

## UnitedHealthcare Community Plan Reimbursement Policy Update Bulletin: May 2023

New			
Policy title	State(s)	Policy summary	Effective date
Sexually Transmitted Infection Testing Policy, Professional and Facility	North Carolina	<ul style="list-style-type: none"> <li>Effective with claims dates of service 07/01/2023 and after, the Sexually Transmitted Infection Testing Policy, Professional and Facility (STI) will be applied to North Carolina.</li> <li>UnitedHealthcare Community Plan STI policy allows reimbursement for the comprehensive Test code CPT 87801 when two or more single test codes (CPT 87491, 87591 and/or 87661) are reported for the same member by the same provider and same date of service.</li> <li>Payment will be made based on a single unit of 87801 regardless of the units billed for a single code.</li> </ul>	July 1, 2023
Sexually Transmitted Infection Testing Policy, Professional and Facility	Hawaii	<ul style="list-style-type: none"> <li>Effective with claims dates of service 05/01/2023 and after, the Sexually Transmitted Infection Testing Policy, Professional and Facility (STI) will be applied to Hawaii.</li> <li>UnitedHealthcare Community Plan STI policy allows reimbursement for the comprehensive Test code CPT 87801 when two or more single test codes (CPT 87491, 87591 and/or 87661) are reported for the same member by the same provider and same date of service.</li> <li>Payment will be made based on a single unit of 87801 regardless of the units billed for a single code.</li> </ul>	May 1, 2023
Ambulance Policy, Professional	Hawaii	<ul style="list-style-type: none"> <li>Effective with claims dates of service 05/01/2023 and after, the ESRD reduction section of the Ambulance Policy, Professional will apply to Hawaii.</li> <li>The ESRD reduction section states: In alignment with CMS, UnitedHealthcare Community Plan applies a 23 percent reimbursement reduction on non-emergency BLS code A0428 (Ambulance service, basic life support, non-emergency transport) and associated mileage code A0425 (Ground mileage, per statute mile) to and from renal dialysis treatment facilities when the BLS transport is billed with a G (hospital-based ESRD) or J (freestanding ESRD facility), in either the origin or destination position of an ambulance modifier.</li> </ul>	May 1, 2023

<p>Modifier Policy, Facility</p>	<p>Colorado District of Columbia Florida Hawaii Maryland Massachusetts Michigan Missouri New York North Carolina Ohio Pennsylvania Rhode Island Virginia Washington Wisconsin</p>	<ul style="list-style-type: none"> <li>• The new Modifier Policy, Facility, will be effective for dates of service on or after June 1, 2023.</li> <li>• In alignment with the American Medical Association (AMA) and the Centers for Medicare and Medicaid Services (CMS), modifier 53 is not appropriate for reporting on a UB-04 claim form. Therefore, United Healthcare Community Plan will deny the claim line reported with modifier 53 on outpatient facility claims.</li> </ul>	<p>June 1, 2023</p>
<p>Anatomical Modifier Requirement Policy, Professional</p>	<p>Florida Hawaii Maryland Michigan Missouri New York North Carolina Ohio Pennsylvania Rhode Island Virginia Washington Wisconsin</p>	<ul style="list-style-type: none"> <li>• The new Anatomical Modifier Requirement Policy, Professional will be effective for dates of service on or after August 1, 2023.</li> <li>• UnitedHealthcare will align with CMS by creating a new professional Anatomical Modifier Requirement policy which will provide correct coding requirements for appending anatomical modifiers to CPT codes representing percutaneous coronary intervention procedures. The following modifiers are used to identify the different part of the body where the specific percutaneous coronary intervention procedure is performed. <ul style="list-style-type: none"> <li>○ LC</li> <li>○ LD</li> <li>○ LM</li> <li>○ RC</li> <li>○ RI</li> </ul> </li> </ul>	<p>August 1, 2023</p>

Device and Skin Substitute Policy, Facility	Colorado District of Columbia Hawaii Maryland Michigan Missouri New York North Carolina Ohio Pennsylvania Rhode Island Virginia Washington Wisconsin	<ul style="list-style-type: none"> <li>• UnitedHealthcare Community Plan will align with CMS by creating a new Device and Skin Substitute Policy, Facility that will be effective for dates of service on or after August 1, 2023.</li> <li>• When a device- dependent procedure code is submitted, the appropriate device code must be submitted on the same claim for the same date of service unless the procedure was terminated.</li> <li>• The submission of certain skin substitute application procedures requires the appropriate skin substitute product be submitted on the same day. These procedures and products are divided into two lists based on high or low cost.</li> </ul>	August 1, 2023
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Revised			
Policy Title	State(s)	Summary of Changes	Effective Date
Co-Surgeon/Team Surgeon Policy, Professional	Hawaii Maryland Massachusetts Michigan Minnesota Missouri New York North Carolina Ohio Pennsylvania Rhode Island Virginia Washington Wisconsin	<ul style="list-style-type: none"> <li>• UnitedHealthcare Community Plan's standard reimbursement for Co-Surgeon and/or Team Surgeon services reported with modifier 62 is 63% of the Allowable Amount for the surgical procedures.</li> <li>• CMS Guidelines allow Co-Surgeon/Team Surgeon services, reported with a modifier 62 to be reimbursed at 62.5%.</li> <li>• Effective with claims date of service July 1, 2023 and after, UnitedHealthcare Community Plan will allow at 62.5% consistent with CMS guidelines.</li> </ul>	July 1, 2023

Assistant-at-Surgery Services Policy, Professional	Michigan Minnesota New York North Carolina Ohio Rhode Island	<ul style="list-style-type: none"> <li>• UnitedHealthcare Community Plan's standard reimbursement for Assistant-at-Surgery services on the Assistant-at-Surgery Eligible List reported with modifier AS provided by a Health Care Professional is 14% of the Allowable Amount for the surgical procedures.</li> <li>• CMS Guidelines allow Assistant-at-Surgery services, reported with a modifier AS to be reimbursed at 13.6%.</li> <li>• Effective with claims date of service July 1, 2023 and after, UnitedHealthcare Community Plan will allow at 13.6% consistent with CMS guidelines.</li> </ul>	July 1, 2023
Durable Medical Equipment Orthotics and Prosthetics Policy, Professional	Maryland	<ul style="list-style-type: none"> <li>• Effective with date of service 08/01/2023 and after, Maryland will no longer be exempt from rental limits in the Durable Medical Equipment Orthotics and Prosthetics Policy, Professional</li> </ul>	August 1, 2023

Published reimbursement policies are intended to ensure reimbursement based on the code or codes that correctly describe the health care services provided. UnitedHealthcare reimbursement policies may use Current Procedural Terminology (CPT®\*), Centers for Medicare and Medicaid Services (CMS) or other coding guidelines. References to CPT or other sources are for definitional purposes only and do not imply any right to reimbursement.

**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 Community Plan Reimbursement Policies is available at [UHCprovider.com](https://UHCprovider.com) > Policies and Protocols > Community Plan Policies > [Reimbursement Policies for Community Plan](#).