

# International Health Insurance

## Insurance Product Information Document



**Company:** Bupa Global Designated Activity Company  
**Product:** Elite Global Health Plan

Bupa Global Designated Activity Company (Bupa Global DAC), trading as Bupa Global, registered in Ireland under company no. 623889, is regulated by the Central Bank of Ireland.

This is a summary of the insurance cover. You can find more information in your quotation and other documents before you buy. If you'd like a copy of the full terms and conditions, please let us know. After you buy, we'll send you a membership guide which includes the full terms and conditions of the policy, together with an insurance certificate. It's important that you read these documents carefully.

### What is this type of insurance?

International Private Medical Insurance which is designed to cover the costs of private healthcare when needed, depending on any agreed terms, both in the country where you live and your chosen region(s).



### What is insured?

Annual policy maximum of €3.75 million / £3 million / \$5.1 million for each person

#### Hospital treatment

- ✓ Cancer treatment and Advanced Therapy Medicinal Products
- ✓ Intensive care
- ✓ Surgical operations
- ✓ Doctors' and anaesthetists' fees and medicines and dressings
- ✓ Diagnostic tests, including CT, MRI and PET scans
- ✓ Organ transplants (€750,000 / £600,000 / \$1.02 million)
- ✓ Prosthetics and rehabilitation
- ✓ Home nursing after in-patient treatment
- ✓ Hospice and palliative care (€31,000 / £25,000 / \$42,000)
- ✓ Mental health treatment and treatment from physiotherapists, speech therapists, dietitians
- ✓ Kidney dialysis
- ✓ Gender dysphoria (€76,250 / £61,000 / \$104,000)

#### Out-patient treatment

- ✓ Specialists' consultation, doctors' fees and mental health treatment
- ✓ Out-patient surgery, including diagnostic tests
- ✓ Prescribed medicines and dressings (€5,000 / £4,000 / \$6,800)
- ✓ Durable medical equipment
- ✓ Physiotherapy, osteopathy and chiropractic
- ✓ Orthopaedics, footcare, acupuncture and reflexology
- ✓ Homeopathy, naturopathy and Chinese medicine and dietetic guidance
- ✓ Gender dysphoria

#### Pregnancy and childbirth

- ✓ Normal birth, birthing centre or home birth (€12,500 / £10,000 / \$17,000)
- ✓ Medically necessary caesarean section (€12,500 / £10,000 / \$17,000)
- ✓ Pregnancy and childbirth complications
- ✓ Assisted fertility treatment (€7,500 / £6,000 / \$10,200)
- ✓ Newborn care (€30,000 / £25,000 / \$31,250)
- ✓ Pre- and post-natal treatment, included as part of out-patient treatment (€6,250 / £5,000 / \$8,500)

#### Wellbeing

- ✓ Health screening (€1,875 / £1,500 / \$2,550) and vaccinations (€1,250 / £1,000 / \$1,700)
- ✓ Preventive dental treatment

#### Dental treatment, hearing aids and optical

- ✓ €3,100 / £2,500 / \$4,200 for each person
- ✓ Accident-related dental treatment, routine, major restorative dental treatment and orthodontics



### What is insured? (continued)

- ✓ Hearing aids, glasses frames and lenses

#### Transportation

- ✓ Evacuation and repatriation

**You can choose the optional cover listed here. Your insurance certificate will show the cover you have chosen.**

#### Optional cover

- Worldwide cover
- Worldwide, excluding the U.S. cover

**See the full terms and conditions of the policy for details of what is and isn't covered**



### What is not insured?

- ✗ Artificial life maintenance lasting more than 90 days
- ✗ Treatment as a result of conflict or disaster if you are participant or put yourself in danger
- ✗ Convalescence
- ✗ Cosmetic treatment
- ✗ Treatment for developmental problems, sleep disorders or sexual problems
- ✗ Experimental or unproven treatment
- ✗ Harmful or hazardous use of alcohol, drugs or medicine
- ✗ Treatment you need as a result of an illegal activity
- ✗ Professional sports activities
- ✗ Treatment for obesity and weight management (we may cover surgery)
- ✗ Treatment from medical practitioners, hospitals or healthcare facilities that we do not recognise

