CIGNA HEALTHCARE, GLOBAL HEALTH BENEFITS

People Serving People

Caterpillar Inc.

US Inbound

Offered by Cigna Healthcare and Life Insurance Company or its affiliates

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Agenda

Welcome

- Contacting Cigna Global
- Benefit Plans
- Network Access
- Digital Tools
- Claims Payment Options:
  - Claims Submissions
  - Reimbursements
- Appendix

Cigna Healthcare contact information

Available 24/7/365

We want to hear from you!	
Toll-free telephone number	**+01 800.441.2668**
Direct telephone number (reverse charges accepted)	**+01 302.797.3100**
Secure Email	**www.CignaEnvoy.com**

Benefit plans

Medical – All amounts are in U.S. Dollars

OAP US network

Plan Feature	International	In-Network U.S	Out-of-network U.S.
Lifetime maximum benefit	UNLIMITED		
Coinsurance	100% of covered expenses	100% of covered expenses	50% of covered expenses
Deductible	$0 Individual $0 Family	$0 Individual $0 Family	$0 Individual $0 Family
Out-of-pocket maximum (Deductible is included)	$0 Individual $0 Family	$0 Individual $0 Family	$4,600 Individual $9,200 Family
Doctor / specialist office visits	100%	100%	50%
Prescription drug benefit	100%	Tier 1: No Charge Tier 2: No Charge Tier 3: No Charge	Tier 1: 50% Tier 2: 50% Tier 3: 50%
Adult & Child preventive care services	100% of covered expenses	100% of covered expenses	50% of covered expenses
Emergency Room	100%	100%	100%
Urgent Care Services	100%	100%	50%

Dental - All amounts are in U.S. Dollars

Plan Feature	Benefit
Classes I, II, III Combined Calendar Year Maximum	$3,000
Class IV Lifetime Maximum	$1,500
Calendar Year Deductible **Lifetime Class IV Deductible**	$50 Individual / $150 Family $50 Individual
Class I Preventive	100% of covered expenses
Class II Basic Restorative	80% after plan deductible
Class III Major Restorative	50% after plan deductible
Class IV Orthodontia Class IV Orthodontia applies only to a Dependent Child less than 22 years of age.	50% after separate deductible
Class V Implants	Not Covered

Vision - All amounts are in U.S. Dollars

Plan Feature	International	In-Network U.S	Out-of-network U.S.
Vision Exams One Eye Exam every 12 consecutive months	100%	100%	100%
Vision Hardware – Lenses & Frames One pair of glasses or contact lenses per 24 consecutive months **Hardware Maximum Benefit:** $200	100%	100%	100%

Network capabilities

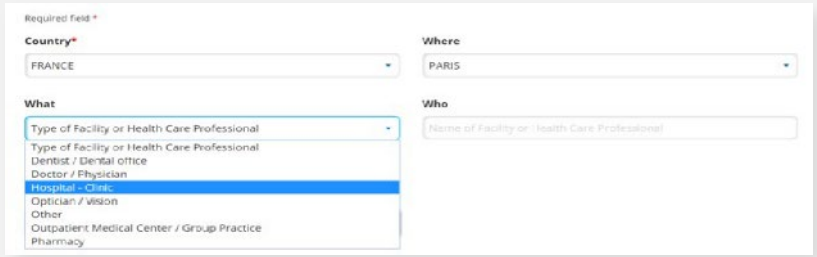
Accessing care

Stay in-network and save

Through your Global Medical Plan you have access to the Cigna Healthcare network of over **1.7 million** providers with **400,000** outside the U.S.[1]

Why stay in-network?

- Access to quality, affordable healthcare anywhere in the world
- Manage your out-of-pocket costs through discounted rates and direct payment to doctors and hospitals
- Reduce the overall cost of the Global Medical plan



How to locate in-network providers?

- Log onto www.CignaEnvoy.com OR download the Cigna Envoy mobile app
- Select “Find a Provider” and choose your desired country from the drop down
- Filter by location, provider type (i.e. hospital or doctor) or specialty

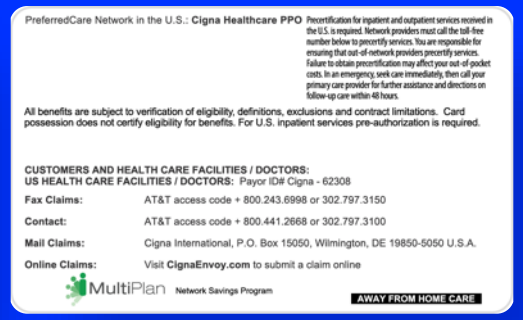
You may also contact Cigna Healthcare at any time for assistance.

1. Data from GHB Network analysis for full year 2023. Subject to change.

Your Cigna Healthcare global & co-branded ID cards

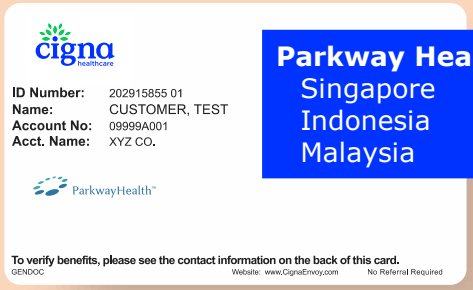
Keep your Cigna Healthcare global ID card with you at all times to access quality health care anywhere in the world.

