

ExpatPlus Individual Premiums

Effective 1 January 2009

Becoming an ExpatPlus customer is easy!

1. Choose your plan

- Globe
- Orbit
- Universe

2. Choose your area of cover

Your ExpatPlus premium will depend upon the geographical scope where you wish to be able to receive treatment.

- Zone A: Worldwide cover
- Zone B: Worldwide excluding USA and Canada (but you are covered in case of accident and emergency treatment and up to 90 days spent during each annual period of cover)

3. Choose your deductible

You can choose your deductible and get significant reductions in premium.

- € 0 / £ 0 / \$ 0
- € 100 / £ 65 / \$ 125
- € 300 / £ 200 / \$ 375

4. Choose your optional cover

We offer a broad range of optional covers, such as dental care, accidental death & disability, temporary incapacity and permanent disability.

5. Complete your application

Go to our website and complete the application form and medical questionnaire.

6. Return your application to the address below

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P.O. Box 69
2140 Antwerpen
Belgium
Tel. +32 3 217 65 29
Fax +32 3 663 73 14
E-mail expatsolutions@vanbreda.com

ExpatPlus Individual Premiums¹

EURO

Effective 1 January 2009

Core plan: Medical and Evacuation

Globe

Monthly premiums

Age	Deductible 0		Deductible 100		Deductible 300	
	Zone A	Zone B	Zone A	Zone B	Zone A	Zone B
<18	107,29	73,60	83,51	58,13	73,31	51,50
18-30	167,08	112,50	143,30	97,03	133,11	90,40
31-40	196,07	131,36	172,29	115,89	162,10	109,26
41-50	237,14	154,05	212,72	138,58	202,25	131,95
51-60	325,83	201,64	300,35	186,17	289,43	179,54
61-70	538,85	317,88	512,30	302,41	500,93	295,78
71-80	1.012,03	592,20	961,60	562,81	939,99	550,21

Annual premiums

Age	Deductible 0		Deductible 100		Deductible 300	
	Zone A	Zone B	Zone A	Zone B	Zone A	Zone B
<18	1.287,45	883,25	1.002,08	697,61	879,77	618,05
18-30	2.004,97	1.350,00	1.719,59	1.164,36	1.597,29	1.084,80
31-40	2.352,85	1.576,31	2.067,48	1.390,67	1.945,17	1.311,11
41-50	2.845,64	1.848,58	2.552,62	1.662,94	2.427,04	1.583,38
51-60	3.909,94	2.419,64	3.604,18	2.234,00	3.473,14	2.154,44
61-70	6.466,15	3.814,60	6.147,65	3.628,96	6.011,15	3.549,40
71-80	12.144,39	7.106,43	11.539,24	6.753,72	11.279,89	6.602,55

Orbit

Monthly premiums

Age	Deductible 0		Deductible 100		Deductible 300	
	Zone A	Zone B	Zone A	Zone B	Zone A	Zone B
<18	171,09	115,15	163,81	108,52	146,83	93,05
18-30	225,29	150,37	218,01	143,74	201,02	128,27
31-40	276,89	183,96	269,61	177,33	252,63	161,86
41-50	348,10	224,33	340,62	217,70	323,18	202,23
51-60	502,25	308,75	494,45	302,12	476,25	286,65
61-70	877,78	515,46	869,66	508,83	850,70	493,36
71-80	1.656,02	967,59	1.640,58	955,00	1.604,56	925,60

Annual premiums

Age	Deductible 0		Deductible 100		Deductible 300	
	Zone A	Zone B	Zone A	Zone B	Zone A	Zone B
<18	2.053,11	1.381,82	1.965,75	1.302,26	1.761,91	1.116,62
18-30	2.703,46	1.804,38	2.616,10	1.724,82	2.412,26	1.539,18
31-40	3.322,74	2.207,48	3.235,38	2.127,92	3.031,54	1.942,28
41-50	4.177,18	2.691,91	4.087,48	2.612,35	3.878,18	2.426,71
51-60	6.026,96	3.704,98	5.933,36	3.625,42	5.714,96	3.439,78
61-70	10.533,41	6.185,48	10.435,91	6.105,92	10.208,41	5.920,28
71-80	19.872,18	11.611,12	19.686,93	11.459,96	19.254,68	11.107,24

