

# QUICK GUIDE TO CIGNA ID CARDS



# We pack a lot of important information on our ID cards.

This brochure can help define and clarify information that appears on Cigna's most common customer ID cards. It can also help you understand the requirements associated with our various plans, allowing you to quickly and efficiently serve your patients.

We may occasionally update this brochure during the year. Download the most current version at **Cigna.com** > Health Care Providers > Coverage and Claims > ID Cards.

## Important information about this guide

Please note: Some Cigna **ID cards include a "G"** in the upper-right corner, and may have different service channels, including customer service phone numbers and claim appeal addresses.

Sample standard Cigna ID card images are shown in this guide. However, the actual content may vary to conform to a state's legislative and regulatory requirements. An ID card is not a guarantee of coverage, and benefits should be verified.

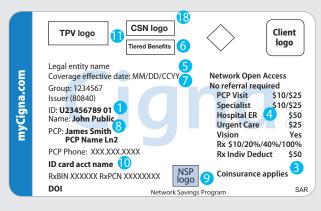
Always be sure to check the back of your patient's ID card for the correct contact information. You can also refer to the Important contact information page in the back of this guide, or refer to the Cigna Reference Guide for physicians, hospitals, ancillaries, and other health care professionals by logging in to the Cigna for Health Care Professionals website (**CignaforHCP.com**) > Resources > Reference Guides > Medical Reference Guides > Health Care Professional Reference Guides.

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## **MANAGED CARE PLANS**

## **Network: Network Open Access**



#### WWW.CIGNA.COM

You may be asked to present this card when you receive care. The card does not guarantee coverage You must comply with all terms and conditions of the plan. Willful misuse of this card is considered fraud.

INPATIENT ADMISSION or INPATIENT ADMISSION AND OUTPATIENT PROCEDURES: Your network provider must call the toll-free number listed below to pre-certify the above services. Refer to your plan documents for your pre-certification requirements. Failure to do so may affect benefits. In an emergency, seek care immediately, then call your primary care doctor as soon as possible for further assistance and directions on follow-up care within ### hours.

For information about mental health services and coverage, call 1-XXX-XXXX

Med Group: Sunset Med Group

Send Claims to: 123 Main Street, Suite 999, Anytown, USA 12345-6789

For Dental call ABC Company 1-XXX-XXXX (not a Cigna Company)

For Vision call ABC Company 1-XXX-XXXX (not a Cigna Company) Cigna Vision PO Box 385018, Birmingham, AL 35238-5018

Cigna Claims: PO Box XXXXX, Anytown, USA 12345-6789

TPV Name, PO Box XXXXX, Anytown, USA 12345-6789

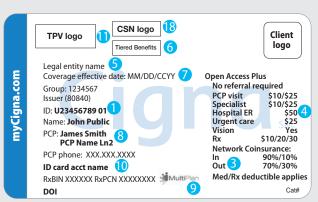
CSN Name, PO Box XXXXX, Anytown, USA 12345-6789

Customer Service: 1-XXX-XXXX 14 MH/SA: 1-XXX-XXXX

PCP required Referral required Away from Home Care Out-of-network benefits Encouraged No No No

For more information, see the next page.

## **Network: Open Access Plus**



#### WWW.CIGNA.COM

You may be asked to present this card when you receive care. The card does not guarantee coverage. You must comply with all terms and conditions of the plan. Willful misuse of this card is considered fraud.

INPATIENT ADMISSION or INPATIENT ADMISSION AND OUTPATIENT PROCEDURES: Your network provider must call the toll-free number listed below to pre-certify the above services. Refer to your plan documents for your pre-certification requirements. Failure to do so may affect benefits. In an emergency, seek care immediately, then call your primary care doctor as soon as possible for further assistance and directions on follow-up care within ### hours.

For information about mental health services and coverage, call 1-XXX-XXXX-XXXX

Med Group: Sunset Med Group

Send Claims to: 123 Main Street, Suite 999, Anytown, USA 12345-6789 For Dental call ABC Company 1-XXX-XXXX (not a Cigna Company)

For Vision call ABC Company 1-XXX-XXX-XXXX (not a Cigna Company)

Cigna Vision PO Box 385018, Birmingham, AL 35238-5018 Cigna Claims: PO Box XXXXX, Anytown, USA 12345-6789

TPV Name, PO Box XXXXX, Anytown, USA 12345-6789

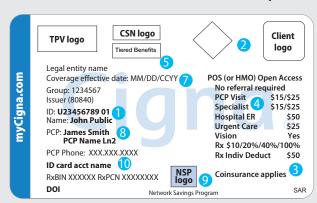
CSN Name, PO Box XXXXX, Anytown, USA 12345-6789

15 AWAY FROM HOME CARE Customer Service: 1-XXX-XXXX-XXXX 14 MH/SA: 1-XXX-XXXX-XXXX

Out-of-network benefits PCP required Referral required Away from Home Care Encouraged No Yes Yes

For more information, see the next page.

## **Networks: HMO Open Access or POS Open Access**



## WWW.CIGNA.COM

You may be asked to present this card when you receive care. The card does not guarantee coverage. You must comply with all terms and conditions of the plan. Willful misuse of this card is considered fraud. 12 INPATIENT ADMISSION or INPATIENT ADMISSION AND OUTPATIENT PROCEDURES:

Your network provider must call the toll-free number listed below to pre-certify the above services. Refer to your plan documents for your pre-certification requirements. Failure to do so may affect benefits. In an emergency, seek care immediately, then call your primary care doctor as soon as possible for further assistance and directions on follow-up care within ### hours.

For information about mental health services and coverage, call 1-XXX-XXXX

Med Group: Sunset Med Group Send Claims to: 123 Main Street, Suite 999, Anytown, USA 12345-6789

For Dental call ABC Company 1-XXX-XXXX (not a Cigna Company)

For Vision call ABC Company 1-XXX-XXXX (not a Cigna Company)

Cigna Vision PO Box 385018, Birmingham, AL 35238-5018

Cigna Claims: PO Box XXXXX, Anytown, USA 12345-6789

TPV Name, PO Box XXXXX, Anytown, USA 12345-6789 CSN Name, PO Box XXXXX, Anytown, USA 12345-6789

Customer Service: 1-XXX-XXXX 14 MH/SA: 1-XXX-XXXX

	PCP required	Referral required	Away from Home Care	Out-of-network benefits
НМО	Encouraged	No	No	No
POS	Encouraged	No	No	Yes

## Managed care plans

Managed care plans are designed to manage cost, utilization, and quality. Depending on the plan, customers may have coverage for participating providers only, or have both in-network and out-of-network benefits. Some plans require referrals for specialty care and the selection of a primary care provider (PCP).

## **Network: Network Open Access**

Plans that use this network offer customers access to participating providers, with no referrals required.

- > Flexible plan designs allow for an array of cost-sharing options, including copayments, coinsurance, and deductibles.
- Customers can select a PCP to help coordinate care; it's recommended, but not required.
- Referrals are not required to see participating specialists.
- Precertification may still be required for certain services and procedures.
- No out-of-network coverage, except for emergencies.\*

For a directory of providers who participate in this network, visit **Cigna.com** > Find a Doctor.

## **Network: Open Access Plus**

Plans that use this network offer customers access to a large, national network of providers. The plans include health advocacy programs to help customers engage in wellness initiatives and manage chronic conditions.

- Customers can select a PCP to help coordinate care; it's recommended, but not required.
- > Referrals are not required to see specialists.
- Precertification may still be required for certain services and procedures.

For a directory of providers who participate in this network, visit **Cigna.com** > Find a Doctor.

# Networks: Health Maintenance Organization (HMO) Open Access or Point of Service (POS) Open Access

Plans that use these networks offer customers access to local providers and a variety of different benefit options. The plans include negotiated network-specific discounts and fee schedules, along with robust medical management, to help reduce use of nonessential procedures.

