Enhancing lives, together

Improving the health and vitality of those we serve

Agenda

Welcome!

- Policy updates
- Virtual care
- Digital solutions
- Claim submission, payments, and appeals
- Provider resources
- Q&A

Advocating for better health at every step of the way, at every stage

Policy updates

We support access to quality, cost-effective care

When we review our coverage, reimbursement, and administrative policies, we take into consideration one or more of the following:

- Evidence-based medicine.
- Professional society recommendations.
- Centers for Medicare & Medicaid Services guidance.
- Industry standards.
- Other existing Cigna Healthcare[SM] policies.

Note: Reimbursement and modifier policies apply to all claims.

For more information:

Log in to the Cigna for Health Care Professionals website (CignaforHCP.com)
> Resources
> Coverage Policies
> Policy Updates.

If you are not registered for the website, go to CignaforHCP.com > Register.

We review precertification policies

Easy-to-access guidelines

Precertification can be complicated. Knowing the right place to start can make a big difference.

You can find complete information about when and where to submit precertification requests to Cigna Healthcare and our national ancillary vendors by going to CignaforHCP.com > Resources > Precertification.

Updates

As a result of our precertification policy reviews, we make updates to our precertification list.

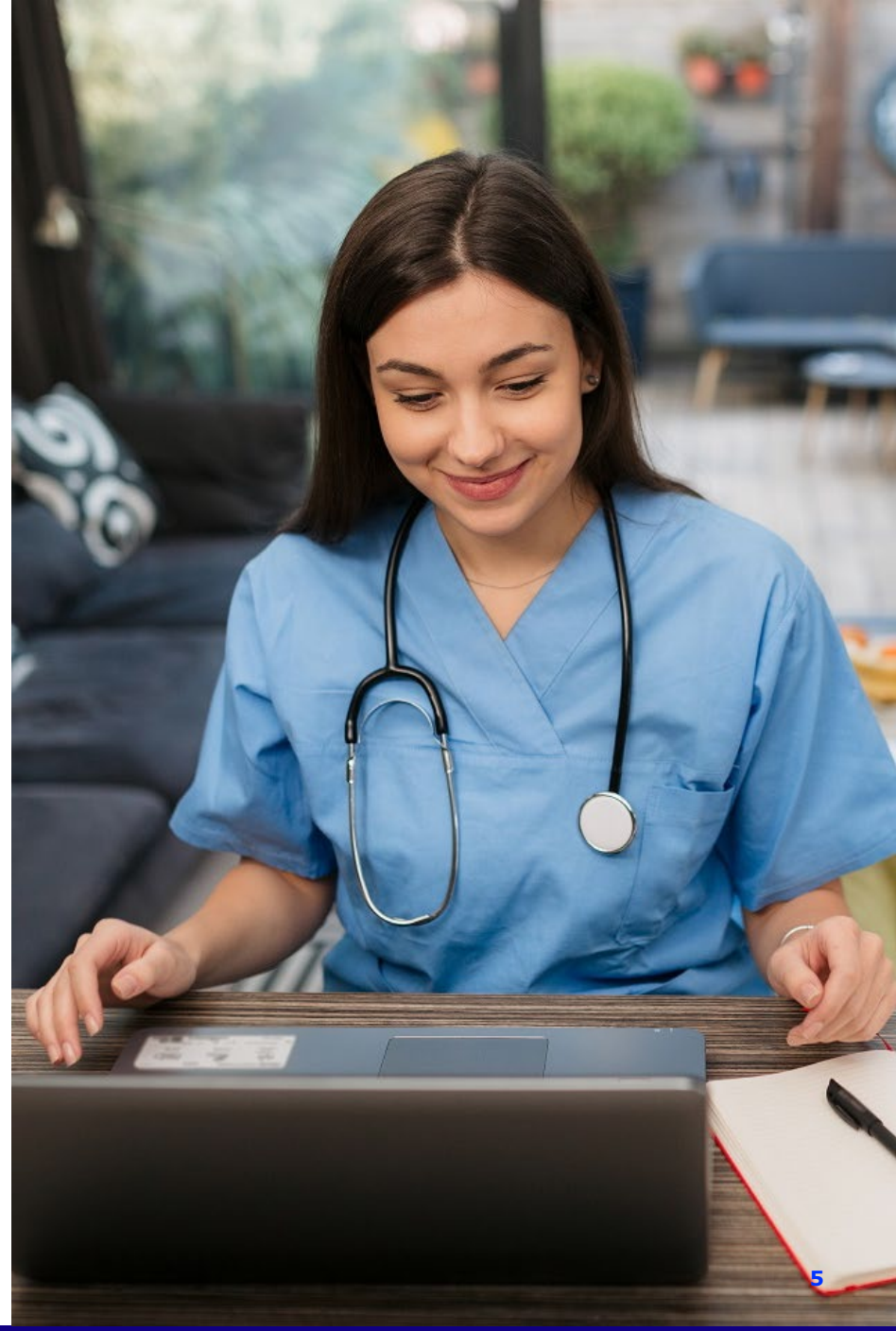
Codes may be subject to the following:

- Code editing.
- Benefit plan exclusions.
- Post-service review for coverage.

To view the complete list of services that require precertification:

Log in to CignaforHCP.com
> Resources
> Clinical Reimbursement Policies and Payment Policies
> Precertification Policies.

If you are not registered for the website, go to CignaforHCP.com > Register.



Precertification updates

To help ensure that we are administering benefits properly, we routinely review our precertification policies for potential updates.

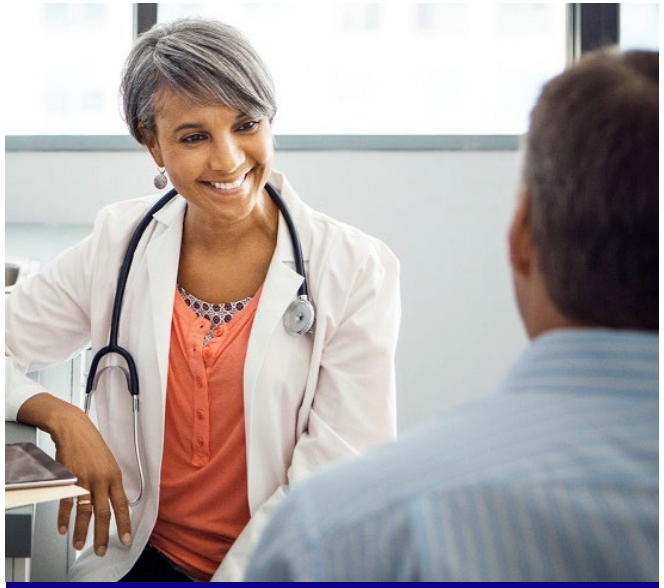
As a result of a recent review, we want to make you aware that we have updated our precertification list.

January 2025	• Added five CPT codes
May 2025	• Added three CPT codes
July 2025	• Added three CPT codes

To view the complete list of services that require precertification:

Log in to CignaforHCP.com
> Resources
> Clinical Reimbursement Policies and Payment Policies
> Precertification Policies.

Clinical, reimbursement, and administrative policy updates



For additional information:

- Log in to CignaforHCP.com
  > Resources
  > Clinical Reimbursement Policies and Payment Policies
  > Reimbursement and Modifier Policies.

Effective	Policy name
March 2025	• Bilaterial Procedures (M50) • Preventative Care Services (A004)
June 2025	• Evaluation and Management Services (R30)
July 2025	• DRG Readmission (R35)

Virtual care

Helping you deliver care

Virtual care (telehealth) coverage
We cover certain virtual care services per our Virtual Care Reimbursement Policy (R31).

More information is available at CignaforHCP.com/VirtualCare.

Cost-share
Standard customer cost-share applies to all covered virtual care services.

