

UnitedHealthcare Medicare Advantage Reimbursement Policy Update Bulletin: May 2024

New		
Policy Title	Effective Date	Policy Summary
Diagnosis Code Requirement Policy, Professional and Facility	May 1, 2024 Reminder	<ul style="list-style-type: none"> Effective with dates of service May 1, 2024, UnitedHealthcare Medicare Advantage will introduce a comprehensive Diagnosis Code Requirement Policy for both Professional and Facility services. This new policy will integrate the existing ICD-10-CM guidelines covered by the Inpatient Unacceptable Principal Diagnosis Policy (Facility), the Outpatient Hospital Inappropriate Primary Diagnosis Code Policy (Facility), and the Inappropriate Primary Diagnosis Codes Policy (Professional). Additionally, the policy will address Excludes 1 coding within the ICD-10-CM framework. Excludes 1 guidelines denote mutually exclusive codes, representing two conditions that cannot be reported together—such as a congenital form versus an acquired form of the same condition. All providers should align to coding with the Excludes 1 guidelines when submitting claims; however, at this time, the application of these guidelines is specifically for inpatient claims. Providers are expected to accurately submit diagnosis codes in alignment with ICD-10-CM requirements.
Retired		
Policy Title	Effective Date	Summary of Changes
Inpatient Unacceptable Principal Diagnosis Policy, Facility	May 1, 2024 Reminder	<ul style="list-style-type: none"> UnitedHealthcare Medicare Advantage is retiring the “Inpatient Unacceptable Principal Diagnosis Policy, Facility”. Coding guidelines from this policy will be included in the new Diagnosis Code Requirement Policy, Professional and Facility.
Outpatient Hospital Inappropriate Primary Diagnosis Code Policy Facility	May 1, 2024 Reminder	<ul style="list-style-type: none"> UnitedHealthcare Medicare Advantage is retiring the “Outpatient Hospital Inappropriate Primary Diagnosis Code Policy Facility”. Coding guidelines from this policy will be included in the new Diagnosis Code Requirement Policy, Professional and Facility.
Inappropriate Primary Diagnosis Codes Policy, Professional	May 1, 2024 Reminder	<ul style="list-style-type: none"> UnitedHealthcare Medicare Advantage is retiring the “Outpatient Hospital Inappropriate Primary Diagnosis Code Policy Facility”. Coding guidelines from this policy will be included in the new Diagnosis Code Requirement Policy, Professional and Facility.



Published reimbursement policies are intended to ensure reimbursement based on the code or codes that correctly describe the health care services provided. UnitedHealthcare 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.

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 Medicare Advantage Reimbursement Policies is available UHCprovider.com > Policies and Protocols > Medicare-Advantage-Policies > [Medicare-Advantage-Reimbursement Policies](#).