

Enhancing lives, together

Improving the health and vitality of those we serve



Agenda

Welcome!

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

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

Advocating for better health

*We're here to **partner** and **collaborate** with you to make it easier to **deliver personalized care**, **strengthen** patient relationships and achieve better health outcomes.*

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 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

Guidelines

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

Complete information about when and where to submit precertification requests to Cigna and Cigna's national ancillary vendors are available on the Cigna for Health Care Professionals website (SignaforHCP.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 SignaforHCP.com > Resources > Clinical Reimbursement Policies and Payment Policies > Precertification Policies.

If you are not registered for the website, go to SignaforHCP.com > [Register](#).



Clinical, reimbursement, and administrative policy updates



For additional information, log in to CignaforHCP.com.

Go to Resources > Clinical Reimbursement Policies and Payment Policies > Reimbursement and Modifier Policies.

Effective	Policy name
April 2023	• Headache and Occipital Neuralgia Treatment (0063) • Ambulatory External and Implantable Electrocardiographic Monitoring (0547) • Evaluation and Management Services (R30)
May 2023	• Revenue Code Billing Requirements (R41) • Modifier 25 – Significant, Separately Identifiable Evaluation and Management Service by the Same Physician on the Same Day of the Procedure or Other Service (M25)
July 2023	• Genetic Testing (R28)

Preventive care services policy updates

On January 1, 2023, updates became effective for Cigna's Preventive Care Services Administrative Policy (A004).

Description	Update	Codes
Breast-feeding equipment and supplies	Added one Healthcare Common Procedure Coding System (HCPCS) code for breast-feeding equipment and supplies	HCPCS code K1005
Surgical sterilization procedures for women	Removed four Current Procedural Terminology (CPT®) codes and one HCPCS code associated with the Essure device, which is no longer available in the U.S.	CPT codes 58340, 58565, 74740, and 76830, and HCPCS code A4264
Women's contraceptive services	Added one HCPCS code for contraceptive supplies	HCPCS code A4267

For additional guidance on preventive care services, refer to the Preventive Care Services Administrative Policy (A004) on the Cigna for Health Care Professionals website ([CignaforHCP.com](https://www.cignaforhcp.com)) > Review coverage policies > Medical and Administrative A-Z Index > [Preventive Care Services – \(A004\)](#).

Key updates: COVID-19 coverage

The COVID-19 national emergency and public health emergency (PHE) ended on May 11, 2023. As a result, the following changes took effect on May 12, 2023:

Virtual care policy:

- On **January 1, 2021**, we implemented a new [Virtual Care Reimbursement Policy \(R31\)](https://CignaforHCP.com/virtualcare). Please visit CignaforHCP.com/virtualcare for additional information about that policy.
- Virtual preventive services (99381-99387 and 99391-99397) are now permanently reimbursable as part of our Virtual Care Reimbursement Policy (R31).
- Virtual care services billed by urgent care centers with code S9083 are no longer reimbursable.
- Virtual skilled nursing facility codes (99307-99310) are no longer reimbursable.
- Cost-share applies for all virtual services.

Cost share:

- Customer cost-share now applies to COVID-19 lab tests as well as antiviral and therapeutics approved by the U.S Food & Drug Administration (FDA).
- For most benefit plans, COVID-19 vaccines remain covered at 100 percent under the preventive benefit (same as the flu shot) when customers go to an in-network provider.

Key updates: COVID-19 coverage (cont.)

Reimbursement

- Cigna will continue to reimburse providers for covered COVID-19 related services (e.g., vaccine administration, infusion treatments, and COVID testing) at CMS rates after the end of the PHE. Please note that we expect to reimburse at contracted rates later this year (targeting August 1, 2023) subject to applicable law. We will confirm the date and additional information soon.

Additionally:

- Authorizations for facility-to-facility transfers are again required.
- Our [COVID-19: In Vitro Diagnostic Testing coverage policy](#) was updated to reflect the latest coverage information for symptomatic and asymptomatic testing.
- Our temporary accommodation to extend the authorization approval window from three months to six months has been permanently extended to six months.
- The accommodation to extend the timely filing window will end on July 10, 2023.

For more information:

- For our COVID-19 Vaccine coverage policy, go to [CignaforHCP.com](#) > Review Coverage Policies: information on Cigna standard health coverage plan provisions > Pharmacy (Drugs & Biologics) A-Z Index: View Documents > [COVID-19 Vaccine \(2029\)](#).
- Additional information about these updates is available at [CignaforHCP.com](#) > [Cigna's Response to Coronavirus](#).



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 on the Cigna for Health Care Professionals website (CignaforHCP.com/VirtualCare).

