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YOUR HEALTHCARE PARTNER

Bupa is a leading and experienced health insurer that provides a variety of products and services to residents of Latin America and the Caribbean. Bupa began as a provident association in the United Kingdom in 1947 with just 38,000 members. Today, Bupa looks after the health and wellbeing of millions of individuals around the world, giving us a unique global advantage for the benefit of our members.

Since its inception more than 70 years ago, Bupa has maintained a sustained financial growth and continues to consolidate its credentials as a healthcare leader. Bupa has no shareholders, which allows for the reinvestment of all profits to optimize products and services in synergy with accredited healthcare providers.

Trust in healthcare personnel and services is critical for everyone. Our commitment to our members for over half a century is testament of our capacity to safeguard your health as the most important patrimony.

OUR PURPOSE

Bupa's purpose is longer, healthier, happier lives. We fulfill this promise by being our members' advocate, providing a range of personalized healthcare services and support throughout their lives. As your healthcare partner, we enable you to make informed healthcare decisions. We believe that prevention is a proactive approach that can positively impact your health.

OUR PEOPLE

The expertise of our people is essential to deliver the best quality healthcare. Bupa employs over 85,000 people worldwide who live up to the highest quality standards of care, service, and expertise. We encourage our staff members to express their opinions so that we can be distinguished as one of the best employers of choice.

WELCOME TO BUPA

Thank you for choosing Bupa Complete Care, brought to you by Bupa, one of the largest and most experienced health insurance companies in the world.

This Membership guide contains the conditions and benefits of your Bupa Complete Care policy and other important information about how to contact us and what to do if you need to use your coverage. Please review your certificate of coverage, which shows the deductible you selected and any exclusions and/or amendments to your coverage.

If you have any questions about your plan, please contact the Bupa helpline.

DO YOU NEED HELP?

Our customer service team is available Monday through Friday from 9:00 A.M. to 5:00 P.M. (EST) to help you with:

- Questions about your coverage
- Making changes to your coverage
- Updating your personal information

Visit My Bupa in our display options www.bupasalud.com/MyBupa

Tel: +1 (305) 398 7400 Fax: +1 (305) 275 8484

MEDICAL EMERGENCIES

In the event of a medical emergency outside of our usual business hours, please contact the USA Medical Services team at:

Tel: +1 (305) 275 1500 Fax: +1 (305) 275 1518

www.bupasalud.com/MvBupa

THE INSURER IS LOCATED AT

1 Angel Court London, EC2R 7HJ United Kingdom

MAILING ADDRESS

17901 Old Cutler Road, Suite 400 Palmetto Bay, Florida 33157 USA

USA MEDICAL SERVICES

YOUR DIRECT LINE TO MEDICAL EXPERTISE

As part of the Bupa group, USA Medical Services provides Bupa insureds with professional support at the time of a claim. We understand that it is natural to feel anxious at a time of ill health, so we will do everything we can to help coordinate your hospitalization and provide you with the advice and assistance you require.

USA Medical Services wants you to have the peace of mind that you and your family deserve. In the event of a medical crisis, whether it is verifying benefits or the need of an air ambulance, our healthcare professionals at USA Medical Services are just a phone call away, 24 hours a day, 365 days a year. Our staff of healthcare professionals will be in constant communication with you and your family, guiding you through any medical crisis to the proper medical specialist and/or hospital.

WHEN THE WORST HAPPENS, WE ARE JUST A PHONE CALLAWAY

In the event of an emergency evacuation, USA Medical Services provides advanced alert of patient arrival to the medical facility and maintains continuous critical communication during transport. While treatment and initial care are being provided, USA Medical Services monitors your progress and reports any change in your status to your family and loved ones.

When every second of your life counts...count on USA Medical Services.

AVAILABLE 24 HOURS A DAY, 365 DAYS A YEAR

In the USA: +1 (305) 275-1500

Free of charge from the USA: +1 (800) 726-1203

Fax: +1 (305) 275-1518

Visit My Bupa in our display options: www.bupasalud.com/MyBupa

Outside the USA:

Phone number can be located
on your ID card, or at
www.bupasalud.com

ONLINE TO MAKE YOUR LIFE EASIER!

Log in to www.bupasalud.com, search for "My Bupa" in our display options and follow the registration steps with your email to manage your policy from the comfort of your home or office. Enjoy our online services:

- Access to your policy documents and ID cards
- Payments
- · Changes request
- Claim request and update information
- Pre-authorization services request
- Costumer Service
- Virtual Care (Telemedicine)

You are responsible for checking all documents and correspondence online.

PAPERLESS CUSTOMER

Our Paperless Customer solution is a service for you who wish to avoid postal delays, letters lost in the mail, sorting of insurance documents and filing in binders. When you have logged in to Online Services, go to My Preferences under My Profile, and choose to receive documents online. You are responsible for checking all documents and correspondence online.

BUPA CARES ABOUT THE ENVIRONMENT

Bupa believes that thriving communities and a healthy planet are essential to everyone's wellbeing. We take care of the health of our members making sure it has a positive impact in society and the environment.

