

City of Portland

Supplemental Health insurance options

Plan year: 7/1/2025-12/31/2026

Insured by Cigna Health and Life Insurance Company



984173 06/24

Are you prepared for the cost and everyday reality of health care?

Cigna HealthcareSM Supplemental Health insurance products align to medical issues and resulting costs in the U.S.:



In 2022, the U.S. population had **63 million** injuries, resulting in **\$1.2+ billion** in costs.¹



In the U.S., someone has a **heart attack every 40 seconds**.² Over **1.9 million new cancer cases** are expected in 2023.³



In 2022, there were **33+ million** hospital admissions.⁴

3 out of 4

Americans list unexpected medical expenses as their top financial concern.⁵

50% of U.S. adults cannot pay an unexpected \$500 medical bill in full.⁶

National Safety Council. "National Safety Council Injury Facts." 2024. https://injuryfacts.nsc.org/. Last accessed June 18, 2024. 2. Centers for Disease Control and Prevention (CDC). (Page last reviewed May 15, 2022). "Heart Disease Facts." https://www.cdc.gov/heartdisease/facts.htm. 3. American Cancer Society.
"Cancer Facts & Figures 2023." https://www.cancer.org/content/dam/cancer-org/research/cancer-facts-and-statistics/annual-cancer-facts-and-figures/2023/2023-cancer-facts-and-figures.pdf April 2023. 4. American Hospital Association (AHA). (Last accessed June 18, 2024). "Fast Facts on U.S. Hospitals, 2023." (2023 Annual Survey results). https://www.aha.org/statistics/fast-facts-us-hospitals. May 2023. 5. KFF Polling. "Health Care Expenses Top List of Financial Worries." https://www.kff.org/affordable-care-act/poll-finding/kff-health-tracking-poll-february-2024-voters-on-two-key-health-care-issues-affordability-and-aca/. March 2024.
KFF Health Care Debt Survey. "Americans' Challenges with Health Care Costs." (Report). https://www.kff.org/health-costs/issue-brief/americans-challenges-with-health-care-costs/. March 2024. 7. Horvath, Hanna, et al. "Can medical bankruptcy help with medical bills?" USA Today. https://www.usatoday.com/money/blueprint/debt/can-medical-bankruptcy-help-with-medical-bills/#:~:text=About%2066.5%25%200f%20 bankruptcies%20are,less%20than%20a%20year%20old. November 2023.

More than 66% of U.S. bankruptcies were caused by medical issues.⁷



Supplemental Health benefits

Supplement your medical plan for extra support.

Cash benefits are paid directly to you.¹

When you have a covered health event across any of these plans:²

- Accidental Injury insurance
- Critical Illness insurance
- Hospital Care insurance

Use the money however you want.

It can be used for expenses beyond direct medical costs, including:

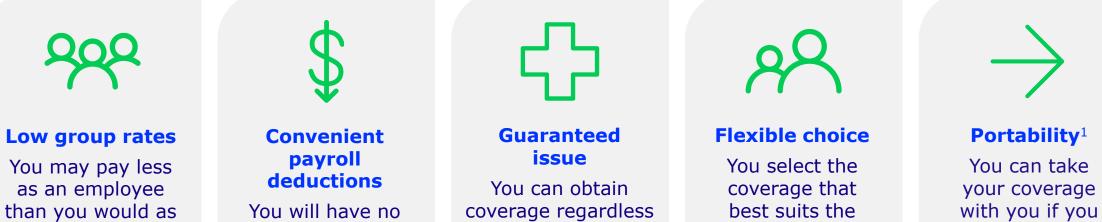
- Travel, room and board for medical treatment
- Childcare
- Treatment options not covered by traditional insurance
- Everyday household bills



Benefits may be paid directly to the hospital upon assignment
All plans have exclusions and limitations. Please review your policy for more information about what is and is not covered under your plan.

