



Network News

JANUARY 2019

For providers



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CIGNA AND EXPRESS SCRIPTS ARE NOW ONE COMPANY

We are pleased to share with you that on December 20, 2018, Cigna concluded the purchase of Express Scripts. Together, Cigna and Express Scripts will improve choice, predictability, affordability, and quality of care through more integrated and personalized solutions that advance whole-person health.

No changes to your current processes or reimbursement

There will be no immediate changes to our working relationship or processes with you as a result of the combination. More specifically, there are no immediate changes to:

- › The formulary and pharmacy network aligned to your patients' plans.
- › The process you use to process prescriptions.
- › Plan benefits and programs – including pharmacy plans, plan designs, health improvement programs, and networks.
- › Patient referrals to network-participating providers, facilities, and vendors.
- › Fee schedules or how you're reimbursed.
- › How you verify eligibility and benefits, check claim status, or submit precertification requests.
- › Claim submission addresses and electronic data interchange (EDI) payer ID numbers.
- › Telephone numbers and contacts.
- › Websites.

Please continue to refer to the patient ID card for current benefit and contact information as you do today.



As a company focused on total health and well-being, we believe that our personalized solutions will enhance our partnership with providers by helping you better manage customer care, and create greater alignment to improve health outcomes through deeper medical, behavioral, and pharmaceutical insights. We also believe this combination will better support the whole person, and that our integrated capabilities with Express Scripts will maximize value, affordability, and choice for our customers and employer groups.

Ongoing communication

Please review our [frequently asked questions](#) for answers to many questions you may have about your relationship with the combined company. As the integration progresses and updates become available, we will proactively communicate any future changes through normal channels, including newsletters, email, website postings, and mailed notifications.

Our relationship with you remains a top priority. We look forward to partnering with you to ensure consumers have expanded access to high-quality, affordable health coverage.



VIEW YOUR PATIENTS' UNIQUE ID CARDS ONLINE

Did you know there's a new feature on the Cigna for Health Care Professionals website (CignaforHCP.com) that allows you to view and print your patient's ID card?

It's easy. Just follow these simple steps:

- Log in to CignaforHCP.com. Click Patients.
- Conduct a Patient Search.
- When results appear, click on the Patient ID.
- On the Coverage Details screen, click "View patient's ID card," and the ID card will open in a new window.

You can then view the card online or print a copy of it.

SCROLL TO: ▾
DETAACH | USEFUL LINKS ▾ | ? ▾

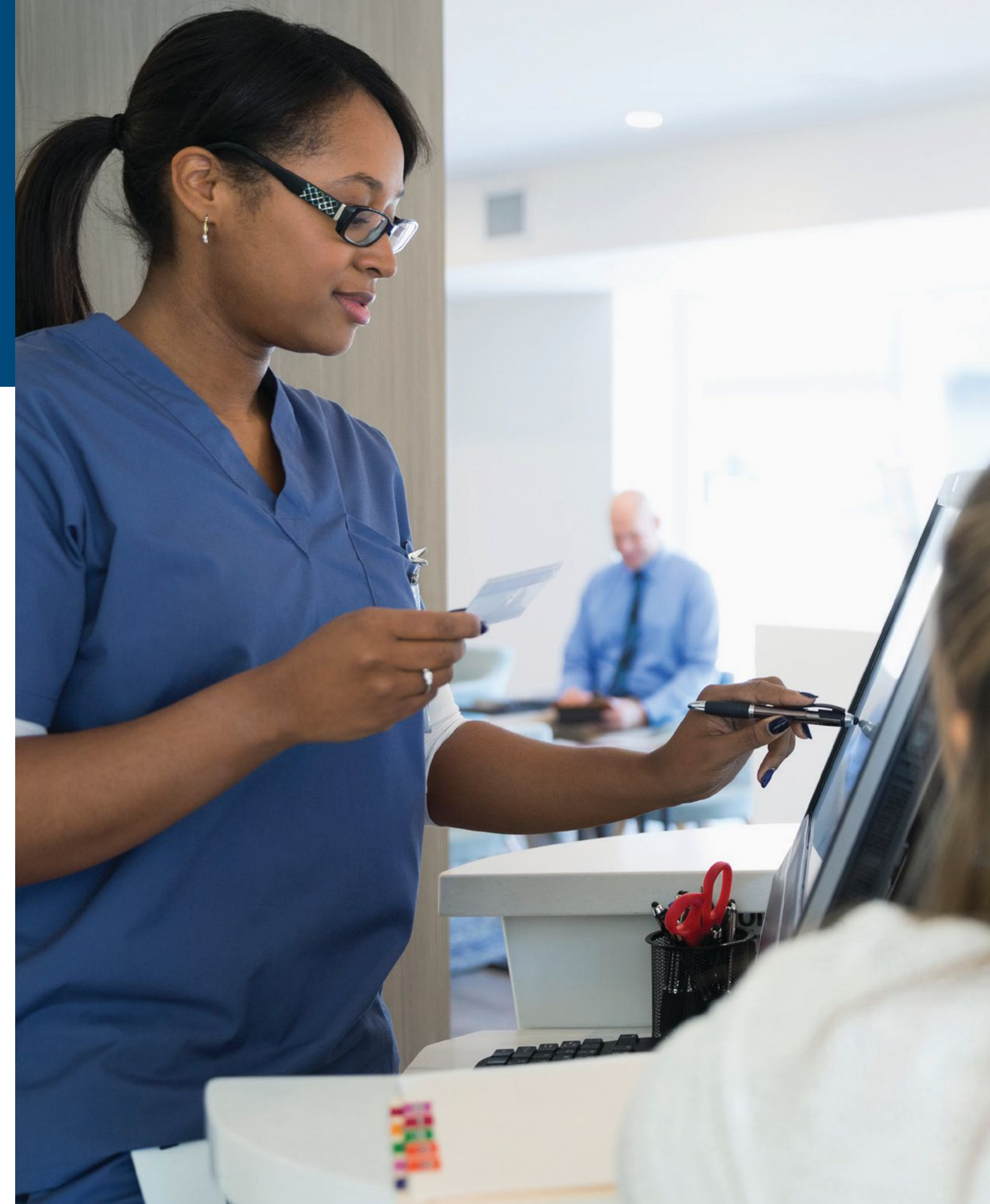
ELIGIBILITY AS OF DATE CAN BE TWO YEARS PRIOR OR UP TO 30 DAYS IN THE FUTURE ▸

UPDATE

Patient ID: 100678827 **Coverage From:** 01/01/2016
Account #: 00616298 **Account Name:** CDHP-ASO-Adapter 01 - L,A,M,D,HR,HS,FSA
Coverage To: Present
Plan: Preferred Provider Organization-PPO
[View patient's ID card](#)

Medical ID Card
 Please note: Temporary cards may not contain all the information on the actual ID card and they expire in 14 days or on the member's current coverage termination date.