Cost-share

Customers' cost-share were waived for virtual services related to COVID-19 through May 11, 2023. Effective May 12, 2023, cost-share apply for all 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)



Behavioral health resources

For your patients with Cigna coverage



Let us help

We understand that sometimes your patients may need additional behavioral health care services. That is why we offer several resources to make it easier for you to refer to behavioral health providers in Cigna's network.



Quickly access behavioral health information

The [behavioral health quick reference flyer](#) provides information on behavioral health providers in Cigna's network as well as additional resources:*

- Behavioral medication general questions
- Employee Assistance Program
- Referrals (in-person and virtual)
- Specialty coaching programs and services

**BEHAVIORAL HEALTH**
Provider Quick Referral Resources Guide

Easy referrals
Express Scripts® Pharmacy | 24 hours / 365 days | 800.282.2861 | Ask to speak with a pharmacist.

Escalated cases
Provider only direct line
24 hours / 365 days
855.873.6189

Behavioral Medication General Questions (Provider Contact)
Express Scripts® Pharmacy | 24 hours / 365 days | 800.282.2861 | Ask to speak with a pharmacist.

Employee Assistance Program (EAP) Cigna | 877.622.4327 (May not be available to all patients)
These services typically include three or more therapy visits at no cost to your patient. Patients with Cigna EAP benefits should log in to myCigna.com to first obtain an EAP code and then locate network-participating providers. For patients with group coverage and no EAP benefit, refer to their employer resources. Note: Cigna Individual & Family Plans don't have this benefit.

Referral Resources¹
Patients can search myCigna.com, their personalized website, which puts all of their plan information and resources right at their fingertips. They can find participating providers, including virtual and fast access providers, learn what provider types are most appropriate based on their needs, and review other digital and virtual resources. For higher levels of care, patients can search for our Center of Excellence (COE) designations for mental health, substance use, eating disorders, and child and adolescent care. Patients can also call the number on their ID card for behavioral health provider information and resources.

Referral Reason	Digital / Virtual
• General depression, anxiety, stress • Outpatient evaluation, counseling, medical management • Back pain, chronic pain • Adolescent, young adult • Complex, chronic, comorbidity • Burnout	• Brightline (age 18 months - 17) - Pediatric behavioral health provider that provides support for children, teens, and parents (nationwide, except in Minnesota) https://www.brightlinecare.com/benefits • Brightside (age 18+) - Anxiety and depression care with evidence-based therapy, medication, and provider support (nationwide, except in Minnesota) https://www.brightside.com/insurance • Ginger (age 18+) - On-demand behavioral health coaching, therapy, psychiatry by appt https://www.ginger.com/connect • MDLIVE® (age 10+) - Scheduled visits for behavioral health: therapy, psychiatry https://MDLIVE.com Help: 888.726.3171 Mental health crisis: 855.806.5469 • Talkspace® (age 13+) - Messaging and virtual visits; therapy, psychiatry, and medication management. https://www.talkspace.com/covered

Referral Reason	Referral Resource
Urgent or same-day care	Cigna Crisis Line: Ph: 800.244.6224 ask to speak with Behavioral Triage.
Specialized outpatient referrals including perinatal, pediatric, other languages	Provider referral: Ph: 855.873.6189 Cigna customers: Call the number on their ID card Visit myCigna.com
Obsessive compulsive disorder (OCD)	NOCD - Virtual OCD treatment for Cigna customers via live video sessions with a licensed therapist. https://www.treatmyocd.com/ Ph: 312.796.6780 call or text
Higher levels of care for mental health, substance use, and eating disorders	Cigna Centers of Excellence program ³ Provider referral: Ph: 855.873.6189 Cigna customers: Call the number on their ID card visit myCigna.com
Medication-assisted treatment (MAT) for opioid use disorders	• Accredo ™ MAT referrals for Vivitrol® and SUBLOCADE® Ph: 877.826.7657
Social determinants of health (SDoH)	Providers can help their patients find resources to address food insecurity, housing, and other SDoH needs. Cigna Community Find Help website: CignaCommunityFindHelp.com Cigna Network Navigator: National patient resource list

¹ Note that these programs and services may vary by your patients' plan benefits. Provider types may include social workers, counselors, psychiatric nurse practitioners, and psychiatrists.
² Provider group accepts Cigna EAP.
³ The Cigna Centers of Excellence program is not available in all areas. For patients in these areas, please use the same contact information shown in this section to find other network-participating facilities.
⁴ Availability subject to patients' Cigna benefit plan.

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Specialty coaching programs and services⁴ - Programs/products vary by patient's plan

Autism specialty care program
Assists families with **locating services, understanding benefits, and coordinating outpatient care** for children, adolescents, and adults with a diagnosis on the autism spectrum.

