

For Health Care Professionals Participating in the Cigna and GWH-Cigna Networks

Contents

POLICY UPDATES

Precertification changes	2
High-technology and nuclear cardiac services	
precertification reminder	2
ELECTRONIC TOOLS	
Submit claims electronically	3
ICD-10 compliance — October 1, 2014 is quickly approaching	3
Cigna participating with CAQH for new EFT enrollment tool	4
Network News is going all digital in July	4
GENERAL NEWS	
Single appeal reviews	5

Clinical, reimbursement, and administrative policy updates

PHARMACY NEWS

what you need to know

Go green - go electronic

Childhood immunization reminder program

Clgna promotes colorectal cancer screening

Medical injectable coverage "carve out" -

Market Medical Executive contact information

Medication prior authorization flow available offline	IL
HELPFUL REMINDERS	
Cultural competency training and resources	11
Tell us what's changed	11
Reference Guides	11
Urgent care for non-emergencies	11
Letters to the editor	11
Use the network	12
Access the archives	12

Coming soon: ePrescribing for Cigna Home Delivery Pharmacy

9

12

Expanding the map – Cigna's collaborative accountable care program reaches a milestone

As the health care industry tests new approaches to improve health care delivery, one of the most talked about concepts is the accountable care organization, or ACO. At Cigna, we refer to these initiatives as collaborative accountable care (CAC).

Launched in 2008, CAC initiatives are designed to help deliver the right care at the right time in the right place, and reward health care professionals for achieving the "triple aim" – improving quality (clinical outcomes), affordability (lower medical costs) and patient satisfaction. We go beyond the traditional payer role, and actively collaborate with medical groups to assist them in achieving these goals by providing them with relevant information and access to additional care coordination support resources for their patients.

"These physician groups are committed to putting the patient at the center of their practices, with expanded access to care, better coordination of care, more patient education about chronic conditions and wellness, access to clinical programs for health improvement, and smart use of technology that can improve the patient experience," according to Alan M. Muney, MD, Cigna's Chief Medical Officer.

"Our collaborative accountable care initiatives continue to show improvements in quality and cost, to the benefit of our clients

and customers, so we remain committed to our goal of 100 programs reaching one million individuals by the end of 2014."

As of January 16, 2013, Cigna has more than 50 CAC initiatives in 22 states covering nearly 510,000 customers.

In places where it's been introduced, CAC is helping to improve the health of Cigna customers while holding the line on medical costs. The programs can help to close gaps in care, such as missed health screenings or prescriptions refills. There has also been a decrease in unnecessary use of hospital emergency rooms, increase in the number of preventive health visits, and improvement in follow-up care for people transitioning from the hospital to home.

For more information:

- Read a recent study published in the November issue of the leading policy journal, Health Affairs, about Cigna's CAC model achieving favorable quality of care and total medical cost trends.
 http://content.healthaffairs.org/content/31/11/2379.full.pdf+html?ijkey=UtkLYqlR61on.&keytype=ref&siteid=healthaff
- Access the most current information on our CACs at Cigna.com > About Cigna > Newsroom > Knowledge Center > Accountable Care Organizations (ACOs) or newsroom.Cigna.com/ KnowledgeCenter/ACO





Clinical, reimbursement, and administrative policy updates

In an effort to support access to quality, cost-effective care for your patients with a Cigna-insured or administered medical plan, we routinely review clinical, reimbursement, and administrative policies, as well as coverage positions and our precertification requirements. As a reminder, reimbursement and modifier policies apply to all claims, including those for your patients with GWH-Cigna ID cards. However, please continue to follow separate claim submission procedures for these patients.

The following table lists planned updates to our coverage policies. Information about these changes, including an outline of the specific updates, is available on the Cigna for Health Care Professionals website (CignaforHCP.com > **Resources > Clinical Reimbursement Policies > Coverage** Policy Updates) at least 30 days prior to the effective date of the updated policy. On this page, you may also view new and updated policies in their entirety.

If you are not registered for CignaforHCP.com, please register so you may log in and access these policies. Go to CignaforHCP.com and click "Register Now," located near the center of the screen. If you do not have Internet access, please call Cigna Customer Service at 1.800.88Cigna (882.4462).

