

# Bupa Together Health Insurance Scheme Application Form

## 保柏互通保額醫療保障計劃申請表



To ensure your cover can take effect on the first day of the following month, please send us the completed application form at least 5 working days prior to the end of the month. Applications are subject to underwriting.

如欲合約在下月一號生效，請將填妥的申請表於月底前最少5個工作天寄回保柏。所有申請必須通過核保始能生效。

Please complete this form in **ENGLISH and BLOCK LETTERS**. Please tick as appropriate.  
請以**英文正楷**填妥本申請表，並於適用地方加「✓」號。

For Bupa use only 保柏專用	Reference No. : 參考編號	_____		
	Effective Date : 生效日期	DD 日	MM 月	YYYY 年

### Medical Protection Needs Assessment 醫療保障需要評估

(Please note: The following questions are to evaluate the suitability of the insurance product(s) under this application based on your needs and circumstances. Application can be suspended or rejected in case of suitability mismatch. 請注意：以下問題旨在評估此投保申請下的保險產品的適合性，以滿足閣下的需要及情況。如出現保險產品與閣下保障需要錯配的情況，投保申請可被暫緩或拒絕。)

**Question 問題 1** What is/are your objective(s) for purchasing the medical insurance policy? (tick one or more) 請問你投保此醫療保單的目的是? (可選一項或多項)

- Option 選擇 1: For the expenses of hospitalisation 為應付住院開支
- Option 選擇 2: For the financial need when suffer from critical illness 為應付患上危疾時的經濟需要
- Option 選擇 3: For the long term care and financial needs in case of permanent total disability 為永久完全傷殘時的長期醫療保健及經濟需要
- Option 選擇 4: For the expenses of outpatient visits and other medical needs (such as dental, vision benefit, etc) 為應付門診或其他醫療所需 (例如牙醫、眼科等)

**Question 問題 2** Which type(s) of medical insurance you are looking for? (tick one or more) 請問你會考慮投保哪一類型的醫療保單呢? (可選一項或多項)

- Option 選擇 1: Indemnity (cover the eligible expenses by the policy) 彌償式賠償 (即按保單規定之合資格開支提供實報實銷式的賠償)
- Option 選擇 2: Non-indemnity (a payment based on a sum insured amount by the policy) 非彌償式賠償 (即按保單訂明的保額作出賠償)

### Personal Details of Applicant 申請人資料 (Applicant must be aged 18 years or above 申請人年齡必須為18歲或以上)

Title 稱謂 Name of Applicant (same as HKID Card) 申請人姓名 (與香港身份證相同)

Mr 先生 Surname 姓 \_\_\_\_\_

Mrs 太太 \_\_\_\_\_

Ms 女士 Given Name \_\_\_\_\_

Miss 小姐 名 \_\_\_\_\_

HKID Card No. / Passport No. 香港身份證號碼 / 護照號碼 \_\_\_\_\_

Sex 性別  M 男  F 女

Date of Birth 出生日期 \_\_\_\_\_ DD 日 \_\_\_\_\_ MM 月 \_\_\_\_\_ YYYY 年

### Contact Details of Applicant 申請人聯絡資料

Correspondence Address\* 通訊地址\* (Please complete in ENGLISH and BLOCK LETTERS 請以英文正楷填寫)

Flat 單位 / Room 室 / Floor 層數 \_\_\_\_\_

Block 座 / Building 大廈 / Mansion 閣 / House 樓 / Estate 屋苑 \_\_\_\_\_

Street 街 / Road 道 \_\_\_\_\_

District 地區 \_\_\_\_\_  HK 香港  Kln 九龍  NT 新界

Email Address# 電郵地址# \_\_\_\_\_

Contact No. 聯絡電話 \_\_\_\_\_ Fax No. 傳真號碼 \_\_\_\_\_ Mobile No. 流動電話號碼 \_\_\_\_\_

Place of Residence^ 居住地 \_\_\_\_\_

\* P. O. Box, hotel address and overseas address are not acceptable. 郵政信箱、酒店地址及海外地址恕不接納。

# You can access our e-Services through **myBupa**, our online and mobile platform, to view and download some of your policy-related documents. To access these e-documents\*\*, you are required to register for a **myBupa** account and provide an email address where you will receive email notifications when a document is ready for you to access from your **myBupa** account. You will no longer receive hard copy of these documents by post.

To help save our planet, Bupa encourages communications through electronic means. This will be the default option for our future communications with you after your insurance policy has been set up. However, if you wish to receive a hard copy of all documents by post, please contact your insurance consultant to let us know your preference.

\*\* Please refer to <https://www.bupa.com.hk/en/customer-care/mybupa/> for the latest list of e-documents available on **myBupa**. This list is subject to change.

# 你可透過 **myBupa** 網上及手機的電子服務查閱及下載與你保單相關的部分文件。要查閱這些電子文件\*\*，你須登記 **myBupa** 帳戶，並提供電郵地址。當文件已上載於你的 **myBupa** 帳戶後，你便會收到電郵通知。你將不會以郵寄方式收到這些保單文件的印刷本。

為了拯救我們的地球，保柏鼓勵通過電子方式進行溝通。這將會是我們未來在設立你的保單時與你溝通的默許選擇。但是，如果你希望通過郵寄方式收到所有文件的列印本，請聯絡你的保險顧問讓我們了解你的選擇。

\*\* 有關上載於 **myBupa** 的最新電子文件清單，請參考 <https://www.bupa.com.hk/tc/customer-care/mybupa/>，此清單會不時更改。

^ Unless otherwise specified by Member in writing, Inter Partner Assistance Hong Kong Limited will consider Hong Kong as the Place of Residence of all Members and repatriate relevant Members to Hong Kong when Medically Necessary.

除非會員特別以書面通知，國際救援 (亞洲) 有限公司將設定香港為所有會員之居住地，於有醫療需要時送返有關會員回香港。



## Details of Proposed Member(s) and Choice of Cover 準會員資料及投保項目

Myself 本人

(Details as page 1 資料如同第一頁)

Core Benefit 主要保障  Hospital and Surgical Benefit 住院及手術保障 Benefit Level 保障級別  Ward 大房 Optional Benefit 自選額外保障  Supplementary Major Medical Benefit 附加醫療保障<sup>1</sup>  Clinical 門診  Maternity 產科<sup>2</sup>  Dental (Plan A) 牙科 (計劃A)  Dental (Plan B) 牙科 (計劃B)

Spouse 配偶

(must be aged 16 years or above. 年齡必須介乎16歲或以上。)

Spouse's Name (same as HKID Card) 配偶姓名 (與香港身份證相同)

Surname 姓 \_\_\_\_\_

Given Name 名 \_\_\_\_\_

HKID Card No. 香港身份證號碼 \_\_\_\_\_ Sex 性別  M 男  F 女 Date of Birth 出生日期 \_\_\_\_\_

Place of Residence<sup>^</sup> 居住地 \_\_\_\_\_

Core Benefit 主要保障  Hospital and Surgical Benefit 住院及手術保障 Benefit Level 保障級別  Ward 大房 Optional Benefit 自選額外保障  Supplementary Major Medical Benefit 附加醫療保障<sup>1</sup>  Clinical 門診  Maternity 產科<sup>2</sup>  Dental (Plan A) 牙科 (計劃A)  Dental (Plan B) 牙科 (計劃B)

Child 子女 1

(Child Members must be aged 15 days or above. 子女年齡必須為15日或以上。)

Child's Name (same as HKID Card/Birth Certificate) 子女姓名 (與香港身份證/出生證明書相同)

Surname 姓 \_\_\_\_\_

Given Name 名 \_\_\_\_\_

HKID Card No. / Birth Certificate No. 香港身份證號碼 / 出生證明書號碼 \_\_\_\_\_ Sex 性別  M 男  F 女 Date of Birth 出生日期 \_\_\_\_\_

Place of Residence<sup>^</sup> 居住地 \_\_\_\_\_

Core Benefit 主要保障  Hospital and Surgical Benefit 住院及手術保障 Benefit Level 保障級別  Ward 大房 Optional Benefit 自選額外保障  Supplementary Major Medical Benefit 附加醫療保障<sup>1</sup>  Clinical 門診  Maternity 產科<sup>2</sup>  Dental (Plan A) 牙科 (計劃A)  Dental (Plan B) 牙科 (計劃B)

Child 子女 2

(Child Members must be aged 15 days or above. 子女年齡必須為15日或以上。)

Child's Name (same as HKID Card/Birth Certificate) 子女姓名 (與香港身份證/出生證明書相同)

Surname 姓 \_\_\_\_\_

Given Name 名 \_\_\_\_\_

HKID Card No. / Birth Certificate No. 香港身份證號碼 / 出生證明書號碼 \_\_\_\_\_ Sex 性別  M 男  F 女 Date of Birth 出生日期 \_\_\_\_\_

Place of Residence<sup>^</sup> 居住地 \_\_\_\_\_

Core Benefit 主要保障  Hospital and Surgical Benefit 住院及手術保障 Benefit Level 保障級別  Ward 大房 Optional Benefit 自選額外保障  Supplementary Major Medical Benefit 附加醫療保障<sup>1</sup>  Clinical 門診  Maternity 產科<sup>2</sup>  Dental (Plan A) 牙科 (計劃A)  Dental (Plan B) 牙科 (計劃B)

Applicant's parents / Applicant's parents-in-law 申請人或申請人配偶之父母

Relationship with the applicant 與申請人關係  Applicant's father 申請人之父親  Applicant's mother 申請人之母親  Applicant's father-in-law 申請人配偶之父親  Applicant's mother-in-law 申請人配偶之母親

Applicant's parents' / Applicant's parents-in-law's Name (same as HKID Card) 申請人或申請人配偶之父母姓名 (與香港身份證相同)

Surname 姓 \_\_\_\_\_

Given Name 名 \_\_\_\_\_

HKID Card No. 香港身份證號碼 \_\_\_\_\_ Sex 性別  M 男  F 女 Date of Birth 出生日期 \_\_\_\_\_

Place of Residence<sup>^</sup> 居住地 \_\_\_\_\_

Core Benefit 主要保障  Hospital and Surgical Benefit 住院及手術保障 Benefit Level 保障級別  Ward 大房 Optional Benefit 自選額外保障  Supplementary Major Medical Benefit 附加醫療保障<sup>1</sup>  Clinical 門診  Maternity 產科<sup>2</sup>  Dental (Plan A) 牙科 (計劃A)  Dental (Plan B) 牙科 (計劃B)

<sup>^</sup> Unless otherwise specified by Member in writing, Inter Partner Assistance Hong Kong Limited will consider Hong Kong as the Place of Residence of all Members and repatriate relevant Members to Hong Kong when Medically Necessary.

除非會員特別以書面通知，國際救援（亞洲）有限公司將設定香港為所有會員之居住地，於有醫療需要時送返有關會員回香港。

<sup>1</sup> Applicable to proposed Member(s) under 60 years old. 適用於60歲以下之準會員。

<sup>2</sup> Applicable to female proposed Member(s) aged 18-49. 適用於18-49歲之女性準會員。

## Details of Proposed Member(s) and Choice of Cover (Cont.) 準會員資料及投保項目 (續)

Applicant's parents / Applicant's parents-in-law 申請人或申請人配偶之父母

Relationship with the applicant 與申請人關係  Applicant's father 申請人之父親  Applicant's mother 申請人之母親  Applicant's father-in-law 申請人配偶之父親  Applicant's mother-in-law 申請人配偶之母親

Applicant's parents' / Applicant's parents-in-law's Name (same as HKID Card) 申請人或申請人配偶之父母姓名 (與香港身份證相同)

Surname 姓 \_\_\_\_\_

Given Name 名 \_\_\_\_\_

HKID Card No. 香港身份證號碼 \_\_\_\_\_ Sex 性別  M 男  F 女 Date of Birth 出生日期 \_\_\_\_\_ DD 日 \_\_\_\_\_ MM 月 \_\_\_\_\_ YYYY 年

Place of Residence<sup>^</sup> 居住地 \_\_\_\_\_

Core Benefit 主要保障  Hospital and Surgical Benefit 住院及手術保障 Benefit Level 保障級別  Ward 大房 Optional Benefit 自選額外保障  Supplementary Major Medical Benefit 附加醫療保障<sup>1</sup>  Clinical 門診  Maternity 產科<sup>2</sup>  Dental (Plan A) 牙科 (計劃A)  Dental (Plan B) 牙科 (計劃B)

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除非會員特別以書面通知，國際救援 (亞洲) 有限公司將設定香港為所有會員之居住地，於有醫療需要時送返有關會員回香港。

<sup>1</sup> Applicable to proposed Member(s) under 60 years old. 適用於60歲以下之準會員。

<sup>2</sup> Applicable to female proposed Member(s) aged 18-49. 適用於18-49歲之女性準會員。

## Payment Method 繳付保費方法

Payment Frequency 繳付保費形式	Payment Method 繳付保費方法	Remarks 備註
<input type="checkbox"/> Yearly 年繳	<input type="checkbox"/> Credit Card 信用卡	Please attach a completed <b>Credit Card Authorisation Form</b> 請連同填妥之 <b>信用卡付款授權書</b> 寄回
	<input type="checkbox"/> Autopay from Bank 銀行自動轉賬 (From renewal payment only 續保繳費起適用)	Please attach a cheque made payable to "Bupa (Asia) Limited" for the 1st year's subscription and levy with a completed <b>Direct Debit Authorisation Form</b> 請填妥 <b>直接付款授權書</b> ，連同首年保費及保費徵費之支票交回本公司，支票抬頭人為「保柏 (亞洲) 有限公司」
<input type="checkbox"/> Monthly 月繳	<input type="checkbox"/> Credit Card 信用卡	Please attach a completed <b>Credit Card Authorisation Form</b> 請連同填妥之 <b>信用卡付款授權書</b> 寄回
	<input type="checkbox"/> Autopay from Bank 銀行自動轉賬	Please attach a cheque made payable to "Bupa (Asia) Limited" for the first 2 months' subscription and levy with a completed <b>Direct Debit Authorisation Form</b> 請填妥 <b>直接付款授權書</b> ，連同首兩個月保費及保費徵費之支票交回本公司，支票抬頭人為「保柏 (亞洲) 有限公司」

## Bank Account for Reimbursement 支付賠償之銀行戶口

Claims payment will be reimbursed by autopay only. 賠償款項只以自動轉賬方式支付。

I hereby agree and authorise Bupa (Asia) Limited to reimburse claims payment to the account below. 本人同意及授權保柏 (亞洲) 有限公司轉賬賠償款項於以下戶口。

Account Holder's Name (Same as recorded on bank account statement/passbook) 戶口持有人姓名 (與銀行結單/存摺相同)

HKID Card No. 香港身份證號碼 \_\_\_\_\_

Personal Hong Kong savings / current account number (HK\$ only) 個人香港儲蓄 / 往來銀行戶口號碼 (只限港幣)

Bank Name 銀行名稱 \_\_\_\_\_ Bank No. 銀行編號 \_\_\_\_\_ Account No. 戶口號碼 \_\_\_\_\_

If the above account holder is not the applicant, please fill in the following information. 若上述之戶口持有人並非申請人，請填寫以下資料。

Relationship with the applicant or proposed Member\* 與申請人或準會員\*關係 (Applicable to spouse, parents or children only 只適用於配偶、父母或子女)

\* Please delete if inappropriate 請刪除不適用者

**Important Note 重要事項**

During the insurance application process, it's important that you act with utmost good faith and disclose all material facts related to the proposed Member 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 and this causes Bupa to accept the risk, this will raise questions about your entitlement to insurance benefits. Consequences may include termination of your policy or reduction of entitlement to claims payments in all or part.

