

Revised April 27, 2023

Nonprofit corporations and independent licensees of the Blue Cross and Blue Shield Association

The information in this document applies to services provided during the COVID-19 public health emergency, which ends on May 11, 2023.

For dates of service on or after May 12, 2023, normal business rules apply; refer to the member's benefits.

Health care providers should inform their patients of the preferred intake process for the evaluation of possible Coronavirus (COVID-19) symptoms and have a process in place when patients present with suspected COVID-19 symptoms. Here's information on COVID-19 testing coverage and recommendations for testing patients for COVID-19.

Coverage for COVID-19 testing

Through the Families First and the CARES Acts of 2020, Congress requires health insurers to cover the cost of COVID-19 testing. Blue Cross Blue Shield of Michigan and Blue Care Network are committed to making quality testing as easy as possible to access for anyone who needs it.

On March 6, 2020, Blue Cross and BCN announced our commitment to cover the full cost of diagnostic tests authorized or administered by a qualified health professional consistent with CDC guidance related to COVID-19. This coverage is effective Feb. 4, 2020, until May 11, 2023, and includes the member cost share of in-person diagnostic testing not paid as part of a Public Health surveillance response. Coverage for in-person antibody (serological) testing is effective April 10, 2020, until May 11, 2023, and also includes the member cost share when not paid as part of a Public Health surveillance response. See also the section titled "At-home testing" later in this document.

In-person COVID-19 testing that is covered

Blue Cross and BCN cover COVID-19 tests that are determined to be appropriate by a qualified health professional. See the COVID-19 testing criteria below.

In-person COVID-19 testing that IS NOT covered

Blue Cross and BCN's standard policy does not cover the cost of administrative or routine tests if not documented as appropriate based on the medical opinion of a qualified health professional based on an individualized clinical assessment. In keeping with the policy, below are some examples of **noncovered** in-person COVID-19 testing:

- Testing that is required by an employer, school or sports team
- Testing that occurs as part of a research study

For commercial members, use Z11.52 or Z11.59 as the primary diagnosis code for administrative or routine tests; these diagnosis codes aren't payable. For Medicare Advantage members, follow CMS guidelines.



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In-person COVID-19 testing criteria for commercial plans

Blue Cross will cover the cost of commercial member in-person COVID-19 testing that meets these criteria:

- The test has received or is waiting to receive approval for use (including emergency use) by the Food and Drug Administration or falls within one of the other categories of tests required to be covered by the Families First or CARES Acts. This includes rapid diagnostic tests and at-home diagnostic tests, as long as they meet the criteria. A current list of tests approved by the Food and Drug Administration is available on the FDA's In Vitro Diagnostics EUAs webpage.**
- The test is administered or ordered by a qualified health professional who determines
 testing is appropriate using judgment in accordance with accepted standards of
 medical practice through an individualized clinical assessment. A qualified health
 professional includes a physician or attending clinician operating within the scope of
 their license, including a pharmacist.
- We assume the test is medically appropriate unless it's coded with a noncovered diagnosis code (Z11.52 or Z11.59). A COVID-19 test can be appropriate regardless of whether the patient is experiencing symptoms or has been exposed to COVID-19. Blue Cross and BCN support the role of the qualified health professional's clinical judgment regarding COVID-19 related procedures and testing.

The primary diagnosis code for covered in-person COVID-19 testing is:

- Z20.822 for dates of service on or after Jan. 1, 2021 For testing determined to be appropriate by a qualified health professional, including symptomatic testing and testing due to contact with and (suspected) exposure to COVID-19
- Z20.828 for dates of service on or before Dec. 31, 2020
- Any other diagnosis code deemed appropriate by the qualified health professional for asymptomatic patients with no known exposure to COVID-19 for whom the health professional determines a COVID-19 test is appropriate for reasons other than those not covered (employment, school, sports or any other public surveillance)
- See the section below for COVID-19 pre-operative testing diagnosis codes

In-person COVID-19 testing criteria for Medicare Advantage plans

For Blue Cross and BCN Medicare Advantage plans (Medicare Plus BlueSM and BCN AdvantageSM), effective Sept. 2, 2020, until May 11, 2023, patients are allowed one inperson COVID-19 and related test without the order of a physician or other health practitioner when these tests are furnished in conjunction with a COVID-19 clinical diagnostic test and deemed appropriate in the course of establishing or ruling out a COVID-19 diagnosis.

