# Enterprise HealthNet Group Health Insurance Scheme
# 企業僱員健康網團體醫療保障計劃

## Schedule of Benefits 保障金額表

1 January 2025 Edition 2025年1月1日版本

| A Hospital and Surgical Benefit[1] 住院及手術保障[1] | Maximum Limit per Member (HK$) 每位會員最高賠償額（港幣） | | | | | |
|---|---|---|---|---|---|---|
| | HealthNet Benefit 網絡保障 (HK coverage only 只適用於香港) | | | Non-HealthNet Benefit 非網絡保障 (Worldwide coverage 適用於世界各地) | | |
| | Plan 計劃 1, 4, 7, 10 Private[2] 私家房[2] | Plan 計劃 2, 5, 8, 11 Semi-private[2] 半私家房[2] | Plan 計劃 3, 6, 9, 12 Ward[2] 大房[2] | Plan 計劃 1, 4, 7, 10 Private[2] 私家房[2] | Plan 計劃 2, 5, 8, 11 Semi-private[2] 半私家房[2] | Plan 計劃 3, 6, 9, 12 Ward[2] 大房[2] |
| **HealthNet Hospitals**[3] 網絡醫院[3] | Canossa Hospital 嘉諾撒醫院<br>CUHK Medical Centre 香港中文大學醫院<br>Gleneagles Hong Kong Hospital 港怡醫院<br>HK Baptist Hospital 香港浸信會醫院<br>Matilda International Hospital 明德國際醫院<br>St. Paul's Hospital 聖保祿醫院<br>St. Teresa's Hospital 聖德肋撒醫院<br>Union Hospital 仁安醫院 | | | N/A 不適用 | | |
| **Reimbursement percentage 賠償率** | N/A 不適用 | | | 100% | 100% | 100% |
| 1 **Room and Board** (Maximum 120 days per Disability per Contract Year)<br>**住房及膳食費**（每合約年度計每病症最多120日） | Full cover[5] for eligible medical expenses (Subject to the Overall Annual Limit)<br>全數支付[5]合資格的醫療費用（以每年最高賠償額為限） | | | 每日3,450 each day | 每日1,940 each day | 每日820 each day |
| 2 **Miscellaneous Hospital Services** (Per Contract Year)<br>**住院雜費**（每合約年度計） | | | | 42,200 | 30,500 | 15,100 |
| 3 **Intensive Care** (Supplement to Room and Board) (Per Disability per Contract Year)<br>**深切治療**（住房及膳食費之補足）（每合約年度每病症計） | | | | 37,700 | 27,500 | 13,300 |
| 4 **Private Nursing** (Maximum 120 days per Disability per Contract Year)<br>**私家看護費**（每合約年度計每病症最多120日）<br>∘ Nursing services during Hospital Confinement or at home after discharge from Hospital rendered by a Qualified Nurse upon referral[4] by the attending Registered Medical Practitioner<br>∘ 經主診註冊西醫轉介[4]下由合資格護士於住院期間或出院後在家中提供之護理服務 | | | | 每日1,200 each day | 每日740 each day | 每日400 each day |
| 5 **Surgeon and Attendance Fees** (For surgical case only) (Per Disability per Contract Year)<br>**外科醫生費及巡房費**（只適用於外科手術）（每合約年度每病症計）<br>∘ Complex 複雜<br>∘ Major 大型<br>∘ Intermediate 中型<br>∘ Minor 小型 | | | | 125,800<br>52,000<br>28,300<br>12,700 | 71,500<br>32,500<br>15,300<br>7,700 | 52,200<br>23,100<br>13,200<br>6,550 |
| 6 **Anaesthetist's Fees** (Per Disability per Contract Year)<br>**麻醉科醫生費**（每合約年度每病症計）<br>∘ Complex 複雜<br>∘ Major 大型<br>∘ Intermediate 中型<br>∘ Minor 小型 | | | | 38,400<br>15,600<br>6,820<br>4,180 | 20,600<br>10,500<br>5,600<br>3,440 | 17,000<br>7,020<br>4,930<br>2,860 |
| 7 **Operating Theatre Fees** (Per Disability per Contract Year)<br>**手術室費用**（每合約年度每病症計）<br>∘ Complex 複雜<br>∘ Major 大型<br>∘ Intermediate 中型<br>∘ Minor 小型 | | | | 38,400<br>15,600<br>6,820<br>4,180 | 20,600<br>10,500<br>5,600<br>3,440 | 17,000<br>7,020<br>4,930<br>2,860 |
| 8 **In-patient Physician's Fees** (For non-surgical case only) (Maximum 120 days per Disability per Contract Year)<br>**住院醫生巡房費**（只適用於非手術治療）（每合約年度計每病症最多120日） | | | | 每日3,450 each day | 每日1,940 each day | 每日820 each day |
| 9 **In-patient Specialist's Fees** (Per Contract Year)<br>**住院專科醫生費**（每合約年度計）<br>∘ Subject to written referral[4] from the attending Registered Medical Practitioner (except for services performed by pathologist, radiologist or Physiotherapist during Hospital Confinement)<br>∘ 須獲主診註冊西醫以書面轉介[4]（病理學家、放射學家及物理治療師在住院期間所提供之服務除外） | | | | 15,500 | 10,800 | 8,500 |

