

Schedule of Benefits 保障金額表

| | hedule of Benefits 保障金額表 nuary 2024 Edition 2024年1月1日版本 | | Maximum Limit per Member (HK\$) 每位會員最高賠償額 (港幣) | | | |
|----|--|---|---|---|---|--|
| A | Hospital and Surgical Benefit ^① 住院及手術保障 ^① | | Plan 計劃 1 Private [®] 私家房 [®] | Plan 計劃 2 Semi-private [®] 半私家房 [®] | Plan計劃 3 Ward ^① 大房 ^② | |
| 1 | Room and Board (Maximum 182 days each Contract) 住房及膳食費 (每合約年度最多182日) | Year) | 每日3,800 each day | 每日1,750 each day | 每日920 each day | |
| 2 | Miscellaneous Hospital Services (Each Contract Year) 住院雜費(每合約年度計) |) | 43,200 | 25,500 | 16,300 | |
| 3 | Intensive Care (Supplement to Room and Board)(Eac 深切治療(住房及膳食費之補足)(每合約年度計) | ch Contract Year) | 31,700 | 26,500 | 23,500 | |
| 4 | Private Nursing (Maximum 91 days each Contract Yea 私家看護費 (每合約年度最多91日) Nursing services during Hospital Confinement or at hor rendered by a Qualified Nurse, subject to written referr Medical Practitioner 經主診註冊西醫書面轉介[®]下由合資格護士於住院期間或出防 | me after discharge from Hospital 'al® from the attending Registered | 每日1,000 each day | 每日 670 each day | 每日450 each day | |
| 5 | Surgeon and Attendance Fees (For surgical case only 外科醫生費及巡房費 (只適用於外科手術)(每次手術計) • Complex 複雜 • Major 大型 • Intermediate 中型 • Minor 小型 | | 113,000 58,000 25,080 8,700 | 71,000 39,200 16,940 6,940 | 53,800 30,100 12,300 5,740 | |
| 6 | Anaesthetist's Fees (Each operation) 麻醉科醫生費 (每次手術計) • Complex 複雜 • Major 大型 • Intermediate 中型 • Minor 小型 | | 35,300 16,800 8,000 4,220 | 20,100 11,400 5,100 2,650 | 15,900 9,140 4,060 2,410 | |
| 7 | Operating Theatre Fees (Each operation) 手術室費用 (每次手術計) · Complex 複雜 · Major 大型 · Intermediate 中型 · Minor 小型 | | 35,300 16,800 8,000 4,220 | 20,100 11,400 5,100 2,650 | 15,900 9,140 4,060 2,410 | |
| 8 | In-patient Physician's Fees (For non-surgical case on (Maximum 182 days each Contract Year) 住院醫生巡房費(只適用於非手術治療)(每合約年度最多18 | | 每日3,030 each day | 每日1,340 each day | 每日800 each day | |
| 9 | services performed by pathologist, radiologist or Physic | | | 4,490 | 2,780 | |
| 10 | Companion Bed (Maximum 182 days each Contract Ye 住院加床費 (每合約年度最多182日) | (ear) | 每日1,900 each day | 每日830 each day | 每日450 each day | |
| Da | y Case Procedure Benefits [®] 日間手術保障 [®] | | | | | |
| | Items A11 - A12 cover expenses incurred for (i) Clinical Operations or Day Case at a clinic or day-case unit of a Hospital performed by a Registered Medical Practitione (ii) Hospital Confinement without an overnight stay. Expenses are payable under HealthNet Benefit only when pre-authorisation has been obtained. Supplementary M Medical Benefit (if any) will not be applicable. Exclusively payable for eligible expenses incurred by the procedures below performed during overnight Hospital Confinement without pre-authorisation obtained to the Maximum Limit per Member. Supplementary Major Medical Benefit (if any) will not be applicable. If pre-authorisation is obtained for Hospital Confinement with an overnight stay, eligible expenses shall be payable under benefit items A1 - A10 of Hospital and Surgical Benefit and Supplementary Major Medical Benefit applicable). A11 至A12 項將支付()由註冊西醫於診所或醫院日症房進行診所手術或日症或(ii) 無需過夜的性院的費用。「網絡保障」只支付已獲取初步保障審核的費用。附加醫療保障(如有) 並不適 單獨賠償在沒有獲取初步保障審核, 合資格費用將在住院及手術保障 A1 - A10 項及附加醫療保障(如適用) 下賠償。 | | | | | |
| 11 | Day Case Endoscopy Procedure (Each operation) 日間內窺鏡程序(每次手術計) | At HealthNet Service Providers 於網絡服務供應商 | Full cover 全數賠償 | Full cover 全數賠償 | Full cover 全數賠償 | |
| | | At other providers 於其他供應商 | 17,140 | 12,240 | 10,560 | |
| 12 | Day Case Viral Warts and Skin Lesions Procedure [®] (per Contract Year) 日間病毒性疣及皮損程序 [®] (每合約年度計) | At HealthNet Service Providers 於網絡服務供應商 | Full cover 全數賠償 (Maximum 6 visits per Contract Year) (每合約年度最多6次) | Full cover 全數賠償 (Maximum 6 visits per Contract Year) (每合約年度最多6次) | Full cover 全數賠償 (Maximum 6 visits per Contract Year) (每合約年度最多6次) | |
| | | At other providers 於其他供應商 | 8,000 | 8,000 | 8,000 | |
| 13 | Pre-admission and Post-hospitalisation Out-patient の 入院前及出院後之門診護理(每合約年度計) o Including one pre-admission visit and all related post-h an out-patient basis within six weeks after discharge fr o 包括一次入院前及出院後6星期內所有與住院治療有關之跟於 | ospitalisation follow-up visits on om Hospital | 5,930 | 3,240 | 2,270 | |
| 14 | Psychiatric Treatment (Each Contract Year) 精神科治療(每合約年度計) | | | 30,000 | | |
| _ | Below attained age of 65 on the Contract Effective Da 於合約生效日未滿65歲之會員 | elow attained age of 65 on the Contract Effective Date 合約生效日未滿 65 歲之會員 | | Unlimited 不設上限 | | |
| | Attained age of 65 or above on the Contract Effective 於合約生效日年滿65歲或以上之會員 - 每年限額 | e Date - Annual Limit | 1,170,800 | 586,000 | 235,000 | |



