

Statement from Michael Gurdon, President, and the RFAO Executive Board Concerning the Current Cigna Medicare Advantage Plan

A significant number of our retired colleagues have reported confronting denial of coverage or billing problems in the first few weeks of our Cigna Medicare Advantage Plan. At least a portion of this seems to involve some Cigna representatives not understanding our customized UVM plan and thus arriving at erroneous determinations. The RFAO Executive Board has no way of knowing how widespread these problems may be, but the Board did feel that it was important to compile a summary of information which should be helpful to all members as we navigate the switch to this new health insurance.

- 1) When you call 1-888-281-7867 (the number on your Cigna card):
 - a) Be sure to ask to speak with someone who works with *Medicare Group plans*.
 - b) Try to ensure that you and the rep are talking about the same *Cigna True Choice Medicare (PPO)* for the University of Vermont **H7787-801-UVPPJ** plan. (This number is also on your card.) Many times, the rep is looking at a different plan that is not ours.
- 2) Become familiar with the plan*, paying special attention to the fact that many services included in our benefits package are fully covered (requiring no co-payment, coinsurance, or deductible).
- 3) Note that while we have some \$10 copays, a \$100 deductible **only** applies to the following:
 - Durable Medical Equipment and related supplies
 - Ambulance services
 - Prosthetic Device and related supplies
- 4) Be aware that Cigna reps are making mistakes. If you think the information you or your provider has received is incorrect, contact *our Cigna liaison, Chanela Coleman (571-401-5392; Chanela.Coleman@cigna.com)* for clarification, and report the specifics of any Cigna helpline errors to UVM's *HR Benefits Manager, Caitlyn.Sisler @uvm.edu*, who will convey contract misinformation to Cigna leadership.
- 5) Our Cigna Advantage plan gives us the option of seeing out-of-network providers as long as they participate in Medicare. Such out-of-network providers can bill Cigna directly.
- 6) Before seeing an out-of-network provider
 - a) Check that they are willing to bill Cigna directly before incurring any costs. If they are not willing to do so, call 1-888-281-7867 (the number on your Cigna card) and ask to speak with someone who works with Medicare Group plans. Explain the situation and Cigna will reach out to the provider on your behalf and work to resolve the issue.
 - b) If that doesn't resolve the issue, you can ask the provider to bill you directly. Be sure to confirm that you will NOT be billed for more than the full amount allowed by Medicare. After you pay the bill you can submit a claim to Cigna and Cigna will reimburse you for the full amount allowed by Medicare, less any copays or co-insurance specified in our plan.
- 7) If desired, use the **RFAO-Forum listserv** to share your experiences and raise collective knowledge. (Details as to how to join the listserv are shown on the main [RFAO website](#).)

*Plan coverage can be found in the non-glossy booklet *Evidence of Coverage Snapshot* that you received in the mail or on the **UVM Human Resources** website under [Retirement Resources](#). Scroll down to **Benefits** and **65+ Medical Plan**.