

# ELECTRONIC CLAIMS SUBMISSION



## Use Cigna eServices to reduce paperwork, and eliminate printing and mailing expenses

You can save time, money, and improve claim processing accuracy when you submit medical and behavioral claims electronically. Use one of Cigna's electronic data interchange (EDI) options to send, view and track your claims right from your computer instead of faxing, printing or mailing them.

### Benefits of submitting claims to Cigna electronically

- Send primary and secondary (coordination of benefit or COB) claims quickly, reduce paperwork, and eliminate printing and mailing expenses.
- Decrease the chance of transcription errors or missing data.
- Track claims received electronically, which are automatically archived before processing.
- Eliminate the need to submit claims to multiple locations.
- Save time on resubmissions - incomplete or invalid claims can be reviewed and corrected online.
- View, track and monitor claim status reports.

You have two options for submitting claims electronically to Cigna: Connecting directly to Cigna using Post-n-Track®, or through other EDI vendors.

Post-n-Track - This web service is available at no cost to health care professionals in the Cigna network. To enroll, contact Post-n-Track at 860.257.2030,

or visit [Post-n-Track.com/Cigna](http://Post-n-Track.com/Cigna). Other EDI vendors - For a list of EDI vendors and transactions they support, visit [Cigna.com/EDIVendors](http://Cigna.com/EDIVendors). If you have questions about transactions submitted through your EDI vendor, please contact the vendor directly.

Use this Cigna payer ID for submitting electronic claims:

Payer ID	Claim type
62308	Medical behavioral (including employee assistance program), dental and Arizona Advantage HMO

Both primary and secondary claims can be submitted to Cigna electronically.

You don't have to submit Medicare Part A and B coordination of benefits agreement (COBA) claims to Cigna. The Medicare explanation of benefit (EOB) or electronic remittance advice (ERA) will show that those claims are forwarded to Cigna as the secondary payer.

Together, all the way.®



## Guidelines for submitting attachments, and corrected and secondary claims

### Electronic claims with attachments

To submit electronic claims with attachments, including high-dollar itemized claims:

- ▶ In the 837: Loop 2300 PWK (paperwork) segment of the claim, and indicate that notes will be faxed or mailed. (Do not put the actual notes in the segment.)
- ▶ Include in the notes:
  - Patient name
  - Patient Cigna ID
  - Date of birth
  - Total amount billed
  - Health care professional
  - Taxpayer Identification Number (TIN)
- ▶ Fax medical attachments to:

Cigna high-dollar claims	859.410.2421
Cigna general claims (non-high-dollar claims)	859.410.2422
GWH-Cigna network claims (all)	877.804.1443

### Corrected claims submission

- ▶ In the Claim Frequency Type Code in Loop 2300, Segment CLM05, specify the frequency of the claim. (This is the third position of the Uniform Billing Claim Form Bill Type.)
- ▶ Use one of these codes:
  - 1 - Original (admit through discharge claim)
  - 7 - Replacement (replacement of prior claim)
  - 8 - Void (void or cancel of prior claim)

### Secondary claims submission

Secondary claims should be submitted to Cigna electronically. COB information is billed in Loops 2320 and 2330 on the electronic claim form. For further information, check with your EDI vendor.

**Save time - submit your claims electronically.**

To learn more about electronic claims submission with Cigna, log in to the Cigna for Health Care Professionals website at [CignaforHCP.com](http://CignaforHCP.com) > Resources > eCourses. Not registered to use the website? Go to [CignaforHCP.com](http://CignaforHCP.com) and click Register Now.

