PAYMENT AND REIMBURSEMENT POLICY

Title: PRP-17 COVID-19 Testing and Treatment

Category: Compliance

Effective Date: 10/26/2021

Physicians Health Plan
PHP Insurance Company
PHP Service Company

1.0 Guidelines:

This policy applies to all network and non-network providers, including but not limited to percent of charge contract providers. This policy does not guarantee benefits or solely determine reimbursement. Benefits are determined and/or limited by an individual member's benefit coverage document (COC, SPD, etc.). The Health Plan reserves the right to apply clinical edits to all medical claims through coding software and accuracy of claim submission according to industry billing standards. Clinical edits are derived from nationally recognized billing guidelines such as the Centers for Medicare and Medicaid Services (CMS), National Correct Coding Initiative (NCCI), the American Medical Association (AMA), and specialty societies. The Health Plan may leverage the clinical rationale of CMS or other nationally sourced edits and apply this rationale to services that are not paid through CMS but which are covered by the Health Plan to support covered benefits available through one of the Health Plan's products. Prior approval does not exempt adherence to the following billing requirements. The provider contract terms take precedence if there is a conflict between this policy and the provider contract.

2.0 Description:

This policy applies to billed services related to COVID-19 pandemic. The Health Plan provides coverage for appropriate medically necessary, diagnostic laboratory tests that are consistent with CDC guidelines as they relate to COVID-19. The codes identified in this policy may not be an all-inclusive list. The Health Plan recognizes the ongoing developments in COVID-19 testing and treatment including regular coding updates and expanded billing guidelines. The Health Plan continues to monitor review and update COVID-19 related policies as necessary.

3.0 Coding and Billing:

Diagnosis Codes

ICD-10 DIAGNOSIS CODES (list is not all-inclusive)	
Code	**Description**
	Codes for pre-operative testing include:
Z01.810	Encounter for pre-procedural cardiovascular examination
Z01.811	Encounter for pre-procedural respiratory examination
Z01.812	Encounter for pre-procedural laboratory examination
Z01.818	Encounter for other pre-procedural examination
Z03.818	Encounter for observation for suspected exposure to other biological agents ruled out
Z11.59	Encounter for screening for other viral diseases
Z20.822	Contact with and (suspected) exposure to COVID-19
Z20.828	Contact with and (suspected) exposure to other viral communicable diseases
Z86.19	Personal history of other infectious and parasitic diseases
U07.1	COVID-19, virus identified

- Use ICD-10 diagnosis code Z20.822 (effective 1/1/2021) for suspected exposure to COVID-19.
- Use Z11.59 or for testing of asymptomatic patients prior to inpatient admissions, planned outpatient procedures, or therapies.

- Use ICD-10 diagnosis code Z20.822 (effective 1/1/2021) for exposure to a confirmed case of COVID-19.
- Use Z86.19 for claims when the patient has a history of COVID-19 as applicable.
- When a patient presents with signs/symptoms associated with COVID-19 but a definitive diagnosis has not been established, assign the appropriate diagnosis code(s) for each sign/symptom.

COVID-19 Diagnostic Testing

Code	Description
87426	Infectious agent antigen detection by immunoassay technique, (e.g., enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], immunochemiluminometric assay [IMCA]) qualitative or semiquantitative, multiple-step method; severe acute respiratory syndrome coronoavirus (e.g., SARS-CoV, SARS-CoV2 [COVID-19])
87428	Infectious agent antigen detection by immunoassay technique, (e.g., enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]) qualitative or semiquantitative; severe acute respiratory syndrome coronavirus (e.g., SARS-CoV, SARS-CoV-2 [COVID-19]) and influenza virus types A and B
87635	Infectious agent detection by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), amplified probe technique
87636	Infectious agent detection by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) and influenza virus types A and B, multiplex amplified probe technique
87637	Infectious agent detection by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), influenza virus types A and B, and respiratory syncytial virus, multiplex amplified probe technique
87811	Infectious agent antigen detection by immunoassay with direct optical (i.e., visual) observation; severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19])
0202U	Infectious disease (bacterial or viral respiratory tract infection), pathogen-specific nucleic acid (DNA or RNA), 22 targets including severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), qualitative RT-PCR, nasopharyngeal swab, each pathogen reported as detected or not detected
0223U	Infectious disease (bacterial or viral respiratory tract infection), pathogen-specific nucleic acid (DNA or RNA), 22 targets including severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), qualitative RT-PCR, nasopharyngeal swab, each pathogen reported as detected or not detected For additional PLA code with identical clinical descriptor, see 0202U.
0224U	Antibody, severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), includes titer(s), when performed