Supplemental Health benefits

Supplement your medical plan for extra support.



an individual for the same coverage

separate bills to pay or checks to write

coverage regardless of your medical history

needs of you and your family

retire or leave your company



We provide a seamless benefits solution.

We make it easy for you to get the maximum benefits you're entitled to with Cigna Simple File[®] capabilities.¹

• Auto compare:

We'll compare medical claims data and issue a reminder to submit eligible Supplemental Health claim.

Cigna Simple File® – Auto compare

Qualifying medical
$$+$$
 \bigcirc OR \bigcirc OR \bigcirc $=$



Cigna Simple File – Auto compare/Auto claim /Auto pay capabilities vary by line of coverage and specific products. The Simple File process is based on a one-time assessment of the initial claim documentation for the primary claim. Any subsequent events would not be identified, and the customer will need to submit a claim for any Supplemental Health benefits. There are limitations to Simple File, and not all claims will qualify or be approved.
Cigna Healthcare must be provided with an appropriate eligibility file and the client must have opted into Wellness Auto Pay.

Technology for simplicity and convenience via myCigna.com[®] and the myCigna[®] App¹

Online claim submission through myCigna

Upload documents

View and track claims status online

Online claims submission through myCigna Receive claim payment via
Electronic Funds Transfer (EFT)



Scan the QR code with your smartphone. Or visit **myCigna.com** to register today.



1. Customers under age 13 (and/or their parent/guardian) will not be able to register at myCigna.com. App/online store terms and mobile phone carrier/data charges apply.

Submitting a claim

To file your claim online:

- 1. Log in to myCigna.com®
- 2. Under the "Coverage" tab at the top of the page, select "Supplemental Health"
- 3. Scroll to the bottom of the page and click "Submit a Claim"
- 4. Complete the online claim form

myCigna.com[®] and the myCigna[®] app also allow you to:¹

- Enroll in direct deposit
- View personalized Supplemental Health plan information
- Track the status of claims
- Monitor and respond to correspondence
- View Explanations of Benefits (EOBs)



1. Customers under age 13 (and/or their parent/guardian) will not be able to register at myCigna.com. App/online store terms and mobile phone carrier/data charges apply. Actual myCigna features may vary depending on your plan and customer profile.

Hospital Care insurance

IMPORTANT: This is a fixed indemnity policy, NOT health insurance.

This fixed indemnity policy may pay you a limited dollar amount if you're sick or hospitalized. You're still responsible for paying the cost of your care. The payment you get isn't based on the size of your medical bill. There might be a limit on how much this policy will pay each year. This policy isn't a substitute for comprehensive health insurance. Since this policy isn't health insurance, it doesn't have to include most Federal consumer protections that apply to health insurance.

Looking for comprehensive health insurance?

Visit HealthCare.gov or call 1.800.318.2596 (TTY: 1.855.889.4325) to find health coverage options. To find out if you can get health insurance through your job, or a family member's job, contact the employer.

Questions about this policy?

For questions or complaints about this policy, contact your State Department of Insurance. Find their number on the National Association of Insurance Commissioners' website (naic.org) under "Insurance Departments." If you have this policy through your job, or a family member's job, contact the employer.



Hospital Care insurance

Pays benefits for a covered hospital stay for events like an in-patient procedure or birth of a child.

- After the first hospital stay, coverage continues, so you have additional protection for future hospital stays.^{1,2}
- You can use the money however you'd like.²

- The average hospital stay is 4.5 days.³
- The average out-of-pocket hospitalization expense with a medical plan is \$1,457.4

