2012 QUICK GUIDE TO CIIGNA ID CARDS

GO YOU™

Offered by: Connecticut General Life Insurance Company or Cigna Health and Life Insurance Company.
WE PACK A LOT OF IMPORTANT INFORMATION INTO OUR ID CARDS.

This brochure will help define and clarify information that appears on Cigna’s most common customer ID cards. It will 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 Professionals > Resources for Health Care Professionals > Doing Business with Cigna.

You may have noticed

Cigna has a new look – our logo, our colors, even the way we write our name on our materials.

In this brochure, you’ll see that some of our health plans have new ID cards with the Cigna name as a watermark. Other cards have the old Cigna logo. Over the next several months, we will transition all cards over to our new brand.

Regardless of the logos that appear on the cards, please continue to use the ID card for important information about call, claim, and service channels.
KEY

Refer to this key for explanations of the information found on the sample Cigna ID cards featured in this brochure.

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 patient.

4. Collect any copayment at the time of service.


6. ID cards with the Cigna Care Network® logo indicate the patient’s liability varies based on the health care professional’s Cigna Care Network designation. Refer to the online provider directory to determine Cigna Care Network designation.

7. Effective date of coverage.

8. Name of patient’s primary care physician (PCP).

9. Network Savings Program (NSP) logo indicates that out-of-network discounts may apply based upon the primary customer’s home state.

10. Client name.

11. If a third party administers services on behalf of Cigna, the ID card may include multiple logos and may show a different claim address or telephone number on the back of the card.

12. Precertification requirements may be shown as either “Inpatient Admission” or “Inpatient Admission and Outpatient Procedures.”

13. 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 – be sure to check the card for the correct number.

15. “Away From Home Care” indicates the patient has access to the Cigna national network.

16. Indicates Shared Administration.

17. Union identifier.

18. Client-specific network (CSN) logo.
PLEASE NOTE:

There are various standard Cigna ID cards shown in this brochure that are subject to regulatory oversight. As a result, the actual ID card content may vary in order to conform to legislative and regulatory requirements. The ID cards shown are samples and may vary from the actual cards.

- PCP selection encouraged
- No referrals required
- GWH-Cigna ID cards represent all products

Members: Carry this card at all times. Pre-treatment authorization must be obtained for hospital admissions, outpatient surgeries performed outside a physician’s office and for other services not specified in the benefit plan. Member is responsible for obtaining authorization for non-network services. Failure to follow pre-treatment authorization procedures may result in a reduction of benefits. In an emergency, seek care immediately, then call your primary care doctor as soon as possible for further assistance. We encourage you to use a primary care physician as a valuable resource and personal health advocate.

CIGNA has multiple networks. Your plan is paired with the GWH-CIGNA network. To find a GWH-CIGNA provider, please visit your member website at myCIGNAforhealth.com.
• PCP selection encouraged

• Cigna Choice Fund® and medical plan type indicated

• Most coinsurance information shown

• Coinsurance/deductible is paid directly to the doctor/facility by Cigna using patient’s available health funds. Explanation of Payment (EOP) will show any remaining amount due from patient.
• PCP selection encouraged  
• No referrals required  
• In-network coverage only, except emergency care
CIGNA

Managed Care Plans: Primary Care Physicians

- PCP selection required
- Referrals required
- HMO: In-network coverage only, except emergency care
- POS: Offered as an HMO or Network plan; in-network and out-of-network coverage

CIGNA

Managed Care Plans: PPO

- PCP selection encouraged
- Patients in these Cigna-administered plans use Cigna PPO or Cigna OAP networks in the U.S., as indicated on the back of the card
- Network Savings Program logo on back of card indicates out-of-network discounts may apply

CIGNA

Network

- PCP selection required
- Referrals required
- In-network coverage only, except emergency care

CIGNA

Network

- PCP selection required
- Referrals required
- In-network coverage only, except emergency care

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:
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 1.800.XXX.XXXX (Not a Cigna Company)

For Vision, call ABC Company 1.800.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: 1.800.XXX.XXXX                MH/SA: 1.800.XXX.XXXX