Code	Description
0240U	Infectious disease (viral respiratory tract infection), pathogen-specific RNA, 3 targets (severe acute respiratory syndrome coronavirus 2 [SARS-CoV-2], influenza A, influenza B), upper respiratory specimen, each pathogen reported as detected or not detected
0241U	Infectious disease (viral respiratory tract infection), pathogen-specific RNA, 4 targets (severe acute respiratory syndrome coronavirus 2 [SARS-CoV-2], influenza A, influenza B, respiratory syncytial virus [RSV]), upper respiratory specimen, each pathogen reported as detected or not detected
U0001	CDC 2019 novel coronavirus (2019-ncov) real-time rt-pcr diagnostic panel
U0002	2019-ncov coronavirus, sars-cov-2/2019-ncov (COVID-19), any technique, multiple types or subtypes (includes all targets), non-cdc
U0003	Infectious agent detection by nucleic acid (DNA or RNA); Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), amplified probe technique, making use of high throughput technologies as described by CMS-2020-01-R
U0004	2019-nCoV Coronavirus, SARS-CoV-2/2019-nCoV (COVID-19), any technique, multiple types or subtypes (includes all targets), non-CDC, making use of high throughput technologies as described by CMS-2020-01-R
U0005	Infectious agent detection by nucleic acid (DNA or RNA); Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), amplified probe technique, CDC or non-CDC, making use of high throughput technologies, completed within 2 calendar days from date of specimen collection (list separately in addition to either HCPCS code U0003 or U0004) as described by CMS-2020-01-R2

- Testing must be performed in a consistent manner under the guidelines set forth by the United States Centers for Disease Control and Prevention (CDC).
- Testing must have an order on file.
- PCR testing is appropriate for asymptomatic patients with documented exposure to persons with known COVID-19.
- PCR testing is appropriate for determination of abated infection.
- Rapid Testing is appropriate for documented symptomatic patients.
- The Health Plan covers medically necessary, CDC approved COVID-19 testing when there is documented direct exposure, symptoms, or for asymptomatic patients prior to surgery.

Antibody Testing

Code	Description
86328	Immunoassay for infectious agent antibody(ies), qualitative or semiquantitative, single step method (e.g., reagent strip); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19])
86408	Neutralizing antibody, severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID19]); screen
86409	Neutralizing antibody, severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID19]); titer

86413	Severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (Coronavirus disease [COVID-19]) antibody, quantitative
86769	Antibody; severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) MULTIPLE STEP METHOD

- The Health Plan covers antibody testing when medically appropriate for an individual, as determined and ordered in accordance with current CDC guidelines for antibody testing.
- Antibody testing should not be used as the only means of diagnosis of COVID-19.
- Testing must have an order on file.
- Report 86328 once for each reagent strip tested.
  - If the reagent strip tests for one or multiple antibody classes (e.g. IgG and IgM), one unit of service should be reported, regardless of the number of antibodies evaluated and reported on the reagent strip.
- Modifier -59 should be appended to the code for the second reagent strip and documentation should support use of two reagent strips.
- Modifier -59 should be appended to the code reported for the second assay and documentation should support as two distinct analyses were performed.

Vaccine Codes (Effective November 10, 2020)

Code	**Description**
91300	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (COVID-19) vaccine, mRNA-LNP, spike protein, preservative free, 30mcg/0.3mL dosage, diluent reconstituted, for intramuscular use (Vaccine manufacturer: Pfizer Inc.)
91301	SARS-CoV-2 (COVID-19) vaccine, mRNA-LNP, spike protein, preservative free, 100mcg/0.5mL dosage, for intramuscular use (Vaccine manufacturer: Moderna Inc.)
91302	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, DNA, spike protein, chimpanzee adenovirus Oxford 1 (ChAdOx1) vector, preservative free, 5x1010 viral particles/0.5mL dosage, for intramuscular use (AstraZeneca)
91303	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease[COVID-19]) vaccine, DNA, spike protein, adenovirus type 26 (Ad26) vector, preservative free, 5x1010 viral particles/0.5mL dosage, for intramuscular use
91304	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, recombinant spike protein nanoparticle, saponin-based adjuvant, preservative free, 5 mcg/0.5mL dosage, for intramuscular use
0001A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30mcg/0.3mL dosage, diluent reconstituted; first dose

