



June 16, 2023

Re: Reimbursement policy update – Revenue codes 249-259 and 637 billed without a procedure code effective September 17, 2023

We routinely review our coverage, reimbursement, and administrative policies for potential updates. In that review, we take into consideration one or more of the following: Evidence-based medicine (EBM), professional society recommendations, Centers for Medicare & Medicaid Services (CMS) guidance, industry standards, and our other existing policies.

As a result of a recent review, we will administratively deny revenue codes 249-259 and 637 when billed without a procedure code.

Denials will include administrative appeal rights. Alternatively, providers may rebill the previously denied revenue code with the corresponding Current Procedural Terminology (CPT®) or Healthcare Common Procedure Coding System (HCPCS) code.

This update is effective for dates of service on or after September 17, 2023. We will update the Revenue Code Billing Requirements (R41) reimbursement policy to reflect this change.

Additional information

For more information about our policy updates, visit the Cigna for Health Care Professionals website (CignaforHCP.com) > Resources > Coverage Policies > Policy Updates.

If you are not a registered user, please register so that you may log in and access all of our coverage, reimbursement, and administrative policies. Go to CignaforHCP.com and click Register. If you do not have Internet access or would like additional information, call Cigna Customer Service at **800.88Cigna (882.4462)**.

Thank you for the care you provide to our customers.

Sincerely,

Julie B. Kessel, MD
Medical Officer for Coverage Policy
Clinical Performance & Quality Organization

At a glance

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