

Agenda

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Scope of Coverage

HKU Medical Benefit Structure

Arranged by HKU Arranged by Individual MBS By HKU Self Pay Top Up Catastrophic **Bupa VTop for Transfer** upon resignation / Insurance retirement

Bupa Insurance – Objective & Eligibility

Objective

This programme aims at providing extra protection to HKU members who suffer from Catastrophic Diseases

Eligibility

HKU Staff who are eligible for hospitalisation benefits under the SMBS

Plan 1 – Appointees of Professor grade and above (or Bands I & J)

Plan 2 – All other appointees except those on Bands A & B

Plan 3 – Bands A & B appointees

Geographical Location & Approval

Hong Kong & All applications for claim reimbursement under the Scheme are subject to prior approval from Director of University Health Service.

Other Special Terms & Conditions

The General Exclusion regarding "Pre-existing Conditions" shall be waived for Members joining the University of Hong Kong before 1 January 2014. For Members joining the University fo Hong Kong on or after 1 January 2014, "Pre-existing Conditions" shall be waived only after the Member has been continuously enrolled in the Scheme for a period of 12 months.

Bupa Insurance – Scope of Coverage

- A. Admission into ICU
- B. All Ultra-major operations as defined in the Government Gazzette
- C. All cancers (malignancies) and all brain tumours, excluding carcinoma-in-situ
- D. Diseases involving acute and/or chronic failure of the heart, lung, kidney, liver
- E. All organ transplants, including but not limited to, heart, lung, liver, kidney, bone marrow and cornea.

Bupa Insurance – Scope of Coverage

F. The following diseases:

- 1. Meningitis and encephalitis, Creutsfeldt-Jacob Disease (CJD)
- Major head trauma
- Stroke resulting in neurological deficit with corresponding findings in a CT or MRI scan
- 4. Multiple sclerosis
- 5. Motor neurone disease, muscular dystrophy, Parkinson's disease, poliomyelitis, severe myasthenia gravis of grade III or above under the Myasthenia Gravis Foundation of America Clinical Classification
- 6. Disease resulting in limb paralysis or blindness
- 7. Major burns
- 8. Aplastic anemia
- 9. Acute necrotic pancreatitis
- 10. Necrotising fasciitis
- 11. HIV infection or AIDS due to blood transfusion or occupation

Exclusions

Items which the Scheme does not covered

The Scheme shall not cover any treatments / expenses incurred directly or indirectly relating to:

- 1. Pre-existing Conditions. (waived for all members who enroll under the plan on 1 Jan 2014 and new members after one year waiting period)
- 2. Treatment, medical service, medication or investigation which is not Medically Necessary.
- 3. Any illness or bodily injury for which compensation is payable under any laws or regulations or any other insurance policy or any other sources except to the extent that such charges are not reimbursed by any such compensation, insurance policy or sources.
- 4. Any charges for accommodation, nursing and services received in health hydros, nature cure clinics, convalescent home, rest home, home for the aged or similar establishments.
- 5. Any charges in respect of surgical or non-surgical cosmetic treatment (unless necessitated by injury caused by an Accident and the Member received the Medically Necessary treatments or related services within one (1) year of the Accident), Hair Mineral Analysis (HMA), health supplements or body weight control (unless approved by Bupa).
- 6. Any charges in respect of preventive measures including but not limited to routine blood tests, general check-ups, vaccination and inoculations, hearing tests, eye refraction including routine eye tests or any cost of fitting of spectacles or lens (unless it is payable under the relevant Benefits).
- 7. Congenital Conditions, Developmental Conditions or Hereditary Conditions.
- 8. Treatment that commenced during the first five (5) years from the Coverage Commencement Date of this Scheme and which in any way arises from, is attributable to, or is consequential upon Human Immunodeficiency Virus Infection.
- 9. Sexually Transmitted (Venereal) Diseases or their sequel.
- 10. Treatment relating to pregnancy, including diagnostic tests for pregnancy or resulting childbirth, abortion or miscarriage (unless it is payable under Maternity Benefit); birth control or sterilisation or sex reassignment of either sex; infertility including in-vitro fertilisation or any other artificial method of inducing pregnancy; or sexual dysfunction including but not limited to impotence, erectile dysfunction and pre-mature ejaculation, regardless of cause.

Items which the Scheme does not covered

The Scheme shall not cover any treatments / expenses incurred directly or indirectly relating to:

