

HEALTH & PROTECTION

ROUNDTABLE REPORT

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INTERNATIONAL PRIVATE MEDICAL INSURANCE: NAVIGATING CHANGING WINDS

IN ASSOCIATION WITH



INTRODUCING OUR PANEL



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A MARKET TAKING FLIGHT

A notable shift appears to have taken place in the last year within the international private medical insurance (IPMI) market.

The many fledgling changes flapping away since the Covid pandemic ended now seem to be taking full flight and the sector looks to be in a state of flux.

This is not to say the sky is falling in, although adviser confidence in the market has slipped to post-Covid levels according to Health & Protection's latest IPMI Report, it is more to suggest a potentially significant re-positioning and evolution.

The panel at Health & Protection's House of Lords roundtable explored those changes and what they mean for the market and its chief protagonists.

There is no doubt a shifting focus for many advisers and providers with regard to targeting the greatest growth markets in terms of populations and locations.

But there may also be need to consider some more deeper structural and even profound changes to the model in response to client demands.

For instance, could a rebranding removing the 'international' tag be a worthy way of reaching prospective clients in search of richer care and benefits but put-off by the global connotations?

If such a move were to happen, how would the product and industry continue to differentiate itself? Would this even be a problem?

As long as customers are receiving the right advice and obtaining products best suited to them, the name is somewhat irrelevant.

As with everything in business, the ethos of adapt or die comes to mind here.

This discussion illustrated how the sector is not afraid to consider the bigger picture and make changes when they come along, even if the pace of change may not always match expectations for a variety of reasons.

Owain Thomas, editor of Health & Protection

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LONG-TERM COLLABORATION CAN TACKLE PREMIUM INFLATION

Data transparency, longer-term contracts and sharing responsibility are the keys to easing premium inflation and controlling costs,

Abigail Montrose hears

Premium inflation and cost management are the biggest concerns and greatest challenge for the international private medical insurance (IPMI) market.

Providers are forecasting premiums will rise by around 10% per year for the next three years, while Intermediaries are having to communicate this to their clients who increasingly are asking them to justify these rises.

And the expert panel at Health & Protection's House of Lords roundtable heard these continuing increases are proving particularly expensive for clients who buy IPMI rather than domestic insurance.

"If you look at an equivalent sized domestic and international schemes, the

domestic scheme is probably in the tens of thousands of pounds whereas the international scheme is running into hundreds of thousands," said Partners& client director James Henson.

"So 10% on tens of thousands is bad, but it's manageable. However, 10% on hundreds of thousands soon adds up and that's the issue we're facing.

"Clients are definitely getting more cost conscious. Whereas before they would say: 'I like the insurer, just renew the policy.' Now they say: 'We can't keep on paying these costs.'"

As a result, clients are now demanding more than they did before.

They are scrutinising cover and intermediaries are having to jump through more hoops with insurers to get them what they need.

CALLS FOR MORE DATA

To justify sharp increases in premiums, intermediaries need more data from insurers so they can explain why premiums are rising so steeply.

"Clients are asking for more justification around pricing," said Lockton senior vice president and global mobility lead Joe Barnes.

"We're probably facing higher increases in the SME market than we are with large corporates and so we need more information because clients are requesting more," he said.

Aon principal consultant - global benefits Tristan Cleaver, agreed.

"We have a huge problem with inflation.



There are lots of solutions but the number one on my list is data. Many of the insurers are responsible with the data they give but it's just not enough," he said.

"I've had so many cases. I had one last month where a 100% increase was being put forward on an SME. I did some digging and the reason was an ongoing high claim.

"In the end I said to the client, you've got a 100% increase, and that's a really good deal. I was able to say this because I had the data to back this.

"But it took me a really long time to get the data, and I really had to squeeze blood from a stone to get that.

"Knowledge is power and I think this is something for me that has to change and it has to change quickly in the SME market for more data to come through," he added.

Insurers are aware of this argument and open to supporting advisers where possible.

