

Sleep Management Program for Cigna Commercial Customers

Provider Orientation



Agenda

- **eviCore healthcare Company Overview**
- **Sleep Precertification Program Overview**
- **Submitting Requests**
- **Precertification Outcomes & Special Considerations**
- **Sleep Study – Site of Service Precertification**
- **Provider Resources**
- **Claims Submission**
- **Provider Web Portal**
- **Q & A Session**

Company Overview

Medical Benefits Management (MBM)

Addressing the complexity of the healthcare system



10
Comprehensive
solutions



Evidence-based
clinical guidelines



5k+ employees,
including
1k+ clinicians



Advanced, innovative,
and intelligent
technology

Program Overview

Precertification Services

eviCore healthcare (eviCore) began accepting precertification requests on January 21, 2021 for sleep diagnostic services with dates of service on or after February 1, 2021 for Cigna commercial customers.

Precertification applies to sleep diagnostic services that are:

- Outpatient or Home Based
- Medically Necessary
- Elective / Non-emergent

Precertification does **NOT** apply to sleep diagnostic services performed in:

- Emergency Room
- Observation Service
- Acute Inpatient Setting

Providers should verify customer eligibility and benefits on the secured provider log in section at CignaforHCP.com. Eligibility may also be verified at www.evicore.com/ep360

Precertification Required

- G0398/G0399/G0400 – Home Sleep Testing
- 95800/95801/95806 – Sleep study, unattended
- 95782/95783 – Attended Polysomnography; younger than 6 years
- 95805 – Multiple Sleep Latency Test (MSLT)
- 95807/95808/95810 – Attended, Polysomnography (PSG)
- 95811 – Attended Polysomnography with PAP titration

CPT Code Lists

- To find a list of Sleep Current Procedural Terminology (CPT) codes that require Precertification through eviCore, please visit:
<https://www.evicore.com/resources/healthplan/cigna>

Medical Necessity Criteria

- Cigna & eviCore Proprietary Evidence Based Clinical Guidelines <https://www.evicore.com/cigna>
- National and Local Coverage Determination Guidelines

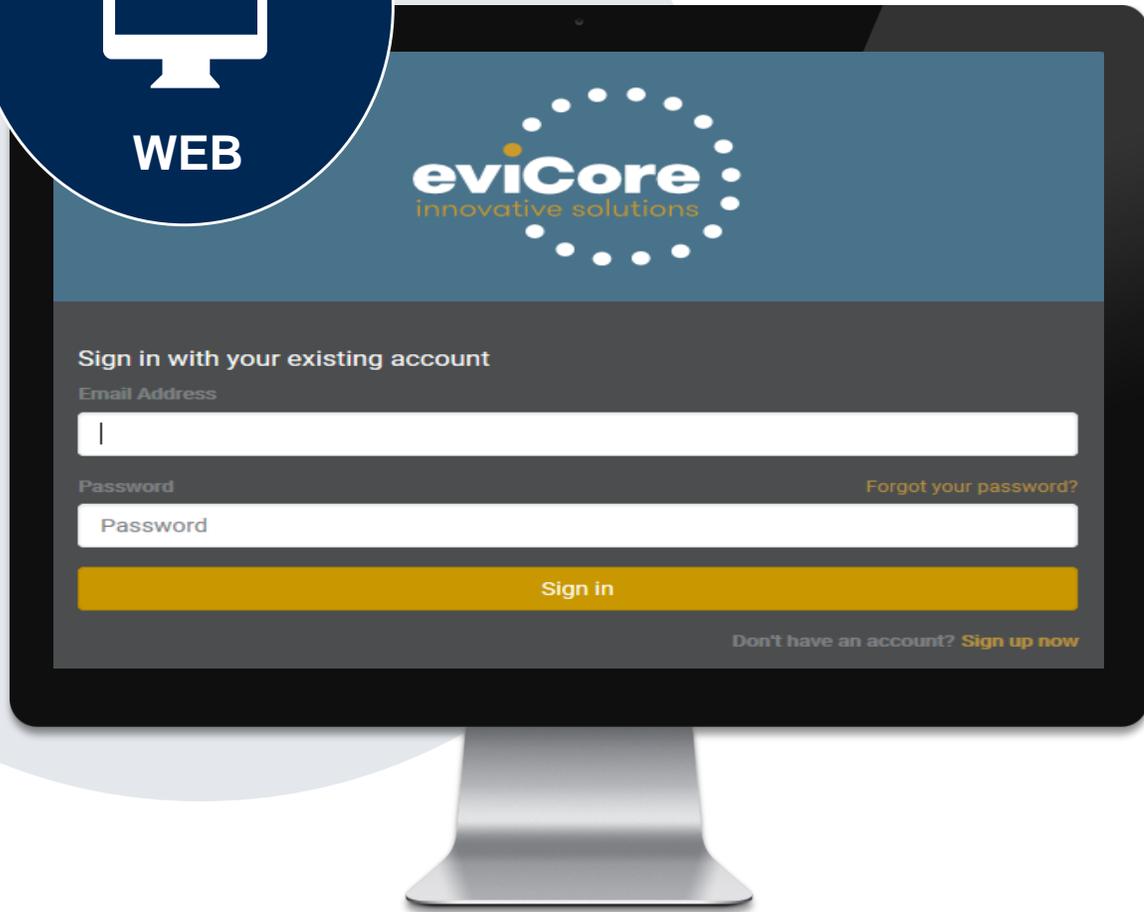
Additional Information

- Detailed information is available on the Cigna Sleep Management Program website (CignaforHCP.com > Review Coverage Policies)

Submitting Requests

Sleep Management Program

Methods to Submit Precertification Requests



eviCore Provider Portal

The eviCore online portal, www.evicore.com/ep360, is the quickest and most efficient way to request precertification and check authorization status.

