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 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. Accordingly, UnitedHealthcare 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 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 UB-04 claim form or its electronic equivalent or its successor form. This policy applies to all products and all network and non-network facilities, including, but not limited to, non-network authorized and percent of charge contract facilities.

Policy
Overview
This policy describes how UnitedHealthcare reimburses non-patient laboratory services when submitted with Type of Bill (TOB) 014X for providers that are not reimbursed according to a fee schedule.

Reimbursement Guidelines
CMS guidance requires laboratory tests for non-patient laboratory specimens to be billed on a 014X claim, including those tests performed by Critical Access Hospitals (CAHs). CMS pays for TOB 014X claims according to the clinical laboratory fee schedule, at the lesser of the actual charge, the fee schedule amount, or the National Limitation Amount (NLA), including CAHs and MD Waiver hospitals.

UnitedHealthcare will deny claims for Non-Patient Laboratory Specimen tests submitted on a TOB 014X by facilities that are not paid for those services according to a fee schedule.
Definitions

Non-Patient Laboratory Specimen
A specimen that is submitted for analysis to a hospital and the patient is neither an inpatient nor an outpatient of the hospital and is not physically present at the hospital.

Questions and Answers

1. Q: If TOB 014X is not reimbursable, can I submit the lab charges for a Non-Patient Laboratory Specimen under TOB 013X?
   A: No, providers may only submit TOB 013X for outpatient hospital services, not non-patient laboratory services.

2. Q: Is it appropriate to use TOB 012X to bill laboratory services done as an outpatient?
   A: No, laboratory services are not ancillary services and should not be billed under TOB 012X.

Resources

Centers for Medicare and Medicaid Services, CMS Manual System and other CMS publications and services
American Medical Association, Current Procedural Terminology (CPT®), and associated publications and services
Centers for Medicare and Medicaid Services, Healthcare Common Procedure Coding System, HCPCS Release and Code Sets

History

5/1/2019  Policy Approval Date Change (No New Version)
10/1/2018  Policy implemented by UnitedHealthcare Employer & Individual
5/9/2018  Policy approved by the Reimbursement Policy Oversight Committee