

Age-Based Codes 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 reimbursement policies may use 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’s reimbursement policy for the services described and is not intended to address every aspect of a reimbursement situation. Accordingly, UnitedHealthcare 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 enrollees. Other factors affecting reimbursement may supplement, modify or, in some cases, supersede this policy. These factors may include, but are not limited to: legislative mandates, 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 due to programming or other constraints; however, UnitedHealthcare strives to minimize these variations. UnitedHealthcare 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.

*CPT Copyright American Medical Association. All rights reserved. CPT® is a registered trademark of the American Medical Association.

Application
<p>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, 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.</p> <p>United Healthcare Commercial This Reimbursement Policy applies to all UnitedHealthcare Commercial benefit plans.</p> <p>UnitedHealthcare Individual Exchange This Reimbursement Policy applies to all Individual Exchange benefit plans.</p>

Policy
<p>Overview</p> <p>This policy addresses certain Current Procedural Terminology (CPT®) and Healthcare Common Procedure Coding System (HCPCS) codes with age limitations. Age designations are assigned based on code descriptions or on publications and guidelines from sources such as the American Medical Association (AMA), American Academy of Pediatrics (AAP), the Centers for Disease Control and Prevention (CDC) or the U.S. Food and Drug Administration (FDA).</p>
<p>Reimbursement Guidelines</p> <p>UnitedHealthcare will consider reimbursement for an age-based CPT or HCPCS code when the patient’s age is within the age designation assigned to the code. Procedure codes reported inappropriately will be considered billing errors and will not be considered for reimbursement. Providers may resubmit using the appropriate age-based code.</p>

UnitedHealthcare develops age edits for certain codes based on age designation to align with code descriptions, publications and guidelines from sources, such as those listed above, and from the entities that create the codes (CMS, AMA). These guidelines can be either definitive or interpretive.

Definitions

Definitive Source	Definitive sources contain the exact codes, modifiers or very specific instructions from the given source.
Interpretive Source	An edit source that includes guidelines; however, no exact or specific code or modifier information is listed. Therefore, an interpretation must be made as to what codes correlate to the guidelines. Additionally, an interpretation may be applied to surrounding or similar codes based on related definitively sourced edits.

Questions and Answers

1	<p>Q: CPT code 99385 is for a designated age range from 18 through 39 years of age. How does UnitedHealth Care handle a claim that submitted that code for a patient 17 years and 11 months of age on the date of service?</p> <p>A: The procedure code will be denied as the patient’s age on the date the service was rendered was outside of the age range for the code submitted. The provider may submit a corrected claim with the appropriate code.</p>
2	<p>Q: Can a provider submit a claim with the HCPCS code Q4039 for a 23-year-old patient?</p> <p>A: No. Code Q4039 is designated for a patient 10 years of age and younger. The provider may submit a corrected claim with the appropriate code.</p>

Attachments

Age-Based Codes	CPT and HCPCS code list (is not all-inclusive and is subject to change)
---------------------------------	---

Resources

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

Centers for Medicare and Medicaid Services, CMS Manual System and other CMS publications and services

Healthcare Common Procedure Coding System, HCPCS Release and Code Sets

Centers for Disease Control and Prevention (CDC)

American Academy of Pediatrics (AAP)

U.S. Food and Drug Administration (FDA)

History	
4/14/2024	Policy Version Change Policy List Change: Age-Based Codes Policy List updated
4/1/2024	Template Update <ul style="list-style-type: none"> • Transferred content to shared policy template that applies to both UnitedHealthcare Commercial and Individual Exchange benefit plans. • Updated <i>Application</i> section to indicate this Reimbursement Policy applies to: <ul style="list-style-type: none"> ○ All UnitedHealthcare Commercial benefit plans ○ All Individual Exchange benefit plans
3/31/2024	Policy Version Change Policy List Change: Age-Based Codes Policy List updated
2/4/2024	Policy Version Change Policy List Change: Age-Based Codes Policy List updated
1/1/2024	Policy Version Change Policy List Change: Age-Based Codes Policy List updated
10/8/2023	Policy Version Change Policy List Change: Age-Based Codes Policy List updated
9/10/2023	Policy Version Change Policy List Change: Age-Based Codes Policy List updated
8/1/2023	Policy implemented by UnitedHealthcare Employer & Individual
4/25/2023	Policy approved by the Payment Policy Oversight Committee