



Lifeline
Policy Summary



Bupa International Lifeline Policy Summary

The following pages contain important details about the cover that we can offer you. This is a summary of the policy and its benefits. You can ask for the full rules, including the general terms and conditions and all exclusions and benefit limits – please call us for a copy.

The cover of the policy

The Bupa International Lifeline plan is a private health insurance policy for those who require international cover.

About this cover

Cover is subject to acceptance by Bupa International and is provided under the rules and tables of benefits of the Bupa International Lifeline plan contract. Cover may be subject to any special conditions or exclusions imposed by Bupa International. Benefits will vary depending on the level of cover you choose.

The provider

Bupa International Lifeline is underwritten by Bupa Insurance Limited, a subsidiary of the British United Provident Association Limited. Other services are provided by or via other subsidiary companies.

The length of the policy

Bupa International Lifeline policies are of 12 months duration. We send renewal information one month before the renewal date. Please contact us if you need to cancel your cover during the term of the contract.

28 day cancellation policy

As soon as we accept you as a member of the Bupa International Lifeline plan, we will send you a copy of your Membership Guide which clearly explains the rules and benefits of the plan.



If you change your mind:

- either sign and return the documents with "Cancel" written clearly on them or
- call us and tell us you'd like to cancel your membership.

If you do this within 28 days of receiving the pack, and you have made no claims, we'll give you a full refund of any subscriptions you have paid.

What will you be covered for?

What is covered?

This plan covers you for the costs of active treatment. This means treatment of a disease, illness or injury that leads to your recovery, conservation of your condition, or to restore you to your previous state of health as quickly as possible. This includes both acute (diseases, illnesses or injuries that respond to medical care without the need for long term or prolonged treatment) and chronic (diseases, illnesses or injuries that are permanent, come back or are likely to continue indefinitely) conditions.

- you are covered for both emergency and non-emergency treatment
- cancer treatment is covered in full
- you are covered for psychiatric conditions (after two years' membership)
- you are covered for sports injuries
- you are covered for drug treatments for HIV/AIDS up to £10,000 per year (after five years' membership)
- you are covered for hospice and palliative care eg medication to help you remain comfortable up to £20,000
- we pay all eligible qualifying hospital treatment and accommodation bills, up to the yearly maximum per person
- in addition to these, we can also cover out-patient treatment, accident-related dental treatment, maternity costs, wellness checks (after one year of membership) and family doctor treatment, dependent on the level of cover purchased.

Please see the benefits table for detailed information about the benefits available for the different levels of cover. For full details, please refer to the Membership Guide, Section 2, under "What is covered?".

What is not covered?

There are certain circumstances that we do not cover. Some of these are explained below:

- you are not covered for pre-existing conditions – ie any condition that you have when you join, or which you have suffered from in the past and which may recur
- we also exclude congenital conditions – ie any condition present at, or before, birth. Treatment needed for congenital conditions immediately following birth are covered for the first 90 days
- you are not covered for preventive treatment – ie treatment for a condition when no symptom is present (unless otherwise covered by the Wellness benefit on the Classic and Gold levels of cover)
- you are not covered for physiological changes – ie naturally occurring conditions caused by puberty or ageing
- you are not covered for health hydros/nature cure clinics
- you are not covered for elective cosmetic surgery/treatment
- you will not be covered for treatment in the USA, unless you have specifically purchased USA cover
- we have made special arrangements in the USA. For daycase, MRI, CT, PET scans, in-patient or cancer treatment in the USA you should pre-authorise your treatment. If you pre-authorise your treatment and choose to go outside the network then we can only reimburse 80 percent of your treatment costs. If you do not pre-authorise your treatment then we can only reimburse 50 percent of your treatment costs. Please let us know if you need treatment so that our team can confirm your cover.

Please note that there may be exceptions to these exclusions. For full details, please refer to the Membership Guide, Section 3, under "What is not covered?"

