



CIGNA GLOBAL HEALTH BENEFITS®

CignaPrimeSM Table of Benefits (USD)

Easy Access to Quality Healthcare
Around the World





CUSTOMISING YOUR CORPORATE INSURANCE PLAN

Build the most suitable healthcare plan for your employees by selecting what you truly need.

Cigna gives you the option of adding Maternity, Wellness, Dental and Vision modules on top of core modules – in-patient and out-patient coverage, to meet the needs of your organisation and your employees.

BUILDING YOUR PLAN IS AS SIMPLE AS A, B, C AND D

A. CORE: IN-PATIENT BENEFITS

1. Select **Plan Annual Maximum** per member or dependant
2. Select **Co-Insurance** option
3. Select **International Emergency Services Coverage**

C. ADD ON: MATERNITY

1. Select **Co-Insurance** option
2. Select **Maternity** option A or B

B. CORE: OUT-PATIENT BENEFITS

1. Select **Out-Patient Plan Maximum** per member or dependant
2. Select **Co-Insurance** option
3. Select **Alternative Therapies Coverage**

D. OTHER ADD-ONS

1. Select **Wellness** option
2. Select **Dental** option
3. Select **Vision** option

A. CORE: IN-PATIENT BENEFITS

STEP ONE

Select your **Plan annual maximum** (per member or dependant)

USD - 100K, 150K, 250K, 500K, 750K, 1M, 2M, 5M, 7.5M or Unlimited

STEP TWO

Select your **Co-insurance option**

None, 10%, 20% or 30%

STEP THREE

Select your **International emergency services coverage**

Not covered or Paid in Full

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BENEFIT LIMIT

PLAN ANNUAL MAXIMUM

Per member or dependant

USD - 100K, 150K, 250K, 500K, 750K, 1M, 2M, 5M, 7.5M or Unlimited

IN-PATIENT BENEFITS

HOSPITAL CHARGES FOR:

- › Nursing and accommodation for in-patient treatment;
- › Day case treatment;
- › Operating theatre and recovery room;
- › Prescribed medicines, drugs and dressings for in-patient and day case treatment.

Private Room

PARENTAL ACCOMMODATION

This applies to dependent children under the age of 18. Cigna will pay reasonable costs for a parent staying in the same hospital with the child for up to 30 days in any one year of insurance.

Paid in Full

SURGEON'S AND ANAESTHETIST'S FEES

Paid in Full

SPECIALIST PHYSICIAN'S FEES

This benefit is paid in full for regular visits by a specialist physician during stays in hospital including intensive care by a specialist physician for as long as is required by medical necessity.

Paid in Full

SURGICAL PROCEDURES	Paid in Full
RADIOTHERAPY, CHEMOTHERAPY AND ONCOLOGY	Paid in Full
RADIOLOGY AND PATHOLOGY	Paid in Full
PHYSIOTHERAPY Where required due to medical necessity.	Paid in Full
HOME NURSING CHARGES This benefit will be paid: <ul style="list-style-type: none"> › If recommended by a specialist immediately after hospital treatment for as long as is required by medical necessity; › On a full time basis for as long as is required by medical necessity for treatment which would normally be provided in a hospital. 	Paid in Full
HOSPICE/PALLIATIVE CARE <ul style="list-style-type: none"> › Cigna will pay palliative care benefit for in-patient, day case or out-patient treatment following the diagnosis that the condition is terminal and treatment can no longer be expected to cure the condition. Cigna will pay for the patient's physical care, psychological care as well as hospital or hospice* accommodation, nursing care and prescription drugs. In all circumstances, this benefit must be authorised in advance by Cigna's medical team. <p>*Hospice care is available when there is a life expectancy of less than six (6) months.</p>	Paid in Full
SURGICAL APPLIANCE AND/OR MEDICAL APPLIANCE This benefit will be paid in respect of: <ul style="list-style-type: none"> › An artificial limb, prosthesis or device which is inserted during surgery; or › An artificial prosthesis or device which is a necessary part of the treatment immediately following surgery for as long as is required by medical necessity; or › A prosthesis or appliance which is medically necessary and is part of the recuperation process on a short-term basis. 	Paid in Full
ORGAN TRANSPLANT This benefit requires pre-approval.	Paid in Full
HIV/AIDS Treatment or tests in connection with Human Immunodeficiency Virus (HIV) related illness including Acquired Immune Deficiency Syndrome (AIDS).	Paid in Full
PSYCHIATRIC AND PSYCHOLOGICAL CARE This benefit will be paid in respect of psychiatric conditions, other mental disorders or addictive conditions for a maximum of 180 days in any one year of insurance.	Paid in Full
PRIVATE AMBULANCE This benefit is payable for transport to or from a hospital when ordered for medical reasons.	Paid in Full
INTERNATIONAL EMERGENCY SERVICES <ul style="list-style-type: none"> › Emergency medical evacuation; › Medical repatriation; › Repatriation of mortal remains; <p>This benefit requires pre-approval.</p>	Paid in Full or Not Covered