Bupa engages in sustainability strategies to ensure our people, products, and services contribute to a better society. We take our environmental impact seriously, establishing ecological policies that benefit the planet and all individuals in our workplace. We are committed to enhancing the quality of life of our customers and personnel as well as those of communities in need.

Still in the early stages of our environmental journey, we are committed to making a positive contribution in the long term, which is why we have taken steps to reduce our carbon footprint.

YOUR COVERAGE

GEOGRAPHICAL COVERAGE

Bupa Complete Care offers you comprehensive coverage and free choice of providers. Please check your certificate of coverage to determine if your plan offers worldwide coverage or in Latin America only. However, the insurer, USA Medical Services, and/or any of their applicable related subsidiaries and affiliates will not engage in any transactions with any parties or in any countries where otherwise prohibited by the laws in the United States of America and, solely with respect to the insurer, where otherwise prohibited by the laws in the United Kingdom and/or Denmark. Please contact USA Medical Services for more information about this restriction.

OPTIONAL ADDITIONAL COVERAGE

Bupa offers riders for additional coverage, which can be purchased when filling out the individual health insurance application or at renewal time. The benefits provided under the riders are subject to all the terms, conditions, exclusions, limitations, and restrictions of coverage of the underlying Bupa Complete Care policy.

Maternity and Perinatal Complications Rider: This rider offers a U\$\$500,000 lifetime optional coverage for complications of the pregnancy, complications of delivery, and perinatal complications (not related to congenital or hereditary disorders), such as prematurity, low birth weight, jaundice, hypoglycemia, respiratory distress, and birth trauma. A 10-month waiting period applies after the effective date of the rider. Once issued, the rider will be renewed annually upon the anniversary date of the underlying Bupa policy, as long as the additional premium required for the rider is paid. Available for Plans 4, 5, and 6 only.

DEDUCTIBLE OPTIONS

We offer a range of annual deductible options to help you reduce the price you pay for your coverage — the higher the deductible, the lower the premium. You can choose between the following deductibles.

Deductible (US\$)							
Plan	1	2	3	4	5	6	
In-country	0	1,000	2,000	5,000	10,000	20,000	
Out-of- country	1,000	2,000	3,000	5,000	10,000	20,000	
Max. per policy	2,000	4,000	6,000	10,000	20,000	40,000	

There is only one deductible per person, per policy year. However, to help you reduce the cost of your family's coverage, we apply a maximum equivalent to two out-of-country deductibles on your policy, per policy year.



NOTES ON BENEFITS AND LIMITATIONS

- Maximum coverage for all covered medical and hospital charges while the
 policy is in effect is limited to the terms and conditions of this policy. Unless
 otherwise stated herein, all benefits are per insured, per policy year. All amounts
 are in U.S. dollars.
- Insureds are not required to obtain treatment from the Bupa provider network.
- All reimbursements are paid in accordance with the Usual, Customary, and Reasonable (UCR) fees for the specific service. UCR is the maximum amount the insurer will consider eligible for payment, adjusted for a specific region or geographical area.
- The Table of benefits is only a summary of coverage. Full details are included in the policy Terms and Conditions.



SUPPLEMENT

- Any diagnostic or therapeutic procedure, treatment, or benefit is covered only if resulting from a condition covered under this policy.
- Insureds are asked to notify USA Medical Services prior to beginning any treatment.
- All benefits are subject to any applicable deductible, unless otherwise stated.
- The insurer, USA Medical Services, and/or any of their applicable related subsidiaries and affiliates will not engage in any transactions with any parties or in any countries where otherwise prohibited by the laws in the United States of America and, solely with respect to the insurer, where otherwise prohibited by the laws in the United Kingdom and/or Denmark. Please contact USA Medical Services for more information about this restriction.

THE CLAIM PROCESS

Insureds are required to notify USA Medical Services as soon as they know they will need any type of treatment.

FOUR REASONS WHY YOU SHOULD NOTIFY USA MEDICAL SERVICES THROUGH MY BUPA OR AT +1 (305) 275 1500

- 1. Assistance in understanding and coordinating your benefits with direct 24-hour access to our team of professional personnel.
- Support from our staff offering guidance to you or your family for the best possible medical care and services: top rated hospitals, reputable physicians and community resources.
- Access to qualified representatives with extensive experience in the industry to help you avoid or reduce unnecessary medical expenses and overcharges.
- 4. By notifying us, we can provide the **best** possible care management before, during and after your treatment or service.

BEFORE

Once USA Medical Services is notified that an insured needs any type of treatment, our staff begins handling the case by communicating directly with the patient's doctor and medical facility. As soon as we receive all the necessary information from your provider, including medical records, we will coordinate direct payment and confirm your benefits. This is how we guarantee our insureds a smooth admission to the hospital without worrying about payments or reimbursement. Additionally, we are here to coordinate and schedule air ambulances and second surgical and medical opinions.

