



**A GUIDE TO YOUR
GROUP MEDICAL
BENEFITS PLAN**

www.cignahealthbenefits.com





CONTACT US 24/7

We are here for you

Whether it's a question on the benefits of your Group Medical Insurance Plan, a particular claim or in case of emergency, don't hesitate to contact us.

Wherever you are, help is not far away. You can call, fax or send us a mail, either online or through the mail. Our staff members speak most of the languages of World Bank Group staff members and are always available to answer your questions on coverage or claim processing. Contact details are included on your **membership card**.

Reach us
24 hours a day,
7 days a week,
365 days a year!

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A woman with dark, curly hair and glasses, wearing a grey business suit jacket over a light-colored top. She is smiling broadly and has her right hand extended forward in a gesture of welcome. The background is bright and out of focus.

WELCOME

Cigna is the insurance administrator for the World Bank Group's Medical Benefits Plan (MBP) for active staff and covered family members, Retiree Medical Benefits Plan (RMBP) and covered family members and the Continuation Medical Benefits Plan (CMBP) for former staff and former participating family members.

Who is Cigna?

Think of us as support you can rely on when you need it most. As the administrator of this Plan, Cigna manages the day-to-day operations of the Plan provided by the Bank Group through claims handling, reimbursements, network provider contracting, and fraud detection.

Why read this brochure?

Everything you need to know about the Plan can be found in this brochure. It takes you step-by-step through the details of your Plan, and explains what to do when you need medical care, how to claim your expenses and how to reach us.

Terms marked in **bold** are explained on page 22.

EASY ACCESS TO HEALTH CARE

Your membership card the key to quick, seamless and stress-free support



Your membership card

the key to quick, seamless and stress-free support



Your personal webpages

online information at your fingertips



Your worldwide access

to health care providers

Membership has
its privileges

Keep your card close-at-hand as it is the key to accessing quality health care. If you are hospitalized or when you contact us, we can easily identify you by your employee ID (UPI number) shown on the card. This number also gives you access to our online information and services.

But what really counts is that with your **membership card**, a hospital can contact us to set up a **direct payment** agreement so we can pay your medical bill directly to the hospital for you. You will only be charged for expenses that are not covered by your Plan, the co-pay amount and for any personal expenses.

Find out more about our **direct payment** service in the section ‘How to obtain direct payment of your expenses?’ on p. 13.

It is important to keep your card with you at all times so you can contact us immediately in case of emergency. If you lose **your membership card** please let us know so we can send a new one. If the information on the card is incorrect, please contact the HR Service Center at (hrservicecenter@worldbank.org). They will share this information with us so we can update our databases and replace the card.

While your **membership card** allows for easy access to health care, you may sometimes need additional proof of coverage. If you need additional proof of coverage, you can contact the country office MBP administrator.



- > telephone number
- > fax number
- > email address
- > postal address



Your personal webpages online information at your fingertips

Access all information regarding your plan anytime, anywhere. Just go to your **personal webpages** located on the MBP secure website. You also have access to our online services where you'll find our **worldwide network of health care providers**.

How to access your personal webpages? It's as easy as 1, 2, 3

Step 1:

Go to www.cignahealthbenefits.com and click on Plan members.

Step 2:

Fill in your personal reference number which can be found on your **membership card**.

Step 3:

On the next screen, fill in the principal plan member's date of birth or your password (the latter applies if you have access to the secure **Online settlements** service).

Your personal webpages: a wealth of information

Aside from finding all key information related to your Group Medical Insurance Plan, you can:

- > learn more about what you are covered for and what not;
- > discover what you can do to make sure we settle your medical bills directly (our **direct payment** service);
- > find out how to claim your expenses;
- > read more about a number of chronic diseases such as asthma, diabetes, and other conditions;
- > find all our contact information.

Online services at your fingertips

If you're looking for a doctor, need a particular form or want to track your settlements, go to your **personal webpages** where you can:

- > consult our **worldwide network of health care providers**;
- > download forms which you can fill in electronically;
- > check your **Online settlements** (online Explanation of Benefits or EOB);
- > submit your claims online (you must first subscribe to this service).



Your worldwide access to health care providers

We are committed to your medical care. That's why we're providing you with access to a worldwide quality network of **several thousands of health care providers**, including hospitals, clinics, medical doctors, etc. To ensure that you have continuous access to the highest level of medical care, we continually monitor and update our network. Should you become aware of a quality provider not in our network, please send us the contact details (see page 2).

