

COVID -19 CODING UPDATES

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EVERYONE'S SECRET FEAR RIGHT NOW



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What Are We Covering Today

- ICD-10-CM (6 new diagnosis codes)
- Outpatient Testing
- Vaccinations
- HRSA Program

* Click on the [green hyperlinks](#) throughout the presentation for the regulatory guidance related to that page of the presentation.

ICD-10-CM

- As a result of the ongoing COVID-19 public health emergency the CDC implemented [additional codes](#). Effective January 1st, 2021
- Encounter for screening for COVID-19 (Z11.52)
 - Do not report for screening until the pandemic is declared over ([per ICD-10-CM updated guidelines](#))
- Contact with and (suspected) exposure to COVID-19 (Z20.822)
- Personal history of COVID-19 (Z86.16)
- Multisystem inflammatory syndrome (MIS) (M35.81)
- Other specified systemic involvement of connective tissue (M35.89)
- Pneumonia due to coronavirus disease 2019 (J12.82)

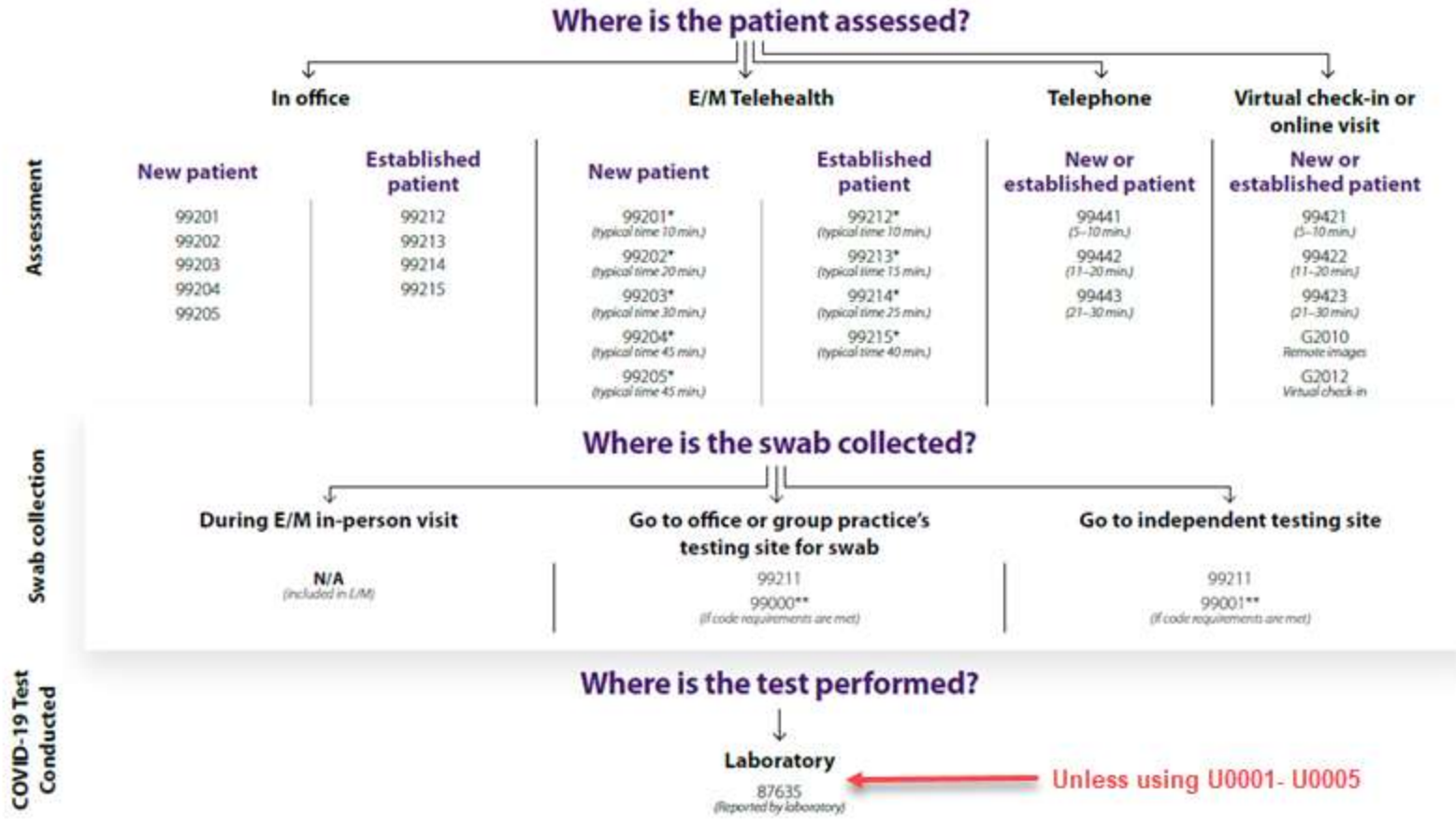
ICD-10-CM for COVID-19 Testing

Scenario	Diagnosis Codes as of 2/20/20	Diagnosis Codes as of 4/1/20	Diagnosis Codes as of 8/5/20	Diagnosis Codes as of 1/1/21
Patient has symptoms and suspected exposure to COVID-19 is ruled out	Z03.818 , Encounter for observation for suspected exposure to other biological agents ruled out	No Change	Z20.828 , Contact with and (suspected) exposure to other viral communicable diseases	Z20.822 , Contact with and (suspected) exposure to COVID-19
Patient has symptoms and confirmed (or suspected) exposure to COVID-19 w/ negative or unknown results	Z20.828 , Contact with and (suspected) exposure to other viral communicable diseases	No Change	No Change	Z20.822 , Contact with and (suspected) exposure to COVID-19
Patient has no symptoms, no confirmed (or suspected) exposure to COVID-19 w/ negative or unknown results	* Z11.59 , Encounter for screening for other viral diseases; OR * Z03.818 , Encounter for observation for suspected exposure to other biological agents ruled out	Z11.59 , Encounter for screening for other viral diseases	Z20.828 , Contact with and (suspected) exposure to other viral communicable diseases	* Z20.822 , Contact with and (suspected) exposure to COVID-19
Asymptomatic individuals who test positive for COVID-19	B97.29 , Other coronavirus as the cause of diseases classified elsewhere	U07.1 , COVID-19	No Change	No Change
