

Guide to Your Best Health

with Cigna Medicare



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Who to Contact

At Cigna, we're people helping people, and you can feel confident we are here for you.

For detailed information about your plan and benefits, please refer to your [Evidence of Coverage](#) and select your state.

Department/Program	Information/Assistance provided	Contact Information
Customer Service	<ul style="list-style-type: none"> › Answer your questions about health plan benefits and services, including care management and pharmacy benefits › Help you request or make corrections to your Cigna Medicare Advantage ID card › Help you find a new or change your Primary Care Provider (PCP) › Help you find specialty care and/or behavioral health services or providers › Answer your questions about services or medications that require prior approval or authorization › Coordinate interpreter or translation services for non-English speaking or disabled customers › Live chat with a customer service specialist (you'll need to login to myCigna.com to start a chat) 	<p>AL, AK, CO, FL, GA, IL, KC, MS, NC, Mid-Atlantic, PA, SC, TN, TX, VA: 1-800-668-3813 (TTY 711)</p> <p>AZ: 1-800-627-7534 (TTY 711)</p> <p>myCigna.com</p>
Behavioral Health Services	<ul style="list-style-type: none"> › Depression Disease Management Program › Substance Use Coaching 	<p>1-866-780-8546 (TTY 711) Monday - Friday, 8 a.m. - 5 p.m. Central Time</p>
Care Management	<p>Cigna Customers with one or more chronic conditions may qualify for Cigna's Care Management Programs:</p> <ul style="list-style-type: none"> › Complex Care Management › Disease Management 	<p>To see if you qualify, call Customer Service at 1-800-668-3813 (TTY 711)</p> <p>Online Help: Cigna Medicare Advantage/Case Management</p>
Express Scripts® Pharmacy	<p>Home delivery company and the preferred home delivery pharmacy for Cigna Prescription Drug Plans</p>	<p>1-800-222-6700 (TTY 711) 8 a.m. - 8 p.m. local time, 7 days a week</p> <p>Our automated phone system may answer your call during weekends</p>
Grievances and Appeals	<p>Information on how to file a Grievance and/or Appeal</p>	<p>Visit: Cigna Medicare.com - Grievance's and Appeals or Call the Customer Service number on the back of your ID card</p>
Health Information Line	<p>Speak with a registered nurse for:</p> <ul style="list-style-type: none"> › General health questions 	<p>1-866-576-8773 (TTY 711)</p>

Department/Program	Information/Assistance provided	Contact Information
	<ul style="list-style-type: none"> › Questions about medications › Health information › Where to get care › Finding a nearby health care facility 	24 hours a day, 7 days a week
Health Risk Assessment	Assist you with the completion of the assessment	1-800-331-6769 (TTY 711) Monday - Friday, 8 a.m. - 5 p.m. Central Time
MD Live (Telehealth)	Virtual visit with a board-certified doctor 24/7 to discuss health concerns and/or your medications	1-866-918-7836 (TTY 711)
Online Resources	Cigna Website <ul style="list-style-type: none"> › Customer Resources › Customer Portal › Provider and Pharmacy Directories 	Cigna.com Member Resources and Services Website Assistance 24/7 1-800-853-2713 Customer Portal myCigna.com Provider Directory Download the myCigna App: <ul style="list-style-type: none"> › Apple App Store › Google Play › Amazon app store
Quality Improvement Program	Information about: <ul style="list-style-type: none"> › Preventive screening goals › Assessment of Customer Experience 	Cigna Quality Improvement Program Cigna
Utilization Management for Arizona	Staff are available to answer utilization management questions about services or medications that require prior approval or authorization	1-800-558-4314 (TTY 711) 8 a.m. - 5 p.m. (Mountain Time), Monday - Friday Fax: 1-866-730-1896 Language assistance is available

Language Interpreter Services

Cigna is committed to assuring you receive language interpreter services in a culturally and linguistically sensitive manner. For this reason, Cigna provides services for non-English speaking customers and for people with disabilities to ensure all you are able to communicate with us and your health care providers. Cigna offers interpreters by telephone and written information in other languages and formats, such as Braille, large print letters and accessible electronic documents.

Customer Service can help you with language interpreter services. For more information, view your [Evidence of Coverage](#) online and select your state.