Looking for a health care provider?

Go to our Provider List on www.cignahealthbenefits.com . Depending on your need, you can search providers by name, location, type of facility and/or specialty. You can also check with whom we have a **direct payment** agreement.

If you want to visit an out-of-network provider or do not find your preferred provider in our list, contact us and we will try to make the necessary arrangements.

Because we understand that medical intervention can be very costly, we have negotiated beneficial tariff agreements and/or discounts with several health care providers and facilities.

Direct payment: no need to pay upfront

With you in mind, we have made **direct payment** agreements with all hospitals in our network. When you receive medical treatment, the hospital sends the invoice directly to us. In other words, you don't have to advance the medical bills covered by your plan first and claim for reimbursement afterwards. You will only be charged for expenses that are not covered by your Plan, the co-pay amount and for any personal expenses.

Find out more about our **direct payment** procedure in the section 'How to obtain **direct payment** of your expenses?' on p. 13.

YOUR COVER

Who is covered?

The Medical Benefits Plan covers all eligible employees in active or former service of the World Bank Group, as well as eligible family members. For more information on eligibility, see the MBP Summary Plan Description on your **personal webpages** or on the World Bank Group intranet webpages.

What is covered?

You can find an overview of the benefits, exclusions and enrollment procedures on your **personal webpages** located on the MBP secure website (see the section 'Your personal webpages' on page 8 for more information).

Keep your personal information up-to-date

Should anything change in your personal situation (such as a marriage, birth or divorce), please report these changes to the HR Service Center (hrservicecenter@worldbank.org) so they can inform us.

WHAT IF YOU NEED MEDICAL CARE?

Choosing a health care provider: freedom of choice

We offer you access to our **network of health care providers**. Consult our database of providers on your **personal webpages** located on the MBP secure website. There, you can search for providers by name, location, type of facility and/or specialty.

Read more about our **provider network** in the section 'Easy access to health care - Your worldwide access to medical providers' on p. 9.

Overview: what to do in case of ...?



HOSPITALISATION

Direct payment based on Guarantee of Payment (GOP)



EMERGENCY OR ACCIDENT

Direct payment based on Guarantee of Payment (GOP)



OUTPATIENT TREATMENT

Reimbursement procedure or Direct payment procedure

WHAT TO DO IN CASE OF ...

... hospitalisation?

If you **contact us at least 10 working days before the scheduled admission**, we will help you with the necessary administration and arrange **direct payment of your medical bills**. It doesn't matter whether the medical service provider you visit is part of our **direct payment** network or not. You will only be charged for expenses that are not covered by your Plan, the co-pay amount and for any personal expenses.

... an emergency or accident?

Sometimes hospital admissions are unexpected and unplanned. Even if you cannot contact us before being admitted, we can still help you deal with the paperwork and assist you in settling your medical bill.

In case of emergency, show your **membership card to your medical service provider upon admission** and have someone (for example, a family member or the country office MBP administrator) contact us as soon as possible. If the provider is familiar with us, he/she will then contact us to set up direct payment.

... outpatient treatment?

When visiting a doctor or other health care provider, simply pay the bill and claim your expenses with Cigna afterwards. You do not have to contact us beforehand.

Certain medical procedures require prior approval. This means you need to send us a Prior approval form (see form sample on page 18) so we can confirm coverage. The list of treatments that require **prior approval** as well as the form can be found on your **personal webpages** on the MBP secure website.

In some countries a portion of the outpatient costs are also settled by **direct payment**. This means you do not need to advance the part of the invoice that is covered by the MBP. Our online provider search on your **personal webpages** shows in which countries and from which providers direct payment can be obtained.

For more information about claiming your medical expenses, see page 15.

HOW TO OBTAIN DIRECT PAYMENT OF YOUR EXPENSES?

Direct payment based on GOP for inpatient care

Preparation provides real benefits

If you know you will be admitted to a hospital for **day surgery** or **inpatient care**, contact us beforehand.