Patient previously had COVID-19; was seen for follow-up exam, and COVID-19 test is negative	* Z09 , Encounter for follow-up exam after completed treatment for conditions other than neoplasm * Z86.19 , Personal history of other infectious and parasitic diseases	No Change	Z09 , Encounter for follow-up exam after completed treatment for conditions other than neoplasm Z86.19 , Personal history of other infectious and parasitic diseases	Z09 , Encounter for follow-up exam after completed treatment for conditions other than neoplasm Z86.16 , Personal history of COVID-19

Outpatient Testing Scenarios

Scenario	Diagnosis Codes as of 2/20/20	Diagnosis Codes as of 4/1/20	Diagnosis Codes as of 8/5/20	Diagnosis Codes as of 1/1/21
<p>Patient presents to the ED with cough and shortness of breath. COVID-19 test is performed and result is negative.</p> <p>MD assessment is acute URI and patient is discharged to home.</p>	<p>J06.9, Acute upper respiratory infection;</p> <p>Z03.818, Encounter for observation for suspected exposure to other biological agents ruled out</p>	No Change	<p>J06.9, Acute upper respiratory infection;</p> <p>Z20.828, Contact with and (suspected) exposure to other viral communicable diseases</p>	<p>J06.9, Acute upper respiratory infection;</p> <p>Z20.822, Contact with and (suspected) exposure to COVID-19</p>
<p>A patient presents to the physician clinic requesting COVID-19 test due to being exposed to COVID-19 by a family member.</p> <p>The patient has no symptoms and the test is negative.</p>	<p>Z11.59, Encounter for screening for other viral diseases; OR</p> <p>Z03.818, Encounter for observation for suspected exposure to other biological agents ruled out</p>	Z11.59 , Encounter for screening for other viral diseases	Z20.828 , Contact with and (suspected) exposure to other viral communicable diseases	Z20.822 , Contact with and (suspected) exposure to COVID-19
<p>A patient presents to the physician clinic requesting COVID-19 test. The patient has no symptoms and no known or suspected exposure.</p> <p>The test is negative.</p>	Z11.59 , Encounter for screening for other viral diseases	No Change	Z20.828 , Contact with and (suspected) exposure to other viral communicable diseases	Z20.822 , Contact with and (suspected) exposure to COVID-19

CPT reporting for COVID-19 Testing



Specimen Collection

- Providers can be paid for collection of COVID-19 testing with a nurse visit by reporting CPT 99211. Reported with modifier CS.
- This would be when the patient only sees clinical office staff. If the provider is reporting another evaluation and management (E/M) service code on that day then it is not separately reportable.