Precertification Call Center:

800.298.4806 options 1, 1, 2

Monday – Friday: 8am to 9pm EST

Saturday – Sunday 10am to 6pm EST

Benefits of eviCore Provider Portal

The provider portal allows you to go from request to approval faster. Following are some benefits & features:

- Saves time: Quicker process than phone authorization requests
- Receive real time authorizations for cases that meet medical necessity on initial portal submission
- Available 24/7: You can access the portal any time and any day
- Upload additional clinical information: No need to fax in supporting clinical documentation. It can be uploaded on the portal to support a new request or when additional information is requested.
- Check case status in real-time
- View and print determination information
- Dashboard: View all recently submitted cases

Keys to Successful Precertification

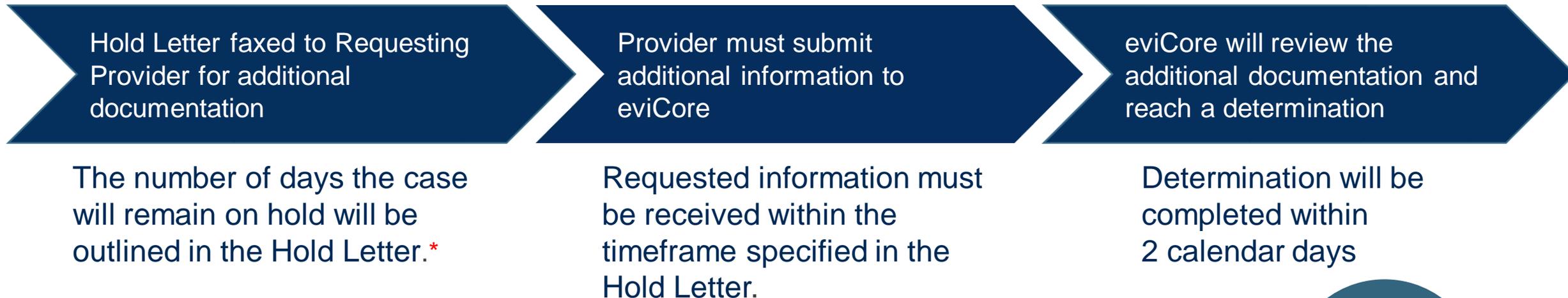
To obtain precertification on the very first submission, the provider submitting the request will need to gather four (4) categories of information:



Insufficient Clinical – Additional Documentation Needed

Additional Documentation to Support Medical Necessity

If all required pieces of documentation are not received or are insufficient for eviCore to reach a determination, the following will occur:



**Hold timeframe will vary by the plan and/or state.*



Precertification Outcomes & Special Considerations

Precertification Approval

Approved Requests

- Standard requests are processed within two (2) business days **after** receipt of all necessary clinical information*
- When initiating a case on the web, you will receive real time authorizations for cases that meet medical necessity on initial portal submission
- Authorization letters will be faxed to the referring physician & rendering provider and can be printed on demand from the eviCore portal at www.evicore.com/ep360
- Customers will receive an authorization letter by mail

**Timeframe will vary by plan and/or state regulations*



Precertification Outcomes - Adverse Determination



- When a request does not meet medical necessity based on evidence-based guidelines, an adverse determination is made and the request is denied
- In those cases, a denial letter with the rationale for the decision, reconsideration options and appeal rights will be issued by eviCore to the ordering physician, rendering facility and customer
- Adverse determination letters can be printed on demand from the eviCore portal at www.evicore.com/ep360

Special Circumstances

Retrospective (Retro) Authorization Requests

- Any requests submitted after date of service will be considered retrospective
- Retrospective requests will be accepted and reviewed
- Timeframe to submit may vary by plan and/or state regulations

Urgent Precertification 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
- Can be initiated on provider portal or by phone **800-298-4806**
- Urgent requests will be reviewed within 72 hours



Special Circumstances: Post-Decision Options

My case has been denied. What's next?

- Once a request has been reviewed and denied, it is important to know what reconsideration options are available.
- The determination letter is the best immediate source of information to assess what options exist on a case that has been denied. You can also call us at **800.298.4806** to speak to an agent who can provide available option(s) and instruction on how to proceed.



Special Circumstances: Post-Decision Options cont.

My case has been denied. What's next?

