pdf](http://www.bupa.com.hk/pdf/ghk.pdf) 或致電保柏查詢有關住房類別及在保柏保障計劃下相應之住房等級。

#### ③ 此為於印刷日時最新之卓新網絡醫院名單，此名單可能會不時更改。你可於入院前致電保柏查詢最新名單。

#### ④ 會員可在轉介信發出日起計6個月內，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 關於癌症及嚴重傳染病保障

此保障將於以下情況下作出賠償：

- 會員確診癌症並入住醫院最少連續6小時，以接受該癌症的醫療必需的治療及診斷；或
- 會員患上任何嚴重傳染病，並在同一次入院時入住醫院的深切治療病房最少連續10日，以接受該嚴重傳染病的醫療必需的治療及診斷。
- 癌症指惡性腫瘤。其特徵為惡性細胞漸進地、不受控制地生長，侵入及破壞正常及周邊組織。癌症必需由組織病理學報告證實腫瘤呈陽性。其亦包括白血病、淋巴瘤或肉瘤。以下各項除外：
  - a. 原位癌、宮頸病變、CIN-1、CIN-2、CIN-3顯示惡化的或在組織學上被描述為癌前病變的腫瘤；
  - b. 除惡性黑色素瘤以外的所有皮膚癌；
  - c. 在組織學上被描述為TNM T1(a)或T1(b)分級或其他等效或更輕分級的前列腺癌；
  - d. 輕於RAI III期的慢性淋巴細胞白血病；
  - e. 在組織學上被描述為TNM TINOMO分期或更輕分期的甲狀腺癌。
- 嚴重傳染病包括嚴重急性呼吸系統綜合症(SARS)(SARS Cov-1)、登革熱、日本腦炎、克雅氏病(包括人類瘋牛病變異型克雅氏病)、軍團菌、阿米巴痢疾、霍亂、瘧疾、麻疹、破傷風、炭疽、麻風病、狂犬病(人類)、白喉、急性脊髓灰質炎、黃熱病、瘟疫、猩紅熱、2019冠狀病毒病(COVID-19)(SARS Cov-2)及世界衛生組織(WHO)於日後發佈的任何國際關注的突發公共衛生事件(PHEIC)。

#### ⑥ 關於「住院及手術保障」下的卓新網絡保障

要在入住保柏卓新網絡醫院時享有100%賠償，你必須依循以下的規定：

- 入院前必須向保柏卓新網絡醫院出示「保柏卓新網絡醫療卡」，並以此卡來繳付醫療費用；
- 住院治療必須由註冊西醫轉介，並由卓新網絡註冊西醫於你入住的卓新網絡醫院進行，你必須入住此保障金額表上所示的指定住房級別或較低之病房；
- 在以下的情況，必須獲得保柏初步保障審核：
  - 住院；
  - 診所手術或日症(按保柏供應商指引之要求)；
  - 診斷影像或化驗(按保柏供應商指引之要求)；或
  - 由卓新網絡註冊西醫轉介之專科治療，而保柏卓新網絡未能提供該專科。

如沒有依循以上規定，合資格的醫療費用將會根據「非卓新網絡保障」作出賠償。

請登入保柏的客戶服務網站myBupa查閱適用於住院及手術保障的完整卓新網絡服務供應商名單，此名單可能會不時更改。

#### ⑦ 有關日間手術保障

- 如於卓新網絡服務供應商進行及以「卓新網絡保障」支付內窺鏡和病毒性疣及皮損程序之前必須經由卓新網絡醫生申請初步保障審核(按保柏供應商指引之要求)。
- 如由你所選的醫生及服務供應商在(i)診所或醫院日症房或(ii)無需過夜的住院進行程序，所產生的符合資格的費用，將根據「非網絡保障」之每位會員最高賠償額為限。會員則無需申請初步保障審核。
- 如程序於需要過夜的住院進行，以下情況不需要申請初步保障審核：
  - 任何於香港以外的地方所進行的治療；
  - 於香港政府公立醫院大房住院及進行住院手術；或
  - 如你先向其他保險公司索償，再向保柏申請第二索償。
- 有關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，請參閱保柏客戶服務網站myBupa上的會籍文件頁面。此列表可能會不時更改。
- 如會員於同一日同時接受多過一次的病毒性疣及皮損治療，將被算作為一次手術。保柏保留權利要求會員提供醫療報告以供檢閱。

#### ⑧ 關於「門診手術保障」下的卓新網絡保障

- 要就受保外科手術的合資格費用享有全數賠償(以每年最高賠償額為限)，你必須依循以下的規定：
  - 在保柏卓新網絡服務供應商診所或日症中心接受治療前必須出示「保柏卓新網絡醫療卡」，並以此卡來繳付醫療費用；
  - 門診手術必須由卓新網絡註冊西醫提供，並於卓新網絡診所或日症中心進行；
  - 診所手術或日症、診斷影像及化驗必須按保柏供應商指引之要求得到保柏初步保障審核。
- 如沒有依循以上規定，醫療費用將被視作不符合索償資格。
- 請登入保柏的客戶服務網站myBupa查閱適用於門診手術保障的完整卓新網絡服務供應商名單，此名單可能會不時更改。

要查閱門診手術保障下完整的受保外科手術列表，請登入保柏的客戶服務網站myBupa，此名單可能會不時更改。

#### ⑨ 關於「門診保障」下的卓新網絡保障

- 門診保障下的普通科醫生及中醫師亦涵蓋由指定的視像診症服務供應商的普通科醫生及中醫師醫療診症服務的診症費。此保障涵蓋指定的視像診症服務供應商的藥物運送費用(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保柏的網站查閱，此名單可能會不時更改及更新。
- 要在卓新網絡保障下享有全數賠償的合資格門診治療，你必須依循以下的規定：
  - 在卓新網絡服務供應商接受治療前必須出示「保柏卓新網絡醫療卡」，並以此卡來繳付醫療費用；
  - 門診治療必須由卓新網絡服務供應商於其診所進行(除非屬專科治療，而保柏卓新網絡未能提供該專科，並已取得初步保障審核)；
  - 專科醫生診症(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)及物理治療必須經由註冊西醫書面轉介；
  - 由卓新網絡註冊西醫轉介之專科治療，而保柏卓新網絡未能提供該專科，則必須得到保柏初步保障審核。
- 如沒有依循以上規定，醫療費用將被視作不符合索償資格。
- 請登入保柏的客戶服務網站myBupa查閱適用於門診保障的完整卓新網絡服務供應商名單，此名單可能會不時更改。

#### ⑩ 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)及帕金森病的門診診治(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門診保障下的其他項目，有關費用只可獲此項目9的賠償，而不會獲得其他項目之賠償。

#### ⑪ 關於意外住院現金保障

- 意外住院現金保障將於以下情況下予以支付：
  - 在同一醫院住院最少連續6小時，且住房及膳食費保障應予以支付；及
  - 意外事故發生與該事故所致意料之外住院之間，並未相隔超過48小時。

#### ⑫ 關於癌症及嚴重傳染病住院現金保障

- 癌症及嚴重傳染病住院現金保障將於以下情況下予以支付：
  - 因確診癌症而住院最少連續6小時，以接受醫療必需的癌症診斷及治療，且住房及膳食費保障應予以支付；或
  - 因感染任何嚴重傳染病而在同一次入院於醫院深切治療病房住院至少連續10日，以接受對該嚴重傳染病的醫療必需的診斷及治療，且深切治療費保障應予以支付。

#### ⑬ 每合約年度的最高賠償日數以「意外住院現金保障」及「癌症及嚴重傳染病住院現金保障」合併計算。

#### ⑭ 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、鯉魚涌、尖沙咀、將軍澳、沙田、青衣、東涌等。請登入保柏的客戶服務網站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。

#### ⑮ 要享有全數賠償的網絡牙科中心保障：

- 會員必須於指定網絡牙科中心出示保柏醫療卡及香港身份證以作核實及紀錄便可使用免找數服務。如會員直接向網絡牙科中心繳付費用，合資格的索償將根據非網絡牙科中心保障作出賠償，並以最高賠償額為限。
- 每合約年度，網絡牙科中心保障下項目3-5及8-9不設診治次數上限。

