



# Health and wellbeing. Covered

**A guide for intermediary partners - comparing SME and Corporate cover options with Bupa Health Insurance**

For intermediary use only.  
Not to be distributed to clients

This document gives a high-level benefit comparison of our SME and Corporate Select health insurance products. It's designed for intermediaries with clients renewing or buying a Bupa health insurance policy for 50 or more main members, as they may qualify for both products.

For more information on cover options and eligibility criteria please contact your Account Manager. It's important to review the relevant policy guides to better understand what is and isn't covered.

**Important:**

The cover options and allowances shown in the table below:

- apply for each member and each scheme year unless stated otherwise, and
- assume the treatment is eligible under the scheme, with an appropriate referral (if needed), and carried out by a consultant, healthcare professional, hospital or facility that is recognised by Bupa for both the scheme and the treatment.

If the Open Referral or Guided Care cover option is chosen, members must use a consultant in our list of Open Referral network consultants.

Cover options	SME Select				Corporate Select <sup>†</sup>
	Key	Enhanced	Complete	Custom	
<b>Underwriting</b>					
How can underwriting be applied?	Underwriting applies to each member				Underwriting applies to each member Underwriting can also apply to the main member only or dependants only
<b>Underwriting types</b> - Additional underwriting options may be available for group cover transferring to Bupa from another healthcare insurer					
Full medical underwriting (underwritten)		✓			✓
Rolling moratorium underwriting - 2 years, looking back 5 years		✓			✓ 2 or 3 year look back option can also be chosen
Fixed moratorium underwriting - 2 years, looking back 2, 3 or 5 years		-			✓
Medical history disregarded (non-underwritten)		✓		Minimum group size may apply	✓

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Cover options	SME Select				Corporate Select†
	Key	Enhanced	Complete	Custom	
When you are not admitted to hospital					
Outpatient consultations and treatment					
Outpatient consultations, therapies and diagnostic tests (including mental health) as a combined allowance					
£500	-	-	-	✓	✓
£750	-	-	-	✓	✓
£1,000	✓	-	-	✓	✓
£1,500	-	✓	-	✓	✓
£1,250	-	-	-	-	✓
£2,000	-	-	-	-	✓
£3,000	-	-	-	-	✓
Paid in full	-	-	✓	✓	✓
Option to limit physiotherapy to 10 sessions from within the combined outpatient allowance	-	-	-	-	✓
Complementary medicine (Acupuncture, Chiropractic and Osteopathy)					
Up to £250, paid from within the combined outpatient allowance	✓	-	-	✓ Applicable for combined outpatient allowances £500, £750 and £1000	✓ Up to £350, £500, £1,000, £1,500 or £2,000 allowance options paid from within the combined outpatient allowance are also available
Paid up to and from within the combined outpatient allowance	-	✓	-	✓ Applicable for combined outpatient allowances £1,000 and £1,500	✓
A separate allowance available outside of the combined outpatient allowance - £250, £350, £500, £1,000, £1,500 or £2,000	-	-	-	-	✓
Paid in full	-	-	✓	✓	✓
No cover	-	-	-	-	✓

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Cover options	SME Select				Corporate Select <sup>†</sup>
	Key	Enhanced	Complete	Custom	
<b>Outpatient MRI, CT and PET scans</b>					
Paid in full	✓	✓	✓	✓	✓
<b>Online coaching support for neurodivergent conditions</b>					
Paid up to and from within the overall outpatient allowance	✓	✓	✓	✓	✓ Available as part of 'assessments for neurodivergent conditions' benefit, which must be selected
<b>Digital GP services through Bupa Bluea</b>					
Cover included	✓	✓	✓	✓	✓ Option to limit to main members only
No cover	-	-	-	-	✓
<b>When you are admitted to hospital</b> Outpatient surgical operations, day patient or inpatient treatment					
<b>Facility access for inpatient and day-patient treatment</b>					
Partnership facility - over 300 facilities nationwide	✓	✓	-	✓	✓
Participating facility - over 600 facilities nationwide	-	-	✓	✓	✓
Guided Care / Open Referral <sup>†</sup> with participating facility access (Open Referral is the equivalent to Guided Care for Corporate Select)	✓	✓	✓	✓	✓
<b>Consultant access</b>					
Paid in full with a fee-assured consultant - allowances apply for consultants who are not fee-assured	✓	✓	✓	✓	✓
Guided Care / Open Referral <sup>†</sup> : Paid in full with a fee-assured consultant in our list of open referral network consultants - allowances apply for open referral network consultants who are not fee-assured	✓	✓	✓	✓	✓
Paid in full with a consultant (regardless of fee-assured status)	-	-	-	-	✓

