

# UnitedHealthcare Laboratory Test Registry Protocol

## Frequently Asked Questions

### Overview

We're committed to working with members and care providers to help support improved population health outcomes, positive care experiences and affordable products. An increasingly important part of this commitment includes coordinating coverage guidelines and policies for new and emerging technologies, including lab testing.

Effective **Oct. 1, 2020**, in-network, freestanding and outpatient hospital laboratory claims for most laboratory testing services must contain your laboratory's unique test code. In addition, each test code submitted on a claim must match a corresponding laboratory test registration provided in advance to UnitedHealthcare.

These requirements apply to most UnitedHealthcare commercial, UnitedHealthcare Medicare Advantage and UnitedHealthcare Community Plan networks. When a laboratory test CPT\* code or Healthcare Common Procedure Coding System (HCPCS) code is billed, a corresponding test code with a matching test registration will be required for each claim line submitted, or we'll deny the claim.

### Frequently Asked Questions

#### When do these requirements for in-network freestanding and outpatient laboratories begin?

Laboratory providers must register their laboratory tests before Sept. 1, 2020. Beginning with dates of service on Oct. 1, 2020, test codes must be on claims for in-scope laboratory test services.

#### What is a laboratory test code?

A laboratory test code is a laboratory's unique identifier that a physician would use to order a test. This should uniquely identify the test offered by the laboratory and correspond to what the physician ordered, whether it was a single test that is ultimately billed as a single procedure code or a test "panel" that ultimately bills as multiple procedure codes. Most laboratories define a "test code," "order code" or "test identifier" to accomplish this precise identification of the test being ordered and rendered that is separate from the one or more procedure codes used for billing purposes.

## Which laboratory testing services are included for this protocol?

All freestanding and outpatient hospital laboratory testing services are included for this protocol, **except**:

- Laboratory test services requiring notification/prior authorization by the Genetic and Molecular Lab Testing Notification/Prior Authorization process
- Laboratory test services requiring placement of the National Institutes of Health (NIH) Genetic Testing Registry (GTR) ID (per UnitedHealthcare's Molecular Pathology Reimbursement policy)
- Laboratory test services rendered by outpatient physician office laboratories (i.e., those billing place of service 11)

If there are any additional updates to the list of excluded laboratory services, we'll include these updates on [UHCprovider.com/testregistry](https://uhcprovider.com/testregistry).

## Why is UnitedHealthcare requiring test registration?

The test registration provides UnitedHealthcare with information needed to identify the specific test performed. In the absence of industry-standard ways to identify the specific test being performed, requiring test registration is a reasonable alternative that achieves needed test transparency.

## What if an in-network laboratory doesn't register their laboratory services and place its test codes on a laboratory claim?

We may deny claim submissions for in-scope laboratory services that aren't registered and don't include a test code on the laboratory services claim.

## Can the laboratory test code be placed on claims prior to Oct. 1, 2020?

Yes.

## Why are molecular-genetic laboratory testing services not in scope?

Molecular-genetic testing isn't currently in scope due to overlap with the Molecular Pathology policy, which requires that a GTR ID be placed on some claims.

In addition, molecular-genetic testing laboratories don't need to put a test ID on genetic tests that are included in the Genetic and Molecular Lab Testing Notification/Prior Authorization program. You can find a list of these genetic tests [here](#).

If you have questions about the Molecular Pathology policy or the Genetic and Molecular Lab Testing Notification/Prior Authorization program, please visit [UHCprovider.com/genetics](https://uhcprovider.com/genetics) or email [united\\_genetics@uhc.com](mailto:united_genetics@uhc.com).

## Are there any requirements the ordering physician needs to follow in order to comply with this protocol?

No, there is no ordering physician impact.

## Test Registration Submission

### How do I submit a test registration?

You can submit test registrations through the Test Registry tool on Link, which you can access through **UHCprovider.com**.

Here's how to get started:

1. Request access to the Test Registry application. From **UHCprovider.com**, select the Link icon in the upper right-hand corner of the home page.



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2. Sign in using your Optum ID.

A sign-in form titled "Sign In With Your Optum ID". It contains two input fields: "Optum ID or email address" and "Password". Below the fields is a "Sign In" button. To the right of the fields, there are links for "Additional options: Manage your Optum ID" and "What is an Optum ID?". At the bottom left, there are links for "Forgot Optum ID" and "Forgot Password".