"One thing we have found quite





We can give people the tools. The question is, are they going to make use of them?"

Indeed, monitoring and supporting more use of the wellbeing benefits offered by insurers was cited as one area where employers and individuals can look to make savings on IPMI policies.

Engage Health Group head of international benefits Penny Pemberton believes if insurers could share uptake and utilisation information it could help employers and individuals reduce costs.

"The data link there would be really crucial if you could understand how wellbeing is driving the reduction in claims for your medical insurance policy," she said.

"And that would be utopia, wouldn't it? But I don't know any insurer that can really provide that level of detail."

ENCOURAGING PREVENTATIVE ACTION

Several suggestions were put forward on how to encourage clients to increase take-up of wellbeing benefits.

These included insurers investing more in initiatives and offering compulsory annual check-ups. The annual check-up could help people manage their health and alert them to any potential lifestyle changes they might need to make to improve their fitness and wellbeing.

"Obviously healthcare innovation costs money; it's down to us as insurers to try to manage that cost and the preventative side is key to that," said Cigna Healthcare

successful is to share claims experience as much as we possibly can so you can give advice to clients," acknowledged IMG global head of IPMI Kevin Melton.

TAKE ADVANTAGE OF WELLBEING INITIATIVES

One area of innovation in the IPMI market which can also help reduce inflationary pressures is wellbeing.

Increasingly insurers are offering such benefits to help people improve their health and act proactively to reduce claims.

But as IMG head of strategic relationships Amanda Olore highlighted, it is not always easy to get people to take advantage of these initiatives.

"We have all these wellness propositions but there's only so much we can do from the insurance side," she said.

"Everyone wants to manage their own health and says they will do it their way.



Amanda Olore



Steven Martin

International Health head of global individual broker sales, UK and Europe Steven Martin.

"This year we've introduced a robust health and wellbeing benefit.

"So, for example, if a 50-year-old male has not had their prostate cancer screening test yet, we'll email them and say: 'You've got this benefit, please go ahead and do that'.

"Or if they've not had the annual health check yet, here's how they can book that in with us - this is a benefit they can use instantly, it helps them and it helps us.

"And hopefully we'll reduce the cost moving forward as well."

Another way suggested to keep costs down is to introduce mandatory virtual screening before a policyholder sees a private GP.

This could reduce private GP claims as policyholders would only be referred to a private GP if after the screening it was decided they needed a face-to-face consultation.

LONGER-TERM COMMITMENT TO INVEST

Insurers are keen to increase the take-up of their wellness benefits and to encourage people to change their behaviours so they have a healthier lifestyle, which should lead to fewer and cheaper claims.

But innovation and the introduction of new initiatives such as screenings require investment and to make this worthwhile, insurers will want to see a return on their investment.

With IPMI contracts typically renewed on an annual basis, this means insurers are



Dave Hilton (Speaking)

often hesitant about investing in new innovations if the client could leave them the next year.

Mercer Marsh Benefits multinational global mobility solutions leader UK Dave Hilton argued longer contracts could encourage providers to invest in these initiatives and benefit clients.

"Getting people's behaviours to change is not a short-term thing," he said.

"The same goes for health screening. You need two or three years of that to really make a tangible difference.

"So the market probably needs to think about asking clients to commit to two- or three-year contracts so there is then an incentive for the carrier to invest in some of these innovations that make a tangible difference.

"Otherwise, we're having these really good conversations, but nobody's putting their money where their mouth is," he added.

In return for signing up to a two- or

three-year contract, clients would need two assurances from insurers, Hilton said.

These would be transparency of pricing so they know exactly how any premium increases during the period would be calculated and a clear idea of what innovations or investments were being made.

Aon's Cleaver strongly supported the idea and believed the two things can be linked together.

"I totally agree that the pricing structure over a three-year period is a good idea, but I think it should be linked to health and wellbeing," he said.

"So, for example, you get a maximum 10% increase each year if you have X number of engagements in these health and wellbeing benefits, and we see the data or something can be measured against it.

