



HELP IS HERE

Caring that you make the right choice

Need help deciding if Cigna coverage is right for you?
The information you're looking for is just a phone call away!

A helpful, friendly resource

Learn more about the features and advantages of Cigna coverage.

Call today and speak with a knowledgeable enrollment specialist for:

- Information on specific plans.
- Help finding participating doctors and other health care professionals.
- Comparisons of all Cigna products and resources available to you.

This service is limited to providing information only. Enrollment cannot be completed through this line. Please contact your employer for enrollment instructions.



We invite you to call us during your enrollment period. We look forward to hearing from you.

For questions about Cigna coverage and enrollment, call us 24/7 at 800.564.7642.

Together, all the way.SM



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

All group insurance policies and health benefit plans contain exclusions and limitations. For costs and complete details of coverage, see your plan documents.

All Cigna products and services are provided exclusively by or through operating subsidiaries of Cigna Corporation, including Cigna Health and Life Insurance Company (CHLIC), Connecticut General Life Insurance Company (CGLIC), Cigna Behavioral Health, Inc., and HMO or service company subsidiaries of Cigna Health Corporation and Cigna Dental Health, Inc., including Cigna HealthCare of Arizona, Inc., Cigna HealthCare of California, Inc., Cigna HealthCare of Colorado, Inc., Cigna HealthCare of Connecticut, Inc., Cigna HealthCare of Florida, Inc., Cigna HealthCare of Georgia, Inc., Cigna HealthCare of Illinois, Inc. (IL & IN), Cigna HealthCare of Indiana, Inc., Cigna HealthCare of St. Louis, Inc. (MO, KS & IL), Cigna HealthCare of North Carolina, Inc., Cigna HealthCare of New Jersey, Inc., Cigna HealthCare of South Carolina, Inc., Cigna HealthCare of Tennessee, Inc. (TN & MS), Cigna HealthCare of Texas, Inc., Cigna Dental Health Plan of Arizona, Inc., Cigna Dental Health of California, Inc., Cigna Dental Health of Colorado, Inc., Cigna Dental Health of Delaware, Inc., Cigna Dental Health of Florida, Inc., **a Prepaid Limited Health Services Organization licensed under Chapter 636, Florida Statutes**, Cigna Dental Health of Kansas, Inc. (KS & NE), Cigna Dental Health of Kentucky, Inc. (KY & IL), Cigna Dental Health of Maryland, Inc., Cigna Dental Health of Missouri, Inc., Cigna Dental Health of New Jersey, Inc., Cigna Dental Health of North Carolina, Inc., Cigna Dental Health of Ohio, Inc., Cigna Dental Health of Pennsylvania, Inc., Cigna Dental Health of Texas, Inc., and Cigna Dental Health of Virginia, Inc. OK policy forms: Medical - GM6000 C1 et al (CGLIC); HP-APP-1 et al (CHLIC). Dental - Indemnity/PPO: GM6000 ELI288 et al (CGLIC), DHMO: GM6000 DEN201V1 (CGLIC), Cigna Dental Care Specialty Access: GM6000 DEN200V1 (CGLIC); Indemnity/Dental PPO: HP-POL99 (CHLIC), DHMO & Specialty Access: HP-POL115 (CHLIC). The Cigna name, logo, and other Cigna marks are owned by Cigna Intellectual Property, Inc.

584438 k 10/14 © 2014 Cigna. Some content provided under license.

Greetings:

We are pleased to be the new administrator of the Connecticut State Teacher's Retirement Board Dental Plan. Beginning January 1, 2017, you are eligible to receive quality dental care through the Total Cigna Dental PPO (DPPO) plan. Below are a few important points to remember about your Total Cigna DPPO plan.

Pre Enrollment Line

Call the Pre-Enrollment Information Line toll-free 1.800.564.7642, 24 hours a day, 7 days a week. The line will be open **11/01/16**. A knowledgeable Enrollment Specialist will provide information on your dental plan as well as assistance in identifying participating providers.

Easy access to care

Our national network of dentists makes it easy to protect your smile – and your health. You can choose a dental provider from one large network directory that is easily accessible and searchable online. All of the dentists in our network meet our rigorous credentialing requirements, which are based on strict national standards. We also offer online tools to help you make more informed decisions about your dental health.

