



COVID-19 temporary provisions

Date guide

Information current as of Feb. 26, 2021

State variations and requirements may apply during this time.

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**United
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Summary of COVID-19 dates by program

- The following document is intended to be a quick reference guide for the beginning and end dates of temporary 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 Exchange, Individual and fully insured Group Market health plans. Implementation for self-funded customers may vary.
- Medicaid state-specific rules and other state requirements may apply. For Medicaid and other state-specific requirements, please refer to your state-specific website or your [state's](#) UnitedHealthcare Community Plan website, if applicable. For more details, go to UHCprovider.com/covid19.
- Medical management requirements may also apply, according to the member's benefit plan.

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Current cost share waivers – Testing

(copays, coinsurance and deductibles)

Program or benefit scenario	Medicare Advantage	Medicaid	Individual and Group Market health plans	Additional details
COVID-19 diagnostic testing	From Feb. 4, 2020 through the national public health emergency period, currently scheduled to end April 20, 2021, UnitedHealthcare is waiving cost sharing for in-network and out-of-network tests.	State requirements apply. Please refer to your state's COVID-19-specific website for more information.	From Feb. 4, 2020 through the national public health emergency period, currently scheduled to end April 20, 2021, UnitedHealthcare is waiving cost share for in-network and out-of-network tests.	<ul style="list-style-type: none"> UnitedHealthcare is covering medically appropriate COVID-19 diagnostic testing (virus/antigen) at no cost share when ordered by a physician or appropriately licensed health care professional for purposes of diagnosis or treatment of an individual member UnitedHealthcare is covering testing for employment, education, public health or surveillance purposes when required by applicable law. Benefits will be adjudicated in accordance with a member's benefit plan; health benefit plans generally do not cover testing for surveillance or public health purposes. We continue to monitor regulatory developments during emergency periods.
COVID-19 antibody testing	From April 10, 2020 through the national public health emergency period, currently scheduled to end April 20, 2021, UnitedHealthcare is waiving cost sharing for in-network and out-of-network tests.	State requirements apply. Please refer to your state's COVID-19-specific website for more information.	From April 10, 2020 through the national public health emergency period, currently scheduled to end April 20, 2021, UnitedHealthcare is waiving cost share for in-network and out-of-network tests.	<ul style="list-style-type: none"> COVID-19 antibody testing must be an FDA-authorized COVID-19 antibody test ordered by a physician or appropriately licensed health care professional, consistent with Centers for Medicare & Medicaid Services (CMS) requirements
COVID-19 testing-related visits	From Feb. 4, 2020 through the national public health emergency period, currently scheduled to end April 20, 2021, UnitedHealthcare is waiving cost sharing for in-network and out-of-network testing-related visits.	State requirements apply. Please refer to your state's COVID-19-specific website for more information.	From Feb. 4, 2020 through the national public health emergency period, currently scheduled to end April 20, 2021, UnitedHealthcare is waiving cost share for in-network and out-of-network testing-related visits.	<ul style="list-style-type: none"> Visits can be in person or via telehealth



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Current cost share waivers – Treatment (copays, coinsurance and deductibles)

Program or benefit scenario	Medicare Advantage	Medicaid	Individual and Group Market fully insured health plans	Additional details
COVID-19 treatment	From Feb. 4, 2020 through March 31, 2021, UnitedHealthcare is waiving cost sharing for in-network and out-of-network visits. This includes telehealth, inpatient and outpatient COVID-19 treatment.	State requirements apply. Please refer to your state's COVID-19-specific website for more information.	No cost share waivers are currently in effect. Coverage and cost sharing is adjudicated in accordance with the member's health plan.	Medicare Advantage <ul style="list-style-type: none"> Treatment must be for a COVID-19 diagnosis with an appropriate admission or diagnosis code This applies to remdesivir and convalescent plasma administered consistent with Food and Drug Administration (FDA) authorizations for emergency use. See below for additional detail on monoclonal antibody treatment.
Monoclonal antibody treatment	For Medicare health plans, the CMS Medicare Administrative Contractor will reimburse claims for Medicare with no cost share (copayment, coinsurance or deductible) through 2021.	State requirements apply. Please refer to your state's COVID-19-specific website for more information.	<p>For Individual Exchange, Individual and Group Market health plans, the investigational monoclonal antibody treatment will be considered a covered benefit during the national public health emergency period, currently scheduled to end April 20, 2021. Patients should meet the emergency use authorization (EUA) criteria for FDA-authorized monoclonal antibody treatment in an outpatient setting.</p> <p>UnitedHealthcare is waiving cost sharing for the administration (intravenous infusion) of monoclonal antibody treatments for in-network providers in outpatient settings through March 31, 2021.</p> <p>Out-of-network coverage and cost share is adjudicated according to a member's health plan.</p>	FDA-Authorized Treatments Bamlanivimab: <ul style="list-style-type: none"> HCPCS code: Q0239 Administration code: M0239 Casirivimab + Imdevimab: <ul style="list-style-type: none"> HCPCS code: Q0243 Administration code: M0243

State variations and requirements may apply during this time. Changes apply to Individual and fully insured Group Market health plans. Implementation for self-funded customers may vary. Medicaid state-specific rules and other state requirements may apply. For Medicaid and other state-specific requirements, please refer to your state-specific website or your state's UnitedHealthcare Community Plan website, if applicable. See UHCprovider.com/covid19 for more details. Dates are subject to change, based on the national public health emergency provisions.



