



Offered by: Life Insurance Company of North America or Cigna Life Insurance Company of New York.

CRITICAL ILLNESS WELLNESS BENEFIT

Wellness Treatment, Health Screening Test or Preventive Care Benefit

Cigna Critical Illness Insurance

Your Cigna Critical Illness insurance plan comes with a \$50 Wellness Treatment, Health Screening Test or Preventive Care benefit. This benefit is paid for each covered person who completes at least one wellness treatment, health screening test or preventive care service, as specified below. This benefit is limited to one per year per covered person.

Wellness treatments

- › Adult immunizations
- › Cancer screenings
- › Colorectal cancer screenings
- › General health exams
- › Lead poisoning screenings
- › Osteoporosis screenings
- › Routine gynecological exams
- › Routine prostate exams
- › Well child care – including visits, labs and immunizations

Health screening tests

- › Bone marrow testing
- › Breast cancer blood test (CA 15-3)
- › Breast ultrasound
- › Chest x-ray
- › Colon cancer blood test (CEA)
- › Colonoscopy
- › Fasting blood glucose test
- › Flexible sigmoidoscopy
- › Hemocult stool specimen
- › Mammography
- › Myeloma blood test (serum protein electrophoresis)
- › Ovarian cancer blood test (CA125)
- › Pap smear for women over age 18
- › Prostate-specific antigen (for prostate cancer)
- › Serum cholesterol test to determine levels of HDL and LDL
- › Stress test on a bicycle or treadmill
- › Thermography
- › Triglycerides blood test

Together, all the way.®

Preventive care

The Patient Protection and Affordable Care Act (PPACA) requires preventive health services as recommended by the following expert medical and scientific bodies:

- › The United States Preventive Services Task Force (USPSTF);
- › The Advisory Committee on Immunization Practices (ACIP);
- › The Health Resources and Services Administration (HRSA's) Bright Futures Project; and
- › HRSA and the Institute of Medicine (IOM) committee on women's clinical preventive services.

Detailed information is available at www.healthcare.gov/coverage/preventive-care-benefits.

Benefit exclusions and limitations

Services must be provided under the direction of a physician.

Filing a claim is easy.

Simply download and complete your claim and disclosure authorization forms, which can be found at Cigna.com/customer-forms. Then, submit your forms via the method that's most convenient for you.

Phone: Call **800.642.8238** to speak with one of our dedicated customer service representatives

Fax: Send documents to our fax line at 860.730.6460

Email: Send scanned documents to: AccidentInjury/CriticalIllness@Cigna.com

Mail: Send documents to
Cigna Phoenix Claim Services
PO Box 55290
Phoenix, AZ 85078



GROUP CRITICAL ILLNESS INSURANCE POLICIES PAY LIMITED BENEFITS ONLY. THEY DO NOT CONSTITUTE COMPREHENSIVE HEALTH INSURANCE COVERAGE AND ARE NOT INTENDED TO COVER ALL MEDICAL EXPENSES. THIS COVERAGE DOES NOT SATISFY THE "MINIMUM ESSENTIAL COVERAGE" OR INDIVIDUAL MANDATE REQUIREMENTS OF THE AFFORDABLE CARE ACT (ACA). LACK OF MAJOR MEDICAL COVERAGE (OR OTHER MINIMUM ESSENTIAL COVERAGE) MAY RESULT IN AN ADDITIONAL PAYMENT WITH YOUR TAXES. COVERAGE IS NOT MEDICAID OR MEDICARE SUPPLEMENT INSURANCE.

Product availability may vary by location, plan type and group size and is subject to change. All group insurance policies and group benefit plans contain exclusions and limitations. Reduction of benefit provisions and terms under which the policy or plan may be continued in force or discontinued may also apply. For costs and complete details of coverage, contact your Cigna representative. Policy forms: Critical Illness - GCI-00-1000, GCI-02-1000, GCI-00-0000.OR, GCI-02-0000.OR et al.

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