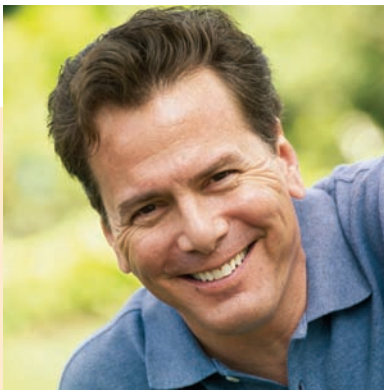


FLORIDA INDIVIDUAL & FAMILY PLANS

CIGNA OPEN ACCESS PLANSSM

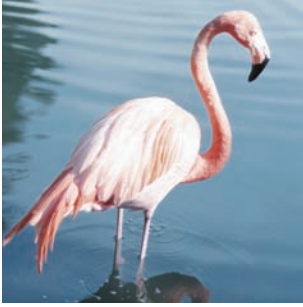


Health
and
Pharmacy
Benefits



PLAN COMPARISON





CIGNA HealthCare plans, offered through Connecticut General Life Insurance Company, provide coverage you and your family can count on, along with a full range of options and award-winning service. That way, you can protect your health and secure your future. Now that's real value.

CIGNA Open Access PlansSM

True choice. You can choose an in-network provider or choose to receive care from a provider who isn't part of the CIGNA network. It's up to you.

Primary care. You have the option of choosing a Primary Care Physician (PCP) as your personal doctor. With a PCP, you have a valuable resource who acts as a personal health advocate. But, if you prefer, you also have the option of not choosing a PCP.

Specialists. You have direct access to participating specialists. You do not need a referral to see an in-network or out-of-network specialist.

Please check the Summary of Benefits for more specific details about the CIGNA Open Access Plans.

A CIGNA Open Access Plan is right for you if:

- ✓ You want comprehensive coverage and a good value.
- ✓ You want a flexible plan.
- ✓ You want a national network of doctors and hospitals.

Your national network.

As a CIGNA HealthCare member, you have access to a network of more than 500,000 quality health care professionals and facilities throughout the country. But if you want to see a provider who is not in the network, you can. Keep in mind that out-of-pocket costs vary, but your out-of-pocket costs are generally lower when you see in-network providers.

In Florida, CIGNA offers you:

- A network of nearly 28,000 doctors
- Over 200 participating hospitals
- Full accreditation from the National Committee for Quality Assurance (NCQA)

To apply, call your CIGNA authorized broker or agent today.

Or, you can call CIGNA at 1-866-GET-CIGNA (1-866-438-2446)

(8:00 a.m. – 8:00 p.m. ET, Monday – Friday)

or visit www.CIGNAforYou.com.