Changing Lives by Integrating Mind & Body (CLIMB)
Helps individuals incorporate mindfulness and stress management into their everyday lives. Group sessions available. Free podcasts available to anyone by going to [Cigna.com > Individuals & Families > Health and Wellness > CLIMB Mindfulness Podcasts](#).

Eating disorders specialty care program
Manages and **coordinates all treating providers and services** that are essential to this clinically complex, costly, and difficult-to-treat diagnosis. **Educates your patient** and family members about treatment options recommended by the doctor. Will refer to Eating Disorder Center of Excellence, when appropriate.

Intensive behavioral case management
Focuses on individuals with **complex mental health or substance use conditions** at high risk for readmission. Helps your patients and their families focus on treatment adherence and medication compliance, and makes referrals to health care providers and community-based resources. Top diagnoses include depression, bipolar disorder, and drug dependence.

Lifestyle management programs
Available for tobacco cessation, weight management, and stress management.

Opioid and pain management
Provides **evidence-based education, resources, and care coordination**. Improves an individual's ability to function, and enhances the quality of life through increased pain relief with reduced reliance on pain relievers. Helps customers **explore the mind/body connection** and introduces **pain management tools** to help them improve their physical and emotional health, and the safe use of opioids when they're needed.

Parents and families
Provides support to parents and family members, from small children to young adults, **empowering them to advocate** for their loved one effectively.

Substance use specialty care program
Removes barriers to accessing and engaging in treatment for customers with substance use disorders. Works closely with individuals to help ensure they are engaged in the appropriate treatment for their condition and lifestyle.

⁴ Availability subject to patients' Cigna benefit plan.

Together, all the way.™



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*Resources and services may be subject to a patient's plan.

Digital solutions

The right electronic tools for you
and your practice



Reduce your administrative burden

Our convenient, easy-to-use digital tools can help you:

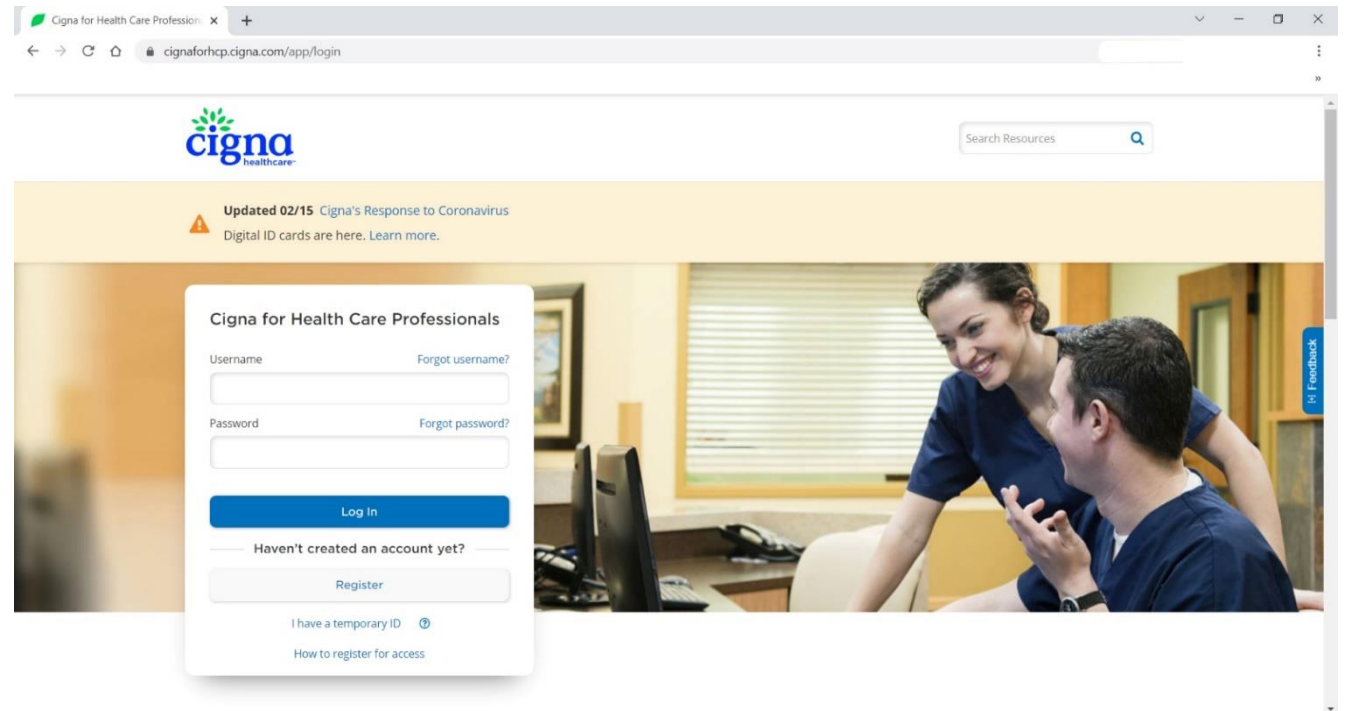
- Streamline your office workflow and increase productivity.
- Save time and money.
- Access patient information when and how you need it.