"If members are not engaging in that and as a result claims are going up, then there are higher increases.



likely to vary between people from different countries and cultures.

"What's relevant differs from country to country," said Lockton's Barnes.

"We work with a private equity company that wanted to put a GP in every office. We tried to do it in Hong Kong and the Feng Shui couldn't handle it.

"So there is an inherent issue with having a simplistic approach of one size fits all that it doesn't really work, but you can drill down into the individual countries.

"That's where our role as the adviser steps in more, perhaps more so than the insurer, because we can help develop and bespoke those communications," he added.

CONSUMERS VS CORPORATES

But there is also a reality that while some clients are happy to pay for the best policy money can buy, for others the key issue is cost.

"There's quite a big distinction between the informed large corporate or larger SME client and a consumer that is just looking for the cheapest products out there," IMG's Melton explained.

"They want something that's going to give them peace of mind so if they are taken ill in whatever location they're in, that the service is an easy claim process, there's a hospital that is fit for purpose near them, and they are getting value for money.

"We have a lot of consumer clients where price has to be a consideration, perhaps more so than the actual volume value proposition.

"It is a challenge for providers to recognise that, but at the other end of the spectrum, with an informed client, the more the employer can engage with their employees and make them aware of the benefits along with the provider, clearly that's the right thing to control costs.

"But there is a distinction between the consumer market and the larger corporate market," he concluded. ■



Kevin
Melton

"Again, you're putting the onus back on the client but there needs to be a bit of give and take - you invest in health and wellness, you take the time to invest in promoting this benefit and the reward is more sustainable pricing," he added.

CROSS-SECTOR CO-OPERATION

Promoting these benefits was seen as the job of the whole industry - providers, intermediaries and employers.

The panel argued providers need to promote the benefits, services and tools they offer. Intermediaries need to ensure clients are aware of the advantages of making the most of these wellness services.

Then where appropriate, employers need to be encouraged to ensure employees know how to make the most of their membership.

As ever one of the challenges is how wellbeing and screening programmes are communicated and engaged with, which is



Joseph
Barnes (right)

Confidence in the international private medical insurance (IPMI) market remains strong but a dip in sentiment was detected in this year's Health & Protection IPMI annual report.

While the industry remains upbeat about growth prospects, the last 12 months have seen some positivity seep out with confidence back to its pre-pandemic levels especially among intermediaries.

The panel at Health & Protection's House of Lords roundtable agreed that while the market was still seeing rising policyholder numbers, some segments were clearly growing more than others.

One insurer even questioned whether the time may have come to rethink the international branding for the product as fewer people are buying plans for their multinational power.

BUOYANT SME AND INDIVIDUAL MARKETS

"The large corporate part of the market probably isn't as buoyant and growing as it used to," acknowledged Mercer Marsh Benefits multinational global mobility solutions leader Dave Hilton.

"But there's probably more growth in the SME and individual markets. We're also seeing more regionalisation.

"Growth is probably in a slightly different place from where it has been in the past," he added.

Cigna Healthcare International Health head of global individual broker sales, UK and Europe Steven Martin, agreed and has seen opportunities in the individual market growing.

"The people who would consider an international health solution are more diverse than it ever used to be," he said.

"It's now not just a standard expat on a three-year assignment with a tax-free salary who is looking at this. We've seen diversification throughout the customer types that we work with who want international health insurance," he said.

The expat market remains strong and there are also some positive opportunities in other areas of the individual market said Lockton senior vice president and global mobility lead – people solutions, Joe Barnes.

"I think there's probably more opportunity in the market at the moment than there has been in a long time, purely down to the different types of opportunities.

"We're not just looking at expat business. Around 90% of what we write probably isn't

expat business or true expat business – it's digital nomads, the domestic plus the cross-border," he said.

SENIOR EXECUTIVES WANT IPMI

Demand for IPMI is also increasing among very senior business people, the panel noted.

"We're seeing a lot of growth from existing clients that have PMI for their very senior people such as CEOs," said Aon principal consultant - global benefits Tristan Cleaver.

