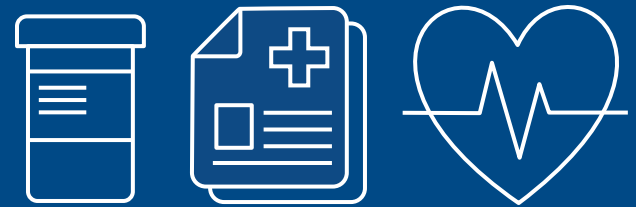


# YOUR CIGNA PLAN OFFERINGS



Plan year: January 1, 2016-December 31, 2016  
Open Enrollment: November 2-November 20

Offered by Cigna Health and Life Insurance Company, Connecticut General Life Insurance Company, or their affiliates.

**Together, all the way.<sup>SM</sup>**



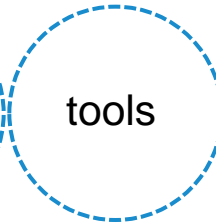
# Together, all the way.<sup>SM</sup>

We've got your back



so you can achieve what matters most.

That's why we offer



that will work for you.

Together, we can all live



lives.





You go the extra mile to be **healthy**  
but you don't need to go it  
alone.

With your Cigna Choice Fund<sup>®</sup> medical plan, we're  
with you all the way – **in sickness and in health.**



# What's the Difference? Comparing HRA and HSA

Feature	Health Reimbursement Account (HRA)	Health Savings Account (HSA)
Overview	An employer-funded account used to pay for qualified health care expenses, typically combined with a high-deductible health plan.	A tax-free, individually owned savings account used to pay for qualified expenses of the account holder and qualified dependents in the current or in future years.
Who contributes?	Only inVentiv may contribute to an HRA	The employee, inVentiv or both <b>New this year! inVentiv's contribution is semi-annual.</b>
Who owns the account?	inVentiv	Employee
Are there contribution limits?	No federal tax law limits.	The IRS sets the annual maximum contribution limit. The limit for 2016 is \$3,350 for Single enrollment and \$6,750 for Family enrollment in the HDHP.
Can funds be carried over each year?	Yes, up to a maximum of \$5000 for Individual, \$4500 for EE + SP or EE + Child(ren), and \$4000 Family	Yes, HSA funds are carried over indefinitely during a participant's lifetime inclusive of the inVentiv contribution.
Do I have to use the money to pay for claims?	Yes, any money in the account will be used first to pay for claims.	No, you can decide when to use the HSA bank account for qualified expenses.
What happens to the account if I leave inVentiv?	The fund is not portable. Any unused amounts remain.	You own the bank account and you take it with you.





# YOUR CIGNA CHOICE FUND® HEALTH SAVINGS ACCOUNT

Your health plan plus a health savings account

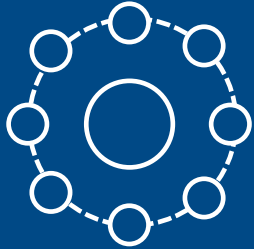
1/1/2016-12.31/2016

Offered by Cigna Health and Life Insurance Company or Connecticut General Life Insurance Company

**Together, all the way.™**

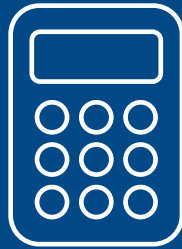


# Cigna Choice Fund<sup>®</sup> Health Savings Account (HSA)



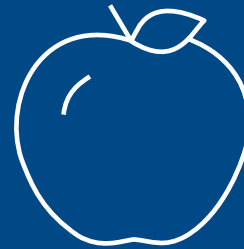
## Health plan:

- Open Access Plus (OAP)



## Deductibles:

\$1,750 individual  
\$3,250 family



## Preventive care\*:

Covered at 100%  
(in-network)



## Pharmacy\*\*:

Administered by  
Express Scripts

All Pharmacy expenses  
accumulate toward  
your overall deductible  
and Out-of-Pocket  
Maximum

\* Some preventive services may not be covered under your plan. For example, immunizations for travel are generally not covered. Other non-covered preventive services/supplies may include any service or device that is not medically necessary or services/supplies that are unproven (experimental or investigational). See your enrollment materials for details.

\*\* Health benefit plans vary, but in general to be eligible for coverage a drug must be approved by the Food and Drug Administration (FDA), prescribed by a health care professional, purchased from a licensed pharmacy and medically necessary. If your plan provides coverage for certain prescription drugs with no cost-share, you may be required to use an in-network pharmacy to fill the prescription. If you use a pharmacy that does not participate in your plan's network, your prescription may not be covered, or reimbursement may be limited by your plan's copayment, coinsurance or deductible requirements. See your enrollment materials for details.

