

# International Health and Hospital Plan



Product Summary  
From 1 November 2024

[bupaglobal.com](https://bupaglobal.com)

# International Medical Insurance for the globally minded

Bupa Global is the international division of the Bupa Group – a healthcare company with over 75 years' medical experience and a range of facilities that include care homes, hospitals, primary care centres and dental clinics.

At Bupa Global, we give globally minded customers access to appropriate medical care and exceptional coverage – whether at home or away. Our range of global health plans are designed for those wanting the highest level of cover available within Bupa and access to first class healthcare wherever you are in the world, within your area of cover.

Offering a range of benefits that go beyond insuring you in case of emergency our comprehensive range of health plans include a renowned level of service available in many languages, and access to thousands of medical facilities and experts worldwide.

# Product overview

Whether you are at home or abroad, with your International Health and Hospital Plan you can feel confident that you and your family have high quality health insurance and expert support whenever you need it.

Your insurance plan consists of a core in-patient cover and four optional modules to choose from. These modules cover out-patient treatment, medicine, medical evacuation, dental and optical benefits respectively. You also have the possibility to choose a deductible to truly tailor your insurance cover to suit your individual needs.

As an International Health and Hospital Plan customer you are free to receive treatment around the world, and you can choose any recognised hospital, clinic, doctor, or specialist you prefer. Our team of medical consultants can assist you in finding an appropriate medical provider for you.



# Tailoring your plan

Health insurance requirements differ from country to country and everyone has individual needs. This is why our International Health and Hospital Plan allows you the flexibility of tailoring your own insurance plan.

## Hospital Plan

Your core plan for treatment received whilst staying in hospital

The Hospital Plan gives you the reassurance of covering essential hospital treatment you may need, whether for planned treatment or in an emergency.

You may choose this cover together with a deductible on its own, or in combination with any of our four optional modules.



## Choose your deductible

The deductible is the contribution you make towards the cost of your treatment each policy year before receiving payment

EUR	GBP	USD
Nil	Nil	Nil
350	250	400
1,050	750	1,600
4,000	2,750	5,000
8,000	5,500	10,000
16,000	11,000	20,000

You can choose to take out your plan with or without a deductible, in any of the three currencies.

Taking out a deductible lowers your premium.

The deductible does not apply to Medical Evacuation and Repatriation and/or Dental and Optical modules.



## You can choose any of our four optional modules

### Module 1 Non-Hospitalisation Benefits

Medical treatments that do not require a hospital stay: consultations with a doctor, specialist or therapist and annual health check-ups.

### Module 2 Medicine and Appliances

Prescribed medicines, hearing aids and rent of appliances such as rental of a wheelchair.

### Module 3 Medical Evacuation and Repatriation

Medical Evacuation when there is no possibility of receiving appropriate quality of treatment locally, e.g. by aeroplane or helicopter, and cover for an accompanying friend or family member.

### Module 4A and 4B Dental and Optical

You have a choice between two levels of cover. Cover will include routine and special dental treatment, glasses and contact lenses, and an eye check performed by an optician/optometrist.



**Your tailored  
International health  
and hospital plan**

Note: in the Table of Benefits you can see in detail which benefits are covered under the different modules and the benefit limits.



# Your Bupa Global online services

As a Bupa Global customer you have access to a range of online services.

## Online services

On **bupaglobal.com** you have access to a range of services and a comprehensive library of information and expert advice such as:

- call me back service — write your question and we will call you
- use Facility Finder to guide you to hospitals in your area or in a specific country
- submit claims
- find Questions and Answers

## Access your account online

You can access our exclusive and secure website and mobile app MembersWorld whenever you need to. With it, you can submit and track progress of claims, submit preauthorisation requests and get access to your membership card and insurance documents.

## Global access in your hands

The Global Virtual Care service, available via the MembersWorld app, provides you with access to a global network of doctors, offering medical guidance and consultations, plus same day virtual appointments – available any time of the day or night.