All employees will receive
the Cigna Healthcare ID card:



For the following countries, you will receive a co-branded ID:

Singapore, Indonesia, Malaysia,
Hong Kong and UK



Parkway Health:
Singapore
Indonesia
Malaysia

QHMS:
Hong Kong

Cigna UK

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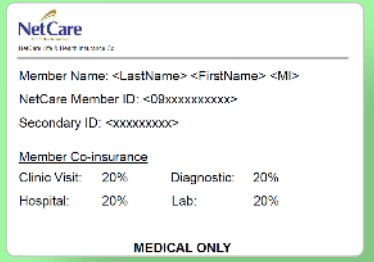
Cigna*Links*® ID cards

Australia



Guam

Spain

Brazil

South Africa, Nigeria

Cigna*Links*® ID cards - Middle East

Qatar

UAE, Bahrain, Oman, Kuwait

KSA SAICO

Cigna KSA

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*Qatar Bahrain Oman Kuwait

Cigna*Links*® Canada

Seamless access to health care around the world

- Assistance with Provincial Plan enrollment
- Access to quality, cost-effective care
- In-network benefits directly paid to providers
- Access to local network of health care providers
- In-house medical experts
- Second ID card
- Pharmacy benefit management program

Local Relationship

Cowan Insurance Group

Cowan

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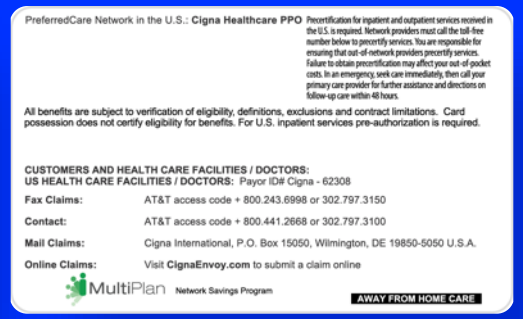

For the following countries, you will receive a co-branded ID:

Singapore, Indonesia, Malaysia,
Hong Kong and UK

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Do I need to activate my Canada Cowan ID cards?

1. Only your Cowan ID card is required to be activated
2. To do so, visit https://Cigna.cowangroup.ca/activation or by calling 1.844.703.7483
3. CignaLinks welcome kit: What's in it for me:

   - A blank page with customer full name, Cigna ID number, and employer name

   - Cowan ID card (s) affixed to the bottom of the page for employee and all dependents

   - CignaLinks Canada welcome brochure

   - CignaLinks Canada consent form

   - A Cowan return envelope (to return the signed consent form)

How the health plan works in the United States (U.S.)

In-network vs. out-of-network

In-network

- Health Providers who participate in the Cigna Healthcare network.
- Cigna Healthcare has negotiated discount programs and direct pay arrangements. The in-network providers have agreed to charge lower fees and will bill Cigna Healthcare directly for your services. No need to submit a claim or pay the doctor.
- Finding an in-network provider is easy and can be done on CignaEnvoy.com or by calling customer service.

Out-of-network

- You have the freedom to visit doctors or use facilities that are not part of the Cigna Healthcare network.
- Costs of services will be higher.
- There is a limit to the amount your plan will pay for out-of-network services, this is called the maximum reimbursable charge (MRC).
- You may need to pay out of pocket and file a claim.

Balance Billing:

- If a provider charges more than the MRC, Cigna Healthcare will only reimburse up to that limit.
- If the provider billed Cigna Healthcare on your behalf, they may bill you for the difference. These payments do not apply to your deductible or out-of-pocket maximum.
- This will only happen if you go to an out-of-network provider.

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What to do if you become sick or injured

IF YOU BECOME ILL OR NEED TO SEEK CARE:

Locate a health care provider (HCP)

- View our provider directory on CignaEnvoy.com OR contact Cigna Healthcare global customer service using the phone numbers on the back of your ID card to assist with a provider referral.
- If you are in a Cigna*Links* location, the provider directory will alert you to network providers first.

WHEN YOU SEEK CARE:

Always present your Cigna Healthcare ID card or Cigna*Links* ID card where applicable. If the provider is not part of our direct pay network ask for them to contact us directly so we can issue a Guarantee of Payment (GOP).

IF YOU ARE SERIOUSLY INJURED OR BELIEVE YOUR ILLNESS IS LIFE THREATENING:

Seek immediate help

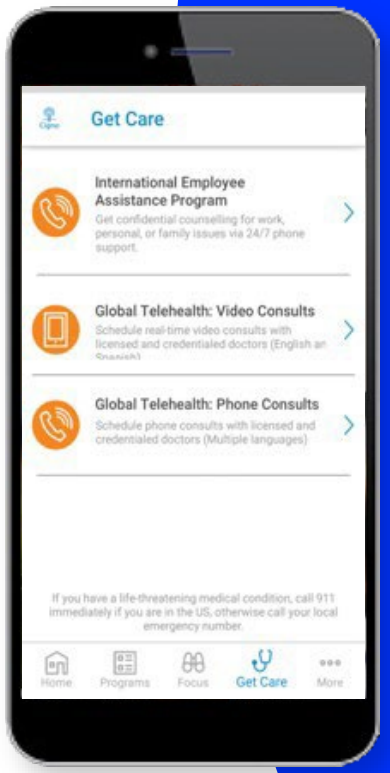
Contact Cigna Healthcare global customer service as soon as possible so we can determine if the facility you are located at can properly handle your medical condition and/or facilitate a GOP if necessary.

Access care through global telehealth

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:

  - **No out-of-pocket cost**
  - 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



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

Global telehealth is provided by Teladoc, an independent company. Some countries prohibit or limit the usage of telehealth. Telehealth may not be available in all areas or jurisdictions. Terms and conditions may apply.

