

Global Health Benefits



Welcome to Cigna Healthcare

Our mission:

Improve the health and vitality of those we serve.



Table of Contents



Living and working in the United States (U.S.)	4
Pre-departure: Checklist and tips	5
24/7 worldwide support	6
Frequently asked questions when receiving treatment in the U.S	7
Seeking treatment outside the U.S	8
Experience the Cigna Healthcare sm kind of caring	8
When to submit a claim and when it is not needed	8
Feeling good?	1O
Feel and live even better	10
Programs that help support your needs and your lifelife	11
Personalizing the customer journey	12
Online Certificate of Coverage	12
Around the clock support	12
Understand plan and health care terms	13

Living and working in the United States (U.S.)

Whether it is your first or tenth time in the U.S., it has the potential to be an amazing experience, professionally and personally. This opportunity can bring changes, questions and some uncertainty. With Cigna HealthcareSM you have valuable health coverage.

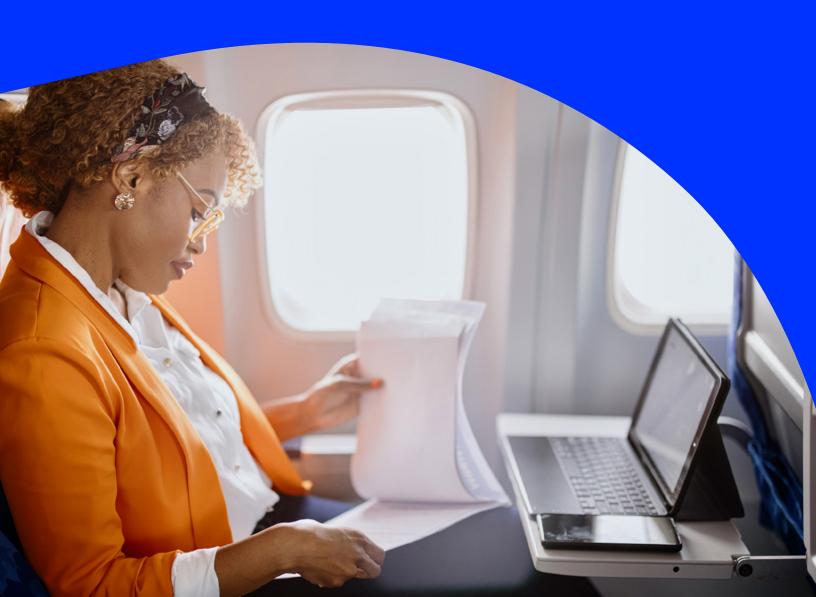
The U.S. health care system provides access to quality care with thousands of doctors and hospitals nationwide. The U.S. health care system is also unique, and accessing care here may be confusing at times.

How your health care plan will work while in the U.S.

You may be familiar with a public health system or a fee-for-service system in your home country. When you are in the U.S., your employer provides you with private health care coverage through Cigna Healthcare.

Participating providers, in our network, have agreed to discounts and will bill us directly, for covered benefits. As a result, you will save money and won't have to submit paperwork.

You can search for nearby network providers through the directory on <u>CignaEnvoy.com</u>. When you visit a network doctor or hospital, simply show your Global Health Benefits ID card. Or, you can choose to receive care and services from providers outside of our network, but you may have more out-of-pocket expenses.



Predeparture: Checklist and Tips

Before living and working outside of your home country, you'll need some assistance. We've designed an easy-to-follow checklist to make sure you have everything covered before you leave.

Let's start with some basic questions. Information is power. It's in your best interest to be sure all of your important information is updated and ready to travel with you.

- 1. Are your travel and ID documents up to date?
- 2. Are your health documents updated, renewed and reauthorized?
- **3.** Have you visited <u>CignaEnvoy.com</u> to access our pre-departure medical assessment questionnaire?



