

State of New Mexico

Your Medical Plan Options

Plan year: January - December 2024



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

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 Healthcare[®] network of providers, health care facilities, labs, x-ray and radiology centers, as well as emergency care



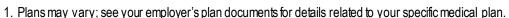
Deductible: You may pay an annual amount — a deductible — before your health plan begins to pay for covered health care costs. Only services covered by the health plan count toward the deductible



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

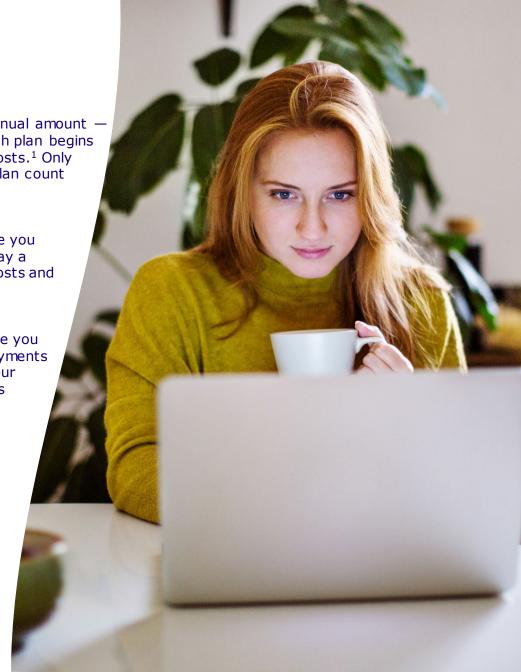


Out-of-pocket maximum: Once you meet an annual limit on your payments — out-of-pocket maximum — your plan pays 100% of covered costs



^{2.} Coinsurance is what you pay for covered services after you've metyour 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.





Open Access Plus In-network (OAPIN)



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



Specialist: You can see a specialist in the OAP network without a referral



Network: For your care to be covered, you must use health care professionals and health care facilities in the OAP network

- If you choose to see a doctor who is not in the network, you will not have coverage except in emergencies
- Use the Cigna Healthcare[®] network of providers, health care facilities, labs, x-ray and radiology centers, as well as emergency care



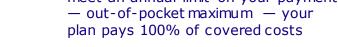
Deductible: You may pay an annual amount a deductible — before your health plan begins to pay for covered health care costs. 1 Only services covered by the health plan count toward the deductible



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



- 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-ofnetwork provider can bill you for charges that are more than what your benefit plan will pay.





PLANNING FOR YOUR MEDICAL COSTS

	OAP IN Plan			OAP Plan		
	Individual	Employee/Two- Person	Family	Single	Employee/Two- Person	Family
Deductible	\$500 In-network	\$1,000 In-network	\$1,500 In-network	\$750 In-network \$3,000 Out-of-network	\$1,500 In-network \$6,000 Out-of-network	\$2,250 In-network \$9,000 Out-of-network
Out-of-pocket maximum ¹	\$5,000 In-network	\$10,000 In-network	\$15,000 In-network	\$5,000 In-network \$9,000 Out-of-network	\$10,000 In-network \$18,000 Out-of-network	\$15,000 In-network \$27,000 Out-of-network
Lifetime maximum	Unlimited	Unlimited	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-cop-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.

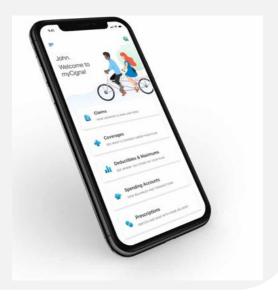


myCigna.com®

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





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 my Cigna® features may vary depending on your plan and individual security profile.



Virtual care¹

MDLIVE

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.



Virtual medical care¹

MDLIVE

Cigna Healthcare has partnered with MDLIVE $^{\otimes}$ to offer a comprehensive suite of convenient virtual care options — available by phone or video whenever it works for you. Conditions treated include:



- Acne
- Allergies
- Asthma
- Bronchitis
- Cold and flu

- Constipation
- Diarrhea
- Earaches
- Fever
- Headaches

- Insect bites
- Joint aches
- Nausea
- Pink eye
- Rashes

- Respiratory and sinus infections
- Sore throats
- Urinary tract infections

2. This is not an all-inclusive list. See your plan documents for details.



^{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.

Virtual behavioral care¹



Now you don't have to wait — or travel — for behavioral care. Cigna Healthcare has partnered with MDLIVE $^{(8)}$ so you can connect by video or phone to licensed therapists and psychiatrists, all from the privacy of home. Non-emergency behavioral/mental health conditions treated include:



- Addiction
- Bipolar disorder
- Child/adolescent issues
- Depression

- Eating issues
- Grief/loss
- Life changes
- Men's issues

- Postpartum depression
- Panic disorders
- Relationship and marriage issues

- Stress
- Parenting issues

1. This is not a full list and is subject to change. Cigna Healthcare provides access to virtual care through participating in-network providers. Not all providers have virtual capabilities. Cigna Healthcare also 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. All health care providers are solely responsible for the treatment provided to their patients; providers are not agents of Cigna Healthcare. Not all preventive care services are covered, refer to plan documents for complete description of virtual care services and costs.