Modifier CS

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- Appending modifier CS waives any cost sharing for the patient and insurers will pay 100%.
 - Use the modifier CS on any E/M visits that are related to testing.
 - Office and other outpatient services
 - Hospital observation services
 - ED services
 - Nursing facility services
 - Domiciliary, rest home, or custodial care services
 - Home services
 - Online digital E/M services

Ordering the Test

- During the COVID-19 Public Health Emergency (PHE), CMS relaxed requirements for a limited number of laboratory tests required for a COVID-19 diagnosis. These tests do not require a practitioner order during the PHE. [Here is the latest list updated 5-5-21.](#)
- Medicare will pay for these tests without a written order from the treating physician or other practitioner:
 - If an order is not written, you do not need to provide the National Provider Identifier (NPI) of the ordering or referring professional on the claim

Counseling for COVID/Self Isolation

Counseling patients, about the importance of self-isolation, at the time of COVID testing is a billable service. The utilization of E/M codes by providers who are eligible to bill CMS for E/M services (no matter where the test is being administered).

CMS has a published counseling [check list](#) available for assistance with this. It includes many internet resources as well.

HCPCS Reporting for Testing

- U0001 – CDC 2019 novel coronavirus (2019-ncov) real-time rt-pcr diagnostic panel
 - HCPCS code U0001 should be used specifically for Centers for Disease Control and Protection (CDC) testing laboratories to test patients for SARS-CoV-2 (CDC 2019 Novel Coronavirus Real Time RT-PCR Diagnostic Test Panel)
- U0002- 2019-ncov coronavirus, sars-cov-2/2019-ncov (covid-19), any technique, multiple types or subtypes (includes all targets), **non-cdc**
 - U0002 allows laboratories to bill for non-CDC laboratory tests for SARS-CoV-2/2019-nCoV (COVID-19).

HCPCS Reporting for Testing

- 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](#).
 - HCPCS codes U0003 identify tests that would otherwise be reported with CPT code 87635, but use high throughput technologies. U0004 should identify tests that would otherwise be identified by U0002 but for being performed with these high throughput technologies. Neither U0003 nor U0004 should be used for tests that detect COVID-19 antibodies
- 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.

HCPCS Reporting for Testing

- 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 two calendar days** from date and time of specimen collection.
 - (List separately in addition to either HCPCS code U0003 or U0004)

High Throughput Technologies

- A high throughput technology uses a platform that employs automated processing of more than two hundred specimens a day.

MAC COVID-19 Test Pricing

CPT Code	Short Descriptor	Reimbursement	Effective Date
U0001	CDC 2019 novel coronavirus (2019-ncov) real-time rt-pcr diagnostic panel (CDC test kit)	\$35.91	On or after 2/4/20
U0002	2019- ncov coronavirus, sars-cov-2/2019-ncov (covid-19), <u>any technique</u> , multiple types or subtypes (includes all targets), non-cdc	\$51.31	On or after 2/4/20
U0003	Infectious agent detection by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), <u>amplified probe technique</u> , making use of high throughput technologies as described by CMS-2020-01-R.	\$75.00	On or after 4/14/20
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.	\$75.00	On or after 4/14/20
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 two calendar days from date and time of specimen collection. (List separately in addition to either HCPCS code U0003 or U0004)	\$25.00	On or after 1/1/21
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	\$51.31	On of after 3/13/20

QW Modifier

- All claims with either CPT 87635 OR U0002
- MLN Matters release date April 24, 2020
- Effective date March 20, 2020
- Implementation date May 8, 2020.

