

Information current as of Oct. 7, 2020

State variations and regulations may apply during this time.





Summary of COVID-19 Dates by Program

 The following document is intended to be a quick reference guide for the beginning and end dates of temporary program, process or procedure changes that UnitedHealthcare has implemented as a result of COVID-19.
 Full details of these changes can be found at UHCprovider.com/COVID19.

Please note: Where outlined, changes apply to Individual and fully insured Group Market health plans. Implementation for self-funded customers may vary.

- Medicaid state-specific rules and other state regulations may apply. For Medicaid and other state-specific regulations, please refer to your statespecific website or your state's UnitedHealthcare Community Plan website, if applicable. For more details, go to UHCprovider.com/covid19.
- Medical management requirements may also apply, according to the member's benefit plan.

Cost Share Waivers – Testing (Copays, coinsurance and deductibles)

Program or Benefit Scenario	Medicare Advantage	Medicaid	Individual and Group Market Health Plans	Additional Details
COVID-19 Diagnostic Testing	From Feb. 4, 2020 through the national public health emergency period, currently scheduled to end Jan. 20, 2021, UnitedHealthcare is waiving cost sharing for in-network and out-of-network tests.	State regulations apply.	From Feb. 4, 2020 through the national public health emergency period, currently scheduled to end Jan. 20, 2021, UnitedHealthcare is waiving cost share for in-network and out-of-network tests.	 UnitedHealthcare will cover medically appropriate COVID-19 diagnostic testing (virus/antigen) at no cost share when ordered by a physician or appropriately licensed health care professional for purposes of diagnosis or treatment of an individual member. UnitedHealthcare will cover testing for employment, education, public health or surveillance purposes when required by applicable law. Benefits will be adjudicated in accordance with a member's benefit plan; health benefit plans generally do not cover testing for surveillance or public health purposes. We continue to monitor regulatory developments during emergency periods.
COVID-19 Antibody Testing	From April 10, 2020 through the national public health emergency period, currently scheduled to end Jan. 20, 2021, UnitedHealthcare is waiving cost sharing for in-network and out-of-network tests.	State regulations apply.	From April 10, 2020 through the national public health emergency period, currently scheduled to end Jan. 20, 2021, UnitedHealthcare is waiving cost share for in-network and out-of-network tests.	 COVID-19 antibody testing must be an FDA- authorized COVID-19 antibody test ordered by a physician or appropriately licensed health care professional, consistent with CMS requirements.
COVID-19 Testing-Related Visits	From Feb. 4, 2020 through the national public health emergency period, currently scheduled to end Jan. 20, 2021, UnitedHealthcare is waiving cost sharing for in-network and out-of-network testing-related visits.	State regulations apply.	From Feb. 4, 2020 through the national public health emergency period, currently scheduled to end Jan. 20, 2021, UnitedHealthcare is waiving cost share for in-network and out-of-network testing-related visits.	Visits can be in-person or via telehealth.



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Cost Share Waivers – Treatment and Transportation (Copays, coinsurance and deductibles)

Program or Benefit Scenario	Medicare Advantage	Medicaid	Individual and Group Market fully insured health plans	Additional Details
COVID-19 Treatment	From Feb. 4, 2020 through Dec. 31, 2020, UnitedHealthcare is waiving cost sharing for in-network and out-of-network visits.	State regulations apply.	From Feb. 4, 2020 through Oct. 22, 2020, UnitedHealthcare is waiving cost sharing for in-network and out-of-network visits. From Oct. 23, 2020 through Dec. 31, 2020, UnitedHealthcare is waiving cost sharing for in-network visits. Starting Oct. 23, 2020, out-of-network coverage will be determined by the member's benefit plan.	 Treatment must be for a COVID-19 diagnosis with an appropriate admission or diagnosis code. Applies to office, telehealth, urgent care and emergency department visits, observation stays, inpatient hospital episodes, acute inpatient rehab, long-term acute care and skilled nursing facilities.
Transportation	Cost sharing will be adjudicated in accordance with the member's benefit plan.	State regulations apply.	From April 1, 2020 through Oct. 22, 2020, UnitedHealthcare is waiving cost share.	 For ground emergency and medically necessary non-emergency ambulance transportation for COVID-19-related or suspected COVID-19-related services. Also for ground transportation from facility to facility (acute to acute or acute to post-acute) for patients with a positive COVID-19 diagnosis.