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Maximum Limit per Member (HK$) 每位會員最高賠償額（港幣）

| A Hospital and Surgical Benefit[1] 住院及手術保障[1] | HealthNet Benefit 網絡保障 (HK coverage only 只適用於香港) | | | Non-HealthNet Benefit 非網絡保障 (Worldwide coverage 適用於世界各地) | | |
|---|---|---|---|---|---|---|
| | Plan 計劃 1, 4, 7, 10 Private[2] 私家房[2] | Plan 計劃 2, 5, 8, 11 Semi-private[2] 半私家房[2] | Plan 計劃 3, 6, 9, 12 Ward[2] 大房[2] | Plan 計劃 1, 4, 7, 10 Private[2] 私家房[2] | Plan 計劃 2, 5, 8, 11 Semi-private[2] 半私家房[2] | Plan 計劃 3, 6, 9, 12 Ward[2] 大房[2] |
| **Day Case Procedure Benefits[6] 日間手術保障[6]** | | | | | | |
| ◦ Items A10 – A11 cover expenses incurred for (i) Clinical Operations or Day Case at a clinic or day-case unit of a Hospital performed by a Registered Medical Practitioner or (ii) Hospital Confinement without an overnight stay. Expenses are payable under HealthNet Benefit only when pre-authorisation has been obtained. Supplementary Major Medical Benefit will not be applicable.<br>◦ Exclusively payable for eligible expenses incurred by the procedures below performed during overnight Hospital Confinement without pre-authorisation obtained up to the Maximum Limit per Member of Non-HealthNet Benefit only. Supplementary Major Medical Benefit will not be applicable. If pre-authorisation is obtained for Hospital Confinement with an overnight stay, eligible expenses shall be payable under benefit items A1 - A9 of HealthNet Benefit for Confinement at HealthNet Hospitals or Non-HealthNet Benefit for Confinement at other hospitals, and Supplementary Major Medical Benefit.<br>◦ A10 至 A11 項將支付(i)由註冊西醫於診所或醫院日症房進行診所手術或日症或(ii)無需過夜的住院的費用。「網絡保障」只支付已獲取初步保障審核的費用。附加醫療保障並不適用。<br>◦ 單獨賠償在沒有獲取初步保障審核的情況下，於需要過夜的住院期間進行以下程序而引致的合資格費用，以「非網絡保障」之每位會員最高賠償額為限，附加醫療保障亦並不適用。如需要過夜的住院已獲取初步保障審核，合資格費用將在「網絡保障」（如入住網絡醫院）或「非網絡保障」（如入住其他醫院）下A1 – A9項及附加醫療保障下賠償。 | | | | | |
| 10 **Day Case Endoscopy Procedure** (Per Disability per Contract Year)<br>**日間內窺鏡程序**（每合約年度每病症計） | Full cover[5]<br>全數支付[5] | | | 21,060 | 14,580 | 12,270 |
| 11 **Day Case Viral Warts and Skin Lesions Procedure**[7] (per Contract Year)<br>**日間病毒性疣及皮損程序**[7]（每合約年度計） | Full cover[5]<br>全數支付[5]<br>(Maximum 6 visits per Contract Year)<br>（每合約年度最多6次） | | | 8,000 | 8,000 | 8,000 |
| 12 **Pre-admission and Post-hospitalisation Out-patient Care** (Per Contract Year)<br>**入院前及出院後之門診護理**（每合約年度計）<br>◦ Including one out-patient visit resulting in a Hospital Confinement, Clinical Operation or Day Case and all related follow-up visits on an out-patient basis within six weeks after discharge from Hospital, Clinical Operation or Day Case<br>◦ Payable for consultation fee, Medically Necessary Western Medication, diagnostic tests and physiotherapy<br>◦ 包括一次引致住院、診所手術或日症的門診及所有在出院、診所手術或日症後6 星期內的跟進療程門診護理<br>◦ 賠償包括診症、醫療必需的西藥、診斷測試及物理治療的費用 | Full cover[5] for eligible medical expenses (Subject to the Overall Annual Limit)<br>全數支付[5]合資格的醫療費用<br>（以每年最高賠償額為限） | | | 10,800 | 6,960 | 5,500 |
