



**Turn your  
dental plan into  
a growth plan.**

## **Financial Proposal**

for

# **Center Point Independent School District**

**Effective Date: September 01, 2025**

**Date: July 15, 2025**



## Cigna Dental is Your New Growth Plan.

Dental care is not just a cost of doing business. **It's an investment in your future success.** And dental benefits aren't "just dental." When provided by Cigna, your dental program can help ensure financial health, engage individual employees, nurture a healthy work culture, and prepare for the future. Cigna unlocks the full potential of your dental program to deliver more value.

### Help ensure Financial Health

We help **predict and manage financial risk** for your company while **optimizing cash flow and improving profitability**. We also help your employees manage and control their health-related finances.

- myCigna.com gives employees 24/7/365 access to value-based network search tools and information that can help them find a dentist who meets their specific, unique needs. It puts them in the driver's seat and when employees utilize myCigna, they **save an average of \$117.10 PMPY** more than those who don't, and have **6.9% more in-network claims**.<sup>1</sup>
- Cigna Dental Oral Health Integration Program<sup>®</sup> provides proactive, personalized support for customers with one of **14 medical conditions** that can be impacted by oral health risks like gum disease and cavities. Preventive care for these employees can **drive average savings of 12.2%** over five years.<sup>2</sup>
- Our **industry-leading Brighter Score technology** brings customers greater transparency and guides employees to high-value in-network dentists using myCigna.

### Engage Individual Employees

Cigna Dental is an **industry leader** in engaging customers to use their preventive dental care benefits. And when customers get preventive care, the risk of developing periodontal disease, experiencing potential medical complications or needing care in the emergency room or urgent care center is reduced.<sup>1</sup>

- Engaging customers to get important preventive dental care through proactive, automated outreach results in a **67% increase in visits**<sup>3</sup> and **31% lower future dental costs**<sup>4</sup>.
- We connect your employees to the preventive care they need—regardless of the challenges they face. This results in **30%+ more medical cost savings** for employees impacted by a high social index.<sup>4</sup>

### Nurture a Healthy Work Culture

Poor oral health directly impacts employers. Every year, **\$800M in productivity is lost** due to health-related problems, and **320.8M hours** of work/school are lost for dental care.<sup>5</sup> **92.4M of those hours are lost for unplanned or emergency dental care.**<sup>5</sup> The Cigna Dental program can help reduce lost productivity by making it easy and affordable for employees to access dental care, when, how and where employees need it most.

- Making it easy and affordable to access care by bringing network dentists right to the workplace through **Cigna Onsite Dental<sup>SM</sup>**
- Moving the center of care to support better oral health routines with **Cigna @Home Dental can help to reduce plaque by 77%.**<sup>7</sup>
- Reducing the risk of opioid addiction through our proprietary opioid dashboard and safe prescribing program has resulted in a **23% reduction in the number of prescriptions written for children under 18, and a 9% reduction overall.**<sup>8</sup>

### Prepare for the Future

At the heart of our dental solution is the relentless pursuit of innovation. Cigna continuously innovates for the future to address the health challenges of today and tomorrow. From the beginning of each customer's journey with us, we are by their side. Enrollment support, oral health assessments, network search-ability, treatment cost estimators, 24/7/365 access to dentists through Cigna Dental Virtual Care - our proactive and innovative solutions make getting dental care affordable and easy.

- **The Cigna Dental Innovation Studio** delivers forward-thinking, customer-centric solutions to help improve outcomes. It's part of our dedication to staying ahead of challenges and bringing the latest solutions to you and your employees to promote whole person health.
- **Cigna Dental Payment Solutions** is an innovative program designed to **help customers turn out-of-pocket dental expenses into a more affordable payment plan** with no additional fees or interest charges.

1. Internal reporting as of November 2021 for DPPO customers who use myCigna and customers who do not use myCigna.

2. "Preventive Dental Treatment Associated with Lower Medical Utilization and Costs." Cigna national study, December 2020. Individual results may vary.

3. Internal reporting as of November 2021 for DPPO customers who received email for overdue preventive care and out-of-network claims.

4. "Preventive Dental Treatment Associated with Lower Medical Utilization and Costs." Cigna national study, December 2020. Individual results may vary.

5. Kelekar, Uma, and Shilpa Naavaal. "Hours Lost to Planned and Unplanned Dental Visits Among US Adults." Preventing chronic disease vol. 15 E04. 11 Jan. 2018. doi:10.5888/pod15.170225. Accessed November 2021.

