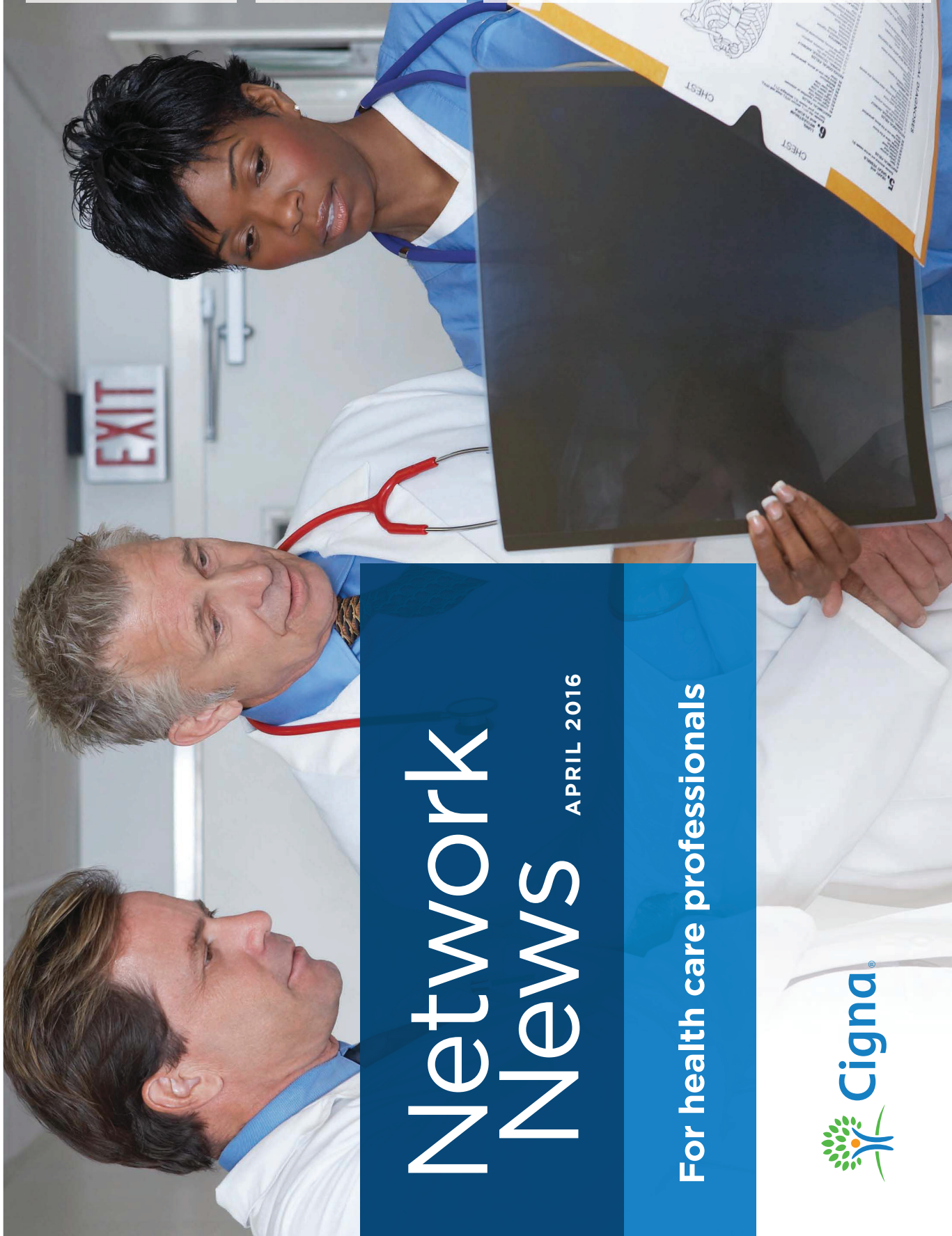




Network News

APRIL 2016

For health care professionals



**Genetic testing
and counseling
program expansion**
Page 3

**New Connect and
FocusIn plans**
Page 12

**Take a tour of our
enhanced drug list
search tool**
Page 15

**Finally, an app that
understands your
patients – Coach
by Cigna**
Page 17

Network News

APRIL 2016

Contents

	FEATURE ARTICLE Genetic testing and counseling program expansion	3
	POLICY UPDATES Clinical, reimbursement, and administrative policy updates Precertification changes	4 5
	ELECTRONIC TOOLS National eServices webinar schedule Navinet online precertification site enhancements Cigna now accepting 278 batch transactions	6 6 6
	GENERAL NEWS Preventive health coverage guide updated Preventive care services and codes for women Participate in the 2016 Leapfrog Hospital survey Radiation therapy utilization management program expansion Getting your claim to the correct payer HEDIS data collection reminder Infertility centers of excellence displays removed from directory World of Difference grants awarded to Emory University and Ashoka	7 7 8 8 9 9 9 10

	NETWORK UPDATES NEW Connect and FocusIn plans	12
	MEDICARE NEWS Pneumonia vaccination recommendations for older adults	14
	PHARMACY NEWS Take a tour of our enhanced drug list search tool	15
	REGIONAL NEWS California language assistance law	16
	CONNECTED CARE Finally, an App that understands your patients – Coach by Cigna	17



HELPFUL REMINDERS

Market Medical Executives contact information	18
Cigna and Anthem	18
Go Green – Go Electronic Cultural competency training and resources	19
Use the network	19
Reference Guides	19
Have you moved recently? Did your phone number change?	20
Urgent care for nonemergencies	20
Letters to the editor	20
Access the archives	20



GENETIC TESTING AND COUNSELING PROGRAM EXPANSION

We're building on the success of our genetic counseling program, and expanding it to include additional genetic tests. We began our genetic counseling program in 2013 as a medically necessary requirement for customers undergoing genetic testing for hereditary breast and ovarian cancer (BRCA), colorectal cancer syndromes, and Long QT syndrome, a hereditary heart condition. It requires the counseling

to be performed by a participating, independent board-certified genetic counselor or clinical geneticist prior to requesting precertification for the testing.

Since then, more than 32,000 of our customers have had genetic counseling through the program, and the average

number of monthly claims for genetic counseling has more than doubled. According to customer satisfaction data from InformedDNA, our genetic counseling partner, nearly 95 percent* of customers say they are satisfied with the service. InformedDNA is a company that specializes in genetics, and provides telephone genetic counseling by board-certified genetics specialists nationwide.

"I felt like I made my decision to have the testing based on information that was specific to my family history, and not national statistics."

– Cigna customer who received genetic counseling

Educating customers about hereditary conditions and genetic tests

The Genetic Testing and Counseling Program provides our customers with an opportunity to become fully informed about complex hereditary conditions and their respective genetic tests.

"There's a lot of information directed at consumers that can be very confusing," said Jeffrey F. Hankoff, M.D., Cigna's medical officer for clinical performance and quality. "Just because a genetic test is available doesn't mean that it's right for everyone; what's appropriate for an individual depends on family medical history and risk factors. Counseling from an independent, board-certified genetics specialist can help individuals make informed decisions about having a potentially life-altering test, and can also help them understand the health implications of their test results."

The value of the counseling is confirmed by our customers, with one stating, "The counselor was very knowledgeable, and answered all my questions and concerns. I felt like I made my decision to have the testing based on information that was specific to my family history, and not national statistics. I learned more about my family history in gathering information to discuss with my counselor. I think in my case the genetic counseling was beneficial, and I would recommend it to others in a high risk category."