Added benefits for our DPPO customers

The Cigna Dental Oral Health Integration Program® offers enhanced dental coverage and more for dental customers with any of the following medical conditions: diabetes, heart disease, stroke, maternity, head and neck cancer radiation, organ transplants and chronic kidney disease. There's no additional charge for the program – those who qualify get reimbursed 100% of coinsurance for certain related dental procedures and are eligible for other perks.

You can also enjoy discounts on health-related products and services through Cigna Healthy Rewards®.²

We're there for you – when and how you need us.

After January 1, 2017 you can register for an account on **myCigna.com**. Once registered, you have access to personalized benefit information such as:

- Plan information
- Network directory of dentists
- Oral health assessments and quizzes
- Out-of-pocket dental cost estimates
- ID card information
- Claim information
- Discounts on a variety of health and wellness products and services

On the go? You can also access many of the above services with our mobile app, or you can call us 24/7 at 1.800.Cigna24 (1.800.244.6224) to speak to a live customer service representative.



ID Cards

You will receive your new dental cards in early December. Please do not disregard them as they will come in an unmarked envelop.

At Cigna, our goal is to support you and your dental health. We provide a large network of dentists, discounted prices on quality dental care, and the tools you need to help you make informed decisions about your dental health. Welcome to Cigna DPPO. We look forward to giving you a new reason to smile.

Sincerely,

Get the myCigna Mobile App from the App Store or Google Play™



1. January 2015 projection, as of April 2014.

2. Cigna Healthy Rewards® provides discounts on programs and services to help you maintain and improve your health and wellness.⁴ Discounts are available from nationally-recognized retailers for: weight management and nutrition, fitness, tobacco cessation, vision and hearing care, alternative medicine, healthy lifestyle products, and dental care. To learn more about the offered discounts, visit: Cigna.com/healthy-rewards Password: savings

The Apple logo is a trademark of Apple Inc., registered in the U.S. and other countries. App Store is a service mark of Apple Inc. Android and Google Play are trademarks of Google Inc. The downloading and use of the App is subject to the terms and conditions of the App and the online stores from which it is downloaded. Standard mobile phone carrier and data usage charges apply. Actual Mobile App features available may vary depending on your plan. The listing of a health care professional or facility in the mobile directories available through the myCigna Mobile App does not guarantee that the services rendered by that professional or facility are covered under your specific dental plan. Check your official plan documents, or call the number listed on your ID card, for information about the services covered under your plan benefits.

All group dental plans and insurance policies have exclusions and limitations. For costs and complete details of coverage, see your plan documents.

“Cigna” and the “Tree of Life” logo are registered service marks of Cigna Intellectual Property, Inc., licensed for use by Cigna Corporation and its operating subsidiaries. All products and services are provided by or through such operating subsidiaries and not by Cigna Corporation. Such operating subsidiaries include Connecticut General Life Insurance Company (CGLIC), Cigna Health and Life Insurance Company, and Cigna Dental Health, Inc. and its subsidiaries. Cigna Dental PPO plans are underwritten or administered by CGLIC or CHLIC, with network management services provided by Cigna Dental Health, Inc. and certain of its subsidiaries. In Arizona and Louisiana, the insured Dental PPO plan offered by CGLIC is known as the “CG Dental PPO”. In Texas, the Cigna Dental PPO product is referred to as the Cigna Dental Choice Plan.



Cigna Dental Benefit Summary

CT State Teacher's Retirement Board

Effective January 1, 2017



All deductibles, plan maximums, and service specific maximums (dollar and occurrence) cross accumulate between in and out of network.