Note: Cigna will consider charges made for or in connection with approved organ transplant services, including immunosuppressive medications, organ procurement costs, and donor's medical costs. The amount payable for donor's medical costs is reduced by the amount payable for those costs from any other plan or source. Certain transplants will not be covered based on general limitations (i.e. experimental procedures). The employee/dependant must contact Cigna before incurring costs relating to organ donation.

B. CORE: OUT-PATIENT BENEFITS

STEP ONE

Select your **Out-patient plan maximum** (per member or dependant)

USD - 3k, 5k, 10k, 20k or Unlimited

STEP TWO

Select your **Co-insurance option**

None, 10%, 20% or 30%

STEP THREE

Select your **Alternative therapies coverage**

**10 sessions, 20 sessions, 30 sessions,
USD - 250, 500, 1k, 2k or Paid in Full**

CIGNAPRIME

OUT-PATIENT BENEFITS

BENEFIT LIMIT¹

OUT-PATIENT ANNUAL MAXIMUM

Per member or dependant

USD - 3k, 5k, 10k, 20k or
Unlimited

CONSULTATIONS WITH MEDICAL PRACTITIONERS AND SPECIALISTS

Paid in Full

DIAGNOSTIC RADIOLOGICAL AND ADVANCED RADIOLOGICAL IMAGING

Paid in Full

PHYSIOTHERAPY

Where required due to medical necessity.

Paid in Full

ALTERNATIVE THERAPIES

This benefit includes: acupuncture, chiroprody, homeopathy, and appropriate treatment received from a registered Chinese Medicine Practitioner, where required due to medical necessity and considered a reasonable alternative for the condition being treated. There must be sufficient medical evidence the given treatment is proven to alleviate symptoms, and the treatment must be orthodox and adhere to the commonly accepted traditional practice of medicine.

**Paid in Full
or Select one limit option applicable per
year of insurance:**
10 sessions, 20 sessions, 30 sessions,
USD - 250, 500, 1,000, 2,000 or Paid in Full

CHIROPRACTIC AND OSTEOPATHY SERVICES

Paid in Full

CANCER TREATMENT

This benefit includes: oncology, chemotherapy, radiotherapy and other out-patient treatment directly associated with a cancer condition.

Paid in Full

(Costs for this benefit will not count towards the Out-patient Annual Maximum limit, if one is applicable.)

Note ¹: Benefit Limit for Out-patient applies to the Plan Annual Maximum limit.

HIV/AIDS

Treatment or tests in connection with Human Immunodeficiency Virus (HIV) related illness including Acquired Immune Deficiency Syndrome (AIDS).

Paid in Full

HORMONE REPLACEMENT THERAPY

Paid in Full

NON-SURGICAL AND MINOR SURGICAL PROCEDURES AND TREATMENT

Paid in Full

PRESCRIBED MEDICINES/DRUGS AND DRESSINGS

Paid in Full

ADULT VACCINATIONS

This benefit will be payable for vaccinations related to travel.

Paid in Full

EMERGENCY DENTAL TREATMENT

This benefit will be payable for treatment received within 24 hours of a dental emergency. Dental emergency is defined in the note below.² Benefit does not include repair of dentures.

