CIGNA 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 network.

See the savings for yourself

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

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

A tale of two crowns**

Joe and Sue, coworkers with the same Cigna 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 network dentist for the procedure. That network dentist has agreed to charge Cigna customers a discounted fee for the crown: **\$650**. Applying her Cigna 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 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.

Together, all the way.



Offered by: Cigna Health and Life Insurance Company or Connecticut General Life Insurance Company.

- * Discounts on non-covered services may not be available in all states.
- **For illustrative purposes only. Cigna 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 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.

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 to their patients. They are not agents of Cigna.

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