

State of Tennessee

A photograph of a woman and a young girl lying in bed, laughing joyfully. The woman is in the background, and the girl is in the foreground, both wearing pajamas. The scene is intimate and happy.

YOUR CIGNA DENTAL PLAN INFORMATION

CIGNA DENTAL CARE PREPAID PLAN

Plan Year : 2021

Offered by: Cigna Health and Life Insurance Company, Connecticut General Life Insurance Company, or their affiliates.

Together, all the way.®

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A health plan that gives you savings and predictability.

Cigna Dental Care[®] (DHMO)* Prepaid Plan

- No deductible or calendar year maximums, and predictable costs based on your Patient Charge Schedule
- You pay the charge for each service listed on your Patient Charge Schedule, which provides maximum cost transparency
- You choose a primary care dentist in the Cigna Dental Care[®] network where you can receive all your care
- You can change your network dentist at any time
- You can use a pediatric dentist up to age 13
- By using dentists in the Cigna Dental Care[®] network you may pay less than you would with other types of dental plans
- There is no out-of-network coverage (except in emergencies)**

* The term "DHMO" is used to refer to product designs that may differ by state of residence of enrollee, including, but not limited to, prepaid plans, managed care plans, and plans with open access features. The Cigna Dental Care[®] (DHMO) product availability varies by state and is subject to change.

** There are no out-of-network benefits with a Cigna Dental Care[®] plan except in the case of emergencies. For residents of MN and OK coverage is available out-of-network. See **Appendix A** for details.



What's new for 2021

- **Implant Coverage Benefit**

- Includes surgical placement of implant body and an additional 70 CDT codes related to implant services
- If members are missing teeth, their dentist may suggest a dental implant instead of a fixed bridge or dentures. An implant is surgically placed in the jawbone for a long-term solution
- Implants are typically an expensive service, however, the Prepaid Dental Plan's fixed member copayment allows for predictable, affordable coverage
- There is not an annual maximum on the Prepaid Dental Plan, which means that members are able to receive implant services, without having to worry about running out of coverage for the rest of the year
- Implants are limited to one implant per calendar year with a replacement of 1 every 10 years

What's new for 2021

- **Teledentistry Services Covered at No Cost**

- If members need dental care and are unable to reach their regular provider, they now have the option to consult with a dentist through a video call
- Teledentistry connects members with a licensed dentist who can help address urgent dental situations like toothaches, infection, swelling, bleeding, and more
- The nature of this type of care delivery precludes dentists from performing more involved procedures, but if the dentist determines such care is needed, they can help guide next steps

Cigna Dental Care[®] Prepaid Plan

Coverage with no deductibles or waiting periods*

Examples of covered services*



- ✓ Preventive care, such as cleanings and exams, at no added or low cost
- ✓ Fluoride and fluoride varnish available for a copay
- ✓ Temporomandibular joint (TMJ) diagnosis
- ✓ General anesthesia/IV sedation when medically necessary
- ✓ Coverage for brush biopsy, a noninvasive diagnostic procedure for detecting oral cancer
- ✓ No age limit on sealants
- ✓ Coverage for advanced procedures like crowns and bridges
- ✓ Second opinions covered
- ✓ Emergency care
- ✓ Orthodontic coverage for children AND adults
- ✓ Surgical placement of implants, limited to one implant per calendar year with a replacement of 1 every 10 years

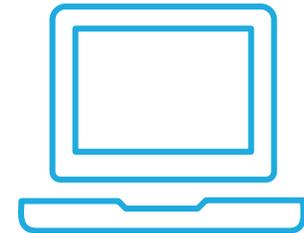
* Plan copay and coinsurance requirements apply. Not all services are covered. See Appendix B for a listing of related plan limitations and exclusions.



Find info online

After you enroll, register at myCigna.com

- Review your personal plan information
- Find network dentists
- Print temporary ID cards
- Download Cigna Dental Oral Health Integration Program[®] reimbursement forms
- View year-to-date dental costs
- Change your DHMO dental office*
- Estimate costs prior to actual treatment, based on the Patient Charge Schedule
- Take oral health assessments that you can print and share with your dentist
- Read dental health articles and view videos from WebMD[®]
- Healthy Rewards^{®**} discount information



* Changes made by the 15th day of the month are effective the first day of the following month.

** Healthy Rewards is a discount program and is separate from your dental benefits. If your plan includes coverage for any of the services offered through Healthy Rewards, this program is in addition to, not instead of, your plan benefits. Some Healthy Rewards programs are not available in all states and may be discontinued at any time. **A discount program is NOT insurance, and you must pay the entire discounted charge.**

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We're here 24/7/365



TOOLS &
RESOURCES



By phone – 1.800.997.1617

- Call anytime day or night for live customer service

Cigna has set up a State of TN url.

Go to www.cigna.com/sites/stateoftn/

Once enrolled you can also visit
myCigna – online or through the mobile app

- Directory of dentist
- Useful tools to help you:
 - Check your coverage
 - Manage and track claims
 - Find quality of care information for common procedures and treatments

**Download the
myCigna Mobile
App** for easy
access on the go!**

*Available for Cigna Choice Fund® Health Reimbursement Account (HRA) and Flexible Spending Account (FSA) plans only.

