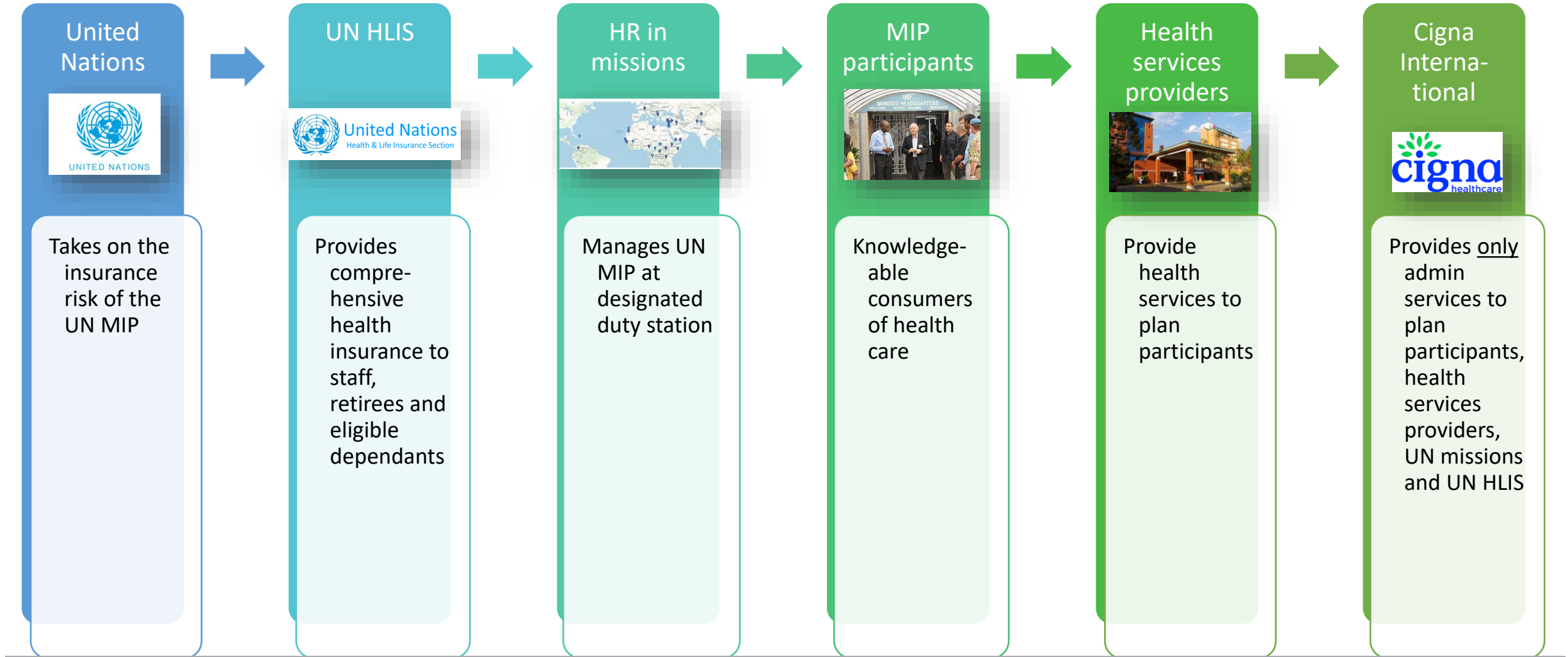


UN Medical Insurance Plan (MIP) Information Session

Agenda

- **Introduction** – meet today's presenters
- **Presentation by the HLIS**
 - Roles and responsibilities
 - Main principles of the UN Medical Insurance Plan (MIP)
- **Presentation by Cigna**
 - Digital tools
 - Medical network
 - Global Telehealth
- **Q&A**

Health Insurance Overview – Who is involved?



Health Insurance Overview - Roles & responsibilities 1

United Nations



- UN MIP is self-funded, hence United Nations acts as insurer of the UN MIP
- Decides on the benefits of the UN MIP
- Determines who is covered under the UN MIP
- Decides how reimbursements will be made
- Defines the administrative services the Third-Party Administrator should offer

UN HLIS



- Provides health insurance plans
- Provides eligibility files to Cigna
- Reviews the adequacy of the UN MIP
- Provides policy and technical support to missions and regional service centers

HR in missions



- Manages the UN MIP locally
- Provides training to local staff on UN MIP
- Processes eligibility matters and coordinates payment issues
- Gathers structural issues regarding TPA services and addresses them to Cigna and, if needed, UN HLIS

Health Insurance Overview - Roles & responsibilities 2

Plan Participants



- Fund 25% of the UN MIP
- Understand the benefits of the UN MIP
- Help keeping the UN MIP sustainable, eg by visiting in-network providers, refusing fraud, waste and abuse and becoming knowledgeable health consumers

Health services providers



- Provide medically necessary health services at reasonable & customary rates
- May decide to become part of Cigna's network and offer direct billing, potentially at preferential rates

Third-Party Administrator



- Processes claims by following and applying the plan rules
- Responds to inquiries from plan participants
- Provides a medical network of health care providers that offer both physical and virtual consultations
- Conducts fraud, waste and abuse investigation to protect the UN MIP in accordance with the services required by UN

United Nations – meet your Policyholder

United Nations



- Bears MIP costs and insurance risk together with subscribers through cost-sharing agreement

<i>Category of coverage</i>	<i>Subscriber's contributions</i>	<i>Organization's contributions</i>	<i>Total premium</i>
A. Full-time and former staff			
For one insured person (subscriber alone)	1.05	3.15	4.20
For two insured persons (subscriber plus one eligible family member)	1.35	3.95	5.30
For three to five insured persons (subscriber plus two to four eligible family members)	1.85	7.35	9.20
For six or more insured persons (subscriber plus five or more family members)	2.40	9.55	11.95
B. Staff on special leave without pay			
For one insured person	4.20	0.00	4.20
For two insured persons	5.30	0.00	5.30
For three to five insured persons	9.20	0.00	9.20
For six or more insured persons	11.95	0.00	11.95
C. Staff on special leave with half/partial pay			
For one insured person	2.62	1.58	4.20
For two insured persons	3.32	1.98	5.30
For three to five insured persons	5.52	3.68	9.20
For six or more insured persons	7.17	4.78	11.95

