QUICK GUIDE TO CIGNA ID CARDS
WE PACK A LOT OF IMPORTANT INFORMATION INTO 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 Professionals > Resources for Health Care Professionals > Doing Business with Cigna.

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.
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.

5 May read as “Connecticut General Life Insurance Co.,” “Cigna Health and Life Insurance Company” or “Cigna HealthCare of XXXX, Inc.”

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

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 be available to the customer.

10 Client name.

11 If a third party administers services in conjunction with 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.
Members: Carry this card at all times. Pretreatment authorization must be obtained for hospital admissions, outpatient surgeries performed outside a physician’s office and for the other service specified in the benefit plan. Member is responsible for obtaining authorization for non-network services. Failure to follow pretreatment 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.

Providers: Pretreatment authorization must be received for all services listed above and as specified in the member’s benefit plan by calling the number on the front of this card or online at CignaforHCP.com. Emergency hospital admissions must be reported within 48 hours.

Notice: Possession of this card does not guarantee coverage or payment for the service or procedure reviewed. Please call the Member and Providers number on the front of this card for eligibility information.

You may be asked to present this card when you receive care. This card does not guarantee coverage. You must meet all the plan’s terms and conditions for services to be covered. It is considered fraud if you KNOWINGLY/PURPOSELY misuse this card.

INPATIENT ADMISSION AND OUTPATIENT PROCEDURES: Your health care professional must contact Cigna to pre-approve these services. They can call the toll-free number listed below or go to CignaforHCP.com for pre-approval.

See your plan documents for pre-approval requirements. If these services are not pre-approved, your plan may not pay for them. In an emergency, get care immediately, then call your PCP as soon as possible for further assistance and advice on follow-up care within 48 hours. We encourage you to use a primary care physician as a valuable resource and personal health advocate.

Preferred Care Network in the U.S. Cigna Healthcare

All benefits are subject to verification of eligibility, definitions, exclusions and contract limitations. Card possession does not certify eligibility for benefits. For US-inpatient services Pre-Authorization required.

CUSTOMERS AND HEALTH CARE FACILITIES / DOCTORS: CIGNA HEALTH CARE FACILITIES / DOCTORS: Payor ID (Cigna) 62308

Claims: Pharmacy Service Center, PO Box 3598, Scranton PA 18505-0598

For Pharmacists Only 1-800-XXX-XXXX

Pharmacy Service Center, PO Box 3598, Scranton PA 18505-0598

Cigna International, P.O. Box 19900, Wrenthing, DE 19880-0000 USA

Online Claims: Visit www.CignaEnergy.com to submit a claim online

Network Savings Program

ABERFORD, NORTH CAROLINA

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Claims: Pharmacy Service Center, PO Box 3598, Scranton PA 18505-0598

For Pharmacists Only 1-800-XXX-XXXX

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Online Claims: Visit www.CignaEnergy.com to submit a claim online

Network Savings Program
Shared Administration OAP

- PCP selection encouraged
- No referrals required
- Cigna Care Network is available

Shared Administration (SAR)

- PCP selection encouraged
- No referrals required
- Cigna Care Network is available

Cigna

Cigna HealthCare PPO

Provider network:

- PCP: Name, ID: U23456789 01
- Out-of-network:
  - Vision: Yes
  - Rx 30%/40%/50%

Coinsurance:

- Specialist: $20
- PCP Visit: $15
- No referral required
- Deductible applies

In-network:

- Rx 30%/40%/50%
- Out 70%/30%
- Out-of-network:
  - Hospital ER: 20%
  - PCP Visit: 15%/20%

No referral required

Pre-certification:

- Pharmacy Questions: 1.800.244.6224
- Eligibility, Benefit and Claim questions please call: SAR TPA phone

SAR fund name

Send claims to:

All Others: PO Box XXXX, Anytown, USA 12345-6789

Pre-certification: Member Src Nu

To access member pharmacy tools go to www.cignasharedadministration.com

To access the online provider directory go to www.myCigna.com

SAR fund number

Preferred Provider Organization (PPO)

Network Savings Program

- Deductible applies
- Out 70%/30%
- Rx 30%/40%/50%

We encourage you to use a PCP as a valuable resource and personal health advocate.

Customer Service: 1.800.XXX.XXXX

PO Box XXXX, Anytown, USA 12345-6789

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

Client

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

Send claims to:

All Others: PO Box XXXX, Anytown, USA 12345-6789

To access the online provider directory go to www.cignasharedadministration.com

To access member pharmacy tools go to www.myCigna.com

Payor Num

Pre-certification:

Pharm Num

Eligibility, Benefit and Claim questions please call: SAR TPA phone

TPV N&A print line

Cigna Payor 62308, PO Box 188004, Chattanooga, TN 37422-8004

www.mycigna.com

www.cignasharedadministration.com

Bene/fits are not insured by Cigna HealthCare

For more information, please refer to your plan documents for your plan's pre-certification requirements. In an emergency, seek care immediately, then notify Cigna within 48 hours.

