

Prevention Pathways Addendum.



From your start or **renewal date**, your policy now includes the specifically developed prevention pathways. These are structured programmes designed to assess your personal risk of developing breast cancer, cardiovascular disease and type 2 diabetes in the future and, where clinically needed, provide access to genetic testing and targeted preventive interventions.

The prevention pathways start with a focused preventive assessment to understand your current health. A Bupa healthcare professional will review your results and decide what **treatment** may be suitable for you.

Important information about how the prevention pathways interact with other policy terms

- You do not need to have an **acute condition** to use the prevention pathways. If you have symptoms of, or have been diagnosed with, breast **cancer**, cardiovascular disease or type 2 diabetes, you cannot use the prevention pathways for these conditions. If you have an **acute condition** that requires **treatment**, your policy terms apply.
- You may not be able to use the prevention pathways if you have some health conditions or you're having some **treatments**. We will let you know if this applies.
- Exclusion 24, 'Screening, monitoring and preventive treatment', does not apply to the prevention pathways.
- Any **special conditions**, **pre-existing conditions** or **moratorium conditions** do not apply to the prevention pathways.
- We do not pay claims for preventive testing and **treatment** that are outside of the prevention pathways described in this addendum.
- The 'Need to know' section of each benefit explains how costs paid for by your policy affect any no-claims discount or Low Claims Bonus (if either applies to your policy).

Need to know

- You must be 18 or over and have had 12 months' continuous cover with a Bupa health insurance policy or health trust to use the prevention pathways.
- You are covered for genetic testing as clinically needed, which means testing recommended by a Bupa healthcare professional based on your current health. This doesn't include any testing that isn't clinically needed.

Important information about the use of your genetic test results

Bupa Insurance Limited as a member of the Association of British Insurers (ABI) has signed up to the Code on Genetic Testing and Insurance. For health insurance this means:

- We will not require you to take any predictive genetic test we offer.
- We will not use predictive genetic test results to increase your premium.
- We will not change or deny cover based on your predictive genetic test results.

You can view the ABI Code on Genetic Testing and Insurance by visiting abi.org.uk and searching 'code on genetic testing and insurance'. Not all insurers sign up to the ABI Code of Conduct, and it only applies in the UK, so if you buy a health insurance policy with a new insurer that has not signed up to the ABI Code or you move overseas you may need to share any genetic testing results you have.

The prevention pathways are provided by Bupa Occupational Health Limited which is part of the Bupa Group. You can read how we use your information by visiting: bupa.co.uk/privacy.

P1. Preventive assessment

Description	Cover
P1 Preventive assessment	You are covered for an in-person preventive assessment carried out by a Bupa healthcare professional at a Bupa Health Centre, once in each policy year. Need to know - To book your preventive assessment, please visit My Bupa or contact us using the Bupa helpline number on your membership certificate. - You can find your nearest Bupa Health Centre at finder.bupa.co.uk, but appointments cannot be booked there. - The appointment will include blood tests. - You will need to pay a £100 contribution to Bupa Occupational Health Limited, each time you have a preventive assessment. - Your policy excess or co-payment, if you have either, and allowances do not apply to this benefit. - The cost of this benefit that is paid for by your policy will not affect your no-claims discount or Low Claims Bonus (if either apply to your policy).

