



**Small business health insurance.
Better for business**

Products at a glance

Quick guide to Bupa health insurance, dental insurance and cash plan

For new customers purchasing
directly from Bupa

From 1 September 2024

This document gives a high level overview of our products we provide. Please read it along with the relevant policy guides to understand what is and isn't covered for each product.

Bupa Select health insurance – Select Key, Enhanced and Complete

Our healthcare options have been designed with the needs of small and medium businesses in mind. Choose the cover that's relevant to your work and budget.

	Select Comprehensive healthcare cover		
	Benefit allowances for each person covered on the policy		
Benefits	Select Key Our base level of cover	Select Enhanced Extra cover for added reassurance	Select Complete Our highest tier of cover
Facilities			
Facility access	over 300 partnership facilities nationwide or Guided Care ⁴		over 600 participating facilities nationwide or Guided Care ⁴
Out-patient consultations and treatment			
Out-patient consultations and diagnostic tests	£1,000 a year ¹	£1,500 a year ¹	paid in full ¹
Out-patient therapies (eg physiotherapy) and charges related to out-patient treatment			
Out-patient complementary medicine treatment (acupuncture, chiropractic and osteopathy)	up to £250 within your out-patient benefit allowance above ¹	up to and within your out-patient benefit allowance above ¹	paid in full ¹
Out-patient MRI, CT and PET scans.	paid in full ¹		
Being treated in hospital as a day-patient or in-patient			
Consultant fees and facility charges	paid in full ¹		
Cancer treatment			
Cancer cover	paid in full ¹		
NHS cancer cash benefit If you choose to have certain eligible cancer treatment under the NHS rather than privately	£100 each night for NHS in-patient treatment or £100 for each day you have NHS out-patient, day-patient or home treatment or £100 for each three-weekly course during which you take oral chemotherapy or oral anti-hormone therapy that isn't available from a GP		
Mental health treatment			
Business Mental Health Advantage Consultant and facility charges for day-patient and in-patient care	paid in full up to 45 days each year ²		
Medical consultations, advice and support			
Digital GP service Smartphone application for diagnosis, GP appointments and prescriptions	unlimited access to GP consultations within 24 hours via phone or video call, and private prescription writing. Medication and delivery costs are not included. Collection or delivery available from a chosen pharmacy		
Bupa Anytime HealthLine Telephone service for medical advice from a qualified nurse	unlimited calls and call time, available all day and every day. Provides guidance to customers and their immediate family on any medical issue		

	Select Comprehensive healthcare cover		
	Benefit allowances for each person covered on the policy		
Benefits	Select Key Our base level of cover	Select Enhanced Extra cover for added reassurance	Select Complete Our highest tier of cover
Medical consultations, advice and support			
Bupa Family Mental HealthLine Telephone service for mental health support with a trained adviser	unlimited calls and unlimited call time between 8am and 6pm Monday to Friday. Provides guidance to parents and carers who are concerned about their child’s mental health or wellbeing		
Bupa Menopause HealthLine Telephone service for clinical advice and support with a menopause trained nurse	unlimited calls and unlimited call time between 8am and 8pm, everyday. Provides guidance and support to anyone covered on the policy to help understand and manage menopause symptoms		
Additional benefits			
Direct Access No GP referral needed for certain conditions	you can call us about cancer symptoms, mental health, or muscle, bone and joint conditions, without a GP referral. We’ll provide support, advice and a referral for consultations, tests and treatment if you need them		
Home nursing When immediately following private eligible in-patient treatment	£2,000 each year for medical treatment carried out under the supervision of your consultant. Our written agreement is needed before treatment starts. Eligibility criteria apply – see membership guide for details		
Ambulance cover When related to private eligible in-patient, day-patient treatment	up to £80 each single trip – no annual limits		
NHS cash benefit If you choose to have in-patient treatment under the NHS rather than privately	£50 a night for up to 35 nights a year for treatment that would have otherwise been covered for private in-patient treatment		
Procedure specific NHS cash benefit If you choose to have certain eligible treatment under the NHS rather than privately	applies to treatment that would otherwise have been covered under your benefits. The amount we pay depends on the procedure you are having. Call us or go to bupa.co.uk/pscb for more information		
Options to enhance cover (additional premiums apply)			
Island cover	for residents of Jersey, Guernsey or the Isle of Man only – includes travel to UK mainland. This option cannot be selected with the Guided Care option		
Options to manage costs			
Excess options	you can choose from £0, £100, £150, £200 or £500		
Six week scheme	this option gives a discount on the cost of the policy. If the NHS can provide day-patient or in-patient treatment (including diagnostic procedures)within six weeks of the date the consultant recommends it, then treatment takes place in the NHS. If not, the treatment or tests will be covered by Bupa		
Fixed rate	this option allows you to fix the rate you 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. If you make any membership changes during the two-year period, this won’t affect the fixed rate, but may affect the price of the policy after renewal. Need to know: you may be unable to change your cover options at your first renewal if you choose this option		

