

Our complete guide to...

International Health Insurance

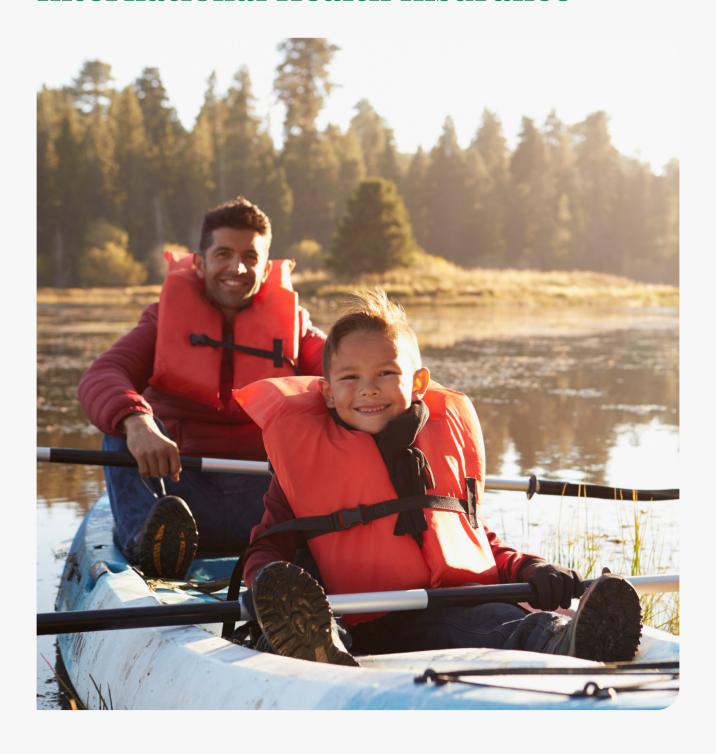










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About this guide

Purchasing health insurance can be confusing. To complicate things further, the experience of healthcare varies dramatically across the globe; what works in one country won't necessarily work in others! With this guide, you can learn the basics of health insurance & choose the right plan for you & your family.

Just to let you know—you won't find complete information for our plans in this guide, nor the full T&Cs, limitations, and exclusions that would apply if you purchase one. These can be found in the personal health plan agreement, which we suggest you read together with this guide. All the benefits in this guide are per member per policy year, unless stated otherwise. Some benefit limits are stated in multiple currencies—the currency that applies to you is the currency in which you pay your premium. Before we begin, here's an explanation of some of the terms we use in this guide.



There are many providers and health plans out there, each with different benefits, service promises & jargon. At William Russell, we help you build a plan tailored specifically to you.

Natalie Harris
Policy Services Manager

Country of residence

The country where you'll be living & working, or spending most of your time

Country of nationality

The country that issues your passport

Member

When you purchase a health insurance policy, you become a member of William Russell

Expat insurance

We help you access private healthcare around the world

Health plan

The health plan you choose sets out the limits & restrictions on the treatment you can receive

Policy year

The duration of your health insurance policy (usually one year)

Benefit

A specific medical treatment or medical service that is recognised by a health plan & covered up to a specified limit

Waiting period

The length of time you must be covered by your plan before you can claim for a particular benefit

Inpatient

Someone who's been formally admitted to a hospital for medical treatment, staying in a hospital bed for at least one night

Daypatient

Someone who's been formally admitted to a hospital for medical treatment, but doesn't stay overnight

Outpatient

Someone who visits a doctor, specialist, or receives minor treatment, but who is not formally admitted to the hospital or clinic

Post-hospital

The period after your discharge from hospital, during which you might attend consultations or receive follow-up treatment as an outpatient



Why international health insurance?

International health insurance gives you access to private healthcare around the world. While most domestic health insurance policies only cover you in one country, international policies cover you in multiple (or even all) countries. They're great for people who live & work abroad or spend lots of time travelling. Some international policies also include emergency medical evacuation.

International health insurance helps to minimise any undue anxiety, distress or complications when you need access to healthcare. With an international health insurance policy, you'll generally have access to private hospitals and clinics, with doctors who speak good English.

Some people receive health insurance from their employer, but many purchase personal policies for themselves and their family. When it comes to selecting your provider, you'll find plenty of choice. Some providers are giant domestic insurance corporations, selling international plans as a side-line. Some are local outfits, selling cheap domestic policies with limited international cover. But you'll also find providers for whom international health insurance is a specialism.

Whichever provider you select, the most important thing is that you make an informed choice. Bear in mind that plans are not always directly comparable, and that providers have different standards of customer service and treat members differently when they make a claim.



The helpful and friendly service from your team is very much appreciated and they make the process so smooth and hassle free. I don't even consider other insurance providers because your team is so good.

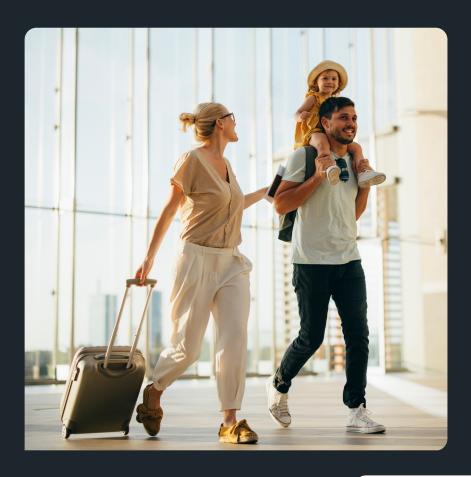
G.B., MalaysiaMember with William Russell



You may think health insurance is only about providers paying your medical bills, but there's much more to membership with William Russell. When you need medical treatment at home, it's a stressful experience—let alone when you need it in a foreign country, with unfamiliar hospitals and doctors. Our health insurance policies get you access to top-rated hospitals and doctors, helping you benefit from the latest diagnostic techniques and medical treatments.



