



New billing guidance for exome and biomarker testing

As of Jan. 1, 2026, UnitedHealthcare Community Plan of Florida must cover biomarker testing when supported by scientific and medical evidence. Also, we won't require prior authorization for these services if the members meet certain criteria and managed care plans must offer accessible prior authorization processes.

Claim changes

This change means we'll cover an additional 941 procedure codes on the [Medicaid fee schedule](#). We'll also reprocess claims with dates of service on or after Jan. 1, 2026, that were previously denied.

Prior authorization and eligibility criteria

We won't require prior authorization for these services for UnitedHealthcare Community Plan of Florida members who meet the following criteria:

- Age 20 years or younger
- Have a complex or acute illness with unknown etiology not attributed to environmental exposure, toxic ingestion, infection with normal response to treatment or trauma
- Are under inpatient treatment in a hospital intensive care unit or a high-acuity pediatric care unit
- Are children in an inpatient setting

Additional information

We'll also be adding 66 biomarker test codes to the fee schedule, effective Jan. 1, 2026, once the Centers for Medicare and Medicaid Services' fiscal intermediary provides pricing information. We'll update you with more information once it becomes available.

Questions? We're here to help.

Connect with us through chat 24/7 in the [UnitedHealthcare Provider Portal](#).