ELECTRONIC DATA INTERCHANGE

Electronic precertification and referral submission eCourse
for medical and behavioral providers
to help you successfully submit electronic precertification requests

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WELCOME

At Cigna, we want to help you make the most of your time, and provide the tools to help you lower your administrative costs.

Using electronic precertification and referral submission (the ANSI 278 transaction) is faster than using paper, allows Cigna to process your requests faster, and is less expensive than manual and phone requests.

This course will provide you with information about submitting electronic precertification and referral requests to Cigna.

WHAT IS ELECTRONIC DATA INTERCHANGE?

Electronic data interchange (EDI) is the electronic exchange of health care information between providers and facilities, payers, and vendors.

With EDI, patient information is transferred between providers and payers in a standard and secure way.

Research* shows that health care professionals who use EDI transactions can save time and money by:

- Reducing paperwork, and eliminating printing and mailing expenses
- Saving time on the phone and fax when they electronically submit precertification or referral requests

Providers

Vendors → Vendors → Vendors

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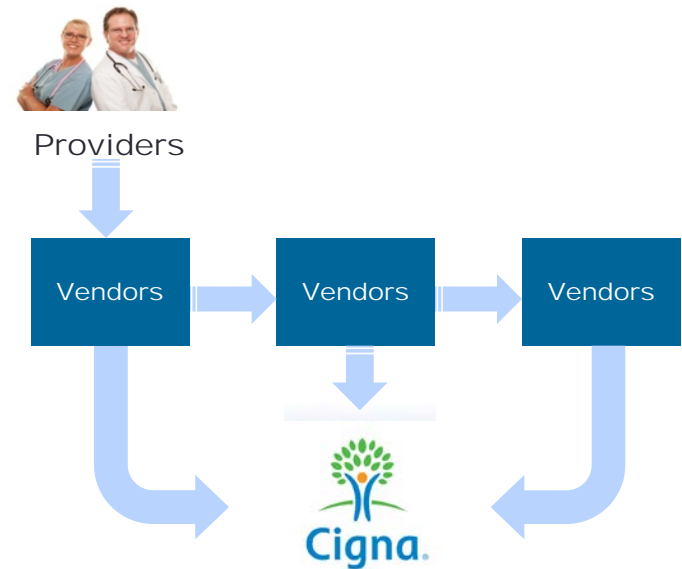
EDI includes electronic precertification and referral requests, also known as the **ANSI 278 transaction.****

* Source: Council for Affordable Quality Healthcare
(CAQH), "2013 U.S. Healthcare Efficiency Index®", 2014

**This is an industry-wide, standard electronic transaction.

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PRECERTIFICATION VERSUS REFERRAL

Different data elements are needed

Precertification

Definition: The process of submitting a request for coverage prior to:

- Hospital admissions
- Certain inpatient services
- Selected outpatient procedures, treatments, and services

Purpose: To determine the patient's eligibility, benefit coverage, medical necessity, location, and appropriateness of service.

Our response: May be "pended," "approved," or "denied."

Referral

Definition: The process of a primary care physician (PCP) referring a patient to a specialist for specific services or conditions.

Purpose: To manage patient care by ensuring the patient receives the right care, at the right place, at the right time.

Our response: "We have received your request and no further action is required."

ELECTRONIC REQUEST CHANNELS: PRECERTIFICATION AND REFERRAL

Cigna offers options for you to complete your requests

Option 1: NaviNet (precertification requests only)
There are two ways to access NaviNet to submit precertification requests to Cigna:*

- **Cigna for Health Care Professionals website** (CignaforHCP.com)
  Note that as a registered user of this website, you will also have access to other functionality and information.

- **NaviNet website** (NaviNet.net)
  You can directly submit precertification requests to multiple payers at this website.

Option 2: EDI 278 transaction
Perform 278 real-time and batch transaction precertification and referral requests via your EDI trading partner or clearinghouse.

To learn more about precertification requests go to CignaforHCP.com > Resources > Medical Resources > Doing Business with Cigna > Precertification > Online Precertification.

* NaviNet is currently not available for referral requests, or for precertification requests for behavioral health, substance use, dental requests, or for patients with GWH-Cigna or "G" ID cards.

278 TRANSACTION

How to submit precertification and referral requests

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INFORMATION TO INCLUDE ON YOUR 278 REQUEST*

Referrals

Add the information in the tables below to help Cigna process your **referral** request more quickly.

Requester information

Requesting PCP
NPI #
Contact name
Contact phone and fax number

Patient information

Member name
DOB
Member ID (from the patient's ID card)
Member diagnosis

Specialist information

Specialist name
NPI #
Specialist phone and fax number

To avoid delays in processing your referral, please confirm your EDI vendor is using "SC" for specialty care review in the Request Category Code field (UM01 segment).

* The elements described on this page are not required in the ANSI 278 transaction, However, when they are provided, it will help us to process your requests faster and more efficiently.