6. Cigna provides access to virtual care through national teledental care providers via myCigna.com as part of your plan. Providers are solely responsible for any treatment provided to their patients. Video chat may not be available in all areas or with all providers and is a requirement for this service. See your plan materials for the details of your specific Dental plan. This service is separate from coverage for virtual dental care obtained by your Dental plan's network and may not be available in all areas. A referral is not required for this service.

7. Kay, E., Shou, L. A randomised controlled trial of a smartphone application for improving oral hygiene. Br Dent J 226, 508–511 (2019).

8. Internal report published in 2019, based on review and analysis of 2015-2018 Cigna pharmacy claims and Cigna dental membership data. Results may vary.

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This is a summary of benefits for your dental plan.

All deductibles, plan maximums, and service specific maximums (dollar and occurrence) cross accumulate between in and out of network.

Your DPPO\*\* plan allows you to see any licensed dentist, but using an in-network dentist may minimize your out-of-pocket expenses.

Plan Design	Total	Out-of-Network
<b>Calendar Year Maximum</b>		
(Class I, II, III Expenses)	\$1000, Class I Applies	\$1000, Class I Applies
<b>Calendar Year Deductible</b>		
Per Individual	\$50	\$50
Per Family	\$150	\$150
<b>Class I Expenses - Preventive &amp; Diagnostic Care</b>		
Oral Exams Cleanings Routine X-rays Fluoride Application Sealants Non-Routine X-rays Emergency care to relieve pain (administrated at In Network coinsurance)	100%, No Deductible	100%, No Deductible
<b>Class II Expenses - Basic Restorative Care</b>		
Space Maintainers (limited to non-orthodontic treatment) Fillings (Amalgam and composite on all teeth) Oral Surgery - Simple Extractions Oral Surgery - All Except Simple Extraction Surgical Extraction of Impacted Teeth Anesthetics Relines, Rebases, and Adjustments Repairs - Dentures Brush Biopsy	80%, After Deductible	80%, After Deductible
<b>Class III Expenses - Major Restorative Care</b>		
Minor Periodontics Major Periodontics Root Canal Therapy / Endodontics Repairs - Bridges, Crowns, and Inlays Crowns/Inlays/Onlays Stainless Steel/Resin Crowns Dentures Bridges	50%, After Deductible	50%, After Deductible
<b>Class IV Expenses - Orthodontia</b>		
Coverage for Eligible Children Only Lifetime Maximum	50%, No Ortho Deductible \$1000	50%, No Ortho Deductible \$1000
<b>Dental Plan Reimbursement Levels</b>	Based on Contracted Fees	90th Percentile of Submitted Charges***
<b>Additional Member Responsibility in excess of Coinsurance</b>	None	Yes, the difference between the member's dentist's billed charges and the dental plan reimbursement level***
<b>Student/Dependent Age</b>	26/26	

**Cigna Dental Choice / Indemnity Exclusions and Limitations:**

Procedure	Exclusions & Limitations
Exams	Two per calendar year
Prophylaxis (cleanings)	Two per calendar year
Fluoride	1 per calendar year for people under 19
X-Rays (routine)	Bitewings: 2 per calendar year
X-Rays (non-routine)	Full mouth: 1 every 3 calendar years. Panorex: 1 every 3 calendar years
Cone Beams	Not covered
Model	Payable only when in conjunction with Ortho workup
Minor Perio (non-surgical)	Various limitations depending on the service
Perio Surgery	Various limitations depending on the service
Crowns and Inlays	Replacement every 5 years
Prosthesis over Implants	1 per 5 years if unserviceable and cannot be repaired. Benefits are based on the amount payable for non-precious metals. No porcelain or white/tooth colored material on molar crowns or bridges.
Bridges	Replacement every 5 years
Dentures and Partial	Replacement every 5 years
Relines, Rebases	Covered if more than 6 months after installation
Adjustments	Covered if more than 6 months after installation
Repairs - Bridges	Reviewed if more than once
Repairs - Dentures	Reviewed if more than once
Sealants	Limited to posterior tooth. One treatment per tooth every three years up to age 14
Space Maintainers	Limited to non-Orthodontic treatment. No frequency limit for participants under age 19.
Alternate Benefit	When more than one covered Dental Service could provide suitable treatment based on common dental standards, Cigna HealthCare will determine the covered Dental Service on which payment will be based and the expenses that will be included as Covered Expenses.
Orthodontia	For dependent children, up to age 19
Missing Tooth Provision	The amount payable is 50% of the amount otherwise payable until insured for a specified time period; thereafter, considered a Class III expense
Late Entrant Limit****	50% coverage on Class III and IV (if applicable) for 12 months
Pre-Treatment Review	Available on a voluntary basis when extensive work in excess of \$200 is proposed

