



you are one of a kind so are we

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Why choose a Cigna Global plan?

Our experience

We've provided global health insurance for over 30 years. Today, we have 70 million customer relationships in over 200 countries and jurisdictions. Looking after them is an international workforce of 31,000 people, plus a network of more than 1 million hospitals, physicians, clinics and health and wellness specialists.

Our mission

Everything we do is driven by our mission to help the people we serve improve their health, wellbeing and sense of security.

Why we're different

Our customers choose us because only Cigna gives them all of the following:

 access to our unparalleled network of trusted hospitals, physicians and other healthcare professionals.

- the flexibility to tailor a cost-effective plan to suit their individual needs.
- the convenience and confidence of Cigna customer care.
- the reassurance of our experience in delivering international healthcare.
- globally compliant healthcare plans.

Why you need us

There are lots of different reasons you might need a Cigna Global plan. Here are a few:

- the quality of your local country's healthcare system does not meet your standards or needs.
- or, even if you are able to find good quality local healthcare, it's too expensive.
- you find the local healthcare system confusing or a struggle due to language or cultural barriers.
- your country of residence requires you to have international private medical insurance.



GLOBAL HEALTH OPTIONS

How our plans work

WHY CHOOSE US?



✓ We are #1

We are the largest provider of international medical insurance globally, providing access to over 1,000,000 quality hospitals, physicians and clinics worldwide.



Ease & flexibility

Our product portfolio and modular approach with two areas of cover allows for customization, and helps you build a plan to suit your unique needs.



Simplicity & service

No hidden limits or exclusions. Access to 24/7/365 service and speak to a live person.



SELECT YOUR CORE PLAN

International Medical Insurance



- Hospital accommodation and treatment
- Surgeon & consultation fees
- Cancer treatment
- · Drugs and dressings

2 areas of cover

- WorldWide
- WorldWide excluding US

SILVER \$1,000,000 GOLD \$2,000,000 **PLATINUM**

\$3,000,000

ADD YOUR OPTIONAL MODULES

International Outpatient



More extensive outpatient care for treatments that don't require an overnight stay in hospital.

International Vision & Dental



Vision care and a wide range of preventative, routine and major dental treatments.

International Health & Wellbeing



Proactively manage your own healthcare.

International Medical Evacuation



When medically necessary treatment isn't available to you locally in an emergency.

MANAGE YOUR PREMIUM



Deductible options

The initial amount you must pay before Cigna will pay your claims. See over for full details

Cost share options

The percentage of each claim which you must pay after your deductible has been paid, up to your out of pocket maximum.

See over for full details



PAY FOR YOUR PLAN















We accept Electronic Funds Transfer, company cheque and most major credit and debit cards. You can pay monthly, quarterly (3% discount), or annually (4% discount).

International Medical Insurance

Our plans comprise of 3 distinct levels of cover: Silver, Gold and Platinum.

Choose your level of cover from the table below. All amounts apply per beneficiary and per period of cover (except where otherwise noted).

International Medical Insurance is your essential cover for inpatient, outpatient and accommodation costs, as well as cover for cancer, psychiatric care and much more. Our Gold and Platinum plans also give you cover for maternity care.

