



City of Salem

Your Medical Plan Options

Plan year: 01/01/2025-12/31/2025

Offered by Cigna Health and Life Insurance Company or its affiliates
In Utah, plans are offered by Cigna Health and Life Insurance Company.

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Cigna One Guide

Cigna One Guide® helps you make informed choices and get the most from your plan, offering personalized support to help you stay healthy and save money.

During enrollment, we're just a call away to help:

- Answer questions about the basics of coverage for medical plans and products as well as Cigna Healthcare® pharmacy
- Identify the types of health plans available to you to help you choose the one that best meets your needs
- Find out if your doctors are in network to help you avoid unnecessary costs
- Get answers to any other questions you may have about the plans or provider networks available to you



Cigna One Guide

After enrollment, personalized support helps you:

- Resolve health care questions and issues
- Save time and money
- Get the most out of your plan(s)
- Find in-network providers, hospitals and labs
- Get cost estimates
- Understand your bills
- Navigate the health care system

1. App/online store terms and mobile phone carrier/data charges apply.



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After you've enrolled, access Cigna One Guide® the way that's most convenient to you.



myCigna® website or app¹



Live chat



Phone

Understanding terms in your health plan

Deductible:

The annual amount you pay for care before your health plan begins to pay.

Copay:

A predetermined amount you pay for eligible health care services or medication. Your copay usually is due when you receive the service.

Co-insurance:

Your share of the cost of covered services, usually after you meet your deductible. The health plan pays the rest.

Out-of-pocket maximum:

The most you pay before the health plan begins to pay 100% of covered health care costs. You'll still need to pay for any expenses the health plan doesn't count toward the limit.

In-network:

Health care providers and facilities that have contracts with us to deliver services at a discounted rate.

Out-of-network:

A health care provider or facility that doesn't contract with your plan and doesn't provide services at a discounted rate. Using an out-of-network provider usually will cost you more.

Open Access Plus (OAP)



Primary Care Provider: A primary care provider (PCP) is recommended but not required



Specialist: You can see a specialist without a referral



Network: Lower costs by using providers and health care facilities in the OAP network

- Use the Cigna HealthcareSM network of providers, health care facilities, labs, x-ray and radiology centers, as well as emergency care



Deductible: You may pay an annual amount — a deductible — before your health plan begins to pay for covered health care costs.¹ Only services covered by the health plan count toward the deductible



Copay and co-insurance: Once you meet your deductible, you will pay a portion of covered health care costs and the plan pays the rest²



Out-of-pocket maximum: Once you meet an annual limit on your payments — out-of-pocket maximum — your plan pays 100% of covered costs

1. Plans may vary; see your employer's plan documents for details related to your specific medical plan.
2. Coinsurance is what you pay for covered services after you've met your deductibles. It does not include charges for services not covered by your plan. If you use an out-of-network provider, your expenses may be more than the coinsurance amount shown because the out-of-network provider can bill you for charges that are more than what your benefit plan will pay.