Important documents checklist

Travel
Passports Birth certificates Visas and work permits Marriage certificate (if applicable) Home address Emergency and contact information A copy of our global service numbers: • Toll-free: I.800.441.2668 and your global ID number • Direct calling: 001.302.797.3100 (collect calls accepted) Review your country guides specific to your assigned country available on Cigna Envoy Download the Cigna Envoy app Pre-departure screenings Research and create a list of physicians located in your assigned country on CignaEnvoy.com Driver's license

24/7 worldwide support

Cigna Envoy

The Cigna Envoy® website is your personalized online whole health resource. The tools and information are developed specifically for globally mobile individuals so you can easily find information you need. Register for Cigna Envoy as soon as you receive your global ID card. With your global ID card, visit CignaEnvoy.com and within the 'Customers' section, select 'Register' and follow the prompts. Once you are logged in you are ready to get started!



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Through Cigna Envoy, you can:

- · Email our global service center
- Find nearby in-network doctors and hospitals
- · Submit and track claims
- Access global telehealth^I
- Assess all aspects of your health through our Health Risk assessment tool
- Access the Employee Assistance Program (if part of your employer's plan)
- Participate in online lifestyle management programs such as nutrition, sleep and resilience
- Access health and wellness information on managing many conditions, plus healthy living information
- Update personal information and communication preferences
- Review country guides which provide practical travel information, such as cultural, health and safety travel tips, and visitor and currency information
- Sign up for electronic funds transfer (EFT) to receive claim reimbursements
- · View your global ID card information



Still have questions?

Want to know more? Get in touch with our global service center by phone or email.

Frequently asked questions when receiving treatment in the U.S.

Q: What is a primary care physician (PCP)? Do I need to choose one?

- A: Your PCP is your personal health coach who coordinates all of your medical care. That includes things like routine physicals, immunizations, medical advice and specialist referrals. He or she will get to know you and your medical history. You and each covered family member can select your own PCP. You can choose from providers practicing in:
 - Internal medicine
- General practice
- Family medicine
- Pediatrics

A PCP is not mandatory; however, we do recommend you choose one for you and your family. Your annual check-up is a good first meeting with your PCP. They can learn more about you and set up your medical history. With most plans, many in-network preventive care services are covered at IOO%.³

Q: What if my PCP is unavailable?

- **A:** If you're experiencing non-life-threatening symptoms such as sore throat, flu-like symptoms, skin rash or infection, you can visit:
 - A walk-in convenience care clinic
 - An urgent care center

Most urgent care centers are open late and on weekends and holidays. They are conveniently located and can provide the care you need much sooner especially since you won't have to deal with the typically long wait at an emergency room. To find one near you, simply log into Cigna Envoy or call us any time.

Emergency rooms should be utilized in the event of a life-threatening illness or injury (e.g., severe chest pain, severe burns, broken bones or poisoning).

Q: Do I need a referral to see a specialist?

A: Though you may want your personal doctor's advice and assistance in arranging care with a specialist, you do not need a referral to see an in-network or out-of-network specialist. If you choose an out-of network specialist, your costs may be higher.

Q: What is the difference between in-network coverage and out-of-network coverage?

A: Each time you seek medical care, you can choose to receive services from health care providers who participate in our network. When you visit an

in-network provider, you will usually have lower out-of-pocket costs. That's because our network providers have agreed to discounted rates. If you choose to visit a provider outside of our network, you may be responsible for a larger share of the costs, depending on your plan. For example, you may have a higher copay or coinsurance. Also, out-of-network charges are subject to your plan's maximum reimbursable charge, which means you may be responsible for paying any charges that exceed what your plan allows as covered expenses (also known as **balance billing**). Or, your plan might not include coverage out-of-network except for emergencies.

Q: What if I need to be admitted into the hospital?

A: In an emergency, your care is covered subject to your plan's terms. Requests for non-emergency hospital stays, other than maternity stays, must be approved in advance or "pre-certified." This enables us to determine if the services are covered by your plan.

