UnitedHealthcare Community Plan

REIMBURSEMENT POLICY
CMS-1500
Policy Number 2024R0102G

Time Span Codes Policy, Professional

IMPORTANT NOTE ABOUT THIS REIMBURSEMENT POLICY

You are responsible for submission of accurate claims. This reimbursement policy is intended to ensure that you are reimbursed based on the code or codes that correctly describe the health care services provided. UnitedHealthcare Community Plan reimbursement policies uses 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.*

This reimbursement policy applies to all health care services billed on CMS 1500 forms and, when specified, to those billed on UB04 forms. Coding methodology, industry-standard reimbursement logic, regulatory requirements, benefits design and other factors are considered in developing reimbursement policy.

This information is intended to serve only as a general reference resource regarding UnitedHealthcare Community Plan's reimbursement policy for the services described and is not intended to address every aspect of a reimbursement situation. Accordingly, UnitedHealthcare Community Plan may use reasonable discretion in interpreting and applying this policy to health care services provided in a particular case. Further, the policy does not address all issues related to reimbursement for health care services provided to UnitedHealthcare Community Plan enrollees.

Other factors affecting reimbursement supplement, modify or, in some cases, supersede this policy. These factors include, but are not limited to: federal &/or state regulatory requirements, the physician or other provider contracts, the enrollee's benefit coverage documents, and/or other reimbursement, medical or drug policies.

Finally, this policy may not be implemented exactly the same way on the different electronic claims processing systems used by UnitedHealthcare Community Plan due to programming or other constraints; however, UnitedHealthcare Community Plan strives to minimize these variations.

UnitedHealthcare Community Plan may modify this reimbursement policy at any time by publishing a new version of the policy on this Website. However, the information presented in this policy is accurate and current as of the date of publication.

**CPT Copyright American Medical Association. All rights reserved. CPT® is a registered trademark of the American Medical Association.*

Application

This reimbursement policy applies to UnitedHealthcare Community Plan Medicaid products.

This reimbursement policy applies to services reported using the 1500 Health Insurance Claim Form (a/k/a CMS-1500) or its electronic equivalent or its successor form. This policy applies to all products and all network and non-network physicians and/or other qualified health care professionals, including, but not limited to, non-network authorized and percent of charge contract physicians and/or other qualified health care professionals.

Policy

Overview

Within the code description, Current Procedural Terminology (CPT®) book parentheticals and coding guidance by the American Medical Association (AMA) or Centers for Medicare and Medicaid Services (CMS) in other publications, certain CPT and Healthcare Common Procedure Coding System (HCPCS) Level II codes specify a time parameter for which the code should be reported (e.g., weekly, monthly). This policy describes reimbursement for these Time Span Codes.

For the purposes of this policy, the same physician and/or other qualified health care professional includes all physicians and/or other qualified health care professionals of the same group with the same federal tax identification number.

Reimbursement Guidelines

Time Span Codes

UnitedHealthcare Community Plan will reimburse a CPT or HCPCS Level II code that specifies a time period for which it should be reported (e.g., weekly, monthly), once during that time period. The time period is based on sourcing from the AMA or CMS including: the CPT or HCPCS code description, CPT book parentheticals and other coding guidance in the CPT book, other AMA publications or CMS publications.

For example: Within the CPT book, the code description for CPT code 95250 states, "Ambulatory continuous glucose monitoring of interstitial tissue fluid via subcutaneous sensor for a minimum of 72 hours; sensor placement, hook-up, calibration of monitor, patient training, removal of sensor, and printout of recording". In addition to that code description, there is also a parenthetical that provides further instructions with regard to the frequency the code can be reported. The parenthetical states, "Do not report 95250 more than once per month". UnitedHealthcare Community Plan will reimburse CPT Code 95250 only once per month for the same member, for services provided by the Same Group Physician and/or Other Qualified Health Care Professional.

CPT coding guidelines specify for physicians or other qualified health care professionals to select the name of the procedure or service that accurately identifies the services performed.

Refer to Q&A #2 for information on Time Span Code values and modifier usage.

