

## CignaforHCP.com Q1 and Q2 enhancements deck

We recently made important enhancements to the Cigna for Health Care Professionals website (CignaforHCP.com) based on providers' feedback. Some of these enhancements are highlighted in a new presentation deck that is available for external-facing staff to share with providers. A copy of the presentation deck is attached.

The presentation deck covers the enhancements shown below. Note that providers must log in to CignaforHCP.com to access them.

<b>Enhancement</b>	<b>Description</b>	<b>Location on CignaforHCP.com</b>
In-network verification	Shows which providers are network-participating providers for a Cigna customer's plan	Patient Search > Patient and Plan Detail
Referral required?	Shows whether a referral is required for in-network and out-of-network care for most Cigna medical plans	Patient Search > Notification, Referral, and Precertification Requirements
Links to directories	Contains a direct link to the provider and behavioral directories	Patient Search > Notification, Referral, and Precertification Requirements
Frequency and utilization of services information	Shows for certain medical and behavioral treatments: <ul style="list-style-type: none"><li>• Total number of allowed covered visits</li><li>• Number of allowed covered visits already used</li><li>• How many allowed covered visits are left in the calendar year</li></ul>	Patient Search > Specialist Services
Cigna Opioid Pledge – electronic signature	Allows providers to sign the Opioid Quality Improvement Pledge online	Settings and Preferences > Opioid Pledge

### Additional information

Providers can find additional details about some of the enhancements in the April 2018 and July 2018 issues of Network News.

## **Genetic testing update, effective October 22, 2018**

Effective for dates of service on or after October 22, 2018, we will no longer require precertification for genetic testing Current Procedural Terminology (CPT®) codes that are always considered not medically necessary, or experimental, investigational, or unproven (EIU).

This update will remove the administrative burden for providers to request precertification for services billed with CPT codes that are always denied as not medically necessary or EIU. We will deny these codes when submitted on either a CMS-1500 or UB-04 claim form.

Information about the update will also be included in the October 2018 Network News.

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