

Home Office: Bloomfield, Connecticut

Mailing Address: Hartford, Connecticut 06152

# CIGNA HEALTH AND LIFE INSURANCE COMPANY

a Cigna company (hereinafter called Cigna)

# **CERTIFICATE RIDER**

No. CR7BIASO38B-1

Policyholder: The Mosaic Company

Rider Eligibility: Each Employee as reported to the insurance company by your Employer

Policy No. or Nos. 3333319-OAPCO/OAPCE/OAPCH

EFFECTIVE DATE: October 1, 2022

You will become insured on the date you become eligible if you are in Active Service on that date or if you are not in Active Service on that date due to your health status. If you are not insured for the benefits described in your certificate on that date, the effective date of this certificate rider will be the date you become insured.

This certificate rider forms a part of the certificate issued to you by Cigna describing the benefits provided under the policy(ies) specified above.

Jill Stadelman, Corporate Secretary

HC-RDR1 04-10

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The following is being added to THE SCHEDULE — **Open Access Plus Medical Benefits**— in your certificate under the section entitled **Travel Services**.

The following is being added to the **Covered Expenses** section in your certificate under the section entitled **Travel Services**.

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The following definition is being added to your certificate: Companion/Caregiver.



# **Open Access Plus Medical Benefits The Schedule**

# BENEFIT HIGHLIGHTS IN-NETWORK OUT-OF-NETWORK

# **Travel Services**

Travel and lodging expenses for designated covered services authorized for coverage when an in-network provider is not available within a 60 mile radius of your primary home residence.

The following designated services are covered by your plan and may be eligible for this travel benefit:

• all Medical and Mental Health and Substance Use Disorder services.

Travel and Lodging Eligible Expenses for Designated Services	No charge	Not covered
Lifetime Maximum	Medical services: \$10,000	
Combined maximum for travel and lodging for all designated services, except LifeSource/Organ Transplants; Gene Therapy; and other services as noted in The Schedule which have their own separate dollar maximum.	Mental Health and Substance Use Disorder services: Unlimited	

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# **Open Access Plus Medical Benefits**

# **Covered Expenses**

#### **Travel Services**

Charges for non-taxable travel and lodging expenses incurred by you and one accompanying Companion/Caregiver (or up to two caregivers for a dependent minor) are covered in connection with designated Medical and Mental Health and Substance Use Disorder services.

Travel services for a designated covered service may be authorized for coverage when an in-network provider is not available within a 60 mile radius of your primary home residence. Travel and lodging expenses are covered for designated services administered at a participating in-network facility/provider, subject to the maximum shown in The Schedule.

Travel is available for the following designated services when covered by your plan:

 all Medical Mental Health and Substance Use Disorder services.

Pre-authorization of travel is required by contacting Cigna at the number on the back of your ID card. Pre-authorization of the covered designated service also may be required.

The Companion/Caregiver can be your spouse, a member of your family, your legal guardian, or any person not related to you, but actively involved as your caregiver who is at least 18 years of age.

Covered travel expenses are reimbursed within daily limits as defined by the Internal Revenue Service and include charges for:

- airfare (coach or economy), including baggage fees.
- bus fare, train fare, Taxi/Uber/Lyft etc.
- · vehicle rentals.
- · gasoline.
- highway tolls (not prepaid).
- parking.
- shuttle services.
- wheelchair van service to travel from local housing to facility.
- lodging up to \$50 per night, per person for up to two people (maximum of \$100 per night, inclusive of taxes and nonrefundable fees); including but not limited to hotel, motel, rental from businesses such as Airbnb, VRBO, etc.

Excluded travel expenses include but are not limited to the following:

• any expenses that if reimbursed would be taxable income.

- travel within the mile radius defined above of your primary home residence.
- food and meals.
- · mileage.
- incidentals including but not limited to laundry bills; telephone bills; alcohol or tobacco products.
- charges for transportation that exceed coach class rates.
- durable medical equipment, medical supplies, ambulance.
- refundable deposits for housing, utilities, etc.
- travel for services not designated above or services that are not covered by the plan.

## **Definitions**

### Companion/Caregiver

A Companion/Caregiver is defined as someone who may be your spouse, a member of your family, your legal guardian, or any person not related to you, but actively involved as your caregiver, who is at least 18 years of age.

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