

Reimbursement Policy Updates

We regularly publish bulletins to explain the latest reimbursement policy and coverage updates for UnitedHealthcare Community Plan. You can find a list of these policies at UHCprovider.com > Menu > Policies and Protocol > Community Plan Policies > Reimbursement Policies for Community plan > (click on your state) > Reimbursement Policies.

Important New Policy Updates

Policy	Summary of Change	Plans in Scope	Effective Date
New Policy:- Discarded Drugs and Biologicals Policy, Professional and Facility	<ul style="list-style-type: none"> Payment may be made for the amount of drug or biological administered and the amount discarded up to the amount of the drug or biological s indicated on the single use vial or package. The Healthcare Common Procedure Coding System (HCPCS) code representing the amount administered should be submitted on one line. On a separate line, please submit the HCPCS code with JW appended to represent the amount discarded. The JW modifier is not permitted when the actual dose of the drug or biological administered is less than the billing unit. The units billed must correspond with the smallest dose (vial) available for purchase from the manufacturer(s) that could provide the appropriate dose for the patient, while minimizing any wastage. Modifier JW is not permitted to identify discarded amounts from a multi-dose vial (MDV). The amount of the drug administered as well as the discarded drug or biological must be documented in the patient's medical record. This policy applies to professional (1500 form) and outpatient (UB04) claims. 	UnitedHealthcare Community Plan Medicaid	March. 1, 2019

If you have questions about policy updates, please contact your Network Account Manager or Provider Advocate. Thank you.

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Note Regarding Reimbursement Policies

As with all UnitedHealthcare Community Plan policies, other factors affecting reimbursement may supplement, modify or in some cases supersede this policy. These factors include but are not limited to federal and/or state regulatory requirements, physician or other provider contracts, and/or the member's benefit coverage documents.

Unless otherwise noted as follows, these reimbursement policies apply to services reported using the CMS-1500 or its electronic equivalent, or its successor form. UnitedHealthcare Community Plan reimbursement policies do not address all issues related to reimbursement for services rendered to our members, such as the member's benefit plan documents; our medical policies; and the UnitedHealthcare Community Plan Physician, Health Care Professional, Facility and Ancillary Provider Administrative Guide. Meeting the terms of a particular reimbursement policy is not a guarantee of payment. Likewise, retirement of a reimbursement policy affects only those system edits associated with the specific policy being retired. Retirement of a reimbursement policy is not a guarantee of payment. Other applicable reimbursement and medical policies and claims edits will continue to apply.

If there's an inconsistency or conflict between the information in this Provider Notification and the posted policy, the provisions of the posted reimbursement policy prevail.

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