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2025 Cigna Healthcare Small Group Plans

Arizona

LocalPlus® and Open Access Plus Plans – PPO

Off-Exchange Only

Pending Regulatory Approval

LocalPlus Plans

Cigna Healthcare LocalPlus Platinum \$750	2
Cigna Healthcare LocalPlus Gold \$1,250	3
Cigna Healthcare LocalPlus Gold \$1,800	3
Cigna Healthcare LocalPlus Gold \$2,750	3
Cigna Healthcare LocalPlus Silver \$3,550	4
Cigna Healthcare LocalPlus Silver \$4,250	4
Cigna Healthcare LocalPlus Silver \$5,000	4
Cigna Healthcare LocalPlus Bronze \$7,500	5
Cigna Healthcare LocalPlus Bronze \$6,000 HSA	5
Cigna Healthcare LocalPlus Bronze \$7,900 HSA.....	5

Open Access Plus Plans

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2025 Cigna Healthcare

PLATINUM

LocalPlus – Arizona
PPO – Off-Exchange Only

Plan Name	CIGNA HEALTHCARE LOCALPLUS	
	PLATINUM \$750	
Annual Medical Deductible (individual/family)	\$750/\$1,500	
Coinsurance	You pay 15% after deductible	
Annual Out-Of-Pocket Max (individual/family)	\$3,000/\$6,000	
Physician Services (primary care/specialist)	You pay \$15, deductible waived/You pay \$20, deductible waived	
Preventive Care ¹ (in-person & virtual)	You pay \$0, deductible waived	
Inpatient Facility Services	You pay 15% after deductible	
Lab Office & Independent/Outpatient	You pay \$0, deductible waived/You pay 15% after deductible	
X-ray and Ultrasound	You pay 15% after deductible	
Emergency Room Services	You pay \$300, deductible waived	
Urgent Care	You pay \$50, deductible waived	
MDLive [®] Virtual Urgent Acute Care ²	You pay \$0, deductible waived	
Speech, Occupational, and Physical Therapy	You pay \$15, deductible waived	
Annual Pharmacy Deductible (individual/family)	Not Applicable	
Tier 1 - Retail Preferred Generic	You pay \$0, deductible waived	
Tier 2 - Retail Non-Preferred Generic	You pay \$15, deductible waived	
Tier 3 - Retail Preferred Brand	You pay \$35, deductible waived	
Tier 4 - Retail Non-Preferred Brand	You pay \$70, deductible waived	
Tier 5 - Retail Specialty and other high-cost medications	You pay 40%, deductible waived	
Preferred Insulin (Retail)	You pay up to \$25	

2025 Cigna Healthcare

GOLD

**LocalPlus – Arizona
PPO – Off-Exchange Only**

Plan Name	CIGNA HEALTHCARE LOCALPLUS		
	GOLD \$1,250	GOLD \$1,800	GOLD \$2,750
Annual Medical Deductible (individual/family)	\$1,250/\$2,500	\$1,800/\$3,600	\$2,750/\$5,500
Coinsurance	You pay 20% after deductible	You pay 20% after deductible	You pay 20% after deductible
Annual Out-Of-Pocket Max (individual/family)	\$7,250/\$14,500	\$7,000/\$14,000	\$6,750/\$13,500
Physician Services (primary care/specialist)	You pay \$35, deductible waived/You pay \$70, deductible waived	You pay \$25, deductible waived/You pay \$75, deductible waived	You pay \$20, deductible waived/You pay \$60, deductible waived
Preventive Care ¹ (in-person & virtual)	You pay \$0, deductible waived	You pay \$0, deductible waived	You pay \$0, deductible waived
Inpatient Facility Services	You pay 20% after deductible	You pay 20% after deductible	You pay 20% after deductible
Lab Office & Independent/Outpatient	You pay \$0, deductible waived/You pay 20% after deductible	You pay \$0, deductible waived/You pay 20% after deductible	You pay \$0, deductible waived/You pay 20% after deductible
X-ray and Ultrasound	You pay 20% after deductible	You pay 20% after deductible	You pay 20% after deductible
Emergency Room Services	You pay 20% after deductible	You pay \$500 after deductible	You pay \$600 after deductible
Urgent Care	You pay \$60, deductible waived	You pay \$60, deductible waived	You pay \$60, deductible waived
MDLive Virtual Urgent Acute Care ²	You pay \$0, deductible waived	You pay \$0, deductible waived	You pay \$0, deductible waived
Speech, Occupational, and Physical Therapy	You pay \$70, deductible waived	You pay \$75, deductible waived	You pay \$60, deductible waived
Annual Pharmacy Deductible (individual/family)	Not Applicable	Not Applicable	Not Applicable
Tier 1 - Retail Preferred Generic	You pay \$0, deductible waived	You pay \$0, deductible waived	You pay \$0, deductible waived
Tier 2 - Retail Non-Preferred Generic	You pay \$15, deductible waived	You pay \$15, deductible waived	You pay \$15, deductible waived
Tier 3 - Retail Preferred Brand	You pay \$60, deductible waived	You pay \$60, deductible waived	You pay \$60, deductible waived
Tier 4 - Retail Non-Preferred Brand	You pay \$130, deductible waived	You pay \$130, deductible waived	You pay \$130, deductible waived
Tier 5 - Retail Specialty and other high-cost medications	You pay 40%, deductible waived	You pay 40%, deductible waived	You pay 40%, deductible waived
Preferred Insulin (Retail)	You pay up to \$25	You pay up to \$25	You pay up to \$25