Front	Back		
<p>Issue Date: 01/13/2019</p> <p>For coverage info: Customers: Review your coverage on the myCigna website or mobile app, or call 888-992-4462.</p> <p>Roy David Subscriber ID: 100678827 Preferred Provider Organization-PPO Group Number: 00616298 Coverage Effective Date: 01/01/2016 RxBIN: 017010 RxPCN: 05180000</p> <p>PRINT</p>	<p>You may be asked to present this card when you access care. This card doesn't guarantee coverage. You must comply with all items and conditions of the plan. Willful misuse of this card is considered fraud.</p> <p>Hospital Admission: Prior to any non-emergency hospital admission, you or your doctor must call the toll-free Customers and Health Care Professionals number shown below to request "precertification". In the case of an emergency, you, your family, or your doctor must call within 48 hours of hospital admission. Failure to contact Cigna will affect your coverage.</p> <p>In an Emergency: Seek care immediately. Go directly to the nearest emergency facility or call 911.</p> <p>Health Care Professionals: Visit www.CignaforHCP.com or call 800-882-4462.</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> Customer Support Number: 1.866.494.2111 (24 hours a day, 365 days a year) </td> <td style="width: 50%; vertical-align: top;"> Send Medical Claims to: Cigna PO Box 188061 Chattanooga, TN 37422-8061 </td> </tr> </table>	Customer Support Number: 1.866.494.2111 (24 hours a day, 365 days a year)	Send Medical Claims to: Cigna PO Box 188061 Chattanooga, TN 37422-8061
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WEBINAR SCHEDULE FOR DIGITAL SOLUTIONS

You're invited to join interactive, web-based demonstrations of the Cigna for Health Care Professionals website (CignaforHCP.com). Learn how to navigate the site and perform time-saving transactions such as precertification, claim status inquiries, electronic funds transfer (EFT) enrollment, and more. The tools and information you'll learn about will benefit you and your patients with Cigna coverage.

Preregistration is required for each webinar

1. Go to <https://Cigna.Webex.com>.
2. Enter the Meeting Number; then click Join.
3. Enter the session password 123456. (This is the passcode for each webinar.)
Click OK.
4. Click Registration.
5. Enter the requested information and click Register.
6. You'll receive a confirmation email with the meeting details, and links to join the webinar session and add the meeting to your calendar.

Three ways to join the audio portion of the webinar

Option 1 - When you link to the webinar, "Call me" will appear in a window. If you have a direct outside phone line, you can click this option. You'll receive a phone call linking you to the audio portion.

Option 2 - Call **1.866.205.5379**. When prompted, enter the corresponding Meeting Number shown above. When asked to enter an attendee ID, press #.

Option 3 - Call in using your computer.

For additional webinar dates go to CignaforHCP.com > Explore medical resources > Communications > [Webinars for Health Care Professionals](#).

Questions?

Email: Cigna_Provider_eService@Cigna.com.

TOPIC	DATE	TIME (ET/CT/MT/PT)	LENGTH	MEETING NUMBER
CignaforHCP.com Overview	Tuesday, February 5, 2019	1:00 PM/12:00 PM/11:00 AM/10:00 AM	90 min	716 195 382
Eligibility & Benefits/Cigna Cost of Care Estimator	Tuesday, February 12, 2019	2:00 PM/1:00 PM/12:00 PM/11:00 AM	45 min	718 054 136
EFT Enrollment, Online Remittance, and Claim Status Inquiry	Wednesday, February 20, 2019	12:00 PM/11:00 AM/10:00 AM/9:00 AM	45 min	712 831 508
Website Access Manager Training	Wednesday, February 27, 2019	1:00 PM/ 12:00 PM/11:00 AM/10:00 AM	45 min	717 580 354
CignaforHCP.com Overview	Thursday, March 7, 2019	3:00 PM/2:00 PM/1:00 PM/12:00 PM	90 min	711 904 981
Eligibility & Benefits/Cigna Cost of Care Estimator	Tuesday, March 12, 2019	3:00 PM/2:00 PM/1:00 PM/12:00 PM	45 min	716 405 488
EFT Enrollment, Online Remittance, and Claim Status Inquiry	Wednesday, March 20, 2019	12:30 PM/11:30 AM/10:30 AM/9:30 AM	45 min	719 848 695
Website Access Manager Training	Thursday, March 28, 2019	3:00 PM/2:00 PM/1:00 PM/12:00 PM	45 min	710 514 128



LONELINESS AND ITS AFFECT ON YOUR PATIENTS' HEALTH



Researchers, doctors, and other health care providers have found that loneliness is a growing public health problem – one that can affect both the physical and mental well-being of your patients.

That's because feelings of loneliness are associated with a number of chronic conditions, including depression, heart disease, and cancer. Some research even suggests loneliness has the same affect on mortality as smoking 15 cigarettes a day.* This – coupled with the known higher health care costs for individuals who have both chronic physical and mental health conditions – highlights the need to address the upstream causes of mental well-being issues, including warning signs such as loneliness.

Health care providers can play an integral role in identifying and helping their patients who suffer from loneliness. Yet, it may be challenging to recognize the symptoms.

Cigna survey on loneliness

In May 2018, we surveyed 20,000 adults to understand the affect that loneliness has on people in the United States. This Cigna U.S. Loneliness Index** showed:

- › **Nearly half** of Americans surveyed reported sometimes or always feeling alone.
- › **One in four** of those surveyed rarely or never feel as though there are people who understand them.
- › **Adults 18-22 years old** are the loneliest, and claim to be in worse health than older people.

Making the survey available to all individuals

Now all individuals can test their loneliness level using the same questionnaire we used to create the [Cigna U.S. Loneliness Index](#). To take the survey, go to [Cigna.com](#) > Newsroom > Studies and Reports > Learn more about loneliness in America > [Take the loneliness questionnaire](#).

The 10-item questionnaire assesses subjective feelings of loneliness or social isolation. It is an abbreviated version of the UCLA Loneliness Scale, which is a frequently referenced and acknowledged academic measure for gauging loneliness.

Tips to help you identify patients who may be lonely

- › When asking your patients questions, listen to what they do and don't do, and any feelings of isolation they may vocalize.
- › Do they feel as if they have friends at work? Do they engage with others, or participate in “water cooler” conversations? Because we spend so much time at work, these questions can help determine if your patient feels lonely.
- › Do they feel balanced in the amount of sleep, physical activity, and family time they get? People who identify as being less lonely tend to have more balance in their life.

Tips to give patients who may feel lonely

Once you identify that a patient may be lonely, you can make recommendations to help them immediately and over time, such as:

- › Calling a friend or family member to say “Hi,” schedule lunch, or drop by for a visit.
- › Making a point to stop and talk to others the next time he or she walks through the office or goes to the gym or coffee shop.
- › Scheduling meetings in person instead of by phone.
- › Signing up for a group exercise class to break a sweat and meet new people.

- › Getting the right amount of sleep each night.
- › Avoiding technology before bedtime, and setting an alarm to avoid oversleeping.

Additional Cigna resources

We offer many behavioral and mental health resources to individuals who have Cigna-administered coverage. Encourage patients who may feel lonely to call Cigna at the phone number on their ID card. They can talk to a mental health care provider or a Cigna Customer Service Representative, who can educate them about additional resources that may be available to them under their benefit plan.

Remember that your patients who are lonely may not be aware of it, or have the right vocabulary to express their feelings. You play an important role in assessing this important part of their health and offering support, so that they can get the help they need.

* Testimony before the U.S. Senate Aging Committee, Julianne Holt-Lunstad, Ph.D., 2017; [Aging.Senate.gov](#) > Hearings > [Aging Without Community: The Consequences of Isolation and Loneliness](#).

** Cigna's U.S. Loneliness Index, 2018; [Cigna.com](#) > Newsroom > Studies and Reports > Learn more about loneliness in America > [Take the loneliness questionnaire](#) > [Cigna's U.S. Loneliness Index](#).



CIGNA SUREFIT PLANS NOW IN 18 MARKETS

Since January 1, 2018, the number of geographic markets where Cigna SureFit® plans are offered has more than doubled – from eight to 18. As the plan continues to expand, more providers and facilities will be seeing patients who have this health plan coverage.

What is Cigna SureFit?

Cigna SureFit plans build networks around local-participating physicians, hospitals, and specialists to provide enrolled customers with access to personal, patient-centered care. They can use only the providers and facilities that participate in the network aligned to their Cigna SureFit plan – unless it’s an emergency. Primary care provider selection and referrals for specialty care are required with this plan.



