

Precertification updates

To help ensure that we are administering benefits properly, we routinely review our precertification policies for potential updates. As a result of a recent review, we want to make you aware that we have updated our precertification list.

New codes added to the precertification list on April 1, 2019

On April 1, 2019, we added six new Healthcare Common Procedure Coding System (HCPCS) codes and eight new revenue codes.

Code	Description
C9040	Injection, fremanezumab-vfrm, 1 mg
C9042	Injection, bendamustine hcl (belrapzo), 1 mg
C9043	Injection, levoleucovorin, 1 mg
C9044	Injection, cemiplimab-rwlc, 1 mg
C9045	Injection, moxetumomab pasudotox-tdfk, 0.01 mg
C9141	Injection, factor viii, (antihemophilic factor, recombinant), pegylated-aucl (jivi), 1 i.u.
870	Cell/gene therapy – general classification
871	Cell/gene therapy – cell collection
872	Cell/gene therapy – specialized biologic processing and storage – prior to transport
873	Cell/gene therapy – storage and processing after receipt of cells from manufacturer
874	Cell/gene therapy – infusion of modified cells
875	Cell/gene therapy – injection of modified cells
890	Pharmacy – extension of 025X and 063X – reserved (use 0250 for general classification)
891	Pharmacy – extension of 025X and 063X – special processed drugs – FDA-approved cell therapy

Existing codes added to the precertification list on April 1, 2019

On April 1, 2019, we also added 16 existing CPT codes and six existing HCPCS codes.

Code	Description
37220	Revascularization, endovascular, open or percutaneous, iliac artery, unilateral, initial vessel; with transluminal angioplasty
37221	Revascularization, endovascular, open or percutaneous, iliac artery, unilateral, initial vessel; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed
37222	Revascularization, endovascular, open or percutaneous, iliac artery, each additional ipsilateral iliac vessel; with transluminal angioplasty (list separately in addition to code for primary procedure)
37223	Revascularization, endovascular, open or percutaneous, iliac artery, each additional ipsilateral iliac vessel; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed (list separately in addition to code for primary procedure)
37224	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with transluminal angioplasty
37225	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with atherectomy, includes angioplasty within the same vessel, when performed
37226	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed
37227	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with transluminal stent placement(s) and atherectomy, includes angioplasty within the same vessel, when performed

37228	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unilateral, initial vessel; with transluminal angioplasty
37229	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unilateral, initial vessel; with atherectomy, includes angioplasty within the same vessel, when performed
37230	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unilateral, initial vessel; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed
37231	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unilateral, initial vessel; with transluminal stent placement(s) and atherectomy, includes angioplasty within the same vessel, when performed
37232	Revascularization, endovascular, open or percutaneous, tibial/peroneal artery, unilateral, each additional vessel; with transluminal angioplasty (list separately in addition to code for primary procedure)
37233	Revascularization, endovascular, open or percutaneous, tibial/peroneal artery, unilateral, each additional vessel; with atherectomy, includes angioplasty within the same vessel, when performed (list separately in addition to code for primary procedure)
37234	Revascularization, endovascular, open or percutaneous, tibial/peroneal artery, unilateral, each additional vessel; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed (list separately in addition to code for primary procedure)
37235	Revascularization, endovascular, open or percutaneous, tibial/peroneal artery, unilateral, each additional vessel; with transluminal stent placement(s) and atherectomy, includes angioplasty within the same vessel, when performed (list separately in addition to code for primary procedure)
A6025	Gel sheet for dermal or epidermal application, (e.g., silicone, hydrogel, other), each
D5960	Speech aid prosthesis; modification
D5999	Unspecified maxillofacial prosthesis, by report
D7899	Unspecified temporomandibular joint dysfunctions (TMD) therapy, by report
D8999	Unspecified orthodontic procedure, by report
D9999	Unspecified adjunctive procedure, by report

Codes removed from the precertification list on April 1, 2019

There were no codes removed from the precertification list.

To view an online list of monthly precertification updates, as well as the complete list of services that require precertification of coverage, log in to the Cigna for Health Care Professionals website (CignaforHCP.com) and click Precertification Policies under Useful Links. If you are not registered for the website, go to CignaforHCP.com and click [Register Now](#).