Universe

Monthly premiums

Age	Deductible 0		Deductible 100		Deductible 300	
	Zone A	Zone B	Zone A	Zone B	Zone A	Zone B
<18	212,99	133,72	NA	NA	NA	NA
18-30	281,59	175,41	NA	NA	NA	NA
31-40	347,11	215,19	NA	NA	NA	NA
41-50	436,97	262,78	NA	NA	NA	NA
51-60	632,25	362,67	NA	NA	NA	NA
61-70	1.107,81	607,10	NA	NA	NA	NA
71-80	2.093,07	1.141,71	NA	NA	NA	NA

Annual premiums

Age	Deductible 0		Deductible 100		Deductible 300	
	Zone A	Zone B	Zone A	Zone B	Zone A	Zone B
<18	2.555,92	1.604,59	NA	NA	NA	NA
18-30	3.379,04	2.104,94	NA	NA	NA	NA
31-40	4.165,28	2.582,30	NA	NA	NA	NA
41-50	5.243,62	3.153,36	NA	NA	NA	NA
51-60	7.586,96	4.352,06	NA	NA	NA	NA
61-70	13.293,75	7.285,18	NA	NA	NA	NA
71-80	25.116,83	13.700,54	NA	NA	NA	NA

¹ All premiums are monthly or annual and apply to each person covered, unless stated otherwise. Insurance tax is excluded.

ExpatPlus Individual Premiums¹

EURO

Effective 1 January 2009

Optional covers

Dental plan

Monthly premiums

Age	Basic		Comprehensive	
	Zone A	Zone B	Zone A	Zone B
< 18	31,92	22,82	46,94	33,51
18-30	43,04	30,77	63,27	45,21
31-40	53,73	38,42	79,01	56,48
41-50	66,30	47,38	97,50	69,62
51-60	86,38	61,68	126,97	90,71
61-70	112,23	80,17	164,96	117,87
71-80	145,90	104,22	214,44	153,23

Annual premiums

Age	Basic		Comprehensive	
	Zone A	Zone B	Zone A	Zone B
< 18	383,07	273,87	563,33	402,13
18-30	516,53	369,20	759,20	542,53
31-40	644,80	461,07	948,13	677,73
41-50	795,60	568,53	1.170,00	835,47
51-60	1.036,53	740,13	1.523,60	1.088,53
61-70	1.346,80	962,00	1.979,47	1.414,40
71-80	1.750,84	1.250,60	2.573,31	1.838,72

Accidental Death & Disability

Premium: 0,13% of the sum insured

Example	% of sum insured	Premium	
		Monthly	Annual
Sum insured: 150.000	0,13%	16,25	195,00

Loss of income

Temporary incapacity

Age	% of insured allowance	Example: monthly allowance is 2.000	
		Monthly	Annual
18-30	6,60%	11,00	132,00
31-40	7,20%	12,00	144,00
41-50	11,40%	19,00	228,00
51-60	16,20%	27,00	324,00
61-65	17,80%	29,67	356,00

Permanent incapacity

Age	% of insured allowance	Example: monthly allowance is 2.000	
		Monthly	Annual
18-30	6,00%	10,00	120,00
31-40	12,80%	21,33	256,00
41-50	38,20%	63,67	764,00
51-60	92,60%	154,33	1.852,00
61-65	92,60%	154,33	1.852,00

¹ All premiums are monthly or annual and apply to each person covered, unless stated otherwise. Insurance tax is excluded.

ExpatPlus Individual Premiums¹

POUND STERLING

Effective 1 January 2009

Core plan: Medical and Evacuation

Globe

Monthly premiums

Age	Deductible 0		Deductible 65		Deductible 200	
	Zone A	Zone B	Zone A	Zone B	Zone A	Zone B
<18	71,57	49,10	55,67	38,76	48,88	34,34
18-30	111,43	75,03	95,53	64,69	88,74	60,27
31-40	130,76	87,60	114,86	77,26	108,07	72,84
41-50	158,14	102,73	141,81	92,39	134,84	87,97
51-60	217,27	134,45	200,23	124,11	192,95	119,69
61-70	359,28	211,95	341,54	201,61	333,95	197,19
71-80	674,78	386,96	641,07	367,70	626,66	359,46