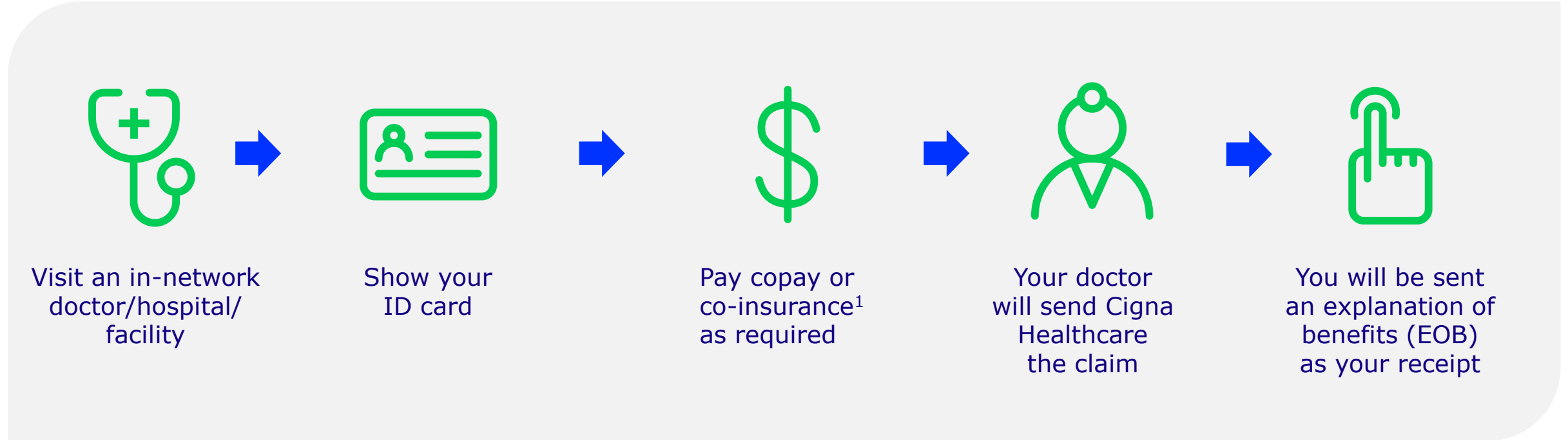
Planning for your medical costs

	OAP Plan		OAP HDHP	
	Single	Family	Single	Family
Deductible	\$250 In-network \$250 Out-of-network	\$750 In-network \$750 Out-of-network	\$1,650 In-network \$3,000 Out-of-network	\$3,300 In-network \$6,000 Out-of-network
Out-of-pocket maximum ¹	\$1,250 In-network \$2,250 Out-of-network	\$3,750 In-network \$6,750 Out-of-network	\$6,350 (employee only) \$6,650 (individual in family) In-network \$12,700 (employee only) \$25,400 (individual in family) Out-of-network	\$12,700 In-network \$25,400 Out-of-network
Lifetime maximum	Unlimited	Unlimited	Unlimited	Unlimited

If you choose to receive care outside of your plan's network, only covered expenses will be applied to your deductible – subject to your plan's Maximum Reimbursable Charge provisions. **All plans have exclusions and limitations.** See your enrollment materials for more information about costs and details about covered and non-covered services, including plan exclusions and limitations.

1. This is the most a family (employees plus covered family members) will pay for in-network, out-of-pocket expenses. It's important to note that each individual family member's out-of-pocket costs are capped at \$8,700 for 2022 health plans, and overall family in-network costs are capped by the IRS at \$17,400. The out-of-pocket costs for people with individual coverage are capped at \$7,050 for 2022. To see examples of how this works, please visit www.InformedOnReform.com > Federal Regulations > Cost Sharing Limits, or Cigna.com/health-care-reform/embedded-oop-customer-impacts.

The claim process



1. Your plan may apply a deductible. Copays are paid at the time of service. If a coinsurance applies, it is not paid at the time of service and is billed to you or charged to an HSA/HRA after the claim is processed and the EOB is issued.

Take control of your health and your health costs

Here are a few easy ways to save on out-of-pocket health care expenses:



Stay with in-network
providers and facilities



Visit an urgent care center
instead of the ER for
non-life-threatening health
concerns



**Use a convenience care
clinic** (inside supermarkets,
pharmacies and other retail
stores) for routine care



**Access virtual care¹ through
MDLIVE®** 24/7 for a range of
minor conditions

1. Cigna Healthcare provides access to virtual care through national telehealth providers as part of your plan. This service is separate from your health plan's network and may not be available in all areas or under all plans. Referrals are not required. Video may not be available in all areas or with all providers. Refer to plan documents for complete description of virtual care services and costs. Virtual primary care through MDLIVE is only available for Cigna Healthcare medical members aged 18 and older.

This information is for educational purposes only. It is not medical advice. Always consult your doctor for examinations, treatment, testing and care recommendations. In an emergency, dial 911 or visit the nearest emergency room.

Your pharmacy plan options



Understanding terms in your pharmacy plan

Generics:

Generic medications have the same active ingredients, strength, dosage, effectiveness, quality and safety as the brand-name medications.

Preferred brands:

You'll often pay more for a preferred brand-name medication than for generic medications because they typically have lower-cost generic alternative available to treat the same conditions.

Non-preferred brands:

Medications that typically have lower-cost generic and/or preferred brand alternatives available to treat the same conditions.

