



# Your Benefits Overview

National UN Volunteers –  
Assignments with Short-Term  
Benefits

January 2026



# CONTENT

This document contains a general description of Cigna’s services and medical cover provided by UNV to its National Volunteers on assignments of 1 – 3 months with short-term benefits. Should you have any questions about an item that is not listed below or want additional information, please contact Cigna or consult your personal webpages which are accessible through [www.cignahealthbenefits.com](http://www.cignahealthbenefits.com).

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## Our Services

### 24/7 availability

You can reach us anytime, anywhere in your preferred language. If you would like to know how to submit a claim or have any other questions, you can contact us by phone, e-mail, fax, or post.

**Tip:** All **our contact details** are available with the tap of a finger on the Cigna Health Benefits app. Download the free Cigna Health Benefits+ app here and manage your health plan right from your smartphone:

Android - <https://play.google.com/store/apps/details?id=com.cigna.mobile.IOHspark>

IOS - <https://apps.apple.com/app/id6746128428>

### Sometimes it helps to see how things work

From how to claim expenses to what you should do in case of hospitalization, we've created short videos to help you quickly find answers to your questions.

[Watch our video tutorials.](#)

### Our contact details

You can reach our multilingual team 24 hours a day, 7 days a week, 365 days a year. In case of emergency and when contacting us by phone, we'll ask you for your **full name** and **date of birth**. Please make sure you have **your personal reference number** ready as well.

For medical care related to a recognized service-incurred accident, you can request a **Guarantee of Payment** by going to your [personal webpages](#) and filling in the online form and notification of accident under the '**Contact**' tab. It is critical to send Cigna the confirmation from the host agency that they recognize the accident as service incurred.

Call us for free using a **toll-free number**. If there is no toll-free number available for your country of stay, you can use the UNV dedicated phone number. You can find the full list of available toll-free numbers per country on your [personal webpages](#).

We're also available via **Call back**. You can find out more about these services on your [personal webpages](#).

You can also use the [Cigna Health Benefits](#) app to download or send an **electronic version** of your **membership card** for you or a family member. Downloading your electronic membership card means you'll always have our contact information at hand in case of emergency.

### Your personal webpages – Access to online information and services

All information regarding your plan is gathered on your personal webpages. Basically, everything you need to know is easily available in one place that is accessible at anytime from anywhere in the world. Here you can also access our online services: you can search our worldwide medical service provider network for a particular provider, download fillable forms and consult your settlement details.

You can access your personal webpages as follows:

- Go to [www.cignahealthbenefits.com](http://www.cignahealthbenefits.com) and click on 'Plan members'. Log in with your personal reference number, which you will receive by email as soon as you are enrolled under the insurance plan.
- Fill in your personal reference number and password. You'll find your personal reference number on your digital membership card (**247/xxxxx**).

**Tip:** We master all major languages in-house, so there is no need for you to translate any of the documents you wish to send us.



## Access to quality health care at preferential rates

When needing medical care following a service-incurred accident, you have access to our network of medical service providers. We make sure you benefit from health care services at preferential rates. To find a provider that best suits your needs, search our provider list by location, type of facility and/or specialty on your personal webpages. When needing a hospital admission at a network provider (and out of network provider), do not forget to request Cigna to issue a Guarantee of Payment (GOP) to facilitate direct billing to Cigna.

Home My plan ▾ Claims **Provider search** My health Contact ▾

### Provider search

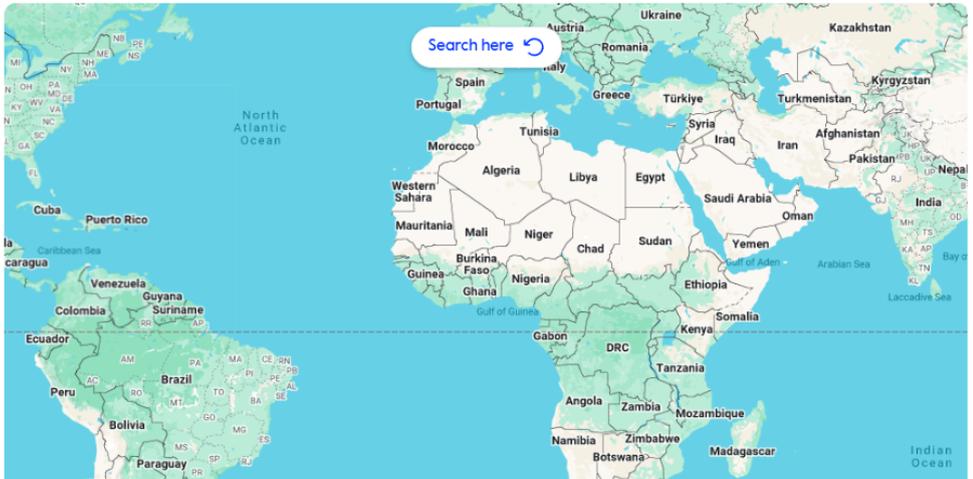
Search and contact our in-network healthcare providers. [Read more](#)

