



# IMPORTANT NOTIFICATION

## CODING & DOCUMENTATION SUBMISSION UPDATE

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DATE: 06/03/2019

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Cigna has implemented a 90-day submission period **effective July 1, 2019** impacting date of service encounter ranges as follows:

- **April 1, 2019** date of service encounters going forward **and** associated corrections/addendums must be submitted within 90 days from the date of service.
- **January - March 2019** date of service encounters **and** associated corrections/addendums must be submitted by **July 1, 2019**.

This change will provide consistency for the submission of all patient prospective forms and align with the Centers for Medicare and Medicaid Services (CMS) amendment submission of addendums to 90 days.

Starting **July 1, 2019**, all Cigna patient prospective forms must be submitted within 90 days of the encounter date/date of service for the following assessments:

- Medicare Advantage Physical Exams (MAPEs)/Cigna 360 Exams (EMR 360s, Paper 360s, and Arcadia 360s)
- Health Management Reports (HMRs)

The forms should be submitted within 90 days of the date of service to ensure revisions not related to clarification of a documented diagnosis are following the *Amendments, Corrections, and Delayed Entries in Medical Record Documentation* guidelines. All diagnoses submitted via prospective forms may be subjected to validation in a Risk Adjustment Data Validation (RADV) audit.

While prospective form diagnosis queries are not directly tied to a RADV request, standard operating procedures regarding the abstraction and submission of diagnoses should follow RADV protocol. The protocol is outlined below per the Contract-Level Risk Adjustment Data Validation Medical Record Reviewer Guidance manual dated 3/20/2019, under Documentation Issues, p. 60:

***“Acceptable Amendment:*** *An amendment must be based on an observation of the patient on the date of service, and signed by the physician. Only the attending physician\* can amend the medical record. The most common example is a follow-up note based on a diagnostic test ordered, and related test results received subsequent to the patient visit. Sufficient information must be contained in the amendment to verify the documentation was completed in a timely manner by the attending or treating physician. For RADV, “timely manner” generally means up to 90 days from the encounter, but there could be exceptions, such as extended specialized or revised lab/path results or autopsies, legal cases sequestered before completing record, natural disasters, or delays due to physicians called to military service.*

***Unacceptable Amendment*** – *It is unacceptable for a third party that was not involved in the treatment and evaluation of the patient (e.g., coder, reviewer) to amend the medical record, or query the provider for additional diagnoses or clarifications not documented in the original medical record.”*

\*For Cigna, the attending physician is synonymous with the rendering provider.

## Amendments, Corrections, and Delayed Entries in Medical Record Documentation

- Providers are encouraged to enter all relevant documents and entries into the medical record at the time of rendering service. Occasionally, a provider may discover that certain entries related to actions performed at the time of service were not properly documented, and need to be amended, corrected, or entered after rendering the service.
- Sufficient information must be contained in the amendment to verify the documentation was completed in a timely manner by the rendering provider. For Risk Adjustment Data Validation, "timely manner" generally means up to 90 days from the encounter date.
- **Recordkeeping Principles**

Regardless of whether a documentation submission originates from a paper record or an electronic health record, amendments, corrections or addenda must:

1. Clearly and permanently identify any amendment, correction, or delayed entry as such, and
2. Clearly indicate the date and author of any amendment, correction, or delayed entry, and
3. Not delete, but instead clearly identify all original content

- **Addendum vs. Correction**

**Addendum** - New documentation added to an original entry.

**Correction**- A change in the information that is meant to clarify inaccuracies after the original documentation has been signed or rendered complete.

### Questions?

Visit our website at: [MedicareProviders.Cigna.com/icd-10](https://www.MedicareProviders.Cigna.com/icd-10) for more information.