**Benefit Exclusions:**

- \* Services performed primarily for cosmetic reasons
- \* Replacement of a lost or stolen appliance
- \* Replacement of a bridge or denture within five years following the date of its original installation
- \* Replacement of a bridge or denture which can be made useable according to accepted dental standards
- \* Procedures, appliances or restorations, other than full dentures, whose main purpose is to change vertical dimension, diagnose or treat conditions of TMJ, stabilize periodontally involved teeth, or restore occlusion
- \* Veneers of porcelain or acrylic materials on crowns or pontics on or replacing the upper and lower first, second and third molars
- \* Bite registrations; precision or semi-precision attachments; splinting; Surgical implant of any type
- \* 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
- \* Charges which the person is not legally required to pay
- \* Charges made by a hospital which performs services for the U.S. Government if the charges are directly related to a condition connected to a military service
- \* Experimental or investigational procedures and treatments
- \* Any injury resulting from, or in the course of, any employment for wage or profit
- \* Any sickness covered under any workers' compensation or similar law
- \* Charges in excess of the reasonable and customary allowances
- \* To the extent that payment is unlawful where the person resides when the expenses are incurred;
- \* Procedures performed by a Dentist who is a member of the covered person's family (covered person's family is limited to a spouse, siblings, parents, children, grandparents, and the spouse's siblings and parents);
- \* For charges which would not have been made if the person had no insurance; For charges for unnecessary care, treatment or surgery;
- \* To the extent that you or any of your Dependents is in any way paid or entitled to payment for those expenses by or through a public program, other than Medicaid;
- \* To the extent that benefits are paid or payable for those expenses under the mandatory part of any auto insurance policy written to comply with a "no-fault" insurance law or an uninsured motorist insurance law. Cigna HealthCare will take into account any adjustment option chosen under such part by you or any one of your Dependents.
- \* In addition, these benefits will be reduced so that the total payment will not be more than 100% of the charge made for the Dental Service if benefits are provided for that service under this plan and any medical expense plan or prepaid treatment program sponsored or made available by your Employer.

*\*\* In Texas, the insured dental product offered by CGLIC and CHLIC is referred to as the Cigna Dental Choice Plan, and this plan utilizes the national Cigna Dental PPO network.*

*\*\*\*Charges are based upon an independent third party organization that is the industry standard. Percentile data is based upon the third party organization's aggregated industry-wide claims data*

*\*\*\*\*Late Entrant coverage limitation does not apply to New Mexico Residents for Insured Dental Products.*

*This benefit summary highlights some of the benefits available under the proposed plan. A complete description regarding the terms of coverage, exclusions and limitations, including legislated benefits, will be provided in your insurance certificate or plan description.*

*Benefits are insured and/or administered by Cigna HealthCare.*

Did you know that most of Cigna's dental plans include the Cigna Dental Oral Health Integration Program? This program was designed to address research that supports the association of oral health to overall health and provides reimbursement of copays or coinsurance for customers with qualifying medical conditions for program eligible procedures. Additionally, registered program members can access articles on behavioral conditions that impact oral health.

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Cigna PLAN OFFERED			
Product		Choice	
Plan Name		Copy of GC DPPO Plan	
Situs		TX	
Funding		Fully Insured	
Cigna RATES			
		Copy of GC DPPO Plan	
		#EE	Rates
Employee		42	\$32.04
Emp + Spouse		0	\$67.70
Emp + Child(ren)		9	\$64.79
Emp + Family		5	\$92.29
Monthly Billed Amount		56	\$2,390.24
Monthly Billed Amount Per Product		\$2,390.24	
Annual Billed Amount Per Product		\$28,682.88	
TOTAL EE's		56	
TOTAL Monthly Billed Amount		\$2,390.24	
TOTAL Annual Billed Amount		\$28,682.88	

Cigna Healthcare Financial Exhibit for:

## Center Point Independent School District

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### PROPOSAL TERMS AND CONDITIONS for Dental

#### A. General Terms of this Proposal

Cigna HealthCare is pleased to present this Proposal for a Fully Insured Non-Participating group Dental benefit plan (the "Plan") sponsored by Center Point Independent School District. This proposal is valid for 60 days from its original date of release, 07/15/2025. Any revisions or updates to this proposal will not renew this valid timeframe unless expressly communicated by Cigna HealthCare.