With us, your health insurance policy is international. That means you'll have cover where you live and work, when you're travelling abroad, and when you make visits back home. Our policies put you in charge of your health, with cover for the latest medical treatments, freedom to access private healthcare internationally & our trademark personal service. We put our members at the heart of everything we do, making sure they have the best healthcare experience.



Our obligation is to our members.

We're independently owned and run—we're free from the demands of shareholders and investors.



We believe in people

Some insurers rely on AI and Big Data to do their work for them. We think differently. Healthcare is a highly personal experience, so it deserves a personal service. We're a team of real people, at the end of a phone call when you really need us. We don't hide behind call centres.



We're committed to sustainability

Healthcare is expensive, and—sadly—costs are on the up. We do everything possible to spread this inflation fairly. We calculate premiums with a long-term, sustainable pricing model, and we give you tailoring tools to help reduce your premium without significantly compromising your cover.

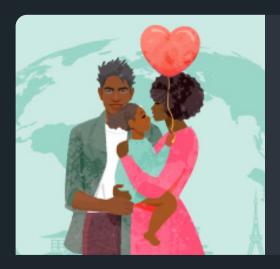


Transparency matters to us

Insurance is about trust, so we believe in being fair and open. This belief informs our idea of healthcare as a partnership between our members and us. That's why we're completely upfront with our health insurance, and we want you to understand precisely what you're buying.



Five reasons to join us



International health insurance

We're your healthcare partner for modern life

We take a different approach to health insurance. By staying close to our members, we help them take charge of their own healthcare. We'll help you choose the right health plan and, when you need medical treatment, we'll work closely with your hospital or clinic to make sure you're home and healthy as soon as possible.

Best hospitals & doctors

With our health plans, you'll have access to top-rated hospitals and doctors within the coverage zone you've selected. We also have over 40,000 hospitals in our worldwide medical network. If you're admitted to a hospital in our network, we'll settle your bills with the hospital directly, so you won't be left out-of-pocket. With our membership card, you can benefit from fast-tracked outpatient treatment across hospitals in Asia.

Benefits to keep you healthy

Our product teams keep an eye on global healthcare, looking out for breakthroughs in medical science and monitoring trends in the countries where our members live. We make a point of giving our members comprehensive benefits for cancer treatment (including genome testing and counselling), while we offer generous support for mental health treatment.

International cover

The best thing about a health insurance policy from William Russell is that your cover need not stop when you travel abroad or return home. Our policies are international, and you'll have access to the best hospitals and doctors within your coverage zone.

Personal service

William Russell exists to give you a better healthcare experience, and we pride ourselves on the people who make that happen. From medical professionals to customer service experts, our teams are made of people who live and breathe healthcare around the world.

New member promotions

An overview of our promotions for our health & protection products

→ Health

20% lifetime discount in certain countries

Lifetime discount

- 20% discount applied on first-year premium and for as long as you stays with us
- Discount application is automatic you don't need to do anything

Eligible countries

New members resident in the following countries: Cambodia, Laos, Malaysia, Myanmar, Philippines, Vietnam, China, Japan, Macao, Mauritius, Malawi, Botswana, Chile, Costa Rica, India.

→ Health

15% lifetime discount in all other countries

Lifetime discount

- 15% discount applied on first-year premium and for as long as you stays with us
- Discount application is automatic you don't need to do anything

Eligible countries

New members in all countries except:

- Countries eligible for 20% lifetime discount
- Hong Kong, UK, UAE, Singapore, Thailand, Mexico
- Excluded countries (e.g., Syria, Iran)

→ Health

16% lifetime discount in the UAE only

Lifetime discount

 16% discount applied on first-year premium and for as long as you stays with us

 Discount application is automatic you don't need to do anything.





Three steps to choosing the right health plan



Select your core plan

All our plans help you access private healthcare around the world, but each does so in a different way. We've named them after metals to make it easier to compare. The Bronze plan has lower premium but place restrictions on outpatient treatment. The Silver and Gold plans cover outpatient treatment in full, but they're more expensive.

1

2



Customise your plan

Make your plan suit your needs with our range of optional benefits and optional plan, including cashless access to outpatient treatment, boosted well-being benefits, cover for dental treatment, and personal accident insurance.

3



Tailor your plan

Use our tailoring tools to finalise your plan and make your premium work for you. Then, you're ready to apply!



All our plans come with a 30-day money back guarantee

If you're not happy with your health insurance policy or the service we provide, and you haven't made a claim, then we'll refund the premium you have paid with no question.