The average inpatient hospital stay in the United States: \$3,025 per day.⁵

- 1. The term Hospital does not include a clinic, facility for: (1) rehabilitation, convalescent, custodial, educational, hospice or skilled nursing care; (2) the aged, drug addiction or alcoholism; (3) a facility primarily or solely providing psychiatric services to mentally ill patients. The term Hospital also does not include a unit of a hospital for rehabilitation, convalescent, custodial, educational, hospice or skilled nursing care. Please refer to your plan documents as the actual definition of "Hospital" may vary by policy.
- 2. Pays a fixed-dollar amount from a schedule of benefits for a covered hospital event (i.e., hospital admission or stay). Benefits may be paid directly to the hospital on assignment.
- 3. Definitive Healthcare. "Healthcare Insights." https://www.definitivehc.com/resources/healthcare-insights/average-length-of-stay-by-state. June 2023.
- 4. GD&A Analysis of Cigna Medical Book of Business 2022.
- 5. Kaiser Family Foundation. Hospital Adjusted Expenses per Inpatient Day." 2022. https://www.kff.org/health-costs/state-indicator/expenses-per-inpatientday/?currentTimeframe=0&sortModel=%7B%22colld%22:%22Location%22,%22sort%22:%22asc%22%7D. Last Accessed June 2024.

Hospital Care Additional Features

Benefits details:

• Lump-sum benefit paid upon qualifying hospitalization event

Admission benefit examples¹

- Inpatient admission
- Inpatient chronic condition admission

These are single payout benefits (vs. daily) for when an admission to a hospital facility occurs. They pay in addition to the stay benefits and other benefits.

Stay benefit examples¹

- Hospital intensive care unit (ICU) stay
- Hospital stay (Non-ICU)
- Hospital observation stay

These benefits pay on a per-day basis (vs. single admission) when a hospital stay occurs. They pay in addition to the admission benefits and other benefits. Observation stay pays after a certain number of hours, versus per day.



1. Some benefit payouts vary by condition. These are examples only. Refer to your plan materials for the features of your specific plan. To receive benefits, the event must meet the terms and definitions of the policy. Waiting periods and frequency limitations may apply. Subject to all other plan exclusions and limitations. See Appendix A for more information.



Hospital Care example: Susan

Susan's estimate

Susan pays \$2.091 per paycheck for employee-only coverageAge: 34Hospitalization: Covered accident2

Expenses not covered by traditional medical insurance plan

Plan annual out of pocket

Indirect expenses (i.e. rent, mortgage, food, childcare, transportation, etc.)

Potential out-of-pocket costs \$2,000

Covered benefits paid by Hospital Care plan ¹		
Hospital admission	\$500	
Hospital ICU Stay (per day/ day 2+)	\$200	
Hospital stay (3 days)	\$300	
Benefits paid directly to Susan	\$1,000	

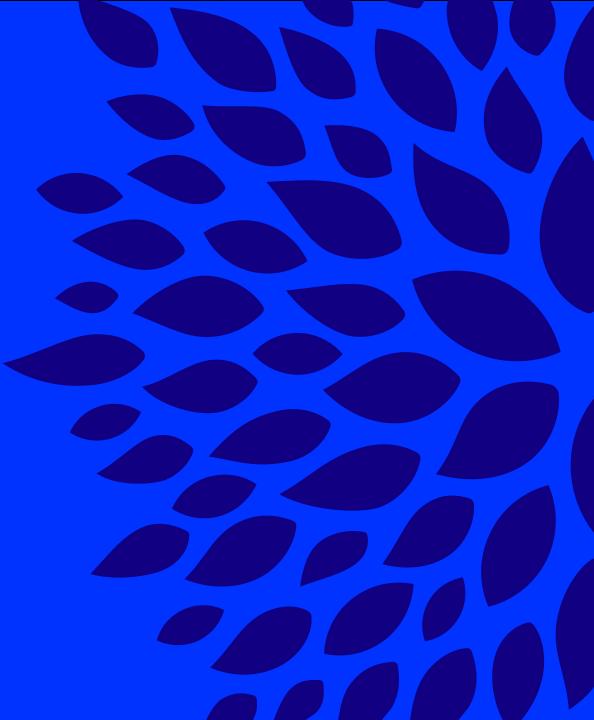


1. Refer to your policy for exclusions, limitations and premiums. See Appendix A for more information.

2. This is an example used for illustrative purposes only. It's not an actual Cigna Healthcare customer experience. Your plan's actual costs and benefit amounts may vary. Refer to your plan materials for the features of your specific plan. To receive benefits, the event must meet the terms and definitions of the policy. Waiting periods and frequency limitations may apply. Subject to all other plan exclusions and limitations.

