



# Real support for real life.

Your 2025 Cigna Healthcare welcome guide.

JPMorganChase



# Welcome to Cigna Healthcare.

## Included Health is your health care guide.

Included Health services are available to JPMorganChase employees and covered dependents who live in Florida, Georgia, Louisiana and Oklahoma, and are enrolled in the JPMC U.S. Medical Plan.

Employees and their covered dependents enrolled in the Medical Plan will have expanded services through Included Health. This is an additional benefit that works in coordination with your Cigna Healthcare<sup>SM</sup> medical insurance so you can get the most out of your health care. You'll still have the same access to the Cigna Healthcare covered services and providers, at the same cost.



## Included Health's dedicated team will guide you through all your health care needs.



Included Health Care Coordinators will guide you through your health care benefits, and support all your health care needs through a concierge approach:<sup>1</sup>

- Understand your Cigna Healthcare insurance coverage and cost
- Find solutions to health care insurance problems, such as coordinating authorization for services, understanding medical bills and resolving billing errors
- Manage your health through care and disease management services for new and ongoing chronic conditions
- Find quality Cigna Healthcare network providers, get treatment decision support and second medical opinions
- Get virtual primary care and urgent care services
- And much more!



# MyCigna tools

## On myCigna.com and the myCigna App:

**myCigna.com**® and the **myCigna**® App make it easy to manage your dental plan (if elected), access your Medical Reimbursement Account (MRA), Health Care Spending Account (HCSA) and Dependent Care Spending Account (DCSA) balances, track your wellness activities, receive online or live support for body and mind, and even view your ID cards – all in one place.

Register today, if you haven't done so already, on **myCigna.com**,<sup>2</sup> or download the **myCigna App**<sup>3</sup> to get started.

### Track your funds

Keep track of your MRA, HCSA and DCSA, all in one place.

### It's easy to manage and pay claims

- Opt in to **automatic claims** and have Cigna Healthcare automatically pay your portion of eligible medical and prescription drug expenses using your MRA and/or HCSA funds.
- Elect the debit card option during annual enrollment and use your MRA and/or HCSA debit card to make payments right at the provider's office.
- Check balances and pay claims online.

### Access JPMC Wellness Rewards

JPMorganChase is offering medical payroll contribution savings in 2025 to employees and covered spouse/domestic partners who complete both a biometric wellness screening and an online wellness assessment between **November 18, 2023 and November 22, 2024 (11:59 p.m. ET)**. To check the status of your Wellness Screening and Assessment, type "go/myhealth" into your intranet browser > Track Your Wellness Screening and Assessment. Or, visit **myCigna.com > Wellness**.

You as the JPMC employee can still earn 2024 wellness rewards by completing wellness activities through **December 31, 2024**.<sup>4</sup> To view available activities from your Intranet browser, type "go/myhealth"> My MRA Additional Wellness Activities. Or, visit **myCigna.com > Wellness**.

# Programs & services

## WINFertility

WINFertility nurses can help you select a high-quality provider, understand your treatment options and provide clinical and emotional support along your family-planning journey. Family Building benefits have a \$35,000 medical lifetime limit (enrollment with WINFertility and completion of a nurse consultation is required to unlock this benefit level; otherwise, the medical lifetime limit is \$10,000). To enroll with WINFertility, call **833.439.1517**, Monday through Friday, from 9:00 a.m. to 9:00 p.m. ET.<sup>5</sup>

## Employee Assistance Program (EAP) Powered by Spring Health

Get personalized behavioral health and well-being support at no cost to you, including:<sup>6</sup>

- Counseling with fast access to virtual and in-person appointments.
- Coaching for emotional strength and conditioning and dealing with life's daily challenges.
- On-demand digital, self-guided exercises.

Get started on **jpmc.springhealth.com** or call **877.576.2007**.