Accommodations
We will continue to allow facilities to bill for virtual care services on Form UB-04 until further notice.

Get reimbursed at the same rate as face-to-face visits

Common services

- Routine checkups
- General wellness visits
- New patient exams
- Behavioral assessments

Common codes

- Outpatient evaluation and management (E&M) codes for new and established patients (99202–99215)
- Physical and occupational therapy E&M codes (97161–97168)
- Telephone-only E&M codes (99441–99443)
- Annual wellness visit codes (G0438 and G0439)

Digital solutions

The right electronic tools for you and your practice

We offer solutions to help providers reduce their administrative burden and make it easier to do business with us.

Committed to making your life easier

Provider website

- Verify eligibility and benefits.
- Check claim status information.
- Submit reconsideration and appeals.
- View precertification status.
- Enroll and manage electronic funds transfer (EFT).
- Access remittance reports.
- Access resources, including video tutorials, clinical reimbursement and payment policies, and provider reference guides.

Trading partners and electronic data interchange (EDI) vendors

Health Information Portability and Accountability Act 5010 transactions

- Submit claims electronically, including coordination of benefit claims.
- Receive payment information, including claim status.
- Submit eligibility and benefit inquiries.
- Submit request for precertification review.

To take a self-guided tour:
Go to CignaforHCP.com > Quick website overview.

For more information about transaction availability:*
Go to Cigna.com/EDIvendors.

cigna healthcare

* Availability varies by partner/vendor.

EFT enrollment

When you enroll, you'll be able to:

- Receive payments directly into your checking or savings account – no mail delays.
- Access funds on the day of payment.
- Receive bulk deposits instead of multiple separate checks.
- Increase efficiency and improve cash flow.
- View and share remittance reports on the day of payment.

To enroll in EFT:

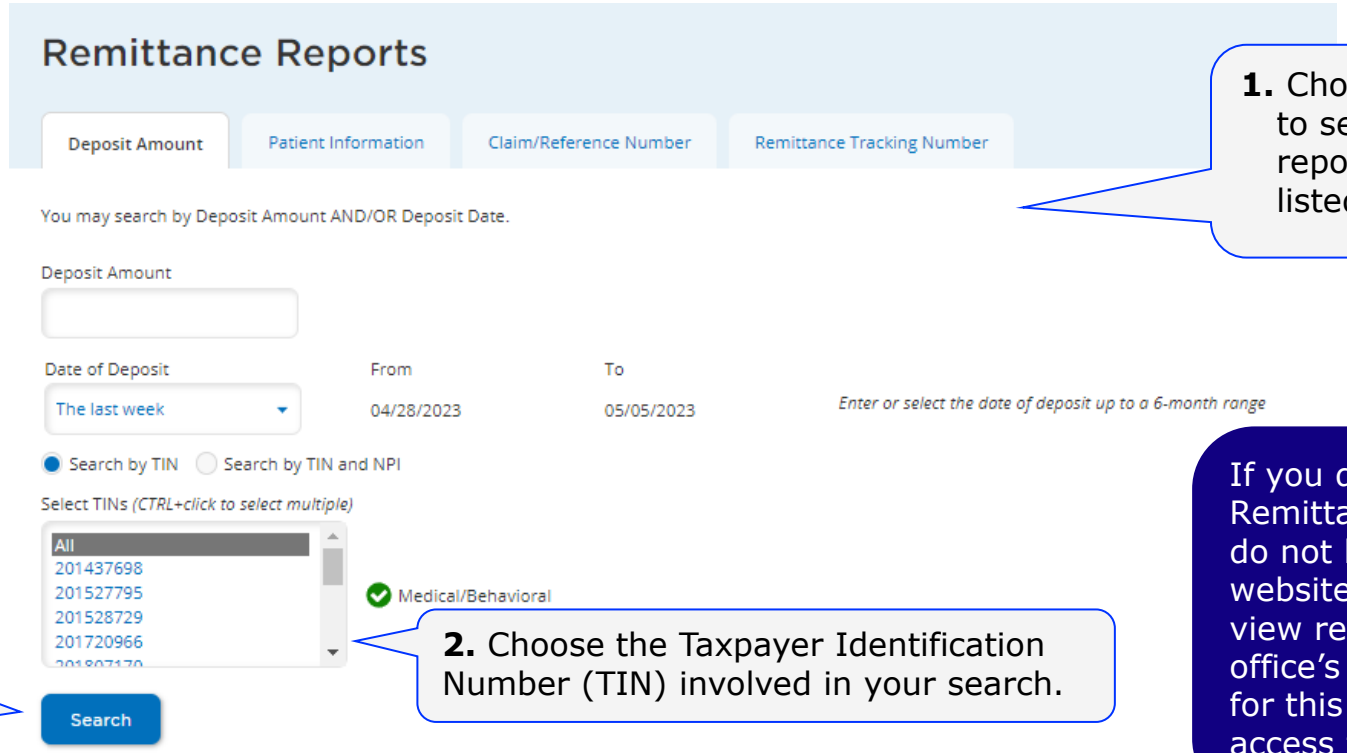
Log in to CignaforHCP.com
> Working With Cigna
> Electronic Funds Transfer (EFT).*

* Requires the appropriate level of CignaforHCP.com access. Ask your Website Access Manager to assign you access to this functionality.

Search for a remittance report

Once your EFT enrollment is complete, you will be able to access and view your remittance reports online the same day you receive your electronic payment.

If searching by deposit, you can enter a dollar amount, leave the field blank for all deposits and zero pays, or enter 0 for zero pays only.*



1. Choose any of four ways to search for a remittance report and complete the listed fields.

2. Choose the Taxpayer Identification Number (TIN) involved in your search.

3. Click Search.

If you do not see the Remittance Reports link, you do not have the level of website access necessary to view reports. Ask your office's primary administrator for this website to assign you access to this functionality.

* Limited search dates required for last two options due to volume.