2025 Cigna Healthcare

SILVER

**LocalPlus – Arizona
PPO – Off-Exchange Only**

Plan Name	CIGNA HEALTHCARE LOCALPLUS		
	SILVER \$3,550	SILVER \$4,250	SILVER \$5,000
Annual Medical Deductible (individual/family)	\$3,550/\$7,100	\$4,250/\$8,500	\$5,000/\$10,000
Coinsurance	You pay 30% after deductible	You pay 30% after deductible	You pay 30% after deductible
Annual Out-Of-Pocket Max (individual/family)	\$9,200/\$18,400	\$9,200/\$18,400	\$8,500/\$17,000
Physician Services (primary care/specialist)	You pay \$45, deductible waived/You pay \$95, deductible waived	You pay \$55, deductible waived/You pay \$85, deductible waived	You pay \$45, deductible waived/You pay \$95, deductible waived
Preventive Care ¹ (in-person & virtual)	You pay \$0, deductible waived	You pay \$0, deductible waived	You pay \$0, deductible waived
Inpatient Facility Services	You pay 30% after deductible	You pay 30% after deductible	You pay 30% after deductible
Lab Office & Independent/Outpatient	You pay \$0, deductible waived/You pay 30% after deductible	You pay \$0, deductible waived/You pay 30% after deductible	You pay \$0, deductible waived/You pay 30% after deductible
X-ray and Ultrasound	You pay 30% after deductible	You pay 30% after deductible	You pay 30% after deductible
Emergency Room Services	You pay 30% after deductible	You pay \$800 after deductible	You pay \$700 after deductible
Urgent Care	You pay \$90, deductible waived	You pay \$90, deductible waived	You pay \$90, deductible waived
MDLive Virtual Urgent Acute Care ²	You pay \$0, deductible waived	You pay \$0, deductible waived	You pay \$0, deductible waived
Speech, Occupational, and Physical Therapy	You pay \$95, deductible waived	You pay \$85, deductible waived	You pay \$95, deductible waived
Annual Pharmacy Deductible (individual/family)	Not Applicable	Not Applicable	\$500/\$1,000
Tier 1 - Retail Preferred Generic	You pay \$0, deductible waived	You pay \$0, deductible waived	You pay \$0, deductible waived
Tier 2 - Retail Non-Preferred Generic	You pay \$25, deductible waived	You pay \$25, deductible waived	You pay \$25, deductible waived
Tier 3 - Retail Preferred Brand	You pay \$90, deductible waived	You pay \$90, deductible waived	You pay \$90 after pharmacy deductible
Tier 4 - Retail Non-Preferred Brand	You pay \$190, deductible waived	You pay \$190, deductible waived	You pay \$190 after pharmacy deductible
Tier 5 - Retail Specialty and other high-cost medications	You pay 40%, deductible waived	You pay 40%, deductible waived	You pay 40%, deductible waived
Preferred Insulin (Retail)	You pay up to \$25	You pay up to \$25	You pay up to \$25

