

Loudoun County Public Schools

Cigna® True Choice Core Medicare (PPO) Advantage Plan FAQs

1. What are Medicare Advantage plans?

Medicare Advantage plans are another way to use your Medicare Part A and Part B coverage PLUS receive additional benefits. Medicare Advantage plans are sometimes called Part C or MA plans. The Centers for Medicare & Medicaid Services (CMS) contracts with health insurers such as Cigna Healthcare to offer these comprehensive health insurance plans to Medicare eligible enrollees. More than half of all Medicare beneficiaries are enrolled in Medicare Advantage plans in 2023.

2. When am I eligible to enroll in a Medicare Advantage plan?

You are eligible when you become Medicare eligible at age 65 or earlier due to a disability. If you are a LCPS retiree and become Medicare eligible, you must enroll in the LCPS Medicare Advantage Plan.

3. How do I enroll?

Enrollment in the Cigna Medicare Advantage plan is automatic for those currently enrolled in the Cigna Surround plan. If you are a new retiree or you are becoming eligible for Medicare, you need to first enroll in Medicare Parts A & B then provide a copy of your Medicare Part A & B card to the Employee Benefits office for review. It's best to provide your card as early as possible but no later than the month prior to the effective date of your Medicare coverage.

4. Do I need to notify Medicare of this change from the Cigna Surround Plan to the Cigna Medicare Advantage Plan?

No, Cigna will notify Medicare on your behalf.

5. Do I need to notify my doctor about the new Cigna Medicare Advantage plan?

Yes, you will need to let your doctor know your medical insurance is the Cigna® True Choice Core Medicare (PPO) Advantage Plan beginning January 1, 2024 and provide them with your new card.

6. What card do I provide to my doctor?

Beginning January 1, 2024, when you visit a medical doctor, you will present your Cigna® True Choice Core Medicare (PPO) card to the doctor. You will not need to provide your Medicare Part A & B card. You will present your Cigna Rx Medicare card when you pick up a prescription. You will present your Cigna Vision card when you visit with an eye doctor for corrective vision services. You will present your Delta Dental card when you visit with a dentist.

7. Do I still need to maintain my enrollment in Medicare Parts A & B?

Yes, you need to continue Medicare Parts A & B while you are covered under the LCPS retiree health insurance Medicare Advantage plan.

FAQs continued

8. Do I still need to pay for Medicare Part B?

Yes, you need to continue paying Social Security for your Medicare Part B premium.

9. What “Letter” is assigned to this plan by Medicare?

The Cigna Medicare Advantage plan is a Medicare Part C plan (all Medicare Advantage plans are considered Medicare Part C plans).

10. Will my LCPS retiree health insurance premiums change?

LCPS Retiree Health Insurance premiums remain unchanged in 2024.

11. What is included with my LCPS retiree health insurance plan?

LCPS retiree health insurance is a bundled package. The bundle includes medical, prescription, dental and vision insurance.

12. What cards should I use and will I be getting new cards?

A new Cigna Medicare Advantage plan medical card, a new Cigna Rx Medicare card and a new Cigna Vision card will arrive in December. You can continue to use your existing Delta Dental card.

13. Can I keep the current Cigna Surround Plan?

No. Your Cigna Surround plan will be discontinued after December 31, 2023. LCPS offers one Medicare retiree health insurance plan, and the Cigna Medicare Advantage plan is the new plan beginning January 1, 2024.

14. I’m not 65 yet. What do I need to do when I turn 65?

Per LCPS Policy #7628, you must be enrolled in Medicare Parts A & B and be enrolled in the retiree Medicare plan if you wish to continue your health insurance plan with LCPS.

15. Can my spouse or dependents get coverage if they’re under age 65?

Per LCPS Policy #7628, LCPS retirees and/or their dependents who are eligible to be covered under the LCPS retiree health insurance and who are not eligible for Medicare Parts A & B can participate in either a Cigna POS or OAP plan. Please see the eligibility rules for additional information on the Cigna POS or OAP plans.

16. Are there any other options for me if I don’t want to be enrolled in the Medicare plan?

You will continue to be enrolled in Medicare Parts A & B. You are allowed to shop for other Medicare Advantage or Supplemental plans. You are allowed to cancel your LCPS retiree health insurance at any time and coverage will be canceled the 1st of the next month after LCPS receives your change form. The cancelation is for medical, prescription, dental and vision coverage since this is a bundled package. This is an irrevocable decision and you cannot re-join the plan at any time in the future.

FAQs continued

17. Can I enroll in more than one Medicare Part D plan?

No, Medicare does not allow enrollment in more than one Medicare Part D plan. If you enroll in another Medicare Part D plan, your LCPS coverage will be canceled.

18. Can I enroll in the Cigna Medicare Advantage plan as well as a Part D prescription plan?

LCPS retiree health insurance is a bundled package (see question #11). If you are eligible and enrolled in the Medicare Advantage plan you will also automatically be enrolled in the Cigna Rx Medicare Prescription (Part D) plan. Medicare does not allow enrollment in more than one Medicare Advantage plan or Medicare Part D plan.

