

## FIRST LOOK 2022 BENEFITS

Medicare Advantage Preview

Offered by Cigna Health and Life Insurance Company or its affiliates

Together, all the way.

## Welcome to this year's First ook from Cigna!

We are excited to showcase the new Medicare Advantage plans, products and benefits that add value to your customers' lives.

This year we maintain our pledge to offer simple, affordable, and predictable health care. In addition to the quality plans you've come to expect from Cigna, we continue with our ambitious growth goals and expansion plans. In fact in 2022, you can now expect to see Cigna plans in 26 states and the District of Columbia.

Some of the growth we'll see for our Medicare Advantage plans in 2022 include:

- » Three new states: CT, WA, OR
- » **477 county footprint** a 29% increase over 2021
- » 152 new PPO counties across 19 states
- » 119 new HMO counties in 20 states
- » 23 new DSNP counties in 7 states

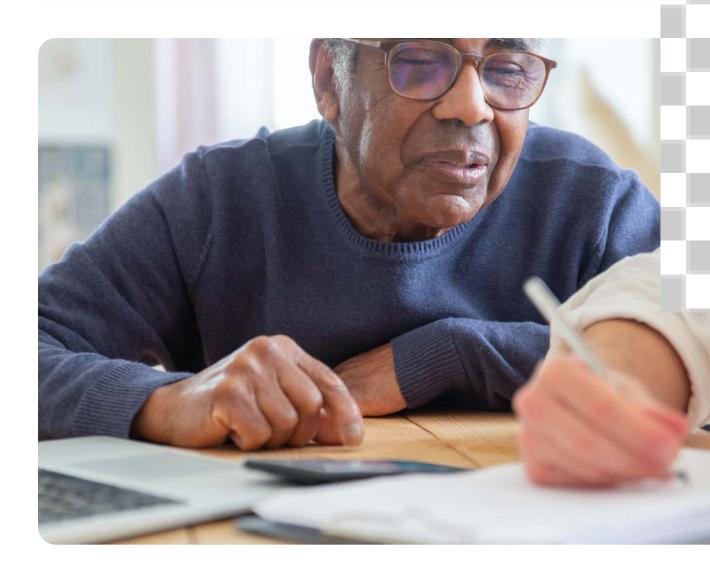
In addition to the largest expansion Cigna has seen to date, we're also enhancing the benefits to many of our offerings, including expanded benefits for dental, insulin savings, and healthy foods. We're glad to talk

with you about these and other benefits and to showcase how a Cigna Medicare Advantage plan is a great fit for your customer.

Thank you for the work you do to find the best fit for your customers. We are grateful that you choose to be part of Team Cigna. We believe we are better together. Let's make this AEP the best yet!

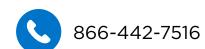
-Elizabeth Davis





#### **CONTACT** US

Cigna Agent Resource Line







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## ABOUT CIGNA



#### OUR MISSION

As a global health service company, Cigna's mission is to improve the health, well-being, and peace of mind of those we serve by making health care affordable, predictable, and simple.



## OUR **VALUES**



#### **ABOUT CIGNA**

#### OUR **HISTORY**

Our roots go back to 1792, making Cigna the nation's oldest

1912

We began to offer **health benefits** in 1912.



25+

1792

stockholder-owned insurer.

Cigna has served seniors with Medicare Advantage and Medicare supplement plans for more than 25 years.

2006



We're proud to have been a **Medicare Part D** carrier since the program began in 2006.



## OUR GUIDING PRINCIPLES

#### DO THE RIGHT THING ALWAYS

We are accountable to our customers, our partner agents and agencies, and our co-workers in everything we do.

#### **BE COURAGEOUS**

We strive to find opportunity in every challenge, even if it's uncomfortable.

#### **LISTEN AND LEARN!**

We seek to understand our customers, partners, and other people and circumstances we encounter.





## BY THE **NUMBERS**



## OUR RESPONSE TO COVID-19

When considering how to approach the challenges presented by COVID-19, Cigna simply worked within its first guiding principle: Do the right thing always. Some of the ways we worked to do the right thing for our customers in light of COVID-19 are:





Waived all costsharing for innetwork medical or behavioral telehealth visits



Waived copays and cost shares for COVID-19 related testing and treatment



the posthospitalization meal benefit from 14 meals to 28





Waived cost-sharing for office visits to in-network primary care physicians, specialists and behavioral practitioners

Extended the deadline on receiving the 360 Exam and gift card







# WHY CIGNA MEDICARE



# INTRODUCING CIGNA'S EVOLVED STRATEGY

CHAMPIONS FOR AFFORDABLE, PREDICTABLE, AND SIMPLE HEALTH CARE





#### **MAKING IT**

#### affordable

We build on our leading, differentiated position to lower the total cost of care.

#### **MAKING IT**

#### predictable

We take surprise out of the system and help people make informed health choices.

#### **MAKING IT**

#### simple

We make it easier for the people we serve to get the care they need.



## BROKER SALES REPRESENTATIVES

- » Local market knowledge and support
- » Assistance with business planning, marketing and recruiting
- » Cigna value proposition, product and positioning
- » Sales and compliance training and coaching
- » Issue resolution and escalation
- » As needed access to sales kits and enrollment materials





## VIRTUAL **TOOLS**

- » Cigna for Brokers online customer relationship management tool
- » CustomPoint online portal for custom marketing collateral
- » Producers' University online training information and sales resources
- » Basics of Medicare presentation in both English and Spanish (access through Producers' University) (new)
- » Cigna Medicare video learning series (access through Medicare Learning Series) (new)
- » Social Media Content available to agents who have successfully completed Cigna social media training (new)
- » Infographics simple infographic that doubles as a quick checklist to help your customers (access through Producers' University) (new)
- » Digital business reply card (BRC) (new)



## NEW ENROLLMENT OPTIONS

#### **Broker Assisted Enrollment:**

- » Available in English and Spanish
- » Broker introduces the customer, provides required customer information, plan selection, broker writing number and then hangs up the phone
- » Enrollment specialist completes the application with the customer
- » Enrollment specialist provides email copy of application to broker

» Arizona: 866-619-8825All Other Cigna Markets: 866-619-9293

#### **Connecture DRx:**

- » Offer a purely digital way for customers select, enroll, and signup for their Medicare Advantage option of choice
- » Quick quote can send your customers a few different plan options for their review
- » Build a digital book of business by creating individual customer profiles

#### Personalized URL (PURL):

- » Integrated with Cigna for Brokers
- » Provides pricing and enrollment information electronically
- » Send via email, social media or website link



# A REMINDER: ADDITIONAL ADMINISTRATIVE FEE

- » New-to-Medicare Administrative Fee Paid to Agency-level for all New-to-Cigna Customer Sales in 2022
- » Covers all markets except Leon/Miami





## CIGNA AGENT RESOURCE LINE

CARL is the Cigna Medicare's help center staffed by Cigna employees who provide valuable support to our brokers. Below is some assistance CARL can support you with:

- » Producers' University
- » Salesforce password resets
- » Commissions, licensing, and appointment questions
- » Provider directory and formulary requests
- » Phone number and email address updates
- » Cigna Medicare contacts (local markets, departments, etc.)
- » Assist with CustomPoint
- » eEnrollment Plan information
- » Request ID cards and welcome Kits on behalf of a customer
- » Updates to Primary Care Provider information
- » Medicare and Medicaid eligibility
- » Application status



## CIGNA AGENT RESOURCE LINE

[CNT'D]

#### **CARL Help Center**

carl@cigna.com 866-442-7516

#### **Other Services:**

#### TeleScope (SOA)

866-398-6055

#### **Customer Plan Change**

855-649-5105

#### **Hours of Operation**

AEP	Mon - Sat	7:00 am to 9:00 pm	
	Sun	9:30 am to 6:00 pm	
OEP	Mon - Sat	7:00 am to 7:00 pm	
Lock-In	Mon – Fri	7:00 am to 6:00 pm	

#### **Broker Assisted Enrollment Line**

Arizona: 866-619-8825

All Other Cigna Markets: 866-619-9293

#### **Hours of Operation**

AEP	Mon - Sat	7:00 am to 7:00 pm
OEP	Mon - Sat	7:00 am to 7:00 pm
Lock-In	Mon – Fri	7:00 am to 6:00 pm









## SUPPLEMENTAL HEALTH BENEFITS

At Cigna, part of our commitment to our customers' whole health means giving them more ways to **get**healthier - and stay healthier. As a Cigna Medicare

Advantage customer, they will have all the coverage of original Medicare plus a wide range of added benefits.

These added benefits include helpful services and programs designed to improve our customers' health, well-being and peace of mind.

#### DENTAL

In 2022, we will offer dental benefits that include: preventive, comprehensive, or allowance depending on the market. Stay tuned for more information over the upcoming weeks.





#### VISION

We offer a nationwide network for convenient vision service access. Included in our routine vision benefit:

- » Comprehensive eye exams, including refractions
- » Yearly glaucoma screenings
- » Flexible frame and lenses or contacts
- » Medicare covered after cataract surgery glasses (lenses and frames or contacts), from in-network providers





#### **HEARING**

We partner with Hearing Care Solutions (HCS) to provide easy access to routine hearing exams/evaluations, fittings, and distribution of hearing aid devices for our customers.

#### HEARING CARE SOLUTIONS

- » Over 35 years of hearing industry experience with a focus on individual care
- » Provides a nationwide network with over 2,000 locations for convenient access to hearing service
- » Offers fixed pricing for hearing aids based on the level of technology, not the style of the device
- » Access to a wide selection of major manufacturers, offering a vast number of hearing aid models to our customers
- » Nine manufacturers to choose from



#### OTC

We partner with Convey
Health Solutions to provide
easy access and availability
of over-the-counter (OTC)
medications and products
for our customers through
the Cigna Medicare
Advantage OTC benefit.
Convey Health Solutions has
been a recognized industry
expert for over a decade.



Customers receive a quarterly benefit, which may be rolled over to purchase larger items.

Examples of items that may be included are: OTC medications such as aspirin and vitamins; health-related products such as compression hose and incontinence products; and fall prevention products such as grab bars and safety benches.



#### TRANSPORTATION

We partner with Access2Care (A2C), an industry recognized transportation manager to provide easy access to high quality, non-emergency medical transportation for our customers. A2C has also partnered with Lyft making it



even easier for our customers to secure transportation to medical appointments, the pharmacy, or the dentist.



#### **FITNESS**

We partner with American Specialty Health (ASH) to provide easy access to fitness programs for our customers under the Silver&Fit© Exercise and Healthy Aging Program. Under our program, customers have access to fitness facilities and instructor-led classes, exercise centers, and home fitness kits so that they can exercise in the comfort of their own homes.



#### HOME DELIVERED MEALS

We partner with GA Foods, a leader in the meal industry, to create and deliver high quality nutritious meals for our customers. Home-delivered meals offer an extra level of convenience and support for our customers newly released from an inpatient hospital stay or a skilled nursing facility to home.\*

This eliminates the burden of grocery shopping and meal prep which allows our customers to focus on healing. All meals are prepared by a chef and registered dieticians are on staff at GA Foods.

\*Does not apply to observation, ER visits or long term care facility





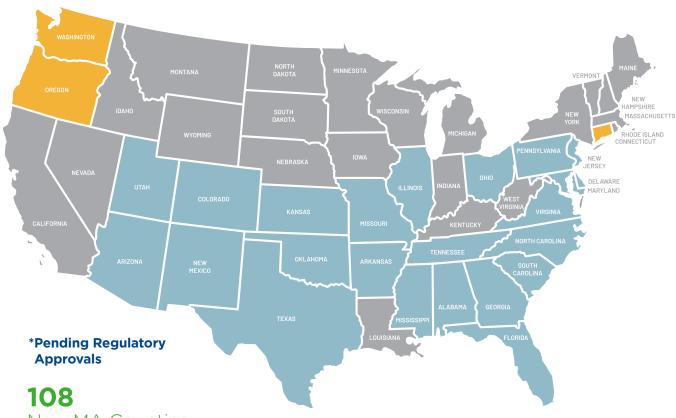




# NEW FOR **2022**



# CIGNA MEDICARE ADVANTAGE 2022 FOOTPRINT



New MA Counties

119

New HMO Counties

152

New PPO Counties

23

New DSNP Counties

- Current MA Market,
  PDP and other portfolio
  products
- New MA State, PDP and other portfolio products
- PDP and other portfolio products



## 2022 NATIONAL PRODUCT VIEW

Plans designed to attract new customers and retain existing customers

- » New benefits on select plans to address social determinants of health
- » Expanded telehealth benefits
- » Affordable behavioral health benefits
- » Expanded Dental Benefits
- » Expanded Telehealth
- » Expanded Lifestyle Drugs
- » New and Innovative 2022 Benefits
  - » Cigna cash card
  - » Cigna healthy foods card
  - » In-home support
  - » Part D LIS cost sharing reduction
  - » Cigna insulin savings program







Express Scripts, the nation's 3rd largest pharmacy remains Cigna's preferred mail order pharmacy for Medicare Advantage. Express Scripts services 10 million Americans.

The Cigna Medicare Advantage Pharmacy network includes 60K+ total pharmacies and ~33K preferred pharmacies.

For Medicare Consumers Without Medicaid - Part D plan designs offer significant savings on covered medications (benefits vary by plan)

Cigna Insulin Savings program on 21 plans (Markets: AZ, CO, CT, TX)



- » Provides select insulins at a \$35 copay regardless of pharmacy location for beneficiaries without LIS
- » Copay is available through the deductible, initial coverage, and gap coverage phases

#### Several Part D benefits help to lower prescription drug costs



- » ~80% of plans offer a \$0 deductible for all covered Part D drugs
- » More than 98% of plans include \$0 Tier 1&2 copays if using preferred mail order (90-day supply)



# PHARMACY BENEFITS [CNT'D]

- » More than 80% of plans include \$0 Tier 1 copay if using a preferred retail pharmacy (30-day supply)
- » ~30% of plans offer supplemental gap coverage
- » Select FL plans include a \$0 copay for supplemental Part D coverage (lifestyle drugs)

Select Dual-SNP Plans - May offer cost shares lower than what consumers receive through Extra Help (depends on LIS eligibility)

VBID Benefit Offering for those Eligible for LIS on 4 Dual-SNP plans (Markets: AL/MS, NC, TX)



- » \$0 Part D drug copays for all Part D drugs covered under the plan's formulary for plan enrollees who qualify for LIS (Extra Help)
- » Goal of plan design is to improve the coordination and efficiency of health care service delivery and Part D drug adherence









# STATE + MARKET PLANS





P

Alabama

Arizona

Arkansas

Colorado

Connecticut

Delaware

District of Columbia

Florida

Georgia



## STATE + MARKET PLANS

# CLICK TO VIEW A

## **PLAN BY STATE**



Illinois

Kansas

Maryland

Mississippi

Missouri

New Jersey

New Mexico

North Carolina

Ohio

Oregon

Oklahoma

Pennsylvania

South Carolina

Tennessee

Texas

Utah

Virginia

Washington





# STATE + MARKET PLANS

SOUTHEAST REGION



# ALABAMA, SOUTHERN MISSISSIPPI & NORTH FLORIDA

## 2022 OVERVIEW



### Mississippi - Southern

#### The following counties offer these plans:

- H4407-026 Cigna Preferred Medicare (HMO)
  H4407-027 Cigna Preferred Plus Medicare (HMO)
- H4407-027 Cigna Frederica Flus Medicare (HMO)
- H4407-011 Cigna Fundamental Medicare (HMO)
- H4407-004 Cigna TotalCare (HMO D-SNP)

Covington, Forrest, George, Lamar, Marion, Pearl River, Perry and Stone

#### These counties also offer this plan::

H7849-016 Cigna True Choice Medicare (PPO)

Hancock, Harrison, Hinds, Jackson, Jones, Madison

#### Florida - North

#### The following counties offer these plans:

- H5410-018 Cigna Preferred Medicare (HMO)
- H5410-004 Cigna Fundamental Medicare (HMO)
- H5410-013 Cigna TotalCare (HMO D-SNP))

Bay, Okaloosa and Walton

#### These counties also offer this plan:

H7849-044 Cigna True Choice Medicare (PPO)) Escambia and Santa Rosa

#### Alabama - North and Tuscaloosa

#### The following counties offer these plans:

- H4513-054 Cigna Preferred Medicare (HMO)
- H4513-048 Cigna Preferred Plus Medicare (HMO)
- H4513-045 Cigna Fundamental Medicare (HMO)
- H7849-012 Cigna True Choice Medicare (PPO) ■ H4513-055 Cigna TotalCare (HMO D-SNP)

Cherokee, Colbert, Dekalb, Etowah, Jackson, Lawrence, Limestone, Madison, Marshall, Morgan, and Tuscaloosa

Lauderdale county offers all plans EXCEPT the PPO plan.

#### These counties also offer this plan:

H4513-063 Cigna TotalCare Plus (HMO D-SNP) Blount and St. Clair

#### Alabama - Central and South

#### The following counties offer these plans:

- H4513-057 Cigna Preferred Medicare (HMO)
- H4513-047 Cigna Preferred Plus Medicare (HMO)
  H4513-045 Cigna Fundamental Medicare (HMO)
- H7849-013 Cigna True Choice Medicare (PPO)
- H4513-056-001 Cigna TotalCare (HMO D-SNP)

Autauga, Coosa, Dallas, Elmore, Lowndes, Montgomery, Perry and Talladega

#### These counties also offer this plan:

H4513-063 Cigna TotalCare Plus (HMO D-SNP)

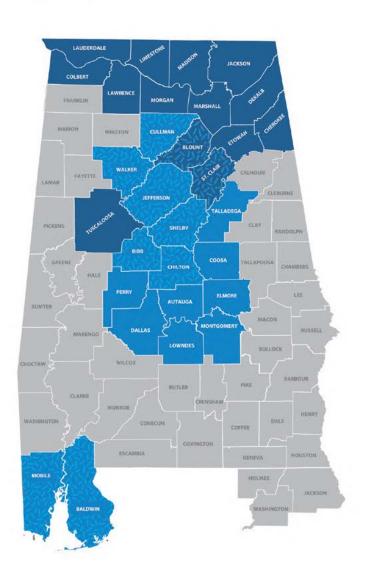
Bibb, Chilton, Cullman, Jefferson, Mobile, Shelby and Walker

Baldwin county offers all plans EXCEPT the PPO plan.



## **ALABAMA**

## 2022 OVERVIEW



#### Alabama - North and Tuscaloosa

#### The following counties offer these plans:

- H4513-054 Cigna Preferred Medicare (HMO)
- H4513-048 Cigna Preferred Plus Medicare (HMO)
- H4513-045 Cigna Fundamental Medicare (HMO)
- H7849-012 Cigna True Choice Medicare (PPO)
- H4513-055 Cigna TotalCare (HMO D-SNP)

Cherokee, Colbert, Dekalb, Etowah, Jackson, Lawrence, Limestone, Madison, Marshall, Morgan, and Tuscaloosa

Lauderdale county offers all plans EXCEPT the PPO plan.

#### These counties also offer this plan:

H4513-063 Cigna TotalCare Plus (HMO D-SNP)

Blount and St. Clair

#### **Alabama - Central and South**

#### The following counties offer these plans:

- H4513-057 Cigna Preferred Medicare (HMO)
- H4513-047 Cigna Preferred Plus Medicare (HMO)
- H4513-045 Cigna Fundamental Medicare (HMO)
- H7849-013 Cigna True Choice Medicare (PPO)
  H4513-056-001 Cigna TotalCare (HMO D-SNP)
- h4515-050-001 Cigita lotalcale (HMO D-5N

Autauga, Coosa, Dallas, Elmore, Lowndes, Montgomery, Perry and Talladega

#### These counties also offer this plan:

H4513-063 Cigna TotalCare Plus (HMO D-SNP) Bibb, Chilton, Cullman, Jefferson, Mobile, Shelby and Walker

Baldwin county offers all plans EXCEPT the PPO plan.



# MEDICARE ELIGIBLE POPULATION:

786,686

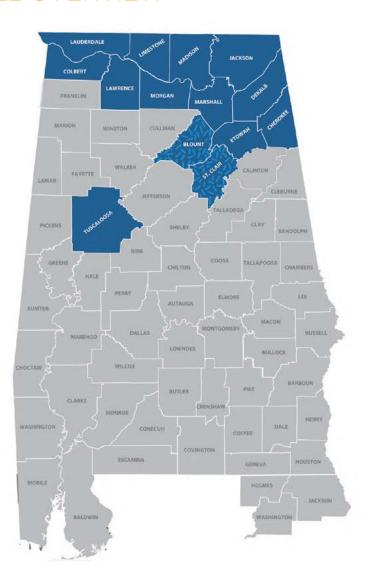
# MEDICARE ADVANTAGE PENETRATION:

51.60%



# ALABAMA— NORTH AND TUSCALOOSA

## 2022 OVERVIEW



#### Alabama - North and Tuscaloosa

#### The following counties offer these plans:

- H4513-054 Cigna Preferred Medicare (HMO)
- H4513-048 Cigna Preferred Plus Medicare (HMO)
- H4513-045 Cigna Fundamental Medicare (HMO)
- H7849-012 Cigna True Choice Medicare (PPO)
- H4513-055 Cigna TotalCare (HMO D-SNP)

Cherokee, Colbert, Dekalb, Etowah, Jackson, Lawrence, Limestone, Madison, Marshall, Morgan, and Tuscaloosa

Lauderdale county offers all plans EXCEPT the PPO plan.

#### These counties also offer this plan:

H4513- 063 Cigna TotalCare Plus (HMO D-SNP) Blount and St. Clair



# MEDICARE ELIGIBLE POPULATION:

309,467

# MEDICARE ADVANTAGE PENETRATION:

43.75%



## ALABAMA ALABAMA

**COUNTIES** Blount, Cherokee, Colbert, Dekalb, Etowah, Jackson, Lauderdale, Lawrence, Limestone, Madison, Marshall, Morgan, St. Clair, Tuscaloosa

PLAN ID	H4513-048-000	H4513-054-000	H4513-055-000
PLAN NAME	Cigna Preferred Plus Medicare (HMO)	Cigna Preferred Medicare (HMO)	Cigna TotalCare (HMO D-SNP)
Total Premium	\$29	\$0	\$17.90
Cost Share— PCP/Specialist	\$0 / \$0	\$0 / \$0	\$0/\$0
Inpatient Acute Care Hospital	\$250 per day for days 1-6; \$0 per day for days 7-90	\$325 per day for days 1-6; \$0 per day for days 7-90	\$1,250 per stay
Max Out-of-Pocket	\$4,500 applies to in-network Medicare-covered benefits	\$5,500 applies to in-network Medicare-covered benefits	\$7,550 applies to in-network Medicare-covered benefits
Lab	\$0	\$0	\$0
Ambulatory Surgery Center	\$0 - \$195	\$0 - \$275	\$0 - \$50
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	Tier 1: \$2 Tier 2: \$8 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	Tier 1: \$4 (2x one month) Tier 2: \$16 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A



## **ALABAMA**

## ALABAMA

**COUNTIES** Autauga, Baldwin, Bibb, Blount, Cherokee, Chilton, Colbert, Coosa, Cullman, Dallas, DeKalb, Elmore, Etowah, Jackson, Jefferson, Lauderdale, Lawrence, Limestone, Lowndes, Madison, Marshall, Mobile, Montgomery, Morgan, Perry, Shelby, St. Clair, Talladega, Tuscaloosa, Walker

PLAN ID	H4513-045-000 NEV	
PLAN NAME	Cigna Fundamental Medicare (HMO)	
Total Premium	\$0	
Cost Share— PCP/Specialist	\$0/\$0	
Inpatient Acute Care Hospital	\$295 per day for days 1-6; \$0 per day for days 7-90	
Max Out-of-Pocket	\$4,900 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - \$250	
Costshare— Preferred Retail RX (One Month)	N/A	
Cost Share— Preferred Retail RX (Three Months)	N/A	



## **ALABAMA**

## ALABAMA

**COUNTIES** Blount, Cherokee, Colbert, DeKalb, Etowah, Jackson, Lawrence, Limestone, Madison, Marshall, Morgan, St. Clair, Tuscaloosasa

PLAN ID	H7849-012-000		
PLAN NAME	Cigna True Choice Medicare (PPO)		
PLAN NAME	In Network	Out of Network	
Total Premium	\$0	\$0	
Cost Share— PCP/Specialist	\$0 - \$5 / \$30	\$40/\$55	
Inpatient Acute Care Hospital	\$225 per day for days 1-6; \$0 per day for days 7-90	35%	
Max Out-of-Pocket	\$5,700 applies to in-network Medicare-covered benefits	\$7,700 applies to in-network and out-of-network Medicare- covered benefits combined	
Lab	\$0	0 - 35%	
Ambulatory Surgery Center	\$0 - \$195	35%	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$2 Tier 2: \$4 Tier 3: \$40 Tier 4: \$95 Tier 5: 33%	N/A	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$5 (2.5x one month) Tier 2: \$10 (2.5x one month) Tier 3: \$120 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A	



## **ALABAMA**

## ALABAMA

COUNTIES Baldwin, Bibb, Blount, Chilton, Cullman, Jefferson, Mobile, St. Clair, Shelby, Walker

PLAN ID	H4513-063-000 NEW PLAN
PLAN NAME	Cigna TotalCare Plus (HMO D-SNP)
Total Premium	\$18
Cost Share— PCP/Specialist	0 - 20% / 20%
Inpatient Acute Care Hospital	\$1,575 per stay
Max Out-of-Pocket	\$7,550 applies to in-network Medicare-covered benefits
Lab	0 - 20%
Ambulatory Surgery Center	0 - 20%
Costshare— Preferred Retail RX (One Month)	N/A
Cost Share— Preferred Retail RX (Three Months)	N/A



## STATE + MARKET **PLANS**



# ALABAMA— CENTRAL AND SOUTH

## 2022 OVERVIEW



#### **Alabama - Central and South**

#### The following counties offer these plans:

- H4513-057 Cigna Preferred Medicare (HMO)
- H4513-047 Cigna Preferred Plus Medicare (HMO)
- H4513-045 Cigna Fundamental Medicare (HMO)
- H7849-013 Cigna True Choice Medicare (PPO)
- H4513-056-001 Cigna TotalCare (HMO D-SNP)

Autauga, Coosa, Dallas, Elmore, Lowndes, Mobile, Montgomery, Perry and Talladega

#### These counties also offer this plan:

H4513-063 Cigna TotalCare Plus (HMO D-SNP) Bibb, Chilton, Cullman, Jefferson, Mobile, Shelby and Walker

Baldwin county offers all plans EXCEPT the PPO plan.



# MEDICARE ELIGIBLE POPULATION:

477,219

# MEDICARE ADVANTAGE PENETRATION:

56.69%



## ALABAMA ALABAMA

**COUNTIES** Autauga, Baldwin, Bibb, Chilton, Coosa, Cullman, Dallas, Elmore, Jefferson, Lowndes, Mobile, Montgomery, Perry, Shelby, Talladega, Walker

PLAN ID NEW COUL	NTIES H4513-057-000	H4513-047-000
PLAN NAME	Cigna Preferred Medicare (HMO)	Cigna Preferred Plus Medicare (HMO)
Total Premium	\$0	\$29
Cost Share— PCP/Specialist	\$0/\$0	\$0/\$0
Inpatient Acute Care Hospital	\$295 per day for days 1-6; \$0 per day for days 7-90	\$250 per day for days 1-6; \$0 per day for days 7-90
Max Out-of-Pocket	\$4,900 applies to in-network Medicare-covered benefits	\$4,500 applies to in-network Medicare-covered benefits
Lab	\$0	\$0
Ambulatory Surgery Center	\$0 - \$250	\$0 - \$200
Costshare— Preferred Retail RX (One Month)	Tier 1: \$2 Tier 2: \$8 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$4 (2x one month) Tier 2: \$16 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A



## **ALABAMA**

## ALABAMA

**COUNTIES** Autauga, Baldwin, Bibb, Blount, Cherokee, Chilton, Colbert, Coosa, Cullman, Dallas, DeKalb, Elmore, Etowah, Jackson, Jefferson, Lauderdale, Lawrence, Limestone, Lowndes, Madison, Marshall, Mobile, Montgomery, Morgan, Perry, Shelby, St. Clair, Talladega, Tuscaloosa, Walker

PLAN ID	H4513-045-000 NEV	
PLAN NAME	Cigna Fundamental Medicare (HMO)	
Total Premium	\$0	
Cost Share— PCP/Specialist	\$0/\$0	
Inpatient Acute Care Hospital	\$295 per day for days 1-6; \$0 per day for days 7-90	
Max Out-of-Pocket	\$4,900 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - \$250	
Costshare— Preferred Retail RX (One Month)	N/A	
Cost Share— Preferred Retail RX (Three Months)	N/A	



## **ALABAMA**

## ALABAMA

**COUNTIES** Autauga, Bibb, Chilton, Coosa, Cullman, Dallas, Elmore, Jefferson, Lowndes, Mobile, Montgomery, Perry, Shelby, Talladega, Walker

PLAN ID	H7849-013-000		
PLAN NAME		te Medicare (PPO)	
	In Network	Out of Network	
Total Premium	\$0	\$0	
Cost Share— PCP/Specialist	\$0 - \$5 / \$25	\$40 / \$55	
Inpatient Acute Care Hospital	\$225 per day for days 1-6; \$0 per day for days 7-90	35%	
Max Out-of-Pocket	\$5,100 applies to in-network Medicare-covered benefits	\$7,700 applies to in-network and out-of-network Medicare- covered benefits combined	
Lab	\$0	0 - 35%	
Ambulatory Surgery Center	\$0 - \$195	35%	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$2 Tier 2: \$4 Tier 3: \$40 Tier 4: \$95 Tier 5: 33%	N/A	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$5 (2.5x one month) Tier 2: \$10 (2.5x one month) Tier 3: \$120 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A	



## **ALABAMA**

## ALABAMA

**COUNTIES** Autauga, Baldwin, Bibb, Chilton, Cullman, Coosa, Dallas, Elmore, Jefferson, Lowndes, Mobile, Montgomery, Perry, Shelby, Talladega, Walker

PLAN ID	H4513-056-001	EW
PLAN NAME	Cigna TotalCare AL (HMO D-SNP)	
Total Premium	\$17.80	
Cost Share— PCP/Specialist	\$0/\$0	
Inpatient Acute Care Hospital	\$925 per stay	
Max Out-of-Pocket	\$7,550 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - \$50	
Costshare— Preferred Retail RX (One Month)	N/A	
Cost Share— Preferred Retail RX (Three Months)	N/A	



## **ALABAMA**

ALABAMA

COUNTIES Baldwin, Bibb, Blount, Chilton, Cullman, Jefferson, Mobile, St. Clair, Shelby, Walker

PLAN ID	H4513-063-000
PLAN NAME	Cigna TotalCare Plus (HMO D-SNP)
Total Premium	\$18
Cost Share— PCP/Specialist	0 - 20% / 20%
Inpatient Acute Care Hospital	\$1,575 per stay
Max Out-of-Pocket	\$7,550 applies to in-network Medicare-covered benefits
Lab	0 - 20%
Ambulatory Surgery Center	0 - 20%
Costshare— Preferred Retail RX (One Month)	N/A
Cost Share— Preferred Retail RX (Three Months)	N/A



## STATE + MARKET **PLANS**





## **MISSISSIPPI**

## 2022 OVERVIEW



### Mississippi - Northern

The following counties offer these plans:

- H4407-028 Cigna Preferred Medicare (HMO)
- H7849-060 Cigna True Choice Medicare (PPO)

DeSoto, Marshall, Tate and Tunica

## Mississippi - Southern

The following counties offer these plans:

- H4407-026 Cigna Preferred Medicare (HMO)
- H4407-027 Cigna Preferred Plus Medicare (HMO)
- H4407-011 Cigna Fundamental Medicare (HMO)
- HH4407-004 Cigna TotalCare (HMO D-SNP)

Covington, Forrest, George, Lamar, Marion, Pearl River, Perry and Stone

#### These counties also offer this plan:

H7849-016 Cigna True Choice Medicare (PPO) Hancock, Harrison, Hinds, Jackson, Jones, Madison and Rankin



# MEDICARE ELIGIBLE POPULATION:

289,824

# MEDICARE ADVANTAGE PENETRATION:

33.52%



# MISSISSIPPI — NORTHERN

2022 OVERVIEW



## Mississippi - Northern

The following counties offer these plans:

- H4407-028 Cigna Preferred Medicare (HMO)
- H7849-060 Cigna True Choice Medicare (PPO)

DeSoto, Marshall, Tate and Tunica



MEDICARE ELIGIBLE POPULATION:

45,604

MEDICARE ADVANTAGE PENETRATION:

28.51%



## **TENNESSEE**

## NORTH MISSISSIPPI

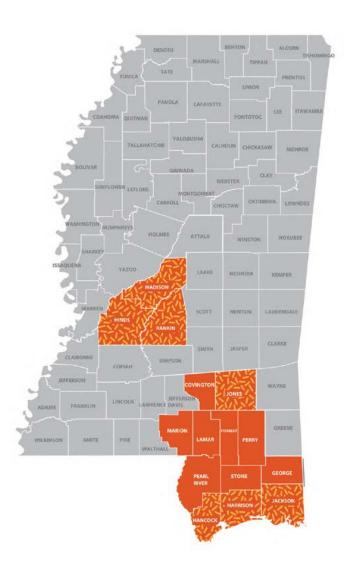
**COUNTIES** Desoto, Marshall, Tate, Tunica

PLAN ID NEW PLANS	H4407-028-000	H7849-0	60-000
PLAN NAME	Cigna Preferred Medicare (HMO)		e Medicare (PPO)
T EAR MAILE	cigila i referred riculture (iii io)	In Network	Out of Network
Total Premium	\$0	\$0	\$0
Cost Share— PCP/Specialist	\$0-\$30	\$0/\$30	\$40/\$55
Inpatient Acute Care Hospital	\$325 per day for days 1-5; \$0 per day for days 6-90	\$295 per day for days 1-6; \$0 per day for days 7-90	30%
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	\$7,550 applies to in-network Medicare-covered benefits	\$10,000 applies to in-network and out-of- network Medicare-covered benefits combined
Lab	\$0	\$0	0 - 30%
Ambulatory Surgery Center	\$0 - \$275	\$0 - \$225	30%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$10 Tier 3: \$42 Tier 4: \$100 Tier 5: 33%	Tier 1: \$0 Tier 2: \$4 Tier 3: \$40 Tier 4: \$80 Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$20 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$250 (2.5x one month) Tier 5: N/A	Tier 1: \$0 Tier 2: \$10 (2.5x one month) Tier 3: \$120 (3x one month) Tier 4: \$240 (3x one month) Tier 5: N/A	N/A



## MISSISSIPPI — SOUTHERN

## 2022 OVERVIEW



## Mississippi - Southern

### The following counties offer these plans:

- H4407-026 Cigna Preferred Medicare (HMO)
- H4407-027 Cigna Preferred Plus Medicare (HMO)
- H4407-011 Cigna Fundamental Medicare (HMO)
- H4407-004 Cigna TotalCare (HMO D-SNP)

