

# Cigna HealthCare OAP Network



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**T**he Bipartisan Budget Act of 2013 established a Self Plus One enrollment type in the Federal Employees Health Benefits (FEHB) Program. Coverage under a Self Plus One enrollment will be available beginning in January 2016. The first opportunity to enroll in Self Plus One will be during the annual federal benefits Open Season, beginning in November 2015.

You can find more information at [opm.gov/healthcare-insurance/special-initiatives/self-plus-one](http://opm.gov/healthcare-insurance/special-initiatives/self-plus-one).

## Open Access Plus (OAP) Network (High Option Plan)

We encourage you to use the Open Access Plus (OAP) Network to obtain our Plan's network benefits. The Plan makes a diligent effort to provide members with the most comprehensive and cost-effective benefit package, and the OAP network will allow our members to get the best value for their health care dollars. You will realize an immediate savings in your out-of-pocket costs when using an OAP provider due to deeper provider discounts. You have a choice of quality providers in a network that has received accreditation from the National Committee for Quality Assurance (NCQA) for your medical care.

The Cigna HealthCare OAP Network has a large national presence for network access. Your identification card displays its network logo that will get you discounts and enhanced savings for 7,817 general acute care hospitals, 18,788 facilities, 2,381,639 specialists and primary-care physicians and 155 transplant facilities.

You have great benefits when you choose a network hospital or a network provider:

- Maternity benefits for hospitalization, delivery, anesthesia and other services—100 percent benefit
- Non-maternity admissions—100 percent benefit after a \$200 copayment per admission
- Only \$20 copayment—per office, outpatient visit or consultation
- Only \$20 copayment—for physical, occupational or speech therapy visit
- Anesthesiologist, surgeon and other health care professionals services—85 percent benefit
- Outpatient hospital—85 percent benefit
- LabCorp- and Quest Diagnostics-covered laboratory services that they perform—100 percent benefit

You can locate an OAP provider or hospital, or verify that your provider participates in the Cigna HealthCare OAP network, by calling 877-220-NALC (6252) or visiting our Cigna HealthCare OAP Online Provider Directory.

When searching for a physician in the directory, the type of physician will always default to “Family Doctor/Primary Care Physician.” If you do not find your doctor listed under Family Doctor/Primary Care Physician, change the physician type to “Specialist” and search again. There are search tips to the right of the type of physician. Click there to help you in your search for a doctor.

Note: Providers listed in the directory does not guarantee that they are covered providers under the terms of the Plan or that their services are covered by the NALC Health Benefit Plan.

If you are aware of a provider who you think might be interested in joining the network and who is not currently contracted with Cigna, please fill out a provider nomination form and submit it to the Plan. Upon receiving the information, we will then submit it to Cigna for possible consideration in the network. Please keep in mind that the submission of the provider nomination form in no way guarantees the provider will be added to the network; however, we will do our best to work with Cigna to continue to expand their extensive network utilizing your suggestions as appropriate.

Please note that Cigna cannot approach or contract with all nominated providers. The following are a few examples of provider recruitment limitations:

- Providers must meet all credentialing and quality guidelines.
- Cigna may not be able to contract with a provider due to exclusivity provisions in another agreement or to promises that it would not contract with every provider in a given specialty in the service area.
- Providers need to have admitting privileges to a contracted hospital.
- Providers need to accept the standard fee schedule offered to other providers in the area.

**Note:** This is a summary of some of the features of the NALC Health Benefit Plan. For questions regarding covered providers or benefits, contact the NALC Health Benefit Plan or refer to the NALC Health Benefit Plan brochure RI 71-009 for detailed information regarding your benefits. All benefits are subject to the definitions, limitations and exclusions set forth in the official brochure.