

COVID-19 TESTING, TREATMENT & VACCINE CODING

COVID-19 TESTING AND RELATED SERVICES

Harvard Pilgrim Health Care will continue waiving copayments, coinsurance, and deductible requirements for COVID-19 testing and treatment for members who are covered under fully-insured commercial plans through March 31, 2021. Cost-sharing waivers for testing and treatment may also apply to members enrolled in self-funded plans, if the plan sponsor has elected to participate in the waiver.

Services	CPT/ICD10 Coding	Comments
Services Related to COVID-19 Test	ICD10 Diagnosis Codes: Z03.818, Z11.52, Z11.59, Z20.822, Z20.828	To ensure that cost sharing is waived for testing-related services, it's important to bill these services with diagnosis codes Z03.818, Z20.822 or Z20.828.
	Place of Service: (including but not limited to) (11) Office (15) Mobile Unit (17) Walk-in Retail Health Clinic (19) Off Campus-Outpatient Hospital (20) Urgent care (21) Inpatient Hospital (22) On Campus-Outpatient Hospital (23) Emergency room (31) Skilled Nursing Facility (32) Nursing Facility	Bill with appropriate Testing-Related Service: <ul style="list-style-type: none"> • Use ICD-10 diagnosis code Z03.818 for suspected exposure to COVID-19 (when COVID-19 is ruled out) • Use ICD-10 diagnosis code Z11.52 — or Z11.59 prior to 1/1/21 — for COVID-19 testing for asymptomatic patients prior to inpatient admissions, planned outpatient procedures and immunosuppressant therapies (cost-share will not be waived) • Use ICD-10 code Z20.822 — or Z20.828 prior to 1/1/21 — for contact with and (suspected) exposure to COVID-19
Specimen Collection	Procedure Codes: G2023, G2024	Cost-share will be waived for COVID-19 specific specimen collection. <ul style="list-style-type: none"> • For collection performed at a drive through facility please use code G2023 • For collection performed at a SNF, please use code G2024
	C9803	<ul style="list-style-type: none"> • Used for specimen collection at outpatient hospital facilities only • For appropriate reimbursement, including waiver of cost-sharing, code C9803 must be billed with modifier CR or CS, or condition code DR

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	99211	<ul style="list-style-type: none"> Used for professional billing for specimen collection For appropriate reimbursement, including waiver of cost-sharing, code 99211 must be billed with modifier CR or CS.
Office Visit or Diagnostic Test related to a COVID19 Assessment	Procedure Codes: <ul style="list-style-type: none"> Standard E&M Codes Diagnostic tests e.g. Xray, CT, ECG, Spirometry 99072 is not separately reimbursed 	Office visits and diagnostic tests must be billed with one of the Molecular or Antigen tests listed below under COVID-19 Testing, as well as one of the following diagnosis codes: <ul style="list-style-type: none"> Z03.818 for suspected exposure to COVID-19 (When COVID-19 is ruled out) Z20.822 — or Z20.828 prior to 1/1/21 — for contact with and (suspected) exposure to COVID-19
COVID-19 Testing	MOLECULAR TESTS CPT/HCPCS Codes: U0001, U0002, U0003, U0004, U0005 (eff. as of 1.1.21), 0202U, 0223U, 0225U, 0240U, 0241U, 87635, 87636, 87637	In order to bill these codes, the laboratory must use a test that is developed and administered in accordance with the specifications outlined by the U.S. Food and Drug Administration (FDA) or through state regulatory approval. In addition: <ul style="list-style-type: none"> U0001, U0002 or 87635 must be billed with a valid CLIA ID U0003 and U0004 must be billed with a valid CLIA ID, as well as, CLIA Accreditation, Compliance or Registration certification level
	ANTIBODY TESTS CPT/HCPCS CODES: 86328, 86408, 86409, 86413, 86769, 0224U, 0226U	FDA-authorized antibody testing for COVID-19 is covered only when it has been determined medically necessary by a provider who has performed an individualized clinical assessment to make decisions about a member's care in accordance with current CDC and state public health department guidelines, which are being continuously updated. (Eff. for dates of service beginning 2/22/2021 for commercial members)
	ANTIGEN TESTS CPT/HCPCS Codes: 87426, 87428, 87811	Use code 87426, 87428 or 87811 for infectious agent antigen detection by immunoassay technique.