Get support for the way you work

The Cigna for Health Care Professionals website (CignaforHCP.com) allows you to:

- Verify eligibility and benefits and generate a benefit reference number.
- Look up procedure codes.
- Check claim status and upload attachments for pended claims.
- Submit reconsideration and appeals.
- Submit preservice precertification appeals.
- View important policy and procedure information.



Take a self-guided tour at CignaforHCP.com > **Quick website overview.**

Streamline workflow and increase productivity



Use one of our electronic data interchange (EDI) vendors* to do the following:

- **Submit claims electronically (837)**, including corrected claims and coordination of benefit (COB) claims.
- **Receive payment information (835)**, including the amount paid and when the check or electronic funds transfer was issued.
- **Submit eligibility and benefit inquiries (270/271)** and track claim status **(276/277)**.
 - > Receive a real-time response in seconds.
 - > Obtain benefit information, including medical and dental preventive care, vision, maternity, infertility, allergy injections, well-child care, and inpatient and outpatient psychiatric services.
 - > Receive remaining health plan deductible and coinsurance amounts.
 - > Obtain COB and shared administration or alliance information.
 - > Obtain claim status and receive responses using the Health Insurance Portability and Accountability Act of 1996 standard health care claim status codes.
- **Submit precertification review or referral requests (278)** for medical health care services.
 - > Request for review and response **(278RR)**
 - > Notification - discharge only **(278N)**
 - > Inquiry **(278I)**

Claim submission, payments, and appeals



Automate your claims process

Use one of our electronic data interchange (EDI) vendors to:

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



Visit [Cigna.com/EDIVendors](https://www.cigna.com/EDIVendors) for a list of vendors and the transactions they support.



Experience streamlined payment processes

By enrolling in **electronic funds transfer (EFT)**, you can:

- Eliminate paper check mail delivery and handling.
- Access funds on the same day as the deposit.
- View a separate remittance report online for each deposit.
- Easily reconcile payments using a single remittance tracking number.

With **electronic remittance advice (ERA)**, your remittance information can be automatically loaded into your accounts receivable system, which can:

- Reduce costs and save time.
- Decrease posting errors.
- Shorten the payment cycle.



Enroll in EFT by logging in to CignaforHCP.com > Working with Cigna > Enroll in Electronic Funds Transfer (EFT) Options.



Enroll in ERA through your EDI vendor.

Easily access your payments

- Access your remittance reports online the same day you receive your electronic deposit.
- Search, store, and share payment information.
- View explanations of your processed claims.
- Reconcile payments using a single remittance tracking number on your EFT report, ERA, or online remittance report.
- View each claim within the deposit.
- Search within the remittance report for specific patients or claims.



Once enrolled in EFT, you can access your remittance reports via SignaforHCP.com.



Easily access claim information

Features of Claims 360

- 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.

The screenshot displays the Cigna Healthcare portal. At the top, the Cigna logo is on the left, and a search bar, 'Logout', and a 'Demo Test' dropdown are on the right. A navigation bar includes 'Dashboard', 'Patients', 'Working With Cigna', and 'Resources'. A dropdown menu under 'Patients' is open, showing 'Search Claims' (highlighted with a blue box and a dashed arrow from the text 'click "Search Claims"'), 'How to Submit a Claim', and 'View Claim Coding Ed'. Below the navigation bar, a 'Welcome, De' message is partially visible. The main content area has a secondary navigation bar with 'Dashboard', 'Patients', 'Claims' (highlighted with a blue box and a dashed arrow from the text 'click the search option'), 'Reports', 'Working With Cigna', and 'Resources'. A yellow banner below the navigation bar reads 'Updated 4/23 Cigna's Response to Coronavirus'. The 'Claims search' section follows, with a note: 'The claim status displayed here may take up to 24-hours to match the status displayed on the claim detail. If your search contains Evernorth Behavioral processed claims, please navigate to Provider.Evernorth.com to view them.' Below this, a search criteria selector is highlighted with a blue box and a dashed arrow from the text 'click the search option you would like to use'. The selector has four tabs: 'Patient' (selected), 'Claim Number', 'Tax Identification Number (TIN)', and 'All'. Under the 'Patient' tab, there are four radio button options: 'Date of birth/Cigna patient ID' (selected), 'Name/Date of birth', 'Name/Cigna patient ID', and 'Provider-assigned account number'. Below these are two input fields: 'Date of birth' (with a calendar icon) and 'Patient ID'. To the right of these fields are 'Search' and 'Reset' buttons. At the bottom, there is a folder icon and a note: 'Enter search criteria in the fields above for patient, claim number or TIN to customize your results.'

