

2025 Cigna Medicare Products and Benefits

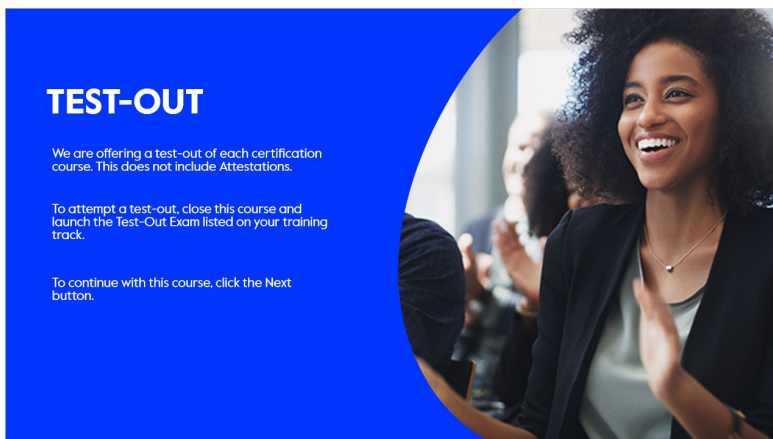
1. Welcome

1.1 2025 Products and Benefits Title Slide



Notes:

1.2 Test Out



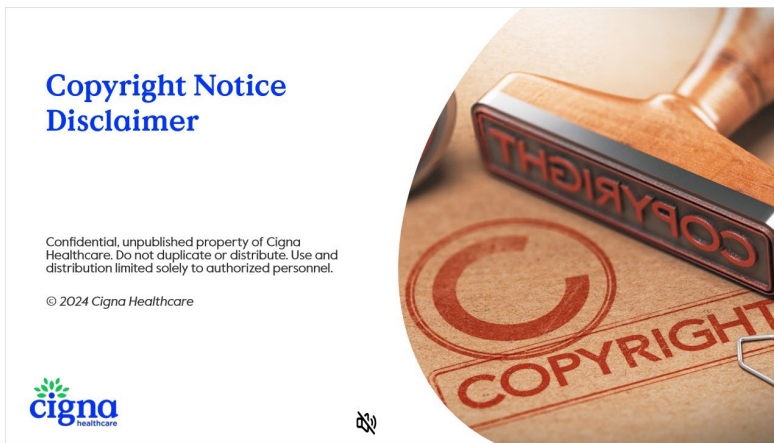
Notes:

We are offering all our valued agents an option to test-out of each of our certification courses. The test out does not include Attestations.

If you want to attempt the test out, please close out of this course and launch the Test-Out Exam listed on your training track.

If you have already attempted to test out and you were unsuccessful or if you would rather not use that option, please click the next button to continue.



1.3 Copyright



**Copyright Notice
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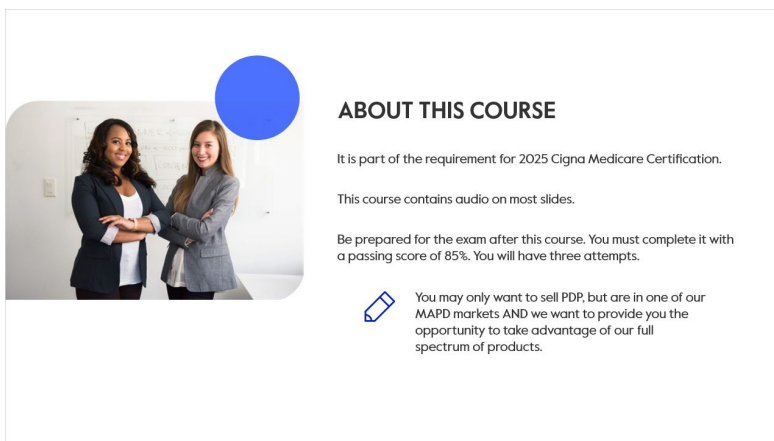
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The slide features a background image of a wooden gavel resting on a document with a large red 'C' and the word 'COPYRIGHT' stamped in red ink. The Cigna logo is in the bottom left corner.

1.4 About Course




ABOUT THIS COURSE


It is part of the requirement for 2025 Cigna Medicare Certification.

This course contains audio on most slides.

Be prepared for the exam after this course. You must complete it with a passing score of 85%. You will have three attempts.



You may only want to sell PDP, but are in one of our MAPD markets AND we want to provide you the opportunity to take advantage of our full spectrum of products.



The slide includes a photograph of two women in business attire standing in front of a whiteboard. A blue circle is overlaid on the image.

Notes:

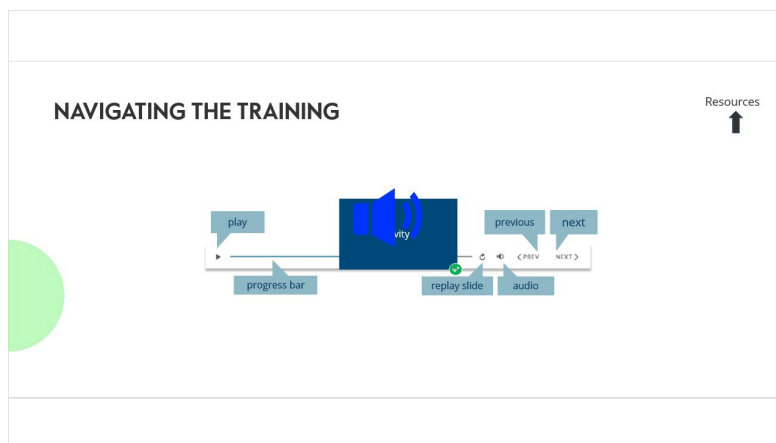
Welcome to Cigna Medicare 2025 Products and Benefits!

This course is one of the requirements for our 2025 Medicare Certification.

After completing this course, you will need to take the corresponding 15 question exam and pass with a score of 85% or higher.

Before we get started, let's review how to navigate this course....

1.5 Navigation




Notes:

• Navigating the training




- Some slides have audio. Please be prepared to listen to the audio through your computer speaker or headset.
- If you prefer to read the audio script, you may click on the player menu to display the script.
- Some slides have activities, complete the activities before you advance to the next slide.
- You will advance to the next slides by clicking on the **Next** button that looks like a forward arrow.
- The **Previous** and **Next** buttons will be available in the lower right corner of the window to navigate throughout the course.
- You can use the **Progress bar** to replay a slide.
- Some slides have resources you can download during the training. Please click the

Resources link at the top right of the screen to access these documents.

1.6 Your Gains



WHAT YOU WILL LEARN

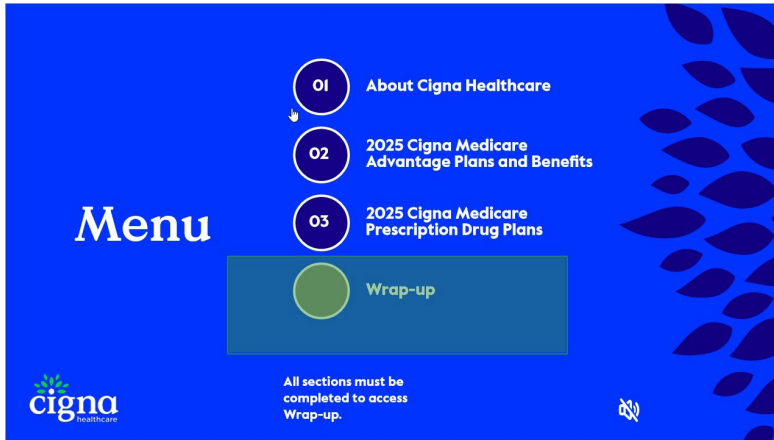
- 
Explain 2025 Cigna Medicare Plan (MAPD) benefits and highlight the value to your customers
- 
Explain our Part D Plan (PDP) benefits
- 
Evaluate which plans can meet individual customer's healthcare needs while hitting all your sales goals

Notes:

We are enthused to reveal how our 2025 Medicare Plans and Benefits will help you stand out in your market. Before we get started, this is what you will learn by completing this course:

- Explain 2025 Cigna Healthcare Plan (MAPD) benefits and highlight the value to customers
-
- Explain our Standalone Part D plan, or PDP benefits
-
- Evaluate which plans can meet customers' healthcare needs while also hitting all your sales goals

1.7 Main Menu




Notes:

2. About Cigna Medicare

2.1 About Cigna Medicare Section Title



2.2 Mission




Our MISSION

To improve the **health and vitality** of those we serve.

We relentlessly challenge ourselves to partner and innovate solutions.

You can be assured each customer you bring into the Cigna Medicare family will be in good hands.

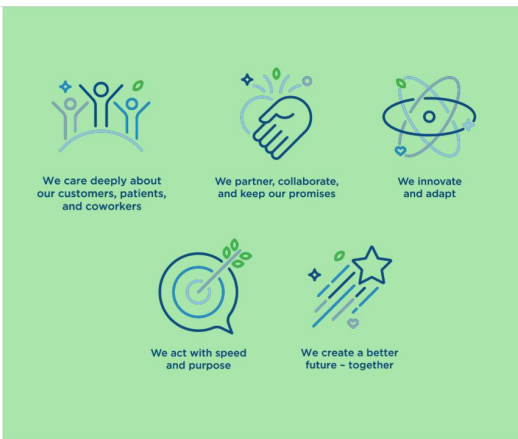


Notes:

As you prepare to sell our products, we want you to keep in mind that you are partnering with a healthcare company committed to improving the health and vitality of every customer you will enroll in our plans. At Cigna Healthcare, we relentlessly challenge ourselves to partner and innovate solutions for better health. You can be assured that each customer you bring into the Cigna Medicare family will be in good hands. Powered by our people and brands, we advance our mission to improve the health and vitality of those we serve.


Click Next to see how we achieve our mission.

2.3 Values



Our VALUES

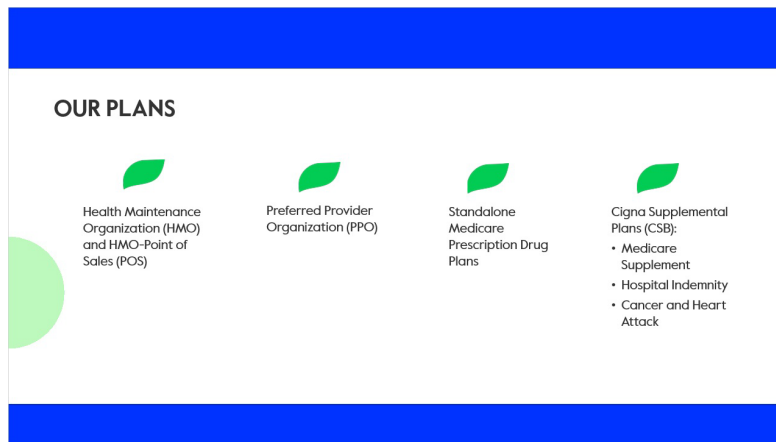
- We care deeply about our customers, patients, and coworkers
- We partner, collaborate, and keep our promises
- We innovate and adapt
- We act with speed and purpose
- We create a better future - together



Notes:

Our values are the core of our culture - they show how all 74,000 of us around the world work together, serve our customers, patients, clients, and communities, and deliver on our mission. These are the ways we apply our values. We encourage and expect all our sales agents, brokers, and partners to reflect these values through their actions while they work with our Medicare customers and partners.

