

Bupa
保柏

A young woman with long brown hair, wearing a white sleeveless top, is sitting in a train window and pointing towards a large cable-stayed bridge in the distance. She is smiling and looking towards her elderly parents, a woman and a man, who are sitting next to her. The woman has grey hair and is wearing a white top and a beige cardigan. The man has grey hair and is wearing a blue button-down shirt. They are all smiling and looking out the window. The background shows a large cable-stayed bridge over a body of water under a clear blue sky.

**Bupa Care
Bridge Health
Insurance
Scheme**



Seamless health protection, quality choices in Hong Kong and Mainland China

Healthcare services between Hong Kong and Mainland China are becoming increasingly seamless, giving customers greater choice and flexibility in accessing medical care. As public healthcare waiting times in Hong Kong lengthen, Mainland China offers a faster, convenient alternative. This shift reflects the mindset of a younger, future-focused generation that is increasingly open to cross-border healthcare solutions.

Bupa Care Bridge Health Insurance Scheme offers access to a comprehensive medical network across Hong Kong and Mainland China to ensure comprehensive care is always within reach, with annual coverage limits from HK\$5 million to HK\$15 million, eligible medical expenses are fully covered¹.

This plan features no lifetime limit, regardless of your claim history, your annual benefit limit is fully reset every year, ensuring continuous protection when you need it most. Available in two plan levels with flexible deductible options, this structure empowers you to strategically plan your healthcare according to your life stages.

The most distinctive feature of this plan is the seamless integration of outpatient coverage² within a core inpatient plan, providing you with holistic protection in a single solution.

We further elevate your protection with preventive care, cashless services and a series of concierge services. Experience a new level of flexibility in your everyday life.

Highlights



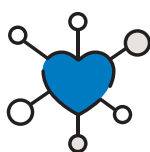
Full cover¹ on eligible medical expenses

Full coverage¹ without sub-limits or any lifetime ceiling.



Simplified underwriting procedure:

You only need to answer 5 health questions to complete your underwriting process. No more long waits or complex medical exams.



Flexible options to suit your needs:

Choose from our various deductible options at two plan levels.



Integrated outpatient care²:

By embedding comprehensive outpatient services directly into your core coverage, we ensure your care journey is supported from diagnosis, treatment to recovery — not just during your hospital stay.



Option to enjoy an upper room type without additional premium³:

Choose our designated hospitals⁴ for superior comfort hospitalisation during your recovery. Enjoy a guaranteed ward upgrade to a semi-private room across our designated hospitals⁴ in the Hong Kong. For designated hospitals⁴ in Mainland China, you will be comfortably accommodated in a standard private room.




Preventive care:

Access to comprehensive screenings at exclusive rates, allowing you to monitor your health closely at ease.



Plan overview

Cover at a glance

| | Basic Plan | Plus Plan |
|---|---|--|
| Basic Benefit | | |
| Annual benefit limit (HK\$) | 5,000,000 | 15,000,000 |
| Lifetime benefit limit | No lifetime benefit limit | |
| Area of cover | For non-emergency treatment: | |
| | Mainland China | Greater China ⁵ |
| | For emergency treatment: | |
| | Worldwide | |
| Deductible option (HK\$) (per policy year) | 0 / 5,000 / 10,000 | 0 / 10,000 / 30,000 / 60,000 |
| Room level | Ward room For designated hospitals ⁴ in Mainland China: Standard private room* *Pre-authorisation ³ must be obtained | Ward room For designated hospitals ⁴ in Hong Kong: Semi-private room* For designated hospitals ⁴ in Mainland China: Standard private room* *Pre-authorisation ³ must be obtained |
| Clinical Benefit | | |
| Area of cover | N/A | Hong Kong |
| Outpatient services | |  At a preferential co-payment amount |

Eligibility

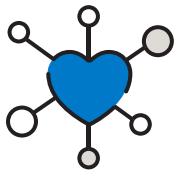
| | |
|----------------|---|
| Policy holder | Aged 18 or above |
| Insured person | <ul style="list-style-type: none"> • Policy holder • Policy holder's spouse, child, grandchild • Policy holder or policy holder's spouse's parents, grandparents, siblings • Policy holder's domestic partner or their parents or child |
| Issue age | Aged 15 days to 80 years (inclusive) at policy commencement |
| Application | <ul style="list-style-type: none"> - No medical examinations required⁶ - Basic Plan is available to HKID Card holders only. |
| Renewal | Guaranteed lifelong renewal ⁷ |

Key Features



Full cover¹ on eligible medical expenses

Enjoy annual coverage starting from HK\$5 million up to a limit of HK\$15 million. There's also no limit to the lifetime benefit, so you can enjoy high-quality treatments with ease.



Flexible options to suit your needs

- Choose the coverage that fits your lifestyle: The Basic Plan focuses on Mainland China, while the Plus Plan extends your reach to Greater China (including Hong Kong, Macau, Mainland China and Taiwan). Regardless of your choice, you are always backed by Bupa's comprehensive worldwide emergency support.
- Lower your annual premium by selecting the deductible that fits your financial planning.

| Plan levels | Basic Plan (HK\$) | Plus Plan (HK\$) |
|-----------------------|--------------------|-----------------------------|
| Area of cover | Mainland China | Greater China ⁵ |
| Choice of deductibles | 0 / 5,000 / 10,000 | 0 / 1,000 / 30,000 / 60,000 |



Option to enjoy an upper room type³ without additional premium

Plus Plan provides hospitalisation coverage across Hong Kong, Macau, Mainland China and Taiwan. You may choose designated hospitals⁴ and enjoy upper room accommodation in Mainland China and Hong Kong without additional premium, enhancing comfort and privacy throughout hospitalisation and recovery.



| Designated hospitals ⁴ | | Non-designated hospitals |
|-----------------------------------|--------------------------|--------------------------|
| Mainland China | Hong Kong | Greater China |
| Room upgrade to | | |
| | | |
| Standard private room | Semi-private room | Ward room |



Simplified underwriting procedure

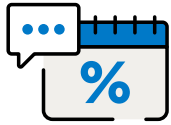
- Only 5 health questions to complete your underwriting process.
- Streamlined underwriting process with minimal questions saves your time.



Integrated outpatient² excellence via designated service centres⁸

- Experience unparalleled convenience with Clinical Benefit across over 400 designated service centres⁸ in Hong Kong under the Plus Plan.
- This seamless integration ensures your daily health needs are met with precision, featuring consultations with General Practitioner, Specialist and Traditional Chinese Medicine Practitioner, including video consultation⁹. Even in the face of chronic conditions, you can have continuous care for lifelong wellness.
- Plus Plan also covers physiotherapy treatment, X-ray and laboratory test at designated service centres⁸.

Other features



No claim renewal discount¹⁰

- Discount of 5 - 15% will be applied to policy renewals when no claims have been made.
- No claim period:
 - 2 or 3 consecutive policy years: 5% discount
 - 4 or 5 consecutive policy years: 10% discount
 - 6 or more consecutive policy years: 15% discount



Family discount¹¹: You'll enjoy a family discount when enrolling with your family members

- 2 eligible family members enrol together: 10% discount
- 3 or more eligible family members enrol together: 15% discount



Guaranteed renewal

Bupa guarantees that your cover can be renewed every year for life. Your premium will only be based on your age no matter how much you claim after your policy is effective⁷.



Value-added services¹²

This plan is specially designed with a series of benefits and services to take care of both your physical and mental health.



Preventive Care Service

Prevention is the foundation of true health protection. Both plan levels offer preferential rates to enjoy comprehensive health screenings at designated service points, helping you detect potential health concerns early and stay in control of your wellbeing.



Healthcare Transport Service (Concierge Service)¹³

We strive to provide a more comfortable and seamless healthcare journey. This service provides a 6-seat concierge vehicle for you travelling from a designated hospital in Shenzhen to your home (including cross-border transfers to Hong Kong) when you discharge.



Drug Search Service

If you receive prescriptions for tumor-specific medications, we can help you in locating authorised purchase and usage channels within Mainland China. Through a dedicated case manager, support is provided via telephone to either supply pharmacy information or arrange convenient medication access, facilitate direct payment, delivery, or scheduled collection—ensuring timely and hassle-free access to required treatment.



Cashless Service

We understand that managing medical expenses during times of illness can be physically, emotionally and financially overwhelming. With our cashless service, you can focus on your recovery while we take care of the payment arrangements for you.

For confinement, prescribed diagnostic imaging test¹⁴, prescribed non-surgical cancer treatment and day case procedure at designated hospitals⁴ in and Hong Kong (Plus Plan only) and Mainland China, upon application and approval of pre-authorisation prior to the confinement or treatments, we will pay the approved medical expenses on your behalf.