- ① About Hospital and Surgical Benefit
- Eligible expenses incurred in respect of the same item shall not be recoverable under more than one benefit item in the table for Hospital and Surgical Benefit.
  - Clinical Operation or Day Case, if eligible, will be paid under Hospital and Surgical Benefit. Clinical Operation and Day Case mean Medically Necessary surgical procedures which may be carried out at a clinic or day-case unit of a Hospital by a Registered Medical Practitioner where a stay in Hospital is not required, provided that the surgical procedure is classified as such by Bupa. The maximum number of days specified under the benefit items of Hospital and Surgical Benefit apply to the aggregate sum of Hospital stays under QualityNet Hospitals and Non-QualityNet Hospitals.
- ② For in-patient treatments at Gleneagles Hong Kong Hospital, please visit [www.bupa.com.hk/pdf/gkh.pdf](http://www.bupa.com.hk/pdf/gkh.pdf) or call Bupa to get details of the room types and how they are classified under Bupa's cover prior to your hospital stay.
- ③ The list of QualityNet Hospitals is current at the date of printing and it is subject to change from time to time. For the current list, please call Bupa before hospital admission.
- ④ 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.
- ⑤ About Cancer and Serious Infectious Disease Benefit
- This benefit is payable provided that:
- The Member is diagnosed with Cancer and confined in a Hospital for at least 6 consecutive hours for the purpose of receiving Medically Necessary treatment and diagnosis of such Cancer; or
  - The Member has contracted any of the Serious Infectious Diseases and is confined in the Intensive Care Unit of a Hospital for at least 10 consecutive days in one Hospital admission, for the purpose of receiving Medically Necessary treatment and diagnosis of such Serious Infectious Disease.
- Cancer means the presence of a malignant tumour that is characterised by progressive, uncontrolled growth of malignant cells and invasion and destruction of normal and surrounding tissue. Cancer must be positively diagnosed with histopathological confirmation. This also includes leukaemia, lymphoma or sarcoma. The following are excluded:
- a. Tumours showing the malignant changes of carcinoma-in-situ, cervical dysplasia, CIN-1, CIN-2, CIN-3 or which are histologically described as pre-malignant;
  - b. All skin cancers other than malignant Melanomas;
  - c. Prostate cancers which are histologically described as TNM Classification T1(a) or T1(b) or are of another equivalent or lesser classification;
  - d. Chronic Lymphocytic Leukaemia less than RAI Stage III;
  - e. Thyroid cancers which are histologically described as TNM classification TINOMO or a lesser classification.
- Serious Infectious Diseases include Severe Acute Respiratory Syndrome (SARS) (SARS Cov-1), Dengue Fever, Japanese Encephalitis, Creutzfeldt-Jakob Disease (Including Variant Creutzfeldt-Jakob Disease, human form of Mad Cow Disease), Legionnaires' Disease, Amoebic Dysentery, Cholera, Malaria, Measles, Tetanus, Anthrax, Leprosy, Rabies (Human), Diphtheria, Acute Poliomyelitis, Yellow Fever, Plague, Scarlet Fever, Coronavirus Disease 2019 (COVID-19) (SARS Cov-2) and any future Public Health Emergency of International Concern (PHEIC) according to the World Health Organization (WHO).
- ⑥ About QualityNet Benefit under Hospital and Surgical Benefit
- To enjoy 100% reimbursement for confinement at the Bupa QualityNet Hospitals, you must fulfil the below requirements:
    - Bupa QualityNet (BQN) Card must be presented to the Bupa QualityNet Hospital before confinement and used for payment of medical expenses;
    - Hospital treatment must be referred by a Registered Medical Practitioner and performed by a QualityNet Registered Medical Practitioner, and carried out at a QualityNet Hospital where you are confined according to the restricted room level or below as specified in this Schedule of Benefits;
    - Pre-authorisation must be obtained from Bupa for:
      - Hospital Confinement;
      - Clinical Operation or Day Case (as required by Bupa's provider guidelines);
      - Diagnostic imaging or laboratory tests (as required by Bupa's provider guidelines); or
      - Any treatment by a Specialist referred by a QualityNet Registered Medical Practitioner if the relevant specialty is not available in Bupa QualityNet.
  - If the above requirements are not followed, eligible medical expenses will be reimbursed under Non-QualityNet Benefit.
- For the full list of Bupa QualityNet Service Providers eligible for Hospital and Surgical Benefit, please log in to Bupa's customer service portal myBupa. This list is subject to change from time to time.
- ⑦ About Day Case Procedure Benefits
- For procedures performed at a QualityNet Service Provider and to be paid under QualityNet Benefit, pre-authorisation must be obtained through the QualityNet doctor from Bupa prior to endoscopy and viral warts and skin lesions procedures (as required by Bupa's provider guidelines).
  - For procedures performed by your choice of doctor and service provider for (i) Clinical Operations or Day Case at a clinic or day-case unit of a Hospital or (ii) Hospital Confinement without an overnight stay, the eligible expenses incurred will be payable up to the Maximum Limit per Member of Non-QualityNet Benefit without pre-authorisation required.
  - For procedures performed in Hospital Confinement with an overnight stay, no pre-authorisation is required in any of the following situations:
    - Any treatment performed outside Hong Kong;
    - Hospital Confinement and surgical procedures performed at ward level in the public sector of government Hospitals; or
    - If you file a claim for your procedure with another insurer first and submit a second claim to Bupa.
  - 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.
- ⑧ If a Member receives more than one viral warts and skin lesions treatments at the same time on the same day, it will be counted as one operation. Bupa reserves the right to ask for a medical report for review.
- ⑨ About QualityNet Benefit under Out-patient Procedure Benefit
- To enjoy full cover for eligible medical expenses incurred from covered surgical procedures up to the Overall Annual Limit, you must fulfil the below requirements:
    - Bupa QualityNet (BQN) Card must be presented to the Bupa QualityNet Service Provider's clinics or day case centres before treatment and used for payment of medical expenses;
    - Surgical procedure must be performed by a QualityNet Registered Medical Practitioner and carried out at a QualityNet clinic or day case centre;
    - Pre-authorisation must be obtained from Bupa as required by Bupa's provider guidelines for Clinical Operation, Day Case, diagnostic imaging and laboratory tests.
  - If the above requirements are not followed, medical expenses will be considered as ineligible for reimbursement.
  - For the list of Bupa QualityNet Service Providers eligible for Out-patient Procedure Benefit, please log in to Bupa's customer service portal myBupa. This list is subject to change from time to time.
- ⑩ For the full list of surgical procedures covered under Out-patient Procedure Benefit, please log in to Bupa's customer service portal myBupa. This list is subject to change from time to time.
- ⑪ About QualityNet Benefit under Clinical Benefit
- General practitioner and Chinese herbalist under Clinical Benefit also cover consultation fee charged by the general practitioners and Chinese herbalists of designated video consultation service providers. This benefit shall also cover the medication delivery charge incurred by the designated video consultation service providers (general practitioner and Chinese herbalist only). The list of designated video consultation service providers can be found on Bupa's website. The list may be updated and amended by Bupa from time to time.
  - To enjoy full cover for eligible clinical treatments under QualityNet Benefit, you must fulfil the below requirements:
    - BQN Card must be presented to the Bupa QualityNet Service Providers before treatment and used for payment of medical expenses;
    - Clinical treatment must be performed by a QualityNet Service Provider and carried out at their clinics (except for treatment by a Specialist where the relevant specialty is not available in Bupa QualityNet and pre-authorisation has been obtained);
    - Specialist consultation (except for dermatology, family medicine, gynaecology, ophthalmology, orthopaedics, otolaryngology, paediatric surgery, paediatrics and psychiatry) and physiotherapy must be referred in writing by a Registered Medical Practitioner;
    - Pre-authorisation must be obtained from Bupa for any treatment by a Specialist referred by a QualityNet Registered Medical Practitioner if the relevant specialty is not available in Bupa QualityNet.
  - If the above requirements are not followed, medical expenses will be considered as ineligible for reimbursement.
  - For the full list of Bupa QualityNet Service Providers eligible under Clinical Benefit, please log in to Bupa's customer service portal myBupa. This list is subject to change from time to time.
- ⑫ 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 9 and no benefit shall be payable under other benefit items.
- ⑬ About Accidental Hospital Cash Benefit
- Accidental Hospital Cash Benefit is payable provided that:
- Hospital Confinement lasts for 6 consecutive hours or more in the same hospital and Room and Board Benefit is payable; and
  - The occurrence of an Accident and the unplanned Hospital Confinement resulting from such Accident are not separated by more than 48 hours.
- ⑭ About Cancer and Serious Infectious Disease Hospital Cash Benefit
- Cancer and Serious Infectious Disease Hospital Cash Benefit is payable provided that:
- Hospital Confinement for at least 6 consecutive hours as a result of being diagnosed with Cancer, for the purpose of receiving Medically Necessary treatment and diagnosis of such Cancer, and Room and Board Benefit is payable; or
  - Confinement in the Intensive Care Unit of a Hospital lasts for at least 10 consecutive days in one Hospital admission as a result of contracting any of the Serious Infectious Diseases, for the purpose of receiving Medically Necessary treatment and diagnosis of such Serious Infectious Disease, and Intensive Care Benefit is payable.
- ⑮ The maximum number of days covered per Contract Year is the aggregate sum of the Accidental Hospital Cash Benefit and Cancer and Serious Infectious Disease Hospital Cash Benefit.
- ⑯ Network Dental Centre refers to the network of dental service providers appointed by Bupa to provide dental services items 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 customer service portal 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.
- ⑰ To enjoy full cover under Network Dental Centre benefit:
- Members must use cashless service at designated Network Dental Centres by presenting their Bupa medical card and Hong Kong Identity Card for verification and record. If the payment is made by the Members to the Network Dental Centres directly, eligible claims will be paid under Non-Network Dental Centre benefit and subject to the maximum limits thereunder.
  - There is no limit on the number of visits for Network Dental Centre benefit items 3-5 and 8-9 per Contract Year.

# 保柏僱健康中小企醫療保障計劃 (啟航級別) Bupa Empower SME Health Insurance Scheme (Starter Tier)



## 保費表 Subscription Rate Table

2024年1月1日版本 1 January 2024 Edition

以港幣計算 All figures in HK\$

主要保障 Core Benefits	每人每年保費 (港幣) Annual Subscription per Person (HK\$)							升級選項之附加保費率 Subscription loading for upgrade option	
	僱員 <sup>①</sup> /配偶 <sup>②</sup> 的平均已屆年齡 <sup>③</sup> Average attained age <sup>③</sup> of employee <sup>①</sup> /spouse <sup>②</sup>					子女 <sup>④</sup> 之已屆年齡 Attained age of children <sup>④</sup>			
	16-30	31-40	41-50	51-64	65-69 (只供續保 For renewal only)	15日 days - 17歲 years			
<b>A 住院及手術保障 Hospital and Surgical Benefit</b>								100% 賠償率 100% reimbursement	
計劃 Plan A5	大房 Ward	584	1,297	1,875	2,150	3,312	976	+5%	
<b>B 門診手術保障 Out-patient Procedure Benefit</b>								每年最高賠償額 HK\$200,000 HK\$200,000 Overall Annual Limit	
計劃 Plan B1		424	639	887	1,396	2,151	634	+20%	
<b>C 門診保障 Clinical Benefit</b>								HK\$0 自付費 HK\$0 Co-payment	不限診治總次數 No visit limit in aggregate
計劃 Plan C4		1,465	1,879	2,166	2,214	2,810	2,551	+18%	+10%
計劃 Plan C5		996	1,277	1,472	1,505	1,910	1,734	+14%	+5%
計劃 Plan C6		1,096	1,405	1,620	1,656	2,101	1,908	+20%	+10%
<b>自選保障 Optional Benefits</b>									
<b>D 附加醫療保障<sup>④</sup> Supplementary Major Medical Benefit<sup>④</sup></b>									
計劃 Plan D5		477	830	1,284	2,036	2,828	402		
<b>E 特別住院現金保障<sup>④</sup> Special Hospital Cash Benefit<sup>④</sup></b>									
計劃 Plan E1						112			
計劃 Plan E2						56			
<b>F 產科保障<sup>⑤</sup> Maternity Benefit<sup>⑤</sup></b>									
計劃 Plan F1						15,889			
計劃 Plan F2						9,293			
<b>G 牙科保障<sup>④</sup> Dental Benefit<sup>④</sup></b>									
計劃 Plan G1						900			

### 保費計算方法 Calculation of Subscriptions

享相同保障組合的僱員及配偶 (如適用) 之保費將按他們的平均年齡計算。另外, 如在主要保障下選擇「升級選項」, 須應用「升級選項之附加保費率」計算實際保費。  
例子: 如5名享住院及手術保障計劃A5(附升級選項)的僱員之平均年齡為38歲, 他們的保費將按31至40歲組別的保費計算: HK\$1,297 x 105% x 5 = HK\$6,809.25  
The subscriptions for employees and spouses (if applicable) with the same benefit combinations will be based on their average age. In addition, if you choose the "upgrade option" under core benefits, you'll need to apply the "Subscription loading for upgrade option" to calculate the actual subscriptions.  
Example: If the average age of the 5 employees under Hospital and Surgical Benefit Plan A5 with upgrade option is 38, their subscriptions will be based on the 31-40 age group. HK\$1,297 x 105% x 5 = HK\$6,809.25

### 附註 Notes

- 所有資格相同的僱員必須參加同一保障組合。
- 如在任何保障組合內選擇家屬保障, 所有合資格的家屬必須跟相關僱員參加同一保障組合。
- 僱員/配偶的平均已屆年齡 = 同一保障組合下所有受保成人的已屆年齡之總和 ÷ 此保障組合下的所有受保成人人數。
- 如在任何保障組合內選擇「附加醫療保障」、「特別住院現金保障」及/或「牙科保障」, 在同一保障組合內的所有會員必須投保。
- 如在任何保障組合內選擇「產科保障」, 在同一保障組合內的所有女性會員 (僱員及配偶) 必須投保。
- All employees with the same eligibility must be enrolled in the same benefit combination.
- If dependant cover is selected in any plan, all eligible dependants must join the same benefit combination as that of the relevant employee.
- Average attained age of employees/spouses = the sum of all insured adults' attained age in the same benefit combination ÷ no. of insured adults in this benefit combination.
- If Supplementary Major Medical Benefit, Special Hospital Cash Benefit and/or Dental Benefit is selected in any benefit combination, all members covered by that benefit combination must be enrolled.
- If Maternity Benefit is selected in any benefit combination, all female members (employees and spouses) covered by that benefit combination must be enrolled.