Schedule of Benefits 保障金額表

1 January 2024 Edition 2024年1月1日版本

| January 2024 Edition 2024年1月1日版本 | Maximum Limit per Member (HK\$) 每位會員最高賠償額 (港幣) | | | | 巷幣) | |
|--|---|----------------|-------------------------------------|---|--|--|
| B Clinical Benefit® | HealthNet Be | Non-Heal | Non-HealthNet Benefit | | | |
| 一 門診保障 [®] | Plan 計劃1 Plan | n 計劃 2 Plan 計劃 | 劃 3 Plan 計劃 1 | Plan 計劃 2 | Plan 計劃 3 | |
| Reimbursement percentage 賠償率 | N/A | N/A 不適用 | | 75% | | |
| No. of HealthNet Service Providers 網絡服務供應商數目 | Around | Around 約 2,600 | | N/A 不適用 | | |
| 1 General Practitioner (Per visit) 普通科醫生(每次診治計) | Full cover for eligible medical expenses [®] (including consultation fee and up to 5 days of basic Medically Necessary Western Medication) 全數支付合資格之醫療費用 [®] (包括診症費及最多5日之處方 基本醫療必需西藥費用) | | 500® | 300 (For consultation Necessary Weste (只適用於診症費及 | | |
| 2 Specialist (Per visit) 專科醫生(每次診治計) Subject to written referral[®] from a Registered Medical Practitioner, except for dermatology, family medicine, gynaecology, ophthalmology, orthopaedics, otolaryngology, paediatric surgery, paediatrics and psychiatry 須獲註冊西醫書面轉介[®], 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 | | | 8300 | Necessary Weste | 470 fee and Medically rrn Medication) 醫療必需西藥費用) | |
| 3 Physiotherapist (Per visit) (Treatment fee only) 物理治療師(每次診治計)(只限診療費) Subject to written referral[®] from a Registered Medical Practitioner 須獲註冊西醫書面轉介[®] | Full cover for eligible medical expenses [®] 全數支付合資格之醫療費用 [®] | | 760 [®] | 520 | 430 | |
| 4 Chiropractor (Per visit) (Treatment fee only) 脊醫(每次診治計)(只限診療費) o Subject to written referral[®] from a Registered Medical Practitioner o 須獲註冊西醫書面轉介[®] | N/A 不適用 | | 760 [®] | 520 | 430 | |
| 5 Psychiatric-related Treatments [®] (Per visit) 精神科相關治療 [®] (每次診治計) | N/A 不適用 | | Western Medica diagnost | 810 580 450 (Including consultation fee, basic Medically Nece Western Medication, Chinese Medicines, acupun diagnostic imaging and laboratory tests) (包括診症費、基本醫療の常西藥、中藥、針灸治療 影像及仁膽) | | |
| 6 Psychological Counselling (Per visit) 臨床心理輔導(每次診治計) 。 Subject to written referral[®] from a Psychiatrist 。 須獲精神科醫生書面轉介[®] | N/A 不適用 | | 810 | 580 | 450 | |
| 7 Diagnostic Imaging and Laboratory Tests (Each Contract Year) 診斷影像及化驗(每合約年度計) Subject to written referral[®] from a Registered Medical Practitioner for all diagnostic imaging and laboratory tests, or from a Registered Chinese Medicine Practitioner or Chiropractor[®] for X-ray only and laboratory tests 須獲註冊西醫(適用於所有診斷影像及化驗)或註冊中醫/脊醫[®](只適用於X光及化驗) 書面轉介[®] | Full cover for eligible medical expenses [®] 全數支付合資格之醫療費用 [®] | | 4,080 | 2,100 | 1,730 | |
| 8 Prescribed Western Medication (Each Contract Year) 醫生處方西藥 (每合約年度計) Medically Necessary Western Medication prescribed by a Registered Medical Practitioner and obtained at a legitimate source 經由註冊西醫處方並由合法來源取得之醫療必需西藥費用 | 3,920 [®] N/A | 、不適用 N/A 不遲 | ^適 用 3,920 [®] | N/A 不適用 | N/A 不適用 | |
| Maximum number of visits for both HealthNet Benefit and Non-HealthNet Ber limit of 10 visits per Contract Year for items B5 - B6. Subject to a maximum of 以「網絡保障」及「非網絡保障」合計,每合約年度項目B1至B6之診治次數上限合共為 最多一次為限。 | one visit per item p | ber day. | | | | |
| C Supplementary Major Medical Benefit (Optional) | | | 'lan計劃 2 mi-private [®] | Plan計劃 3 Ward [®] | | |

| 》 | Ward [®] 大房 [®] |
|---------|--------------------------------------|
| 80% | |
| 335,250 | 133,065 |
| | 80% |

• This Benefit is payable for any eligible expenses in excess of the benefits payable under items A1 - A10 of Hospital and Surgical Benefit (either exceeding the maximum limit or maximum number of days), which is subject to the Maximum Limit above and HK\$500 deductible per claim.

In case of overseas hospitalisation, only medical Emergency cases will be covered 0

This Benefit shall not be payable for Hospital Confinement in class of suite/VIP/deluxe room of a Hospital.
Adjustment factors for room upgrade will be applied if Member is hospitalised not in accordance with plan level:

From Semi-private Room to Private Room : 50%

From Ward to Semi-private Room From Ward to Private Room : 50% -:25%

· However, the adjustment factors and room class restrictions above are not applicable to Confinement in a higher room level due to room shortage for Emergency treatment or isolation that requires a specific room level.

此保障支付任何超出按住院及手術保障下A1 - A10項(不論超出最高賠償額或最多日數)可獲賠償的合資格費用,以上述最高賠償額為限,每次索償的墊底費為港幣500元。 如身處海外,只適用於因急症之住院治療 此保障並不會就入住總統套房/貴賓房/豪華房的住院費用而作出賠償。 0 0