Online Tools and Resources

Cigna's website offers a variety of tools and resources that assist you in understanding your health plan and making the right health care decisions. Go to [Member Resources and Services](#) to access the following:

- › [Find plan documents](#)
Search by ZIP code, County and the Contract number on your Cigna ID card to find specific coverage details about your plan
- › [Find a doctor](#)
Search by State, County and plan type to find in-network primary care and specialty care providers
- › [Find a drug or pharmacy](#)
Find the lowest cost for your prescription drugs and pharmacies near you by searching with your ZIP code
- › [myCigna](#)
You can also use our secure customer portal online at [myCigna.com](#). You will need to register the first time you login, and then you'll be able to access personal health and wellness tools and information:
 - Find care and costs, including telehealth
 - View and print an ID card
 - See up-to-date health plan information including coverage and benefits, claims and Explanation of Benefits (EOB)
 - Manage your profile and preferences
- › [Evidence of Coverage \(EOC\)](#)
Your EOC outlines the rules and policies for your Cigna Medicare Advantage plan and provides details about what your plan includes. To view your EOC, go to the [Evidence of Coverage](#) online page and select your state. Or call Customer Service to request a printed copy of your EOC.
- › [How to Submit a Claim](#)
For information on situations in which you may need to ask us for reimbursement or to pay a bill you have received from a provider, view the [Evidence of Coverage](#) online and select your state. Or call the Customer Service number on the back of your ID card. You may also write to us at:

For Medical Services Reimbursement:

Part C (Medical Services)
Cigna
Attn: Direct Member Reimbursement
Medical Claims
P.O. Box 20002
Nashville, TN 37202

For Prescription Drugs:

Cigna
Attn: Medicare Part D
P.O. Box 14718
Lexington, KY 40512-4718

Cigna Medicare's Quality Improvement Program and Our Commitment to Your Best Health

Through our Quality Improvement Program, we are able to follow your health care journey using surveys and preventive screening reports. Because Cigna wants to help you improve your quality of life, and in order for us to do that, we need to hear from you.

Throughout the year we send you customer surveys, such as the Consumer Assessment of Health Providers and Systems (CAHPS[®]) survey and the Health Outcomes survey (HOS[®]). We ask that you complete these surveys and return to us as soon as possible. Please refer to [Cigna Quality Improvement Program](#) for our progress on meeting our goals.

In addition to surveys, we ask that you also complete your preventive and other health screenings throughout the year. By comparing the results of our surveys and screenings to our Quality Improvements goals, we are able to see how our programs are helping your health. Our objective in 2020, for customers to receive their preventive screenings, was to meet the Quality Improvement Program goals through Centers for Medicare and Medicaid Services (CMS) Star measures of 4 Stars. Please refer to [Cigna Quality Improvement Program](#) to learn about our progress on meeting our goals.

Cigna wants you to continue improving your health. To help you do that, we offer activities and incentives through our Population Health Management program. These include, but are not limited to:

- › Services that benefit your health, such as the Silver&Fit[®] Program and tobacco cessation
- › Preventive Health Guidelines and Immunization Schedules found at [Adult Immunization Schedule by Vaccine and Age Group | CDC](#)
- › Health Assessments (online and mailed)
- › Health reminders and interactive tools
- › Working with providers to get you the care you need
- › Addressing your language and cultural needs
- › Addressing physical and mental health needs
- › Reducing any obstacles to obtaining your greatest quality of health, such as transportation

You may be able to earn gift cards by completing preventive services and yearly health check-ups. Please contact Customer Service for more information.

To learn more about our Quality Improvement Program and ways that it helps you, please consult your Customer Handbook. You may also contact Customer Service.

Health Risk Assessment

The health risk assessment (HRA) is a series of questions that helps us learn more about you, the conditions you have or had in the past and your overall health. We use the results of the assessment to develop a care plan that is designed just for you. The results also helps us determine if you need specialized services, such as care management. You must complete the assessment at the time you enroll with Cigna and then once every year.

Start Your HRA Survey – It's Quick and Easy!

Fill out your yearly HRA survey to help us and your doctor create a care plan that meets your individual needs.

- › Look for your HRA survey in your mailbox
- › Answer your survey:
 - By mail using the postage-paid envelope
 - By phone

For more information, please see the [Health Risk Assessment](#).

