



Cigna Healthcare Enrollment Form Fax Cover Sheet

DO NOT COPY
If you need additional cover sheets, visit CignaMedicareProducers.com

FAXING INSTRUCTIONS

- › All applications must be faxed to Cigna HealthcareSM.
- › All faxed applications must have this Cigna Healthcare cover sheet as the first page.
- › Fax your applications within the first 24-48 hours to prevent delays.
- › If you are faxing multiple applications, a fax cover sheet is required to be included for each application.

NUMBER OF PAGES

(including cover sheet)

CHECK ALL THAT ARE INCLUDED:

- Application
- C-SNP/D-SNP Verification Form (if applicable)
- Power of Attorney (POA)
- Scope of Appointment (SOA)
- SOA Confirmation Number (AVL#)

Fax the application to the applicable fax number listed below:

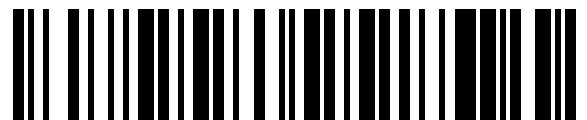
- › 2025 Applications: **1-877-818-8163**
- › Arizona HMO 2025 Applications: **1-855-531-9754**
- › Arizona PPO 2025 Applications: **1-877-818-8163**
- › Single SOA Forms Only: **1-877-818-9299**

Customer Name	Customer's Medicare Number
Agent Name	Agent ID Number

To prevent applications from being placed in the Request for Information (RFI) process, double-check your application before faxing and confirm you have completed and included the following:

- Application has been signed and dated correctly by both the customer and the agent
- Eligibility has been confirmed and correct plan is selected
- Medicare number is correct on the application
- First name, middle initial/name, last name (should be the same as on Medicare card)
- Physical address and county (cannot be a PO Box number)

- Mailing address (if different from physical address)
- SOA AVL# in the area provided above
- How did you obtain the application?
 - Home visit
 - Seminar
 - Office walk-in
 - Other: _____



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Subsidiaries of The Cigna Group contract with Medicare to offer Medicare Advantage HMO and PPO plans and Part D Prescription Drug Plans (PDPs) in select states and with select state Medicaid programs. Enrollment in a Cigna Healthcare product depends on contract renewal.

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