"This year we've seen, for me, a record amount of growth in that area with people upgrading to IPMI.

"And it's about knowledge as well. I had one case the other week where a client was unhappy about things not being covered by their insurer.

"So I said the answer is IPMI and that's where we went with it. I'm just seeing a lot more of that going on as well, which is great for growth."

Partners& client director James Henson is experiencing similar demand.

"A lot of the growth we're seeing is in the domestic book, the senior teams wanting something better," he said.

"They want to just be able to walk into somewhere and get things sorted and not have to think about it."



INTERNATIONAL NO MORE? EVOLVING CLIENT DEMANDS REDUCE GLOBAL ONUS OF IPMI

As customer demand evolves to wider populations, **Abigail Montrose** hears it may be time to drop the international clause from IPMI

He also identified a growing demand for more underwriting approaches.

"We have a lot of startup clients too," Henson continued.

"They get their employees from the bigger companies where they are used to these benefits. They want medical history disregarded (MHD), they want flexibility, they may want maternity.

"They're generally at an age where they may not be here for a long while, or they may be based somewhere else. So we're seeing a lot of growth in the smaller SMEs benefit-rich MHD schemes we weren't seeing before," he said.

Mercer's Hilton has also seen this trend creeping into parts of Europe and the UK with clients wanting better provision than they can get locally.

"We're seeing demand growing among executive high net worth (HNW) clients," he said.

"They're buying two things. They're buying the no boundaries, best benefits in the world, but more importantly they're buying time.

"These people are time limited, money rich - they want to spend more time on decision making, strategic elements or just their life.

"And they're happy to pay more, not just because they get a better plan but because the solution is boundaryless, it has a concierge element and that saves them time," he added.

THE END OF 'INTERNATIONAL' IPMI?

This local buyer trend has become so prominent it has triggered the potential for dropping references to international in the product as Cigna's Martin explained this could better target the product at the appropriate consumer base without confusing them.

"We're having a debate internally about if we should continue to use the word international or global in these products?" he said.

"One of our biggest markets in Europe is the UK, but that's mainly UK nationals buying international products as they like the richer benefits and flexibility.

"So we wondered, if we're limiting that education to people who are saying they don't need that [international cover] and so shouldn't buy it, but what they actually do want forms part of the product we offer them.

"It's an interesting one for us to continue thinking how we repackage and rebrand those types of products."

DEMAND FOR SHORT-TERM IPMI CONTRACTS

Clients are also looking for more flexibility with their IPMI cover with not everyone wanting an annual policy.

They may want a shorter policy which providers need to cater for, explained IMG global head of IPMI Kevin Melton.

"One thing we're seeing is increasing popularity for our short-term healthcare plan," Melton said.

"The days of having an annual contract are effectively in the past. Insurance providers just expected to fit everybody into a square box and now there's a realisation we can't do that anymore.

"So if somebody's going on a trip or only wants cover for seven months, don't try and sell them a 12-month policy. Sell them a seven-month policy.

"That's the way the market is evolving; we're certainly seeing this in the SME and the individual sector," he added.

GLOBAL GROWTH

Europe is becoming a market with increasing demand as people look beyond their domestic market for coverage, particularly for locations where even domestic private healthcare may not be very good.

And the US market is also seeing major changes.

"Increasing numbers of people are thinking about the geopolitical situation there and leaving the country," said ExpatInsure CEO Chris Carter.

"Often they do not go far, such as to Mexico or Panama, and this has created a whole spectrum of virgin buyers for IPMI.

"We're trying to bring in this new cohort of people that we haven't necessarily seen



Chris
Carter

before and we've also got big corporates where people are leaving the schemes.

"In some cases, they're moving out of country, so they don't want to be in the domestic schemes, but they want to have coverage elsewhere," he said.

And Carter added older HNW clients were a growing trend which had their own concerns.

"We've got high net worth retirees who downsize, release equity and move outside of their country, sometimes for geopolitical reasons or for tax reasons," he continued.

