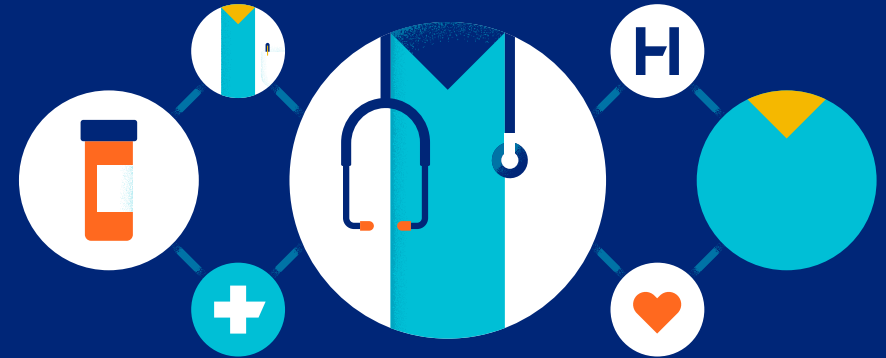




# A first-of-its-kind national Gold Card program



**UnitedHealthcare is introducing a first-of-its-kind national Gold Card program, which will recognize provider groups who consistently adhere to evidence-based care guidelines. Gold Card provider groups will see a reduction in their total prior authorization request volume.**

This is the next step in our continual efforts to modernize the prior authorization process and simplify the health care experience for consumers and providers. In fall 2023, we removed the prior authorization requirement for services that demonstrated consistent adherence to evidence-based guidelines and were almost always approved. This decreased total prior authorization volume by nearly 20%.



**Focusing on ensuring care is safe, effective and affordable for our members**



**Recognizing provider groups who consistently adhere to evidence based care guidelines**



**Continually seeking to simplify the health care experience for consumers and providers**

## Achieving Gold Card status

Gold Card status will apply across UnitedHealthcare commercial, UnitedHealthcare Individual Exchange, UnitedHealthcare® Medicare Advantage and UnitedHealthcare Community plans.

To qualify for the UnitedHealthcare Gold Card program, a provider group must meet the following criteria for each of the past two consecutive years:

- In-network for at least one line of business;
- A minimum annual volume of at least 10 eligible prior authorizations for the two (2) consecutive years of the qualification period across Gold Card eligible codes (aggregate all Medicaid, Medicare Advantage and commercial); and,
- Have a prior authorization approval rate of 92% or more in each of the two years evaluated, after appeals have been exhausted, on the eligible prior authorization volume (aggregate all lines of business).

## The benefits of advance notification

Qualifying provider groups will still need to submit advance notification, which confirms eligibility and network status, for Gold Card services, but no clinical information will be requested.

Submitting advance notification offers several benefits for providers and members, such as enabling other providers supporting care for members to quickly and easily validate that the service is covered. For example, if a Gold Card qualified oncologist orders a diagnostic test that is part of the program, they will receive a notification number instantly after completing an advance notification, and the provider who renders the test will be able to see that it will be covered.

Advance notification also validates member eligibility and network status using online tools.

# Frequently asked questions

**How can provider groups determine their Gold Card status?**

Provider groups don't need to apply to be part of the UnitedHealthcare Gold Card program. Qualification will be awarded if eligibility criteria are met. Provider groups can log into the UnitedHealthcare Provider Portal for more information and, if they haven't qualified, see how they can qualify in the future.

**Is there a review process for provider groups who feel they should have been included in the Gold Card program and were not?**

Yes. Provider group administrators, defined by a single Tax ID, may request a review of their Gold Card status within 30 calendar days of when a status determination is made available on the UnitedHealthcare Provider Portal. Any change in Gold Card status as the result of a review request, as well as the effective date of any change, will be communicated to the provider group. Provider groups must submit review requests with all required information as outlined on the UnitedHealthcare website, which will be live on Sept. 1, 2024. There is a separate review process for behavioral health providers following the same timelines.

**Does the advance notification number have to be included on a claim in order to be reimbursed?**

No. Claims for Gold Card eligible CPT codes will automatically find the advance notification number and process the claim. If an advance notification wasn't submitted, however, the claim will be denied.

**Are UnitedHealthcare's Gold Card efforts compatible with state Gold Card legislation?**

The UnitedHealthcare Gold Card program will be effective in all states and will be modified, when necessary, to meet state requirements. UnitedHealthcare will apply the state criteria first, as required, for the applicable line of business and then the UnitedHealthcare Gold Card program will take effect for qualifying care provider groups and codes where it does not conflict with state requirements.

**How common are prior authorizations?**

The prior authorization process impacts a small subset of our network physicians and an even smaller population of our members. Of the more than 416,000 provider groups who submitted a claim last year, only 26% submitted one or more prior authorizations of any kind per year over the last two years. Across all of UnitedHealthcare's fully insured commercial, Medicare Advantage and Medicaid members, only about 1% to 2% experience a prior authorization denial.