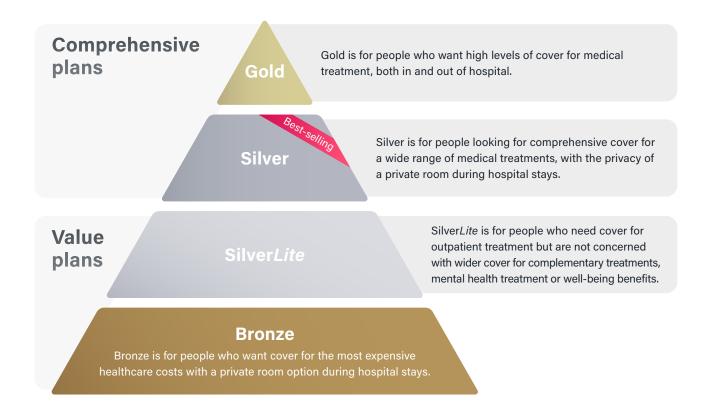
STEP 1

Select your core plan

All our plans help you access private healthcare around the world, with each one doing so in a different way. But there are some things we never compromise on.

All plans include international cover, generous benefits for hospital costs, cancer treatment, and emergency medical evacuation.





Gold

Our top plan, with the highest levels of cover and most comprehensive benefits. You have all the benefits of Silver, plus cover for dental care and maternity costs, and a cash benefit upon diagnosis of cancer.



Silver

Our most popular plan, with all the benefits of Bronze and Silver*Lite* but with no limit to your cover for outpatient treatment. You also have cover for complementary therapies, mental health treatment, and well-being benefits.



Silver*Lite*

A low-cost, international health plan with most of the benefits of Bronze, plus up to US\$10,000 cover for outpatient treatment including US\$3,500 cover for primary medical care and the monitoring and maintenance of chronic conditions. There is also cover for hospital treatment needed as a result of complications of pregnancy.



Bronze

Our inpatient plan, giving you all the essential health benefits—plus a private room option when you're admitted to hospital. Cover for outpatient treatment is limited to treatment you receive within 90 days of your discharge from hospital, but you're always covered in full for cancer treatment and advanced diagnostic tests.





A closer look at the key benefits

From prevention to cure, we're here to give you a better healthcare experience, we're building a healthcare experience that's both personal and fair.

All the benefits in this guide are per member per policy year, unless stated otherwise. Some benefit limits are stated in multiple currencies. The benefit limits stated in the benefits comparison table of each plan are in US dollars, but the plans are also available in pounds sterling and Euros. The currency that applies to you is the currency in which you pay your premium.



Hospital costs

All our plans provide comprehensive benefits for when you're admitted to hospital for an illness or injury as an inpatient or daypatient.

Hospital treatment

Full cover for surgeon's and anaesthetists' and doctors' fees, nursing care, drugs and surgical dressings, operation theatre charges and intensive care, pathology, diagnostic tests and physiotherapy. All plans.

Advanced diagnostic tests

Full cover for diagnostic tests such as MRI, CT, and PET scans. All plans.

Private accommodation

A standard private room with an en-suite bathroom or shower room. Silver & Gold plans.

Semi-private accommodation

A shared room with an en-suite bathroom or shower room. Bronze & Silver*Lite* plans.

Additional benefits

Cover for road ambulances and for a parent's accommodation in hospital on all plans, with a cash benefit when you receive treatment for which the hospital makes no charge. All plans.

Cancer treatment

Cancer can affect you anywhere, at any time. We take its diagnosis and treatment very seriously, and our claims team is there to support our cancer patients throughout their treatment. We also cover pioneering treatment such as tumour genome testing.

Cancer care

All plans provide full cover for cancer treatment, including chemotherapy, radiotherapy, immunotherapy, and drugs. There is also full cover for genome testing to sequence the genes of cancer cells. All plans.

Genetic testing and preventive treatment

We'll pay for genetic tests for the BRCA1/ BRCA2 genes, plus preventive treatment such as mastectomies. Silver & Gold plans.

Cash benefit upon diagnosis

The Gold plan provides a lump-sum benefit if you're diagnosed with a malignant tumour once you've been insured for 6 months. Gold plan only.

Additional benefits

Cover for wigs following chemotherapy, and counselling & consultations with a dietitian following cancer treatment. All plans.





Outpatient treatment

These are the benefits for everyday medical costs that are most used by our members, including primary care, physiotherapy, and complementary therapies.

Primary care

With a Silver or Gold plan you'll have full cover for doctor & specialist visits, prescribed drugs and dressings, and diagnostic tests. With Silver*Lite* your cover is limited to US\$1,500 or £1,000 or €1,125, while cover under the Bronze plan is limited to care you receive within 90 days following your discharge from hospital. Full cover with the Silver & Gold plans, limited cover with the Silver*Lite* plan.

Physiotherapy

With a Silver or Gold plan you'll have full cover for physiotherapy, while with Silver*Lite* you're covered up to US\$250 or £165 or €188. With a Bronze plan your cover for physiotherapy is limited to care you receive within 90 days following your discharge from hospital. Full cover with the Silver & Gold plans, limited cover with the Bronze & SilverLite plans.

Well-being and preventive care

Cover for health checks such as blood pressure, diabetes, cancer, and hearing tests, along with cover for routine vaccinations & booster injections, once you've been insured for 6 months. Silver & Gold plans only.

Chronic conditions

Regular consultations, tests, and prescribed medication required to monitor and maintain the stability of chronic conditions. Silver & Gold plans (with limited cover under the SilverLite plan).

Additional outpatient benefits

Cover for complementary treatments on the Bronze, Silver, and Gold plans, with cover for hormone replacement therapy and traditional Chinese medicine on the Silver and Gold plans only.