Critical Illness insurance





Critical Illness insurance

Treating more conditions with more plan options

Benefits Details

Lump-sum benefit paid upon the diagnosis of a covered condition: \$5,000 \$10,000 \$20,000 or \$30,000

Covered conditions may include:¹

Vascular

- Heart attack
- Stroke
- Coronary artery disease

Cancer

- Invasive cancer
- Carcinoma in situ
- Skin cancer

Nervous system

- ALS (Lou Gehrig's disease)
- Advanced Alzheimer's disease
- Parkinson's disease
- Multiple Sclerosis

Childhood

- Cerebral palsy
- Cystic fibrosis
- Muscular dystrophy
- Poliomyelitis

Other specified conditions

- Paralysis
- Renal (kidney) failure
- Major organ failure
- Benign brain tumor
- Coma
- Blindness

Refer to benefit summary for details



1. Some benefit payouts vary by condition. These are examples only. Refer to your plan materials for the features of your specific plan. To receive benefits, the event must meet the terms and definitions of the policy. Waiting periods and frequency limitations may apply. Subject to all other plan exclusions and limitations. See Appendix B for more information.

Critical Illness Additional Features

Additional Features

Initial Diagnosis benefits:¹ Provides benefits when diagnosed with a different covered condition. A 6-month separation period applies.

Recurrence Diagnosis benefit:¹ Provides coverage after the first payout if a person is diagnosed with the same condition multiple times.

Wellness Incentive benefit: Benefit of \$50 per covered person, per calendar year, for a health screening or diagnostic test.





Critical Illness example: Marco

Marco's estimate

Marco pays \$1.871per paycheck for employee-only coverageAge: 40Diagnosis: Covered heart attack2

Expenses not covered by traditional medical insurance plan	Benefit for covered heart attack diagnosis	
Annual deductible and coinsurance	Upon covered diagnosis, lump-sum payment is issued directly to Marco to use as he sees fit.	
Other expenses not covered: [hotel costs, lost wages, childcare, everyday household expenses]	Benefits paid directly to Marco \$10,000	
Potential out-of-pocket costs \$5,250		



1. Refer to your policy for exclusions, limitations and premiums. See Appendix B for more information.

2. This is an example used for illustrative purposes only and is not based on an actual customer experience. It's not an actual Cigna Healthcare customer experience. Actual costs and benefit amounts under your specific plan or policy may vary. A heart attack requires confirmation by diagnostic testing. Examples include EKG or elevation of biochemical/cardiac enzyme markers.

Accidental Injury insurance



Accidental Injury insurance

\$

Helps to pay for expenses involved with a covered accident or injury.

Benefits may be payable for:¹

- Initial treatment
- Emergency room visit
- Hospitalization
 - Admission (per occurrence)
 - Confinement (per day)
- Follow-up care

Covered injuries may include:¹

- Broken bones
- Burns
- Dislocations
- Torn ligaments
- Concussions

- Eye injuries
- Ruptured discs
- Cuts requiring stitches

Refer to benefit summary for details.



1. These are examples only. Helps pay for fixed-dollar amounts from a schedule of benefits for a broad range of treatments or minor and major injuries resulting from a covered accident. Refer to your plan materials for the features of your specific plan. To receive benefits, the event must meet the terms and definitions of the policy. Waiting periods and frequency limitations may apply. Subject to all other plan exclusions and limitations. See Appendix C for more information.

Accidental Injury Additional Feature



AD&D

Provides coverage for death or dismemberment as the result of a covered accident.