Digital ID cards are here

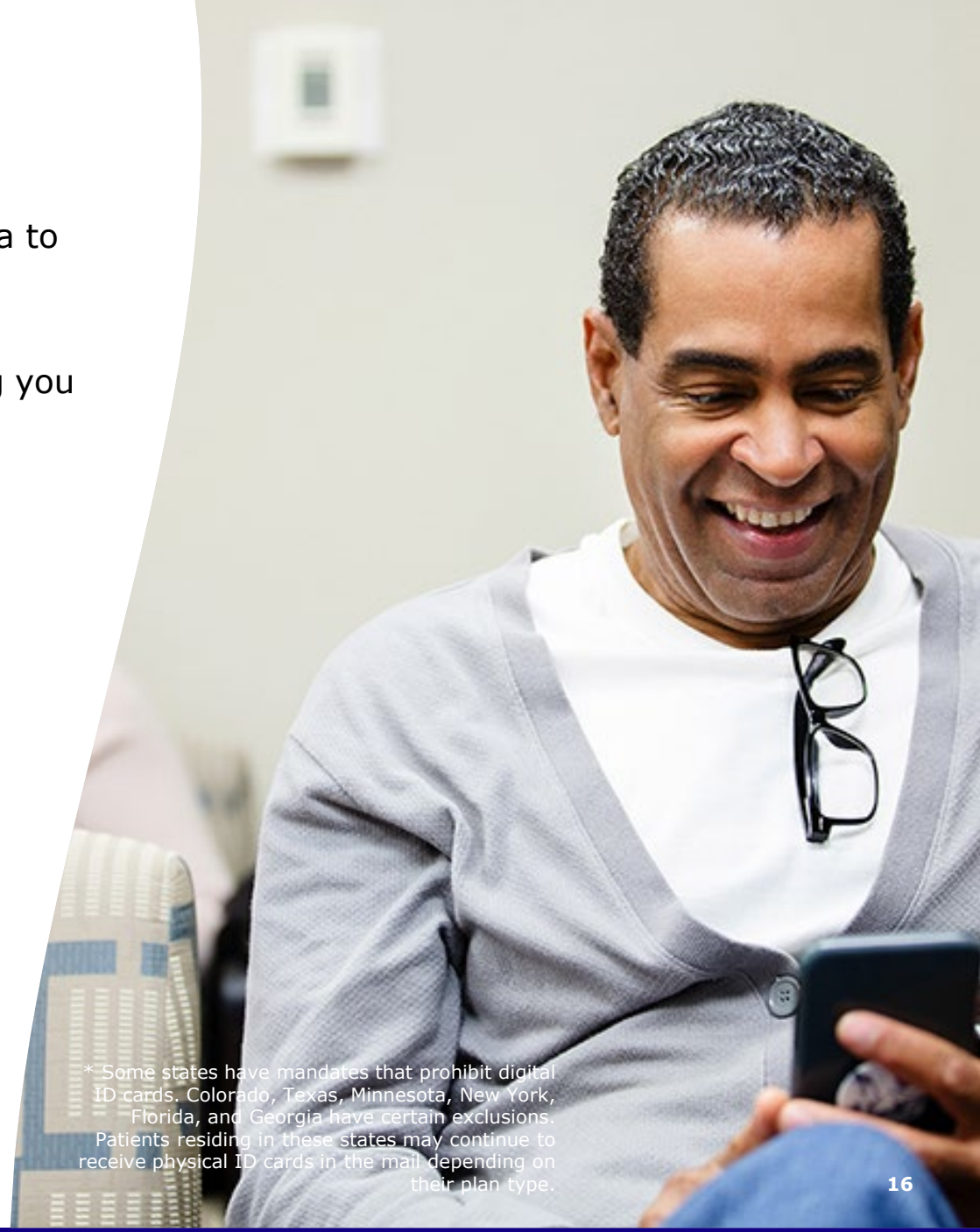
Cigna Healthcare continues to leverage the power of technology and data to accelerate its transition to fully adopt digital-only ID cards.*

Your patients with Cigna Healthcare coverage may already be presenting you with a digital version of their ID card. They can share it by:

- Showing it to you on their smart phone or tablet.
- Uploading it to your health portal (as technology allows).
- Emailing it directly to your office.
- Printing a copy.

To learn more:

Go to CignaforHCP.com
> Get questions answered: Resource
> Medical Resources
> Doing Business With Cigna: View Documents
> Digital ID cards.



* Some states have mandates that prohibit digital ID cards. Colorado, Texas, Minnesota, New York, Florida, and Georgia have certain exclusions. Patients residing in these states may continue to receive physical ID cards in the mail depending on their plan type.

Claim submission, payments, and appeals

Easily access claim information

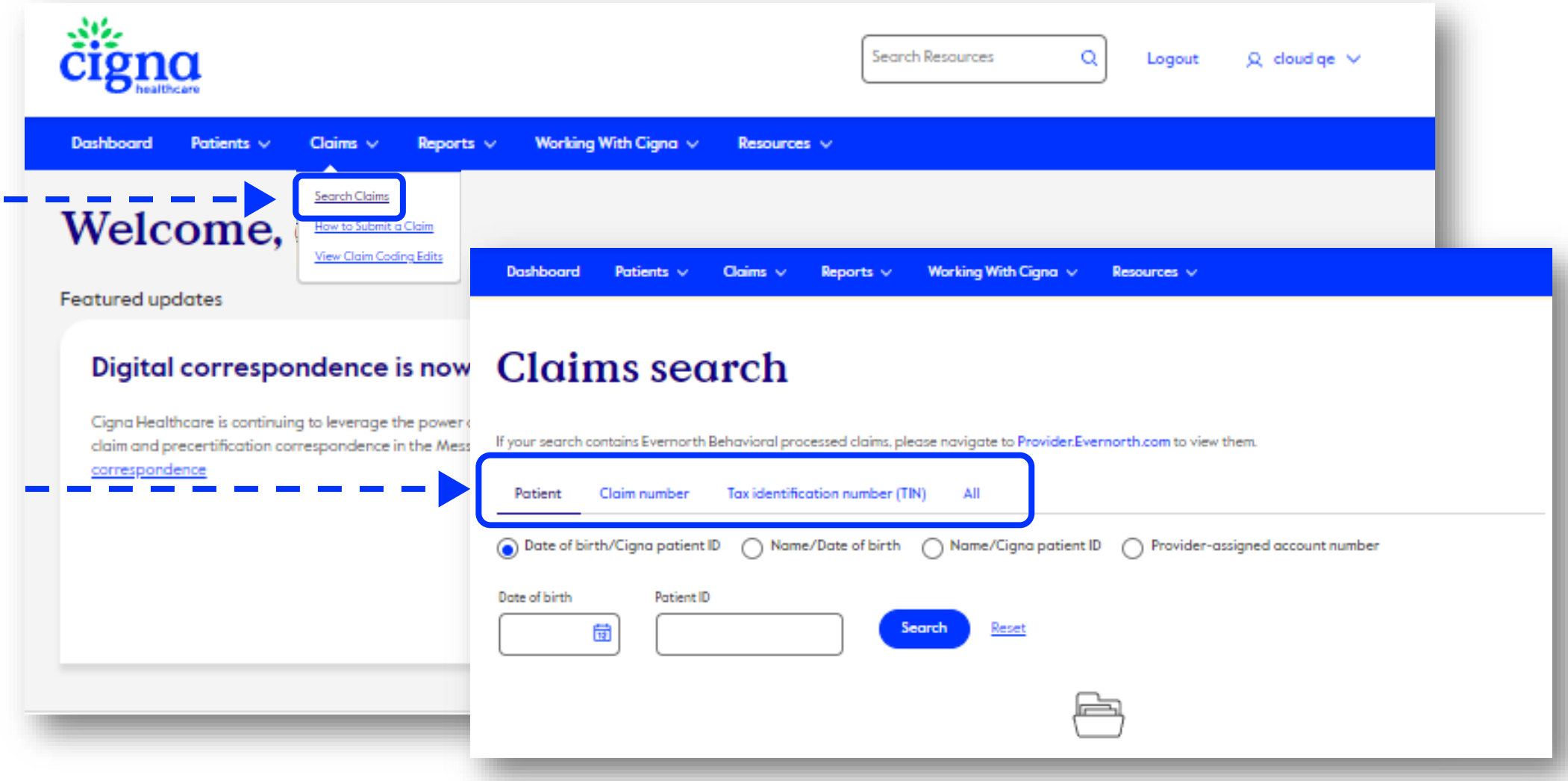
Claim search feature

- Search function with broadened capabilities
- Claim information at an organizational level
- Flexibility
- Results in a table
- Filter option for results
- Report download option

Get a holistic view of your claims

To get started, click “Search Claims” from the claims drop-down menu.