Mental health treatment

Mental health is an important part of our lives, and we provide benefits for our members living and working around the world who may be isolated from their family and friends.

Mental health

Generous benefits for mental health treatment with registered psychiatrists or psychologists once you've been insured for 12 months, with cover when you're admitted to a mental health unit, outpatient consultations, and cover for mental health medication. Bronze, Silver & Gold plans (outpatient cover on the Bronze plan limited to post-hospital treatment).

Maternity care

Routine maternity care and routine care of newborns

Cover for pre-natal and post-natal tests, natural childbirth, childbirth by planned caesarean section, basic newborn healthcare costs, and home birth once you've been insured for 12 months. Gold plan only.

Additional benefits

All plans provide cover for complications of pregnancy, while the Gold plan provides cover for complications of childbirth and treatment for congenital/hereditary conditions for newborn babies. Once you've been insured for 12 months.

Emergency medical evacuation

Emergency medical evacuation is a key feature distinguishing international health insurance from domestic insurance. If you have a medical emergency and you need treatment, we'll get you out of there by road, sea or air. Evacuation cover comes as standard on all our health plans.

Medical helpline

If you have a medical emergency that requires immediate medical assistance, you can contact our 24-hour helpline. All plans.

Medevac Basic

We'll arrange your emergency evacuation should you suffer a life-threatening or limb-threatening condition requiring hospital treatment that cannot be provided locally. All plans.



Key benefits	Bronze	Silver <i>Lite</i>	Silver	Gold
Annual benefit limit	US\$1,500,000	US\$1,500,000	US\$2,500,000	US\$5,000,000
Hospital costs				
Hospital accommodation	Semi-private room (option for private room)	Semi-private room (option for private room)	Private room	Private room
Hospital treatment	Full cover	Full cover	Full cover	Full cover
Advanced diagnostic tests	Full cover	Full cover	Full cover	Full cover
Cancer treatment				
Cancer genome testing	Full cover	Full cover	Full cover	Full cover
Preventive cancer treatment (12-month waiting period)	No cover	No cover	US\$25,000, with a 20% co-insurance	US\$40,000
Cancer treatment	Full cover	Full cover	Full cover	Full cover
Mental health treatment				
Lifetime limit for treatment	US\$50,000	n/a	US\$75,000	US\$100,000
Inpatient & daypatient mental health treatment (12-month waiting period)	30 days	No cover	Cover up to the lifetime limit	Cover up to the lifetime limit
Outpatient mental health treatment (12-month waiting period)	10 consultations (post-hospital treatment)	No cover	10 consultations	10 consultations
Outpatient mental health medication (12-month waiting period)	US\$500 (post-hospital treatment, with 20% co-insurance)	No cover	US\$500, with 20% co-insurance	US\$500, with 20% co-insuranc
Outpatient treatment				
Annual limit for treatment	No limit	US\$5,000 (option to extend up to US\$10,000)	No limit	No limit
Primary medical care	Post-hospital treatment	US\$1,500 (option to extend up to US\$3,500)	Full cover	Full cover
Emergency ward treatment	Accident cover only	Up to the annual limit	Full cover	Full cover
Outpatient surgical procedures	Full cover	Up to the annual limit	Full cover	Full cover
Complementary treatments	10 sessions (post-hospital treatment)	No cover	10 sessions	15 sessions
Physiotherapy	US\$1,000 (post-hospital treatment)	US\$250	Full cover	Full cover
Monitoring & maintenance of chronic conditions	No cover	Up to primary medical care benefit limit	Full cover	Full cover
Well-being benefits				
Preventive health (6-month waiting period)		US\$400	US\$1,200
/accinations for adults	No cover	No cover	US\$300	US\$500
Well-child benefit (6-month waiting period)		US\$400	US\$800
Dental costs				
Emergency restorative treatment received as an inpatient	Full cover	US\$5,000	Full cover	Full cover
Emergency restorative treatment received as an outpatient	No cover	No cover	US\$500	US\$1,000
Dental Basic (6-month waiting period)	No cover	Optional	Optional	US\$1,500
Dental Plus (10-month waiting period)	No cover	No cover	Optional	Optional
Maternity costs (12-month waiting per	riod)			
Routine maternity care and routine care of newborns	No cover	No cover	No cover	US\$18,500
Complications of childbirth	No cover	No cover	No cover	Full cover
Complications of pregnancy affecting the mother	US\$4,800	US\$10,000	US\$15,000	Full cover
Freatment for congenital conditions or nereditary conditions for newborn babies no waiting period)	s No cover	No cover	US\$10,000	US\$100,000
Expat benefits				
Medevac Basic	Full cover	Full cover	Full cover	Full cover

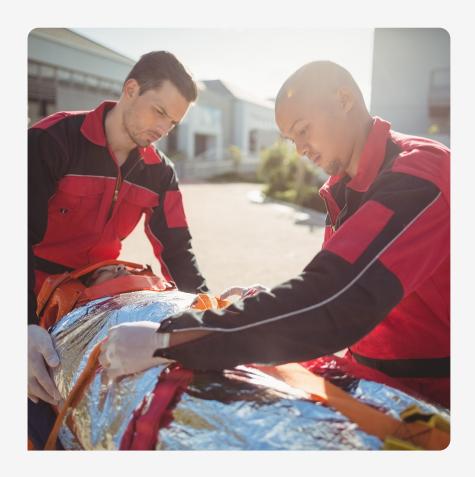


STEP 2

Customise your plan

Make your plan work for you with our range of optional benefits and plans, including the personal accident plan and dental care options.

