



December 2020

# Network Bulletin

An important message from UnitedHealthcare®  
to health care professionals and facilities.

United  
Healthcare



## UnitedHealthcare respects the expertise of the physicians, health care professionals and staff who participate in our network.

Our goal is to support you and your patients in making the most informed decisions regarding the choice of quality and cost-effective care, and to support practice staff with a simple and predictable administrative experience. The *Network Bulletin* was developed to share:

- ✓ **Important updates**
- ✓ **Procedure and policy changes**
- ✓ **Administrative information**
- ✓ **Clinical information**

Where information in this bulletin conflicts with applicable state and/or federal law, UnitedHealthcare follows such applicable federal and/or state law.

## Subscribe to receive *Network Bulletin* and Network News updates

Our personalized eNewsletters give you and your staff the latest updates on UnitedHealthcare procedures, policy changes and other useful administrative and clinical information.

Visit [UHCprovider.com/subscribe](https://UHCprovider.com/subscribe) to sign up to personalize the information you receive.

## Questions?

For more information, call **877-842-3210** or visit [UHCprovider.com](https://UHCprovider.com).



**For the latest on COVID-19, visit the Centers for Disease Control and Prevention at [CDC.gov](https://www.cdc.gov). For UnitedHealthcare benefits information and resources related to COVID-19, visit [UHCprovider.com/covid19](https://UHCprovider.com/covid19).**

Policy, drug and protocol changes contained herein are effective and enforceable as of the dates indicated, pending notice from UnitedHealthcare to the contrary. Changes to these effective dates or updates to our business practices and policies, as a result of COVID-19, will prevail and be posted on our care provider website as quickly as possible. As with any public health issue, we are working with and following guidance and protocols issued by federal, state and local health authorities. You can find the latest UnitedHealthcare COVID-19-related resources at [UHCprovider.com/covid19](https://UHCprovider.com/covid19).

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## *Network Bulletin* PDF Format Retiring

In an effort to bring you news in a timely and easily accessible way, starting **Jan. 1, 2021**, the Network Bulletin PDF will be retired. You'll continue to have access to all your notices and updates online at [UHCprovider.com/networknews](https://uhcprovider.com/networknews).

## Updated 2021 E/M Reimbursement Policy

**Effective Jan. 1, 2021**, we will be updating our reimbursement policy to follow the revised 2021 Evaluation and Management (E&M) CPT® coding and guideline changes from the American Medical Association (AMA) and Centers for Medicare & Medicaid Services (CMS).

These are the first significant changes to E&M codes in nearly 30 years and will require you to make changes to your billing practices. AMA has set up an [Implementing CPT® Evaluation and Management \(E&M\) revisions site](#) to help with the transition. This site contains free educational modules and step-by-step details to help you understand these new guidelines.

We recommend practice managers and coding specialists review the following:

- Three free educational [modules](#)
  - E&M changes overview
  - Time
  - Medical decision making (MDM)
- [Checklist for Health Systems](#)
- Videos with step-by-step directions
- AMA & Nordic webinar detailing E&M changes and Physician Documentation

These guideline changes have the potential to significantly reduce physician burden while improving patient care.

UnitedHealthcare is here to support your efforts to improve coding accuracy by providing education materials and proactive outreach. Check out the [Coding Corner](#) for the latest on-demand coding guides.

If you have any questions on UnitedHealthcare coding education, please reach out to a coding specialist at [education.info@optum.com](mailto:education.info@optum.com).

## Laboratory Test Registration Requirement — Delay Update

We delayed implementation of the [Laboratory Test Registry](#) protocol until Jan. 1, 2022, due to the ongoing national public health emergency and in order to provide laboratories with additional time to comply.

These requirements apply to most commercial (including Oxford plans), UnitedHealthcare Medicare Advantage and UnitedHealthcare Community Plan networks.

Effective Jan. 1, 2022, claims for most laboratory test services must contain your laboratory's unique test code for each service. In addition, each test code submitted on a claim must match a corresponding laboratory test registration provided to us by Dec. 1, 2021.

For more information, please visit [UHCprovider.com/testregistry](https://UHCprovider.com/testregistry).

## Malpractice Insurance Requirements Changing in 2021

Beginning Mar. 1, 2021, we are increasing the minimum amounts of malpractice (professional liability) insurance that you are required to carry to meet our credentialing and recredentialing requirements.

This change affects health care professionals in 13 states: Indiana, Kansas, Louisiana, Michigan, Missouri, Mississippi, Nebraska, New Mexico, Oklahoma, Pennsylvania, Texas, South Carolina and Wyoming.

Please review the information below and ensure you adjust your insurance coverage, if needed. We will ask for proof of insurance during your normal recredentialing cycle.

