



# Cigna Healthcare: your health care specialist.

Providing localised solutions in safeguarding your employees' health.

# We are Cigna Healthcare. We're making a healthier life accessible to everyone globally.

Since our founding over 230 years ago, our mission has been to improve the health and vitality of every person we serve by making health care simple, affordable and predictable.

## Heritage in health care

A clear vision of improving health care experience for over 230 years.

**1792**

Incorporated in Philadelphia, USA. Our predecessors remain the nation's oldest, stockholder-owned insurer.



**1919**

Theodore Roosevelt proposes funds to assist Americans with health care costs. Cigna Healthcare begins promoting employee health insurance.

**1946**

Global expansion to Europe, Asia, and Africa.

**2005**

Only US insurer to offer web-based second opinion services.



**1982**

Connecticut General Corporation (CG) and INA Corporation (INA) announce that they will combine their operations and health insurance business.

**1964**

Introducing Group Dental insurance for businesses.

**2009**

Cigna Healthcare becomes first health service company in the US to offer live 24/7/365 access to customer care.

**2017**

Cigna Healthcare acquires Zurich Insurance Middle East, to setup independent license to operate across UAE, Lebanon, Kuwait and Oman.

  
**ZURICH**



**2021**

Going deeper in Oman, with localised solutions.

**2018**

Cigna Healthcare merged with Express Scripts®, rising to a Fortune#13 rank on the Fortune500.



# Bringing global expertise with local specialisation



## International reach yet truly regional

We serve over 150,000 customers in the region. We are an international insurer in the Middle East with an independent license – this allows us to adapt to market changes quickly.

## Access an extensive network

- Over 340 providers in Oman.
- Over 6,300 providers in the Middle East region.
- Over 1.8 million providers worldwide.

## Partnership with MedNet



We have partnered with MedNet, a well-established third party administrator in Oman, to deliver a range of solutions that are entirely in compliance with the Regulations of Oman.



Cigna Choice will be supported by a Cigna Healthcare dedicated MedNet team providing 24/7/365 best in class customer service to address any plan or health related questions.



With experience spanning more than two decades and with 80,000 customers in Oman, MedNet is well-positioned as the leader in managed care services, specialising in health risk management and offering direct billing services.



MedNet was awarded the 'TPA of the Year' for 2019 at the MENA Insurance Award Ceremony.

# With regional clinical experts, your health is in the right hands



- Cigna Healthcare clinical team globally has more than 130+ qualified doctors and nurses.
- Our regional clinical experts with more than 15 years of experience offer clinical support of international standards.
- We provide critical care support for patients with complex medical conditions from diagnosis to follow-up.
- Our clinical team offers advice on the medical condition and guidance on the next steps.

## Global foundation



Over **70,000**  
employees



Over **189 million**  
customer  
relationships



Serving customers in  
over **30 countries and  
jurisdictions**

# A wide range of solutions for Oman



Our product suite of health care plans are designed to meet all management tiers' requirements, giving you a true opportunity to evaluate and select a plan that meets your requirement.

## Introducing Cigna Choice

Comprehensive, feature-rich plans aimed at bringing the best of Cigna Healthcare's medical expertise to your employees based in Oman.

Choose the perfect plan for your business:

Area of cover	Regional or Oman					
Annual maximum limit:		Cigna Choice 1		Cigna Choice 2		
	In-patient	OMR 3,500	OMR 5,000	OMR 6,000	OMR 8,000	OMR 15,000
	Out-patient	OMR 500	OMR 1,500	OMR 2,000	OMR 5,000	OMR 8,000
Optional benefits:	<ul style="list-style-type: none"> <li>• Maternity</li> <li>• Dental</li> <li>• Vision</li> <li>• Well-being</li> </ul>	Optional benefits bundle** • Psychiatric, work-related injuries, alternative treatment, and adult travel vaccinations.  ** Note: these benefits come as a package.				



GlobalCare is our global group health insurance Plan that provides health care solutions for your employees based in the GCC or across the world. It brings the best of our international experience to the Middle East.