- Customers can select a PCP to help coordinate care; it's recommended, but not required.
- Referrals are not required to see specialists.
- Precertification may still be required for certain services and procedures.

For a directory of providers who participate in these networks, visit **Cigna.com** > Find a Doctor.

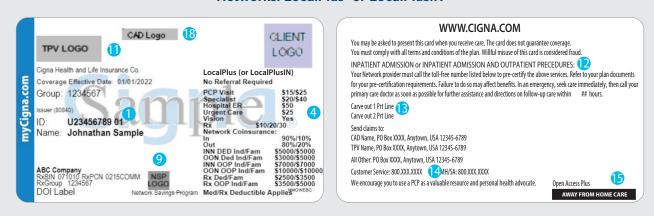
## \* Emergency services as defined in their plan.

## Key

- 1 Use this ID number for all claims and inquiries.
- Indicates a seamless network where a patient can receive in-network care on a regional or statewide basis.
- 3 For patients with coinsurance, submit claims to Cigna or its designee, and receive an explanation of payment (EOP), which will show any remaining amount due from the patient.
- 4 Collect any copayment at the time of service.
- 5 May read as: "Cigna Health and Life Insurance Company" or "Connecticut General Life Insurance Co." or "Cigna HealthCare of XXXX, Inc."
- 6 ID cards with the Cigna Care Network® logo indicate the patient's liability varies based on the provider's Cigna Care designation status. Refer to the online provider directory at Cigna.com > Find a Doctor to determine a physician's Cigna Care designation status.
- 7 Effective date of coverage.
- 8 Name of patient's primary care provider (PCP).
- Network Savings Program (NSP) logo indicates that out-of-network discounts may be available to the customer.
- 10 Employer name.
- 11 If a third party administers services in conjunction with Cigna, the ID card may include multiple logos, and show a different claim address or telephone number on the back of the card.
- Precertification requirements may be shown as either "Inpatient Admission" or "Inpatient Admission and Outpatient Procedures."
- Submit claims to the claim submission address shown on the card.
- (4) Call the customer service number(s) indicated on the card. Some plans have dedicated numbers for accessing information. Always check the card for the correct number or refer to the Important contact information page in this guide.
- (5) "Away From Home Care" indicates the patient has access to the Cigna national Away From Home Care feature.
- 6 Indicates shared administration repricing.
- 17 Union identifier.
- (CSN) logo.

## **MANAGED CARE PLANS (CONTINUED)**

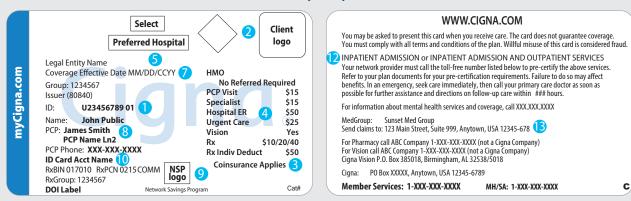
## **Networks: LocalPlus® or LocalPlusIN**



	PCP required	Referral required	Away from Home Care	Out-of-network benefits
LocalPlus	Encouraged	No	Yes	Yes
LocalPlusIN	Encouraged	No	Yes	No

For more information, see the next page.

## **Networks: HMO, POS, or HMO POS**



	PCP required	Referral required	Away from Home Care	Out-of-network benefits
НМО	Yes	Yes	No	No
POS	Yes	Yes	No	Yes
HMO POS	Yes	Yes	No	Yes

## Networks: LocalPlus® or LocalPlusIN

Plans that use these networks offer customers access to participating providers in their local area, or in any area in the country where one exists, for coverage at the in-network cost.

- In areas where these networks are not available, customers can access care through our Away From Home Care feature for coverage at the in-network cost.
- If customers choose to access care from providers outside the LocalPlus network (or outside the Away From Home Care feature when the LocalPlus network isn't available), they will likely pay more. (Customers with the LocalPlusIN plan will pay the full cost of their care.\*)
- Referrals are not required to see specialists.
- Precertification may still be required for certain services and procedures.

For a directory of providers who participate in these networks, visit **Cigna.com** > Find a Doctor.

## Networks: HMO, POS, or HMO POS

Plans that use these networks offer customers cost savings and access to a local network of providers.

- Customers must select a network-participating PCP to coordinate care for coverage at the in-network cost.
- Referrals are required to see specialists except OB/GYNs.
- HMO POS plans include benefits and features similar to HMO plans, plus out-of-network coverage at reduced benefit levels.

For a directory of providers who participate in these networks, visit **Cigna.com** > Find a Doctor.

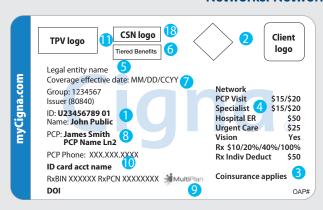
## Key

- Use this ID number for all claims and inquiries.
- 2 Indicates a seamless network where a patient can receive in-network care on a regional or statewide basis.
- For patients with coinsurance, submit claims to Cigna or its designee, and receive an explanation of payment (EOP), which will show any remaining amount due from the patient.
- 4 Collect any copayment at the time of service.
- 5 May read as: "Cigna Health and Life Insurance Company" or "Connecticut General Life Insurance Co." or "Cigna HealthCare of XXXX, Inc."
- 6 ID cards with the Cigna Care Network® logo indicate the patient's liability varies based on the provider's Cigna Care designation status. Refer to the online provider directory at Cigna.com > Find a Doctor to determine a physician's Cigna Care designation status.
- 7 Effective date of coverage.
- 8 Name of patient's primary care provider (PCP).
- 9 Network Savings Program (NSP) logo indicates that out-of-network discounts may be available to the customer.
- 10 Employer name.
- 11 If a third party administers services in conjunction with Cigna, the ID card may include multiple logos, and show a different claim address or telephone number on the back of the card.
- Precertification requirements may be shown as either "Inpatient Admission" or "Inpatient Admission and Outpatient Procedures."
- 3 Submit claims to the claim submission address shown on the card.
- (4) Call the customer service number(s) indicated on the card. Some plans have dedicated numbers for accessing information. Always check the card for the correct number or refer to the Important contact information page in this guide.
- (5) "Away From Home Care" indicates the patient has access to the Cigna national Away From Home Care feature.
- 16 Indicates shared administration repricing.
- 17 Union identifier.
- (CAD) network logo.

<sup>\*</sup> Except for emergency services as defined by their plan.

## **MANAGED CARE PLANS (CONTINUED)**

## **Networks: Network or Network POS**



## WWW.CIGNA.COM

You may be asked to present this card when you receive care. The card does not guarantee coverage. You must comply with all terms and conditions of the plan. Willful misuse of this card is considered fraud.

NPATIENT ADMISSION:

Your provider must call the toll-free number listed below to pre-certify the above services. Refer to your plan documents for your pre-certification requirements. Failure to do so may affect benefits. In an emergency, seek care immediately, then call your primary care doctor as soon as possible for further assistance and directions on follow-up care within ### hours.

For information about mental health services and coverage, call MHSA Stmt Tel

Med Group: Sunset Med Group

Send claims to: 123 Main Street, Suite 999, Anytown, USA 12345-6789 For Pharmacy, call ABC Company 800.XXX.XXXX (Not a Cigna Company) For Vision, call ABC Company 800.XXX.XXXX (Not a Cigna Company)

Cigna Claims: PO Box XXXX, Anytown, USA 12345-6789 TPV Name, PO Box XXXX, Anytown, USA 12345-6789

CSN Name, PO Box XXXX, Anytown, USA 12345-6789

Customer Service: 800.XXX.XXXX	4MH/SA: 800.XXX.XXXX

	PCP required	Referral required	Away from Home Care	Out-of-network benefits
Network	Yes	Yes	No	No
Network POS	Yes	Yes	No	Yes

For more information, see the next page.