# Health savings plan and you

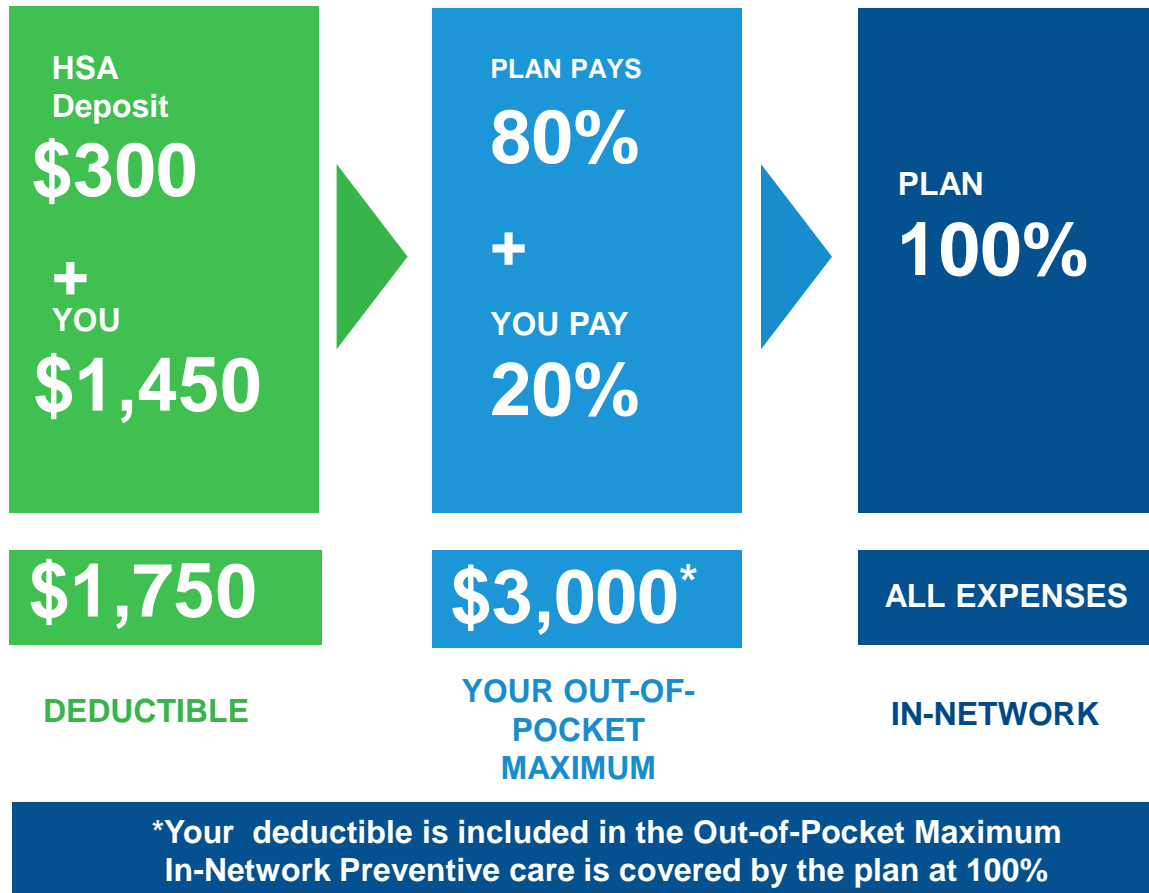


- A tax-advantaged Health Savings Account provides coverage for current health care expenses with the option to save for future health care expenses
- Combines a qualified high-deductible medical plan (medical/pharmacy coverage) with a Health Savings Account
- Both you and inVentiv Health can contribute to the Health Savings Account which is owned by you
- Money put in the Health Savings Account is generally not taxable\*
- You have investment options with the Health Savings Account

\* HSA contributions and earnings are not subject to federal taxes and not subject to state taxes in most states. A few states do not allow pretax treatment of contributions or earnings. Please consult your personal tax advisor or contact your plan administrator for information about your state.

# Make the most of your HSA – Individual

Contributions (from you or inVentiv) can be used to pay for qualified health expenses or saved to pay for future health expenses



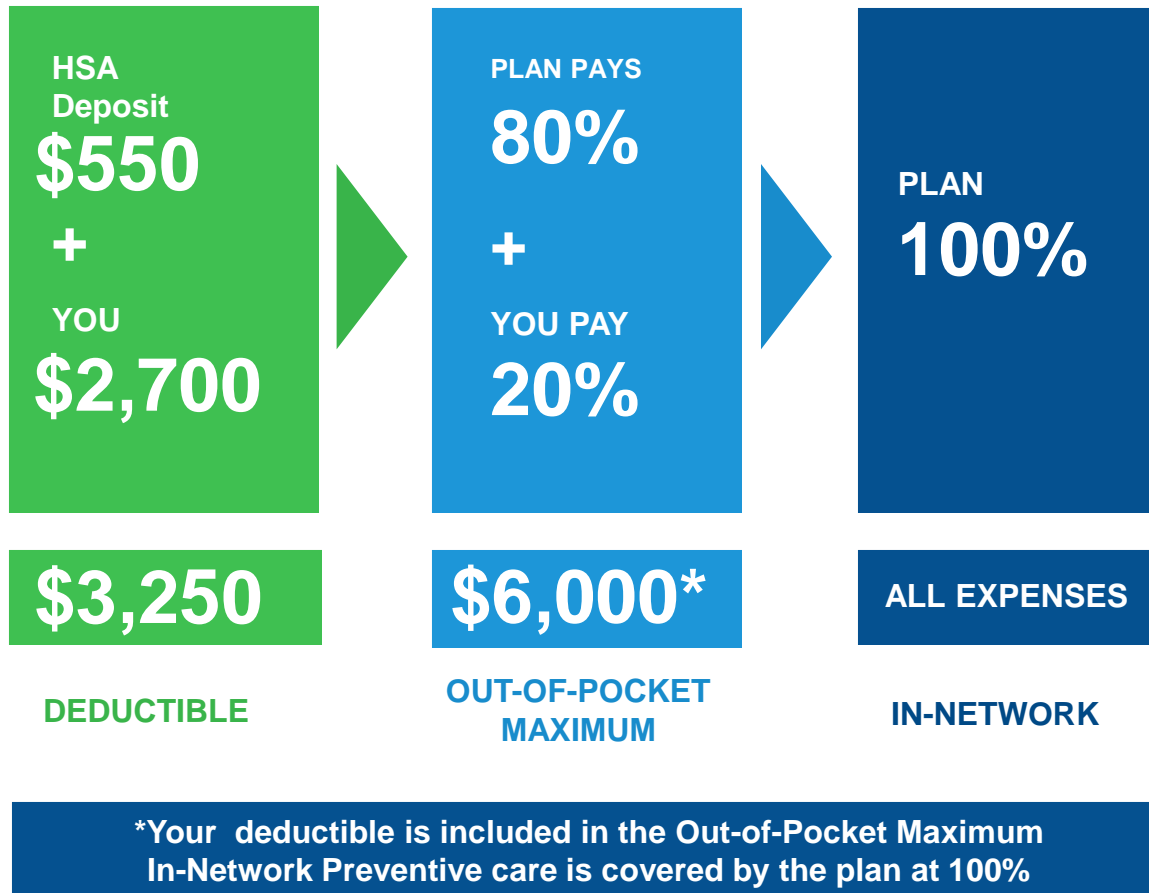
Your out-of-pocket costs may exceed the amount shown if you choose to receive care out-of-network. All plans have exclusions and limitations. For costs and details of coverage, see your enrollment materials.