# Cigna Choice has many benefits



## For employees:

- ✓ Clinical case managers that help members find the right care path, being there for them when they need the most support and guidance.
- ✓ Ease of direct billing\* arrangements with our extensive in-network providers - no need to pay and claim.
- ✓ Virtual health services at no additional cost:
  - Manage their plans from an easy-to-use member app and portal - HealthPass by Mednet.
  - 24/7 access to virtual doctor consultations through Teladoc®.
  - Confidential counseling through the Employee Assistance Programme.
- ✓ 24/7 access to customer care.

\* Please note that an in-network co-insurance may apply at select providers.

## For employers:

- ✓ Receive constant, on-going support and advice from dedicated client managers.
- ✓ Giving you a true opportunity to evaluate and select a plan that meets your requirements.
- ✓ Decide between a variety of network options.
- ✓ Maintaining affordable premiums through our pro-active approach to cost control which includes AI to stop fraud, waste and abuse.
- ✓ Feel peace of mind knowing that your employees are covered for pre-existing conditions.
- ✓ Have the tools to create a healthy, more productive workforce.

# A healthier workforce is a more productive workforce



## Why wellness matters

Research has shown that employees who maintain good health habits are happier and more productive. When offered through the workplace, wellness programmes can increase employee loyalty and retention. In short, wellness is a win-win for all.

Taking on your biggest healthcare challenges is our mission and we're going farther to make a change, starting with access to wellness resources and support.



### Employee Assistance Programme\*

We provide confidential, telephonic, or face-to-face counseling for your employees & their dependents for a range of personal topics such as finances, couple's support, stress, anxiety, and depression.

\* Optional, based on employer's choice of plan.



### Routine adult physical examinations\*\*

Check-in on yourself and your family through a routine physical examination with a general or specialist physician.

\*\* Limited to Muscat, if conditions allow.



### On-site\*\* and virtual seminars

Educate employees on a wide range of health topics - from managing diabetes and heart disease conditions to developing better sleep habits and managing stress.

\*\* Limited to Muscat, if conditions allow.

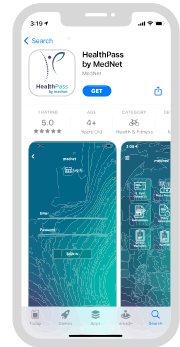
# Digital solutions, for simpler access to care



Cigna Choice provides your employees with digital tools to access health care while keeping up with their busy lifestyle.

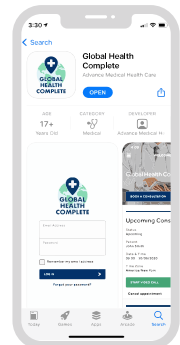
## With the *HealthPass by MedNet* app your employees can:

- ✓ Find a medical facility.
- ✓ Submit and track claims.
- ✓ Download a digital ID card.
- ✓ Live chat with a representative.
- ✓ Access health tools like BMI calculator, BP recorder, and a health library.



## Access *Teladoc*® from the *Global Health Complete* app

- ✓ Diagnosis for non-emergency health issues.
- ✓ 110+ board certified doctors.
- ✓ Prescriptions for common health concerns, when medically necessary and permitted\*.
- ✓ Telephonic consultation.



\*Not all prescription drugs are covered and prescriptions are not guaranteed to be written.

# Plan: Cigna Choice 1

Network	Green
Network co-insurance	Nil
Out-patient co-insurance	Nil or 15% co-pay up to max OMR 10 per OP consultation or 15% co-pay up to max OMR 10 on all OP services
Member reimbursement claims co-insurance	50% on actual costs (*Not applicable when treatment is not available within the network or on emergency treatment)
Area of cover	Oman only or Regional
Pre-existing conditions and chronic conditions	Covered
In-patient annual maximum	OMR 3,500 or OMR 5,000 per year of insurance
In-patient/ day case health care benefits	
<b>Hospital charges for:</b> <ul style="list-style-type: none"> <li>Accommodating costs for in-patient treatment</li> <li>Nursing for in-patient treatment</li> <li>Day case treatment</li> <li>Operating theatre and recovery room</li> <li>Prescribed medicines, drugs, and dressings for in-patients or day case patients</li> </ul>	Covered (Shared room)
Out-patient health care benefits	
Out-patient annual maximum	OMR 500 or OMR 1,500 per year of insurance
Prescribed medicines and drugs	Nil or 10% co-pay up to max OMR 5
X-rays, laboratory tests, and pathology	Covered
Other benefits	
International emergency services	Not covered
Repatriation of mortal remains	OMR 1,000
Emergency out-of-area cover	Covered (30 days)
Pandemic	Covered
Physiotherapy	Covered
Child vaccinations	Covered
Adult vaccinations	Covered