The information contained in this Proposal by Cigna HealthCare is proprietary and highly confidential. It is being provided with the understanding that it will not be used by the employer, its representatives or consultants for any purpose other than the evaluation of the Proposal. Under no circumstances is any of the information contained herein (including excerpts, summaries, extracts, and evaluations thereof) to be used, disseminated, disclosed or otherwise communicated to any person or entity other than the employer, its representatives and consultants, and their respective employees who are directly involved in the evaluation process.

#### Proposal Caveats

Cigna HealthCare may revise or withdraw this Proposal if:

- 1 there is a change to the effective date of the quote.
- 2 benefits and any applicable experience do NOT match benefits with incumbent carrier; a review of the SPD may be required prior to
- 3 participation is below 100%. This will be based on the total eligible employees, identified as 103.
- 4 out of network reimbursement, verified prior to implementation based on sample out of network claim allowance for specific procedure codes, is different than communicated or accounted for in the financial projections
- 5 enrollment increases or decreases by 10% or more, by product or for the total account, from the enrollment assumptions used in establishing the rates and/or fees set forth herein.
- 6 it is not the exclusive provider of Dental for all of Center Point Independent School District's employees in all worksites.
- 7 there is a change in law, regulation, tax rates, or the application of any of these that affects Cigna's costs
- 8 a multi-year rate/fee guarantee/cap is offered as part of the proposal and/or resulting contract, and Center Point Independent School District attempts to seek a request for proposal or goes out to bid prior to the end of or does not remain with Cigna for the full term of the multi-year term period noted in this proposal and/or resulting contract.

#### B. Scope and Application of this Proposal

If this quote is based on the incumbent's claims experience and unless otherwise indicated, this Proposal:

- 1 contains insured rates that are illustrative until the incumbent's full SPD is received
- 2 contains benefit summaries that are illustrative until the incumbent's full SPD is received
- 3 assumes the quoted Dental rates are valid only when Dental is sold on a Stand-alone basis.
- 4 assumes employer contribution levels match what is shown in the RFP.
- 5 assumes the premium rates proposed by Cigna Healthcare are subject to final Underwriting approval and may be changed due to differences in selection of benefits, changes in census data, or any other changes in risk determined by Cigna Healthcare.
- 6 includes rates which are subject to regulatory approval. If, as of their proposed effective date, regulatory approval is not obtained, Cigna shall use rates consistent with its then currently approved rates and the foregoing rates shall be effective automatically upon approval.
- 7 assumes that Cigna HealthCare's standard insurance policy form approved for use in the applicable state by the state insurance regulator will be issued. Because the insurance policy and certificate terms require regulatory approval, there is very little flexibility to change the provisions. The provisions of the insurance policy and certificate will supersede the Proposal in the event of a conflict.
- 8 includes Dental rates which are guaranteed for a period of 24 months while the contract remains in force.
- 9 assumes the rates contain sufficient commission load for Dental of 10%.
- 10 assumes only a passive DPPO plan may be offered to TX or MS employees due to regulatory requirements.
- 11 assumes the plan will be implemented using Cigna's standard policy provisions, limitations, and contract language as reflected in Cigna's summary plan description unless specific modifications have been approved and rated appropriately. These standards are summarized in the Underwriting benefit summary. Any benefit modifications must be communicated in writing from Underwriting.
- 12 Cigna's Dental and/or Vision products are "excepted benefits" and not subject to Essential Health Benefit requirements.
- 13 Cigna HealthCare may have an agreement with your benefit advisor, under which the benefit advisor may be paid for providing marketplace intelligence or for the performance of administrative services. The qualification for and amount of this payment may be based upon overall business growth and/or retention levels. Any such payment is funded through Cigna HealthCare's general overhead.
- 14 The benefit advisor may qualify for incentive payment (monetary or non-monetary) from Cigna HealthCare. For example, the benefit advisor may receive payment based upon new sales, new customer growth or retention. This incentive payment is funded from Cigna HealthCare's general overhead.
- 15 Cigna HealthCare sponsors programs to inform benefit advisors about Cigna HealthCare's plan coverage and services (including producer advisory councils). The cost of these events is funded through Cigna HealthCare's general overhead.