Cigna Global

INTERNATIONAL HEALTH PLANS

BENEFITS SUMMARY (USD)



CIGNA GLOBAL HEALTH OPTIONS					CIGNA CLOSE CARE™	
	Plan tier	Silver	Gold	Platinum	Plan tier	Close Care
Area of cover		Worldwide o	Worldwide or Worldwide excluding USA			Country of residence + Country of nationality
	CORE COVER				CORE COVER	
	Annual overall benefit maximum - per beneficiary per period of cover	\$1,000,000	\$2,000,000	Paid in full		\$500,000
	Condition limit - per beneficiary per period of cover.	N/A	N/A	N/A		\$250,000
	Hospital charges For inpatient and daypatient treatment	✓ Private room	✓ Private room	✓ Private room		Semi-private room Kidney dialysis: \$5000 Emergency inpatient dental treatment: \$2,500
	Hospital accommodation for a parent or guardian	\$1,000	\$1,000	\checkmark		\otimes
	Pandemics, epidemics and outbreaks of infectious illnesses	✓	✓	✓		✓
	Inpatient cash benefit Per night up to 30 days per beneficiary per period of cover.	\$100	\$100	\$200		\$100
	Accident and Emergency Room Treatment	\$500	\$1,000	\$1,200		\otimes
	Transplant services	✓	✓	\checkmark		\otimes
NCE	Advanced Medical Imaging (MRI, CT and PET scans) As part of inpatient, daypatient or outpatient treatment.	\$10,000	\$15,000	√	AND DAYPATIENT	\$2,500
ISURA	Rehabilitation Including: physical physiotherapy,occupational, cardiac, pulmonary, cognitive and speech therapies.	\$5,000 Up to 30 days	\$10,000 Up to 60 days	✓ Up to 90 days		Including physical, occupational and speech therapies: \$2,000 up to 30 days
IAL MEDICAL INSURANCE	Home nursing	\$2,500 Up to 30 days	\$5,000 Up to 60 days	✓ Up to 120 days	YPAT	\otimes
	Acupuncture and Chinese Medicine	\$1,500	\$2,500	✓	D DA	Physiotherapy and complementary therapies: \$2,000
	Palliative care	\$35,000	\$60,000	\checkmark	Z	\$2,500
	Prosthetic devices	\checkmark	✓	\checkmark	Ę	Internal devices: Paid in full External devices: \$2,500
<u>o</u>	Local ambulance and air ambulance services	\checkmark	\checkmark	\checkmark	E	Road ambulances only
INTERNATIONA	Mental and Behavioural Health Care As part of inpatient, daypatient or outpatient treatment. ¹	\$5,000 Up to 30 days	\$10,000 Up to 60 days	Paid in full Up to 90 days	INPATIEN	\$3,000 Up to 60 days, including 30 days of inpatient.
Ī	Treatment for Obesity 24 MONTHS	\otimes	70% refund up to \$20,000	80% refund up to: \$25,000		\otimes
	Cancer preventative surgery	70% refund up to \$10,000	80% refund up to \$18,000	90% refund up to \$18,000		\otimes
	Cancer Care	\checkmark	\checkmark	\checkmark		✓
	Cancer related appliances Wigs and mastectomy bras Wigs and mastectomy bras		\$125 per lifetime per er related appl			\$125 per lifetime per cancer related appliance
	Congenital conditions	\$5,000	\$20,000	\$39,000		\otimes
	Out of Area Emergency Hospitalisation Cover For beneficiaries who do not have Worldwide including USA coverage. Inpatient and Daypatient treatment.	\$100,000	\$250,000	✓		\$40,000
	Routine maternity Care ² 12 MONTHS	\otimes	\$7,000	\$14,000		\otimes
	Complications from maternity ² 12 MONTHS	\otimes	\$14,000	\$28,000		\otimes
	Homebirths ² 12 MONTHS	\otimes	\$500	\$1,100		\otimes
	Newborn Care For the first 90 days following birth. ²	\$25,000	\$75,000	\$156,000		⊗



