



GLOBAL HEALTH ELITE PLAN POLICY SUMMARY

Some important facts about your health insurance policy are summarised below. This policy summary does not contain the full terms and conditions of the insurance policy, which can be found in the Global Health Elite plan Agreement and on your Certificate of Insurance. It is important that you read these documents carefully when you receive them to make sure that you understand the cover your policy provides.

The Insurer

The insurer of your Global Health plan is as stated on your Certificate of Insurance.

The Administrator

Your Global Health Elite plan is administered by William Russell Limited. William Russell Limited is authorised and regulated by the UK Financial Services Authority.

Type of policy

Your policy provides cover for necessary medical treatment of acute medical conditions covered by your plan.

Significant features and benefits

The extent of the cover provided is detailed in the Global Health Elite plan Agreement subject to:

- any limitations contained in your Certificate of Insurance
- the overall limit of cover for the plan you have chosen
- the limits specified for particular benefits within the plan you have chosen

The plan you have chosen is stated on your Certificate of Insurance.

The Platinum plan policy covers:

In-patient and day-patient treatment that has been authorised by us, along with parent accommodation whilst a child is in hospital,

Out-patient treatment,

Oncology treatment received as an in-patient or day-patient, and follow-up consultations and tests received as an out-patient,

Home nursing,

Maternity care and childbirth after 12 months continuous cover,

28 days in-patient and day-patient cover for a newborn child born to a mother covered by the plan for a continuous period of 12 months,

Complications of pregnancy after 12 months continuous cover,

Emergency in-patient dental treatment following an accident and received within 15 days of the accident,

Emergency out-patient dental treatment following an accident and received within 72 hours of the accident,

Routine dental treatment as defined in the policy after 6 months continuous cover,

Complex dental treatment as defined in the policy after 12 months continuous cover,

Well-being benefit after 12 months continuous cover - A general annual check-up including a mammogram and smear test for women, and a prostate cancer test for men,

Well-child benefit after 12 months continuous Platinum cover,

Palliative treatment and/or treatment received in a Hospice,

Road ambulance charges,

Hospital cash benefit for each night spent in a hospital and if no charge is made by the hospital,

Emergency evacuation service and the travelling expenses of a companion,

Compassionate home travel service, following close family bereavement,

Repatriation service on death if you die outside your Home Country.

The Gold plan policy covers:

In-patient and day-patient treatment that has been authorised by us, along with parent accommodation whilst a child is in hospital,

Out-patient treatment,

Oncology treatment received as an in-patient or day-patient, and follow-up consultations and tests received as an out-patient,

Home nursing,

Maternity care and childbirth after 12 months continuous cover,

28 days in-patient and day-patient cover for a newborn child born to a mother covered by the plan for a continuous period of 12 months,

Complications of pregnancy after 12 months continuous cover,

Emergency in-patient dental treatment following an accident and received within 15 days of the accident,

Emergency out-patient dental treatment following an accident and received within 72 hours of the accident,

Routine dental treatment as defined in the policy after 6 months continuous cover,

Well-being benefit after 12 months continuous cover - A general annual check-up including a mammogram and smear test for women, and a prostate cancer test for men,

Palliative treatment and/or treatment received in a Hospice,

Road ambulance charges,

Hospital cash benefit for each night spent in a hospital and if no charge is made by the hospital,

Emergency evacuation service and the travelling expenses of a companion,

Compassionate home travel service, following close family bereavement,

Repatriation service on death if you die outside your Home Country.

The Silver plan policy covers

In-patient and day-patient treatment that has been authorised by us, along with parent accommodation whilst a child is in hospital,

Out-patient treatment,

Oncology treatment received as an in-patient or day-patient, and follow-up consultations and tests received as an out-patient,

Home nursing,

Complications of pregnancy after 12 months continuous cover,

Emergency in-patient dental treatment following an accident and received within 15 days of the accident,

Emergency out-patient dental treatment following an accident and received within 72 hours of the accident,

Well-being benefit after 12 months continuous cover - A general annual check-up including a mammogram and smear test for women, and a prostate cancer test for men,

Palliative treatment and/or treatment received in a Hospice,

Road ambulance charges,

Hospital cash benefit for each night spent in a hospital and if no charge is made by the hospital,

Emergency evacuation service and the travelling expenses of a companion,

Compassionate home travel service, following close family bereavement,

Repatriation service on death if you die outside your Home Country.