All the benefits in this guide are per member per policy year, unless stated otherwise. Some benefit limits are stated in multiple currencies—the currency that applies to you is the currency in which you pay your premium.



Emergency medical evacuation.

It is a vital part of any expat's medical coverage, especially if you reside in a country with limited medical services that may not be up to the standards you would expect at home.

Medevac Plus

The Medevac Plus option gives you greater peace of mind for your life abroad. Medevac Plus gives you the following benefits, in addition to the standard benefits for emergency medical evacuation. It's available with all plans.

Lower threshold for evacuation

We'll evacuate you if you need advanced diagnostic tests or cancer treatment such as radiotherapy or chemotherapy that cannot be provided locally.

Advanced repatriation

We'll repatriate you to your country of residence, or your country of nationality if within your coverage zone.

Additional costs for a companion

If you don't have anyone to accompany you on your evacuation, we'll pay for someone to fly from anywhere in the world to be with you. We'll also pay US\$250 towards the cost of hotel expenses.



When you need medical treatment at home, it's a stressful experience - let alone when you need it in a foreign country, with unfamiliar hospitals & doctors. That's where an international insurance policy can prove invaluable.

Virgil Compton
Product Manager



Dental options

All the plans come with some cover for dental treatment. With the SilverLite, Silver and Gold plans, you can add more benefits

Just to let you know—the Dental Basic option is subject to a 6-month waiting period, while the Dental Plus option is subject to a 10-month waiting period.



Plan	Silver <i>Lite</i>	Silver	Gold
Dental Basic Cover for screening, scaling, polishing, sealing, fillings, simple extractions & root canal treatment	US\$500 or £330 or €375 with 20% co-insurance	US\$1,000 or £660 or €750 with 20% co-insurance	US\$1,500 or £1,000 or €1,125 (standard on the Gold Plan)
Dental Plus* Cover for dentures, denture repair, dental bridges, crowns, inlays, onlays & dental implants *Dental Plus is available with the Silver plan onl	Not available y if you also purchase Dental Basic.	US\$1,500 or £1,000 or €1,125 with 20% co-insurance	US\$2,000 or £1,330 or €1,500 with 20% co-insurance



Cashless access to outpatient treatment

Cashless access is an arrangement by which we settle your medical bills directly with your hospital or treating doctor. This means you won't be left out-of-pocket for your treatment, and you won't have to submit a claim to us. That's why cashless access is also known as 'fast-track payment' or ' direct billing'.

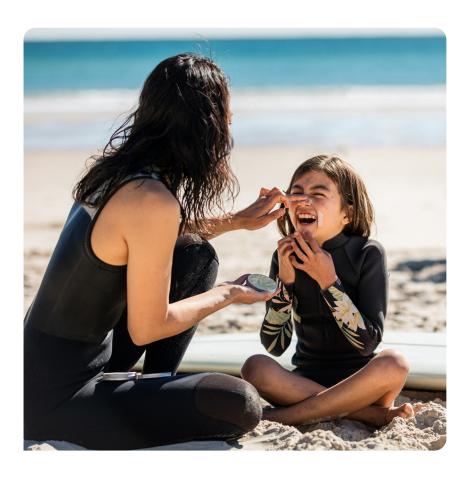
What's included on your plan as standard?

Cashless access is standard on all our health plans when you're admitted to a hospital in our medical network for inpatient or daypatient treatment. We have cashless access arrangements with over 40,000 hospitals, clinics, and medical facilities in our worldwide medical network.

What comes with the option for Cashless access to outpatient treatment?

You can pay for doctor visits, specialist consultations, and other outpatient treatment with your William Russell membership card. We'll settle your bills directly with the doctor or clinic*, meaning you won't be left out-of-pocket for your treatment and you won't have to make a claim to us. Cashless access to outpatient treatment is free, but it's only available to members with certain plans in certain countries. You'll need a Silver*Lite*, Silver or Gold plan, with a nil or US\$50 / £33 / €45 per claim excess. Cashless access to outpatient treatment is available at clinics throughout Asia, including Hong Kong and China.

^{*}If you have an excess, you'll need to pay that at the clinic.



Personal accident plan

The optional personal accident plan is available with all health plans. It's a great way to increase the cover provided by your health plan without breaking the bank.

Cash lump-sum benefit

We'll pay you a cash lump-sum benefit if an accident results in your death, loss of sight, loss of limb or your permanent and total disablement within 2 years of the accident.

Premium examples

The following examples are based on a healthy adult who has an office job and doesn't participate in hazardous activities.

Benefit	Premium
US\$75,000 or £50,000 or €75,000	US\$9.45 or £6.13 or €9.45 per month
US\$150,000 or £100,000 or €150,000	US\$18.90 or £12.26 or €18.90 per month
US\$225,000 or £150,000 or €225,000	US\$28.35 or £18.39 or €28.35 per month
US\$300,000 or £200,000 or €300,000	US\$37.80 or £24.52 or €37.80 per month
US\$375,000 or £250,000 or €375,000	US\$47.25 or £30.65 or €47.25 per month



Accidents come in all shapes and sizes, and for families living abroad, the consequences can be disastrous. Personal accident insurance can provide a safety net for you and your loved ones in the aftermath of a serious accident.

