

Cigna
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PO Box 3050
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March 15, 2018



Julie B. Kessel, MD
Senior Medical Director, Coverage Policy

Re: Policy updates, effective June 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 one policy and implement one new policy.

The enclosed chart provides additional details about these policies, including an outline of the changes and the effective date for each update.

Additional information

For more information about these policies, 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
Senior Medical Director

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**Coverage policy updates
June 2018**

Policy name	Specialty types affected	Description of service	Update and effective date
<p>Cervical Fusion (0527) (new)</p> <p>Anterior Cervical Discectomy and Fusion (ACDF) and Posterior (Cervical) Spinal Fusion (PSF)</p>	<ul style="list-style-type: none"> • Orthopedists • Neurosurgeons 	<p>ACDF removes a herniated or degenerative disc in the neck area of the spine. PSF removes an intervertebral disc and/or bone spurs that are putting pressure on nerve roots using an approach from the back of the neck.</p> <p>We reimburse claims for ACDF and PSF procedures without medical necessity review.</p>	<p>We will implement a new medical coverage policy and require precertification for ACDF and PSF procedures billed with CPT codes 22551, 22554, and 22600.</p> <p>This update is effective for dates of service on or after June 22, 2018.</p>
<p>Transcatheter Ablation of Arrhythmogenic Foci in the Pulmonary Veins for the Treatment of Atrial Fibrillation (0469)</p>	<ul style="list-style-type: none"> • Cardiologists 	<p>Transcatheter ablation of the pulmonary veins is used to treat symptomatic paroxysmal or persistent atrial fibrillation when the individual is refractory or intolerant to at least one class I or class III antiarrhythmic medication.</p> <p>We do not cover transcatheter ablation of the pulmonary veins for any other indication as it is considered experimental, investigational or unproven (EIU).</p>	<p>We will update our medical coverage policy and implement a precertification requirement for CPT codes 93656 and 93657 to review this procedure for medical necessity.</p> <p>This update is effective for dates of service on or after June 15, 2018.</p>