| 13 **Special Services** (Per Contract Year) **特別服務**（每合約年度計）<br>◦ Including chemotherapy, dialysis, radiotherapy, targeted therapy, immunotherapy, hormonal therapy, treatment involving radioactive isotope, magnetic resonance imaging (MRI), CT Scan and PET Scan<br>◦ Subject to written referral[4] from the attending Registered Medical Practitioner<br>◦ 包括化療、血液透析、放射治療、標靶治療、免疫治療、荷爾蒙治療、使用放射同位素的治療、磁力共振、電腦斷層掃描及正電子放射斷層掃描<br>◦ 須獲主診註冊西醫書面轉介[4] | Subject to an annual limit of HK$100,000<br>每年最高賠償金額為港幣10萬元 | | | The expenses of these treatments will be paid under the above benefit items<br>此等治療之費用將於上述保障項目內賠償 | | |
| 14 **Psychiatric Treatment** (Per Contract Year) (Applicable to Hong Kong only)<br>**精神科治療**（每合約年度計）（只適用於香港） | N/A 不適用 | | | 41,100 | 21,500 | 11,500 |
| 15 **Second Claims Incentive** (Maximum 120 days per Contract Year)<br>**第二索償現金津貼**（每合約年度最多120日）<br>◦ If any reimbursement is payable in respect of a Hospital Confinement under this Scheme and such reimbursement has been paid by an insurance company other than Bupa or any company within the Bupa group of companies, this Benefit shall be paid on a per day basis provided that actual room and board fees are charged by the Hospital on the costs of accommodation and meals to the Member for such day of Hospital Confinement<br>◦ 如根據本計劃可獲得住院賠償，及該賠償已由其他保險公司支付（保柏或保柏集團內的任何公司除外），此保障將就會員住院當天被醫院收取實際住房及膳食費的情況下，按每日住院支付賠償 | 每日 1,725 each day[8] | 每日 970 each day[8] | 每日 410 each day[8] | 每 1,725 each day[8] | 每日970 each day[8] | 每日410 each day[8] |
| 16 **Out-patient Surgery Cash Allowance 門診手術額外現金**<br>◦ Payable in addition to Surgeon and Attendance Fees for any of the following eligible surgeries performed at a clinic or day-case unit of a Hospital by a Registered Medical Practitioner, provided that no Room and Board Benefit is payable: Arthroscopy, Bronchoscopy, Colonoscopy, Colposcopy, Cystoscopy, Esophagogastroduodenoscopy, Haemorrhoid Artery Ligation (HAL)/Rubber Band Ligation (RBL), Hysteroscopy, Loop Electrosurgical Excision Procedure (LEEP), Stapled Haemorrhoidectomy<br>◦ 在無獲得任何住房及膳食費賠償的情況下，此保障將在外科醫生費及巡房費之上支付以下任何由註冊西醫在診所或醫院日症房進行的合資格手術：關節鏡檢查、支氣管鏡檢查、結腸鏡檢查、陰道鏡檢查、膀胱鏡檢查、上消化道內視鏡檢查、痔瘡動脈結紮術/痔瘡橡皮圈結紮法、子宮鏡檢查、子宮頸電環切除術、痔瘡環狀切除手術 | 每日 1,725 each day[8] | 每日 970 each day[8] | 每日 410 each day[8] | 每日1,725 each day[8] | 每日970 each day[8] | 每日410 each day[8] |
| **Overall Annual Limit** (Applicable to Hospital and Surgical Benefit only)<br>**每年最高賠償額**（只適用於住院及手術保障） | 1,180,000[8] | 930,000[8] | 395,000[8] | 1,180,000[8] | 930,000[8] | 395,000[8] |