Counseling to be required for four additional genetic tests

Beginning July 15, 2016, we will expand the program to require genetic counseling for four additional tests.

EXPANDED GENETIC TESTING THAT WILL REQUIRE GENETIC COUNSELING EFFECTIVE JULY 15, 2016	RELATED CPT/HCPCS CODES
Exome test	81415, 81416
Hereditary arrhythmias and cardiomyopathies (all hereditary cardiac tests)	81403, 81404, 81405, 81406, 81407, 81408, S3861, S3865, and S3866
Pediatric microarray test (excluding prenatal testing)	81228, 81229, and S3870
Hereditary cancer syndromes (all hereditary cancer tests)	81321, 81322, 81323, 81401, 81403, 81404, 81405, 81406, S3840, S3841, and S3842

Coverage policy updates

We will also update the following four coverage policies to include genetic counseling as a component of medical necessity, effective July 15, 2016:

- Genetic Testing for Hereditary Cancer Susceptibility Syndromes
- Genetic Testing for Hereditary Cardiomyopathies and Arrhythmias
- Whole Exome and Whole Genome Sequencing
- Comparative Genomic Hybridization (CGH)/Chromosomal Microarray Analysis (CMA) for Autism Spectrum Disorders, Developmental Delay, Intellectual Disability and Multiple or Unspecified Congenital Anomalies

A copy of these updated coverage policies is available on the Cigna for Health Care Professionals website at (CignaforHCP.com) > Resources > Coverage Policies > [Medical and Administrative A-Z Index](#).

Additional information

The Genetic Testing and Counseling Program supports providers in their delivery of optimal care to their patients with Cigna-administered coverage. For additional information, visit Cigna.com/GeneticTestingProgram.

* InformedDNA survey of Cigna customers who used InformedDNA's genetic counseling services in calendar year 2015.



CLINICAL, REIMBURSEMENT, AND ADMINISTRATIVE POLICY UPDATES

To support access to quality, cost-effective care for your patients with a medical plan administered by Cigna, we routinely review clinical, reimbursement, and administrative policies, as well as our medical coverage policies and precertification requirements. As a reminder, reimbursement and modifier policies apply to all claims, including those for your patients with GWH-Cigna or "G" ID cards.

The following table lists updates to our coverage policies. Additional information, including an outline of monthly coverage policy changes and a full listing of medical coverage policies, is available on the Cigna for Health Care Professionals website (CignaforHCP.com) > Resources > Coverage Policies).

If you are not registered for CignaforHCP.com, please register so you can log in and access all of our coverage policies. Go to CignaforHCP.com and click Register Now. If you do not have Internet access – and would like additional information – please call Cigna Customer Service at **1.800.88Cigna** (1.800.882.4462).

Policy updates

POLICY NAME	UPDATE	EFFECTIVE DATE
Ambulance Services reimbursement policy (R18)	With this update, we will only reimburse nonemergency ambulance transportation when a hospital is the origin or destination of the service. Claims billed without a hospital modifier (H) will not be reimbursed. We will also not provide additional reimbursement for ancillary services during nonemergency ambulance transportation, such as intravenous therapy (IV), oxygen, pulse oximetry, ambulance waiting time, and mileage past the nearest hospital.	March 15, 2016
Drug Convenience Kits	Separate reimbursement for drug convenience kits will be denied because they include supplies considered incidental to the primary service of providing the drug. Only the drug(s) should be billed.	April 11, 2016
Drug Testing Billing Requirements (R25)	Claims with outdated G-codes and Current Procedural Terminology (CPT®) codes for definitive drug testing will be denied. We will only reimburse claims submitted with the new Centers for Medicare & Medicaid Services (CMS) G-codes.	April 11, 2016
Strapping and Taping (0512)	We will create a new strapping and taping coverage policy, and update the current physical therapy coverage policy to identify medical conditions or areas of the body where strapping is considered medically necessary.	April 11, 2016
Physical Therapy (0096)	Taping is considered experimental, investigational, or unproven (EIU) for all diagnoses. Strapping services that are billed with CPT codes for any medical conditions or body areas not specified in the coverage policies will be denied as not medically necessary or EIU.	
Code Edit Policy	With this update, we will no longer allow for separate reimbursement for CPT code 97010 Hot/Cold Packs. This procedure code is designated by CMS as "bundled" by a status code indicator of "B" on the CMS National Physician Fee Schedule Relative Value File. When billed with any other procedure code that is not indicated as a "bundled" service, these procedures are considered a component of, or incident to, the overall service provided, and separate reimbursement is not warranted.	August 13, 2016

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



PRECERTIFICATION CHANGES

To ensure that we are using the most current medical information available, we routinely review our precertification policies for potential updates. As a result of a recent review, we want to make you aware that we plan to update our precertification list, as follows

Codes added to the precertification list on April 1, 2016

CODE	DESCRIPTION
C9137	Injection, Factor VIII (antihemophilic factor, recombinant) PEGylated, 1 I.U.
C9138	Injection, Factor VIII (antihemophilic factor, recombinant) (Nuwiq), 1 I.U.
C9471	Hyaluronan or derivative, Hymovis, for intra-articular injection, 1 mg
C9472	Injection, talimogene laherparepvec, 1 million plaque forming units (PFU)
C9473	Injection, mepolizumab, 1 mg
C9474	Injection, irinotecan liposome, 1 mg
C9475	Injection, necitumumab, 1 mg

Codes to be removed from the precertification list on April 1, 2016*

CODE	DESCRIPTION
62367	Electronic analysis of programmable, implanted pump for intrathecal or epidural drug infusion (includes evaluation of reservoir status, alarm status, drug prescription status); without reprogramming or refill
62368	Electronic analysis of programmable, implanted pump for intrathecal or epidural drug infusion (includes evaluation of reservoir status, alarm status, drug prescription status); with reprogramming
62369	Electronic analysis of programmable, implanted pump for intrathecal or epidural drug infusion (includes evaluation of reservoir status, alarm status, drug prescription status); with reprogramming and refill
62370	Electronic analysis of programmable, implanted pump for intrathecal or epidural drug infusion (includes evaluation of reservoir status, alarm status, drug prescription status); with reprogramming and refill (requiring skill of a physician or other qualified health care professional)
77085	Dual-energy X-ray absorptiometry (DXA), bone density study, one or more sites; axial skeleton (e.g., hips, pelvis, spine), including vertebral fracture assessment
81528	Oncology (colorectal) screening, quantitative real-time target and signal amplification of 10 DNA markers (KRAS mutations, promoter methylation of NDRG4 and BMP3) and fecal hemoglobin, utilizing stool, algorithm reported as a positive or negative result
95970	Electronic analysis of implanted neurostimulator pulse generator system (e.g., rate, pulse amplitude, pulse duration, configuration of wave form, battery status, electrode selectability, output modulation, cycling, impedance and patient compliance measurements); simple or complex brain, spinal cord, or peripheral (i.e., cranial nerve, peripheral nerve, sacral nerve, neuromuscular) neurostimulator pulse generator/transmitter, without reprogramming