## Manage your policy on MembersWorld

Go to [bupaglobal.com/membersworld](https://bupaglobal.com/membersworld) and register for MembersWorld to access your personal policy information:

- Submit and track claims
- Request pre-authorisation, with instant decisions for certain treatment pathways
- Quick access to view your benefit information and documents
- View membership cards – on and offline
- Manage cards and make payments

## Become a paperless customer

If you choose to become a paperless customer, you will receive all documents and correspondence from Bupa Global on MembersWorld. We will notify you by email when you have updates on MembersWorld so you are always fully informed. Go to [bupaglobal.com/membersworld](https://bupaglobal.com/membersworld) to register or download the MembersWorld app. Please be aware that you will not receive any hardcopies to your postal or collection address and that it will be your responsibility to check all documents and correspondence online and to inform us of any changes to your email address.

# Table of Benefits 2024 / 2025

All amounts are in EUR / GBP / USD

The currency chosen for the insurance at point of application is the currency all your payments will be based on. This means that for example if your contract currency is EUR all your payments will be based on the EUR benefit limits stated in the Table of Benefits, although you might have been treated in Switzerland or the U.S.

## Hospital Plan

Payments under the Hospital Plan are affected according to the Table of Benefits below. If you have chosen a deductible, please note that the benefit limits for the benefits listed in the Table of Benefits will be reduced by any remaining deductible. Once your deductible has been reached, all covered expenses will be paid in line with your benefit limits. One joint deductible applies per person per policy year for Hospital Plan, Module 1 and Module 2 (if chosen).

For the Hospital Plan and any additional modules, the payment will not in any event exceed the following amounts or the overall annual maximum per person per policy year of EUR 3,600,000 /GBP 3,000,000/ USD 4,400,000

Hospital Services – during Hospitalisation	100%
Private room	100%
Intensive care room	100%
Room and board for a parent or legal guardian accompanying a child dependant	100%
Surgery	100%
Initial reconstruction surgery, immediate or delayed, following an injury or illness (excluded corrective reconstruction surgery for enhancement of appearance and replacement of implant/ prosthesis)	100%
Medical treatment, laboratory tests, scans	100%
Medicine for use during hospitalisation and relevant only for the insured condition being treated	100%
Prescribed out-patient medicine after discharge from hospital (medicine must be licensed for the condition which was treated while hospitalised), up to 7 days, maximum per policy year	
Pacemaker	100%
Mental health treatment provided by recognised mental health providers	100%
Cancer treatment Once cancer has been diagnosed this benefit includes fees that are related specifically to planning and carrying out active treatment for cancer. This includes tests, diagnostic imaging, consultations and prescribed medicines (when receiving anti-hormonal drug as sole treatment for cancer, only the antihormonal drug expenses are covered) If your treatment involves advanced therapy medicinal products (ATMP), this will be paid from the ATMP benefit.	100%
Advanced therapy medicinal products (ATMPs)* We pay for ATMP treatment if it is: <ul style="list-style-type: none"> <li>o administered by a specialist in the country where you receive it, and;</li> <li>o approved by the licensing authority in the country where you receive it, for your condition, stage of disease and stage of treatment that you have, and;</li> <li>o endorsed by an independent specialist appointed by Bupa Global who confirms it: <ul style="list-style-type: none"> <li>o as medically appropriate, based on established medical practice, or</li> <li>o is provided under a registered and ethically approved study (in this case we will not apply the 'experimental or unproven treatment' exclusion).</li> </ul> </li> </ul> Please contact us for pre-authorisation before proceeding with treatment. Benefit may not be paid unless pre-authorisation has been provided.	100%, one course of treatment for each condition per lifetime
Pre-examinations that are medically necessary in order to perform the surgery or treatment which is to take place during hospitalisation are covered up to 30 days prior to hospitalisation	
Check-ups that are medically necessary in order to verify that the customer is recovering successfully from the surgery or treatment received while hospitalised are covered up to 180 days after hospitalisation	
Physiotherapy following surgery is covered with up to 10 sessions	
Out-patient treatment in a Hospital or Clinic	
Surgery	100%
Dialysis (including home dialysis), intravenous drug infusion which is only available as an infusion (must be pre-authorised by the Company)	100%
Endoscopic examinations	100%

Pre-examinations that are medically necessary to perform the treatment/surgery are covered up to 30 days prior to treatment/surgery

Check-ups that are medically necessary to verify that the customer is recovering successfully from the treatment/surgery are covered up to 180 days after treatment/surgery

Physiotherapy following treatment/surgery is covered with up to 10 sessions

Other out-patient treatment is reimbursed under Module 1 - Non-Hospitalisation Benefits