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Cost Share Waivers – Medicare Advantage Professional Services (Copays, coinsurance and deductibles)

Program or Benefit Scenario	Health Plan*	Date Details	Additional Details
Office-Based Professional Services	Medicare Advantage	From May 11, 2020 through Sept. 30, 2020, UnitedHealthcare waived cost share. As of Oct. 1, 2020, cost sharing for specialty visits will be adjudicated, in accordance with the member's benefit plan.	 UnitedHealthcare is waiving cost share (copays, coinsurance and deductibles) for UnitedHealthcare Medicare Advantage plan members for all office-based professional services performed by both primary care physicians and specialists in the categories listed under: See below for primary care professional services cost share extension: Update – Waiving Cost Share for Medicare Advantage Primary and Specialty Care Office Visits
Primary Care Professional Services	Medicare Advantage	From Oct. 1, 2020 through Dec. 31, 2020, UnitedHealthcare is waiving cost share. Coverage will be adjudicated in accordance with the member's benefit plan.	 UnitedHealthcare is waiving cost share (copays, coinsurance and deductibles) for UnitedHealthcare Medicare Advantage plan members for primary care professional services. This applies to in-network and covered out-of-network COVID-19 and non-COVID-19 visits. Urgent care and emergency room care copays are not waived.



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Cost Share Waivers – COVID-19 Telehealth

(Copays, coinsurance and deductibles)

Program or Benefit Scenario	Medicare Advantage*	Medicaid**	Individual and Fully Insured Group Market***	Additional Details
Telehealth Virtual Check-Ins Electronic Visits (e-visits) Physical Therapy Occupational Therapy Speech Therapy Chiropractic Therapy Home Health and Hospice Remote Patient Monitoring Behavioral Dental Vision Hearing	From Feb. 4, 2020 through the national public health emergency period, currently scheduled to end Jan. 20, 2021, UnitedHealthcare is waiving cost sharing for in-network and out-of-network testing and testing-related telehealth visits. COVID-19 Treatment From Feb. 4, 2020 through Dec. 31, 2020, UnitedHealthcare is waiving cost sharing for in-network and out-of-network telehealth treatment visits.	State regulations apply. If no state guidance was provided, the cost share waiver ended June 18, 2020.	From Feb. 4, 2020 through the national public health emergency period, currently scheduled to end Jan. 20, 2021, UnitedHealthcare is waiving cost sharing for in-network and out-of-network testing-related telehealth visits. COVID-19 Treatment From Feb. 4, 2020 through Dec. 31, 2020, UnitedHealthcare is waiving cost sharing for in-network telehealth treatment visits. Out-of-network cost-share waivers will end Oct. 22, 2020. Starting Oct. 23, 2020, coverage for out-of-network services will be determined by the member's benefit plan. Implementation for self-funded customers may vary.	Benefits will be adjudicated in accordance with the member's health plan, if applicable.



*This date is subject to change based on direction from CMS. Hospice services are not applicable for Medicare Advantage plans. **Medicaid state-specific rules and other state regulations may apply. For Medicaid and other state-specific regulations, please refer to your state-specific website or your state's <u>UnitedHealthcare Community Plan website</u>, if applicable. If no state guidance was provided, telehealth expansion ended June 18, 2020. ***State variations and regulations may apply. Changes apply to Individual and fully insured Group Market health plans. Implementation for self-funded customers may vary. See UHCprovider.com/covid19 for more details. Dates are subject to change based on the national public health emergency period.