Summary Benefit Table

Overall annual maximum	Essential	Classic	Gold
£ Sterling	£500,000	£750,000	£1,000,000
\$ US Dollar	\$1,000,000	\$1,500,000	\$2,000,000
€ Euro	€750,000	€1,000,000	€1,500,000

Out-patient treatment

Out-patient surgical operations	Paid in full	Paid in full	Paid in full
Wellness - mammogram, PAP test, prostate cancer screening or colon cancer screening (after one year's membership)		We pay up to £500, US\$1,000 or €750 each membership year	We pay up to £500, US\$1,000 or €750 each membership year
Physiotherapy, osteopathy and chiropractor treatment		We pay in full for up to 15 visits each membership year	We pay in full for up to 30 visits each membership year
Costs for treatment by therapists and complementary medicine practitioners		We pay in full for up to 5 visits each membership year	We pay in full for up to 15 visits each membership year
Consultants' fees and psychologists' fees for psychiatric treatment (after two years' membership)		We pay in full for up to 15 visits each membership year	We pay in full for up to 30 visits each membership year
Pathology, X-ray and diagnostic tests	Not covered	We pay up to £5,000, US\$10,000 or €8,000 each membership year	Paid in full
Consultants' fees for consultations			We pay in full for up to 35 visits each membership year
Costs for treatment by a family doctor		Not covered	
Prescribed drugs and dressings		Not covered	We pay up to £600, US\$1,200 or €900 each membership year
Accident-related dental treatment		Not covered	We pay up to £400, US\$800 or €600 each membership year

In-patient treatment

Hospital accommodation	Paid in full	Paid in full	Paid in full
Surgical operations, including pre- and post-operative care			
Nursing care, drugs and surgical dressings			
Physicians' fees			
Theatre charges and intensive care			
Pathology, X-rays, diagnostic tests and physiotherapy			
Prosthetic implants and appliances			
Parent accommodation			
Psychiatric treatment (after two years membership, lifetime maximum 90 days)			

	Essential	Classic	Gold
Further benefits			
Advanced imaging	Paid in full	Paid in full	Paid in full
Cancer treatment	Paid in full	Paid in full	Paid in full
Healthline services	Included	Included	Included
HIV/AIDS drug therapy including ART (after five years' membership)	Not covered	We pay up to £10,000, US\$20,000 or €15,000 each membership year	We pay up to £10,000, US\$20,000 or €15,000 each membership year
Home nursing after in-patient treatment	We pay up to £100, US\$200 or €150 each day up to a maximum of 10 days each membership year	We pay up to £100, US\$200 or €150 each day up to a maximum of 20 days each membership year	We pay up to £100, US\$200 or €150 each day up to a maximum of 30 days each membership year
Hospice and palliative care	We pay up to £20,000, US\$40,000 or €30,000 maximum benefit for the whole of your membership	We pay up to £20,000, US\$40,000 or €30,000 maximum benefit for the whole of your membership	We pay up to £20,000, US\$40,000 or €30,000 maximum benefit for the whole of your membership
In-patient cash benefit	We pay £75, US\$150 or €110 each night up to 20 nights each membership year	We pay £75, US\$150 or €110 each night up to 20 nights each membership year	We pay £75, US\$150 or €110 each night up to 20 nights each membership year
Local air ambulance	We pay up to £5,000, US\$10,000 or €7,300 each membership year	We pay up to £5,000, US\$10,000 or €7,300 each membership year	We pay up to £5,000, US\$10,000 or €7,300 each membership year
Local road ambulance	Paid in full	Paid in full	Paid in full
Maternity cover (after 10 months membership)	Not covered	We pay up to £3,000, US\$6,000 or €4,500 each membership year	We pay up to £5,000, US\$10,000 or €7,500 each membership year
Newborn care	We pay £75,000, US\$150,000 or €110,000 maximum benefit for all treatment received during the first 90 days following birth	We pay £75,000, US\$150,000 or €110,000 maximum benefit for all treatment received during the first 90 days following birth	We pay £75,000, US\$150,000 or €110,000 maximum benefit for all treatment received during the first 90 days following birth
Prosthetic devices	We pay a maximum benefit of £2,000, US\$4,000, €3,000 each membership year	We pay a maximum benefit of £2,000, US\$4,000, €3,000 each membership year	We pay a maximum benefit of £2,000, US\$4,000, €3,000 each membership year
Rehabilitation	We pay in full for up to 30 days of treatment (which may be in-patient treatment, day-case or out-patient treatment) each membership year	We pay in full for up to 30 days of treatment (which may be in-patient treatment, day-case or out-patient treatment) each membership year	We pay in full for up to 30 days of treatment (which may be in-patient treatment, day-case or out-patient treatment) each membership year
Transplant services	Paid in full	Paid in full	Paid in full
Optional benefits (if purchased)			
USA cover	100% of costs in network, 80% of costs out of network provided treatment is pre-authorised	100% of costs in network, 80% of costs out of network provided treatment is pre-authorised	100% of costs in network, 80% of costs out of network provided treatment is pre-authorised
Assistance cover	The overall annual maximum benefit limit does not apply	The overall annual maximum benefit limit does not apply	The overall annual maximum benefit limit does not apply