Childbirth* (subject to a 18 month waiting period)	Hospital Plan			Hospital Plan incl. Module 1 Non-Hospitalisation Benefits		
	EUR	GBP	USD	EUR	GBP	USD
Medically essential caesarean section, including pre- and postnatal treatment for mother and child. Maximum per delivery	100%	100%	100%	100%	100%	100%
	10,625	7,325	13,200	12,650	8,575	15,400
Delivery and caesarean following infertility treatment. Excluding pre- and postnatal treatment for mother and child	100%	100%	100%	100%	100%	100%
	5,725	3,925	7,150	7,150	4,850	8,800

\*Deductible, if chosen, also applies to childbirth benefit. Only the amount of one full annual deductible will be applied to maternity claims for one pregnancy, even if the course of pregnancy spans two policy years.

Hospital Plan			
	EUR	GBP	USD
<b>Organ Transplant</b>			
Organ transplant	100%	100%	100%
Per diagnosis and course of treatment per lifetime, to include all related costs up to the financial maximum.			
Please contact us for pre-authorisation before proceeding with treatment. Benefit may not be paid unless pre-authorisation has been provided.	450,000	315,000	500,000
The insurance policy must be valid throughout the course of treatment.			
The procurement of the organ must be pre-authorised by the Company.			
<b>Emergency Room Treatment</b>			
Emergency room treatment in connection with an acute illness or accident	100%	100%	100%
<b>Local Medical Transport</b>			
Ground transport to and from hospital when it is medically necessary that special medical services and/or medical equipment are provided	100%	100%	100%

## In-patient Rehabilitation

We pay for rehabilitation, including room, board and a combination of therapies such as physical, occupational and speech therapy after an event such as a stroke. We do not pay for room and board for rehabilitation when the treatment being given is solely physiotherapy.

We pay for rehabilitation, only when you have received our pre-authorisation before the treatment starts, for up to 42 days treatment in each membership year. For in-patient treatment one day is each overnight stay and for day-case treatment, one day is counted as any day on which you have one or more appointments for rehabilitation treatment.

We only pay for rehabilitation where it:

- starts within 6 weeks of in-patient treatment which is covered by your membership (such as trauma or stroke), and
- arises as a result of the condition which required the in-patient treatment or is needed as a result of such treatment given for that condition

Please contact us for pre-authorisation before proceeding with treatment. Benefit may not be paid unless pre-authorisation has been provided.

Note: in order to give pre-authorisation, we must receive full clinical details from your consultant; including your diagnosis, treatment given and planned, and proposed discharge date if you receive rehabilitation.

Covered 100% maximum per day	100%	100%	100%
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Covered 100% maximum per day	330	220	355
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## Home Nursing

Expenses incurred for medically prescribed assistance in your private home, by a certified nurse. Please contact us for pre-authorisation before proceeding with treatment. Benefit may not be paid unless pre-authorisation has been provided.

Maximum per day for maximum 40 days per policy year	100%	100%	100%
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Hospice and palliative care, maximum per lifetime	130	84	135
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## Hospital Cash Benefit

If room, board and treatment are received free of charge or at a minor admission/service fee at a public hospital, per night maximum

Maximum 60 nights per policy year. Please contact us for pre-authorisation before proceeding with treatment. Benefit may not be paid unless pre-authorisation has been provided.	90	60	100
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## Emergency Dental Treatment

Acute emergency dental treatment due to serious accident requiring hospitalisation	100%	100%	100%
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In case of doubt, the decision will be left with the Company's dental consultant

\*A combined maximum of 15 consultations within a 30-day period for GP/Specialists and Psychologist/Psychotherapist.

## Module 1 Non-Hospitalisation Benefits

Payments under this module are according to the Table of Benefits. If you have chosen a deductible, please note that the benefit limits for the benefits listed in the Table of Benefits will be reduced by any remaining deductible. Once your deductible has been reached, all covered expenses will be paid in line with your benefit limits.

One joint deductible applies per person per policy year for Hospital Plan, Module 1 and Module 2 (if chosen). Payments will not in any event exceed the following amounts or the annual maximum limit of EUR 35,000 / GBP 25,000 / USD 35,000.

