March 17, 2020

Coronavirus/COVID-19 Testing and Diagnosis Coding

With the public's rising concern of COVID-19*, Blue KC wanted to confirm that necessary actions pertaining to CPT and ICD-10 coding/billing have been performed.

*The World Health Organization has officially named this corona virus as COVID-19

Coding:

American Medical Association (AMA) has issued one new Category I CPT code for COVID-19 testing. The code is allowed to be accepted by payers effective March 13, 2020.

- 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

Centers for Medicare and Medicaid Services (CMS) has issued two **new HCPC's codes for COV**ID-19 testing. The codes are allowed to be accepted by payers starting April 1, 2020, for service dates February 4, 2020, and forward.

- U0001 – CDC lab testing for SARS-CoV-2
- U0002 – Non-CDC laboratory tests for SARSD-CoV-/2019-nCoV (COVID-19)

At this time, there is not a specific ICD-10 diagnosis for COVID-19. A proposed diagnosis code has been developed (U07.1) and will be published in October 2020. In the meantime, the CDC has provided guidance for diagnosis coding as follows:

CONDITION	DIAGNOSIS CODES
Pneumonia, confirmed as due to COVID-19	J12.89, B97.29
Acute bronchitis, confirmed as due to COVID-19	J20.38, B97.29
Bronchitis NOS, confirmed as due to COVID-19	J40, B97.29
Acute Lower respiratory infections NOS, confirmed as due to COVID-19	J22, B97.29
Respiratory infection NOS, confirmed as due to COVID-19	J98.8, B97.29
Acute respiratory distress syndrome, confirmed as due to COVID-19	J80, B97.29
Possible exposure to COVID-19	Z03.818
Exposure to confirmed COVID-19	Z20.828

Signs and Symptoms - Current Directive:

For patients presenting with any signs/symptoms (such as fever) and where a definitive diagnosis has not been established, assign the appropriate code(s) for each of the presenting signs and symptoms, such as:

- R05 Cough

PROV_1000_031620

- R06.02 Shortness of breath
- R50.9 Fever, unspecified

Telehealth:
Blue KC understands that virtual care can allow providers to monitor members at home, **minimizing the spread of infection and easing the burden on emergency rooms, doctors' offices** and urgent care clinics. Blue KC has made key changes to both member benefits and provider billing. Provider is defined as MD, DO, PA, ARNP and Ancillary, and excludes RN, LPN and Nurse Assistant contacts.

In response, Blue KC will encourage the use of the following, effective March 16, 2020:

- Telehealth (codes 99201-99215, G0425-G0427, G0459, G0508, and G0509). These visits would be at no member cost share for Blue KC members. <u>Please Note</u>: Any Blue KC members with Qualified High Deductible Health Plans with a Health Savings Account (HSA) should limit these no-cost virtual care visits to COVID-19 concerns. These codes are for providers using virtual visits, and using place of service 02 for telehealth or 12 for Home is required.

- Provider telephonic visits (99441 – 99443). These visits are subject to normal member cost share. Blue KC is making this temporary update to cover telephonic visits not previously covered.

- Home Visits (codes 99341-99350). Normal member cost share would apply. This includes place of service 12 for Home.

For further information on telehealth, please refer to the Telehealth Payment policy located on the Blue KC Provider Portal.

Next Steps:
Any development or changes in CPT and/or ICD-10 coding, as well as coding guidance, will be handled and communicated promptly by Blue KC.