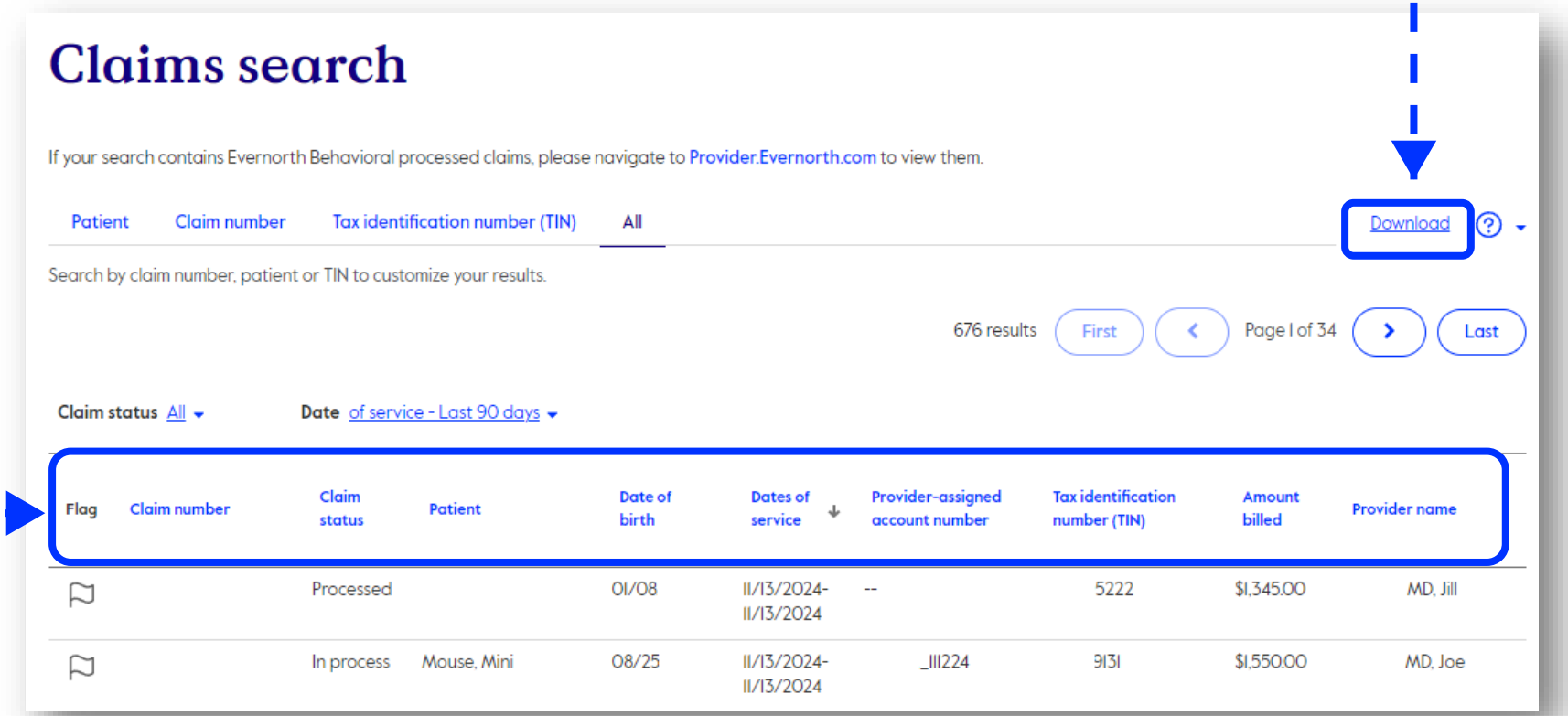
To search for your claims, click the search option you would like to use.



Display the claim information you need

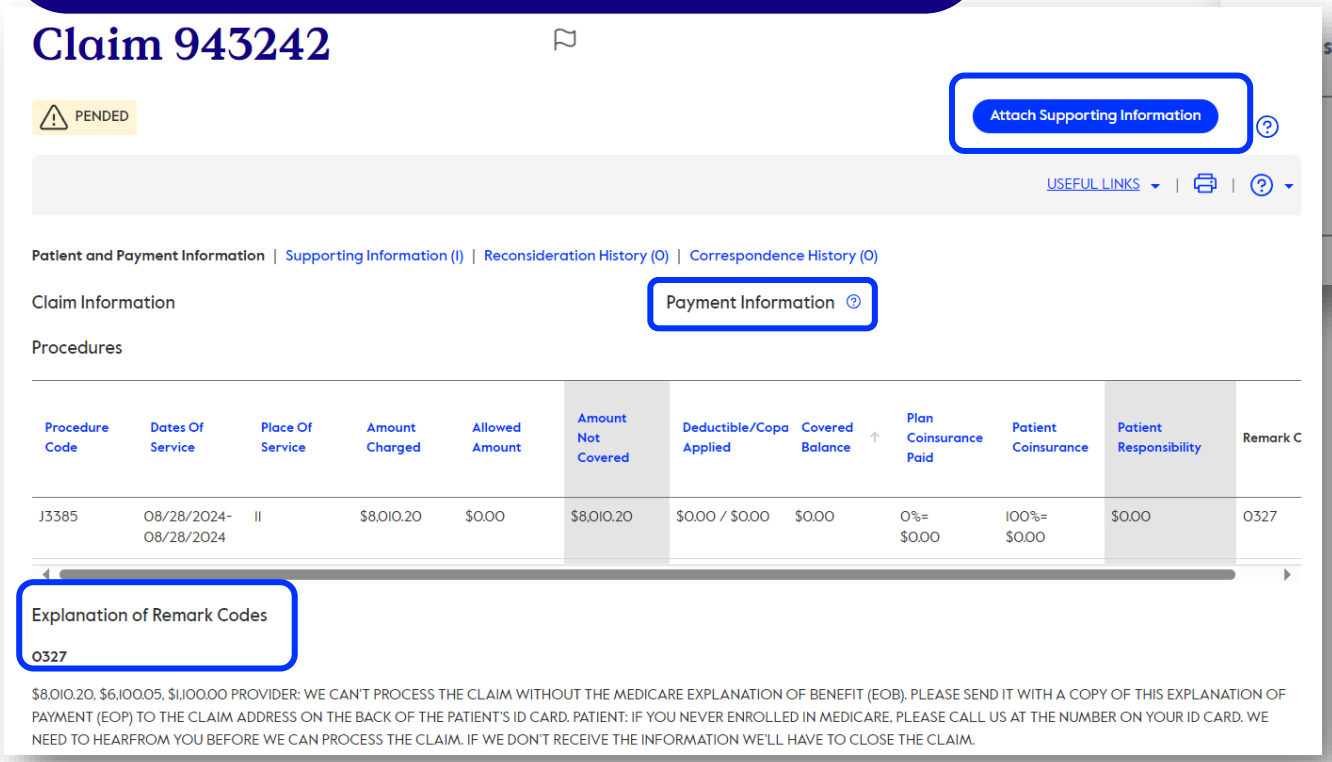
Click "Download" to download the results.