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Network Open Access

- PCP selection encouraged
- No referrals required
- In-network coverage only, except emergency care

POS Open Access

- PCP selection encouraged
- No referrals required
- Open Access Plus: In-network and out-of-network coverage
- Open Access Plus: In-network coverage only, except emergency care

HMO or POS Open Access

- PCP selection encouraged
- No referrals required
- HMO Open Access: In-network coverage only, except emergency care
- POS Open Access: Offered as an HMO or Network plan; in-network and out-of-network coverage
**AWAY FROM HOME CARE**

**Managed Care Plans: Primary Care Physicians**

- **HMO or POS**
  - Most coinsurance information shown
  - Cigna Choice Fund® and medical plan type indicated
  - PCP selection encouraged
  - N-network coverage only, except emergency care
  - HMO: In-network coverage only, except emergency care
  - LocalPlus: In-network and out-of-network coverage
  - Remaining amount due from patient's available health funds. Explanation of Payment (EOP) will show any required

**DOI**

RxBIN 600428 RxPCN 02150000

**ABC12 & Sons Company**

PCP Phone: 860.123.4567

**Jane Smith**

Name: John Public

ID: U23456789 01

Issuer (80840)

Group: 123

Coverage effective date: MM/DD/CCYY

Legal entity name

Member services: 1-800.XXX.XXXX

MH/SA: 1-800.XXX.XXXX

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

Send claims to:

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

For Pharmacy, call ABC Company 1-800.XXX.XXXX (Not a Cigna Company)

123 Main Street, Suite 999, Anytown, USA 12345-6789

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

Med Group: Sunset Med Group

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

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 15 hours.

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

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Fundamental Care

Primary Network: CIGNA HealthCare PPO
Secondary Network: Beech Street Connecticut General Life Insurance Company

Coverage Effective Date: 08/01/2012
ID: AMI
Name: Name
Account Number: 2466518
Group Name: Group Number

For Benefits, Claim Status, Eligibility or Customer Service, Call 1-800-XXXX-XXXX

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.

This plan does not require pre-certification of coverage for inpatient or outpatient services. Claims will be paid according to terms and conditions of the plan. In the case of an emergency, seek care immediately, then call your family physician for further assistance and direction regarding follow up care.

Send Claims to: TPV / Alliance Mailing Address
All others to: CIGNA HealthCare, P.O. Box 188004, Chattanooga, TN 37422
Payor 62308
Customer Service: 1.800.XXX.XXXX
CIGNA 24-hour Nurseline: 1.866.XXX.XXXX

Provider: Participant is enrolled in a limited-benefit plan. For hospital services, collect patient responsibility when service is rendered or make financial arrangements with the patient in accordance with your policies.

CIGNA 24-hour Nurseline: 1.866.XXX.XXXX

PPO Plans

Beech Street

Primary Network: Beech Street Connecticut General Life Insurance Company
Secondary Network: Beech Street Connecticut General Life Insurance Company

Coverage Effective Date: 08/01/2012
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Starbridge

Primary Network: CIGNA HealthCare PPO
Secondary Network: Beech Street Connecticut General Life Insurance Company

Coverage Effective Date: 08/01/2012
ID: AMI
Name: Name
Account Number: 2466518
Group Name: Group Number

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

- EPO: In-network coverage only, except emergency care
- PPO: In-network and out-of-network coverage
- No PCP selection required
- Patient files claims
- No referrals required
- Open Access Plus

PPO or EPO Plans

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

www.cigna.com

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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 48 hours.

Inpatient admission:

Non-Cadillac

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:

RxBIN: 600428 RxPCN 02150000

Issuer (80840)

Group: 1234567

Coverage effective date: MM/DD/CCYY

Name: John Public

ID card acct name: RuBN 600428 RxPCN 02150000

DOI

Network Savings Program

Card

Send claims to:

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:

PPO or EPO Plans

- PCP selection encouraged

www.cigna.com

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Send claims to:
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 to us through electronic data interchange (EDI): visit Cigna.com > Health Care Professionals > Resources > 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 manage 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

To access our educational resources, log in to CignaforHCP.com > Resources > Medical eCourses for courses about EDI, electronic claim submission, claim status inquiry, appeals, and more.