

保障摘要 Summary of Benefits

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保柏靈活配自願醫保計劃提供以下選擇（括號內數字為自願醫保認可產品編號）：
Bupa MyFlexi VHIS Plan offers the options below (VHIS certification numbers in brackets):

- 尊尚 / 升級尊尚 Deluxe / Deluxe Plus (F00029-03-000-06 / F00029-03-001-06)
- 智選 / 升級智選 Advance / Advance Plus (F00029-02-000-06 / F00029-02-001-06)
- 基本 / 升級基本 Standard / Standard Plus (F00029-01-000-06 / F00029-01-001-06)

A 認可產品之保障摘要 Summary of Benefits for the Certified Plan

1) 基本保障 Basic Benefits	尊尚 / 升級尊尚 Deluxe / Deluxe Plus	智選 / 升級智選 Advance / Advance Plus	基本 / 升級基本 Standard / Standard Plus
保障項目 ^① Benefit items ^①	賠償限額 (港元) Benefit limit (in HKD)		
a 病房及膳食 Room and board	每日 \$4,000 per day (每保單年度最多 270 日 Maximum 270 days per Policy Year)	每日 \$2,100 per day	每日 \$1,000 per day
b 雜項開支 Miscellaneous charges	每保單年度 \$45,600 per Policy Year	每保單年度 \$25,600 per Policy Year	每保單年度 \$16,400 per Policy Year
c 主診醫生巡房費 Attending doctor's visit fee	每日 \$3,900 per day (每保單年度最多 270 日 Maximum 270 days per Policy Year)	每日 \$1,800 per day	每日 \$1,000 per day
d 專科醫生費 ^② Specialist's fee ^②	每保單年度 \$13,400 per Policy Year	每保單年度 \$5,050 per Policy Year	每保單年度 \$4,600 per Policy Year
e 深切治療 Intensive care	每日 \$8,000 per day (每保單年度最多 25 日 Maximum 25 days per Policy Year)	每日 \$5,400 per day	每日 \$4,000 per day
f 外科醫生費 Surgeon's fee	每項手術，按手術表劃分的手術分類 - Per surgery, subject to surgical category for the surgery/procedure in the Schedule of Surgical Procedures - ◦ 複雜 Complex \$126,000 ◦ 大型 Major \$63,200 ◦ 中型 Intermediate \$26,800 ◦ 小型 Minor \$9,650		
g 麻醉科醫生費 Anaesthetist's fee	每項手術，按手術表劃分的手術分類 - Per surgery, subject to surgical category for the surgery/procedure in the Schedule of Surgical Procedures - ◦ 複雜 Complex \$43,200 ◦ 大型 Major \$22,000 ◦ 中型 Intermediate \$9,350 ◦ 小型 Minor \$4,720		
h 手術室費 Operating theatre charges	每項手術，按手術表劃分的手術分類 - Per surgery, subject to surgical category for the surgery/procedure in the Schedule of Surgical Procedures - ◦ 複雜 Complex \$43,200 ◦ 大型 Major \$22,000 ◦ 中型 Intermediate \$9,350 ◦ 小型 Minor \$4,720		
i 訂明診斷成像檢測 ^{③③} Prescribed Diagnostic Imaging Tests ^{③③}	每保單年度 \$40,000 per Policy Year	每保單年度 \$30,000 per Policy Year (設 30% 共同保險 Subject to 30% coinsurance)	每保單年度 \$20,000 per Policy Year
j 訂明非手術癌症治療 ^④ Prescribed Non-surgical Cancer Treatments ^④	每保單年度 \$158,000 per Policy Year	每保單年度 \$123,000 per Policy Year	每保單年度 \$83,000 per Policy Year
k 入院前或出院後 / 日間手術前後的門診護理 ^⑤ Pre- and post-Confinement / Day Case Procedure outpatient care ^⑤	每保單年度 \$6,000 per Policy Year ◦ 2 次住院 / 日間手術前的門診 / 急症診症 2 prior outpatient visits or Emergency consultations per Confinement/Day Case Procedure ◦ 所有出院 / 日間手術後 90 日內之跟進門診 All related follow-up outpatient visits per Confinement/Day Case Procedure (within 90 days after discharge from Hospital or completion of Day Case Procedure)	每保單年度 \$3,600 per Policy Year	每保單年度 \$3,200 per Policy Year
l 精神科治療 Psychiatric treatments	每保單年度 \$30,000 per Policy Year		
2) 額外保障 Enhanced Benefits	尊尚 / 升級尊尚 Deluxe / Deluxe Plus	智選 / 升級智選 Advance / Advance Plus	基本 / 升級基本 Standard / Standard Plus
保障項目 ^① Benefit items ^①	賠償限額 (港元) Benefit limit (in HKD)		
a 私家看護費 ^② Private nursing ^②	每日 \$1,020 per day (每保單年度最多 120 日 Maximum 120 days per Policy Year)	每日 \$680 per day	每日 \$410 per day
b 陪床費 Companion bed	每日 \$1,880 per day (每保單年度最多 270 日 Maximum 270 days per Policy Year)	每日 \$850 per day	每日 \$450 per day
c 急症意外門診保障 Emergency outpatient treatment for Accidents	每保單年度 \$11,900 per Policy Year	每保單年度 \$8,700 per Policy Year	每保單年度 \$6,600 per Policy Year
d 日症病人洗腎 ^④ Day Patient kidney dialysis ^④	每保單年度 \$158,000 per Policy Year	每保單年度 \$123,000 per Policy Year	每保單年度 \$83,000 per Policy Year
e 住院或指定治療後由註冊中醫師提供之診症或針灸 Consultation or acupuncture by a Registered Chinese Medicine Practitioner after Confinement or specific treatments	每次 \$360 per visit (每保單年度最多 20 次 Maximum 20 visits per Policy Year)	每次 \$270 per visit	每次 \$225 per visit

