

*UnitedHealthcare Community Plan*Reimbursement Policy Update Bulletin: December 2022

New				
Policy Title	State(s)	Policy Summary	Effective Date	
Outpatient Rehabilitation Therapy Services Policy Facility	California Washington Florida Hawaii Kansas Maryland Massachusetts Michigan Minnesota Missouri New Jersey New York Ohio Pennsylvania Rhode Island South Carolina Virginia Washington Wisconsin	 The new Outpatient Rehabilitation Therapy Services Policy, Facility will be effective for dates of service on and after 3/1/2023. In accordance with CMS guidelines, the policy will require the following: Outpatient physical therapy (PT), outpatient occupational therapy (OT) and outpatient speech language pathology therapy (ST) must be submitted under the appropriate revenue code. PT/OT/ST services provided must be submitted with the appropriate service code and must include one of the appropriate therapy modifiers, GN, GO or GP which indicate the specific therapy plan of care. Always therapy codes are required to be submitted with the appropriate therapy revenue code and include the appropriate therapy modifier. 	March 01,2023	



Revised					
Policy Title	State(s)	Summary of Changes	Effective Date		
Mohs Micrographic Surgery Policy, Professional	California Washington Florida Hawaii Kansas Louisiana Maryland Massachusetts Michigan Minnesota Missouri New Jersey New York North Carolina Ohio Pennsylvania Rhode Island South Carolina Virginia Washington Wisconsin	 UnitedHealthcare has revised the Mohs Micrographic Surgery Policy as follows: The multiple procedure reduction will no longer apply when a Mohs surgical procedure and a separate procedure to repair the wound are performed on the same date of service by different provider primary specialties (as identified by UnitedHealthcare) within the same medical group. Multiple procedure reductions will continue to apply to the same provider performing multiple procedures on the same date of service. 	November 1, 2022		

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 Community Plan Reimbursement Policies is available **UHCprovider.com** > Policies and Protocols > Community Plan Policies > Reimbursement Policies for Community Plan.