

Cigna Dental Network Access®





What is Cigna Dental Network Access®?



Cigna Dental Network Access is a dental discount program that provides members access to discounted rates. Participating providers have agreed to charge members a reduced fee based on their negotiated fee schedule with Cigna Dental.

National Network

Access Points*:	155,650
Unique Dentists:	65,535
Provider Locations:	63,480

*Access points refer to the number of locations at which you can see a network dentist and unique dentists refers to the number of dentists within the network.

Discounts

Members have hassle-free access to dental discounts.

National average savings of over 35%** off average area charges

Discounts could range from 15% to 50%, with an average national savings of 35% off average area charges

**Average discount percentages are calculated by comparing nationwide average contracted rates to national average charges data. Actual savings will vary based upon procedure, geographic location, and the Cigna Dental specific contracted rate set up with the dentist/specialist.



Please note that Cigna Dental Network Access is NOT insurance.



How the Program Works

Members...

- Visit any participating network dentist and have the flexibility to change network dentists at any time
- Present your ID card to the dental office prior to receiving dental care
- Pay the discounted rate directly to the dental office with no pre-approval or paperwork necessary
- Call the toll-free number on their ID for all program-related questions

Remember, the Cigna Dental Network program is not insurance so there are:

- NO claim forms
- NO deductibles
- NO waiting periods
- NO age limits
- NO frequency limitations
- NO benefit maximums
- NO exclusions for pre-existing conditions
- NO referrals for specialty dental care



You must pay the entire discounted fee directly to the participating dentist at the time of service.

Cigna Dental Network Access is a dental discount program that provides members access to disounted fees, pursuant to schedules negotiated by Cigna Dental with participating dentists. Members are responsible for paying in full, directly to participating dentists.

Although all participating dentists go through a credentialing process to assure that they are appropriately licensed and qualified, Cigna Dental does not otherwise guarantee, nor is it responsible for, the quality of any services or products purchased by members.

Discounts could range from 15% to 50%, with an average national savings of 35%* off average area charges.

*Average discount percentages are calculated by comparing nationwide average contracted rates to national average charges data. Actual savings will vary based upon procedure, geographic location, and the Cigna Dental specific contracted rate set up with the dentist/specialist.

Procedure	Usual Fee ²	Typical Discounted Savings ³	Member Savings	Savings Percentage
Two Periodic exams (adult) ¹	\$99	\$66	\$33	33%
Two Periodic exams (child) ¹	\$99	\$66	\$33	33%
Two Routine Cleanings (adult) ¹	\$176	\$117	\$59	34%
Two Routine Cleanings (child) ¹	\$133	\$88	\$45	34%
Two Fluoride treatments (child) ¹	\$69	\$46	\$23	33%
Two Bitewing X-rays ¹	\$82	\$54	\$28	34%
One resin composite filling (1 surface anterior, adult or child)	\$150	\$99	\$51	34%
Two quadrants of periodontal scaling and root planning	\$447	\$295	\$152	34%
One Complete Denture	\$1,260	\$859	\$401	32%
Total – Average	\$302	\$203	\$99	33%

Typical Savings

Cigna Dental Network Access is a discount program that provides members access to discounted fees, pursuant to DPPO fee schedules negotiated by Cigna Dental with participating providers, which members are responsible for paying in full, directly to participating providers.

- ¹Procedure frequencies are based on Cigna Dental's recommendation for preventive oral health. Please note that these are recommendations and there are no frequency limitations.
- ²Source: Based upon 03/01/2012 08/31/2012 National Average Charges projected as of 07/01/2013. Fees vary by region.
- ³Typical discounted fees are listed for visits to participating dentists. Members are responsible for paying all applicable fees and charges directly to the dentist at the time of visit. Charges may vary from the sample listed above. Members should consult with their dentist prior to beginning any treatment.

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Limitations & Exclusions

Discounts are not available for the following:

- Services performed solely for cosmetic reasons;
- Replacement of a lost or stolen appliance;
- Procedures, appliances or restorations (except full dentures) whose main purpose is to: (a) change vertical dimension; (b) diagnose or treat conditions or dysfunction of the temporomandibular joint; (c) stabilize periodontally involved teeth; or (d) restore occlusion;
- Porcelain or acrylic veneers of crowns or pontics on, or replacing the upper and lower first, second and third molars;
- Bite registrations; precision or semiprecision attachments; or splinting;
- Instruction for plaque control, oral hygiene and diet;
- Dental services that do not meet common dental standards;
- Services that are deemed to be medical services;
- Services and supplies received from a Hospital;
- The surgical placement of an implant body or framework of any type; surgical procedures in anticipation of implant placement; any device, index, or surgical template guide used for implant surgery; treatment or repair of an existing implant; prefabricated or custom implant abutments; removal of an existing implant;
- Services or supplies received as a result of dental disease, defect or injury due to an act of war, declared or undeclared;
- To the extent that payment is unlawful where the person resides when the expenses are incurred;
- For charges which the person is not legally required to pay;
- For charges for unnecessary care, treatment or surgery;
- Services in any way paid or eligible for payment by or through a public program;
- For or in connection with experimental procedures or treatment methods not approved by the
- American Dental Association or the appropriate dental specialty society.

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HII (Health Insurance Innovations) is an independent agency.

This Plan is not available in AK, HI, MT, ND, RI, SD and WY.

Dental services not included in Cigna Dental's negotiated fee schedule may not be subject to a discount. Cigna Dental refers to Connecticut General Life Insurance Company, Cigna Health and Life Insurance Company, and Cigna Dental Health, Inc.

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