GLOBAL GROUP INSURANCE PLAN FOR CONSULTANTS (GGIPC)

ACCIDENTAL DEATH AND DISABILITY (AD&D),
WORKERS’ COMPENSATION INSURANCE (WCI) AND
MEDICAL INSURANCE COVERAGE FOR CONSULTANTS AND RESOURCE PERSONS

Summary of benefits, coverage, and terms and conditions covering directly-hired individual consultants and resource persons effective 1 January 2021.

- payment of benefits in case of death or permanent disability resulting from an accident or work-related illness
- reimbursement of reasonable and customary medical expenses resulting from medical treatment necessitated through sickness, maternity and accident, subject to the provisions of the Policy, including medical evacuation and/or repatriation.

The Plan, with number 910.K94, is administered by Cigna.

Benefits

Benefits, and other terms and conditions are subject to change without prior notice every 1 January when the Plan is renewed. This summary is available at the ADB website’s Documents on Consulting Services, https://www.adb.org/documents/documents-consulting-services-technical-assistance

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<td><strong>Accidental Death &amp; Disability Insurance (AD&amp;D)</strong></td>
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- Death or permanent total or partial disability caused by an accident, whether or not work-related  
  - Death benefit of USD100,000  
  - Maximum disability benefit of USD100,000  
  - Worldwide cover |
| **Workers’ Compensation Insurance (WCI)** |  
- Death or permanent total or partial disability caused by work-related illness  
  - Death benefit of USD100,000  
  - Maximum disability benefit of USD100,000  
  - Worldwide cover |
| **Medical Insurance** |  
- Medical treatment resulting from sickness, maternity, or accident  
- Medical evacuation and/or repatriation  
  - 80% reimbursement of eligible medical expenses  
  - Maximum limit of USD50,000 in any 12 consecutive months’ period (including medical evacuation and/or repatriation up to USD35,000)  
  - Worldwide cover |

NOTES:
1. **The consultant pays for the medical expenses first and then files a claim for reimbursement.**
2. **Consultants are liable for any and all costs and expenses incurred over and above the maximum benefits set forth above, and if considered necessary given their particular circumstances, should arrange for additional personal coverage.**
3. **Consultants enrolled in GMIP or PRGMIP are excluded from GGIPC’s medical insurance coverage.**

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1 In-force only during the periods the consultant is working for ADB (to be determined by ADB in case of a claim).
2 In-force during the consultant’s entire period of engagement with ADB, even if the consultant is hired on an intermittent or part-time basis.
A. Definitions

1. Accident - the sudden action of external force causing bodily injury

2. Permanent disability - disability which is permanent or lasting for at least 12 months and incurable or beyond hope of improvement

3. Work related illness - any illness caused or aggravated by employment subject to proof that the risk of contracting the illness is increased by working conditions

4. Long-term consultants – with initial contract period of more than twelve consecutive months

5. Resource person – directly-hired individual engaged to act as facilitator, speaker, panelist, peer reviewer and technical expert for short assignments not exceeding 33 days.

6. Dependents – spouse, unmarried children below 24 years of age and handicapped children regardless of age

7. Proof of dependency – authenticated copy of marriage contract issued by a competent authority for spouse and authenticated copy of birth certificate issued by a competent authority for children

B. Terms and Conditions

1. All directly-hired individual consultants are covered for AD&D, WCI and medical insurance effective on the consultant's contract start date. ADB pays the premiums. No enrollment form is required.

2. Each consultant may, if he or she wishes, submit GGIPC Beneficiary Designation Form no. ADB 289 for AD&D and WCI to Procurement, Portfolio and Financial Management Department (PPFD). If no designated beneficiary survives the Insured or if no beneficiary has been named, the AD&D and WC benefits shall be paid to the Insured's relatives, in the following order of precedence: (i) spouse, (ii) children, (iii) parents, (iv) brothers and sisters, and if none surviving, the estate of the Insured.

3. Long-term consultants may enroll their dependents who reside with them in the duty station for medical insurance coverage only, with the premium payable by the consultant. If enrolling dependents, the GGIPC Enrolment Form No. ADB 288 must be completed for dependents within 61 days from contract start date for guaranteed insurability. Proof of dependency must be submitted. Enrollment beyond 61 days is subject to submission of Cigna Medical Examination Form for the insurer's approval.

4. The medical insurance coverage will be in-force during the consultant's entire period of engagement with ADB, even if the consultant is hired on an intermittent or part-time basis. The AD&D and WCI coverage will be in-force only during the periods the consultant is working for ADB. The consulting period will be determined by ADB in case of a claim.