2019 Cigna SureFit plans at a glance

MARKET	AREAS	MARKET EFFECTIVE DATE	NETWORK NAME
Arizona	Phoenix	April 1, 2018	Cigna SureFit with Arizona Care Network and affiliates
California	Southern California	January 1, 2019	Cigna SureFit Southern California
Colorado	Boulder Denver Colorado Springs	NA	Cigna SureFit Health Care Alliance of the Front Range
Mid-Atlantic	Virginia (Northern and Richmond)	NA	Cigna SureFit with Performance One Network
	Washington, DC	July 1, 2018	
Missouri	St. Louis	April 1, 2018	Cigna SureFit Saint Louis
Missouri and Kansas	Kansas City	October 1, 2018	Cigna SureFit Kansas City
North Carolina	Raleigh	April 1, 2018	Cigna SureFit UNC Health Alliance
Tennessee	Chattanooga Knoxville Memphis	NA	Cigna SureFit Tennessee
	Cumberland Plateau Jackson Nashville Tri-City	July 1, 2018	

For more information about Cigna SureFit plans, call **1.866.494.2111**.



LOCALPLUS PLANS EXPAND TO NORTHERN CALIFORNIA AND WASHINGTON

We routinely assess our networks to help ensure that our customers have access to quality, cost-effective care in their geographic areas.

As a result, on January 1, 2019, we began to offer LocalPlus® plans for our customers in:

- › Northern California – Marin, Napa, San Joaquin, Sonoma, and Stanislaus counties.
- › Washington – King and Pierce counties.



LocalPlus ID cards

You can identify your patients with LocalPlus coverage by the LocalPlus logo on their Cigna ID card. The card will contain information about customer service contacts, benefits, and where to submit claims.

Your patients who have access to our national Open Access Plus (OAP) network when they are outside LocalPlus geographies will also have an Away from Home Care logo on the back of their ID card.

Please note that some LocalPlus ID cards may list a primary care provider, even though customers are encouraged – but not required – to select one.

Keep referrals local

You can help your patients maximize their available plan benefits, and minimize out-of-pocket expenses, by referring them to LocalPlus network-participating physicians, hospitals, and other providers. You can find them by searching the online health care professional directory. Go to the Cigna for Health Care Professionals website (CignaforHCP.com) > [Search the health care professional directory](#).

About LocalPlus

LocalPlus plans offer coverage for the full scope of services provided by traditional Cigna-administered plans, within a limited network of local-participating providers and facilities. The LocalPlus suite includes four plans: LocalPlus, LocalPlus In-Network (LocalPlusIN), Choice Fund LocalPlus, and Choice Fund LocalPlusIN.

The key differences between LocalPlus and LocalPlusIN plans are the benefit coverage levels, and whether or not customers can access only LocalPlus network-participating providers for covered services.

Please note that Washington regulations mandate that all plans provide out-of-network coverage. Therefore, LocalPlus and Choice Fund LocalPlus are the only plans offered in Washington, as they include both in-network and out-of-network coverage.

Additional information

For more information, call Cigna Customer Service at **1.800.88Cigna (882.4462)**, or visit CignaforHCP.com > Explore medical resources > Medical Plans and Products > [LocalPlus](#).



CIGNA CONNECT INDIVIDUAL & FAMILY PLAN EXPANSION

On January 1, 2019, the Cigna Connect Individual & Family Plan became effective in one new market – Knoxville, Tennessee. Also, in Arizona we began to offer the plan on-Marketplace, and continue to offer it off-Marketplace.

What is Cigna Connect?

This is an Individual & Family Plan that builds networks around local, participating physicians, hospitals, and specialists to provide customers with access to personal, patient-centered care. Enrolled customers have coverage only for the providers and facilities that participate in the Connect Network (the network aligned to the Cigna Connect plan), including primary care providers (PCPs), specialists, and hospitals – unless it’s an emergency.

Referrals

Connect Network-participating PCPs are responsible for making referrals to participating physicians, hospitals, specialists, and other providers. Specialists are responsible for confirming referrals, either by relying on a PCP’s written referral that a customer presents to the office, or by calling Cigna Customer Service. When calling about a referral, choose the prompt for “specialist referral.”

Cigna Connect Individual & Family Plans at a glance: Expanded markets

MARKET	NETWORK NAME	PCP SELECTION	REFERRAL FOR SPECIALTY CARE	AWAY FROM HOME CARE	OUT-OF-NETWORK BENEFITS
Arizona – Phoenix <i>Added on-Marketplace presence</i>	Connect Network	Required	Required	No	No
Tennessee – Knoxville <i>New</i>					

Provider notification of network-participation status

In October 2018, we mailed letters to affected providers in:

- ▶ Arizona, to inform them that we will begin to offer Cigna Connect Individual & Family Plans on-Marketplace in 2019, as well as continue to offer them off-Marketplace.
- ▶ Tennessee, to notify them of their Cigna Connect network-participation status. Letters to network-participating providers included additional details about the plan, and images of sample customer ID cards.



INDIVIDUAL & FAMILY PLANS: CIGNA EXITS SELECTED MARKETS

Effective January 1, 2019, we no longer offer Individual & Family Plans in two markets, as described below.

- › Cigna LocalPlusIN in the Orlando/Tampa market.
Note that we continue to offer the Cigna Connect EPO in this market, which covers the same 17 counties.*
- › Cigna HMO** in New Jersey.

We want to make you aware of these changes, as they may affect some of your patients who were enrolled in these plans.

Your patients' medical coverage

Beginning January 1, 2019, your patients who had medical coverage through a Cigna Individual & Family Plan in the affected markets may now have coverage through a different plan or a different insurance company.

Customer notification

We mailed notification letters in August 2018 to customers who were affected by these changes.

Affected markets

Refer to the chart on the right for a side-by-side comparison of 2018 versus 2019 Individual & Family Plan offerings by state, market area, and Marketplace presence (on or off).

* Exclusive provider organization.

** Health maintenance organization.

Cigna Individual & Family Plans – 2018 versus 2019

STATE	MARKETPLACE PRESENCE	2018	AS OF JANUARY 1, 2019	
		INDIVIDUAL & FAMILY PLAN	INDIVIDUAL & FAMILY PLAN	NETWORK
AZ	PHOENIX: Off-Marketplace and on-Marketplace	Cigna Connect HMO	Same	Connect Network
CO	DENVER-METRO AND BOULDER: Off-Marketplace and on-Marketplace	Cigna Connect EPO	Same	Connect Network
FL	ORLANDO AND TAMPA: Off-Marketplace	Cigna Connect EPO	Same	Connect Network
		Cigna LocalPlusIN	Discontinued	
IL	CHICAGO: Off-Marketplace and on-Marketplace	Cigna Connect HMO	Same	Connect Network
MO	ST. LOUIS: Off-Marketplace and on-Marketplace	Cigna Connect EPO	Same	Connect Network
NC	RALEIGH: Off-Marketplace and on-Marketplace	Cigna Connect HMO	Same	Connect Network
NJ	STATEWIDE: Off-Marketplace	Cigna Individual HMO	Discontinued	
TN	KNOXVILLE, MEMPHIS, NASHVILLE, AND TRI-CITIES: Off-Marketplace and on-Marketplace	Cigna Connect EPO	Same	Connect Network
VA	RICHMOND AND NORTHERN: Off-Marketplace and on-Marketplace	Cigna Connect EPO	Same	Connect Network

About Cigna Individual & Family Plans

Cigna Individual & Family Plans comply with the Patient Protection & Affordable Care Act, also known as the Affordable Care Act (ACA). They are sold directly to individuals through the Health Insurance Marketplace or an insurance agent (not through an employer). For more information about these plans, call Cigna Customer Service at **1.866.494.2111**.