2.4 Our Plans




Notes:

Cigna Healthcare offers a wide range of Medicare products and plans including HMO, and HMO Point of Sale (POS), PPO plans, and Standalone Part D.

Our Cigna Supplemental Benefits (CSB) products include Medicare Supplement, Hospital Indemnity and Cancer and Heart Attack products. With our full product portfolio, our MAPD plans pair well with many of Cigna Supplemental Benefits' plans. The lower costs of our MAPD plans enable customers to purchase additional products while also increasing your customer retention.

As you help Medicare Advantage beneficiaries meet their healthcare needs with our full product portfolio, continue to leverage your consulting skills, and seek to uncover each customer's unique needs, the Cigna Healthcare way.


2.5 About Cigna Medicare Summary



SECTION SUMMARY

- Cigna Medicare mission
- Cigna Medicare values
- Medicare Advantage and Supplemental plans we offer

Please click the Next button to return to the Main Menu and continue to the next section of this course.



Notes:

3. Cigna Medicare Plans and Benefits

3.1 Plans and Benefits



2025 Cigna Medicare Products and Benefits



Notes:

3.2 2023 Benefits Review

2024 BENEFIT REVIEW

If you are not new to selling Cigna Medicare, please review the attestation statement and click the **Submit** button to proceed.

If you are new to selling Cigna Medicare and need to become familiar with our 2024 benefits, click [here](#) to review 2024 plan summary of benefits in your appointed state(s). After your review, return here to review the attestation statement and click the **Submit** button to proceed.

I attest that I have completed Cigna's 2024 certification and/or have reviewed 2024 Products and Benefits information.

Tip: The Resource Center will open in a new window. After downloading the Summary of Benefits for the 2024 plans, you will be offering, you may close that window and resume the course. The check box and submit button are not linked. You can skip the check box and still advance by clicking submit only.

Submit

Resources ↑

Notes:

Do you need to review the 2024 plans because you are not familiar with them? Please click the link and select the market specific category on the Resource Center and download the 2024 Summary of Benefits for plans in your appointed state(s). If you are **not** a new agent and want to skip the review of 2024 plans, please read the statement, click the attestation button, and click Submit.

3.3 Information Pending

INFORMATION PENDING

All the plans and benefits in this course are pending the Center for Medicaid and Medicare (CMS) approval.

You must use the Summary of Benefits of each plan for the most accurate plan information.

Notes:

All the benefits mentioned in this training are pending the Centers for Medicare and Medicaid approval and may change. You will need to rely on the Summary of Benefits of each plan for the most accurate plan information.

3.4 Benefit Key Changes

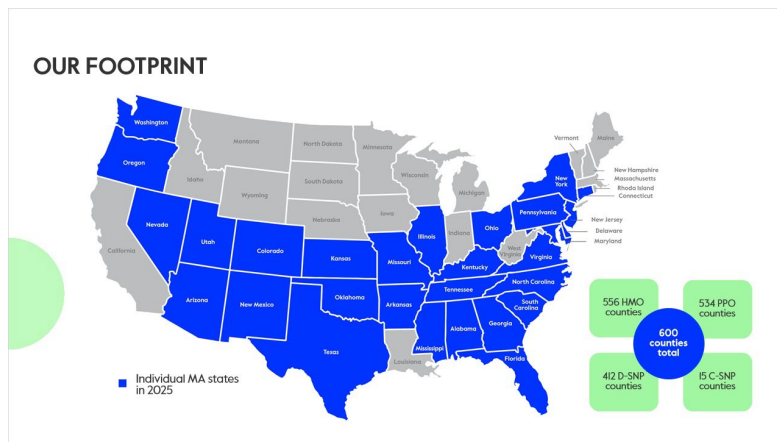
2025 PLAN OVERVIEW

- Most plans offer \$0 premiums
- 98% of plans offer \$0 PCP visits
- More plans with Part B giveback benefit
- Updated ways to earn through Cigna Medicare Advantage Incentives program including eligibility to earn \$200 in rewards and incentives for **all customers**
- All plans offer dental, routine vision, and hearing
- Most plans offer post-discharge meals and fitness
- New innovations on the Cigna Healthy Today card

Notes:

These are the key changes for our 2025 plans and benefits.

3.5 Our Footprint



Notes:

We are continually expanding into new and existing markets making our products available to more customers and providing increased opportunities for you, our agents and brokers. This is the map of our Cigna Medicare footprint. Up next is a section on what we are offering in 2025.

3.6 2025 Portfolio Subtitle



Notes:

3.7 Image + Text



Notes:

At Cigna Healthcare, part of our commitment to our customers' whole health means giving them more ways to get healthier - and stay healthier through supplemental benefits. These are our 2025 supplemental health benefits.

3.8 Cigna Healthy Today Card



Notes:

The Cigna Healthy Today Card is our one-card solution to use multiple supplemental benefit wallets. Wallets in 2025 include these benefits: OTC, a new Living Needs for most D-SNP customers, Pet Care, and Rewards and Incentives. The Cigna Healthy Today card is available to all customers, but benefits and allowances vary by plan. Next are more details about how to use the card...

3.9 Cigna Healthy Today Card

The screenshot shows a page titled "CIGNA HEALTHY TODAY CARD". Under the heading "Benefit allowances", there is a bulleted list of details. To the right of the text is an image of a "Cigna Healthy Today" Visa Debit card. The card displays the number "4000 1234 5678 9010", the expiration date "01/21 03/21", the member name, and the Visa logo. A small note at the bottom of the card reads "VALID ONLY IN THE UNITED STATES". A light green semi-circle is visible on the left side of the page.

Notes:

- As previously mentioned, benefit allowances will be administered through the Cigna Healthy Today card. A pre-activated card will be issued and mailed upon plan

enrollment. Funds will be loaded each quarter and will not roll over to the next quarter. Customers can conveniently access a program website and app to manage their benefits.

3.10 CMAI Key Points

CIGNA MEDICARE INCENTIVE PROGRAM

PROGRAM KEY POINTS

- Provides incentives to MA customers for participating in health and well being activities
- Preventative care and screening is vital. Our goal is keeping customers healthy
- Participation online or by mail
- Retail network of 65k locations. Restrictions on certain items
- **Starting in 2025:**
 - Funds expire at disenrollment or end of calendar year
 - Yearly Health Check-up will no longer be required to earn incentives/rewards



Notes:

The Cigna Medicare Incentive program provides incentives to MA customers for completing important health screenings and engaging in non-clinical healthy activities. The program aims to promote our customers' health and well-being.

Preventive care and screenings are vital to our customers' overall health, and it's our goal to help them stay as healthy as possible.

Customers can participate in this program online or by mail.

There is a retail network of 65k locations. Starting in 2025, funds will expire if the customer disenrolls, or at end of calendar year.



3.11 CMAI How to participate

HOW TO PARTICIPATE

Customers must opt-in to participate.

Opt-in options:

- **New** - Complete generic opt-in form
- **New** - Call customer service
- Personalized opt-in form
- Cigna Medicare customer portal






3.12 CMAI Examples

EXAMPLES OF SOME REWARDS OFFERED

NEW - Health Risk Assessment – D-SNP Only	\$50
Yearly Health Checkup (YHC)	\$30
NEW - YHC Bonus – complete YHC before 9/1 to earn an additional bonus	\$20
Mammogram	\$25
Diabetes management	\$30
NEW - Routine hearing exam	\$20
NEW - Routine vision exam	\$20
NEW - Acute care follow-up	\$20

Plus more exams, screenings, advanced care planning, and customer engagement activities, including new options not listed here. Please contact your local Broker Manager or Producers' University for details.

3.13 Pet Care Allowance

SSBCI PET CARE ALLOWANCE

- Quarterly allowance of \$75 to purchase pet food, clothes, toys, etc. from standalone pet stores, or to pay for vet visits, shots, and medication at a veterinary office
- Benefit on select MA only plans
- Customer must have 1 or more of these qualifying chronic conditions: hearing loss, vision loss, and/or PTSD
- Eligibility determined from code(s) on medical claim



Notes:

The Pet Care Allowance provides our customers with a **quarterly** allowance of \$75 that can be used to purchase pet food, clothes, toys, etc. from standalone pet stores, or to cover vet visits, shots, and medication for pets at a veterinary office.

Benefit will be available on the select MA only plans. Customer must have 1 or more of the following qualifying chronic conditions to be eligible: hearing loss, vision loss, and/or PTSD

-

Eligibility will be determined from code(s) on customer's medical claim.

3.14 OTC



OVER THE COUNTER (OTC) ALLOWANCE

- Access to over 542 over-the-counter (OTC) medications and products including NEW items
- Delivered directly to the customer
- Ordering options: Directly from participating retail vendors or through the Cigna Healthy Today website, or by calling Cigna Healthy Today customer service, or mail

The graphic features a blue header and footer, a green circular element on the left, and a central image of hands holding a pill over a white surface with orange slices.

Notes:

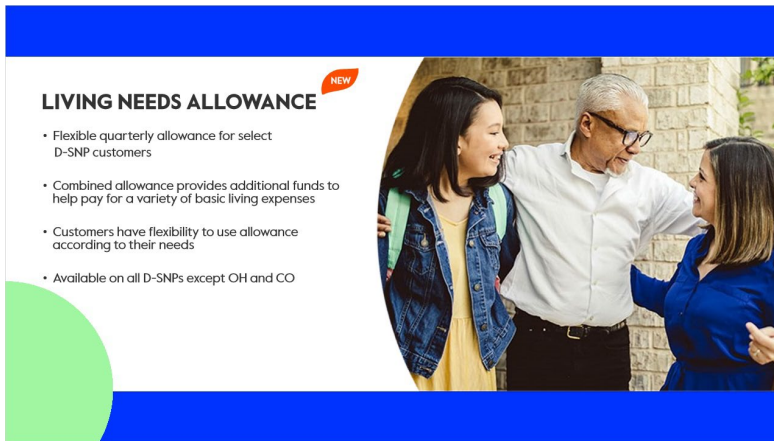
The Cigna Over-The-Counter (OTC) benefit provides a quarterly allowance so our customers can easily access/purchase over 542 OTC medications and products such as vitamins, disposable under pads, bathroom safety rails, grab bars, and much more. New items for 2025 include: portion control plate, handheld mirror, and reusable gloves

Ordering options:

- In-store purchases at participating retail vendors

- Mail-order delivery:
 - Using Cigna Healthy Today website
 - Calling in an order to the Cigna Healthy Today customer service
 - Through our OTC vendor via a mail-in form
 - Mail-orders are limited to one order each month

3.15 Living Needs Allowance



LIVING NEEDS ALLOWANCE ^{NEW}

- Flexible quarterly allowance for select D-SNP customers
- Combined allowance provides additional funds to help pay for a variety of basic living expenses
- Customers have flexibility to use allowance according to their needs
- Available on all D-SNPs except OH and CO

Notes:

The Living Needs Allowance is a NEW flexible quarterly allowance available to select D-SNP customers. This combined allowance provides customers with additional funds to help pay for a variety of basic living expenses. Customers have flexibility to use allowance dollars in a way that best fits their needs. All D-SNPs, except OH and CO markets, offer this wallet. Up next are the Living Needs Allowance wallet categories...