Current cost share waivers – Transportation (copays, coinsurance and deductibles)

Program or benefit scenario	Medicare Advantage	Medicaid	Individual and Group Market fully insured health plans	Additional details
Transportation	No cost share waivers are currently in effect. Coverage and cost sharing is adjudicated in accordance with the member's health plan.	Coverage and waiver of cost share is subject to state requirements.	No cost share waivers are currently in effect. Coverage and cost sharing is adjudicated in accordance with the member's health plan.	

Current cost share waivers – Medicare Advantage Professional Services (copays, coinsurance and deductibles)

Program or benefit scenario	Health plan*	Date details	Additional details
Primary care professional services	Medicare Advantage	No cost share waivers are currently in effect. As of Jan. 1, 2021, coverage and cost sharing for primary care visits is adjudicated in accordance with the member's health plan.	
Office-based professional services	Medicare Advantage	No cost share waivers are currently in effect. Coverage and cost sharing for specialty visits is adjudicated in accordance with the member's health plan.	

State variations and requirements may apply during this time. Changes apply to Individual and fully insured Group Market health plans. Implementation for self-funded customers may vary. Medicaid state-specific rules and other state requirements may apply. For Medicaid and other state-specific requirements, please refer to your state-specific website or your state's UnitedHealthcare Community Plan website, if applicable. See [UHCprovider.com/covid19](https://www.uhcprovider.com/covid19) for more details.



Dates are subject to change based on the national public health emergency provisions.

Current cost share waivers – COVID-19 telehealth (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 Occupational Therapy Speech Therapy Chiropractic Therapy Home Health and Hospice Remote Patient Monitoring Behavioral Dental Vision Hearing	<p>COVID-19 testing From Feb. 4, 2020 through the national public health emergency period, currently scheduled to end April 20, 2021, UnitedHealthcare is waiving cost sharing for in-network and out-of-network testing and testing-related telehealth visits.</p> <p>COVID-19 treatment From Feb. 4, 2020 through March 31, 2021, UnitedHealthcare is waiving cost sharing for in-network and out-of-network telehealth treatment visits.</p>	<p>State requirements apply. Please refer to your state's COVID-19-specific website for more information.</p> <p>Benefits are adjudicated in accordance with the member's health plan, if applicable.</p>	<p>COVID-19 testing From Feb. 4, 2020 through the national public health emergency period, currently scheduled to end April 20, 2021, UnitedHealthcare is waiving cost sharing for in-network and out-of-network testing-related telehealth visits.</p> <p>COVID-19 treatment In network: No cost share waivers are currently in effect. Effective Jan. 1, 2021, most benefit plans include telehealth visits with in-network providers. Members are responsible for any copay, coinsurance or deductible, according to their benefit plan. Details are in the updated telehealth/telemedicine reimbursement policy.</p> <p>Out of network: No cost share waivers are currently in effect. Coverage and cost share is adjudicated according to a member's health plan.</p>	<ul style="list-style-type: none"> Benefits are adjudicated in accordance with the member's health plan, if applicable



*This date is subject to change based on direction from CMS. Hospice services are not applicable for Medicare Advantage plans. **Medicaid state-specific rules and other state requirements may apply. For Medicaid and other state-specific requirements, please refer to your state-specific website or your state's [UnitedHealthcare Community Plan website](#), if applicable. If no state guidance was provided, telehealth expansion ended June 18, 2020. ***State variations and requirements may apply. 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. Dates are subject to change, based on the national public health emergency period.

Current cost share waivers – Non-COVID-19 telehealth (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 Occupational Therapy Speech Therapy Chiropractic Therapy Home Health and Hospice Remote Patient Monitoring Behavioral Dental Vision Hearing	Non-COVID-19 No cost share waivers are currently in effect. Coverage and cost sharing is adjudicated in accordance with the member's health plan.	State requirements apply. Please refer to your state's COVID-19-specific website for more information. Benefits are adjudicated in accordance with the member's health plan, if applicable.	Non-COVID-19 No cost share waivers are currently in effect. Coverage and cost sharing is adjudicated in accordance with the member's health plan.	



*This date is subject to change based on direction from CMS. Hospice services are not applicable for Medicare Advantage plans. **Medicaid state-specific rules and other state requirements may apply. For Medicaid and other state-specific requirements, please refer to your state-specific website or your state's [UnitedHealthcare Community Plan website](#), if applicable. If no state guidance was provided, telehealth expansion ended June 18, 2020. ***State variations and requirements may apply. Changes apply to Individual and fully insured Group Market health plans. Implementation for self-funded customers may vary. See [UHCprovider.com/covid19](https://www.uhcprovider.com/covid19) for more details. Dates are subject to change, based on the national public health emergency period.

