

Procedure to Place of Service Policy, Professional

IMPORTANT NOTE ABOUT THIS REIMBURSEMENT POLICY

You are responsible for submission of accurate claims. This reimbursement policy is intended to ensure that you are reimbursed based on the code or codes that correctly describe the health care services provided. UnitedHealthcare Community Plan reimbursement policies uses Current Procedural Terminology (CPT®), Centers for Medicaid Services (CMS) or other coding guidelines. References to CPT or other sources are for definitional purposes only and do not imply any right to reimbursement.*

This reimbursement policy applies to all health care services billed on CMS 1500 forms and, when specified, to those billed on UB04 forms. Coding methodology, industry-standard reimbursement logic, regulatory requirements, benefits design and other factors are considered in developing reimbursement policy.

This information is intended to serve only as a general reference resource regarding UnitedHealthcare Community Plan's reimbursement policy for the services described and is not intended to address every aspect of a reimbursement situation. Accordingly, UnitedHealthcare Community Plan may use reasonable discretion in interpreting and applying this policy to health care services provided in a particular case. Further, the policy does not address all issues related to reimbursement for health care services provided to UnitedHealthcare Community Plan enrollees.

Other factors affecting reimbursement may supplement, modify or, in some cases, supersede this policy. These factors include, but are not limited to: federal &/or state regulatory requirements, the physician or other provider contracts, the enrollee's benefit coverage documents, and/or other reimbursement, medical or drug policies.

Finally, this policy may not be implemented exactly the same way on the different electronic claims processing systems used by UnitedHealthcare Community Plan due to programming or other constraints; however, UnitedHealthcare Community Plan strives to minimize these variations.

UnitedHealthcare Community Plan may modify this reimbursement policy at any time by publishing a new version of the policy on this Website. However, the information presented in this policy is accurate and current as of the date of publication.

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Application

This reimbursement policy applies to UnitedHealthcare Community Plan Medicaid Product.

This reimbursement policy applies to services reported using the 1500 Health Insurance Claim Form (a/k/a CMS-1500) or its electronic equivalent or its successor form. This policy applies to all products and all network and non-network physicians and other qualified health care professionals, including, but not limited to, non-network authorized and percent of charge contract physicians and other qualified health care professionals.

Policy

Overview

UnitedHealthcare Community Plan Procedure and Place of Service Policy addresses the reimbursement of Current Procedural Terminology (CPT®) and Healthcare Common Procedure Coding System (HCPCS) codes that are reported in a Place of Service (POS) considered inappropriate based on the code's description or available coding guidelines when reported by a physician or other qualified health care professional.

Reimbursement Guidelines

UnitedHealthcare will reimburse CPT and HCPCS codes when reported with an appropriate Place of Service (POS). UnitedHealthcare aligns with The Centers for Medicare & Medicaid Services (CMS) POS Code set, which are two-digit codes submitted on the CMS 1500 Health Insurance Claim Form or its electronic equivalent to indicate the setting in which a service was provided.

Code Description or Coding Guidelines

Many CPT and HCPCS codes include a Place of Service (POS) in their description or in their coding guidelines which indicate the place(s) of service where the code may be performed. For example, CPT code 94002 (*Ventilation assist*

and management, initiation of pressure or volume preset ventilators for assisted or controlled breathing; hospital inpatient/observation, initial day) would not be appropriate for reporting in an office or home POS because its code description identifies hospital inpatient or observation.

UnitedHealthcare Community Plan has established a list of CPT and HCPCS codes along with their appropriate places of service. For any code that is not on the list, the place of service is not limited.

Note that any procedure code reported with an appropriate place of service may also be subject to other UnitedHealthcare Community Plan reimbursement policies.

Non-Facility NA Indicator

According to the CMS National Physician Fee Schedule Relative Value File, the Non-Facility Indicator identified as “NA” indicates that “this procedure is rarely or never performed in the non-facility setting.” UnitedHealthcare will not consider for reimbursement CPT and HCPCS codes assigned the Non-Facility Indicator “NA” when reported without an appropriate POS.

Facility NA Indicator “NA”

According to the CMS National Physician Fee Schedule Relative Value File, the Facility NA Indicator identified as “NA” indicates that “this procedure is rarely or never performed in the facility setting.” by a physician or other qualified health care professional. Community Plan will not consider for reimbursement of CPT and HCPCS codes assigned the Facility NA Indicator “NA” when reported on a professional claim with a facility POS 21.

