

## CIGNA Medicare Access® (PFFS)

Medicare Advantage Private Fee-For-Service Medical Plans  
offered with or without Part D Prescription Drug Coverage

# Summary of Benefits

January 1, 2010 – December 31, 2010



CIGNA

808238 c 08/09

For AL, AR, CO, FL, GA,  
IL, IN, MA, MO, NH, OH,  
SC, TN, TX, VT, WA, WV

*it's time to feel better®*

CMS Approval Date 08/2009

H2762\_8237 f\_02

# Section 1: Introduction to the Summary of Benefits Report for CIGNA Medicare Access® (PFFS) Plans

January 1, 2010 – December 31, 2010

## **SELECT COUNTIES IN SELECT STATES**

Thank you for your interest in CIGNA Medicare Access (PFFS). Our plan is offered by CONNECTICUT GENERAL LIFE INSURANCE COMPANY/ CIGNA Medicare Access (PFFS), a Medicare Advantage Private Fee-for-Service organization. This Summary of Benefits tells you some features of our plan. It doesn't list every service that we cover or list every limitation or exclusion. To get a complete list of our benefits, please call CIGNA Medicare Access (PFFS) Customer Service and ask for the "Evidence of Coverage".

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### **YOU HAVE CHOICES IN YOUR HEALTH CARE**

As a Medicare beneficiary, you can choose from different Medicare options. One option is the Original (fee-for-service) Medicare plan. Another option is a Medicare Advantage Private Fee-for-Service plan, like CIGNA Medicare Access (PFFS). You may have other options too. You make the choice. No matter what you decide, you are still in the Medicare program.

You may join or leave a plan only at certain times. Please call CIGNA Medicare Access (PFFS) at the telephone number listed at the end of this introduction or 1-800-MEDICARE (1-800-633-4227) for more information. TTY users should call 1-877-486-2048. You can call this number 24 hours a day, 7 days a week.

### **HOW CAN I COMPARE MY OPTIONS?**

You can compare CIGNA Medicare Access Plan One (PFFS), CIGNA Medicare Access Plus Rx Plan Two (PFFS), CIGNA Medicare Access Plan Three (PFFS), CIGNA Medicare Access Plus Rx Plan Four (PFFS) and the Original Medicare Plan using this Summary of Benefits. The charts in this booklet list some important health benefits. For each benefit, you can see what our plan covers and what the Original Medicare Plan covers.

Our members receive all of the benefits that the Original Medicare Plan offers. We also offer more benefits, which may change from year to year.

## WHERE IS CIGNA MEDICARE ACCESS (PFFS) AVAILABLE?

The service area for this plan includes:

State	Counties
<b>AL</b>	Autauga, Baldwin, Barbour, Bibb, Blount, Bullock, Chambers, Cherokee, Clarke, Clay, Cleburne, Coffee, Colbert, Conecuh, Coosa, Crenshaw, Dale, Dallas, Elmore, Escambia, Etowah, Fayette, Franklin, Geneva, Greene, Hale, Henry, Houston, Jefferson, Lamar, Lauderdale, Lawrence, Lee, Limestone, Lowndes, Macon, Madison, Marshall, Mobile, Monroe, Montgomery, Morgan, Perry, Pike, Randolph, Russell, Saint Clair, Shelby, Sumter, Talladega, Wilcox
<b>AR</b>	Arkansas, Baxter, Benton, Boone, Bradley, Calhoun, Carroll, Chicot, Clark, Cleburne, Cleveland, Columbia, Conway, Craighead, Crawford, Crittenden, Cross, Dallas, Drew, Faulkner, Franklin, Fulton, Grant, Greene, Hempstead, Hot Spring, Howard, Independence, Izaard, Jefferson, Johnson, Lafayette, Lawrence, Lee, Lincoln, Logan, Lonoke, Madison, Marion, Miller, Mississippi, Monroe, Montgomery, Nevada, Newton, Ouachita, Perry, Phillips, Pike, Poinsett, Polk, Pope, Prairie, Pulaski, Randolph, Saint Francis, Saline, Scott, Searcy, Sebastian, Sevier, Sharp, Stone, Union, Van Buren, Washington, White, Woodruff, Yell
<b>CO</b>	Adams, Alamosa, Arapahoe, Archuleta, Bent, Clear Creek, Costilla, Crowley, Custer, Delta, Denver, Dolores, Douglas, El Paso, Elbert, Fremont, Gilpin, Hinsdale, Huerfano, Jackson, Jefferson, La Plata, Larimer, Las Animas, Lincoln, Logan, Mesa, Montezuma, Montrose, Morgan, Otero, Ouray, Park, Pueblo, Routt, San Juan, Sedgwick, Teller, Weld
<b>FL</b>	Bay, Calhoun, De Soto, Escambia, Flagler, Franklin, Gadsden, Gulf, Hardee, Holmes, Jackson, Jefferson, Leon, Liberty, Madison, Marion, Okaloosa, Okeechobee, Osceola, Pasco, Polk, Saint Lucie, Santa Rosa, Taylor, Volusia, Wakulla, Walton, Washington
<b>GA</b>	Baker, Baldwin, Banks, Barrow, Bartow, Ben Hill, Berrien, Bibb, Brantley, Brooks, Bryan, Burke, Butts, Calhoun, Camden, Carroll, Catoosa, Charlton, Chatham, Chattahoochee, Chattooga, Clarke, Clay, Clayton, Clinch, Colquitt, Columbia, Cook, Coweta, Crawford, Crisp, Dade, Dawson, De Kalb, Decatur, Dooly, Dougherty, Douglas, Echols, Effingham, Elbert, Emanuel, Evans, Fannin, Fayette, Forsyth, Franklin, Fulton, Gilmer, Glynn, Grady, Gwinnett, Habersham, Hancock, Haralson, Harris, Hart, Heard, Henry, Houston, Irwin, Jackson, Jasper, Jenkins, Johnson, Jones, Lamar, Lanier, Laurens, Liberty, Lincoln, Lowndes, Lumpkin, Macon, Madison, Marion, Mc Duffie, Mc Intosh, Meriwether, Mitchell, Monroe, Montgomery, Morgan, Murray, Muscogee, Newton, Oconee, Oglethorpe, Paulding, Peach, Pickens, Pike, Putnam, Randolph, Richmond, Rockdale, Schley, Screven, Spalding, Stephens, Stewart, Sumter, Talbot, Taliaferro, Tattnall, Taylor, Terrell, Thomas, Tift, Toombs, Towns, Treutlen, Troup, Turner, Twiggs, Union, Upson, Walker, Walton, Warren, Washington, Wayne, Webster, Whitfield, Wilcox, Wilkes, Wilkinson, Worth
<b>IL</b>	Adams, Alexander, Bond, Boone, Brown, Bureau, Calhoun, Carroll, Cass, Champaign, Christian, Clark, Clay, Clinton, Coles, Crawford, Cumberland, De Witt, DeKalb, Douglas, Edgar, Edwards, Effingham, Fayette, Ford, Fulton, Gallatin, Greene, Hancock, Henry, Jackson, Jasper, Jersey, Johnson, Kendall, Lee, Logan, Macon, Macoupin, Madison, Marion, Marshall, Mason, Massac, McDonough, McLean, Menard, Mercer, Monroe, Montgomery, Morgan, Moultrie, Ogle, Peoria, Piatt, Pike, Pope, Putnam, Richland, Rock Island, Saline, Sangamon, Schuyler, Scott, Shelby, St. Clair, Stark, Stephenson, Tazewell, Union, Washington, Whiteside, Winnebago, Woodford

The service area for this plan includes:

State	Counties
<b>IN</b>	Adams, Allen, Bartholomew, Blackford, Boone, Brown, Cass, Clark, Dearborn, Decatur, Dekalb, Delaware, Dubois, Elkhart, Fayette, Floyd, Franklin, Fulton, Gibson, Grant, Hamilton, Hancock, Harrison, Hendricks, Henry, Huntington, Jackson, Jay, Jefferson, Jennings, Johnson, Kosciusko, Lagrange, Lawrence, Madison, Marion, Marshall, Martin, Monroe, Montgomery, Morgan, Noble, Ohio, Orange, Owen, Porter, Posey, Putnam, Randolph, Ripley, Rush, Scott, Shelby, St. Joseph, Switzerland, Union, Vanderburgh, Wabash, Warrick, Washington, Wayne, Wells, Whitley
<b>MA</b>	Bristol, Dukes, Essex, Franklin, Hampden, Hampshire, Middlesex, Norfolk, Plymouth, Suffolk, Worcester
<b>MO</b>	Adair, Andrew, Atchison, Audrain, Barry, Barton, Bates, Benton, Bollinger, Boone, Buchanan, Butler, Caldwell, Callaway, Camden, Cape Girardeau, Carroll, Carter, Cass, Cedar, Chariton, Christian, Clark, Clay, Clinton, Cole, Cooper, Crawford, Dade, Dallas, Daviess, DeKalb, Dent, Douglas, Dunklin, Franklin, Gasconade, Gentry, Greene, Grundy, Harrison, Henry, Hickory, Holt, Howard, Howell, Iron, Jackson, Jasper, Jefferson, Johnson, Knox, Laclede, Lafayette, Lawrence, Lewis, Lincoln, Linn, Livingston, Macon, Madison, Maries, Marion, McDonald, Mercer, Miller, Mississippi, Moniteau, Monroe, Montgomery, Morgan, New Madrid, Newton, Nodaway, Oregon, Osage, Ozark, Pemiscot, Perry, Pettis, Phelps, Pike, Platte, Polk, Pulaski, Putnam, Ralls, Randolph, Ray, Reynolds, Ripley, Sainte Genevieve, Saline, Schuyler, Scotland, Scott, Shannon, Shelby, St. Charles, St. Clair, St. Francois, St. Louis, St. Louis City, Stoddard, Stone, Sullivan, Taney, Texas, Vernon, Warren, Washington, Wayne, Webster, Worth, Wright
<b>NH</b>	Belknap, Carroll, Cheshire, Hillsboro, Merrimack, Rockingham, Strafford, Sullivan
<b>OH</b>	Adams, Ashland, Ashtabula, Auglaize, Belmont, Brown, Butler, Carroll, Champaign, Clark, Clermont, Clinton, Columbiana, Coshocton, Cuyahoga, Darke, Delaware, Erie, Fairfield, Fayette, Franklin, Fulton, Geauga, Greene, Guernsey, Hamilton, Hancock, Henry, Holmes, Huron, Jefferson, Knox, Lake, Lawrence, Licking, Lorain, Lucas, Madison, Mahoning, Marion, Medina, Mercer, Miami, Monroe, Montgomery, Morgan, Muskingum, Noble, Ottawa, Perry, Pickaway, Portage, Preble, Sandusky, Seneca, Stark, Summit, Trumbull, Tuscarawas, Union, Van Wert, Warren, Washington, Wayne, Williams, Wood, Wyandot
<b>SC</b>	Abbeville, Aiken, Allendale, Anderson, Bamberg, Barnwell, Beaufort, Berkeley, Calhoun, Charleston, Cherokee, Chester, Chesterfield, Clarendon, Colleton, Darlington, Dillon, Dorchester, Edgefield, Fairfield, Florence, Georgetown, Greenville, Greenwood, Hampton, Horry, Jasper, Kershaw, Lancaster, Laurens, Lee, Lexington, Marion, Marlboro, McCormick, Newberry, Oconee, Orangeburg, Pickens, Richland, Saluda, Spartanburg, Sumter, Union, Williamsburg, York

The service area for this plan includes:

State	Counties
<b>TN</b>	Anderson, Bedford, Benton, Bledsoe, Blount, Bradley, Campbell, Cannon, Carroll, Carter, Chester, Claiborne, Clay, Cocke, Crockett, Cumberland, Davidson, Decatur, DeKalb, Dickson, Dyer, Fayette, Fentress, Franklin, Gibson, Giles, Grainger, Greene, Grundy, Hamblen, Hamilton, Hardeman, Hardin, Hawkins, Haywood, Henderson, Henry, Hickman, Houston, Humphreys, Jackson, Jefferson, Johnson, Knox, Lauderdale, Lewis, Lincoln, Loudon, Macon, Madison, Marion, Marshall, Maury, McMinn, McNairy, Meigs, Monroe, Montgomery, Moore, Morgan, Overton, Perry, Pickett, Polk, Putnam, Rhea, Roane, Rutherford, Scott, Sequatchie, Sevier, Shelby, Stewart, Sullivan, Tipton, Trousdale, Unicoi, Union, Van Buren, Warren, Washington, Wayne, White, Williamson, Wilson
<b>TX</b>	Anderson, Angelina, Aransas, Atascosa, Austin, Bastrop, Bee, Bell, Bexar, Bowie, Brazoria, Brewster, Brooks, Camp, Cass, Chambers, Cherokee, Collin, Comanche, Cooke, Coryell, Crane, Dallas, De Witt, Delta, Denton, Dimmit, Duval, El Paso, Ellis, Erath, Fannin, Fort Bend, Franklin, Frio, Galveston, Goliad, Grayson, Gregg, Grimes, Guadalupe, Hardin, Harris, Harrison, Hill, Hood, Hopkins, Houston, Hudspeth, Hunt, Jackson, Jasper, Jefferson, Jim Wells, Johnson, Karnes, Kaufman, Kenedy, Kleberg, La Salle, Lamar, Leon, Liberty, Limestone, Live Oak, Loving, Marion, Maverick, McMullen, Montague, Montgomery, Morris, Navarro, Newton, Nueces, Orange, Panola, Parker, Polk, Presidio, Rains, Red River, Reeves, Rockwall, Rusk, San Jacinto, San Patricio, Shelby, Smith, Tarrant, Titus, Tyler, Upshur, Val Verde, Van Zandt, Victoria, Waller, Washington, Webb, Wharton, Wilson, Winkler, Wise, Wood, Zavala
<b>VT</b>	Addison, Bennington, Caledonia, Chittenden, Essex, Franklin, Grand Isle, Lamoille, Orange, Orleans, Rutland, Washington, Windham, Windsor
<b>WA</b>	Asotin, Benton, Chelan, Clallam, Clark, Columbia, Cowlitz, Douglas, Franklin, Grant, Grays Harbor, Island, Jefferson, King, Kitsap, Kittitas, Klickitat, Lewis, Mason, Okanogan, Pend Oreille, Pierce, San Juan, Skagit, Skamania, Snohomish, Spokane, Stevens, Thurston, Wahkiakum, Walla Walla, Whatcom, Yakima
<b>WV</b>	Barbour, Berkeley, Boone, Braxton, Brooke, Cabell, Calhoun, Clay, Doddridge, Fayette, Gilmer, Grant, Greenbrier, Hampshire, Hancock, Hardy, Harrison, Jackson, Jefferson, Kanawha, Lewis, Lincoln, Logan, Marion, Marshall, Mason, McDowell, Mercer, Mingo, Monongalia, Monroe, Morgan, Nicholas, Ohio, Pendleton, Pleasants, Pocahontas, Preston, Putnam, Raleigh, Randolph, Ritchie, Roane, Summers, Taylor, Tucker, Tyler, Upshur, Wayne, Webster, Wetzel, Wirt, Wood, Wyoming

You must live in one of these areas to join the plan.

## **WHO IS ELIGIBLE TO JOIN CIGNA MEDICARE ACCESS (PFFS)?**

You can join CIGNA Medicare Access (PFFS) if you are entitled to Medicare Part A and enrolled in Medicare Part B and live in the service area. However, individuals with End Stage Renal Disease are generally not eligible to enroll in CIGNA Medicare Access (PFFS) unless they are members of our organization and have been since their dialysis began.

## **CAN I CHOOSE MY DOCTORS?**

A Medicare Advantage Private Fee-for-Service plan works differently than a Medicare supplement plan. Your doctor or hospital is not required to agree to accept the plan's terms and conditions, and thus may choose not to treat you, with the exception of emergencies. If your doctor or hospital does not agree to accept our payment terms and conditions, they may choose not to provide healthcare services to you, except in emergencies.

## **DOES MY PLAN COVER MEDICARE PART B OR PART D DRUGS?**

CIGNA Medicare Access Plan One (PFFS) and CIGNA Medicare Access Plan Three (PFFS) do cover Medicare Part B prescription drugs. CIGNA Medicare Access Plan One (PFFS) and CIGNA Medicare Access Plan Three (PFFS) do NOT cover Medicare Part D prescription drugs.

CIGNA Medicare Access Plus Rx Plan Two (PFFS) and CIGNA Medicare Access Plus Rx Plan Four (PFFS) do cover both Medicare Part B prescription drugs and Medicare Part D prescription drugs.

## **IMPORTANT INFORMATION FOR CIGNA MEDICARE ACCESS PLUS RX PLAN TWO (PFFS) AND CIGNA MEDICARE ACCESS PLUS RX PLAN FOUR (PFFS) MEMBERS (PLANS WITH PRESCRIPTION DRUG COVERAGE)**

### **WHERE CAN I GET MY PRESCRIPTIONS IF I JOIN THIS PLAN?**

CIGNA Medicare Access Plus Rx Plan Two (PFFS) and CIGNA Medicare Access Plus Rx Plan Four (PFFS) have formed a network of pharmacies. You must use a network pharmacy to receive plan benefits. We may not pay for your prescriptions if you use an out-of-network pharmacy, except in certain cases. The pharmacies in our network can change at any time. You can ask for a pharmacy directory or visit us at <http://www.cigna.com/sites/cignamedicare/formulary/medicarerx.html>. Our customer service number is listed at the end of this introduction.

CIGNA Medicare Access Plus Rx Plan Two (PFFS) and CIGNA Medicare Access Plus Rx Plan Four (PFFS) have a list of preferred pharmacies. At these pharmacies, you may get your drugs at a lower copay or coinsurance. You may go to a non-preferred pharmacy, but you may have to pay more for your prescription drugs.

### **WHAT IS A PRESCRIPTION DRUG FORMULARY?**

CIGNA Medicare Access Plus Rx Plan Two (PFFS) and CIGNA Medicare Access Plus Rx Plan Four (PFFS) use a formulary. A formulary is a list of drugs covered by your plan to meet patient needs. We may periodically add, remove, or

make changes to coverage limitations on certain drugs or change how much you pay for a drug. If we make any formulary change that limits our members' ability to fill their prescriptions, we will notify the affected enrollees before the change is made. We will send a formulary to you and you can see our complete formulary on our Web site at <http://www.cigna.com/sites/cignamedicare/formulary/medicarerx.html>.

If you are currently taking a drug that is not on our formulary or subject to additional requirements or limits, you may be able to get a temporary supply of the drug. You can contact us to request an exception or switch to an alternative drug listed on our formulary with your physician's help. Call us to see if you can get a temporary supply of the drug or for more details about our drug transition policy.