Reconsiderations

- A Reconsideration is a post-denial, **pre-appeal** opportunity to provide additional clinical information
- A reconsideration can be requested anytime, up until an appeal is received.
- Reconsiderations can be requested by phone at **800.298.4806** or via a peer-to-peer consultation with an eviCore physician

Appeal Process

- Cigna will process first-level appeals. Delegation of second level appeals will vary by plan and/or state regulations
- The timeframe to submit an appeal request will be outlined on the determination letter and is typically within 180 days of the adverse decision*

Appeal Process (cont.)

- Appeal requests can be submitted to Cigna in writing via US Mail or by fax. The Cigna appeal address and fax number will be provided on the determination letter.
- Customers or Providers with appeal questions may call the number indicated on the customer's ID card
- The appeal determination will be communicated by Cigna to the ordering provider and customer
- Appeal turnaround times:*

 - Expedited 72 hours
 - Standard customer 30 days
 - Standard Provider 60 days

**May vary by plan and/or state regulations*

Peer-to-Peer Request

- If a request is not approved and requires further clinical discussion for approval, we offer peer-to-peer consultations with referring physicians and an eviCore Medical Director
- Peer-to-peer consultations may result in either a reversal of decision to deny or an uphold of the original decision
- A peer-to-peer consultation may be requested by visiting: www.evicore.com/provider/request-a-clinical-consultation or by calling eviCore at **800.298.4806**

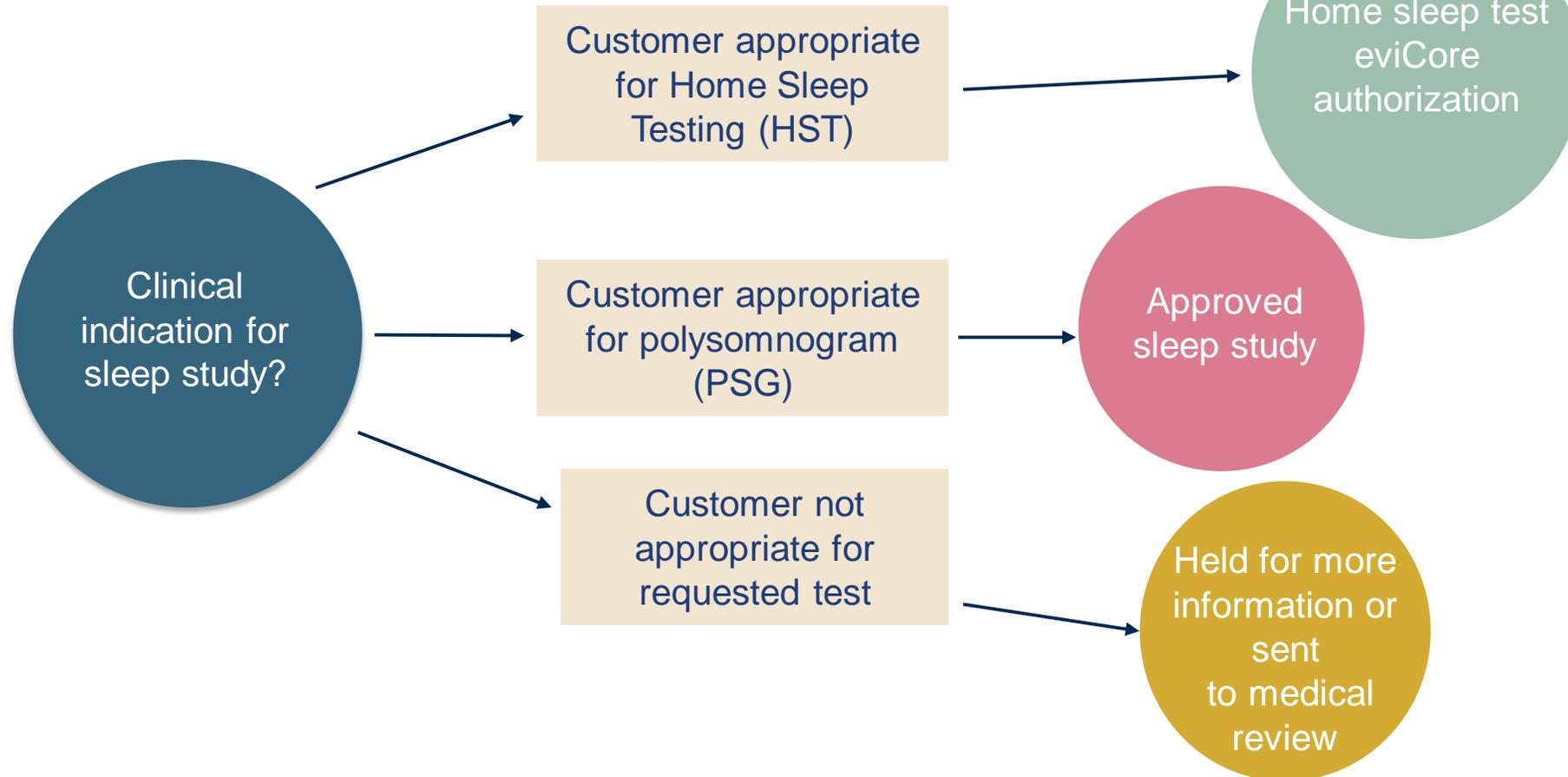


Sleep Study

Site of Service Precertification

Sleep Study Referral Workflow

Cigna's and eviCore's evidence-based guidelines & clinical pathways direct to the appropriate site of service based on the information gathered from the referring provider.