If you are enrolled in the Plus Plan, you can use your Bupa Medical Care Card to enjoy cashless service for specific outpatient services and treatments at the designated service centres in Hong Kong⁸.



Second Medical Opinion

We stand by you with thoughtful care throughout every stage of healthcare journey. We'll arrange for you to receive medical advice from a panel of medical specialists within Mainland China and Hong Kong's medical network to clarify your doubts, enabling you to make informed decisions about your treatment.



Extra services for Plus Plan



Health Coaching Services

We're here for you at all times. Our Health Coaching Services offer personalised healthcare support and guidance delivered by a team of doctors, qualified nurses and health management professionals to minimise your worries and give you peace of mind. For complicated conditions, Health Coaching Services can provide extra assistance for a smooth recovery.

- **24/7 Healthline**

Our team of qualified health management professionals¹⁵ can provide assistance and guidance—from caring for a sick relative to discussing symptoms, treatment, and more.

- **Care Manager**

Our Care Manager can follow up on claims and assist you throughout treatment and recovery, from explaining your treatment plan and overseeing costs to arranging follow-up consultations. If you're admitted to a local private hospital, our Care Manager will make a courtesy call or visit, with your consent.

- **Healthcare centre choices**

We can provide a list of clinics and hospitals based on your specific condition or needs for your reference.

- **Chronic Conditions programme**

This programme offers lifestyle coaching and management, including personal phone calls to help you manage any chronic condition such as diabetes.



Mental health support

Apart from offering coverage for inpatient psychiatric treatment, it includes a free 24-hour Mental Health Service Hotline¹⁶, which provides personalised emotional support and face-to-face counselling services.



Extra services for Plus Plan



Comprehensive cancer care support: helping you embark on a healthier life

When facing the challenges of cancer treatment, Bupa Cancer Care is your strongest ally. Bringing together a connected team approach, we offer you an integrated cancer care support system. Our main services include:



Dedicated nurse hotline



Tailored treatment plan



Fast-tracked booking



Allied health support

By providing transparent information and proactive follow-ups, we are devoted to walk along with you at every step of your cancer care journey.



Scan the QR code to learn more



One-stop specialist treatment programmes

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

Supporting your health every day, every way

Multiple specialties to meet different medical needs



Quality assured network clinics and facilities



Experienced health professionals to guide you from consultation through treatment and follow-up



Cashless service with an eligible medical card



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



Extra services for Plus Plan



Free Bupa Worldwide Assistance Programme¹⁷

With Bupa Care Bridge Health Insurance Scheme, you'll also receive our free worldwide assistance programme. It provides medical support and assistance if you need help while overseas or in Mainland China.



Bupa Priority Booking¹⁸

Enjoy seamless and hassle-free booking with priority access by using the Bluea Health app's eBooking feature, or you may contact Bupa priority booking hotline at (852) 8100 0456 via phone call to make a reservation for outpatient services, for example specialist consultation within 3 days¹⁹.



Insurance and wellness in your hands

With a single mobile app Blua Health²⁰, you can manage your health and insurance scheme.



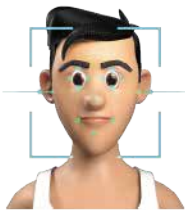
Manage your insurance scheme

With myBupa features in Blua Health, you can manage your scheme anytime, anywhere, redeem exclusive offers, search your preferred network doctors and clinics, submit claims and more.



Manage your health and earn rewards

Staying healthy is the greatest commitment you can make to yourself and your family. Blua Health helps you manage your health with AI powered health-tracking technology. You can also earn points to redeem rewards for healthy living. Keep moving to earn more! By using the “eBooking” and “ePharmacy” features²¹, you will receive a comprehensive health solution to support both your everyday health needs and long-term wellness goals, helping you manage your health more efficiently!



Enjoy a variety of free health app features



Assess your health in 30 seconds with AI Technology



Exercise with AI coach anytime, anywhere



Earn points to redeem rewards for healthy living



One-stop booking for multiple medical services



Order prescription medications in just a few steps



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

Case Illustration²²

Case 1



Mrs. Chan Age 66 A retiree

Mrs. Chan has been living in Hong Kong for almost the whole of her life. She has always been proactive about her health. Recently, she and her husband have found themselves spending more time enjoying life in Mainland China after retirement. They plan to spend half of their time in Mainland China and have already purchased a real property there.

Mrs. Chan wanted to ensure she had the high standard of healthcare that she's used to in Hong Kong. By choosing Bupa Care Bridge Health Insurance Scheme (Basic Plan), Mrs. Chan now enjoys access to privileged medical services in the Mainland China, allowing her to focus on her new chapter with her husband without worrying about expensive medical costs. She is enjoying a golden retirement in the GBA.



After 2 years enrolling in Bupa Care Bridge Health Insurance Scheme (Basic Plan), Mrs. Chan frequently experienced heart palpitations, and blood pressure remained unstable, occasionally surging so sharply that it let to severe vertigo and vomiting. She sought consultation from a registered medical practitioner and underwent a series of cardiac examinations.



She was subsequently diagnosed with severe coronary artery disease and was advised to undergo angioplasty as soon as practicable. Mrs. Chan therefore promptly contacted Bupa and submitted a pre-authorisation request for the required surgery and hospitalisation.



Once the pre-authorisation is approved by Bupa, Mrs. Chan is admitted standard private room of a designated hospital in Mainland China and received high-quality hospital care, ensuring she is never alone during these medical emergencies.



Case Illustration²²

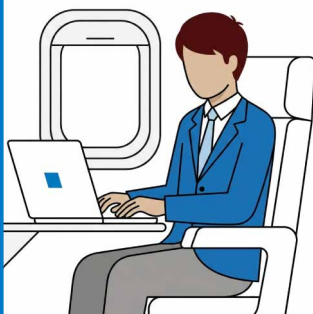
Case 2



Vincent Age 30 A Sales Manager

Vincent is a Sales Manager at a multinational advertising agency, leading dynamic campaigns across both Hong Kong and Mainland China markets. As his fast-paced role requires frequent cross-border business travel, he needs a healthcare solution that can keep up with him.

Vincent chose Bupa Care Bridge Health Insurance Scheme (Plus Plan), which provides him with the unparalleled convenience and privileged coverage that he needs when he focuses on his career, knowing his health is protected wherever his business takes him.



A year after enrolling in Bupa Care Bridge Health Insurance Scheme (Plus Plan), Vincent began experiencing persistent discomfort that raised concerns about his gastric health with heart burn and abdominal pain. While Vincent was in Hong Kong, he used the “eBooking”²¹ feature on Blua Health app to schedule a General Practitioner video consultation⁹ and was referred to a Specialist for further evaluation⁸.



Vincent called Bupa’s priority booking hotline for making an appointment and was arranged to consult a Specialist within 3 days. He also underwent a CT scan, ultrasound and biopsy. Unfortunately, Vincent was diagnosed with gastric cancer. Following Vincent’s diagnosis, a dedicated Bupa Care Manager provided support throughout his treatment, facilitate pre-authorisation request and admission to designated hospitals⁴ in Hong Kong under semi-private room.



Vincent particularly appreciated the simplified claims process and all eligible expenses for his cancer treatment were fully covered¹ and reimbursed. Following a period of recovery, Vincent successfully returned to his professional duties.



Why choose Bupa



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



Our reputation and expertise in healthcare

Providing healthcare funding and provision for people in Hong Kong and beyond

- Globally we serve over 60 million customers
- Bupa Group has been serving since 1947 and established our presence in Hong Kong in 1976
- As part of Bupa, Quality HealthCare provides primary care services through a network of over 1,650 service points in Hong Kong, including Quality HealthCare Medical Centres and affiliated clinics



Claims service

Promising you a quick and easy claims process

- Over 98% of clinical claims and hospital claims are settled within 5 working days
- Submit claims online
- Notifications when your claim has been processed



Round-the-clock support

Allowing you to manage your policy and your health at your convenience via

- 24-hour telephone support
- Mobile app and website

Enrol now!

We hope you'll choose our Bupa Care Bridge Health Insurance Scheme for comprehensive coverage. You can enrol or learn more in the following ways.