### **HOW CAN I GET EXTRA HELP WITH PRESCRIPTION DRUG PLAN COSTS?**

You may be able to get extra help to pay for your prescription drug premiums and costs. To see if you qualify for getting extra help, call:

- 1-800-MEDICARE (1-800-633-4227). TTY/TDD users should call 1-877-486-2048, 24 hours a day, 7 days a week;
- The Social Security Administration at 1-800-772-1213 between 7 am and 7 pm, Monday through Friday. TTY/TDD users should call 1-800-325-0778; or
- Your State Medicaid Office.

### **WHAT ARE MY PROTECTIONS IN THIS PLAN?**

All Medicare Advantage Plans agree to stay in the program for a full year at a time. Each year, the plans decide whether to continue for another year. Even if a Medicare Advantage Plan leaves the program, you will not lose Medicare coverage. If a plan decides not to continue, it must send you a letter at least 60 days before your coverage will end. The letter will explain your options for Medicare coverage in your area.

As a member of CIGNA Medicare Access Plus Rx Plan Two (PFFS) and CIGNA Medicare Access Plus Rx Plan Four (PFFS) you have the right to request an organization determination, which includes the right to file an appeal if we deny coverage for an item or service, and the right to file a grievance. You have the right to request an organization determination if you want us to provide or pay for an item or service that you believe should be covered. If we deny coverage for your requested item or service, you have the right to appeal and ask us to review our decision. You may ask us for an expedited (fast) coverage determination or appeal if you believe that waiting for a decision could seriously put your life or health at risk, or affect your ability to regain maximum function. If your doctor makes or supports the expedited request, we must expedite our decision. Finally, you have the right to file a grievance with us if you have any type of problem with us or a provider that does not involve coverage for an item or service. If your problem involves quality of care, you also have the right to file a grievance with the Quality Improvement Organization (QIO) for your state.

**Alabama**

Alabama Quality Assurance Foundation

**CALL** (205) 970-1600 / (800) 366-1486

**Arkansas**

Arkansas Foundation for Medical Care

**CALL** (501) 375-5700 / (877) 375-5700

**Colorado**

Colorado Foundation for Medical Care

**CALL** (303) 695-3300 / (800) 727-7086

**Florida**

Florida Medical Quality Assurance

**CALL** (813) 354-9111 / (800) 844-0795

**Georgia**

Georgia Medical Care Foundation

**CALL** (404) 982-7575 / (800) 982-0411

**Illinois**

Illinois Foundation for Quality Health Care

**CALL** (630) 571-5540 / (800) 647-8089

**Indiana**

Health Care Excel, Inc.

**CALL** (812) 234-1499 / (800) 288-1499

**Massachusetts**

MassPRO

**CALL** (781) 890-0011 / (800) 252-5533

**Missouri**

Primaris

**CALL** (573) 817-8300 / (800) 735-6776

**New Hampshire**

Northeast Health Care Quality Foundation

**CALL** (603) 749-1641 / (800) 772-0151

**Ohio**

Ohio KePRO

**CALL** (216) 447-9604 / (800) 589-7337

**South Carolina**

The Carolinas Center for Medical Excellence

**CALL** (803) 251-2215 / (800) 922-3089

**TTY/TDD** (800) 735-8583

This number requires special telephone equipment and is only for people who have difficulties with hearing or speaking.

**Tennessee**

QSource

**CALL** (800) 528-2655

**Texas**

TMF Health Quality Institute

**CALL** (512) 329-6610 / (800) 725-8315

**Vermont**

Northeast Health Care Quality Foundation

**CALL** (603) 749-1641 / (800) 772-0151

**Washington**

Qualis Health

**CALL** (206) 364-9700 / (800) 949-7536

**West Virginia**

West Virginia Medical Institute

**CALL** (304) 346-9864 / (800) 642-8686

As a member of CIGNA Medicare Access Plus Rx Plan Two (PFFS) and CIGNA Medicare Access Plus Rx Plan Four (PFFS), you have the right to request a coverage determination, which includes the right to request an exception, the right to file an appeal if we deny coverage for a prescription drug, and the right to file a grievance. You have the right to request a coverage determination if you want us to cover a Part D drug that you believe should be covered. An exception is a type of coverage determination. You may ask us for an exception if you believe you need a drug that is not on our

list of covered drugs or believe you should get a non-preferred drug at a lower out-of-pocket cost. You can also ask for an exception to cost utilization rules, such as a limit on the quantity of a drug. If you think you need an exception, you should contact us before you try to fill your prescription at a pharmacy. Your doctor must provide a statement to support your exception request. If we deny coverage for your prescription drug(s), you have the right to appeal and ask us to review our decision. Finally, you have the right to file a grievance if you have any type of problem with us or one of our network pharmacies that does not involve coverage for a prescription drug. If your problem involves quality of care, you also have the right to file a grievance with the Quality Improvement Organization (QIO) for your state.

### **Alabama**

Alabama Quality Assurance Foundation  
**CALL** (205) 970-1600 / (800) 366-1486

### **Arkansas**

Arkansas Foundation for Medical Care  
**CALL** (501) 375-5700 / (877) 375-5700

### **Colorado**

Colorado Foundation for Medical Care  
**CALL** (303) 695-3300 / (800) 727-7086

### **Florida**

Florida Medical Quality Assurance  
**CALL** (813) 354-9111 / (800) 844-0795

### **Georgia**

Georgia Medical Care Foundation  
**CALL** (404) 982-7575 / (800) 982-0411

### **Illinois**

Illinois Foundation for Quality Health Care  
**CALL** (630) 571-5540 / (800) 647-8089

### **Indiana**

Health Care Excel, Inc.  
**CALL** (812) 234-1499 / (800) 288-1499

### **Massachusetts**

MassPRO  
**CALL** (781) 890-0011 / (800) 252-5533

### **Missouri**

Primaris  
**CALL** (573) 817-8300 / (800) 735-6776

### **New Hampshire**

Northeast Health Care Quality Foundation  
**CALL** (603) 749-1641 / (800) 772-0151

### **Ohio**

Ohio KePRO  
**CALL** (216) 447-9604 / (800) 589-7337

### **South Carolina**

The Carolinas Center for Medical Excellence  
**CALL** (803) 251-2215 / (800) 922-3089  
**TTY/TDD** (800) 735-8583  
This number requires special telephone equipment and is only for people who have difficulties with hearing or speaking.

### **Tennessee**

QSource  
**CALL** (800) 528-2655

### **Texas**

TMF Health Quality Institute  
**CALL** (512) 329-6610 / (800) 725-8315

### **Vermont**

Northeast Health Care Quality Foundation  
**CALL** (603) 749-1641 / (800) 772-0151

### **Washington**

Qualis Health  
**CALL** (206) 364-9700 / (800) 949-7536

### **West Virginia**

West Virginia Medical Institute  
**CALL** (304) 346-9864 / (800) 642-8686

## WHAT IS A MEDICATION THERAPY MANAGEMENT (MTM) PROGRAM?

A Medication Therapy Management (MTM) Program is a free service we may offer with CIGNA Medicare Access Plus Rx Plan Two (PFFS) and CIGNA Medicare Access Plus Rx Four(PFFS). You may be invited to participate in a program designed for your specific health and pharmacy needs. You may decide not to participate but it is recommended that you take full advantage of this covered service if you are selected. Contact CIGNA Medicare Access (PFFS) for more details.

## WHAT TYPES OF DRUGS MAY BE COVERED UNDER MEDICARE PART B?

Some outpatient prescription drugs may be covered under Medicare Part B. These may include, but are not limited to, the following types of drugs. Contact CIGNA Medicare Access (PFFS) for more details.

- **Some Antigens:** If they are prepared by a doctor and administered by a properly instructed person (who could be the patient) under doctor supervision.
- **Osteoporosis Drugs:** Injectable drugs for osteoporosis for certain women with Medicare.
- **Erythropoietin (Epoetin Alpha or Epogen®):** By injection if you have end-stage renal disease (permanent kidney failure requiring either dialysis or transplantation) and need this drug to treat anemia.

- **Hemophilia Clotting Factors:** Self-administered clotting factors if you have hemophilia.
- **Injectable Drugs:** Most injectable drugs administered incident to a physician's service.
- **Immunosuppressive Drugs:** Immunosuppressive drug therapy for transplant patients if the transplant was paid for by Medicare, or paid by a private insurance that paid as a primary payer to your Medicare Part A coverage, in a Medicare-certified facility.
- **Some Oral Cancer Drugs:** If the same drug is available in injectable form.
- **Oral Anti-Nausea Drugs:** If you are part of an anti-cancer chemotherapeutic regimen. Inhalation and infusion drugs provided through DME.

## PLAN RATINGS

The Medicare program rates how well plans perform in different categories (for example detecting and preventing illness, rating from patients and customer service). If you have access to the web, you may use the web to tools on [www.medicare.gov](http://www.medicare.gov), and select "Compare Medicare Prescription Drug Plans" or "Compare Health Plans and Medicap Policies in Your Area" to compare the plan ratings for Medicare plans in your area. You can also call us directly at 1-800-577-9410 to obtain a copy of the plan ratings for this plan. TTY users can call 1-800-576-1314.

**Please call CIGNA Medicare Access (PFFS) for more information about these plans.**

Visit us at [www.cignamedicare.com](http://www.cignamedicare.com) or, call us:

**Customer Service Hours:**

Sunday, Monday, Tuesday, Wednesday, Thursday, Friday, Saturday,  
8:00 am - 8:00 pm Eastern

Current members should call toll-free 800-577-9410 for questions related to the Medicare Advantage and the Medicare Part D Prescription Drug Programs. (TTY/TDD 1-800-576-1314)

Prospective members should call toll-free 800-577-9409 for questions related to the Medicare Advantage and the Medicare Part D Prescription Drug Programs. (TTY/TDD 1-800-576-1314)

For more information about Medicare, please call Medicare at 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048. You can call 24 hours a day, 7 days a week. Or, visit [www.medicare.gov](http://www.medicare.gov) on the web.

If you have special needs, this document may be available in other formats.

## Section 2: 2010 Summary of Benefits CIGNA Medicare Access (PFFS) Plan Comparison

Benefit Category	Original Medicare	CIGNA Medicare Access Plan One (PFFS)
<b>IMPORTANT INFORMATION</b>		
<p><b>1. Premium and Other Important Information</b></p>	<p>In 2009 the monthly Part B Premium was \$96.40 and will change for 2010 and the yearly Part B deductible amount was \$135 and will change for 2010.</p> <p>If a doctor or supplier does not accept assignment, their costs are often higher, which means you pay more.</p> <p>Most people will pay the standard monthly Part B premium. However, starting January 1, 2010, some people will pay a higher premium because of their yearly income. (For 2009, this amount was \$85,000 for singles and \$170,000 for married couples. This amount may change for 2010.) For more information about Part B premiums based on income, call Social Security at 1-800-772-1213. TTY users should call 1-800-325-0778.</p>	<p><b>General</b></p> <p>\$0 - \$80 monthly plan premium in addition to your monthly Medicare Part B premium.</p> <p>Please refer to the premium table located after this section to determine the premium you pay.</p> <p>Balance billing means that a provider may charge and bill you more than the plan's payment amount for services. There is a limit on what providers may charge for Medicare-covered services.</p> <p>Providers may balance bill 0% to 15% of the plan payment amount for the following services:</p> <ul style="list-style-type: none"> <li>- Doctor Office Visits</li> <li>- Chiropractic Services</li> <li>- Podiatry Services</li> <li>- Outpatient Mental Health Care</li> <li>- Outpatient Substance Abuse Care</li> <li>- Outpatient Services/Surgery</li> <li>- Emergency Care</li> <li>- Urgently Needed Care</li> <li>- Outpatient Rehabilitation Services</li> <li>- Durable Medical Equipment</li> <li>- Prosthetic Devices</li> <li>- Diabetes Self-Monitoring Training, Nutrition Therapy, and Supplies</li> </ul>

## CIGNA Medicare Access Plus Rx Plan Two (PFFS)

## CIGNA Medicare Access Plan Three (PFFS)

## CIGNA Medicare Access Plus Rx Plan Four (PFFS)

### General

\$20 - \$95 monthly plan premium in addition to your monthly Medicare Part B premium.

Please refer to the premium table located after this section to determine the premium you pay.

Balance billing means that a provider may charge and bill you more than the plan's payment amount for services. There is a limit on what providers may charge for Medicare-covered services.

Providers may balance bill 0% to 15% of the plan payment amount for the following services:

- Doctor Office Visits
- Chiropractic Services
- Podiatry Services
- Outpatient Mental Health Care
- Outpatient Substance Abuse Care
- Outpatient Services/Surgery
- Emergency Care
- Urgently Needed Care
- Outpatient Rehabilitation Services
- Durable Medical Equipment
- Prosthetic Devices
- Diabetes Self-Monitoring Training, Nutrition Therapy, and Supplies

### General

\$60 - \$135 monthly plan premium in addition to your monthly Medicare Part B premium.

Please refer to the premium table located after this section to determine the premium you pay.

Balance billing means that a provider may charge and bill you more than the plan's payment amount for services. There is a limit on what providers may charge for Medicare-covered services.

Providers may balance bill 0% to 15% of the plan payment amount for the following services:

- Doctor Office Visits
- Chiropractic Services
- Podiatry Services
- Outpatient Mental Health Care
- Outpatient Substance Abuse Care
- Outpatient Services/Surgery
- Emergency Care
- Urgently Needed Care
- Outpatient Rehabilitation Services
- Durable Medical Equipment
- Prosthetic Devices
- Diabetes Self-Monitoring Training, Nutrition Therapy, and Supplies

### General

\$90 - \$145 monthly plan premium in addition to your monthly Medicare Part B premium.

Please refer to the premium table located after this section to determine the premium you pay.

Balance billing means that a provider may charge and bill you more than the plan's payment amount for services. There is a limit on what providers may charge for Medicare-covered services.

Providers may balance bill 0% to 15% of the plan payment amount for the following services:

- Doctor Office Visits
- Chiropractic Services
- Podiatry Services
- Outpatient Mental Health Care
- Outpatient Substance Abuse Care
- Outpatient Services/Surgery
- Emergency Care
- Urgently Needed Care
- Outpatient Rehabilitation Services
- Durable Medical Equipment
- Prosthetic Devices
- Diabetes Self-Monitoring Training, Nutrition Therapy, and Supplies

## Section 2: 2010 Summary of Benefits CIGNA Medicare Access (PFFS) Plan Comparison

Benefit Category	Original Medicare	CIGNA Medicare Access Plan One (PFFS)
<b>IMPORTANT INFORMATION</b>		
<p><b>Premium and Other Important Information</b> <i>(continued)</i></p>		<ul style="list-style-type: none"> <li>– Bone Mass Measurement</li> <li>– Colorectal Screening Exam</li> <li>– Immunizations</li> <li>– Mammograms (Annual Screenings)</li> <li>– Pap Smears and Pelvic Exams</li> <li>– Prostate Cancer Screening Exams</li> <li>– End-Stage Renal Disease</li> <li>– Hearing Services</li> <li>– Vision Services</li> <li>– Physical Exams</li> <li>– Partial Hospitalization</li> <li>– Other Health Care Professional</li> <li>– Diagnostic Procedures/Test/Lab Benefits</li> <li>– Diagnostic/Therapeutic Radiological Services</li> <li>– Cardiac Rehabilitation Services</li> <li>– Blood</li> <li>– Nutrition Therapy for Diabetes and Renal Disease</li> </ul> <p>\$3,600 out-of-pocket limit.</p> <p>There is no limit on cost sharing for the following services:</p> <ul style="list-style-type: none"> <li>– Supplemental Services:             <ul style="list-style-type: none"> <li>– Dental Services</li> </ul> </li> </ul>

CIGNA Medicare Access  
Plus Rx Plan Two (PFFS)

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Plus Rx Plan Four (PFFS)

- Bone Mass Measurement
- Colorectal Screening Exam
- Immunizations
- Mammograms (Annual Screenings)
- Pap Smears and Pelvic Exams
- Prostate Cancer Screening Exams
- End-Stage Renal Disease
- Hearing Services
- Vision Services
- Physical Exams
- Partial Hospitalization
- Other Health Care Professional
- Diagnostic Procedures/Test/Lab Benefits
- Diagnostic/Therapeutic Radiological Services
- Cardiac Rehabilitation Services
- Blood
- Nutrition Therapy for Diabetes and Renal Disease

\$3,800 out-of-pocket limit.

There is no limit on cost sharing for the following services:

- Supplemental Services:
  - Dental Services

- Bone Mass Measurement
- Colorectal Screening Exam
- Immunizations
- Mammograms (Annual Screenings)
- Pap Smears and Pelvic Exams
- Prostate Cancer Screening Exams
- End-Stage Renal Disease
- Hearing Services
- Vision Services
- Physical Exams
- Partial Hospitalization
- Other Health Care Professional
- Diagnostic Procedures/Test/Lab Benefits
- Diagnostic/Therapeutic Radiological Services
- Cardiac Rehabilitation Services
- Blood
- Nutrition Therapy for Diabetes and Renal Disease

\$3,400 out-of-pocket limit.

There is no limit on cost sharing for the following services:

- Supplemental Services:
  - Dental Services

- Bone Mass Measurement
- Colorectal Screening Exam
- Immunizations
- Mammograms (Annual Screenings)
- Pap Smears and Pelvic Exams
- Prostate Cancer Screening Exams
- End-Stage Renal Disease
- Hearing Services
- Vision Services
- Physical Exams
- Partial Hospitalization
- Other Health Care Professional
- Diagnostic Procedures/Test/Lab Benefits
- Diagnostic/Therapeutic Radiological Services
- Cardiac Rehabilitation Services
- Blood
- Nutrition Therapy for Diabetes and Renal Disease

\$3,000 out-of-pocket limit.