Guided Health Advisor

- Simple yet comprehensive online questionnaire that takes 10 minutes to complete
- Fill out the questionnaire for yourself and any dependents who will be covered with you on your assignment
- Identifies existing medical conditions
- Learn how to manage or maintain your health while on assignment
- Outreach from Cigna Healthcare* to help with current and/or potential issues

There are two ways to access the questionnaire, depending on whether you have received your Cigna Healthcare ID card

With ID card

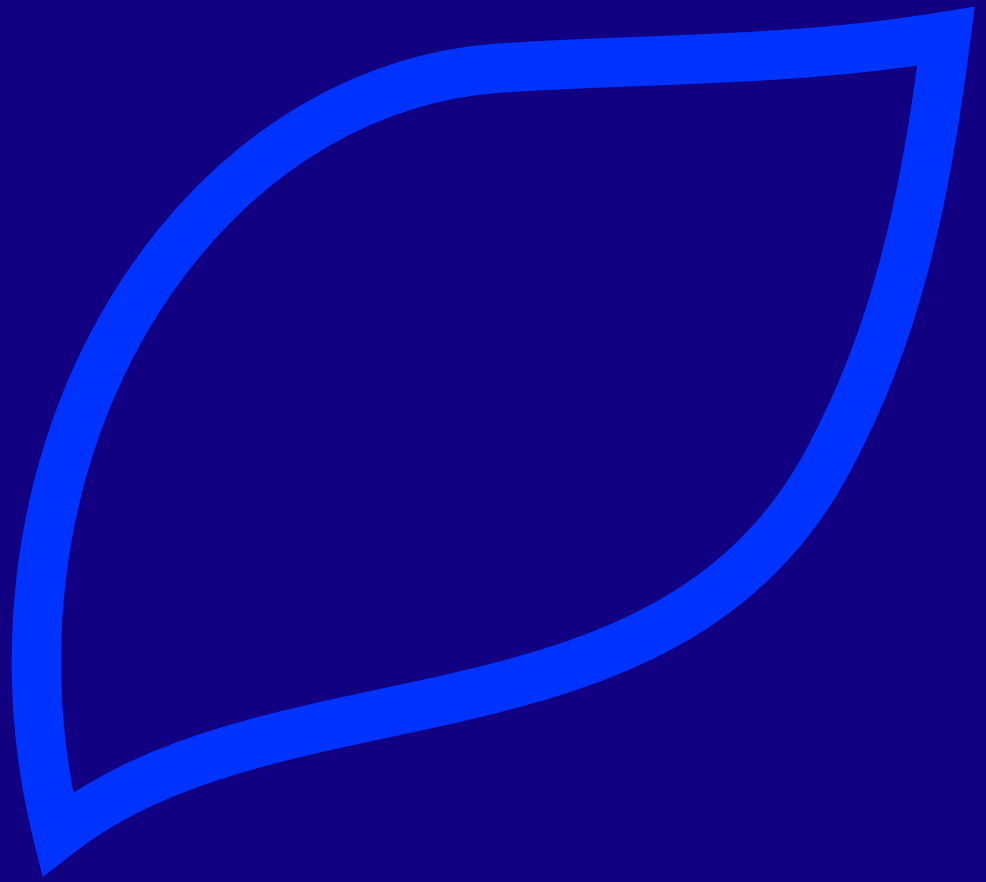
- Visit **CignaEnvoy.com** and select '**I have an existing login**'. If you have not yet registered for Cigna Envoy, select '**I have not registered yet**' and follow the prompts.
- Select '**Health and Wellbeing**' then '**What to Know When Travelling & Relocating**'. The pre-departure medical assessment will be the first option.

Without ID card

- Visit CignaEnvoy.com and select 'I do not have a '**Cigna Healthcare ID/Pre-assignment tools**'. Log in with your client ID number and password below:
  - User ID: CAT06897A
  - Password: 06897ACAT (password is case sensitive)

*You must select "yes" to the consent box in order to be contacted by the Cigna Healthcare Clinical Team

Digital tools



Simple self-service

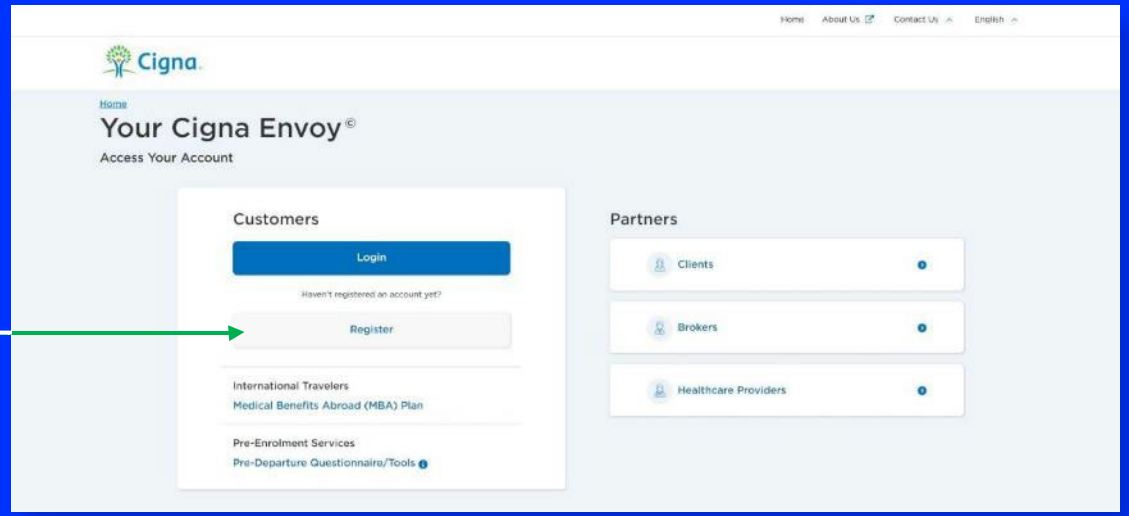
Cigna Envoy®

Your digital portal to:
(one experience via web or app)

- Review plan information
- Find a provider
- Submit claims
- Manage pharmacy needs
- Access digital toolkit
  (ID cards, booklets, country guides, and more)
- Multi-lingual

Registration

Click this option



With your Cigna Healthcare ID number, you can register for Cigna Envoy.