Accidental Injury example: Chloe

Chloe's estimate

Chloe pays \$1.80¹ per paycheck for employee-only coverage

• Fell while playing soccer • Suffered broken leg and dislocated wrist²

Expenses not covered by major medical insurance plan	
Emergency room copay	
Deductible	
Surgery copay	
Potential out-of-pocket costs	\$3,850

Covered benefits paid by Accidental Injury plan		
Urgent care visit	\$100	
Diagnostic exam (X-ray)	\$60	
Broken leg (surgical)	\$2,000	
Wrist dislocation (non-surgical)	\$800	
Physical therapy visits	\$135	
Benefits paid directly to Chloe	\$3,095	

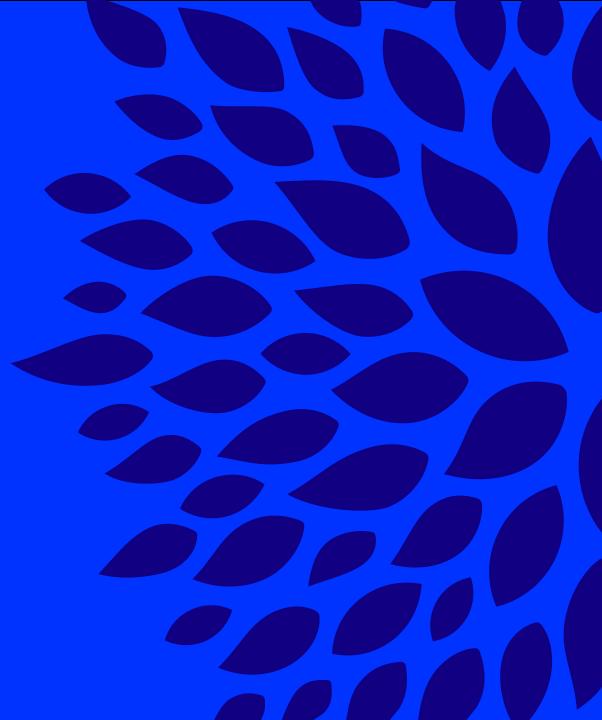


1. Refer to your policy for exclusions, limitations and premiums. See Appendix C for more information.

2. This is an example used for illustrative purposes only and assumes injuries were the direct result of a covered accident. It's not an actual Cigna Healthcare customer experience. Your actual costs and plan's actual benefit amounts may vary.

