

## Medical Benefits Abroad (MBA) Benefits at a Glance Kent State University– 09613A001

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/Member Eligibility:** You are in a class of eligible members as determined by your group, covered under the Participating Employer's group health plan and are traveling outside the United States.

**Dependent/Member Eligibility:** You are a dependent spouse or domestic partner or dependent child (up to age 26 years) as determined by your group, covered under the Participating Employer's group health plan and are traveling outside the United States.

The effective date of this Schedule of Benefits is 1/1/2023

Schedule of Benefits	
Benefit	Benefit Amount
Medical Evacuation/Repatriation	\$250,000 per member per year
Calendar Year Medical Benefit Maximum	\$500,000– per member per year
Calendar Year Deductible	\$0
Coinsurance (paid by Cigna)	100%
Out of Pocket Coinsurance Maximum	None
Prescription Drug	100% of covered expenses *
Emergency Dental (includes dental accident & alleviation of sudden unexpected dental pain)	Unlimited, subject to the calendar year medical maximum
Leisure Travel	Covered
Room & Board Outside U.S.	Average semi-private room rate
Room & Board Inside U.S.**	Average semi-private room rate
Pre-Existing Conditions	Covered, subject to the calendar year medical maximum

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

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

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

Username: 09613AMBA001 Password: Cigna1

NOTE: This information is a general description of benefits and is not a contract. 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. Please note that your plan does not cover expenses for services which are not medically necessary.

## 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, know ingly 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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