3.16 Living Needs Allowance Wallets

LIVING NEEDS ALLOWANCES – FOUR BENEFITS IN ONE WALLET

Category	Examples
Utility Services	Home gas, electric, water, sanitation, Internet, and cell/phone service
Healthy Groceries	Dairy, meats, bread, grains, produce, fresh/canned fruits and vegetables
Cleaning Supplies	Disinfectant cleaners, detergents, and more
Gas at the Pump and General Transportation	Fuel for vehicles, taxis, bus, and more

Notes:

The new living needs allowance is four benefits in one wallet. The allowance ranges are from \$50-\$350 a quarter, depending upon the plan.

The Utility Services Allowance provides select D-SNP customers with a quarterly allowance that can be used to pay for essential utility services such as home gas, electric, water, sanitation, Internet, and cell/phone service. Customers can make utility payments directly to the merchant, by phone, in-person or online. Customers will not be able to make their utility payments through third party companies such as Walmart, HEB, or other retailers offering a utility payment service.

The Healthy Groceries Allowance can be used to purchase healthy groceries such as dairy, meats, bread/grains, produce, fresh/canned fruits and vegetables, and much more. Customers can use this allowance at participating retailers to make in-store purchases.

The Cleaning Supplies Allowance provides select D-SNP customers with a quarterly allowance that can be used to purchase items such as disinfectant cleaners and detergents, brooms and dustpans, reusable gloves and more. Customers can use participating grocery retailers to make in-store purchases. They can also place online, phone and mail orders through the Cigna Healthy Today catalog.

The General Transportation and Gas at the Pump allowance provides select D-SNP

customers with a quarterly allowance for general transportation and/or for gas for their vehicles. This includes select taxis, railways, and bus lines that accept Visa® payments. Customers can also use the allowance to purchase gas at the pump to fuel their vehicles. Customers cannot purchase gas inside a store.

3.17 Dental Benefits

DENTAL BENEFITS

- Dental benefits on 100% of our plans
- Dental benefits include: preventive, comprehensive, or an allowance, depending on the market

Dental Allowance

- Full dental allowance
- Dental Allowance - In-network only
- In-network/50% out-of-network benefit design

DHMO


- Traditional preventive and comprehensive dental HMO plans
- Four benefit designs including a plan with \$0 customer costs listed on the patient charge

Notes:

3.18 Vision

VISION

- We partner with EyeMed to provide customers with a nationwide network of 21,000+ provider locations plus online options
- Coverage includes routine eye exams and well eye care service plus coverage for hardware (flexible frames, lenses, or contacts)
- 2025 - All plans will offer supplemental routine eye exams, and most plans will offer eyewear allowance





Notes:

Cigna partners with EyeMed Vision to provide our customers with a nationwide network of over 21,000 plus independent provider locations and online options to serve our customers with the highest quality in vision care in most areas in the country. Coverage includes: Routine Eye Exams, including well eye care service consisting of a comprehensive eye exam with refraction (covered when bundled with a routine eye exam), and provides coverage for eyewear. In 2025, all plans will offer supplemental routine eye exams, and most plans will offer eyewear allowance.

3.19 Hearing

HEARING

- Hearing Care Solutions (HCS) provides routine hearing exams/evaluations, fittings, and distribution of hearing aid devices
- ALL plans offer hearing aids at a copay, based on technology level of the hearing aid.
- HCS provides a nationwide network with over 5,000 locations for convenient access to hearing services




Notes:

We partner with Hearing Care Solutions (HCS) to provide easy access to routine

hearing exams/evaluations, fittings, and dispensing of hearing aid devices. HCS provides access to a wide selection of major manufacturers, and a vast number of hearing aid models to our customers. ALL plans offer routine hearing exams and hearing aids at a copay, based on the technology level of the hearing aid. HCS provides a nationwide network with over 5,000 locations for convenient access to hearing services.

3.20 Silver and Fit



SILVER&FIT® EXERCISE AND HEALTHY AGING PROGRAM

- Access to fitness facilities and instructor-led classes, exercise centers, one-on-one telephonic lifestyle coaching, a home fitness kit and up to 2 additional kit options each year
- No cost share for using this benefit when accessing a standard network facility
- Most plans in 2025 will offer this benefit


Notes:

Under the Silver&Fit Exercise and Healthy Aging Program, **most** customers have access to fitness facilities and instructor-led classes, exercise centers, one-on-one telephonic lifestyle coaching, a home fitness kit and up to 2 additional kit options each year so customers can exercise in the comfort of their own home. There is no cost share for utilizing this benefit when accessing a standard network facility. Most plans in 2025 will offer supplemental fitness benefit.

3.21 Home Delivered Meals and ESRD Meals

HOME DELIVERED & ESRD MEALS

- All HMO plans and most PPO plans will offer a supplemental meal benefit in 2025
- We partner with GA Foods, a leader in the meal industry, to create and deliver high quality nutritious meals
- 14 delivered healthy/medical diet frozen meals post release from inpatient hospital stay or skilled nursing facility
- Up to 56 delivered healthy frozen meals to ESRD customers in an ESRD care management program




Notes:

ALL HMO and most PPO plans will offer a supplemental meal benefit in 2025. Home delivered meals are provided through GA Foods, a producer of delicious high quality nutritious meals. This benefit includes 14 delivered healthy medical diet frozen meals post release from an inpatient hospital stay or a skilled nursing facility. Up to 56 delivered healthy frozen meals are provided to ESRD customers in an ESRD care management program.

3.22 Part B Giveback

PART B GIVEBACK

- Rebate towards a Part B premium - administered through the Social Security Administration (SSA)
- SSA deducts Part B Giveback subsidy from the customer's Part B premium
- Up to 90 days for transaction to appear on an enrollee's statement, and retroactive to the 1st day of the plan membership




Notes:

A Part B Giveback offers customers a rebate towards their Part B premium. The program is administered through the Social Security Administration. The SSA deducts

the Part B Giveback subsidy amount from the customer's Part B premium. It can be up to 90 days to for this transaction to appear on an enrollee's statement, and it will be retroactive to the first day of the plan membership.

3.23 Part B Giveback Eligibility




PART B ELIGIBILITY

Who is eligible for Part B	Who is not Eligible for Part B
Beneficiaries who pay their Part B premium are eligible	Beneficiaries who receive Medicaid or other program that provides Part B premium assistance are NOT eligible

Notes:

Here is a bit more on the Part B Giveback. Some customers will not be eligible for this rebate. Beneficiaries who pay their Part B premium are eligible while beneficiaries who receive Medicaid or any other assistance from a program that helps pay their Part B premium are not eligible for the Part B Giveback benefit.

3.24 Transportation



TRANSPORTATION

- We partner with Modivcare, an industry recognized transportation manager, to provide routine nonemergency health-related transportation to and from approved health-related locations within 70 miles
- Transportation covers vans, taxis, wheelchair-equipped vehicles or rideshare service (where available)
- Customers with special needs will be transported by traditional non-emergent medical transportation

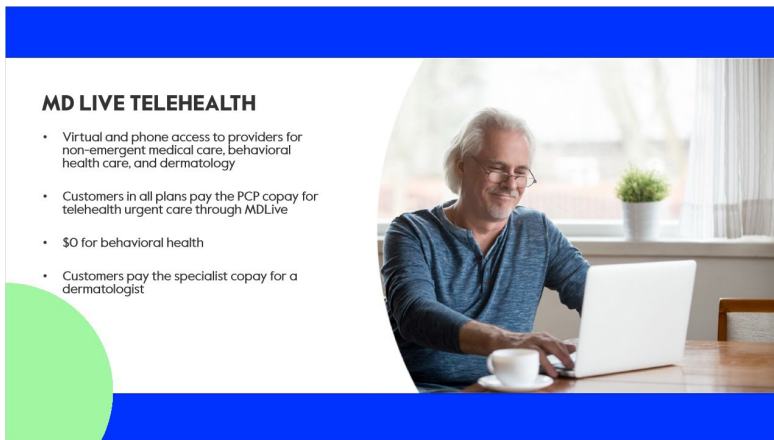
Notes:

We partner with Modivcare, an industry recognized transportation manager, to provide routine health-related transportation coverage for routine non-emergency health-related transportation to and from approved health-related locations within 70 miles. The transportation benefit covers vans, taxis, wheelchair-equipped vehicles or rideshare service (where available).

Customers enrolled in the plans offering this benefit are eligible for the number of one-way trips per year as determined by their plan.

Those who have special needs are offered traditional non-emergent medical transportation with drivers who have vehicles that can accommodate multiple occupants in one vehicle.

3.25 MD Live Telehealth



MD LIVE TELEHEALTH

- Virtual and phone access to providers for non-emergent medical care, behavioral health care, and dermatology
- Customers in all plans pay the PCP copay for telehealth urgent care through MDLive
- \$0 for behavioral health
- Customers pay the specialist copay for a dermatologist

The graphic features a photograph of a man with glasses and a blue shirt sitting at a desk, working on a laptop. A white coffee cup is on the desk. The background shows a window with a plant. The graphic has a blue header and footer, and a green circular element on the left side.

Notes:

MDLive provides our customers with virtual and phone access to providers for non-emergent medical care, behavioral health care, and dermatology.

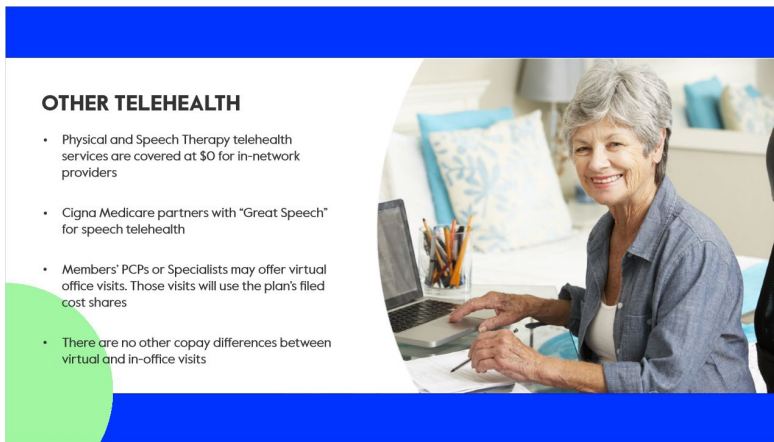
Medical providers can assist our customers with many health issues, including allergies, cough, headache, sore throat, and dermatological concerns.

Behavioral Health services include, but are not limited to, assistance with anxiety,

depression, and PTSD.

Customers in all plans pay the PCP copay for telehealth urgent care through MDLive, \$0 for Behavioral Health, and for dermatology services, members will pay the specialist copay.

3.26 Other Telehealth



OTHER TELEHEALTH

- Physical and Speech Therapy telehealth services are covered at \$0 for in-network providers
- Cigna Medicare partners with "Great Speech" for speech telehealth
- Members' PCPs or Specialists may offer virtual office visits. Those visits will use the plan's filed cost shares
- There are no other copay differences between virtual and in-office visits

The slide features a photograph of an elderly woman with short grey hair, wearing a blue button-down shirt, sitting at a desk and smiling while using a laptop. The background shows a home office setting with a lamp and some papers.

Notes:

Physical and Speech Therapy telehealth services are covered at \$0 for in-network providers. Cigna Medicare partners with Great Speech for speech telehealth. Customers' PCPs or Specialists may offer virtual office visits. Those visits will use the plan's filed cost shares. There are no other copay differences between virtual and in-office visits.