Sleep Study – Clinical Guidelines Summary

Home Sleep Apnea Test Home Sleep Apnea Testing (HSAT) is the **preferred study**.

Attended Sleep Study Indications Attended sleep studies are the most appropriate test when a patient has one or more comorbid diagnoses that make an HST an inappropriate choice for sleep apnea testing. In addition, an attended study would be appropriate if the patient DOES NOT have the mobility, dexterity or cognitive ability to use an HSAT safely at home or HSAT has been attempted and is inconclusive.

Multiple Sleep Latency Testing. Multiple sleep latency testing (MSLT) is a tool to help diagnose and treat patients with severe daytime sleepiness. Standard protocol for this procedure is that a PSG MUST be completed the night before the MSLT. Therefore, MSLT requests should be accompanied by a request for an attended sleep study.

Repeat Sleep Testing The patient MUST be compliant with the current treatment. Repeat testing is generally not necessary to supply new PAP equipment.

To access the Clinical Guidelines, please visit: <https://www.evicore.com/cigna>

Sleep Management Worksheet

 Sleep Study Worksheet PH#: 888-511-0401 Website: www.eviCore.com (The following form must be filled out completely for all sleep testing)		
Patient	Patient Name: _____	
	DOB: _____	
	Insurance Plan: _____ Member ID: _____	
	Epworth Sleepiness Score (ESS, see page 4): _____	
	BMI: _____ Height: _____ Weight: _____	
Physician	Ordering Physician Name: _____ MD NPI #: _____	
	Physician Address: _____	
	City: _____ State: _____ ZIP: _____	
1	a. Study Requested <input type="radio"/> Home Sleep Test (G0399) <input type="radio"/> Split Sleep Study (95811) <input type="radio"/> Polysomnography - Attended (95810) <input type="radio"/> PAP Titration or Re-titration (95811)	
	b. Has the member had a sleep study in the past? If yes, please complete sections (5) and (6) below. <input type="radio"/> Yes <input type="radio"/> No	
	c. If a facility study is checked, but only a Home Sleep Test meets criteria, would you like to order a HST instead? <input type="radio"/> Yes <input type="radio"/> No	
	d. Has the patient had a comprehensive sleep evaluation by the ordering physician? <input type="radio"/> Yes <input type="radio"/> No	
	e. Participating site if a facility based study is authorized.	
	Name: _____ TIN: _____	
2	a. Complaints and Symptoms: (Check all that apply)	
	<input type="checkbox"/> Snoring <input type="checkbox"/> Excessive daytime sleepiness <input type="checkbox"/> Disturbed or restless sleep	
	<input type="checkbox"/> Non-restorative sleep <input type="checkbox"/> Morning headaches <input type="checkbox"/> Memory loss	
	<input type="checkbox"/> High blood pressure <input type="checkbox"/> Witnessed pauses in breathing <input type="checkbox"/> Choking during sleep	
	<input type="checkbox"/> Gasping during sleep <input type="checkbox"/> Frequent unexplained arousals <input type="checkbox"/> Nocturia	
	<input type="checkbox"/> Decreased libido <input type="checkbox"/> Irritability <input type="checkbox"/> Non-ambulatory individual	
	<input type="checkbox"/> Patient works night shift <input type="checkbox"/> Patient sleeps <6hrs per night	
	Page 1 of 4	
	eviCore healthcare www.eviCore.com 400 Buckwalter Place Blvd • Bluffton, SC • 29910 800.918.8924	

- Worksheets for attended Sleep Studies and Multiple Sleep Latency Test (MSLT) procedures are available on the eviCore website
- Provider should complete this worksheet **prior** to contacting eviCore for an authorization
- **Please Note:** The worksheet is a tool to help providers prepare for precertification requests via the **web portal** (preferred method) or by phone and should not be faxed to eviCore to build a case

To access the Clinical Worksheets, please visit:

www.evicore.com/provider/online-forms

Provider Resources

eviCore Online Resources & Web Support Services

**For eviCore Online Resources & Web
Portal Questions - Contact a Web Support
Specialist**



Call: 800.646.0418 (Option 2)



Email: portal.support@eviCore.com

Web Support Services-Available Monday – Friday 7am to 6pm CST

Dedicated Call Center

Precertification Call Center - 800-298-4806, options 1, 1, 1

Our call center is open Monday – Friday from 8am to 9pm EST

Saturday – Sunday 10am to 6pm EST

Providers can contact our call center for the following:

- Request precertification
- Check status of existing authorization requests
- Discuss questions regarding authorizations and case decisions
- Change facility or CPT Code(s) on an existing case
- Request to speak to a clinical reviewer
- Schedule a peer-to-peer consultation with an eviCore Medical Director



