# Frequently asked questions

## How can provider groups determine their Gold Card status?

Provider groups don't need to apply to be part of the UnitedHealthcare Gold Card program. Qualification is awarded if eligibility criteria are met. Provider groups can sign in to the UnitedHealthcare Provider Portal for more information, and if they haven't qualified, see how they can qualify in the future.

## What was the eligibility look-back period?

The look-back period for initial eligibility is the 2 consecutive years beginning April 1, 2022, and ending March 31, 2024.

# Is there a review process for provider groups who feel they should have been included in the Gold Card program and were not?

Yes. Provider group administrators, defined by a single tax ID number (TIN), will have 1 opportunity to submit a review request of their Gold Card status within 30 calendar days of when a status determination is made available on the UnitedHealthcare Provider Portal. Any change in Gold Card status as the result of a review request, as well as the effective date of any change, will be communicated to the provider group. Provider groups must submit review requests with all required information as outlined on the UnitedHealthcare website, which will be live on Sept. 1, 2024. There is a separate review process for behavioral health providers following the same timelines.

## When will provider groups have another opportunity to qualify?

Provider groups who didn't initially qualify for Gold Card status will be evaluated during the next qualification cycle, which will be effective Oct. 1, 2025, and may qualify at that time.

# How often will you re-evaluate provider eligibility and participation in the Gold Card program?

We plan to evaluate provider eligibility and participation on an annual basis.



#### How are prior authorizations attributed to providers?

To determine which prior authorization requests are counted toward Gold Card qualification status, UnitedHealthcare reviews all available provider information for each authorization request submitted during the evaluation period.

The authorization is attributed to a single provider, known as the attributed provider, based on the combination of provider role type and the quality of provider information available on the authorization request. When possible, we attribute an authorization request to a professional rather than a facility.

Requests that have missing, incomplete or invalid information in key fields may not be considered in the determination of Gold Card status.

## When does the Gold Card program start?

The Gold Card experience begins Oct. 1, 2024. This means that eligible services entered and requested on or after this date are eligible for the Gold Card program.

#### Will additional codes be added to the Gold Card program?

Our focus will continue to be on helping to ensure that care is safe, effective and affordable for our members, which means prior authorization requirements for some codes may be added or removed over time based on the latest clinical evidence.

#### How do I submit an advance notification?

An advance notification can be started the same way as a prior authorization request, through the UnitedHealthcare Provider Portal, Point of Care Assist, Electronic Data Interchange (EDI), phone or fax. If the TIN, CPT® code and health plan member all qualify for the Gold Card program, provider groups will receive notice that no additional information is needed and also receive an advance notification number. Please note that Gold Card providers do not need to include the notification number on their claims. Claims for Gold Card-eligible CPT codes will automatically find the advance notification number and process the claim.

## What if the services we are requesting include both Gold Carded and non-Gold Carded codes?

You can continue to submit those services together. Our systems will let you know which code(s) qualify for Gold Card, and which codes don't and will need additional clinical information for review.

## How will the servicing provider know that a code is Gold Carded?

Once an advance notification is submitted, confirmation will flow through our systems, similar to prior authorizations.

For example, if a Gold Card-qualified oncologist orders a diagnostic test that is part of the program, they will receive a notification number instantly after completing an advance notification, and the provider who renders the test will be able to see that it will be covered.

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## Does the advance notification number have to be included on a claim for reimbursement?

No. Claims for Gold Card-eligible CPT codes will automatically find the advance notification number and process the claim. If an advance notification wasn't submitted, however, the claim will be denied.

## Could UnitedHealthcare still require medical documentation?

UnitedHealthcare may require medical records for other nonmedical necessity reviews we conduct.

# Is the National Provider Identifier (NPI) number that is eligible for Gold Card the ordering, billing or rendering provider NPI?

The ordering provider NPI that is associated with a Gold Card TIN is eligible for Gold Card status.

## How does this work for providers with multiple TINs?

Each TIN is independently evaluated for Gold Card qualification. The TIN must meet the Gold Card criteria to qualify. There is reporting within UnitedHealthcare Insights that has a Tax ID filter where providers can select, view and switch among multiple TINs within a health system to view Gold Card qualification status for each TIN.

## What if a provider practices under multiple TINs?

Providers practicing under multiple TINs may qualify for the program under some TINs but not others. Gold Card status may vary depending on the TIN under which you are practicing for any particular service. To help ensure clarity and avoid any confusion, providers should always verify Gold Card status based on the specific TIN being used.

# Are UnitedHealthcare Gold Card efforts compatible with state Gold Card legislation?

The UnitedHealthcare Gold Card program will be effective in all states and modified, when necessary, to meet state requirements. UnitedHealthcare will apply the state criteria first, as required, for the applicable line of business, and then the UnitedHealthcare Gold Card program will take effect for qualifying care provider groups and codes where it does not conflict with state requirements.