Where: Any    Provider type: Any ▾    Specialty: Any ▾    Agreement: Any ▾    Provider name:

0 Results Share

**Choose location**

Use your current location to start with or search by address, city or a provider name.



### Free choice of medical service provider

You have free choice of medical service provider. However, consulting a provider from our network can be beneficial to you, as we have negotiated advantageous rates with most of our providers.

### Let us pay your medical bills

For hospitalization costs following a recognized service-incurred accident, you can request a Guarantee of Payment (GOP) from Cigna. As such, Cigna will pay the provider directly and you do not have to advance your medical expenses and submit a claim for reimbursement. Please note that only medical care directly related to a service-incurred accident that has been recognized as such by the host entity will be covered. All other expenses are excluded from coverage.

### Notification of accident: no surprises by notifying us immediately

You are only covered for medical care needed as a direct consequence of a recognized service-incurred accident. For all such medical costs, we require a notification of accident from the host agency, confirming that they recognize the accident as being incurred during service. We need this notification of accident to reimburse claims and to issue a Guarantee of payment.



### **Swift processing of your medical claims**

As we have claims processing offices in various time zones, we can quickly process your queries and handle your claims. A complete medical claim, including the notification of accident signed by the host agency, will be processed within 5 working days on average.



# Your Coverage

## 1. In general

The Cigna insurance plan indemnifies volunteers, within the limits of the plan, for reasonable and customary charges for **medical treatment that is required as a direct consequence of a service-incurred accident that has been recognized by the host entity.**

The plan reimburses only treatment, supplies or other services that are widely and generally accepted as medically necessary and appropriate for the condition being treated, and when such treatment, supplies or other services are prescribed by a licensed, qualified medical professional. Cigna has the fiduciary duty and discretionary authority to determine, on behalf of UNV, what constitutes a covered service or benefit under the plan.

All amounts are expressed in USD.

Yearly amounts are applied per insurance year unless indicated otherwise.

Benefits	Description
Covered period	Only medical costs incurred during the assignment and as a direct consequence of a recognized service-incurred accident as confirmed by a UN Entity, hosting a UN Volunteer (hereinafter, Host Entity), per Host Entity's policies on service-incurred accidents are covered.
Reasonable & customary	Only reasonable and customary expenses are covered. This means that only fees and prices which are commonly charged for the treatment or purchase in question can be considered for reimbursement, taking into account the geographical area where the treatment is given or the item is purchased.  Any excesses in this regard will be limited to the reasonable and customary level.
Medically necessary and appropriate	Furthermore, the treatment or purchase must also be reasonable and customary from a medical point of view. This means, for example, that the number of treatment sessions/days of admission/dosage of medication should be medically justified.
Prescriptions required	Prescription from a doctor is required for medication, for psychological care, and for paramedical care (physiotherapy, nursing care, etc.).
Territorial limits	<b>Only in the country of assignment.</b>  <b>No coverage is foreseen in the following countries: USA, Switzerland, UK, Russia, Singapore, and Hong Kong.</b>
Service-incurred accident	An injury, illness, or death that occurs while engaged in activities and at the location required for the performance of the official duties. In other words, the accident is work-related and happened as a direct result of employment or service. The Host Entity must follow its internal policies to recognize the accident as being service-incurred in nature.
First-line treatment	The first method that a doctor chooses to treat a particular medical condition.
Sickness	A deterioration of health confirmed by a legally qualified physician.

