

MEDICARE ADVANTAGE AUTHORIZATION REQUIREMENTS

For dates of service on or after July 1, 2022

These authorization requirements apply to all Cigna Medicare Advantage markets including Leon Medical Centers Health Plans.

This document lists services, items and medications that require authorization prior to being provided or administered for Cigna Medicare Advantage and Leon Medical Centers Health Plan customers.

- › Any code included on this list requires authorization regardless of how it is classified on this document.
- › Authorization is not required for emergency or urgent care.
- › Some radiology, radiation therapy, medical oncology and cardiac imaging services are managed by our external delegate: EviCore. Please see the eviCore website for more details: EviCore.com/Cigna.
- › All SNF, IRF, LTAC, and Home Health requests are managed by eviCore. Please visit EviCore.com/ep360 for more details.
- › All DME requests (with the exception of Arizona and Leon) are managed by eviCore. Please visit EviCore.com/Cigna for more details.

Services must be provided according to Medicare coverage guidelines established by the CMS. According to the guidelines, all medical care, services, supplies and equipment must be medically necessary. You may review Medicare coverage guidelines at CMS.gov/Medicare-Coverage-Database/.

Arizona Delegated Vendors

The Arizona market has specially delegated vendors for certain services. Please contact these vendors for their delegated services:

- › **American Specialty Health (ASH)** – Chiropractic and Acupuncture
- › **eviCore** – Cardiology, High Tech Radiology, Nuclear Cardiology, and Radiation Therapy
- › **Preferred Home Care (PHC)** – Durable Medical Equipment
- › **Coram Home Infusion** – Home Infusion Services
- › **Professional Health Care Network (PHCN)** – Home Health Care

Authorization requirements

When required, it is the provider's responsibility to obtain authorization prior to services being rendered. Facilities are encouraged to verify that a prior authorization has been approved before providing a service or item, unless the service is urgent or emergent care. Payment may be denied for services rendered without authorization.

All final decisions concerning coverage and payment are based on plan customer eligibility, the customer's benefits, the care provider's contract and applicable State law at the time of service delivery. An authorization number or referral number is not a guarantee of payment. Please always verify benefits.

Authorization requests can be submitted by phone, fax or via web-based [HS Connect \(HSC\)](#) (HS Connect not currently available for Leon and Arizona). For an overview of capabilities and instructions for obtaining access, visit the HSC section of the **Provider Manual** (all except Leon) at MedicareProviders.Cigna.com/static/medicareproviders-cigna-com/docs/medicare-provider-manual-2022.pdf.

Leon Provider Manual at

LMHealthplans.com/Content/en/Provider_Manual.pdf

Refer to the online directory at [Provider Search Online Directory](#).

To locate an in-network health care professional or facility please call the provider customer service line for your market.

- › Arizona: **1-800-627-7534**
- › Leon: **1-305-559-5366**
- › All other markets: **1-800-230-6138**



Referral policy

Cigna values the relationship between the patient, the Primary Care Physician (PCP) and other providers involved in the patient’s medical care. Cigna’s network of specialty physicians are contracted to work closely with our referring PCPs to coordinate and improve the quality of care provided to your Cigna Medicare Advantage patients.

In 2022, a referral may or may not be required for a patient to see a specialist. Please refer to the 2022 Provider Manuals to determine if a referral is required for your patient.

For easy searching, hit Ctrl+F on your keyboard, and type the 5 digit code you are searching for.

Universal Authorization Requirements

- › All inpatient admissions, including:
 - Inpatient Medical and Behavioral Health
 - Inpatient Rehabilitation
 - Long Term Acute Care (LTAC)
 - Inpatient Observation
 - Skilled Nursing Facility
- › All home health care
- › Out of network requests for HMO and POS customers, unless at urgent care, emergency room, or behavioral health emergency setting.
- › Authorization is not required to visit an out of network provider for PPO customers, however, any services and procedures listed on this document still require authorization regardless of provider network status.
- › Access2Care requests for travel more than 60 miles. Requests for travel less than 60 miles do not require prior authorization unless specified on this grid.
- › All transplant requests
- › Behavioral Health Partial Hospitalization Program

Ambulance	A0430	A0431	A0435	A0999	
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Cardiology

Catheter Procedures	93451	93452	93453	93593	93594
	93595	93596	93597		
Devices	0273T	0417T	0418T	0571T	0575T
	0576T	0577T	0613T	93590	93591
	93799				
Echo/EKG	C8926	C8927			
Other	93592				
Stress	0272T	93350	93351		

Diagnostic Services

Cardiovascular	0076T	0115U	35400	78429	78430
	78431	78432	78433	78434	93998
Gastrointestinal	0108U	0114U	48400	91110	91111
	91112	91113	91117	91299	
Genitourinary	0071T	0072T	0422T	0487T	0546T
Invasive	0075T	36660	42975	46601	93456
	93461	93619	93620	93624	93644
	93653	93654	93656		
Muskuloskeletal	0508T	0533T	0534T	0535T	0536T
	0547T				