Specialty:

These high-cost medications are used to treat complex medical conditions. They're often injected or infused and may require special handling, such as refrigeration.

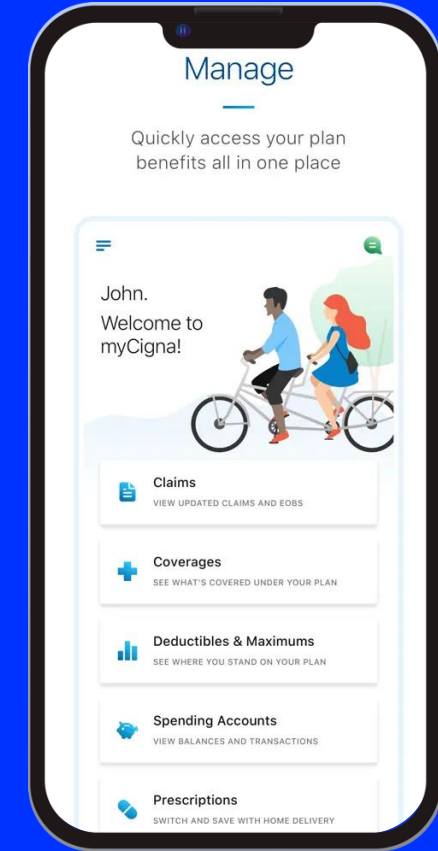
Use the myCigna® App¹ or website – 24/7

Manage all your prescriptions on the My Medications page

- See which medications your plan covers
 - Price a medication²
 - Search for lower-cost alternatives, if available
 - View all the prescriptions you've filled in the last 18 months
 - Find an in-network pharmacy
 - Ask a pharmacist a question
 - Switch a prescription from a retail pharmacy to our home delivery pharmacy
- For home delivery prescriptions:
- Refill and track your orders
 - Pay your bill online
 - Sign up for automatic refills
 - Request a payment plan
 - For specialty medications, connect to your online Accredo® account

1. App/online store terms and mobile phone carrier/data charges apply.

2. Prices shown on myCigna are not a guarantee. Coverage falls under your plan terms and conditions. Visit myCigna for more information.



For illustrative purposes only.

Save a trip with home delivery



Order, manage, track and pay for medications on your phone or online



Standard shipping at **no extra cost**¹



Fill up to a **90-day supply** at one time²



Automatic refills³ or refill reminders so you don't miss a dose



Helpful pharmacists available 24/7



Flexible payment options



To learn more about Express Scripts® Pharmacy, go to **Cigna.com/homedelivery** or call **800.835.3784**

1. Standard shipping costs are included as part of your prescription plan.
2. Some medications aren't available in a 90-day supply and may only be packaged in lesser amounts. For example, three packages of oral contraceptives equal an 84-day supply. Even though it's not a "90-day supply," it's still considered a 90-day prescription.
3. Express Scripts Pharmacy can automatically refill certain medications. You can sign up for the automatic refill program when you call. Or, you can log in to the myCigna App or website to sign up on your own. The downloading and use of the myCigna mobile app is subject to the terms and conditions of the App and the online store from which it is downloaded. Standard mobile phone carrier and data usage charges apply.

Help with specialty medications

Accredo[®], your specialty pharmacy, is focused on supporting complex medical conditions.

- Easily order, manage and track your medications on your phone or online¹
- Fast shipping, at no extra cost²
- Easy refills and free reminders to help make sure you don't miss a dose. Refill certain prescriptions by text.³
- 24/7 access to specialty-trained pharmacists and nurses experienced in complex medical conditions
- Personalized care services including counseling and training on how to administer your medication
- Help with applying for third-party copay assistance programs and other options

1. You'll see your first order in the myCigna App or website once Accredo ships it.
2. Standard shipping costs are included as part of your prescription plan.
3. The ability to refill prescriptions by text is only available for certain medications. To get text messages, you'll have to sign up for Accredo's texting service. You can do this when you call Accredo to refill your prescription. Once you sign up, simply reply to their welcome text to get started. Standard text messaging rates apply.



