



SUMMARY OF BENEFITS

Aeries Software

CIGNA
Low Plan HSA

1/1/2026

to

12/31/2026



Submit a claim for reimbursement with EOB for payment.

TYPE OF VISIT	YOU PAY	DIFFERENCE CARD PAYS	CIGNA BENEFIT
PHYSICIAN SERVICES			
Primary Care Office Visit Copay	Deductible	Remaining Deductible	Deductible
Specialist Office Visit Copay	Deductible	Remaining Deductible	Deductible
Preventive Care / Screening / Immunization	No Charge		
Urgent Care	Deductible	Remaining Deductible	Deductible
PHARMACY			
Prescription Deductible Application	Integrated with Medical Deductible		
Prescription Individual Deductible	Deductible	Remaining Deductible	Integrates w/ Medical Deductible
Prescription Family Deductible			
Retail Prescriptions			
Mail Order Prescriptions			
DIAGNOSTIC PROCEDURES			
Diagnostic Test- Lab Bloodwork	Deductible	Remaining Deductible	Deductible
Diagnostic Test X-Ray	Deductible	Remaining Deductible	Deductible
Complex Imaging (CT/Pet Scans, MRIs)	Deductible	Remaining Deductible	Deductible
HOSPITAL SERVICES			
Emergency Room Care	Deductible	Remaining Deductible	Deductible
Outpatient Surgery	Deductible	Remaining Deductible	Deductible
Inpatient Hospital	Deductible	Remaining Deductible	Deductible
IN NETWORK DEDUCTIBLE & COINSURANCE			
Qualified High Deductible Health Plan	Yes		Yes
Deductible Accumulation Period	Calendar year		
Family Deductible Accumulation Type	Individual Accumulation		Individual Accumulation
In-Network Individual Deductible	First \$3,500	Last \$5,000	\$8,500
In-Network Family Deductible	First \$7,000	Last \$10,000	\$17,000

In-Network Family Multiplier 2

Mail Order Multiplier 2.5

All claims must be submitted within 3 months of the end of the deductible accumulation period.
Terminated members must submit claims within 3 months of the termination date.
Information on this document based on carrier SBC.



Call 888.343.2110 with any questions.

Download the Mobile App to View and Submit Claims



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