-

3.27 Virtual Companion



COMPANIONSHIP+ PROGRAM

- Our partners at Homethrive help combat social isolation and loneliness by connecting with customers digitally and/or telephonically
- Companionship+ program coordinates group activities and researches local organizations that align to the customer's hobbies and interests
- Assists the customer with researching and scheduling non-clinical support services like transportation, housekeeping, and meal or grocery delivery

Notes:

Homethrive's Virtual Companions combat social isolation and loneliness by connecting with members digitally and/or telephonically through the Companionship+ Program.


The Virtual Companions conduct check-ins with the member, coordinate group activities like virtual games, and research local organizations that align to the customer's hobbies and interests. Additionally, Virtual Companions can assist the customer with researching and scheduling non-clinical support services like transportation, housekeeping, and meal or grocery delivery.

Virtual Companions personalize their approach to each customer's unique situation to make certain the right support, services, and resources are in place to benefit the member long-term. The benefit is available on select plans.

3.28 Carergiver Support

CAREGIVER SUPPORT

- We partner with HomeThrive to deliver a support system for both our customers and their caregivers by providing resources and assistance
- Support is available through all phases of the caregiving journey
- Caregivers work 1:1 with a Caregiver Coach, either telephonically and/or digitally, for help to address caregiver needs

A photograph of a woman in a blue and white striped shirt using a walker, walking alongside a man in a blue sweater in a park setting. The image is partially obscured by a white circular graphic element.


Notes:

We partner with HomeThrive to deliver a support system for both our customers and their caregivers by providing resources and assistance. Support is available through all phases of the caregiving journey. Caregivers will work one on one with a Caregiver Coach, either telephonically and/or digitally, for help to address their caregiving needs. This helps the caregiver with appropriate and timely resources to help them navigate the health care system and to ease the strain of managing care for their loved one while ensuring they take care of themselves.

3.29 Supplemental Acupuncture

SUPPLEMENTAL ACUPUNCTURE

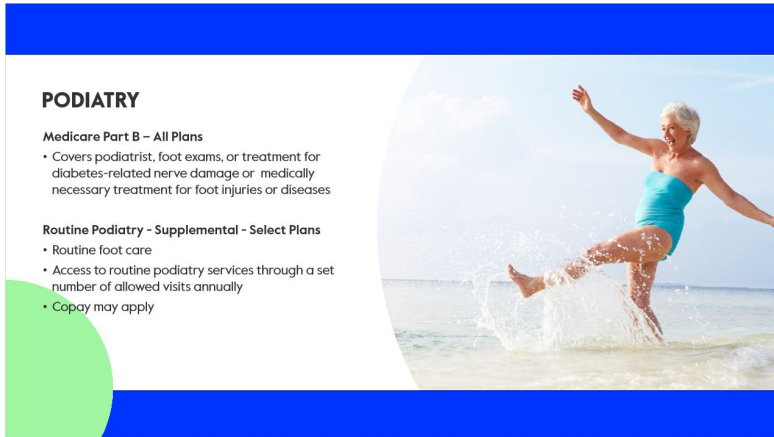
- Reimbursement for supplemental (non-Medicare covered) acupuncture services from a licensed acupuncture provider
- Up to \$300 annually; this is above and beyond what Medicare covers

A photograph of a smiling man with grey hair, wearing a pink shirt and a white towel around his neck, standing outdoors near a white fence. The image is partially obscured by a white circular graphic element.

Notes:

The Supplemental Acupuncture benefit provides customers with a reimbursement for supplemental (non-Medicare covered) acupuncture services from a licensed Acupuncture provider of up to \$300 annually. This is above and beyond what Medicare covers.

3.30 Podiatry



PODIATRY

Medicare Part B – All Plans

- Covers podiatrist, foot exams, or treatment for diabetes-related nerve damage or medically necessary treatment for foot injuries or diseases

Routine Podiatry – Supplemental – Select Plans

- Routine foot care
- Access to routine podiatry services through a set number of allowed visits annually
- Copay may apply

The infographic features a blue header and footer, a white central text area, and a circular image on the right showing a woman in a blue swimsuit jumping joyfully in the ocean. A green semi-circle is on the left side of the white text area.

Notes:

Medicare-Covered Podiatry

Medicare Part B covers foot doctor (podiatrist), foot exams, or treatment if customer has diabetes-related nerve damage or needs medically necessary treatment for foot injuries or diseases. All plans give Medicare-covered podiatry services. Medicare-covered services include:

- Diagnosis and medically necessary treatment of injuries and diseases of the feet such as hammer toe, heel spurs, etc.
- Routine foot care for customers with certain medical conditions affecting the lower limbs.
-

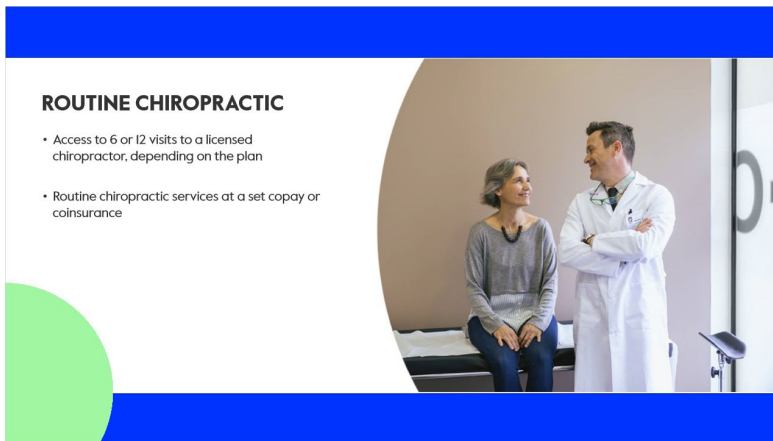
Routine Podiatry Visits – Supplemental – Select Plans

Routine foot care includes:

- Cutting or removing corns and calluses
- Trimming, cutting, or clipping nails
- Hygienic or other preventive maintenance, like cleaning and soaking the feet

Customers will have access to routine podiatry services through a set number of allowed visits annually. A visit copay may apply.

3.31 Chiropractic



ROUTINE CHIROPRACTIC

- Access to 6 or 12 visits to a licensed chiropractor, depending on the plan
- Routine chiropractic services at a set copay or coinsurance

The slide features a photograph of a male chiropractor in a white lab coat standing and talking to a female patient who is sitting on a treatment table. The slide has a blue header and footer, and a green circular graphic element on the left side.

Notes:

This benefit provides customers with access to 6 or 12 visits to a licensed chiropractor, depending on the plan, to receive routine chiropractic services at a set copay or coinsurance amount. This is a supplemental benefit available on select plans.

3.32 Other Supplemental Benefits

OTHER 2025 BENEFITS & PROGRAMS

- Health & Wellness Resource**
Access to video and documents on a variety of health and wellness topics through myCigna.com
- Bathroom Safety**
\$0 copayment for \$1,500 per lifetime combined limit for bathroom safety devices and bathroom safety assessment
- Advance Care Directives**
Voluntary wellness and Healthcare Planning services such as Advance Care Planning services through Koda

Notes:

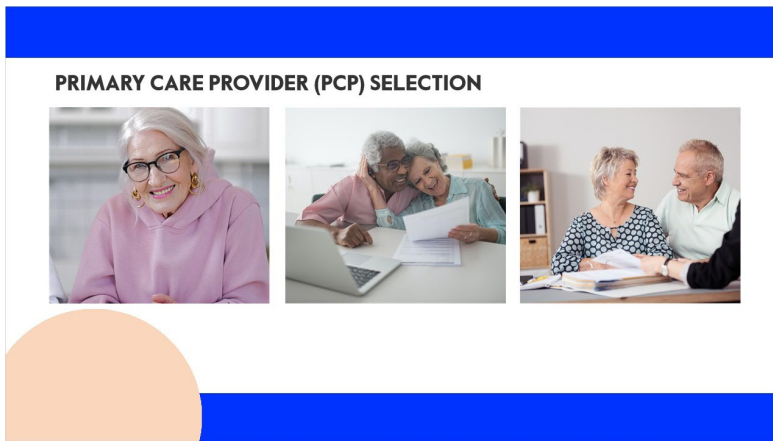
These are other benefits and programs we will offer in 2025:

Health & Wellness Resource offers all customers with access to video and written content on a variety of health and wellness topics through myCigna.com. Some topics include: Wellness and Prevention,, and hundreds more such as common health issues from A-Z.

Bathroom Safety offers all customers a \$0 copayment for \$1,500 per lifetime combined limit for bathroom safety devices and bathroom safety assessment. Items covered must directly assist in the prevention of an accident or injury and installed in bathrooms.

Advance Care Directives provides voluntary wellness and Healthcare Planning services, which includes Advance Care Planning services through Koda.

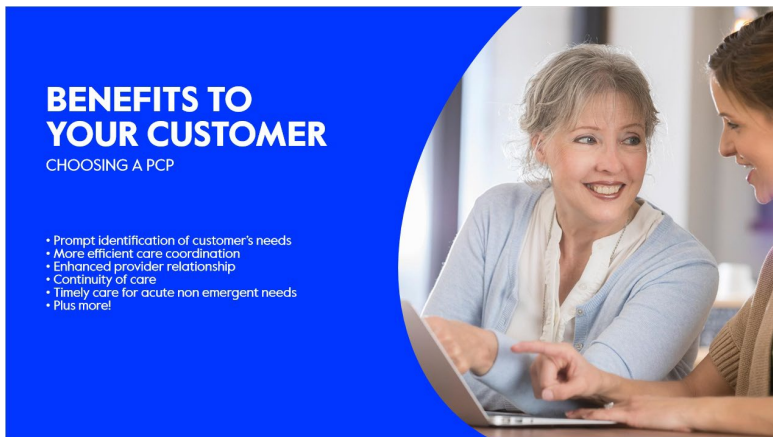
3.33 PCP Selection



Notes:

A primary care provider helps customers get the care they need. When you encourage your customers to select a PCP, this can help them get the most from their plan and increase your retention and referrals. Click next to hear more on the benefits to your customer, you, and how to position selecting PCP, even on a PPO plan.

3.34 Choosing a PCP



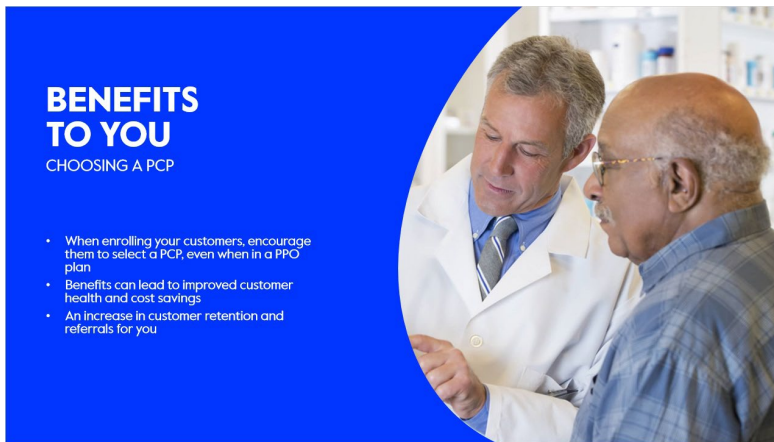
Notes:

The key benefits of choosing a primary care provider (PCP) include:

- Prompt identification of customer's needs

- More efficient care coordination (e.g., help avoid incidents from medications that counter act with other medication)
- Enhanced provider/member relationships
- Continuity of care
- Timely care for acute non emergent needs
- Familiarity with customer's health (i.e., keeps track of preventative care such as colonoscopy, bone density screening, etc.)