There is no limit on cost sharing for the following services:

- Supplemental Services:
  - Dental Services

## Section 2: 2010 Summary of Benefits CIGNA Medicare Access (PFFS) Plan Comparison

Benefit Category	Original Medicare	CIGNA Medicare Access Plan One (PFFS)
<b>IMPORTANT INFORMATION</b>		
<b>2. Doctor and Hospital Choice</b> (For more information, see <b>Emergency – #15 and Urgently            Needed Care – #16.)</b>	You may go to any doctor, specialist or hospital that accepts Medicare.	You may go to any doctor, specialist, or hospital that accepts the plan's Terms and Conditions of payment.
<b>INPATIENT CARE</b>		
<b>3. Inpatient Hospital Care</b> (includes Substance Abuse and Rehabilitation Services)	<p>In 2009 the amounts for each benefit period were:</p> <p>Days 1 - 60: \$1,068 deductible</p> <p>Days 61 - 90: \$267 per day</p> <p>Days 91 - 150: \$534 per lifetime reserve day</p> <p>These amounts will change for 2010.</p> <p>Call 1-800-MEDICARE (1-800-633-4227) for information about lifetime reserve days.</p> <p>Lifetime reserve days can only be used once.</p> <p>A "benefit period" starts the day you go into a hospital or skilled nursing facility. It ends when you go for 60 days in a row without hospital or skilled nursing care. If you go into the hospital after one benefit period has ended, a new benefit period begins. You must pay the inpatient hospital deductible for each benefit period. There is no limit to the number of benefit periods you can have.</p>	<p><b>General</b></p> <p>You may go to any doctor, specialist, or hospital that accepts the plan's Terms and Conditions of payment except in emergencies.</p> <p>For Medicare-covered hospital stays:</p> <p>Days 1 - 6: \$230 copay per day</p> <p>Days 7 - 90: \$0 copay per day</p> <p>\$0 copay for additional hospital days</p> <p>No limit to the number of days covered by the plan each benefit period.</p>

CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
<p>You may go to any doctor, specialist, or hospital that accepts the plan's Terms and Conditions of payment.</p>	<p>You may go to any doctor, specialist, or hospital that accepts the plan's Terms and Conditions of payment.</p>	<p>You may go to any doctor, specialist, or hospital that accepts the plan's Terms and Conditions of payment.</p>
<p><b>General</b></p> <p>You may go to any doctor, specialist, or hospital that accepts the plan's Terms and Conditions of payment except in emergencies.</p> <p>For Medicare-covered hospital stays:</p> <p>Days 1 - 6: \$230 copay per day</p> <p>Days 7 - 90: \$0 copay per day</p> <p>For additional hospital days:</p> <p>Days 91 - 150: 0% of the cost per day</p> <p>Days 151 and beyond: 25% of the cost per day</p> <p>No limit to the number of days covered by the plan each benefit period.</p>	<p><b>General</b></p> <p>You may go to any doctor, specialist, or hospital that accepts the plan's Terms and Conditions of payment except in emergencies.</p> <p>For Medicare-covered hospital stays:</p> <p>Days 1 - 6: \$100 copay per day</p> <p>Days 7 - 90: \$0 copay per day</p> <p>\$0 copay for additional hospital days</p> <p>No limit to the number of days covered by the plan each benefit period.</p>	<p><b>General</b></p> <p>You may go to any doctor, specialist, or hospital that accepts the plan's Terms and Conditions of payment except in emergencies.</p> <p>For Medicare-covered hospital stays:</p> <p>Days 1 - 6: \$50 copay per day</p> <p>Days 7 - 90: \$0 copay per day</p> <p>For additional hospital days:</p> <p>Days 91 - 150: 0% of the cost per day</p> <p>Days 151 and beyond: 25% of the cost per day</p> <p>No limit to the number of days covered by the plan each benefit period.</p>

## Section 2: 2010 Summary of Benefits CIGNA Medicare Access (PFFS) Plan Comparison

Benefit Category	Original Medicare	CIGNA Medicare Access Plan One (PFFS)
<b>INPATIENT CARE</b>		
<b>4. Inpatient Mental Health Care</b>	<p>Same deductible and copay as inpatient hospital care (see "Inpatient Hospital Care" above).</p> <p>190 day limit in a Psychiatric Hospital.</p>	<p>For Medicare-covered hospital stays:</p> <p>Days 1 - 6: \$230 copay per day</p> <p>Days 7 - 90: \$0 copay per day</p> <p>You get up to 190 days in a Psychiatric Hospital in a lifetime.</p>
<b>5. Skilled Nursing Facility</b>	<p>In 2009 the amounts for each benefit period after at least a 3-day covered hospital stay were:</p> <p>Days 1 - 20: \$0 per day</p> <p>Days 21 - 100: \$133.50 per day</p> <p>These amounts will change for 2010.</p> <p>100 days for each benefit period.</p> <p>A "benefit period" starts the day you go into a hospital or SNF. It ends when you go for 60 days in a row without hospital or skilled nursing care.</p> <p>If you go into the hospital after one benefit period has ended, a new benefit period begins. You must pay the inpatient hospital deductible for each benefit period. There is no limit to the number of benefit periods you can have.</p>	<p>For SNF stays:</p> <p>Days 1 - 20: \$0 copay per day</p> <p>Days 21 - 100: \$125 copay per day</p> <p>Plan covers up to 100 days each benefit period</p> <p>No prior hospital stay is required.</p>
<b>6. Home Health Care</b>  (includes medically necessary intermittent skilled nursing care, home health aide services, and rehabilitation services, etc.)	\$0 copay	\$0 copay for Medicare-covered home health visits.

CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
<p>For Medicare-covered hospital stays:</p> <p>Days 1 - 6: \$230 copay per day</p> <p>Days 7 - 90: \$0 copay per day</p> <p>You get up to 190 days in a Psychiatric Hospital in a lifetime.</p>	<p>For Medicare-covered hospital stays:</p> <p>Days 1 - 6: \$100 copay per day</p> <p>Days 7 - 90: \$0 copay per day</p> <p>You get up to 190 days in a Psychiatric Hospital in a lifetime.</p>	<p>For Medicare-covered hospital stays:</p> <p>Days 1 - 6: \$50 copay per day</p> <p>Days 7 - 90: \$0 copay per day</p> <p>You get up to 190 days in a Psychiatric Hospital in a lifetime.</p>
<p>For SNF stays:</p> <p>Days 1 - 20: \$0 copay per day</p> <p>Days 21 - 100: \$125 copay per day</p> <p>Plan covers up to 100 days each benefit period</p> <p>No prior hospital stay is required.</p>	<p>For SNF stays:</p> <p>Days 1 - 20: \$0 copay per day</p> <p>Days 21 - 100: \$100 copay per day</p> <p>Plan covers up to 100 days each benefit period</p> <p>No prior hospital stay is required.</p>	<p>For SNF stays:</p> <p>Days 1 - 20: \$0 copay per day</p> <p>Days 21 - 100: \$50 copay per day</p> <p>Plan covers up to 100 days each benefit period</p> <p>No prior hospital stay is required.</p>
<p>\$0 copay for Medicare-covered home health visits.</p>	<p>\$0 copay for Medicare-covered home health visits.</p>	<p>\$0 copay for Medicare-covered home health visits.</p>

## Section 2: 2010 Summary of Benefits CIGNA Medicare Access (PFFS) Plan Comparison

Benefit Category	Original Medicare	CIGNA Medicare Access Plan One (PFFS)
<b>INPATIENT CARE</b>		
<b>7. Hospice</b>	<p>You pay part of the cost for outpatient drugs and inpatient respite care.</p> <p>You must get care from a Medicare-certified hospice.</p>	<p><b>General</b></p> <p>You must get care from a Medicare-certified hospice.</p>
<b>OUTPATIENT CARE</b>		
<b>8. Doctor Office Visits</b>	20% coinsurance	<p><b>General</b></p> <p>You may go to any doctor, specialist, or hospital that accepts the plan's Terms and Conditions of payment. See "Physical Exams," for more information.</p> <p>\$15 copay for each primary care doctor visit for Medicare-covered benefits.</p> <p>\$40 copay for each specialist visit for Medicare-covered benefits.</p>
<b>9. Chiropractic Services</b>	<p>Routine care not covered.</p> <p>20% coinsurance for manual manipulation of the spine to correct subluxation (a displacement or misalignment of a joint or body part) if you get it from a chiropractor or other qualified providers.</p>	<p>\$40 copay for Medicare-covered visits.</p> <p>Medicare-covered chiropractic visits are for manual manipulation of the spine to correct subluxation (a displacement or misalignment of a joint or body part) if you get it from a chiropractor or other qualified providers.</p>
<b>10. Podiatry Services</b>	<p>Routine care not covered.</p> <p>20% coinsurance for medically necessary foot care, including care for medical conditions affecting the lower limbs.</p>	<p>\$40 copay for each Medicare-covered visit.</p> <p>Medicare-covered podiatry benefits are for medically-necessary foot care.</p>

**CIGNA Medicare Access  
Plus Rx Plan Two (PFFS)**

**CIGNA Medicare Access  
Plan Three (PFFS)**

**CIGNA Medicare Access  
Plus Rx Plan Four (PFFS)**

**General**

You must get care from a Medicare-certified hospice.

**General**

You must get care from a Medicare-certified hospice.

**General**

You must get care from a Medicare-certified hospice.

**General**

You may go to any doctor, specialist, or hospital that accepts the plan's Terms and Conditions of payment. See "Physical Exams," for more information.

\$15 copay for each primary care doctor visit for Medicare-covered benefits.

\$45 copay for each specialist visit for Medicare-covered benefits.

**General**

You may go to any doctor, specialist, or hospital that accepts the plan's Terms and Conditions of payment. See "Physical Exams," for more information.

\$10 copay for each primary care doctor visit for Medicare-covered benefits.

\$20 copay for each specialist visit for Medicare-covered benefits.

**General**

You may go to any doctor, specialist, or hospital that accepts the plan's Terms and Conditions of payment. See "Physical Exams," for more information.

\$10 copay for each primary care doctor visit for Medicare-covered benefits.

\$20 copay for each specialist visit for Medicare-covered benefits.

\$45 copay for Medicare-covered visits.

Medicare-covered chiropractic visits are for manual manipulation of the spine to correct subluxation (a displacement or misalignment of a joint or body part) if you get it from a chiropractor or other qualified providers.

\$20 copay for Medicare-covered visits.

Medicare-covered chiropractic visits are for manual manipulation of the spine to correct subluxation (a displacement or misalignment of a joint or body part) if you get it from a chiropractor or other qualified providers.

\$20 copay for Medicare-covered visits.

Medicare-covered chiropractic visits are for manual manipulation of the spine to correct subluxation (a displacement or misalignment of a joint or body part) if you get it from a chiropractor or other qualified providers.

\$45 copay for each Medicare-covered visit.

Medicare-covered podiatry benefits are for medically-necessary foot care.

\$20 copay for each Medicare-covered visit.

Medicare-covered podiatry benefits are for medically-necessary foot care.

\$20 copay for each Medicare-covered visit.

Medicare-covered podiatry benefits are for medically-necessary foot care.

## Section 2: 2010 Summary of Benefits CIGNA Medicare Access (PFFS) Plan Comparison

Benefit Category	Original Medicare	CIGNA Medicare Access Plan One (PFFS)
<b>OUTPATIENT CARE</b>		
<b>11. Outpatient Mental Health Care</b>	45% coinsurance for most outpatient mental health services.	\$40 copay for each Medicare-covered individual therapy visit. \$15 copay for each Medicare-covered group therapy visit.
<b>12. Outpatient Substance Abuse Care</b>	20% coinsurance	\$40 copay for Medicare-covered individual visits. \$15 copay for Medicare-covered group visits.
<b>13. Outpatient Services/ Surgery</b>	20% coinsurance for the doctor 20% of outpatient facility charges	\$40 to \$250 copay for each Medicare-covered ambulatory surgical center visit. \$40 to \$250 copay for each Medicare-covered outpatient hospital facility visit.
<b>14. Ambulance Services</b> (medically-necessary ambulance services)	20% coinsurance	\$150 copay for Medicare-covered ambulance benefits.
<b>15. Emergency Care</b> (You may go to any emergency room if you reasonably believe you need emergency care.)	20% coinsurance for the doctor 20% of facility charge, or a set copay per emergency room visit You don't have to pay the emergency room copay if you are admitted to the hospital for the same condition within 3 days of the emergency room visit.  NOT covered outside the U.S. except under limited circumstances.	\$50 copay for Medicare-covered emergency room visits. \$50,000 limit for emergency services outside the U.S. every year.  If you are admitted to the hospital within 24-hour(s) for the same condition, you pay \$0 for the emergency room visit.

CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
<p>\$40 copay for each Medicare-covered individual therapy visit.</p> <p>\$15 copay for each Medicare-covered group therapy visit.</p>	<p>\$20 copay for each Medicare-covered individual therapy visit.</p> <p>\$10 copay for each Medicare-covered group therapy visit.</p>	<p>\$20 copay for each Medicare-covered individual therapy visit.</p> <p>\$10 copay for each Medicare-covered group therapy visit.</p>
<p>\$45 copay for Medicare-covered individual visits.</p> <p>\$15 copay for Medicare-covered group visits.</p>	<p>\$20 copay for Medicare-covered individual visits.</p> <p>\$10 copay for Medicare-covered group visits.</p>	<p>\$20 copay for Medicare-covered individual visits.</p> <p>\$10 copay for Medicare-covered group visits.</p>
<p>\$45 to \$250 copay for each Medicare-covered ambulatory surgical center visit.</p> <p>\$45 to \$250 copay for each Medicare-covered outpatient hospital facility visit.</p>	<p>\$20 to \$100 copay for each Medicare-covered ambulatory surgical center visit.</p> <p>\$20 to \$100 copay for each Medicare-covered outpatient hospital facility visit.</p>	<p>\$20 to \$50 copay for each Medicare-covered ambulatory surgical center visit.</p> <p>\$20 to \$50 copay for each Medicare-covered outpatient hospital facility visit.</p>
<p>\$150 copay for Medicare-covered ambulance benefits.</p>	<p>\$100 copay for Medicare-covered ambulance benefits.</p>	<p>\$100 copay for Medicare-covered ambulance benefits.</p>
<p>\$50 copay for Medicare-covered emergency room visits.</p> <p>\$50,000 limit for emergency services outside the U.S. every year.</p> <p>If you are admitted to the hospital within 24-hour(s) for the same condition, you pay \$0 for the emergency room visit.</p>	<p>\$50 copay for Medicare-covered emergency room visits.</p> <p>\$100,000 limit for emergency services outside the U.S. every year.</p> <p>If you are admitted to the hospital within 24-hour(s) for the same condition, you pay \$0 for the emergency room visit.</p>	<p>\$50 copay for Medicare-covered emergency room visits.</p> <p>\$100,000 limit for emergency services outside the U.S. every year.</p> <p>If you are admitted to the hospital within 24-hour(s) for the same condition, you pay \$0 for the emergency room visit.</p>

## Section 2: 2010 Summary of Benefits CIGNA Medicare Access (PFFS) Plan Comparison

Benefit Category	Original Medicare	CIGNA Medicare Access Plan One (PFFS)
<b>OUTPATIENT CARE</b>		
<b>16. Urgently Needed Care</b> (This is NOT emergency care, and in most cases, is out of the service area.)	20% coinsurance, or a set copay.  NOT covered outside the U.S. except under limited circumstances.	<b>General</b>  Cost sharing is the same as Doctor Office Visit cost sharing.
<b>17. Outpatient Rehabilitation Services</b> (Occupational Therapy, Physical Therapy, Speech and Language Therapy)	20% coinsurance	\$40 copay for Medicare-covered Occupational Therapy visits.  \$40 copay for Medicare-covered Physical and/or Speech/Language Therapy visits.
<b>OUTPATIENT MEDICAL SERVICES AND SUPPLIES</b>		
<b>18. Durable Medical Equipment</b> (includes wheelchairs, oxygen, etc.)	20% coinsurance	15% of the cost for Medicare-covered items.
<b>19. Prosthetic Devices</b> (includes braces, artificial limbs and eyes, etc.)	20% coinsurance	15% of the cost for Medicare-covered items.
<b>20. Diabetes Self-Monitoring Training, Nutrition Therapy, and Supplies</b> (includes coverage for glucose monitors, test strips, lancets, screening tests, and self-management training)	20% coinsurance  Nutrition therapy is for people who have diabetes or kidney disease (but aren't on dialysis or haven't had a kidney transplant) when referred by a doctor. These services can be given by a registered dietitian or include a nutritional assessment and counseling to help you manage your diabetes or kidney disease.	\$0 copay for Diabetes self-monitoring training.  \$0 copay for Nutrition Therapy for Diabetes.  15% of the cost for Diabetes supplies.  Separate Office Visit cost sharing of \$15 copay may apply.

CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
<p><b>General</b></p> <p>Cost sharing is the same as Doctor Office Visit cost sharing.</p>	<p><b>General</b></p> <p>Cost sharing is the same as Doctor Office Visit cost sharing.</p>	<p><b>General</b></p> <p>Cost sharing is the same as Doctor Office Visit cost sharing.</p>
<p>\$45 copay for Medicare-covered Occupational Therapy visits.</p> <p>\$45 copay for Medicare-covered Physical and/or Speech/Language Therapy visits.</p>	<p>\$20 copay for Medicare-covered Occupational Therapy visits.</p> <p>\$20 copay for Medicare-covered Physical and/or Speech/Language Therapy visits.</p>	<p>\$20 copay for Medicare-covered Occupational Therapy visits.</p> <p>\$20 copay for Medicare-covered Physical and/or Speech/Language Therapy visits.</p>
<p>15% of the cost for Medicare-covered items.</p>	<p>15% of the cost for Medicare-covered items.</p>	<p>10% of the cost for Medicare-covered items.</p>
<p>15% of the cost for Medicare-covered items.</p>	<p>15% of the cost for Medicare-covered items.</p>	<p>10% of the cost for Medicare-covered items.</p>
<p>\$0 copay for Diabetes self-monitoring training.</p> <p>\$0 copay for Nutrition Therapy for Diabetes.</p> <p>15% of the cost for Diabetes supplies.</p> <p>Separate Office Visit cost sharing of \$15 copay may apply.</p>	<p>\$0 copay for Diabetes self-monitoring training.</p> <p>\$0 copay for Nutrition Therapy for Diabetes.</p> <p>15% of the cost for Diabetes supplies.</p> <p>Separate Office Visit cost sharing of \$10 copay may apply.</p>	<p>\$0 copay for Diabetes self-monitoring training.</p> <p>\$0 copay for Nutrition Therapy for Diabetes.</p> <p>10% of the cost for Diabetes supplies.</p> <p>Separate Office Visit cost sharing of \$10 copay may apply.</p>

## Section 2: 2010 Summary of Benefits CIGNA Medicare Access (PFFS) Plan Comparison

Benefit Category	Original Medicare	CIGNA Medicare Access Plan One (PFFS)
<b>OUTPATIENT MEDICAL SERVICES AND SUPPLIES</b>		
<b>21. Diagnostic Tests, X-rays, and Lab Services</b>	<p>20% coinsurance for diagnostic tests and X-rays</p> <p>\$0 copay for Medicare-covered lab services</p> <p>Lab Services: Medicare covers medically necessary diagnostic lab services that are ordered by your treating doctor when they are provided by a Clinical Laboratory Improvement Amendments (CLIA) certified laboratory that participates in Medicare. Diagnostic lab services are done to help your doctor diagnose or rule out a suspected illness or condition. Medicare does not cover most routine screening tests, like checking your cholesterol.</p>	<p>15% of the cost for Medicare-covered lab services.</p> <p>15% of the cost for Medicare-covered diagnostic procedures and tests.</p> <p>15% of the cost for Medicare-covered X-rays.</p> <p>15% of the cost for Medicare-covered diagnostic radiology services.</p> <p>15% of the cost for Medicare-covered therapeutic radiology services.</p> <p>Separate Office Visit cost sharing of \$15 copay may apply.</p>
<b>PREVENTIVE SERVICES</b>		
<b>22. Bone Mass Measurement</b>  (for people with Medicare who are at risk)	<p>20% coinsurance</p> <p>Covered once every 24 months (more often if medically necessary) if you meet certain medical conditions.</p>	<p>\$0 copay for Medicare-covered bone mass measurement</p> <p>Separate Office Visit cost sharing of \$15 copay may apply.</p>
<b>23. Colorectal Screening Exams</b>  (for people with Medicare age 50 and older)	<p>20% coinsurance</p> <p>Covered when you are high risk or when you are age 50 and older.</p>	<p>\$0 copay for Medicare-covered colorectal screenings.</p> <p>Separate Office Visit cost sharing of \$15 copay may apply.</p>

CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
<p>15% of the cost for Medicare-covered lab services.</p> <p>15% of the cost for Medicare-covered diagnostic procedures and tests.</p> <p>15% of the cost for Medicare-covered X-rays.</p> <p>15% of the cost for Medicare-covered diagnostic radiology services.</p> <p>15% of the cost for Medicare-covered therapeutic radiology services.</p> <p>Separate Office Visit cost sharing of \$15 copay may apply.</p>	<p>15% of the cost for Medicare-covered lab services.</p> <p>15% of the cost for Medicare-covered diagnostic procedures and tests.</p> <p>15% of the cost for Medicare-covered X-rays.</p> <p>15% of the cost for Medicare-covered diagnostic radiology services.</p> <p>15% of the cost for Medicare-covered therapeutic radiology services.</p> <p>Separate Office Visit cost sharing of \$10 copay may apply.</p>	<p>10% of the cost for Medicare-covered lab services.</p> <p>10% of the cost for Medicare-covered diagnostic procedures and tests.</p> <p>10% of the cost for Medicare-covered X-rays.</p> <p>10% of the cost for Medicare-covered diagnostic radiology services.</p> <p>10% of the cost for Medicare-covered therapeutic radiology services.</p> <p>Separate Office Visit cost sharing of \$10 copay may apply.</p>
<p>\$0 copay for Medicare-covered bone mass measurement</p> <p>Separate Office Visit cost sharing of \$15 copay may apply.</p>	<p>\$0 copay for Medicare-covered bone mass measurement</p> <p>Separate Office Visit cost sharing of \$10 copay may apply.</p>	<p>\$0 copay for Medicare-covered bone mass measurement</p> <p>Separate Office Visit cost sharing of \$10 copay may apply.</p>
<p>\$0 copay for Medicare-covered colorectal screenings.</p> <p>Separate Office Visit cost sharing of \$15 copay may apply.</p>	<p>\$0 copay for Medicare-covered colorectal screenings.</p> <p>Separate Office Visit cost sharing of \$10 copay may apply.</p>	<p>\$0 copay for Medicare-covered colorectal screenings.</p> <p>Separate Office Visit cost sharing of \$10 copay may apply.</p>

## Section 2: 2010 Summary of Benefits CIGNA Medicare Access (PFFS) Plan Comparison

Benefit Category	Original Medicare	CIGNA Medicare Access Plan One (PFFS)
<b>PREVENTIVE SERVICES</b>		
<p><b>24. Immunizations</b> (Flu vaccine, Hepatitis B vaccine – for people with Medicare who are at risk, Pneumonia vaccine)</p>	<p>\$0 copay for Flu and Pneumonia vaccines 20% coinsurance for Hepatitis B vaccine You may only need the Pneumonia vaccine once in your lifetime. Call your doctor for more information.</p>	<p>\$0 copay for Flu and Pneumonia vaccines. \$0 copay for Hepatitis B vaccine.</p>
<p><b>25. Mammograms (Annual Screening)</b> (for women with Medicare age 40 and older)</p>	<p>20% coinsurance No referral needed. Covered once a year for all women with Medicare age 40 and older. One baseline mammogram covered for women with Medicare between age 35 and 39.</p>	<p>\$0 copay for Medicare-covered screening mammograms. Separate Office Visit cost sharing of \$15 copay may apply.</p>
<p><b>26. Pap Smears and Pelvic Exams</b> (for women with Medicare)</p>	<p>\$0 copay for Pap smears Covered once every 2 years. Covered once a year for women with Medicare at high risk. 20% coinsurance for Pelvic Exams.</p>	<p>\$0 copay for Medicare-covered pap smears and pelvic exams and – up to 1 additional pap smear(s) and pelvic exam(s) every year Separate Office Visit cost sharing of \$15 copay may apply.</p>
<p><b>27. Prostate Cancer Screening Exams</b> (for men with Medicare age 50 and older)</p>	<p>20% coinsurance for the digital rectal exam. \$0 for the PSA test; 20% coinsurance for other related services. Covered once a year for all men with Medicare over age 50.</p>	<p>\$0 copay for Medicare-covered prostate cancer screening Separate Office Visit cost sharing of \$15 copay may apply.</p>

CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
<p>\$0 copay for Flu and Pneumonia vaccines.</p> <p>\$0 copay for Hepatitis B vaccine.</p>	<p>\$0 copay for Flu and Pneumonia vaccines.</p> <p>\$0 copay for Hepatitis B vaccine.</p>	<p>\$0 copay for Flu and Pneumonia vaccines.</p> <p>\$0 copay for Hepatitis B vaccine.</p>
<p>\$0 copay for Medicare-covered screening mammograms.</p> <p>Separate Office Visit cost sharing of \$15 copay may apply.</p>	<p>\$0 copay for Medicare-covered screening mammograms.</p> <p>Separate Office Visit cost sharing of \$10 copay may apply.</p>	<p>\$0 copay for Medicare-covered screening mammograms.</p> <p>Separate Office Visit cost sharing of \$10 copay may apply.</p>
<p>\$0 copay for Medicare-covered pap smears and pelvic exams and</p> <ul style="list-style-type: none"> <li>– up to 1 additional pap smear(s) and pelvic exam(s) every year</li> </ul> <p>Separate Office Visit cost sharing of \$15 copay may apply.</p>	<p>\$0 copay for Medicare-covered pap smears and pelvic exams and</p> <ul style="list-style-type: none"> <li>– up to 1 additional pap smear(s) and pelvic exam(s) every year</li> </ul> <p>Separate Office Visit cost sharing of \$10 copay may apply.</p>	<p>\$0 copay for Medicare-covered pap smears and pelvic exams and</p> <ul style="list-style-type: none"> <li>– up to 1 additional pap smear(s) and pelvic exam(s) every year</li> </ul> <p>Separate Office Visit cost sharing of \$10 copay may apply.</p>
<p>\$0 copay for Medicare-covered prostate cancer screening</p> <p>Separate Office Visit cost sharing of \$15 copay may apply.</p>	<p>\$0 copay for Medicare-covered prostate cancer screening</p> <p>Separate Office Visit cost sharing of \$10 copay may apply.</p>	<p>\$0 copay for Medicare-covered prostate cancer screening</p> <p>Separate Office Visit cost sharing of \$10 copay may apply.</p>

## Section 2: 2010 Summary of Benefits CIGNA Medicare Access (PFFS) Plan Comparison

Benefit Category	Original Medicare	CIGNA Medicare Access Plan One (PFFS)
<b>PREVENTIVE SERVICES</b>		
<p><b>28. End-Stage Renal Disease</b></p>	<p>20% coinsurance for renal dialysis</p> <p>20% coinsurance for Nutrition Therapy for End-Stage Renal Disease</p> <p>Nutrition therapy is for people who have diabetes or kidney disease (but aren't on dialysis or haven't had a kidney transplant) when referred by a doctor. These services can be given by a registered dietitian or include a nutritional assessment and counseling to help you manage your diabetes or kidney disease.</p>	<p>\$40 copay for renal dialysis</p> <p>\$0 copay for Nutrition Therapy for End-Stage Renal Disease</p>
<p><b>29. Prescription Drugs</b></p>	<p>Most drugs are not covered under Original Medicare. You can add prescription drug coverage to Original Medicare by joining a Medicare Prescription Drug Plan, or you can get all your Medicare coverage, including prescription drug coverage, by joining a Medicare Advantage Plan or a Medicare Cost Plan that offers prescription drug coverage.</p>	<p><b>Drugs covered under Medicare Part B</b></p> <p><b>General</b></p> <p>Most drugs not covered.</p> <p>20% of the cost for Part B-covered chemotherapy drugs and other Part B-covered drugs.</p>

CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
<p>\$45 copay for renal dialysis \$0 copay for Nutrition Therapy for End-Stage Renal Disease</p>	<p>\$20 copay for renal dialysis \$0 copay for Nutrition Therapy for End-Stage Renal Disease</p>	<p>\$20 copay for renal dialysis \$0 copay for Nutrition Therapy for End-Stage Renal Disease</p>
<p><b>Drugs covered under Medicare Part B</b></p> <p><b>General</b></p> <p>20% of the cost for Part B-covered chemotherapy drugs and other Part B-covered drugs.</p>	<p><b>Drugs covered under Medicare Part B</b></p> <p><b>General</b></p> <p>Most drugs not covered. 20% of the cost for Part B-covered chemotherapy drugs and other Part B-covered drugs.</p>	<p><b>Drugs covered under Medicare Part B</b></p> <p><b>General</b></p> <p>20% of the cost for Part B-covered chemotherapy drugs and other Part B-covered drugs.</p>

Section 2: 2010 Summary of Benefits  
 CIGNA Medicare Access (PFFS) Plan Comparison

Benefit Category	Original Medicare	CIGNA Medicare Access Plan One (PFFS)
<b>PREVENTIVE SERVICES</b>		
<b>29. Prescription Drugs</b> <i>(continued)</i>		<b>Drugs covered under Medicare Part D</b>  <b>General</b> This plan does not offer prescription drug coverage. Most drugs not covered.

**CIGNA Medicare Access  
Plus Rx Plan Two (PFFS)**

**CIGNA Medicare Access  
Plan Three (PFFS)**

**CIGNA Medicare Access  
Plus Rx Plan Four (PFFS)**

**Drugs covered under Medicare  
Part D**

**General**

This plan uses a formulary.

The plan will send you the formulary. You can also see the formulary at <http://www.cigna.com/sites/cignamedicare/formulary/medicarerx.html> on the web.

Different out-of-pocket costs may apply for people who

- have limited incomes,
- live in long term care facilities, or
- have access to Indian/Tribal/Urban (Indian Health Service).

The plan offers national in-network prescription coverage (i.e., this would include 50 states and DC). This means that you will pay the same cost-sharing amount for your prescription drugs if you get them at an in-network pharmacy outside of the plan's service area (for instance when you travel).

Total yearly drug costs are the total drug costs paid by both you and the plan.

The plan may require you to first try one drug to treat your condition before it will cover another drug for that condition.

Some drugs have quantity limits.

**Drugs covered under Medicare  
Part D**

**General**

This plan does not offer prescription drug coverage.

Most drugs not covered.

**Drugs covered under Medicare  
Part D**

**General**

This plan uses a formulary.

The plan will send you the formulary. You can also see the formulary at <http://www.cigna.com/sites/cignamedicare/formulary/medicarerx.html> on the web.

Different out-of-pocket costs may apply for people who

- have limited incomes,
- live in long term care facilities, or
- have access to Indian/Tribal/Urban (Indian Health Service).

The plan offers national in-network prescription coverage (i.e., this would include 50 states and DC). This means that you will pay the same cost-sharing amount for your prescription drugs if you get them at an in-network pharmacy outside of the plan's service area (for instance when you travel).

Total yearly drug costs are the total drug costs paid by both you and the plan.

The plan may require you to first try one drug to treat your condition before it will cover another drug for that condition.

Some drugs have quantity limits.

Section 2: 2010 Summary of Benefits  
 CIGNA Medicare Access (PFFS) Plan Comparison

Benefit Category	Original Medicare	CIGNA Medicare Access Plan One (PFFS)
<b>PREVENTIVE SERVICES</b>		
<b>29. Prescription Drugs</b> <i>(continued)</i>		This plan does not offer prescription drug coverage. Most drugs not covered.

**CIGNA Medicare Access Plus Rx Plan Two (PFFS)**

**CIGNA Medicare Access Plan Three (PFFS)**

**CIGNA Medicare Access Plus Rx Plan Four (PFFS)**

**Drugs covered under Medicare Part D (continued)**

Your provider must get prior authorization from CIGNA Medicare Access Plus Rx Plan Two (PFFS) for certain drugs. You must go to certain pharmacies for a very limited number of drugs, due to special handling, provider coordination, or patient education requirements for these drugs that cannot be met by most pharmacies in your network. These drugs are listed on the plan's website, formulary, and printed materials, as well as on the Medicare Prescription Drug Plan Finder on Medicare.gov.

If the actual cost of a drug is less than the normal cost-sharing amount for that drug, you will pay the actual cost, not the higher cost-sharing amount.

If you request a formulary exception for a drug and CIGNA Medicare Access Plus Rx Plan Two (PFFS) approves the exception, you will pay Tier 3 cost-sharing for that drug.

\$0 deductible.

**Initial Coverage**

You pay the following until total yearly drug costs reach \$2,830:

This plan does not offer prescription drug coverage.

Most drugs not covered.

**Drugs covered under Medicare Part D (continued)**

Your provider must get prior authorization from CIGNA Medicare Access Plus Rx Plan Four (PFFS) for certain drugs. You must go to certain pharmacies for a very limited number of drugs, due to special handling, provider coordination, or patient education requirements for these drugs that cannot be met by most pharmacies in your network. These drugs are listed on the plan's website, formulary, and printed materials, as well as on the Medicare Prescription Drug Plan Finder on Medicare.gov.

If the actual cost of a drug is less than the normal cost-sharing amount for that drug, you will pay the actual cost, not the higher cost-sharing amount.

If you request a formulary exception for a drug and CIGNA Medicare Access Plus Rx Plan Four (PFFS) approves the exception, you will pay Tier 3 cost-sharing for that drug.

\$0 deductible.

**Initial Coverage**

You pay the following until total yearly drug costs reach \$2,830:

## Section 2: 2010 Summary of Benefits CIGNA Medicare Access (PFFS) Plan Comparison

Benefit Category	Original Medicare	CIGNA Medicare Access Plan One (PFFS)
<b>PREVENTIVE SERVICES</b>		
<b>29. Prescription Drugs</b> <i>(continued)</i>		This plan does not offer prescription drug coverage. Most drugs not covered.

**CIGNA Medicare Access  
Plus Rx Plan Two (PFFS)**

**CIGNA Medicare Access  
Plan Three (PFFS)**

**CIGNA Medicare Access  
Plus Rx Plan Four (PFFS)**

**Retail Pharmacy**

**Tier 1**

- \$7 copay for a one-month (30-day) supply of drugs in this tier
- \$21 copay for a three-month (90-day) supply of drugs in this tier

**Tier 2**

- \$35 copay for a one-month (30-day) supply of drugs in this tier
- \$105 copay for a three-month (90-day) supply of drugs in this tier

**Tier 3**

- \$75 copay for a one-month (30-day) supply of drugs in this tier
- \$225 copay for a three-month (90-day) supply of drugs in this tier

**Tier 4**

- 33% coinsurance for a one-month (30-day) supply of drugs in this tier
- 33% coinsurance for a three-month (90-day) supply of drugs in this tier

This plan does not offer prescription drug coverage.

Most drugs not covered.

**Retail Pharmacy**

**Tier 1**

- \$7 copay for a one-month (30-day) supply of drugs in this tier
- \$21 copay for a three-month (90-day) supply of drugs in this tier

**Tier 2**

- \$35 copay for a one-month (30-day) supply of drugs in this tier
- \$105 copay for a three-month (90-day) supply of drugs in this tier

**Tier 3**

- \$75 copay for a one-month (30-day) supply of drugs in this tier
- \$225 copay for a three-month (90-day) supply of drugs in this tier

**Tier 4**

- 33% coinsurance for a one-month (30-day) supply of drugs in this tier
- 33% coinsurance for a three-month (90-day) supply of drugs in this tier

Section 2: 2010 Summary of Benefits  
 CIGNA Medicare Access (PFFS) Plan Comparison

Benefit Category	Original Medicare	CIGNA Medicare Access Plan One (PFFS)
<b>PREVENTIVE SERVICES</b>		
<b>29. Prescription Drugs</b> <i>(continued)</i>		This plan does not offer prescription drug coverage. Most drugs not covered.

**CIGNA Medicare Access  
Plus Rx Plan Two (PFFS)**

**CIGNA Medicare Access  
Plan Three (PFFS)**

**CIGNA Medicare Access  
Plus Rx Plan Four (PFFS)**

**Long Term Care Pharmacy**

**Tier 1**

- \$7 copay for a one-month (31-day) supply of drugs in this tier

**Tier 2**

- \$35 copay for a one-month (31-day) supply of drugs in this tier

**Tier 3**

- \$75 copay for a one-month (31-day) supply of drugs in this tier

**Tier 4**

- 33% coinsurance for a one-month (31-day) supply of drugs in this tier

**Mail Order**

**Tier 1**

- \$7 copay for a one-month (30-day) supply of drugs in this tier from a preferred mail order pharmacy.
- \$17.50 copay for a three-month (90-day) supply of drugs in this tier from a preferred mail order pharmacy.
- \$7 copay for a one-month (30-day) supply of drugs in this tier from a non-preferred mail order pharmacy.

This plan does not offer prescription drug coverage.

Most drugs not covered.

**Long Term Care Pharmacy**

**Tier 1**

- \$7 copay for a one-month (31-day) supply of drugs in this tier

**Tier 2**

- \$35 copay for a one-month (31-day) supply of drugs in this tier

**Tier 3**

- \$75 copay for a one-month (31-day) supply of drugs in this tier

**Tier 4**

- 33% coinsurance for a one-month (31-day) supply of drugs in this tier

**Mail Order**

**Tier 1**

- \$7 copay for a one-month (30-day) supply of drugs in this tier from a preferred mail order pharmacy.
- \$17.50 copay for a three-month (90-day) supply of drugs in this tier from a preferred mail order pharmacy.
- \$7 copay for a one-month (30-day) supply of drugs in this tier from a non-preferred mail order pharmacy.