Cigna Dental PPO				
Network	Total Cigna DPPO		Out-of-Network	
Calendar Year Maximum (Class I, II & III expenses)	\$2500		\$2500	
Annual Deductible Individual	\$50		\$50	
Reimbursement Levels	Based on Reduced Contracted Fees		80th percentile of Reasonable & Customary Allowances	
Benefits	Plan Pays	You Pay	Plan Pays	You Pay
Class I: Preventive & Diagnostic Oral Exams Routine Cleanings Full Mouth X-rays Bitewing X-rays Panoramic X-ray Periapical X-rays Fluoride Application Sealants Space Maintainers Emergency Care to Relieve Pain	100% After Deductible	0% After Deductible	100% After Deductible	0% After Deductible
Class II: Basic Restorative Fillings Root Canal Therapy / Endodontics Osseous Surgery Periodontal Scaling and Root Planing Oral Surgery – Simple Extractions Oral Surgery – All Except Simple Extractions Anesthetics Surgical Extractions of Impacted Teeth Brush Biopsy	80% After Deductible	20% After Deductible	80% After Deductible	20% After Deductible
Class III: Major Restorative Crowns / Inlays / Onlays Dentures Bridges Prosthesis Over Implant Stainless Steel/Resin Crowns Repairs to Bridges, Crowns and Inlays Denture Adjustments and Repairs	50% After Deductible	50% After Deductible	50% After Deductible	50% After Deductible
Class IV: Orthodontia	Not Covered		Not Covered	
Missing Tooth Limitation Provision	No Limitation			
Late Entrant Limit Provision	No Coverage			
Alternate Benefit Provision	When more than one covered Dental Service could provide suitable treatment based on common dental standards, Cigna HealthCare will determine the covered Dental Service on which payment will be based and the expenses that will be included as Covered Expenses.			
Pretreatment Review	Pretreatment review is available on a voluntary basis when extensive dental work in excess of \$200 is proposed.			

The Cigna Dental Oral Health Integration Program (OHIP)[®] is designed to provide enhanced dental coverage for customers with certain eligible medical conditions. Eligible conditions for the program include cardiovascular disease, cerebrovascular disease (stroke), diabetes, maternity, chronic kidney disease, organ transplants, and head and neck cancer radiation. The program provides 100% coverage for certain dental procedures, guidance on behavioral issues related to oral health and discounts on prescription and non-prescription dental products. For more information and to see the complete list of eligible conditions, go to www.mycigna.com or call customer service 24/7 at 1.800.CIGNA24.

Cigna Dental PPO Exclusions and Limitations

Procedure	Limitations
Oral Exams	2 per calendar year
Prophylaxis (Cleanings)	2 per calendar year
Fluoride Application	1 per calendar year for people under 19
X-Rays (routine)	Bitewings: 2 per calendar year
X-Rays (non-routine)	Full mouth: 1 every 36 consecutive months; Panorex: 1 every 36 consecutive months
Periodontal Scaling and Root Planing	Various limitations depending on the service
Periodontal Surgery	Various limitations depending on the service
Bridges, Crowns and Inlays	Replacement every 5 years
Dentures and Partial	Replacement every 5 years
Relines, Rebases and Adjustments	Covered if more than 6 months after installation
Bridge and Denture Repairs	Reviewed if more than once
Sealants	Limited to posterior tooth. 1 treatment per tooth every 36 consecutive months for people under 14
Space Maintainers	Limited to non-orthodontic treatment
Prosthesis Over Implant	1 per 60 consecutive months if unserviceable and cannot be repaired. Benefits are based on the amount payable for non- precious metals. No porcelain or white/tooth colored material on molar crowns or bridges

Benefit Exclusions

Listed below are the services or expenses which are NOT covered under your Dental Plan and which are your responsibility at the dentist's Usual Fees. There is no coverage for:

- Services performed primarily for cosmetic reasons; veneers of porcelain or acrylic materials on crowns or pontics on or replacing the upper and lower first, second and third molars.
- Instruction for plaque control, oral hygiene and diet; experimental or investigational procedures and treatments; dental services that do not meet common dental standards.
- Replacement of a lost or stolen appliance; replacement of a bridge or denture within five years following the date of its original installation; replacement of a bridge or denture which can be made useable according to accepted dental standards.
- Procedures, appliances or restorations, other than full dentures, whose main purpose is to change vertical dimension, diagnose or treat conditions of TMJ, stabilize periodontally involved teeth, or restore occlusion.
- Surgical implant of any type; bite registrations; precision or semi-precision attachments; splinting; services that are deemed to be medical services; services and supplies received from a hospital.
- For charges which would not have been made if the person had no insurance; for charges for unnecessary care, treatment or surgery.
- Charges which the person is not legally required to pay; charges in excess of the reasonable and customary allowances; charges made by a hospital which performs services for the U.S. Government if the charges are directly related to a condition connected to a military service.
- Procedures performed by a dentist who is a member of the covered person's family (covered person's family is limited to a spouse, siblings, parents, children, grandparents, and the spouse's siblings and parents); to the extent that payment is unlawful where the person resides when the expenses are incurred; Any injury resulting from, or in the course of, any employment for wage or profit; any sickness covered under any workers' compensation or similar law.
- To the extent that you or any of your dependents is in any way paid or entitled to payment for those expenses by or through a public program, other than Medicaid; to the extent that benefits are paid or payable for those expenses under the mandatory part of any auto insurance policy written to comply with a "no-fault" insurance law or an uninsured motorist insurance law. Cigna HealthCare will take into account any adjustment option chosen under such part by you or any one of your dependents.
- In addition, these benefits will be reduced so that the total payment will not be more than 100% of the charge made for the Dental Service if benefits are provided for that service under this plan and any medical expense plan or prepaid treatment program sponsored or made available by your Employer.