CIGNA Open Access PlansSM – FLORIDA

INDIVIDUAL & FAMILY PLANS	Open Access 1000		Open Access 2000		Open Access 3000		Open Access 5000	
	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK
PLAN FEATURES – Percentage shown in-network is the percentage CIGNA pays of the negotiated rate.								
Annual Deductible Individual/Family	\$1,000/\$2,000	\$2,000/\$4,000	\$2,000/\$4,000	\$4,000/\$8,000	\$3,000/\$6,000	\$6,000/\$12,000	\$5,000/\$10,000	\$10,000/\$20,000
Annual Out-of-Pocket Maximum – Individual/Family copays, deductibles and pharmacy charges do not apply to the out-of-pocket maximum	\$2,000/\$4,000	\$4,000/\$8,000	\$3,000/\$6,000	\$6,000/\$12,000	\$4,000/\$8,000	\$8,000/\$16,000	\$5,000/\$10,000	\$10,000/\$20,000
Lifetime Maximum Benefit	\$5,000,000		\$5,000,000		\$5,000,000		\$5,000,000	
Office Visits (PCP/Specialist copay) – Deductible waived in-network	You pay \$25/\$50	CIGNA pays 60% ¹	You pay \$25/\$50	CIGNA pays 60% ¹	You pay \$30/\$60	CIGNA pays 60% ¹	You pay \$30/\$60	CIGNA pays 60% ¹
Preventive Care (ages 17 and older) (PCP/Specialist copay) – All routine physicals to include immunizations, flu shot and routine lab work. Deductible waived in-network, up to \$300, per member, per calendar year	You pay \$25/\$50	CIGNA pays 60% ¹	You pay \$25/\$50	CIGNA pays 60% ¹	You pay \$30/\$60	CIGNA pays 60% ¹	You pay \$30/\$60	CIGNA pays 60% ¹
Mammograms – Deductible waived	CIGNA pays 100%	CIGNA pays 100%	CIGNA pays 100%	CIGNA pays 100%	CIGNA pays 100%	CIGNA pays 100%	CIGNA pays 100%	CIGNA pays 100%
Pap Smears, Bone Density Screening and PSA	CIGNA pays 80% ¹	CIGNA pays 60% ¹	CIGNA pays 80% ¹	CIGNA pays 60% ¹	CIGNA pays 80% ¹	CIGNA pays 60% ¹	CIGNA pays 80% ¹	CIGNA pays 60% ¹
Preventive Care for Children Through Age 16² (Office Visits) – Deductible waived in- and out-of-network	You pay \$25/\$50	CIGNA pays 60%	You pay \$25/\$50	CIGNA pays 60%	You pay \$30/\$60	CIGNA pays 60%	You pay \$30/\$60	CIGNA pays 60%
Preventive Care for Children Through Age 16² – Immunizations, flu shots and routine lab work. Deductible waived in- and out-of-network	CIGNA pays 80%	CIGNA pays 60%	CIGNA pays 80%	CIGNA pays 60%	CIGNA pays 80%	CIGNA pays 60%	CIGNA pays 80%	CIGNA pays 60%
Ambulance¹ – Calendar year maximum of \$3,000	CIGNA pays 80% ¹	CIGNA pays 80% ¹	CIGNA pays 80% ¹	CIGNA pays 80% ¹	CIGNA pays 80% ¹	CIGNA pays 80% ¹	CIGNA pays 80% ¹	CIGNA pays 80% ¹
Emergency Room – Additional \$100 deductible, waived if admitted	CIGNA pays 80% ¹	\$100 additional deductible then CIGNA pays 80% ¹ , if true emergency; otherwise CIGNA pays 60% ¹	CIGNA pays 80% ¹	\$100 additional deductible then CIGNA pays 80% ¹ , if true emergency; otherwise CIGNA pays 60% ¹	CIGNA pays 80% ¹	\$100 additional deductible then CIGNA pays 80% ¹ , if true emergency; otherwise CIGNA pays 60% ¹	CIGNA pays 80% ¹	\$100 additional deductible then CIGNA pays 80% ¹ , if true emergency; otherwise CIGNA pays 60% ¹
Urgent Care Services	CIGNA pays 80% ¹	CIGNA pays 80% ¹ , if true emergency; otherwise CIGNA pays 60% ¹	CIGNA pays 80% ¹	CIGNA pays 80% ¹ , if true emergency; otherwise CIGNA pays 60% ¹	CIGNA pays 80% ¹	CIGNA pays 80% ¹ , if true emergency; otherwise CIGNA pays 60% ¹	CIGNA pays 80% ¹	CIGNA pays 80% ¹ , if true emergency; otherwise CIGNA pays 60% ¹
Inpatient Hospital Services – Facility charges, physician services and all in-hospital care	CIGNA pays 80% ¹	CIGNA pays 60% ¹	CIGNA pays 80% ¹	CIGNA pays 60% ¹	CIGNA pays 80% ¹	CIGNA pays 60% ¹	CIGNA pays 80% ¹	CIGNA pays 60% ¹
Surgery in an Outpatient Hospital or Ambulatory Surgical Center	CIGNA pays 80% ¹	CIGNA pays 60% ¹	CIGNA pays 80% ¹	CIGNA pays 60% ¹	CIGNA pays 80% ¹	CIGNA pays 60% ¹	CIGNA pays 80% ¹	CIGNA pays 60% ¹
Outpatient Lab, X-Ray, Ultrasound, CT Scan and MRI	CIGNA pays 80% ¹	CIGNA pays 60% ¹	CIGNA pays 80% ¹	CIGNA pays 60% ¹	CIGNA pays 80% ¹	CIGNA pays 60% ¹	CIGNA pays 80% ¹	CIGNA pays 60% ¹
Physical, Occupational and Speech Therapy (Speech therapy for children under the age of 18 with cleft lip/palate disorders only) – Combined services and combined in- and out-of-network	CIGNA pays \$40 ¹ maximum per visit/per person, up to 24 visits per year		CIGNA pays \$40 ¹ maximum per visit/per person, up to 24 visits per year		CIGNA pays \$40 ¹ maximum per visit/per person, up to 24 visits per year		CIGNA pays \$40 ¹ maximum per visit/per person, up to 24 visits per year	
Durable Medical Equipment – Calendar year maximum of \$5,000	CIGNA pays 80% ¹	CIGNA pays 60% ¹	CIGNA pays 80% ¹	CIGNA pays 60% ¹	CIGNA pays 80% ¹	CIGNA pays 60% ¹	CIGNA pays 80% ¹	CIGNA pays 60% ¹
Mental Health – Inpatient – Combined services and combined in- and out-of-network	CIGNA pays \$200 ¹ maximum per day/per person, up to \$3,000 per year		CIGNA pays \$200 ¹ maximum per day/per person, up to \$3,000 per year		CIGNA pays \$200 ¹ maximum per day/per person, up to \$3,000 per year		CIGNA pays \$200 ¹ maximum per day/per person, up to \$3,000 per year	
Mental Health – Outpatient – Combined services and combined in- and out-of-network	CIGNA pays \$30 ¹ maximum per visit/per person, up to 24 visits		CIGNA pays \$30 ¹ maximum per visit/per person, up to 24 visits		CIGNA pays \$30 ¹ maximum per visit/per person, up to 24 visits		CIGNA pays \$30 ¹ maximum per visit/per person, up to 24 visits	
RETAIL PHARMACY (per 30 day supply)								
Brand Name Deductible – Combined in- and out-of-network	\$250		\$250		\$500		\$500	
Generic/Brand Name/Non-preferred Brand Name – Oral contraceptives and devices excluded	\$10/\$35/\$60 ¹	CIGNA pays 50% ¹	\$10/\$35/\$60 ¹	CIGNA pays 50% ¹	\$10/\$35/\$60 ¹	CIGNA pays 50% ¹	\$10/\$35/\$60 ¹	CIGNA pays 50% ¹
Self Injectables – Oral contraceptives and devices excluded	CIGNA pays 70% ¹	CIGNA pays 50% ¹	CIGNA pays 70% ¹	CIGNA pays 50% ¹	CIGNA pays 70% ¹	CIGNA pays 50% ¹	CIGNA pays 70% ¹	CIGNA pays 50% ¹
MAIL ORDER PHARMACY (per 90 day supply)								
Generic/Brand Name/Non-preferred Brand Name – Oral contraceptives and devices excluded	\$25/\$85/\$150 ¹	Not applicable	\$25/\$85/\$150 ¹	Not applicable	\$25/\$85/\$150 ¹	Not applicable	\$25/\$85/\$150 ¹	Not applicable
Self Injectables – Oral contraceptives and devices excluded	CIGNA pays 70% ¹	Not applicable	CIGNA pays 70% ¹	Not applicable	CIGNA pays 70% ¹	Not applicable	CIGNA pays 70% ¹	Not applicable

