Cigna
True Choice Medicare (PPO)

Wiser ways to a healthier you.

Focus on what really matters, because life has taught you well.

Life teaches you many lessons, like how important it is to take care of your health. To make the most of every moment. And to find a health plan that fits your individual needs. At Cigna Healthcare℠, we’re here to help you get more from Medicare – and more from life – at every step of your journey toward better health, well-being and peace of mind.

Cigna Healthcare contracts with the Centers for Medicare & Medicaid Services (CMS) to offer Medicare-approved Medicare Advantage plans. Medicare Advantage plans combine Medicare Part A (hospital) and Medicare Part B (medical) coverage in an easy-to-use plan. When you join Cigna Healthcare, you will keep all of your Medicare rights and protections. As a Medicare health plan, our plan must cover all services covered by Original Medicare and must follow Original Medicare’s coverage rules.
Access

- Enjoy the freedom to go to any doctor or hospital that participates in Medicare and accepts your plan.
- Pay the same cost-share to see an in-network or out-of-network provider – unlike many other PPO plans.
- No referral required to see a specialist.
- Telehealth services allow you to connect with a doctor by phone or video.

Wellness and incentives

- Get a yearly check-up that reviews every aspect of your overall health and well-being, at no added cost to you.
- Earn up to $200 in incentives for completing healthy activities with the Cigna Medicare Advantage Incentives program.
- Get reminders to help you get recommended preventive screenings.

Integrated prescription drug coverage

- Save with low, predictable drug costs.
- Choose from more than 62,000 network pharmacies nationwide.
- Get one ID card and one customer service team to support all your medical and prescription needs.

Extra benefits

- Get healthier with our fitness benefit, provided by the Silver&Fit® Healthy Aging and Exercise program.
- Ease the impact of caregiving with caregiver support services available to you and your family.
- Get home-delivered meals after an inpatient hospital or skilled nursing facility stay.
- Review your Summary of Benefits to learn more about additional plan benefits.

Information and support

- Get dedicated care support for chronic conditions and complex care needs.
- Talk one-on-one with a Nurse Advocate any time, with our 24-hour Health Information Line.
- Use myCigna.com and the myCigna® app for online access to your personal health plan information.
- Get health and wellness mailings year-round for added support and guidance.
What we offer.

Cigna Healthcare Medicare Advantage plans go beyond Original Medicare to provide you with additional coverage.

Freedom of choice

Our Medicare Advantage PPO plans offer the freedom to see any doctor or hospital that participates in Medicare and accepts the plan, with no referrals required. Unlike many other PPO plans, you pay the same cost-share to see an in-network provider or out-of-network provider.

Primary care

We're dedicated to helping you improve your health. We work with your doctors to make sure you get the time, attention and quality care you deserve. This approach gives you more ways to get healthier – and stay healthier.

As a Cigna Healthcare Medicare Advantage PPO customer, you’re not required to select a primary care physician (PCP), but we do encourage it.

Your PCP serves as your personal guide through your health journey. They know your medical history and monitor all your tests, prescriptions and preventive care needs – and can coordinate care with other providers or specialists, if needed.

Help is always here.

If you have any questions, customer service is here to help. We go above and beyond to make sure you have everything you need to understand and get the most from your plan.

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.
Our automated phone system may answer your call during weekends, holidays and after hours. Customer service also has free language interpreter services available for non-English speakers.

CignaMedicare.com/group/MAresources

You can also visit us online to find a provider or pharmacy, view your drug list, access plan information, and more.
Specialty care

If you choose a PCP, they can help you find a specialist or hospital when you need one, and can work with them to keep you healthier.

Whether or not you choose a PCP, your plan offers you the freedom to see any doctor or hospital that accepts Medicare and the Cigna Healthcare Medicare Advantage PPO plan, with no referrals required.

Telehealth (Virtual care)

Telehealth (also known as telemedicine or virtual care) allows you to connect with a provider, from the comfort of your home or when you’re on the go, by phone or video. Your doctor may offer telehealth visits as a care option. Check with them to see if you can receive their services through a telehealth visit. Cigna Healthcare also offers the 24-hour convenience of virtual care with MDLIVE. If your doctor’s office is closed, you can talk anytime with an MDLIVE telehealth provider using your phone, computer or tablet.

