



New Claim Test Code Submission Requirement Coming for Free Standing and Hospital Lab Care Providers

Effective October 1, 2020, all applicable clinical and pathology laboratory claims **must** contain your **laboratory's unique test** code. This change affects all UnitedHealthcare Commercial, Medicare Advantage and most UnitedHealthcare Community Plan networks. When a laboratory CPT® code or Healthcare Common Procedure Coding System (HCPCS) code is populated, the corresponding test code will be required, or **we'll** deny the claim.

Note: A laboratory test code is your specific code that you would use to order the test from your laboratory. This test code will be required for most laboratory tests that are billed.

Placing the test code on your laboratory services claim **doesn't** necessarily guarantee that UnitedHealthcare will pay the claim. **Payment for covered services is based on the member's** eligibility on the date of the service, any claim processing requirements and the terms of your Participation Agreement.

Why We're Doing This

We're committed to working with members and care providers like you to support improved population health outcomes, positive care experiences and affordable products. An increasingly important part of this commitment includes coordinating coverage guidelines and policies for new and emerging technologies, including lab testing.

We're Here to Help

For additional details regarding this requirement and the precise placement of the test code on laboratory claims, please visit UHCprovider.com/testregistry.

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