Diagnostic Services (continued)

Neurologic	0317T	0434T	0435T	0436T	0725T
	0727T	0728T	0729T	95999	
Ophthalmic	0198T	0330T	0506T	0507T	0615T
	92274				
Other	0602T	0603T	0107U	0109U	0110U
	0112U	0113U	0116U	0120U	0129U
	0130U	0131U	0132U	0133U	0134U
	0135U	0136U	0137U	0138U	0358T
	0493T	0559T	0560T	0561T	0562T
	81162				

Durable Medical Equipment

All DME is managed by eviCore. Please visit [EviCore.com/Cigna](https://www.eviCore.com/Cigna) for more details.
 Arizona plans: please contact Preferred Home Care (PHC).
 Leon: Please contact the health plan.

Home Health

Home Health is managed by eviCore. Please visit [EviCore.com/Cigna](https://www.eviCore.com/Cigna) for more details.
 Arizona plans: please contact the appropriate vendor listed on page 1 of this document.
 Leon: Please contact the health plan.

Laboratory (Includes Genetic Testing)

0007M	0012M	0013M	0018M	0035U
0036U	0037U	0038U	0039U	0040U
0041U	0042U	0043U	0044U	0045U
0048U	0049U	0050U	0053U	0054U
0055U	0056U	0058U	0059U	0060U
0061U	0080U	0082U	0083U	0089U
0090U	0094U	0101U	0102U	0103U
0140U	0141U	0142U	0143U	0144U
0145U	0146U	0147U	0148U	0149U
0150U	0151U	0152U	0153U	0156U
0157U	0158U	0159U	0160U	0161U
0162U	0163U	0165U	0169U	0172U
0177U	0179U	0203U	0204U	0205U
0206U	0207U	0211U	0212U	0213U
0214U	0215U	0217U	0220U	0242U
0244U	0245U	0258U	0259U	0260U
0261U	0262U	0263U	0264U	0265U
0266U	0267U	0287U	0288U	0289U
0290U	0291U	0292U	0293U	0294U
0295U	0296U	0297U	0298U	0299U
0300U	0307U	0310U	0312U	0313U

Laboratory (Includes Genetic Testing) (continued)

0314U	0315U	0317U	0318U	0319U
0320U	0537T	0538T	0539T	0540T
0564T	81163	81164	81165	81166
81167	81171	81172	81173	81174
81176	81177	81178	81179	81180
81181	81182	81183	81184	81185
81186	81187	81188	81189	81190
81201	81202	81203	81204	81210
81212	81215	81216	81217	81219
81223	81226	81228	81229	81232
81233	81234	81236	81237	81239
81243	81254	81271	81277	81284
81285	81286	81288	81289	81291
81292	81293	81295	81296	81297
81298	81299	81300	81305	81306
81308	81309	81312	81313	81317
81318	81320	81321	81323	81324
81325	81329	81335	81336	81337
81343	81344	81345	81349	81400
81406	81407	81408	81410	81411
81413	81414	81415	81416	81417
81422	81425	81426	81427	81430
81431	81434	81437	81438	81439
81440	81442	81443	81448	81455
81460	81465	81470	81471	81479
81504	81518	81523	81539	81538
81542	81551	81552	81560	81595
81599	84999	86849	86950	88375
89335	89344	89346	89354	89356
G9143				

Mental Health

90867	90868	90869		
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Musculoskeletal Program

†Will not require authorization for start of care dates after July 29, 2022.	0054T	0055T	0213T	0214T	0215T
	0216T	0217T	0218T	20680	20985
	23000	23020	23030 [†]	23031 [†]	23035 [†]
	23040 [†]	23044 [†]	23065 [†]	23066 [†]	23071 [†]
	23073 [†]	23075 [†]	23076 [†]	23077 [†]	23100 [†]
	23101 [†]	23105 [†]	23106	23107 [†]	23120

Musculoskeletal Program (continued)

†Will not require authorization for start of care dates after July 29, 2022.

23130	23140†	23145	23146†	23150†
23155	23156†	23170†	23172	23174
23180†	23182†	23184†	23330†	23333†
23334†	23400†	23415	23430	23440
23450	23455	23460	23465	23466
23490†	23800†	23802	26990†	26991†
27033	27040†	27041†	27043†	27045†
27047†	27048†	27049†	27052†	27059†
27065†	27066†	27067†	27086†	27087†
27179†	27301†	27310†	27323†	27324†
27327†	27328†	27329†	27330†	27331
27332	27333	27334	27335	27337†
27339†	27340	27347	27355	27356
27357	27358	27360	27364†	27372†
27403	27405	27407	27409	27412
27415	27416	27418	27422	27424
27425	27427	27428	27429	27438
27440	27441	27443	29805	29819
29821	29822	29823	29824	29825
29826	29827	29850	29851	29860
29861	29863	29867	29868	29870
29871	29874	29875	29876	29877
29879	29880	29881	29882	29883
29884	29886	29887	29888	29889
29914	62280	62281	62282	62324
62325	62326	62327	62350	62351
64480	64484	64494	64495	64510
64520	64634	64636	C1767	C1772
C1778	C1787	C1816	C1820	C1883
C1897	E0782	E0783	E0785	E0786
G0260	L8680	L8681	L8682	L8683
L8685	L8686	L8687	L8688	L8689

