

# Briefing Session



# Why choose Bupa

**Founded in the UK in 1947, Bupa is a global healthcare specialist providing a wide range of comprehensive and flexible insurance plans to suit every life stage and lifestyle**

**We provide healthcare funding and provision for people in Hong Kong and beyond**

- Globally we serve over 50 million customers
- Bupa Group has been serving since 1947 and established our presence in Hong Kong in 1976
- As part of Bupa, Quality HealthCare provides primary care services through a network of over 1,600 provider service points, including over Quality HealthCare Medical Centres and affiliated clinics

# Our suggested solutions for you



## Bupa VTop

2021

- **No underwriting** required
- Covers **pre-existing conditions**
- Provides **itemised** or **lump sum** Hospital and Surgical Benefit
- Available to existing **Bupa group scheme members** with Hospital and Surgical Benefit & their family members without group cover
- **Extended enrolment windows**



## Bupa VTop – Top-up protection exclusively for Bupa group members

- ✓ **Top up** existing group cover and enjoy **continuous protection** even when you switch jobs or retire
- ✓ **No underwriting** and guaranteed acceptance
- ✓ Guaranteed cover for **pre-existing conditions** that are currently covered by your group scheme
- ✓ Enjoy **same room type as your group scheme**
- ✓ Provides **lump sum** or **itemised** benefits to suit your needs
- ✓ **Multiple & longer enrolment windows** at different life stages
- ✓ Guaranteed **lifetime renewal**

The product information in this document is for reference only. It is not, and does not form part of, a contract of insurance and is designed to provide an overview of the key features of this product. Please visit Bupa's website or refer to the product brochure, Schedule of Benefits and contract for details.

# Bupa VTop – Eligibility

Existing Bupa group scheme members with Hospital and Surgical Benefit	<ul style="list-style-type: none"><li>No underwriting required</li><li>Eligible for enrolment during any one of the following periods:</li></ul> <div><div>1. Within 60 days of joining a Bupa group scheme</div><div>2. Within 60 days after the Contract Anniversary Date of a Bupa group scheme (i.e. 1 July of the year)</div><div>3. Within 30 days before or after the last day of the Bupa group scheme membership for employment termination or retirement</div><div>4. Within 30 days after marriage or child's birth</div></div>
Non-Bupa group scheme members	<ul style="list-style-type: none"><li>Spouse, domestic partner, children, parents or siblings of an existing Bupa group scheme member who are not a member of a Bupa group scheme</li><li>Enrol any time before age 81, subject to underwriting</li></ul>
Issue age	<p><b>Existing Bupa group scheme members</b> Aged 15 days or above at contract commencement</p> <p><b>Non-Bupa group scheme members</b> Aged 15 days to 80 years (inclusive) at contract commencement</p>
Application	Enrolment is allowed only once per lifetime

# Bupa VTop – Cover at a glance

Basic benefit	<ul style="list-style-type: none"> <li>Itemised Hospital and Surgical Benefit or</li> <li>Lump Sum Hospital and Surgical Benefit</li> </ul>
Cover for pre-existing conditions	Yes (all pre-existing conditions which are payable under your Bupa group scheme will be covered under this scheme if you've been continuously insured under a Bupa group scheme and/or Bupa VTop for a total of at least 12 consecutive months, except for those specified under the General Exclusions of the Bupa VTop contract. Coverage for pre-existing conditions isn't available for non-Bupa group scheme members.)
Optional benefits	<ul style="list-style-type: none"> <li>Supplementary Major Medical Benefit (only applicable to eligible group members who have chosen the Itemised Hospital and Surgical Benefit and who have Supplementary Major Medical Benefit coverage under their existing Bupa group scheme)</li> <li>Clinical Benefit</li> </ul>
Free benefit and services	<ul style="list-style-type: none"> <li>Health Coaching Services</li> <li>Free Bupa Worldwide Assistance Programme</li> </ul>
Medical card	Yes (if opting for Clinical Benefit)
Choice of benefit levels	<ul style="list-style-type: none"> <li>Private (Plan 1, 4)</li> <li>Semi-private (Plan 2, 5)</li> <li>Ward (Plan 3, 6)</li> </ul>
Period of cover	1 year
Worldwide Coverage	<p>Worldwide coverage without geographical limitation for Hospital and Surgical, SMM and Clinical Benefit (if available)</p> <ul style="list-style-type: none"> <li>Bupa may terminate the cover of the relevant Member(s) with immediate effect or (where permitted to continue the cover of the relevant Member(s) until such date) with effect from the Contract Anniversary Date, if the law of the country in which the Member is located, or the Member's place of residence or nationality, including but not limited to the United States of America and Japan, or any other law which applies to Bupa or this Contract, prohibits the provision of healthcare cover by Bupa to local nationals, residents or citizens.</li> <li>The Subscriber is required to immediately notify Bupa in writing if it comes to the Subscriber's notice that any of the Members change place of residency or nationality during the Contract Year. Without limitation to the foregoing, a Member's cover shall not be renewed if such Member becomes a permanent resident of the United States of America, Japan or the Commonwealth of Puerto Rico.</li> </ul>
Renewal of scheme	Guaranteed lifelong renewal