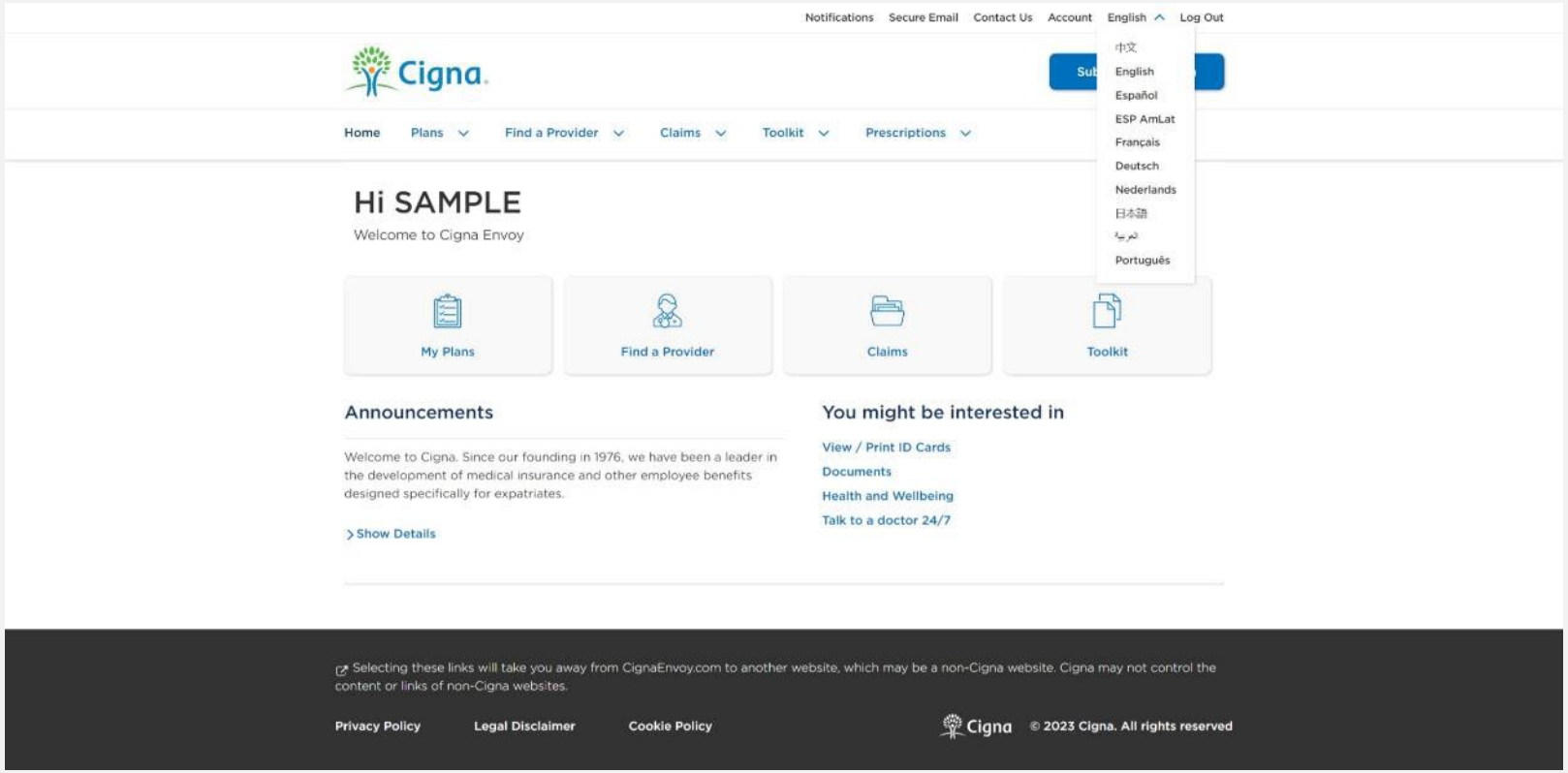
To register for the Cigna Envoy website, from your web browser navigate to www.CignaEnvoy.com and, within the "**Customers**" section, select "**Register**".

*** For Registration assistance, contact Cigna Customer Service available 24/7/365

Contact number is on the back of your ID Card.

Cigna Envoy: Homepage

- **Cigna Envoy is available in:**
  - Arabic
  - Chinese
  - Dutch
  - English
  - French
  - German
  - Japanese
  - Portuguese
  - Spanish