Your overall limit	Silver	Gold	Platinum
Annual benefit – maximum per beneficiary per period of cover. This includes claims paid across all sections of International Medical Insurance.	\$1,000,000 €800,000 £650,000	\$2,000,000 €1,600,000 £1,300,000	\$3,000,000 €2,500,000 £2,000,000
Your standard medical benefits	Silver	Gold	Platinum
Hospital charges for: • nursing and accommodation for inpatient and daypatient treatment. • recovery room.	Paid in full for semi-private room	Paid in full	Paid in full
Hospital charges for:	Paid in full	Paid in full	Paid in full
Intensive care • intensive therapy. • coronary care. • high dependency unit.	Paid in full	Paid in full	Paid in full
Parental accommodation This applies to eligible dependent children under the age of 18. Cigna will pay for reasonable costs for a parent staying in the same hospital with the child where the child is required to stay in the hospital overnight. Up to the maximum amount shown per period of cover.	\$1,000 €740 £665	\$1,000 €740 £665	Paid in full
Surgeons' and anaesthetists' fees Where surgery is provided on an inpatient, daypatient or outpatient basis.	Paid in full	Paid in full	Paid in full
Specialists' consultation fees Paid in full for regular visits by a specialist during stays in hospital including intensive care by a specialist for as long as is required by medical necessity.	Paid in full	Paid in full	Paid in full
Transplant services Where treatment is provided on an inpatient basis.	Paid in full	Paid in full	Paid in full
Kidney dialysis Where treatment is provided on an inpatient, daypatient or outpatient basis.	Paid in full	Paid in full	Paid in full
Pathology, radiology and diagnostic tests (excluding Advanced Medical Imaging) Where investigations are provided on an inpatient or daypatient basis.	Paid in full	Paid in full	Paid in full
Advanced Medical Imaging (MRI, CT and PET scans) We will pay for these scans whether received on an inpatient, daypatient or an outpatient basis.	\$5,000 €3,700 £3,325	\$10,000 €7,400 £6,650	Paid in full
Physiotherapy and complementary therapies Where treatment is provided on an inpatient or daypatient basis.	\$2,500 €1,850 £1,650	\$5,000 €3,700 £3,325	Paid in full
Home nursing Up to 30 days and the maximum amount shown per period of cover.	\$2,500 €1,850 £1,650	\$5,000 €3,700 £3,325	Paid in full
Rehabilitation Up to 30 days and the maximum amount shown per period of cover.	\$2,500 €1,850 £1,650	\$5,000 €3,700 £3,325	Paid in full
Hospice stay to receive palliative care Up to the maximum amount shown per lifetime.	\$2,500 €1,850 £1,650	\$5,000 €3,700 £3,325	Paid in full

International Medical Insurance

Your standard medical benefits	Silver	Gold	Platinum
Internal prosthetic devices/surgical and medical appliances We will pay for: • a prosthetic implant, device or appliance which is inserted during surgery.	Paid in full	Paid in full	Paid in full
External prosthetic devices/surgical and medical appliances We will pay for: • a prosthetic device or appliance which is a necessary part of the treatment immediately following surgery for as long as is required by medical necessity. • a prosthetic device or appliance which is medically necessary and is part of the recuperation process on a short-term basis. For adults, we will pay for one external prosthetic device. For children up to the age of 16, we will pay for the initial prosthetic device and up to two replacement devices. Up to the maximum amount shown per period of cover.	For each prosthetic device \$3,100 €2,400 £2,000	For each prosthetic device \$3,100 €2,400 £2,000	For each prosthetic device \$3,100 €2,400 £2,000
Local ambulance and air ambulance services Medically necessary travel by local road ambulance or local air ambulance, such as a helicopter, when related to covered hospitalisation.	Paid in full	Paid in full	Paid in full
Inpatient cash benefit We will make a cash payment to the beneficiary when they: • receive treatment in hospital which is covered under this plan; • stay in a hospital overnight; and • have not been charged for their room, board and treatment costs. Per night up to 30 nights per period of cover.	\$100 €75 £65	\$100 €75 £65	\$200 €150 £130
Emergency dental treatment Dental treatment in hospital after a serious accident.	Paid in full	Paid in full	Paid in full

Your psychiatric care	Silver	Gold	Platinum
Psychiatric treatment We will pay for: • treatment of mental health conditions and disorders. • addiction treatment.	\$5,000 €3,700 £3,325	\$10,000 €7,400 £6,650	Paid in full
Whether the beneficiary is staying in a hospital overnight or receiving treatment as a daypatient or outpatient.			
A combined maximum total of 90 days cover is available in the period of cover, including up to 30 days of inpatient treatment. For daypatient and outpatient treatment, each visit will count as one day.			
An overall 5 year total limit of 180 days cover will apply, of which a maximum of 60 days can be used for inpatient treatment.			
Up to the maximum amount shown per period of cover.			

Your cancer care	Silver	Gold	Platinum
Cancer Treatment We will pay for active and evidence-based treatment received for, or related to cancer, including chemotherapy, radiotherapy, oncology, diagnostic tests and drugs whether the beneficiary is staying in a hospital overnight or receiving treatment as a daypatient or outpatient.	Paid in full	Paid in full	Paid in full

