

All benefits are subject to verification of eligibility, definitions, exclusions, and contract limitation. Card possession does not certify eligibility for benefits.

Members and Providers

Fax Claims: 1.800.243.6998 (toll-free) or 001.302.797.3150 (direct fax)

Contact: 1.800.243.1348 (toll-free) or 001.302.797.3535 (outside the U

1.800.243.1348 (toll-free) or 001.302.797.3535 (outside the U.S.) $302.797.3535 \ (inside \ the \ U.S.)$

Mail Claims: Cigna PO Box 15111, Wilmington, DE 19850-5111

Courier: Cigna 300 Bellevue Parkway, Wilmington DE 19809-3718

Website: www.CignaEnvoy.com
US Provider: Payor ID# Cigna – 62308

Preferred care network in the U.S.: Cigna HealthCare PPO

For U.S.-inpatient services pre-authorization required.

MultiPlan Network Savings Program

AWAY FROM HOM CARE