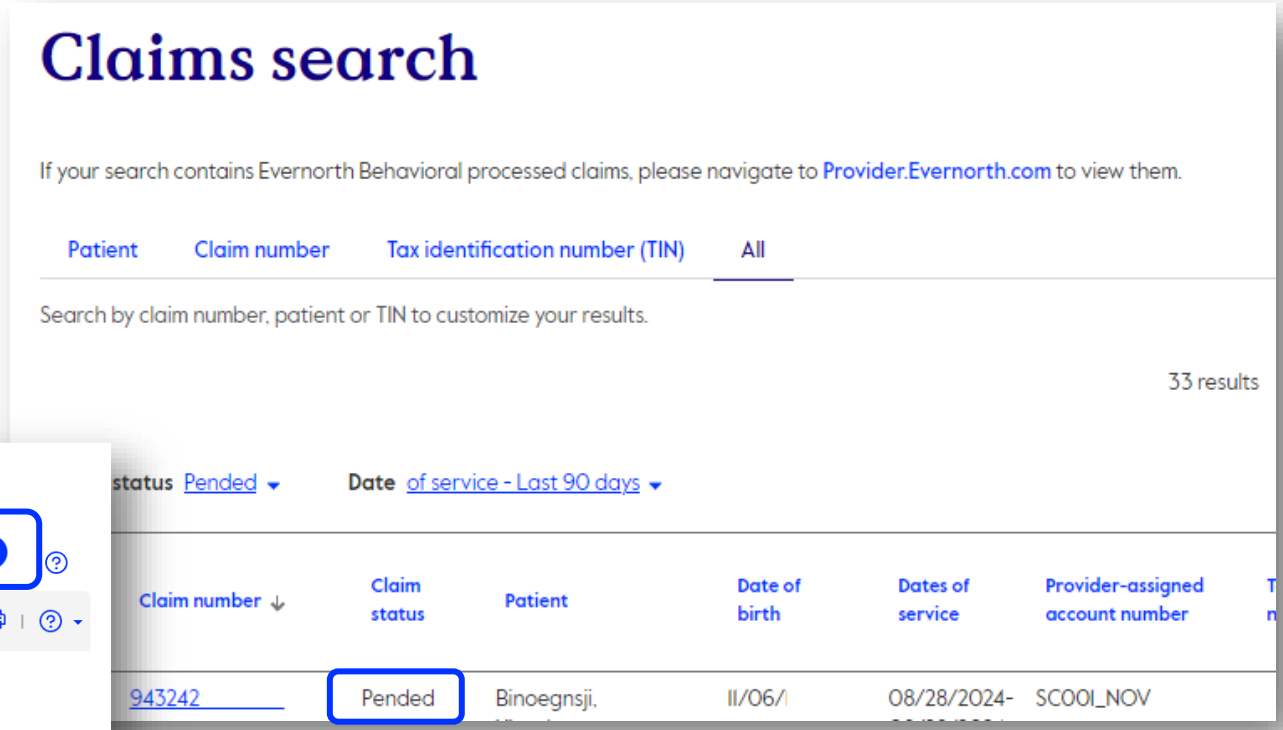
- Flag claims to save them to your dashboard for easy access.
- Click the claim number to view in-depth details about the claim.
- Sort by any of the columns by clicking on the heading.



View pended claim details

Search for, identify, and check the status of the claim.





Pended claim details

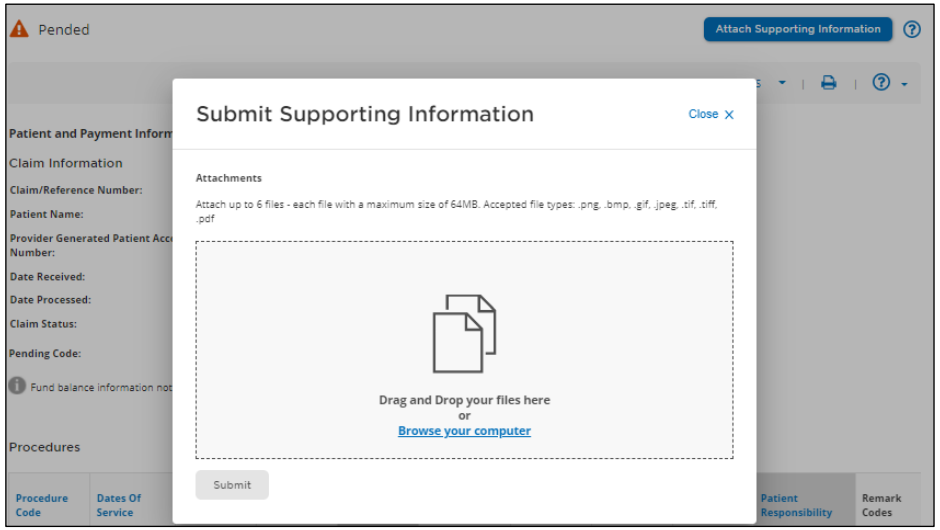
- Know why a claim is pended by the remark code description.
- Access help by clicking "?".
- View previously submitted attachment details, including who and when.

Submit the requested information

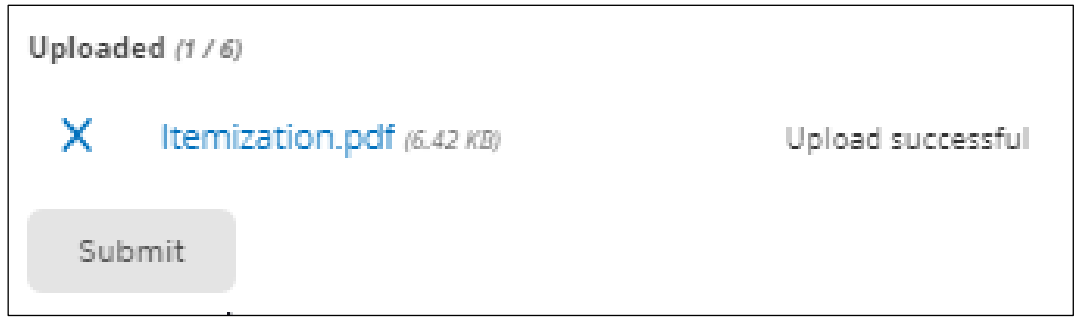
1. Attach up to six files.

Each file may be a maximum of 64MB. Total of 999 pages.

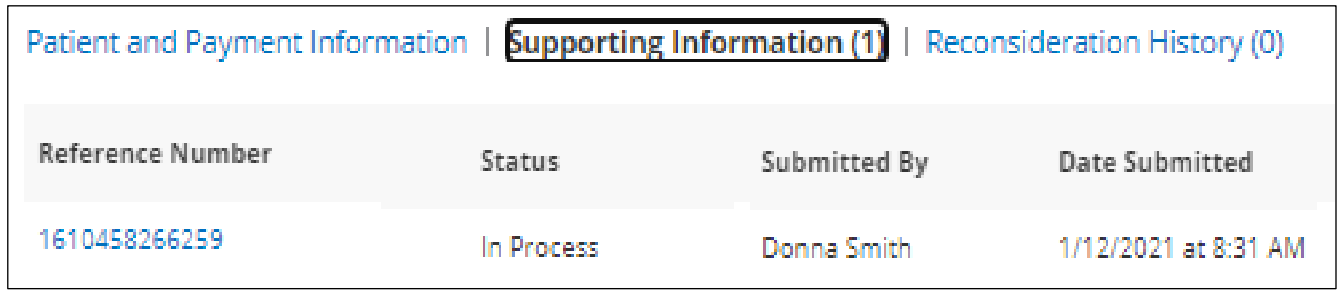
File types: .bmp, .png, .jpg, .gif, .tif, and .pdf.



2. See the status of the upload and click "Submit."



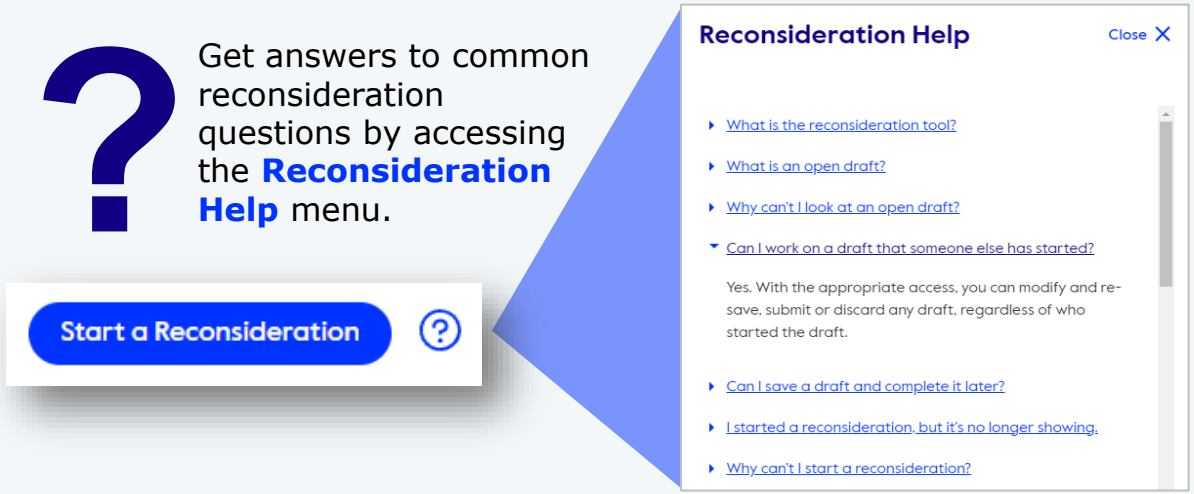
3. Receive a reference number.



