

FIND THE PLAN THAT'S RIGHT FOR YOU.



We can help with this plan guide

Selecting between the **Cigna Dental Care® (DHMO*)** and the **Dental PPO (DPPO)** plans is an important decision. Take the quick quiz below to help you see which dental plan features are most important to you and your family. Then, read the information on the second page when you're done.

CHECK EITHER "YES" OR "NO" FOR EACH STATEMENT BELOW.	YES	NO
I am willing to receive all my dental care from a network general dentist or dental specialist in my plan's network, even if it means choosing from a smaller network.	<input type="checkbox"/>	<input type="checkbox"/>
I prefer a plan that tells me the exact dollar amount I will pay for each procedure, so I don't have to calculate percentages.	<input type="checkbox"/>	<input type="checkbox"/>
I prefer a dental plan that has no dollar maximums , so I don't have to worry about my benefits running out if I reach a certain amount.	<input type="checkbox"/>	<input type="checkbox"/>
I prefer a dental plan with no deductibles , so I don't have to wait to reach a certain level of out-of-pocket expenses before my benefits begin.	<input type="checkbox"/>	<input type="checkbox"/>
I prefer a dental plan that has no waiting period , so my benefits start right away.	<input type="checkbox"/>	<input type="checkbox"/>
Add up the number of answers you checked in each column:	_____	_____

I answered "yes" the most. The Cigna Dental Care** plan may be right for me because:

- I'm willing to choose a Cigna Dental Care network general dentist to manage all of my dental health care needs and who will refer me to any network specialists. (Referrals are not required for pediatric dentists for children under 7 and orthodontics.***)
- I like knowing the exact dollar amount I'll have to pay without doing calculations.
- There are no dollar maximums.
- There are no deductibles.
- My benefits start right away with no waiting periods.

Visit **Cigna.com** to see if your dentist is in the Cigna Dental Care Network.

I answered "no" the most. The DPPO plan may be right for me because:

- I have the freedom to visit any licensed dentist or specialist. And I don't need a referral to visit any specialist.
- I don't mind calculating my out-of-pocket costs based on percentages.
- I don't mind having dollar maximums.
- I don't mind having a deductible.
- My dental plan will cover eligible dental expenses after I meet any deductible and satisfy any waiting periods.

See the other side for more details.

Together, all the way.®



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



Have questions about your dental plan options through Cigna?

Review your enrollment information in detail. If you still have questions, call us 24/7/365 at 800.Cigna24 (800.244.6224), or visit Cigna.com.



* 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.

** **Minnesota residents:** If you enroll in the Cigna Dental Care (DHMO) 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: DHMO 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.

*** Coverage for treatment by a pediatric dentist ends on your child's 7th birthday. Effective on your child's 7th birthday, dental services generally must be obtained from a network general dentist.

All group dental plans and insurance policies have exclusions and limitations. For costs and details about the services covered under your plan, review your enrollment materials. Dentists who participate in Cigna's network are independent contractors solely responsible for the treatment provided and are not agents of Cigna.

All Cigna products and services are provided exclusively by or through operating subsidiaries of Cigna Corporation. Dental PPO plans are insured or administered by Cigna Health and Life Insurance Company (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. 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. In other states, Cigna Dental Care plans are insured by CHLIC or Cigna HealthCare of Connecticut, Inc., and administered by Cigna Dental Health, Inc. CHLIC policy forms: OK – DPPO: HP-POL99, DHMO: POL115; OR – DPPO: HP-POL68, DHMO: HP-POL121 04-10; TN – DPPO: HP-POL69/HC-CER2V1 et al., DHMO: HP-POL134/HC-CER17V1 et al. The Cigna name, logo, and other Cigna marks are owned by Cigna Intellectual Property, Inc.