在保險申請過程中，務必以至高誠信向保柏披露有關準會員所有重要事實。如果你不確定某個事實是否重要，則應將其披露。如你未能披露或錯誤陳述重要事實，而導致保柏承擔有關風險，這將影響你所享有的保障。其結果可能包括終止你的保單；或減少全部或部分你所獲得的賠償。

- (i) This questionnaire collects health-related information solely for the purpose of underwriting which is a process for Bupa to evaluate the health risk of the applicants and decide the application results. The underwriting process that Bupa adopts should be fair and reasonable, and Bupa should explain the application results if requested by the customers. 此問卷收集與健康相關的資料僅作為核保之用途，而核保是保柏評估申請人之健康風險及決定申請結果的程序。保柏採用的核保程序應為公平合理，並會因應客戶要求解釋申請結果。
- (ii) As the applicant, you are required to provide Bupa with complete and accurate information requested in this questionnaire to the best of your knowledge and belief. Based on the information provided, Bupa may have follow-up questions or enquiries that require you to provide further information for underwriting purpose. 作為申請人，你需要盡其所知所信，按本問卷中要求向保柏提供完整及準確的資料。保柏根據你提供的資料，可能會提出跟進問題或查詢而需要你進一步提供資料以作核保之用。
- (iii) If there are any changes to or updates of the information provided in this questionnaire after the time of submission of this application and before you receive the Policy, you are required to notify Bupa in a timely manner. 若你在提交本申請表後至你收到保單前的期間就本問卷中提供的資料有任何改變或更新，你需要及早通知保柏。
- (iv) Even after an insurance policy has been issued upon successful application, the insurance coverage for the proposed Member may be affected or the policy may be terminated, voided or rescinded, or claims may be repudiated by Bupa, if you have not provided Bupa with complete and accurate information to the best of your knowledge and belief according to (ii), or if you have not notified Bupa on any changes to or updates of the information in time according to (iii). 即使已成功投保並獲簽發保單，若你未按 (ii) 所述盡其所知所信向保柏提供完整及準確的資料，或未按 (iii) 所述就資料的任何改變或更新而及早通知保柏，準會員的保險保障可能會受到影響，保柏亦可能因此終止、作廢或撤銷有關保單，或拒絕賠償。

**Guidance Note in completing the questionnaire 填寫問卷指引**

If your answer to any of the questions in Section A below is "Yes", please proceed to answer the relevant follow-up questions in Health Questionnaire - Section B. 若以下甲部任何一項問題之答案為「是」者，請於健康問卷 - 乙部回答相關的跟進問題。

You do not need to disclose information regarding the medical conditions or treatments below - Cold / flu / sore throat, gastroenteritis / food poisoning (fully recovered), indigestions (no investigations required), acne, muscle sprained (fully recovered), thrush, routine scan / blood test for pregnancy (normal result), routine cervical smear (normal result), routine health check (normal result), preventive vaccination, Hormonal Replacement Therapy (menopause), infertility treatment or uncomplicated pregnancy, myopia / hyperopia / astigmatism / presbyopia.

你無需披露以下健康狀況或治療 - 傷風/感冒/喉嚨痛、腸胃炎/食物中毒(已痊癒)、消化不良(無需檢查)、痤瘡、肌肉扭傷(已痊癒)、鵝口瘡、常規產前掃描/血液檢驗(檢驗結果正常)、常規子宮頸細胞塗片檢驗(檢驗結果正常)、常規健康檢查(檢查結果正常)、預防疫苗、荷爾蒙補充治療(更年期)、不育治療或胎兒生長情況正常的懷孕、近視/遠視/散光/老花。

You are required to provide Bupa with complete and accurate information requested in this questionnaire to the best of your knowledge and belief, including any and all medical information which are known or ought to be known by Bupa in any previous insurance application and medical claims.

你需要盡其所知所信，按本問卷中要求向保柏提供完整及準確的資料，包括在之前的任何保險申請和醫療索償中保柏已知或應該知道的任何及所有醫療資料。

**Health Questionnaire - Section A 健康問卷 - 甲部**

	Name of applicant 申請人姓名	Name of proposed Member 準會員姓名	Name of proposed Member 準會員姓名	Name of proposed Member 準會員姓名	Name of proposed Member 準會員姓名
Height 身高#	cm 厘米 / feet 呎 inches 吋	cm 厘米 / feet 呎 inches 吋	cm 厘米 / feet 呎 inches 吋	cm 厘米 / feet 呎 inches 吋	cm 厘米 / feet 呎 inches 吋
Weight 體重#	kg 公斤 / pounds(lbs) 磅	kg 公斤 / pounds(lbs) 磅	kg 公斤 / pounds(lbs) 磅	kg 公斤 / pounds(lbs) 磅	kg 公斤 / pounds(lbs) 磅
Do you (or proposed Member) smoke# or have you (or proposed Member) smoked# in the last one year? 你(或準會員)有沒有吸煙#或在過去一年內曾否吸煙#?	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否
1. In the last 3 years, have you (or proposed Member) ever had or been advised to have any regular or ongoing (such as monthly, every 2 months, half-yearly, annually) follow-up consultations or medical care with a healthcare professional (such as specialist doctor, physiotherapist, psychiatrist) for any disease or other medical condition? 在過去三年內，你(或準會員)是否曾經或被建議定期或持續(例如每月、每兩個月、每半年、每年)為任何疾病或健康狀況接受專業醫護人員(例如專科醫生、物理治療師、精神科醫生)的跟進診治或醫療護理?	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否

# Not required for proposed Member below 18 years old. For the purpose of this question, the meaning of "smoking" includes but is not limited to cigarettes, cigars, tobacco pipes, chewing tobacco and the use of nicotine replacement products (such as e-cigarettes). 18歲以下之準會員無需填寫。「吸煙」在此問題的含義包括但不限於香煙、雪茄、煙斗、嚼煙及使用尼古丁補充劑產品(例如電子煙)。

**Health Declaration and Questionnaire (Cont.) 健康聲明及問卷 (續)**

	Name of applicant 申請人姓名	Name of proposed Member 準會員姓名	Name of proposed Member 準會員姓名	Name of proposed Member 準會員姓名	Name of proposed Member 準會員姓名
<p>2. In the last 3 years, have you (or proposed Member) ever had or been advised to undergo investigations (such as blood or urine test, ECG, X-ray, ultrasound, CT scan, MRI, PET scan, HIV test, Hepatitis B test, Hepatitis C test)? 在過去三年內，你(或準會員)是否曾接受或曾被建議接受檢查(例如驗血、驗尿、心電圖、X光、超聲波、電腦掃描、磁力共振、正電子掃描、愛滋病測試、乙型肝炎測試、丙型肝炎測試)?</p> <p>If the answer is "Yes", do your (or proposed Member) investigation result(s) include the followings? 如果答案屬「是」，你(或準會員)的檢查結果是否包括下列情況?</p> <p>(a) Abnormal test result is advised 檢驗結果異常</p> <p>(b) You (or proposed Member) are still awaiting test / test result 你(或準會員)正等候檢驗或檢驗結果</p> <p>(c) Medical advice has been sought or treatment is required for the test result (such as liver cyst / brain cyst / joint degeneration or calcification / lung or breast or thyroid calcification discovered on imaging test, that may not require immediate treatment) 就檢驗結果已尋求醫療意見或需要接受治療(例如一些未必需要即時治療的情況如肝囊腫/腦囊腫/關節退化或鈣化/於成像檢測中發現肺部或乳房或甲狀腺出現鈣化)</p>	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否
<p>3. In the last 5 years, have you (or proposed Member) been advised by your doctor to take any medications (such as to be taken daily / once per week / as needed as directed by doctor) for a continuous period of more than 1 month? 在過去五年內，你(或準會員)是否曾被醫生建議定期(例如按醫生指示每日/每週一次/有需要時)服用為期超過一個月的處方藥物?</p>	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否
<p>4. In the last 5 years, have you (or proposed Member) been admitted into a hospital? 在過去五年內，你(或準會員)是否曾入住醫院?</p>	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否
<p>5. In the last 5 years, have you (or proposed Member) undergone a surgical procedure (including endoscopy or biopsy) without being admitted into a hospital? 在過去五年內，你(或準會員)是否曾在非住院情況下接受外科程序(包括內窺鏡檢查或活組織化驗)?</p>	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否
<p>6. Apart from anything you (or proposed Member) have already disclosed in Questions 1-5, do you (or proposed Member) have any of the following conditions? 除了你(或準會員)在第1至5項問題中已披露的資料外，你(或準會員)是否有下列情況?</p> <p>(a) Unintentional weight loss by more than 5 kg (11 lbs) over past 1 year 在過去一年內，體重無故地減少了5公斤(11磅)以上</p> <p>(b) Abnormal bleeding (such as vaginal bleeding, rectal bleeding, nose bleeding or coughing up of blood) for at least one month 不正常出血(例如陰道出血、便血、流鼻血或咳血)至少一個月</p> <p>(c) Other medical conditions or other sign and symptom (such as lump, headache, persistent coughing, chest pain or epigastric pain) that you (or proposed Member) are seeking or intend to seek medical advice 其他健康狀況或病徵及症狀(例如腫塊、頭痛、持續咳嗽、胸痛或上腹痛)而正在或打算尋求醫療意見</p> <p>(d) In the last 1 year, you (or proposed Member) had or have been required to have follow-up consultation with a healthcare professional (such as specialist doctor, physiotherapist, psychiatrist) for any medical condition or sign and symptom 在過去一年內，你(或準會員)有任何健康狀況或病徵及症狀曾經接受或需要接受專業醫護人員(例如專科醫生、物理治療師、精神科醫生)的跟進診治</p>	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否

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**Health Declaration and Questionnaire (Cont.) 健康聲明及問卷 (續)**

	Name of applicant 申請人姓名	Name of proposed Member 準會員姓名	Name of proposed Member 準會員姓名	Name of proposed Member 準會員姓名	Name of proposed Member 準會員姓名
7. Have you (or proposed Member) ever been diagnosed with any of the following diseases or medical conditions? 你(或準會員) 是否曾被確診下列疾病或健康狀況? (a) Cancer or carcinoma in situ 癌症或原位癌 (b) Brain tumor 腦部腫瘤 (c) Heart disease 心臟疾病 (d) Stroke (including transient ischemic attack (TIA)) 中風 (包括短暫性腦缺血, 俗稱「小中風」) (e) Hypertension 高血壓 (f) Diabetes mellitus or impaired glucose tolerance 糖尿病或葡萄糖耐量異常 (g) Prolapsed intervertebral disc or degenerative spine conditions 椎間盤突出或脊椎退化性疾病 (h) Diseases or medical conditions requiring a medical device or prosthesis to be implanted within the body 需要植入醫療儀器或義肢的疾病或健康狀況 (i) Mental health conditions (such as depression, anxiety, schizophrenia, eating disorders, or bipolar disorders) 精神健康狀況(例如抑鬱、焦慮、精神分裂、飲食失調或躁狂抑鬱症) (j) Multiple sclerosis 多發性硬化症 (k) Congenital conditions (medical, physical or mental abnormalities that existed at the time of or before birth) 先天性疾病 (指於出生時或之前已存在的醫學、生理或精神上的異常)	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否
For proposed insured children aged 6 or below only 適用於六歲或以下之準受保兒童					
8. Was the insured child born before 37 <sup>th</sup> week of pregnancy? 受保兒童是否於懷孕第37週前出生?	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否	<input type="checkbox"/> Yes是 <input type="checkbox"/> No否

**Health Questionnaire - Section B 健康問卷 - 乙部**

If you answer Yes to any of the questions in Section A above, please provide additional information as applicable below.  
如果你就以上甲部任何一項問題之答案為「是」者, 請在以下適用的問題提供更多資料。

Name of applicant / proposed Member 申請人 / 準會員姓名	Question No. 題號 _____ Medical condition 病症	Question No. 題號 _____ Medical condition 病症	Question No. 題號 _____ Medical condition 病症
1. Disease / medical condition / sign and symptom 疾病 / 健康狀況 / 病徵及症狀			
2. Date of first occurrence of sign and symptom 首次出現病徵及症狀的日期			
3a. Treatment / investigations / tests / scans that have been performed 已進行的治療 / 檢查 / 測試 / 掃描			
3b. Date of such treatment / investigation / tests / scan 有關治療 / 檢查 / 測試 / 掃描日期			
4. Present condition (such as whether fully recovered, follow up action / medication / next follow up date) 現況 (例如是否已完全康復、有否跟進 / 服用跟進藥物 / 下次覆診日期)			
5. Date of last follow-up medical consultation / treatment 最後覆診 / 治療日期			

(P.T.O. 請轉下一頁)

**Health Declaration and Questionnaire (Cont.) 健康聲明及問卷 (續)**

Name of proposed Member 準會員姓名  _____	Question No. 題號 _____  Medical condition 病症	Question No. 題號 _____  Medical condition 病症	Question No. 題號 _____  Medical condition 病症
1. Disease / medical condition / sign and symptom 疾病 / 健康狀況 / 病徵及症狀			
2. Date of first occurrence of sign and symptom 首次出現病徵及症狀的日期			
3a. Treatment / investigations / tests / scans that have been performed 已進行的治療 / 檢查 / 測試 / 掃描			
3b. Date of such treatment / investigation / tests / scan 有關治療 / 檢查 / 測試 / 掃描日期			
4. Present condition (such as whether fully recovered, follow up action / medication / next follow up date) 現況 (例如是否已完全康復、有否跟進 / 服用跟進藥物 / 下次覆診日期)			
5. Date of last follow-up medical consultation / treatment 最後覆診 / 治療日期			

Name of proposed Member 準會員姓名  _____	Question No. 題號 _____  Medical condition 病症	Question No. 題號 _____  Medical condition 病症	Question No. 題號 _____  Medical condition 病症
1. Disease / medical condition / sign and symptom 疾病 / 健康狀況 / 病徵及症狀			
2. Date of first occurrence of sign and symptom 首次出現病徵及症狀的日期			
3a. Treatment / investigations / tests / scans that have been performed 已進行的治療 / 檢查 / 測試 / 掃描			
3b. Date of such treatment / investigation / tests / scan 有關治療 / 檢查 / 測試 / 掃描日期			
4. Present condition (such as whether fully recovered, follow up action / medication / next follow up date) 現況 (例如是否已完全康復、有否跟進 / 服用跟進藥物 / 下次覆診日期)			
5. Date of last follow-up medical consultation / treatment 最後覆診 / 治療日期			

## Health Declaration and Questionnaire (Cont.) 健康聲明及問卷 (續)

Name of proposed Member 準會員姓名	Question No. 題號 _____ Medical condition 病症	Question No. 題號 _____ Medical condition 病症	Question No. 題號 _____ Medical condition 病症
1. Disease / medical condition / sign and symptom 疾病 / 健康狀況 / 病徵及症狀			
2. Date of first occurrence of sign and symptom 首次出現病徵及症狀的日期			
3a. Treatment / investigations / tests / scans that have been performed 已進行的治療 / 檢查 / 測試 / 掃描			
3b. Date of such treatment / investigation / tests / scan 有關治療 / 檢查 / 測試 / 掃描日期			
4. Present condition (such as whether fully recovered, follow up action / medication / next follow up date) 現況 (例如是否已完全康復、有否跟進 / 服用跟進藥物 / 下次覆診日期)			
5. Date of last follow-up medical consultation / treatment 最後覆診 / 治療日期			

Name of proposed Member 準會員姓名	Question No. 題號 _____ Medical condition 病症	Question No. 題號 _____ Medical condition 病症	Question No. 題號 _____ Medical condition 病症
1. Disease / medical condition / sign and symptom 疾病 / 健康狀況 / 病徵及症狀			
2. Date of first occurrence of sign and symptom 首次出現病徵及症狀的日期			
3a. Treatment / investigations / tests / scans that have been performed 已進行的治療 / 檢查 / 測試 / 掃描			
3b. Date of such treatment / investigation / tests / scan 有關治療 / 檢查 / 測試 / 掃描日期			
4. Present condition (such as whether fully recovered, follow up action / medication / next follow up date) 現況 (例如是否已完全康復、有否跟進 / 服用跟進藥物 / 下次覆診日期)			
5. Date of last follow-up medical consultation / treatment 最後覆診 / 治療日期			

If you have any medical reports or reports of investigations, please enclose them and put a tick in the box.  
如果你有任何醫療報告或醫療檢查報告，請隨此表格同時附上，並請於空格加「✓」號。

With attachment  
另有附頁



## Personal Information Collection Statement 個人資料收集聲明

Bupa (Asia) Limited (the "Company")

Personal Information Collection Statement ("Statement") relating to the Personal Data (Privacy) Ordinance (the "Ordinance")

Please refer to Bupa's website <http://www.bupa.com.hk> for the glossary of terms used in this Statement.