Select Comprehensive healthcare cover			
Benefit allowances for each person covered on the policy			
Benefits	Select Key Our base level of cover	Select Enhanced Extra cover for added reassurance	Select Complete Our highest tier of cover
Key notes – Select			
What isn't covered	<p>Here's a list of the main types of treatments, services and charges which aren't covered.</p> <ul style="list-style-type: none"> ■ Accident and emergency treatment ■ Ageing, menopause or puberty ■ Allergies, allergic disorders or food intolerances ■ Birth control, conception or sexual problems ■ Chronic conditions ■ Convalescence, rehabilitation or general nursing care ■ Cosmetic, reconstructive or weight loss treatment ■ Deafness ■ Dementia or learning, behavioural and developmental conditions³ ■ Dialysis ■ Eyesight ■ Gender dysphoria or gender affirmation ■ Physical aids and devices ■ Pregnancy and childbirth ■ Screening, monitoring and preventative treatment ■ Sleep problems ■ Speech disorders 		

¹Check your Facility Access to see if the Guided Care option has been chosen:

- **If the Guided Care option has not been chosen** – the benefit limit is for eligible treatment on your core health insurance when you use a Bupa recognised consultant or therapist or complementary medicine practitioner and a healthcare facility within the Bupa network that applies to your policy.
- **If the Guided Care option has been chosen** – the benefit limit is for eligible treatment on your core health insurance when you use a consultant in our list of Open Referral Network consultants or a Bupa recognised therapist or complementary medicine practitioner, and a healthcare facility within our participating facility network.

²Check your Facility Access to see if the Guided Care option has been chosen:

- **If the Guided Care option has not been chosen** – when we say benefits are paid in full, this is for eligible treatment on your core health insurance when you use a healthcare facility within your chosen Bupa network using a Bupa recognised consultant who agrees to charge within Bupa limits (a fee-assured consultant) or a Bupa recognised complementary medicine practitioner.
- **If the Guided Care option has been chosen** – when we say benefits are paid in full, this is for eligible treatment on your core health insurance when you use 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) or a Bupa recognised complementary medicine practitioner.

³Any treatment for learning difficulties, behavioural or developmental conditions (LBD) will remain ineligible. However, we will now cover any related mental health condition in relation to an LBD, for example anxiety or depression. Related mental health conditions will be eligible under Benefit 5.3 Exclusion GE20.

⁴**With the Guided Care option:** participating facility is the network of recognised facilities for which you are covered under your benefits; and the Open Referral service applies to your benefits. This means that you must be referred to a consultant or to treatment either by our Direct Access service (if it is available for your condition), or by obtaining an open referral letter from a GP. This is a referral that details the care you need but is not addressed to a named consultant or healthcare practitioner. You then must call us to pre-authorise your consultation or treatment and use a consultant in our list of Open Referral Network consultants that applies to your benefits, or a Bupa recognised practitioner (as relevant), from the choice we give you. There are no extra bills for treatment provided by the surgeons or anaesthetists we offer you. Excess and benefit limits still apply. The Open Referral service doesn't apply to children aged 17 or under.

*Any onward referrals for consultations, tests or treatment are subject to the benefits and exclusions of your cover. For example, if your cover excludes conditions you had before your cover started, we may ask for further information from your GP. Please check your guide and certificate for further details or contact us to check your eligibility.

Bupa Dental Plan

This table describes the benefit allowances each person covered can claim up to in a policy year.

Worldwide preventative and restorative benefits

	Level 1	Level 2	Level 3	Level 4	Level 5
Worldwide preventative dental treatment					
Routine examination <i>Cover for two visits a year</i>	£80 up to £40 for each visit	£100 up to £50 for each visit	£140 up to £70 for each visit	£160 up to £80 for each visit	£220 up to £110 for each visit
New patient examination	£60	£70	£90	£100	£130
	one visit in each policy year				
Scale and polish (by your dentist or hygienist) <i>Cover for two visits a year</i>	£100 up to £50 for each visit	£120 up to £60 for each visit	£180 up to £90 for each visit	£200 up to £100 for each visit	£260 up to £130 for each visit
Virtual examination	£20 a year				
Dental X-rays and scans	£40 a year	£50 a year	£80 a year	£90 a year	£100 a year
Worldwide restorative dental treatment					
Fillings, composite bonding, fissure sealant and tropical fluoride	£175 a year	£275 a year	£330 a year	£375 a year	£400 a year
Major restorative dental treatment We cover 80% of restorative treatment costs up to your yearly allowance	£325 a year	£500 a year	£800 a year	£2,000 a year	£3000 a year

Other dental benefits

	Level 1	Level 2	Level 3	Level 4	Level 5
Orthodontic treatment UK only	£300 a year	£400 a year	£500 a year	£600 a year	£700 a year
Emergency dental treatment Worldwide cover	£1,000 a policy year made up of four emergencies, up to £250 each				
Dental injury treatment Worldwide cover	£5,000 for each policy year				
Oral cancer treatment UK only	paid in full to diagnose and to treat oral cancer when using a fee-assured consultant in a partnership facility				
Cash benefit for hospital stay UK only	£100 for each night you stay in hospital, up to £1,000 for each policy year				

For full details of what is and isn't covered, please refer to the membership guide.