P2. Genetic testing and interventions for breast cancer

Description	Cover
P2a Genetic testing for breast cancer	If, following an assessment (benefit P1), a Bupa healthcare professional recommends genetic testing for risk of breast cancer, you are covered for clinically needed genetic testing provided by Bupa Occupational Health Limited. Need to know - The cost of the testing will be covered in full. - Your policy excess or co-payment, if you have either, and allowances do not apply to this benefit. - The cost of this benefit that is paid for by your policy will not affect your no-claims discount or Low Claims Bonus (if either apply to your policy). - The testing you're offered will depend on your age, your sex at birth and clinical risk factors. - Remote pre and post-test genetic counselling appointments are included. - If you've previously had genetic testing showing a higher risk of developing breast cancer, you will be covered where pre-authorisation is in place under: - benefit P2b; and - benefits P2c to P2f, P5a and P5b as clinically needed. - Some genetic tests for breast cancer may also indicate an increased risk of ovarian cancer. If this happens, and subject to pre-authorisation, you will be able to access benefits P2b, and P2c if clinically needed.
P2b Outpatient consultations	If you have a monogenic test for breast cancer, you are covered for consultations with a breast and/or gynaecology consultant as clinically needed. Need to know - Your policy excess or co-payment, if you have either, will apply to this benefit. - The cost of this benefit that is paid for by your policy will affect your no-claims discount or Low Claims Bonus (if either apply to your policy). - This benefit is paid under 'Outpatient consultations' (benefit 1.1 in your policy guide), and we pay up to the allowance that applies to that benefit.
P2c Risk-reduction surgery	If recommended by a consultant (benefit P2b), you are covered for risk-reduction surgery (prophylactic surgery). Need to know - Your policy excess or co-payment, if you have either, will apply to this benefit. - The cost of this benefit that is paid for by your policy will affect your no-claims discount or Low Claims Bonus (if either apply to your policy). - You are covered for consultations and tests in relation to surgery from 'Outpatient consultations and treatment' (benefit 1 in your policy guide), and surgery from 'Consultants' fees for hospital treatment' (benefit 2 in your policy guide) and 'Hospital or clinic charges' (benefit 3 in your policy guide). We pay up to the allowances that apply to those benefits.
P2d Reconstructive surgery	If you have risk-reduction surgery (benefit P2c) you are covered for reconstructive surgery, as described in exception 2 to exclusion 10, 'Cosmetic, reconstructive or weight-loss treatment'. Need to know - Your policy excess or co-payment, if you have either, will apply to this benefit. - The cost of this benefit that is paid for by your policy will affect your no-claims discount or Low Claims Bonus (if either apply to your policy). - You are covered for consultations and tests in relation to surgery from 'Outpatient consultations and treatment' (benefit 1 in your policy guide), and surgery from 'Consultants' fees for hospital treatment' (benefit 2 in your policy guide) and 'Hospital or clinic charges' (benefit 3 in your policy guide). We pay up to the allowances that apply to those benefits.
P2e Screening scans	If recommended by a consultant (benefit P2b) or a Bupa healthcare professional following genetic testing (benefit P2a), you are covered for three breast cancer screening scans as clinically needed. Screening scans are mammograms, ultrasound scans and/or MRI scans, whichever is clinically needed. Need to know - Your policy excess or co-payment, if you have either, will apply to this benefit. - The cost of this benefit that is paid for by your policy will affect your no-claims discount or Low Claims Bonus (if either apply to your policy). - You are covered for screening scans from 'Outpatient consultations and treatment' (benefit 1 in your policy guide). We pay up to the allowance that applies to that benefit.

P2. Genetic testing and interventions for breast cancer (continued)

P2f Risk-reduction medication for breast cancer	If recommended by a consultant (benefit P2b), you are covered for the cost of licensed risk-reduction medication for breast cancer for a period of 12 months from the issue date of your first prescription. Need to know ■ The cost of the risk-reduction medication will be covered in full. ■ Exclusion 14 'Outpatient drugs, dressings, complementary and alternative products' does not apply to this benefit. ■ Your policy excess or co-payment, if you have either, and allowances do not apply to this benefit. ■ The cost of this benefit that is paid for by your policy will not affect your no-claims discount or Low Claims Bonus (if these apply to your policy). ■ Any medication that is prescribed after the date your policy ends isn't covered.
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P3. Genetic testing for cardiovascular disease

Description	Cover
P3 Genetic testing for cardiovascular disease	If, following an assessment (benefit P1), a Bupa healthcare professional recommends genetic testing for risk of cardiovascular disease, you are covered for clinically needed genetic testing provided by Bupa Occupational Health Limited. Need to know ■ The cost of the testing will be covered in full. ■ Your policy excess or co-payment, if you have either, and allowances do not apply to this benefit. ■ The cost of this benefit that is paid for by your policy will not affect your no-claims discount or Low Claims Bonus (if either apply to your policy). ■ The tests you're offered will depend on your age and clinical risk factors. ■ A GP appointment to discuss your results is included.