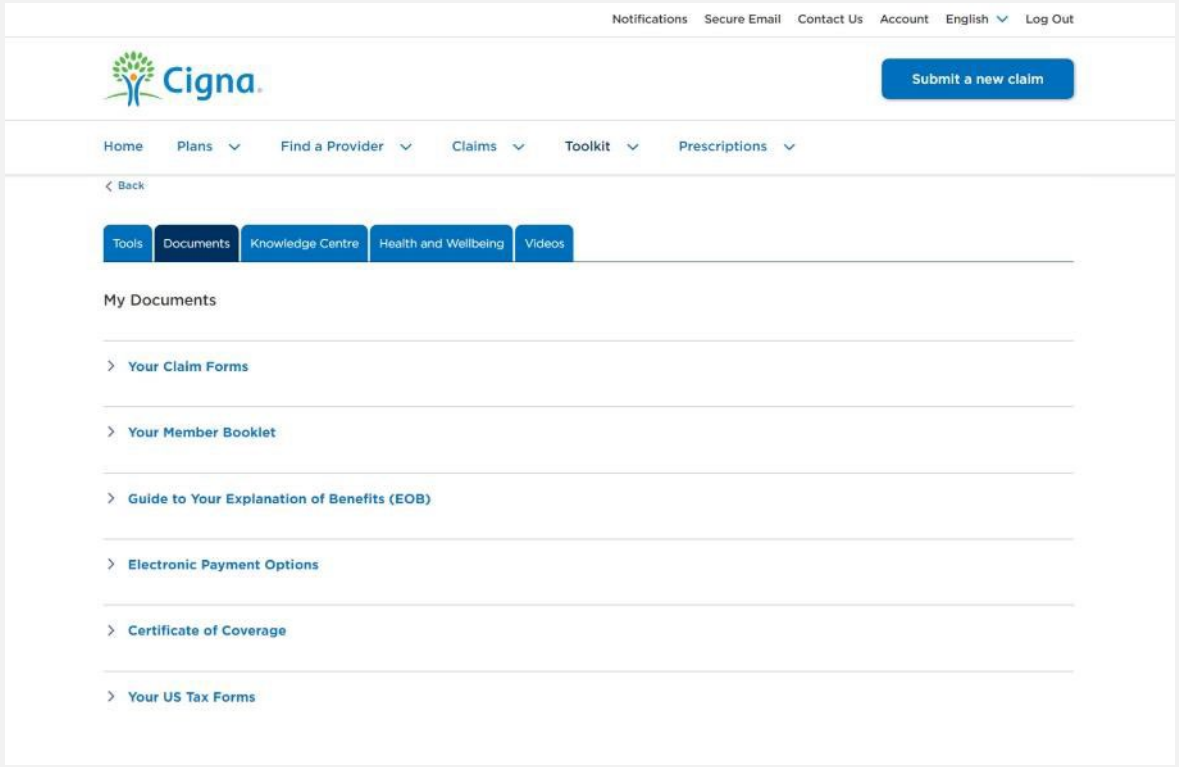
Certificates of Coverage

What is a **Certificate of Coverage**

- **Certificate of Coverage** provides evidence of health coverage and is often needed for a visa application. Customers can log onto Cigna Envoy and obtain a copy of their certificate of coverage under the 'Toolkit' section*

The **Certificate of Coverage** will:

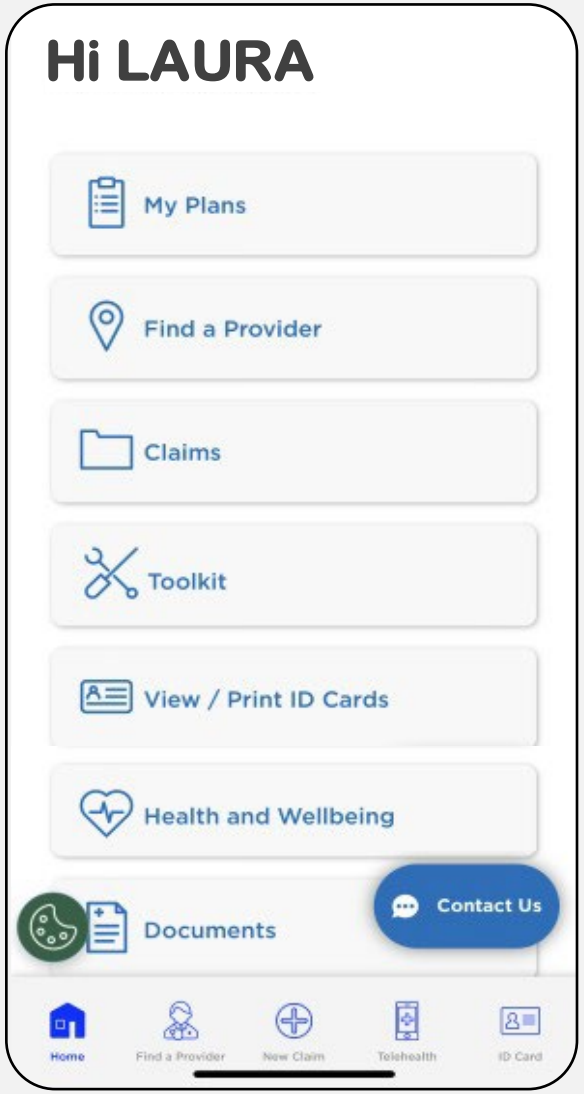
- Auto-generate based on reported work location
- Include employee and dependent information (if applicable)



*Online Certificates of Coverage will not generate for customers with no reported nationality and/or work location. Online Certificates of Coverage will not be available for customers with a reported nationality and/or work location in Iran, Syria, Ukraine, Cuba, North Sudan, or North Korea . Certificates of Coverage for expats in Germany, Russia, Turkey, Czech Republic, Switzerland, and Australia should continue to be requested through our Customer Service Team and will not be available online.

