



Re: Reimbursement policy updates, effective May 19, 2018

We routinely review our coverage, reimbursement, and administrative policies for potential updates. In that review, we take into consideration one or more of the following: evidence-based medicine, professional society recommendations, Centers for Medicare & Medicaid Services (CMS) guidance, industry standards, and our other existing policies. As a result of a recent review, we want to make you aware that we plan to update two reimbursement policies.

Effective for claims processed on or after May 19, 2018, we will update the Facility Routine Services, Supplies, and Equipment (R12) and Pharmacy and Infusion Services (R14) reimbursement policies and deny claims from outpatient facilities for infusion and injection administration services when billed with a primary service code.

Infusion and injection administration services are considered incidental to the primary service when billed with a primary service code at an outpatient facility and are not separately reimbursable. This update affects claims billed with Current Procedural Terminology (CPT®) codes 96360-96379 and 96521-96523.

Additional information

For more information about these updates, please visit the Cigna for Health Care Professionals website at CignaforHCP.com (Resources > Clinical Reimbursement Policies and Payment Policies > Coverage Policy Updates).

If you are not a registered user, please register so you may log in and access all of our coverage, reimbursement, and administrative policies. Go to CignaforHCP.com and click "Register Now." If you do not have Internet access or would like additional information, please call Cigna Customer Service at 1.800.88Cigna (882.4462).

Sincerely,

JB Kessel MD

Julie B. Kessel, MD
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