3) 其他保障 Other Benefits	尊尚 / 升級尊尚 Deluxe / Deluxe Plus	智選 / 升級智選 Advance / Advance Plus	基本 / 升級基本 Standard / Standard Plus
保障項目 Benefit item	賠償限額 (港元) Benefit limit (in HKD)		
a 第二索償現金津貼 ^③ Second Claims Incentive ^③	每日 \$2,000 per day	每日 \$1,050 per day	每日 \$500 per day
	(每保單年度最多270日 Maximum 270 days per Policy Year)		
其他限額 Other limits			
1) 基本保障、2) 額外保障及 3) 其他保障下所有保障項目的每年保障限額 Annual Benefit Limit for all benefit items under 1) Basic Benefits, 2) Enhanced Benefits and 3) Other Benefits	無 Nil		
1) 基本保障、2) 額外保障及 3) 其他保障下所有保障項目的終身保障限額 Lifetime Benefit Limit for all benefit items under 1) Basic Benefits, 2) Enhanced Benefits and 3) Other Benefits	無 Nil		

4) 自選提升保障 – 升級保障 (只適用於香港招致的合資格費用) ^④ Optional Enhanced Benefit - Push the Limit Benefit (Applicable to Eligible Expenses incurred within Hong Kong only) ^④	升級尊尚 Deluxe Plus	升級智選 Advance Plus	升級基本 Standard Plus
限制病房級別 ^⑤ Restricted ward class ^⑤	標準私家房 Standard Private Room	半私家房 Semi-private Room	大房 Ward Room
保障項目 Benefit items	賠償限額 (港元) Benefit limit (in HKD)		

a 全數賠償保障 ^① Full cover benefit ^①	此保障將賠償於 1) 基本保障下保障項目 (a) – (j) 項所述的合資格費用，有關治療須於保柏靈活配特選醫院 ^⑥ 、保柏尚健特選專科醫生之診所 ^⑥ 或保柏尚健特選服務供應商 ^⑥ 進行 This benefit is payable for Eligible Expenses of benefit items described under (a) – (j) under 1) Basic Benefits incurred at Bupa MyFlexi Appointed Hospitals ^⑥ , Bupa HealthPlus Appointed Specialist's clinics ^⑥ or Bupa HealthPlus Appointed Service Providers ^⑥	全數賠償 ^② 以每保單年度 \$1,076,000 為限 Full cover ^② up to \$1,076,000 per Policy Year	全數賠償 ^② 以每保單年度 \$536,700 為限 Full cover ^② up to \$536,700 per Policy Year	全數賠償 ^② 以每保單年度 \$272,500 為限 Full cover ^② up to \$272,500 per Policy Year
b 附加醫療保障 Supplementary major medical benefit	此保障將支付 (i) 任何超出按 1) 基本保障下保障項目 (a) – (j) 項或 4a) 全數賠償可獲賠償的合資格費用；及 (ii) 任何於 1) 基本保障之保障項目 (i) 下支付的共同保險 This benefit is payable for (i) Any Eligible Expenses in excess of the benefit payable under benefit items (a) – (j) of 1) Basic Benefits or 4a) full cover benefit; and (ii) Any Coinsurance paid under benefit item (i) of 1) Basic Benefits	設 20% 共同保險 以每保單年度 \$636,880 為限 Subject to 20% Coinsurance up to \$636,880 per Policy Year	設 20% 共同保險 以每保單年度 \$338,700 為限 Subject to 20% Coinsurance up to \$338,700 per Policy Year	設 20% 共同保險 以每保單年度 \$135,500 為限 Subject to 20% Coinsurance up to \$135,500 per Policy Year

註解 Notes

① 同一項目的合資格費用不可獲 1) 基本保障下 (a) – (l) 項及 2) 額外保障下 (a) – (e) 項多於一個保障項目的賠償。

② 本公司有權要求有關書面建議的證明，例如轉介信或由主診醫生或註冊醫生在索償申請表內提供的陳述。

③ 檢測只包括電腦斷層掃描 (“CT” 掃描)、磁力共振掃描 (“MRI” 掃描)、正電子放射斷層掃描 (“PET” 掃描)、PET-CT 組合及 PET-MRI 組合。