COVID-19 Vaccination Program

- Administer the vaccination with no out-of-pocket cost to the patient.
 - Can not balance bill the patient.
 - Can not charge patients for an office visit or other fee if COVID-19 vaccination is the only medical service given. Nurse visits (99211) are the exception for the administration of the vaccination. Check your commercial payer policies.
- Vaccinate everyone, including uninsured, regardless of coverage or network status.
- The Presidential Administration announced in May that the Health Resources and Services Administration (HRSA) will cover the cost of administering vaccinations to patients whose health insurance does not cover vaccination administration fees or is subject to cost sharing.

Reporting Vaccinations

Vaccination Code	Description	Vaccination Type	Administration Code
91300	(SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3mL dosage, diluent reconstituted, for intramuscular use	Pfizer-BioNTech	1 st Dose: 0001A 2 nd Dose: 0002A
91301	(SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 100 mcg/0.5mL dosage, for intramuscular use	Moderna	1 st Dose: 0011A 2 nd Dose: 0012A
91302	(SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, DNA, spike protein, chimpanzee adenovirus Oxford 1 (ChAdOx1) vector, preservative free, 5×10 ¹⁰ viral particles/0.5mL dosage, for intramuscular use	AstraZeneca	1 st Dose: 0021A 2 nd Dose: 0022A
91303	(SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, DNA, spike protein, adenovirus type 26 (Ad26) vector, preservative free, 5×10 ¹⁰ viral particles/0.5mL dosage, for intramuscular use	Janssen (Johnson & Johnson)	Single Dose: 0031A
91304	2 (SARSCoV-2) (coronavirus disease [COVID-19]) vaccine, recombinant spike protein nanoparticle, saponin-based adjuvant, preservative free, 5 mcg/0.5mL dosage, for intramuscular use	Novavax, Inc	1 st Dose: 0041A 2 nd Dose: 0042A

Vaccination Administration Reimbursement Rates

- Claims with dates of service through March 14, 2021.
 - 1st dose \$16.94 (HCPCS 0001A, 0011A, 0021A)
 - 2nd dose \$28.39 (HCPCS 0002A, 0012A, 0022A)
 - Single dose \$28.39 (HCPCS 0031A)
- Claims with dates of service **on or after March 15, 2021.**
 - All doses \$40.00

HRSA COVID-19 Uninsured Program

- Reimbursement at the Medicare rate for testing, treating, and administering COVID-19 vaccinations.
- Must be a participating provider.
- Effective date February 4, 2020
- Must have a COVID-19 primary diagnosis, except for pregnancy when the COVID-19 code may be listed as secondary.

What is Covered?

- Specimen collection, diagnostic and antibody testing.
- Vaccinations
- Testing-related visits including in the following settings: office, urgent care or emergency room or telehealth.
- Treatment: office visit (including telehealth), emergency room, inpatient, outpatient/observation, skilled nursing facility, long-term acute care (LTAC), rehabilitation care, home health, durable medical equipment (e.g., oxygen, ventilator), emergency ambulance transportation, non-emergent patient transfers via ambulance, and FDA-licensed, authorized, or approved treatments as they become available for COVID-19 treatment.
- Administration fees related to FDA-licensed or authorized vaccines.

Let's Talk About What You Are Doing To Monitor COVID Charges

- Are you running charge reports to see if you are reporting U0005 with either U0003 and U0004?
 - Is your coding team being informed of all the changes?
 - How are you tracking coding guidance and changes for appeals?
- Are you billing the nurse visit when administering a vaccination?
- Share your successes.

References

- <https://journal.ahima.org/covid-19-icd-10-cm-coding-timeline-for-outpatient-services/>
- <https://www.ama-assn.org/system/files/2020-03/cpt-assistant-guide-coronavirus.pdf>
- [AMA Special Coding Advice](#)
- <https://static.cigna.com/assets/chcp/resourceLibrary/medicalResourcesList/medicalDoingBusinessWithCigna/medicalDbwCVirtualCare.html>
- <https://www.cdc.gov/nchs/data/icd/Announcement-New-ICD-code-for-coronavirus-19-508.pdf>
- <https://www.cms.gov/medicare/medicare-part-b-drug-average-sales-price/covid-19-vaccines-and-monoclonal-antibodies>
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Questions?

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