# Make the most of your HSA – EE + Spouse or EE+ Child(ren)

Contributions (from you or inVentiv) can be used to pay for qualified health expenses or saved to pay for future health expenses

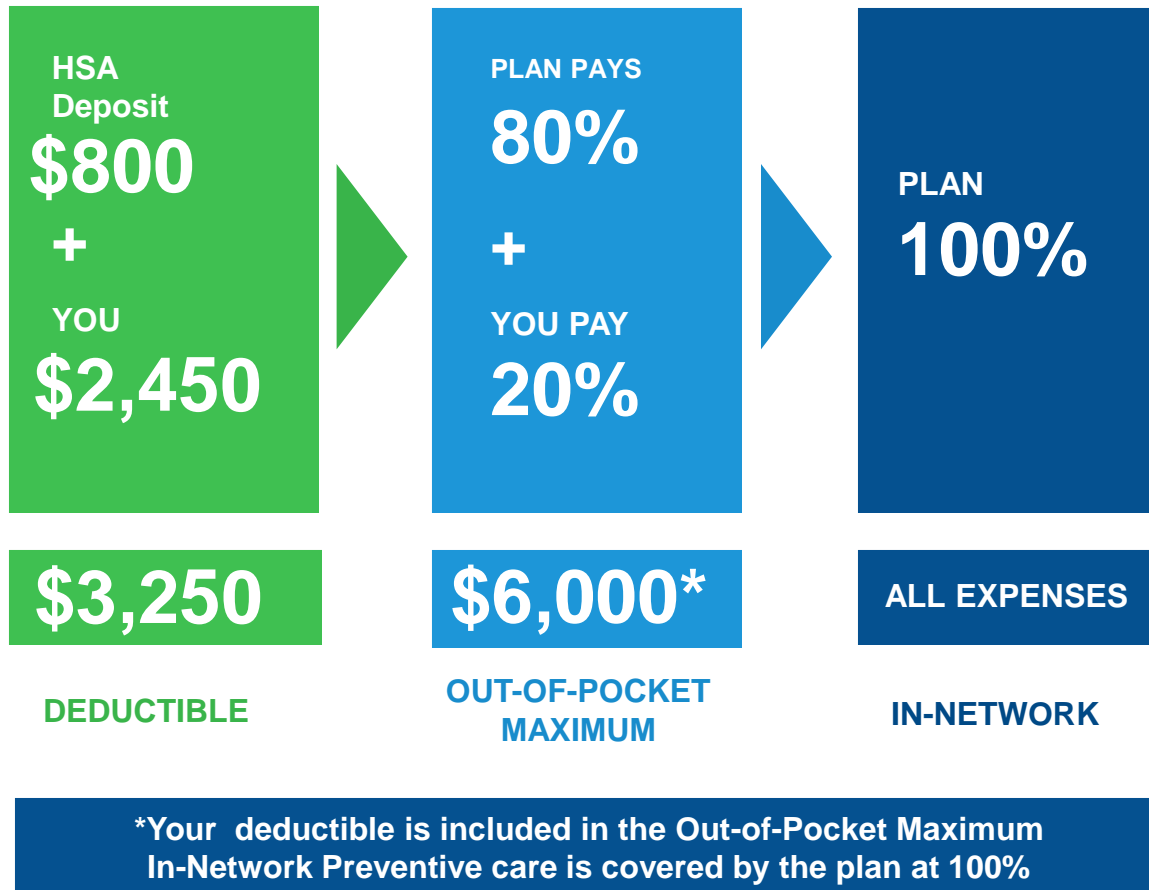


Your out-of-pocket costs may exceed the amount shown if you choose to receive care out-of-network. All plans have exclusions and limitations. For costs and details of coverage, see your enrollment materials.



# Make the most of your HSA – Family

Contributions (from you or inVentiv) can be used to pay for qualified health expenses or saved to pay for future health expenses



Your out-of-pocket costs may exceed the amount shown if you choose to receive care out-of-network. All plans have exclusions and limitations. For costs and details of coverage, see your enrollment materials.



# Are you eligible to participate?

Because HSA plans have certain tax advantages, the IRS defines specific rules for participation. To be eligible, you:



- Must be enrolled in an IRS-qualified high-deductible medical plan (high-deductible medical plans offered with Cigna Choice Fund® HSA meet IRS requirements)
- Cannot have any other health coverage
  - Not covered by spouse's medical or pharmacy plan
  - Not covered through Medicare Part A or Part B
  - Not covered through a general-purpose Flexible Spending Account (FSA) plan (either employer's or spouse's)
- Cannot be claimed as a dependent on another person's tax return



# Your HSA maximum contribution

The IRS has set the following annual limits for 2016:



## **Under age 55 and not enrolled in Medicare (based on a 12-month period):**

- Up to \$3,350 individual coverage\*
- Up to \$6,750 family coverage\*

## **Age 55 or older:**

- Maximum contribution increases by \$1,000 (considered a “catch-up” contribution)
- Up to \$4,350 individual coverage\*
- Up to \$7,750 family coverage\*

## **To make the maximum contribution in a calendar year, you must:**

- Meet all requirements to be eligible for HSA contributions on January 1
- Remain qualified through December 1
- If these criteria are not met, maximum contribution is prorated =  
if 1/12 maximum contribution for each month then individual is qualified

\*Contributions to your HSA that you receive from your employer and incentives count toward your maximum.

