

HSA-Qualified Plans for New Jersey and New York

FOR EMPLOYERS WITH 50 OR FEWER EMPLOYEES



CIGNA Small Group Plans At-A-Glance

BENEFITS	1		2		3		4	
	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK
Deductible – single (combined with Pharmacy)	\$1,500	\$3,000	\$2,000	\$4,000	\$2,500	\$5,000	\$2,500	\$5,000
Deductible – family (combined with Pharmacy)	\$3,000	\$6,000	\$4,000	\$8,000	\$5,000	\$10,000	\$5,000	\$10,000
Deductible application for non-single coverage¹	Collective		Collective		Collective		Collective	
Coinsurance (medical)² (including office visits)	90%	70%	90%	70%	90%	70%	100%	80%
Preventive Care coverage	100% no deductible no maximum	N/A	100% no deductible no maximum	N/A	100% no deductible no maximum	N/A	100% no deductible no maximum	N/A
Pharmacy – retail and mail order benefit (after deductible is met) Generic/Preferred/Non-preferred	30%/40%/50%	N/A	30%/40%/50%	N/A	30%/40%/50%	N/A	30%/40%/50%	N/A
Out-of-Pocket maximum – single³ (combined with Pharmacy)	\$3,000	\$9,000	\$4,000	\$12,000	\$5,000	\$15,000	\$3,500	\$10,500
Out-of-Pocket maximum – family³ (combined with Pharmacy)	\$6,000	\$18,000	\$8,000	\$24,000	\$10,000	\$30,000	\$7,000	\$21,000
Lifetime Maximum	unlimited/\$5 million		unlimited/\$5 million		unlimited/\$5 million		unlimited/\$5 million	

¹ Under a “collective deductible,” claims are covered under the coinsurance once the family deductible has been met, by any combination of family members. Individual deductibles do not apply.

² Some underlying benefit provisions may contain dollar or visit maximums.

³ All valid expenses count toward the out-of-pocket maximum – deductible and coinsurance for all benefits, including Pharmacy and Mental Health/Substance Abuse (MHSA).

Open Access Plus is the underlying medical plan.

This Benefit Summary highlights some of the benefits available under these plans. A complete description regarding the terms of coverage, exclusions and limitations including legislated benefits will be provided in the Group Service Agreement.

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