United Nations – meet your Policyholder

United Nations



- Determines and collects contributions

CLAIMS + TREND = **PROJECTED CLAIMS**

PROJECTED CLAIMS + FEES = **TOTAL COST**

TOTAL COST = **REQUIRED PREMIUM**

example:

PREMIUM CALCULATION

Claims	1,000,000
Trend at 10%	+ <u>100,000</u>
Projected claims	1,100,000

Administrative fees	+ <u>50,000</u>
Total Cost	1,150,000

6.98%
rate increase

New Premium
1,150,000

Old Premium
1,075,000

MIP eligibility criteria

United Nations



- Sets enrollment conditions

- Participation in UN MIP is **MANDATORY** for:
 - ✓ Locally recruited staff members holding an appointment in the General Service (GS), Security Service (SS), Trade and Craft (TC), and National Officer categories who serve at a designated duty station.
 - ✓ All staff members, regardless of their length of appointment, will be enrolled in – and contribute to – MIP
- Participation in UN MIP is **VOLUNTARY** for:
 - ✓ Eligible family members (one spouse and eligible children)
 - ✓ A former staff member who meets the eligibility criteria for after-service health insurance as set out in section 7 of the ST/AI/2015/3 section 7 is eligible for after-service health insurance;

MIP eligibility criteria

United Nations



- Sets enrollment conditions

- **Eligible** family members:
 - ✓ Eligible spouse as recognized by UN
 - ✓ Dependent child until the end of the year in which he or she reaches the age of 25
 - ✓ Disabled child above 25 may be covered for as long as that incapacity lasts
 - ✓ For ASHI: spouse and children already enrolled at the time of separation from service and any child born to the staff member within 300 days of separation
- **Non-eligible** family members:
 - ✓ Secondary dependants, like parents and siblings
 - ✓ Married or full-time employed children
 - ✓ Dependants of staff members holding a temporary appointment of less than six months

Eligible dependants must be enrolled within 31 days of qualifying event or during annual enrolment campaign in June!

Main principles of the MIP

United Nations



- Decides on covered benefits

Key principles

	UN MIP
Overall yearly maximum per person	6 times MIP Reference Salary
Stop loss limit for active staff	50% of monthly net base salary
Stop loss limit for retirees	50% of remuneration basis used for calculation of retiree's contribution
Claim submission deadline	12 months after expenses were incurred
Area of cover	Duty Station and Regional Area of Care, plus evacuations and emergency during duty travel

Main principles of the MIP

United Nations



- Decides on covered benefits

• Key principles of the UN MIP

- ✓ UN MIP covers reasonable & customary cost in your duty station
- ✓ Adequate coverage outside the duty station is only provided for:
 - Emergency care while on official duty travel (SMs only!)
 - Medical evacuation travel (coordinated by OAHS)
 - Regional Area of Care (recognized by UNHQ)

Cigna Healthcare, International Health

UN MIP STAFF INFORMATION SESSION





Agenda



Your Electronic Membership Card



Your Benefits Overview



Cigna Digital Services



Medical Network and Direct Payment



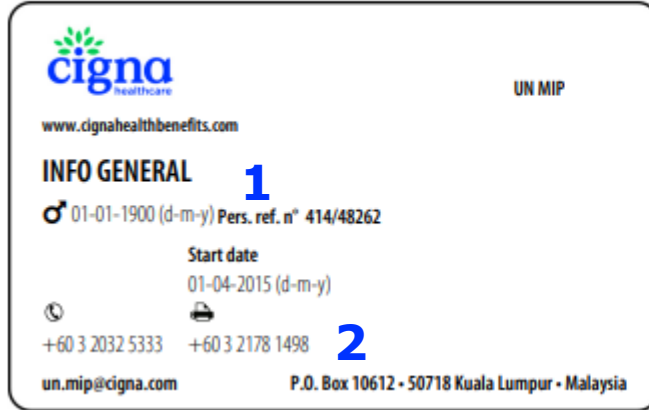
Global Telehealth

Your Electronic Membership Card

Your personal membership card is
your key for an efficient support.



Your Cigna Electronic-Membership Card (E-card)



1 Your personal data

2 Your dedicated contact details

3 Contact info for healthcare providers

4 Coverage and RAC info



Online Tip

Your E-card is available on the website www.cignahealthbenefits.com and in the Cigna Health Benefits mobile app

UN MIP Benefits Overview



Your Benefits Overview on www.cignahealthbenefits.com

Insurance numbers starting with 414/



Online Tip

On your personal webpages (under 'My Plan'), you will find a detailed description of the UN MIP coverage levels