Behavioral health services

Cigna Healthcare recognizes that emotional health is an essential part of our customers’ overall health care. This is why we provide key behavioral health services as part of our commitment to whole person health. With your Cigna Healthcare Medicare Advantage plan, you’ll have access to help for a range of concerns, such as depression, loss and grief, mood disorders, and addictive behavior.

Support for chronic conditions

Cigna Healthcare customers with certain health needs may qualify for one of our chronic and complex care support programs. Customers who qualify get the added benefit of a dedicated care manager who helps coordinate care, review medication and therapies, provide dietary support, and find community resources and education. Chronic condition support is designed to help customers with conditions such as kidney disease, COPD, depression and diabetes. Complex care support is designed to help customers with multiple chronic conditions.

To speak with a Care Manager, call 1-866-382-0518 (TTY 711), Monday – Friday, 8 a.m. – 5 p.m.
How your medical coverage works.

With the Cigna True Choice Medicare Advantage PPO plan, 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 Healthcare, even if they are not contracted with Cigna Healthcare as an in-network Medicare Advantage provider. Unlike many other PPO plans, with this plan you pay the same cost-share to see an in-network provider or out-of-network provider.

Using an in-network provider

• An in-network provider is a doctor or other health care professional who has a contract with Cigna Healthcare to see Medicare-eligible patients.

• When you see an in-network provider, you pay your copay or coinsurance according to your plan benefits and your health care provider bills Cigna Healthcare for the rest of the cost of your service(s). The in-network provider is paid according to their contract with Cigna Healthcare.

• All in-network Cigna Healthcare Medicare Advantage PPO providers participate in Medicare and already accept the Cigna Healthcare plan as part of their contract with us.

• In-network providers must continue to see you if you are an existing patient. An in-network provider may choose not to see you if you are not an existing patient and they are not accepting new Medicare patients at that time.

Using an out-of-network provider

• An out-of-network provider is a doctor or other health care professional who does not currently have a contract with Cigna Healthcare to see Medicare-eligible patients.

• You can see any out-of-network provider who participates in Medicare and accepts the plan. Accepting the plan means the doctor is willing to treat you and bill Cigna Healthcare.

• When you see an out-of-network provider, you pay your plan’s copay or coinsurance. Cigna Healthcare will pay for the rest of the cost of your covered service(s), including any excess charges, up to the limit set by Medicare.

• In some cases, an out-of-network provider may refuse to directly bill Cigna Healthcare and ask that you pay the full allowable amount set by Medicare. If that happens, you can pay the doctor and then submit your claim to Cigna Healthcare for reimbursement. Cigna Healthcare will reimburse you for the cost of your covered service(s), including any excess charges, up to the limit set by Medicare, less your copay or coinsurance.

• In the event your doctor says they will not accept the plan, call customer service and let us know. Cigna Healthcare will reach out to the doctor on your behalf to explain how the plan works. In most cases, this will resolve the issue.
Wellness and incentives.

Preventive services
As part of your Cigna Healthcare coverage, you'll have access to a wide range of preventive benefits. These services include yearly health check-ups, colorectal screenings, mammograms and others. Prevention and early detection can help lower your chance of serious illness, avoid hospitalization and manage your medical symptoms. Paying close attention and having preventive screenings can help save you time and money in the long run.

To help you stay current with your recommended screenings, we will send you reminders throughout the year.

Earn incentives for completing healthy activities
With the Cigna Medicare Advantage Incentives program, you can earn up to $200 for completing healthy activities. After completing your yearly health check-up, you can qualify for additional incentives as determined by your plan and provider. For each additional activity you complete, you can earn additional reward dollars loaded on your Cigna Healthy Today card. Earn incentives for activities including recommended screenings, using online resources, staying active, and more.

Your Cigna Healthcare Medicare Advantage Plan includes a Cigna Healthy Today benefit card. Your incentive reward dollars for completing healthy activities will automatically be posted to your card and can be used to purchase goods and services.
Prescription drug benefits.