In compliance with the Ordinance, the Company would like to inform you of the following:

- From time to time, it is necessary for you, or other members covered under your policy (each a "Member"), to supply the Company with certain personal information (including where relevant, credit information and claims history) relating to you, or the Member, when you apply for insurance or financial products and services from the Company, or when you apply to make changes to your policy, or when you renew a policy.
- Failure to supply personal information requested by the Company may result in the Company being unable to process your Application and/or provide products, services and other related services to you, or the Member.**
- During the course of your relationship with the Company, further personal information relating to you, or the Member, may also be collected in the ordinary course of our business, for example, when you lodge insurance claims with the Company in relation to yourself or the Member.
- The Company may collect, use or disclose personal information relating to you, or the Member, for the following purposes:**
  - processing, assessing and determining any Applications for insurance products and services;
  - offering and providing products and services to you, or the Member, and processing requests made by you, or the Member, from time to time, including but not limited to requests for addition, alteration, deletion, maintenance, management and operation of insurance benefits or insured Members;
  - any purposes in connection with any claims made by or against or otherwise involving you, or the Member, in respect of any products and/or services provided by the Company including, without limitation, making, defending, analysing, investigating, detecting and preventing fraud (whether or not relating to the policy issued in respect of any application or claim) processing, assessing, determining, settling or responding to such claims;
  - performing any functions and activities related to the products and/or services provided by the Company including, without limitation, audit, reporting, market research, general servicing, maintenance of online and other services, identity verification, data matching, research and statistical analysis, and reinsurance arrangements;
  - provision and design of products and services of the Company;
  - exercising the Company's rights in connection with provision of insurance products and services to you, or the Member, from time to time, for example, to determine any amount of indebtedness from you, and collecting and recovering owing from you or any person who has provided any security or undertaking for your liabilities;
  - communication with you or the Member (or with you on behalf of the Member) in relation to any of the purposes set out in this Statement;
  - enabling an actual or proposed assignee, transferee, participant or sub-participant of all or a substantial part of the Company's rights or business to evaluate the transaction intended to be the subject of the assignment, transfer, participation or sub-participation; and
  - making disclosure to satisfy the requirements of any laws, rules and regulations, codes of practice, guidance notes or guidelines binding on the Company.
- Personal information collected or held by the Company relating to you, or the Member, will be kept confidential but the Company may transfer such personal information inside or outside the Hong Kong Special Administrative Region, for the purposes specified in paragraph (4) and (6) to the following classes of transferees:**
  - the Company's group companies ("Group Company");
  - any insurance adjusters, agents and brokers;
  - any re-insurance companies authorised by the Company;
  - employers (for members of corporate policy only);
  - healthcare professionals and hospitals;
  - any agent, contractor or third party service providers who provide administrative, telecommunications, computer, payment, data processing or storage, printing, research or other services to the Company in connection with the operation of business, (including without limitation insurers; banks; lawyers; accountants; claims investigators; fraud prevention organisations; other insurance companies (whether directly or through fraud prevention organisations or other persons named in this paragraph); organisations that consolidate claims and underwriting information for the insurance industry; the police and databases or registers (and their operators) used by the insurance industry to analyse and check information provided against existing information; debt collection agencies; data processing companies; research agencies and professional advisors);
  - any actual or proposed assignee, transferee, participant or sub-participant of all or a substantial part of the Company's rights or business; and
  - any person to whom the Company is under an obligation to make disclosure under the requirements of any law, rules, regulations, codes of practice or guidelines binding on the Company including, without limitation, any applicable regulators, governmental bodies, industry recognised bodies, credit reference agencies, the Courts, and where otherwise required by law.
- Only with your consent or with your indication of no objection, the Company may use your personal information collected from time to time, including name, contact details, gender, health and family status, to provide you with marketing communications (including by email, SMS or instant messenger) relating to the following products and services:
  - Insurance, medical, healthcare, wellness, personal development, beauty, lifestyle, entertainment, financial, and related services and products;
  - rewards, benefits, discounts, member activities, loyalty or privileges programmes and related services and products; and
  - donations and contributions for charitable and/or non-profit making purposes.The Company will not disclose personal information relating to you, to third parties for them to use for their own direct marketing purposes without your consent. For the avoidance of doubt, whether or not you consent to receive marketing communications of the type described in this paragraph 6, the Company may still communicate with you regarding the administration, features and renewal of your insurance policy.
- Under and in accordance with the terms of the Ordinance, you have the following rights:**
  - to check whether the Company holds personal information relating to you or the Member and to access such personal information;
  - to require the Company to correct any personal information relating to you or the Member which is inaccurate;
  - to ascertain our policies and practices in relation to personal data and to be informed of the kind of personal data held by the Company, and
  - to request the Company to cease using your personal information for direct marketing purposes.Requests can be made in writing to the Company's Data Protection Officer at the following address:  
Data Protection Officer  
6/F, Tower 2, The Quayside, 77 Hoi Bun Road, Kwun Tong, Kowloon, Hong Kong
- In accordance with the terms of the Ordinance, the Company has the right to charge a reasonable fee for the processing of any personal information access or correction request.
- For any enquiries about this Statement, please do not hesitate to contact our Customer Care helpdesk at 2517 5333.
- Nothing in this Statement shall limit the rights of customers under the Ordinance.
- In case of discrepancies between the English and Chinese versions of this Statement, the English version shall prevail.

保柏(亞洲)有限公司(「本公司」)

有關個人資料(私隱)條例(「條例」)之個人資料收集聲明(「本聲明」)

請參閱保柏網站 <http://www.bupa.com.hk> 有關本聲明中使用的詞彙定義。

遵照條例,本公司特通知閣下以下事項:

- 在閣下或受保於閣下保單的其他會員(每位「會員」)向本公司申請保險或金融產品及服務,或當閣下更改保單或續保時,必須不時向本公司提供閣下或會員的個人資料(包括信用資料和以往申索紀錄,如適用)。
- 如閣下未能提供本公司所要求的個人資料,本公司可能無法處理閣下之申請及/或向閣下或會員提供保險產品、服務或其他相關服務。**
- 本公司亦可能會在日常業務運作的過程中向閣下或會員收集更多個人資料,例如當閣下為本人或代會員向本公司提出保險索償時。
- 本公司可能會收集、使用或披露閣下或會員的個人資料作下列用途:**
  - 處理、評估、決定任何保險產品及服務之申請;
  - 為閣下或會員提供保險產品及服務及處理閣下或會員不時提出的要求,包括但不限於要求增加、更改、刪除、維持及管理保障項目或受保會員;
  - 任何有關閣下或會員對本公司所提供之保險產品及服務提出之索償,包括但不限於賠償、辯護、分析、調查、偵測及防止欺詐行為(無論是否與就此申請而簽發之保單及相關的任何申請或索償)、處理、評估、決定、解決或回應該等索償;
  - 執行與本公司所提供的保險產品及/或服務相關的功能及活動,包括但不限於審計、報告、市場調查、一般服務和維持網上及其他服務、核實身份、資料配對、研究及統計分析及再保險之安排;
  - 提供及設計本公司的產品及服務;
  - 行使本公司向閣下或會員提供保險和服務時有關的權利,例如釐定閣下拖欠的任何款項的金額,及向閣下或任何已為閣下的債務提供任何擔保或承諾的人士,追收和收回拖欠的任何款項;
  - 就任何本聲明中所述的用途與閣下或會員(或與代表會員的閣下)聯絡;
  - 允許本公司全部或部份的權益或業務的實際或建議承讓人、受讓人、參與人或次參與人,就涉及的轉讓、出讓、參與或次參與的交易進行評估;及
  - 為遵守任何法例之要求,或根據監管或其他機關所發出對本公司具有約束力或要求其遵守的規則、規例、實務守則或指引,而作出披露。
- 有關閣下或會員被本公司收集或持有的個人資料將會保密,但本公司可能會向以下不論在香港特別行政區境內或境外之資料承讓人轉移該等個人資料作第(4)及第(6)段列出的用途:**
  - 本公司的集團公司(「集團公司」);
  - 任何由本公司授權的保險理算人、代理及經紀;
  - 任何由本公司授權的再保險公司;
  - 僱主(只適用於團體保單之會員);
  - 醫護專業人員及醫院;
  - 任何代理人、承包商、或向本公司提供行政、電訊、電腦、付款、資料處理或儲存、印刷、研究或其他向本公司提供服務的第三方服務供應商(包括但不限於保險公司、銀行、理財顧問、律師、會計師、理賠調查員、防欺詐組織、其他保險公司(無論是直接地,或是通過防欺詐組織或本段中指名的其他人士)、為保險業界整合申索及承保資料之組織、警察、供保險業界用作分析及核對所提供的資料與既有資料的資料庫及登記冊(及其運營者)、收數公司、資料處理公司、研究服務機構及專業顧問);
  - 本公司的任何全部或部份的權益或業務的實際或建議承讓人、受讓人、參與人或次參與人;及
  - 為遵守任何法例之要求,或根據監管或其他機關所發出對本公司具有約束力或要求其遵守的規則、規例、實務守則或指引,而作出披露,包括但不限於適用監管機構、政府機構、相關行業認可機構、信貸資料服務機構或法院,及在其他情況下,法律規定本公司必向其披露的人士或機構。
- 本公司只會在得到閣下同意或表示不反對的情況下,使用閣下的個人資料如姓名、聯絡方法、性別、健康及家庭狀況,向閣下提供有關以下產品和服務的市場推廣資訊(包括以電郵、手機短訊或即時通訊):
  - 保險、醫療、康復、健康、個人發展、美容、生活消閒、娛樂、財務及其相關的服務及產品;
  - 獎賞、權益、折扣、會員活動、會員忠誠或優惠計劃及其相關的服務及產品;及
  - 為慈善及/或非牟利用途的捐款及捐贈。本公司將不會在沒有閣下的同意及許可下將閣下的個人資料向第三方透露,用作他們的市場推廣用途。為避免有疑慮,不論閣下是否同意接收以上第六點所述的市場推廣資訊類別,本公司仍然可能就閣下保單相關的行政、保障及續保事宜與閣下聯絡。
- 根據有關條例中的條款,閣下有權:**
  - 查核本公司是否持有閣下或會員的個人資料及查閱該等個人資料;
  - 要求本公司改正任何有關閣下或會員的不準確的個人資料;
  - 查明本公司對於資料的政策及處理方法和獲告知本公司持有的個人資料種類;及
  - 要求本公司停止將閣下的個人資料作直接市場推廣用途。有關要求請致函本公司保障資料主任,地址如下:  
香港九龍觀塘海濱道77號海濱匯第2座6樓  
保柏(亞洲)有限公司  
保障資料主任
- 根據有關條例之條款,本公司有權就任何處理個人資料查閱或更改的要求收取合理費用。
- 如閣下對本聲明有任何查詢,請隨時致電本公司的客戶服務專線 2517 5333。
- 本聲明不會限制客戶在條例下所享有之權利。
- 中英文本如有歧義,概以英文為準。

# Bupa Together Health Insurance Scheme Credit Card Authorisation Form

## 保柏互通保額醫療保障計劃信用卡付款授權書



Subscriber's Name 投保人姓名

Surname 姓

姓

Given Name 名

名

If credit card payment is chosen as the payment method, please complete this form, sign where marked "X" and return this form to Bupa by mail or by fax. If you have faxed this form to Bupa, please do not return it to us by mail again.  
若選擇以信用卡付款，請填妥此表格及簽署於「X」位置，並交回保柏。若你已傳真此表格給我們，請無須寄回此表格。

Visa

MasterCard

Cardholder's Name 持卡人姓名

HKID Card No. 香港身份證號碼

Credit Card Account No. 信用卡戶口號碼

Credit Card

Expiry Date

信用卡到期日

MM月

YY年

I acknowledge that the Contract shall be renewed automatically on a yearly basis unless it is not renewed by giving notice to Bupa or according to the terms of the Contract. I hereby authorise and direct Bupa (Asia) Limited to automatically debit the subscription and levy due from my credit card account on an annual / monthly basis until further notice.  
本人明白除非收到本人給予保柏的通知不再續保或因根據合約條款規定，否則合約將會每年自動續保。本人茲授權保柏(亞洲)有限公司自動從本人的信用卡戶口每年 / 每月支付應繳保費及保費徵費金額，直至另行通知。

If the Cardholder is not the applicant or proposed Member\*, please fill in the following information. 若信用卡持有人並非申請人或準會員\*，請填寫以下資料。

Relationship with the applicant or proposed Member\* 與申請人或準會員\*關係  
(Applicable to spouse, parents or children only 只適用於配偶、父母或子女)

I hereby confirm to pay the subscription and levy due of Bupa Health Insurance Scheme for the applicant or proposed Member\* as listed in this form.  
本人同意及承擔列於此表格上的申請人或準會員\*之全數應繳之保柏醫療保障計劃保費及保費徵費金額。

Cardholder's Signature 持卡人簽署

Contact Phone No. 聯絡電話號碼

Date 日期

X

DD日

MM月

YYYY年

**For Bupa use only**  
保柏專用

Bupa Together Membership No.  
「保柏互通保額」會員編號：

Date  
日期

DD日

MM月

YYYY年

Authorised Code\*  
授權代碼

\* Please delete if inappropriate 請刪除不適用者

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# Bupa Together Health Insurance Scheme Direct Debit Authorisation Form

## 保柏互通保額醫療保障計劃直接付款授權書



Subscriber's Name 投保人姓名  
Surname 姓  
Given Name 名

If autopay is chosen as the payment method, please complete this form, sign where marked "X" and return the original copy to Bupa with a cheque for the subscription and levy amount. 若選擇以自動轉賬付款，請填妥此表格及簽署於「X」位置，並連同此表格正本及繳付保費及保費徵費金額的支票交回保柏。

I acknowledge that the Contract shall be renewed automatically on a yearly basis unless it is not renewed by giving notice to Bupa or according to the terms of the Contract. I hereby authorise and direct Bupa (Asia) Limited to automatically debit the subscription and levy due from my account on an annual / monthly basis until further notice. 本人明白除非收到本人給予保柏的通知不再續保或因根據合約條款規定，否則合約將會每年自動續保。本人茲授權保柏（亞洲）有限公司自動從本人的戶口每年 / 每月支付應繳保費及保費徵費金額，直至另行通知。

Name of party to be credited (The beneficiary) 收款之一方 (受益人)	Bank No. 銀行編號	Branch No. 分行編號	Account No. 收款戶口號碼
<b>BUPA (ASIA) LIMITED</b>	<b>0 2 4</b>	<b>7 8 7</b>	<b>6 2 1 7 8 8 0 0 1</b>

I/We hereby authorise my/our above-named bank (the "Bank") to effect transfer from my/our above-mentioned account to the above-named Beneficiary in accordance with such instructions as the Bank may receive from the Beneficiary from time to time, provided always that the amount of any one such transfer shall not exceed the limit indicated above (if applicable).

本人(等)現授權上述之銀行(「該銀行」)，根據收款人不時給予該銀行之指示，自本人(等)上述戶口轉賬予收款人。但每次轉賬金額不得超過以上指定之限額(如適用)。

I/We agree that the Bank shall not be obliged to ascertain whether or not notice of any such transfer has been given to me/us.

本人(等)同意該銀行毋須證實該等轉賬是否已通知本人(等)。

I/We jointly and severally accept full responsibility for any overdraft (or increase in existing overdraft) on my/our above-mentioned account which may arise as a result of any such transfer(s).

如因該等轉賬而令本人(等)之上述戶口出現透支(或令現時之透支增加)，本人(等)會共同及各別承擔全部責任。

I/We confirm that my/our signature(s) on this authorisation is/are the same as filed with the Bank for the operation of my/our above-mentioned account to be debited for the transfer.

本人(等)確證在本授權書內之簽名，與本人(等)上述戶口於該銀行簽署紀錄完全相同。

I/We agree that should there be insufficient funds in my/our above-mentioned account to meet any transfer hereby authorised, the Bank shall be entitled, at its discretion, not to effect such transfer in which event the Bank may make the usual service charge to be paid by me/us.

本人(等)同意如上述戶口並無足夠款項支付有關轉賬，該銀行有權不予辦理且可收取有關之手續費用，該等費用一概由本人(等)支付。

I/We agree that any notice of cancellation or variation of this authorisation which I/we may give to the Bank shall be given at least two working days prior to the date on which such cancellation or variation is to take effect.

本人(等)同意取銷或更改本授權書之任何通知，須於取銷或更改生效日最少兩個工作日之前交予該銀行。

This authorisation shall have effect until further notice or until the above given expiry date (whichever first occurs).