All subsequent in-person tests require an order from a health care provider.



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In-person COVID-19 testing criteria for all health plans

For all Blue Cross and BCN health plans, including commercial and Medicare Advantage, the following criteria apply:

- The provider must:
 - Document the clinical appropriateness for the test in the patient's medical record supporting the level billed, consistent with Blue Cross and BCN policy
 - Have the resources available to act on any results from the test, whether the results are positive or negative
 - Refrain from ordering the test as part of any inducements or incentives to the patient
- To help with community data, Blue Cross and BCN expect that providers will report
 the test results to the individual's provider (if they have one) and the Michigan Health
 Information Network, known as MiHIN or a local Health Information Exchange.

Pre-operative testing

This pre-operative testing guidance is specific to the COVID-19 pandemic.

Pre-operative COVID-19 testing is appropriate for procedures conducted in hospital operating rooms and ambulatory surgical facilities. In addition, pre-operative COVID-19 testing is appropriate for aerosol-generating procedures regardless of the location performed. An example of this would be oral surgery in the office setting.

Pre-operative COVID-19 testing is **not** recommended for procedures other than those listed above. Some examples include a simple wound closure, skin biopsy or routine medical or dental care performed in the office setting.

When performed, pre-operative COVID-19 testing should support the patient's access to needed medical care. COVID-19 testing should not become a barrier to receiving care. Multiple pre-operative COVID-19 tests per procedure is not recommended.

When performing pre-operative COVID-19 testing, the attending health care provider must:

- Use clinical judgment when ordering pre-operative testing
- Document the test in the patient's medical record, incorporating medical indications
- Communicate results of the test to the patient's primary care physician and other clinicians caring for the patient
- Inform the patient of the results, explain what the results mean and any related medical recommendations
- Report the test results to the Michigan Health Information Network or a local Health Information Exchange



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For our commercial plans, the codes for pre-operative testing include:

- Z01.810 Encounter for preprocedural cardiovascular examination
- Z01.811 Encounter for preprocedural respiratory examination
- Z01.812 Encounter for preprocedural laboratory examination
- Z01.818 Encounter for other preprocedural examination

For Medicare Plus Blue and BCN Advantage, follow CMS guidance.

At-home testing

Effective Feb. 1, 2022, and continuing through the public health emergency, which ends May 11, 2023, commercial members with Blue Cross or BCN pharmacy coverage can obtain up to eight FDA authorized or approved over the counter at-home rapid diagnostic COVID-19 tests every 30 days, through one of these methods:

- Through our preferred pharmacy network for at-home COVID-19 testing at no cost to the member
- Through non-preferred pharmacies by requesting reimbursement of \$12 or the cost of the at-home COVID-19 test, whichever is lower.

At-home testing doesn't require an order from a qualified health professional. At-home tests should be performed according to their specific instructions and used for the same clinical indications that a qualified health professional would deem medically appropriate.

At-home testing is not covered when performed only for occupational indications.

For the latest information on the preferred pharmacy network and the reimbursement process for COVID-19 at-home tests purchased from non-preferred pharmacies, view information on our COVID-19 webpage for individuals and families.

For patients with a personal history of COVID-19

For patients with a personal history of COVID-19, bill the appropriate primary diagnosis code and use Z86.16 as the secondary diagnosis code. This secondary diagnosis code is informational only.

Note: The waiving of member cost sharing is associated with the primary diagnosis code. Cost sharing isn't waived based on Z86.16, which is a secondary diagnosis code.

Codes for clinical diagnostic laboratory testing

Here's the list of HCPCS codes from the Centers for Medicare & Medicaid Services and CPT* codes from the American Medical Association that can be used for diagnostic laboratory testing for Blue Cross and BCN commercial health plans. For our Medicare Advantage plans, Medicare Plus Blue and BCN Advantage, please refer to the CMS Clinical Laboratory Fee Schedule Files.**



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For dates of service on or after	These codes are billable		
Feb. 4, 2020	U0001	U0002	*0100U
March 13, 2020	*87635		
April 14, 2020	U0003 ¹	U0004 ¹	
May 20, 2020	*0202U		
June 25, 2020	*0223U	*0224U	*87426
For dates of service on or after	These codes are billable		
Aug. 10, 2020	*0226U		
Sept. 8, 2020	*86413		
Oct. 6, 2020	*0240U	*0241U	*87636
	*87637	*87811	
Nov. 10, 2020	*87428		
Feb. 21, 2022	*87913		

¹U0003 and U0004 are payable to a provider only once per day per patient.