Here's why:

- > **You don't have to advance the cost of your treatment yourself**
The hospital may agree to send the medical bill directly to us. You will only be charged for the portion of the bill that is not covered by your Medical Benefits Plan, such as your **out-of-pocket expenses** (co-pay) and non-covered items.
- > **You'll benefit from better rates**
We have negotiated preferential rates and discounts with most of the providers in our network. If you consult a provider which is not part of our direct payment network, we will try to make the necessary arrangements so that you can benefit from our **direct payment** service and beneficial rates.
- > **Your out-of-pocket expenses will be lower**
Thanks to lower rates, your **out-of-pocket expenses** will be lower as well.



Obtaining direct payment is easy. In case of a planned admission, just follow the steps below.

Step 1: Search for your preferred provider in our network

Log in to your **personal webpages** located on the MBP secure website and search for your preferred provider. If the provider is not included in the list, contact us so we can make the necessary arrangements.

Step 2: Contact us or have the provider contact us

Step 3: Download our Cost estimate form

(see form sample on page 20)

You can download the form from your **personal webpages**. Ask the health care provider to fill it in and to return it to us.

Step 4: Cigna will send a Guarantee of payment (GOP)

After we receive the Cost estimate form, we will send a **Guarantee of payment** to both you and the provider.

Step 5: Upon admission, show your membership card and Guarantee of payment to the provider

Step 6: We settle the bill directly with the provider

You only have to pay the remaining patient portion – that is your co-pay and non-covered items. After we settle with the provider, you will receive a settlement note (Explanation of Benefits or EOB).

No problem if you're unable to provide us with the information we requested. As soon as we're informed about your admission, we will contact your health care provider on your behalf.



Direct payment based on GOP for outpatient care

Besides the **direct payment** for inpatient treatments, we offer the same service for **outpatient treatment** in some countries and with a selected number of providers. Our online provider search on your **personal webpages** located on the MBP secure website shows exactly where **direct payment** can be obtained.

You can use this service by following the steps described below:

Step 1: Search for a preferred provider in our network

After logging in to your **personal webpages** you can search for your preferred provider. If **direct payment** is available, this is indicated in the provider's details.

Step 2: Show the patient's photo membership card

when visiting the provider.

Step 3: Sign the form the provider has completed

After treatment, the provider fills in a Provider Claim form which he/she will return to our office. You are requested to check the form and sign it.

Step 4: Cigna settles the bill directly with the provider

You only have to pay the remaining patient portion – that is your co-pay and non-covered items. After we settle with the provider, you will receive a settlement note (EOB).

Please remember that certain medical procedures require prior approval (see section 'What to do in case of outpatient treatment' on page 12).

HOW TO CLAIM YOUR EXPENSES?

Pay & claim

When you visit a doctor or another health care provider, simply pay the bill and claim your expenses with us afterwards.

To claim your expenses, fill in a Claim form (see form sample on page 21) found on your **personal webpages** located on the MBP secure website. Send the completed Claim form as well as the original invoices and prescriptions to us online or by mail; we will process your claim as soon as we receive it. Reimbursement is subject to applicable Plan limits and will be made for reasonable and customary charges.

Step 1: Pay for the medical expenses

The provider will give you an invoice to pay.

Step 2: Claim your expenses with us

Complete the Claim form found on your **personal webpages** and send it to us together with the original invoices.

Step 3: We will reimburse you for reasonable and customary covered expenses

We will send you an email announcing that new settlement information is available online specifying reimbursement details.

Make copies of all documents for your personal records and use a separate Claim form for every person you submit claims for.

If you prefer to submit your claims online, you can subscribe to our Online claiming service on your **personal webpages**. By claiming online you save time and effort. And an added bonus - it speeds up the reimbursement of your claims as you no longer depend on potential delays in the postal service or pouch shipment. Please note if you submit your claims online, you must keep your original invoices for a year from date of submission in case there are questions regarding your claims.

HOW WILL YOU BE REIMBURSED?

You can change your email address and password online at any time.

How and when will your claims be processed?

We understand that you expect a smooth and swift reimbursement. Therefore, we aim for a rapid and hassle-free settlement of all claims.

Here's how your claims are processed:

- › After we receive your claim, we process the claim in the currency of your salary according to the benefits set out in the MBP.
- › If more documentation or information is needed to process your claim, we will contact you.
- › Once we have processed your claim, we will reimburse the expenses through the WBG Payroll for active staff.
- › Retirees and Continuation members will be reimbursed by transfer to the bank account specified on the Claim form.