# Cover for pre-existing conditions – Example



# Bupa VTop – Schedule of Benefits

A1	Itemised Hospital and Surgical Benefit	Plan 1 (Private)	Plan 2 (Semi-private)	Plan 3 (Ward)
	Benefit items	Maximum Limit (HK\$)		
1	Room and Board (Maximum 270 days each Contract Year)	3,600 each day	1,640 each day	1,020 each day
2	Miscellaneous Hospital Services (Each Contract Year)	40,800	26,000	18,200
3	Intensive Care (Supplement to Room and Board) (Each Contract Year)	32,500	27,500	25,700
4	Private Nursing (Maximum 120 days each Contract Year)	1,080 each day	710 each day	430 each day
5	Surgeon and Attendance Fees (For surgical case only) (Each operation) Complex / Major / Intermediate / Minor	133,300 / 66,700 / 28,700 / 10,300	87,000 / 46,200 / 20,000 / 8,420	62,300 / 33,800 / 13,800 / 6,650
6	Anaesthetist's Fees (Each operation) Complex / Major / Intermediate / Minor	41,000 / 20,500 / 10,300 / 5,200	25,200 / 14,900 / 6,270 / 3,070	19,200 / 11,300 / 4,630 / 2,880
7	Operating Theatre Fees (Each operation) Complex / Major / Intermediate / Minor	41,000 / 20,500 / 10,300 / 5,200	25,200 / 14,900 / 6,270 / 3,070	19,200 / 11,300 / 4,630 / 2,880
8	In-patient Physician's Fees (For non-surgical case only) (Maximum 270 days each Contract Year)	3,400 each day	1,530 each day	910 each day
9	In-patient Specialist's Fees (Each Contract Year)	15,400	5,100	3,050
10	Cancer Treatment and Kidney Dialysis (Each Contract Year)	150,000	110,000	95,000
11	Companion Bed (Maximum 270 days each Contract Year)	1,850 each day	800 each day	500 each day
12	Pre-admission and Post-hospitalisation Out-patient Care (Each Contract Year)	6,200	3,590	2,350
13	Emergency Out-patient Benefit for Accidents (Each Contract Year)	11,300	9,230	7,700
14	Psychiatric Treatment (Each Contract Year)	30,000		
Overall Annual Limit - Below attained age of 65 on the Contract Effective Date		Unlimited		
Overall Annual Limit - Attained age of 65 or above on the Contract Effective Date		681,000	344,000	204,200

The above table is for reference only. Please refer to Schedule of Benefits for details.

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# Bupa VTop – Schedule of Benefits

A2	Lump Sum Hospital and Surgical Benefit	Plan 4 (Private)	Plan 5 (Semi-private)	Plan 6 (Ward)
	Benefit items	Maximum Limit (HK\$)		
1	Room and Board (Maximum 270 days each Contract Year)	Payable for 80% of eligible medical expenses		
2	Miscellaneous Hospital Services (Each Contract Year)			
3	Intensive Care (Supplement to Room and Board) (Each Contract Year)			
4	Private Nursing (Maximum 120 days each Contract Year)			
5	Surgeon and Attendance Fees (For surgical case only) (Each operation) Complex / Major / Intermediate / Minor			
6	Anaesthetist's Fees (Each operation) Complex / Major / Intermediate / Minor			
7	Operating Theatre Fees (Each operation) Complex / Major / Intermediate / Minor			
8	In-patient Physician's Fees (For non-surgical case only) (Maximum 270 days each Contract Year)			
9	In-patient Specialist's Fees (Each Contract Year)			
10	Cancer Treatment and Kidney Dialysis (Each Contract Year)			
11	Companion Bed (Maximum 270 days each Contract Year)			
12	Pre-admission and Post-hospitalisation Out-patient Care (Each Contract Year)			
13	Emergency Out-patient Benefit for Accidents (Each Contract Year)			
14	Psychiatric Treatment (Each Contract Year)			
Annual Deductible		100,000	80,000	30,000
Overall Annual Limit		600,000	300,000	150,000

The above table is for reference only. Please refer to Schedule of Benefits for details.