保費並非保證, 保柏有可能每年作出調整。Subscription rates are not guaranteed and Bupa may adjust them on an annual basis.

### 有關保費徵費

由2018年1月1日起, 保險業監管局按保費徵收徵費, 徵費額是以每份合約的保費的某個百分比計算。保費表上的保費尚未包括應繳徵費, 應繳徵費將按適用的徵費率計算。有關徵費率詳情, 請瀏覽 [www.bupa.com.hk/levy](http://www.bupa.com.hk/levy)。

### About Levy payment

Starting from 1 January 2018, insurance subscription payment is subject to the Insurance Authority's levy. The amount of levy charged will be based on a percentage of the total amount of subscription under an insurance contract. Payable levy is not included in the subscription rates shown in the Table of Subscriptions and is subject to the applicable levy rate. For general information on the applicable levy rates, please visit [www.bupa.com.hk/levy](http://www.bupa.com.hk/levy).

中、英文之意思如有任何差別, 概以英文為準。所有條款及細則以合約為準。請參考合約查閱保障金額表內大楷詞語之定義。

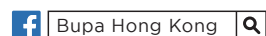
In the event of any discrepancy in respect of the meaning between the Chinese version and the English version, the English version shall prevail. All terms and conditions are subject to the Contract. Please refer to the Contract for definitions of the capitalised terms in the Schedule of Benefits.

保柏 (亞洲) 有限公司 Bupa (Asia) Limited

地址: 香港九龍觀塘海濱道77號海濱匯第2座6樓

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

電話 Telephone: (852) 2517 5175 傳真 Facsimile: (852) 2548 1848 網址 Website: [www.bupa.com.hk](http://www.bupa.com.hk)





保柏僱健康中小企醫療保障計劃 (翱翔級別)  
Bupa Empower SME Health Insurance Scheme (Flyer Tier)



保柏僱健康中小企醫療保障計劃 (翱翔級別)  
Bupa Empower SME Health Insurance Scheme (Flyer Tier)



保障金額表 Schedule of Benefits

2024年1月1日版本 1 January 2024 Edition

主要保障 Core Benefits

請選擇以下其中一項 Please choose one of the options below:

- A. 住院及手術保障 Hospital and Surgical Benefit
- C. 門診保障 Clinical Benefit
- A. 住院及手術保障 Hospital and Surgical Benefit + C. 門診保障 Clinical Benefit

翱翔級別的計劃選項只適用於5名或以上僱員的企業。2至4名僱員的企業請選擇啟航級別的計劃選項。

The Flyer tier plan options are applicable to companies with 5 or more employees. For companies with 2 to 4 employees, please choose from the Starter tier plan options.

每位會員最高賠償額 (港幣) Maximum Limit per Member (HK\$)

A 住院及手術保障 <sup>①</sup> Hospital and Surgical Benefit <sup>①</sup>	計劃 Plan A1 私家房 <sup>②</sup> Private <sup>②</sup>		計劃 Plan A2 半私家房 <sup>②</sup> Semi-private <sup>②</sup>		計劃 Plan A3 半私家房 <sup>②</sup> Semi-private <sup>②</sup>		計劃 Plan A4 大房 <sup>②</sup> Ward <sup>②</sup>		
	網絡保障 <sup>③</sup> HealthNet Benefit <sup>③</sup> (只適用於香港 HK coverage only)	非網絡保障 Non-HealthNet Benefit (適用於世界各地 Worldwide coverage)	網絡保障 <sup>③</sup> HealthNet Benefit <sup>③</sup> (只適用於香港 HK coverage only)	非網絡保障 Non-HealthNet Benefit (適用於世界各地 Worldwide coverage)	網絡保障 <sup>③</sup> HealthNet Benefit <sup>③</sup> (只適用於香港 HK coverage only)	非網絡保障 Non-HealthNet Benefit (適用於世界各地 Worldwide coverage)	網絡保障 <sup>③</sup> HealthNet Benefit <sup>③</sup> (只適用於香港 HK coverage only)	非網絡保障 Non-HealthNet Benefit (適用於世界各地 Worldwide coverage)	
網絡醫院 <sup>④</sup> HealthNet Hospitals <sup>④</sup>	嘉諾撒醫院 Canossa Hospital 香港中文大學醫院 CUHK Medical Centre 港怡醫院 Gleneagles Hong Kong Hospital 香港浸信會醫院 HK Baptist Hospital 明德國際醫院 Matilda International Hospital 聖保祿醫院 St. Paul's Hospital 聖德肋撒醫院 St. Teresa's Hospital 仁安醫院 Union Hospital	不適用 N/A	嘉諾撒醫院 Canossa Hospital 香港中文大學醫院 CUHK Medical Centre 港怡醫院 Gleneagles Hong Kong Hospital 香港浸信會醫院 HK Baptist Hospital 明德國際醫院 Matilda International Hospital 聖保祿醫院 St. Paul's Hospital 聖德肋撒醫院 St. Teresa's Hospital 仁安醫院 Union Hospital	不適用 N/A	嘉諾撒醫院 Canossa Hospital 香港中文大學醫院 CUHK Medical Centre 港怡醫院 Gleneagles Hong Kong Hospital 香港浸信會醫院 HK Baptist Hospital 明德國際醫院 Matilda International Hospital 聖保祿醫院 St. Paul's Hospital 聖德肋撒醫院 St. Teresa's Hospital 仁安醫院 Union Hospital	不適用 N/A	嘉諾撒醫院 Canossa Hospital 香港中文大學醫院 CUHK Medical Centre 港怡醫院 Gleneagles Hong Kong Hospital 香港浸信會醫院 HK Baptist Hospital 明德國際醫院 Matilda International Hospital 聖保祿醫院 St. Paul's Hospital 聖德肋撒醫院 St. Teresa's Hospital 仁安醫院 Union Hospital	不適用 N/A	
賠償率 Reimbursement percentage	基本選項 Basic option	100%	80%	100%	80%	100%	80%	100%	80%
	升級選項 Upgrade option	100%	100%	100%	100%	100%	100%	100%	100%
每年最高賠償額 (只適用於住院及手術保障 A1 - A13 項) Overall Annual Limit (Applicable to items A1 - A13 under Hospital and Surgical Benefit only)	500,000		300,000		不適用 N/A				
1 住房及膳食費 (每合約年度計每病症最多120日) Room and Board (Maximum 120 days per Disability per Contract Year)					每日1,800 each day		每日1,125 each day		
2 住院雜費 (每合約年度計) Miscellaneous Hospital Services (Per Contract Year)					22,500		16,200		
3 深切治療 (住房及膳食費之補足) (每合約年度每病症計) Intensive Care (Supplement to Room and Board) (Per Disability per Contract Year)					27,000		13,500		
4 私家看護費 (每合約年度計每病症最多120日) Private Nursing (Maximum 120 days per Disability per Contract Year) ◦ 經主診註冊西醫書面轉介 <sup>⑤</sup> 下由合資格護士於住院期間或出院後在家中提供之護理服務 ◦ Nursing services during Hospital Confinement or at home after discharge from Hospital rendered by a Qualified Nurse upon written referral <sup>⑤</sup> by the attending Registered Medical Practitioner					每日675 each day		每日500 each day		
5 外科醫生費及巡房費 (只適用於外科手術) (每合約年度每病症計) Surgeon and Attendance Fees (For surgical case only) (Per Disability per Contract Year) ◦ 複雜 Complex ◦ 大型 Major ◦ 中型 Intermediate ◦ 小型 Minor	支付合資格的醫療費用 (每合約年度計, 以每年最高賠償額及賠償率為限) Cover for eligible medical expenses (Per Contract Year, subject to the Overall Annual Limit and reimbursement percentage)	支付合資格的醫療費用 (每合約年度計, 以每年最高賠償額及賠償率為限) Cover for eligible medical expenses (Per Contract Year, subject to the Overall Annual Limit and reimbursement percentage)	支付合資格的醫療費用 (每合約年度計, 以每年最高賠償額及賠償率為限) Cover for eligible medical expenses (Per Contract Year, subject to the Overall Annual Limit and reimbursement percentage)	支付合資格的醫療費用 (每合約年度計, 以每年最高賠償額及賠償率為限) Cover for eligible medical expenses (Per Contract Year, subject to the Overall Annual Limit and reimbursement percentage)	76,500 38,250 19,125 9,563		58,500 29,259 14,625 7,313		
6 麻醉科醫生費 (每合約年度每病症計) Anaesthetist's Fees (Per Disability per Contract Year) ◦ 複雜 Complex ◦ 大型 Major ◦ 中型 Intermediate ◦ 小型 Minor					27,900 13,950 6,975 3,488		17,600 8,775 4,388 2,196		
7 手術室費用 (每合約年度每病症計) Operating Theatre Fees (Per Disability per Contract Year) ◦ 複雜 Complex ◦ 大型 Major ◦ 中型 Intermediate ◦ 小型 Minor					27,900 13,950 6,975 3,488		17,600 8,775 4,388 2,196		
8 住院醫生巡房費 (只適用於非手術治療) (每合約年度計每病症最多120日) In-patient Physician's Fees (For non-surgical case only) (Maximum 120 days per Disability per Contract Year)					每日1,800 each day		每日1,125 each day		
9 住院專科醫生費 (每合約年度計) In-patient Specialist's Fees (Per Contract Year) ◦ 須獲主診註冊西醫以書面轉介 <sup>⑤</sup> (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除外) ◦ Subject to written referral <sup>⑤</sup> from the attending Registered Medical Practitioner (except for services performed by pathologist, radiologist or Physiotherapist during Hospital Confinement)					10,800		8,100		



保柏僱健康中小企醫療保障計劃 (翱翔級別)  
Bupa Empower SME Health Insurance Scheme (Flyer Tier)



保柏僱健康中小企醫療保障計劃 (翱翔級別)  
Bupa Empower SME Health Insurance Scheme (Flyer Tier)



每位會員最高賠償額 (港幣) Maximum Limit per Member (HK\$)

