

COVID-19 

Summary of COVID-19 Dates by Program

Information current as of
May 29, 2020



COVID-19

The following document is intended to be a quick reference guide for the beginning and end dates of program, process or procedure changes that UnitedHealthcare has implemented as a result of COVID-19. Full details of these changes can be found at UHCprovider.com/COVID19.

Please note: Where outlined, changes apply to Individual and fully insured Group Market health plans. Implementation for self-funded customers may vary.



Prior Authorization



Program or Benefit Scenario	Health Plan	Date Details	Additional Details
Diagnostic radiology (diagnostic imaging)	Medicaid and Individual and Group Market health plans* No notice is necessary for Medicare	Not required during the national public health emergency period (through July 24, 2020)	Providers are asked to submit a notification for CPT® codes 71250, 71260, 71720 for members with a COVID-19 diagnosis or suspected diagnosis
Durable medical equipment, prosthetics, orthotics and supplies (DMEPOS)	Medicare Advantage, Medicaid and Individual and Group Market health plan members*	Prior authorizations approved before Oct. 1, 2019 Prior authorizations approved on or after Oct. 1, 2019 Equipment and supply deliveries from March 31, 2020, through May 31, 2020	- A new prior authorization is required. Providers may complete a face-to-face assessment using telehealth. - UnitedHealthcare is extending prior authorizations through Sept. 30, 2020. - Changes to notification and delivery requirements for equipment and supplies <i>* CPT® is a registered trademark of the American Medical Association.</i>
Embryo cryopreservation	Individual and Group Market fully insured health plans with infertility benefits*	From March 17, 2020, through April 30, 2020	Temporary change in embryo cryopreservation coverage for members who started an IVF cycle and were ready for retrieval and embryo transfer which was interrupted mid-cycle by COVID-19 restrictions.
Medical, behavioral health and dental services – extensions of existing prior authorizations	.	90-day extension based on original authorization date with an end date or date of service between March 24, 2020, and May 31, 2020 Authorizations on or after April 10, 2020, will not be subject to extension	For example: For a prior authorization with an original end date or date of service of April 30, 2020, the prior authorization would now extend through July 29, 2020.

* Changes apply to Individual and fully insured Group Market health plans. Implementation for self-funded customers may vary. See UHCprovider.com/covid19 for more details.

Prior Authorization



Program or Benefit Scenario	Health Plan	Date Details	Additional Details
Post-acute care admission	Medicare Advantage, Medicaid and Individual and Group Market health plans*	Suspended from March 24, 2020, though May 31, 2020	Applies to admissions for long-term acute care facilities, acute inpatient rehabilitation and skilled nursing facilities
Site of service reviews	Medicaid and Individual and Group Market fully insured health plans*	Suspended from March 24, 2020, through May 31, 2020	Applies to nearly 2,000 surgical codes
Transfers to a new provider	Medicare Advantage, Medicaid and Individual and Group Market health plans*	Suspended from March 24, 2020, through May 31, 2020	Prior authorization not required when a member moves to a different yet similar site of care for the same service (e.g., hospital transfers or practice transfers)
Post-acute care admission	Medicare Advantage, Medicaid and Individual and Group Market health plans*	Suspended from March 24, 2020, though May 31, 2020	Applies to admissions for long-term acute care facilities, acute inpatient rehabilitation and skilled nursing facilities

* Changes apply to Individual and fully insured Group Market health plans. Implementation for self-funded customers may vary. See UHCprovider.com/covid19 for more details.

Cost Share Waivers

(copays, coinsurance and deductibles)



Program or Benefit Scenario	Health Plan	Date Details	Additional Details
COVID-19 Diagnostic Testing	Medicare Advantage, Medicaid and Individual and Group Market health plans*	From March 18, 2020 through the national public health emergency period ending July 24, 2020	UnitedHealthcare is waiving cost sharing for COVID-19 testing during the national public health emergency period.
COVID-19 Antibody Testing	Medicare Advantage, Medicaid and Individual and Group Market health plans*	Through the national public health emergency period ending July 24, 2020	Must be an FDA-authorized COVID-19 antibody tests ordered by a physician or appropriately licensed health care professional.
COVID-19 Testing-Related Visit	Medicare Advantage, Medicaid and Individual and Group Market health plans*	From March 18, 2020 through the national public health emergency period ending July 24, 2020	Visit can be in a health care provider's office, urgent care center, emergency department or through telehealth.
COVID-19 Treatment	Medicare Advantage, Medicaid and Individual and Group Market fully insured health plans*, with opt-in available for self-funded employers	From Feb. 4, 2020 through the national public health emergency period ending July 24, 2020	- Treatment must be done under a COVID-19 admission or diagnosis code. - Applies to office, urgent care and emergency department visits, observation stays, inpatient hospital episodes, acute inpatient rehab, long-term acute care and skilled nursing facilities.
Transportation	Individual and fully insured Group Market fully insured*	From April 1, 2020 through July 24, 2020	- For ground emergency and medically necessary non-emergency ambulance transportation for COVID-19-related or suspected COVID-19-related services. - Also for ground transportation from facility to facility (acute to acute or acute to post-acute) for patients with a positive COVID-19 diagnosis.

