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保柏會員指引

**Bupa Membership Guide**

# 歡迎！

歡迎你加入保柏！

我們明白有時候保險內容不易理解，因此我們為你提供此簡易的《會員指引》，清楚解釋如何管理你的保單，以及逐步說明索償步驟。

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# 聯絡我們

貴為保柏的尊貴客戶，你將會體驗到我們殷勤的服務。透過以下不同方式，你可聯絡我們或管理你的會籍。

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## 有關查詢、索償、 意見及讚賞

**24小時客戶服務專線：(852) 2517 5333**

### 辦公時間

星期一至五，上午9時至下午7時，公眾假期除外

我們樂意解答你的所有查詢。

### 辦公時間以外

我們為你解答以下查詢：

- 保柏網絡服務供應商資料（如適用）
- 保障項目資料
- 申請賠償程序及其他保單行政程序
- 賠償申請表

**電郵：customer@bupa.com.hk**

**傳真：(852) 3973 6970**

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## 健康支援服務

24小時健康專線：(852) 2517 5658

電郵：mc@bupa.com.hk

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## 保柏癌症支援服務

24小時健康專線：(852) 2517 5788

電郵：hc@bupa.com.hk

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## 海外緊急醫療事故國際支援 (不適用於保柏自願醫保 myBasic)

24 小時國際支援服務熱線：(852) 2861 9229

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## 情緒健康支援

24 小時情緒解碼熱線：(852) 2521 8186

(只適用於保柏非凡自願醫保)

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## 初步保障審核

初步保障審核專線：(852) 2517 5328

### 辦公時間

星期一至五，上午9時至下午7時，公眾假期除外

電郵：preauthapp@bupa.com.hk

傳真：(852) 3973 6966

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## 索取表格

瀏覽[www.bupa.com.hk](http://www.bupa.com.hk) > 客戶服務 > 下載表格。  
你亦可致電我們的客戶服務專線以傳真方式索取表格。

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## 致函我們或親臨本公司

地址：香港九龍觀塘海濱道 77 號海濱匯第 2 座 6 樓

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會員是否可享用以上的服務視乎投保的計劃而定。有關使用服務的詳細條款及細則，請參閱你的合約。

# 時刻伴你左右

保柏時刻伴你左右，讓你安枕無憂。除支付你的醫療費用外，保柏在你患病時給你貼身支援，減輕你的憂慮。

## 健康支援服務

我們的 24 小時健康專線由合資格護士及健康管理團隊為你提供協助及指導，例如怎樣照顧患病小孩或長者，以至助你了解病徵、診斷及治療方案，背後更有醫生作為顧問。

會員是否可享用以上的服務視乎投保的病房級別計劃而定。健康支援服務由保柏與保柏委任的服務供應商聯合提供。有關你的保障詳情，請參閱你的醫療保險保單、保障表或致電我們的客戶服務專線。

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

## 癌症支援服務

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、個人化治療計劃以及特快預約服務等。全程積極跟進並提供透明化治療信息，全心全意陪伴你走過抗癌之路的每一步。如有需要，請致電癌症支援服務專線。

## 其他查詢

有關自願醫保計劃，如有以下查詢，你可透過電郵 [vhis\\_enquiry@healthbureau.gov.hk](mailto:vhis_enquiry@healthbureau.gov.hk) 聯絡自願醫保計劃辦事處：

- 自願醫保產品提供相關事宜
- 自願醫保計劃認可產品的特點
- 實務守則的要求

有關自願醫保計劃的稅項扣減的事宜，請聯絡稅務局。

# 網上及手機服務

作為醫療保健專家，我們希望透過以下一系列的服務，讓你可隨時輕易地享用你的保障。

## 網上服務及手機應用程式

你可透過 myBupa 使用一系列的免費網上及手機服務，包括：

- 查閱電子醫療卡
- 查閱及更新會籍資料
- 網上遞交索償及補充索償資料
- 下載索償表格及其他常用表格
- 查閱賠償進度及所欠差額
- 搜尋網絡醫生及下載網絡醫生目錄，包括任中橫網絡醫院名單（如適用）
- 查閱電子賠償單及電子差額通知書（如適用）
- 查閱門診保障使用量（如適用）

請即瀏覽保柏網頁 <https://mybupa.bupa.com.hk>，免費登記使用 myBupa。

你亦可下載 myBupa 免費手機應用程式：



## myBupa 服務總覽：

	保柏 自願醫保計劃	保柏靈活配 自願醫保計劃	保柏非凡 自願醫保計劃	保柏家互通 醫療保障計劃
查閱及更新個人資料	✓	✓	✓	✓
網上遞交索償及補充索償資料	✓	✓	✓	✓
使用電子醫療卡，或使用電子入院登記以於入院前將你的會員資料傳送至所選醫院（如適用）	✗	✗	✓	✓
查閱賠償進度及所欠差額	✓	✓	✓	✓
查閱電子賠償單及電子差額通知書	✓	✓	✓	✓
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	✓	✓	✓	✓
搜尋網絡醫生及其他服務供應商，包括《任中橫網絡醫院名單》如適用）	✗	✓	✓	✓

### 賠償電子通知服務

為讓你更快獲得通知，在賠償辦妥後你將會收到我們發出的電子通知，以及郵寄給你的賠償單（如適用）。如你選擇了收取電子賠償單，你則會收到我們的電郵通知，並可於 myBupa 內查閱你的賠償單。

### Bluea Health 健康管理及獎賞

健康是你最寶貴的財富，保持健康的體魄，是對自己及家人最大的承諾。保柏的健康應用程式 Bluea Health 可助你全方位管理健康，達成進度更可賺積分換禮品，動得越多，賞得越多！

- 連接數碼健康時代，透過手機和可穿戴裝置，連接到健康 3.0
- 免費使用健康互動功能，整合多項主流功能，助你掌握健康
- 體驗 AI 健康科技，自拍 30 秒即可評估你的身心健康
- 獎勵你的健康好習慣，每日完成健康任務，即可賺積分換獎賞
- 利用「診症預約」及「配藥易」功能，預約多項醫療服務及訂購處方藥

立即下載 Bluea Health 應用程式，註冊一個帳戶並與你的 myBupa 帳戶綁定，即可享受全新功能及獎賞



Bluea Health 由保柏集團成員、香港註冊公司  
Horizon Health and Care Limited 提供、發佈及營運。

Bluea Health 並不是醫療設備，也不會提供個性化的醫療建議。該應用程式的內容並不能代替專業醫護人員的醫療建議、診斷或治療。如有任何關於醫療狀況的問題或透過該應用程式進行活動時感到身體不適，請立即向醫生或其他合資格醫護人員尋求協助。

