

A Dental HMO

CHOICE

1

CHOICE 1 is a Dental HMO that lets YOU pick a network dentist who provides you with most routine preventive services at no charge to you (exams, x-rays, and cleanings).

- Available to members, spouse/ domestic partner, & dependent children.
- The network general dentist you choose will manage your overall dental care.
- No charges for most preventive services.
- No waiting period, deductibles, or annual dollar maximums.



CSEA Membership is required to enroll and continue this insurance.



A Dental HMO

CHOICE 1 is a Dental HMO that lets you pick a network dentist and there are no charges for most preventive services. The fees you pay your dentist are clearly listed on your Patient Charge Schedule (PCS). With CHOICE 1, you have no waiting periods, deductibles, or annual dollar maximums.

Affordable Dental Care

Cigna Dental has experience in knowing what's important to you and your family.

- eligible dependents include spouse and unmarried children from birth through age 18 (or age 25, full-time students) and where permitted by law, your domestic partner. To qualify as domestic partners, the member and partner must be registered as domestic partners or members of a civil union or submit domestic partner declaration to the policyholder.

CSEA Retiree Dental Care Program CHOICE 1 is a managed dental health program that offers you significant savings over traditional dental plans. The plan consists of a network of participating dentists who focus on the preventive aspects of dental care.

The plan offers low out-of-pocket costs while providing access to economical care. **There are no annual dollar maximums and no claim forms to fill out.**

Choice of Dentist

If you have a family, you already know that the same dentist may not be the right choice for everyone. That's why CHOICE 1 (DHMO) lets each enrolled family member choose a dentist. You can select the right dentist for your needs, one with whom you feel confident and comfortable.

Other Dental Services

If you or a family member should need more extensive work, CHOICE 1 offers affordable prices. For example, for a typical comprehensive orthodontic case, you could save more than \$2,500 when compared with national average charges.

If you need to see a network dental specialist, your network general dentist will handle the referral paperwork for you. Prior authorization may be required for certain types of specialty care. Referrals are required for all network specialists *except* orthodontists (if your plan includes orthodontic benefits) and pediatric dentists. The copays on your PCS also apply to covered network specialist care.

Quality Management

You can be confident that quality management is a high priority. Dentists who serve CSEA's CHOICE 1 (DHMO) members are independent professionals who have met Cigna Dental's quality program criteria. Each network dentist has been evaluated for:

Professional Credentials - All network dentists have been verified with state dental boards as in good standing and properly licensed.

Compliance with Government Health Standards
- Network dental offices are visited periodically to verify that they are complying with Cigna's standards for sterilizing and storing instruments. Radiation equipment and facilities are also checked for compliance with state and federal safety regulations.

Preventive Care at No Charge to You

- Examinations
- Routine Cleanings
- Fluoride application up to age 19
- X-rays

More complex procedures will require a preset co-payment. *Please see the Patient Charge Schedule for details and any limitations*

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Effective Date: Benefits under this Dental program become effective the first of the following month after receipt of the initial premium, if the enrollment form and payment are received by the fifteenth of the month. Enrollment forms received after the fifteenth will become effective on the first of the subsequent month. Incomplete enrollment forms, or failure to submit the required initial premium amount may cause an initial delay in issuance of insurance. **Do not cancel any other insurance or assume you are insured under the Plan until you receive written confirmation from Pearl Insurance.**

CHOICE 1 (DHMO) gives you most routine preventive services at no charge and a minimal co-pay for more complex ones. If you would like more information about CHOICE 1, or you would like to enroll, please call Pearl Insurance TOLL-FREE at **1-888-507-1368** and one of our helpful customer service representatives will be happy to assist you.

Find the Provider Nearest You

The Cigna DHMO network is one of the largest in the country (more than 69,000 dentist locations) – strongest in large metropolitan areas. 98.3% of our customers in U.S. cities are located within 10 miles of two network dental offices.

To find the provider nearest you, simply call Cigna Dental's toll-free Member Services number 1-800-367-1037. Or, get on the INTERNET, www.cigna.com/dental.

To use the Automated Dental Office Locator call 1-800-367-1037 to find the provider nearest you.



Sponsored by:



Administered by:



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1-888-507-1368

CHOICE 1 Plan is Offered by:

Cigna Health and Life Insurance Company, Connecticut General Life Insurance Company, or their affiliates.



GO YOU[®]

The term “DHMO” is used to refer to product designs that may differ by state of residence of enrollee, including but not limited to, prepaid plans, managed care plans, and plans with open access features. The Cigna DHMO is not available in the following states: AK, HI, ME, MT, NH, NM, ND, PR, RI, SD, VI, VT, WV, and WY.

**Minnesota Residents: When enrolling in a DHMO plan, you must visit your selected network dentist in order for the charges on the Patient Charge Schedule to apply. You may also visit other dentists that participate in our network or you may visit dentists outside the Cigna Dental Care network. If you do, the fees listed on the Patient Charge Schedule will not apply. You will be responsible for the dentist’s usual fee. We will pay 50% of the value of your network benefit for those services. You’ll pay less if you visit your selected Cigna Dental Care network dentist. Call Customer Service for more information.

**Oklahoma Residents: DHMO for Oklahoma is an Employer Group Pre-Paid Dental Plan. You may also visit dentists outside the Cigna Dental Care network. If you do, the fees listed on the Patient Charge Schedule will not apply. You will be responsible for the dentist’s usual fee. We pay non-network dentists the same amount we’d pay network dentists for covered services. You’ll pay less if you visit a network dentist in the Cigna Dental Care network. Call Customer Service for more information.

All group dental plans and insurance policies have exclusions and limitations. For costs and details about the services covered under your plan, review your enrollment materials. Dentists who participate in Cigna’s network are independent contractors solely responsible for the treatment provided and are not agents of Cigna.

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