This benefit summary highlights some of the benefits available under the proposed plan. A complete description regarding the terms of coverage, exclusions and limitations, including legislated benefits, will be provided in your insurance certificate or plan description. Benefits are insured and/or administered by Connecticut General Life Insurance Company. "Cigna HealthCare" refers to various operating subsidiaries of Cigna Corporation. Products and services are provided by these subsidiaries and not by Cigna Corporation. These subsidiaries include Connecticut General Life Insurance Company, Cigna Health and Life Insurance Company, and HMO or service company subsidiaries of Cigna Health Corporation and Cigna Dental Health, Inc.

DPPO insurance coverage is set forth on the following policy form numbers: AR: HP-POL77; CA: HP-POL57; CO: HP-POL78; CT: HP-POL58; DE: HP-POL79; FL: HP-POL60; ID: HP-POL82; IL: HP-POL62; KS: HP-POL84; LA: HP-POL86; MA: HP-POL 63; MI: HP-POL88; MO: HP- POL65; MS: HP-POL90; NC: HP-POL96; NE: HP-POL92; NH: HP-POL94; NM: HP-POL95; NV: HP-POL93; NY: HP-POL67; OH: HP-POL98; OK: HP-POL99; OR: HP-POL68; PA: HP-POL100; RI: HP-POL101; SC: HP-POL102; SD: HP-POL103; TN: HP-POL69; TX: HP-POL70; UT: HP-POL104; VA: HP-POL72; VT: HP-POL71; WA: POL-07/08; WI: HP-POL107; WV: HP-POL106; and WY: HP-POL108.

"Cigna," the "Tree of Life" logo and "Cigna Dental Care" are registered service marks of Cigna Intellectual Property, Inc., licensed for use by Cigna Corporation and its operating subsidiaries. All products and services are provided by or through such operating subsidiaries and not by Cigna Corporation. Such operating subsidiaries include Connecticut General Life Insurance Company (CGLIC), Cigna Health and Life Insurance Company (CHLIC), Cigna HealthCare of Connecticut, Inc., and Cigna Dental Health, Inc. and its subsidiaries. Cigna Dental PPO plans are underwritten or administered by CGLIC or CHLIC, with network management services provided by Cigna Dental Health, Inc. and certain of its subsidiaries. In Arizona and Louisiana, the insured Dental PPO plan offered by CGLIC is known as the "CG Dental PPO". In Texas, the insured dental product is referred to as the Cigna Dental Choice Plan. Cigna Dental Care (DHMO) plans are underwritten or administered by Cigna Dental Health Plan of Arizona, Inc., Cigna Dental Health of California, Inc., Cigna Dental Health of Colorado, Inc., Cigna Dental Health of Delaware, Inc., Cigna Dental Health of Florida, Inc., a Prepaid Limited Health Services Organization licensed under Chapter 636, Florida Statutes, Cigna Dental Health of Kansas, Inc. (Kansas and Nebraska), Cigna Dental Health of Kentucky, Inc., Cigna Dental Health of Maryland, Inc., Cigna Dental Health of Missouri, Inc., Cigna Dental Health of New Jersey, Inc., Cigna Dental Health of North Carolina, Inc., Cigna Dental Health of Ohio, Inc., Cigna Dental Health of Pennsylvania, Inc., Cigna Dental Health of Texas, Inc., and Cigna Dental Health of Virginia, Inc. In other states, Cigna Dental Care plans are underwritten by CGLIC, CHLIC, or Cigna HealthCare of Connecticut, Inc. and administered by Cigna Dental Health, Inc.

