

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

---

會員指引  
**Membership Guide**

# Bupa – Your choice for health protection

## Bupa Hong Kong

- Health insurance specialist since 1976
- Insuring more than 400,000 individuals and 3,200 companies in Hong Kong
- Quality health insurance provider for Hong Kong's civil servants for more than 20 years
- Offers a wide choice of doctors with one of the largest provider networks in Hong Kong

## Quality HealthCare

- One of Hong Kong's largest private clinic networks and has been part of Bupa since October 2013
- Services span across diagnostics, primary healthcare and day-care specialties
- Network of over 1,500 provider service points in the city including over 100 Quality HealthCare multi-specialty medical centres and affiliated clinics offering western medicine, traditional Chinese medicine, diagnostics & imaging, dental, physiotherapy, psychological and wellness services

## 保柏 — 您的健康保障選擇

### 保柏香港

- 於 1976 年成立，為本港醫療保險專家
- 在香港為超過 40 萬名客戶及 3,200 間公司提供保障
- 為本港公務員提供優質醫療保障逾 20 年
- 透過擁有龐大的本港醫療網絡，給您更多醫生選擇

### 卓健醫療

- 香港領先的私營醫療中心聯網服務商之一，於 2013 年 10 月正式加入保柏
- 服務涵蓋診斷、基層保健及日症專科服務
- 透過逾 1,500 個服務點，包括旗下超過 100 間多項專科設施齊備的卓健醫療中心及多間聯營診所，提供西醫、中醫、診斷及造影、牙科、物理治療、精神健康及保健等服務

## Welcome Message

Welcome to Bupa Empower SME Health Insurance Scheme. We are proud to have the opportunity to build a close, long-term relationship with you. Bupa has developed this scheme to help your employer take care of your health and care needs.

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

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

## 歡迎

歡迎您加入保柏的「僱健康中小企醫療保障計劃」。能藉此機會和您建立密切和長久的關係，絕對是我們的榮幸！您的僱主為照顧您的個人醫療所需，誠意為您提供由保柏承保之醫療保險計劃。

正因為您是僱主的重要資產，此計劃所提供之保障務求能令您安枕無憂。本會員指引詳列了此計劃的保障，懇請您細心閱讀。

如果您對本計劃或您的會籍有任何疑問，歡迎隨時向您的人力資源部查詢或致電**保柏客戶服務專線**。

<b>Premium Service Booking Hotline</b>	
<b>Service hours: 9am – 6pm Monday to Friday (except public holidays)</b>	
<b>Premium Service Booking Hotline:</b>	(852) 2517 5515
<p>Looking for premium network service centres for specialist treatment, diagnostic imaging and laboratory tests, day surgery (e.g., endoscopy) or even dental treatment (if applicable)? Simply call our Premium Service Booking Hotline and our Bupa Medical Centres and Bupa Dental Centres are at your service.</p> <p><b>One-stop dedicated services:</b></p> <ul style="list-style-type: none"> <li>○ Check your scheme’s network eligibility</li> <li>○ Provide Bupa medical and dental centre choices with various specialities available and hassle-free pre-authorisation and/or pay and claim experience</li> <li>○ Assist in making appointments with the centres, so you can have access to comfortable, well-equipped premium facilities</li> </ul>	

<b>Bupa’s Customer Care helpdesk</b>	
<b>24-hour Customer Care helpdesk:</b>	(852) 2517 5388
<p><b>Office hours</b>            9am to 7pm Monday to Friday (except public holidays)            We are pleased to answer all your enquiries.</p> <p><b>Outside office hours</b>            We are happy to answer the following enquiries:</p> <ul style="list-style-type: none"> <li>○ information of network service providers</li> <li>○ information of benefit entitlement</li> <li>○ claims and other policy administration procedures</li> <li>○ claim forms</li> </ul>	
<b>Fax:</b>	(852) 3973 6970
<b>E-mail:</b>	customer@bupa.com.hk
<b>Website:</b>	www.bupa.com.hk

<b>Bupa Pre-authorisation</b>	
<b>Service hours: 9 am – 7 pm, Monday to Friday (except public holidays)</b>	
<b>Email:</b>	preauth@bupa.com.hk
<b>Fax:</b>	(852) 3973 6966

### 尊貴服務預約熱線

服務時間：上午 9 時至下午 6 時，星期一至星期五（公眾假期除外）

尊貴服務預約熱線：

(852) 2517 5515

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

一站式的貼心服務：

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

### 保柏客戶服務專線

24 小時客戶服務專線：

(852) 2517 5388

#### 辦公時間

星期一至五（公眾假期除外）上午 9 時至下午 7 時

我們樂意解答您的所有查詢。

#### 辦公時間以外

我們為您解答以下查詢：

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

傳真：

(852) 3973 6970

電郵：

customercare@bupa.com.hk

網站：

www.bupa.com.hk

### 保柏初步保障審核服務

服務時間：上午 9 時至下午 7 時，星期一至星期五（公眾假期除外）

電郵：

preauth@bupa.com.hk

傳真：

(852) 3973 6966

## Web and mobile services

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

- Check your membership details
- Submit claims online (if applicable) #
- Access your eMedical Card (if applicable) #
- View membership documents
- Check your claims status and any outstanding shortfalls
- View claims statements and shortfall invoices (if applicable)
- View clinical benefit usage (if applicable)
- Download claim forms and other frequently used forms
- Download your List of HealthNet/QualityNet Service Providers and the MedPass Network Hospital List
- Search and get information for HealthNet/QualityNet Service Providers and night clinics

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

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

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

You can also download the myBupa free mobile app:



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

## Claims notification service

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

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

## Claims service pledge\*

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

\*Applicable to Non-HealthNet/Non-QualityNet Benefit

## 網上服務及手機應用程式

**myBupa** 讓您輕易地使用此保障計劃的服務，您可：

- 查閱會籍資料
- 網上遞交索償（如適用）#
- 使用電子醫療卡（如適用）#
- 瀏覽會籍文件
- 查閱賠償進度及所欠差額
- 查閱賠償單及差額通知書（如適用）
- 查閱門診保障使用量（如適用）
- 下載索償表格及其他常用表格
- 下載《網絡服務供應商目錄 / 卓新網絡服務供應商目錄》及《任中橫網絡醫院名單》
- 搜尋及即時獲得網絡醫療服務供應商 / 卓新網絡醫療服務供應商及夜間診所的資料

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

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

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

**myBupa** 亦提供免費手機應用程式，立即掃描 QR 碼免費下載。



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

## 賠償電子通知服務

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

您可致電保柏客戶服務專線 2517 5388 登記短訊通知服務。

## 賠償服務承諾\*

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

\*適用於非網絡保障 / 非卓新網絡保障

# Table of Contents

## 目錄

	Page 頁
1. Eligibility.....	8
參加資格.....	37
2. Your benefits and medical card.....	8
您的保障及醫療卡.....	37
3. Claims tips.....	9
索償貼士.....	38
4. Claims procedures.....	12
索償步驟.....	41
5. Frequently asked questions.....	20
常見問題 .....	49
6. What's not covered.....	24
不受保障項目.....	52
7. Glossary of terms.....	26
特別詞彙釋義.....	54
8. Health Coaching Services.....	31
健康支援服務.....	58
9. Free Bupa Worldwide Assistance Programme.....	32
免費保柏國際援助計劃.....	59
10. Your personal data .....	36
您的個人資料.....	63

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

此會員指引只供參考之用。中、英文版如有任何差別，概以英文版為準。如此會員指引與「保柏僱健康中小企醫療保障計劃」之合約內容有任何差別，概以合約為準。



## 1) Eligibility

All full-time permanent employees aged below 65 years (renewal up to age 69) are eligible to join the Scheme.

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

- o your lawful spouse aged below 65 years (renewal up to age 69); and
- o your unmarried child(ren) aged from 15 days to 17 years (or aged from 18 years to 22 years if they are full-time students with valid proof accepted by Bupa)

## 2) Your benefits and medical card

A Bupa HealthNet (BHN) Card/Bupa QualityNet (BQN) Card has been issued to you (depending on your plan level). With this card you can enjoy a hassle-free claim process when using our medical network.

**You should refer to the Schedule of Benefits for the summary of your coverage and benefit limits, then read the relevant sections in this membership guide for the claim procedures.** For Contract terms and conditions, please contact your Human Resources Department.

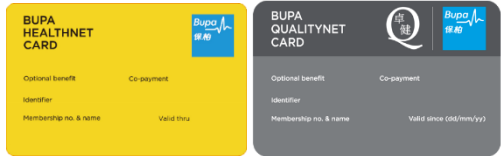
This scheme offers both **HealthNet/QualityNet Benefit** and **Non-HealthNet/Non-QualityNet Benefit** (if applicable) to give you access to medical services with optimum flexibility, convenience and cost-effectiveness.

- (a) **HealthNet/QualityNet Benefit** provides you with comprehensive medical network facilities and also full cover for your eligible medical expenses with the use of your medical card.
- (b) **Non-HealthNet/Non-QualityNet Benefit** gives you the freedom in choosing your preferred Hospital and doctor. What you need to do is pay all medical expenses yourself first and then follow our simple claim procedures (see section 4) for reimbursement. After our claim assessment, we will reimburse you for the eligible medical expenses.

Please note that if your plan doesn't offer the Non-QualityNet Benefit, only eligible expenses incurred within Bupa's QualityNet Service Providers will be covered.

## 2.1) Use of your BHN/BQN Card

- Your BHN/BQN Card can be used to settle payment for the following services if specified in the Schedule of Benefits. Please refer to the “Claims tips” and “Claims procedure” sections for details.



- in-patient treatments at the 7 private Hospitals in Hong Kong as listed in the List of HealthNet/QualityNet Service Providers;
- designated clinical procedures performed by a QualityNet Registered Medical Practitioner and carried out at a clinic or day case centre as listed in the List of QualityNet Service Providers;
- clinical consultations and laboratory tests carried out by HealthNet/QualityNet Service Providers in Hong Kong and Macau as listed in the List of HealthNet/QualityNet Service Providers (payable under HealthNet/QualityNet Benefit);
- video consultation services with eligible BHN/BQN Card if you have HealthNet/QualityNet Clinical Benefit. Consult our designated HealthNet/QualityNet General Practitioners through a video call comfortably and safely. Only eligible medical expenses are covered and all medication delivery charges shall not be payable. Visit [www.bupa.com.hk/vc](http://www.bupa.com.hk/vc) for details.

## 2.2) Loss and return of your BHN/BQN Card

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

## 3) Claims tips

No matter if you choose HealthNet/QualityNet or Non-HealthNet/Non-QualityNet medical service providers, please read this section carefully. Details of the claim procedures for the following medical benefits (if applicable to your plan) are included in later sections.

- Hospital and Surgical Benefit, Supplementary Major Medical Benefit (“SMM Benefit”) and Special Hospital Cash Benefit
- Out-patient Procedure Benefit
- Clinical Benefit
- Maternity Benefit
- Dental Benefit

You should read the claim procedures for your entitled benefits as shown in your Schedule of Benefits.

### 3.1) Treatments that require a referral letter

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

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

\* 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.

### 3.2) If you use your BHN/BQN Card, remember to get pre-authorisation

To enjoy full cover under HealthNet/QualityNet Benefit, you need to obtain pre-authorisation confirmation from Bupa for the following situations:

- Hospital Confinement
- Clinical Operation or Day Case exceeding HK\$4,000
- Diagnostic imaging or laboratory tests exceeding HK\$2,000
- Any treatment by a Specialist referred by a HealthNet/QualityNet Registered Medical Practitioner (RMP) provided that the relevant speciality is not available within HealthNet/QualityNet

#### **Pre-authorisation procedures:**

1. Please ask the HealthNet/QualityNet RMP to fill in a Pre-authorisation Form and fax it to us with your signature;
2. Bupa will send the result to the HealthNet/QualityNet RMP by fax;
3. You need to check and sign the pre-authorisation confirmation and keep the member's copy.

Please note that your entitlement to benefits will be subject to our final assessment after receiving the claim form, receipts and relevant medical documents. It should take around 2 business days to complete the pre-authorisation once all necessary information is received with a signed application form.

**Note:**

- If pre-authorisation is required outside of our office hours, subsequent authorisation can be arranged on the next working day after admission to Hospital or treatment, provided that all other requirements are satisfied (e.g. treatment must be attended and referred by a HealthNet/QualityNet RMP).
- If pre-authorisation is not obtained as required, eligible medical expenses will be paid under Non-HealthNet/Non-QualityNet Benefit, or shall not be payable if Non-HealthNet/Non-QualityNet is not available.

### **3.3) Shortfall**

In case the expenses incurred via using the BHN/BQN Card exceed the benefit limits or the expenses are not covered under the Scheme, Bupa will issue a Shortfall Invoice to you and you have to settle the shortfall amount to Bupa within 14 days after receipt of the shortfall invoice.

### **3.4) Making a claim**

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

If you have paid the medical bills yourself, please retain all original receipts and send them to Bupa together with the referral letter (if required) and a completed claim form **within 90 days** after the treatment or discharge from Hospital. Otherwise your claim may be declined.

You can obtain the claim forms through your Human Resources Department, Bupa's website at [www.bupa.com.hk](http://www.bupa.com.hk) or from myBupa ("Bupa Hospital & Day Surgery Claim Form - For Bupa Empower SME Health Insurance Scheme only" and "Bupa Clinical Claim Form"). You can also submit your claims online by using myBupa's e-claims service. If you use myBupa's e-claims service, please upload the image of the original documents and keep them for 6 months from the date of claim submission. If you fail to provide the original documents in case we ask for them, your claim submission via myBupa's e-claims service may be affected.