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Telehealth Cost Share Waivers

(copays, coinsurance and deductibles)



Program or Benefit Scenario	Medicare Advantage	Medicaid	Individual and Fully Insured Group Market*	Additional Details
Telehealth Virtual Check-Ins Electronic Visits (e-visits) Physical Therapy (PT) Occupational Therapy (OT) Speech Therapy (ST) Chiropractic Therapy Home Health and Hospice Remote Patient Monitoring	From March 31, 2020 through Sept. 30, 2020	State regulations will apply	For COVID-19 related visits, cost sharing will be waived for in-network telehealth services from March 31, 2020 through July 24, 2020 For non-COVID-19 visits, cost sharing will be waived for in-network telehealth services from March 31, 2020 through June 18, 2020	• Telehealth services furnished by out-of-network providers may also qualify for coverage. Benefits will be adjudicated in accordance with the member’s health plan, if applicable.

* Changes apply to Individual and fully insured Group Market health plans. Implementation for self-funded customers may vary. See UHCprovider.com/covid19 for more details.

Telehealth Expansion

(cost share waiver dates may vary)



Program or Benefit Scenario	Medicare Advantage	Medicaid	Individual and Fully Insured Group Market Health Plans *	Additional Details
Telehealth Expansion	From March 18, 2020 through Sept. 30, 2020	State regulations will apply	From March 18, 2020 through July 24, 2020	- UnitedHealthcare is waiving the Centers for Medicare & Medicaid Services (CMS) originating site restriction. - The policy changes apply to members whose benefit plans cover telehealth services and allow those patients to connect with their doctor through live, interactive audio-video or audio-only visits.
Virtual Check-Ins	From March 18, 2020 through Sept. 30, 2020	State regulations will apply	From March 18, 2020 through July 24, 2020	Telephone evaluation and management service for both physician and qualified non-physician health care professionals (CPT codes 99441-99443 and 98966-98968) can also be used for new or established patients.
Electronic Visits (e-visits)	From March 18, 2020 through Sept. 30, 2020	State regulations will apply	From March 18, 2020 through July 24, 2020	- UnitedHealthcare will reimburse for patients to communicate with their doctors using online patient portals, using CPT® codes 99421-99423 and HCPCS codes G2061-G2063. - For these e-visits, the patient must generate the initial inquiry, and communications can occur over a seven-day period.
Physical Therapy, Occupational Therapy, Speech Therapy (PT/OT/ST)	From March 18, 2020 through Sept. 30, 2020	State regulations will apply	From March 18, 2020 through July 24, 2020	UnitedHealthcare will reimburse PT/OT/ST telehealth services provided by qualified health care professionals when rendered using interactive audio-video technology.

* Changes apply to Individual and fully insured Group Market health plans. Implementation for self-funded customers may vary. See UHCprovider.com/covid19 for more details.

Telehealth Expansion

(cost share waiver dates may vary)



Program or Benefit Scenario	Medicare Advantage	Medicaid	Individual and Fully Insured Group Market Health Plans*	Additional Details
Chiropractic therapy	From March 18, 2020 through Sept. 30, 2020	State regulations will apply	From March 18, 2020 through July 24, 2020	• Telehealth services submitted by chiropractors when provided by qualified health care professionals and rendered using interactive audio-visual technology for Medicaid, and Individual and fully insured Group Market health plan members.
Home Health	From March 18, 2020 through Sept. 30, 2020	State regulations will apply	From March 18, 2020 through July 24, 2020	• UnitedHealthcare will reimburse services provided by home health agencies when rendered using interactive audio-video technology.
Hospice	From March 18, 2020 through Sept. 30, 2020	State regulations will apply	From March 18, 2020 through July 24, 2020	• UnitedHealthcare will reimburse services provided by hospice agencies for routine home care when rendered using interactive audio-video technology.
Remote Patient Monitoring	From March 18, 2020 through Sept. 30, 2020	State regulations will apply	From March 18, 2020 through July 24, 2020	• UnitedHealthcare follows Centers for Medicare & Medicaid (CMS) guidelines and considers digitally-stored data services or remote physiologic monitoring services reported with CPT® codes 99453, 99454, 99457, 99458, 99473, 99474 and 99091 eligible for reimbursement, according to the CMS Physician Fee Schedule.

* Changes apply to Individual and fully insured Group Market health plans. Implementation for self-funded customers may vary. See UHCprovider.com/covid19 for more details.

Miscellaneous



Program or Benefit Scenario	Health Plan	Date Details	Additional Details
Timely Filing Extensions	Medicare Advantage, Medicaid and Individual and Group Market health plans	Date of service on or after Jan. 1, 2020	Claims will not be denied for failure to meet timely filing deadlines if submitted through June 30, 2020.
Early Prescription Refills	Medicare Advantage, Medicaid and Individual and Group Market health plans	Through June 15, 2020	Members can fill existing prescriptions early (up to a 90-day refill) through direct pharmacy or mail order.
Referrals	Medicare Advantage	From March 1, 2020 through June 15, 2020	UnitedHealthcare will not enforce referral requirements.
	Medicaid	n/a	Consistent with existing policy, members do not need a referral for emergency care. Note that Florida, Maryland and Rhode Island have state requirements for referrals.
	Individual and Group Market health plans*	n/a	Consistent with existing policy, members do not need a referral for emergency care. All other standard referral requirements continue to apply.

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