"The question is how long are they going to become stay-pats or are they expats in the true sense of the word?

"There are some interesting scenarios that could play out in the next five to ten years with the whole drive to move away from your home country," he said.

REMOTE WORKERS

Another growth area is the remote global nomad workforce, said Engage Health Group head of international benefits Penny Pemberton, but they can create headaches for organisations to manage.

"These clients are often young and mobile. They work for companies that do not have an office so can base themselves anywhere they choose," Pemberton said.

"One minute they might be working in Brazil for six months and then they decide to go over to Spain.

"How do you manage that remote workforce? It's tough because of course the policy is work from anywhere, but that's a company policy.

"But if they work in Brazil and they're a non-national, how do they access local healthcare there? This is where the IPMI market can be a good lever and help these people," she concluded. ■



Tristan
Cleaver

WHATSAPP, PAYMENT CARDS AND AT-HOME CARE SUPPORTING SMOOTHER CLAIMS

Claims are expected to keep growing in frequency and value but technology and innovations are helping address these hurdles, writes

Abigail Montrose

Finding new ways to control claims costs has resulted in new product services while providers are also looking at ways to make the claims process simpler.

The panel at Health & Protection's House of Lords roundtable highlighted that virtual services such as telehealth and counselling are having a positive impact while other technology solutions are proving successful in smoothing the process without increasing costs.

INTEGRATING VIRTUAL SERVICES

Integrating virtual services into the customer treatment pathway is a key challenge but one the panel thought would be a critical one for insurers to pursue as it would improve the whole claims process.

But technology can also help to smooth and speed-up the claims process.



"We've recently introduced claiming in real time by WhatsApp," IMG global head of IPMI Kevin Melton said.

"There's still plenty of room for providers to improve that claims journey even more. I mean, who would have thought you could put in a claim by WhatsApp a couple of years ago?" he said.

Engage Health Group head of international benefits Penny Pemberton was an advocate of pre-payment cards which are increasingly being used.

"I never thought that would come up where they prepay; an insurer will allow you to go into a facility and make a claim automatically from a prepaid credit card," she said.

"But that seems to be working, the right measures are in place and it's a very easy process for a member."

And when quizzed whether this was driving more claims, Pemberton was content that it had not done so with the SME clients her firm had been working with.

Melton noted IMG itself had just launched a test case of a payment card and was looking to assess what effect that had on claims levels.

PRODUCT INNOVATION

New gadgets and services that can be used at home have been introduced by insurers as they are encouraging people to use these to help manage their health remotely.

Expatriate CEO Chris Carter noted one device in a crowded market has particularly caught his attention which can help with



musculoskeletal issues.

"The device costs about \$500 but this means no more visits to the physiotherapist as it's all done at home," he said.

"There are other virtual devices too.

However, it does come back to utilisation because there are certainly some customers who don't want any of that. They don't want a virtual service.

"They want to go and have tests and treatment in a real setting. So I think there's a challenge," he added.



Tristan Cleaver (left)
Penny Pemberton (right)

Indeed the nature of an international product is that different people will want different types of care and services and this demand can vary globally.

Cigna Healthcare International Health head of global individual broker sales, UK and Europe Steven Martin argued it is about providing a clear pathway.

"We use quite a lot of medical services, we have customers in different parts of the world, who may be going to see a doctor they're not familiar with, who doesn't even speak the same language," he said.

"They've been given a diagnosis and they may be thinking, is that right? Should I rely on that or could I get another opinion?"

"So, it's up to us to make sure we're putting the right care pathways in place, cost effectively, to make sure when it comes down to the planning stage, everyone's very clear about what is being claimed for that particular person at what particular cost."

Mercer Marsh Benefits multinational global mobility solutions leader UK Dave Hilton agreed.

He pointed out there are many new innovations and that they will appeal to different clients so it is important to tailor policies to the client's needs.

"Corporate clients are looking to make sure their packages are relevant to their people," he explained.

