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| **IMPORTANT INFORMATION FROM CIGNA** |

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| **Key COVID-19 updates for September 2021**  |
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| Since the COVID-19 pandemic began, Cigna has taken important steps to deliver accommodations to providers and customers, helping to ensure that our customers have continued access to COVID-19 screening, testing, treatment, and vaccinations in safe settings.  As updated COVID-19 clinical information from the CDC, CMS, and leading medical societies continues to become available, we strive to share timely information with you. The following information outlines important updates and reminders from Cigna and these leading health experts. **Vaccine updates****Booster shot**On August 12, 2021, the U.S. Food and Drug Administration (FDA) [announced](https://urldefense.com/v3/__https%3A/wlink.graphnet.com/maximail/link.htm?trlnkid=155973A97031A205138450__;!!KZd1Y3y2zDCptWw!-r82GgfI5PxSAJkWJMmbQTGai-CF9OPPio2XdAiMxrCsTybyJv392fASNtqzJBg$) an emergency use authorization (EUA) for a third vaccine dose (i.e., “booster shot”) for certain immunocompromised individuals, with an expectation of approval for broader audiences soon. * Cigna will cover the administration of the newly approved Pfizer (0003A) and Moderna (0013A) booster shots when billed with the appropriate Current Procedural Terminology (CPT®) code for dates of service on and after August 12, 2021.
* Reimbursement will be consistent with CMS rates (currently $40 per dose) when billed under a commercial medical benefit plan.
* As a reminder, claims for vaccine administration for patients with a Cigna Medicare Advantage benefit plan should be submitted through original Medicare – not Cigna.

**Full approval of Pfizer vaccine**On August 23, 2021, the FDA [announced](https://urldefense.com/v3/__https%3A/wlink.graphnet.com/maximail/link.htm?trlnkid=155974A97031A205138450__;!!KZd1Y3y2zDCptWw!-r82GgfI5PxSAJkWJMmbQTGai-CF9OPPio2XdAiMxrCsTybyJv392fASqgrCxbs$) full approval of the Pfizer vaccine. Cigna welcomes the full FDA approval of the vaccine and continues to reimburse vaccine administration at $40 per dose with no customer cost-share when billed under a commercial medical benefit plan, consistent with CMS guidance. We encourage providers to leverage this important update when discussing the safety, effectiveness, and availability of the vaccine with all patients. **Encouraging pregnant individuals to get vaccinated**On August 9, 2021, the American College of Obstetricians and Gynecologists (ACOG) [released a statement](https://urldefense.com/v3/__https%3A/wlink.graphnet.com/maximail/link.htm?trlnkid=155964A97031A205138450__;!!KZd1Y3y2zDCptWw!-r82GgfI5PxSAJkWJMmbQTGai-CF9OPPio2XdAiMxrCsTybyJv392fAS0jdAPkQ$) of strong medical consensus for vaccinating pregnant individuals against COVID-19. Later that week, [CDC also released new data](https://urldefense.com/v3/__https%3A/wlink.graphnet.com/maximail/link.htm?trlnkid=155968A97031A205138450__;!!KZd1Y3y2zDCptWw!