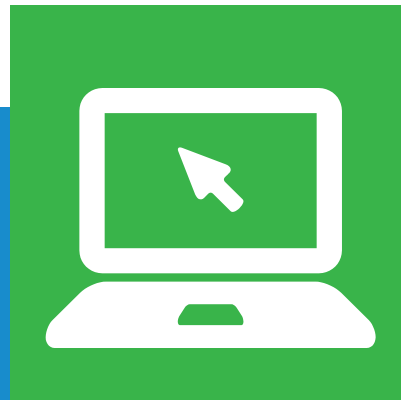# INFORMATION TO INCLUDE ON YOUR 278 REQUEST* (CONT.)

Precertification

Add the information in the tables below to help Cigna process your **precertification** request more quickly.

Requester information:

Requester name
Requester address
Requester city, state, ZIP code
Requester contact information
Requester provider information

Subscriber information

Subscriber name
Subscriber ID (from the patient's ID card)
Subscriber address
Subscriber city, state, ZIP code

* The elements described on this page are not required in the ANSI 278 transaction, However, when they are provided, it will help us to process your requests faster and more efficiently.

INFORMATION TO INCLUDE ON YOUR 278 REQUEST (CONT.)

Precertification (cont.)

Add the information in the tables below to help Cigna process your **precertification** request more quickly.

Dependent information *if different from subscriber*
Information about the dependent involved in the precertification request:

Dependent ID (from the patient's ID card)
Dependent address
Dependent city, state, ZIP code
Dependent date of birth
Dependent gender
Dependent relationship to subscriber

Patient event detail information
Information about the health events involved in the precertification request, as appropriate:

Previous review authorization number
Date of birth
Patient diagnosis
Onset of current symptoms or illness date
Accident date
Event date
Admission date
Discharge date
Last menstrual period date

* The elements described on this page are not required in the ANSI 278 transaction,
However, when they are provided, it will help us to process your requests faster
and more efficiently.

INFORMATION TO INCLUDE ON YOUR 278 REQUEST (CONT.)

Precertification (cont.)

Add the information in the tables below to help Cigna process your **precertification** request more quickly.

Patient event provider information
Information about the provider requesting precertification:

Requesting provider name
Requesting provider address
Requesting provider city, state, ZIP code

Service level information
Information about the details of the service being requested for precertification:

Previous precertification reference number
Service date

Service provider information
Information about the provider delivering the treatment requested for precertification:

Servicing provider name
Servicing provider supplemental identification
Servicing provider address
Servicing provider city, state, ZIP code
Servicing provider contact information

To avoid delays in processing your precertification requests, please confirm your EDI vendor is using "AR" for admission review or "HS" for health services review in the Request Category Code field (UM01 segment).

* The elements described on this page are not required in the ANSI 278 transaction, However, when they are provided, it will help us to process your requests faster and more efficiently.

278 REAL-TIME AND BATCH TRANSACTIONS

Cigna supports the use of real-time and batch 278 transactions

Real-time transactions

When you submit your precertification or referral request in a 278 real-time transaction, you will receive an electronic response within 20 seconds (average time), indicating the request has been pended for review. You will receive a final response with the outcome of your request via fax or phone.

Batch transactions

You can submit multiple precertification and referral requests directly to Cigna in one ANSI 278 transaction through your EDI vendor.* You will receive an electronic response by 7:00 a.m. EST on the third-business day from the time the 278 transaction is received.

Every effort is made to either approve or deny (and not pend) requests. Approved requests for precertification will contain the authorization number.

if you are interested in using the 278 batch transaction, please contact your EDI vendor.

* Currently not available through NaviNet.

HOW TO CHECK THE STATUS OF YOUR REQUESTS

Cigna offers options for you to check the status of your precertification and referral requests.

NaviNet (precertification only)
There are two ways to access NaviNet to check the status of your precertification requests.* No matter how you submitted your request – online, by fax, or by phone – you can view its status online using the precertification tracking number or patient name.

- **Cigna for Health Care Professionals website** (CignaforHCP.com)
  As a registered user of this website, you will also have access to other functionality and information.

- **NaviNet website** (NaviNet.net)
  You can directly check the status of precertification requests with multiple payers at this website. If you have questions about your precertification request, call NaviNet Customer Care at 1.888.482.8057.

Cigna (precertification and referral)
If you prefer to call Cigna directly to check the status of your precertification or referral submissions, use the phone numbers below.

- **Medical**
  Precertification requests:
  1.800.88Cigna (882.4462)

  Referral requests:
  1.866.494.2111
  Chose the prompt for specialist referral

- **Behavioral**
  Precertification requests:
  1.800.926.2273

* NaviNet is currently not available for behavioral health, substance abuse, dental requests, or for patients with GWH-Cigna or "G" ID cards.

Congratulations!

You have completed the Electronic Data Interchange Electronic Precertification and Referral Submission eCourse.

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