Note: *To ensure you have a successful experience in reaching the desired representative, please listen carefully to the phone prompts when calling the eviCore authorization call center. You may also call Cigna Customer Service at 800.88Cigna (800.882.4462)*

Client & Provider Operations Team

Client and Provider Services

Dedicated team to address provider-related requests and concerns including:

- Questions regarding Accreditation, and/or Credentialing
- Requests for an authorization to be resent to the health plan
- Eligibility issues (customer, rendering facility, and/or ordering physician)
- Issues experienced during case creation
- Reports of system issues

How to Contact our Client and Provider Services team

- **Email:** ClientServices@evicore.com (preferred)
- **Phone:** 1.800.575.4517 (option 3)
- For prompt service, please have all pertinent information available. When emailing, make sure to include Cigna health plan in the subject line with a description of the issue; include customer, provider and case details when applicable.



Provider Resources

Cigna Provider Resource Pages

eviCore's Provider Experience team maintains provider resource pages that contain specific Sleep Diagnostic educational materials to assist providers and their staff on a daily basis. The provider resource page will include, but is not limited to, the following educational materials:

- Training Sessions Schedule
- Provider Training Presentation
- List of CPT codes that require Precertification through eviCore
- Quick Reference Guide (QRG)
- Frequently Asked Questions (FAQ) Document

To access these helpful resources, please visit:

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

Detailed information is available on the Cigna Sleep Management Program website (CignaforHCP.com > Precertification Process > Sleep)



Claims Submission

Cigna Accounts Receivable Snapshot

- All claims should be submitted directly to Cigna or to the Payor. Check the customer ID card for claims address
- A Payor ID is used by a provider to submit a claim to Cigna through electronic billing. **Cigna's Payor ID is 62308**
- Providers are required to enroll in Electronic Fund Transfer (EFT) with both **Cigna and eviCore** in order to receive payment for services rendered. Please forward this information to the person in your organization who is responsible for this activity.
- Providers are encouraged to utilize Cigna's provider self-service tools to manage accounts receivable at www.cignaforhcp.com for:
 - Electronic Payment (EFT)
 - Remittance Reports & Claim Status Inquiry 835/837
- If the available self-service tools do not provide claim resolution, providers should contact Cigna through www.cignaforhcp.com or 1.800.88Cigna (800.882.4462). All inquiries regarding Cigna claims submissions should be directed to Cigna

Detailed claims information is available on the Cigna website (CignaforHCP.com > Get questions answered: Resource > Reimbursement and Payment Policies)

Provider Web Portal

Initial Registration

- For First Time Users: Access the eviCore portal at www.evicore.com/ep360 and choose Sign Up Now

eviCore innovative solutions healthcare

Sign in with your existing account

Email Address

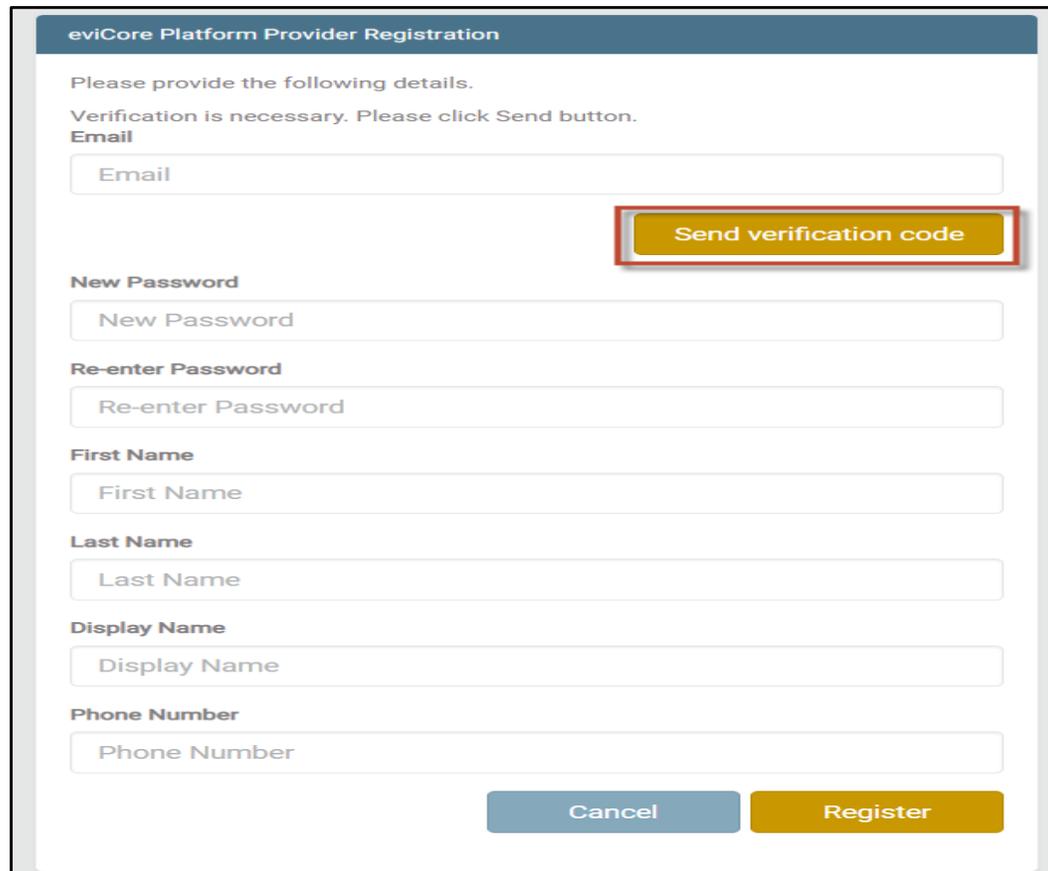
Password [Forgot your password?](#)

