

## UnitedHealthcare Individual Exchange/Individual and Family Plans Reimbursement Policy Update Bulletin: February 2025

| Revised   |                       |  |
|---|-----------------------|--|
| Policy Title  | <b>Effective Date</b> | Summary of Changes   |
| Replacement Codes Policy,<br>Professional<br>Reminder | April 1, 2025         | <ul> <li>Effective with dates of service on or after April 1, 2025, HCPCS code S9470 will be included within the UnitedHealthcare Commercial and Individual Exchange Replacement Codes Policy, Professional.</li> <li>In accordance with CMS code S9470 has a status indicator of "I" and will not be considered for reimbursement. There are replacement codes that may be submitted as appropriate.</li> <li>The Current Procedural Terminology (CPT) code 97802 is used for an initial assessment and intervention in medical nutrition therapy (MNT) with a patient, face-to-face, for each 15 minutes</li> <li>The Current Procedural Terminology (CPT) code 97803 is used for a medical nutrition therapy (MNT) reassessment and intervention with an individual patient, face-to-face, for each 15 minutes</li> </ul> |
| Home Health Services Policy,<br>Professional          | May 1, 2025           | <ul> <li>Effective for dates of service on or after May 1, 2025, UnitedHealthcare will enhance the Home Health Services Policy, Professional.</li> <li>This enhancement addresses the following PT/OT/ST and Nursing home health HCPCS with a CMS Status Indicator of E, I or X:         <ul> <li>G0299, G0300, G0490, G0493-G0496, G0529, G2168, G2169, S0274, T1030, T1031, T1002, T1003, T1021.</li> </ul> </li> <li>These HCPCS codes will not be considered for reimbursement when submitted by physicians and physician groups.</li> <li>These HCPCS codes will be considered for reimbursement when appropriately submitted by home health providers.</li> </ul>  |



| Code Updates |                       |  |
|--------------|-----------------------|--|
| Policy Title | <b>Effective Date</b> | Summary of Changes   |
| -            | N/A                   | Summary of Changes  In response to provider feedback and in an effort to provide more transparency, UnitedHealthcare is providing additional information regarding code updates that impact reimbursement policies. These updates are not changing the intent or the coding requirements of the policy, but reflect changes made to industry standard code sets.  • The following UnitedHealthcare policies have recently been updated to include code changes:  • Add-On Codes, Professional  • Anatomical Modifier Requirement Policy, Professional  • Anatomical Modifier Requirement Policy, Professional  • Bilateral Procedures, Facility  • Bilateral Procedures, Professional  • Device, Implant, and Skin Substitute Policy, Facility  • DME, Orthotics and Prosthetics, Professional  • From - To Date, Professional  • Global Days, Professional  • Injection & Infusion Services, Professional  • Maximum Frequency per Day, Professional  • Modifier Reference, Professional  • Monphysician Health Care Professionals Billing E/M Codes, Professional  • Outpatient Hospital Observation Policy, Facility  • Outpatient Hospital Observation Policy, Facility  • PM & R - Mult Therapy Proc Reduction, Professional  • Replacement Codes Policy, Professional  • Replacement Codes Policy, Professional  • Supply Policy, Professional  • Telehealth and Telemedicine Policy, Professional |
|              |                       | <ul> <li>Telehealth and Telemedicine Policy, Professional</li> <li>Information regarding these code updates can be found in the history section which is located at the end of the posted policy.</li> </ul>   |
|              |                       | posted policy.   |
|              |                       | <ul> <li>Code sections/lists/tables within a policy may not be comprehensive but may be provided as examples. Please<br/>review the full policy to understand applicability.</li> </ul>  |
|              |                       | <ul> <li>Code updates could include, for example, CPT, HCPCS, ICD-10, Modifiers, Revenue Codes, or other industry<br/>standard code sets.</li> </ul>   |



| Code Updates |                |   |
|--------------|----------------|---|
| Policy Title | Effective Date | Summary of Changes  |
|              |                | <ul> <li>UnitedHealthcare routinely updates its reimbursement policies in response to code updates made by, for example,<br/>Centers for Medicare and Medicaid Services (CMS), the American Medical Association (AMA), and the World Health<br/>Organization (WHO). This information is provided as a courtesy and may not include all code updates.</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 Individual & Family Plan Reimbursement Policies is available **UHCprovider.com** > Coverage and payments > Policies and protocols > For Individual Exchange Plans > <u>Exchanges-Reimbursement-Policies</u>.