3.35 Choosing a PCP



BENEFITS TO YOU
CHOOSING A PCP

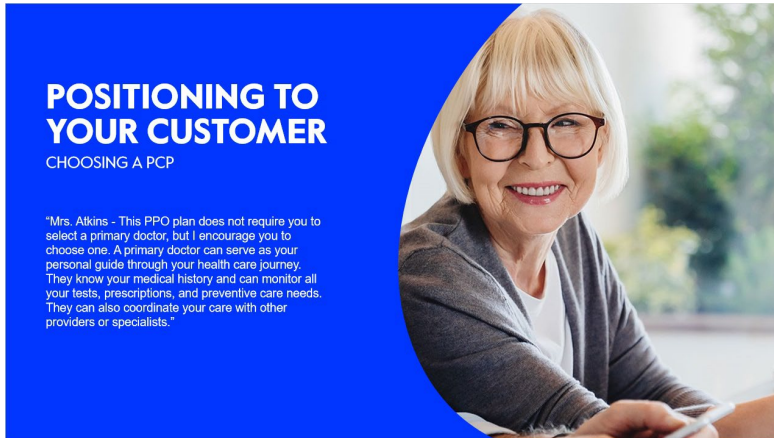
- When enrolling your customers, encourage them to select a PCP, even when in a PPO plan
- Benefits can lead to improved customer health and cost savings
- An increase in customer retention and referrals for you

Notes:

Encourage your customers, even in a PPO plan, to select a PCP.

All the benefits of selecting a PCP can lead to improved customer health and cost savings, which means an increase in customer retention and referrals for you!

3.36 Choosing a PCP



**POSITIONING TO
YOUR CUSTOMER**

CHOOSING A PCP

"Mrs. Atkins - This PPO plan does not require you to select a primary doctor, but I encourage you to choose one. A primary doctor can serve as your personal guide through your health care journey. They know your medical history and can monitor all your tests, prescriptions, and preventive care needs. They can also coordinate your care with other providers or specialists."

Notes:

Here is an example of positioning selecting a PCP to your customer:

“Mrs. Atkins - This PPO plan does not require you to select a primary doctor, but I encourage you to choose one. A primary doctor can serve as your personal guide through your health care journey. They know your medical history and can monitor all your tests, prescriptions, and preventive care needs. They can also coordinate your care with other providers or specialists.”

3.37 What is V



VALUE-BASED CARE

WHAT IS VALUE-BASED CARE?

We partner with a growing number of outstanding value-based providers.

These providers receive incentive payments based on the quality of care vs the quantity of care. The results of value-based care includes:

- Better care for patients
- Lower costs



©

Notes:



-

3.38 Blank Content

VALUE-BASED CARE

BENEFITS TO CUSTOMER


- Additions such as transportation, care coordination, and social support (examples: community centers with activities like cooking, aerobics, acupuncture, etc.)
- Access to mental health support
- More providers
- Lower costs of care
- Average appointment time of 45-60 minutes



©

3.39 Blank Content

VALUE-BASED CARE



HOW VALUE-BASED CARE HELPS YOU SELL

Value-based customers receive lower costs of care and more benefits.

This has a positive impact on your retention and referrals.

Build relationships with value-based providers to open doors to event opportunities, more sales, and more referrals.





















Want to learn more? Speak with your local Broker Manager or agent manager.



3.40 Blank Content

VALUE-BASED CARE


Cigna Medicare Contracted Value-Based Providers




3.41 Blank Content

VALUE-BASED CARE


PRODUCERS' UNIVERSITY RESOURCES

- Visit the "Providers-Value Based" section of the Resource Center
- Review videos, and more that provide details about our value-based partners



3.42 D-SNPs Title



OUR DUAL SPECIAL NEEDS PLANS (D-SNPs)

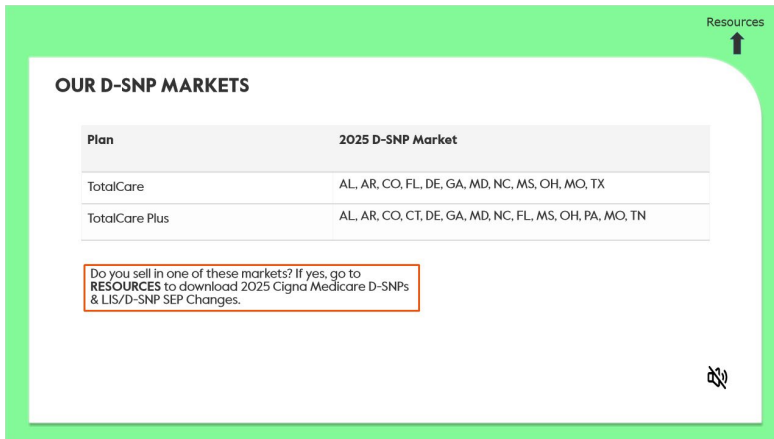
Plans for customers who are eligible for Medicare and Medicaid



Notes:

The following slides include information on son of D-SNPs, upcoming SEP changes, and how you can prepare to retain and gain D-SNP customers during these changes.

3.43 Our D-SNP Markets




Resources ↑

OUR D-SNP MARKETS

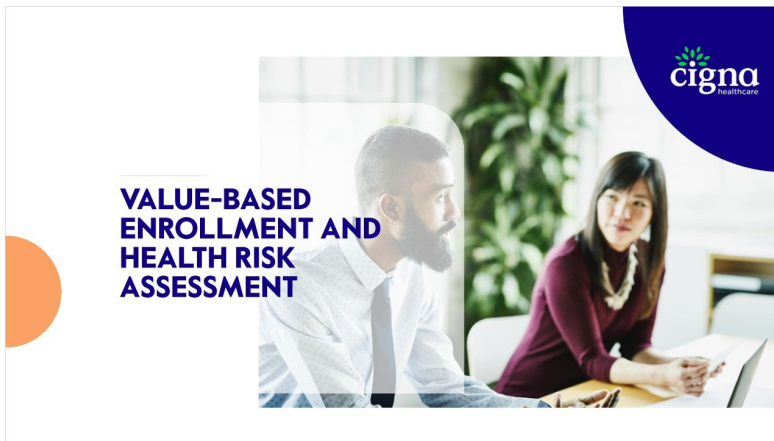
Plan	2025 D-SNP Market
TotalCare	AL, AR, CO, FL, DE, GA, MD, NC, MS, OH, MO, TX
TotalCare Plus	AL, AR, CO, CT, DE, GA, MD, NC, FL, MS, OH, PA, MO, TN

Do you sell in one of these markets? If yes, go to **RESOURCES** to download 2025 Cigna Medicare D-SNPs & LIS/D-SNP SEP Changes.



Notes:

3.44 Value-Based Care Subtitle



Notes:

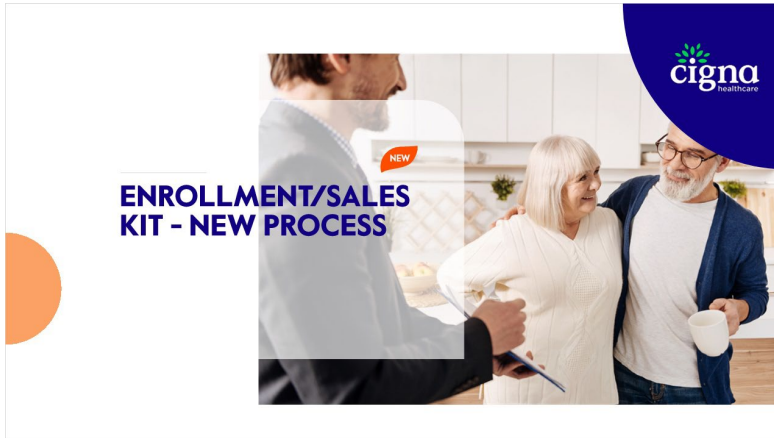
Are you a broker? If yes, go to **Resources** to download VBE HRA Talking Points. Resources is located at the top right of this slide.

3.45 2023 Benefits Review

A screenshot of a web form titled "VALUE BASED ENROLLMENT HEALTH RISK ASSESSMENT (VBE HRA)". The form contains two paragraphs of instructions: "If you are not a broker, please review the attestation statement, select the green checkmark, and then click the Submit button to proceed." and "If you are a broker, click RESOURCES at the top right to download VBE HRA Broker Guide. After you download the guide, return here to review the attestation statement, select the green checkmark, and then click the Submit button to proceed." Below the instructions is a green checkmark icon followed by the text: "I attest that either I am not a broker therefore I do not need to download the VBE HRA document, or I am a broker, I have downloaded the required VBE HRA guide, and I agree to follow the guidelines in the document." At the bottom center of the form is a blue "Submit" button. In the top right corner of the form area, there is a link labeled "Resources" with an upward-pointing arrow icon. In the bottom right corner of the form area, there is a small icon of a crossed-out speech bubble.


Notes:

3.46 Sales Kit Ordering Subtitle



Notes:

3.47 Sales Kit Process Intro



2025 AEP ENROLLMENT/SALES KIT

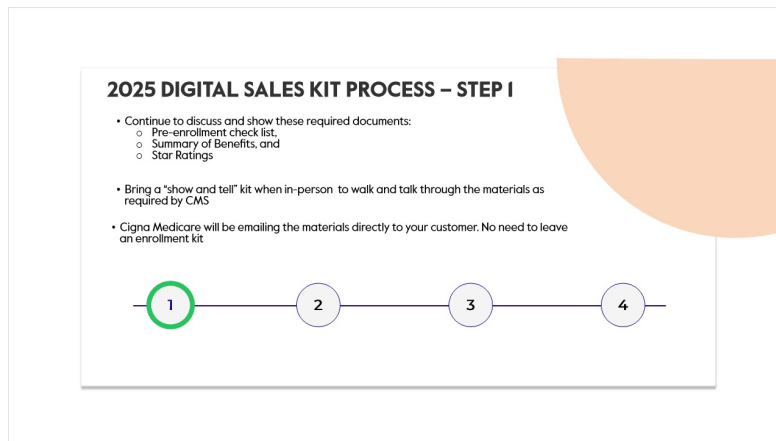
- A new hybrid of digital sales kits AND printed sales kits will begin AEP 2025 for the 2025 plan year
- Cigna Medicare will email enrollment kits to all your customers when you enroll them with an online enrollment tool, and you enter the customer's valid email address on the online enrollment form
 - No need for you to leave enrollment kit/sales kit materials with the customer. Cigna Medicare will email the information directly to them
- Printed sales kits will continue to be an option
- 2024 enrollments will continue to be paper kits only

Notes:

We understand your pain points about paper enrollment sales kits. Sometimes you have too many sales kits for different carriers, and sometimes you run out while needing to meet with customers. Our new hybrid approach of providing digital sales kits, and printed sales kits brings best practices to life. Starting 2025 AEP, Cigna Medicare

will email enrollment kit materials to all your customers when you enroll them with an online enrollment tool and enter the customer's valid email address on the online enrollment form. There is no need for you to leave enrollment kit/sales kit materials with the customer since Cigna Medicare will email the information directly to them. If you would prefer to provide printed enrollment kits, these will continue to be an option. Up next is the process for digital sales kits. Please note, for 2024 enrollments, these will continue to be paper kits only.

