

What is the Hi-Tech Radiology Site-of-Care program?

The site-of-care program supports our efforts to provide Cigna customers with the right care at the right place and right time. As a part of this program, precertification for certain MSK procedures will include a medical necessity review of both the requested service(s) and the service location.

How will requesting providers know if a customer is included in the site-of-care program?

Providers do not need to do anything. If a customer is included in the site-of-care program, the precertification pathway will seamlessly recognize the customer without any effort from the provider. There is no change to the process for initiating precertification requests for customers whose benefit plans include a site-of-care medical necessity review. If a provider requests an outpatient hospital setting for one of these affected customers, they will need to provide clinical rationale for the hospital setting. If no clinical rationale is shared, EviCore will deny the non-preferred site of service.

How will the program impact ordering providers?

There will be no change when ordering providers refer patients to a freestanding radiology center. If a provider directs a patient to an outpatient hospital setting and there is an alternative preferred radiology center available, he or she will need to identify the clinical condition that warrants the need for the service to be performed there. If there is no clinical rationale, EviCore will deny coverage for the service at the outpatient hospital setting.

How will the program impact service locations?

Hospitals may see a reduction in the number of high-tech imaging services approved at their facilities.

How will the program impact customers?

Cigna customers may receive a denial of coverage for imaging procedures if their provider requests the service to be performed at an outpatient hospital setting, unless that setting is determined to be medically necessary. EviCore will attempt to contact customers who have approved procedures, but the site of service denied explaining the reason for the denial.

What procedures will require site-of-care precertification through EviCore?

The site-of-care program will apply to the following EviCore-managed high-tech radiology services:

- MRI
- CT
- Select magnetic resonance angiographies
- Select computed tomography angiographies Sacroiliac joint injections

Where can providers view the site of care coverage policy?

The Site of Care: [EviCore Cigna Commercial Membership](#) | [EviCore by Evernorth](#)

Will the precertification process change?

There will be no changes to the current precertification process when requesting coverage for services provided at a freestanding radiology center or another preferred location. When requesting coverage for an outpatient hospital setting, providers will need to provide clinical rationale.

Will urgent requests require site-of-care review?

No. Urgent requests will not be subject to site-of-care review. Services performed in an emergency room setting are already excluded from all precertification.

What if the requested procedure is approved but the site is denied or the site is approved and the procedure is denied?

In either of these cases, services rendered in the requested place of service will not be covered. Providers can follow the directions in the denial letter for post-decision options. If the site is denied and the procedure is approved, providers can also resubmit the request with a freestanding radiology center.

Will claims be paid if the site of service is denied and the procedure is performed at the denied site?

If the procedure is performed without an approved precertification, including the site of service, the claim will not be paid.

What is reconsideration?

Providers and/or staff may be able to request a reconsideration of a site denied/procedure approved (or vice versa) by submitting additional clinical information. Reconsideration must be requested on or before the anticipated date the services will be performed.

What is a peer-to-peer clinical consultation (P2P)?

A P2P clinical consultation is a discussion between a provider and an EviCore medical director in which the provider can provide additional clinical information. We welcome these consultation requests, and in certain instances, additional clinical information provided during the consultation is sufficient to satisfy the medical necessity criteria for approval. A clinical consultation can only be performed by a requesting provider, nurse practitioner, or physician assistant.

If a requested procedure is approved but the site is denied and the requesting provider wishes to change the site of care to a preferred site, what should he or she do?

The ordering provider will need to contact EviCore to request a new precertification.



Site of Care Frequently Asked Questions (FAQs)



How should providers submit an appeal for the site of service?

Appeal options, including a reconsideration or clinical consultation (if applicable), will be explained in the denial letter.

Will the requested site be notified if the request is denied?

If a request for precertification is denied, we will notify the ordering provider, requested site, and customer.

If a rendering provider has questions about becoming a preferred site, who should they contact?

Providers may contact their Cigna contracting representative.