

Outpatient From-to Date Policy, Facility

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.

**CPT Copyright American Medical Association. All rights reserved. CPT® is a registered trademark of the American Medical Association.*

Application
<p>This reimbursement policy applies to services reported using the UB04 Claim Form, the 837i facility transaction, any 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.</p> <p>United Healthcare Commercial This Reimbursement Policy applies to all UnitedHealthcare Commercial benefit plans.</p> <p>UnitedHealthcare Individual Exchange This Reimbursement Policy applies to all Individual Exchange benefit plans.</p>

Policy
Overview
<p>The policy describes how United Healthcare reimburses outpatient UB04 claims submitted with a from and to date. It also addresses the requirement to report valid dates of service on each claim line, which must fall within the from and to date range.</p>
Reimbursement Guidelines
<p>In accordance with Centers for Medicare and Medicaid Services (CMS) and National Uniform Billing Committee (NUBC), a valid date of service must be reported on each claim line, as it represents the date the outpatient service</p>

was provided. There must be a single line-item date of service reported for every revenue code, procedure code or drug code on all outpatient claims.

In addition, each service date (MMDDYY) must fall within the from and to date of service on the outpatient facility claim.

Questions and Answers

1	<p>Q: What field on the UB-04 electronic claim form is used for the “From” and “To” date?</p> <p>A: Field Line 6 - Statement Covers Period (From-Through) on the UB-04 electronic claim form should be used to enter the “From” and “To” date.</p>
2	<p>Q: What happens if the date of service submitted for a procedure is out of the “From” and “To” date calendar range?</p> <p>A: The claim will be denied. The provider can resubmit the claim with an appropriate date of service.</p>

Resources

Centers for Medicare and Medicaid Services, CMS Manual System and other CMS publications and services
 National Uniform Billing Committee (NUBC)

History

8/4/2025	<p>Policy Version Change History Section: Entries prior to 8/4/2023 archived</p>
7/1/2024	<p>Template Update</p> <ul style="list-style-type: none"> • Transferred content to shared policy template that applies to both UnitedHealthcare Commercial and Individual Exchange benefit plans. • Updated Application section to indicate this Reimbursement Policy applies to: <ul style="list-style-type: none"> ○ All UnitedHealthcare Commercial benefit plans ○ All Individual Exchange benefit plans <p>History Section: Entries prior to 7/1/2022 archived</p>
11/1/2021	<p>Policy implemented by UnitedHealthcare Employer & Individual</p>
7/20/2021	<p>Policy approved by the Reimbursement Policy Oversight Committee</p>