[CMS National Physician Fee Schedule Relative Value File](#)

State Exceptions

Arizona	Arizona Medicaid has a state specified procedure to place of service list.
Colorado	Colorado Medicaid allows: <ul style="list-style-type: none"> • 99202-99205 & 99211-99215 in POS 03 • 99217-99220 in POS 21, 51, 55, 61 & 62 • 99241-99245 in POS 31 & 32 • 99318 in POS 02 & 10 • H0011 in POS 55 • H0015 in POS 03, 04, 11, 13, 14, 31, 32, 33, 54 & 56 • H0019 in POS 13, 14 & 53 • H0035 in POS 22 & 53 • S9480 in POS 11, 52, 54 & 56 • A0425 and A0999 in 01, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 23, 24, 25, 26, 27, 31, 32, 33, 34, 49, 50, 52, 53, 54, 55, 56, 57, 60, 62, 65, 71, 72, 81, 99
Florida	Per state requirements: <ul style="list-style-type: none"> • H0035 is allowed in POS 53 • T1015 is allowed in POS 02 • L8614 is allowed in POS 22 by provider specialty type DME/Med Supply Co
Hawaii	Hawaii Medicaid does not allow: <ul style="list-style-type: none"> • 97153, 97154, 97155, 97156, 97157, 97158 & 0373T in POS 03 by ABA providers • T2033 in POS 12
Idaho	Idaho Medicaid allows conveyance code 99001 in place of service: 12, 25, 32. Per State Regulations:

	<ul style="list-style-type: none"> • Non-medical transportation can only be provided in POS: 99 – Other (Community) • T1015 is only reimbursable when billed on a professional claim type (CMS 1500 or 837P) with one of the following places of service: <ul style="list-style-type: none"> ○ 4 Homeless Shelter ○ 5 Indian Health Services ○ 6 Indian Health Service; Pro Facility ○ 7 Tribal 638; Free-standing Facility ○ 8 Tribal 638; Provider-based ○ 12 Home ○ 14 Group Home ○ 15 Mobile Unit ○ 16 Temporary Lodging ○ 50 Federally Qualified Health ○ 72 Rural Health Clinic ○ 99 Other Place of Service
<p>Indiana</p>	<p>Indiana Medicaid allows:</p> <ul style="list-style-type: none"> • G2078, G2079, G2067 & G2068 in POS 02 & 10 • H0010 in POS 55 <p>The state of Indiana allows FQHC/RHC to bill POS 03 for all procedure codes.</p> <p>Per state regulations the following codes are non-covered: 99027, 99056, 99070, 99483, G0490 and G9490.</p> <p>Indiana MLTSS procedure code T1028 is excluded from this policy Indiana MLTSS allows procedure code T2031 in POS 12 Per state regulations Indiana allows FQHC/RHC to bill T1015 in POS 2, 3, 4, 10, 12, 31 and 32</p>
<p>Kansas</p>	<p>Per Kansas Medicaid requirements:</p> <ul style="list-style-type: none"> • Refer to Telehealth/Virtual Health Policy, Professional and Facility for POS 02,10 • 59400, 59409, 59410, 59414 are not allowed in POS 12 • 90670 is not allowed, for ages 19 years and older, in POS 21,24,41,81 • 90935 is not allowed in POS 81 • 90673, 90684, 90747, 96372, J0882 is not allowed in POS 21,24,41,81 • 92002, 92004, 92012, 92014, 92015, 92020, 92025, 92071, 92072, 92081, 92082, 92083, 92100, 92132, 92133, 92134, 92250, 92285, 92310, 92311, 92312, 92313, 92314, 92315, 92316, 92317, 92325, 92326, 92370, S0580, S0500, V2020, V2100, V2101, V2102, V2103, V2104, V2105, V2106, V2107, V2108, V2109, V2110, V2111, V2112, V2113, V2114, V2115, V2118, V2121, V2199, V2200, V2201, V2202, V2203, V2204, V2205, V2206, V2207, V2208, V2209, V2210, V2211, V2212, V2213, V2214, V2215, V2218, V2219, V2220, V2221, V2299, V2300, V2301, V2302, V2303, V2304, V2305, V2306, V2307, V2308, V2309, V2310, V2311, V2312, V2313, V2314, V2315, V2318, V2319, V2320, V2321, V2399, V2410, V2430, V2499, V2500, V2501, V2502, V2503, V2510, V2511, V2512, V2513, V2520, V2521, V2522, V2523, V2530, V2531, V2623, V2624, V2625, V2626, V2627, V2628, V2710, V2715, V2760, V2782, V2783, V2784, V2799 only allowed in POS 05,07,11,15,17,19,21,22,23,27,49,50,71,72 • 93295 is not allowed in POS 04, 12, 99 • 94625, 94626 only allowed in POS 02,11,15,22 • 96160, 96161 only allowed in POS 11,12,17,19,20,22,23,25,49,50,53,57,62,71,72 • 97153, 97156 is only allowed in POS 02,04,10,11,12,15,20,27,53,99 • 98960 only allowed in POS 02,04,10,11,12,13,14,15,16,17,18,20,27,49,53,55,57,58,71 • 98961, 98962 only allowed in POS 02,04,10,11,12,13,14,15,16,17,18,20,49,53,55,57,58,71 • 99050, 99051 only allowed in POS 11 • 99070 only allowed in POS 19,22,23,24,65 • 99202, 99203, 99204, 99211, 99213, 99214, 99215 only allowed in POS 02,04,10,11,12,13, 15,19,20,22,23,50,65,71,72,99