# 享用全數賠償服務（如適用）

## 適用於選擇設有「全數賠償保障」的保單

你可選用網路保障，並於以下情況享用全數賠償服務（或不適用於保障表上某些項目，詳情請參閱保障摘要）：

- 於網絡醫生求診，入住保柏網絡醫院；及
- 於保柏網絡專科醫生求診及網絡診所/日症中心進行日症手術、訂明非手術癌症治療及訂明診斷成像檢測（下稱「治療」）

要享用全數賠償服務，你必須依循以下步驟，否則未能享用全數賠償。你須先自行繳付醫療費用，然後向保柏申請索償。

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### 入院／接受治療前

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#### 向註冊醫生求診

可透過myBupa網頁版或手機應用程式搜尋網絡普通科及專科醫生，你亦可以致電保柏查詢。

向註冊醫生求診並取得轉介信（皮膚科、家庭醫學科、婦科、眼科、骨科、耳鼻喉科、小兒外科、兒科及精神科無須轉介信）

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#### 選擇保柏網絡專科醫生

請向網絡專科醫生求診，並於登記時出示你的「保柏醫療卡」及醫生轉介信並於賠償表上簽署及保留會員副本。

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#### 請索取初步保障審核（如需要）

如需要，網絡專科醫生須在你接受治療前最少兩個工作天向保柏索取初步保障審核。

請選擇一間網絡專科醫生已掛單的保柏網絡醫院或日症中心，而該網絡專科醫生必需是你的主診醫生。你必須入住與你的計劃保障級別相同之病房。

當你的初步保障審核成功獲得批核，我們會通知你的網絡醫生及醫院或日症中心。

初步保障審核並不代表最終的賠償決定。本公司將根據索償文件作出最終審核。你需要自行繳付任何額外或不符合資格的費用。

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## 接受治療

### 如入院接受治療

請於入院時出示你的「保柏醫療卡」。你無須繳付入院按金，請於出院時在醫院已為你準備的賠償申請表上簽署，並以你的「保柏醫療卡」支付醫療費用。

### 如接受網絡診所手術或 在日症中心接受日症治療

請於登記時出示「保柏醫療卡」及網絡專科醫生之轉介信。請在賠償表上簽署並以你的「保柏醫療卡」繳付醫療費用。

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## 接受治療後

### 接獲賠償通知

當你的賠償辦妥後，你將會收到賠償電子通知、郵寄之賠償單或差額通知書（如適用），如你選擇了以電子形式收取這些文件，則會收到我們的電郵通知。

### 繳付墊底費（自付費）或 差額（如有）

如醫療費用超出你的保障限額或不屬於保障範圍，便會出現差額，請於收到差額通知書後14天內繳付差額。

註：如你有任何未繳付的差額或保費，保柏保留權利暫停你的「保柏醫療卡」及／或暫停發放任何賠償款項。

向保柏索取初步保障審核時，你須要提供信用卡資料。保柏將在你的信用卡保留港幣 500 元的信用額，直至索償程序完結為止。

### **為什麼需要初步保障審核？**

初步保障審核可帶給你安心，我們將會確認你的「全數賠償保障」及預先為你批核醫療費用，讓你可放心接受治療及休養。

### **何時需要初步保障審核？**

如須入院治療、接受日症及診所手術、訂明診斷成像檢測（按保柏供應商指引之要求），均須索取初步保障審核。

### **如在獲得保柏初步保障審核確認前緊急入院，我該怎辦？**

如你在辦公時間以外的緊急情況下接受治療，只要合乎初步保障審核的要求，你可於接受治療或入院後的下一個工作天補辦審核。

# 享用住院免找數服務（如適用）

你可於指定的香港私家醫院及保柏服務供應商使用你的「保柏醫療卡」享用免找數服務。你可於 myBupa 查找指定醫院及供應商的名單, 名單不定時更新。憑卡可繳付所有合資格的醫療費用, 以賠償限額和適用的信用額為限, 無須申請索償。

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## 入院／接受治療前

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### 索取初步保障審核

- 你須於入院／接受治療前最少兩個工作天向保柏索取初步保障審核。
- 於保柏網站或myBupa下載「初步保障審核表格」, 或致電我們的客戶服務專線索取。

### 住院

- 請自行填妥第一部分, 及請你的專科醫生填妥第二部。請與你的專科醫生選擇一間本港私家醫院。

### 進行日間手術

- 請自行填妥第一部分, 及請你的專科醫生填妥第二部分。請選擇一間保柏指定供應商以接受治療。

### 進行訂明診斷成像檢測及非手術癌症治療

- 請自行填妥第一部分, 及請你的註冊醫生填妥第二部分。請選擇一間保柏指定供應商以接受治療。
- 將已填妥的初步保障審核表格電郵、傳真或郵寄給我們。

當你的初步保障審核申請獲批核後, 保柏會以電郵或電話形式通知你, 或按你的要求向你寄出「初步保障審核確認／付款保證信」（下稱「預先批核信」）。我們亦會通知醫院或日症中心。

初步保障審核並不代表最終的賠償決定。本公司將根據索償文件作出最終審核。你需要自行繳付任何額外或不符合資格的費用。

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## 接受治療

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### 如入院接受治療

如入院接受治療請於登記時出示你的「保柏醫療卡」，你無須繳付入院按金。請於出院前在醫院已為你準備的賠償申請表上簽署。

你須自行支付不合資格或超出「預先批核信」上所示之信用額的醫療費用。

### 如在醫院或指定日症中心進行日間手術或診所進行訂明診斷成像檢測或非手術癌症治療

請出示你的「保柏醫療卡」。請在賠償表上簽署並以你的「保柏醫療卡」繳付合資格的醫療費用。

你須自行支付不合資格或超出「預先批核信」上所示之信用額的醫療費用。

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## 接受治療後

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### 接獲賠償通知

當你的賠償辦妥後，你將會收到賠償電子通知、郵寄之賠償單或差額通知書（如適用），如你選擇了以電子形式收取這些文件，則會收到我們的電郵通知。

### 繳付墊底費（自付費）或差額（如有）

如醫療費用超出你的保障限額或不屬於保障範圍，便會出現差額，請於收到差額通知書後14天內繳付差額。

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註：如你有任何未繳付的差額或保費，保柏保留權利暫停你的「保柏醫療卡」及／或暫停發放任何賠償款項。

向保柏索取初步保障審核時，你須要提供信用卡資料。保柏將在你的信用卡保留港幣 500 元的信用額，直至索償程序完結為止。

## 入住香港以外的醫院（適用於保柏非凡自願醫保）

在入住海外醫院前，請致電保柏的 24 小時客戶服務專線，以確認你的治療是否受保，及取得預先批核。一經批核，我們會向醫院提供文件，證明保柏會支付的保證金額，讓你可享免找數服務。當你登記入院時，謹記出示你的醫療卡。如你入住海外醫院時並未取得預先批核，我們將不能為你安排住院免找數服務，請先繳付醫療費用，然後向保柏索償，請參閱此指引的「申請索償」部分。

## 如在獲得初步保障審核確認前緊急入院，我該怎辦？

如你未獲取「付款保證信」，你便須繳付入院按金。但只要在出院前獲得初步保障審核確認，你仍可使用墊支服務。

## 如我於私家醫院的日症中心接受治療，我可享用墊支服務嗎？

可以，墊支服務亦適用於在香港指定私家醫院的日症中心接受的治療。

# 享用門診網絡保障（如適用）

如你附加了自選「門診保障」，便可在本港的網絡診所或診斷中心使用「保柏醫療卡」，以享免找數服務及獲全數賠償合資格的門診治療費用。要享有「網絡保障」的全數賠償，請按以下的步驟求診。否則，合資格的索償將於「非網絡保障」下賠償。