# Bupa VTop – Annual premiums

1 January 2025 Edition (HK\$ per person)

Attained age	A1 Itemised Hospital and Surgical Benefit			A2 Lump Sum Hospital and Surgical Benefit		
	Plan 1 (Private)	Plan 2 (Semi-private)	Plan 3 (Ward)	Plan 4 (Private)	Plan 5 (Semi-private)	Plan 6 (Ward)
10	13,960	7,694	4,252	8,300	2,157	1,337
20	10,429	5,343	3,188	6,671	1,959	1,569
30	13,330	7,207	3,837	8,525	2,656	1,899
40	20,861	11,350	5,817	13,342	4,584	3,253
50	33,665	18,061	8,461	18,218	8,304	5,624

# Bupa VTop – Example case



VTop Plan 4 – Lump Sum Hospital and Surgical Benefit (private), HK\$100,000 deductible, 80% reimbursement



## Mr. Chan (aged 27)

Eligible medical expenses for surgery in a private hospital: **\$500,000**

Amount covered under his employer's group scheme: **\$400,000**

Remaining expenses: **\$100,000**

Amount payable under Bupa VTop (whichever option below is lower):

(Eligible expenses – annual deductible) x  
reimbursement percentage

$$(HK\$500,000 - HK\$100,000) \times 80\% = \\ HK\$320,000$$

Eligible expenses – amount payable under  
other insurance policy

$$HK\$500,000 - HK\$400,000 = \\ HK\$100,000$$



**Mr. Chan's total expenses are fully covered by his group scheme + Bupa VTop.**

The above case example is for reference only.

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# Bupa VTop – FAQs

## 1. Will Bupa VTop cover all pre-existing conditions that arose before the membership was effective?

All pre-existing conditions which are payable under the member's Bupa group scheme shall be covered under Bupa VTop's Hospital and Surgical Benefit, Optional Supplementary Major Medical Benefit and Clinical Benefit (if applicable) if he or she has been continuously insured under a Bupa group scheme and/or Bupa VTop for a total of at least 12 consecutive months, with the exception of those specified under the General Exclusions of the Bupa VTop contract. However, coverage for pre-existing conditions isn't available for non-Bupa group scheme members.

## 2. Can members upgrade their room level or add optional benefits after their membership is effective?

Room level upgrade or switching between Itemised Hospital and Surgical Benefit and Aggregate Hospital and Surgical Benefit is not allowed after the membership is effective.

Members can add the optional Clinical Benefit upon renewal, subject to underwriting. However, if they've terminated this optional benefit before, they'll not be allowed to re-apply.

Application for the optional Supplementary Major Medical Benefit is only allowed during enrolment. Members can't add this optional benefit at renewal.

## 3. Will I still be reimbursed if my Bupa group scheme is terminated when I change my job or retire?

If your Bupa group scheme is terminated, you'll still be able to claim from Bupa VTop. According to Bupa VTop's contract terms, you must file claims under any other active health insurance schemes first, either underwritten by Bupa or other insurers. After your claims have been processed, you can submit a second claim for the remaining expenses to be reimbursed under Bupa VTop.

However, if you don't have any other active health insurance schemes besides Bupa VTop, you'll be able to claim from Bupa VTop from the first dollar, subject to the annual deductible (if applicable), overall annual limit and item limits (if applicable) of your chosen benefit level.

## 4. If I've terminated my Bupa VTop scheme, can I re-apply in the future?

No. Enrolment in Bupa VTop is allowed only once per lifetime.

# Bupa VTop – FAQs

**5. Will there be any coverage gap between the end of my group membership and the inception of this scheme?**

No, coverage for Bupa VTop will start immediately once your Bupa VTop scheme is in effect without any waiting period.

Bupa VTop will be effective on the 1<sup>st</sup> day of the month which immediately follows the last date of group membership should it be the last day of a month. Otherwise, the cover will be effective on the 1<sup>st</sup> day of the same month when group membership is terminated.

Example:

Group membership termination date	Bupa VTop contract effective date
15 Jan 2023	1 Jan 2023
31 Jan 2023	1 Feb 2023

**6. Can I convert my existing Bupa Transfer Care / Active Care policy to Bupa VTop?**

Currently there is no conversion option from Bupa Transfer Care / Active Care to Bupa VTop.

**7. Can I be covered by Bupa Transfer Care and Bupa VTop at the same time?**

No, a member can only be insured under one of these products at any one point in time.

**8. If I currently have a Transfer Care scheme, can I terminate it and apply for VTop?**

Yes, we can accept the application for VTop with the termination of the existing Transfer Care scheme.



# Contact us



**2517 5920**

Please quote DIN code

**77068**



**indsales@bupa.com.hk**



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contact here**



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