**Note:** An Optum ID is required to access Link. If you don't have an Optum ID, go to **UHCprovider.com**, select the "new user" icon and select "create an Optum ID."

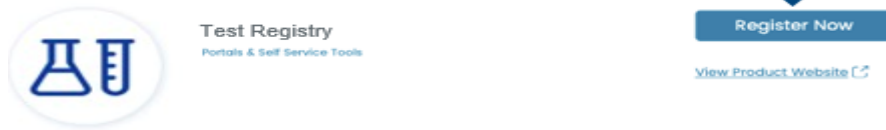


[Create an Optum ID](#)

3. On the Link Marketplace, enter "Test Registry" and select "All Apps" from the dropdown. It will automatically conduct a search.

A screenshot of the Link Marketplace search interface. It features a blue header with a shopping cart icon and the text "Link Marketplace". Below the header, there is a search bar with the text "Test Registry" and a dropdown menu with "All Apps" selected. The search bar has a magnifying glass icon on the left and a close button (X) on the right.

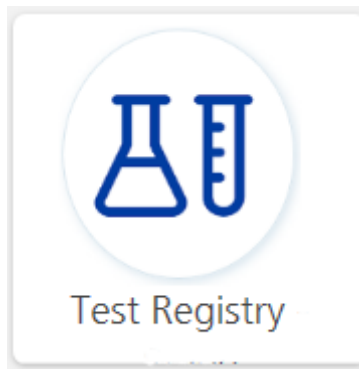
- Choose the “Test Registry” application, select “Register Now” and submit your access request.



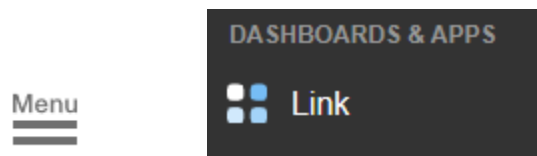
**Note:** After registration, the status will be in “Request Under Review” until it is approved. Please allow up to 7 days from the original request date for review. You’ll receive an email when your access is determined.



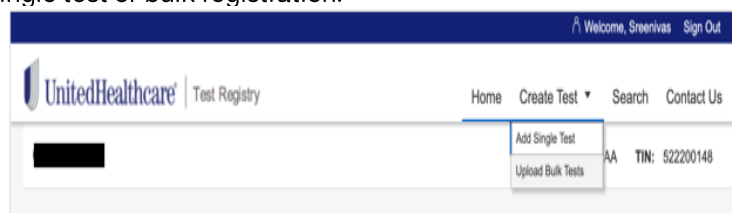
- Once registered, go back to Link (see steps 1 and 2 above) and select “Test Registry” Application that appears on your Link Dashboard



You can navigate to the Link Dashboard by selecting “Link” on the left-hand side (you may need to click on “Menu” in the upper left first).



- Enter a single test or bulk registration.



## Can I submit more than one test registration at a time?

Yes, you can submit either a single test or a bulk registration.

## Where should I place the test code on a claim?

For information about where to place the test code on the claim, please reference the following table:

Claim Form	Claim Test Code Submission Placement
<b>CMS-1500</b>	Each time a laboratory CPT® code or HCPCS code is populated in <b>Item Number 24D</b> , your <b>corresponding test code, prefixed with “LAB”</b> , should be placed in the <i>shaded section above 24A through 24G</i> .
<b>UB04 or CMS 1450</b>	Each time a laboratory CPT code or HCPCS code is populated in <b>Field Location 44</b> , your <b>corresponding test code, prefixed with “LAB”</b> , should be placed in <b>Field Location 43</b> .
<b>HIPAA 5010 837</b> <i>Professional</i>	Each time a laboratory CPT code or HCPCS code is populated in the <b>SV101-2 Professional service section</b> , your <b>corresponding test code, prefixed with “LAB”</b> , should be placed in the <b>Loop 2400 Service Line Number (NTE – Notes section)</b> . For example: <ul style="list-style-type: none"><li>• <b>NTE *ADD*LAB(test code goes here)</b></li></ul>
<b>HIPAA 5010 837</b> <i>Institutional</i>	Each time a laboratory CPT code or HCPCS code is populated in the <b>SV202-2 Institutional service section</b> , your <b>corresponding test code, prefixed with “LAB”</b> , should be placed in the <b>Loop 2400 Service Line Number (NTE – Notes section)</b> . For example: <ul style="list-style-type: none"><li>• <b>NTE *TPO*LAB(test code goes here)</b></li></ul>

## Do I include a space or any other character between the “LAB” prefix and my test code on the claim?

No. When placing the test code on the claim (see above), prefix the test code with “LAB” (no quotes) with no spaces or other characters.

