



## **New York Payment Policy Change Notice – CPT® codes 87631, 87632 and 87633 Discontinued for Reimbursement**

Effective June 1, 2019, our payment policies for UnitedHealthcare Community Plan for Families (Medicaid), UnitedHealthcare Community Plan Wellness4Me (HARP), and Essential Plan (EP) have been revised to no longer reimburse the following CPT codes:

- **87631:** Infectious agent detection by nucleic acid (DNA or RNA); respiratory virus 3-5 targets
- **87632:** Infectious agent detection by nucleic acid (DNA or RNA); respiratory virus
- **87633:** Infectious agent detection by nucleic acid (DNA or RNA); respiratory virus

### **What We're Asking You to Do**

Please use your clinical judgement when assessing the need for immunoassays after taking a patient's medical history and completing a physical examination. If a confirmatory test is needed, consider ordering a test with CPT code **87804 Influenza A and B Antigen, Immunoassay**, which is covered.

To view the reimbursement policies, go to **UHCprovider.com** > Menu > Policies and Protocols > Community Plan Policies > Reimbursement Policies for Community Plan > **Professional Non-Covered Codes Reimbursement Policy**.

### **We're Here to Help**

If you have questions about this change, please call your Network Representative or Provider Services at **888-362-3368**. Thank you.

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