UnitedHealthcare Community Plan

REIMBURSEMENT POLICY
CMS-1500
Policy Number 2026R0112E

Nonphysician Health Care Professionals Billing Evaluation and Management 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 Community Plan reimbursement policies uses 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 Community Plan's reimbursement policy for the services described and is not intended to address every aspect of a reimbursement situation. Accordingly, UnitedHealthcare Community Plan 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 Community Plan enrollees.

Other factors affecting reimbursement may supplement, modify or, in some cases, supersede this policy. These factors include but are not limited to: federal &/or state regulatory requirements, 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 Community Plan due to programming or other constraints; however, UnitedHealthcare Community Plan strives to minimize these variations.

UnitedHealthcare Community Plan 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.

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Application

This reimbursement policy applies to UnitedHealthcare Community Plan Medicaid Product.

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 and 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.

Policy

Overview

This policy describes reimbursement for Evaluation and Management (E/M) services (CPT codes 98000-98016, 99091, 99202–99499) reported by nonphysician health care professionals.

Reimbursement Guidelines

The *Current Procedural Terminology* (CPT®) book has specific guidelines that give the following instruction: "Select the name of the procedure or service that accurately identifies the service performed."

The National Correct Coding Initiative Policy Manual gives the following instruction: "Procedures should be reported with the most comprehensive CPT code that describes the services performed."

CPT guidance instructs that E/M (CPT codes 98000-98016, 99091, 99202-99499) should only be reported by Physicians or other qualified health care professionals. In accordance with CMS guidelines, the only qualified health care professionals that may report E/M services are nurse practitioners (NP), clinical nurse specialists (CNS), certified nurse midwives (CNM) and Physician assistants (PA), none of which are considered nonphysician health care professionals for purposes of this policy.

UnitedHealthcare Community Plan will not reimburse E/M services (CPT codes 98000-98016, 99091, 99202-99499) when reported by nonphysician health care professionals reporting under their own individual or group tax identification number (TIN). For purposes of this policy, the specialties that are considered nonphysician health care professionals are listed below.

Nonphysician Health Care Professionals for Medicaid Products Not Allowed to Report E&M Services

Addiction Medicine Specialist	Athletic Trainer Group
Audiology	Behavioral Analyst - Autism Program
Case Management	Certified Diabetic Educator
Child Psychology	Christian Science Practitioner
Counselor, Alcohol & Drug	Crisis Diversion
Doctor of Naprapathy	Early Intervention
Employee Assistance Program (EAP) Counselor	Genetic Counselor
Hearing Instrument Specialist	Home Health Aide
Home Health Care Agency	Home Health/Home Infusion/Home IV Therapy
Home Health/Private Duty Nurse	Homemaker Aide
Homeopathic Medicine	Lactation Specialist
Licensed Professional Counselor	Licensed Vocational Nurse
Marriage & Family Therapy/Licensed Marriage & Family Therapy	Massage Therapy
Master of Social Work	Neuropsychology
Nurse, Licensed Practical	Nurse, Registered
Nutritionist (Registered Dietician)	Optician
Other Mental Health	Pastoral Counselor
Pediatric Nutrition	Psychiatric Social Work
Psychoanalyst	Psychology, Clinical (Doctor of Psychology)
Social Worker (Registered Social Worker)	Social Worker, Licensed Clinical/Medical
Social Worker, Marriage & Family	Substance Abuse Services, Alcohol & Drug
Surgical Technician	Visiting Nurse
Waiver Nursing	

There is a wide variety of CPT and Healthcare Common Procedure Coding System (HCPCS) codes that specifically and accurately identify and describe the services and procedures performed by nonphysician health care professionals.

For more complete information regarding reporting E/M services from physical or occupational therapists refer to the Physical Medicine & Rehabilitation: PT, OT, and Evaluation & Management Policy.

Definitions	
Physician	A Doctor of Medicine (MD) or Doctor of Osteopathy (DO)

State Exceptions	
Kentucky	Per State Regulation, Kentucky Medicaid allows Pharmacists to bill E/M CPT code 99401 with DX code Z71.85
Maryland	Per State Regulations, Maryland Medicaid allows Pharmacist to bill E/M CPT code 99211 & 99202.
Massachusetts	Per State Regulations, Massachusetts allows reimbursement of CPT code 99429 for Audiologist
Nebraska	Per State Regulations, Nebraska Medicaid allows reimbursement of CPT code 99429 with EP modifier for Lactation specialist

