

Cigna
900 Cottage Grove Road
Bloomfield, CT 06002



March 15, 2024

Re: Reimbursement policy update – Facility claims for 3D

**rendering billed with Current Procedural Terminology code
76376 effective June 16, 2024**

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, professional society recommendations, Centers for Medicare & Medicaid Services guidance, industry standards, and our other existing policies.

As a result of a recent review, we will administratively deny facility claims billed with Current Procedural Terminology (CPT®) code 76376 as incidental, consistent with the process in place for professional claims. Denials will affect the claim line only and include administrative appeal rights.

We will update the Omnibus Reimbursement Policy (R24) to reflect this change. This update is effective for dates of service on or after June 16, 2024.

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. To register, go to CignaforHCP.com and click Register. If you do not have Internet access or would like additional information, call Cigna Healthcare Provider Service at **800.88Cigna (882.4462)**.

Thank you for the care you provide to our customers.

Sincerely,

A handwritten signature in black ink that reads "Julie B. Kessel MD".

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

At a glance

- We will administratively deny Current Procedural Terminology (CPT®) code 76376 as incidental, consistent with the process in place for professional claims.
- This update is effective for dates of service on or after June 16, 2024.
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