

UnitedHealthcare Community Plan Reimbursement Policy Update Bulletin: May 2024

New			
Policy title	State(s)	Policy summary	Effective date
Home Health Services Policy, Professional- Reminder	Colorado Washington D.C. Florida Hawaii Maryland Massachusetts Michigan Minnesota Missouri New York North Carolina Pennsylvania Rhode Island Virginia Washington Wisconsin	 Effective for dates of service on or after July 1, 2024, UnitedHealthcare Community Plan 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 dates of service overlap with an inpatient stay. The date span criteria will exclude the date of admission and discharge. 	June 01, 2024



Diagnosis Code
Requirement
Policy,
Professional and
Facility -
Reminder

Colorado District of Columbia Florida Hawaii Maryland Massachusetts Michigan Minnesota Missouri Nevada New York North Carolina Ohio Pennsylvania Rhode Island Virginia Washington

Wisconsin

- Effective with dates of service May 1, 2024, UnitedHealthcare Community Plan 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 Outpatient Hospital Inappropriate Primary Diagnosis Codes Policy, Facility, and the Inappropriate Primary Diagnosis Codes Policy, Professional.
 - 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 verses 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.

May 01,2024



Revised			
Policy Title	State(s)	Summary of Changes	Effective Date
Telehealth/Virtual Health Policy, Professional - Reminder	Arizona Colorado District of Columbia Florida Hawaii Indiana Kansas Kentucky Maryland Massachusetts Michigan Minnesota Mississippi Missouri Nebraska New York North Carolina Ohio Pennsylvania Rhode Island Tennessee Texas Virginia Washington Wisconsin	 Effective with dates of service on or after May 1, 2024, UnitedHealthcare Community Plan will enhance the Telehealth/Virtual Health Policy, Professional to include both Facility and Professional Services. This Enhanced Policy (Telehealth/Virtual Health Policy, Professional and Facility) will integrate the existing guidelines covered by the Telehealth/Virtual Policy, Professional. Additionally, the policy will address 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. 	May 01, 2024



Preventive Medicine and Screening Policy, Professional	Florida Massachusetts New Jersey Tennessee	The UnitedHealthcare Community Plan Preventative Medicine and Screening Policy will be enhanced effective with dates of service 08/01/2024 to apply a 50% reduction to an Evaluation and Management (E/M) service reported with modifier 25 when reported with a Preventative Medicine E/M service on the same day for the same patient by the same provider.	August 01, 2024
		The adjustment considers expenses that overlap with Preventative Medicine practice expenses, which may include for example, supplies, equipment, and administrative overhead.	



Retired			
Policy Title	State(s)	Summary of Changes	Effective Date
Outpatient Hospital Inappropriate Primary Diagnosis Codes Policy, Facility - Reminder	Arizona Colorado District of Columbia Florida Hawaii Indiana Kansas Kentucky Maryland Michigan Minnesota Mississippi Missouri Nebraska Nevada New Jersey New York North Carolina Ohio Pennsylvania Rhode Island Tennessee Texas Virginia Washington Wisconsin	 UnitedHealthcare Community Plan is retiring the existing Outpatient Hospital Inappropriate Primary Diagnosis Codes Policy, Facility. Coding guidelines will be included in the new Diagnosis Code Requirement Policy, Professional and Facility. 	May 01, 2024



Inappropriate	Arizona	UnitedHealthcare Community Plan is retiring the existing Inappropriate Primary	May 01, 2024
Primary Diagnosis	Colorado	Diagnosis Codes Policy, Professional.	
Codes Policy,	District of		
Professional -	Columbia	Coding guidelines will be included in the new Diagnosis Code Requirement Policy,	
Reminder	Florida	Professional and Facility.	
	Hawaii		
	Indiana		
	Kansas		
	Kentucky		
	Louisiana		
	Maryland		
	Massachusetts		
	Michigan		
	Minnesota		
	Mississippi		
	Missouri		
	Nebraska		
	Nevada		
	New Jersey		
	New York		
	Ohio		
	Pennsylvania		
	Rhode Island		
	Tennessee		
	Texas		
	Virginia		
	Washington		
	Wisconsin		



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** > Policies and Protocols > Community Plan Policies > Reimbursement Policies for Community Plan.

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