UN MIP

BENEFITS DESCRIPTION



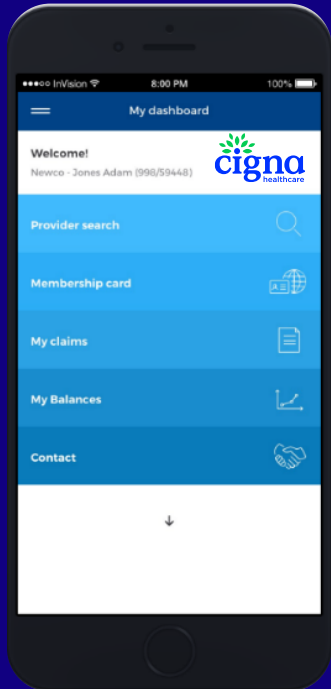
Digital Tools



A Digital Ecosystem – Mobile Applications



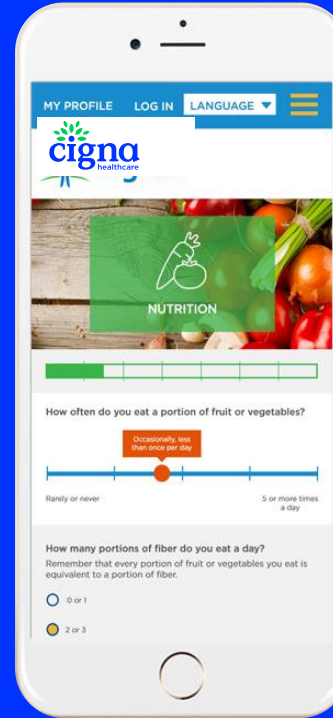
Cigna Health Benefits



- Instant, real-time access to health information on the go
- Find health care providers
- Submit and track (photo) claims!
- Easy and simple navigation, check your balances
- Always have a way to contact Cigna 24/7/365
- View your family's ID cards



Cigna Wellbeing®



- Video consultations with a doctor via Global Telehealth
- Video tutorials for a healthy lifestyle and healthy recipes



Our mobile apps are available on the Apple App StoreSM and on Google PlaySM for AndroidTM.

Your Personal Webpage

UN MIP 414/

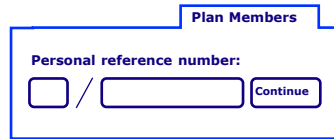
1

Go to www.cignahealthbenefits.com and click on 'Plan Member'



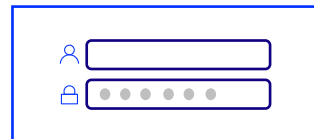
2

Fill in your ID number as the user name



3

Fill in your password



Find Information

A screenshot of the Cigna healthcare member portal homepage. The page features the Cigna logo, a search bar, and a navigation menu with links for Home, My plan, Claims, Provider search, My health, and Contact. The main content area is divided into several sections: "I NEED MEDICAL CARE" with links for finding providers, hospitalization, and bills; "MY CLAIMS" with links for submitting claims, documents, settlements, and balances; "LATEST CLAIMS" showing no information available; "MY PLAN" with links for benefits, membership card, insurance certificate, and forms; "MY HEALTH" with links for health encyclopedia, medical advice, and healthy living tips; "MY PROFILE" with a link to update personal data; and "DID YOU KNOW?" and "I HAVE A QUESTION" sections with links to settlement notes, video tutorials, and contact information. A contact number +32 3 217 xx xx is provided at the bottom right.

Your Personal Webpage

Submit & Track Claims

Submit & Track Claims

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

How to claim?
My balances
How do I obtain direct payment?
What do I have to do in case of...
Fraud prevention

CLAIMS

We've made it easy and fast for you to submit an accurate claim with all necessary documentation. Simply use our claiming tool and submit your claim online or create a paper claim form you can send by post. Once you have submitted a claim, you will also be able to track its status and view the claim summary.
[How does it work?](#)

Submit a claim

HOW TO SUBMIT A CLAIM

My claims | My settlements | SHOW FILTERS

SETTLEMENT NOTES

04/01/2019 Action required	Total amount paid: 139.63 EUR	Download settlement note
06/06/2018		Download settlement note
19/10/2017 Action required		Download settlement note
27/01/2017 Action required		Download settlement note
24/07/2015	Total amount paid: 17,000.00 EUR	Download settlement note

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

How to claim?
How do I read my settlement notes?
My balances
How do I obtain direct payment?
What do I have to do in case of...
Fraud prevention

SUBMIT A CLAIM

NEED HELP?
* Mandatory field

1 Claim information | 2 Add invoices | 3 Payment information | 4 Confirmation

HOW DO YOU WANT TO SUBMIT YOUR CLAIM? *

ONLINE (RECOMMENDED)
How does it work?
Complete this form online.
Scan and upload the invoices as separate files.
Submit the claim online.

BY POST
How does it work?
Complete this form online.
Print the claim summary.
Send the claim via post.

WHO IS THIS CLAIM FOR? *
Is the information incorrect? [Please contact us.](#)

Select

Cigna Healthcare with notify you when:

- *Your claim has been received
- *There is a delay with your claim
- *Your settlement note is available and paid, or settlement note available and there is information missing.

Claims Process and Reimbursement



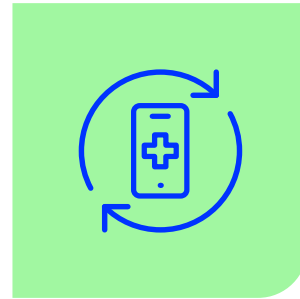
Medical Treatment

Receive medical treatment/purchase medication, medical items...



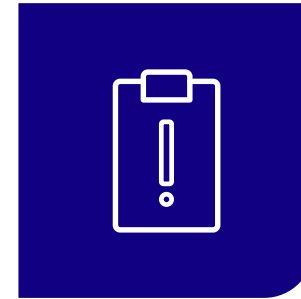
Claiming

Submit your claims through your personal website (www.cignahealthbenefits.com) or via photo claiming in the App



Processing

Within average of 5 working days your claim will be handled. Check your settlement notes online



Additional Information

If additional information is needed you will find all the information in your detailed settlement notes



Reimbursement

Reimbursement via payroll for active staff

For retired staff, payment will be done via individual bank transfer

Settlement notes processed before the end of the month will be included in the payroll of the next month.

Example: settlement notes from 1st April 2024 until 30th April 2024 will be included in May payroll

Please make sure to submit your claims at least one week before the end of the month to make sure payment is included in the payroll of the next month

How to Ensure a Faster Reimbursement of Your Claim

Review Your Description of Benefits

- Treatments requiring prior approval
- Types of care requiring medical prescription
- Expenses excluded under the medical plan

- Attach supporting documentation required (medical report, proof of payment)
- Detailed bill specifying dates of service, price per treatment (dental treatments, paramedical services)
- If the claim is for a dependant remember to ask the provider to mention the name in the invoice.