Frequently Asked Questions

Please visit Bupa's website (bupa.com.hk/care-bridge)

Remarks

1. Please refer to the Summary of Benefits for the items eligible for full cover. Full cover is only applicable to covered expenses and subject to the annual benefit limit, deductible and restricted ward class set out in the Summary of Benefits. Please refer to the Policy for details.
2. Clinical Benefit is only applicable to Bupa Care Bridge Health Insurance Scheme (Plus Plan).
3. Prior to confinement in designated hospitals, please submit a pre-authorisation request form to Bupa for approval at least 2 working days prior to admission in Hong Kong, and at least 5 working days prior to admission in Mainland China. Once the pre-authorisation is approved, you can enjoy standard private room in Mainland China and semi-private room in Hong Kong. If no pre-authorisation has been submitted, or if the pre-authorisation is not approved, you may still be admitted to ward room at designated hospitals in Mainland China and Hong Kong.
4. Please visit Bupa's website (bupa.com.hk/care-bridge) for the list of designated hospitals in Hong Kong and Mainland China. This list is subject to change from time to time.
5. "Greater China" shall include Hong Kong, Macau, Mainland China and Taiwan.
6. If your Body Mass Index is considered as overweight, underweight or you're aged 65 or above at enrolment, Bupa may ask you to submit a check-up report as part of your health insurance application process.
7. Bupa guarantees that your cover can be renewed every year for life, as long as you meet the requirements as stated in the renewal provisions of your policy terms and conditions.
8. Clinical Benefit can only be used at Designated Service Centres. Please scan the QR code on your welcome pack for the full list of Designated Service Centres eligible under Clinical Benefit. This list is subject to change from time to time.
9. Video consultation for general practice and traditional Chinese medicine consultations under Plus Plan. You must be physically located in Hong Kong to use the video consultation services. Please take note that certain medical conditions are not suitable for video consultations, including but not limited to urgent, emergency or critical medical situations. If you are uncertain about whether you have been able to explain your medical concerns through video consultation, you should always seek advice from a doctor in person. Video consultations for general practice and traditional Chinese medicine outpatient services are available exclusively via the eBooking feature of Bluea Health app. Medication delivery cost is to be paid by the insured person. Medication will generally be delivered on the same day for consultations completed before 6:00 PM (Monday to Friday) or 1:00 PM (Saturday). In certain circumstances, such as courier unavailability, delivery may be postponed to the next working day. Delivery service is available only to patients residing in Hong Kong Island, Kowloon, the New Territories, and selected areas of the outlying islands (Tung Chung, Discovery Bay, and Ma Wan). Patients living in other parts of the outlying islands must collect their medication in person at the designated clinic.
10. At the time of renewal, the discount will be applied to the renewal premium and premium loading of Bupa Care Bridge Health Insurance Scheme, if no claim on Basic Benefit was paid during the specific period.
11. Family discount will be applied to the standard premium and premium loading of Bupa Care Bridge Health Insurance Scheme only. The discount will be valid as long as the eligible family members are all covered under a Bupa Care Bridge Health Insurance Scheme at the same time.
12. Value-added services are not part of Bupa Care Bridge Health Insurance Scheme.
13. The concierge service helps you to arrange one-way transportation of up to 50 km, departing from a designated hospital located within Shenzhen to your place of residence if you reside in Shenzhen or Hong Kong, or to drop you off at Futian Port or Luohu Port. For cross-border journeys to Hong Kong, travel is limited to via Shenzhen Bay Port or Huanggang Port. For non-cross-border travels, transportation is available within Shenzhen only and no intercity travel. This service is limited to transport booking, and all costs of the transportation (e.g. vehicle hire, tolls, tips to driver, etc.) will be payable by the insured person. This service is subject to terms and conditions.
14. The cashless service for prescribed diagnostic imaging tests is applicable during confinement and does not available to outpatient services in Mainland China.
15. Doctors will be available during scheduled office hours to support the nurses in answering enquiries. Office hours: Mon - Fri, 9am to 6pm (Hong Kong time), except public holidays.
16. The 24-hour Mental Health Service Hotline is applicable to insured persons aged 18 or above. Insured persons aged below 18 must be accompanied by the Policy Holder or guardian to use this service. Terms and conditions apply. Please refer to the Policy for details. International call charges may apply to the caller if the call is made outside Hong Kong.
17. Free Bupa Worldwide Assistance Programme is not part of Bupa Care Bridge Health Insurance Scheme. Please inform Bupa in writing if you don't want to receive this free benefit.
18. You are required to book an appointment with the designated healthcare service provider in advance to receive outpatient specialist practice, traditional Chinese medicine, physiotherapy, X-ray and laboratory tests. You may use eBooking feature on Bluea Health app or contact Bupa priority booking hotline at (852) 8100 0456 via phone call to make a reservation for the required service. While advance booking is not required for general practice outpatient services, you are encouraged to make a reservation to ensure timely access and service availability.

Remarks

19. Specialist consultations can be scheduled within 3 days, subject to the availability of each designated service centre.
20. Blua Health is offered, distributed and operated by Horizon Health and Care Limited. myBupa is offered, distributed and operated by Bupa (Asia) Limited. Horizon Health and Care Limited and Bupa (Asia) Limited are companies registered in Hong Kong under the Bupa Group. Blua Health is not a licensed insurance agent of Bupa (Asia) Limited, nor does it represent Bupa to conduct any insurance activities. The fact that Blua Health provides myBupa feature does not constitute and should not be construed as Blua Health conducting any Regulated Activities as defined by the Insurance Ordinance, Chapter 41 of the Laws of Hong Kong, or any insurance activities.
eBooking and ePharmacy features on Blua Health are provided by our healthcare service provider. Terms and conditions apply.
22. These case illustrations are fictional and solely for illustration purposes. None of these illustrations constitute and can be construed as any admission of claim and liability on the part of Bupa. Your coverage depends on the specific terms of the insurance policy.

Important information

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

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

Waiting period

The waiting period for Bupa Care Bridge Health Insurance Scheme is as follows:

| | |
|------------------|--|
| Basic Benefit | <ul style="list-style-type: none">- No waiting period, coverage starts as soon as your policy is in effect.- Complications of pregnancy will be payable provided that such complication results from a conception which occurred 12 months after the policy effective date. |
| Clinical Benefit | No waiting period, coverage starts as soon as your policy is in effect. |

Cooling-off period

If you're not fully satisfied with this plan, you have the right to change your mind. You can cancel your plan during the cooling-off period (i.e. within 21 days after the delivery of policy documents to you). You'll need to make your cancellation request in writing and return all your policy documents to Bupa. Then you'll receive a full refund of the premiums paid as long as no benefits have been paid.

Please refer to the "Notice on cooling-off period of your Policy" enclosed in your welcome pack for details.

Cancellation rights

You can cancel your policy at any time by giving 30 days' written notice to Bupa. However, cancellation is only available if no benefits have been paid during the relevant policy year.

Disclosure of information for underwriting

During the insurance application process, it's important that you act with utmost good faith and disclose all material facts to Bupa. If you are uncertain as to whether a fact is material, then it should be disclosed. If you fail to disclose or misrepresent a material fact which may impact Bupa's risk assessment, this will raise questions about your entitlement to insurance benefits. Consequences may include cancellation of your policy or reduction of entitlement to claims payments.

Deductible

A deductible is the amount of eligible expenses that you must pay each policy year before Bupa will reimburse your eligible medical expenses. You can choose from 3 deductible options (Basic Plan): HK\$0, HK\$5,000, HK\$10,000; 4 deductible options (Plus Plan): HK\$0, HK\$10,000, HK\$30,000 or HK\$60,000. The deductible won't apply to Clinical Benefit. If you use your medical card to pay your expenses, you'll need to reimburse Bupa for the deductible amount afterwards. If you don't use your medical card, then Bupa will reimburse your eligible medical expenses after subtracting the deductible amount. Please refer to the Policy and Summary of Benefits for details.

Claims procedure

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

Premium adjustment

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

Any claims you make won't affect your premium at renewal. However, renewal premiums may still increase as you get older. Bupa may adjust the standard premium rate on an overall portfolio basis with reference to factors such as medical inflation, general operating expenses and revision of benefits to cover increasing medical expenses. In this case, the portfolio is all Bupa Care Bridge Health Insurance Scheme policies with the same level of coverage under the same terms and conditions and benefit schedule (i.e., one portfolio each for all plans under Basic Plan with HK\$0 Deductible, HK\$5,000 Deductible and so on).

Important information

Renewal

This policy will last for 1 year and will be renewed with premium payments collected automatically, unless you submit a written request to cancel your policy. Bupa guarantees that your cover can be renewed every year for life as long as you meet the requirements as stated in the renewal provisions of your policy terms and conditions, regardless of any changes in your health condition.

Bupa may revise the benefits, contract terms and conditions every year at renewal. During the renewal process, we'll notify you in writing if there are any changes.

Payment of premiums

You should pay your premium annually or monthly, based on the payment method selected during the application process. If you've fulfilled the eligibility criteria for renewal, we will charge your premium automatically at the next policy renewal, unless we have received other instructions from you.

In addition, you're allowed a 60-day grace period after the premium due date to complete the payment process.

During that time, your policy will still be in effect but no benefits will be paid until the premium is paid. However, if you still haven't paid your premium when the grace period ends, your policy will be terminated from the premium due date.

