

UnitedHealthcare Value & Balance Exchange Reimbursement Policy Update Bulletin: October 2021

New		
Policy Title	Effective Date	Policy Summary
Services by Unlicensed Health Care Professionals Policy, Professional*	January 1 st , 2022	<ul style="list-style-type: none"> Effective for claims with dates of service on or after January 1, 2022, consistent with CMS, UnitedHealthcare Value & Balance Exchange will not reimburse services rendered by unlicensed medical students as identified by the Healthcare Provider Taxonomy Code reported on the claim. Additionally, claims for services by residents and interns will be considered for reimbursement when billed with the appropriate modifiers to indicate covered services were rendered by a resident and certain interns, as defined by CMS, under the direction of a teaching physician or without the presence of a teaching physician under the primary care exception.
Revised		
Policy Title	Effective Date	Summary of Changes
Telehealth/ Telemedicine Policy, Professional*	January 1 st , 2022	<ul style="list-style-type: none"> This policy will have its name changed to “Telehealth/Virtual Health.” In addition, the term virtual health will be added to the policy to encompass all synchronous, asynchronous, and remote physiologic monitoring (RPM) care between health care professionals and patients. This includes telehealth/telemedicine, communication technology-based services (CTBS), e-visits, virtual check-ins, and interprofessional telephone/internet/electronic health record consultations.
Modifiers 96/97 Policy, Professional and Facility - Exchange	January 1 st , 2022	<ul style="list-style-type: none"> Effective for professional and facility claims with dates of service on or after January 1st 2022, a new reimbursement policy is being created for the use of Modifiers 96 and 97. The modifiers will be utilized to support the differentiation between Habilitative and Rehabilitative Services. Providers should bill with the appropriate CPT/HCPC Code(s) and append Modifier 96 to indicate that the service is Habilitative or append Modifier 97 to indicate that the service is Rehabilitative. Claim lines for CPT/HCPCS codes that require the use of modifiers 96 or 97 that are billed without the modifiers will be rejected as incorrect coding

Note: The absence of a policy does not automatically indicate or imply coverage. As always, coverage for a health service must be determined in accordance with the member’s benefit plan and any applicable federal or state regulatory requirements.



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