## 視像診症服務

如你附加了自選門診保障，更可享受視像診症服務，安坐家中讓我們特選的醫生為你進行視像診症。詳情請瀏覽 [www.bupa.com.hk/vc](http://www.bupa.com.hk/vc)

### 求診前

#### 選擇網絡醫生

你可透過myBupa網頁版或手機應用程式搜尋網絡醫生，你亦可以致電保柏查詢。

#### 接受網絡醫生診症

於登記時出示「保柏醫療卡」。

如普通科醫生建議你接受專科治療（皮膚科、家庭醫學科、婦科、眼科、骨科、耳鼻喉科、小兒外科、兒科及精神科除外）、物理治療或診斷成像及化驗，醫生會給你轉介信。此外，保柏亦接受由註冊中醫及脊醫發出用於X光及化驗的轉介信。

如普通科醫生或中醫建議你進行診斷成像及化驗，醫生需於你進行診斷成像／化驗前兩個工作天按保柏供應商指引之要求向保柏索取初步保障審核。

如精神科醫生建議你接受臨床心理輔導，醫生會給你轉介信。

#### 如需要接受網絡內的專科治療、物理治療或診斷成像及化驗

請出示你的「保柏醫療卡」及醫生轉介信，並於賠償表上簽署及保留會員副本（皮膚科、家庭醫學科、婦科、眼科、骨科、耳鼻喉科、小兒外科、兒科及精神科無須轉介信）。

註：

向保柏索取初步保障審核時，你須要提供信用卡資料。保柏將在你的信用卡保留港幣 500 元的信用額，直至索償程序完結為止。

會員可在轉介信發出日起計 6 個月內，就相同或相關病症使用該轉介信。若診治全新或不相關的病症，則須提交新的轉介信。

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## 求診時

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### 完成診症及領取藥物時

診所會為你準備賠償表及列明相關診治資料及藥物詳情。  
請細閱及確認相關資訊後簽署。

如醫療費用超出你的保障限額或不屬於保障範圍，你或須稍後繳付差額予保柏。

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## 求診後

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### 接獲賠償通知

當你的賠償辦妥後，你將會收到賠償電子通知、郵寄之差額通知書（如適用），如你選擇了以電子形式收取差額通知書，則會收到我們的電郵通知。

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### 繳付差額（如有）

如醫療費用超出你的保障限額或不屬於保障範圍，便會出現差額，請於收到差額通知書後14天內繳付差額。保柏會在發出差額通知書後第21日直接從你指定的信用卡賬戶自動收取差額。

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註：

如你有任何未繳付的差額或保費，保柏保留權利暫停你的「保柏醫療卡」及／或暫停發放任何賠償款項。

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。

如進行診斷影像或化驗，請要求你的網絡醫生按保柏供應商指引之要求向保柏辦理初步保障審核。

## 如果我沒有選用網絡醫生或沒有跟隨以上步驟求診，賠償將如何處理？

你仍可獲得賠償，但必須先行繳付醫療費用，然後向保柏索償，有關保障將根據非網絡保障賠償限額支付。

## 若網絡醫生轉介的專科治療不在網絡內，可怎麼辦？

請要求你的網絡醫生向保柏辦理初步保障審核，成功批核後，保柏會發出「初步保障審核確認信」給你的醫生及致電通知你。向該專科醫生登記時，請出示醫生轉介信（皮膚科、家庭醫學科、婦科、眼科、骨科、耳鼻喉科、小兒外科、兒科及精神科專科治療無須轉介信），並先行繳付醫療費用，然後連同其他索償文件申請索償。

## 享用牙科治療保障（如適用）

如你附加了自選「牙科保障」，便可在本港的網絡牙科中心享免找數服務及獲全數賠償合資格的牙科治療費用(如有網絡保障)。請按以下的步驟求診：

<b>選擇網絡牙科中心</b>	<b>你可透過myBupa搜尋網絡牙科中心。你亦可致電保柏查詢。</b>
<b>於網絡牙科中心接受診症</b>	於登記時出示香港身份證及「保柏醫療卡」/myBupa手機應用程式以核實你的身份。 於賠償表上簽署及保留會員副本。 請注意，如你未有出示「保柏醫療卡」或直接向網絡牙科中心繳付費用，合資格的索償將於非網絡牙科中心保障下賠償，並以保障表上的賠償限額為限。

你亦可在非網絡牙科中心接受保障範圍內的牙科服務，然後申請索償。詳情請參閱保障表。

## 申請預先批核（如適用）

如你的保單持有一些保障需要取得預先批核，你可依循以下步驟取得預先批核，否則你或未能完全享用保障表上所示之保障：

索取「保柏醫療初步保障審核表格（個人計劃適用）」	瀏覽 <a href="http://www.bupa.com.hk">www.bupa.com.hk</a> > 客戶服務 > 下載表格 你亦可致電我們的客戶服務專線 (852) 2517 5333 以傳真方式索取表格。
填妥初步保障審核表格	填妥表格的第一部分，並請你的主診醫生為你填妥第二部分。
向保柏遞交初步保障審核表格	以電郵、傳真或郵寄方式向我們遞交初步保障審核表格。  當你的初步保障審核申請獲批核後，保柏會以電郵或電話形式通知你，或按你的要求向你寄出「預先批核信」。我們亦會將此信傳真到你的特選醫院。  你須於你入院／接受治療前最少兩個工作天向我們索取初步保障審核。



# 申請索償（先繳費、後索償）

如你未有使用「保柏醫療卡」繳付醫療費用或你的「保柏醫療卡」並不適用於繳付醫療費用，請依循以下步驟申請索償。不論住院或門診索償，你均可選擇遞交賠償申請表或登入myBupa使用網上索償服務。

## 賠償服務承諾

我們承諾在收到填妥之賠償申請表及全部所需文件後5至7個工作天內支付賠償。

接受治療後，請依循以下簡單步驟申請索償。

<b>索取賠償申請表</b>	瀏覽 <a href="http://www.bupa.com.hk">www.bupa.com.hk</a> > 客戶服務 > 下載表格 你亦可致電我們的客戶服務專線(852) 2517 5333以傳真索取表格。 如你選擇使用網上索償服務，請直接登入myBupa。
<b>收集所需文件</b>	請參閱此指引「實用索償提示」部份內列出的所需文件。
<b>填妥賠償申請表</b>	你須自行填妥住院賠償申請表的第一部分。而你的主診醫生須為你填妥及簽署住院賠償申請表的第二部分，並加上蓋印。 你亦可透過網上索償服務，提交索償及上載所需文件。
<b>遞交賠償申請表</b>	請於接受治療後或出院後90曆日內把賠償申請表正本連同所需文件寄回保柏。 如你選擇使用網上索償服務，請保留所需文件正本，無須寄回保柏。
<b>查詢你的索償進度</b>	你可登入myBupa或致電我們的客戶服務專線查詢你的索償進度。
<b>賠償通知</b>	當你的賠償辦妥後，你將會收到賠償電子通知、郵寄之賠償單，如你選擇了以電郵形式收取賠償單，則會收到我們的電郵通知。
<b>收取賠償款項</b>	我們會以自動轉賬方式將賠償款項存入你指定的銀行戶口。