Current telehealth expansion and coverage

Program or benefit scenario	Medicare Advantage*	Medicaid**	Individual and fully insured Group Market health plans***	Additional details
Telehealth Medical Behavioral Physical Therapy Occupational Therapy Speech Therapy	<p>From Jan. 1, 2021 through the national public health emergency period, currently scheduled to end April 20, 2021, UnitedHealthcare is waiving the Centers for Medicare & Medicaid Services (CMS) originating site requirement. UnitedHealthcare will cover all in-network and out-of-network telehealth services, as outlined in the current CMS guidelines.</p> <p>(See the Medicare Advantage section on UHCprovider.com/covid19 > Telehealth)</p>	<p>State requirements apply. Please refer to your state's COVID-19-specific website for more information.</p>	<p>COVID-19 In-network testing and treatment: As of Jan. 1, 2021, UnitedHealthcare is reimbursing in-network telehealth services and covering additional codes as outlined in our telehealth/telemedicine reimbursement policy.</p> <p>Out-of-network COVID-19 testing: UnitedHealthcare has extended the expansion of telehealth access for COVID-19 testing through the national public health emergency period, currently scheduled to end April 20, 2021.</p> <p>Out-of-network COVID-19 treatment: As of Oct. 23, 2020, out-of-network telehealth services for COVID-19 treatment are covered according to the member's benefit plan and UnitedHealthcare's standard telehealth/telemedicine reimbursement policy.</p> <p>Non-COVID-19 In network: As of Jan. 1, 2021, UnitedHealthcare is covering in-network telehealth services in accordance with the member's benefit plan and our telehealth/telemedicine reimbursement policy. During the national public health emergency period, currently scheduled to end April 20, 2021, additional CMS codes may apply.</p> <p>Out of network: As of July 25, 2020, out-of-network telehealth services are covered according to the member's benefit plan and UnitedHealthcare's standard telehealth/telemedicine reimbursement policy.</p> <p>(See the Individual and Fully Insured Group Market Health Plan section on UHCprovider.com/covid19 > Telehealth.)</p>	<ul style="list-style-type: none"> The temporary 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



*This date is subject to change based on direction from CMS. **Medicaid state-specific rules and other state requirements may apply. For Medicaid and other state-specific requirements, please refer to your state-specific website or your state's [UnitedHealthcare Community Plan website](#), if applicable. If no state guidance was provided, telehealth expansion ended June 18, 2020. ***State variations and requirements may apply. 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.

Current telehealth expansion (cont.)

Program or benefit scenario	Medicare Advantage*	Medicaid**	Individual and fully insured Group Market health plans***	Additional details
Virtual Check-Ins	Covered per Medicare guidelines.	State requirements apply. Please refer to your state's COVID-19-specific website for more information.	<p>COVID-19</p> <p>In-network testing and treatment: As of Jan. 1, 2021, UnitedHealthcare is reimbursing in-network telehealth services as outlined in our telehealth/telemedicine reimbursement policy.</p> <p>Out-of-network COVID-19 testing: UnitedHealthcare has extended the expansion of telehealth access for COVID-19 testing through the national public health emergency period, currently scheduled to end April 20, 2021.</p> <p>Out-of-network COVID-19 treatment: As of Oct. 23, 2020, out-of-network telehealth services for COVID-19 treatment are covered according to the member's benefit plan and UnitedHealthcare's standard telehealth/telemedicine reimbursement policy.</p> <p>Non-COVID-19</p> <p>In network: As of Jan. 1, 2021, UnitedHealthcare is reimbursing in-network telehealth services as outlined in our telehealth/telemedicine reimbursement policy.</p> <p>Out of network: As of July 25, 2020, out-of-network telehealth services are covered according to the member's benefit plan and UnitedHealthcare's standard telehealth/telemedicine reimbursement policy.</p>	<ul style="list-style-type: none"> • UnitedHealthcare will reimburse providers when they have a brief communication using a technology-based service with a member, using HCPCS codes G2010 or G2012 • Beginning Jan. 1, 2021, HCPCS codes G2250, G2251 and G2252 will be available CMS codes.
Electronic Visits (e-visits)	Covered per Medicare guidelines.	State requirements apply. Please refer to your state's COVID-19-specific website for more information.	E-visits will be covered according to the member's benefit plan and UnitedHealthcare's standard telehealth/telemedicine reimbursement policy .	<ul style="list-style-type: none"> • UnitedHealthcare will reimburse providers when members communicate with their doctors using online patient portals, using CPT® codes 99421–99423 and 98970-98972 • For these e-visits, the member must generate the initial inquiry, and communications can occur over a 7-day period



*This date is subject to change, based on direction from CMS. ** Medicaid state-specific rules and other state requirements may apply. For Medicaid and other state-specific requirements, please refer to your state-specific website or your state's [UnitedHealthcare Community Plan website](#), if applicable. If no state guidance was provided, telehealth expansion ended June 18, 2020. ***State variations and requirements may apply. 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.

Current telehealth expansion (cont.)

Program or benefit scenario	Medicare Advantage*	Medicaid**	Individual and fully insured Group Market health plans***	Additional details
Remote Patient Monitoring	Covered per Medicare guidelines.	State requirements apply. Please refer to your state's COVID-19-specific website for more information.	No telehealth expansion provisions are currently in effect. UnitedHealthcare is reimbursing telehealth services for remote patient monitoring according to the member's benefit plan and as outlined in our telehealth/telemedicine reimbursement policy .	<ul style="list-style-type: none"> UnitedHealthcare follows 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.
Chiropractic Therapy	Beginning Jan. 1, 2021, any originating site requirements outlined under Original Medicare will apply for both in-network and out-of-network providers.	State requirements apply. Please refer to your state's COVID-19-specific website for more information.	No telehealth expansion provisions are currently in effect. UnitedHealthcare is reimbursing telehealth services for chiropractic therapy according to the member's benefit plan and as outlined in our telehealth/telemedicine reimbursement policy .	
Hospice	Not applicable	State requirements apply. Please refer to your state's COVID-19-specific website for more information.	No telehealth expansion provisions are currently in effect. UnitedHealthcare is reimbursing telehealth services for hospice according to the member's benefit plan and as outlined in our telehealth/telemedicine reimbursement policy .	<ul style="list-style-type: none"> UnitedHealthcare will reimburse services provided by hospice agencies for routine home care when rendered using interactive audio-video technology.



*This date is subject to change, based on direction from CMS. **Medicaid state-specific rules and other state requirements may apply. For Medicaid and other state-specific requirements, please refer to your state-specific website or your state's [UnitedHealthcare Community Plan website](#), if applicable. If no state guidance was provided, telehealth expansion ended June 18, 2020. ***State variations and requirements may apply. 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.

