## **PRODUCT COMPARISON**



A complete list of all our benefits for each plan can be found in the Sales Brochure or Customer Guide.

	SILVER	GOLD	PLATINUM
International Medical Insurance			
Overall benefit limit	\$1,000,000	\$2,000,000	Unlimited
Hospital charges	Paid in full Semi-private room	Paid in full Private room	Paid in full Private room
Pathology, radiology and diagnostic tests	Paid in full	Paid in full	Paid in full
Advanced Medical Imaging (MRI, CT and PET scans)	\$5,000	\$10,000	Paid in full
Psychiatric care	\$5,000	\$10,000	Paid in full
Routine maternity	Not covered	\$7,000	\$14,000
Cancer Care	Paid in full	Paid in full	Paid in full
Deductible options	\$0 / \$375 / \$750 / \$1,500 / \$3,000 / \$7,500 / \$10,000		
Cost share after deductible	0% / 10% / 20% / 30% with \$2,000 or \$5,000 out of pocket maximum		
International Outpatient			
Overall benefit limit	\$10,000	\$25,000	Unlimited
Consultations with medical practitioners and specialists	\$125 limit per visit Up to 15 visits per year	\$250 limit per visit Up to 30 visits per year	Paid in full
Pre-natal and post-natal care	Not covered	\$3,500	\$7,000
Pathology, radiology and diagnostic tests (excluding Advanced Medical Imaging)	100% up to \$2,500	100% up to \$5,000	Paid in full
Drugs and dressings	100% up to \$500	100% up to \$2,000	Paid in full
Deductible options	\$0 / \$150 / \$500 / \$1,000 / \$1,500		
Cost share after deductible	0% / 10% / 20% / 30% with \$3,000 out of pocket maximum		
International Medical Evacuation			
Overall benefit limit	Paid in full	Paid in full	Paid in full
Compassionate visit- travel costs	100% up to \$1,200	100% up to \$1,200	100% up to \$1,200
International Health & Wellbeing			
Routine adult physical exams	100% up to \$225	100% up to \$450	100% up to \$600
Standard health screenings	100% up to \$225	100% up to \$450	Paid in full
Dietetic consultations - 4 meetings	Not covered	Not covered	Paid in full
International Vision & Dental			
One eye examination	100% up to \$100	100% up to \$200	Paid in full
Overall benefit limit - Dental	\$1,250	\$2,500	\$5,500
Routine dental	80% refund	90% refund	Paid in full

Please note: This is a representation of the benefits available. For a full list of benefits, refer to the Sales Brochure or Customer Guide.

## Together, all the way."



## Factsheet (02/16)

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