Covington, Forrest, George, Lamar, Marion, Pearl River, Perry and Stone

#### These counties also offer this plan:

H7849-016 Cigna True Choice Medicare (PPO)
Hancock, Harrison, Hinds, Jackson, Jones, Madison and Rankin



# MEDICARE ELIGIBLE POPULATION:

244,220

# MEDICARE ADVANTAGE PENETRATION:

34.46%



## **ALABAMA**

## SOUTH MISSISSIPPI

**COUNTIES** Covington, Forrest, George, Hancock, Harrison, Hinds, Jackson, Jones, Lamar, Madison, Marion, Pearl River, Perry, Rankin, Stone

PLAN ID	H4407-026-000	H4407-027-000
PLAN NAME	Cigna Preferred Medicare (HMO)	Cigna Preferred Plus Medicare (HMO)
Total Premium	\$0	\$29
Cost Share— PCP/Specialist	\$0 / \$0	\$0 / \$0
Inpatient Acute Care Hospital	\$295 per day for days 1-6; \$0 per day for days 7-90	\$250 per day for days 1-6; \$0 per day for days 7-90
Max Out-of-Pocket	\$6,100 applies to in-network Medicare-covered benefits	\$5,500 applies to in-network Medicare-covered benefits
Lab	\$0	\$0
Ambulatory Surgery Center	\$0 - \$250	\$0 - \$200
Costshare— Preferred Retail RX (One Month)	Tier 1: \$2 Tier 2: \$10 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$4 (2x one month) Tier 2: \$20 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A



## **ALABAMA**

## SOUTH MISSISSIPPI

**COUNTIES** Covington, Forrest, George, Hancock, Harrison, Hinds, Jackson, Jones, Lamar, Madison, Marion, Pearl River, Perry, Rankin, Stone

PLAN ID	H4407-004-000	H4407-011-000
PLAN NAME	Cigna TotalCare (HMO D-SNP)	Cigna Fundamental Medicare (HMO)
Total Premium	\$14.20	\$0
Cost Share— PCP/Specialist	\$0/\$0	\$0 / \$0
Inpatient Acute Care Hospital	\$1,250 per stay	\$295 per day for days 1-6; \$0 per day for days 7-90
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	\$5,900 applies to in-network Medicare-covered benefits
Lab	\$0	\$0
Ambulatory Surgery Center	0 - 20%	\$0 - \$250
Costshare— Preferred Retail RX (One Month)	N/A	N/A
Cost Share— Preferred Retail RX (Three Months)	N/A	N/A



# **ALABAMA**SOUTH MISSISSIPPI

COUNTIES Hancock, Harrison, Hinds, Jackson, Jones, Madison, Rankin

PLAN ID	H7849-016-000	
PLAN NAME	Cigna True Choice Medicare (PPO)	
	In Network	Out of Network
Total Premium	\$0	\$0
Cost Share— PCP/Specialist	\$0 - \$5 / \$25	\$40 / \$55
Inpatient Acute Care Hospital	\$250 per day for days 1-6; \$0 per day for days 7-90	35%
Max Out-of-Pocket	\$6,900 applies to in-network Medicare-covered benefits	\$10,200 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	0 - 35%
Ambulatory Surgery Center	\$0 - \$195	35%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$2 Tier 2: \$10 Tier 3: \$42 Tier 4: \$95 Tier 5: 30%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$4 (2x one month) Tier 2: \$20 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A



## STATE + MARKET **PLANS**





## STATE + MARKET PLANS

## **FLORIDA**

### 2022 OVFRVIEW



#### Florida - East Coast

#### The following counties offer these plans:

- H5410-027 Cigna Preferred Medicare (HMO)
- H5410-028 Cigna Preferred Savings Medicare (HMO)
- H5410-034 Cigna Primary Medicare (HMO)
  H5410-031 Cigna TotalCare Plus (HMO D-SNP)
- H7849-047 Cigna True Choice Medicare (PPO)

Brevard, Flagler and Volusia

#### Florida - Greater Orlando

The following counties offer these plans:

- H5410-024 Cigna Preferred Medicare (HMO)
- H5410-026 Cigna Preferred Savings Medicare (HMO)
- H5410-033 Cigna Primary Medicare (HMO)
- H5410-025 Cigna TotalCare Plus (HMO D-SNP)\*
- H7849-017 Cigna True Choice Medicare (PPO)

Lake, Orange, Osceola, Marion, Polk, Seminole and Sumter \*Cigna TotalCare Plus (HMO D-SNP) Not Available in Sumter County

#### Florida - Treasure Coast

The following counties offer these plans:

- H5410-037 Cigna Preferred Medicare (HMO)
- H5410-040 Cigna Preferred Savings Medicare (HMO) H7849-014 Cigna True Choice Medicare (PPO)

Indian River, Martin and St. Lucie

#### Miami-Dade County (Partial)

The following ZIP codes offer these plans:

■ H5410-001 Leon Medicare (HMO)

33010; 33012; 33013; 33014; 33015; 33016; 33018; 33054; 33055; 33056; 33125; 33126; 33127; 33128; 33129; 33130; 33131; 33132; 33133; 33134; 33135; 33136; 33137; 33138; 33139; 33140; 33141; 33142; 33143; 33144; 33145; 33146; 33147; 33150; 33155; 33156; 33157; 33158; 33161; 33165; 33166; 33167; 33168; 33169; 33170; 33172; 33173; 33174; 33175; 33176; 33177; 33178; 33182; 33183; 33184; 33185; 33186; 33187; 33189; 33190; 33192; 33193; 33194; 33196



## **MEDICARE ELIGIBLE POPULATION:**

2,823,373

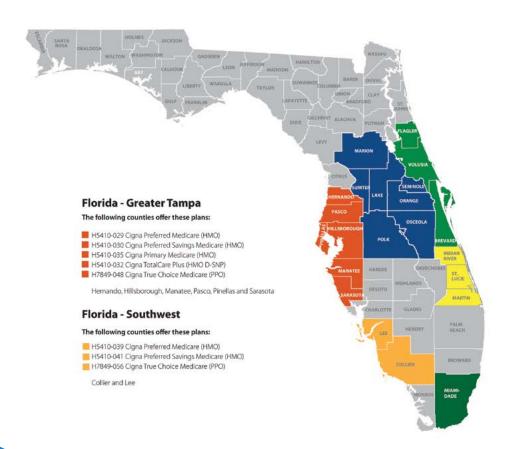
## MEDICARE ADVANTAGE **PENETRATION:**

49.16%



# FLORIDA— **CENTRAL, SOUTH AND LEON**

2022 OVFRVIFW



#### Florida - East Coast

The following counties offer these plans:

- H5410-027 Cigna Preferred Medicare (HMO)
- H5410-028 Cigna Preferred Savings Medicare (HMO) H5410-034 Cigna Primary Medicare (HMO)
- H5410-031 Cigna TotalCare Plus (HMO D-SNP)
- H7849-047 Cigna True Choice Medicare (PPO)

Brevard, Flagler and Volusia

#### Florida - Greater Orlando

The following counties offer these plans:

- H5410-024 Cigna Preferred Medicare (HMO)
- H5410-026 Cigna Preferred Savings Medicare (HMO)
- H5410-033 Cigna Primary Medicare (HMO) ■ H5410-025 Cigna TotalCare Plus (HMO D-SNP)\*
- H7849-017 Cigna True Choice Medicare (PPO)

Lake, Orange, Osceola, Marion, Polk, Seminole and Sumter \*Cigna TotalCare Plus (HMO D-SNP) Not Available in Sumter Count

#### Florida - Treasure Coast

The following counties offer these plans:

- H5410-037 Cigna Preferred Medicare (HMO)
- H5410-040 Cigna Preferred Savings Medicare (HMO)
- H7849-014 Cigna True Choice Medicare (PPO)

Indian River, Martin and St. Lucie

#### Miami-Dade County (Partial)

The following ZIP codes offer this plan:

H5410-001 Leon Medicare (HMO)

33010: 33012: 33013: 33014: 33015: 33016: 33018: 33054: 33055: 33056; 33125; 33126; 33127; 33128; 33129; 33130; 33131; 33132; 33133: 33134: 33135: 33136: 33137: 33138: 33139: 33140: 33141: 33142: 33143: 33144: 33145: 33146: 33147: 33150: 33155: 33156: 33157: 33158: 33161: 33165: 33166: 33167: 33168: 33169: 33170: 33172: 33173: 33174: 33175: 33176: 33177: 33178: 33182: 33183: 33184: 33185; 33186; 33187; 33189; 33190; 33192; 33193; 33194; 33196



## STATE + MARKET **PLANS**



# FLORIDA - NORTH

## 2022 OVERVIEW





# MEDICARE ELIGIBLE POPULATION:

205,128

# MEDICARE ADVANTAGE PENETRATION:

35.12%



# **ALABAMA**NORTH FLORIDA

**COUNTIES** Bay, Escambia, Okaloosa, Santa Rosa, Walton

PLAN ID	H5410-004-000	H5410-013-000	H5410-018-000
PLAN NAME	Cigna Fundamental Medicare (HMO)	Cigna TotalCare (HMO D-SNP)	Cigna Preferred Medicare (HMO)
Total Premium	\$0	\$15.70	\$0
Cost Share— PCP/Specialist	\$0/\$0	\$0/\$0	\$0/\$0
Inpatient Acute Care Hospital	\$275 per day for days 1-6; \$0 per day for days 7-90	\$195 per day for days 1-5; \$0 per day for days 6-90	\$275 per day for days 1-6; \$0 per day for days 7-90
Max Out-of-Pocket	\$4,900 applies to in-network Medicare-covered benefits	\$6,700 applies to in-network Medicare-covered benefits	\$4,900 applies to in-network Medicare-covered benefits
Lab	\$0	\$0	\$0
Ambulatory Surgery Center	\$0 - \$225	\$0 - \$50	\$0 - \$225
Costshare— Preferred Retail RX (One Month)	N/A	N/A	Tier 1: \$4 Tier 2: \$12 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%
Cost Share— Preferred Retail RX (Three Months)	N/A	N/A	Tier 1: \$8 (2x one month) Tier 2: \$24 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A



# **ALABAMA**NORTH FLORIDA

## **COUNTIES** Escambia, Santa Rosa

PLAN ID	H7849-044-000		
PLAN NAME	Cigna True Choice Medicare (PPO)		
	In Network	Out of Network	
Total Premium	\$0	\$0	
Cost Share— PCP/Specialist	\$0 / \$35	\$40 / \$60	
Inpatient Acute Care Hospital	\$275 per day for days 1-6; \$0 per day for days 7-90	35%	
Max Out-of-Pocket	\$4,900 applies to in-network Medicare-covered benefits	\$10,000 applies to in-network and out-of-network Medicare- covered benefits combined	
Lab	\$0	0 - 35%	
Ambulatory Surgery Center	\$0 - \$225	35%	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$2 Tier 2: \$4 Tier 3: \$40 Tier 4: \$95 Tier 5: 31%	N/A	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$5 (2.5x one month) Tier 2: \$10 (2.5x one month) Tier 3: \$120 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A	

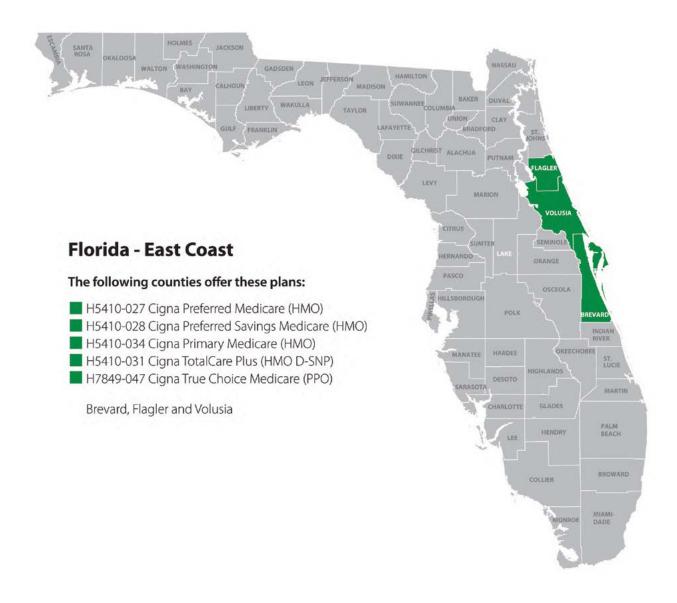


### STATE + MARKET **PLANS**



## FLORIDA — EAST COAST

#### 2022 OVERVIEW





# MEDICARE ELIGIBLE POPULATION:

354,695

# MEDICARE ADVANTAGE PENETRATION:

49.96%



### **CENTRAL FLORIDA**

### DAYTONA

**COUNTIES** Brevard, Flagler, Volusia

PLAN ID	H5410-027-000	H5410-028-000
PLAN NAME	Cigna Preferred Medicare (HMO)	Cigna Preferred Savings Medicare (HMO)
Total Premium	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$0	\$0 / \$20
Inpatient Acute Care Hospital	\$150 per day for days 1-6; \$0 per day for days 7-90	\$225 per day for days 1-6; \$0 per day for days 7-90
Max Out-of-Pocket	\$3,600 applies to in-network Medicare-covered benefits	\$5,050 applies to in-network Medicare-covered benefits
Lab	\$0	\$0
Ambulatory Surgery Center	\$0 - \$75	\$0 - \$200
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$0 Tier 3: \$35 Tier 4: \$95 Tier 5: 33%	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$0 Tier 3: \$105 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A



### **CENTRAL FLORIDA**

### DAYTONA

**COUNTIES** Brevard, Flagler, Volusia

PLAN ID	H5410-031-000	H5410-034-000
PLAN NAME	Cigna TotalCare Plus (HMO D-SNP)	Cigna Primary Medicare (HMO)
Total Premium	\$18.40	\$18
Cost Share— PCP/Specialist	\$0/\$0	\$0 / \$0
Inpatient Acute Care Hospital	\$0 per stay	\$25 per day for days 1-6; \$0 per day for days 7-90
Max Out-of-Pocket	\$3,500 applies to in-network Medicare-covered benefits	\$3,500 applies to in-network Medicare-covered benefits
Lab	\$0	\$0
Ambulatory Surgery Center	\$0	\$0 - \$25
Costshare— Preferred Retail RX (One Month)	Tier 1: \$1 Tier 2: \$12 Tier 3: 18% Tier 4: 41% Tier 5: 25%	Tier 1: \$1 Tier 2: \$11 Tier 3: 18% Tier 4: 41% Tier 5: 25%
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$2 (2x one month) Tier 2: \$24 (2x one month) Tier 3: 18% Tier 4: 41% Tier 5: N/A	Tier 1: \$2 (2x one month) Tier 2: \$22 (2x one month) Tier 3: 18% Tier 4: 41% Tier 5: N/A



### **CENTRAL FLORIDA**

### DAYTONA

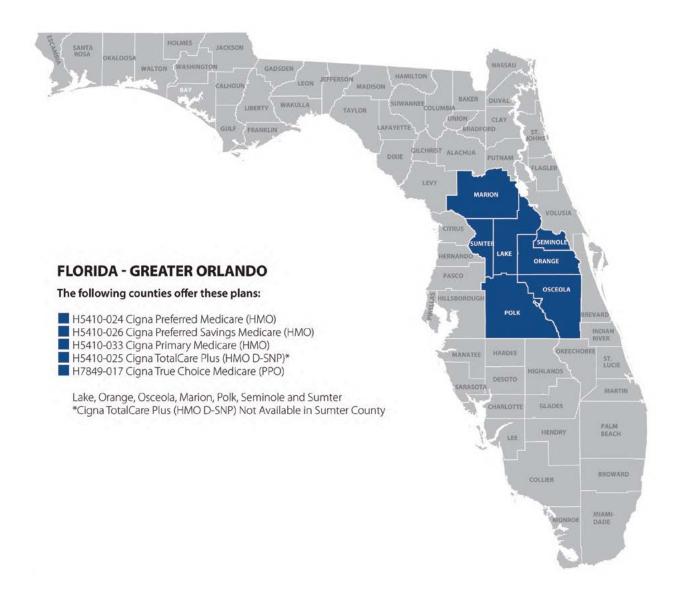
**COUNTIES** Brevard, Flagler, Volusia

PLAN ID	H7849-047-000	
PLAN NAME	Cigna True Choice Medicare (PPO)	
	In Network	Out of Network
Total Premium	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$25	\$40 / \$55
Inpatient Acute Care Hospital	\$295 per day for days 1-6; \$0 per day for days 7-90	40%
Max Out-of-Pocket	\$5,650 applies to in-network Medicare-covered benefits	\$11,150 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	0	0 - 40%
Ambulatory Surgery Center	\$0 - \$150	40%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$2 Tier 2: \$4 Tier 3: \$40 Tier 4: \$95 Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1:\$4 (2x one month) Tier 2: \$8 (2x one month) Tier 3: \$120 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A



### FLORIDA — GREATER ORLANDO

#### 2022 OVERVIEW





# MEDICARE ELIGIBLE POPULATION:

809,568

## MEDICARE ADVANTAGE PENETRATION:

54.62%



### **CENTRAL FLORIDA**

### ORLANDO

COUNTIES Lake, Marion, Orange, Osceola, Polk, Seminole, Sumter

PLAN ID NEW COUNTIE	H5410-024-000	H5410-026-000	H5410-033-000
PLAN NAME	Cigna Preferred Medicare (HMO)	Cigna Preferred Savings Medicare (HMO)	Cigna Primary Medicare (HMO)
Total Premium	\$0	\$0	\$18.90
Cost Share— PCP/Specialist	\$0/\$0	\$0 / \$15	\$0/\$0
Inpatient Acute Care Hospital	\$95 per day for days 1-6; \$0 per day for days 7-90	\$200 per day for days 1-6; \$0 per day for days 7-90	\$25 per day for days 1-6; \$0 per day for days 7-90
Max Out-of-Pocket	\$3,750 applies to in-network Medicare-covered benefits	\$3,900 applies to in-network Medicare-covered benefits	\$3,500 applies to in-network Medicare-covered benefits
Lab	\$0	\$0	\$0
Ambulatory Surgery Center	\$0 - \$75	\$0 - \$100	\$0 - \$25
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$0 Tier 3: \$35 Tier 4: \$95 Tier 5: 33%	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	Tier 1: \$1 Tier 2: \$12 Tier 3: 18% Tier 4: 41% Tier 5: 25%
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$0 Tier 3: \$105 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	Tier 1: \$2 (2x one month) Tier 2: \$24 (2x one month) Tier 3: 18% Tier 4: 41% Tier 5: N/A



### **CENTRAL FLORIDA**

### ORLANDO

**COUNTIES** Lake, Marion, Orange, Osceola, Polk, Seminole

PLAN ID	H5410-025-000 NEW COUL	
PLAN NAME	Cigna TotalCare Plus (HMO D-SNP)	
Total Premium	\$18.50	
Cost Share— PCP/Specialist	\$0/\$0	
Inpatient Acute Care Hospital	\$0 per stay	
Max Out-of-Pocket	\$3,500 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$2 Tier 2: \$13 Tier 3: 18% Tier 4: 44% Tier 5: 25%	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$4 (2x one month) Tier 2: \$26 (2x one month) Tier 3: 18% Tier 4: 44% Tier 5: N/A	



### **CENTRAL FLORIDA**

### ORLANDO

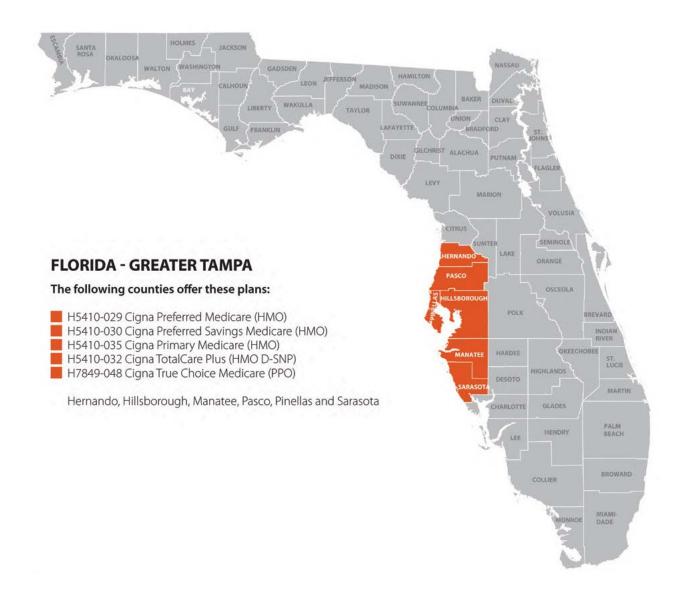
**COUNTIES** Lake, Marion, Orange, Osceola, Polk, Seminole, Sumter

PLAN ID	H7849-017-000 NEV		
PLAN NAME	Cigna True Choic	Cigna True Choice Medicare (PPO)	
TEAN NAME	In Network	Out of Network	
Total Premium	\$0	\$0	
Cost Share— PCP/Specialist	\$0 / \$25	\$40 / \$55	
Inpatient Acute Care Hospital	\$225 per day for days 1-6; \$0 per day for days 7-90	40%	
Max Out-of-Pocket	\$5,650 applies to in-network Medicare-covered benefits	\$11,150 applies to in-network and out-of-network Medicare- covered benefits combined	
Lab	0	0 - 40%	
Ambulatory Surgery Center	\$0 - \$150	40%	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$2 Tier 2: \$4 Tier 3: \$40 Tier 4: \$95 Tier 5: 33%	N/A	
Cost Share— Preferred Retail RX (Three Months)	Tier 1:\$4 (2x one month) Tier 2: \$8 (2x one month) Tier 3: \$120 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A	



### FLORIDA — GREATER TAMPA

#### 2022 OVERVIEW





# MEDICARE ELIGIBLE POPULATION:

953,040

## MEDICARE ADVANTAGE PENETRATION:

52.39%



### **CENTRAL FLORIDA**

TAMPA

**COUNTIES** Hernando, Hillsborough, Manatee, Pasco, Pinellas, Sarasota

PLAN ID NEW COUNTIE	UF 410, 020, 000	UF 410, 070, 000
PLAN ID COUNTIE	H5410-029-000	H5410-030-000
PLAN NAME	Cigna Preferred Medicare (HMO)	Cigna Preferred Savings Medicare (HMO)
Total Premium	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$0	\$0 / \$15
Inpatient Acute Care Hospital	\$150 per day for days 1-6; \$0 per day for days 7-90	\$175 per day for days 1-6; \$0 per day for days 7-90
Max Out-of-Pocket	\$3,650 applies to in-network Medicare-covered benefits	\$3,950 applies to in-network Medicare-covered benefits
Lab	\$0	\$0
Ambulatory Surgery Center	\$0 - \$95	\$0 - \$95
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$0 Tier 3: \$35 Tier 4: \$95 Tier 5: 33%	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$0 Tier 3: \$105 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A



### **CENTRAL FLORIDA**

TAMPA

**COUNTIES** Hernando, Hillsborough, Manatee, Pasco, Pinellas, Sarasota

PLAN ID NEW COUNTIE	H5410-032-000	H5410-035-000
PLAN NAME	Cigna TotalCare Plus (HMO D-SNP)	Cigna Primary Medicare (HMO)
Total Premium	\$18.00	\$17.90
Cost Share— PCP/Specialist	\$0/\$0	\$0/\$0
Inpatient Acute Care Hospital	\$0 per stay	\$25 per day for days 1-6; \$0 per day for days 7-90
Max Out-of-Pocket	\$3,500 applies to in-network Medicare-covered benefits	\$3,500 applies to in-network Medicare-covered benefits
Lab	\$0	\$0
Ambulatory Surgery Center	\$0	\$0 - \$25
Costshare— Preferred Retail RX (One Month)	Tier 1: \$1 Tier 2: \$12 Tier 3: 18% Tier 4: 41% Tier 5: 25%	Tier 1: \$1 Tier 2: \$12 Tier 3: 18% Tier 4: 41% Tier 5: 25%
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$2 (2x one month) Tier 2: \$24 (2x one month) Tier 3: 18% Tier 4: 41% Tier 5: N/A	Tier 1: \$2 (2x one month) Tier 2: \$24 (2x one month) Tier 3: 18% Tier 4: 41% Tier 5: N/A



### **CENTRAL FLORIDA**

TAMPA

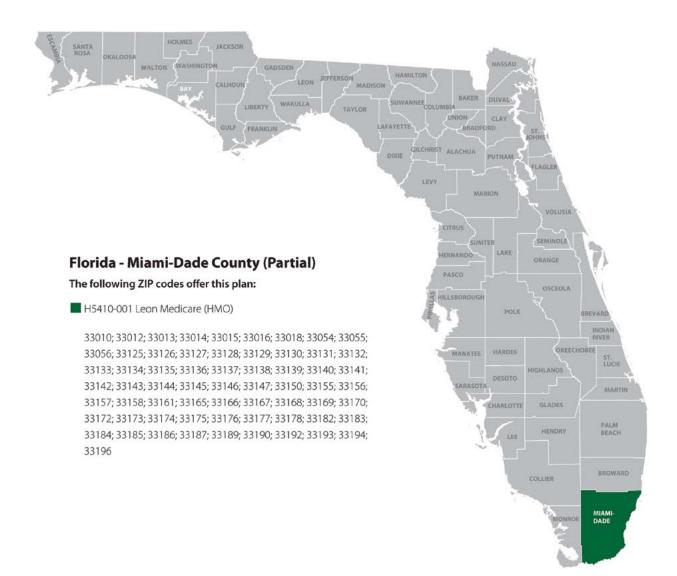
COUNTIES COUNTIES Hernando, Hillsborough, Manatee, Pasco, Pinellas, Sarasota

PLAN ID	H7849-048-000	
PLAN NAME	Cigna True Choice Medicare (PPO)	
	In Network	Out of Network
Total Premium	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$25	\$40 / \$55
Inpatient Acute Care Hospital	\$225 per day for days 1-6; \$0 per day for days 7-90	40%
Max Out-of-Pocket	\$5,650 applies to in-network Medicare-covered benefits	\$11,150 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	0 - 40%
Ambulatory Surgery Center	\$0 - \$150	40%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$2 Tier 2: \$4 Tier 3: \$40 Tier 4: \$95 Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$4 (2x one month) Tier 2: \$8 (2x one month) Tier 3: \$120 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A



## FLORIDA — MIAMI-DADE COUNTY

#### 2022 OVERVIEW



#### **SOUTH FLORIDA**

#### LEON

**COUNTIES** Miami-Dade (Partial - 33010; 33012; 33013; 33014; 33015; 33016; 33018; 33054; 33055; 33056; 33125; 33126; 33127; 33128; 33129; 33130; 33131; 33132; 33133; 33134; 33135; 33136; 33137; 33138; 33139; 33140; 33141; 33142; 33143; 33144; 33145; 33146; 33147; 33150; 33155; 33156; 33157; 33158; 33161; 33165; 33166; 33167; 33168; 33169; 33170; 33172; 33173; 33174; 33175; 33176; 33177; 33178; 33182; 33183; 33184; 33185; 33186; 33187; 33189; 33190; 33192; 33193; 33194; 33196)

PLAN ID	H5410-001-000
PLAN NAME	Leon Medicare (HMO)
Total Premium	\$0
Cost Share— PCP/Specialist	\$0/\$0
Inpatient Acute Care Hospital	\$0
Max Out-of-Pocket	\$1,000 applies to in-network Medicare-covered benefits
Lab	\$0
Ambulatory Surgery Center	\$0
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$0 Tier 3: \$40 Tier 4: 33%
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$0 Tier 3: \$105 (2.625x one month) Tier 4: N/A



### FLORIDA — SOUTHWEST

#### 2022 OVERVIEW





# MEDICARE ELIGIBLE POPULATION:

313,126

## MEDICARE ADVANTAGE PENETRATION:

38.43%



#### **SOUTH FLORIDA**

### SOUTHWEST FLORIDA

#### **COUNTIES** Collier, Lee

PLAN ID NEW PLANS	H5410-039-000	H5410-041-000
PLAN NAME	Cigna Preferred Medicare (HMO)	Cigna Preferred Savings Medicare (HMO)
Total Premium	\$0	\$0
Cost Share— PCP/Specialist	\$0	\$0 / \$15
Inpatient Acute Care Hospital	\$0	\$200 per day for days 1-6; \$0 per day for days 7-90
Max Out-of-Pocket	\$3,600 applies to in-network Medicare-covered benefits	\$3,900 applies to in-network Medicare-covered benefits
Lab	\$0	\$0
Ambulatory Surgery Center	\$0 - \$75	\$0 - \$100
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$0 Tier 3: \$35 Tier 4: \$95 Tier 5: 33%	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$0 Tier 3: \$105 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A



### **SOUTH FLORIDA**

### SOUTHWEST FLORIDA

**COUNTIES** Collier, Lee

PLAN ID	H7849-056-000		
PLAN NAME		Medicare (PPO)	
	In Network	Out of Network	
Total Premium	\$0	\$0	
Cost Share— PCP/Specialist	\$0 / \$35	\$50 / \$60	
Inpatient Acute Care Hospital	\$225 per day for days 1-5; \$0 per day for days 6-90	40%	
Max Out-of-Pocket	\$5,000 applies to in-network Medicare-covered benefits	\$10,000 applies to in-network and out-of-network Medicare- covered benefits combined	
Lab	\$0 - \$20	0 - 40%	
Ambulatory Surgery Center	\$0 - \$150	40%	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$10 Tier 3: \$45 Tier 4: \$100 Tier 5: 30%	N/A	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$30 (3x one month) Tier 3: \$135 (3x one month) Tier 4: \$300 (3x one month) Tier 5: N/A	N/A	



### STATE + MARKET **PLANS**



### FLORIDA — TREASURE COAST

2022 OVERVIEW





# MEDICARE ELIGIBLE POPULATION:

187,816

# MEDICARE ADVANTAGE PENETRATION:

40.93%



### **SOUTH FLORIDA**

### TREASURE COAST

**COUNTIES** Indian River, Martin, St. Lucie

PLANID NEW PLANS	H5410-037-000	H5410-040-000
PLAN NAME	Cigna Preferred Medicare (HMO)	Cigna Preferred Savings Medicare (HMO)
Total Premium	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$0	\$0 / \$15
Inpatient Acute Care Hospital	\$95 per day for days 1-6; \$0 per day for days 7-90	\$200 per day for days 1-6; \$0 per day for days 7-90
Max Out-of-Pocket	\$3,600 applies to in-network Medicare-covered benefits	\$3,900 applies to in-network Medicare-covered benefits
Lab	\$0	\$0
Ambulatory Surgery Center	\$0 - \$75	\$0 - \$100
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$0 Tier 3: \$35 Tier 4: \$95 Tier 5: 33%	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$0 Tier 3: \$105 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A



### **SOUTH FLORIDA**

### TREASURE COAST

**COUNTIES** Indian River, Martin, St. Lucie

PLAN ID	H7849-014-000	
PLAN NAME	Cigna True Choice Medicare (PPO)	
PLAN NAME	In Network	Out of Network
Total Premium	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$35	\$50 / \$60
Inpatient Acute Care Hospital	\$225 per day for days 1-5; \$0 per day for days 6-90	40%
Max Out-of-Pocket	\$5,000 applies to in-network Medicare-covered benefits	\$10,000 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0 - \$20	0 - 40%
Ambulatory Surgery Center	\$0 - \$150	40%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$10 Tier 3: \$45 Tier 4: \$100 Tier 5: 30%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$30 (3x one month) Tier 3: \$135 (3x one month) Tier 4: \$300 (3x one month) Tier 5: N/A	N/A

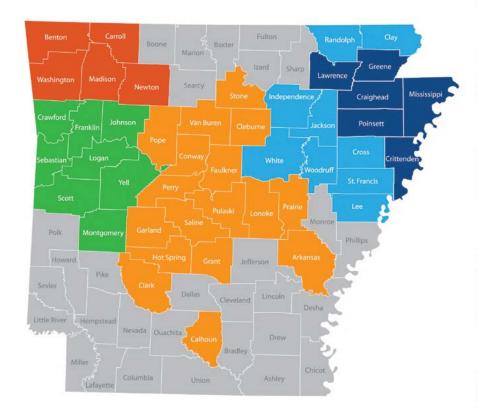


### STATE + MARKET **PLANS**



## **ARKANSAS**

#### 2022 OVERVIEW



#### **Arkansas - Northwest**

The following counties offer this plan:

H4513-052 Cigna Preferred Medicare (HMO)
 Benton, Carroll, Madison, Newton and Washington

#### Arkansas - West

The following counties offer this plan:

H4513-051 Cigna Preferred Medicare (HMO)

Crawford, Franklin, Johnson, Logan, Montgomery, Scott, Sebastian and Yell

#### **Arkansas - Central**

The following counties offer this plan:

H4513-050 Cigna Preferred Medicare (HMO)

Arkansas, Calhoun, Clark, Cleburne, Conway, Faulkner, Garland, Grant, Hot Spring, Lonoke, Perry, Pope, Prairie, Pulaski, Saline, Stone and Van Buren

#### Arkansas - Jonesboro

The following counties offer these plans:

- H4513-038 Cigna Preferred Medicare (HMO)
- H4513-039 Cigna TotalCare (HMO D-SNP)

Craighead, Crittenden, Greene, Lawrence, Mississippi and Poinsett

The following counties offer this plan:

H4513-038 Cigna Preferred Medicare (HMO)

Clay, Cross, Independence, Jackson, Lee, Randolph, St. Francis, White and Woodruff



# MEDICARE ELIGIBLE POPULATION:

498,072

## MEDICARE ADVANTAGE PENETRATION:

33.63%



### STATE + MARKET **PLANS**



### **ARKANSAS — NORTHWEST**

2022 OVERVIEW





# MEDICARE ELIGIBLE POPULATION:

94,874

## MEDICARE ADVANTAGE PENETRATION:

38.90%



#### **TENNESSEE**

**ARKANSAS** 

**COUNTIES** Benton, Carroll, Madison, Newton, Washington

PLAN ID	H4513-052-000	NEW COUNT
PLAN NAME	Cigna Preferred Medicare (HMO)	
Total Premium	\$0	
Cost Share— PCP/Specialist	\$0 - \$15	
Inpatient Acute Care Hospital	\$325 per day for days 1-5; \$0 per day for days 6-90	
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - \$200	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$15 Tier 3: \$42 Tier 4: 50% Tier 5: 33%	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$30 (2x one month) Tier 3: \$126 (3x one month) Tier 4: 50% Tier 5: N/A	