International Medical Insurance

Your parent and baby care	Silver	Gold	Platinum
Routine maternity benefit and childbirth cover Available once the mother has been covered by the policy for 10 months or more. Inpatient and outpatient treatment, including hospital charges, obstetricians' and midwives' fees. Up to the maximum amount shown per period of cover.	Not covered	\$7,000 €5,500 £4,500	\$14,000 €11,000 £9,000
Complications from maternity Available once the mother has been covered by the policy for 10 months or more. Inpatient and outpatient treatment for complications resulting from pregnancy. Caesarean sections are only covered when these are required by medical necessity. Up to the maximum amount shown per period of cover.	Not covered	\$14,000 €11,000 £9,000	\$28,000 €22,000 £18,000
Homebirths Available once the mother has been covered by the policy for 10 months or more. Up to the maximum amount shown per period of cover.	Not covered	\$500 €370 £335	\$1,100 €850 £700
Newborn care If at least one parent has been covered by the policy for a continuous period of 10 months or more prior to the newborn's birth. We will not require information about the newborn's health or a medical examination if an application is received by us to add the newborn to the policy within 30 days of the newborn's date of birth. If an application is received after 30 days of the newborn's date of birth, the newborn will be subject to medical underwriting and we will require the completion of a medical health questionnaire whereby we may apply special restrictions or exclusions. If neither parent has been covered by the policy for a continuous period of 10 months or more prior to the newborn's birth and an application is received by us to add the newborn to the policy as a beneficiary. The newborn will be subject to medical underwriting and we will require the completion of a medical health questionnaire. Cover for the newborn will be subject to medical underwriting whereby we may apply special restrictions or exclusions. Up to the maximum amount shown for treatment within the first 90 days following birth.	\$25,000 €18,500 £16,500	\$75,000 €55,500 £48,000	\$156,000 €122,000 £100,000
Congenital conditions Where treatment is provided on an inpatient or daypatient basis and the congenital condition manifested itself before the beneficiary's 18th birthday. Up to the maximum amount shown per period of cover	\$5,000 €3,700 £3,325	\$20,000 €14,800 £13,300	\$39,000 €30,500 £25,000

Your deductible and cost share options	Silver	Gold	Platinum
Deductible (various) A deductible is the amount which you must pay before any claims are covered by your plan.	\$0/\$375/\$750/\$1,500/\$3,000/\$7,500/\$10,000 €0/€275/€550/€1,100/€2,200/€5,500/€7,400 £0/£250/£500/£1,000/£2,000/£5,000/£6,650		0 / €7,400
Cost share after deductible and out of pocket maximum Cost share is the percentage of each claim not covered by your plan. The out of pocket maximum is the maximum amount of cost share you would have to pay in a period of cover. The cost share amount is calculated after the deductible is taken into account. Only amounts you pay related to cost share contribute to the out of pocket maximum.		choose your cost share percen 0% / 10% / 20% / 30% choose your out of pocket max \$2,000 or \$5,000 €1,480 or €3,700 £1,330 or £3,325	J. Company

International Outpatient

International Outpatient covers you more comprehensively for outpatient care and includes specialist consultations, prescribed outpatient drugs and dressings, physiotherapy, osteopathy, chiropractic and much more.

