

WELCOME TO CIGNA

Important information that helps guide our relationship

2014

GO YOUSM



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I. CIGNA BENEFIT PLANS AND ID CARDS

This section provides a summary of our benefit plans, including our strategic alliances, Shared AdministrationSM plans, and other features. It also covers Cigna ID cards and specialty pharmacy services.



CIGNA BENEFIT PLANS

Coverage and requirements

- We offer several medical benefit plan designs. Each is listed below along with its requirements.

Open Access

- Primary care physician (PCP) selection encouraged
- No referrals required
- Some plans offer out-of-network coverage

Managed Care

- PCP selection required
- Referrals required
- Some plans offer out-of-network coverage

Preferred Provider Organization (PPO)

- No referrals required
- Some plans offer in-network coverage only

CIGNA BENEFIT PLANS

Cigna Choice Fund® plans

- A health care fund can be packaged with an underlying PPO or Open Access Plus medical plan.
- Two funding options are available:

1

Health Reimbursement Account (HRA)

2

Health Savings Account (HSA)

- Preventive care is generally paid at 100%.
- No copayments apply.
- If funds are available, you may receive coinsurance and deductible payments from a patient's HRA or HSA through the automatic claim forwarding function.

SENIORS AND MEDICARE SEGMENT

Cigna-HealthSpring



- Cigna-HealthSpring (formerly known as HealthSpring) operates Medicare Advantage plans in Alabama, Delaware, Florida, Georgia, Illinois, Maryland, Missouri, New Jersey, Pennsylvania, Tennessee, Texas, Washington, D.C. and West Virginia. In 2014, Cigna-HealthSpring is expanding into additional Cigna markets: Atlanta, North Carolina, and South Carolina.
- Cigna-HealthSpring also operates a national stand-alone prescription drug plan.
- Claim and service channels are different for Cigna-HealthSpring. Continue to use the separate processes and procedures that you currently use with each, and refer to the information on the patient ID card.
- Continue to use the separate contact information:
 - For Cigna Customer Service, call 1.800.88Cigna (882.4462)
 - For Cigna-HealthSpring Provider Service, call 1.800.230.6138
- If your patients have questions, direct them to the number on their patient ID card. Patients with Cigna-HealthSpring ID cards may also call 1.800.668.3813.



Cigna®



II. CIGNA eSERVICES

We offer electronic services that make it easier to obtain the information you need when treating patients. Review this section to learn more about these services.



CIGNA eSERVICES

Enter your User ID and Password; then click Login to log in to the Cigna for Health Care Professionals website (CignaforHCP.com)

[LOGIN / REGISTER](#)
[LEARN HOW TO REGISTER](#)
[SITE BENEFITS](#)

Cigna for Health Care Professionals


User ID »




Password »

[Forgot User ID](#) | [Forgot Password](#)

Don't have a user ID?

[What is a temporary ID?](#)


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CIGNA eSERVICES

Log in to CignaforHCP.com to:

- Easily access all your tools from your dashboard
- Flag patients and claims to quickly and easily save information to your dashboard
- Save your work automatically so it's available the next time you log in

Signed in as: Mary Martin(mmartin1) | Inbox | Settings and Preferences | Logout | Enter Keyword | SEARCH RESOURCES

Cigna. DASHBOARD PATIENTS CLAIMS REMITTANCE REPORTS WORKING WITH CIGNA RESOURCES

FLAGGED PATIENTS FLAGGED CLAIMS

REMOVE UNFLAGGED PATIENTS | VIEW | All Coverage Statuses

Patient ID	Date Flagged	Date of Birth	Patient Last Name	Patient First Name	Coverage Status
U92975185	07/09/2012	05/01/1960	Trent	Kelly	Active
U92973527	07/09/2012	06/25/1967	Fuller	Robyn	Active

USEFUL LINKS

- Provider Directory
- Drug List
- Policies & Procedures
- Precertification Policies

LATEST UPDATES

CUSTOMER SUPPORT

Here are some of the functions available on the website:

- View patient eligibility and benefits
- Estimate patient liability
- View and submit precertification requests
- View claim status
- View claim coding edits
- Enroll in electronic funds transfer (EFT), manage EFT
- Access your remittance reports online the same day you receive your electronic payments



CIGNA eSERVICES

Under Resources, you can:

- Access the Cigna Reference Guides
- View claim appeals policy
- View claim submission addresses and requirements
- Review disease management programs
- Access electronic prescription submission
- View pharmacy formulary
- View the health care professionals directory

Remember to check the website often for policy and procedure updates.