Joe HoldenRelationship Manager



STEP 3

Tailor your plan

There's a range of tools you can use to tailor your plan to your needs. They will help you put the finishing touches on your health plan, but they can also be used to reduce your premium!



An excess is the fixed cash amount you pay towards a claim.

You must choose one when you first apply for your health insurance policy. You pay the excess for each medical condition, per policy year.

Excesses

'Per claim' excess

This is the amount you pay each time you make a new claim for a new medical condition.

Example of a per claim excess

Mrs Smith purchases a health plan with a US\$50 per claim excess. Later that year, she breaks her arm and visits her doctor for a severe cold. Since these two medical conditions are unrelated, Mrs Smith pays the excess for each condition.

Mrs Smith's excess is 'per claim', so she won't pay the excess a second time when she has follow-up consultations for her fractured arm. But if the programme of follow-up treatment were to span the renewal date of her health insurance policy, she would need to pay the US\$50 excess again upon renewal.

'Per annum' excess

This is the total amount you'll be out-of-pocket in a single policy year. For example, if you choose a US\$500 per annum excess, we will not pay the first US\$500 of medical expenses you incur during your policy year.

Example of a per claim excess

Mr Brown purchases a health insurance policy with a US\$5,000 per annum excess. Later that year, he stubs a toe and visits a clinic for tests and treatment for a minor cancerous growth.

Mr Brown's excess is 'per annum', so his policy will not cover the first US\$5,000 of medical expenses he incurs during each policy year. It is unlikely that the treatment Mr Brown receives for his stubbed toe will exceed US\$5,000, but the costs of his cancer tests and treatment will soon take him past US\$5,000 for the year—at which point his policy will start covering his medical expenses.

If Mr Brown's cancer treatment programme were to span the renewal date of his health insurance policy, we would not cover the first US\$5,000 of medical expenses he incurs during his new policy year—even though Mr Brown would not be claiming for a new medical condition.



We see the excess as a partnership between you and us.

The right excess for you depends on your needs.

A higher excess helps us reduce our spending on medical treatment, and we pass on savings to your premium. So—as a rule of thumb, a higher excess means a lower premium. Here are a couple of considerations that members typically make when choosing an excess:

- Catastrophe Some members might choose an extremely high excess (e.g., US\$5,000 per annum). Such an excess means their health plan serves as protection only against the most serious and expensive catastrophic health issues, such as cancer or hospital surgery. Most likely, members with a US\$5,000 or US\$10,000 excess will not be reimbursed for outpatient treatment and other low-cost treatments because these medical expenses are unlikely to exceed the excess. As such, a 'catastrophe' excess is typically taken with a Bronze plan, which doesn't have much cover for outpatient treatment.
- Maximum cover For members wanting assurance that all their healthcare costs will be paid in full, both in and out of hospital, the nil excess might be best. Since these members won't be helping us to reduce our spending on medical treatment, there will be no savings for us to pass onto their premiums. A nil or US\$50 per claim excess is typically taken out with a Silver or Gold plan, which provides full cover for outpatient treatment.
- Balanced Most members opt for somewhere in the middle. They choose an excess that gives an acceptable fixed amount they'll pay for each medical condition, in exchange for a reasonable saving on their premium.

Excess options	Bronze	Silver <i>Lite</i>	Silver	Gold
Nil	Ø	Ø	Ø	Ø
Per claim options				
US\$50 /£33 /€45				
US\$100 /£67 /€90		Ø	Ø	Ø
US\$800 /£530 /€750	Ø	Ø	Ø	Ø
US\$1,600 /£1,060 /€1,500				
Per annum options				
US\$250 /£167 /€225				
US\$500 /£330 /€450	Ø	Ø	Ø	Ø
US\$1,000 /£660 /€1,000	Ø	Ø	Ø	Ø
US\$2,500 /£1,660 /€2,500	Ø	Ø	Ø	Ø
US\$5,000 /£3,330 /€5,000	Ø	Ø	Ø	Ø
US\$10,000 /£6,660 /€10,000	Ø	Ø	Ø	Ø

The coverage zone is a feature of international health insurance that you don't typically find in domestic insurance. In short, it's the geographic or territorial limits of your plan, specifying in which countries you're covered and which countries you're not.



Coverage zones

Every health insurance policy from William Russell has an coverage zone. As a rule of thumb, a more restrictive zone means a greater saving on your premium.

There are six zones, and you can choose any zone with any of our health plans (though Zone 3 is only available to residents of Indonesia).

Zone 1

Worldwide cover, with restricted cover in the USA

Zone 2

Full cover in most countries, with restricted cover where private healthcare is expensive but no cover in the USA

Zone 3

Special coverage zone for residents in Indonesia, with restricted cover where private healthcare is expensive but no cover in the USA

Zone 4

Full cover in Africa & Indian Subcontinent, with restricted cover elsewhere but no cover in the USA

Zone 5

Full cover in Africa (except South Africa) & Indian Subcontinent, with restricted cover elsewhere but no cover in the USA

Zone 7

Full cover in South East Asia only (except Thailand and Singapore).



USA cover.

None of the coverage zones includes cover in the USA as standard. Private healthcare in the USA is extremely expensive and most of our members don't need cover there.