# Your HSA saving and investment features



- \$2,000 minimum in HSA to invest
- Self directed brokerage option powered by TD Ameritrade (trading fees may apply).
- Mutual Fund selection option managed by DEVENIR
- Tax-free growth of interest or investment earnings\*
- For either investment option, integrated, online access to trading, balance information, and much more is available on the HSA Bank website via [myCigna.com](http://myCigna.com)

Investments are subject to market fluctuation, investment risk, and possible loss of principal. You are urged to consult a professional financial advisor and tax advisor prior to exercising any investment options.

\*HSA contributions and earnings are not subject to federal taxes and not subject to state taxes in most states. A few states do not allow pretax treatment of contributions or earnings. Please consult your personal tax advisor or contact your plan administrator for information about your state.



# How your medical claims are paid



Sick visit to an in-network doctor/hospital/facility – receive discounted rate for Cigna plan.



Cigna receives the claim from doctor and processes it based on the HSA-qualified plan deductible, covered expenses and Cigna-negotiated discounts.

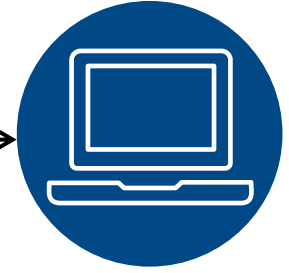


**If you opt to have your claims displayed on the HSA Bank site,** you can then elect to have all or some of your claims paid directly from your HSA.

**If not,** you have the option to pay the doctor bill using your HSA (debit card/checkbook/online bill pay/fund transfer) or pay out of pocket.



**Cigna provides an explanation of benefits or EOB (“receipt”) showing:** doctor’s fee, Cigna discount, amount billed by the health care plan, amount paid to doctor and what you saved.



Balance and transaction available:

- On **mycigna**-via [myCigna.com](http://myCigna.com) or the myCigna Mobile App
- By email alert
- By calling Cigna customer service 24/7/365



# Helping you understand and track your health care expenses

## Your 24/7 online health account management

- Review your plan coverage
- Check available balances
- Track claims and payments
- Get HSA bank account information
- Manage investment accounts via link to



The screenshot shows the Cigna Health Savings Account (HSA) online management interface. At the top, there is a navigation bar with the Cigna logo and tagline "healthy life it's what you manage". To the right of the logo are links for "Profile", "Contact", "Forms", "Español", and "Log Out". Below the navigation bar is a search bar with a "SEARCH" button. The main content area is titled "Health Savings Account (HSA)" and includes a breadcrumb trail: "Home » Review My Coverage » Health Savings Account (HSA)". Below the title, there are several sections: "ACCOUNT BALANCE" showing "Available Cash Balance" of \$4,652.06; "DEDUCTIBLE TRACKER" with a "MEDICAL" tab selected, showing a "Cigna In-Network Deductible" of \$4,000 and a "Remaining" amount of \$3,162.00; "Account Summary" with fields for "Primary Customer:", "Employer Account Number:", "Coverage From:", and "Auto-Pay:"; "My Incentive Awards Program" with a description and a "View Your Incentive Programs" link; and "How Your Health Savings Account (HSA) Works" with a description. On the right side, there is a "RELATED LINKS" section with a list of links: "Get Account Updates", "Health Care Documents", "Investment Options", "Eligible and Ineligible HSA Expenses", "HSA Video", "HSA Calculator", "Understanding My Coverage", "Request or Cancel HSA Debit Cards", and "Healthy Rewards® Discounts". Below the links is a "NEED HELP" section with a "FAQ" link.



# meet Karen

- Single, mid-50s
- Heart Disease; controlling through medication
- Looking to save money for future expenses



## Here's how the Cigna Choice Fund HSA works for Karen

Year 1

inVentiv's contribution	\$300
Karen's pre-tax HSA Contribution	\$3,050
<b>HSA Total</b>	<b>\$3,350</b>
Karen receives annual preventive care	\$0
12 Generic Rx	\$288
She visits two specialists	\$300
ER Visit	\$2,000
<b>Medical &amp; Rx expenses</b>	<b>\$2,588</b>
Deductible	– \$1,750
<b>Remaining costs</b>	<b>\$838</b>
Karen's health plan pays 80%	– \$670.40
Karen pays her 20% coinsurance	– \$167.60
<b>Karen's total out-of-pocket costs for the year</b>	<b>\$1,917.60</b>
Karen's ending HSA balance	\$1,432.40





# meet the Coopers

- Active Family of four
- Daughter has Diabetes



## Here's how the Cigna Choice Fund HSA works for the Coopers    Year 1

inVentiv's contribution	\$800
Coopers pre-tax HSA Contribution	\$5,950
<b>HSA Total</b>	<b>\$6,750</b>
All four receive annual preventive care	\$0
Daughter has 12 doctors visits	\$3,000
14 Prescriptions	\$2,500
Lab Work throughout the year to manage diabetes	\$2,000
<b>Medical &amp; Rx expenses</b>	<b>\$7,500</b>
Deductible	– \$3,250
<b>Remaining costs</b>	<b>\$4,250</b>
Coopers health plan pays 80%	– \$3,400
Coopers pays their 20% coinsurance	– \$850
<b>Coopers total out-of-pocket costs for the year</b>	<b>\$4,100</b>
Coopers ending HSA balance	\$2,650



# Planning for your medical expenses

Cigna Choice Fund with HSA			
	Single	EE+ SP or EE + CH	Family
<b>Deductible</b>	\$1,750	\$3,250	\$3,250
<b>Out-of-pocket maximum</b>	\$3,000 In-network \$4,000 Out-of-network	\$6,000 In-Network \$8,000 Out-of-Network	\$6,000 In-network \$8,000 Out-of-network
<b>HSA contribution from inVentiv</b>	\$300	\$550	\$800
<b>Maximum Contribution allowed by IRS <u>including contribution from inVentiv</u></b>	\$3,350	\$6,750	\$6,750
<b>Lifetime maximum</b>	Unlimited	Unlimited	Unlimited

\*If you choose to receive care outside of your plan's network, only covered expenses will be applied to your deductible – subject to your plan's Maximum Reimbursable Charge provisions. See your enrollment materials for more information about costs and details about covered and non-covered services, including plan exclusions and limitations.