P4. Genetic testing for type 2 diabetes

Description	Cover
P4 Genetic testing for type 2 diabetes	If, following an assessment (benefit P1), a Bupa healthcare professional recommends genetic testing for risk of type 2 diabetes, you are covered for clinically needed genetic testing provided by Bupa Occupational Health Limited. Need to know ■ The cost of the testing will be covered in full. ■ Your policy excess or co-payment, if you have either, and allowances do not apply to this benefit. ■ The cost of this benefit that is paid for by your policy will not affect your no-claims discount or Low Claims Bonus (if either apply to your policy). ■ The tests you're offered will depend on your age and clinical risk factors. ■ A GP appointment to discuss your results is included.

P5. Other preventive interventions following assessment or genetic testing

Description	Cover
P5a Preventive coaching	If an assessment (benefit P1) or genetic testing shows you are at increased risk of developing breast cancer, cardiovascular disease or type 2 diabetes, and a Bupa healthcare professional recommends it, you are covered for up to two remote lifestyle coaching sessions, provided by Bupa Occupational Health Limited. This is covered if clinically needed each time you use the prevention pathways. Need to know ■ The cost of the preventive coaching will be covered in full. ■ Your policy excess or co-payment, if you have either, and allowances do not apply to this benefit. ■ The cost of this benefit that is paid for by your policy will not affect your no-claims discount or Low Claims Bonus (if either apply to your policy).
P5b Preventive weight-management plan	If an assessment (benefit P1) or genetic testing shows you are at increased risk of developing breast cancer, cardiovascular disease or type 2 diabetes, and a Bupa healthcare professional recommends it, you are eligible to access Bupa's preventive weight-management plan provided by Bupa Occupational Health Limited. This is covered once in your lifetime. You are covered for: ■ a GP appointment to assess whether weight-loss medication is right for you, and ■ £100 towards the cost of each of your first four weight-loss medication prescriptions. Need to know ■ Exclusion 14 'Outpatient drugs, dressings, complementary and alternative products' does not apply to this benefit. ■ Any prescription costs above the £100 towards your first four weight-loss medication prescriptions aren't covered. ■ Your policy excess or co-payment, if you have either, and allowances do not apply to this benefit. ■ The cost of this benefit that is paid for by your policy will not affect your no-claims discount or Low Claims Bonus (if either apply to your policy).
P5c Follow-up appointments	If an assessment (benefit P1) or genetic testing shows you are at increased risk of developing cardiovascular disease or type 2 diabetes, you are covered for the following if clinically needed each time you use the prevention pathways: ■ one follow-up appointment with a Bupa healthcare professional at a Bupa Health Centre, including a blood test, and ■ one follow-up appointment with a Bupa GP. Need to know ■ Any follow-up appointment will take place at least six months after you receive your results from an assessment (benefit P1) or genetic testing. ■ The cost of the follow-up appointment will be covered in full. ■ Your policy excess or co-payment, if you have either, and allowances do not apply to this benefit. ■ The cost of this benefit that is paid for by your policy will not affect your no-claims discount or Low Claims Bonus (if either apply to your policy).

Your health insurance agreement

This addendum together with your **membership certificate**, policy guide and any confirmation of **special conditions** forms part of our health insurance **agreement** with you. Some words in this addendum are in bold type. This is because they have a specific meaning which we explain in the 'What some of the words and phrases in this guide mean' section of your policy guide. If there is a conflict between this addendum and the policy guide this addendum applies but only in relation to the prevention pathways.

The prevention pathways are provided by Bupa Occupational Health Limited. Registered in England and Wales with registration number 631336. Registered office 1 Angel Court, London EC2R 7HJ.

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