CODE	DESCRIPTION
95971	Electronic analysis of implanted neurostimulator pulse generator system (e.g., rate, pulse amplitude, pulse duration, configuration of wave form, battery status, electrode selectability, output modulation, cycling, impedance and patient compliance measurements); simple spinal cord, or peripheral (i.e., peripheral nerve, sacral nerve, neuromuscular) neurostimulator pulse generator/transmitter, with intraoperative or subsequent programming
95972	Electronic analysis of implanted neurostimulator pulse generator system (e.g., rate, pulse amplitude, pulse duration, configuration of wave form, battery status, electrode selectability, output modulation, cycling, impedance and patient compliance measurements); complex spinal cord, or peripheral (i.e., peripheral nerve, sacral nerve, neuromuscular) (except cranial nerve) neurostimulator pulse generator/transmitter, with intraoperative or subsequent programming
95990	Refilling and maintenance of implantable pump or reservoir for drug delivery, spinal (intrathecal, epidural) or brain (intraventricular), includes electronic analysis of pump, when performed
95991	Refilling and maintenance of implantable pump or reservoir for drug delivery, spinal (intrathecal, epidural) or brain (intraventricular), includes electronic analysis of pump, when performed; requiring skill of a physician or other qualified health care professional
0302T	Insertion or removal and replacement of intracardiac ischemia monitoring system, including imaging supervision and interpretation when performed and intraoperative interrogation and programming when performed; complete system (includes device and electrode)
0303T	Insertion or removal and replacement of intracardiac ischemia monitoring system, including imaging supervision and interpretation when performed and intraoperative interrogation and programming when performed; electrode only
0304T	Insertion or removal and replacement of intracardiac ischemia monitoring system, including imaging supervision and interpretation when performed and intraoperative interrogation and programming when performed; device only
0305T	Programming device evaluation (in person) of intracardiac ischemia monitoring system with iterative adjustment of programmed values, with analysis, review, and report
0306T	Interrogation device evaluation (in person) of intracardiac ischemia monitoring system with analysis, review, and report
0307T	Removal of intracardiac ischemia monitoring device
G0464	Colorectal cancer screening: stool-based DNA and fecal occult hemoglobin (e.g., KRAS, NDRG4 and BMP3)

To view an outline of these monthly precertification updates, as well as the complete list of services that require precertification of coverage, please log in to [CignaforHCP.com](https://www.cignaforhcp.com) and click on Precertification Policies under Useful Links. If you are not currently registered for the website, you will need to register to log in. Go to [CignaforHCP.com](https://www.cignaforhcp.com) and click on "Register Now."

* Note: Removal of codes from the precertification list is not a guarantee of coverage or payment. Codes may be subject to code editing, benefit plan exclusions, and post-service review for coverage.



NATIONAL eSERVICES WEBINAR SCHEDULE

You're invited to join interactive, web based demonstrations of the Cigna for Health Care Professionals website (CignaforHCP.com). Learn how to navigate the site and perform time saving transactions such as precertification, claim status inquiries, electronic funds transfer (EFT) enrollment, and more. The tools and information you'll learn about will benefit you and your patients with Cigna coverage.

TOPIC	DATE	TIME (PST/MST/CST/EST)	LENGTH	MEETING NUMBER
CignaforHCP.com Overview	Wednesday, May 4, 2016	12:00 PM / 1:00 PM / 2:00 PM / 3:00 PM	90 min	713 384 686
Eligibility & Benefits /Cigna Cost of Care Estimator	Friday, May 13, 2016	10:00 AM / 11:00 AM / 12:00 PM / 1:00 PM	45 min	716 162 260
EFT Enrollment, Online Remittance, and Claim Status Inquiry	Tuesday, May 17, 2016	8:00 AM / 9:00 AM / 10:00 AM / 11:00 AM	90 min	712 263 214
Online Precertification	Tuesday, May 24, 2016	10:00 AM / 11:00 AM / 12:00 PM / 1:00 PM	45 min	711 498 613
CignaforHCP.com Overview	Wednesday, June 8, 2016	12:00 PM / 1:00 PM / 2:00 PM / 3:00 PM	90 min	712 053 047
Eligibility & Benefits /Cigna Cost of Care Estimator	Monday, June 13, 2016	11:00 AM / 12:00 PM / 1:00 PM / 2:00 PM	45 min	715 604 255
EFT Enrollment, Online Remittance, and Claim Status Inquiry	Wednesday, June 22, 2016	12:00 PM / 1:00 PM / 2:00 PM / 3:00 PM	45 min	711 906 089
Online Precertification	Thursday, June 30, 2016	10:30 AM / 11:30 AM / 12:30 PM / 1:30 PM	45 min	713 270 917

To register* for a webinar:

Go to <http://Cignavirtual.webex.com>. +

1. Enter the Meeting Number.

2. Click "Join" and then click "Register." +

3. Enter the requested information. +

4. You'll receive a confirmation email with meeting details.

* Preregistration is required for each session. The password for each webinar is **123456**.

To join the audio portion of the webinar:

Dial 1.888.Cigna.60 (1.888.244.6260) and enter passcode 684113# when prompted.

Questions?

Contact: Cigna_Provider_eService@Cigna.com

NAVINET ONLINE PRECERTIFICATION SITE ENHANCEMENTS

If you use NaviNet to submit online precertification requests to Cigna, you may have noticed some notable improvements, starting with a new "look and feel" to the NaviNet home page. In addition, changes were made to enhance site navigation and provide users with a deeper level of support. They include:

- A NaviNet Support column that houses quick links to FAQs and support videos
 - A Contact Support menu that allows users to open a support case, initiate an online chat, and call NaviNet Support right from the home page
 - The ability to initiate online precertification requests using previously unsupported browsers – Chrome, Firefox, and Safari
- If you are registered for the Cigna for Health Care Professionals website (CignaforHCP.com) as a primary administrator, you can access the NaviNet online precertification feature by logging in to CignaforHCP.com > Patients > View & Submit Precertifications > My Health Plans > Cigna.

CIGNA NOW ACCEPTING 278 BATCH TRANSACTIONS

Health care professionals can now submit multiple requests directly to Cigna for precertifications and referrals in one ANSI 278 transaction through their electronic data interchange (EDI) vendor.* Electronic responses will be returned by 7:00 am EST on the third-business day from the time the requests are received, with every effort made to either approve or deny (and not pend) them.

If you are interested in using the 278 batch transaction, please contact your EDI vendor. +

* Currently not available through NaviNet.



PREVENTIVE HEALTH COVERAGE GUIDE UPDATED



We have updated [A Guide to Cigna's Preventive Health Coverage for Health Care Professionals](#) for 2016, which provides coverage information on wellness-related care and services.

The updates include:

- Changing the focus from the International Classification of Diseases, 9th Edition (ICD-9) to ICD-10
- Updating codes for the following preventive care services:
 - BRCA1 and BRCA2 genetic testing
 - Cervical cancer screening
 - Human immunodeficiency virus (HIV) screening
 - Intrauterine devices
 - Lung cancer screening
- Removing deleted codes
- Listing codes separately instead of listing code ranges with hyphens

Access the guide

You can access the [guide](#) on the Cigna for Health Care Professionals website ([CignaforHCP.com](#) > Resources > Medical Resources > Clinical Health and Wellness Programs > [Care Guidelines](#)).

PREVENTIVE CARE SERVICES AND CODES FOR WOMEN

Breast-feeding counseling and support services are covered as preventive care services for women. Coding them correctly is the key to enabling your patients to realize their full available coverage under their benefit plan.

