

# COMPARISON GUIDE BUPA CARE TRINIDAD & TOBAGO 2025



	Bupa Privilege Care		Bupa Advantage Care		Bupa Secure Care		Bupa Essential Care	
<b>Maximum annual coverage</b>	US\$7 M		US\$4 M		US\$3 M		US\$2 M	
<b>Geographical coverage</b>	Worldwide (Open network)		Worldwide (Bupa Advantage network)		Worldwide (Bupa Secure network)		Worldwide (Bupa Essential network)	
<b>Deductible options</b>	<b>In-country</b>	<b>Out-of-country</b>	<b>In-country</b>	<b>Out-of-country</b>	<b>In-country</b>	<b>Out-of-country</b>	<b>In-country</b>	<b>Out-of-country</b>
<b>Plan 2</b>	US\$1,000	US\$2,000	US\$1,000	US\$2,000	US\$1,000	US\$2,000	US\$1,000	US\$2,000
<b>Plan 3</b>	US\$2,000	US\$3,000	US\$2,000	US\$3,000	US\$2,000	US\$3,000	US\$2,000	US\$3,000
<b>Plan 4</b>	US\$5,000	US\$5,000	US\$5,000	US\$5,000	US\$5,000	US\$5,000	US\$5,000	US\$5,000
<b>Plan 5</b>	US\$10,000	US\$10,000	US\$10,000	US\$10,000	US\$10,000	US\$10,000	US\$10,000	US\$10,000
<b>Plan 6</b>	US\$20,000	US\$20,000	US\$20,000	US\$20,000	US\$20,000	US\$20,000	US\$20,000	US\$20,000
<b>Extended coverage for eligible dependents</b>	2 years		2 years		1 year		1 year	
<b>In-patient benefits and limitations</b>								
<b>Hospital services: room and board</b>	100% (In Bupa hospital network) US\$1,000 (In other hospitals, per day)		100%		100%		100%	
<b>Intensive Care Unit</b>	100% (In Bupa hospital network) US\$3,000 (In other hospitals, per day)		100%		100%		100%	
<b>Medical and nursing fees</b>	100%		100%		100%		100%	
<b>Drugs prescribed while in-patient</b>	100%		100%		100%		100%	
<b>Diagnostic procedures</b>	100%		100%		100%		100%	
<b>Bariatric Surgery (24-month waiting period)</b>	US\$15,000		US\$15,000		N/A		N/A	
<b>Accommodation charges for companion of a hospitalized child, per day</b>	US\$300		US\$300		US\$100		N/A	
<b>Out-patient benefits and limitations</b>								
<b>Ambulatory surgery</b>	100%		100%		100%		100%	
<b>Physicians and specialists visits</b>	100%		100%		100%		100%	
<b>Prescription drugs:</b>								
• <b>Following hospitalization or out-patient surgery</b>	• 100%		• 100% (Max. 6 months)		• 100% (Max. 6 months)		• US\$10,000 (Max. 6 months)	
• <b>Out-patient or non-hospitalization</b>	• 100%		• US\$6,500		• US\$3,000		• US\$1,500 (with 20% co-insurance)	
<b>Diagnostic procedures</b>	100%		100%		100%		100%	
<b>Physical therapy and rehabilitation services</b>	100%		100%		100% (Max. 60 sessions)		100% (Max. 40 sessions)	
<b>Home health care (must be pre-approved)</b>	100%		100%		US\$300 per day (Max. 90 days)		US\$200 per day (Max. 60 days)	

