

DENIAL OF CLAIM NOTIFICATION

Cigna Healthcare P.O. Box 188011, Chattanooga, TN 37422

Date: April 10, 2026 **Member Name:** Priya Sharma **Member ID:** CIG-KL8-442091557 **Group Number:** GRP-NY-19044 **Claim Number:** CLM-2026-0410-44209 **Date of Service:** March 18, 2026 **Provider:** Dr. William Hayes, MD — Empire Cardiology Associates **Provider NPI:** 3334445556 **Procedure Code Billed:** CPT 93306 (Echocardiography, transthoracic, real-time with image documentation, complete, with spectral Doppler and color flow Doppler) **Diagnosis Code Billed:** ICD-10 I25.10 (Atherosclerotic heart disease of native coronary artery without angina pectoris) **Billed Amount:** \$1,890.00 **Allowed Amount:** \$0.00 **Member Responsibility:** \$1,890.00

Notice of Adverse Benefit Determination

Dear Priya Sharma,

This claim has been **denied** after review.

Reason for Denial

Denial Code: CE-150 — Coding Error / Diagnosis-Procedure Mismatch

The procedure code billed (CPT 93306 — Complete Transthoracic Echocardiogram with Doppler) is not supported by the submitted diagnosis code (ICD-10 I25.10 — Atherosclerotic heart disease of native coronary artery without angina pectoris).

Specific issues identified:

- 1. Diagnosis-procedure mismatch:** ICD-10 I25.10 is not a covered indication for a complete transthoracic echocardiogram under Cigna's Cardiac Imaging Clinical Coverage Policy (Policy #0521). Covered indications include but are not limited to: heart failure (I50.x), valvular disease (I34-I37), cardiomyopathy (I42.x), pericardial disease (I30-I31), congenital heart disease (Q20-Q28), or suspected structural heart disease.
- 2. Missing secondary diagnosis codes:** The clinical documentation references "new-onset exertional dyspnea" and "new systolic murmur," which could support the medical necessity of echocardiography if properly coded. However, these diagnoses were **not included on the claim submission**.
- 3. Possible correct codes:** Based on documentation review, the following codes may be appropriate:
 - o R06.0 (Dyspnea) or R06.09 (Other forms of dyspnea)
 - o R01.1 (Cardiac murmur, unspecified)
 - o I51.9 (Heart disease, unspecified) — if workup is for suspected cardiomyopathy

Corrective Action Available

This claim **may be resubmitted** with corrected diagnosis codes that accurately reflect the clinical indication for the echocardiogram. A corrected claim is not considered an appeal and does not consume your appeal rights.

To resubmit a corrected claim:

- Submit via Cigna's provider portal or by mail with a **corrected claim indicator** (CLM frequency code 7)
- Include updated ICD-10 codes reflecting the documented clinical indications
- Attach the office visit note from the date of the echocardiogram order

Your Appeal Rights

Alternatively, you may formally appeal this decision within **180 days**. Submit supporting documentation to:

Cigna Appeals, P.O. Box 188011, Chattanooga, TN 37422 | Fax: (800) 555-0412

Sincerely, **Rachel M. Fernandez**, Claims Review Specialist, Cigna Healthcare

This determination was based on coding review. No clinical medical necessity review was performed. The member may not be billed for charges resulting from provider coding errors under Cigna's provider agreement.