

# MEDICARE ADVANTAGE QUICK REFERENCE GUIDE



## Arizona

<b>Website</b>	General info visit: <a href="http://www.cignahealthcare.com">www.cignahealthcare.com</a>   Health Care Professionals visit: <a href="http://www.cignaforhcp.com">www.cignaforhcp.com</a>
<b>Eligibility Verification</b>	Customer Service provides eligibility and copay information for plan members. Customer Service: <b>1-800-627-7534</b>   Visit: <a href="http://www.claimstatmcis.com">http://www.claimstatmcis.com</a>
<b>Customer Service</b>	Providers and Customers call: <b>1-800-627-7534</b> Representatives are available to assist with: Provider eligibility and resources   Benefits information   Claims   Appeals   PCP change requests/Customer engagement
<b>Ancillary Services/ Supplemental Benefits</b>	<p><b>OUTPATIENT LABORATORY SERVICES</b> LabCorp Call: <b>1-888-522-2677</b> Ancillary Services Hi-Tech Radiology Authorizations (MRI, CT, PET) – eviCore Imaging Call: <b>1-888-693-3297</b> Fax: <b>1-888-693-3210</b> Home Health – Call Preferred Health Care Network: <b>1-602-395-5100</b> Infusion – Call Coram Home Health Infusion: <b>1-480-240-3200</b> DME – Call Preferred Home Health DME: <b>1-480-446-9010</b> Transportation – Call Access2Care: <b>1-800-285-8818</b> for TTY users 711 In Home NP Services – Call Optum: <b>1-866-217-0220</b></p> <p><b>BEHAVIORAL HEALTH/ SUBSTANCE ABUSE</b> Cigna-HealthSpring Network (Please call for authorizations) Call: <b>1-800-866-6534</b></p> <p><b>DENTAL SERVICES</b> Administered through Cigna Dental Call: <b>1-800-367-7037</b></p> <p><b>ROUTINE VISION</b> Maricopa County: <b>1-800-627-7534</b> Pima County: <b>1-888-886-1995</b></p>
<b>Medical Management – Including PreCert/Prior Authorization</b>	<b>HEALTH SERVICES PRIOR AUTHORIZATION</b> Prior Auth can be obtained through Cigna Inpatient   Admission Notification   Home Health Care/DME Prior Auth – Outpatient Services Elective Admission Notification Call: <b>1-800-285-4813 (Option 3)</b>   If faxing, send attention: AZ Medicare <b>1-866-730-1896</b>
<b>Population Health Management (PHM)</b>	Referrals are required for Population Health Management (PHM) services. Call PHM PROVIDER SUPPORT 24/7: <b>1-602-402-0003</b> , General Info: <b>1-602-282-9662</b> , Email referrals to: <a href="mailto:PHMReferrals@cigna.com">PHMReferrals@cigna.com</a> or fax: <b>1-855-645-1230</b>
<b>Claim Processing</b>	Claims and Appeals questions: <b>1-800-627-7534</b>   Fax: <b>1-860-731-3463</b>   Electronic claims may be submitted through: <a href="http://www.claimstatmcis.com">www.claimstatmcis.com</a>   Use Payor ID: <b>62308</b>   Mail paper claims to: <b>Cigna Medicare Advantage, PO Box 38639, Phoenix, AZ 85069</b>   Do not send disputes to PO Box. Submit disputes to: <b>Cigna Medicare Services, Attn: Claims 25500 N Norterra Dr, Phoenix AZ 85085</b> or fax: <b>1-860-731-3463</b>
<b>Claimstat (Online Portal)</b>	Experience the ease of Claimstat. Your online solution for eligibility verification and claim payment review. Call: <b>1-855-944-3037 Option 4</b>   For after hours: <b>Option 7</b> Email: <a href="mailto:support@avidityhcs.com">support@avidityhcs.com</a> Visit: <b>Avidity HCS, Inc., 10851 N Black Canyon Hwy., Suite 560 Phoenix, AZ 85029</b>
<b>Compliance</b>	To report potential fraud, waste, or abuse please contact Cigna-HealthSpring's Special Investigations Unit: By email: <a href="mailto:specialinvestigations@cigna.com">specialinvestigations@cigna.com</a> Attn: <b>Cigna Medicare Operations</b>   By phone: <b>1-800-667-7145</b>
<b>Cigna Behavioral Health (CBH) Services</b>	Call: <b>1-800-866-6534</b>
<b>Network Operations</b>	Call: <b>1-800-627-7534</b>   Fax: <b>1-860-771-4368</b>
<b>Sample ID Card</b>	<p><b>Please NOTE:</b> Achieve Plus (HMO SNP) ID cards look similar to these examples except they have green lettering and stripe down the left side of the card. The Alliance plan ID cards have blue lettering and stripe down the left side of the card.</p>
<b>Demographic Changes and Directory</b>	<b>DEMOGRAPHIC CHANGES</b> Email: <a href="mailto:AZMA_PDV@cigna.com">AZMA_PDV@cigna.com</a> Must include old and new information, TIN, NPI and effective date. <b>ONLINE DIRECTORY</b> <a href="https://providersearch.hsconnectonline.com/OnlineDirectory">https://providersearch.hsconnectonline.com/OnlineDirectory</a>

**PHARMACY – PART D**Prior Authorization Requests: <http://www.covermy meds.com> (Preferred method)Home Delivery: **1-877-813-5596**Formulary Website: <https://www.cigna.com/medicare/part-d/drug-list-formulary> | Fax: **1-866-845-7267**Forms: <https://www.cigna.com/healthspringdrugforms> | Questions? Call: **1-877-813-5595**

# PART D PRIOR AUTHORIZATIONS (PAS) MADE EASIER

## Provider news and updates 2018

### 1. NEW, ONLINE PROCESS MAKES PAS FASTER AND EASIER.

Cigna has teamed with CoverMyMeds® to help prescribers and pharmacies:

- › Submit and track PAs online.
- › Ensure all required information is submitted.
- › Reduce paperwork related to missing information.
- › Receive electronic determinations and create renewals from previous requests.

It's free and HIPAA-compliant. Sign up at **www.CoverMyMeds.com**.

### 2. PREFER TO FAX PAS? USE OUR ONLINE FORMS LIBRARY.

Cigna offers an online library of drug-specific forms that help:

- › Ensure all required information is submitted.
- › Reduce callbacks related to missing information.

It's easy to use the search tool and print forms at **www.Cigna.com/HealthSpringDrugForms**.

Fax completed forms to **1-866-845-7267**.

### 3. 2018 FORMULARY CHANGES. PREVENT GAPS AND IMPROVE ADHERENCE.

- › When writing new prescriptions: Consider medications listed at the lowest tier possible on the 2018 formulary.
- › If a drug has been removed from formulary: Consider switching patient to a covered alternative.
- › If a covered alternative drug will not work for a patient: Please request a PA as soon as possible to ensure continuity of care. Use **www.CoverMyMeds.com** or print forms at **www.Cigna.com/HealthSpringDrugForms** and fax to **1-866-845-7267**.



#### Urgent request reminder

ONLY mark requests as expedited (urgent) if waiting more than 72 hours could harm patient's health. Standard coverage determination requests are reviewed within 72 hours.

**HELP IS JUST A PHONE CALL AWAY.**

Call **1-877-813-5595**

8 am-2 am (EST) Monday-Friday, 8 am-8 pm (EST) Saturday

