

Why thousands join Cigna Global IPMI every year

Our goal at Cigna Global IPMI is to deliver a 5-Star Customer Service to those who rely on us when they're far from home. Our commitment to deliver unparalleled customer service includes:

- › Answering calls within **20 seconds**
- › Processing claims within **5 Days**⁺
- › Responding to emails within **48 hours**
- › Underwriting quote turnaround within **24 hours**⁺
- › 85% of Guarantee of Payments issued within **1 hour**⁺
- › Live Web Chat, and more

Cigna International provides access to a global network of over 1 million trusted hospitals, clinics and doctors. Everything we do is driven by our mission to help improve the health, wellbeing and sense of security of those we serve.

INSURANCE BROKER INFO

Insurance agent:

Phone:

Email:

⁺Timescales applicable only where correct and accurate information and/or documentation has been submitted.

Need help? Call today!

Contact your Broker or
visit Cigna Global online
at www.cignaglobal.com



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**Cigna Global
Individual Private Medical Insurance**



TAILOR A PLAN TO SUIT YOUR NEEDS

Your Plan Comparison Guide

Together, all the way.®



2018 Cigna Global Individual Private Medical Insurance Plans – Build a plan that’s right for you.

Core Module	Plans	Close Care	Silver	Gold	Platinum
	Area of cover	Country of nationality plus country of residence	Worldwide/ Worldwide excluding USA	Worldwide/ Worldwide excluding USA	Worldwide/ Worldwide excluding USA
Inpatient & Daypatient	Annual benefit	\$500,000	\$1,000,000	\$2,000,000	Unlimited
	Hospital charges for: operating theatre; prescribed medicines, drugs and dressings for inpatient or daypatient treatment; treatment room fees for outpatient surgery	Paid in full* semi-private room	Paid in full* semi-private room	Paid in full* private room	Paid in full private room
	Intensive care	Paid in full*			
	Surgeon and anaesthetists' fees	Paid in full*			
	Specialists' consultation fees	Paid in full*			
	Transplant services for organ, bone marrow and stem cell transplants	Not covered			
	Kidney dialysis	\$5,000			
	Pathology, radiology and diagnostic test (excluding Advanced Medical Imaging)	Paid in full*	Paid in full*	Paid in full*	Paid in full
	Local ambulance and air ambulance services**	Paid in full*			
	Emergency inpatient dental treatment	\$2,500			
	Cancer care	Paid in full*			
	Internal prosthetic devices/surgical and medical appliances	Paid in full*			
	Hospital accommodation for parent or guardian	Not covered	\$1,000	\$1,000	Paid in full
	Advanced Medical Imaging (MRI, CT and PET scans)	\$2,500	\$5,000	\$10,000	Paid in full
	Physiotherapy and complimentary therapies	\$2,000	\$2,500	\$5,000	Paid in full
	Home nursing	Not covered	\$2,500	\$5,000	Paid in full
	Rehabilitation	\$2,000	\$2,500	\$5,000	Paid in full
	Hospice and palliative care	\$2,500	\$2,500	\$5,000	Paid in full
External prosthetic devices/surgical and medical appliances	\$2,500	\$3,100	\$3,100	\$3,100	
Treatment for mental health conditions and disorders and addiction treatment***	\$3,000	\$5,000	\$10,000	Paid in full	
Inpatient cash benefit	Not covered	\$100	\$100	\$200	
Parent and Baby Care	Routine maternity benefit care			\$7,000	\$14,000
	Complications from maternity		Not Covered	\$14,000	\$28,000
	Homebirths	Not Covered		\$500	\$1,100
	Newborn care		\$25,000	\$75,000	\$156,000
	Congenital conditions		\$5,000	\$20,000	\$39,000
Prenatal and postnatal care		Not Covered	\$3,500	\$7,000	

*In this Plan Comparison Guide, Paid in full means paid in full in accordance with the overall annual benefit limit per module. **Only applies to road ambulance not air ambulance for the Close Care Plan. ***Does not include treatment for addictions for the Close Care Plan.

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 March 2018 and is subject to change. This material is intended for informational purposes only and contains only a partial and general description of benefits. Full details of the benefits are contained within the Customer Guide. Coverage and benefits are available except where prohibited by applicable law. Nothing in this document constitutes legal, tax, financial planning, health or medical advice.

Optional modules		Close Care	Silver	Gold	Platinum	
International Outpatient	Annual benefit	\$5,000	\$10,000	\$25,000	Unlimited	
	Consultation with medical practitioners and specialists	\$100 limit per visit. Up to 8 visits per year	\$125 limit per visit. Up to 15 visits per year	\$250 limit per visit. Up to 30 visits per year	Paid in full	
	Pre-natal and post-natal care	Not covered	Not covered	\$3,500	\$7,000	
	Pathology, radiology and diagnostic tests (excluding Advanced Medical Imaging)	\$1,000		\$5,000		
	Physiotherapy treatment	\$1,000	\$2,500		Paid in full	
	Restorative speech therapy	Not covered				
	Osteopathy and chiropractic treatment	\$100 per visit. Up to 8 visits per year	Paid in full* up to 15 visits	Paid in full* up to 15 visits	Paid in full up to 30 visits	
	Prescription drugs and dressings	\$500	\$500	\$2,000	Paid in full	
	Adult vaccinations	\$250	\$250	Paid in full*	Paid in full	
	Dental accidents	\$500	\$1,000	Paid in full*	Paid in full	
	Acupuncture, homeopathy and Chinese medicine	\$100 per visit. Up to 15 visits per year				
	Rental of durable equipment	\$1,500				
	Well child tests	\$1,000	Paid in full*	Paid in full*	Paid in full	
	Child immunisations	\$1,000				
	Annual eye and hearing test for children aged 15 and younger	Paid in full*				
	60+ care	Not covered	Not covered	\$1,000	\$2,000	
	International Health and Wellbeing	Routine adult physical examinations	\$100	\$225	\$450	\$600
		Pap smear				
Prostate cancer screening		Combined aggregate limit of \$400	\$225	\$450	Paid in full	
Mammograms for breast cancer screening						
Bowel cancer screening						
Bone densitometry			Not covered	Not Covered	Paid in full	
Dietetic consultations						
Life management assistance programme		Not covered	Paid in full	Paid in full	Paid in full	
Online health education, health assessments and web-based coaching programmes						
International Medical Evacuation	Annual benefit					
	Medical evacuation		Paid in full	Paid in full	Paid in full	
	Medical repatriation					
	Repatriation of mortal remains	Not covered				
	Travel costs for an accompanying person					
	Compassionate visits – travel costs		\$1,200	\$1,200	\$1,200	
Compassionate visits – living allowance		\$155	\$155	\$155		
International Vision	Eye examination	Not covered	\$100	\$200	Paid in full	
	Lenses, frames and prescription sunglasses		\$155	\$155	\$310	
International Dental	Annual benefit	\$750	\$1,250	\$2,500	\$5,500	
	Preventive dental care	Paid in full*	Paid in full*	Paid in full*	Paid in full*	
	Routine dental treatment	80% refund per period of cover	80% refund per period of cover	90% refund per period of cover	Paid in full*	
	Major restorative dental treatment	70% refund per period of cover	70% refund per period of cover	80% refund per period of cover	Paid in full*	
	Orthodontic treatment	Not covered	40% refund per period of cover	50% refund per period of cover	50% refund per period of cover	