Preventive care codes to use

When breast-feeding counseling and support services are provided as a component of a preventive medicine evaluation and management office visit, or at a separate encounter, you can use these Current Procedural Terminology (CPT®) and Healthcare Common Procedure Coding System (HCPCS) codes:

- CPT 99401-99404 Preventive medicine individual counseling visit
- CPT 99411-99412 Preventive medicine group counseling visit
- HCPCS S9443 Lactation class

These codes will correctly identify these as preventive care services.

For additional information, refer to [A Guide to Cigna's Preventive Health Coverage for Health Care Professionals](#) for 2016, available on the Cigna for Health Care Professionals website > ([CignaforHCP.com](#) > Resources > Medical Resources > Clinical Health and Wellness Programs > [Care Guidelines](#)).



PARTICIPATE IN THE 2016 LEAPFROG HOSPITAL SURVEY



Cigna encourages hospitals to participate in the Leapfrog Hospital Survey. We use this self-reported hospital performance information as part of the criteria to assess participating hospitals for the Center of Excellence designation.

What you need to know

The 2016 Leapfrog Hospital Survey became available to hospitals on April 1, 2016. The online survey participation tool opened on April 15, 2016. The deadline to be included in the first release of 2016 Leapfrog Hospital Survey results is June 30, 2016. Hospitals can continue to submit new surveys, as well as update previously submitted 2016 surveys, until December 31, 2016. The Leapfrog Hospital Survey results are publicly reported, by hospital, at leapfroggroup.org/cp each month.

Additional information

For more information about The Leapfrog Group and how to participate in the 2016 Leapfrog Hospital Survey, please visit leapfroggroup.org.

RADIATION THERAPY UTILIZATION MANAGEMENT PROGRAM EXPANSION

Cigna works with eviCore healthcare (formerly CareCore | MedSolutions) to provide a utilization management program, including precertification, for select outpatient radiation therapy services for certain Cigna customers. The program's goal is to help ensure that appropriate test, treatment, and billing practices are followed, while promoting quality care and patient safety.



Program to expand customers with GWH-Cigna or "G" ID cards in May 2016

To provide a more consistent experience for health care professionals and our customers, **we will expand this program to include our customers with GWH-Cigna and "G" ID cards, beginning May 16, 2016.**

Health care professionals who provide or coordinate radiation therapy treatments will be responsible for requesting precertification for radiation therapy services for these patients starting on that date.

How to request precertification

Health care professionals may call eviCore or visit their website to request precertification for radiation therapy services.

➤ **Website:** eviCore.com > Login: Providers >

CareCore > Ordering Provider Login

➤ **Telephone:** 1.866.668.9250
(7:00 a.m.–8:00 p.m. CST)

Note: *eviCore is currently taking precertification requests for services that will be performed on and after May 16, 2016.*



GETTING YOUR CLAIM TO THE CORRECT PAYER

It can be challenging for health care providers to juggle working with multiple payers and their contracted ancillary vendors that are responsible for making claim payments, such as chiropractor networks and durable medical equipment suppliers. As a result, sometimes claims are sent to Cigna when they should have been sent directly to an ancillary vendor.



We are pleased to announce that now, when we receive misdirected claims for one of the following ancillary vendors, we will forward them to the correct ancillary vendor for processing:

- American Specialty Health® (ASH)
- Allegiance®
- eviCore healthcare (MedSolutions)
- Kelsey-Seybold Clinic®

Additional ancillary vendors will be added to this list in the coming months.

How you will know your claim has been redirected

We'll send you an explanation on the electronic remittance advice (ERA) or explanation of payment (EOP) letting you know that your claim has been redirected to the appropriate ancillary vendor for processing. This new procedure should help prevent unnecessary delays in processing and payment, and eliminate the need for you to resubmit them.

Reminder: Send claims directly to ancillary vendors for fastest payment

Even with this change, you'll still be paid more quickly if you submit your claims directly to the correct Cigna ancillary vendor. They are equipped to process these claims, answer claim status questions, and reimburse you.

HEDIS DATA COLLECTION REMINDER

In February, we mailed our initial requests for medical record reviews to health care professionals' offices to collect data for the Healthcare Effectiveness Data and Information Set (HEDIS®), a core set of performance measures that provides an in-depth analysis of the quality of care that health care organizations provide to their customers.

The HEDIS medical record review is time sensitive, and you are required to cooperate with the HEDIS data collection process under terms of your provider agreement.

If you have a secure electronic medical record system, and will allow us access to it through our secure network, HEDIS requests can be completed remotely. You can also securely fax the requested documentation to us.

For more information on HEDIS, log in to the Cigna for Health Care Professionals website (CignaforHCP.com > Medical Resources > Commitment to Quality > Healthcare Effectiveness Data and Information Set Record Collection).

INFERTILITY CENTERS OF EXCELLENCE DISPLAYS REMOVED FROM DIRECTORY

As part of our Infertility Centers of Excellence (COE) program, we evaluate patient outcomes (quality) and cost-efficiency information for infertility centers. Those meeting our specific criteria receive infertility COE designations. In the past, these have been displayed in the Health Care Professional Directory on Cigna.com and myCigna.com.

As of December 31, 2015, we have removed the infertility COE designation displays from the Health

Care Professional Directory because the program is currently available to only a small number of customers. However, a list of infertility centers with infertility COE designations will continue to be available to meet certain client-specific network needs.

Infertility COE designations effective January 1, 2015 will be retained through December 31, 2016.



WORLD OF DIFFERENCE GRANTS AWARDED TO EMORY UNIVERSITY AND ASHOKA

Emory University – Using community health navigators to improve health of underserved communities

The Cigna Foundation recently awarded a \$115,468 World of Difference grant to Emory University's Rollins School of Public Health for its program to improve the health of Mexican Americans and Latinos in the Atlanta, Georgia region. The funding will support the development of outreach workers to help this metropolitan community.

“The Emory program

holds great promise for improving health among an underserved population, providing employment opportunities to youth, and uncovering best practices we can use in building healthy communities across the nation. We’re excited to watch this work get off the ground, and look forward to the successes ahead.”

The Cigna Foundation makes community health navigation a priority in the U.S.

This grant is an important first step for the foundation, which is making community health navigation a priority for its World of Difference grants in the United States.

Community health navigation places a special emphasis on the role community health workers play in addressing the health needs of underserved individuals. It uses trusted advisors within a community to guide people through the complex health care and social service systems. This has been found to be one of the most

– David Figliuzzi
Executive Director, Cigna Foundation

The VDSA program is a joint effort between the Mexican Consulate in Atlanta and the Rollins School of Public Health. It aims to improve the health of Mexican Americans, Latinos, and their families by providing preventive health education and screenings, and access to culturally appropriate care.

About community health navigation World of Difference grants

The goals of community health navigation programs are to improve access to primary care, reduce emergency room use, lower total medical costs, and improve the health and wellness of those enrolled in the programs.

“In making a commitment to community health navigation, we’re looking at the ways in which communities support or detract from an individual’s health – and we’re working with organizations that are discovering unique and effective ways to help individuals through community resources,” Figliuzzi said.