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.

DashboardPatientsClaimsReportsWorking With CignaResources

Claims search

The claim status displayed here may take up to 24-hours to match the status displayed on the claim detail.
If your search contains Evernorth Behavioral processed claims, please navigate to [Provider.Evernorth.com](#) to view them.

PatientClaim NumberTax Identification Number (TIN)All

Search by claim number, patient or TIN to customize your results.

764 resultsFirst<Page 1 of 39>Last

Flag	Claim number	Claim status	Patient	Date of birth	Dates of service	Provider-assigned account number	Tax identification number (TIN)	Amount billed	Provider name
	8432211290001	Denied	Public, John Q. 10000000 00	04/12/1973	11/16/2020-11/16/2020	EPSQE027104224206	201789523	\$200.00	.MD, Doctor
	2204M0020700	Processed	Doe, Joan U99999999	03/08/1979	04/02/2022-04/02/2022		222280085	\$150.00	.DO, Senior
	0432211110004	Processed	Smith, Smitty 8675309	03/22/1969	04/16/2022-04/16/2022		582566391	\$200.00	Any Hospital



View pended claim details

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

Claim 768190012345

Pended

Attach Supporting Information

Patient and Payment Information

Supporting Information (2)

Reconsideration History (0)

Claim Information

Payment Information

Procedures

Procedure Code	Dates Of Service	Amount Charged	Allowed Amount	Amount Not Covered	Deductible/Copay Applied	Covered Balance	Plan Coinsurance Paid	Patient Coinsurance	Patient Responsibility	Remark Codes
J2778	11/17/2020	\$5,408.00	\$0.00	\$0.00	\$0.00 / \$0.00	\$0.00	\$0.00	\$0.00	\$0.00	ZDQ
Totals		\$5,408.00	\$0.00	\$0.00	\$0.00 / \$0.00	\$0.00	\$0.00	\$0.00	\$0.00	

Explanation of Remark Codes

ZDQ

\$0.00 ADDITIONAL INFORMATION REQUIRED: PROVIDER, PLEASE SUBMIT MEDICAL RECORDS AND AN ITEMIZED HOSPITAL BILL WITH A COPY OF THIS REQUEST.

Cigna

Search Resources

LogoutSalesmed Wamuser

DashboardPatientsClaimsReportsWorking With CignaResources

Claim Search > Results

Claim Results

You searched for:

Patient ID: K0123456789 | Patient First Name: Kelly | Patient Last Name: Trent | Date of Service ranges from: 02/21/2020 - 02/21/2020 | View Coverage

USEFUL LINKS

Print

Help

Table(s) of Service

Date Received

Date Processed

Paid Amount

Charge Amount

Patient Responsibility

Servicing Provider

Status

Codes

02/21/2020

02/21/2020

05/31/2020

\$1,230.48

\$2,047.00

\$844.52

PROVIDER MD/BAT

Pended

A2 ...

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. — — — — —
2. See the status of the upload and click “Submit.”

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

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

Pended

Attach Supporting Information

Submit Supporting Information

Close X

Attachments

Attach up to 6 files - each file with a maximum size of 64MB. Accepted file types: .png, .bmp, .gif, .jpeg, .tif, .tiff, .pdf.

Drag and Drop your files here or [Browse your computer](#)

Submit

Uploaded (1 / 6)

X

Itemization.pdf (6.42 KB)

Upload successful

Submit

3. Receive a reference number.

Patient and Payment Information Supporting Information (1) Reconsideration History (0)			
Reference Number	Status	Submitted By	Date Submitted
1610458266259	In Process	Donna Smith	1/12/2021 at 8:31 AM

Find the answers you need

Claim reconsiderations and appeals



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

Start a Reconsideration



**Maximum of 5 online reconsiderations per claim*

Reconsideration Help

Close X

- ▶ What is the reconsideration tool?
- ▶ What is an open draft?
- ▶ Why can't I look at an open draft?
- ▼ Can I work on a draft that someone else has started?
Yes. With the appropriate access, you can modify and re-save, submit or discard any draft, regardless of who started the draft.
- ▶ Can I save a draft and complete it later?
- ▶ I started a reconsideration, but it's no longer showing.
- ▶ Why can't I start a reconsideration?