OB/GYN

0404T	0567T	0568T	56620	56631
56632	56633	56634	56637	56640
57111	57156	57270	57296	57305
57307	57308	57311	57426	57531
57540	57545	57700	58140	58146
58152	58180	58240	58263	58267

OB/GYN (continued)

58275	58280	58285	58353	58400
58410	58520	58552	58540	58572
58671	58578	58605	58611	58670
58750	58674	58700	58740	58940
58752	58760	58822	58825	58943
58950	58951	58952	58958	59136
59120	59121	59130	59525	59140
59325	59350	59514	59852	59620
59830	59850	59851	99479	59855
59856	59857	99478	99480	

Ophthalmology

0253T	0402T	0563T	0616T	0617T
0618T	65710	65730	65750	65755
65756	65770	65772	66175	66840
66850	66852	66920	66940	66983
66986	66999	67345	67900	67901
67902	67903	67904	67908	68360
68400	92499	C1839		

Opioid Treatment

G2067	G2068	G2069	G2070	G2071
G2072	G2073	G2074	G2075	G2076
G2077	G2078	G2079	G2080	G2086
G2087	G2088	G2215	G2216	

Other

0101T	0121U	0122U	0123U	0342T
0481T	19296	19298	21240	21247
21248	21249	21255	21268	22207
22210	22214	22220	22222	22224
27590	27591	27592	27596	27645
27646	27709	27712	27715	27724
27725	27726	29804	41019	64910
G0341	G0342	G0343		

Pain Management

0117U	0232T	0278T	0440T	0441T
0442T	27096	62263	62360	62361
62362	63650	63685	64479	64483
64490	64491	64492	64493	64633
64635				

Part B Drugs, Biologics, and Diabetic Testing Supplies

^Step Therapy for all plans except Leon.

#Requires Step Therapy for Leon.

These codes require the Drugs/Biologics Part B Precertification form for Step Therapy at [MedicareProviders.Cigna.com/forms](https://www.MedicareProviders.Cigna.com/forms).

For Leon forms, visit [LMChhealthplansuat.healthspring.inside/ProviderForms](https://www.LMChhealthplansuat.healthspring.inside/ProviderForms).

-No authorization is required for Abbott and Ascencia devices. All other devices for this code require prior authorization.

*Authorization required for all markets except Leon.

**Authorization required for Leon only.

A4238	A4253~	C9047	C9094	C9095
C9096^#	C9097	C9098	C9399	E0607~
E0784	E2100	E2101	E2102	J0129
J0135	J0172	J0178	J0179	J0180
J0202	J0219	J0220	J0221	J0222
J0223	J0224	J0256	J0257	J0480
J0485	J0490	J0491	J0517	J0567
J0584	J0585	J0586	J0587	J0588
J0591	J0593	J0596	J0597	J0598
J0599	J0606	J0638	J0641	J0642
J0717	J0725	J0775	J0791	J0800
J0879	J0881	J0882	J0885	J0887
J0888	J0896	J0897	J1290	J1300
J1301	J1303	J1305	J1306	J1322
J1426	J1427	J1428	J1429	J1437
J1438	J1439	J1442^#	J1447^#	J1448
J1458	J1459	J1460	J1551	J1554
J1555	J1556	J1557	J1558	J1559
J1560	J1561	J1566	J1568	J1569
J1572	J1575	J1595	J1599	J1602
J1628	J1632	J1743	J1744	J1745^#
J1786	J1823	J1930	J1931	J1952
J2182	J2278	J2323	J2326	J2350
J2353	J2354	J2356	J2357	J2425
J2503	J2504	J2506	J2507	J2562
J2778	J2779	J2786	J2796	J2840
J2998	J3032	J3060	J3111	J3240
J3241	J3245	J3262	J3299	J3304
J3357	J3358	J3380	J3385	J3396
J3397	J3398	J3399	J3490	J3590
J7170	J7175	J7177	J7178	J7179
J7180	J7181	J7182	J7183	J7185
J7186	J7187	J7188	J7189	J7190
J7191	J7192	J7193	J7194	J7195
J7196	J7197	J7198	J7199	J7200
J7201	J7202	J7203	J7204	J7205
J7207	J7208	J7209	J7210	J7211
J7212	J7311	J7312	J7313	J7314
J7316	J7318^	J7320^	J7321^	J7322^
J7323^	J7324	J7325	J7326^	J7327

Part B Drugs, Biologics, and Diabetic Testing Supplies (continued)

^Step Therapy for all plans except Leon.
 #Requires Step Therapy for Leon.
 These codes require the Drugs/Biologics Part B Precertification form for Step Therapy at MedicareProviders.Cigna.com/forms. For Leon forms, visit LMHealthplansuat.healthspring.inside/ProviderForms.
 -No authorization is required for Abbott and Ascencia devices. All other devices for this code require prior authorization.
 *Authorization required for all markets except Leon.
 **Authorization required for Leon only.