Resources

Find answers quickly. Discover services and use the tools that make the business of health care easier.

BROWSE RESOURCE LIBRARY DOCUMENTS



Medical Resources

Explore newsletters, wellness programs, Cigna medical plans and more. [Learn More](#)



Pharmacy Resources

Find essential pharmacy information, drug lists, and prior authorization forms. [Learn More](#)



Behavioral Health Resources

Learn about our behavioral health treatment guidelines, including guidelines for level of care determinations and clinical practice. [Learn More](#)



Medical eCourses

Explore learning materials that can help you work more efficiently with Cigna. [Learn More](#)



Drug List

Search the Cigna prescription drug list for medications covered by Cigna's coverage plans. [Learn More](#)



Using ID Cards

View sample Cigna customer ID cards with descriptions of the fields on the cards. [Learn More](#)



Clinical Reimbursement Policies and Payment Policies

Find documents, including Cigna appeal policies, claim editing procedures and electronic funds transfer. [Learn More](#)



Forms Center

Browse the forms library and easily find the right form for the right purpose. [Learn More](#)



Reference Guides

Review reference guides to help make doing business with Cigna easier. [Learn More](#)



HIPAA

Check to see if you are up to date with your HIPAA compliance. Review details on HIPAA deadlines and dates. [Learn More](#)

CIGNA eSERVICES

Learn more about our eServices by accessing our free online training. Log in to CignaforHCP.com > Resources > eCourses.

- No special software needed
- Access 24/7
- Download or print to review offline

Medical eCourses

At Cigna, improving your experience with us is a priority. On this page, you will find learning materials that can help you work more efficiently with Cigna. The materials are organized by topic. Simply click on the link to access the information. You can also save, download or print a course once it's opened.

GENERAL			
Document Title	Document Type	Document Size	Last Updated
Welcome to Cigna	PDF	308kb	06/01/2013
2013 Model of Care Training	PDF	212kb	05/01/2013
2013 Arizona Medicare Annual Attestation 	External Site	--	--
Close the Cultural Divide	PDF	101kb	06/01/2013
Cultural Competency	PDF	28kb	06/03/2012
Preparing for ICD-10	PDF	499kb	11/20/2012
Shared Administration 	External Site	--	--
ELECTRONIC DATA INTERCHANGE (EDI) OPTIONS			
Document Title	Document Type	Document Size	Last Updated
EDI Eligibility and Benefits	PDF	60kb	06/01/2013
EDI Electronic Claim Submission	PDF	84kb	06/01/2013
EDI Claim Status Inquiry	PDF	98kb	06/01/2013
EDI Electronic Payment and Remittance Advice	PDF	64kb	06/01/2013
USING THIS WEBSITE (MEDICAL HEALTH CARE PROFESSIONALS)			
Document Title	Document Type	Document Size	Last Updated
Website Overview	PDF	626kb	06/01/2013
Registration and Log In	PDF	460kb	01/15/2013
Eligibility and Benefits	PDF	67kb	01/15/2013
Cigna Cost of Care Estimator 	PDF	3.44mb	01/15/2013
Online Precertification	PDF	9.5mb	01/15/2013
Claim Status Inquiry	PDF	4mb	01/15/2013
Electronic Funds Transfer and Online Remittance Reports	PDF	394kb	06/01/2013
Website User Tools	PDF	99kb	11/02/2012
Health Care Professional Directory	PDF	511Kb	07/01/2013
Assign Access	PDF	308kb	06/01/2013

CIGNA eSERVICES

Electronic data interchange (EDI)

EDI is the electronic exchange of health care information between you, us, and vendors. You can submit information electronically through a vendor or a direct payer connection to us, and we will respond to you electronically – either directly or through the vendor. You use one user ID and password to work with multiple payers.

American National Standard Institute (ANSI) codes are used to establish and maintain a set of common standards in the industry. An ANSI code is associated with a specific type of electronic transmittal.

