



SHBP MEDICARE ADVANTAGE PLANS INFORMATION TO SHARE WITH YOUR PROVIDER

The State Health Benefit Plan (SHBP) offers a Medicare Advantage Private Fee-for-Service (PFFS) plan to eligible retirees across the country. These plans are authorized by the Centers for Medicare and Medicaid Services (CMS), with both CIGNA HealthCare (CIGNA) and UnitedHealthcare (United) as contractors with CMS to provide PFFS plans. These plans are customized for SHBP and should not be confused with other Individual Medicare Advantage Plans offered on the market. The SHBP Medicare Advantage PFFS Plans are:

- CIGNA Medicare Access Plus RxSM
- SecureHorizons MedicareDirectSM (United)

A PFFS plan works differently than a Medicare supplement plan, Original Medicare, and Medicare Advantage HMO or PPO plans. One key difference is how your doctors and other health care service providers work with a PFFS plan. The information below might be helpful to share with your providers.

Provider Participation

Becoming a deemed provider for the CIGNA and UNITED PFFS plans is easy:

- **There is no contract to sign and no network to join.** An individual can use any provider (doctor or health care professional) that accepts Original Medicare payment, is willing to treat the individual, and accepts the terms and conditions of payment for CIGNA and United. Providers that accept the CIGNA and United terms and conditions (including payment rate) are called *deemed providers*
- **As a deemed provider, you have the right to decide, on a patient-by-patient and visit-by-visit basis, whether to treat CIGNA or United PFFS plan participants**
- **There are no prior authorization or pre-certification requirements.** CIGNA and United do ask that you notify them of any inpatient admission (hospital, rehabilitation or skilled nursing) to ensure that these individuals are aware of programs and services that may be helpful
- **PFFS plans are required by CMS to pay providers the equivalent of what providers would have received under Original Medicare, less the individual's applicable co-payment or coinsurance**

(More information to share with your provider on back side)

- **Providers deemed into the PFFS plans will have a single source for claim payment**, CIGNA or United. Based on CMS requirements, claim payments will be timely and will include a detailed explanation of payment
- **The PFFS plans offered through the SHBP include additional benefits specifically for SHBP members that are traditionally excluded by Original Medicare**, which may make it easier for you to provide services and treatment

Provider Terms and Conditions

Before receiving services, individuals must inform you of their Medicare coverage through a PFFS plan. These individuals will have a CIGNA or United ID card with the PFFS plan information. At this point, you have the right to choose whether or not to accept the individual's PFFS plan. Once the individual informs you of his/her PFFS coverage and you provide services and submit a claim, you are agreeing to accept the terms and conditions of the PFFS plan selected by that individual. If you decide not to accept the terms and conditions of a PFFS plan, you should not provide services to the individual, except in emergencies (which are covered according to Medicare guidelines).

In general, the provider terms and conditions require the following:

- The provider must bill CIGNA or United directly for all covered health care services and collect only the applicable co-payments or coinsurance from the individual
- The provider must agree not to balance bill SHBP members for any amounts above the fees paid by CIGNA or United or applicable co-payments or coinsurance owed by the individual

This is merely a high-level summary of the Terms and Conditions that have been customized by CIGNA and United for SHBP's PFFS members. To learn more about the terms and conditions of the customized PFFS plan and payment, you can contact CIGNA or United as outlined below:

- **CIGNA**
Web site: www.cignamedicare.com
Phone: 1-800-577-9410
- **United**
Web site: www.uhcretiree.com
Phone: Provider Service at 1-866-579-8811

For more information about PFFS plans in general, see the Provider Q&A at the CMS Web site <http://www.cms.hhs.gov/PrivateFeeForServicePlans/>.