Cigna Envoy: Mobile app

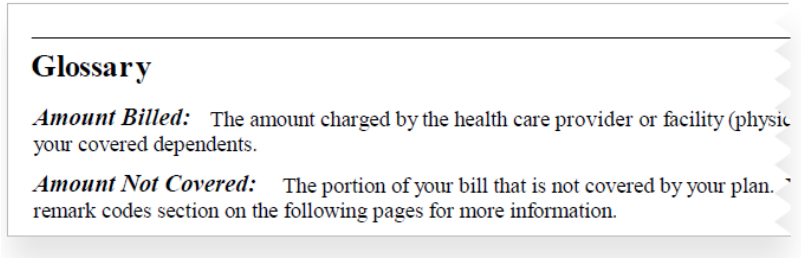
- At Cigna Healthcare, we are dedicated to making sure you have quick and easy access to your Cigna Healthcare benefits and services anytime and anywhere you need them.
- That is why we created the Cigna Envoy mobile app. Cigna Envoy is the online source for your benefit needs and you can access it right on your smartphone.



Payment options, claim submissions, reimbursements

Understanding Your Explanation of Benefits (EOB)

If you're unsure of the meaning of a word or phrase, you can look it up in the glossary.



Glossary

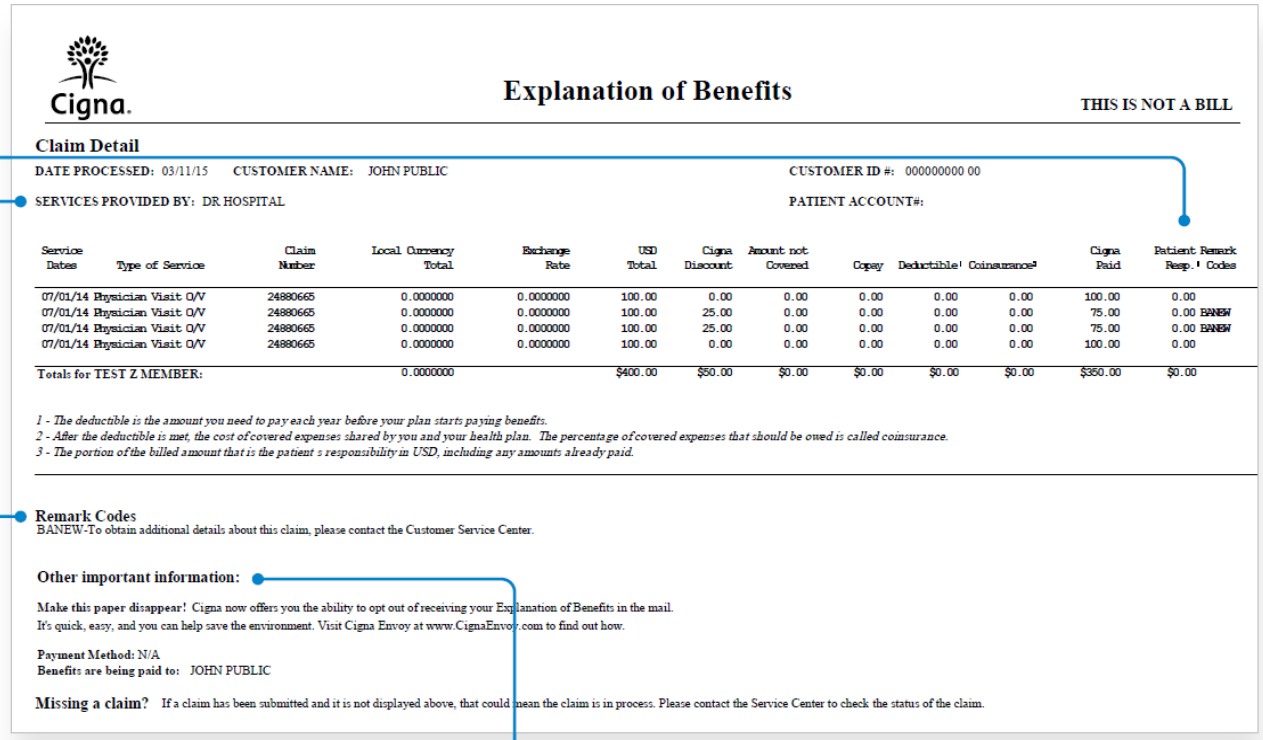
Amount Billed: The amount charged by the health care provider or facility (physic
your covered dependents.

Amount Not Covered: The portion of your bill that is not covered by your plan.
remark codes section on the following pages for more information.

The Claim Detail page follows the Glossary page.

The total amount you may owe is listed in the Patient Responsibility column.

You may owe this amount to the health care provider or facility that provided your services, which is listed above the details of your visit.



Cigna.

Explanation of Benefits

THIS IS NOT A BILL

Claim Detail

DATE PROCESSED: 03/11/15 CUSTOMER NAME: JOHN PUBLIC CUSTOMER ID #: 000000000 00

SERVICES PROVIDED BY: DR HOSPITAL PATIENT ACCOUNT#:

Service Dates	Type of Service	Claim Number	Local Currency Total	Exchange Rate	USD Total	Cigna Discount	Amount not Covered	Copay	Deductible[1]	Coinsurance[2]	Cigna Paid	Patient Resp.[3]	Remark Codes
07/01/14	Physician Visit O/V	24880665	0.0000000	0.0000000	100.00	0.00	0.00	0.00	0.00	0.00	100.00	0.00	
07/01/14	Physician Visit O/V	24880665	0.0000000	0.0000000	100.00	25.00	0.00	0.00	0.00	0.00	75.00	0.00	BANEW
07/01/14	Physician Visit O/V	24880665	0.0000000	0.0000000	100.00	25.00	0.00	0.00	0.00	0.00	75.00	0.00	BANEW
07/01/14	Physician Visit O/V	24880665	0.0000000	0.0000000	100.00	0.00	0.00	0.00	0.00	0.00	100.00	0.00	
Totals for TEST Z MEMBER:			0.0000000		$400.00	$50.00	$0.00	$0.00	$0.00	$0.00	$350.00	$0.00	

1 - The deductible is the amount you need to pay each year before your plan starts paying benefits.
2 - After the deductible is met, the cost of covered expenses shared by you and your health plan. The percentage of covered expenses that should be owed is called coinsurance.
3 - The portion of the billed amount that is the patient s responsibility in USD, including any amounts already paid.