Electronic data interchange (EDI)	Electronic claims (institutional, professional, and dental)	ANSI 837
	Electronic remittance advice (ERA)	ANSI 835
	Electronic eligibility inquiries and responses	ANSI 270 (inquiry) ANSI 271 (response)
	Electronic claim status inquiries and responses	ANSI 276 (inquiry) ANSI 277 (response)
	Electronic referral, precertification requests, and responses	ANSI 278
	Electronic funds transfer (EFT) <i>(not supported for customers with "G" or GWH-Cigna ID cards)</i>	N/A
	Unsolicited claim acknowledgement	ANSI 277CA

Payer IDs to use when submitting electronic claims to Cigna:

Payer ID	Claim type
62308	Medical, behavioral, dental, and Arizona Medicare Advantage HMO
SX071	Employee assistance program (EAP) and behavioral HMO
59225	Starbridge Beech Street

CIGNA eSERVICES

Electronic remittance advice (ERA) and electronic funds transfer (EFT)

<p>Electronic remittance advice (ERA) ANSI 835</p>	<ul style="list-style-type: none"> • ERA, or the ANSI 835, is the HIPAA-compliant detailed explanation of how your claim was processed. • ERA is available for patients with Cigna, “G” or GWH-Cigna ID cards. • The ERA may be automatically loaded into your accounts receivable system, which can: <ul style="list-style-type: none"> – Help reduce costs – Save time – Reduce posting errors – Shorten the payment cycle
<p>Electronic funds transfer (EFT)</p> <p><i>(Not currently available for payments associated with patients with GWH-Cigna ID cards)</i></p>	<ul style="list-style-type: none"> • EFT (or direct deposit) claim payments are deposited directly into your bank account, avoiding mail delays. • Payments are available the day of the deposit, increasing efficiency and improving cash flow. • A separate direct deposit activity report (DDAR) or remittance report is made available for each deposit on the Cigna for Health Care Professionals website (CignaforHCP.com). The online remittance report provides details of the claims processing payments included in the funds transfer. <p>Important information about EFT:</p> <ul style="list-style-type: none"> • For savings account deposits, you should verify that your bank supports EFT. • If you use more than one Tax ID number (TIN), you must complete a separate EFT enrollment for each TIN. • If your TIN, billing address, or bank account changes, you must submit a change request by logging in to (CignaforHCP.com) > Working with Cigna > Manage EFT Settings • To check the status of your EFT application, log in to CignaforHCP.com > Working with Cigna > Managed EFT Settings

CIGNA eSERVICES

Electronic Funds Transfer and Electronic Remittance Advice

Improve your office workflow and productivity, and shorten the payment cycle by enrolling in electronic funds transfer (EFT). When used together, EFT and electronic remittance advice (ERA) can help eliminate claims payment paperwork and improve your cash flow – no more waiting for paper checks to clear.

Benefits of EFT:

- Eliminate paper check mail delivery and handling
- Access funds on the same day of the deposit
- View a separate remittance report online for each deposit
- Easily reconcile payments using a single remittance tracking number

Enroll in EFT using CignaforHCP.com, or enroll with multiple payers using the Council for Affordable Quality Health Care (CAQH) website at <https://solutions.CAQH.org>.

Benefits of ERA:

- Automatically load remittance information into your accounts receivable system
- Reduce costs and save time
- Reduce posting errors
- Shorten the payment cycle

Enroll in ERA through your EDI vendor or Post-n-Track at Post-n-track.com/Cigna.

CIGNA eSERVICES

Direct Deposit Activity Report (DDAR)

- Immediate online access to your remittance reports (DDAR) and checkless EOP the same day you receive your electronic funds transfer.
- A single tracking number on your DDAR, ERA and EFT helps make reconciling payments easier.
- To access report, log-in to CignaforHCP.com. Under “Remittance Reports” choose how you want to search for your report.
- If you are enrolled for Electronic Remittance Advice (ERA)/ANSI 835, you will still receive your ERA through your EDI vendor.
- Not available for patients with “G” or GWH-Cigna ID Cards at this time.

CIGNA eSERVICES

COCE - Cigna Cost of Care Estimator®

Estimate patient liability using the Cigna Cost of Care Estimator by logging in to the Cigna for Health Care Professionals website (CignaforHCP.com) > Patients > Search Patients > Select a Patient > Estimate Costs.

The estimator allows you to generate estimates showing:

- The cost of a specific service
- Cigna's payment for the service, based on the patient's medical coverage
- The patient's out-of-pocket costs for the service
- The anticipated payment from the patient's health account [e.g., Health Savings Account (HSA), Health Reimbursement Account (HRA), Flexible Spending Account (FSA) when automatic claim forwarding has been enabled.]