VIEW DRUG BENEFIT DETAILS USING REAL-TIME BENEFIT CHECK

View drug benefit details using real-time benefit check

On October 1, 2018, we began offering real-time benefit check. This new service can give you access to drug benefit information for your patients with Cigna-administered coverage, during the electronic prescribing process, through your electronic medical record (EMR) or electronic health record (EHR) system.

Real-time benefit check enables you to access patient-specific drug benefit details, such as:

- › Out-of-pocket costs for the prescribed drug in the requested days' supply (e.g., 10, 15, 30, or 90 days).
- › Drug alternatives.
- › Prior authorization information.
- › Step therapy information.
- › Quantity limits.

Your patient's out-of-pocket costs for maintenance drugs will show for a 90-day supply through Cigna Home Delivery Pharmacy.

Drug alternatives are identified for several acute and maintenance medications based on certain factors, such as clinical effectiveness and cost. Drug alternatives are referenced for certain drug classes related to diabetes, cholesterol, and asthma, along with several others. More drugs will be added to this list on an ongoing basis.

EMR or EHR system requirements

Most EMR and EHR vendors enable providers to access real-time benefit check. To access this functionality, you must have a version of their system that supports this feature. For additional information, contact your EMR or EHR vendor.



AUTHORIZED GENERICS OF EPCLUSA AND HARVONI FOR HEPATITIS C

When the first new, highly effective drugs for hepatitis C were approved by the U.S. Food and Drug Administration (FDA) starting in 2013, it transformed the treatment of this chronic, debilitating disease. Today, providers can choose from multiple competitive brands when prescribing their patients this life-saving treatment, but the significantly high list price remains a concern for many.

Authorized generics now available

Starting in January 2019, Gilead Sciences – which manufactures both Epclusa® and Harvoni® for the treatment of hepatitis C – began offering authorized generics (AGs) for these two drugs, at a much lower list price.

What is an AG?

An AG is the exact same drug as the brand-name drug that was approved by the FDA, both in the ingredients and how it works. The only difference is that the AG doesn't have the brand name on the label.

About the Epclusa and Harvoni AGs

The Epclusa and Harvoni AG tablets are the same shape, color, and size as the brand-name versions, except the AG tablets are imprinted with ASE, while the brand-name tablets are imprinted with GSI. In addition, they have the same ingredients:

- ▶ Epclusa is a combination of two ingredients with the generic names of sofosbuvir and velpatasvir. When an AG is dispensed, the prescription label will say sofosbuvir/velpatasvir rather than Epclusa.
- ▶ Harvoni is a combination of two ingredients with the generic names of sofosbuvir and ledipasvir. When an AG is dispensed, the prescription label will say sofosbuvir/ledipasvir rather than Harvoni.

In their press release announcing the launch of the AGs, Gilead Sciences stated, “The authorized generics will launch at a list price of \$24,000 for the most common course of therapy and will be available in January 2019.” This is for a 12-week course of Epclusa or an eight-week course of Harvoni. Individuals with more advanced hepatitis C may require a longer duration of treatment.



What this means to you

We anticipate that an adequate supply of the AGs will become available in late February 2019. Once that occurs, we will begin refilling prescriptions for Epclusa and Harvoni with them. Epclusa and Harvoni are currently covered by Cigna drug formularies at the preferred benefit level, and are subject to prior authorization. Effective March 1, 2019, the brands Epclusa and Harvoni will no longer be covered.

Additional information

Please read the press release on the Gilead Sciences website (Gilead.com) > News and Press: Press Room > See more Gilead Press Releases > 2018 > September 24, 2018: [Gilead Subsidiary to Launch Authorized Generics of Epclusa and Harvoni for the Treatment of Hepatitis C.](#)



HEDIS DATA COLLECTION IS RIGHT AROUND THE CORNER

Each year, we collect data for the Healthcare Effectiveness Data and Information Set (HEDIS®), a core set of performance measures that provides an in-depth analysis of the quality of care that health care organizations provide to their customers. The National Committee for Quality Assurance (NCQA), employers, and health plans developed HEDIS as an industry-wide method to help compare and assess a health plan's performance in a variety of areas.

What you need to know

- › Our initial requests for medical records are mailed to provider offices beginning in late January.
- › The mailing includes a list of patients and a detailed description of what is needed from each medical record. The patients identified on each list are chosen through a random selection process.
- › The HEDIS medical record submission is time sensitive, and the information should be provided within the time frame noted on the request letter.
- › Please note that your contract as a participating provider in the Cigna network requires that you make the necessary data available.
- › If you have an electronic medical record (EMR) system, we can access the medical records remotely through our secure network, or you can upload the medical records directly to our secure file transfer protocol (SFTP) site. Electronic submission is a more efficient process that can minimize disruption to your office. You can also securely fax the requested documentation to us.
- › All protected health information (PHI) is kept confidential, and only shared to the extent permitted by federal and state laws. Data is aggregated to reflect just the presence or absence of a particular procedure at the health plan level.
- › HEDIS record collection is considered a health care operation under the Health Information Portability and Accountability Act (HIPAA) Privacy Rule, and patient authorization is not required.



Shared administration

We provide health benefit services to individuals covered by Taft-Hartley and Federal Employee Health Benefit (FEHB) plans as part of our shared administration program. Please be aware that FEHB plans within the shared-administration product collect their own HEDIS data each year. These plans include:

- › American Postal Workers Union (APWU)
- › National Association of Letter Carriers (NALC)
- › SAMBA Federal Employee Benefit Association

Therefore, if you have Cigna patients who have coverage through a FEHB plan, you may receive separate HEDIS requests directly from the administrators of those FEHB plans. Please follow their instructions to submit any required medical records.

For more information on HEDIS

Go to the Cigna for Health Care Professionals website (CignaforHCP.com) > Explore medical resources > Commitment to Quality > Quality > Healthcare Effectiveness Data and Information Set (HEDIS) Record Collection.

You may also visit the NCQA website (NCQA.org) for more information about HEDIS.



GENETIC COUNSELING SERVICES NOW AVAILABLE THROUGH GENOME MEDICAL

Providers now have another option for in-network, pre- and post-genetic counseling referrals for their patients with Cigna-administered coverage. On October 1, 2018, Genome Medical became a contracted provider for these services.

About Genome Medical

With practice locations throughout the United States, Genome Medical is a leading telegenomics technology and services company. Its medical practice comprises medical geneticists and genetic counselors who provide specialized clinical support, including services for cancer, cardiovascular conditions, reproductive health, pediatrics, and pharmacogenetics.

Telephonic and video genetic counseling option

If local resources are limited, or if you have patients who prefer to have sessions in the convenience of their home, they may be able to take advantage of Genome Medical's telephonic and video genetic counseling.

Why Genome Medical?

Cigna is committed to helping the people we serve access the genetic expertise and educational tools they need to make informed health care decisions for themselves and their families. Adding Genome Medical to our genetic counseling program expands our customers' access to a highly specialized nationwide practice of credentialed, network-participating, certified genetic counselors.

For more information about our genetic counseling program, visit [Cigna.com](https://www.cigna.com) > Health Care Providers > Provider Resources > Programs for Patients > [Genetic Testing and Counseling Resources](#).



HOW TO USE AMPLIFON FOR DIGITAL HEARING AIDS



For the past several years, Cigna has partnered with Amplifon Hearing Health Care in an exclusive relationship to provide digital and digitally programmable analog hearing aids and supplies to our customers. We require network-participating providers to order these hearing aids and supplies through Amplifon for their patients with Cigna-administered coverage. This helps to ensure customers receive the maximum value under their benefit plan, and have access to the leading hearing aid brands.