- 99205 only allowed in POS 02,04,10,11,12,13,15,19,20,22,23,31,32,50,65,71,72,99
- 99212 only allowed in POS 02,04,10,11,12,13,15,19,20,22,23,50,61,65,71,72,99
- 99304, 99306, 99307, 99309, 99310 only allowed in POS 02,13,31,32,50,54,56,72
- 99308 only allowed in POS 02,05,06,07,08,13,31,32,50,54,56,72,99
- 99223, 99232 only allowed in POS 02,06,08,21,22,23,51,61,65
- 99281, 99282, 99283, 99284, 99285 only allowed in POS 05,06,07,08,22,23,24
- 99234, 99235, 99236 only allowed in POS 06,08,21,22,23,61,65
- 99349 only allowed in POS 04,12,13,50,71,72
- 99483 only allowed in POS 11,12,13,14,15,16,17,18,19,20,21,23,24,25,31,32,49
- 99495, 99496, G0317, G2211, S5165 allowed in all POS, except 02,10
- 99601, 99602 only allowed in POS 03,04,12,71,99
- A0225, A0420, A0426, A0427, A0428, A0429, A0433, A0434, S0215 only allowed in POS 41
- A0422, A0424 only allowed in POS 41,42
- A9274, E0955, E0973, E1028, E0150, E2609, E2611, E2612, E2613, E2614, E2615, E2616, E2617, E2620, E2621, only allowed in POS 04,12
- A2037, A4288, A4310, A4314, A4333, A4334, A4340, A4357, A5120, B4102, B4103, B4104, B4105, B4149, B4150, B4152, B4153, B4154, B4155, B4157, B4158, B4159, B4160, B4161, B4162, B4197, G0156, S9128, S9129, S9131 only allowed in POS 04,12,99
- C8006 is only allowed in POS 19, 22, 23
- C9145 not allowed in POS 21,24,41,81,99
- C9600, C9601, C9602, C9603, C9604, C9605, C9606, C9607, C9608 only allowed in POS 19,21,22
- E2611, E2612, E2613, E2614, E2615, E2616, E2617, E2620, E2621 in POS 01, 02, 03, 05, 06, 07, 08, 09, 10, 11, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 31, 32, 33, 34, 41, 42, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 60, 61, 62, 65, 71, 72, 81, 99
- G0155 only allowed in POS 04,12,14,27,31,32,34
- G0299 only allowed in POS 03,04,12,14,31,32,34,71,99
- H0015 only allowed in POS 02,10,11,55,57
- H1002 only allowed in POS 04,10,12,13,50,71,72
- A9612, C9306, J2916 are not allowed in POS 21,24,41,81,99
- M0201 only allowed in POS 04,12,13,16,27
- S0315 only allowed in POS 03,04,12,27,71,99
- T1019 allowed in all POS
- T1029 only allowed in POS 12
- T1032 only allowed in POS 02,04,10,11,12,13,14,15,16,17,18,19,22,33,49,53,55,57,58,71
- T1033 only allowed in POS 20,21,23,25
- T1040 only allowed in POS 11
- T2042 only allowed in POS 04,12,14,31,32,34
- T2043 only allowed in POS 04,12,31,34
- T2044 only allowed in POS 21,31,32,34
- T2045 only allowed in POS 21,34
- T2046 only allowed in POS 31,32,54
- T2048 only allowed in POS 56