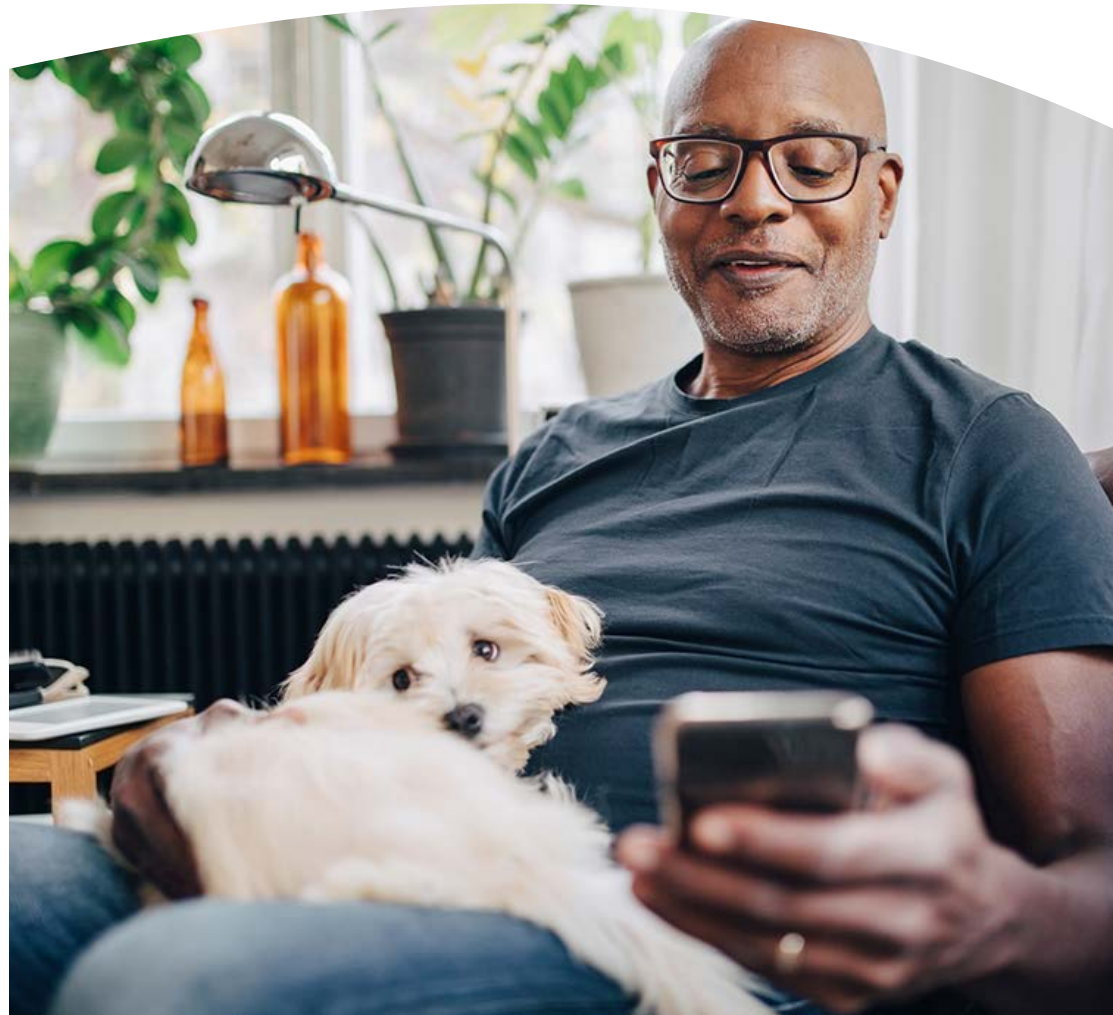




# Transition of care

Undergoing treatment for a serious illness or condition and have to switch doctors? If you're new to Cigna Healthcare and your current provider is outside of our network, you may be eligible to continue seeing your doctor for a limited period of time and have your care covered at the in-network level under your plan's Transition of Care (TOC) benefit.

To learn more about TOC and/or apply for this benefit, complete the **TOC form**. For questions or assistance call Included Health's dedicated care team at **833.938.9874**, available 24/7.



# Understanding your EOB

When a claim is filed for medical care you've received, an explanation of benefits (EOB) like the one shown below will summarize the costs associated with your medical care, so you can quickly see:

1. What expenses were submitted.
2. What's been paid by your plan and how much was paid by your MRA or HCSA, if you have one.
3. The balance you may still owe after Cigna Healthcare and your MRA/HCSA payments have been made.