UPLOAD THE INVOICE AND OTHER SUPPORTING DOCUMENTS *

Please provide the following documents or information:

- The invoice
- Detailed specifications of the dental care given

Drag and drop files here or

Choose files

*Supported file types are .pdf, .jpg, .jpeg, .tif, .tiff,
Maximum file size is 10 MB*

You will find all the required documents for every kind of invoice when submitting a claim on your personal webpages

You may check your remaining balances (dental, optical, mental health treatments, hearing aids, stop loss balance and annual ceiling) in your personal webpages or the mobile app or by contacting Cigna via un.mip@cigna.com

Your Personal Webpage

Find an in-network Provider

The screenshot displays the Cigna Provider Search interface. At the top, there is a navigation bar with links for Home, My plan, Claims, Provider search (highlighted), My health, and Contact. Below this is the 'PROVIDER SEARCH' section, which includes a small informational icon and text explaining the benefits of selecting an in-network provider. The search filters are organized into three main categories: WHERE, WHAT, and WHO. The 'WHERE' filter is set to MALAYSIA, with a sub-filter for 'Choose a city'. The 'WHAT' filter is set to 'Choose a type of facility or provider' and 'Choose a speciality'. The 'WHO' filter is set to 'Type a (part of a) provider name'. A 'Show 87 results' button is visible. Below the filters, the 'RESULTS (87)' section is displayed, featuring a table with columns for NAME, LOCATION, and three payment agreement indicators (1, 2, 3). To the right of the table, there are icons for printing, emailing, and downloading. A legend explains the indicators: 1 = Direct payment to the provider for inpatient care (including outpatient surgery), 2 = Direct payment to the provider of outpatient care, and 3 = Price agreement (e.g. preferential rates, discounts on specific services, prompt payment discounts, etc.). A 'DID YOU KNOW?' section at the bottom left encourages users to search for a doctor, hospital, or facility using the Cigna Health Benefits app.

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

PROVIDER SEARCH

If you're looking for a doctor or hospital, you can select the health care provider of your choice, or rely on our professional network of more than 10,000 hospitals, doctors and specialists.
The big advantage of selecting an in-network facility? You benefit from the direct payment agreements and discounts we've negotiated for you.
To ensure that you have access to the highest level of medical care at all times, we continually monitor and update our network.
It's our goal to break your patient portion to a minimum. Use our Provider search to look for your preferred health care provider. You can also check with whom we have a direct payment or discount agreement.

WHERE
MALAYSIA x
Choose a city
[Or enter your location](#)

WHAT
Choose a type of facility or provider
Choose a speciality

WHO
Type a (part of a) provider name
Show 87 results

RESULTS (87)

NAME ^	LOCATION ^	1 ^	2 ^	3 ^
Aishah Specialist Clinic / Klinik Pakar	LANGKAWI	✓	✓	✓
ALTY ORTHOPAEDIC HOSPITAL	KUALA LUMPUR	✓	✓	✓
AOI Family Clinic Sdn Bhd	PETALING JAYA	✓	✓	
Ara Damansara Medical Centre	SHAH ALAM	✓		✓
Cardiac Vascular Sentral (KL) Sdn Bhd	KUALA LUMPUR	✓	✓	
CARECLINICS HEALTHCARE SERVICES	KUALA LUMPUR	✓	✓	

1 = Direct payment to the provider for inpatient care (including outpatient surgery).
2 = Direct payment to the provider of outpatient care. Click on the provider name to verify as from which amount direct payment for outpatient care is possible.
3 = Price agreement (e.g. preferential rates, discounts on specific services, prompt payment discounts, etc.). Please note this does not necessarily imply that the full amount of the invoice(s) will be accepted.

DID YOU KNOW?
You can search for a doctor, hospital or facility and save the search results with the Cigna Health Benefits app!
[Read more](#)

Your Personal Webpage

Get in Touch

The screenshot shows a user interface for a contact form. At the top, there is a navigation bar with links for Home, My plan, Claims, Provider search, My health, and Contact. The Contact link is highlighted. Below the navigation bar, there is a sidebar with a 'Contact form' header and three sub-links: Contact details, Call me back, and Toll-free numbers. The main content area is titled 'CONTACT FORM' and includes a message: 'DIDN'T FIND THE ANSWER YOU WERE LOOKING FOR? WE'RE HAPPY TO HELP.' Below this is a section titled 'HOW CAN WE HELP YOU?' with a speech bubble icon. It contains a text prompt: 'Please choose a topic from the drop down list below and we'll get back to you as soon as possible.' and a dropdown menu with the text '- Select -'.



Your Personal Webpage

Callback Functionality Via the Website or Via Cigna's Health Benefits App

Personal Webpages www.cignahealthbenefits.com

The screenshot shows the 'Contact' page on the Cigna website. The navigation bar includes 'Home', 'My plan', 'Claims', 'Provider search', 'My health', and 'Contact'. The 'Call me back' option is selected in the left sidebar. The main content area is titled 'CALL ME BACK' and contains instructions: 'FILL IN THE PHONE NUMBER YOU WANT TO BE CALLED ON.' followed by a bulleted list of guidelines. Below the text is a dropdown menu for country selection (currently showing '- Select -') and a text input field for the phone number. A 'Call me now' button is positioned at the bottom.

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

Contact form
Contact details
Toll-free numbers
Call me back

CALL ME BACK

FILL IN THE PHONE NUMBER YOU WANT TO BE CALLED ON.

- Select the country and introduce your phone number.
- Do not introduce the first 0 (example: For France number 06 12 34 56 78, introduce 612345678) or 1 for USA (example: +130512345678, introduce 30512345678)
- Avoid telephone numbers belonging to a telephone switchboard. Instead, use a direct extension.
- This is an **automated one-time call back**. Make sure your phone line isn't occupied when we return your call.
- Our network uses an unknown number, so make sure your phone accepts private calls.

