



CERTIFICATE OF INSURANCE
Policy Number 00407D

Intuit, Inc.

(Hereinafter called the Policyholder)

Underwritten by: Cigna Health and Life Insurance Company
Wilmington, Delaware

Cigna Health and Life Insurance Company hereby certifies that it has issued and delivered to the Policyholder the above specified group policy.

The insurance benefits and the provisions of the group policy principally affecting the persons insured are described below. The policy covers expenses worldwide. The final interpretation of any specific provision herein is governed by the terms of the policy. This is your certificate of insurance if you are eligible for the insurance, become insured and remain insured in accordance with the terms, provisions and conditions of the policy.

Employee Eligibility: All full-time active employees who are traveling on the business of, or at the expense of, the Policyholder outside their country of residence or permanent assignment for no more than 180 consecutive days per one trip.

Dependent Eligibility: Not Covered

CGHB USE ONLY
Insured's Name: Birthdate:
Travel Dates From: To:

The effective date of this Schedule of Benefits is August 1, 2018 Issue Date: July 10, 2018

Table with 2 columns: Benefit, Benefit Amount. Rows include Accidental Death & Dismemberment, Medical Evacuation/Repatriation, Calendar Year Medical Benefit Maximum, Calendar Year Deductible, Coinsurance (paid by Cigna), Out of Pocket Coinsurance Maximum, Prescription Drug, Emergency Dental, Personal Deviation/Sojourn Travel, Room & Board Outside US, Room & Board Inside US, Pre-Existing Conditions, War Risk (Medical), War Risk (AD&D).

\* covered expenses when medically necessary while on an approved international business trip. This benefit also includes replacement medicine for lost prescriptions that are medically necessary during an international business trip.

\*\*Pre-Admission Certification / Continued Stay Review is Required for all U.S. Hospitalizations

Please refer to the welcome kits or the MBA website at http://www.cignaenvoy.com/ciebpublic/ for details around submitting a claim. Phone: 302.797.3535 (outside the USA) 800.243.1348 (inside the USA)

Cigna Global Health Benefits Mailing address: P.O.Box 15111, Wilmington, DE 19850, USA

FRAUD NOTICE: Any person who, knowingly and with intent to defraud any insurance company or other person: (1) files an application for insurance or statement of claim containing any materially false information; or (2) conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act.

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