### **ARKANSAS — WEST**

#### 2022 OVERVIEW





# MEDICARE ELIGIBLE POPULATION:

66,704

# MEDICARE ADVANTAGE PENETRATION:

39.42%



#### **TENNESSEE**

**ARKANSAS** 

COUNTIES Crawford, Franklin, Johnson, Logan, Montgomery, Scott, Sebastian, Yell

PLAN ID	H4513-051-000	COUNT
PLAN NAME	Cigna Preferred Medicare (HMO)	
Total Premium	\$0	
Cost Share— PCP/Specialist	\$0 / \$15	
Inpatient Acute Care Hospital	\$325 per day for days 1-5; \$0 per day for days 6-90	
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - \$200	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$15 Tier 3: \$42 Tier 4: 50% Tier 5: 33%	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$30 (2x one month) Tier 3: \$126 (3x one month) Tier 4: 50% Tier 5: N/A	



### **ARKANSAS — CENTRAL**

#### 2022 OVERVIEW





# MEDICARE ELIGIBLE POPULATION:

229,784

# MEDICARE ADVANTAGE PENETRATION:

30.73%



#### **TENNESSEE**

### **ARKANSAS**

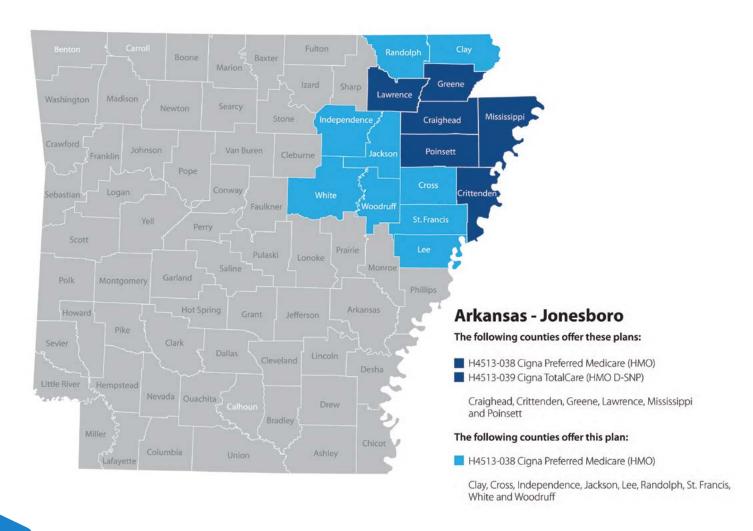
**COUNTIES** Arkansas, Calhoun, Clark, Cleburne, Conway, Faulkner, Garland, Grant, Hot Spring, Lonoke, Perry, Pope, Prairie, Pulaski, Saline, Stone, Van Buren

		NEW
PLAN ID	H4513-050-000	COUNTI
PLAN NAME	Cigna Preferred Medicare (HMO)	
Total Premium	\$0	
Cost Share— PCP/Specialist	\$0 - \$15	
Inpatient Acute Care Hospital	\$350 per day for days 1-5; \$0 per day for days 6-90	
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - \$200	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$15 Tier 3: \$42 Tier 4: 50% Tier 5: 33%	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$30 (2x one month) Tier 3: \$126 (3x one month) Tier 4: 50% Tier 5: N/A	



### ARKANSAS — EAST

#### 2022 OVERVIEW





# MEDICARE ELIGIBLE POPULATION:

106,710

## MEDICARE ADVANTAGE PENETRATION:

31.59%



#### **TENNESSEE**

#### **ARKANSAS**

**COUNTIES** 

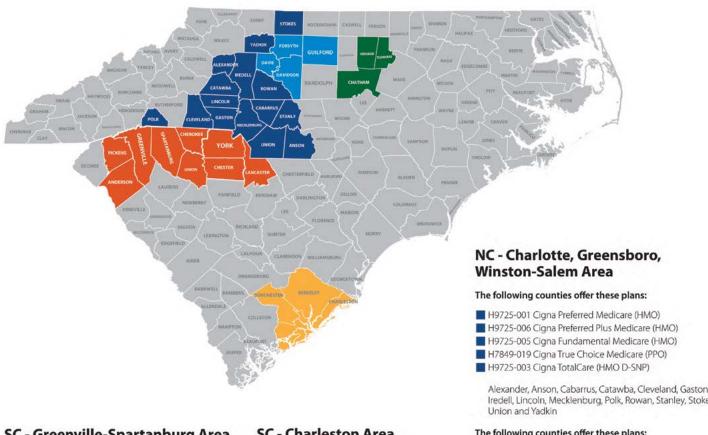
Clay, Craighead, Crittenden, Cross, Greene, Independence, Jackson, Lawrence, Lee, Mississippi, Poinsett, Randolph, St. Francis, White, Woodruff Craighead, Crittenden, Greene, Lawrence, Mississippi, Poinsett

PLAN ID NEW COUN	H4513-038-000	H4513-039-000
PLAN NAME	Cigna Preferred Medicare (HMO)	Cigna TotalCare Plus (HMO D-SNP)
Total Premium	\$0	\$20.20
Cost Share— PCP/Specialist	\$0 / \$15	0 - 20%
Inpatient Acute Care Hospital	\$325 per day for days 1-5; \$0 per day for days 6-90	20%
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	\$222 per day for days 1-10; \$0 per day for days 11-90
Lab	\$0	\$7,550 applies to in-network Medicare-covered benefits
Ambulatory Surgery Center	\$0 - \$200	0 - 20%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$15 Tier 3: \$42 Tier 4: 47% Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$30 (2x one month) Tier 3: \$126 (3x one month) Tier 4: 47% Tier 5: N/A	N/A



## **NORTH AND SOUTH CAROLINA**

#### 2022 OVERVIEW



#### SC - Greenville-Spartanburg Area

#### The following counties offer these plans:

- H7020-004 Cigna Preferred Medicare (HMO) H7020-006 Cigna Preferred Plus Medicare (HMO)
- H7020-005 Cigna Fundamental Medicare (HMO)
- H7849-018 Cigna True Choice Medicare (PPO)

Anderson, Cherokee, Chester, Greenville, Lancaster,

#### SC - Charleston Area

#### The following counties offer these plans:

H7020-008 Cigna Preferred Medicare (HMO) H7849-045 Cigna True Choice Medicare (PPO)

Berkeley, Charleston and Dorchester

Alexander, Anson, Cabarrus, Catawba, Cleveland, Gaston, Iredell, Lincoln, Mecklenburg, Polk, Rowan, Stanley, Stokes,

#### The following counties offer these plans:

- H9725-001 Cigna Preferred Medicare (HMO)
- H9725-006 Cigna Preferred Plus Medicare (HMO)
- H9725-005 Cigna Fundamental Medicare (HMO)
- H7849-011 Cigna True Choice Medicare (PPO)
- H9725-003 Cigna TotalCare (HMO D-SNP)

Davidson, Davie, Forsyth and Guilford

#### **NC - Durham Area**

#### The following counties offer these plans:

- H9725-007 Cigna Preferred Medicare (HMO)
- H7849-046 Cigna True Choice Medicare (PPO)
- H9725-003 Cigna TotalCare (HMO D-SNP)

Chatham, Durham and Orange



### STATE + MARKET **PLANS**



### **NORTH CAROLINA**

#### 2022 OVERVIEW



- H9725-006 Cigna Preferred Plus Medicare (HMO)
- H9725-005 Cigna Fundamental Medicare (HMO)
- H7849-019 Cigna True Choice Medicare (PPO)
- H9725-003 Cigna TotalCare (HMO D-SNP)

Alexander, Anson, Cabarrus, Catawba, Cleveland, Gaston, Iredell, Lincoln, Mecklenburg, Polk, Rowan, Stanley, Stokes, Union and Yadkin

#### The following counties offer these plans:

- H9725-001 Cigna Preferred Medicare (HMO)
- H9725-006 Cigna Preferred Plus Medicare (HMO)
- H9725-005 Cigna Fundamental Medicare (HMO)
- H7849-011 Cigna True Choice Medicare (PPO)
- H9725-003 Cigna TotalCare (HMO D-SNP)

Davidson, Davie, Forsyth and Guilford

#### NC - Durham Area

#### The following counties offer these plans:

- H9725-007 Cigna Preferred Medicare (HMO)
- H7849-046 Cigna True Choice Medicare (PPO)
- H9725-003 Cigna TotalCare (HMO D-SNP)

Chatham, Durham and Orange



#### **MEDICARE ELIGIBLE POPULATION:**

776,009

#### MEDICARE ADVANTAGE **PENETRATION:**

50.67%



## **CAROLINAS**

## NORTH CAROLINA

**COUNTIES** Alexander, Anson, Cabarrus, Catawba, Cleveland, Davidson, Davie, Forsyth, Gaston, Guilford, Iredell, Lincoln, Mecklenburg, Polk, Rowan, Stokes, Union, Yadkin

PLAN ID NEW COUNTIE	S H9725-001-000	Н9725-005-000	Н9725-006-000
PLAN NAME	Cigna Preferred Medicare (HMO)	Cigna Fundamental Medicare (HMO)	Cigna Preferred Plus Medicare (HMO)
Total Premium	\$0	\$0	\$29
Cost Share— PCP/Specialist	\$0 / \$20	\$0 / \$20	\$0 / \$10
Inpatient Acute Care Hospital	\$295 per day for days 1-6; \$0 per day for days 7-90	\$285 per day for days 1-6; \$0 per day for days 7-90	\$275 per day for days 1-5; \$0 per day for days 6-90
Max Out-of-Pocket	\$4,900 applies to in-network Medicare-covered benefits	\$4,900 applies to in-network Medicare-covered benefits	\$3,900 applies to in-network Medicare-covered benefits
Lab	0	0	0
Ambulatory Surgery Center	\$0 - \$225	\$0 - \$225	\$0 - \$175
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$8 Tier 3: \$47 Tier 4: \$95 Tier 5: 33%	N/A	Tier 1: \$0 Tier 2: \$4 Tier 3: \$47 Tier 4: \$95 Tier 5: 33%
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$16 (2x one month) Tier 3: \$141 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$141 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A



### **CAROLINAS**

### NORTH CAROLINA

**COUNTIES** Alexander, Anson, Cabarrus, Catawba, Chatham, Cleveland, Davidson, Davie, Durham, Forsyth, Gaston, Guilford, Iredell, Lincoln, Mecklenburg, Orange, Polk,

Rowan, Stokes, Union, Yadkin **PLANID** H9725-003-000 **PLAN NAME** Cigna TotalCare (HMO D-SNP) **Total Premium** \$29.50 Cost Share— \$0/\$0 **PCP/Specialist Inpatient Acute** \$1,400 per stay **Care Hospital** Max Out-of-Pocket \$7,550 applies to in-network Medicare-covered benefits Lab \$0 **Ambulatory** 0 - 20% **Surgery Center** Costshare— **Preferred Retail RX** N/A (One Month) Cost Share— **Preferred Retail RX** N/A (Three Months)



## **CAROLINAS**

## NORTH CAROLINA

**COUNTIES** Chatham, Durham, Orange

PLAN ID NEW PLANS	H9725-007-000	H7849-0	46-000
PLAN NAME	Cigna Preferred Medicare (HMO)	Cigna True Choice Medicare (PPO)	
T EAR WATE	cigila i referred riculture (iii 10)	In Network	Out of Network
Total Premium	\$0	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$20	\$0 / \$25	\$30 / \$55
Inpatient Acute Care Hospital	\$325 per day for days 1-5; \$0 per day for days 6-90	\$335 per day for days 1-6; \$0 per day for days 7-90	35%
Max Out-of-Pocket	\$4,500 applies to in-network Medicare-covered benefits	\$6,500 applies to in-network Medicare-covered benefits	\$10,000 applies to in-network and out-of- network Medicare-covered benefits combined
Lab	\$0	\$0	0 - 35%
Ambulatory Surgery Center	\$0 - \$225	\$0 - \$250	35%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$5 Tier 3: \$47 Tier 4: \$95 Tier 5: 33%	Tier 1: \$0 Tier 2: \$10 Tier 3: \$47 Tier 4: \$95 Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$141 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	Tier 1: \$0 Tier 2: \$20 (2x one month) Tier 3: \$141 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A



## **CAROLINAS**

## NORTH CAROLINA

**COUNTIES** Alexander, Anson, Cabarrus, Catawba, Cleveland, Gaston, Iredell, Lincoln, Mecklenburg, Polk, Rowan, Stokes, Union, Yadkin

PLAN ID	H7849-019-000 NEW COUL	
PLAN NAME		e Medicare (PPO)
	In Network	Out of Network
Total Premium	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$25	\$40 / \$55
Inpatient Acute Care Hospital	\$295 per day for days 1-7; \$0 per day for days 8-90	30%
Max Out-of-Pocket	\$5,750 applies to in-network Medicare-covered benefits	\$11,000 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	0 - 30%
Ambulatory Surgery Center	\$0 - \$250	30%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$10 Tier 3: \$47 Tier 4: \$95 Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$20 (2x one month) Tier 3: \$141 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A



## **CAROLINAS**

## NORTH CAROLINA

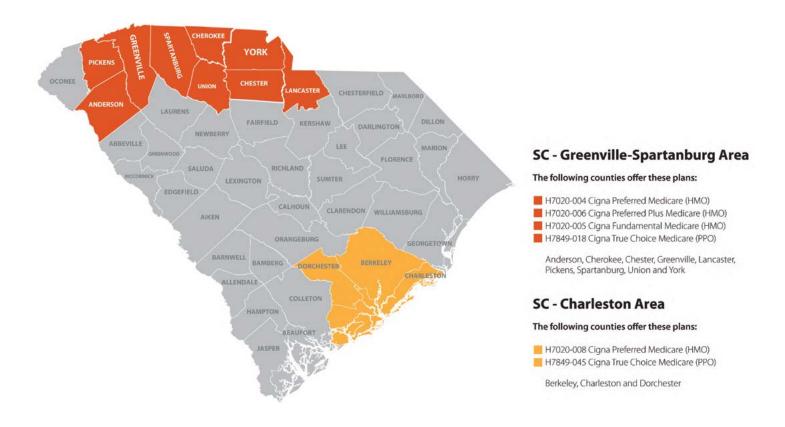
**COUNTIES** Davidson, Davie, Forsyth, Guilford

PLAN ID	H7849-011-000	
PLAN NAME Cigna True Choice Medicare (PPO)		e Medicare (PPO)
PLAN NAME	In Network	Out of Network
Total Premium	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$25	\$50 / \$60
Inpatient Acute Care Hospital	\$295 per day for days 1-7; \$0 per day for days 8-90	30%
Max Out-of-Pocket	\$5,750 applies to in-network Medicare-covered benefits	\$11,000 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	0 - 30%
Ambulatory Surgery Center	\$0 - \$250	30%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$10 Tier 3: \$47 Tier 4: \$95 Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$20 (2x one month) Tier 3: \$141 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A



## **SOUTH CAROLINA**

#### 2022 OVERVIEW





# MEDICARE ELIGIBLE POPULATION:

486,507

# MEDICARE ADVANTAGE PENETRATION:

38.68%



## **CAROLINAS**

## SOUTH CAROLINA

**COUNTIES** Anderson, Cherokee, Chester, Greenville, Lancaster, Pickens, Spartanburg, Union, York

PLAN ID	H7020-004-000	H7020-005-000	H7020-006-000
PLAN NAME	Cigna Preferred Medicare (HMO)	Cigna Fundamental Medicare (HMO)	Cigna Preferred Plus Medicare (HMO)
Total Premium	\$0	\$0	\$23
Cost Share— PCP/Specialist	\$0 / \$20	\$0 / \$20	\$0 / \$10
Inpatient Acute Care Hospital	\$295 per day for days 1-7; \$0 per day for days 8-90	\$295 per day for days 1-5; \$0 per day for days 6-90	\$275 per day for days 1-6; \$0 per day for days 7-90
Max Out-of-Pocket	\$5,500 applies to in-network Medicare-covered benefits	\$5,900 applies to in-network Medicare-covered benefits	\$4,500 applies to in-network Medicare-covered benefits
Lab	\$0	\$0	\$0
Ambulatory Surgery Center	\$0 - \$250	\$0 - \$250	\$0 - \$175
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$8 Tier 3: \$47 Tier 4: \$95 Tier 5: 33%	N/A	Tier 1: \$0 Tier 2: \$4 Tier 3: \$47 Tier 4: \$95 Tier 5: 33%
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$16 (2x one month) Tier 3: \$141 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$141 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A



# **CAROLINAS**SOUTH CAROLINA

**COUNTIES** Berkeley, Charleston, Dorchester

DI ANUE	UT000 000	NEV
PLAN ID	H7020-008-000	OU
PLAN NAME	Cigna Preferred Medicare (HMO)	
Total Premium	\$0	
Cost Share— PCP/Specialist	\$0 / \$30	
Inpatient Acute Care Hospital	\$295 per day for days 1-7; \$0 per day for days 8-90	
Max Out-of-Pocket	\$5,900 applies to in-network Medicare-covered benefits	
Lab	0	
Ambulatory Surgery Center	\$0 - \$250	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$8 Tier 3: \$47 Tier 4: \$95 Tier 5: 33%	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$16 (2x one month) Tier 3: \$141 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	



# **CAROLINAS**SOUTH CAROLINA

**COUNTIES** Charleston, Berkeley, Dorchester

PLAN ID	H7849-045-000		
PLAN NAME	Cigna True Choice Medicare (PPO)		
I ENVIRAILE	In Network	Out of Network	
Total Premium	\$0	\$0	
Cost Share— PCP/Specialist	\$0 / \$30	\$30 / \$55	
Inpatient Acute Care Hospital	\$335 per day for days 1-6; \$0 per day for days 7-90	35%	
Max Out-of-Pocket	\$6,500 applies to in-network Medicare-covered benefits	\$10,000 applies to in-network and out-of-network Medicare- covered benefits combined	
Lab	\$0	0 - 30%	
Ambulatory Surgery Center	\$0 - \$250	35%	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$10 Tier 3: \$47 Tier 4: \$95 Tier 5: 33%	N/A	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$20 (2x one month) Tier 3: \$141 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A	



## **CAROLINAS**

## SOUTH CAROLINA

**COUNTIES** Anderson, Cherokee, Chester, Greenville, Lancaster, Pickens, Spartanburg, Union, York

PLAN ID	H7849-0	018-000 NEW COUL	
PLAN NAME	Cigna True Choice Medicare (PPO)		
I LAN NAPIL	In Network	Out of Network	
Total Premium	\$0	\$0	
Cost Share— PCP/Specialist	\$0 / \$25	\$30 / \$55	
Inpatient Acute Care Hospital	\$315 per day for days 1-7; \$0 per day for days 8-90	35%	
Max Out-of-Pocket	\$6,800 applies to in-network Medicare-covered benefits	\$11,000 applies to in-network and out-of-network Medicare- covered benefits combined	
Lab	\$0	0 - 35%	
Ambulatory Surgery Center	\$0 - \$250	35%	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$12 Tier 3: \$47 Tier 4: \$95 Tier 5: 33%	N/A	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$24 (2x one month) Tier 3: \$141 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A	

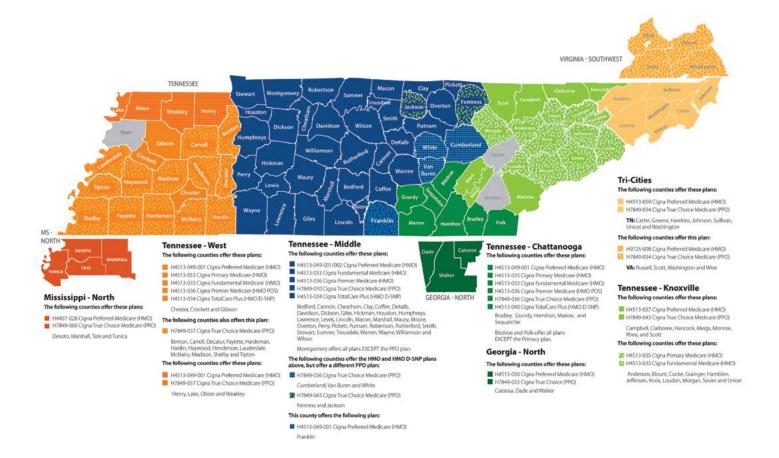


## STATE + MARKET **PLANS**



# TENNESSE, NORTH GEORGIA, NORTH MISSISSIPPI, SOUTHERN VIRGINIA

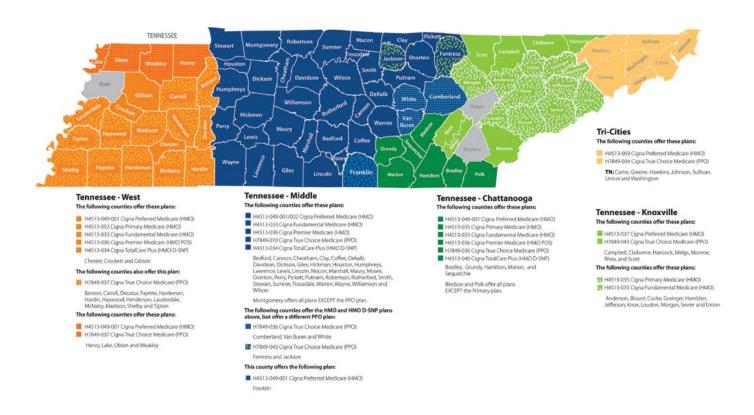
2022 OVERVIEW





## **TENNESSEE**

#### 2022 OVERVIEW





# MEDICARE ELIGIBLE POPULATION:

1,354,474

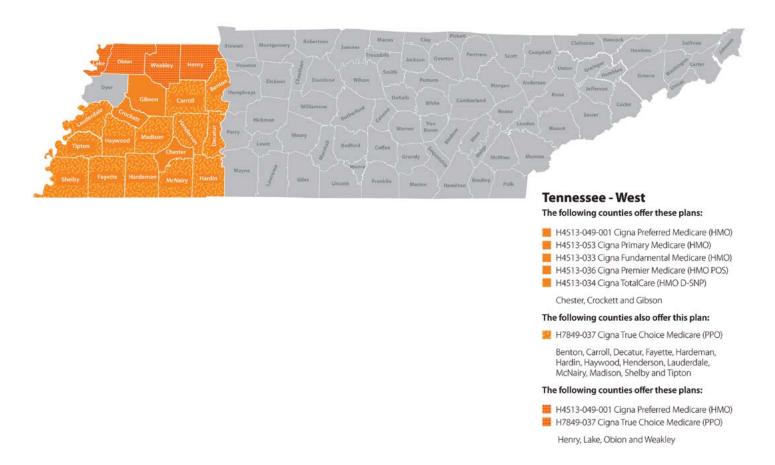
# MEDICARE ADVANTAGE PENETRATION:

44.87%



# **TENNESSEE — WEST**

### 2022 OVERVIEW





MEDICARE ELIGIBLE POPULATION:

295,838

MEDICARE ADVANTAGE PENETRATION:

36.81%



## **TENNESSEE**

### **TENNESSEE**

COUNTIES Bedford, Benton, Bledsoe, Bradley, Cannon, Carroll, Chester, Clay, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Fayette, Fentress, Franklin, Gibson, Giles, Grundy, Hamilton, Hardeman, Hardin, Haywood, Henderson, Henry, Houston, Humphreys, Jackson, Lake, Lauderdale, Lawrence, Lewis, Lincoln, Macon, Madison, Marion, Marshall, Maury, McNairy, Moore, Obion, Overton, Perry, Pickett, Polk, Putnam, Rutherford, Sequatchie, Shelby, Smith, Stewart, Sumner, Tipton, Trousdale, Van Buren, Warren, Wayne, Weakley, White, Williamson, Wilson

H4513-049-001 NEW COUNT	
Cigna Preferred Medicare (HMO)	
\$0	
\$0/\$5	
\$325 per day for days 1-5; \$0 per day for days 6-90	
\$5,900 applies to in-network Medicare-covered benefits	
\$0	
\$0 - \$275	
Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: 50% Tier 5: 33%	
Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: 50% Tier 5: N/A	



## **TENNESSEE**

## **TENNESSEE**

**COUNTIES** Benton, Carroll, Chester, Crockett, Decatur, Fayette, Gibson, Hardeman, Hardin, Haywood, Henderson, Lauderdale, Madison, McNairy, Shelby, Tipton

PLAN ID	H4513-053-000
PLAN NAME	Cigna Primary Medicare (HMO)
Total Premium	\$21.70
Cost Share— PCP/Specialist	\$0 / \$0
Inpatient Acute Care Hospital	\$500 per stay
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits
Lab	\$0
Ambulatory Surgery Center	\$0 - \$110
Costshare— Preferred Retail RX (One Month)	N/A
Cost Share— Preferred Retail RX (Three Months)	N/A



## **TENNESSEE**

## **TENNESSEE**

COUNTIES Anderson, Bedford, Benton, Bledsoe, Blount, Bradley, Cannon, Carroll, Cheatham, Chester, Clay, Cocke, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Dickson, Fayette, Fentress, Gibson, Giles, Grainger, Grundy, Hamblen, Hamilton, Hardeman, Hardin, Haywood, Henderson, Hickman, Houston, Humphreys, Jackson, Jefferson, Knox, Lauderdale, Lawrence, Lewis, Lincoln, Loudon, Macon, Madison, Marion, Marshall, Maury, McNairy, Montgomery, Moore, Morgan, Overton, Perry, Pickett, Polk, Putnam, Robertson, Rutherford, Sequatchie, Sevier, Shelby, Smith, Stewart, Sumner, Tipton, Trousdale, Union, Van Buren, Warren, Wayne, White, Williamson, Wilsone

PLAN ID	H4513-033-000
PLAN NAME	Cigna Fundamental Medicare (HMO)
Total Premium	\$0
Cost Share— PCP/Specialist	\$0 / \$30
Inpatient Acute Care Hospital	\$270 per day for days 1-5; \$0 per day for days 6-90
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits
Lab	\$0
Ambulatory Surgery Center	\$0 - \$100
Costshare— Preferred Retail RX (One Month)	N/A
Cost Share— Preferred Retail RX (Three Months)	N/A



### **TENNESSEE**

### **TENNESSEE**

**COUNTIES** Bedford, Benton, Cannon, Carroll, Cheatham, Chester, Clay, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Dickson, Fayette, Fentress, Gibson, Giles, Hardeman, Hardin, Haywood, Henderson, Hickman, Houston, Humphreys, Jackson, Lauderdale, Lawrence, Lewis, Lincoln, Macon, Madison, Marshall, Maury, McNairy, Montgomery, Moore, Overton, Perry, Pickett, Putnam, Robertson, Rutherford, Shelby, Smith, Stewart, Sumner, Tipton, Trousdale, Van Buren, Warren, Wayne, White, Williamson, Wilson

PLAN ID	H4513-034-000
PLAN NAME	Cigna TotalCare Plus (HMO D-SNP)
Total Premium	\$25.50
Cost Share— PCP/Specialist	0 - 20% / 20%
Inpatient Acute Care Hospital	\$222 per day for days 1-10; \$0 per day for days 11-90
Max Out-of-Pocket	\$7,550 applies to in-network Medicare-covered benefits
Lab	0 - 20%
Ambulatory Surgery Center	0 - 20%
Costshare— Preferred Retail RX (One Month)	N/A
Cost Share— Preferred Retail RX (Three Months)	N/A



## **TENNESSEE**

## **TENNESSEE**

COUNTIES Bedford, Benton, Bledsoe, Bradley, Cannon, Carroll, Cheatham, Chester, Clay, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Dickson, Fayette, Fentress, Gibson, Giles, Grundy, Hamilton, Hardeman, Hardin, Haywood, Henderson, Hickman, Houston, Humphreys, Jackson, Lauderdale, Lawrence, Lewis, Lincoln, Macon, Madison, Marion, Marshall, Maury, McNairy, Montgomery, Moore, Overton, Perry, Pickett, Polk, Putnam, Robertson, Rutherford, Sequatchie, Shelby, Smith, Stewart, Sumner, Tipton, Trousdale, Van Buren, Warren, Wayne, White, Williamson, Wilson

PLAN ID	H4513-036-000	
PLAN NAME	Cigna Premier Medicare (HMO-POS)	
T EARLY WALLE	In Network	Out of Network
Total Premium	\$55	\$0
Cost Share— PCP/Specialist	\$0 / \$30	30% / 30%
Inpatient Acute Care Hospital	\$300 per day for days 1-5; \$0 per day for days 6-90	30%
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	There is no maximum out of pocket cost for out-of-network benefits
Lab	\$0	0 - 30%
Ambulatory Surgery Center	\$0 - \$225	30%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$3 Tier 2: \$12 Tier 3: \$42 Tier 4: 40% Tier 5: 29%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$6 (2x one month) Tier 2: \$24 (2x one month) Tier 3: \$126 (3x one month) Tier 4: 40% Tier 5: N/A	N/A



## TENNESSEE TENNESSEE

**COUNTIES** Benton, Carroll, Decatur, Fayette, Hardeman, Hardin, Haywood, Henderson, Henry, Lake, Lauderdale, McNairy, Madison, Obion, Shelby, Tipton, Weakley

PLAN ID	H7849-037-000 NEW COUN	
PLAN NAME	Cigna True Choice Medicare (PPO)	
	In Network	Out of Network
Total Premium	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$30	\$40 / \$55
Inpatient Acute Care Hospital	\$295 per day for days 1-5; \$0 per day for days 6-90	30%
Max Out-of-Pocket	\$6,300 applies to in-network Medicare-covered benefits	\$10,000 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	0 - 30%
Ambulatory Surgery Center	\$0 - \$195	30%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$40 Tier 4: \$80 Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2.5x one month) Tier 3: \$120 (3x one month) Tier 4: \$240 (3x one month) Tier 5: N/A	N/A

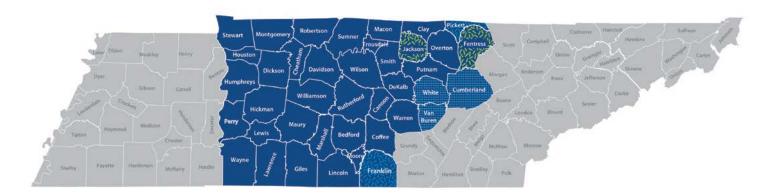


## STATE + MARKET PLANS



## **TENNESSEE — MIDDLE**

#### 2022 OVERVIEW



#### **Tennessee - Middle**

The following counties offer these plans:

- H4513-049-001/002 Cigna Preferred Medicare (HMO)
- H4513-033 Cigna Fundamental Medicare (HMO)
- H4513-036 Cigna Premier Medicare (HMO)
- H7849-010 Cigna True Choice Medicare (PPO)
- H4513-034 Cigna TotalCare Plus (HMO D-SNP)

Bedford, Cannon, Cheatham, Clay, Coffee, Dekalb, Davidson, Dickson, Giles, Hickman, Houston, Humphreys, Lawrence, Lewis, Lincoln, Macon, Marshall, Maury, Moore, Overton, Perry, Pickett, Putnam, Robertson, Rutherford, Smith, Stewart, Sumner, Trousdale, Warren, Wayne, Williamson and Wilson

Montgomery offers all plans EXCEPT the PPO plan.