Q: Who is responsible for obtaining pre-certification?

- A: For in-network services, your doctor is responsible for obtaining pre-certification. If you choose to receive services from an out-of-network provider, you are responsible for obtaining the pre-certification. You can request pre-certification by calling the number on your global ID card. When you call, you will need:
 - · the name of the doctor or facility
 - the procedure or procedure code
 - the date of service (DOS)

You will receive additional instructions from the doctor.

Q: How do I find out if my doctor is in the Cigna Healthcare network?

A: It is quick and easy to search for participating doctors, specialists, pharmacies, hospitals, and facilities closest to your home and work. Go to CignaEnvoy.com and click on the "Find a Provider" tab or you can call our global service center for assistance using the number on your global ID card.

Q: What services are provided through Global Telehealth?

A: Global Telehealth provides access to clinical guidance from doctors—by phone or video—through Cigna Envoy or the Cigna Wellbeing app.² A diagnosis may be provided during the consultation if enough medical information is available. If additional tests, such as lab work or radiology, are required to confirm the diagnosis then you will receive additional instructions from the doctor.

Seeking treatment outside the U.S.

Check your employer's plan documents and review your certificate of coverage to confirm your plan provides coverage for care outside the U.S., including in your home country. If your plan covers care outside the U.S., our global network consists of nearly 400,000 providers and facilities.⁴ Refer to our provider directory when you return home for a visit, for a family member who is in your home country, or when you need to travel internationally on assignment. To locate an international provider, go to CignaEnvoy.com and click on the "Find a Provider" tab or call our global service center using the number on the back of your global ID card for assistance.

Receiving medication in the U.S.

If your employer elected pharmacy benefits, you have access to our network of retail pharmacies, including those in the U.S. Virgin Islands. These pharmacies offer both brand and generic prescription medications, and you receive discounts by using your global ID card at these pharmacies. Please refer to your plan documents for a complete list of your benefits.

When you visit one of these pharmacies, we will pay the pharmacy directly for our portion of a **covered charge**, which eliminates the need for you to file a claim. You are only responsible for paying your share, e.g., **deductible**, **copay**, **coinsurance**, etc. based on your specific plan benefits.

Do you take medications on a regular basis? Then Express Scripts Home Delivery Pharmacy might be right for you! You may be able to save money when you switch from a retail pharmacy to our convenient home delivery. Other benefits include:

- Standard delivery to your U.S. home address or other preferred U.S. location at no additional cost
- 90-day refills
- Reminders so you don't forget to fill your prescriptions
- Licensed pharmacists available 24/7
- Tools to manage your prescriptions
- Medications approved by the U.S. Food and Drug Administration

To learn more about your pharmacy benefits, please refer to your plan documents.

Receiving medication outside the U.S.

If you need to fill your prescription from the U.S. while you are abroad, please contact our global service center at the number on your global ID card.

Prescriptions must be filled locally in the country where the prescription was written. For example, a prescription written in China cannot be filled by a pharmacy in the U.S. Likewise, a prescription written in the U.S. cannot be filled by a pharmacy outside the U.S.

For medications obtained from a pharmacy outside the U.S., you will need to pay for the prescription at the time of purchase and then submit a claim form to us.

Experience our kind of caring

If you or a covered family member experience a complex medical situation in the U.S., our case management team is here to help. Our case managers work closely with you, your family, and providers to coordinate access to care, explore service alternatives, monitor progress and assist with discharge planning and follow-up. All you need to do is call the number on your global ID card and we will connect you to a case manager to assist you with your particular needs.

When to submit a claim and when it is not needed

While in the U.S.

In the U.S., if you receive care from in-network providers, you do not need to submit a claim for reimbursement because providers in our network have **direct pay arrangements** in place with us. You are only responsible for paying any deductible, coinsurance or copay amounts that are part of your plan. If you choose to seek care from an out-of-network provider you may need to file a claim.