- Select -

+

Call me now

Cigna Health Benefits App

The screenshot shows the 'Contact' screen in the Cigna Health Benefits App. The screen has a dark teal header with a hamburger menu icon and the word 'Contact'. Below the header is a list of menu items, each with a right-pointing arrow: 'My claims, cover and procedures', 'My affiliations and membership cards', 'My contacts at work', and 'Call me back'. The 'Call me back' option is highlighted with a light blue background.

Contact

- My claims, cover and procedures
- My affiliations and membership cards
- My contacts at work
- Call me back**



Using the Callback Functionality from Our Website

The screenshot shows a navigation bar with links for Home, My plan, Claims, Provider search, My health, and Contact. The 'Contact' link is highlighted. Below the navigation bar, there is a sidebar with links for Contact form, Contact details, Toll-free numbers, and a prominent 'Call me back' button. The main content area is titled 'CALL ME BACK' and includes instructions: 'FILL IN THE PHONE NUMBER YOU WANT TO BE CALLED ON.' followed by a list of five bullet points. Below the instructions is a form with a dropdown menu for country selection and a text input field for the phone number, preceded by a plus sign. A 'Call me now' button is located at the bottom of the form.

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

Contact form

Contact details

Toll-free numbers

Call me back

CALL ME BACK

FILL IN THE PHONE NUMBER YOU WANT TO BE CALLED ON.

- Select the country and introduce your phone number.
- Do not introduce the first 0 (example: For France number 06 12 34 56 78, introduce 612345678) or 1 for USA (example: +130512345678, introduce 30512345678)
- Avoid telephone numbers belonging to a telephone switchboard. Instead, use a direct extension.
- This is an **automated one-time call back**. Make sure your phone line isn't occupied when we return your call.
- Our network uses an unknown number, so make sure your phone accepts private calls.

- Select -

+

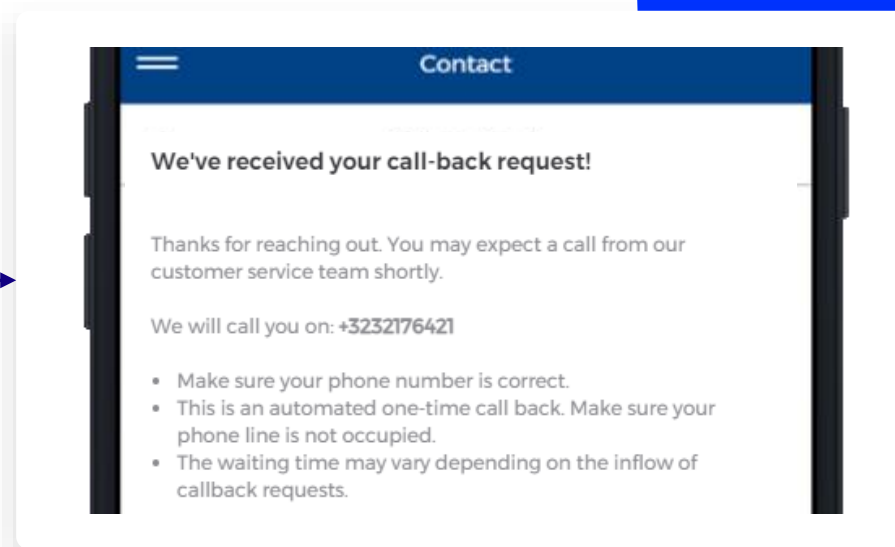
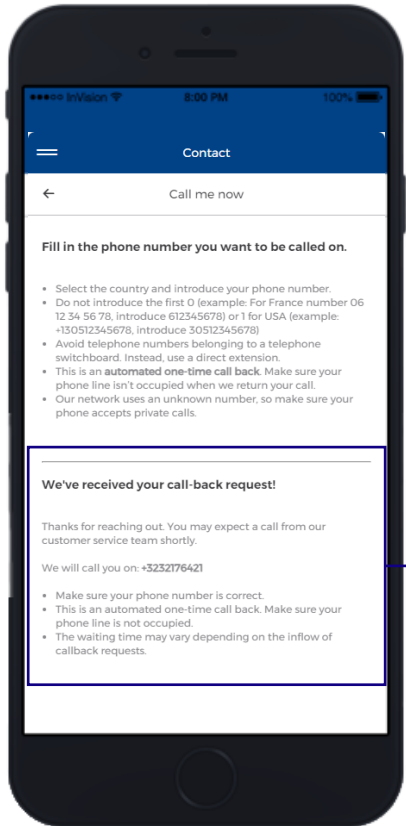
Call me now

Using the Callback Functionality from Our Website

After clicking submit, we will show a **confirmation message**

The screenshot shows a navigation bar with links for Home, My plan, Claims, Provider search, My health, and Contact. The 'Contact' link is highlighted. Below the navigation bar is a sidebar with links for Contact form, Call me back (highlighted), Contact details, Email me, and Toll-free numbers. The main content area is titled 'CALL ME BACK' and contains a confirmation message: 'WE'VE RECEIVED YOUR CALLBACK REQUEST! Thanks for reaching out. You may expect a call from our customer service team immediately. We will call you on: +32 217 64 21'. Below this is a section titled 'WHAT IF YOU DON'T GET A CALL?' with three bullet points: 'Make sure your phone number is correct. You can manage your phone numbers in [My profile](#)', 'This is an automated one-time call back. Make sure your phone line is not occupied.', and 'The waiting time may vary depending on the inflow of callback requests.'

Using the Callback Functionality via the Cigna Health Benefits App



After clicking '**Call me back**', you will receive the confirmation message

Your Dedicated Customer Services Team

When you call us in the middle of the night, you won't just speak to someone who knows your language. You'll speak to someone who cares.