What you'll pay for prescriptions

In-network	OAP Plan			OAP HDHP		
	Retail (30-day supply)	Retail (90-day supply)	Home delivery (90-day supply)	Retail (30-day supply)	Retail (90-day supply)	Home delivery (90-day supply)
Tier 1 Generics	\$10	\$30	\$20	After deductible you pay 20%	After deductible you pay 20%	After deductible you pay 20%
Tier 2 Preferred brands	You pay 30% subject to min of \$25 and max of \$50	You pay 30% subject to min of \$75 and max of \$150	You pay 30% subject to min of \$25 and max of \$100	After deductible you pay 20%	After deductible you pay 20%	After deductible you pay 20%
Tier 3 Non-preferred brands	You pay 30% subject to a min of \$45 and max of \$75	You pay 30% subject to min of \$135 and max of \$225	You pay 30% subject to min of \$45 and max of \$120	After deductible you pay 20%	After deductible you pay 20%	After deductible you pay 20%

This chart shows the amounts you'll pay for covered services after you meet your plan deductible. Not all health benefit plans are the same, but in general, to be eligible for coverage, a medication must be approved by the U.S. Food and Drug Administration (FDA), prescribed by a health care professional, purchased from a licensed pharmacy and medically necessary. **All plans have exclusions and limitations.** Please check your plan documents for costs and complete details of your plan's prescription medication coverage.

Your vision plan



Your vision benefits

Discounts and savings available:

- 40% off additional pair of glasses (frames and lenses)
- 20% off any item not covered by the plan, including non-prescription sunglasses (excludes professional services)
- Up to \$1,000 discount on LASIK services with select providers available through Healthy Rewards®¹
- Polycarbonate lenses covered in-full for children under 19

Once enrolled, visit myCigna.com® to:

- Search for in-network providers and schedule appointments online²
- Use a cost estimator tool to calculate your out-of-pocket costs for covered and non-covered services
- View plan benefits, claim details, and your digital ID card
- Learn about international travel benefits such as help finding a provider or replacing glasses/contact lenses
- Access special offers from major retail and online providers
- Review articles and interactive content about vision health and wellness

1. **Healthy Rewards programs are NOT insurance.** Rather, these programs give a discount on the cost of certain goods and services. The customer must pay the entire discounted cost. Some Healthy Rewards programs are not available in all states and programs may be discontinued at any time. Participating providers are solely responsible for their goods and services

2. Online scheduling available with select providers.

Your vision benefits

	Passive Network
Exam Copay	\$0 Copay
Materials Allowances *Frequency*: Your Frequency Period begins on January 1 every year for exams and January 1 every other year for hardware.	\$500 Allowance
Prescription lenses	
Prescription frame	
Prescription contact lenses and professional services	
<i>*Declining balance can be applied towards any covered Materials (Frames, Lenses, and Contact Lenses) and drawn against throughout the stated frequency.</i>	

1. Plan benefits may be subject to frequency limitations. Please review your Benefit Summary for details, plan exclusions and limitations.
 2. Fee applicable to only those age 19 or older.





Support to Improve Your Health and Well-being

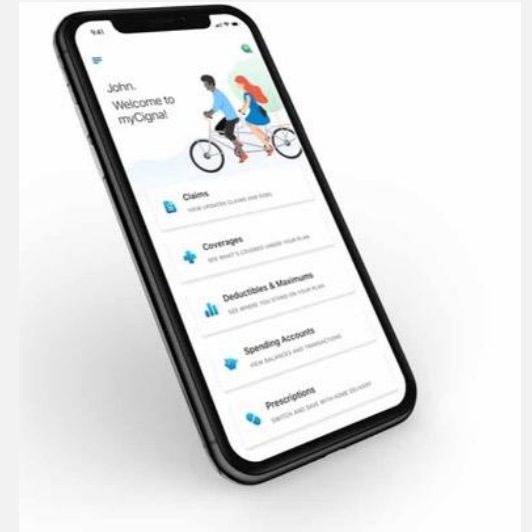
Offered by Cigna Health and Life Insurance Company, Connecticut General Life Insurance Company, or their affiliates. In Utah, plans are offered by Cigna Health and Life Insurance Company.

