

Clarification on coverage and procedure changes as from 15th February 2018

We have noticed an increasing trend of overconsumption and fraudulent behaviour for certain benefits, to such extent that additional measures must be taken and coverage must be clarified.

The EVS insurance plan is designed to provide coverage to volunteers when they need it most, i.e. in case of illness or urgent situations such as accidents, and always as complementary to the coverage provided by your European Health Insurance Card.

If you are affiliated to a primary health insurance plan at the start of your EVS service, you will be enrolled as complementary insured with Cigna. As such, your primary health insurance plan is not meant to be cancelled once you are enrolled with Cigna. Cigna does not replace your primary statutory insurance or national social security scheme but provides complementary coverage.

The following procedure changes are in force as from 15th February 2018:

1. European Health Insurance Card

You are required to make use of your European Health Insurance Card (EHIC) for all medical expenses both in your home and hosting countries, such as:

- Pharmaceutical expenses (prescription drugs with active pharmaceutical ingredients)
- Unplanned hospitalisations (emergency care)
- Expenses related to chronic diseases

Please check with your <u>local/national health insurance provider</u> to see what your EHIC rights abroad are. Cigna will only provide complementary coverage.

You should be duly diligent in requesting your EHIC from your local/national health insurance provider well in advance. If the delivery of EHIC is refused for any reason by from your local/national health



insurance provider, please inform us by email, specifying the refusal reason and adding a copy of the refusal letter issued by the local/national health insurance provider.

Before you leave home country you must have your EHIC or the letter of refusal of your local/national health insurance provider with you. If you are already on voluntary service in the field and do not have your EHIC with you, please take action to obtain this document as soon as possible.

Information on the EHIC is available on the website of the European Union:

- Requesting the EHIC
- Download the EHIC app for your smartphone

2. Dental care

In case of sudden dental complaints, the only treatment covered is treatment that is meant to stabilise the dental complaints. Any treatment that can be postponed until after the EVS period will not be covered by the insurance.

3. Pharmaceutical expenses

Only prescribed generic drugs with active pharmaceutical ingredients are covered, unless, in specific cases, prescribed brand drugs have a proven medical necessity.

3. Mandatory prior approval for the following treatments:

- Planned hospitalisations
- Laboratory and diagnostic tests
- · X-rays/radiotherapy/chemotherapy
- Physiotherapy (as from the first session)
- Psychotherapy (as from the first session)
- Optical care:

Purchase of replacement eyeglasses or contact lenses will only be reimbursed after prior approval has been requested and granted by Cigna.

Only one replacement of a pair of glasses will be reimbursed for the whole EVS period, and only single vision glasses without treatment, unless already differently prescribed by the ophthalmologist in the home country.



The following supporting documents must be attached to your prior approval request:

- In case you lose your eyeglasses/contact lenses, or if they become unusable:
 - Medical report/prescription from your ophthalmologist in your home country, indicating your ongoing treatment and his/her contact details for cross-checking;
 - Declaration of honour describing the circumstances of the loss, signed by yourself and by the legal representative of the Hosting organisation.
 - 2 cost estimates completed by 2 separate opticians for the same brand/type of frame and lenses.
- · In case your eyeglasses/contact lenses were stolen:
 - Medical report/prescription from your ophthalmologist in your home country, indicating your ongoing treatment and his/her contact details for cross-checking;
 - Police report;
 - 2 cost estimates completed by 2 separate opticians for the same brand/type of frame and lenses.

Please use the Optical cost estimate form and the Declaration of honour you can find on <u>your personal webpages</u>.

In case you need prior approval for an urgent treatment, please call us instead of sending an email. You can reach us 24 hours a day, 7 days a week, 365 a year using the contact details on <u>your personal webpages</u>.

4. Fraud

Several fraud cases have been investigated and confirmed. As a consequence, Cigna will reach out to fraudsters to recover the unduly received reimbursements and undertake legal action where required.