Cost Share Waivers – Non-COVID-19 Telehealth (Copays, coinsurance and deductibles)

Program or Benefit Scenario	Medicare Advantage*	Medicaid**	Individual and Fully Insured Group Market***	Additional Details
Telehealth Virtual Check-Ins Electronic Visits (e-visits) Physical Therapy Occupational Therapy Speech Therapy Chiropractic Therapy Home Health and Hospice Remote Patient Monitoring Behavioral Dental Vision Hearing	Non-COVID-19 Through Sept. 30, 2020, UnitedHealthcare extended the cost share waiver for telehealth services for in- and out-of-network providers. From Oct. 1, 2020 through Dec. 31, 2020, UnitedHealthcare will extend the cost share waiver for in-network and covered out-of-network primary care telehealth services. As of Oct. 1, 2020, cost sharing for non-primary care telehealth services will be adjudicated in accordance with the member's benefit plan.	State regulations apply. If no state guidance was provided, the cost share waiver ended June 18, 2020.	Non-COVID-19 For in-network providers, UnitedHealthcare extended the cost share waiver for telehealth services through Sept. 30, 2020. For out-of-network providers, the cost share waiver for telehealth services does not apply. As of Oct. 1, 2020, benefits will be adjudicated in accordance with the member's benefit plan.	Benefits will be adjudicated in accordance with the member's health plan, if applicable.



*This date is subject to change based on direction from CMS. Hospice services are not applicable for Medicare Advantage plans. **Medicaid state-specific rules and other state regulations may apply. For Medicaid and other state-specific regulations, please refer to your state-specific website or your state's <u>UnitedHealthcare Community Plan website</u>, if applicable. If no state guidance was provided, telehealth expansion ended June 18, 2020. ***State variations and regulations may apply. Changes apply to 7 Individual and fully insured Group Market health plans. Implementation for self-funded customers may vary. See UHCprovider.com/covid19 for more details. Dates are subject to change based on the national public health emergency period.

Telehealth Expansion

Program or Benefit Scenario	Medicare Advantage*	Medicaid**	Individual and Fully Insured Group Market Health Plans ***	Additional Details
Telehealth Medical Behavioral Physical Therapy Occupational Therapy Speech Therapy	COVID-19 For in- and out-of- network providers, UnitedHealthcare will extend the expansion of telehealth access through Dec. 31, 2020. From Jan. 1, 2021 through the national public health emergency period, currently scheduled to end Jan. 20, 2021, UnitedHealthcare will cover all in-network and out-of-network telehealth services as outlined in the current CMS guidelines. Non-COVID-19 For in- and out-of- network providers, UnitedHealthcare will extend the expansion of telehealth access through Dec. 31, 2020. From Jan. 1, 2021 through the national public health emergency period, currently scheduled to end Jan. 20, 2021, UnitedHealthcare will cover all in-network and out-of-network telehealth services as outlined in the current CMS guidelines. (See the Medicare Advantage section on UHCprovider.com/covid19 > Telehealth)	State regulations apply. Please refer to your state-specific website.	COVID-19 For in-network providers, UnitedHealthcare will extend the expansion of telehealth access for COVID-19 testing and treatment through Dec. 31, 2020. From Jan. 1, 2021 and beyond, UnitedHealthcare will cover all in-network telehealth services as outlined in current CMS guidelines and additional codes as outlined in our telehealth reimbursement policy. For out-of-network providers, UnitedHealthcare will extend the expansion of telehealth access for COVID-19 testing through the national public health emergency period, currently scheduled to end Jan. 20, 2021. For out-of-network providers, UnitedHealthcare will extend the expansion of telehealth access for COVID-19 treatment through Oct. 22, 2020. As of Oct. 23, 2020, out-of-network telehealth services are covered according to the member's benefit plan and UnitedHealthcare's standard telehealth reimbursement policy. Non-COVID-19 For in-network providers, UnitedHealthcare will extend the expansion of telehealth access through Dec. 31, 2020. From Jan. 1, 2021, UnitedHealthcare will cover all innetwork telehealth services as outlined in the current CMS guidelines and additional codes as outlined in our telehealth reimbursement policy. For out-of-network providers, the expansion of telehealth access ended July 24, 2020. As of July 25, 2020, out-of-network telehealth services are covered according to the member's benefit plan and UnitedHealthcare's standard telehealth reimbursement policy. (See the Individual and Fully Insured Group Market Health Plan section on UHCprovider.com/covid19 > Telehealth)	 UnitedHealthcare is waiving the Centers for Medicare & Medicaid Services (CMS) originating site requirement through the national public health emergency period. The temporary policy changes apply to members whose benefit plans cover telehealth services and allow those patients to connect with their doctor through live, interactive audio-only visits.