J7328^	J7329^	J7330	J7331^	J7332^
J7336	J7351	J7352	J7402	J9015
J9017	J9019	J9021	J9022	J9023
J9032	J9035^#	J9037	J9039	J9042
J9043	J9047	J9055	J9057	J9061
J9071	J9118	J9119	J9120	J9144
J9145	J9153	J9173	J9176	J9177
J9198	J9203	J9204	J9207	J9210
J9223	J9225	J9226	J9227	J9228
J9229	J9246	J9247	J9262	J9266
J9268	J9269	J9271	J9272	J9273
J9281	J9299	J9301	J9302	J9303
J9304	J9305	J9306	J9307	J9308
J9309	J9311^#	J9312^#	J9313	J9316
J9317	J9318	J9319	J9325	J9331
J9332	J9348	J9349	J9352	J9353
J9354	J9355^#	J9356^#	J9358	J9359
J9400	J9600	J9999	K0553~	K0554~
Q0138	Q0139	Q2026	Q2041	Q2042
Q2043	Q2050	Q2053	Q2054	Q2055
Q4081	Q5101**#	Q5103**#	Q5105	Q5106
Q5107#	Q5108^#	Q5111^#	Q5112^*	Q5113^#
Q5114^#	Q5115#	Q5116*	Q5117#	Q5118*
Q5119*	Q5120	Q5121**#	Q5122	Q5123#
Q5124				

Medical Oncology
 See eviCore website for more information.

eviCore.com/resources/healthplan/cigna-medicare

Professional Services

20560	20561	99184	99190	99191
99192	G0277	G0339	G0340	G0455

Radiology

CAT Scan (CT Scan)

0042T	0558T	0633T	0634T	0635T
0636T	0637T	0638T	70450	70460
70470	70480	70481	70482	70486
70487	70488	70490	70491	70492
70496	70498	71250	71260	71270
71271	71275	72125	72126	72127
72128	72129	72130	72131	72132

Radiology (continued)

CAT Scan (CT Scan) (continued)	72133	72191	72192	72193	72194
	73200	73201	73202	73206	73700
	73701	73702	73706	74150	74160
	0710T	0711T	0712T	0713T	74170
	74174	74175	74176	74177	74178
	74261	74262	74263	75571	75572
	75573	75574	75635	76380	76497
	77011	77078			
Magnetic Resonance Angiography	93454	93455	93457	93458	93459
	93460	C8900	C8901	C8902	C8909
	C8910	C8911	C8912	C8913	C8914
	C8918	C8919	C8920	C8931	C8932
	C8933	C8934	C8935	C8936	
Magnetic Resonance Imaging (MRI)	0611T	0612T	0698T	70336	70540
	70542	70543	70544	70545	70546
	70547	70548	70549	70551	70552
	70553	70554	70555	70558	71550
	71551	71552	71555	72141	72142
	72146	72147	72148	72149	72156
	72157	72158	72159	72195	72196
	72197	72198	73218	73219	73220
	73221	73222	73223	73225	73718
	73719	73720	73721	73722	73723
	73725	74181	74182	74183	74185
	75557	75559	75561	75563	75565
	76391	76498	77046	77047	77048
	77049	77084	C8903	C8905	C8906
	C8908	C9762	C9763		
Nuclear Medicine	0331T	0332T	78399	78451	78452
	78453	78454	78459	78466	78469
	78472	78473	78481	78483	78491
	78492	78494	78499	78608	78609
	79101	A9513	A9543	A9606	
Other	0348T	0349T	0350T	0351T	0352T
	0353T	0354T	0700T	0701T	0707T
	76377	76499	78468	78496	93319
	93356	C2644	C2645		
Positron Emission Tomography (PET)	78811	78812	78813	78814	78815
	78816				

Radiology (continued)

Radiation Therapy	0394T	0395T	0600T	0601T	0735T
	61796	61798	76965	77014	77261
	77262	77263	77280	77285	77290
	77293	77295	77299	77300	77301
	77306	77307	77316	77317	77318
	77321	77331	77332	77333	77334
	77336	77338	77370	77371	77372
	77373	77385	77386	77387	77399
	77401	77402	77407	77412	77417
	77423	77424	77425	77427	77431
	77432	77435	77469	77470	77499
	77520	77522	77523	77525	77750
	77761	77762	77763	77767	77768
	77770	77771	77772	77778	77789
	77790	77799	79005	79403	C2616
	G0458	G6001	G6002	G6003	G6004
	G6005	G6006	G6007	G6008	G6009
	G6010	G6011	G6012	G6013	G6014
	G6015	G6016	G6017		
Therapeutic Radiology	77600	77605	77610	77615	77620
	A9590				