3.48 Digital Sales Kits Process 1



Notes:

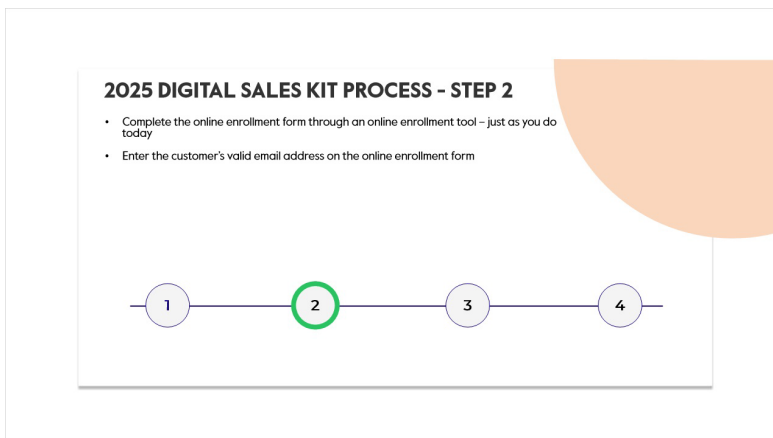
- While meeting with a customer, continue to discuss documents you are required to show:
 - Pre-enrollment check list,
 - Summary of Benefits, and
 - Star Ratings

- If meeting in-person, bring a “show and tell” kit to walk and talk

through the materials. Showing and discussing the documents will continue to be required by CMS

-
- Since Cigna Medicare will be emailing the materials directly to your customer, there is no need for you to leave an enrollment kit. You can place it back in your briefcase for your next meeting. The customer will automatically receive the full enrollment kit by email from Cigna Medicare
-
- Click Next to see the remaining steps

3.49 Digital Sales Kits Process 2

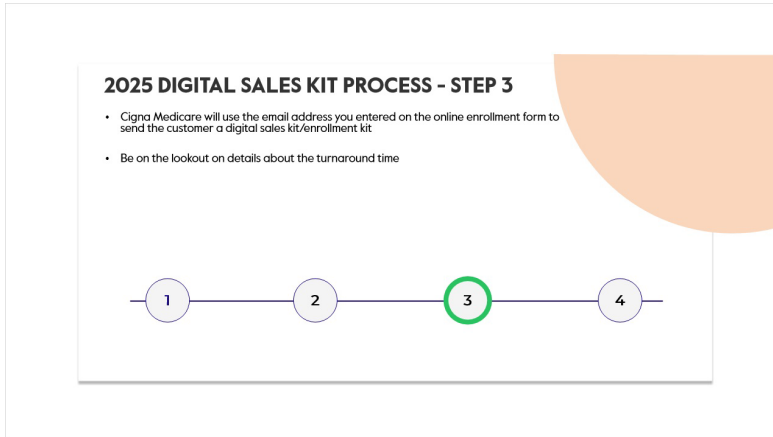


Notes:

- Complete the online enrollment form through an online enrollment tool just as you do today
-
- Enter the customer's valid email address on the online enrollment form

•

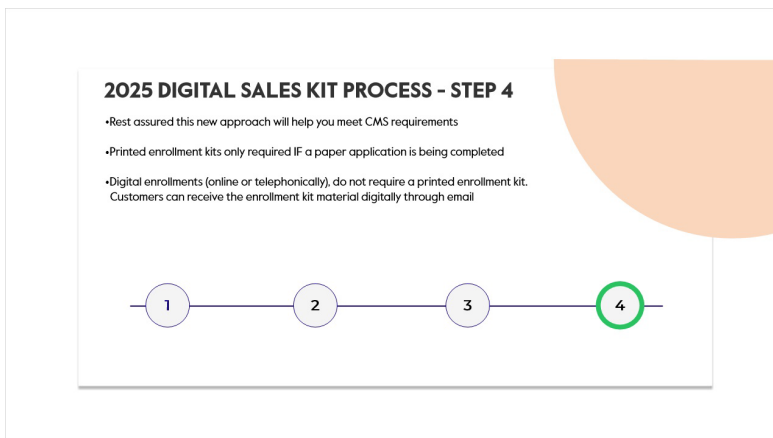
3.50 Digital Sales Kits Process 3



Notes:

- Cigna Medicare will use the email address you entered on the online enrollment form to send the customer a digital sales kit/enrollment kit. Be on the lookout for more information from Cigna Medicare on details about the turnaround time

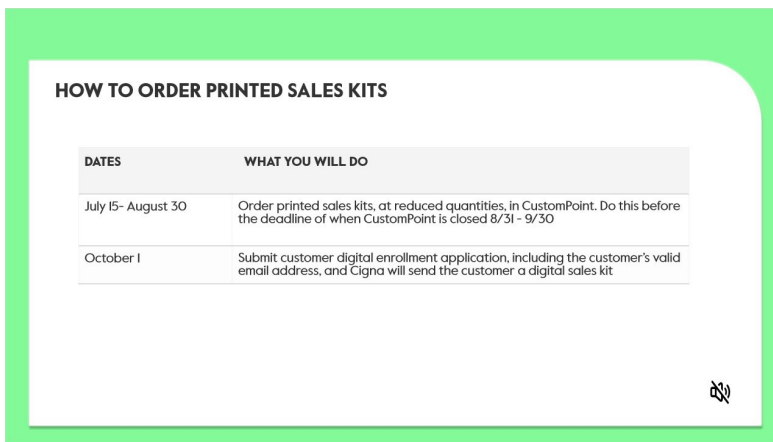
3.51 Digital Sales Kits Process 4



Notes:

- You can rest assured this new approach will help you meet CMS requirements
- You are only required to provide printed enrollment kits to customers IF a paper application is being completed
- When you complete enrollments digitally (online or telephonically), you are not required to provide a printed enrollment kit. Customers can receive the enrollment kit material digitally through email

3.52 Sales Kit Dates



HOW TO ORDER PRINTED SALES KITS

DATES	WHAT YOU WILL DO
July 15- August 30	Order printed sales kits, at reduced quantities, in CustomPoint. Do this before the deadline of when CustomPoint is closed 8/31 - 9/30
October 1	Submit customer digital enrollment application, including the customer's valid email address, and Cigna will send the customer a digital sales kit

28

Notes:

3.53 Sales Kit Summary



KEY TAKEAWAYS

2025 SALES KIT PROCESS

- Beginning AEP 2025, we automatically email digital enrollment/sales kit materials to your customer. You do not need to email anything. Cigna Medicare does it for you
- Confirm you included the customers' email address when completing the online enrollment form
- If your client is filling out a **paper** application, you need to provide the client with the **paper** enrollment/sales kit
- Never run out of sales kits or find room for sales kits again with the digital sales kit option
- Digital kit process applies to 2025 plan year. 2024 enrollments will continue to be paper sales kits only


Notes:

- Cigna Medicare will automatically email the enrollment materials to your customer when you include the customer's email address on the online enrollment form
-
- You do not need to email anything. Cigna will do this for you!
-
- Double check that you included the customers' email address when completing the online enrollment form
-
- Remember, if your client is filling out a **paper** application, you need to provide the client with the **paper** enrollment kit
-
- With the new digital sales kits option, you will never run out of sales kits or find room for sales kits again when you complete the enrollment online and include the email address in the enrollment form
-

- Digital kit process applies to 2025 plan year. 2024 enrollments will continue to be paper sales kits only

•


3.54 Section Summary



SECTION SUMMARY

- Our 2025 plan and benefits portfolio
- Value-based care
- VBE HRA for brokers
- 2025 Cigna Medicare D-SNPs and Dual/LIS SEP changes
- 2025 Enrollment/Sales Kits

Please click the Next button to return to the Main Menu and continue to the next section of this course.



Notes:

4. PDP

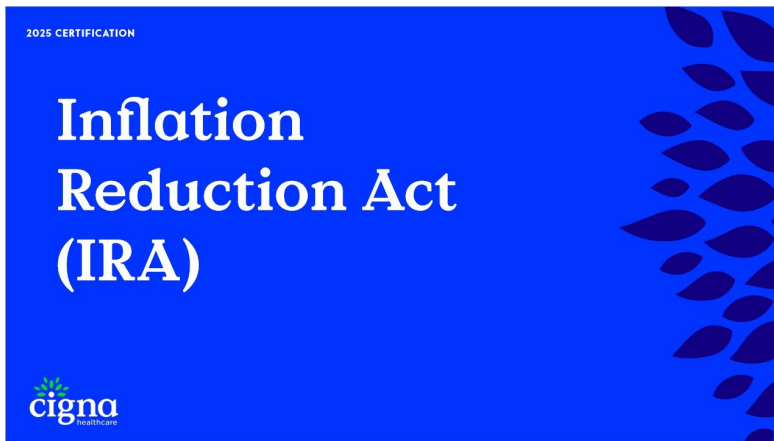
4.1 PDP



**Cigna Medicare
Prescription Drug Plans**



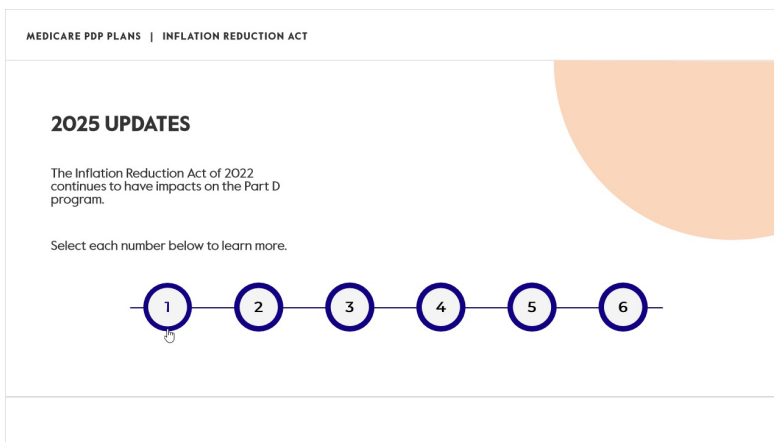
4.2 Inflation Reduction Act



Notes:

Let's go over industry-wide impact to Prescription Drug Plans as a result of the Inflation Reduction Act or IRA.

4.3 2025 Updates



Notes:

As it did in 2023 and 2024, the inflation reduction act of 2022 continues to have impacts on the Medicare Program including Part D, and it will continue to have impacts for the

next several years. Let's do a quick recap of the program and its impact up till 2024 calendar year. Select each number below to learn more.

While its impact on the Medicare Program has been profound, the IRA is a sweeping, legislation designed to achieve several goals at once. One of its purposes is to curb rising costs but several of its provisions also touch tax laws, investing in energy infrastructure, job creation, and fighting climate change. For Medicare Beneficiaries its stated goals are to expand benefits, lower drug costs, and provide meaningful financial relief.

Effective January 1, 2023, the IRA required Part D plans to cap covered insulins at \$35 per one-month supply. That cap later expanded to include insulins used in durable medical equipment pumps covered under Part B.