	CIGNA GLOBAL HEALTH (CIGNA CLOSE CARE℠				
		Silver	Gold	Platinum	CIGNA CLOSE CARE	
	OPTIONAL BENEFIT	rs			OP.	TIONAL BENEFITS
	Annual International Outpatient benefit maximum - per beneficiary per period of cover	\$15,000	\$35,000	Paid in full		\$5,000
	Consultations with medical practitioners and specialists (In-person or virtual appointments)	\$2,500	\$5,000	✓		\$650
	Global telehealth with Teladoc	Unlimited consultations			Unlimited consultations	
	Prescribed drugs and dressings	\$1,500	\$3,000	\checkmark		\$500
	Pathology, Radiology and diagnostic tests (excluding Advanced Medical Imaging)	\$2,500	\$5,000	✓		\$1,000
ENT	Outpatient Rehabilitation We will pay for: Outpatient Physiotherapy Outpatient Occupational therapy Osteopathy and Chiropractic treatment Speech therapy; and Cardiac and pulmonary rehabilitation.	\$5,000	\$10,000	√		Physiotherapy: \$1,000 Osteopathy and chiropractic treatment: \$650
JTPATII	Pre-natal and post natal care ²	\otimes	\$3,500	\$7,000		\otimes
INTERNATIONAL OUTPATIENT	Infertility Investigations and treatment Up to a maximum of 4 attempts per lifetime. Available to beneficiaries up to 41 years old.	\otimes	\otimes	\$10,000	ARE	\otimes
Z Z	Sleep Apnoea	\otimes	\$1,500	\$2,000	S	\otimes
INT	Genetic Cancer test 12 MONTHS	\otimes	\$2,000	\$4,000	NES	\otimes
	Acupuncture and Chinese Medicine Up to a combnined maximum of 15 consultations per period of cover.	\$2,500	\$5,000	✓	AND WELLNESS CARE	\$650
	Durable medical equipment	\checkmark	✓	✓	AND	\$1,500 Rental only. Up to 45 days per period of cover.
	Adult vaccinations	\$250	\checkmark	\checkmark	Ę	\$250
	Dental accidents	\$1,000	\checkmark	✓	쁜	\$500
	Child and Adolescence Wellbeing health	✓	✓	✓	OUTPATIE	Well child tests: \$1,000 Child immunisations: \$1,000 Annual eye and hearing test for children aged 15 and younger: Paid in full
	60+ Care	\otimes	\$1,000	\$2,000		\otimes
	Life management assistance programme Access to a range of services including: short-term counselling, mindfulness coaching, CBT programme, career development support, and pre-qualified referrals to help with day to day demands.	✓	✓	✓		✓
INTERNATIONAL HEALTH AND WELLBEING	Telephonic Wellness Coaching Access to a personal wellness coach for lasting lifestyle changes related to: nutrition, weight management, fitness, sleep, stress, and tobacco cessation.	✓	✓	✓		✓
ON	Routine adult physical examination	\$225	\$450	\$600		\$100
F₹	Cervical Cancer screening	\$225	\$450	√		
NON	Prostate cancer screening	\$225	\$450	√		Per screening limit
INTERI	Breast cancer screening	\$225	\$450	√		\$225
	Skin cancer screening	\$225	\$450	V		Combined aggregate limit of
EA	Lung cancer screening	\$225	\$450	· /		\$400 per period of cover
I	Bowel cancer screening	\$225 \$225	\$450 \$450	· /		
	Bone densitometry Dietic consultations			V		
	Up to 4 consultations per period of cover	\otimes	\otimes	✓		(×)



	CIGNA GLOBAL HEALTH OPTIONS					CIGNA CLOSE CARE℠		
			Silver	Gold	Platinum	CIG	NA CLOSE CARE	
	OPTIONAL BENEFIT			rs			OPTIONAL BENEFITS	
NTERNATIONAL VISION AND DENTAL	Eye Test 1 eye examination per period	of cover	\$100	\$200	√		\otimes	
	Expenses for: > Spectacle lenses, > Contact lenses, > Spectacle frames, > Prescription sunglasses.		\$155	\$155	\$310	NTAL CARE TREATMENT	\otimes	
M N	Annual Dental Treatment b	enefit maximum	\$1,250	\$2,500	\$5,500	AT A	\$750	
AND DENTAL	Preventative	3 MONTHS	✓	✓	✓	DENTAL ND TREA	✓	
A	Routine	3 MONTHS	80% refund	90% refund	\checkmark	DEN	80% refund per period of cover	
	Major restorative	12 MONTHS	70% refund	80% refund	✓		70% refund per period of cover	
	Orthodontic treatment	18 MONTHS	40% refund	50% refund	50% refund		\otimes	
	International Medical Evacua maximum - per beneficiary p		✓	✓	✓			
UATION E PLUS™	Crisis Assistance Plus™ Pro The Crisis Assistance Plus™ pi time-sensitive advice and coc crisis assistance for risks that when you're travelling.	rogramme provides ordinated in-country	FocusPoint International will pay for crisis consulting expenses and other additional expenses per covered response (up to a maximum of two physical incidents per beneficiary per period of cover).					
ANG	Medical Evacuation		✓	✓	✓	This option is not included in Cigna Close Care sM health pla		
SSIST	Medical Repatriation		✓	✓	✓			
INTERNATIONAL EVACUATION AND CRISIS ASSISTANCE PLUS™	Repatriation of mortal rem	ains	✓	✓	✓			
	Travel costs for an accomp	anying person	✓	✓	✓			
	Compassionate visit - trave Up to a maximum of 5 trips p		\$1,200	\$1,200	\$1,200			
	Compassionate visit - living Per day up to 10 days per visi		\$155	\$155	\$155			





¹ Day limit only applies to inpatient and daypatient treatments.

Cigna Global Health Options and Close CaresM are available in EUR and GBP currencies also.

Please note, this is a representation of the benefits available and does not contain the terms, conditions, and exclusions that may be specific to each benefit. Please refer to the respective Cigna Global Health Options and Cigna Close Care^{5M} Customer Guides for full benefit details and the additional currencies. The benefits described are deemed accurate at the date of publication and may be subject to change without notice. This document serves only as a reference and does not form part of a legal contract. Coverage and benefits are available except where prohibited by applicable law or eligibility. Nothing in this document constitutes legal, tax, financial planning, health or medical advice.

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² For treatment incurred in either Hong Kong or Singapore, this benefit is only available once the mother has been a beneficiary under this policy for a continuous period of at least 24 months or more.