

## Nonphysician Health Care Professionals Billing Evaluation and Management Codes Policy, Professional

### **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. 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 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**

This policy describes reimbursement for Evaluation and Management (E/M) services (99201–99499) reported by nonphysician health care professionals.

#### **Reimbursement Guidelines**

The Current Procedural Terminology (CPT®) book has specific guidelines that give the following instruction: "Select the name of the procedure or service that accurately identifies the service performed."

The National Correct Coding Initiative Policy Manual gives the following instruction: "Procedures should be reported with the most comprehensive CPT code that describes the services performed."

CPT guidance instructs that E/M (CPT codes 99201-99499) should only be reported by Physicians or other qualified health care professionals. In accordance with CMS guidelines, the only qualified health care professionals that may report E/M services are nurse practitioners (NP), clinical nurse specialists (CNS), certified nurse midwives (CNM) and Physician assistants (PA), none of which are considered nonphysician health care professionals for purposes of this policy.

UnitedHealthcare will not reimburse E/M services (CPT codes 99201-99499) when reported by nonphysician health care professionals reporting under their own individual or group tax identification number (TIN). For purposes of this policy, the specialties that are considered nonphysician health care professionals are listed in the attachment section of the policy.

There is a wide variety of CPT and Healthcare Common Procedure Coding System (HCPCS) codes that specifically and accurately identify and describe the services and procedures performed by non-physician health care professionals.

For more complete information regarding reporting E/M services from physical or occupational therapists refer to the Physical Medicine & Rehabilitation: PT, OT and Evaluation & Management Policy.


### Definitions

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| <b>Physician</b> | A Doctor of Medicine (MD) or Doctor of Osteopathy (DO) |
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### Questions and Answers

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| <b>1</b> | <p>Q: Is it appropriate for a Registered Dietitian performing Medical Nutrition Therapy to report this service with CPT code 99401?</p> <p>A: No. CPT code 99401 is an E/M code which Registered Dietitians should not use to report services because they are nonphysician health care professionals. There are more accurate codes that identify and describe Medical Nutrition Therapy to be reported by Registered Dietitians, such as, CPT 97802.</p> |
| <b>2</b> | <p>Q: Is it appropriate for home health specialties performing a service in a patient's residence to report 99348?</p> <p>A: No. 99348 is an E/M code which home health specialties should not use to report services because they are nonphysician health care professionals. There are more specific CPT and HCPCS codes that accurately identify and describe the services and procedures performed by home health specialties.</p>                     |
| <b>3</b> | <p>Q: Is it appropriate for an Audiologist performing an evaluation to report this service with CPT code 99213?</p> <p>A: No. CPT code 99213 is an E/M code, which an Audiologist should not use to report services because they are nonphysician health care professionals. There are more accurate codes that describe evaluation services performed by an Audiologist (e.g. CPT code 92620).</p>  |

### Attachments

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| <br><br><b>Nonphysician Health Care Professionals</b> | A list of Nonphysician Health Care Professionals Not Allowed to Report E/M Services |
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### Resources

- 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
- Centers for Medicare and Medicaid Services, National Correct Coding Initiative (NCCI) publications
- Centers for Medicare and Medicaid Services, CMS Manual System and other CMS publications and services

| <b>History</b>                |   |
|-------------------------------|---|
| <b>10/4/2019</b>              | Annual Anniversary Date and Version Change<br>Title section: Removed Annual Approval information & moved policy # to the header<br>History Section: Entries prior to 1/1/2017 archived          |
| <b>11/18/2018</b>             | Policy Version Change<br>Policy Approval Date Change<br>Attachment updated<br>Professional added to the title   |
| <b>1/1/2018 – 11/17/2018</b>  | Annual Policy Version Change<br>Reimbursement Guidelines Section: Verbiage change<br>Attachments: Nonphysician Health Care Professionals<br>History Section: Entries prior to 1/1/2016 archived |
| <b>11/8/2017</b>              | Policy Approval Date Change (no new version)  |
| <b>6/20/2017 – 12/31/2017</b> | Attachment, Logo, Preamble and Footer have been updated. No New Policy Version.   |
| <b>1/1/2017</b>               | Annual Policy Version Change<br>History Section: Entries prior to 1/1/2015 archived   |