Program or Benefit Scenario	Medicare Advantage*	Medicaid**	Individual and Fully Insured Group Market Health Plans ***	Additional Details
Virtual Check-Ins	Covered per Medicare guidelines.	State regulations apply.	COVID-19 For in-network providers, UnitedHealthcare will extend the expansion of telehealth access for COVID-19 testing and treatment through Dec. 31, 2020. From Jan. 1, 2021 and beyond, UnitedHealthcare will cover all in-network telehealth services as outlined in current CMS guidelines and additional codes as outlined in our telehealth reimbursement policy. For out-of-network providers, UnitedHealthcare will extend the expansion of telehealth access for COVID-19 testing through the national public health emergency period, currently scheduled to end Jan. 20, 2021. For out-of-network providers, UnitedHealthcare will extend the expansion of telehealth access for COVID-19 treatment for new patients through Oct. 22, 2020. As of Oct. 23, 2020, out-of-network telehealth services are covered according to the member's benefit plan and UnitedHealthcare's standard telehealth reimbursement policy. Non-COVID-19 For in-network providers, UnitedHealthcare will extend the expansion of telehealth access for new patients through Dec. 31, 2020. From Jan. 1, 2021, UnitedHealthcare will cover all in-network telehealth services as outlined in the current CMS guidelines and additional codes as outlined in our telehealth reimbursement policy. For out-of-network providers, the expansion of telehealth access ended July 24, 2020. As of July 25, 2020, out-of-network telehealth services are covered according to the member's benefit plan and UnitedHealthcare's standard telehealth reimbursement policy.	UnitedHealthcare will reimburse providers when they have a brief communication using a technology-based service with a member, using HCPCS codes G2010 or G2012.



Program or Benefit Scenario	Medicare Advantage*	Medicaid**	Individual and Fully Insured Group Market Health Plans ***		Additional Details
Electronic Visits (e-visits)	Covered per Medicare guidelines.	State regulations apply.	E-visits will be covered according to the member's benefit plan and UnitedHealthcare's standard telehealth reimbursement policy.	•	UnitedHealthcare will reimburse providers when members communicate with their doctors using online patient portals, using CPT® codes 99421-99423 and HCPCS codes G2061-G2063. For these e-visits, the member must generate the initial inquiry, and communications can occur over a seven-day period.



Program or Benefit Scenario	Medicare Advantage*	Medicaid**	Individual and Fully Insured Group Market Health Plans***		Additional Details
Remote Patient Monitoring	Covered per Medicare guidelines.	State regulations apply.	Remote patient monitoring will be covered according to the member's benefit plan and UnitedHealthcare's standard telehealth reimbursement policy.	•	UnitedHealthcare follows CMS guidelines and considers digitally stored data services or remote physiologic monitoring services reported with CPT® codes 99453, 99454, 99457, 99458, 99473, 99474 and 99091 eligible for reimbursement, according to the CMS Physician Fee Schedule.
Chiropractic Therapy	COVID-19 For in-and out-of-network providers, UnitedHealthcare will extend the expansion of telehealth access through Dec. 31, 2020. Non-COVID-19 For in-and out-of-network providers, UnitedHealthcare will extend the expansion of telehealth access through Dec. 31, 2020.	State regulations apply.	For in-network providers, UnitedHealthcare will extend the expansion of telehealth access for COVID-19 testing and treatment through Dec. 31, 2020. For out-of-network providers, UnitedHealthcare will extend the expansion of telehealth access for COVID-19 testing and treatment services through Oct. 22, 2020. As of Oct. 23, 2020, out-of-network telehealth services are covered according to the member's benefit plan and UnitedHealthcare's standard telehealth reimbursement policy. Non-COVID-19 For in-network providers, UnitedHealthcare will extend the expansion of telehealth access through Dec. 31, 2020. For out-of-network providers, the expansion of telehealth access ended July 24, 2020. As of July 25, 2020, out-of-network telehealth services are covered according to the member's benefit plan and UnitedHealthcare's standard telehealth reimbursement policy.	•	UnitedHealthcare will reimburse chiropractic therapy telehealth services provided by qualified health care professionals when rendered using interactive audiovideo technology for in-network providers only, when covered according to the member's benefit plan. Chiropractors can use these available codes to bill as part of the temporary expansion of telehealth services through Dec. 31, 2020.



