

## Pediatric and Neonatal Critical and Intensive Care Services 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 Community Plan reimbursement policies uses 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 Community Plan's reimbursement policy for the services described and is not intended to address every aspect of a reimbursement situation. Accordingly, UnitedHealthcare Community Plan 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 Community Plan enrollees.*

**Other factors affecting reimbursement may supplement, modify or, in some cases, supersede this policy. These factors include, but are not limited to: federal &/or state regulatory requirements, 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 Community Plan due to programming or other constraints; however, UnitedHealthcare Community Plan strives to minimize these variations.*

*UnitedHealthcare Community Plan 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 UnitedHealthcare Community Plan Medicaid products.**

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 addresses the reporting of pediatric and neonatal critical and intensive care services, Current Procedural Terminology (CPT®) codes 99468-99476 and 99477-99480, based on instruction from the American Medical Association (AMA) CPT book.

#### Reimbursement Guidelines

CPT instruction gives specific direction for the appropriate reporting of pediatric and neonatal critical and intensive care codes 99468-99476 and 99477-99480. This direction applies to situations when pediatric and neonatal critical and/or intensive care services are performed for the same patient, on the same day, with certain procedure services. CPT direction specifies what codes to report and what codes are considered inclusive in situations where multiple services are performed for the pediatric or neonatal patient requiring critical and/or intensive care. CPT applies these reporting instructions to physicians and/or Other Qualified Health Care Professionals in the same group.

UnitedHealthcare follows the AMA guidelines with respect to the reporting of pediatric and neonatal critical and intensive care codes 99468-99476 and 99477-99480. When services considered inclusive are reported on the same day with a pediatric and neonatal critical or intensive care code by the Same Group Physician and/or Other Qualified Health Care Professional, those services will be considered for separate reimbursement or bundled into 99468-99476 and 99477-99480 in accordance with those edits outlined in the following link:

[National Correct Coding Initiative Edits | CMS](#)

### Modifiers

CPT direction indicates that certain procedure services are included in, and not reported separately from, pediatric and neonatal critical and intensive care services. CPT does not give direction indicating where it would be appropriate to allow for a modifier override when pediatric and neonatal critical and intensive care codes are reported with a specified procedure code on the same day for the same patient by the Same Group Physician and/or Other Qualified Health Care Professional. In this circumstance UnitedHealthcare will follow the CMS National Correct Coding Initiative (NCCI) to determine if a modifier override could be allowed if appropriate.

Modifiers			
59	XE	XS	XU

### State Exceptions

<b>Medicare Products</b>	UnitedHealthcare Community Plan Medicare products are excluded from this policy.
<b>Idaho</b>	Idaho IMPlus is excluded from this policy
<b>Indiana</b>	Indiana MLTSS PathWays is excluded from this policy

### Definitions

<b>Same Group Physician and/or Other Qualified Health Care Professional</b>	All physicians and/or Other Qualified Health Care Professionals of the same group reporting the same Federal Tax Identification number.
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### Questions and Answers

1	<p><b>Q:</b> If pediatric and neonatal critical and/or intensive care services are performed for the same patient, on the same day, as other evaluation and management (E/M) services, are both of those services reimbursable?</p> <p><b>A:</b> Pediatric and neonatal critical and/or intensive care services may be subject to additional UnitedHealthcare Community Plan reimbursement policies. Refer to UnitedHealthcare Community Plan's Same Day/Same Service policy for further details regarding reimbursement of E/M codes billed on the same day by physicians and/or Other Qualified Health Care Professionals in the same group practice who are of the same specialty, and UnitedHealthcare Community Plan's Rebundling policy for information regarding reimbursement of E/M codes billed on the same day by the same individual physician and/or Other Qualified Health Care Professional.</p>
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### Resources

Individual state Medicaid contracts, regulations, manuals & fee schedules

American Medical Association, *Current Procedural Terminology (CPT®)* and associated publications and services

Centers for Medicare and Medicaid Services, National Correct Coding Initiative (NCCI) publications

<b>History</b>	
<b>8/1/2025</b>	Policy Overview and Version Updated
<b>7/23/2025</b>	Policy Overview and Version Updated
<b>5/7/2025</b>	Policy Version Change State Exceptions: Idaho added
<b>6/21/2024</b>	Policy Version Change State Exceptions: Indiana added
<b>1/1/2024</b>	Policy Version Change Template updated Policy Section: Updated code ranges History Section: Entries prior to 1/1/2022 archived
<b>3/1/2015</b>	Policy implemented by UnitedHealthcare Community Plan
<b>8/13/2014</b>	Policy approved by the Payment Policy Oversight Committee