Part D prescription drugs

Our Medicare Part D prescription drug benefit provides added convenience and affordability. This benefit includes:

- Low, predictable costs for most drugs so you can help keep your expenses down.
- Customer service you can count on to answer your medication questions and work with you and your doctor to find lower-cost alternatives to brand-name drugs.
- A choice of more than 62,000 network pharmacies nationwide.
  - Local independent pharmacies.
  - National chains such as CVS, Walmart, Walgreens and Rite Aid.
  - Home delivery pharmacies, including Express Scripts Pharmacy.
  - Specialty pharmacies including Accredo Pharmacy.

Home delivery pharmacy

Taking your prescription medications is critical to your health. Home delivery pharmacy is an easy and reliable way to get them – on time, every time – so you’re less likely to run out.

- Free and quick delivery of your prescriptions.
- Refill reminders to help make sure you always have your medications on hand.
- Confidential, tamper-resistant packaging.

Express Scripts Pharmacy

You can enjoy time- and cost-saving benefits with prescription home delivery through Express Scripts Pharmacy. And if you have questions about your prescription, you can speak with a pharmacist anytime, day or night.

Express Scripts Pharmacy is the third largest pharmacy in the U.S., serving seven million Americans.

Diabetes testing supplies

You can get a Cigna Healthcare-preferred blood glucose meter and a supply of test strips from one of our preferred suppliers at no additional cost. Certain medical supplies directly associated with the delivery of insulin, such as syringes and needles, may be covered by your medical or prescription benefits.
Extra benefits.

Stay fit with Silver&Fit

Get healthier with our fitness benefit provided by the Silver&Fit Healthy Aging and Exercise program. Enjoy one, some or all of the following at no cost to you:

- National network of more than 18,000 fitness centers
- Change fitness centers at any time
- Digital workout resources including daily online video classes plus a library of 1,500+ on-demand workout videos
- Home-based fitness kit options including wearable fitness tracker, yoga, and strength kits
- One-on-one healthy aging coaching and resources

Home delivered meals

We’ll take care of the cooking when you’re not well enough to do it yourself. Get meals delivered right to your front door after a hospital or skilled nursing facility stay so you can focus on feeling better. This benefit provides 14 nutritious meals delivered to your home following a qualified discharge at no cost to you, up to three times per year.

Home life resources

Quick and convenient access to trusted local resources for assistance with everyday needs. Topics include aging, fraud and theft, healthy eating, home repair and improvements, pet care, and more. Resources and referral services are available online or over the phone.

Caregiver support

Your plan includes a caregiver support benefit for you or your caregiver to help manage times of crisis as well as everyday challenges. This includes one-on-one coaching and personalized resources, including care team coordination and stress management, to ensure you and your family have the knowledge, recommendations and support you need.

Discounts on products and programs

Through Healthy Rewards, you have access to a range of health and wellness programs and services. To access Healthy Rewards, register or log in to myCigna.com, or refer to your Customer Handbook to locate your dedicated Healthy Rewards phone number. Available discounts include vision exams and eyewear, hearing aids and exams, alternative medicine and therapies, and more.
Information and support.

Online resources help you make the most of your plan

Before you enroll, visit CignaMedicare.com/group/MAresources to find a provider or pharmacy, view your drug list, access plan information, and more.

After you're enrolled, myCigna.com and the myCigna® app give you online access to your personal health plan information. You can:

• View your Cigna Healthcare Medicare Advantage benefits.
• Manage your profile and preferences.
• View your drug list.
• Find a doctor, including telehealth.
• Find a network pharmacy.
• Review claim history and Explanation of Benefits (EOB) details.
• Manage your prescriptions.
• Price a medication.
• Access your Healthy Rewards discount programs.
• View and print your ID card.
• Complete your incentive program registration.

24-Hour Health Information Line

Health and medical information is just a phone call away for Cigna Healthcare Medicare Advantage customers. Nurse Advocates are available by phone 24 hours a day, seven days a week to answer your questions in a confidential and convenient service. Our Nurse Advocates can provide health education and answers to general medical questions to help you get the right information at the right time, to make better health decisions and to achieve better health outcomes.