Outside the U.S.

Outside the U.S., you may need to file a claim unless you visit a provider that has a **direct pay arrangement** or has obtained a **guarantee of payment** from us. You will find this in the provider directory page on **CignaEnvoy.com**. To find out if a provider has a direct pay arrangement with us, look below their contact information in the directory for a note that says "direct settlement may be available." If so, all you need to do is present your Global Health Benefits ID card.

If you do need to submit a claim for reimbursement, follow these tips to speed up the process

- We recommend submitting your claims through <u>CignaEnvoy.com</u>, or the Cigna Envoy App. It's the fastest way to get your claims to us.
- If you choose to mail or fax your claim(s) make sure your claim form is filled out completely, and don't forget to sign!
- Fill out a separate form for each doctor and/or hospital visit
- · Be sure to add the diagnosis or explain your treatment
- Provide a detailed list of fees for each service rendered along with the date it was performed
- Make and keep handy copies of your bills, receipts and claim forms
- · Clearly state how you would like to be reimbursed
- If you cannot submit your claim online, remember that even faxes are faster than regular mail

We are there to support you, 24 hours a day, seven days a week, 365 days a year. When you need to reach out, contact us any time by phone or fax. You can also send us an email through Cigna Envoy.

Reimbursement options

- Direct payment to a U.S. or Canadian bank
- Electronic funds transfer (EFT)
- · Checks in a variety of currencies (over I35 currencies)⁵
- · Wire transfers to bank accounts around the world

Please note your bank, or an intermediary bank, may assess a fee for the receipt of wire transfers.

ePayment Plus® is a robust, integrated and accurate process that includes automatic email notification of payments directly into a bank account identified by you. You can quickly and easily self-enroll in ePayment Plus on Cigna Envoy. ePayment Plus complements the existing array of electronic payment options, such as wire transfer and EFT, available in the U.S. After you enroll in ePayment Plus, charges often applied by your bank, for wire transfers or other deposits, are removed or minimized. To sign up, go to CignaEnvoy.com.

In an emergency, we're here for you

Should something life-threatening happen, visit the nearest hospital and contact our global service center immediately. Our global service center professionals will help you get the emergency assistance you need. From ground transportation and translators to finding a specialist and facilities, we're here to help.

Guarantee of Payment

When visiting an out-of-network provider outside the U.S., they may be willing to request and accept a Guarantee of Payment (GOP) which assures payment directly to the provider for covered services. This helps prevent you from having to pay for services that would normally be covered under your plan. If your provider requests payment up front, ask them to contact us to verify benefits and confirm payment of services on your behalf. You or your provider can request a GOP at any time by calling the number on your global ID card.

Information required for a GOP

- · Hospital or facility performing the services
- · Country where services will be rendered
- Facility fax number, phone number and email address
- Requesting physician's name, phone number and email address
- · Name of recipient who will receive the GOP
- · Patient name
- · Patient's Cigna Healthcare ID number
- Diagnosis
- · Procedure to be performed
- · Date(s) of service
- Cost Estimate (If a cost estimate is not received, a Verification of Benefits (VOB) may be issued instead of a GOP, which means no GOP is issued and only benefit coverage is confirmed)
- Statement summarizing service to be covered on the GOP

Feeling good?

Health and Well-being Assessment

We support you like the unique individual you are, and want to help you live a healthy and productive life. Even if you're in perfect health, taking our Health and Well-being Assessment can provide information to help you stay that way.

It's a simple online questionnaire that takes just 15 minutes to complete. The assessment is available in more than 20 languages and cultural adaptations. You will answer questions relevant to your current situation and learn where you're doing great and where there's room for improvement. It covers sleep, nutrition, stress and physical activity. It's thorough, yet, easy to do.



