

SEBT

Student Educational Benefit Trust

CERTIFICATE OF HEALTH COVER
Account Number 06385A

Student Educational Benefit Trust (SEBT)

(Hereinafter called the Plan Sponsor)

Cigna Health and Life Insurance Company hereby certifies that it is the Claims Administrator for the above referenced account.

The benefits principally affecting the persons covered are described below. The plan covers expenses worldwide. The final interpretation of any specific provision herein is governed by the terms of the agreement. This is your certificate of health cover if you are eligible for the plan, become covered and remain covered in accordance with the terms, provisions and conditions of the policy.

Employee Eligibility: All full-time active students who are subscribers to the Student Educational Benefit Trust and who are traveling on the business of, or at the expense of, the Policyholder outside their country of residence or permanent assignment.

CGHB USE ONLY	
Insured's Name: _____	Birthdate: _____
Travel Dates From: _____	To: _____

The effective date of this Schedule of Benefits is August 1, 2015

Schedule of Benefits	
Benefit	Benefit Amount
Accidental Death & Dismemberment	\$10,000
Medical Evacuation/Repatriation	\$100,000
Calendar Year Medical Benefit Maximum	\$100,000
Calendar Year Deductible	\$250
Coinsurance (paid by Cigna)	80%
Out of Pocket Coinsurance Maximum	None
Prescription Drug	80% covered expenses*
Emergency Dental (includes dental accident & alleviation of sudden unexpected dental pain)	\$1,000 calendar year maximum
Personal Deviation/Sojourn Travel	Not Covered
Room & Board Outside US	\$1,500
Room & Board Inside US**	Average Semi-Private Room Rate
Pre-Existing Conditions	None, subject to the medical maximum
War Risk (Medical)	Not Covered
War Risk (AD&D)	Not Covered

* covered expenses when medically necessary while on an approved international business trip. This benefit also includes replacement medicine for lost prescriptions that are medically necessary during an international business trip.

**Pre-Admission Certification / Continued Stay Review is Required for all U.S. Hospitalizations

Please refer to the welcome kits or the MBA website at <http://www.cignaenvoy.com/ciebpublic/> for details around submitting a claim. Phone: 302.797.3535 (outside the USA) 800.243.1348 (inside the USA)

Cigna Global Health Benefits Mailing address: P.O.Box 15111, Wilmington, DE 19850, USA

FRAUD NOTICE: Any person who, knowingly and with intent to defraud any insurance company or other person: (1) files an application for insurance or statement of claim containing any materially false information; or (2) conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act.