

# Revenue Codes Requiring Procedure Code Policy, Facility

#### IMPORTANT NOTE ABOUT THIS REIMBURSEMENT POLICY

You are responsible for submission of accurate claims. This reimbursement policy is intended to ensure that you are reimbursed based on the code or codes that correctly describe the health care services provided. UnitedHealthcare Individual Exchange 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.

This reimbursement policy applies to all health care services billed on UB04 forms. Coding methodology, industry-standard reimbursement logic, regulatory requirements, benefits design and other factors are considered in developing reimbursement policy.

This information is in4tended to serve only as a general reference resource regarding UnitedHealthcare Individual Exchange's reimbursement policy for the services described and is not intended to address every aspect of a reimbursement situation. Accordingly, UnitedHealthcare Individual Exchange may use reasonable discretion in interpreting and applying this policy to health care services provided in a particular case. Further, the policy does not address all issues related to reimbursement for health care services provided to UnitedHealthcare Individual Exchange enrollees. Other factors affecting reimbursement may supplement, modify or, in some cases, supersede this policy. These factors may include, but are not limited to: legislative mandates, the physician or other provider contracts, the enrollee's benefit coverage documents and/or other reimbursement, medical or drug policies. Finally, this policy may not be implemented exactly the same way on the different electronic claims processing systems used by UnitedHealthcare Individual Exchange due to programming or other constraints; however, UnitedHealthcare Individual Exchange strives to minimize these variations.

UnitedHealthcare Individual Exchange may modify this reimbursement policy at any time by publishing a new version of the policy on this Website. However, the information presented in this policy is accurate and current as of the date of publication. \*CPT Copyright American Medical Association. All rights reserved. CPT® is a registered trademark of the American Medical Association.

## **Application**

# This reimbursement policy applies to UnitedHealthcare Individual Exchange products.

This reimbursement policy applies to services reported using the UB04 claim form or its electronic equivalent or its successor form. This policy applies to all products and all network and non-network outpatient facility claims, Ambulatory Surgical Centers (ASC), Outpatient Surgical Centers (OSC), including, but not limited to, non-network authorized, and percent of charge contract facilities.

# **Applicable States:**

This reimbursement policy applies to Individual Exchange benefit plans in all states except for Massachusetts, Nevada, and New York.

# **Policy**

#### Overview

This policy describes revenue codes that require procedure codes based on National Uniform Billing Committee (NUBC) guidelines.

### **Reimbursement Guidelines**

Per NUBC, outpatient UB-04 claims must be billed with both a revenue code and a CPT or HCPCS code. A revenue code must be assigned for each line item. If multiple CPT or HCPCS are necessary to reflect multiple, distinct, or independent visits with the same revenue code, repeat the revenue code as required.



Absence of a CPT or HCPCs code for any revenue code not listed on this policy may affect claim payment or result in a claim denial.

Revenue codes exempt from this requirement are listed in the Attachments section.

This policy applies to all outpatient claims except for the following bill types:

- Skilled Nursing (23X)
- Home Health (33X)
- Religious Non-Medical Healthcare (43X)
- Rural Health Care Clinic (71X)
- Hospital based Clinic (72X)
- Free standing Clinic (73X)
- Federally Qualified Health Center Clinic (77X)
- Hospice (81X, 82X)
- Critical Access Hospital (85X)

Attachments	
Revenue Codes Exempt from Requiring a Procedure Codes	List of revenue codes that are EXEMPT from Requiring a procedure code

#### Resources

Centers for Medicare and Medicaid Services, CMS Manual System and other CMS publications and services

Centers for Medicare and Medicaid Services, Healthcare Common Procedure Coding System, HCPCS Release and Code Sets

National Uniform Billing Committee (NUBC)

History	
4/14/2024	Policy Version Change Updated Application Language
2/5/2024	Policy Date and Version Change Attachments Section: Revenue Codes Exempt from Requiring a Procedure Codes list updated
10/25/2023	Policy Version Change Attachments Section: Revenue Codes Exempt from Requiring a Procedure Codes list updated
1/1/2023	Policy Version Change Updated Policy Template
1/1/2022	Policy Version Change Updated Policy Template
1/1/2021	Policy implemented by UnitedHealthcare Value & Balance Exchange

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