Benefits	Description
Notification of Accident	<p>In case of a volunteer suffering from a service-incurred accident, the volunteer must <b>inform Cigna within 2 working days</b> by email on <a href="mailto:Clientservice1@cignahealthcare.com">Clientservice1@cignahealthcare.com</a> and <a href="mailto:Unv.nationals@cignahealthcare.com">Unv.nationals@cignahealthcare.com</a>.</p> <p>The email should mention:</p> <ul style="list-style-type: none"> <li>○ Full name and surname of the volunteer</li> <li>○ Date of Birth</li> <li>○ Nature of the accident and confirmation that it is a service incurred accident</li> </ul> <p>The email must include the <b>notification of accident</b>. This form can be obtained through the member portal or app (under the tab "my plan", "Download forms", "notification of accident") or can be requested from Cigna. The form should be signed by the host entity.</p> <p>For outpatient care, the volunteers will pay the medical costs and submit a claim via the website <b>within 1 month from the date on which the expenses were incurred</b>.</p> <p>For hospitalization, Cigna can issue a GOP upon the volunteer providing the above stated information, including the notification of accident. The GOP to the healthcare provider will specify the overall maximum ceiling for the entire assignment of 5,000 USD.</p> <p>Cigna International Health Services has fiduciary duty and discretionary authority to determine what constitutes a covered service-incurred accident under the plan.</p>
Overall maximum	There is an overall maximum ceiling of <b>5,000 USD per assignment</b> . Only medical costs that are required as a direct consequence of a recognized service-incurred accident are covered.
Deductible or out-of-pocket expense	No deductible
Outpatient treatment/outpatient surgery/day case	Treatment given on an outpatient basis, where the date of admission is the same as the date of discharge.
Inpatient treatment/hospitalisation	Treatment given on an inpatient basis, where the date of admission differs from the date of discharge.
Currency of payment	<p>USD</p> <p>EUR</p> <p>The conversion of medical expenses incurred in a currency other than USD will be made at the UN-operational rate of exchange, in force on the date of incurring the expenses.</p>
Claim submission deadline	All claims must reach Cigna <b>within 1 month from the date on which the expenses were incurred</b> .
Permanent dismemberment	Dismemberment which is permanent and incurable or lasting for at least 12 months and being thereafter beyond hope of improvement.

## 2. Summary of benefits

### 2.1 In the Hospital

#### General Rule

Only medical costs incurred during the assignment and as a direct consequence of a recognized service-incurred accident are covered.

All treatments and medicines must be prescribed by a qualified and registered medical doctor. The items below are reimbursed at 100%, unless indicated otherwise in the remarks.

Outpatient costs are paid and claimed by the volunteer. Hospitalization costs can be directly paid by Cigna by means of a GOP, which can be issued once the host agency notifies Cigna on the accident and provides the above stipulated information.

Item	Remarks
<b>Prior notification by the host agency to Cigna is required for all hospitalisations. A notification of accident should be given within 2 working days after the accident.</b>	
Stay (bed and board expenses)	<p>100% on the basis of the price for a semi-private room or 80% of the price for a private room</p> <p>100% of the price for a private room is covered under the following circumstances:</p> <ul style="list-style-type: none"> <li>a) when the nature and gravity of the illness require private room care and such care is requested by the attending physician;</li> <li>b) when the patient is admitted on an emergency basis to a hospital, which has semi-private accommodation, but none is available at the time;</li> <li>c) when the patient is admitted to a hospital which does not have any semi-private accommodation, i.e. it has no standard of accommodation other than private rooms and general wards</li> </ul>
All-in hospitalisation	100%
Doctor's fees (surgeon, treating physician, assistant, anaesthetist,)	100%
Fees treating physician	100%
Accompanying person	Not covered

Item	Remarks
Other hospital expenses	100%
Psychiatric admission	100%
Transplantation: registration expenses	100%
Transplantation: expenses donor in case the insured is the recipient	100%
Transplantation: expenses donor in case the insured is the donor	Not covered
Private nurse during hospitalisation	100% only covered if there is a medical necessity Prior approval is required
Out-patient surgery (operating theatre required)	100%



**22 In the Special Institution/Institutional Care**

<b>Item</b>	<b>Remarks</b>
Rehabilitation/convalescence after surgery	See In the hospital 2.1
Home for the elderly/nursing home Institution for the disabled	Not covered
In-patient treatment against drug and alcohol abuse	Not covered
Cure	Not covered

## 23 Outpatient Doctor's Fees

### General Rule

Only medical costs incurred during the assignment and as a direct consequence of a recognized service-incurred accident are covered.

All treatments and medicines must be prescribed by a qualified and registered medical doctor. The items below are reimbursed at 100%, unless indicated otherwise in the remarks.