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

Claim S20127622666

Processed

Pending Reconsideration

*Open Request in Progress

USEFUL LINKS

Patient and Payment Information

Supporting Information (0)

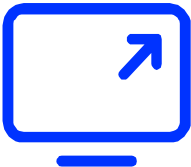
Reconsideration History (2)

Reconsideration Number	Reconsideration Type	Last Modified By	Last Date Modified	Status	Decision Notes
Open Draft	Appeal	john cato	12/1/2020 at 3:11 AM	-16 Day(s) Remaining to Edit	N/A
#WEB2867	Adjustment	John Cato	10/8/2020 at 3:16 PM	Adjusted	N/A



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.

Claim S20127622666

Processed

Start a Reconsideration

USEFUL LINKS

Patient and Payment Information

Supporting Information (0)

Reconsideration History (2)

Claim Information

Claim/Reference Number: S20127622666

Patient Name: JOHN CATO

Provider Generated Patient Account Number: --

Service Providers: XYZ Provider

Date Received: 01/06/2020

Date Processed: 01/06/2020

HIPAA Status: A2: 19

Claim Status: Processed

Payment Information

Patient Responsibility: \$400.00

Claim Amount Paid: \$0.00

Procedures

Procedure Code	Dates Of Service	Place Of Service	Amount Charged	Allowed Amount	Amount Not Covered	Deductible/Copa Applied	Covered Balance	Plan Coinsurance Paid	Patient Coinsurance	Patient Responsibility
70010	01/01/2020	11	\$400.00	\$398.00	\$2.00	\$398.00	\$0.00	100%=\$0.00	0%=\$0.00	\$400.00
Totals			\$400.00	\$398.00	\$2.00	\$398.00	\$0.00	\$0.00	\$0.00	\$400.00

- Step-by-step guidance speeds up and simplifies the process.
- Describe your reason for the request in the notes section.
 - Attach documentation, if needed.

Previous

Questionnaire

Documents

Summary

Confirmation

Questionnaire

What do I want to request for this claim?

Please chose a topic below to proceed to the reconsideration process.

Your request might be handled as an adjustment or appeal, which will be determined at the time of processing. The decision will be based on federal and/or state law, accreditation standards and a detailed review of the circumstances of the request.

My issue is related to...

