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September 3, 2025

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Julie B. Kessel, MD, Medical Officer for Coverage Policy Cigna 900 Cotta Grove Rd. Bloomfield, CT 06002

Email: kessel@cigna.com

Re: Evaluation and Management Coding and Accuracy, Reimbursement Policy Number R49

Dear Dr. Kessel,

On behalf of the American Academy of Otolaryngology-Head and Neck Surgery (AAO-HNS), we would like to provide comments regarding Cigna's Evaluation and Management Coding and Accuracy, Reimbursement Policy Number R49 that we believe needs to be carefully reviewed and updated before its effective date of October 1, 2025.

After careful and detailed review, the AAO-HNS respectfully suggests that Cigna's position of pre-emptively "downcoding" or adjusting Evaluation and Management (E/M) CPT® codes 99204- 99205, 99214-99215, 99244-99245 to a single level lower be re-evaluated and reconsidered as it inevitably creates an undo administrative burden on physician practices, categorically diminishes physician medical decision making, assessment of medical necessity, and ultimately, physician reimbursement.

While the policy, as written, clearly outlines the criteria applicable to determining the appropriate level of E/M services according to the CPT E/M Services guidelines, and the expectations of clear and descriptive documentation, what it lacks is a clear and transparent description of how the policy will be implemented without a complete and thorough review of the patient's medical record *prior* to automatic downcoding of a claim.

A patient's medical record is the physician's most steadfast, detailed and reliable tool in assessing and ultimately establishing medical

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necessity. Therefore, we respectfully call upon Cigna to clearly outline how it plans to implement this policy, as it would, in theory, require a detailed review of each individual medical record, for each individual claim that will automatically be downcoded prior to such a review occurring.

The AAO-HNS has received multiple reports from Otolaryngologists-Head and Neck Surgeons around the country informing us that physician practices are increasingly receiving claims that are automatically down coded and paid at a lower level than what was originally billed.

Practices are also reporting that while the downcoded claims can be appealed with the submission of the documents substantiating the original billing submitted, this requires an intensive and detailed review of each explanation of benefits (EOB) the practice receives to determine which claims are being automatically downcoded. If a practice appeals such claims and 75% of the time the appeal is approved, practices are removed from the automatically downcoded edit program. If, on the contrary, a practice does not appeal or if less than 75% of appeals are not approved, the practice remains in the automatic downcoding program.

Physician practices, in all medical specialties, are increasingly facing unnecessary burdens that threaten medical access and the delivery of critical care for patients. Creating a scenario where individual or small physician practices have to implement onerous steps to review every claim denial to subsequently obtain fair and appropriate reimbursement for services rendered, is not only burdensome, but overly costly and time consuming. Not only is this unnecessary for physician practices, but it is also, in the larger scheme, questionable and equally inconvenient and time consuming for Cigna to have to reassess and reprocess each individual claim.

In summary, we strongly urge Cigna to reassess its position on implementing Evaluation and Management Coding and Accuracy, Reimbursement Policy Number R49. The implementation of this policy would not only add further undo administrative and financial strains on physician practices but also raises considerable questions

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regarding Cigna's reimbursement methodologies and medical claim and appeal processes.

We appreciate the opportunity to comment on this medical policy and would welcome the opportunity to discuss our feedback. Should you have any questions, please feel free to contact us.

We look forward to hearing from you.

Sincerely,

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Rahul Shah, MD, MBA Executive Vice President and CEO The American Academy of Otolaryngology-Head and Neck Surgery