④ 治療只包括放射性治療、化療、標靶治療、免疫治療及荷爾蒙治療。

⑤ 如因住院而招致任何條款及保障所涵蓋的合資格費用，而該合資格費用已獲得其他保險公司全數或部分支付，本保障將就該次住院的每一日支付賠償。

⑥ 升級保障所支付的賠償取決於你住院時所入住的病房級別，並只適用於香港招致的合資格費用 (設有例外情況)。若你住院時自願地入住高於你所選擇計劃的限制病房級別，

(i) 全數賠償保障將不予支付。你的合資格費用將會於 1) 基本保障之保障項目 (a) – (j) 下賠償，以相應的賠償限額為限；及

(ii) 附加醫療保障將就病房級別提升於實施 20% 共同保險後進一步乘以下列調整值：

- 半私家房至標準私家房：50%
- 大房至半私家房：50%
- 大房至標準私家房：25%
- 大房 / 半私家房 / 標準私家房至總統套房、貴賓房或豪華房：0%

⑦ 有關全數賠償保障

(i) 要享有全數賠償保障，請依循以下規定：

- 你必須於保柏靈活配特選醫院接受住院、或於保柏尚健特選專科醫生的診所或保柏尚健特選服務供應商接受日間手術、訂明非手術癌症治療或訂明診斷成像檢測；
- 於接受保柏尚健特選專科醫生 (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) 會診前，受保人必須取得註冊醫生的書面轉介；
- 就住院、日間手術、訂明非手術癌症治療及訂明診斷成像檢測，必須由保柏尚健特選專科醫生轉介、主診及/或治療；
- 你必須於住院及治療/手術前最少一個工作天向本公司提交初步保障審核表格，以供本公司批核 (有關初步保障審核之步驟，請參閱會員指引)；
- 請於登記時出示保柏尚健卡及/或初步保障審核文件；及
- 你於住院時必須入住你原有保障級別或以下的病房。

(ii) 如沒有完全依循以上第 (i) 節的規定，或全數賠償的賠償限額已耗盡，你的合資格索償將按 1) 基本保障之保障項目 (a) – (j) 的相應賠償限額賠償。超出金額將會於附加醫療保障下賠償。

⑧ 請參閱本公司網站 (www.bupa.com.hk/tc/medical-insurance/myflexi) 查閱最新的保柏靈活配特選醫院名單。此名單可能會不時更改。

⑨ 請登入本公司的客戶服務網站 myBupa 查閱最新的保柏尚健特選專科醫生及保柏尚健特選服務供應商名單。此名單可能會不時更改。

⑩ 全數賠償是指不設分項賠償限額。

註解 Notes

- ① Eligible Expenses incurred in respect of the same item shall not be recoverable under more than one benefit item in the table for items (a) - (l) of 1) Basic Benefits and items (a) to (e) of 2) Enhanced Benefits.
- ② The Company shall have the right to ask for proof of recommendation e.g. written referral or testifying statement on the claim form by the attending doctor or Registered Medical Practitioner.
- ③ Tests covered here only include computed tomography ("CT" scan), magnetic resonance imaging ("MRI" scan), positron emission tomography ("PET" scan), PET-CT combined and PET-MRI combined.
- ④ Treatments covered here only include radiotherapy, chemotherapy, targeted therapy, immunotherapy and hormonal therapy.
- ⑤ If any Eligible Expenses incurred for a Confinement are covered under the Terms and Benefits where such Eligible Expenses have been fully or partly paid by Other Insurance Company, this benefit shall be payable for each day of such Confinement.
- ⑥ Benefit payable under Push the Limit Benefit is dependent on the ward class you stay in during Confinement and only applicable to Eligible Expenses incurred in Hong Kong (exceptions apply). If you are voluntarily Confined at a ward class level higher than the restricted ward class of your chosen plan.
 - (i) Full cover benefit will not be payable and your Eligible Expenses will be reimbursed under benefit items (a) - (j) of 1) Basic Benefits up to their corresponding benefit limits; and
 - (ii) Supplementary major medical benefit will be further adjusted (after applying 20% Coinsurance) by multiplying the following adjustment factors for ward class upgrade:
 - From Semi-private Room to Standard Private Room: 50%
 - From Ward Room to Semi-private Room: 50%
 - From Ward Room to Standard Private Room: 25%
 - From Ward Room/Semi-private Room/Standard Private Room to suite, VIP or deluxe room: 0%
- ⑦ About full cover benefit
 - (i) Please follow all requirements below to enjoy full cover benefit:
 - You must be Confined at a Bupa MyFlexi Appointed Hospital or receive the Day Case Procedure, Prescribed Non-surgical Cancer Treatment or Prescribed Diagnostic Imaging Test at a Bupa HealthPlus Appointed Specialist's clinic or Bupa HealthPlus Appointed Service Provider;
 - A written referral must be obtained from a Registered Medical Practitioner prior to the consultation with a Bupa HealthPlus Appointed Specialist (except for dermatology, family medicine, gynaecology, ophthalmology, orthopaedics, otolaryngology, paediatric surgery, paediatrics and psychiatry);
 - The Confinement, Day Case Procedure, Prescribed Non-surgical Cancer Treatment and Prescribed Diagnostic Imaging Test must be referred, attended and/or performed by a Bupa HealthPlus Appointed Specialist;
 - You must submit the pre-authorisation form to the Company at least one (1) working day prior to Confinement and treatment/procedures for the Company's approval (please refer to the Membership Guide for the pre-authorisation procedure);
 - You must present the BHP Card and/or pre-authorisation document to the provider upon registration; and
 - You must stay at your chosen ward level or lower for Confinement.
 - (ii) If the requirements in (i) above are not fully satisfied or there is no remaining balance of benefit limit under full cover benefit, your claims, if eligible, will be reimbursed under the benefit items (a) - (j) of 1) Basic Benefits up to the corresponding benefit limits. The excess amount shall be payable under supplementary major medical benefit.
- ⑧ Please refer to the Company's website (www.bupa.com.hk/en/medical-insurance/myflexi) for the latest list of Bupa MyFlexi Appointed Hospitals. This list is subject to change from time to time.
- ⑨ Please log in to the Company's customer service portal myBupa to view the latest list of Bupa HealthPlus Appointed Specialists and Bupa HealthPlus Appointed Service Providers. This list is subject to change from time to time.
- ⑩ Full cover shall mean no itemised benefit sublimit.

