



# BUPA

## Transplant Procedures Rider

### Bupa Secure Care • Bupa Essential Care

Based on the information provided on the Application for Transplant Procedures Rider and payment of the additional premium, you are hereby issued this Transplant Procedures Rider to replace the exclusion contained in the underlying Policy that refers to “Treatment related to transplant procedures, including transplant of human organs, cells, or tissue”, pursuant to the following:

Terms	Benefits
<ul style="list-style-type: none"><li>a. The Transplant Procedures Rider offers a maximum benefit of five hundred thousand dollars (US\$500,000) for organ, tissue, or cell transplant procedures per insured, per diagnosis, per lifetime. If this Rider is issued when changing policy or plan, the maximum amount available will be reduced by any transplant benefit amount already paid under a previous policy or plan with Bupa or any of its affiliated companies.</li><li>b. A six (6) month waiting period after the effective date of this Rider applies, except when this Rider replaces the transplant procedure coverage in a previous policy or plan with Bupa or any of its affiliated companies.</li><li>c. The benefits under this Rider begin once the need for each transplant procedure has been determined by a physician, certified by a second surgical or medical opinion, and approved by USA Medical Services (Bupa’s Third-Party Administrator). These benefits are subject to all the terms, provisions, exclusions, limitations, and restrictions of coverage of the underlying policy.</li><li>d. Coverage for transplantation of human organs, cells, and tissue is provided only within Bupa’s Provider Network for Transplant Procedures. There is no coverage outside such network. The list of hospitals in the Provider Network for Transplant Procedures is available from USA Medical Services and may change at any time without prior notice.</li><li>e. For the purposes of this Rider, transplant procedures are those in which an organ, cell (e.g. stem cell, bone marrow), or tissue is implanted from one part to another, or from one individual to another (of the same species), or when an organ, cell, or tissue is removed from an individual and then received back.</li><li>f. This Rider in no way limits the insured’s access or use of another applicable policy benefit, such as the coverage for congenital and/or hereditary conditions. If both benefits apply, the benefit for congenital and/or hereditary conditions will cease to be available once the benefit for transplant procedures is activated. Any remaining amount under the congenital and/or hereditary conditions benefit may be used for treatment unrelated to the transplant procedure. Bone marrow transplants derived from a cancer diagnosis will be covered under the cancer benefit of the Bupa Advantage Care policy.</li></ul>	<ul style="list-style-type: none"><li>a. Pre-transplant care, including those services directly related to the evaluation of the need for transplantation, evaluation of the insured for the transplant procedure, and preparation and stabilization of the insured for the transplant procedure.</li><li>b. Pre-surgical work-up, including all laboratory and X-ray exams, CT scans, Magnetic Resonance Imaging (MRI), ultrasounds, biopsies, scans, medications, and supplies.</li><li>c. The costs of organ, cell, or tissue procurement, transportation, and harvesting, including bone marrow, stem cell, and cord blood storage or banking are covered up to a maximum of twenty-five thousand dollars (US\$25,000) per diagnosis, which is included as part of the maximum transplant benefit. The donor workup, including testing of potential donors for a match, is included in this benefit.</li><li>d. The hospitalization, surgeries, physician and surgeon’s fees, anesthesia, medication, and any other treatment necessary during the transplant procedure.</li><li>e. Post-transplant care including, but not limited to any medically necessary follow-up treatment resulting from the transplant and any complications that arise after the transplant procedure, whether a direct or indirect consequence of the transplant.</li><li>f. Medication or therapeutic measures needed to ensure the viability and permanence of the transplanted organ, cell, or tissue.</li><li>g. Home health care, nursing care (e.g. wound care, infusions, assessments), medical attention, emergency transportation, clinic or office visits, transfusions, supplies, or medication related to the transplant.</li></ul>