Since 2007, MVP formed an alliance with Cigna to allow MVP’s upstate New York provider network to provide in-network care to Cigna members.

Provider contracts have been amended to allow MVP providers to see Cigna customers at in-network rates. Your MVP contract fee schedule will apply for covered services rendered to eligible Cigna members.

Cigna members will continue to use the Cigna network for the following services:

- Behavioral Health
- Dental Care
- Pharmacy
- Routine Vision Services
- Transplants

Please note:
As of March 31, 2016, Cigna members are able to access the MVP optometry network for non-routine vision services.

For outpatient lab services, MVP providers should refer Cigna members to Quest, LabCorp or MVP-participating hospitals. A copy of a sample Cigna ID card is shown below.

Cigna members seeking health care services should present this or a similar Cigna ID card to you at every visit.

Contacting Cigna to confirm coverage, obtain precertification for specific services and for claim inquires:

Where to Call
Cigna has one number to call to confirm eligibility, obtain benefit coverage information, precertification requirements, or for any claim submission or coverage questions. Please contact Cigna at 1-800-Cigna24 (244-6224).

Over→
Use Cigna’s Website
Cigna also offers online tools to obtain answers to these potential questions, and more. Please visit www.cignaforhcp.com to view the tools that Cigna offers to providers treating Cigna members. An online demo is available for you to see how to register and use the website.

Where to Submit Claims for Cigna Members
Please use the following claims address for paper claims submission:

Cigna
P.O. Box 182223
Chattanooga, TN 37422-7233

Receiving payment from Cigna
You will receive payment from Cigna for covered services rendered to Cigna members, provided all precertification and claim requirements are met. Your MVP reimbursement schedule will be used to process claim payment for these services. Please note that when payment is received, you cannot bill the Cigna member for an additional amount.

You and the member will receive an Explanation of Medical Benefit from Cigna that will have the following note on it in such instances:

EOP CODE 1349 - “Thank you for using the MVP Health Care Network. This represents your savings, so you are not required to pay this amount. This provider is prohibited from billing the patient for the difference. If you have already paid the full amount, please request reimbursement from your provider.”

Provider Advocacy
In the unlikely event that you or your office staff have been unable to resolve a claim payment issue with Cigna, we are happy to help. Please contact MVP’s Provider Claim Service Center at 1-800-684-9286. We’ll investigate the situation and offer assistance whenever possible.
Cigna’s Other Alliances
In addition to Cigna’s alliance with MVP, Cigna also has similar alliances with Tufts Health Plan, HealthPartners, and Health Alliance Plan.

Members of these plans will have the Cigna logo on their card (and in most cases the MVP logo will also be printed), and should be treated no differently than MVP and Cigna members.

If a member of one of these health plans presents for services with an MVP provider, they can contact that health plan directly by calling the toll-free number on the back of the member’s ID card to verify benefits and eligibility, and submit claims directly to that health plan either electronically or on paper to the claim address found on the back of the ID card.
I have a patient with a Cigna ID card that doesn’t have the MVP logo on it. How can I identify whether or not I can treat that member under the Alliance?

ID cards include the MVP logo when Cigna members have access to the MVP network and when the subscriber on the policy resides within the MVP service area.

ID cards may not include the MVP logo when Cigna members have access to the MVP network and the subscriber on the policy resides outside of the MVP service area (e.g., a subscriber may live in San Diego, but has a dependent student attending college in Syracuse).

Therefore, the key is that all Cigna members who have access to the MVP network will have either “Cigna PPO,” “Cigna OAP,” or “Cigna Open Access Plus” printed on their ID cards.

Providers should always verify benefits and eligibility before treating either a Cigna or MVP member.

MVP Members: www.mvphealthcare.com
Cigna Members: www.CignaforHCP.com

Are there any services that are excluded from the Alliance, and if so what does it mean for MVP-participating providers?

Routine vision services, transplant services, and behavioral health services are not covered under MVP’s alliance with Cigna. For more information about these services, please contact Cigna by calling the phone number listed on the back of the member’s ID card.

- Routine vision benefits for Cigna members are administered by VSP.
- Transplant benefits for Cigna members are administered by Cigna LifeSOURCE.
- Behavioral Health benefits for Cigna members are administered by Cigna Behavioral Health (“CBH”).
Frequently Asked Questions for MVP National Alliance with Cigna (continued)

Q: How do providers identify that they are part of the Alliance when using Cigna’s website?

A: Providers may verify their network status for Cigna members by using Cigna’s directory at CignaforHCP.com. Selecting the member’s product will ensure accurate results.

Q: I need to submit an appeal for a Cigna member. Where do I send it?

A: If you need to submit an appeal related to an adverse determination rendered by Cigna, please submit the appeal in accordance with the instructions provided in the adverse determination letter from Cigna.

Q: What policies (administrative/medical/precertification) should MVP-participating providers follow when treating Cigna members?

A: Coverage criteria & precertification requirements follow Cigna guidelines, while administrative requirements follow MVP guidelines.

Q: What counties in Upstate New York can Cigna members access the MVP participating provider network?

A: Cigna members can access MVP participating providers in the following New York counties, which are shaded in red on the map found on the following page. Cigna members must use providers contracted directly with Cigna in the counties shaded in green and orange on the map found on the following page.

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