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Program or Benefit Scenario	Medicare Advantage*	Medicaid**	Individual and Fully Insured Group Market Health Plans***	Additional Details
Home Health	For in- and out-of- network providers, UnitedHealthcare will extend the expansion of telehealth access through the national public health emergency period, currently scheduled to end Jan. 20, 2021. Non-COVID-19 For in- and out-of- network providers, UnitedHealthcare will extend the expansion of telehealth access through the national public health emergency period, currently scheduled to end Jan. 20, 2021.	State regulations apply.	For in-network providers, UnitedHealthcare will extend the expansion of telehealth access for COVID-19 testing and treatment through the national public health emergency period, currently scheduled to end Jan. 20, 2021. For out-of-network providers, UnitedHealthcare will extend the expansion of telehealth access for COVID-19 testing through the national public health emergency period, currently scheduled to end Jan. 20, 2021. For out-of-network providers, UnitedHealthcare will extend the expansion of telehealth access for COVID-19 treatment through Oct. 22, 2020. As of Oct. 23, 2020, out-of-network telehealth services are covered according to the member's benefit plan and UnitedHealthcare's standard telehealth reimbursement policy. Non-COVID-19 For in-network providers, UnitedHealthcare will extend the expansion of telehealth access through Dec. 31, 2020. For out-of-network providers, the expansion of telehealth access ended July 24, 2020. As of July 25, 2020, out-of-network telehealth services are covered according to the member's benefit plan and UnitedHealthcare's standard telehealth reimbursement policy.	UnitedHealthcare will reimburse services provided by home health agencies when rendered using interactive audio- video technology for in-network providers only.
Hospice	Not Applicable	State regulations apply.	COVID-19 For in-network providers, UnitedHealthcare will extend the expansion of telehealth access through Dec. 31, 2020. For out-of-network providers, UnitedHealthcare will extend the expansion of telehealth access through Oct. 22, 2020. Non-COVID-19 For in-network providers, UnitedHealthcare will extend the expansion of telehealth access through Dec. 31, 2020. For out-of-network providers, the expansion of telehealth access ended July 24, 2020. As of July 25, 2020, out-of-network telehealth services are covered according to the member's benefit plan and UnitedHealthcare's standard telehealth reimbursement policy.	UnitedHealthcare will reimburse services provided by hospice agencies for routine home care when rendered using interactive audio-video technology.



