

September 30, 2025

## Specialist services referral requirement for Medicare Advantage plans Jan. 1, 2026

### Update

Last modified: Dec. 19, 2025

Update: Added clarification around referral requirements in California, Nevada and Texas.

**Starting Jan. 1, 2026**, most members enrolled in UnitedHealthcare Medicare Advantage HMO and HMO-POS plans will be required to obtain a referral from their primary care provider (PCP) before accessing certain specialist services in outpatient, office or home settings. Referrals must be submitted by the PCP to UnitedHealthcare prior to the specialist visit.

The new referral requirements will NOT apply to services provided by a:

- Primary care provider
- Mental health provider
- Obstetrician/gynecologist
- Chiropractor
- Audiologist
- Oncologist
- Hematologist
- Nuclear medicine
- Neonatology
- Emergency medicine
- Nutritionist
- Podiatrist
- Optometrist
- Ophthalmologist
- Optician
- Radiologist
- Therapeutic radiologist
- Infectious disease specialist

In addition, PCP referral is not required for these services:

- PT/OT/ST, cardiac therapy or pulmonary therapy
- Provision of anesthesiology (pain management services rendered by an anesthesiologist do require a referral)
- Home health agency services
- Services performed in an observation setting
- Any services from a pathologist or inpatient consulting physician, including hospitalists
- Emergency room, ambulance or urgent care services
- Telehealth services
- Medicare-covered preventive services, kidney disease education or diabetes self-management training
- Routine annual physical exams, routine vision exams or hearing exams

- Dialysis services
- Any lab services, radiological or non-radiological testing services, or radiation therapy
- Durable medical equipment, home health, prosthetic/orthotic devices, medical supplies, diabetic testing supplies, Medicare Part B drugs or allergens
- Additional coverage that may be included by some Medicare Advantage plans but are not covered by Medicare, such as hearing aids, routine eyewear, dental care, fitness memberships or outpatient prescription drugs

## Key dates

UnitedHealthcare will not deny claims for lack of referral on plans with new referral requirements for dates of service through **April 30, 2026**. However, providers are encouraged to begin submitting referrals for services scheduled on or after **Jan. 1, 2026**. Claims for specialist services without a referral will be denied beginning **May 1, 2026**.

Claims denied due to missing referrals will be considered provider liability. Members must not be balance billed for services rendered without a valid referral.

- For plans with new referral requirements, referrals for the 2026 plan year can't be submitted before Jan. 1, 2026
- Claims may still be denied even if a referral is on file if:
  - The services are not covered under the member's benefit plan
  - Required prior authorization was not obtained

Referral requirements do not apply to members enrolled in:

- Institutional SNP plans
- Erickson Advantage plans
- Michigan Integrated DSNP plan (H2247-005)

Delegated providers may have their own referral policies and processes that differ from UnitedHealthcare's standard procedures.

**Note, California, Nevada and Texas have referral requirements currently in place. Existing referral policies in these states will not change** and referrals are required for all 2026 dates of service. For referral exclusions, requirements and details in these states, please refer to the member's evidence of coverage. UnitedHealthcare will not track or enforce referral requirements in these markets. Providers or delegates are not required to submit referrals to UnitedHealthcare in these states. If you provide care for a delegated member in a UnitedHealthcare Medicare Advantage HMO or HMO-POS plan in one of these markets, please contact the delegate for referral requirements.

## Resources

- Get answers to your questions about referral requirements: [\*\*2026 UnitedHealthcare Medicare Advantage Referral Requirements Guide\*\*](#) 

- Get updated plan information: [\*\*2026 Medicare Advantage, CSNP & DSNP Plan Overview Course\*\*](#) 
- Verify eligibility and request referrals digitally: We offer several digital tools to help you manage eligibility and referral activity. The digital solutions comparison [\*\*guide\*\*](#)  can help you choose which tools are right for your practice.
- Learn how to verify referral requirements, submit requests and see the status of referrals in the Provider Portal: [\*\*Referrals Interactive User Guide\*\*](#) 

## Questions? We're here to help.

Connect with us through chat 24/7 in the [\*\*UnitedHealthcare Provider Portal\*\*](#) .

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