CIGNA eSERVICES

COCE - Features of the Cigna Cost of Care Estimator

- Can be used for all professional services in all care settings (e.g., outpatient, facility, specialty), and outpatient and inpatient facility services.
- Available for patients covered by Cigna and Cigna Select:
 - Medical plans (PPO, EPO, Open Access Plus, Open Access Plus In-Network), managed care plans (HMO, network-EPP, HMO Open Access, Network Open Access, HMO POS-Flex, Network POS-DPP, HMO POS Open Access, Network POS Open Access, Choice Fund plans)
 - Behavioral health plans
- Estimated costs are specific to the health care professional or facility requesting the estimate, the treatment or service, and the patient's Cigna coverage.
- Estimates can be generated at any time prior to or during a patient's visit to the office or facility at appointment scheduling, check-in, registration, pre-care, or checkout.
- Only available for contracted health care professionals registered to use CignaforHCP.com.
- This tool is not available for patients to access directly.

CIGNA eSERVICES

COCE - Explanation of estimate

After you submit the estimate, you can see an **explanation of estimate**. The Cigna logo and personalized Cigna coverage information lends credibility.

The estimate is specific to the services provided and the health care professional generating the estimate. It is easy for patients to understand – it clearly illustrates “the math” and helps educate them about how their Cigna coverage influences what they can expect to owe.

Click **PRINT PATIENT ESTIMATE** to print a copy for your patient.


Print

Cost of Care Estimate as of 08/14/2013

Kelly Trent
Cigna Identification Number: U92975185

Health Care Professional or Facility	JOHNSON WILLIAM Q MD	Customer Service
Benefit Category	Hospital Outpatient-Other Outpt Facility Related to an illness	Call the toll-free number on the back of your Cigna ID card
Include Anesthesiology?	No	
Service Date	08/14/2013	
Service Description	43248, UPPER GI ENDOSCOPY/GUIDE, Units 1 43239, UPPER GI ENDOSCOPY, BIOP, Units 1	
In Network?	Yes	
Plan Name	Choice Fund HRA Open Access Plus	

Explanation of Estimate

This estimate shows what you should expect to pay for the specific health care service(s) indicated above. This is only an estimate - it is not a guarantee of coverage for charges made by your health care professional or facility. The final amount you owe may change from this estimate for several reasons: (1) your benefits change, (2) your coverage ends, (3) you have other claims processed before you receive these services, (4) you receive fewer, more or different services, (5) you reach your plan's out-of-pocket maximum (when it starts to pay 100% for covered services), or (6) the amount in your health account changes (if applicable).

Estimated total cost of service (before Cigna payment)	\$1,300.00	This is the total estimated amount as of August 14, 2013, for the service(s) noted above, based on Cigna's discount. This includes the amount Cigna will pay and the amount that will be your responsibility.
Your deductible responsibility	\$200.00	This is the amount calculated based a your yearly maximum deductible of \$200.00 and your paid to date amount of \$0.00 (as of the date of this estimate).
Your coinsurance responsibility	\$110.00	This amount is determined by subtracting the amount remaining from the estimate after your deductible is met and applying your coinsurance rate of 10%.
Your copay responsibility	\$0.00	Your copay for this health care professional or facility, based on your plan design.
Estimate of your total responsibility (after Cigna payment)	\$310.00	The anticipated amount you will owe after your plan benefits are applied to the estimated cost. This includes any deductible, coinsurance or copay. This amount might be lower if you've reached your out of pocket maximum.
Anticipated payment from your health account (for account-based plans only)*	\$50.00	Based on the money available in your health account(s) as of August 14, 2013, this is the amount that is anticipated to be paid directly to your health care professional or facility.
Estimate of what you owe**	\$260.00	This is the estimate of what you'll owe after any health account payment.

PRINT PATIENT ESTIMATE
Close Window



III. CLAIM SUBMISSION AND ADMINISTRATIVE GUIDELINES

This section covers claim submission and processing:

- Provides important claim submission and payment information
- Covers the appeals process if you wish to appeal a claim decision
- Provides contact information by state for demographic changes, such as your office, billing, or payment address



