

Policy Summary

About Cigna’s International Employee Healthcare Plan Tailored Vision Plan

Some important points about Cigna’s International Employee Healthcare Plan are summarised below. This summary is developed as a guide to the policy, giving you details of the key benefits as well as any significant or unusual exclusions. However as it does not describe all the terms and conditions of the plan it should be read in conjunction with the List of Benefits, Exclusions and How to Claim Guide.

Key Benefits of the plan

Plan Benefits	Significant exclusions or limitations
One eye examination per year of insurance by an Optometrist or an Ophthalmologist.	
Expenses for: Lenses to correct vision; eyeglass frames.	Limited to \$300 per year of insurance. <ul style="list-style-type: none"> • Excludes sunglasses unless medically prescribed. • Excludes lenses which are not a medical necessity and are not prescribed by an Optometrist or Ophthalmologist.

The product is provided by Cigna Life Insurance Company of Europe S.A.-N.V., a Belgian company with limited liability in the UK, and administered by Cigna European Services (UK) Limited.

Length of cover

The policy is for one year from the policy start date, and is annually renewable.

Making a claim

Claims for treatment carried out *in* the USA should be sent to:

Cigna Global Health Benefits
PO Box 15964
Wilmington
Delaware 19850
United States of America

If you require assistance call the 24 hour helpline +1 800 768 1725

Claims for treatment *outside* the USA should be sent to:

Cigna Global Health Benefits
1 Knowe Road
Greenock
Scotland PA15 4RJ

If you require assistance call the 24 hour helpline +44 (0) 1475 492197

Please refer to the Cigna Helpful Guide for further information on additional charges that may apply where you request reimbursement in a currency other than the currency of premium or the currency in which the claim was incurred.

Important Information

If your plan ends, cover and services under the policy shall end immediately. Treatment and costs incurred after the date of termination shall not be paid. If treatment has been authorised or a guarantee of payment issued, Cigna will not be held responsible for any treatment costs if the plan ends or you or your dependant leave the plan before treatment has taken place.

How to make a complaint

If you wish to register a complaint, please contact us:

- in writing to Cigna Global Health Benefits at 1 Knowe Road, Greenock, PA15 4RJ
- by phone +44 (0) 1475 492197

If we are unable to resolve any complaint to your satisfaction you may then complain directly to:

Financial Ombudsman Service
Exchange Tower
Harbour Exchange Square
London E14 9SR

Tel: +44 (0) 845 080 1800

Email: complaint.info@financial-ombudsman.org.uk

Complaining to the Ombudsman does not affect your legal rights.

Compensation

Cigna is a member of the Financial Services Compensation Scheme (FSCS) and you may be entitled to compensation from the scheme if we cannot meet our obligations, however this will depend on the type of business and the circumstances of the claim.

Further information about compensation scheme arrangements is available from the FSCS at 7th Floor, Lloyds Chambers, Portsoken Street, London E1 8BN.

Who regulates us?

Cigna Life Insurance Company of Europe S.A.-N.V. - UK Branch is a foreign branch of Cigna Life Insurance Company of Europe S.A.-N.V. (Registration Number 0421.437.284), registered in Belgium with limited liability and authorised under licence number 0938) having its' principal place of business in the UK at 5 Aldermanbury Square, 13th Floor, London, England, EC2V 7HR.

Cigna Life Insurance Company of Europe S.A.-N.V. is authorised by the National Bank of Belgium and subject to limited regulation by the Financial Conduct Authority and Prudential Regulation Authority. Details about the extent of our regulation by the Financial Conduct Authority and Prudential Regulation Authority are available from us on request.