Planned medical policy updates

Policy name	Update effective date
Lower Limb Devices	May 20, 2013
Continuous Passive Motion Devices	May 20, 2013
Stretch Devices	May 20, 2013
Electrical Stimulators	May 20, 2013
Spinal Ultrasound	May 20, 2013
Malignant Melanoma	May 20, 2013
Genetic Testing of Heritable Disorders	May 20, 2013
Pharmacogenetic Testing	May 20, 2013
Preimplantation Genetic Diagnosis	May 20, 2013

Please note that these planned updates are subject to change. For the most up-to-date information, please visit CignaforHCP.com.

Precertification changes

On April 1, 2013, the American Medical Association (AMA) and Centers for Medicare & Medicaid Services (CMS) released new CPT® and HCPCS codes. Codes released as part of these updates will be reflected on our precertification list in April.

To view a list of monthly precertification updates, please log in to CignaforHCP.com and click on "Precertification Policies" under Popular Links. Once there, you can review the "Notification of Changes to Precertification List" section, which includes the updates. For a complete list of services that require precertification of coverage, review the "Master Precertification Policy" document on the same page.

If you are not currently registered for access to the website, you will need to register to log in. Go to CignaforHCP.com and click on "Register Now," located near the center of the screen.

High-technology and nuclear cardiac services precertification reminder

As a reminder, referring physicians must contact MedSolutions, Inc. (MSI) to precertify all high-technology radiology services, including CT, MR, and PET scans, as well as nuclear cardiac and other outpatient services. To view a list of the CPT® codes that require precertification, please visit our dedicated MedSolutions website at www.medsolutions.com/implementation/Cigna, and click on "CPT Codes Requiring Precertification." If you do not have Internet access or would like to request a printed version of this full list, please call us at 1.800.575.4517.

About MSI

MSI currently manages high-technology radiology and nuclear cardiology services for millions of individuals with Cignaadministered coverage across the country. In addition to nuclear cardiology services, MSI performs utilization management review for high-technology radiology services (CT, MR, and PET scans) that require precertification.

ELECTRONIC TOOLS



Submit claims electronically

Electronic claim submission can help you reduce paperwork, and eliminate printing and mailing expenses. Use these Cigna payer IDs when submitting electronic claims:

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

Both primary and secondary coordination of benefits claims can be submitted to Cigna electronically.

You don't have to submit Medicare Part A and B coordination of benefits agreement (COBA) claims to Cigna. The Medicare explanation of benefits or electronic remittance advice will show that those claims are forwarded to Cigna as the secondary payer.

ICD-10 compliance

October 1, 2014 is quickly approaching

On October 1, 2014, the U.S. Department of Health & Human Services will require all health plans, hospitals, physicians, and other health care professionals, as well as vendors and trading partners, to be compliant with the Tenth Edition of the International Classification of Diseases (ICD-10) diagnosis and inpatient procedure codes. ICD-9 codes will be replaced with a larger variety of more detailed ICD-10 codes, which will be required for all health care services provided on or after October 1, 2014.



Tips to get prepared

We recommend that your organization have a solid plan in place to meet the deadline. You may find the following tips helpful as you prepare for the transition:

- Identify where your health care services staff currently use
- Review your systems and standard documents for ICD-9 codes, including medical records, practice management systems, billing systems, authorizations, and encounter forms.
- Verify that the clearinghouse and vendors you use are 5010-compliant.
- Arrange a single point of contact to handle all tasks related to your transition to ICD-10; this may require you to work with your clearinghouse or vendor to run test claims.
- · Work with your third-party billing entities to determine what testing should be done.

You can also visit these industry resources for help with preparation:

- Centers for Medicare & Medicaid Services (CMS.gov > Medicare > Coding > ICD-10)
- Workgroup for Electronic Data Interchange at WEDI.org

How Cigna is preparing

We have taken a number of steps to help ensure our vendors and systems are ICD-10 compliant:

- Extensive claim, precertification, and authorization preparation was completed over the course of 2012 to ensure our systems can accept ICD-10 codes.
- Internal testing of all systems affected by the transition to ICD-10 began in 2012.
- Testing of all ICD-10-related data received from and returned to our vendor partners will begin in 2013, and continue through 2014.
- Training for all Cigna employees about the transition to ICD-10 was held in 2012, and will continue through 2014.
- · Clinical staff training about the transition to ICD-10 will occur in 2014, closer to the compliance date.

Additional information about our progress, including Frequently Asked Questions, is available on the Cigna for Health Care Professionals website (CignaforHCP.com > Resources > Medical Resources > Communications > HIPAA 5010/ICD-10 Updates).



