

# Your policy summary

## Bupa Local HospitalCare

Effective from 1 January 2021



This policy summary contains key information about Bupa Local HospitalCare. Please note that it does not contain the full terms and conditions or the exclusions of cover. These can be found in your membership guide and will be shown on your membership certificate. You should read this carefully and keep it in a safe place.

## About your cover

### The provider

Bupa Local HospitalCare is provided by Bupa Insurance Limited (Bupa, we, us, our) a subsidiary of the British United Provident Association Limited. Other services are provided by or via other subsidiary companies.

### The insurance and the cover that it provides

Bupa Local HospitalCare offers you private medical health insurance which aims to fund medical treatment. It will cover the costs of your eligible treatment in the UK, up to the limits of your chosen cover, by Bupa recognised consultants and therapists, and in a recognised facility from within your facility access.

When you receive private medical treatment you have a contract with the providers of your treatment. You are responsible for the costs you incur in having private treatment. However, if your treatment is eligible treatment we pay the costs that are covered under your benefits. Any costs, including eligible treatment costs, that are not covered under your benefits are your sole responsibility.

This policy is fully medically underwritten. This means that any symptoms or conditions you have prior to the start date of your policy may not be covered, and we may require further medical information to assess your claim, particularly where claims are made early in your policy.

Following medical underwriting you may not have all the cover set out in your membership guide. It is your membership certificate that shows the cover that is specific to you.

Your membership guide and your membership certificate together set out full details of your benefits. They should not be read as separate documents.

Bupa Local HospitalCare provides cover for eligible hospital treatment at recognised facilities in the national network of Bupa partnership facilities. Bupa partnership facilities will change from time to time.

For details visit our consultants and facilities website at [finder.bupa.co.uk](https://finder.bupa.co.uk)

A recognised facility is a hospital or a treatment facility, centre or unit in accordance with the facility access that applies to your benefits.

Facility access is the network of recognised facilities for which you are covered under your benefits which will be shown on your membership certificate.

### **Eligibility**

To be eligible for this cover the main member and dependant must:

- be resident in the UK
- at the cover start date have been registered continuously with a GP for a period of at least six months, or have access to and be able to provide their full medical records in English, and
- not receive payment for taking part in sports.

Your cover start date is the date you started your current period of cover under the scheme as shown on your membership certificate.

### **Summary of cover**

The summary of cover overleaf contains key information about Bupa Local HospitalCare. The full list of benefits, conditions, exclusions, limitations and definitions which apply to Bupa Local HospitalCare can be found in your membership guide. The specific terms of cover that apply to you will be shown on your membership certificate.

# Summary of cover

Type of cover	Membership guide section	Available benefit
<b>Being treated as an out-patient</b>		
Out-patient consultations, therapies and related charges	1.1, 1.2 and 1.3	When directly related to private day-patient or in-patient treatment and follows within six months of the discharge date of that treatment – up to £500 combined limit each year with a maximum of two consultations with a consultant during the six month period
Diagnostic tests	1.4	Paid in full in a Bupa recognised facility
Out-patient MRI, CT and PET scans	1.5	<ul style="list-style-type: none"> <li>■ Paid in full in a recognised facility</li> <li>■ Facility that is not a recognised facility: up to £100 towards the total facility charges and not each service or charge individually</li> </ul>
Recognised facility charges: <ul style="list-style-type: none"> <li>■ out-patient for eligible surgical operations</li> </ul>	3.1	<ul style="list-style-type: none"> <li>■ Paid in full in a recognised facility</li> <li>■ For non-recognised facilities we pay up to £100 towards the total facility charges and not for each service or charge individually</li> </ul>
<b>Being treated in hospital</b>		
Consultants' fees for surgical and medical hospital treatment	2	<ul style="list-style-type: none"> <li>■ Paid in full only for fee-assured consultants</li> <li>■ Paid to benefit limits for consultants who are not fee-assured consultants</li> </ul> <p>For details visit our consultants and facilities website at <a href="http://finder.bupa.co.uk">finder.bupa.co.uk</a></p>
Recognised facility charges: <ul style="list-style-type: none"> <li>■ day-patient and in-patient treatment including eligible surgical operations</li> </ul>	3.2	Paid in full in a recognised facility
<b>Cancer treatment after a diagnosis of cancer has been confirmed</b>		
Cancer cover	4.1	<ul style="list-style-type: none"> <li>■ Paid in full</li> <li>■ Except for MRI, CT and PET scans, which are not paid under this benefit – see benefit 1.5</li> <li>■ We do not pay for any complementary, homeopathic or alternative products, preparations or remedies for treatment of cancer</li> </ul>