## **Networks: PPO or EPO**



### WWW.CIGNA.COM

You may be asked to present this card when you receive care. The card does not guarantee coverage. You must comply with all terms and conditions of the plan. Willful misuse of this card is considered fraud. 12 INPATIENT ADMISSION: or INPATIENT ADMISSION AND OUTPATIENT PROCEDURES:

Your Network provider must call the toll-free number listed below to pre-certify the above services. Refer to your plan documents for your pre-certification requirements. Failure to do so may affect benefits. In an emergency, seek care immediately, then call your primary care doctor as soon as possible for further assistance and directions on follow up care within ## hours.

Coinsurance/deductible is paid directly to the doctor/facility by Cigna using individual's available health funds.

For Dental call ABC Company 1-XXX-XXXX (not a Cigna Company) For Vision call ABC Company 1-XXX-XXX-XXXX (not a Cigna Company)

Cigna Vision P.O. Box 385018, Birmingham, AL 35238-5018

Send Claims to: CAD Name, P.O. BOX XXXX, ANYTOWN, USA 12345-6789 TPV Name, P.O. BOX XXXX, ANYTOWN, USA 12345-6789

All Others: P.O. BOX XXXXX, ANYTOWN, USA 12345-6789

Customer Service: 1-800-XXX-XXXX MH/SA: 1-800-XXX-XXXX AWAY FROM HOME CARE

	PCP required	Referral required	Away from Home Care	Out-of-network benefits
PPO	No	No	Yes	Yes
EPO	Encouraged	No	Yes	No

## **Networks: Network or Network POS**

Plans that use these networks offer customers cost savings, local convenience, and choice.

- Customers must select a network-participating PCP to coordinate care for coverage at the in-network cost.
- Referrals are required to see specialists except OB/GYNs.
- Network POS plans include benefits and features similar to Network plans, plus out-of-network coverage at reduced benefit levels.

For a directory of providers who participate in these networks, visit **Cigna.com** > Find a Doctor.

## **Networks: PPO or Exclusive Provider Organization (EPO)**

Plans that use these networks offer customers access to participating providers across the country.

## PPO:

- > Both in- and out-of-network benefits are available.
- Customers can access services from providers who do not participate in the network, but will assume additional costs and be reimbursed at a lower coinsurance level.

## EPO:

- No out-of-network coverage, except in emergencies.\*
- Referrals are not required to see network-participating specialists.

For a directory of providers who participate in these networks, visit **Cigna.com** > Find a Doctor.

## Key

- 1 Use this ID number for all claims and inquiries.
- 2 Indicates a seamless network where a patient can receive in-network care on a regional or statewide basis.
- 3 For patients with coinsurance, submit claims to Cigna or its designee, and receive an explanation of payment (EOP), which will show any remaining amount due from the patient.
- 4 Collect any copayment at the time of service.
- 5 May read as: "Cigna Health and Life Insurance Company" or "Connecticut General Life Insurance Co." or "Cigna HealthCare of XXXX, Inc."
- 6 ID cards with the Cigna Care Network® logo indicate the patient's liability varies based on the provider's Cigna Care designation status. Refer to the online provider directory at Cigna.com > Find a Doctor to determine a physician's Cigna Care designation status.
- 7 Effective date of coverage.
- 8 Name of patient's primary care provider (PCP).
- 9 Network Savings Program (NSP) logo indicates that out-of-network discounts may be available to the customer.
- 10 Employer name.
- 11 If a third party administers services in conjunction with Cigna, the ID card may include multiple logos, and show a different claim address or telephone number on the back of the card.
- Precertification requirements may be shown as either "Inpatient Admission" or "Inpatient Admission and Outpatient Procedures."
- Submit claims to the claim submission address shown on the card.
- Call the customer service number(s) indicated on the card. Some plans have dedicated numbers for accessing information. Always check the card for the correct number or refer to the Important contact information page in this guide.
- (5) "Away From Home Care" indicates the patient has access to the Cigna national Away From Home Care feature.
- 16 Indicates shared administration repricing.
- Union identifier.
- (B) Client-specific network (CSN) or Client Arranged Deal (CAD) network logo.

<sup>\*</sup> Emergency services as defined in their plan.

## **MANAGED CARE PLANS (CONTINUED)**

## Network: Cigna SureFit®



You may have to show this card when you receive care. This doesn't guarantee coverage. Not using this card correctly is fraud. For emergencies, call 911 or get immediate care. Contact your doctor after you get emergency, services. If you don't know if your situation is an emergency, call your doctor or our 24/7 Health Information Line. Customers: Check your plan documents for out-of-network (OON) precertification requirements. This may affect your OON benefits. Health Care Professionals: Check your provider contract for precertification requirements. Customers: myCigna.com Health Care Professionals: CignaforHCP.com Medical Claims PO Box 188061 Chattanooga, TN 37422-8061 Payer ID #62308 Rx Claims: Pharmacy Service Center, PO Box 188053, Chattanooga TN 37422-8053 **Customers & Health Care Professionals** call 866-494-2111

For Pharmacists Only 800-351-9170

Mask 606 Issue Date: 10/25/17



## WWW.CIGNA.COM

You may be asked to present this card when you receive care. The card does not guarantee coverage. You must comply with all terms and conditions of the plan. Willful misuse of this card is considered fraud. INPATIENT ADMISSION or INPATIENT ADMISSION AND OUTPATIENT PROCEDURES:

Your network provider mst call the toll-free number listed below to pre-certify the above services. Refer to your plan documents for your pre-certification requirements Failure to do so may affect benefits. In an emergency, seek care immediately, then call your primary care doctor as soon as possible for further assistance and directions on follow-up care within ### hours.

For pharmacy, call ABC Company 800.XXX.XXXX (Not a Cigna Company) For vision, call ABC Company 800.XXX.XXXX (Not a Cigna Company)

Send claims to:

CAD name, PO Box XXXX, Anytown, USA 12345-6789 TPV name, PO Box XXXX, Anytown, USA 12345-6789

All others: PO Box XXXX, Anytown, USA 12345-6789 Customer service: 1-XXX.XXX.XXXX

MH/SA: 1-XXX.XXXX.XXXX



To find the market-specific network name that will appear on the ID card, refer to the table below. In the first column, identify your market area. In the second column, you will see the corresponding market-specific network name that should appear on the Cigna SureFit ID card.

Market		Market-specific network name		
Central Florida (Orland	do)	Cigna <b>SureFit</b> * available in Orlando through	Advent Health Physician Network	
Colorado (Boulder, De	nver, and Colorado Springs)	Cigna SureFit Health Care Alliance of the Front Range	e'	
Kansas		Cigna <b>SureFit</b> – Kansas City		
South Florida		Cigna <b>SureFit</b> -South Florida		
PCP required	Referral required	Away from Home Care	Out-of-network benefits	
Yes	Yes	No	No	

## Network: Cigna SureFit®

Plans that use this network offer customers access to local physician and hospital groups for personal, patient-centered care.

- Customers must select a network-participating PCP to coordinate their care.
- Referrals are required to see specialists.
- No out-of-network coverage or Away From Home Care, except in emergencies.\*

For a directory of providers who participate in these networks, visit **Cigna.com** > Find a Doctor.