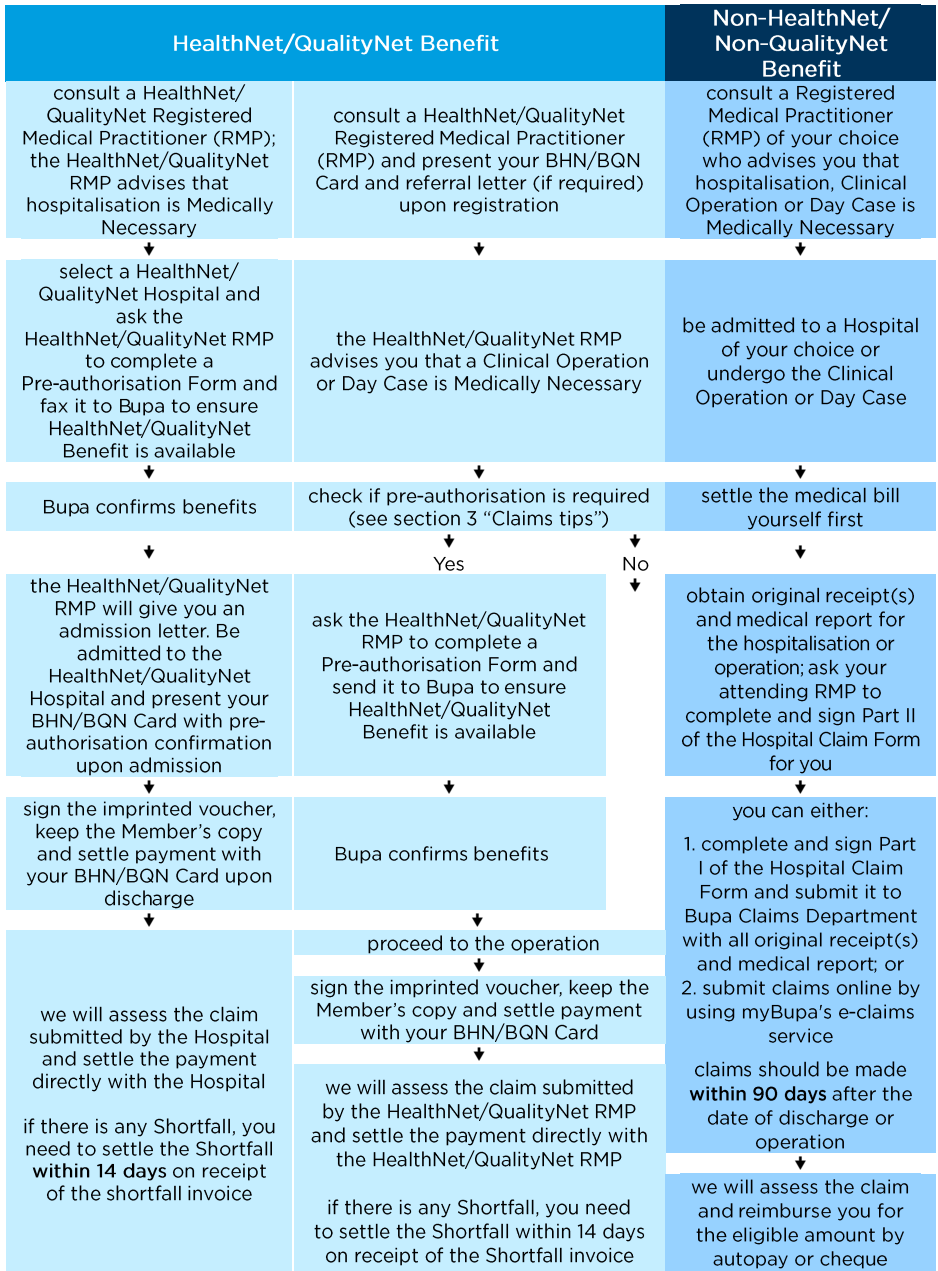
Remember that all bills and receipts must include:

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

Once your claim is approved, reimbursement will be made by autopay or cheque in Hong Kong dollars. If you have any queries about the claim settlement, please contact our **Customer Care helpdesk at (852) 2517 5388**.

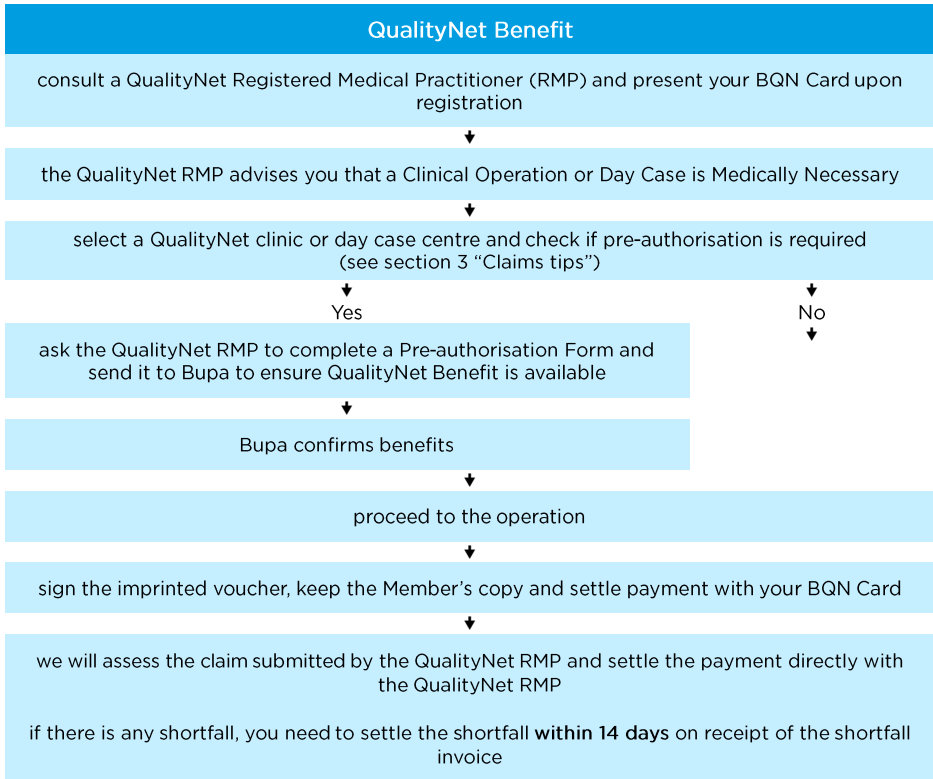
## 4) Claims procedures

### Claiming Hospital and Surgical Benefit, SMM Benefit and Special Hospital Cash Benefit\*



\* Special Hospital Cash Benefit (if applicable) will be payable if your Hospital Confinement is considered eligible.

## Claiming Out-patient Procedure Benefit



## Claiming Clinical Benefit – General Practitioner (GP) or Registered Chinese Medicine Practitioner

HealthNet/QualityNet Benefit	Non-HealthNet Benefit
consult a GP or a Registered Chinese Medicine Practitioner within HealthNet/QualityNet	consult a GP or a Registered Chinese Medicine Practitioner of your choice
↓	↓
present your BHN/BQN Card upon registration	proceed to the consultation and receive treatment
↓	↓
proceed to the consultation and receive treatment	settle the medical bill yourself first
↓	↓
sign the imprinted voucher, keep the Member's copy and settle expenses with your BHN/BQN Card after co-payment (if any)	obtain original receipt(s) for the consultation and treatment
↓	↓
<p>we will assess the claim submitted by the clinic and settle the payment directly with the clinic</p> <p>if there is any shortfall, you need to settle the shortfall <b>within 14 days</b> on receipt of the shortfall invoice</p>	<p>you can either:</p> <ol style="list-style-type: none"> <li>1. complete and sign the Clinical Claim Form and submit it with all original receipt(s) to Bupa Claims Department; or</li> <li>2. submit claims online by using myBupa's e-claims service</li> </ol> <p>claims should be made <b>within 90 days</b> after the date of treatment</p>
	↓
	we will assess the claim and reimburse you for the eligible amount by autopay or cheque

## Claiming Clinical Benefit – Specialist (SP) / Physiotherapist (PT) / Chiropractor (CP) / Psychological Counselling

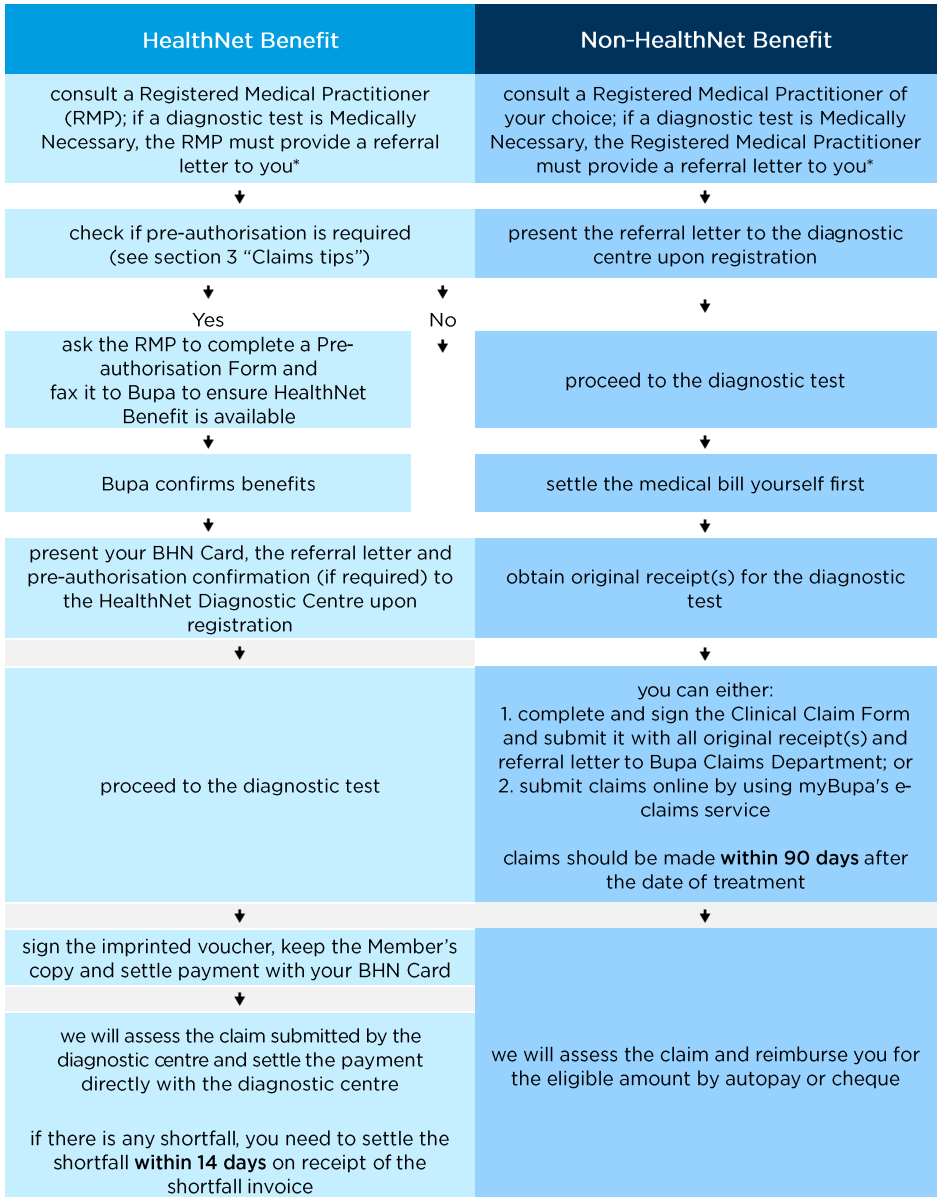
HealthNet/QualityNet Benefit*	Non-HealthNet Benefit
consult a GP; if Specialist consultation or physiotherapy is Medically Necessary, the GP must provide a referral letter to you** or consult a Psychiatrist; if psychological counselling is Medically Necessary, the Psychiatrist must provide a referral letter to you**	consult a GP of your choice; if Specialist consultation, physiotherapy or chiropractic treatment is Medically Necessary, the GP must provide a referral letter to you** or consult a Psychiatrist of your choice; if psychological counselling is Medically Necessary, the Psychiatrist must provide a referral letter to you**
↓	↓
present your BHN/BQN Card and referral letter (if required) to the HealthNet/QualityNet SP / PT / Psychologist upon registration	present the referral letter (if required) to the SP / PT / CP / Psychologist upon registration
↓	↓
proceed to the consultation and receive treatment	proceed to the consultation and receive treatment
↓	↓
sign the imprinted voucher, keep the Member's copy, and settle expenses by your BHN/BQN Card after co-payment (if any)	settle the medical bill yourself first
↓	↓
we will assess the claim submitted by the clinic and settle the payment directly with the clinic  if there is any shortfall, you need to settle the shortfall <b>within 14 days</b> on receipt of the shortfall invoice	obtain original receipt(s) for the consultation and treatment
	↓
	you can either: 1. complete and sign the Clinical Claim Form and submit it with all original receipt(s) and referral letter (if required) to Bupa Claims Department; or 2. submit claims online by using myBupa's e-claims service  claims should be made <b>within 90 days</b> after the date of treatment
↓	↓
	we will assess the claim and reimburse you for the eligible amount by autopay or cheque

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

\*\* For both HealthNet/QualityNet and Non-HealthNet Benefit, referral letter is not required for SP consultation in the following specialties: dermatology, family medicine, gynaecology, ophthalmology, orthopaedics, otolaryngology, paediatric surgery, paediatrics or psychiatry.



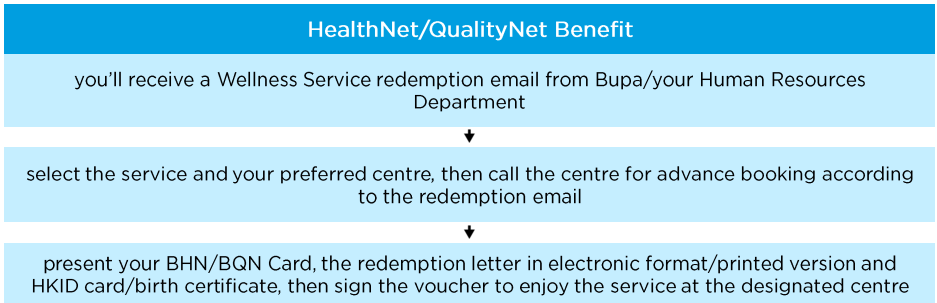
## Claiming Clinical Benefit – Diagnostic Imaging and Laboratory Tests



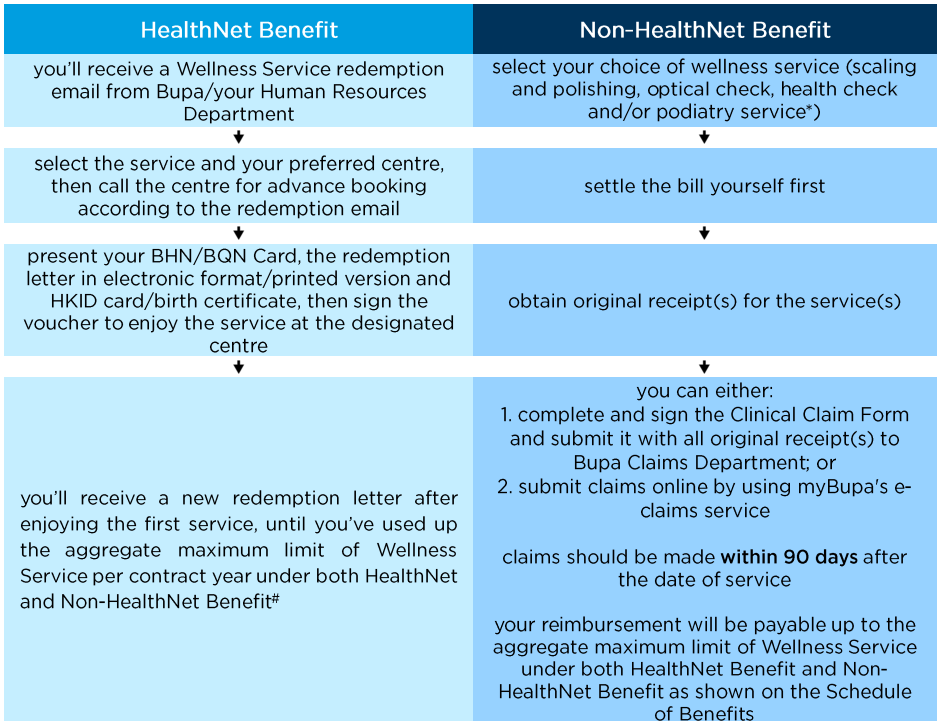
\* Bupa also accepts written recommendation from a Registered Chinese Medicine Practitioner or Chiropractor for X-ray only and laboratory tests. However, some diagnostic centres may not accept referrals from a Registered Chinese Medicine Practitioner and/or Chiropractor for certain X-ray and laboratory tests. If you have any queries, please contact the centres directly.