How do you know your claims have been settled?

Every time a claim has been processed, we will send you an email announcing that new settlement information is available online. If your claim was not or only partially accepted, our settlement note will explain why certain costs were not reimbursed.

You can access your personal archive of all settlement information (including reimbursement and payment details) through your **personal webpages** located on the MBP secure website.

WHEN SHOULD YOU USE WHICH FORM?

Prior approval form

A list of treatments that require prior approval is available on your **personal webpages** located on the MBP secure website and on the World Bank Group MBP webpage. If you are planning to obtain treatment that requires **prior approval**, before receiving treatment:

Step 1:

Contact us for confirmation of coverage.

Step 2:

Complete the Request for prior approval form available online.

Step 3:

Submit the completed form to us, and

Step 4:

Wait to obtain approval before proceeding with the treatment.

All forms can be found on your personal webpages located on the MBP secure website. These online forms are customized for your personal use: your name and employee ID (UPI number), transcribed into a corresponding barcode, are automatically filled in on the online form.



Request for prior approval

The medical services listed below cover those items which are subject to prior approval by the insurers' medical consultant. In case of doubt on the reimbursement or the conditions applicable for these or other medical services the insurers' advice should be sought prior to the beginning of the treatment.

Staff member	Patient
NAME	NAME
FIRST NAME	FIRST NAME
CIGNA PERS. REF. NO. (UPI NO.)	DATE OF BIRTH (D-M-Y)
3 5 7 /	RELATIONSHIP <input type="checkbox"/> SPOUSE <input type="checkbox"/> CHILD

1. Paramedical treatment (prescribed by a doctor)

<input type="checkbox"/> ALTERNATIVE MEDICINE (E.G. CHIROPRACTIC TREATMENT, OSTEOPATHY, ACUPUNCTURE)	SESSIONS
<input type="checkbox"/> PHYSIOTHERAPY (FROM 6 SESSIONS)	SESSIONS
<input type="checkbox"/> PSYCHOLOGICAL TREATMENT (FROM 6 SESSIONS)	SESSIONS
<input type="checkbox"/> SPEECH THERAPY (FROM 6 SESSIONS)	SESSIONS
<input type="checkbox"/> HOME NURSE	DAYS HOURS PER DAY
<input type="checkbox"/> DIETICIAN	SESSIONS
<input type="checkbox"/> PEDICURE	SESSIONS

2. Orthopaedic appliances (bandages, corsets, soles, shoes, etc)

SPECIFICATION

3. Orthodontic treatment for adults / therapeutic prostheses / crowns / bridges

CROWNS (3 OR MORE)

BRIDGES/IMPLANTS

ORTHODONTIC TREATMENT AFTER AGE 18

4. Inpatient care in a specialised establishment

HOSPICE CARE (TERMINALLY ILL) _____ DAYS

REHABILITATION AFTER SURGERY _____ DAYS

5. Infertility treatment

INFERTILITY TREATMENT _____ DAYS

6. Pharmaceutical products (prescribed by a doctor)

VITAMINS _____

CHINESE MEDICINE _____

INFERTILITY TREATMENT _____

IN SUPPORT OF THIS APPLICATION, I ENCLOSE A SEALED ENVELOPE FOR THE ATTENTION OF THE MEDICAL CONSULTANT, CONTAINING A DETAILED, JUSTIFICATORY REPORT AS WELL AS DETAILS ON THE REQUIRED TREATMENT

DATED _____ FROM THE PRESCRIBING PHYSICIAN

DATE	Section reserved for the insurer's medical consultant
SIGNATURE	AUTHORISATION FOR _____
	DATE _____
	SIGNATURE _____

In view of a smooth administration of the contract and/or settlement of the insurance claim, and only for that purpose, I hereby give my specific and informed consent regarding the processing of the medical data concerning myself and/or the members of my family (article 7 of the Belgian law of December 8, 1992 concerning the private life).

Cost estimate form

The Cost estimate form should be used in case of a planned hospitalization to notify Cigna. Steps to take:

Step 1:


Show this form together with your membership card to the provider.

Step 2:

Ask the provider to fill in the form, and

Step 3:

Send the form to our offices.