0

如會員住院時並非根據原有之計劃住房,保障額將因應升級住房而作出調整: 0

:50% : 50%

半私家房至私家房 大房至半私家房 大房至私家房

25% 。 然而,有關調整值及以上住房級別限制不適用於在緊急情況接受治療的情況下因床位短缺而須入住較高住房級別,或因隔離原因而須入住指定住房級別的情況。



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|---|---|---|---|--|--|
| D Hospital Cash Benefit (Optional) 住院現金保障(自選保障) | Plan計劃 1 | Plan計劃 2 | Plan計劃 3 | | |
| Payable from the third day of Hospital Confinement (Maximum 182 days each Contract Year) 由住院第 3 天起開始支付 (每合約年度最多182 日) | 每日1,000 each day | 每日500 each day | 每日300 each day | | |
| E Free Bupa Worldwide Assistance Programme (Each Contract Year) 免費保柏國際援助計劃(每合約年度計) | | | | | |
| Provides admission deposit in the event of hospitalisation overseas and in Mainland China, unlimited cover for emergency medical evacuation and repatriation, and an extra hospital benefit of HK\$120,000 after repatriation to Hong Kong. A 24-hour hotline for travel, medical or legal information and assistance is also available. 提供海外及國內住院按金墊支服務,全數支付緊急醫療運送費用及送返香港後高達港幣12萬元的額外住院保障,並設有24 小時熱線提供旅遊、醫療或法律資訊及支援 。 | | | | | |
| F Health Coaching Services 健康支援服務 | Plan 計劃 1 Private [®] 私家房 [®] | Plan 計劃 2 Semi-private ^① 半私家房 ^② | Plan 計劃 3 Ward [☉] 大房 [◎] | | |
| Staffed by a team of qualified nurses, health management professionals and doctors, our Health Coaching Services offer a variety of expert healthcare support to minimise your worries. 由合資格護士、健康管理團隊及醫生為你提供一系列專業的健康支援,讓你安心無憂。 | | | | | |
| 24-hour Healthline 24 小時健康專線 A team of qualified nurses and health management professionals will provide guidance on your health-related questions over the phone, with the support of doctors. 我們的合資格護士及健康管理團隊可透過電話為你解答健康相關問題,背後更有醫生作為顧問。 | ~ | v | v | | |
| Healthcare Centre Choices 醫療中心選擇 Provide a list of clinics and hospitals based on your specific condition or needs for your reference. 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。 | v | v | Not applicable 不適用 | | |
| Care Manager 健康顧問 Our Care Manager can help you follow up on claims and assist you throughout treatment and recovery, from explaining your treatment plan and overseeing costs to arranging follow-up consultations. If you're admitted to a local private hospital, our Care Manager will make a courtesy call or visit, with your consent. 我們的健康顧問可助你跟進索償、全程協助你的治療至康復過程,包括解釋你的治療計 劃和醫療開支以至安排跟進治療。當你入住本港私家醫院時可前往探望你或致電慰問你。 | ~ | v | (Care Manager will support you in the event of cancer or heart disease 健康顧問將於會員患上癌 症或心臟病時提供協助) | | |
| Second Medical Opinion 第二醫療意見 We'll arrange for you to get medical advice from a panel of medical specialists to clarify your doubts and make informed decisions about treatment. 我們可安排醫療專家為你提供專業的第二意見,讓你掌握病情從而決定治療方法。 | ~ | ~ | Not applicable 不適用 | | |
| Please refer to Bupa's website at www.bupa.com.hk/health-coaching-services 請瀏覽保柏網站 www.bupa.com.hk/health-coaching-services 查閱健康支援服務 | | is of the Health Coaching | Services. | | |
| Doctors will be available during scheduled office hours to support the nurses in ar except public holidays. The use of Health Coaching Services is free of charge. If the services suggested ar 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(霍 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合約之賠償範圍內,你便 | ren't covered under your conti 标准時間),公眾假期除外。 | | | | |
| G Free Bupa Dental Assessment 免費保柏牙科護理服務 | | | | | |
| Each Member is entitled to the scaling and polishing service at any one of the 每位會員可於網絡牙科診所享用洗牙護理服務 (每合約年度一次)。 | HealthNet dental centres (c | once each Contract Year). | | | |
| H Free Bupa Health Assessment 色費保柏健康檢查服務 | | | | | |

免費保柏健康檢查服務

Each Member is entitled to any one of the following check-up programmes at any one of the HealthNet wellness centres (once each Contract Year). This service is only available to Member aged 18 or above. 每位會員可於網絡保健中心享用以下其中一項健康檢查服務(每合約年度一次)。此服務只適用於18歲或以上之會員。