## Claiming Clinical Benefit – Wellness Service

If you have Clinical Benefit Plan C2, C3, C4 or C5:



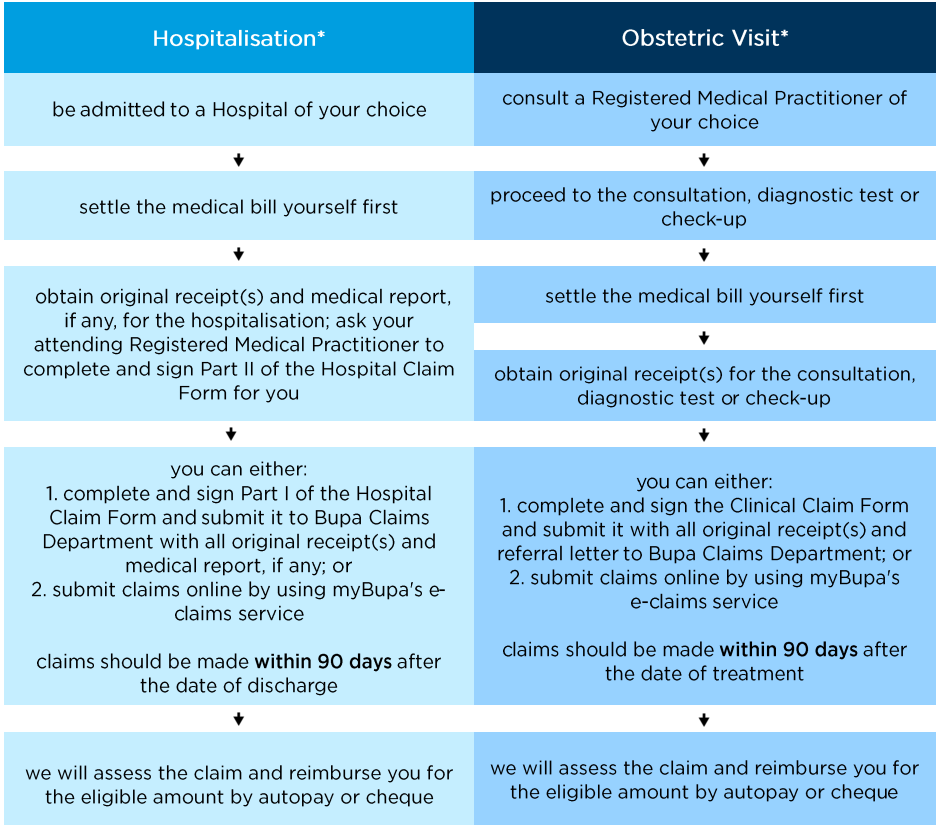
If you have Clinical Benefit Plan C1, you'll have an aggregate maximum limit for Wellness Service as shown in the Schedule of Benefits under both HealthNet Benefit and Non-HealthNet Benefit:



\* Visit to the Podiatrist requires written referral from a Registered Medical Practitioner.

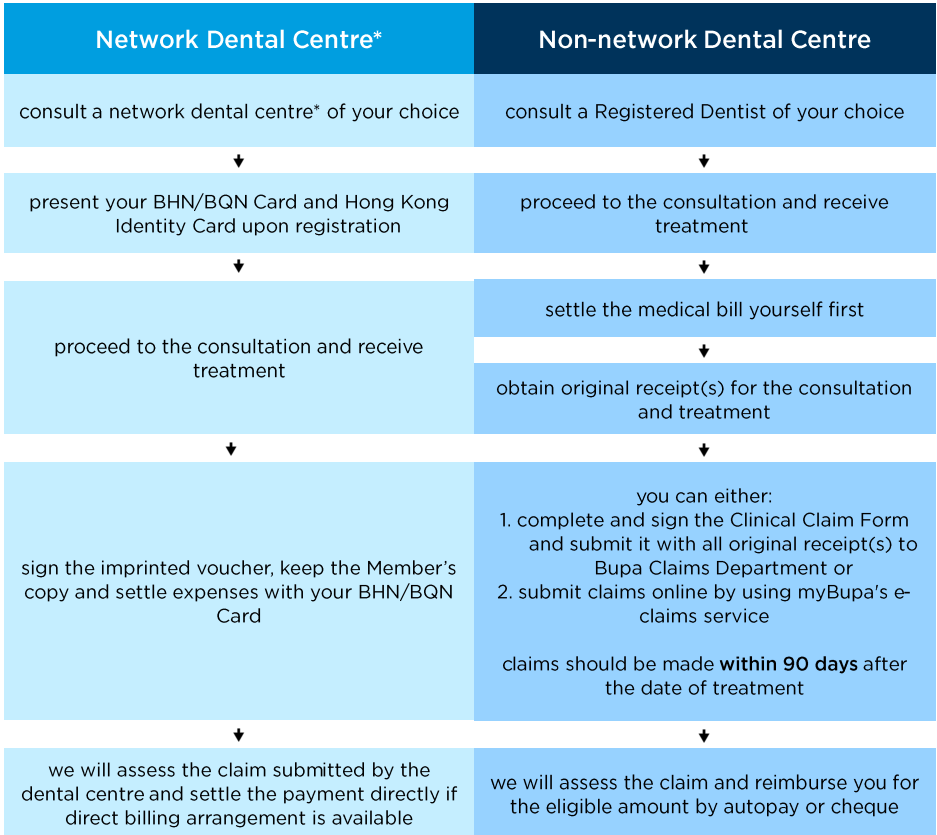
# You can check the remaining balance of Wellness service on myBupa.

## Claiming Maternity Benefit



\* Medical expenses related to a pregnancy can be reimbursed 9 months after your Maternity Benefit takes effect provided that the conception occurs after the commencement date of this benefit. Please submit your completed claim form and all original receipts within 90 days after you give birth. In the event of early termination of pregnancy, you can submit your claims within 90 days after such termination.

## Claiming Dental Benefit



\* 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 myBupa to view the latest location list. This list is subject to change from time to time. Please contact the Network Dental Centres to understand their consultation hours.

## 5) Frequently asked questions

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

Please refer to your Schedule of Benefits to check the area of cover under each benefit.

In general, our Hospital and Surgical Benefit provides worldwide coverage and therefore all your eligible medical expenses will be covered wherever you are. Your medical bills in any currency other than Hong Kong dollars will be converted to Hong Kong dollars on the basis of the quoted exchange rate in effect on the date of treatment or date of Hospital discharge.

### **About Hospital and Surgical Benefit, Supplementary Major Medical Benefit (if applicable)**

2. I'm entitled to the Hospital and Surgical Benefit. If I have undergone a minor surgery in the day case unit of a Hospital or a clinic without hospitalisation, will I still be covered?

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

3. How do I use the Supplementary Major Medical Benefit of this scheme (if applicable)?

If you are hospitalised or have undergone a Day Case or Clinical Operation in Hong Kong, however, your benefits under Hospital and Surgical Benefit (items A1 – A9) are exhausted, we will reimburse you for 80% of your eligible medical expenses incurred in excess of the benefits payable under items A1 – A9 of Hospital and Surgical Benefit (either exceeding the maximum limit or maximum number of days) up to the Maximum Limit of the Supplementary Major Medical Benefit.

This benefit also applies to hospitalisation or surgery that occurred overseas provided that it is certified by a Registered Medical Practitioner and results from a medical Emergency. Please be reminded that this benefit is not payable for hospitalisation in a suite/VIP/deluxe room, and an adjustment factor will be applied to room upgrade (see Schedule of Benefits). However, the adjustment factors and room class restrictions 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.

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

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

5. How can I get the Second Claims Incentive?

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

You don't need to use a specific claim form to get the Second Claims Incentive. When

you file a hospital claim for reimbursement, remember to tick the checkbox and provide details under Part I 3a "Have you filed this claim with another Bupa contract or any other insurer / organisation?". Then submit together with the certified true copy of receipts and claims statement advice from the insurer. Bupa will consider if your Hospital Confinement is eligible for the Second Claims Incentive and pay the benefit accordingly.

### **About Clinical Benefit (if applicable)**

6. Will this scheme reimburse me for the cost of medication without consultation?

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

7. What if I haven't got a referral letter for an out-patient Specialist visit?

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

8. What if I haven't got a referral letter for receiving out-patient physiotherapy or chiropractic treatment?

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

9. What kind of documents are required in order to submit a claim for Chinese Herbalist Benefit or Chinese Bonesetter Benefit?

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

### **About other optional benefits (if applicable)**

10. How do I use the Maternity Benefit of this scheme?

This benefit covers the medical expenses incurred during Hospital Confinement due to pregnancy, the charges for consultation, prenatal and postnatal check-up, diagnostic tests and prescribed Western Medication incurred in any obstetric visit to a Registered Medical Practitioner for prenatal and postnatal care and the expenses incurred for newborn baby care during Hospital Confinement.

We will pay the Normal Delivery Benefit or Caesarean Section Benefit according to your final delivery option. If the pregnancy is terminated due to miscarriage, abortion advised by a Registered Medical Practitioner or complications of pregnancy, Miscarriage Benefit shall be payable.

This benefit is payable provided that the conception occurs after the commencement

date of this benefit and no benefit shall be payable during the waiting period of first 9 months. In the event of premature termination of pregnancy or premature birth, it is payable if such pregnancy commences after you are covered by this benefit. 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 are not covered. 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. Please refer to the Schedule of Benefits for the Maximum Limit per pregnancy for Normal Delivery Benefit, Caesarean Section Benefit and Miscarriage Benefit.

Your BHN/BQN Card cannot be used to settle the medical expenses for any hospitalisation or clinical visit due to pregnancy.

11. How can I enjoy the Dental Benefit?

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

Or, you can visit a non-network dentist of your choice. Then you'll have to pay the expenses first and file a claim afterwards. Eligible treatment will be covered up to the annual benefit limits under non-network dental centre benefit.

12. Do I need to file a claim for Special Hospital Cash Benefit?

No, you don't need to file a specific claim for Special Hospital Cash Benefit. When you use your BHN/BQN Card for cashless hospitalisation or file a hospital claim for reimbursement, Bupa will consider if your Hospital Confinement is eligible for the Special Hospital Cash Benefit and pay the benefit accordingly.

Please note that Special Hospital Cash Benefit is payable for Hospital Confinement due to an Accident, Cancer and Serious Infectious Disease only, with certain eligibility requirements. For details, please refer to the Schedule of Benefits.

## Others

13. Can I continue my cover with Bupa if I leave my company?

Upon your retirement or termination of employment with the company, you have the option to join Bupa Transfer Care Health Insurance Scheme at the same room level under Hospital and Surgical Benefit as your entitled room level under your current scheme. All eligible illnesses that commenced during your group membership will be covered for life, without medical underwriting, under your Bupa Transfer Care scheme. Please note the following for a smooth application:

- your group membership with Hospital and Surgical Benefit must be active for six or more consecutive months prior to your membership termination date;
- if your room level under Hospital and Surgical Benefit has been upgraded within six months prior to your membership termination date, you will be eligible to join Bupa

Transfer Care at the same room level as your entitled room level prior to the upgrade under this Scheme;

- you have completed and returned the Bupa Transfer Care scheme application form to Bupa before your last day of employment;
- your company has notified Bupa of your termination of the group membership before you submit your application;
- such Bupa group health insurance scheme with Hospital and Surgical Benefit is still in-force on the effective date of your Bupa Transfer Care scheme;
- Bupa Transfer Care will be effective on the 1<sup>st</sup> day of the month immediately following the last date of the group membership if it is the last day of a month. Otherwise, your cover will be effective on the 1<sup>st</sup> day of the same month when your group membership is terminated; and
- medical conditions specified in Bupa Transfer Care's General Exclusions are not covered regardless of whether such medical conditions are covered under your Bupa group scheme or not.

If you are interested in the above, please refer to the brochure of Bupa Transfer Care scheme or contact Bupa's Customer Care helpdesk.