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Your online home for assessment tools, plan management, medical updates and much more:

- Find in-network doctors, dentists and medical services
- View, print and email ID cards
- Review your coverage
- Manage and track claims, account balances and deductibles
- Compare cost and quality information for doctors and hospitals
- Access a variety of health and wellness tools and resources
- Receive alerts when new plan documents are available
- Manage your home delivery prescription orders² or talk with a pharmacist
- Use the Price a Medication feature to explore medication costs³



 Download the **myCigna**[®] app and access your account.¹

For illustrative purposes only.

1. App/online store terms and mobile phone carrier/data charges apply. Actual myCigna[®] features may vary depending on your plan and individual security profile.

2. Not all plans include home delivery as a covered pharmacy option. Please log in to the myCigna[®] app or website, or check your plan materials, to learn more about the pharmacies in your plan's network.

3. Prices shown on myCigna[®] are not guaranteed and coverage is subject to your plan terms and conditions. Visit myCigna[®] for more information.

Cigna Healthcare Enhanced Behavioral Health^{SM1}

Large, national network

Includes national virtual network² that features Talkspace, MDLIVE, Headspace Care, and more. Online scheduling and text messaging. Appointment availability often in as little as two days.³ Appointment scheduling assistance provided.

Care Navigator

Special Care Navigators are available to support you with all your behavioral health needs, from matching to the right therapist to feeling better, and more.

In-the-moment clinical consultations

Speak with a clinician by phone 24/7/365. Connect directly with a licensed clinician for an unlimited number of 45-60 minute sessions for an evaluation, or to discuss your concerns, whenever you need to.

myCigna.com[®] guided navigation

Our digital portal includes guided navigation that provides you with customized, convenient care options (digital, coaching, virtual, and in person).

Coaching and support

Dedicated support for a broad range of conditions including autism, eating disorders, intensive behavioral case management, substance use, opioid and pain management, and parents and families.

24/7/365 crisis and emergency support

1. All Cigna Healthcare products and services are provided exclusively by or through operating subsidiaries of Cigna Corporation, including Evernorth Care Solutions, Inc., and Evernorth Behavioral Health, Inc. Use and distribution limited solely to authorized personnel.
2. Cigna Healthcare provides access to virtual care through national telehealth providers as part of your plan. This service is separate from your health plan's network and all services may not be available in all areas; subject to state regulations. Referrals are not required. Video may not be available in all areas or with all providers. Refer to plan documents for complete description of virtual care services and costs.
3. Employee assistance program services are in addition to, not instead of, your health plan benefits. These services are separate from your health plan benefits and do not provide reimbursement for financial losses. Customers are required to pay the entire discounted charge for any discounted legal and/or financial services. Legal consultations related to employment matters are excluded. Additional restrictions may apply. Program availability may vary by plan type and location, and are not available where prohibited by law.

Cigna Total Behavioral Health¹ online resources



myCigna.com[®] guided navigation

Our digital portal includes guided navigation that provides you with customized, convenient care options (digital, coaching, virtual, and in person)



Happify[™] offered through Cigna Healthcare

Increase resilience through games, guided meditations, and other activities. This digital self-guidance tool reduces stress while encouraging confidence²



iPrevail offered through Cigna Healthcare

On-demand peer coaching and personalized learning to help boost your mood and improve mental health care²

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2. Program services are provided by independent companies/entities and not by Cigna Healthcare. Programs and services are subject to all applicable program terms and conditions. Program availability is subject to change.

Health Information Line



Call the number on your ID card, 24/7/365

- Offers access to a trained clinician¹ to help you determine when and where to get treatment for immediate health care needs
- Provides guidance and education about both specific health concerns and general health topics



Chat via myCigna.com[®] website or app Mon-Fri 9:00 am – 8:00 pm EST²

- Provides suggestions for online tools or local resources to help support your physical and mental health needs
- Delivers access to audio health library (both in English and Spanish), as well as podcasts

1. These health advocates hold current nursing licensure in a minimum of one state but are not practicing nursing or providing medical advice in any capacity as a health advocate.

2. Excluding holidays.

Virtual care¹



Cigna Healthcare has partnered with MDLIVE[®] to offer a comprehensive suite of convenient virtual care options — available by phone or video whenever it works for you.