## Section 2: 2010 Summary of Benefits CIGNA Medicare Access (PFFS) Plan Comparison

Benefit Category	Original Medicare	CIGNA Medicare Access Plan One (PFFS)
<b>PREVENTIVE SERVICES</b>		
<b>29. Prescription Drugs</b> <i>(continued)</i>		This plan does not offer prescription drug coverage.  Most drugs not covered.

CIGNA Medicare Access  
Plus Rx Plan Two (PFFS)

CIGNA Medicare Access  
Plan Three (PFFS)

CIGNA Medicare Access  
Plus Rx Plan Four (PFFS)

**Mail Order (continued)**

Tier 1

- \$21 copay for a three-month (90-day) supply of drugs in this tier from a non-preferred mail order pharmacy.

Tier 2

- \$35 copay for a one-month (30-day) supply of drugs in this tier from a preferred mail order pharmacy.
- \$87.50 copay for a three-month (90-day) supply of drugs in this tier from a preferred mail order pharmacy.
- \$35 copay for a one-month (30-day) supply of drugs in this tier from a non-preferred mail order pharmacy.
- \$105 copay for a three-month (90-day) supply of drugs in this tier from a non-preferred mail order pharmacy.

Tier 3

- \$75 copay for a one-month (30-day) supply of drugs in this tier from a preferred mail order pharmacy.
- \$187.50 copay for a three-month (90-day) supply of drugs in this tier from a preferred mail order pharmacy.

This plan does not offer prescription drug coverage.

Most drugs not covered.

**Mail Order (continued)**

Tier 1

- \$21 copay for a three-month (90-day) supply of drugs in this tier from a non-preferred mail order pharmacy.

Tier 2

- \$35 copay for a one-month (30-day) supply of drugs in this tier from a preferred mail order pharmacy.
- \$87.50 copay for a three-month (90-day) supply of drugs in this tier from a preferred mail order pharmacy.
- \$35 copay for a one-month (30-day) supply of drugs in this tier from a non-preferred mail order pharmacy.
- \$105 copay for a three-month (90-day) supply of drugs in this tier from a non-preferred mail order pharmacy.

Tier 3

- \$75 copay for a one-month (30-day) supply of drugs in this tier from a preferred mail order pharmacy.
- \$187.50 copay for a three-month (90-day) supply of drugs in this tier from a preferred mail order pharmacy.

## Section 2: 2010 Summary of Benefits CIGNA Medicare Access (PFFS) Plan Comparison

Benefit Category	Original Medicare	CIGNA Medicare Access Plan One (PFFS)
<b>PREVENTIVE SERVICES</b>		
<b>29. Prescription Drugs</b> <i>(continued)</i>		This plan does not offer prescription drug coverage. Most drugs not covered.

CIGNA Medicare Access Plus Rx Plan Two (PFFS)

CIGNA Medicare Access Plan Three (PFFS)

CIGNA Medicare Access Plus Rx Plan Four (PFFS)

**Mail Order (continued)**

Tier 3

- \$75 copay for a one-month (30-day) supply of drugs in this tier from a non-preferred mail order pharmacy.
- \$225 copay for a three-month (90-day) supply of drugs in this tier from a non-preferred mail order pharmacy.

Tier 4

- 33% coinsurance for a one-month (30-day) supply of drugs in this tier from a preferred mail order pharmacy.
- 33% coinsurance for a three-month (90-day) supply of drugs in this tier from a preferred mail order pharmacy.
- 33% coinsurance for a one-month (30-day) supply of drugs in this tier from a non-preferred mail order pharmacy.
- 33% coinsurance for a three-month (90-day) supply of drugs in this tier from a non-preferred mail order pharmacy.

**Coverage Gap**

After your total yearly drug costs reach \$2,830, you pay 100% until your yearly out-of-pocket drug costs reach \$4,550.

This plan does not offer prescription drug coverage.

Most drugs not covered.

**Mail Order (continued)**

Tier 3

- \$75 copay for a one-month (30-day) supply of drugs in this tier from a non-preferred mail order pharmacy.
- \$225 copay for a three-month (90-day) supply of drugs in this tier from a non-preferred mail order pharmacy.

Tier 4

- 33% coinsurance for a one-month (30-day) supply of drugs in this tier from a preferred mail order pharmacy.
- 33% coinsurance for a three-month (90-day) supply of drugs in this tier from a preferred mail order pharmacy.
- 33% coinsurance for a one-month (30-day) supply of drugs in this tier from a non-preferred mail order pharmacy.
- 33% coinsurance for a three-month (90-day) supply of drugs in this tier from a non-preferred mail order pharmacy.

**Coverage Gap**

After your total yearly drug costs reach \$2,830, you pay 100% until your yearly out-of-pocket drug costs reach \$4,550.

## Section 2: 2010 Summary of Benefits CIGNA Medicare Access (PFFS) Plan Comparison

Benefit Category	Original Medicare	CIGNA Medicare Access Plan One (PFFS)
<b>PREVENTIVE SERVICES</b>		
<b>29. Prescription Drugs</b> <i>(continued)</i>		This plan does not offer prescription drug coverage. Most drugs not covered.

## CIGNA Medicare Access Plus Rx Plan Two (PFFS)

## CIGNA Medicare Access Plan Three (PFFS)

## CIGNA Medicare Access Plus Rx Plan Four (PFFS)

### **Catastrophic Coverage**

After your yearly out-of-pocket drug costs reach \$4,550, you pay the greater of:

- A \$2.50 copay for generic (including brand drugs treated as generic) and a \$6.30 copay for all other drugs, or
- 5% coinsurance.

Plan drugs may be covered in special circumstances, for instance, illness while traveling outside of the plan's service area where there is no network pharmacy. You may have to pay more than your normal cost-sharing amount if you get your drugs at an out-of-network pharmacy. In addition, you will likely have to pay the pharmacy's full charge for the drug and submit documentation to receive reimbursement from CIGNA Medicare Access Plus Rx Plan Two (PFFS).

### **Out-of-Network Initial Coverage**

You will be reimbursed up to the full cost of the drug minus the following for drugs purchased out-of-network until total yearly drug costs reach \$2,830:

This plan does not offer prescription drug coverage.

Most drugs not covered.

### **Catastrophic Coverage**

After your yearly out-of-pocket drug costs reach \$4,550, you pay the greater of:

- A \$2.50 copay for generic (including brand drugs treated as generic) and a \$6.30 copay for all other drugs, or
- 5% coinsurance.

Plan drugs may be covered in special circumstances, for instance, illness while traveling outside of the plan's service area where there is no network pharmacy. You may have to pay more than your normal cost-sharing amount if you get your drugs at an out-of-network pharmacy. In addition, you will likely have to pay the pharmacy's full charge for the drug and submit documentation to receive reimbursement from CIGNA Medicare Access Plus Rx Plan Four (PFFS).

### **Out-of-Network Initial Coverage**

You will be reimbursed up to the full cost of the drug minus the following for drugs purchased out-of-network until total yearly drug costs reach \$2,830:

## Section 2: 2010 Summary of Benefits CIGNA Medicare Access (PFFS) Plan Comparison

Benefit Category	Original Medicare	CIGNA Medicare Access Plan One (PFFS)
<b>PREVENTIVE SERVICES</b>		
<b>29. Prescription Drugs</b> <i>(continued)</i>		<p>This plan does not offer prescription drug coverage.</p> <p>Most drugs not covered.</p>

**CIGNA Medicare Access Plus Rx Plan Two (PFFS)**

**CIGNA Medicare Access Plan Three (PFFS)**

**CIGNA Medicare Access Plus Rx Plan Four (PFFS)**

**Out-of-Network Pharmacy**

**Tier 1**

- \$7 copay for a (10-day) supply of drugs in this tier

**Tier 2**

- \$35 copay for a (10-day) supply of drugs in this tier

**Tier 3**

- \$75 copay for a (10-day) supply of drugs in this tier

**Tier 4**

- 33% coinsurance for a (10-day) supply of drugs in this tier

**Out-of-Network Coverage Gap**

After your total yearly drug costs reach \$2,830, you pay 100% of the pharmacy's full charge for drugs purchased out-of-network until your yearly out-of-pocket drug costs reach \$4,550. You will not be reimbursed by CIGNA Medicare Access Plus Rx Plan Two (PFFS) for out-of-network purchases when you are in the coverage gap. However, you should still submit documentation to CIGNA Medicare Access Plus Rx Plan Two (PFFS) so we can add the amounts you spent out-of-network to your total out-of-pocket costs for the year.

This plan does not offer prescription drug coverage.

Most drugs not covered.

**Out-of-Network Pharmacy**

**Tier 1**

- \$7 copay for a (10-day) supply of drugs in this tier

**Tier 2**

- \$35 copay for a (10-day) supply of drugs in this tier

**Tier 3**

- \$75 copay for a (10-day) supply of drugs in this tier

**Tier 4**

- 33% coinsurance for a (10-day) supply of drugs in this tier

**Out-of-Network Coverage Gap**

After your total yearly drug costs reach \$2,830, you pay 100% of the pharmacy's full charge for drugs purchased out-of-network until your yearly out-of-pocket drug costs reach \$4,550. You will not be reimbursed by CIGNA Medicare Access Plus Rx Plan Four (PFFS) for out-of-network purchases when you are in the coverage gap. However, you should still submit documentation to CIGNA Medicare Access Plus Rx Plan Four (PFFS) so we can add the amounts you spent out-of-network to your total out-of-pocket costs for the year.

## Section 2: 2010 Summary of Benefits CIGNA Medicare Access (PFFS) Plan Comparison

Benefit Category	Original Medicare	CIGNA Medicare Access Plan One (PFFS)
<b>PREVENTIVE SERVICES</b>		
<b>29. Prescription Drugs</b> <i>(continued)</i>		<p>This plan does not offer prescription drug coverage.</p> <p>Most drugs not covered.</p>
<b>30. Dental Services</b>	Preventive dental services (such as cleaning) not covered.	<p>\$40 copay for Medicare-covered dental benefits.</p> <ul style="list-style-type: none"> <li>– 25% of the cost for up to 2 oral exam(s) every year*</li> <li>– 25% of the cost for up to 2 cleaning(s) every year*</li> <li>– 25% of the cost for up to 1 dental X-ray visit(s) every year*</li> </ul> <p>* The amount you pay towards your preventive dental benefits do not apply to your out-of-pocket maximum.</p>
<b>31. Hearing Services</b>	<p>Routine hearing exams and hearing aids not covered.</p> <p>20% coinsurance for diagnostic hearing exams.</p>	<p>Hearing aids not covered.</p> <ul style="list-style-type: none"> <li>– \$40 copay for Medicare-covered diagnostic hearing exams</li> <li>– \$40 copay for up to 1 routine hearing test(s) every year</li> </ul>

**CIGNA Medicare Access  
Plus Rx Plan Two (PFFS)**

**CIGNA Medicare Access  
Plan Three (PFFS)**

**CIGNA Medicare Access  
Plus Rx Plan Four (PFFS)**

**Out-of-Network Catastrophic Coverage**

After your yearly out-of-pocket drug costs reach \$4,550, you will be reimbursed for drugs purchased out-of-network up to the full cost of the drug minus the following:

- A \$2.50 copay for generic (including brand drugs treated as generic) and a \$6.30 copay for all other drugs, or
- 5% coinsurance.

This plan does not offer prescription drug coverage.

Most drugs not covered.

**Out-of-Network Catastrophic Coverage**

After your yearly out-of-pocket drug costs reach \$4,550, you will be reimbursed for drugs purchased out-of-network up to the full cost of the drug minus the following:

- A \$2.50 copay for generic (including brand drugs treated as generic) and a \$6.30 copay for all other drugs, or
- 5% coinsurance.

\$45 copay for Medicare-covered dental benefits.

- 25% of the cost for up to 2 oral exam(s) every year\*
- 25% of the cost for up to 2 cleaning(s) every year\*
- 25% of the cost for up to 1 dental X-ray visit(s) every year\*

\* The amount you pay towards your preventive dental benefits do not apply to your out-of-pocket maximum.

\$20 copay for Medicare-covered dental benefits.

- 25% of the cost for up to 2 oral exam(s) every year\*
- 25% of the cost for up to 2 cleaning(s) every year\*
- 25% of the cost for up to 1 dental X-ray visit(s) every year\*

\* The amount you pay towards your preventive dental benefits do not apply to your out-of-pocket maximum.

\$20 copay for Medicare-covered dental benefits.

- 25% of the cost for up to 2 oral exam(s) every year\*
- 25% of the cost for up to 2 cleaning(s) every year\*
- 25% of the cost for up to 1 dental X-ray visit(s) every year\*

\* The amount you pay towards your preventive dental benefits do not apply to your out-of-pocket maximum.

Hearing aids not covered.

- \$45 copay for Medicare-covered diagnostic hearing exams
- \$45 copay for up to 1 routine hearing test(s) every year

Hearing aids not covered.

- \$20 copay for Medicare-covered diagnostic hearing exams
- \$20 copay for up to 1 routine hearing test(s) every year

Hearing aids not covered.

- \$20 copay for Medicare-covered diagnostic hearing exams
- \$20 copay for up to 1 routine hearing test(s) every year

## Section 2: 2010 Summary of Benefits CIGNA Medicare Access (PFFS) Plan Comparison

Benefit Category	Original Medicare	CIGNA Medicare Access Plan One (PFFS)
<b>PREVENTIVE SERVICES</b>		
<b>32. Vision Services</b>	<p>20% coinsurance for diagnosis and treatment of diseases and conditions of the eye.</p> <p>Routine eye exams and glasses not covered.</p> <p>Medicare pays for one pair of eyeglasses or contact lenses after cataract surgery.</p> <p>Annual glaucoma screenings covered for people at risk.</p>	<ul style="list-style-type: none"> <li>– \$40 copay for one pair of eyeglasses or contact lenses after cataract surgery.</li> <li>– \$40 copay for exams to diagnose and treat diseases and conditions of the eye.</li> <li>– \$40 copay for up to 1 routine eye exam(s) every year.</li> </ul>
<b>33. Physical Exams</b>	<p>20% coinsurance for one exam within the first 12 months of your new Medicare Part B coverage.</p> <p>When you get Medicare Part B, you can get a one time physical exam within the first 12 months of your new Part B coverage. The coverage does not include lab tests.</p>	<p>\$15 copay for routine exams.</p> <p>Limited to 1 exam(s) every year.</p> <p>\$15 copay for Medicare-covered benefits.</p>
<b>34. Health/Wellness Education</b>	<p>Smoking Cessation:</p> <p>Covered if ordered by your doctor. Includes two counseling attempts within a 12-month period if you are diagnosed with a smoking-related illness or are taking medicine that may be affected by tobacco. Each counseling attempt includes up to four face-to-face visits. You pay coinsurance, and Part B deductible applies.</p>	<p>This plan covers the following health/wellness education benefits:</p> <ul style="list-style-type: none"> <li>– Written health education materials, including Newsletters</li> <li>– Nursing Hotline</li> </ul> <p>\$0 copay for each Medicare-covered Smoking Cessation Counseling Session.</p>

CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
<ul style="list-style-type: none"> <li>– \$45 copay for one pair of eyeglasses or contact lenses after cataract surgery.</li> <li>– \$45 copay for exams to diagnose and treat diseases and conditions of the eye.</li> <li>– \$45 copay for up to 1 routine eye exam(s) every year.</li> </ul>	<ul style="list-style-type: none"> <li>– \$20 copay for one pair of eyeglasses or contact lenses after each cataract surgery.</li> <li>– \$20 copay for exams to diagnose and treat diseases and conditions of the eye.</li> <li>– \$20 copay for up to 1 routine eye exam(s) every year</li> <li>– \$20 copay for glasses</li> <li>– \$20 copay for contacts</li> <li>– \$75 limit for eye wear every two years.</li> </ul>	<ul style="list-style-type: none"> <li>– \$20 copay for one pair of eyeglasses or contact lenses after each cataract surgery.</li> <li>– \$20 copay for exams to diagnose and treat diseases and conditions of the eye.</li> <li>– \$20 copay for up to 1 routine eye exam(s) every year</li> <li>– \$20 copay for glasses</li> <li>– \$20 copay for contacts</li> <li>– \$100 limit for eye wear every two years.</li> </ul>
<p>\$15 copay for routine exams. Limited to 1 exam(s) every year.</p> <p>\$15 copay for Medicare-covered benefits.</p>	<p>\$10 copay for routine exams. Limited to 1 exam(s) every year.</p> <p>\$10 copay for Medicare-covered benefits.</p>	<p>\$10 copay for routine exams. Limited to 1 exam(s) every year.</p> <p>\$10 copay for Medicare-covered benefits.</p>
<p>This plan covers the following health/wellness education benefits:</p> <ul style="list-style-type: none"> <li>– Written health education materials, including Newsletters</li> <li>– Nursing Hotline</li> </ul> <p>\$0 copay for each Medicare-covered Smoking Cessation Counseling Session.</p>	<p>This plan covers the following health/wellness education benefits:</p> <ul style="list-style-type: none"> <li>– Written health education materials, including Newsletters</li> <li>– Nursing Hotline</li> </ul> <p>\$0 copay for each Medicare-covered Smoking Cessation Counseling Session.</p>	<p>This plan covers the following health/wellness education benefits:</p> <ul style="list-style-type: none"> <li>– Written health education materials, including Newsletters</li> <li>– Nursing Hotline</li> </ul> <p>\$0 copay for each Medicare-covered Smoking Cessation Counseling Session.</p>

Section 2: 2010 Summary of Benefits  
 CIGNA Medicare Access (PFFS) Plan Comparison

Benefit Category	Original Medicare	CIGNA Medicare Access Plan One (PFFS)
<b>PREVENTIVE SERVICES</b>		
<b>35. Transportation (Routine)</b>	Not covered.	This plan does not cover routine transportation.
<b>36. Acupuncture</b>	Not covered.	This plan does not cover Acupuncture.

CIGNA Medicare Access  
Plus Rx Plan Two (PFFS)

CIGNA Medicare Access  
Plan Three (PFFS)

CIGNA Medicare Access  
Plus Rx Plan Four (PFFS)

This plan does not cover routine  
transportation.

This plan does not cover routine  
transportation.

This plan does not cover routine  
transportation.

This plan does not cover  
Acupuncture.

This plan does not cover  
Acupuncture.

This plan does not cover  
Acupuncture.