Current telehealth expansion (cont.)

Program or benefit scenario	Medicare Advantage*	Medicaid**	Individual and fully insured Group Market health plans***
Home Health	<p>COVID-19 and Non-COVID-19 For in- and out-of-network providers, UnitedHealthcare will extend the expansion of telehealth access through the national public health emergency period, currently scheduled to end April 20, 2021.</p> <p>Services must be performed using live, interactive audio-video while the patient is at home or a CMS originating site.</p>	<p>State requirements apply. Please refer to your state's COVID-19-specific website for more information.</p>	<p>COVID-19 and Non-COVID-19 In-network testing and treatment: No telehealth expansion provisions for in-network COVID-19 services are currently in effect. As of Jan. 1, 2021, UnitedHealthcare is reimbursing in-network telehealth services as outlined in current CMS guidelines, and additional codes as outlined in our telehealth/telemedicine reimbursement policy.</p> <p>COVID-19 Out-of-network COVID-19 testing: For out-of-network providers, UnitedHealthcare will extend the expansion of telehealth access for COVID-19 testing through the national public health emergency period, currently scheduled to end April 20, 2021. Services must be performed using live, interactive audio-video while the patient is at home or a CMS originating site.</p> <p>Out-of-network COVID-19 treatment: No telehealth expansion provisions for out-of-network COVID-19 treatment are currently in effect. UnitedHealthcare is reimbursing telehealth services out-of-network home health therapy according to the member's benefit plan and as outlined in our telehealth/telemedicine reimbursement policy.</p>



*This date is subject to change, based on direction from CMS. **Medicaid state-specific rules and other state requirements may apply. For Medicaid and other state-specific requirements, please refer to your state-specific website or your state's [UnitedHealthcare Community Plan website](#), if applicable. If no state guidance was provided, telehealth expansion ended June 18, 2020. ***State variations and requirements may apply. 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.

Current telehealth expansion (cont.)

Program or benefit scenario	Medicare Advantage*	Medicaid**	Individual and Fully Insured Group Market health plans***
Dental Vision Hearing	<p>As of Jan. 1, 2021 through the national public health emergency period, currently scheduled to end April 20, 2021, UnitedHealthcare will cover all in-network and out-of-network telehealth services as outlined in the current CMS guidelines. Member benefit plan terms will apply.</p>	<p>State requirements apply. Please refer to your state's COVID-19-specific website for more information.</p>	<p><u>COVID-19</u> <u>In-network testing and treatment:</u> Beginning Jan. 1, 2021 through the national public health emergency period, currently scheduled to end April 20, 2021, UnitedHealthcare is reimbursing in-network telehealth services, including originating site requirements, for COVID-19 testing and treatment in accordance with the member's benefit plan.</p> <p><u>Out-of-network COVID-19 testing:</u> UnitedHealthcare is extending the expansion of telehealth access for COVID-19 testing through the national public health emergency period, currently scheduled to end April 20, 2021.</p> <p><u>Out-of-network COVID-19 treatment:</u> No telehealth expansion provisions are currently in effect. UnitedHealthcare is reimbursing out-of-network telehealth services according to the member's benefit plan.</p> <p><u>Non-COVID-19</u> No telehealth expansion provisions are currently in effect. UnitedHealthcare is reimbursing telehealth services for non-COVID-19 services according to the member's benefit plan, whether that treatment is provided by an in- or out-of-network provider.</p>



*This date is subject to change based on direction from CMS. **Medicaid state-specific rules and other state requirements may apply. For Medicaid and other state-specific requirements, please refer to your state-specific website or your state's [UnitedHealthcare Community Plan website](#), if applicable. If no state guidance was provided, telehealth expansion ended June 18, 2020. ***State variations and requirements may apply. 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.

Current timely filing and prescription refill provisions

Program or benefit scenario	Health plan*	Date details	Additional details
Timely filing extensions	Individual and Group Market health plans	UnitedHealthcare is following the IRS/DOL regulation related to the national emergency declared by the President. This regulation pauses the timely filing requirements time clock for claims that would have exceeded the filing limitation during the national emergency period that began on March 1, 2020.*	<ul style="list-style-type: none"> Timely filing requirements have been extended an additional 60 days following the last day of the national emergency period** This regulatory guidance has been issued by the IRS and the U.S. Department of Labor (Employee Benefits Security Administration). Our standard timely filing requirements apply to claims that exceeded requirements prior to the national emergency period**
Timely filing extensions	Medicare Advantage and Medicaid plans	UnitedHealthcare is following standard timely filing requirements.	<ul style="list-style-type: none"> If the Centers for Medicare & Medicaid Services (CMS) issues further guidance on timely filing, UnitedHealthcare will adhere to that guidance Our standard timely filing requirements apply to claims that exceeded requirements prior to the national emergency period** Medicaid state-specific rules and other state requirements may apply. For Medicaid and other state-specific requirements, please refer to your state-specific website.