Value to providers

Amplifon acts as the single point of contact for providers, and works directly with them to procure and pay for devices and supplies. This includes Amplifon:

- › Verifying eligibility and benefits.
- › Coordinating delivery.
- › Assuming all up-front costs (no out-of-pocket expenses for devices).
- › Billing Cigna for devices and supplies, thereby eliminating the wait time for reimbursement.
- › Eliminating other financial risks, such as denials, misplaced devices, or unidentified inventory.

This support can help decrease providers' administrative burden and free up more time for patient care.

Value to customers

When customers obtain their hearing aids and supplies through Amplifon, they may save money by taking advantage of:

- › Low-price guarantees on more than 2,000 brand-name hearing aids.
- › Free one-year follow-up care.
- › 60-day hearing aid trial period, with no restocking fees.
- › Free batteries for two years –
 - First set upon delivery of device.
 - Second year through Amplifon directly.
- › Three-year warranty for loss and damage.

How it works

During the ordering process, providers continue to be the main point of contact for their patient, with Amplifon supporting the administrative processes as outlined below.

- › The provider sends a request to Amplifon for hearing devices or supplies.
- › Amplifon verifies the customer's eligibility and benefits, and contacts the provider and customer to review the coverage.

› The provider:

- Determines with the customer the best hearing device for his or her condition.
- Receives a disclosure form from Amplifon to share with the customer, which shows the estimated customer liability based on his or her plan benefit.
- Obtains the customer's signature on the form, acknowledging the estimate.
- Collects any customer liability (check or credit card).
- Sends the payment to Amplifon.¹²
- Places an order with one of the manufacturers that Amplifon represents using Amplifon's purchase order number, which is included with the disclosure form.
- Receives the hearing aids and supplies directly from the manufacturer.
- Fits the customer with the device.

› Amplifon:

- Submits the claim for the device and supplies to Cigna.
- Receives payment and an explanation of payment (EOP) from Cigna.

- Pays the hearing aid dispensing fee directly to the provider 60 days after the device has been given to the customer. **NOTE: The provider does not have to submit a claim for the dispensing fee.**

- › Customer receives an explanation of benefit (EOB).¹³

Providers' responsibilities for other hearing services

There are several services that providers will continue to render, as stated in their Cigna contract.

- › Hearing tests, evaluations, and fittings
- › Analog and disposable hearing aids
- › Follow-up visits and repairs (after Amplifon's three-year warranty)⁴

Additional information

For more information, including requesting hearing devices or supplies, disclosure forms, and purchase orders, call Amplifon Customer Service at **1.855.531.4695**.

1. Customer can also call Amplifon directly, and supply their credit card information.
2. Choice Fund Accounts and Merps accounts will not be collected by the rendering provider. They will be collected directly by Amplifon after the claim has been processed.
3. If Shared Administration Repricing third-party administrator, Cigna will forward to the Claim Administrator.
4. Amplifon subcontracted providers should refer to their Amplifon contract for reimbursement instructions.



CULTUREVISION: ONLINE RESOURCE FOR CIGNA PROVIDERS

The more you know about a patient's health care beliefs and practices, the better you may be able to care for them and develop treatment plans they will follow. To help your culturally diverse population attain the best possible health outcomes, Cigna provides network-participating providers and their office staff with unlimited access to CultureVision™.

What is CultureVision?

CultureVision is a unique online tool that you can use to learn more about the cultural beliefs and lifestyles of specific groups of people. You can then use this knowledge to help improve your care delivery for specific groups within your patient population. There are more than 60 communities that you can access information about based on:

- › Ethnicity (e.g., American Indian, Japanese, Puerto Rican, etc.).
- › Religion (e.g., Islam, Buddhism, Taoism, etc.).
- › Other (e.g., military families, obese or overweight, LGBT, etc.).



Example of how CultureVision works

A Chinese woman in labor is admitted to the hospital. A nurse wants to know if there are any specific cultural traits or patterns that should be considered in this patient's care. To find out, the nurse:

- › Logs in to the CultureVision website (CRCulturevision.com) > Login: CignaHCP, Password: Doctors123*
- › In the Select Group box, clicks Ethic Groups: Chinese.
- › In the left-hand box, clicks Labor, Birth & Aftercare.

There, the nurse finds specific cultural information about traditional labor practices of Chinese women, the role of the father during birth, birth recuperation, breastfeeding, and other related topics.

Try CultureVision today

Although this is a subscription-based service, there is no charge for Cigna network-participating providers. Go to the CultureVision website (CRCulturevision.com).

Login: CignaHCP, Password: Doctors123*

Additional resources to enhance interactions with culturally diverse patients are outlined on [page 25](#).



MEXICAN-AMERICAN CULTUREVISION UPDATE

The information in this article was taken from the CultureVision™ website.

In 2015, there were almost 36 million Mexican Americans in the United States, accounting for nearly two-thirds of the entire Latino/Hispanic population. Although foreign-born Mexicans are the largest immigrant group, some Mexicans came to the U.S. before it was even a country. This is a diverse population that includes individuals with different places of birth, acculturation,* language ability, and education. All of these factors can affect an individual's cultural beliefs and health outcomes.

Updates about Mexican Americans were recently made to the CultureVision website. You may find this information useful when caring for patients of Mexican heritage. Some highlights from the updates are described below.

Use of spiritual healing and healers

In traditional Mexican culture, healers are known as *curanderos* or *curanderas*. They use prayer, ritual, magic, massage, and herbs to treat physical, spiritual, and emotional ailments.

Oral communication

The values of *simpatía* (kindness), *personalismo* (personalizing interactions), *confianza* (trust), and *respeto* (respect and courtesy) are important to many Mexicans, and can be key in helping build relationships with patients.

Culture-bound syndromes

Several culture-bound syndromes** exist in Latino culture, such as *ataque de nervios*, *empacho*, and *susto*. Traditionally, these syndromes are believed to have an emotional or spiritual cause. Treatments can include specific ceremonies, and food or herbal remedies, which are often carried out by a *curandero*.

Common health problems

Mexican Americans have an 18.3 percent prevalence of diabetes. This is higher than the incidence for the overall Latino population (16.9 percent), and almost double that of the non-Hispanic white population (10.2 percent).



CultureVision can help you prepare for a patient visit

Knowing this information can help you to prepare for seeing your Mexican patients. For example, you may want to ask if the patient is seeing a healer (*curandero*), and what type of advice has been given. This is important to determine, because some remedies – such as greta and azarcon – contain lead and can be harmful. You may also want to ask about their ability to access medicine and healthy food, and help connect them to local resources that can assist them in meeting their needs.

For more information on providing culturally competent care to Mexican patients:

- › Visit CRCulturerevision.com.
- › Login: CignaHCP, Password: Doctors123*
- › In the Select Group box, click Ethic Groups: Mexican.

Additional resources to enhance interactions with culturally diverse patients are outlined on [page 25](#).

* Acculturation is the cultural modification of an individual, group, or people by adapting to or borrowing traits from another culture (Merriam-Webster website: <https://www.merriam-webster.com/dictionary/acculturation>).

** A culture-bound syndrome is a collection of signs and symptoms that is restricted to a limited number of cultures by reason of certain psychosocial features (ScienceDirect website: <https://www.sciencedirect.com/topics/neuroscience/culture-bound-syndromes>).



CALIFORNIA LANGUAGE ASSISTANCE PROGRAM TRAINING NOW AVAILABLE

California law requires health plans to provide language assistance program services to eligible customers who have limited English proficiency.* To enhance your ability to serve these patients, we've developed [California Language Assistance Program training](#) for Cigna-contracted health care providers and their staff.

The training provides an overview of:

- › The California Language Assistance Program (CALAP) legislation.
- › California customer demographics.
- › How to access our language services.
- › How to communicate with limited English proficiency (LEP) patients, and engage interpreter services.

