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 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 CMS 1500 forms and, when specified, to those 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 intended to serve only as a general reference resource regarding UnitedHealthcare’s reimbursement policy for the services described and is not intended to address every aspect of a reimbursement situation. Further, the policy does not address all issues related to reimbursement for health care services provided to UnitedHealthcare 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 due to programming or other constraints; however, UnitedHealthcare strives to minimize these variations. UnitedHealthcare 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.

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Application

This reimbursement policy applies to services reported using the 1500 Health Insurance Claim Form (a/k/a CMS-1500) or its electronic equivalent or its successor form. This policy applies to all products and all network and non-network physicians and other qualified health care professionals, including, but not limited to, non-network authorized and percent of charge contract physicians and other qualified health care professionals.

Policy

Overview

After hours or weekend care (CPT®) codes represent services provided, when an individual physician or other health care professional is required to render the services outside of regular posted office hours to treat a patient’s urgent illness or condition. This policy outlines when after hours or weekend care codes are considered for separate reimbursement.

Reimbursement Guidelines

The Centers for Medicare and Medicaid Services (CMS) considers reimbursement for Current Procedural Terminology (CPT®) codes 99050, 99051, 99053, 99056, 99058 and 99060 to be bundled into the payment for other services provided on the same day.

CPT Codes 99053, 99056, 99058 or 99060

Consistent with CMS, UnitedHealthcare will not separately reimburse CPT codes 99053, 99056, 99058 or 99060.

CPT Codes 99050 and 99051

Although CMS considers CPT codes 99050 and 99051 to be bundled into the payment for other services provided on the same day, UnitedHealthcare will provide additional compensation to participating primary care providers for seeing patients in situations that would otherwise require more costly urgent care or emergency room settings by reimbursing CPT code 99050 in addition to basic services and CPT code 99051 in addition to acute care services (not preventive...
UnitedHealthcare will reimburse after hours CPT codes 99050 and 99051 to participating primary care providers when reported in one of the following CMS non-facility place of service (POS) designations only:

- School (CMS POS 03)
- Indian Health Service Free-standing Facility (CMS POS 5)
- Tribal 638 Free-Standing Facility (CMS POS 7)
- Office (CMS POS 11)
- Independent Clinic (CMS POS 49)
- Federally Qualified Health Center (CMS POS 50)
- State or Local Public Health Clinic (CMS POS 71)
- Rural Health Clinic (CMS POS 72)

UnitedHealthcare will reimburse the following participating primary care providers for CPT codes 99050 and 99051:

- Adolescent Medicine, Pediatric-Adolescent, Pediatrics
- Family Nurse Practitioner, Nurse Practitioner, Pediatric Nurse Practitioner, Advanced Registered Nurse Practitioner
- Family Practice
- General Practice
- Geriatric Medicine
- Gynecology, Obstetrics & Gynecology, Obstetrics
- Internal Medicine
- Certified Nurse Midwife

Questions and Answers

1. **Q:** Why doesn't UnitedHealthcare provide reimbursement for CPT codes 99053, 99056, 99058 or 99060?
   
   **A:** The After Hours and Weekend Care policy is intended to reimburse participating primary care providers for services that are outside their regular posted business hours as an alternative to more costly emergency room or urgent care center services. Reimbursement for CPT codes 99053, 99056, 99058 or 99060 would not accomplish this purpose and are not reimbursed by CMS.

2. **Q:** When will UnitedHealthcare provide reimbursement for CPT code 99050?
   
   **A:** UnitedHealthcare will provide reimbursement for CPT code 99050 during times other than regularly scheduled office hours, or days when the office is normally closed (e.g., holidays, Saturday or Sunday), in addition to basic service.

3. **Q:** When will UnitedHealthcare provide reimbursement for CPT code 99051?
   
   **A:** UnitedHealthcare will provide reimbursement for CPT code 99051 during regularly scheduled evening, weekend, or holiday office hours, in addition to acute care services (not preventive medicine services).

Codes

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
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<tbody>
<tr>
<td>99050</td>
<td>Services provided in the office at times other than regularly scheduled office hours, or days when the office is normally closed (e.g., holidays, Saturday or Sunday), in addition to basic service</td>
</tr>
<tr>
<td>99051</td>
<td>Service(s) provided in the office during regularly scheduled evening, weekend, or holiday office hours, in addition to basic service</td>
</tr>
<tr>
<td>99053</td>
<td>Service(s) provided between 10:00 PM and 8:00 AM at 24-hour facility, in addition to basic service</td>
</tr>
<tr>
<td>99056</td>
<td>Service(s) typically provided in the office, provided out of the office at request of patient, in addition to basic service</td>
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Reimbursement Policy

Policy Number 2019R0044B

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<thead>
<tr>
<th>Service Number</th>
<th>Description</th>
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<tbody>
<tr>
<td>99058</td>
<td>Service(s) provided on an emergency basis in the office, which disrupts other scheduled office services, in addition to basic service</td>
</tr>
<tr>
<td>99060</td>
<td>Service(s) provided on an emergency basis, out of the office, which disrupts other scheduled office services, in addition to basic service</td>
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Resources


Centers for Medicare and Medicaid Services, National Correct Coding Initiative (NCCI) publications

History

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<thead>
<tr>
<th>Date</th>
<th>Notes</th>
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| 8/23/2019     | Policy Version Change  
Reimbursement Guidelines. Updated verbiage. |
| 3/1/2019      | Annual Anniversary Date and Version Change  
Title section: Removed Annual Approval information & moved policy # to the header  
Application section: Removed Community and State and Medicare and Retirement information  
History Section: Entries prior to 1/1/2017 archived |
| 8/18/2018     | Policy Change: Added ‘Professional’ to the policy title, Reimbursement Guideline Section updated  
Questions and Answers Section: Q&A #’s 2 and 3 added |
Policy Approval Date Change  
Policy Change: Logo, Preamble and Footer updated  
History Section: Entries prior to 1/1/2016 Archived |
| 3/8/2017      | Policy Approval Date Change (No new version) |
| 1/1/2017 – 3/13/2018 | Annual Policy Version Change  
History Section: Entries prior to 1/1/2015 archived |