Discounts that Plan Sponsors received directly from drug manufacturers and after the sale are now applied at the point of sale (or pharmacy counter) to the customer. The Point of Sale - Direct and Indirect Remuneration also known as POS DIR impacts drug pricing. All pharmacy price discounts that used to be between the pharmacy and the plan sponsors are now included at the point of sale. This change will lower member cost-sharing, especially for drugs with co-insurance. This will result in members moving more slowly through the benefit phases. The change has also

resulted in higher premiums as plan sponsors no longer have the price concessions to offset other plan costs in the past. Cost-sharing for prescriptions in the catastrophic coverage stage is now eliminated. This means that people in this phase will not have any prescription drugs cost for the remainder of the calendar year. Catastrophic coverage starts when true out-of-pocket (TrOOP) costs have reached \$8,000 in a given calendar year. Income eligibility is now expanded to allow more people to qualify for Low-Income Subsidy (LIS), or “Extra Help” program. This means that beneficiaries who only qualified for partial subsidy are now eligible for the full LIS, and their out-of-pocket drug costs are limited.

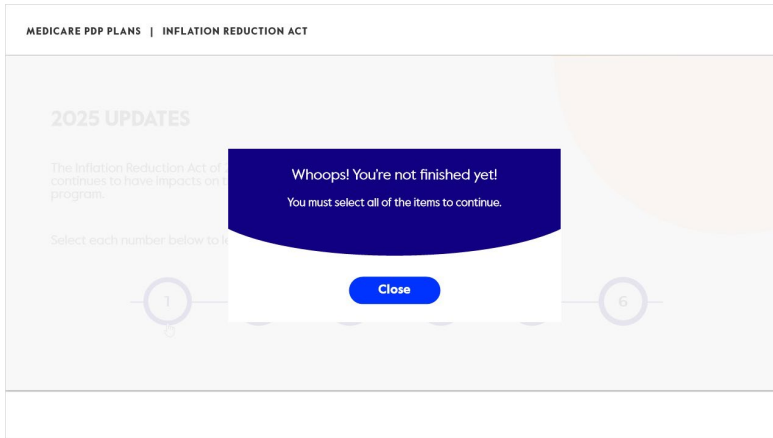
The biggest impact of the IRA on Medicare Prescription Drugs is coming into effect in calendar year 2025. Beneficiaries out of pocket cost will be capped at \$2,000, a \$6,000 reduction from the current maximum of \$8,000. A newly defined standard Part D benefit consisting of only three phases: annual deductible, initial coverage, and catastrophic coverage will be in effect for 2025. The 4th leg of the coverage phases, the coverage gap, is now eliminated. The coverage gap discount program is also replaced by the Manufacturer Discount Program. A new provision, the Medicare Prescription Payment Plan (also known as MP3) will also allow beneficiaries to pay their prescription drug costs in limited monthly installments over

the course of the plan year through the, rather than only paying at the point of sale at the pharmacy.

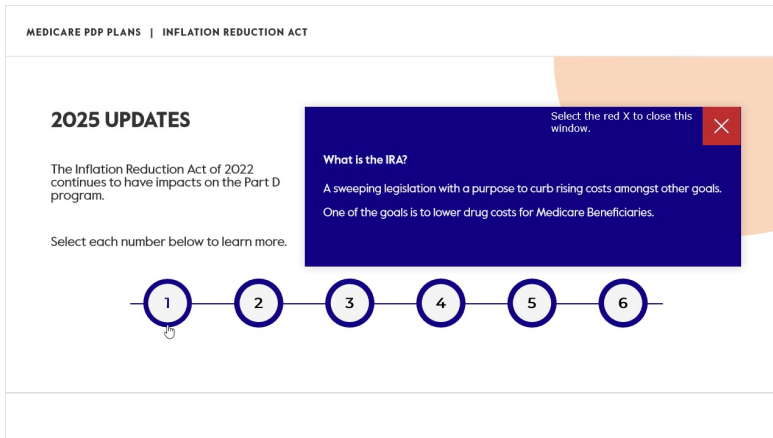
The IRA also allows the CMS to negotiate directly with drug manufacturers to lower the prices of some of the most expensive brand-name Medicare Part B and Part D drugs. These negotiations have already started, and they will take full effect in 2026. This is expected to significantly limit the cost of such prescription drugs.

There are additional changes that will occur as a result of the new IRA provisions. TrOOP is the portion of spending on covered Part D drugs made by the beneficiary or on their behalf by certain third parties. The IRA updates which categories of payments count toward TrOOP spending. TrOOP is the spending that determines when a beneficiary enters the initial coverage phase and becomes eligible for the Discount Program. It also determines when the customer reaches the annual Out of Pocket threshold, and subsequently enters the catastrophic coverage phase. In addition to the third-party arrangements that already count toward TrOOP, the IRA specifically amends the definition of incurred costs that count toward TrOOP for calendar year 2025 to include payments for previously excluded supplemental benefits provided by Part D sponsors and Employer Group Waiver Plans (EGWPs) and exclude payments under the new Discount Program.

Incomplete (Slide Layer)



What is the IRA (Slide Layer)



2023 (Slide Layer)

MEDICARE PDP PLANS | INFLATION REDUCTION ACT

2025 UPDATES

The Inflation Reduction Act of 2022 continues to have impacts on the Part D program.

Select each number below to learn more.

1 2 3 4 5 6

2023

- Insulin cost sharing capped at \$35
- \$0 cost sharing for vaccines

Select the red X to close this window.

2024 (Slide Layer)

MEDICARE PDP PLANS | INFLATION REDUCTION ACT

2025 UPDATES

The Inflation Reduction Act of 2022 continues to have impacts on the Part D program.

Select each number below to learn more.

1 2 3 4 5 6

2024

- Discounts to Plan Sponsors now applied at the point of sale (pharmacy counter)
- Catastrophic cost sharing removed
- Low-income subsidies expanded.

Select the red X to close this window.

2025 (Slide Layer)

MEDICARE PDP PLANS | INFLATION REDUCTION ACT

2025 UPDATES

The Inflation Reduction Act of 2022 continues to have impacts on the Part D program.

Select each number below to learn more.

1 2 3 4 5 6

2025

- New \$2,000 out-of-pocket spending cap
- Elimination of the coverage gap phase
- Introduction of Payment Plan for Medicare Prescriptions

Select the red X to close this window.

2026 and Beyond (Slide Layer)

MEDICARE PDP PLANS | INFLATION REDUCTION ACT

2025 UPDATES

The Inflation Reduction Act of 2022 continues to have impacts on the Part D program.

Select each number below to learn more.

1 2 3 4 5 6

Select the red X to close this window.

2026 and beyond

- CMS begins direct negotiation of drug prices with manufacturers

Troop (Slide Layer)

MEDICARE PDP PLANS | INFLATION REDUCTION ACT

2025 UPDATES

The Inflation Reduction Act of 2022 continues to have impacts on the Part D program.

Select each number below to learn more.

1 2 3 4 5 6

Select the red X to close this window.

Costs Counted Toward True Out-of-Pocket Costs (TrOOP)

TrOOP is the spending on covered Part D drugs made by the customer or on their behalf by third parties.

In addition to what currently counts towards the TrOOP, the IRA now allows payments for supplemental benefits provided by Part D sponsors and Employer Group Waiver Plans (EGWPs).

It also excludes payments under the new Discount Program.

4.4 2025 PDP Plans

2025 CERTIFICATION

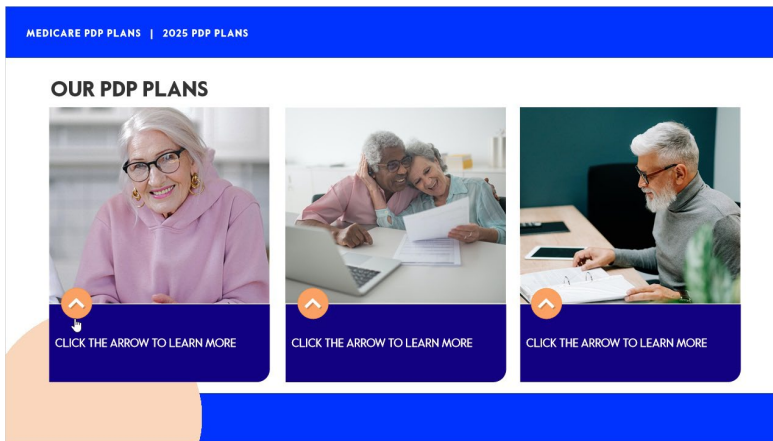
2025 PDP Plans



Notes:

Let's go over our 2025 PDP plans and the changes from last year to this year.

4.5 Our PDP Plans



Notes:

We are confident you will find a Cigna Healthcare PDP plan that will meet the needs of each of your customers. Select each arrow to reveal what our PDP plans have to offer.


Keynote 1 (Slide Layer)

MEDICARE PDP PLANS | 2025 PDP PLANS


OUR PDP PLANS

VALUE

Each of our Standalone PDP plans offer great value for customers on Original Medicare and is a perfect companion for any of our Medicare Supplement plans.



CLICK THE ARROW TO LEARN MORE




CLICK THE ARROW TO LEARN MORE

Keynote 2 (Slide Layer)

MEDICARE PDP PLANS | 2025 PDP PLANS


OUR PDP PLANS



CLICK THE ARROW TO LEARN MORE

DRUG LISTS

We provide great value with robust drug lists and low premiums and co-pays.




CLICK THE ARROW TO LEARN MORE


Keynote 3 (Slide Layer)

MEDICARE PDP PLANS | 2025 PDP PLANS

OUR PDP PLANS



CLICK THE ARROW TO LEARN MORE

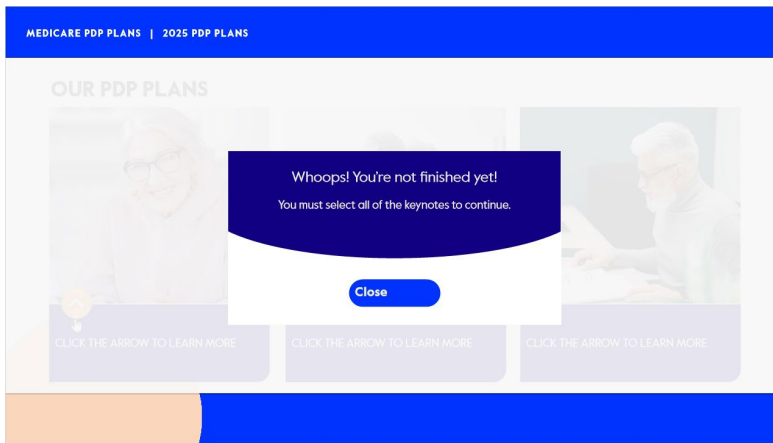


CLICK THE ARROW TO LEARN MORE

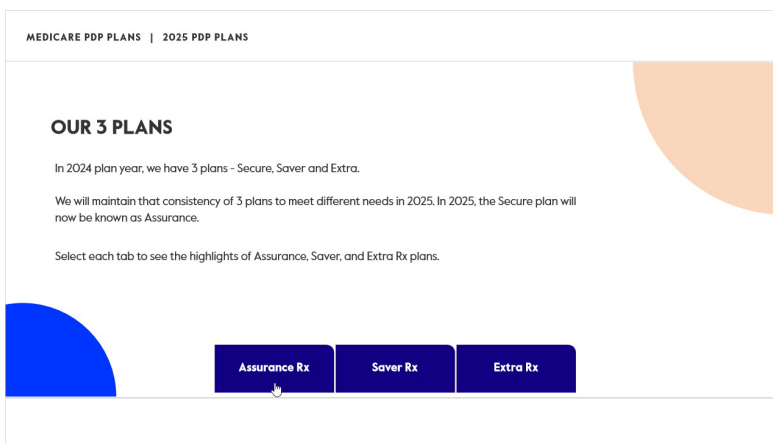
PLANS

While some plans may be a better fit for certain Medicare beneficiaries, all our PDP plans are available to meet the needs of all Medicare beneficiaries.

