

# WE'RE ON YOUR TEAM.

## Welcome to Cigna Health Matters® Care Management

If you or a loved one are faced with a medical condition, it's understandable to feel overwhelmed. The good news is you're not alone. Your care manager is your personal nurse advocate<sup>1</sup> and is ready to support you at every step of your journey toward better health. They can help you understand your health plan benefits, so that you can access services – quickly, easily and seamlessly.

### What is Care Management?

Care Management is a collaborative process of helping to find the right services to meet your family's comprehensive health needs. Cigna's nurse advocates help manage your care by bringing together the right resources and people to meet your needs. We have social workers, pharmacists and behavioral professionals who are ready to help. These services are available at no additional cost to you and are completely confidential.

### When would I be contacted, and why?

There are different instances when you might be contacted by a nurse advocate. For example, if you are admitted to the hospital, our personal nurse advocates may reach out to ensure you have what you need for recovery.

- › Do you understand your out-of-pocket costs and prescription drug coverage?
- › Do you know what signs and symptoms to report to your provider?
- › Do you have a planned follow-up appointment with your provider?
- › Do you need help with supplies or treatments once you are discharged from the hospital?



**95%** customer satisfaction with the Care Management experience.<sup>2</sup>

### Making connections that help support your health and well-being.



**Together, all the way.®**



## What can you expect?

If you are facing a health concern, one of our nurse advocates may reach out to offer guidance, coordination and support. You can also reach out to us at any time. Your nurse advocate can't provide medical advice, but will work with your health care providers.

### Guidance

- Helping you understand your coverage and out-of-pocket costs.
- Guiding you to resources that go beyond medical treatment, such as support for chronic conditions.
- Helping you take advantage of **myCigna.com**, where you can access a variety of health and wellness tools and resources.

### Coordination

- Partnering with your health care providers to help you manage your overall care plan.
- Coordinating referrals, home care, durable medical equipment (DME), caregiver respite services and more.
- Identifying resources, such as transportation to appointments or financial assistance programs.

### Support

- Helping you understand your condition, treatment options and medications.
- Providing the support you need for your physical, emotional and financial well-being.
- Answering your questions and addressing your concerns.



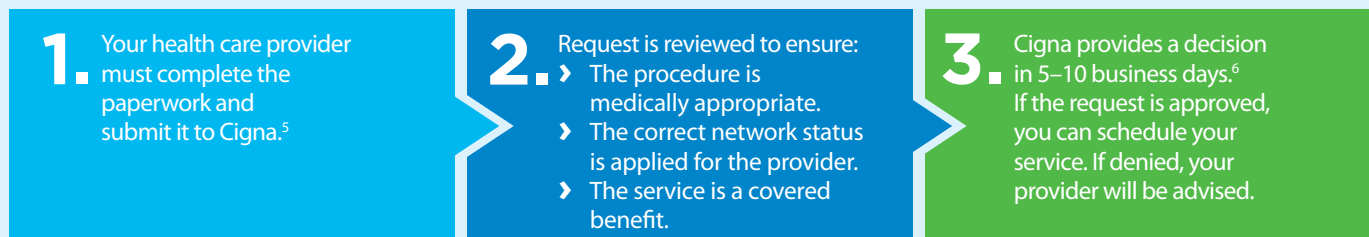
### What is the value for me?

- **Peace of mind**, knowing a team of professionals is ready to assist you day or night with any concerns.
- **Cost savings** – You may save an average of \$350 in out-of-pocket medical costs.<sup>3</sup>

## We'll answer your questions about prior authorization.

Prior authorization means getting approval before getting care. Your health care provider is responsible for the prior authorization process, unless you decide to use an out-of-network provider, then you assume responsibility. All inpatient hospital admissions require prior authorization. Outpatient services, such as high tech imaging (e.g., computed tomography [CT], magnetic resonance imaging [MRI] or positron emission tomography [PET] scans), musculoskeletal/pain management (e.g., spinal and epidural injections), medical oncology, private duty nursing and others<sup>4</sup> will require approval.