詳情請瀏覽 www.bupa.com.hk/myflexipolicy 參閱保單及保障資料。

Please refer to the Policy and Benefit Information at www.bupa.com.hk/myflexipolicy for details.

以下為保柏靈活配自願醫保計劃的自選保障，並非認可產品的一部分並且不適用於申請稅項扣減。

The optional benefits of the Bupa MyFlexi VHIS Plan shown below are not part of the Certified Plan and are not eligible for claiming tax deduction.

B 自選保障之保障摘要 Summary of Benefits for Optional Benefits

賠償限額 (港元) Benefit limit (in HKD)

1) 門診保障 ^③ Clinical Benefit ^③ (只供已選擇升級保障之人士投保 Only available for enrolment after selecting Push the Limit Benefit)	網絡保障 ^① Network benefit ^①	非網絡保障 Non-Network Benefit
保柏尚健特選服務供應商數目 ^② No. of Bupa HealthPlus Appointed Service Providers ^②	約 Around 1,800	不適用 N/A
a 普通科醫生 ^⑦ General practitioner ^⑦		每次診治 \$340 (只限診症費) \$340 per visit (Consultation fee only)
b 專科醫生 ^⑧ Specialist ^⑧ <ul style="list-style-type: none"> 須獲註冊醫生書面轉介，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 Subject to written referral from a Registered Medical Practitioner, except for dermatology, family medicine, gynaecology, ophthalmology, orthopaedics, otolaryngology, paediatric surgery, paediatrics and psychiatry 	全數賠償 (包括診症費及最多5日之基本醫療所需西藥費用) Full cover (Includes consultation fee and up to 5 days of basic Medically Necessary Western Medication)	每次診治 \$640 (只限診症費) \$640 per visit (Consultation fee only)
c 家中應診 Home consultation	不適用 N/A	每次診治 \$760 (只限診症費) \$760 per visit (Consultation fee only)
d 物理治療師 ^⑨ Physiotherapist ^⑨ <ul style="list-style-type: none"> 須獲註冊醫生書面轉介 Subject to written referral from a Registered Medical Practitioner 	全數賠償 (只限診療費) Full cover (Treatment fee only)	每次診治 \$630 (只限診療費) \$630 per visit (Treatment fee only)
e 脊醫 ^⑩ Chiropractor ^⑩ <ul style="list-style-type: none"> 須獲註冊醫生書面轉介 Subject to written referral from a Registered Medical Practitioner 	不適用 N/A	
f 中醫師 Chinese herbalist	全數賠償 (包括診症費及最多兩劑之基本醫療所需中藥費用) Full cover (Includes consultation fee and up to 2 packets of basic Medically Necessary Chinese Medicines)	每次診治 \$350 (包括診症費、基本醫療所需中藥費用、針灸治療及推拿；亦支付由註冊中醫師處方並由合法來源 (不論是否於該註冊中醫師的門診所) 取得之基本醫療必需中藥費用) \$350 per visit (Includes consultation fee, basic Medically Necessary Chinese Medicines, acupuncture and tui na; also payable for basic Medically Necessary Chinese Medicines prescribed by a Registered Chinese Medicine Practitioner and obtained at a legitimate source (at or outside the treating Registered Chinese Medicine Practitioner's clinic))
g 跌打醫師 Chinese bonesetter		每次診治 \$550 (包括診症費、醫療所需西藥、中藥、針灸治療、診斷成像及化驗) \$550 per visit (Includes consultation fee, Medically Necessary Western Medication, Chinese Medicines, acupuncture, diagnostic imaging and laboratory tests)
h 精神科相關治療 ^⑪ Psychiatric-related treatments ^⑪	不適用 N/A	每次診治 \$550 (包括診症費、醫療所需西藥、中藥、針灸治療、診斷成像及化驗) \$550 per visit (Includes consultation fee, Medically Necessary Western Medication, Chinese Medicines, acupuncture, diagnostic imaging and laboratory tests)
i 臨床心理輔導 ^⑫ Psychological counselling ^⑫ <ul style="list-style-type: none"> 須獲精神科醫生書面轉介 Subject to written referral from a Psychiatrist 	不適用 N/A	每次診治 \$550 per visit
j 診斷成像及化驗 ^⑬ Diagnostic imaging and laboratory tests ^⑬ <ul style="list-style-type: none"> 須獲註冊醫生 (適用於所有診斷影像及化驗) 或註冊中醫師/脊醫^⑩ (只適用於X光及化驗) 書面轉介 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^⑩ for X-ray only and laboratory tests 	全數賠償 Full cover	每保單年度 \$5,200 per Policy Year
k 處方西藥 Prescribed Western Medication	每保單年度 \$5,200 (經由註冊醫生處方並由合法來源取得之醫療所需西藥費用) \$5,200 per Policy Year (Medically Necessary Western Medication prescribed by a Registered Medical Practitioner and obtained at a legitimate source)	

