

A Cigna Dental Health Connect® solution

# Cigna Dental Oral Health Integration Program®

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**Improved health  
starts with the  
mouth**

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Are you making  
the most of your  
dental benefits?



**Together, all the way.®**



## What is the Cigna Dental Oral Health Integration Program?

It's a program that reimburses out-of-pocket costs for preventive dental treatments to combat dental issues such as gum disease and tooth decay. The program is for people with certain medical conditions with a higher risk of oral health issues. There's no additional cost for the Oral Health Integration Program – if you qualify, you get reimbursed.\*

### Friendly customer support

Get guidance on everything from overcoming dental-related anxiety to understanding the impact of tobacco.

### Who qualifies?

If you have a Cigna dental plan, you're eligible for the program. You do NOT have to be enrolled in a Cigna medical plan to be eligible for this program. You must be treated by a doctor for any of the following conditions:

- › Heart disease
- › Stroke
- › Diabetes
- › Maternity
- › Chronic kidney disease
- › Organ transplants
- › Radiation for head or neck cancers
- › Rheumatoid arthritis
- › Sjogren's syndrome
- › Lupus
- › Parkinson's disease
- › Amyotrophic lateral sclerosis (ALS)
- › Huntington's disease
- › Opioid misuse and addiction

## How to enroll?

To get reimbursed, you first have to enroll in the Cigna Dental Oral Health Integration Program by either:

- › Going to **myCigna.com**, selecting Coverage > Dental and filling out the registration form online
- › Calling the number on the back of your Cigna ID card and asking for a mailed registration form

## What is the reimbursement process?

1. Go to your dentist and pay the copay or coinsurance for the covered treatment.
2. If your dentist is in the Cigna network, they'll send us a claim for reimbursement. If your dentist isn't in the Cigna network, you might need to submit the claim.\*\*
3. We'll review the claim and mail reimbursements for eligible dental services in about 30 days.

## What dental services are covered under the Cigna Dental Oral Health Integration Program?:<sup>1</sup>

Condition	Heart disease	Stroke	Diabetes	Maternity	Chronic kidney disease	Organ transplants	Radiation for head or neck cancers	Rheumatoid arthritis	Sjogren's syndrome	Lupus	Parkinson's disease	ALS	Huntington's disease	Opioid misuse and addiction
Gum treatment <sup>2</sup> D4341 D4342 D4910	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Gum evaluation <sup>3</sup> D0180				✓										
Oral evaluation <sup>3</sup> D0120 D0140 D0150				✓										✓
Cleaning <sup>4</sup> D1110				✓										
Scaling in the presence of inflammation <sup>4</sup> D4346				✓										
Palliative treatment of dental pain <sup>5</sup> D9110				✓										
Fluoride and fluoride varnish <sup>6</sup> D1206					✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Fluoride (no varnish) <sup>6</sup> D1208					✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Sealants <sup>6</sup> D1351					✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Sealant repair <sup>6</sup> D1353					✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Interim application of caries arresting medicament D1354					✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Caries preventive medicament application D1355					✓	✓	✓	✓	✓	✓	✓	✓	✓	✓

1. Eligibility, reimbursement and coverage for eligible services are subject to plan year maximums. 2. Two additional treatments per year than the plan covers. 3. One additional evaluation. 4. One additional cleaning. 5. Unlimited visits. 6. Open to all ages, but plan limits apply.





**Questions?**  
**Reach out to us 24/7 at**  
**800.Cigna24 (800.244.6224).**

\* You do not have to meet your DPPO or indemnity deductible to receive reimbursement for these services. However, reimbursement will apply to and is subject to your annual benefits maximum for traditional indemnity and DPPO plans as well as plan rules for visits to network dentists and out-of-network dentists.

\*\* The reimbursement for out-of-network services will also be subject to plan limitations for out-of-network care costs.



The Cigna Dental Oral Health Integration Program may not be available under your specific plan. Reimbursement under OHIP is subject to plan terms and conditions, including applicable annual benefit maximums and other exclusions and limitations. For costs and details of coverage, contact your Cigna representative or see your plan documents.

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