General Health Assessment 普通身體檢查

Full physical examination 體格檢查

- Blood pressure check 血壓檢查 Chest X-ray 胸肺 X 光檢查 CBP 血全圖 0
- Creatinine 肌酸酐
- Glucose 血葡萄糖 ALT/SGPT 谷丙轉氨酵素
- Uric acid 尿酸
- Urine routine 尿常規檢查
- 0
- Electrocardiogram 心電圖 Total cholesterol 總膽固醇
- Triglycerides 三酸甘油脂 0

Well Man Health Assessment 男性專科檢查

- Full physical examination 體格檢查
- 0 Blood pressure check 血壓檢查 ◎ Lipid profile 血脂分析
- (Total cholesterol, LDL cholesterol, HDL cholesterol, triglycerides) (總膽固醇、低密度膽固醇、高密度膽固醇、 三酸甘油脂)
- Total PSA test 總前列腺特異抗原測試 0 (Prostate cancer screen 前列腺癌測試)

Well Woman Health Assessment 女性專科檢查 Full physical examination 體格檢查

- ◎ Blood pressure check 血壓檢查 ◎ Lipid profile 血脂分析 (Total cholesterol, LDL cholesterol,
- HDL cholesterol, triglycerides) (總膽固醇、低密度膽固醇、高密度膽固醇、 三酸甘油脂) Pap smear test 柏氏抹片檢查
- (Cervical cancer screen 子宮頸癌測試)



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1 January 2024 Edition 2024年1月1日版本