Behavioral health support





Cigna Total Behavioral Health® (CTBH)¹

Clinical support

Three sessions to connect with licensed clinicians in our EAP network, at no additional cost to you²

24/7/365 crisis and emergency support

Happify[™] offered through Cigna

Increase resilience through games, guided meditations, and other activities. This digital self-guidance tool reduces stress while encouraging confidence³

iPrevail offered through Cigna

On-demand peer coaching and personalized learning to help boost your mood and improve mental health care³

myCigna.com[®] guided navigation

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

Large, national network

Includes national virtual network that includes Talkspace, MDLIVE, Ginger, and more. Online scheduling and text messaging. Fast Access network guarantees appointment scheduling in five business days.⁴ Appointment scheduling assistance provided.

Coaching & Support

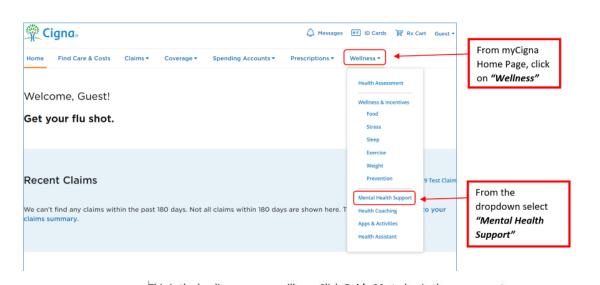
Dedicated support for a broad range of conditions including autism, eating disorders, intensive behavioral case management, substance use and opioid and pain management, and parents and families.

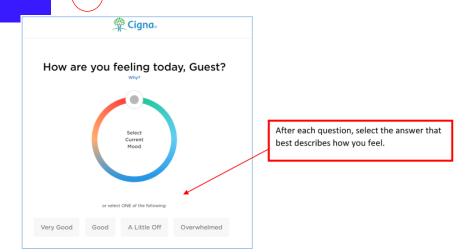
- 1. All Cigna products and services are provided exclusively by or through operating subsidiaries of Cigna Corporation, including Evernorth Care Solutions, Inc., and Evernorth Behavioral Health, Inc. Use and distribution limited solely to authorized personnel.
- 2. Three visits per issue per year. Restrictions apply to fully insured business sites in New York.
- 3. 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.
- 4. Per our agreement with contracted providers. Within 5 business days for first time appointment with non-prescriber; 15 business days for prescriber.



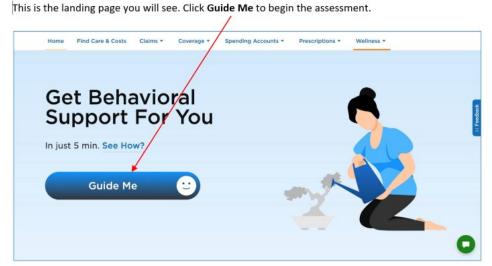
Mental Health Assessment Tool - myCigna



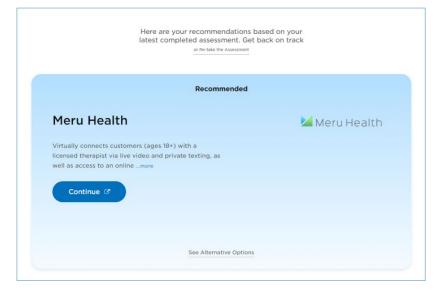
















Support to Improve Your Health and Well-being

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

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
- 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

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



myCigna® website or app¹



Live chat



Phone

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



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.



Health Information Line



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



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

- 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
- 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.



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Preventive Care



Many preventive services from in-network providers are covered 100% by your health plan. That means you won't pay anything out of your own pocket.

Covered preventive care services can include, but are not limited to:

- Screenings for blood pressure, cholesterol and diabetes
- Screenings for colon/rectal cancer
- Mammograms and Pap tests
- PSA blood tests

^{1.} Includes eligible in-network preventive care services. Some preventive care services may not be covered, including most immunizations for travel. Reference plan documents for a list of covered and non-covered preventive care service.





Cigna Healthy Babies



Available at no additional cost to you, Cigna Healthy Babies supports you throughout your pregnancy journey — and works to keep you and your baby healthy.