UnitedHealthcare will reimburse a CPT or HCPCS Level II code that specifies a time period for which it should be reported (e.g., weekly, monthly), once during that time period. The time period is based on sourcing from the AMA or CMS including: the CPT or HCPCS code description, CPT book parentheticals and other coding guidance in the CPT book, other AMA publications or CMS publications.

External Electrocardiographic Recording Services - CPT codes 93224, 93225, 93226, and 93227 Reported with Modifier 52

CPT codes 93224 – 93227 are reported for external electrocardiographic recording services up to 48 hours by continuous rhythm recording and storage. CPT coding guidelines for codes 93224 – 93227 specify that when there are less than 12 hours of continuous recording modifier 52 (Reduced Services) should be used.

When modifier 52 is appended to CPT code 93224, 93225, 93226, or 93227, UnitedHealthcare Community Plan does not apply the Time Span Codes Policy for reimbursement of these codes. Instead, UnitedHealthcare Community Plan applies the "Reduced Services Policy" which addresses reimbursement for codes appended with modifier 52.

End-Stage Renal Disease Services (ESRD) CPT Codes 90951-90962

CPT codes 90951-90962 are grouped by age of the patient and the number of face-to-face physician or other qualified health care professional visits provided per month (i.e., 1, 2-3, or 4 or more). UnitedHealthcare Community Plan will reimburse the single most comprehensive outpatient ESRD code submitted per age category (i.e., under 2 years of age, 2-11 years of age, 11-19 years of age, and 20 years of age and older) once per month. This aligns with CPT coding guidance which states that the age specific ESRD codes should be reported once per month for all physicians and/or other qualified health care professional face-to-face outpatient services.

Time Span Comprehensive and Component Codes

When related Time Span Codes which share a common portion of a code description are both reported during the same time span period by the Same Group Physician and/or Other Qualified Health Care Professional for the same patient, the code with the most comprehensive description is the reimbursable service. The other code is considered inclusive and is not a separately reimbursable service. No modifiers will override this denial.

CPT codes 93270, 93271, and 93272 are indented and each share a common component of their code description with CPT code 93268.

When CPT code 93270, 93271, or 93272 are reported with CPT 93268 during the same 30-day period by the Same Group Physician and/or Other Qualified Health Care Professional for the same patient, only CPT code 93268 is the reimbursable service.

The Time Span Code Comprehensive and Component Codes list includes applicable comprehensive and related component Time Span Codes.

Proprietary information of UnitedHealthcare Community Plan. Copyright 2024 United HealthCare Services, Inc. 2024R0102G

Time Span Code Comprehensive and Component Codes list

Code1	Code2
93241	93242
93241	93243
93241	93244
93245	93246
93245	93247
93245	93248
93268	93270
93268	93271
93268	93272
94014	94015
94014	94016
94774	94775
94774	94776
94774	94777

State Exceptions	
Hawaii	Hawaii has a state requirement that T2022 can be billed with 1 unit daily
Indiana	Indiana MLTSS plan procedure code S5141 is exempt from policy Indiana MLTSS allows T2022-U7 64 units per month
Kansas	Annual family planning visit codes S0612 and S0613 can be billed every 330 days.
Mississippi	Mississippi state requirement: S9110 can bill 1 unit per day, not to exceed thirty-one (31) days per month.
New York	New York has a 5-year limit for the following codes and their applicable units: 95004__60 95017__60 95018__60 95024__40 95027__40 95028__40 95044__40 86003__30
North Carolina	North Carolina accepts all the codes in the global policy in addition to the codes in the attached code list.
Rhode Island	Rhode Island Medicaid allows the following unit limits: • A6449 = 999 units per a month • A6446 = 999 units per a month • A6256 = 30 units per a month • A6196 = 60 units per a month • A6197 = 60 units per a month • A6199 = 60 units per a month

Proprietary information of UnitedHealthcare Community Plan. Copyright 2024 United HealthCare Services, Inc. 2024R0102G

Texas	Texas Medicaid allows the following limits: • A4351 – 150 per month • A4352 – 150 per month • A4353 – 150 per month
Washington DC	Washington DC allows HCPCS code A6250 3 units per month.