Kentucky	<p>Per State Regulations, Kentucky allows:</p> <ul style="list-style-type: none"> • H0011 in POS 55 • H0015 in POS 02, 10, 11, 53, 55, 57, 58 • H0035 in POS 02, 10, 55, 57, 58 • H0038 in POS 02, 10 • L8699 in POS 24 • S9480 in POS 11 • S9128 in POS 99 • S9129 in POS 99 • S9131 in POS 99 • T2033 in POS 16 <p>Per State Regulations, Kentucky does not allow:</p> <ul style="list-style-type: none"> • M0201 in POS 02, 10 • Place of service 27 is not recognized and will deny if billed
Maryland	<p>Per State Regulations,</p> <ul style="list-style-type: none"> • Allows 99202 & 99211 in POS 01 for Pharmacists • Allows 99600 in POS 19,21 & 22 • Allows 99600 in POS 4, 12 & 99 • E&M codes are reimbursable in POS 03 to accommodate School Based Health Centers • Modifier GT must be reported when eligible services are delivered via Telehealth/Telemedicine • Maryland Medicaid does not recognize POS 02 or 10 and will deny if billed
Massachusetts	<p>Massachusetts allows:</p> <ul style="list-style-type: none"> • S9122 in POS 32 • A0130 in POS 99 <p>Massachusetts does not allow:</p> <ul style="list-style-type: none"> • MAUHCSCO: 91300, 91303, 91305, 91311, 0001A, 0002A, 0003A, 0004A, 0011A, 0012A, 0013A, 0022A, 0031A, 0034A, 0041A, 0042A, 0051A, 0052A, 0053A, 0054A, 0064A, 0071A, 0072A, 0073A, 0074A, 0081A, 0082A, 0083A, 0094A, 0104A, 0111A, 0112A, M0201 in POS 02, 10 • MAMMP: 91300, 91303, 91305, 91311, 0001A, 0002A, 0003A, 0004A, 0011A, 0012A, 0013A, 0031A, 0034A, 0051A, 0052A, 0053A, 0054A, 0064A, 0071A, 0072A, 0073A, 0074A, 0081A, 0082A, 0083A, 0094A, 0104A, 0111A, 0112A, M0201 in POS 02, 10
Michigan	<p>Michigan Medicaid denies all:</p> <ul style="list-style-type: none"> • CPT and HCPCS in POS 05, 06, 08, 09, 25, 26, 53 & 54
Minnesota	<p>Minnesota allows:</p> <ul style="list-style-type: none"> • S9123 in POS 02 & 10 • 99496 and 99495 in POS 11
Mississippi	<p>Mississippi allows:</p> <ul style="list-style-type: none"> • 94640 in POS 22 & 19 • 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214 & 99215 in POS 03 & 12 • 99354 and 99355 in POS 03, 12, 13, 31 & 32 • H0035 in POS 99 & 53 • S9480 in POS 03, 12 & 14 • T2048 in POS 53
Missouri	<p>Missouri allows:</p> <ul style="list-style-type: none"> • CPTs 99281, 99282, 99283, 99284, 99285, 99222 in POS 02 • 92557, 92620, 92621, 92626, 92627, 92630, 92633, 99429, S9152, V5011, V5030, V5040, V5050, V5060, V5090, V5100, V5110, V5120, V5130, V5140, V5160, V5171, V5172, V5181,

	<p>V5200, V5211, V5212, V5213, V5214, V5215, V5221, V5240, V5241, V5242, V5243, V5244, V5245, V5246, V5247, V5248, V5249, V5250, V5251, V5252, V5253, V5254, V5255, V5256, V5257, V5258, V5259, V5260, V5261, V5264, V5267, V5275, V5281, V5282, V5283, V5284, V5285, V5286, V5287, V5288, V5289, V5290, L7510, L8615, L8616, L8617, L8618, L8619, L8621, L8622, L8623, L8624, L8625, L8627, L8628, L8629, L8692, V5014, 92507, 92517, 92518, 92519, 92558, 92601, 92602, 92603, 92604, 92650, 92651, 92652, 92653, 92700, 92562, 92563, 92567, 92568, 92570, 92531, 92540, 92541, 92542, 92544, 92545, 92546, 92547, 92550, 92551, 92552, 92553, 92555, 92556, 92565, 92572, 92577, 92579, 92582, 92583, 92584, 92587, 92588, V5266, V5298, V5299 are allow in a facility setting.</p> <ul style="list-style-type: none"> MO does not allow POS 41(land) or POS 42 (air/water) as a valid place of service.
Nebraska	<p>Nebraska Medicaid allows</p> <ul style="list-style-type: none"> 99221-99223, 99238, 99239 & 99245 billed by a behavioral health provider in POS 02 S9480 in POS 11
New Jersey	<p>New Jersey allows:</p> <ul style="list-style-type: none"> 99496 with POS 04, 11, 12 & 27 A0425 with modifier UC, A0120 with modifier UC, & Z0330 in POS 11, 41, 49, 52, 53, 99 when billed by Mental Health Partial Care Providers. 97802, 97803, 97804, S9977, and T5999 with POS 11, 12, 22, 19. H0044, T2038, S5165, and T1028 with all POS codes
New Mexico	<p>New Mexico allows:</p> <ul style="list-style-type: none"> 99201-99215 in POS 03
New York	<p>New York allows:</p> <ul style="list-style-type: none"> E&M codes in 04 and 15 POS 98008-98016 is allowed in place of service 02 and 10 99453, 99454, 99050 and 99051 are allowed in place of service 02, 10, 11
North Carolina	<p>North Carolina Medicaid allows:</p> <ul style="list-style-type: none"> 92310, 92326, 92340-92342, 92353, 92370, V2510, V2520, V2599-V2600, V2610, V2615, V2797, V2799 in POS 03, 11, 21, 22, 31, & 54 North Carolina Medicaid does not recognize POS 02 or 10 and will deny if billed North Carolina Medicaid allows CPT codes 99202 & 99212 to be bill for POS 01.
Ohio	<p>Ohio Medicaid allows:</p> <ul style="list-style-type: none"> T2042 & T2043 in a 31 & 32 POS <p>OH, Medicaid and MMP products allow:</p> <ul style="list-style-type: none"> 99202-99205, 99212-99215, 99354 & 99355 with POS 13, 31 & 32 99211 with POS 13, 31, 32 & 57 99341-99345, 99347-99350 with POS 16 H0012 with POS 11 99202-99499 with POS 03 <p>Per Ohio State Regulations, when a general health panel is performed (80050) in POS 81, 80050 is not covered.</p> <p>Outlined within the state’s manual for Medicaid Behavioral Health State Plan Services:</p> <ul style="list-style-type: none"> H0005 – SUD Group Counselling: can be provided in POS 03, 04, 11-14, 16, 31, 32, 34, 57, or 99 H0036 – Community psychiatric supportive treatment individual or group: can only be provided in POS 03, 04, 11-14, 16, 18, 23, 31-34, 53, or 99

