



24/7
live customer
service!

Only from CIGNA.
Effective 1/1/2010.

Why CIGNA?

"I am **completely** satisfied!"

"The services are **great**
and everyone is so **helpful.**"

"You're doing a **great job.**"

"I keep thinking, 'This is
too good to be true!'"



Georgia State Health Benefit Plan

take control of your health care.

24/7 Service Get 24/7 customer service.

CIGNA is the first health services company to provide live customer service 24-hours a day, 7 days a week – **starting 1/1/2010**. Not just an after hours nurse but service representatives to answer questions about benefits, claims and more.

Choice Choose your own doctors.

There are more than 15,000 doctors in our GA network – including more than 6,000 in metro Atlanta – and a national network you can access while you're away from home.

Advocacy Work with an advisor.

A team of health advisors is ready to help you understand your health needs and find solutions – even when you're not sure where to begin.

Savings Save money.

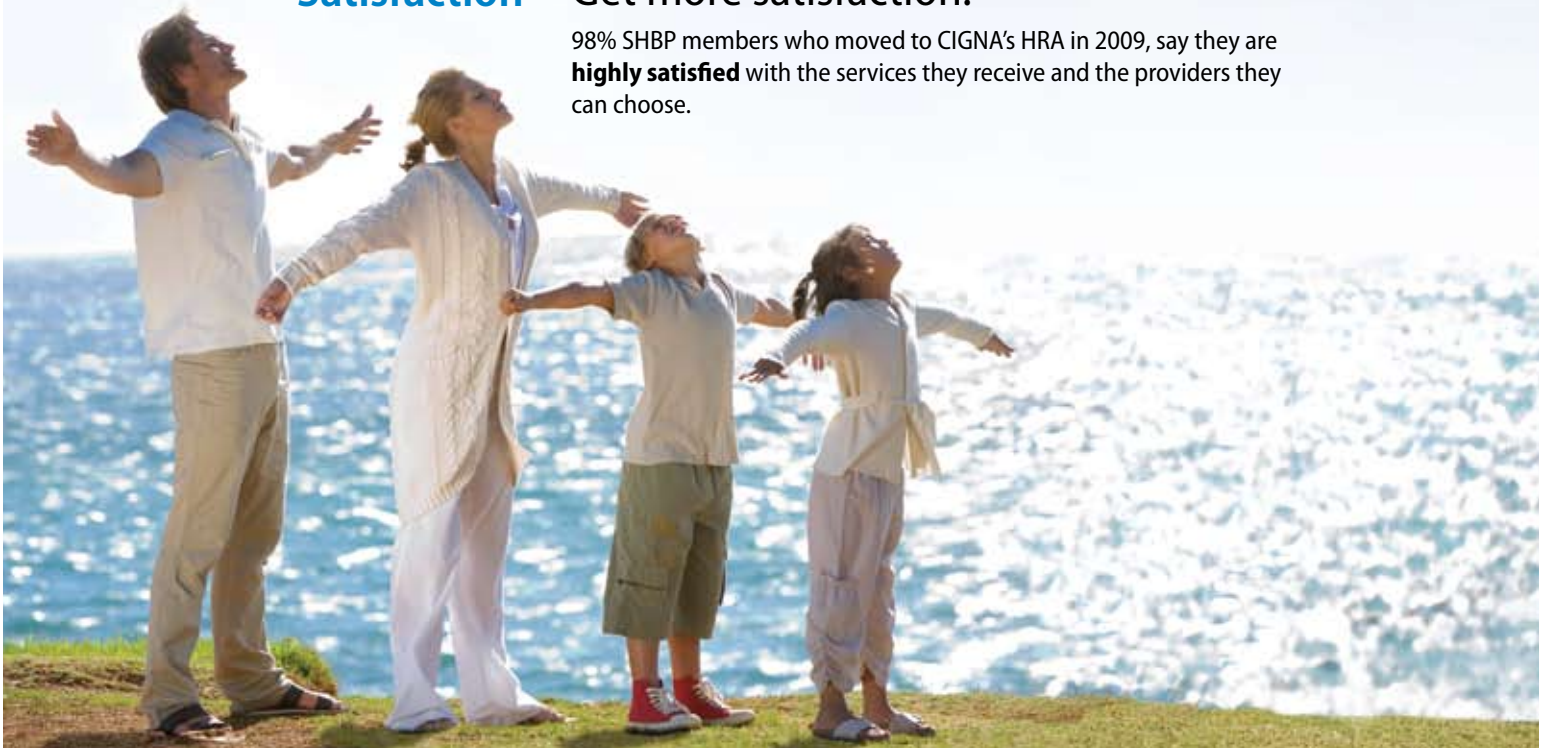
Compare the price and quality of medications, medical services and hospital care with easy-to-use online cost calculators at www.myCIGNA.com.