2025 Cigna Healthcare

BRONZE

LocalPlus – Arizona
PPO – Off-Exchange Only

Plan Name	CIGNA HEALTHCARE LOCALPLUS		
	BRONZE \$7,500	BRONZE \$6,000 HSA	BRONZE \$7,900 HSA
Annual Medical Deductible (individual/family)	\$7,500/\$10,000	\$6,000/\$12,000	\$7,900/\$15,800
Coinsurance	You pay 30% after deductible	You pay 30% after deductible	You pay 0% after deductible
Annual Out-Of-Pocket Max (individual/family)	\$9,200/\$18,400	\$8,000/\$16,000	\$7,900/\$15,800
Physician Services (primary care/specialist)	You pay \$60, deductible waived/You pay \$150, deductible waived	You pay 30% after deductible	You pay 0% after deductible
Preventive Care ¹ (in-person & virtual)	You pay \$0, deductible waived	You pay \$0, deductible waived	You pay \$0, deductible waived
Inpatient Facility Services	You pay 30% after deductible	You pay 30% after deductible	You pay 0% after deductible
Lab Office & Independent/Outpatient	You pay 30% after deductible/You pay 40% after deductible	You pay 30% after deductible	You pay 0% after deductible
X-ray and Ultrasound	You pay 30% after deductible	You pay 30% after deductible	You pay 0% after deductible
Emergency Room Services	You pay 30% after deductible	You pay 30% after deductible	You pay 0% after deductible
Urgent Care	You pay \$120, deductible waived	You pay 30% after deductible	You pay 0% after deductible
MDLive Virtual Urgent Acute Care ²	You pay \$0, deductible waived	You pay 0% after deductible	You pay 0% after deductible
Speech, Occupational, and Physical Therapy	You pay 30% after deductible	You pay 30% after deductible	You pay 0% after deductible
Annual Pharmacy Deductible (individual/family)	\$1,050/\$2,100	Combined with Medical	Combined with Medical
Tier 1 - Retail Preferred Generic	You pay \$0, deductible waived	You pay \$0 after deductible	You pay 0% after deductible
Tier 2 - Retail Non-Preferred Generic	You pay \$35, deductible waived	You pay \$25 after deductible	You pay 0% after deductible
Tier 3 - Retail Preferred Brand	You pay \$100 after pharmacy deductible	You pay \$75 after deductible	You pay 0% after deductible
Tier 4 - Retail Non-Preferred Brand	You pay \$200 after pharmacy deductible	You pay \$150 after deductible	You pay 0% after deductible
Tier 5 - Retail Specialty and other high-cost medications	You pay 40%, deductible waived	You pay 40% after deductible	You pay 0% after deductible
Preferred Insulin (Retail)	You pay up to \$25	You pay up to \$25 after deductible	You pay up to \$25 after deductible

2025 Cigna Healthcare

PLATINUM

Open Access Plus – Arizona
PPO – Off-Exchange Only

Plan Name	CIGNA HEALTHCARE OPEN ACCESS PLUS	
	PLATINUM \$750	
Annual Medical Deductible (individual/family)	\$750/\$1,500	
Coinsurance	You pay 15% after deductible	
Annual Out-Of-Pocket Max (individual/family)	\$3,000/\$6,000	
Physician Services (primary care/specialist)	You pay \$15, deductible waived/You pay \$20, deductible waived	
Preventive Care ¹ (in-person & virtual)	You pay \$0, deductible waived	
Inpatient Facility Services	You pay 15% after deductible	
Lab Office & Independent/Outpatient	You pay \$0, deductible waived/You pay 15% after deductible	
X-ray and Ultrasound	You pay 15% after deductible	
Emergency Room Services	You pay \$300, deductible waived	
Urgent Care	You pay \$50, deductible waived	
MDLive Virtual Urgent Acute Care ²	You pay \$0, deductible waived	
Speech, Occupational, and Physical Therapy	You pay \$15, deductible waived	
Annual Pharmacy Deductible (individual/family)	Not Applicable	
Tier 1 - Retail Preferred Generic	You pay \$0, deductible waived	
Tier 2 - Retail Non-Preferred Generic	You pay \$15, deductible waived	
Tier 3 - Retail Preferred Brand	You pay \$35, deductible waived	
Tier 4 - Retail Non-Preferred Brand	You pay \$70, deductible waived	
Tier 5 - Retail Specialty and other high-cost medications	You pay 40%, deductible waived	
Preferred Insulin (Retail)	You pay up to \$25	

