Whether traveling this summer in the United States or at home relaxing, we encourage you to use the Open Access Plus (OAP) Network to obtain the Plan’s maximum network benefits when you need medical care.

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 from 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 allow you discounts and enhanced savings for 9,516 general acute care hospitals, 21,607 facilities, 2,488,401 specialists and primary care physicians, and 166 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 co-payment per admission
- Only $20 co-payment—per office, outpatient visit or consultation
- Only $20 co-payment—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
- 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 at nalchbp.org.

Here are some tips for using the OAP directory:

- When searching for a physician, 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.

What if my provider is not in the network?

Cigna is committed to superior customer satisfaction. It is interested in receiving referrals from our members regarding provider(s) you are interested in and/or have a good relationship with and who deliver excellent care.

If you are aware of a provider you think might be interested in joining the network but is not currently contracted with Cigna, follow these steps:

1. Go to nalchbp.org.
2. Click on the “High Option” tab at the top of the page.
3. Click on “Providers.”
4. Click on “Cigna.”
5. Click on “Provider Nomination Form.”

Print and fill in all the information required on the form. You should return the completed form to the Plan at NALC HBP—Attn: Provider Nominations, 20547 Waverly Court, Ashburn, VA 20149.

After receiving the information, we will then submit it to Cigna for possible network consideration. Please keep in mind that the submission of the provider nomination form in no way guarantees they will be added to the network. We will do our best to work with Cigna to continue to expand its extensive network using 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.
- They may not be able to contract with a provider due to exclusivity provisions in another agreement or promises that they would not contract with every provider in their specialty in the service area.
- Providers need to have admitting privileges to a contracted hospital.
- Providers need to accept their standard fee schedule offered to other providers in their area.

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