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Cover options	SME Select				Corporate Select <sup>†</sup>
	Key	Enhanced	Complete	Custom	
<b>Mental Health Treatment</b>					
<b>Consultant and facility charges for day-patient and inpatient mental health treatment combined</b>					
Paid in full up to 28 days <sup>2</sup>	-	-	-	-	✓
Paid in full up to 45 days <sup>2</sup>	✓	✓	✓	✓	✓
Paid in full up to 90 days <sup>2</sup>	-	-	-	-	✓
Paid in full (no limit on days) <sup>2</sup>	-	-	-	-	✓
No cover for mental health treatment (including outpatient treatment)	-	-	-	✓	✓
<b>Cancer Treatment</b>					
Paid in full <sup>2</sup>	✓	✓	✓	✓	✓
Other cancer cover options	-	-	-	-	✓
<b>Additional benefits and services</b>					
<b>Direct Access services - no GP referral needed for certain conditions<sup>^</sup></b>					
Direct Access for cancer	✓	✓	✓	✓	✓
Direct Access for mental health <sup>‡</sup>	✓	✓	✓	✓	Selected on an opt-in basis
Direct Access for muscles, bones and joints <sup>‡</sup>	✓	✓	✓	✓	Selected on an opt-in basis
<b>HealthLine and digital wellbeing services - Available to all customers and free to use</b>					
HealthLine services - Bupa Anytime HealthLine, Family Mental HealthLine and Menopause HealthLine	✓	✓	✓	✓	✓
Digital wellbeing services (available to customers over the age of 16 on the My Bupa app)	✓	✓	✓	✓	✓

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Cover options	SME Select				Corporate Select†
	Key	Enhanced	Complete	Custom	
<b>Private ambulance charges</b>					
£80 per single trip - no scheme year allowance	✓	✓	✓	✓	✓
£80 per single trip - £320 scheme year allowance	-	-	-	-	✓
Paid in full	-	-	-	-	✓
No cover	-	-	-	-	✓
<b>Home nursing after private eligible inpatient treatment</b>					
£600	-	-	-	-	✓
£2,000	✓	✓	✓	✓	✓
Paid in full	-	-	-	-	✓
No cover	-	-	-	-	✓
<b>Overseas emergency treatment - When temporarily travelling outside the UK</b>					
Cover included (allowances and restrictions apply)	-	-	-	-	✓
No cover	✓	✓	✓	✓	✓
<b>Repatriation and evacuation assistance - When arranged by a Bupa recognised medical assistance company</b>					
Cover included (allowances and restrictions apply)	-	-	-	-	✓
No cover	✓	✓	✓	✓	✓
<b>NHS cash benefit for NHS inpatient treatment - Where a member chooses to have inpatient treatment under the NHS rather than privately</b>					
£50 for up to 35 nights	✓	✓	✓	✓	Other options are available, with different allowance amounts and total number of nights
No cover	-	-	-	-	

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Cover options	SME Select				Corporate Select <sup>†</sup>
	Key	Enhanced	Complete	Custom	
<b>NHS cash benefit for cancer</b> - Where a member chooses to have certain eligible cancer treatment under the NHS rather than privately					
Inpatient - £100 each night					
Outpatient, day-patient or home treatment - £100 per day	✓	✓	✓	✓	✓
Oral drug treatment - £100 for each three-weekly period of treatment					
No cover	-	-	-	-	✓
<b>Procedure-specific NHS cash benefit</b> - Where a member chooses to have certain eligible treatment under the NHS rather than privately					
Cover included - the amount we pay depends on the type of treatment received	✓	✓	✓	✓	✓
No cover	-	-	-	-	✓
<b>Optical cash benefit<sup>3</sup></b> - Cash benefit for goods and services provided or prescribed by an optician					
Up to £100 each two year consecutive period	✓	✓	✓	✓	✓
No cover	✓	✓	✓	✓	✓
<b>Accidental dental cash benefit<sup>3</sup></b> - Cash benefit for dental treatment because of an accidental dental injury					
Up to £900	✓	✓	✓	✓	✓
No cover	✓	✓	✓	✓	✓
<b>Prescription cash benefit<sup>3</sup></b> - Cash benefit for prescribed medicines or devices used to treat a medical condition and/or symptoms					
Up to £20	✓	✓	✓	✓	✓
No cover	✓	✓	✓	✓	✓
<b>Island cover</b> - For residents of Jersey, Guernsey or the Isle of Man only - includes travel to UK mainland. <sup>4</sup>					
£240 per return trip	✓	✓	✓	✓	✓
No cover	✓	✓	✓	✓	✓