This option might be useful if you make regular business trips or holidays into the USA. Alternatively, if you're a US citizen and you're lapsing your domestic insurance, you might want some cover for trips home.

It's important to note that this option only gives you cover on temporary trips to the USA. However, there is no limit to the number of trips you can make in a single year. It is available only if you have selected Zone 1 as your coverage zone.



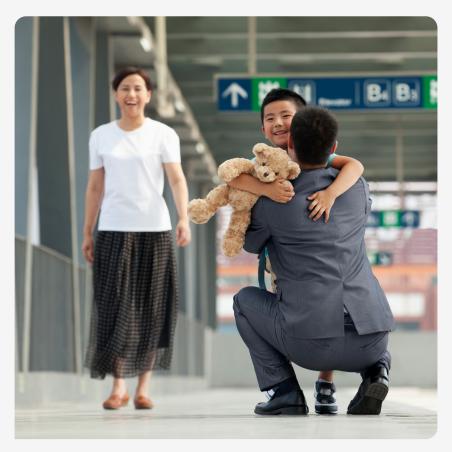
International health insurance helps to minimise any undue anxiety, distress or complications when you need access to healthcare.

Joe Holden Relationship Manager

USA-45

Cover for temporary trips of up to 45 day, up to US\$250,000 per policy year. Within this limit, we will pay:

- Up to US\$100,000 for elective medical treatment
- Up to US\$250,000 for accident & emergency treatment

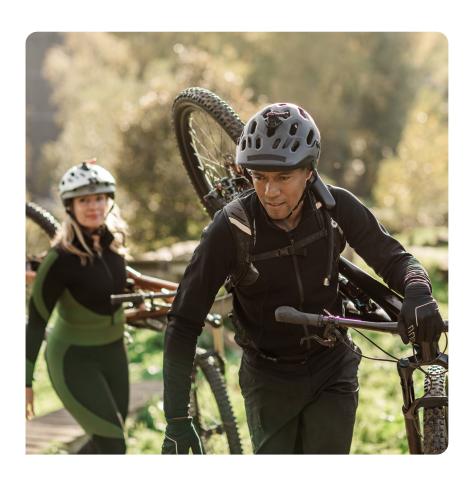


Payment frequencies

When you apply for a policy, you choose the frequency with which you pay your premium.

You can pay annually, half-yearly, quarterly or monthly.

Paying your premium annually is the cheapest option overall. If you pay half-yearly, you'll pay a surcharge of 3%. If you pay quarterly or monthly, you'll pay a surcharge of 5%.



Medical underwriting

When you apply for a health insurance policy, we assess your medical records, including any medical conditions or injuries you have suffered in the past.

This process is known as medical underwriting. It helps us decide the terms on which we can offer you cover. There are three types of underwriting (there's a different application form for each type of underwriting, with different health declarations and medical questions):

Full medical underwriting

This means your policy will not cover the treatment of preexisting medical conditions, unless you've told us about them & we agree to cover them.

A policy with full medical underwriting is slightly cheaper than a policy with moratorium or switch underwriting.

Moratorium underwriting

A bit like full medical underwriting, but any pre-existing medical conditions may be eligible for cover if you haven't consulted any doctor for treatment or advice or taken medication for a certain period. Policies with moratorium underwriting are more expensive than plans with full medical underwriting.

Switch underwriting

This means that we will transfer any special terms or exclusions applicable to your policy with a previous provider to your policy with William Russell. Switch underwriting is also known as 'continued personal medical exclusions', or CPME. Policies with switch underwriting are more expensive than policies with full medical underwriting.



How our premiums work



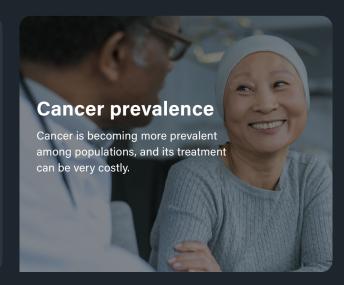
What's happening

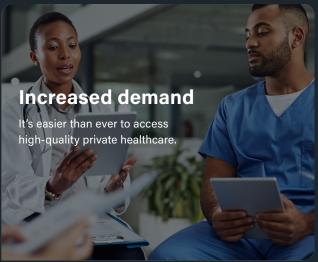
International health insurance

We're always working to make our premiums fair and sustainable for our members, but this objective has taken on greater importance as the cost of private healthcare around the world rises. This healthcare inflation is driving up premiums from all insurance providers; for our part, we're doing everything we can to spread the inflation fairly.

Medical inflation

Most countries have suffered from higher general inflation, probably due to fiscal and monetary stimuli following the COVID-19 pandemic. General inflation has been exacerbated by higher energy prices following the war in Ukraine. Inflation in the healthcare sector typically tracks higher than general inflation. This means we're seeing much higher costs when our members claim for private healthcare, which in turn puts pressure on insurance premiums.





Cost of new treatments

We're witnessing a golden age of medicine, with astonishing breakthroughs in gene editing, immunotherapy, and the use of artificial intelligence in an increasingly broad range of treatments. While these breakthroughs improve clinical outcomes for patients, they drive up the costs of treatments. Higher costs mean more expensive claims for health insurance providers.



What we're doing to keep premiums as low as possible.

We calculate your premium according to your age

Your age is the most important factor when we calculate your premium. Each age has a specific premium value. But this won't be the premium you see on your quote documents or renewal invitation: there are many other factors that affect your premium (e.g., where you live, which excess you select).