Rehab and Therapy

	0552T	96446	97610	G0422	G0423
	G2000				

Services and Supplies

Assorted devices, implants, and systems	B4105	C1764	C1889		
Other	A2001	A2002	A2003	A2004	A2005
	A2006	A2007	A2008	A2009	A2010
	A9595	B4187	C1840	C2624	C9352
	C9353	C9364	G0378	G0379	L6881
	L6882	L8679	L8701	L8702	P9099
	Q0481	Q0495	Q4199	V2629	V2785

Services and Supplies (continued)

Skin substitutes and biologicals	C1762	C5274	C5277	C5278	Q4100
	Q4102	Q4106	Q4110	Q4117	Q4118
	Q4121	Q4124	Q4128	Q4132	Q4133
	Q4135	Q4152	Q4159	Q4166	Q4167
	Q4168	Q4169	Q4170	Q4171	Q4173
	Q4174	Q4175	Q4183	Q4184	Q4185
	Q4186	Q4187	Q4188	Q4189	Q4190
	Q4191	Q4192	Q4193	Q4194	Q4195
	Q4196	Q4197	Q4198	Q4200	Q4201
	Q4202	Q4203	Q4204	Q4227	Q4229
	Q4230	Q4231	Q4232	Q4233	Q4234
	Q4235	Q4237	Q4238	Q4239	Q4240
	Q4241	Q4242	Q4244	Q4245	Q4246
	Q4247	Q4248	Q4251	Q4252	Q4253
	Urology				
Bladder Procedures	51525	51530	51550	51555	51565
	51570	51575	51580	51585	51595
	51596	51597	51800	51820	51841
	51865	51900	51920	51925	51940
	51960	51980			
Genital Procedures	54112	54125	54130	54135	54360
	54390	54400	54401	54405	54408
	54411	54416	54430	54438	54550
	54660	55500	55605	55650	57155
	58346				
Other	0105U	55899	55920		
Prostate Procedures	0421T	0582T	0619T	0714T	52441
	55801	55810	55812	55815	55831
	55842	55862	55865	55875	C2596
	C9739	C9740			
Renal Procedures	0338T	0339T	49411	50010	50040
	50045	50060	50065	50070	50075
	50100	50120	50125	50130	50135
	50205	50225	50234	50236	50280
	50290	50400	50405	50500	50520
	50525	50526	50540	50542	50543
	50547	50593			

Urology (continued)

Ureter Procedures	50600	50605	50610	50620	50630
	50650	50660	50700	50715	50722
	50725	50728	50740	50750	50760
	50770	50780	50782	50783	50785
	50800	50810	50815	50820	50825
	50830	50840	50845	50860	50900
	50920	50930	50940	50947	50949
	50961				
Urethra Procedures	53405	53415	53430	53447	53448
	53453	53454	53852	53854	53860
	53899				

Cardio/Thoracic Surgery

Artery and Vein Procedures	0275T	0314T	0524T	34846	34847
	34848	35001	35002	35005	35013
	35021	35022	35082	35091	35092
	35102	35103	35111	35112	35121
	35122	35131	35132	35142	35152
	35182	35189	35211	35216	35221
	35241	35246	35251	35271	35276
	35281	35303	35304	35305	35306
	35311	35331	35341	35351	35355
	35361	35363	35390	35501	35506
	35508	35509	35511	35515	35516
	35518	35521	35523	35526	35531
	35533	35535	35536	35537	35538
	35539	35540	35560	35563	35565
	35566	35570	35571	35585	35587
	35600	35601	35612	35616	35621
	35623	35626	35631	35632	35633
	35634	35636	35637	35638	35642
	35645	35647	35650	35654	35663
	35666	35681	35682	35683	35691
	35693	35694	35695	35800	35820
	35840	35870	35881	35884	35901
	35905	35907	36260	36299	36465
	36466	36514	36516	36522	36823
	37140	37145	37160	37180	37181
	37182	37183	37215	37217	37218

Cardio/Thoracic Surgery (continued)

Artery and Vein Procedures (continued)	37221	37236	37238	37241	37242
	37244	37616	37617	37618	37660
	37700	37718	37722	37735	37760
	37761	37780	37788	37790	37799
	61611	78456	92941	C9606	
Atherectomy	0234T	0235T	0236T	0237T	0263T
	0264T	0266T	0267T	0268T	
Cardiac Devices	33285	C1824			
Cardiac Procedures	0543T	0544T	0545T	0553T	33267
	33268	33269	33300	33305	33310
	33315	33320	33321	33322	33330
	33335	33340	33361	33363	33364
	33365	33366	33367	33368	33369
	33390	33391	33404	33405	33406
	33411	33412	33413	33414	33415
	33416	33417	33418	33420	33422
	33427	33430	33440	33460	33463
	33468	33471	33474	33475	33476
	33477	33478	33496	33500	33501
	33502	33503	33504	33505	33506
	33507	33514	33516	33518	34711
	37216	37220	37222	37223	37224
	37225	37226	37227	37228	37229
	37230	37231	37232	37233	37234
	37235	37239	37248	61651	92943
	92970	92971	92975	92986	93580
	93582	93583	93621	93622	93623
	93655	93662	C9600	C9602	C9604
E0616					
Defibrillator Procedures (Pacemaker/Pacing Cardioverter)	0397T	0408T	0409T	0410T	0411T
	0412T	0413T	0414T	0415T	0416T
	0572T	0614T	0695T	0696T	33203
	33206	33207	33208	33214	33221
	33224	33225	33227	33228	33229
	33230	33231	33236	33237	33238
	33240	33243	33249	33250	33251
	33254	33255	33256	33258	33261
	33262	33263	33264	33265	33266
	33270	33271	33274	33275	33289
	G0448				

