



Reimbursement Guidelines for Non-Emergent ER Visits

Please review the following guidelines for assistance with billing non-emergent emergency room (ER) visits for UnitedHealthcare Community Plan members. We're updating our guidelines to comply with the Iowa Medicaid Enterprise (IME) [Informational Letter 1753](#) and [1758](#) about hospital non-emergent ER visit reimbursement.

As a reminder, critical access hospitals (CAHs) are reimbursed based on the hospital's outpatient Medicaid cost-to-charge percentage methodology. Outpatient hospital services not provided by critical access hospitals are reimbursed using Ambulatory Payment Classifications (APC) methodology.

If an ER visit doesn't result in an inpatient hospital admission and doesn't involve an emergent condition for a member, the payment for their care depends on whether a referral was made. A list of ICD-10 diagnosis codes considered emergent by IME is available at dhs.iowa.gov > Providers & Partners > Claims and Billing > Emergency Diagnosis Code > [ICD-10 Code](#).

- For Medicaid members who **were not** referred to the ER by appropriate medical personnel such as a referring physician, payment is made at 50 percent of the usual APC amount or (for CAHs) 50 percent of the usual cost-to-charge percentage amount as applicable.
- For Medicaid members who **were** referred to the ER by appropriate medical personnel, payment is made at 75 percent of the usual APC amount or (for CAHs) 75 percent of the cost-to-charge percentage as applicable. These claims won't automatically be processed at 75 percent of the APC or 75 percent of the usual cost-to-charge percentage amount as applicable, so you'll need to submit a claim reconsideration with documentation from the ER record that verifies the name of the physician or urgent care clinic who referred the member to the ER.

Claim Reconsideration Submission

If you need to file a claim reconsideration request, use the claimsLink app on Link – your gateway to UnitedHealthcare's online tools and resources. To access it, go to UnitedHealthcareOnline.com and sign in to Link using your Optum ID, then select the claimsLink app.

If you prefer to mail your request, the printed version of the Claim Reconsideration form is available at UnitedHealthcareOnline.com > Tools & Resources > [Forms](#) > Paper Claim Reconsideration. Mail the completed Claim Reconsideration form to:

UnitedHealthcare
Attn: Claims
P.O. Box 5220
Kingston, NY 12402-5220

If you're not satisfied with the outcome of a claim reconsideration request, you may submit a claim dispute using the process outlined in the Provider Manual in the Claims chapter at UHCCCommunityPlan.com > For Health Care Professionals > Iowa > [Provider Administrative Manual](#).

Questions?

Please call Provider Services at **888-650-3462** or contact your Provider Advocate. Thank you.