Termination of your policy

Your policy will be terminated automatically in the following situations:

1. non-payment of premiums after a grace period of 60 days after the premium due date;
2. upon the death of the insured person; or
3. Bupa has ceased to have the requisite authorisation under the Insurance Ordinance to write or continue to write this policy.

Changing to a new insurance plan

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

General exclusions

1. Any Pre-existing Conditions (unless such conditions have been disclosed in the application and accepted by Bupa).
2. Expenses incurred for treatments, procedures, medications, tests or services which are not medically necessary.
3. Expenses incurred for the whole or part of the confinement solely for the purpose of diagnostic procedures or allied health services, including but not limited to physiotherapy, occupational therapy and speech therapy, unless such procedure or service is recommended by a registered medical practitioner for medically necessary investigation or treatment of a disability which cannot be effectively performed in a setting for providing medical services to a day patient.
4. Expenses arising from Human Immunodeficiency Virus ("HIV") and its related disability, which is contracted or occurs before the policy effective date. Irrespective of whether it is known or unknown to the policy holder or the insured person at the time of submission of application, including any updates of and changes to such requisite information (if so requested by Bupa under Section 6 of Part 1 of the Policy Terms and Benefits) such disability shall be generally excluded from any coverage of these Terms and Benefits if it exists before the policy effective date. If evidence of proof as to the time at which such disability is first contracted or occurs is not available, manifestation of such disability within the first five (5) years after the policy effective date shall be presumed to be contracted or occur before the policy effective date, while manifestation after such five (5) years shall be presumed to be contracted or occur after policy effective date.
However, the exclusion under this entire Section 4 shall not apply where HIV and its related disability is caused by sexual assault, medical assistance, organ transplant, blood transfusions or blood donation, or infection at birth, and in such cases the other terms of the Policy Terms and Benefits shall apply.
5. Expenses incurred for medical services as a result of disability arising from or consequential upon the dependence, overdose or influence of drugs, alcohol, narcotics or similar drugs or agents, self-inflicted injuries or attempted suicide, illegal activity, or venereal and sexually transmitted disease or its sequelae (except for HIV and its related disability, where Section 4 of these General exclusions applies).

Important information

6. Any charges in respect of services for -
 - a. beautification or cosmetic purposes, unless necessitated by Injury caused by an accident and the insured person receives the medical services within one (1) year of the accident; or
 - b. correcting visual acuity or refractive errors that can be corrected by fitting of spectacles or contact lens, including but not limited to eye refractive therapy, LASIK and any related tests, procedures and services.
7. Expenses incurred for prophylactic treatment or preventive care, including but not limited to general check-ups, routine tests, screening procedures for asymptomatic conditions, screening or surveillance procedures based on the health history of the insured person and/or his family members, Hair Mineral Analysis (HMA), immunisation, health supplements, co-payment (if any) incurred Part 7 of the Policy Terms and Benefits. For the avoidance of doubt, this Section 7 does not apply to -
 - a. treatments, monitoring, investigation or procedures with the purpose of avoiding complications arising from any other medical services provided;
 - b. removal of pre-malignant conditions; and
 - c. treatment for prevention of recurrence or complication of a previous disability.
8. Expenses incurred for dental treatment and oral and maxillofacial procedures performed by a dentist except for emergency treatment and surgery during confinement arising from an accident. Follow-up dental treatment or oral surgery after discharge from hospital shall not be covered.
9. Except for the complications of pregnancy benefit payable under Section 3(o) of Part 6 of the Policy Terms and Benefits, expenses incurred for medical services and counselling services relating to maternity conditions and its complications, including but not limited to diagnostic tests for pregnancy or resulting childbirth, abortion or miscarriage; birth control or reversal of 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 or pre-mature ejaculation, regardless of cause.
10. Expenses incurred for Senile Dementia (including Alzheimer's disease), Parkinson's disease and psychological or psychiatric condition(s) of any and all kinds, including but not limited to psychoses, neuroses, depression, anxiety, anorexia nervosa, schizophrenia, behavioural disorders, delirium, insomnia, neurasthenia. (applicable to Basic Plan only)
11. Expenses incurred for the purchase of durable medical equipment or appliances including but not limited to wheelchairs, beds and furniture, airway pressure machines and masks, portable oxygen and oxygen therapy devices, dialysis machines, exercise equipment, spectacles, hearing aids, special braces, walking aids, over-the-counter drugs, air purifiers or conditioners and heat appliances for home use. For the avoidance of doubt, this exclusion shall not apply to rental of medical equipment or appliances during confinement or on the day of the day case procedure.
12. Except for (i) the consultation or acupuncture by a Registered Chinese Medicine Practitioner after confinement or specific treatments benefit payable under Section 3(r) of Part 6 of the Policy Terms and Benefits; and (ii) the consultation and basic Medically Necessary Chinese Medicines prescribed by a Registered Chinese Medicine Practitioner payable under Section 4 of Part 7 of the Policy Terms and Benefits (applicable to Plus Plan only), expenses incurred for traditional Chinese medicine treatment, including but not limited to herbal treatment, bone-setting, acupuncture, acupressure and tui na, and other forms of alternative treatment including but not limited to hypnotism, qigong, massage therapy, aromatherapy, naturopathy, hydrotherapy, homeotherapy and other similar treatments.
13. Expenses incurred for experimental or unproven medical technology or procedure in accordance with the common standard, or not approved by the recognised authority, in the locality where the treatment, procedure, test or service is received.
14. Expenses incurred for medical services provided as a result of congenital condition(s) which have manifested or been diagnosed before the insured person attained the age of eight (8) years.
15. Eligible expenses which have been reimbursed under any law, or medical program or insurance policy provided by any government, company or other third party.
16. Expenses incurred for treatment for disability arising from war (declared or undeclared), civil war, invasion, acts of foreign enemies, hostilities, rebellion, revolution, insurrection, or military or usurped power.

Important information

17. Any charges incurred at a medical practitioner, hospital or healthcare facility unrecognised by Bupa, including but not limited to charges for the following treatment:
- i. Treatment provided by a medical practitioner, hospital or healthcare facility, or otherwise any person or establishment which is not recognised by the relevant authorities in Hong Kong or any other place where the treatment takes place as having specialist knowledge, or expertise in, the treatment of the disease, illness or injury being treated;
 - ii. Treatment provided by the insured person himself, his relatives, family or business partners or anyone with the same residence as the insured person or in case the treatment is provided in an establishment, that one of the above-mentioned persons is a shareholder and/or having a power to control such establishment unless it has been made known to and approved by Bupa; or
 - iii. Treatment provided by a medical practitioner, hospital or healthcare facility whom Bupa do not or no longer recognise for the purposes of Bupa's insurance plans.

A list of unrecognised medical practitioners and providers can be found at the Company's mobile app or website. The list is subject to update from time to time without prior notice.

Medically necessary

We only cover the expenses of the insured person when they are medically necessary and reasonable and customary. "Medically necessary" means the need for a medical service for the purpose of investigating or treating the relevant disability in accordance with the generally accepted standards of medical practice. This service must:

- require the expertise of, or be referred by, a registered medical practitioner;
- be consistent with the diagnosis and necessary for the investigation and treatment of the disability;
- be in accordance with standards of good and prudent medical practice, and not be primarily for the convenience or the comfort of the insured person, his/her family, caretaker or the attending registered medical practitioner;
- be provided in the setting that is most appropriate in the circumstances and in accordance with the generally accepted standards of medical practice for the medical services; and
- be at the most appropriate level which, in the professional judgment of the attending registered medical practitioner, can be safely and effectively provided to the insured person.

Additional factors will be considered to assess whether a hospitalisation is medically necessary, e.g. the need for emergency treatment, general anaesthesia, specific equipment in hospital, etc. If a hospitalisation is considered not medically necessary, benefits payable will be adjusted.

Reasonable and customary

In relation to a charge for medical services, "reasonable and customary" means a level which does not exceed the general range of charges being charged by relevant service providers in the locality where the charge is incurred for similar treatment, services or supplies to individuals with similar conditions, e.g. of the same sex and similar age, for a similar disability, as reasonably determined by Bupa in utmost good faith. The reasonable and customary charges shall not in any event exceed the actual charges incurred.

In determining whether a charge is reasonable and customary, we will make reference to the following (if applicable):

- treatment or service fee statistics and surveys in the insurance or medical industry;
- internal or industry claim statistics;
- gazette published by the government; and/or
- other relevant sources in the locality where the treatments, services or supplies are provided.

