**COVID-19 – Facility-to-facility authorization waiver reinstated**

**Facility-to-facility authorization waiver reinstated** – In response to the surge in COVID-19, influenza, and respiratory syncytial virus hospitalizations across the country, Cigna commercial and Cigna Medicare Advantage will waive the authorization requirement for facility-to-facility transfers from December 12 through March 15, 2023.

**Code editing update – Diagnosis pointers for correct coding effective March 12, 2023**

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 (EBM), 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 will update our existing code editing logic to use diagnosis pointers at the Current Procedural Terminology (CPT®) code level on some claims.

Medical necessity appeal rights will be available. This update is effective for dates of service on or after March 12, 2023.

**Additional information**

For more information about our policies log in to the Cigna for Health Care Professionals website (CignaforHCP.com).

**Reimbursement policy updates – Anesthesia services** **effective March 12, 2023**

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: EBM, professional society recommendations, CMS guidance, industry standards, and our other existing policies.

As a result of a recent review, we want to make you aware that we will make the following updates effective for dates of service on or after March 12, 2023:

**Anesthesia claims submitted without modifiers AA, AD, QK, QX, QY, and QZ**

We will implement a new reimbursement policy, Anesthesia Services (R39), to administratively deny the claim line on claims submitted without modifiers AA, AD, QK, QX, QY, and QZ appended to an anesthesia CPT code. Denials will include administrative appeal rights.

**Anesthesia claims submitted with multiple CPT codes**

Additionally, as part of the Anesthesia Services (R39) reimbursement policy implementation, we will administratively deny the anesthesia CPT codes with the lowest base unit on claims submitted with multiple codes, and reimburse the code with the highest base unit. We will reimburse the first code submitted if the base units are equal. Denials will include administrative appeal rights.

**Modifier QZ reimbursement for certified registered nurse anesthetist services**

We will reduce reimbursement for claims submitted with modifier QZ for services rendered by a certified registered nurse anesthetist (CRNA) by 15 percent. Denials will include administrative appeal rights.

We will update the Healthcare Common Procedure Coding System (HCPCS) National Level II Modifiers reimbursement policy to reflect this change.

This update aligns with our reimbursement rate for advanced practice providers.

**Additional information**

Policy updates are posted at CignaforHCP.com > Resources > Coverage Policies > Policy Updates.

**Reimbursement policy update – Free flap breast reconstruction claims** **effective March 12, 2023**

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: EBM, professional society recommendations, CMS guidance, industry standards, and our other existing policies.

As a result of a recent review, we will administratively deny claims for free flap breast reconstruction when billed with HCPCS codes S2066, S2067, and S2068. Effective for dates of service on or after March 12, 2023, we will only reimburse these claims when billed with CPT code 19364.

This update is effective for dates of service on or after March 12, 2023. Denials will include administrative appeal rights.

We will update the Omnibus Reimbursement Policy (R24) to reflect this change.

**Additional information**

Policy updates are posted at CignaforHCP.com > Resources > Coverage Policies > Policy Updates.