



Summary of Reimbursement Policy Revision for UnitedHealthcare Community Plan

Revised Reimbursement Policy: Effective Jan. 1, 2017

The following reimbursement policy will be revised effective for claims with a date of service on or after Jan. 1, 2017.

- **Lupron Depot/Lupron Depot-PED Reimbursement Policy**

The following updates will be made to the Lupron Depot/Lupron Depot-PED Reimbursement Policy:

- The policy name will be changed to **Gonadotropin Releasing Hormone Analogs**.
- In addition to the Lupron Depot/Lupron Depot-PED products (J1950, J9217), the policy will also include the following HCPCS codes:
 - J3315 - Triptorelin pamoate – Trelstar
 - J9155 - Degarelix (Firmagon)
 - J9202 - Goserelin acetate (Zoladex)
 - J9218 – Leuprolide acetate
 - J9225 - Histrelin acetate (Vantas)
 - J9226 – Histrelin acetate) (Supprelin LA)

The policy will continue to apply only to non-cancer diagnoses.

As with all UnitedHealthcare Community Plan policies, other factors affecting reimbursement may supplement, modify or supersede them, including, but not limited to, federal and/or state regulatory requirements, physician or other provider contracts, and/or the member's benefit coverage documents.

Unless otherwise noted as follows, these reimbursement policies apply to services reported using the CMS-1500 or its electronic equivalent, or successor form. UnitedHealthcare Community Plan reimbursement policies do not address all issues related to reimbursement for services rendered to our members, such as the member's benefit plan documents; our medical policies; and the UnitedHealthcare Community Plan Physician, Health Care Professional, Facility and Ancillary Provider Administrative Guide. Meeting the terms of a particular reimbursement policy is not a guarantee of payment. Likewise, retirement of a reimbursement policy affects only those system edits associated with the specific policy being retired. Retirement of a reimbursement policy is not a guarantee of payment. Other applicable reimbursement and medical policies and claims edits will continue to apply.

Once implemented, the policies may be viewed at UHCommunityPlan.com > For Health Care Professionals (click on the appropriate state) > Reimbursement Policies. In the event of an inconsistency or conflict between the information in this Provider Notification and the posted policy, the provisions of the posted reimbursement policy prevail. If you have any questions, please contact your Health Plan Representative or call the number on your Provider Remittance Advice/Explanation of Benefits.