Cigna participating with CAQH for new EFT enrollment tool

Cigna is pleased to be a health plan option in a new electronic funds transfer (EFT) enrollment tool offered by the Council for Affordable Quality Healthcare (CAQH). The tool is available for you to use at no cost, and enables you to enroll in EFT with multiple health plans, including Cigna. This comes at an important time, as automating and streamlining administrative processes is essential to help reduce costs and increase efficiency.

The CAQH EFT enrollment tool offers a single, centralized, secure destination for you to enroll to receive electronic payments from Cigna and other participating payers, eliminating the completion of numerous forms, and saving administrative time and costs. Additionally, if you update your electronic payment information, the changes are shared automatically with your selected payers.

Enroll in EFT through CAQH today

Visit https://solutions.caqh.org to enroll in EFT with Cigna* and the other participating health plans.

If you choose not to use CAQH EFT enrollment, you can still enroll in EFT with Cigna by logging in to CignaforHCP.com > Working with Cigna > Enroll in Electronic Funds Transfer (EFT) Options.

CAQH is a non-profit alliance of health plans and trade associations, working to simplify health care administration through industry collaboration on public-private initiatives.

*Cigna EFT will not be available for GWH-Cigna network, Cigna International, or Arizona Medicare Advantage plans until fourth quarter of 2013.

Network News is going all digital in July

Based on your feedback, *Network News* will become an *all-digital* publication beginning with the July issue. You will be able to quickly and easily share and save articles of interest, without the hassle of paper copies. You will still have the option to print out a PDF of the newsletter. You will also be able to easily print individual articles or the entire newsletter without any photos or graphics, saving you paper and toner. We've added these new features in response to your feedback.

Sign up today to receive Network News by email

Join the majority of health care professionals who already enjoy the benefits of receiving *Network News* electronically. It's easy to sign up. If you're registered to use the Cigna for Health Care Professionals website, log in to CignaforHCP.com > My Profile. Then, review your email address to ensure it is correct, and you will automatically receive Network News by email. If your email is incorrect, you may correct it there. You may also sign up by emailing us at NetworkNewsEditor@Cigna.com or faxing us at 1.646.467.5697. Please include this information in your email or fax:

- Cigna Provider ID or Taxpayer Identification Number (TIN)
- Email address (can be multiple addresses per Provider ID or TIN)
- Name and job title for each email address provided
- Practice type (physician, hospital, or ancillary)
- Primary address, city, state, and ZIP code

Anyone from your office may receive Network News by email.



Even if you don't provide an email address, you can always download and print the latest version of *Network News* on our website.

Network News is posted at the beginning of each quarter (January, April, July, and October) at Cigna.com > Health Care Professionals > Newsletters. If you prefer to receive Network News each quarter in the mail, please use the same email and fax contact instructions to let us know.

If you have questions, please email us at NetworkNewsEditor@Cigna.com.



Single appeal reviews

Historically, for certain business units and types of appeals, we have offered second-level appeals to health care professionals who were not satisfied with the resolution of a first-level review. Please be aware that beginning July 1, 2013, we will no longer offer second-level appeals. All appeals will follow a thorough single appeal review process and will be completed within 60 days. This change establishes a consistent approach for health care professionals across Cigna's network.

As a reminder, all appeals should be initiated in writing within 180 calendar days of the date of the initial payment or denial decision. If the appeal relates to a payment that we adjusted, the appeal should be initiated within 180 calendar days of the date of the last payment adjustment.

Health care professionals should submit all appeal requests on a "Request for Provider Payment Review Form," which can also be found on the Cigna for Health Care Professionals website at (CignaforHCP.com > Resources > Forms Center > Medical Forms). This form will help us understand the circumstances around your appeal request in order to conduct that thorough review.

For additional information on how to submit an appeal, please review the Claim Adjustment & Appeals Guidelines on the Cigna for Health Care Professionals website (CignaforHCP.com > Resources > Clinical Reimbursement Policies and Payment Policies > Claims Appeals Policies and Procedures > Appeal Policy and Procedures).

Childhood immunization reminder program

Cigna has developed an innovative program to help promote the pneumococcal vaccine, where appropriate. It focuses on improving childhood immunization rates among infants between the ages of eight months and 17 months old.