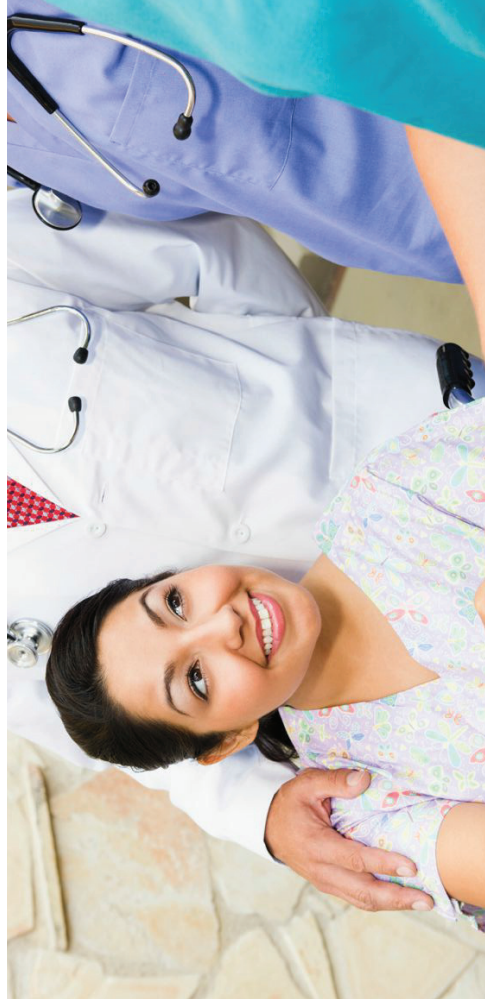
He continued, “Spotlighting community health navigation demonstrates our understanding that what makes a person healthy or unhealthy often happens outside of the doctor’s office or traditional health care delivery. We plan to pilot programs that are multifaceted – collaborating with government, social services, and businesses – so we can speed help to those who need it most and create sustainable change in our communities.”

The Cigna Foundation’s concentration on community health navigation is also evidenced in work underway in Memphis, Tennessee <http://bit.ly/1R8COQ> and Hartford, Connecticut <http://bit.ly/235KxCO>.

Community health navigation programs that are eligible for World of Difference grants include those that provide face-to-face community health workers, establish community-based health facilities, or create online resources where people can easily access the health information they need.

About Rollins School of Public Health at Emory University.

At the Rollins School of Public Health, students learn to identify, analyze, and intervene in today’s most pressing public health issues. The school’s location in Atlanta, referred to as the “Public Health Capital of the World,” is also home to the U.S. Centers for Disease Control and Prevention, and numerous other national, state, and regional health agencies, making it the ideal setting for hands-on research and collaborations. <http://www.sph.emory.edu/>



Ashoka, India – Improving workplace health and wellness for low-income earners

In February 2016, the Cigna Foundation announced that it awarded a \$50,000 World of Difference grant to Ashoka, a global non-profit organization that is building a workforce wellness collaborative innovation lab in India.

The Cigna Foundation makes workplace wellness a priority abroad

Starting with Ashoka, the Cigna Foundation is making workplace wellness a priority for its World of Difference grants outside of the United States. This is a natural extension of the foundation's emphasis on health equity, and its belief that workplaces can serve as an entry point to helping people navigate their health and improve their wellness.

"We chose workplace wellness as our global giving priority to reach as many people as we can, as we believe that the most efficient way

to have impact on a large scale is through the world's employers. Through this work, we can help improve wellness among the global workforce, and drive better health for communities worldwide," said Figliuzzi.

"We are excited to be partnering with Cigna in our Vitalness@Work pilot in India, which we believe will benefit both the working poor and their employers."

- Dr. Al Hammond,
Director Ashoka Global Health Program

Ashoka's grant to help improve health of low-income workers

Ashoka's initiative will start with low-income workers, in physically stressful conditions, where there is a high incidence of workplace absenteeism because of accidents, illness, and related conditions – and where improvements can make a rapid impact. Its program will provide health assessments, pay for treatment, and support behavior change for healthy lifestyles – all delivered at the work site. Success will be measured in terms of health improvement, workplace productivity, reduced absenteeism, fewer accidents, and employee retention.

"Through the success of the Ashoka program, we hope to be able to demonstrate that it is in the best interest of employers and employees alike to improve health and well-being. We look forward to the results of Ashoka's program, and to considering how to use this as a model for workplace wellness everywhere," Figliuzzi said.

Ashoka's strong 600-member global health innovation network includes Nalini Saligram, Chief Executive Officer and founder of Arogya World, another Cigna Foundation World of Difference partner. [Arogya World](#) is dedicated to preventing chronic disease, with a strong emphasis on healthy workplaces in India.



About the Cigna Foundation

The Cigna Foundation, founded in 1962, is a private foundation funded by contributions from Cigna Corporation (NYSE: CI) and its subsidiaries. The Cigna Foundation supports organizations sharing its commitment to enhancing the health of individuals and families, and the well-being of their communities, with a special focus on those communities where Cigna employees live and work.

Cigna.com/Foundation

About workplace wellness World of Difference grants

The Cigna Foundation is seeking grant sponsorship, and thought leadership opportunities related to workplace health and wellness in the Middle East, India, Africa, Europe, and China. It's also looking for non-profit partners who can use funding, as well as the knowledge and expertise of Cigna professionals and volunteers, to support their programs.

About Ashoka

Ashoka is the largest network of social entrepreneurs worldwide, with nearly 3,000 Ashoka fellows in 70 countries putting their system-changing ideas into practice on a global scale. Founded by Bill Drayton in 1980, Ashoka provides start-up financing, professional support services, and connections to a global network across the business and social sectors, and a platform for people dedicated to changing the world. Ashoka.org



NEW CONNECT AND FOCUSIN PLANS

On January 1, 2016, coverage began for Individual and Family Plan (IFP) customers enrolled in the Connect and Focusin plans. These are new, cost-effective options for accessing quality health care on- and off-Marketplace in selected areas. They feature market-specific networks composed of a smaller number of participating physicians, hospitals, and specialists.

Enrolled customers use only the health care professionals who participate in the network aligned with their plan, including primary care physicians (PCPs) and specialists. For most markets, the majority of PCPs who have been identified to participate in the networks aligned with the plans are part of a Cigna Collaborative Care arrangement.

Referrals

In most markets,* participating **PCPs** are responsible for providing customers enrolled in these plans with referrals to physicians, hospitals, specialists, and other health care professionals who participate in the aligned network. Participating **specialists** are responsible for confirming referrals, either by relying on a PCP's written referral that a customer presents to the office, or by

calling Cigna Customer Service. When calling about a referral, choose the prompt for "specialist referral."

There are multiple options for submitting referrals to Cigna:

- Electronic data interchange (EDI): 278 Health Care Services Review Information transaction
- Phone: 1.866.494.2111
- Fax: 1.866.873.8279. Providers can obtain a referral form on the Cigna for Health Care Professionals website (CignaforHCP.com) > Resources > Forms Center > [Medical Forms](#).
- Mail: Cigna, Attn: Precertification and Referral Department, 2nd Floor, 1640 Dallas Parkway, Plano, TX 75093

Questions?

If you are a health care professional in one of the markets where the Connect or Focusin plans are offered, you should have received a notification letter in November 2015. It contained information about whether you were selected to participate in the network aligned with the plan, as well as additional plan details for those who were selected, including images of sample ID cards. You can also obtain additional information by calling Cigna Customer Service at 1.866.494.2111.