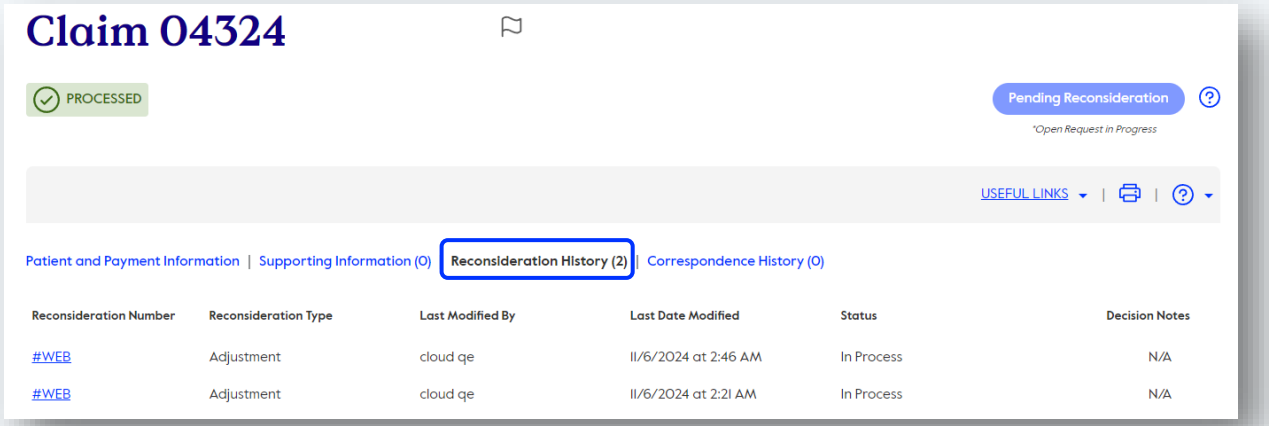
Find the answers you need

Claim reconsiderations and appeals

Get answers to common reconsideration questions by accessing the **Reconsideration Help** menu.



The **Reconsideration History** section will display status and the Cigna Healthcare processor's name and decision notes.

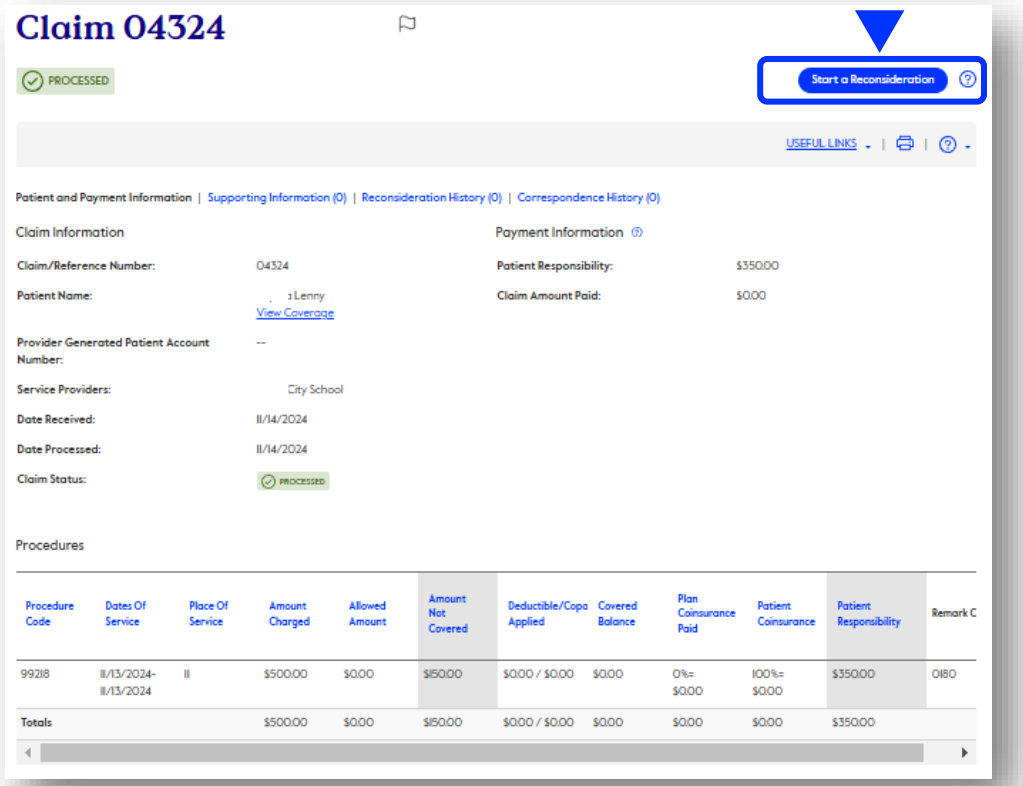


Experience an improved process

You no longer need to call to start a claim reconsideration or appeal

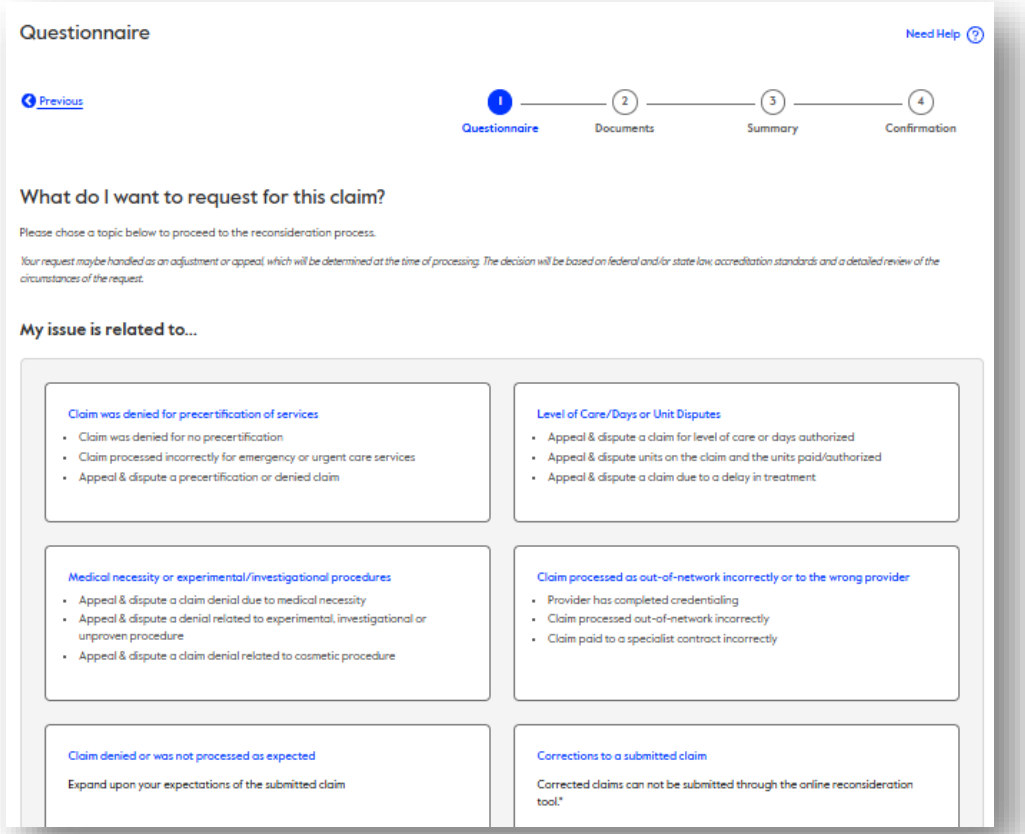
Start a reconsideration

Access the reconsideration button directly from the claim details screen.