### General Practitioners and Specialists\*

	EUR	GBP	USD
GP consultations, per consultation	220	175	235
Chinese doctor consultation (if charged separately), per consultation Maximum EUR 300 / GBP 220 / USD 300 per policy year	300	220	300
Eye and ear specialists/other specialists, per consultation	220	175	235
Psychiatrists, per consultation	220	175	235

### Psychologist\*

Psychologist and Psychotherapist*, per consultation	220	175	235
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### Therapists

Dietetic guidance, speech therapy per consultation Maximum four consultations per policy year	50	40	50
Physiotherapist, Occupational therapist, per consultation	95	70	95
Maximum per policy year	1,050	700	1,200
Chiropractor/osteopath (including Chinese bonesetter) all inclusive, per consultation	65	50	65
Maximum per policy year	1,050	700	1,200

### Full health screening all inclusive, per year

	900	800	1,000
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### Examinations and other Medical Assistance

Laboratory test, analysis Maximum per test	100%	100%	100%
X-ray	450	305	500
ECG	450	305	500
Scan, per examination	1,020	780	1,200
Injection and vaccination, per injection/vaccination	85	65	100
Acupuncture and homeopathic treatment, performed by complementary medicine practitioners when they are appropriately qualified and registered to practice in the country where treatment is received. This includes the cost of both the consultation and treatment, including any complementary medicine prescribed or administered as part of treatment.	55	35	60
Should any complementary medicines or treatments be supplied or carried out on a separate date to a consultation, these costs will be considered as a separate visit.			

## Module 2 Medicine and Appliances

Payments under this module are according to the list below. If you have chosen a deductible, please note that the benefit limits for the benefits listed in the Table of Benefits will be reduced by any remaining deductible. Once your deductible has been reached, all covered expenses will be paid in line with your benefit limits. One joint deductible applies per person per policy year for Hospital Plan, Module 1 and Module 2 (if chosen).

Hearing Aids	50%	50%	50%
	EUR	GBP	USD
Prescribed hearing aids, per appliance, maximum	300	200	325
Maximum two appliances are reimbursed per policy year up to maximum.	600	400	650

### Other Appliances

Slings and bandages	100%	100%	100%
Arch support	100%	100%	100%
Medical appliances	100%	100%	100%

### Medicine

Prescribed medicine and traditional Chinese medicine			
Traditional Chinese medicine administered by a traditional Chinese practitioner per policy year, up to an annual maximum of EUR 375 / GBP 260 / USD 450 Limited to recognised traditional Chinese practitioners registered to practice locally	100%	100%	100%
Medicine and other appliances are reimbursed up to an annual maximum of	3,000	2,000	3,300

## Module 3 Medical Evacuation and Repatriation

Medical Evacuation and Repatriation covers transportation to the nearest appropriate place of treatment if you have a serious illness or injury.

### Medical Evacuation and Repatriation

Transportation expenses by aeroplane or helicopter	100%
Accompanying person	100%
Return journey to residential address abroad/home country within three months after completion of treatment	100%
Statutory arrangements in case of death, such as embalming and zinc coffin Transportation of the urn/coffin	100%
Expenses are covered up to the overall annual maximum of your policy	
In all circumstances, we must be notified before transport takes place, either directly or through the attending specialist	
Medical Evacuation & Repatriation must be pre-authorized by the Company. Please contact us for pre-authorization before proceeding with treatment. Benefit may not be paid unless pre-authorization has been provided.	



## Modules 4A and 4B Dental and Optical

Payments under these two modules are affected at 50-80%, but they will not in any event exceed the following amounts or the respective annual maximums of Module 4A: EUR 5,000 / GBP 3,500 / USD 5,000 and Module 4B: EUR 7,500 / GBP 5,000 / USD 7,500.

