

ORTHODONTICS IN PROGRESS

Read on to find out more...



The example below shows how your Cigna Dental Plan coverage will be applied to any orthodontic treatment started with Cigna during the 2012-2013 plan year and continuing into the 2013-2014 plan year under your Cigna DHMO or DPPO.

Please note the example below is for illustrative purposes only. See your Evidence of Coverage or contact Cigna customer service at (800) 238-5834 to obtain coverage information specific to your orthodontia benefits.

	DHMO Plan		DPPO Plan
Orthodontics in Progress Example	In-Network (Dental Care Network)	In-Network (Radius Network)	Out-of-Network (Note: If out-of-network dentist participating in DNSP is elected, amounts shown may be lower)
Orthodontia Treatment began	07/28/12	07/28/12	07/28/12
Total Case Fee for 24 months of treatment	\$3,500	\$3,500	\$3,500
Cigna Dental Plan Benefits Effective Date	07/28/13	07/28/13	07/28/13
Remaining Months of Active Treatment (Ortho. in Progress)	12	12	12
Cigna Contribution for Ortho. in Progress per month	\$69.50	\$60	\$60
Cigna Total Contribution	(12 x \$69.50) \$834	(12 x \$60) \$720	(12 x \$60) \$720
Member remaining contribution	Total case fee less any fees paid for services by the customer and Cigna Dental	Total case fee less any fees paid for services by the customer and Cigna Dental	Total case fee less any fees paid for services by the customer and Cigna Dental



See the next page for Orthodontics in Progress FAQ's



Q: What if my current orthodontist is not in the Cigna Network?

A: The DHMO is an in-network only plan, so if you are a DHMO enrollee, your current orthodontist would need to be in the Cigna Network. Under the DPPO plan, your out-of-pocket cost may vary depending on whether or not your orthodontist is an in-network or out-of-network provider. You can save money by visiting an in-network orthodontist as they offer discounted rates to Cigna members. Orthodontists who are out-of-network do not offer discounts to Cigna customers.

Q: My child is currently in their first year of orthodontia treatment under the DHMO plan. How will their treatment be affected if I change to DPPO plan coverage? How about if I change from the DPPO to the DHMO?

A: If you switch to the DPPO, any remaining lifetime maximum benefit available, will be paid out on automatically on a quarterly basis, either until the number of months in treatment cease, or until the lifetime maximum is satisfied, whichever comes first.

If you switch to the DHMO plan, the remaining orthodontia services will be covered at a pro-rated monthly allowance until the number of months in treatment cease, up to 24 months of treatment, whichever comes first. Please refer to the chart on the previous page for more details.

Q: My child is currently receiving orthodontia care and I have paid my fees in full. Will I have to pay additional fees if I'm enrolling in a Cigna dental plan for the first time?

A: No, if a participant has paid their services in full, the customer should not incur any additional costs after enrolling in a Cigna dental plan. To obtain specific information regarding your or your dependent's orthodontia benefits, please contact Cigna Customer Service at (800) 238-5834.

The Cigna Dental PPO is underwritten or administered by Connecticut General Life Insurance Company (CGLIC) or Cigna Health and Life Insurance Company (CHLIC) with network management services provided by Cigna Dental Health, Inc., and certain of its operating subsidiaries.

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 plan is provided by Cigna Dental Health of California, Inc.

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