**The downloading and use of the myCigna Mobile App is subject to the terms and conditions of the App and the online stores from which it is downloaded. Standard mobile phone carrier and data usage charges apply.



Save money with and better manage medical conditions with better oral care

Cigna Dental Oral Health Integration Program[®]

- 90% of all systemic diseases have oral symptoms.*
- If you're living with a certain chronic condition or if you are pregnant, the Cigna Dental Oral Health Integration Program^{®**} provides reimbursement for certain dental services to help reduce the impact dental conditions can have on your condition.
- If you have Cigna medical and dental coverage, have a diagnosis for a certain chronic health condition and have not seen a dentist in over seven months, we'll reach out and remind you to make an appointment.***
- We also work together with dental providers to help protect you and your family from medication misuse, addiction and overdose.

* Colgate Professional, "Oral Health and Overall Health: Why A Healthy Mouth Is Good For Your Body," <https://www.colgateprofessional.com/education/patient-education/topics/systemic/why-a-healthy-mouth-is-good-for-your-body>. Accessed July 2020.

** You must enroll in the program prior to receiving dental services to be eligible for reimbursement. Reimbursement is applied to and subject to any applicable calendar year maximum. See your plan documents for program details.

*** Program only available for pre-approved clients. Product availability may vary by location and plan type and is subject to change.



Cigna Dental Oral Health Integration Program[®]

More programs

Available to ALL Cigna Dental customers with qualifying condition(s) who enroll in the program

More wellness

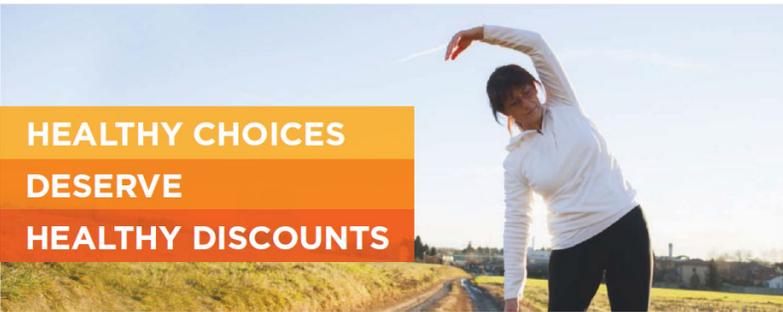
Articles on behavioral issues linked to oral health

Dental services	Heart disease	Stroke	Diabetes	Maternity	Chronic kidney disease	Organ transplants	Head and neck cancer radiation
Periodontal treatment and maintenance (D4341, D4342, D4910 ¹)	◆	◆	◆	◆	◆	◆	◆
Periodontal evaluation (D0180)				◆			
Oral evaluation (D0120 ² , D0140 ² , D0150 ²)				◆			
Cleaning (D1110 ³)				◆			
Scaling in the presence of inflammation – Full Mouth (D4346 ³)				◆			
Emergency palliative treatment (D9110 ⁴)				◆			
Topical application of fluoride and topical application of fluoride varnish (D1206 ⁵)					◆	◆	◆
Topical application of fluoride – excluding varnish (D1208 ⁵)					◆	◆	◆
Sealants (D1351 ⁵)					◆	◆	◆
Sealant repair – per tooth (D1353 ⁵)					◆	◆	◆

1. Four times per year. 2. One additional evaluation. 3. One additional cleaning. 4. No limitations. 5. Age limits removed, all other limitations apply.



Healthy Rewards – Discount Program



**HEALTHY CHOICES
DESERVE
HEALTHY DISCOUNTS**

Start saving today with Cigna Healthy Rewards**
Just use your medical insurance ID card when you pay and let the savings begin.
Get discounts on the health products and programs you use every day for:

- › Weight management and nutrition
- › Fitness
- › Mind/body
- › Vision and hearing care
- › Alternative medicine
- › Healthy lifestyle

Real brands. Real discounts. Real awesomeness.

Healthy Rewards is a discount program. Some Healthy Rewards programs are not available in all states and programs may be discontinued at any time. If your health plan includes coverage for any of these services, this program is in addition to, not instead of, your plan benefits. Healthy Rewards programs are separate from your plan benefits. **A discount program is NOT insurance, and you must pay the entire discounted charge. All goods, services and discounts offered through Healthy Rewards are provided by third parties who are solely responsible for their products, services and discounts.



To start saving today, visit myCigna.com or call 800.870.3470.