### Updated Coverage Requirements

- [Indiana, Louisiana, Nebraska, New Mexico and Wyoming](#)
- [Kansas, Michigan, Missouri, Mississippi, Oklahoma, Pennsylvania and Texas](#)
- [South Carolina](#)



### Questions?

Email [Networkhelp@uhc.com](mailto:Networkhelp@uhc.com). Include the health care professional's full name, National Provider Identifier (NPI) and Tax Identification Number (TIN).



# Exchange Plan Prior Authorization Update

Starting Jan. 1, 2021, Exchange plans will be available in [Arizona](#), [Maryland](#), [North Carolina](#), [Oklahoma](#), [Tennessee](#), [Virginia](#) and [Washington](#).

Update: [Prior authorization and notification requirements for ambulance services](#):

- **Beginning Feb. 1, 2021**, prior authorization will be required for the following non-emergent ambulance services:
  - A0430, A0435 and S9960

## Submitting prior authorization requests

You must submit prior authorization requests for Exchange plan members electronically (online through the Prior Authorization and Notification tool on Link or an EDI 278N). If you do not submit prior authorization requests requires electronically, they will not be processed.

## New to the Prior Authorization and Notification tool?

You can take a [self-paced overview and training course](#) and find more detailed information at [UHCprovider.com/paan](http://UHCprovider.com/paan).

## Not registered for Link?

You'll need to create an Optum ID. You can [sign up and register today](#).

## Need technical help?

- Please [email](#) or call our Help Desk at **866-842-3278, option 1**. Representative are available Monday – Friday, 7 a.m. – 9 p.m. Central Time.



## Questions?

Please call **888-478-4760**.

## Utah Transition to Digital PRAs Postponed

Because of the unprecedented times and the impact of the COVID-19 public health emergency, the transition of PRAs in Utah from print and mail to digital solutions will be postponed to Feb. 1, 2021. The original notification was announced in the [Sept. 1, 2020 Network Bulletin](#).

We will continue to monitor the situation and will provide updates accordingly. Please watch for additional information in future editions of the *Network Bulletin*.

## Arkansas — Hospital Policy Requirement Changes

In October, we notified you of [Hospital Policy Requirement Changes](#) for our commercial and UnitedHealthcare Medicare Advantage plans in 2021.

For Arkansas, this requirement will not go into effect until Mar. 1, 2021.



### Questions?

Please contact your [Provider Relations Representative](#).



### EDI Submission Setup Support

Please visit the [UnitedHealthcare Provider Technical Assistance page](#).

## Prior Authorization and Notification Requirement Updates

View the Updated Notice of Changes to Plan Requirements to get the latest updates to our advance notification and prior authorization requirements. The bulletin is available at [UHCprovider.com/priorauth](#) > Advance Notification and Plan Requirement Resources > [2020 Summary of Changes](#).

To see current prior authorization requirements for all plans, please visit [UHCprovider.com/priorauth](#) > [Advance Notification and Plan Requirement Resources](#) > Select a Plan Type.

## Pharmacy Update

This pharmacy bulletin outlines upcoming new or revised clinical programs and implementation dates. It is available online at [UHCprovider.com/pharmacy](https://UHCprovider.com/pharmacy) for UnitedHealthcare commercial and UnitedHealth Oxford commercial plans.

## Specialty Medical Injectable Drug Program Updates

You can access [The Specialty Medical Injectable Drug Program Bulletin](#) for the latest updates on drugs added to review at launch, program requirements and policies. Click through for complete details or visit [UHCprovider.com](https://UHCprovider.com).

## Reimbursement Policy Updates

You can access the complete details on reimbursement policy updates through the following bulletins.

### UnitedHealthcare Commercial & Affiliates

[UnitedHealthcare Commercial Reimbursement Policy Update Bulletin: December](#)

### UnitedHealthcare Community Plan

Community Plan Reimbursement policies bulletins: [Health Plans by State > \[Select State\]](#) > “View Offered Plan Information” under the Medicaid (Community Plan) section > Bulletins and Newsletters

### UnitedHealthcare Medicare Advantage

[UnitedHealthcare Medicare Advantage Reimbursement Policy Update Bulletin: December](#)

## Medical Policy Updates

The **Policy Update Bulletin** may be accessed from the following list. Click through for complete details on the latest updates.

### UnitedHealthcare Commercial & Affiliates

[UnitedHealthcare Commercial Medical Policy Update Bulletin: December 2020](#)

[Oxford Policy Update Bulletin: December 2020](#)

[UnitedHealthcare West Benefit Interpretation Policy Update Bulletin: December 2020](#)

[UnitedHealthcare West Medical Management Guideline Update Bulletin: December 2020](#)

### UnitedHealthcare Community Plan

[Community Plan Medical Policy Update Bulletin: December 2020](#)

### UnitedHealthcare Medicare Advantage

[Medicare Advantage Coverage Summary Update Bulletin: December 2020](#)

[Medicare Advantage Policy Guideline Update Bulletin: December 2020](#)

### UnitedHealthcare Dental

[Dental Policy Update Bulletin: December 2020](#)

## Drug List Update — Specialty Pharmacies

Effective March 1, 2021 we are [adding medications](#) to our [Specialty Pharmacy Requirements Drug List](#) for commercial plans.