Goals of the program are to:

- Increase the number of recommended immunizations received by this age group
- Encourage parents to partner with their health care professionals
- Ensure parents are aware of the recommended vaccinations

How it works

We send a postcard to the parents, informing them that their child may have missed this recommended immunization, and encouraging them to follow-up with their child's physician. We also place a follow-up telephone call to parents to help ensure they receive this information.

Billing codes for pneumococcal vaccine

We are able to measure the effectiveness of this outreach program by reviewing how often the billing codes for this service are used. Therefore, it is important that you use the appropriate codes for the pneumococcal vaccine:

90669	
90670	
G0009	

These codes should be used even when the pneumococcal vaccine is administered at the same time as other immunizations.



Cigna promotes colorectal cancer screening

Colorectal cancer remains the third leading cause of cancer-related deaths in both men and women in the United States. According to the Centers for Disease Control and Prevention (CDC), 60 percent of these cancer deaths could be prevented if all men and women ages 50 years and older were routinely screened.

March is National Colorectal Cancer Screening Awareness Month. Cigna participates in this important campaign through a national program about this type of cancer. It targets those with Cigna medical plans, ages 50 to 64, who have not had this screening, or are overdue. They receive an educational brochure encouraging them to obtain one. The brochure also offers the opportunity to request an easy and convenient at-home test called the InSure® Fecal Immunochemical Test (FIT) Kit.

Goals of the program are to:

- Raise awareness about the importance of these cancer screenings so that cancer can be detected in its earliest stages when it is most treatable
- Increase the number of individuals who are screened

Cigna continually strives to improve customer compliance with colorectal screening through this program. If detected early, this cancer can be successfully treated.

Addressing health disparities in colorectal screenings

Cigna is committed to improving health equity by delivering outreach and health communications that are culturally appropriate. For example, we conducted a pilot study with insured African Americans in the Mid-Atlantic region (Maryland, Virginia and Washington, DC) to determine what type of outreach, if any, could increase the number of screenings among this population. Historically, African Americans have the lowest screening rate

in this region, which is significant since more African Americans develop and die from cancers than any other racial or ethnic group in the United States.²

A review of the pilot results revealed meaningful insights that should be considered by health care professionals and insurers to help increase cancer screening rates among this population:

- Outreach should include a strong educational component to help address barriers to obtaining the screening
- Insurers should collaborate with health care professionals to help increase screening rates
- Outreach should be customized to help encourage engagement for greater effect on an individual's decision to get screened

How you can help

You can have a positive influence on your patients' health by encouraging them to obtain colorectal cancer screenings. Please join Cigna in the national campaign to help reduce colorectal cancer by encouraging your patients to obtain screenings, when appropriate.

In some cases, you may find it helpful to refer to our cultural competency training and resources for information on understanding and effectively communicating to culturally diverse patients who are at risk. (See page 11 for more on how to access these materials on Cigna's websites at no charge.) You may also encourage your patients with Cigna coverage to learn more about the health advocacy programs available to them through their Cigna medical plan. They can find this information by calling the toll-free number on their Cigna ID card or by logging in to myCigna.com (Manage My Health > My Health Programs & Resources).



What you can do:

Please remind your patients of the importance of a colorectal cancer screening.

- U.S. Cancer Statistics Working Group. United States Cancer Statistics: 1999—2007 Incidence and Mortality Web-based Report. Atlanta (GA): Department of Health and Human Services, Centers for Disease Control and Prevention, and National Cancer Institute; 2010.
- 2. Colorectal Cancer Facts and Figures 2011—2013 American Cancer Society.



Market Medical Executive contact information

Cigna Market Medical Executives (MMEs) are an important part of our relationship with health care professionals. 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

Nicholas Gettas, MD, Chief Medical Officer, Cigna Regional Accounts | 1.804.344.3038

Northeast region

Dan Nicoll, MD, Regional Medical Director NJ, NY 1.201.533.4717			
Frank Brown, MD	DC, MD, VA	1.804.344.2384	
Jordan Ginsburg, MD	KS, MO, NE	1.314.290.7308	
Robert Hockmuth, MD	CT, MA, ME, NH, RI, VT	1.603.268.7567	
Peter McCauley, Sr., MD., CPE	IL, IN, MN, ND, SD, WI	1.312.648.5131	
Ronald Menzin, MD	NJ, NY	1.631.247.4526	
Christina Stasiuk, DO	DE, MI, OH, PA, WV	1.215.761.7168	