Program or Benefit Scenario	Medicare Advantage*	Medicaid**	Individual and Fully Insured Group Market Health Plans***	Additional Details
Dental Vision Hearing	For in- and out-of- network providers, UnitedHealthcare will extend the expansion of telehealth access through Dec. 31, 2020. From Jan. 1, 2021 through the national public health emergency period, currently scheduled to end Jan. 20, 2021, UnitedHealthcare will cover all in-network and out-of-network telehealth services as outlined in the current CMS guidelines or in accordance with the member's benefit plan. Non-COVID-19 For in- and out-of- network providers, UnitedHealthcare will extend the expansion of telehealth access through Dec. 31, 2020. From Jan. 1, 2021 through the national public health emergency period, currently scheduled to end Jan. 20, 2021, UnitedHealthcare will cover all in-network and out-of-network telehealth services as outlined in the current CMS guidelines or in accordance with the member's benefit plan.	State regulations apply.	For in-network providers, UnitedHealthcare will extend the expansion of telehealth access for COVID-19 testing and treatment through Dec. 31, 2020. From Jan. 1, 2021, through the national public health emergency period (currently scheduled to end Jan. 20, 2021), UnitedHealthcare will cover all innetwork telehealth services as outlined in the current CMS guidelines or in accordance with the member's benefit plan. For out-of-network providers, UnitedHealthcare will extend the expansion of telehealth access for COVID-19 testing through the national public health emergency period, currently scheduled to end Jan. 20, 2021. For out-of-network providers, UnitedHealthcare will extend the expansion of telehealth access for COVID-19 treatment through Oct. 22, 2020. As of Oct. 23, 2020, out-of-network telehealth services are covered according to the member's benefit plan and UnitedHealthcare's standard telehealth reimbursement policy. Non-COVID-19 For in-network providers, UnitedHealthcare will extend the expansion of telehealth access through Dec. 31, 2020. For out-of-network providers, the expansion of telehealth access ended July 24, 2020. As of July 25, 2020, out-of-network telehealth services are covered according to the member's benefit plan and UnitedHealthcare's standard telehealth reimbursement policy.	UnitedHealthcare is waiving the Centers for Medicare & Medicaid Services (CMS) originating site requirement. The policy changes apply to members whose benefit plans cover telehealth services and allow those patients to connect with their provider, dentist, audiologist and fitters through live, interactive audiovideo or audio-only visits. The following specialty plans will be covered according to the member's benefit plan: Dental UnitedHealthcare dental will continue to reimburse providers for the applicable exam codes that coincide with the teledentistry codes through Dec. 31, 2020. Vision UnitedHealthcare vision will continue to reimburse providers for the applicable telehealth codes through Dec. 31, 2020. Hearing UnitedHealthcare hearing will continue to include telehealth claims notes on the broader hearing bundled service claims through Dec. 31, 2020.



Timely Filing and Prescription Refills

Program or Benefit Scenario	Health Plan*	Date Details	Additional Details
Timely Filing Extensions	Individual and Group Market Health Plans	UnitedHealthcare is following the IRS/DOL regulation related to the national emergency declared by the President. This regulation pauses the timely filing requirements time clock for claims that would have exceeded the filing limitation during the national emergency period that began on March 1, 2020.*	 Timely filing requirements have been extended an additional 60 days following the last day of the national emergency period.** This regulatory guidance has been issued by the IRS and the U.S. Department of Labor (Employee Benefits Security Administration). Our standard timely filing requirements apply to claims that exceeded requirements prior to the national emergency period.**
Timely Filing Extensions	Medicare Advantage and Medicaid Plans	Claims with a 2020 service date submitted on or after Jan. 1, 2020 through June 30, 2020, will not be denied for failure to meet timely filing deadlines. As of July 1, 2020, UnitedHealthcare is following standard timely filing requirements.	 If the Centers for Medicare & Medicaid Services (CMS) issues further guidance on timely filing, UnitedHealthcare will adhere to that guidance. Our standard timely filing requirements apply to claims that exceeded requirements prior to the national emergency period.** Medicaid state-specific rules and other state regulations may apply. For Medicaid and other state-specific regulations, please refer to your state-specific website.
Early Prescription Refills	Medicare Advantage, Medicaid and Individual and Group Market health plans	Through July 15, 2020	 Members who have UnitedHealthcare prescription coverage or an OptumRx pharmacy benefit can get an early prescription refill by calling the pharmacy number on their health plan ID card or speaking directly to a pharmacist. Members can also opt to have prescriptions delivered to their home through Optum Home Delivery. They can set up this option online by signing into their health plan account.