The following counties offer the HMO and HMO D-SNP plans above, but offer a different PPO plan:

- H7849-036 Cigna True Choice Medicare (PPO)

  Cumberland, Van Buren and White
- H7849-043 Cigna True Choice Medicare (PPO) Fentress and Jackson

#### This county offers this plan:

H4513-049-001 Cigna Preferred Medicare (HMO) Franklin



# MEDICARE ELIGIBLE POPULATION:

512,551

# MEDICARE ADVANTAGE PENETRATION:

42.12%



## **TENNESSEE**

### **TENNESSEE**

COUNTIES Bedford, Benton, Bledsoe, Bradley, Cannon, Carroll, Chester, Clay, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Fayette, Fentress, Franklin, Gibson, Giles, Grundy, Hamilton, Hardeman, Hardin, Haywood, Henderson, Henry, Houston, Humphreys, Jackson, Lake, Lauderdale, Lawrence, Lewis, Lincoln, Macon, Madison, Marion, Marshall, Maury, McNairy, Moore, Obion, Overton, Perry, Pickett, Polk, Putnam, Rutherford, Sequatchie, Shelby, Smith, Stewart, Sumner, Tipton, Trousdale, Van Buren, Warren, Wayne, Weakley, White, Williamson, Wilson

PLAN ID	H4513-049-001 NEW COUL	
PLAN NAME	Cigna Preferred Medicare (HMO)	
Total Premium	\$0	
Cost Share— PCP/Specialist	\$0 / \$5	
Inpatient Acute Care Hospital	\$325 per day for days 1-5; \$0 per day for days 6-90	
Max Out-of-Pocket	\$5,900 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - \$275	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: 50% Tier 5: 33%	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: 50% Tier 5: N/A	



## TENNESSEE TENNESSEE

**COUNTIES** Cheatham, Dickson, Hickman, Montgomery, Robertson

PLAN ID	H4513-049-002	
PLAN NAME	Cigna Preferred Medicare (HMO)	
Total Premium	\$0	
Cost Share— PCP/Specialist	\$0 / \$5	
Inpatient Acute Care Hospital	\$325 per day for days 1-5; \$0 per day for days 6-90	
Max Out-of-Pocket	\$5,900 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - \$275	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: 50% Tier 5: 33%	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: 50% Tier 5: N/A	



## **TENNESSEE**

## **TENNESSEE**

COUNTIES Anderson, Bedford, Benton, Bledsoe, Blount, Bradley, Cannon, Carroll, Cheatham, Chester, Clay, Cocke, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Dickson, Fayette, Fentress, Gibson, Giles, Grainger, Grundy, Hamblen, Hamilton, Hardeman, Hardin, Haywood, Henderson, Hickman, Houston, Humphreys, Jackson, Jefferson, Knox, Lauderdale, Lawrence, Lewis, Lincoln, Loudon, Macon, Madison, Marion, Marshall, Maury, McNairy, Montgomery, Moore, Morgan, Overton, Perry, Pickett, Polk, Putnam, Robertson, Rutherford, Sequatchie, Sevier, Shelby, Smith, Stewart, Sumner, Tipton, Trousdale, Union, Van Buren, Warren, Wayne, White, Williamson, Wilsone

PLAN ID	H4513-033-000	
PLAN NAME	Cigna Fundamental Medicare (HMO)	
Total Premium	\$0	
Cost Share— PCP/Specialist	\$0 / \$30	
Inpatient Acute Care Hospital	\$270 per day for days 1-5; \$0 per day for days 6-90	
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - \$100	
Costshare— Preferred Retail RX (One Month)	N/A	
Cost Share— Preferred Retail RX (Three Months)	N/A	



### **TENNESSEE**

### **TENNESSEE**

COUNTIES Bedford, Benton, Bledsoe, Bradley, Cannon, Carroll, Cheatham, Chester, Clay, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Dickson, Fayette, Fentress, Gibson, Giles, Grundy, Hamilton, Hardeman, Hardin, Haywood, Henderson, Hickman, Houston, Humphreys, Jackson, Lauderdale, Lawrence, Lewis, Lincoln, Macon, Madison, Marion, Marshall, Maury, McNairy, Montgomery, Moore, Overton, Perry, Pickett, Polk, Putnam, Robertson, Rutherford, Sequatchie, Shelby, Smith, Stewart, Sumner, Tipton, Trousdale, Van Buren, Warren, Wayne, White, Williamson, Wilson

PLAN ID	H4513-036-000	
PLAN NAME	Cigna Premier Medicare (HMO-POS)	
T EARLY WALLE	In Network	Out of Network
Total Premium	\$55	\$0
Cost Share— PCP/Specialist	\$0 / \$30	30% / 30%
Inpatient Acute Care Hospital	\$300 per day for days 1-5; \$0 per day for days 6-90	30%
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	There is no maximum out of pocket cost for out-of-network benefits
Lab	\$0	0 - 30%
Ambulatory Surgery Center	\$0 - \$225	30%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$3 Tier 2: \$12 Tier 3: \$42 Tier 4: 40% Tier 5: 29%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$6 (2x one month) Tier 2: \$24 (2x one month) Tier 3: \$126 (3x one month) Tier 4: 40% Tier 5: N/A	N/A



## **TENNESSEE**

## **TENNESSEE**

**COUNTIES** Bedford, Cannon, Cheatham, Clay, Coffee, Davidson, Dekalb, Dickson, Giles, Hickman, Houston, Humphreys, Lawrence, Lewis, Lincoln, Macon, Marshall, Maury, Moore, Overton, Perry, Pickett, Putnam, Robertson, Rutherford, Smith, Stewart, Sumner, Trousdale, Warren, Wayne, Williamson, Wilson

PLAN ID	H7849-010-000 NEW COU	
PLAN NAME	Cigna True Choice Medicare (PPO)	
PLAN NAPIL	In Network	Out of Network
Total Premium	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$30	\$40 / \$55
Inpatient Acute Care Hospital	\$295 per day for days 1-5; \$0 per day for days 6-90	30%
Max Out-of-Pocket	\$5,900 applies to in-network Medicare-covered benefits	\$10,000 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	0 - 30%
Ambulatory Surgery Center	\$0 - \$195	30%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$40 Tier 4: \$80 Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2.5x one month) Tier 3: \$120 (3x one month) Tier 4: \$240 (3x one month) Tier 5: N/A	N/A



### **TENNESSEE**

### **TENNESSEE**

**COUNTIES** Bedford, Benton, Cannon, Carroll, Cheatham, Chester, Clay, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Dickson, Fayette, Fentress, Gibson, Giles, Hardeman, Hardin, Haywood, Henderson, Hickman, Houston, Humphreys, Jackson, Lauderdale, Lawrence, Lewis, Lincoln, Macon, Madison, Marshall, Maury, McNairy, Montgomery, Moore, Overton, Perry, Pickett, Putnam, Robertson, Rutherford, Shelby, Smith, Stewart, Sumner, Tipton, Trousdale, Van Buren, Warren, Wayne, White, Williamson, Wilson

PLAN ID	H4513-034-000	
PLAN NAME	Cigna TotalCare Plus (HMO D-SNP)	
Total Premium	\$25.50	
Cost Share— PCP/Specialist	0 - 20% / 20%	
Inpatient Acute Care Hospital	\$222 per day for days 1-10; \$0 per day for days 11-90	
Max Out-of-Pocket	\$7,550 applies to in-network Medicare-covered benefits	
Lab	0 - 20%	
Ambulatory Surgery Center	0 - 20%	
Costshare— Preferred Retail RX (One Month)	N/A	
Cost Share— Preferred Retail RX (Three Months)	N/A	



## **TENNESSEE**

## **TENNESSEE**

**COUNTIES** Bledsoe, Bradley, Cumberland, Grundy, Hamilton, Marion, Polk, Sequatchie, Van Buren, White

PLAN ID	H7849-0	036-000 NEW COUN
PLAN NAME	Cigna True Choic	e Medicare (PPO)
I LAN NAPIL	In Network	Out of Network
Total Premium	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$40	\$30 / \$55
Inpatient Acute Care Hospital	\$295 per day for days 1-5; \$0 per day for days 6-90	30%
Max Out-of-Pocket	\$5,900 applies to in-network Medicare-covered benefits	\$10,000 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	0	0 - 30%
Ambulatory Surgery Center	\$0 - \$195	30%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$40 Tier 4: \$80 Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2.5x one month) Tier 3: \$120 (3x one month) Tier 4: \$240 (3x one month) Tier 5: N/A	N/A



## **TENNESSEE**

## **TENNESSEE**

COUNTIES Anderson, Blount, Campbell, Claiborne, Cocke, Fentress, Grainger, Hamblen, Hancock, Jackson, Jefferson, Knox, Loudon, Meigs, Monroe, Morgan, Rhea, Scott, Sevier, Union

PLAN ID	H7849-043-000 NEW COUN	
PLAN NAME	Cigna True Choice Medicare (PPO)	
. =	In Network	Out of Network
Total Premium	\$0	\$0
Cost Share— PCP/Specialist	\$0-\$5/\$40	\$30/\$40
Inpatient Acute Care Hospital	\$270 per day for days 1-5; \$0 per day for days 6-90	40%
Max Out-of-Pocket	\$5,900 applies to in-network Medicare-covered benefits	\$10,000 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	\$0 - 40%
Ambulatory Surgery Center	\$0 - \$195	40%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$40 Tier 4: \$80 Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2.5x one month) Tier 3: \$120 (3x one month) Tier 4: \$240 (3x one month) Tier 5: N/A	N/A

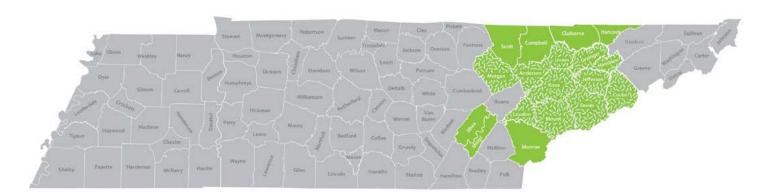


## STATE + MARKET **PLANS**



## **TENNESSEE — KNOXVILLE**

#### 2022 OVERVIEW



#### **Tennessee - Knoxville**

The following counties offer these plans:

- H4513-037 Cigna Preferred Medicare (HMO)
- H7849-043 Cigna True Choice Medicare (PPO)

Campbell, Claiborne, Hancock, Meigs, Monroe, Rhea, and Scott

The following counties also include these plans:

- MH4513-035 Cigna Primary Medicare (HMO)
- K H4513-033 Cigna Fundamental Medicare (HMO)

Anderson, Blount, Cocke, Grainger, Hamblen, Jefferson, Knox, Loudon, Morgan, Sevier and Union



MEDICARE ELIGIBLE POPULATION:

289,050

MEDICARE ADVANTAGE PENETRATION:

50.45%



## TENNESSEE TENNESSEE

**COUNTIES** Anderson, Blount, Campbell, Claiborne, Cocke, Grainger, Hamblen, Hancock, Jefferson, Knox, Loudon, Meigs, Monroe, Morgan, Rhea, Scott, Sevier, Union

PLAN ID	H4513-037-000 NEW COUN	
PLAN NAME	Cigna Preferred Medicare (HMO)	
Total Premium	\$0	
Cost Share— PCP/Specialist	\$0/\$5	
Inpatient Acute Care Hospital	\$325 per day for days 1-5; \$0 per day for days 6-90	
Max Out-of-Pocket	\$5,900 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - \$200	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$10 Tier 3: \$42 Tier 4: 43% Tier 5: 33%	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$20 (2x one month) Tier 3: \$126 (3x one month) Tier 4: 43% Tier 5: N/A	



## **TENNESSEE**

## **TENNESSEE**

COUNTIES Anderson, Blount, Campbell, Claiborne, Cocke, Fentress, Grainger, Hamblen, Hancock, Jackson, Jefferson, Knox, Loudon, Meigs, Monroe, Morgan, Rhea, Scott, Sevier, Union

PLAN ID	H7849-043-000 NEW COUN	
PLAN NAME	Cigna True Choice Medicare (PPO)	
	In Network	Out of Network
Total Premium	\$0	\$0
Cost Share— PCP/Specialist	\$0-\$5 / \$40	\$30 / \$40
Inpatient Acute Care Hospital	\$270 per day for days 1-5; \$0 per day for days 6-90	40%
Max Out-of-Pocket	\$5,900 applies to in-network Medicare-covered benefits	\$10,000 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	\$0 - 40%
Ambulatory Surgery Center	\$0 - \$195	40%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$40 Tier 4: \$80 Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2.5x one month) Tier 3: \$120 (3x one month) Tier 4: \$240 (3x one month) Tier 5: N/A	N/A



## TENNESSEE TENNESSEE

**COUNTIES** Anderson, Blount, Bradley, Cocke, Grainger, Grundy, Hamblen, Hamilton, Jefferson, Knox, Loudon, Marion, Morgan, Sequatchie, Sevier, Union

PLAN ID	H4513-035-000
PLAN NAME	Cigna Primary Medicare (HMO)
Total Premium	\$26.50
Cost Share— PCP/Specialist	\$0 / \$0
Inpatient Acute Care Hospital	\$395 per stay
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits
Lab	0
Ambulatory Surgery Center	\$0 - \$110
Costshare— Preferred Retail RX (One Month)	N/A
Cost Share— Preferred Retail RX (Three Months)	N/A



## **TENNESSEE**

### **TENNESSEE**

COUNTIES Anderson, Bedford, Benton, Bledsoe, Blount, Bradley, Cannon, Carroll, Cheatham, Chester, Clay, Cocke, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Dickson, Fayette, Fentress, Gibson, Giles, Grainger, Grundy, Hamblen, Hamilton, Hardeman, Hardin, Haywood, Henderson, Hickman, Houston, Humphreys, Jackson, Jefferson, Knox, Lauderdale, Lawrence, Lewis, Lincoln, Loudon, Macon, Madison, Marion, Marshall, Maury, McNairy, Montgomery, Moore, Morgan, Overton, Perry, Pickett, Polk, Putnam, Robertson, Rutherford, Sequatchie, Sevier, Shelby, Smith, Stewart, Sumner, Tipton, Trousdale, Union, Van Buren, Warren, Wayne, White, Williamson, Wilsone

PLAN ID	H4513-033-000
PLAN NAME	Cigna Fundamental Medicare (HMO)
Total Premium	\$0
Cost Share— PCP/Specialist	\$0 / \$30
Inpatient Acute Care Hospital	\$270 per day for days 1-5; \$0 per day for days 6-90
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits
Lab	\$0
Ambulatory Surgery Center	\$0 - \$100
Costshare— Preferred Retail RX (One Month)	N/A
Cost Share— Preferred Retail RX (Three Months)	N/A

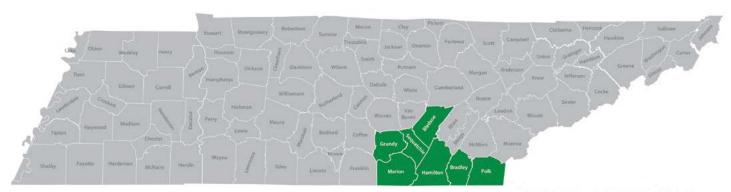


### STATE + MARKET **PLANS**



### **TENNESSEE — CHATTANOOGA**

2022 OVERVIEW



#### Tennessee - Chattanooga

The following counties offer these plans:

- H4513-049-001 Cigna Preferred Medicare (HMO)
- H4513-035 Cigna Primary Medicare (HMO)
- H4513-033 Cigna Fundamental Medicare (HMO)
- H4513-036 Cigna Premier Medicare (HMO POS)
- H7849-036 Cigna True Choice Medicare (PPO)
- H4513-040 Cigna TotalCare Plus (HMO D-SNP)
  Bradley, Grundy, Hamilton, Marion, and
  Seguatchie

Bledsoe and Polk offer all plans EXCEPT the Primary plan.



# MEDICARE ELIGIBLE POPULATION:

121,987

# MEDICARE ADVANTAGE PENETRATION:

47.62%



### **TENNESSEE**

#### **TENNESSEE**

COUNTIES Bedford, Benton, Bledsoe, Bradley, Cannon, Carroll, Chester, Clay, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Fayette, Fentress, Franklin, Gibson, Giles, Grundy, Hamilton, Hardeman, Hardin, Haywood, Henderson, Henry, Houston, Humphreys, Jackson, Lake, Lauderdale, Lawrence, Lewis, Lincoln, Macon, Madison, Marion, Marshall, Maury, McNairy, Moore, Obion, Overton, Perry, Pickett, Polk, Putnam, Rutherford, Sequatchie, Shelby, Smith, Stewart, Sumner, Tipton, Trousdale, Van Buren, Warren, Wayne, Weakley, White, Williamson, Wilson

PLAN ID	H4513-049-001 NEW COU	
PLAN NAME	Cigna Preferred Medicare (HMO)	
Total Premium	\$0	
Cost Share— PCP/Specialist	\$0/\$5	
Inpatient Acute Care Hospital	\$325 per day for days 1-5; \$0 per day for days 6-90	
Max Out-of-Pocket	\$5,900 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - \$275	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: 50% Tier 5: 33%	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: 50% Tier 5: N/A	



#### **TENNESSEE**

#### **TENNESSEE**

COUNTIES Anderson, Bedford, Benton, Bledsoe, Blount, Bradley, Cannon, Carroll, Cheatham, Chester, Clay, Cocke, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Dickson, Fayette, Fentress, Gibson, Giles, Grainger, Grundy, Hamblen, Hamilton, Hardeman, Hardin, Haywood, Henderson, Hickman, Houston, Humphreys, Jackson, Jefferson, Knox, Lauderdale, Lawrence, Lewis, Lincoln, Loudon, Macon, Madison, Marion, Marshall, Maury, McNairy, Montgomery, Moore, Morgan, Overton, Perry, Pickett, Polk, Putnam, Robertson, Rutherford, Sequatchie, Sevier, Shelby, Smith, Stewart, Sumner, Tipton, Trousdale, Union, Van Buren, Warren, Wayne, White, Williamson, Wilson

PLAN ID	H4513-033-000	
PLAN NAME	Cigna Fundamental Medicare (HMO)	
Total Premium	\$0	
Cost Share— PCP/Specialist	\$0 / \$30	
Inpatient Acute Care Hospital	\$270 per day for days 1-5; \$0 per day for days 6-90	
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - \$100	
Costshare— Preferred Retail RX (One Month)	N/A	
Cost Share— Preferred Retail RX (Three Months)	N/A	



### TENNESSEE

### TENNESSEE

**COUNTIES** Anderson, Blount, Bradley, Cocke, Grainger, Grundy, Hamblen, Hamilton, Jefferson, Knox, Loudon, Marion, Morgan, Sequatchie, Sevier, Union

PLAN ID	H4513-035-000	
PLAN NAME	Cigna Primary Medicare (HMO)	
Total Premium	\$26.50	
Cost Share— PCP/Specialist	\$0 / \$0	
Inpatient Acute Care Hospital	\$395 per stay	
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	
Lab	0	
Ambulatory Surgery Center	\$0 - \$110	
Costshare— Preferred Retail RX (One Month)	N/A	
Cost Share— Preferred Retail RX (Three Months)	N/A	



#### **TENNESSEE**

#### **TENNESSEE**

COUNTIES Bedford, Benton, Bledsoe, Bradley, Cannon, Carroll, Cheatham, Chester, Clay, Coffee, Crockett, Cumberland, Davidson, Decatur, DeKalb, Dickson, Fayette, Fentress, Gibson, Giles, Grundy, Hamilton, Hardeman, Hardin, Haywood, Henderson, Hickman, Houston, Humphreys, Jackson, Lauderdale, Lawrence, Lewis, Lincoln, Macon, Madison, Marion, Marshall, Maury, McNairy, Montgomery, Moore, Overton, Perry, Pickett, Polk, Putnam, Robertson, Rutherford, Sequatchie, Shelby, Smith, Stewart, Sumner, Tipton, Trousdale, Van Buren, Warren, Wayne, White, Williamson, Wilson

PLAN ID	H4513-0	036-000
PLAN NAME	Cigna Premier Medicare (HMO-POS)	
	In Network	Out of Network
Total Premium	\$55	\$0
Cost Share— PCP/Specialist	\$0 / \$30	30% / 30%
Inpatient Acute Care Hospital	\$300 per day for days 1-5; \$0 per day for days 6-90	30%
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	There is no maximum out of pocket cost for out-of-network benefits
Lab	\$0	0 - 30%
Ambulatory Surgery Center	\$0 - \$225	30%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$3 Tier 2: \$12 Tier 3: \$42 Tier 4: 40% Tier 5: 29%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$6 (2x one month) Tier 2: \$24 (2x one month) Tier 3: \$126 (3x one month) Tier 4: 40% Tier 5: N/A	N/A



### **TENNESSEE**

### **TENNESSEE**

**COUNTIES** Bledsoe, Bradley, Cumberland, Grundy, Hamilton, Marion, Polk, Sequatchie, Van Buren, White

PLAN ID	H7849-0	036-000 NEW COUN
PLAN NAME	Cigna True Choic	e Medicare (PPO)
I LAN NAPIL	In Network	Out of Network
Total Premium	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$40	\$30 / \$55
Inpatient Acute Care Hospital	\$295 per day for days 1-5; \$0 per day for days 6-90	30%
Max Out-of-Pocket	\$5,900 applies to in-network Medicare-covered benefits	\$10,000 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	0	0 - 30%
Ambulatory Surgery Center	\$0 - \$195	30%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$40 Tier 4: \$80 Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2.5x one month) Tier 3: \$120 (3x one month) Tier 4: \$240 (3x one month) Tier 5: N/A	N/A



### TENNESSEE TENNESSEE

**COUNTIES** Bledsoe, Bradley, Grundy, Hamilton, Marion, Polk, Sequatchie

PLAN ID	H4513-040-000	
PLAN NAME	Cigna TotalCare Plus (HMO D-SNP)	
Total Premium	\$29.80	
Cost Share— PCP/Specialist	0 - 20% / 20%	
Inpatient Acute Care Hospital	\$222 per day for days 1-10; \$0 per day for days 11-90	
Max Out-of-Pocket	\$7,550 applies to in-network Medicare-covered benefits	
Lab	0 - 20%	
Ambulatory Surgery Center	0 - 20%	
Costshare— Preferred Retail RX (One Month)	N/A	
Cost Share— Preferred Retail RX (Three Months)	N/A	

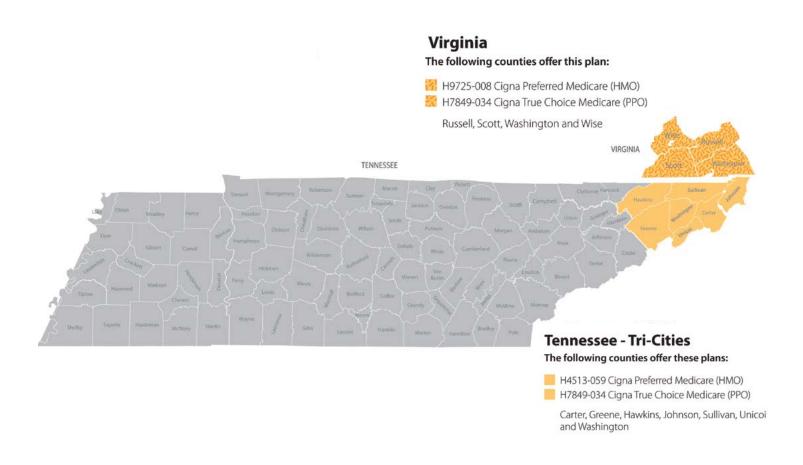


### STATE + MARKET **PLANS**



### **TENNESSEE — TRI-CITIES**

2022 OVERVIEW





MEDICARE ELIGIBLE POPULATION:

135,048

MEDICARE ADVANTAGE PENETRATION:

58.51%



### **TENNESSEE**

TRI-CITIES

**COUNTIES** TN: Carter, Greene, Hawkins, Johnson, Sullivan, Unicoi, Washington

PLAN ID	H4513-059-000 NEV	
PLAN NAME	Cigna Preferred Medicare (HMO)	
Total Premium	\$0	
Cost Share— PCP/Specialist	\$0 / \$5	
Inpatient Acute Care Hospital	\$325 per day for days 1-5; \$0 per day for days 6-90	
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - \$200	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$10 Tier 3: \$42 Tier 4: 49% Tier 5: 33%	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$20 (2x one month) Tier 3: \$126 (3x one month) Tier 4: 49% Tier 5: N/A	



### **TENNESSEE**

TRI-CITIES

COUNTIES TN: Carter, Greene, Hawkins, Johnson, Sullivan, Unicoi, Washington

VA: Russell, Scott, Washington, Wise

PLAN ID	H7849-034-000 NEW COUN	
PLAN NAME		e Medicare (PPO)
	In Network	Out of Network
Total Premium	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$35	\$40 / \$55
Inpatient Acute Care Hospital	\$235 per day for days 1-5; \$0 per day for days 6-90	40%
Max Out-of-Pocket	\$5,900 applies to in-network Medicare-covered benefits	\$10,000 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	0 - 40%
Ambulatory Surgery Center	\$0 - \$195	40%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$40 Tier 4: \$80 Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2.5x one month) Tier 3: \$120 (3x one month) Tier 4: \$240 (3x one month) Tier 5: N/A	N/A



### **TENNESSEE**

TRI-CITIES

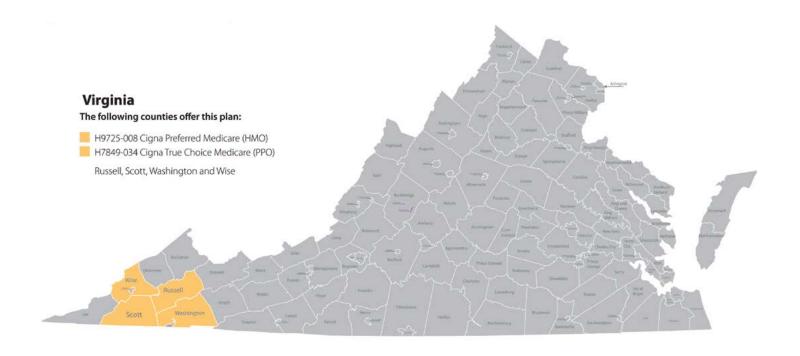
**COUNTIES** Russell, Scott, Washington, Wise

PLAN ID	H9725-008-000	
PLAN NAME	Cigna Preferred Medicare (HMO)	
Total Premium	\$0	
Cost Share— PCP/Specialist	\$0 / \$5	
Inpatient Acute Care Hospital	\$325 per day for days 1-5; \$0 per day for days 6-90	
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - \$200	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$10 Tier 3: \$42 Tier 4: 50% Tier 5: 33%	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$20 (2x one month) Tier 3: \$126 (3x one month) Tier 4: 50% Tier 5: N/A	



### STATE + MARKET PLANS

# VIRGINIA 2022 OVERVIEW





# MEDICARE ELIGIBLE POPULATION:

40,499

# MEDICARE ADVANTAGE PENETRATION:

48.90%



### **TENNESSEE**

TRI-CITIES

**COUNTIES** Russell, Scott, Washington, Wise

PLAN ID	H9725-008-000	
PLAN NAME	Cigna Preferred Medicare (HMO)	
Total Premium	\$0	
Cost Share— PCP/Specialist	\$0 / \$5	
Inpatient Acute Care Hospital	\$325 per day for days 1-5; \$0 per day for days 6-90	
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - \$200	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$10 Tier 3: \$42 Tier 4: 50% Tier 5: 33%	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$20 (2x one month) Tier 3: \$126 (3x one month) Tier 4: 50% Tier 5: N/A	



### **TENNESSEE**

TRI-CITIES

COUNTIES TN: Carter, Greene, Hawkins, Johnson, Sullivan, Unicoi, Washington

VA: Russell, Scott, Washington, Wise

PLAN ID	H7849-034-000 NEW COUN	
PLAN NAME		e Medicare (PPO)
	In Network	Out of Network
Total Premium	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$35	\$40 / \$55
Inpatient Acute Care Hospital	\$235 per day for days 1-5; \$0 per day for days 6-90	40%
Max Out-of-Pocket	\$5,900 applies to in-network Medicare-covered benefits	\$10,000 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	0 - 40%
Ambulatory Surgery Center	\$0 - \$195	40%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$40 Tier 4: \$80 Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2.5x one month) Tier 3: \$120 (3x one month) Tier 4: \$240 (3x one month) Tier 5: N/A	N/A



### STATE + MARKET **PLANS**



### **GEORGIA**

#### 2022 OVERVIEW



#### Georgia - North

The following counties offer these plans:

H4513-030 Cigna Preferred Medicare (HMO)
H7849-035 Cigna True Choice Medicare (PPO)

Catoosa, Dade and Walker

#### Georgia - Atlanta and Surrounding Counties

The following counties offer these plans:

- H0439-007 Cigna Preferred Medicare (HMO)
- H0439-006 Cigna Preferred Plus Medicare (HMO)
- H7849-003 Cigna True Choice Medicare (PPO)
  H0439-002 Cigna TotalCare (HMO D-SNP)
- H0439-012 Cigna TotalCare Plus (HMO D-SNP)

Barrow, Butts, Cherokee, Clayton, Coweta, DeKalb, Fayette, Forsyth, Fulton, Gwinnett, Henry, Newton, Pickens, Rockdale and Spalding

#### The following counties offer these plans:

- H0439-008 Cigna Preferred Medicare (HMO)
- H0439-006 Cigna Preferred Plus Medicare (HMO)
  H7849-020 Cigna True Choice Medicare (PPO)
- H0439-002 Cigna TotalCare (HMO D-SNP)
- H0439-012 Cigna TotalCare Plus (HMO D-SNP)

Cobb, Douglas and Paulding

#### Georgia - Athens

The following counties offer these plans:

- H0439-009 Cigna Preferred Medicare (HMO)
- H0439-006 Cigna Preferred Plus Medicare (HMO)
- H0439-002 Cigna TotalCare (HMO D-SNP)
  H7849-021 Cigna True Choice Medicare (PPO)
- H0439-012 Cigna TotalCare Plus (HMO D-SNP)

Franklin, Greene, Madison, Morgan, Oconee, Oglethorpe

Clarke County offers all plans above EXCEPT the PPO plan

#### Georgia - Northeast

The following counties offer these plans:

- H0439-010 Cigna Preferred Medicare (HMO)
- H0439-006 Cigna Preferred Plus Medicare (HMO)
- H7849-022 Cigna True Choice (PPO) ■ H0439-002 Cigna TotalCare (HMO D-SNP)
- H0439-012 Cigna TotalCare Plus (HMO D-SNP)

Banks, Dawson, Habersham, Hall, Jackson, Lumpkin, Stephens and White

#### Georgia - Northwest

The following counties offer these plans:

- H0439-011 Cigna Preferred Medicare (HMO)
- H0439-006 Cigna Preferred Plus Medicare (HMO)
- H7849-023 Cigna True Choice Medicare (PPO)
   H0439-002 Cigna TotalCare (HMO D-SNP)
- H0439-012 Cigna TotalCare Plus (HMO D-SNP)

Bartow, Chattooga, Floyd, Gordon and Polk



# MEDICARE ELIGIBLE POPULATION:

1,051,365

## MEDICARE ADVANTAGE PENETRATION:

47.59%



# GEORGIA — ATLANTA, ATHENS, NE AND NW

2022 OVERVIEW



#### Georgia - Atlanta and Surrounding Counties

#### The following counties offer these plans:

- H0439-007 Cigna Preferred Medicare (HMO)
- H0439-006 Cigna Preferred Plus Medicare (HMO)
- H7849-003 Cigna True Choice Medicare (PPO)
  H0439-002 Cigna TotalCare (HMO D-SNP)
- H0439-012 Cigna TotalCare (HMO D-SNP)

Barrow, Butts, Cherokee, Clayton, Coweta, DeKalb, Fayette, Forsyth, Fulton, Gwinnett, Henry, Newton, Pickens, Rockdale and Spalding

#### The following counties offer these plans:

- H0439-008 Cigna Preferred Medicare (HMO)
- H0439-006 Cigna Preferred Plus Medicare (HMO)
  H7849-020 Cigna True Choice Medicare (PPO)
- H0439-002 Cigna TotalCare (HMO D-SNP)
- H0439-012 Cigna TotalCare Plus (HMO D-SNP)

Cobb, Douglas and Paulding

#### Georgia - Athens

#### The following counties offer these plans:

- H0439-009 Cigna Preferred Medicare (HMO)
- H0439-006 Cigna Preferred Plus Medicare (HMO) ■ H0439-002 Cigna TotalCare (HMO D-SNP)
- H7849-021 Cigna True Choice Medicare (PPO)
- H0439-012 Cigna TotalCare Plus (HMO D-SNP)

Franklin, Greene, Madison, Morgan, Oconee, Oglethorpe and Walton

Clarke County offers all plans above EXCEPT the PPO plan

#### Georgia - Northeast

#### The following counties offer these plans:

- H0439-010 Cigna Preferred Medicare (HMO)
- H0439-006 Cigna Preferred Plus Medicare (HMO)
- H7849-022 Cigna True Choice (PPO)
- H0439-002 Cigna TotalCare (HMO D-SNP)
- H0439-012 Cigna TotalCare Plus (HMO D-SNP)

Banks, Dawson, Habersham, Hall, Jackson, Lumpkin, Stephens and White

#### **Georgia - Northwest**

#### The following counties offer these plans:

- H0439-011 Cigna Preferred Medicare (HMO)
- H0439-006 Cigna Preferred Plus Medicare (HMO) ■ H7849-023 Cigna True Choice Medicare (PPO)
- H0439-002 Cigna TotalCare (HMO D-SNP)
- H0439-012 Cigna TotalCare Plus (HMO D-SNP)

Bartow, Chattooga, Floyd, Gordon and Polk



# GEORGIA — ATLANTA AND SURROUNDING COUNTIES

#### 2022 OVERVIEW



### Georgia - Atlanta and Surrounding Counties

#### The following counties offer these plans:

- H0439-007 Cigna Preferred Medicare (HMO)
- H0439-006 Cigna Preferred Plus Medicare (HMO)
- H7849-003 Cigna True Choice Medicare (PPO)
- H0439-002 Cigna TotalCare (HMO D-SNP)
- H0439-012 Cigna TotalCare Plus (HMO D-SNP)

Barrow, Butts, Cherokee, Clayton, Coweta, DeKalb, Fayette, Forsyth, Fulton, Gwinnett, Henry, Newton, Pickens, Rockdale and Spalding

#### The following counties offer these plans:

- H0439-008 Cigna Preferred Medicare (HMO)
- H0439-006 Cigna Preferred Plus Medicare (HMO)
- H7849-020 Cigna True Choice Medicare (PPO)
- H0439-002 Cigna TotalCare (HMO D-SNP)
  H0439-012 Cigna TotalCare Plus (HMO D-SNP)
  - Cobb, Douglas and Paulding

50 10 5-3



# MEDICARE ELIGIBLE POPULATION:

639,651

## MEDICARE ADVANTAGE PENETRATION:

49.71%



### **GEORGIA**

### **GEORGIA**

**COUNTIES** Barrow, Butts, Cherokee, Clayton, Coweta, DeKalb, Fayette, Forsyth, Fulton, Gwinnett, Henry, Newton, Pickens, Rockdale, Spalding

PLAN ID	H0439-007-000	
PLAN NAME	Cigna Preferred Medicare (HMO)	
Total Premium	\$0	
Cost Share— PCP/Specialist	\$0/\$30	
Inpatient Acute Care Hospital	\$275 per day for days 1-6; \$0 per day for days 7-90	
Max Out-of-Pocket	\$6,200 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - \$225	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$12 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$24 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	



#### **GEORGIA**

### **GEORGIA**

COUNTIES Banks, Barrow, Bartow, Butts, Chattooga, Cherokee, Clarke, Clayton, Cobb, Coweta, Dawson, DeKalb, Douglas, Fayette, Floyd, Forsyth, Franklin, Fulton, Gordon, Greene, Gwinnett, Habersham, Hall, Henry, Jackson, Lumpkin, Madison, Morgan, Newton, Oconee, Oglethorpe, Paulding, Pickens, Polk, Rockdale, Spalding, Stephens, Walton, White

PLAN ID	H0439-006-000 NEW COUN	
PLAN NAME	Cigna Preferred Plus Medicare (HMO)	
Total Premium	\$25	
Cost Share— PCP/Specialist	\$0 / \$20	
Inpatient Acute Care Hospital	\$295 per day for days 1-6; \$0 per day for days 7-90	
Max Out-of-Pocket	\$5,700 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - \$245	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	



### **GEORGIA**

### **GEORGIA**

**COUNTIES** Barrow, Butts, Cherokee, Clayton, Coweta, DeKalb, Fayette, Forsyth, Fulton, Gwinnett, Henry, Newton, Pickens, Rockdale, Spalding

PLAN ID	H7849-003-000 NEW COUN	
PLAN NAME	Cigna True Choice Medicare (PPO)	
	In Network	Out of Network
Total Premium	\$0	\$0
Cost Share— PCP/Specialist	\$0 - \$5 / \$35	\$40 / \$55
Inpatient Acute Care Hospital	\$295 per day for days 1-6; \$0 per day for days 7-90	35%
Max Out-of-Pocket	\$6,900 applies to in-network Medicare-covered benefits	\$11,300 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	0 - 35%
Ambulatory Surgery Center	\$0 - \$245	35%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$12 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$30 (2.5x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A



#### **GEORGIA**

### **GEORGIA**

**COUNTIES** Banks, Barrow, Bartow, Butts, Chattooga, Cherokee, Clarke, Clayton, Cobb, Coweta, Dawson, DeKalb, Douglas, Fayette, Floyd, Forsyth, Franklin, Fulton, Gordon, Greene, Gwinnett, Habersham, Hall, Henry, Jackson, Lumpkin, Madison, Morgan, Newton, Oconee, Oglethorpe, Paulding, Pickens, Polk, Rockdale, Spalding, Stephens, Walton, White

PLAN ID	H0439-002-000	
PLAN NAME	Cigna TotalCare (HMO D-SNP)	
Total Premium	\$26.20	
Cost Share— PCP/Specialist	\$0 / \$0	
Inpatient Acute Care Hospital	\$325 per day for days 1-6; \$0 per day for days 7-90	
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	0 - 20%	
Costshare— Preferred Retail RX (One Month)	N/A	
Cost Share— Preferred Retail RX (Three Months)	N/A	



#### **GEORGIA**

### **GEORGIA**

**COUNTIES** Banks, Barrow, Bartow, Butts, Chattooga, Cherokee, Clarke, Clayton, Cobb, Coweta, Dawson, Dekalb, Douglas, Fayette, Floyd, Forsyth, Franklin, Fulton, Gordon, Greene, Gwinnett, Habersham, Hall, Henry, Jackson, Lumpkin, Madison, Morgan, Newton, Oconee, Oglethorpe, Paulding, Pickens, Polk, Rockdale, Spalding, Stephens, Walton, White