Notes 附註

- About Hospital and Surgical Benefit
- Eligible expenses incurred in respect of the same item shall not be recoverable under more than one benefit item in the table for Hospital and Surgical Benefit. Clinical Operation or Day Case, if eligible, will be paid under Hospital and Surgical Benefit. Clinical Operation and Day Case mean Medically Necessary surgical procedures which may be carried out at a clinic or day-case unit of a Hospital by a Registered Medical Practitioner and a stay in Hospital is not required, provided that the surgical procedure is classified as such by Bupa.
- For in-patient treatments at Gleneagles Hong Kong Hospital, please visit www.bupa.com.hk/pdf/ghk.pdf or call Bupa to get details of the room types and how they are classified under Bupa's cover prior to your hospital stay.
 A referral letter is valid for the same or related medical condition for six months from the issue date. Another referral letter is required for treatment of a new or unrelated
- medical condition.
- About Day Case Procedure Benefits
 - For procedures performed at a HealthNet Service Provider and to be paid under HealthNet Benefit, pre-authorisation must be obtained through the HealthNet doctor from Bupa prior to endoscopy and viral warts and skin lesions procedures (as required by Bupa's provider guidelines). For procedures performed by your choice of doctor and service provider for (i) Clinical Operations or Day Case at a clinic or day-case unit of a Hospital or (ii) Hospital Confinement without an overnight stay, the eligible expenses incurred will be payable up to the Maximum Limit per Member of other providers without pre-authorisation required.
 - For procedures performed in Hospital with overnight stay, no pre-authorisation is required in any of the following situations:
 - Any treatment performed outside Hong Kong; Hospital Confinement and surgical procedures performed at ward level in the public sector of government Hospitals; and/or If you file a claim for your procedure with another insurer first and submit a second claim to Bupa.
- For the full list of endoscopy and viral warts and skin lesions procedures covered under Day Case Procedure Benefits, please refer to the Documents section of Bupa's customer service portal myBupa. This list is subject to change from time to time.
 If a Member receives more than one viral warts and skin lesions treatments at the same time on the same day, it will be counted as one operation. Bupa reserves the Tight to ask for a medical report for review. To enjoy full cover for eligible medical expenses under HealthNet Benefit:
- ര
- Treatment must be obtained at a HealthNet facility and performed by a HealthNet Doctor.
 Specialist consultation (except for dermatology, family medicine, gynaecology, ophthalmology, orthopaedics, otolaryngology, paediatric surgery, paediatrics and psychiatry) and physiotherapy must be referred[®] by a Registered Medical Practitioner.
 Pre-authorisation must be obtained from Bupa for:
- any treatment by a Specialist referred[®] by a HealthNet Doctor where the relevant specialty is not listed in the latest List of HealthNet Service Providers.