To access this training, go to the [Cultural Competency and Health Equity Resources web page](#). Scroll down to the More Resources section. Click [California Language Assistance Program Training for Providers and Staff \(PDF\)](#).

* For more information about how Cigna supports this requirement, see the article, "California Language Assistance Law" in the April 2018 *Network News*. Go to [Cigna.com](#) > Health Care Providers > Provider Resources > Cigna Network News for Providers > [Network News: April 2018](#).



CIGNA GRANT SUPPORTS MARCH OF DIMES NEW MODEL FOR PRENATAL CARE

The preterm birth rate in the United States rose for the third consecutive year, according to the March of Dimes [2018 Premature Birth Report Cards](#).^{*} Babies who survive an early birth may experience lifelong health issues such as learning disabilities, and vision and hearing loss. Infants born even a few weeks early have a greater risk of respiratory distress syndrome (RDS), feeding difficulties, temperature instability (hypothermia), jaundice, and delayed brain development.

Cigna grant funds prenatal program expansion

To help decrease this trend, the Cigna Foundation awarded a three-year, \$310,000 grant to March of Dimes. These funds will be used to expand their new group prenatal care program, called Supportive Pregnancy Care. It's designed to help improve the health of moms and babies during pregnancy, labor and delivery, and infancy.

"Cigna and the Cigna Foundation have a long history of supporting March of Dimes in its mission to help prevent premature births. As we celebrate our 25-year partnership, we're excited to join hands in a program that will help improve the health, well-being, and sense of security for women and their babies," said Mary Engvall, Director of the Cigna Foundation, Civic Affairs, and Corporate Responsibility.

Stacey D. Stewart, President of March of Dimes further stated, "We know that chronic racial and ethnic inequities, and unequal access to quality health care, are factors in the rising preterm birth rate. Group prenatal care, which is gaining in popularity, is an innovative way to help prevent preterm births among all women, including women of color, who are up to 50 percent more likely to deliver prematurely."

Supportive Pregnancy Care: A new model of prenatal care

March of Dimes Supportive Pregnancy Care for moms-to-be is prenatal care in a group setting with women of similar gestational ages. At each group session, women learn to perform their own self-care by measuring and recording their own weight and blood pressure with the help of a facilitator. A licensed obstetric provider meets individually with each woman to perform a physical assessment, and discuss specific concerns in a semi-private area within the group space.

During each visit, women have more time with their health care providers than they would during conventional individual prenatal check-ups. They benefit not only from prenatal care education, but from the vital social and emotional support they receive from other mothers. They also receive support for other challenges they may be facing, such as lack of transportation, access to nutritious food, or a need for basic necessities.

The Supportive Pregnancy Care environment can empower women to take control of their pregnancy care, and fosters relationships that can last throughout their pregnancies and beyond. Research from the National Institutes of Health (NIH) found that a group setting for prenatal care is associated with fewer preterm births, reduced incidents of low-birth-weight infants, and shorter neonatal intensive care stays.^{**}

The program includes web-based tools and a social media platform, to enable mothers to connect and socialize with each other online outside of the group sessions, as well as access helpful information about healthy pregnancies. It's open to any expecting mother interested in participating, regardless of health insurance coverage.



March of Dimes currently is operating Supportive Pregnancy Care pilot sites in Tennessee and Ohio. With the help of the Cigna Foundation grant, it will open new sites in Denver, Colorado, Los Angeles, California, Phoenix, Arizona, and a city to be determined in Massachusetts.

^{*} March of Dimes website: MarchofDimes.org > Our Cause > Tools & Resources > [Premature Birth Report Cards](#).

^{**} Sarah Gareau, Ana López-De Fede, Brandon L. Loudermilk, Tammy H. Cummings, James W. Hardin, Amy H. Picklesimer, Elizabeth Crouch, et al. Group Prenatal Care Results in Medicaid Savings with Better Outcomes: A Propensity Score Analysis of Centering Pregnancy Participation in South Carolina. *Maternal and Child Health Journal*. 2016 Jul;20(7):1384–93. doi: 10.1007/s10995-016-1935-y.

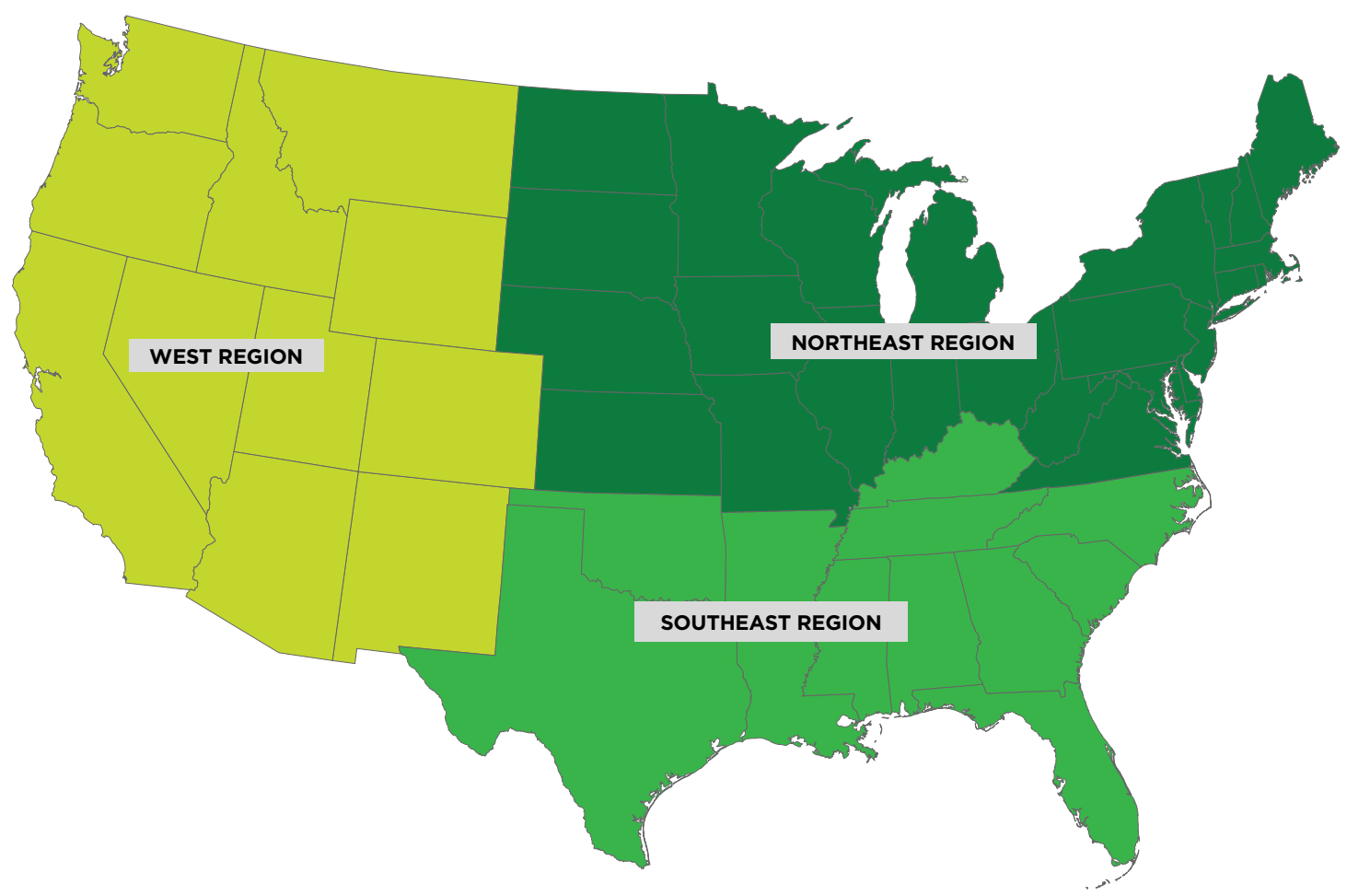
About the Cigna Foundation

The Cigna Foundation, founded in 1962, is a private foundation funded by contributions from Cigna Corporation (NYSE: CI) and its subsidiaries. The Cigna Foundation supports organizations and sharing its commitment to enhancing the health of individuals and families, and the well-being of their communities, with a special focus on those communities where Cigna employees live and work. Cigna.com/Foundation



MARKET MEDICAL EXECUTIVES CONTACT INFORMATION

CLICK ON YOUR REGION TO VIEW YOUR MME CONTACT INFORMATION



Cigna Market Medical Executives (MMEs) are an important part of our relationship with providers. They provide personalized service within their local regions and help answer your health care related questions. MMEs cover specific geographic areas so they are able to understand the local community nuances in health care delivery. This allows them to provide you with a unique level of support and service.

