THE CARE YOU NEED.
THE SAVINGS YOU WANT.
Get both with Open Access Plus from Cigna.

Offering flexible access to thousands of providers – plus programs and services to support your whole health needs – the Open Access Plus (OAP) plan is designed to make it easier for you to get the quality care you need and the savings you want. So you can take control of your health: Body and mind.

Here’s how it works.

› **Care coordination**
  Although it’s not required, you can choose to select a primary care provider (PCP) as your personal health advocate. This will give you and your family a valuable resource to help coordinate care with other providers. Cigna is also here to help, anytime you need us.

› **In-network savings**
  You have the freedom to use any provider or facility of your choice, whether they are in the Cigna OAP network or out of the network. Just know that staying in-network will help keep your costs down and avoid any additional paperwork.

› **No-referral specialist care**
  If you need to see a specialist for any reason, you don’t need a referral to see an in-network doctor. If you choose an out-of-network specialist, your care will be covered at the out-of-network level and you may be responsible for any preauthorizations needed.

› **Hospital stays**
  In an emergency, you have coverage. However, requests for nonemergency hospital stays (other than maternity stays) and some types of outpatient care must have prior authorization or be “precertified.” This lets Cigna determine if the services are covered by your plan.

  If your doctor is in the Cigna Open Access Plus network, he or she will arrange for prior authorization. If you use an out-of-network doctor, you must make the arrangements.

› **Out-of-pocket costs**
  Depending on your plan, you may have to pay an annual amount (deductible) before your plan begins to pay for covered health care costs. You may also need to pay a copay and/or coinsurance (a portion of the covered charge) for covered services. Then, your plan pays the rest. Once you reach an annual limit on your payments (out-of-pocket maximum), the health plan pays your covered health care costs at 100% for the rest of your plan year.

  If you receive out-of-network care, your costs will be higher. Out-of-network doctors and facilities may also bill you for charges that are not covered by the plan. Charges not covered by the plan do not contribute to your deductible or out-of-pocket limits.
Added convenience and support

› **Online doctor visits**
Through Cigna Telehealth Connection, you can connect with doctors and behavioral health professionals by phone or video chat without leaving home or work. This nonemergency care is available 24/7 and costs the same or less than a regular doctor visit.**

› **Cigna Health Information Line**
With the Cigna Health Information Line, clinicians are just a phone call away – 24/7, and at no extra cost. They can help you understand health issues you might be experiencing, and help you to make informed decisions – whether it’s reviewing home treatment options, following up on a doctor’s appointment, or choosing and finding the right care in the right setting.

› **Live, 24/7 customer service**
Customer service representatives are here for you where and when you need us – over the phone, via chat at myCigna.com or on the myCigna® App.

The myCigna website and app
On myCigna.com and the myCigna App, you have easy access to personalized tools to help you take control of your health and your health care spending. From your computer or mobile device, you can:

- Manage and track claims
- See cost estimates for medical procedures
- Compare quality information for doctors and hospitals
- Track your account balances and deductibles
- Use the easy health and wellness tools
- Print a temporary ID card

Want to check if your doctor is in the Cigna OAP network before you enroll?
Just go to Cigna.com and click on “Find a Doctor, Dentist or Facility” and then click on “Plans through your employer or school” to search the provider directory.