**See the full terms and conditions of the policy for other exclusions**



### Are there any restrictions on cover?

- ! Cover depends on eligibility criteria
- ! Conditions may apply when adding a newborn baby to your policy. We may agree to cover pre-existing conditions, or add special restrictions or exclusions, or may decline to offer cover
- ! You will have to pay for treatment up to the value of the deductible or co-insurance, if you choose to have one
- ! Pre-existing conditions - we may agree to cover these for a higher premium. We'll discuss this with you before you buy
- ! The policy covers only medically necessary treatment and wellbeing care listed in the membership guide

**This section is continued on page 2**



## Are there any restrictions on cover? (continued)

- ! Limitations for each person every policy year unless stated otherwise:
  - 60 days: rehabilitation
  - 30 days: home nursing after in-patient treatment
  - 60 visits: specialists' consultations, doctors' fees, qualified nurses, physiotherapists, osteopaths, chiropractors, occupational therapists, orthoptists, footcare, acupuncture and reflexology
  - 20 visits: homeopathy, naturopathy, Chinese medicine
  - Four visits: dietetic guidance
  - Two visits: preventive dental treatment
- ! Waiting periods (the policy does not cover treatment you have during a waiting period):
  - first 24 months: obesity surgery
  - first 18 months: pregnancy and childbirth, assisted fertility treatment
  - first 12 months: orthodontics (for members aged 18 and under only)
  - first 10 months: health screening
  - first six months: preventive, routine, or major restorative dental treatment
- ! There are different types of limits to your cover. These are:
  - each membership year - normal childbirth, birthing centre, home birth, caesarean section, prescribed medicines and dressings, durable medical equipment, health screening, vaccinations, dental treatment, hearing aids and optical treatment
  - each device - prosthetics
  - during your lifetime - hospice and palliative care
  - each condition - organ transplant services
  - one course of treatment for each condition during your lifetime - Advanced therapy medicinal products (ATMPs)
- ! If you choose to have treatment/services with a healthcare provider outside our Bupa Global network, we will only cover costs which we consider the 'reasonable and customary' amount for that treatment/service. If you choose an 'out of network' provider, you are responsible for paying any costs above reasonable and customary levels. More information can be found in the membership guide

**See the full terms and conditions of the policy for other restrictions**



## Where am I covered?

- ✓ You are covered for treatment in the area of cover that you choose when you buy the policy



## What are my obligations?

You must:

- pay the premium and any co-insurance or deductible which applies to your cover
- give us your medical history when you apply, if required
- let us know if you are admitted to hospital
- request pre-authorisation for any treatment that requires it, as shown in the membership guide, including for any treatment in the U.S
- let us know straight away if you move to a different country or your specified country of residence or nationality changes
- let us know if you have other insurance which also covers your treatment



## When and how do I pay?

- You can choose to pay the premium annually, semi-annually, quarterly or monthly
- You can pay by credit card, international cheque or international bank transfer in your chosen currency. If you pay in GBP, you can also pay by Direct Debit



## When does the cover start and end?

- The contract lasts for 12 months. You can find your policy start and end dates in your quote or on your insurance certificate.
- Your policy will renew automatically, and we will take payment unless you tell us to cancel it.



## How do I cancel the contract?

- To cancel the policy:
  - call us on +44 (0) 1273 718379, email us at [service.uk@bupaglobal.com](mailto:service.uk@bupaglobal.com), or write to us at Bupa Global, Victory House, Trafalgar Place, Brighton, BN1 4FY, United Kingdom
- If you cancel, your cover will end 14 days after you contact us. If you cancel within 30 days of receiving your first insurance certificate and you haven't claimed, we'll refund the premium paid in full. If you've claimed during, or cancel after, this 30-day period, we'll refund any premium you paid for the period after your cover ended. There's no charge if you cancel your cover

**See the full terms and conditions of the policy for more information**