NATIONAL	
Peter McCauley, Sr., MD, CPE <i>Clinical Provider Engagement & Value-Based Relationships</i>	1.312.648.5131
Jennifer Gutzmore, MD <i>Clinical Strategy & Solutions</i>	1.818.500.6459

Reasons to call your MME

- › Ask questions and obtain general information about our clinical policies and programs.
- › Ask questions about your specific practice and utilization patterns.
- › Report or request assistance with a quality concern involving your patients with Cigna coverage.
- › Request or discuss recommendations for improvements or development of our health advocacy, affordability, or cost-transparency programs.
- › Recommend specific physicians or facilities for inclusion in our networks, or identify clinical needs within networks.
- › Identify opportunities to enroll your patients in Cigna health advocacy programs.



USE THE NETWORK

Help your patients keep medical costs down by referring them to providers in our network. Not only is that helpful to them, it's good for your relationship with Cigna, as it's required in your contract. There are exceptions to using the network – some are required by law, while others are approved by Cigna before you refer or treat the patient.

As a reminder, if you are referring patients in New York or Texas to a non-participating provider (e.g., laboratory, ambulatory surgery center, etc.), you are required to use the [Out of Network Referral Disclosure Form](#).

Of course, if there's an emergency, use your professional discretion.

For a complete list of Cigna-participating physicians and facilities, go to [Cigna.com](#) > [Find a Doctor, Dentist or Facility](#). Then, select a directory.



QUICK GUIDE TO CIGNA ID CARDS: INTERACTIVE DIGITAL TOOL

The Quick Guide to Cigna ID Cards contains samples of the most common customer ID cards, along with detailed line-item information. You can view it using our online interactive ID tool or as a PDF.

To access the guide

- › Go to [Cigna.com](#) > Health Care Providers > Coverage and Claims > [Cigna ID Cards](#), or go to the Cigna for Health Care Professionals website ([CignaforHCP.com](#)) > [View Sample ID Cards](#).
- › You'll see sample images of the most common ID cards.
- › To view only the cards for certain plan types, click Filter Cards by Category and select one or more plan types – such as Managed Care Plans, Individual & Family Plans, Strategic Alliance Plans, etc. – from the categories that appear.
- › Choose the image that matches your patient's ID card; the selected sample ID card will appear.
- › Hover over each number shown on the card for more details about that section, or read the key on the right-hand side of the screen.

- › Click View the Back to see the reverse side of the card.
- › Click About This Plan to read more about the plan associated with this ID card.
- › Click View Another Card Type to view a different sample ID card.
- › If you prefer to view a PDF of the guide, click View the print version of the guide.

Other information you can access

On every screen of the ID card tool, you can click a green tab for more information about:

- › The myCigna® App.*
- › More ways to access patient information when you need it.
- › Important contact information.

Click [here](#) to use the digital ID card tool.

*The downloading and use of the myCigna Mobile App is subject to the terms and conditions of the App and the online stores from which it is downloaded. Standard mobile phone carrier and data usage charges apply.

UPDATED CIGNA REFERENCE GUIDES AVAILABLE

The 2018 Cigna Reference Guides for participating physicians, hospitals, ancillaries, and other providers have been updated. They contain many of our administrative guidelines and program requirements, and include information pertaining to participants with Cigna, GWH-Cigna, and "G" ID cards.

Access the guides

You can access the reference guides by logging in to the Cigna for Health Care Professionals website ([CignaforHCP.com](#)) > Resources > Reference Guides > Medical Reference Guides > Health Care Professional Reference Guides. You must be a registered user to access this site. If you are not registered for the website, click on [Register Now](#). If you prefer to receive a paper copy or CD-ROM, call **1.877.581.8912** to request one.



GO GREEN – GO ELECTRONIC

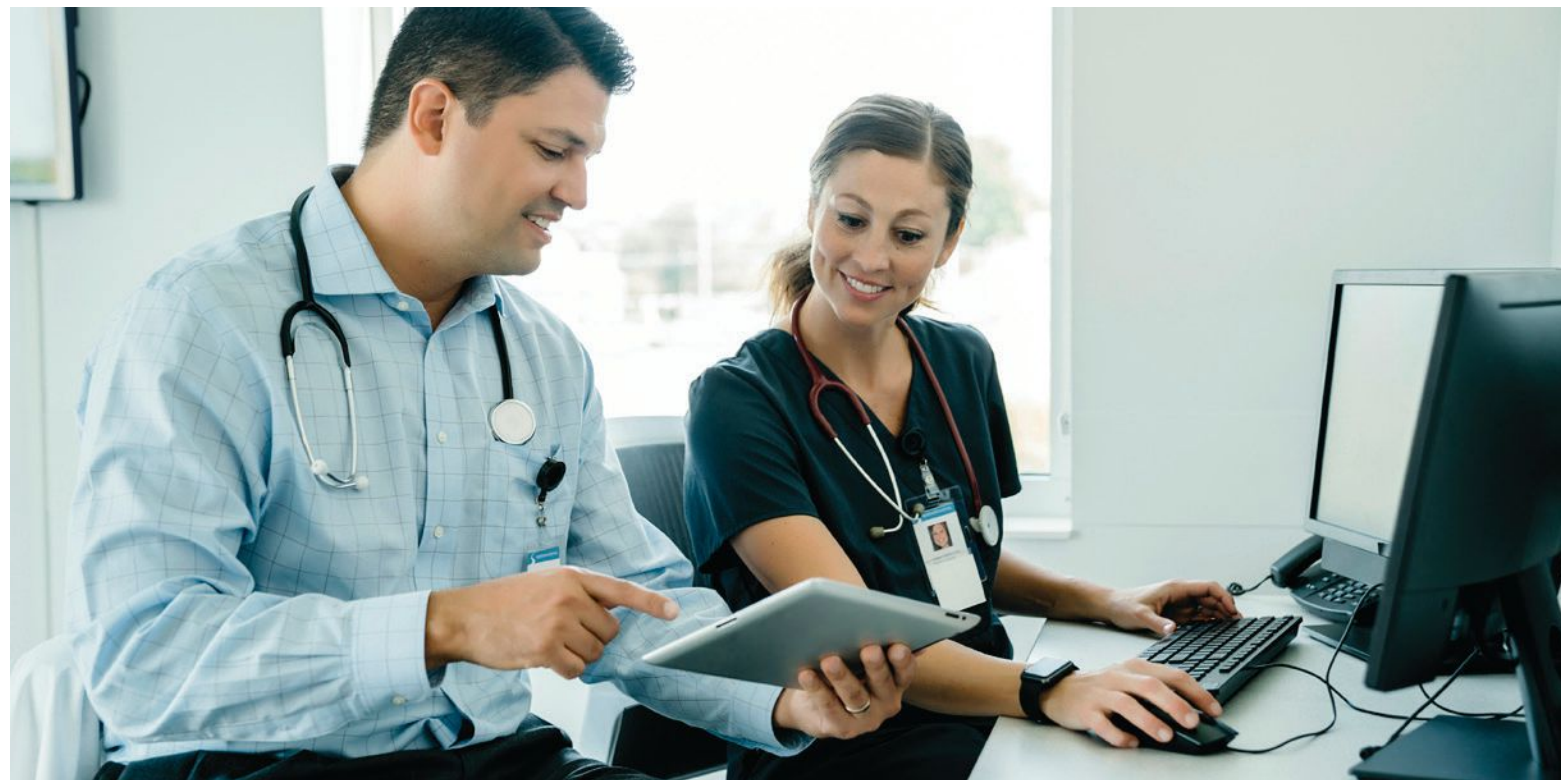
Would you like to reduce paper to your office? Sign up now to receive certain announcements and important information from us right to your in-box.