Annual premiums

Age	Deductible 0		Deductible 65		Deductible 200	
	Zone A	Zone B	Zone A	Zone B	Zone A	Zone B
<18	858,85	589,19	668,05	465,08	586,51	412,04
18-30	1.337,19	900,36	1.146,40	776,25	1.064,86	723,21
31-40	1.569,12	1.051,23	1.378,32	927,12	1.296,78	874,08
41-50	1.897,65	1.232,74	1.701,75	1.108,63	1.618,03	1.055,59
51-60	2.607,22	1.613,46	2.402,78	1.489,34	2.315,42	1.436,30
61-70	4.311,38	2.543,42	4.098,44	2.419,31	4.007,44	2.366,27
71-80	8.097,41	4.643,54	7.692,83	4.412,35	7.519,93	4.313,55

Orbit

Monthly premiums

Age	Deductible 0		Deductible 65		Deductible 200	
	Zone A	Zone B	Zone A	Zone B	Zone A	Zone B
<18	114,12	76,77	109,26	72,35	97,91	62,01
18-30	150,19	100,24	145,34	95,82	133,98	85,48
31-40	184,65	122,64	179,80	118,22	168,44	107,88
41-50	232,12	149,55	227,14	145,13	215,48	134,79
51-60	334,77	205,83	329,57	201,41	317,41	191,07
61-70	585,25	343,64	579,83	339,22	567,16	328,88
71-80	1.104,12	632,26	1.093,83	624,03	1.069,75	604,76

Annual premiums

Age	Deductible 0		Deductible 65		Deductible 200	
	Zone A	Zone B	Zone A	Zone B	Zone A	Zone B
<18	1.369,39	921,22	1.311,15	868,18	1.174,87	744,07
18-30	1.802,30	1.202,93	1.744,06	1.149,89	1.607,78	1.025,77
31-40	2.215,81	1.471,66	2.157,57	1.418,62	2.021,29	1.294,50
41-50	2.785,46	1.794,62	2.725,66	1.741,58	2.585,73	1.617,47
51-60	4.017,29	2.469,99	3.954,89	2.416,95	3.808,87	2.292,84
61-70	7.023,00	4.123,66	6.958,00	4.070,62	6.805,90	3.946,50
71-80	13.249,50	7.587,12	13.126,00	7.488,32	12.837,01	7.257,13

Universe

Monthly premiums

Age	Deductible 0		Deductible 65		Deductible 200	
	Zone A	Zone B	Zone A	Zone B	Zone A	Zone B
<18	141,94	89,14	NA	NA	NA	NA
18-30	187,73	116,94	NA	NA	NA	NA
31-40	231,41	143,46	NA	NA	NA	NA
41-50	291,26	175,19	NA	NA	NA	NA
51-60	421,44	241,78	NA	NA	NA	NA
61-70	738,54	404,73	NA	NA	NA	NA
71-80	1.395,38	746,06	NA	NA	NA	NA

Annual premiums

Age	Deductible 0		Deductible 65		Deductible 200	
	Zone A	Zone B	Zone A	Zone B	Zone A	Zone B
<18	1.703,30	1.069,74	NA	NA	NA	NA
18-30	2.252,70	1.403,30	NA	NA	NA	NA
31-40	2.776,86	1.721,54	NA	NA	NA	NA
41-50	3.495,08	2.102,25	NA	NA	NA	NA
51-60	5.057,28	2.901,38	NA	NA	NA	NA
61-70	8.862,50	4.856,79	NA	NA	NA	NA
71-80	16.744,55	8.952,76	NA	NA	NA	NA

¹ All premiums are monthly or annual and apply to each person covered, unless stated otherwise. Insurance tax is excluded.

ExpatPlus Individual Premiums¹

POUND STERLING

Effective 1 January 2009

Optional covers

Dental plan

Monthly premiums

Age	Basic		Comprehensive	
	Zone A	Zone B	Zone A	Zone B
< 18	21,23	15,22	31,34	22,34
18-30	28,74	20,51	42,18	30,14
31-40	35,82	25,62	52,72	37,65
41-50	44,20	31,59	65,00	46,42
51-60	57,63	41,12	84,64	60,47
61-70	74,82	53,44	110,07	78,58
71-80	97,27	69,48	143,09	102,15

Annual premiums

Age	Basic		Comprehensive	
	Zone A	Zone B	Zone A	Zone B
< 18	254,80	182,58	376,13	268,09
18-30	344,93	246,13	506,13	361,69
31-40	429,87	307,38	632,67	451,82
41-50	530,40	379,02	780,00	556,98
51-60	691,60	493,42	1.015,73	725,69
61-70	897,87	641,33	1.320,80	942,93
71-80	1.167,23	833,73	1.717,04	1.225,81