A 住院及手術保障 <sup>①</sup> Hospital and Surgical Benefit <sup>①</sup>	計劃 Plan A1 私家房 <sup>②</sup> Private <sup>②</sup>		計劃 Plan A2 半私家房 <sup>②</sup> Semi-private <sup>②</sup>		計劃 Plan A3 半私家房 <sup>②</sup> Semi-private <sup>②</sup>		計劃 Plan A4 大房 <sup>②</sup> Ward <sup>②</sup>	
	網絡保障 <sup>③</sup> HealthNet Benefit <sup>③</sup> (只適用於香港 HK coverage only)	非網絡保障 Non-HealthNet Benefit (適用於世界各地 Worldwide coverage)	網絡保障 <sup>③</sup> HealthNet Benefit <sup>③</sup> (只適用於香港 HK coverage only)	非網絡保障 Non-HealthNet Benefit (適用於世界各地 Worldwide coverage)	網絡保障 <sup>③</sup> HealthNet Benefit <sup>③</sup> (只適用於香港 HK coverage only)	非網絡保障 Non-HealthNet Benefit (適用於世界各地 Worldwide coverage)	網絡保障 <sup>③</sup> HealthNet Benefit <sup>③</sup> (只適用於香港 HK coverage only)	非網絡保障 Non-HealthNet Benefit (適用於世界各地 Worldwide coverage)
日間手術保障 <sup>④</sup> Day Case Procedure Benefits <sup>④</sup>								
<ul style="list-style-type: none"> <li>A10 至 A11 項將支付(i)由註冊西醫於診所或醫院日症房進行診所手術或日症或(ii)無需過夜的住院的費用。「網絡保障」只支付已獲取初步保障審核的費用。附加醫療保障 (如有) 並不適用。</li> <li>單獨賠償在沒有獲取初步保障審核的情況下, 於需要過夜的住院期間進行以下程序而引致的合資格費用, 以每年最高賠償額或「非網絡保障」之每位會員最高賠償額及賠償率為限, 附加醫療保障 (如有) 並不適用。如需要過夜的住院已獲取初步保障審核, 合資格費用將在「網絡保障」(如入住網絡醫院) 或「非網絡保障」(如入住其他醫院) 下A1 - A9項及附加醫療保障 (如適用) 下賠償。</li> <li>Items A10 - A11 cover expenses incurred for (i) Clinical Operations or Day Case at a clinic or day-case unit of a Hospital performed by a Registered Medical Practitioner or (ii) Hospital Confinement without an overnight stay. Expenses are payable under HealthNet Benefit when pre-authorisation has been obtained. Supplementary Major Medical Benefit (if any) will not be applicable.</li> <li>Exclusively payable for eligible expenses incurred by the procedures below performed during overnight Hospital Confinement without pre-authorisation obtained up to the Overall Annual Limit or the Maximum Limit per Member of Non-HealthNet Benefit, subject to the reimbursement percentage. Supplementary Major Medical Benefit (if any) will not be applicable. If pre-authorisation is obtained for Hospital Confinement with an overnight stay, eligible expenses shall be payable under benefit items A1 - A9 of HealthNet Benefit for Confinement at HealthNet Hospitals or Non-HealthNet Benefit for Confinement at other hospitals, and Supplementary Major Medical Benefit (if applicable).</li> </ul>								
10 日間內窺鏡程序 (每合約年度每病症計) Day Case Endoscopy Procedure (Per Disability per Contract Year)	支付合資格的醫療費用 (每合約年度計, 以每年最高賠償額及賠償率為限) Cover for eligible medical expenses (Per Contract Year, subject to the Overall Annual Limit and reimbursement percentage)		支付合資格的醫療費用 (每合約年度計, 以每年最高賠償額及賠償率為限) Cover for eligible medical expenses (Per Contract Year, subject to the Overall Annual Limit and reimbursement percentage)		全數賠償 Full cover	16,539	全數賠償 Full cover	11,705
11 日間病毒性疣及皮損程序 <sup>④</sup> (每合約年度計) Day Case Viral Warts and Skin Lesions Procedure <sup>④</sup> (Per Contract Year)	支付合資格的醫療費用 (每合約年度計, 以每年最高賠償額及賠償率為限) (每合約年度最多6次) Cover for eligible medical expenses (per Contract Year, subject to the Overall Annual Limit and reimbursement percentage) (Maximum 6 visits per Contract Year)	8,000	支付合資格的醫療費用 (每合約年度計, 以每年最高賠償額及賠償率為限) (每合約年度最多6次) Cover for eligible medical expenses (per Contract Year, subject to the Overall Annual Limit and reimbursement percentage) (Maximum 6 visits per Contract Year)	8,000	全數賠償 Full cover (Maximum 6 visits per Contract Year) (每合約年度最多6次)	8,000	全數賠償 Full cover (Maximum 6 visits per Contract Year) (每合約年度最多6次)	8,000
12 入院前及出院後之門診護理 (每合約年度計) Pre-admission and Post-hospitalisation Out-patient Care (Per Contract Year)	支付合資格的醫療費用 (每合約年度計, 以每年最高賠償額及賠償率為限) Cover for eligible medical expenses (Per Contract Year, subject to the Overall Annual Limit and reimbursement percentage)	支付合資格的醫療費用 (每合約年度計, 以每年最高賠償額及賠償率為限) Cover for eligible medical expenses (Per Contract Year, subject to the Overall Annual Limit and reimbursement percentage)	支付合資格的醫療費用 (每合約年度計, 以每年最高賠償額及賠償率為限) Cover for eligible medical expenses (Per Contract Year, subject to the Overall Annual Limit and reimbursement percentage)	支付合資格的醫療費用 (每合約年度計, 以每年最高賠償額及賠償率為限) Cover for eligible medical expenses (Per Contract Year, subject to the Overall Annual Limit and reimbursement percentage)	7,200		5,400	
13 精神科治療 (每合約年度計) (只適用於香港) Psychiatric Treatment (Per Contract Year) (Applicable to Hong Kong only)	不適用 N/A		不適用 N/A		不適用 N/A	13,500	不適用 N/A	6,300
14 癌症及嚴重傳染病 <sup>⑤</sup> (每合約年度每病症計) Cancer and Serious Infectious Disease <sup>⑤</sup> (Per Disability per Contract Year)	每年最高賠償額的120% 120% of the Overall Annual Limit		每年最高賠償額的120% 120% of the Overall Annual Limit		項目 A1-A9 及 A12-A13 的最高賠償額之120% 120% of the Maximum Limits of items A1-A9 and A12-A13		項目 A1-A9 及 A12-A13 的最高賠償額之120% 120% of the Maximum Limits of items A1-A9 and A12-A13	
15 第二索償現金津貼 (每合約年度計最多120日) Second Claims Incentive (Maximum 120 days per Contract Year)	每日1,500 each day		每日1,200 each day		每日900 each day		每日565 each day	
16 門診手術額外現金 Out-patient Surgery Cash Allowance	每日1,500 each day		每日1,200 each day		每日900 each day		每日565 each day	

保柏僱健康中小企醫療保障計劃 (翱翔級別)  
Bupa Empower SME Health Insurance Scheme (Flyer Tier)



保柏僱健康中小企醫療保障計劃 (翱翔級別)  
Bupa Empower SME Health Insurance Scheme (Flyer Tier)



每位會員最高賠償額 (港幣) Maximum Limit per Member (HK\$)

