



Welcome to Cigna Health Matters Care Management

Inpatient Precertification vs. Outpatient Precertification:

INPATIENT SERVICES	OUTPATIENT SERVICES
<p>All inpatient admissions and non-obstetric observation stays such as:</p> <ul style="list-style-type: none"> – Acute hospitals – Skilled nursing facilities – Rehabilitation facilities – Long-term acute care facilities – Hospice care – Transfers between inpatient facilities – Experimental and investigational procedures – Cosmetic procedures – Maternity stays longer than 48 hours (vaginal delivery) or 96 hours (cesarean section) 	<ul style="list-style-type: none"> – Certain outpatient surgical procedures – High-tech radiology (MRI, CAT scans, PET scans, nuclear cardiology) – Injectable drugs (other than self-injectables) – Durable medical equipment (insulin pumps, specialty wheelchairs, etc.) – Home health care/home infusion therapy – Dialysis (to direct to a participating facility) – External prosthetic appliances – Speech therapy – Cosmetic or reconstructive procedures – Infertility treatment – Sleep management – Transplants – Radiation therapy – Musculoskeletal services (major joint surgery and pain management services)

Pre-Certification:

What is precertification?

With precertification, you know in advance whether a procedure, treatment or service will be covered under your health care plan. It helps make sure that you get the right care in the right setting. It may save you from costly and unnecessary services.

Who is responsible for getting the precertification?

- › In-network services: Your doctor is responsible.
- › Out-of-network services: You're responsible. Before you choose an out-of-network provider, make sure your plan covers out-of-network services.

To request precertification, call the toll-free number on your Cigna ID card. When you call, make sure you have:

- › The name of the doctor or facility.
- › The procedure code(s).
- › The date of service.

Remember, with out-of-network providers your out-of-pocket costs will be higher. Also, your coverage may be reduced or denied if you don't get precertification.

Review Process

TYPE OF REVIEW	WHEN DOES IT OCCUR?	WHEN IS THE DECISION MADE?
Future (Prospective)	When Cigna receives the request before you receive care.	Within 10 calendar days from receipt of the request.*
Current (Concurrent)	When Cigna receives the request while you are receiving care. In a hospital, skilled nursing facility, or rehab facility.	Within one calendar day from receipt of the request.*
Past (Retrospective)	When Cigna receives the request after you have received care.	Within 30 calendar days from receipt of the request.*
Urgent (Prospective Urgent)	If your situation requires a decision right away. (To request expedited review on a weekend, please call the Cigna 24-Hour Health Information Line SM at the toll-free number on your ID card.)	Within 3 calendar days of the request.*

Case Management

What is case management?

Through case management, a Cigna nurse helps coordinate services among your doctors and across different care settings, such as a hospital, rehabilitation facility and your home. The nurse will also identify community resources for services that may not be covered by your benefit plan.

What does care management mean for you?

1. Ease. When you or a covered family member visit a doctor or facility in your plan's Cigna network:

- › Your doctor arranges all the care.
- › Your doctor gets precertification when it's needed.

If you visit an out-of-network doctor or facility, you're responsible for getting precertification.

2. Savings. We review inpatient and certain outpatient services and look for ways to save you money. We may:

- › Provide a list of quality, cost-effective facilities in your plan's network.
- › Help provider transition inpatient care to outpatient treatment, if appropriate.
- › Help identify avoidable treatments or procedures.

3. Quality of care. You'll have access to case managers who can help you find the support you need to get better.

This includes:

- › Home health care.
- › Therapies.
- › Special medical needs to help you avoid complications after a hospital stay or outpatient procedure.