Primary Care

Preventive care, routine care and specialist referrals

- Preventive care checkups/ wellness screenings available at no additional cost²
- Prescriptions available through home delivery or at local pharmacies, if appropriate
- Receive orders for biometrics, blood work and screenings at local facilities³

Behavioral Care

Talk therapy and psychiatry from the privacy of home

- Access to psychiatrists and therapists
- Schedule an appointment that works for you
- Option to select the same provider for every session
- Care for issues such as anxiety, stress, grief and depression

Urgent Care

On-demand care for minor medical conditions

- On-demand 24/7/365, including holidays
- Care for hundreds of minor medical conditions
- A convenient and affordable alternative to urgent care centers and the ER
- Prescriptions available, if appropriate

Dermatology⁴

Fast, customized care for skin, hair and nail conditions — no appointment required

- Board-certified dermatologists review pictures and symptoms
- Care for common skin, hair and nail conditions including acne, eczema, psoriasis, rosacea, suspicious spots and more
- Diagnosis and customized treatment plan, usually within 24 hours

1. Cigna Healthcare provides access to virtual care through national telehealth providers as part of your plan. This service is separate from your health plan's network and may not be available in all areas or under all plans. Referrals are not required. Video may not be available in all areas or with all providers. Not all preventive care services are covered, refer to plan documents for complete description of virtual care services and costs. Virtual primary care through MDLIVE is only available for Cigna Healthcare medical members aged 18 and older.
2. For customers who have a non-zero preventive care benefit, MDLIVE virtual wellness screenings will not cost \$0 and will follow their preventive benefit.
3. Limited to labs contracted with MDLIVE for virtual wellness screenings.
4. Virtual dermatological visits through MDLIVE are completed via asynchronous messaging. Diagnoses requiring testing cannot be confirmed. Customers will be referred to seek in-person care. Treatment plans will be completed within a maximum of 3 business days, but usually within 24 hours.

Your Personal Health Team



When it comes to feeling better about your health, everyone has different needs. That's why we provide a designated personal team of health advocates to listen and help you find solutions.

- Address chronic conditions like diabetes, back pain, depression, arthritis, asthma or cardiac issues
- Partner one-on-one with a health advocate and take a more active role in your health
- Find help managing your care and get information about a variety of treatment options
- Get 24/7 support when you need help with things like your child's high fever or finding late-night medical treatment
- Know what to expect if you need to spend time in the hospital or require surgery
- Get answers to questions about your health plan

Cigna Healthcare Wellness Experience

How it works:

Reach your health goals while having fun. The Cigna HealthcareSM Wellness Experience puts powerful resources at your fingertips – at no additional cost to you.

- **Personalize your experience:** Connect your activity tracker and set topics of interest.
- **Complete a Health Check:** Answer questions to get a health score and learn about possible risks.
- **Track your Healthy Habits:** Follow a healthy routine by taking small steps.
- **Stay motivated:** You can invite up to 10 friends and family members outside of work.
- **Participate in fun challenges:** Join coworkers and motivate each other to build new healthy habits.



24/7 Customer Assistance



Reach us 24 hours a day,
seven days a week




Get answers to your health,
claims and benefit questions



Ask for a Spanish-speaking
service representative, or
someone who can translate
one of 200 languages



Order an ID card, update
insurance information,
check claim status
and more

 The answers you need are just a phone call away. Anytime you need us,
feel free to call the toll-free number on your ID card.

You cannot open an HSA if, in addition to coverage under an HSA-qualified High Deductible Health Plan ("HDHP"), you are also covered under a Health Flexible Spending Account (FSA) or an HRA or any other health coverage that is not a HDHP. The HSA provider and/or trustee/custodian will be solely responsible for all HSA services, transactions and activities related thereto. Neither your employer nor Cigna is responsible for any aspects of the HSA services, administration and operation.

Rates will vary by plan design. Coverage is subject to any applicable plan deductibles, copay and/or coinsurance requirements. Product availability may vary by location and plan type and is subject to change. All group health insurance policies and health benefit plans have exclusions and limitations. For costs and details of coverage, see your enrollment materials. The information in this presentation summarizes the highlights of your plan. For a complete list of both covered and not covered services, including benefits required by your state, see your employer's group insurance certificate, summary plan description or group service agreement – the official plan documents. If there are any differences between the information in this presentation and the plan documents, the information in the plan documents takes precedence.

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