¹ The percentage associated with this plan feature represents what CIGNA pays, once the annual deductible amount is fulfilled by the member. ² For children age 17 and up refer to the Physician Services benefits. For specific costs and further details of the coverage, including exclusions, and reductions or limitations and the terms under which the policy may be continued in force, please refer to the Policy Booklet, ask your agent for a Summary of Benefits or write to the company. Depending on you or your family member's coverage history and applicable law, CIGNA may exclude coverage for certain pre-existing conditions for a period of time, as described in your Policy Booklet.

COMMONLY USED HEALTH CARE WORDS

Here are some basic terms that you should know regarding your health care plan.

Coinsurance: A percentage of the CIGNA contracted rate to an in-network provider or a percentage of the cost from an out-of-network provider that the member is responsible for.

Copayment (copay): A flat per service charge that plan members are responsible to pay for services such as doctor visits or prescriptions.

Deductible: The dollar amount that plan members must pay each year for eligible health expenses before the plan begins to pay benefits for covered services.

In-network provider: Any health care provider (physician, hospital, etc.) that participates in the CIGNA network.

Out-of-network provider: Any health care provider (physician, hospital, etc.) that does not participate in a CIGNA network.

Inpatient care: Care given to a plan member admitted to a hospital, hospice, skilled nursing facility or rehabilitation facility.

Outpatient care: Any health care service provided to a plan member who is not admitted to a facility.

Out-of-pocket costs: Copayments, deductibles, coinsurance or fees paid by plan members for health services or prescriptions.

Out-of-pocket maximum: The most plan members will pay per year for covered health expenses before the plan pays 100% for the rest of that year.

**To apply, call your CIGNA authorized broker
or agent today.**

Or call CIGNA at 1-866-GET-CIGNA (1-866-438-2446)

(8:00 a.m. – 8:00 p.m. ET, Monday – Friday)

or visit www.CIGNAforYou.com.





If, after reviewing the policy, you find that you're not satisfied for any reason, simply return the policy to us within 10 days. We will refund any premium you've paid (including any policy fees or other charges), less the cost of any services paid on behalf of you or any covered dependent.

This Plan Comparison highlights some of the benefits available under these plans. A complete description regarding the terms of coverage, exclusions and limitations including legislated benefits will be provided in your Summary of Benefits and Policy Booklet.

"CIGNA," "CIGNA HealthCare" and the "Tree of Life" logo are registered service marks of CIGNA Intellectual Property, Inc., licensed for use by CIGNA Corporation and its operating subsidiaries. All products and services are provided exclusively by such operating subsidiaries and not by CIGNA Corporation. Such operating subsidiaries include Connecticut General Life Insurance Company, Tel-Drug, Inc. and its affiliates, CIGNA Behavioral Health, Inc., Intracorp, and HMO or service company subsidiaries of CIGNA Health Corporation and CIGNA Dental Health, Inc. In Arizona, HMO plans are offered by CIGNA HealthCare of Arizona, Inc. All other medical plans in Arizona are insured or administered by Connecticut General Life Insurance Company.