本授權書將繼續生效直至另行通知為止或直至上列到期日為止(以兩者中最早之日期為準)。

My / Our Bank and Branch Name 本人 / 吾等之銀行及分行名稱	Bank No. 銀行編號	My / Our Account No. 本人 / 吾等之戶口號碼
--	------------------	--------------------------------------

My / Our name as recorded on Statement / Passbook 本人 / 吾等在結單 / 存摺上之姓名

HKID Card No. / Passport No. 香港身份證號碼 / 護照號碼	My / Our signature(s) 本人 / 吾等之簽署 X	Date of signing 簽署日期 DD 日 MM 月 YYYY 年
--	---------------------------------------	--

My / Our address as recorded on Statement / Passbook 本人 / 吾等在結單 / 存摺上之地址

Debtor's Name (If other than account holder) 債務人之姓名 (若非戶口持有人)	Membership No. (Debtor's Reference) 會員編號 (債務人備註)
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If the account holder is not the applicant or proposed Member\*, please fill in the following information. 若戶口持有人並非申請人或準會員\*，請填寫以下資料。  
Relationship with the applicant or proposed Member\* 與申請人或準會員\*關係  
(Applicable to spouse, parents or children only 只適用於配偶、父母或子女)

For bank use only 銀行專用	Signature Verified 核實簽署
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Notes: 1. The box marked "Membership No." is to be completed by Bupa.  
2. The signature on this authorisation form must be the same as the signature of your Bank Account.  
\* Please delete if inappropriate

附註: 1. 會員編號一欄由保柏填寫。  
2. 在此授權書內之簽署模式必須與閣下之銀行戶口內之簽署相符。  
\* 請刪除不適用者

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### Schedule of Benefits 保障金額表

1 January 2023 Edition 2023年1月1日版本

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

A Hospital and Surgical Benefit <sup>①</sup> 住院及手術保障 <sup>①</sup>	Full Cover Benefit <sup>②</sup> 全數賠償保障 <sup>②</sup>	Standard Benefit 標準保障
Room level 住房等級	Ward <sup>③</sup> 大房 <sup>③</sup>	Ward <sup>③</sup> 大房 <sup>③</sup>
Bupa HealthCare Appointed Hospitals <sup>④</sup> 保柏康健特選醫院 <sup>④</sup>	Canossa Hospital / CUHK Medical Centre / Gleneagles Hong Kong Hospital / HK Adventist Hospital - Stubbs Road / HK Adventist Hospital - Tsuen Wan / HK Baptist Hospital / HK Sanatorium & Hospital / St Paul's Hospital / St Teresa's Hospital / Union Hospital 嘉諾撒醫院 / 香港中文大學醫院 / 港怡醫院 / 香港安醫院 - 司徒拔道 / 香港安醫院 - 荃灣 / 香港浸信會醫院 / 養和醫院 / 聖保祿醫院 / 聖德肋撒醫院 / 仁安醫院	N/A 不適用
No. of Bupa HealthCare Appointed Specialists 保柏康健特選專科醫生數目	Around 約 600	N/A 不適用
1 Room and Board (Maximum 270 days each Contract Year) 住房及膳食費 (每合約年度最多 270 日)	Full cover 全數賠償	每日 1,070 each day
2 Miscellaneous Hospital Services (Each Contract Year) 住院雜費 (每合約年度計)		21,600
3 Intensive Care (Supplement to Room and Board)(Each Contract Year) 深切治療 (住房及膳食費之補足) (每合約年度計)		25,100
4 Private Nursing (Maximum 120 days each Contract Year) 私家看護費 (每合約年度最多 120 日) ◦ Subject to written referral <sup>⑤</sup> from the attending Registered Medical Practitioner ◦ 須獲主診註冊西醫書面轉介 <sup>⑤</sup>		每日 480 each day
5 Surgeon and Attendance Fees (For surgical case only)(Each operation) 外科醫生費及巡房費 (只適用於外科手術) (每次手術計) ◦ Complex 複雜 ◦ Major 大型 ◦ Intermediate 中型 ◦ Minor 小型		59,500 34,100 13,750 6,640
6 Anaesthetist's Fees (Each operation) 麻醉科醫生費 (每次手術計) ◦ Complex 複雜 ◦ Major 大型 ◦ Intermediate 中型 ◦ Minor 小型		19,320 11,000 4,550 2,590
7 Operating Theatre Fees (Each operation) 手術室費用 (每次手術計) ◦ Complex 複雜 ◦ Major 大型 ◦ Intermediate 中型 ◦ Minor 小型		19,320 11,000 4,550 2,590
8 In-patient Physician's Fees (For non-surgical case only) (Maximum 270 days each Contract Year) 住院醫生巡房費 (只適用於非手術治療) (每合約年度最多 270 日)		每日 840 each day
9 In-patient Specialist's Fees (Each Contract Year) 住院專科醫生費 (每合約年度計) ◦ Subject to written referral <sup>⑤</sup> from the attending Registered Medical Practitioner <sup>⑥</sup> ◦ 須獲主診註冊西醫書面轉介 <sup>⑤</sup>		3,080
10 Companion Bed (Maximum 270 days each Contract Year) 住院加床費 (每合約年度最多 270 日)		每日 530 each day
11 Cancer Treatment and Kidney Dialysis (Each Contract Year) 癌症治療及洗腎 (每合約年度計) ◦ Exclusively paid for chemotherapy, radiotherapy, targeted therapy, immunotherapy, hormonal therapy, cyberknife or gamma knife and other related miscellaneous charges for cancer treatment or kidney dialysis during Hospital Confinement or in day-case unit of a Hospital or clinic upon recommendation by the attending Registered Medical Practitioner ◦ 單獨賠償經主診註冊西醫建議下於住院期間或醫院日症房或診所進行之化療、放射性治療、標靶治療、免疫治療、荷爾蒙治療、使用數碼導航刀或伽瑪刀及與之相關的雜費以治療癌症或洗腎的費用	100,000	

Schedule of Benefits 保障金額表

1 January 2023 Edition 2023年1月1日版本

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

A Hospital and Surgical Benefit <sup>①</sup> 住院及手術保障 <sup>①</sup>	Full Cover Benefit <sup>②</sup> 全數賠償保障 <sup>②</sup>	Standard Benefit 標準保障	
<b>Day Case Procedure Benefits<sup>②</sup> 日間手術保障<sup>②</sup></b>			
<ul style="list-style-type: none"> <li>Items A12 - A13 cover expenses incurred for Clinical Operations or Day Case at a clinic or day-case unit of a Hospital performed by a Registered Medical Practitioner in Hong Kong, provided that pre-authorisation has been obtained. Supplementary Major Medical Benefit (if any) will not be applicable.</li> <li>Exclusively paid for eligible expenses incurred by the procedures below performed during Hospital Confinement with an overnight stay without pre-authorisation up to the Maximum Limit per Member of Standard Benefit only. Supplementary Major Medical Benefit (if any) will not be applicable. If pre-authorisation is approved for Hospital Confinement with an overnight stay, eligible expenses shall be payable under benefit items A1 - A11 of Full Cover Benefit for Confinement at Bupa HealthCare Appointed Hospitals with a Bupa HealthCare Appointed Specialist, or Standard Benefit for Confinement at your choice of doctor and Hospital, and Supplementary Major Medical Benefit (if applicable).</li> <li>A12至A13項將在已獲取初步保障審核的情況下，支付於香港由註冊西醫於診所或醫院日症房進行診所手術或日症的費用。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招致的合資格費用，以標準保障之每位會員最高賠償額為限，附加醫療保障(如有)亦並不適用。如需要過夜的住院已獲取初步保障審核，合資格費用將在全數賠償保障(如入住保柏康健特選醫院並由保柏康健特選專科醫生進行程序)或標準保障(如選擇其他醫生及醫院)下A1 - A11項及附加醫療保障(如適用)下賠償。</li> </ul>			
12 Day Case Endoscopy Procedure (Each operation) 日間內窺鏡程序 (每次手術計)	Full cover 全數賠償	11,820	
13 Day Case Viral Warts and Skin Lesions Procedure <sup>③</sup> (Each operation) 日間病毒性疣及皮損程序 <sup>③</sup> (每次手術計)		8,000	
14 Pre-admission and Post-hospitalisation Out-patient Care (Each Contract Year) 入院前及出院後之門診護理 (每合約年度計) <ul style="list-style-type: none"> <li>Including two pre-admission visits and all related post-hospitalisation follow-up visits on an out-patient basis within six weeks after discharge from Hospital</li> <li>包括2次入院前及出院後6星期內所有與住院治療有關之跟進療程門診費用</li> </ul>	2,650		
15 Emergency Out-patient Benefit for Accidents (Each Contract Year) 緊急意外門診保障 (每合約年度計)	7,600		
16 Psychiatric Treatment (Each Contract Year) 精神科治療 (每合約年度計)	N/A 不適用	30,000	
<b>Maximum Annual Benefit Pool (Per Contract)<sup>④</sup> 每年最高通用賠償額 (每合約計)<sup>④</sup></b> <ul style="list-style-type: none"> <li>One Member 1名會員 250,000</li> <li>Two Members 2名會員 500,000</li> <li>Three Members 3名會員 750,000</li> <li>Four Members or above 4名會員或以上 1,000,000</li> </ul>			
<b>Individual Overall Annual Limit</b> 個人每年最高賠償額	Below attained age of 65 on the Contract Effective Date 於合約生效日未滿65歲之會員	Subject to the available Maximum Annual Benefit Pool 以可享用的每年最高通用賠償額為限	
	Attained age of 65 or above on the Contract Effective Date 於合約生效日年滿65歲或以上之會員	Subject to the available Maximum Annual Benefit Pool or HK\$500,000 whichever is lower 以可享用的每年最高通用賠償額或港幣500,000元為限，以較低者為準	

**B Free Double Benefit for Serious Illnesses**  
免費嚴重疾病雙倍保障

- If the Member receives treatment relating to the following Serious Illnesses, the Maximum Limit of items A1 to A10 under Standard Benefit of Hospital and Surgical Benefit will be doubled<sup>⑤</sup>, subject to the Maximum Annual Benefit Pool and Individual Overall Annual Limit.  
如會員接受與下列有關病症的治療，其「住院及手術保障」內的「標準保障」A1 - A10保障項目之最高賠償額將雙倍提升<sup>⑤</sup>，以「每年最高通用賠償額」及「個人每年最高賠償額」為限。
  - Cancer 癌症
  - Coronary artery disease requiring angioplasty or bypass graft surgery 冠心病(須接受俗稱「通波仔」的冠狀血管成形術或搭橋手術)
  - End-stage liver disease 末期肝病
  - Kidney failure 腎衰竭
  - Tuberculosis 結核病

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#### C Free Bupa Wellness Programme<sup>®</sup> 免費保柏保健計劃<sup>®</sup>

Every Member can enjoy one of the following complimentary wellness services provided by the designated wellness centres once every year starting from the second Contract Year. 每位會員可於指定之保健中心享用以下任何一項免費保健服務，由第二個合約年度開始，每年一次。

##### Healthy body 身體健康

<b>Optical Check 眼科檢查</b>	<ul style="list-style-type: none"> <li>Comprehensive eye examination plus contact lens care (For age 3 or above) / diabetes eye exam (For age 18 or above) / glaucoma package (For age 18 or above)</li> <li>全面眼科視光檢查及隱形眼鏡護理 (適合3歲或以上人士) / 糖尿眼檢查 (適合18歲或以上人士) / 青光眼檢查 (適合18歲或以上人士)</li> </ul>
<b>Hepatitis Screening 肝炎測試</b>	<ul style="list-style-type: none"> <li>Hepatitis A virus antibody - total / Hepatitis B surface antigen and surface antibody (For any age)</li> <li>總甲型肝炎抗體測試 / 乙型肝炎表面抗原及抗體測試 (適合所有人士)</li> </ul>
<b>Hepatitis A or B Vaccine 甲型或乙型肝炎預防疫苗</b>	<ul style="list-style-type: none"> <li>Two doses of Hepatitis A vaccine (For age 19 or above) / three doses of Hepatitis B vaccine (For age 16 or above)</li> <li>甲型肝炎預防疫苗兩針 (適合19歲或以上人士) / 乙型肝炎預防疫苗三針 (適合16歲或以上人士)</li> </ul>
<b>General Health Assessment (For age 18 or above) 普通全身檢查 (適合18歲或以上人士)</b>	<ul style="list-style-type: none"> <li>Full physical examination 體格檢查</li> <li>Blood pressure check 血壓檢查</li> <li>Chest X-ray 胸肺X光檢查</li> <li>CBP 血全圖</li> <li>Creatinine 肌酸酐</li> <li>Glucose 葡萄糖</li> <li>ALT/SGPT 谷丙轉氨酵素</li> <li>Uric acid 尿酸</li> <li>Urine routine 尿常規檢查</li> <li>Electrocardiogram 心電圖</li> <li>Total cholesterol 總膽固醇</li> <li>Triglycerides 三酸甘油酯</li> </ul>
<b>Well Man Health Assessment (For age 18 or above) 男性專科檢查 (適合18歲或以上人士)</b>	<ul style="list-style-type: none"> <li>Full physical examination 體格檢查</li> <li>Blood pressure check 血壓檢查</li> <li>Lipid profile 血脂分析 (Total cholesterol, LDL cholesterol, HDL cholesterol, triglycerides 總膽固醇、低密度膽固醇、高密度膽固醇、三酸甘油酯)</li> <li>Total PSA test 總前列腺特異抗原測試 (Prostate cancer screen 前列腺癌測試)</li> </ul>
<b>Well Woman Health Assessment (For age 18 or above) 女性專科檢查 (適合18歲或以上人士)</b>	<ul style="list-style-type: none"> <li>Full physical examination 體格檢查</li> <li>Blood pressure check 血壓檢查</li> <li>Lipid profile 血脂分析 (Total cholesterol, LDL cholesterol, HDL cholesterol, triglycerides 總膽固醇、低密度膽固醇、高密度膽固醇、三酸甘油酯)</li> <li>Pap smear test 柏氏抹片檢查 (Cervical cancer screen 子宮頸癌測試)</li> </ul>

##### Healthy family 家庭健康

<b>Pre-marital / Pre-pregnancy Check-up (For age 18 or above) 婚前 / 懷孕前檢查 (適合18歲或以上人士)</b>	<ul style="list-style-type: none"> <li>Body Mass Index, blood pressure and pulse rate 體重指標、血壓及脈搏</li> <li>Urine glucose and protein 尿糖及尿蛋白</li> <li>Complete blood picture 血全像</li> <li>Blood group and Rhesus factor 血型及恆河猴 Rh(D) 因子</li> <li>VDRL test for syphilis 梅毒血清測試</li> <li>Hepatitis B antigen and antibody tests 乙型肝炎表面抗原及抗體</li> <li>Rubella antibody test (For female) 德國麻疹抗體 (為女性而設)</li> <li>Seminal analysis (For male) 精液常規檢驗 (為男性而設)</li> <li>Examination of thyroid, breast and abdomen 甲狀腺、胸部及腹部檢查</li> <li>Visual inspection of external genitalia 目視檢查外生殖器</li> <li>Contraceptive advice 避孕建議</li> <li>Explanation on laboratory reports 解釋化驗報告</li> </ul>
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##### Healthy lifestyle 健康生活

<b>Fitness Management Programme (For age 18 - 65 years) 體適能管理計劃 (適合18至65歲人士)</b>	<p>Being overweight or having excessive body fat can lead to illnesses such as high blood pressure, diabetes and heart disease. To help you maintain a healthy level of weight and fitness, this programme offers health advices from medical professionals such as personalised tips on healthy eating and physical fitness.</p> <p>If you have any chronic illnesses, please consult your physician first.</p> <p>過重或身體脂肪過多可引致各種疾病如高血壓、糖尿病及心臟病等。此計劃可助你保持健康的體重及體能，醫療專業人士將會為你提供健康建議，例如個人化的健康飲食和制定體適能目標。</p> <p>患有慢性疾病的人士，請先向你的醫生查詢。</p>
<b>Healthy Eating Programme (For age 6 - 17 years) 健康飲食計劃 (適合6至17歲人士)</b>	<p>Overeating or poor eating habits may cause obesity in children and teenagers. This programme offers personalised dietary recommendations by a registered dietitian to give you a better understanding of how to help your child achieve a healthy weight.</p> <p>If you have any chronic illnesses, please consult your physician first.</p> <p>飲食過量或不良飲食習慣容易令兒童及青少年患上肥胖症。此計劃透過註冊營養師提供的飲食建議，助你了解如何幫子女保持健康體重。</p> <p>患有慢性疾病的人士，請先向你的醫生查詢。</p>

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

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. 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。

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**E Health Coaching Services**  
健康支援服務

Staffed by a team of qualified nurses, health management professionals and doctors, our Health Coaching Services offer a variety of expert healthcare support to minimise your worries.  
由合資格護士、健康管理團隊及醫生為你提供一系列專業的健康支援，讓你安心無憂。

**24-hour Healthline 24小時健康專線**

- A team of qualified nurses and health management professionals will provide guidance on your health-related questions over the phone, with the support of doctors.
- 我們的合資格護士及健康管理團隊可透過電話為你解答健康相關問題，背後更有醫生作為顧問。

✓

**Care Manager 健康顧問**

- Our Care Manager can help you follow up on claims and assist you throughout treatment and recovery, from explaining your treatment plan and overseeing costs to arranging follow-up consultations. If you're admitted to a local private hospital, our Care Manager will make a courtesy call or visit, with your consent.
- 我們的健康顧問可助你跟進索償、全程協助你的治療至康復過程，包括解釋你的治療計劃和醫療開支以至安排跟進治療。當你入住本港私家醫院時可前往探望你或致電慰問你。

✓  
(Care Manager will support you in the event of cancer or heart disease 健康顧問將於會員患上癌症或心臟病時提供協助)

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.  
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。

- Doctors will be available during scheduled office hours to support the nurses in answering the enquiries. Office hours: Mon - Fri, from 9am to 6pm (Hong Kong time), except public holidays.
- The use of Health Coaching Services is free of charge. If the services suggested aren't covered under your contract, you'll be responsible for the fees incurred.
- 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。
- 使用健康支援服務並不需要額外費用。若我們建議的服務不在你的合約之賠償範圍內，你便須支付有關費用。

