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CIGNA Health Savings Plans®

Economical. Our extensive high deductible Health Savings Plans allow you to use a tax-advantaged Health Savings Account (HSA) to help pay for your current medical expenses or save for future medical expenses.

Preventive care. Covered at 100% for most services.

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.

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CIGNA HealthCare of New York, Inc. is licensed and regulated in all states. CIGNA HealthCare of New York, Inc. is a licensed and regulated health maintenance organization and Health Maintenance Organization (HMO) for New York State.

CIGNA HealthCare of New York, Inc. is licensed as a Health Maintenance Organization (HMO) in all states except New York.

CIGNA HealthCare of New York, Inc. is licensed as an HMO in New York State.

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CONNECTICUT INDIVIDUAL & FAMILY PLANS

CIGNA HEALTH SAVINGS PLANS®

PLN COMPARISON
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CONNECTICUT INDIVIDUAL & FAMILY PLANS
CIGNA HEALTH SAVINGS PLANS®
Here are some basic terms that you should know about your health care plan.

**CONSUMER INFORMATION**

- **Out-of-Network**: A provider who does not participate in the CIGNA network.
- **In-Network**: A provider that participates in the CIGNA network.
- **Deductible**: The dollar amount that individuals must pay for services before the plan begins to pay for covered services.
- **Copay**: A flat per service charge that individuals are responsible to pay for services such as doctor visits or prescription drugs.
- **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 individual is responsible for.

**COMMONLY USED HEALTH CARE WORDS**

**INDIVIDUAL & FAMILY PLANS**

<table>
<thead>
<tr>
<th>PLAN FEATURES</th>
<th>Health Savings 2500</th>
<th>Health Savings 3500</th>
<th>Health Savings 5000</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Annual Deductible</strong></td>
<td>$2,500/0/3,000</td>
<td>$2,500/0/3,000</td>
<td>$2,500/0/3,000</td>
</tr>
<tr>
<td><strong>Annual Out-of-Pocket Maximum</strong></td>
<td>$5,000/0/6,000</td>
<td>$5,000/0/6,000</td>
<td>$5,000/0/6,000</td>
</tr>
<tr>
<td><strong>Lifetime Maximum Benefit</strong></td>
<td>$5,000,000</td>
<td>$5,000,000</td>
<td>$5,000,000</td>
</tr>
</tbody>
</table>

**Office Visits**

- CIGNA pays 100%
- CIGNA pays 70%
- CIGNA pays 100%
- CIGNA pays 70%

**Preventive Care (Age 4 and Older)**

- CIGNA pays 100%
- CIGNA pays 50%
- CIGNA pays 100%
- CIGNA pays 50%

**Mental Health Outpatient**

- CIGNA pays 100%
- CIGNA pays 70%
- CIGNA pays 100%
- CIGNA pays 70%

**Mental Health Inpatient**

- CIGNA pays 100%
- CIGNA pays 70%
- CIGNA pays 100%
- CIGNA pays 70%

**Durable Medical Equipment**

- CIGNA pays 100%
- CIGNA pays 70%
- CIGNA pays 100%
- CIGNA pays 70%

**Calendar Year Maximum**

- CIGNA pays 100%
- CIGNA pays 70%
- CIGNA pays 100%
- CIGNA pays 70%

**Office Visits**

- Combined services and combined in- and out-of-network
- $40 maximum per visit/per person, up to 24 visits per year

**Ambulance**

- CIGNA pays 100%
- CIGNA pays 70%
- CIGNA pays 100%
- CIGNA pays 70%

**Emergency Room**

- CIGNA pays 100%
- CIGNA pays 70%
- CIGNA pays 100%
- CIGNA pays 70%

**Physical & Occupational Therapy**

- Ambulance
- Surgery in an Outpatient Hospital or Ambulatory Surgical Center
- CIGNA pays 100%
- CIGNA pays 70%
- CIGNA pays 100%
- CIGNA pays 70%

**Ambulance**

- CIGNA pays 100%
- CIGNA pays 70%
- CIGNA pays 100%
- CIGNA pays 70%

**Emergency Room**

- CIGNA pays 100%
- CIGNA pays 70%
- CIGNA pays 100%
- CIGNA pays 70%

**Surgery in an Outpatient Hospital or Ambulatory Surgical Center**

- CIGNA pays 100%
- CIGNA pays 70%
- CIGNA pays 100%
- CIGNA pays 70%

**Office Visits**

- CIGNA pays 100%
- CIGNA pays 70%
- CIGNA pays 100%
- CIGNA pays 70%

**Outpatient Lab, X-Ray, Ultrasound, CT Scan, and MRI**

- CIGNA pays 100%
- CIGNA pays 70%
- CIGNA pays 100%
- CIGNA pays 70%

**Outpatient Lab, X-Ray, Ultrasound, CT Scan, and MRI**

- CIGNA pays 100%
- CIGNA pays 70%
- CIGNA pays 100%
- CIGNA pays 70%

**Inpatient Hospital Services**

- Facility charges, physician services, and all in-hospital care
- Outpatient Lab, X-Ray, Ultrasound, CT Scan, and MRI
- $2,500/$5,000
- $5,000/$10,000
- $3,500/$7,000
- $7,000/$14,000
- $5,000/$10,000
- $10,000/$20,000

**Ambulance**

- CIGNA pays 100%
- CIGNA pays 70%
- CIGNA pays 100%
- CIGNA pays 70%

**Office Visits**

- CIGNA pays 100%
- CIGNA pays 70%
- CIGNA pays 100%
- CIGNA pays 70%

**Family Visits**

- Preventive Care (Age 4 and Older)
- All routine physicals to include immunizations, flu shot, and routine lab work
- Combined services and combined in- and out-of-network

**Mammograms, Pap Smears, PSA, Colorectal Cancer Screening**

- CIGNA pays 100%
- CIGNA pays 70%
- CIGNA pays 100%
- CIGNA pays 70%
- CIGNA pays 100%
- CIGNA pays 70%

**Outpatient Lab, X-Ray, Ultrasound, CT Scan, and MRI**

- CIGNA pays 100%
- CIGNA pays 70%
- CIGNA pays 100%
- CIGNA pays 70%

**Office Visits**

- CIGNA pays 100%
- CIGNA pays 70%
- CIGNA pays 100%
- CIGNA pays 70%

**Prescription Drug Deductible**

- Generic/Brand Name/Non-preferred Brand Name
- CIGNA pays 100%
- Not Applicable
- Not Applicable
- Not Applicable

**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.
- Outpatient care

- Any health care service provided to an individual who is not admitted to a hospital.
- Out of pocket costs

- Copayments, deductibles, coinsurance, or fees paid by an individual for health services or prescription drugs.
- Out of pocket maximum

- The most individuals will pay per year for covered health expenses before the plan pays 100% for the rest of that year.

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**Commonly Used Health Care Words**

- **Out-of-pocket costs:** (Copays, deductibles, coinsurance, or fees paid by an individual for health services or prescription drugs).
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- **Copayment (copay):** A flat per-service charge that individuals are responsible to pay for services such as doctor visits or prescription drugs.
- **Deductible:** The dollar amount that individuals must pay each year for eligible health expenses before the plan begins to pay for covered services.
- **Out-of-pocket maximum:** The most individuals will pay per year for covered health expenses before the plan pays 100% for the rest of that year.
- **Annual Deductible:** The total amount of money that individuals must pay each year for covered services before the plan begins to pay for covered services.
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