

UnitedHealthcare Telehealth

Frequently asked questions

Overview

Telehealth services are making it even easier for UnitedHealthcare members to get the care they need while giving providers additional ways to connect with their patients through technology.

Telehealth gives care providers more options for delivering quality care consistently to patients, whether through an in-person visit or an audio-video chat. And patients living in rural or remote locations are given access to care that may otherwise be out of reach, which can help improve people's health more efficiently.

We're providing the answers to common questions about UnitedHealthcare's portfolio of virtual care services. Telehealth may include (but is not limited to):



Care providers using interactive, real-time technologies, like audio-video, to deliver health care services to individuals



Communication-based technology services such as virtual check-ins, remote patient monitoring and electronic visits

Frequently asked questions

How does telehealth benefit individuals?

Telehealth services make it even easier for people to get the personal care they need from doctors they can trust – when and where they need it. People enjoy the ease and time savings that come with getting care conveniently, from home or work, or by consulting a care provider after hours for the unexpected.

For those with chronic or routine health needs, telehealth offers an easy way to stay connected to their provider for check-ins and follow-up care. That can translate into stronger patient-doctor relationships, better patient experiences and improved health.

How does telehealth benefit care providers?

Telehealth makes good use of clinicians' limited time, and it's an efficient, personal way to engage patients regularly to keep them healthier, especially when an in-person visit may not be an option.

- **Support quality care:** Delivering quality care doesn't always require an in-person visit – and more convenient visits may help people stick with care plans.
- **Appeal to busy patients:** A thriving medical practice delivers excellent care in ways that cater to people's busy lives and are responsive to shifting consumer preferences.
- **Promote efficiency:** Telehealth modernizes the practice of medicine and makes good use of clinicians' limited time. It eliminates waiting-room logjams, may help physician practices extend care to more patients with the same resources and can help make it easier to conduct peer-to-peer consultations when necessary.

How does telehealth benefit employers?

Telehealth can mean a more productive workforce for employers. It helps employees more easily connect to the care they need, with less time away from work as a result.

How does telehealth benefit the health care system?

Telehealth can help improve the provider, member and employer experience by using technology to advance efficiency, access and modernization in care delivery.

Telehealth technology

What kind of technology do UnitedHealthcare members need to access telehealth services?

Members can have a telehealth visit with care providers by using a computer, tablet or smartphone. Telehealth visits use secure, interactive technology that includes live audio-video capabilities. [Learn more](#)

What technology does a provider need to get started with telehealth?

Care providers have flexibility to determine the technology that will work best for their patients and staff as long as it enables HIPAA-compliant, interactive audio and video exchanges in real time. Information from telehealth visits can be integrated into patients' existing medical records. The technology used also must comply with all security and confidentiality requirements set by federal and state regulations. [Learn more](#)

How do care providers delivering care using telehealth technology keep patient information private and secure?

Just like in-person visits, care providers and health organizations put measures in place to help ensure compliance with federal and state laws concerning the security and confidentiality of patient information. The technology used in telehealth visits and the way they are conducted help ensure that health information stays safe and conversations between providers and patients are private.

Telehealth visits

Do care providers need to be contracted with UnitedHealthcare to receive reimbursement for telehealth visits?

For benefit plans that include out-of-network coverage, UnitedHealthcare will reimburse both participating and non-participating care providers who submit appropriate telehealth claims.

How can physical exams and preventive care services be completed through telehealth?

Although a complete hands-on physical exam cannot be accomplished via telehealth, providers can do guided exams and request their patient to check their temperature and weight, perform a blood pressure (BP) measurement (if there's an at-home BP monitor), show range of motion and circulation, demonstrate respiratory effort, report sensation of fingers/limbs, etc. Providers can also document cognitive function of a patient as observed during the telehealth visit. Some patient's conditions will require a hands-on assessment.

During a telehealth visit, providers can also address multiple aspects of preventive care: perform general health screenings, review medical and family history, provide counseling and education, review medications and order preventive tests appropriate for the patient. A telehealth visit can also give a provider the opportunity to assess their patient's home environment for safety.

Can Annual Wellness Visits be done by telehealth?

Yes. For UnitedHealthcare Medicare Advantage plans, during the COVID-19 national public health emergency period, Annual Wellness Visits are a covered telehealth service by the Centers for Medicare & Medicaid Services (CMS).

How can an Annual Wellness Visit be completed through telehealth?

For UnitedHealthcare Medicare Advantage plans, Annual Wellness Visits require specific components and can still be performed using telehealth including risk assessments and other screening tools, establishment of history, vitals, etc. It's important to review the required components for Annual Wellness Visits and ensure all components are accomplished and documented. Please refer to the 2020 [Medicare Advantage Preventive Screening Guidelines](#).

Telehealth coverage

What type of telehealth services do UnitedHealthcare offer its members?

UnitedHealthcare offers several types of telehealth services including, but not limited to:

- **Care from personal physicians.** Pre-scheduled, secure and interactive audio-video visits help people conveniently follow up on chronic conditions or routine health concerns with the care providers they know and trust.
- **24/7 Virtual Visits to deal with the unexpected.** UnitedHealthcare members can tap into a national network of clinicians by secure, realtime audio-video on their computer or mobile device – at any time, day or night. Whether it's for a worrisome cough, pink eye or another common ailment, the Virtual Visits program is available to members of all commercial health plans and group Medicare Advantage plans, as well as select individual Medicare Advantage plans.

- **Behavioral health.** Many members with behavioral health coverage through Optum Behavioral Health can seek virtual consultations through a network of clinicians licensed in their state. Telehealth behavioral health services are available now to commercial, as well as select Medicaid and Medicare Advantage plan members.
- **Specialized needs and remote care.** Telehealth technology enables fast diagnosis and care for specialized needs. For example, primary care providers in some states are using audio-video technology to consult a dermatologist – who might be hours away by car – to evaluate and diagnose skin abnormalities. Medicare members with congestive heart failure are using wearables to transmit vital health information to their doctors who can remotely monitor the members' condition.