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New Jersey	Per State Regulations, New Jersey allows reimbursement of CPT code 97802, 97803 and 97804 for Nutritionists.
New Mexico	New Mexico Medicaid allows Pharmacists to bill E/M CPT codes 99202-99499.
North Carolina	Per State Regulations, North Carolina Medicaid allows reimbursement of CPT codes 99408 and 99409 for Licensed Psychologist, Licensed Psychological Associate, Licensed Clinical Mental Health Counselor, Licensed Clinical Mental Health Counselor Associate, Licensed Clinical Social Worker, Licensed Social Worker Associate, Licensed Marriage and Family Therapist, Licensed Marriage and Family Therapist Associate, Licensed Clinical Addiction Specialist and Licensed Clinical Addiction Specialist Associate. Per State Regulation, North Carolina Medicaid allows Pharmacies to bill E/M CPT codes 99202 & 99212.
Ohio	In addition, Ohio Medicaid allows Pharmacists to bill E/M CPT 99202, 99203, 99211, 99212, 99213, 99214, 99215, 90460, 90471, 90472, 90473, 90474 and 96372. Per State Regulation, OH Medicaid allows reimbursement of 99211 for Licensed Practical Nurse (LPN) and Registered Nurse (RN)
Virginia	Per State Regulations, Virginia Medicaid allows Pharmacist to bill E/M CPT code 99202, 99211, 99212 and 99213.
Washington	Washington Medicaid allows Pharmacists to bill E/M CPT 99211-99215, 99202-99205, 99407, 99417,99421-99422,99408,96372,99307-99310,99347-99350, H0030, H2011, H0046, H2015, G2212, and T1001. Per State Regulations, WA Medicaid allows reimbursement of CPT code 99211 for Clinical Nurse Non Behavioral, Private Duty Nurse, Visiting Nurse, Licensed Vocational Nurse, Certified Nurse Midwife, Nurse - Clinical Mental Health, Nurse – LPN, Nurse Prac - Mental Health, Nurse – RNFA, Nurse – RN, Pediatric Nurse Practitioner and Psychiatric Nurse.
Washington DC	Per State Regulations, DC does not cover CPT code 99091
Wisconsin	Wisconsin Medicaid allows Pharmacists to bill E/M CPT codes 99091, 99202-99499 and 98000-98015.

Questions and Answers	
1	**Q:** Is it appropriate for a Registered Dietitian performing Medical Nutrition Therapy to report this service with CPT code 99401? **A:** No. CPT code 99401 is an E/M code which Registered Dietitians should not use to report services because they are nonphysician health care professionals. There are more accurate codes that identify and describe Medical Nutrition Therapy to be reported by Registered Dieticians, such as, CPT 97802.
2	**Q:** Is it appropriate for home health specialties performing a service in a patient's residence to report 99348? **A:** No. 99348 is an E/M code which home health specialties should not use to report services because they are nonphysician health care professionals. There are more specific CPT and HCPCS codes that accurately identify and describe the services and procedures performed by home health specialties.
3	**Q**: Is it appropriate for an Audiologist performing an evaluation to report this service with CPT code 99213? **A**: No. CPT code 99213 is an E/M code, which an Audiologist should not use to report services because they are nonphysician health care professionals. There are more accurate codes that describe evaluation services performed by an Audiologist (e.g., CPT code 92620).

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Resources

Individual state Medicaid regulations, manuals & fee schedules

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

Centers for Medicare and Medicaid Services, Healthcare Common Procedure Coding System, HCPCS Release and Code Sets

History

9/6/2026	Policy Version Change State Exceptions Section: Ohio Updated History section: Archived entries prior to 09/06/2024
7/19/2026	Policy Version Change State Exceptions Section: Ohio Updated
6/28/2026	Policy Version Change State Exceptions Section: Ohio Updated History section: Archived entries prior to 06/28/2024
3/8/2026	Policy Version Change State Exceptions Section: Ohio Updated
2/8/2026	Policy Version Change State Exceptions Section: Washington Updated History section: Archived entries prior to 02/08/2024
10/1/2025	Policy Version Change
8/17/2025	Policy Version Change Policy Section: List for Nonphysician Health Care Professionals for Medicaid Products Not Allowed to Report E&M Services Updated
7/13/2025	Policy Version Change State Exceptions Section: Wisconsin Updated
7/1/2025	Policy Version Change State Exceptions Section: California Removed History section: Archived entries prior to 7/1/2023
3/23/2025	Policy Version Change State Exceptions Section: New Mexico Updated
2/16/2025	Policy Version Change State Exceptions Section: Washington Updated
1/12/2025	Policy Version Change Policy Section: Added CPT codes 98000-98016 History section: Archived entries prior to 1/12/2023
9/8/2024	Policy Version Change State Exceptions Section: North Carolina Updated History section: Archived entries prior to 9/8/2022

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5/15/2010	Policy implemented by UnitedHealthcare Community Plan

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