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<Date>

<PROV_NM>
<ATTN>
<FRST_LN_ADDR> <SEC_LN_ADDR>
<City_NM>, <STE_CD> <ZIP_CD>

Re: Reimbursement policy update – Evaluation and management codes billed with modifier 25 and minor procedures effective <EFFECTIVE_DATE>

Dear <PROV_NM>,

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 require the submission of office notes with claims submitted with evaluation and management (E&M) Current Procedural Terminology (CPT®) codes 99212, 99213, 99214, and 99215 and modifier 25 when a minor procedure is billed.

The E&M line will be denied if we do not receive documentation that supports that a significant and separately identifiable service was performed. Denials will include administrative appeal rights.

This update is effective for dates of service on or after <EFFECTIVE_DATE>.

We will update the Modifier 25 – Significant, Separately Identifiable Evaluation and Management Service by the Same Physician on the Same Day of the Procedure or Other Service (M25) reimbursement policy to reflect this change.

Claims and documentation submission

The required office notes must be submitted via the dedicated fax number, **833.462.1360**, or to Modifier25MedicalRecords@Cigna.com. Claims should continue to be submitted electronically and must have the attachment indicator selected. Claims and documentation will also be accepted via mail.

- Please include a cover sheet with the following information when submitting required office notes via fax or email: Provider or billing name
- Provider Taxpayer Identification Number (TIN)
- Alternate Member Identification (AMI)
- Patient name
- Date of service

Additional information

For more information about our policy updates, visit the Cigna for Health Care Professionals website (CignaforHCP.com) > Resources > Coverage Policies > Policy Updates.

At a glance

- We will require the submission of office notes with claims submitted with evaluation and management (E&M) Current Procedural Terminology (CPT®) codes 99212, 99213, 99214, and 99215 and modifier 25 when a minor procedure is billed.
- The E&M line will be denied if we do not receive documentation that supports that a significant and separately identifiable service was performed.
- This update is effective for dates of service on or after <EFFECTIVE_DATE>.
- For additional information, call Cigna Customer Service at **800.88Cigna (882.4462)**.

If you are not a registered user, please register so that you may log in and access all of our coverage, reimbursement, and administrative policies. Go to CignaforHCP.com and click Register. If you do not have Internet access or would like additional information, call Cigna Customer Service at **800.88Cigna (882.4462)**.

Thank you for the care you provide to our customers.

Sincerely,

A handwritten signature in black ink that reads "JB Kessel MD". The letters are cursive and somewhat slanted to the right.

Julie B. Kessel, MD
Medical Officer for Coverage Policy
Clinical Performance & Quality Organization