



Our complete guide to...

International Health Insurance



William
Russell



Platinum Trusted
Service Award

2024

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Table of contents

About this guide	1	
Why international health insurance?	2	
Our obligation is to our members	3	
Five reasons to join us	4	
Three steps to choose the right health plan	5	
Select your core plan A closer look at the key benefits Comparing the plans	6	
Customise your plan Medevac Plus Dental options Cashless access Personal accident plan	11	
Tailor your plan Excesses Coverage zones USA cover Payment frequencies Medical underwriting	15	
How our premiums work	20	
What our members say about us	22	
What our industry says about us	23	
We mean different things to different people	24	



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 plan, 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 plan (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 plans only cover you in one country, international plans 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 plans 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 plan, 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 plans 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 plans 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., Malaysia
Member 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 plans get you access to top-rated hospitals and doctors, helping you benefit from the latest diagnostic techniques and medical treatments.



And with us, your health plan is international. That means you'll be covered where you live and work, when you're travelling abroad, and when you make visits back home. Our plans 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 possible 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 or bot webchats.



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 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 plans, 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 everyday medical care 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 plan from William Russell is that your cover need not stop when you travel abroad or return home. Our plans 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.



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 everyday medical costs. The Silver and Gold plans cover everyday medical costs in full, but they're more expensive.

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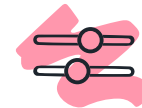


Customise your plan

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.

2

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 plan or the service we provide, and you haven't made a claim, then we'll refund the premium you have paid with no question.



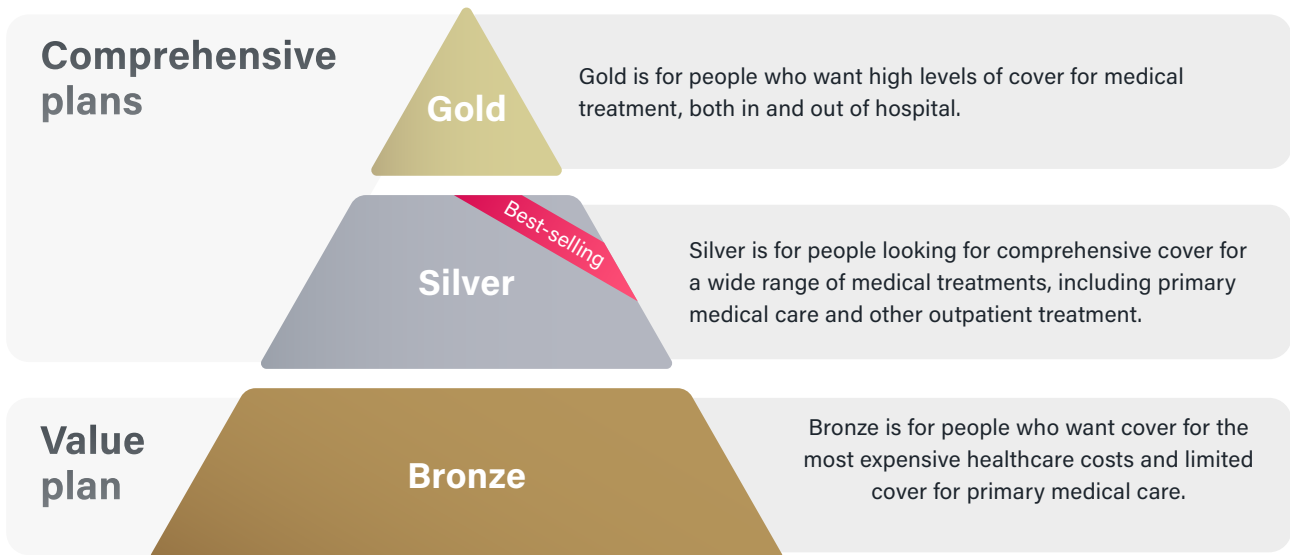


STEP 1

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 but with generous cover for everyday medical costs. You also have cover for complementary therapies, mental health treatment, and well-being benefits.



Bronze

A solid inpatient plan. You have all the essential health benefits such as hospital treatment, hospital accommodation, and cancer care. Cover for everyday medical costs 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 for 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.](#)

General ward accommodation

A bed on a general ward with 3+ beds. [Standard on all plans.](#)

Semi-private or private accommodation

A shared room or a private room, each with an en-suite bathroom or shower room. [Optional on all 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.](#)

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.](#)



Everyday medical costs

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 generous cover for doctor & specialist visits, prescribed drugs and dressings, and diagnostic tests. Cover under the Bronze plan is limited to care you receive within 90 days following your discharge from hospital. [Silver and Gold plans](#), and [post-hospital cover only with the Bronze plan](#).

