



Subject: 90000 Series CPT Codes for Diagnostic Services

Scope: Unison MedPLUS, Unison Kids, & Unison aB

As of 7-1-08, the referral and authorization requirements were lifted for professional claims billed using the 90000 procedure codes in conjunction with a 26 modifier that were or will be processed on or after 7-1-2008. This requirement relates to outpatient services only and will only affect participating providers. Please remember that these procedure codes must also be valid Pennsylvania Medical Assistance codes.

Non-participating providers will continue to require prior authorization.

**Should you have any questions, please contact Provider Services at
1-800-600-9007.**

Unison utilizes several clearinghouses including Emdeon, aka WebMD, RelayHealth, MedAvant Healthcare Solutions and Payerpath, to receive electronic claims from providers and send electronic remittance advices to providers. Please contact your Provider Services Representative or access our website at www.unisonhealthplan.com to obtain more information regarding EDI.