



PROVIDER ALERT



Important Change: Billing Process for Physical Therapy Services in Nursing Facilities

Beginning Oct. 2, 2017, UnitedHealth Care Community Plan of Nebraska will change the claims submission process for billing therapy services in nursing facilities. The change will apply for dates of service on or after Jan. 1, 2017.

Old Submission Process

When physical, occupational or speech therapists were employed by the nursing facility, they submitted therapy claims on a CMS-1500 claim form under their individual provider numbers. The nursing facility was not allowed to bill for those services.

New Submission Process

Now the nursing facility must bill UnitedHealthcare Community Plan of Nebraska on a UB-04 claim form under the facility provider number. This applies only for staff therapists employed by the facility.

If you are a physical, occupational or speech therapist who contracts with the nursing facility, your billing process will stay the same. You will continue to bill UnitedHealthcare Community Plan of Nebraska on a CMS-1500 claim form under your individual provider number.

We'll Reprocess Affected Claims

If you are a physical, occupational or speech therapist who contracts with the nursing facility and have previously billed UnitedHealth Care Community Plan of Nebraska on a UB-04 for outpatient therapy services, we will automatically reprocess claims submitted on a UB-04 before Oct. 9, 2017. There is no need for you to resubmit.

If you'd like updates on the status of this project, please visit UHCCommunityPlan.com > For Health Care Professionals > Nebraska > Bulletins > [Open Issues log](#).

We're Here to Help

If we can answer any questions for you, please call Provider Services at 866-331-2243. Thank you.