**This scheme is only available for direct enrolment through Bupa's Health Management Consultant.**
**此計劃須透過保柏直屬之健康管理顧問直接投保。**

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| B Clinical Benefit ⑨ 門診保障⑨ | Maximum Limit per Member (HK$) 每位會員最高賠償額（港幣） | | | | | |
|---|---|---|---|---|---|---|
| | HealthNet Benefit 網絡保障 (HK and Macau coverage only 只適用於香港及澳門) | | | Non-HealthNet Benefit 非網絡保障 (Worldwide coverage 適用於世界各地) | | |
| | Plan 計劃 1, 4, 7, 10 | Plan 計劃 2, 5, 8, 11 | Plan 計劃 3, 6, 9, 12 | Plan 計劃 1, 4, 7, 10 | Plan 計劃 2, 5, 8, 11 | Plan 計劃 3, 6, 9, 12 |
| **Number of HealthNet Service Providers 網絡服務供應商的數目** | Around 約 2,600 | | | N/A 不適用 | | |
| 1 **General Practitioner**® (Per visit) **普通科醫生**® (每次診治計)<br>◦ Consultation (Including consultation fee and basic Medically Necessary Western Medication prescribed and obtained at the General Practitioner's clinic)<br>◦ 診症(包括診症費及於普通科醫生診所處方及取得的基本醫療必需西藥) | Full cover⑤ for eligible medical expenses, subject to co-payment, if any (Including consultation fee and up to 5 days of basic Medically Necessary Western Medication)<br>全數支付⑤ 合資格的醫療費用，如有自付費除外（包括診症費及最多5日之處方基本醫療必需西藥費用） | | | 600 | 350 | 235 |
| 2 **Specialist** (Per visit) **專科醫生**（每次診治計）<br>◦ Consultation (Including consultation fee and basic Medically Necessary Western Medication prescribed and obtained at the Specialist's clinic. Subject to written referral④ from a Registered Medical Practitioner, except for dermatology, family medicine, gynaecology, ophthalmology, orthopaedics, otolaryngology, paediatric surgery, paediatrics and psychiatry)<br>◦ 診症(包括診症費及於專科醫生診所處方及取得的基本醫療必需西藥。該診症須獲註冊西醫書面轉介④，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) | | | | 1,010 | 640 | 470 |
| 3 **Home Consultation** (Per visit) **家中應診**（每次診治計）<br>◦ Consultation (Including consultation fee and Medically Necessary Western Medication prescribed and obtained from a Registered Medical Practitioner)<br>◦ 診症（包括診症費及由註冊西醫處方及取得的醫療必需西藥） | N/A 不適用 | | | 1,060 | 650 | 500 |
| 4 **Physiotherapist** (Per visit) **物理治療師**（每次診治計）<br>◦ Treatment fee only and subject to written referral④ from a Registered Medical Practitioner<br>◦ 只限診療費及須獲註冊西醫書面轉介④ | Full cover⑤ for eligible medical expenses, subject to co-payment, if any<br>全數支付⑤ 合資格的醫療費用，如有自付費除外 | | | 900 | 560 | 430 |
| 5 **Chiropractor** (Per visit) **脊醫**（每次診治計）<br>◦ Treatment fee only and subject to written referral④ from a Registered Medical Practitioner<br>◦ 只限診療費及須獲註冊西醫書面轉介④ | N/A 不適用 | | | 900 | 560 | 430 |
| 6 **Chinese Herbalist** (Per visit) **中醫師**（每次診治計）<br>◦ Consultation (Including consultation fee and basic Medically Necessary Chinese Medicines prescribed at a Registered Chinese Medicine Practitioner's clinic and obtained at a legitimate source on the same day of consultation)<br>◦ 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) under Non-HealthNet Benefit<br>◦ Payable for acupuncture and tui na performed by a Registered Chinese Medicine Practitioner under Non-HealthNet Benefit<br>◦ 診症(包括診症費及當日由註冊中醫在診所處方並由合法來源取得之基本醫療必需中藥費用)<br>◦ 此保障將於非網絡保障下支付由註冊中醫處方並由合法來源(不論是否於該註冊中醫的門診診所) 取得之基本醫療必需中藥費用<br>◦ 此保障將於非網絡保障下支付由註冊中醫進行的針灸治療及推拿 | Full cover⑤ for eligible medical expenses, subject to co-payment, if any (Including consultation fee and up to 2 packets of basic Medically Necessary Chinese Medicines)<br>全數支付⑤ 合資格的醫療費用，如有自付費除外（包括診症費及最多兩劑之基本醫療必需中藥費用） | | | 390 | 270 | 235 |
| 7 **Chinese Bonesetter** (Per visit) **跌打醫師**（每次診治計）<br>◦ Consultation (Including consultation fee and basic Medically Necessary Chinese Medicines prescribed at a Registered Chinese Medicine Practitioner's clinic and obtained at a legitimate source on the same day of consultation)<br>◦ 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) under Non-HealthNet Benefit<br>◦ Payable for acupuncture and tui na performed by a Registered Chinese Medicine Practitioner under Non-HealthNet Benefit<br>◦ 診症(包括診症費及當日由註冊中醫在診所處方並由合法來源取得之基本醫療必需中藥費用)<br>◦ 此保障將於非網絡保障下支付由註冊中醫處方並由合法來源(不論是否於該註冊中醫的門診診所) 取得之基本醫療必需中藥費用<br>◦ 此保障將於非網絡保障下支付由註冊中醫進行的針灸治療及推拿 | | | 390 | 270 | 235 |
| Maximum number of visits for both HealthNet Benefit and Non-HealthNet Benefit in aggregate per Contract Year for items B1 – B7 is 30 in total and is subject to a maximum of one visit per item per day.<br>以「網絡保障」及「非網絡保障」合計，每合約年度項目B1至B7之診治次數上限合共為30次，每一項目以每日最多一次為限。 | | | | | | |
| 8 **Diagnostic Imaging and Laboratory Tests** (Per Contract Year) **診斷影像及化驗**（每合約年度計）<br>◦ Subject to written referral④ from a Registered Medical Practitioner for all diagnostic imaging and laboratory tests, or from a Registered Chinese Medicine Practitioner or Chiropractor⑪ for X-ray only and laboratory tests<br>◦ 須獲註冊西醫（適用於所有診斷影像及化驗）或註冊中醫／脊醫⑪（只適用於X光及化驗）書面轉介④ | Full cover⑤ for eligible medical expenses<br>全數支付⑤ 合資格的醫療費用 | | | 4,800 | 2,550 | 2,030 |
| 9 **Prescribed Western Medication** (Per Contract Year) **醫生處方西藥**（每合約年度計）<br>◦ Extra, long-term or expensive Medically Necessary Western Medication prescribed and obtained at a Registered Medical Practitioner's clinic on the same day of consultation under HealthNet Benefit<br>◦ 網絡保障下於診症當日於註冊西醫診所處方及取得之額外、長期服用或昂貴醫療必需西藥 | 2,340 | 1,380 | N/A 不適用 | N/A 不適用 | N/A 不適用 | N/A 不適用 |

