

Participating Provider Laboratory and Pathology Protocol

Frequently Asked Questions

Overview

Originally implemented on Sept. 1, 2016 for UnitedHealthcare commercial and Exchange members with groups located in Delaware, New York, Oklahoma, Pennsylvania and Texas, our Participating Provider Laboratory and Pathology Protocol will also apply to UnitedHealthcare commercial members in Connecticut and Maryland, effective **June 1, 2019**.

If you're a participating care provider in Connecticut, Delaware, Maryland, New York, Oklahoma, Pennsylvania or Texas, this protocol requires you to inform UnitedHealthcare commercial plan members when referring them to or including an out-of-network care provider in that member's care plan.

For Maryland Only: The Participating Provider Laboratory and Pathology Protocol doesn't apply to claims for services arising under plans underwritten by MAMSI Life and Health Insurance Company, MD-Individual Practice Association, Inc. or Optimum Choice, Inc. Please refer to the Care Provider Administrative Guide, for more information for these plans.

Key Points

This protocol was originally implemented on Sept. 1, 2016 for UnitedHealthcare commercial and Exchange members with groups located in Delaware, New York, Oklahoma, Pennsylvania and Texas.

Starting June 1, 2019, this protocol will also apply to UnitedHealthcare commercial members in Connecticut and Maryland.

You must inform members when referring them to or involving an out-of-network laboratory or pathology care provider in the member's care.

Frequently Asked Questions

What do I need to do to comply with the Participating Provider Laboratory and Pathology Protocol?

Before recommending, involving or referring a member to an out-of-network laboratory or pathologist, you need to have a discussion with the member where you:

- Discuss the options and financial impact with the member. See question #9
- Have the member complete and sign the Laboratory & Pathology Services Consent Form, which you can find at UHCprovider.com > Policies and Protocols > Protocols > Laboratory & Pathology Services Consent Form.
- Coordinate care as directed by the member on the consent form.

In which situations do these requirements apply?

The requirements apply when:

- Specimens collected in your office are sent to an out-of-network laboratory or pathologist for processing.
- You provide the member with a prescription, requisition or other form to obtain laboratory or pathology services outside your office.

Are there any exclusions to this protocol?

Yes. The following are excluded from this protocol: Services authorized by us or a payer, or those provided in emergency situations.

Why did UnitedHealthcare make this change?

Members who aren't aware that they're using an out-of-network care provider for their services may receive surprise bills. By having the member fill out the disclosure form, you help make sure they're aware of the health care choices they're making. This can help them avoid the hardships that can come from incurring unexpected costs.

What if I collect specimens in my office and send them out to an in-network laboratory/pathologist for processing?

If you decide to collect specimens and use an in-network laboratory or pathologist, you don't need to have the member fill out the Laboratory & Pathology Services Consent Form.

Can I use a network hospital with a freestanding or hospital-based network laboratory?

Yes, you can use any network hospital with a freestanding or hospital-based network laboratory.

Process Questions

How should I document the member's decision to use out-of-network benefits?

If you want to use an out-of-network laboratory or pathologist in a plan of care for a UnitedHealthcare member in Connecticut, Delaware, Maryland, New York, Oklahoma, Pennsylvania or Texas, please follow these steps:

- 1) Before you refer to or include an out-of-network laboratory or pathologist in the member's care, discuss both the in-network and out-of-network options with the member and give them a copy of UnitedHealthcare Laboratory & Pathology Services Consent Form.
- 2) After the discussion, have the member complete the Laboratory & Pathology Services Consent Form, indicating whether they wish to use an in-network or out-of-network laboratory or pathologist.
- 3) Keep a standard or electronic copy of the consent form in the member's medical record – we may request a copy in the future. If requested, you'll need to send the Laboratory & Pathology Services Consent Form to us within 15 days of our request.

We require a separate Laboratory & Pathology Services Consent Form for each referral or service. The form is only valid for 15 days from the date of signature, unless the "Ongoing Monitoring" box is checked, in which case the form is valid for one year from the date of signature.

What if I don't send you the completed consent form when you request it?

If you don't send us a copy of the completed and signed consent form, you'll be considered non-compliant and subject to the following:

- We'll reverse the Evaluation & Management (E&M) code from the office visit and deny the claim for non-compliance with this protocol.
- If we've made any previous payments for the associated E&M service, that amount will be subject to recovery. In these instances, per your Agreement with us, you can't balance bill the member.

What are the financial implications if a member uses an out-of-network care provider for laboratory or pathology services?

If a member opts to use an out-of-network laboratory or pathologist, the financial implications will be as follows:

- Members with out-of-network benefits: We'll pay out-of-network laboratory and pathology claims at the out-of-network benefit level and will apply the appropriate cost shares and deductibles. Additionally, the member may be responsible to the out-of-network laboratory or pathologist for any amount above the amount that we pay, as determined by the member's out-of-network benefit.
- Members without out-of-network benefits: We won't pay out-of-network laboratory and pathology claims since the member has no coverage for services provided by out-of-network care providers. This means the member will be responsible for the entire cost of the service(s).

Will the standard appeals process apply to these claims?

Yes. You can appeal any claim determination by following our standard appeals process in the UnitedHealthcare Care Provider Administrative Guide located at UHCprovider.com/guides.

Finding a Network Care Provider

Where can I find a list of participating laboratories?

For an all-inclusive list for your state, please refer to the Provider Directory at UHCprovider.com > FIND DR. > Search for a Provider > Medical Directory > All UnitedHealthcare Plans or call Provider Services at 877-842-3210.

Who should I contact if I don't have an account with an in-network laboratory?

If you need help contacting or setting up an account with a UnitedHealthcare network laboratory or pathologist, please call our Laboratory Services Managers:

- CT: Network Management at 860-702-6133
- DE, MD: Network Management at 877-842-3210
- NY: Catherine Schmal at 763-957-6519
- PA: Lynne Hollingsworth at 952-406-5086
- OK, TX: Heather Rice at 502-647-1403

What if there are no participating laboratories in the member's area?

If you can't find a participating laboratory or pathologist to perform the service, please call Provider Services at 877-842-3210 to confirm that the specific test is covered and verify if a network care provider is available to perform the test. If we can't find a network laboratory that meets the needs of your patient, we'll work with you to find an out-of-network location to perform the service.

Resources

Where can I get a copy of the Protocol and the Laboratory & Pathology Services Consent Form?

You can find the protocol and consent form at UHCprovider.com > Policies and Protocols > Protocols > [Participating Provider Laboratory and Pathology Protocol](#) and [Laboratory & Pathology Services Consent Form](#).

Who can I contact if I have questions?

If you have questions related to this protocol, please call Provider Services at 877-842-3210.

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