"If you look at a micro example, say



infertility, some of our clients say they don't want an infertility benefit.

"They want a fertility benefit because the infertility benefit only caters for part of the demographic in their population. So it's tweaking what they've got, making it relevant," he added.

PARITY AND DIVERSITY

Lockton senior vice president and global mobility lead – people solutions Joe Barnes added this was giving advisers greater opportunity to engage their clients.

"This is driving more opportunity for us, because more and more clients are looking for parity across benefits and an easy step is to use an IPMI product," he said.

"It also comes back to the importance of flexibility too.

"Sometimes, especially if you look at a pan-European style client, they're not going to necessarily want to provide that really rich benefit everywhere.

"So parity also needs to be relatable to local market norms as well. It's that flexibility which is driving opportunity for us in the IPMI market."

However Partners& client director James Henson revealed some of the impetus behind organisations offering diversity initiatives and benefits had been lost.

"The politics is driving less demand for these benefits - before there was a march towards it and now it's become a little bit more socially acceptable to not do it and in fact go the opposite way," he said.



"So companies will do as much as they have to do, but they've got to pay for it in the bottom line, unless they're totally committed to it.

"We must all deal with companies that will do it for face value, they think they should be doing something, so they try and do something - it looks good. Then the moment they don't have to do it they'll just forget it.

"But then we've got companies that really will do this, this is part of their ethos and those ones that it's part of their ethos, they're not going to stop doing that regardless," he concluded. ■





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UNDERSTANDING HIGH NET WORTH INDIVIDUALS' EXPECTATIONS IS ESSENTIAL

Steven Martin, head of global individual broker sales, UK and Europe, Cigna Healthcare International Health



C

igna Healthcare's roots in insurance date back more than 230 years, with a focus on healthcare for over a century.

Building on this foundation, Cigna Healthcare, Global Individual Health specialises in providing international private medical insurance (IPMI) that meets the unique needs of globally mobile customers.

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QUICKLY SHIFTING INDUSTRY

The international healthcare industry is shifting quickly. Global mobility is rising, with more people relocating for work, lifestyle, or family reasons. At the same time, healthcare costs and systems vary widely between regions.

Customers want more than an insurance policy; they expect seamless, worldwide access to quality care, often through digital services and preventative health programs. Speed, personalisation, and proactive support are becoming as important as the coverage itself.

For brokers, this means conversations with customers are changing. Instead of

focusing solely on protection against major medical events, customers want guidance on how insurance can support their everyday health and wellbeing.

Preventative care, wellness tools, and virtual consultations are features that customers look for as the standard. Insurance is no longer just about being there in a crisis; it is about helping customers live healthier lives overall, and increasingly, supporting their focus on longevity and sustained quality of life.

PROACTIVE HNWIS

Within international health, high-net-worth individuals (HNWIs) represent a distinct customer group with unique needs, requiring tailored solutions and specialized support.

Although they have the means to self-fund treatment, HNWIs frequently value insurance because navigating care across borders is complex. Accessing the right specialists, treatments, and facilities can be difficult to arrange independently, and insurance not only simplifies that process but also provides reassurance against unexpected high costs.

What sets HNWIs apart is the way they view health. They are proactive, often investing heavily in wellbeing and engaging in regular preventative check-ups.

They look for comprehensive benefits, high or unlimited coverage limits, and services that go beyond the essentials, such as second medical opinions, wellness programs, and holistic support for mental health, dental, and vision care.

Brokers play a central role in meeting these needs. HNWIs often delegate insurance management to family offices, executive assistants, or trusted brokers, which means insurers must deliver not only to the customer but also to their

representatives. Clear communication, responsiveness, and simplified processes for these stakeholders can make the difference between retaining or losing a high-value customer.

For brokers, this represents both a responsibility and an opportunity: the ability to offer solutions that feel truly bespoke is a key driver of trust and long-term relationships. The international health care market will continue to evolve, but one certainty is that HNWIs will remain a driver of demand. For brokers, understanding their expectations and having the right partner to meet them is essential.