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| | Plan 計劃 1, 4, 7, 10 | Plan 計劃 2, 5, 8, 11 | Plan 計劃 3, 6, 9, 12 | Plan 計劃 1, 4, 7, 10 | Plan 計劃 2, 5, 8, 11 | Plan 計劃 3, 6, 9, 12 |
| **Item 10 is applicable to Plans 7 - 12 only 項目10只適用於計劃7 - 12** | | | | | | |
| 10 **Routine Health Check-up Benefit** (Per Contract Year) **定期健康檢查保障**（每合約年度計）<br>◦ You can enjoy 100% reimbursement up to the maximum limit if you undergo physical examination for routine health check-up by a Registered Medical Practitioner. The amount payable shall be equal to the actual charges for such service including consultation fee, diagnostic imaging and laboratory tests charges<br>◦ 如你接受由註冊西醫進行的定期健康檢查，有關檢查的實際費用，包括診症費、診斷影像及化驗費用可獲100%賠償，以最高賠償額為限 | N/A 不適用 | N/A 不適用 | N/A 不適用 | 3,000 | 2,000 | 1,000 |

| | | | |
|---|---|---|---|
| **Co-payment / reimbursement percentage 自付費/賠償率** | **Plan 計劃 1, 2, 3, 7, 8, 9** | No co-payment 無需自付費 | 100% reimbursement 賠償 |
| | **Plan 計劃 4, 5, 6, 10, 11, 12** | For benefit items 1,2,4,6 and 7 above, a co-payment of HK$30 is payable per visit 就以上第1,2,4,6及7項保障，每次診症之自付費為港幣30元 | 80% reimbursement 賠償 (for items 1-8) （只適用於項目1-8） |

| | Maximum Limit per Member (HK$) 每位會員最高賠償額（港幣） | | |
|---|---|---|---|
| **C Free Hospital Cash Benefit 免費住院現金保障** | Plan 計劃 1, 4, 7, 10 Private ② 私家房 ② | Plan 計劃 2, 5, 8, 11 Semi-private ② 半私家房 ② | Plan 計劃 3, 6, 9, 12 Ward ② 大房 ② |
| ◦ Only applicable to Hospital Confinement in ward bed at Hospitals of Hospital Authority in Hong Kong<br>◦ Payable from the third day of Hospital Confinement (Maximum 120 days per Contract Year)<br>◦ 只適用於香港醫院管理局轄下醫院大房病床之住院<br>◦ 由住院第3天起開始支付（每合約年度計最多120日） | 每日1,000 each day | 每日600 each day | 每日350 each day |
| **D Free Supplementary Major Medical Benefit (Per Disability per Contract Year) 免費附加醫療保障（每合約年度每病症計）** | Plan 計劃 1, 4, 7, 10 Private ② 私家房 ② | Plan 計劃 2, 5, 8, 11 Semi-private ② 半私家房 ② | Plan 計劃 3, 6, 9, 12 Ward ② 大房 ② |
| **Reimbursement percentage 賠償率** | 80% | 80% | 80% |
| ◦ This Benefit is payable for any eligible expenses incurred during Hospital Confinement, Day Case and Clinical Operation in Hong Kong (unless the hospitalisation or surgery overseas is directly resulting from medical Emergency outside Hong Kong as certified by a Registered Medical Practitioner) in excess of the benefits payable under items A1 – A9 and A13 of Hospital and Surgical Benefit (either exceeding the maximum limit or maximum number of days), which is subject to the Maximum Limit of this benefit.<br>◦ This Benefit shall not be payable for Hospital Confinement in class of suite/VIP/deluxe room of a Hospital.<br>◦ Adjustment factors for room upgrade will be applied if Member is hospitalised not in accordance with plan level:<br>- From Semi-private Room to Private Room : 50%<br>- From Ward to Semi-private Room : 50%<br>- From Ward to Private Room : 25%<br>◦ However, the adjustment factors and room class restrictions above are not applicable to Confinement in a higher room level due to room shortage for Emergency treatment or isolation that requires a specific room level.<br>◦ 此保障支付任何超出按住院及手術保障下A1 – A9及A13項（不論超出最高賠償額或最多日數）可獲賠償之在港住院、日症及診所手術的合資格費用（經由註冊西醫證明，因在香港以外發生緊急事故導致在外地住院或進行手術則除外），以本保障之最高賠償額為限。<br>◦ 此保障並不會就入住總統套房/貴賓房/豪華房的住院費用而作出賠償。<br>◦ 如會員住院時並非根據原有之計劃住房，保障額將因應升級住房而作出調整:<br>- 半私家房至私家房 : 50%<br>- 大房至半私家房 : 50%<br>- 大房至私家房 : 25%<br>◦ 然而，有關調整值及以上住房級別限制不適用於在緊急情況接受治療的情況下因床位短缺而須入住較高住房級別，或因隔離原因而須入住指定住房級別的情況。 | 150,000 | 100,000 | 50,000 |

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## Schedule of Benefits 保障金額表

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Maximum Limit per Member (HK$) 每位會員最高賠償額（港幣）