# Cigna Choice 1: Optional benefits

## Maternity (Optional)

Annual maximum	OMR 1,500 (12-month waiting period applies)
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## Dental benefits (Optional)

Annual maximum	OMR 250 or OMR 300 per year of insurance Co-pay: 20%
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## Vision benefits (Optional)

One eye examination per year of insurance	Paid in full Co-pay: Nil
Expenses for: • Prescribed lenses to correct vision • Eyeglass frames (once per year of insurance)	OMR 100 or OMR 150 per year of insurance Co-pay: 20%

## Well-being benefits (Optional)

Routine adult physical examinations	OMR 100 or OMR 200 per year of insurance
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## Other optional benefits bundle

(Note: these benefits come as a package. Client must either pick all of the benefits below or none)

In-patient / out-patient psychiatric care	OMR 300
Work-related Injuries	OMR 3,000
Complementary and alternative treatment	OMR 150 or OMR 250
Adult travel vaccinations	OMR 150 or OMR 250

## Plan: Cigna Choice 2

Network	Silver or Gold
Network co-insurance	<b>Silver:</b> Nil <b>Gold:</b> 20% co-pay at Burjeel Hospitals
Out-patient co-insurance	Nil <b>or</b> 15% co-pay up to max OMR 10 per OP consultation <b>or</b> 15% co-pay up to max OMR 10 on all OP services
Member reimbursement claims co-insurance	50% on actual costs (*Not applicable when treatment is not available within the network or on emergency treatment)
Area of cover	<b>Oman only</b> or <b>Regional</b>
Pre-existing conditions and chronic conditions	Covered
In-patient annual maximum	OMR 6,000 or OMR 8,000 or OMR 15,000 per year of insurance
<b>In-patient/day case health care benefits</b>	
<b>Hospital charges for:</b> <ul style="list-style-type: none"> <li>Accommodating costs for in-patient treatment</li> <li>Nursing for in-patient treatment</li> <li>Day case treatment</li> <li>Operating theatre and recovery room</li> <li>Prescribed medicines, drugs, and dressings for in-patients or day case patients</li> </ul>	Covered (Private room)
<b>Out-patient health care benefits</b>	
Out-patient annual maximum	OMR 2,000 or OMR 5,000 or OMR 8,000 per year of insurance
Prescribed medicines and drugs	Nil or 10% co-pay up to max OMR 5
X-rays, laboratory tests, and pathology	Covered
<b>Other benefits</b>	
International emergency services	Covered
Repatriation of mortal remains	OMR 2,000
Emergency out-of-area cover	Covered (30 days)
Pandemic	Covered
Physiotherapy	Covered
Child vaccinations	Covered
Adult vaccinations	Covered

# Cigna Choice 2: Optional benefits

## Maternity (Optional)

Annual maximum	OMR 2,000 or OMR 2,500 (12-month waiting period applies)
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## Dental benefits (Optional)

Annual maximum	OMR 250 or OMR 300 per year of insurance Co-pay: 20%
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## Vision benefits (Optional)

One eye examination per year of insurance	Paid in full Co-pay: Nil
Expenses for: • Prescribed lenses to correct vision • Eyeglass frames (once per year of insurance)	OMR 100 or OMR 150 per year of insurance Co-pay: 20%

## Well-being benefits (Optional)

Routine adult physical examinations	OMR 100 or OMR 200 per year of insurance
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## Other optional benefits bundle

(Note: these benefits come as a package. Client must either pick all of the benefits below or none)

In-patient / out-patient psychiatric care	OMR 500
Work-related Injuries	OMR 3,000
Complementary and alternative treatment	OMR 150 or OMR 250
Adult travel vaccinations	OMR 150 or OMR 250

# General exclusions

**Medical expenses for the treatment of the below items or consequences as a result of it are not covered unless specifically mentioned as covered in the table of benefits.**