Contact us

If you have any questions about how we can take care of your health cover, please get in touch.

You can call our Sales Team on **+44 (0) 1273 208 181**
(between 8am and 6pm GMT Monday to Friday)

Alternatively you can fax us on: **+44 (0) 1273 866 583**

or email us: advice@bupa-intl.com

or visit our website: www.bupa-intl.com

Agents/brokers please place your business card here

Customer helpline

If you are an existing customer, you can call our Bupa International helpline on **+44 (0) 1273 323 563** at any time, 24 hours a day, 365 days a year.

Alternatively you can email us: info@bupa-intl.com,
contact us through Webchat at www.bupainternational.com/membersworld
or fax us at **+44 (0) 1273 820 517** or write to us at:

Bupa International
Russell Mews
Brighton
East Sussex
BN1 2NR
United Kingdom



Dealing with your concerns

During your membership, you may need to raise concerns with us. If something does go wrong, we have a simple complaints procedure to ensure your concerns are dealt with as quickly and effectively as possible.

Making a complaint

We are always pleased to hear about any aspect of your membership that you have particularly appreciated, or that you have had problems with. If something does go wrong, we have a simple procedure to ensure your concerns are dealt with as quickly and effectively as possible.

If you have any comments or complaints, you can call the Bupa International customer helpline on +44 (0) 1273 323 563, 24 hours a day, 365 days a year. Alternatively you can email via www.bupa-intl.com/membersworld, or write to us at:

Bupa International
Russell House
Russell Mews
Brighton
BN1 2NR. UK

We want to make sure that members with special needs are not excluded in any way. For hearing or speech impaired members with a textphone, please call +44 (0) 1273 866 557. We also offer a choice of Braille, large print or audio for our letters and literature. Please let us know which you would prefer.

Taking it further

If we have not been able to resolve the problem and you wish to take your complaint further, please call the Bupa International customer helpline on +44 (0) 1273 323 563 or write to our Head of Customer Relations at:

Bupa International
Russell House
Russell Mews
Brighton
BN1 2NR. UK

It's very rare that we can't settle a complaint, but if this does happen, you may also refer your complaint to the Financial Ombudsman Service. You can:

- write to them at South Quay Plaza, 183 Marsh Wall, London E14 9JR, UK
- call them on 0845 080 1800 or +44 (0) 20 7964 1000
- find details at their website www.financial-ombudsman.org.uk

Please let us know if you want a full copy of our complaints procedure. (None of these procedures affect your legal rights.)



Confidentiality

The confidentiality of patient and member information is of paramount concern to the companies in the Bupa group. To this end, Bupa fully complies with Data Protection Legislation and Medical Confidentiality Guidelines. Bupa sometimes uses third parties to process data on our behalf. Such processing, which may be undertaken outside the EEA (European Economic Area), is subject to contractual restrictions with regard to confidentiality and security in addition to the obligations imposed by the Data Protection Act.



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Bupa International offers you

Global medical plans for individuals and groups
Assistance, repatriation and evacuation cover
24-hour multi-lingual helpline

Call +44 (0) 1273 208 181

bupa-intl.com

Your calls will be recorded
and may be monitored