Paid in Full

PSYCHIATRIC AND PSYCHOLOGICAL CARE

This benefit will be paid in respect of psychiatric conditions, other mental health disorders or addictive conditions.

Paid in Full
Up to USD 1,500 per year of insurance

WELL CHILD TESTS

For the purpose of preventive care, up to a maximum of 13 visits per dependent child under the age of 7, with annual immunisations payable for dependent children under the age of 19.

Paid in Full

CHILD ANNUAL EYE AND HEARING TESTS

One eye test and one hearing test for children under the age of 15.

Paid in Full

Note 2: *Dental emergency - where severe pain that is not relieved by painkillers, a dental accident occurs, or facial swelling or uncontrollable bleeding after an extraction, is being suffered and it is either outside the business hours of the member or dependant's usual dentist or the member or dependant is staying at a place which is away from the dental practice they usually visit. The treatment covered in such an instance is to purely stabilise the problem and relieve severe pain.



C. ADD-ON: MATERNITY BENEFITS

STEP ONE

Select your **Co-insurance option**

None, 10%, 20% or 30%

STEP TWO

Select one **Maternity option**

Option A or B

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MATERNITY BENEFITS

BENEFIT LIMIT¹

	OPTION A	OPTION B
ROUTINE IN-PATIENT This benefit is payable to eligible females covered under this plan.	Paid in Full up to USD - 3k, 8k, 10k, 12k, 16k, Paid in Full per year of insurance	Paid in Full up to USD - 3k, 8k, 10k, 12k, 16k, Paid in Full per year of insurance
ROUTINE OUT-PATIENT This benefit is payable to eligible females covered under this plan.		
COMPLICATED IN-PATIENT This benefit is payable to eligible females covered under this plan, and includes both elective and non-elective Caesarean sections.	Paid in Full up to USD - 3k, 8k, 10k, 12k, 16k, Paid in Full per year of insurance	
COMPLICATED OUT-PATIENT This benefit is payable to eligible females covered under this plan.		

Note ¹: Benefit Limit for Maternity applies to the Plan Annual Maximum limit.

D. ADD-ON: ADULT WELLNESS BENEFITS

STEP ONE

Select one **Wellness option**

Option A, B, C or D

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WELLNESS BENEFITS

BENEFIT LIMIT¹

	OPTION A	OPTION B	OPTION C	OPTION D
ADULT WELLNESS BENEFIT LIMIT Per member or dependant	Up to USD 400 per year of insurance	Up to USD 800 per year of insurance	Up to USD 900 per year of insurance	Up to USD 1,350 per year of insurance
ROUTINE ADULT PHYSICAL EXAMS² This benefit will be paid for, or in connection with, routine physical examinations that are evidence-based for members/dependants age 18 years old and above. <i>Cigna</i> does not cover any services and supplies which are not considered <i>orthodox</i> .				
PAP SMEAR² Cigna will pay charges for an annual Papanicolaou screening.				
PROSTATE CANCER SCREENING² Cigna will pay charges for an annual prostate cancer screening for eligible males over 40 years old.				
MAMMOGRAMS FOR BREAST CANCER SCREENING OR DIAGNOSTIC PURPOSES² This benefit will be paid in respect of: <ul style="list-style-type: none"> › one baseline mammogram for asymptomatic women aged 35-39; › a mammogram for asymptomatic women aged 40-49 every two years; › a mammogram every year for women aged 50 and over. 				

Note 1: Benefit Limit for wellness applies to the Plan Annual Maximum limit.

Note 2: Within the Parkway network - 1 Executive Screening per year of insurance is covered in full and once utilised covers the overall wellness benefit, i.e a member can only either utilise the Parkway Executive Health Screening Package or other health screening packages from a preferred doctor but not both.