Remark Codes
BANEW-To obtain additional details about this claim, please contact the Customer Service Center.

Other important information:

Make this paper disappear! Cigna now offers you the ability to opt out of receiving your Explanation of Benefits in the mail.
It's quick, easy, and you can help save the environment. Visit Cigna Envoy at www.CignaEnvoy.com to find out how.

Payment Method: N/A
Benefits are being paid to: JOHN PUBLIC

Missing a claim? If a claim has been submitted and it is not displayed above, that could mean the claim is in process. Please contact the Service Center to check the status of the claim.

Remark Codes are notes that explain processing methods.

Payment amount and method are stated in the Other important information section.

Fast and flexible: Claim submission

Multiple options, same great service

While we regularly make payments directly to the health care providers, our claims process is flexible. Medical, dental, vision, and prescription claims can be processed through:

Direct payment

We have a robust provider network – with more than one million health care providers worldwide[1] – and we regularly make direct payments to doctors and hospitals willing to accept this arrangement. You can simply present your **Cigna Healthcare ID card**, and the doctor or hospital will bill Cigna Healthcare directly.

Please note: some direct pay providers may still require a GOP from Cigna Healthcare.

Guarantee of payment

If you receive care outside of our direct payment network, we have nearly a **100 percent success rate** in establishing a guarantee of payment.

Pay and claim

You also have the option of paying for services up front and submitting the claim to Cigna Healthcare for reimbursement. You can take advantage of our simple claims submission process through **Cigna Envoy**, the Cigna Envoy Mobile App, via toll-free fax or standard mail. Claim reimbursements are available in more than 135 currencies.[2]

Data from GHB Network analysis for full year 2022. Subject to change.
Data from GHB claims internal analysis as of February 2023. Subject to change

Requesting a guarantee of payment (GOP)

What is a guarantee of payment?

A Guarantee of Payment (GOP) allows doctors that may not participate in our network to verify eligibility and confirm benefits before you receive care.

Using a GOP increases your access to care around the world, reduces out-of-pocket expenses and enables the hospital to invoice Cigna Healthcare directly. GOPs can be requested by the customer or the provider.

Information Cigna Healthcare requires for a GOP

- Patient name
- Cigna Healthcare customer's name and ID
- Hospital, phone, email and fax
- Hospital contact name, address and country
- Diagnosis
- Requested medical procedure
- Admitting counselor/doctor
- Cost Estimate (If a cost estimate is not received, a Verification of Benefits (VOB) may be issued instead of a GOP, which means no GOP is issued and only benefit coverage is confirmed).
- Date of service (admission and discharge data)

If you are seriously injured or believe your illness is life threatening, **please seek immediate care.**

Then contact Cigna Healthcare +1-800-441-2668 so Cigna Healthcare can facilitate a GOP.

If you need to pay and submit a claim

Our medical and dental claims forms are available in 16 languages

Arabic | Chinese | Czech | Dutch | English | French | German | Hindi | Italian | Japanese | Korean | Portuguese | Russian | Spanish | Swedish | Thai

CignaEnvoy.com

All registered users of our website, CignaEnvoy.com, are able to submit and view previous claims electronically using an easy-to-follow process.

Cigna Envoy mobile App

Submit using the photo claim submission tool through the Cigna Envoy mobile app.

Mail or fax

Mail delivery:

Cigna Healthcare Customer Service Center

P.O. Box 15050

Wilmington, Delaware 19850

Fax: 1.800.243.6998

In the event you have to pay and claim

Submit your claim through CignaEnvoy.com or the Cigna Envoy mobile app. This is the fastest and easiest way to get your claims to Cigna Healthcare.

- All out-of-network claims should be sent directly to Cigna Healthcare.
- If you choose to mail or fax your claim(s), make sure your claim form is filled out completely, and **don't forget to sign it!**
- **Fill out a separate form for each doctor or hospital visit.**
- **Be sure to add a diagnosis, type of treatment or explanation of treatment.**
- Provide a detailed list of fees for each service rendered along with the date it was performed.
- Make and keep handy copies of your bills, receipts and claim forms.
- Clearly state how you would like to be reimbursed.

Remember: If you can't submit your claim online or via the app, faxes are faster than regular mail.