MAKE THE MOST OF YOUR DENTAL PLAN



Programs and services that can help

Nothing is more important than your health. That's why there's **myCigna.com** – your online home for assessment tools, plan management, dental health information and much more. Once you've enrolled in a Cigna-administered dental plan, you can use **myCigna.com** to:

- › **Choose** dentists and create, download and print a personal directory.
- › **Verify** plan details such as coverage, coinsurance/ copays and deductibles (the amount you pay before your plan starts to pay).
- › **Print** a dental ID card.
- › **Get** the forms you need.
- › **Access** dental health information through WebMD® Dental Health Resource Center.
- › **Estimate** your dental costs before your next visit.

Get to know your oral health

Are you at risk for gum disease? Knowing the answer to this question could help your overall health. That's because research shows an association between gum disease and other health conditions like diabetes, heart disease and stroke.

Think cavities are just for kids? Think again. Many adults have untreated cavities, 27% of those 20–64 years old and 20% of those 65 years and older.¹

Assess your risks

The Periodontal (gum) Disease and Cavity Risk Assessment Tools are designed to help you and your dentist identify factors that might increase your risks for gum disease and cavities. The quizzes are quick and easy. When you complete the quizzes, you'll get detailed score sheets that tell you whether you are low risk, low to moderate, moderate risk or high risk for gum disease or tooth decay, depending on which quiz you've taken. Take the quizzes today and share the results with your dentist at your next dental checkup.

Please note that these tools serve as a guideline to assess your risks for cavities and gum disease. It's important to visit your dentist on a regular basis to discuss your oral health.

Together, all the way.®



Prevention is key

Regular dental visits may do more than brighten your smile. Research shows receiving regular dental care often catches minor problems before they become major and expensive to treat. Practice prevention and take advantage of your plan's preventive care services. Certain services may be covered at low cost or no cost to you when you visit a network dentist. Covered services* may include, but are not limited to:

- › Oral exams
- › Cleanings
- › Fluoride treatments
- › X-rays
- › Oral cancer screenings

*The following is not an exhaustive list of exclusions and limitations. Plans may vary. For the specific limitations and exclusions of your employer's plan, see your employer's plan documents.

We're here when you need us

We know that sometimes you need us at odd hours – late at night, on the weekend or during a national holiday. Sometimes your questions just can't wait for “normal business hours.”

- › “I'm planning to spend the winter down south. Can you help me find a network dentist in the area?”
- › “My dentist told me I need a root canal. Does my dental plan cover this?”
- › “My husband has a painful toothache, but he's in Phoenix on a golf trip. Can you help me find a dentist?”

That's why our customer service hours include weekdays, Saturdays, Sundays and holidays. Call us at **1.800Cigna24 (1.800.244.6224)** any time you need us – we'll be there. We're on the clock for you 24 hours a day, 7 days a week, 365 days a year.

Health and wellness discounts

Save money when you purchase health and wellness products and services through the Cigna Healthy Rewards® program.² Programs include:

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



1. CDC, National Center for Health Statistics, NCHS Data Brief, May 2015. “Dental Caries and Tooth Loss in Adults in the United States, 2011 – 2012”. <http://www.cdc.gov/nchs/data/databriefs/db197.pdf>.

2. Healthy Rewards is a discount program. If your plan includes coverage for any of these services, this program is in addition to, not instead of, your plan benefits. Healthy Rewards programs are separate from your benefits. **A discount program is NOT insurance, and you must pay the entire discounted charge.** Some Healthy Rewards programs are not available in all states and programs may be discontinued at any time.

The dentists who participate in the Cigna network are independent practitioners solely responsible for the treatment provided to their patients. They are not agents of Cigna.

All Cigna products and services are provided exclusively by or through operating subsidiaries of Cigna Corporation, including Cigna Health and Life Insurance Company and Cigna Dental Health, Inc. and its subsidiaries. The Cigna name, logo, and other Cigna marks are owned by Cigna Intellectual Property, Inc.