Accidental Death & Disability

Premium: 0.13% of the sum insured

Example	% of sum insured	Premium	
		Monthly	Annual
Sum insured: 100.000	0,13%	10,83	130

Loss of income

Temporary incapacity

Age	% of insured allowance	Example: monthly allowance is 1.400	
		Monthly	Annual
18-30	6,60%	7,70	92,40
31-40	7,20%	8,40	100,80
41-50	11,40%	13,30	159,60
51-60	16,20%	18,90	226,80
61-65	17,80%	20,77	249,20

Permanent incapacity

Age	% of insured allowance	Example: monthly allowance is 1.400	
		Monthly	Annual
18-30	6,00%	7,00	84,00
31-40	12,80%	14,93	179,20
41-50	38,20%	44,57	534,80
51-60	92,60%	108,03	1.296,40
61-65	92,60%	108,03	1.296,40

¹ All premiums are monthly or annual and apply to each person covered, unless stated otherwise. Insurance tax is excluded.

ExpatPlus Individual Premiums¹

US Dollar

Effective 1 January 2009

Core plan: Medical and Evacuation

Globe

Monthly premiums

Age	Deductible 0		Deductible 125		Deductible 375	
	Zone A	Zone B	Zone A	Zone B	Zone A	Zone B
<18	136,65	94,23	106,75	74,78	93,84	66,38
18-30	211,39	142,85	181,49	123,40	168,58	115,00
31-40	247,63	166,42	217,73	146,97	204,82	138,58
41-50	299,03	194,78	268,33	175,34	255,07	166,94
51-60	410,00	254,27	377,97	234,82	364,14	226,42
61-70	676,39	399,58	643,02	380,13	628,61	371,73
71-80	1.268,66	742,71	1.205,26	705,76	1.177,88	689,80

Annual premiums

Age	Deductible 0		Deductible 125		Deductible 375	
	Zone A	Zone B	Zone A	Zone B	Zone A	Zone B
<18	1.639,76	1.130,74	1.281,00	897,37	1.126,08	796,59
18-30	2.536,65	1.714,18	2.177,90	1.480,81	2.022,98	1.380,03
31-40	2.971,52	1.997,06	2.612,76	1.763,68	2.457,84	1.662,91
41-50	3.588,31	2.337,40	3.219,94	2.104,03	3.060,87	2.003,25
51-60	4.920,05	3.051,23	4.535,66	2.817,85	4.369,68	2.717,08
61-70	8.116,68	4.794,92	7.716,28	4.561,54	7.543,38	4.460,77
71-80	15.223,86	8.912,52	14.463,10	8.469,11	14.134,59	8.277,64

Orbit

Monthly premiums

Age	Deductible 0		Deductible 125		Deductible 375	
	Zone A	Zone B	Zone A	Zone B	Zone A	Zone B
<18	216,10	145,94	206,88	137,54	185,53	118,10
18-30	283,89	189,96	274,67	181,56	253,31	162,11
31-40	348,44	231,95	339,22	223,55	317,86	204,10
41-50	437,34	282,41	427,87	274,01	405,94	254,56
51-60	630,21	387,94	620,33	379,54	597,45	360,09
61-70	1.099,73	646,32	1.089,44	637,93	1.065,60	618,48
71-80	2.073,00	1.211,53	2.053,45	1.195,57	2.008,16	1.158,62

Annual premiums

Age	Deductible 0		Deductible 125		Deductible 375	
	Zone A	Zone B	Zone A	Zone B	Zone A	Zone B
<18	2.593,25	1.751,31	2.482,59	1.650,53	2.226,34	1.417,16
18-30	3.406,67	2.279,50	3.296,01	2.178,72	3.039,76	1.945,34
31-40	4.181,26	2.783,38	4.070,61	2.682,60	3.814,35	2.449,22
41-50	5.248,06	3.388,92	5.134,44	3.288,14	4.871,32	3.054,77
51-60	7.562,48	4.655,25	7.443,92	4.554,47	7.169,36	4.321,10
61-70	13.196,75	7.755,88	13.073,25	7.655,10	12.787,25	7.421,72
71-80	24.876,01	14.538,34	24.641,36	14.346,87	24.097,96	13.903,46

