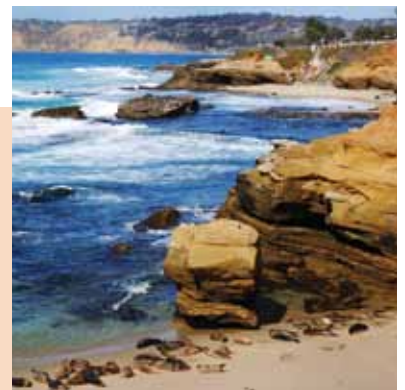


# CALIFORNIA INDIVIDUAL & FAMILY PLANS

**CIGNA OPEN ACCESS PLANS®**



Health  
and  
Pharmacy  
Benefits



PLAN COMPARISON





CIGNA HealthCare plans, offered through Connecticut General Life Insurance Company, provide coverage you and your family can count on, along with a broad range of options and award-winning service. That way, you can protect your health and secure your future. Now that's real value.

## **CIGNA Open Access Plans®**

**True choice.** You can choose an in-network health care professional or choose to receive care from one who isn't part of the CIGNA network. It's up to you.

**Primary care.** You have the option of choosing a Primary Care Physician as your personal doctor. With a Primary Care Physician, you have a valuable resource who acts as a personal health coach. But, if you prefer, you also have the option of not choosing a Primary Care Physician.

**Specialists.** You have direct access to participating specialists. You do not need a referral to see an in-network or out-of-network specialist.

Please check the Summary of Benefits for more specific details about the CIGNA Open Access Plans.

### **A CIGNA Open Access Plan is right for you if:**

- ✓ You want extensive coverage and a good value.
- ✓ You want a flexible plan.
- ✓ You want a national network of doctors and hospitals.

### **Your national network**

You have access to a network of more than 500,000 quality health care professionals and centers throughout the country. But if you want to see a health care professional who is not in the network, you can. Keep in mind that out-of-pocket costs vary, but your out-of-pocket costs are generally lower when you see in-network health care professionals.

In California, CIGNA offers you:

- A network of nearly 36,000 doctors
- Over 240 participating hospitals
- Commendable accreditation from the National Committee for Quality Assurance (NCQA)

**To apply, call your CIGNA authorized broker or agent today.**

**Or, you can call CIGNA at 1-866-GET-CIGNA (1-866-438-2446)**

(5:00 a.m. - 8:00 p.m. PT, Monday - Saturday)