Cardio/Thoracic Surgery (continued)

Heart and Pericardium Procedures	0483T	0484T	0569T	0570T	33020
	33030	33031	33050	33120	33130
	33140	33141	33419	C9758	
Lung and Pleura Procedures	32035	32036	32097	32098	32110
	32120	32124	32140	32141	32150
	32151	32160	32200	32215	32220
	32225	32310	32320	32440	32442
	32445	32480	32482	32484	32486
	32488	32491	32503	32504	32505
	32506	32507	32540	32553	32651
	32652	32653	32654	32655	32656
	32658	32659	32661	32662	32664
	32665	32666	32667	32670	32671
	32672	32673	32800	32810	32815
	32820	32850	32851	32852	32853
	32854	32855	32856	32900	32905
	32906	32940	32997	32998	32999
Mediastinum Procedures	39000	39010	39200	39220	39499
Other	0345T	0692T	31651	32501	33522
	33523	33530	33533	33542	33545
	33548	33572	33600	33602	33606
	33608	33610	33611	33612	33615
	33617	33619	33620	33621	33622
	33641	33645	33647	33660	33665
	33670	33675	33676	33677	33681
	33684	33688	33690	33692	33694
	33697	33702	33710	33720	33724
	33726	33730	33732	33735	33736
	33737	33750	33755	33762	33764
	33766	33767	33768	33770	33771
	33774	33775	33776	33777	33778
	33779	33780	33781	33782	33783
	33786	33788	33800	33802	33803
	33813	33814	33820	33822	33824
	33840	33845	33851	33852	33853
	33864	33866	33875	33877	33883
	33886	33889	33891	33910	33915
33916	33917	33920	33922	33924	

Cardio/Thoracic Surgery (continued)**Other** (continued)

33925	33926	33930	33933	33935
33940	33944	33945	33946	33947
33948	33949	33951	33952	33953
33954	33955	33956	33957	33958
33959	33962	33963	33964	33965
33966	33968	33969	33970	33971
33973	33974	33975	33976	33977
33978	33979	33980	33981	33982
33983	33984	33985	33986	33987
33988	33989	33990	33991	33992
33993	33999	34001	34051	34151
34401	34451	34502	34717	34718
34813	34820	34830	34831	34832
34833	34834	34841	34842	34843
34844	34845	35151	93581	

Trachea and Bronchi Procedures

31643	31647	31660	31661	31725
31760	31766	31770	31775	31780
31781	31786	31800	31805	31899

Dermatology/Plastic Surgery

0419T	0420T	11004	11006	15271
15275	15738	15756	15758	15769
15771	15773	15774	15786	15820
15821	15822	15823	15830	15832
15835	15836	15837	15839	16036
17999	96920	96921	96922	C5271
C5272	C5273	C5275	C5276	

Ear, Nose and Throat (ENT)

0583T	30150	30160	30400	30410
30450	30620	30999	31070	31225
31230	31290	31291	31292	31295
31296	31297	31298	31299	31365
31367	31368	31370	31375	31380
31382	31390	31395	31400	31580
31599	35510	35512	35522	35525
35697	37766	42999	69140	69155
69502	69535	69550	69552	69554
69632	69637	69642	69644	69645
69646	69711	69714	69717	69930
69949	69950			

General Surgery

Abdominal Procedures	0437T	47579	49002	49010	49020
	49040	49060	49062	49204	49215
	49255	49329	49412	49425	49428
	49605	49606	49610	49611	49651
	49653	49657	49659	49900	49904
	49906	49999	54699		
Anal Procedures	46705	46707	46710	46712	46715
	46716	46730	46735	46740	46742
	46744	46746	46748	46751	46999
Anesthesia	0102T				
Biliary Tract Procedures	47400	47420	47425	47460	47480
	47550	47555	47556	47564	47570
	47605	47610	47612	47620	47700
	47701	47711	47712	47715	47720
	47721	47740	47741	47760	47765
	47780	47785	47800	47801	47802
	47900	47999			
Breast Procedures	0581T	19105	19300	19306	19307
	19316	19318	19325	19328	19330
	19350	19355	19357	19364	19367
	19368	19369	19370	19371	19380
	19499				
Colorectal Procedures	45110	45111	45112	45113	45114
	45116	45119	45120	45121	45123
	45126	45135	45136	45397	45402
	45540	45550	45562	45563	45800
	45805	45820	45825	45999	
Diaphragm Procedures	39501	39503	39540	39541	39545
	39560	39561	39599		
Esophageal Procedures	43045	43100	43101	43107	43108
	43112	43113	43116	43117	43118
	43121	43122	43123	43124	43130
	43135	43195	43210	43257	43279
	43281	43282	43284	43285	43286
	43289	43300	43305	43310	43312
	43313	43314	43320	43325	43330
	43331	43340	43341	43351	43352
	43360	43361	43400	43405	43410
	43415	43425	43460	43496	43497