-r82GgfI5PxSAJkWJMmbQTGai-CF9OPPio2XdAiMxrCsTybyJv392fASp8kJLR8$) on the safety of the COVID-19 vaccines in pregnant individuals, noting “CDC encourages all pregnant people or people who are thinking about becoming pregnant and those breastfeeding to get vaccinated to protect themselves from COVID-19.” Therefore, when treating or consulting with patients who are pregnant or may be considering getting pregnant, we encourage all providers to familiarize themselves with the ACOG and CDC guidance, and advise their patients accordingly. **Monoclonal antibody treatments**The FDA recently [revised the EUA](https://urldefense.com/v3/__https%3A/wlink.graphnet.com/maximail/link.htm?trlnkid=155971A97031A205138450__;!!KZd1Y3y2zDCptWw!-r82GgfI5PxSAJkWJMmbQTGai-CF9OPPio2XdAiMxrCsTybyJv392fASvzNi5VA$) for REGEN-COV (casirivimab and imdevimab, administered together) to authorize REGEN-COV for emergency use as post-exposure prophylaxis (prevention) for COVID-19 in adults and pediatric individuals (12 years of age and older weighing at least 40 kg) who are at high risk for progression to severe COVID-19, including hospitalization or death.  Please note that REGEN-COV is not authorized for pre-exposure prophylaxis to prevent COVID-19 before being exposed to the SARS-CoV-2 virus – only after exposure to the virus. We encourage you to review the [FDA Fact Sheet](https://urldefense.com/v3/__https%3A/wlink.graphnet.com/maximail/link.htm?trlnkid=155972A97031A205138450__;!!KZd1Y3y2zDCptWw!-r82GgfI5PxSAJkWJMmbQTGai-CF9OPPio2XdAiMxrCsTybyJv392fAS7dFyp-4$)for detailed information about the use of REGEN-COV for post-exposure prophylaxis. We continue to regularly review – and encourage providers to monitor – the evolving criteria for monoclonal antibody treatments in certain clinical circumstances. **Cigna's coverage of EUA-approved COVID-19 treatments*** As a reminder, Cigna covers the administration of all EUA-approved COVID-19 infusions consistent with [EUA guidelines](https://urldefense.com/v3/__https%3A/wlink.graphnet.com/maximail/link.htm?trlnkid=155969A97031A205138450__;!!KZd1Y3y2zDCptWw!-r82GgfI5PxSAJkWJMmbQTGai-CF9OPPio2XdAiMxrCsTybyJv392fASrQqa1Qw$) and our [COVID-19 Drug and Biologic Therapeutics coverage policy](https://urldefense.com/v3/__https%3A/wlink.graphnet.com/maximail/link.htm?trlnkid=155962A97031A205138450__;!!KZd1Y3y2zDCptWw!-r82GgfI5PxSAJkWJMmbQTGai-CF9OPPio2XdAiMxrCsTybyJv392fASeoXhrP8$).
* When covered, Cigna will reimburse the infusion and post-administration monitoring of [CMS’ listed treatments](https://urldefense.com/v3/__https%3A/wlink.graphnet.com/maximail/link.htm?trlnkid=155970A97031A205138450__;!!KZd1Y3y2zDCptWw!-r82GgfI5PxSAJkWJMmbQTGai-CF9OPPio2XdAiMxrCsTybyJv392fASncraxXM$) at the [established national CMS rates](https://urldefense.com/v3/__https%3A/wlink.graphnet.com/maximail/link.htm?trlnkid=155970A97031A205138450__;!!KZd1Y3y2zDCptWw!-r82GgfI5PxSAJkWJMmbQTGai-CF9OPPio2XdAiMxrCsTybyJv392fASncraxXM$) to ensure timely, consistent, and reasonable reimbursement.