## Key

- 1 Use this ID number for all claims and inquiries.
- Indicates a seamless network where a patient can receive in-network care on a regional or statewide basis.
- 3 For patients with coinsurance, submit claims to Cigna or its designee, and receive an explanation of payment (EOP), which will show any remaining amount due from the patient.
- 4 Collect any copayment at the time of service.
- 5 May read as: "Cigna Health and Life Insurance Company" or "Connecticut General Life Insurance Co." or "Cigna HealthCare of XXXX, Inc."
- 6 ID cards with the Cigna Care Network® logo indicate the patient's liability varies based on the provider's Cigna Care designation status. Refer to the online provider directory at Cigna.com > Find a Doctor to determine a physician's Cigna Care designation status.
- 7 Effective date of coverage.
- 8 Name of patient's primary care provider (PCP).
- Network Savings Program (NSP) logo indicates that out-of-network discounts may be available to the customer.
- 10 Employer name.
- 11 If a third party administers services in conjunction with Cigna, the ID card may include multiple logos, and show a different claim address or telephone number on the back of the card.
- Precertification requirements may be shown as either "Inpatient Admission" or "Inpatient Admission and Outpatient Procedures."
- Submit claims to the claim submission address shown on the card.
- (4) Call the customer service number(s) indicated on the card. Some plans have dedicated numbers for accessing information. Always check the card for the correct number or refer to the Important contact information page in this guide.
- (5) "Away From Home Care" indicates the patient has access to the Cigna national Away From Home Care feature.
- 6 Indicates shared administration repricing.
- 17 Union identifier.
- (CSN) logo.

<sup>\*</sup> Emergency services as defined in their plan.

## **INDIVIDUAL & FAMILY PLANS**

## **Network: Connect**



You may have to show this card when you receive care. This doesn't guarantee coverage. Not using this card correctly is fraud. For emergencies, call 911 or get immediate care. Contact your doctor after you get emergency services. If you don't know if your situation is an emergency, call your doctor or our 24/7 Health Information Line. Customers: Your plan may limit or exclude out-of-network (OON) benefits. Check your plan documents for precertification or other requirements that may apply to services from OON Providers. Health Care Professionals: Check your provider contract for precertification requirements.

Customers: myCigna.com

Health Care Professionals: Cignafort-CP.com

Medical Claims PO Box 188061 Chattanooga, TN 37422-8061 Payer ID #62308

Rx Claims Pharmacy Service Center, PO Box 188053, Chattanooga TN 37422-8053

For Premium, Billing and Enrollment Questions please call: 1-877-484-5967

For Benefit and Claim questions pleaseall: 1-866-494-2111

For Pharmacists Only: 800-351-9170

Mask 606

Issue Date: 09/08/20

PCP required	Referral required	Away from Home Care	Out-of-network benefits
No*	No*	No	No

R619A (1/16)

## **Network: Cigna Plus**



You may have to show this card when you receive care. This doesn't guarantee coverage. Not using this card correctly is fraud. For emergencies, call 911 or get immediate care. Contact your doctor after you get emergency services. If you don't know if your situation is an emergency, call your doctor or our 24/7 Health Information Line. Customers: Your plan may limit or exclude out-of-network (ODN) benefits. Check your plan documents for precertification or other requirements that may apply to services from CON Providers. Health Care Professionals: Check your provider contract for precertification requirements.

Customers: myCigna.com

Health Care Professionals: CignaforHCP.com

Medical Claims Po Box 188061 Chattanooga, TN 37422-8061 Payer ID #62308

Rx Claims Pharmacy Service Center, PO Box 188053, Chattanooga TN 37422-8053
For Premium, Billing and Enrollment Questions please call: 1-877-900-1237

For Benefit and Claim questions please

Call: 1-866-494-2111

For Pharmacists Only: 800-351-9170

Mask 606 Issue Date: 09/07/20

PCP required	Referral required	Away from Home Care	Out-of-network benefits
No*	No*	No	No

<sup>\*</sup>PCP selection and referrals are required only in Illinois.

<sup>\*</sup>PCP selection and referrals are required only in Illinois.

## **Individual & Family Plans**

Cigna offers Individual & Family Plans with medical, pharmacy, and (when applicable) pediatric dental benefits in Arizona, Colorado, Florida, Illinois, Kansas, Missouri, North Carolina, Tennessee, Utah, and Virginia. Depending on the plan, customers will have access to providers who participate in our Connect network. The network name will appear on the top right of the ID card.

## **Network: Connect**

Plans that use this network offer customers access to providers in their local area.

- > Customers do not have to select a PCP but are encouraged to coordinate their care with a network-participating PCP.
- > Referrals are encouraged but not required to see specialists.
- No out-of-network coverage or Away From Home Care, except in emergencies.\*\*

For a directory of providers who participate in this network, visit **Cigna.com/IFP-Providers**.

## **Network: Cigna Plus**

Plans that use this network offer customers access to providers in their local area.

- Customers must select a network-participating PCP to coordinate their care.\*
- Referrals are required to see specialists.\*
- No out-of-network coverage or Away From Home Care, except in emergencies.\*\*

For a directory of providers who participate in this network, visit **Cigna.com/IFP-Providers**. These listings will be available and labeled as "Cigna Plus" within the network selection options.

## Key

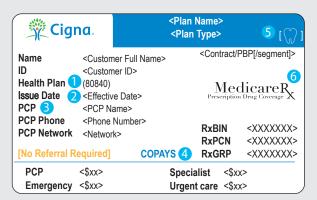
- 1 Use this ID number for all claims and inquiries.
- 2 Indicates a seamless network where a patient can receive in-network care on a regional or statewide basis.
- 3 For patients with coinsurance, submit claims to Cigna or its designee, and receive an explanation of payment (EOP), which will show any remaining amount due from the patient.
- 4 Collect any copayment at the time of service.
- 5 May read as: "Cigna Health and Life Insurance Company" or "Connecticut General Life Insurance Co." or "Cigna HealthCare of XXXX, Inc."
- 6 ID cards with the Cigna Care Network® logo indicate the patient's liability varies based on the provider's Cigna Care designation status. Refer to the online provider directory at Cigna.com > Find a Doctor to determine a physician's Cigna Care designation status.
- 7 Effective date of coverage.
- 8 Name of patient's primary care provider (PCP).
- Network Savings Program (NSP) logo indicates that out-of-network discounts may be available to the customer.
- 10 Employer name.
- 11 If a third party administers services in conjunction with Cigna, the ID card may include multiple logos, and show a different claim address or telephone number on the back of the card.
- Precertification requirements may be shown as either "Inpatient Admission" or "Inpatient Admission and Outpatient Procedures."
- 3 Submit claims to the claim submission address shown on the card.
- 14 Call the customer service number(s) indicated on the card. Some plans have dedicated numbers for accessing information. Always check the card for the correct number or refer to the Important contact information page in this guide.
- (5) "Away From Home Care" indicates the patient has access to the Cigna national Away From Home Care feature.
- 16 Indicates shared administration repricing.
- Union identifier.
- (CSN) logo.

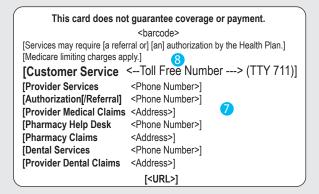
<sup>\*</sup> PCP selection and referrals are required in Illinois.

<sup>\*\*</sup> Emergency services as defined in their plan.

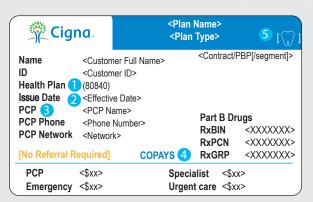
## **MEDICARE PLANS**

## **Network: Prescription Drugs**



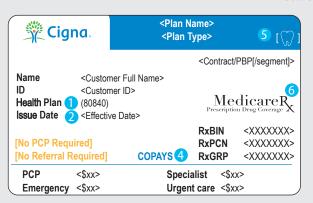


## **Network: Medicare Advantage**





## **Network: PPO**



This card does not	guarantee coverage or payment.
	 barcode>
	ral or] [an] authorization by the Health Plan.]
Medicare limiting charges app	
Customer Service	<toll free="" number=""> (TTY 711)</toll>
[Provider Services	<phone number="">]</phone>
[Authorization[/Referral]	<phone number="">]</phone>
[Provider Medical Claims	<address>]</address>
[Pharmacy Help Desk	<phone number="">]</phone>
[Pharmacy Claims	<address>]</address>
[Dental Services	<phone number="">]</phone>
[Provider Dental Claims	<address>]</address>
	<url></url>

	PCP required	Referral required	Prescription Drug Plan
MAPD	Yes	Yes*	Part D
MA	Yes	Yes*	Part B
PPO	No	No	

<sup>\*</sup>Referral requirements are indicated on the customer's Cigna ID Card.