Rewards Earn money.

Choose the CIGNA Choice Fund Health Reimbursement Arrangement (HRA) and SHBP will put money in a savings account for you to pay for medical services. Earn extra money when you fill out the health assessment and complete your annual preventive care exam.

Satisfaction Get more satisfaction.

98% SHBP members who moved to CIGNA's HRA in 2009, say they are **highly satisfied** with the services they receive and the providers they can choose.



www.myCIGNA.com

Good information for better health

Nothing is more important than your good health. That's why there's www.myCIGNA.com – your online home for assessment tools, plan management, medical updates and much more!

On www.myCIGNA.com you can:

- Choose your doctor and create a personalized list of nearby doctors, hospitals and pharmacies.
- Verify plan details such as coverage, copays and deductibles.
- Track claims, account balances and health costs.
- Keep track of medical conditions, medications, allergies, surgeries, immunizations and emergency contacts.
- Complete a confidential online questionnaire, and find personalized health and wellness recommendations.
- Learn about health conditions, treatments and medications using an interactive medical library.
- Find information and estimate costs for specific medical procedures and treatments.
- Keep track of the rewards you receive for taking part in programs that will help you improve your health.
- View prescription drug information and costs side by side.

Health Assessment

Get to know your health

Understanding your health can be the first step toward improvement, and a health assessment is a great way to get started. The questionnaire is easy to complete and:

- Asks questions about habits, stress levels, family history and your overall health and also records basic information such as weight, blood pressure and cholesterol level.
- Creates a personalized report and wellness score with details about your most important health issues.
- Offers suggestions for health screenings, and information about wellness and health programs.
- Gives you information to share with your doctor at your next wellness visit.

What's more, when you complete the health assessment, you'll receive an incentive which may reduce your out-of-pocket expenses.

Healthy Rewards

Discover health and wellness discounts

Save money when you purchase health and wellness products and services through the CIGNA Healthy Rewards® program.

Programs include:

- Weight and nutrition management
- Fitness
- Tobacco cessation
- Mind and body
- Vision and hearing care
- Vitamins, health and wellness products
- Alternative medicine
- Dental care
- Healthy lifestyle products