Your overall limit	Silver	Gold	Platinum
Annual benefit – maximum per beneficiary per period of cover. This includes claims paid across all sections of International Outpatient.	\$10,000 €7,400 £6,650	\$25,000 €18,500 £16,625	\$78,000 €61,000 £50,000
Your standard medical benefits	Silver	Gold	Platinum
Consultations with medical practitioners and specialists Up to the maximum amount shown per period of cover.	\$125 / €90 / £80 limit per visit. Up to 15 visits per year.	\$250 / €185 / £165 limit per visit. Up to 30 visits per year.	Paid in full
Pathology, radiology and diagnostic tests (excluding Advanced Medical Imaging) Where investigations are provided on an outpatient basis Up to the maximum amount shown per period of cover.	100% up to \$2,500 €1,850 £1,650	100% up to \$5,000 €3,700 £3,325	Paid in full
Physiotherapy Where treatment is provided on an outpatient basis.	100% up to \$2,500 €1,850 £1,650	100% up to \$5,000 €3,700 £3,325	Paid in full
Osteopathy and chiropractic treatment Up to the maximum visits shown per period of cover.	Paid in full up to 15 visits	Paid in full up to 15 visits	Paid in full up to 30 visits
Acupuncture, Homeopathy and Chinese medicine Up to a combined maximum of 15 visits per period of cover.	Paid in full	Paid in full	Paid in full
Restorative Speech therapy Provided on a short-term basis following a condition such as a stroke. Up to the maximum amount shown per period of cover.	100% up to \$2,500 €1,850 £1,650	100% up to \$5,000 €3,700 £3,325	Paid in full
Drugs and dressings When prescribed by a medical practitioner on an outpatient basis. Up to the maximum amount shown per period of cover.	100% up to \$500 €370 £330	100% up to \$2,000 €1,480 £1,330	Paid in full
Rental of durable medical equipment Up to a maximum of 45 days in the period of cover.	Paid in full	Paid in full	Paid in full
Adult vaccinations Up to the maximum amount shown per period of cover.	100% up to \$250 €185 £165	Paid in full	Paid in full
Dental accidents We will pay for dental treatment required for the damage to the beneficiary's sound natural tooth/teeth as the result of an accident. Treatment must commence immediately after the accident and be completed within 30 days of the date of the accident. Up to the maximum amount shown per period of cover.	100% up to \$1,000 €740 £665	Paid in full	Paid in full
Well child tests Payable for children at appropriate age intervals up to the age of 6.	Paid in full	Paid in full	Paid in full
Child immunisations Payable for children aged 17 or younger.	Paid in full	Paid in full	Paid in full
Annual routine tests One eye test and hearing test for children aged 15 or younger.	Paid in full	Paid in full	Paid in full
Your deductible and cost share options	Silver	Gold	Platinum
Deductible (various) A deductible is the amount which you must pay before any claims are covered by your plan.	\$0/\$150/\$500/\$1,000/\$1,500 €0/€110/€370/€700/€1,100 £0/£100/£335/£600/£1,000		
Cost share after deductible and out of pocket maximum Cost share is the percentage of each claim not covered by your plan. The out of pocket maximum is the maximum amount of cost share you would have to pay in a period of cover. The cost share amount is calculated after the deductible is taken	First, choose your cost share percentage: 0% / 10% / 20% / 30% Your out of pocket maximum is: \$3,000		
into account. Only amounts you pay related to cost share contribute to the out of pocket maximum.			

International Medical Evacuation

International Medical Evacuation provides coverage for reasonable transportation costs to the nearest centre of medical excellence in the event that the treatment is not available locally in an emergency. This option also includes repatriation coverage, allowing the beneficiary to return to their country of habitual residence or country of nationality to be treated in a familiar location.

Your overall limit	Silver	Gold	Platinum
Annual benefit Maximum per beneficiary	Paid in full	Paid in full	Paid in full
Your standard medical benefits	Silver	Gold	Platinum
Medical Evacuation Transfer to the nearest centre of medical excellence if the treatment the beneficiary needs is not available locally.	Paid in full	Paid in full	Paid in full
Medical repatriation	Paid in full	Paid in full	Paid in full
Repatriation of mortal remains	Paid in full	Paid in full	Paid in full
Travel cost for an accompanying person	Paid in full	Paid in full	Paid in full
Compassionate visit Up to a maximum of 5 trips per lifetime	Paid in full	Paid in full	Paid in full
Compassionate visit - travel costs Up to the maximum amount shown per period of cover	100% up to \$1,200 €1,000 £800	100% up to \$1,200 €1,000 £800	100% up to \$1,200 €1,000 £800
Compassionate visit - living allowance costs Up to the maximum amount shown per day for each visit with a maximum of 10 days per visit.	100% up to \$155 €125 £100	100% up to \$155 €125 £100	100% up to \$155 €125 £100

International Health and Wellbeing

International Health and Wellbeing covers the beneficiary for screenings, tests, examinations, counselling support for a range of life crises and tailored advice and support through our online health education and health risk assessment, helping the beneficiary to take control and manage their health the way they want.