Care Management

Cigna offers a care management program at no cost to you. Customers with certain health needs may qualify for one of our care management programs to get the added benefit of a dedicated care manager who helps coordinate care, sets up a pharmacist's review of medication and therapies and finds community resources in addition to health education. Within the Care Management Program is Complex Care Management and Disease Management.

- › Complex Care Management is designed to help customers with one or more chronic (long term, ongoing) conditions such as:
 - Cardiovascular Disease (CVD)
 - Cerebrovascular Disease (Stroke)
 - Chronic Obstructive Pulmonary Disease (COPD)
 - Congestive Heart Failure (CHF)
 - Diabetes
 - Infectious Diseases
 - Mental Health Disorders
 - Transplants
 - Trauma
- › Disease Management is designed to help customers with specific chronic (long term, ongoing) conditions such as Cancer, Depression and End Stage Renal Disease (ESRD).

Note: Specific disease management programs vary by region. Customers may choose to leave care management programs at any time.

To see if you qualify or to get more information, please call Customer Service. You can also visit [Cigna Medicare Advantage/Case Management](#) online for more information about our care management program and how to make a personal request.

Manage your Health

At Cigna, we want to help you lead a healthier life. So we provide educational materials and tools.

Healthy Aging Educational Materials

Cigna care managers may offer you educational materials about healthy nutrition, preventive care, physical activity and exercise, cholesterol, diabetes, high blood pressure and more. To get these materials, ask your doctor or visit [Healthy Aging](#) online.

Self-Management Tools

These materials help you decide when to seek care and compare treatment options. You also have access to interactive tools and calculators. Some of the tools available include, but are not limited to, the following:

- › Maintaining a healthy weight
- › Smoking and tobacco use cessation
- › Encouraging physical activity
- › Healthy eating
- › Managing stress
- › Avoiding at-risk drinking
- › Identifying depressive symptoms

You can access these tools and calculators by visiting [Interactive Tools \(healthwise.net\)](https://www.healthwise.net)

Cigna also offers a variety of population health management programs and services aimed at maintaining your health or managing chronic conditions. Cigna reviews your health information and contacts you to inform you of your enrollment into a particular program or service, describes the program or service and asks whether you want to participate. If you would like to learn more about the programs and services Cigna offers, please contact Customer Service.

Working with Your Health Care Provider to Select the Right Health Care Services for You

At Cigna, some services or medications may need prior authorization. A prior authorization is an approval that your doctor must get from Cigna before you can receive specific services, procedures, medications and medical equipment. Prior authorizations ensure you receive care from doctors who share our commitment to quality care. We work with your health care provider to make sure the services or medications are right for you. And prior authorizations help make it clear what is covered by your plan.

A Medical Prior Authorization allows Cigna to:

- › Check that you are approved for services as part of your health plan
- › Review services to decide if care is medically necessary for you
- › Review services to make sure they are given by the appropriate provider in an appropriate setting
- › Make sure that ongoing and recurring services are actually helping you

You, your doctor or representative may start the prior authorization process by submitting a Preservice Organization Determination, also known as a Prior Authorization Request, to the Utilization Management (UM) staff by phone, mail, or fax. The prior authorization request will be reviewed to determine if services are covered before they are provided.

Talk with your doctor or contact Customer Service at the number listed on the back of your medical ID card to learn what services require prior authorization. Customer Service staff are also available to answer your questions or address the prior authorization process during business hours. After normal business hours, please leave

us a message as we will return your call within one business day. Language assistance and/or supporting hearing devices are provided free of charge.

You can also check your [Evidence of Coverage](#) online and select your state for more information regarding prior authorizations.

If you disagree with a coverage decision we have made, you can appeal our decision. For more information about Cigna's prior authorization process or determinations visit our website at [Organization Determination](#).

Affirmative Statement on Incentives

Cigna bases decisions on the clinical needs of members, benefit availability and appropriateness of care. Objective, scientifically-based clinical criteria and treatment guidelines, such as Milliman and InterQual, along with Medicare National Coverage Guidelines lead the decision-making process. Cigna in no way rewards or incentivizes, either financially or otherwise, practitioners, utilization reviewers, case managers, physician advisers, or other individuals involved in conducting utilization review, for issuing denials of coverage or service, or inappropriately restricting care.