Health Advisor

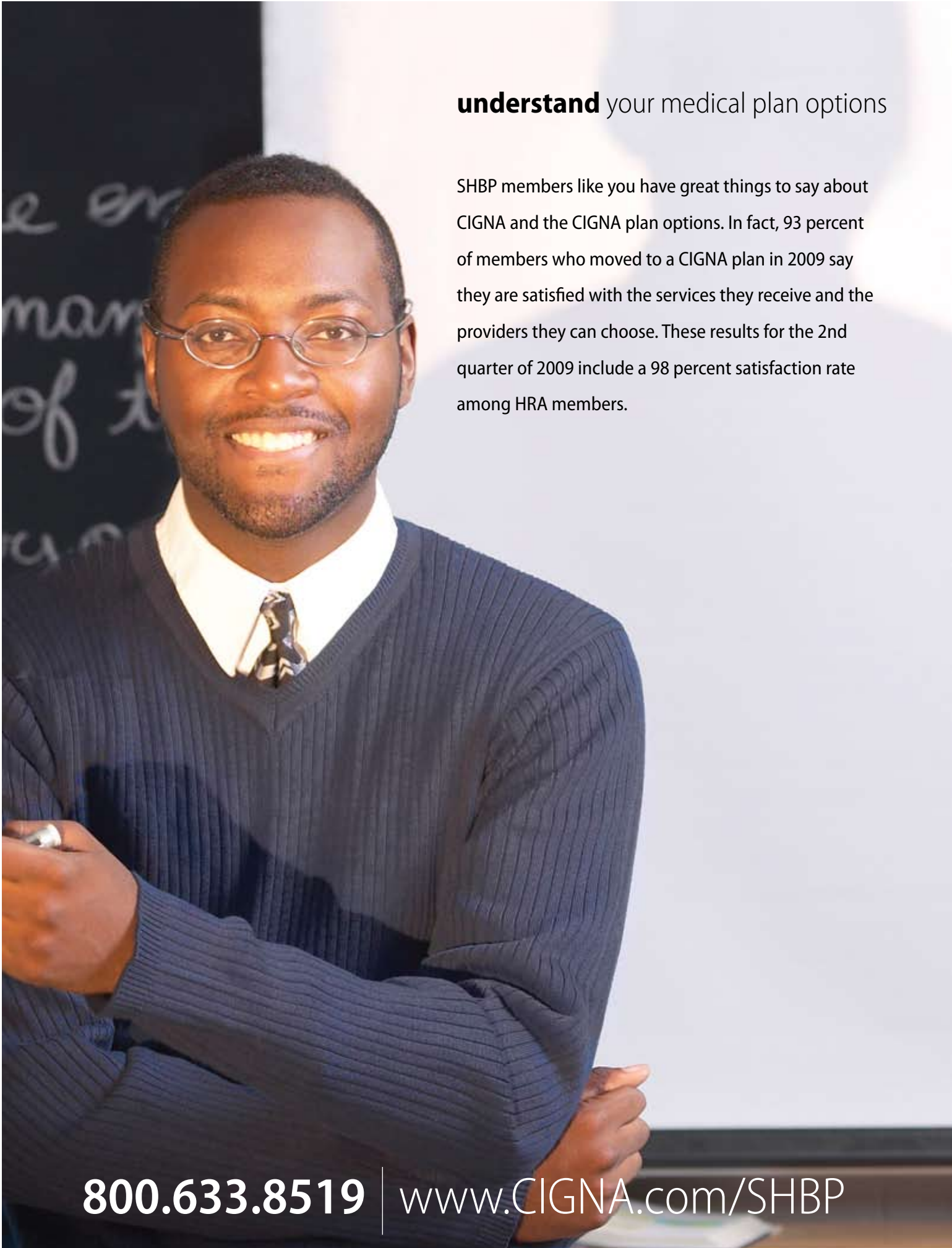
Partner with a health advisor

Health advisors are available to listen, understand your needs and help you find solutions – even when you're not sure where to begin. Get confidential assistance, support and encouragement to set and reach health improvement goals.

- Discuss your health assessment results.
- Learn how to access over-the-phone health seminars.
- Maintain better eating and exercise habits.
- Learn to better manage conditions, including low back pain, osteoarthritis, high blood pressure, high cholesterol and more.
- Get unbiased advice on treatment options so you and your doctor can make decisions that meet your health needs and work best for you.
- Access support 24 hours a day when you need medical guidance, like how to treat a twisted ankle or your child's high fever.
- Understand your preventive screenings and annual exams so you can learn more about what you can do to get and stay healthy.
- Ask personal questions about your health coverage and get help finding your way through the health care system.

800.633.8519

www.CIGNA.com/SHBP



understand your medical plan options

SHBP members like you have great things to say about CIGNA and the CIGNA plan options. In fact, 93 percent of members who moved to a CIGNA plan in 2009 say they are satisfied with the services they receive and the providers they can choose. These results for the 2nd quarter of 2009 include a 98 percent satisfaction rate among HRA members.