Physiotherapy

With a Silver or Gold plan you have cover for physiotherapy up to the annual limit for outpatient treatment. With a Bronze plan your cover for physiotherapy is limited to care you receive within 90 days following your discharge from hospital. [Silver & Gold plans](#), and [post-hospital cover only with the Bronze plan](#).

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](#).

Additional everyday 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 childbirth necessitating an emergency surgical procedure 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 plans from domestic plans. If you have a medical emergency and you need treatment, we'll get you out of there by road, sea or air. Medevac cover comes as standard with our international health insurance plan.

Medical helpline

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

Medevac

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	Gold
Annual benefit limit	US\$1,500,000	US\$2,500,000	US\$5,000,000
Hospital costs			
Hospital accommodation	General word (option for semi-private or private room)	General word (option for semi-private or private room)	General word (option for semi-private or private room)
Hospital treatment	Full cover	Full cover	Full cover
Cancer treatment			
Cancer genome testing	Full cover	Full cover	Full cover
Cancer treatment	Full cover	Full cover	Full cover
Mental health treatment			
Lifetime limit for treatment	US\$50,000	US\$75,000	US\$100,000
Inpatient & daypatient mental health treatment (12-month waiting period)	30 days	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)	10 consultations	10 consultations
Outpatient mental health medication (12-month waiting period)	US\$500 (post-hospital treatment, with 20% co-insurance)	US\$500, with 20% co-insurance	US\$500, with 20% co-insurance
Outpatient treatment			
Annual limit for treatment	No limit	US\$20,000	US\$30,000
Primary medical care	Post-hospital treatment with 15% co-insurance	25 consultations with 15% co-insurance	30 consultations
Emergency ward treatment	Accident cover only	Full cover	Full cover
Outpatient surgical procedures	Full cover	Full cover	Full cover
Advanced diagnostic tests	Full cover	Up to annual limit for outpatient treatment	Up to annual limit for outpatient treatment
Physiotherapy	US\$1,000 (post-hospital treatment)	Up to annual limit for outpatient treatment	Up to annual limit for outpatient treatment
Monitoring & maintenance of chronic conditions	No cover	Up to annual limit for outpatient treatment with 15% co-insurance	Up to annual limit for outpatient treatment
Well-being benefits			
Preventive health (6-month waiting period)		US\$300	US\$750
Vaccinations for adults	No cover	US\$150	US\$250
Well-child benefit (6-month waiting period)		US\$200	US\$400
Dental costs			
Emergency restorative treatment received as an inpatient	Full cover	Full cover	Full cover
Emergency restorative treatment received as an outpatient	No cover	US\$500	US\$1,000
Dental Basic (6-month waiting period)	No cover	Optional	US\$1,500
Dental Plus (10-month waiting period)	No cover	Optional	Optional
Maternity costs (12-month waiting period)			
Routine maternity care and routine care of newborns (12-month waiting period)	No cover	No cover	US\$18,500
Complications of pregnancy (12-month waiting period)	US\$4,800	US\$15,000	Full cover
Childbirth necessitating emergency surgical procedure (12-month waiting period)	No cover	No cover	Full cover
Treatment for congenital conditions or hereditary conditions for newborn babies	No cover	US\$10,000	US\$100,000
Expat benefits			
Medevac Basic	Full cover	Full cover	Full cover



STEP 2

Customise your plan

Make your plan work for you with our range of optional benefits and optional plan, including 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 residing 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.



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

Joe Holden
Relationship Manager



Dental options

All the plans come with some cover for dental treatment. With the 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	Gold
Dental Basic Cover for screening, scaling, polishing, sealing, fillings, simple extractions & root canal treatment	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	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

*Dental Plus is available with the Silver plan only if you also purchase Dental Basic.



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'.

