

IN-NETWORK VS. OUT-OF-NETWORK ACCESS TO CARE.

How your Cigna Medicare Advantage PPO plan works.

You have the option of using in-network or out-of-network providers, as long as they participate in Medicare and accept the plan. Accepting the plan means the doctor is willing to treat you and bill Cigna, even if they are not contracted with Cigna as an in-network Medicare Advantage provider. Unlike many other PPO plans, your cost-share to see an in-network provider or out-of-network provider is the same.

In-network providers

A doctor or health care professional who contracts with Cigna to see Medicare patients.

- › You pay your copay or coinsurance according to your benefits, and your health care provider bills Cigna for the rest. Provider is paid according to their contract with Cigna.
- › In-network Cigna Medicare Advantage PPO providers participate in Medicare and already accept Cigna as part of their contract.
- › They must continue to see you if you're an existing patient.
- › They may choose not to see you if you're not an existing patient and they are not accepting new Medicare patients at that time.

Out-of-network providers

A doctor or health care professional who doesn't currently contract with Cigna to see Medicare patients.

- › You can see any out-of-network provider that participates in Medicare and accepts the plan. Accepting the plan means the doctor is willing to treat you and bill Cigna.
- › You pay your copay or coinsurance. Cigna will pay the rest of the cost of your covered services, including excess charges, up to the Medicare-set limit.
- › An out-of-network provider may refuse to directly bill Cigna, and ask that you pay the full allowable amount set by Medicare. If that happens, you pay the doctor, then submit your claim to Cigna for reimbursement, less your copay or coinsurance.
- › If your doctor won't accept the plan, call Customer Service at the phone number below. Cigna will reach out to the doctor on your behalf to explain how the plan works. In most cases, this will resolve the issue.



Important:

If your provider has questions about your plan, please show them the reverse side of this flyer. We've provided information to help answer questions they may have.

Questions? Customer Service can help.

Call **1-888-281-7867 (TTY 711)**.

October 1 – March 31, 8 a.m. – 8 p.m. local time, 7 days a week. April 1 – September 30, Monday – Friday, 8 a.m. – 8 p.m. local time.

Together, all the way.®



INFORMATION FOR PROVIDERS.

Cigna Medicare Advantage PPO.

Cigna Medicare Advantage PPO plan customers can go to any Medicare provider – in-network or out-of-network – with no referral. This means providers can:

- › Accept patients who show a Cigna Medicare Advantage PPO ID card.
- › Depending on the patient's plan, collect copay or coinsurance at time of service.
- › Submit claims to Cigna for covered services and receive one payment. See **MedicareProviders.Cigna.com > 2021 Out of Network Provider Manual** for further information.
- › Cigna will process claims using:
 - Medicare billing, coding and coverage determination guidelines.
 - Medicare fee schedule including applicable limiting charges.
 - Prospective payment systems.
 - Plan of benefits as described in patient's Evidence of Coverage (EOC).

Important Information:


- › Authorization is recommended but not required, to confirm that services are covered and are medically necessary
 - Notification of inpatient hospital and skilled nursing admissions is requested so that we may inform you and your patients about potentially relevant Cigna programs
 - Notification of certain outpatient procedures, services and supplies is requested; the list of procedures can be found at **MedicareProviders.Cigna.com > Prior Authorization Requirements**
- › **This patient has coverage through an employer group plan. Patients with coverage through employer groups pay the same out of pocket for in-network and out-of-network covered services.**

Out-of-network/non-contracted providers are under no obligation to treat Plan members, except in emergency situations. Please call our Customer Service number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services.

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Contact Information

- › To verify eligibility and benefits or precertification of Medicare Advantage patients, call **1-800-230-6138** Monday – Friday 8am – 5pm CST.
- › To view our *Out-of-Network Provider Manual*, visit **MedicareProviders.Cigna.com > 2021 Out-of-Network Provider Manual**.
- › To learn more about becoming a contracted provider, visit **MedicareProviders.Cigna.com > Forms and Practice Support > Network Interest Forms – Practitioner**.

	Cigna True Choice Medicare (PPO) <Employer Name>	
Name	John Q Public	H7849-800
ID	88888888	
Health Plan	(80840)	
Effective Date	01/01/2022	
MedicareRx Prescription Drug Coverage		
No PCP Required		RxBIN 017010
No Referral Required		RxPCN CIMCARE
COPAYS (IN / OON)		RxGRP 777777
PCP	<\$xx>	Specialist <\$xx>
Emergency	<\$xx>	Urgent Care <\$xx>

This card does not guarantee coverage or payment.

Services may require an authorization by the Health Plan. Medicare limiting charges apply.

Customer Service 1-888-281-7867 (TTY 711)

Provider Services 1-800-230-6138

Authorization 1-888-454-0013

Provider Medical Claims Cigna PO Box 981706 El Paso, TX 79998

Pharmacy Help Desk 1-800-922-1557

Pharmacy Claims Cigna Attn: Pharmacy Services

PO Box 20002 Nashville, TN 37202

myCigna.com

