



University of Denver

YOUR RETIREE PLAN OPTIONS

Plan year: 2022



CIGNA MEDICARE ADVANTAGE



THE BENEFITS OF CIGNA MEDICARE ADVANTAGE PPO



Access

- Freedom to go to any doctor or hospital that participates in Medicare and accepts the plan
- Pay the same cost-share to see an in-network or out-of-network provider
- No referrals or PCPs required
- Telehealth services



Wellness and incentives

- Yearly health checkup
- Wellness incentives
- Reminders for recommended screenings



Integrated Rx coverage

- Save with low, predictable drug costs.
- National network of 65,000 pharmacies*
- One ID card and one customer service team



Extra benefits

- Silver&Fit fitness program
- Home Delivered Meals
- Discount programs



Information and support

- Dedicated care manager support for chronic illnesses
- Health Information Line
- myCigna.com
- Year-round health and wellness mailings



* Based on internal analysis of Cigna nationwide Medicare pharmacy network, <July 2021>.

FOCUS ON PREVENTIVE HEALTH AND WELLNESS

You're covered for yearly exams and other screenings

Comprehensive preventive care

Our yearly health checkup reviews every aspect of your overall health and well-being

Lowering risks

Right tests + right time = early detection

Wellness incentives

Earn gift cards for taking care of your health



AROUND THE CLOCK SUPPORT

Our online tools and resources provides you with information and support to help you manage your health. Anytime, day or night.

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

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

Before you enroll, visit our public website **CignaMedicare.com/group/MAresources**, where you can:

- Find a provider or network pharmacy.
- View plan information and other forms.



SUPPORTING THE WHOLE PERSON

Silver and Fit® fitness program

Home delivered meals

Healthy Rewards discount programs

Medical alert system discounts

Healthy Rewards is a discount program. Some Healthy Rewards programs are not available in all states and may be discontinued at any time. **A discount program is NOT insurance, and the customer must pay the entire discounted charge.** All goods, services and discounts offered through Healthy Rewards are provided by third parties who are solely responsible for their products, services and discounts.



The Silver&Fit Healthy Aging and Exercise program can help you get fit in the way that's most convenient for you.



Enjoy one, some, or all of the following at no cost to you:

- Access to 16,000+ participating fitness centers, including exercise classes, cycling, and yoga studios, with the ability to change fitness centers at any time.
- Digital workout videos featuring daily live workout classes plus a library of 1,500+ videos perfect for all fitness levels, including yoga, strength, Pilates, walking, cardio and more.
- Home-based fitness options include Garmin® or Fitbit® wearable fitness tracker kits*, yoga kits with a mat and hand towel, and strength kits with exercise bands and dumbbells.
- Healthy Aging Coaches can help you address your fitness and nutrition goals, and provide guidance in other lifestyle areas during scheduled phone sessions.

Note: The benefit information provided here is a brief summary, not a comprehensive description of available benefits. Subject to change. Fitness centers and boutique studios can include coed and gender-specific fitness centers and exercise centers. Fitness centers, amenities, and classes vary by location. *The Garmin or Fitbit promotional code cannot be used in combination with any other promotion on the Garmin or Fitbit website. Once selected, Stay Fit Kits cannot be exchanged.



HOME DELIVERED MEALS

Customers can receive home delivered meals to help make their transition more comfortable after an inpatient hospital or skilled nursing facility stay.



- This benefit provides 14 nutritious meals delivered to their home.
- Customers are eligible to receive this benefit for up to 3* discharges per year.
- After being discharged from the hospital or skilled nursing facility, Cigna's meal provider will contact the customer to schedule delivery.
- Eligible customers are contacted automatically after being discharged; they do not have to take action to initiate this benefit.

*Releases from an emergency department, observation stay or outpatient visit are not eligible. Some benefits may vary by plan. Restrictions may apply.



CIGNA TRUE CHOICE MEDICARE (PPO) BENEFITS

Benefits	In-network	Out-of-Network
Annual deductible	\$0	\$0
Plan out-of-pocket maximum	\$2,500	\$2,500
Doctor or specialist office visit	\$15 / \$25 copayment	\$15 / \$25 copayment
Inpatient medical hospital care	\$300 copayment	\$300 copayment
Emergency / urgent care	\$65 / \$15 copayment	\$65 / \$15 copayment
Diagnostic tests	\$0 EKG & Colorectal Screenings All other \$100 copayment	\$0 EKG & Colorectal Screenings All other \$100 copayment
Lab services	\$0 copayment	\$0 copayment
Preventive care	\$0 copayment for annual wellness exam \$0 copayment for all preventive services covered by original Medicare	\$0 copayment for annual wellness exam \$0 copayment for all preventive services covered by original Medicare