### E Free Bupa Worldwide Assistance Programme (Per Contract Year)
### 免費保柏國際援助計劃（每合約年度計）

Provides admission deposit in the event of hospitalisation overseas and in Mainland 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.
提供海外及國內住院按金墊支服務，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。

### F Maternity Benefit (Optional)
### 產科保障（自選保障）

| | Plan 計劃 1, 4, 7, 10 | Plan 計劃 2, 5, 8, 11 | Plan 計劃 3, 6, 9, 12 |
|---|---|---|---|
| **Reimbursement percentage 賠償率** | 100% | 100% | 100% |
| **Normal Delivery** (Per pregnancy)<br>**順產**（每次懷孕計） | 40,000 | 20,000 | 15,000 |
| **Caesarean Section** (Per pregnancy)<br>**剖腹生產**（每次懷孕計） | 60,000 | 30,000 | 22,500 |
| **Miscarriage** (Per pregnancy)<br>**流產**（每次懷孕計） | 20,000 | 10,000 | 7,500 |

- The Maternity Benefit shall cover medical expenses incurred for the following during pregnancy:
  - Hospital Confinement
  - Consultation of a Registered Medical Practitioner and Prescribed Western Medication
  - Diagnostic tests, prenatal check-up and postnatal check-up
  - Nursery care of 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 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 Hospital and Surgical Benefit or other optional benefits (except for those maternity related psychiatric conditions covered under relevant Hospital and Surgical Benefit items).

- 產科保障將支付因懷孕引致以下項目之醫療費用：
  - 住院
  - 註冊西醫診症及醫生處方西藥
  - 診斷化驗、產前檢查及產後檢查
  - 初生嬰兒護理費用
- 此保障不包括任何初生嬰兒在住院期間之醫療費用，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，惟會員必須於此產科保障生效日後受孕。為免存疑，若會員於妊娠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，並不會於住院及手術保障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住院及手術保障有關項目覆蓋則除外）。

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| 1 January 2025 Edition 2025年1月1日版本 | Maximum Limit per Member (HK$) 每位會員最高賠償額（港幣） | | | |
|---|---|---|---|---|
| **G Dental Benefit (Optional) (Per Contract Year) 牙科保障（自選保障）（每合約年度計）** | **Network Dental Centre benefit 網絡牙科中心保障** | **Non-Network Dental Centre benefit 非網絡牙科中心保障** | | |
| | **Plan 計劃 1 - 12** | **Plan 計劃 1, 4, 7, 10** | **Plan 計劃 2, 5, 8, 11** | **Plan 計劃 3, 6, 9, 12** |
| **No. of network dental centres 網絡牙科中心數目** | 16 | N/A 不適用 | | |
| **Eligibility 適用範圍** | Only applicable to covered dental service items performed by a Registered Dentist (for all applicable items) or Registered Dental Hygienist (for item G1 only) at Network Dental Centres® within consultation hours<br>只適用於在網絡牙科中心® 診症時間以內由註冊牙醫（所有適用項目）或註冊牙齒衛生員（只適用於項目G1）進行的合資格牙科服務 | Applicable to dental services from a Registered Dentist (for all applicable items) or Registered Dental Hygienist (for item G1 only) which are not performed at Network Dental Centres or covered under Network Dental Centre benefit. All eligible dental expenses will be subject to the maximum limits below. Please settle the expenses with the dental providers directly and submit your claim to Bupa.<br>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G1）進行的牙科服務，或於網絡牙科中心保障以外的項目。所有合資格費用將以下列的最高賠償額為限。請先直接向牙科服務供應商支付費用，然後再向保柏申請索償。 | | |
| **Reimbursement percentage 賠償率** | N/A 不適用 | 100% | 100% | 100% |
| 1 **Scaling and polishing**<br>**洗牙** | One visit in total per Contract Year<br>每合約年度共一次 | 5,100 (Scaling and polishing is subject to one visit in total per Contract Year)<br>（洗牙限於每合約年度共一次） | 2,600 (Scaling and polishing is subject to one visit in total per Contract Year)<br>（洗牙限於每合約年度共一次） | 1,050 (Scaling and polishing is subject to one visit in total per Contract Year)<br>（洗牙限於每合約年度共一次） |
| 2 **Routine oral examination**<br>**定期口腔檢查** | | | | |
| 3 **Intra-oral X-rays and medications**<br>**口腔X光及藥物** | Full cover®<br>全數賠償® | | | |
| 4 **Fillings and extractions**<br>**補牙及脫牙** | Full cover®<br>全數賠償®<br>(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)<br>（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） | | | |
| 5 **Drainage of abscesses**<br>**膿瘡排放** | Full cover®<br>全數賠償®<br>(Includes incision and drainage of abscesses for dental emergency cases only)<br>（只適用於緊急牙科狀況下的膿瘡切割及排放） | | | |
| 6 **Pins for cusp restoration**<br>**齒尖或齒邊修復** | N/A 不適用 | | | |
| 7 **Dentures, crowns and bridges**<br>(only in case of an Accident)<br>**活動假牙、牙冠及牙橋**（只適用於因意外而導致） | N/A 不適用 | | | |
| 8 **Periodontal (gum) treatment**<br>**牙周病治療** | Full cover®<br>全數賠償®<br>(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)<br>（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） | | | |
| 9 **Emergency consultation and treatment**<br>**牙痛急症處理** | Full cover®<br>全數賠償®<br>(Includes emergency pain relief of toothache (including dressing and medication) only)<br>（只適用於緊急牙痛舒緩（包括敷料及藥物）） | | | |