Important information

Choice of ward class and adjustment for voluntary upgrade

Your eligible expenses will be covered regardless of your confined ward class. However, if your confined ward class is higher than the ward class listed in your Summary of Benefits, your coverage will be adjusted as follows:

| Restricted ward class | Actual confined ward class | Adjustment |
|-----------------------|---|---------------------------------------|
| Ward room | Semi-private room | Multiplied by a 50% adjustment factor |
| Ward room | Standard private room | Multiplied by a 25% adjustment factor |
| Ward room | Above standard private room including suite, VIP or deluxe room | 0% adjustment factor |
| Semi-private room | Standard private room | Multiplied by a 50% adjustment factor |
| Semi-private room | Above standard private room including suite, VIP or deluxe room | 0% adjustment factor |
| Standard private room | | |

The adjustments above will apply except when the upgrade in ward class is due to:

- unavailability of a restricted or lower ward class due to room shortage at the hospital for emergency treatment;
- confinement in isolation that requires a specific ward class; or
- any other reason not involving the insured person's own individual preference for the confined ward class.

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Bupa
保柏

保柏連繫
醫療保障計劃



中港兩地優質醫療選擇 無縫守護你的健康

香港與中國大陸的醫療服務日趨融合發展，賦予客戶更多元的醫療選擇，並提升就醫靈活性。隨著香港公營醫療系統的輪候時間不斷延長，中國大陸提供一個更快捷且便利的替代方案。這一轉變反映出年輕一代更具前瞻性的思維，他們對跨境醫療方案的接受度亦不斷提高。

「保柏連繫醫療保障計劃」於香港和中國大陸提供覆蓋全面的醫療網絡，確保周全的醫療保障都近在咫尺。每年保障額由港幣500萬元至1,500萬元，合資格醫療費用均獲全數賠償¹。

本計劃不設終身保障限額，不論過往的索償次數，每年保障額亦會重新還原，確保在你最需要的時候，守護始終如一。設有兩個計劃級別，每個級別亦提供靈活的自付費選擇，讓你因應人生不同階段規劃自己的醫療保障。

本計劃最獨特之處在於將門診保障²融入核心的住院計劃之中，讓你以一份保險計劃獲得更全面的健康守護。

我們進一步提升你的保障，加入預防性健康管理、免找數服務，以及一系列的專屬健康服務。讓你在日常生活中，體驗前所未有的靈活性。

特點



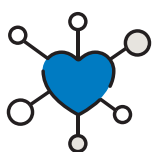
全數賠償¹合資格醫療費用

不設細項賠償限額及終身保障限額。



簡易核保程序

只需回答5條健康問題即可完成核保程序。無需漫長等待，亦無需繁複的醫療檢查。



靈活的選項以滿足你的需要

於兩個計劃級別中靈活選擇不同自付費選項。



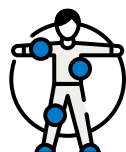
門診住院二合一²

透過將全面的門診服務直接納入核心保障範圍，確保你由診斷、治療以至康復均獲周全支援，而不僅限於住院期間。



無須額外保費即可享有更高級別病房選擇³

選擇指定醫院⁴，讓你在康復期間享有更卓越舒適的住院體驗。於香港的指定醫院⁴可保證升級入住半私家房；而於中國大陸的指定醫院⁴則可安排入住舒適的標準私家房。



預防性健康管理

以尊享價享用全面的健康檢查服務，讓你更緊貼自己的健康狀況，防患於未然。



計劃概要

保障一覽表

| | 基本計劃 | 升級計劃 |
|-----------------------|--|--|
| 基本保障 | | |
| 每年保障限額 (港幣) | 500萬 | 1,500萬 |
| 終身保障限額 | 不設終身保障限額 | |
| 保障地域範圍 | 非急症治療： | |
| | 中國大陸 | 大中華區 |
| | 急症治療： | |
| | 全球 | |
| 自付費選項 (港幣) (每保單年度) | 0 / 5,000 / 10,000 | 0 / 10,000 / 30,000 / 60,000 |
| 病房級別 | 大房 於中國大陸的指定醫院 ⁴ ：標準私家房* *須取得初步保障審核 ³ | 大房 於香港的指定醫院 ⁴ ：半私家房* 於中國大陸的指定醫院 ⁴ ：標準私家房* *須取得初步保障審核 ³ |
| 門診保障 | | |
| 保障地域範圍 | 不適用 | 香港 |
| 門診服務 | | ✓ 以優惠的共付費 |

投保資格

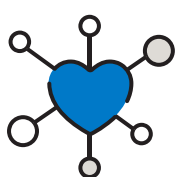
| | |
|-------|--|
| 保單持有人 | 18歲或以上 |
| 受保人 | <ul style="list-style-type: none">保單持有人保單持有人之配偶、子女、孫子女保單持有人或其配偶之父母、(外)祖父母、兄弟姊妹保單持有人之同居伴侶或其父母、子女 |
| 投保年齡 | 保單生效時年齡須為15日至80歲 (包括首尾歲數) |
| 投保 | <ul style="list-style-type: none">投保前無須進行醫療檢查⁶基本計劃僅限持有香港身份證之人士投保 |
| 續保 | 保證終身續保 ⁷ |

主要特點



全數賠償¹合資格醫療費用

享有每年港幣500萬元至1,500萬元的保障額，且不設終身保障限額，讓你安心享用優質的醫療服務，無須為保障額憂慮。



靈活的選項以滿足你的需要

- 選擇合適的保障以切合生活所需：基本計劃專注涵蓋中國大陸醫療需要，而升級計劃則將保障延伸至覆蓋大中華區(即包括香港、澳門、中國大陸及台灣)。無論選擇任何計劃，保柏均為你提供周全的全球緊急支援，時刻守護在你身邊。
- 透過選擇配合你財務規劃的自付費，即可降低年度保費。我們為你提供不同計劃級別及自付費選項以供選擇：

| 計劃級別 | 基本計劃 (港幣) | 升級計劃 (港幣) |
|--------|--------------------|------------------------------|
| 保障地域範圍 | 中國大陸 | 大中華區 |
| 自付費選項 | 0 / 5,000 / 10,000 | 0 / 10,000 / 30,000 / 60,000 |



無須額外保費即可享有更高級別病房選擇³

升級計劃覆蓋香港、澳門、中國大陸及台灣的住院保障。你可選擇指定醫院⁴，並於無須額外保費下，於中國大陸及香港享有較高級別病房，在整個住院及康復期間提升舒適度與私隱度。

指定醫院⁴

| 中國大陸 | 香港 |
|-----------|----------|
| 房間可升級至 | |
| 標準私家房 | 半私家房 |

非指定醫院

| 大中華區 |
|--------|
| 大房 |



簡易核保程序

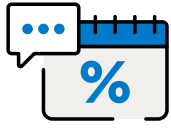
- 只需回答 5 條健康問題即可完成核保程序。
- 優化核保流程，只需回答最少問題，為你節省時間。



透過指定服務中心⁸享門診服務²

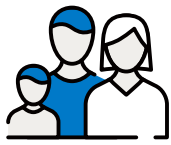
- 升級計劃提供門診保障，讓你於香港超過400個指定服務中心⁸體驗方便快捷的醫療服務。
- 無縫整合的醫療服務，全面照顧你的日常健康需要，涵蓋普通科醫生、專科醫生及中醫師診症，並包括視像診症⁹。即使面對慢性疾病，亦可享持續護理，全方位守護終身健康。
- 升級計劃同時涵蓋物理治療、X光及化驗，你可於指定服務中心⁸接受相關服務。

其他特點



無索償續保折扣¹⁰

- 如無索償記錄，續保時保費可獲85折至95折優惠。
- 無索償記錄之年期：
 - 連續2或3個保單年度：95折
 - 連續4或5個保單年度：9折
 - 連續6個或以上保單年度：85折



家庭折扣¹¹: 與家人一同投保, 即可尊享家庭折扣優惠

- 兩名合資格家庭成員一同投保：9折
- 三名或以上合資格家庭成員一同投保：85折



保證續保

保柏保證每年續保你的保障至終身，無論你因保單生效後所患疾病索償多少，保費只會根據你的年齡而調整⁷。



增值服務¹²

本計劃特設一系列保障及服務，全面照顧你的身心健康。



預防性健康管理

預防是實現全面健康保障的基礎。兩個計劃級別均提供於指定服務點以尊享優惠選購全面健康檢查，助你及早發現潛在健康問題，掌握健康狀況。



醫療接送服務(禮賓服務)¹³

我們致力為你打造更舒適、無縫的求醫體驗。此服務為你提供 6 座位專車禮賓服務，當你從深圳的指定醫院出院後，為你安排以專車返回居所（包括跨境前往香港），讓行程更安心順暢。



藥物搜尋服務

若你獲特定腫瘤藥物處方，我們可協助你於中國大陸尋找合規的購買及使用渠道。專屬健康顧問將透過電話提供支援，包括藥房資訊查詢或安排藥物取得方式，安排直接付款、藥物配送或預約領取，確保你能及時便捷地獲得所需治療。