Type of cover	Membership guide section	Available benefit
<b>Cash benefits</b>		
NHS cash benefit for NHS in-patient stays that you receive radiotherapy, chemotherapy or a surgical operation that is for cancer treatment	CB6.1	<p>We pay NHS cash benefit for each night of in-patient stay that you receive radiotherapy, chemotherapy or a surgical operation that is for cancer treatment including in-patient treatment related to blood transfusions and marrow transplants when those are carried out in the NHS. The in-patient treatment must be provided to you free under your NHS and we only pay if your treatment would otherwise have been covered for private in-patient treatment under your benefits</p> <p>£100 each night for NHS in-patient treatment that would otherwise have been covered for private in-patient treatment under your scheme</p> <p>Any costs you incur for choosing to occupy an amenity bed while receiving your in-patient treatment are not covered under your benefits. By an amenity bed we mean a bed which the hospital makes a charge for but where your treatment is still provided free under the NHS</p>
NHS cash benefit for NHS out-patient or day-patient treatment or NHS home treatment for cancer	CB6.2	<ul style="list-style-type: none"> <li>■ We pay NHS cash benefit as follows: <ul style="list-style-type: none"> <li>- radiotherapy – for each day radiotherapy and/or proton beam therapy is received in a hospital setting</li> <li>- chemotherapy – for each day you receive treatment for IV-chemotherapy</li> <li>- cancer treatment taken by mouth – for each day on which you have a consultation with your consultant and they provide you with a prescription for cancer treatment taken by mouth</li> <li>- a surgical operation – on the day of your operation which is treatment for cancer carried out as out-patient treatment, day-patient treatment or in your home, when it is provided to you free under the NHS</li> </ul> </li> <li>■ £100 per day</li> <li>■ Except for eligible treatment for cancer treatment taken by mouth, this benefit is not payable at the same time as any other NHS cash benefit and we only pay NHS cash benefit if your treatment would otherwise have been covered for private out-patient or day-patient treatment under your benefits</li> <li>■ We only pay this benefit once even if you have more than one eligible treatment on the same day</li> <li>■ For eligible treatment for cancer treatment taken by mouth we pay this benefit at the same time as another NHS cash benefit you may be eligible for on the same day</li> </ul>
Procedure Specific NHS cash benefit	CB7	<ul style="list-style-type: none"> <li>■ Available for certain eligible treatments. Call us or go to <a href="http://bupa.co.uk/pscb">bupa.co.uk/pscb</a> for more information</li> <li>■ Except for eligible treatment for cancer treatment taken by mouth, this benefit is not payable at the same time as any other NHS cash benefit</li> <li>■ We only pay this benefit if your treatment would otherwise have been eligible under your benefits</li> </ul>

# What your policy does not cover

## Exclusions

The following are significant general exclusions for certain conditions, treatments and services on this policy, full details of which can be found by referring to the relevant exclusion number in the section 'What is not covered' of your membership guide. The section 'What is not covered' also details the other general exclusions on the policy.

### Exclusion 1

Ageing, menopause and puberty.

### Exclusion 2

Accident and emergency treatment.

### Exclusion 3

Allergies, allergic disorders or food intolerances.

### Exclusion 5

Birth control, conception, sexual problems and gender dysphoria or reassignment.

### Exclusion 6

Chronic conditions (except for acute symptoms of a chronic condition that flares up).

**Note:** we do not consider cancer as a chronic condition.

### Exclusion 8

Contamination, wars, riots and some terrorist acts.

### Exclusion 9

Convalescence, rehabilitation and general nursing home care (exceptions apply for rehabilitation).

### Exclusion 10

Cosmetic, reconstructive or weight loss treatment (except for excision of some lesions or surgery to restore appearance after an accident or after surgery for cancer).

### Exclusion 12

Dental/oral treatment (exceptions apply for accidents, jaw bone cysts and impacted teeth).

### Exclusion 14

Drugs and dressings for out-patient or take-home use and complementary and alternative products (except for cancer treatment).

### Exclusion 16

Experimental drugs and treatment (exceptions apply for certain drug treatment for cancer).

### Exclusion 18

Pandemic or epidemic disease.