Connect and Focusin plans at a glance

CONNECT PLAN						
MARKET	ON OR OFF MARKETPLACE	NETWORK NAME	PCP REQUIRED?	REFERRAL REQUIRED?	AWAY FROM HOME CARE?	OUT OF NETWORK BENEFITS?
Arizona – Maricopa County			Yes	Yes		
Colorado – Denver – Metro and Boulder			Yes	Yes		
Missouri – St. Louis**	Both	Connect Network	Encouraged	Encouraged	No	No
Tennessee – Nashville and Tri-Cities			Yes	Yes		
Texas – Houston			Yes	Yes		

FOCUSIN PLAN						
MARKET	ON OR OFF MARKETPLACE	NETWORK NAME	PCP REQUIRED?	REFERRAL REQUIRED?	AWAY FROM HOME CARE?	OUT OF NETWORK BENEFITS?
Texas – Dallas	Both	Focus Network	Encouraged	Encouraged	No	No

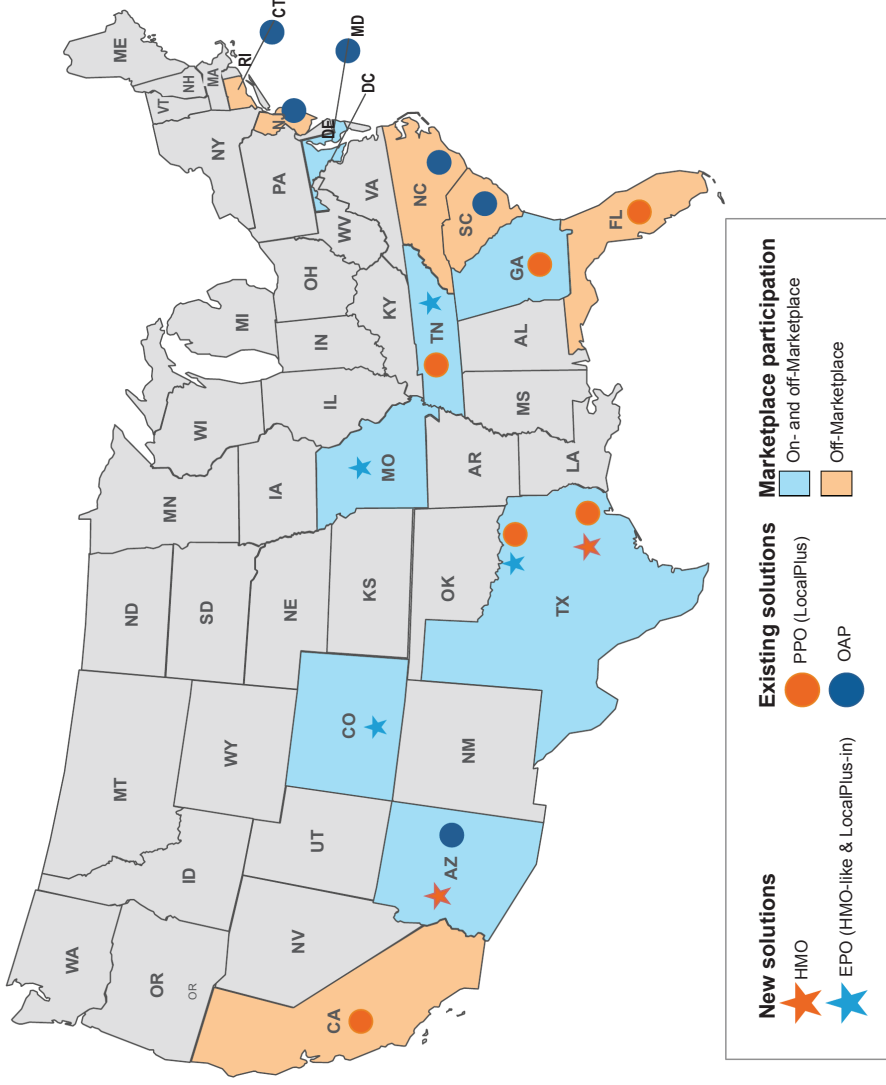
* In the Dallas and St. Louis markets, PCPs are not required to make referrals. We strongly encourage it though, as services provided by health care professionals who do not participate in the network aligned with the customer's Connect or Focusin plan are generally not covered and will need to be paid by the customer.

** The Connect plan replaces the LocalPlus® plan in St. Louis.

More Marketplace solutions

In addition to the new Connect and FocusIn plans, Cigna continues to offer other IFP solutions both on- and off-Marketplace for 2016.

STATE	ON OR OFF MARKETPLACE	NETWORK NAME	PLAN NAME
Arizona – statewide	Off	Open Access Plus	Access "
California – Northern and Southern, San Diego	Off	LocalPlus®	Access, HealthFlex, HealthSavings
Colorado – Denver Metro "	Both	LocalPlus IN "	Vantage®
Connecticut – statewide	Off	Open Access Plus	Open Access Plus
Florida – South Florida, Orlando, Tampa	Off	LocalPlus IN "	Vantage
Georgia – East Atlanta, Macon, Rome	Both	LocalPlus	HealthSavings
North Carolina – statewide "	Off	LocalPlus	HealthFlex, HealthSavings
North Carolina – statewide "	Off	Open Access Plus	Access
Maryland – statewide	Both	Open Access Plus	Access "
South Carolina – statewide "	Off	Open Access Plus	Access "
Tennessee – Memphis "	Both	LocalPlus "	HealthFlex, HealthSavings
Texas – Dallas, Austin "	Off	LocalPlus "	HealthSavings, Vantage
Texas – Houston	Off	LocalPlus "	HealthSavings, Vantage "



If you have any questions about the plans we offer on- and off-Marketplace, call Cigna Customer Service at 1.866.494.2111, or visit the Healthcare.gov website.

PNEUMONIA VACCINATION RECOMMENDATIONS FOR OLDER ADULTS

In September 2014, the Centers for Disease Control and Prevention (CDC) issued an update on pneumococcal vaccinations for adults age 65 and older. It now recommends that these individuals be vaccinated with both Plevnar 13® (Pneumococcal 13-valent Conjugate Vaccine [Diphtheria CRM197 Protein])¹ and the Pneumovax 23® (Pneumococcal VaccinePolyvalent), based on the findings of the Advisory Committee on Immunization Practices (ACIP).²

To address this serious health problem in the over-65 population, Cigna supports the CDC recommendations.

CDC PNEUMOCOCCAL VACCINATION RECOMMENDATIONS FOR ADULTS AGE 65 AND OLDER			
Adults age 65 and older with no vaccine history	Adults age 65 and over previously vaccinated with Pneumovax 23 at age 65 or older	Adults age 65 and older previously vaccinated with Pneumovax 23 before age 65	
Administer Plevnar 13 first	Administer Plevnar 13 at least one year after the most recent dose of Pneumovax 23	Administer Plevnar 13 at least one year after the most recent dose of Pneumovax 23	
6 to 12 months later ³ administer dose of Pneumovax 23 ⁴ (or during the next visit)		6 to 12 months later, ³ administer subsequent dose of Pneumovax 23† (no sooner than five years after the most recent dose of Pneumovax 23)	

Plevnar 13 is indicated for active immunization for the prevention of disease caused by *Streptococcus pneumoniae* serotypes 1,3,4,5,6A,6B,7F,9V,14,18C,19A, and 23F. Its effectiveness is unknown when administered less than five years after Pneumovax 23 is given.

Additional information

➤ For further information, view the CDC article at CDC.gov/mmwr/preview/mmwrhtml/mm6337a4.htm.