Code	Description
0002A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3mL dosage, diluent reconstituted; second dose
0011A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 100mcg/0.5mL dosage; first dose
0012A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 100mcg/0.5mL dosage; second dose
0021A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (coronavirus disease [COVID-19]) vaccine, DNA, spike protein, chimpanzee adenovirus Oxford 1 (ChAdOx1) vector, preservative free, 5x1010 viral particles/0.5mL dosage; first dose
0022A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (coronavirus disease [COVID-19]) vaccine, DNA, spike protein, chimpanzee adenovirus Oxford 1 (ChAdOx1) vector, preservative free, 5x1010 viral particles/0.5mL dosage; second dose
0031A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (coronavirus disease [COVID-19]) vaccine, DNA, spike protein, adenovirus type 26 (Ad26) vector, preservative free, 5x1010 viral particles/0.5mL dosage, single dose

- Initially the federal government is reimbursing designated vaccination sites directly for the COVID-19 vaccines. Administration may be billed and reimbursed.

Miscellaneous Services

Code	Description
99072	Additional supplies, materials, and clinical staff time over and above those usually included in an office visit or other non-facility service(s), when performed during a Public Health Emergency as defined by law, due to respiratory-transmitted infectious disease.

The Health Plan does not separately reimburse for procedure codes identified as Status B codes in the MPFS Final Rule and the Outpatient Prospective Payment System (OPPS) Addendum D that corresponds with the date of service billed. This code is considered inclusive of the office visit and is not separately reimbursable for claims submitted on or after September 8, 2020.

Specimen Collection

Code	Description
99000	Handling and/or conveyance of specimen for transfer from the office to a laboratory
G2023	Specimen collection for severe acute respiratory syndrome coronavirus 2 (sars-cov-2) (coronavirus disease [COVID-19]), any specimen source

Code	Description
G2024	Specimen collection for severe acute respiratory syndrome coronavirus 2 (sars-cov-2) (coronavirus disease [COVID-19]) from an individual in a SNF or by a laboratory on behalf of a HHA, any specimen source
C9803	Hospital outpatient clinic visit specimen collection for severe acute respiratory syndrome coronavirus 2 (sars-cov-2) (coronavirus disease [COVID-19]), any specimen source

Report 99000 when a swab collection for a PCR test is performed and sent out to an independent lab for testing.

- This is an exception to the CMS status B code indication for CPT 99000 in consideration of the current Public Health Emergency.
- Collection only.
  - 99000 is separately reimbursed.
- Billed with E/M.
  - 99000 is considered inclusive of the E/M service.

Report C9803 when clinical staff assesses patient symptoms and collects nasopharyngeal, oropharyngeal, sputum, or other types of specimens from a patient in a hospital outpatient clinic setting for the purpose of performing a laboratory test for the SARS–CoV–2 virus.

Treatment Coding

Code	Description
Q0239	Injection, bamlanivimab-xxxx, 700 mg
Q0243	Injection, casirivimab and imdevimab, 2400 mg
Q0247	Injection, sotrovimab 500mg
M0239	Intravenous infusion, bamlanivimab-xxxx, includes infusion and post administration monitoring
M0243	Intravenous infusion, casirivimab and imdevimab includes infusion and post administration monitoring
M0245	Intravenous infusion, bamlanivimab and estesevimab, includes infusion and post administration monitoring
M0247	Intravenous infusion, sotrovimab, includes infusion and post administration monitoring
M0248	Intravenous infusion, sotrovimab, includes infusion and post administration monitoring in the home or residence; this includes a beneficiary's home that has been made provider-based to the hospital during the COVID-19 public health emergency
M0249	Intravenous infusion, tocilizumab, for hospitalized adults and pediatric patients (2 years of age and older) with COVID-19 who are receiving systemic corticosteroids and require supplemental oxygen, non-invasive or invasive mechanical ventilation, or extracorporeal membrane oxygenation (ECMO) only, includes infusion and post administration monitoring, first dose

Code	Description
M0250	Intravenous infusion, tocilizumab, for hospitalized adults and pediatric patients (2 years of age and older) with COVID-19 who are receiving systemic corticosteroids and require supplemental oxygen, non-invasive or invasive mechanical ventilation, or extracorporeal membrane oxygenation (ECMO) only, includes infusion and post administration monitoring, second dose monitoring, second dose

Modifier CS

Cost-sharing waived for specified COVID-19 testing-related services that result in an order for or administration of a COVID-19 test and/or used for cost-sharing waived preventive services furnished via telehealth in rural health clinics and federally qualified health centers during the COVID-19 public health emergency.

