

FINDING THE RIGHT DENTAL COVERAGE

Get the features and insurance benefits you want at a price that fits your budget.

When it comes to dental care, people have different needs. So, it's important to select a dental insurance policy that is right for you. That's why Cigna offers three different dental plans. Each plan has different benefit options and they all provide valued coverage and services to keep you in good oral health. Take a look at what Cigna dental plans have to offer.

A dental plan with more choice and access

- › When visiting a Cigna DPPO Advantage Network provider, annual cleanings, oral exams and routine x-rays are covered 100%¹
- › More than 92,000² providers in our Cigna DPPO Advantage Network with the option to see an out-of-network provider
- › Access to over 193,000² office locations nationwide
- › Individual, family and child-only coverage options³
- › Coverage available for basic and major restorative care, including fillings, routine x-rays, bridges, root canals and more⁴
- › Available to all ages, from children to grandparents

Extra services to keep you smiling

Our dental plans do more than just help with your oral care expenses. They include valuable tools and services making it easier for you to maintain good oral health.

- › No primary dentist or referrals required for specialist care
- › Website and mobile app gives you access to personal health and claims information anytime
- › No claim submissions – Cigna DPPO Advantage Network providers submit claims automatically

The chart below outlines a few examples of how you can save with a Cigna Dental 1500 Plan. It compares using a **Cigna DPPO Advantage Network** provider, compared to using an out-of-network provider and not having dental insurance.

	CLASS CATEGORY	CIGNA DPPO ADVANTAGE NETWORK*	OUT-OF-NETWORK PROVIDERS*	WITHOUT DENTAL INSURANCE
Cleaning (Adult Prophy) - D1110	Class I	\$0*	\$44*	\$88
Filling (2 surfaces) - D2392	Class II	\$26*	\$150*	\$210
Crown (Porcelain & High Noble Metal) - D2750	Class III	\$352*	\$827*	\$1,084
Orthodontics (Braces) - D8080	Class IV	\$2,093*	\$4,891*	\$6,302

If you have a Cigna Preventive or Cigna Dental 1000 plan, services may not be covered and discounts may vary. Chart is estimated, benefits may vary by provider and location.

*Estimate based on the national average of a Cigna Dental 1500 plan; subject to deductible and coinsurance (as applicable), and contracted rate (for Cigna DPPO Advantage Network providers); results in specific states may vary. If you visit an out-of-network provider, you are responsible for the difference in the amount that Cigna reimburses (i.e., MAC) for such services and the amount charged by the dentist.

Together, all the way.®



Which plan is right for you?

Cigna Dental Preventive – when you want basic coverage.

You want coverage for yearly checkups because you know that healthy teeth can lead to better overall health. With this plan, your monthly premium ensures that Cigna pays 100%¹ of your preventive care dental visits when visiting a Cigna DPPO Advantage provider.

- › 100% coverage for up to two cleanings a year and routine x-rays⁵
- › \$0 deductible
- › Discounts for Class 2, 3 and 4 restorative services (in many states), so your costs are lower if you need more extensive dental work

Cigna Dental 1000 – when you want more than basic coverage.

Your dental care is important and you need more than just basic coverage. With this plan, when visiting a Cigna DPPO Advantage provider eligible restorative services are covered up to \$1,000.

- › 100% coverage for up to two cleanings a year and routine x-rays⁵
- › Annual deductible is waived for preventive and diagnostic services, which helps to lower your expenses
- › Cigna covers up to \$1,000 for eligible restorative services such as crowns, bridges, fillings, root canals and dentures⁴

Cigna Dental 1500 – when you want comprehensive dental care, this plan provides extensive dental care with eligible restorative services covered up to \$1,500 when visiting a Cigna DPPO Advantage provider.

- › 100% coverage for up to two cleanings a year and routine x-rays⁵
- › Annual deductible is waived for preventive and diagnostic services, which helps to lower your expenses
- › Cigna covers up to \$1,500 for eligible restorative services such as crowns, bridges, fillings, root canals and dentures⁴
- › Orthodontia is covered with a separate lifetime maximum benefit of \$1,000 and a separate \$50 lifetime deductible

Cigna's Dental Oral Health Integration Program[®]

Routine dental care is vital to your total good health and well-being. It's also true for pregnant women and people living with a long-term health issue. Research shows that when these people get the right dental care, they can avoid costly and unsafe health problems. That's why we provide 100% payment for certain procedures when visiting a Cigna DPPO Advantage provider. These procedures promote better oral health for customers with certain long-term health issues.⁶

1. Some preventive expenses may not be covered, like athletic mouth guards. Refer to the Summary of Benefits or your Policy for a more complete listing of eligible covered and non-covered services.
2. Data as of June 2015.
3. Child-only coverage does not apply to New Mexico residents.
4. Some services may have limitations or not be covered, like crowns, dentures and bridges. Refer to the Summary of Benefits or your Policy for a more complete listing of eligible covered and non-covered services.
5. For eligible services when you see an in-network provider. Frequency limitations apply. Number of cleanings varies by state. MD only allows one cleaning per calendar year.
6. Subject to health status verification.

Dental plans are insured by Cigna Health and Life Insurance Company with network management services provided by Cigna Dental Health, Inc. Rates may vary based on age, family size, geographic location (residential zip code) and plan design. Rates are subject to change upon prior notice in accordance with state law. Some dental plans apply waiting periods to covered basic (six months), major (12 months) and orthodontic (12 months) dental care services. In WV, a three-month waiting period applies to covered basic, major and orthodontic dental care services. In IL, NJ and VT, a six-month waiting period applies to covered major and orthodontic dental care services. Waiting periods do not apply in MO and RI. Some covered services are determined by age. If the plan covers replacement of teeth, there is no payment for replacement of teeth that are missing prior to coverage. In FL, payment limitation no longer applies after 24 months of continuous coverage. In MD, NY and OH, payment limitation no longer applies after 12 months of continuous coverage.

Dental insurance policies have exclusions, limitations, reduction of benefits and terms under which policies may be continued in force or discontinued. For costs, and additional details about coverage, contact Cigna Health and Life Insurance Company at 900 Cottage Grove Rd, Hartford, CT 06152 or call 866.GET.Cigna. (866.438.2446).

All Cigna products and services are provided exclusively by or through such operating subsidiaries of Cigna Corporation, including Cigna Health and Life Insurance Company, and Cigna Dental Health, Inc. In Texas, the Dental plan is known as Cigna Dental Choice, and this plan uses the national Cigna DPPO network. The Cigna name, logo, and other Cigna marks are owned by Cigna Intellectual Property, Inc.

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Learn more

For a complete list of dental professionals in the Cigna network, call 800.Cigna24 or go to Cigna.com/ifp-providers.

Ready to enroll?

Contact your broker/producer or call 855.377.2326 to speak with a licensed Cigna representative.

Already a customer?

Call 800.Cigna24 to reach customer service.