# CIGNA CHOICE FUND® HEALTH REIMBURSEMENT ACCOUNT



Your health plan plus a health reimbursement account

1/1/2016-12/31/2016

Offered by Cigna Health and Life Insurance Company or Connecticut General Life Insurance Company

**Together, all the way.™**



# Cigna Choice Fund Health Reimbursement Account (HRA)



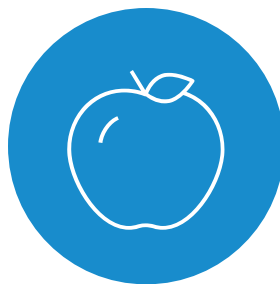
## Health Plan:

- Open Access Plus (OAP)
- 802,700 Doctors/Spec
- 15,200 Facilities



## Deductibles:

\$1,750 Individual  
\$2,500 ee + sp Or ee+ child(ren)  
\$3,250 Family



## Preventive care\*\*:

Covered at 100% (in-network)



## Pharmacy\*\*\*:

Coverage provided by Express Scripts.  
  
Pharmacy expenses Accumulate to the overall plan Out-of-Pocket Maximum



## HRA rollover:

100% of remaining balance up to the following max:  
\$5,000 Individual  
\$4,500 EE + SP or EE + Child(ren)  
\$4,000 Family

\*Network size based on Cigna directory data as of October 2014 and is subject to change.

\*\*Some preventive services may not be covered under your plan. For example, immunizations for travel are generally not covered. Other non-covered preventive services/supplies may include any service or device that is not medically necessary or services/supplies that are unproven (experimental or investigational). See your enrollment materials for details.

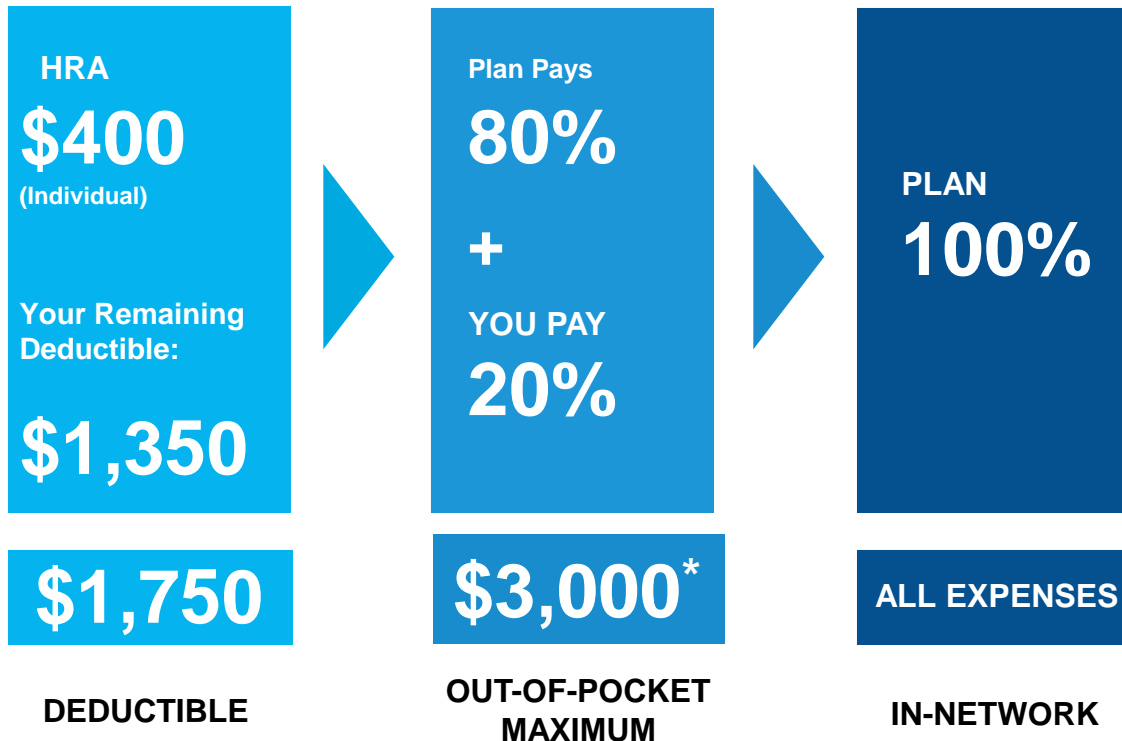
\*\*\*Health benefit plans vary, but in general to be eligible for coverage a drug must be approved by the Food and Drug Administration (FDA), prescribed by a health care professional, purchased from a licensed pharmacy and medically necessary. If your plan provides coverage for certain prescription drugs with no cost-share, you may be required to use an in-network pharmacy to fill the prescription. If you use a pharmacy that does not participate in your plan's network, your prescription may not be covered, or reimbursement may be limited by your plan's copayment, coinsurance or deductible requirements. See your enrollment materials for details.]

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# How your HRA works- Individual