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**CIGNA Choice Fund®
Health Reimbursement Arrangement (HRA) –**

Provides funds for you to use toward eligible expenses

- SHBP contributes funds to an account that helps you pay for eligible health care expenses.
- Preventive care is available at no cost to you.
- You choose the doctors you want to see and no referral is needed to see a specialist.
- You're protected by an out-of-pocket maximum – once you meet the maximum, your plan pays covered expenses at 100%.
- Unused money will be rolled over to the next year and added to SHBP's annual contribution if you re-enroll in the HRA.

**Open Access Plus (OAP)
formerly called the PPO –**

A plan with in- and out-of-network benefits

- Your plan pays for basic medical care, including visits to your doctor's office, hospital stays, mental health and substance abuse services, chiropractic treatment, physical therapy and other services.
- Before your health care plan begins to pay for these eligible expenses, you pay a low annual deductible.
- Once you meet your deductible, you pay a percentage of the cost (coinsurance) for your covered health care expenses and the plan pays the rest.
- You always have the option to see any licensed doctor; however, your cost will be lower if care is received by an in-network provider.
- You can see a specialist without a referral.
- Emergency care is covered 24 hours a day, in-network or out of network.

Open Access Plus In-Network (HMO) –

Save when you use network services

- Your plan pays for basic medical care, including visits to your doctor's office, hospital stays, mental health and substance abuse services, chiropractic treatment, physical therapy and other services.
- Once you meet your deductible, you pay a percentage of the cost (coinsurance) for your covered health care expenses and the plan pays the rest.
- You have the option to see any doctor who participates in the CIGNA Open Access Plus In-Network HMO.
- If you visit a doctor who does not participate with CIGNA, your care will not be covered.
- You can see a specialist without a referral.
- Emergency care is covered 24 hours a day, in-network or out of network.
- You pay co-payments for most office visits.

**Open Access Plus
High Deductible Health Plan (HDHP) –**

High deductible plan with a cost-effective monthly payment

- You pay a more cost-effective monthly premium for basic medical care, including visits to your doctor's office, hospital stays, mental health and substance abuse services, chiropractic treatment, physical therapy and other services.
- Before your health care plan begins to pay for these eligible expenses, you pay an annual deductible that's higher than other plans.
- Once you meet your deductible, you pay a percentage of the cost (coinsurance) for your covered health care expenses and the plan pays the rest.
- You always have the option to see any licensed doctor; however, your cost will be lower if you get care from an in-network provider.
- You can see a specialist without a referral.
- Emergency care is covered 24 hours a day, in-network or out of network.