Your Dedicated Customer Service Team

 **Whenever You have Questions, Our Caring Team has the Answer.**

- A dedicated team ensures a personal approach and detailed knowledge of your plan & benefits.
- Available 24/7
- Support in English, French, Spanish, Arabic, Russian and Chinese
- Our customer services offices around the world always have the most up-to-date information regarding your file.

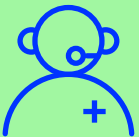
How to Contact Cigna



+32 3 217 65 72



Un.mip@cigna.com



Need a guarantee of payment?

For urgent guarantee of payment: always call Cigna

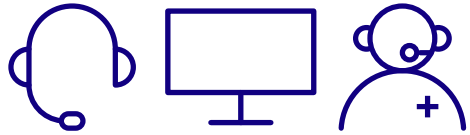
For planned admissions or treatment that requires a guarantee of payment: email to admissions@cigna.com

Medical Network

Quality health care should know no borders. Our proprietary network of health care providers doesn't either.



Access to Direct Payment



Easy

Access to Providers



Doctor's Visit Medication
Lab Medical Imaging



Membership
Card



Inpatient and
Major Outpatient



Guarantee of Payment
for Urgent Guarantees,
Always Call Cigna

Guarantee of Payment



For Planned Treatments

Request for a guarantee at least 7-10 working days prior to the date of service (admissions@cigna.com)

What Information Needs to be Sent to Cigna?

- Date of service (admission, date of treatment) and estimated length of stay (if applicable)
- Procedure
- Diagnosis: medical report, imaging, lab tests (if applicable)
- Facility (provider) where the treatment will take place
- Cost estimate

Exclusions:

- Non medically necessary treatments
- Experimental treatments
- Cosmetic surgery
- Prices exceeding the reasonable and customary levels



Emergency Admissions: Always Call Our Dedicated Customer Service Team



All planned hospital admissions require prior approval from Cigna's medical team



The screenshot shows the Cigna website's contact form. At the top, there is a navigation bar with links for Home, My plan, Claims, Provider search, My health, and Contact. Below this is a sidebar with options: Contact form (selected), Contact details, Toll-free numbers, Email me, and Call me back. The main content area is titled 'CONTACT FORM' and includes a message: 'DIDN'T FIND THE ANSWER YOU WERE LOOKING FOR? WE'RE HAPPY TO HELP.' Below this is a section titled 'HOW CAN WE HELP YOU?' with a prompt to choose a topic from a dropdown menu. The selected option is 'I want to request a Guarantee of pay...'. Further down, there is a section titled 'I WANT TO REQUEST A GUARANTEE OF PAYMENT' with instructions to use the form for direct payment requests and a link to a 'Cost estimate form'. The form itself is divided into three sections: 'PATIENT DETAILS' (First name, Last name, Cigna personal reference number, Date of birth), 'ADMISSION DETAILS' (Date of admission, Expected date of discharge), and a text area for 'Diagnosis or reason for admission'.

What should I do in case...



The Healthcare Provider will Not Accept My Cigna Card

1

Contact us so we can get in touch with the provider

2

In case of agreement suspension we may be able to negotiate the acceptance of a guarantee of payment or offer you an alternative



I Would Like to Propose a Provider to be Included within the Network

1

Contact your local HR and submit the proposal. They will submit it to us, so our Provider Expansion Team can try to negotiate with the provider



Health and Wellbeing Support



Access Care Through Global Telehealth

Live video & telephone doctor consultations.

What is Global Telehealth?

Cigna Healthcare customers can see a licensed doctor with private, online and live appointments via a secure video or phone conversation.

Global telehealth provides:

- **24/7/365** access to a doctor within **24-72 hours** available globally in multiple languages
- Access to board certified doctors - internal medicine, gastroenterology, orthopedics, mental health specialists and pediatricians
- Affordable and convenient alternative to doctor or clinic visits – with no deductibles or coinsurance, and no need to leave the house
- Mobile app access to real-time scheduling
- **Telehealth is free of charge**

How can I Use Global Telehealth?

Diagnosis for non-emergency health issues – ranging from acute conditions to complex chronic conditions and pediatric care
Prescriptions on common health issues – when clinically necessary

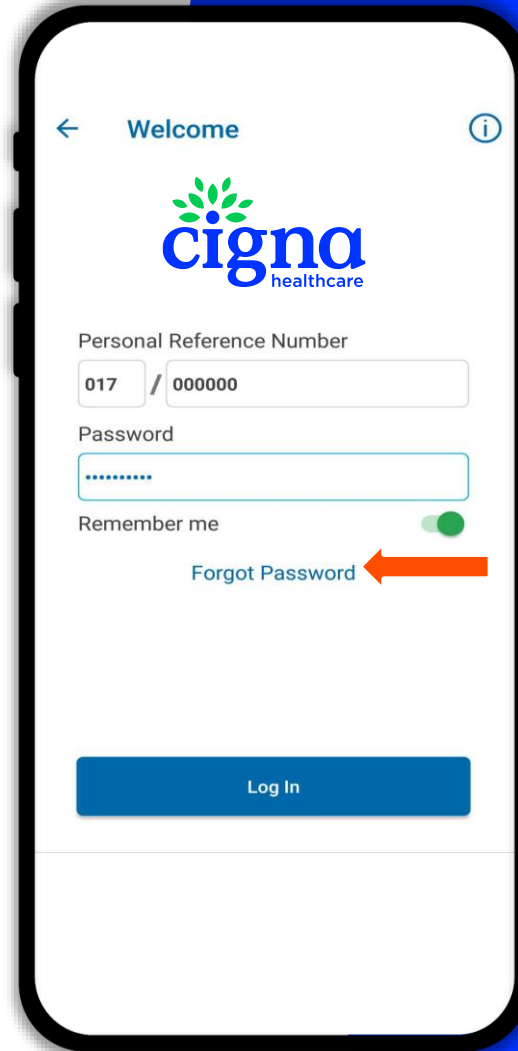


How to Access Global Telehealth?