## 如患上特定嚴重疾病，應如何申請保費豁免？ （只適用於“保柏家互通醫療保障計劃”）

從第二個保單年開始，如果任何一位受保人被診斷出患有癌症、急性心肌梗塞或中風，受保人可獲一年的保費豁免。此外，為了在你的家人接受治療和康復期間支持你，保單覆蓋的每個家庭成員的保費都將被豁免一年。根據保單持有人的書面要求及提交相關證明文件，一年保費豁免將於下一個保單年度生效，適用於住院及手術保障和自選保障（如適用）之保費。詳細條款及細則請參閱保單。請按照以下步驟申請保費豁免：

1. 在住院賠償申請表中勾選保費豁免選項。
2. 請你的主診醫生填寫「保柏危疾賠償申請表」。你可以透過客戶服務專線獲得表格。
3. 在治療或出院後的90日（曆日）內，交回已填妥之賠償申請表及所有收據正本。

# 實用索償提示（先繳費、後索償）

我們希望可儘快完成你的賠償，因此特別提供以下實用提示，確保你的索償獲得迅速處理。

## 提交索償時限

請謹記於出院前向醫院或完成診治後索取所需文件，並於出院後 90 曆日內透過 myBupa 或郵寄提交住院索償。保柏在收妥賠償表格及所需文件後，將於 5-7 個工作天內處理賠償。

## 與索償所需文件有關的費用

申請索償時，你可能須要索取賠償文件及自付有關費用。如在香港的政府醫院接受治療，請注意：

- 如在出院後才向醫院索取出院紙，醫院會收取費用，因此謹記於出院前索取出院紙
- 政府醫院簽發醫療報告，可能會收取費用

## 密切跟進你的索償

如你有遺漏任何所需文件以致賠償未能完成，我們會即時以書面或電郵通知你。

## 如我有「產科保障」，應如何申請索償？

請登入 myBupa 並於「提交門診索償／住院治療」頁面提交有關產科的索償申請。你應在以下日子起的 90 曆日內，因懷孕引致之合資格費用作出索償申請：

- 產前及產後檢查當日；
- 出院當日；或
- 分娩後。

「保柏醫療卡」不適用於所有門診的治療費用，以及與懷孕有關的費用。

## 所需文件

### 住院索償

如索償住院治療、於診所或醫院日症中心內接受的手術或治療，所需文件包括：

- 已填妥之「保柏住院賠償申請表」
- 收據正本，包括所有按金單據
- 如醫院提供留醫賬單，請切記寄回。留醫賬單上面須註明診治日期、病人姓名、醫生姓名及每一項收費項目，並附有醫院蓋印、醫生簽署及加上蓋印
- 如醫院提供醫生收費單，請一併寄回。醫生收費單上面須註明診治詳情和每一項收費項目
- 如於香港的政府醫院留醫，請提交出院紙。出院紙上面須註明病症及診治詳情
- 醫療報告，例如 X 光報告、超聲波報告及 / 或血液測試報告等
- 如有住院專科醫生、訂明診斷成像檢測、出院後／日間手術後之門診護理之費用，請提交由主診醫生或註冊醫生發出的轉介信
- 如你已獲其他醫療保險賠償，請同時附上其他保險公司的賠償單

註：會員可在轉介信發出日起計 6 個月內，就相同或相關病症使用該轉介信。若診治全新或不相關的病症，則

須提交新的轉介信。

### 門診索償

如索償門診費用，包括手術前後的門診治療、牙科治療費用，或與懷孕有關的門診（如適用）費用，所需文件包括：

- 已填妥之「保柏門診賠償申請表」
- 收據正本，上面須註明診治日期、病人姓名、服務供應商名稱及地址、病症、收費類別及項目，並附有醫生簽署及加上蓋印
- 中西藥藥方，上面須註明病人姓名、病症、藥物資料包括藥物名稱、劑量及用途、處方藥物的日期，並附有醫生簽署及加上蓋印
- 如有專科醫生、物理治療、脊醫治療、職業治療、言語治療、診斷成像或化驗之費用等，請提交由註冊醫生發出的轉介信（保柏亦接受由註冊中醫/脊醫發出用於 X 光及化驗的轉介信）
- 臨床心理輔導須提交由精神科醫生發出的轉介信
- 如索償手術或住院前後的門診診症，請提交醫院收據副本，並謹記在「保柏門診賠償申請表」內「出院後之跟進覆診」選項中勾選「是」。若在住院前已獲保柏初步保障審核確認，則無須提交醫院收據副本

註：

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。

會員可在轉介信發出日起計 6 個月內，就相同或相關病症使用該轉介信。若診治全新或不相關的病症，則須提交新的轉介信。

# 保證續保

保柏希望以我們的專業知識給你支援，無論你因會籍開始後所患疾病索償多少，你都可以續保，保費只會根據你的年齡而調整。你的會籍將會每年自動續保並自動收取保費，流程如下：

<b>續保通知</b>	<b>你會於續保前約6個星期收到續保通知。</b>
<b>更改保障</b>	你可於合約週年日前一個月聯絡你的健康管理顧問，更改你的保障級別、增加或刪減自選保障或更改你的繳費方式。
<b>收取保費及完成續保</b>	<p>如你已選擇以自動轉賬或信用卡繳交保費，在我們沒有接獲你的其他指示下，續保保費將於以下日期被自動扣取：</p> <ul style="list-style-type: none"><li>● 如以自動轉賬付款，保費將於繳費到期日扣取</li><li>● 如以信用卡付款，保費將於繳費到期日7個工作天前扣取</li></ul> <p>請於續保前繳交差額(如有)。如你想終止保障，請於合約週年日前最少10天以書面通知保柏。</p>

# 保障以外的免費服務

保柏不單在你患病時給你保障，讓你無須擔心醫療費用，同時我們亦為你提供一系列的免費服務，包括：

## 免費保柏國際援助計劃（如適用）

無論你身在何地，保柏國際援助計劃時刻支援你。若在海外因發生緊急事故而入院，此服務會為你提供海外住院按金保證或墊支服務，以及緊急醫療運送回會員居住的國家。如在海外需要協助，請致電 24 小時國際支援服務熱線 (852) 2861 9229。此服務由保柏指定服務供應商提供。有關服務詳情，請參閱你的合約及登入 myBupa 查閱你的保柏國際援助計劃詳情。

## 於中國內地入院而無須預繳按金（如適用）

如你於中國內地旅遊期間因意外或疾病須要在當地住院，你可於任何一間「任中橫網絡」醫院接受治療而無須預繳入院按金（以保單訂明上限為限，詳情請參閱合約）。你只致電 24 小時國際支援服務熱線 (852) 2861 9229，便可查詢最就近的「任中橫網絡」醫院以及入院程序。你亦可登入 myBupa 查閱「任中橫網絡」醫院名單。請於出院時支付所有住院費用，其後你可向保柏索償合資格的醫療費用。

## 會員尊享禮遇

我們特別為保柏客戶特選一系列健康、保健及休閒生活相關的會員尊享禮遇。立即登入 myBupa 查看並領取！

## Welcome!

Welcome to our Bupa family!