Outpatient costs are paid and claimed by the volunteer. The claim must reach Cigna within 1 month after incurring the costs.

Item	Remarks
<b>2.3.1. At the general practitioner's</b>	
Consultation	100%
Minor surgical intervention in a doctor's practice	100%
Annual subscription fees	Not covered
<b>2.3.2. At the specialist's</b>	
Consultation	100%
Minor surgical intervention at a doctor's practice	100%
Annual subscription fees	Not covered
Visit psychiatrist (=doctor)	Not covered
Psychotherapy at psychiatrist (=doctor)	Not covered
Psychotherapy at psychologist or other therapist (≠ doctor)	Not covered
Relationship therapy	Not covered
Outpatient treatment against drug and alcohol abuse	Not covered

Item	Remarks
<b>2.3.3. At the licensed qualified medical service provider's</b>	
Physiotherapy	100%
Acupuncture, Osteopathy and Chiropractic treatment	100% Prior approval required
Medical act/supervision by a nurse (wound dressing, injections,...)	100%
Custodial care (i.e. assistance with activities of daily living) by a person other than a nurse (e.g. garde-malade, home health aides,...)	Not covered
Dietician	Not covered

**24 At the Specialised Supplier's Office (among others for the disabled)**

**Preliminary Remark**

All devices must be prescribed by a qualified and registered medical doctor. Where applicable, Cigna will only reimburse the rental of devices instead of the purchase. Therefore, prior approval is always required.

Item	Remarks
In general: orthopaedic devices and repair of orthopaedic devices	100%
Hearing aids and batteries hearing aids	100%
Wheel chair, adapted buggy	100%
Adaptation to the house (shower, elevator, special lavatory,...)	Not covered
Hospital bed	100%
Rollator, Gehwagen etc.	100%
Sphygmo(mano)meter = blood pressure gauge	100%
Material for diabetics (glucometer, insulin pump, strips, ...)	100%
Aerosol	100%
In general: orthopaedic devices and repair of orthopaedic devices	100%
Home trainer	Not covered
Infrared lamp	
Decubitus material (special pillow, mattress)	
Incontinence material	

Item	Remarks
Wig	Not covered
Special bathing suit/bra after breast amputation	Not covered
CPAP-appliance	Not covered
Support stockings Orthopaedic insoles and shoes	Not covered

**25 Allergies**

Item	Remarks
Anti-allergic eiderdown coverage, mattress cover, pillow cover	Not covered
Immunotherapy	Not covered
Humidifier Air cleaner (Baby) food in case of serious metabolic disorder (e.g. Amino acid deficiency)	Not covered

**26 Contraceptives**

Item	Remarks
Prescribed contraceptives (e.g. birth control pill, IUD=intra-uterine device, contraceptive implant, contraceptive injection)	Not covered
Over-the-counter (OTC) contraceptives (condoms, diaphragm, spermicides,...)	Not covered
Abortus provocatus	Not covered
Sterilization / reversal of sterilization	Not covered

**27. Childbirth**

<b>Item</b>	<b>Remarks</b>
Amniocentesis	Not covered
Delivery in hospital/outpatient delivery	Not covered
Home delivery	Not covered
Visits midwife	Not covered
Maternity care/assistance	Not covered
Maternity pack for home delivery, Breast pump, Birth premium, Adoption premium	Not covered
Prenatal & postnatal exercises	Not covered

**28. Fertility**

<b>Item</b>	<b>Remarks</b>
IVF and/or ICSI (intra-cellular sperm injection) Including the techniques to obtain sperm (PESA, TESE, MESA, ...)	Not covered
Hormonal treatment to stimulate fertility	Not covered
IUI (intra-uterine insemination)	Not covered
Crypreservation	Not covered

29 **Transportation**

Item	Remarks
Medical emergency transportation by professional services, including medical emergency road and helicopter-ambulance (in- country)	100% Only to the closest hospital where adequate emergency care can be given and only in case of medical emergency resulting from a service-incurred accident
Search & rescue (e.g. in case of ski - accident)	Not covered
Taxi	Not covered
Own transportation	Not covered
Public transportation	Not covered
Repatriation deceased person to his / her home country	Not covered
Medical emergency evacuation by professional services of patient to another country	Not covered
Accompanying person	Not covered
Non-emergency transport / evacuation	Not covered

