



## How to Use Your Coverage

### Medical Claims

1. **Choose your provider** – You receive better benefits based on discounted charges when you choose a Preferred Provider from CIGNA’s Open Access Plan (OAP) network. To look up a specific provider or obtain a list of preferred providers, please visit [www.cigna.com](http://www.cigna.com) or call 1-800-244-6224.
2. **Make the appointment** – When asked, your insurance provider is CIGNA.
3. **Bring your ID card** to the provider’s office/facility. If you have lost your ID card or have not received one, print a temporary ID card from [myCigna.com](http://myCigna.com) or use the myCigna mobile app.

#### Looking up Preferred Providers:

- Go to [www.cigna.com](http://www.cigna.com)
- Click on ‘Find a Doctor’
- Click “Select a Plan for your search”
- Select “Open Access Plus, OA Plus, Choice Fund Plus” plan
- Enter search criteria
- Narrow your search along left side of results page

**Preferred Provider Network:** CIGNA OAP  
**Group #:** 3338030  
**Claims Processor/Administrator:** CIGNA  
**Member ID #:** Your Social Security Number

4. The provider’s office will probably want to **verify your eligibility and benefits**. They can do this by contacting CIGNA customer service at 1-800-244-6224.

#### Why use a Preferred Provider?

- Preferred provider fees are discounted
- Benefit level is higher (80% vs. 60%)
- Preferred providers will request all necessary prior authorizations on your behalf
- Preferred providers are obligated to bill insurance on behalf of the covered member

Non-network providers are not obligated to bill insurance first and may require you to pay upfront. If billed directly, ask for a claim form to submit for reimbursement. Medical claims should be sent to:

**The Corps Network Claims**  
**CIGNA**  
**PO BOX 182223**  
**Chattanooga, TN 37422-7223**

#### Prior Authorization for Medical

Some procedures, and all inpatient admissions, must be authorized with CIGNA before they will be covered. If you use a Preferred Provider, the provider will handle the prior authorization for you. A partial list of outpatient procedures that require prior authorization includes:

- Certain outpatient surgeries
- Advanced Radiology such as MRI, CAT and PET scans
- Durable medical equipment
- Speech therapy
- Diagnostic cardiology
- Radiation therapy

### Prescription Drug Claims

Fill your prescription at a CIGNA preferred pharmacy to minimize your out of pocket expenses. Prescriptions are subject to the deductible and then covered by the plan at 80% if you use a CIGNA preferred pharmacy. You will pay your co-insurance at the time you fill your prescription (after the deductible is met) and the plan will process the balance of the claim.

The plan requires prior authorization for some prescription drugs. Ask your pharmacist or contact CIGNA at 1-800-244-6224.



## Online Resources

### [myCigna.com](#)

Register on myCigna.com after your coverage effective date. The site is completely personalized for you, secure and it's easy to quickly find exactly what you're looking for. Resources available on the site include:

- Find doctors, pharmacies and hospitals in the CIGNA network
- Manage and track claims
- Print a temporary ID card
- Verify coverage details
- Estimate medical costs and prescription tool
- Compare providers/quality and efficiency ratings

#### *Health and Wellness*

- Confidential online health assessment
- Interactive library of health conditions, first aid, wellness and more
- Cigna Health Rewards Discounts – Weight management, nutrition, fitness, hearing and more

#### **Register on my Cigna.com**

- [myCigna.com>Learn How to Register](#)

#### **Take the Tour**

- [myCigna.com>Site Benefits](#)

#### **myCigna Mobile App**

Download the app to your smartphone to access information on the move. Look up providers, access ID cards, view claims, research drug information and store important contacts.

### [Accessing Relation's Website](#)

Relation Insurance Services' website houses benefits information and other helpful documents. The site provides:

- Benefit Summary
- Forms and Resources
- Online Tutorial

#### **Online Tutorial**

The online tutorial provides a clear explanation of how to use The Corps Network Plan. It can be displayed by a program at orientation or accessed any time on Relation's website.

#### *To log in:*

1. Go to <http://4studenthealth.relationinsurance.com>
2. Locate "Start Here"
3. Select "The Corps Network" from the School/Organization drop down box
4. Select "TCN Health Plan for Members" from the "Select Your Plan" drop down box



### [24 Hour Nurseline](#)

Cigna provides a health information line 24 hours a day, 7 days a week. When you dial **800-564-9286**, you will be connected with a nurse who is ready to help answer your health questions. It can be a fever in the middle of the night or a question about a popular medication.



## Corpsmember Health Care Insurance Plan

September 1, 2018 to August 31, 2019

Medical Underwritten by Cigna  
AD&D Underwritten by Gerber



Medical Group Number: 3338030

	Cigna "Open Access Plus" Preferred Provider	Out-of-Network
<b>Deductible</b>	\$175 per Plan Year*	
<b>Out of Pocket Maximum</b>	\$2,750 (including deductible)	
<b>Benefit Maximum</b>	Unlimited	
<b>Hospital</b>	<b>Prior Authorization Required for All Inpatient Admissions</b>	
Room & Board	80%	60%
Other Hospital Services	80%	60%
Emergency Room	\$100 co-pay per visit, deductible applies, then covered at 80%	
<b>Professional Services</b>		
Office	80%	60%
Urgent Care	\$20 co-pay; deductible applies, then covered at 80%	\$20 co-pay; deductible applies, then covered at 80%
Surgery	80%	60%
Diagnostic Lab & X-ray	80%	60%
Allergy Injections	80%	60%
<b>Preventive Care</b>		
Routine Care (including Preventive screenings)	100% (deductible waived)	60%
Mammogram/Pap Smear	100% (deductible waived)	60%
<b>Outpatient Rehabilitation</b>	<b>20 visits per Plan Year</b>	
(Includes Physical, Speech, Occupational, Cardiac Therapies and Chiropractic Care)	80%	60%
<b>Mental Health</b>		
Inpatient	80%	60%
Outpatient	80%	60%
<b>Chemical Dependency</b>		
Detoxification		
Inpatient	80%	60%
Outpatient	80%	60%
<b>Ambulance</b>	80%	80%
<b>Prescription Drugs (including oral contraceptives)</b>	<b>Prior Authorization Required for Some Prescriptions</b>	
	Co-insurance is paid at the pharmacy	
	80%	60%
<b>Durable Medical Equipment</b>	80%	60%
<b>AD&amp;D (Gerber)</b>	\$10,000	
<b>Rate (Per Corpsmember Per Month)</b>	\$304.25**	

*All benefits are subject to deductible and coinsurance unless otherwise specified.*

\* Plan Year means September 1<sup>st</sup> to August 31. Note: If you meet your deductible in June, July or August, that amount will carry forward to begin satisfying the deductible that resets on September 1<sup>st</sup>.

\*\*The health plan premium is paid in full for corpsmembers by their program.

**CIGNA requires prior authorization for all inpatient hospital admissions, some outpatient procedures and certain prescription drugs.**