

Plus all the
benefits of the
Yulife App

Bupa Select health insurance.

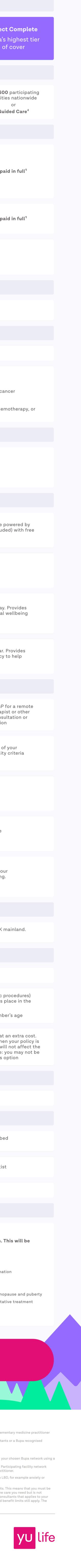
These tables show you the maximum amount of benefits you can claim per person per policy year according to your cover.

Refer to the Bupa Select membership guide for full policy terms including details of what's covered, what's not covered and any exceptions.

Select						
Comprehensive healthcare cover						
Limits for each member and benefit notes						
Benefits						
Select Key Bupa's base level of cover	Select Enhanced Extra cover for added reassurance	Select Complete Bupa's 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	up to £250 within your out-patient benefit limit above ¹	up to and within your out-patient benefit limit above ¹	paid in full ¹			
Out-patient complementary medicine treatment (acupuncture, chiropractic and osteopathy)						
Out-patient Magnetic resonance imaging (MRI) Computerised tomography (CT) and Positron emission tomography (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 ²					
Cancer treatment						
Cancer cover	paid in full ²					
NHS cancer cash benefit	£100 each night for NHS in-patient treatment or £100 for NHS out-patient, NHS day-patient, or NHS home treatment for cancer or £100 for each three-weekly interval, or part thereof, during which you take oral chemotherapy, or oral anti-hormone therapy that is not available from a GP					
Business Mental Health Advantage	paid in full up to 45 days each year ²					
Consultant and facility charges for day-patient and in-patient care						
Medical consultations, advice and support						
Bupa Blua Health	unlimited access to GP consultations 24/7 via phone or video call, clinical triage powered by artificial intelligence, and private prescription writing (prescription costs not included) with free delivery or collection from a chosen pharmacy					
Bupa Anytime HealthLine	unlimited 24/7 calls and unlimited call time. Provides guidance to members and their immediate family on any medical issue					
Bupa Family Mental HealthLine	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 emotional wellbeing and/or mental health					
Bupa Menopause HealthLine	unlimited calls and unlimited call time between 8am and 8pm, 365 days a year. Provides guidance and support to members and their named dependants on the policy to help understand and manage menopause symptoms					
Additional benefits						
Direct Access	for certain medical conditions you can contact us directly without consulting a GP for a remote assessment with a trained advisor, therapist, mental health and wellbeing therapist or other clinician who specialises in your condition. This may lead to a referral for a consultation or treatment. Call Bupa or go to bupa.co.uk/referrals for more information					
Home Nursing	£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	up to £80 each single trip – no annual limits					
NHS Cash Benefit	£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	applies to treatment that would otherwise have been covered under your benefits. The amount we pay depends on the procedure you are having. Call Bupa or go to bupa.co.uk/pscb for more information					
Options to enhance cover (additional subscriptions 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	£0, £100, £150, £200, £500					
Six week scheme	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. This option gives 15% to 25% discount on the cost of cover – subject to member's age					
Fixed rate	the fixed rate option allows you to fix the rates you pay per member for two years at an extra cost. However, this is not protected from any increases in Insurance Premium Tax (IPT) when your policy is next renewed. Changes to membership made during the two-year fixed rate period will not affect the fixed rates but may affect the price you pay for the policy after renewal. Please note: you may not be able to amend your benefit options at your first renewal after choosing this option					
Add-ons (optional benefits you can add to your cover, additional subscriptions apply)						
Family cash benefit	£200 for each birth or adoption – applies to main member only					
The following benefits are not available for members under 16 years old						
Optical cash benefit	up to £100 in any two year benefit period, when provided to or prescribed for you by a scheme recognised optician or consultant					
Accidental dental injury cash benefit	up to £900 each year, with a scheme recognised dentist or orthodontist					
Prescription cash benefit	up to £20 each year for eligible treatment					
Key notes						
Key exclusions	Bupa's main exclusions are listed below. Please refer to the Bupa Membership Guide for the complete list of exclusions. This will be provided by your Bupa representative					
	<ul style="list-style-type: none"> • Accident and emergency treatment • 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 • Relief of symptoms of ageing, menopause and puberty • Screening, monitoring and preventative treatment • Sleep problems and disorders • Speech disorders 					

For more info get in touch:

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- ¹ Check 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.
- ² Check 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.
- ³ Any 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 benefit, or by obtaining an open referral letter from a GP. This is a referral that to details the care you need that you must be 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 benefit, 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.
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