<sup>\*</sup>Select service areas do not require the use of referrals.

## **Medicare Plans**

Cigna contracts with the Centers for Medicare & Medicaid Services (CMS) to offer Medicare Advantage (MA) plans. Customers are able to select one of several plans offered based on their location, budget and health care needs.

For more information and to access the directory of participating providers, visit **Medicareproviders.cigna.com**.

## Key

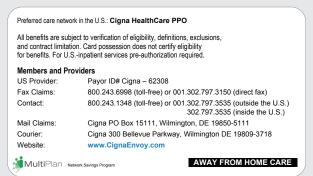
- 1 Use this ID number for all claims and inquiries.
- 2 Effective date of coverage.
- 3 Name of patient's primary care provider (PCP).
- 4 Collect any copayment at the time of service.
- 5 Dental Coverage.
- 6 Prescription Drug Coverage.
- 7 Submit claims to the claim submission address shown on the card.
- 8 Call the customer service number(s) indicated on the card. Some plans have dedicated numbers for accessing information. Always check the card for the correct number.

## **CIGNA GLOBAL HEALTH BENEFITS® PLANS**

## **Networks in the U.S.: PPO or OAP**

Cigna Global Health Benefits plans that use these networks offer medical coverage to individuals, for unexpected illness and injuries that occur while traveling in the U.S. on international business outside of their home or permanent assignment country.





## Networks outside the U.S.: Vary by location

Cigna Global Health Benefits plans that use these networks offer medical coverage outside the U.S. for globally mobile customers, including U.S. expatriates and inpatriates to the U.S., and their dependents.





PCP required	Referral required	Away from Home Care	Out-of-network benefits
Encouraged	No	Yes	Yes

## **Cigna Global Health Benefits® plans**

We offer Cigna Global Health Benefits plans for globally mobile employees, including U.S. expatriates and inpatriates to the U.S. There are multiple coverage options encompassing medical, business travel medical, dental, life, accidental death and dismemberment, and a range of ancillary coverage. The network name will appear on the ID card.

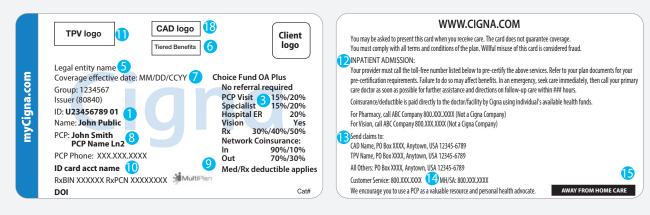
For more information and to access the directory of participating providers, visit **CignaEnvoy.com**.

## Key

- 1 Use this ID number for all claims and inquiries.
- 2 Indicates a seamless network where a patient can receive in-network care on a regional or statewide basis.
- 3 For patients with coinsurance, submit claims to Cigna or its designee, and receive an explanation of payment (EOP), which will show any remaining amount due from the patient.
- 4 Collect any copayment at the time of service.
- 5 May read as: "Cigna Health and Life Insurance Company" or "Connecticut General Life Insurance Co." or "Cigna HealthCare of XXXX, Inc."
- 6 ID cards with the Cigna Care Network® logo indicate the patient's liability varies based on the provider's Cigna Care designation status. Refer to the online provider directory at Cigna.com > Find a Doctor to determine a physician's Cigna Care designation status.
- 7 Effective date of coverage.
- 8 Name of patient's primary care provider (PCP).
- 9 Network Savings Program (NSP) logo indicates that out-of-network discounts may be available to the customer.
- 10 Employer name.
- 11 If a third party administers services in conjunction with Cigna, the ID card may include multiple logos, and show a different claim address or telephone number on the back of the card.
- Precertification requirements may be shown as either "Inpatient Admission" or "Inpatient Admission and Outpatient Procedures."
- 3 Submit claims to the claim submission address shown on the card.
- (2) Call the customer service number(s) indicated on the card. Some plans have dedicated numbers for accessing information. Always check the card for the correct number or refer to the Important contact information page in this guide.
- (5) "Away From Home Care" indicates the patient has access to the Cigna national Away From Home Care feature.
- 16 Indicates shared administration repricing.
- Union identifier.
- (CSN) logo.

## **CIGNA CHOICE FUND® PLANS**

## **Networks: Vary by plan**

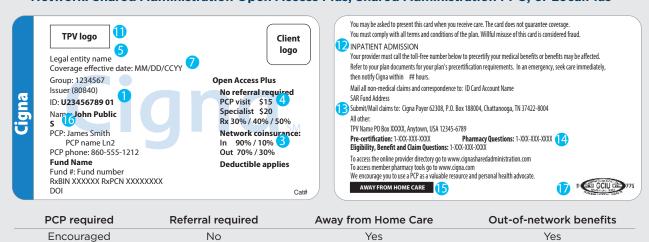


## For more information, see the next page.

	PCP required	Referral required	Away from Home Care	Out-of-network benefits
PPO	No	No	Yes	Yes
EPO	Encouraged	No	Yes	No
OAP	Encouraged	No	Yes	Yes
LocalPlus	Encouraged	No	Yes	Yes
Indemnity	No	No	N/A	Yes

## **SHARED ADMINISTRATION REPRICING PLANS**

## Network: Shared Administration Open Access Plus, Shared Administration PPO, or LocalPlus



## **Cigna Choice Fund® plans**

These plans combine an employer-funded health reimbursement account (HRA) or employer/employee-funded tax-advantaged health savings account (HSA) with PPO, EPO, Open Access Plus, LocalPlus, or indemnity plans. Customers will have access to providers who participate in the network aligned to their plan.

## **Networks: Vary by plan**

Plans that use these networks offer customers access to a suite of providers, and allow them to be in charge of how and when they spend their health fund dollars.

- Referrals are not required to see specialists.
- > Typically, no copayments are required.
- > Providers should bill Cigna directly.
- Precertification may still be required for certain services and procedures.

For a directory of providers who participate in these networks, visit **Cigna.com** > Find a Doctor.

## **Shared Administration Repricing plans**

Shared Administration Repricing plans are offered by the Cigna Taft-Hartley and Federal Business Segment. They are designed for Taft-Hartley and federal plan employers that want to continue processing and paying their own claims, and retain customer and provider services, or use a third-party administrator to perform these functions.

## Networks: Shared Administration Open Access Plus, Shared Administration PPO, or LocalPlus

Plans that use these networks offer customers access to a national network of providers.

- Referrals are not required to see specialists.
- Both in- and out-of-network benefits are available. Customers can access providers that participate in a national network, which includes Away From Home Care.

For a directory of providers who participate in these networks, visit **CignaSharedAdministration.com**.

## Key

- 1 Use this ID number for all claims and inquiries.
- 2 Indicates a seamless network where a patient can receive in-network care on a regional or statewide basis.
- 3 For patients with coinsurance, submit claims to Cigna or its designee, and receive an explanation of payment (EOP), which will show any remaining amount due from the patient.
- 4 Collect any copayment at the time of service.
- 5 May read as: "Cigna Health and Life Insurance Company" or "Connecticut General Life Insurance Co." or "Cigna HealthCare of XXXX, Inc."
- 6 ID cards with the Tiered Benefits® logo indicate the patient's liability varies based on the provider's Cigna Care designation status.