以「網絡保障」及「非網絡保障」合計，每保單年度有關項目(a) - (i)之診治次數上限合共為30次，其中項目(f) - (g)之診治次數上限合共為每保單年度20次，而項目(h) - (i)之診治次數上限則合共為每保單年度10次。每一項目以每日最多一次為限。

Maximum number of visits for both network benefit and Non-Network Benefit in aggregate per Policy Year for items (a) - (i) is 30 in total, with a sub-limit of 20 visits per Policy Year for items (f) - (g) and a sub-limit of 10 visits per Policy Year for items (h) - (i). Subject to a maximum of one visit per item per day.



賠償限額 (港元) Benefit limit (in HKD)

2) 牙科保障 Dental Benefit (只適用於年齡介乎15日至80歲之受保人 Only applicable to Insured Persons from Age 15 days to 80 years)		網絡牙科中心保障 Network Dental Centre benefit		非網絡牙科中心保障 Non-Network Dental Centre benefit	
		計劃 Plan A		計劃 Plan B	
網絡牙科中心數目 ^⑤ No. of Network Dental Centres ^⑤		16		不適用 N/A	
適用範圍 Eligibility		只適用於在網絡牙科中心 ^⑤ 診症時間內由註冊牙醫 (所有適用項目) 或註冊牙齒衛生員 (只適用於項目 (a)) 進行的合資格牙科服務 Only applicable to covered dental service items performed by a Registered Dentist (for all applicable items) or Registered Dental Hygienist (for item (a) only) at Network Dental Centres within consultation hours ^⑤		適用於在網絡牙科中心以外由註冊牙醫 (所有適用項目) 或註冊牙齒衛生員 (只適用於項目 (a)) 進行的合資格牙科服務。所有合資格牙科費用將以以下的賠償限額為限。請先直接向牙科服務供應商支付費用，然後再向本公司申請索償。 Applicable to eligible dental services from a Registered Dentist (for all applicable items) or Registered Dental Hygienist (for item (a) only) which are not performed at Network Dental Centres. All eligible dental expenses will be subject to the benefit limits below. Please settle the expenses with the dental providers directly and submit your claim to the Company.	
賠償率 Reimbursement percentage		不適用 N/A		100%	100%
a	洗牙 Scaling and polishing	每保單年度共一次 One visit in total per Policy Year	每保單年度共兩次 Two visits in total per Policy Year	每保單年度 \$300 per Policy Year	每保單年度 \$500 per Policy Year
b	定期口腔檢查 Routine oral examination				
c	口腔 X 光及藥物 Intra-oral X-rays and medications	全數賠償 ^⑤ Full cover ^⑤			
d	補牙及脫牙 Fillings and extractions	(只適用於蛀牙或患嚴重牙周病之牙齒之大牙 (銀粉) 或門牙 (瓷粉) 補牙。脫除智慧齒、複雜脫牙、口腔手術脫除牙腳、需移走牙骨或牙齒、任何口腔手術或因矯正牙齒而脫牙將不包括在保障內) Full cover ^⑤ (Applicable to fillings and extractions due to tooth decay or gum disease only, including amalgam (silver) fillings for premolar and molar teeth and white (composite) fillings for front teeth. Extraction of wisdom teeth, complicated extractions, extractions requiring bone removal, surgical extractions or extractions for orthodontic reasons are excluded)			
e	牙周病治療 Periodontal (gum) treatment	(只限由普通科註冊牙醫進行之輕微至中度的牙周病治療，包括清洗牙周袋內的牙菌膜及牙根刮治等牙科治療) Full cover ^⑤ (Includes treatment of mild to moderate Periodontal (gum) disease, which involves curettage and root planing with medication as required, and is limited to treatment by a general Registered Dentist)			
f	牙痛急症處理 Emergency consultation and treatment	全數賠償 ^⑤ (只適用於緊急牙痛舒緩 (包括敷料及藥物)、膿瘡切割及排放) Full cover ^⑤ (Includes emergency pain relief of toothache (including dressing and medication), incision and drainage of abscesses only)			