*Quick tip: When you receive a bill from your doctor, you can check the amount you are being billed against the balance shown on your EOB.*

4. Your savings – the amount you saved by visiting an in-network provider or facility.

Note: If you have any questions regarding your medical benefits and/or claims, please contact Included Health at **833.938.9874**, available 24/7 or visit [includedhealth.com/jpmc-aic](https://includedhealth.com/jpmc-aic)

Explanation of benefits		
for a claim received for JOE SOMEBODY, Claim # 9999999999		
Patient's relationship to Subscriber: SUBSCRIBER		
Subscriber Name: JOE SOMEBODY		
Summary of a claim for services on May 29, 2020		
for services provided by I WELLBEING MD		
1	Amount Billed	\$900.00 This was the amount that was billed for your visit on 05/29/2018.
	Discount	\$0.00 CIGNA negotiates discounts with health care professionals and facilities to help you save money. Using an in-network option is one way you can save. Visit myCIGNA.com or call Customer Service to learn more.
	Amount not covered	\$400.00 This is the portion of your bill that's not covered by your plan. You may or may not need to pay this amount. See the Notes section on the following pages for more information. The total amount of what is not allowed and/or not covered is \$400.00 of which you owe \$0.00.
2	What your plan paid	\$140.00 This is a correction of a previously processed claim.
3	What I owe	\$360.00 This is the amount you owe after your discount, your plan paid, and what your accounts paid. People usually owe because they may have a deductible, have to pay a percentage of the covered amount, or for care not covered by their plan. Any amount you paid since care was received may reduce the amount you owe.
4	You saved	15% You saved \$140.00 (or 15%) off the total amount billed. This is a total of your discount and what your plan paid. To maximize your savings, visit www.myCIGNA.com or call customer service to estimate treatment costs, or to compare cost and quality of in-network health care professionals and facilities.

H701A 08/18 PLEASE SEE CLAIM DETAILS ON PAGE 3. Page 1 of 4

For illustrative purposes only

## Terms to know

### Copay

A fixed amount that you pay for a covered health care service, usually when you receive the service. The amount can vary by the type of covered health care service.

### Coinsurance

After you've reached your deductible, you and your plan share some of your medical costs. The portion of covered expenses you are responsible for is called coinsurance.

### Deductible

A flat dollar amount you must pay out of your own pocket before your plan begins to pay for certain covered services.

### Out-of-pocket maximum

The total amount you will pay out of your own pocket, which includes deductible, copay, and coinsurance amounts before your plan's copay or coinsurance percentage no longer applies. Once you meet this maximum, your plan then pays 100% of the "Maximum Reimbursable Charges," or negotiated fees for covered services.

### Place of service

Your plan pays based on where you receive services. For example, for hospital stays, your coverage is paid at the inpatient level.



### Know before you go

Unless it's a life-threatening emergency, you have options when it comes to receiving care. When you can't get to your doctor, virtual doctor visits and convenience or urgent care centers are cost-saving alternatives.