CLAIM SUBMISSION

Improving processing and payment accuracy

- Electronic claim submission can improve claim accuracy.
- For administrative services only (ASO) plans,* if Cigna is the:
 - Primary payer, then claims must be submitted within 90 days** of the date of service
 - Secondary payer, then the claim must be submitted within 90 days of the date of receipt of the explanation of payment (EOP) from the primary payer
- To help ensure timely and accurate payments, include complete and correct information on each claim submission:
 - Contracted Taxpayer Identification Number (TIN)
 - National Provider Identifier (NPI)
 - Health care professional's name as reported to Cigna
 - TIN owner's name, billing address, and telephone number as reported to the Internal Revenue Service
- Your organization may have more than one organization or Type 2 NPI. Use the most appropriate organizational NPI as your primary identifier when submitting the "Billing Provider" on claims. The federal TIN must also continue to be included for tax reporting purposes.
- Cigna accepts CMS-1500 forms for professional claims and UB-04 forms for institutional claims; Cigna also accepts older versions of these claim forms.

*Fully insured plans are not subject to the timely filing timeframe

**Unless a longer period is required by applicable law

CLAIM SUBMISSION

Payer IDs to use when submitting electronic claims to us

Payer ID	Claim Type
62308	Medical, behavioral, dental, and Arizona Medicare Advantage HMO
SX071	Employee Assistance Program (EAP) and behavioral HMO
59225	Starbridge Beech Street

- Both primary and secondary (COB) claims can be submitted electronically to us.
- You don't have to submit Medicare Part A and B coordination of benefits agreement (COBA) claims to us. The Medicare explanation of benefit (EOB) or electronic remittance advice (ERA) will show that those claims are forwarded to us as the secondary payer.

APPEALS PROCESS

To resolve payment disputes

Cigna offers a single level appeal process for participating health care professionals.

- The appeal must be sent within 180 calendar days of the date of initial payment or denial.
- For more information about appeals, visit CignaforHCP.com > Resources > Clinical Reimbursement Policies and Payment Policies > Claim Appeals Policies and Procedures.

Note: Appeals policies may vary by state; statute supersedes Cigna policy. For details on state-specific dispute policies, see the claim appeal information posted on the website.

Patients with Cigna ID cards	Patients with “G” or GWH-Cigna ID cards
Cigna National Appeals Unit P.O. Box 188011 Chattanooga, TN 37422	Cigna GWH-Cigna National Appeals P.O. Box 188062 Chattanooga TN 37422-8062



PRECERTIFICATION

- Check the back of the patient's ID card or CignaforHCP.com for coverage and precertification requirements; the website will have the most up-to-date information.
- Submit requests for elective procedures at least 72 hours before the scheduled service.
- On-line precertification:
 - Get an immediate response to your precertification request – some may get immediate approval
 - Receive a tracking number on every request
 - Print responses for your patient records
 - View the status of any precertification request – including those submitted by phone or by fax.
- For patients with Cigna ID cards:
 - Log in to the Cigna for Health Care Professionals website (CignaforHCP.com) > Patients > View & Submit Precertifications
 - Call 1.800.88Cigna (882.4462)
 - <https://navinet.navimedix.com>
- For patients with “G” or GWH-Cigna ID cards:
 - Call 1.866.494.2111

The referring physician is responsible for obtaining approval for all services that require precertification *prior* to services being rendered.

DEMOGRAPHIC CHANGES

Please notify us in writing **90 days before** changing your office or billing address, telephone number, Tax Identification Number, National Provider Identifier (NPI), or specialty. You can submit your demographic changes by email, fax, or mail. Refer to the chart below to identify the contact information for your state.

State	Submission options
Connecticut, Delaware, Illinois, Indiana, Maine, Massachusetts, Michigan, Minnesota, New Hampshire, New Jersey, New York, Ohio, Pennsylvania, Rhode Island, Vermont, West Virginia, Wisconsin	<ul style="list-style-type: none"> • Email: Intake_PDM@Cigna.com • Fax: 1.877.358.4301 • Mail: Two College Park Dr., Hooksett, NH 03106
Alabama, Arkansas, Florida, Georgia, Kentucky, Louisiana, Maryland, Mississippi, North Carolina, Oklahoma, Puerto Rico, South Carolina, Tennessee, Texas, U.S. Virgin Islands, Virginia, Washington DC	<ul style="list-style-type: none"> • Email: Intake_PDM@Cigna.com • Fax: 1.888.208.7159 • Mail: Cigna PDM, 2701 North Rocky Pointe Dr., Suite 800, Tampa, FL 33607
Alaska, Arizona, California, Colorado, Kansas, Missouri, Nevada, Oregon, Utah, Washington, Wyoming	<ul style="list-style-type: none"> • Email: Intake_PDM@Cigna.com • Fax: 1.860.687.7336 • Mail: 400 North Brand Blvd., Suite 300, Glendale, CA 91203

Note: Third-party vendor states are not listed. For these states, submit your changes directly to the third-party vendor.



