

**COVID-19 Information for our Health Care Provider Partners**

**To: Physicians, Hospitals, Facilities and Laboratories**  
**Date: June 8, 2020**  
**Subjects: COVID-19 Diagnostic & Antibody Testing Administrative Policy & Information for all Lines of Business**

In our communication to you dated May 21, 2020, we shared Health Plan coverage guidelines and member cost-share information related to COVID-19 diagnostic/viral and antibody testing for our commercial members. **The information and guidance we shared in our May 21, 2020 communication now applies to all Health Plan products and lines of business.**

**New Administrative Policy for COVID-19 Viral and Antibody Testing**

The Health Plan has implemented Administrative Policy 26 – COVID-19 Viral and Antibody Testing, to define the coverage, reimbursement and billing guidelines for COVID-19 viral and antibody testing. This policy applies to participating and non-participating practitioners, facilities, laboratories and pharmacies and all lines of business effective March 13, 2020, the date of the national state of emergency declaration. This retrospective application is intended to capture all relevant testing claims that were addressed in subsequent federal legislation and guidance.

Excellus BlueCross BlueShield provides coverage in full for diagnostic/viral testing as well as antibody testing that is determined to be medically appropriate for the diagnosis and treatment of an individual by an attending provider as evidenced by an order from the attending provider. The tests must be FDA approved or the subject of an emergency use order request and the lab performing the testing must be appropriately certified.

For purposes of commercial or Medicaid Managed Care member testing, attending providers are limited to physicians, nurse practitioners, physician assistants and pharmacists. For purposes of Medicare Advantage member testing, attending providers include any health care provider who is authorized to order laboratory tests under New York State law.

Testing that is ordered or performed solely for purposes of pandemic control or re-opening the economy, and not based on a determination by an attending provider that the test is medically appropriate for the diagnosis and treatment of an individual member, is not covered.

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This includes tests performed on an asymptomatic individual solely to assess health status as required by, without limitation, an employer, school, camp, common carrier, government/public health agency, or research/epidemiologic study.

**Provider claims for medically appropriate COVID-19 testing MUST be submitted with one of the following codes: CPT® codes U0001, U0002, U0003, U0004, 0202U, 86328, 87635, and/or 86769.** These codes may be billed with diagnoses of B97.29, U07.1, Z03.818, and/or Z20.828 when appropriate.

**Laboratories MUST bill G2023 and G2024 for the purpose of specimen collection of patients at skilled nursing facility or for homebound patients.** Again, these codes may be billed with diagnoses of B97.29, U07.1, Z03.818, and/or Z20.828 when appropriate.

**When the sole purpose of the test is for pandemic control such as testing of asymptomatic individuals to assess health status as required by an employer, school, camp, common carrier, government/public health agency, or research/epidemiologic study, any submitted testing codes (CPT codes U0001, U0002, U0003, U0004 0202U, 86328, 87635, and/or 86769) MUST be accompanied by EITHER one of these encounter codes - Z02.0, Z02.1, Z02.4, Z02.5, Z02.79, Z02.89 Z02.9, Z56.89, and/or Z56.9, OR modifier-CG. These testing claims are not ordered by attending providers as medically appropriate for the diagnosis or treatment of an individual(s) and are not covered.**

Claims will be reviewed pre-payment and post-payment. Pre-payment review is claim review prior to payment. A pre-payment review results in an initial determination. Post-payment review is claim review after adjudication. A post-payment review may result in no change to the initial determination or a revised determination. Pre- and post-payment reviews are to ensure claim/billing accuracy and completeness and are not medical necessity reviews.

These services are subject to audit and policy updates at the Health Plan's discretion. Commercial members will be held liable for claims that deny based upon this policy. Providers will bear responsibility for testing claim denials of Medicare Advantage, Medicaid Managed Care and Health and Recovery Plan members.

You can access the individual policies on our website, [ExcellusBCBS.com/Adminpol](https://www.excellusbcbs.com/Adminpol). Note: You must login with your username and password to access our administrative policies. If you are not registered to view the secure section of our website, we encourage you to register today at [Provider.ExcellusBCBS.com](https://www.excellusbcbs.com). If you need assistance registering, contact the Web Security Help Desk at 1-800-278-1247. Your Provider Relations representative is also available to assist with web registration and training.

### **CDC Interim Guidance for COVID-19 Antibody Testing**

**On May 23, 2020, the Center for Disease Control and Prevention issued interim guidelines for COVID-19 antibody testing, which include the following:**

- Serologic testing should **not** be used to determine immune status in individuals until the presence, durability, and duration of immunity is established.

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- Serologic test results should **not** be used to make decisions about grouping persons residing in or being admitted to congregate settings, such as schools, dormitories, or correctional facilities
- Serologic test results should **not** be used to make decisions about returning persons to the workplace.
- Additional data are needed before modifying public health recommendations based on serologic test results, including decisions on discontinuing physical distancing and using personal protective equipment.

### Recommendations for Use of Serologic/Antibody Testing

- Serologic assays that have Emergency Use Authorization (EUA) are preferred for public health or clinical use since their test performance data have been reviewed by FDA.
- Serologic testing can be offered as a method to support diagnosis of acute COVID-19 illness for persons who present late. For persons who present 9-14 days after illness onset, serologic testing can be offered in addition to [recommended](#) direct detection methods such as polymerase chain reaction. This will maximize sensitivity as the sensitivity of nucleic acid detection is decreasing and serologic testing is increasing during this time period.
- Serologic testing should be offered as a method to help establish a diagnosis when patients present with late complications of COVID-19 illness, such as multisystem inflammatory syndrome in children.

### Limitations of Current Antibody Testing

- Some tests may exhibit cross-reactivity with other coronaviruses, such as those that cause the common cold. This could result in false-positive test results. Some persons may not develop detectable antibodies after coronavirus infection. In others, it is possible that antibody levels could wane over time to undetectable levels.
- Definitive data are lacking, and it remains uncertain whether individuals with antibodies (neutralizing or total) are protected against reinfection with SARS-CoV-2, and if so, what concentration of antibodies is needed to confer protection.

### Resources

#### **CDC Interim Guidelines for COVID-19 Antibody Testing:**

[https://www.cdc.gov/coronavirus/2019-ncov/lab/resources/antibody-tests-guidelines.html#anchor\\_1590264293982](https://www.cdc.gov/coronavirus/2019-ncov/lab/resources/antibody-tests-guidelines.html#anchor_1590264293982)

#### **American Medical Association's Serological Testing for SARS-CoV-2 Antibodies:**

<https://www.ama-assn.org/delivering-care/public-health/serological-testing-sars-cov-2-antibodies>

#### **Infectious Diseases Society of America's IDSA COVID19 Antibody Testing Primer:**

<https://www.idsociety.org/globalassets/idsa/public-health/covid-19/idsa-covid-19-antibody-testing-primer.pdf>

#### **Association of Public Health Laboratories and Council of State and Territorial Epidemiologists, Public Health Considerations: Serologic Testing for COVID-19, Version 1 – May 7, 2020:**

<https://www.aphl.org/programs/preparedness/Crisis-Management/Documents/Serologic-Testing-for-COVID-19.pdf>

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**PLEASE NOTE:** During the state of emergency, state and federal governments are issuing frequent COVID-19-related guidance. Our Health Plan's policies and communications are subject to change accordingly. For COVID-19 updates and information pertinent to our participating providers, please visit our website, **[Provider.ExcellusBCBS.com/coronavirus](https://Provider.ExcellusBCBS.com/coronavirus)**.