### **Exclusion 19**

Intensive care (except following an eligible procedure in a recognised facility, as defined in benefit 3 of your membership guide).

### **Exclusion 20**

Learning difficulties, behavioural and developmental problems.

### **Exclusion 21**

Overseas treatment or repatriation.

### **Exclusion 23**

Pre-existing conditions.

### **Exclusion 24**

Pregnancy and childbirth (various exceptions apply).

### **Exclusion 25**

Screening, monitoring and preventive treatment (except for specific circumstances where you are being treated for cancer).

In certain circumstances other exclusions may apply, these will be detailed in the section 'Further details' on your membership certificate.

### **Exclusion 35**

Advanced therapies and specialist drugs (except those included on the list of advanced therapies or specialist drugs that applies to your benefits).

In addition, based upon your medical history, we may add exclusions and conditions specific to you and your dependants; these will be in the section 'Special conditions' on your membership certificate.

## **Policy excesses**

(See 'Claiming' section of your membership guide for full details.)

You can choose to pay a policy excess, where you pay up to the first £100, £150, £200, £250 or £500 of your eligible treatment costs in any policy year and your Bupa Local HospitalCare policy will then pay the rest. The higher your policy excess, the lower your subscription costs will be. The excess is payable per person on the cover. Details of the excess option that you have chosen are shown in your membership certificate.

## **How long your cover will last**

Cover under your policy will last for an initial period of 12 months from your cover start date, unless your policy is subject to a common renewal date.

To identify which applies to you please see your membership certificate or eligibility information leaflet. If you are subject to a common renewal, depending on the month in which you join the scheme, your initial period of cover may not be a full year and your subscription and benefits and those of your dependants may change at the common renewal date.

Cover is automatically renewed each year and will continue until:

- you stop paying subscriptions
- you stop being resident in the UK
- you die
- your policy is cancelled or ends in accordance with the terms and conditions in the membership guide.

Where cover extends to dependants' cover, it may end at an earlier date to the main member's. Cover for dependants will always end when the main member's cover ends.

You should review and update your cover periodically to ensure it remains adequate for you and your dependants' needs.

## Changing your mind

### Your right to cancel

You may cancel your membership for any reason by calling us on **0800 010 383\*** or writing to us within the later of 21 days of receipt of your policy documents (including your membership certificate) we send you each year confirming your cover, or the cover start date of your policy. If you have not made any claims we will refund all of your subscriptions. After this period of time you can cancel your cover at anytime, we will refund any subscriptions you have paid relating to the period after your cover ends.

You may cancel any of your dependants' membership for any reason by calling us on **0800 010 383\*** or writing to us within the later of 21 days of receipt of your policy documents (including your membership certificate) we send you each year confirming cover, or the cover start date of your policy. As long as no claims have been made in respect of their cover we will refund all of your subscriptions paid in respect of that dependant's cover for that year. After this period of time you can cancel their cover at anytime, we will refund any subscriptions you have paid relating to the period after their cover ends. (See 'How your membership works' section of your membership guide for full details.)

## Getting in touch

The Bupa helpline is always the first number to call if you need help or support. Please call us on **0345 609 0111\***, alternatively you can write to us at:

**Bupa, Bupa Place, 102 The Quays, Salford M50 3SP**

For those with hearing or speech difficulties who use the Relay UK smartphone app or textphone, use the prefix **18001** followed by the number above.

If you require correspondence and marketing literature in an alternative format, we offer a choice of Braille, large print or audio. Please get in touch to let us know which you would prefer.

## How to make a claim

For certain medical conditions you can call us directly for a referral to a consultant or therapist usually without consulting a GP and we call this our Direct Access service. For details about cover for Direct Access and how it works please see the Benefits section of your membership guide under the heading 'Direct Access service' or visit **[bupa.co.uk/direct-access](http://bupa.co.uk/direct-access)**

Sometimes, when you have had a consultation with another healthcare practitioner before consulting a GP and they believe referral to a consultant is appropriate, a GP appointment may not be clinically necessary. The situations in which we will accept such a referral are set out on **[bupa.co.uk/referrals](http://bupa.co.uk/referrals)** or you can call us.

If these routes are not available (or if you prefer) – consult a GP.

We accept referrals from a digital GP service.

\*We may record or monitor our calls.



Once you have a referral simply call the number on your membership certificate and we will talk you through your options. You will also need to have your Bupa membership number handy when you call. (See 'Claiming' section of your membership guide for full details.)