Universe

Monthly premiums

Age	Deductible 0		Deductible 125		Deductible 375	
	Zone A	Zone B	Zone A	Zone B	Zone A	Zone B
<18	268,36	169,15	NA	NA	NA	NA
18-30	354,26	221,27	NA	NA	NA	NA
31-40	436,12	270,99	NA	NA	NA	NA
41-50	548,30	330,48	NA	NA	NA	NA
51-60	792,62	455,34	NA	NA	NA	NA
61-70	1.387,17	760,87	NA	NA	NA	NA
71-80	2.619,15	1.429,18	NA	NA	NA	NA

Annual premiums

Age	Deductible 0		Deductible 125		Deductible 375	
	Zone A	Zone B	Zone A	Zone B	Zone A	Zone B
<18	3.220,30	2.029,77	NA	NA	NA	NA
18-30	4.251,15	2.655,19	NA	NA	NA	NA
31-40	5.233,46	3.251,89	NA	NA	NA	NA
41-50	6.579,61	3.965,73	NA	NA	NA	NA
51-60	9.511,44	5.464,11	NA	NA	NA	NA
61-70	16.646,09	9.130,50	NA	NA	NA	NA
71-80	31.429,75	17.150,13	NA	NA	NA	NA

¹ All premiums are monthly or annual and apply to each person covered, unless stated otherwise. Insurance tax is excluded.

ExpatPlus Individual Premiums¹

US Dollar

Effective 1 January 2009

Optional covers

Dental plan

Monthly premiums

Age	Basic		Comprehensive	
	Zone A	Zone B	Zone A	Zone B
< 18	40,01	28,53	58,64	41,89
18-30	53,88	38,46	79,16	56,51
31-40	67,31	48,03	98,80	70,60
41-50	82,91	59,22	121,91	87,03
51-60	107,90	77,10	158,74	113,39
61-70	140,26	100,21	206,27	147,33
71-80	182,33	130,27	268,15	191,53

Annual premiums

Age	Basic		Comprehensive	
	Zone A	Zone B	Zone A	Zone B
< 18	480,13	342,33	703,73	502,67
18-30	646,53	461,50	949,87	678,17
31-40	807,73	576,33	1.185,60	847,17
41-50	994,93	710,67	1.462,93	1.044,33
51-60	1.294,80	925,17	1.904,93	1.360,67
61-70	1.683,07	1.202,50	2.475,20	1.768,00
71-80	2.187,99	1.563,25	3.217,76	2.298,40

Accidental Death & Disability

Premium: 0,13% of the sum insured

Example	% of sum insured	Premium	
		Monthly	Annual
Sum insured: 62.500	0,13%	6,77	81,25

Loss of income

Temporary incapacity

Age	% of insured allowance	Example: monthly allowance is 1.875	
		Monthly	Annual
18-30	6,60%	10,31	123,75
31-40	7,20%	11,25	135,00
41-50	11,40%	17,81	213,75
51-60	16,20%	25,31	303,75
61-65	17,80%	27,81	333,75

Permanent incapacity

Age	% of insured allowance	Example: monthly allowance is 1.875	
		Monthly	Annual
18-30	6,00%	9,38	112,50
31-40	12,80%	20,00	240,00
41-50	38,20%	59,69	716,25
51-60	92,60%	144,69	1.736,25
61-65	92,60%	144,69	1.736,25

¹ All premiums are monthly or annual and apply to each person covered, unless stated otherwise. Insurance tax is excluded.

ExpatPlus is the best solution for you and your family

Living abroad, ExpatPlus is designed to provide you with great choice, flexibility, quality and value. When you choose ExpatPlus as your international health insurance and assistance plan, you benefit from a lot of plusses.

1. Comprehensive range of medical cover plus extra benefits

Whatever treatment you need, you are sure it's covered. This makes it easier for you to enjoy life together with the people you love.

2. Flexibility and choice

Different people need different things from their health insurance. That is why ExpatPlus is designed to meet the requirements of most situations and budget.

3. Contact center, 24 hours a day, 365 days a year

You have access to a multilingual team of customer service professionals 365 days a year, 24 hours.

4. Easy to afford

Because we offer a variety of plans, and a range of deductibles, you can choose how much to spend. You will always find a solution that best suits your needs.

5. No out of pocket costs

If you need hospital treatment, we settle all eligible bills directly. This makes life easier for you and your family.

6. Free choice of hospitals

Unlike others, you have complete freedom of choice when it comes to selecting treatment providers.

7. Only the best hospitals

We have established a worldwide network of high quality hospitals to guarantee access to the best medical care.

8. Fast reimbursement of claims

75% of all claims are reimbursed within 5 days.



Please contact us at

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