免找數服務

我們明白在患病期間處理醫療費用可能帶來身心及財務壓力。透過免找數服務，你可無需為付款安排分心，專注於康復，相關費用將由我們代為安排處理。

如於香港(只限升級計劃)及中國大陸的指定醫院⁴進行住院、訂明診斷成像檢測¹⁴、訂明非手術癌症治療及日間手術，需於住院或治療前申請初步保障審核並獲批後，我們將代為支付已批准的醫療費用。

如投保升級計劃，你可憑保柏醫療關懷卡在香港的指定服務中心⁸享用免找數服務接受特定門診服務及治療。



第二醫療意見

我們在你的整個醫療旅程中提供貼心支援。此服務可安排來自中國大陸及香港醫療網絡的醫療專家為你提供專業的²第二意見，協助釐清疑問，讓你掌握病情從而決定治療方法。



升級計劃之額外服務



健康支援服務

我們時刻伴你左右，特設「健康支援服務」，由醫生、合資格護士和健康管理團隊為你提供個人化的健康支援及協助，讓你安心無憂。當遇上較嚴重的疾病時，此服務更可提供額外支援，助你復原。

- **24小時健康專線**

我們的合資格健康管理團隊¹⁵可為你提供協助及指導—由怎樣照顧患病親友，以至與你討論病情及治療方案等。

- **健康顧問**

我們的健康顧問可與你緊密聯絡，跟進你的索償、全程協助你的治療至康復過程，包括解釋你的治療計劃和醫療開支以至安排跟進治療。當你入住本港私家醫院時並得到你的同意下，我們可前往醫院探望你或致電慰問你。

- **醫療中心選擇**

我們可根據你的指定情況或需要為你提供診所及醫院名單以供參考。

- **慢性疾病管理計劃**

此計劃提供個人生活習慣建議及健康管理，包括專人電話跟進，助你積極控制慢性疾病如糖尿病。



關注及支援情緒健康

除住院精神科治療可獲賠償外，更設有免費24小時情緒解碼熱線¹⁶，為你提供個人化情緒支援及面談輔導服務。



升級計劃之額外服務



全方位癌症支援服務 助你重踏健康人生

當面對癌症治療的挑戰時，保柏的癌症支援服務將成為你的最強後盾。我們結合不同的專業醫療團隊，為你提供全面的癌症治療、支援及關懷服務。主要服務包括：



護士專線



個人化治療計劃



特快預約服務



綜合健康支援

我們全程積極跟進並將治療信息透明化，全心全意陪伴你走過抗癌之路的每一步。



掃描二維碼了解更多



一站式專科治療計劃

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

健康·一心守護

涵蓋多項專科，照顧不同醫療需要



優質網絡診所及設施



資深醫療團隊由診症、治療以至跟進，全程提供支援



憑合資格醫療卡可享免找數服務



有關專科治療計劃的詳情及最新資訊，請瀏覽保柏網站。



升級計劃之額外服務



免費保柏國際援助計劃¹⁷

凡投保保柏連繫醫療保障計劃，均可獲贈「免費保柏國際援助計劃」。當你於海外或國內需要醫療支援時，此計劃可為你提供協助。



保柏優先預約服務¹⁸

享受無縫、無憂的預約體驗，你可使用Blua Health手機應用程式的「診症預約」功能或透過致電保柏優先預約服務熱線 (852) 8100 0456預約門診診症服務, 例如於3天內預約專科門診¹⁹。



保障、健康 全掌握

你只需要一個手機應用程式Blua Health²⁰，即可掌控你的健康和保險計劃。



管理你的保險計劃

你可透過Blua Health內的myBupa功能隨時隨地管理你的計劃、兌換獨家優惠、搜尋你偏好的網絡醫生和診所、提交索賠等功能。



管理你的健康及賺取獎賞

健康是你最寶貴的財富，保持健康的身心，是對自己及家人最大的承諾。Blua Health應用程式透過AI科技助你管理健康，達成目標更可賺積分換禮品，輕鬆收獲健康！你更可利用「診症預約」及「配藥易」功能²¹以獲得更全面的健康方案，滿足你日常的健康需求和長期的健康目標，助你更有效地管理健康！



免費使用多項
健康互動功能



30秒AI評估你的
身心健康



與AI教練隨時
隨地一起健身



賺取積分以換
領健康獎賞



一站式預約多
項醫療服務



簡單幾步即可
訂購處方藥



立即下載 Blua Health，
未來健康由你掌握！

案例示範²²

案例1



陳太 66歲 退休人士

一直居住於香港的陳太一向十分注重自己的健康，退休後她與丈夫在中國內地享受生活的時間漸多，計劃一半時間居於內地，並已於當地置業。

陳太希望即使身處內地仍能享有在香港慣用的高水平醫療服務，因此，她選擇投保保柏連繫醫療保障計劃（基本計劃）。透過該計劃，陳太現可於內地享用優質的醫療服務，無需擔心高昂醫療開支，得以與丈夫安心展開人生新篇章，享受在大灣區的黃金退休生活。



在投保保柏連繫醫療保障計劃（基本計劃）兩年後，陳太開始頻繁出現心悸症狀，血壓亦持續不穩，並不時急劇上升，導致嚴重暈眩及嘔吐。她隨即諮詢註冊醫生，並接受一系列心臟檢查。



其後被確診患有嚴重冠狀動脈疾病，並獲建議儘快接受血管成形術。陳太隨即聯絡保柏，並提交有關手術及住院的初步保障審核申請。



保柏批准初步保障審核後，陳太隨即入住於中國大陸的指定醫院的標準私家房，讓她接受優質的住院治療與貼心照顧，確保在每一個關鍵醫療時刻，她都能獲得周全支援，安心無憂。



案例示範²²

案例2



Vincent 30歲 銷售經理

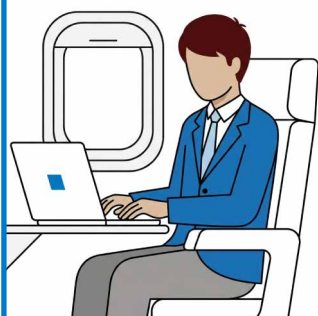
Vincent是一間跨國廣告公司的銷售經理，負責統籌香港及中國大陸兩地市場的創意推廣項目。由於工作節奏急速，並需頻繁往返兩地進行商務出行，他需要一個能緊貼其工作步伐的醫療保障方案，為健康提供全面支援。

Vincent選擇投保保柏連繫醫療保障計劃(升級計劃)，在專注事業發展的同時，享有便利及尊尚醫療保障，讓他無論身處何地，均能安心無憂，專心投入工作。

在投保保柏連繫醫療保障計劃(升級計劃)一年後，Vincent開始出現持續性的胃部不適，包括胃灼熱及腹痛等症狀，令他對自身腸胃健康感到關注。當時身處香港的Vincent透過Blua Health手機應用程式的「診症預約」²¹功能，預約了普通科醫生的視像診症⁹，並隨後獲轉介至專科醫生作進一步檢查⁸。

Vincent亦致電保柏的優先預約熱線安排相關診症，並於三日內成功會見專科醫生。他其後接受了電腦掃描、超聲波檢查及活組織檢查。不幸的是，Vincent最終被確診患上胃癌。在確診後，保柏為他安排了一位專屬健康顧問，全程支援其治療過程，包括協助初步保障審核申請及安排於香港的指定醫院⁴入院接受治療，並入住半私家房。

Vincent對計劃的簡化索償流程尤為欣賞，其癌症治療所涉及的所有合資格醫療開支均獲全數保障及賠償¹。經過一段時間的治療及康復後，Vincent順利重返工作崗位，繼續投入其專業事業。



保柏－你的明智之選



保柏是國際醫療保健專家，我們致力為客戶提供多元化的醫療保險計劃，助你應付不同人生階段的需要。



信譽卓著的 醫療保健專家

我們於香港及世界各地提供醫療保險及醫療保健服務

- 於全球服務超過6,000萬客戶
- 保柏集團自1947年起為大眾服務，並於1976年設立香港分部
- 作為保柏集團的一份子，卓健醫療透過逾1,650個服務點，包括旗下卓健醫療中心，連同聯營診所，為市民及社區服務



賠償服務

我們承諾為你提供快捷簡便的索償服務

- 超過 98%之門診索償和住院索償於5個工作天完成賠償處理
- 網上索償服務
- 當賠償辦妥後，你將收到通知



24小時支援

全面支援，讓你隨時隨地管理保單及掌握健康

- 24小時客戶服務專線
- 手機應用程式及網站

立即投保！

投保「保柏連繫醫療保障計劃」，盡享全面保障。請透過以下途徑投保或了解更多詳情。



常見問題

請瀏覽保柏網站(bupa.com.hk/care-bridge)