C 門診保障® Clinical Benefit®	計劃 Plan C1 (只適用於10名或以上僱員的企業，並有至少5名僱員參與此計劃 Only applicable to companies with 10 or more employees with at least 5 employees enrolled in this plan)		計劃 Plan C2		計劃 Plan C3			
	網絡保障® HealthNet Benefit®	非網絡保障 Non-HealthNet Benefit	網絡保障® HealthNet Benefit®	非網絡保障 Non-HealthNet Benefit	網絡保障® HealthNet Benefit®	非網絡保障 Non-HealthNet Benefit		
網絡服務供應商的數目 No. of HealthNet Service Providers	約 Around 2,600		約 Around 2,600		約 Around 2,600			
自負費 (每次診治計) / 賠償率 Co-payment (Per visit) / Reimbursement percentage	基本選項 Basic option	項目 Items C1 - C3, C7 - C8: \$30	項目 Items C1 - C3, C7 - C8: \$30	項目 Items C1 - C3, C7 - C8: \$30	項目 Items C1 - C3, C7 - C8: \$30	項目 Items C1 - C3, C7 - C8: \$30		
	升級選項 Upgrade option	\$0	\$0	\$0	\$0	\$0		
每年最高賠償額 Overall Annual Limit ◦ 每年最高賠償額亦受下列個別保障項目的最高賠償額所限 (只適用於計劃 C1) ◦ The Overall Annual Limit is also subject to the following maximum limits for each benefit item (applicable to Plan C1 only)	基本選項 Basic option	50,000		50,000		50,000		
	升級選項 Upgrade option	每年最高賠償額及個別保障項目的最高賠償額的 200% 200% of Overall Annual Limit and sub-limits of each benefit item		不適用 N/A		不適用 N/A		
診治總次數 (每合約年度計) Maximum number of visits in aggregate (Per Contract Year) ◦ 診治總次數亦受下列個別保障項目的分項次數所限 (適用於計劃 C2-C3)，每一項目以每日最多一次為限 ◦ The maximum number of visits in aggregate is also subject to the sub-limits below on the number of visits for each benefit item (applicable to Plans C2-C3) and a maximum of one visit per item per day	基本選項 Basic option	無限次數 No visit limit		項目 Items C1 - C4, C7 - C11: 共 40 次 40 visits in total	項目 Items C1 - C4, C7 - C11: 共 40 次 40 visits in total			
	升級選項 Upgrade option	無限次數 No visit limit		受下列個別保障項目的分項次數所限 Subject to the sub-limits below on the number of visits for each benefit item	受下列個別保障項目的分項次數所限 Subject to the sub-limits below on the number of visits for each benefit item			
1 普通科醫生 General Practitioner ◦ 診症 (包括診症費及於普通科醫生診所處方及取得的基本醫療必需西藥) ◦ Consultation (Including consultation fee and basic Medically Necessary Western Medication prescribed and obtained at the General Practitioner's clinic)	每合約年度 20,000 per Contract Year		全數支付合資格的醫療費用，如有自付費除外 (包括診症費及最多 5 日之處方基本醫療必需西藥費用) Full cover for eligible medical expenses, subject to co-payment, if any (Including consultation fee and up to 5 days of basic Medically Necessary Western Medication)	每次 270 per visit	全數支付合資格的醫療費用，如有自付費除外 (包括診症費及最多 5 日之處方基本醫療必需西藥費用) Full cover for eligible medical expenses, subject to co-payment, if any (Including consultation fee and up to 5 days of basic Medically Necessary Western Medication)	每次 200 per visit		
2 專科醫生 Specialist ◦ 診症 (包括診症費及於專科醫生診所處方及取得的基本醫療必需西藥。該診症須獲註冊西醫書面轉介 <sup>®</sup> ，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) ◦ Consultation (Including consultation fee and basic Medically Necessary Western Medication prescribed and obtained at the Specialist's clinic. Subject to written referral <sup>®</sup> from a Registered Medical Practitioner, except for dermatology, family medicine, gynaecology, ophthalmology, orthopaedics, otolaryngology, paediatric surgery, paediatrics and psychiatry)	每合約年度 30,000 per Contract Year		全數支付合資格的醫療費用，如有自付費除外 Full cover for eligible medical expenses, subject to co-payment, if any	每次 540 per visit	全數支付合資格的醫療費用，如有自付費除外 Full cover for eligible medical expenses, subject to co-payment, if any	每次 400 per visit		
3 物理治療師 Physiotherapist ◦ 只限診症費及須獲註冊西醫書面轉介 <sup>®</sup> ◦ Treatment fee only and subject to written referral <sup>®</sup> from a Registered Medical Practitioner	每合約年度 3,000 per Contract Year		全數支付合資格的醫療費用，如有自付費除外 Full cover for eligible medical expenses, subject to co-payment, if any	每次 480 per visit	全數支付合資格的醫療費用，如有自付費除外 Full cover for eligible medical expenses, subject to co-payment, if any	每次 250 per visit		
4 脊醫 Chiropractor ◦ 只限診症費及須獲註冊西醫書面轉介 <sup>®</sup> ◦ Treatment fee only and subject to written referral <sup>®</sup> from a Registered Medical Practitioner	每合約年度 3,000 per Contract Year		不適用 N/A	不適用 N/A	不適用 N/A	不適用 N/A		
5 診斷影像及化驗 Diagnostic Imaging and Laboratory Tests ◦ 須獲註冊西醫 (適用於所有診斷影像及化驗) 或註冊中醫 / 脊醫 <sup>®</sup> (只適用於 X 光及化驗) 書面轉介 <sup>®</sup> ◦ Subject to written referral <sup>®</sup> 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	每合約年度 4,000 per Contract Year		每合約年度 1,500 per Contract Year	每合約年度 1,000 per Contract Year	每合約年度 1,200 per Contract Year	每合約年度 800 per Contract Year		
6 醫生處方西藥 Prescribed Western Medication ◦ 於診症當日於註冊西醫診所處方及取得之額外、長期服用或昂貴醫療必需西藥 ◦ Extra, long-term or expensive Medically Necessary Western Medication prescribed and obtained at a Registered Medical Practitioner's clinic on the same day of consultation	每合約年度 4,000 per Contract Year		每合約年度 1,000 per Contract Year	每合約年度 800 per Contract Year	每合約年度 500 per Contract Year	每合約年度 300 per Contract Year		
7 中醫師 Chinese Herbalist ◦ 診症 (包括診症費及當日由註冊中醫在診所處方並由合法來源取得之基本醫療必需中藥費用) ◦ 此保障將於非網絡保障下支付由註冊中醫處方並由合法來源 (不論是否於該註冊中醫的門診診所) 取得之基本醫療必需中藥費用 ◦ 此保障將於網絡及非網絡保障下支付由註冊中醫進行的天灸治療 ◦ 此保障將於非網絡保障下支付由註冊中醫進行的針灸治療及推拿 ◦ Consultation (Including consultation fee and basic Medically Necessary Chinese Medicines prescribed at a Registered Chinese Medicine Practitioner's clinic and obtained at a legitimate source on the same day of consultation) ◦ 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) under Non-HealthNet Benefit ◦ Payable for tianjiu performed by a Registered Chinese Medicine Practitioner under HealthNet and Non-HealthNet Benefit ◦ Payable for acupuncture and tui na performed by a Registered Chinese Medicine Practitioner under Non-HealthNet Benefit	每合約年度 3,000 per Contract Year		全數支付合資格的醫療費用，如有自付費除外 (包括診症費及最多兩劑之基本醫療必需中藥費用) Full cover for eligible medical expenses, subject to co-payment, if any (Including consultation fee and up to 2 packets of basic Medically Necessary Chinese Medicines)	每次 270 per visit	全數支付合資格的醫療費用，如有自付費除外 (包括診症費及最多兩劑之基本醫療必需中藥費用) Full cover for eligible medical expenses, subject to co-payment, if any (Including consultation fee and up to 2 packets of basic Medically Necessary Chinese Medicines)	每次 175 per visit		
8 跌打醫師 Chinese Bonesetter ◦ 診症 (包括診症費及當日由註冊中醫在診所處方並由合法來源取得之基本醫療必需中藥費用) ◦ 此保障將於非網絡保障下支付由註冊中醫處方並由合法來源 (不論是否於該註冊中醫的門診診所) 取得之基本醫療必需中藥費用 ◦ 此保障將於非網絡保障下支付由註冊中醫進行的針灸治療及推拿 ◦ Consultation (Including consultation fee and basic Medically Necessary Chinese Medicines prescribed at a Registered Chinese Medicine Practitioner's clinic and obtained at a legitimate source on the same day of consultation) ◦ 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) under Non-HealthNet Benefit ◦ Payable for acupuncture and tui na performed by a Registered Chinese Medicine Practitioner under Non-HealthNet Benefit	每合約年度 3,000 per Contract Year		全數支付合資格的醫療費用，如有自付費除外 (包括診症費及最多兩劑之基本醫療必需中藥費用) Full cover for eligible medical expenses, subject to co-payment, if any (Including consultation fee and up to 2 packets of basic Medically Necessary Chinese Medicines)	每次 270 per visit	全數支付合資格的醫療費用，如有自付費除外 (包括診症費及最多兩劑之基本醫療必需中藥費用) Full cover for eligible medical expenses, subject to co-payment, if any (Including consultation fee and up to 2 packets of basic Medically Necessary Chinese Medicines)	每次 175 per visit		
9 精神科相關治療® Psychiatric-related Treatments®	每合約年度 20,000 per Contract Year		全數支付合資格的醫療費用 Full cover for eligible medical expenses	每次 540 per visit	全數支付合資格的醫療費用 Full cover for eligible medical expenses	每次 300 per visit		
10 臨床心理輔導 Psychological Counselling ◦ 須獲精神科醫生書面轉介 <sup>®</sup> ◦ Subject to written referral <sup>®</sup> from a Psychiatrist	每合約年度 20,000 per Contract Year		全數支付合資格的醫療費用 Full cover for eligible medical expenses	每次 540 per visit	全數支付合資格的醫療費用 Full cover for eligible medical expenses	每次 300 per visit		
11 保健服務 (每合約年度計) Wellness Service (Per Contract Year)	每名會員可於指定中心或非網絡服務供應商自由選擇以下服務，以每合約年度港幣 1,500 元為限： Each Member is entitled to free choice of the following services at a designated centre or a non-network provider up to HK\$1,500 per Contract Year: ◦ 牙科服務 (洗牙) Dental service (scaling and polishing) ◦ 眼科檢查 Optical check ◦ 健康檢查 Health check ◦ 足病診療® Podiatry service®		每名會員可於指定中心享用以下其中一項服務： Each Member is entitled to one of the following services at a designated centre: ◦ 牙科服務 (洗牙) Dental service (scaling and polishing) ◦ 眼科檢查 Optical check ◦ 健康檢查 Health check		每合約年度 1 次 1 visit per Contract Year	不適用 N/A	每合約年度 1 次 1 visit per Contract Year	不適用 N/A

# 保柏僱健康中小企醫療保障計劃 (翱翔級別) Bupa Empower SME Health Insurance Scheme (Flyer Tier)



## 自選保障 Optional Benefits

	每位會員最高賠償額 (港幣) Maximum Limit per Member (HK\$)			
<b>D 附加醫療保障 (自選保障) Supplementary Major Medical Benefit (Optional)</b>	<b>計劃 Plan D1 私家房<sup>®</sup> Private<sup>®</sup></b> (只適用於選擇了附有升級選項的住院及手術保障計劃 A1 Only applicable if choosing Hospital and Surgical Benefit Plan A1 with upgrade option)	<b>計劃 Plan D2 半私家房<sup>®</sup> Semi-private<sup>®</sup></b> (只適用於選擇了附有升級選項的住院及手術保障計劃 A2 Only applicable if choosing Hospital and Surgical Benefit Plan A2 with upgrade option)	<b>計劃 Plan D3 半私家房<sup>®</sup> Semi-private<sup>®</sup></b> (只適用於選擇了附有升級選項的住院及手術保障計劃 A3 Only applicable if choosing Hospital and Surgical Benefit Plan A3 with upgrade option)	<b>計劃 Plan D4 大房<sup>®</sup> Ward<sup>®</sup></b> (只適用於選擇了附有升級選項的住院及手術保障計劃 A4 Only applicable if choosing Hospital and Surgical Benefit Plan A4 with upgrade option)
賠償率 Reimbursement percentage	80%	80%	80%	80%
<ul style="list-style-type: none"> <li>此保障支付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) 可獲賠償之在港住院、日症及診所手術的合資格費用 (經由註冊西醫證明, 因在香港以外發生緊急事故導致在外地住院或進行手術則除外), 以本保障之最高賠償額為限。</li> <li>此保障並不會就入住總統套房/ 貴賓房/ 豪華房的住院費用而作出賠償。</li> <li>如會員住院時並非根據原有之計劃住房, 保障額將因應升級住房而作出調整:                             <ul style="list-style-type: none"> <li>- 半私家房至私家房: 50%</li> <li>- 大房至半私家房: 50%</li> <li>- 大房至私家房: 25%</li> </ul> </li> <li>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。</li> <li>This Benefit is payable for any eligible expenses incurred during Hospital Confinement, Day Case and Clinical Operation in Hong Kong (unless the hospitalisation or surgery overseas is directly resulting from medical Emergency outside Hong Kong as certified by a Registered Medical Practitioner) 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), which is subject to the Maximum Limit of this benefit.</li> <li>This Benefit shall not be payable for Hospital Confinement in class of suite/ VIP/deluxe room of a Hospital.</li> <li>Adjustment factors for room upgrade will be applied if a Member is hospitalised not in accordance with plan level:                             <ul style="list-style-type: none"> <li>- From Semi-private Room to Private Room: 50%</li> <li>- From Ward to Semi-private Room: 50%</li> <li>- From Ward to Private Room: 25%</li> </ul> </li> <li>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.</li> </ul>	100,000 (每合約年度計) (Per Contract Year)	80,000 (每合約年度計) (Per Contract Year)	100,000 (每合約年度 每病症計) (Per Disability per Contract Year)	80,000 (每合約年度 每病症計) (Per Disability per Contract Year)
<b>E 特別住院現金保障 (自選保障) Special Hospital Cash Benefit (Optional)</b>	計劃 Plan E1		計劃 Plan E2	
1 意外住院現金 <sup>®</sup> (每合約年度最多120日) <sup>®</sup> Accidental Hospital Cash <sup>®</sup> (Maximum 120 days per Contract Year) <sup>®</sup> <ul style="list-style-type: none"> <li>由因意外住院第一天開始支付</li> <li>Payable from the first day of Hospital Confinement due to an Accident</li> </ul>	每日1,000 each day		每日500 each day	
2 癌症及嚴重傳染病住院現金 <sup>®</sup> (每合約年度最多120日) <sup>®</sup> Cancer and Serious Infectious Disease Hospital Cash <sup>®</sup> (Maximum 120 days per Contract Year) <sup>®</sup> <ul style="list-style-type: none"> <li>由因癌症或嚴重傳染病住院第一天開始支付 (就嚴重傳染病的情況, 會員須於同一次入院期間連續入住深切治療病房至少10日)</li> <li>Payable from the first day of Hospital Confinement due to Cancer or Serious Infectious Disease (in the event of Serious Infectious Disease, the Member must be confined in the Intensive Care Unit for at least 10 consecutive days in one Hospital admission)</li> </ul>	每日2,000 each day		每日1,000 each day	



每位會員最高賠償額 (港幣) Maximum Limit per Member (HK\$)

F 產科保障 (自選保障) Maternity Benefit (Optional)	計劃 Plan F1	計劃 Plan F2
賠償率 Reimbursement percentage	100%	100%
順產 (每次懷孕計) Normal Delivery (Per pregnancy)	40,000	25,000
剖腹生產 (每次懷孕計) Caesarean Section (Per pregnancy)	60,000	32,000
流產 (每次懷孕計) Miscarriage (Per pregnancy)	20,000	11,000

- 產科保障將支付因受孕引致以下項目之醫療費用，包括住院、註冊西醫診症及醫生處方西藥、診斷化驗、產前檢查及產後檢查，以及初生嬰兒護理費用。
- 此保障不包括任何初生嬰兒在住院期間之醫療費用，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，惟會員必須於此產科保障生效日後受孕。為免存疑，若會員於妊娠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，並不會於住院及手術保障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住院及手術保障及/或門診保障有關項目覆蓋則除外)。
- The Maternity Benefit shall cover medical expenses incurred for the following 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 newborn baby.
- 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 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 Hospital and Surgical Benefit or other optional benefits (except for those maternity related psychiatric conditions covered under relevant Hospital and Surgical Benefit and/or Clinical Benefit items).