# State/County Premium Service Area Chart

State/County	CIGNA Medicare Access Plan One (PFFS)	CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
<b>ALABAMA</b>				
Autauga	\$80	\$95	\$135	Not Offered
Baldwin	\$80	\$95	\$135	Not Offered
Barbour	\$55	\$70	\$110	\$145
Bibb	\$80	\$95	\$135	Not Offered
Blount	\$80	\$95	\$135	Not Offered
Bullock	\$80	\$95	\$135	Not Offered
Chambers	\$45	\$60	\$100	\$135
Cherokee	\$55	\$70	\$110	\$145
Clarke	\$80	\$95	\$135	Not Offered
Clay	\$80	\$95	\$135	Not Offered
Cleburne	\$80	\$95	\$135	Not Offered
Coffee	\$80	\$95	\$135	Not Offered
Colbert	\$80	\$95	\$135	Not Offered
Conecuh	\$80	\$95	\$135	Not Offered
Coosa	\$80	\$95	\$135	Not Offered
Crenshaw	\$80	\$95	\$135	Not Offered
Dale	\$80	\$95	\$135	Not Offered
Dallas	\$80	\$95	\$135	Not Offered
Elmore	\$80	\$95	\$135	Not Offered
Escambia	\$80	\$95	\$135	Not Offered
Etowah	\$80	\$95	\$135	Not Offered
Fayette	\$45	\$60	\$100	\$135
Franklin	\$80	\$95	\$135	Not Offered
Geneva	\$80	\$95	\$135	Not Offered
Greene	\$80	\$95	\$135	Not Offered
Hale	\$80	\$95	\$135	Not Offered
Henry	\$80	\$95	\$135	Not Offered
Houston	\$80	\$95	\$135	Not Offered
Jefferson	\$80	\$95	\$135	Not Offered
Lamar	\$80	\$95	\$135	Not Offered
Lauderdale	\$80	\$95	\$135	Not Offered
Lawrence	\$80	\$95	\$135	Not Offered
Lee	\$55	\$70	\$110	\$145
Limestone	\$80	\$95	\$135	Not Offered
Lowndes	\$80	\$95	\$135	Not Offered

## State/County Premium Service Area Chart

State/County	CIGNA Medicare Access Plan One (PFFS)	CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
Macon	\$80	\$95	\$135	Not Offered
Madison	\$55	\$70	\$110	\$145
Marshall	\$80	\$95	\$135	Not Offered
Mobile	\$45	\$60	\$100	\$135
Monroe	\$80	\$95	\$135	Not Offered
Montgomery	\$80	\$95	\$135	Not Offered
Morgan	\$80	\$95	\$135	Not Offered
Perry	\$80	\$95	\$135	Not Offered
Pike	\$80	\$95	\$135	Not Offered
Randolph	\$80	\$95	\$135	Not Offered
Russell	\$0	\$20	\$60	\$90
Saint Clair	\$80	\$95	\$135	Not Offered
Shelby	\$0	\$20	\$60	\$90
Sumter	\$80	\$95	\$135	Not Offered
Talladega	\$80	\$95	\$135	Not Offered
Wilcox	\$80	\$95	\$135	Not Offered
<b>ARKANSAS</b>				
Arkansas	\$80	\$95	\$135	Not Offered
Baxter	\$80	\$95	\$135	Not Offered
Benton	\$0	\$20	\$60	\$90
Boone	\$45	\$60	\$100	\$135
Bradley	\$80	\$95	\$135	Not Offered
Calhoun	\$80	\$95	\$135	Not Offered
Carroll	\$0	\$20	\$60	\$90
Chicot	\$80	\$95	\$135	Not Offered
Clark	\$80	\$95	\$135	Not Offered
Cleburne	\$80	\$95	\$135	Not Offered
Cleveland	\$80	\$95	\$135	Not Offered
Columbia	\$80	\$95	\$135	Not Offered
Conway	\$45	\$60	\$100	\$135
Craighead	\$80	\$95	\$135	Not Offered
Crawford	\$0	\$20	\$60	\$90
Crittenden	\$45	\$60	\$100	\$135
Cross	\$80	\$95	\$135	Not Offered
Dallas	\$80	\$95	\$135	Not Offered
Drew	\$80	\$95	\$135	Not Offered

## State/County Premium Service Area Chart

State/County	CIGNA Medicare Access Plan One (PFFS)	CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
Faulkner	\$45	\$60	\$100	\$135
Franklin	\$0	\$20	\$60	\$90
Fulton	\$0	\$20	\$60	\$90
Grant	\$45	\$60	\$100	\$135
Greene	\$80	\$95	\$135	Not Offered
Hempstead	\$80	\$95	\$135	Not Offered
Hot Spring	\$80	\$95	\$135	Not Offered
Howard	\$80	\$95	\$135	Not Offered
Independence	\$80	\$95	\$135	Not Offered
Izard	\$80	\$95	\$135	Not Offered
Jefferson	\$55	\$70	\$110	\$145
Johnson	\$45	\$60	\$100	\$135
Lafayette	\$80	\$95	\$135	Not Offered
Lawrence	\$80	\$95	\$135	Not Offered
Lee	\$55	\$70	\$110	\$145
Lincoln	\$45	\$60	\$100	\$135
Logan	\$55	\$70	\$110	\$145
Lonoke	\$45	\$60	\$100	\$135
Madison	\$0	\$20	\$60	\$90
Marion	\$80	\$95	\$135	Not Offered
Miller	\$45	\$60	\$100	\$135
Mississippi	\$80	\$95	\$135	Not Offered
Monroe	\$80	\$95	\$135	Not Offered
Montgomery	\$0	\$20	\$60	\$90
Nevada	\$45	\$60	\$100	\$135
Newton	\$0	\$20	\$60	\$90
Ouachita	\$80	\$95	\$135	Not Offered
Perry	\$45	\$60	\$100	\$135
Phillips	\$80	\$95	\$135	Not Offered
Pike	\$80	\$95	\$135	Not Offered
Poinsett	\$80	\$95	\$135	Not Offered
Polk	\$55	\$70	\$110	\$145
Pope	\$55	\$70	\$110	\$145
Prairie	\$80	\$95	\$135	Not Offered
Pulaski	\$45	\$60	\$100	\$135
Randolph	\$80	\$95	\$135	Not Offered

## State/County Premium Service Area Chart

State/County	CIGNA Medicare Access Plan One (PFFS)	CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
Saint Francis	\$80	\$95	\$135	Not Offered
Saline	\$45	\$60	\$100	\$135
Scott	\$0	\$20	\$60	\$90
Searcy	\$0	\$20	\$60	\$90
Sebastian	\$0	\$20	\$60	\$90
Sevier	\$80	\$95	\$135	Not Offered
Sharp	\$80	\$95	\$135	Not Offered
Stone	\$80	\$95	\$135	Not Offered
Union	\$80	\$95	\$135	Not Offered
Van Buren	\$80	\$95	\$135	Not Offered
Washington	\$0	\$20	\$60	\$90
White	\$80	\$95	\$135	Not Offered
Woodruff	\$55	\$70	\$110	\$145
Yell	\$55	\$70	\$110	\$145
<b>COLORADO</b>				
Adams	\$80	\$95	\$135	Not Offered
Alamosa	\$80	\$95	\$135	Not Offered
Arapahoe	\$80	\$95	\$135	Not Offered
Archuleta	\$55	\$70	\$110	\$145
Bent	\$80	\$95	\$135	Not Offered
Clear Creek	\$80	\$95	\$135	Not Offered
Costilla	\$80	\$95	\$135	Not Offered
Crowley	\$45	\$60	\$100	\$135
Custer	\$0	\$20	\$60	\$90
Delta	\$80	\$95	\$135	Not Offered
Denver	\$80	\$95	\$135	Not Offered
Dolores	\$80	\$95	\$135	Not Offered
Douglas	\$80	\$95	\$135	Not Offered
El Paso	\$45	\$60	\$100	\$135
Elbert	\$80	\$95	\$135	Not Offered
Fremont	\$55	\$70	\$110	\$145
Gilpin	\$80	\$95	\$135	Not Offered
Hinsdale	\$45	\$60	\$100	\$135
Huerfano	\$0	\$20	\$60	\$90
Jackson	\$80	\$95	\$135	Not Offered
Jefferson	\$80	\$95	\$135	Not Offered

## State/County Premium Service Area Chart

State/County	CIGNA Medicare Access Plan One (PFFS)	CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
La Plata	\$80	\$95	\$135	Not Offered
Larimer	\$55	\$70	\$110	\$145
Las Animas	\$80	\$95	\$135	Not Offered
Lincoln	\$80	\$95	\$135	Not Offered
Logan	\$80	\$95	\$135	Not Offered
Mesa	\$80	\$95	\$135	Not Offered
Montezuma	\$45	\$60	\$100	\$135
Montrose	\$80	\$95	\$135	Not Offered
Morgan	\$80	\$95	\$135	Not Offered
Otero	\$45	\$60	\$100	\$135
Ouray	\$80	\$95	\$135	Not Offered
Park	\$80	\$95	\$135	Not Offered
Pueblo	\$55	\$70	\$110	\$145
Routt	\$80	\$95	\$135	Not Offered
San Juan	\$80	\$95	\$135	Not Offered
Sedgwick	\$80	\$95	\$135	Not Offered
Teller	\$45	\$60	\$100	\$135
Weld	\$80	\$95	\$135	Not Offered
<b>FLORIDA</b>				
Bay	\$55	\$70	\$110	\$145
Calhoun	\$55	\$70	\$110	\$145
De Soto	\$55	\$70	\$110	\$145
Escambia	\$55	\$70	\$110	\$145
Flagler	\$55	\$70	\$110	\$145
Franklin	\$0	\$20	\$60	\$90
Gadsden	\$45	\$60	\$100	\$135
Gulf	\$55	\$70	\$110	\$145
Hardee	\$55	\$70	\$110	\$145
Holmes	\$55	\$70	\$110	\$145
Jackson	\$55	\$70	\$110	\$145
Jefferson	\$45	\$60	\$100	\$135
Leon	\$55	\$70	\$110	\$145
Liberty	\$80	\$95	\$135	Not Offered
Madison	\$55	\$70	\$110	\$145
Marion	\$55	\$70	\$110	\$145
Okaloosa	\$55	\$70	\$110	\$145

## State/County Premium Service Area Chart

State/County	CIGNA Medicare Access Plan One (PFFS)	CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
Okeechobee	\$55	\$70	\$110	\$145
Osceola	\$55	\$70	\$110	\$145
Pasco	\$80	\$95	\$135	Not Offered
Polk	\$55	\$70	\$110	\$145
Saint Lucie	\$55	\$70	\$110	\$145
Santa Rosa	\$55	\$70	\$110	\$145
Taylor	\$45	\$60	\$100	\$135
Volusia	\$55	\$70	\$110	\$145
Wakulla	\$80	\$95	\$135	Not Offered
Walton	\$55	\$70	\$110	\$145
Washington	\$55	\$70	\$110	\$145
<b>GEORGIA</b>				
Baker	\$55	\$70	\$110	\$145
Baldwin	\$45	\$60	\$100	\$135
Banks	\$80	\$95	\$135	Not Offered
Barrow	\$45	\$60	\$100	\$135
Bartow	\$45	\$60	\$100	\$135
Ben Hill	\$55	\$70	\$110	\$145
Berrien	\$0	\$20	\$60	\$90
Bibb	\$45	\$60	\$100	\$135
Brantley	\$55	\$70	\$110	\$145
Brooks	\$55	\$70	\$110	\$145
Bryan	\$0	\$20	\$60	\$90
Burke	\$0	\$20	\$60	\$90
Butts	\$45	\$60	\$100	\$135
Calhoun	\$55	\$70	\$110	\$145
Camden	\$55	\$70	\$110	\$145
Carroll	\$45	\$60	\$100	\$135
Catoosa	\$80	\$95	\$135	Not Offered
Charlton	\$55	\$70	\$110	\$145
Chatham	\$0	\$20	\$60	\$90
Chattahoochee	\$0	\$20	\$60	\$90
Chattooga	\$80	\$95	\$135	Not Offered
Clarke	\$55	\$70	\$110	\$145
Clay	\$0	\$20	\$60	\$90
Clayton	\$45	\$60	\$100	\$135

## State/County Premium Service Area Chart

State/County	CIGNA Medicare Access Plan One (PFFS)	CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
Clinch	\$0	\$20	\$60	\$90
Colquitt	\$0	\$20	\$60	\$90
Columbia	\$0	\$20	\$60	\$90
Cook	\$55	\$70	\$110	\$145
Coweta	\$0	\$20	\$60	\$90
Crawford	\$45	\$60	\$100	\$135
Crisp	\$80	\$95	\$135	Not Offered
Dade	\$80	\$95	\$135	Not Offered
Dawson	\$45	\$60	\$100	\$135
De Kalb	\$0	\$20	\$60	\$90
Decatur	\$45	\$60	\$100	\$135
Dooly	\$55	\$70	\$110	\$145
Dougherty	\$55	\$70	\$110	\$145
Douglas	\$45	\$60	\$100	\$135
Echols	\$55	\$70	\$110	\$145
Effingham	\$0	\$20	\$60	\$90
Elbert	\$0	\$20	\$60	\$90
Emanuel	\$55	\$70	\$110	\$145
Evans	\$0	\$20	\$60	\$90
Fannin	\$80	\$95	\$135	Not Offered
Fayette	\$45	\$60	\$100	\$135
Forsyth	\$45	\$60	\$100	\$135
Franklin	\$55	\$70	\$110	\$145
Fulton	\$0	\$20	\$60	\$90
Gilmer	\$80	\$95	\$135	Not Offered
Glynn	\$55	\$70	\$110	\$145
Grady	\$45	\$60	\$100	\$135
Gwinnett	\$0	\$20	\$60	\$90
Habersham	\$80	\$95	\$135	Not Offered
Hancock	\$0	\$20	\$60	\$90
Haralson	\$45	\$60	\$100	\$135
Harris	\$0	\$20	\$60	\$90
Hart	\$80	\$95	\$135	Not Offered
Heard	\$45	\$60	\$100	\$135
Henry	\$45	\$60	\$100	\$135
Houston	\$45	\$60	\$100	\$135

## State/County Premium Service Area Chart

State/County	CIGNA Medicare Access Plan One (PFFS)	CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
Irwin	\$0	\$20	\$60	\$90
Jackson	\$80	\$95	\$135	Not Offered
Jasper	\$45	\$60	\$100	\$135
Jenkins	\$55	\$70	\$110	\$145
Johnson	\$45	\$60	\$100	\$135
Jones	\$45	\$60	\$100	\$135
Lamar	\$45	\$60	\$100	\$135
Lanier	\$0	\$20	\$60	\$90
Laurens	\$80	\$95	\$135	Not Offered
Liberty	\$0	\$20	\$60	\$90
Lincoln	\$0	\$20	\$60	\$90
Lowndes	\$55	\$70	\$110	\$145
Lumpkin	\$80	\$95	\$135	Not Offered
Macon	\$45	\$60	\$100	\$135
Madison	\$55	\$70	\$110	\$145
Marion	\$0	\$20	\$60	\$90
Mc Duffie	\$0	\$20	\$60	\$90
Mc Intosh	\$0	\$20	\$60	\$90
Meriwether	\$0	\$20	\$60	\$90
Mitchell	\$55	\$70	\$110	\$145
Monroe	\$45	\$60	\$100	\$135
Montgomery	\$80	\$95	\$135	Not Offered
Morgan	\$45	\$60	\$100	\$135
Murray	\$80	\$95	\$135	Not Offered
Muscogee	\$0	\$20	\$60	\$90
Newton	\$45	\$60	\$100	\$135
Oconee	\$55	\$70	\$110	\$145
Oglethorpe	\$55	\$70	\$110	\$145
Paulding	\$45	\$60	\$100	\$135
Peach	\$45	\$60	\$100	\$135
Pickens	\$45	\$60	\$100	\$135
Pike	\$45	\$60	\$100	\$135
Putnam	\$80	\$95	\$135	Not Offered
Randolph	\$0	\$20	\$60	\$90
Richmond	\$0	\$20	\$60	\$90
Rockdale	\$45	\$60	\$100	\$135

## State/County Premium Service Area Chart

State/County	CIGNA Medicare Access Plan One (PFFS)	CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
Schley	\$45	\$60	\$100	\$135
Screven	\$55	\$70	\$110	\$145
Spalding	\$45	\$60	\$100	\$135
Stephens	\$55	\$70	\$110	\$145
Stewart	\$0	\$20	\$60	\$90
Sumter	\$45	\$60	\$100	\$135
Talbot	\$45	\$60	\$100	\$135
Taliaferro	\$0	\$20	\$60	\$90
Tattnall	\$55	\$70	\$110	\$145
Taylor	\$55	\$70	\$110	\$145
Terrell	\$55	\$70	\$110	\$145
Thomas	\$55	\$70	\$110	\$145
Tift	\$55	\$70	\$110	\$145
Toombs	\$55	\$70	\$110	\$145
Towns	\$55	\$70	\$110	\$145
Treutlen	\$55	\$70	\$110	\$145
Troup	\$45	\$60	\$100	\$135
Turner	\$45	\$60	\$100	\$135
Twiggs	\$45	\$60	\$100	\$135
Union	\$55	\$70	\$110	\$145
Upson	\$55	\$70	\$110	\$145
Walker	\$80	\$95	\$135	Not Offered
Walton	\$45	\$60	\$100	\$135
Warren	\$0	\$20	\$60	\$90
Washington	\$0	\$20	\$60	\$90
Wayne	\$55	\$70	\$110	\$145
Webster	\$55	\$70	\$110	\$145
Whitfield	\$80	\$95	\$135	Not Offered
Wilcox	\$55	\$70	\$110	\$145
Wilkes	\$80	\$95	\$135	Not Offered
Wilkinson	\$55	\$70	\$110	\$145
Worth	\$55	\$70	\$110	\$145
<b>ILLINOIS</b>				
Adams	\$45	\$60	\$100	\$135
Alexander	\$80	\$95	\$135	Not Offered
Bond	\$80	\$95	\$135	Not Offered

## State/County Premium Service Area Chart

State/County	CIGNA Medicare Access Plan One (PFFS)	CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
Boone	\$55	\$70	\$110	\$145
Brown	\$80	\$95	\$135	Not Offered
Bureau	\$80	\$95	\$135	Not Offered
Calhoun	\$0	\$20	\$60	\$90
Carroll	\$45	\$60	\$100	\$135
Cass	\$80	\$95	\$135	Not Offered
Champaign	\$55	\$70	\$110	\$145
Christian	\$80	\$95	\$135	Not Offered
Clark	\$80	\$95	\$135	Not Offered
Clay	\$80	\$95	\$135	Not Offered
Clinton	\$80	\$95	\$135	Not Offered
Coles	\$45	\$60	\$100	\$135
Crawford	\$80	\$95	\$135	Not Offered
Cumberland	\$80	\$95	\$135	Not Offered
De Witt	\$80	\$95	\$135	Not Offered
DeKalb	\$80	\$95	\$135	Not Offered
Douglas	\$0	\$20	\$60	\$90
Edgar	\$80	\$95	\$135	Not Offered
Edwards	\$80	\$95	\$135	Not Offered
Effingham	\$80	\$95	\$135	Not Offered
Fayette	\$80	\$95	\$135	Not Offered
Ford	\$80	\$95	\$135	Not Offered
Fulton	\$80	\$95	\$135	Not Offered
Gallatin	\$80	\$95	\$135	Not Offered
Greene	\$80	\$95	\$135	Not Offered
Hancock	\$80	\$95	\$135	Not Offered
Henry	\$80	\$95	\$135	Not Offered
Jackson	\$80	\$95	\$135	Not Offered
Jasper	\$80	\$95	\$135	Not Offered
Jersey	\$80	\$95	\$135	Not Offered
Johnson	\$80	\$95	\$135	Not Offered
Kendall	\$80	\$95	\$135	Not Offered
Lee	\$80	\$95	\$135	Not Offered
Logan	\$80	\$95	\$135	Not Offered
Macon	\$80	\$95	\$135	Not Offered
Macoupin	\$45	\$60	\$100	\$135