Precertification of Services

Take actions regarding authorization information

Level of Care/Days or Unit Disputes

Supplement claim with additional information regarding care provided

Medical necessity or Experimental/Investigational procedures

Supplement claim with additional procedural details

Claim processed as out of network incorrectly or to the wrong provider

Take actions to correct provider information

Claim denied or was not processed as expected

Expand upon your expectations of the submitted claim

Corrections to a submitted claim

Change fields on your submitted claim



Provider resources

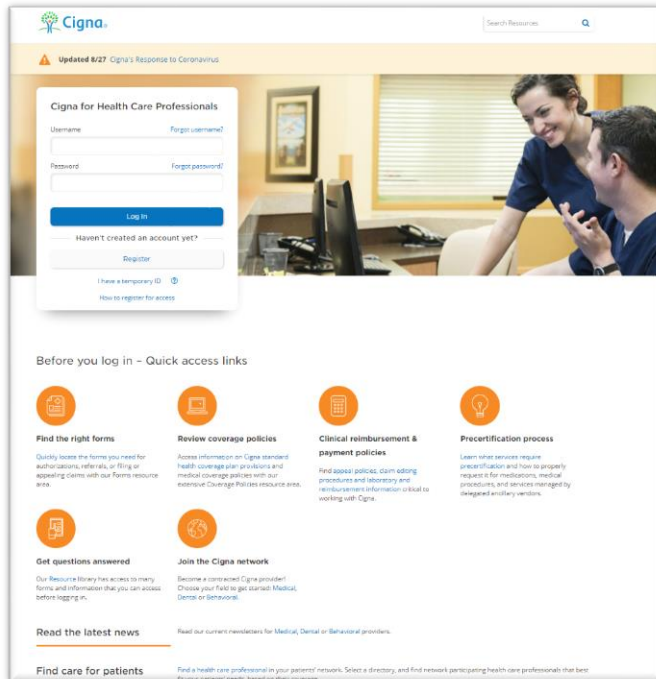
Tools to make your life easier



Easily access the information you need

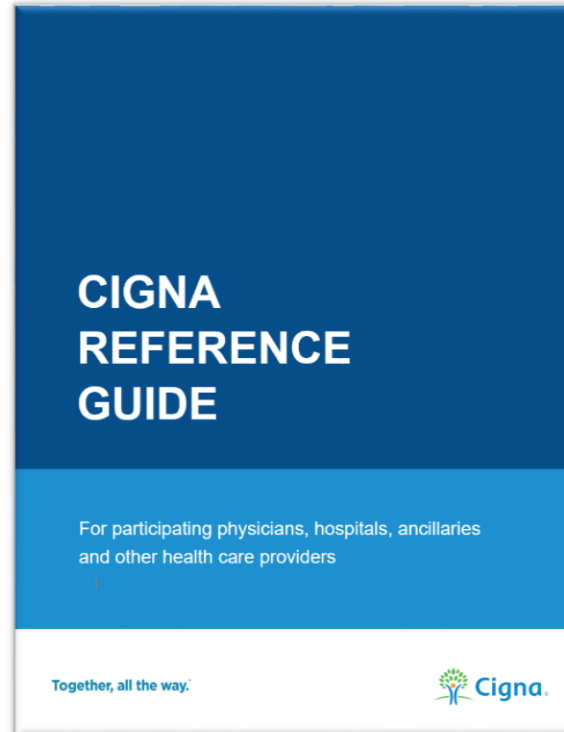
Provider website

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



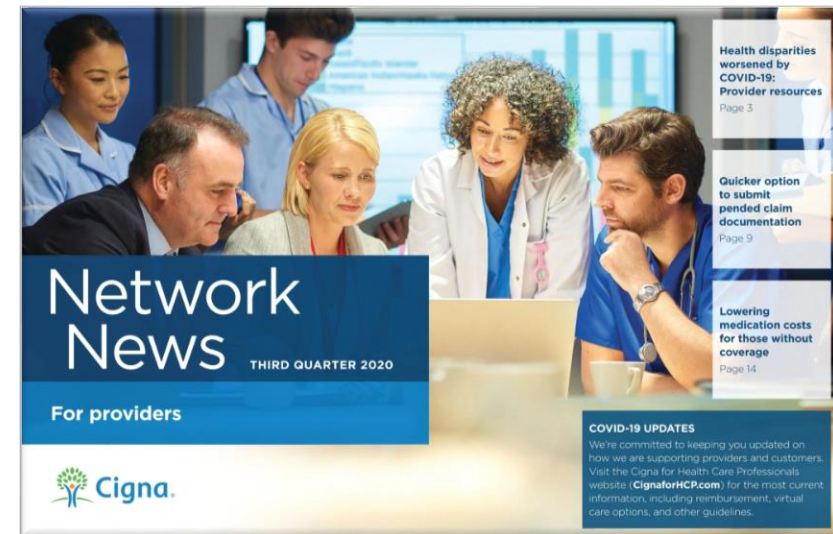
Provider Reference Guide

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



Network News

To be added to the quarterly distribution list, email NetworkNewsEditor@Cigna.com.



Get up-to-date COVID-19 resources

Go to CignaforHCP.com > [Cigna's Response to Coronavirus](#) to access the latest COVID-19 resources, including:

- Interim billing guidelines.
- Frequently asked questions.
- Interim telehealth guidance.



[Resources](#) > [Medical Resources](#) > [Doing Business with Cigna](#) > [Cigna's response to COVID-19](#)

Cigna's response to COVID-19

Cigna Coronavirus (COVID-19) Interim Billing Guidance for Providers for Commercial Customers

Last updated February 15, 2023 - *Highlighted text indicates updates*

The White House announced the intent to end both the COVID-19 national emergency and public health emergency (PHE) on May 11, 2023. As a result, Cigna's cost-share waiver for diagnostic COVID-19 tests and related office visits is extended through May 11, 2023. We continue to monitor for any updates from the administration and are evaluating potential changes to our ongoing COVID-19 accommodations as a result of the PHE ending. As always, we remain committed to providing further updates as soon as they become available.

▶ [Current interim coverage accommodations for commercial Cigna medical services:](#)

▶ [Interim billing guidelines for Coronavirus \(COVID-19\)](#)

▶ [Provider frequently asked questions for Coronavirus \(COVID-19\)](#)



Virtual Care Reimbursement Policy

Visit CignaforHCP.com/virtualcare for information about our new Virtual Care Reimbursement Policy, effective January 1, 2021.



Express Scripts discount prescription program

Introducing Parachute Rx: A program for your uninsured and unemployed patients, offering deeply discounted generic and non-generic medications.



[Centers for Medicare & Medicaid Services \(CMS\) COVID-19 vaccine resources](#)

[Cigna Coronavirus \(COVID-19\) Resource Center](#)

Resources to support your mental health

Live-guided relaxation by telephone

- Available for all providers at no cost
- Every Tuesday at 5:00pm ET
- Call 866.205.5379, enter passcode 113 29 178, and then press #

Pre-recorded wellness podcasts

Additional emotional support resources

Additional Resources

[Cigna Medicare Advantage Billing guidelines and telehealth](#)

[Evernorth Behavioral Health Interim Telehealth Guidance](#)

[Cigna Dental Interim Communication to Providers](#)

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, electronic funds transfer enrollment). To register for a webinar, view the [webinar schedule](#).
- **Quick Guide to Cigna 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.
- **Provider Services** - Call Cigna Provider Services 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.