Southeast region

Jordan Ginsburg, MD, Regional Medical Director KS, MO, NE 1.314.290.7308			
Robert W. Hamilton, MD	AL, GA	1.404.443.8820	
Michael Howell, MD, MBA, FACP	FL, USVI	1.407.833.3130	
Edward Hunsinger, MD	NC, SC	1.336.945.6597	
Robert McLaughlin, MD	AR, KY, MS, TN	1.423.763.6764	
Mark J. Netoskie, MD, MBA, FAAP	LA, South TX	1.713.576.4465	
Frederick Watson, DO, MBA, CPE	North TX, OK	1.972.863.5119	

West region

Jennifer Gutzmore, MD, Regional Medical Director Southern CA, NV 1.818.500.6459			
Jacob Asher, MD	Northern CA	1.415.374.2520	
John Keats, MD	AZ, NV	1.480.426.6779	
Mark Laitos, MD	CO, NM, UT, WY	1.303.566.4705	
Mary O'Neill, MD, MBA	AK, HI, ID, MT, OR, WA	1.206.625.8846	
James Wang, MD	NV	1.702.938.2802	





Reasons to call your MME

- · Ask questions and obtain general information around our clinical policies and clinical programs.
- Ask questions regarding your specific practice and utilization patterns.
- Report or request assistance around 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 the networks.
- Identify opportunities to enroll your patients in Cigna health advocacy programs.

Coming soon: ePrescribing for Cigna Home Delivery PharmacySM

Later this year, you will be able to use electronic prescribing (ePrescribing)* for the prescriptions you send to Cigna Home Delivery Pharmacy (CHDP). This is a convenient alternative to retail pharmacies for your patients with Cigna pharmacy benefits.

Help your patients experience the benefits of CHDP:

- 24/7 access to pharmacists and customer service agents
- Prescription fills for up to 90 days of medication at one time
- Free, prompt delivery to a patient's home or other preferred location
- Lower out-of-pocket expenses for many patients
- QuickFill, our free, automated refill reminder service

In addition, CHDP offers FDA-approved medications, responsive individual coaching, and proactive customer communication.

Health care professionals who use ePrescribing for patients with Cigna pharmacy benefits will also be able to receive prescription renewal requests from CHDP electronically, reducing the amount of faxes and phone calls your staff manages.

Interested in ePrescribing?

If you're not using ePrescribing yet, there's never been a better time to start. ePrescribing offers:

 Real-time access to your patients' medication history, indicating possible adverse drug interactions and adherence issues

- Fewer phone calls to explain handwritten prescriptions
- Electronic access to the prescription drug list, which allows for the most cost-effective, clinically appropriate prescribing decisions
- · Administrative efficiencies

What's more, the Centers for Medicare & Medicaid Services (CMS) provides valuable incentive dollars to encourage health care professionals to use ePrescribing. Some programs even carry penalties, in the form of reduced Medicare reimbursement payments, for doctors who have not chosen to use ePrescribing.

To learn more about Cigna's ePrescribing for CHDP, please call 1.800.285.4812, option 3.

*All prescriptions are submitted through a secure connection with Surescripts® electronic prescribing network.





Medical injectable coverage "carve out" – what you need to know

In recent years, there has been a trend for some of our health plan clients to "carve out" injectable medications covered under their Cigna medical benefit to a stand-alone pharmacy benefit manager (PBM). That is, they sometimes request that the coverage of some or all medical injectable medications be excluded from the Cigna medical plan. The client then obtains separate coverage from the PBM for these medications. We want you to know the differences in how this coverage is administered for your patients when managed by Cigna versus by PBMs.

Cigna injectable medication coverage

Cigna medical plans often include coverage for injectable medications. Injectables are covered under the medical benefit because they require health care professional expertise for handling, skilled administration and close patient monitoring. In most cases, they are ordered by the health care professional who will also be managing their proper handling, which includes appropriate temperature storing. Managing these medications under the medical benefit helps ensure patients receive the most appropriate clinical support and follow-up.

PBM injectable medication coverage

When a PBM covers the injectables, the medication must be obtained through a PBM specialty pharmacy. It is then the PBM's responsibility to find a health care professional to administer the medication. This arrangement often leads to confusion, disruptions in care, and delays in treating patients, as the PBMs can have difficulty finding health care professionals who are willing to support the administration of a medication they do not dispense and over which they do not have quality control.