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Provides discounts when you use Healthy Rewards providers

- Fitness
- Gym Membership – Active & Fit
- Weight Management & Nutrition
- Tobacco Cessation
- Mind/Body
- Vision & Hearing
- Vitamins, Health & Wellness Products
- Alternative Medicine
- Dental Discounts
- Healthy Lifestyle



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Q&A

What you want to know



Dentists who participate in Cigna's network are independent contractors solely responsible for the treatment provided and are not agents of Cigna. The information in this presentation summarizes the highlights of your plan. For a complete list of both covered and not covered services, including benefits required by your state, see your employer's plan booklet, evidence of coverage, insurance certificate, or summary plan description – the official plan documents. If there are any differences between the information in this presentation and the plan documents, the information in the plan documents takes precedence.

Product availability may vary by location and plan type and is subject to change. All group dental insurance policies and dental benefit plans contain exclusions and limitations. For costs and details of coverage, review your plan documents or contact a Cigna representative.

All Cigna products and services are provided exclusively by or through operating subsidiaries of Cigna Corporation, including Cigna Health and Life Insurance Company (CHLIC), Cigna Behavioral Health, Inc., Express Scripts, Inc., and HMO or service company subsidiaries of Cigna Health Corporation, including Cigna HealthCare of Arizona, Inc., Cigna HealthCare of California, Inc., Cigna HealthCare of Colorado, Inc., Cigna HealthCare of Connecticut, Inc., Cigna HealthCare of Florida, Inc., Cigna HealthCare of Georgia, Inc., Cigna HealthCare of Illinois, Inc., Cigna HealthCare of Indiana, Inc., Cigna HealthCare of St. Louis, Inc., Cigna HealthCare of North Carolina, Inc., Cigna HealthCare of New Jersey, Inc., Cigna HealthCare of South Carolina, Inc., Cigna HealthCare of Tennessee, Inc. (CHC-TN), and Cigna HealthCare of Texas, Inc. Policy forms: OK - HP-APP-1 et al., OR - HP-POL38 02-13, TN - HP-POL43/HC-CER1V1 et al. (CHLIC); GSA-COVER, et al. (CHC-TN). Cigna Dental Care® (DHMO) plans are insured by Cigna Dental Health Plan of Arizona, Inc., Cigna Dental Health of California, Inc., Cigna Dental Health of Colorado, Inc., Cigna Dental Health of Delaware, Inc., Cigna Dental Health of Florida, Inc., **a Prepaid Limited Health Services Organization licensed under Chapter 636, Florida Statutes**, Cigna Dental Health of Kansas, Inc. (KS & NE), Cigna Dental Health of Kentucky, Inc. (KY & IL), Cigna Dental Health of Maryland, Inc., Cigna Dental Health of Missouri, Inc., Cigna Dental Health of New Jersey, Inc., Cigna Dental Health of North Carolina, Inc., Cigna Dental Health of Ohio, Inc., Cigna Dental Health of Pennsylvania, Inc., Cigna Dental Health of Texas, Inc., and Cigna Dental Health of Virginia, Inc. CHLIC policy forms: OK – HP-POL99/HP-POL-388, POL115; OR – HP-POL68/HP-POL352, HP-POL121 04-10; TN – HP-POL69/HC-CER2V1/HP-POL389, et al., HP-POL134/HC-CER17V1 et al. In other states, Cigna Dental Care® plans are insured by Cigna Health and Life Insurance Company (CHLIC), or Cigna HealthCare of Connecticut, Inc., and administered by Cigna Dental Health, Inc. Dental PPO plans are insured or administered by CHLIC or Connecticut General Life Insurance Company, with network management services provided by Cigna Dental Health, Inc. and certain of its subsidiaries. In Texas, the insured dental plan is known as Cigna Dental Choice, and this plan uses the national Cigna DPPO network. Policy forms: OK – Dental Indemnity/PPO: HP-POL99 (CHLIC); DHMO: HP-POL115 (CHLIC); OR – Indemnity/DPPO/DEPO: HP-POL68, DHMO: HP-POL121 04-10; TN – Dental Indemnity/PPO: HP-POL69/HC-CER2V1 et al. DHMO: HP-POL134/HC-CER17V1 et al. (CHLIC). The Cigna name, logo, and other Cigna marks are owned by Cigna Intellectual Property, Inc. All pictures are used for illustrative purposes only.

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Appendix A

Cigna Dental Care® for residents of Minnesota and Oklahoma

Minnesota Residents: When enrolling in a Cigna Dental Care® plan, you must visit your selected network dentist in order for the charges on the Patient Charge Schedule to apply. You may also visit other dentists that participate in our network or you may visit dentists outside the Cigna Dental Care® network. If you do, the fees listed on the Patient Charge Schedule will not apply. You will be responsible for the dentist's usual fee. We will pay 50% of the value of your network benefit for those services. You'll pay less if you visit your selected Cigna Dental Care® network dentist. Call customer service for more information.

Oklahoma Residents: Cigna Dental Care® for Oklahoma is an Employer Group Prepaid Dental Plan. You may also visit dentists outside the Cigna Dental Care® network. If you do, the fees listed on the Patient Charge Schedule will not apply. You will be responsible for the dentist's usual fee. We pay non-network dentists the same amount we'd pay network dentists for covered services. You'll pay less if you visit a network dentist in the Cigna Dental Care® network. Call customer service for more information.