Your standard medical benefits	Silver	Gold	Platinum
Routine adult physical exams We will pay for routine physical examinations for persons aged 18 or older. Up to the maximum amount shown per period of cover	100% up to \$225 €165 £150	100% up to \$450 €330 £300	100% up to \$600 €440 £400
Pap smear We will pay for an annual Papanicolaou screening. Up to the maximum amount shown per period of cover	100% up to \$225 €165 £150	100% up to \$450 €330 £300	Paid in full
Prostate cancer screening We will pay for an annual prostate cancer screening for men aged 50 or older. Up to the maximum amount shown per period of cover	100% up to \$225 €165 £150	100% up to \$450 €330 £300	Paid in full
Mammograms for breast cancer screening or diagnostic purposes We will pay for: • Aged 35-39: one baseline mammogram for asymptomatic women. • Aged 40-49: one mammogram for asymptomatic women every two years, or more if medically necessary. • Aged 50 or older: one mammogram each year. Up to the maximum amount shown per period of cover	100% up to \$225 €165 £150	100% up to \$450 €330 £300	Paid in full
Bowel cancer screening We will pay for an annual bowel cancer screening for beneficiaries aged 55 or older. Up to the maximum amount shown per period of cover	100% up to \$225 €165 £150	100% up to \$450 €330 £300	Paid in full
Bone densitometry We will pay for an annual scan to determine the density of the beneficiary's bones. Up to the maximum amount shown per period of cover	100% up to \$225 €165 £150	100% up to \$450 €330 £300	Paid in full
Dietetic consultations We will pay for up to 4 meetings with a dietitian per period of cover	Not covered	Not covered	Paid in full
Life management (customer assistance programme) • Available 24 hours a day, 7 days a week, 365 days a year. • Up to 5 face-to-face sessions with a professional counsellor. • Provides information, resources, and counselling on any work, life, personal, or family issue that matters to you. • Convenient online counselling via E-counselling. • Unlimited telephonic support. • SMS texting – text the support you need and receive a call back. • Crisis support. • Access life management services from your secure customer area.	Paid in full	Paid in full	Paid in full
Online health education, health assessments and web-based coaching programmes	Paid in full	Paid in full	Paid in full

International Vision and Dental

International Vision and Dental pays for the beneficiary's routine eye examination and pays costs for spectacles and lenses. It also covers a wide range of preventative, routine and major dental treatments.

Vision Care	Silver	Gold	Platinum
One eye examination per period of cover by an optometrist or ophthalmologist. Maximum per beneficiary per period of cover.	100% up to \$100 €75 £65	100% up to \$200 €150 £130	Paid in full
Expenses for: • Spectacle lenses. • Contact lenses. • Spectacle frames. • Prescription sunglasses.	100% up to \$155 €125 £100	100% up to \$155 €125 £100	100% up to \$310 €245 £200

Dental Treatment

Your overall limit	Silver	Gold	Platinum
Annual benefit Maximum per beneficiary per period of cover.	\$1,250 €930 £830	\$2,500 €1,850 £1,650	\$5,500 €4,300 £3,500

Your standard dental benefits	Silver	Gold	Platinum
Preventative Available after the beneficiary has been covered on this option for 3 months.	Paid in full	Paid in full	Paid in full
Routine Available after the beneficiary has been covered on this option for 3 months.	80% refund per period of cover	90% refund per period of cover	Paid in full
Major restorative After the beneficiary has been covered on this option for 12 consecutive months. If the beneficiary needs to claim within the first 12 months, 50% reimbursement will apply.	70% refund per period of cover	80% refund per period of cover	Paid in full
Orthodontic treatment Available for beneficiaries aged 18 or younger, after they have been covered on this option for 2 consecutive years.	40% refund per period of cover	50% refund per period of cover	50% refund per period of cover

What you can expect from us

In addition to your Cigna Global plan, there are a few more things you might like to know about us and the service you can expect as a customer of Cigna.

Comprehensive welcome pack

Once you have joined Cigna, we will send you your essential policy documents electronically within 24 hours. You will then receive a full welcome pack in the mail a few days later. Inside you'll find your:

- Customer Guide how your plan works and your guide to the benefits.
- **Certificate of Insurance** a record of the plan you chose, plus what and who it covers.
- **Policy Rules** the terms and conditions of your policy in one handy booklet.
- Membership Card proof of your identity and cover for when you need treatment.
- Claim Forms ready for when you need to make a claim or amend your policy in any way.

When you receive your pack, make sure you check the details of your policy on your certificate of insurance and keep your membership card in a safe place – you'll need to show it when you require treatment so your doctor knows who you are (it's not used for payment). It also has all the contact numbers you'll need.

Simple and quick claims process

When you need treatment, simply call our Customer Care Team and they will help you find a high quality hospital or doctor near you. Wherever possible, we will pay them directly, saving you the inconvenience of paying for your treatment yourself and claiming a refund later.

On the rare occasion you do pay for treatment yourself, we'll aim to reimburse you within five working days of receiving your claim form. The Customer Guide in your welcome pack will tell you everything you need to know about getting treatment and making a claim.



Excellent Customer Service

We're proud of our reputation for providing tailored healthcare and personalised customer care. Our philosophy is to help and treat you – not merely to process claims. We go further to make sure you are treated as an individual by:

- helping you access quality doctors and consultants who specialise in your treatment.
- sourcing centres of medical excellence wherever you are in the world.