## 6) What's not covered

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

1. Pre-existing conditions, unless the number of employees enrolled under the contract is not less than 10 and the member has been insured continuously for not less than 12 months from the coverage commencement date.
2. Treatment, medical service, medication or investigation which is not medically necessary.
3. Any illness or bodily injury for which compensation is payable under any laws or regulations or any other insurance policy or any other sources except to the extent that such charges are not reimbursed by any such compensation, insurance policy or sources.
4. Any charges for accommodation, nursing and services received in health hydros, nature cure clinics, convalescent home, rest home, home for the aged or similar establishments.
5. Any charges in respect of surgical or non-surgical cosmetic treatment (unless necessitated by injury caused by an accident and the member receives the medically necessary treatments or related services within 1 year of the accident), Hair Mineral Analysis (HMA), health supplements or body weight control (unless approved by Bupa).
6. Any charges in respect of preventive measures, including but not limited to routine blood tests, general check-ups, vaccinations or inoculations, hearing tests, eye refraction including but not limited to routine eye tests or any cost of fitting of spectacles or lens (unless it is payable under Wellness Service Benefit under Clinical Benefit).
7. Congenital conditions, developmental conditions or hereditary conditions.
8. Treatment that commenced during the first 5 years from the coverage commencement date and which in any way arises from, is attributable to, or is consequential upon Human Immunodeficiency Virus Infection.
9. Sexually transmitted (venereal) diseases or their sequel.
10. Treatment relating to pregnancy, including diagnostic tests for pregnancy or resulting childbirth, abortion or miscarriage (unless it is payable under Maternity Benefit); birth control, sterilisation or sex reassignment of either sex; infertility including in-vitro fertilisation or any other artificial method of inducing pregnancy; or sexual dysfunction including but not limited to impotence, erectile dysfunction and pre-mature ejaculation, regardless of cause.
11. Misuse or overdose of drugs or being under the influence of alcohol, self-inflicted injuries or attempted suicide.
12. Treatment relating to any illness or bodily injury resulting from participation in criminal activities.
13. Alternative treatment including but not limited to Chinese Medicines treatment, acupuncture, acupressure, Tui Na, hypnotism, rolfing, massage therapy and

aromatherapy (unless it is payable under Chinese Herbalist Benefit or Chinese Bonesetter Benefit under Clinical Benefit).

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

## 7) Glossary of terms

Capitalised words are either proper nouns or words with specific meaning as defined in the Contract of Bupa Empower SME Health Insurance Scheme. Some important definitions are set out below.

“Accident”	means an external, sudden, violent and unexpected event of visible nature which shall, independently of any other cause, be the sole cause of bodily injury.
“Cancer”	means the presence of a malignant tumour that is characterised by progressive, uncontrolled growth of malignant cells and invasion and destruction of normal and surrounding tissue. Cancer must be positively diagnosed with histopathological confirmation. This also includes leukaemia, lymphoma or sarcoma. The following are excluded: (a) Tumours showing the malignant changes of carcinoma-in-situ, cervical dysplasia, CIN-1, CIN-2, CIN-3 or which are histologically described as pre-malignant; (b) All skin cancers other than malignant Melanomas; (c) Prostate cancers which are histologically described as TNM Classification T1(a) or T1(b) or are of another equivalent or lesser classification; (d) Chronic Lymphocytic Leukaemia less than RAI Stage III; (e) Thyroid cancers which are histologically described as TNM classification T1NOMO or a lesser classification.
“Chiropractor”	means a person (other than the Member himself, his relatives, families and business partners unless approved by Bupa) legally qualified in Hong Kong or any other place where medical expenses are incurred to render chiropractic service through manipulation of joints and has qualifications at least equivalent to those of a chiropractor registered pursuant to the Chiropractors Registration Ordinance of Hong Kong.
“Clinical Operation”	means a surgical procedure which may effectively be undertaken at a clinic by a Registered Medical Practitioner where a stay in Hospital is not Medically Necessary provided that (i) the surgical procedure falls under Bupa’s Schedule of Surgical Operations and is classified as a Clinical Operation therein or (ii) the surgical procedure is specified under “Description of Benefits – Out-patient Procedure Benefit”.
“Congenital Conditions”	means medical abnormalities existing at the time of birth, regardless of whether they are known or unknown to the Member. They shall include (but not to the exclusion of others which may medically be regarded as congenital conditions), strabismus (squint), hydrocephalus, undescended testicle, Meckel’s diverticulum, flat foot, heart septal defect and indirect inguinal hernias.
“Day Case”	means a surgical procedure, Non-surgical Cancer Treatment and kidney dialysis (if applicable under this contract) which may effectively be undertaken at a clinic or day case unit of a Hospital by a Registered Medical Practitioner where a stay in Hospital is not Medically Necessary, provided that the surgical procedure falls under Bupa’s Schedule of Surgical Operations and is classified as Day Case therein or (ii) the surgical procedure is specified under “Description of Benefits – Out-patient Procedure Benefit”.

“Developmental Conditions”	means abnormal development compared to what is expected at the given age level or stage of development. These impairments or disabilities originate before the age of eighteen (18) years, may be expected to continue indefinitely, and constitute a substantial impairment. Biological and non-biological factors are involved in these disorders. They shall include (but not to the exclusion of others which may medically be regarded as developmental conditions) language and learning disorders, autism and mental retardation.
“Disability”	means an illness or bodily injury, and shall include all disabilities arising from the same cause including any or all complications there from, except that after ninety (90) days following the latest discharge from Hospital or the last consultation during which no treatment is received. Any subsequent disability from the same cause shall be considered as a separate disability.
“Emergency”	means unplanned Hospital Confinement and condition that is acute in nature and wherein the initial sign or symptom, and the consultation or treatment for this condition cannot be and are not separated by more than forty-eight (48) hours.
“General Practitioner”	means a Registered Medical Practitioner who is registered under the General Register of the Medical Council of Hong Kong or a person with at least an equivalent qualification to practise in the place where medical expenses are incurred.
“Hereditary Conditions”	means medical conditions genetically transmitted from parent to offspring.
“Hospital”	means any establishment recognised, constituted and registered as a hospital under the laws of the territory in which that establishment is situated to provide medical services for the sick, the injured or those who require medical treatment, and which has government approved facilities for diagnosis, major surgery and twenty-four (24) hours a day nursing services by Qualified Nurses and is under the regular care and attendance of Registered Medical Practitioners. “Hospital” does not include any establishment or that portion of any establishment which is operated as a convalescent or nursing home, rest home, home for the aged, or any establishment for rehabilitation of alcoholics or drug addicts, or any similar purpose.
“Hospital Confinement”	means confinement in a Hospital as an in-patient for western medicine and surgical services as a result of a Medically Necessary condition and recommended by a Registered Medical Practitioner. For the purpose of this Contract, the Member must stay in the Hospital for the entire period of confinement and room and board charges must be incurred.
“Medically Necessary”	means the necessity to have a treatment, medical service or medication which is: <ul style="list-style-type: none"> <li>a) consistent with the diagnosis and customary medical treatment for the condition at a Normal and Customary charge;</li> <li>b) in accordance with standards of good and prudent medical practice;</li> <li>c) necessary for such a diagnosis or treatment;</li> <li>d) not furnished primarily for the convenience of the Member, Registered Medical Practitioner, Registered Chinese Medicine</li> </ul>

- Practitioner, Chiropractor, Physiotherapist, Qualified Nurse, Anaesthetist, Registered Dentist, Registered Optometrist, Psychiatrist or any other medical service providers;
- e) furnished at the most appropriate level which can be safely and effectively provided to the Member; and
  - f) with respect to Hospital Confinement, not furnished primarily for diagnostic scanning purpose, imaging examination or physical therapy.

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

- I. standards that are based on clinically proven evidence in appropriately reviewed, independent medical journals;
- II. relevant specialty body recommendations; and/or
- III. the views of specialists practising in the relevant clinical area.

“Member”	means an Employee and his Dependants who are covered under the Contract.
“Network Dental Centre”	means the network of dental service providers appointed by Bupa to provide the covered dental services items as specified under the Schedule of Benefits. The particulars of these dental service providers are published by Bupa in either print or digital format and shall be amended from time to time.
“Non-surgical Cancer Treatment”	means cancer treatment for chemotherapy, radiotherapy, targeted therapy, immunotherapy and hormonal therapy.
“Normal and Customary”	in relation to fees, means a sum not exceeding a reasonable average of the fees charged under similar conditions by persons of equivalent experience and professional status in the area in which the service was provided; and in relation to material or services, means a sum not exceeding a reasonable average of the charges for similar material or services in equivalent circumstances of quality and economic consideration in the same area as that in which any such material or services were obtained.
“Overall Annual Limit”	means the aggregate sum of Benefits as shown in the Schedule of Benefits that a Member is entitled to receive during the Contract Year under “Description of Benefits – Hospital and Surgical Benefit”.
“Physiotherapist”	means a person (other than the Member himself, his relatives, families and business partners unless approved by Bupa) who is legally authorised in Hong Kong or any other place where medical expenses are incurred to render assessment and treatment service on physical disabilities by means of remedial exercises, manual therapy and mechanical, thermal or electrical energy and has qualifications at least equivalent to those of a physiotherapist registered pursuant to the Supplementary Medical Professions Ordinance of Hong Kong.
“Podiatrist”	means a person (other than the Member himself, his relatives, family or business partners unless approved by Bupa) approved as such by Bupa or a person who is fully trained in Hong Kong or legally qualified and permitted in any other place where medical expenses are incurred to practice podiatric therapy following completion of a

degree in podiatry and has qualifications at least equivalent to those of a podiatrist registered with the International Podiatrists Association of Hong Kong or the Hong Kong Podiatrists Association.

- “Psychiatrist” means a Registered Medical Practitioner approved as such by Bupa or a Registered Medical Practitioner who is legally authorised in Hong Kong or any other place where medical expenses are incurred to render psychiatric services and has qualifications at least equivalent to those of a psychiatrist registered under the Specialist Register of the Medical Council of Hong Kong.
- “Psychologist” means a person (other than the Member himself, his relatives, family or business partners unless approved by Bupa) approved as such by Bupa or a person who is fully trained in Hong Kong or legally qualified and permitted in any other place where medical expenses are incurred to render services for emotional and behavioural disorder following completion of a degree in psychology and has qualifications at least equivalent to those of a psychologist registered with the Hong Kong Psychological Society.
- “Registered Chinese Medicine Practitioner” means a Chinese medicine practitioner (other than the Member himself, his relatives, families and business partners unless approved by Bupa) who is legally authorised in Hong Kong or any other place where medical expenses are incurred to render Chinese Medicines and has qualifications at least equivalent to those of a Chinese medicine practitioner registered pursuant to the Chinese Medicine Ordinance of Hong Kong.
- “Registered Dentist” means any person (other than the Member himself, his relatives, family or business partners unless approved by Bupa), who is legally authorised in Hong Kong or any other place where medical expenses are incurred to render dental services and has qualifications at least equivalent to those of a dentist registered pursuant to the Dentist Registration Ordinance.
- “Registered Medical Practitioner” means a General Practitioner, Specialist or any person (other than the Member himself, his relatives, family or business partners unless approved by Bupa) who is legally authorised in Hong Kong or any other place where medical expenses are incurred to render western medical and surgical services and has qualifications at least equivalent to those of a medical practitioner registered pursuant to the Medical Registration Ordinance of Hong Kong.
- “Registered Optometrist” means a person (other than the Member himself, his relatives, family or business partners unless approved by Bupa) approved as such by Bupa or a person who is fully trained in Hong Kong or legally qualified and permitted in any other place where medical expenses are incurred to render services for vision and eye care following completion of a degree in optometry and has qualifications at least equivalent to those of an optometrist registered with the Optometrists Board in Hong Kong.
- “Serious Infectious Disease” means any of the following infectious diseases due to transmission of microorganisms such as bacteria, virus, parasites or fungi, and causing adverse physical health conditions. The Serious Infectious Disease must be diagnosed by a Registered Medical Practitioner

according to internationally accepted medical diagnostic criteria and confirmed by laboratory testing or a relevant clinical inspection report acceptable to Bupa.

(a) Severe Acute Respiratory Syndrome (SARS) (SARS Cov-1)	(k) Anthrax
(b) Dengue Fever	(l) Leprosy
(c) Japanese Encephalitis	(m) Rabies (Human)
(d) Creutzfeldt-Jakob Disease (Including Variant Creutzfeldt-Jakob Disease, human form of Mad Cow Disease)	(n) Diphtheria
(e) Legionnaires' Disease	(o) Acute Poliomyelitis
(f) Amoebic Dysentery	(p) Yellow Fever
(g) Cholera	(q) Plague
(h) Malaria	(r) Scarlet Fever
(i) Measles	(s) Coronavirus Disease 2019 (COVID-19) (SARS Cov-2)
(j) Tetanus	(t) Any future Public Health Emergency of International Concern (PHEIC) according to the World Health Organization (WHO)

Bupa shall have the right to amend such list of Serious Infectious Disease from time to time.

“Specialist”

means a Registered Medical Practitioner approved as such by Bupa or a Registered Medical Practitioner who is registered in the Specialist Register of the Medical Council of Hong Kong or equivalent and qualified to practise specialist care according to the qualified specialty.

## 8) Health Coaching Services

If you have Hospital and Surgical Benefit Plan A1, A2 or Clinical Benefit Plan C1, you're entitled to use the Health Coaching Services.

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

- **24-hour Healthline**  
Our team of qualified health management professionals, supported by doctors\*, can provide 24/7 guidance on health-related queries, suggesting a suitable course of action based on your symptoms and condition.
- **Care Manager**  
In case of critical illnesses, our Care Manager can be in touch with you to follow up on claims and assist you throughout treatment and recovery, from explaining your treatment plans and overseeing costs to arranging follow-up consultations. If you are admitted to a local private hospital, our Care Manager will make a courtesy call or visit, with your consent.
- **Second Medical Opinion**  
We can arrange for you to get medical advice from a panel of medical specialists to clarify your doubts. Then you can make informed decisions about treatment.

To use this service, simply call the 24-hour Healthline shown on your Schedule of Benefits and talk to our dedicated team.

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.

Any fees for the services suggested by Health Coaching Services will be paid by the Member unless otherwise covered under the Contract.

Health Coaching Services are provided by Bupa and providers appointed by Bupa.

\* Doctors will be available during scheduled office hours to support the nurses in answering enquiries. Office hours: Mon – Fri, from 9am to 6pm (Hong Kong time), except public holidays.



## 9) Free Bupa Worldwide Assistance Programme

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

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

### 1. Medical Assistance

#### ◆ **Medical Advice Hotline**

Member may call IPA’s alarm centre for medical advice and evaluation.

#### ◆ **Doctor/Hospital Referral**

Member shall be referred to a medical specialist or medical facility for personal assessment.

#### ◆ **Essential Medication/Medical Equipment**

Upon request from a local attending Registered Medical Practitioner, IPA may, when possible and legally permissible, dispatch at the cost of the Member any essential medicine and/or medical equipment required for the Member which is not locally available.

#### ◆ **Dispatch of Registered Medical Practitioner**

In the event of an emergency which either the Member cannot be adequately assessed by telephone, or the Member cannot be moved and local treatment is unavailable, IPA may send an appropriate medical practitioner.