**20. At the Optician's**

Item	Remarks
General optical care	Not covered
Lenses/glasses/frame	Not covered
Lasik/keratotomy and other procedures to change the diopter	Not covered
Eye test to determine dioptre	Not covered

**21. At the Dentist's**

Item	Remarks
Ordinary dental care	Not covered
Half-yearly dental examination at a dentist, orthodontist, dental hygienist, dental surgeon,...	Not covered
Scaling	Not covered
Prosthesis and provisional prosthesis	
X-rays	
Orthodontic treatment: device and fees	
Dental hygienist	
Splint = mouthguard	
Implants	Not covered
Periodontitis treatment	
Treatment plan	Not covered
Dental surgery, stomatology	Hospital expenses: See In the hospital 2.1

Item	Remarks
<p>General cover of prescribed pharmaceutical products</p> <ul style="list-style-type: none"> <li>containing active medical components; and</li> <li>generally medically recognised and fully approved by the relevant legislation in force.</li> </ul>	<p>100%</p> <p>Following documents must be submitted to Cigna:</p> <ul style="list-style-type: none"> <li>doctor's prescription stating: <ul style="list-style-type: none"> <li>the name of the patient;</li> <li>the diagnosis;</li> <li>the name of the medication;</li> <li>the dosage;</li> </ul> </li> <li>the official original invoice clearly mentioning: <ul style="list-style-type: none"> <li>the date of purchase;</li> <li>the name(s) of the medication;</li> <li>the price paid for each product.</li> </ul> </li> </ul>
<p>Over-the-counter (OTC) drugs</p>	<p>100%</p> <p>OTC drugs are only covered in case they are an essential part of a treatment and when the following conditions are met:</p> <ul style="list-style-type: none"> <li>the medication must be generally medically accepted as medicine (containing enough active pharmaceutical components). This means that there has to be enough scientific proof of its effectiveness in the peer reviewed medical literature.</li> <li>the medication needs to be prescribed by a doctor for a well specified diagnosis and this diagnosis needs to be mentioned on the prescription.</li> </ul> <p>The following products are never reimbursable:</p> <ul style="list-style-type: none"> <li>cosmetics such as creams/lotions to remove wrinkles, Retin A products (unless for diagnosed severe acne), body washes/soaps, moisturizers/barrier creams, skin cleansers;</li> <li>non-mediated eye drops, hypo tears, eye lubricants</li> </ul>
<p>Drugs for obesity management/dietary products</p>	<p>Not covered</p>
<p>Chinese medicines</p>	<p>Not covered</p>
<p>Phytotherapy</p>	<p>Not covered</p>
<p>Homeopathy</p>	<p>Not covered</p>

Item	Remarks
Food/nutritional supplements	Not covered
Vitamins	Not covered
Vaccinations/preventive medication (e.g. against malaria)	Not covered
Medication to (temporarily) treat impotence (Viagra, Levitra,...)	Not covered
Bifosfonates/Medication to treat osteoporosis (Fosamax, Evista etc.)	Not covered
Nicotine substitutes	Not covered
Hair tonics	Not covered
Special shampoo or toothpaste	Not covered
Dressings/bandages	100% Only if for care of wounds
PrEP medication	Not covered

**23 In the Laboratory/Medical Imaging Facility**

Item	Remarks
Diagnostic medical imaging	100%
Lab tests	100%
Screening/preventive testing	Not covered
General or complete check-up	Not covered
Mammography	Not covered
PSA test, urological exam	Not covered
HIV-test	Not covered

**24 Life Insurance**

The capital sum payable on the death of an Insured Person following a recognized service-incurred accident amounts to 10,000 USD.

Coverage is provided under this section insofar as the decease occurs during the insurance period as a direct consequence of a service-incurred accident recognized as such by the host entity.

The service-incurred accident should be notified to [benefits@cignahealthcare.com](mailto:benefits@cignahealthcare.com) as soon as reasonably practicable and in any event within ten (10) working days from the date of the accident, unless it is not reasonably possible to do so.

A claim for payment of the life insurance capital must be made within one month of the Insured Person’s death to [benefits@cignahealthcare.com](mailto:benefits@cignahealthcare.com).

On the death of an Insured Person, the insurers will pay the Policyholder the capital sum guaranteed within 15 days of receipt of the following documents:

- the Insured Person's birth certificate or equivalent extract from the birth records in an official statistics form;
- the death certificate;
- the medical certificate stating the cause of death and the causal link between the service-incurred accident and the death;
- accident report/ description of the circumstances of the accident.
- Confirmation from UNV that the accident is recognized as service incurred.
- the dully completed Cigna discharge form.



