

### **Notice Regarding Waiver of Cost Sharing Amounts**

To protect customers, clients, and network partners, health benefits plans administered by The Cigna Group (“Plans”) exclude coverage if a provider waives, reduces, or forgives any portion of its charges, and/or any portion of a customer’s required copayment, deductible, or coinsurance amounts applicable to Covered Services without express consent of The Cigna Group. If The Cigna Group determines that a provider is engaged in the practice of waiving cost sharing amounts, then The Cigna Group, in its sole discretion, shall have the right to deny the payment of benefits in connection with otherwise Covered Services, or reduce benefits in proportion to the amount of copayment, deductible, coinsurance or charges waived, forgiven or reduced. In the exercise of that discretion, The Cigna Group has the right to require customers and providers to provide proof sufficient to The Cigna Group that required cost sharing payment(s) have been paid to the provider by the customer prior to the payment of any benefits by The Cigna Group.<sup>1</sup> This exclusion applies to both Participating and Non-Participating Providers.

#### **What this means for Participating Providers:**

Participating Providers have direct contracts with The Cigna Group which, among other things, set forth agreed upon rates for the services offered by the Participating Providers. The contracts further provide that Participating Providers shall not balance bill customers for the difference between the Participating Providers’ standard billed charges and the negotiated rates set forth in the Participating Providers’ contract with The Cigna Group. Therefore, Participating Providers are required to bill and collect applicable in-network copayments, deductibles and coinsurance from customers.

#### **What this means for Non-Participating Providers:**

Unless otherwise agreed in writing by The Cigna Group on a claim-by-claim basis, Non-Participating Providers are prohibited by the Plans from waiving, reducing or forgiving any portion of their billed charges. Therefore, they are required to bill and collect from customers applicable out-of-network deductibles and coinsurance and the balance bill (i.e., any portion of the Non-Participating Provider’s billed charges that exceed the Allowed amount for Covered Services as determined by The Cigna Group). In order to obligate customers for their billed charges, Non-Participating Providers should provide customers with a detailed and accurate written estimate of the charges they intend to bill for their services prior to rendering services.

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<sup>1</sup> Subject to the terms of individual health benefit plans and state and federal laws and regulations, as applicable.