

## **Update: United Healthcare Delays New Compliance Requirements for the Laboratory Test Registration Protocol**

In late October, APS sent a [White Paper](#) indicating United Healthcare has received much opposition to its new policy requiring in network laboratories to register all tests offered to referring physicians, with a unique test order code. In that article, APS indicated that the American Hospital Association lead the way in opposing UHC's policy as it created burdens on providers and contradicts HIPAA standards as a whole, which require use of standardized code sets for describing services. As a recent development, UHC has recently indicated that this program will be delayed a full year, with the new effective date of 1/1/2022. Laboratories must register their tests with the program by 12/1/2021. This is according to the UHC [Laboratory Test Registry Protocol](#) website.

This is good news for the lab community, as this policy is unclear in its intent, processes and application. APS will continue to monitor this and all carrier policies that affect your revenue. If you have further questions, please contact your Practice Manager. The initial article on this topic follows this communication for convenience.

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On January 1, 2021 United Healthcare (UHC) will put into effect its Laboratory Test Registry Protocol. Laboratories will be required to submit the laboratory's unique test code for each service performed. Each test code submitted on a claim must match a corresponding laboratory test registration provided in advance to UHC. Failure to submit the lab test with the code will result in the claim being denied. The new requirements will apply to most United Healthcare Commercial, Medicare Advantage and United Healthcare Community Plan networks. To ensure compliance with the new requirements, UHC is asking for free standing and outpatient hospital laboratory providers to register their laboratory tests prior to December 1, 2020.

United Healthcare has stated that simply registering your laboratory services and placing test codes on laboratory claims doesn't guarantee UHC will pay the claim. Payment for the covered services is based on the member's eligibility on the date of the service, claim processing requirements and the terms of your Participation Agreement.

Included is a [link](#) to the UHC notification and their [frequently asked questions](#).

As always, APS will continue to monitor this topic closely and provide updates when they become available. Please contact your APS Practice Manager with further questions.