- 1. Plevnar 13 (Pneumococcal 13-valent Conjugate Vaccine [Diphtheria CRM197 Protein]) prescribing Information Wyeth Pharmaceuticals Inc., 2014.
- 2. Tomczyk S, Bennett NM, Sroekker C, et al. Centers for Disease Control and Prevention (CDC). "Use of 13-valent pneumococcal conjugate vaccine and 23-valent pneumococcal polysaccharide vaccine among adults aged ≥65 years: Recommendations of the Advisory Committee on Immunization Practices (ACIP)." *Morbidity and Mortality Weekly Report* 2014; 63(37):822-825.
- 3. Minimum interval between sequential administration of Plevnar 13 and Pneumovax 23 is eight weeks. Pneumovax 23 can be given later than 6 to 12 months after Plevnar 13 if this window is missed.
- 4. The two vaccines (Plevnar 13 and Pneumovax 23) should not be coadministered.



TAKE A TOUR OF OUR ENHANCED DRUG LIST SEARCH TOOL

We've made several enhancements to the drug list search tool on the Cigna for Health Care Professionals website (CignaforHCP.com). Now you can more easily view patient profiles, search specific drug lists for prescription coverage, and identify the associated cost share based on plan benefits.

The enhancements deliver a user-friendly experience that puts information at your fingertips.

- Get accurate and up-to-date drug list information with real-time searches.
- Search all of our major drug lists, including Standard 3-Tier, Value 3-Tier, Performance 3-Tier, Advantage 3-Tier, and Legacy 3-Tier lists.
- Search lists by class and type to view all the covered drugs for a specific condition.
- Use type-ahead functionality and pop-ups to select a drug from the suggestion box.
- Check acronym definitions in the "Notes" section.



You can access the drug list search tool by logging in to CignaforHCP.com > Resources > Pharmacy Resources > Cigna Prescription Drug Lists.

This tool is also available for our customers to use on myCigna.com and Cigna.com.



CALIFORNIA LANGUAGE ASSISTANCE LAW



California law requires health plans to provide Language Assistance Program (LAP) services to eligible customers with limited English proficiency (LEP). To support this requirement, Cigna provides language assistance services for eligible Cigna participants, including those covered by our California health maintenance organization (HMO), Network Open Access, and Network Point of Service (POS) plans, as well as individuals covered under a California-situated PPO plan.

Cigna LAP-eligible customers are entitled to the following free services:

- Spanish or Traditional Chinese translation of documents considered vital according to California law.
- Interpreter services at each point of contact, such as at a health care professional's office or when calling customer service.
- Notification of rights to LAP services.

California capitated provider groups are responsible for:

- Inserting or including the LAP notification to English vital documents sent to covered HMO individuals.
- Educating health care professionals that they must offer Cigna's free telephone interpreter services by calling 1.800.806.2059 to support their LEP patients with Cigna coverage. Even if a health care professional or office staff speaks in the patient's language, a telephone interpreter must always be offered. If the patient refuses to use a trained interpreter, it must be documented in their medical record.

You can obtain additional information in several ways

- Refer to the California edition of the Cigna Reference Guide for physicians, hospitals, ancillaries, and other health care professionals by logging in to Cigna for Health Care Professionals website (CignaforHCP.com) > Resources > Reference Guides > Medical Reference Guide > Health Care Professional Reference Guides).
- Download an overview presentation or informational flyer by visiting the Cigna website (Cigna.com) > Health Care Professionals > Resources for Health Care Professionals > Clinical Payment and Reimbursement Policies > Claim Policies, Procedures and Guidelines > California Language Assistance Program > [Overview Presentation](#) or [Cigna Medical Requirements](#).
- Contact your Experience Manager



Racial and linguistic diversity at a glance

Cigna collects language preference, race, and ethnicity data for California-eligible customers. Language Cigna uses California demographic data as a proxy for our customer base until we have a statistically valid number of customer language preference records. The following data is currently available:

- 44% of the California population (over five years old) speak a language other than English.*
- Spanish (29%), Cantonese and Mandarin (3%) are the top three non-English languages spoken in California.*

* U.S. Census Bureau, 2010-2015 5-year American Community Survey.

Racial and ethnic composition

The data below is an indirect estimation of Cigna's California customers. The figures were derived from a methodology that uses a combination of census geocoding and surname recognition.

- 49% Caucasian (
- 23% Hispanic (
- 21% Asian (
- 3% African American (
- 3% Other (





FINALLY, AN APP THAT UNDERSTANDS YOUR PATIENTS – COACH BY CIGNA

About one in four people who are trying to turn around their health uses a website or mobile app to help them change their unhealthy behaviors, according to a 2014 Cigna national survey.* Yet, many report little or no progress toward reaching their goals.

The reason may be that too often, digitized health and fitness sites and apps that come from the health care industry are simply clinical and unengaging, while those that come from tech companies are all engagement, without the clinical expertise.

Coach by Cigna

Now there's a global health and fitness app – [Coach by Cigna](#) – with a winning combination of clinical muscle and customer engagement to help your patients reach their wellness goals.

First, the app will acquire a deep understanding of their wants and preferences through its unique introductory lateral assessment that they will take. Then, it will engage them with motivating health coaching. It can help your patients to achieve realistic progress incrementally, while rewarding and validating good results, as they develop and sustain healthy habits through clinically-endorsed activities.

Focuses on health concerns you see in your exam room

[Coach by Cigna](#) features more than 300 videos from a team of coaching experts in five integrated areas – nutrition, exercise, sleep, stress, and weight management. It goes beyond counting steps and calories, focusing on the health concerns you see in your exam room every day, such as sugar addiction, sleep deprivation, and poor stress management. Users can personalize their health goals, select

recommended programs, and track progress while being supported by the app's motivational messaging, health activities, and achievement badges, which help your patients record their successes.

Helps your patients establish healthy habits

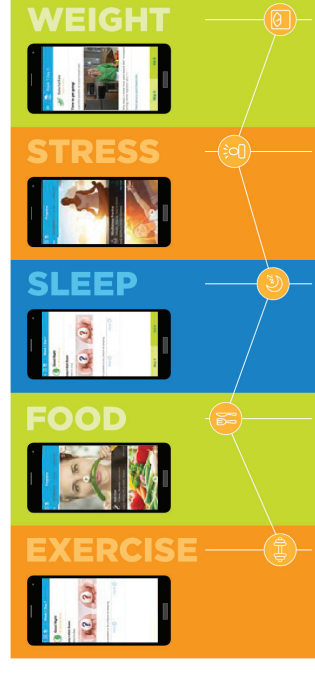
[Coach by Cigna](#) is designed to resonate with health care professionals like you, because it focuses on establishing habits to help patients manage key factors that contribute to health issues, including diabetes and high blood pressure. Even though you can't provide 24/7 wellness coaching support to every patient, [Coach by Cigna](#) can through mobile motivational messaging, progress tracking, and helpful health recommendations.

Global reach. Proven results.

By digitizing Cigna's health coaching experience, we've made coaching accessible to more than 600,000 international app users. In the first quarter of 2016, 85 percent** of those who started the app's introductory lateral assessment completed it. This high level of engagement reflects the value of the app's content to users.