Sometimes insurance terms can be hard to follow, so we've made this guide as simple as possible. You'll find individual sections that help you manage your policy and a step-by-step guide to making a claim.

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# Contact us

As one of our valued customers, we want you to know we're always here for you. You can contact us or manage your membership in various ways.

<b>Get in touch for questions, claims, suggestions and compliments</b>	<b>24-hour Customer Care Helpdesk:</b> <b>(852) 2517 5333</b> <u>Office hours</u> <b>Mon - Fri (Except Public holiday) 9am to 7pm</b> <b>We are happy to address all of your enquiries</b> <u>Non-office hours</u> <b>We are able to provide below services</b> <b>1. Our network provider information</b> <b>2. Benefit information</b> <b>3. Claims procedure and other administration procedures</b> <b>4. Claims forms</b> <b>Email: <a href="mailto:customercare@bupa.com.hk">customercare@bupa.com.hk</a></b> <b>Fax: (852) 3973 6970</b>
<b>Access Health Coaching Services</b>	<b>24-hour Healthline: (852) 2517 5658</b> <b>Email: <a href="mailto:mc@bupa.com.hk">mc@bupa.com.hk</a></b>
<b>Bupa CancerCare</b>	<b>24-hour Healthline: (852) 2517 5788</b> <b>Email: <a href="mailto:hc@bupa.com.hk">hc@bupa.com.hk</a></b>
<b>Worldwide Emergency Assistance Service (not applicable to Bupa myBasic VHIS)</b>	<b>24-hour Worldwide Emergency Hotline:</b> <b>(852) 2861 9229</b>
<b>Mental Health Support (only applicable to Bupa Hero)</b>	<b>24-hour Mental Health Service:</b> <b>(852) 2521 8186</b>
<b>Apply for pre-authorisation</b>	<b>Pre-authorisation hotline: (852) 2517 5328</b> <u>Office hours</u> <b>Mon - Fri (Except Public holiday) 9am to 7pm</b> <b>Email: <a href="mailto:preauthapp@bupa.com.hk">preauthapp@bupa.com.hk</a></b> <b>Fax: (852) 3973 6966</b>
<b>Obtain forms</b>	<b>Visit: <a href="http://www.bupa.com.hk">www.bupa.com.hk</a> &gt; Customer Care &gt; Download forms</b> <b>You can also ask our Customer Care team to send you any form by fax</b>
<b>Write to us or visit us</b>	<b>Address:</b> <b>6/F, Tower 2, The Quayside,</b> <b>77 Hoi Bun Road,</b> <b>Kwun Tong, Kowloon, Hong Kong</b>

Availability of the above services is dependent on your enrolled plan. Please refer to your contract and schedule of benefit for details.



# Always there for you

We are here for you at all times, offering utmost peace of mind. Apart from paying your medical bills, we minimise your worries through personal support when you are unwell.

## Health Concierge Service

Our 24/7 Healthline is staffed with a team of qualified nurses and health management professionals, supported by doctors, providing assistance and guidance from how to care for a sick child or the elderly to discussing your symptoms, diagnoses and treatment options.

Availability of the above services is dependent on your contract. Our service is provided by Bupa and Bupa's service provider. For your eligibility on the Health Coaching Services, please refer to your Policy, Benefit Schedule, or our Health Concierge Helpdesk.

The use of Health Concierge Service is free of charge. If the services suggested by us are not covered under your insurance plan, you will be responsible for the fees incurred.

## Cancer Care

Bringing together a connected team approach, we can offer an integrated cancer care support system to all our members, including a dedicated nurse hotline, tailored treatment plan, fast-tracked booking, and more. By providing transparent information and proactive follow-ups, we support all our members at every step of their cancer care journey. Please call our Cancer Care hotline at if you are in need.

## Other Enquiries

You can contact the VHIS Office of the Health Bureau at [vhis\\_enquiry@healthbureau.gov.hk](mailto:vhis_enquiry@healthbureau.gov.hk) for the below VHIS enquiries

- VHIS product availability
- Features of VHIS Certified Plans
- Compliance with the Code of Practice

Please contact the Inland Revenue Department with questions about tax deduction.

# Web and mobile services

Making your life easier is part of how we deliver expert healthcare. We have created a range of support services to help you stay in control of your cover at a time that is convenient to you.

## Online and Mobile App

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

- access to your e-Medical card
- check and update your membership details
- submit claims online and provide information to resolve pending claims
- download claim forms and other frequently used forms
- check your claims status and any outstanding shortfalls
- access to “Network doctor finder” and Network Provider List including Medpass (if applicable)
- view claims e-statements and shortfall e-invoices (if applicable)
- view your Clinical Benefit usage (if applicable)

Please visit <https://mybupa.bupa.com.hk> and register your myBupa account.

You may also download the myBupa mobile app free of charge!



## myBupa Service overview

	myBasic	myFlexi	Bupa Hero	All Together
Check and update your personal details	✓	✓	✓	✓
Submit claims online and provide information to resolve pending claims	✓	✓	✓	✓
Access to your e-Medical card, or e-Admission for confinement (if applicable)	X	X	✓	✓
Check your claims status and any outstanding shortfalls	✓	✓	✓	✓
View claims e-statements and shortfall e-invoices (if applicable)	✓	✓	✓	✓
View your Clinical Benefit usage (if applicable)	X	✓	✓	✓
Download claim forms and other frequently used forms	✓	✓	✓	✓
Access to “Network doctor finder” and Network Provider List including Medpass (if applicable)	X	✓	✓	✓

### Claims notification services

To keep you updated on the status of your claims, you will receive an e-notification as soon as your claim has been processed, followed by a claims statement (if applicable) by post or a notification by email (if you have chosen to receive e-statements). You can also view your claims statement on myBupa

## Blua Health - Manage your health and get rewards

Your health is your most valuable asset. Staying healthy is the greatest promise you can make to yourself and your family. Our wellness app Blua Health helps you manage your health and track your progress. You can also earn points to redeem rewards for healthy living. The more active you are, the more rewards you'll get!

- Connect to healthcare 3.0 with your mobile phone and wearables to start owning your health
- Take control of your health by enjoying our integrated health features for free
- Assess your health in 30s, just like taking a selfie video, you can check your health status using your phone anytime, anywhere
- Reward your health lifestyle by completing simple daily health tasks to earn both
- Book for multiple medical services and order prescription medications by using the "eBooking" and "ePharmacy" features

Download Blua Health now and register an account and link with your myBupa account. You may enjoy the healthcare features and the rewards!



Blua Health is offered, distributed and operated by Horizon Health and Care Limited, a company registered in Hong Kong under the Bupa Group.

Blua Health is not a medical device, nor will it provide any personalised medical advice. The content of the app cannot substitute any medical opinion, diagnosis or treatment provided by medical professionals. If you have any questions related to a medical condition, or if you feel unwell while conducting an activity with the app, please immediately seek help from a doctor or other qualified medical professional.