## State/County Premium Service Area Chart

State/County	CIGNA Medicare Access Plan One (PFFS)	CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
Madison	\$80	\$95	\$135	Not Offered
Marion	\$80	\$95	\$135	Not Offered
Marshall	\$45	\$60	\$100	\$135
Mason	\$80	\$95	\$135	Not Offered
Massac	\$80	\$95	\$135	Not Offered
McDonough	\$80	\$95	\$135	Not Offered
McLean	\$55	\$70	\$110	\$145
Menard	\$45	\$60	\$100	\$135
Mercer	\$80	\$95	\$135	Not Offered
Monroe	\$55	\$70	\$110	\$145
Montgomery	\$80	\$95	\$135	Not Offered
Morgan	\$45	\$60	\$100	\$135
Moultrie	\$80	\$95	\$135	Not Offered
Ogle	\$55	\$70	\$110	\$145
Peoria	\$0	\$20	\$60	\$90
Piatt	\$80	\$95	\$135	Not Offered
Pike	\$55	\$70	\$110	\$145
Pope	\$80	\$95	\$135	Not Offered
Putnam	\$80	\$95	\$135	Not Offered
Richland	\$80	\$95	\$135	Not Offered
Rock Island	\$80	\$95	\$135	Not Offered
Saline	\$80	\$95	\$135	Not Offered
Sangamon	\$45	\$60	\$100	\$135
Schuyler	\$45	\$60	\$100	\$135
Scott	\$55	\$70	\$110	\$145
Shelby	\$80	\$95	\$135	Not Offered
St. Clair	\$55	\$70	\$110	\$145
Stark	\$0	\$20	\$60	\$90
Stephenson	\$80	\$95	\$135	Not Offered
Tazewell	\$0	\$20	\$60	\$90
Union	\$80	\$95	\$135	Not Offered
Washington	\$80	\$95	\$135	Not Offered
Whiteside	\$80	\$95	\$135	Not Offered
Winnebago	\$55	\$70	\$110	\$145
Woodford	\$0	\$20	\$60	\$90

## State/County Premium Service Area Chart

State/County	CIGNA Medicare Access Plan One (PFFS)	CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
<b>INDIANA</b>				
Adams	\$0	\$20	\$60	\$90
Allen	\$0	\$20	\$60	\$90
Bartholomew	\$80	\$95	\$135	Not Offered
Blackford	\$80	\$95	\$135	Not Offered
Boone	\$45	\$60	\$100	\$135
Brown	\$0	\$20	\$60	\$90
Cass	\$80	\$95	\$135	Not Offered
Clark	\$55	\$70	\$110	\$145
Dearborn	\$45	\$60	\$100	\$135
Decatur	\$80	\$95	\$135	Not Offered
Dekalb	\$0	\$20	\$60	\$90
Delaware	\$80	\$95	\$135	Not Offered
Dubois	\$80	\$95	\$135	Not Offered
Elkhart	\$80	\$95	\$135	Not Offered
Fayette	\$45	\$60	\$100	\$135
Floyd	\$55	\$70	\$110	\$145
Franklin	\$0	\$20	\$60	\$90
Fulton	\$80	\$95	\$135	Not Offered
Gibson	\$80	\$95	\$135	Not Offered
Grant	\$80	\$95	\$135	Not Offered
Hamilton	\$45	\$60	\$100	\$135
Hancock	\$45	\$60	\$100	\$135
Harrison	\$55	\$70	\$110	\$145
Hendricks	\$45	\$60	\$100	\$135
Henry	\$80	\$95	\$135	Not Offered
Huntington	\$0	\$20	\$60	\$90
Jackson	\$55	\$70	\$110	\$145
Jay	\$0	\$20	\$60	\$90
Jefferson	\$80	\$95	\$135	Not Offered
Jennings	\$80	\$95	\$135	Not Offered
Johnson	\$45	\$60	\$100	\$135
Kosciusko	\$0	\$20	\$60	\$90
Lagrange	\$55	\$70	\$110	\$145
Lawrence	\$80	\$95	\$135	Not Offered
Madison	\$45	\$60	\$100	\$135

## State/County Premium Service Area Chart

State/County	CIGNA Medicare Access Plan One (PFFS)	CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
Marion	\$45	\$60	\$100	\$135
Marshall	\$80	\$95	\$135	Not Offered
Martin	\$80	\$95	\$135	Not Offered
Monroe	\$55	\$70	\$110	\$145
Montgomery	\$80	\$95	\$135	Not Offered
Morgan	\$45	\$60	\$100	\$135
Noble	\$0	\$20	\$60	\$90
Ohio	\$55	\$70	\$110	\$145
Orange	\$80	\$95	\$135	Not Offered
Owen	\$80	\$95	\$135	Not Offered
Porter	\$55	\$70	\$110	\$145
Posey	\$80	\$95	\$135	Not Offered
Putnam	\$45	\$60	\$100	\$135
Randolph	\$80	\$95	\$135	Not Offered
Ripley	\$80	\$95	\$135	Not Offered
Rush	\$80	\$95	\$135	Not Offered
Scott	\$45	\$60	\$100	\$135
Shelby	\$45	\$60	\$100	\$135
St. Joseph	\$55	\$70	\$110	\$145
Switzerland	\$80	\$95	\$135	Not Offered
Union	\$80	\$95	\$135	Not Offered
Vanderburgh	\$80	\$95	\$135	Not Offered
Wabash	\$0	\$20	\$60	\$90
Warrick	\$80	\$95	\$135	Not Offered
Washington	\$55	\$70	\$110	\$145
Wayne	\$80	\$95	\$135	Not Offered
Wells	\$0	\$20	\$60	\$90
Whitley	\$0	\$20	\$60	\$90
<b>MASSACHUSETTS</b>				
Bristol	\$55	\$70	\$110	\$145
Dukes	\$80	\$95	\$135	Not Offered
Essex	\$55	\$70	\$110	\$145
Franklin	\$0	\$20	\$60	\$90
Hampden	\$0	\$20	\$60	\$90
Hampshire	\$0	\$20	\$60	\$90
Middlesex	\$0	\$20	\$60	\$90

## State/County Premium Service Area Chart

State/County	CIGNA Medicare Access Plan One (PFFS)	CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
Norfolk	\$45	\$60	\$100	\$135
Plymouth	\$55	\$70	\$110	\$145
Suffolk	\$0	\$20	\$60	\$90
Worcester	\$55	\$70	\$110	\$145
<b>MISSOURI</b>				
Adair	\$0	\$20	\$60	\$90
Andrew	\$80	\$95	\$135	Not Offered
Atchison	\$80	\$95	\$135	Not Offered
Audrain	\$45	\$60	\$100	\$135
Barry	\$80	\$95	\$135	Not Offered
Barton	\$80	\$95	\$135	Not Offered
Bates	\$0	\$20	\$60	\$90
Benton	\$80	\$95	\$135	Not Offered
Bollinger	\$55	\$70	\$110	\$145
Boone	\$0	\$20	\$60	\$90
Buchanan	\$80	\$95	\$135	Not Offered
Butler	\$80	\$95	\$135	Not Offered
Caldwell	\$0	\$20	\$60	\$90
Callaway	\$45	\$60	\$100	\$135
Camden	\$80	\$95	\$135	Not Offered
Cape Girardeau	\$80	\$95	\$135	Not Offered
Carroll	\$80	\$95	\$135	Not Offered
Carter	\$80	\$95	\$135	Not Offered
Cass	\$0	\$20	\$60	\$90
Cedar	\$55	\$70	\$110	\$145
Chariton	\$80	\$95	\$135	Not Offered
Christian	\$0	\$20	\$60	\$90
Clark	\$0	\$20	\$60	\$90
Clay	\$0	\$20	\$60	\$90
Clinton	\$0	\$20	\$60	\$90
Cole	\$45	\$60	\$100	\$135
Cooper	\$0	\$20	\$60	\$90
Crawford	\$80	\$95	\$135	Not Offered
Dade	\$45	\$60	\$100	\$135
Dallas	\$0	\$20	\$60	\$90
Daviess	\$80	\$95	\$135	Not Offered

## State/County Premium Service Area Chart

State/County	CIGNA Medicare Access Plan One (PFFS)	CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
Dekalb	\$80	\$95	\$135	Not Offered
Dent	\$80	\$95	\$135	Not Offered
Douglas	\$80	\$95	\$135	Not Offered
Dunklin	\$80	\$95	\$135	Not Offered
Franklin	\$0	\$20	\$60	\$90
Gasconade	\$80	\$95	\$135	Not Offered
Gentry	\$80	\$95	\$135	Not Offered
Greene	\$0	\$20	\$60	\$90
Grundy	\$80	\$95	\$135	Not Offered
Harrison	\$80	\$95	\$135	Not Offered
Henry	\$80	\$95	\$135	Not Offered
Hickory	\$80	\$95	\$135	Not Offered
Holt	\$80	\$95	\$135	Not Offered
Howard	\$0	\$20	\$60	\$90
Howell	\$0	\$20	\$60	\$90
Iron	\$45	\$60	\$100	\$135
Jackson	\$0	\$20	\$60	\$90
Jasper	\$80	\$95	\$135	Not Offered
Jefferson	\$0	\$20	\$60	\$90
Johnson	\$45	\$60	\$100	\$135
Knox	\$55	\$70	\$110	\$145
Laclede	\$45	\$60	\$100	\$135
Lafayette	\$0	\$20	\$60	\$90
Lawrence	\$80	\$95	\$135	Not Offered
Lewis	\$80	\$95	\$135	Not Offered
Lincoln	\$0	\$20	\$60	\$90
Linn	\$80	\$95	\$135	Not Offered
Livingston	\$80	\$95	\$135	Not Offered
Macon	\$80	\$95	\$135	Not Offered
Madison	\$55	\$70	\$110	\$145
Maries	\$55	\$70	\$110	\$145
Marion	\$0	\$20	\$60	\$90
McDonald	\$0	\$20	\$60	\$90
Mercer	\$80	\$95	\$135	Not Offered
Miller	\$55	\$70	\$110	\$145
Mississippi	\$80	\$95	\$135	Not Offered

## State/County Premium Service Area Chart

State/County	CIGNA Medicare Access Plan One (PFFS)	CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
Moniteau	\$45	\$60	\$100	\$135
Monroe	\$80	\$95	\$135	Not Offered
Montgomery	\$80	\$95	\$135	Not Offered
Morgan	\$80	\$95	\$135	Not Offered
New Madrid	\$80	\$95	\$135	Not Offered
Newton	\$55	\$70	\$110	\$145
Nodaway	\$80	\$95	\$135	Not Offered
Oregon	\$0	\$20	\$60	\$90
Osage	\$45	\$60	\$100	\$135
Ozark	\$45	\$60	\$100	\$135
Pemiscot	\$80	\$95	\$135	Not Offered
Perry	\$80	\$95	\$135	Not Offered
Pettis	\$0	\$20	\$60	\$90
Phelps	\$55	\$70	\$110	\$145
Pike	\$80	\$95	\$135	Not Offered
Platte	\$0	\$20	\$60	\$90
Polk	\$0	\$20	\$60	\$90
Pulaski	\$55	\$70	\$110	\$145
Putnam	\$55	\$70	\$110	\$145
Ralls	\$0	\$20	\$60	\$90
Randolph	\$0	\$20	\$60	\$90
Ray	\$0	\$20	\$60	\$90
Reynolds	\$80	\$95	\$135	Not Offered
Ripley	\$80	\$95	\$135	Not Offered
Sainte Genevieve	\$80	\$95	\$135	Not Offered
Saline	\$0	\$20	\$60	\$90
Schuyler	\$0	\$20	\$60	\$90
Scotland	\$80	\$95	\$135	Not Offered
Scott	\$80	\$95	\$135	Not Offered
Shannon	\$80	\$95	\$135	Not Offered
Shelby	\$80	\$95	\$135	Not Offered
St. Charles	\$0	\$20	\$60	\$90
St. Clair	\$80	\$95	\$135	Not Offered
St. Francois	\$80	\$95	\$135	Not Offered
St. Louis	\$0	\$20	\$60	\$90
St. Louis City	\$0	\$20	\$60	\$90

## State/County Premium Service Area Chart

State/County	CIGNA Medicare Access Plan One (PFFS)	CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
Stoddard	\$80	\$95	\$135	Not Offered
Stone	\$80	\$95	\$135	Not Offered
Sullivan	\$55	\$70	\$110	\$145
Taney	\$80	\$95	\$135	Not Offered
Texas	\$55	\$70	\$110	\$145
Vernon	\$45	\$60	\$100	\$135
Warren	\$0	\$20	\$60	\$90
Washington	\$80	\$95	\$135	Not Offered
Wayne	\$80	\$95	\$135	Not Offered
Webster	\$0	\$20	\$60	\$90
Worth	\$80	\$95	\$135	Not Offered
Wright	\$0	\$20	\$60	\$90
<b>NEW HAMPSHIRE</b>				
Belknap	\$80	\$95	\$135	Not Offered
Carroll	\$80	\$95	\$135	Not Offered
Cheshire	\$80	\$95	\$135	Not Offered
Hillsboro	\$0	\$20	\$60	\$90
Merrimack	\$0	\$20	\$60	\$90
Rockingham	\$0	\$20	\$60	\$90
Strafford	\$0	\$20	\$60	\$90
Sullivan	\$80	\$95	\$135	Not Offered
<b>OHIO</b>				
Adams	\$80	\$95	\$135	Not Offered
Ashland	\$55	\$70	\$110	\$145
Ashtabula	\$55	\$70	\$110	\$145
Auglaize	\$80	\$95	\$135	Not Offered
Belmont	\$80	\$95	\$135	Not Offered
Brown	\$45	\$60	\$100	\$135
Butler	\$45	\$60	\$100	\$135
Carroll	\$45	\$60	\$100	\$135
Champaign	\$80	\$95	\$135	Not Offered
Clark	\$45	\$60	\$100	\$135
Clermont	\$45	\$60	\$100	\$135
Clinton	\$80	\$95	\$135	Not Offered
Columbiana	\$45	\$60	\$100	\$135
Coshocton	\$80	\$95	\$135	Not Offered

## State/County Premium Service Area Chart

State/County	CIGNA Medicare Access Plan One (PFFS)	CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
Cuyahoga	\$55	\$70	\$110	\$145
Darke	\$80	\$95	\$135	Not Offered
Delaware	\$45	\$60	\$100	\$135
Erie	\$55	\$70	\$110	\$145
Fairfield	\$45	\$60	\$100	\$135
Fayette	\$80	\$95	\$135	Not Offered
Franklin	\$45	\$60	\$100	\$135
Fulton	\$55	\$70	\$110	\$145
Geauga	\$55	\$70	\$110	\$145
Greene	\$45	\$60	\$100	\$135
Guernsey	\$80	\$95	\$135	Not Offered
Hamilton	\$45	\$60	\$100	\$135
Hancock	\$80	\$95	\$135	Not Offered
Henry	\$80	\$95	\$135	Not Offered
Holmes	\$0	\$20	\$60	\$90
Huron	\$80	\$95	\$135	Not Offered
Jefferson	\$45	\$60	\$100	\$135
Knox	\$80	\$95	\$135	Not Offered
Lake	\$55	\$70	\$110	\$145
Lawrence	\$80	\$95	\$135	Not Offered
Licking	\$45	\$60	\$100	\$135
Lorain	\$55	\$70	\$110	\$145
Lucas	\$55	\$70	\$110	\$145
Madison	\$45	\$60	\$100	\$135
Mahoning	\$45	\$60	\$100	\$135
Marion	\$0	\$20	\$60	\$90
Medina	\$55	\$70	\$110	\$145
Mercer	\$80	\$95	\$135	Not Offered
Miami	\$45	\$60	\$100	\$135
Monroe	\$80	\$95	\$135	Not Offered
Montgomery	\$45	\$60	\$100	\$135
Morgan	\$80	\$95	\$135	Not Offered
Muskingum	\$45	\$60	\$100	\$135
Noble	\$80	\$95	\$135	Not Offered
Ottawa	\$55	\$70	\$110	\$145
Perry	\$80	\$95	\$135	Not Offered

## State/County Premium Service Area Chart

State/County	CIGNA Medicare Access Plan One (PFFS)	CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
Pickaway	\$45	\$60	\$100	\$135
Portage	\$55	\$70	\$110	\$145
Preble	\$45	\$60	\$100	\$135
Sandusky	\$80	\$95	\$135	Not Offered
Seneca	\$45	\$60	\$100	\$135
Stark	\$45	\$60	\$100	\$135
Summit	\$55	\$70	\$110	\$145
Trumbull	\$45	\$60	\$100	\$135
Tuscarawas	\$80	\$95	\$135	Not Offered
Union	\$45	\$60	\$100	\$135
Van Wert	\$80	\$95	\$135	Not Offered
Warren	\$45	\$60	\$100	\$135
Washington	\$80	\$95	\$135	Not Offered
Wayne	\$80	\$95	\$135	Not Offered
Williams	\$80	\$95	\$135	Not Offered
Wood	\$55	\$70	\$110	\$145
Wyandot	\$80	\$95	\$135	Not Offered
<b>SOUTH CAROLINA</b>				
Abbeville	\$80	\$95	\$135	Not Offered
Aiken	\$0	\$20	\$60	\$90
Allendale	\$55	\$70	\$110	\$145
Anderson	\$0	\$20	\$60	\$90
Bamberg	\$80	\$95	\$135	Not Offered
Barnwell	\$55	\$70	\$110	\$145
Beaufort	\$55	\$70	\$110	\$145
Berkeley	\$45	\$60	\$100	\$135
Calhoun	\$0	\$20	\$60	\$90
Charleston	\$45	\$60	\$100	\$135
Cherokee	\$0	\$20	\$60	\$90
Chester	\$80	\$95	\$135	Not Offered
Chesterfield	\$80	\$95	\$135	Not Offered
Clarendon	\$80	\$95	\$135	Not Offered
Colleton	\$45	\$60	\$100	\$135
Darlington	\$80	\$95	\$135	Not Offered
Dillon	\$80	\$95	\$135	Not Offered
Dorchester	\$45	\$60	\$100	\$135