Sign in

Don't have an account? [Sign up now](#)

eviCore Provider Portal

- Begin by completing the brief registration process.
- Enter your email and click on “Send verification code” which you will receive via email
- Enter this code, click on “Verify Code” and complete your provider demographics



eviCore Platform Provider Registration

Please provide the following details.
Verification is necessary. Please click Send button.

Email

Send verification code

New Password

Re-enter Password

First Name

Last Name

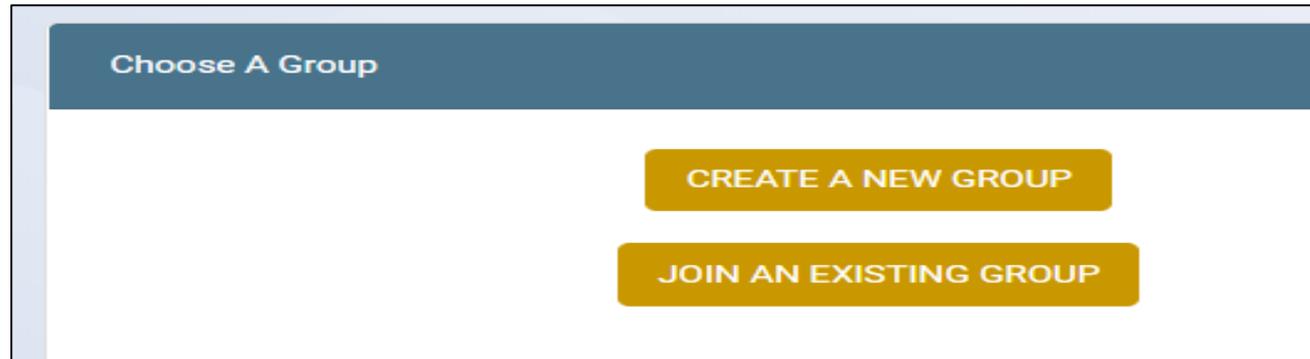
Display Name

Phone Number

Cancel **Register**

Admin Registration

- Next, you will Create A New Group



Group Creation

- User will enter the required details to create a new group
- Accept the terms and conditions and privacy policy on the next screen

Create Provider Group

Enter your group details:

Group Name

Ordering Provider Rendering Provider

Address 1

Address 2

City State Zip

Phone Fax

Provider Registration

- Once user has successfully created a group, you should:
 1. Make note of the Provider Group Join Code and provide to all users for that group
 2. Add new Non-Admin Users, or alternate Admins
 3. Add Providers - Add all NPIs and TINs for users