inVentiv  
Contribution



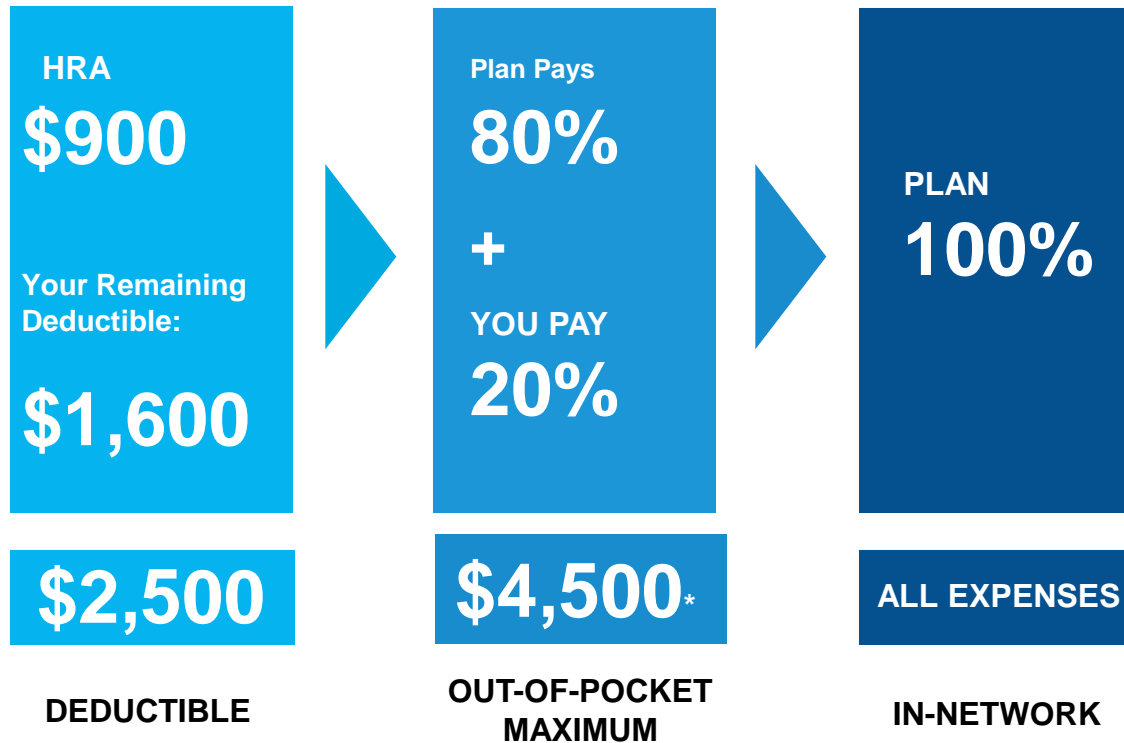
**\*Your deductible is included in the Out-of-Pocket Maximum  
In-Network Preventive care is covered by the plan at 100%**

\*Includes deductible. Your out-of-pocket costs may exceed the amount shown if you choose to receive care out-of-network. All plans have exclusions and limitations. For costs and details of coverage, see your enrollment materials.



# How your HRA works-EE + Spouse or EE + Child(ren)

inVentiv  
Contribution



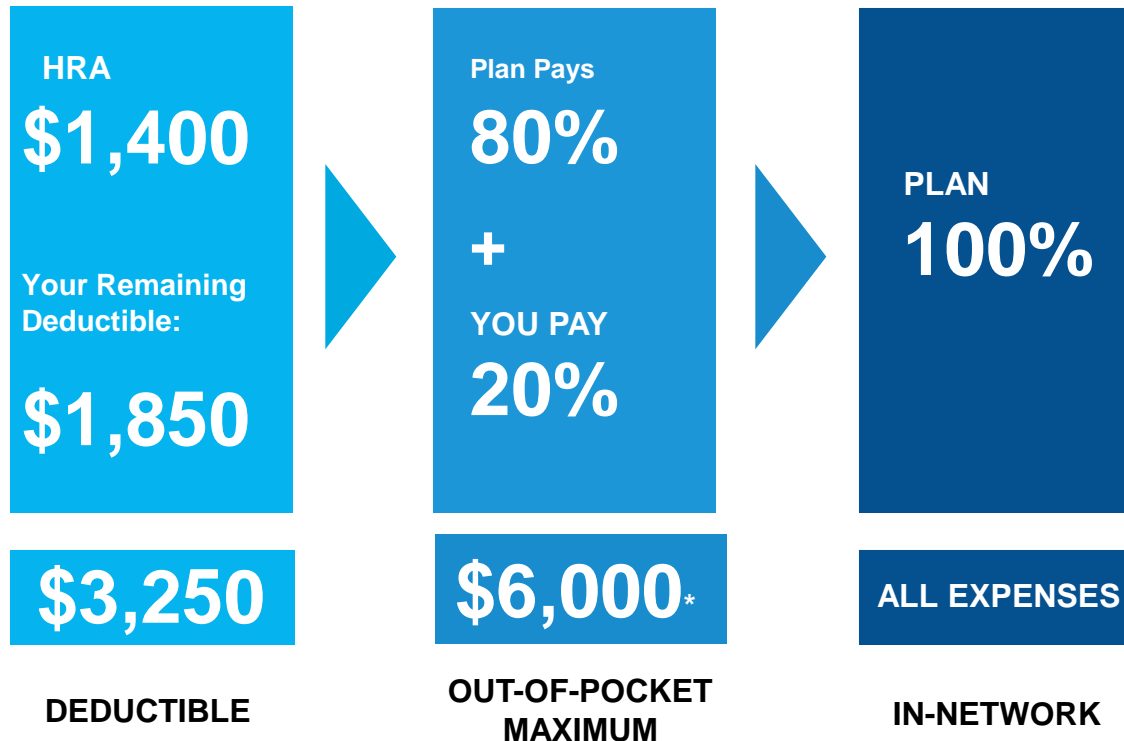
**\*Your deductible is included in the Out-of-Pocket Maximum  
In-Network Preventive care is covered by the plan at 100%**

\*Includes deductible. Your out-of-pocket costs may exceed the amount shown if you choose to receive care out-of-network. All plans have exclusions and limitations. For costs and details of coverage, see your enrollment materials.



# How your HRA works- Family

inVentiv  
Contribution



**\*Your deductible is included in the Out-of-Pocket Maximum  
In-Network Preventive care is covered by the plan at 100%**

\*Includes deductible. Your out-of-pocket costs may exceed the amount shown if you choose to receive care out-of-network. All plans have exclusions and limitations. For costs and details of coverage, see your enrollment materials.