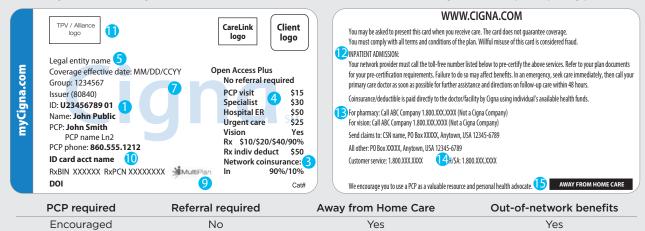
  Refer to the online provider directory at

  Cigna.com > Find a Doctor to determine a physician's Cigna Care designation status.
- 7 Effective date of coverage.
- 8 Name of patient's primary care provider (PCP).
- Network Savings Program (NSP) logo indicates that out-of-network discounts may be available to the customer.
- Employer name.
- If a third party administers services in conjunction with Cigna, the ID card may include multiple logos, and show a different claim address or telephone number on the back of the card.
- Precertification requirements may be shown as either "Inpatient Admission" or "Inpatient Admission and Outpatient Procedures."
- Submit claims to the claim submission address shown on the card.
- (4) Call the customer service number(s) indicated on the card. Some plans have dedicated numbers for accessing information. Always check the card for the correct number or refer to the Important contact information page in this guide.
- (5) "Away From Home Care" indicates the patient has access to the Cigna national Away From Home Care feature.
- 16 Indicates shared administration repricing.
- 17 Union identifier.
- (CAD) network logo.

## STRATEGIC ALLIANCE PLANS

## **Networks: Vary by plan**

The sample below shows an ID card for a customer with a Cigna-administered plan. If it displays a Strategic Alliance logo,\* the customer may use that Strategic Alliance's network when outside the service area for Cigna network-participating providers.

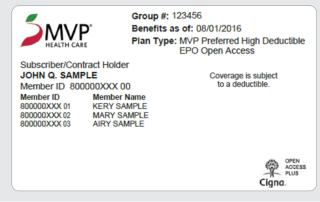


## Sample ID cards for Cigna's Strategic Alliances

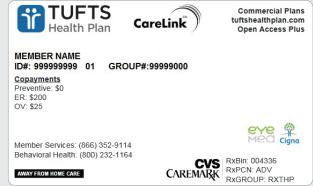
These samples show ID cards for people whose health plans are administered by one of our Strategic Alliances with Allegiance, HealthPartners, MVP, PriorityHealth, or Tufts. The Cigna logo on the card indicates they may visit a Cigna-participating provider when in the Cigna service area.











\*Logos include Allegiance, HealthPartners, MVP, PriorityHealth, and Tufts.

## Strategic alliance plans

Cigna has entered into strategic alliances with several nationally recognized health care companies. These plans give our customers access to an alliance's network of providers and discounts in specific geographic areas. They also provide the alliance's customers with access to Cigna's national provider network and discounts outside their specific geographic area.

## **Networks: Vary by plan**

- > Referrals are not required to see specialists.
- Precertification may still be required for certain services and procedures.
- Claims should be submitted to the payer ID on the customer's ID card.

## Key

- Use this ID number for all claims and inquiries.
- 2 Indicates a seamless network where a patient can receive in-network care on a regional or statewide basis.
- 3 For patients with coinsurance, submit claims to Cigna or its designee, and receive an explanation of payment (EOP), which will show any remaining amount due from the patient.
- 4 Collect any copayment at the time of service.
- 5 May read as: "Cigna Health and Life Insurance Company" or "Connecticut General Life Insurance Co." or "Cigna HealthCare of XXXX, Inc."
- 6 ID cards with the Cigna Care Network® logo indicate the patient's liability varies based on the provider's Cigna Care designation status. Refer to the online provider directory at Cigna.com > Find a Doctor to determine a physician's Cigna Care designation status.
- 7 Effective date of coverage.
- 8 Name of patient's primary care provider (PCP).
- 9 Network Savings Program (NSP) logo indicates that out-of-network discounts may be available to the customer.
- 10 Employer name.
- 11 If a third party administers services in conjunction with Cigna, the ID card may include multiple logos, and show a different claim address or telephone number on the back of the card.
- Precertification requirements may be shown as either "Inpatient Admission" or "Inpatient Admission and Outpatient Procedures."
- 3 Submit claims to the claim submission address shown on the card.
- (4) Call the customer service number(s) indicated on the card. Some plans have dedicated numbers for accessing information. Always check the card for the correct number or refer to the Important contact information page in this guide.
- (5) "Away From Home Care" indicates the patient has access to the Cigna national Away From Home Care feature.
- 16 Indicates shared administration repricing.
- Union identifier.
- (CSN) logo.

## **Networks: LocalPlus and Open Access Plus**

## **Sample ID Cards**

Member ID cards will include details about the network the plan aligns with and will look like the samples below:

## **Open Access Plus Plans**



Open Access Plus Bronze \$1000 (No referral required)

Member plan information

#### OSC12345678-01 Member ID Group ID 0224764 Cigna ID Coverage start date 10/01/2022

Cigna

\*

Cigna

#### In-network spending

Deductible \$1000/\$2000 Rx deductible \$6100 / \$12200 Out-of-pocket max

#### In-network cost before / after deductible

Oscar Virtual Urgent Care \$0/\$0 Primary care \$95 / \$95 \$150 / \$150 Specialist Urgent care \$150 / \$150 Emergency room 100%/\$1,500

## Member Care Team

Log in at hioscar.com/member, or on the Oscar mobile app, or call 855-672-2789

## Provider & pharmacist services

Providers call 855-672-2755

## Pharmacy by Express Scripts

RyRIN 003858 Payer ID OSCAR A4 e-Payer ID 62308 **RxPCN** CIOSCRx Dental ID CX083

## Pediatric vision & dental

Send claims to Davis Vision & Liberty Dental.

#### Medical claims

Cigna, PO Box 188061, Chattanooga, TN 37422

Cigna + Oscar coverage is insured by Cigna Health and Life insurance Company.

Benefits are administered by Oscar Health Administrators, Pharmacy benefits are provided by Express Scripts, Inc.

# Cigna.

#### John Doe

Open Access Plus Bronze \$3000

(No referral required)

## Member plan information

OSC12345678-01 Group ID None Cigna ID 0224764 Coverage start date 10/01/2022

Cigna

Cigna

## In-network spending

Deductible \$3000/\$6000 Ry deductible \$3100 / \$6200 \$9100 / \$18200 Out-of-pocket max

## In-network cost before / after deductible

Oscar Care virtual visits \$0/\$0 \$0/\$0 Primary care Specialist \$150 / \$150 \$150 / \$150 Urgent care Emergency room 100% / \$1,200 47001

## Member Care Team

Log in at cignabyoscarAZ.com, or on the Oscar mobile app, or call 855-672-2789

#### Provider & pharmacist services

Providers call 855-672-2755 Pharmacists call 800-922-1557

## Pharmacy by Express Scripts

003858 Paver ID **RxBIN** OSCAR A4 e-Payer ID 62308 RXGRP CIOSCRy Dental ID CX083

## Pediatric vision & dental

Send claims to Davis Vision & Liberty Dental.

#### Medical claims

Cigna, PO Box 188061, Chattanooga, TN 37422

Insured by Cigna Health and Life Insurance Company. Insurance benefits administered by Oscar Management Corporation, a third party administrator. Cigna insurance coverage contains exclusions and limitations.