## 2.15 Dismemberment Insurance

### Total Permanent Dismemberment

If a service-incurred accident results in total permanent dismemberment, the insured shall receive the insured sum of 10,000 USD.

The service-incurred accident should be notified to [benefits@cignahealthcare.com](mailto:benefits@cignahealthcare.com) as soon as reasonably practicable and in any event within ten (10) working days from the date of the accident, unless it is not reasonably possible to do so.

A claim for Permanent Dismemberment shall be notified to [benefits@cignahealthcare.com](mailto:benefits@cignahealthcare.com) as soon as reasonably practicable after the treating medical practitioner has indicated that the loss or dismemberment is likely to be permanent. In any event, no claim for Permanent Dismemberment shall be made later than two (2) years from the date of the service incurred accident, unless medical evidence demonstrates that the permanence of the dismemberment could not reasonably have been determined within that period.

The indemnity under this section is paid upon confirmation of the permanent dismemberment by an appointed medical expert.

### Partial Permanent Dismemberment

If a service-incurred accident results in partial total permanent dismemberment, the insured shall receive a proportion of the capital sum of 10,000 USD, according to the degree of invalidity in accordance with the scale of benefits shown below.

The service-incurred accident should be notified to [benefits@cignahealthcare.com](mailto:benefits@cignahealthcare.com) as soon as reasonably practicable and in any event within ten (10) working days from the date of the accident, unless it is not reasonably possible to do so.

A claim for Permanent Dismemberment shall be notified to [benefits@cignahealthcare.com](mailto:benefits@cignahealthcare.com) as soon as reasonably practicable after the treating medical practitioner has indicated that the loss or dismemberment is likely to be permanent. In any event, no claim for Permanent Dismemberment shall be made later than **two (2) years from the date of the service-incurred accident**, unless medical evidence demonstrates that the permanence of the dismemberment could not reasonably have been determined within that period.

The indemnity under this section is paid upon confirmation of the permanent dismemberment by an appointed medical expert.

For a person who is left-handed, on condition that he has declared so in the application for insurance, the rates relative to the upper right limb will be applied to the left and vice versa.

The invalidities, which have not been mentioned before, shall be indemnified according to their importance compared to those which have been mentioned, the Insured's profession not being taken into consideration.

Partial amputation or partial functional loss of the limbs listed in this document shall give rise to payment of benefits proportional to those payable in the case of total amputation or total functional loss.

The total loss of the use of a limb will be considered like the loss of a limb. No benefit shall be paid for the loss of limbs the use of which had been lost prior to the accident. The benefit payable for injury to a limb previously crippled shall be based solely on the difference in the state of the limb or organ before and after the accident. The extent of injury to healthy limbs as the result of an accident shall be assessed without regard to the crippled conditions of any other limbs not affected by the accident.

The total benefit payable for several dismemberments caused by the same accident shall be calculated by addition and shall not exceed either the total sum assured for total or Permanent dismemberment or the partial sum assured for total loss of the injured limb or total loss of the use thereof.

### Scale and Conditions<sup>1</sup>

Scale and conditions	Part of the capital sum reimbursed	
Incurable insanity incompatible with any gainful occupation	100%	
Total paralysis	100%	
Total blindness	100%	
Amputation or total irrevocable loss of use:	100%	
<ul style="list-style-type: none"> <li>• both arms or hands</li> <li>• both legs or feet</li> <li>• one arm or hand and one leg or foot</li> </ul>		
Total and absolute loss by amputation or excision or total functional loss of	<u>Right</u>	<u>Left</u>
<ul style="list-style-type: none"> <li>• Arms</li> <li>• Forearm</li> <li>• Hand</li> <li>• Thumb</li> <li>• Index finger</li> <li>• Middle finger</li> <li>• Ring finger</li> <li>• Little finger</li> <li>• Movement of shoulder or elbow</li> <li>• Movement of wrist</li> <li>• Thigh</li> <li>• Leg</li> <li>• Foot</li> <li>• Big toe</li> <li>• Other toe</li> <li>• Movement of hip or knee</li> <li>• Eye, excised</li> <li>• Eye, not excised</li> <li>• Total deafness in one ear</li> <li>• Total deafness in both ears</li> </ul>	75% 65% 60% 20% 16% 12% 10% 8% 30% 25% 60% 50% 40% 8% 3% 25% 30% 25% 15% 40%	60% 55% 50% 18% 14% 10% 8% 6% 25% 20% 25% 50% 40% 25% 20% 25% 15% 40%

<sup>1</sup> This is a summary of the benefits. A detailed version of the benefits is available on request.