**or visit [www.CIGNAforYou.com](http://www.CIGNAforYou.com).**



# CIGNA Open Access Plans® – CALIFORNIA

INDIVIDUAL & FAMILY PLANS	Open Access 1000		Open Access 1500		Open Access 2000		Open Access 3000		Open Access 5000	
	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK
<b>PLAN FEATURES</b> – Coinsurance percentage shown in- and out-of-network is the percentage CIGNA pays. <sup>3</sup> Annual deductible applies unless otherwise noted.										
<b>Annual Deductible</b> – Individual/Family deductible is satisfied when each family member has paid their individual deductible or when the total family deductible amount has been reached by any combination of family members	\$1,000/\$2,000	\$2,000/\$4,000	\$1,500/\$3,000	\$3,000/\$6,000	\$2,000/\$4,000	\$4,000/\$8,000	\$3,000/\$6,000	\$6,000/\$12,000	\$5,000/\$10,000	\$10,000/\$20,000
<b>Annual Out-of-Pocket Maximum</b> – Individual/Family deductible, copays, and pharmacy charges do not apply to the out-of-pocket maximum	\$2,000/\$4,000	\$4,000/\$8,000	\$3,000/\$6,000	\$6,000/\$12,000	\$3,000/\$6,000	\$6,000/\$12,000	\$4,000/\$8,000	\$8,000/\$16,000	\$5,000/\$10,000	\$10,000/\$20,000
<b>Lifetime Maximum Benefit</b>	\$6,000,000									
<b>Physician Services</b> – Primary Care Physician/Specialist – Office Visits	You pay \$30/\$40 <sup>1</sup>	CIGNA pays 50%	You pay \$30/\$40 <sup>1</sup>	CIGNA pays 50%	You pay \$30/\$40 <sup>1</sup>	CIGNA pays 50%	You pay \$30/\$40 <sup>1</sup>	CIGNA pays 50%	You pay \$30/\$40 <sup>1</sup>	CIGNA pays 50%
<b>Preventive Care</b> – Primary Care Physician/Specialist – Including immunizations, flu shots, and lab work – Calendar year maximum of \$250	You pay \$30/\$40, then CIGNA pays 100% <sup>1</sup>	CIGNA pays 50%	You pay \$30/\$40, then CIGNA pays 100% <sup>1</sup>	CIGNA pays 50%	You pay \$30/\$40, then CIGNA pays 100% <sup>1</sup>	CIGNA pays 50%	You pay \$30/\$40, then CIGNA pays 100% <sup>1</sup>	CIGNA pays 50%	You pay \$30/\$40, then CIGNA pays 100% <sup>1</sup>	CIGNA pays 50%
<b>Mammogram, Pap Smears, and PSA</b>	You pay \$30/\$40 <sup>1</sup>	CIGNA pays 50%	You pay \$30/\$40 <sup>1</sup>	CIGNA pays 50%	You pay \$30/\$40 <sup>1</sup>	CIGNA pays 50%	You pay \$30/\$40 <sup>1</sup>	CIGNA pays 50%	You pay \$30/\$40 <sup>1</sup>	CIGNA pays 50%
<b>Preventive Care Office Visits for Children Through Age 6<sup>2</sup></b>	You pay \$30/\$40 <sup>1</sup>	CIGNA pays 50%	You pay \$30/\$40 <sup>1</sup>	CIGNA pays 50%	You pay \$30/\$40 <sup>1</sup>	CIGNA pays 50%	You pay \$30/\$40 <sup>1</sup>	CIGNA pays 50%	You pay \$30/\$40 <sup>1</sup>	CIGNA pays 50%
<b>Immunizations and Lab Work for Children Through Age 6<sup>2</sup></b>	CIGNA pays 70% <sup>1</sup>	CIGNA pays 50% <sup>1</sup>	CIGNA pays 70% <sup>1</sup>	CIGNA pays 50% <sup>1</sup>	CIGNA pays 70% <sup>1</sup>	CIGNA pays 50% <sup>1</sup>	CIGNA pays 70% <sup>1</sup>	CIGNA pays 50% <sup>1</sup>	CIGNA pays 70% <sup>1</sup>	CIGNA pays 50% <sup>1</sup>
<b>Ambulance</b>	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%
<b>Emergency Room</b> – Additional \$100 deductible, waived if admitted	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%
<b>Urgent Care Services</b>	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%
<b>Inpatient Hospital Services</b>	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%
<b>Surgery in an Outpatient Hospital or Surgical Center</b>	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%
<b>Lab, X-Ray, Ultrasound, CT/PET Scan, and MRI</b>	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%
<b>Short-Term Rehabilitative Therapy (including Physical and Occupational Therapy)</b> – Speech Therapy and Spinal Manipulation – Calendar year maximum of 24 visits, combined in- and out-of-network	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%
<b>Durable Medical Equipment</b> – Calendar year maximum of \$2,000	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%
<b>Mental Health Inpatient</b> – Calendar year maximum of 30 days, combined in- and out-of-network	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%
<b>Mental Health Outpatient</b> – Calendar year maximum of 20 days, combined in- and out-of-network	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%
<b>RETAIL PHARMACY</b> (per 30 day supply)										
<b>Brand Name Drug Deductible</b> – Combined in- and out-of-network	\$250 per person/per calendar year				\$500 per person/per calendar year					
<b>Generic/Brand Name/Non-Preferred Brand Name</b>	You pay \$10/\$35/\$60	CIGNA pays 50%	You pay \$10/\$35/\$60	CIGNA pays 50%	You pay \$10/\$35/\$60	CIGNA pays 50%	You pay \$10/\$35/\$60	CIGNA pays 50%	You pay \$10/\$35/\$60	CIGNA pays 50%
<b>Self-Administered Injectable Drugs</b>	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%	CIGNA pays 70%	CIGNA pays 50%
<b>HOME DELIVERY PHARMACY</b> (per 90 day supply)										
<b>Generic/Brand Name/Non-Preferred Brand Name</b>	You pay \$25/\$85/\$150	Not available	You pay \$25/\$85/\$150	Not available	You pay \$25/\$85/\$150	Not available	You pay \$25/\$85/\$150	Not available	You pay \$25/\$85/\$150	Not available
<b>Self-Administered Injectable Drugs</b>	CIGNA pays 70%	Not available	CIGNA pays 70%	Not available	CIGNA pays 70%	Not available	CIGNA pays 70%	Not available	CIGNA pays 70%	Not available

<sup>1</sup> Annual deductible waived

<sup>2</sup> For children age 7 and older, refer to the Preventive Care benefits.

<sup>3</sup> A percentage of the CIGNA contracted rate to an in-network health care professional or a percentage of the cost from an out-of-network health care professional that the customer is responsible for.

For specific costs and further details of the coverage, including exclusions, reductions or limitations and the terms under which the policy may be continued in force, please refer to the Policy or ask your agent for an Outline of Coverage, or write to the company.

Depending on your or your family member's coverage history and applicable law, CIGNA may exclude coverage for certain pre-existing conditions for a period of time, as described in your Policy Booklet.

## COMMONLY USED HEALTH CARE WORDS

Here are some basic terms that you should know about your health care plan.

**Coinsurance:** A percentage of the CIGNA contracted rate to an in-network health care professional or a percentage of the cost from an out-of-network health care professional that the customer is responsible for.

**Copayment (copay):** A flat per service charge that customers are responsible to pay for services such as doctor visits or prescription drugs.

**Deductible:** The dollar amount customers must pay before the plan begins to pay for covered services. The deductible is satisfied when each family member has paid their individual deductible or when the total family deductible amount has been reached by any combination of family members.

**In-network health care professional:** Any health care professional (physician, hospital, etc.) that participates in the CIGNA network.

**Out-of-network health care professional:** Any health care professional (physician, hospital, etc.) that does not participate in the CIGNA network.

**Inpatient care:** Care given to a customer admitted to a hospital, hospice, skilled nursing center, or rehabilitation center.

**Outpatient care:** Any health care service provided to a customer who is not admitted to a center.

**Out-of-pocket costs:** Copays, deductibles, coinsurance, or fees paid by a customer for health services or prescription drugs.

**Out-of-pocket maximum:** The most customers will pay per year for covered health expenses before the plan pays 100% for the rest of that year.

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or agent today.**

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(5:00 a.m. – 8:00 p.m. PT, Monday – Saturday)

**or visit [www.CIGNAforYou.com](http://www.CIGNAforYou.com).**



If, after reviewing the contract, you find that you're not satisfied for any reason, simply return the contract to us within 10 days. We will refund any premium you've paid (including any contract fees or other charges), less the cost of any services paid on behalf of you or any covered dependent.

This Plan Comparison 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 your Summary of Benefits and Policy Booklet.

This Plan Comparison contains high-deductible plans. These plans will not begin to pay for your health care expenses until after your health care bills exceed the deductible amount. You will have to pay for all of your health care bills until these bills exceed your deductible amount.

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