# Enjoying full cover (if applicable)

## Applicable policy with Full Cover Benefit

You can enjoy the network coverage and the cashless service for below scenarios (may not be applicable for certain benefit items, for details, please refer to Benefit Schedule):

- Consult with Bupa Network doctor and admit into Bupa network hospital; and
- Perform day case procedure, prescribed diagnostic imaging test and non-surgical cancer treatment (“treatment”) under Bupa network provider

Please follow the steps below in order to enjoy Full Cover Benefit. Otherwise, Full Cover Benefit would not be applicable, and you'll need to pay for your medical expenses first and file a claim afterwards.

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### Before confinement/treatment

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#### Search your network doctors

Through our myBupa, you can search network doctors, or you may contact us for enquiries.

Consult doctor and obtain a referral letter (referral letter is not required for dermatology, family medicine, gynaecology, ophthalmology, orthopaedics, otolaryngology, paediatric surgery, paediatrics and psychiatry).

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#### Choose and consult your network specialist

Consult the Specialist and show your Bupa Medical card and referral letter upon registration. Sign the claim form and keep the member's copy.

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#### Get Pre-authorisation (if required)

If required, the Specialist should get pre-authorisation from Bupa at least 2 working days before your treatment.

Please choose a Bupa appointed hospital or day-case centre with the Specialist who will be your attending doctor. You must select the same room level that you have chosen in your Bupa scheme.

If your pre-authorisation is approved, we'll inform your network doctor and hospital/day-centre.

The pre-authorization does not represent the final claim decision. We will base on the final claim documents to assess the claims. You'll need to settle any additional or ineligible expenses yourself.

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## To receive treatment

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<b>If you are admitted to a hospital</b>	Show your Bupa Medical Card upon admission. No hospital deposit is required. Make sure you sign the claim form prepared by the hospital before discharge. Please use your Bupa Medical Card to pay the medical expenses.
<b>If you have a clinical operation or treatment at a network day-case centre</b>	Show your Bupa Medical Card and the Specialist's referral letter. Sign the voucher provided and pay the medical expenses with your Bupa Medical Card.

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Note: A referral letter is valid for the same and related medical condition for six months from the issue date. Another referral letter is required for treatment of a new or unrelated medical condition.

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## After your treatment

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<b>Notification of claims settlement</b>	You will receive an e-notification, followed by a claims statement or shortfall invoice (if applicable) by post or a notification by email (if you have chosen to receive e-statement).
<b>Settle deductible or shortfall (if any)</b>	When shortfall occurs, for instance your medical bill exceeds the maximum cover or is not part of the cover, we will issue a shortfall notice. Please settle the shortfall within 14 days of the notice. Bupa will automatically collect any deductible or shortfall directly from your designated credit card account. This will take place 21 days after the shortfall invoice is sent to you.

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Note: If you have any outstanding shortfall or subscription payment, Bupa reserves the right to suspend your Bupa Medical Card and/or any claims payments.

You'll need to provide your credit card information to obtain pre-authorisation. Bupa will temporarily place a hold of HK\$500 on your credit card until the claim assessment is completed.

## **Why do I need pre-authorisation?**

Pre-authorisation gives you peace of mind. It will provide you with confirmation that your Full Cover Benefit will cover the costs of your medical treatment. So all you have to do during and after the treatment is focus on getting better.

## **When is pre-authorisation required?**

Pre-authorisation is necessary for hospital treatment, day-case and clinical operation (as required by Bupa's provider guideline).

## **What if I receive the treatment in an emergency before I have obtained pre-authorisation?**

If you receive emergency treatment outside of our office hours, subsequent pre-authorisation can be arranged on the next working day after admission to a hospital or receiving the treatment, provided that all other pre-authorisation requirements are met.

# Enjoying cashless service (if applicable)

You can use your Bupa Medical Card to enjoy cashless service at Appointed Hong Kong Private hospitals and Bupa Network Service Providers. Using your card, you can settle eligible medical expenses up to your benefit limit and applicable credit limit, without the need to submit any claims.

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## Before confinement/treatment

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### Get pre-authorisation

You should get pre-authorisation from us at least 2 working day before your confinement/treatment.

Simply download the Pre-authorisation Form from our website or myBupa, or call our Customer Care helpdesk to obtain it.

#### For confinement

Complete Part 1 of the form and ask your Specialist to complete Part 2. Choose a Hong Kong private hospital together with your Specialist.

#### For prescribed diagnostic imaging test and non-surgical cancer treatment:

Complete Part 1 of the form and ask a Registered Medical Practitioner to complete Part 2. Choose a Bupa Appointed Service Provider for treatment.

Send us the pre-authorisation form by email, fax or post. If your pre-authorisation is approved, we'll inform you by phone/email or send you the pre-authorisation letter upon request. We'll inform the appointed hospital or day-case centre you have chosen.

The pre-authorization does not represent the final claim decision. We will base on the final claim documents to assess the claims. You'll need to settle any additional or ineligible expenses yourself.

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## To receive treatment

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**If you're admitted to a Hospital**

Present your Bupa Medical Card at registration. No hospital deposit is required. Make sure you sign the claim form prepared by the hospital before discharge. You'll need to pay any medical expenses that are ineligible or exceed your credit limit shown on your pre-authorisation letter.

**If you receive a prescribed diagnostic imaging test or non-surgical cancer treatment at a Bupa Appointed Service Provider**

Present your Bupa Medical Card. Sign the voucher provided and pay the eligible expenses with your Bupa Medical Card. You'll need to pay any medical expenses that are ineligible or exceed your credit limit shown on your pre-authorisation letter.

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## After treatment

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**Notification of Claims Settlement**

You'll receive an e-notification, followed by a claims statement or shortfall invoice (if applicable) by post or a notification by email (if you've chosen to receive e-statement).

**Settle deductible or shortfall (if any)**

When shortfall occurs, for instance your medical bill exceeds the maximum cover or is not part of the cover, we will issue a shortfall notice. Please settle the shortfall within 14 days of the notice.

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Note: If you have any outstanding shortfall or subscription payment, Bupa reserves the right to suspend your Bupa Medical Card and/or any claims payment.

You'll need to provide your credit card information to obtain pre-authorisation. Bupa will temporarily place a hold of HK\$500 on your credit card until the claim assessment is completed.

## **Admission to a hospital outside of Hong Kong (Only applicable to Bupa Hero)**

Before your hospital confinement at an overseas hospital, please call our 24-hour Customer Care helpdesk to confirm the cover for your treatment and obtain prior approval. Where your treatment is approved, we will send a letter of payment guarantee to the hospital to arrange your cashless service. Please make sure that you show your Bupa Medical Card upon admission. If you are admitted to an overseas hospital without obtaining prior approval, we cannot arrange for cashless service. In such cases, please settle the medical expenses first and submit a claim to Bupa for reimbursement. Please refer to the “Making a claim” section of this guide.

## **If I’m unable to get pre-authorisation due to an emergency, what should I do?**

Without the Guarantee Of Payment Letter, you will be required to pay the deposit. However you can still make use of your credit facility if you obtain pre-authorisation before you are discharged.