Codes for antibody (serologic) testing

Here's the list of codes that can be used for antibody testing for Blue Cross and BCN commercial health plans for dates of service on or after April 10, 2020. For Medicare Plus Blue and BCN Advantage, please refer to the CMS Clinical Laboratory Fee Schedule Files.**

*86318	*86328	*86408	*86409	*86769
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Other codes and billing resources

Here are some additional tips for billing for patient testing:

- Follow these guidelines for when to use the CS modifier for an office visit or related service that results in a COVID-19 test. The CS modifier identifies that the service resulted in a COVID-19 test and is subject to the member cost-sharing waiver during the public health emergency.
 - For Medicare Plus Blue and BCN Advantage members, follow <u>CMS guidance</u>.**
 - For Blue Cross and BCN commercial members:
 - March 1, 2020 to Aug. 31, 2022: Include the CS modifier on all claims that resulted in a COVID-19 test.



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- Beginning with dates of service on or after Sept. 1, 2022: Limit the use of the CS modifier to the codes listed on the <u>Services that result in a COVID-19</u> test and the CS modifier document.
- Reference our document, <u>Billing recommendations for COVID-19 testing, including</u> <u>drive through</u> for specific codes based on the place of service.

Testing that can be performed in a physician's office

Certain laboratory services can be performed in and billed from a physician's office during the public health emergency (until further notice). For temporary codes for our commercial plans and BCN Advantage, the codes are listed below. For Medicare Plus Blue, please refer to the Medicare Plus Blue Physician Office Laboratory List.

Influenza testing performed in a physician office

The following influenza tests can be performed in the physician's office until further notice. We're adding these codes to help physicians rule out influenza during the COVID-19 pandemic.

*87275	*87276	*87400	*87804
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Other testing performed in a physician office

The following tests can also be performed in the physician's office until further notice:

*0223U	*0224U	*86318	*86328	*86769	*87426
*87428	*87635	*87636	*87637	*87811	*87913 ²
U0001	U0002	U0003 ¹			

¹Payable to a provider only once per day per patient for Blue Cross and BCN commercial plans.

Recommended lab testing processes

COVID-19 testing can be performed by private laboratories or through the state's Bureau of Laboratories in Lansing.

If you are working with a private laboratory, contact the lab you normally work with to inquire about their processes and obtain test kits.

Blue Cross and BCN will pay for COVID-19 testing consistent with the Families First Coronavirus Response Act. The State of Michigan has a COVID-19 Test Finder** website to help you find the closest testing location. Here's some contact information:

²Payable in a physician's office only for Blue Cross commercial, not BCN commercial or BCN Advantage.



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Lab Name and Phone Number	Testing Instructions	Additional COVID-19 information
Bioreference Laboratories 1-800-229-5227	COVID-19 Information for Healthcare Providers**	Coronavirus COVID-19**
JVHL Network 1-800-445-4979	Contact individual network laboratories through jvhl.org**	
LabCorp 1-888-522-2677	Specimen Collection Instructions**	COVID-19 Testing Information and News for Individuals, Healthcare Providers, Payers, and Organizations** Register for a LabCorp account**
Quest Diagnostics [™] 1-866-697-8378	COVID-19: Information for healthcare professionals**	COVID-19** Quest order form** (for those without an online account)

Help educate your patients

Provide facts to all of your patients to reduce their fear and teach them how to stay safe. The Michigan Department of Health and Human Services has a <u>patient handout that</u> <u>explains COVID-19</u>** including the symptoms, how it spreads, who's at risk and how to protect oneself from the virus. You may want to provide this information to your patients.

Where to find more information

More information is available:

- MDHHS: <u>Michigan Interim COVID-19 Person Under Investigation (PUI) Case Report Form</u>**
 - COVID-19 Test Finder**
 - Michigan.gov/coronavirus**
- Health departments: Directory of Local Health Departments**
- Michigan State Medical Society: <u>COVID-19 Resource Center for Physicians and</u> Patients**
- Michigan Osteopathic Association: COVID-19 Updates and Resources**
- The latest CDC recommendations: <u>Interim Guidelines for Collecting and Handling of Clinical Specimens for COVID-19 Testing**</u>



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None of the information included herein is intended to be legal advice and as such it remains the provider's responsibility to comply with all applicable state and federal laws and regulations, including all coding and documentation requirements.

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