Our Health Information Line can:

• Help you determine if you should seek care for your health concern.
• Provide instruction on self-help and home care.
• Provide introduction to, and support for, online health tools.
• Refer you to health care partners, such as care management and health coaching programs.

Extra Help

You may be able to get Extra Help to pay for your prescription drug premiums and costs. To see if you qualify, call:

• 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048, 24 hours a day, 7 days a week.
• The Social Security Administration at 1-800-772-1213 between 8 a.m. and 7 p.m., Monday through Friday for a representative. Automated messages are available 24 hours a day. TTY users should call 1-800-325-0778.
• Your state Medicaid office.
Eligibility and enrollment.

Eligibility requirements

- You must be enrolled in both Medicare Part A and Medicare Part B.
- You must be a permanent resident of the Cigna Healthcare True Choice Medicare (PPO) service area.
- The Cigna Healthcare True Choice Medicare (PPO) service area includes all 50 states, the District of Columbia, Puerto Rico and the U.S. Virgin Islands.
- You can only be in one Medicare plan at a time. If you are enrolled in another Medicare plan and you choose the Cigna Healthcare True Choice Medicare (PPO) plan, Medicare will automatically cancel your existing Medicare plan.

Income-related monthly adjustment amount (IRMAA)

Some people may have to pay an extra dollar amount to the Social Security Administration because of their yearly income. If your income is above $97,000 for an individual or married individuals filing separately, or above $194,000 for married couples, you must pay an extra amount for your Medicare coverage.

If you are impacted, the Social Security Administration will send you a letter telling you what the amount will be and how to pay it. You will need to pay this amount to the Social Security Administration office and not your plan.

After you enroll

You will receive a Welcome Kit with important plan documents, including:

- **Evidence of Coverage (EOC) and EOC Snapshot** – A detailed description of your benefits and costs for the upcoming year.
- **Customer Handbook** – A booklet that explains how to use your benefits.
- **Benefit Guide** – Additional information to help you access added benefits and discounts.
- **Legal Booklet** – Information that explains how we protect your privacy.

You will receive a Cigna Healthcare Medicare Advantage ID card in a separate mailing. You must show your Cigna Healthcare ID card when receiving covered services.

You will also receive a Cigna Healthy Today card in a separate mailing.

In addition to these mailings, we offer a Welcome Call and Welcome Emails to answer any questions you may have and review key benefits, features, and resources, to help you make the most of your new plan.

Throughout the year, you will receive ongoing communications, including health and wellness mailings and care reminders. You will also receive letters when there are changes to your eligibility status and at other times, as required by Medicare regulations.

2. Nurse Advocates hold current nursing licensure in a minimum of one state, but are not practicing nursing or providing medical advice in any capacity as a health advocate.

3. Accredo is Evernorth Health Services’ specialty pharmacy. Express Scripts Pharmacy is Evernorth Health Services’ home delivery pharmacy. Evernorth Health Services is a division of The Cigna Group.

4. Call customer service to learn more about which home delivery options are available to you.

5. Standard shipping – extra costs apply for rush delivery.

6. Call customer service or visit myCigna.com to sign up for refill reminders.

7. The Silver&Fit program is provided by American Specialty Health Fitness, Inc. (ASH Fitness), a subsidiary of American Specialty Health Incorporated (ASH).

8. Healthy Rewards is a discount program. Some Healthy Rewards programs are not available in all states and programs may be discontinued at any time. If your health plan includes coverage for any of these services, this program is in addition to, not instead of, your plan benefits. Healthy Rewards programs are separate from your plan benefits. A discount program is NOT insurance, and you must pay the entire discounted charge. All goods, services and discounts offered through Healthy Rewards are provided by third parties who are solely responsible for their products, services and discounts. All savings amounts and provider counts are based on Cigna Healthcare data as of the date of publication and are subject to change. Actual savings may vary.


The disclaimers on this page apply to the benefits outlined throughout this document.

This information is not a complete description of benefits. Call 1-888-281-7867/TTY 711 for more information. The formulary, pharmacy network and/or provider network may change at any time. You will receive notice when necessary.

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.

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