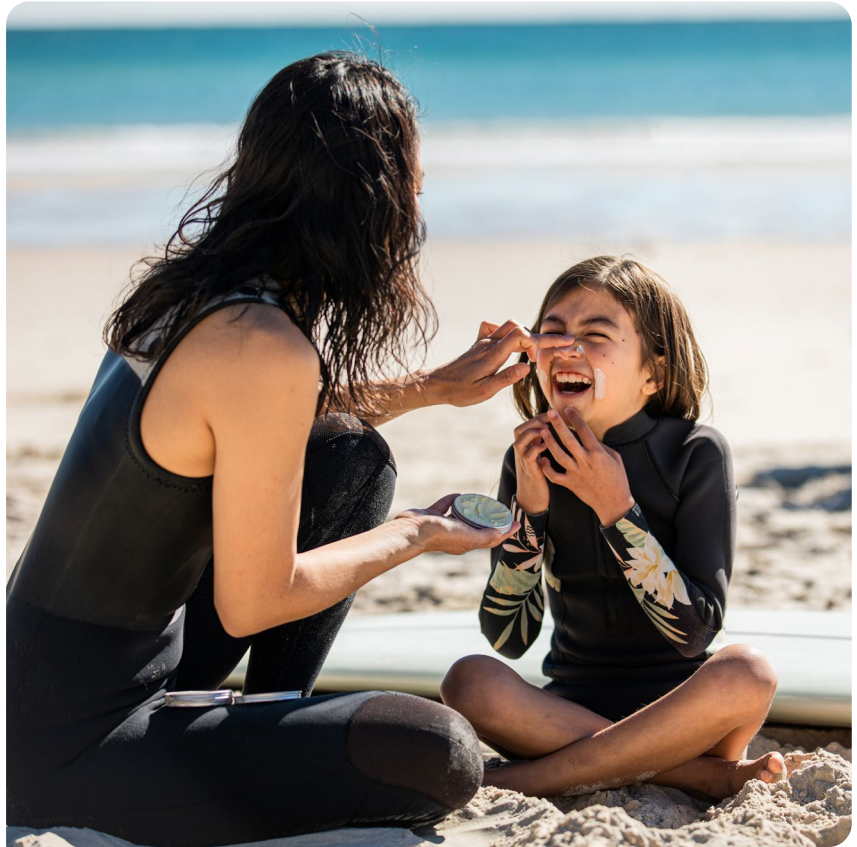
What's included in your plan as standard?

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 everyday medical costs?

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 free, but it's only available to members with certain plans in certain countries. You'll need a 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



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 plans can prove invaluable.

Joe Holden
Relationship 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 plan. 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 plan, 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 policy with a US\$5,000 per annum excess. Later that year, he receives treatment for a stubbed toe, but—more seriously—he also receives 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 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 everyday medical care 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 everyday medical care.

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 everyday medical care.

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

The coverage zone is a feature of international health plans that you don't typically find in domestic plans. 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 plan from William Russell has an coverage zone. As a rule of thumb, a more restrictive zone means a greater saving on your premium.

In Hong Kong, there's only one available coverage zone: Zone 1.

Zone 1

Worldwide cover, with restricted cover in the USA

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.

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 health plan, 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 plan, 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 health plan will not cover the treatment of pre-existing medical conditions, unless you've told us about them & we agree to cover them.

A health plan with moratorium underwriting or switch underwriting is slightly more expensive than a health plan with full medical 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. Plans with moratorium underwriting are more expensive than plans with full medical underwriting.

Switch underwriting

This means that any special terms or exclusions applicable to your health plan with a previous provider will be transferred to your plan with William Russell. Switch underwriting is also known as 'continued personal medical exclusions', or CPME. Plans with switch underwriting are more expensive than plans with full medical underwriting.



How our premiums work



What's happening

International health insurance

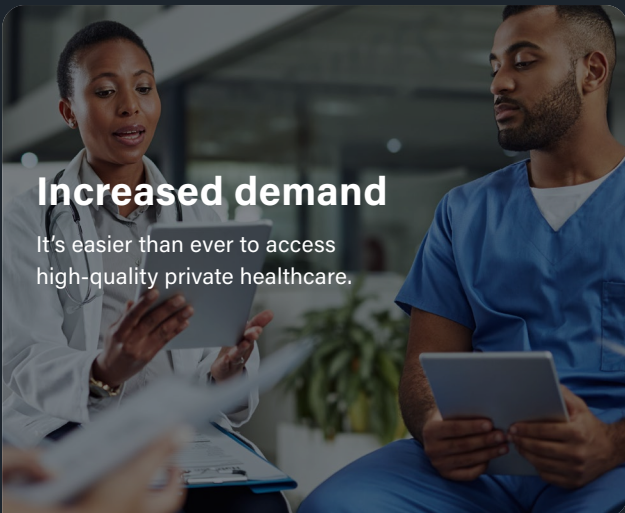
We're always working to make our premiums fair and sustainable for our members, but this objective has taken on greater importance as the cost of private healthcare around the world rises. This healthcare inflation is driving up premiums from all insurance providers; for our part, we're doing everything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

Medical inflation

The cost of healthcare tends to increase at a faster rate than general inflation.

Cancer prevalence

Cancer is becoming more prevalent among populations, and its treatment can be very costly.



Increased demand

It's easier than ever to access high-quality private healthcare.

Nextgen drug therapies

There are exciting advances in the field of medical technology, which happily are improving healthcare outcomes, but these are extremely expensive.



What we're doing to keep our member's 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. For all our health plans, 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 plans. 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 plan 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

2024

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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.**

G.L., Egypt



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.

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!**

D.P., Thailand



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.

P.C., China



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.

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.

N.S., Brunei



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.**

G.M., Thailand



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

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.



AWARD-WINNING SERVICE



WINNER 2022

**HEALTH &
PROTECTION
AWARDS**

**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



**Platinum Trusted
Service Award**

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