COST ESTIMATE

1. A fully completed form facilitates its processing.
2. Write clearly in black ink and **BLOCK CAPITALS**.
3. Complete a separate form for each patient and for each currency.
4. Return this form prior to admission to: authorization@cigna.com
 Fax Europe, Africa and Middle East +32 3 217 66 20
 Fax North and South America +1 305 908 9091
 Fax Asia and Pacific +603 2178 1699

Patient

Personal reference n° /

Family name and first name

Date of birth D M Y Gender M F

Health care provider

Name

Address (Including zip code, city and country)

Cigna provider ID (if available)

Contact person

Telephone Fax

Email

Medical information⁽¹⁾

Diagnosis or reason for admission or code (ICD10, DRG, etc.)

Medical report on the illness/treatment attached? No Yes

Type of treatment or surgery

Name and contact details of the doctor

Expected costs

Hospitalisation with overnight stay? No Yes

Admission date D M Y Expected discharge date D M Y

Doctors' fees with relevant breakdown and currency⁽²⁾:

Other medical expenses (medicines, x-rays, lab, etc.) and currency

Room type Private Semi-private Ward Cost per day Currency

Should a guarantee of payment be sent? No Yes

Signature

I hereby confirm that I have read and fully understood Cigna's Privacy policy (<https://www.cignahealthbenefits.com/en/privacy>) and give my consent to the processing of my personal information (including medical data) as defined in Cigna's Privacy policy.

Signature of the plan member and date D M Y Stamp of the hospital/doctor

(1) All information subject to medical confidentiality may be sent for the attention of our Medical consultant in a sealed envelope or to medicalboard@cigna.com.
 Diagnosis and medical reports must be legible and without abbreviations.
 (2) In case of surgery, individual fees of each member of the surgical team, in case of conservative treatment, fees of the main treating doctor.

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TERMS USED IN THIS BROCHURE

WHAT?	SHORT DESCRIPTION	READ MORE ON PAGE
Day surgery	Surgery performed on an in-and-out, same-day basis without an overnight stay.	13
Direct payment	By using this service you only need to pay your own share of the cost. The part covered by the plan is directly billed to us by your health care provider.	13 - 14
Guarantee of payment (GOP)	A letter of guarantee issued by us indicating the plan member's eligibility, cover and reimbursement rate per type of cost.	14
Health care provider network	We have established a worldwide quality network of several thousands of health care providers (doctors, physicians, pharmacies, hospitals, etc). This network is continuously being monitored, kept up-to-date and adapted to your needs. We have made direct payment and preferential tariff agreements with all providers in our network.	9
Inpatient care	Treatment given on an inpatient basis, where the date of admission differs from the date of discharge.	13
Membership card	This is the personal card you receive upon affiliation. It contains all our contact details and your personal information. You'll need this card when receiving medical care or when contacting us.	7



WHAT?	SHORT DESCRIPTION	READ MORE ON PAGE
Online settlements	This secured online service gives access to an overview of all settlement information, including reimbursement and payment details.	17
Out-of-pocket expenses	Out-of-pocket expenses are the portion of the bill that is not covered by your medical plan.	13
Outpatient treatment	Treatment given on an outpatient basis, where the date of admission is the same as the date of discharge.	12
Personal webpages	We have created personal webpages which you can access anywhere in the world and at any time. On these webpages you can find all information regarding your cover and also access our online services.	8
Prior approval	Certain medical procedures require prior approval. This means you need to send us a Prior approval form so we can confirm coverage.	12

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The following companies provide the insurance cover in Europe:

Cigna Life Insurance Company of Europe S.A.-N.V., registered in Belgium with limited liability, Avenue de Cortenbergh 52, 1000 Brussels, Belgium. Insurance company authorised in Belgium under licence number 938.

Cigna Europe Insurance Company SA-NV., registered in Belgium with limited liability, Avenue de Cortenbergh 52, 1000 Brussels, Belgium. Insurance company authorised in Belgium under licence number 2176.

Cigna Life Insurance Company of Europe SA-NV and Cigna Europe Insurance Company SA-NV., are subject to the prudential supervision of the National Bank of Belgium, Boulevard de Berlaimont 14, 1000 Brussels (Belgium) and to the supervision of the Financial Services and Markets Authority (FSMA), Rue du Congrès 12-14, 1000 Brussels (Belgium), in the field of consumer protection.

590235_EN (11/14)