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Referrals and Provisional Credentialing

Program or Benefit Scenario	Health Plan*	Date Details	Additional Details
Referrals	Medicare Advantage	From March 1, 2020 through the national public health emergency period, currently scheduled to end Jan. 20, 2021.	UnitedHealthcare will not enforce referral requirements for Medicare Advantage plans during the national public health emergency period.
	Medicaid	n/a	 Consistent with existing policy, members do not need a referral for emergency care. Note that Florida, Maryland and Rhode Island have state requirements for referrals.
	Individual and Group Market health plans	n/a	 Consistent with existing policy, members do not need a referral for emergency care. All other standard referral requirements continue to apply.
Provisional Credentialing		Through Dec. 31, 2020, in accordance with NCQA guidelines.	 In accordance with guidelines from the National Committee for Quality Assurance (NCQA), we're implementing provisional credentialing for out-of-network care providers who are licensed independent practitioners and want to participate in one or more of our networks. All credentialing applications will be evaluated to determine if UnitedHealthcare is currently accepting applications in specific geographic areas or for a designated specialty.
			Complete information on COVID-19-related credentialing and recredentialing changes can be found at



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Prior Authorization

Program or Benefit Scenario	Health Plan*	Date Details		Additional Details
Diagnostic Radiology for COVID-19 testing and testing-related services (diagnostic imaging)	Medicaid and Individual and Group Market health plans* No notice is necessary for Medicare	Prior authorization is not required through the national public health emergency period, currently scheduled to end Jan. 20, 2021.	•	Providers are asked to submit a notification for CPT® codes 71250, 71260, 71720 for members with a COVID-19 diagnosis or suspected diagnosis.
	For prior authorizations approved before Oct. 1, 2019, a new authorization is required.	•	Providers may complete a face-to-face assessment either through an in-person visit or using <u>telehealth</u> .	
		Prior authorizations that were approved on or after Oct. 1, 2019, were extended through Sept. 30, 2020.	•	Prior authorization requirements resumed June 1, 2020. For new prior authorizations, providers may complete a face-to-face assessment either through an in-person visit or by telehealth.
		For prior authorizations for equipment and supply deliveries from March 31, 2020, through May 31, 2020.	•	Changes to notification and delivery requirements for equipment and supplies
Embryo Cryopreservation	Individual and Group Market fully insured health plans with infertility benefits*	No prior authorization is required for embryo cryopreservation from March 17, 2020, through April 30, 2020	•	Temporary change in embryo cryopreservation coverage for members who started an IVF cycle and were ready for retrieval and embryo transfer, which was interrupted mid-cycle by COVID-19 restrictions.



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Prior Authorization (cont.)

Program or Benefit Scenario	Health Plan*	Date Details	Additional Details
Medical, Behavioral Health and Dental Services – Extensions of Existing Prior Authorizations	Medicare Advantage, Medicaid and Individual and Group Market health plans*	90-day extension based on original authorization date with an end date or date of service between March 24, 2020 and May 31, 2020. Prior authorizations on or after April 10, 2020 will not be subject to extension.	For example: For a prior authorization with an original end date or date of service of April 30, 2020, the prior authorization would extend through July 29, 2020.
Post-Acute Care Admission	Medicare Advantage, Medicaid and Individual and Group Market health plans*	Prior authorization suspended from March 24, 2020 through May 31, 2020.	 Applies to admissions for long-term acute care facilities, acute inpatient rehabilitation and skilled nursing facilities.
Site of Service Reviews	Medicaid and Individual and Group Market fully insured health plans*	Prior authorization suspended from March 24, 2020 through May 31, 2020.	Applies to nearly 2,000 surgical codes
Transfers to a New Provider	Medicare Advantage, Medicaid and Individual and Group Market health plans*	Prior authorization suspended from March 24, 2020 through May 31, 2020.	Prior authorization not required when a member moves to a different yet similar site of care for the same service (e.g., hospital transfers or practice transfers).



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Resources

- Find the latest UnitedHealthcare COVID-19-related resources at <u>UHCprovider.com/covid19</u>.
- Learn more about our reimbursement policies at UHCprovider.com/policies.





For the most recent updates on COVID-19, visit the CDC and World Health Organization.

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