19. Is my doctor in the network?

You have the freedom to use any provider or facility of your choice, whether they are in the Cigna network or out of the network, as long as they accept Medicare assignment and are willing to bill Cigna. You pay the same cost-share whether you see a Cigna® True Choice Core Medicare (PPO) in-network or out-of-network provider.

20. What if my doctor does not accept Medicare?

For your claims to be processed and paid on the Cigna® True Choice Core Medicare (PPO) Advantage Plan your doctor must accept Medicare assignment and be willing to bill Cigna.

21. What if my doctor does not accept Cigna?

Your doctor does not need to be contracted with Cigna but must accept Medicare assignment and be willing to bill Cigna.

22. How do I get reimbursed if I was required to pay up front for services from an out-of-network provider?

An out-of-network provider may refuse to bill Cigna directly and ask that you pay the full allowable amount set by Medicare. If you pay the provider up front, you will need to submit your claim to Cigna for reimbursement, less your copay or coinsurance. Cigna reimbursement payments are made at 100% of Medicare-allowable charges, based on Medicare-allowable services and your benefit plan. If you pay for services up front and your provider charged more than 100% of what is allowed by Medicare, you may not be fully reimbursed by Cigna.

23. What if I am also covered by another plan (Tricare, Blue Cross, etc.)?

When you receive medical care, present your Cigna® True Choice Core Medicare (PPO) card and your other insurance card to your healthcare professional. Your Cigna® True Choice Core Medicare plan will be your primary insurance. You will be responsible for submitting the claim to your other insurance company if your provider does not submit the claim on your behalf. Medicare does not allow enrollment in more than one Medicare Advantage plan or Medicare Part D plan. If your other plan is a Medicare Advantage plan or includes a Part D plan this will cancel your LCPS retiree health insurance package.

FAQs continued

24. What if I am traveling abroad?

You will have coverage while traveling abroad for emergency services only. You will be responsible for paying the entire cost for services at the time of your visit and can request reimbursement from Cigna, minus a \$50 co-pay, upon your return.

25. Do I have vision coverage and what card do I use?

Your LCPS retiree health insurance vision coverage is provided by Cigna Vision. You will receive a Cigna Vision card in the mail to use when you visit a vision care provider.

26. Is my dental coverage changing?

Your Delta Dental plan will remain the same and you should use the same Delta Dental card that you currently use.

27. Does the new Medicare Advantage plan service Florida/my state?

You have the freedom to use any provider or facility of your choice, whether they are in the Cigna network or out of the network, as long as they accept Medicare assignment and are willing to bill Cigna.

28. What should I do if I have a procedure scheduled for the first week in January?

You should notify your healthcare provider now of this change effective January 1, 2024. Should you need to obtain prior authorization, Cigna concierge is available to help ensure this is completed and/or to work through other options, if needed.

29. Will my wellness benefits be changing?

In January, you will be eligible for the Cigna Incentive program through your Medicare Advantage plan. This robust program replaces the LCPS Retiree Passport and LCPS WellnessWorks! Reimbursement programs beginning January 1, 2024.

30. Can dependents take advantage of the Cigna wellness programs, including Silver&Fit and the \$200 incentives?

Any dependent on the Medicare Advantage plan will be able to access the same wellness incentives as the LCPS retiree.

31. What are the unique wellness benefits associated with the Medicare Advantage plan? There are a host of wellness incentives including an Annual Wellness Exam, Annual Physical Exam, Wellness Incentive Program and Silver&Fit fitness program. Please review the Summary of Benefits, which will be mailed to your home in October, for additional information about these benefits and incentives.

FAQs continued

Questions from the 09/27/2023 Live Webinar

- 1. If there is a medication we are currently taking, will that be covered with the change to Medicare Advantage?**

The Cigna Rx Part D plan is not changing. If your prescription remains in the Medicare Formulary Drug List your prescription will continue being covered under the plan.

- 2. I have a specialist that does not take any insurance or Medicare but does require the patient have prescription drug coverage. Will my medications be covered?**

If the provider submits the prescription to your pharmacy, there should be no problem getting that prescription filled and covered by the Cigna Rx Part D plan.

- 3. Our plan used to be that Medicare covered 80% and Cigna 20%. How will that look now, and will I be paying more?**

No, you will not be paying more. Under the Surround plan, Medicare paid first then Cigna second. Now Cigna will pay the entire claim. Your co-pays will remain the same.

- 4. Is there any impact to out-of-state insured participants?**

No, the benefits are the same for both in-network and out-of-network providers across the country. You can go out-of-network and pay the same amount as long as the provider accepts Medicare and is willing to bill Cigna.

- 5. Is the \$200 wellness incentive program considered taxable income and will I receive a W-2?**

No, this is not taxable income, and no W-2 will be issued.