General Surgery (continued)

Eye Procedures	0207T	0308T	0444T	0445T	0450T
	0465T	0472T	0473T	66179	67906
	67909	67911	67999	68899	
Intestinal Procedures	43241	43327	43328	43332	43333
	43334	43335	43336	43337	43338
	44010	44015	44020	44021	44025
	44050	44055	44110	44111	44121
	44125	44126	44127	44128	44130
	44132	44133	44135	44136	44137
	44140	44147	44150	44151	44155
	44156	44157	44158	44202	44203
	44207	44210	44211	44212	44227
	44238	44310	44316	44322	44345
	44602	44603	44604	44605	44615
	44640	44650	44660	44661	44680
	44700	44705	44715	44720	44721
	44799	44800	44820	44850	44899
	44900	44960	44979	46607	
Liver Procedures	47010	47015	47122	47125	47130
	47133	47135	47140	47141	47142
	47143	47144	47145	47146	47147
	47300	47350	47360	47361	47362
	47379	47381	47399		
Lymph Node Procedures	38380	38381	38382	38564	38589
	38999				
Other	0479T	0480T	0491T	0492T	0512T
	0513T	0596T	0597T	50250	55970
	55980	61630	61635	S2095	
Pancreatic Procedures	48000	48001	48020	48100	48105
	48120	48140	48145	48146	48148
	48152	48154	48155	48500	48510
	48520	48540	48545	48547	48548
	48551	48554	48556	48999	
Parathyroid Procedures	60505	60520	60521	60522	60545
	60600	60605	60650	60699	
Pharynx, Adenoid, and Tonsil Procedures	42842	42845	42894	42950	42953
	42961	42971			
Spleen Procedures	38101	38102	38115	38120	38129

General Surgery (continued)

Stomach Procedures	43500	43501	43502	43520	43605
	43611	43620	43621	43622	43633
	43634	43635	43640	43641	43644
	43645	43647	43659	43770	43771
	43772	43773	43775	43800	43810
	43825	43832	43843	43845	43846
	43847	43848	43860	43865	43880
	43881	43882	43886	43888	43999
Thyroid Gland Procedures	60200	60212	60225	60254	60270
	60271				
Tongue and Mouth Procedures	21076	21077	21079	21080	21081
	21082	21083	21088	29800	40799
	40899	41130	41135	41140	41145
	41150	41153	41155	41512	41530
	41599	41820	41874	41899	42140
	42145	42160	42299	42426	42699
	C9727				
Venous Procedures	36468	36473	36475	36478	36482
	37785				
Neurosurgery					
Brain Procedures	61105	61107	61108	61120	61140
	61150	61151	61156	61210	61250
	61253	61305	61313	61314	61315
	61320	61321	61322	61323	61333
	61340	61343	61345	61450	61458
	61460	61501	61514	61516	61517
	61518	61519	61520	61521	61522
	61524	61526	61530	61531	61533
	61534	61535	61536	61537	61538
	61539	61540	61541	61543	61544
	61545	61546	61550	61552	61556
	61557	61558	61559	61563	61564
	61566	61567	61570	61571	61575
	61576	61580	61581	61582	61583
	61584	61585	61586	61590	61591
	61592	61595	61596	61597	61598
	61600	61601	61605	61606	61607
	61608	61613	61615	61616	61619
	61624	61645	61650	61680	61682

Neurosurgery (continued)

Brain Procedures (continued)	61684	61686	61690	61692	61697
	61698	61700	61702	61703	61705
	61708	61710	61711	61735	61736
	61737	61750	61751	61760	61850
	61860	61863	61864	61867	61868
	61885	61886	61888	62100	62115
	62117	62120	62121	62142	62143
	62145	62146	62147	62148	62161
	62162	62164	62180	62190	62192
	62200	62201	62220	62256	62258
Injection Procedures	62264	62287	62290	62291	62320
	62321	62322	62323		
Nerve Procedures	0446T	0447T	0448T	64624	64625
	64628	64629	64755	64760	64804
	64809	64818	64866	64868	64895
	64999				
Neurostimulator	0587T	0588T	0589T	0590T	64553
	64555	64561	64566	64568	64569
	64570	64575	64582	64590	C1822
	C1823				
Other	0202T	0313T	0316T	0398T	61316
	69716	69719			
Phrenic Nerve Stimulation System	0424T	0425T	0426T	0427T	0428T
	0429T	0430T	0431T	0432T	0433T
Spinal Procedures	0222T	20930	22858	22867	22868
	22869	22870	62380	63005	63016
	63017	63030	63042	63050	63051
	63056	63077	63078	63085	63086
	63087	63088	63090	63091	63101
	63102	63103	63170	63172	63173
	63185	63190	63191	63197	63200
	63250	63251	63252	63265	63266
	63268	63270	63271	63272	63273
	63275	63276	63277	63278	63280
	63281	63282	63283	63285	63286
	63287	63290	63295	63300	63301
	63302	63303	63304	63305	63306
	63307	63308	63620	63655	63663
	63700	63702	63704	63706	63707