Cigna Wellbeing™ App

The app can be downloaded for free from the **Apple App Store** or **Google Play Store**.



Log In Instructions:

1

Select the **'International Organisations'** option for Plan Member; or Dependant.

2

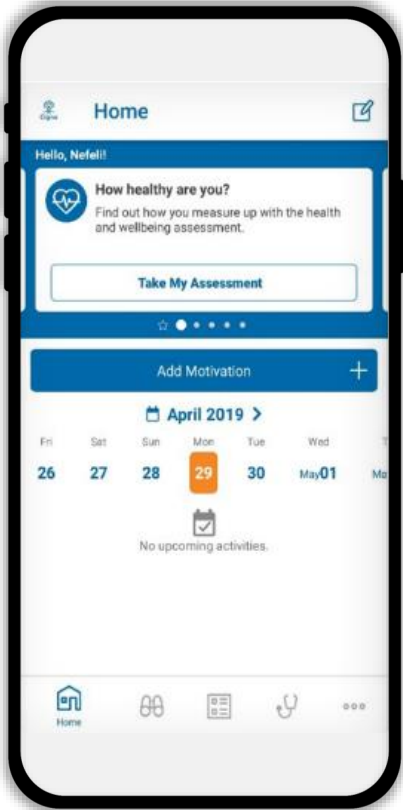
Enter your **Personal Reference Number** and **Password**.

3

If you don't have a password yet, you will be asked to create one on our website first. Please go to <https://www.cignahealthbenefits.com/plan-members>. Log in with your personal reference number and date of birth and follow the instructions on the screen.

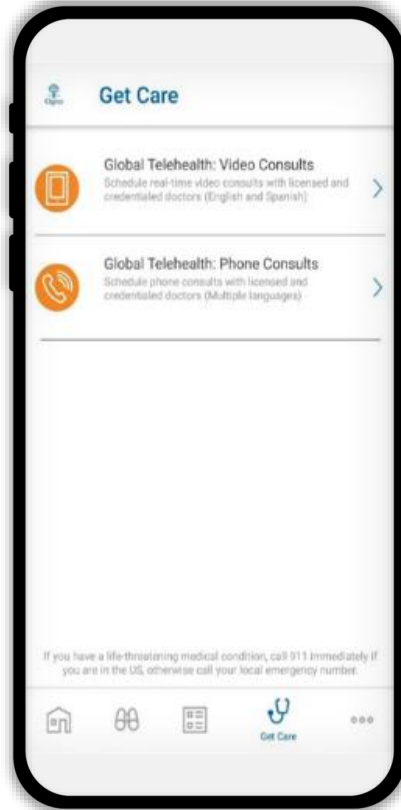


Schedule a Consultation



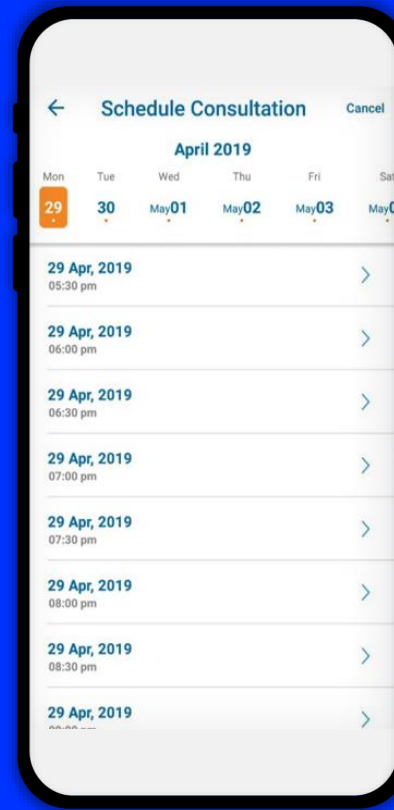
1

After Logging In to the Cigna Wellbeing App, Tap On **Get Care** at the Bottom Navigation Menu



2

Select Whether You Want to have a **Video Consultation** or a **Phone Consultation**



3

If You Selected a Video Consultation Tap on **Schedule Consultation**

4

Select the **Date and Time** That is Most Convenient for You

Schedule a Consultation

Provide a Brief Description of the Reason for Your Appointment and **Upload Any Files** that may be Relevant to **Your Symptoms Or Condition** (Optional)

If You Selected a Phone Consultation You Can Call the **Direct Phone Line** to Schedule an **Appointment** or Enter Your Details and **Request For a Doctor** to Call You

5

7

6

← Additional Details Cancel

Callback Number*

Enter number

We will call you on this phone number if your video consultation gets disconnected for any reason. *Required

Select the timezone relative to your location at the time of your consultation.

Timezone (GMT+12:00) International D.

Language Preferences English (Default)

Country United Kingdom (Default)

Share my information with Cigna for referral

[For more information, view our privacy policy](#)

This will be automatically added to your device calendar. To turn this feature off, go to the app settings.