賠償限額 (港元) Benefit limit (in HKD)

3) 產科保障 Maternity Benefit (只適用於年齡介乎18至49歲之女性受保人 Only applicable to female Insured Persons from Age 18 to 49)	尊尚 / 升級尊尚 Deluxe / Deluxe Plus	智選 / 升級智選 Advance / Advance Plus	基本 / 升級基本 Standard / Standard Plus
a 順產 Normal delivery	每次懷孕 \$42,960 per pregnancy	每次懷孕 \$29,230 per pregnancy	每次懷孕 \$18,420 per pregnancy
b 剖腹生產 Caesarean section	每次懷孕 \$64,440 per pregnancy	每次懷孕 \$43,850 per pregnancy	每次懷孕 \$27,630 per pregnancy
c 流產 Miscarriage	每次懷孕 \$21,480 per pregnancy	每次懷孕 \$14,620 per pregnancy	每次懷孕 \$9,210 per pregnancy

- 產科保障將支付因懷孕引致之醫療費用，包括醫院住院、註冊醫生診症及處方的西藥、診斷化驗、產前檢查及產後檢查，以及初生嬰兒護理費用。
- 此保障不包括初生嬰兒在醫院住院期間之任何醫療費用，或任何因懷孕而引致或相關的精神科、心理、情緒或行為問題之治療。
- 受保人必須於本保障生效日之後受孕方可獲得賠償，首9個月等候期內不會獲得賠償。倘若因為終止懷孕或早產（妊娠20至37週之間的分娩），此產科保障將不會應用9個月等候期而作賠償，惟受保人必須於此產科保障生效日後受孕。為免存疑，若受保人於妊娠37週後但於9個月等候期內分娩，將不獲此產科保障賠償。
- 所有因懷孕或產科相關的醫療費用僅在本產科保障獲得賠償，並不會於認可產品或其他自選保障下獲得賠償（與產科相關的精神科狀況並受認可產品及／或門診保障有關項目覆蓋則除外）。
- The Maternity Benefit shall cover medical expenses incurred during pregnancy, including Hospital Confinement, consultation of a Registered Medical Practitioner and prescribed Western Medication, diagnostic tests, prenatal check-up and postnatal check-up, as well as nursery care of a newborn baby.
- This Benefit does not cover any medical expenses incurred by the newborn baby during Hospital Confinement or any treatments for psychiatric, psychological, mental or behavioural conditions arising from or in connection with maternity conditions.
- This Benefit is payable provided that the conception occurs after the commencement date of this benefit and no benefit shall be payable during the waiting period of the first 9 months. In the event of premature termination of pregnancy or premature birth (delivery that occurs between 20 and 37 weeks of gestation), this Benefit shall be payable without the application of the 9 months' waiting period provided that the conception of such pregnancy occurs after the commencement date of this Maternity Benefit. For the avoidance of doubt, if delivery is occurred after 37 weeks of gestation but within the 9 months' waiting period, this Maternity Benefit shall not be payable.
- All pregnancy or maternity related medical expenses shall be exclusively payable under this Maternity Benefit and no benefit shall be payable under the Certified Plan or other optional benefits (except for those maternity related psychiatric conditions covered under the Certified Plan and/or relevant Clinical Benefit items).