Georgia SHBP Options	CIGNA Choice Fund® HRA	Open Access Plus	Open Access Plus High Deductible Health Plan HDHP	Open Access Plus In-Network
Preventive Care Physical Exams In-Network Coverage Only	Covered in Full – No charge, no deductible	Covered in Full after \$35 copay/ office visit; no deductible; subject to \$1,000 max/cal. year	Covered in Full – No charge, no deductible	Covered in Full after \$35 copay/ office visit; no deductible
Well Child Exams In-Network Coverage Only	Covered in Full – No charge, no deductible	Covered in Full after \$35 copay/ office visit; no deductible; subject to \$1,000 max/cal. year	Covered in Full – No charge, no deductible	Covered in Full after \$35 copay/ office visit; no deductible
Covered Immunizations In-Network Coverage Only	Covered in Full – No charge, no deductible	Covered in Full – No charge, no deductible	Covered in Full – No charge, no deductible	Covered in Full – No charge, no deductible
Deductible: In-Network	Combined medical/pharmacy		Combined medical/pharmacy	
Individual	\$1,100	\$600	\$1,200	\$600
Employee plus Spouse	\$1,900	\$1,200	\$2,400	\$900
Employee plus Child(ren)	\$1,900	\$1,200	\$2,400	\$900
Family	\$2,750	\$1,800	\$2,400	\$1,200
Deductible: Out-of-Network				
Individual	\$1,100	\$1,200	\$2,400	In-Network Coverage Only
Employee plus Spouse	\$1,900	\$2,400	\$4,800	In-Network Coverage Only
Employee plus Child(ren)	\$1,900	\$2,400	\$4,800	In-Network Coverage Only
Family	\$2,750	\$3,600	\$4,800	In-Network Coverage Only
Coinsurance: In-Network	15%	20%	10%	20%
Coinsurance: Out-of-Network	40%	40%	40%	In-Network Coverage Only
HRA Credit Dollars		N/A	N/A	N/A
Individual	\$500			
Employee plus Spouse	\$1,000			
Employee plus Child(ren)	\$1,000			
Family	\$1,500			
Out-of-Pocket Maximum: In-Network	Combined medical/pharmacy		Combined medical/pharmacy	
Individual	\$2,500	\$2,000 + copays	\$1,800	\$2,000 + copays
Employee plus Spouse	\$4,100	\$3,000 + copays	\$3,100	\$3,000 + copays
Employee plus Child(ren)	\$4,100	\$3,000 + copays	\$3,100	\$3,000 + copays
Family	\$5,700	\$4,000 + copays	\$3,100	\$4,000 + copays
Out-of-Pocket Maximum:				
Out-of-Network	Combined medical/pharmacy		Combined medical/pharmacy	
Individual	\$2,500	\$4,000 + copays	\$4,000	In-Network Coverage Only
Employee plus Spouse	\$4,100	\$6,000 + copays	\$7,400	
Employee plus Child(ren)	\$4,100	\$6,000 + copays	\$7,400	
Family	\$5,700	\$8,000 + copays	\$7,400	
Physician Services: In-Network				
Primary Care Visit	15% after deductible	\$35 copay per office visit	10% after deductible	\$35 copay per office visit
Specialist Visit	15% after deductible		10% after deductible	
Physician Services: Out-of-Network				
Primary Care Visit	40% after deductible	40% after deductible	40% after deductible	In-Network Coverage Only
Specialist Visit	40% after deductible	40% after deductible	40% after deductible	
Inpatient Hospital: In-Network	15% after deductible	\$250 copay per admission, then 20% after deductible	10% after deductible	20% after deductible
Inpatient Hospital: Out-of-Network	40% after deductible	\$250 deductible per admission, then 40% after deductible	40% after deductible	In-Network Coverage Only
Outpatient Hospital: In-Network	15% after deductible	20% after deductible	10% after deductible	20% after deductible
Outpatient Hospital: Out-of-Network	40% after deductible	40% after deductible	40% after deductible	In-Network Coverage Only
Mental Health & Substance Abuse Inpatient: In-Network	15% after deductible	\$250 copay per admission, then 20% after deductible	10% after deductible	20% after deductible