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Current referrals and provisional credentialing provisions

Program or benefit scenario	Health plan*	Date details	Additional details
Referrals	Medicare Advantage	From March 1, 2020, through the national public health emergency period, currently scheduled to end April 20, 2021.	<ul style="list-style-type: none"> UnitedHealthcare will not enforce referral requirements for Medicare Advantage plans during the national public health emergency period
	Medicaid	n/a	<ul style="list-style-type: none"> 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 The latest advisories, updates and process changes from state health plans can be found on the UnitedHealthcare Community Plan pages, where you'll also find links to each state's resources
	Individual and Group Market health plans	n/a	<ul style="list-style-type: none"> Consistent with existing policy, members do not need a referral for emergency care. All other standard referral requirements continue to apply.
Provisional credentialing	Medicare Advantage, Medicaid and Individual and Group Market health plans	Through June 30, 2021, in accordance with NCQA guidelines.	<ul style="list-style-type: none"> In accordance with guidelines from the National Committee for Quality Assurance (NCQA), we're implementing provisional credentialing for out-of-network care providers who are licensed independent practitioners and want to participate in 1 or more of our networks All credentialing applications will be evaluated to determine if UnitedHealthcare is currently accepting applications in specific geographic areas or for a designated specialty Complete information on COVID-19-related credentialing and recredentialing changes can be found at UHCprovider.com/covid19



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Current prior authorization provisions

Program or benefit scenario	Health plan*	Date details	Additional details
Diagnostic radiology for COVID-19 testing and testing-related services (diagnostic imaging)	Medicaid and Individual and Group Market health plans* No notice is necessary for Medicare	Prior authorization is not required through the national public health emergency period, currently scheduled to end April 20, 2021.	<ul style="list-style-type: none"> 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*	Normal prior authorization requirements are in effect. Any temporary changes to these requirements that UnitedHealthcare may choose to put in place will be communicated directly to the impacted geographies and/or facilities.	
Medical, behavioral health and dental services – Extensions of existing prior authorizations	Medicare Advantage, Medicaid and Individual and Group Market health plans*	Normal prior authorization requirements are in effect. Any temporary changes to these requirements that UnitedHealthcare may choose to put in place will be communicated directly to the impacted geographies and/or facilities.	
Post-acute care admission, site of service reviews and transfers to a new provider	Medicare Advantage, Medicaid and Individual and Group Market health plans*	Normal prior authorization requirements are in effect. Any temporary changes to these requirements that UnitedHealthcare may choose to put in place will be communicated directly to the impacted geographies and/or facilities.	



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Appendix – Previous Temporary Business Provisions

The following pages outline temporary program provisions and/or suspensions that UnitedHealthcare implemented in response to COVID-19.

All of these provisions and suspensions are no longer in effect – the information is included here simply for your reference.



Expired cost share waivers – Treatment

(copays, coinsurance and deductibles)

Program or benefit scenario	Medicare Advantage	Medicaid	Individual and Group Market fully insured health plans	Additional details
COVID-19 treatment	Not applicable	State requirements may have applied. Please refer to your state's COVID-19-specific website for more information.	<p><u>In network</u></p> <ul style="list-style-type: none"> From Feb. 4, 2020 through Oct. 22, 2020, UnitedHealthcare waived cost sharing for in-network and out-of-network visits From Oct. 23, 2020 through Dec. 31, 2020, UnitedHealthcare waived cost sharing for in-network visits for inpatient and outpatient COVID-19 treatment From Jan. 1, 2021 through Jan. 31, 2021, UnitedHealthcare waived cost sharing for COVID-19 inpatient treatment at in-network facilities. (This includes UnitedHealthcare Individual Exchange health plans.) For in-patient admissions that begin before Jan. 31, 2021, cost sharing is waived until the patient is discharged. Beginning Feb. 1, 2021, cost sharing is adjudicated in accordance with the member's benefit plan. <p><u>Out of network</u></p> <ul style="list-style-type: none"> From Feb. 4, 2020 through Oct. 22, 2020, UnitedHealthcare waived cost sharing for in-network and out-of-network visits As of Oct. 23, 2020, out-of-network coverage is determined by the member's benefit plan <p>Implementation for self-funded customers may have varied.</p>	<ul style="list-style-type: none"> Treatment must be for a COVID-19 diagnosis with an appropriate admission or diagnosis code Applies to observation stays, inpatient hospital episodes, acute inpatient rehab, long-term acute care and skilled nursing facilities This applies to remdesivir and convalescent plasma administered consistent with FDA authorizations for emergency use. See below for additional detail on monoclonal antibody treatment.



State variations and requirements may apply during this time. Changes apply to Individual and fully insured Group Market health plans. Implementation for self-funded customers may vary. Medicaid state-specific rules and other state requirements may apply. For Medicaid and other state-specific requirements, please refer to your state-specific website or your state's UnitedHealthcare Community Plan website, if applicable. See [UHCprovider.com/covid19](https://www.uhcprovider.com/covid19) for more details. Dates are subject to change, based on the national public health emergency provisions.

Expired cost share waivers – Transportation (copays, coinsurance and deductibles)

Program or benefit scenario	Medicare Advantage	Medicaid	Individual and Group Market fully insured health plans
Transportation	No cost share waivers have been enacted by UnitedHealthcare due to COVID-19. Coverage and cost sharing has been adjudicated in accordance with the member's health plan.	No cost share waivers have been enacted by UnitedHealthcare due to COVID-19. State requirements may have applied. Please check your state-specific website.	<p>From Feb 4, 2020 through Dec. 31, 2020, UnitedHealthcare waived cost share for:</p> <ul style="list-style-type: none"> • Emergency and medically necessary non-emergency ground ambulance transportation for COVID-19-related services • Ground transportation from facility to facility (acute to acute or acute to post-acute) for patients with a positive COVID-19 diagnosis <p>From Jan 1, 2021 through Jan. 31, 2021, UnitedHealthcare waived cost share for emergency ground transportation that resulted in an in-patient admission for COVID-19 treatment at an in-network facility.</p>

Expired cost share waivers – Medicare Advantage Professional Services (copays, coinsurance and deductibles)

Program or benefit scenario	Health plan*	Date details	Additional details
Primary care professional services	Medicare Advantage	From Oct. 1, 2020 through Dec. 31, 2020, UnitedHealthcare waived cost share for primary care office-based professional services and primary care telehealth services.	<ul style="list-style-type: none"> • This applied to in-network and covered out-of-network COVID-19 and non-COVID-19 visits • Urgent care and emergency room care copays were not waived
Office-based professional services	Medicare Advantage	From May 11, 2020 through Sept. 30, 2020, UnitedHealthcare waived cost share for all office-based professional services and telehealth services performed by both primary care physicians and specialists in certain categories only.	