Accessing Care

Cigna has an interactive directory that allows you to search for providers and learn more about each provider. The directory contains provider information, such as name, address, phone numbers, professional qualifications, specialty and board certifications. The directory also contains information for hospitals and other types of facilities.

Please visit [Cigna Provider Directory](#) for more information. You can also contact Customer Service to request a printed directory or to learn details about your provider, such as medical school and residency.

Your Evidence of Coverage provides details about covered and non-covered services. Please go to [Evidence of Coverage](#) online and select your state or call Customer Service for this information.

Primary and Specialty Care

Cigna ensures that primary and specialty care services are provided by qualified health professionals. As a customer, you have the right to choose and/or change your primary care provider (PCP) and arrange for your covered services. You also have access to many kinds of specialists. A specialist is a doctor who provides health care services for a specific disease or part of the body.

You can check [Cigna Provider Directory](#) or call Customer Service to learn which doctors are accepting new patients.

Behavioral Health Services

The body and mind are connected. Our bodies respond to the way we feel, think and act – and vice versa. It's important to recognize if your emotions are negatively affecting your physical health. Strain on your body from routine stress may contribute to physical health problems, as well as emotional health issues, such as depression or anxiety.

Cigna recognizes emotional health is an essential part of our customers' overall health care. This is why we provide key behavioral health services as part of our commitment to your whole health. You don't need a referral from your doctor to get behavioral health

services from in-network health care facilities. However, you will need to get prior authorization from Cigna for these services or professionals. This includes the [Depression Disease Management](#) program and many outpatient behavioral health and substance use services, such as medication management and therapy. Read more about this service at [Behavioral Health](#). To find Behavioral Health Facilities or Providers, visit [Cigna Provider Directory](#) or call Customer Service.

Urgent care

Urgent care centers are available to provide treatment for health concerns when your doctor office is closed, when you are out of your area and not near your doctor's office, or for non-emergent situations. Access [Cigna Provider Directory](#) or call Customer Service to find a location near you.

Emergency care

An emergency is a medical condition that may cause harm to your health. Emergency services do not require prior authorization. If you experience a life-threatening medical emergency, go to the nearest emergency room or call 911.

How to obtain care after normal business

You also have the right to get non-emergency care after your PCP's office is closed. If you need to talk with your PCP or get medical care when the PCP office is closed, and it is not a medical emergency, call the PCP at the phone number found on your ID card. There is always a doctor on call to help you when your PCP isn't available. The Telecommunications Relay Service (TRS) provides a relay service for deaf, hard-of-hearing and/or persons with speech and language disorders by dialing 711. The TRS will assist you in contacting your PCP.

Out-of-Area Coverage

You may get covered emergency medical care whenever you need it, anywhere in the United States and its territories. Your plan also covers emergencies outside of the country. If you have an emergency, we will talk to the doctors who are giving you emergency care to help manage and follow up on your care. The doctors who are giving you care will decide when your condition is stable and the medical emergency is over. For more detailed information, access the [Evidence of Coverage](#) online and select your state or call the Customer Service number on the back of your card.

Health Information Line / Nurse Advice Line

As a Cigna customer, you have access to registered nurses 24 hours a day, 7 days a week. The Health Information Line allows you to talk one-on-one with a Nurse Advocate for health related education, guidance and support.

Note: The Cigna Health Information Line is not a substitute for calling 911. If you are experiencing a health care emergency, please call 911 or go to your nearest emergency room.

Telehealth Services – MDLIVE

Cigna Customers can talk to a board certified doctor who can treat non-emergency medical problems and prescribe medications when needed. You can contact Customer Service for more information about this service or access [Virtual Care \(Telehealth\) Options](#) online.

Prescription Benefits

Cigna has a list of medications that are covered by the plan. This list is called the formulary. Please visit the [Medicare Drug List Formulary](#) online to access the formulary for your state. In addition to the list of medications, the formulary provides information about:

- › Prior-authorization requirements
- › Quantity limits
- › Step Therapy
- › Generic Substitution
- › Costs and/or copayments
- › When to request an exception

In addition to the drug formulary, your Evidence of Coverage also provides valuable information about your prescription benefits. Please access [Evidence of Coverage](#) online and select your state or call Customer Service for information or request a printed copy.