IV. NATIONAL VENDORS

Some benefit plans require referrals or precertification for specific services.

This section provides information related to:

- **Laboratory**
- **Home health care**
- **Orthotics and prosthetics**
- **Radiology**
- **Other specialty services**



NATIONAL VENDORS

Laboratory referrals

For laboratory referrals, select from either one of the nation's largest preferred laboratories listed below, or refer to the health care professional online directory for a list of other available participating laboratories.

Access the directory by logging in to CignaforHCP.com > Cigna health care professional directory.

	Laboratory Corporation of America (LabCorp)	Quest Diagnostics, Inc. (Quest)
Call	1.888.522.2677 for account set-up	1.866.MyQuest (697.8378) for account set-up
Website	labcorp.com	questdiagnostics.com
Patient Service Centers	To find the nearest location: <input type="checkbox"/> Call 1.888.522.2677 <input type="checkbox"/> Visit labcorp.com/psc	Make an appointment at the nearest location: <input type="checkbox"/> Call 1.800.377.7220 <input type="checkbox"/> Visit questdiagnostics.com/appointment

NATIONAL VENDORS

Home health care – CareCentrix

- CareCentrix is the national provider of home health care, home infusion, durable medical equipment, and home sleep testing services.
- For a complete list of services and CPT codes covered by CareCentrix, go to CignaforHCP.com > Resources > Clinical Reimbursement Policies and Payment Policies > CareCentrix DME HCPCS Codes.
- Call CareCentrix at 1.800.666.6127 to complete an order for these services (precertification may be required).



Orthotics or prosthetics – Linkia

- Linkia is a specialty health care company dedicated solely to orthotic and prosthetic management and care.
- For orthotic or prosthetic devices, contact Linkia at 1.877.754.6542.

NATIONAL VENDORS

Radiology services – MedSolutions, Inc. (MSI)

- MedSolutions, Inc. (MSI) is the national provider of radiology services.
- MSI is a leading advanced radiology management company, maintaining dual national accreditation from the National Committee for Quality Assurance (NCQA) and the Utilization Review Accreditation Commission (URAC).
- To contract with MSI, call MSI Provider Relations at 1.800.572.2153 or email providerrelations@medsolutions.com.
- For precertification requests, contact MSI at 1.888.693.3297 or visit cigna.medsolutionsonline.com.
- To contact the MSI provider assistance desk, call 1.800.575.4517 option #2 or email PAD@medsolutions.com.
- For information about this arrangement with MSI, visit medsolutions.com/implementation/Cigna or call Cigna Customer Service at 1.800.88Cigna (882.4462).

OTHER SPECIALTY SERVICES

Some Cigna clients use separate vendors for specialty services such as vision, chiropractic care, and mental health or substance abuse. Before referring your patient, verify coverage and the vendor network.

For patients with Cigna ID cards	For patients with “G” or GWH-Cigna ID cards
<ul style="list-style-type: none"> • Visit the Cigna for Health Care Professionals website (CignaforHCP.com) • Call 1.800.88Cigna (882.4462) • Access through your electronic clearinghouse or vendor 	<ul style="list-style-type: none"> • Visit the Cigna for Health Care Professionals website (CignaforHCP.com) • Call 1.866.494.2111 • Access through your electronic clearinghouse or vendor

V. RESOURCES

There are several resources to help you obtain information. A summary of those options is listed here:

- The Cigna Reference Guides for physicians, hospitals, ancillaries, and other health care professionals are available on CignaforHCP.com. Refer to the guides to learn more about Cigna policies, procedures, and programs.

Topics include:
 - Credentialing
 - Medical management
 - Specialty networks
 - Prescription drug program
 - Quality management programs
- Online, self-service options:
 - Electronic data interchange (EDI)
 - Access CignaforHCP.com to quickly determine patient eligibility and benefits, check the status of a claim, locate fee schedules, and much more.
- Customer service:
 - 1.800.88Cigna (882.4462) for patients with Cigna ID cards
 - 1.866.494.2111 for patients with “G” or GWH-Cigna ID cards

Thank you

Offered by: Connecticut General Life Insurance Company or Cigna Health and Life Insurance Company.

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