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Cover options	SME Select				Corporate Select†
	Key	Enhanced	Complete	Custom	
Options to manage cost					
Excess					
How can excess be applied?	Excess applies to each member in each policy year				Excess can apply to each member, dependant only, main member only or per registration.  The basis is either each policy year or each rolling 12-month period (based on date of service)
No excess	✓	✓	✓	✓	✓
£50	-	-	-	-	✓
£75	-	-	-	-	✓
£100	✓	✓	✓	✓	✓
£150	✓	✓	✓	✓	✓
£200	✓	✓	✓	✓	✓
£250	-	-	-	-	✓
£500	✓	✓	✓	✓	✓
Co-insurance					
How can co-insurance apply?	Not available				Co-insurance can apply to each member, dependant only, main member only or per registration in each policy year.
20% or 30% up to a maximum of £250 or £500	-	-	-	-	✓
Fixed Rate					
How does Fixed Rate apply?	<p>This option allows the group to fix the rate they pay for each person covered for two years at an extra cost. However, these rates aren't protected from any changes the Government makes to Insurance Premium Tax. Any membership changes during the two-year period will not affect the fixed rate, but may affect the price of the policy after renewal.</p> <p>Need to know: The group may be unable to change cover options at first renewal with this option.</p>				Available on a case-by-case basis (bespoke terms apply)
Advanced therapies					
Advanced therapies List A	✓	✓	✓	✓	✓
Advanced therapies List B	-	-	-	-	✓

## Corporate Select offers a range of additional cover options to tailor or enhance a policy. These include, but aren't limited to:

- ✓ Outpatient chronic cover for longer term support
- ✓ Family cash benefit
- ✓ Diagnosis of gender dysphoria
- ✓ Assessments for neurodivergent conditions
- ✓ NHS Cancer Cover Plus
- ✓ Chronic Medication Check
- ✓ Sleep benefit (from January 2026)
- ✓ Well Health – explore our range of face to face and remote services
  - Targeted cancer screening\*
  - Menopause plan\*
  - Outpatient fertility check
  - Face to face GP\*
  - Lifestyle coaching
  - Men's sexual function plan\*
  - Maternity support (from January 2026)
  - Weight management plan (from January 2026)

\*It may be possible to purchase these services directly with Bupa Clinics.

To explore all available cover options, please contact your Account Manager. Some cover options may have additional eligibility requirements.

## Key exclusions to SME and Corporate Select health insurance

Here's a list of the main types of treatment, services, and charges which aren't covered. There are exceptions to some exclusions for when cover is available and if any additional benefit options are chosen on Corporate Select policies, exclusions may be limited further. For full details, please speak to your Account Manager.

- ✗ Accident and emergency treatment
- ✗ Allergies, allergic disorders or food intolerances
- ✗ Birth control, conception and sexual problems
- ✗ Chronic conditions
- ✗ Convalescence, rehabilitation and general nursing care
- ✗ Cosmetic, reconstructive or weight-loss treatment
- ✗ Deafness
- ✗ Dementia
- ✗ Dialysis
- ✗ Eyesight
- ✗ Gender dysphoria or gender affirmation
- ✗ Learning difficulties, behavioural and developmental conditions
- ✗ Overseas treatment
- ✗ Physical aids and devices
- ✗ Pre-existing conditions, special conditions and moratorium conditions (applicable for underwritten or moratorium policies)
- ✗ Pregnancy and childbirth
- ✗ Screening, monitoring and preventative treatment
- ✗ Sleep problems
- ✗ Speech and language disorders

**With the Guided Care or Open Referral option:** A member must ask for an open referral from a GP or our Direct Access service (if this is available for their condition). This is a referral that details the care they need but is not addressed to a named consultant or healthcare practitioner. A member must then contact us to pre-authorise their consultation or treatment and use a consultant in our list of Open Referral Network consultants that applies to their benefits from the choice we provide them. There are no extra bills for treatment provided by the surgeons or anaesthetists offered. Excess and benefit allowances still apply. The Open Referral service doesn't apply to children aged 17 or under.

**<sup>2</sup>If the Guided Care or Open Referral option has not been chosen:** when we say benefits are paid in full, this is for eligible treatment when a member uses a healthcare facility within the Bupa network applicable to their policy, using a Bupa recognised consultant who agrees to charge within Bupa limits (a fee-assured consultant). The only exception is for members on a Corporate Select policy with the consultant access option 'paid in full with a Bupa recognised consultant'. In this case, benefits are paid in full regardless of whether the Bupa recognised consultant is fee-assured or not.

**If the Guided Care or Open Referral option has been chosen:** when we say benefits are paid in full, this is for eligible treatment when a member uses a healthcare facility within our Participating facility network using a consultant in our list of Open Referral Network consultants who agrees to charge within Bupa limits (a fee-assured consultant).

<sup>3</sup>Optical, accidental dental injury, and prescription cash benefits are not available for members under 16 years of age. For the SME Select product, these benefits are only available to purchase together as a packaged add-on.

<sup>4</sup>This benefit cannot be selected with the Guided Care/Open Referral option.

\*For renewal customers buying the SME product from Bupa, and for customers purchasing via an intermediary or asking for a comparable quote directly from Bupa. A different version of Select Custom is available for new customers purchasing directly from Bupa. Speak to your Bupa representative for further information.

‡Direct Access is available as an opt-in service at an extra charge for Corporate Select. The cost of any telephone assessment provided to a member as part of the Direct Access service will be charged as a claim to the fund.

^Any onward referrals for consultations, tests or treatment are subject to the benefits and exclusions of the cover. For example, if a members cover excludes conditions they had before their cover started, we may ask for further information from their GP.

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