G 牙科保障 (自選保障) (每合約年度計) Dental Benefit (Optional) (Per Contract Year)	計劃 Plan G1	
	網絡牙科中心保障 Network Dental Centre benefit	非網絡牙科中心保障 Non-Network Dental Centre benefit
網絡牙科中心數目 No. of network dental centres	12	不適用 N/A
適用範圍 Eligibility	<p>只適用於在網絡牙科中心<sup>®</sup> 診症時間以內由註冊牙醫 (所有適用項目) 或註冊牙齒衛生員 (只適用於項目 G1) 進行的合資格牙科服務</p> <p>Only applicable to covered dental service items performed by a Registered Dentist (for all applicable items) or Registered Dental Hygienist (for item G1 only) at Network Dental Centres<sup>®</sup> within consultation hours</p>	<p>適用於在網絡牙科中心以外由註冊牙醫 (所有適用項目) 或註冊牙齒衛生員 (只適用於項目 G1) 進行的牙科服務，或於網絡牙科中心保障以外的項目。所有合資格費用將以下列的最高賠償額為限。請先直接向牙科服務供應商支付費用，然後再向保柏申請索償。</p> <p>Applicable to dental services from a Registered Dentist (for all applicable items) or Registered Dental Hygienist (for item G1 only) which are not performed at Network Dental Centres or covered under Network Dental Centre benefit. All eligible dental expenses will be subject to the maximum limits below. Please settle the expenses with the dental providers directly and submit your claim to Bupa.</p>
賠償率 Reimbursement percentage	不適用 N/A	100%
1 洗牙 Scaling and polishing	每合約年度共一次	2,600 (洗牙限於每合約年度共一次) (Scaling and polishing is subject to one visit in total per Contract Year)
2 定期口腔檢查 Routine oral examination	One visit in total per Contract Year	
3 口腔 X 光及藥物 Intra-oral X-rays and medications	全數賠償 <sup>®</sup> Full cover <sup>®</sup>	
4 補牙及脫牙 Fillings and extractions	<p>全數賠償<sup>®</sup> Full cover<sup>®</sup></p> <p>(只適用於蛀牙或患嚴重牙周病之牙齒之大牙 (銀粉) 或門牙 (瓷粉) 補牙。脫除智齒、複雜脫牙、口腔手術脫除牙腳、需移走牙骨或牙齒、任何口腔手術或因矯正牙齒而脫牙將不包括在保障內)</p> <p>(Applicable to fillings and extractions due to tooth decay or gum disease only, including amalgam (silver) fillings for premolar and molar teeth and white (composite) fillings for front teeth. Extraction of wisdom teeth, complicated extractions, extractions requiring bone removal, surgical extractions or extractions for orthodontic reasons are excluded)</p>	
5 膿瘡排放 Drainage of abscesses	<p>全數賠償<sup>®</sup> Full cover<sup>®</sup></p> <p>(只適用於緊急牙科狀況下的膿瘡切割及排放)</p> <p>(Includes incision and drainage of abscesses for dental emergency cases only)</p>	
6 齒尖或齒邊修復 Pins for cusp restoration	不適用 N/A	
7 活動假牙、牙冠及牙橋 (只適用於因意外而導致) Dentures, crowns and bridges (only in case of an Accident)	不適用 N/A	
8 牙周病治療 Periodontal (gum) treatment	<p>全數賠償<sup>®</sup> Full cover<sup>®</sup></p> <p>(只限由普通科註冊牙醫進行之輕微至中度的牙周病治療，包括清洗牙周袋內的牙菌膜及牙根刮治等牙科治療)</p> <p>(Includes treatment of mild to moderate Periodontal (gum) disease, which involves curettage and root planing with medication as required, and is limited to treatment by a general Registered Dentist)</p>	
9 牙痛急症處理 Emergency consultation and treatment	<p>全數賠償<sup>®</sup> Full cover<sup>®</sup></p> <p>(只適用於緊急牙痛舒緩 (包括敷料及藥物))</p> <p>(Includes emergency pain relief of toothache (including dressing and medication) only)</p>	



## 免費保障及服務 Free Benefits and Services

### H 免費保柏國際援助計劃 (每合約年度計) Free Bupa Worldwide Assistance Programme (Per Contract Year)

提供海外及國內住院按金墊支服務，全數支付緊急醫療運送費用及送返香港後高達港幣 12 萬元的額外住院保障，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 Mainland 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.

### I 健康支援服務 (只適用於選擇住院及手術保障計劃 A1、A2，或門診保障計劃 C1) Health Coaching Services (Only applicable if choosing Hospital and Surgical Benefit Plan A1, A2, or Clinical Benefit Plan C1)

「健康支援服務」由醫生、合資格護士和健康管理團隊組成，為會員提供個人健康管理支援服務，包括：  
The Health Coaching Services give members access to personal healthcare support delivered by a team of doctors, qualified nurses and health management professionals including:

#### 24 時健康專線 24-hour Healthline

我們的合資格健康管理團隊可為會員提供協助及指導，背後更有醫生作為顧問，提供每天 24 小時支援服務，為會員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。我們亦可根據會員的指定情況或需要提供診所及醫院名單以供參考，更可協助預約選定的診症及治療服務。

Our team of qualified health management professionals, supported by doctors can provide 24/7 guidance on health-related queries, suggesting a suitable course of action based on a Member's symptoms and condition. We can also provide a list of clinics and hospitals based on each member's specific condition or needs for their reference, as well as set up appointments for their selected consultations and treatments.

#### 健康顧問 Care Manager

當會員患上危疾時，保柏的健康顧問會全程協助，讓會員了解治療詳情和醫療開支預算，協助處理有關入院、出院後跟進治療及索償等事宜。若會員入住本港私家醫院，健康顧問可在會員的同意下前往醫院探望或致電慰問。

In case of critical illnesses, our Care Manager can be in touch with the Member to follow up on claims and assist them throughout treatment and recovery, from explaining their treatment plans and overseeing costs to arranging follow-up consultations. If the Member is admitted to a local private hospital, our Care Manager will make a courtesy call or visit, with their consent.

#### 第二醫療意見 Second Medical Opinion

如在診斷和治療上遇到各種疑慮，我們可安排醫療專家為會員提供專業的第二意見，讓他們掌握病情從而決定治療方法。

We can arrange for Members to get medical advice from a panel of medical specialists to clarify their doubts. Then they can make informed decisions about treatment.

請瀏覽保柏網站 [www.bupa.com.hk/health-coaching-services](http://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](http://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會員自付，除非該費用在合約下屬受保項目。
- 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 Member unless otherwise covered under the Contract.
- 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.

# 保柏僱健康中小企醫療保障計劃 (翱翔級別) Bupa Empower SME Health Insurance Scheme (Flyer Tier)



## 附註 Notes

### ① 有關住院及手術保障

- 同一項目的合資格費用不可獲「住院及手術保障」表中多於一個保障項目的賠償。
- 合資格之診所手術或日症，將於「住院及手術保障」下賠償。診所手術及日症指註冊西醫於診所或醫院日症房進行之醫療必需手術而無必要留院，但該等手術須獲保柏分類為診所手術或日症手術。於「住院及手術保障」下的保障項目中所列之最多日數乃指於網絡醫院及非網絡醫院合併計算之總住院日數。
- 在「住院及手術保障」計劃 A1 及 A2 下，住院及手術保障項目 A1 - A15 並不會就入住醫院的總統套房/貴賓房/豪華房的住院費用而作出賠償。如住院時並非根據原有之計劃住房，住院及手術保障項目 A1 - A15 將應用以下調整值：
  - 半私家房至私家房：50%

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。

### ② 入住港怡醫院接受治療前，請瀏覽 [www.bupa.com.hk/pdf/ghk.pdf](http://www.bupa.com.hk/pdf/ghk.pdf) 或致電保柏查詢有關住房類別及在保柏保障計劃下相應之住房等級。

### ③ 此為於印刷日時最新之網絡醫院名單，此名單可能會不時更改。你可於入院前致電保柏查詢最新名單。

### ④ 會員可在轉介信發出日起計 6 個月內，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 關於癌症及嚴重傳染病保障

此保障將於以下情況下作出賠償：

- 會員確診癌症並入住醫院最少連續 6 小時，以接受該癌症的醫療必需的治療及診斷；或
- 會員患上任何嚴重傳染病，並在同一次入院時入住醫院的深切治療病房最少連續 10 日，以接受該嚴重傳染病的醫療必需的治療及診斷。
- 癌症指惡性腫瘤。其特徵為惡性細胞漸進地、不受控制地生長，侵入及破壞正常及周邊組織。癌症必須由組織病理學報告證實腫瘤呈陽性。其亦包括白血病、淋巴瘤或肉瘤。以下各項除外：
  - a. 原位癌、宮頸病變、CIN-1、CIN-2、CIN-3 顯示惡化的或在組織學上被描述為癌前病變的腫瘤；
  - b. 除惡性黑色素瘤以外的所有皮膚癌；
  - c. 在組織學上被描述為 TNM T1(a) 或 T1(b) 分級或其他等效或更輕分級的前列腺癌；
  - d. 輕於 RAI III 期的慢性淋巴細胞白血病；
  - e. 在組織學上被描述為 TNM TINOMO 分期或更輕分期的甲狀腺癌。
- 嚴重傳染病包括嚴重急性呼吸系統綜合症 (SARS)(SARS Cov-1)、登革熱、日本腦炎、克雅氏病 (包括人類瘋牛病變異型克雅氏病)、軍團菌、阿米巴痢疾、霍亂、瘧疾、麻疹、破傷風、炭疽、麻風病、狂犬病 (人類)、白喉、急性脊髓灰質炎、黃熱病、瘟疫、猩紅熱、2019 冠狀病毒病 (COVID-19) (SARS Cov-2) 及世界衛生組織 (WHO) 於日後發佈的任何國際關注的突發公共衛生事件 (PHEIC)。

