

IN-NETWORK VS. OUT-OF-NETWORK ACCESS TO CARE.

How your Cigna Medicare Advantage PPO plan works.

You have the option of using in-network or out-of-network providers, as long as they participate in Medicare and accept the plan. Accepting the plan means the doctor is willing to treat you and bill Cigna, even if they are not contracted with Cigna as an in-network Medicare Advantage provider. Unlike many other PPO plans, your cost-share to see an in-network provider or out-of-network provider is the same.

In-network providers

A doctor or health care professional who contracts with Cigna to see Medicare patients.

- › You pay your copay or coinsurance according to your benefits, and your health care provider bills Cigna for the rest. Provider is paid according to their contract with Cigna.
- › In-network Cigna Medicare Advantage PPO providers participate in Medicare and already accept Cigna as part of their contract.
- › They must continue to see you if you're an existing patient.
- › They may choose not to see you if you're not an existing patient and they are not accepting new Medicare patients at that time.



Important:

If your provider has questions about your plan, please show them the reverse side of this flyer. We've provided information to help answer questions they may have.

Out-of-network providers

A doctor or health care professional who doesn't currently contract with Cigna to see Medicare patients.

- › You can see any out-of-network provider that participates in Medicare and accepts the plan. Accepting the plan means the doctor is willing to treat you and bill Cigna.
- › You pay your copay or coinsurance. Cigna will pay the rest of the cost of your covered services, including excess charges, up to the Medicare-set limit.
- › An out-of-network provider may refuse to directly bill Cigna, and ask that you pay the full allowable amount set by Medicare. If that happens, you pay the doctor, then submit your claim to Cigna for reimbursement, less your copay or coinsurance.
- › If your doctor won't accept the plan, call Customer Service at the phone number below. Cigna will reach out to the doctor on your behalf to explain how the plan works. In most cases, this will resolve the issue.

Questions?

Customer Service can help. Call **1-888-281-7867 (TTY 711)**. October 1 – March 31, 8 a.m. – 8 p.m. local time, 7 days a week. April 1 – September 30, Monday – Friday, 8 a.m. – 8 p.m. local time.

Together, all the way.®



INFORMATION FOR PROVIDERS.

Cigna Medicare Advantage PPO.

Did you know?

Cigna Medicare Advantage PPO plan customers can go to any Medicare provider – in-network or out-of-network – with no referral. That means you can:

- › Accept patients with these ID cards; look for “PPO” plan type in blue section of the card
- › Collect copay or coinsurance at time of service, depending on the patient’s plan
- › Submit claims to Cigna for covered services and receive one payment; see **MedicareProviders.Cigna.com > Out-of-Network Provider Manual** for further information


Claims Processing

› ELECTRONIC CLAIMS SUBMISSION:

- Change Healthcare/Availability (Payor ID: 63092 or 52192)
- SSIGroup/Proxymed/Medassets/Zirmed/OfficeAlly/GatewayEDI (Payor ID: 63092)
- Relay Health (Professional claims CPID: 2795 or 3839, Institutional claims CPID: 1556 or 1978)

› PAPER CLAIMS SUBMISSION:

- Cigna Medicare Advantage
P.O. Box 981706, El Paso, TX 79998

	Cigna True Choice Medicare (PPO) <Employer Name>	
Name	John Q Public	<Contract/PBP>
ID	88888888	
Health Plan	(80840)	MedicareRx
Effective Date	01/01/2022	Prescription Drug Coverage
No PCP Required		RxBIN 017010
No Referral Required		RxPCN CIMCARE
COPAYS (IN / OON)		RxGRP 777777
PCP	<\$xx>	Specialist <\$xx>
Emergency	<\$xx>	Urgent Care <\$xx>

Important Information

› PRIOR AUTHORIZATION (PA)

PA is only required for in-network and out-of-network services listed at **MedicareProviders.Cigna.com > Prior Authorization**

Prior Authorization

This allows us to confirm that these services are covered and are medically necessary for:

- Inpatient hospital and skilled nursing admissions*
- Outpatient procedures, services and supplies

- › **This patient has coverage through an employer group plan. Patients with coverage through employer groups pay the same out of pocket for in-network and out-of-network covered services.**

Contact Information

- › To verify eligibility and benefits or precertification of Medicare Advantage patients, call **1-800-230-6138** Monday – Friday, 8:00 am – 5:00 pm CST.
- › To view our *Out-of-Network Provider Manual*, visit **MedicareProviders.Cigna.com > Current Out-of-Network Provider Manual**.
- › To learn more about becoming a contracted provider, visit **MedicareProviders.Cigna.com > Forms and Practice Support > Network Interest Forms – Practitioner**.



* PA allows us to inform you about our patient support programs that may help your patients.

Out-of-network/non-contracted providers are under no obligation to treat Plan members, except in emergency situations. Please call our Customer Service number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services.

All Cigna products and services are provided exclusively by or through operating subsidiaries of Cigna Corporation. The Cigna name, logos, and other Cigna marks are owned by Cigna Intellectual Property, Inc. Cigna is contracted with Medicare for PDP plans, HMO and PPO plans in select states, and with select State Medicaid programs. Enrollment in Cigna depends on contract renewal.