

UnitedHealthcare Commercial Reimbursement Policy Update Bulletin: April 2024

New		
Policy Title	Effective Date	Policy Summary
Home Health Services Policy, Professional	July 1, 2024	<ul style="list-style-type: none"> Effective for dates of service on or after July 1, 2024, UnitedHealthcare will implement the new Home Health Services Policy, Professional. In alignment with CMS, home health services billed in place of service 12 will not be reimbursed if the date(s) of service overlap with an inpatient stay. The date span criteria will exclude the date of admission and discharge.
Diagnosis Code Requirement Policy, Professional and Facility – Reminder	May 1, 2024	<ul style="list-style-type: none"> Effective with date of service May 1, 2024, UnitedHealthcare will introduce a comprehensive Diagnosis Code Requirement Policy for both Professional and Facility services. This new policy will integrate the existing ICD-10-CM guidelines covered by the Inpatient Unacceptable Principal Diagnosis Policy (Facility), the Outpatient Hospital Inappropriate Primary Diagnosis Code Policy (Facility), and the Inappropriate Primary Diagnosis Codes Policy (Professional). <ul style="list-style-type: none"> Additionally, the policy will address the Excludes 1 coding within the ICD-10-CM framework. Excludes 1 guidelines denote mutually exclusive codes, representing two conditions that cannot be reported together - such as a congenital form versus an acquired form of the same condition. All providers should align to coding with the excludes 1 guidelines when submitting claims; however, at this time the application of these guidelines is specifically for Inpatient Claims. Providers are expected to accurately submit diagnosis codes in alignment with ICD-10-CM requirements.

Revised		
Policy Title	Effective Date	Summary of Changes
Molecular Pathology Policy Professional and Facility		<ul style="list-style-type: none"> UnitedHealthcare previously communicated a new Molecular Pathology Policy, Professional and Facility in the January 2024 Network News, effective April 1, 2024, UnitedHealthcare is delaying the effective date of the policy until June 1, 2024, in order to allow additional time for providers to integrate Z-codes into their claims processes. Should you have any questions regarding the delay or need additional information please email united_genetics@uhc.com.
<ul style="list-style-type: none"> Telehealth/Virtual Health Policy, Professional Telehealth Policy, Facility Reminder 	May 1, 2024	<ul style="list-style-type: none"> Effective with dates of service on or after May 1, 2024, UnitedHealthcare will enhance the Telehealth/Virtual Health Policy, Professional and Telehealth Policy, Facility for originating site services, HCPCS code Q3014. Claim lines submitted for an originating site service with code Q3014 will be considered for reimbursement only if the telehealth distant site provider's claim does not report a place of service (POS) code 10 for the same telehealth encounter. POS code 10 identifies the patient is receiving telehealth at home so no originating site services would be incurred.
Retired		
Policy Title	Effective Date	Summary of Changes
Inpatient Unacceptable Principal Diagnosis Policy, Facility – Reminder	May 1, 2024	<ul style="list-style-type: none"> UnitedHealthcare is retiring the “Inpatient Unacceptable Principal Diagnosis Policy, Facility. Coding guidelines from this policy will be included in the new Diagnosis Code Requirement Policy, Professional and Facility.
Outpatient Hospital Inappropriate Primary Diagnosis Code Policy Facility – Reminder	May 1, 2024	<ul style="list-style-type: none"> UnitedHealthcare is retiring the “Outpatient Hospital Inappropriate Primary Diagnosis Code Policy, Facility”. Coding guidelines from this policy will be included in the new Diagnosis Code Requirement Policy, Professional and Facility.
Inappropriate Primary Diagnosis Codes Policy, Professional – Reminder	May 1, 2024	<ul style="list-style-type: none"> UnitedHealthcare is retiring the Inappropriate Primary Diagnosis Codes Policy, Professional. Coding guidelines from this policy will be included in the new Diagnosis Code Requirement Policy, Professional and Facility.

Note: The absence of a policy does not automatically indicate or imply coverage. As always, coverage for a health service must be determined in accordance with the member's benefit plan and any applicable federal or state regulatory requirements.



The complete library of UnitedHealthcare Commercial Reimbursement Policies is available UHCprovider.com > Resources > Plans, Policies, Protocols and Guides > For Commercial Plans > [Reimbursement Policies for UnitedHealthcare Commercial Plans](#).