

UnitedHealthcare Oxford Policy Update Bulletin: January 2023

Access a policy listed below for complete details on the latest updates. A comprehensive summary of changes is provided at the bottom of every policy document for your reference. To view a detailed version of this bulletin, click [here](#).

Take Note

Annual CPT/HCPCS Code Updates

Beginning Jan. 1, 2023, all applicable Clinical and Administrative Policies will be updated to reflect the 2023 Current Procedural Terminology (CPT®) and Healthcare Common Procedure Coding System (HCPCS) code additions, revisions, and deletions. Refer to the following sources for information on the code updates:

- [American Medical Association. Current Procedural Terminology: CPT®](#)
- [Centers for Medicare & Medicaid Services. Healthcare Common Procedure Coding System: HCPCS Level II](#)

For the list of impacted policies and corresponding details, click [here](#).

Prior Authorization Requirement Changes

Effective Jan. 1, 2023, the information pertaining to prior authorization requirements will be removed from UnitedHealthcare Oxford Clinical and Administrative Policies. Click [here](#) for a complete list of impacted policies.

The new *Oxford Health Plans Prior Authorization Requirements* document, available at [UHCprovider.com > Advance Notification and Clinical Submission Requirements](#), will now provide a comprehensive list of all procedure codes requiring prior authorization for our commercial Oxford contracted network providers. Refer to the UnitedHealthcare news article titled [Oxford prior authorization requirement changes](#) for additional information.

Clinical Policy Updates

Policy Title	Status	Effective Date
Abnormal Uterine Bleeding and Uterine Fibroids	Revised	Mar. 1, 2023
Airway Clearance Devices	Revised	Mar. 1, 2023
Apheresis	Updated	Mar. 1, 2023
Bariatric Surgery	Revised	Mar. 1, 2023
Clinical Trials	Updated	Jan. 1, 2023
Continuous Glucose Monitoring and Insulin Delivery for Managing Diabetes	Revised	Feb. 1, 2023
Electric Tumor Treatment Field Therapy	Updated	Mar. 1, 2023
Electrical and Ultrasound Bone Growth Stimulators	Updated	Mar. 1, 2023
Gender Dysphoria Treatment	Revised	Jan. 1, 2023
Genetic Testing for Hereditary Cancer	Revised	Mar. 1, 2023
Genetic Testing for Neuromuscular Disorders	Revised	Mar. 1, 2023
Habilitative Services and Outpatient Rehabilitation Therapy	New	Feb. 1, 2023
Home Health, Skilled and Custodial Care Services	Revised	Mar. 1, 2023
Lithotripsy for Salivary Stones	Updated	Mar. 1, 2023
Minimally Invasive Procedures for Gastroesophageal for Reflux Disease (GERD)	Revised	Mar. 1, 2023

Policy Title	Status	Effective Date
Mobility Devices, Options and Accessories	Revised	Mar. 1, 2023
Molecular Oncology Testing for Cancer Diagnosis, Prognosis, and Treatment Decisions	Updated	Jan. 1, 2023
Negative Pressure Wound Therapy	Revised	Mar. 1, 2023
Neurophysiologic Testing and Monitoring	Revised	Mar. 1, 2023
Obstructive and Central Sleep Apnea Treatment	Revised	Mar. 1, 2023
Omnibus Codes	Revised	Apr. 1, 2023
Pediatric Outpatient Intensive Feeding Programs	Replaced	Feb. 1, 2023
Percutaneous Vertebroplasty and Kyphoplasty	Updated	Mar. 1, 2023
Pharmacogenetic Panel Testing	Revised	Mar. 1, 2023
Pharmacogenetic Testing	Updated	Jan. 1, 2023
Plagiocephaly and Craniosynostosis Treatment	Updated	Mar. 1, 2023
Power Mobility Devices	Replaced	Mar. 1, 2023
Preventive Care Services	Revised	Jan. 1, 2023
Radiopharmaceuticals and Contrast Media	Updated	Jan. 1, 2023
Routine Foot Care	Revised	Feb. 1, 2023
Sacral Nerve Stimulation for Urinary and Fecal Indications	New	Mar. 1, 2023
Skilled Care and Custodial Care Services	Replaced	Mar. 1, 2023
Skin and Soft Tissue Substitutes	Revised	Mar. 1, 2023
Surgery of the Elbow	Updated	Mar. 1, 2023
Surgery of the Shoulder	Revised	Mar. 1, 2023
Temporomandibular Joint Disorders	Revised	Mar. 1, 2023
Total Artificial Disc Replacement for the Spine	Revised	Mar. 1, 2023
Visual Information Processing Evaluation and Orthoptic and Vision Therapy	Updated	Mar. 1, 2023
Vitamin D Testing	Updated	Mar. 1, 2023
Wheelchair Options and Accessories	Replaced	Mar. 1, 2023
Wheelchair Seating	Replaced	Mar. 1, 2023
Whole Exome and Whole Genome Sequencing	Revised	Mar. 1, 2023

Administrative Policy Updates

Policy Title	Status	Effective Date
Dialysis Services	Retired	Jan. 1, 2023
Durable Medical Equipment, Orthotics, Medical Supplies and Repairs/Replacements	Revised	Mar. 1, 2023
Prior Authorization Exemptions for Outpatient Services	Retired	Jan. 1, 2023

General Information

The inclusion of a health service (e.g., test, drug, device or procedure) in this bulletin indicates only that UnitedHealthcare Oxford® is adopting a new policy and/or updated, revised, replaced or retired an existing policy; it does not imply that UnitedHealthcare Oxford® provides coverage for the health service. Note that most benefit plan documents exclude from benefit coverage health services identified as investigational or unproven/not medically necessary. Physicians and other health care professionals may not seek or collect payment from a member for services not covered by the applicable benefit plan unless first obtaining the member's written consent, acknowledging that the service is not covered by the benefit plan and that they will be billed directly for the service.

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. Additionally, UnitedHealthcare Oxford® reserves the right to review the clinical evidence supporting the safety and effectiveness of a medical technology prior to rendering a coverage determination.

UnitedHealthcare Oxford® respects the expertise of the physicians, health care professionals, and their staff who participate in our network. Our goal is to support you and your patients in making the most informed decisions regarding the choice of quality and cost-effective care, and to support practice staff with a simple and predictable administrative experience. The Policy Update Bulletin was developed to share important information regarding UnitedHealthcare Oxford® Clinical, Administrative, and Reimbursement Policy updates. When information in this bulletin conflicts with applicable state and/or federal law, UnitedHealthcare Oxford® follows such applicable federal and/or state law.

Policy Update Classifications

New

New clinical coverage criteria have been adopted for a health service (e.g., test, drug, device or procedure)

Updated

An existing policy has been reviewed and changes have not been made to the clinical coverage criteria; however, items such as the clinical evidence, FDA information, and/or list(s) of applicable codes may have been updated

Revised

An existing policy has been reviewed and revisions have been made to the clinical coverage criteria

Replaced

An existing policy has been replaced with a new or different policy

Retired

The health service(s) addressed in the policy are no longer being managed or are considered to be proven/medically necessary and are therefore not excluded as unproven/not medically necessary services, unless coverage guidelines or criteria are otherwise documented in another policy



The complete library of UnitedHealthcare Oxford® Clinical and Administrative Policies is available at UHCprovider.com > Policies and Protocols > Commercial Policies > [UnitedHealthcare Oxford Clinical and Administrative Policies](#).