The Bronze plan policy covers

In-patient and day-patient treatment that has been authorised by us, along with parent accommodation whilst a child is in hospital,

Out-patient treatment when it relates to in-patient treatment covered by your plan and received within the 90 day period following discharge from hospital,

Oncology treatment received as an in-patient or day-patient, and follow-up consultations and tests received as an out-patient for a period of one year from the later of the date of surgery or the completion of chemotherapy or radiotherapy,

Home nursing,

Complications of pregnancy after 12 months continuous cover,

Emergency in-patient dental treatment following an accident and received within 15 days of the accident,

Palliative treatment and/or treatment received in a Hospice,

Road ambulance charges,

Hospital cash benefit for each night spent in a hospital and if no charge is made by the hospital,

Emergency evacuation service and the travelling expenses of a companion,

Compassionate home travel service, following close family bereavement,

Repatriation service on death if you die outside your Home Country.

Significant and unusual exclusions or limitations

The following are excluded from cover under your policy:

- Pre-existing conditions,
- Addictive conditions/disorders and alcohol, drug and solvent abuse,
- Birth control, infertility, assisted reproduction, sexual problems and sex changes,
- Birth defects and congenital conditions (although there is limited cover for the first 28 days of life, provided the mother has been insured under a Gold or Platinum plan for a continuous period of 12 months at the time of birth),
- Chemical, biological or nuclear contamination, or active participation in war and terrorism,
- Chronic conditions (although there is limited cover for the out-patient treatment of chronic conditions under the Silver, Gold and Platinum plans),
- Convalescence and rehabilitation,
- Cosmetic surgery,
- Dental treatment (although there is limited cover for dental treatment under the Gold and Platinum plans),
- Eating disorders and weight-related conditions,
- Experimental drugs and treatments,
- Foetal surgery, infertility and assisted reproduction,
- Hearing,
- HIV/Aids,
- Long-term kidney dialysis,
- Nasal septum deviation,
- Organ transplant (except as stated under the organ transplant benefit and up to the stated limit),

- Pregnancy (although there is limited cover for pregnancy under the Gold and Platinum plans, and limited cover for in-patient treatment for complications of pregnancy after 12 months continuous cover under all plans),
- Illness or injury caused by professional sports and racing,
- Psychiatric conditions (although there is limited cover after 24 months continuous cover),
- Routine preventive health checks and vaccinations (although there is limited cover under the Silver, Gold and Platinum plans after 12 months continuous cover),
- Sexually transmitted diseases,
- Self-inflicted injuries, suicide and/or wilful exposure to needless danger,
- Sleep disorders,
- Surgical or medical appliances and equipment,
- Treatment associated with any bodily change such as the menopause, puberty or ageing,
- Treatment by a family member,
- Unless you are insured on the Platinum Plan, only 80% of eligible treatment costs at London hospitals are covered,

A full list of exclusions is contained in the Global Health Elite plan Agreement.

Duration of the policy

Your cover will remain in force for a period of 12 months provided you maintain your premium payments in accordance with the Global Health Elite plan agreement. Your cover may be renewed each year with our agreement. Premiums are age-related and will increase as you get older. We review our premiums annually. The current premium rates are not guaranteed for the duration of your plan.

Right of Cancellation

You have a right to cancel during the first 30 days of the policy, provided that you confirm this to us in writing and have not made a claim. We will refund the premium you have paid to us.

Claims

Please call +44 1276 486455 or our 24-hour emergency number +44 1243 621155 or email us on claims@william-russell.com More information about making a claim can be found in the Global Health Elite plan Agreement.

Complaints

Any complaints about William Russell Ltd. should be addressed to the Managing Director, William Russell Limited, William Russell House, The Square, Lightwater, Surrey GU18 5SS, UK. If you are not satisfied with our response to your complaint, you may be entitled to refer it to the Financial Ombudsman Service. However, if your complaint relates to the claims handling services that we provide for the insurers, the Financial Ombudsman Service will not be able to consider your complaint. You may submit a complaint to the insurers we act for. We will provide you with further details upon receipt of your complaint.



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