#### ◆ **Medical Evacuation (Unlimited Cover)\***

If the Member suffers from bodily injury or sudden illness such that IPA’s medical team and the attending Registered Medical Practitioner recommend Hospital Confinement / in-patient treatment in another medical facility where the Member can be suitably treated, IPA may arrange and pay for necessary transportation expenses for:

- (a) the transfer of the Member into the nearest medical facility more appropriately equipped for the particular medical condition, or
- (b) the direct repatriation if his/her medical condition permits such repatriation. The medical team and attending Registered Medical Practitioner may determine the necessary arrangements according to the circumstances.

#### ◆ **Repatriation after Treatment (Unlimited Cover)\***

Following the medical evacuation and if medical treatment is necessary, IPA may repatriate the Member to an appropriate medical facility in his/her country of residence by scheduled airline flight (on economy class) or any other appropriate means of transportation. Any decision on such repatriation shall be made jointly and exclusively by both the attending Registered Medical Practitioner and IPA’s alarm centre.

#### ◆ **Deposit Guaranteeing of Hospital Admission**

In case of hospitalisation duly approved by both the attending Registered Medical Practitioner and IPA’s doctor and the Member is without means of payment of the required Hospital admission deposit, IPA may guarantee or provide such payment up to HK\$39,000. The Member will be required to repay any sum advanced and the costs of this service within forty-five (45) days (without interest). IPA will require valid credit authorisation from the Member or his/her representative, prior to advancement of funds for such admission.

- ◆ **Medical Monitoring**  
IPA may monitor a Member's condition during the Member's Hospital Confinement/in-patient treatment abroad and may keep the Member's employer/family informed.
- ◆ **Compassionate Visit**  
IPA may arrange and pay for the cost of an economy round trip transportation plus accommodation expenses up to HK\$16,000 for a person chosen by the Member, or a relative if the Member is unable to choose due to his/her condition, to join him/her if the Member has been in Hospital Confinement / in-patient treatment abroad for more than seven (7) consecutive days.
- ◆ **Additional Travel and Accommodation for Travelling Companion**  
IPA may arrange and pay for the additional travel and accommodation expenses incurred by a Member's travelling companion related to an incident requiring medical evacuation of this cover provided that such expenses shall not exceed HK\$15,000 for any one Member in any one event subject to a sub-limit of HK\$2,000 per day.
- ◆ **Return of Unattended Dependant Child(ren) to Country of Residence\***  
If any of the Member's travelling dependant child(ren) up to age eighteen (18) or age twenty-three (23) if in full time education, is left unattended by reason of the Member's Hospital Confinement / in-patient treatment, IPA may organise and pay for the return of child(ren) (on economy fare basis) to the Member's country of residence.
- ◆ **Hotel Room Accommodation for Convalescence**  
IPA may arrange and pay for reasonable hotel for convalescence, up to HK\$1,950 per day for a maximum of four (4) consecutive days, immediately after Member's discharge from the Hospital, and if deemed Medically Necessary by attending Registered Medical Practitioner and IPA's doctor.
- ◆ **Transportation for Return of Member to Original Work Site\***  
Following a Member's evacuation or repatriation by IPA within a one (1) month period, IPA may upon the Member's request arrange and provide a one-way economy air transportation to return the Member to the original work location. Member assumes the responsibility for the decision of whether or not he/she returns to work. Member is responsible for obtaining any medical releases to determine his/her suitability to travel or not, or to resume work or not. The decision and the results thereof are solely the responsibility of the Member and/or the Member's attending Registered Medical Practitioner. IPA is not involved in such decisions.
- ◆ **Repatriation of Mortal Remains/Ashes (Unlimited Cover)**  
Upon the death of a Member, IPA may arrange and pay for the repatriation of the Member's body or ashes to the Member's country of residence for burial.
- ◆ **Unexpected Return to the Country of Residence\***  
In the event of the death of a Member's close relative in his/her country of residence while he/she is travelling overseas (excluding the case of immigration) that necessitates an unexpected return to his/her country of residence. IPA may arrange and pay for the cost of a scheduled airline ticket (economy class) for the return of the Member.
- ◆ **Additional Hospital Benefit after a Medical Evacuation and Repatriation back to Hong Kong (provided by Bupa)**  
If benefits payable under the Hospital and Surgical Benefit and Supplementary Major Medical Benefit are exhausted, eligible medical expenses for treatment during hospitalisation in Hong Kong immediately following the repatriation of this cover are covered up to a further HK\$120,000.

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

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

### **◆ Pre-trip and Travel Information**

Member may contact IPA to obtain the following information before starting or during his/her journey:

- Updated immunisations and vaccinations requirements and needs.
- Weather, exchange rates, banking days, language, passport and visa requirements.
- Airport taxes or customs requirements.
- Arrangement of interpreter services or children escort.
- Transmission of urgent messages for medical reasons.

### **◆ Assistance on Luggage Retrieval**

In the event of loss or misrouting of the Member's luggage by a common carrier, IPA may liaise with the relevant entities such as but not limited to airline companies, customs officials, and will organise the dispatch of such luggage, if recovered, to such place as the Member may direct.

### **◆ Emergency Rerouting Arrangements**

IPA may assist the Member in reorganising his/her flight schedule should an emergency oblige him/her to alter his/her original plan.

### **◆ Administrative Assistance for the Loss of Travel Document**

IPA may provide the Member with the necessary information regarding the formalities requested by local authority in order to obtain the replacement of such loss or stolen documents.

### **◆ MedPass Service**

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

## **3. Legal Assistance**

### **◆ Legal Referral**

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

### **◆ Legal Assistance**

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

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

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

### **◆ Advance of Bail Bonds**

IPA may deposit up to HK\$40,000 on behalf of the Member as the security required from him/her in order to guarantee the payment of the fees for the procedures in the event of the Member being detained by the relevant local authority following a road accident. No deposit shall be made by IPA for covering the civil liabilities, fines or personal indemnities to be paid by the Member and/or the release of the Member. The

deposit made by IPA shall be considered as a loan made by IPA to the Member and should be fully repaid by the Member to IPA within thirty (30) days of such advance. This advance of bail bond excludes any claim related to professional and/or criminal situations, as well as any claim arising out of the driving of any motor vehicle.

#### **4. Local Assistance – only available in Hong Kong**

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

#### **5. General Exclusions**

##### **◆ Excluded Cases**

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

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

##### **◆ Force Majeure**

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

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

## 10) Your personal data

1. Keeping your personal data confidential is very important to us. From time to time, it may be necessary for Bupa to collect personal information relating to you or your dependant including without limitation your or your dependant's name, identity card number (and copy of identity card), or passport number (and copy of passport), contact information, health and medical information and financial information ("Personal Information") in connection with the provision of health insurance services or the processing of health insurance claims (including where relevant, credit information and claims history). Failure to supply such Personal Information will result in Bupa being unable to process/provide insurance products/ services and other related services to you.
2. Any Personal Information collected or held by Bupa, whether contained in the application form or obtained in any claim processing procedure or otherwise from time to time may be used by Bupa only for the purposes of:
  - (a) processing the application and providing subsequent services;
  - (b) processing any claims analysis and/or medical or other insurance-related checks;
  - (c) provision and design of insurance products and services of Bupa;
  - (d) detecting and preventing fraud (whether or not relating to the policy issued in respect of any application or claim);
  - (e) data matching, statistics and research reasonably incidental to or related to the insurance products and/or services provided by Bupa;
  - (f) communication with you or your dependants in relation to any of the purposes set out in Part 2 of this section
  - (g) enabling an actual or proposed assignee, transferee, participant or sub-participant of all or a substantial part of Bupa's rights or business to evaluate the transaction intended to be the subject of the assignment, transfer, participation or sub-participation; and
  - (h) making disclosure to satisfy any applicable legal or regulatory requirements.
3. Such Personal Information may be transferred for the purposes as specified in Part 2 of this section to any of the following classes of transferees (within or outside Hong Kong): any company within the Bupa group of companies, any insurance intermediaries, any reinsurance companies authorised by Bupa, healthcare professionals and hospitals, your employer, any agents, contractors or third party service providers who provide administrative, telecommunications, computer, payment, data processing or storage, printing, research or other services to Bupa in connection with the operation of Bupa's business (including without limitation insurers, banks, lawyers, accountants, claims investigators, debt collection agencies, data processing companies, fraud prevention agencies, organisations that consolidate claims and underwriting information for the insurance industry, research agencies and professional advisors), any actual or proposed assignee, transferee, participant or sub-participant of all or a substantial part of Bupa's rights or business; any person to whom Bupa is under an obligation to make disclosure under the requirements of any law, rules, regulations, codes of practice or guidelines binding on Bupa including, without limitation, any applicable regulators, governmental bodies, industry recognised bodies, credit reference agencies, the Courts, and where otherwise required by law.
4. You shall have the right to access and request correction of your Personal Information held by us. You can contact the Data Protection Officer of Bupa (Asia) Limited at 18/F Berkshire House, 25 Westlands Road, Quarry Bay, Hong Kong. If you have any questions, please contact our Customer Care helpdesk at (852) 2517 5388.

## 1) 參加資格

年齡為 65 歲以下的全職僱員均可參加本計劃 ( 可續保至 69 歲 ) 。

如本計劃提供家屬保障，則您的家屬亦可參加本計劃。家屬包括：

- 您的合法配偶，年齡須為 65 歲以下 ( 可續保至 69 歲 ) ；及
- 您的合法未婚子女，年齡須介乎出生後 15 日至 17 歲 ( 或 18 歲至 22 歲若能出示獲保柏接納為有效證明之全職學生 ) 。

## 2) 您的保障及醫療卡

您已獲發一張「保柏網絡醫療卡」/「保柏卓新網絡醫療卡」( 視乎您的計劃級別而定 ) 。在醫療網絡內使用此卡，您可免除索償手續。

您應參閱保障金額表以了解您的保障範圍及賠償限額，然後按此會員指引的相關章節細閱索償步驟。如欲了解合約條款及細則，請聯絡您的人力資源部。

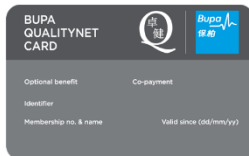
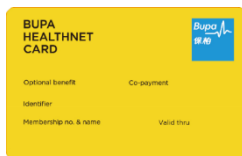
此計劃設有「網絡保障/卓新網絡保障」及「非網絡保障/非卓新網絡保障」( 如適用 )，目的是為您提供最具彈性、最方便及最高成本效益之醫療服務。

- (a) 「網絡保障/卓新網絡保障」為您提供最完善之醫療網絡設施，並全數賠償您合資格的醫療費用 ( 須使用醫療卡 ) 。
- (b) 「非網絡保障/非卓新網絡保障」讓您自由選擇您信賴之醫院及醫生。您只須先繳付所有醫療費用，然後辦理簡單之索償手續 ( 請參閱第 4 章 ) 。於賠償審批完畢後，我們會向您賠償合資格的醫療費用。

請留意，如您的計劃沒有提供「非卓新網絡保障」，您只可獲賠償於保柏卓新網絡服務供應商產生的合資格醫療費用。

### 2.1) 使用保柏網絡醫療卡/保柏卓新網絡醫療卡

- 您可使用保柏網絡醫療卡/保柏卓新網絡醫療卡繳付以下服務的費用 ( 以您的保障金額表所示的保障為準 ) 。詳情請查閱「索償貼士」及「索償步驟」章節。



- 在列於「網絡服務供應商/卓新網絡服務供應商目錄」的 7 間本港私家醫院接受的住院治療；
- 由卓新網絡註冊西醫在列於「卓新網絡服務供應商目錄」的診所或日症中心進行的指定門診手術；
- 由列於「網絡服務供應商/卓新網絡服務供應商目錄」的港澳網絡服務供應商/卓新服務供應商提供的門診診症及化驗 ( 於網絡保障/卓新網絡保障下賠償 ) ；

- 如您有網絡/卓新網絡門診保障，您可憑合資格網絡醫療卡/卓新網絡醫療卡享用視像診症服務，舒適安全地讓我們指定的網絡/卓新網絡普通科醫生為您進行視像診症。只有合資格的醫療費用方可獲得保障，任何藥物運費均不獲賠償。詳情請瀏覽 [www.bupa.com.hk/vc](http://www.bupa.com.hk/vc)。

## 2.2) 遺失及退還保柏網絡醫療卡/保柏卓新網絡醫療卡

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

## 3) 索償貼士

不論您選擇網絡/卓新網絡服務供應商，或非網絡/非卓新網絡服務供應商，請務必細閱本章節。以下保障的索償步驟（如適用於您的計劃）將詳列於往後章節。

- 住院及手術保障、附加醫療保障及特別住院現金保障
- 門診手術保障
- 門診保障
- 產科保障
- 牙科保障

請細閱您的可用保障之索償步驟（有關您的可用保障，請參閱您的保障金額表）。

### 3.1) 需有醫生轉介信之診治

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

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

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

### 3.2) 如使用您的保柏網絡醫療卡/保柏卓新網絡醫療卡，請緊記取得初步保障審核

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

- 住院
- 超過港幣 4,000 元之診所手術或日症
- 超過港幣 2,000 元之診斷影像或化驗
- 由網絡/卓新網絡註冊西醫轉介之專科治療，但該專科未列於網絡/卓新網絡內

#### 初步保障審核步驟：

1. 請您要求網絡/卓新網絡註冊西醫替您填寫初步保障審核表格，並於簽署後傳真給我們；
2. 我們將以傳真向網絡/卓新網絡註冊西醫回覆初步保障審核結果；
3. 您必須檢查並於初步保障審核確認信上簽署，並保留會員副本。

請注意，保障有效與否將以保柏收到所有索償表格、收據及有關之醫療報告後所作之最後批核為準。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。

#### 備註：

- 若於我們的辦公時間以外申請初步保障審核，該審核可於入院或治療日之下一個工作日補辦，但必須符合其他條件（例如必須由網絡/卓新網絡註冊西醫轉介及診治）。
- 若初步保障審核未能按規定完成，合資格之醫療費用將根據「非網絡保障/非卓新網絡保障」賠償。如您的計劃下沒有「非網絡保障/非卓新網絡保障」，則不會獲得賠償。

### 3.3) 差額

如在使用保柏網絡醫療卡/保柏卓新網絡醫療卡時，醫療費用超出保障上限或有關費用並不屬於計劃保障範圍之內，保柏會向您發出差額通知書。您必須於收到差額通知書後 **14 天內**將差額繳清。