Step-by-step guidance speeds up and simplifies the process.

- Describe your reason for the request in the notes section.
- Attach documentation, if needed.



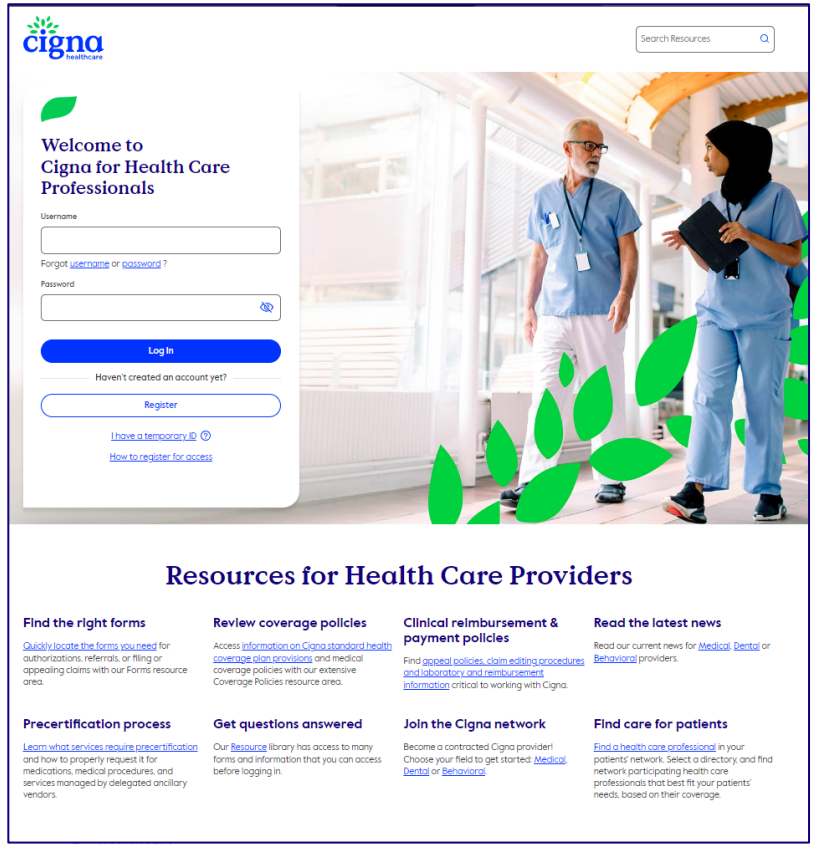
Provider resources

Tools to make your life easier

Easily access the information you need

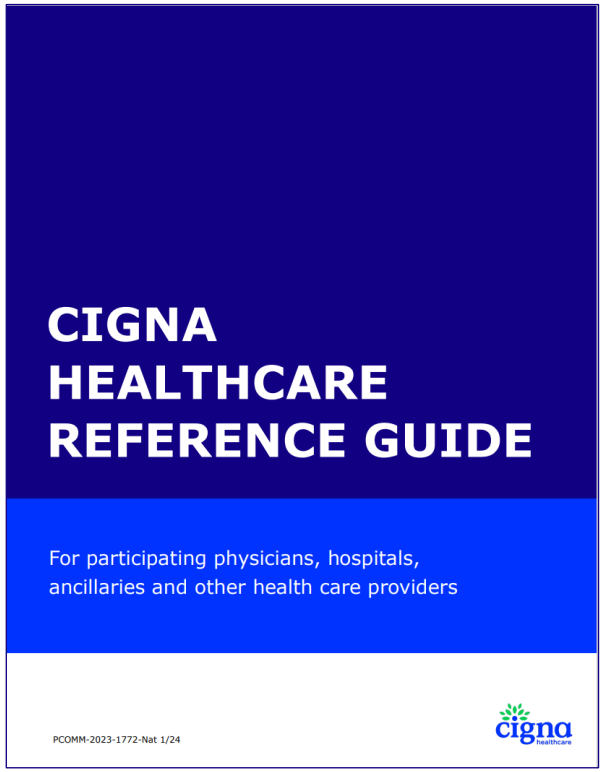
Provider portal

Go to the Cigna for Health Care Professionals portal(CignaforHCP.com).



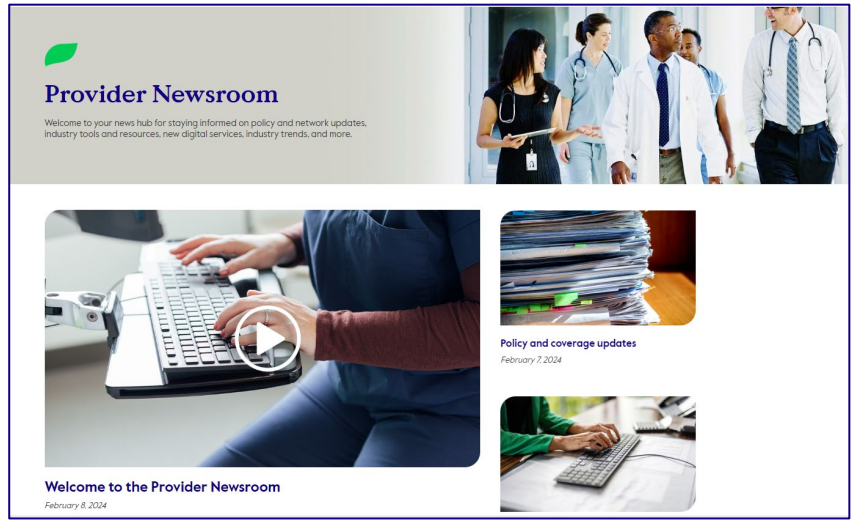
Provider Reference Guide

Log in to CignaforHCP.com > Resources > Reference Guides.



Provider Newsroom

Access news and updates on topics that are most important to you — all in one place. Go to ProviderNewsroom.com.



Note: The Provider Newsroom replaced these provider newsletters: *Network News, Network Insider, and Transformations*.

Use our resources to improve your experience

Digital solutions

Access our self-service tools to improve your office's efficiency and reduce your administrative burden. For more information, visit the Medical Education and Training resource page.

Webinars

Learn how to navigate CignaforHCP.com and perform time-saving transactions (e.g., eligibility and benefits inquiries, claim status inquiries, EFT enrollment). To register for a webinar, view the webinar schedule.