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3 Available at ADB’s Forms Management database
C. Excluded Risks and Special Risks

The coverage does not extend to:

1. The consequence of sickness or accidents resulting from voluntary and intentional action of the insured person, e.g., attempted suicide and voluntary mutilation;

2. The results of wound or injuries from motor vehicle racing and dangerous competitions in respect of which betting is allowed (normal sports competitions are covered);

3. The consequences of insurrections or riots, if by taking part the insured person has broken the applicable laws; the consequence of brawls, except in case of self-defense;

4. The direct or indirect results of explosion, heat release or irradiation produced by transmutation of the atomic nucleus or by radioactivity or resulting from radiation produced by the artificial acceleration of nuclear particles; and

5. Expenses for or in connection with travel or transportation, whether by ambulance or otherwise. However, charges for professional ambulance service used to transport the insured person between the place where the insured is injured by an accident or stricken by a disease and the first hospital where treatment is given are covered. In case of emergency or major disability, a special transport of the insured person, including cost of an accompanying person or attendant will be allowed, up to a maximum of USD35,000. Preparation and repatriation of body to home country, up to a maximum of USD35,000 will be covered.

Note: The insurance is suspended in time of war for insured persons who are mobilized or who volunteer for naval, air or military service.

D. Medical Insurance

1. Reimbursements

   The insurers undertake to reimburse 80% of the expenses involved in respect of the medical treatment prescribed by doctors qualified to treat patients. Also reimbursed at the rate of 80% are the costs of hospital services such as:

   a) bed and board (maximum rate of hospital concerned for a private room for developing countries; and semi-private room for developed countries)
   b) general nursing service
   c) use of operating rooms and equipment
   d) use of recovery rooms and equipment
   e) laboratory examinations
   f) x-ray examinations
   g) drugs and medicine for use in the hospital
2. Special Types of Treatment Subject to Limitations

2.1 The cost of psychiatric treatment including psychiatric analysis is reimbursable only if a psychiatrist treats the patient. The costs of psychiatric treatment are reimbursable only at the rate of 50% and up to a maximum of USD500 for not more than 50 visits per insured person in any consecutive six-month period.

2.2 The costs of radiological treatment are reimbursable only if the insured person has been referred to the radiology specialist by the doctor in attendance.

3. Exclusions

The coverage does not extend to:

a. Medical expenses resulting from pre-existing conditions, i.e., medical conditions for which the insured person was already treated or which have been diagnosed prior to the start of the coverage;

b. Preventive care such as, but not limited to, inoculations, periodic health examination and health screening.

c. Dental treatments such as dental care, treatment of the gums, periodontics, false teeth, orthodontic care, treatment of Temporo-Mandibular Joint Disease, unless resulting from an accident to sound, natural teeth;

d. Rejuvenation cures, spa cures or cosmetic treatment (cosmetic surgery is covered if it is necessary as a result of an accident for which coverage is given); and

e. Costs of hearing aids and eyeglasses and fees for examination of the eyes for eyeglasses.

E. Claims and Reimbursement

1. Medical Insurance

1.1 Claim online on Cigna website www.cignahealthbenefits.com or the Cigna Health Benefits App™ and attach photo or scanned supporting documents (i.e. official receipt, medical report, doctor’s order, etc.).

1.2 Claim for reimbursements should be submitted to Cigna within two years from the date the expenses are incurred.

1.3 Payments are made by check or bank transfer in US dollars.

2. Accidental Death and Disability Insurance

2.1 BPRS should be notified within 30 days after the date of an accident that may lead to a possible claim. The following documents should be submitted to BPRS as soon as they are available:

a) For Accidental Death:

i) Death certificate stating the cause of death;
ii) A satisfactory medical certificate stating the cause of death and whether or not resulting from an accident, work related or not; and
iii) Police report or incident report stating the place and circumstances of the accident and the names and addresses of any witnesses or legal authorities involved.

b) For Accidental Disability:
   i) A satisfactory medical certificate stating the cause of disability and stating the exact nature of disability; and
   ii) Police report or incident report stating the place and circumstances of the accident and the names and addresses of any witnesses or legal authorities involved.

2.2 Payments are made by check or bank transfer in US dollars.

3. Workers Compensation Insurance

3.1 BPRS should be notified within 30 days after the date of the confirmed diagnosis of illness that may lead to a possible claim. The following documents should be submitted to BPRS as soon as they are available:

   a) Death certificate stating the cause of death or notice of permanent disability with the information on the circumstances of the disability
   b) Medical certificate showing the causal connection between the death or disability, and the performance of the job with Asian Development Bank.

3.2 Payments are made by check or bank transfer in US dollars.

F. Contact Details

Should you need to confirm eligibility of a medical procedure or follow-up your claim under the GGIPC, you may e-mail Cigna at adb.cons@cigna.com.