### 3.4) 申請索償

若您以「保柏網絡醫療卡/保柏卓新網絡醫療卡」繳付醫療開支，您無須提出索償。醫院、診所或診斷中心會直接向我們提交索償文件作審批。

若您先自行繳付醫療費，請保留所有收據正本並連同轉介信（如需要）及填妥之賠償申請表於接受治療或出院後 **90 日內**寄回保柏。否則您的索償或會被拒。

賠償申請表可於您的人力資源部、保柏網站 [www.bupa.com.hk](http://www.bupa.com.hk) 或 myBupa 下載（「保柏住院及日症手術賠償申請表—保柏僱健康中小企醫療保障計劃」及「保柏門診賠償申請表」）。您亦可使用 myBupa 於網上遞交索償。如您使用 myBupa 的網上索償服務，



請上載索償文件正本的相片，並在遞交賠償申請後的 6 個月內保留所有文件的正本。若您未能提供文件正本，您於網上遞交賠償申請的服務可能會受影響。

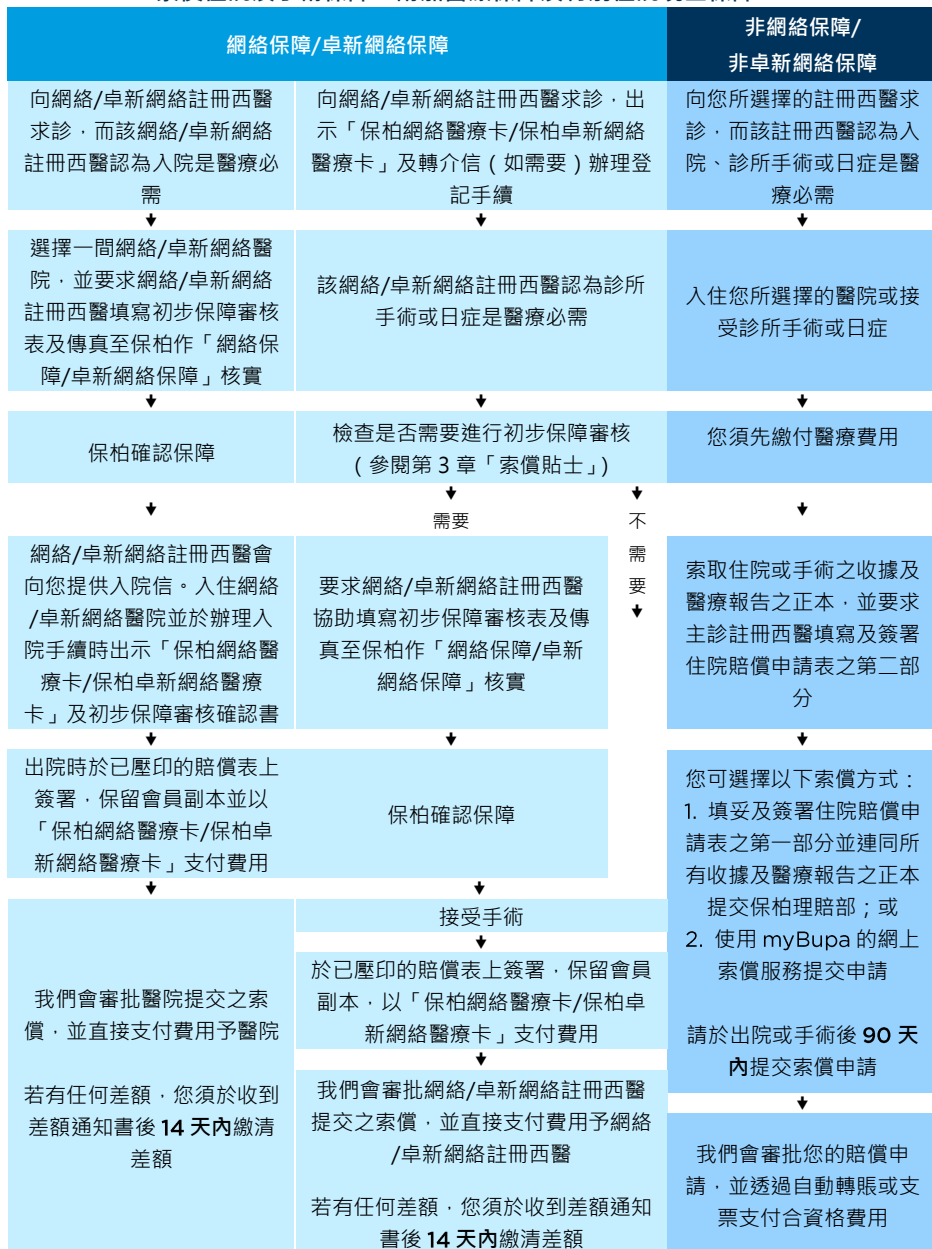
切記所有賬單及收據上均須列有：

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

當您的賠償批核後，將透過自動轉賬或支票以港元支付。若對賠償有任何查詢，請即致電保柏客戶服務專線 (852) 2517 5388。

## 4) 索償步驟

### 索償住院及手術保障、附加醫療保障及特別住院現金保障\*



\* 如您的住院符合資格，特別住院現金保障（如適用）將予以支付。

## 索償門診手術保障

### 卓新網絡保障

向卓新網絡西醫求診並於登記時出示「保柏卓新網絡醫療卡」



卓新網絡註冊西醫建議您門診手術或日症為醫療必需



選擇一間卓新網絡診所或日症中心，檢查是否需要進行初步保障審核  
(參閱第3章「索償貼士」)

需要

不需要

要求卓新網絡註冊西醫協助填寫初步保障審核表及傳真至保柏作  
「卓新網絡保障」核實



保柏確認保障



接受手術



於已壓印的賠償表上簽署，保留會員副本，以「保柏卓新網絡醫療卡」支付費用



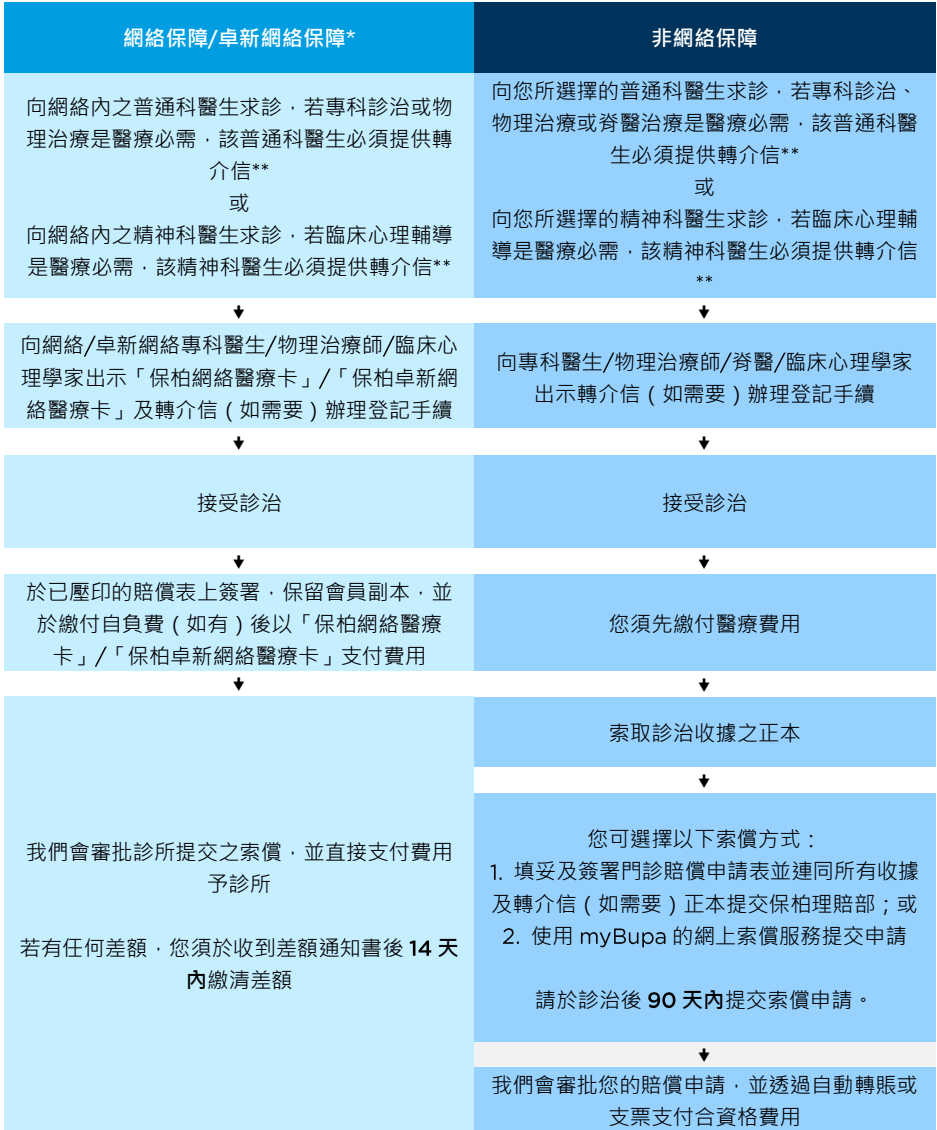
我們會審批卓新網絡註冊西醫提交之索償，並直接支付費用予卓新網絡註冊西醫

若有任何差額，您須於收到差額通知書後 **14 天內** 繳清差額

## 索償門診保障 — 普通科醫生或註冊中醫



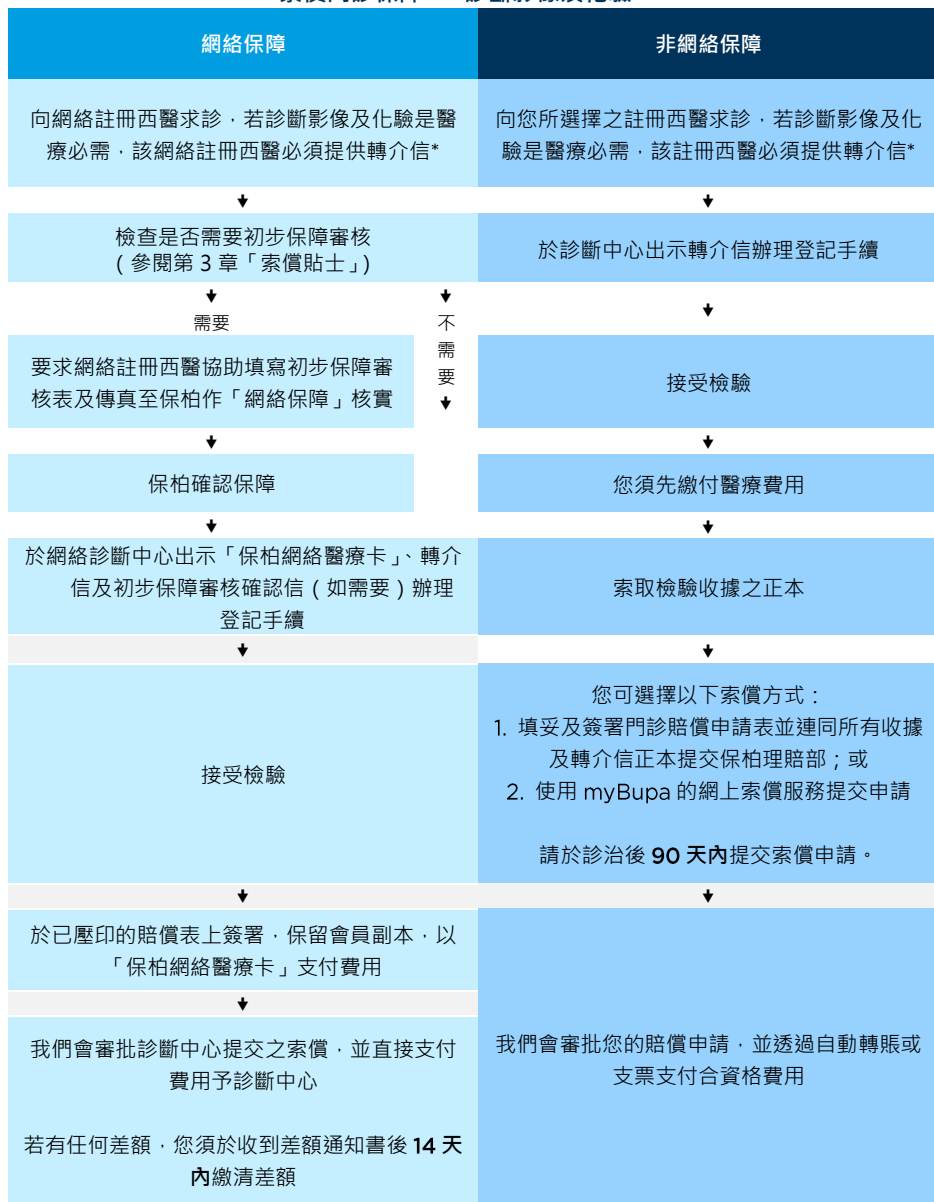
## 索償門診保障 — 專科醫生/物理治療師/脊醫/臨床心理輔導



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

\*\* 在「網絡保障/卓新網絡保障」及「非網絡保障」下，皮膚科、家庭醫學科、婦科、眼科、骨科、耳鼻喉科、小兒外科、兒科及精神科的專科診症無須轉介信。

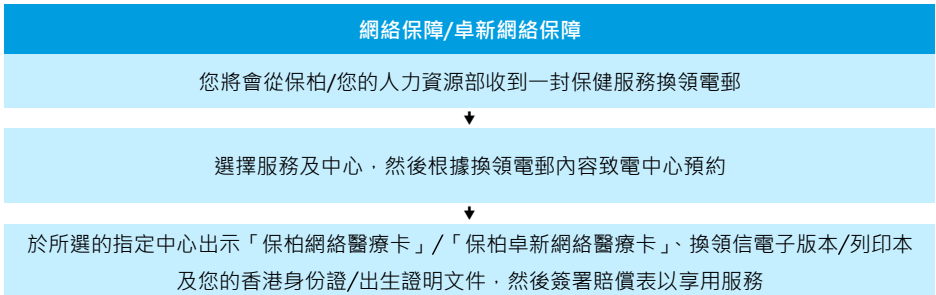
## 索償門診保障 — 診斷影像及化驗



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

## 索償門診保障 — 保健服務

如您有門診保障計劃 C2、C3、C4 或 C5：



如您有門診保障計劃 C1，您將於「網絡保障」及「非網絡保障」下享有保障金額表上「保健服務」所示的最高賠償總額：

網絡保障	非網絡保障
您將會從保柏/您的人力資源部收到一封保健服務換領電郵	自由選擇保健服務（洗牙、眼科檢查、健康檢查及/或足病診療*）
↓	↓
選擇服務及中心，然後根據換領電郵內容致電中心預約	您須先繳付醫療費用
↓	↓
於所選的指定中心出示「保柏網絡醫療卡」/「保柏卓新網絡醫療卡」、換領信電子版本/列印本及您的香港身份證/出生證明文件，然後簽署賠償表以享用服務	索取服務收據之正本
↓	↓
在享用首次服務後，您將會收到新的換領信，直至您用盡「網絡保障」及「非網絡保障」下的「保健服務」每合約年度最高賠償總額#。	您可選擇以下索償方式： 1. 填妥及簽署門診賠償申請表並連同所有收據及轉介信正本提交保柏理賠部；或 2. 使用 myBupa 的網上索償服務提交申請  請於診治後 <b>90 天內</b> 提交索償申請。  您的賠償將以保障金額表「保健服務」下所示的「網絡保障」及「非網絡保障」之最高賠償總額為限。