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

**F Supplementary Major Medical Benefit (Optional)<sup>①</sup>**  
附加醫療保障 (自選保障)<sup>①</sup>

Ward<sup>②</sup> 大房<sup>②</sup>

Reimbursement percentage 賠償率

80%

Maximum Limit (Each Contract Year) 最高賠償額 (每合約年度計)

147,300

Lifetime Limit (Only applicable to Members who attain the age of 65 or above)  
終生最高賠償額 (只適用於年齡已屆65歲或以上的會員)

246,200

- This Benefit is payable for any eligible expenses in excess of the benefits payable under the following, which is subject to the Maximum Limit (or Lifetime Limit, if applicable) above:
  - Any item of A1 - A11 under Standard Benefit of Hospital and Surgical Benefit (either exceeding the maximum limit or maximum number of days)
  - Individual Overall Annual Limit of Hospital and Surgical Benefit
  - Free Double Benefit for Serious Illnesses
- Your Bupa HealthCare (BHC) Card can be used to settle payment for Hospital Confinement at designated private Hospitals in Hong Kong subject to a credit limit approved by Bupa. For the list of designated private Hospitals in Hong Kong, please visit Bupa's website at [www.bupa.com.hk](http://www.bupa.com.hk) > Medical Insurance > Bupa Together. This list is subject to change from time to time.
- In case of overseas hospitalisation, only medical Emergency cases will be covered.
- This Benefit shall not be payable for Hospital Confinement in class of suite/VIP/deluxe room of a Hospital.
- Adjustment factors will be applied if you are confined in a higher room level than your chosen level:
  - From Ward to Semi-private Room : 50%
  - From Ward to Private Room : 25%
- 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.
- 此保障支付任何超出以下可獲賠償的合資格費用，以上述最高賠償額 (或終生最高賠償額，如適用) 為限：
  - 住院及手術保障內的標準保障下A1 - A11任何一項 (不論超出最高賠償額或最多日數)
  - 住院及手術保障的個人每年最高賠償額
  - 免費嚴重疾病雙倍保障
- 你可使用保柏康健卡支付指定的香港私家醫院之住院費用，以保柏批核之信用額為限。你可瀏覽保柏網頁 [www.bupa.com.hk](http://www.bupa.com.hk) > 個人醫療保險 > 互通保額醫療保險，查看指定的香港私家醫院名單，此名單可能會不時更改。
- 如身處海外，只適用於因急症之住院治療。
- 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。
- 如你入住比原有保障級別更高的病房級別，保障額將作出如下調整：
  - 大房至半私家房：50%
  - 大房至私家房：25%
- 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下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。

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

G Clinical Benefit (Optional) 門診保障 (自選保障)		
1	<b>General Practitioner</b> (Consultation fee only) 普通科醫生 (只限診症費)	每次 245 each visit
2	<b>Specialist</b> (Consultation fee only) 專科醫生 (只限診症費) ◦ 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 ◦ 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	每次 495 each visit
3	<b>Home Consultation</b> (Consultation fee only) 家中應診 (只限診症費)	每次 490 each visit
4	<b>Physiotherapist</b> (Treatment fee only) 物理治療師 (只限診療費) ◦ Subject to written referral <sup>®</sup> from a Registered Medical Practitioner 須獲註冊西醫書面轉介 <sup>®</sup>	每次 445 each visit
5	<b>Chiropractor</b> (Treatment fee only) 脊醫 (只限診療費) ◦ Subject to written referral <sup>®</sup> from a Registered Medical Practitioner 須獲註冊西醫書面轉介 <sup>®</sup>	每次 445 each visit
6	<b>Chinese Herbalist</b> 中醫師 ◦ Consultation fee (Including basic Medically Necessary Chinese Medicines prescribed at the Registered Chinese Medicine Practitioner's clinic and obtained at a legitimate source on the same day of consultation) ◦ Payable for 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) ◦ Payable for acupuncture and tui na performed by a Registered Chinese Medicine Practitioner ◦ 診症費 (包括於診治當日由註冊中醫在診所處方並由合法來源取得的基本醫療必需中藥費用) ◦ 此保障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) 取得之醫療必需中藥費用 ◦ 此保障支付由註冊中醫進行的針灸治療及推拿	每次 250 each visit
7	<b>Chinese Bonesetter</b> 跌打醫師 ◦ Consultation fee (Including basic Medically Necessary Chinese Medicines prescribed at the Registered Chinese Medicine Practitioner's clinic and obtained at a legitimate source on the same day of consultation) ◦ Payable for 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) ◦ Payable for acupuncture and tui na performed by a Registered Chinese Medicine Practitioner ◦ 診症費 (包括於診治當日由註冊中醫在診所處方並由合法來源取得的基本醫療必需中藥費用) ◦ 此保障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) 取得之醫療必需中藥費用 ◦ 此保障支付由註冊中醫進行的針灸治療及推拿	每次 250 each visit
8	<b>Psychiatric-related Treatments</b> <sup>®</sup> 精神科相關治療 <sup>®</sup> ◦ Including consultation fee, basic Medically Necessary Western Medication, Chinese Medicines, acupuncture, diagnostic imaging and laboratory tests ◦ 包括診症費、基本醫療必需西藥、中藥、針灸治療、診斷影像及化驗	每次 470 each visit
9	<b>Psychological Counselling</b> 臨床心理輔導 ◦ Subject to written referral <sup>®</sup> from a Psychiatrist 須獲精神科醫生書面轉介 <sup>®</sup>	每次 470 each visit
10	<b>Prescribed Western Medication</b> (Each Contract Year) 醫生處方西藥 (每合約年度計) ◦ Medically Necessary Western Medication prescribed by a Registered Medical Practitioner and obtained at a legitimate source ◦ 經由註冊西醫處方並由合法來源取得之醫療必需西藥費用	2,380
11	<b>Diagnostic Imaging and Laboratory Tests</b> (Each Contract Year) 診斷影像及化驗 (每合約年度計) ◦ 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 ◦ 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>	2,125
Maximum number of visits per Contract Year for items G1 - G9 above in aggregate is 30 in total, with a sub-limit of 10 visits per Contract Year for items G6 - G7 and G8 - G9 respectively. Subject to a maximum of one visit per item per day. 每合約年度內有關上文G1至G9項之診治次數上限共為30次, 其中項目G6至G7及G8至G9之診治次數上限為每合約年度合共各10次。每一項目以每日最多一次為限。		
H Maternity Benefit (Optional) 產科保障 (自選保障)		Ward <sup>®</sup> 大房 <sup>®</sup>
<b>Normal Delivery</b> (Per pregnancy) 順產 (每次懷孕計)		20,160
<b>Caesarean Section</b> (Per pregnancy) 剖腹生產 (每次懷孕計)		30,230
<b>Miscarriage</b> (Per pregnancy) 流產 (每次懷孕計)		10,080
◦ The Maternity Benefit shall cover medical expenses incurred during pregnancy, including Hospital Confinement, consultation of a Registered Medical Practitioner and Prescribed Western Medication, diagnostic tests, prenatal check-up and postnatal check-up, as well as nursery care of 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 conception occurs after the commencement date of this benefit and no benefit shall be payable during the waiting period of the first 9 months. In the event of premature termination of pregnancy or premature birth (delivery that occurs between 20 and 37 weeks of gestation), this Benefit shall be payable without the application of the 9 months' waiting period provided that the conception of such pregnancy occurs after the commencement date of this Maternity Benefit. For the avoidance of doubt, if delivery is occurred after 37 weeks of gestation but within the 9 months' waiting period, this Maternity Benefit shall not be payable. ◦ All pregnancy or maternity related medical expenses shall be exclusively payable under this Maternity Benefit and no benefit shall be payable under the 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). ◦ 產科保障將支付因受孕引致之醫療費用, 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)。		

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I Dental Benefit (Optional) (per Contract Year) 牙科保障 (自選保障) (每合約年度計)	Network Dental Centre benefit 網絡牙科中心保障		Non-Network Dental Centre benefit 非網絡牙科中心保障	
	Plan 計劃 A	Plan 計劃 B	Plan 計劃 A	Plan 計劃 B
No. of network dental centres 網絡牙科中心數目	12		N/A 不適用	
Eligibility 適用範圍	<p>Only applicable to covered dental service items performed by a Registered Dentist (for all applicable items) or Registered Dental Hygienist (for item I1 only) at Network Dental Centres® within consultation hours. 只適用於在網絡牙科中心® 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 I1) 進行的合資格牙科服務。</p>		<p>Applicable to eligible dental services from a Registered Dentist (for all applicable items) or Registered Dental Hygienist (for item I1 only) which are not performed at Network Dental Centres. 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. 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 I1) 進行的合資格牙科服務。所有合資格費用將以列出的最高賠償額為限。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>	
Reimbursement percentage 賠償率	N/A 不適用		100%	100%
1 Scaling and polishing 洗牙	One visit in total per Contract Year 每合約年度共一次	Two visits in total per Contract Year 每合約年度共兩次	300	500
2 Routine oral examination 定期口腔檢查				
3 Intra-oral X-rays and medications 口腔 X 光及藥物	Full cover® 全數賠償®			
4 Fillings and extractions 補牙及脫牙	<p>Full cover® 全數賠償®</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.) (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。)</p>			
5 Periodontal (gum) treatment 牙周病治療	<p>Full cover® 全數賠償®</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.) (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>			
6 Emergency consultation and treatment 牙痛急症處理	<p>Full cover® 全數賠償®</p> <p>(Includes emergency pain relief of toothache (including dressing and medication), incision and drainage of abscesses only.) (只適用於緊急牙痛舒緩 (包括敷料及藥物)、膿瘡切割及排放。)</p>			

### Schedule of Benefits 保障金額表

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#### Notes

- 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.
- ② About Full Cover Benefit
  - Please follow the requirements below to enjoy Full Cover Benefit:
    - (i) You will need to choose a Bupa HealthCare Appointed Specialist and designated clinic for consultation. Always present your doctor's referral letter (except for dermatology, family medicine, gynaecology, ophthalmology, orthopaedics, otolaryngology, paediatric surgery, paediatrics and psychiatry) and your Bupa HealthCare (BHC) Card upon registration.
    - (ii) Pre-authorisation confirmation must be obtained from Bupa for the following situations:
      - Hospital Confinement or Day Case
      - Clinical Operation(s) (as required by Bupa's provider guidelines)
      - Specialist treatment for which the relevant specialty is not practised by any Bupa HealthCare Appointed Specialist.
    - (iii) If you have received treatment outside our office hours, please obtain authorisation from Bupa on the next working day.
    - (iv) Your treatment at any Bupa HealthCare Appointed Service Providers must be attended by the Bupa HealthCare Appointed Specialist.
    - (v) Please present your BHC Card to the Bupa HealthCare Appointed Hospital upon admission and use it to pay the medical expenses.
    - (vi) You must be confined at the restricted room level. Hospital Confinement to any class of room other than the ward level of a Bupa HealthCare Appointed Hospital shall be subject to the Maximum Limit of Standard Benefit.
  - If the above requirements are not followed, your claims, if eligible, will be paid under Standard Benefit.
  - Your BHC Card can be used to settle payment for Hospital Confinement or Clinical Operation(s) at the Bupa HealthCare Appointed Hospitals and day-case centres, as well as Specialists' clinics, subject to a credit limit approved by Bupa.
  - Please settle your out-patient expenses at the Bupa HealthCare Appointed Specialist's clinic, unless Hospital Confinement, Day Case or Clinical Operation is Medically Necessary and pre-authorisation, if required, is obtained during the same clinic visit.
- ③ About Room Level
  - For in-patient treatments at Gleneagles Hong Kong Hospital, please visit [www.bupa.com.hk/pdf/ghk.pdf](http://www.bupa.com.hk/pdf/ghk.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.
- ④ About Bupa HealthCare Appointed Hospitals
  - The list of Bupa HealthCare Appointed Hospitals is current at the date of printing and it is subject to change from time to time. For the current list, please visit Bupa's website for more details.
- ⑤ Referral letter
  - 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.
- ⑥ About In-patient Specialist's Fees Benefit
  - A referral letter is not required for services performed by pathologist, radiologist and Physiotherapist during Hospital Confinement.
- ⑦ About Day Case Procedure Benefits
  - Pre-authorisation must be obtained from Bupa prior to endoscopy and viral warts and skin lesions procedures as follows:
    - For procedures performed at a Bupa HealthCare Appointed Service Provider, the Bupa HealthCare Appointed Specialist must obtain pre-authorisation from Bupa as required by Bupa's provider guidelines; and
    - For procedures performed by your choice of doctor and service provider, pre-authorisation must be obtained directly by Members.
  - For procedures performed in Hospital, no pre-authorisation is required in any of the following situations:
    - Emergency Hospital Confinement and surgical procedures performed in Hospital;
    - Any treatment performed outside Hong Kong;
    - Hospital Confinement and surgical procedures performed at ward level in the public sector of government Hospitals;
    - When your endoscopy or warts and skin lesions procedure is performed along with other surgical procedures during the same Hospital Confinement; and/or
    - If you file a claim for your procedure with another insurer first and submit a second claim to Bupa.
  - For Clinical Operations or Day Case:
    - For procedures performed at Bupa HealthCare Appointed Service Providers by a Bupa HealthCare Appointed Specialist with approved pre-authorisation, you can enjoy full cover and cashless service with your BHC Card.
    - If pre-authorisation is not obtained from Bupa as stipulated, Members will not be entitled to any benefits and all relevant medical expenses will not be paid.
  - For endoscopy and viral warts and skin lesions procedures performed outside Hong Kong, eligible expenses shall be payable under benefit items A1 - A11 of Standard Benefit of Hospital and Surgical Benefit and Supplementary Major Medical Benefit (if applicable).
  - 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.
  - Please refer to the Membership Guide for more details about endoscopy and viral warts and skin lesions procedures.
- ⑧ If a Member receives more than one viral warts and skin lesions treatment at the same time on the same day, it will be counted as 1 operation. Bupa may ask for a medical report for review from the 4<sup>th</sup> viral warts and skin lesions treatment onwards, or for claims over HK\$20,000.
- ⑨ Maximum Annual Benefit Pool
  - Maximum Annual Benefit Pool means the maximum amount of Benefits which the Member(s) under the Contract is/are entitled to receive in aggregate during a Contract Year as shown on the Membership Certificate pursuant to Hospital and Surgical Benefit and Free Double Benefit for Serious Illnesses.
- ⑩ Free Double Benefit for Serious Illnesses
  - Please refer to the Contract for the definitions of the designated Serious Illnesses.
- ⑪ Free Bupa Wellness Programme
  - For details of check-up items, please refer to the redemption letter which will be sent to you after renewal confirmation.
- ⑫ About Supplementary Major Medical (SMM) Benefit
  - This Benefit is subject to the Maximum Limit per Contract Year or the remaining balance of Lifetime Limit (if applicable), whichever is lower. The SMM Benefit, which is paid from age 65 will be deducted from the Lifetime Limit and the remaining balance will become the Lifetime Limit of the next Contract Year. After the Lifetime Limit is exhausted, this Benefit shall automatically terminate.
- ⑬ 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 8 and no benefit shall be payable under other benefit items.
- ⑭ 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.
- ⑮ 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 for their consultation hours.
- ⑯ 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 or membership number 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 3-6 per Contract Year.