# Plans at a glance

	U.S. Medical Plan Option 1		U.S. Medical Plan Option 2	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Preventive screenings <sup>7</sup>	You pay \$0 (deductible does not apply)	You pay 50% after deductible	You pay \$0 (deductible does not apply)	You pay 50% after deductible
PCP visit	You pay \$15 (deductible does not apply)	You pay 50% after deductible	You pay \$15 (deductible does not apply)	You pay 50% after deductible
Mental/behavioral health outpatient therapy visit, including psychiatry	You pay \$15 (deductible does not apply)	You pay 50% after deductible	You pay \$15 (deductible does not apply)	You pay 50% after deductible
Virtual medical visit	<b>Medical visit:</b> You pay \$15 (deductible does not apply) <b>Behavioral visit:</b> You pay \$15 (deductible does not apply)	Not applicable	<b>Medical visit:</b> You pay \$15 (deductible does not apply) <b>Behavioral visit:</b> You pay \$15 (deductible does not apply)	Not applicable
Specialist visit	If your TACC is less than \$100,000: You pay \$50 If your TACC is \$100,000 or greater: You pay \$75	You pay 50% after deductible	If your TACC is less than \$100,000: You pay \$75 If your TACC is \$100,000 or greater: You pay \$100	You pay 50% after deductible
ER coverage	If your TACC is less than \$100,000: You pay \$300 If your TACC is \$100,000 or greater: You pay \$500 (deductible does not apply)	If your TACC is less than \$100,000: You pay \$300 If your TACC is \$100,000 or greater: You pay \$500 (deductible does not apply)	If your TACC is less than \$100,000: You pay \$600 If your TACC is \$100,000 or greater: You pay \$800 (deductible does not apply)	If your TACC is less than \$100,000: You pay \$600 If your TACC is \$100,000 or greater: You pay \$800 (deductible does not apply)
Other medical costs (hospitalizations, imaging, etc.)	You pay 20% after deductible	You pay 50% after deductible	You pay 20% after deductible	You pay 50% after deductible
Deductible	<b>Individual employee:</b> If your TACC is less than \$100,000: \$250 If your TACC is \$100,000 or greater: \$750 <b>Employee + Spouse/EE + Child(ren):</b> If your TACC is less than \$100,000: \$400 If your TACC is \$100,000 or greater: \$1,400 <b>Employee + Family:</b> If your TACC is less than \$100,000: \$700 If your TACC is \$100,000 or greater: \$1,800	<b>Individual employee:</b> \$2,750 <b>Employee + Spouse/EE + Child(ren):</b> \$4,125 <b>Employee + Family:</b> \$5,500	<b>Individual employee:</b> If your TACC is less than \$100,000: \$850 If your TACC is \$100,000 or greater: \$1,750 <b>Employee + Spouse/EE + Child(ren):</b> If your TACC is less than \$100,000: \$1,600 If your TACC is \$100,000 or greater: \$2,800 <b>Employee + Family:</b> If your TACC is less than \$100,000: \$2,300 If your TACC is \$100,000 or greater: \$4,000	<b>Individual employee:</b> \$4,750 <b>Employee + Spouse/EE + Child(ren):</b> \$7,125 <b>Employee + Family:</b> \$9,500
Out of Pocket Maximum (OOPM): includes deductible, coinsurance and copays; does not include prescription drugs	<b>Individual employee:</b> If your TACC is less than \$100,000: \$1,250 If your TACC is \$100,000 or greater: \$2,000 <b>Employee + Spouse/EE + Child(ren):</b> If your TACC is less than \$100,000: \$2,500 If your TACC is \$100,000 or greater: \$3,400 <b>Employee + Family:</b> If your TACC is less than \$100,000: \$3,500 If your TACC is \$100,000 or greater: \$5,100	<b>Individual employee:</b> \$8,750 <b>Employee + Spouse/EE + Child(ren):</b> \$12,125 <b>Employee + Family:</b> \$17,500	<b>Individual employee:</b> If your TACC is less than \$100,000: \$2,800 If your TACC is \$100,000 or greater: \$4,000 <b>Employee + Spouse/EE + Child(ren):</b> If your TACC is less than \$100,000: \$4,700 If your TACC is \$100,000 or greater: \$5,900 <b>Employee + Family:</b> If your TACC is less than \$100,000: \$6,600 If your TACC is \$100,000 or greater: \$8,400	<b>Individual employee:</b> \$10,750 <b>Employee + Spouse/EE + Child(ren):</b> \$15,125 <b>Employee + Family:</b> \$21,500

Total Annual Cash Compensation (TACC) is defined as your annual rate of base TACC, plus applicable job differential pay (for example, shift pay) as of each August 1, plus any cash earnings from any incentive plans that are paid to or deferred by you for the previous 12-month period ending each July 31.

Prescription drug coverage is offered through CVS Caremark. Visit My Health for additional information. Please refer to plan documents for additional plan benefits and a complete list of exclusions and limitations.





## JPMorganChase

1. Effective August 1, 2024 Included Health's dedicated healthcare concierge service will be available for employees and their covered dependents enrolled in the JPMC U.S. Medical Plan who live in Georgia, Oklahoma, Louisiana and Florida.
2. Customers under age 13 (and/or their parent/guardian) will not be able to register at myCigna.com.
3. The downloading and use of the myCigna App is subject to the terms and conditions of the App and the online stores from which it is downloaded. Standard mobile phone carrier and data usage charges apply.
4. Effective January 1, 2024, Spouses/Domestic partners are not eligible to earn Wellness Incentives.
5. WINFertility is an independent third-party service provider. Cigna Healthcare does not endorse or guarantee the products or services of any third parties and is not liable for any such products or services. WINFertility and its providers are solely responsible for any treatment provided to their patients. Benefits are subject to plan terms and conditions, including exclusions and limitations.
6. Employee assistance program services are in addition to, not instead of, your health plan benefits. These services are separate from your health plan benefits and do not provide reimbursement for financial losses.
7. Subject to age and frequency limits.

This information is for educational purposes only. It's not medical advice. Always ask your doctor for appropriate examinations, treatment, testing and care recommendations.

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