

Hospital Care wellness incentive benefit

**Wellness Treatment, Health Screening Test or
Preventive Care Incentive Benefit.**

Cigna Healthcare Hospital Care Insurance

Your Cigna HealthcareSM Hospital Care insurance plan comes with a \$100 Wellness Treatment*, Health Screening Test or Preventive Care incentive benefit. This benefit is paid for each covered person who completes at least one wellness treatment, health screening test or preventive care, as specified below. This benefit is limited to three per year per covered person.

IMPORTANT: This is a fixed indemnity policy, NOT health insurance

This fixed indemnity policy may pay you a limited dollar amount if you're sick or hospitalized.

You're still responsible for paying the cost of your care.

The payment you get isn't based on the size of your medical bill.

There might be a limit on how much this policy will pay each year.

This policy isn't a substitute for comprehensive health insurance.

Since this policy isn't health insurance, it doesn't have to include most Federal consumer protections that apply to health insurance.

Looking for comprehensive health insurance?

Visit **HealthCare.gov** or call **1.800.318.2596** (TTY: 1.855.889.4325) to find health coverage options.

To find out if you can get health insurance through your job, or a family member's job, contact the employer.

Questions about this policy?

For questions or complaints about this policy, contact your State Department of Insurance. Find their number on the National Association of Insurance Commissioners' website (naic.org) under "Insurance Departments."

If you have this policy through your job, or a family member's job, contact the employer.



* In Washington, Wellness Benefits are known as Health Screening Benefits.

Wellness treatments

- Adult immunizations
- Annual routine preventative dental exam
- Annual routine ophthalmological exam including refraction
- Cancer screenings
- Colorectal cancer screenings

Health screening tests

- Bone marrow testing
- Breast cancer blood test (CA 15-3)
- Breast ultrasound
- Chest x-ray
- Colon cancer blood test (CEA)
- Colonoscopy
- Fasting blood glucose test
- Flexible sigmoidoscopy
- Hemocult stool specimen
- Mammography

Preventive Care**

The Patient Protection and Affordable Care Act (PPACA) requires preventive health services as recommended by the following expert medical and scientific bodies:

1. The United States Preventive Services Task Force (USPSTF);
2. The Advisory Committee on Immunization Practices (ACIP);

- General health exams
- Lead poisoning screenings
- Osteoporosis screenings
- Routine gynecological exams
- Routine prostate exams
- Well child care – including visits, labs and immunizations
- Myeloma blood test (serum protein electrophoresis)
- Ovarian cancer blood test (CA125)
- Pandemic infectious disease immunization
- Pap smear for women over age 18
- Prostate-specific antigen (for prostate cancer)
- Serum cholesterol test to determine levels of HDL and LDL
- Stress test on a bicycle or treadmill
- Thermography
- Triglycerides blood test

3. The Health Resources and Services Administration (HRSA's) Bright Futures Project; and
4. HRSA and the Institute of Medicine (IOM) committee on women's clinical preventive services.

Detailed information is available at

www.healthcare.gov/coverage/preventive-care-benefits.



Benefit exclusions and limitations

Services must be provided under the direction of a physician.

To easily file your claim online:

1. Log in to myCigna.com[®]
2. Under the "Coverage" tab at the top of the screen select "Supplemental Health"
3. Scroll to the bottom of the page and click "Submit a claim"
4. Complete the online claim form

myCigna[®] also allows you to:

- Enroll in direct deposit
- View personalized Supplemental Health plan information
- Track the status of claims
- Monitor and respond to correspondence
- View Explanations of Benefits (EOBs)



****** Not all preventive care services are covered and different plans may cover different things. For example, immunizations for travel are usually not covered. See your plan materials for a complete list of covered preventive care services.

THESE POLICIES PAY LIMITED BENEFITS ONLY. THEY ARE NOT COMPREHENSIVE HEALTH INSURANCE COVERAGE AND DO NOT COVER ALL MEDICAL EXPENSES. THIS COVERAGE DOES NOT SATISFY THE "MINIMUM ESSENTIAL COVERAGE" OR INDIVIDUAL MANDATE REQUIREMENTS OF THE AFFORDABLE CARE ACT (ACA). THIS COVERAGE IS NOT MEDICAID OR MEDICARE SUPPLEMENT INSURANCE.

Product availability may vary by location and plan type and is subject to change. All group insurance policies may contain exclusions, limitations, reduction in benefits, and terms under which the policy may be continued in force or discontinued. For costs and details of coverage, contact your Cigna Healthcare representative.

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