Once you complete the assessment, you will receive a personalized health report along with suggestions and tips on how to improve your health and well-being. Your personal results are confidential and are not shared with your employer.

Feel and live even better

Do it online - at any time

To take your personal Health and Well-being Assessment:

- I. Go to CignaEnvoy.com
- 2. Click on 'Toolkit'
- 3. Select 'Health and Wellbeing'
- 4. Click the 'Assess my Health' link
- 5. Register and complete the assessment.

When you are finished, the customized report will help you find out what you're doing right, discover areas of improvement and offer suggestions for current issues.

It is fast, personalized, and can help you feel - and live your best every day. Take a few minutes to complete the Health and Well-being Assessment now.

Make it a habit

Want to track your progress? Then come back and take the assessment again in a few weeks or a few months. Whatever works best for you.

Global Telehealth through Cigna Envoy or the Cigna Wellbeing app

- Same day consultations with a doctor by phone (available in multiple languages); with video consultations (available in English or Spanish) from the comfort of your home or office
- A diagnosis or consultation for non-emergency health issues
- Prescriptions for common health concerns where available and when appropriate
- Discussing a medication plan



Cigna Wellbeing® app

Manage your health - Connect to better health with the Cigna Wellbeing app:

- · Health assessments in key areas that affect your wellness.
- · Wellness tips, recipes, articles and more.
- · Wellness Coaching through videos.
- Health management of chronic conditions.
- · Employee Assistance Program—real time access directly through the app if part of your employer's plan.

Note: If you have already registered for CignaEnvoy.com or the Cigna Envoy mobile app, simply log in using your current ID and password/PIN.





Click on iOS or **Android buttons** to download the Cigna Wellbeing app²









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Programs that help support your needs and your life

As a globally mobile professional, you're in a unique situation. That's why we offer products and services to help you take care of issues that go far beyond health. Our Concierge and Travel Assistance Services provide:

- Information on how to recover or replace lost documents like passports and credit cards
- Coordination of emergency travel arrangements for family members who escort another family member to the hospital
- · Personal emergency telephone translation services
- Help finding the right doctor or hospital closest to your location
- · Help finding or replacing prescription medication
- Coordination of emergency travel arrangements for children under the age of 18 who are left unattended if a family member becomes sick
- · Help obtaining necessary documents for medical claims

We work hard to make your health care easier, cost effective and comprehensive. By helping you improve your health and well-being, it's easier for you to be your best every day. To inquire about these services, please call our 24/7 global service number on your global ID card.

You can use the Decision Support Program which provides:

- Support for serious medical issues to make informed decisions about diagnosis and treatment options available to you
- An expert opinion on diagnosis and treatment already suggested; it is not for establishing medical necessity

The program is voluntary; you must give consent for your medical records to be shared with the third party service provider and the process to be activated.



Personalizing the customer journey

Delivering relevant and timely messages

To ensure you are staying up to speed on our most up-to-date information, sign up for Cigna Envoy TODAY!

With customers located all around the world, including remote and developing regions, traditional mail is often not the most effective way to communicate. In the digital age where world events are shared almost instantaneously, speed is important and even necessary for regulatory updates. That's why we've developed digital tools and communications that will allow us to personalize your customer journey through email.

Communicating by email is important to provide a superior customer experience and we pledge to deliver only timely, relevant and valuable communications at the right frequency to you.

Online Certificate of Coverage

You can access your Certificate of Coverage via the Cigna Envoy® website. All you need to do is follow these simple steps:

- I. Log into CignaEnvoy.com
- 2. Click on 'Toolkit'
- Select 'Documents', then click on 'Certificate of Insurance'

Your Certificate of Coverage⁷ will auto-generate based on your reported work location and will include your coverage details and any dependents covered under your plan, when applicable.

If you have any questions, please contact our Global Service Center by calling the number on your global ID card.