Identifying if coverage is provided by Cigna or a PBM

Most Cigna plans require precertification for outpatient services, including the administration of injectable medications. When you call to precertify a medical injectable, you will be informed if a PBM handles the administration of coverage for that medication. If so, any precertification requirements or coordination of care must be performed through the PBM that covers the medication.

Some Cigna plans do not require precertification of medical injectable medications. It is important to discuss coverage for these medications with the patient and to check benefits eligibility. In these instances, call Customer Service at 1.800.88Cigna (882.4462) to determine the patient's medical injectable coverage.

Medical injectables are medications that are administered intravenously or injected at the physician's office. These medications can also be administered through an infusion facility or home health service. depending on the physician's order.



Despite our consultation around the differences between Cigna and PBM injectable medication coverage and potential patient care issues, some clients continue to carve out injectable medications.

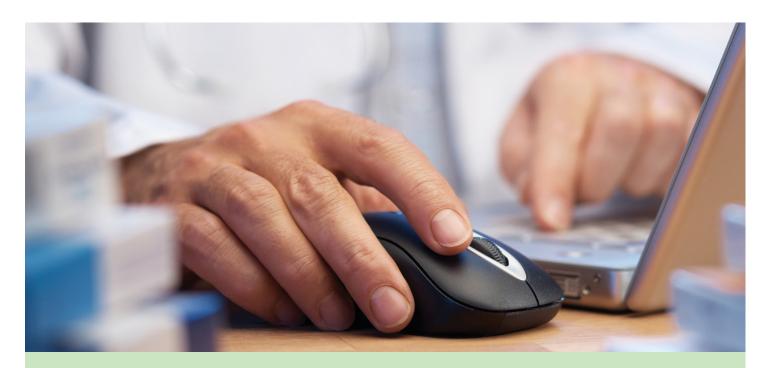


Medication prior authorization now available online

PromptPA is a new web-based capability offering you a convenient, easy-to-use tool to obtain prior authorization of medications online.* This online option is available for drugs covered under the Cigna pharmacy benefit. You may also use

PromptPA to obtain prior authorization for drugs covered under the Cigna medical benefit for your patients who have both medical and pharmacy coverage through Cigna.

*Prior authorization by telephone or fax will continue to be available for your patients with pharmacy coverage through Cigna.



Using PromptPA is easy

1. Go to https://Cigna.promptpa.com/ and select the "New Prior Authorization" tab.

You can also access this link through the Cigna for Health Care Professionals website (CignaforHCP.com > Resources > Pharmacy Resources > Pharmacy Prior Authorizations and Coverage Determinations > Online Submissions).

- 2. Enter the following information to complete an online prior authorization request:
 - Patient name, date of birth, ZIP code, and ID number
 - Name of drug, strength, quantity, and days supply.
 - Your name and state, or National Provider Identifier (NPI) number
 - Patient diagnosis, alternative drugs that have been tried, and clinical support information

After you submit your prior authorization request, you can check the status of your request by clicking on the Check Status tab on the home page.

If you have questions about PromptPA, please call Cigna Pharmacy Services at 1.855.857.6585.

Cultural competency training and resources

Cultural competency resources are available to health care professionals on the Cigna.com and CignaforHCP.com websites. You will be able to access links to resources at no extra cost to you. Resources include articles, training, videos, a health equity brochure, and a public service announcement on the importance of language interpreters in health care.

Visit either of these websites to learn more:

- Cigna.com > Health Care Professionals > Resources for Health Care Professionals > Health & Wellness Programs > **Cultural Competency Training** and Resources
- CignaforHCP.com > Resources > Medical Resources > Doing Business with Cigna > **Cultural Competency Training** and Resources

Tell us what's changed

Have you recently changed addresses, specialty type, phone numbers, or **Taxpayer Identification Numbers?** Have doctors left your group? It's important to notify Cigna of these changes. Demographic information is used to process claims and send you communications. It's also published in the Cigna health care professional directories.

You may contact us as noted below or submit changes electronically using the online form available on the Cigna for Health Care Professionals website at CignaforHCP.com and on the Secured Provider Portal at GWHCignaforHCP.com.