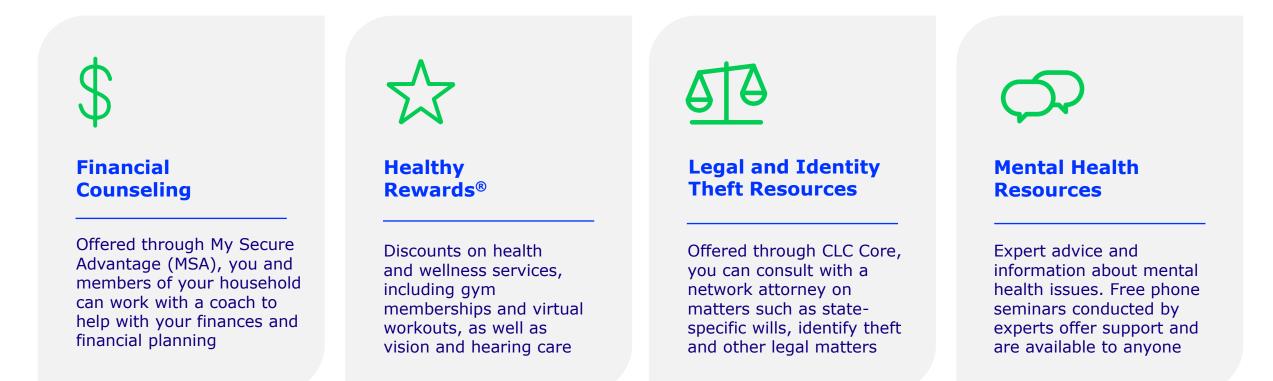
Programs to Support You





Programs and Services¹

Supporting wellness and financial health

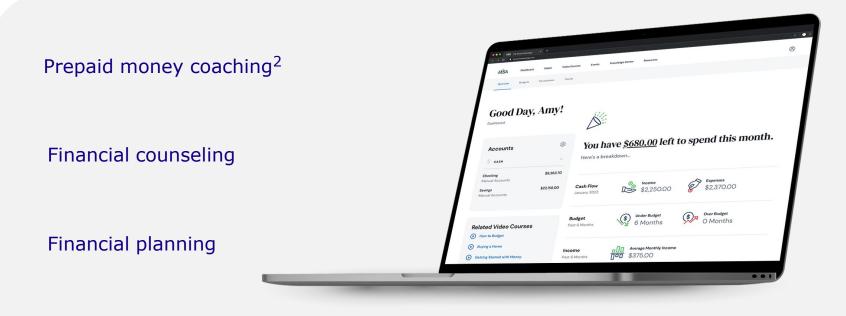




1. These programs are NOT insurance and do not provide reimbursement for financial losses. Full terms, conditions and exclusions are contained in the applicable client program description and are subject to change. Program availability may vary by plan type and location and is not available where prohibited by law. Customers are required to pay the entire discounted charge for any discounted products or services available through these programs. Participating third party vendors and providers are solely responsible for their goods and services.

My Secure Advantage¹

Full-service financial wellness



For illustrative purposes only.

Easy-to-use online portal to communicate with your coach, view educational webinars and access a library of financial tools, forms and tips

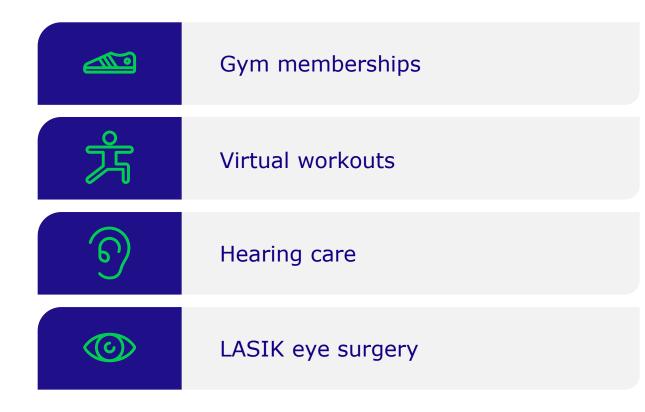
Representatives available Monday – Friday 9:00 am – 11:00 pm ET

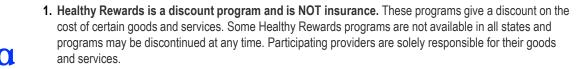


- 1. My Secure Advantage is NOT insurance and does not provide reimbursement for financial losses. Program is provided through a third-party vendor who is solely responsible for their products and services. Full terms, conditions and exclusions are contained in the applicable client program description and are subject to change. Program availability may vary by plan type and location and is not available where prohibited by law.
- 2. Customers may voluntarily purchase additional Money Coaching at their own expense.

Healthy Rewards[®] Program¹

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







Legal and Identity Theft Resources¹

Enhancing quality of life through legal programs and services



Legal Services

Includes one initial thirty-minute, no-cost consultation (per separate legal matter) with a network attorney. Virtually all types of legal matters are eligible for these services. Includes 25% discount off normal hourly rate if participating attorney is retained.



Mediation

Includes one initial thirty-minute, no-cost consultation (per separate legal matter) with a network mediator. Typical matters include divorce, child custody, contractual disputes, real estate, car accidents, etc. Includes 25% discount off normal hourly rate if participating mediator is retained.



Member Website

Includes unlimited access to a member website and its services, which features legal information and provides state-specific, fillable legal forms.

24-Hour Emergency Services

If you are jailed or arrested, you have after-hours and weekend access to legal providers. For non-emergency issues, you can receive assistance on the next business day during normal hours of operation.