	Module 4A			Module 4B		
Dental Treatment	80%	80%	80%	80%	80%	80%
	EUR	GBP	USD	EUR	GBP	USD
Examinations, maximum	30	25	30	50	40	50
Tooth cleaning, maximum	50	30	50	70	40	70
Fillings per tooth, maximum	80	55	80	130	80	130
Root treatment per tooth, maximum	380	245	380	540	370	540
Tooth extractions per tooth, maximum	75	40	75	145	90	145
Surgery, maximum	160	110	180	465	320	520
X-ray, maximum	60	30	60	70	50	70
Anaesthesia, maximum	30	20	30	50	40	50
Special Dental Treatment	50%	50%	50%	50%	50%	50%
Bridgework Crowns Dental implants Periodontitis Orthodontics (tooth adjustment) (subject to a 24 month waiting period) Dentures						
Special dental treatment per policy year, maximum	2,650	2,000	2,650	3,650	2,750	3,650
	Module 4A			Module 4B		
Glasses and Contact Lenses	80%	80%	80%	80%	80%	80%
One pair of glasses (excluding frames) per policy year, maximum	160	100	160	220	150	220
Contact lenses, per policy year, maximum	100	60	100	130	80	130
Frames and sunglasses are not covered						
Eye check	Module 4A			Module 4B		
	Max per policy year			Max per policy year		
	EUR	GBP	USD	EUR	GBP	USD
Eye check performed by optician/optometrist	240	150	240	240	150	240

This is only a summary. Please refer to the Terms and Conditions in the Membership Guide for full detail of cover.

# A few things that make us different

## The Bupa Global difference

Over 50 years of medical expertise and dedication to health. A global team of advisers and health experts who, between them, speak multiple languages – and a service that exceeds expectations. These are just a few of the things that make us different.

## Global network

Allowing access to a network of over 1.9 million medical providers (inc. U.S.), we give customers the flexibility to choose where and how they receive treatment. We settle directly with our network of providers, so you don't have to pay upfront for your treatment.

## Financial reassurance

Health insurance isn't just about your health. It's also about not worrying about unexpected costs. With us by your side – one of the world's leading international health insurers – you can simply focus on enjoying life.

## Bupa Global Assistance

Bupa Global Assistance provides you with medical emergency support around the clock. They also assist you in finding a medical provider for planned hospital stays and help you in organising direct payment settlement between Bupa Global and the hospital.

## Multilingual advisers

When it comes to healthcare, we know you want support from people who understand you and your needs. That's why we have a multilingual team who are able to speak in many languages and can support you, wherever you are.

## Pre-existing conditions

We don't believe past health issues should stop you from enjoying your future. That's why, when you join our global health plans, many pre-existing conditions could be covered.

## Your health is at the heart of everything we do

To maintain this focus, we continue to remain free of shareholders, re-investing profits back into our business. It fuels our drive to improve our services to you and offer access to first class care.

## Confidence in your diagnosis

The solution to health problems isn't always black and white. That's why we offer you the opportunity to get another opinion from an alternative leading medical expert. The Second Medical Opinion service is available to all customers looking for confidence and peace of mind in their medical diagnosis.

## Lifetime renewability

Regardless of your age and changes in your health, your insurance policy will be renewed (subject to changes in residency and/or nationality according to the Terms and Conditions).

## Children covered at no extra cost

Two children under the age of 10 years per paying adult (maximum of four children per policy) are covered at no extra cost (subject to underwriting).

## Babies are covered from birth

After the parent's policy has been in force for 18 months newborn babies are covered from birth, irrespective of their state of health (excluding adopted children, children being born as a result of fertility treatment and/or born by a surrogate mother).

## High risk sport activities covered

Many leisure and sports activities are covered. For any details please refer to the Terms and Conditions in the Membership Guide.

## Supporting mental health

At Bupa Global we believe that mental health and wellbeing are just as important as physical health. To support this in-patient and day-patient mental health treatment is covered (up to the annual maximum limit of your chosen plan), and we also include cover for ADHD, addiction and self-inflicted injuries.

# Talk to us

If you want quality health insurance, call us today to find out more about International Health and Hospital Plan or any of Bupa Global's other products and services that may be of interest to you. After all, our purpose is all about longer, healthier, happier lives and making a better world, so there is no better place to start.



**General services and medical enquiries:**

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Your calls may be  
recorded or monitored.

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Global Virtual Care and the Second Medical Opinion service are provided by a third party, directly to you. Bupa Global assumes no liability and accepts no responsibility for information provided by this third party; or the performance of the services. Support and information provided through these services do not confirm that any related treatment or additional support is covered under your health plan. These services are not intended to be used for emergency or urgent medical treatment. Global Virtual Care and the Second Medical Opinion services are not regulated by the Financial Conduct Authority nor by the Prudential Regulation Authority.

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