



Cigna Global Health Benefits[®]

Medical Benefits Abroad[®] Quote Request

To obtain an MBA[®] quote, please complete and return the following information to your Cigna Global Health Benefits contact. With complete information Cigna Global Health Benefits can usually turn around a complete proposal in five business days.

Company Information

Company:		
Company Address:		
Website:		
Company Contact:		
Email:		Telephone:
Nature of Business:		

Does the company (requesting coverage) currently employ a minimum of 25 employees worldwide? Yes No

All employees do not need to be on the travel policy.

Producer Information

Company Name:	Website:
Producer Name:	Commission (Standard-10%):
Address:	Telephone:
	Fax:
Email:	

Plan Information

Desired Effective Date:	
Nationality of persons to be insured:	
Occupations of persons to be insured:	
Travel Destinations:	

Travel Data	U.S. Destinations	Non-U.S. Destinations
A) Total number of persons to be insured		
B) Total number of trips <i>per person</i>		
C) Average duration of each trip		
D) Total number of weeks (AxBxC=D)		



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Benefit Information

Desired Plan Type: <i>(For plan design details, see our brochure)</i>	Elite	Premier Plus	
	Premier	Standard	
If Non-Standard:			
Medical Maximum <i>(not to exceed \$1,000,000)</i>	\$		
Evacuation/Repatriation Maximum <i>(not to exceed \$250,000)</i>	\$		
AD&D Maximum <i>(not to exceed \$500,000)</i>	\$		
Emergency Dental	Unlimited to medical max \$1,000 CYM		
Non-U.S. Room & Board <i>(not to exceed \$1,500 daily maximum)</i>	\$		
Dependent Cover	Yes	No	
Personal Deviation Cover <i>(sojourn travel)</i>	Yes (7 days)	Yes (14 days)	No

Exposure Details

DBA coverage?	Yes	No	
Security or Mining Group?	Yes	No	
If applicable, will the travelers be located in the mines?	Yes	No	Not Applicable
If applicable, will the travelers be carrying weapons?	Yes	No	Not Applicable

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