 Offered through CLC Core, which is NOT insurance and does not provide reimbursement for financial losses. Programs are provided through a third-party vendor who is solely responsible for their products and services. Full terms, conditions and exclusions are contained in the applicable client program description and are subject to change. Program availability may vary by plan type and location and is not available where prohibited by law.

This program is available for:

- Civil/consumer issues
- Criminal matters
- Estate planning law
- Financial matters
- Immigration and naturalization
- IRS matters
- Personal/family legal services
- Real estate

Mental Health Resources



Expert advice and information about mental health issues

- Phone seminars conducted by guest experts in their field.
- Learn more about common issues, coping techniques and support services available.
- Free online seminars covering a wide range of topics open to anyone, including parents, caregivers and loved ones.
- Visit myCigna.com and click on Supplemental Health > Coverage tab to view the seminar schedule and learn more.





Appendix A

Hospital Care – Common exclusions and limitation

Product availability may vary by location and plan type and is subject to change. **This is a summary of benefits only. A complete description of benefits, limitations, exclusions and termination of coverage will be provided in the certificate of insurance and riders.** All coverage is subject to the terms and conditions of the group policy. If there is any discrepancy between this document and the group policy documents, the policy documents will govern.

- Hospital admission: Payable once per day, may be limited to one (1) day per admission and limited to one (1) benefit in a specified number of days (i.e. every 365 days). Must be admitted as an inpatient to the hospital. Excludes treatment in an emergency room or provided on an outpatient basis. Re-admission for the same covered injury or illness (including chronic conditions) may be limited.
- Hospital ICU stay and hospital stay: Payable once per day, may be limited to a number of days per stay (i.e. 10 days) or limited by the number of days between stays (i.e. one (1) stay every 365 days). Stays within a certain time frame (i.e. 180 days) for the same/related injury or illness may be considered the same stay. Must be admitted as an inpatient and confined to the hospital. If eligible for both benefits, only one (1) benefit will be paid per day, whichever is greater.

Benefits may not be paid for any loss that is the result of: (a) Intentionally self-inflicted injury, suicide or any attempt thereat while sane or insane; (b) Commission or attempt to commit a felony or an assault; (c) Declared or undeclared war or act of war; (d) Active duty service in the military, naval or air force of any country or international organization (Reserve or National Guard active duty training extending beyond 31 days); (e) Voluntary ingestion of any narcotic, drug, poison, gas or fumes, unless taken as prescribed by a physician; (f) Operating any type of vehicle while under the influence of alcohol or any drug, narcotic or other intoxicant; (g) Services deemed by the insurer as not being medically necessary; (h) Elective or cosmetic surgery; (i) Dental surgery, unless due to accidental injury; or (j) Services or treatment rendered by a person employed or retained by the covered person, providing homeopathic, aromatherapeutic or herbal therapeutic services, living in covered person's household, or who is a parent, sibling, spouse or child of the covered person and (k) In certain instances, pregnancy, including childbirth, occurring within a specified period of time following the date coverage is effective.



Appendix B

Critical Illness – Common exclusions and limitation

Product availability may vary by location and plan type and is subject to change. **This is a summary of benefits only. A complete description of benefits, limitations, exclusions and termination of coverage will be provided in the certificate of insurance and riders.** All coverage is subject to the terms and conditions of the group policy. If there is any discrepancy between this document and the group policy documents, the policy documents will govern.