## **LocalPlus Plans**

## 🙀 Cigna + oscar

### John Doe

LocalPlus Bronze \$1000 (No referral required)

## Member plan information

Member ID OSC12345678-01 0224764 Cigna ID 10/01/2022 Coverage start date

## In-network spending

\$1000 / \$2000 Deductible Rx deductible Out-of-pocket max \$8700 / \$17400

## In-network cost before / after deductible

Oscar Virtual Urgent Care \$0 / \$0 \$95/\$95 Primary care Specialist \$150 / \$150 \$150 / \$150 Urgent care Emergency room 100% / \$1,500

## Member Care Team

Log in at hioscar.com/member, or on the Oscar mobile app, or call 855-672-2789

#### Provider & pharmacist services

Providers call 855-672-2755 Pharmacists call 800-922-1557

## Pharmacy by Express Scripts

RxBIN 003858 Paver ID OSCAR e-Payer ID RxGRP CIOSCRx Dental ID CX083

## Pediatric vision & dental

Send claims to Davis Vision & Liberty Dental.

## Medical claims

Cigna, PO Box 188061, Chattanooga, TN 37422

Cigna + Oscar coverage is insured by Cigna Health and Life Insurance Company.

Benefits are administered by Oscar Health Administrators, Pharmacy benefits are provided by Express Scripts, Inc.

## Cigna.

## John Doe

LocalPlus Gold \$2750 (No referral required)

## Member plan information

Member ID OSC12345678-01 Group ID None Cigna ID 0224764 Coverage start date 10/01/2022

## In-network spending

Deductible Out-of-pocket max \$7500 / \$15000

## In-network cost before / after deductible

Oscar Care virtual visits Primary care \$0 / \$0 \$60/\$60 Specialist Urgent care \$60 / \$60 100%/\$800 Emergency room

## Member Care Team

Log in at cignabyoscarAZ.com, or on the Oscar mobile app, or call 855-672-2789

## Provider & pharmacist services

Providers call 855-672-2755 Pharmacists call 800-922-1557

## Pharmacy by Express Scripts

**RxBIN** 003858 Payer ID OSCAR e-Payer ID 62308 CIOSCRx Dental ID RxGRP CX083

## Pediatric vision & dental

Send claims to Davis Vision & Liberty Dental.

Cigna, PO Box 188061, Chattanooga, TN 37422

## Insured by Cigna Health and Life Insurance

Company.

Insurance benefits administered by Oscar Management
Corporation, a third party administrator. Cigna
insurance coverage contains exclusions and limitations.

PCP required	Referral required	Away from Home Care	Out-of-network benefits
Encouraged	No	No	Varies by plan

## Cigna + Oscar

Cigna has entered into a strategic partnership with Oscar Health to jointly provide commercial health solutions to small businesses. These plans are available in select markets. They provide affordable, seamless, fully insured health benefits under the Cigna + Oscar brand to the small group market.

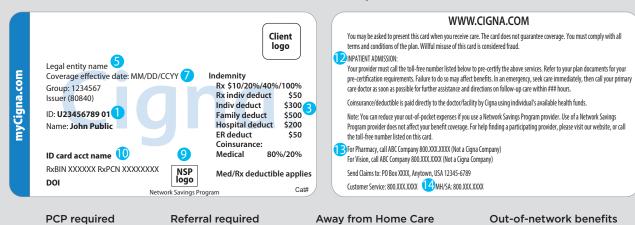
For a directory of providers who participate in this network, visit **www.hioscar.com/providers**.

## **Networks: Vary by plan**

- > Referrals are not required to see specialists.
- Precertification may still be required for certain services and procedures. For more information please call 855-672-2789.
- Claims should be submitted to the address or e-payer ID on the customer's ID card.

## **INDEMNITY PLANS**

## **Network: No network requirements**



For more information, see the next page.

Yes

No

No\*

<sup>\*</sup>This ID card will not display the name of a PCP if one is chosen.

## **Indemnity plans**

These plans give customers the freedom to choose any provider.

- No network requirements.
- Referrals are not required to see specialists.

## Key

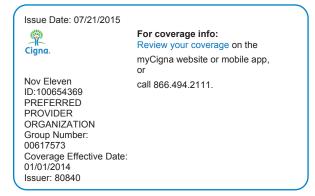
- Use this ID number for all claims and inquiries.
- 2 Indicates a seamless network where a patient can receive in-network care on a regional or statewide basis.
- 3 For patients with coinsurance, submit claims to Cigna or its designee, and receive an explanation of payment (EOP), which will show any remaining amount due from the patient.
- 4 Collect any copayment at the time of service.
- 5 May read as: "Cigna Health and Life Insurance Company" or "Connecticut General Life Insurance Co." or "Cigna HealthCare of XXXX, Inc."
- 6 ID cards with the Cigna Care Network® logo indicate the patient's liability varies based on the provider's Cigna Care designation status. Refer to the online provider directory at Cigna.com > Find a Doctor to determine a physician's Cigna Care designation status.
- 7 Effective date of coverage.
- 8 Name of patient's primary care provider (PCP).
- 9 Network Savings Program (NSP) logo indicates that out-of-network discounts may be available to the customer.
- 10 Employer name.
- 11 If a third party administers services in conjunction with Cigna, the ID card may include multiple logos, and show a different claim address or telephone number on the back of the card.
- Precertification requirements may be shown as either "Inpatient Admission" or "Inpatient Admission and Outpatient Procedures."
- Submit claims to the claim submission address shown on the card.
- (4) Call the customer service number(s) indicated on the card. Some plans have dedicated numbers for accessing information. Always check the card for the correct number or refer to the Important contact information page in this guide.
- (5) "Away From Home Care" indicates the patient has access to the Cigna national Away From Home Care feature.
- 16 Indicates shared administration repricing.
- 17 Union identifier.
- 18 Tiered Benefits logo.

## The myCigna® App

The myCigna® App gives Cigna customers a simple way to personalize, organize, and access their important health and coverage information - on the go. Your patients may present their Cigna ID card claims information and coverage eligibility to you via the app on their smartphone or tablet.

## Sample ID card information you might see on your patients' myCigna App





## **ID** card features

- Quickly view ID card information (front and back) for family members
- Easily print, email, or scan right from a smartphone or tablet

## Inpatient Admission and Outpatient Procedures

Your network provider must call the toll-free number listed below to pre-certify the above services. Refer to your plan documents for your pre-certification requirements. Failure to do so may affect benefits. In an emergency, seek care immediately, then call your primary care doctor as soon as possible for further assistance and directions on follow up care within 24 hours.

Send Claims To: CIGNA, PO Box 182223, Chattanooga TN 37422-7223

Customer Service888,992,4462

You may be asked to present this card when you access care. This card doesn't guarantee coverage. You must comply with all items and conditions of the plan. Willful misuse of this card is considered fraud.

Hospital Admission: Prior to any non-emergency hospital admission, you or your doctor must call the toll-free Customers and Health Care Professionals number shown below to request "precertification." In the case of an emergency, you, your family, or your doctor must call within 48 hours of hospital admission. Failure to contact Cigna will affect your coverage.

In an Emergency: Seek care immediately. Go directly to the nearest emergency facility or call 911.

**Health Care Professionals:.** Visit www.CignaforHCP.com or call 800-882-4462.

Customers and Health Send Medical Claims To:

Care Professionals: Cigna

866.494.2111 1000 Great-West Drive (24 hours a day, 365 days Kennett, MO 63857

à year)

Payer ID: #62308

## **Additional app features:**

The myCigna App includes features that help your patients - and you - have an easier health care experience.