2025 Cigna Healthcare

GOLD

**Open Access Plus – Arizona
PPO – Off-Exchange Only**

CIGNA HEALTHCARE OPEN ACCESS PLUS

Plan Name	GOLD \$1,250	GOLD \$1,800	GOLD \$2,750
Annual Medical Deductible (individual/family)	\$1,250/\$2,500	\$1,800/\$3,600	\$2,750/\$5,500
Coinsurance	You pay 20% after deductible	You pay 20% after deductible	You pay 20% after deductible
Annual Out-Of-Pocket Max (individual/family)	\$7,250/\$14,500	\$7,000/\$14,000	\$6,750/\$13,500
Physician Services (primary care/specialist)	You pay \$35, deductible waived/You pay \$70, deductible waived	You pay \$25, deductible waived/You pay \$75, deductible waived	You pay \$20, deductible waived/You pay \$60, deductible waived
Preventive Care ¹ (in-person & virtual)	You pay \$0, deductible waived	You pay \$0, deductible waived	You pay \$0, deductible waived
Inpatient Facility Services	You pay 20% after deductible	You pay 20% after deductible	You pay 20% after deductible
Lab Office & Independent/Outpatient	You pay \$0, deductible waived/You pay 20% after deductible	You pay \$0, deductible waived/You pay 20% after deductible	You pay \$0, deductible waived/You pay 20% after deductible
X-ray and Ultrasound	You pay 20% after deductible	You pay 20% after deductible	You pay 20% after deductible
Emergency Room Services	You pay 20% after deductible	You pay \$500 after deductible	You pay \$600 after deductible
Urgent Care	You pay \$60, deductible waived	You pay \$60, deductible waived	You pay \$60, deductible waived
MDLive Virtual Urgent Acute Care ²	You pay \$0, deductible waived	You pay \$0, deductible waived	You pay \$0, deductible waived
Speech, Occupational, and Physical Therapy	You pay \$70, deductible waived	You pay \$75, deductible waived	You pay \$60, deductible waived
Annual Pharmacy Deductible (individual/family)	Not Applicable	Not Applicable	Not Applicable
Tier 1 - Retail Preferred Generic	You pay \$0, deductible waived	You pay \$0, deductible waived	You pay \$0, deductible waived
Tier 2 - Retail Non-Preferred Generic	You pay \$15, deductible waived	You pay \$15, deductible waived	You pay \$15, deductible waived
Tier 3 - Retail Preferred Brand	You pay \$60, deductible waived	You pay \$60, deductible waived	You pay \$60, deductible waived
Tier 4 - Retail Non-Preferred Brand	You pay \$130, deductible waived	You pay \$130, deductible waived	You pay \$130, deductible waived
Tier 5 - Retail Specialty and other high-cost medications	You pay 40%, deductible waived	You pay 40%, deductible waived	You pay 40%, deductible waived
Preferred Insulin (Retail)	You pay up to \$25	You pay up to \$25	You pay up to \$25

2025 Cigna Healthcare

SILVER

**Open Access Plus – Arizona
PPO – Off-Exchange Only**

Plan Name	CIGNA HEALTHCARE OPEN ACCESS PLUS		
	SILVER \$3,550	SILVER \$4,250	SILVER \$5,000
Annual Medical Deductible (individual/family)	\$3,550/\$7,100	\$4,250/\$8,500	\$5,000/\$10,000
Coinsurance	You pay 30% after deductible	You pay 30% after deductible	You pay 30% after deductible
Annual Out-Of-Pocket Max (individual/family)	\$9,200/\$18,400	\$9,200/\$18,400	\$8,500/\$17,000
Physician Services (primary care/specialist)	You pay \$45, deductible waived/You pay \$95, deductible waived	You pay \$55, deductible waived/You pay \$85, deductible waived	You pay \$45, deductible waived/You pay \$95, deductible waived
Preventive Care ¹ (in-person & virtual)	You pay \$0, deductible waived	You pay \$0, deductible waived	You pay \$0, deductible waived
Inpatient Facility Services	You pay 30% after deductible	You pay 30% after deductible	You pay 30% after deductible
Lab Office & Independent/Outpatient	You pay \$0, deductible waived/You pay 30% after deductible	You pay \$0, deductible waived/You pay 30% after deductible	You pay \$0, deductible waived/You pay 30% after deductible
X-ray and Ultrasound	You pay 30% after deductible	You pay 30% after deductible	You pay 30% after deductible
Emergency Room Services	You pay 30% after deductible	You pay \$800 after deductible	You pay \$700 after deductible
Urgent Care	You pay \$90, deductible waived	You pay \$90, deductible waived	You pay \$90, deductible waived
MDLive Virtual Urgent Acute Care ²	You pay \$0, deductible waived	You pay \$0, deductible waived	You pay \$0, deductible waived
Speech, Occupational, and Physical Therapy	You pay \$95, deductible waived	You pay \$85, deductible waived	You pay \$95, deductible waived
Annual Pharmacy Deductible (individual/family)	Not Applicable	Not Applicable	\$500/\$1,000
Tier 1 - Retail Preferred Generic	You pay \$0, deductible waived	You pay \$0, deductible waived	You pay \$0, deductible waived
Tier 2 - Retail Non-Preferred Generic	You pay \$25, deductible waived	You pay \$25, deductible waived	You pay \$25, deductible waived
Tier 3 - Retail Preferred Brand	You pay \$90, deductible waived	You pay \$90, deductible waived	You pay \$90 after pharmacy deductible
Tier 4 - Retail Non-Preferred Brand	You pay \$190, deductible waived	You pay \$190, deductible waived	You pay \$190 after pharmacy deductible
Tier 5 - Retail Specialty and other high-cost medications	You pay 40%, deductible waived	You pay 40%, deductible waived	You pay 40%, deductible waived
Preferred Insulin (Retail)	You pay up to \$25	You pay up to \$25	You pay up to \$25