### The approval process works like this.



## Answer the call from Cigna and speak with a nurse advocate.

1. Nurse advocates hold current nursing licensure in a minimum of one state but are not practicing nursing or providing medical advice in this role.

2. 2017 National Care Management Satisfaction Survey Results. Individual results may vary.

3. Cigna Analytics Health Matters vs. Personal Health Solutions (PHS) Care Management Program Evaluation, 2018; results derived from nationwide HCMC book of business using match case control study comparing engaged and not-engaged population. Individual customer results will vary.

4. List is not all inclusive.

5. In certain cases, your provider will give this information to an ancillary company we work with that helps manage these requests.

6. This time period may be shortened according to applicable state law.

Product availability may vary by location and plan type and is subject to change. All group health insurance policies and health benefit plans contain exclusions and limitations. For costs and details of coverage, see your plan materials.

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# THE RIGHT CARE.

# AT THE RIGHT TIME.

# IN THE RIGHT PLACE.

## Cigna care management for inpatient and outpatient services.

Cigna care management helps you access the right care, at the right time, in the right setting. With precertification, you find out in advance if a service is covered, which can help you lower costs and avoid unnecessary procedures. Our case managers have nursing experience and support you as you recover after a hospital stay or outpatient procedure to help you get back to better health.

### What does care management mean for you?

**1. Ease.** When you or a covered family member visit a doctor or facility in your plan's Cigna network:

- › Your doctor arranges all the care.
- › Your doctor gets precertification when it's needed.

If you visit an out-of-network doctor or facility, you're responsible for getting precertification.

**2. Savings.** We review inpatient and certain outpatient services and look for ways to save you money. We may:

- › Provide a list of quality, cost-effective facilities in your plan's network.
- › Help provider transition inpatient care to outpatient treatment, if appropriate.
- › Help identify avoidable treatments or procedures.

**3. Quality of care.** You'll have access to case managers who can help you find the support you need to get better. This includes:

- › Home health care.
- › Therapies.
- › Special medical needs to help you avoid complications after a hospital stay or outpatient procedure.

And, our service quality is proven. **Our customers report a more than 95% overall satisfaction rating with their case management experience.\***

### What is precertification?

With precertification, you know in advance whether a procedure, treatment or service will be covered under your health care plan. It helps make sure that you get the right care in the right setting. It may save you from costly and unnecessary services.

### Who is responsible for getting the precertification?

- › **In-network services:** Your doctor is responsible.
- › **Out-of-network services:** You're responsible. Before you choose an out-of-network provider, make sure your plan covers out-of-network services.

To request precertification, call the toll-free number on your Cigna ID card. When you call, make sure you have:

- › The name of the doctor or facility.
- › The procedure code(s).
- › The date of service.

Remember, with out-of-network providers your out-of-pocket costs will be higher. Also, your coverage may be reduced or denied if you don't get precertification.

**Together, all the way.®**



## What services need to be precertified?

Your doctor will help you decide which procedures require a hospital stay and which can be handled on an outpatient basis. Inpatient services require you to stay overnight in a hospital or related facility. Outpatient services don't require an overnight stay. Here are some examples of services requiring precertification.\*\*