COVID-19 TREATMENT

- State and federal mandates, as well as self-insured customer benefit plan designs, may supersede the guidelines listed below.
- Harvard Pilgrim will cover COVID-19 treatment in full without member cost sharing (no copayments, deductibles, or coinsurance) for all our fully insured commercial, Medicare Advantage, Medicare Supplement, and Medicare Enhance plans through March 31, 2021.

Services	CPT/ICD10 Coding	Comments
COVID-19 Treatment	Inpatient Claims ICD-10 Code: U07.1 (COVID-19 diagnosis code)	<ul style="list-style-type: none"> • Member cost share waived ONLY if COVID-19 diagnosis code U07.1 is billed, in any position
	Outpatient Facility and Professional Claims ICD-10 codes: U07.1, Z03.818, Z20.822. Before 1/1/21: Z20.828 Revenue Codes: (including but not limited to) 042x 043x 045x 051x 0540 076x 0780	Member cost sharing may be waived if any of the following codes are used: <ul style="list-style-type: none"> • COVID-19 diagnosis code U07.1 billed in any position • ICD-10 code Z03.818 for suspected exposure to COVID-19 (When COVID-19 is ruled out) • ICD-10 code Z20.822 — or Z20.828 prior to 1/1/21 — contact with and (suspected) exposure to COVID-19 For professional claims, when one of the codes noted above is billed, member cost-sharing is waived for only the service lines related to the COVID-19 testing/treatment.
COVID-19 Antibody Treatment	HCPCS Codes: M0239 Q0239 M0243 Q0243 M0245 Q0245	<ul style="list-style-type: none"> • Includes Monoclonal Antibody Treatment. • As monoclonal antibody products are supplied by government entities for free, Harvard Pilgrim does not provide reimbursement for the following codes: Q0239, Q0243, Q0245 • Covered in outpatient settings when medically necessary and in accordance with the guidelines approved/outlined by the FDA

COVID-19 VACCINES

Services	CPT/ICD10 Coding	Comments
COVID-19 Vaccines	<p>Vaccine CPT Codes:</p> <p>91300 (SARSCOV2 Vaccine DIL RECON 30 MCG/0.3 ML IM USE - Pfizer)</p> <p>91301 (SARSCOV2 Vaccine 100 MCG/0.5 ML IM USE - Moderna)</p> <p>91302 (SARSCOV2 Vaccine 5x1010 viral particles/0.5mL dosage, IM USE - Oxford-AstraZeneca)*</p> <p>91303 (SARSCOV2 Vaccine 5x1010 viral particles/0.5mL dosage, IM USE – Johnson & Johnson)</p> <p>Vaccine Administration CPT Codes:</p> <p>0001A (IMM ADMN SARSCOV2 30MCG/0.3ML DIL RECON 1ST Dose - Pfizer)</p> <p>0002A (IMM ADMN SARSCOV2 30MCG/0.3ML DIL RECON 2ND Dose - Pfizer)</p> <p>0011A (IMM ADMN SARSCOV2 100 MCG/0.5 ML 1ST Dose - Moderna)</p> <p>0012A (IMM ADMN SARSCOV2 100 MCG/0.5 ML 2ND Dose - Moderna)</p> <p>0021A (IMM ADMN SARSCOV2 5x1010 viral particles/0.5ML 1ST Dose - Oxford-AstraZeneca)*</p> <p>0022A (IMM ADMN SARSCOV2 5x1010 viral particles/0.5ML 2ND Dose - Oxford-AstraZeneca)*</p> <p>0031A (IMM ADMN SARSCOV2 5x1010 viral particles/0.5ML 2ND Single Dose – Johnson & Johnson)</p>	<ul style="list-style-type: none"> Effective upon receiving Emergency Use Authorization or approval from the Food and Drug Administration Harvard Pilgrim does not provide reimbursement for the following codes, which should be billed with the SL modifier when the vaccine is supplied to the provider for free: 91300, 91301, 91302, 91303 <p>* These codes have been released in advance of the vaccine receiving approval or Emergency Use Authorization and are included for informational purposes; they will not become effective until the FDA issues the necessary approval/EUA.</p>