- 6. If you go out-of-network and the provider does not bill Cigna, what happens?**

You can be reimbursed if you submit to Cigna documentation of the claim, the bill, and the proof of payment. Cigna will reimburse the Medicare allowable amount but will not reimburse for any payment over the Medicare allowable amount.

- 7. Is there a list of approved providers and facilities?**

You can go online to www.mycigna.com or call Cigna directly at 888-281-7867 (beginning October 1, 2023) to review the providers that are willing to accept the plan and bill Cigna. If your provider is not listed, they may be out-of-network. You can use an out-of-network provider as long as they accept Medicare and are willing to bill Cigna.

- 8. My husband is retired military and I have Tricare for Life. Will this work with the Medicare Advantage Plan.**

Yes, this will work. Let your provider know that you have both plans. Your provider may submit to both insurance companies. If they do not you may need to submit claims to one of the insurance companies.

FAQs continued

9. How does the Silver&Fit incentive program work?

You will receive materials which include a flyer about the Silver&Fit program. You can also visit the website www.SilverandFit.com for more information. There are over 18,000 fitness centers that participate. You have access to any of the programs within the fitness centers that participate.

10. Is Medicare still primary, then Cigna secondary?

No. While Medicare sets the rules for Medicare Advantage Plans only Cigna is paying the claims. Your provider will send the claim to Cigna, Cigna will pay, then Cigna will issue the Explanation of Benefits (EOB) to you.

11. If I cannot find a provider, can I go through Cigna to help me find one?

Yes, you can call Cigna at 888-281-7867 beginning October 1, 2023 and also request that Cigna provide outreach to a provider of your choice.

12. Are the incentives automatically loaded to the incentive rewards debit card?

You must first have your Annual Health Checkup. That is typically identified through the claims process. As you continue your screenings and incentives throughout the year Cigna will automatically upload your incentives to your wellness debit card. If you participate in a program that Cigna would not be aware of, like community engagement, you can submit a form provided by Cigna to report this to Cigna to receive the incentive.

13. Does the Medicare Advantage Plan compensate doctors as well as the Cigna Surround Plan?

Yes, the Medicare Advantage Plan compensates doctors the Medicare allowable amount which is what providers were compensated under the Cigna Surround Plan.

14. If I already had my wellness checkup, do I need to wait a full year for another check-up?

Because this is a new plan you can have another wellness check-up earlier in 2024 than you did in 2023. Your incentives will not be loaded to your incentives debit card until after your Annual Wellness Check-up. However, if you received immunizations and screenings in advance of your Annual Wellness Checkup, they will be counted towards your incentives for that calendar year after the completion of your Annual Wellness Check-up.

15. Do I continue to present my Medicare ID card at my doctor's office or complete the form asking for my Medicare ID number?

No. While you will continue your enrollment in Medicare Parts A & B you will no longer need to present your Medicare card at your doctor's office. You will present your new Cigna Medicare Advantage Plan card at your doctor's office.

16. What are the steps I need to take after I receive my new insurance cards?

You should call your providers in advance to be sure they accept your new plan. Beginning January 1, 2024, you will need to provide your new card to your doctor's office. You can also

FAQs continued

bring the “Information for Providers” flyer, found on our website, with you when you visit your doctor.

17. Is my spouse eligible to continue the LCPS retiree health insurance if I were to pre-decease them?

Your spouse is eligible for COBRA coverage which can continue for up to three years. The cost for COBRA coverage is the full cost of the LCPS retiree health insurance in addition to a 2% administrative fee.

18. What do we refer to this plan as when we visit our providers?

Cigna® True Choice Core Medicare (PPO) Advantage Plan

19. Will I continue to receive an Explanation of Benefits from Medicare?

No, you will only receive an Explanation of Benefits (EOB) from Cigna beginning January 1, 2024.

20. Is a primary care physician required on the Medicare Advantage Plan?

No, a primary care physician is not required but is recommended as a good coordinator of overall health.

21. Do I need to make sure providers accept Medicare or only Cigna?

Providers must accept both Medicare and be willing to bill Cigna.

22. Is it difficult to go from an Advantage Plan back on to just Medicare?

No, it is not difficult to go back to Medicare from the Medicare Advantage plan. If you cancel your plan with LCPS you are not eligible to rejoin the plan at any time in the future. This will cancel your LCPS medical, prescription, dental and vision plans.

23. What is the difference between a Group Employer Sponsored plan and an Individualized Plan?

Your employer’s plan has added benefits not always offered in individual plans. Retirees typically pay more out of pocket when they use an individual plan that has a smaller premium. Individual plans can also be more restrictive with a much smaller network of providers.

24. How will we know Cigna is calling us and not a scammer?

The caller ID will say “Cigna” when Cigna calls you.

25. How do we get a copy of the Summary of Benefits?

The Summary of Benefits will be mailed to your home with the Pre-Enrollment packet in early October and after the transition in January.