## **2.16 Exclusions**

### **A. Exclusions applicable to the medical and dismemberment coverage:**

1. Periodic, preventive health examinations;
2. The consequences of sicknesses or accidents resulting from voluntary and intentional action on the part of the Insured Person, e.g. attempted suicide, voluntary mutilation;
3. The insurance is suspended in time of war for Insured Persons who are mobilized or who volunteer for naval, air or military service;
4. The results of wounds or injuries resulting from motor-vehicle racing and dangerous competitions in respect of which betting is allowed; normal sports competitions are covered;
5. The consequences of insurrections or riots, if by taking part the Insured Person has broken the applicable laws;
6. The consequences of brawls, except in cases of self-defense;
7. Spa cures, rejuvenation cures and cosmetic treatment. Cosmetic surgery is covered, however, when it is necessary as the result of an accident for which coverage is provided;
8. The direct or indirect results of explosions, heat release or irradiation produced by transmutation of the atomic nucleus or by radioactivity or resulting from radiation produced by the artificial acceleration of nuclear particles;
9. Expenses for or in connection with travel or transportation whether by ambulance or otherwise, except that charges for professional ambulance service used to transport the Insured Person between the place where he is injured by an accident or stricken by a disease and the first hospital where treatment is given will not be excluded hereunder;
10. Any and all consequences of a voluntary or intentional act of the Insured Person to commit fraud, for example to submit false reimbursement claims;
11. Experimental and/or unproven treatment for which there is not enough adequate evidence of safety and effectiveness in the peer reviewed published medical literature.
12. No coverage is foreseen in the following countries: the USA, Switzerland, UK, Russia UAE, China, Singapore, and Hong Kong.

### **B. Aircraft accidents**

Aircraft accidents are only covered if the Insured Person is on board of an aircraft with a valid certificate of air-worthiness, piloted by a person in possession of a valid license for the type of aircraft in question; the pilot himself may be the Insured Person.

### **C. Exclusions applicable to the life insurance:**

1. Suicide with sane and deliberate intent is covered only if it occurs not less than 2 years after the Insured Person's inclusion in this insurance.  
  
However, it will be covered from the date of inclusion in this policy if the person was not acting with sane and deliberate intent at the moment of suicide. The onus of proof for this rests with the beneficiary.
2. In the event of war, the cover under this contract will apply only insofar as determined by subsequent legislation on life insurance in wartime.

## **2.17 Telehealth services and Employee Assistance Programme**

### **1. Telehealth Services**

Volunteers can use Telehealth Services during their assignment. These provide remote access (not face to face) to primary care consultations through GPs (general practitioners, general medicine and other board-certified doctors). Additionally, after a primary care consultation, access may be provided to specific specialists.

UN Volunteers will have 24-hour unlimited telephonic or video access to the following services:

- Initial or follow-up consultation with a medical doctor to obtain medical advice and clinical guidance;
- Discuss medical symptoms like fever, rash or aches and pain;
- Reach a diagnosis if enough medical information is available;
- Discuss a medical report, test result or a treatment plan;
- Prepare for an upcoming consultation;
- Discuss a medication plan and potential side effects;
- Get support with navigating the local healthcare system;
- Receive medical prescription if indicated in those countries licensed to do so. Prescription fulfilment is the responsibility of the plan member.

### **2. EAP Services**

Volunteers can use our telephonic, face to face and professional counselling services during their assignment.

UN Volunteers will have 24-hour telephonic access to confidential consultation regarding behavioral health issues as follows:

- Up to six telephonic or face-to-face professional counselling sessions per issue;
- Up to six sessions confidential online counselling via E-counselling;
- Crisis intervention services and triage to emergency care;
- Critical Incident Support;
- Management consultations to assist managers with difficult workplace issues;
- Counsellor managed AWARE (mindfulness) and In My Hands (cognitive behavioral therapy) service;
- Life coaching;
- Access to IEAP website;
- Access to the service contact via SMS text and call back-service from a counsellor within one hour.



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