D. ADD-ON: DENTAL BENEFITS

STEP ONE

Select one **Dental option**

Option A, B, C, D or E

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DENTAL BENEFITS¹

BENEFIT LIMIT

	OPTION A	OPTION B	OPTION C	OPTION D	OPTION E
DENTAL ANNUAL MAXIMUM Per member or dependant	Up to USD 500 per year of insurance	Up to USD 1,500 per year of insurance	Up to USD 1,500 per year of insurance	Up to USD 3,000 per year of insurance	Up to USD 4,500 per year of insurance
CLASS ONE Investigative and Preventative Treatment. Benefits include: X-rays, Scale and Polish.	Paid in Full	Paid in Full	80% Refund	Paid in Full	Paid in Full
CLASS TWO Basic restorative treatment, Periodontal treatment and treatment of dental injury. Benefits include: Root canal treatment, extractions, surgical procedures, occasional treatment, anaesthetics, periodontal treatment.	Paid in Full	80% Refund	80% Refund	80% Refund	80% Refund
CLASS THREE Major Restorative Treatment. Benefits include: Dentures - acrylic/synthetic, metal and metal/acrylic, crowns, inlays, mouthguard or occlusal splint.	Paid in Full	50% Refund	80% Refund	50% Refund	50% Refund
ORTHODONTIC TREATMENT Maximum benefit for dependent children under the age of 18.	Not Covered	50% Refund up to USD 900 per year of insurance	50% Refund up to USD 900 per year of insurance	50% Refund up to USD 1,200 per year of insurance	50% Refund up to USD 1,800 per year of insurance

Note ¹:

- > Examination and scale & polish will both be limited to 2 visits per year of insurance.
- > Full case assessment will be limited to one per year of insurance.
- > X-rays will be limited to four bitewings and six intra oral per year of insurance and OPG every 3 years.
- > Prolonged periodontal treatment limit of one course per year of insurance.

D. ADD-ON: VISION BENEFITS

STEP ONE

Select one **Vision option**

Option A, B, C or D

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VISION BENEFITS

BENEFIT LIMIT

	OPTION A	OPTION B	OPTION C	OPTION D
ONE EYE EXAMINATION One eye examination per year of insurance by an Optometrist or an Ophthalmologist to check for refractive error.	Paid in Full	Paid in Full	Paid in Full	Paid in Full
EXPENSES FOR <ul style="list-style-type: none">› Lenses to correct vision prescribed by an optometrist or ophthalmologist,› Eyeglass frames,› Sunglasses medically prescribed or prescribed by an optometrist or ophthalmologist	Up to USD 150 per year of insurance	Up to USD 300 per year of insurance	Up to USD 600 per year of insurance	Not Covered



ADDITIONAL ASSISTANCE SERVICES

COUNTRY GUIDES

Access through our secure customer website, country guides provide useful information for your employees' assignment.

Included

E-CLEVELAND 2nd OPINION PROGRAMME

Access to the E-Cleveland secure customer website where your employees can obtain a second medical opinion from the E-Cleveland Clinic. This benefit provides a Cleveland online review of the diagnosis and provides reassurance that the recommended medical treatment is appropriate.

Included

HEALTH AND WELLBEING

Cigna will provide access to online Global Health Assessments, clinical coaching programmes and Health Education:

- › **Global Health Assessment**

Cigna's Global Health Assessment is the entry point for our customer's health and wellness journey. It will provide the member with the opportunity to find out which areas of health they are doing really well in and which areas may need attention. After completion of the online assessment via Cigna's secure online portal, Cigna Envoy, the member will receive a highly personalised report that provides practical tips and advice on making relevant lifestyle improvements.

Included

- › **Targeted Risk Assessment**

Based on the answers to the Global Health Assessment, an invitation to complete a Targeted Risk Assessment (TRA) for each identified risk factor is immediately available online. These lifestyle risk factors include sleep, stress, nutrition, and physical activity. TRAs provide an in-depth assessment for each lifestyle risk and a highly personalised report with actionable recommendations.

- › **Health Information Library**

The Online Library allows access to a portfolio of helpful articles to help improve their lifestyle choices. These include areas such as diet, recipes, exercises, communicable disease prevention, stress management, ways to improve sleep and many others.

INTERNATIONAL EMPLOYEE ASSISTANCE PROGRAMME

Access to free, confidential assistance with any work, life, personal, or family issue. Anytime, any day, your employees can contact us for assistance including short-term professional counselling, resources, referrals and information.

Included



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