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	Bupa Privilege Care	Bupa Advantage Care	Bupa Secure Care	Bupa Essential Care
<b>Adult routine health checkup</b>	US\$300 (No deductible)	US\$400 (No deductible)	US\$300	US\$200
<b>Pediatric routine health checkup</b>	US\$300 (No deductible)	US\$400 (No deductible)	US\$300 (No deductible)	US\$200 (No deductible)
<b>Vaccines (medically required)</b> • No deductible applies • Subject to 20% of coinsurance	US\$1,600 (*)	US\$300 (*)	US\$300 (*)	US\$150 (*)
<b>Urgent Care Facilities or Walk-in Clinics in the U.S.A.</b> • US\$50 copay • No deductible applies	100%	100%	100% (No deductible)	100% (No deductible)
<b>Maternity benefits and limitations</b>				
<b>Pregnancy, maternity, and birth, per pregnancy</b>	US\$7,500 (10-month waiting period. No deductible. Plans 1, 2 and 3 only)	US\$5,000 (10-month waiting period. No deductible. Plans 2 and 3 only)	US\$3,500 (10-month waiting period. No deductible. Plans 1, 2 and 3 only)	US\$2,000 (10-month waiting period. No deductible. Plans 1, 2 and 3 only)
<b>Provisional coverage for newborn children</b>	US\$30,000 (Covered pregnancies only. No deductible)	US\$30,000 (Covered pregnancies only. No deductible)	US\$15,000 (Covered pregnancies only. No deductible)	US\$10,000 (Covered pregnancies only. No deductible)
<b>Umbilical cord blood storage</b>	US\$1,000 (No deductible. Plans 2 and 3 only)	US\$500 (No deductible. Plans 1, 2 and 3 only)	N/A	N/A
<b>Complications of pregnancy, maternity, and birth</b>	US\$1,000,000 (10-month waiting period. No deductible. Plans 2 and 3 only)	N/A	N/A	N/A
<b>Evacuation benefits and limitations (must be pre-approved and coordinated by USA Medical Services)</b>				
<b>Air ambulance</b>	US\$125,000	US\$100,000	US\$50,000	US\$50,000
<b>Ground ambulance</b>	100%	100%	100%	100%
<b>Return journey</b>	100%	100%	100%	100%
<b>Repatriation of mortal remains</b>	100%	100%	US\$10,000	US\$5,000
<b>Other benefits and limitations</b>				
<b>Cancer treatment</b>	100% (including bone marrow transplant and preventive surgery)	100% (including bone marrow transplant and preventive surgery)	100% (including bone marrow transplant and preventive surgery)	100% (including bone marrow transplant and preventive surgery)
<b>End-stage renal failure (dialysis)</b>	100%	100%	100%	100%
<b>Transplant procedures</b>	US\$1,500,000 (Lifetime maximum per diagnosis)	US\$1,000,000 (Lifetime maximum per diagnosis)	N/A	N/A

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<b>Congenital and/or hereditary disorders diagnosed before the age of 18</b>	US\$1,000,000 (Max. per lifetime)	US\$300,000 (Max. per lifetime)	US\$150,000 (Max. per lifetime)	US\$100,000 (Max. per lifetime)
<b>Congenital and/or hereditary disorders diagnosed on or after the age of 18</b>	100%	100%	100%	100%
<b>Prosthetic limbs</b>	US\$30,000 (Lifetime max. US\$120,000)	US\$30,000 (Lifetime max. US\$120,000)	US\$30,000 (Lifetime max. US\$120,000)	US\$30,000 (Lifetime max. US\$120,000)
<b>Special treatments</b>	100%	100%	100%	100%
<b>Emergency room (with or without admission)</b>	100%	100%	100%	100%
<b>Emergency dental coverage</b>	100%	100%	100%	100%
<b>Hospice/terminal care</b>	100%	100%	100%	100%
<b>Complementary therapist (max. 20 visits/sessions)</b>	100%	N/A	N/A	N/A
<b>HIV/AIDS</b>	100% (Under certain conditions)	100% (Under certain conditions)	100% (Under certain conditions)	100% (Under certain conditions)
Supplementary Options with the Purchase of Riders (not automatically included)				
<b>Transplant procedures rider</b>	N/A	US\$500,000 (per insured, per diagnosis, per lifetime) • 6-month waiting period after effective date of rider	US\$500,000 (per insured, per diagnosis, per lifetime) • 6-month waiting period after effective date of rider	US\$500,000 (per insured, per diagnosis, per lifetime) • 6-month waiting period after effective date of rider
<b>Maternity and perinatal complications rider</b>	US\$500,000 (per rider) • Plans 4, 5, & 6 (subject to deductible) • 10-month waiting period after effective date of rider	US\$500,000 (per rider) • Plans 1, 2 & 3 (not subject to deductible) • Plans 4, 5 & 6 (subject to deductible) • 10-month waiting period after effective date of rider	US\$500,000 (per rider) • Plans 1, 2 & 3 (not subject to deductible) • Plans 4, 5 & 6 (subject to deductible) • 10-month waiting period after effective date of rider	US\$500,000 (per rider) • Plans 1, 2 & 3 (not subject to deductible) • Plans 4, 5 & 6 (subject to deductible) • 10-month waiting period after effective date of rider

## Notes:

- Policy benefits are per member per policy year, except in cases specified in the policy.
- The Usual, Customary, and Reasonable rates (UCR) for medical fees apply to all plans according to the geographical region where the treatment took place.
- Some procedures, treatments, services and benefits stated in this Comparison Guide may be subject to prior authorization by the insurer, as stipulated in the Table of Benefits.
- This Comparison Guide is for information purposes only. All benefits details, as well as limitations and exclusions, are part of the Terms and Conditions, which will prevail over any informative documents.