Benefits may not be paid for a condition that existed before your effective date of coverage. The date of diagnosis must occur while coverage is in force and the condition definition must be satisfied. Only one initial benefit may be paid for each covered condition per person and benefits may be subject to separation periods and maximum lifetime limits may apply. Additional benefits may be available under the recurrence benefit, if included. Benefits may not be paid for any loss that is the result of: (a) Intentionally self-inflicted injury, suicide or any attempt thereat while sane or insane; (b) Commission or attempt to commit a felony or an assault; (c) Declared or undeclared war or act of war; (d) Active duty service in the military, naval or air force of any country or international organization (Reserve or National Guard active duty training is not excluded unless it extends beyond 31 days); (e) Voluntary ingestion of any narcotic, drug, poison, gas or fumes, unless taken as prescribed by a physician; (f) Operating any type of vehicle while under the influence of alcohol or any drug, narcotic or other intoxicant; (g) A diagnosis not in accordance with generally accepted medical principles prevailing in the U.S. at the time of diagnosis.





Accidental Injury – Common exclusions and limitation

Product availability may vary by location and plan type and is subject to change. **This is a summary of benefits only. A complete description of benefits, limitations, exclusions and termination of coverage will be provided in the certificate of insurance and riders.** All coverage is subject to the terms and conditions of the group policy. If there is any discrepancy between this document and the group policy documents, the policy documents will govern.

Benefits are only payable for covered injuries diagnosed and treated by a physician and resulting directly from a covered accident. Under most plans, treatment must begin within 90 days of the accident.

Physician office visit: Limited to one (1) benefit per accident. Excludes routine health examinations or immunizations, visits for mental or nervous disorders, or visits by a surgeon while confined to a hospital. Office visits include urgent care.

Diagnostic exam: Limited to one (1) benefit per accident and may also be limited to one (1) benefit per month.

Dislocation/fracture: If there is more than one type of fracture or dislocation, only one benefit will be paid for each injury, whichever is greater.

Follow-up physician visit and physical therapy: Limited number of treatments per accident and may also be limited to one accident per month. Physician recommendation is required. All treatments must be completed within 365 days of the accident. Follow-up Physician Office visit can include providers that are appropriately licensed professionals, including but not limited to those practicing chiropractic care, speech therapy, occupational therapy, vocational therapy, respiratory therapy, and mental health treatment associated with Covered Accidents.

Benefits may not be paid for any loss that is the result of: (a) Intentionally self-inflicted injury, suicide or any attempt thereat while sane or insane; (b) Commission or attempt to commit a felony or an assault; (c) Declared or undeclared war or act of war; (d) Active duty service in the military, naval or air force of any country or international organization; (e) Voluntary ingestion of any narcotic, drug, poison, gas or fumes, unless taken as prescribed by a physician; (f) Operating any type of vehicle while under the influence of alcohol or any drug, narcotic or other intoxicant; (g) Bungee jumping; parachuting; skydiving; parasailing; hang-gliding; (h) Flight in, boarding or alighting from an aircraft or any craft designed to fly above the Earth's surface (except as a fare-paying passenger on a regularly scheduled commercial airline); (i) Services or treatment rendered by a health care professional who is: providing homeopathic, aromatherapeutic or herbal therapeutic services; or (j) Sickness, disease, bodily or mental infirmity, bacterial or viral infection or medical or surgical treatment thereof (except for any bacterial infection resulting from an accidental external cut or wound or accidental ingestion of contaminated food).



THESE POLICIES PAY LIMITED BENEFITS ONLY. THEY ARE NOT COMPREHENSIVE HEALTH INSURANCE COVERAGE AND DO NOT COVER ALL MEDICAL EXPENSES. THIS COVERAGE DOES NOT SATISFY THE "MINIMUM ESSENTIAL COVERAGE" OR INDIVIDUAL MANDATE REQUIREMENTS OF THE AFFORDABLE CARE ACT (ACA). THIS COVERAGE IS NOT MEDICARE SUPPLEMENT INSURANCE.

The information in this presentation summarizes the highlights of your plans. For a complete list of both covered and non-covered services, including benefits required by your state, see your employer's group insurance policy, 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.

Product availability may vary by location and plan type and is subject to change. All group insurance policies may contain exclusions, limitations, reduction in benefits, and terms under which the policy may be continued in force or discontinued. For costs and details of coverage, contact your Cigna Healthcare representative.

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