DURING

During treatment and/or hospitalization, our professional staff continues to monitor the patient by communicating frequently with the doctor and hospital staff, and following up on needed treatments, progress and outcomes. We can also provide information and support to your family about the latest medical advances and treatments. Members of our staff visit patients, contact families to provide assistance, answer questions, and ensure that the patient is receiving the best quality service.

AFTFR

Following the patient's treatment or discharge from the hospital, our staff at USA Medical Services will coordinate any follow-up treatment or therapy, and will make the necessary arrangements until the payment of the claim is completed.

NOTIFICATION BEFORE TREATMENT

This section shows you what to do if your doctor informs you that you need a procedure or follow-up treatment. It also tells you what information you will need when you contact us, and what we will do to help you during the claim process.

The authorization of a claim is handled by our team of professionals at USA Medical Services. They will help you get access to treatment as promptly as possible and are there to offer you guidance and information, as well as confirm coverage for any procedure. Please make sure that you have notified USA Medical Services by submit your pre-authorization request through My Bupa, www.bupasalud.com/My Bupa, or calling +1 (305) 275 1500, at least 72 hours in advance of receiving any medical care, or within the first 72 hours of receiving emergency treatment.

IF YOUR DOCTOR TELLS YOU THAT YOU NEED TO SEE A SPECIALIST OR HAVE SOME TESTS DONE

Contact USA Medical Services throught Mi Bupa, www.bupasalud.com/MyBupa, or calling +1 (305) 275 1500. It will help us speed up your claim if you have the following details on hand:

- 1. The name of your referring doctor
- 2. Who you have been referred to
- 3. The test you need
- 4. What hospital you would like to go to

It will also help if you can ask your doctor for a copy of his/her case notes or records regarding your condition, as we will need to review them. You can send them throught Mi Bupa to us. USA Medical Services will make arrangements for the tests, and confirm your coverage with the doctor and hospital. This normally takes a few days once we have all the information we need.

IF YOUR DOCTOR TELLS YOU THAT YOU NEED SURGERY OR OTHER IN-PATIENT/DAY-PATIENT TREATMENT

Contact USA Medical Services throught Mi Bupa, www.bupasalud.com/MyBupa, or calling +1 (305) 275 1500. When you contact us, we will need the following:

- 1. The condition/symptoms being treated
- 2. The proposed treatment
- 3. Your referring doctor
- 4. The doctor and hospital you would like to go to

Again, it will help us expedite your claim promptly if you send us copies of your doctor's case notes or records. Once we have all of the information we need, we will:

- 1. Verify your policy is in effect for the time of your treatment
- 2. Verify that the condition and treatment is eligible under the terms of your plan
- 3. Confirm coverage to the hospital and doctor
- 4. Schedule with the hospital a convenient appointment for you

Once you leave the hospital: To fully settle your claim, we will need a claim form, medical records, original invoices and the case notes. We usually receive these directly from the hospital; however, it may delay your claim if we do not get all these items and have to request them. Once your claim has been approved, we will confirm the amounts paid and notify you of any amount you need to pay the hospital or doctor (for example, the deductible you chose on your plan).

In most cases, USA Medical Services will pay the hospital and doctor directly, but there are some cases when this may not be possible. This is usually the case when treatment took place in a hospital that is not part of a Bupa hospital network, if you did not notify us of the treatment, or if we require more information about your condition.

IF YOUR DOCTOR RECOMMENDS PHYSICAL THERAPY OR REHABILITATION FOLLOWING SURGERY

Contact USA Medical Services throught Mi Bupa, www.bupasalud.com/MyBupa, or calling +1 (305) 275 1500. When you contact us, we will need the following:

- 1. Your therapy plan
- 2. The therapist you will be seeing

Your doctor should provide a therapy plan that outlines how many therapist sessions you need and what kind of progress you are expected to make. We need to see this plan before we approve your therapy.

HOW TO FILE FOR REIMBURSEMENT

If you have followed the right steps, we are probably in the process of issuing a direct payment to your provider. However, there are circumstances when this is not possible, and we will need to process a reimbursement to you. In those cases, there are certain guidelines that you should follow, which can be found below.

In order to expedite the processing of your claim, please be sure to complete the following steps:

- 1. Complete the claim form. Copy of the claim form can be found in your policy kit or at www.bupasalud.com.
- Attach all medical documents if you have not already sent them in. For example:
 - Physician's summary
 - Diagnostic and lab tests
 - Prescription
 - Medical equipment request
- 3. Enclose all original receipts. For example:
 - Invoices
 - Proof of payment
- 4. Submit your claim request through Mi Bupa, www.bupasalud.com/MyBupa, no later than 180 days from the date of service.



Bupa Insurance Limited

I Angel Court
London, EC2R 7HJ
United Kingdom
Registered in England No. 3956433.
Bupa Insurance Limited is
authorized
by the Prudential Regulation
Authority and regulated by the
Financial Conduct Authority and the
Prudential Regulation Authority. The
Financial Conduct Authority does
not regulate the activities of Bupa
Insurance Limited that take place
outside of the United Kingdom.

Administration

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