**Locating facilities that offer these treatments**To find locations that may be able to provide monoclonal antibody therapeutic treatments, a number of resources are available to support providers and patients, including:* The U.S. Department of Health and Human Services (HHS) [outpatient antibody treatment locator tool](https://urldefense.com/v3/__https%3A/wlink.graphnet.com/maximail/link.htm?trlnkid=155961A97031A205138450__;!!KZd1Y3y2zDCptWw!-r82GgfI5PxSAJkWJMmbQTGai-CF9OPPio2XdAiMxrCsTybyJv392fASxhIU5HI$), which displays locations that have received shipments of FDA EUA-approved monoclonal antibody therapeutics within the past several weeks.
* The National Infusion Center Association [COVID-19 Antibody Treatment Locator](https://urldefense.com/v3/__https%3A/wlink.graphnet.com/maximail/link.htm?trlnkid=155960A97031A205138450__;!!KZd1Y3y2zDCptWw!-r82GgfI5PxSAJkWJMmbQTGai-CF9OPPio2XdAiMxrCsTybyJv392fASczXqvw4$), which helps providers find infusion centers that are administering COVID-19 antibody therapies.

We encourage you to leverage these resources, as needed, to assist your patients in finding local monoclonal antibody treatment options. **What we can collectively do to help**Because many individuals are unaware of the treatments and where to receive them, we encourage providers, including hospitals, to prescribe the medications and arrange the infusion sites necessary to administer the drugs when medically necessary and prudent to do so. Cigna Case Managers also continue to engage providers, as necessary, to help facilitate the therapy for your patients who may be eligible. Working together, we believe we can help reduce the strain on already overburdened hospitals, and support the health and well-being of your patients.**CDC interim guidance for evaluating and caring for patients with post-COVID conditions**CDC recently published [interim guidance](https://urldefense.com/v3/__https%3A/wlink.graphnet.com/maximail/link.htm?trlnkid=155966A97031A205138450__;!!KZd1Y3y2zDCptWw!-r82GgfI5PxSAJkWJMmbQTGai-CF9OPPio2XdAiMxrCsTybyJv392fAS4qCxLA4$) for providers on “post-COVID conditions,” which is an umbrella term they use “for the wide range of physical and mental health consequences experienced by some patients for four or more weeks after SARS-CoV-2 infection.” This guidance recognizes the challenges associated with defining post-COVID conditions and emphasizes a holistic, empathetic, and resource-conscious approach to the management of patients with persistent post-COVID symptoms.  **Key points from CDC*** Many post-COVID conditions can be managed by primary care providers, with the incorporation of patient-centered approaches.
* Because many signs and symptoms may resolve by 12 weeks, providers are encouraged to follow a “conservative diagnostic approach” during this time.
* Providers are advised to closely follow hospitalized patients for several months post-discharge for prevention of readmission and monitoring post-COVID conditions (or other health concerns).
* Patients who had asymptomatic infection to moderate illness, but experience ongoing or new symptoms, are advised to obtain follow-up care within three to four weeks from initial infection.
* Individuals who belong to racial and ethnic minority populations have experienced a higher burden of COVID-19 in part because of [structural racism](https://urldefense.com/v3/__https%3A/wlink.graphnet.com/maximail/link.htm?trlnkid=155967A97031A205138450__;!!KZd1Y3y2zDCptWw!-r82GgfI5PxSAJkWJMmbQTGai-CF9OPPio2XdAiMxrCsTybyJv392fAS3kzELWk$) and longstanding [disparities in social determinants of health](https://urldefense.com/v3/__https%3A/wlink.graphnet.com/maximail/link.htm?trlnkid=155965A97031A205138450__;!!KZd1Y3y2zDCptWw!-r82GgfI5PxSAJkWJMmbQTGai-CF9OPPio2XdAiMxrCsTybyJv392fASETJy5Ik$), which could reasonably lead to a higher incidence of post-COVID conditions in these same populations. Therefore, deploying resources to these communities can help ensure individuals are aware of post-COVID conditions and that they have access to needed services that may be lacking there.

We encourage all providers to familiarize themselves with [CDC guidance](https://urldefense.com/v3/__https%3A/wlink.graphnet.com/maximail/link.htm?trlnkid=155966A97031A205138450__;!!KZd1Y3y2zDCptWw!-r82GgfI5PxSAJkWJMmbQTGai-CF9OPPio2XdAiMxrCsTybyJv392fAS4qCxLA4$) and consult it when making care decisions for patients with post-COVID conditions.**Facility transfer authorization waiver**In response to rising hospitalization rates across the country for customers with COVID-19 – and in an effort to help facilities free up bed space when needed – Cigna (including Cigna Medicare Advantage) will waive the authorization requirement for facility-to-facility transfers through October 17, 2021 when the facility notifies us of their intent to transfer patients without an authorization. It is important to note that a facility must notify their Provider Services or Contracting representative once per Taxpayer Identification Number (TIN) of their intent to transfer without an authorization so we can ensure claims are not denied for failure to secure authorization. That one notification will cover all commercial and Medicare patients under that TIN for all dates of service through the end of the public health emergency (PHE) period (currently through October 17, 2021).**Get the latest updates on CignaforHCP.com**We understand that CMS, industry, and Cigna guidance continues to evolve based on the latest scientific information available. Therefore, please visit our [dedicated COVID-19 provider website](https://urldefense.com/v3/__https%3A/wlink.graphnet.com/maximail/link.htm?trlnkid=155963A97031A205138450__;!!KZd1Y3y2zDCptWw!-r82GgfI5PxSAJkWJMmbQTGai-CF9OPPio2XdAiMxrCsTybyJv392fASwk_TPos$) on CignaforHCP.com frequently, where you can find the latest Cigna coverage and interim accommodation information available.**Thank you for continuing to treat your patients and the communities you serve with the care, clinical expertise, and dedication that is critically necessary as we continue to fight COVID-19.**

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