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## Schedule of Benefits 保障金額表

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Notes 附註

① About Hospital and Surgical Benefit
- Eligible expenses incurred in respect of the same item shall not be recoverable under more than one benefit item in the table for Hospital and Surgical Benefit.
- Clinical Operation or Day Case, if eligible, will be paid under Hospital and Surgical Benefit. Clinical Operation and Day Case mean Medically Necessary surgical procedures which may be carried out at a clinic or day-case unit of a Hospital by a Registered Medical Practitioner where a stay in Hospital is not required, provided that the surgical procedure is classified as such by Bupa. The maximum number of days specified under the benefit items of Hospital and Surgical Benefit apply to the aggregate sum of Hospital stays at HealthNet Hospitals and Non-HealthNet Hospitals.

② For in-patient treatments at Gleneagles Hong Kong Hospital, please visit www.bupa.com.hk/pdf/ghk.pdf or call Bupa to get details of the room types and how they are classified under Bupa's cover prior to your hospital stay.

③ The list of HealthNet Hospitals is current at the date of printing and it is subject to change from time to time. For the current list, please call Bupa before hospital admission.

④ A referral letter is valid for the same or related medical condition for six months from the issue date. Another referral letter is required for treatment of a new or unrelated medical condition.

⑤ To enjoy full benefit under HealthNet Benefit:
- Bupa HealthNet (BHN) Card must be presented to one of the HealthNet Service Providers shown in the List of HealthNet Service Providers before treatment and used for payment of medical expenses.
- Pre-authorisation must be obtained from Bupa for:
  - Hospital Confinement or Special Services
  - Clinical Operation or Day Case (as required by Bupa's provider guidelines)
  - Diagnostic imaging or laboratory tests (as required by Bupa's provider guidelines)
  - Specialist treatment for which the relevant specialty is not available in the List of HealthNet Service Providers.
- Specialist consultation (except for dermatology, family medicine, gynaecology, ophthalmology, orthopaedics, otolaryngology, paediatric surgery, paediatrics and psychiatry) and physiotherapy must be referred by a General Practitioner or Specialist and be made by a Specialist and Physiotherapist shown in the List of HealthNet Service Providers (Unless the specialty is not available in the list).

If the above requirements are not followed, eligible medical expenses will be reimbursed under Non-HealthNet Benefit.

⑥ About Day Case Procedure Benefits
- For procedures performed at a HealthNet Service Provider and to be paid under HealthNet Benefit, pre-authorisation must be obtained through the HealthNet doctor from Bupa prior to endoscopy and viral warts and skin lesions procedures (as required by Bupa's provider guidelines).
- For procedures performed by your choice of doctor and service provider for (i) Clinical Operations or Day Case at a clinic or day-case unit of a Hospital or (ii) Hospital Confinement without an overnight stay, the eligible expenses incurred will be payable up to the Maximum Limit per Member of Non-HealthNet Benefit without pre-authorisation required.
- For procedures performed in Hospital Confinement with an overnight stay, no pre-authorisation is required in any of the following situations:
  - Any treatment performed outside Hong Kong;
  - Hospital Confinement and surgical procedures performed at ward level in the public sector of government Hospitals; or
  - If you file a claim for your procedure with another insurer first and submit a second claim to Bupa.
- For the full list of endoscopy and viral warts and skin lesions procedures covered under Day Case Procedure Benefits, please refer to the Documents section of Bupa's customer service portal myBupa. This list is subject to change from time to time.

⑦ If a Member receives more than one viral warts and skin lesions treatments at the same time on the same day, it will be counted as one operation. Bupa reserves the right to ask for a medical report for review.

⑧ The Maximum Limit of Second Claims Incentive, Out-patient Surgery Cash Allowance and Overall Annual Limit is the aggregate sum of HealthNet Benefit and Non- HealthNet Benefit.

⑨ General practitioner, specialist and Chinese herbalist under Clinical Benefit also cover 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 providers (general practitioner and Chinese herbalist only). The list of designated video consultation service providers can be found on Bupa's website. The list may be updated and amended by Bupa from time to time.

⑩ The General Practitioner Benefit under the HealthNet 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, member 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 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 HealthNet General Practitioner Benefit and subject to the maximum number of visit per day under the General Practitioner Benefit mentioned in the Schedule of Benefits. It is also not payable under any other benefit such as Prescribed Western Medication Benefit (if any).
- Please refer to https://www.bupa.com.hk/pdf/bupa-pharmacare-generic.pdf for the steps of using Bupa PharmaCare service.

⑪ 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.