## **If I only have the treatment at day-case centre of the hospital, can I still enjoy the cashless service?**

Yes, cashless service is still applicable to day-case centre of Appointed Private Hospital in Hong Kong.

## Optional clinical network benefit (if applicable)

If you've opted for our optional Clinical Benefit, you can use your Bupa Medical Card to enjoy cashless service and full cover for eligible outpatient expenses at any network clinic or diagnostic centre in Hong Kong. Please follow the steps below, otherwise your eligible expense will be paid under non-network benefit.

### Video consultation **Before treatment**

#### Services

If you've enrolled in Clinical Benefit, you can also enjoy video consultation services. Consult our selected doctors through a video call comfortably and safely at home. Visit [www.bupa.com.hk/vc](http://www.bupa.com.hk/vc) for details.

<b>Choose a network doctor</b>	You can search for network doctors on via myBupa's website or mobile app. You may also call us for help.
<b>Consult network doctor</b>	Show your Bupa Medical Card at registration.  If the GP recommends specialist treatment or physiotherapy, he or she will give you a referral letter. Bupa also accepts referral letters from a registered Chinese medicine practitioner and chiropractor for X-ray and laboratory tests.  If the GP or Chinese medicine practitioner recommends diagnostic imaging and laboratory tests, he or she will need to get pre-authorisation from us at least 2 working days before the imaging/laboratory test as required by Bupa's provider guideline.  If the psychiatrist recommends psychological counselling, he or she will give you a referral letter.
<b>Consult specialist, physiotherapist, psychologist, or receive diagnostic imaging or laboratory test within network, if necessary</b>	Please show your Bupa Medical Card and doctor's referral letter.

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## At consultation

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### After consultation and obtain medication

The clinic will prepare a voucher with relevant consultation, treatment and medication details. Please read and confirm the relevant information carefully and sign it.

Please settle the medical expenses to Bupa that are ineligible or exceeded your benefit limit upon receiving your shortfall notice.

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## After treatment

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### Notification of claims settlement

You'll receive an e-notification, followed by a shortfall invoice (if applicable) by post or a notification by email (if you've chosen to receive e-statements).

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### Settle shortfall (if any)

If there is any shortfall (if your medical bill exceeds the benefit limit or isn't covered), please settle the shortfall within 14 days of receiving the shortfall invoice.

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Note: If you have any outstanding shortfall or subscription payment, Bupa reserves the right to suspend your medical card and/or any claims payment.

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.

For diagnostic imaging or laboratory test, please ask your network doctor to obtain pre-authorisation approval from Bupa as required by Bupa's provider guideline.

You'll need to provide your credit card information to obtain pre-authorisation. Bupa will temporarily place a hold of HK\$500 on your credit card until the claim assessment is completed.

### **What if I choose a doctor outside of your network or do not follow the above process?**

You'll still be reimbursed but have to pay your medical expenses first and then submit a claim to Bupa afterwards. The benefit will be paid according to the benefit limit of non-network benefit.

### **What if the specialty referred by the network doctor is not available within the network?**

In such case, please ask your doctor to obtain approval from Bupa. We will send the pre-authorisation confirmation letter to your doctor and inform you of the decision by phone. When you visit that specialist, please show your referral letter upon registration (referral letter is not required for dermatology, family medicine, gynaecology, ophthalmology, orthopaedics, otolaryngology, paediatric surgery, paediatrics and psychiatry). You have to pay the medical expenses first and then make a clinical claim for reimbursement.

## Optional dental treatment (if applicable)

If you've opted for our optional Dental Benefit, you can enjoy cashless service and full cover for eligible dental expenses at any network dental centre in Hong Kong (if you have network dental benefit). Just follow the steps below:

<b>Choose a network dental centre</b>	You can search for network dental centres on myBupa. You may also call us for help.
<b>Consult the network dental centre</b>	Show your Hong Kong Identity Card and Bupa Medical Card/ myBupa mobile app for identity verification. Sign the voucher and keep the member's copy. Please note that if you do not show the Bupa Medical Card or pay the network dental centre directly, eligible claims will be paid under the Non-Network Dental Centre Benefit, subject to the benefit limits in the schedule of benefit.

You can also visit non-network dental centres for covered dental services and submit your claim afterwards. Please refer to the schedule of benefit for details.

# Applying for pre-approval (if applicable)

If certain benefits in your policy requires you to obtain pre-approval, you need to follow the pre-approval procedures below. Otherwise, you may not be able to fully enjoy the coverage as stated in the Benefit Schedule.

<b>Get a “Bupa Pre-authorisation Form (Applicable to Individual Scheme)”</b>	<b>Visit <a href="http://www.bupa.com.hk">www.bupa.com.hk</a> &gt; Customer care &gt; Download forms.</b>  <b>Call our Customer Care helpdesk on (852) 2517 5333 and request a form by fax.</b>
<b>Fill in the pre-authorisation form</b>	Complete Part 1 of the form and ask your attending doctor to complete Part 2.
<b>Submit the pre-authorization form to Bupa</b>	Send us the pre-authorisation form by email, fax or post.  If your pre-authorisation is approved, we’ll inform you by phone/email or send you the pre-authorization letter upon request. We’ll fax the letter to the hospital you have chosen.  You should get pre-authorisation from us at least 2 working days before your confinement/ treatment.

# Making a claim

## (Pay first and submit a claim)

If you do not have a Bupa Medical Card, or your Bupa Medical Card is not applicable to pay your medical expenses, please follow these simple steps to make a claim. No matter hospital or clinical claims, you can either submit a physical copy of claim form or submit your claims on myBupa.

### Claims service pledge

We promise to settle your claim within 5 to 7 working days of receiving your claim form and all required documentation.

<b>Get a claim form</b>	<b>Visit: <a href="http://www.bupa.com.hk">www.bupa.com.hk</a> &gt; Customer care &gt; Download forms.</b> <b>Call our Customer Care helpdesk on (852) 2517 5333 and request a form by fax.</b>
<b>Collect the required Documentation</b>	For the list of documents required, please refer to the “Useful tips for claiming” section of this guide.
<b>Fill out the claim Form</b>	<u>For a hospital claim</u> You will need to complete Part 1 of the hospital claim form and ask your attending doctor to complete, sign and stamp Part 2 of the form.  <u>For a clinical (including consultation before and after surgery) or dental claim</u> You may complete the clinical claim form yourself. You can also submit the online claim form and upload the required documents through our e-claims service.
<b>Submit the claim form</b>	Send us the original claim form with the required documentation by post within 90 calendar days after your treatment or being discharged from the hospital.  If you use our e-claims service, you do not need to send us the original documentations. Please keep them yourself.



<b>Track the status of your claims</b>	You can log into myBupa or call our Customer Care helpdesk to check your claims status.
<b>Receive notification of settled claims</b>	You'll receive an e-notification, followed by a claims statement by post or a notification by email (if you have chosen to receive e-statement).
<b>Receive payment</b>	We'll credit the claims payment to your designated bank account by autopay.