- 8. Misuse or overdose of drugs or being under the influence of alcohol, self-inflicted injuries or attempted suicide.
- 9. Treatment relating to any illness or bodily injury resulting from participation in criminal activities.
- 10. Alternative treatment including but not limited to Chinese Medicines treatment, acupuncture, acupressure, tui na, hypnotism, rolfing, massage therapy and aromatherapy (unless it is payable under Chinese Herbalist Benefit or Chinese Bonesetter Benefit or Psychiatric-related Treatments Benefit, if applicable).
- 11. Senile Dementia (including Alzheimer's disease), Parkinson's disease
- 15. Any charges for the procurement or use of special braces and appliances, including but not limited to spectacles, hearing aids and other equipments such as wheel chairs and crutches.
- 16. Any treatment or investigation related to dental or gum conditions (unless it is payable under Dental Benefit) except for Emergency treatment (not follow-up treatment) arising from Accidents or the extraction of impacted wisdom teeth during Hospital Confinement. Follow-up treatment from such Hospital Confinement shall not be covered unless it is payable under Dental Benefit.
- 17. Treatment arising from war, invasion, acts of foreign enemies, hostilities (whether war be declared or not), civil war, rebellion, insurrection or military or usurped power or terrorist acts.
- 18. Non-medical services, including but not limited to guest meals, radio, telephone, photocopy, taxes (except the Value-Added Tax or Goods and Services Tax for medical services), medical report charges and the like.
- 19. Expenses incurred for experimental or unproven medical technology or procedure not in accordance with the standards of good and prudent medical practice. For the purposes of interpreting "standards of good and prudent medical practice", Bupa shall consider (I) standards that are based on clinically proven evidence in appropriately reviewed, independent medical journals; (II) relevant specialty body recommendations; and/or (III) the views of specialists practising in the relevant clinical area.
- 20. Engaging or taking part in naval, military or airforce or any operation with any armed force; or any form of professional sports.

Bupa Benefits Schedule

Hospital & Surgical Benefits

Ge	ographical limit and scope: Hong Kong	Plan 1	Plan 2	Plan 3
Restricted room and board level		Private	Semi-private	Ward
Reimbursement percentage		90%	90%	90%
Ве	nefit Schedule			
A.	Room & Board, per day limit			
	Maximum 182 days per year			
В.	Hospital Miscellaneous - Limit per year	1		
C.	Surgeon and Attendance Fees (per Disability per Contract Year)			
	payable for surgeon and medical attendance charges for surgical			
	- ultra major			
	- Major			
	- Intermediate			
	- Minor			
D.	Anaesthetist's Fees (per Disability per Contract Year)			
	- ultra major			
	- Major			
	- Intermediate			
	- Minor			
E.	Operating Theatre Fees (per Disability per Contract Year)			
	- ultra major			
	- Major			
	- Intermediate			
	- Minor			
F.	In-patient Physician's Fees (per day limit)			
	payable for:			
	- in-patient medical attendance for non-surgical cases only			
	- one pre-hospitalisation/pre-surgery consultation			
	 all post-hospitalisation/post-surgery consultations within 6 weeks after discharge from Hospital or after surgery 			

Hospital & Surgical Benefits

Geographical limit and scope: Hong Kong		Plan 2	Plan 3
Restricted room and board level		Semi-private	Ward
Reimbursement percentage		90%	90%
Benefit Schedule			
G. Special Services (per Contract Year)			
- payable for stent insertion for Percutaneous Transluminal Coronary Angioplasty (PTCA) and other consumable interventional cardiology, cardiac pacemakers and intraocular lens			
Deductible per Disability per Contract Year		100,000	100,000
Overall Limit per Disability per Contract Year		500,000	200,000

Note:

- 1. Hospital and Surgical Benefit is payable for eligible expenses of items (1) to (7) incurred by the Member during his Hospital Confinement, Clinical Operation or Day Case Surgery in Hong Kong subject to the Deductible and reimbursement percentage up to the Maximum Limits as specified.
- 2. Miscellaneous Hospital Service Benefit is payable for:
- investigations, imaging and tissue pathology;
- intensive care unit up to maximum 30 days per Contract Year provided that the amount payable under Room and Board Benefit has been exhausted;
- private nursing services during Hospital Confinement or at home after discharge from Hospital rendered by a Qualified Nurse upon referral by the attending Registered Medical Practitioner up to maximum 30 days per Contract Year;
- in-patient Specialist's fees subject to written referral from the attending Registered Medical Practitioner except for pathologist, radiologist or Physiotherapist who provides services during Hospital Confinement; and
- companion bed for child up to maximum 30 days per Contract Year

Conversion Privilege

Bupa VTop

Lifelong protection

Enrolment is only allowed once per lifetime!

Existing Bupa group member

Retirement / Termination

Thinking of Extra Protection

Membership

Guarantee Transfer

Bupa VTop



Same room level H&S Benefits

- Boosting your group cover
- No underwriting required for Hospital and Surgical Benefit and Optional Supplementary Major Medical Benefit.
- Pre-existing conditions will be covered if the member has been continuously insured under a Bupa group scheme and/or Bupa VTop for a total of <u>at least 12 consecutive months</u>.*
- No waiting period
- Guaranteed lifetime renewal

Bupa VTop Hotline

Tel.: 2517-5268

Bupa's Website: www.bupa.com.hk



Product brochure

Bupa VTop



Eligibility

Existing Bupa group scheme members with Hospital and Surgical Benefit are eligible for enrolment during any one of the following periods:

Within 60 days of joining a Bupa group scheme

Within 60 days after the Contract Anniversary Date of a Bupa group scheme Within 30 days before or after termination of a Bupa group scheme membership

Bupa Customer Service

Bupa's Customer Help Desk



24-hour Bupa's Customer Help Desk

Tel : 2517-5388 Fax : 3973-6970

e-mail : customercare@bupa.com.hk

Within Office Hours

9:00 am – 7:00pm, Monday to Friday, except public holiday

We are pleased to answer all your enquiries

Outside office hours

- information of HealthNet Service Providers, if applicable
- information of benefit entitlement
- information on claims and administration procedures
- · claim forms