Outpatient hospitals are required to obtain certain specialty medications from the specialty pharmacies listed for administration of these medications, unless otherwise authorized by us. In the event the specialty medication is obtained through the specialty pharmacy, the specialty pharmacy will bill us directly for these medications under the member's medical benefit.

You can view the current medication and specialty pharmacy list in our [Specialty Pharmacy Requirements for UnitedHealthcare Commercial Plan Members](#).



### Questions?

Please contact your Network Management or Provider Relations teams.

## Prescription Drug List Updates

[The Jan. 1, 2021 Prescription Drug List and pharmacy benefit updates](#) for our commercial plans are now available for your review.

## Digital Tools Help Members Find You

Our cost-estimating tools in the **Find Care & Costs** section on **myuhc.com** help members make informed health care choices. The tool simplifies the process of searching for network care providers and viewing health care cost estimates on **myuhc.com**.

The information in this tool is based on your practice's individual providers, demographics and ownership. Reach out to your local network management team if there are any changes to your practice.

You can review your current cost estimate data and a description of the methodology used for the Find Care & Costs member tools by contacting your UnitedHealthcare Network Management Representative or Provider Advocate.

### California care providers

Pursuant to Section 1367.49 of the California Health and Safety Code and Section 10133.64 of the California Insurance Code, you have the opportunity to receive your cost estimate data and a description of the UnitedHealthcare methodology for the Find Care & Costs section. Please contact your UnitedHealthcare Network Management Representative or Provider Advocate for that information or to notify us that you would like to have members link to a response to the Find Care & Costs display.

## New Referral Requirements — New York

Starting March 1, 2021, UnitedHealthcare Community Plan of New York is implementing a referral process for members who need specialty care. To see all the important details, visit [New Referral Requirements for Our Medicaid Plans — New York](#) on [uhcprovider.com/networknews](http://uhcprovider.com/networknews).

## Medical Policy Updates

Access the [Community Plan Medical Policy Update Bulletin: December 2020](#) for complete details on the latest updates.

## Cardiac Rehabilitation Utilization

Cardiac rehabilitation (CR) is a medical program focused on assisting patients to regain cardiovascular health, improve quality of life, decrease recurrent cardiac-related events, reduce mortality and reduce hospitalizations. Traditionally, CR is under referred and under-utilized by eligible members.

To help your eligible patients engage in CR, we are changing the benefit for CR to have a \$0 copay, starting Jan. 1, 2021 for eligible members in qualified Medicare Advantage plans.

The American College of Cardiology and American Heart Association (ACC/AHA) recommend CR for patients who have experienced a:

- heart attack (myocardial infarction-MI)
- cardiac bypass (CABG)
- percutaneous coronary intervention (PCI)
  - includes coronary revascularization, or
  - coronary artery and other atherosclerotic vascular disease
- valve replacement
- heart failure or angina



### Questions?

Please call Provider Services at **877-842-3210** from 7 a.m. – 7 p.m. local time, Monday – Friday.



## Prior Authorization and Site of Service Review Update

In the [September Network Bulletin](#), we informed you that for dates of service on or after **Jan. 1, 2021**, for UnitedHealthcare Medicare Advantage Plans we're expanding our prior authorization requirements and site of service medical necessity reviews to include certain procedures/CPT® codes.

Please note the following changes:

- This will be effective for **Arizona, Colorado, Connecticut, Florida, New Jersey, Nevada, New York** and **Texas** for dates of service on or after **June 1, 2021**.
- We've removed 20 procedure/CPT® codes from the code list. The removed codes, which include 11 colonoscopy and biopsy and 9 repair of the retina codes are as follows: 45378, 45379, 45380, 45381, 45384, 45385, 45386, 45389, 45390, 44388, 44389, 67036, 67040, 67041, 67042, 67108, 67228, 67113, 67145, 67210. The current Medicare Advantage code list can be found in the Utilization Review Guideline titled *Outpatient Surgical Procedures – Site of Service*, which can be accessed as noted below.
- Dual Special Needs Plans (DSNP) in **New Jersey** are excluded from this prior authorization and notification requirement and site of service medical necessity reviews.

### Review Guidelines

As of Jan. 1, 2021, the revised Utilization Review Guideline can be accessed at [Medical & Drug Policies and Coverage Determination Guidelines for UnitedHealthcare Commercial Plans](#). Until then, you can view the update to the Utilization Review Guideline in the December edition of our [UnitedHealthcare Commercial Medical Policy Update Bulletin](#).



### Questions?

Please read our [Frequently Asked Questions](#).