Definitions

Calendar Month	The Time Span policy defines Calendar Month as the time span referring to an individually named month of the year, e.g., January, February, and includes codes with Calendar Month in their description.
Same Group Physician and/or Other Qualified Health Care Professional	All physicians and/or other qualified health care professionals of the same group reporting the same Federal Tax Identification number.
Time Span Code	A CPT or HCPCS code that specifies a time period for which it should be reported (e.g., weekly, monthly).

Questions and Answers

1	**Q:** How does UnitedHealthcare Community Plan determine the “time span” for codes with a description of Calendar Month, per month or monthly? **A:** UnitedHealthcare Community Plan determines the “time span” for codes with a description of Calendar Month, per month or monthly by an individually named month of the year, e.g., January, February etc. Example: A member can get a Calendar Month, per month or monthly supply on December 31 for December and then again on January 1 for January. If a code description says 30 days, the code can be submitted for consideration of reimbursement again on the 30th day from the date of service on the previous submission.
2	**Q:** Does UnitedHealthcare Community Plan recognize modifiers, e.g., 59, 76, through the Time Span Codes Policy to allow reimbursement for additional submissions of a code within the designated time span? **A:** No. Reimbursement for codes included in the Time Span Codes Policy is based on the time span parameter specified in the code description, CPT book parentheticals and/or other coding guidance from the AMA or CMS.

Attachments

Time Span Codes	A list of codes and their time span designations.
North Carolina Additional Time Span Codes	A List of Additional North Carolina Time Span Codes

Resources

Individual state Medicaid regulations, manuals & fee schedules

American Medical Association*, Current Procedural Terminology (CPT®)* and associated publications and services

Proprietary information of UnitedHealthcare Community Plan. Copyright 2024 United HealthCare Services, Inc. 2024R0102G

Centers for Medicare and Medicaid Services, Healthcare Common Procedure Coding System, HCPCS Release and Code Sets

History	
9/22/2024	Policy Version Change Policy List Change: Time Span Codes List updated History section updated entries prior to 9/22/2022 archived
8/25/2024	Policy Version Change State Exceptions: Indiana and Texas added History section updated entries prior to 8/25/2022 archived
6/30/2024	Policy Version Change State Exceptions: Indiana added History section updated entries prior to 6/30/2022 archived
5/19/2024	Policy Version Change State Exceptions: Washington DC added History section updated entries prior to 5/19/2022 archived
4/24/2024	Policy Version Change Attachment Section: Time Span Codes List updated History section updated entries prior to 4/24/2022 archived
3/31/2024	Policy Version Change Attachment Section: Time Span Codes List updated History section updated entries prior to 3/31/2022 archived
1/1/2024	Policy Version Change Time Span Code Comprehensive and Component Codes List Updated Attachment Section: Time Span Codes List updated
11/26/2023	Policy Version Change State Exceptions: Mississippi updated
10/22/2023	Policy Version Change Attachment Section: North Carolina Additional Time Span Codes List updated
10/15/2023	Policy Version Change Attachment Section: Rhode Island added
9/24/2023	Policy Version Change Policy List Change: Time Span Codes List updated History Section: Entries prior to 9/24/2021 archived
6/18/2023	Policy Version Change Policy List Change: North Carolina Additional Time Span Codes List updated Header: Updated Branding
6/11/2023	Policy Version Change Policy List Change: Time Span Codes List updated
5/28/2023	Policy Version Change Policy List Change: North Carolina Additional Time Span Codes List updated History Section: Entries prior to 5/28/2021 archived
3/26/2023	Policy Version Change Policy List Change: Time Span Codes List updated
2/19/2023	Policy Version Change

Proprietary information of UnitedHealthcare Community Plan. Copyright 2024 United HealthCare Services, Inc. 2024R0102G

	Policy List Change: Time Span Codes List updated History Section: Entries prior to 2/19/2021 archived
1/1/2023	Policy Version Change Policy List Change: Time Span Codes List updated
9/25/2022	Policy Version Change Policy List Change: Time Span Codes List updated History Section: Entries prior to 9/25/2020 archived
3/15/2010	Implementation of Policy

Proprietary information of UnitedHealthcare Community Plan. Copyright 2024 United HealthCare Services, Inc. 2024R0102G