Expired cost share waivers – COVID-19 telehealth (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 Occupational Therapy Speech Therapy Chiropractic Therapy Home Health and Hospice Remote Patient Monitoring Behavioral Dental Vision Hearing	Not applicable	If no state guidance was provided, the cost share waiver ended June 18, 2020.	<p><u>COVID-19 Treatment</u></p> <p><u>In network:</u> From Feb. 4, 2020 through Dec. 31, 2020, UnitedHealthcare waived cost sharing for in-network telehealth treatment visits.</p> <p><u>Out of network:</u> From Feb. 4, 2020 through Oct. 22, 2020, UnitedHealthcare waived cost sharing for out-of-network telehealth treatment visits.</p> <p>Implementation for self-funded customers may have varied.</p>	



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Expired cost share waivers – Non-COVID-19 telehealth (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 Occupational Therapy Speech Therapy Chiropractic Therapy Home Health and Hospice Remote Patient Monitoring Behavioral Dental Vision Hearing	<p>Non-COVID-19 Through Sept. 30, 2020, UnitedHealthcare extended the cost share waiver for telehealth services for in- and out-of-network providers.</p> <p>From Oct. 1, 2020 through Dec. 31, 2020, UnitedHealthcare extended the cost share waiver for in-network and covered out-of-network <u>primary care</u> telehealth services.</p>	<p>State requirements may have applied. Please refer to your state's COVID-19-specific website for more information.</p> <p>If no state guidance was provided, the cost share waiver ended June 18, 2020.</p>	<p>Non-COVID-19 In network: UnitedHealthcare extended the cost share waiver for telehealth services through Sept. 30, 2020.</p> <p>Out of network: The cost share waiver for telehealth services did not apply.</p>	<ul style="list-style-type: none"> Benefits are adjudicated in accordance with the member's health plan, if applicable



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Expired telehealth expansion provisions

Program or benefit scenario	Medicare Advantage*	Medicaid**	Individual and fully insured Group Market health plans***	Additional details
Telehealth Medical Behavioral Physical Therapy Occupational Therapy Speech Therapy	For in- and out-of-network providers, UnitedHealthcare extended the expansion of telehealth access through Dec. 31, 2020, for both COVID-19 and non-COVID-19 services. (See the Medicare Advantage section on UHCprovider.com/covid19 > Telehealth)	State requirements may have applied. Please refer to your state's COVID-19-specific website for more information.	<p>COVID-19</p> <p>In network: UnitedHealthcare extended the expansion of telehealth access for COVID-19 testing and treatment for in-network providers through Dec. 31, 2020.</p> <p>Out of network treatment: UnitedHealthcare extended the expansion of telehealth access for COVID-19 treatment for out-of-network providers through Oct. 22, 2020.</p> <p>Non-COVID-19</p> <p>In network: UnitedHealthcare extended the expansion of telehealth access through Dec. 31, 2020.</p> <p>Out of network: The expansion of telehealth access ended July 24, 2020.</p> <p>(See the Individual and Fully Insured Group Market Health Plan section on UHCprovider.com/covid19 > Telehealth.)</p>	<ul style="list-style-type: none"> The temporary 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



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Expired telehealth expansion (cont.)

Program or benefit scenario	Medicare Advantage*	Medicaid**	Individual and fully insured Group Market health plans***	Additional details
Virtual Check-Ins	Not applicable	State requirements may have applied. Please refer to your state's COVID-19-specific website for more information.	<p>COVID-19 In network: UnitedHealthcare extended the expansion of telehealth access for COVID-19 testing and treatment through Dec. 31, 2020.</p> <p>Out of network: UnitedHealthcare extended the expansion of telehealth access for COVID-19 treatment for new patients through Oct. 22, 2020.</p> <p>Non-COVID-19 In network: UnitedHealthcare extended the expansion of telehealth access for new patients through Dec. 31, 2020.</p> <p>Out of network: The expansion of telehealth access ended July 24, 2020.</p>	<ul style="list-style-type: none"> • UnitedHealthcare will reimburse providers when they have a brief communication using a technology-based service with a member, using HCPCS codes G2010 or G2012 • Beginning Jan. 1, 2020, HCPCS codes G2250, G2251 and G2252 will be available CMS codes
Electronic Visits (e-visits)	Not applicable	Not applicable	Not applicable	



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Expired telehealth expansion (cont.)