備註

1. 有關全數賠償所涵蓋的項目，請參閱保障摘要。全數賠償只適用於合資格費用，並受限於保障摘要所列的每年保障限額、自付費及指定病房級別。詳情請參閱保單。
2. 門診保障僅適用於保柏連繫醫療保障計劃（升級計劃）。
3. 如入住香港的指定醫院，請提前至少 2 個工作天，向保柏提交初步保障審核申請。如入住中國大陸的指定醫院，則須提前至少 5 個工作天提交申請。一旦初步保障審核獲批，你即可於中國大陸享用標準私家房及於香港享用半私家房。若未有提交初步保障審核或初步保障審核不被接納，你仍可於中國大陸及香港的指定醫院入住大房。
4. 請瀏覽保柏網站 (bupa.com.hk/care-bridge)，查閱香港及中國大陸指定醫院名單。此名單可能會不時更改。
5. 「大中華區」包括香港、澳門、中國大陸及台灣。
6. 如你於投保時的身高體重比例屬過重、過輕或年齡為 65 歲或以上，保柏或會要求你提交健康檢查報告，以便處理你的申請。
7. 保柏保證每年續保你的保障至終身，惟你須符合保單條款及細則內所列明的續保要求。
8. 門診保障只可於指定服務中心使用。請掃描你的迎新文件上的二維碼查閱適用於門診保障的完整指定服務中心名單，此名單可能會不時更改。
9. 升級計劃涵蓋普通科及中醫門診的視像診症服務。你必須身處香港境內方可使用視像診症服務。請注意，視像診症並不適合某些或若干醫療狀況，包括但不限於急症、緊急或危急醫療狀況。如不確定是否可透過視像診症服務解釋你的醫療問題，則應親自尋求醫生的建議。普通科及中醫門診的視像診症服務僅限透過 Blua Health 手機應用程式內的「診症預約」功能進行預約。受保人須支付藥物運送費。於星期一至五下午 6 時前或星期六下午 1 時前進行的診症，藥物將於當日運送。在其他情況下，例如由於速遞商未能提供服務或受疫情限制，藥物則於下一個工作天運送。運送服務只適用於居住在香港島、九龍、新界及部分離島（東涌、愉景灣及馬灣）患者的地址。如患者居住於其他離島地區，則需到指定診所領取藥物。
10. 續保時，如於指定的期限內並未有支付任何基本保障賠償，折扣會用於扣減保柏連繫醫療保障計劃之續保保費及其附加保費。
11. 家庭折扣只適用於保柏連繫醫療保障計劃之標準保費及其附加保費。合資格家庭成員須全部同時受保於另一個保柏連繫醫療保障計劃，方可獲得折扣。
12. 增值服務並不屬保柏連繫醫療保障計劃的一部分。
13. 本禮賓服務為你安排單程接送服務，由深圳的指定醫院出發至你於深圳或香港之居所，亦可選擇福田口岸或羅湖口岸作為目的地，車程距離最長以 50 公里為限。跨境行程僅限經深圳灣口岸或皇崗口岸前往香港；非跨境行程則僅限於深圳市內（不包括跨城市行程）。此服務僅限於專車預約，所產生的所有交通費用（如車租、道路費用、司機小費等）將由受保人自行承擔。此服務須受條款及細則約束。
14. 免找數服務僅適用於住院期間所進行的訂明診斷成像檢測，並不涵蓋中國大陸的門診服務。
15. 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。
16. 24 小時情緒解碼熱線適用於 18 歲或以上的受保人，18 歲以下的受保人需於保單持有人或監護人陪同下使用此服務。受條款及細則約束，詳情請參閱保單。如於香港以外地區致電，通話者可能須支付國際通話費用。
17. 免費保柏國際援助計劃並不屬保柏連繫醫療保障計劃的一部分。若你不希望獲得此免費保障，請透過書面通知保柏。
18. 如需接受專科門診診症、中醫診症、物理治療、X 光及化驗檢查，請提前向指定醫療服務供應者預約。你可使用 Blua Health 手機應用程式上的「診症預約」功能或致電保柏優先預約服務熱線 (852) 8100 0456 預約所需服務。雖然普通科門診服務無須預約，但我們鼓勵你先行預約，以確保能及時獲得所需服務。
19. 3 日內可約見專科門診，須視乎每間指定服務中心的預約餘額而定。
20. Blua Health 由 Horizon Health and Care Limited 提供、發佈及營運。myBupa 由保柏（亞洲）有限公司提供、發佈及營運。Horizon Health and Care Limited 及保柏（亞洲）有限公司同為保柏集團旗下在香港註冊的公司。Blua Health 並非保柏（亞洲）有限公司的保險代理中介人或代表其進行任何保險活動。就 Blua Health 提供 myBupa 功能一事上，不構成及不能詮釋為 Blua Health 進行任何在香港法例第 41 章《保險業條例》內所訂明的受規管活動或任何保險活動。
21. Blua Health 手機應用程式上的「診症預約」及「配藥易」功能由我們的醫療服務供應者提供。受條款及細則約束。
22. 此等案例示範純屬虛構，並僅供說明用途。此等案例不構成及不能被視為保柏接納任何保險索償及承認任何責任。你的保障範圍取決於相關保險保單的特定條款。

重要資料

本冊子乃資料摘要，僅供參考之用。請務必細閱完整的保險保單，以了解計劃之保障範圍、一般不保事項、條款及細則。

我們想幫助你在投保前了解本計劃。請細閱以下資料。

等候期

保柏連繫醫療保障計劃之等候期如下：

| | |
|------|---|
| 基本保障 | <ul style="list-style-type: none">- 不設等候期，保單生效後即可獲得保障。- 懷孕併發症之保障只會賠償在保單生效日後首12個月之後受孕並因而引起的相關併發症。 |
| 門診保障 | 不設等候期，保單生效後即可獲得保障。 |

冷靜期

若你並非完全滿意這份保單，你有權改變主意。你可於冷靜期內（即保單文件交付予你後21日內）取消你的保單。請以書面方式提出取消保單之要求，並連同所有保單文件交回保柏。若你並無獲得任何賠償，將可獲全數退還已繳保費。

詳情請參閱隨迎新信件附上的「保單冷靜期通知」。

取消保單權益

你可在30日前以書面方式通知保柏要求取消你的保單。但請留意取消保單只適用於該保單年度內沒有就保單獲得任何賠償的情況。

有關核保之資料披露

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

自付費

自付費指每保單年度在保柏應付賠償金額前，必須由你承擔的合資格醫療費用。基本計劃設有三項自付費選擇：港幣0元、港幣5,000元或港幣10,000元。升級計劃設有四項自付費選擇：港幣0元、港幣10,000元、港幣30,000元或港幣60,000元。自付費不適用於門診保障。若你使用醫療卡支付費用，你須於稍後向保柏付還自付費金額。若你沒有使用醫療卡，有關自付費金額將在保柏應賠償支付的費用中扣除。詳情請參閱保單及保障摘要。

索償步驟

任何索償須按照保柏所訂的索償程序進行。所有有關該索償的所須文件正本須於出院後或接受治療後90天內遞交，否則保柏將不能處理你的賠償，或會導致索償被拒。

保費調整

每名受保人的首期保費會根據年齡、健康狀況及保障選擇等因素而定。

你的保費並不會因曾作出索償而被調高。然而，續保保費或會因年齡遞增而相應調整。保柏可按醫療通脹、一般營運開支及因應醫療開支增加而作出的保障改動等因素，向所有同一類別保單調整標準保費率。在此情況下，同一類別保單指所有相同保障等級並具備相同條款及細則和保障表的保柏連繫醫療保障計劃保單（即港幣0元自付費的基本計劃、港幣5,000元自付費的基本計劃等均為獨立的類別）。

續保

本保單生效期為期一年並會自動續保及收取保費，除非你以書面提出取消保單。無論你在投保後的健康狀況有任何改變，保柏保證每年續保你的保障至終身，只要你符合保單條款及細則內列明的續保要求。

保柏可於每年續保時更改保單條款及保障。所有改動將於續保前以書面提前通知保單持有人。

重要資料

繳付保費

你應按申請時所選擇的繳費方式年繳或月繳保費。如你符合續保的資格條件，保柏將於保單續保時從自動轉賬戶口或信用卡戶口自動扣取續保保費，除非我們接獲你的其他指示。

另外，保柏將給予60日繳交保費的寬限期，由保費到期日起計。你的保單於寬限期內仍然生效，惟在收到保費前，你將不會獲支付任何賠償，直至保費已獲繳清。若在寬限期屆滿後你仍未繳清保費，你的保單會於保費到期日起終止。