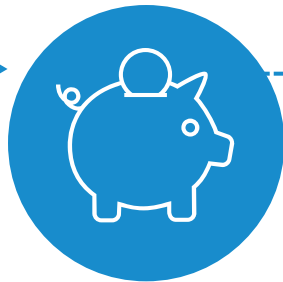
# How your medical claims are paid



Sick visit to an in-network doctor/hospital/facility – receive discounted rate for Cigna plan.

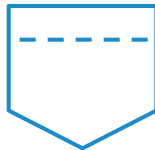


Cigna receives the claim from your doctor and processes it based on the HRA plan deductible, covered expenses and Cigna-negotiated discounts.

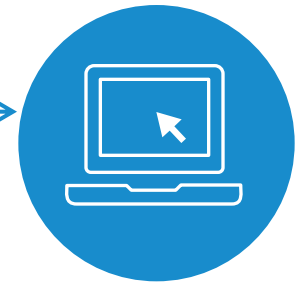


With AutoPay, Cigna automatically pays the doctor from your HRA.

If there isn't enough to cover the total cost, you may need to pay with personal funds.



**An explanation of benefits (EOB) shows:** Doctor's fee, Cigna discount, amount billed, amount deducted from HRA, amount paid, remaining HRA balance, and what you saved. EOB preference settings (mail or electronic) are on **myCigna.com**.



Balance and transaction information available:

- On **myCigna** – via myCigna.com or the myCigna Mobile App
- By email alert
- By calling Cigna customer service using the number on the back of your ID card – 24/7/365





# meet Carlos

- Single, mid-30s
- Works and plays hard
- Healthy
- Occasional sports injury



## Here's how the Choice Fund HRA works for Carlos

Year 1

### Carlos' beginning HRA balance

\$400

Carlos receives an annual preventive care exam, from his in-network doctor, that's covered 100% by his health plan.

\$0

He also receives care for his sports injuries, including an urgent care visit.

\$200 (applied to the deductible)

### Medical expenses

\$200

The HRA pays first

– \$200

### Carlos pays

\$0

Carlos' ending HRA balance

\$200

# meet Carlos

- Single, mid-30s
- Works and plays hard
- Healthy
- Occasional sports injury



## Here's how the Choice Fund HRA works for Carlos

Year 2

Carlos' carryover from year 1	\$200
Employer's contribution	\$400
<b>Carlos' beginning balance</b>	<b>\$600</b>
Carlos receives an annual preventive care exam from his in-network doctor that's covered 100% by his health plan	\$0
He visits two specialists	\$300
And has an outpatient procedure on his knee	\$2,000
<b>Medical expenses</b>	<b>\$2,300</b>
The HRA pays first	– \$600
Carlos pays to meet his \$1,750 deductible	– \$1,150
<b>Remaining costs</b>	<b>\$550</b>
Carlos' health plan pays 80%	– \$440
Carlos pays his 20% coinsurance	– \$110
<b>Carlos' total out-of-pocket costs for the year</b>	<b>\$1,260</b>
Carlos' ending HRA balance	\$0



# Planning for your medical expenses

Cigna Choice Fund with HRA			
	Single	EE+SP or EE+Ch	Family
<b>Deductible</b>	\$1,750	\$2,500	\$3,250
<b>Out-of-pocket maximum</b>	\$3,000 In-network \$4,000 Out-of-network	\$4,500 In-Network \$6,000 Out-of-Network	\$6,000 In-network \$8,000 Out-of-network
<b>HRA contribution from inVentiv</b>	\$400	\$900	\$1,400
<b>Lifetime maximum</b>	Unlimited	Unlimited	Unlimited

\*If you choose to receive care outside of your plan's network, only covered expenses will be applied to your deductible – subject to your plan's Maximum Reimbursable Charge provisions. See your enrollment materials for more information about costs and details about covered and non-covered services, including plan exclusions and limitations.





OFFERED  
THROUGH



Cigna®

**A DOCTOR  
IS ALWAYS**



**Access to affordable, quality, non-urgent care when you need it – 24/7/365**

Offered by: Connecticut General Life Insurance Company or Cigna Health and Life Insurance Company.



**A doctor is  
always in**

**MDLIVE™**

OFFERED  
THROUGH



MDLIVE provides immediate, on-demand 24/7/365 access to affordable, quality non-urgent care through a national network of licensed, board-certified U.S.-based doctors, including pediatricians.



**Online video  
consultations**



**Phone  
consultations**



**Email communication,  
post consultation**



**Prescription services**  
(sent directly to a pharmacy)

Health care services are delivered by MDLIVE participating doctors and not by Cigna.



# Why telehealth?



## Health care challenges



- ✓ Lengthy wait for appointments
- ✓ Need to miss work for appointments
- ✓ Hours of waiting in crowded emergency rooms
- ✓ Difficulty finding affordable care off-hours

## MDLIVE telehealth solution



- ✓ Doctor appointments usually in less than an hour
- ✓ Adult and pediatric care
- ✓ Convenience – no need to leave the house or work
- ✓ Cost efficiency
  - Pay \$38 until deductible is met, then pay coinsurance amount\*

\*All major credit and debit cards accepted, including HSA Debit Cards, Pay Pal also accepted.



# Conditions treated by MDLIVE doctors

**MDLIVE™**

OFFERED THROUGH



## General health

- Acne
- Allergies
- Bronchitis
- Cold & flu
- Fever
- Gout
- Headache
- Infections
- Joint aches & pains
- Nausea & vomiting
- Pink eye
- Rashes
- Sinus infection
- Sore throat
- Sunburn
- Urinary tract infection

## Pediatric care

- Cold & flu
- Constipation
- Ear infection
- Fever
- Nausea & vomiting
- Pink eye



# How it works

**MDLIVE™**

OFFERED  
THROUGH



Register with MDLIVE at [www.MDLIVE.com/inventiv](http://www.MDLIVE.com/inventiv) to set up your account.

## BY PHONE



### Step 1: Call toll-free

Patient calls toll-free hotline available 24/7/365 including holidays.



### Step 2: Speak with a coordinator

A consultation coordinator locates the next available doctor and prepares patient for the consultation.