 diagnostic imaging or laboratory tests (as required by Bupa's provider guidelines).
- The Bup a HealthNet Card must be presented upon registration for treatment and used for medical bill settlement. For Emergency medical treatment outside the normal office hours of Bupa, Member shall obtain subsequent authorisation from Bupa on the next working day immediately after receiving such treatment.
- For consultation fee at a General Practitioner's, a Specialist's, a Physiotherapist's and a Chiropractor's clinic only.
- This benefit is applicable to treatment for psychiatric, psychological, mental or behavioural conditions, senile dementia (including Alzheimer's disease) and Parkinson's disease (except for conditions caused by or related to drug abuse and alcoholism). If the expenses under this benefit are also covered under other benefit items in this Clinical Benefit, the expenses for such items shall be exclusively paid under this item 5 and no benefit shall be payable under other benefit items. 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.
- The Maximum Limit of Prescribed Western Medication Benefit is the aggregate sum of HealthNet Benefit and Non-HealthNet Benefit.
 General practitioner and specialist under Clinical Benefit also covers consultation fee charged by the general practitioners and specialists of video consultation service providers. This benefit shall also cover the medication delivery charge incurred by the designated video consultation service providers (general practitioners only). The list of designated video consultation service providers (and an ended by Bupa from time to time. ① 有關住院及手術保障
- 同一項目的合資格費用不可獲「住院及手術保障」表中多於一個保障項目的賠償。
- 合資格之診所手術或日症,將於「住院及手術保障」下賠償。診所手術及日症指註冊西醫於診所或醫院日症房進行之醫療必需手術而無必要留院,但該等手術須獲保柏分類為診所手術或日症 手術
- ② 入住港怡醫院接受治療前,請瀏覽www.bupa.com.hk/pdf/ghk.pdf或致電保柏查詢有關住房類別及在保柏保障計劃下相應之住房等級。
- ③ 會員可在轉介信發出日起計6個月內,就相同或相關病症使用該轉介信。若須診治全新或不相關的病症,則須提交新的轉介信
- ④ 有關日間手術保障
 - 如於網絡服務供應商進行及以「網絡保障」支付內窺鏡和病毒性疣及皮損程序之前必須經由網絡醫生申請初步保障審核(按保柏供應商指引之要求)。
- 如由你所選的醫生及服務供應商在 (i)診所或醫院日症房進行程序或(ii) 無需過夜的住院所產生的符合資格的費用,將以其他供應商之每位會員最高賠償額為限。會員無需向保柏申請初步 保障審核。
- 如程序於需要過夜的住醫院進行,以下情況不需要申請初步保障審核:
 - 任何於香港以外的地方所進行的治療;
 - 於香港政府公立醫院大房住院及進行住院手術;及/或
- 如你先向其他保險公司素償,再向保柏申請第二素償。 。有關受日間手術保障所保障之內窺鏡和病毒性疣及皮損程序的完整列表,請參閱保柏客戶服務網站myBupa上的會籍文件頁面。此列表可能會不時更改。 ③ 如會員於同一日同時接受多過一次的病毒性疣及皮損治療,將被算作為一次手術。保柏保留權利要求你提供醫療報告以供檢閱。
- ⑥ 要享有「網絡保障」下合資格醫療費用的全數賠償:
- 有關治療必須在網絡設施內由網絡醫生進行
- 。專科醫生診症(皮膚科、家庭醫學科、婦科、眼科、骨科、耳鼻喉科、小兒外科、兒科及精神科除外)及物理治療必須經註冊西醫轉介[◎]。
 。以下各項必須通過保柏初步保障審核:
- 經由網絡醫生轉介®之專科醫生治療,而有關專科並不載於最近期之《網絡服務供應商目錄》內。
- 診斷影像或化驗(按保柏供應商指引之要求)
- 必須於求診登記時出示「保柏網絡醫療卡」,並以該卡繳付醫療費用。
 於保柏正常辦公時間外接受之緊急治療,會員須於接受治療後之下一個工作日即時向保柏補辦審核手續。
- ① 只適用於普通科醫生、專科醫生、物理治療師及脊醫診所之診症費。
- ⑧ 此保障適用於精神、心理、情緒或行為症狀、認知障礙症(包括阿茲海默氏症)及帕金遜病的門診診治(因濫用藥物及酗酒而引致或相關的症狀或疾病除外)。若此保障下的費用亦同時受保於 門診保障下的其他項目,有關費用只可獲此項目5的賠償,而不會獲得其他項目之賠償。
 ⑨ 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。
- 「醫生處方西藥保障」下,每一合約年度的最高賠償額以「網絡保障」及「非網絡保障」合併計算
- ⑪ 門診保障下的普通科醫生及專科醫生亦涵蓋由視像診症服務供應商的普通科醫生及專科醫生醫療診症服務的診症費。此保障涵蓋指定的視像診症服務供應商的藥物運送費用(包括普通科醫 生)。指定的視像診症服務供應商名單可於保柏的網站查閱,此名單可能會不時更改及更新。



