

FIND THE PLAN THAT'S RIGHT FOR YOU.



We can help with this plan guide

Selecting between the **Cigna Dental Care® (DHMO*)** and the **Dental PPO (DPPO)** plans is an important decision. Take the quick quiz below to help you decide which dental plan features are most important to you and your family. Then, read the information on the second page when you're done.

CHECK EITHER "YES" OR "NO" FOR EACH STATEMENT BELOW.	YES	NO
I am willing to receive all my dental care from a network general dentist or dental specialist in my plan's network, even if it means choosing from a smaller network.	<input type="checkbox"/>	<input type="checkbox"/>
I prefer a plan that tells me the exact dollar amount I will pay for each procedure, so I don't have to calculate percentages.	<input type="checkbox"/>	<input type="checkbox"/>
I prefer a dental plan that has no calendar year maximums , so I don't have to worry about my benefits running out if I reach a certain amount.	<input type="checkbox"/>	<input type="checkbox"/>
I prefer a dental plan with no deductibles , so I don't have to wait to reach a certain level of out-of-pocket expenses before my benefits begin.	<input type="checkbox"/>	<input type="checkbox"/>
I prefer a dental plan that has no waiting period , so my benefits start right away.	<input type="checkbox"/>	<input type="checkbox"/>
Add up the number of answers you checked in each column:	_____	_____

I answered "yes" the most. The Cigna Dental Care plan may be right for me because:

- › I'm willing to choose a Cigna Dental Care Access network general dentist to manage all of my dental health care needs, and who will refer me to any network specialists. (Referrals are not required for pediatric dentists for children under age 13 and orthodontics.**).
- › I like knowing the exact dollar amount I'll have to pay without doing calculations.
- › There are no calendar year maximums.
- › There are no deductibles.
- › My benefits start right away with no waiting periods.

Visit **Cigna.com** to see if your dentist is in the Cigna Dental Care Access Network.

I answered "no" the most. The DPPO plan may be right for me because:

- › I have the freedom to visit any licensed dentist or specialist. And I don't need a referral to visit any specialist).
- › I don't mind calculating my out-of-pocket costs based on percentages.
- › I don't mind having calendar year maximums.
- › I don't mind having a deductible.
- › My dental plan will cover eligible dental expenses after I meet any deductible and satisfy any waiting periods.

See the other side for more details.

Together, all the way.®



Offered by Cigna Health and Life Insurance Company or its affiliates.



Have questions about your dental plan options through Cigna?

Review your enrollment information in detail. If you still have questions, call us 24/7/365 at **800.Cigna24 (800.244.6224)** or visit **Cigna.com**.



* The term "DHMO" is used to refer to product designs that may differ by state of residence of enrollee including, but not limited to, prepaid plans, managed care plans, and plans with open access features. The Cigna Dental Care (DHMO) product availability varies by state and is subject to change.

**Coverage for treatment by a pediatric dentist ends on your child's 13th birthday. Effective on your child's 13th birthday, dental services generally must be obtained from an NGD.

Product availability may vary by location and plan type and is subject to change. All group dental insurance policies and dental benefit plans contain exclusions and limitations. For costs and details of coverage, review your plan documents or contact a Cigna representative.

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