# Medical Cigna - Global Health Benefits

Member Services/Claims: 800-441-2668 (toll free phone) or 302-797-3100 (collect calls accepted) www.cignaenvoy.com



#### **Cigna Open Access Plus**

	Member Responsibility		
	Outside of U.S.	In-Network U.S.	Out-Network U.S.
Deductible	None	None	None
Coinsurance	0% of covered expenses	0% of covered expenses	20% of covered expenses
Out-of-Pocket Limit - Individual/Family	\$500/\$1,500	None	\$1,000/\$3,000
Lifetime Maximum	Unlimited	Unlimited	Unlimited
Physician Office Visit Services (General/Specialist)	No charge	No charge	20%
Wellness Services		-	
Adult Preventive Care (18 years and older)	No charge	No charge	No charge
Well Child Care (birth through age 17)	No charge	No charge	No charge
Cancer Screening <sup>1</sup> (pap, mammogram, colorectal, PSA)	No charge	No charge	No charge
Hearing Exams (1 exam every 24 months)	No charge	No charge	20%
Hearing Aid <sup>2</sup>	No charge	No charge	20%
Laboratory and X-Ray Services (outpatient)	No charge	No charge	20%
Hospital <sup>3</sup>		-	
Inpatient Hospital Services/Room and Board	No charge	No charge	20%
Outpatient Hospital/Surgical	No charge	No charge	20%
Hospital Emergency Room	No charge	No charge	20% (No charge if true emergency)
Physical/Speech/Occupational Therapy <sup>4</sup>	No charge	No charge	20%
Chiropractic Treatment	No charge (max: 20 days)	No charge (unlimited)	20% (max: 20 days)
Mental Illness and Alcohol/Substance Abuse		-	-
Physicians Office	No charge	No charge	20%
Inpatient <sup>3</sup>	No charge	No charge	20%
Outpatient <sup>3</sup>	No charge	No charge	20%
Vision			
Eye Exams (1 exam every 24 months)	No charge	No charge	20%
Vision Hardware (1 hardware every 24 months)	No charge (up to \$250 maximum)	No charge (up to \$250 maximum)	No charge (up to \$250 maximum)
Prescription Drugs	Generic/Brand	Name/Non-Preferred Brand	
Coinsurance	20%	n/a	20%
Retail Copay (up to 30-day supply)	n/a	\$10/\$20/\$20	n/a
Mail Order Rx	n/a	\$10/\$20/\$20	n/a

<sup>1</sup> Cancer Screening: Age limits and frequency limits may apply. Please see your Plan documents for further details.

## **Dental** Cigna - Global Health Benefits

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www.cignaenvoy.com	Comprehensive Dental	
Benefits <sup>1</sup>	Member Responsibility	
Class I - Diagnostic and Preventive	No charge	
Class II - Basic Restorative	Ded., then 20%	
Class III - Major Restorative	Ded., then 50%	
Class IV - Orthodontia (child under 19 years of age)	50%	
Deductible (calendar year)		
Class I / Class IV	None / \$50	
Classes II and III - Individual/Family	\$25/\$75	
Maximum		
Classes I, II and III (per person/per calendar year)	\$1,500	
Class IV (lifetime)	\$1,500	



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Business Hours are Monday - Friday 8:30am - 4:30pm EST

1 Plan limitations, frequency schedules and age restrictions may apply to certain benefits. Please see your Plan documents for specific benefit details.

<sup>2</sup> Hearing Aid Maximum: \$1,000 every 36 months; Age Limit: Dependents under 24 years.

<sup>3</sup> Precertification for inpatient and outpatient services received in the US is required. Network providers must call Cigna's toll-free number to precertify services. Member is responsible for ensuring that Out-of-Network providers precertify services. Failure to obtain precertification may affect out-of-pocket costs. Please see your Plan documents for further details.

<sup>4</sup> Therapy combined max: 60 days.

# Additional Benefits Specific to Expatriate and Third Country National (TCN) staff

#### Holidays

Each IREX office has its own holiday schedule, but IREX will observe a total of 12 holidays in each calendar year.

#### Vacation

Employees accrue vacation according to the following schedule:

1st year = 3 work weeks (which equates to 4.38 hours per pay period)
Each year thereafter = 4 work weeks (which equates to 5.84 hours per pay period)

#### Life and Disability

TCN staff now receive basic Life/AD&D and Long-Term Disability benefits.

#### **Pension Plan**

TCNs may be eligible for a pension plan which will be determined during the hiring process.

### **Baggage/Shipping/Moving Costs**

Expatriates are eligible for reimbursement of baggage/shipping/moving costs. All costs will only be paid directly to the vendor or on a reimbursement basis if an appropriate receipt is attached to the check request and the amount is authorized under the project. Insurance for household goods being shipped is an unallowable cost and therefore not authorized.

#### **Housing Allowance**

Expatriates are provided a monthly housing allowance usually paid through payroll.

### UnitedHealthcare Global Assistance (formerly Frontier/MEDEX)

ID Number: 360201

Emergency Response Center: Call Collect 1-410-453-6330

https://members.uhcglobal.com

When working or traveling 100 or more miles away from home or outside of your home country IREX eligible travelers can obtain emergency medical, travel, and personal security assistance, 24 hours a day, anywhere in the world.

This is a summary of IREX benefits and does not represent a complete description. For additional details, please see the IREX Employee Handbook, the Benefit Plan Descriptions provided by the insurance carriers, or contact the IREX Human Resources Manager.