eviCore Platform Provider User Group Administration Go to website

Office

medical external provider - Ordering ✎

#203, 52 W, 60th street Westmont, IL 60559
(331) 481-3612 📞 (456) 456-4645 📠

Provider Group Join Code **1**

sYx113 ← Copy Generate New

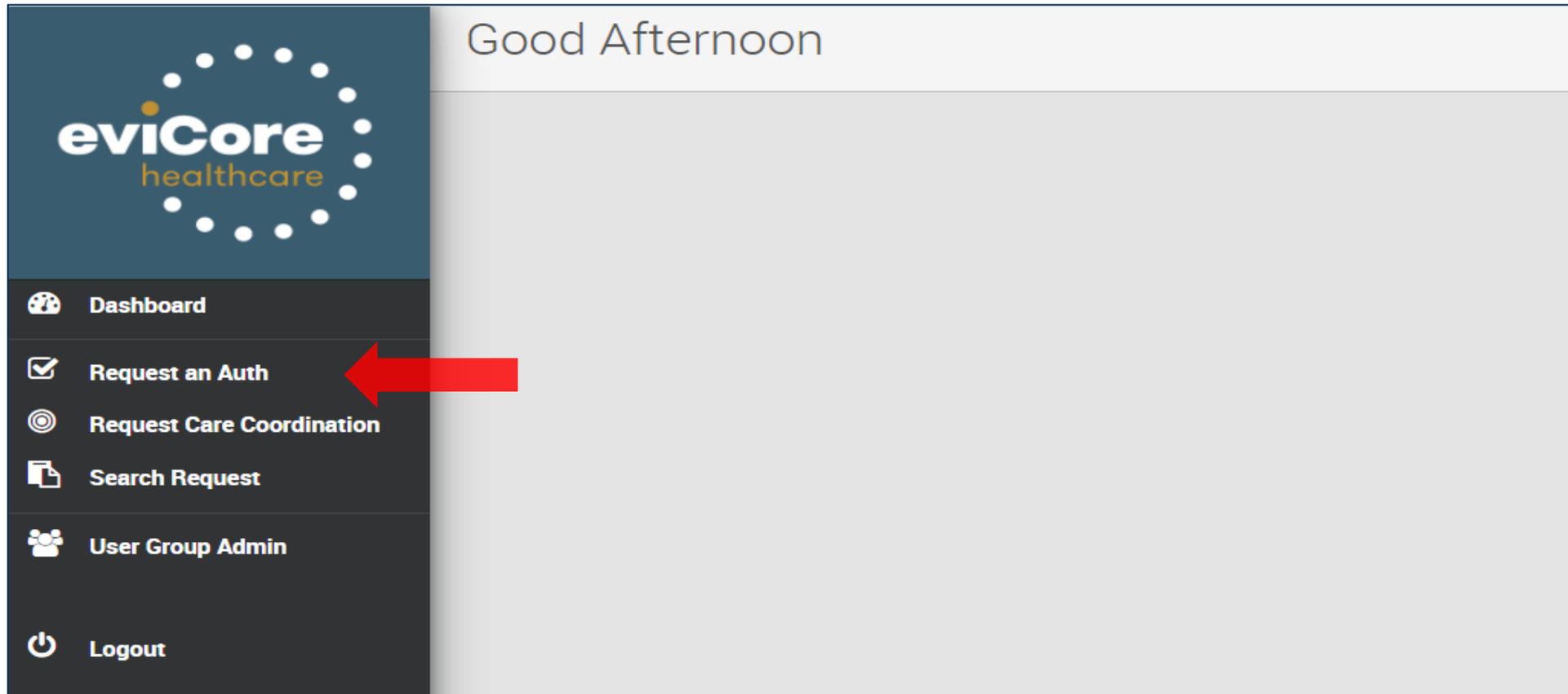
Users ➕ Invite **2** **Providers** ➕ Add **3**

Name	Status	Permissions
Erica Brown		👤 🔒 ★ 🗑️

Name	NPI	Tools
------	-----	-------

Start the Request for a Precertification

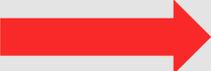
- After logging in, you will see the main screen and user dashboard. Choose “Request an Auth” to begin.



Initial Request Details

- Complete all fields and choose “Search”
- Customer info will populate at the bottom of the screen. Verify customer and select “Continue”

Submit a Request for Service



Member Search

Healthplan

3rd Party is the primary payer

Choose Requesting Service Type

Sleep

Please select a subcategory

PAP Therapy Sleep Testing

DME

Fertility

HomeHealth

Choose Sleep/Sleep Testing

Don't see the service you're looking for?

Date Of Service

Enter Date of Service

This is an urgent request

This is a retro request

Diagnosis

Enter Diagnosis

Patient

Enter Customer's ID# or Name and DOB

↑ OR ↓

First Name

Last Name

Date of Birth

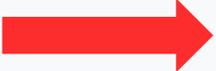


Member Name	DOB	Address	Member #	Insurance Category	Eligibility Dates
Test Member	01/01/1980	555 Main Street NY, NY 55555	123456789	Commercial	01-01-2020 to 07-31-2027

Showing 1 - 1 of 1 entries

Enter Service and Provider Details

- Complete all fields and choose “Continue”

Submit a Request for Service  [Continue](#)

[Back](#)

Patient

Test Member	01/01/1980	123 Main Street NY, NY 12345	123456789	Commercial	01-01-2019 to 12-31-9999
-------------	------------	------------------------------	-----------	------------	--------------------------

Please fill out the information below. Ordering Physician and Servicing Provider are mandatory.

Procedure codes

Enter a code number or description in the field below.

Procedure code

Ordering Physician [Change](#)

 TestProvider_ML
 1234 E SUNNYSIDE RD, IDAHO FALLS, ID 834047521
 2085238500
 1234567890

Servicing Provider

IFP CONNECT CHILD NATIONAL LAB SERVICES C
111 EVANS OAK LN, SAINT LOUIS, MO, 63110
NPI: 1023106796 - TIN: XXXXX2009

Choose a place of service for the procedure

- Choose a site for the procedure
- Office
- Off Campus-Outpatient Hospital
- On Campus-Outpatient Hospital

Contact Person









Enter Procedure Code

Search for Ordering Physician by Name or TIN/NPI

Search for Servicing Provider by NPI/TIN. Add address details to narrow the search.

Choose place of service for procedure

Enter Contact Info for Physician

Complete Clinical Questions

- The next screen will be a series of clinical questions, relative to the request, which will be reviewed to determine medical necessity
- You will have the ability to make changes to your responses prior to submission by clicking on the answer. Once you have completed all questions, click on Submit Request.
- You will then get an auto response of either; pending, approved, or alternate recommendation (such as Home Sleep Study (HST)).