註解 Notes

- ① 有關「門診保障」之「網絡保障」
- (i) 每名已投保門診保障之合資格受保人均會獲發一張保柏尚健卡。受保人可使用保柏尚健卡享用全數賠償服務，惟必須依循以下的所有規定：
- 你的門診治療必須由保柏尚健特選服務供應商提供及於其診所內進行；
 - 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醫生轉介；
 - 必須按保柏供應商指引之要求向本公司取得初步保障審核確認，方可享用診斷成像及化驗之全數賠償（有關初步保障審核之步驟，請參閱會員指引）；及
 - 請在求診登記時出示你的保柏尚健卡，並以此卡繳付醫療費用。
- (ii) 如沒有依循以上第(i)節的所有規定，你的合資格醫療費用將於非網絡保障下作出賠償。你須先直接向供應商繳付醫療費用，然後向本公司申請索償。
- ② 有關保柏尚健特選服務供應商
- 請登入本公司的客戶服務網站myBupa查閱最新的保柏尚健特選服務供應商名單。此名單會不時更改。
- ③ 於轉介信發出日起計6個月內，可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 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）及帕金森病的門診診治（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(h)的賠償，而不會獲得其他項目之賠償。
- ⑤ 部分診斷影像中心或不接受由註冊中醫師及／或物理轉介的某些X光及化驗。如有疑問，請直接聯絡有關中心。
- ⑥ 門診保障下的普通科醫生、專科醫生及中醫師亦涵蓋視像診症服務供應商由普通科醫生、專科醫生及中醫師進行的醫療診症服務的診症費。此保障亦涵蓋由指定視像診症服務供應商的藥物運送費用（只包括普通科醫生及中醫師）。指定的視像診症服務供應商名單可於本公司的網站查閱，此名單可能會不時更改及更新。
- ⑦ 網絡保障下的普通科醫生將延伸至涵蓋在指定香港萬寧藥房進行的藥劑師的諮詢及治療（不是以預防為目的）以下輕微疾病最多7天的基本藥物：
- 「輕微疾病」僅包括感冒和／或流感、過敏、疼痛、胃腸道疾病和輕微皮膚問題（足癬、濕疹治療、輕微燒傷和過敏）。每次藥劑師諮詢僅涵蓋一種病徵和症狀。
 - 請注意，在指定萬寧藥房購買的藥物只適合5歲或以上的患者。
 - 受保人必須出示有效的保柏醫療卡及身分證明文件，方可享有免找數服務及全數賠償。諮詢後受保人可要求取得藥劑師通知單以作參考。
 - 有關萬寧藥房及其地點的完整列表，登入本公司的客戶服務網站myBupa後，於「搜尋網絡醫生」內的服務類型中點選「藥房」，此列表可能會不時更改，恕不另行通知。
 - 在萬寧藥房的每次諮詢將被視為使用網絡保障下的普通科醫生一次，以自選保障表內普通科醫生的每日最多診治次數為限，且不會根據任何其他保障作賠償支付，例如處方西藥（如有）。
 - 請瀏覽 <https://www.bupa.com.hk/pdf/bupa-pharmicare-generic.pdf> 查閱使用保柏藥劑服務的步驟。
- ⑧ 網絡牙科中心指由本公司委任的牙科中心網絡以提供自選保障之保障摘要上「網絡牙科中心保障」所列明的牙科服務項目。網絡牙科中心地點包括金鐘、銅鑼灣、鰂魚涌、尖沙咀、將軍澳、沙田、青衣、東涌等。請登入本公司之客戶服務網站myBupa查閱最新的牙科中心地址。此名單會不時更改。有關診症時間請向個別網絡牙科中心查詢。
- ⑨ 要享有全數賠償的網絡牙科中心保障：
- (i) 受保人必須於指定網絡牙科中心出示保柏會員卡、醫療卡或保單號碼，及香港身份證以作核實及紀錄便可使用免找數服務。如受保人直接向網絡牙科中心繳付費用，合資格的索償將根據非網絡牙科中心保障作出賠償，並以賠償限額為限。
- (ii) 每保單年度網絡牙科中心保障下項目(c) - (f)的診治次數不設上限。

註解 Notes

- ① About network benefit under Clinical Benefit
- (i) A BHP Card will be issued to every eligible Insured Person with Clinical Benefit. The Insured Person may use the BHP card to enjoy full cover under network benefit if all of the following requirements are fulfilled:
- Your clinical treatment must be performed by a Bupa HealthPlus Appointed Service Provider and carried out at their clinic(s);
 - 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 confirmation must be obtained from the Company as required by the Company's provider guidelines to enjoy full cover for diagnostic imaging and laboratory tests (Please refer to the Membership Guide for the pre-authorisation procedure); and
 - Please present your BHP Card upon registration for treatment and use it to pay the medical expenses.
- (ii) If the requirements in (i) above are not fully satisfied, your claims, if eligible, will be reimbursed under Non-Network Benefit. You are required to pay the medical expenses to the provider directly and then submit a claim to the Company.
- ② About Bupa HealthPlus Appointed Service Providers
- Please log in to the Company's customer service portal myBupa to view the latest list of Bupa HealthPlus Appointed Service Providers. This list is subject to change from time to time.
- ③ A referral letter is valid for the same or related medical condition for 6 months from the issue date. Another referral letter is required for treatment of a new or unrelated medical condition.
- ④ 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 (h) and no benefit shall be payable under other benefit items.
- ⑤ 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.
- ⑥ General practitioner, Specialist and Chinese herbalist under Clinical Benefit also covers the consultation fee charged by the general practitioners, Specialists and Chinese herbalists of video consultation service providers. This benefit shall also cover the medication delivery charge incurred by the designated video consultation service provider (general practitioner and Chinese herbalist only). The list of designated video consultation service providers can be found on the Company's website. The list may be updated and amended by the Company from time to time.
- ⑦ The general practitioner under the network benefit will be extended to cover the consultation by pharmacist and up to 7 days' basic medication for curing (not for the purpose of prevention) the following Minor Illnesses at designated Mannings pharmacies in Hong Kong:
- "Minor Illness" includes cold and/or flu, allergy, pain and aches, gastrointestinal conditions, and minor skin issue (Athlete's foot, Eczema treatment, minor burns and allergies) only. Only one sign and symptom will be covered for each pharmacist consultation.
 - Please note that the medication obtained at the designated Mannings pharmacies is only suitable for patients who are 5 years old or above.
 - To enjoy cashless services and full cover, Insured Person must present a valid Bupa medical card and identity document for verification. Following the consultation a pharmacist's note will be issued upon request, please keep it for own reference.
 - For the complete list of Mannings pharmacies and their locations, please log in to the Company's customer service portal myBupa and select "Pharmacies" under "Service Type" in network doctors finder. This list is subject to change from time to time without prior notice.
 - Each consultation at a Mannings pharmacy will be counted as one visit under general practitioner of network benefit and subject to the maximum number of visit per day under the general practitioner mentioned in the Benefit Schedule of Optional Benefits. It is also not payable under any other benefit such as prescribed Western Medication (if any).
 - Please refer to <https://www.bupa.com.hk/pdf/bupa-pharmacare-generic.pdf> for the steps of using Bupa PharmaCare service.
- ⑧ Network Dental Centre refers to the network of dental service providers appointed by the Company to provide dental services items listed under "Network Dental Centre benefit" in the Summary of Benefits for Optional Benefits. Locations of the Network Dental Centres include Admiralty, Causeway Bay, Quarry Bay, Tsim Sha Tsui, Tseung Kwan O, Sha Tin, Tsing Yi, Tung Chung, etc. Please log in to the Company's customer service portal myBupa to view the latest location list. This list is subject to change from time to time. Please contact the Network Dental Centres for their consultation hours.
- ⑨ To enjoy full cover under Network Dental Centre benefit:
- (i) The Insured Person must use cashless service at designated Network Dental Centres by presenting the Bupa membership card, medical card or membership number and Hong Kong Identity Card for verification and record. If the payment is made by the Insured Person to the Network Dental Centres directly, eligible claims will be paid under Non-Network Dental Centre benefit and subject to the benefit limits thereunder.
- (ii) There is no limit on the number of visits for Network Dental Centre benefit Items (c) - (f) per Policy Year.

