Thank you for participating in the CIGNA HealthCare Pharmacy Network and for providing service to the individuals we serve. Updates in this newsletter include:

- System updates bring hard edits to Date of Birth and Member Suffix
- COB indicators are turned on for claim processing
- Medicare Rebate reminder for 1st Quarter 2008
- FDA message concerning Albuterol inhalers

COMMERCIAL & MEDICARE PHARMACY UPDATES

System update – Date of Birth and Member Suffix edits

Current process:
Currently, CIGNA's pharmacy claim processing system allows claims to process if the date of birth or the member suffix does not exactly match the member's eligibility data. These claims return a “soft edit” message stating “BIRTHDATE DOES NOT MATCH MEMBERS INFORMATION.”

New process:
CIGNA Pharmacy Management will be implementing a hard denial when a date of birth or member suffix does not match the individual's information in our claim processing system. The message “BIRTHDATE DOES NOT MATCH MEMBERS INFORMATION” will still appear but the claim will not process.

Why the change:
CIGNA HealthCare offers several clinical management programs that assist our members in managing their health. These programs are only effective if our members' prescription claims are processed using the correct data. By tightening up our claim processing, we are better able to assist our members in managing their health.

Timing:
This change will be phased in over several months. The initial system update will occur in mid-August 2008. Completion is expected by late fall. Therefore, this hard edit denial will not impact all members at the same time.

Steps to take in the case of a denial:
If you receive a denied claim with the above message, please follow the process outlined below:

1. Check to make sure the member ID input matches the individual on the prescription.
2. Validate that the member suffix used matches the individual on the prescription. If the prescription is for a dependent, ensure that the correct dependant suffix is used.
3. If the claim still denies, validate the date of birth with the member.
4. If the claim continues to deny for “BIRTHDATE DOES NOT MATCH MEMBERS INFORMATION” after validating the member’s date of birth, you may use the following Prior Authorization Code to process the claim. Code - 20091
5. Ask the member to validate that his or her employer has the correct date of birth in its system. Medicare members should contact CIGNA HealthCare at the number on their ID Card.

PLEASE NOTE – We will be monitoring claims processed with the above Prior Authorization Code to validate that our systems are updated as needed and appropriate usage of this Code occurs. This Prior Authorization Code will only be available for a limited time and will be disabled after first quarter in 2009.

Additional questions:
- Contact CIGNA Pharmacy Services at 1-800-CIGNA-24 or e-mail CIGNA Pharmacy Network Operations at pharmacynetworkoperations@cigna.com.
July and August 2008
Participating Pharmacy Communication

MEDICARE PHARMACY UPDATES

System update – Coordination of Benefits edits

Over the past several months CIGNA has been conducting an extensive audit of COB (Coordination of Benefits) data stored in our membership files to insure the accuracy of the other insurance data for our Medicare Part D members. We are nearing the completion of that work and upon completion we intend to restore dual coverage functionality at the point of sale. That is, we will review for other insurance at the time the claim is submitted. We anticipate that functionality to be turned on sometime in August or September of this year.

What does this mean to you?
When you submit a claim with CIGNA (Medicare Part D) as the primary carrier and our records indicate that we are secondary or lower, the claim will be rejected. In order for the claim to be processed successfully, you will need to submit the claim at the correct coverage level. If the Medicare Part D coverage through CIGNA is secondary the claim must be submitted as secondary coverage. If the Medicare Part D coverage through CIGNA is tertiary the claim must be submitted as tertiary coverage and so on. If you or the member feels that the Medicare Part D coverage should be the primary coverage please contact Customer Services at the phone number on the member’s ID card.

CIGNA Medicare Rx Long-Term Care (LTC) Pharmacy Rebate Reporting

The Centers for Medicare and Medicaid (“CMS”) requires that LTC pharmacies fully disclose all rebates and discounts received from drug manufacturers, related to the Medicare Part D program, to Part D Plan Sponsors. In order for CIGNA HealthCare to meet its reporting obligations to CMS, please be sure to submit rebate information to us for the reporting period January 1 – March 31, 2008 (1st Quarter 2008) by August 20th. All rebate information must be submitted in the file layout found in Exhibit A of the Medicare Part D Addendum. Rebate information should be formatted in Microsoft Excel® and submitted via CD to the following address:

CIGNA Pharmacy Management
900 Cottage Grove Road BSPhr
Hartford, CT 06152
Attn: Pharmacy Audit Manager

IN THE NEWS

FDA Advises Patients to Switch to HFA-Propelled Albuterol Inhalers Now

CFC-propelled inhalers no longer available as of Dec. 31, 2008

The U.S. Food and Drug Administration today issued a public health advisory to alert patients, caregivers and health care professionals to switch to hydrofluoroalkane (HFA)-propelled albuterol inhalers because chlorofluorocarbon (CFC)-propelled inhalers will not be available in the United States after Dec. 31, 2008. CFC-propelled albuterol inhalers are being phased out because they are harmful to the environment by contributing to depletion of the ozone layer above the Earth’s surface.

PLEASE NOTE: Some CIGNA HealthCare formulary options for albuterol and albuterol derived (HFA)-propellant inhalers are:
• Commercial formulary: ProAir HFA, Proventil HFA, and Ventolin HFA.
• Medicare formulary: ProAir HFA, Proventil HFA, Ventolin HFA and Xopenex HFA

Claim Processing Questions
• CIGNA Pharmacy help desk 1-800-558-9363

Network Operations Contacts
• For contracting questions or to request a copy of the CIGNA HealthCare MAC List please email pharmacynetworkoperations@cigna.com.
• If you have questions about our Audit Program please email pharmacyaudit@cigna.com.
• For pharmacy questions on Medicare Part D, please call 1-800-558-9363.
• For more helpful information, visit our websites at:
  o Commercial business - www.cigna.com/pharmacists

For questions on items in this newsletter, please contact Karen Stober at 860-226-5837 or karen.stober@cigna.com.

Connecticut General Life Insurance Company contracts with the federal government. CIGNA MedicareRx is insured by Connecticut General Life Insurance Company. “CIGNA Pharmacy Management” refers to various operating subsidiaries of CIGNA Corporation. Products and services are provided by these operating subsidiaries and not by CIGNA Corporation. These operating subsidiaries include Connecticut General Life Insurance Company, Tel-Drug, Inc., Tel-Drug of Pennsylvania, L.L.C., and HMO or service company subsidiaries of CIGNA Health Corporation.