Table of Subscriptions 保費表

1 January 2024 Edition 2024年1月1日版本

| 1 January 2024 Edition 2024年1月1日版本 | Annual Subscription per person (HK\$) 每人每年保費 (港幣) | | | |
|--|---|--|---|--|
| Hospital and Surgical Benefit + Clinical Benef 住院及手術保障 + 門診保障 | fit | | | |
| Attained Age ^① 已屆年齡 ^① | Plan 計劃 1 Private 私家房 | Plan 計劃 2 Semi-private 半私家房 | Plan 計劃 3 Ward 大房 | |
| 15 days日 - 17 years歲 18-29 years歲 30-49 years歲 50-64 years歲 (60-64 years for renewal only)(60至64歲只供續保) 65 years or above (for renewal only) 65歲或以上(只供續保) | 20,137 19,604 30,639 53,946 92,220 | 12,488 11,983 18,650 32,486 53,050 | 10,893 9,395 13,566 22,149 36,679 | |
| Supplementary Major Medical Benefit 附加醫療保障 | | | | |
| Attained Age ^① 已屆年齡 ^① | Plan 計劃 1 Private 私家房 | Plan 計劃 2 Semi-private 半私家房 | Plan 計劃 3 Ward 大房 | |
| 15 days日 - 17 years歲 18-29 years歲 30-49 years歲 50-64 years歲 (60-64 years for renewal only)(60至64歲只供續保) | 2,597 2,590 5,404 13,325 | 1,403 1,432 2,980 6,439 | 930 904 1,633 3,619 | |
| Hospital Cash 住院現金 | | | | |
| Attained Age [®] 已屆年齡 [®] | Plan 計劃 1 | Plan 計劃 2 | Plan 計劃 3 | |
| 15 days日 - 17 years歲 18-29 years歲 30-49 years歲 50-64 years歲 (60-64 years for renewal only)(60至64歲只供續保) 65 years or above (for renewal only) 65歲或以上(只供續保) | 1,042 820 1,102 1,957 3,652 | 494 408 543 976 1,720 | 296 246 332 580 1,032 | |
| | 5,05z | 1,720 | 1,002 | |

Notes 附註

④ Applicant and spouse must be aged 18-59 years (attained age). Unmarried children aged under 18 or below 23 years if in full-time education must be enrolled as dependants.
 ① 申請人及配偶年齡必須介乎18至59歲(已屆年齡)。若未婚子女為18歲以下或23歲以下之全日制學生,必須以受供養人身份投保。

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

About Levy payment

Starting from 1 January 2018, insurance subscription payment is subject to the Hong Kong Insurance Authority's levy. The amount of levy charged will be based on a percentage of the total amount of subscription under an insurance contract. Payable levy is not included in the subscription rates shown in the Table of Subscriptions and is subject to the applicable levy rate. For general information on the applicable levy rates, please visit www.bupa.com.hk/levy.

有關保費徵費

由2018年1月1日起,保險業監管局按保費徵收徵費,徵費額是以每份合約的保費的某個百分比計算。保費表上的保費尚未包括應繳徵費,應繳徵費將按適用的徵費率計算。有關徵費率詳情, 請瀏覽www.bupa.com.hk/levy。

In the event of any discrepancy in respect of the meaning between the Chinese version and the English version, the English version shall prevail. All terms and conditions are subject to the Contract. 中、英文之意思如有任何差別,概以英文為準。所有條款及細則以合約為準。

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

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