When you register for the Cigna Health Care Professionals website (CignaforHCP.com), you can:

- › Share, print, and save – electronic communications make it easy to circulate copies.
- › Access information anytime, anywhere – view the latest updates and time-sensitive information online.

When you register, you will receive some correspondence electronically, such as *Network News*, while certain other communications will still be sent by regular mail.

If you are a registered user, please check the My Profile page to make sure your information is current. If you are not a registered user but would like to begin using the website and receive electronic updates, go to CignaforHCP.com and click [Register Now](#).



RESOURCES TO ENHANCE INTERACTIONS WITH CULTURALLY DIVERSE PATIENTS

If you serve a culturally diverse patient population, check out the Cigna [Cultural Competency and Health Equity Resources web page](#). It contains many resources to help you and your staff enhance your interactions with these patients. The website is easy to navigate, streamlined to help you find the information you need quickly, and mobile-friendly. Visit Cigna.com > Health Care Providers > Provider Resources > [Cultural Competency and Health Equity Resources](#).

eCourses, language assistance services, and more

Listed below are some of the resources available to Cigna-contracted providers, at no cost.

eCourses

The following eCourses can help you learn cultural competency overall best practices, and gain a deeper understanding of Hispanics and South Asians in the United States:

- › Developing Cultural Agility
- › Developing Culturally Responsive Care: Hispanic Community (three-part series)
- › Diabetes Among South Asians in the U.S., including translated (Hindi, Nepali, and Urdu) patient education materials on culturally appropriate dietary modifications (three-part series)

Language assistance services

Depending on the service, you can get discounted rates of up to 50 percent for telephonic and face-to-face interpretations, as well as written translations through contracts we have with professional language assistance vendors. Your office works directly with the vendor to schedule and pay for services.

CultureVision™

As a practitioner, it's impossible to know everything about every cultural community you serve. However, learning how and what to ask may increase the likelihood that you will obtain the information you need, and enhance rapport and adherence. Gain these insights through CultureVision, which contains up-to-date, culturally relevant patient care for more than 60 cultural communities.

You can access CultureVision directly at CRCultureVision.com.

Login: CignaHCP

Password: Doctors123*

Additional resources

Many other resources are available on the website, including articles, presentations, white papers, podcasts, and self-assessments. You can find them all in the **All Resources** section of the website.

Visit today

Go to Cigna.com > Health Care Providers > Provider Resources > [Cultural Competency and Health Equity Resources](#).



HAVE YOU MOVED RECENTLY? DID YOUR PHONE NUMBER CHANGE?

Check your listing in the Cigna provider directory

We want to be sure that Cigna customers have the right information they need to reach you when seeking medical care. We also want to accurately indicate whether you are accepting new patients.

It's easy to view and submit demographic changes online

- Log in to the Cigna for Health Care Professionals website (CignaforHCP.com) > Working With Cigna.
- Go to the Update Demographic Information section, and click Update Listing in Health Care Professional Directory.

An online Provider Demographic Update Form will appear that will be prepopulated with the information for your practice that currently displays in our provider directory. You can easily review the prepopulated fields, determine if the information is correct, make any necessary changes, and submit the form to us electronically.

You may also submit your changes by email, fax, or mail.

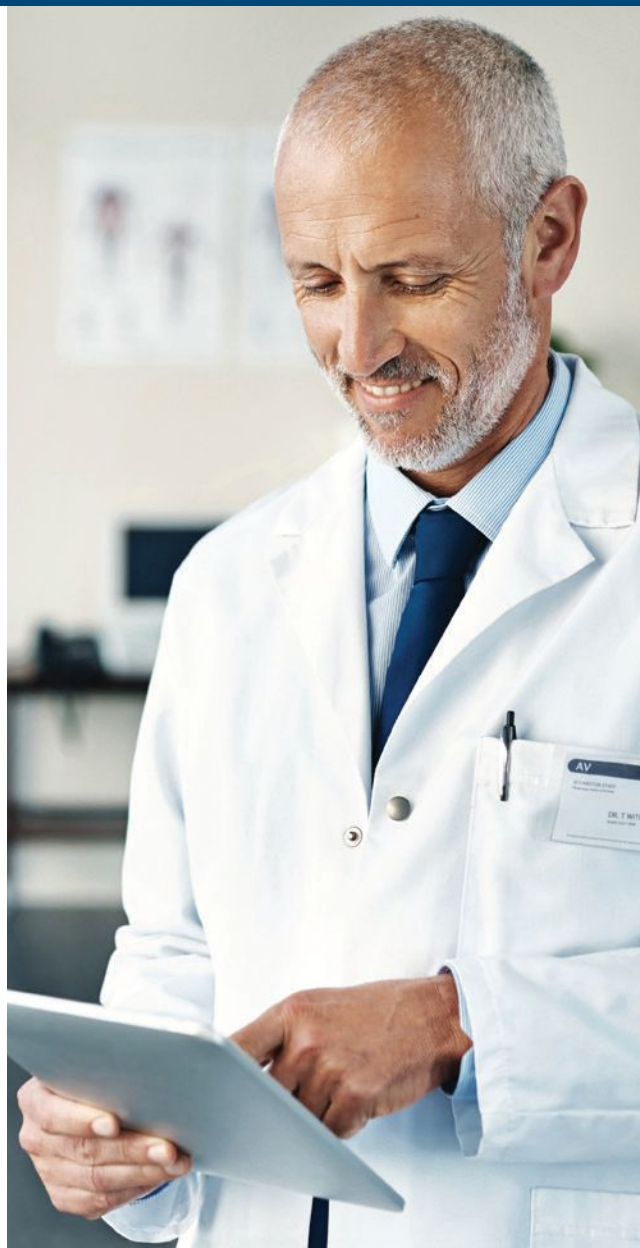
Email: Intake_PDM@Cigna.com

Fax: 1.877.358.4301

Mail: Two College Park Dr.
Hooksett, NH 03106

Update your email address to continue receiving *Network News* and alerts

Notify us if your email address changes so that you won't miss any important communications, such as *Network News*, alerts, and other emails. It only takes a moment. Just log in to CignaforHCP.com > Settings and Preferences to make the updates. You can also change your phone number and password here.



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Your comments or suggestions are always welcome. Please email NetworkNewsEditor@Cigna.com or write to Cigna, Attn: Provider Communications, 900 Cottage Grove Road, Routing B7NC, Hartford, CT 06152.

ACCESS THE ARCHIVES

To access articles from previous issues of *Network News*, visit Cigna.com > Health Care Providers > Provider Resources > [Cigna Network News for Providers](#).

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Network NEWS

JANUARY 2019

For providers