Support for your team, every step of the way.

Cancer cover.
For new customers purchasing directly from Bupa.
Cancer cover.
Worrying about symptoms or receiving a diagnosis can be incredibly tough, so we’ll do everything we can to diagnose, treat and support your employees – it’s our Cancer Promise.* With fast access to diagnosis, appointments and eligible treatment, we can help to reduce the impact cancer has on your team and your business.

Your benefits

- fast access to support for worrying symptoms, usually without seeing a GP first^*  
- no financial or time limits* – your team don’t need to worry about running out of funding partway through eligible treatment  
- access to eligible breakthrough cancer drugs and treatments, often before they are available on the NHS or approved by NICE as long as they’re evidence-based  
- access to a network of Specialist Centres for breast and bowel cancer providing the all clear or all initial diagnostic tests in one visit – just two to four working days after first arranging  
- if clinically appropriate, your team could receive chemotherapy at home  
- access to direct helplines for support on any symptoms of cancer and quick referral if appropriate^  
- access to a dedicated Oncology support team made up of specialist health advisers and nurses to manage their care journey  
- access to palliative treatment and End of Life Support wherever your team members live in the UK

For more information contact

0345 751 5515
bupa.co.uk/small-business

Lines are open Monday to Friday 8.30am to 6pm.
We may record or monitor our calls.

*With Bupa cancer cover there are no time limits. All eligible treatment costs and evidence-based breakthrough cancer drugs and treatments that your scheme covers are paid in full for as long as your employee has Bupa health cover. Employees will need to check their certificate or guide to see which specific list of advanced therapies has been selected as it may not cover all advanced therapies. Your employees will need to use a hospital or clinic from the Bupa network that applies to their cover and a Bupa recognised consultant who will charge within our rates (a fee-assured consultant).

^Direct Access telephone services are available as long as the symptoms are covered under the policy. If your cover excludes conditions you had before your policy started, we’ll ask you to provide evidence from a GP that your symptoms are not pre-existing for a period of up to two years from policy start date before we can refer you to a consultant or therapist through the Direct Access service. Always call us first to check your eligibility.

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