

UnitedHealthcare® Medicare Advantage Reimbursement Policy CMS 1500 Policy Number 2023R9036A

Standby Services Policy, Professional

IMPORTANT NOTE ABOUT THIS REIMBURSEMENT POLICY

This policy is applicable to UnitedHealthcare Medicare Advantage Plans offered by UnitedHealthcare and its affiliates.

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 Medicare Advantage reimbursement policies 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. 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 resource regarding UnitedHealthcare's Medicare Advantage reimbursement policy for the services described and is not intended to address every aspect of a reimbursement situation. Accordingly, UnitedHealthcare Medicare Advantage 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 Medicare Advantage 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, and/or the enrollee's benefit coverage documents**. Finally, this policy may not be implemented exactly the same way on the different electronic claims processing systems used by UnitedHealthcare Medicare Advantage due to programming or other constraints; however, UnitedHealthcare Medicare Advantage strives to minimize these variations.

UnitedHealthcare Medicare Advantage may modify this reimbursement policy at any time to comply with changes in CMS policy and other national standard coding guidelines by publishing a new version of the reimbursement policy on this website. However, the information presented in this reimbursement policy is accurate and current as of the date of publication. UnitedHealthcare Medicare Advantage encourages physicians and other health care professionals to keep current with any CMS policy changes and/or billing requirements by referring to the CMS or your local carrier website regularly. Physicians and other health care professionals can sign up for regular distributions for policy or regulatory changes directly from CMS and/or your local carrier. UnitedHealthcare's Medicare Advantage reimbursement policies do not include notations regarding prior authorization requirements.

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** For more information on a specific enrollee's benefit coverage, please call the customer service number on the back of the member ID card.

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Application



UnitedHealthcare® Medicare Advantage Reimbursement Policy CMS 1500 Policy Number 2023R9036A

This reimbursement policy applies to all Medicare Advantage products and for 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 network physicians and other qualified health care professionals.

Policy

Overview

This reimbursement policy addresses reimbursement for standby services and hospital mandated on call services.

Reimbursement Guidelines

Standby Services

Per Current Procedural Terminology (CPT®) definition, code 99360 is used to report physician or other qualified health care professional standby services that are requested by another individual that involves prolonged attendance without direct (face-to-face) patient contact. Care or services may not be provided to other patients during this period. This code is not used to report time spent proctoring another individual. It is also not used if the period of standby ends with the performance of a procedure subject to a surgical package by the individual who was on standby.

In accordance with CMS, UnitedHealthcare Medicare Advantage does not reimburse physician or other qualified health care professional standby services submitted with CPT code 99360. Payment for standby services are included in the Part A payment to the facility. If a specific service is directly rendered to the patient by the standby physician or other qualified health care professional (i.e., tissue examination of frozen section biopsy), the service or procedure would be reported under the appropriate CPT code (i.e., 88331).

Mandated Hospital on Call Service

UnitedHealthcare Medicare Advantage does not reimburse for hospital mandated on call services billed under CPT codes 99026 and 99027 because they do not involve direct patient contact.

Codes		
CPT code section		
99026		
99027		
99360		

Resources

www.cms.gov

American Medical Association (AMA) Current Procedural Terminology (CPT®)

Medicare Claims Processing Manual: Chapter 12 - Physicians/Nonphysician Practitioners: Section 30.6.15.3

Medicare Physician Fee Schedule: PFS Relative Value Files

History



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1/1/2023	Policy Version Change
	Resources Section: Updated
1/1/2022	Policy Version Change
	Resources Section: Updated
	History Section: Entries prior to 1/1/2020 archived
1/1/2021	Policy Version Change
	Codes Section: Removed CPT descriptions
	History Section: Entries prior to 1/1/2019 archived
11/19/2014	New Policy