2025 Cigna Healthcare

BRONZE

**Open Access Plus – Arizona
PPO – Off-Exchange Only**

Plan Name	CIGNA HEALTHCARE OPEN ACCESS PLUS		
	BRONZE \$7,500	BRONZE \$6,000 HSA	BRONZE \$7,900 HSA
Annual Medical Deductible (individual/family)	\$7,500/\$10,000	\$6,000/\$12,000	\$7,900/\$15,800
Coinsurance	You pay 30% after deductible	You pay 30% after deductible	You pay 0% after deductible
Annual Out-Of-Pocket Max (individual/family)	\$9,200/\$18,400	\$8,000/\$16,000	\$7,900/\$15,800
Physician Services (primary care/specialist)	You pay \$60, deductible waived/You pay \$150, deductible waived	You pay 30% after deductible	You pay 0% after deductible
Preventive Care ¹ (in-person & virtual)	You pay \$0, deductible waived	You pay \$0, deductible waived	You pay \$0, deductible waived
Inpatient Facility Services	You pay 30% after deductible	You pay 30% after deductible	You pay 0% after deductible
Lab Office & Independent/Outpatient	You pay 30% after deductible/You pay 40% after deductible	You pay 30% after deductible	You pay 0% after deductible
X-ray and Ultrasound	You pay 30% after deductible	You pay 30% after deductible	You pay 0% after deductible
Emergency Room Services	You pay 30% after deductible	You pay 30% after deductible	You pay 0% after deductible
Urgent Care	You pay \$120, deductible waived	You pay 30% after deductible	You pay 0% after deductible
MDLive Virtual Urgent Acute Care ²	You pay \$0, deductible waived	You pay 0% after deductible	You pay 0% after deductible
Speech, Occupational, and Physical Therapy	You pay 30% after deductible	You pay 30% after deductible	You pay 0% after deductible
Annual Pharmacy Deductible (individual/family)	\$1,050/\$2,100	Combined with Medical	Combined with Medical
Tier 1 - Retail Preferred Generic	You pay \$0, deductible waived	You pay \$0 after deductible	You pay 0% after deductible
Tier 2 - Retail Non-Preferred Generic	You pay \$35, deductible waived	You pay \$25 after deductible	You pay 0% after deductible
Tier 3 - Retail Preferred Brand	You pay \$100 after pharmacy deductible	You pay \$75 after deductible	You pay 0% after deductible
Tier 4 - Retail Non-Preferred Brand	You pay \$200 after pharmacy deductible	You pay \$150 after deductible	You pay 0% after deductible
Tier 5 - Retail Specialty and other high-cost medications	You pay 40%, deductible waived	You pay 40% after deductible	You pay 0% after deductible
Preferred Insulin (Retail)	You pay up to \$25	You pay up to \$25 after deductible	You pay up to \$25 after deductible

1. Includes eligible in-network preventive care services. Some preventive care services may not be covered, including most immunizations for travel. Reference plan documents for a list of covered and non-covered preventive care services.
2. \$0 virtual care (no cost share) for eligible preventive care and Dedicated Virtual Urgent Care for minor acute medical conditions. Not available for all plans. HSA plans and non-minor acute medical care may apply a copay, coinsurance or deductible. Cigna Healthcare provides access to Dedicated Virtual Care through a national telehealth provider, MDLive located on myCigna®, as part of your health plan. Providers are solely responsible for any treatment provided to their patients.

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