	<ul style="list-style-type: none"> • H0038 – Peer support service: CANNOT bill in POS 02, 05-08, 41, 42, 55 • H2019 – Therapeutic individual or group behavioral (TBS) services (15min): can only be provided in POS 03, 04, 11-14, 16, 18, 23, 31, 32, 34, 53, or 99 • H2020 – Therapeutic behavioral group service (per diem): can only be provided in POS 03, 04, 11, 14, 53
Pennsylvania	<p>Per Pennsylvania State Regulations, the following codes are exempt from the policy:</p> <ul style="list-style-type: none"> • H0035 when billed in a POS of 53 • T1015 when billed in a POS of 13, 21, 31, and/or 32 • T1028 when billed in a POS of 11
Rhode Island	<p>Rhode Island Medicaid:</p> <ul style="list-style-type: none"> • H0019 when billed in a POS of 14 or 53 • 99221 when billed in a POS of 14 • 99226 when billed in a POS of 26 <p>Rhode Island Medicaid does not allow:</p> <ul style="list-style-type: none"> • M0201 in POS 02 or 10
Tennessee	<p>Tennessee Medicaid:</p> <ul style="list-style-type: none"> • Services allowed in POS 11 are also allowed in POS 03 • G0155 is allowed in POS 53 • Telehealth services provided in school-based setting must be billed with POS 03