\* 向足病治療師求診須由註冊西醫書面轉介。

# 您可於 myBupa 查閱保健服務的餘額。

## 索償產科保障



\* 在您的「產科保障」生效 9 個月後，我們便會開始賠償與懷孕有關的醫療費用，您須在保障生效後受孕才可獲得賠償。請於分娩後 90 天內交回已填妥之賠償申請表及所有收據正本。如懷孕提早終止，請於懷孕終止後 90 天內提交索償。



## 索償牙科保障



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

## 5) 常見問題

### 1. 此計劃會否賠償我在香港以外的醫療費用？

請查閱您的保障金額表以了解您可享的每項保障之保障地區。

一般而言，「住院及手術保障」提供環球保障，所以無論您身處何方，您所有合資格醫療費用均獲保障。凡以港幣以外任何貨幣結算的醫療賬單，我們將會根據接受治療或出院當日的外幣兌換率，折算為港幣辦理。

### 關於「住院及手術保障」、「附加醫療保障」(如適用)

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

可以。所有合資格的日症或診所手術費用將於此計劃之住院及手術保障下賠償。

### 3. 如何使用此計劃的「附加醫療保障」(如適用)？

若您須於香港入住醫院或進行日症或診所手術，但您的住院及手術保障(項目 A1 - A9)已經耗盡，我們會對您任何超出按住院及手術保障下 A1 - A9 項(不論超出最高賠償額或最多日數)之合資格醫療費用作 8 成賠償至您的附加醫療保障最高保障金額。

此保障亦適用於由註冊西醫證明為醫療緊急之外地住院或手術。請注意，此保障並不包括入住醫院的總統套房 / 貴賓房 / 豪華房。若病房升級，賠償計算將加入有關調整值(請參閱保障金額表)。然而，有關調整值及以上住房級別限制不適用於在緊急情況接受治療的情況下因床位短缺而須入住較高住房級別，或因隔離原因而須入住指定住房級別的情況。

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

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

### 5. 我可如何享有「第二索償現金津貼」？

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

您無須另行提交指定的索償申請表以享有「第二索償現金津貼」，當您提交住院賠償申請表時，緊記勾選第一部分 3a 節「您是否已透過保柏其他合約或其他保險公司 / 組織提出

索？」一欄，並連同核實副本收據及有關保險公司的賠償結算通知書一併提交。若您的住院符合「第二索償現金津貼」的賠償資格，保柏將作出賠償。

## 關於門診保障（如適用）

### 6. 此計劃會否賠償沒有診症的純藥費？

不會。此計劃只賠償連同診症費之處方藥物費用（如合資格）。

### 7. 若我向專科醫生求診但沒有所需的轉介信，可否得到賠償？

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

### 8. 若我接受物理治療或脊醫之門診治療但沒有所需的轉介信，可否得到賠償？

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

### 9. 如申請中醫師保障或跌打醫師保障賠償，我須要提交甚麼文件？

請將收據正本和處方正本連同已填妥之門診賠償申請表一併提交，您亦可透過myBupa的網上索償服務提交申請。

## 關於其他自選保障（如適用）

### 10. 如何使用此計劃的產科保障？

此保障將會賠償因懷孕而住院的醫療費用、因產前和產後護理而向註冊西醫求診的診症費、產前及產後檢查費、診斷化驗費、醫生處方西藥費用及新生嬰兒於住院期間之護理費用。

我們會按您最後的分娩方法賠償順產保障或剖腹生產保障。若懷孕因流產、註冊西醫建議的墮胎或懷孕併發症而終止，我們會賠償流產保障。

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。在懷孕提早終止或早產的情況下，您只須在受保於此保障後開始懷孕，便可獲賠償。有關初生嬰兒在住院期間的任何醫療費用，或任何因懷孕而引致或相關的精神科、心理、情緒或行為問題之治療，均不屬保障範圍內。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。有關每次懷孕的最高賠償額，包括順產保障、剖腹生產保障及流產保障，請參閱保障金額表。

您的「保柏網絡醫療卡」/「保柏卓新網絡醫療卡」不能用作支付因懷孕而引致的任何住院或門診醫療費用。

#### 11. 我可如何享用牙科保障？

如您享有牙科保障，您在指定網絡牙科中心接受補牙、簡單脫牙等牙科治療時可享全數賠償。您必須出示「保柏網絡醫療卡」/「保柏卓新網絡醫療卡」及香港身份證以作核實及紀錄，以享免繳費及全數賠償服務。請登入 myBupa 查閱最新的網絡牙科中心名單。

如您選擇於非網絡牙科中心求診，請先行繳付服務費用，然後向保柏申請索償。合資格醫療費用將以非網絡牙科中心保障的每年最高賠償額為限。

#### 12. 我需要提交申請以獲得「特別住院現金保障」的賠償嗎？

不需要。您無須另行提交指定的索償申請表以申請「特別住院現金保障」。當您使用您的「保柏網絡醫療卡」/「保柏卓新網絡醫療卡」以使用住院免繳費服務或提交住院賠償申請表後，若您的住院符合「特別住院現金保障」的賠償資格，保柏將作出賠償。

請注意，特別住院現金津貼只會就因意外、癌症或嚴重傳染病的住院作出賠償，並設有資格條件。詳情請參閱保障金額表。

### 其他

#### 13. 若我離職，我還可繼續我的醫療保障嗎？

當您退休或離職時，您可申請參加「保柏轉安保」醫療保障計劃，讓您可繼續享有與現有計劃相同住房級別的「住院及手術保障」，而且於現有計劃受保期間出現的合資格受保疾病，均可在「保柏轉安保」內獲終生保障，無須核保手續。為確保申請過程順暢，請注意：

- 您於退出計劃生效日前貴為保柏團體醫療保障計劃會員連續達 6 個月或以上；
- 如您在團體計劃會籍完結前 6 個月內，您的住房級別獲得提升，您須按照提升前的住房級別參加本計劃的相同住房級別；
- 您離職前填妥「保柏轉安保」申請表並寄回保柏；
- 在您遞交申請表前，僱主已通知保柏終止您於保柏團體醫療保障計劃之會籍；
- 於您的「保柏轉安保」生效日，該保柏團體醫療保障計劃仍然生效；
- 如您的團體計劃會籍的最後受保日為該月的最後一日，「保柏轉安保」計劃將於團體計劃會籍最後受保日下一個月的第一日生效。否則，您的保障將在團體計劃會籍終止當月的第一日生效；及
- 如病症為「保柏轉安保」的不受保障項目，不論該病症是否受保於您的保柏團體醫療保障計劃，我們不會保障該病症。

若您對上述計劃感興趣，請參閱「保柏轉安保」計劃的產品冊子或聯絡保柏客戶服務專線。

## 6) 不受保障項目

我們希望幫助你了解保障範圍。以下是不受保障項目：

1. 已存在病症，除非根據本合約投保的僱員人數不少於10人且會員已根據本合約自保障開始日起連續投保不少於12 個月。
2. 不是醫療必需的治療、醫療服務、藥物或檢驗。
3. 任何在法例下或其他保險計劃內或從其他途徑可獲賠償之治療疾病或損傷費用，除非此等費用未能在該等補償、保險計劃或途徑獲得賠償。
4. 在水療中心、天然治療中心、康復院、療養院、老人院或類似機構所提供之住宿、護理或服務的費用。
5. 手術性或非手術性整容或整形治療（會員因意外而受傷，並於意外後1 年內接受醫療上必需的服務則不屬此項）、毛髮礦物質含量分析、健康補品或體重控制，除非獲保柏批准。
6. 預防措施，包括但不限於常規驗血、例行檢驗、預防注射或接種疫苗、聽覺測驗及因視力不正常而引致之治療，包括但不限於常規視力測驗或所需之眼鏡或鏡片費用（根據門診保障應付的保健服務保障則除外）。
7. 先天性疾病、發育異常或遺傳性疾病。
8. 由本合約保障開始日起首5年內，因感染人體免疫力缺損病毒所引致的治療。
9. 性病或其後遺症。
10. 與懷孕有關的治療，包括診斷性產科檢查、生育、墮胎或小產（根據產科保障應付的保障則除外）；與男女任何一方的節育、絕育或變性有關的治療；由於不育而直接或間接進行的治療，包括體外受孕、任何非自然受孕或人工受孕；或與性機能失常有關之治療，包括但不限於陽萎、不舉及早泄（不論任何原因導致）。
11. 誤用或服用過量藥物或受酒精影響、蓄意自傷身體或意圖自殺而直接或間接引致的治療。
12. 任何因參與犯罪活動而引致之疾病或身體損傷。
13. 另類治療，包括但不限於中藥治療、針灸、穴位按摩、推拿、催眠治療、羅爾夫按摩療法、按摩治療、香薰治療（根據門診保障應付的中醫師保障或跌打醫師保障則除外）。
14. 老年性痴呆（包括阿茲海默氏症）、帕金森病（根據門診保障應付的精神科相關治療保障或臨床心理輔導保障則除外）。

15. 心理病或精神病症，包括但不限於精神病、神經機能病、抑鬱、焦慮、神經性厭食、精神分裂、行為失常、譫妄症、失眠、神經衰弱等直接或間接引致的治療（根據住院及手術保障應付的精神科治療保障，或門診保障應付的精神科相關治療保障或臨床心理輔導保障則除外）。
16. 購買或使用輔助器具，包括但不限於眼鏡、助聽器及其他設備例如輪椅、拐杖的費用。
17. 任何與牙齒或牙肉疾病有關的治療或檢查，根據「牙科保障」或因意外引致緊急入院治療或住院脫除阻生智慧齒則除外。但不包括該住院後之跟進治療（根據牙科保障應付的保障則除外）。
18. 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。
19. 非醫療性服務，包括但不限於客人膳食、收音機、電話、影印、稅項（就醫療服務所徵收的增值稅或商品及服務稅除外）、醫療報告等費用。
20. 因不符合「良好及謹慎的醫療標準」的實驗性或未經證實醫療成效的醫療技術或治療程序而招致的費用。
21. 參與或參加海軍、軍事或空軍或任何武裝部隊的任何行動；或任何形式的職業運動。

## 7) 特別詞彙釋義

某些詞彙於「保柏僱健康中小企醫療保障計劃」團體醫療保障計劃的合約內有特定的意思，以下為一些重要詞彙的定義。

意外	指外在、突發、強烈及不可預料而可見的事件，此事件是導致身體受傷的唯一原因且與其他事件無關。
癌症	指惡性腫瘤。其特徵為惡性細胞漸進地、不受控制地生長，侵入及破壞正常及周邊組織。癌症必須由組織病理學報告證實腫瘤呈陽性。其亦包括白血病、淋巴瘤或肉瘤。以下各項除外： (a) 原位癌、宮頸病變、CIN-1、CIN-2、CIN-3 顯示惡化的或在組織學上被描述為癌前病變的腫瘤； (b) 除惡性黑色素瘤以外的所有皮膚癌； (c) 在組織學上被描述為 TNM T1(a)或 T1(b)分級或其他等效或更輕分級的前列腺癌； (d) 輕於 RAI III 期的慢性淋巴細胞白血病； (e) 在組織學上被描述為 TNM TINOMO 分期或更輕分期的甲狀腺癌。
脊醫	指於香港或引致醫療費用的任何其他地方擁有最少等同香港《脊醫註冊條例》下的脊醫資格，並從事藉矯正關節以提供脊骨療法的法定認可人士（會員本身、其親屬、家人及業務伙伴則除外，除非經保批批准）。
診所手術	指註冊西醫於診所進行之醫療必需手術而無必要留院，同時(i)該手術列於外科手術表為診所手術；或(ii)就門診手術保障而言，該手術需根據「保障述要 – 門診手術保障」所述。
先天性疾病	指自出生已存在之醫學異常，不論會員知道與否。這包括（但不排除在醫學上視為先天性疾病之其他病症）斜視、腦積水、睪丸未降、美克爾氏憩室、扁平足、心間隔缺損及腹股溝斜疝（小腸氣）。
日症	指註冊西醫於診所或醫院日症房可有效地進行之手術、非手術癌症治療及洗腎（如適用於此合約）而留院乃非醫療必需，但(i)該手術須列於外科手術表為日症手術；或(ii)就門診手術保障而言，該手術需根據「保障述要 – 門診手術保障」所述。
發育異常	指相較於同年齡或同發育階段之預期發育情況而出現之發育異常。這些缺陷或殘障出現於18歲之前，並可能預期會不確定的延續下來，從而造成實質上的損害。這些障礙情況包含生物性及非生物性的因素在內。這包括（但不排除醫學上被視為發育異常的其他病症）語言及學習障礙、自閉症及智力遲鈍。
病症	指疾病或身體損傷，包括所有由同一原因而起的病症及所有由此而起的併發症，除非此傷病與最近一次出院或最近一次診症已相隔90日或以上而期間並沒有進行治療。任何隨後由同一原因而起的病症視為獨立的病症。