PLAN ID	H0439-012-000
PLAN NAME	Cigna TotalCare Plus (HMO D-SNP)
Total Premium	\$26.20
Cost Share— PCP/Specialist	0 - 20% / 20%
Inpatient Acute Care Hospital	\$1,725 per stay
Max Out-of-Pocket	\$3,450 applies to in-network Medicare-covered benefits
Lab	0 - 20%
Ambulatory Surgery Center	0 - 20%
Costshare— Preferred Retail RX (One Month)	N/A
Cost Share— Preferred Retail RX (Three Months)	N/A



#### **GEORGIA**

### **GEORGIA**

COUNTIES Banks, Barrow, Bartow, Butts, Chattooga, Cherokee, Clarke, Clayton, Cobb, Coweta, Dawson, DeKalb, Douglas, Fayette, Floyd, Forsyth, Franklin, Fulton, Gordon, Greene, Gwinnett, Habersham, Hall, Henry, Jackson, Lumpkin, Madison, Morgan, Newton, Oconee, Oglethorpe, Paulding, Pickens, Polk, Rockdale, Spalding, Stephens, Walton, White

PLAN ID	H0439-006-000 NEV	
PLAN NAME	Cigna Preferred Plus Medicare (HMO)	
Total Premium	\$25	
Cost Share— PCP/Specialist	\$0 / \$20	
Inpatient Acute Care Hospital	\$295 per day for days 1-6; \$0 per day for days 7-90	
Max Out-of-Pocket	\$5,700 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - \$245	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	



### **GEORGIA**

### **GEORGIA**

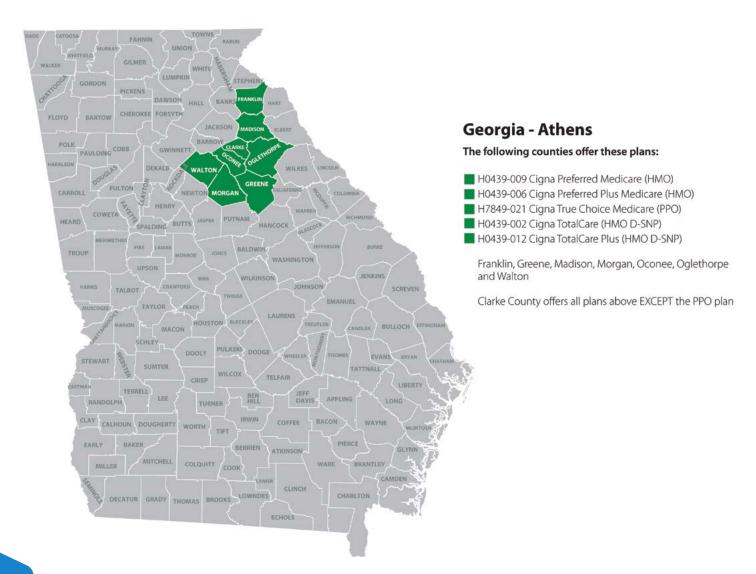
#### **COUNTIES** Cobb, Douglas, Paulding

PLAN ID	H0439-008-000	H7849-0	020-000
PLAN NAME	Cigna Preferred Medicare (HMO)	Cigna True Choic In Network	e Medicare (PPO) Out of Network
Total Premium	\$0	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$40	\$0 - \$5 / \$35	\$40 / \$55
Inpatient Acute Care Hospital	\$325 per day for days 1-6; \$0 per day for days 7-90	\$375 per day for days 1-5; \$0 per day for days 6-90	35%
Max Out-of-Pocket	\$7,200 applies to in-network Medicare-covered benefits	\$7,400 applies to in-network Medicare-covered benefits	\$11,000 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	\$0	0 - 35%
Ambulatory Surgery Center	\$0 - \$275	\$0 - \$325	35%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$3 Tier 2: \$12 Tier 3: \$42 Tier 4: \$95 Tier 5: 31%	Tier 1: \$3 Tier 2: \$12 Tier 3: \$42 Tier 4: \$95 Tier 5: 29%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$6 (2x one month) Tier 2: \$24 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	Tier 1: \$7.50 (2.5x one month) Tier 2: \$30 (2.5x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A



# **GEORGIA — ATHENS**

#### 2022 OVERVIEW





# MEDICARE ELIGIBLE POPULATION:

69,509

# MEDICARE ADVANTAGE PENETRATION:

44.90%



### **GEORGIA**

### **GEORGIA**

COUNTIES Clarke, Franklin, Greene, Madison, Morgan, Oconee, Oglethorpe, Walton

PLAN ID	H0439-009-000	
PLAN NAME	Cigna Preferred Medicare (HMO)	
Total Premium	\$0	
Cost Share— PCP/Specialist	\$0/\$30	
Inpatient Acute Care Hospital	\$275 per day for days 1-6; \$0 per day for days 7-90	
Max Out-of-Pocket	\$6,500 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - \$225	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$12 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$24 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	



#### **GEORGIA**

### **GEORGIA**

COUNTIES Banks, Barrow, Bartow, Butts, Chattooga, Cherokee, Clarke, Clayton, Cobb, Coweta, Dawson, DeKalb, Douglas, Fayette, Floyd, Forsyth, Franklin, Fulton, Gordon, Greene, Gwinnett, Habersham, Hall, Henry, Jackson, Lumpkin, Madison, Morgan, Newton, Oconee, Oglethorpe, Paulding, Pickens, Polk, Rockdale, Spalding, Stephens, Walton, White

PLAN ID	H0439-006-000 NEW COUN	
PLAN NAME	Cigna Preferred Plus Medicare (HMO)	
Total Premium	\$25	
Cost Share— PCP/Specialist	\$0 / \$20	
Inpatient Acute Care Hospital	\$295 per day for days 1-6; \$0 per day for days 7-90	
Max Out-of-Pocket	\$5,700 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - \$245	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	



### **GEORGIA**

### **GEORGIA**

COUNTIES Franklin, Greene, Madison, Morgan, Oconee, Oglethorpe, Walton

PLAN ID	H7849-021-000		
PLAN NAME		Cigna True Choice Medicare (PPO)	
	In Network	Out of Network	
Total Premium	\$0	\$0	
Cost Share— PCP/Specialist	\$0 - \$5 / \$35	\$40 / \$55	
Inpatient Acute Care Hospital	\$295 per day for days 1-7; \$0 per day for days 8-90	35%	
Max Out-of-Pocket	\$7,200 applies to in-network Medicare-covered benefits	\$11,000 applies to in-network and out-of-network Medicare- covered benefits combined	
Lab	\$0	0 - 35%	
Ambulatory Surgery Center	\$0 - \$245	35%	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$3 Tier 2: \$12 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	N/A	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$7.50 (2.5x one month) Tier 2: \$30 (2.5x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A	



#### **GEORGIA**

### **GEORGIA**

**COUNTIES** Banks, Barrow, Bartow, Butts, Chattooga, Cherokee, Clarke, Clayton, Cobb, Coweta, Dawson, DeKalb, Douglas, Fayette, Floyd, Forsyth, Franklin, Fulton, Gordon, Greene, Gwinnett, Habersham, Hall, Henry, Jackson, Lumpkin, Madison, Morgan, Newton, Oconee, Oglethorpe, Paulding, Pickens, Polk, Rockdale, Spalding, Stephens, Walton, White

PLAN ID	H0439-002-000	
PLAN NAME	Cigna TotalCare (HMO D-SNP)	
Total Premium	\$26.20	
Cost Share— PCP/Specialist	\$0 / \$0	
Inpatient Acute Care Hospital	\$325 per day for days 1-6; \$0 per day for days 7-90	
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	0 - 20%	
Costshare— Preferred Retail RX (One Month)	N/A	
Cost Share— Preferred Retail RX (Three Months)	N/A	



#### **GEORGIA**

### **GEORGIA**

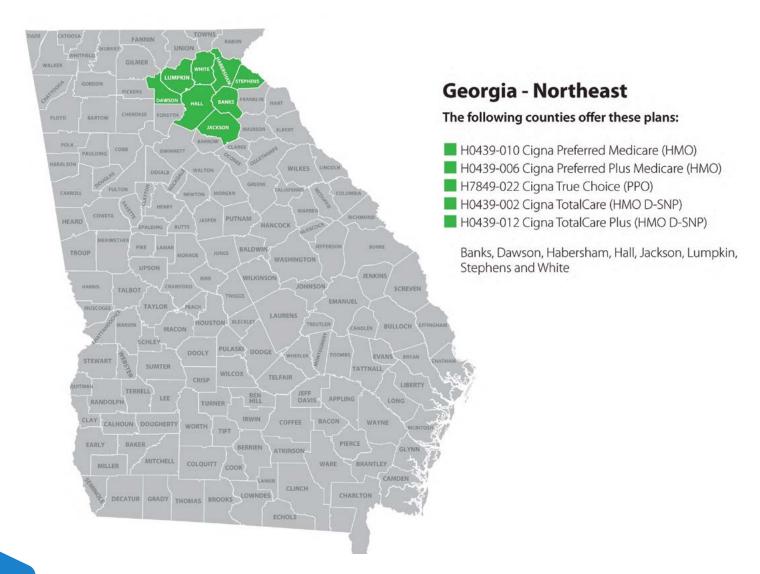
**COUNTIES** Banks, Barrow, Bartow, Butts, Chattooga, Cherokee, Clarke, Clayton, Cobb, Coweta, Dawson, Dekalb, Douglas, Fayette, Floyd, Forsyth, Franklin, Fulton, Gordon, Greene, Gwinnett, Habersham, Hall, Henry, Jackson, Lumpkin, Madison, Morgan, Newton, Oconee, Oglethorpe, Paulding, Pickens, Polk, Rockdale, Spalding, Stephens, Walton, White

PLAN ID	H0439-012-000
PLAN NAME	Cigna TotalCare Plus (HMO D-SNP)
Total Premium	\$26.20
Cost Share— PCP/Specialist	0 - 20% / 20%
Inpatient Acute Care Hospital	\$1,725 per stay
Max Out-of-Pocket	\$3,450 applies to in-network Medicare-covered benefits
Lab	0 - 20%
Ambulatory Surgery Center	0 - 20%
Costshare— Preferred Retail RX (One Month)	N/A
Cost Share— Preferred Retail RX (Three Months)	N/A



## **GEORGIA — NORTHEAST**

2022 OVERVIEW





# MEDICARE ELIGIBLE POPULATION:

91,213

# MEDICARE ADVANTAGE PENETRATION:

43.70%



### **GEORGIA**

### **GEORGIA**

COUNTIES Banks, Dawson, Habersham, Hall, Jackson, Lumpkin, Stephens, White

PLAN ID	H0439-010-000	
PLAN NAME	Cigna Preferred Medicare (HMO)	
Total Premium	\$0	
Cost Share— PCP/Specialist	\$0 / \$30	
Inpatient Acute Care Hospital	\$295 per day for days 1-6; \$0 per day for days 7-90	
Max Out-of-Pocket	\$6,450 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - \$250	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 31%	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	



#### **GEORGIA**

### **GEORGIA**

COUNTIES Banks, Barrow, Bartow, Butts, Chattooga, Cherokee, Clarke, Clayton, Cobb, Coweta, Dawson, DeKalb, Douglas, Fayette, Floyd, Forsyth, Franklin, Fulton, Gordon, Greene, Gwinnett, Habersham, Hall, Henry, Jackson, Lumpkin, Madison, Morgan, Newton, Oconee, Oglethorpe, Paulding, Pickens, Polk, Rockdale, Spalding, Stephens, Walton, White

PLAN ID	H0439-006-000
PLAN NAME	Cigna Preferred Plus Medicare (HMO)
Total Premium	\$25
Cost Share— PCP/Specialist	\$0 / \$20
Inpatient Acute Care Hospital	\$295 per day for days 1-6; \$0 per day for days 7-90
Max Out-of-Pocket	\$5,700 applies to in-network Medicare-covered benefits
Lab	\$0
Ambulatory Surgery Center	\$0 - \$245
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A



### **GEORGIA**

### **GEORGIA**

COUNTIES Banks, Dawson, Habersham, Hall, Jackson, Lumpkin, Stephens, White

PLAN ID	H7849-022-000 NEW COUL		
PLAN NAME Cigna True Choice Medi			
	In Network	Out of Network	
Total Premium	\$0	\$0	
Cost Share— PCP/Specialist	\$0 - \$5 / \$40	\$40 / \$55	
Inpatient Acute Care Hospital	\$315 per day for days 1-6; \$0 per day for days 7-90	35%	
Max Out-of-Pocket	\$7,200 applies to in-network Medicare-covered benefits	\$11,000 applies to in-network and out-of-network Medicare- covered benefits combined	
Lab	\$0	0 - 35%	
Ambulatory Surgery Center	\$0 - \$265	35%	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$3 Tier 2: \$12 Tier 3: \$42 Tier 4: \$95 Tier 5: 29%	N/A	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$7.50 (2.5x one month) Tier 2: \$30 (2.5x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A	



### **GEORGIA**

### **GEORGIA**

**COUNTIES** Banks, Barrow, Bartow, Butts, Chattooga, Cherokee, Clarke, Clayton, Cobb, Coweta, Dawson, DeKalb, Douglas, Fayette, Floyd, Forsyth, Franklin, Fulton, Gordon, Greene, Gwinnett, Habersham, Hall, Henry, Jackson, Lumpkin, Madison, Morgan, Newton, Oconee, Oglethorpe, Paulding, Pickens, Polk, Rockdale, Spalding, Stephens, Walton, White

PLAN ID	H0439-002-000	
PLAN NAME	Cigna TotalCare (HMO D-SNP)	
Total Premium	\$26.20	
Cost Share— PCP/Specialist	\$0 / \$0	
Inpatient Acute Care Hospital	\$325 per day for days 1-6; \$0 per day for days 7-90	
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	0 - 20%	
Costshare— Preferred Retail RX (One Month)	N/A	
Cost Share— Preferred Retail RX (Three Months)	N/A	



### **GEORGIA**

### **GEORGIA**

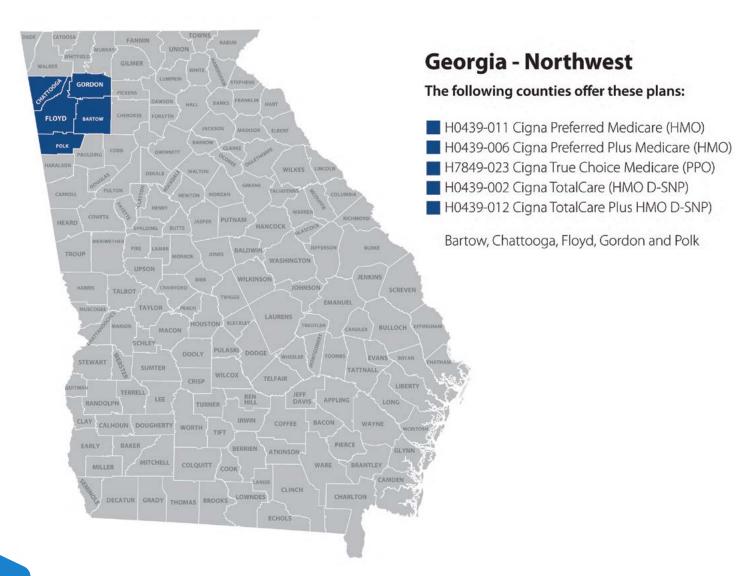
**COUNTIES** Banks, Barrow, Bartow, Butts, Chattooga, Cherokee, Clarke, Clayton, Cobb, Coweta, Dawson, Dekalb, Douglas, Fayette, Floyd, Forsyth, Franklin, Fulton, Gordon, Greene, Gwinnett, Habersham, Hall, Henry, Jackson, Lumpkin, Madison, Morgan, Newton, Oconee, Oglethorpe, Paulding, Pickens, Polk, Rockdale, Spalding, Stephens, Walton, White

PLAN ID	H0439-012-000		
PLAN NAME	Cigna TotalCare Plus (HMO D-SNP)		
Total Premium	\$26.20		
Cost Share— PCP/Specialist	0 - 20% / 20%		
Inpatient Acute Care Hospital	\$1,725 per stay		
Max Out-of-Pocket	\$3,450 applies to in-network Medicare-covered benefits		
Lab	0 - 20%		
Ambulatory Surgery Center	0 - 20%		
Costshare— Preferred Retail RX (One Month)	N/A		
Cost Share— Preferred Retail RX (Three Months)	N/A		



## **GEORGIA - NORTHWEST**

2022 OVERVIEW





## MEDICARE ELIGIBLE POPULATION:

65,652

## MEDICARE ADVANTAGE PENETRATION:

45.31%



### **GEORGIA**

### **GEORGIA**

**COUNTIES** Bartow, Chattooga, Floyd, Gordon, Polk

PLAN ID	H0439-011-000	
PLAN NAME	Cigna Preferred Medicare (HMO)	
Total Premium	\$0	
Cost Share— PCP/Specialist	\$0 / \$30	
Inpatient Acute Care Hospital	\$275 per day for days 1-6; \$0 per day for days 7-90	
Max Out-of-Pocket	\$6,450 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - \$225	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$12 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$24 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	



### **GEORGIA**

### **GEORGIA**

COUNTIES Banks, Barrow, Bartow, Butts, Chattooga, Cherokee, Clarke, Clayton, Cobb, Coweta, Dawson, DeKalb, Douglas, Fayette, Floyd, Forsyth, Franklin, Fulton, Gordon, Greene, Gwinnett, Habersham, Hall, Henry, Jackson, Lumpkin, Madison, Morgan, Newton, Oconee, Oglethorpe, Paulding, Pickens, Polk, Rockdale, Spalding, Stephens, Walton, White

PLAN ID	H0439-006-000 NEV		
PLAN NAME	Cigna Preferred Plus Medicare (HMO)		
Total Premium	\$25		
Cost Share— PCP/Specialist	\$0 / \$20		
Inpatient Acute Care Hospital	\$295 per day for days 1-6; \$0 per day for days 7-90		
Max Out-of-Pocket	\$5,700 applies to in-network Medicare-covered benefits		
Lab	\$0		
Ambulatory Surgery Center	\$0 - \$245		
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%		
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A		



### **GEORGIA**

### **GEORGIA**

**COUNTIES** Bartow, Chattooga, Floyd, Gordon, Polk

PLAN ID	H7849-023-000		
PLAN NAME	Cigna True Choice Medicare (PPO)		
PLAN NAME	In Network	Out of Network	
Total Premium	\$0	\$0	
Cost Share— PCP/Specialist	\$0 - \$5 / \$35	\$40 / \$55	
Inpatient Acute Care Hospital	\$295 per day for days 1-7; \$0 per day for days 8-90	35%	
Max Out-of-Pocket	\$7,200 applies to in-network Medicare-covered benefits	\$11,000 applies to in-network and out-of-network Medicare- covered benefits combined	
Lab	\$0	0 - 35%	
Ambulatory Surgery Center	\$0 - \$245	35%	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$12 Tier 3: \$42 Tier 4: \$95 Tier 5: 31%	N/A	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$30 (2.5x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A	



### **GEORGIA**

### **GEORGIA**

**COUNTIES** Banks, Barrow, Bartow, Butts, Chattooga, Cherokee, Clarke, Clayton, Cobb, Coweta, Dawson, DeKalb, Douglas, Fayette, Floyd, Forsyth, Franklin, Fulton, Gordon, Greene, Gwinnett, Habersham, Hall, Henry, Jackson, Lumpkin, Madison, Morgan, Newton, Oconee, Oglethorpe, Paulding, Pickens, Polk, Rockdale, Spalding, Stephens, Walton, White

PLAN ID	H0439-002-000	
PLAN NAME	Cigna TotalCare (HMO D-SNP)	
Total Premium	\$26.20	
Cost Share— PCP/Specialist	\$0 / \$0	
Inpatient Acute Care Hospital	\$325 per day for days 1-6; \$0 per day for days 7-90	
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	0 - 20%	
Costshare— Preferred Retail RX (One Month)	N/A	
Cost Share— Preferred Retail RX (Three Months)	N/A	



### **GEORGIA**

### **GEORGIA**

**COUNTIES** Banks, Barrow, Bartow, Butts, Chattooga, Cherokee, Clarke, Clayton, Cobb, Coweta, Dawson, Dekalb, Douglas, Fayette, Floyd, Forsyth, Franklin, Fulton, Gordon, Greene, Gwinnett, Habersham, Hall, Henry, Jackson, Lumpkin, Madison, Morgan, Newton, Oconee, Oglethorpe, Paulding, Pickens, Polk, Rockdale, Spalding, Stephens, Walton, White

PLAN ID	H0439-012-000		
PLAN NAME	Cigna TotalCare Plus (HMO D-SNP)		
Total Premium	\$26.20		
Cost Share— PCP/Specialist	0 - 20% / 20%		
Inpatient Acute Care Hospital	\$1,725 per stay		
Max Out-of-Pocket	\$3,450 applies to in-network Medicare-covered benefits		
Lab	0 - 20%		
Ambulatory Surgery Center	0 - 20%		
Costshare— Preferred Retail RX (One Month)	N/A		
Cost Share— Preferred Retail RX (Three Months)	N/A		



## **GEORGIA — NORTH**

### 2022 OVERVIEW





## MEDICARE ELIGIBLE POPULATION:

33,031

## MEDICARE ADVANTAGE PENETRATION:

40.76%



### **TENNESSEE**

### NORTH GEORGIA

### **COUNTIES** Catoosa, Dade, Walker

PLAN ID NEW COUNTIE	H4513-030-000	H7849-	035-000	
		Cigna True Choice Medicare (PPO)		
PLAN NAME	Cigna Preferred Medicare (HMO)	In Network	Out of Network	
Total Premium	\$0	\$0	\$0	
Cost Share— PCP/Specialist	\$0 - \$40	\$0 / \$35	\$40 / \$55	
Inpatient Acute Care Hospital	\$350 per day for days 1-5; \$0 per day for days 6-90	\$290 per day for days 1-7; \$0 per day for days 8-90	30%	
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	\$5,900 applies to in-network Medicare-covered benefits	\$10,000 applies to in-network and out-of-network Medicare- covered benefits combined	
Lab	\$0	\$0	0 - 40%	
Ambulatory Surgery Center	\$0 - \$275	\$0 - \$195	40%	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$3 Tier 2: \$12 Tier 3: \$42 Tier 4: 38% Tier 5: 29%	Tier 1: \$0 Tier 2: \$4 Tier 3: \$40 Tier 4: \$80 Tier 5: 33%	N/A	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$6 (2x one month) Tier 2: \$24 (2x one month) Tier 3: \$126 (3x one month) Tier 4: 38% Tier 5: N/A	Tier 1: \$0 Tier 2: \$10 (2.5x one month) Tier 3: \$120 (3x one month) Tier 4: \$240 (3x one month) Tier 5: N/A	N/A	



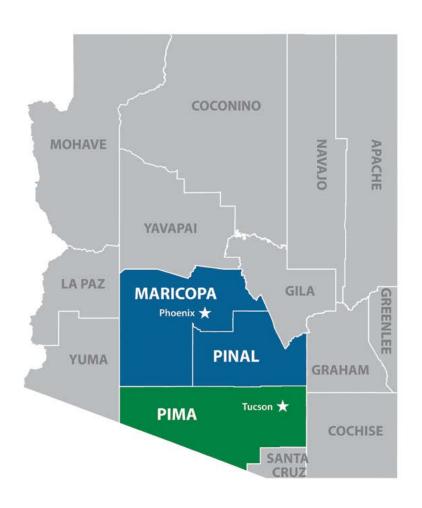




WEST REGION



# ARIZONA 2022 OVERVIEW



### Arizona - Phoenix

### The following counties offer these plans:

- ■H0354-001 Cigna Preferred Medicare (HMO)
- H0354-027 Cigna Achieve Medicare (HMO C-SNP) – for people diagnosed with Diabetes
- ■H0354-028 Cigna Alliance Medicare (HMO)

Maricopa and Pinal

### Arizona - Tucson

### The following county offers this plan:

■ H0354-024 Cigna Preferred Medicare (HMO)

Pima



## MEDICARE ELIGIBLE POPULATION:

1,052,156

## MEDICARE ADVANTAGE PENETRATION:

48.63%





### **COUNTIES** Maricopa, Pinal (Full)

PLAN ID NEW COUNTIE	H0354-001-000	H0354-027-000	H0354-028-000
PLAN NAME	Cigna Preferred Medicare (HMO)	Cigna Achieve Medicare (HMO C-SNP)	Cigna Alliance Medicare (HMO)
Total Premium	\$0	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$25	\$0 / \$20	\$0 / \$5
Inpatient Acute Care Hospital	\$225 per day for days 1-7; \$0 per day for days 8-90	\$225 per day for days 1-7; \$0 per day for days 8-90	\$185 per day for days 1-7; \$0 per day for days 8-90
Max Out-of-Pocket	\$3,100 applies to in-network Medicare-covered and in- network non-Medicare-covered benefits	\$3,100 applies to in-network Medicare-covered and in- network non-Medicare-covered benefits	\$2,500 applies to in-network Medicare-covered and in- network non-Medicare-covered benefits
Lab	\$0	\$0	\$0
Ambulatory Surgery Center	\$0 - \$75	\$0 - \$75	\$0 - \$75
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$5 Tier 3: \$47 Tier 4: \$100 Tier 5: 33%	Tier 1: \$0 Tier 2: \$5 Tier 3: \$47 Tier 4: \$100 Tier 5: 33% Tier 6: \$9	Tier 1: \$0 Tier 2: \$5 Tier 3: \$47 Tier 4: \$100 Tier 5: 33%
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$141 (3x one month) Tier 4: \$300 (3x one month) Tier 5: N/A	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$141 (3x one month) Tier 4: \$300 (3x one month) Tier 5: N/A Tier 6: \$18 (2x one month)	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$141 (3x one month) Tier 4: \$300 (3x one month) Tier 5: N/A





### **COUNTIES** Pima

PLAN ID	H0354-024-000	
PLAN NAME	Cigna Preferred Medicare (HMO)	
Total Premium	\$0	
Cost Share— PCP/Specialist	\$0 / \$25	
Inpatient Acute Care Hospital	\$225 per day for days 1-7; \$0 per day for days 8-90	
Max Out-of-Pocket	\$2,900 applies to in-network Medicare-covered and in-network non-Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - \$75	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$5 Tier 3: \$47 Tier 4: \$100 Tier 5: 33%	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$141 (3x one month) Tier 4: \$300 (3x one month) Tier 5: N/A	

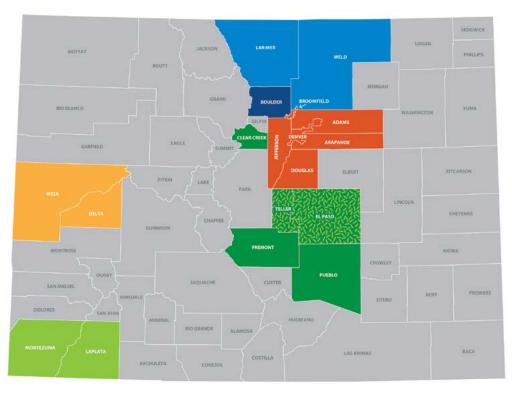








## COLORADO 2022 OVERVIEW



### Colorado - Boulder The following countiy offers these plans: ■ H0672-002 Cigna Preferred Medicare (HMO) ■ H07849-001 Cigna True Choice Medicare (PPO) ■ H0672-009 Cigna TotalCare (HMO D-SNP) Colorado - Colorado Springs The following counties offer these plans: ■ H0672-004 Cigna Preferred Medicare (HMO) ■ H7849-027 Cigna True Choice Medicare (PPO) Clear Creek, El Paso, Fremont, Pueblo and Teller H0672-009 Cigna TotalCare (HMO D-SNP) El Paso and Teller Colorado - Denver The following counties offer these plans: ■ H0672-001 Cigna Preferred Medicare (HMO) H7849-001 Cigna True Choice Medicare (PPO) H0672-009 Cigna TotalCare (HMO D-SNP) Adams, Arapahoe, Broomfield, Denver, Douglas and Jefferson Colorado - Fort Collins The following counties offer these plans: ■ H0672-003 Cigna Preferred Medicare (HMO) H7849-026 Cigna True Choice Medicare (PPO) H0672-009 Cigna TotalCare (HMO D-SNP) Larimer and Weld Colorado - Southwest Corner The following counties offer these plans: H0672-007 Cigna Preferred Medicare (HMO) H7849-050 Cigna True Choice Medicare (PPO) La Plata and Montezuma Colorado - Western Slope The following counties offer these plans: H0672-008 Cigna Preferred Medicare (HMO) H7849-051 Cigna True Choice Medicare (PPO)



MEDICARE ELIGIBLE POPULATION:

831,032

MEDICARE ADVANTAGE PENETRATION:

Mesa and Delta

49.48%



## COLORADO — BOULDER

2022 OVERVIEW



### Colorado - Boulder

### The following countiy offers these plans:

- H0672-002 Cigna Preferred Medicare (HMO)
- H07849-001 Cigna True Choice Medicare (PPO)
- H0672-009 Cigna TotalCare (HMO D-SNP)

Boulder



## MEDICARE ELIGIBLE POPULATION:

55,064

## MEDICARE ADVANTAGE PENETRATION:

45.33%



## WEST

### **MOUNTAIN STATES**

### COLORADO

### **COUNTIES** Boulder

PLAN ID	H0672-002-000	
PLAN NAME	Cigna Preferred Medicare (HMO)	
Total Premium	\$0	
Cost Share— PCP/Specialist	\$0 / \$25	
Inpatient Acute Care Hospital	\$225 per day for days 1-6; \$0 per day for days 7-90	
Max Out-of-Pocket	\$4,200 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - \$175	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$80 Tier 5: 33%	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2.5x one month) Tier 3: \$126 (3x one month) Tier 4: \$240 (3x one month) Tier 5: N/A	





### **MOUNTAIN STATES**

### COLORADO

**COUNTIES** Adams, Arapahoe, Boulder, Broomfield, Denver, Douglas, Jefferson

PLAN ID	H7849-001-000	
PLAN NAME	Cigna True Choice Medicare (PPO)	
	In Network	Out of Network
Total Premium	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$35	\$40 / \$60
Inpatient Acute Care Hospital	\$330 per day for days 1-5; \$0 per day for days 6-90	30%
Max Out-of-Pocket	\$5,900 applies to in-network Medicare-covered benefits	\$11,300 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	0 - 40%
Ambulatory Surgery Center	\$0 - \$275	40%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$80 Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2.5x one month) Tier 3: \$126 (3x one month) Tier 4: \$240 (3x one month) Tier 5: N/A	N/A



## WEST

### **MOUNTAIN STATES**

### COLORADO

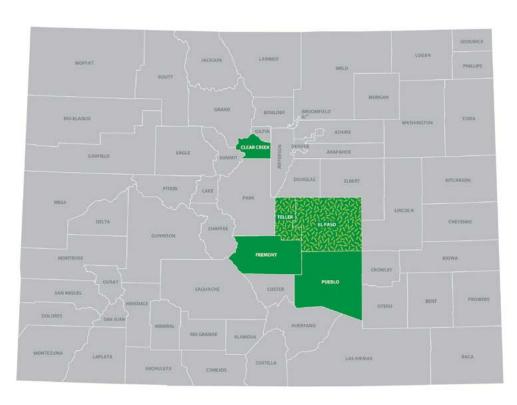
**COUNTIES** Adams, Arapahoe, Boulder, Broomfield, Denver, Douglas, El Paso, Jefferson, Larimer, Teller, Weld

PLAN ID	H0672-009-000	
PLAN NAME	Cigna TotalCare (HMO D-SNP)	
Total Premium	\$0	
Cost Share— PCP/Specialist	\$0/\$0	
Inpatient Acute Care Hospital	\$225 per day for days 1-5; \$0 per day for days 6-90	
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - 10%	
Costshare— Preferred Retail RX (One Month)	N/A	
Cost Share— Preferred Retail RX (Three Months)	N/A	



# COLORADO — COLORADO SPRINGS

2022 OVERVIEW



### **Colorado - Colorado Springs**

The following counties offer these plans:

- H0672-004 Cigna Preferred Medicare (HMO)
- H7849-027 Cigna True Choice Medicare (PPO)

Clear Creek, El Paso, Fremont, Pueblo and Teller

M H0672-009 Cigna TotalCare (HMO D-SNP)

El Paso and Teller



## MEDICARE ELIGIBLE POPULATION:

174,132

## MEDICARE ADVANTAGE PENETRATION:

45.16%



## **WEST**

### **MOUNTAIN STATES**

### COLORADO

### COUNTIES Clear Creek, El Paso, Fremont, Pueblo, Teller

PLAN ID NEW COUNTIE	H0672-004-000	H7849-	027-000		
			Cigna True Choice Medicare (PPO)		
PLAN NAME	Cigna Preferred Medicare (HMO)	In Network	Out of Network		
Total Premium	\$0	\$0	\$0		
Cost Share— PCP/Specialist	\$0 / \$25	\$0 / \$35	\$40 / \$60		
Inpatient Acute Care Hospital	\$275 per day for days 1-6; \$0 per day for days 7-90	\$295 per day for days 1-5; \$0 per day for days 6-90	30%		
Max Out-of-Pocket	\$4,200 applies to in-network Medicare-covered benefits	\$5,900 applies to in-network Medicare-covered benefits	\$11,300 applies to in-network and out-of-network Medicare- covered benefits combined		
Lab	\$0	\$0	0 - 40%		
Ambulatory Surgery Center	\$0 - \$200	\$0 - \$215	40%		
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$80 Tier 5: 33%	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$80 Tier 5: 33%	N/A		
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2.5x one month) Tier 3: \$126 (3x one month) Tier 4: \$240 (3x one month) Tier 5: N/A	Tier 1: \$0 Tier 2: \$10 (2.5x one month) Tier 3: \$126 (3x one month) Tier 4: \$240 (3x one month) Tier 5: N/A	N/A		







## WEST

### **MOUNTAIN STATES**

### COLORADO

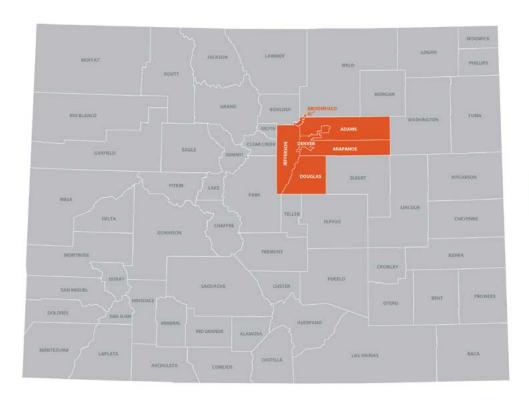
**COUNTIES** Adams, Arapahoe, Boulder, Broomfield, Denver, Douglas, El Paso, Jefferson, Larimer, Teller, Weld

PLAN ID	H0672-009-000	
PLAN NAME	Cigna TotalCare (HMO D-SNP)	
Total Premium	\$0	
Cost Share— PCP/Specialist	\$0/\$0	
Inpatient Acute Care Hospital	\$225 per day for days 1-5; \$0 per day for days 6-90	
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - 10%	
Costshare— Preferred Retail RX (One Month)	N/A	
Cost Share— Preferred Retail RX (Three Months)	N/A	