Texas	<p>Texas Medicaid allows:</p> <ul style="list-style-type: none"> • G0398, G0399 & G0400 in POS 11 • Q4081 in POS 02,10,11,15,17,20,49,50,60,65,71,72 • G0511 in POS 50 • J0879 in POS 11, 21, 22, 50, 65 72, 73 <p>Texas Medicaid does not allow:</p> <ul style="list-style-type: none"> • M0220 or M0221 in POS 02, 10 • M0201 in POS 02, 10, 12 • 90480, 91318, 91319, 91320, 91321, 91322, & 91304 in POS 12 • 30468, J1823, 92650, 92651, 92652, 92653, 94619, 90377, 76145 in POS: <ul style="list-style-type: none"> ○ 12, 21, 51, 52, 55, 56, 61, 25, 01, 03, 04, 05, 06, 07, 08, 16, 18, 26, 34, 41, 42, 53, 57, 99, 13, 31, 32, 54, 14, 33, 81 • S0013, 71271, 92229 in POS: <ul style="list-style-type: none"> ○ 12, 25, 01, 03, 04, 05, 06, 07, 08, 16, 18, 26, 34, 41, 42, 53, 57, 99, 13, 31, 32, 54, 14, 33, 81 • 80143, 80151, 80161, 80167, 80179, 80181, 80189, 80193, 80204, 80210, 82077, 82681 in POS: <ul style="list-style-type: none"> ○ 12, 21, 51, 52, 55, 56, 61, 25, 01, 03, 04, 05, 06, 07, 08, 16, 18, 26, 34, 41, 42, 53, 57, 99, 13, 31, 32, 54, 14, 33 • Texas HHSC/Medicaid denies all CPT and HCPCS codes in POS 09 • 21601, 21602, 21603 in POS: <ul style="list-style-type: none"> ○ 01, 02, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 22, 23, 24, 25, 26, 31, 32, 33, 34, 41, 42, 49, 50, 53, 54, 57, 60, 62, 65, 71, 72, 81, 99 • J9269 in POS <ul style="list-style-type: none"> ○ 01, 02, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 15, 16, 17, 18, 20, 21, 25, 26, 31, 32, 33, 34, 41, 49, 50, 51, 52, 52, 53, 54, 55, 56, 57, 60, 61, 65, 71, 72, 81, 99 • 01937, 01938, 01939, 01940, 01941, 01942, 66989, 66991, 69716, 69719, 69726, 69727, 64582, 64583, 64584, 33270, 33271, 33272, 33273, 22856, 22858, 22861, 22864, 64486, 64487, 64488, 64489 in POS: <ul style="list-style-type: none"> ○ 01, 02, 03, 04, 05, 06, 07, 08, 11, 12, 13, 14, 15, 16, 17, 18, 20, 25, 26, 32, 32, 33, 34, 41, 42, 49, 50, 53, 54, 57, 60, 65, 71, 72, 81, 99 • 95705, 95708, 95711, 95714 in POS: <ul style="list-style-type: none"> ○ 01, 03, 04, 05, 06, 07, 08, 12, 13, 14, 16, 18, 19, 21, 22, 23, 24, 25, 26, 31, 32, 33, 34, 41, 42, 51, 52, 53, 54, 55, 56, 57, 61, 62, 81, 99 • 87563, 87154, 82653, 83521, 80143, 80151, 80161, 80167, 80179, 80181, 80189, 80189, 80193, 80204, 80210, 82077, 82681, 95700, 95706, 95707, 95709, 95710, 95712, 95713, 95715, 95716, 90912, 90913, 99473, 99474, 99421, 99422, 99423, A9590, Q2055, J2506, J1823, 92650, 92651, 92652, 92653, 99417, 76145, J0841, J3245, J9229, J2326, J1303 in POS: <ul style="list-style-type: none"> ○ 01, 03, 04, 05, 06, 07, 08, 12, 13, 14, 16, 18, 21, 25, 26, 31, 32, 33, 34, 41, 42, 51, 52, 53, 54, 55, 56, 57, 61, 81, 99 • 95717, 95718, 95719, 95720, 95721, 95722, 95723, 95724, 95725, 95727, 15769, 99201, 99202, 91113, 80503, 80504, 80506, 94619, 30468, 92229, 93290 in POS: <ul style="list-style-type: none"> ○ 01, 03, 04, 05, 06, 07, 08, 12, 13, 14, 16, 18, 25, 26, 31, 32, 33, 34, 41, 42, 53, 54, 57, 81, 99 • S0013, J1428, J0517, J2182, J257 in POS: <ul style="list-style-type: none"> ○ 01, 03, 04, 05, 06, 07, 08, 13, 14, 16, 18, 21, 25, 26, 31, 32, 33, 34, 41, 42, 51, 52, 53, 54, 55, 56, 57, 61, 81, 99 • 71271, 93287 in POS: <ul style="list-style-type: none"> ○ 1, 3, 4, 5, 6, 7, 8, 12, 13, 14, 16, 18, 25, 26, 31, 32, 33, 34, 41, 42, 53, 54, 57, 81, 99 • 90377 in POS 13, 14, 21, 25, 31, 32, 33, 51, 52, 54, 55, 56, 61, 81 • 59412 in POS 24 • J9039 in POS: <ul style="list-style-type: none"> ○ 01, 02, 03, 04, 05, 06, 07, 08, 13, 14, 15, 16, 17, 18, 20, 21, 23, 25, 26, 31, 32, 33, 34, 41, 42, 49, 50, 51, 52, 53, 54, 55, 56, 57, 60, 61, 62, 65, 71, 81, 99
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	<ul style="list-style-type: none"> • L8033 in POS: <ul style="list-style-type: none"> ○ 01, 02, 03, 04, 05, 06, 07, 08, 11, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 31, 32, 33, 34, 41, 42, 49, 50, 51, 52, 53, 54, 55, 56, 57, 60, 61, 62, 65, 71, 81, 99
Virginia	<p>Per State Regulations, the following codes are exempt from the policy:</p> <ul style="list-style-type: none"> • H0035 when reported in a POS 22, 23, 49, 53 & 99 • POS restrictions are not imposed for procedure codes G0151, G0152, G0153 & G0495 • G2211 <p>Per State regulations, Virginia allows:</p> <ul style="list-style-type: none"> • Allows 99202 & 99211, 99212, 99213 in POS 01 for Pharmacists
Washington	<p>Per Washington State Guidelines, the following codes are exempt from the policy when billed in POS:</p> <ul style="list-style-type: none"> • 99202-99205, 99211-99215, G0410-G0411, G2067-G2080, H0015 & H0017, Q5002, S0260 & S9480 in POS 04 & 12 • T1001, T1002 & T1003 will deny, and all other codes are allowed when billed with POS 03 • T1015 when billed in POS 04, 10, 11, 12, 13, 14, 15, 16, 17, 18, 18, 19, 2, 20, 22, 24, 25, 31, 32, 33, 34, 4, 49, 5, 50, 52, 53, 54, 55, 56, 57, 58, 6, 60, 62, 65, 7, 71, 72, 8, 9, 99 • CPT code 99483 is payable in POS 11 • S9430 is exempt from this policy • T1023, T2022, and T2023 are payable in POS 09 • 99202 – 99215 are payable in POS 27 <p>Per Washington State Guidelines, a list of CPT and HCPCS codes are attached for the Washington Medicaid Reentry Program which is only allowed in POS 09.</p> <p>Behavioral Health providers can bill the following codes in any place of service:</p> <ul style="list-style-type: none"> • 80306, 80307, 90785, 90791, 90792, 90832, 90833, 90834, 90836, 90837, 90838, 90846, 90847, 90849, 90853, 96116, 96121, 96130, 96131, 96132, 96133, 96136, 96137, 96138, 96139, 96164, 96165, 96167, 96168, 96170, 96171, 96372, 98966, 98967, 98968, 99001, 99075, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99341, 99342, 99344, 99345, 99347, 99348, 99349, 99350, 99421, 99422, 99423, 99441, 99442, 99443 & 99451 • G2012, H0001, H0004, H0010, H0011, H0015, H0016, H0017, H0018, H0019, H0020, H0023, H0025, H0026, H0030, H0031, H0032, H0033, H0034, H0035, H0036, H0038, H0040, H0043, H0045, H0046, H0047, H0050, H2011, H2012, H2014, H2015, H2017, H2021, H2022, H2023, H2025, H2027, H2028, H2031, H2033, H2036, S0109, S9125, S9446, S9480, S9484, S9485, T1001, T1013, T1016, T1023, T2038, U0001 & U0002
Wisconsin	Wisconsin Medicaid allows procedures in specific POS.

