



Insured and/or administered by:

Cigna Health and Life Insurance Company

**Medical Benefits Abroad (MBA)
Benefits at a Glance
Maritz Holdings Inc – 08444A**

The insurance benefits and the provisions of the group policy principally affecting the persons insured are described below. The policy covers urgent and emergent expenses worldwide. The final interpretation of any specific provision herein is governed by the terms of the policy. This is your Benefits at a Glance (BAAG) if you are eligible for the insurance, become insured and remain insured in accordance with the terms, provisions and conditions of the policy.

Employee Eligibility: All full-time and part-time active employees who are traveling on the business or at the expense of the Policyholder outside their country of residence or permanent assignment for no more than 180 consecutive days per one trip

Dependent Eligibility: For your dependent spouse or domestic partner and dependent children (up to age 26 years) to be insured, they will need to be traveling with the covered person and outside their country of residence or permanent assignment for no more than 180 consecutive days per one trip. Dependents are not eligible for Accidental Death and Dismemberment coverage.

The effective date of this Schedule of Benefits is **1/1/2022**

Schedule of Benefits	
Benefit	Benefit Amount
Accidental Death & Dismemberment (AD&D)	\$200,000 – per member per year
Medical Evacuation/Repatriation	\$250,000 – per member per year
Calendar Year Medical Benefit Maximum	\$500,000 – per member per year
Calendar Year Deductible	\$0 – per member per year
Coinsurance (paid by Cigna)	100%
Out of Pocket Coinsurance Maximum	\$0 – per member per year
Prescription Drug	100% covered expenses*
Emergency Dental (includes dental accident & alleviation of sudden unexpected dental pain)	Unlimited, subject to the calendar year medical maximum – per member per year
Sojourn Travel	Includes 7 days of personal travel when taken in conjunction with an approved business trip
Room & Board Outside U.S.	Average semi-private room rate
Room & Board Inside U.S.**	Average semi-private room rate
Pre-Existing Conditions	None, subject to the calendar year medical maximum
War Risk (Medical)	Not covered
War Risk (AD&D)	Not covered
Crisis Assistance Plus (CAP)	Includes crisis consulting at no dollar limit per person per covered expense. The number of physical responses/evacuations incurring in a year are limited to two per person per year ***
Occupational Accident	Not Covered

* Covered expenses when medically necessary while on an approved international business trip. This benefit also includes replacement medicine for lost prescriptions that are medically necessary during an international business trip.

** Pre-Admission Certification / Continued Stay Review is required for all U.S. Hospitalizations

*** CAP provides time sensitive advice and coordinated in-country crisis assistance for nine different risks that impact or have the potential to impact employees while traveling (terrorism, political threats, natural disasters, blackmail or extortion, violent crimes, disappearances of persons, hijacks, kidnap and ransom* and wrongful detentions). Ransom Payments are not covered.

Please refer to the welcome kits or the MBA website at <https://customer.cignaenvoy.com/traveler> for details around submitting a claim.

Username: 08444AMBA

Password: Cigna1

Cigna health plans cover medically necessary claims related to infectious diseases and medical conditions per the terms of the health plan. Your Cigna health plan does not contain an exclusion for COVID-19 specifically or for pandemics more generally. Accordingly, your plan will provide coverage for the diagnosis and treatment of COVID-19 to the same extent as it would for any other unexpected medical condition.

Assistance is available 24 hours a day, 7 days a week:

Phone: 302.797.3535 (outside the U.S.), 800.243.1348 (inside the U.S.)

Services incurred in the U.S. by a network provider should be billed directly to Cigna Global.

FRAUD NOTICE: Any person who, knowingly and with intent to defraud any insurance company or other person: (1) files an application for insurance or statement of claim containing any materially false information; or (2) conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act.

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