## COLORADO — DENVER

### 2022 OVERVIEW



### Colorado - Denver

The following counties offer these plans:

- H0672-001 Cigna Preferred Medicare (HMO)
- H7849-001 Cigna True Choice Medicare (PPO)
  H0672-009 Cigna TotalCare (HMO D-SNP)

Adams, Arapahoe, Broomfield, Denver, Douglas and Jefferson



## MEDICARE ELIGIBLE POPULATION:

424,639

## MEDICARE ADVANTAGE PENETRATION:

55.59%



## WEST

### **MOUNTAIN STATES**

### COLORADO

**COUNTIES** Adams, Arapahoe, Broomfield, Denver, Douglas, Jefferson

PLAN ID	H0672-001-000	
PLAN NAME	Cigna Preferred Medicare (HMO)	
Total Premium	\$0	
Cost Share— PCP/Specialist	\$0 / \$25	
Inpatient Acute Care Hospital	\$225 per day for days 1-6; \$0 per day for days 7-90	
Max Out-of-Pocket	\$4,200 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - \$175	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$80 Tier 5: 33%	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2.5x one month) Tier 3: \$126 (3x one month) Tier 4: \$240 (3x one month) Tier 5: N/A	





### **MOUNTAIN STATES**

### COLORADO

**COUNTIES** Adams, Arapahoe, Boulder, Broomfield, Denver, Douglas, Jefferson

PLAN ID	H7849-001-000	
PLAN NAME	Cigna True Choice Medicare (PPO)	
	In Network	Out of Network
Total Premium	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$35	\$40 / \$60
Inpatient Acute Care Hospital	\$330 per day for days 1-5; \$0 per day for days 6-90	30%
Max Out-of-Pocket	\$5,900 applies to in-network Medicare-covered benefits	\$11,300 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	0 - 40%
Ambulatory Surgery Center	\$0 - \$275	40%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$80 Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2.5x one month) Tier 3: \$126 (3x one month) Tier 4: \$240 (3x one month) Tier 5: N/A	N/A



## WEST

### **MOUNTAIN STATES**

### COLORADO

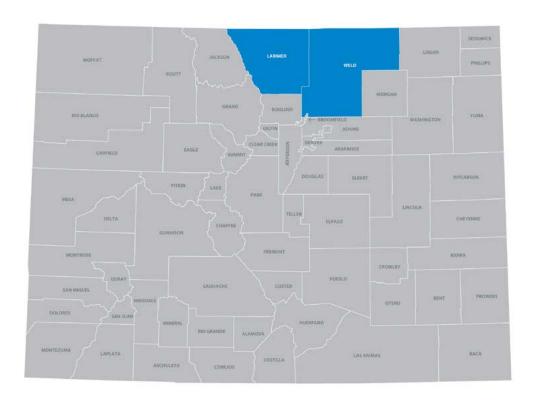
**COUNTIES** Adams, Arapahoe, Boulder, Broomfield, Denver, Douglas, El Paso, Jefferson, Larimer, Teller, Weld

PLAN ID	H0672-009-000	
PLAN NAME	Cigna TotalCare (HMO D-SNP)	
Total Premium	\$0	
Cost Share— PCP/Specialist	\$0/\$0	
Inpatient Acute Care Hospital	\$225 per day for days 1-5; \$0 per day for days 6-90	
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - 10%	
Costshare— Preferred Retail RX (One Month)	N/A	
Cost Share— Preferred Retail RX (Three Months)	N/A	



## **COLORADO — FORT COLLINS**

2022 OVERVIEW



### Colorado - Fort Collins

The following counties offer these plans:

- H0672-003 Cigna Preferred Medicare (HMO)
- H7849-026 Cigna True Choice Medicare (PPO)
  H0672-009 Cigna TotalCare (HMO D-SNP)

Larimer and Weld



## MEDICARE ELIGIBLE POPULATION:

112,693

## MEDICARE ADVANTAGE PENETRATION:

45.05%



## WEST

### **MOUNTAIN STATES**

### COLORADO

### **COUNTIES** Larimer, Weld

PLAN ID	H0672-003-000	
PLAN NAME	Cigna Preferred Medicare (HMO)	
Total Premium	\$0	
Cost Share— PCP/Specialist	\$0 / \$25	
Inpatient Acute Care Hospital	\$250 per day for days 1-5; \$0 per day for days 6-90	
Max Out-of-Pocket	\$4,200 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - \$200	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$80 Tier 5: 33%	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2.5x one month) Tier 3: \$126 (3x one month) Tier 4: \$240 (3x one month) Tier 5: N/A	



## **WEST**

### **MOUNTAIN STATES**

### COLORADO

### **COUNTIES** Larimer, Weld

PLAN ID	H7849-026-000		
PLAN NAME	Cigna True Choice Medicare (PPO) In Network Out of Network		
Total Premium	\$0	\$0	
Cost Share— PCP/Specialist	\$0 / \$35	\$40 / \$60	
Inpatient Acute Care Hospital	\$305 per day for days 1-5; \$0 per day for days 6-90	30%	
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	\$11,300 applies to in-network and out-of-network Medicare- covered benefits combined	
Lab	\$0	0 - 40%	
Ambulatory Surgery Center	\$0 - \$275	40%	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$80 Tier 5: 33%	N/A	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2.5x one month) Tier 3: \$126 (3x one month) Tier 4: \$240 (3x one month) Tier 5: N/A	N/A	



## WEST

### **MOUNTAIN STATES**

### COLORADO

**COUNTIES** Adams, Arapahoe, Boulder, Broomfield, Denver, Douglas, El Paso, Jefferson, Larimer, Teller, Weld

PLAN ID	H0672-009-000	
PLAN NAME	Cigna TotalCare (HMO D-SNP)	
Total Premium	\$0	
Cost Share— PCP/Specialist	\$0/\$0	
Inpatient Acute Care Hospital	\$225 per day for days 1-5; \$0 per day for days 6-90	
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - 10%	
Costshare— Preferred Retail RX (One Month)	N/A	
Cost Share— Preferred Retail RX (Three Months)	N/A	



# COLORADO — SOUTHWEST CORNER

2022 OVERVIEW



## COLORADO - Southwest Corner The following counties offer these plans:

H0672-007 Cigna Preferred Medicare (HMO)
H7849-050 Cigna True Choice Medicare (PPO)

La Plata and Montezuma



MEDICARE ELIGIBLE POPULATION:

18,731

MEDICARE ADVANTAGE PENETRATION:

22.41%



# **WEST**

#### **MOUNTAIN STATES**

#### COLORADO

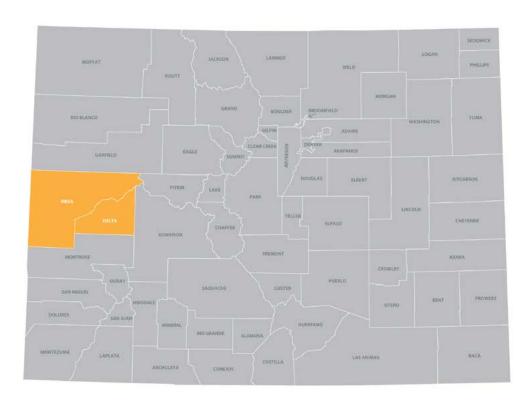
**COUNTIES** La Plata, Montezuma

PLAN ID NEW PLANS	H0672-007-000	H7849-0	050-000
PLAN NAME	Cigna Preferred Medicare (HMO)		e Medicare (PPO)
Total Premium	\$0	In Network \$0	Out of Network \$0
Cost Share— PCP/Specialist	\$0 / \$30	\$0 / \$35	\$40 / \$60
Inpatient Acute Care Hospital	\$285 per day for days 1-6; \$0 per day for days 7-90	\$300 per day for days 1-5; \$0 per day for days 6-90	30%
Max Out-of-Pocket	\$4,500 applies to in-network Medicare-covered benefits	\$5,200 applies to in-network Medicare-covered benefits	\$11,300 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	\$0	0 - 40%
Ambulatory Surgery Center	\$0 - \$220	\$0 - \$235	40%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$80 Tier 5: 33%	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$80 Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2.5x one month) Tier 3: \$126 (3x one month) Tier 4: \$240 (3x one month) Tier 5: N/A	Tier 1: \$0 Tier 2: \$10 (2.5x one month) Tier 3: \$126 (3x one month) Tier 4: \$240 (3x one month) Tier 5: N/A	N/A



# COLORADO — WESTERN SLOPE

2022 OVERVIEW



# Colorado - Western Slope The following counties offer these plans: H0672-008 Cigna Preferred Medicare (HMO) H7849-051 Cigna True Choice Medicare (PPO) Mesa and Delta



MEDICARE ELIGIBLE POPULATION:

45,773

MEDICARE ADVANTAGE PENETRATION:

36.08%



# **WEST**

#### **MOUNTAIN STATES**

#### COLORADO

**COUNTIES** Delta, Mesa

PLAN ID NEW PLANS	H0672-008-000	H7849-	051-000
PLAN NAME	Cigna Preferred Medicare (HMO)	Cigna True Choic	e Medicare (PPO)
T EAN WATE	cigila i referred riculture (firito)	In Network	Out of Network
Total Premium	\$0	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$30	\$0 / \$35	\$40 / \$60
Inpatient Acute Care Hospital	\$285 per day for days 1-6; \$0 per day for days 7-90	\$305 per day for days 1-5; \$0 per day for days 6-90	\$475 per day for days 1-20; \$0 per day for days 21-90
Max Out-of-Pocket	\$5,200 applies to in-network Medicare-covered benefits	\$5,500 applies to in-network Medicare-covered benefits	\$11,300 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	\$0	0 - 40%
Ambulatory Surgery Center	\$0 - \$235	\$0 - \$250	40%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$80 Tier 5: 33%	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$80 Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2.5x one month) Tier 3: \$126 (3x one month) Tier 4: \$240 (3x one month) Tier 5: N/A	Tier 1: \$0 Tier 2: \$10 (2.5x one month) Tier 3: \$126 (3x one month) Tier 4: \$240 (3x one month) Tier 5: N/A	N/A



# **NEW MEXICO**

#### 2022 OVERVIEW



#### New Mexico - Albuquerque and Santa Fe

The following counties offer these plans:

- H0672-005 Cigna Preferred Medicare (HMO)
- H7849-028 Cigna True Choice Medicare (PPO)

Bernalillo, Rio Arriba, San Juan, San Miguel, Sandoval, Santa Fe, Taos, Torrance and Valencia



# MEDICARE ELIGIBLE POPULATION:

275,166

# MEDICARE ADVANTAGE PENETRATION:

47.87%





### **MOUNTAIN STATES**

#### **NEW MEXICO**

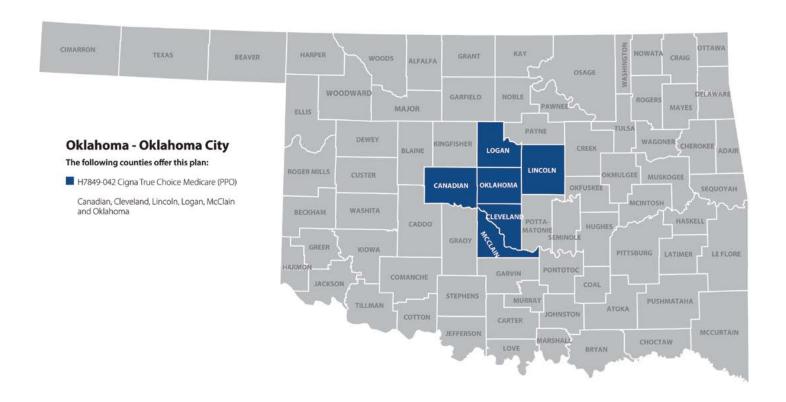
**COUNTIES** Bernalillo, Rio Arriba, Sandoval, San Juan, San Miguel, Sante Fe, Taos, Torrance, Valencia

PLAN ID NEW COUNTIE	H0672-005-000	H7849-	028-000
PLAN NAME	Cigna Preferred Medicare (HMO)	Cigna True Choic	e Medicare (PPO)
P LAW WAPIL	Cigila Freieneu Medicale (1140)	In Network	Out of Network
Total Premium	\$0	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$25	\$0 / \$30	\$0 / \$60
Inpatient Acute Care Hospital	\$290 per day for days 1-5; \$0 per day for days 6-90	\$330 per day for days 1-5; \$0 per day for days 6-90	\$400 per day for days 1-6; \$0 per day for days 7-90
Max Out-of-Pocket	\$4,600 applies to in-network Medicare-covered benefits	\$5,700 applies to in-network Medicare-covered benefits	\$11,300 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	\$0	0 - 40%
Ambulatory Surgery Center	\$0 - \$215	\$0 - \$250	40%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A



# **OKLAHOMA**

#### 2022 OVERVIEW





MEDICARE ELIGIBLE POPULATION:

227,157

MEDICARE ADVANTAGE PENETRATION:

34%





#### COUNTIES Canadian, Cleveland, Lincoln, Logan, McClain, Oklahoma

PLAN ID	H7849-042-000		
PLAN NAME	Cigna True Choice Medicare (PPO)		
PLAN NAME	In Network	Out of Network	
Total Premium	\$0	\$0	
Cost Share— PCP/Specialist	\$0 / \$35	\$0 / \$40	
Inpatient Acute Care Hospital	\$275 per day for days 1-5; \$0 per day for days 6-90	\$375 per day for days 1-5; \$0 per day for days 6-90	
Max Out-of-Pocket	\$5,550 applies to in-network Medicare-covered benefits	\$10,000 applies to in-network and out-of-network Medicare- covered benefits combined	
Lab	\$0	0 - 40%	
Ambulatory Surgery Center	\$0 - \$225	40%	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 29%	N/A	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A	







# **PACIFIC NORTHWEST**

#### 2022 OVERVIEW



#### **Oregon/Washington - Portland**

The following counties offer this plan:

- H7389-002 Cigna Preferred Medicare (HMO)
- H7849-055 Cigna True Choice Medicare (PPO)

**OR:** Clackamas, Multnomah, and Washington

WA: Clark



MEDICARE ELIGIBLE POPULATION:

316,773

MEDICARE ADVANTAGE PENETRATION:

62.80%

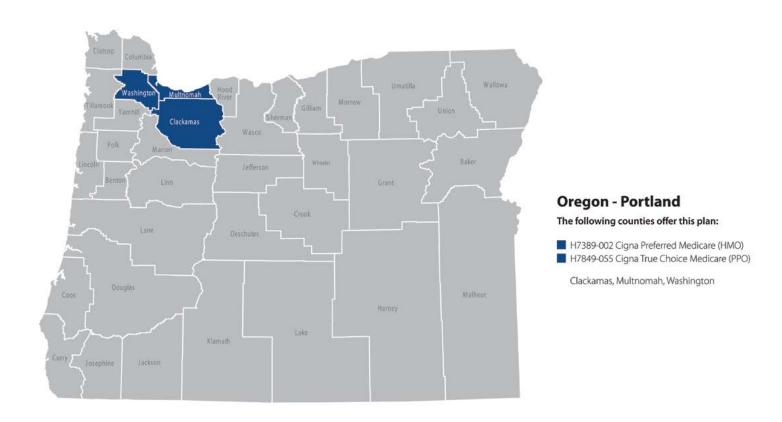


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# **OREGON**

#### 2022 OVERVIEW





# MEDICARE ELIGIBLE POPULATION:

311,741

# MEDICARE ADVANTAGE PENETRATION:

63.25%



# **WEST**

#### **PACIFIC NORTHWEST**

#### **OREGON**

**COUNTIES** OR: Clackamas, Multnomah, Washington

WA: Clark

PLAN ID NEW PLANS	H7389-002-000	H7849-0	055-000
PLAN NAME	Cigna Preferred Medicare (HMO)	Cigna True Choic In Network	e Medicare (PPO) Out of Network
Total Premium	\$0	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$25	\$0 / \$35	\$0 / \$35
Inpatient Acute Care Hospital	\$395 per day for days 1-5; \$0 per day for days 6-90	\$425 per day for days 1-4; \$0 per day for days 5-90	\$475 per day for days 1-4; \$0 per day for days 5-90
Max Out-of-Pocket	\$6,500 applies to in-network Medicare-covered benefits	\$6,900 applies to in-network Medicare-covered benefits	\$10,000 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	\$0	\$0
Ambulatory Surgery Center	\$0 - \$250	\$0 - \$295	\$0 - \$350
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$0 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	Tier 1: \$0 Tier 2: \$10 Tier 3: \$42 Tier 4: \$95 Tier 5: 29%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$0 Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	Tier 1: \$0 Tier 2: \$20 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A



# **WASHINGTON**

2022 OVERVIEW





# MEDICARE ELIGIBLE POPULATION:

93,650

# MEDICARE ADVANTAGE PENETRATION:

62.89%



# **WEST**

#### **PACIFIC NORTHWEST**

#### **OREGON**

**COUNTIES** OR: Clackamas, Multnomah, Washington

WA: Clark

PLAN ID NEW PLANS	H7389-002-000	H7849-0	055-000
PLAN NAME	Cigna Preferred Medicare (HMO)	Cigna True Choic In Network	e Medicare (PPO) Out of Network
Total Premium	\$0	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$25	\$0 / \$35	\$0 / \$35
Inpatient Acute Care Hospital	\$395 per day for days 1-5; \$0 per day for days 6-90	\$425 per day for days 1-4; \$0 per day for days 5-90	\$475 per day for days 1-4; \$0 per day for days 5-90
Max Out-of-Pocket	\$6,500 applies to in-network Medicare-covered benefits	\$6,900 applies to in-network Medicare-covered benefits	\$10,000 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	\$0	\$0
Ambulatory Surgery Center	\$0 - \$250	\$0 - \$295	\$0 - \$350
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$0 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	Tier 1: \$0 Tier 2: \$10 Tier 3: \$42 Tier 4: \$95 Tier 5: 29%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$0 Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	Tier 1: \$0 Tier 2: \$20 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A

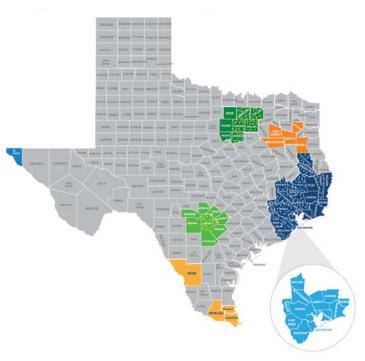






# **TEXAS**

#### 2022 OVERVIEW



#### **Texas - Houston and Southeast**

The following counties offer these plans:

- H4513-061-001 Cigna Preferred Medicare (HMO)
- H4513-060-001 Cigna TotalCare Medicare (HMO D-SNP)
  H4513-009 Cigna Fundamental Medicare (HMO) MA only
- H4513-066 Cigna Preferred Savings Medicare (HMO)

Angelina, Brazoria, Chambers, Fort Bend, Galveston, Hardin, Harris, Jasper, Jefferson, Liberty, Montgomery, Nacogdoches, Newton, Orange, Polk, San Jacinto, Tyler, Walker and Waller.

- ✓ H7849-038 Cigna True Choice Medicare (PPO)
   ✓ H7849-062 Cigna True Choice Plus Medicare (PPO)
- Angelina, Brazoria, Fort Bend, Galveston, Harris, Jasper, Liberty,

Montgomery, Nacogdoches, Polk, San Jacinto, Walker and Waller.

H4513-064 Cigna Alliance Medicare (HMO)

Brazoria, Chambers, Fort Bend, Galveston, Hardin, Harris, Jefferson, Liberty, Montgomery, Orange, Walker and Waller

#### Texas - San Antonio

The following counties offer these plans:

- ISH4513-028 Cigna Preferred Medicare (HMO)
- ☑ H4513-061-001 Cigna Preferred Medicare (HMO)
  ☑ H4513-066 Cigna Preferred Savings Medicare (HMO)
- NH4513-062 Cigna Fundamental Medicare (HMO) MA Only H4513-029 Cigna TotalCare (HMO D-SNP)
- RH4513-060-001 Cigna TotalCare (HMO D-SNP)

- H4513-061-001 Cigna Preferred Medicare (HMO)
- H4513-066 Cigna Preferred Savings Medicare (HMO)
  H4513-060-001 Cigna TotalCare (HMO D-SNP)
- H4513-062 Cigna Fundamental Medicare (HMO) MA Only H7849-038 Cigna True Choice Medicare (PPO)
- H7849-062 Cigna True Choice Plus Medicare (PPO)

Atascosa, Bandera, Kendall, Medina and Wilson Comal and Guadalupe offer all above plans EXCEPT the PPO Plans.

#### **Texas - Dallas-Fort Worth**

The following counties offer these plans:

- H4513-028 Cigna Preferred Medicare (HMO)
- H4513-029 Cigna TotalCare (HMO D-SNP)
  H7849-040 Cigna True Choice Medicare (PPO)

Collin, Dallas, Denton, Hood, Johnson, Parker, Tarrant,

- H7787-002 Cigna Fundamental Medicare (PPO)
- TH7787-001 Cigna Preferred Medicare (PPO)

Collin, Dallas, Denton, Johnson, and Tarrant.

#### Texas - El Paso

The following counties offer these plans:

- H4513-061-003 Cigna Preferred Medicare (HMO)
- H4513-060-003 Cigna TotalCare (HMO D-SNP)
- H4513-062 Cigna Fundamental Medicare (HMO) MA Only H7849-041 Cigna True Choice Medicare (PPO)

#### Texas - North

The following counties offer these plans:

- H4513-026 Cigna Preferred Medicare (HMO)
- H4513-027 Cigna TotalCare (HMO D-SNP)
  H7849-040 Cigna True Choice Medicare (PPO)

Henderson, Rusk, Smith, Upshur, and Van Zandt

#### Texas - Rio Grande Valley

The following counties offer these plans:

- H4513-061-002 Cigna Preferred Medicare (HMO)
- H4513-060-002 Ciona TotalCare (HMO D-SNP)
- H4513-009 Cigna Fundamental Medicare (HMO) MA Only H7849-039 Cigna True Choice Medicare (PPO)

Cameron, Hidalgo, Webb, and Willacy



#### **MEDICARE ELIGIBLE POPULATION:**

2,853,382

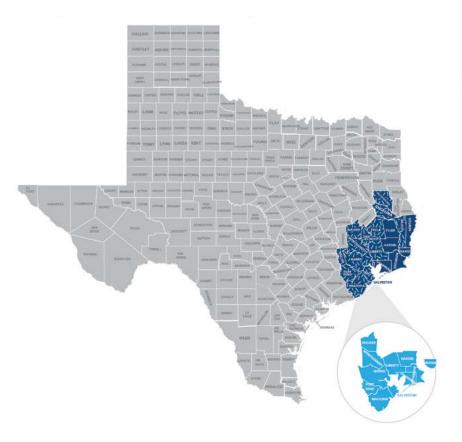
#### MEDICARE ADVANTAGE **PENETRATION:**

49.96%



# TEXAS — HOUSTON AND SOUTHEAST

2022 OVERVIEW



#### **Texas - Houston and Southeast**

#### The following counties offer these plans:

- H4513-061-001 Cigna Preferred Medicare (HMO)
- H4513-060-001 Cigna TotalCare Medicare (HMO D-SNP)
- H4513-009 Cigna Fundamental Medicare (HMO) MA only
- H4513-066 Cigna Preferred Savings Medicare (HMO)

Angelina, Brazoria, Chambers, Fort Bend, Galveston, Hardin, Harris, Jasper, Jefferson, Liberty, Montgomery, Nacogdoches, Newton, Orange, Polk, San Jacinto, Tyler, Walker and Waller.

- # H7849-038 Cigna True Choice Medicare (PPO)
- H7849-062 Cigna True Choice Plus Medicare (PPO)

Angelina, Brazoria, Fort Bend, Galveston, Harris, Jasper, Liberty, Montgomery, Nacogdoches, Polk, San Jacinto, Walker and Waller.

H4513-064 Cigna Alliance Medicare (HMO)

Brazoria, Chambers, Fort Bend, Galveston, Hardin Harris, Jefferson, Liberty, Montgomery, Orange, Walker and Waller.



# MEDICARE ELIGIBLE POPULATION:

1,061,333

# MEDICARE ADVANTAGE PENETRATION:

51.23%





**COUNTIES** Angelina, Atascosa, Bandera, Bexar, Brazoria, Chambers, Comal, Fort Bend, Galveston, Guadalupe, Hardin, Harris, Jasper, Jefferson, Kendall, Liberty, Medina, Montgomery,

Nacogdoches, Newton, Orange, Polk, San Jacinto, Tyler, Walker, Waller, Wilson

PLAN ID NEW COUNTIE	H4513-061-001	H4513-060-001
PLAN NAME	Cigna Preferred Medicare (HMO)	Cigna TotalCare (HMO D-SNP)
Total Premium	\$0	\$3.70
Cost Share— PCP/Specialist	\$0 / \$20	\$0 / \$0
Inpatient Acute Care Hospital	\$350 per stay	\$0 per stay
Max Out-of-Pocket	\$3,400 applies to in-network Medicare-covered benefits	\$3,400 applies to in-network Medicare-covered benefits
Lab	\$0	\$0
Ambulatory Surgery Center	\$0 - \$150	\$0
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 29%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A





**COUNTIES** Angelina, Brazoria, Cameron, Chambers, Fort Bend, Galveston, Hardin, Harris, Hidalgo, Jasper, Jefferson, Liberty, Montgomery, Nacogdoches, Newton, Orange, Polk, San Jacinto, Tyler, Walker, Waller, Webb, Willacy

PLAN ID	H4513-009-000
PLAN NAME	Cigna Fundamental Medicare (HMO)
Total Premium	\$0
Cost Share— PCP/Specialist	\$0/\$30
Inpatient Acute Care Hospital	\$600 per stay
Max Out-of-Pocket	\$4,300 applies to in-network Medicare-covered benefits
Lab	\$0
Ambulatory Surgery Center	\$0 - \$200
Costshare— Preferred Retail RX (One Month)	N/A
Cost Share— Preferred Retail RX (Three Months)	N/A





**COUNTIES** Angelina, Atascosa, Bandera, Bexar, Brazoria, Chambers, Comal, Fort Bend, Galveston, Guadalupe, Hardin, Harris, Jasper, Jefferson, Kendall, Liberty, Medina, Montgomery, Nacogdoches, Newton, Orange, Polk, San Jacinto, Tyler, Walker, Waller, Wilson

PLAN NAME  Cigna Preferred Savings Medicare (HMO)  \$0  Cost Share— PCP/Specialist  Inpatient Acute Care Hospital  \$325 per day for days 1-6; \$0 per day for days 7-90  Max Out-of-Pocket  \$6,700 applies to in-network Medicare-covered benefits	,			
Total Premium \$0  Cost Share— PCP/Specialist  Inpatient Acute Care Hospital \$325 per day for days 1-6; \$0 per day for days 7-90  Max Out-of-Pocket \$6,700 applies to in-network Medicare-covered benefits  Lab \$0  Ambulatory Surgery Center \$0 - \$275  Costshare— Preferred Retail RX (One Month) Tier 3: \$42 Tier 1: \$0 Tier 2: \$4 Tier 4: \$95 Tier 5: 29%  Cost Share— Preferred Retail RX (Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 4: \$285 (3x one month)	PLAN ID	H4513-066-000		
Cost Share— PCP/Specialist  Inpatient Acute Care Hospital  Max Out-of-Pocket  \$6,700 applies to in-network Medicare-covered benefits  Lab  \$0  Ambulatory Surgery Center  Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 (One Month)  Tier 4: \$95 Tier 5: 29%  Cost Share— Preferred Retail RX (Three Months)  Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 4: \$285 (3x one month) Tier 4: \$285 (3x one month)	PLAN NAME	Cigna Preferred Savings Medicare (HMO)		
Inpatient Acute Care Hospital  \$325 per day for days 1-6; \$0 per day for days 7-90  Max Out-of-Pocket  \$6,700 applies to in-network Medicare-covered benefits  Lab  \$0  Ambulatory Surgery Center  Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 29%  Cost Share— Preferred Retail RX (One Month)  Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 4: \$285 (3x one month)	Total Premium	\$0		
\$0 per day for days 7-90  Max Out-of-Pocket \$6,700 applies to in-network Medicare-covered benefits  Lab \$0  Ambulatory Surgery Center  Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 (One Month) Tier 5: 29%  Cost Share— Preferred Retail RX (One Month)  Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month)		\$0 / \$45		
Lab \$0  Ambulatory Surgery Center  Tier 1: \$0 Tier 2: \$4 Preferred Retail RX (One Month)  Tier 3: \$42 Tier 4: \$95 Tier 5: 29%  Tier 5: 29%  Tier 2: \$8 (2x one month) Preferred Retail RX (Three Months)  Tier 4: \$285 (3x one month)	<del>-</del>			
Ambulatory Surgery Center  Tier 1: \$0 Tier 2: \$4 Preferred Retail RX (One Month)  Tier 3: \$42 Tier 4: \$95 Tier 5: 29%  Tier 1: \$0 Tier 2: \$8 (2x one month) Preferred Retail RX (Three Months)  Tier 4: \$285 (3x one month)	Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits		
Tier 1: \$0	Lab	\$0		
Costshare— Preferred Retail RX (One Month)  Tier 3: \$42 Tier 4: \$95 Tier 5: 29%  Tier 1: \$0  Cost Share— Tier 2: \$8 (2x one month) Preferred Retail RX Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month)	_	\$0 - \$275		
Cost Share—Tier 2: \$8 (2x one month)Preferred Retail RXTier 3: \$126 (3x one month)(Three Months)Tier 4: \$285 (3x one month)	Preferred Retail RX	Tier 2: \$4 Tier 3: \$42 Tier 4: \$95		
	Preferred Retail RX	Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month)		





**COUNTIES** Angelina, Atascosa, Bandera, Brazoria, Fort Bend, Galveston, Harris, Jasper, Kendall, Liberty, Medina, Montgomery, Nacogdoches, Polk, San Jacinto, Waller, Walker Wilson

Walker, Wilson			
PLAN ID	H7849-038-000 NEW COUN		
PLAN NAME	Cigna True Choice Medicare (PPO)		
PLAN NAME	In Network	Out of Network	
Total Premium	\$0	\$0	
Cost Share— PCP/Specialist	\$0 / \$35	\$0 / \$45	
Inpatient Acute Care Hospital	\$325 per day for days 1-5; \$0 per day for days 6-90	30%	
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	\$10,000 applies to in-network and out-of-network Medicare- covered benefits combined	
Lab	\$0	0 - 40%	
Ambulatory Surgery Center	\$0 - \$275	40%	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 29%	N/A	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A	





**COUNTIES** Angelina, Atascosa, Bandera, Brazoria, Fort Bend, Galveston, Harris, Jasper, Kendall, Medina, Liberty, Montgomery, Nacogdoches, Polk, San Jacinto, Walker, Waller. Wilson

vvaller, vvilson			
PLAN ID	H7849-062-000		
PLAN NAME	Cigna True Choice Plus Medicare (PPO)		
PLAN NAME	In Network	Out of Network	
Total Premium	\$19	\$19	
Cost Share— PCP/Specialist	\$0 / \$25	\$0 / \$45	
Inpatient Acute Care Hospital	\$325 per day for days 1-5; \$0 per day for days 6-90	30%	
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	\$10,000 applies to in-network and out-of-network Medicare- covered benefits combined	
Lab	\$0	0 - 40%	
Ambulatory Surgery Center	\$0 - \$250	40%	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 29%	N/A	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A	





# **COUNTIES** Brazoria, Chambers, Fort Bend, Galveston, Hardin, Harris, Jefferson, Liberty, Montgomery, Orange, Walker, Waller

PLAN ID	H4513-064-000	NEW PLA
PLAN NAME	Cigna Alliance Medicare (HMO)	
Total Premium	\$0	
Cost Share— PCP/Specialist	\$0 / \$15	
Inpatient Acute Care Hospital	\$325 per stay	
Max Out-of-Pocket	\$3,400 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - \$100	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 29%	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	





# **TEXAS — RIO GRANDE VALLEY**

2022 OVERVIEW



#### **Texas - Rio Grande Valley**

The following counties offer these plans:

- H4513-061-002 Cigna Preferred Medicare (HMO)
- H4513-060-002 Cigna TotalCare (HMO D-SNP)
- H4513-009 Cigna Fundamental Medicare (HMO) MA Only
- H7849-039 Cigna True Choice Medicare (PPO)

Cameron, Hidalgo, Webb, and Willacy



# MEDICARE ELIGIBLE POPULATION:

211,204

# MEDICARE ADVANTAGE PENETRATION:

58.93%





#### **COUNTIES** Cameron, Hidalgo, Webb, Willacy

PLAN ID	H4513-061-002	H4513-060-002
PLAN NAME	Cigna Preferred Medicare (HMO)	Cigna TotalCare (HMO D-SNP)
Total Premium	\$0	\$3.70
Cost Share— PCP/Specialist	\$0 / \$20	\$0 / \$0
Inpatient Acute Care Hospital	\$300 per stay	\$0 per stay
Max Out-of-Pocket	\$3,400 applies to in-network Medicare-covered benefits	\$3,400 applies to in-network Medicare-covered benefits
Lab	\$0	\$0
Ambulatory Surgery Center	\$0 - \$150	\$0
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 29%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A





**COUNTIES** Angelina, Brazoria, Cameron, Chambers, Fort Bend, Galveston, Hardin, Harris, Hidalgo, Jasper, Jefferson, Liberty, Montgomery, Nacogdoches, Newton, Orange, Polk, San Jacinto, Tyler, Walker, Waller, Webb, Willacy

PLAN ID	H4513-009-000	
PLAN NAME	Cigna Fundamental Medicare (HMO)	
Total Premium	\$0	
Cost Share— PCP/Specialist	\$0 / \$30	
Inpatient Acute Care Hospital	\$600 per stay	
Max Out-of-Pocket	\$4,300 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - \$200	
Costshare— Preferred Retail RX (One Month)	N/A	
Cost Share— Preferred Retail RX (Three Months)	N/A	





#### **COUNTIES** Cameron, Hidalgo, Webb, Willacy

PLAN ID	H7849-0	039-000 NEW COUN	
PLAN NAME		Cigna True Choice Medicare (PPO)	
	In Network	Out of Network	
Total Premium	\$0	\$0	
Cost Share— PCP/Specialist	\$0 / \$35	\$0 / \$45	
Inpatient Acute Care Hospital	\$325 per day for days 1-5; \$0 per day for days 6-90	\$375 per day for days 1-5; \$0 per day for days 6-90	
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	\$10,000 applies to in-network and out-of-network Medicare- covered benefits combined	
Lab	\$0	0 - 40%	
Ambulatory Surgery Center	\$0 - \$275	40%	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 29%	N/A	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A	



# **TEXAS — SAN ANTONIO**

2022 OVERVIEW



#### Texas - San Antonio

#### The following counties offer these plans:

- H4513-028 Cigna Preferred Medicare (HMO)
- XH4513-061-001 Cigna Preferred Medicare (HMO)
- MH4513-066 Cigna Preferred Savings Medicare (HMO)
- H4513-062 Cigna Fundamental Medicare (HMO) MA Only
- MH4513-029 Cigna TotalCare (HMO D-SNP)
- MH4513-060-001 Cigna TotalCare (HMO D-SNP)

#### Bexar

- H4513-061-001 Cigna Preferred Medicare (HMO)
- H4513-066 Cigna Preferred Savings Medicare (HMO)
- H4513-060-001 Cigna TotalCare (HMO D-SNP)
- H4513-062 Cigna Fundamental Medicare (HMO) MA Only
- H7849-038 Cigna True Choice Medicare (PPO)
- H7849-062 Cigna True Choice Plus Medicare (PPO)

Atascosa, Bandera, Kendall, Medina and Wilson.