Questions and Answers	
1	<p>Q: Why aren't all CPT and HCPCS codes addressed in this policy?</p> <p>A: This policy addresses CPT and HCPCS codes that include a Place of Service (POS) in their description or in their coding guidelines and CPT and HCPCS codes assigned the Non-Facility Indicator "NA" and/or Facility NA Indicator "NA". Codes that do not fit these criteria, as well as mental health/substance abuse codes and codes addressed in other reimbursement policies, are out of scope for this reimbursement policy. It is not intended to be all inclusive.</p>
2	<p>Q: Where do the places of service codes come from?</p> <p>A: The Place of Service codes can be found on the CMS website and contains two-digit codes placed on health care professional claims to indicate the setting in which a service was provided. The Centers for Medicare & Medicaid Services (CMS) maintains POS codes used through the healthcare industry.</p>

Attachments	
Medicaid Procedure to Place of Service List	A list of CPT and HCPCS codes with corresponding allowable places of service for Medicaid products.
Place of Service List	A list of place of service codes.
Arizona Procedure to Place of Service List	A list of CPT and HCPCS codes with corresponding allowable place of service for Arizona Medicaid products
Washington WAHLOP-WAIMCRE Reentry Program	A list of CPT and HCPCS codes that are allowable in POS 09 for Washington Medicaid Reentry Program

Resources
Individual state Medicaid regulations, manuals & fee schedules
American Medical Association, <i>Current Procedural Terminology (CPT®)</i> and associated publications and services
Centers for Medicare and Medicaid Services, CMS Manual System and other CMS publications and services
Centers for Medicare and Medicaid Services, Healthcare Common Procedure Coding System, HCPCS Release and Code Sets
Centers for Medicare and Medicaid Services, Place of Service Code Set

History	
6/7/2026	Policy Version Change State Exceptions: Massachusetts updated Attachment section: Arizona Procedure to Place of Service List updated History section: Entries prior to 6/7/2024 archived
5/24/2026	Policy Version Change Attachment section: Arizona Procedure to Place of Service List updated History section: Entries prior to 5/24/2024 archived
5/10/2026	Policy Version Change Attachment section: Arizona Procedure to Place of Service List updated History section: Entries prior to 5/10/2024 archived
4/19/2026	Policy Version Change Attachment section: Arizona Procedure to Place of Service List updated History section: Entries prior to 4/19/2024 archived
4/12/2026	Policy Version Change State Exceptions: Colorado and New York updated History section: Entries prior to 4/12/2024 archived
4/1/2026	Policy Version Change State Exceptions: Kentucky updated History section: Entries prior to 4/1/2024 archived
3/29/2026	Policy Version Change

	Attachment section: Arizona Procedure to Place of Service List updated History section: Entries prior to 3/29/2024 archived
3/22/2026	Policy Version Change Attachment section: Arizona Procedure to Place of Service List updated History section: Entries prior to 3/22/2024 archived
3/15/2026	Policy Version Change State Exceptions: New York updated Attachment section: Medicaid Procedure to Place of Service List updated History section: Entries prior to 3/15/2024 archived
3/8/2026	Policy Version Change Attachment section: Arizona Procedure to Place of Service List updated History section: Entries prior to 3/8/2024 archived
2/22/2026	Policy Version Change Attachment section: Arizona Procedure to Place of Service List updated History section: Entries prior to 2/22/2024 archived
2/15/2026	Policy Version Change State Exceptions: Kansas and Washington updated History section: Entries prior to 2/15/2024 archived
2/8/2026	Policy Version Change State Exceptions: Florida updated Attachment section: Arizona Procedure to Place of Service List updated History section: Entries prior to 2/8/2024 archived
1/18/2026	Policy Version Change Attachment section: Arizona Procedure to Place of Service List updated History section: Entries prior to 1/18/2024 archived
1/11/2026	Policy Version Change State Exceptions: Kansas updated History section: Entries prior to 1/11/2024 archived
1/1/2026	Policy Year and Version Change Attachment section: Arizona Procedure to Place of Service List updated History section: Entries prior to 1/1/2024 archived
12/7/2025	Policy Version Change State Exceptions: Idaho, Kansas and Michigan updated Attachment section: Arizona Procedure to Place of Service List updated History section: Entries prior to 12/7/2023 archived
11/23/2025	Policy Version Change State Exceptions: Kansas updated Attachment section: Arizona Procedure to Place of Service List updated History section: Entries prior to 11/23/2023 archived
11/9/2025	Policy Version Change State Exceptions: Indiana updated Attachment section: Arizona Procedure to Place of Service List updated History section: Entries prior to 11/9/2023 archived
11/1/2025	Policy Version Change Reimbursement Guidelines: Added "NA" indicator section Question and Answers section: Added verbiage to question 1 & 2 History section: Entries prior to 11/1/2023 archived
10/26/2025	Policy Version Change

