

Administrative Policy



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Non-Participating Laboratory Services

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PURPOSE

Administrative Policies are intended to provide further information about the administration of **standard** Cigna benefit plans. In the event of a conflict, a customer's benefit plan document **always supersedes** the information in an Administrative Policy. Coverage determinations require consideration of 1) the terms of the applicable benefit plan document; 2) any applicable laws/regulations; 3) any relevant collateral source materials including Administrative Policies and; 4) the specific facts of the particular situation. Administrative Policies relate exclusively to the administration of health benefit plans. Administrative Policies are not recommendations for treatment and should never be used as treatment guidelines.

Administrative Policy

Cigna reimburses covered laboratory and pathology services from non-participating laboratories and health care professionals at the applicable out-of-network benefit level (if available).

Covered Services from a non-participating laboratory or non-participating health care professional may be reimbursed at the customer's in-network benefit plan level in limited circumstances if:

- Laboratory and pathology services are associated with a true emergency service visit.
- Federal or state law requires that laboratory and pathology services are to be paid at the in-network benefit level.
- Laboratory and pathology services are not available from a participating laboratory and the services are Covered Services (medically necessary and a covered benefit). Services will be reviewed to determine if Cigna's Network Adequacy Policy applies.

General Background

Cigna maintains an extensive participating national laboratory network that includes Quest Diagnostics® and LabCorp. These participating laboratories offer a quality comprehensive range of covered laboratory services including specialized services such as anatomic pathology, specialized genetic and pharmacogenetic testing, and pain management laboratory testing.

Unless otherwise authorized or approved by Cigna, all claims received from non-participating laboratories will be processed at the out-of-network benefit level, except in the limited situations noted above.

Definitions

Participating: Any doctor, hospital, clinic or laboratory[†] contracted with Cigna to provide health care services.

Non-participating: Any doctor, hospital, clinic or laboratory not contracted with Cigna to provide health care services.

In-network benefit level: Coverage level applied when care is provided to a Cigna customer by a doctor, hospital, clinic, or laboratory that is contracted with Cigna to provide health care services.

Out-of-network benefit level: Coverage level applied when care is provided to a Cigna customer by a doctor, hospital, clinic, or laboratory that is not contracted with Cigna to provide health care services and that does not participate in the network associated with the customer's Cigna plan.

†Note: For a list of participating laboratories in your area, go to myCigna.com and search for participating laboratories in the health care professional directory. Or, call Cigna Customer Service at 1.800.244.6224.

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