## State/County Premium Service Area Chart

State/County	CIGNA Medicare Access Plan One (PFFS)	CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
Edgefield	\$0	\$20	\$60	\$90
Fairfield	\$0	\$20	\$60	\$90
Florence	\$80	\$95	\$135	Not Offered
Georgetown	\$80	\$95	\$135	Not Offered
Greenville	\$0	\$20	\$60	\$90
Greenwood	\$80	\$95	\$135	Not Offered
Hampton	\$45	\$60	\$100	\$135
Horry	\$55	\$70	\$110	\$145
Jasper	\$80	\$95	\$135	Not Offered
Kershaw	\$0	\$20	\$60	\$90
Lancaster	\$80	\$95	\$135	Not Offered
Laurens	\$0	\$20	\$60	\$90
Lee	\$80	\$95	\$135	Not Offered
Lexington	\$0	\$20	\$60	\$90
Marion	\$55	\$70	\$110	\$145
Marlboro	\$80	\$95	\$135	Not Offered
McCormick	\$45	\$60	\$100	\$135
Newberry	\$45	\$60	\$100	\$135
Oconee	\$80	\$95	\$135	Not Offered
Orangeburg	\$80	\$95	\$135	Not Offered
Pickens	\$0	\$20	\$60	\$90
Richland	\$0	\$20	\$60	\$90
Saluda	\$0	\$20	\$60	\$90
Spartanburg	\$0	\$20	\$60	\$90
Sumter	\$55	\$70	\$110	\$145
Union	\$80	\$95	\$135	Not Offered
Williamsburg	\$80	\$95	\$135	Not Offered
York	\$0	\$20	\$60	\$90
<b>TENNESSEE</b>				
Anderson	\$0	\$20	\$60	\$90
Bedford	\$80	\$95	\$135	Not Offered
Benton	\$80	\$95	\$135	Not Offered
Bledsoe	\$0	\$20	\$60	\$90
Blount	\$0	\$20	\$60	\$90
Bradley	\$80	\$95	\$135	Not Offered
Campbell	\$55	\$70	\$110	\$145

## State/County Premium Service Area Chart

State/County	CIGNA Medicare Access Plan One (PFFS)	CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
Cannon	\$0	\$20	\$60	\$90
Carroll	\$80	\$95	\$135	Not Offered
Carter	\$0	\$20	\$60	\$90
Chester	\$80	\$95	\$135	Not Offered
Claiborne	\$55	\$70	\$110	\$145
Clay	\$80	\$95	\$135	Not Offered
Cocke	\$55	\$70	\$110	\$145
Crockett	\$80	\$95	\$135	Not Offered
Cumberland	\$55	\$70	\$110	\$145
Davidson	\$55	\$70	\$110	\$145
Decatur	\$80	\$95	\$135	Not Offered
DeKalb	\$0	\$20	\$60	\$90
Dickson	\$80	\$95	\$135	Not Offered
Dyer	\$80	\$95	\$135	Not Offered
Fayette	\$80	\$95	\$135	Not Offered
Fentress	\$55	\$70	\$110	\$145
Franklin	\$80	\$95	\$135	Not Offered
Gibson	\$80	\$95	\$135	Not Offered
Giles	\$80	\$95	\$135	Not Offered
Grainger	\$55	\$70	\$110	\$145
Greene	\$55	\$70	\$110	\$145
Grundy	\$80	\$95	\$135	Not Offered
Hamblen	\$55	\$70	\$110	\$145
Hamilton	\$55	\$70	\$110	\$145
Hardeman	\$80	\$95	\$135	Not Offered
Hardin	\$55	\$70	\$110	\$145
Hawkins	\$0	\$20	\$60	\$90
Haywood	\$80	\$95	\$135	Not Offered
Henderson	\$80	\$95	\$135	Not Offered
Henry	\$80	\$95	\$135	Not Offered
Hickman	\$80	\$95	\$135	Not Offered
Houston	\$80	\$95	\$135	Not Offered
Humphreys	\$80	\$95	\$135	Not Offered
Jackson	\$0	\$20	\$60	\$90
Jefferson	\$55	\$70	\$110	\$145
Johnson	\$80	\$95	\$135	Not Offered

## State/County Premium Service Area Chart

State/County	CIGNA Medicare Access Plan One (PFFS)	CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
Knox	\$0	\$20	\$60	\$90
Lauderdale	\$80	\$95	\$135	Not Offered
Lewis	\$0	\$20	\$60	\$90
Lincoln	\$80	\$95	\$135	Not Offered
Loudon	\$0	\$20	\$60	\$90
Macon	\$55	\$70	\$110	\$145
Madison	\$80	\$95	\$135	Not Offered
Marion	\$55	\$70	\$110	\$145
Marshall	\$80	\$95	\$135	Not Offered
Maury	\$45	\$60	\$100	\$135
McMinn	\$0	\$20	\$60	\$90
McNairy	\$80	\$95	\$135	Not Offered
Meigs	\$80	\$95	\$135	Not Offered
Monroe	\$45	\$60	\$100	\$135
Montgomery	\$80	\$95	\$135	Not Offered
Moore	\$55	\$70	\$110	\$145
Morgan	\$45	\$60	\$100	\$135
Overton	\$0	\$20	\$60	\$90
Perry	\$55	\$70	\$110	\$145
Pickett	\$0	\$20	\$60	\$90
Polk	\$0	\$20	\$60	\$90
Putnam	\$80	\$95	\$135	Not Offered
Rhea	\$55	\$70	\$110	\$145
Roane	\$80	\$95	\$135	Not Offered
Rutherford	\$55	\$70	\$110	\$145
Scott	\$80	\$95	\$135	Not Offered
Sequatchie	\$55	\$70	\$110	\$145
Sevier	\$0	\$20	\$60	\$90
Shelby	\$80	\$95	\$135	Not Offered
Stewart	\$80	\$95	\$135	Not Offered
Sullivan	\$0	\$20	\$60	\$90
Tipton	\$80	\$95	\$135	Not Offered
Trousdale	\$80	\$95	\$135	Not Offered
Unicoi	\$0	\$20	\$60	\$90
Union	\$0	\$20	\$60	\$90
Van Buren	\$80	\$95	\$135	Not Offered

## State/County Premium Service Area Chart

State/County	CIGNA Medicare Access Plan One (PFFS)	CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
Warren	\$45	\$60	\$100	\$135
Washington	\$0	\$20	\$60	\$90
Wayne	\$55	\$70	\$110	\$145
White	\$80	\$95	\$135	Not Offered
Williamson	\$55	\$70	\$110	\$145
Wilson	\$80	\$95	\$135	Not Offered
<b>TEXAS</b>				
Anderson	\$0	\$20	\$60	\$90
Angelina	\$80	\$95	\$135	Not Offered
Aransas	\$80	\$95	\$135	Not Offered
Atascosa	\$0	\$20	\$60	\$90
Austin	\$0	\$20	\$60	\$90
Bastrop	\$80	\$95	\$135	Not Offered
Bee	\$55	\$70	\$110	\$145
Bell	\$80	\$95	\$135	Not Offered
Bexar	\$0	\$20	\$60	\$90
Bowie	\$0	\$20	\$60	\$90
Brazoria	\$0	\$20	\$60	\$90
Brewster	\$80	\$95	\$135	Not Offered
Brooks	\$0	\$20	\$60	\$90
Camp	\$55	\$70	\$110	\$145
Cass	\$80	\$95	\$135	Not Offered
Chambers	\$0	\$20	\$60	\$90
Cherokee	\$80	\$95	\$135	Not Offered
Collin	\$0	\$20	\$60	\$90
Comanche	\$80	\$95	\$135	Not Offered
Cooke	\$80	\$95	\$135	Not Offered
Coryell	\$55	\$70	\$110	\$145
Crane	\$55	\$70	\$110	\$145
Dallas	\$0	\$20	\$60	\$90
De Witt	\$80	\$95	\$135	Not Offered
Delta	\$0	\$20	\$60	\$90
Denton	\$0	\$20	\$60	\$90
Dimmit	\$55	\$70	\$110	\$145
Duval	\$80	\$95	\$135	Not Offered
El Paso	\$45	\$60	\$100	\$135

## State/County Premium Service Area Chart

State/County	CIGNA Medicare Access Plan One (PFFS)	CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
Ellis	\$0	\$20	\$60	\$90
Erath	\$80	\$95	\$135	Not Offered
Fannin	\$80	\$95	\$135	Not Offered
Fort Bend	\$80	\$95	\$135	Not Offered
Franklin	\$80	\$95	\$135	Not Offered
Frio	\$0	\$20	\$60	\$90
Galveston	\$0	\$20	\$60	\$90
Goliad	\$80	\$95	\$135	Not Offered
Grayson	\$80	\$95	\$135	Not Offered
Gregg	\$80	\$95	\$135	Not Offered
Grimes	\$80	\$95	\$135	Not Offered
Guadalupe	\$0	\$20	\$60	\$90
Hardin	\$0	\$20	\$60	\$90
Harris	\$0	\$20	\$60	\$90
Harrison	\$80	\$95	\$135	Not Offered
Hill	\$80	\$95	\$135	Not Offered
Hood	\$0	\$20	\$60	\$90
Hopkins	\$55	\$70	\$110	\$145
Houston	\$80	\$95	\$135	Not Offered
Hudspeth	\$80	\$95	\$135	Not Offered
Hunt	\$0	\$20	\$60	\$90
Jackson	\$80	\$95	\$135	Not Offered
Jasper	\$0	\$20	\$60	\$90
Jefferson	\$0	\$20	\$60	\$90
Jim Wells	\$55	\$70	\$110	\$145
Johnson	\$0	\$20	\$60	\$90
Karnes	\$80	\$95	\$135	Not Offered
Kaufman	\$0	\$20	\$60	\$90
Kenedy	\$0	\$20	\$60	\$90
Kleberg	\$0	\$20	\$60	\$90
La Salle	\$0	\$20	\$60	\$90
Lamar	\$80	\$95	\$135	Not Offered
Leon	\$80	\$95	\$135	Not Offered
Liberty	\$0	\$20	\$60	\$90
Limestone	\$80	\$95	\$135	Not Offered
Live Oak	\$80	\$95	\$135	Not Offered

## State/County Premium Service Area Chart

State/County	CIGNA Medicare Access Plan One (PFFS)	CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
Loving	\$0	\$20	\$60	\$90
Marion	\$80	\$95	\$135	Not Offered
Maverick	\$45	\$60	\$100	\$135
McMullen	\$80	\$95	\$135	Not Offered
Montague	\$55	\$70	\$110	\$145
Montgomery	\$0	\$20	\$60	\$90
Morris	\$0	\$20	\$60	\$90
Navarro	\$80	\$95	\$135	Not Offered
Newton	\$0	\$20	\$60	\$90
Nueces	\$45	\$60	\$100	\$135
Orange	\$0	\$20	\$60	\$90
Panola	\$80	\$95	\$135	Not Offered
Parker	\$0	\$20	\$60	\$90
Polk	\$80	\$95	\$135	Not Offered
Presidio	\$45	\$60	\$100	\$135
Rains	\$0	\$20	\$60	\$90
Red River	\$80	\$95	\$135	Not Offered
Reeves	\$80	\$95	\$135	Not Offered
Rockwall	\$0	\$20	\$60	\$90
Rusk	\$80	\$95	\$135	Not Offered
San Jacinto	\$0	\$20	\$60	\$90
San Patricio	\$55	\$70	\$110	\$145
Shelby	\$80	\$95	\$135	Not Offered
Smith	\$80	\$95	\$135	Not Offered
Tarrant	\$0	\$20	\$60	\$90
Titus	\$80	\$95	\$135	Not Offered
Tyler	\$80	\$95	\$135	Not Offered
Upshur	\$80	\$95	\$135	Not Offered
Val Verde	\$55	\$70	\$110	\$145
Van Zandt	\$80	\$95	\$135	Not Offered
Victoria	\$80	\$95	\$135	Not Offered
Waller	\$0	\$20	\$60	\$90
Washington	\$80	\$95	\$135	Not Offered
Webb	\$80	\$95	\$135	Not Offered
Wharton	\$80	\$95	\$135	Not Offered
Wilson	\$0	\$20	\$60	\$90

## State/County Premium Service Area Chart

State/County	CIGNA Medicare Access Plan One (PFFS)	CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
Winkler	\$80	\$95	\$135	Not Offered
Wise	\$0	\$20	\$60	\$90
Wood	\$45	\$60	\$100	\$135
Zavala	\$0	\$20	\$60	\$90
<b>VERMONT</b>				
Addison	\$45	\$60	\$100	\$135
Bennington	\$45	\$60	\$100	\$135
Caledonia	\$45	\$60	\$100	\$135
Chittenden	\$45	\$60	\$100	\$135
Essex	\$45	\$60	\$100	\$135
Franklin	\$45	\$60	\$100	\$135
Grand Isle	\$45	\$60	\$100	\$135
Lamoille	\$45	\$60	\$100	\$135
Orange	\$45	\$60	\$100	\$135
Orleans	\$45	\$60	\$100	\$135
Rutland	\$45	\$60	\$100	\$135
Washington	\$45	\$60	\$100	\$135
Windham	\$45	\$60	\$100	\$135
Windsor	\$45	\$60	\$100	\$135
<b>WASHINGTON</b>				
Asotin	\$80	\$95	\$135	Not Offered
Benton	\$80	\$95	\$135	Not Offered
Chelan	\$80	\$95	\$135	Not Offered
Clallam	\$55	\$70	\$110	\$145
Clark	\$0	\$20	\$60	\$90
Columbia	\$80	\$95	\$135	Not Offered
Cowlitz	\$55	\$70	\$110	\$145
Douglas	\$80	\$95	\$135	Not Offered
Franklin	\$0	\$20	\$60	\$90
Grant	\$80	\$95	\$135	Not Offered
Grays Harbor	\$80	\$95	\$135	Not Offered
Island	\$0	\$20	\$60	\$90
Jefferson	\$80	\$95	\$135	Not Offered
King	\$0	\$20	\$60	\$90
Kitsap	\$0	\$20	\$60	\$90
Kittitas	\$0	\$20	\$60	\$90

## State/County Premium Service Area Chart

State/County	CIGNA Medicare Access Plan One (PFFS)	CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
Klickitat	\$80	\$95	\$135	Not Offered
Lewis	\$80	\$95	\$135	Not Offered
Mason	\$80	\$95	\$135	Not Offered
Okanogan	\$80	\$95	\$135	Not Offered
Pend Oreille	\$80	\$95	\$135	Not Offered
Pierce	\$0	\$20	\$60	\$90
San Juan	\$55	\$70	\$110	\$145
Skagit	\$80	\$95	\$135	Not Offered
Skamania	\$80	\$95	\$135	Not Offered
Snohomish	\$0	\$20	\$60	\$90
Spokane	\$0	\$20	\$60	\$90
Stevens	\$80	\$95	\$135	Not Offered
Thurston	\$0	\$20	\$60	\$90
Wahkiakum	\$45	\$60	\$100	\$135
Walla Walla	\$55	\$70	\$110	\$145
Whatcom	\$55	\$70	\$110	\$145
Yakima	\$0	\$20	\$60	\$90
<b>WEST VIRGINIA</b>				
Barbour	\$55	\$70	\$110	\$145
Berkeley	\$0	\$20	\$60	\$90
Boone	\$0	\$20	\$60	\$90
Braxton	\$0	\$20	\$60	\$90
Brooke	\$80	\$95	\$135	Not Offered
Cabell	\$45	\$60	\$100	\$135
Calhoun	\$45	\$60	\$100	\$135
Clay	\$0	\$20	\$60	\$90
Doddridge	\$0	\$20	\$60	\$90
Fayette	\$0	\$20	\$60	\$90
Gilmer	\$45	\$60	\$100	\$135
Grant	\$0	\$20	\$60	\$90
Greenbrier	\$55	\$70	\$110	\$145
Hampshire	\$45	\$60	\$100	\$135
Hancock	\$80	\$95	\$135	Not Offered
Hardy	\$0	\$20	\$60	\$90
Harrison	\$0	\$20	\$60	\$90
Jackson	\$55	\$70	\$110	\$145

## State/County Premium Service Area Chart

State/County	CIGNA Medicare Access Plan One (PFFS)	CIGNA Medicare Access Plus Rx Plan Two (PFFS)	CIGNA Medicare Access Plan Three (PFFS)	CIGNA Medicare Access Plus Rx Plan Four (PFFS)
Jefferson	\$55	\$70	\$110	\$145
Kanawha	\$0	\$20	\$60	\$90
Lewis	\$0	\$20	\$60	\$90
Lincoln	\$0	\$20	\$60	\$90
Logan	\$80	\$95	\$135	Not Offered
Marion	\$80	\$95	\$135	Not Offered
Marshall	\$80	\$95	\$135	Not Offered
Mason	\$80	\$95	\$135	Not Offered
McDowell	\$55	\$70	\$110	\$145
Mercer	\$55	\$70	\$110	\$145
Mingo	\$80	\$95	\$135	Not Offered
Monongalia	\$80	\$95	\$135	Not Offered
Monroe	\$0	\$20	\$60	\$90
Morgan	\$80	\$95	\$135	Not Offered
Nicholas	\$0	\$20	\$60	\$90
Ohio	\$0	\$20	\$60	\$90
Pendleton	\$0	\$20	\$60	\$90
Pleasants	\$45	\$60	\$100	\$135
Pocahontas	\$80	\$95	\$135	Not Offered
Preston	\$80	\$95	\$135	Not Offered
Putnam	\$0	\$20	\$60	\$90
Raleigh	\$80	\$95	\$135	Not Offered
Randolph	\$80	\$95	\$135	Not Offered
Ritchie	\$45	\$60	\$100	\$135
Roane	\$45	\$60	\$100	\$135
Summers	\$80	\$95	\$135	Not Offered
Taylor	\$80	\$95	\$135	Not Offered
Tucker	\$55	\$70	\$110	\$145
Tyler	\$45	\$60	\$100	\$135
Upshur	\$0	\$20	\$60	\$90
Wayne	\$0	\$20	\$60	\$90
Webster	\$55	\$70	\$110	\$145
Wetzel	\$45	\$60	\$100	\$135
Wirt	\$80	\$95	\$135	Not Offered
Wood	\$80	\$95	\$135	Not Offered
Wyoming	\$80	\$95	\$135	Not Offered

# Notes

# Notes

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