AZ Creditable Coverage Testing Results

The tables below show the results for 2025 creditable coverage testing for Cigna's plans filed in AZ. *Italicized text* represents plans close to the pass / fail creditable coverage benchmark.

Plan Name	Creditable Coverage Result
Bronze \$6000 HSA	Pass
Bronze \$7500	Pass
Bronze \$7900 HSA	Fail
Silver \$3550	Pass
Silver \$4250	Pass
Silver \$5000	Pass
Gold \$1250	Pass
Gold \$1800	Pass
Gold \$2750	Pass
Platinum \$750	Pass

Cigna is providing this information as a courtesy to clients to be used for annual creditability requirements. The creditability test is based on the simplified determination approach as released by CMS on September 18, 2009 and assumes plans have no annual benefit maximum and a lifetime maximum of at least \$1M. For non integrated plans, the criteria only accounts for the average plan pay equivalence comparison and does not account for the other requirements within the approach. For integrated plans, high level medical assumptions are applied to determine actuarial equivalence between the plan's prescription drug coverage and the Medicare Part D-defined standard benefit, no other criteria is used. This determination is not sufficient for collection of retiree drug subsidy. Per CMS, the employer is ultimately responsible for determining the creditability of the plan, and may wish to engage an actuarial consulting firm to incorporate additional information to determine creditability. Incorporating a plan's actual experience may cause this guidance to differ. Therefore, this guidance is not to be interpreted as a formal actuarial attestation.

The creditability tests were calculated using the 2025 Medicare Part D defined standard benefit parameters and assumes Cigna is primary carrier in accordance with Medicare Secondary Payer rules. This determination may differ for Medicare-eligible retirees/former employees when Medicare Part A and B is the primary payer.

This information does not constitute legal advice or a legal opinion on any specific facts or circumstances. It is intended for general information purposes only, and you are urged to consult a lawyer concerning your own situation and any specific legal questions you may have. Cigna assumes no responsibility for any circumstances arising out of the use, misuse, interpretation, or application of any information supplied in this publication, and clients remain solely responsible for assessing whether any plan is creditable under Medicare



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GA Creditable Coverage Testing Results

The tables below show the results for 2025 creditable coverage testing for Cigna's plans filed in GA. *Italicized text* represents plans close to the pass / fail creditable coverage benchmark.

Plan Name	Creditable Coverage Result
Bronze \$6500 HSA	Pass
Silver \$3500	Pass
Silver \$4250	Pass
Silver \$5000	Pass
Silver \$6550	Pass
Gold \$0	Pass
Gold \$1250	Pass
Gold \$2500	Pass
Gold \$3500	Pass
Platinum \$900	Pass

Cigna is providing this information as a courtesy to clients to be used for annual creditability requirements. The creditability test is based on the simplified determination approach as released by CMS on September 18, 2009 and assumes plans have no annual benefit maximum and a lifetime maximum of at least \$1M. For non integrated plans, the criteria only accounts for the average plan pay equivalence comparison and does not account for the other requirements within the approach. For integrated plans, high level medical assumptions are applied to determine actuarial equivalence between the plan's prescription drug coverage and the Medicare Part D-defined standard benefit, no other criteria is used. This determination is not sufficient for collection of retiree drug subsidy. Per CMS, the employer is ultimately responsible for determining the creditability of the plan, and may wish to engage an actuarial consulting firm to incorporate additional information to determine creditability. Incorporating a plan's actual experience may cause this guidance to differ. Therefore, this guidance is not to be interpreted as a formal actuarial attestation.

The creditability tests were calculated using the 2025 Medicare Part D defined standard benefit parameters and assumes Cigna is primary carrier in accordance with Medicare Secondary Payer rules. This determination may differ for Medicare-eligible retirees/former employees when Medicare Part A and B is the primary payer.

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TN Creditable Coverage Testing Results

The tables below show the results for 2025 creditable coverage testing for Cigna's plans filed in TN. *Italicized text* represents plans close to the pass / fail creditable coverage benchmark.

Plan Name	Creditable Coverage Result
Bronze \$5750	Pass
Bronze \$6000 HSA	Pass
Silver \$3500	Pass
Silver \$3500 HSA	Pass
Silver \$4250	Pass
Silver \$5500	Pass
Silver \$6450	Pass
Gold \$0	Pass
Gold \$3000	Pass
Platinum \$0	Pass

Cigna is providing this information as a courtesy to clients to be used for annual creditability requirements. The creditability test is based on the simplified determination approach as released by CMS on September 18, 2009 and assumes plans have no annual benefit maximum and a lifetime maximum of at least \$1M. For non integrated plans, the criteria only accounts for the average plan pay equivalence comparison and does not account for the other requirements within the approach. For integrated plans, high level medical assumptions are applied to determine actuarial equivalence between the plan's prescription drug coverage and the Medicare Part D-defined standard benefit, no other criteria is used. This determination is not sufficient for collection of retiree drug subsidy. Per CMS, the employer is ultimately responsible for determining the creditability of the plan, and may wish to engage an actuarial consulting firm to incorporate additional information to determine creditability. Incorporating a plan's actual experience may cause this guidance to differ. Therefore, this guidance is not to be interpreted as a formal actuarial attestation.

The creditability tests were calculated using the 2025 Medicare Part D defined standard benefit parameters and assumes Cigna is primary carrier in accordance with Medicare Secondary Payer rules. This determination may differ for Medicare-eligible retirees/former employees when Medicare Part A and B is the primary payer.

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