Cost share waivers may adjust over time and may be specific to a member's plan coverage. Cost share will not be waived on E/M services billed without COVID testing.
Services billed with modifier CS will be regularly audited for appropriate billing and claims processing.

Exclusions and Limitations

Physical, psychiatric or psychological exams, testing, vaccinations, immunizations or treatments when:

- Required solely for purposes of career, education, sports, camp, travel, employment, insurance, marriage or adoption.
- Related to judicial or administrative proceedings or orders.
- Conducted for purposes of medical research, except for qualified clinical trials.
- Required to obtain or maintain a license of any type.

Non-Covered Services

Code	Description
0225U	Antibody, severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), includes titer(s), when performed
0226U	Surrogate viral neutralization test (sVNT), severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), ELISA, plasma, serum

4.0 Documentation Requirements:

The medical record entries must provide a complete and accurate reflection of the procedures/services provided and full support the coding and claim data submitted for reimbursement. Incomplete records and lack of response to request of medical records may result in denial or reduced reimbursement.

The documentation submitted for support is based on the services provided. For example, a documentation for a lab service would include; lab order/requisition, lab reports, time and date of draw, where the documentation for an office visit with a primary care provider may simply consist of the visit notes (HPI, exam, medical decision making). The Health Plan uses CMS documentation

guidelines as best practice to ensure that all pertinent medical record components are reviewed as support of services billed. All supporting components of a service must be received within the allotted time frame to avoid denial for lack of supporting documentation.

5.0 Verification of Compliance

Claims are subject to audit, prepayment and post payment, to validate compliance with the terms and conditions of this policy.

6.0 Terms & Definitions:

Antibody Test Also referred to as serology testing, looks for the presence of antibodies, which are specific proteins made in response to infections. Antibodies are detected in the blood of people who are tested after infection; they show an immune response to the infection. Antibody testing does not detect the virus itself. It may take several days to weeks for antibodies to develop and present in a test.

Antigen Test Diagnostic test performed to identify an active coronavirus infection faster than a molecular test.

At-Home Collection Test Diagnostic test available only by prescription from a doctor, allows the patient to collect the sample at home and send it directly to the lab for analysis. Some at-home collection tests have a health care provider oversee the sample collection by video with the patient.

Combination Test Diagnostic test that can test for the flu and the coronavirus at the same time. Some can test for many different types of respiratory viruses, including the one that causes COVID-19.

COVID-19 related: Services directly related to the diagnosis and treatment of COVID-19 and services related to the detection of the SARS-CoV-2 virus, antibodies, and antigens

Molecular Tests Diagnostic test, also referred to as PCR tests performed to identify an active coronavirus infection.

PCR Test Directly detects the presence of an antigen, rather than the presence of the body's immune response, or antibodies. By detecting viral RNA, which will be present in the body before antibodies form or symptoms of the disease are present, the tests can tell whether someone has the virus very early on.

Rapid, point of care Test Diagnostic tests uses a mucus sample from the nose or throat but can be analyzed at the doctor's office or clinic where the sample is collected, and results may be available within minutes. These may be molecular or antigen tests.

Saliva Test Diagnostic test that allows a patient to spit into a tube rather than get their nose or throat swabbed. Saliva tests may be more comfortable for some people and may be safer for health care workers who can be farther away during the sample collection.

Viral Test Provides information if you have a current infection.

7.0 References, Citations, Resources & Associated Documents:

BCP-15 COVID-19 Testing and Treatment.

PRP-15 Telemedicine Services.

The Centers for Disease Control and Prevention (CDC) https://www.cdc.gov/coronavirus/2019-ncov/hcp/clinicalcriteria.html.

CMS.gov Centers for Medicare & Medicaid Services, Current Emergencies, Coronavirus Disease 2019. https://www.cms.gov/About-CMS/Agency-Information/Emergency/EPRO/Current-Emergencies/Current-Emergencies-page.

MLN Matters Number: MM11939 Quarterly Update to the Medicare Physician Fee Schedule Database (MPFSDB).

MLN Matters Number: MM11960 October 2020 Update of the Hospital Outpatient Prospective Payment System (OPPS).

CPT Assistant Special Edition: SARS-Cov-2 Serologic Laboratory Testing Volume 30, 2020.

8.0 Revision History:

Original Effective Date: 10/26/2021

Next Review Date: 10/26/2022

Revision Date	Reason for Revision
7/21	Annual review; new dx and procedure codes added, updated verbiage on the Guidelines.