1.	Intentional self-inflicted injury.
2.	Experimental Treatment.
3.	Pre-existing diseases and chronic conditions for Out-patient Benefits.
4.	General examinations, check-ups and/ or services not justified for Treatment of a medical condition covered under the policy.
5.	General examinations, check-ups and/ or services not justified for Treatment of a medical condition covered under the policy.
6.	Hazardous or personal risks are any personal activities resulting in high risks to the insured or causing disease, accident, or leading to worsening his previous condition or injury.
7.	Complementary and Alternative medicine procedures and medications.
8.	Conditions or illness resulting from abuse of some medicines, stimulants or tranquilizers, or from abuse of alcohol, drugs and psychotropic substance.
9.	Cosmetic Treatment or surgery unless necessitated by a bodily injury not excluded.
10.	Recreational therapy and general physical health programmes.
11.	Treatment of venereal or sexually transmitted diseases.
12.	Costs of Treatment following diagnosis of HIV or any disease related to HIV, including AIDS and its derivatives, alternatives or other forms.
13.	Costs related to tooth implant, dentures (fixed or removable), bridges and/ or orthodontic Treatment, unless resulting from an accident.
14.	Vision or hearing correction tests and visual or hearing aids, unless resulting from an accident.
15.	Corrective Treatment for nasal septum deviation and nasal concha resection, coblation method plasty unless for Treatment of illness such as nasal occlusion and difficulty in breathing or resulting from an accident.
16.	Treatment of hair loss, baldness or artificial hair.
17.	Treatment of Psychological or mental disorders except emergencies
18.	Allergy tests and desensitization of any nature, unless relating to allergy toward specific medication and/or supplies used in Treatment of a medical condition
19.	Any expenses related to immunomodulatory and immunotherapy
20.	Sexual transformation Treatment and services, sterilization, infertility and impotence
21.	Any expenses related to the Treatment of sleep related disorders
22.	Treatment resulting from the participation in hazardous sports/activities including but not limited to scuba diving, parachuting, rock mountain climbing, dune bashing/biking
23.	Treatment of congenital deformity including functional, chemical or metabolic defect usually existing before birth, whether hereditary or due to environmental factors.
24.	Skin disorders such as acne and keloid, etc.
25.	Treatment of obesity or overweight.