⑫ Network Dental Centre refers to the network of dental service providers appointed by Bupa to provide dental services items listed under "Network Dental Centre benefit" in the Schedule of 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 Bupa's customer service portal to view the latest location list. This list is subject to change from time to time. Please contact the Network Dental Centres to understand their consultation hours.

⑬ To enjoy full cover under Network Dental Centre benefit:
- Members must use cashless service at designated Network Dental Centres by presenting their Bupa medical card or membership number and Hong Kong Identity Card for verification and record. If the payment is made by the Members to the Network Dental Centres directly, eligible claims will be paid under Non-Network Dental Centre benefit and subject to the maximum limits thereunder.
- There is no limit on the number of visits for Network Dental Centre benefit items 3-5 and 8-9 per Contract Year.

① 有關住院及手術保障
- 同一項目的合資格費用不可獲「住院及手術保障」表中多於一個保障項目的賠償。
- 合資格之診所手術或日症，將於「住院及手術保障」下賠償。診所手術及日症指註冊西醫於診所或醫院日症房進行之醫療必需手術而無必要留院，但該等手術須獲保柏分類為診所手術或日症手術。於「住院及手術保障」下的保障項目中所列之最多日數乃指於網絡醫院及非網絡醫院合併計算之總住院日數。

② 入住港怡醫院接受治療前，請瀏覽 www.bupa.com.hk/pdf/ghk.pdf 或致電保柏查詢有關住房類別及在保柏保障計劃下相應之住房等級。

③ 此為於印刷日時最新之網絡醫院名單，此名單可能會不時更改。你可於入院前致電保柏查詢最新名單。

④ 會員可在轉介信發出日起計6個月內，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。

⑤ 要享有全數賠償的「網絡保障」：
- 在《網絡服務供應商目錄》內之任何一個網絡服務供應商接受治療前必須出示「保柏網絡醫療卡」，並以此卡來繳付醫療費用。
  以下各項必須得到保柏初步保障審核：
  - 住院或特別服務
  - 診所手術或日症（按保柏供應商指引之要求）
  - 診斷影像或化驗（按保柏供應商指引之要求）
  - 《網絡服務供應商目錄》內之服務供應商未能提供的專科治療。
- 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）及物理治療必須經由普通科或專科醫生轉介，並由《網絡服務供應商目錄》內的專科醫生及物理治療師診治（若目錄內未能提供此等專科則除外）。

如沒有依循以上規定，合資格的醫療費用將會根據「非網絡保障」作出賠償。

⑥ 有關日間手術保障
- 如於網絡服務供應商進行及以「網絡保障」支付內窺鏡和病毒性疣及皮損程序之前必須經由網絡醫生申請初步保障審核（按保柏供應商指引之要求）。
- 如由你所選的醫生及服務供應商在(i)診所或醫院日症房或(ii)無需過夜的住院進行程序，所產生的符合資格的費用，將根據「非網絡保障」之每位會員最高賠償額為限。會員則無需申請初步保障審核。
- 如程序於需要過夜的住院進行，以下情況不需要申請初步保障審核：
  - 任何於香港以外的地方所進行的治療；
  - 於香港政府公立醫院大房住院及進行住院手術；或
  - 如你先向其他保險公司索償，再向保柏申請第二索償。
- 有關受日間手術保障所保障之內窺鏡和病毒性疣及皮損程序的完整列表，請參閱保柏客戶服務網站myBupa上的會籍文件頁面。此列表可能會不時更改。

⑦ 如會員於同一日同時接受多過一次的病毒性疣及皮損治療，將被算作為一次手術。保柏保留權利要求會員提供醫療報告以供檢閱。

⑧ 第二索償現金津貼、門診手術額外現金及每年最高賠償額的最高賠償額以「網絡保障」及「非網絡保障」合併計算。

⑨ 門診保障下的普通科醫生、專科醫生及中醫師亦涵蓋由視像診症服務供應商的普通科醫生、專科醫生及中醫師醫療診症服務的診症費。此保障涵蓋指定的視像診症服務供應商的藥物運送費用（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保柏的網站查閱，此名單可能會不時更改及更新。

⑩ 網絡保障下的普通科醫生保障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。
- 會員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。諮詢後會員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普通科醫生保障一次，以保障金額表內普通科醫生保障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，例如醫生處方西藥保障（如有）。
- 請瀏覽 https://www.bupa.com.hk/pdf/bupa-pharmacare-generic.pdf 查閱使用保柏藥劑服務的步驟。

⑪ 部分診斷影像中心或不接受由註冊中醫及／或脊醫轉介的某些X光及化驗。如有疑問，請直接聯絡有關中心。

⑫ 網絡牙科中心指由保柏委任的牙科中心網絡以提供保障金額表上「網絡牙科中心保障」所列的牙科服務項目。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。請登入保柏的客戶服務網站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。

⑬ 要享有全數賠償的網絡牙科中心保障：
- 會員必須於指定網絡牙科中心出示保柏醫療卡或會員編號，及香港身份證以作核實及紀錄便可使用免找數服務。如會員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，並以最高賠償額為限。
- 每合約年度，網絡牙科中心保障下項目3-5及8-9不設診治次數上限。

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