

Cigna Healthcare DPPO

Save on your dental bills.

Want to get the most out of your dental care dollars? Make your next appointment with a dentist in the Cigna HealthcareSM network.

See the savings for yourself

Save money: With the Cigna Healthcare DPPO, you can save money when you visit a dentist in the Cigna Healthcare network since these dentists have agreed to charge Cigna Healthcare customers discounted rates.*

Save time: Dentists in the Cigna Healthcare network will submit your dental claims for you.

A tale of two crowns**

Joe and Sue, coworkers with the same Cigna Healthcare DPPO plan, both need a porcelain crown. The plan offers a **40%** benefit on crowns whether the procedure is done by an in-network dentist or not.

Sue decides to visit a Cigna Healthcare network dentist for the procedure. That network dentist has agreed to charge Cigna Healthcare customers a discounted fee for the crown: **\$650**. Applying her Cigna Healthcare benefit of 40% to the price, Sue's out-of-pocket cost would be **\$390**.

However, Joe visits an out-of-network dentist for the same procedure. This dentist has not agreed to the discounted fee, and charges **\$1,000** for a crown.

The Maximum Reimbursable Charge (MRC^{***}) for this procedure is \$950, and Joe's plan will pay 40% of the MRC, or \$380. Joe's out-of-pocket cost for his crown will total **\$620** – the difference between what his plan pays and the dentist's usual fee for that procedure.

- Sue: Saved **\$230** by staying in-network
- Joe: Saved **\$0** by visiting an out-of-network dentist

Need to find a Cigna Healthcare network dentist?

Go to **Cigna.com**, call us at **800.Cigna24 (800.244.6224)** or call your current dentist to see if he or she participates.



* Discounts on non-covered services may not be available in all states.

** For illustrative purposes only. Cigna Healthcare DPPO Network fees and national average dental charges estimated for Procedure Code D2750, Porcelain Crown Fused to High Noble Metal. Your costs and savings may be different based on your local area charges. Illustrations do not reflect any applicable deductibles or dollar maximums. Waiting periods may also apply. See your plan materials for details on your plan's coverage.

*** The MRC is the usual charge for a given procedure charged by most dentists in a given area with similar training and experience. Cigna Healthcare collects claim data to determine what is customary in a geographic area for each covered procedure, and uses that average to calculate what your dental plan will pay when you visit a non-network dentist. Each dentist decides what to charge patients for dental care. Some dentists will charge less than the MRC in their area while others will charge more. When you visit a non-network dentist, you are responsible for all charges above what your plan pays, even if that dentist's regular charge is higher than the MRC.

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 Healthcare representative.

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