Submit

Enter the Additional Details Required and Tap on **Submit**

The Telehealth Consultation



Phone Consultation

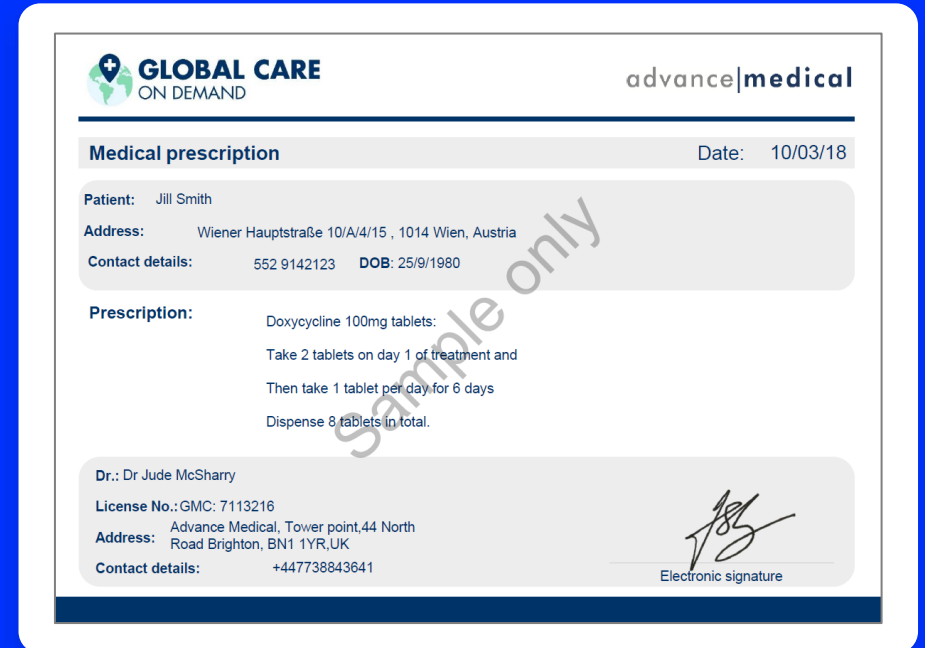
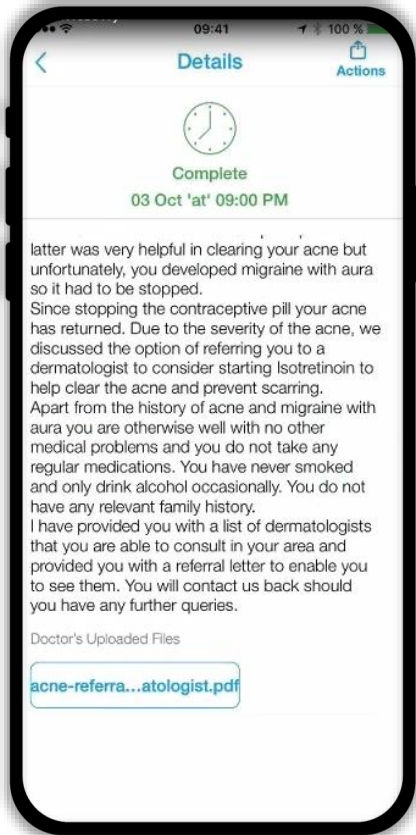
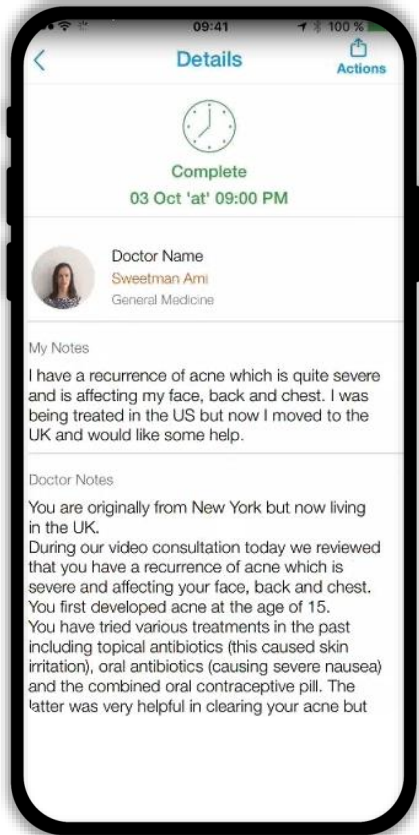
The Telehealth doctor calls you to start the consultation



Video Consultation

Log back into the app 10 min before the schedule time

The Outcome of a Telehealth Consultation



POST VISIT



Upload Medical Notes and Prescription(s) and sick leave certificates

Provide your email address to receive the documentation via email.

Need more information?

- Visit the brand-new HLIS website: www.un.org/insurance
 - Consult policy information and the MIP Benefits Booklet
- Contact the Third-Party Administrator Cigna International
 - ✓ Use the **call back feature** on Cigna's member pages under header 'Contact'
 - ✓ Email to **un.mip@cigna.com**
 - ✓ Call Cigna 24/7/365 on the **telephone number** mentioned on your Cigna membership card
 - ✓ Call a **toll-free line** (listed on www.cignahealthbenefits.com under header 'Contact')
- Contact your HR focal point who can contact the HLIS on your behalf if needed

Need more information?



United Nations

Health & Life Insurance Section

Search

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All about Your Health & Life Insurance

Welcome to the website of the UN Health and Life Insurance Section (HLIS). We trust that this site provides you with everything you need to know about UNHQ-administered health & life insurance, including the onboarding process, plan maintenance and transition after your retirement.

It is the common responsibility of all plan participants of the self-insured UNHQ-administered health plans to safeguard the sustainability of these plans, funded by all plan participants and the Member States. This website allows staff members and retirees to be fully informed of the insurance benefits as well as ways to contribute to reducing costs. You will have access to reference material such as guidance material from Third-Party Administrators (TPAs), insurance rate simulators, checklists, brochures, forms and updates as well as various Toolkit pages designed for the specific needs of each of our more than 150,000 plan participants worldwide.

Enjoy your learning journey!

Shortcuts for your Specific Needs

Please click on the most applicable picture below in order to directly access the information most relevant to you.



[New to the UN](#)



[Active Staff](#)



[Retirees](#)

We kindly invite you to visit our website (www.un.org/insurance) and discover a wealth of information available to you!

FAQ

- **What are the territorial limitations of the UN MIP?**
- **What do Stop Loss Clause and Out-of-pocket maximum actually mean?**
- **Can I make changes to my insurance coverage between Annual Enrollment Campaigns?**
- **What happens if we do not feel well when we travel (not on official mission)? Will the medical expenses be covered?**
- **Are travel expenses to the Regional Area of Care covered?**
- **When should a Guarantee of Payment be requested?**