### ⑥ 關於「住院及手術保障」下的網絡保障

要在入住保柏網絡醫院時享有 100% 賠償，你必須依循以下的規定：

- 入院前必須向保柏網絡醫院出示「保柏網絡醫療卡」，並以此卡來繳付醫療費用；
- 住院治療必須由註冊西醫轉介，並由網絡註冊西醫於你入住的網絡醫院進行，你必須入住此保障金額表上所示的指定住房級別或較低之病房；
- 在以下的情況，必須獲得保柏初步保障審核：
  - 住院；
  - 診所手術或日症 (按保柏供應商指引之要求)；
  - 診斷影像或化驗 (按保柏供應商指引之要求)；或
  - 由網絡註冊西醫轉介之專科治療，而保柏網絡未能提供該專科。

如沒有依循以上規定，合資格的醫療費用將會根據「非網絡保障」作出賠償。

請登入保柏的客戶服務網站 myBupa 查閱適用於住院及手術保障的完整網絡服務供應商名單，此名單可能會不時更改。

### ⑦ 有關日間手術保障

- 如於網絡服務供應商進行和以「網絡保障」支付內窺鏡和病毒性疣及皮損程序之前必須經由網絡醫生申請初步保障審核 (按保柏供應商指引之要求)。
- 如由你所選的醫生及服務供應商在 (i) 診所或醫院日症房或 (ii) 無需過夜的住院進行程序，所產生的符合資格的費用，將根據「非網絡保障」之每位會員最高賠償額為限。會員則無需申請初步保障審核。
- 如程序於需要過夜的住院進行，以下情況不需要申請初步保障審核：
  - 任何於香港以外的地方所進行的治療；
  - 於香港政府公立醫院大房住院及進行住院手術；或
  - 如你先向其他保險公司索償，再向保柏申請第二索償。
- 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，請參閱保柏客戶服務網站 myBupa 上的會籍文件頁面。此列表可能會不時更改。

### ⑧ 如會員於同一日同時接受多過一次的病毒性疣及皮損治療，將被算作為一次手術。保柏保留權利要求會員提供醫療報告以供檢閱。

### ⑨ 關於「門診保障」下的網絡保障

要在網絡保障下享有全數賠償的合資格門診治療，你必須依循以下的規定：

- 在網絡服務供應商接受治療前必須出示「保柏網絡醫療卡」，並以此卡來繳付醫療費用；
- 門診治療必須由網絡服務供應商於其診所進行 (除非屬專科治療，而保柏網絡未能提供該專科，並已取得初步保障審核)；
- 專科醫生診症 (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) 及物理治療必須經由註冊西醫書面轉介；
- 診斷影像及化驗 (如適用) 必須經由註冊西醫書面轉介，並於網絡診斷中心進行 (保柏亦接受由註冊中醫及脊醫用於 X 光及化驗的書面轉介)；
- 以下各項必須得到保柏初步保障審核：
  - 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，而保柏網絡未能提供該專科。

如沒有依循以上規定，合資格的醫療費用將會根據「非網絡保障」作出賠償。

請登入保柏的客戶服務網站 myBupa 查閱適用於門診保障的完整網絡服務供應商名單，此名單可能會不時更改。

### ⑩ 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。

### ⑪ 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) 及帕金森病的門診診治 (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門診保障下的其他項目，有關費用只可獲此項目 9 的賠償，而不會獲得其他項目之賠償。

### ⑫ 關於「保健服務」下的足病治療

此保障將支付會員於足病治療師門診診所由足病治療師診治的診症費，及於診治當日處方並由合法來源取得之醫療所需外塗藥物、矯形機械服務及治療等醫療費用。向足病治療師求診須由註冊西醫書面轉介。為免存疑，任何因病症所致或與之有關的治療或費用均不會獲得賠償。請於進行足病治療後先繳付醫療費用，然後向保柏提交索償申請。

### ⑬ 關於意外住院現金保障

意外住院現金保障將於以下情況下予以支付：

- 在同一醫院住院最少連續 6 小時，且住房及膳食費保障應予以支付；及
- 意外事故發生與該事故所致意料之外住院之間，並未相隔超過 48 小時。

### ⑭ 關於癌症及嚴重傳染病住院現金保障

癌症及嚴重傳染病住院現金保障將於以下情況下予以支付：

- 因確診癌症而住院最少連續 6 小時，以接受醫療必需的癌症診斷及治療，且住房及膳食費保障應予以支付；或
- 因感染任何嚴重傳染病而在同一次入院於醫院深切治療病房住院至少連續 10 日，以接受對該嚴重傳染病的醫療必需的診斷及治療，且深切治療費保障應予以支付。

每合約年度的最高賠償日數以「意外住院現金保障」及「癌症及嚴重傳染病住院現金保障」合併計算。

### ⑮ 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。請登入保柏的客戶服務網站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。

### ⑯ 要享有全數賠償的網絡牙科中心保障：

- 會員必須於指定網絡牙科中心出示保柏醫療卡及香港身份證以作核實及紀錄便可使用免找數服務。如會員直接向網絡牙科中心繳付費用，合資格的索償將根據非網絡牙科中心保障作出賠償，並以最高賠償額為限。

每合約年度，網絡牙科中心保障下項目 3-5 及 8-9 不設診治次數上限。

### ⑰ 門診保障下的普通科醫生、專科醫生及中醫師亦涵蓋由視像診症服務供應商的普通科醫生、專科醫生及中醫師醫療診症服務的診症費。此保障涵蓋指定的視像診症服務供應商的藥物運送費用 (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保柏的網站查閱，此名單可能會不時更改及更新。

- ① About Hospital and Surgical Benefit
  - Eligible expenses incurred in respect of the same item shall not be recoverable under more than one benefit item in the table for Hospital and Surgical Benefit.
  - Clinical Operation or Day Case, if eligible, will be paid under Hospital and Surgical Benefit. Clinical Operation and Day Case mean Medically Necessary surgical procedures which may be carried out at a clinic or day-case unit of a Hospital by a Registered Medical Practitioner where a stay in Hospital is not required, provided that the surgical procedure is classified as such by Bupa. The maximum number of days specified under the benefit items of Hospital and Surgical Benefit apply to the aggregate sum of Hospital stays under HealthNet Hospitals and Non-HealthNet Hospitals.
  - For Hospital and Surgical Benefit Plan A1 and A2, no benefit under Hospital and Surgical Benefit items A1 - A15 shall be payable for Hospital Confinement in class of suite/VIP/deluxe room of a Hospital. Adjustment factor applies to Hospital and Surgical Benefit items A1 - A15 if you are confined in a higher room level than your chosen level:
    - From Semi-private Room to Private Room: 50%
 However, the adjustment factors and room class restrictions 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.
  - ② For in-patient treatments at Gleneagles Hong Kong Hospital, please visit [www.bupa.com.hk/pdf/gkh.pdf](http://www.bupa.com.hk/pdf/gkh.pdf) or call Bupa to get details of the room types and how they are classified under Bupa's cover prior to your hospital stay.
  - ③ The list of HealthNet Hospitals is current at the date of printing and it is subject to change from time to time. For the current list, please call Bupa before hospital admission.
  - ④ 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.
  - ⑤ About Cancer and Serious Infectious Disease Benefit
 

This benefit is payable provided that:

    - The Member is diagnosed with Cancer and confined in a Hospital for at least 6 consecutive hours for the purpose of receiving Medically Necessary treatment and diagnosis of such Cancer; or
    - The Member has contracted any of the Serious Infectious Diseases and is confined in the Intensive Care Unit of a Hospital for at least 10 consecutive days in one Hospital admission, for the purpose of receiving Medically Necessary treatment and diagnosis of such Serious Infectious Disease.
 Cancer means the presence of a malignant tumour that is characterised by progressive, uncontrolled growth of malignant cells and invasion and destruction of normal and surrounding tissue. Cancer must be positively diagnosed with histopathological confirmation. This also includes leukaemia, lymphoma or sarcoma. The following are excluded:
    - a. Tumours showing the malignant changes of carcinoma-in-situ, cervical dysplasia, CIN-1, CIN-2, CIN-3 or which are histologically described as pre-malignant;
    - b. All skin cancers other than malignant Melanomas;
    - c. Prostate cancers which are histologically described as TNM Classification T1(a) or T1(b) or are of another equivalent or lesser classification;
    - d. Chronic Lymphocytic Leukaemia less than RAI Stage III;
    - e. Thyroid cancers which are histologically described as TNM classification TINOMO or a lesser classification.
 Serious Infectious Diseases include Severe Acute Respiratory Syndrome (SARS) (SARS Cov-1), Dengue Fever, Japanese Encephalitis, Creutzfeldt-Jakob Disease (Including Variant Creutzfeldt-Jakob Disease, human form of Mad Cow Disease), Legionnaires' Disease, Amoebic Dysentery, Cholera, Malaria, Measles, Tetanus, Anthrax, Leprosy, Rabies (Human), Diphtheria, Acute Poliomyelitis, Yellow Fever, Plague, Scarlet Fever, Coronavirus Disease 2019 (COVID-19) (SARS Cov-2) and any future Public Health Emergency of International Concern (PHEIC) according to the World Health Organization (WHO).
  - ⑥ About HealthNet Benefit under Hospital and Surgical Benefit
    - To enjoy 100% reimbursement for confinement at the Bupa HealthNet Hospitals, you must fulfil the below requirements:
      - Bupa HealthNet (BHN) Card must be presented to the Bupa HealthNet Hospital before confinement and used for payment of medical expenses;
      - Hospital treatment must be referred by a Registered Medical Practitioner and performed by a HealthNet Registered Medical Practitioner, and carried out at a HealthNet Hospital where you are confined according to the restricted room level or below as specified in this Schedule of Benefits;
      - Pre-authorisation must be obtained from Bupa for:
        - Hospital Confinement;
        - Clinical Operation or Day Case (as required by Bupa's provider guidelines);
        - Diagnostic imaging or laboratory tests (as required by Bupa's provider guidelines); or
        - Any treatment by a Specialist referred by a HealthNet Registered Medical Practitioner if the relevant speciality is not available in Bupa HealthNet.
 If the above requirements are not followed, eligible medical expenses will be reimbursed under Non-HealthNet Benefit.
      - For the full list of Bupa HealthNet Service Providers eligible under Hospital and Surgical Benefit, please log in to Bupa's customer service portal myBupa. This list is subject to change from time to time.
    - ⑦ About Day Case Procedure Benefits
      - For procedures performed at a HealthNet Service Provider and to be paid under HealthNet Benefit, pre-authorisation must be obtained through the HealthNet doctor from Bupa prior to endoscopy and viral warts and skin lesions procedures (as required by Bupa's provider guidelines).
      - For procedures performed by your choice of doctor and service provider for (i) Clinical Operations or Day Case at a clinic or day-case unit of a Hospital or (ii) Hospital Confinement without an overnight stay, the eligible expenses incurred will be payable up to the Maximum Limit per Member of Non-HealthNet Benefit without pre-authorisation required.
      - For procedures performed in Hospital Confinement with an overnight stay, no pre-authorisation is required in any of the following situations:
        - Any treatment performed outside Hong Kong;
        - Hospital Confinement and surgical procedures performed at ward level in the public sector of government Hospitals; or
        - If you file a claim for your procedure with another insurer first and submit a second claim to Bupa.
      - 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.
    - ⑧ If a Member receives more than one viral warts and skin lesions treatments at the same time on the same day, it will be counted as one operation. Bupa reserves the right to ask for a medical report for review.
    - ⑨ About HealthNet Benefit under Clinical Benefit
      - To enjoy full cover for eligible clinical treatments under HealthNet Benefit, you must fulfil the below requirements:
        - BHN Card must be presented to the Bupa HealthNet Service Providers before treatment and used for payment of medical expenses;
        - Clinical treatment must be performed by a HealthNet Service Provider and carried out at their clinics (except for treatment by a Specialist where the relevant speciality is not available in Bupa HealthNet and pre-authorisation has been obtained);
        - Specialist consultation (except for dermatology, family medicine, gynaecology, ophthalmology, orthopaedics, otolaryngology, paediatric surgery, paediatrics and psychiatry) and physiotherapy must be referred in writing by a Registered Medical Practitioner;
        - Diagnostic imaging and laboratory tests, if applicable, must be referred in writing by a Registered Medical Practitioner and carried out at a HealthNet Diagnostic Centre (Bupa also accepts referral letters issued by a Registered Chinese Medicine Practitioner and Chiropractor for X-ray and laboratory tests);
        - Pre-authorisation must be obtained from Bupa for:
          - Diagnostic imaging or laboratory tests (as required by Bupa's provider guidelines);
          - Any treatment by a Specialist referred by a HealthNet Registered Medical Practitioner if the relevant speciality is not available in Bupa HealthNet.
 If the above requirements are not followed, eligible medical expenses will be reimbursed under Non-HealthNet Benefit.
        - For the full list of Bupa HealthNet Service Providers eligible under Clinical Benefit, please log in to Bupa's customer service portal myBupa. This list is subject to change from time to time.
      - ⑩ 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.
      - ⑪ 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 9 and no benefit shall be payable under other benefit items.
      - ⑫ About podiatry service under Wellness Service
        - This Benefit is payable for treatment by a Podiatrist on an outpatient basis at his/her clinic including consultation fee and charges for Medically Necessary topical medicament, orthomechanical services and procedures prescribed at the time of consultation and obtained at a legitimate source on the same day of consultation. The visit to a Podiatrist must be referred in writing by a Registered Medical Practitioner. For the avoidance of doubt, any treatment or expenses in respect of or as a result of Disability shall not be covered. Please pay your podiatry expenses first and submit a claim to Bupa for reimbursement.
      - ⑬ About Accidental Hospital Cash Benefit
 