Around the clock support

Contacting Cigna Healthcare

Cigna Envoy website or app	<u>CignaEnvoy.com</u>
Telephone number	+1.800.441.2668 (Toll-free) +1.302.797.3100 (Direct, collect calls accepted)
Toll-free TDD ⁸ telephone number for the hearing impaired	+1.800.558.3604
Japanese customer support	+1.800.986.9572 (Toll-free) +1.302.797.5235 (Direct, collect calls accepted)
Fax number	+1.800.243.6998 (Toll-free) +1.302.797.3150 (Direct)
Mail delivery	Cigna Healthcare, PO Box 15050, Wilmington, DE 19850-5050, U.S.A.
Courier delivery	Cigna Healthcare, 300 Bellevue Parkway, Wilmington, DE 19809, U.S.A.

Calling from outside the U.S.: When dialing an international number, it's important to use the International Access Code. Go to CignaEnvoy.com and select **Contact Us** for a list of country codes and helpful calling instructions.

Understand plan and health care terms

Deductible amounts:

A deductible is the portion of your covered medical expenses you are responsible for paying at the beginning of each plan/calendar year until you reach a certain amount. Then your plan will begin to pay for a portion of covered health care costs.

Depending on your health plan, you may have a deductible and/or copays. If your plan includes copays, you pay the copay flat fee at the time of service. Depending on how your plan works, what you pay in copays may count toward meeting your deductible.

For example:

Let's say your plan deductible is \$1,000. That means for most covered services, you will pay 100% of your in-network medical claims until the amount you pay reaches \$1,000. After that, you pay a coinsurance amount and/or a copay and Cigna Healthcare shares in the cost.

Copayment (copay):

A fixed amount you pay at each visit. The amount can vary by the type of service such as a primary care doctor, a specialist or an emergency room visit. Not all plans use copays to share in the cost of covered expenses. Some plans may use both copays and a deductible/coinsurance, depending on the type of covered service.

For example:

If your plan has a \$30 copay for primary care physician visits and a \$50 copay for specialist visits, you will pay those flat amounts each time you visit an office. Additionally, for some services, you may have both a copay and coinsurance.

Coinsurance:

The percentage of the medical cost a covered person pays of the allowed amount for covered health services after the deductible has been met. Coinsurance is a way of saying that you and your insurance carrier each pay a share of eliqible costs that add up to 100%.

For example:

If your coinsurance is 20%, you pay 20% of the cost of your covered medical bills. Your health insurance plan will pay the other 80%. If you meet your annual deductible in June, and need an MRI in July, it is covered by coinsurance. If the covered charges for an MRI are

\$2,000 and your coinsurance is 20 percent, you need to pay \$400 (\$2,000 x 20%). Your insurance company or health plan pays the other \$1,600. The higher your coinsurance percentage, the higher your share of the cost is.

Covered charges:

Those charges which are considered medically necessary and that are within the terms and conditions of your benefit plan.

Out-of-network:

Your health plan provides coverage for services from doctors and facilities that are not in your plan's network. But if you receive covered out-of-network care, your share of the costs (i.e., deductibles, copays or coinsurance) may be higher than if you receive those services in-network.

In-network:

You will receive care from doctors or other providers who participate in the Cigna Healthcare network, which can keep your costs lower and eliminate your paperwork.

Out-of-pocket maximum:

The most you could pay for covered medical expenses in a year. This amount may include money you spend on deductibles, copays, and coinsurance. Once you reach your annual out-of-pocket maximum, your health plan will pay your covered medical and prescription costs for the rest of the year.

For example: You have a plan with a \$3,000 annual deductible and 20% coinsurance with a \$6,350 out-of-pocket maximum. You haven't had any medical expenses all year, but then you need surgery and a few days in the hospital. That hospital bill might be \$150,000. You will pay the first \$3,000 of your hospital bill as your deductible. Then, your coinsurance kicks in. The health plan pays 80% of your covered medical expenses. You'll be responsible for payment of 20% of those expenses until the remaining \$3,350 of your annual \$6,350 out-of-pocket maximum is met. Then, the plan covers 100% of your remaining eligible medical expenses |for that calendar year.