## **How do I apply for the premium waiver for specified serious illness?**

### **(Only applicable for 'Bupa All Together Health Insurance Scheme')**

Starting from the second policy year, you can enjoy a one-year premium waiver if you are diagnosed with cancer, heart attack or stroke. What's more, premiums will be waived for every family member covered under your policy to support you all during your treatment and recovery. One-year premium waiver is applicable to premiums paid for Hospital and Surgical Benefit and optional benefits (if any) of the following policy year, upon written request from the policy holder with relevant supporting documents. Please refer to the policy for detailed terms and conditions.

To apply for the premium waiver, please follow the below steps:

1. Tick the check box "Premium Waiver" in the Hospital Claim Form
2. Please ask your attending doctor to complete the Bupa Critical Illness Claim Form. You can obtain the form by calling our Customer Care helpdesk.
3. Send us the original claim form with the required documentation by post within 90 days (i.e. calendar days) of treatment or hospital discharge.

# Useful tips for claiming

## (Pay first and submit a claim)

We will do our best to process your claims swiftly. Follow these tips so that we can reimburse you as soon as possible.

### Claims Submission period

Please note that you should request the necessary documents from the hospital before discharge or upon completion of treatment, and submit your hospital claim within 90 calendar days after discharge, either through myBupa or by mail. Bupa will process the claim within 5-7 working days upon receiving the completed claim form and required documents.

### Follow your claim closely

We'll contact you by post or email immediately if any documentation is missing for your claim to be processed

### Expenses related to claims documents

You may be required to obtain certain documents that are needed to make a claim and will have to pay for them if any charges are incurred. If you receive treatment at public hospital in Hong Kong, please note that:

- hospitals will charge a fee for a discharge slip requested after you have been discharged – so remember to pick it up before you leave the public hospital
- public hospital will charge a fee to issue a medical report

### How do I file a maternity claim if I have Maternity Benefit? (if applicable)

Please login into myBupa and submit your maternity claims under “Clinical/Hospital Claims”. You should submit claims within 90 calendar days in the below events:

- pre and post-natal check-up;
- discharge from hospital; or
- after delivery

Bupa Medical Card is not applicable to any outpatient treatment and any maternity related expense.

## Required documents

### Hospital claims

For hospital treatment, day-case or clinical operations. The required documents include:

- completed Bupa Hospital Claim Form
- original receipts, including any receipt of deposit paid
- Statement of Account (if any) showing the treatment date, patient's name, doctor's name and breakdown of charges, together with the official stamp of the hospital, doctor's signature and stamp
- doctor slip (if any) showing the breakdown and the treatment details
- discharge slip showing the diagnosis and treatment details if you sought treatment in a public hospital
- medical report such as x-ray report, ultrasound report and/or blood test report, etc.
- referral letters issued by a registered medical practitioner are required if you have incurred charges for services from in-patient specialists, , diagnostic imaging or laboratory tests and pre-admission, post-hospitalisation out-patient visits
- claims statements from other insurance companies that have partially paid your claim

Note: A referral letter is valid for the same and related medical condition for six months from the issue date. Another referral letter is required for treatment of a new or unrelated medical condition.

### Clinical claims

For all clinical claims including pre-admission and post-hospitalisation out-patient visits, dental consultation and maternity-related claims (if applicable). The required documents include:

- completed Bupa Clinical Claim Form
- original receipts showing the treatment date, patient's name, name and address of the service provider, diagnosis, nature and breakdown of charges, and the official stamp and signature of the doctor
- Chinese and western medicine prescriptions with the patient's name, diagnosis, medicine information, including name, dosage and usage, date of prescription, the official stamp and signature of the doctor
- referral letters issued by a registered medical practitioner are required if you have incurred charges for services from specialists, physiotherapists, chiropractors, diagnostic imaging or laboratory tests (Bupa also accepts referral letters issued by a registered
- Chinese medicine practitioner or chiropractor for X-ray and laboratory tests)
- referral letter issued by a psychiatrist is required for psychological counselling
- for claims related to outpatient consultations before and after surgery or hospitalisation, please submit a copy of the hospital receipt and remember to check 'Yes' in the 'Pre / Post hospitalisation follow-up visit' option on the 'Bupa Clinical Claim Form '. If pre-authorisation approval has been obtained from Bupa before hospitalisation, there is no need to submit a copy of the hospital receipt.

#### Note:

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.

A referral letter is valid for the same and related medical condition for six months from the issue date. Another referral letter is required for treatment of a new or unrelated medical condition.

# Guarantee renewal

As part of our commitment to support you throughout your life with our healthcare expertise, we are pleased to offer you a lifetime renewal guarantee. Your subscription will be based on your age only regardless of claims made on conditions that arise after your membership starts. Every year your membership will renew automatically with subscription payments collected automatically, following the process below.

<b>Renewal notification</b>	<b>You will receive a renewal notification by post 6 weeks before your cover is due for renewal.</b>
<b>Change of benefits</b>	You may change your room level, add / remove any optional benefits or change your payment method by contacting your health management consultant at least 1 month before your contract anniversary date.
<b>Make payment and complete renewal</b>	<p>If you have chosen to pay your premium by autopay or credit card and have not informed us of any change in arrangement, your renewal premium will be collected automatically:</p> <ul style="list-style-type: none"><li>• payment by autopay will be collected on the premium due date</li><li>• payment by credit card will be collected 7 working days before the premium due date</li></ul> <p>Please also pay any outstanding shortfall before renewal. If you wish to discontinue your cover, please inform us in writing at least 10 days before your contract anniversary date.</p>

# Giving you more than protection

In addition to comprehensive coverage that minimises your worries about unexpected medical bills, we also offer a range of free services.

## **Free Bupa Worldwide Assistance Programme (if applicable)**

Bupa Worldwide Assistance Programme supports you wherever you are by providing a guarantee or advancement of any hospital admission deposit in the event of hospitalisation and providing emergency medical repatriation to your home country. If you need help when you are overseas, please call the 24-hour worldwide assistance service hotline (852) 2861 9229. This service is provided by our service provider. For details of the services rendered, please refer to your policy and log into myBupa for the Program details.

## **Admission to a Mainland China hospital without deposit (if applicable)**

If you require hospitalisation due to any injury or sickness while travelling in Mainland China, you can be admitted to any hospital in the MedPass Network without payment of a deposit, subject to a maximum limit as stated on the policy. What you need to do is to call the 24-hour worldwide assistance service hotline (852) 2861 9229 which will advise the nearest hospital within the MedPass Network and guide you through the process. You may also log into myBupa to access the list of MedPass Network hospitals.

You will need to pay any medical expenses incurred at the hospital upon discharge and you can submit a claim to Bupa for any eligible medical expenses thereafter.

## **Exclusive offers**

We offer exclusive discounts on a wide range of health, wellness and lifestyle services through our online customer service portal. Just log into myBupa to view and redeem these special offers for Bupa customers.

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## 多謝

再次感謝你選用保柏照顧你的健康！希望我們提供的醫療保障及服務，讓你安枕無憂。

## Thank you

Thank you for choosing Bupa to take care of your health. We hope you have peace of mind now that your health is in good hands.

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保柏（亞洲）有限公司  
Bupa (Asia) Limited

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