INPATIENT SERVICES	OUTPATIENT SERVICES
<p>All inpatient admissions and non-obstetric observation stays such as:</p> <ul style="list-style-type: none"><li>– Acute hospitals – skilled nursing facilities – rehabilitation facilities – long-term acute care facilities – hospice care – transfers between inpatient facilities</li><li>– Experimental and investigational procedures</li><li>– Cosmetic procedures</li><li>– Maternity stays longer than 48 hours (vaginal delivery) or 96 hours (cesarean section)</li><li>– Inpatient mental health/substance use disorder in an acute or residential facility (it's the facility's responsibility to obtain precertification)</li></ul>	<ul style="list-style-type: none"><li>– Certain outpatient surgical procedures</li><li>– High-tech radiology (MRI, CAT scans, PET scans, nuclear cardiology)</li><li>– Injectible drugs (other than self-injectibles)</li><li>– Durable medical equipment (insulin pumps, specialty wheelchairs, etc.)</li><li>– Home health care/home infusion therapy</li><li>– Dialysis (to direct to a participating facility)</li><li>– External prosthetic appliances</li><li>– Speech therapy</li><li>– Cosmetic or reconstructive procedures</li><li>– Infertility treatment</li><li>– Sleep management</li><li>– Transplants</li><li>– Radiation therapy</li><li>– Musculoskeletal services (major joint surgery and pain management services)</li><li>– Mental health/substance use disorder intensive outpatient programs</li><li>– Mental health/substance use disorder partial hospitalization programs</li><li>– Applied Behavioral Analysis</li><li>– Transcranial Magnetic Stimulation</li></ul> <p>Other:</p> <ul style="list-style-type: none"><li>– Unlisted outpatient procedures</li><li>– Experimental and investigational procedures</li></ul>

## Services not requiring precertification

Routine outpatient behavioral health services do not require precertification through Cigna Behavioral Health.

Outpatient services not requiring precertification:

- › Individual therapy
- › Group therapy
- › Family therapy
- › In-home therapy
- › Crisis visits
- › Diagnostic interviews
- › Outpatient electroconvulsive therapy
- › Psychological testing
- › Methadone treatment
- › Buprenorphine treatment

## What other services are available to me?

Sometimes you or a covered family member may need care beyond a traditional hospital stay. Our experienced case managers can help. They work closely with you and your doctor to:

- › Help you sort out your options.
- › Arrange care.
- › Access community resources and programs.

Whether you need home care, help understanding your medications or finding additional services, your case manager helps you find the care you need to help you get better.

## Using the Cigna network saves time and money

Choosing providers in your plan's Cigna network can help you reduce your out-of-pocket costs. And you won't have to arrange care or file claims. Your in-network doctor will take care of that for you.

To find an in-network doctor, use the provider directory on **myCigna.com**. There, you'll find complete physician profiles, including education, languages spoken and hospital affiliations. And, you can use online tools to find cost estimates for common procedures. We want to help you save money. And make the best choice for your needs.



### What if I have questions about my coverage?

Visit **myCigna.com** or call the toll-free number on your Cigna ID card.

\* 2016 Cigna case management customer satisfaction survey.

\*\* This list does not include all services requiring precertification.

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# SAY HELLO TO YOUR PERSONAL NURSE ADVOCATE.

**Support at no additional cost.**

If you're like many people, you may avoid unfamiliar or unexpected phone calls. The good news is: We're here to help. Let's start by answering a few questions.

## **Q Why is Cigna calling me?**

**A** Your Cigna case manager is your personal Nurse Advocate\* and is calling you to offer support and guidance. Facing a complex medical condition can be overwhelming. Our goal is to help you feel confident at every step of your journey toward better health.

## **Q What can a Cigna personal Nurse Advocate\* do for me?**

**A** Your personal Nurse Advocate\* works with you to help coordinate care and help identify resources and services that may be available to you, such as transportation to appointments and cost-saving opportunities.

## **Q Are my health care providers involved?**

**A** Yes, your personal Nurse Advocate\* can connect directly with your health care providers and your health plan. Working together, your team helps you get the care you need quickly and seamlessly.

## **Q What makes my personal Nurse Advocate\* different?**

**A** The relationship you form with your personal Nurse Advocate\* will be built on trust and understanding. You'll gain peace of mind knowing who to turn to for personal support and expert guidance.



**HELP IS HERE**



**If you get a call from your personal Nurse Advocate,\*  
please take a moment to say hello. It's important.**

**Together, all the way.®**



\*These 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.

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