26.	Organ or bone marrow transplant, or implant of artificial organs to wholly or partially replace any organ of the body.		
27.	Investigation in to, or Treatment of natural changes related to menopause, including menstrual disorders.		
28.	Claims related to genetic disorders, cold storage, transplant of live cells or live tissues (including but not limited to stem cell Treatment) whether self-originated or donated.		
29.	Treatment of neurological loss of appetite, polyphagia, loss of appetite and other eating disorders or any sort of Treatment by psychiatrist.		
30.	Any costs or additional expenses incurred by the insured's companion during hospitalisation, except for hospital room and board charges for one companion, such as a mother accompanying a child up to the age of sixteen (16) or if medically necessary as assessed by the attending doctor or consultant.		
31.	Expenses incurred due to complications directly resulting from illness or injury or Treatment excluded from coverage.		
32.	All supplies which are not considered as medicines such as but not limited to mouthwash, tooth paste, soap, moisturizing lotions, creams, lozenges, antiseptics, milk formulas, food supplements, children food, baby supplies, skin care products, shampoos and multi vitamins (unless prescribed as replacement therapy for known vitamin deficiency conditions), and all equipment not primarily intended to improve a medical condition or injury, including but not limited to air conditioners, air purifying systems, arch supports, exercise equipment and sanitary supplies.		
33.	Any external medical appliances, devices and equipment including but not limited to breast pumps, massage machines, exercise machines, thermometer, blood pressure/sugar monitors and glucose strips.		
34.	Orthotic, mouth guards, bandages, crepe bandages, support stockings and pantyhose.		
35.	Supports of any type including but not limited to crutches, braces, slings, lumbar supports, corsets, cervical collars, other joint supports, belts, wheelchairs, heel pads, arch support, orthopaedic shoes.		
36.	Disease or injuries resulting from the following events: <ul style="list-style-type: none"> <li>i. Military operation whatever their type.</li> <li>ii. Natural calamities.</li> <li>iii. Criminal acts or the insured resisting the authorities.</li> <li>iv. Ionizing radiations, pollution from radioactivity of any nuclear fuel or waste.</li> <li>v. Radioactive, toxic or explosive substances.</li> <li>vi. Riots, strike and terrorism.</li> <li>vii. Chemical, biological or bacteriological incidents or reactions.</li> </ul>		
37.	<table border="0"> <tr> <td>Termination of pregnancy</td><td>Treatment by way of the intentional termination of pregnancy, unless two Medical Practitioners certify in writing that the pregnancy were to endanger the life or mental stability of the mother, and provided it is a legal abortion/ termination of pregnancy where Maternity Benefit has been selected.</td></tr> </table>	Termination of pregnancy	Treatment by way of the intentional termination of pregnancy, unless two Medical Practitioners certify in writing that the pregnancy were to endanger the life or mental stability of the mother, and provided it is a legal abortion/ termination of pregnancy where Maternity Benefit has been selected.
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38.	<table border="0"> <tr> <td>International Emergency services</td><td>Any expenses for International Emergency services that were not listed in the Table of Benefits and approved in advance by the Medical Assistance Service.</td></tr> </table>	International Emergency services	Any expenses for International Emergency services that were not listed in the Table of Benefits and approved in advance by the Medical Assistance Service.
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39.	<table border="0"> <tr> <td>Emergency evacuation, medical repatriation and transportation costs for third parties</td><td>Expenses for Emergency evacuation, medical repatriation, and transportation costs for third parties where the Treatment needed is not covered under the Plan or where authorization procedures have not been properly followed.</td></tr> </table>	Emergency evacuation, medical repatriation and transportation costs for third parties	Expenses for Emergency evacuation, medical repatriation, and transportation costs for third parties where the Treatment needed is not covered under the Plan or where authorization procedures have not been properly followed.
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40.	<table border="0"> <tr> <td>Ship-to-shore evacuations</td><td>Any expenses for ship-to-shore evacuations.</td></tr> </table>	Ship-to-shore evacuations	Any expenses for ship-to-shore evacuations.
Ship-to-shore evacuations	Any expenses for ship-to-shore evacuations.		

41. Non-Emergency travel costs	<p>Any form of non-Emergency travel costs to and from medical facilities (including parking costs) for eligible Treatment, except any travel costs covered under local ambulance, medical evacuation and medical repatriation Benefits.</p> <p>Examples:</p> <ul style="list-style-type: none"> <li>• We do not pay for taxis or other travel expenses for you to visit a Medical Practitioner.</li> <li>• We do not pay for travel time or the cost of any transport expenses charged by a Medical Practitioner to visit you.</li> </ul>
42. Illegal claim payments	For payments that are illegal under applicable law; in particular, where claim payment contravenes any applicable sanction laws as more specifically stated in the preamble.
43. Administration charges/ costs	Costs or fees for filling in a claim form or other administration charges.
44. Other insurance coverage	Costs that another party, including another insurer or public programme, is responsible for, and we may recover such costs from the liable party if already paid by us (this includes any deductible or co-insurance deducted by the other or secondary party).
45. Advance payments/ deposits	Costs for Treatment of a covered Benefit that has not yet taken place, irrespective of whether advance authorization has been given or a guarantee of payment has been put in place.
46. Exchange controls, local licensing regulations, sanctions, anti-corruption or trade embargo.	We will not offer cover or pay Benefits when it is illegal to do so under applicable laws. Examples include, but are not limited to, exchange controls, local licensing regulations, sanctions, anti-corruption or trade embargo.
47. Circumcision	<p>Ritual and religious circumcision healthcare services are excluded unless otherwise specified in your Table of Benefits.</p> <p><b>Note: medically necessary circumcision is covered</b></p>
48. Injuries resulting from criminal acts	Injuries resulting from criminal acts or resisting authority by the Insured Person.
49. Services which can be carried out on Out-Patient basis	Any In-Patient treatment, investigations or other procedures, which can be carried out on Out-Patient basis without jeopardizing the Insured Person's health.
50. Treatment outside Area of Coverage	Treatment outside the Selected Area of Coverage if one of the reasons the Patient travelled was for that Treatment, except if the Medical Assistance Service has arranged Emergency evacuation or medical repatriation.
51. Dental or orthodontic benefit	<p>We do not pay for the following dental or orthodontic Treatment and extras unless Benefit is specifically selected and provided in the Table of Benefits.</p> <ol style="list-style-type: none"> <li>Benefit is not payable for Treatment that is: <ol style="list-style-type: none"> <li>Purely Cosmetic.</li> <li>Not necessary for continued oral health.</li> <li>In any way caused by the Patient carrying out an illegal act.</li> </ol> </li> <li>Benefit is not payable for refunding costs which: <ol style="list-style-type: none"> <li>Are fees for filling in a claim form or other administration charge.</li> <li>Have been or can be paid by another insurance company, person, organisation or public programme. If the Employee or dependants are covered by other insurance, we will only pay its part of the Benefit. If another person, organisation or public programme is responsible for paying the costs of Treatment, we may claim back any of these costs it has paid.</li> </ol> </li> <li>Benefit is not payable for the following procedures, services or items: <ol style="list-style-type: none"> <li>Replacing any dental appliance which is lost or stolen.</li> <li>Replacing a bridge, crown or denture which is or can be made useable according to a standard acceptable to a Dentist of ordinary competence and skill.</li> </ol> </li> </ol>

