



Administrative Policy

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Coverage Policy Number..... A005

Emergency Room Services

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PURPOSE

*Administrative Policies are intended to provide further information about the administration of **standard** Cigna benefit plans. In the event of a conflict, a customer’s benefit plan document **always supersedes** the information in an Administrative Policy. Coverage determinations require consideration of 1) the terms of the applicable benefit plan document; 2) any applicable laws/regulations; 3) any relevant collateral source materials including Administrative Policies and; 4) the specific facts of the particular situation. Administrative Policies relate exclusively to the administration of health benefit plans. Administrative Policies are not recommendations for treatment and should never be used as treatment guidelines.*

Overview

This policy describes coverage for emergency room services and conditions that may require immediate medical attention, also known as emergency medical conditions.

Administrative Policy

Coverage for emergency room services is subject to the terms, conditions and limitations of the applicable benefit plan and may be subject to state regulations.

Covered emergency room services provided by a non-participating (out of network) provider or facility are eligible for coverage at the in-network cost-share benefit plan level.

Covered emergency room services DO NOT require prior authorization and/or referral by a healthcare provider. These services include EACH of the following:

- A physical and/or mental examination and related healthcare services to evaluate an emergency medical condition.
- Treatment to stabilize the individual.

Emergency room services are provided for treatment of an emergency medical condition. Emergency medical conditions are defined as circumstances where the individual perceives their symptoms to be so severe that not seeking immediate medical attention could result in serious harm.

Medical conditions that may be considered by the individual as a prudent layperson to be emergent include the following* (this list may not be all-inclusive):

- Blurry or loss of vision
- Confusion
- Coughing or vomiting blood
- Difficulty breathing or severe asthma attack
- Difficulty speaking
- Head injury
- Heart attack, chest pain, or chest pressure
- Loss of consciousness or seizure
- Major trauma
- Open fractures
- Overdose
- Severe burns
- Severe or uncontrolled bleeding
- Sudden numbness or weakness
- Suicidal thoughts

***Note:** Cigna defines prudent layperson as one who possesses an average knowledge of health and medicine.

References

1. Centers for Medicare and Medicaid Services (CMS). Emergency Medical Treatment and Labor Act (EMTALA) CMS 1350. 2012. Accessed June 6, 2025. Available at URL address: <https://www.cms.gov/regulations-and-guidance/legislation/emtala>
2. Centers for Medicare and Medicaid Services (CMS). Medicare Managed Care Manual. Ch 4 - Benefits and Beneficiary Protections. 20.2 Definitions of emergency and urgently needed services. January 1, 2015. Accessed June 6, 2025. Available at URL address: <https://www.cms.gov/regulations-and-guidance/guidance/manuals/internet-only-manuals-ioms-items/cms019326>
3. Cigna. Urgent Care vs. the Emergency Room. ©2025. Accessed June 6, 2025. Available at URL address: <https://www.cigna.com/knowledge-center/urgent-care-vs-emergency-room>
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5. United States Social Security Administration. Compilation of the social security laws. Sec 1867 clause (e) Definitions (1) (i), (ii), or (iii). Accessed June 6, 2025. Available at URL address: https://www.ssa.gov/OP_Home/ssact/title18/1867.htm

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