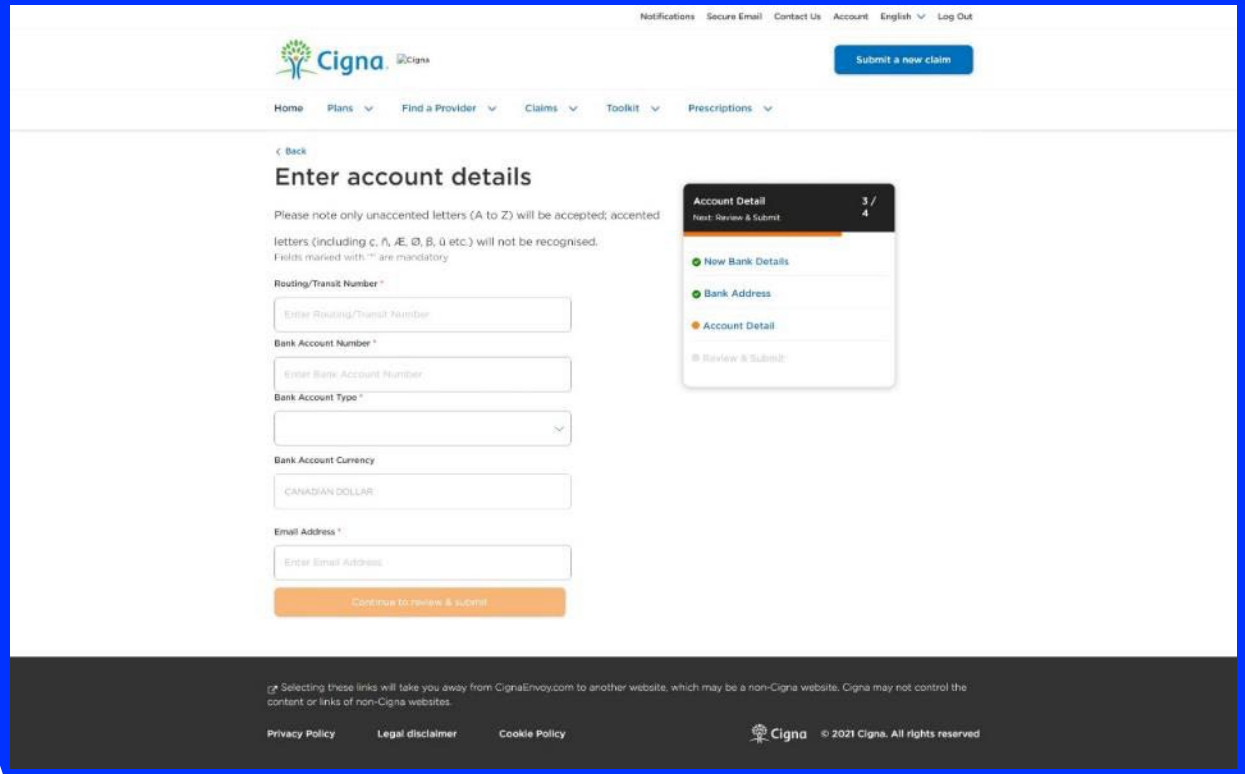
Claim reimbursement options

- **Wire transfers**[1] to bank accounts around the world.
- **Direct payment** to a U.S. or Canadian bank.
- **Electronic Funds Transfers (EFT).**
- **ePayment Plus**® is an automated online payment system. With ePayment Plus, your reimbursement money is deposited directly into your bank account in one of the following countries:
  - Australia · Canada · Denmark · Hong Kong
  - New Zealand · Norway · Singapore · Sweden · UK
  - To sign up, go to CignaEnvoy.com.
- **Paper checks** can be issued to you in over 135 currencies.[2]

1. Your bank, or intermediary banks, may apply a fee for the receipt of wire transfers. Cigna can only reimburse where legally permitted.
2. Data from GHB claims internal analysis as of February 2023. Subject to change.

Claim reimbursement – Canada bank instructions

- An Electronic Fund Transactions (EFT) routing number is comprised of a three-digit financial institution number and a five-digit branch number, preceded by a "leading zero".
- Example : 0XXXYYYYY
- 0 : Leading zero
- YYY : Institution Number
- XXXXX : Branch Number (also called Transit Number)



What do I do if my claim is denied or pending?

- Review your Explanation of Benefits (EOB) on Cigna Envoy
- If you have questions Email or Call Cigna for further information.

We want to hear from you!	
Toll-free telephone number	**+01 800.441.2668**
Direct telephone number (reverse charges accepted)	**+01 302.797.3100**
Secure Email	**www.CignaEnvoy.com**

Medication Prior Authorization form can be provided by the Cigna Contact Center to the health care professional or provider to complete when a pre-authorization is required for a customer or pharmacist to fill the prescription.

Appendix

Glossary of terms

Copayment (copay): The amount you pay per visit to the doctor or a health care facility. This is generally a flat dollar amount that is paid at the time of service. The amount can vary based on your plan coverage terms and the type of covered health service you receive.

Deductible Amounts: This is the amount of covered expenses that you must pay before the plan pays any benefit. Once you meet this threshold, the plan will begin to pay benefits for covered expenses that you incur; this applies to both individual and family plans.

Coinsurance: A percentage of the cost of covered medical services you must pay after you have met any plan deductible. Coinsurance is a percentage of the cost of the service post Cigna Healthcare discount (if you stay in-network). It does not include charges for services not covered by your plan.

In-network: Health care providers or facilities that have signed contracts with Cigna Healthcare and may therefore offer discounts for health services when you receive care and directly bill Cigna Healthcare.

Out-of-network: Health care providers or facilities that do not offer discount arrangements for services with Cigna Healthcare and may require that you pay for services at the point of care. You may visit any health care facility you choose; however, choosing a doctor who does not participate in the Cigna Healthcare Network may lead to higher out-of-pocket costs.

Product availability may vary by location and plan type and is subject to change. Products may not be available in all jurisdictions and are excluded where prohibited by law. All group health insurance policies and health benefit plans contain exclusions and limitations. For costs and details of coverage, review your plan documents or contact a Cigna Healthcare representative.

Cigna Healthcare products and services are provided exclusively by or through operating subsidiaries of The Cigna Group, including Cigna Health and Life Insurance Company, Cigna Life Insurance Company of Canada, Cigna Global Insurance Company Limited, Evernorth Care Solutions, Inc., and Evernorth Behavioral Health, Inc. The Cigna Healthcare name, logo, and other Cigna marks are owned by Cigna Intellectual Property, Inc., licensed for use by The Cigna Group and its operating subsidiaries. “Cigna Healthcare” refers to The Cigna Group and/or its subsidiaries and affiliates.