Comal and Guadalupe offer all above plans EXCEPT the PPO Plans



# MEDICARE ELIGIBLE POPULATION:

414,976

# MEDICARE ADVANTAGE PENETRATION:

48.29%





#### **COUNTIES** Bexar, Collin, Dallas, Denton, Hood, Johnson, Parker, Tarrant, Wise

PLAN ID	H4513-028-000	
PLAN NAME	Cigna Preferred Medicare (HMO)	
Total Premium	\$0	
Cost Share— PCP/Specialist	\$0 / \$25	
Inpatient Acute Care Hospital	\$250 per day for days 1-6; \$0 per day for days 7-90	
Max Out-of-Pocket	\$3,900 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - \$175	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 29%	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	





**COUNTIES** Angelina, Atascosa, Bandera, Bexar, Brazoria, Chambers, Comal, Fort Bend, Galveston, Guadalupe, Hardin, Harris, Jasper, Jefferson, Kendall, Liberty, Medina, Montgomery,

Nacogdoches, Newton, Orange, Polk, San Jacinto, Tyler, Walker, Waller, Wilson

PLAN ID NEW COUNTIL	H4513-061-001	H4513-060-001
PLAN NAME	Cigna Preferred Medicare (HMO)	Cigna TotalCare (HMO D-SNP)
Total Premium	\$0	\$3.70
Cost Share— PCP/Specialist	\$0 / \$20	\$0/\$0
Inpatient Acute Care Hospital	\$350 per stay	\$0 per stay
Max Out-of-Pocket	\$3,400 applies to in-network Medicare-covered benefits	\$3,400 applies to in-network Medicare-covered benefits
Lab	\$0	\$0
Ambulatory Surgery Center	\$0 - \$150	\$0
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 29%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A





**COUNTIES** Angelina, Atascosa, Bandera, Bexar, Brazoria, Chambers, Comal, Fort Bend, Galveston, Guadalupe, Hardin, Harris, Jasper, Jefferson, Kendall, Liberty, Medina, Montgomery, Nacogdoches, Newton, Orange, Polk, San Jacinto, Tyler, Walker, Waller, Wilson

PLAN ID	H4513-066-000	
PLAN NAME	Cigna Preferred Savings Medicare (HMO)	
Total Premium	\$0	
Cost Share— PCP/Specialist	\$0 / \$45	
Inpatient Acute Care Hospital	\$325 per day for days 1-6; \$0 per day for days 7-90	
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - \$275	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 29%	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	





#### **COUNTIES** Atascosa, Bandera, Bexar, Comal, El Paso, Guadalupe, Kendall, Medina, Wilson

PLAN ID	H4513-062-000 NEW COUN	
PLAN NAME	Cigna Fundamental Medicare (HMO)	
Total Premium	\$0	
Cost Share— PCP/Specialist	\$0 / \$30	
Inpatient Acute Care Hospital	\$600 per stay	
Max Out-of-Pocket	\$4,300 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - \$200	
Costshare— Preferred Retail RX (One Month)	N/A	
Cost Share— Preferred Retail RX (Three Months)	N/A	





#### **COUNTIES** Bexar, Collin, Dallas, Denton, Hood, Johnson, Parker, Tarrant, Wise

PLAN ID	H4513-029-000	
PLAN NAME	Cigna TotalCare (HMO D-SNP)	
Total Premium	\$16.40	
Cost Share— PCP/Specialist	\$0 / \$0	
Inpatient Acute Care Hospital	\$190 per day for days 1-5; \$0 per day for days 6-90	
Max Out-of-Pocket	\$3,450 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	0 - 20%	
Costshare— Preferred Retail RX (One Month)	N/A	
Cost Share— Preferred Retail RX (Three Months)	N/A	





**COUNTIES** Angelina, Atascosa, Bandera, Brazoria, Fort Bend, Galveston, Harris, Jasper, Kendall, Liberty, Medina, Montgomery, Nacogdoches, Polk, San Jacinto, Waller, Walker Wilson

Walker, Wilson		
PLAN ID	H7849-038-000 NEW COUNT	
PLAN NAME	Cigna True Choice Medicare (PPO)	
PLAN NAME	In Network	Out of Network
Total Premium	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$35	\$0 / \$45
Inpatient Acute Care Hospital	\$325 per day for days 1-5; \$0 per day for days 6-90	30%
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	\$10,000 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	0 - 40%
Ambulatory Surgery Center	\$0 - \$275	40%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 29%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A





**COUNTIES** Angelina, Atascosa, Bandera, Brazoria, Fort Bend, Galveston, Harris, Jasper, Kendall, Medina, Liberty, Montgomery, Nacogdoches, Polk, San Jacinto, Walker, Waller. Wilson

vvaller, vvilson		
PLAN ID	H7849-062-000	
PLAN NAME	Cigna True Choice Plus Medicare (PPO)	
PLAN NAME	In Network	Out of Network
Total Premium	\$19	\$19
Cost Share— PCP/Specialist	\$0 / \$25	\$0 / \$45
Inpatient Acute Care Hospital	\$325 per day for days 1-5; \$0 per day for days 6-90	30%
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	\$10,000 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	0 - 40%
Ambulatory Surgery Center	\$0 - \$250	40%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 29%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A



# **TEXAS — DALLAS-FORT WORTH**

#### 2022 OVERVIEW



#### **Texas - Dallas-Fort Worth**

The following counties offer these plans:

- H4513-028 Cigna Preferred Medicare (HMO)
- H4513-029 Cigna TotalCare (HMO D-SNP)
- H7849-040 Cigna True Choice Medicare (PPO)

Collin, Dallas, Denton, Hood, Johnson, Parker, Tarrant, and Wise.

- M H7787-002 Cigna Fundamental Medicare (PPO)
- Transport H7787-001 Cigna Preferred Medicare (PPO)

Collin, Dallas, Denton, Johnson, and Tarrant.



# MEDICARE ELIGIBLE POPULATION:

931,409

# MEDICARE ADVANTAGE PENETRATION:

45.73%





### **COUNTIES** Bexar, Collin, Dallas, Denton, Hood, Johnson, Parker, Tarrant, Wise

PLAN ID	H4513-028-000
PLAN NAME	Cigna Preferred Medicare (HMO)
Total Premium	\$0
Cost Share— PCP/Specialist	\$0 / \$25
Inpatient Acute Care Hospital	\$250 per day for days 1-6; \$0 per day for days 7-90
Max Out-of-Pocket	\$3,900 applies to in-network Medicare-covered benefits
Lab	\$0
Ambulatory Surgery Center	\$0 - \$175
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 29%
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A





### **COUNTIES** Bexar, Collin, Dallas, Denton, Hood, Johnson, Parker, Tarrant, Wise

PLAN ID	H4513-029-000
PLAN NAME	Cigna TotalCare (HMO D-SNP)
Total Premium	\$16.40
Cost Share— PCP/Specialist	\$0 / \$0
Inpatient Acute Care Hospital	\$190 per day for days 1-5; \$0 per day for days 6-90
Max Out-of-Pocket	\$3,450 applies to in-network Medicare-covered benefits
Lab	\$0
Ambulatory Surgery Center	0 - 20%
Costshare— Preferred Retail RX (One Month)	N/A
Cost Share— Preferred Retail RX (Three Months)	N/A





## **COUNTIES** Collin, Dallas, Denton, Henderson, Hood, Parker, Johnson, Rusk, Smith, Tarrant, Upshur, Van Zandt, Wise

PLAN ID	H7849-040-000 NEW COUL		
PLAN NAME	Cigna True Choice Medicare (PPO)		
1 2/11/1/12	In Network	Out of Network	
Total Premium	\$0	\$0	
Cost Share— PCP/Specialist	\$0/\$35	\$0/\$45	
Inpatient Acute Care Hospital	\$325 per day for days 1-5; \$0 per day for days 6-90	\$375 per day for days 1-5; \$0 per day for days 6-90	
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	\$11,300 applies to in-network and out-of-network Medicare- covered benefits combined	
Lab	\$0	0 - 40%	
Ambulatory Surgery Center	\$0 - \$275	40%	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 29%		
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A	





### **COUNTIES** Collin, Dallas, Denton, Johnson, Tarrant

PLAN ID	H7787-001-000		
PLAN NAME	Cigna Preferred Medicare (PPO)		
PLAN NAME	In Network	Out of Network	
Total Premium	\$0	\$0	
Cost Share— PCP/Specialist	\$0 / \$35	50%	
Inpatient Acute Care Hospital	\$295 per day for days 1-5; \$0 per day for days 6-90	30%	
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	\$11,300 applies to in-network and out-of-network Medicare- covered benefits combined	
Lab	\$0	0 - 50%	
Ambulatory Surgery Center	\$0 - \$275	50%	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 29%	N/A	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A	





### **COUNTIES** Collin, Dallas, Denton, Johnson, Tarrant

PLAN ID	H7787-002-000		
PLAN NAME	Cigna Fundamental Medicare (PPO)		
PLAN NAPIL	In Network	Out of Network	
Total Premium	\$0	\$0	
Cost Share— PCP/Specialist	\$0 - \$10 / \$30	50%	
Inpatient Acute Care Hospital	\$255 per day for days 1-5; \$0 per day for days 6-90	20%	
Max Out-of-Pocket	\$5,700 applies to in-network Medicare-covered benefits	\$8,700 applies to in-network and out-of-network Medicare- covered benefits combined	
Lab	\$0	0 - 50%	
Ambulatory Surgery Center	\$0 - \$175	50%	
Costshare— Preferred Retail RX (One Month)	N/A	N/A	
Cost Share— Preferred Retail RX (Three Months)	N/A	N/A	



## TEXAS — EL PASO

### 2022 OVERVIEW



### Texas - El Paso

#### The following counties offer these plans:

- H4513-061-003 Cigna Preferred Medicare (HMO)
- H4513-060-003 Cigna TotalCare (HMO D-SNP)
- H4513-062 Cigna Fundamental Medicare (HMO) MA Only
- H7849-041 Cigna True Choice Medicare (PPO)

El Paso



## MEDICARE ELIGIBLE POPULATION:

133,815

## MEDICARE ADVANTAGE PENETRATION:

66.46%





### **COUNTIES** El Paso

PLAN ID	H4513-061-003	H4513-060-003
PLAN NAME	Cigna Preferred Medicare (HMO)	Cigna TotalCare (HMO D-SNP)
Total Premium	\$0	\$3.70
Cost Share— PCP/Specialist	\$0 / \$20	\$0/\$0
Inpatient Acute Care Hospital	\$125 per day for days 1-5; \$0 per day for days 6-90	\$0 per stay
Max Out-of-Pocket	\$3,400 applies to in-network Medicare-covered benefits	\$3,400 applies to in-network Medicare-covered benefits
Lab	\$0	\$0
Ambulatory Surgery Center	\$0 - \$100	\$0
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 29%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A





### **COUNTIES** Atascosa, Bandera, Bexar, Comal, El Paso, Guadalupe, Kendall, Medina, Wilson

PLAN ID	H4513-062-000 NEW COUN
PLAN NAME	Cigna Fundamental Medicare (HMO)
Total Premium	\$0
Cost Share— PCP/Specialist	\$0 / \$30
Inpatient Acute Care Hospital	\$600 per stay
Max Out-of-Pocket	\$4,300 applies to in-network Medicare-covered benefits
Lab	\$0
Ambulatory Surgery Center	\$0 - \$200
Costshare— Preferred Retail RX (One Month)	N/A
Cost Share— Preferred Retail RX (Three Months)	N/A





### **COUNTIES** El Paso

PLAN ID	H7849-041-000		
PLAN NAME	Cigna True Choice Medicare (PPO)		
PLAN NAME	In Network	Out of Network	
Total Premium	\$0	\$0	
Cost Share— PCP/Specialist	\$0 / \$35 \$20 / \$45		
Inpatient Acute Care Hospital	\$275 per day for days 1-5; \$0 per day for days 6-90	30%	
Max Out-of-Pocket	\$5,900 applies to in-network Medicare-covered benefits  \$10,000 applies to in-network and out-of-network Medicare-covered benefits comb		
Lab	\$0	0 - 40%	
Ambulatory Surgery Center	\$0 - \$200	40%	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 29%		
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A	



## **TEXAS — NORTH**

2022 OVERVIEW



### **Texas - North**

The following counties offer these plans:

- H4513-026 Cigna Preferred Medicare (HMO)
- H4513-027 Cigna TotalCare (HMO D-SNP)
- H7849-040 Cigna True Choice Medicare (PPO)

Henderson, Rusk, Smith, Upshur, and Van Zandt



MEDICARE ELIGIBLE POPULATION:

100,645

MEDICARE ADVANTAGE PENETRATION:

41.73%





### **COUNTIES** Henderson, Rusk, Smith, Upshur, Van Zandt

PLAN ID	H4513-026-000	H4513-027-000
PLAN NAME	Cigna Preferred Medicare (HMO)	Cigna TotalCare (HMO D-SNP)
Total Premium	\$0	\$17.60
Cost Share— PCP/Specialist	\$0 / \$25	\$0/\$0
Inpatient Acute Care Hospital	\$275 per day for days 1-5; \$0 per day for days 6-90	\$0 per stay
Max Out-of-Pocket	\$4,400 applies to in-network Medicare-covered benefits	\$3,400 applies to in-network Medicare-covered benefits
Lab	\$0	\$0
Ambulatory Surgery Center	\$0 - \$200	\$0
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 29%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A





## **COUNTIES** Collin, Dallas, Denton, Henderson, Hood, Parker, Johnson, Rusk, Smith, Tarrant, Upshur, Van Zandt, Wise

PLAN ID	H7849-040-000 NEW COUN		
PLAN NAME	Cigna True Choice Medicare (PPO)		
	In Network	Out of Network	
Total Premium	\$0	\$0	
Cost Share— PCP/Specialist	\$0 / \$35	\$0 / \$45	
Inpatient Acute Care Hospital	\$325 per day for days 1-5; \$0 per day for days 6-90	\$375 per day for days 1-5; \$0 per day for days 6-90	
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	\$11,300 applies to in-network and out-of-network Medicare- covered benefits combined	
Lab	\$0	0 - 40%	
Ambulatory Surgery Center	\$0 - \$275	40%	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 29%		
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A	





## **UTAH**

### 2022 OVERVIEW



### Utah

### The following counties offer this plan:

- H7389-001 Cigna Preferred Medicare (HMO)
- H7849-029 Cigna True Choice Medicare (PPO)

Box Elder, Davis, Salt Lake, Tooele, Utah, and Weber



MEDICARE ELIGIBLE POPULATION:

302,915

MEDICARE ADVANTAGE PENETRATION:

46.96%



## **WEST**

### **MOUNTAIN STATES**

### UTAH

**COUNTIES** Box Elder, Davis, Salt Lake, Tooele, Utah, Weber

Box Elder, Davis, Salt Lake, Tooele, Utah, Weber

PLAN ID NEW PLAN	H7389-001-000 NE	W H7849-0	029-000
PLAN NAME	Cigna Preferred Medicare (HMO)	Cigna True Choic	e Medicare (PPO)
I EAN WATE	digital referred reductive (11110)	In Network	Out of Network
Total Premium	\$0	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$20	\$0 / \$35	\$25 / \$60
Inpatient Acute Care Hospital	\$325 per day for days 1-5; \$0 per day for days 6-90	\$330 per day for days 1-5; \$0 per day for days 6-90	35%
Max Out-of-Pocket	\$5,200 applies to in-network Medicare-covered benefits	\$5,500 applies to in-network Medicare-covered benefits	\$11,300 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	\$0	0 - 40%
Ambulatory Surgery Center	\$0 - \$175	\$0 - \$275	40%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A







NORTH REGION







**Mid Atlantic** 

## MID-ATLANTIC — DISTRICT OF COLUMBIA, DELAWARE, MARYLAND

2022 OVERVIEW





MEDICARE ELIGIBLE POPULATION:

1,031,073

MEDICARE ADVANTAGE PENETRATION:

19.95%



## **DISTRICT OF COLUMBIA**

2022 OVERVIEW



### **District of Columbia (DC)**

The following plans are offered in DC:

- H2108-028 Cigna Preferred Medicare (HMO)
- H2108-001 Cigna TotalCare (HMO D-SNP)
- H2108-038 Cigna TotalCare Plus (HMO D-SNP)\*
- H2108-029 Cigna Achieve Medicare (HMO C-SNP)
- H7849-008 Cigna True Choice Medicare (PPO)
- H7849-009 Cigna True Choice Plus Medicare (PPO)
  - \* Not enrolling new customers in H2108-038 TotalCare Plus (HMO-DSNP) until late 2022



MEDICARE ELIGIBLE POPULATION:

94,640

MEDICARE ADVANTAGE PENETRATION:

24.42%



### **MID-ATLANTIC**

DC DELAWARE

**COUNTIES** DC: District of Columbia

DE: Kent, New Castle, Sussex

PLAN ID	H2108-028-000	H2108-029-000
PLAN NAME	Cigna Preferred Medicare (HMO)	Cigna Achieve Medicare (HMO C-SNP)
Total Premium	\$0	\$74
Cost Share— PCP/Specialist	\$0 / \$30	\$0 / \$40
Inpatient Acute Care Hospital	\$335 per day for days 1-6; \$0 per day for days 7-90	\$300 per day for days 1-6; \$0 per day for days 7-90
Max Out-of-Pocket	\$6,900 applies to in-network Medicare-covered benefits	\$3,450 applies to in-network Medicare-covered benefits
Lab	\$0	\$0
Ambulatory Surgery Center	\$0 - \$200	\$0 - \$200
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: \$95 Tier 5: 33% Tier 6: \$5
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A Tier 6: \$10 (2x one month)



### **MID-ATLANTIC**

### DC DELAWARE MARYLAND

**COUNTIES** DC: District of Columbia

DE: Kent, New Castle, Sussex

MD: Anne Arundel, Baltimore, Baltimore City, Harford

PLAN ID	H2108-001-000
PLAN NAME	Cigna TotalCare (HMO D-SNP)
Total Premium	\$22.40
Cost Share— PCP/Specialist	0 - 20% / 20%
Inpatient Acute Care Hospital	\$1,300 per stay
Max Out-of-Pocket	\$7,550 applies to in-network Medicare-covered benefits
Lab	\$0
Ambulatory Surgery Center	0 - 20%
Costshare— Preferred Retail RX (One Month)	N/A
Cost Share— Preferred Retail RX (Three Months)	N/A



## MID-ATLANTIC DC DELAWARE

### **COUNTIES** District of Columbia

Not enrolling new customers in H2108-038 TotalCare Plus (HMO-DSNP) until late 2022		
PLAN ID	H2108-038-000*	NEW PLAI
PLAN NAME	Cigna TotalCare Plus (HMO D-SNP)	
Total Premium	\$22.40	
Cost Share— PCP/Specialist	0 - 20%/20%	
Inpatient Acute Care Hospital	2022 Standard Medicare	
Max Out-of-Pocket	\$7,550 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	0 - 20%	
Costshare— Preferred Retail RX (One Month)	N/A	
Cost Share— Preferred Retail RX (Three Months)	N/A	



### MID-ATLANTIC MID-ATLANTIC

**COUNTIES** DC: District of Columbia

DE: New Castle

PLAN ID	H7849-0	008-000
PLAN NAME	Cigna True Choice Medicare (PPO)	
	In Network	Out of Network
Total Premium	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$35	\$40 / \$55
Inpatient Acute Care Hospital	\$295 per day for days 1-6; \$0 per day for days 7-90	30%
Max Out-of-Pocket	\$7,300 applies to in-network Medicare-covered benefits	\$11,300 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	0 - 30%
Ambulatory Surgery Center	\$0 - \$225	30%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A



## MID-ATLANTIC MID-ATLANTIC

**COUNTIES** DC: District of Columbia

DE: New Castle

PLAN ID	H7849-0	009-000
PLAN NAME	Cigna True Choice Plus Medicare (PPO)	
Total Premium	In Network \$59	Out of Network \$59
Cost Share— PCP/Specialist	\$0 / \$30	\$40 / \$55
Inpatient Acute Care Hospital	\$250 per day for days 1-6; \$0 per day for days 7-90	30%
Max Out-of-Pocket	\$6,500 applies to in-network Medicare-covered benefits	\$11,300 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	0 - 30%
Ambulatory Surgery Center	\$0 - \$150	30%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A



## **DELAWARE**

### 2022 OVERVIEW

#### **Delaware**

#### The following counties offer these plans:

- H2108-028 Cigna Preferred Medicare (HMO)
- H2108-001 Cigna TotalCare (HMO D-SNP)
- H2108-029 Cigna Achieve Medicare (HMO C-SNP)

Kent, New Castle and Sussex

### The following county offers these plans also:

- M H7849-008 Cigna True Choice Medicare (PPO)
- Mrs49-009 Cigna True Choice Plus Medicare (PPO)

New Castle





MEDICARE ELIGIBLE POPULATION:

217,928

MEDICARE ADVANTAGE PENETRATION:

22.51%



### **MID-ATLANTIC**

DC DELAWARE

**COUNTIES** DC: District of Columbia

DE: Kent, New Castle, Sussex

PLAN ID	H2108-028-000	H2108-029-000
PLAN NAME	Cigna Preferred Medicare (HMO)	Cigna Achieve Medicare (HMO C-SNP)
Total Premium	\$0	\$74
Cost Share— PCP/Specialist	\$0 / \$30	\$0 / \$40
Inpatient Acute Care Hospital	\$335 per day for days 1-6; \$0 per day for days 7-90	\$300 per day for days 1-6; \$0 per day for days 7-90
Max Out-of-Pocket	\$6,900 applies to in-network Medicare-covered benefits	\$3,450 applies to in-network Medicare-covered benefits
Lab	\$0	\$0
Ambulatory Surgery Center	\$0 - \$200	\$0 - \$200
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: \$95 Tier 5: 33% Tier 6: \$5
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A Tier 6: \$10 (2x one month)



### **MID-ATLANTIC**

### DC DELAWARE MARYLAND

**COUNTIES** DC: District of Columbia

DE: Kent, New Castle, Sussex

MD: Anne Arundel, Baltimore, Baltimore City, Harford

PLAN ID	H2108-001-000
PLAN NAME	Cigna TotalCare (HMO D-SNP)
Total Premium	\$22.40
Cost Share— PCP/Specialist	0 - 20% / 20%
Inpatient Acute Care Hospital	\$1,300 per stay
Max Out-of-Pocket	\$7,550 applies to in-network Medicare-covered benefits
Lab	\$0
Ambulatory Surgery Center	0 - 20%
Costshare— Preferred Retail RX (One Month)	N/A
Cost Share— Preferred Retail RX (Three Months)	N/A





### MID-ATLANTIC MID-ATLANTIC

**COUNTIES** DC: District of Columbia

DE: New Castle

PLAN ID	H7849-0	008-000
PLAN NAME	Cigna True Choice Medicare (PPO)	
	In Network	Out of Network
Total Premium	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$35	\$40 / \$55
Inpatient Acute Care Hospital	\$295 per day for days 1-6; \$0 per day for days 7-90	30%
Max Out-of-Pocket	\$7,300 applies to in-network Medicare-covered benefits	\$11,300 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	0 - 30%
Ambulatory Surgery Center	\$0 - \$225	30%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A



## MID-ATLANTIC MID-ATLANTIC

**COUNTIES** DC: District of Columbia

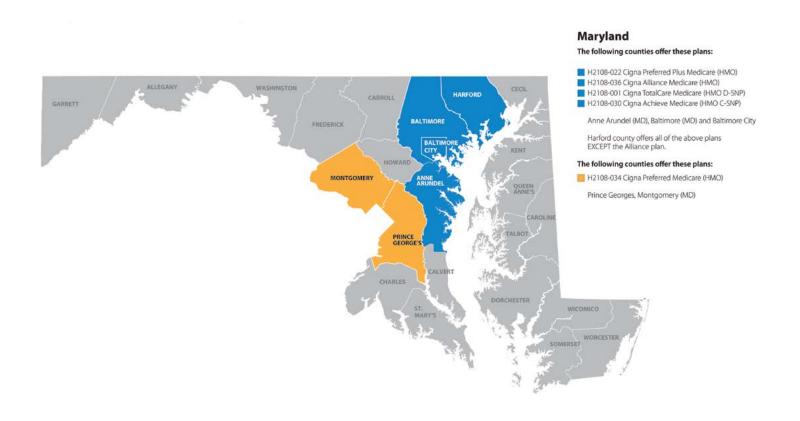
DE: New Castle

PLAN ID	H7849-0	009-000
PLAN NAME	Cigna True Choice Plus Medicare (PPO)	
Total Premium	In Network \$59	Out of Network \$59
Cost Share— PCP/Specialist	\$0 / \$30	\$40 / \$55
Inpatient Acute Care Hospital	\$250 per day for days 1-6; \$0 per day for days 7-90	30%
Max Out-of-Pocket	\$6,500 applies to in-network Medicare-covered benefits	\$11,300 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	0 - 30%
Ambulatory Surgery Center	\$0 - \$150	30%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A



## **MARYLAND**

### 2022 OVERVIEW





## MEDICARE ELIGIBLE POPULATION:

718,505

## MEDICARE ADVANTAGE PENETRATION:

18.59%



### **MID-ATLANTIC**

### **MARYLAND**

**COUNTIES** Anne Arundel, Baltimore, Baltimore City, Harford

PLAN ID	H2108-022-000	H2108-030-000
PLAN NAME	Cigna Preferred Plus Medicare (HMO)	Cigna Achieve Medicare (HMO C-SNP)
Total Premium	\$59	\$80
Cost Share— PCP/Specialist	\$0 / \$50	\$0 / \$45
Inpatient Acute Care Hospital	\$360 per day for days 1-5; \$0 per day for days 6-90	\$390 per day for days 1-5; \$0 per day for days 6-90
Max Out-of-Pocket	\$7,550 applies to in-network Medicare-covered benefits	\$7,550 applies to in-network Medicare-covered benefits
Lab	\$0	\$0
Ambulatory Surgery Center	\$0 - \$300	\$0 - \$250
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: \$95 Tier 5: 33% Tier 6: \$10
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A Tier 6: \$20 (2x one month)



### **MID-ATLANTIC**

### **MARYLAND**

### **COUNTIES** Montgomery, Prince George's

PLAN ID	H2108-034-000	
PLAN NAME	Cigna Preferred Medicare (HMO)	
Total Premium	\$100	
Cost Share— PCP/Specialist	\$0 / \$40	
Inpatient Acute Care Hospital	\$310 per day for days 1-7; \$0 per day for days 8-90	
Max Out-of-Pocket	\$7,550 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - \$195	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: \$95 Tier 5: 28%	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$5 (1x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	



### **MID-ATLANTIC**

### **MARYLAND**

### **COUNTIES** Anne Arundel, Baltimore, Baltimore City

PLAN ID	H2108-036-000
PLAN NAME	Cigna Alliance Medicare (HMO)
Total Premium	\$29
Cost Share— PCP/Specialist	\$0 / \$50
Inpatient Acute Care Hospital	\$305 per day for days 1-7; \$0 per day for days 8-90
Max Out-of-Pocket	\$7,550 applies to in-network Medicare-covered benefits
Lab	\$0
Ambulatory Surgery Center	\$0 - \$300
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A



### **MID-ATLANTIC**

### DC DELAWARE MARYLAND

**COUNTIES** DC: District of Columbia

DE: Kent, New Castle, Sussex

MD: Anne Arundel, Baltimore, Baltimore City, Harford

PLAN ID	H2108-001-000
PLAN NAME	Cigna TotalCare (HMO D-SNP)
Total Premium	\$22.40
Cost Share— PCP/Specialist	0 - 20% / 20%
Inpatient Acute Care Hospital	\$1,300 per stay
Max Out-of-Pocket	\$7,550 applies to in-network Medicare-covered benefits
Lab	\$0
Ambulatory Surgery Center	0 - 20%
Costshare— Preferred Retail RX (One Month)	N/A
Cost Share— Preferred Retail RX (Three Months)	N/A



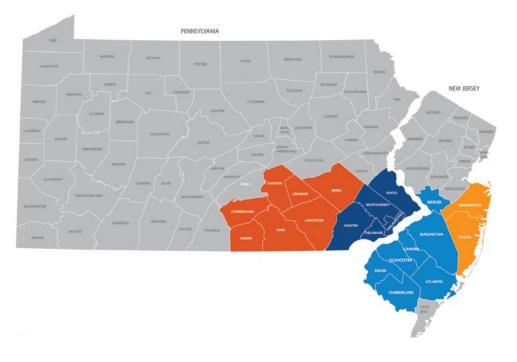






# **NEW JERSEY AND PENNSYLVANIA**

2022 OVFRVIEW



#### Pennsylvania

#### The following counties offer these plans:

- H3949-031 Cigna Alliance Medicare (HMO)
- H7849-006 Cigna True Choice Medicare (PPO)
- H3949-030 Cigna Preferred Medicare (HMO)
- H7849-007 True Choice Plus Medicare (PPO)
- H3949-013 Cigna Preferred Plus Medicare (HMO)
- H3949-024 Cigna Achieve Medicare (HMO C-SNP) H3949-026 Cigna Fundamental Medicare (HMO)
- H3949-009 Cigna TotalCare (HMO D-SNP)
- H3949-037 Cigna TotalCare Plus (HMO D-SNP)

Bucks, Chester, Delaware, Montgomery and Philadelphia

#### The following counties offer these plans:

- H3949-035 Cigna Preferred Medicare (HMO)
- H7849-031 Cigna True Choice Medicare (PPO)
- H7849-032 Cigna True Choice Plus Medicare (PPO)
- H3949-036 Cigna TotalCare (HMO D-SNP) H3949-037 Cigna TotalCare Plus (HMO D-SNP)

Adams, Berks, Cumberland, Dauphin, Lancaster, Lebanon and York

#### **New Jersey - Southern**

#### The following counties offer these plans:

- H3949-032 Cigna Preferred Medicare (HMO)
- H3949-033 Cigna Preferred Plus Medicare (HMO)
- H7849-033 Cigna True Choice Plus Medicare (PPO)

Atlantic, Burlington, Camden, Cumberland, Gloucester, Mercer and Salem

#### **New Jersey - Central**

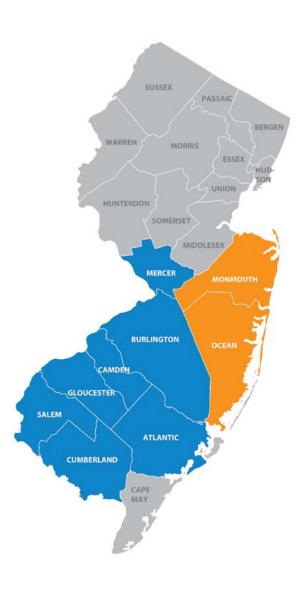
#### The following counties offer these plans:

- H3949-034 Cigna Preferred Medicare (HMO) H7849-030 Cigna True Choice Plus Medicare (PPO)
  - Monmouth and Ocean



# **NEW JERSEY**

#### 2022 OVERVIEW



#### **New Jersey - Southern**

The following counties offer these plans:

- H3949-032 Cigna Preferred Medicare (HMO)
- H3949-033 Cigna Preferred Plus Medicare (HMO)
- H7849-033 Cigna True Choice Plus Medicare (PPO)

Atlantic, Burlington, Camden, Cumberland, Gloucester, Mercer and Salem

#### **New Jersey - Central**

The following counties offer these plans:

- H3949-034 Cigna Preferred Medicare (HMO)
- H7849-030 Cigna True Choice Plus Medicare (PPO)

Monmouth and Ocean



MEDICARE ELIGIBLE POPULATION:

698,714

MEDICARE ADVANTAGE PENETRATION:

34.16%



#### **PENNSYLVANIA**

### **NEW JERSEY**

**COUNTIES** Atlantic, Burlington, Camden, Cumberland, Gloucester, Mercer, Salem

WEW		
PLAN ID NEW COUNTIE	H3949-032-000	Н3949-033-000
PLAN NAME	Cigna Preferred Medicare (HMO)	Cigna Preferred Plus Medicare (HMO)
Total Premium	\$0	\$59
Cost Share— PCP/Specialist	\$0 / \$30	\$0 / \$25
Inpatient Acute Care Hospital	\$295 per day for days 1-7; \$0 per day for days 8-90	\$275 per day for days 1-6; \$0 per day for days 7-90
Max Out-of-Pocket	\$7,200 applies to in-network Medicare-covered benefits	\$6,200 applies to in-network Medicare-covered benefits
Lab	\$0	\$0
Ambulatory Surgery Center	\$0 - \$150	\$0 - \$150
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A



#### **PENNSYLVANIA**

**NEW JERSEY** 

**COUNTIES** Atlantic, Burlington, Camden, Cumberland, Gloucester, Mercer, Salem

PLAN ID	H7849-033-000		
PLAN NAME	Cigna True Choice Plus Medicare (PPO)		
	In Network	Out of Network	
Total Premium	\$29	\$29	
Cost Share— PCP/Specialist	\$0 / \$30	\$40 / \$55	
Inpatient Acute Care Hospital	\$260 per day for days 1-6; \$0 per day for days 7-90	30%	
Max Out-of-Pocket	\$7,300 applies to in-network Medicare-covered benefits	\$11,300 applies to in-network and out-of-network Medicare- covered benefits combined	
Lab	\$0	0 - 30%	
Ambulatory Surgery Center	\$0 - \$175	30%	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	N/A	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A	



#### **PENNSYLVANIA**

### NEW JERSEY

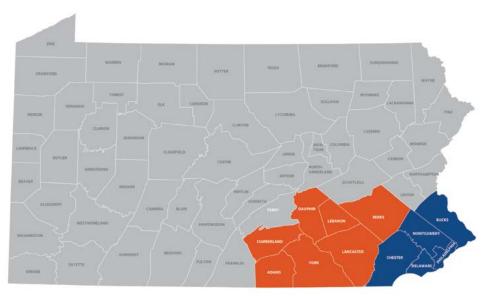
#### **COUNTIES** Monmouth, Ocean

PLAN ID	H3949-034-000	H7849-030-000	
PLAN NAME	Cigna Preferred Medicare (HMO)	Cigna True Choice I In Network	Plus Medicare (PPO) Out of Network
Total Premium	\$0	\$29	\$29
Cost Share— PCP/Specialist	\$0 / \$30	\$0 / \$20	\$40 / \$55
Inpatient Acute Care Hospital	\$350 per day for days 1-5; \$0 per day for days 6-90	\$195 per day for days 1-6; \$0 per day for days 7-90	30%
Max Out-of-Pocket	\$6,900 applies to in-network Medicare-covered benefits	\$7,250 applies to in-network Medicare-covered benefits	\$11,300 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	\$0	0 - 30%
Ambulatory Surgery Center	\$0 - \$225	\$0 - \$150	30%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A