終止保單

你的保單將在以下情況時自動終止：

1. 在60日繳費寬限期屆滿時仍未繳交保費；
2. 受保人身故；或
3. 保柏不再獲《保險業條例》授權承保或繼續承保本保單。

轉換至新的保險計劃

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

一般不保事項

1. 任何投保前已有病症（已於投保申請文件披露並於登記加入時獲本公司接納為承保範圍內則除外）。
2. 任何非醫療所需治療、治療程序、藥物、檢測或服務的費用。
3. 若純粹為接受診斷程序或專職醫療服務（包括但不限於物理治療、職業治療及言語治療）而住院，該住院期間所招致的全部或部分費用。惟若該等程序或服務是在註冊醫生建議下因而進行醫療所需的診斷，或無法以為日症病人提供醫療服務的方式下有效地進行的傷病治療，則不屬此項。
4. 在受保人的保單生效日前，因感染或出現人體免疫力缺乏病毒（“HIV”）及其相關的傷病所招致的費用。不論保單持有人或受保人在遞交投保申請文件（若本公司在第一部分第6節提出要求，則包括相關必需資料的任何更新及改動）時是否知悉，若此傷病在受保人的保單生效日前已存在，本條款及保障則不會賠償此傷病。若無法證明初次感染或出現此傷病的時間，則此傷病於保單生效日起計五(5)年內發病，將被推定為於保單生效日前已感染或出現；若在這五(5)年後發病，將被推定為於保單生效日後感染或出現。
惟本第4節的不保事項並不適用於因性侵犯、醫療援助、器官移植、輸血或捐血、或出生時受HIV感染所引致的傷病，有關賠償將按本條款及保障內其他條款處理。
5. 因倚賴或過量服用藥物、酒精、毒品或類似物質（或受其影響）、故意自殘身體或企圖自殺、參與非法活動、或性病及經由性接觸傳染的疾病或其後遺症(HIV及其相關的傷病將按本一般不保事項第4節處理)的醫療服務費用。
6. 以下服務的收費 –
 - a. 以美容或整容為目的的服務，惟受保人因意外而受傷，並於意外後一(1)年內接受的必要醫療服務則不屬此項；或
 - b. 矯正視力或屈光不正的服務，而該等視力問題可透過驗配眼鏡或隱形眼鏡矯正，包括但不限於眼部屈光治療、角膜激光矯視手術 (LASIK)，以及任何相關的檢測、治療程序及服務。
7. 預防性治療及預防性護理的費用，包括但不限於並無症狀下的一般身體檢查、定期檢測或篩查程序、或僅因受保人及／或其家人過往病歷而進行的篩查或監測程序、頭髮重金屬元素分析、接種疫苗、健康補充品、根據條款及保障第7部分產生就本計劃需繳付的共付費(如有)。為免生疑問，本第7節並不適用於 –
 - a. 為了避免因接受其他醫療服務引起的併發症而進行的治療、監測、檢查或治療程序；
 - b. 移除癌前病變；及
 - c. 為預防過往傷病復發或其併發症的治療。
8. 牙科醫生進行的牙科治療及口腔頷面手術的費用，惟受保人因意外引致在住院期間接受的急症治療及手術則不屬此項。出院後的跟進牙科治療及口腔手術則不會獲得賠償。
9. 除第六部分第3(o)節懷孕併發症保障外，下列醫療服務及輔導服務的費用 - 產科狀況及其併發症，包括但不限於懷孕、分娩、墮胎或流產的診斷檢測；節育或恢復生育；任何性別的結紮或變性；不育（包括體外受孕或任何其他人工受孕）；以及性功能失常，包括但不限於任何原因導致的陽萎、不舉或早泄。

重要資料

一般不保事項

10. 因老年性痴呆（包括阿茲海默氏症）、帕金森病、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、神經衰弱等所產生之費用。（僅適用於基本計劃）
11. 購買屬耐用用品的醫療設備及儀器的費用，包括但不限於輪椅、床及家具、呼吸道壓力機及面罩、可攜式氧氣及氧氣治療儀器、血液透析機、運動設備、眼鏡、助聽器、特殊支架、輔助步行器具、非處方藥物、家居使用的空氣清新機或空調及供熱裝置。為免生疑問，住院期間或日間手術當日所租用的醫療設備及儀器則不屬此項。
12. 除受保於(i)第六部分第3(r)節住院或指定治療後由註冊中醫師提供之診症或針灸的保障；及(ii)第七部分第4節由註冊中醫師提供之診症及其處方之基本醫療所需中藥（僅適用於升級計劃）外，傳統中醫治療的費用，包括但不限於中草藥治療、跌打、針灸、穴位按摩及推拿，以及另類治療，包括但不限於催眠治療、氣功、按摩治療、香薰治療、自然療法、水療法、順勢療法及其他類似的治療。
13. 按接受治療、治療程序、檢測或服務所在地的普遍標準（或尚未經當地認可機構批准）界定為實驗性或未經證實醫療成效的醫療技術或治療程序的費用。
14. 受保人年屆八(8)歲前發病或確診的先天性疾病所招致的醫療服務費用。
15. 已獲任何法律，或由任何政府、僱主或第三方提供的醫療或保險計劃賠償的合資格費用。
16. 因戰爭（不論宣戰與否）、內戰、侵略、外敵行動、敵對行動、叛亂、革命、起義、或軍事政變或奪權事故所招致的治療費用。
17. 在未經保柏認可的醫生、醫院或醫療保健機構產生的任何費用，包括但不限於以下治療的費用：
 - i. 由醫生、醫院或醫療保健機構提供的治療，或任何人或機構在香港或進行治療的地方的有關當局不認可其具有治療方面的專業知識進行或提供醫療、疾病或受傷的治療；
 - ii. 由受保人本人、其親屬、家人或商業夥伴或與受保人同住的任何人所提供的治療，若治療在一所機構進行，則上述人士是該機構的股東及／或持有該機構的控制權，除非已告知本公司並獲其批准；或
 - iii. 由本公司未有或不再因應其保險計劃而認可的醫生、醫院或醫療保健機構所提供的治療。未經認可的醫生及供應商的列表可參閱本公司的手機應用程式或網站查閱。此列表可能會不時更新，恕不另行通知。

醫療所需

保柏只會根據「醫療所需」和「合理及慣常」的原則，為受保人所需支付的費用及／或開支作出賠償。

「醫療所需」是指按照一般公認的醫療標準，就診斷或治療相關傷病接受醫療服務的需要，而醫療服務必須符合下列條件：

- 需要註冊醫生的專業知識或轉介；
- 符合該傷病的診斷及治療所需；
- 按良好而審慎的醫學標準及主診註冊醫生審慎的專業判斷提供，而非主要為對受保人、其家庭成員、照顧人員或主診註冊醫生帶來方便或舒適而提供；
- 在環境最適當及符合一般公認的醫療標準的設備下，提供醫療服務；及
- 按主診註冊醫生審慎的專業判斷，以最適當的水平向受保人安全及有效地提供。

評估該次住院是否醫療所需的考慮因素包括：急症治療、全身麻醉、醫院專用設備的必要性等。如該次住院被視為非醫療所需，保障賠償將會作出調整。

合理及慣常

「合理及慣常」是指就醫療服務的收費而言，對情況類似的人士（例如同性別及相近年齡），就類似傷病提供類似治療、服務或物料時，不超過當地相關醫療服務供應者收取的一般收費範圍的水平。合理及慣常的收費水平由我們合理及絕對真誠地決定，在任何情況下，此收費不得高於實際收費。

保柏必須參照以下資料（如適用）以釐定合理及慣常收費：

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

重要資料

選擇病房級別及自願升級的調整

不論你在住院時入住任何病房級別，合資格醫療費用均可獲得賠償。然而，如入住的病房級別高於所選計劃的保障摘要內列明的病房級別，所獲的賠償將會按下述作出調整：

| 指定的病房級別 | 實際住院病房級別 | 調整 |
|---------|-----------------------------|-----------|
| 大房 | 半私家房 | 乘以50%的調整值 |
| 大房 | 標準私家房 | 乘以25%的調整值 |
| 大房 | 高於標準私家房 (包括總統套房、貴賓房或豪華房) | 乘以0%的調整值 |
| 半私家房 | 標準私家房 | 乘以50%的調整值 |
| 半私家房 | 高於標準私家房 (包括總統套房、貴賓房或豪華房) | 乘以0%的調整值 |
| 標準私家房 | | |

惟因以下原因入住較高級別的病房則除外：

- 在接受急症治療的情況下醫院指定病房級別或較之為低的病房級別床位短缺；
- 需要住院隔離導致需要入住特定級別的病房；或
- 任何其他不涉及受保人個人對住院病房級別偏好的原因。

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