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OUR MEDICARE ADVANTAGE PLAN OFFERS ADDITIONAL BENEFITS

Supplemental benefits	In-network	Out-of-Network
Emergency worldwide coverage	\$65 copay \$50,000 annual benefit maximum	\$65 copay \$50,000 annual benefit maximum
Routine eye exams and hardware	\$0 copay for 1 routine exam per year Contact lenses: unlimited Eyeglass lenses: 1 per year Eyeglass frames: 1 per year \$200 annual eyewear limit	\$0 copay for 1 routine exam per year Contact lenses: unlimited Eyeglass lenses: 1 per year Eyeglass frames: 1 per year \$200 annual eyewear limit
Routine hearing exams	\$0 copay for 1 fitting exam per year \$500 benefit per ear for hearing aids (all types) per 3 years	\$0 copay for 1 fitting exam per year \$500 benefit per ear for hearing aids (all types) per 3 years

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YOUR DRUG LIST (FORMULARY)

Your Medicare Advantage plan uses a drug list with four cost-sharing tiers, or coverage levels.

Tier 1 Preferred Generic Drugs

Tier 2 Preferred Brand Drugs

Tier 3 Non-Preferred Generic & Brand Drugs

Tier 4 Specialty Drugs Generic & Brand Drugs

Your drug list includes coverage for most of the commonly used drugs by people in Medicare plans.

Tier Labeling: The Rx Plan is not always able to keep all generic medications in the Preferred Generic (Tier 1) drug tiers. Some generic medications may be in the Preferred Brand (Tier 2) and Non-Preferred Brand/Generic (Tier 3) or Specialty Drug (Tier 4) tiers. Keep in mind that the name of the tier is just a description of the majority of the drugs in the tier. It does not mean that there are only generic or only brand drugs in that tier. Cost share shown is for all drugs in the Tier unless otherwise noted.



YOUR RX COVERAGE

1	Your deductible	\$0
2	What you pay for initial coverage	Generic drugs: \$5 Preferred brand drugs: \$25 Non-preferred drugs: \$40 Specialty drugs: \$50
3	What you pay In the coverage gap	Once you reach \$4,430 in total drug costs you move into the Coverage Gap stage. You'll pay: Generic drugs: \$5 Preferred brand drugs: 25% Non-preferred drugs: 25% Specialty drugs: 25%
4	Catastrophic coverage	Once you reach the \$7,050 true out-of-pocket limit, you will pay the greater of 5% coinsurance or \$3.95 for generic drugs or \$9.85 for brand drugs for the remainder of the year.

This information is not a complete description of benefits. Contact the plan for more information. Limitations, copayments, and restrictions may apply. Benefits, premiums, and copays/coinsurance may change on January 1 of each year. You must continue to pay your Medicare Part B premium.



SAVE A TRIP WITH HOME DELIVERY



Order, manage and track medications on your phone or online



Standard shipping at **no extra cost**¹



Fill up to a **90-day supply** at one time



Automatic refills or refill reminders so you don't miss a dose



Helpful pharmacists available 24/7



Flexible payment options

Express Scripts Pharmacy specializes in home delivery and is available to all Cigna Medicare customers. To get started, have your Cigna ID card and medication list ready and call Express Scripts Pharmacy at **1-877-860-0982 (TTY 711)**. Or go online and set up your profile at **myCigna.com**.

Express Scripts Pharmacy is a Cigna company. Other pharmacies are available in our network.

1. Standard shipping costs are included as part of your prescription plan.

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HOW YOUR MEDICARE PART D PLAN WORKS

These types of medications or vaccines are usually covered by Part B, and will be paid under your medical plan vs. your Part D plan.

- Antigens (allergy injections)
- Diabetic testing supplies
- Insulin pumps and the insulin used in the pumps
- Hepatitis B vaccines
- Influenza (flu) vaccine
- Pneumonia vaccine
- COVID-19 vaccine
- Infusible/injectable medications that are administered at home that require the use of an infusion pump
- Other injectables when injectable or intravenous medications are provided and administered by a doctor
- Inhaled nebulizer medications
- Immunosuppressive medications

If you are unsure how your drug will be covered, call Cigna Customer Service and speak to a representative.

FDA-authorized COVID -19 vaccines will be covered under your medical plan (or Medicare Part B) as a preventive service, and will be available at no additional cost to you. Visit our COVID-19 Resource Center at [Cigna.com/COVIDMA](https://www.cigna.com/COVIDMA) for the most up-to-date information on vaccines, care and coverage.



TRANSITIONAL BENEFITS

Cigna helps save you money by providing access to cost-effective generic drug equivalents to brand name drugs.

If a generic equivalent is available, the brand drug may not be covered.

Others may be subject to specific rules before such as step therapy or prior authorization.

If a drug is **not covered or has limited coverage** by Cigna, talk to your doctor about alternatives. If none are available, your doctor can request an exception.