### **PENNSYLVANIA**

#### 2022 OVERVIEW



#### Pennsylvania

#### The following counties offer these plans:

- H3949-031 Cigna Alliance Medicare (HMO)
- H7849-006 Cigna True Choice Medicare (PPO)
- H3949-030 Cigna Preferred Medicare (HMO)
- H7849-007 True Choice Plus Medicare (PPO)
- H3949-013 Cigna Preferred Plus Medicare (HMO)
- H3949-024 Cigna Achieve Medicare (HMO C-SNP)
- H3949-026 Cigna Fundamental Medicare (HMO)
- H3949-009 Cigna TotalCare (HMO D-SNP)
- H3949-037 Cigna TotalCare Plus (HMO D-SNP)

Bucks, Chester, Delaware, Montgomery and Philadelphia

#### The following counties offer these plans:

- H3949-035 Cigna Preferred Medicare (HMO)
- H7849-031 Cigna True Choice Medicare (PPO)
- H7849-032 Cigna True Choice Plus Medicare (PPO)
- H3949-036 Cigna TotalCare (HMO D-SNP)
- H3949-037 Cigna TotalCare Plus (HMO D-SNP)

Adams, Berks, Cumberland, Dauphin, Lancaster, Lebanon and York



MEDICARE ELIGIBLE POPULATION:

1,242,983

MEDICARE ADVANTAGE PENETRATION:

40.71%



### PENNSYLVANIA PENNSYLVANIA

PLAN ID	H3949-026-000	H3949-030-000	H3949-031-000
PLAN NAME	Cigna Fundamental Medicare (HMO)	Cigna Preferred Medicare (HMO)	Cigna Alliance Medicare (HMO)
Total Premium	\$0	\$34	\$0
Cost Share— PCP/Specialist	\$0 / \$25	\$0 / \$35	\$0 / \$25
Inpatient Acute Care Hospital	\$295 per day for days 1-6; \$0 per day for days 7-90	\$275 per day for days 1-7; \$0 per day for days 8-90	\$285 per day for days 1-7; \$0 per day for days 8-90
Max Out-of-Pocket	\$5,900 applies to in-network Medicare-covered benefits	\$5,900 applies to in-network Medicare-covered benefits	\$6,900 applies to in-network Medicare-covered benefits
Lab	\$0	\$0	\$0
Ambulatory Surgery Center	\$0 - \$200	\$0 - \$175	\$0 - \$195
Costshare— Preferred Retail RX (One Month)	N/A	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%
Cost Share— Preferred Retail RX (Three Months)	N/A	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A



### **PENNSYLVANIA**

PENNSYLVANIA

PLAN ID	H7849-006-000		
PLAN NAME	Cigna True Choice Medicare (PPO)		
PLAN NAME	In Network	Out of Network	
Total Premium	\$0	\$0	
Cost Share— PCP/Specialist	\$0 / \$35	\$40 / \$55	
Inpatient Acute Care Hospital	\$295 per day for days 1-6; \$0 per day for days 7-90	30%	
Max Out-of-Pocket	\$7,200 applies to in-network Medicare-covered benefits	\$11,300 applies to in-network and out-of-network Medicare- covered benefits combined	
Lab	\$0	0 - 30%	
Ambulatory Surgery Center	\$0 - \$225	30%	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	N/A	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A	



# PENNSYLVANIA PENNSYLVANIA

PLAN ID	H7849-007-000		
PLAN NAME	Cigna True Choice Plus Medicare (PPO)		
PLAN NAME	In Network	Out of Network	
Total Premium	\$59	\$59	
Cost Share— PCP/Specialist	\$0 / \$30	\$40 / \$55	
Inpatient Acute Care Hospital	\$250 per day for days 1-6; \$0 per day for days 7-90	30%	
Max Out-of-Pocket	\$6,100 applies to in-network Medicare-covered benefits	\$11,300 applies to in-network and out-of-network Medicare- covered benefits combined	
Lab	\$0	0 - 30%	
Ambulatory Surgery Center	\$0 - \$150	30%	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	N/A	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A	



# PENNSYLVANIA

PENNSYLVANIA

PLAN ID	Н3949-009-000	H3949-013-000	Н3949-024-000
PLAN NAME	Cigna TotalCare (HMO D-SNP)	Cigna Preferred Plus Medicare (HMO)	Cigna Achieve Medicare (HMO C-SNP)
Total Premium	\$28.40	\$134	\$0
Cost Share— PCP/Specialist	0 - 20% / 20%	\$0 / \$25	\$0 / \$30
Inpatient Acute Care Hospital	\$310 per day for days 1-5; \$0 per day for days 6-90	\$225 per day for days 1-7; \$0 per day for days 8-90	\$285 per day for days 1-7; \$0 per day for days 8-90
Max Out-of-Pocket	\$3,450 applies to in-network Medicare-covered benefits	\$4,900 applies to in-network Medicare-covered benefits	\$6,900 applies to in-network Medicare-covered benefits
Lab	\$0	\$0	\$0
Ambulatory Surgery Center	0 - 20%	\$0 - \$125	\$0 - \$195
Costshare— Preferred Retail RX (One Month)	N/A	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: \$95 Tier 5: 33% Tier 6: \$5
Cost Share— Preferred Retail RX (Three Months)	N/A	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A Tier 6: \$10 (2x one month)



#### **PENNSYLVANIA**

#### PENNSYLVANIA

**COUNTIES** Adams, Berks, Bucks, Chester, Cumberland, Dauphin, Delaware, Lancaster, Lebanon, Montgomery, Philadelphia, York

PLAN ID	H3949-037-000	
PLAN NAME	Cigna TotalCare Plus (HMO D-SNP)	
Total Premium	\$28.40	
Cost Share— PCP/Specialist	0 - 20% / 20%	
Inpatient Acute Care Hospital	2022 Standard Medicare	
Max Out-of-Pocket	\$3,450 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	0 - 20%	
Costshare— Preferred Retail RX (One Month)	N/A	
Cost Share— Preferred Retail RX (Three Months)	N/A	



### **PENNSYLVANIA**

#### PENNSYLVANIA

	NEW	
PLAN ID	H3949-035-000	
PLAN NAME	Cigna Preferred Medicare (HMO)	
Total Premium	\$0	
Cost Share— PCP/Specialist	\$0 / \$30	
Inpatient Acute Care Hospital	\$195 per day for days 1-8; \$0 per day for days 9-90	
Max Out-of-Pocket	\$6,900 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - \$250	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	



# PENNSYLVANIA PENNSYLVANIA

PLAN ID	H3949-036-000	NEW
PLAN NAME	Cigna TotalCare (HMO D-SNP)	
Total Premium	\$28.40	
Cost Share— PCP/Specialist	\$0 / \$25	
Inpatient Acute Care Hospital	\$265 per day for days 1-5; \$0 per day for days 6-90	
Max Out-of-Pocket	\$7,550 applies to in-network Medicare-covered benefits	
Lab	\$0	
Ambulatory Surgery Center	\$0 - \$200	
Costshare— Preferred Retail RX (One Month)	N/A	
Cost Share— Preferred Retail RX (Three Months)	N/A	



### **PENNSYLVANIA**

PENNSYLVANIA

PLAN ID	H7849-031-000 NEV		
PLAN NAME	Cigna True Choice Medicare (PPO)		
TEAN NAME	In Network	Out of Network	
Total Premium	\$0	\$0	
Cost Share— PCP/Specialist	\$0 / \$35	\$40 / \$55	
Inpatient Acute Care Hospital	\$195 per day for days 1-7; \$0 per day for days 8-90	30%	
Max Out-of-Pocket	\$7,250 applies to in-network Medicare-covered benefits	\$11,300 applies to in-network and out-of-network Medicare- covered benefits combined	
Lab	\$0	0 - 30%	
Ambulatory Surgery Center	\$0 - \$225	30%	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	N/A	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A	



# PENNSYLVANIA PENNSYLVANIA

PLAN ID	H7849-032-000 NEV	
PLAN NAME	Cigna True Choice Plus Medicare (PPO)	
	In Network	Out of Network
Total Premium	\$29	\$29
Cost Share— PCP/Specialist	\$0 / \$30	\$40 / \$55
Inpatient Acute Care Hospital	\$175 per day for days 1-7; \$0 per day for days 8-90	30%
Max Out-of-Pocket	\$6,150 applies to in-network Medicare-covered benefits	\$11,300 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	0 - 30%
Ambulatory Surgery Center	\$0 - \$225	30%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A



## OHIO

#### 2022 OVERVIEW



#### **CLEVELAND**

#### The following counties offer these plans:

- H0672-006 Cigna Preferred Medicare (HMO)
- H7849-015 Cigna True Choice Medicare (PPO)

Cuyahoga, Geauga, Lake, Lorain, Medina and Summit



# MEDICARE ELIGIBLE POPULATION:

558,356

# MEDICARE ADVANTAGE PENETRATION:

51.65%





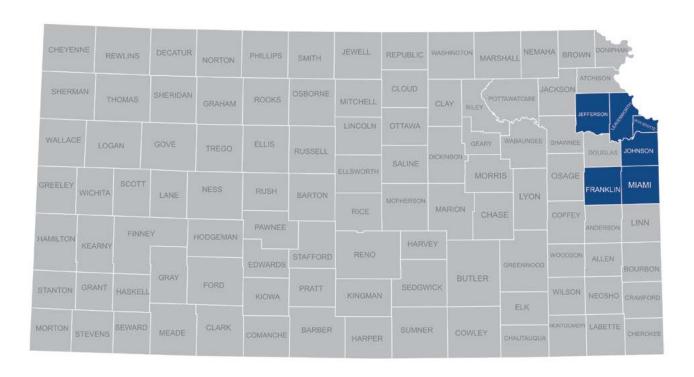
**COUNTIES** Cuyahoga, Geauga, Lake, Lorain, Medina, Summit

PLAN ID	H0672-006-000	H7849-015-000	
PLAN NAME	Cigna Preferred Medicare (HMO)	Cigna True Choice Medicare (PPO) In Network Out of Network	
Total Premium	\$0	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$25	\$0 / \$30	\$0 / \$30
Inpatient Acute Care Hospital	\$335 per day for days 1-6; \$0 per day for days 7-90	\$350 per day for days 1-5; \$0 per day for days 6-90	\$350 per day for days 1-5; \$0 per day for days 6-90
Max Out-of-Pocket	\$4,500 applies to in-network Medicare-covered benefits	\$5,500 applies to in-network Medicare-covered benefits	\$7,500 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	\$0	0 - 30%
Ambulatory Surgery Center	\$0 - \$225	\$0 - \$275	30%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	Tier 1: \$0 Tier 2: \$5 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	Tier 1: \$0 Tier 2: \$10 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A



### **KANSAS**

#### 2022 OVERVIEW



#### **Kansas**

#### The following counties offer these plans:

- H9460-001 Cigna Preferred Medicare (HMO)
- H7849-024 Cigna True Choice Medicare (PPO)
- H9460-002 Cigna Fundamental Medicare (HMO)

Franklin, Jefferson, Johnson, Leavenworth, Miami and Wyandotte



# MEDICARE ELIGIBLE POPULATION:

157,148

# MEDICARE ADVANTAGE PENETRATION:

36.10%



#### **KANSAS CITY**

KANSAS CITY

**COUNTIES** KS: Franklin, Jefferson, Johnson, Leavenworth, Miami, Wyandotte MO: Andrew, Bates, Caldwell, Carroll, Cass, Clay, Clinton, DeKalb, Henry, Holt,

Jackson, Johnson, Lafayette, Platte, Ray

PLAN ID NEW COUNTIL	H9460-001-000	H9460-002-000
PLAN NAME	Cigna Preferred Medicare (HMO)	Cigna Fundamental Medicare (HMO)
Total Premium	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$35	\$0 / \$40
Inpatient Acute Care Hospital	\$315 per day for days 1-7; \$0 per day for days 8-90	\$345 per day for days 1-5; \$0 per day for days 6-90
Max Out-of-Pocket	\$5,200 applies to in-network Medicare-covered benefits	\$4,900 applies to in-network Medicare-covered benefits
Lab	\$0	\$0
Ambulatory Surgery Center	\$0 - \$295	\$0 - \$275
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$10 Tier 3: \$42 Tier 4: 48% Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$20 (2x one month) Tier 3: \$126 (3x one month) Tier 4: 48% Tier 5: N/A	N/A



#### **KANSAS CITY**

KANSAS CITY

COUNTIES KS: Franklin, Jefferson, Johnson, Leavenworth, Miami, Wyandotte

MO: Andrew, Bates, Caldwell, Carroll, Cass, Clay, Clinton, DeKalb, Henry, Holt,

Jackson, Johnson, Lafayette, Platte, Ray

PLAN ID	H7849-024-000 NEW COUNTY		
PLAN NAME	Cigna True Choice Medicare (PPO) In Network Out of Network		
Total Premium	\$0	\$0	
Cost Share— PCP/Specialist	\$0 / \$30	\$25 / 40%	
Inpatient Acute Care Hospital	\$315 per day for days 1-5; \$0 per day for days 6-90	\$315 per day for days 1-5; \$0 per day for days 6-90	
Max Out-of-Pocket	\$4,900 applies to in-network Medicare-covered benefits	\$10,000 applies to in-network and out-of-network Medicare- covered benefits combined	
Lab	\$0	0 - 40%	
Ambulatory Surgery Center	\$0 - \$295	40%	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$10 Tier 3: \$42 Tier 4: 50% Tier 5: 33%	N/A	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$20 (2x one month) Tier 3: \$126 (3x one month) Tier 4: 50% Tier 5: N/A	N/A	



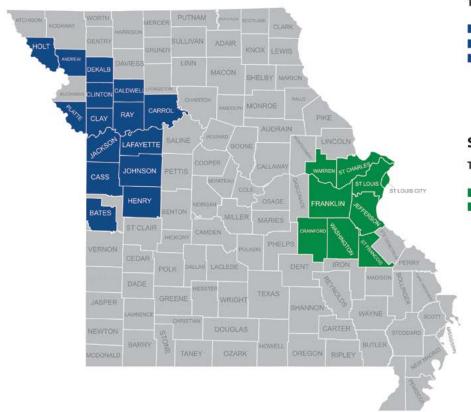






# MISSOURI

#### 2022 OVERVIEW



#### Missouri

#### The following counties offer these plans:

- H9460-001 Cigna Preferred Medicare (HMO)
- H7849-024 Cigna True Choice Medicare (PPO)
- H9460-002 Cigna Fundamental Medicare (HMO)

Andrew, Bates, Caldwell, Carroll, Cass, Clay, Clinton, DeKalb, Henry, Holt, Jackson, Johnson, Lafayette Platte and Ray

#### St. Louis

#### The following counties offer these plans:

- H7389-003 Cigna Preferred Medicare HMO
- H7849-057 Cigna True Choice Medicare PPO

Crawford, Franklin, Jefferson, St. Charles, St. Francois, St. Louis, St. Louis City, Warren and Washington



# MEDICARE ELIGIBLE POPULATION:

730,773

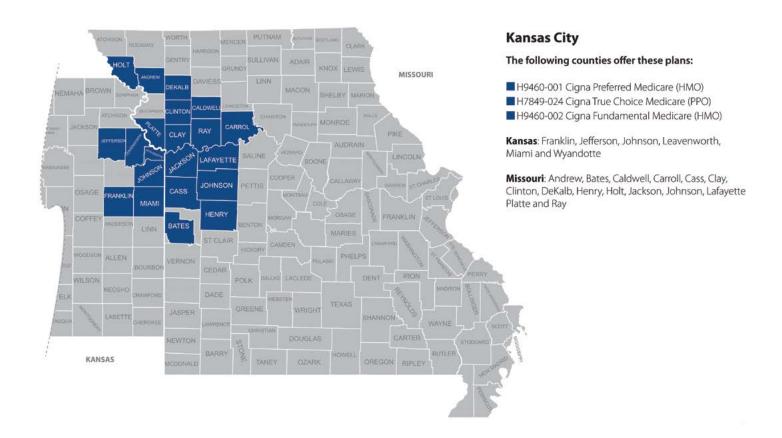
# MEDICARE ADVANTAGE PENETRATION:

50.86%



### **KANSAS CITY**

#### 2022 OVERVIEW





# MEDICARE ELIGIBLE POPULATION:

289,050

# MEDICARE ADVANTAGE PENETRATION:

50.45%



#### **KANSAS CITY**

KANSAS CITY

**COUNTIES** KS: Franklin, Jefferson, Johnson, Leavenworth, Miami, Wyandotte MO: Andrew, Bates, Caldwell, Carroll, Cass, Clay, Clinton, DeKalb, Henry, Holt,

Jackson, Johnson, Lafayette, Platte, Ray

PLAN ID NEW COUNTIL	H9460-001-000	H9460-002-000
PLAN NAME	Cigna Preferred Medicare (HMO)	Cigna Fundamental Medicare (HMO)
Total Premium	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$35	\$0 / \$40
Inpatient Acute Care Hospital	\$315 per day for days 1-7; \$0 per day for days 8-90	\$345 per day for days 1-5; \$0 per day for days 6-90
Max Out-of-Pocket	\$5,200 applies to in-network Medicare-covered benefits	\$4,900 applies to in-network Medicare-covered benefits
Lab	\$0	\$0
Ambulatory Surgery Center	\$0 - \$295	\$0 - \$275
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$10 Tier 3: \$42 Tier 4: 48% Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$20 (2x one month) Tier 3: \$126 (3x one month) Tier 4: 48% Tier 5: N/A	N/A



#### **KANSAS CITY**

KANSAS CITY

COUNTIES KS: Franklin, Jefferson, Johnson, Leavenworth, Miami, Wyandotte

MO: Andrew, Bates, Caldwell, Carroll, Cass, Clay, Clinton, DeKalb, Henry, Holt,

Jackson, Johnson, Lafayette, Platte, Ray

PLAN ID	H7849-024-000 NEW COUNTY		
PLAN NAME	Cigna True Choice Medicare (PPO) In Network Out of Network		
Total Premium	\$0	\$0	
Cost Share— PCP/Specialist	\$0 / \$30	\$25 / 40%	
Inpatient Acute Care Hospital	\$315 per day for days 1-5; \$0 per day for days 6-90	\$315 per day for days 1-5; \$0 per day for days 6-90	
Max Out-of-Pocket	\$4,900 applies to in-network Medicare-covered benefits	\$10,000 applies to in-network and out-of-network Medicare- covered benefits combined	
Lab	\$0	0 - 40%	
Ambulatory Surgery Center	\$0 - \$295	40%	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$10 Tier 3: \$42 Tier 4: 50% Tier 5: 33%	N/A	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$20 (2x one month) Tier 3: \$126 (3x one month) Tier 4: 50% Tier 5: N/A	N/A	





# ST. LOUIS

#### 2022 OVERVIEW



#### St. Louis

#### The following counties offer these plans:

- H7389-003 Cigna Preferred Medicare (HMO)
- H7849-057 Cigna True Choice Medicare (PPO)

**Missouri:** Crawford, Franklin, Jefferson, St. Charles, St. Francois, St. Louis, St. Louis City, Warren and Washington

Illinois: Madison, Monroe and St. Clair



# MEDICARE ELIGIBLE POPULATION:

441,723

# MEDICARE ADVANTAGE PENETRATION:

51.12%



# **ST. LOUIS** ST. LOUIS

**COUNTIES** IL - Madison, Monroe, St. Clair

MO - Crawford, Franklin, Jefferson, St. Charles, St. Francois,

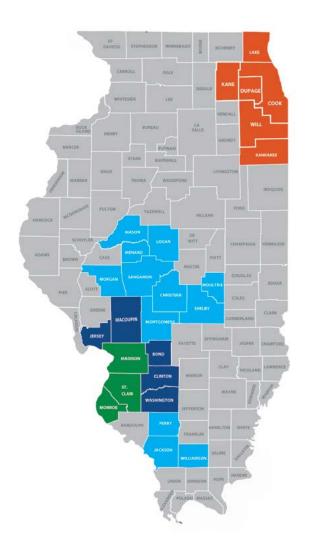
St. Louis, St. Louis City, Warren, Washington

PLAN ID NEW PLANS	H7389-003-000	H7849-057-000	
PLAN NAME	Cigna Preferred Medicare (HMO)	Cigna True Choice Medicare (PPO) In Network Out of Network	
Total Premium	\$0	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$35	\$0 / \$45	\$15 / \$55
Inpatient Acute Care Hospital	\$295 per day for days 1-7; \$0 per day for days 8-90	\$310 per day for days 1-5; \$0 per day for days 6-90	\$320 per day for days 1-5; \$0 per day for days 6-90
Max Out-of-Pocket	\$2,900 applies to in-network Medicare-covered benefits	\$4,100 applies to in-network Medicare-covered benefits	\$7,550 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	\$0	0 - 30%
Ambulatory Surgery Center	\$0 - \$225	\$0 - \$175	30%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: 50% Tier 5: 33%	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: 50% Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: 50% Tier 5: N/A	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: 50% Tier 5: N/A	N/A



# **ILLINOIS**

#### 2022 OVERVIEW



#### Illinois - Chicago

#### The following counties offer these plans:

- H1415-024 Cigna Preferred Medicare (HMO)
- H1415-021 Cigna Premier Medicare (HMO-POS)
- H1415-013 Cigna Fundamental Medicare (HMO)
- H7849-002 Cigna True Choice Medicare (PPO)

Cook, DuPage, Kane, Kankakee, Lake and Will

#### Illinois - Southern

#### The following counties offer these plans:

- H7389-005 Cigna Preferred Plus Medicare (HMO)
- H7849-059 Cigna True Choice Medicare (PPO)

Christian, Jackson, Logan, Mason, Menard, Montgomery, Morgan, Moultrie, Perry, Sangamon, Shelby and Williamson

#### The following counties offer these plans:

- H7389-004 Cigna Preferred Medicare (HMO)
- H7849-058 Cigna True Choice Medicare (PPO)

Bond, Clinton, Jersey, Macoupin and Washington

#### Illinois

#### The following counties offer these plans:

- H7389-003 Cigna Preferred Medicare (HMO)
- H7849-057 Cigna True Choice Medicare (PPO)

Madison, Monroe and St. Clair



# MEDICARE ELIGIBLE POPULATION:

1,468,111

# MEDICARE ADVANTAGE PENETRATION:

33.06%



# **ILLINOIS**ILLINOIS

PLAN ID	H1415-013-000	H1415-024-000
PLAN NAME	Cigna Fundamental Medicare (HMO)	Cigna Preferred Medicare (HMO)
Total Premium	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$40	\$0 / \$25
Inpatient Acute Care Hospital	\$290 per day for days 1-6; \$0 per day for days 7-90	\$195 per day for days 1-7; \$0 per day for days 8-90
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	\$2,950 applies to in-network Medicare-covered benefits
Lab	\$0	\$0
Ambulatory Surgery Center	\$0 - \$250	\$0 - \$125
Costshare— Preferred Retail RX (One Month)	N/A	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: 50% Tier 5: 33%
Cost Share— Preferred Retail RX (Three Months)	N/A	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: 50% Tier 5: N/A



# **ILLINOIS**ILLINOIS

PLAN ID	H1415-021-000		
PLAN NAME	Cigna Premier Medicare (HMO-POS)		
PLAN NAME	In Network	Out of Network	
Total Premium	\$0	\$0	
Cost Share— PCP/Specialist	\$0 / \$30	30% / 30%	
Inpatient Acute Care Hospital	\$275 per day for days 1-7; \$0 per day for days 8-90	30%	
Max Out-of-Pocket	\$4,500 applies to in-network Medicare-covered benefits	There is no maximum out of pocket cost for out-of-network benefits	
Lab	\$0	0 - 30%	
Ambulatory Surgery Center	\$0 - \$175	30%	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: 50% Tier 5: 33%	N/A	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: 50% Tier 5: N/A	N/A	



# **ILLINOIS**ILLINOIS

PLAN ID	H7849-002-000		
PLAN NAME	Cigna True Choice Medicare (PPO)		
PLAN NAME	In Network	Out of Network	
Total Premium	\$0	\$0	
Cost Share— PCP/Specialist	\$0 / \$30	\$15 / \$40	
Inpatient Acute Care Hospital	\$300 per day for days 1-6; \$0 per day for days 7-90	\$320 per day for days 1-6; \$0 per day for days 7-90	
Max Out-of-Pocket	\$4,400 applies to in-network Medicare-covered benefits	\$7,550 applies to in-network and out-of-network Medicare- covered benefits combined	
Lab	\$0	0 - 30%	
Ambulatory Surgery Center	\$0 - \$260	30%	
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: 45% Tier 5: 33%	N/A	
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: 45% Tier 5: N/A	N/A	



#### ST. LOUIS

### SOUTH ILLINOIS

**COUNTIES** Christian, Jackson, Logan, Mason, Menard, Montgomery, Morgan, Moultrie, Perry, Sangamon, Shelby, Williamson

PLAN ID NEW PLANS	H7389-005-000	H7849-0	059-000
PLAN NAME	Cigna Preferred Plus Medicare (HMO)	Cigna True Choic	e Medicare (PPO)
I EAR WATE	eigha i referred i las riculture (milo)	In Network	Out of Network
Total Premium	\$0	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$50	\$0 / \$40	\$15 / \$50
Inpatient Acute Care Hospital	\$300 per day for days 1-6; \$0 per day for days 7-90	\$300 per day for days 1-6; \$0 per day for days 7-90	\$320 per day for days 1-6; \$0 per day for days 7-90
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	\$4,900 applies to in-network Medicare-covered benefits	\$7,550 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	\$0	0 - 30%
Ambulatory Surgery Center	\$0 - \$180	\$0 - \$260	30%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: 48% Tier 5: 33%	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: 50% Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: 48% Tier 5: N/A	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: 50% Tier 5: N/A	N/A



# **ST. LOUIS**SOUTH ILLINOIS

**COUNTIES** Bond, Clinton, Jersey, Macoupin, Washington

PLAN ID NEW PLANS	H7389-004-000	H7849-0	058-000
PLAN NAME	Cigna Preferred Medicare (HMO)	Cigna True Choice Medicare (PPO)	
		In Network	Out of Network
Total Premium	\$0	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$40	\$0 / \$40	\$15 / \$50
Inpatient Acute Care Hospital	\$265 per day for days 1-8; \$0 per day for days 9-90	\$275 per day for days 1-6; \$0 per day for days 7-90	\$320 per day for days 1-6; \$0 per day for days 7-90
Max Out-of-Pocket	\$3,000 applies to in-network Medicare-covered benefits	\$4,400 applies to in-network Medicare-covered benefits	\$7,550 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	\$0	0 - 30%
Ambulatory Surgery Center	\$0 - \$180	\$0 - \$260	30%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: 50% Tier 5: 33%	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: 50% Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: 50% Tier 5: N/A	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: 50% Tier 5: N/A	N/A



# **ST. LOUIS** ST. LOUIS

**COUNTIES** IL - Madison, Monroe, St. Clair

MO - Crawford, Franklin, Jefferson, St. Charles, St. Francois,

St. Louis, St. Louis City, Warren, Washington

PLAN ID NEW PLANS	H7389-003-000	H7849-057-000	
PLAN NAME	Cigna Preferred Medicare (HMO)	Cigna True Choice Medicare (PPO) In Network Out of Network	
Total Premium	\$0	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$35	\$0 / \$45	\$15 / \$55
Inpatient Acute Care Hospital	\$295 per day for days 1-7; \$0 per day for days 8-90	\$310 per day for days 1-5; \$0 per day for days 6-90	\$320 per day for days 1-5; \$0 per day for days 6-90
Max Out-of-Pocket	\$2,900 applies to in-network Medicare-covered benefits	\$4,100 applies to in-network Medicare-covered benefits	\$7,550 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	\$0	0 - 30%
Ambulatory Surgery Center	\$0 - \$225	\$0 - \$175	30%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: 50% Tier 5: 33%	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: 50% Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: 50% Tier 5: N/A	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: 50% Tier 5: N/A	N/A





# CHICAGO

#### 2022 OVERVIEW



#### Chicago

#### The following counties offer these plans:

- H1415-024 Cigna Preferred Medicare (HMO)
- H1415-021 Cigna Premier Medicare (HMO-POS)
- H1415-013 Cigna Fundamental Medicare (HMO)
- H7849-002 Cigna True Choice Medicare (PPO)

Cook, DuPage, Kane, Kankakee, Lake and Will



# MEDICARE ELIGIBLE POPULATION:

1,321,789

# MEDICARE ADVANTAGE PENETRATION:

33.34%



# **ILLINOIS**ILLINOIS

PLAN ID	H1415-013-000	H1415-024-000
PLAN NAME	Cigna Fundamental Medicare (HMO)	Cigna Preferred Medicare (HMO)
Total Premium	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$40	\$0 / \$25
Inpatient Acute Care Hospital	\$290 per day for days 1-6; \$0 per day for days 7-90	\$195 per day for days 1-7; \$0 per day for days 8-90
Max Out-of-Pocket	\$6,700 applies to in-network Medicare-covered benefits	\$2,950 applies to in-network Medicare-covered benefits
Lab	\$0	\$0
Ambulatory Surgery Center	\$0 - \$250	\$0 - \$125
Costshare— Preferred Retail RX (One Month)	N/A	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: 50% Tier 5: 33%
Cost Share— Preferred Retail RX (Three Months)	N/A	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: 50% Tier 5: N/A



# **ILLINOIS**ILLINOIS

PLAN ID	H1415-021-000	
PLAN NAME	Cigna Premier Medicare (HMO-POS)	
PLAN NAME	In Network	Out of Network
Total Premium	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$30	30% / 30%
Inpatient Acute Care Hospital	\$275 per day for days 1-7; \$0 per day for days 8-90	30%
Max Out-of-Pocket	\$4,500 applies to in-network Medicare-covered benefits	There is no maximum out of pocket cost for out-of-network benefits
Lab	\$0	0 - 30%
Ambulatory Surgery Center	\$0 - \$175	30%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: 50% Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: 50% Tier 5: N/A	N/A



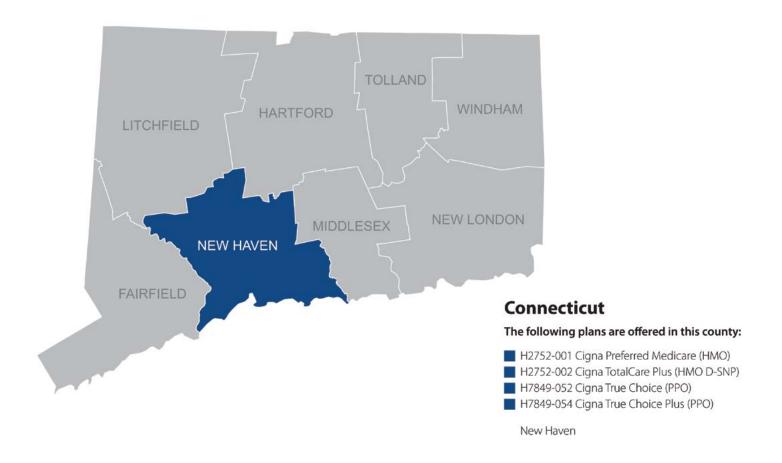
# **ILLINOIS**ILLINOIS

PLAN ID	H7849-002-000	
PLAN NAME	Cigna True Choice Medicare (PPO)	
PLAN NAME	In Network	Out of Network
Total Premium	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$30	\$15 / \$40
Inpatient Acute Care Hospital	\$300 per day for days 1-6; \$0 per day for days 7-90	\$320 per day for days 1-6; \$0 per day for days 7-90
Max Out-of-Pocket	\$4,400 applies to in-network Medicare-covered benefits	\$7,550 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	0 - 30%
Ambulatory Surgery Center	\$0 - \$260	30%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: 45% Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: 45% Tier 5: N/A	N/A



# CONNECTICUT

#### 2022 OVERVIEW





# MEDICARE ELIGIBLE POPULATION:

168,645

# MEDICARE ADVANTAGE PENETRATION:

50.08%



#### **NEW ENGLAND**

### CONNECTICUT

#### **COUNTIES** New Haven

PLANID NEW PLANS	H2752-001-000	H2752-002-000
PLAN NAME	Cigna Preferred Medicare (HMO)	Cigna TotalCare Plus (HMO D-SNP)
Total Premium	\$0	\$22.40
Cost Share— PCP/Specialist	\$0 /\$0 - \$40	0 - 20% / 0 - 20%
Inpatient Acute Care Hospital	\$475 per day for days 1-4; \$0 per day for days 5-90	\$1,400 per stay
Max Out-of-Pocket	\$6,500 applies to in-network Medicare-covered benefits	\$7,550 applies to in-network Medicare-covered benefits
Lab	\$0	\$0
Ambulatory Surgery Center	\$0 - \$350	0 - 20%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$4 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$8 (2x one month) Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A



#### **NEW ENGLAND**

### CONNECTICUT

#### **COUNTIES** New Haven

PLAN ID	H7849-052-000	
PLAN NAME	Cigna True Choice Medicare (PPO)	
- EARTHAILE	In Network	Out of Network
Total Premium	\$0	\$0
Cost Share— PCP/Specialist	\$0 / \$0 - \$30	\$15 / \$50
Inpatient Acute Care Hospital	\$385 per day for days 1-5; \$0 per day for days 6-90	30%
Max Out-of-Pocket	\$6,500 applies to in-network Medicare-covered benefits	\$10,000 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	0 - 30%
Ambulatory Surgery Center	\$0 - \$250	30%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$0 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$0 Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A



#### **NEW ENGLAND**

### CONNECTICUT

#### **COUNTIES** New Haven

PLAN ID	H7849-054-000	
PLAN NAME	Cigna True Choice Plus Medicare (PPO)	
	In Network	Out of Network
Total Premium	\$25	\$25
Cost Share— PCP/Specialist	\$0 / \$0 - \$30	\$15 / \$45
Inpatient Acute Care Hospital	\$295 per day for days 1-6; \$0 per day for days 7-90	30%
Max Out-of-Pocket	\$5,900 applies to in-network Medicare-covered benefits	\$10,000 applies to in-network and out-of-network Medicare- covered benefits combined
Lab	\$0	0 - 30%
Ambulatory Surgery Center	\$0 - \$235	30%
Costshare— Preferred Retail RX (One Month)	Tier 1: \$0 Tier 2: \$0 Tier 3: \$42 Tier 4: \$95 Tier 5: 33%	N/A
Cost Share— Preferred Retail RX (Three Months)	Tier 1: \$0 Tier 2: \$0 Tier 3: \$126 (3x one month) Tier 4: \$285 (3x one month) Tier 5: N/A	N/A