We have a nationwide network of Bupa owned and Bupa approved dental practices. It aims to offer our dental insurance customers hassle-free access to quality care and discounts on treatment.

Up to 20% discount[†] is available on general dental treatment costs at selected Bupa-owned and approved network dental practices. Please note, not all Bupa Dental Care practices are part of the Bupa Dental Insurance Network.

[†]You must inform the dentist you have Bupa dental insurance and give your membership number before to your appointment to benefit from this offer. 10% or 20% discounts are available depending on the practice and the dentist you are seeing. To find the selected Bupa-owned and approved network dental practices where this offer is available visit finder.bupa.co.uk and search Bupa Insurance Network. Discount excludes laboratory fees and specialist treatment and cannot be used against NHS and Bupa Essentials services.

Cash Plan

Because health expenses are often unplanned, you can't always budget for them. If you knew you could claim cash back for everyday expenses such as dental and optical bills, it could make life a little easier.

Bupa Wellbeing Health Expenses

This product will cover your employees for a range of everyday healthcare treatments, goods or services, alongside providing money back towards the costs of specialist therapies and consultations. A membership level must be paid for by you on behalf of your team. There is also the option, where available, for your employees to upgrade their cover at an additional cost.

This table outlines what's available on Bupa Wellbeing Health Expenses. Refer to the benefits listed on the left and then across for the amount your employees can claim for from your chosen membership type and level per member per benefit year.

Membership type	Individual plus or Family*		
Membership level	Level 1	Level 2	Level 3
Dental	up to £60	up to £120	up to £200
Dental injury	up to £200	up to £300	up to £400
Optical	up to £60	up to £120	up to £200
Hospital in-patient (nights)	up to £20 per day or night	up to £30 per day or night	up to £40 per day or night
Hospital day-case (days)	up to a maximum of 20 days or nights per benefit year	up to a maximum of 20 days or nights per benefit year	up to a maximum of 20 days or nights per benefit year
Therapies (includes physiotherapy, osteopathy, chiropractic, acupuncture and chiropody/podiatry)	up to £150	up to £300	up to £500
Consultations and diagnostic tests or scans	up to £200	up to £300	up to £500
Prescriptions	up to £25	up to £35	up to £45
Bupa health assessments all members aged 18 and over	up to £100	up to £150	up to £200
Bupa Employee Assistance Programme (EAP)** all members aged 16 and over	✓	✓	✓
Online health check main members only	✓	✓	✓
Bupa Anytime HealthLine all members aged 16 and over	✓	✓	✓

*Individual plus membership is for the main member and up to four child dependants. Family membership is for the main member, their partner and up to four child dependants.

**EAP Key and EAP Premier options available. The option chosen will determine the benefits available to your employees and will also affect your premium. Please see the applicable Bupa Wellbeing Health Expenses table of cover for more information.

All benefit limits represent the maximum amount that we will pay for each benefit under the cash plan during each benefit year. Pre-existing conditions are covered for all benefits. You will be required to provide any information or proof to support your claim if we make a reasonable request for you to do so.

Terms and conditions apply. Please see the applicable Bupa Wellbeing Health Expenses table of cover and the Bupa Cash Plan membership guide for more information.

Helpful information

Consultant and facilities finder

Finder is an easy-to-use, online directory that allows employees to search for Bupa-recognised consultants, therapists and hospitals, as well as Bupa dentists, health centres and care homes. It helps teams make informed decisions about where to go and who to see for their treatment.

Tell your team to visit: finder.bupa.co.uk

Everyday Rewards by Bupa

We're always looking for ways to give your team more from their health cover. Our free Everyday Rewards programme is an attractive incentive that encourages a healthier approach to down-time. It offers discounts from some of the UK's biggest names in health and wellbeing, leisure, travel, home entertainment and retail.

Please contact your Bupa representative for more information.

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 policy guide and the full version is online at bupa.co.uk/privacy

Helpful numbers

New business

03457 515 515

Existing business

03457 553 322 option 5

Member services for your health insurance

0345 604 0623

Company Business Partner Services

03457 553 322

Dental

For a quote:

03457 515 515

For customer service or to make a claim:

0800 237 777

Cash Plan

For a quote:

03457 515 515

For customer service or to make a claim:

03456 066 003

We may record or monitor our calls.

Everyday Rewards by Bupa is promoted by Bupa Investments Limited, 1 Angel Court, London EC2R 7HJ.

Terms and conditions can be found at bupa-rewards.bupa.co.uk/terms-conditions

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Bupa Investments Limited will use your information for the purposes of the administration of Health and Wellbeing Rewards by Bupa. For details of how your information will be processed by Bupa, please visit: bupa.co.uk/privacy

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Registered office: 1 Angel Court, London EC2R 7HJ

Bupa health insurance, dental insurance and cash plan are provided by:

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