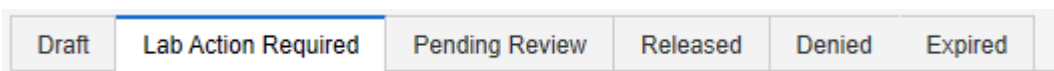
## Do I include the “LAB” prefix when registering my test code?

No. In the registration form, simply enter your test code without the “LAB” prefix used on the claim.

## Checking the Status

### What do the different test registration statuses mean?

The Test Registry application lists your registered tests by status on the various tabs displayed on the home page of the application.



The following table explains the various test registration statuses:

Test Registration Status	Definition
<b>Draft</b>	Draft test registrations have not been fully submitted to UnitedHealthcare. Once you've completed the test registration details, please click on "Submit."
<b>Lab Action Required</b>	Test Registrations in "Lab Action Required" status need further information from the laboratory before the test registration can be placed into "Released" status. You can find more information in the "Return Reason" field displayed in the "Test Application Status" section of the test registration details.
<b>Pending Review</b>	Test Registrations in "Pending Review" status are being reviewed by UnitedHealthcare before typically being "Released" or placed into "Lab Action Required" status.
<b>Released</b>	Test Registrations in "Released" status need no further information from the laboratory before claims referencing the released test may be submitted to UnitedHealthcare.
<b>Denied</b>	"Denied" test registrations have been reviewed and denied by UnitedHealthcare. Further information will be provided in the "Denial Reason" field displayed in the "Test Application Status" section of the test registration details.
<b>Expired</b>	"Expired" test registrations have either reached their "Available Through Date" or have otherwise expired while in the "Draft", "Lab Action Required" or "Pending Review" status. Such test registrations are displayed on the "Expired" tab of the Test Registry tool home page.  Note: We'll deny claims using this test code for dates of service after the "Available Through Date" unless there's another Released Test Registration using that same test code.

## Claim Denials

### What are examples of cases in which UnitedHealthcare would automatically deny a claim related to this protocol?

We will deny the claim in the following situations:

- Submitting a claim with a CPT/HCPSC code without including a test code.
- Submitting a claim with a test code that doesn't match the registered test.
- Submitting a claim for a test code that isn't in "released" status.
  - You can check the status of your test registrations on the home page of the Test Registry tool.
- Submitting a claim with a CPT/HCPSC code that wasn't included in the registration for the test code.
- Submitting a claim with a procedure code that exceeds the units that were registered for the test code.
- Submitting a claim with a procedure code with a modifier that wasn't registered for the test code.
- Submitting a claim with a test code that has an availability date after the date of service.
- Submitting a claim with a test code that has an availability through date before the date of service.
  - Test registrations with past availability through dates will be displayed as "Expired" in the Test Registry application.

### If UnitedHealthcare denies a claim due this protocol, can I balance bill the member?

No, you are prohibited from balance billing the member.

## Exclusions

### Are capitated laboratory services encounters subject to this protocol?

No, test codes aren't required for capitated laboratory services.

### Which plans are excluded from this protocol?

The following plans are currently excluded from this protocol:

- Rocky Mountain Health Plan
- UnitedHealthcare River Valley Group
- Sierra Health and Life Insurance Co., Inc.
- Sierra Healthcare Options, Inc.
- Health Plan of Nevada, Inc.
- Dual Eligible Special Needs Plan (DSNP)
- UMR – United Medical Resources
- UnitedHealthOne
- Golden Rule
- Oxford Health Plans
- Student Resources
- Medica HealthCare
- Harvard Pilgrim Health Care
- AARP® Supplemental Plans insured by UnitedHealthcare Insurance Company
- WellMed

## Resources

### Where can I find more information on this protocol?

For more information about this process, future updates and training, visit [UHCprovider.com/testregistry](https://UHCprovider.com/testregistry). If you have questions, please direct them to [lab\\_test\\_registry@uhc.com](mailto:lab_test_registry@uhc.com).

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