	State Exceptions: Virginia updated Attachment section: Arizona Procedure to Place of Service List updated History section: Entries prior to 10/26/2023 archived
10/12/2025	Policy Version Change State Exceptions: Florida updated History section: Entries prior to 10/12/2023 archived
9/21/2025	Policy Version Change State Exceptions: Texas updated History section: Entries prior to 9/21/2023 archived
9/7/2025	Policy Version Change State Exceptions: Idaho added, Ohio updated Attachment section: Arizona Procedure to Place of Service List added History section: Entries prior to 9/7/2023 archived
8/10/2025	Policy Version Change State Exceptions: Kansas, New York and Wisconsin updated History section: Entries prior to 8/10/2023 archived
7/27/2025	Policy Version Change State Exceptions: Kansas and New Jersey updated History section: Entries prior to 7/27/2023 archived
7/20/2025	Policy Version Change State Exceptions: Kansas, New Jersey and Washington Updated Attachment section: Washington WAHLOP-WAIMCRE Reentry Program List added History section: Entries prior to 7/20/2023 archived
7/13/2025	Policy Version Change State Exceptions: California Removed and Texas Updated History section: Entries prior to 7/13/2023 archived
6/29/2025	Policy Version Change State Exceptions section: Missouri updated Attachment section: Medicaid Procedure to Place of Service List updated History section: Entries prior to 6/29/2023 archived
6/22/2025	Policy Version Change State Exceptions section: Washington updated History section: Entries prior to 6/22/2023 archived
5/25/2025	Policy Version Change State Exceptions section: Kentucky updated History section: Entries prior to 5/25/2023 archived
4/13/2025	Policy Version Change State Exceptions section: Kansas updated History section: Entries prior to 4/13/2023 archived
4/4/2025	Policy Version Change State Exceptions section: New Jersey updated History section: Entries prior to 4/4/2023 archived
3/30/2025	Policy Version Change State Exceptions section: Kansas updated Attachment section: Medicaid Procedure to Place of Service List updated History section: Entries prior to 3/30/2023 archived
2/27/2025	Policy Version Change State Exceptions section: Tennessee updated

	History section: Entries prior to 2/27/2023 archived
2/16/2025	Policy Version Change State Exceptions section: Texas updated History section: Entries prior to 2/16/2023 archived
2/9/2025	Policy Version Change State Exceptions section: Kansas & Washington updated History section: Entries prior to 2/9/2023 archived
1/26/2025	Policy Version Change State Exceptions section: Florida updated History section: Entries prior to 1/26/2023 archived
1/19/2025	Policy Version Change State Exceptions section: Texas updated History section: Entries prior to 1/19/2023 archived
11/3/2024	Policy Version Change State Exceptions section: Minnesota and Texas updated History section: Entries prior to 11/3/2022 archived
10/13/2024	Policy Version Change State Exception section: Kansas and Texas updated
10/6/2024	Policy Version Change Attachments: Medicaid Procedure to Place of Service List updated State Exception section: Kansas updated
9/22/2024	Policy Version Change State Exceptions: Minnesota, Missouri, Texas, and Kansas updated
9/8/2024	Policy Version Change Attachment section: Arizona Procedure to Place of Service List removed State Exception section: Kansas, North Carolina and Texas updated History section: Entries prior to 9/8/2022 archived
8/18/2024	Policy Version Change State Exceptions: Kansas updated Attachment section: Medicaid Procedure to Place of Service List updated History section: Entries prior to 8/18/2022 archived
8/11/2024	Policy Version Change State Exceptions: Washington updated Attachments: Arizona Procedure to Place of Service format change only History section: Entries prior to 8/11/2022 archived
6/30/2024	Policy Version Change Attachments: Medicaid Procedure to Place of Service List updated State Exceptions: Kansas and Indiana updated
6/17/2024	Policy Version Change State Exceptions: New Mexico added
6/9/2024	Policy Version Change State Exceptions: Minnesota and Ohio updated
5/13/2012	Policy Implemented by UnitedHealthcare Community Plan