- navigating complex healthcare systems and advising you on your cover.
- reimbursing you within five working days of receiving your claim on the rare occasion you have to pay your claim directly.
- making sure our Customer Care Team is always available to speak with you, day and night.



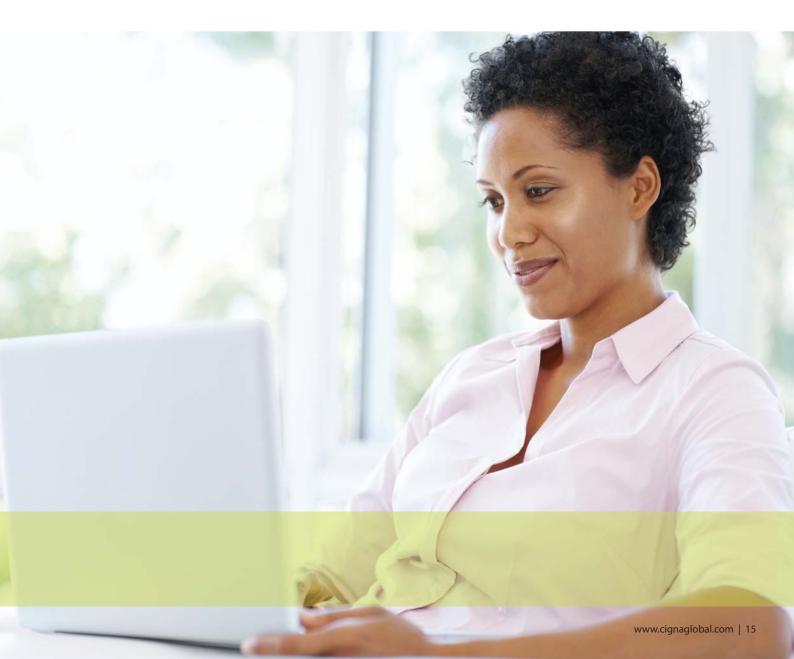
Secure online customer area

To help you manage your tailored plan – and your health – you can access our secure online customer area, which includes:

- your personal policy documents.
- our US Preferred Provider Organisation network.
- country guides containing medical, travel, safety and cultural information.

- claim forms to download.
- application forms to download should you need to amend your plan.

Then again, sometimes you just want to speak to someone on the phone, which is why we have people available to give you the help you need day or night.



Why we are your best choice

With over 30 years of experience in global health insurance, Cigna are experts in designing solutions that work all around the world.

Today, we have 71 million customer relationships around the world, including 870,000 expatriates and globally mobile individuals - showing Cigna's leadership in this market.

"It is not very often that one receives such a high level of customer service these days. I am so impressed with my experience."

Net Promoter Survey, April 2013

Put your health in the right hands

Serving these customers is an international workforce of 31,000 people, four integrated customer service centres around the globe that are ready to help 24/7/365, and an unrivalled global network of over 1 million clinics, doctors and other healthcare professionals, including:

5,600

Hospitals

667,400

Doctors

235,500

Dental offices

108,000

Behavioural specialist locations





Why Choose Cigna

- We've provided global health insurance for over 30 years
- We have 71 million customer relationships around the world
- We have an international workforce of 31,000 people
- Our network includes more than 1 million hospitals, physicians, clinics and health and wellness specialists worldwide
- It's our mission to help improve your health, wellbeing and sense of security

Why Choose Cigna Global Health Options

- You'll have access to a global network of trusted clinics and hospitals
- You have the flexibility of choosing when and how you pay
- You don't have to worry about hidden extras or unexpected costs
- You can tailor a plan to suit your individual needs
- You can choose and pay for only the cover you want
- You have the assurance of Cigna customer care and experience

Important note: This document serves only as a reference and does not form part of a legal contract. The information herein is believed accurate as of the date of publication and is subject to change. This material is intended for informational purposes only and contains only a partial and general description of benefits. We recommend that you examine your (product) policy in detail to be certain of precise terms, conditions and coverage. Coverage and benefits are available except where prohibited by applicable law. "Cigna" refers to Cigna Corporation and/ or one or more of its operating subsidiaries. Cigna Corporation is a holding company and is not an insurance or operating company. Therefore, products and services are provided exclusively by subsidiaries and not by Cigna Corporation. "Cigna" is also a registered service mark. Copyright 2013 Cigna.