Accidental Hospital Cash Benefit is payable provided that:

        - Hospital Confinement lasts for 6 consecutive hours or more in the same hospital and Room and Board Benefit is payable; and
        - The occurrence of an Accident and the unplanned Hospital Confinement resulting from such Accident are not separated by more than 48 hours.
      - ⑭ About Cancer and Serious Infectious Disease Hospital Cash Benefit
 

Cancer and Serious Infectious Disease Hospital Cash Benefit is payable provided that:

        - Hospital Confinement for at least 6 consecutive hours as a result of being diagnosed with Cancer, for the purpose of receiving Medically Necessary treatment and diagnosis of such Cancer, and Room and Board Benefit is payable; or
        - Confinement in the Intensive Care Unit of a Hospital lasts for at least 10 consecutive days in one Hospital admission as a result of contracting any of the Serious Infectious Diseases, for the purpose of receiving Medically Necessary treatment and diagnosis of such Serious Infectious Disease, and Intensive Care Benefit is payable.
      - ⑮ The maximum number of days covered per Contract Year is the aggregate sum of the Accidental Hospital Cash Benefit and Cancer and Serious Infectious Disease Hospital Cash Benefit.
      - ⑯ Network Dental Centre refers to the network of dental service providers appointed by Bupa to provide dental services items 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 customer service portal 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.
      - ⑰ To enjoy full cover under Network Dental Centre benefit:
        - Members must use cashless service at designated Network Dental Centres by presenting their Bupa medical card and Hong Kong Identity Card for verification and record. If the payment is made by the Members to the Network Dental Centres directly, eligible claims will be paid under Non-Network Dental Centre benefit and subject to the maximum limits thereunder.
        - There is no limit on the number of visits for Network Dental Centre benefit items 3-5 and 8-9 per Contract Year.
      - ⑱ General practitioner, specialist and Chinese herbalist under Clinical Benefit also cover 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 providers (general practitioner and Chinese herbalist only). The list of designated video consultation service providers can be found on Bupa's website. The list may be updated and amended by Bupa from time to time.

# 保柏僱健康中小企醫療保障計劃 (翱翔級別) Bupa Empower SME Health Insurance Scheme (Flyer Tier)



## 保費表 Subscription Rate Table

2024年1月1日版本 1 January 2024 Edition

以港幣計算 All figures in HK\$

主要保障 Core Benefits		每人每年保費 (港幣) Annual Subscription per Person (HK\$)						升級選項之附加保費率 Subscription loading for upgrade option		
		僱員 <sup>①</sup> /配偶 <sup>②</sup> 的平均已屆年齡 <sup>③</sup> Average attained age <sup>③</sup> of employee <sup>①</sup> /spouse <sup>②</sup>					子女 <sup>④</sup> 之已屆年齡 Attained age of children <sup>④</sup>			
		16-30	31-40	41-50	51-64	65-69 (只供續保 For renewal only)	15日 days - 17歲 years			
<b>A 住院及手術保障 Hospital and Surgical Benefit</b>								100% 賠償率 100% reimbursement		
計劃 Plan A1	私家房 Private	9,525	12,067	15,684	22,220	41,837	11,205	+20%		
計劃 Plan A2	半私家房 Semi-private	4,952	6,585	7,572	12,515	20,197	5,409	+20%		
計劃 Plan A3	半私家房 Semi-private	2,459	3,848	5,751	9,054	12,123	4,109	+12%		
計劃 Plan A4	大房 Ward	1,332	2,083	3,114	4,902	6,347	2,225	+12%		
<b>C 門診保障 Clinical Benefit</b>										
計劃 Plan C1		5,148	6,601	7,611	7,778	9,872	8,963	+20%	不適用 N/A	+50%
計劃 Plan C2		2,508	3,216	3,708	3,789	4,809	4,367	+14%	+5%	不適用 N/A
計劃 Plan C3		1,847	2,368	2,731	2,791	3,542	3,216	+14%	+5%	不適用 N/A
<b>自選保障 Optional Benefits</b>										
<b>D 附加醫療保障<sup>④</sup> Supplementary Major Medical Benefit<sup>④</sup></b>										
計劃 Plan D1		301	522	809	1,424	2,958	253			
計劃 Plan D2		261	454	703	1,238	2,570	220			
計劃 Plan D3		810	1,408	2,180	3,840	6,128	682			
計劃 Plan D4		652	1,133	1,754	2,747	3,890	549			
<b>E 特別住院現金保障<sup>④</sup> Special Hospital Cash Benefit<sup>④</sup></b>										
計劃 Plan E1							112			
計劃 Plan E2							56			
<b>F 產科保障<sup>⑤</sup> Maternity Benefit<sup>⑤</sup></b>										
計劃 Plan F1							15,889			
計劃 Plan F2							9,293			
<b>G 牙科保障<sup>④</sup> Dental Benefit<sup>④</sup></b>										
計劃 Plan G1							900			

### 保費計算方法 Calculation of Subscriptions

享相同保障組合的僱員及配偶 (如適用) 之保費將按他們的平均年齡計算。另外, 如在主要保障下選擇「升級選項」, 須應用「升級選項之附加保費率」計算實際保費。  
例子: 如5名享住院及手術保障計劃A1(附升級選項)的僱員之平均年齡為38歲, 他們的保費將按31至40歲組別的保費計算: HK\$12,067 x 120% x 5 = HK\$72,402  
The subscriptions for employees and spouses (if applicable) with the same benefit combinations will be based on their average age. In addition, if you choose the "upgrade option" under core benefits, you'll need to apply the "Subscription loading for upgrade option" to calculate the actual subscriptions.  
Example: If the average age of the 5 employees under Hospital and Surgical Benefit Plan A1 with upgrade option is 38, their subscriptions will be based on the 31-40 age group.  
HK\$12,067 x 120% x 5 = HK\$72,402

### 附註 Notes

- 所有資格相同的僱員必須參加同一保障組合。
- 如在任何保障組合內選擇家屬保障, 所有合格的家屬必須跟相關僱員參加同一保障組合。
- 僱員/配偶的平均已屆年齡 = 同一保障組合下所有受保成人的已屆年齡之總和 ÷ 此保障組合下的所有受保成人人數。
- 如在任何保障組合內選擇「附加醫療保障」、「特別住院現金保障」及/或「牙科保障」, 在同一保障組合內的所有會員必須投保。
- 如在任何保障組合內選擇「產科保障」, 在同一保障組合內的所有女性會員 (僱員及配偶) 必須投保。
- All employees with the same eligibility must be enrolled in the same benefit combination.
- If dependant cover is selected in any benefit combination, all eligible dependants must join the same benefit combination as that of the relevant employee.
- Average attained age of employees/spouses = the sum of all insured adults' attained age in the same benefit combination ÷ no. of insured adults in this benefit combination.
- If Supplementary Major Medical Benefit, Special Hospital Cash Benefit and/or Dental Benefit is selected in any benefit combination, all members covered by that benefit combination must be enrolled.
- If Maternity Benefit is selected in any benefit combination, all female members (employees and spouses) covered by that benefit combination must be enrolled.

### 有關保費徵費

由2018年1月1日起, 保險業監管局按保費徵收徵費, 徵費額是以每份合約的保費的某個百分比計算。保費表上的保費尚未包括應繳徵費, 應繳徵費將按適用的徵費率計算。有關徵費率詳情, 請瀏覽 [www.bupa.com.hk/levy](http://www.bupa.com.hk/levy)。

### About Levy payment

Starting from 1 January 2018, insurance subscription payment is subject to the Insurance Authority's levy. The amount of levy charged will be based on a percentage of the total amount of subscription under an insurance contract. Payable levy is not included in the subscription rates shown in the Table of Subscriptions and is subject to the applicable levy rate. For general information on the applicable levy rates, please visit [www.bupa.com.hk/levy](http://www.bupa.com.hk/levy).

中、英文之意思如有任何差別, 概以英文為準。所有條款及細則以合約為準。請參考合約查閱保障金額表內大楷詞語之定義。

In the event of any discrepancy in respect of the meaning between the Chinese version and the English version, the English version shall prevail. All terms and conditions are subject to the Contract. Please refer to the Contract for definitions of the capitalised terms in the Schedule of Benefits.

保柏 (亞洲) 有限公司 Bupa (Asia) Limited

地址: 香港九龍觀塘海濱道77號海濱匯第2座6樓

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

電話 Telephone: (852) 2517 5175 傳真 Facsimile: (852) 2548 1848 網址 Website: [www.bupa.com.hk](http://www.bupa.com.hk)