Please answer the following questions before we can complete your Request:

Click on any answer to edit response before submitting

Review History

- Are you ready to submit clinical information?
✔ Yes
- Please select the reason for the this sleep study.
✔ Initial Study for Suspected Obstructive Sleep Apnea (OSA)
- Why does the individual need an attended study?
✔ Congestive Heart Failure (CHF)
- How was the congestive heart failure characterized in the chart?
✔ Mild
- Has the individual been diagnosed with one of the following?
✔ Unknown
- Has the individual completed a sleep survey?
✔ Yes
- Has a bed partner witnessed the individual's sleep apnea?
✔ Unknown
- Is there a documented diagnosis of OSA (obstructive sleep apnea)?

Submit Request

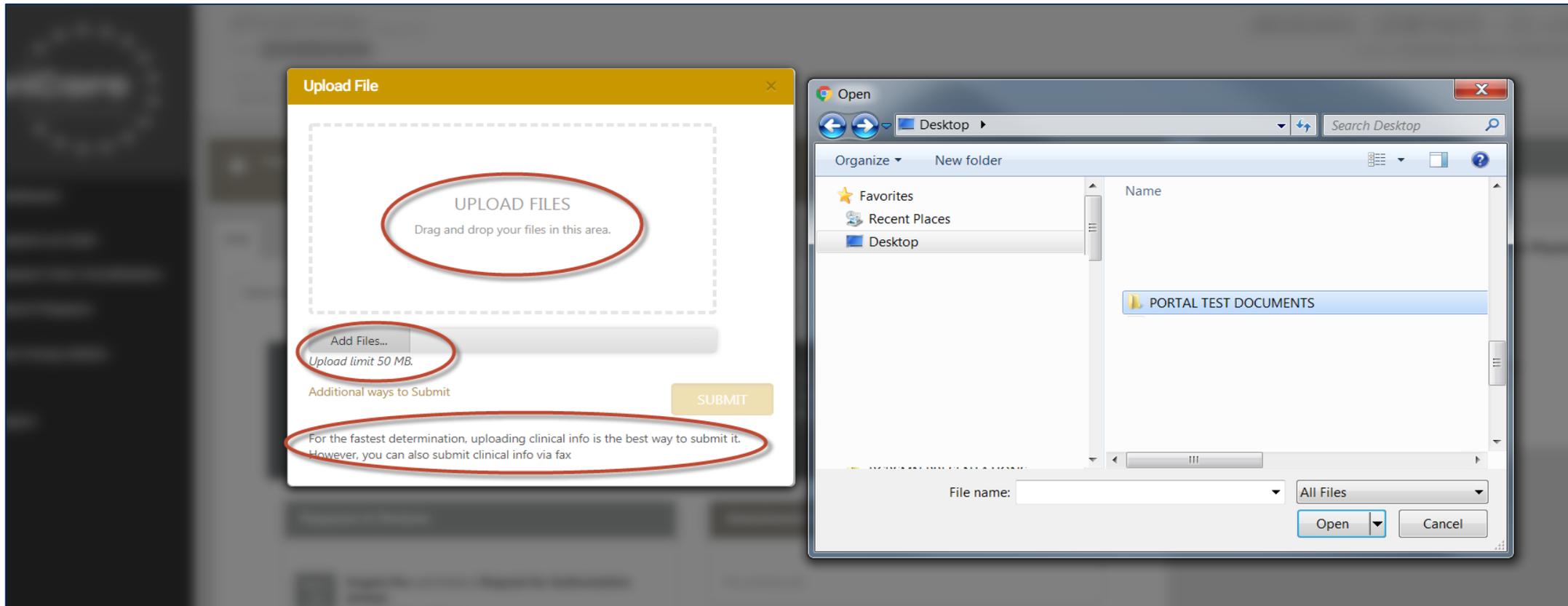
Pending Clinical

- If your request requires clinical documentation, you will be redirected to attach the documents
- Click on “Submit Clinical info now” and you will be prompted to upload the supporting documents

The screenshot displays a clinical request interface for request ID TS6H3FD5KL. The status is 'Waiting On Clinical Info'. A yellow banner with a warning icon contains the message: 'Clinical information is required in order to review this Request. [Submit Clinical info now](#)'. A red circle highlights the 'Submit Clinical info now' link, and a red arrow points to it from the right. Below the banner, the 'Information' tab is active, showing 'Dates of Care' with a 'START' date of Jan 15 and a 'LAST' date field. The 'PATIENT CAME FROM:' field is set to 'TEST SLEEP LAB'. The 'Requests & Reviews' section shows a log entry for 'Chirag Test submitted a Request for Authorization (Initial)' on JAN 9. The 'Attachments & Notes' section is currently empty, showing 'No activity yet.' The 'Notifications & Letters' section is also empty.

Attach Clinical and Submit

- You will see a pop up window to upload clinical documents
- You will navigate to your system to locate the documents and attach to the case
- All information will now be transmitted to eviCore to begin the precertification review process



Thank You!