We're available **whenever you need us, 24/7**

Georgia SHBP Options	CIGNA Choice Fund® HRA	Open Access Plus	Open Access Plus High Deductible Health Plan HDHP	Open Access Plus In-Network
Mental Health & Substance Abuse Inpatient: Out-of-Network	15% after deductible	\$250 deductible per admission, then 40% after deductible	40% after deductible	In-Network Coverage Only
Mental Health & Substance Abuse Outpatient: In-Network	15% after deductible	\$35 copay per office visit	15% after deductible	\$35 copay per office visit
Mental Health & Substance Abuse Outpatient: Out-of-Network	40% after deductible	40% after deductible	40% after deductible	In-Network Coverage Only
Prescription Drug Retail 30 day supply: In-Network	15% after deductible for generic drugs 25% after deductible for preferred brand-name drugs 25% after deductible for non-preferred brand-name drugs	\$15 copay for generic drugs \$40 copay for preferred brand-name drugs \$100 copay for non-preferred brand-name drugs	20% after deductible for generic drugs; \$10 min, \$100 max 20% after deductible for preferred brand-name drugs; \$10 min, \$100 max 20% after deductible for non-preferred brand-name drugs; \$10 min, \$100 max	\$15 copay for generic drugs \$40 copay for preferred brand-name drugs \$75 copay for non-preferred brand-name drugs
Prescription Drug Retail 90 day supply: In-Network Coverage Only	15% after deductible for generic drugs 25% after deductible for preferred brand-name drugs 25% after deductible for non-preferred brand-name drugs	\$45 copay for generic drugs \$120 copay for preferred brand-name drugs \$300 copay for non-preferred brand-name drugs	20% after deductible for generic drugs; \$30 min, \$300 max 20% after deductible for preferred brand-name drugs; \$30 min, \$300 max 20% after deductible for non-preferred brand-name drugs; \$30 min, \$300 max	\$45 copay for generic drugs \$120 copay for preferred brand-name drugs \$225 copay for non-preferred brand-name drugs
Durable Medical Equipment: In-Network	15% of eligible expenses; Subject to deductible	20% of eligible expenses; Subject to deductible	10% of eligible expenses; Subject to deductible	Covered in full – eligible expenses
Durable Medical Equipment: Out-of-Network	40% of eligible expenses; Subject to deductible	40% of eligible expenses; Subject to deductible	40% of eligible expenses; Subject to deductible	N/A
Emergency Health Services: In-Network	15% of eligible expenses; Subject to deductible	20% of eligible expenses; after \$150 copay; Subject to deductible Copay waived if admitted	10% of eligible expenses; Subject to deductible	\$150 copay, waived if admitted
Emergency Health Services: Out-of-Network	15% of eligible expenses; Subject to deductible	20% of eligible expenses; after \$150 copay; Subject to deductible Copay waived if admitted	10% of eligible expenses; Subject to deductible	\$150 copay, waived if admitted
Vision: In-Network	1 eye exam every 24 months; Covered in full; no deductible	1 eye exam every 24 months; 20% of expenses; no deductible	1 eye exam every 24 months; 10% of expenses; no deductible	1 eye exam every 24 months subject to \$35 copay; \$200 hardware allowance per year (may use vision provider of choice – no network requirement on hardware only)
Maternity Services: In-Network	15% of eligible expenses; Subject to deductible	Initial visit \$35 copay; not subject to deductible; then 20% of eligible expenses	10% of eligible expenses; Subject to deductible	Covered in full – after initial \$35 copay
Maternity Services: Out-of-Network	40% of eligible expenses; Subject to deductible	40% of eligible expenses; Subject to deductible	40% of eligible expenses; Subject to deductible	N/A
Urgent Care	15% of eligible expenses; Subject to deductible	20% of eligible expenses; after \$45 copay	10% of eligible expenses; Subject to deductible	\$35 copay

The information in this brochure is provided as a guide only. Make sure to read all your enrollment information thoroughly as plan details may vary. If you need more assistance, talk to your Human Resources representative.

800.633.8519

www.CIGNA.com/SHBP

plan to make smart benefit decisions



Your "choice" checklist

Think about your health history and your health care needs.

- How much did you spend on health care in 2009, and how might this change in 2010?
- Do you want the flexibility to see both in-network and out-of-network doctors?
- Are there certain treatments or medications you want to make sure are covered?
- Will you need help with certain health issues, like losing weight, treating lower back pain, or managing diabetes or heart disease?
- Did you receive the level of service you expected to receive from your current carrier?

Use this guide as a starting point to learn about your plan choices.

Visit www.CIGNA.com/SHBP or call 800.633.8519 for more information about your choices and to access helpful information and planning tools. You can find out:

- What you might spend on health care under your different plan options?
- Is your doctor in the CIGNA network?

Choose CIGNA

800.633.8519 / www.CIGNA.com/SHBP We're available whenever you need us, 24/7

Choose health. Choose CIGNA.

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