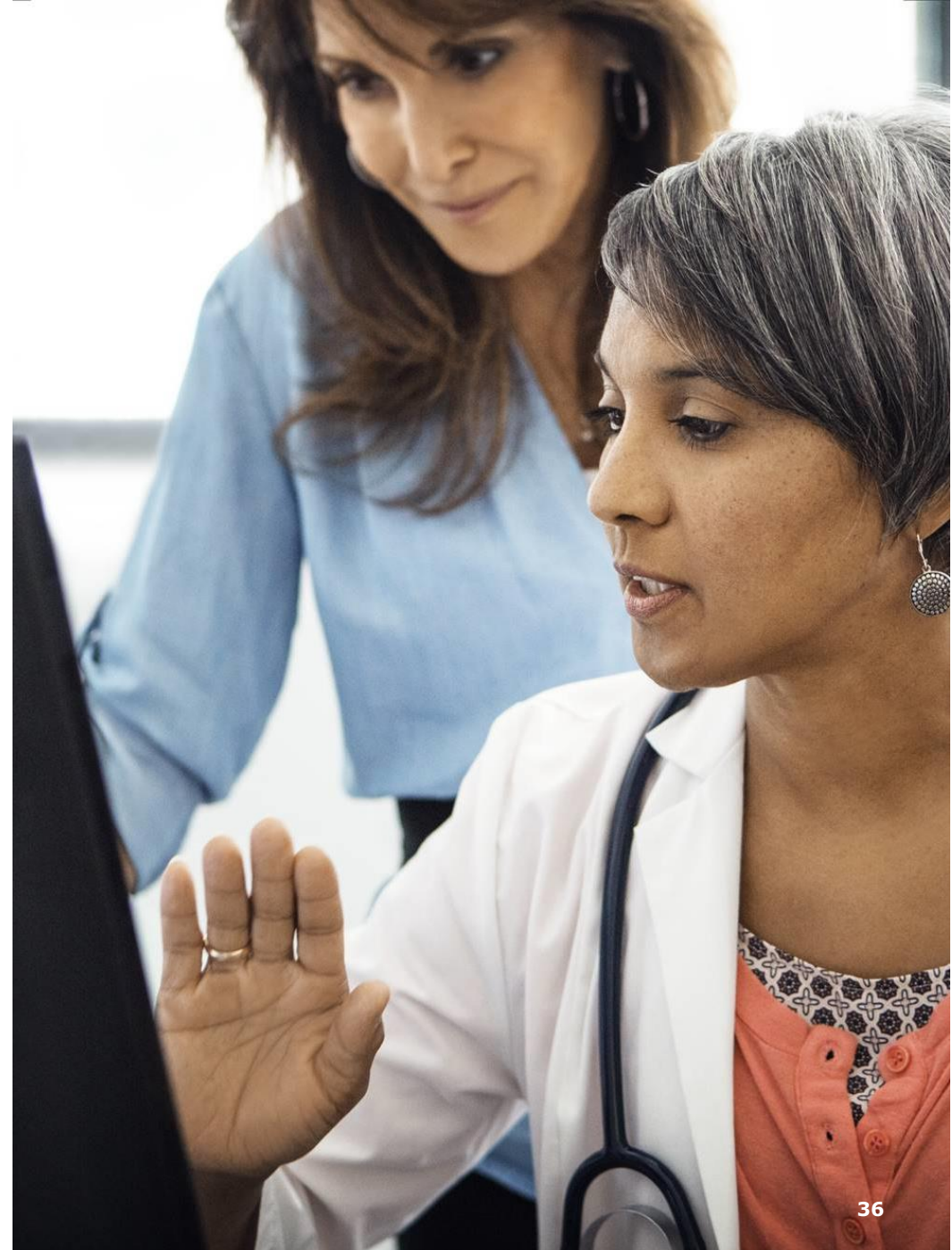
Please notify us in writing **90 days before** changing your office or billing address, telephone number, Taxpayer Identification Number, National Provider Identifier, or specialty.

To submit changes, use one of the following options:*

- Log in to CignaforHCP.com > Working With Cigna > Update Directory Information.
- Send a fax to **877.358.4301** or an email to Intake_PDM@Cigna.com (practitioner and group changes only).
- Send a fax to **646.459.2180** (hospital and ancillary changes only).



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



Q&A



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