Program or benefit scenario	Medicare Advantage*	Medicaid**	Individual and fully insured Group Market health plans***	Additional details
Remote Patient Monitoring	Not applicable	State requirements may have applied. Please refer to your state's COVID-19-specific website for more information.	Not applicable	
Chiropractic Therapy	<p>For in- and out-of-network providers, UnitedHealthcare extended the expansion of telehealth access through Dec. 31, 2020, for both COVID-19 and non-COVID-19 services.</p> <p>(See the Medicare Advantage section on UHCprovider.com/covid19 > Telehealth)</p>	State requirements may have applied. Please refer to your state's COVID-19-specific website for more information.	<p>COVID-19 In network: UnitedHealthcare extended the expansion of telehealth access for COVID-19 testing and treatment through Dec. 31, 2020.</p> <p>Out of network: UnitedHealthcare extended the expansion of telehealth access for COVID-19 testing and treatment services through Oct. 22, 2020.</p> <p>Non-COVID-19 In network: UnitedHealthcare extended the expansion of telehealth access through Dec. 31, 2020.</p> <p>Out of network: The expansion of telehealth access ended July 24, 2020.</p>	<ul style="list-style-type: none"> UnitedHealthcare will reimburse chiropractic therapy telehealth services provided by qualified health care professionals when rendered using interactive audio-video technology for in-network providers only, when covered according to the member's benefit plan Chiropractors could use these available codes to bill as part of the temporary expansion of telehealth services through Dec. 31, 2020



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Expired telehealth expansion (cont.)

Program or benefit scenario	Medicare Advantage*	Medicaid**	Individual and fully insured Group Market health plans***	Additional details
Home Health	Not applicable	State requirements may have applied. Please refer to your state's COVID-19-specific website for more information.	<p>COVID-19 In network: UnitedHealthcare extended the expansion of telehealth access for COVID-19 testing and treatment through Dec. 31, 2020.</p> <p>Out of network treatment: UnitedHealthcare extended the expansion of telehealth access for COVID-19 treatment through Oct. 22, 2020.</p> <p>Non-COVID-19 In network: UnitedHealthcare extended the expansion of telehealth access through Dec. 31, 2020.</p> <p>Out of network: The expansion of telehealth access ended July 24, 2020.</p>	<ul style="list-style-type: none"> UnitedHealthcare will reimburse services provided by home health agencies when rendered using interactive audio-video technology for in-network providers only
Hospice	Not applicable	State requirements may have applied. Please refer to your state's COVID-19-specific website for more information.	<p>COVID-19 In network: UnitedHealthcare extended the expansion of telehealth access through Dec. 31, 2020.</p> <p>Out of network: UnitedHealthcare extended the expansion of telehealth access through Oct. 22, 2020.</p> <p>Non-COVID-19 In network: UnitedHealthcare extended the expansion of telehealth access through Dec. 31, 2020.</p> <p>Out of network: The expansion of telehealth access ended July 24, 2020. As of July 25, 2020, out-of-network telehealth services are covered according to the member's benefit plan and UnitedHealthcare's standard telehealth reimbursement policy.</p>	<ul style="list-style-type: none"> UnitedHealthcare will reimburse services provided by hospice agencies for routine home care when rendered using interactive audio-video technology



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Expired telehealth expansion (cont.)

Program or benefit scenario	Medicare Advantage*	Medicaid**	Individual and Fully Insured Group Market health plans***	Additional details
<p>Dental</p> <p>Vision</p> <p>Hearing</p>	<p>For in- and out-of-network providers, UnitedHealthcare extended the expansion of telehealth access through Dec. 31, 2020, for both COVID-19 and non-COVID-19 services.</p> <p>(See the Medicare Advantage section on UHCprovider.com/covid19 > Telehealth)</p>	<p>State requirements may have applied. Please refer to your state's COVID-19-specific website for more information.</p>	<p><u>COVID-19</u> In network: UnitedHealthcare extended the expansion of telehealth access for COVID-19 testing and treatment through Dec. 31, 2020.</p> <p>Out of network treatment: UnitedHealthcare extended the expansion of telehealth access for COVID-19 treatment through Oct. 22, 2020. As of Oct. 23, 2020, out-of-network telehealth services are covered according to the member's benefit plan.</p> <p><u>Non COVID-19</u> In network: UnitedHealthcare extended the expansion of telehealth access through Dec. 31, 2020.</p> <p>Out of network: The expansion of telehealth access ended July 24, 2020. As of July 25, 2020, out-of-network telehealth services are covered according to the member's benefit plan.</p>	<p>Individual and Fully Insured Group Market health plans</p> <p>UnitedHealthcare waived the Centers for Medicare & Medicaid Services (CMS) originating site requirement. The policy changes apply to members whose benefit plans cover telehealth services and allow those patients to connect with their provider, dentist, audiologist and fitters through live, interactive audio-video or audio-only visits. The following specialty plans were covered according to the member's benefit plan:</p> <p><u>Dental</u> UnitedHealthcare dental will reimburse providers for the applicable exam codes that coincide with the tele-dentistry codes through Dec. 31, 2020.</p> <p><u>Vision</u> UnitedHealthcare vision will reimburse providers for the applicable telehealth codes through Dec. 31, 2020.</p> <p><u>Hearing</u> UnitedHealthcare hearing will include telehealth claims notes on the broader hearing bundled service claims through Dec. 31, 2020.</p>



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Expired timely filing and prescription refills

Program or benefit scenario	Health plan*	Date details	Additional details
Timely filing extensions	Medicare Advantage and Medicaid plans	<p>Claims with a 2020 service date submitted on or after Jan. 1, 2020, through June 30, 2020, were not denied for failure to meet timely filing deadlines.</p> <p>As of July 1, 2020, UnitedHealthcare is following standard timely filing requirements.</p>	<ul style="list-style-type: none"> • Our standard timely filing requirements applied to claims that exceeded requirements prior to the national emergency period* • Medicaid state-specific rules and other state requirements may have applied. For Medicaid and other state-specific requirements, please refer to your state-specific website.
Early prescription refills	Medicare Advantage, Medicaid and Individual and Group Market health plans	Through July 15, 2020	<ul style="list-style-type: none"> • Members who have UnitedHealthcare prescription coverage or an OptumRx pharmacy benefit could get an early prescription refill by calling the pharmacy number on their health plan ID card or speaking directly to a pharmacist. Members could also opt to have prescriptions delivered to their home through Optum Home Delivery. They set up this option online by signing into their health plan account.