Incomplete (Slide Layer)



4.6 Our 3 Plans



Notes:

In 2024 plan year, we have 3 plans - Secure, Saver and Extra. We will maintain that consistency of 3 plans to meet different needs in 2025. In 2025, the Secure plan will now be known as Assurance. Select each tab to see the highlights of the Assurance, Saver, and Extra PDP plans.

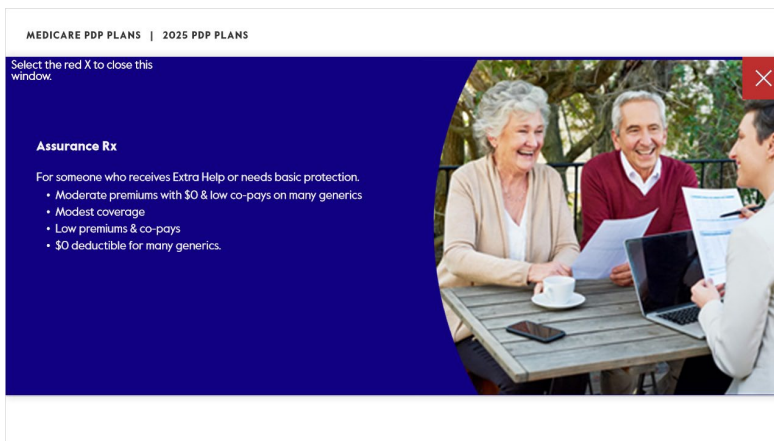
The Assurance plan is for someone who receives Extra Help or needs basic protection. This plan has moderate

premiums with \$0 & low co-pays on many generics. This plan offers modest coverage, low premiums & co-pays, and \$0 deductible for many generics.

The Saver plan is for someone who is more premium sensitive with lower drug utilization. This plan offers modest coverage, low premiums & co-pays, and \$0 deductible for many generics.

The Extra plan is for someone who needs more flexibility, with a broad pharmacy network and robust drug formulary. This plan offers \$0 deductible for many generics and a low deductible for Tiers 3, 4 and 5 drugs.

Assurance (Slide Layer)



MEDICARE PDP PLANS | 2025 PDP PLANS

Select the red X to close this window.

Assurance Rx

For someone who receives Extra Help or needs basic protection.

- Moderate premiums with \$0 & low co-pays on many generics
- Modest coverage
- Low premiums & co-pays
- \$0 deductible for many generics.

The slide features a photograph of an elderly couple sitting at a table with a laptop and a smartphone, talking to a younger man in a white shirt who is pointing at the laptop screen. The background is a dark blue gradient.

Saver (Slide Layer)


MEDICARE PDP PLANS | 2025 PDP PLANS

Select the red X to close this window.

Saver Rx

For someone who is more premium sensitive and does not use a lot of prescription drugs

- Modest coverage
- Low premiums & co-pays
- \$0 deductible for many generics



Extra (Slide Layer)


MEDICARE PDP PLANS | 2025 PDP PLANS

Select the red X to close this window.

Extra Rx

For someone who needs more flexibility, with a broad pharmacy network and robust drug formulary.

- \$0 deductible for many generics
- Low deductible for Tiers 3, 4 and 5 drugs.



Incomplete (Slide Layer)

MEDICARE PDP PLANS | 2025 PDP PLANS

OUR 3 PLANS

In 2024 plan year, we have 3 plans

We will maintain that consistency

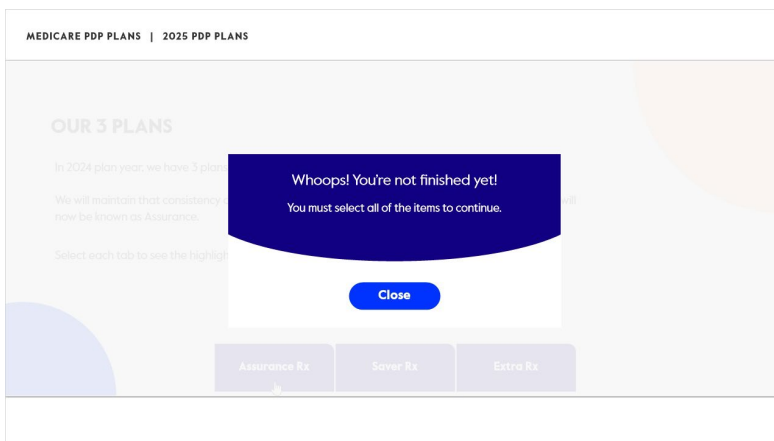
Select each tab to see the highlights

Whoops! You're not finished yet!

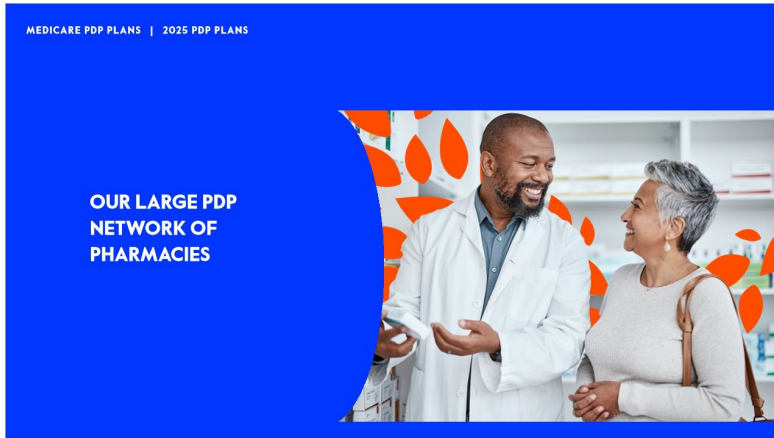
You must select all of the items to continue.

Close

Assurance Rx Saver Rx Extra Rx



4.7 Network - 20K Changes



Notes:

Our wide PDP network of pharmacies.

4.8 Network - 20K Changes

MEDICARE PDP PLANS | 2025 PDP PLANS

SAVER

More than 20,000 Preferred Pharmacies! 2 Specialty Pharmacies going out of network.

Some Pharmacies in our 20,000 Strong Network

Evernorth Care Group	Food Lion	Price Chopper
Ahold Delhaize	Hannaford Brothers	Raley's
Albertsons	Harps Pharmacy	Rite Aid
Brookshire Brothers	Homeland Pharmacy	SortPak
Brookshire Grocery	Hy-Vee Pharmacy	SuperValu
Cardinal Health I32	IHC Pharmacy Services	Tops Market
Coborns	Ingles	United Supermarkets
Curators of the University of MO	Marc Glassman	Walgreens
Food City Pharmacy	Mercy Pharmacy Services	Walmart/Sam's Club

Notes:

Saver Rx preferred network. Our network for the Saver Rx plan continues to be more than 20,000 strong!

This chart shows some of the better known pharmacies in the network. The major changes to the preferred network is

that a couple of specialty pharmacies namely CVS Caremark Specialty and some Optum Specialty pharmacies are moving out of network.

4.9 Network- 30K Changes

MEDICARE PDP PLANS | 2025 PDP PLANS

ASSURANCE AND EXTRA More than 30,000 Preferred Pharmacies! HEB Grocery, and Spartan (Family Fair) moving from preferred to standard.


Some Pharmacies In our 30,000 Strong Network

Affiliated Health Services	Henry Ford Health System Pharmacy
Amazon Pill Pack	Kinney
Big Y	Publix
Discount Drug Mart	Safeway
EPIC	Strategic Health Alliance
Fruth Pharmacy	Wegman's
Giant Eagle	Weis

Notes:

Assurance Rx and Extra Rx Preferred Network. This network includes all the 20,000 pharmacies in the Saver network and some additional 10,000 plus pharmacies. Please note that H.E.B Grocery and Spartan or Family Fair are moving from preferred to standard. And with the closure of K-Mart and Winn Dixie pharmacies in 2024, we will obviously not have those pharmacies in our network.


4.10 Section Summary



SECTION SUMMARY

- 2025 key changes
- Our 2025 PDP plans
- Our PDP formulary

Please click the Next button to return to the Main Menu and continue to the next section of this course.



Notes:

5. Wrap-Up

5.1 Wrap-up



 **Wrap-up**

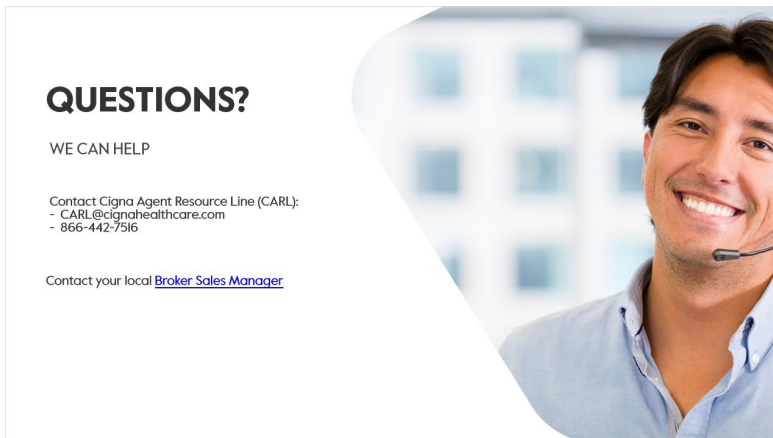


5.2 Download Resources



Notes:

5.3 Contact Us

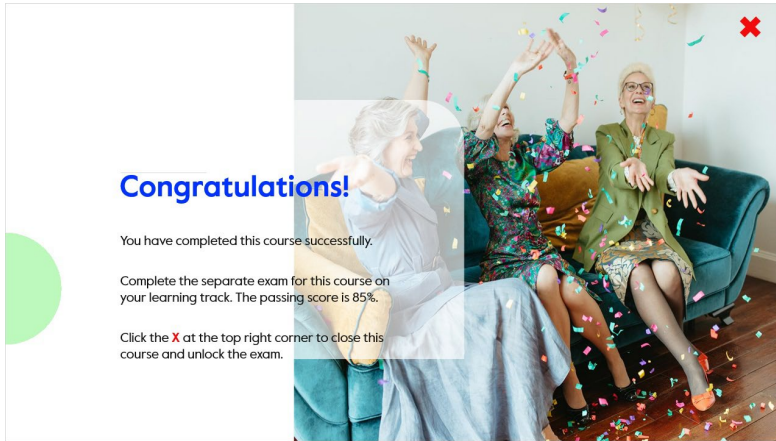


Notes:

We are here to help! If you have questions about completing this training, please contact the Cigna Agent Resource Line. For plan and benefit questions, please contact your Broker Sales Manager or access Cigna Medicare Producers' University . Be on the lookout for 2025 plan information that will be available on Producers' University before AEP. While

on Producers' University, check out our podcast and other training to sharpen your sales skills and product knowledge.

5.4 Course Completion



Notes:

Congratulations! You have completed this certification course.

There is a separate exam for this course on your learning track. You must launch and pass with a score of 85% to complete the requirements for this training.

Please click the red X at the top right hand corner of the screen to close out of this course and unlock the exam.