Evaluation of New Technologies

Cigna is continually reviewing new medications, innovative medical and behavioral procedures and evolving medical devices as possible benefit additions for our customers. If you would like to learn about this review process, please contact Customer Service or view your [Evidence of Coverage](#) online and select your state.

Rights and Responsibilities

As a person with Medicare, it is your right to:

- › Be treated with dignity and respect at all times
- › Be protected from discrimination
- › Have access to doctors, specialists and hospitals
- › Participate with practitioners in making decisions about your health care
- › Get answers to your Medicare and Medicare Advantage questions
- › Learn about your treatment choices and take part in decisions, regardless of cost or benefit coverage
- › Get information in a way you understand from Medicare, Cigna services, its health plan professionals and customer Rights and Responsibilities
- › Get emergency care when and where you need it
- › Get a timely decision about health care payment or services, or prescription drug coverage
- › Have decisions about health care payment, coverage of services or prescription drug coverage reviewed (also called an appeal)
- › File complaints about the quality of your care (also called a grievance)
- › Keep your personal and health information private
- › Make recommendations about Cigna's Rights and Responsibilities policy

As a person with Medicare Advantage, you have responsibilities, such as:

- › To supply information that your doctor and the health plan needs to treat you
- › To follow plans and instructions that you have agreed to with your doctor(s)

- › To understand your health problems and work with your doctor to develop goals for treatment

Please access your [Evidence of Coverage](#) online and select your state for more detailed information about your Rights and Responsibilities. You may also contact Customer Service for questions about your rights and responsibilities.

Submitting Grievances and Appeals

You have the right to file a grievance. A grievance is an expression of dissatisfaction. It is a complaint or dispute with operations, activities or behaviors from your interactions with the health plan or the providers and facilities.

A grievance is not an issue that involves:

- › Coverage decisions
- › Claims payment

You have the right to file an appeal. An appeal is a formal way of asking us to review and change a coverage decision we have made. When we deny a service, you may receive bills for services not covered by our plan. Cigna will send you a letter explaining:

- › The detailed reason why we will not pay for or deny a service
- › The criteria used to reach the decision
- › Description of the appeal process:
 - How you can file an appeal to ask us to change a decision
 - The time frames for submitting and processing the appeal
 - How to request for a fast appeal

For detailed information about your rights to file a grievance and appeal, please refer to [Evidence of Coverage](#) online and select your state.

Clinical Patient Safety

Cigna Medicare is committed to collaborating with network providers and practitioners to improve patient safety, reduce adverse events and ensure our customers receive quality care. We achieve this by tracking and trending grievances and adverse events and identifying, analyzing and reporting any incident that contributes to poor safety and quality of care.

If you would like to learn more about the program, please contact Customer Service.

Understanding Advance Directives

Advance health care directives are written instructions to your loved ones and others about the type of medical treatment and health care you'd like to receive if you're unable to communicate directly with your health care providers. Because these statements are made before the medical treatment and health care is actually needed, they are often referred to as "advance directives." Advance directives include legal documents such as **living wills** and **durable power of attorney for health care**. Find out what kinds of advance directives there are and learn their importance by visiting [Advance Directives](#) online. You can also access your [Evidence of Coverage](#) online and select your state or contact Customer Service.

Cigna Privacy Practices and You

At Cigna, your privacy is important to us. We take our obligation to keep your Protected Health Information (PHI) secure and confidential very seriously. Your health information will not be shared other than what is allowed by law.

What is Protected Health Information (PHI)?

Protected Health Information includes your name, customer ID number, race, ethnicity, language needs or other indicators that identify you. In some instances, your written approval to use or share your PHI is required by Cigna Medicare.

Notice of Privacy Practice

The laws that protect your privacy give you rights related to getting information and controlling how your health information is used. We give you a written notice, called a "Notice of Privacy Practice," that tells you about these rights and explains how we protect the privacy of your health information.

This is a summary of Cigna Medicare's Privacy Policy. For more detailed information or to request a copy of the "Notice of Privacy Practice," visit our [Privacy Policy](#) online, consult your [Evidence of Coverage](#) online or call Customer Service.