Download the app today

[Coach by Cigna](#) is a free, four-star, user-rated app that is available in nine languages to Cigna customers and non-customers alike. While initially the app was developed specifically for Samsung's S-Health platform, it's now available for most mobile devices that have either the Apple iOS8 or the Android 4.4 operating system. It can be downloaded either at the App Store or Google Play.



Download the free app and test it out for yourself. Then recommend it to your patients who could benefit from this digital wellness guidance tool. Let [Coach by Cigna](#) be an extension of your exam room recommendations. To learn more, visit [Cigna.com/Coach](#), and watch a video tutorial in English or Spanish that highlights the app features.

* 2014 Benchmark Research Study – Health & Financial Well-Being: How Strong is the Link? Key insights into U.S. consumers' attitudes and actions. (<http://www.cigna.com/assets/docs/personal/2014-health-financial-well-being-how-strong-is-the-link.pdf>).

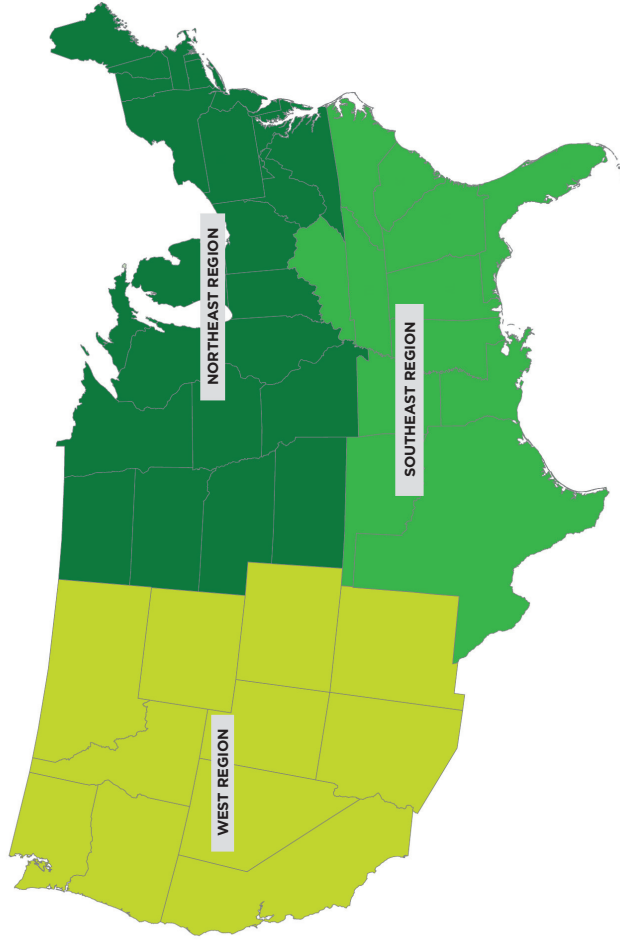
** Figure obtained from internal Cigna metrics for the Coach by Cigna app.



MARKET MEDICAL EXECUTIVES 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.

[CLICK ON YOUR REGION TO VIEW YOUR MME CONTACT INFORMATION](#)



NATIONAL

Nicholas Gettas, MD

Chief Medical Officer,

Cigna Regional Accounts

1.804.240.9935



and



Visit BetterHealthCareTogether.com to stay informed about our plans to form a health service company.

Reasons to call your MME

- Ask questions and obtain general information about our clinical policies and programs.
- Ask questions about your specific practice and utilization patterns.
- Report or request assistance with 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.





GO GREEN – GO ELECTRONIC

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

When you register, you will receive some correspondence electronically, such as *Network News*, while certain other communications 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 website and receive electronic updates, go to CignaforHCP.com and click “Register Now.”

CULTURAL COMPETENCY TRAINING AND RESOURCES

As the population in the United States continues to diversify, it's important to obtain a better understanding of culturally driven health care preferences. That's why Cigna has identified and created relevant cultural competency resources specifically for providers and office staff.

Relevant tool kits, articles, and videos are just a few clicks away. Don't forget to check out one of the most popular resources: CultureVision™. Gain insights on culturally relevant patient care for over 60 cultural communities, or take a cultural competency self-assessment to learn more about yourself.

Visit the Cultural Competency Training and Resources page of Cigna.com to learn more. There are two ways to navigate to this page:

Cigna.com > Health Care Professionals > Resources
> [Cultural Competency Training and Resources](http://Cigna.com/CulturalCompetencyTrainingandResources)

OR

CignaforHCP.com > Resources > Medical Resources > Doing Business with Cigna > [Cultural Competency Training and Resources](http://CignaforHCP.com/CulturalCompetencyTrainingandResources)

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 required 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 list of Cigna participating physicians and facilities, go to Cigna.com > Find a Doctor.

REFERENCE GUIDES

Cigna Reference Guides for participating physicians, hospitals, ancillaries, and other health care professionals contain many of our administrative guidelines and program requirements. The reference guides include information pertaining to participants with Cigna, GWH-Cigna, and “G” ID cards.

Access the guides

You can access the reference guides by logging in to CignaforHCP.com > Resources > Reference Guides > Medical Reference Guides > Health Care Professional Reference Guides. You must be a registered user to access this site. If you are not registered for the website, click on “Register Now.” If you prefer to receive a paper copy or CD-ROM, call **1.877.581.8912** to request one.



HAVE YOU MOVED RECENTLY? DID YOUR PHONE NUMBER CHANGE?

Check your listing in the Cigna directory

We want to be sure that Cigna customers have the right information they need to reach you when seeking medical care. We also want to accurately indicate whether you are accepting new patients. Please check your listing in our health care professional directory, including your office address, telephone number, and specialty. Go to Cigna.com > Health Care Professionals > [Provider Directory Updates and Changes](#).

If your information is not accurate or has changed, it's important to notify us – it's easy. Submit changes electronically using the online form available on the Cigna for Health Care Professionals website ([CignaforHCP.com](#)). After you log in, select Working with Cigna on your dashboard, and then choose the appropriate update link under Profile Information for Cigna Contracted Healthcare Physicians or Cigna Contracted Facilities and Other Health Care Providers. You will be directed to the online form to complete and submit. You may also submit your changes by email, fax, or mail.

Email: Intake_PDM@Cigna.com
Fax: 1.877.358.4301
Mail: Two College Park Dr.
 Hooksett, NH 03106



URGENT CARE FOR NONEMERGENCIES

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.com](#) > [Find a Doctor](#).

Letters to the editor

Thank you for reading *Network News*. We hope you find the articles to be informative, useful, and timely, and that you've explored our digital features that make it quick and easy to share and save articles of interest.

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

Cigna
 Attn: Health Care Professional Communications
 900 Cottage Grove Road, Routing B7NC
 Hartford, CT 06152

Access the archives

To access articles from previous issues of *Network News*, visit [Cigna.com](#) > Health Care Professionals > [Newsletters](#). Article topics are listed for each issue.

Together, all the wa[®]



All Cigna products and services are provided exclusively by or through operating subsidiaries of Cigna Corporation, including Cigna Health and Life Insurance Company, Connecticut General Life Insurance Company, Cigna Behavioral Health, Inc., and HMO or service company subsidiaries of Cigna Health Corporation. The Cigna name, logo, and other Cigna marks are owned by Cigna Intellectual Property, Inc. All models are used for illustrative purposes only.

The term "health care professional" is referred to in contracts as "provider." Use and distribution limited solely to authorized personnel.
 893390 04/16 THN-2016-XXX © 2016 Cigna. Some content provided under license.

