

## UnitedHealthcare Commercial

## Reimbursement Policy Update Bulletin: February 2024

New		
Policy Title	<b>Effective Date</b>	Summary of Changes
Diagnosis Code Requirement Policy, Professional and Facility (Reminder)	May 1, 2024	<ul> <li>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).</li> </ul>
		<ul> <li>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.</li> <li>Providers are expected to accurately submit diagnosis codes in alignment with ICD-10-CM requirements.</li> </ul>

Revised				
Policy Title	<b>Effective Date</b>	Summary of Changes		
<ul> <li>Telehealth/Virtual Health Policy, Professional</li> <li>Telehealth Policy, Facility</li> </ul>	May 1, 2024	<ul> <li>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.</li> <li>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.</li> <li>POS code 10 identifies the patient is receiving telehealth at home so no originating site services would be incurred.</li> </ul>		



Retired				
Policy Title	<b>Effective Date</b>	Summary of Changes		
Inpatient Unacceptable Principal Diagnosis Policy, Facility (Reminder)	May 1, 2024	<ul> <li>UnitedHealthcare is retiring the "Inpatient Unacceptable Principal Diagnosis Policy, Facility.</li> <li>Coding guidelines from this policy will be included in the new Diagnosis Code Requirement Policy, Professional and Facility.</li> </ul>		
Outpatient Hospital Inappropriate Primary Diagnosis Code Policy Facility (Reminder)	May 1, 2024	<ul> <li>UnitedHealthcare is retiring the "Outpatient Hospital Inappropriate Primary Diagnosis Code Policy, Facility".</li> <li>Coding guidelines from this policy will be included in the new Diagnosis Code Requirement Policy, Professional and Facility.</li> </ul>		
Inappropriate Primary Diagnosis Codes Policy, Professional (Reminder)	May 1, 2024	<ul> <li>UnitedHealthcare is retiring the Inappropriate Primary Diagnosis Codes Policy, Professional.</li> <li>Coding guidelines from this policy will be included in the new Diagnosis Code Requirement Policy, Professional and Facility.</li> </ul>		

**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.