



FAQ

Cancer, chronic disease (a disease that persists for a long time), genetic disorders, major accidents and major hospitalizations

Do you really need a medical cover if you break your arm? Finally, not really, because you can always find the money for that, this is usually cheap.

You need to be covered for major accidents and major hospitalizations.

You need to be covered for cancer, chronic disease, and genetic disorder, because they are very expensive.

With the improvements of the medicine, nowadays you received treatment (pills) at home without going to the hospital. A monthly treatment (box of innovative medicine) can cost several thousand USD per month.

WrLife covers under Module 1 the cancer treatment including the box of innovative medicine that you take at home.

WrLife covers the box of innovative medicine for chronic disease under Module 2.

WrLife does not exclude genetic disorders.

Is it a medical life cover?

Yes, lifetime.

Is the aim of WrLife lucrative?

No. When many insurance companies target high profits in connexion with the stock markets, WrLife avoids the stock markets. Its aim is to distribute a part of the profits to the insured and to gather money for foundations.

Who can apply?

Individuals, families, groups and companies.

Any age for the enrolment.

All applicants must tell if there is any medical pre-existing condition.

In some cases, we may request additional medical information.

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What is the condition of residence?

None, you can choose the main area where you want to be covered except USA.

Can I visit a hospital of my choosing?

Yes, you are free to choose any medical provider. However, the establishment must be licensed as a medical or surgical hospital under the laws of the country where it operates.

Do I need to pay upfront for my medical expenses?

No, in most cases if you visit a hospital in our vast direct billing network, we will settle the bill with the hospital directly. In the event that you visit a hospital outside our network, you will need to submit us your claims, which are typically processed within 5 working days.

Are people with pre-existing conditions covered?

Those who are aware of pre-existing medical conditions may apply - but pre-existing conditions may be excluded from coverage or covered with a loading or a moratorium period.

Can I renew my policy?

Yes, all our plans guarantee renewability regardless of your age or state of health.

What are the payment options & can I pay in instalments?

It can be paid monthly, quarterly, bi annually or yearly without additional fees.

You may pay for your insurance premiums by bank transfer or credit card or automatic debit.

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Will the prices increase strongly like the other market players?

No. All medical insurers apply crazy price increases at renewal time: 2% up to 70% or more per year moreover when you get older.

We do not, our prices have a very small adjustment between 1% and 3% every 3/5 years or even later.

When does my coverage begin?

Your coverage begins on the date you are accepted. This means your benefits can apply immediately after we have approved your application and received your payment.

After membership acceptance, waiting periods, as listed in the table of benefits may be applied if you do not previously hold a similar insurance.

What is the currency of the policy?

The currency of this policy is EUR, USD, GBP and Thai Baht (THB).

Can I add more people to the policy?

Yes. You may add:

1.

Spouse

- must be legally married, in civil partnership or permanently living in a similar relationship with the eligible member.

2.

Dependent children

- including the eligible member's own children, legally adopted children, step-children, foster-children and any other child who depends on the sole support of the eligible member. Eligible dependent children must also live with the eligible member in a customary parent-child relationship.

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Conditions of age for all dependent children:

- Children under the age of 18 must be unmarried.
- Children between the age of 18 and 22 must be unmarried, in full time education, and depend solely upon the eligible member's expatriate's support.
- Newborn children must be enrolled within 25 days after the date of birth.

What we don't cover

There are some medical events that we do not cover.

We believe they do not diminish the benefits of our plans and by excluding them we can make the plans more affordable for everyone.

*By excluding unnecessary risks (e.g. consequences of alcohol consumption) or expenses which are incurred due to personal preferences (e.g cosmetic treatment) – medical costs can be minimized; thus ensuring the long term stability and affordability of our plan for all our members.

