

Cigna Medicare Advantage Durable Medical Equipment Quick Reference Guide



Precertification Services

eviCore healthcare (eviCore) will begin accepting precertification requests for Durable Medical Equipment (DME) services on May 27, 2022 for Cigna customers with Medicare Advantage coverage for dates of service June 1, 2022 and beyond. Exception: Arizona Medicare customers.



Precertification applies to the following DME Requests:

- Outpatient or home based
- Medically necessary
- Active rentals for HCPCS codes that currently don't have a pre-certification through Cigna but require pre-certification starting 6/1 should be requested on or before the 6/1 date for dates of service beyond 6/1.
- DME HCPCS code list is subject to change so please refer to our provider resources site and any Durable Medical Equipment announcements we send out.

Precertification Requirements

To ensure the precertification process is completed as quickly and efficiently as possible, the following should be submitted with the request:

- Pertinent clinical information to substantiate medical necessity for requested DME with: HCPCS, Diagnosis, Physician Order
- Referring Physician Demographics (NPI, Phone, Fax)
- Customer Demographics (Name, DOB, ID)
- DME Supplier (TIN, NPI, Phone, Fax)

Methods to request Precertification

All precertification requests should be submitted prior to the delivery of DME services:

1. eviCore provider portal: (preferred method)
www.evicore.com/pages/providerlogin.aspx
2. Fax:
866.663.7740
3. Telephone:
866.686.4452

Urgent Requests

eviCore uses the NCQA/URAC definition of urgent: when a delay in decision-making may seriously jeopardize the life or health of the customer. Urgent requests can be initiated by portal, phone or fax and will be reviewed within 72 hours.

Retrospective requests

eviCore can only process a request up to one business day after the care has started. The only exception to this rule is if there is an eligibility concern with the customer.

Precertification Update

If updates are needed on an existing precertification, providers can contact eviCore by phone at 866.686.4452.

DME Requests with Hospital Discharge

For any hospital discharges contingent upon DME precertification approvals, the DME supplier should either:

1. Fax supporting clinical documentation and indicate **"Pending Discharge"** on the fax cover sheet or precertification form
2. Call eviCore at 866.686.4452
3. Indicate **"Hospital discharge is pending DME precertification"** during the clinical intake discussion

eviCore will offer prompt nurse review to help support customer discharge goals.

Precertification Outcomes

Verbal outreach will be made to providers with a determination after all necessary clinical documentation is received. Written notification in the form of a letter will be faxed to the Physician and DME Supplier and mailed to the customer. All information is available via the eviCore healthcare Web Portal.

Additional Clinical Needed

When a request has been reviewed and determined additional clinical is needed for approval, eviCore will communicate hold for insufficient clinical to the ordering physician. Outreaches will outline what additional information is needed for approval.

Adverse Determination

If the request is denied, communication of denial determination and denial rationale will be made both by phone and fax to ordering physician and customer. The ordering physician, DME supplier and customer will all receive a letter.

Clinical Consultation

Ordering physicians, nurse practitioners and physician assistants can consult with an eviCore Medical Director anytime within the review process. If an adverse determination has already been finalized a clinical consultation is permitted. This is a consultation only and will not impact the determination that was already made. Post denial consultations will be routed to Cigna to initiate appeals process.

Appeals

Appeal requests can be submitted by following the instructions provided in the denial letter. Appeal requests should be sent directly to Cigna in writing either via fax or U.S. mail. The Cigna appeals address and fax number will be provided on the determination letter.



Convenient Provider Portal

The eviCore online portal is the quickest and most efficient way to request precertification and check status.

www.evicore.com/pages/providerlogin.aspx

eviCore portal assistance:

✉ e: portal.support@evicore.com
☎ p: 800.646.0418 (Option 2)



Call Center 866.686.4452

Monday – Friday 8 a.m. to 8 p.m. CST

Saturday 8 a.m. to 4 p.m. CST

Sunday 8 a.m. to 1 p.m. CST

Holidays 8 a.m. to 1 p.m. CST

24 hour on call coverage

Fax 866.663.7740



Provider Resource Page

The eviCore Provider Resource page contains web registration/ submission information, FAQ and QRG documents, a comprehensive HCPCS code list, and other important resources that are kept up-to-date for your convenience:

<https://www.evicore.com/resources/healthplan/cigna-medicare>

Precertification from eviCore healthcare does not guarantee claim payment. Services must be covered by the health plan and the customer must be eligible at the time services are rendered. Claims submitted for services may be subject to benefit denial. Please verify the customer's benefits and eligibility with the health plan. Regardless of the benefit determination, the final decision regarding any health care services or treatment is between the customer and their health care provider.