## **Provider directory**

- Locate network-participating doctors and health care facilities
- Access maps for instant driving directions

## **Health wallet**

- Store and organize all contact information for doctors, hospitals, and pharmacies
- Add providers to contact list right from a claim or directory search

## **Claims**

- View and search recent and past medical, dental, and pharmacy claims
- Bookmark and group claims for easy reference

## **Trackers**

View in-network and out-of-network medical and dental year-to-date deductibles, as well as out-of-pocket and annual maximums

## Coverage

- See plan coverage and benefit information for medical, dental, pharmacy, behavioral health, substance abuse, and disability
- Access and view health fund balances
- Review plan deductibles, coinsurance, and copayments

## Additional app features (continued)

## **Drug search**

- View medication costs based on their plan and see lower-cost alternatives\*
- Find closest network-participating pharmacy location using GPS
- Research medicine and dosages
- Speed dial Cigna Home Delivery Pharmacy<sup>SM</sup>
- \* Prices are not guaranteed, nor is the display of a price a guarantee of coverage. Medication costs and coverage may vary at the time prescriptions are filled at the pharmacy, and pricing at individual pharmacies may vary. Coverage and pricing terms are subject to change.
- \*\* The myCigna App is available to Cigna health plan customers. Actual features may vary depending on their plan.



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## More ways to access patient information when you need it

## Use our electronic tools

- Log in to the Cigna for Health Care Professionals website (CignaforHCP.com)
- Connect with us through electronic data interchange (EDI): Visit Cigna.com/EDIVendors to learn more
- Call our automated phone system: 800.88Cigna (882.4462)

# Conduct administrative transactions electronically

Cigna's convenient eServices tools help you manage the administrative details of health care.

- Access patient eligibility and benefits
- Estimate patient out-of-pocket costs
- View and submit precertification requests
- Check claim status
- > Enroll online for electronic funds transfer (EFT), then view, print, and share online remittance reports the same day you receive electronic payments
- Receive electronic remittance advices and automatically load them to your accounts receivable system
- Submit questions about fee schedules and specific patient benefits

## **Learn more**

To access our educational resources, log in to **CignaforHCP.com** > Resources > eCourses. Select courses about EDI, eligibility and benefits, estimating patient out-of-pocket costs, precertification, electronic claim submission, claim status inquiry, enrolling in and managing EFT, online remittance reports, and more.

## **Important contact information**

Find the contacts you need to get in touch with us for information about your patients with Cigna coverage.\*

Please note that call, claim, and service channels may differ based on the Cigna participant's identification (ID) card.

If you want to	Hea the fallowing
Update your contact or demographic information, or notify us of errors/changes to the way you are currently listed in our provider directories, including:**  Name  Type/Degree  Specialty  Product and network tier  National Provider Identifier (NPI) number  Medical group or hospital affiliation  Office email address  Address  Office phone number  Whether you are accepting new patients	Use the following:  Submit demographic changes to Cigna electronically by logging in to CignaforHCP.com > Working With Cigna > Directory Update. If you have not registered, please go to the registration page to begin the process.  Or  Practitioner & Group Changes: Fax: 877.358.4301  Email: Intake_PDM@cigna.com  Hospital & Ancillary Changes: Fax: 646.459.2180  Email: CPOCIMs@cigna.com  Exceptions  If you are located in the following markets, submit updates electronically on CignaforHCP.com or as directed below.  U.S. Virgin Islands  Email: Intake_PDM@cigna.com Fax: 340.774.7175  Mail: V.I. Equicare, Inc.
<ul> <li>Perform online transactions:***</li> <li>Verify patient eligibility and benefits and generate a Benefit Reference Number (BRN)</li> <li>Look up procedure code to obtain coinsurance, maximums, and determine if precertification is required</li> <li>Predict the total cost of service and patient liability for specific medical procedures</li> <li>Request precertification for services</li> <li>Inquire about precertification for services</li> <li>View claim-coding policies and payment guidelines</li> <li>Review medical or pharmacy coverage positions</li> <li>View the prescription drug list</li> <li>View sample ID cards</li> <li>Obtain a Reference Guide</li> <li>Request a copy of your contract</li> <li>Request fee schedule information</li> <li>Request claim reconsideration or appeal</li> <li>Submit preservice precertification appeals</li> </ul>	Cigna for Health Care Professionals website: CignaforHCP.com

If you want to:	Use the following:
Perform transactions using a multipayer website or vendor via electronic data interchange (EDI):***  Verify patient eligibility and coverage  Inquire about patient coverage and covered services  Check the status of a claim  Request precertification for services  Submit claims electronically  Receive electronic remittance advice  View list of EDI vendors	Refer to <b>Cigna.com/EDIvendors</b> for a list of directly connected Cigna vendors.
Enroll to receive electronic funds transfer (EFT) or direct deposit	Log in to <b>CignaforHCP.com</b> > Working with Cigna > Electronic Funds Transfer > Enroll in Electronic Funds Transfer (EFT) Options.
<ul> <li>Perform telephone transactions:***</li> <li>Learn about electronic services</li> <li>Verify patient eligibility and coverage</li> <li>Check the status of a claim</li> <li>Request precertification for services</li> <li>Request an exception to the prescription drug list</li> <li>In the Texas market, request the Texas SB 418 Written Verification; a representative is available Monday to Friday, from 6 a.m. to 6 p.m. and from 9 a.m. to 12 p.m. on weekends and holidays</li> </ul>	Phone: 800.88Cigna (882.4462)  For patients with "G" ID cards: Phone: 866.494.2111  Customer Service numbers are also included on the patient's ID card.
Submit a paper claim	Refer to patient's ID card
Submit or inquire about an appeal or dispute	Phone: 800.88Cigna (882.4462) Website: CignaforHCP.com Fax: 877.815.4827 Mail: Cigna National Appeals PO Box 188011 Chattanooga, TN 37422 For patients with "G" ID cards: Fax: 877.804.1679 Mail: Cigna National Appeals PO Box 188062 Chattanooga, TN 37422-8062
Submit or inquire about provider credentialing**	Phone: 800.88Cigna (882.4462)
Obtain information about organ and tissue transplant network	Cigna LifeSOURCE Transplant Network® Phone: 800.668.9682 Website: CignaLifeSOURCE.com
Contact a dental network	Phone: 800.Cigna24 (244.6224) Website: <b>CignaforHCP.com</b> For patients with "G" ID cards: Phone: 866.494.2111
Obtain other telephone numbers and addresses	Refer to the patient's ID card

Other important contacts:	Use the following:
Evernorth Behavioral Health	Phone: 800.926.2273 Website: <b>Provider.Evernorth.com</b>
Home delivery pharmacy	Cigna Home Delivery Pharmacy: 800.285.4812 Express Scripts Pharmacy, a Cigna company: 800.211.1456
Accredo, a Cigna specialty pharmacy	Accredo Physician Service Center: 844.516.3319 Website: Accredo.com > Prescribers
Medical management (including precertification)	Phone: 800.88Cigna (882.4462) Website: <b>CignaforHCP.com</b> For patients with "G" ID cards: Phone: 866.494.2111 Customer service numbers are also included on the patient's ID card.
eviCore healthcare (diagnostic cardiology, durable medical equipment, gastroenterology, high-tech radiology, home health, home infusion, integrated oncology, musculoskeletal, radiation therapy services, and sleep services)	Diagnostic cardiology, high-tech radiology, musculoskeletal, and gastroenterology Phone: 888.693.3297  Website: eviCore.com  Radiation therapy and integrated oncology  Phone: 866.668.9250  Website: eviCore.com  Home health, DME & Sleep Management Services (effective 02.01.21)  Phone: 800.298.4806  Website: evicore.com/ep360  Exceptions  For CareLink customers in MA and RI and Cigna customers in Hawaii and Puerto Rico, use the following contact information: Phone: 800.88Cigna (882.4462)  Website: CignaforHCP.com
Pharmacy prior authorizations	Electronic medical record or electronic health record: CoverMyMeds® or Surescripts®  Website: CoverMyMeds.com/epa/Cigna  Phone: 800.244.6224
Specialty pharmacy condition counseling	Accredo Therapeutic Resource Centers: 844.516.3319 Cigna specialty condition counseling: 800.633.6521

<sup>\*</sup> Excluding customers with third-party administrator plans.

\*\* Excluding providers contracted through a Cigna Strategic Alliance.

\*\*\* Not all transactions are available for all Cigna plans.



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