



March 1, 2021

David Milich
Chief Executive Officer – Texas
UnitedHealthcare Employer & Individual
2000 West Loop South, Ste. 900
Houston, TX 77027

RE: Implement and pay for CPT code 99072 and reimbursement for rapid COVID-19 tests

Dear Mr. Milich:

On behalf of our more than 55,000 Texas physician and medical student members, the Texas Medical Association (TMA), the Texas Academy of Family Physicians, the Texas Pediatric Society, District XI of the American College of Obstetricians and Gynecologists, the Texas Association of Obstetricians and Gynecologists, and the Texas Chapter of the American College of Physicians Services, we strongly urge UnitedHealthcare to address the unprecedented strain COVID-19 has put upon Texas physicians. The public health emergency (PHE) continues to threaten practices' financial viability due to months of lost revenue from practice closures and operating at reduced capacity. Compounding the financial stress of lost revenue, practices also are incurring additional costs to test patients for infection and for heightened infection control protocols and personal protective equipment. **To help address the significant fiscal pressures placed on physicians by the COVID-19 pandemic, we implore UnitedHealthcare to immediately implement and pay for Current Procedural Terminology® (CPT) code 99072 to compensate practices for the additional supplies and new staff activities required to provide safe patient care during the PHE.**

Texas physicians continue to incur significant costs in testing patients and implementing increased infection control measures required to provide safe care during the COVID-19 pandemic. To address the financial impact of these new protocols related to the PHE, the CPT Editorial Panel approved CPT code 99072 on Sept. 8, 2020. According to CPT guidance, 99072 is used to report the additional supplies, materials, and clinical staff time over and above the practice expense(s) included in an office visit or other nonfacility service(s) when performed during a PHE, as defined by law, due to respiratory-transmitted infectious disease.

In addition to the importance of 99072, we also write to draw your attention to obstacles Texas physicians face regarding insufficient reimbursement for COVID-19 tests. Our members are experiencing difficulty getting reimbursed for the full cost of COVID-19 tests. This is particularly problematic for smaller and rural practices. As was illustrated in a recent *New York Times* [article](#), insufficient reimbursement rates for these tests place significant financial strain on many practices, and potentially make it not financially viable to provide COVID-19 testing.

To address this issue, we urge UnitedHealthcare to ensure adequate coverage for COVID-19 testing and to not disincentivize practices from providing such testing services to Texas patients. It is vital that

this issue be resolved quickly so that physicians in Texas can continue providing appropriate testing to their patients through the rest of the COVID-19 crisis.

If you have any questions, please do not hesitate to contact Robert Bennett, TMA vice president of medical economics, at Robert.Bennett@texmed.org. Otherwise, we appreciate your prompt response.

Sincerely,



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