

Long-Term Global Worker

DENTAL AND VISION COVERAGE

Effective January 1, 2026

Cigna Healthcare® Dental Plan

GLOBAL DENTAL PLANS

International Dental



- Choose any dental provider
- Submit claims via CignaEnvoy.com

GLOBAL DENTAL PLANS

Choosing a Stateside Dental Provider

- In-network providers:
 - Offer deepest discounts
 - File claims on behalf of members
 - Bill only for covered member costs
- Out-of-network providers:
 - Do not offer discounts — charged the maximum reimbursable charge (MRC)
 - Do not file claims on behalf of participants
 - May charge more than the plan's allowed amount

CIGNA GLOBAL HEALTH BENEFITS

Dental Plan Comparison

Dental Plan Benefits	Global Dental Plus	Global Dental Basic
Providers	You may use any provider or save with network providers.	You may use any provider or save with network providers.
Deductible (per person, per year)	\$50	\$50
Annual maximum benefit (per person, per year)	\$1,500	\$1,000
Preventive services (Class I)	0% no deductible	0% no deductible
Basic services (Class II)	20% after deductible	20% after deductible
Major services (Class III)	50% after deductible	50% after deductible
Orthodontia (Class IV)	50% no deductible*	Not covered
Waiting Periods	N/A	N/A

*Applies only to a dependent child younger than 19. The lifetime maximum benefit is \$1,500.

CIGNA HEALTHCARE INTERNATIONAL

ID Cards

- Typically, you receive **one ID card** for both your medical and dental plan. If you are in a *CignaLinks* country, you will receive two.
- If you need to access services after the effective date of your coverage but before you receive your ID cards, refer to the “Important Reminders” page of your benefit guide.

Vision Plan

VISION PLAN*

In-Network

- You can look up Vision Service Plan® (VSP®) Choice network providers online at [VSP.com](https://www.vsp.com).
- VSP Plans have no ID cards. Your in-network providers have direct access to your VSP enrollment information.
- There are no claims to submit. Pay your share at the appointment, and VSP will submit a claim for their portion. Costs could include:
 - \$10 co-pay for annual vision exam.
 - \$25 co-pay for lenses.
 - Frames covered up to \$130.
 - Featured frames covered up to \$150.

* These VSP vision insurance products are provided by Vision Service Plan Insurance Company but not part of GuideStone Financial Resources' benefits program. However, GuideStone serves as the administrator.

VISION PLAN

Out-of-Network

- VSP will reimburse services up to a fixed amount.
- You will need to pay the provider for the full cost and then submit a claim to VSP for reimbursement.

INTERNATIONAL COVERAGE

- This information only highlights the depth of coverage and benefits you can receive when you protect yourself with GSFR. Limitations and exclusions apply. This material is a general summary of the plans. The official plan documents and contracts set forth the eligibility rules, limitations, exclusions and benefits. These alone govern and control the actual operation of the plan. In the event of a conflict with the description in this material, the terms of the official plan documents and contracts will control its operation.
- GSFR reserves the right to change or cancel these programs at any time. This material does not imply an employment contract or guarantee of benefits. Medical underwriting could be required.