SPECIALIST HNWI ENHANCEMENT

At Cigna Healthcare, Global Individual Health, our role is to empower brokers to deliver excellence at every touchpoint. With Cigna Platinum, your customers don't just get protection; they gain a plan designed to optimize their health all year-round, with access to world-leading medical providers, dedicated named broker support, family-focused benefits, and exclusive platforms like Carrot for expert guidance on hormonal and family-building journeys. And soon, we'll be looking to introduce an enhancement to Platinum, crafted specifically for HNWIs, offering even greater personalisation, choice, and access to services that elevate the Platinum experience to a new level. Because for this customer segment, health insurance is more than coverage; it is peace of mind, freedom, and the confidence to live life without compromise. ■



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SUPPORTING SMES: NAVIGATING THE UNIQUE CHALLENGES OF A DYNAMIC MARKET

Kevin Melton, global head of IPMI at IMG



Small- to medium-sized enterprises (SMEs) have evolving complex needs and providers can better support this vital market segment.

Amid the current macroeconomic and macropolitical climates, SMEs are continually evaluating their budgets and looking for health insurance products that provide excellent value at a competitive price point. This often results in SME groups switching providers on a relatively regular basis.

Brokers and their SME clients are seeking benefit packages that not only provide global medical cover with access to an extensive hospital provider network, but that also meet the employer's duty of care to their employees. Because of this, benefits associated with preventative care, general wellbeing, and mental wellness are increasingly important.

To meet these evolving demands of the corporate and SME market, providers are introducing modular plan designs to adapt benefit offerings to the specific needs and budget constraints of the client. This flexibility is especially important in the SME market, where resources and expertise may be limited.

When comparing the demands of the SME market to that of larger corporations, it is important to note that large corporations often have a dedicated human resources team to manage employee benefits.

This is typically not the case with SMEs, which often rely on business owners or directors who may lack insurance experience. As a result, providers need to adapt their service model accordingly to offer simplified,

hands-on support.

At IMG, we provide a personalised renewal service to all our SME clients, including face-to-face meetings with brokers and clients to offer step-by-step guidance throughout the renewal process.

EMERGING TRENDS IN SME CUSTOMER DEMAND

We are seeing growing awareness among SMEs about the importance of providing their globally mobile employees with robust health insurance that meets requirements of various geographical regions and countries to ensure territory-compliant health coverage.

Cost continues to be a key factor when SMEs are selecting a group IPMI solution, and brokers are tasked with finding the most cost-effective solutions for their clients, often switching providers to accomplish this.

Additionally, there has been an increased demand for more modular plan designs, particularly regarding maternity and dental benefits.

Brokers and their customers are also looking for user-friendly claims portals that streamline the claims submission and reimbursement process. These features are becoming critical differentiators in today's competitive market.

LOOKING AHEAD: OPPORTUNITIES FOR BROKERS AND PROVIDERS

As SMEs continue to grow and globalise, they are increasingly interested in the types of services traditionally offered to large corporate entities.

SMEs are seeking services such as employee benefit taxation advice, regulatory guidance when expanding into

new countries, and bespoke benefits and services to meet the growing duty of care requirements that employers have for their staff.

This presents a significant opportunity for brokers and providers to deliver added value, deepen client relationships, and continue driving growth in the SME sector.

IMG has expanded our focus on the SME sector, and we are actively partnering with brokers to deliver tailored solutions like flexible pricing models, dedicated account management support for groups of all sizes, and detailed management reports to help clients understand and optimise their benefit spend. IMG recognises that SMEs are looking for the same level of service and sophistication traditionally reserved for large corporations, and we're committed to meeting that expectation.

IMG is an award-winning global insurance benefits and assistance services company that has served millions of members worldwide since its founding in 1990. The preeminent provider of travel and health safety solutions, IMG offers a wide range of insurance products designed for expatriates, travellers, international students, and other individuals or groups residing outside the U.S. ■



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