If your membership lapses for any reason before the completion of your eligible treatment, your claim will not be paid by Bupa.

### **Important information about cover for children aged 17 or under**

When a paediatric referral is required we ask that you obtain a named referral from a GP.

Some private hospitals do not provide services for children or have restricted services available for children, so treatment may be offered at an NHS hospital. You can ask us about recognised facilities where paediatric services are available or you can find them on [finder.bupa.co.uk](https://finder.bupa.co.uk)

In-patient and day-patient eligible treatment for children is likely to be provided in a general children's ward in line with good paediatric practice.

## **Making a complaint**

We are committed to providing you with a first class service at all times and will make every effort to meet the high standards we have set. If you feel that we have not achieved the standard of service you would expect or if you are unhappy in any other way, then please get in touch.

By phone: **0345 609 0111\***

In writing: **Customer Relations, Bupa, Bupa Place, 102 The Quays, Salford M50 3SP**

By email: [customerrelations@bupa.com](mailto:customerrelations@bupa.com)

Please be aware that information you send to this email address may not be secure unless you send us your email through Egress.

For more information and to sign up for a free Egress account, go to <https://switch.egress.com>. You will not be charged for sending secure emails to a Bupa email address using the Egress service.

### **How will we deal with your complaint and how long is this likely to take?**

If we can resolve your complaint within three working days after the day you made your complaint, we will write to you to confirm this. Where we are unable to resolve your complaint within this time, we will promptly write to you to acknowledge receipt. We will then continue to investigate your complaint and aim to send you our final written decision within four weeks from the day of receipt. If we are unable to resolve your complaint within four weeks following receipt, we will write to you to confirm that we are still investigating it.

Within eight weeks of receiving your complaint we will either send you a final written decision explaining the results of our investigation or we will send you a letter advising that we have been unable to reach a decision at this time.

\*We may record or monitor our calls.

If you remain unhappy with our response, or after eight weeks you do not wish to wait for us to complete our review, you may refer your complaint to the Financial Ombudsman Service. You can write to them at: **Exchange Tower, London E14 9SR** or contact them via email at **complaint.info@financial-ombudsman.org.uk** or call them on **0800 023 4567** (calls to this number are free on mobile phones and landlines) or **0300 123 9123** (calls to this number cost no more than calls to 01 and 02 numbers).

For more information you can visit **www.financial-ombudsman.org.uk**

If you refer your complaint to the Financial Ombudsman Service, they will ask for your permission to access information about you and your complaint. We will only give them what is necessary to investigate your complaint and this may include medical information. If you are concerned about this, please contact us.

Your complaint will be dealt with confidentially and will not affect how we treat you in the future. Following the complaints procedure does not affect your right to take legal action.

The European Commission also provides an online dispute resolution (ODR) platform which allows consumers who purchase online to submit complaints through a central site which forwards the complaint to the relevant Alternative Dispute Resolution (ADR) scheme. For Bupa, complaints will be forwarded to the Financial Ombudsman Service and you can refer complaints directly to them using the details above. For more information about ODR please visit **<http://ec.europa.eu/consumers/odr>**

### **The Financial Services Compensation Scheme (FSCS)**

In the unlikely event that we cannot meet our financial obligations, you may be entitled to compensation from the Financial Services Compensation Scheme. This will depend on the type of business and the circumstances of your claim.

The FSCS may arrange to transfer your policy to another insurer, provide a new policy or, where appropriate, provide compensation. Further information about compensation scheme arrangements is available from the FSCS on **0800 678 1100** or **020 7741 4100** or on its website at: **www.fscs.org.uk**

## **Privacy notice**

Our privacy notice explains how we take care of your personal information and how we use it to provide your cover. A brief version of the notice can be found in your membership guide or the full version is online at **[bupa.co.uk/privacy](http://bupa.co.uk/privacy)**

# Notes

Bupa health insurance is provided by:  
Bupa Insurance Limited. Registered in England  
and Wales No. 3956433. Bupa Insurance  
Limited is authorised by the Prudential  
Regulation Authority and regulated by the  
Financial Conduct Authority and the Prudential  
Regulation Authority.

Arranged and administered by:

Bupa Insurance Services Limited, which is  
authorised and regulated by the Financial  
Conduct Authority. Registered in England  
and Wales No. 3829851.

Registered office: 1 Angel Court,  
London EC2R 7HJ

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