

# UnitedHealthcare Community Plan Reimbursement Policy Update Bulletin: April 2023

New			
Policy title	State(s)	Policy summary	Effective date
Modifier Policy, Facility	California, Colorado, District of Columbia, Florida, Hawaii, Maryland, Massachusetts, Michigan, Missouri, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, Virginia, Washington, Wisconsin	<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>	June 1, 2023
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

<b>Revised</b>			
<b>Policy Title</b>	<b>State(s)</b>	<b>Summary of Changes</b>	<b>Effective Date</b>
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

Revised			
Policy Title	State(s)	Summary of Changes	Effective Date
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

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](#).