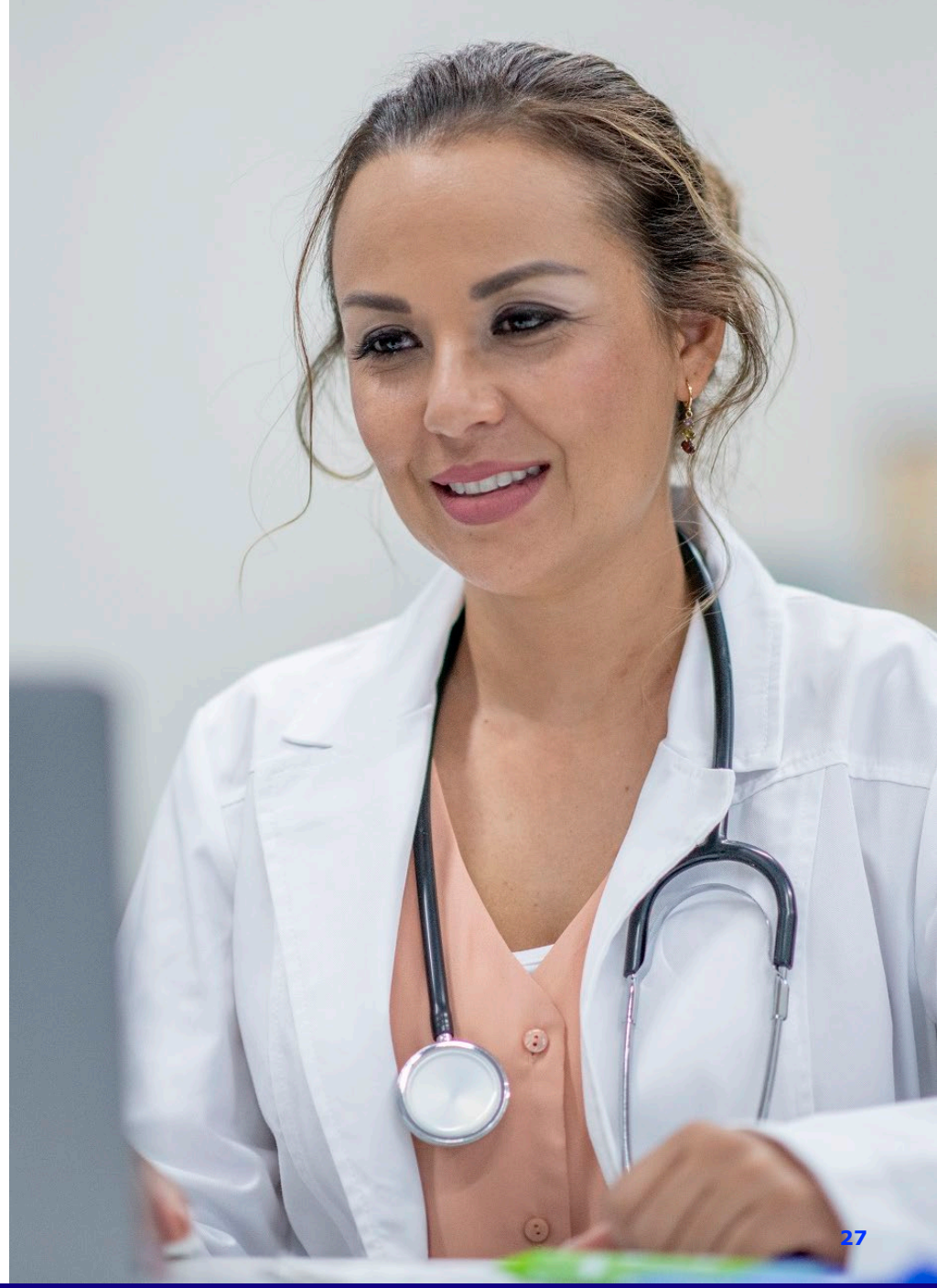
Quick Guide to Cigna Healthcare ID Cards

View sample ID cards with descriptions of the various fields on the cards. You may save, download, or print card guides for use in your office.

Questions?

Call Cigna Healthcare Provider Service at

800.88Cigna (882.4462).



Update your demographic information

We use your demographic information to:

- Publish online provider directories.
- Send important communications to you.
- Process claims.
- Assign a primary care provider to individuals whose plan requires one but who haven't made a selection.
- Comply with state laws.
- Determine network adequacy.

To submit demographic changes:*

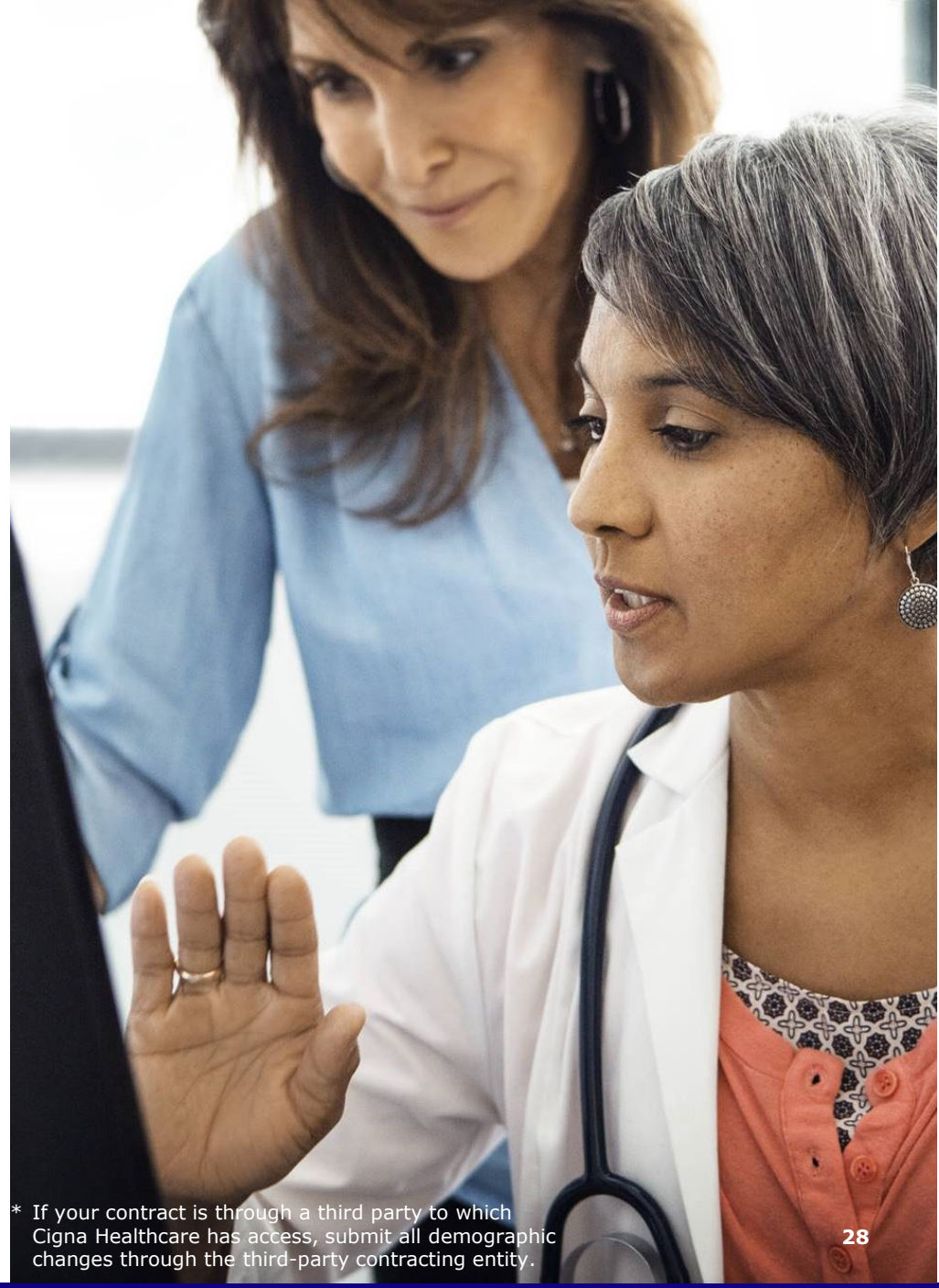
Log in to CignaforHCP.com
> Working With Cigna
> Directory update

You may also submit demographic changes as directed below.

- Practitioner and group changes
  Fax: **877.358.4301** *or*
  Email Intake_PDM@evernorth.com
- Hospital and ancillary changes only
  Fax: **646.459.2180**

Please notify us in writing

90 days before changing your office or billing address, telephone number, TIN, National Provider Identifier, or specialty.



* If your contract is through a third party to which Cigna Healthcare has access, submit all demographic changes through the third-party contracting entity.

Q&A

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