* State variations and requirements may apply during this time. Changes apply to Individual and fully insured Group Market health plans. Implementation for self-funded customers may vary. Medicaid state-specific rules and other state requirements may apply. For Medicaid and other state-specific requirements, please refer to your state-specific website or your state's [UnitedHealthcare Community Plan website](#), if applicable. See [UHCprovider.com/covid19](#) for more details. **The national emergency, as declared by President Trump, is distinct from the national public health emergency declared by the U.S. Department of Health and Human Services.

Expired referral provisions

Program or benefit scenario	Health plan*	Date details	Additional details
Referrals	Medicare Advantage	From March 1, 2020, through the national public health emergency period, currently scheduled to end April 20, 2021.	<ul style="list-style-type: none"> UnitedHealthcare will not enforce referral requirements for Medicare Advantage plans during the national public health emergency period
	Medicaid	n/a	<ul style="list-style-type: none"> 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	<ul style="list-style-type: none"> Consistent with existing policy, members do not need a referral for emergency care. All other standard referral requirements continue to apply



* State variations and requirements may apply during this time. Changes apply to Individual and fully insured Group Market health plans. Implementation for self-funded customers may vary. Medicaid state-specific rules and other state requirements may apply. For Medicaid and other state-specific requirements, please refer to your state-specific website or your state's [UnitedHealthcare Community Plan website](#), if applicable. See UHCprovider.com/covid19 for more details.

Expired prior authorization provisions

Program or benefit scenario	Health plan*	Date details	Additional details
Durable medical equipment, prosthetics, orthotics and supplies (DMEPOS)	Medicare Advantage, Medicaid and Individual and Group Market health plan members*	For prior authorizations approved before Oct. 1, 2019, a new authorization was required.	<ul style="list-style-type: none"> Providers could complete a face-to-face assessment either through an in-person visit or using telehealth
		Prior authorizations that were approved on or after Oct. 1, 2019, were extended through Sept. 30, 2020.	<ul style="list-style-type: none"> Normal prior authorization requirements resumed June 1, 2020
		For equipment and supply deliveries from March 31, 2020 through May 31, 2020, notification and delivery requirements for equipment and supplies were relaxed.	
Embryo cryopreservation	Individual and Group Market fully insured health plans with infertility benefits*	No prior authorization was required for embryo cryopreservation from March 17, 2020 through April 30, 2020.	<ul style="list-style-type: none"> Temporary change in embryo cryopreservation coverage for members who started an in vitro fertilization (IVF) cycle and were ready for retrieval and embryo transfer, which was interrupted mid-cycle by COVID-19 restrictions



* State variations and requirements may apply during this time. Changes apply to Individual and fully insured Group Market health plans. Implementation for self-funded customers may vary. Medicaid state-specific rules and other state requirements may apply. For Medicaid and other state-specific requirements, please refer to your state-specific website or your state's UnitedHealthcare Community Plan website, if applicable. See UHCprovider.com/covid19 for more details.

Expired prior authorization provisions (cont.)

Program or benefit scenario	Health plan*	Date details	Additional details
Medical, behavioral health and dental services – Extensions of existing prior authorizations	Medicare Advantage, Medicaid and Individual and Group Market health plans*	<p>Prior authorizations received an automatic 90-day extension based on the original authorization date with an end date or date of service between March 24, 2020 and May 31, 2020.</p> <p>Prior authorizations on or after April 10, 2020 were not subject to extension.</p>	<ul style="list-style-type: none"> For example: For a prior authorization with an original end date or date of service of April 30, 2020, the prior authorization was extended through July 29, 2020
Post-acute care admission	Medicare Advantage, Medicaid and Individual and Group Market health plans*	<p>Prior authorization suspended from March 24, 2020 through May 31, 2020. Applied to admissions for long-term acute care facilities, acute inpatient rehabilitation and skilled nursing facilities.</p> <p>From Dec. 18, 2020 through Jan. 31, 2021, UnitedHealthcare temporarily suspended prior authorization requirements for admission to in-network skilled nursing facilities.</p>	n/a
Site of service reviews	Medicaid and Individual and Group Market fully insured health plans*	Prior authorization suspended from March 24, 2020 through May 31, 2020.	<ul style="list-style-type: none"> Applied to nearly 2,000 surgical codes
Transfers to a new provider	Medicare Advantage, Medicaid and Individual and Group Market health plans*	<p>Prior authorization suspended from March 24, 2020 through May 31, 2020.</p> <p>From Dec. 18, 2020 through Jan. 31, 2021, UnitedHealthcare temporarily suspended prior authorization requirements for admission to in-network skilled nursing facilities.</p>	<ul style="list-style-type: none"> 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)



* State variations and requirements may apply during this time. Changes apply to Individual and fully insured Group Market health plans. Implementation for self-funded customers may vary. Medicaid state-specific rules and other state requirements may apply. For Medicaid and other state-specific requirements, please refer to your state-specific website or your state's UnitedHealthcare Community Plan website, if applicable. See UHCprovider.com/covid19 for more details.

Resources

- Find the latest UnitedHealthcare COVID-19-related resources at UHCprovider.com/covid19
- Learn more about our reimbursement policies at UHCprovider.com/policies



For the most recent updates on COVID-19,
visit the [CDC](https://www.cdc.gov) and [World Health Organization](https://www.who.int).

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