Significant changes to your Bupa Global Health Plan

These changes are effective once your plan renews on or after 1st November 2024.

We have made a number of changes to the wording of your plan. This leaflet tells you about the significant changes we have made to the plan since you joined or your plan was renewed. Please keep it with your latest copy of your membership pack, so that you can refer to it if you need to.

You'll find your updated membership guide on MembersWorld from your renewal date, or you can get in touch to receive a paper, large print, audio or Braille version.

CHANGES TO TERMS

Maternity waiting period (Elite and Ultimate customers)

We have increased the waiting period for maternity benefits to 18 months. This change only applies to:

- new customers and
- dependants added to policies renewing

from 1st November 2024 onward.

Ending your plan

We have introduced new terms for when we are no longer able to offer cover on this product and how we will support you.

Cancellation period

We have made our cancellation terms clearer and these include any cancellations since 1st July 2023.

MAKING EXISTING TERMS CLEARER

Cancer treatment

We have expanded and clarified the treatments and services available to you as part of any treatment for cancer.

Children covered at no additional cost (Elite and Ultimate customers)

We have clarified what happens when you add your children to the plan.

Professional sports activities

We have clarified the definition of professional sports.

Dental treatment and hearing aids/optical (Elite customers)

We have clarified that dental treatment and hearing aids/optical treatment share a benefit limit and do not have separate limits.

Reasonable and customary

We have clarified that our reasonable and customary policies apply to all claims.

NEW EXCLUSIONS

Professional sports activities

We have added an exclusion to clarify that we do not cover treatment due to professional sports activities.

Antenatal classes

We will not pay for antenatal classes.

USING YOUR PLAN

Making a claim

We have changed the age that we will contact a dependant about their claims from 18 to 16.

Paying a claim

We have changed the age that we will directly reimburse a dependant for their claims from 18 to 16.

Pre-authorisation

We have clarified which benefits need to be preauthorised. This is stated in the benefit explanations. We may not pay your claim for these benefits if you do not get pre-authorisation from us.

Obesity and weight management

We have clarified how we cover obesity and weight management claims.

The changes below have also been updated in the membership guide. They will come into effect from 1st September 2025.

CHANGES TO TERMS

Adding your newborn child

We have updated the terms for adding your newborn to the policy.

NEW OR ENHANCED BENEFITS

Newborn care

We have added a newborn care benefit for treatment taking place in the first 90 days after your child is born. Newborn children must have their own membership. All treatment in the first 90 days will be subject to the newborn care benefit limit.