HUMAN SERVICES DEPARTMENT

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Special COVID-19 Letter of Direction #8

Date: **May 8, 2020**

To: **Centennial Care 2.0 Managed Care Organizations**

From: **Nicole Comeaux, Director, Medical Assistance Division**

Subject: **COVID-19 Testing and Treatment Services and Codes**

Title: **COVID-19 Testing and Treatment Services and Codes**

The purpose of this Letter of Direction (LOD) is to provide guidance and directives to the Centennial Care 2.0 Managed Care Organizations (MCOs) for modification of services and program standards related to the national public health emergency associated with the 2019 Novel Coronavirus (COVID-19) outbreak. The purpose of these changes is to assure the continuation of essential services to Medicaid patients without disruption or delay while following Centers for Disease Control and Prevention (CDC) direction to maximize social distancing for the duration of the public health emergency.

This Special COVID-19 LOD replaces LOD #31 sections:

1. 2(a) New Billing Codes for Testing;
2. 2(b) Drive-through Testing/Screening; and
3. Authorized Telehealth Codes section of LOD #31 Table 1.

This LOD also adds additional COVID-19 associated billing codes.

1. COVID-19 Testing and Treatment Services:

New Billing Codes for Testing – HSD has added new laboratory billing codes as directed by the Centers for Medicare and Medicaid Services (CMS) for COVID-19 lab testing. These codes are identified in Table 1 of this LOD.

MCOs should follow CMS guidelines and timeframes as it relates to diagnosis coding and code claims accordingly [https://www.cms.gov/files/document/covid-dear-clinician-letter.pdf].

a. Effective with services on and after April 1, 2020, a confirmed diagnosis of COVID-19 (2019 novel coronavirus disease) should be reported with a diagnosis code **U07.1, COVID-19.** Assignment of this code is applicable to positive COVID-19 test results and presumptive positive COVID-19 test results.

b. **Drive-through Testing/Screening** – HSD requests that the MCOs work with their contracted providers and in coordination with Department of Health (DOH) to develop "drive-up" or "drive-through" COVID-19 testing and screening services, including the use of this strategy in rural/frontier areas to the greatest possible extent. This strategy will help to alleviate the impact of crowding in medical clinics and facilities and mitigate the spread of COVID-19. Drive-through testing will be billed in accordance with current rules dependent on provider type and the associated facility where the testing is done.

   Please note that HSD is not covering lateral flow testing devices at this time, until further evidence is available regarding their effectiveness.

c. **Antibody Testing for COVID-19**
   HSD will only pay for FDA-approved serologic testing that has been shown to be reliable based on independent testing. The Department is awaiting a recommendation from the Medical Advisory Team regarding the coverage of serologic tests to detect COVID-19 antibodies. At this time, there are no HSD-approved antibody tests. Once such tests have been reviewed and approved by the Medical Advisory Team, providers will be notified. HSD will maintain a list of the approved serologic tests on its website.

   Please note that serological antibody tests should not be used as the sole basis for obtaining a COVID-19 diagnosis.

HSD values its continued collaboration and partnership with the MCOs to implement these directives as quickly as possible to help assure the health and safety of Medicaid members and our fellow New Mexicans. Further direction will be provided as guidance and authorities become available.

This COVID-19 Letter of Direction will sunset when the Human Services Department determines that the outbreak of the 2019 Novel Coronavirus (COVID-19) associated with the national public health emergency has been contained.

Table 1. Authorized COVID-19 Laboratory and Other Related Codes

Code	Description	Medicaid FFS Rate
Laboratory Codes		
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	$51.33
G2023	Specimen collection for severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), any specimen source	$25.46
G2024	Specimen collection for severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), from an individual in a skilled nursing facility or by a laboratory on behalf of a home health agency, any specimen source	$25.46
U0001	CDC 2019 novel coronavirus (2019-nCoV) real-time RT-PCR diagnostic panel	$35.92
U0002	2019-nCoV coronavirus, SARS-CoV-2/2019-nCoV (COVID-19), any technique, multiple types of subtypes (includes all targets), non-CDC	$51.33
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	$100.00
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	$100.00
86318 (Not specific to COVID-19)	Immunoassay for infectious agent antibody, qualitative or semiquantitative single step method (e.g., reagent strip)	$17.00
0099U (Not specific to COVID-19)	Respiratory pathogen, multiplex reverse transcription and multiplex amplified probe technique, multiple types or subtypes, 20 targets (adenovirus, coronavirus 229E, coronavirus HKU1, coronavirus, coronavirus OC43, human metapneumovirus, influenza A, influenza A subtype, influenza A subtype H3, influenza A subtype H1-2009	Manually priced