### Step 3: Speak with the doctor

Once an available doctor is located, the system automatically calls and connects the doctor to the patient.

## BY VIDEO CONFERENCE



### Step 1: Visit website

Patient visits website and logs in with username and password.



### Step 2: Find a doctor

System helps the patient search for a doctor by a criteria, such as specialty, language, gender, location, or simply finds the next available doctor.



### Step 3: See the doctor online

Once an available doctor is located, the system automatically connects the doctor to the patient.





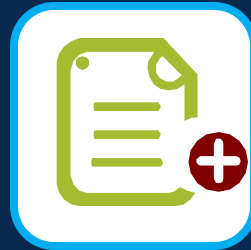
# After each appointment

**MDLIVE™**

OFFERED  
THROUGH



Patient receives discharge instructions (via patient portal and secure email).



Personal health record gets updated with consult information.



Patient can elect for consultation history to be sent to personal doctor.



# CIGNA EAP

Offered by Cigna Health and Life Insurance Company or Connecticut General Life Insurance Company

**Together, all the way.<sup>SM</sup>**



# EAP Benefits Overview

# No matter what you need, Chances are we can help.

- Effective 1/1/2016
- Confidential
- 24/7 toll-free access
- Prepaid benefit offered at no cost to employees
- Available to employees (FT, PT, Temp & COBRA) and anyone living in the household, regardless of enrollment in inVentiv benefits
- [www.cignabehavioral.com](http://www.cignabehavioral.com) for web-based resources and tools

- Crisis triage and assistance
- Face-to-face EAP counseling
  - Up to 3 sessions per issue per person
  - Call for authorization and referrals to nationwide Cigna EAP network or submit online authorization through provider search tool
  - Nationwide Cigna EAP network

- Unlimited telephonic consultation
  - Convenience and ease
  - Immediate support for urgent concerns
  - Scheduled telephone appointments with same clinician
- Work/Life resources and referral
  - Child care, eldercare, pet care, etc.
- Alzheimer’s Association tools
- Financial consultation services
- Legal consultation services
- ID Theft & Fraud Support
- Awareness resources and seminars
- Monthly EAP webcasts
- Monthly Work/Life webinars
- Stress management and resilience tools

**855.281.1204, say ‘EAP’**  
**[www.cignabehavioral.com](http://www.cignabehavioral.com) employer ID: inventiv**



# HOW WE CAN HELP

tools and resources



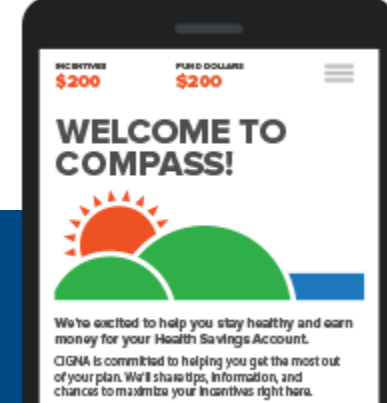
# Be Prepared-Carry a Compass.

- Compass is a new web tool that will give you personalized direction on how to get the most from your health plan.

- You can easily access Compass from any device
- Download the App



- Compass proactively sends you recommendations on how to:
  - Pay less when you receive care
  - Choose quality doctors and hospitals
  - Get healthier with timely tips and reminders



# Saving you time

## By phone –855.281.1204

Call us anytime day or night – live, 24/7 customer service, 365 days a year

- Find a doctor, hospital, or other health facility whenever you need one – online, by phone or on the go with any web-enabled device\*
- During Open Enrollment, **visit [www.cigna.com/inventyourhealth](http://www.cigna.com/inventyourhealth)**
- Starting January 1, log in to **myCigna.com** or the **myCigna Mobile App\*** and find useful tools to help you:
  - Manage and track claims
  - Find cost and quality ratings for doctors and hospitals
  - Track your account balances and deductibles
- Keep track of your health history and records with an online personal health record



**Talk with a trained nurse when you can't reach your doctor**



**No claim forms needed in-network**



\* The downloading and use of the myCigna Mobile App is subject to the terms and conditions of the App and the online stores from which it is downloaded. Your carrier's standard mobile phone and data usage charges apply.

# Helping you understand and track your health care expenses



## Explanation of benefits (EOB)

- Clearly shows how and when claims were paid
- Receive them in the mail or electronically depending on your preferences
- Available online at **myCigna.com** with email alerts once each claim is processed



## Online health statement

- Available on **myCigna.com**, you can get an exact snapshot of the information that you want – in real time, on-demand and online
- Customize your statement view according to: date range, claim type, transaction type, family member/self and more
- It's easy to print and save each statement you create to your computer



# Helpful Enrollment Reminders



## Open Enrollment November 2-November 20

- Active Enrollment! Must enroll to have benefits effective January 1, 2016

## For More Information or Questions

- Visit [www.cigna.com/inventyourhealth](http://www.cigna.com/inventyourhealth)
- Call 855.281.1204. Available 24/7/365

## Be on the lookout for a Home Mailing

- Additional enrollment information with Rates

## Complete your Biometric Screening by November 20<sup>th</sup>



\*Contributions to your HSA that you receive from your employer and incentives count toward your maximum.



Rates will vary by plan design including the amount of plan deductibles, coinsurance, and out-of-pocket and lifetime maximums.

All health insurance policies and health benefit plans have exclusions and limitations. For costs and details of coverage, see your enrollment materials. The information in this presentation summarizes the highlights of your plan. For a complete list of both covered and not covered services, including benefits required by your state, see your employer's group insurance certificate, summary plan description or group service agreement – the official plan documents. If there are any differences between the information in this presentation and the plan documents, the information in the plan documents takes precedence.

Health care professionals who participate in Cigna's network are independent contractors solely responsible for the treatment provided and are not agents of Cigna. The HSA provider and/or trustee/custodian is responsible for all HSA services, transactions and related activities. Cigna and your employer are not responsible for any aspects of the HSA services, administration or operation.

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