C 免費保障及服務 Free Benefits and Services

1) 免費保柏國際援助計劃
Free Bupa Worldwide Assistance Programme

提供海外及中國住院按金墊支服務，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。
Provides admission deposit in the event of hospitalisation overseas and in 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.

◦ 免費保柏國際援助計劃並不屬自願醫保認可產品的一部分。若你不希望獲得此免費保障，請以書面通知保柏。
The Free Bupa Worldwide Assistance Programme is not part of the VHIS Certified Plan. Please inform Bupa in writing if you don't want to receive this free benefit.

2) 健康支援服務 Health Coaching Services	尊尚 / 升級尊尚 Deluxe / Deluxe Plus	智選 / 升級智選 Advance / Advance Plus	基本 / 升級基本 Standard / Standard Plus
24小時健康專線 24-hour Healthline 提供每天24小時支援服務，為你解答健康問題並提供指引，根據病徵或病況建議合適的做法 24/7 guidance on health-related queries, suggesting a suitable course of action based on your symptoms and condition	✓	✓	✓
醫療中心選擇 Healthcare Centre Choices 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 Provide a list of clinics and hospitals based on your specific condition or needs for your reference	✓	✓	不適用 Not applicable
健康顧問 Care Manager 若入住本港私家醫院，保柏的健康顧問會全程協助，讓你了解你的治療詳情和醫療開支預算，替你處理有關入院、出院後跟進治療及索償等事宜 A personal Care Manager will follow you throughout your hospital stay in a local private Hospital to help you understand your treatment plan and obtain cost estimates, as well as facilitate admission, follow-up treatments after discharge and claims	✓	✓	(健康顧問會在受保人患上癌症或心臟病時提供協助 Care Manager will support you in the event of cancer and heart failure)
第二醫療意見 Second Medical Opinion 如在診斷和治療上遇到各種疑慮，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 Clarify any doubts about your diagnosis and proposed treatment by obtaining medical advice from a panel of medical specialists	✓	✓	不適用 Not applicable
慢性疾病管理計劃 Chronic Conditions Programme 提供控制慢性疾病如糖尿病、高血壓的建議，包括生活習慣建議及跟進病情等服務 Lifestyle coaching and follow-up services to help you manage chronic conditions such as diabetes and hypertension	✓	不適用 Not applicable	不適用 Not applicable

請瀏覽保柏網站 www.bupa.com.hk/health-coaching-services 查閱健康支援服務的條款及細則。
Please refer to Bupa's website at www.bupa.com.hk/health-coaching-services for the terms and conditions of the Health Coaching Services.

- 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「保柏靈活配自願醫保計劃」之賠償範圍內，你便須支付有關費用。
- 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（香港時間），公眾假期除外。
- The use of Health Coaching Services is free of charge. If the services suggested aren't covered under your Bupa MyFlexi VHIS Plan, you'll be responsible for the fees incurred.
- Doctors will be available during scheduled office hours to support the nurses in answering enquiries. Office hours: Mon – Fri, from 9am to 6pm (Hong Kong time), except public holidays.