

YOUR PHARMACY BENEFITS



A prescription drug program that integrates with your medical plan.

With this program, you have access to over 65,000 participating pharmacies¹ across the country, as well as a convenient home delivery drug program.

How your pharmacy coverage works

Present your prescription ID card to the pharmacist, it contains information the pharmacist needs to process your prescription. When you go to a network pharmacy to fill a prescription, what you pay will be determined based on your plan and the amount of your annual deductible (the amount you pay before your plan starts to pay). Once your deductible is met, you will only pay a portion of the discounted price, specified by your plan's copay or coinsurance level. Your plan also allows you to access Cigna Home Delivery Pharmacy, which gives you the convenience of receiving prescriptions right at your doorstep.

What you should know about generics

With the same active ingredients at the same dosage and strength as brand-name drugs, generic drugs are an affordable alternative to higher-priced, brand-name medications. In fact, brand-name drugs may cost up to two-and-a-half times more than their generic equivalents.⁴ The U.S. Food and Drug Administration reviews and approves both brand-name and generic medications before they are marketed or sold in the United States.

For more information, call the number on the back of your ID card or visit myCigna.com where you can search for an in-network pharmacy, print a Cigna Home Delivery Pharmacy order form, estimate prescription drug costs and much more.

1. As of August 2017. Subject to change.

2. For most maintenance medications. Some limitations may apply. Contact Cigna for details.

3. Specialty medications are typically limited to a 30-day supply. Please check your plan details for more information.

4. U.S. Food and Drug Administration (FDA), Generic Drug Facts, as of 9/13/17.

Together, all the way.®



Offered by Cigna Health and Life Insurance Company.

Health benefit plans vary, but in general to be eligible for coverage a drug must be approved by the Food and Drug Administration (FDA), prescribed by a health care professional, purchased from a licensed pharmacy and medically necessary. If your plan provides coverage for certain prescription drugs with no cost-share, you may be required to use an in-network pharmacy to fill the prescription. If you use a pharmacy that does not participate in your plan's network, your prescription may not be covered, or reimbursement may be limited by your plan's copayment, coinsurance or deductible requirements. Refer to your plan documents for costs and complete details of your plan's prescription drug coverage.

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