Our pricing model is highly sophisticated, but as a rule of thumb the older you are the higher your premium will be.



Premiums change each year

Given we calculate your premium according to your age, your premium will increase each year.

Unfortunately, this is an inescapable feature of health insurance. As we age, we're more likely to need healthcare. But we do our best to keep the increase between ages as smooth as possible.



Making a claim doesn't affect your renewal premium

You can renew your health insurance policy each year regardless of the number of claims you make or the value of those claims. What's more, any claims you make will not affect your renewal premium.

Different premiums for different countries

The cost of hospital treatment for the same medical condition varies between countries (and even within countries). For this reason, your premium is affected by your country of residence. Private healthcare in Africa and the Indian Subcontinent, for example, is relatively inexpensive, so members living in these regions can expect lower premiums. The opposite is true for cities like Singapore or Hong Kong, where the cost of private healthcare is very high.



What our members say about us



Platinum Trusted Service Award

2025

feefo •••



I was very happy with the service provided from William Russell. You dealt with any queries and the processing of the claims efficiently, and quickly.

Any of the members of the team I have spoken to have always been very helpful, polite, and responsive.



I would like to take the opportunity to thank you personally for the good work you and your team have carried out in handling our claims.

We have found your **personal** intervention to be of great assistance and would like to recommend your company.

G.L., Egypt

R.F., UAE



I have always had a limited impression of insurance companies, but your company definitely helped to change this impression - extremely impressed with William Russell and definitely do not hesitate to recommend!



Thank you, it's reassuring that when I have this surgery, the money side of things is being handled in a completely professional manner.

I really appreciate it.



One hears a lot of complaints that insurance companies dedicate most effort to refusing claims, but we feel that you did all you could to accommodate us.

Thank you - we will certainly recommend William Russell to others.

D.P., Thailand



M.B., Indonesia



We were extremely happy with the way that our Claims Advisor dealt with everything.

The level of service made a stressful and difficult time much easier to deal with.

I will certainly be recommending William Russell to my friends and colleagues.

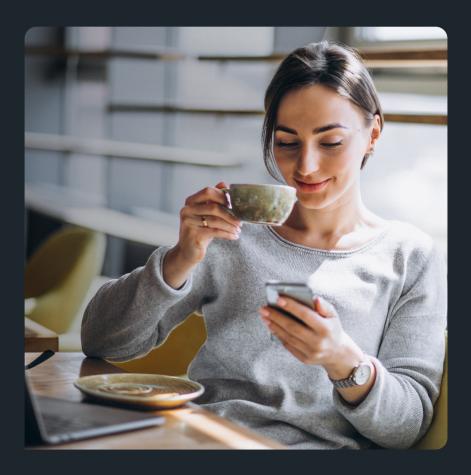


Thanks for your ongoing support... it is of great comfort to know I have good family health insurance cover from very caring and competent organisation.



Our experience with
William Russell has been topnotch. In over 10 years with your
company, we've always been
pleasantly surprised with the
service we receive, so thanks
once again.

N.S., Brunei G.M., Thailand L.B., Malawi



What our industry says about us

At William Russell, our members benefit from our outstanding customer service and contact centre. Our members speak to the same account manager all the time and they get highly personalised support during the time they need it most.





Best International Individual Healthcare Provider

This award celebrates excellence in professional standards and innovation shown by insurance providers to individuals and corporate customers across the disciplines of private medical insurance, well-being, and financial protection.



William Russell have been crowned Intermediary/Affinity Partner of the Year in the ITIJ Awards 2021!

The judging panel of top industry experts singled out William Russell as the winner for our innovative approach to positively transform the IPMI industry.



We take your personal data very seriously. Our systems and practices have ISO 27001 certification and we're GDPR compliant.



We mean different things to different people.

We mean a better healthcare experience for people living & working abroad. We mean financial security for people with futures to safeguard. We mean healthy & happy staff for international businesses. We mean progressive thinking for insurance partners.

But one thing everyone knows us by is the way we work. By putting our members at the heart of everything we do, we're creating an insurance experience that's personal, sustainable & transparent. We're the insurance partner of choice for many people living & working abroad.



Thank you so much - you have put our minds at rest. I very much appreciate the personal touch to your service - this is very rare with insurers and is exactly why we deal with William Russell.

A.K., Indonesia Member with William Russell



We're here to help



Call us on +44 1276 486 477



Email us at sales@william-russell.com



Visit
william-russell.com





This guide refers to health insurance policies starting on or between 01 January 2025 and 31 December 2025. William Russell Europe SRL is registered at Place Marcel Broodthaers 8, B-1060 Saint-Gilles, Brussels and is registered in Belgium with the Financial Services & Markets Authority (no. 0731.975.658 RPM) as a limited liability company with share capital of €30,000. William Russell Europe SRL is a mandated underwriter for AWP Health & Life SA. The UK branch of William Russell Europe SRL is registered at William Russell House, The Square, Lightwater, Surrey, GU18 5SS, UK. The UK branch is authorised & regulated by the Financial Conduct Authority (FCA), reference no. 973067. William Russell Ltd is authorised & regulated in the UK by the FCA, reference number 309314, and is registered in England & Wales at William Russell House, The Square, Lightwater, Surrey, GU18 5SS.