CIGNA

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

Customer Service: 1.800.XXX.XXXX                MH/SA: 1.800.XXX.XXXX

CIGNA

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- Referrals required
- In-network coverage only, except emergency care

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

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

Customer Service: 1.800.XXX.XXXX                MH/SA: 1.800.XXX.XXXX
Fundamental Care

- No PCP selection required
- No referrals required
- In-network and out-of-network coverage

Starbridge

- No PCP selection required
- No referrals required
- In-network and out-of-network coverage

CIGNA HealthCare PPO

- No PCP selection required
- No referrals required
- In-network and out-of-network coverage
- No PCP selection required
- No referrals required
- PPO: In-network and out-of-network coverage
- EPO: In-network coverage only, except emergency care

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- PCP selection encouraged

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- No PCP selection required
- No referrals required

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Indemnity Plans

Legal entity name: Group: 1234567
Issue: (80840)
ID: U23456789 01
Name: John Public
ID card acct name: RxBIN 600428 RxPCN 00600000

Indemnity

Rx $10/20%/40%/100%
Rx indy deduct $50
Indiv deduct $300
Family deduct $500
Hospital deduct $200
ER deduct $50
Coinsurance: Medical 80%/20%

Med/Rx deductible applies

Client logo

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. WMAP issue of this card is considered fraud.

INPATIENT ADMISSION:
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 48 hours.

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

For pharmacy, call ABC Company 1.800.XXX.XXXX (Not a Cigna Company)
For vision, call ABC Company 1.800.XXX.XXXX (Not a Cigna Company)

Send claims to:
CIGNA name, PO Box XXXX, Anytown, USA 12345-6789
TPV name, PO Box XXXX, Anytown, USA 12345-6789

Customer service: 1.800.XXX.XXXX

INDIVIDUAL / HOME CARE

www.CIGNA.com

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For pharmacy, call ABC Company 1.800.XXX.XXXX (Not a Cigna Company)
For vision, call ABC Company 1.800.XXX.XXXX (Not a Cigna Company)

Send claims to:
CIGNA name, PO Box XXXX, Anytown, USA 12345-6789
TPV name, PO Box XXXX, Anytown, USA 12345-6789

Customer service: 1.800.XXX.XXXX

AWAY FROM HOME CARE

www.CIGNA.com

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

Note: You can reduce your out-of-pocket expenses by using a Network Savings Program provider. Use of a Network Savings Program provider does not affect your benefit coverage. For help finding a participating provider, please visit our website or call the toll-free number listed on the card.

For Pharmacy, call ABC Company 1.800.XXX.XXXX (Not a Cigna Company)
For vision, call ABC Company 1.800.XXX.XXXX (Not a Cigna Company)

Send claims to:
CIGNA name, PO Box XXXX, Anytown, USA 12345-6789
TPV name, PO Box XXXX, Anytown, USA 12345-6789

Customer service: 1.800.XXX.XXXX
MORE WAYS TO ACCESS PATIENT INFORMATION WHEN YOU NEED IT

USE OUR ELECTRONIC TOOLS

• Access our secure websites:
  – Cigna for Health Care Professionals (CignaforHCP.com) for patients with Cigna ID cards
  – Secured Provider Portal (GWHCignaforHCP.com) for patients with GWH-Cigna ID cards

• Connect to us through electronic data interchange (EDI):
  Visit Cigna.com > Health Care Professionals > Resources for Health Care Professionals > Doing Business with Cigna > How to Submit Claims to Cigna to learn more

• Call our automated phone system 1.800.88Cigna (882.4462)

CONDUCT ADMINISTRATIVE TRANSACTIONS ONLINE

Cigna’s convenient eServices tools help you handle the administrative details of health care.

• Access patient eligibility and benefits
• Estimate patient liability
• 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 advice and automatically load it to your accounts receivable system
• Submit questions about fee schedules and specific patient benefits

LEARN MORE

Read more about our electronic tools at Cigna.com > Health Care Professionals > Network Benefits > Learn more about Cigna eServices.