



August 2017

Cigna Member Transition
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Date: 8/1/2017

To: Any Providers with Current Authorization from Cigna Health Plan

RE: Cigna Transition to CountyCare

Dear Providers,

Effective 8/1/17, Cigna HealthSpring will no longer be participating in the Illinois Medicaid Integrated Care Program. As a result, CountyCare is welcoming 660 new members to our health plan. Approximately 130 of these members have existing Prior Authorizations with Cigna Healthspring. CountyCare will be honoring these current authorizations.

How will this change affect me? You will need to provide services in accordance with the guidelines set forth in the authorization notification to ensure that there is no disruption in member care and/or reimbursement in services.

How does this change affect my patients? If you are an in-network provider with CountyCare, current and open authorizations for services issued prior to the transition period will be honored by CountyCare.

If you are not contracted with CountyCare, your patients, except for prenatal patients discussed below, will be transitioned to an in-network provider within the next 90 days. Please assist your patients by providing your recommendations as well as documents regarding the care you have provided and your treatment plan(s).

Prenatal patients who have initiated care with an out-of-network provider may continue care for the remainder of the pregnancy as well as postpartum follow up. If you are one of the out-of-network prenatal care providers, please ensure that all providers and facilities involved in the care submit requests for authorizations to CountyCare as soon as possible.

Where can I find a listing of participating CountyCare providers? A list of participating CountyCare providers is available on our webpage: <http://www.countycare.com/find-a-provider> or by calling CountyCare Provider Relations at (312) 864-8200.



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What do I do as an out-of-network provider if additional authorizations are needed? In instances where a CountyCare member is receiving ongoing treatment and it is not in the best interest of the member to be transitioned upon the expiration of the current authorization, the current out-of-network provider must submit a request for a new authorization along with clinical information, including a treatment plan, to CountyCare's UM Department for consideration. Please include in your request that this is a "Continuity of Care" request for the member.

You can complete a request for authorization three ways:

- Directly in the CountyCare secure provider portal (for in-network providers with login required),
- By downloading a prior authorization request form from our website at <http://www.countycare.com/providers/prior-authorizations> and faxing it back to us at the numbers listed, or,
- By calling our UM Department at (312) 864-8200, option 4.

What resources are available to assist Providers through this transition period? Please feel free to contact Provider Services, UM or Care Management to assist you.

- Care Management: (312) 864-8200 - Option 5 then 6. You are also welcome to contact care management teams directly by following the steps on the Find Your Member's Care Manager page of our website: <http://www.countycare.com/providers/find-your-case-manager>
- Provider Services: (312) 864-8200 - Option 6.
- UM Department: (312) 864-8200 - Option 4.

How can I become a CountyCare contracted provider? CountyCare is not currently offering new provider contracts pending the outcome of the Medicaid managed care procurement by the IL Department of Healthcare and Family Services. If you have a special or specific circumstance that you'd like to be considered, please contact Daujuana Paramore in Provider Relations at (312) 864-0921 or dparamore@cookcountyhhs.org.

Where can I find a copy of the provider manual? CountyCare's provider manual is available on our website at <http://www.countycare.com/providers/provider-manual>. If you have further questions after reviewing the provider manual please contact Provider Services at (312) 864-8200.

How do I submit claims for services? Please reference the Provider Billing Manual and other Billing Resources available at <http://www.countycare.com/providers/provider-billing-resources>.

THANK YOU!