How will UnitedHealthcare apply state-specific variances of services covered? (services)

When reviewing claims, UnitedHealthcare will begin by applying our standard telehealth reimbursement policy by health plan. When state-specific rules, regulations and emergency periods exist for telehealth services, we will meet those requirements. If the UnitedHealthcare telehealth reimbursement policy includes services that are not included in the state-specific rules; UnitedHealthcare's reimbursement policy will apply.

How will UnitedHealthcare apply member benefits for state-specific variances? (coverage)

When reviewing claims, UnitedHealthcare will begin by applying coverage according to the member's benefit plan. When state-specific rules, regulations and emergency periods exist that include a telehealth cost-share waiver, we will meet those requirements. If the state-specific requirements for cost-share waiver expire at a later date or apply to different services than stated in the UnitedHealthcare's COVID-19 Telehealth Temporary Provisions on UHCprovider.com, we will meet the state-specific requirements.

How much do telehealth services cost members?

The cost depends on the type of service and the member's benefit plan design. Generally, for a telehealth visit with the individual's regular primary care provider, a UnitedHealthcare member pays the same copayment or coinsurance as they would for an in-person office visit, without the time and travel needed to get to a clinic. Quick, one-time consultations through the Virtual Visits program may cost less than \$50.

Do you require a referral to a specialist when services are provided through telehealth?

Referrals are not required for primary care visits for any of our plans. However, some plans may have referral requirements for specialists. You can use our [referralLink tool](#) to submit and check member referral for all benefit plans.

Can UnitedHealthcare members access doctors any time of day or night?

This will depend on a member's benefit plan design and accessibility. Scheduled telehealth visits with an individual's primary care provider are available during the hours set by their office. They are conducted like in-person appointments – the difference is that the member and provider are communicating with technology's help, instead of in the office.

The Virtual Visits program is designed to give members 24/7 access to care when the unexpected pops up. UnitedHealthcare members can tap into a national network of clinicians using a mobile device or computer for help with minor, isolated health issues like respiratory infections and other common ailments.

Telehealth documentation, coding and billing



What are the documentation requirements for telehealth visits?

A patient visit performed through telehealth should be documented to the same level as an in-person visit, reflecting exactly what was done during the visit. The provider should also document that the visit was done through audio-video telecommunications.

Which providers can submit claims for telehealth services?

UnitedHealthcare generally follows CMS policies on the types of care providers eligible to deliver telehealth services, although individual states and member benefit plans may define eligible care providers differently. These may include:

- Physician
- Nurse practitioner
- Physician assistant
- Nurse-midwife
- Clinical nurse specialist
- Registered dietitian or nutrition professional
- Clinical psychologist
- Clinical social worker
- Certified registered nurse anesthetist

For specific health plan information on provider eligibility, view our [telehealth reimbursement policies](#).

Which place of service should be documented on the claim?

During the national public health emergency period, please view the [COVID-19 Telehealth](#) page on [UHCprovider.com/covid19](#) > Telehealth Services, for place of service and billing guidance by plan.

Effective Jan. 1, 2021, UnitedHealthcare Medicare Advantage and commercial plans will allow certain CMS-eligible telehealth services when billed with the member's home as an originating site.

- For commercial health plans, providers will be allowed to bill for telehealth services performed while a patient is at home using place of service 02.
- For Medicare Advantage health plans, follow the current CMS telehealth code list and billing requirements during the national public health emergency period.
- For UnitedHealthcare Community Plans, we'll continue to follow state regulations and guidelines regarding telehealth services and reimbursement. If no state guidance is provided, UnitedHealthcare guidelines may apply, if appropriate.

What happens if I submit a telehealth claim without place of service 02?

For commercial health plans, claims should be billed with POS 02. If we receive a claim with a different place of service that we can otherwise identify as a telehealth claim, you may have a chance to submit a corrected claim with the correct place of service.

For Medicare Advantage health plans, continue to follow the current CMS telehealth code list and billing requirements during the national public health emergency period.

Do care providers need to use a telehealth modifier?

Modifiers are not required to be billed with place of service 02. Additional details may vary by plan.



Resources

Where can I find more information?

For more information on telehealth resources, education and reimbursement policy updates, visit **UHCprovider.com/telehealth** or contact your Provider Advocate.

Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Health plan coverage provided by UnitedHealthcare of Arizona, Inc., UHC of California DBA UnitedHealthcare of California, UnitedHealthcare Benefits Plan of California, UnitedHealthcare of Colorado, Inc., UnitedHealthcare of the Mid-Atlantic, Inc., MAMSI Life and Health Insurance Company, UnitedHealthcare of New York, Inc., UnitedHealthcare Insurance Company of New York, UnitedHealthcare of Oklahoma, Inc., UnitedHealthcare of Oregon, Inc., UnitedHealthcare of Pennsylvania, Inc., UnitedHealthcare of Texas, Inc., UnitedHealthcare Benefits of Texas, Inc., UnitedHealthcare of Utah, Inc., UnitedHealthcare of Washington, Inc., Optimum Choice, Inc., Oxford Health Insurance, Inc., Oxford Health Plans (NJ), Inc., Oxford Health Plans (CT), Inc., All Savers Insurance Company, or other affiliates. Administrative services provided by OptumHealth Care Solutions, LLC, OptumRx, Oxford Health Plans LLC, United HealthCare Services, Inc., or other affiliates. Behavioral health products provided by U.S. Behavioral Health Plan, California (USBHPC), or its affiliates.

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