You'll get:

- A downloadable guide to help you learn about important pregnancy topics, including prenatal care, exercise, stress and depression
- 24/7 telephone access to a maternity specialist
- Access to information on the myCigna® website or from the Cigna Healthy Pregnancy® app¹
- Personalized support from a case manager if you're hospitalized during pregnancy or if your baby is in the NICU

You'll learn how to:

- Plan for a healthy pregnancy
- Monitor your pregnancy week by week
- Prepare for labor and delivery
- Care for your new baby



For more information about Cigna Healthy Babies, just call the number on your ID card.

1. The app is for educational purposes only. Medical advice isn't provided. Don't use information in this app to diagnose yourself. Always check with your health care provider for information about examinations, treatment, testing, and care recommendations. In an emergency, dial 911 or visit the nearest emergency room. App/online store terms and mobile phone carrier/data charges apply.



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Cigna Healthcare Lifestyle Management Programs

Our health advocates provide personalized support to help you make lasting changes.

- Weight management: Learn to manage your weight using a non-diet approach that helps you change habits, eat healthier and become more active
- Quit tobacco: Develop a personal quit plan to become and stay
 tobacco-free
- Reduce stress: Understand the sources of your stress and learn coping techniques to better manage it in all areas of your life

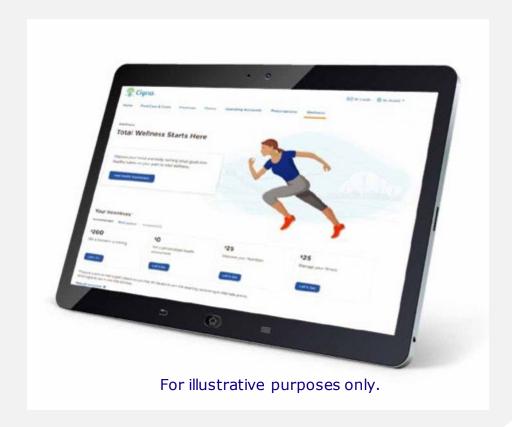
Use an online or telephone coaching program (or both) for the support you need.





Health Assessment

- First, complete your quick and easy online health assessment.
- Then, get a wellness score, as well as recommendations to start on a path to better health.
- Share your report with your doctor at your next visit.





Cigna Healthy Rewards® Program¹

Get discounts on the health products and programs you use every day, including:



Weight management and nutrition



Alternative medicine



Vision and hearing care



Fitness memberships and devices



Yoga products and virtual workouts

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.





Omada® for Cigna Healthcare®1

Omada is a digital lifestyle change program focused on building healthy, long-lasting habits.

- Designed to help you lose weight, gain energy and reduce the risks of type 2 diabetes and heart disease
- Surrounds you with the tools and support you need to make lasting, meaningful changes to the way you eat, move, sleep and manage stress — one small step at a time
- Teaches healthy habits guided by interactive online lessons and support groups, professional health coaching and a digitally connected scale
- Receive the program at no additional cost if you or your covered adult dependents are enrolled in the company medical plan offered through Cigna Healthcare[®], are at risk for type 2 diabetes or heart disease, and are accepted into the program

^{1.} The Omada® program is administered by Omada Health, Inc., an independent third-party service provider. Cigna Healthcare does not endorse or guarantee the products or services of any third parties and assumes no liability with respect to any such products or services.





Rewards for Healthy Actions

Cigna's Motivate Me® Program¹ rewards you for going the extra mile. When you achieve certain health and wellness goals, you'll receive rewards.

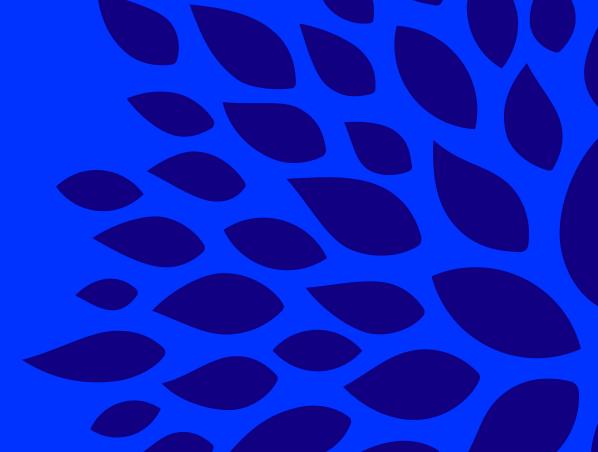
You can earn rewards for actions like taking a health assessment, getting a biometric screening, participating in a wellness program and getting annual preventive screenings.



If you are unable to participate in any of the program events, activities or goals due to a disability or other reason, you may be able to
get a reasonable accommodation for participation, or a different standard for rewards. Contact Cigna Healthcare for more information.
Incentives are funded by your employer and may be considered taxable income. Contact your personal tax advisor if you have
questions.



Thank you!



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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