- c. Replacing a bridge, crown or denture within five years of original fitting unless:
  - i. The replacement is needed because of the placement of an original opposing full denture or extraction of natural teeth is needed; or
  - ii. The bridge, crown or denture, while in the mouth, has been damaged beyond repair because of an Injury the Employee or their dependant receives while covered under the Plan.
- d. Porcelain or acrylic veneers on the upper and lower first, second and third molars and premolars.
- e. Crowns or pontics on or replacing the upper and lower first, second and third molars unless:
  - i. They are constructed of either porcelain bonded to metal or metal alone; or
  - ii. A temporary crown or pontic is required as part of routine or Emergency dental Treatment.
- f. Surgical implants of any type, including any attaching prosthetic device.
- g. Procedures and materials which are experimental, or which do not meet accepted dental standards;
- h. Instruction for plaque control, oral hygiene and diet.
- i. Procedures, services, and supplies which are deemed by us to be medical procedures, services and supplies including mouthwashes, and also including services and supplies provided in a hospital.  
(Except where dental Treatment is neither wholly nor partly the reason for the stay in hospital).
- j. Orthodontic Treatment for Employees and dependants.
- k. Major Treatment on deciduous or baby teeth for dependant children.
- l. Examinations and scale and polish will both be limited to 2 visits per Year of Insurance.
- m. Full case assessment will be limited to one per Year of Insurance.
- n. X-rays will be limited to four bitewings and six periapicals per Year of Insurance and OPG every 3 years.
- o. Cephalometric & occlusal x-rays will fall under the respective class of the procedure.
- p. Prolonged periodontal Treatment limit of one course per Year of Insurance.

52. Vision benefit

We will not pay Benefit for the following vision Treatment and extras unless Benefit is specifically provided in the Table of Benefits:

- More than one eye examination within any one Year of Insurance.
- Medical or surgical Treatment of the eye.
- Lenses (including blue light lenses) which are not a Medical Necessity and are not prescribed by an Optometrist or Ophthalmologist, or frames for such lenses.
- Elective diagnostic services and medical Treatment for correction of vision.
- Sunglasses even if prescribed.
- More than one frame in any Year of Insurance.
- Transitional lenses.

**Please note:**

- All benefits are subject to medical necessity review pursuant to Cigna Healthcare's medical coverage policies or other appropriate guidelines in Cigna Healthcare's sole discretion.
- Should the benefits under the scheme fall below the minimum required then the cover under the policy will automatically increase to the same level as requested by "the FSA".

**No two companies are alike,  
and neither are their health  
care needs.**



**Ready to pick your  
Cigna Choice plan?**

**Email us at [MEsales@CignaHealthcare.com](mailto:MEsales@CignaHealthcare.com) today.**



Cigna Insurance Middle East S.A.L. (Oman Branch) is the local insurer in Oman. 7th Floor, Al Fardan Heights, Gala, Muscat P.O. Box 1101, P.C. 114, Jibroo, Sultanate of Oman. Registered under Insurance Register Certificate No. 33 and Commercial Registration No.1002811.