### Schedule of Benefits 保障金額表

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#### 附註

- 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。
- ② 有關「全數賠償保障」
  - 要享有「全數賠償保障」的賠償，請依循以下的規定：
    - (i) 你必須於保柏康健特選專科醫生及指定的診所求診，請於登記時出示你的醫生轉介信（皮膚科、家庭醫學科、婦科、眼科、骨科、耳鼻喉科、小兒外科、兒科及精神科除外）及「保柏康健卡」。
    - (ii) 在以下的情況，必須獲得保柏初步保障審核確認：
      - 住院或日症
      - 診所手術（按保柏供應商指引之要求）
      - 專科治療而該專科並不屬於保柏康健特選專科醫生可提供之專科。
    - (iii) 如你於保柏辦公時間外接受治療，請於下一個工作日向保柏補辦審核。
    - (iv) 於保柏康健特選服務供應商接受的治療，必須經由保柏康健特選專科醫生進行及提供。
    - (v) 請於入住保柏康健特選醫院時，向醫院出示「保柏康健卡」，並以此卡繳付醫療費用。
    - (vi) 你必須入住原有保障級別的病房。如你在住院時入住保柏康健特選醫院任何大房級別以外之任何等級的房間，賠償以「標準保障」之最高賠償額為限。
  - 如沒有依循以上規定，合資格的醫療費用將於「標準保障」下作出賠償。
  - 你可使用「保柏康健卡」支付保柏康健特選醫院及其日症中心，以及專科醫生收取之住院及診所手術費用，以保柏批核之信用額為限。
  - 請向保柏康健特選專科醫生之診所繳付你的門診費用，如住院、日症或診所手術為醫療必需及於該次診症同時申請初步保障審核則除外。
- ③ 有關住房等級
  - 入住怡和醫院接受治療前，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。
- ④ 有關保柏康健特選醫院
  - 此為於印刷日時最新之保柏康健特選醫院名單，此名單可能會不時更改。你可瀏覽保柏網頁以獲知最新名單。
- ⑤ 轉介信
  - 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。
- ⑥ 有關「住院專科醫生費保障」
  - 由病理學家、放射學家及物理治療師在住院期間所提供之服務，無須提交轉介信。
- ⑦ 有關日間手術保障
  - 在進行內窺鏡和病毒性疣及皮損程序之前，必須依循以下的規定獲得保柏的初步保障審核：
    - 如於保柏康健特選服務供應商進行程序，保柏康健特選專科醫生必須按保柏供應商指引之要求向保柏申請初步保障審核；及
    - 如由你所選的醫生及服務供應商進行程序，會員須直接向保柏申請初步保障審核。
  - 如程序於醫院進行，以下情況不需要申請初步保障審核：
    - 因危急情況之住院及進行住院手術；
    - 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；
    - 於同一住院期間與其他住院手術一同進行的內窺鏡或病毒性疣及皮損程序；及／或
    - 如你先向其他保險公司索償，再向保柏申請第二索償。
  - 如屬診所手術或日症：
    - 就已獲取初步保障審核的情況下由保柏康健特選專科醫生於保柏康健特選服務供應商進行的程序，你可使用「保柏康健卡」以享全數賠償及免找數服務。
    - 如未有根據上述規定獲得保柏的初步保障審核，會員將不會獲得任何保障及其所有相關的醫療費用之賠償。
  - 如於香港以外的地方進行內窺鏡和病毒性疣及皮損程序，合資格費用將在住院及手術保障之標準保障下 A1 - A11 項及附加醫療保障（如適用）下賠償。
  - 有關受日間手術保障所保障之內窺鏡和病毒性疣及皮損程序的完整列表，請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。
  - 請查閱會員指引以了解更多有關內窺鏡和病毒性疣及皮損程序的資料。
- 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。由第四次病毒性疣及皮損治療起或索償金額超過港幣 20,000 元，保柏可能會要求你提供醫療報告以供檢閱。
- ⑨ 每年最高通用賠償額
  - 「每年最高通用賠償額」即合約內所有會員每合約年度在「住院及手術保障」及「免費嚴重疾病雙倍保障」下可享有的每合約年度最高賠償總額，此賠償額載於會員證書上。
- ⑩ 免費嚴重疾病雙倍保障
  - 有關指定之嚴重疾病定義，請參閱合約。
- ⑪ 免費保柏保健計劃
  - 有關檢查項目詳情，請參考會籍確認後寄給你的換領信。
- ⑫ 有關「附加醫療保障」
  - 此保障的賠償以每合約年度「最高賠償額」或「終生最高賠償額」餘額（如適用）之較低者為上限。65 歲起支付的「附加醫療保障」將自「終生最高賠償額」中扣減，餘額將成為下一合約年度的「終生最高賠償額」。此保障將於「終生最高賠償額」耗盡後自動終止。
- ⑬ 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起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 8 的賠償，而不會獲得其他項目之賠償。
- ⑭ 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。
- 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、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。
- 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或保單號碼，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 3-6 不設上限。

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.  
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。

Please refer to the Contract for definitions of the capitalised terms in the Schedule of Benefits.  
請參考合約查閱保障金額表內大楷詞語之定義。



Bupa  
保柏

**Bupa Together**  
保柏互通保額

**Comprehensive care  
for every life stage**

**全面保障  
照顧人生每階段**

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

# Introduction to Bupa Together 保柏互通保額醫療保障 計劃簡介

No matter which stage of life you are in, Bupa Together adapts its cover to give you and your loved ones the best care as well as lifelong discounts. If you enrol with your family, each of you can share a combined annual benefit pool of up to HK\$1 million. What's more, all of you will enjoy free wellness services that are tailored to your needs, making sure that your health is truly well taken care of.

無論你在人生哪個階段，「保柏互通保額」計劃的彈性設計均能全面保障你和家人的健康，而且給你終生的保費折扣。如與家人投保，各自的賠償額可合併互相通用，每人可享高達港幣100萬的全年保障額。保障以外，更可享受免費的全方位保健服務，無論是身體健康、家庭健康或個人健康生活管理，均照顧周到。

Best deal ever –  
Lifetime subscription  
discount for everyone<sup>⑥</sup>.

每人都可享終生保費折扣，  
實在超值<sup>⑥</sup>。

## Overview of your cover 你的保障概要

### Cover at a glance 保障一覽表

Basic benefit 基本保障	Hospital and Surgical Benefit (Including Full Cover Benefit and Standard Benefit) 住院及手術保障 (包括全數賠償保障及標準保障)
Free benefits 免費保障	Free Double Benefit for Serious Illnesses 免費嚴重疾病雙倍保障 Free Bupa Wellness Programme 免費保柏保健計劃 Free Bupa Worldwide Assistance Programme 免費保柏國際援助計劃
Optional benefits 自選保障	Supplementary Major Medical Benefit 附加醫療保障 Clinical Benefit 門診保障 Maternity Benefit 產科保障 Dental Benefit 牙科保障
Medical card 醫療卡	Yes (For all members) 有 (適用於所有會員)
Benefit level 保障等級	Ward 大房
Period of cover 保障期	1 year 1年

### Eligibility 投保資格

Eligible members and issue age 會員及投保年齡	Subscriber: 18 years or above 投保人: 18歲或以上 Subscriber's children: 15 days or above 投保人子女: 出生15天或以上 Subscriber's spouse, parents, parents-in-law: 16 years or above 投保人之配偶、父母、配偶之父母: 16歲或以上
Renewal 續保	Guaranteed lifetime renewal regardless of claims <sup>⑥</sup> 無論索償多少，終生保證續保 <sup>⑥</sup>

### Discounts<sup>⑦</sup> 折扣優惠<sup>⑦</sup>

Lifetime discount 終生折扣	1 member: 5% 1名會員: 95折 2 members: 10% 2名會員: 9折 3 or more members: 15% 3名會員或以上: 85折
Child discount (For members below the age of 18) 子女折扣 (適用於18歲以下子女)	Enrolled with one parent: 25% Enrolled with both parents: 50% 父或母與子女一同投保: 75折 父母與子女一同投保: 5折
No claim renewal discount 無索償續保折扣	No claims for: 連續無索償: 2 or 3 consecutive years: 5% 2年或3年: 95折 4 or 5 consecutive years: 10% 4年或5年: 9折 6 consecutive years or more: 15% 6年或以上: 85折

Please refer to the Schedule of Benefits for more information. 詳情請參閱保障金額表。

<sup>⑥</sup> Bupa guarantees that your cover can be renewed every year for life as long as you meet the requirements as stated in the Renewal Clause of your contract. Bupa reserves the right to amend the subscription, benefits, terms and conditions upon your contract renewal. Please refer to your contract for further details.

<sup>⑦</sup> All discounts are only applicable to Bupa Together's Hospital and Surgical Benefit for contracts that come into effect from 1 January 2023. Children below the age of 18 are entitled to either lifetime discount or child discount, whichever is higher. For the original subscription of this scheme, please call our Health Management Consultant or use the online quotation engine on Bupa's website.

<sup>⑧</sup> 保柏保證每年續保你的保障至終生，只要你符合合約內所列明的續保要求。保柏保留在合約續保時更改保費、保障、條款及細則的權利。詳情請參閱你的合約。

<sup>⑨</sup> 所有折扣優惠只適用於「保柏互通保額」醫療保障計劃之「住院及手術保障」及於2023年1月1日或之後生效的合約。18歲以下的子女可享終生折扣或子女折扣，以較高折扣者為準。有關計劃之原保費，請聯絡我們的健康管理顧問或透過保柏網站的網上報價器查詢。

# Multiplied cover for you and your family 與家人同享倍增保障



## Full Cover Benefit for your peace of mind

Our Full Cover Benefit removes the restriction of individual item limits and offers 100% reimbursement for eligible hospital expenses up to the Maximum Annual Benefit Pool<sup>①</sup>. Simply select an attending doctor from our Bupa HealthCare appointed specialists and clinics and use our medical card<sup>②</sup> to receive quality treatment at one of the renowned private hospitals in Hong Kong without any payment or claims.<sup>③</sup>

## Share a benefit pool of up to HK\$1 million with your family

When you enrol with your family members, each of you will share a combined benefit pool of up to HK\$1 million. This generous and flexible benefit maximises reimbursement for those who need the cover most, especially if your family has elderly members or young children who tend to be more susceptible to illnesses. What's more, you will enjoy higher subscription discounts when enrolling with more family members.

Maximum Annual Benefit Pool (HK\$(per contract):

1 member	\$250,000
2 members	\$500,000
3 members	\$750,000
4 members or above	\$1,000,000

The maximum annual benefit for member aged 65 or above is subject to the available Maximum Annual Benefit Pool or HK\$500,000 whichever is lower.

## Free Double Benefit for Serious Illnesses

If a member is diagnosed with the following conditions, we will immediately double the benefit limit for hospital expenses<sup>④</sup> such as surgeries, ICU and miscellaneous services under the Standard Benefit to help the member afford better and more advanced treatment during these crucial times.

- Cancer
- Coronary artery disease requiring angioplasty or bypass graft surgery
- End-stage liver disease
- Kidney failure
- Tuberculosis

## Top-up benefit to boost your cover

Advanced treatment is usually available at a much higher cost. To enhance your protection, you can opt for the Supplementary Major Medical Benefit, which provides you with extra cover of HK\$147,300 every year. This benefit will cover 80% of expenses that exceed your Hospital and Surgical Benefit. Members who opt for the Supplementary Major Medical Benefit can make use of our medical card for cashless service at designated private hospitals in Hong Kong<sup>⑤</sup>.

- ① Maximum Annual Benefit Pool refers to the total maximum benefits for Hospital and Surgical Benefit and Free Double Benefit for Serious Illnesses available to the member(s) in the same contract during a contract year.
- ② Please refer to the Question Time section for more details.
- ③ Your expenses will be reimbursed under the Standard Benefit whenever you receive treatment from non-Bupa HealthCare Appointed Service Providers. The Free Double Benefit for Serious Illnesses applies to items 1-10 of the Standard Benefit as stated in Bupa Together's Schedule of Benefits. Please refer to your contract for the definition of the designated serious illnesses.
- ④ For the current list of designated private hospitals in Hong Kong, please visit Bupa's website at [www.bupa.com.hk](http://www.bupa.com.hk) > Medical Insurance > Bupa Together. This list is subject to change from time to time.
- ⑤ For the list of designated private hospitals, please refer to the Schedule of Benefits. This list is subject to change from time to time.



Enjoy great value with multiplied benefits shared among you and your family.

家人保額可相通，保障更高更超值。

### 全數賠償保障 有病不怕

使用「全數賠償保障」，你的賠償額不受細項上限所限制，在「每年最高通用賠償額」<sup>①</sup>內之合資格住院開支均可獲全數賠償。只要你選擇保柏康健特選專科醫生及診所求診，便可憑醫療卡<sup>②</sup>於本港著名的特選私家醫院接受優質治療，而不用找數及索償<sup>③</sup>。

### 家人可通用高達港幣100萬賠償額

凡與家人一起投保，你們的「每年最高通用賠償額」便可合併並互相通用高達港幣100萬，尤其年長父母或年幼子女可能患病與索償機會較大，靈活而充裕的保障額讓最有需要的家人獲得最大保障。同時，越多家人投保，保費折扣越高。

每年最高通用賠償額（港幣）（每合約計）：

1名會員	\$250,000
2名會員	\$500,000
3名會員	\$750,000
4名會員或以上	\$1,000,000

65歲或以上會員之每年最高賠償額按可享用的「每年最高通用賠償額」或港幣500,000元為限，以較低者為準。

### 罹患危疾 可獲免費嚴重疾病雙倍賠償

如會員被診斷患上以下任何一項病症，我們將會把「標準保障」下如手術、深切治療及雜費等住院項目的賠償額倍增<sup>④</sup>，在這關鍵時刻送上最實際的支援，讓會員接受更佳更先進的治療。

- 癌症
- 冠心病（須接受俗稱「通波仔」的冠狀血管成形術或搭橋手術）
- 末期肝病
- 腎衰竭
- 結核病

### 附加醫療保障給你額外保障

先進科技造就嶄新治療，但費用亦更高昂。將「附加醫療保障」加入基本計劃，你便可獲每年港幣147,300元的額外保障額，當你的醫療費用超出「住院及手術保障」的賠償額時，「附加醫療保障」便會賠償差額的8成。投保了「附加醫療保障」的會員，可於指定的香港私家醫院<sup>⑤</sup>使用醫療卡，免找數免索償。

① 「每年最高通用賠償額」即合約內所有會員於「住院及手術保障」及「免費嚴重疾病雙倍保障」下可享有的每年最高賠償總額。

② 詳情請參閱常見問題部分。

③ 凡向非保柏康健特選服務供應商求診，會按「標準保障」賠償。

④ 「免費嚴重疾病雙倍保障」適用於「保柏互通保額」計劃保障金額表上「標準保障」的1至10項。有關指定的嚴重疾病定義，請參閱你的合約。

⑤ 你可瀏覽保柏網頁 [www.bupa.com.hk](http://www.bupa.com.hk) > 個人醫療保險 > 互通保額醫療保險，查看現時指定的香港私家醫院名單，此名單可能會不時更改。

⑥ 有關指定的香港私家醫院名單，請參考保障金額表，此名單可能會不時更改。



Look good and feel good with our Free Bupa Wellness Programme.

每年免費保健服務，助你時刻保持健與美。

## Access comprehensive care for free 全面免費保健服務

### Stay in good shape with our free annual wellness services

As your healthcare partner, we do not just take care of your medical expenses but also look after your health comprehensively. Under our Free Bupa Wellness Programme, you can choose one of the services in the adjacent table to cater to your personal needs each contract year, starting from the second year of membership.

#### 每年任選免費保健服務 達致健與美

作為你的健康夥伴，我們不單支付你的醫療費用，亦助你保持健康。由第二個合約年度開始，每位會員可因應個人需要，從右方之「免費保柏保健計劃」，自選其中一項服務。

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### Free Bupa Wellness Programme 免費保柏保健計劃

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#### Healthy body 身體健康

- Optical Check 眼科檢查
- Hepatitis Screening 肝炎測試
- Hepatitis A or B Vaccine 甲型或乙型肝炎預防疫苗
- General Health Assessment 普通全身檢查
- Well Man Health Assessment 男性專科檢查
- Well Woman Health Assessment 女性專科檢查

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#### Healthy family 家庭健康

- Pre-marital / Pre-pregnancy Check-up 婚前 / 懷孕前檢查

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#### Healthy lifestyle 健康生活

- Fitness Management Programme 體適能管理計劃
  - Healthy Eating Programme 健康飲食計劃
-

## Comprehensive mental health coverage

To take care of your mental wellbeing, this scheme provides both inpatient and outpatient psychiatric-related coverage.

### 全面的情緒健康保障

本計劃提供住院及門診的精神科相關保障，全面照顧你的情緒健康。

# Support throughout your life 每個人生階段 守護在旁

## Guaranteed lifetime renewal

We guarantee that your cover can be renewed for life<sup>⑥</sup>. And your subscription will be based on your age only no matter how much you claim on conditions arising after your membership starts.

## Flexible optional benefits

Our Clinical Benefit is specially designed to include coverage for psychiatric-related treatments and psychological counselling, such as outpatient treatments for psychiatric, psychological, mental or behavioural conditions, senile dementia (including Alzheimer's disease) and Parkinson's disease. Other items such as general practitioners, specialists, diagnostic imaging and laboratory tests are also covered.

To take care of mums-to-be, our optional Maternity Benefit covers medical expenses including obstetrician fees, hospitalisation charges, prenatal and postnatal check-ups for normal delivery, caesarean section and miscarriage, as well as nursery care for your newborn baby. You will receive reimbursement after your maternity cover takes effect for nine months or more.

You can also add our optional Dental Benefit to cover dental expenses such as scaling and polishing, fillings and extractions, emergency consultations and more. If you receive treatment at designated network dental centres<sup>⑦</sup>, you can enjoy cashless service<sup>⑧</sup> for covered items.

## Easy enrolment

No medical examinations are required<sup>⑩</sup>.