Neurosurgery (continued)					
Spinal Procedures (continued)	63709	63710	63740	C1821	C2614
	C9757				
Orthopedic Surgery					
Ankle Procedures	27652	27665	27686	27703	27704
	27860	27888	27899		
Face Procedures	21034	21085	21089	21141	21142
	21143	21145	21146	21147	21151
	21154	21155	21159	21160	21179
	21180	21182	21183	21184	21188
	21194	21195	21196	21199	21208
	21280	21299			
Foot Procedures	0335T	0510T	0511T	20838	20957
	28062	28102	28289	28291	28295
	28297	28298	28299	28302	28309
	28446	28705	28737	28740	28800
	28890	28899	29893		
Hand Procedures	20808	20816	20824	20827	26551
	26553	26554	26556	26841	26989
Hip Procedures †Will not require authorization for start of care dates after July 29, 2022.	20956	20970	26992 [†]	27005	27025
	27030 [†]	27036	27054 [†]	27070 [†]	27071 [†]
	27075 [†]	27076 [†]	27077 [†]	27078 [†]	27090 [†]
	27091 [†]	27120 [†]	27122 [†]	27125	27130
	27132	27134	27137	27138	27140 [†]
	27146 [†]	27147 [†]	27151 [†]	27156 [†]	27158 [†]
	27161 [†]	27165 [†]	27170	27175	27176 [†]
	27177 [†]	27178 [†]	27181 [†]	27185	27187 [†]
	27253	27258	27259	27279	27280
	27284	27286	27290	27295	27299
	29862	29915	29916		
Jaw Procedures	21073	21215			
Knee Procedures †Will not require authorization for start of care dates after July 29, 2022.	0565T	0566T	27420	27442	27445
	27446	27447	27455 [†]	27457 [†]	27486
	27487	27488 [†]	27556	27557	27558
	27570	27580	27599	29866	29873
	29885				

Orthopedic Surgery (continued)

Limb/Extremity Procedures † Will not require authorization for start of care dates after July 29, 2022.	0594T	20802	20805	20955	20962
	24149	24300	24342	24366	24430
	24435	24900	24920	24930	24931
	24940	25020	25390	25400	25405
	25415	25900	25905	25915	27303 [†]
	27365 [†]	27385	27448 [†]	27450 [†]	27454 [†]
	27465 [†]	27466 [†]	27468 [†]	27470 [†]	27472 [†]
	27495 [†]	27519	27727	27880	27881
	27882	29855	29856		
Nose Procedures	20912	21210			
Other	0095T	0098T	0163T	0164T	0165T
	0265T	0347T	20661	20664	20975
	20999	21499	21510	21685	22534
	22632	22841	22843	22844	22847
	22999	29799	29999		
Pelvic Procedures	27197	27198	27282	64451	
Rib Procedures	20910	21230	21615	21616	21620
Shoulder Region Procedures † Will not require authorization for start of care dates after July 29, 2022.	0717T	0718T	23078 [†]	23200 [†]	23210 [†]
	23220 [†]	23335 [†]	23410	23412	23420
	23462	23470	23472	23473	23474
	23485	23491 [†]	23515	23700	23900
	23920	23929	29806	29807	29820
	29828				
Skull Procedures	21032	21431	21432	21433	21435
	21436				
Spinal Procedures	0200T	0201T	0219T	0220T	0221T
	0274T	0719T	20931	20936	20937
	20938	21705	21899	22010	22102
	22110	22112	22114	22206	22208
	22216	22226	22325	22510	22511
	22532	22533	22548	22551	22552
	22556	22558	22585	22586	22590
	22600	22610	22612	22614	22630
	22633	22800	22802	22804	22808
	22810	22812	22818	22819	22830
	22840	22842	22845	22846	22849
	22850	22852	22853	22854	22857
	22859	22861	22862	22864	22865
	22899	64714			

Orthopedic Surgery (continued)

Sternum Procedures	21627	21630	21632	21740	
Wrist Procedures	21750	25215	25259	25263	25320
	25337	25440	25920	25924	25927
	29844				
Transplant Services					
	0118U	01990	0494T	0495T	0496T
	0584T	0585T	0586T	20932	20933
	20934	33927	33928	33929	38232
	38240	38241	38242	38243	48552
	50300	50320	50323	50325	50327
	50328	50329	50340	50360	50365
	50370				



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