While you are discussing alternatives with your doctor, **Cigna will cover up to a one-month supply** of the drug anytime within the first 90 days you are in the plan.

Tier Labeling: The Rx Plan is not always able to keep all generic medications in the Preferred Generic (Tier 1) drug tiers. Some generic medications may be in the Preferred Brand (Tier 2) and Non-Preferred Brand/Generic (Tier 3) or Specialty Drug (Tier 4) tiers. Keep in mind that the name of the tier is just a description of the majority of the drugs in the tier. It does not mean that there are only generic or only brand drugs in that tier. Cost share shown is for all drugs in the Tier unless otherwise noted.





IMPORTANT INFORMATION



ENROLLMENT INFORMATION

**Extra help is available for
people with limited incomes.**

You may be able to get Extra Help to pay for your prescription drug premiums and costs.

To see if you qualify for Extra Help, call:

Medicare

800-MEDICARE (800-633-4227) | TTY users call: 877-486-2048

24 hours a day, 7 days a week

Social Security Administration

800-772-1213 | TTY users call: 800-325-0778

7AM – 7PM, Monday - Friday

Your State Medicaid Office





WHY CIGNA



WHOLE PERSON HEALTH, RETIREE FOCUSED

It's in our DNA

Affordable

Improved outcomes
and lower costs

Predictable

Focus on preventive
care and proactive
clinical support

Simple

Easy to use plans




YOUR ID CARD

Cigna True Choice Medicare (PPO)

One ID card to access your medical and prescription drug care.

Show your card whenever you go to a doctor, hospital or facility for medical care and when you go to the pharmacy to pick up prescriptions.

	<Plan Name> <Plan Type> <Employer Name>	
Name	<Customer Full Name>	<Contract/PBP/segment>
ID	<Customer ID>	
Health Plan	(80840)	MedicareRx [Prescription Drug Coverage X]
[Effective Date	<Effective Date>]	
[No PCP Required]		[RxBIN <XXXXXXX>]
[No Referral Required]		[RxPCN <XXXXXXX>]
COPAYS (IN / OON)		[RxGRP <XXXXXXX>]
PCP	<\$xx>	Specialist <\$xx>
Emergency	<\$xx>	Urgent Care <\$xx>



WE'RE HERE TO HELP

Customer Service you can count on

- Our customer service center is located in the United States.
- The customer service team provide support for all your enrollment, claim, and service needs.



Cigna Medicare Advantage Customer Service

<888-281-7867> (TTY 711)

**8AM to 8PM local time | Monday – Friday
7 days a week (Oct. 1 through Mar. 31)**



For costs and details of coverage, see your enrollment materials. The information in this presentation summarizes the highlights of your plan. For a complete list of both covered and not covered services, including benefits required by your state, see your employer's group insurance certificate, summary plan description or evidence of coverage – the official plan documents. If there are any differences between the information in this presentation and the plan documents, the information in the plan documents takes precedence.

[Out-of-network/non-contracted providers are under no obligation to treat Plan members, except in emergency situations. Please call our customer service number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services.]

All Cigna products and services are provided exclusively by or through operating subsidiaries of Cigna Corporation, including Cigna Health and Life Insurance Company (CHLIC), Connecticut General Life Insurance Company (CGLIC), Cigna HealthCare of South Carolina, Inc., Cigna HealthCare of North Carolina, Inc., Cigna HealthCare of Georgia, Inc., Cigna HealthCare of Arizona, Inc., Cigna HealthCare of St. Louis, Inc., Cigna HealthCare of Colorado, Inc., Cigna HealthCare of California, Inc., HealthSpring Life & Health Insurance Company, Inc., HealthSpring of Tennessee, Inc., HealthSpring of Alabama, Inc., HealthSpring of Florida, Inc., Bravo Health Mid-Atlantic, Inc., and Bravo Health Pennsylvania, Inc. The Cigna name, logos, and other Cigna marks are owned by Cigna Intellectual Property, Inc. Cigna is contracted with Medicare for PDP plans, HMO and PPO plans in select states, and with select State Medicaid programs. Enrollment in Cigna depends on contract renewal.

Express Scripts Pharmacy is a trademark of Express Scripts Strategic Development, Inc. Other pharmacies are available in the network.

Product availability may vary by location and plan type and is subject to change. All health plans and insurance policies have exclusions and limitations. For costs and complete details of coverage, contact your Cigna representative. Limitations, copayments, and restrictions may apply.

Benefits, premiums and/or copayments/co-insurance may change on January 1 of each year.

[Cigna Medicare Surround is an employer-sponsored group retiree medical plan that supplements Medicare. It is NOT a standardized Medicare Supplement (Medigap) plan in most states and is NOT offered under a contract with the federal government. CHLIC policy forms: OK – HP-POL37 (Surround), TN - HP-POL43; OR – HP-POL38 02-13.]