## 保證終生續保

我們保證終生續保你的保障<sup>⑥</sup>，無論你因會籍開始後所患疾病索償多少，保費只會根據你的年齡而調整。

## 靈活的自選保障

本計劃的門診保障特設門診精神科相關治療及臨床心理輔導保障，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。而其他項目，如普通科醫生、專科醫生、診斷影像及化驗等均可獲賠償。

為照顧準媽媽，我們提供自選的「產科保障」，賠償懷孕時的醫療費用，包括順產、剖腹生產或流產的產科醫生費用、住院費用、產前及產後檢查費用，以及初生嬰兒的護理費用。你將會在產科保障生效起9個月後開始獲得賠償。

你亦可附加牙科保障，保障包括洗牙、補牙及脫牙、牙痛急症等牙科治療。如你在指定網絡牙科中心<sup>⑦</sup>接受診治，更可就覆蓋的服務項目享用免找數服務<sup>⑧</sup>。

## 投保簡易

無須驗身<sup>⑩</sup>，快捷簡單。

⑥ Bupa guarantees that your cover can be renewed every year for life as long as you meet the requirements as stated in the Renewal Clause of your contract. Bupa reserves the right to amend the subscription, benefits, terms and conditions upon your contract renewal. Please refer to your contract for further details.

保柏保證每年續保你的保障至終生，只要你符合合約內所列明的續保要求。保柏保留在合約續保時更改保費、保障、條款及細則的權利。詳情請參閱你的合約。

⑦ 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.

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。

⑧ Members can enjoy cashless service at designated Network Dental Centres by presenting their Bupa medical card or membership number and Hong Kong Identity Card for verification and record.

會員只需出示保柏醫療卡或保單號碼，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用免找數服務。

⑩ If your Body Mass Index is considered as overweight, underweight or you're aged 65 or above at enrolment, Bupa may ask you to submit a check-up report as part of your health insurance application process. 如你於投保時的身高體重比例屬過重、過輕或年齡為65歲或以上，保柏或會要求你提交健康檢查報告，以便處理你的申請。



## Health Coaching Services

### 健康支援服務

Staffed by a team of qualified nurses, health management professionals and doctors, our Health Coaching Services offer a variety of expert healthcare support to minimise your worries. For more complicated conditions, our medical professionals can offer guidance to help you recover from your illness.

由合資格護士、健康管理團隊及醫生為你提供一系列專業的健康支援，讓你安心無憂。當遇上較嚴重的疾病時，我們以專業知識為你提供指引，助你復原。

#### Assisting you at all times 時刻為你提供協助

- Our **24/7 Customer Care helpdesk** operates 24 hours every day, with a “live” person to directly answer your queries.
- Our **24/7 Healthline** is staffed with a team of qualified nurses and health management professionals, supported by doctors<sup>①</sup>, providing assistance and guidance from how to care for a sick child or elderly to discussing your symptoms, diagnosis and treatment options.
- 我們的**24小時客戶服務專線**由專人每天24小時，即時解答你的查詢。
- 我們的**24小時健康專線**由合資格護士及健康管理團隊為你提供協助及指導，例如怎樣照顧患病小孩或長者，以至助你了解病徵、診斷及治療方案，背後更有醫生作為顧問<sup>①</sup>。

#### Supporting you personally 給你個人支援服務

- If you have cancer or heart disease, a **dedicated Care Manager** can be in touch with you to follow up on claims and assist you throughout treatment and recovery, from explaining your treatment plan and overseeing costs to arranging follow-up consultations. If you're admitted into a local private hospital, our Care Manager can make a courtesy call or visit, with your consent.
- 如不幸患上癌症或心臟病，**個人健康顧問**可與你緊密聯絡，跟進你的索償、全程協助你的治療至康復過程，包括解釋你的治療計劃和醫療開支以至安排跟進治療。當你入住本港私家醫院時，在得到你的同意下，我們可前往醫院探望你或致電慰問你。

The use of Health Coaching Services is free of charge. If the services suggested by us are not covered under your Bupa Together Health Insurance Scheme, you will be responsible for the fees incurred.

使用健康支援服務並不需額外費用。若我們建議的服務不在你的「保柏互通保額」醫療保障計劃之賠償範圍內，你便須支付有關費用。

<sup>①</sup> Doctors will be available during scheduled office hours to support the nurses for answering enquiries. Office hours: Mon – Fri, from 9am to 6pm (Hong Kong time), except public holidays.

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。



# One-stop specialist treatment programmes

## 一站式專科治療計劃

### Supporting your health every DAY, every WAY

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

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

One-stop specialist treatment programmes include:

- Bupa DAY series
  - Eye day surgeries
  - Day-case gynaecological procedures
- Bupa WAY series
  - Clinical treatments for musculoskeletal pain
  - Guidance and treatments to support breast health

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

### 健康·一心守護

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

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

一站式專科治療計劃包括：

- 一通健日症計劃
  - 眼科日間手術
  - 婦科日症治療
- 護您同行計劃
  - 肌骨痛症門診治療
  - 乳房健康指導及治療

有關專科治療計劃的詳情及最新資訊，請瀏覽保柏網站。

Remark: Whether you are eligible to use Bupa DAY programmes and the Bupa WAY programme depends on each programme's eligibility, and is subject to your medical insurance coverage and/or benefit limits.

備註：你是否合資格使用「保柏一通健日症計劃」及「保柏護您同行計劃」，將受個別計劃的資格條件所限，並根據你的保險計劃之保障範圍及／或賠償限額而定。



# Insurance and wellness in your hands

## 保障、健康全掌握

With a single myBupa account, you can access two free Bupa apps designed to help you manage your policy and lead a healthier life. 你只需要一個myBupa帳戶，即可連結兩個免費的保柏手機應用程式，輕鬆管理保單及活出健康人生。






### myBupa

Use our online customer service portal myBupa to manage your scheme anytime, anywhere. Find a network doctor, submit claims, view your clinical benefit usage and much more. You can also enjoy exclusive offers from popular merchants.

### Bupa4Life

Use your myBupa account to access Bupa's wellness app Bupa4Life to explore a wide range of wellness classes, activities, health tips, contents and more. You can also earn points and redeem exciting rewards such as shopping vouchers and healthcare services by achieving wellness goals.

### Explore Bupa4Life for a healthier you! Its functions include:

-  Redeem rewards for free such as shopping vouchers and healthcare services
-  Get a report about your health through a 5-minute survey
-  Personalise and achieve your goals on eating healthy, sleeping better, etc.
-  Read up on health topics like weight loss, nutrition, mental health and more
-  Enjoy user-exclusive events such as health talks, fitness classes and fun games with prizes






### myBupa

使用保柏的網上客戶服務平台myBupa即可隨時隨地輕鬆管理保單，例如搜尋網絡醫生、網上遞交索償、查閱門診保障使用量等。你更可享受一系列與健康、生活時尚相關的會員尊享禮遇。

### Bupa4Life

你可使用myBupa帳戶登入Bupa4Life健康應用程式，發掘一系列健康課程、活動、健康貼士和資訊等。達成目標，更可賺取積分，換領購物禮券及醫療保健服務等精彩獎賞。

### Bupa4Life 陪你變得更健康，功能包括：

-  免費換領購物禮券及醫療保健服務
-  完成5分鐘問卷，收取個人健康報告
-  自訂及達成目標，例如健康飲食、改善睡眠等
-  閱讀有關減重、營養及精神健康等的資訊
-  專享獨家為用戶而設的活動，如健康講座、運動課程及有獎遊戲等

# The World of Bupa

## 環球保柏

### Bupa - A global healthcare specialist

Bupa's purpose is helping people live longer, healthier, happier lives and making a better world.

We are an international healthcare company serving over 38 million customers worldwide. With no shareholders, we reinvest profits into providing more and better healthcare for the benefit of current and future customers.

We directly employ around 85,000 people, principally in the UK, Australia, Spain, Chile, Poland, New Zealand, Hong Kong SAR, Türkiye, Brazil, Mexico, the US, Middle East and Ireland. We also have associate businesses in Saudi Arabia and India.

### 保柏—國際醫療保健專家

保柏的目標是幫助人們活出更長壽、更健康 and 更愉快的人生，並創造更美好的世界。

我們是國際醫療保健公司，於全球服務超過3,800萬客戶。我們不設股東，將盈餘投資於業務當中，為現在和未來的客戶提供更多更佳的醫療保健服務。

我們在全球的員工約85,000人，主要位於英國、澳洲、西班牙、智利、波蘭、紐西蘭、香港特別行政區、土耳其、巴西、墨西哥、美國、中東及愛爾蘭。我們亦於沙特阿拉伯及印度設有聯營業務。

### Bupa Hong Kong

In Hong Kong, we are known as the health insurance specialist. We have gained the trust of more than 400,000 individuals and 3,200 companies. We have provided quality health insurance for Hong Kong's civil servants for more than 20 years.

Bupa also provides primary care services through Quality HealthCare Medical Services, one of Hong Kong's largest private clinic networks.

### Quality HealthCare

Quality HealthCare Medical Services Limited (QHMS) became part of an international healthcare company, Bupa, in October 2013. QHMS' operations span diagnostics, primary healthcare and day care specialties. It offers western medicine, traditional Chinese medicine, diagnostics & imaging, dental, physiotherapy, mental health and wellness services. With roots tracing back to 1868, QHMS serves the community through a network of over 1,400 provider service points in Hong Kong, including over 100 Quality HealthCare multi-specialty medical centres and other affiliated clinics. It also operates a private nursing agency and Bupa medical centres and dental centres in Hong Kong.



### 保柏香港

在香港，我們是醫療保險專家，受超過40萬名會員及3,200間公司所信賴。我們亦為本港公務員提供優質醫療保障逾20年。

此外，保柏透過旗下卓健醫療提供醫療保健服務，卓健醫療是本港最龐大的私營醫療網絡之一。

### 卓健醫療

卓健醫療服務有限公司（卓健醫療）於2013年10月正式加入國際醫療服務集團—保柏。卓健醫療的服務涵蓋診斷、基層保健及專科醫療，提供西醫、中醫、診斷及造影、牙科、物理治療、心理健康及保健等服務。自1868年起植根香港，卓健醫療透過逾1,400個遍及全港的服務點，包括旗下超過100間設施齊備的卓健醫療中心，連同多間聯營診所，為香港市民及訪港旅客服務。卓健醫療並營運護理介紹所，以及在港的保柏醫療中心和保柏牙科中心。



# Question Time

## 常見問題

### 1 Is there any minimum length of hospital stay?

There is no minimum length of stay, meaning that procedures such as endoscopy, a plaster cast, wound sutures, radiotherapy and chemotherapy, which do not require hospital confinement, are covered.

### 2 How do I use my Bupa medical card to get the most from my Full Cover Benefit?

You will need to visit a specialist and clinic appointed by Bupa and present your medical card upon registration. The specialist will then get pre-authorisation of the medical expenses for you if hospital confinement is required. You can choose from one of the Bupa HealthCare Appointed Hospitals where your specialist is registered. Once the pre-authorisation<sup>®</sup> is confirmed, we will issue the hospital with a Pre-authorisation Confirmation / Guarantee of Payment Letter for your hospital confinement. You will need to show your medical card to your selected hospital to enjoy cashless service. Upon discharge, all you need to do is sign on the claim form provided by the hospital. You are not required to submit any claims as Bupa will directly settle your expenses with the hospital.

You can also use the medical card to settle the expenses for medical procedures received at the appointed specialist's designated clinic and day case centres of designated private hospitals in Hong Kong.

For emergency hospital confinement outside our office hours, the pre-authorisation can be arranged on the next working day. Step-by-step details will be provided in your Membership Guide.

### 3 How do I use my Bupa medical card to make use of the Supplementary Major Medical Benefit?

Call us and submit a pre-authorisation form<sup>®</sup> at least 2 working days before you are admitted to hospital. We will then give your hospital a Pre-authorisation Confirmation / Guarantee of Payment Letter. For emergency hospital confinement outside our office hours, the registration can be submitted on the next working day.

### 4 How can I add or take away members from my contract when my family situation changes?

When you get married or have a newborn baby, you can easily add your spouse or child to the same Bupa Together contract. Simply submit the enrolment application and supporting documents to Bupa within three months of your wedding date or child's date of birth. The new member's cover will take effect on the first day of the following month upon application<sup>®</sup>. You can also apply to add or take away family members from your contract at each yearly renewal.

### 5 Will my individual claim affect the no claim renewal discount for my family members under the same contract?

No, the no claim renewal discount is calculated independently for each member so if you have made a claim, it will not affect the discount for your family members under the same contract.

### 1 是否設有最低住院時數？

此計劃沒有最低住院時數限制，因此無須住院的常見治療如照胃鏡、打石膏、傷口縫合、電療、化療等，均可獲賠償。

### 2 如何以保柏醫療卡盡享「全數賠償保障」賠償？

你須向保柏特選的專科醫生及診所求診，並於登記時出示你的醫療卡。如須入院治療，專科醫生會代你向保柏為有關的醫療費用索取初步保障審核<sup>®</sup>。你可選擇入住專科醫生已掛單的保柏康健特選私家醫院。當初步保障審核確認後，我們會向醫院發出「初步保障審核確認 / 付款保證信」以作入院之用。入院時，請向醫院出示你的醫療卡以享住院免找數服務。出院時你只須於醫院為你填妥的住院賠償申請表上簽署，保柏便會代你向醫院繳付費用，你無須申請索償。

你亦可使用你的醫療卡支付由特選專科醫生於指定的診所及香港指定私家醫院的日症中心提供的手術治療。

如在辦公時間外入院進行緊急治療，你可於下一個工作天補辦審核。你可於你的《會員指引》中細閱有關詳情。

### 3 如我有「附加醫療保障」，我應如何使用我的保柏醫療卡？

你只須於入院前最少兩個工作天致電保柏，並填妥初步保障審核表格<sup>®</sup>，我們會向醫院發出「初步保障審核確認 / 付款保證信」。如在我們的辦公時間外入院進行緊急治療，你可於下一個工作天補辦登記。

### 4 當我的家庭狀況轉變，如何加減合約內的家庭成員？

當你結婚或新生命出生時，只須於3個月內遞交申請及有關證明文件便可將配偶或子女加入計劃內。新會員的保障將會於申請後下一個月生效<sup>®</sup>，你亦可於每年續保時加減家庭成員。

### 5 如我自己曾經索償，會否影響家人的無索償續保折扣？

不會。每位會員的無索償續保折扣均獨立計算，即使其中一名成員曾經索償，其他無索償之會員仍可享有折扣。

<sup>®</sup> You'll need to provide your credit card information to obtain pre-authorisation. A temporary hold of HK\$500 will be placed on your credit card until the claim assessment is completed. It should take around 2 business days to complete the pre-authorisation once all necessary information is received with a signed application form. 向保柏索取初步保障審核時，你須提供信用卡資料。保柏會在你的信用卡保留港幣500元的信用額，直至索償程序完結為止。當保柏收妥所有所需資料及已簽署的申請表後，約兩個工作天即可完成初步保障審核。

<sup>®</sup> Applications are subject to underwriting and approval by Bupa. 申請須經保柏核保及批准。

# Important information

## 重要資料

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.

Free Bupa Wellness Programme Available from the second contract year.

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

You have the right to cancel your contract by giving Bupa signed written notice within 21 days from the contract effective date. You'll receive a refund of all the subscription and levy paid, provided that no benefit has been paid or is payable. Cooling-off rights are applicable to new contracts only.

### Cancellation rights

You may cancel your contract by giving not less than 10 days' written notice to Bupa before the contract anniversary date. The cancellation will be effective 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 your entitlement to insurance benefits. Consequences may include cancellation of your contract, application of an increased subscription/exclusion or reduction of entitlement to claims payments.

### Claims procedure

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

### Subscription adjustment

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

Any claims you make won't affect your subscription at renewal. However, renewal subscriptions may still increase as you get older. Other 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 will be renewed with subscription payments collected automatically, unless you submit a written request to cancel your membership. Bupa guarantees that your cover can be renewed every year for life as long as you meet the requirements as stated in the Renewal Clause of your contract, regardless of any changes in your health condition.

We understand that your healthcare needs may change throughout your life, so you have the flexibility to change your benefits every year upon renewal. If you wish to add any benefit(s) in future, you will need to complete a health declaration form for medical underwriting purposes. Approval will be subject to underwriting.

You can also apply to add or remove family members from your contract at each yearly renewal. If you choose to add a new member, in addition to the complete health declaration for the new member, all existing members under the same contract will need to answer a simple question for medical underwriting purposes. After adding or removing a member in your contract, the maximum annual benefit pool will be updated accordingly.

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 may pay your subscription yearly or monthly by bank account or credit card autopay. If you've fulfilled the eligibility criteria for renewal, we will charge your subscription automatically at the next contract renewal, unless we have received other instructions from you.