緊急情況	指急病情況而沒有事先安排的住院，而有關初起病徵、診斷或治療均相距不超過48小時。
普通科醫生	指在香港醫務委員會以普通科登記或在引致醫療費用的任何其他地方具有至少同等資歷的人士。
遺傳性疾病	指通過基因由父母遺傳給子女的疾病。
醫院	指任何根據當地之法律承認、成立及註冊作醫院的機構，以對患病、受傷、或需要醫學治療人士提供醫療服務。該機構必須有政府批核的醫療設備，包括能進行診斷、大型手術及提供 24 小時由註冊護士執行的看護服務，並有註冊西醫駐診。 任何以療養院、護理中心、老人院、濫用藥物或酗酒復康中心方式營運的機構（包括位於醫院中的同類型部門）或任何類似用途的機構均不包括在內。
住院	指由註冊西醫轉介以病人身份接受以西方醫療及外科手術服務的醫療必需之住院。根據合約所訂，會員必須在整個入院時段都住在醫院內，而醫院有向會員收取住房及膳食費。
醫療必需	指醫療上必需的治療、醫療服務或藥物： (a) 以正常及慣常費用對診斷作出相應及慣常之治療； (b) 符合良好及謹慎的醫療標準； (c) 就有關診斷或治療所需的； (d) 非純為會員、註冊西醫、註冊中醫、脊醫、物理治療師、合資格護士、麻醉科醫生、註冊牙醫、註冊視光師、精神科醫生或任何其他醫療服務供應商提供方便； (e) 以最合適之程度向會員提供安全及有效的治療；及 (f) 住院非純為診斷掃描目的、影像學檢驗或物理治療。  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 / 或 III. 相關臨床領域執業的專家意見。
會員	指受保於本合約的僱員及其受供養人。
網絡牙科中心	指由保柏委任的牙科中心網絡以向會員提供保障金額表所列的牙科服務項目，並由保柏支付會員的合資格醫療費。此牙科服務供應商資料目錄由保柏以印刷版或電子版提供並不時進行修訂。
非手術癌症治療	指治療癌症的化療、放射性治療、標靶治療、免疫治療及荷爾蒙治療。



正常及慣常	關於收費乃指不超過同等經驗或資歷人士在相類似情況下提供服務所收取的平均合理費用；關於物料或服務指不超過在同一類別亦基於相同質素及經濟因素考慮下相類似物料或服務而收取的平均合理費用。
每年最高賠償額	指會員於保障金額表內就「保障述要—住院及手術保障」可享有的每合約年度最高總賠償額。
物理治療師	指於香港或引致醫療費用的任何其他地方擁有最少等同香港《輔助醫療業條例》下的註冊物理治療師資格，並從事以運動、人手治療及以機械能、熱能或電能就身體殘疾予以評估及醫治的法定認可人士（會員本身、其親屬、家人及業務伙伴則除外，除非經保柏批准）。
足病治療師	指保柏承認為足病治療師之人士，或於獲取足病學學位後於香港接受完整訓練或引致醫療費用的任何其他地方擁有法律資格或許可前提下從事足病治療，並擁有最少等同香港國際足病治療師協會或香港足病治療師協會下的註冊足病治療師資格及取得學位資格的法定認可人士（會員本身、其親屬、家人或業務伙伴則除外，除非經保柏批准）。
精神科醫生	指由保柏承認為精神科醫生的註冊西醫或指於香港或引致醫療費用的任何其他地方擁有最少等同於香港醫務委員會專科醫生名冊登記之精神科醫生資格並從事精神科治療的任何法定認可的註冊西醫。
心理學家	指保柏承認為心理學家之人士，或於獲取心理學學位後於香港接受完整訓練或引致醫療費用的任何其他地方擁有法律資格或許可前提下從事就情緒及行為失調予以評估及提供服務，並擁有最少等同香港心理學會下的註冊心理學家資格及取得學位資格的法定認可人士（會員本身、其親屬、家人或業務伙伴則除外，除非經保柏批准）。
註冊中醫	指於香港或引致醫療費用的任何其他地方擁有最少等同香港《中醫藥條例》下的註冊中醫資格並從事中藥治療的法定認可中醫或任何人士（會員本身、其親屬、家人及業務夥伴則除外，除非經保柏批准）。
註冊牙醫	指於香港或引致醫療費用的任何其他地方擁有法律資格或許可從事牙科治療，並擁有最少等同香港《牙醫註冊條例》下的註冊牙醫資格的任何人士（會員本身、其親屬、家人或業務伙伴則除外，除非經保柏批准）。
註冊西醫	指於香港或引致醫療費用的任何其他地方擁有最少等同香港《香港醫生註冊條例》下的註冊西醫資格並提供西方醫療及外科手術服務的任何法定認可普通科醫生、專科醫生或任何人士（會員本身、其親屬、家人或業務伙伴除外，除非經保柏批准）。
註冊視光師	指保柏承認為註冊視光師之人士，或於獲取視光學學位後於香港接受完整訓練或引致醫療費用的任何其他地方擁有法律資格或許可前提下提供視力及眼睛護理服務，並擁有最少等同香港視光師委員會下的註冊視光師資格及取得學位資格的法定認可人士（會員本身、其親屬、家人或業務伙伴則除外，除非經保柏批准）。

## 嚴重傳染病

指由於細菌、病毒、寄生蟲或真菌等微生物的傳播，導致身體健康狀況不佳的下列傳染病之一。嚴重傳染病必須由註冊西醫按照國際公認醫學診斷標準進行診斷，並經實驗室檢測或保柏認可的相關臨床檢驗報告證實。

(a) 嚴重急性性呼吸系統綜合症 ( SARS )( SARS Cov-1 )	(k) 炭疽
(b) 登革熱	(l) 麻風病
(c) 日本腦炎	(m) 狂犬病 ( 人類 )
(d) 克雅氏病 ( 包括人類瘋牛病變異型克雅氏病 )	(n) 白喉
(e) 軍團病	(o) 急性脊髓灰質炎
(f) 阿米巴痢疾	(p) 黃熱病
(g) 霍亂	(q) 瘟疫
(h) 瘧疾	(r) 猩紅熱
(i) 麻疹	(s) 2019冠狀病毒病 ( COVID-19 )( SARS Cov-2 )
(j) 破傷風	(t) 世界衛生組織 ( WHO ) 於日後發佈的任何國際關注的突發公共衛生事件 ( PHEIC )

保柏有權不時修改該嚴重傳染病目錄。

## 專科醫生

指保柏承認為專科之註冊西醫或在香港醫務委員會以專科登記之註冊西醫或在引致醫療費用的地方擁有同等資歷之人士並從事專科治療。

## 8) 健康支援服務

如您享有住院及手術保障計劃 A1、A2，或門診保障計劃 C1，您可使用我們的健康支援服務。

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

- **24 時健康專線**  
我們的合資格健康管理團隊可為會員提供協助及指導，背後更有醫生作為顧問\*，提供每天 24 小時支援服務，為會員解答健康問題並提供指引，根據病徵或病況建議合適的做法。
- **健康顧問**  
當會員患上危疾時，保柏的健康顧問會全程協助，讓會員了解治療詳情和醫療開支預算，協助處理有關入院、出院後跟進治療及索償等事宜。若會員入住本港私家醫院，健康顧問可在會員的同意下前往醫院探望或致電慰問。
- **第二醫療意見**  
如在診斷和治療上遇到各種疑慮，我們可安排醫療專家為會員提供專業的第二意見，讓他們掌握病情從而決定治療方法。

要使用此服務，請隨時致電 24 時健康專線。有關專線可於您的保障金額表上找到。

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。

「健康支援服務」建議的服務之有關費用由會員自付，除非該費用在合約下屬受保項目。

「健康支援服務」由保柏與保柏委任的服務供應商提供。

\* 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。

## 9) 免費保柏國際援助計劃

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

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

### 1. 醫療援助服務

#### ◆ 電話醫療建議

會員可致電 IPA 的緊急中心詢問當值註冊西醫有關醫療建議及評估。

#### ◆ 醫生 / 醫院轉介服務

IPA 可轉介會員至專科醫生或醫院為會員作個人醫療評估。

#### ◆ 必要藥物及醫療器材

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

#### ◆ 遣派註冊西醫

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

#### ◆ 醫療護送（不設上限）\*

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

(a) 護送會員至最就近的一間備有合適醫療設備的醫療機構；或

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

#### ◆ 治療後送返居住國家（不設上限）\*

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

#### ◆ 墊支住院按金

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

#### ◆ 跟進病情

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

- ◆ **安排家屬前往探望**  
若會員於外地住院達連續七天以上，IPA 將安排一位會員指定之人士或其親屬（如會員因病未能指示）乘搭客機（經濟客位）前往探望會員，並代其支付來回機票及一般酒店住宿，最高達港幣 16,000 元。
- ◆ **同行伙伴之額外交通及住宿費**  
IPA 將安排並支付與會員同行之伙伴因會員發生事故而接受此保障的醫療護送所引致的額外交通及住宿費用，每位會員於每一事故最高可享港幣 15,000 元，並以每日港幣 2,000 元為限。
- ◆ **安排乏人照顧之子女返回居住國家\***  
若會員於外地入院而未能照顧其同行之 18 歲或 23 歲（如屬全職學生）以下受供養子女，則 IPA 將安排及支付該名（或多名）子女乘坐客機（經濟客位）返回其居住國家。
- ◆ **出院後療養住宿**  
若會員之主診註冊西醫及 IPA 之醫生均認為會員於出院後即時入住當地酒店繼續療養乃醫療必需，IPA 將為會員安排及支付該等合理酒店住宿費用，以每天最高港幣 1,950 元及最多連續 4 天為限。
- ◆ **安排返回原來工作地點\***  
在由 IPA 醫療護送或送返居住國家接受治療後的一個月內，如會員提出要求，IPA 會安排及提供單程經濟客位機票予會員返回原來工作地點。會員須負責決定是否恢復工作，並須負責取得醫生有關文件以證明其是否適合乘坐飛機或恢復工作，而會員及 / 或其主診註冊西醫須負責上此決定之一切責任。IPA 並不牽涉在內。
- ◆ **遺體或骨灰運送服務（不設上限）**  
如會員不幸身故，IPA 將安排其遺體或骨灰由身故地方運返其居住國家安葬，IPA 並將支付有關運送費用。
- ◆ **臨時安排返回居住國家\***  
當會員身在海外（不包括移民）而獲悉親人在居住國家身故，並須立即折返其居住國家 IPA 將安排和支付會員乘坐定期航班（經濟客位）返回其居住國家及支付有關的機票費用。
- ◆ **醫療護送及返港後之額外住院保障（由保柏提供）**  
若住院及手術保障及附加醫療保障已耗盡，並根據此保障內之「治療後送返居住國家」返回香港後即時入院，合資格之住院費將額外賠償至最高達港幣 120,000 元。

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

## 2. **旅遊支援服務**

- ◆ **旅遊資料**  
在旅程之前或期間，會員可致電 IPA 查詢以下資料：
  - 最新的免疫及防疫要求及需要。
  - 世界各地天氣、貨幣兌換率、銀行工作日、當地語言、護照及簽證要求。
  - 機場稅或海關條例。
  - 提供傳譯員轉介服務或護送小童服務。
  - 因醫療緣故傳遞緊急訊息。
- ◆ **代尋並轉送行李**

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

- ◆ **緊急行程調配安排**

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

- ◆ **遺失旅遊證件的行政協助**

IPA 將提供會員有關向當地機構補領遺失或被竊證件的手續等資料。

- ◆ **任中橫服務**

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

### 3. **法律援助**

- ◆ **提供法律轉介**

IPA 可提供各地律師或律師行的電話號碼及地址。

- ◆ **法律援助**

如會員在不涉及工作、業務、專業或受僱情況下遇上意外，IPA 將會：

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

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

- ◆ **保釋金墊支**

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

### 4. **本地支援服務 – 只適用於香港**

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

## 5. 不受保障項目

### ◆ 不保事項

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

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

### ◆ 不可抗力之免責事由

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

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

## 10) 您的個人資料

1. 我們非常重視您的個人資料的保密。保柏須不時收集您或您家屬的個人資料以提供醫療保險服務或辦理閣下提出之醫療保險索償之用·包括但不限於您或您家屬的姓名、身份證號碼(身份證影印本)、護照號碼(護照影印本)、聯絡資料、健康及醫療信息和財務信息(以下簡稱「個人資料」)(包括信用資料和以往申索紀錄·如適用)。如您未能提供這些個人資料·保柏可能無法為您處理或提供保險產品/服務或其他相關服務。
2. 所有申請表格中包含的、或透過任何索償程序或其他途徑·保柏不時收集或持有的個人資料·保柏將僅作以下用途：
  - (a) 處理申請及提供售後服務；
  - (b) 處理任何索償分析及/或與醫療或其他保險有關的查核；
  - (c) 提供及設計保柏的產品及服務；
  - (d) 偵測及防止欺詐行為(無論是否與就此申請而簽發之保單及相關的任何申請或索償)；
  - (e) 與由保柏提供之保險產品及/或服務有關之資料核對、統計及研究；
  - (f) 就任何於第二部分中所述的用途與閣下或您的家屬聯絡；
  - (g) 允許保柏全部或部分的權益或業務的實際或建議承讓人、受讓人、參與人或次參與人·就涉及的轉讓、出讓、參與或次參與的交易進行評估；及
  - (h) 為遵守適用的法律或監管要求而作出披露。
3. 個人資料將會轉讓至以下任何受讓人(包括香港以內及以外)以作於本部分第二段所述之用途：任何屬於保柏集團的公司；任何保險代理人；任何由保柏授權的再保險公司；醫護專業人員及醫院；你的僱主；任何代理人、承包商、或向保柏提供行政、電訊、電腦、付款、資料處理或儲存、印刷、研究或其他就保柏業務的營運向保柏提供服務的第三方服務供應商(包括但不限於保險公司、銀行、律師、會計師、理賠調查員、收數公司、資料處理公司、防止欺詐組織、為保險業界整合申索及承保資料之組織、研究服務機構及專業顧問)；保柏的任何全部或部分的權益或業務的實際或建議承讓人、受讓人、參與人或次參與人；為遵守任何法例之要求·或根據監管或其他機關所發出對保柏具有約束力或要求其遵守的規則、規例、實務守則或指引·而作出披露·包括但不限於適用監管機構、政府機構、相關行業認可機構、信貸資料服務機構或法院·及在其他情況下·法律規定保柏必向其披露的人士或機構。
4. 您有權要求查閱及更正我們持有的個人資料。您可聯絡保柏(亞洲)有限公司的保障資料主任·地址如下：香港鰂魚涌華蘭路25號栢克大廈18樓。如有任何查詢·請隨時致電我們的客戶服務專線(852) 2517 5388。



保柏(亞洲)有限公司  
Bupa (Asia) Limited

香港鰗魚涌華蘭路25號  
栢克大廈18樓  
18/F, Berkshire House  
25 Westlands Road  
Quarry Bay, Hong Kong

客戶服務專線  
Customer Care helpdesk:  
(852) 2517 5388

傳真Facsimile: (852) 2548 1848

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