If you are located in:

AL, AR, DC, FL, GA, KY, LA, MD, MS, NC, OK, PR, SC, TN, TX, USVI, or VA

Email: PDMTampa@Cigna.com

Fax: 1.888.208.7159

Mail: Cigna PDM, 2701 North Rocky Pointe Dr., Suite 800, Tampa, FL 33607

CT, DE, IL, IN, MA, ME, MI, MN, NH, NJ, NY, OH, PA, RI, VT, WI, or WV

Email: ProviderData@Cigna.com

Fax: 1.877.358.4301 Mail: Two College Park Dr., Hooksett, NH 03106

AK, AZ, CA, CO, KS, MO, NV, OR, UT,

WA, or WY

Email: PDMGlendale@Cigna.com

Fax: 1.860.687.7336

Mail: 400 North Brand Blvd., Suite 300,

Glendale, CA 91203

Urgent care for non-emergencies

People often visit emergency rooms for non-life threatening situations, even though they usually pay more and wait longer. Why? Because they often don't know where else to go.

You can give your patients other options. Consider providing them with same-day appointments when it's an urgent

problem. And, when your office is closed, consider directing them to a participating urgent care center, rather than the emergency room, when appropriate.

For a list of Cigna's participating urgent care centers, view our Health Care Professionals Directory at Cigna. benefitnation.net/Cigna/docdir.aspx.

Reference Guides

Cigna's Reference Guides contain many of our administrative guidelines and program requirements. The guides combine information for physicians, hospitals, ancillary facilities, and other health care professionals. The Cigna Reference Guides include information pertaining to participants with Cigna and GWH-Cigna ID cards.

Updated guides now available

You can access the Cigna Reference Guides at either of the websites below, including the state-specific guides, where applicable. You must be a registered user to access these sites.

- CignaforHCP.com > Resources > Reference Guides > Medical Reference Guides > Health Care Professional Reference Guides
- GWHCignaforHCP.com > Tools & Resources > Health Care Professional **Reference Guides**

If you are not registered for the website, click on "Register Now" to enroll. If you prefer to receive a paper copy or CD-ROM, call 1.877.581.8912.

Letters to the editor

Your comments or suggestions for the editor are always welcome. Please email NetworkNewsEditor@Cigna.com or write to:

Attn: Health Care Professional Communications

900 Cottage Grove Road, Routing B7NC Hartford, CT 06152

Use the network

Help your patients keep medical costs down by referring them to health care professionals in our network. Not only is that helpful to them, but it's also good for your relationship with Cigna, as it's 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. Of course, if there's an emergency, use your professional discretion.

For a complete listing of Cigna participating physicians and facilities, go to Cigna.com > Health Care Professionals > Health Care Professionals Directory.

For a complete listing of participating physicians and facilities that provide in-network services to GWH-Cigna ID card holders, go to GWHCignaforHCP.com > Find a Health Care Professional.

Go green – go electronic

Would you like to reduce paper in your office? Sign up now to receive certain announcements and important information from us right in your email box. When you register for the secure Cigna for 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 need to

By registering, you will receive some correspondence electronically, including *Network News* and other select communications. Certain correspondence 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 Cigna for Health Care Professionals website and receive electronic updates, go to CignaforHCP.com and click "Register Now."

863850 04/13 THN-2013-123 © 2013 Cigna. Some content provided under license.

Use and distribution limited solely to authorized personnel.

The term "health care professional" is referred to in contracts as "provider."

"Cigna" and "GO YOU" are registered service marks, and the "Tree of Life" logo is a service mark, of Cigna Intellectual Property, Inc., licensed for use by Cigna Corporation and its operating subsidiaries. All products and services are provided by or through such operating subsidiaries and not by Cigna Corporation. Such operating subsidiaries include Connecticut General Life Insurance Company, Cigna Behavioral Health, Inc., Cigna Health and Life Insurance Company, Cigna Behavioral Health, Inc., Cigna Health Management, Inc., and HMO or service company subsidiaries of Cigna Health Cigna Health Inc., and More and Cigna Health Inc., and More and Cigna Health Cigna Behavioral Health Inc., and More and Cigna Health Inc., and More are used for illustrative purposes only.

listed for each issue.

Io access articles from previous issues of Network News, visit Cigna.com > Health Care Professionals > Newsletters, or the Secured Provider Portal at GWHCignaforHCP.com > Important Updates > Network News. Article topics are

Cigna Attn: Health Care Professional Communications 900 Cottage Grove Road, Routing B7NC Hartford, CT 06152 1.8086igna (882.4462)