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：

免費保柏保健計劃 將於第二個合約年度起生效。

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

你有權於合約生效日起計的21天內以書面通知保柏取消合約，唯有關通知必須由你簽署。若你並無獲得任何賠償或有應付賠償，將可獲全數退還已繳保費及徵費。冷靜期權益只適用於新合約。

### 取消合約權益

你可於合約週年日前最少10天以書面通知保柏取消合約。有關取消將於合約週年日生效。

### 有關核保之資料披露

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

### 索償步驟

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

### 保費調整

每名會員的首期保費會根據年齡、健康狀況、保障選擇等因素而定。

你的保費並不會因曾作出索償而被調高。然而，續保保費或會因年齡遞增而相應調整。其他會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並會自動續保及收取保費，除非你以書面提出取消會籍。無論你在投保後的健康狀況有任何改變，保柏保證每年續保你的保障至終生，只要你符合合約內列明的續保要求。

我們了解每個人生階段有不同的保險需要，因此你可在每年續保時，靈活更改你的保障項目。若你選擇增加保障項目，你須填寫健康聲明作核保之用。核保須經保柏批准。

你亦可在每年續保時，選擇增減計劃的受保會員。若你選擇增加受保會員，除新增會員必須填寫健康聲明外，所有現有會員亦須要回答簡單的健康問題作核保之用。在你增減會員數目後，合約的「每年最高通用賠償額」亦隨之增減。

保柏可於每年續保時更改合約條款及細則，有關改動將於續保時以書面通知你。

### 繳付保費

你可選擇以銀行賬戶或信用卡自動轉賬年繳或月繳保費。只要你符合續保的資格條件，保柏將於合約續保時於指定銀行賬戶/信用卡自動扣取續保保費，除非我們接獲你的其他指示。

## Termination of your contract

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

1. pursuant to any prohibition or restriction under any sanctions, law or regulations to provide any benefit;
2. when the subscription is unpaid at the expiration of the grace period; or
3. upon the death of 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.

## Changing to a new insurance scheme

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

## General exclusions

- Pre-existing conditions (unless such conditions have been disclosed in the application and accepted by Bupa).
- Treatment, medical service, medication or investigation which is not medically necessary.
- Any illness or 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 one year of the accident), or hearing tests, routine blood tests, general check-ups, vaccinations or inoculations, Hair Mineral Analysis (HMA), health supplements or body weight control, eye refraction including but not limited to routine eye tests or any costs of fitting of spectacles or lens (unless such treatment has been approved by Bupa).
- Congenital conditions, developmental conditions or hereditary conditions.
- Treatment that commenced during the first five years of the member's coverage commencement date of this contract 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; sexual dysfunction including but not limited to impotence, erectile dysfunction, premature 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 injury resulting from participation in criminal activities.
- Alternative treatment including but not limited to Chinese medicines treatment, acupuncture, acupressure, tui na, hypnotism, rolfing, massage therapy, aromatherapy (unless it is payable under Chinese Herbalist Benefit or Chinese Bonsetter 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, 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.

If you have any pre-existing medical conditions, special exclusions may be added after underwriting.

## 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. 根據任何制裁，法律或法規而禁止或限制提供任何保障；
2. 在繳費寬限期屆滿時仍未支付保費；或
3. 投保人身故。

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。

## 轉換至新的保險計劃

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

## 不受保障項目

- 已存在病症（已於申請表披露並於登記加入時獲保柏接納為承保範圍內則除外）。
- 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，並於意外後一年內接受醫療上必需的服務則不屬此項）、聽覺測驗、常規驗血、例行檢驗、預防注射或接種疫苗、毛髮礦物質含量分析、健康補品或體重控制，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（經保柏批准則除外）。
- 先天性疾病、發育異常或遺傳性疾病。
- 由保障開始日起首5年內，因感染人體免疫力缺損病毒所引致的治療。
- 性病及其後遺症。
- 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；與性機能失常有關之治療，包括但不限於陽萎、不舉、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損傷。
- 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）、帕金遜病（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）。
- 心理病或精神病，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，受牙科保障涵蓋或因意外引致緊急入院治療或住院脫除阻生智慧齒則除外。但不包括該住院後之跟進治療（受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。

如果你有任何已存在病症，核保後可能加入除外條款。

### 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, physiotherapist, psychiatrist, psychologist, anaesthetist 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 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.

### 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、物理治療師、精神科醫生、心理學家、麻醉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
- (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。

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.

Subscriptions paid under this contract aren't eligible for claiming tax deduction.

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.

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。

就本合約所繳付之保費不可用作申請稅項扣減。

本冊子中、英文之意思如有任何差別，概以英文為準。

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**Table of Subscriptions 保費表**

1 January 2023 Edition 2023年1月1日版本

All figures in HK\$ 以港幣計算

**A Hospital and Surgical Benefit (Discounted subscription per person)**  
住院及手術保障 (每人折扣後保費)

Attained age 已屆年齡	Single enrolment 單人投保 Lifetime discount - 5% 終生折扣 - 95 折		Family enrolment for 2 persons 二人家庭投保 Lifetime discount - 10% 終生折扣 - 9 折		Family enrolment for 3 persons or more 三人或以上家庭投保 Lifetime discount - 15% 終生折扣 - 85 折	
	Ward 大房		Ward 大房		Ward 大房	
	Annual 按年	Monthly 按月	Annual 按年	Monthly 按月	Annual 按年	Monthly 按月
18	2,771	250	2,625	237	2,479	224
19	2,785	251	2,639	238	2,492	224
20	2,809	253	2,661	239	2,513	226
21	2,846	257	2,696	243	2,547	230
22	2,887	260	2,735	247	2,583	233
23	2,940	265	2,786	251	2,631	237
24	2,991	269	2,833	255	2,676	241
25	3,053	275	2,893	260	2,732	246
26	3,129	281	2,965	266	2,800	252
27	3,215	290	3,046	275	2,876	259
28	3,318	298	3,144	283	2,969	267
29	3,428	309	3,247	293	3,067	276
30	3,546	319	3,360	302	3,173	286
31	3,672	331	3,479	313	3,285	296
32	3,803	342	3,603	324	3,403	306
33	3,941	354	3,733	336	3,526	317
34	4,093	369	3,877	349	3,662	330
35	4,241	382	4,018	362	3,794	342
36	4,398	396	4,166	375	3,935	354
37	4,557	410	4,317	389	4,077	367
38	4,729	426	4,480	403	4,231	381
39	4,913	442	4,655	419	4,396	395
40	5,123	461	4,854	437	4,584	412
41	5,351	482	5,070	456	4,788	431
42	5,585	503	5,291	476	4,997	450
43	5,839	525	5,531	498	5,224	470
44	6,095	548	5,774	519	5,454	490
45	6,375	574	6,039	544	5,704	513
46	6,653	599	6,303	567	5,953	536
47	6,964	627	6,598	594	6,231	561
48	7,299	656	6,915	622	6,531	587
49	7,652	689	7,250	653	6,847	616
50	8,052	725	7,628	687	7,205	649
51	8,464	762	8,018	722	7,573	682
52	8,902	801	8,434	759	7,965	717
53	9,323	839	8,833	795	8,342	751
54	9,777	880	9,263	833	8,748	787
55	10,295	926	9,753	878	9,211	829
56	10,821	974	10,252	923	9,682	871
57	11,460	1,032	10,857	977	10,254	923
58	12,143	1,093	11,504	1,035	10,865	978
59	12,843	1,156	12,167	1,095	11,491	1,034

The subscriptions below are for renewal only 以下保費只供續保之用

60	13,630	1,226	12,912	1,162	12,195	1,097
61	14,397	1,296	13,640	1,228	12,882	1,159
62	15,192	1,367	14,393	1,295	13,593	1,223
63	16,087	1,448	15,241	1,372	14,394	1,295
64	17,143	1,543	16,241	1,462	15,338	1,380
65	18,278	1,645	17,316	1,559	16,354	1,472
66	19,655	1,769	18,620	1,676	17,586	1,583
67	20,775	1,870	19,681	1,771	18,588	1,673
68	21,585	1,943	20,449	1,841	19,313	1,738
69	22,477	2,023	21,294	1,916	20,111	1,810
70	23,199	2,088	21,978	1,978	20,757	1,868
71	23,974	2,157	22,712	2,044	21,451	1,930
72	24,788	2,231	23,484	2,113	22,179	1,996
73	25,381	2,285	24,045	2,165	22,709	2,044
74	25,843	2,326	24,483	2,203	23,123	2,081
75	26,385	2,375	24,997	2,250	23,608	2,125
76	26,962	2,426	25,543	2,299	24,124	2,171
77	27,472	2,473	26,026	2,343	24,580	2,213
78	27,906	2,512	26,438	2,380	24,969	2,247
79	28,133	2,532	26,653	2,399	25,172	2,265
80 or above 或以上	28,354	2,552	26,861	2,417	25,369	2,283

**Table of Subscriptions 保費表**

1 January 2023 Edition 2023年1月1日版本

**For child aged from 15 days to 17 years enrolling with parents 15日至17歲子女與父母一同投保**

All figures in HK\$ 以港幣計算

<b>A Hospital and Surgical Benefit (Discounted subscription per person)</b> 住院及手術保障 (每人折扣後保費)			
Child enrolls with one parent 子女與父或母同時投保 Child discount - 25% 子女折扣 - 75 折		Child enrolls with both parents 子女與父母同時投保 Child discount - 50% 子女折扣 - 5 折	
Ward 大房		Ward 大房	
Annual 按年	Monthly 按月	Annual 按年	Monthly 按月
3,239	292	2,160	195

**For child aged from 15 days to 17 years enrolling independently 15日至17歲子女獨立投保**

<b>A Hospital and Surgical Benefit (Discounted subscription per person)</b> 住院及手術保障 (每人折扣後保費)					
Enrol for 1 child 一名子女投保 Lifetime discount - 5% 終生折扣 - 95 折		Enrol for 2 children 兩名子女投保 Lifetime discount - 10% 終生折扣 - 9 折		Enrol for 3 children or more 三名或以上子女投保 Lifetime discount - 15% 終生折扣 - 85 折	
Ward 大房		Ward 大房		Ward 大房	
Annual 按年	Monthly 按月	Annual 按年	Monthly 按月	Annual 按年	Monthly 按月
4,103	370	3,887	350	3,671	331

**Additional Options 額外保障**

All figures in HK\$ 以港幣計算

<b>F Supplementary Major Medical Benefit 附加醫療保障</b> Additional Subscription 額外保費					
Attained age 已屆年齡	Annual 按年	Monthly 按月	Attained age 已屆年齡	Annual 按年	Monthly 按月
15 days 日 - 17 years 歲	890	80	50	2,030	183
18	674	61	51	2,127	191
19	683	61	52	2,234	201
20	691	62	53	2,341	211
21	702	63	54	2,457	221
22	716	64	55	2,575	232
23	730	66	56	2,708	244
24	744	67	57	2,850	257
25	761	68	58	3,001	270
26	784	71	59	3,168	285
27	808	73	The subscriptions below are for renewal only 以下保費只供續保之用		
28	838	75	60	3,344	301
29	869	78	61	3,541	319
30	895	81	62	3,740	337
31	925	83	63	3,957	356
32	956	86	64	4,191	377
33	986	89	65	4,457	401
34	1,022	92	66	4,746	427
35	1,060	95	67	5,057	455
36	1,100	99	68	5,379	484
37	1,141	103	69	5,759	518
38	1,187	107	70	6,171	555
39	1,235	111	71	6,588	593
40	1,286	116	72	7,000	630
41	1,340	121	73	7,366	663
42	1,400	126	74	7,682	691
43	1,462	132	75	7,945	715
44	1,524	137	76	8,194	737
45	1,595	144	77	8,429	759
46	1,670	150	78	8,680	781
47	1,753	158	79	8,936	804
48	1,840	166	80 or above 或以上	9,201	828
49	1,933	174			

**Table of Subscriptions 保費表**

1 January 2023 Edition 2023年1月1日版本

**Additional Options 額外保障**

All figures in HK\$ 以港幣計算

<b>G Clinical Benefit 門診保障 Additional Subscription 額外保費</b>					
Attained age 已屆年齡	Annual 按年	Monthly 按月	Attained age 已屆年齡	Annual 按年	Monthly 按月
15 days 日 - 17 years 歲	5,631	507	49	8,396	756
18	4,373	394	50	8,526	767
19	4,431	399	51	8,699	783
20	4,487	404	52	8,887	800
21	4,573	412	53	9,061	815
22	4,646	418	54	9,244	832
23	4,730	426	55	9,405	846
24	4,815	433	56	9,566	861
25	4,896	441	57	9,717	875
26	4,992	449	58	9,864	888
27	5,109	460	59	10,026	902
28	5,231	471	60	10,195	918
29	5,345	481	61	10,353	932
30	5,479	493	62	10,517	947
31	5,591	503	63	10,692	962
32	5,727	515	64	10,874	979
33	5,971	537	65	11,057	995
34	6,250	563	66	11,232	1,011
35	6,499	585	67	11,393	1,025
36	6,719	605	68	11,540	1,039
37	6,840	616	69	11,633	1,047
38	6,960	626	70	11,768	1,059
39	7,084	638	71	11,873	1,069
40	7,205	648	72	11,974	1,078
41	7,323	659	73	12,066	1,086
42	7,443	670	74	12,142	1,093
43	7,576	682	75	12,212	1,099
44	7,710	694	76	12,271	1,104
45	7,839	706	77	12,331	1,110
46	7,971	717	78	12,396	1,116
47	8,104	729	79	12,458	1,121
48	8,246	742	80 or above 或以上	12,510	1,126

<b>H Maternity Benefit 產科保障 (For Female Members with Maternity Benefit only) (只供有產科保障的女性會員) Additional Subscription 額外保費</b>		
Attained age 已屆年齡	Annual 按年	Monthly 按月
18 - 29 years 歲	8,022	722
30 - 49 years 歲	10,694	962
50 - 54 years (For renewal only) 50 - 54 歲 (只供續保)	10,694	962

<b>I Dental Benefit 牙科保障 Additional Subscription 額外保費</b>				
Attained age 已屆年齡	Plan 計劃 A		Plan 計劃 B	
	Annual 按年	Monthly 按月	Annual 按年	Monthly 按月
15 days or above 15日或以上	820	74	1,185	107

### Table of Subscriptions 保費表

1 January 2023 Edition 2023年1月1日版本

#### No Claim Renewal Discount 無索償續保折扣

A no claim renewal discount will be applied to the next renewal subscription of Hospital and Surgical Benefit provided that no claims payment has been made or is payable under Hospital and Surgical Benefit or Free Double Benefit for Serious Illnesses during any one of the following periods: 如於以下任何年期並無已付或應付之「住院及手術保障」或「免費嚴重疾病雙倍保障」賠償，下一年度「住院及手術保障」之續保保費將獲無索償續保折扣優惠：

Period without claims payment 無賠償紀錄之年期	No claim renewal discount 無索償續保折扣優惠
2 or 3 consecutive Contract Years 連續 2 或 3 個合約年度	5%
4 or 5 consecutive Contract Years 連續 4 或 5 個合約年度	10%
6 consecutive Contract Years or above 連續 6 個合約年度或以上	15%

#### Notes 附註

- This Table of Subscriptions is only applicable to Members who are aged 15 days to 59 years (inclusive) on the Coverage Commencement Date. For those who are aged 60 years or above on the Coverage Commencement Date, please refer to other applicable Table of Subscriptions.
- Any new applicant who is aged between 60 and 69 years has to pay an extra 50% subscription of Hospital and Surgical Benefit as shown in the table upon enrolment and renewal. If the applicant is aged 70 years or above, the subscription of Hospital and Surgical Benefit will be doubled. However, they only have to pay standard subscriptions for Clinical Benefit and Dental Benefit upon enrolment and renewal.
- All discounts are only applicable to Bupa Together's Hospital and Surgical Benefit for Contracts that come into effect from 1 January 2023. Children below the age of 18 are entitled to either lifetime discount or child discount, whichever is higher. For the original Subscription of this scheme, please call our Health Management Consultants or use the online quotation engine on Bupa's website.
- 此保費表只適用於在保障開始日年齡介乎15日至59歲(首尾歲數計算在內)的會員。在保障開始日已屆60歲或以上的會員，請參考其他適用之保費表。
- 年滿60至69歲之新申請人，其「住院及手術保障」之投保及續保保費將會按照上表之保費調高50%。而年滿70歲或以上之新申請人，其「住院及手術保障」之投保及續保保費將會按照上表之保費調高一倍。但投保及續保「門診保障」及「牙科保障」只須繳付標準保費。
- 所有折扣優惠只適用於「保柏互通保額」醫療保障計劃之「住院及手術保障」及於2023年1月1日或之後生效的合約。18歲以下的子女可享終生折扣或子女折扣，以較高折扣者為準。有關計劃之原保費，請聯絡我們的健康管理顧問或透過保柏網站的網上報價器查詢。

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

#### About Levy payment

Starting from 1 January 2018, insurance subscription payment is subject to the Hong Kong 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).

#### 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)。

In the event of any discrepancy in respect of meaning between the Chinese version and the English version, the English version shall prevail. All terms and conditions are subject to the Contract.

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。