(continued on next page)

Pre-certification:

Getting approval for a service prior to receiving care.

No-referral specialist care:

If you need to see a specialist, you do not need a referral to see a doctor who participates in the Cigna Healthcare network – Just make the appointment and go! Precertification is necessary for hospitalizations, but there is no paperwork for you when using an in-network provider. You also do not need a referral to seek care out-of-network.

Emergency care:

Emergency services are covered at the in-network cost sharing level (i.e., deductibles, copays or coinsurance) even when you receive care from an out-of-network doctor or facility. However, using an in-network provider may help you save money and reduce your paperwork.

Balance billed:

When receiving care from an out-of-network provider, in addition to your deductible, copay or coinsurance, they may bill you the difference between the payment they receive from Cigna Healthcare and their usual fees.

Direct pay arrangements:

Direct payment to your provider, which helps reduce the amount you need to pay for covered services at the time of treatment.

Guarantees of payment (GOP):

Outside the U.S., assures payment directly to a doctor or hospital for covered services. This helps prevent you from having to pay for services that would normally be covered under your plan. Have your provider call us to arrange a GOP by using the number on your global ID card.

Global Health Benefits



- 1. Subject to eligibility. Telehealth services may not be available in all areas and video chat may not be available with all providers or through your specific mobile device. Telehealth services are separate form your health plan's provider network. Telehealth services are provided by third party companies/entities and not by Cigna Healthcare. Providers are solely responsible for any treatment provided to their patients.
- 2. The downloading and use of the Cigna Envoy app or the Cigna Wellbeing app are subject to the terms and conditions of the app and the online store from which it is downloaded. Standard mobile phone carrier and data usage charges apply
- 3. Not all preventive care services are covered. For example, immunizations for travel are generally not covered. Plans may vary so see your plan materials for a complete list of covered preventive care services.
- 4. Data from GHB Network analysis for full year 2022. Subject to change
- 5. Data from GHB claims internal analysis as of February 2023. Subject to change.
- 6. Healthy Rewards is a discount program. If your plan includes coverage for any of these services, this program is in addition to, not instead of, your plan benefits. Healthy Rewards programs are separate from your medical benefits. A discount program is NOT insurance, and the member must pay the entire discounted charge. Some Healthy Rewards programs are not available in all areas and programs may be discontinued at any time. Participating providers are solely responsible for their programs, products and services.
- 7. Online Certificates of Coverage will not generate for customers with no reported nationality and/or work location; or for customers with a reported nationality and/or work location in Iran, Syria, Ukraine, Cuba, North Sudan, or North Korea. Certificates of Coverage for customers with a reported work location in Russia, Germany, Turkey, Czech Republic, Switzerland and Australia will not be available online. However, they can be requested by contacting the Global Service Center at the number on the back of your Cigna Healthcare ID card.
- 8. Telecommunications Device for the Deaf. | For other convenient ways to contact our customer service center, please log in to Cigna Envoy.com.

Product availability may vary by location and plan type and is subject to change. Products may not be available in all jurisdictions and are excluded where prohibited by law. All group health insurance policies and health benefit plans contain exclusions and limitations. For costs and details of coverage, review your plan documents or contact a Cigna Healthcare representative. Web-based tools, such as Cigna Envoy® are available for informational purposes only. These tools are not intended to be a substitute for medical care provided by a physician. The listing of a health care professional or facility in the mobile directories available through the Cigna Envoy mobile app does not guarantee that the services rendered by that professional or facility are covered under your benefits plan. Refer to your plan documents, or call the number listed on your ID card, for information about the services covered under your plan benefits. References to non-partnered organizations or companies, and/or their products, processes or services, do not necessarily constitute an endorsement or warranty thereof.

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