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 are some recommendations for testing patients for COVID-19.

**Codes for clinical diagnostic laboratory testing**

The Centers for Medicare & Medicaid Services has created two new HCPCS codes for use by providers who are testing patients for COVID-19. Providers can submit these codes to Medicare for dates of service on or after Feb. 4, 2020, and to Blue Cross and BCN for dates of service on or after Feb. 4, 2020. Also listed is a CPT* laboratory analysis code that can be submitted to Blue Cross and BCN for dates of service on or after Feb. 4, 2020.

- **U0001** – The CDC 2019 Novel Coronavirus Real Time RT-PCR Diagnostic Test Panel (for CDC labs)
- **U0002** – 2019-nCoV Coronavirus, SARS-CoV-2/2019-nCoV (COVID-19) using any technique, multiple types or subtypes (includes all targets) (for non-CDC labs)
- **0100U** – Respiratory pathogen, multiplex reverse transcription and multiplex amplified probe technique, multiple types or subtypes, 20 targets (adenovirus, coronavirus 229E, coronavirus HKU1, coronavirus NL63, coronavirus OC43, human metapneumovirus, human rhinovirus/enterovirus, influenza A, including subtypes H1, H1-2009, and H3, influenza B, parainfluenza virus 1, parainfluenza virus 2, parainfluenza virus 3, parainfluenza virus 4, respiratory syncytial virus, Bordetella parapertussis [IS1001], Bordetella pertussis [ptxP], Chlamydia pneumoniae, Mycoplasma pneumoniae)

The American Medical Association has developed a new CPT* code that providers can submit to Blue Cross and BCN for dates of service on or after March 13, 2020:

- **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

The Centers for Medicare & Medicaid Services has created two new HCPCS codes for lab tests that use high-throughput technologies to test for COVID-19. Providers can submit these codes to Medicare for dates of service on or after March 18, 2020, and to Blue Cross and BCN for dates of service on or after April 14, 2020.

- **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.
- **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.
The American Medical Association announced a proprietary laboratory analysis code that can be billed to Blue Cross and BCN for dates of service on or after May 20, 2020.

- *0202U – Infectious disease (bacterial or viral respiratory tract infection), pathogen-specific nucleic acid (DNA or RNA), 22 targets including severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), qualitative RT-PCR, nasopharyngeal swab, each pathogen reported as detected or not detected.

The American Medical Association announced a new CPT code for COVID-19 antigen tests and two new proprietary laboratory analysis codes that can be billed to Blue Cross and BCN for dates of service on or after June 24, 2020:

- *87426 – Infectious agent antigen detection by immunoassay technique, (e.g., enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], immunochemiluminometric assay [IMCA]) qualitative or semiquantitative, multiple-step method; severe acute respiratory syndrome coronavirus (e.g., SARS-CoV, SARS-CoV-2 [COVID-19])

- *0223U – Infectious disease (bacterial or viral respiratory tract infection), pathogen-specific nucleic acid (DNA or RNA), 22 targets including severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), qualitative RT-PCR, nasopharyngeal swab, each pathogen reported as detected or not detected

- *0224U – Antibody, severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), includes titer(s), when performed

Codes for antibody (serologic) testing
The American Medical Association announced one revised CPT code and two new CPT codes that providers can submit to Blue Cross and BCN for antibody testing for dates of service on or after April 10, 2020:

- *86318 – Immunoassay for infectious agent antibody(ies), qualitative or semiquantitative, single step method (eg, reagent strip)

- *86328 – Immunoassay for infectious agent antibody(ies), qualitative or semiquantitative, single step method (eg, reagent strip); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19])

- *86769 – Antibody; severe acute respiratory syndrome coronavirus 2 [SARS-CoV-2] (Coronavirus disease [COVID-19])

Other codes and billing resources
Here are some additional tips for billing for patient testing:

- Include the CS modifier – Include the CS modifier on all COVID-19 testing claim lines from March 1, 2020 until further notice. While use of this modifier is not required, it will help identify the testing service as being subject to the member cost-sharing waiver.
• Billing recommendations – Reference our document, *Billing recommendations for COVID-19 testing, including drive through* for specific codes based on the place of service.

**Priorities for testing**
The priorities for testing for COVID-19 continue to change. The latest published list of testing priorities is available from the Michigan Department of Health and Human Services within the [Michigan Interim COVID-19 Person Under Investigation (PUI) Case Report Form](https://www.michigan.gov/documents/Health/COVID-19-PUI-Case-Report-Form-1430088-7-1023178-0-0-0.pdf).**

Health care providers should use their best clinical judgement to determine if a patient meets the criteria for COVID-19 testing.

COVID-19 testing should be ordered by an attending health care provider in accordance with Blue Cross and BCN policies. The provider must document the medical necessity in the medical record.

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.

**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. If the result is positive, a person under investigation, or PUI, number is needed. (See the link in the *Priorities for testing* section of this document.)

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](https://www.michigan.gov/testfinder) website to help you find the closest testing location. Here’s some contact information:

<table>
<thead>
<tr>
<th>Lab Name and Phone Number</th>
<th>Testing Instructions</th>
<th>Additional COVID-19 information</th>
</tr>
</thead>
<tbody>
<tr>
<td>JVHL Network 1-800-445-4979</td>
<td>Contact individual network laboratories through <a href="https://www.jvhl.org">jvhl.org</a>**</td>
<td></td>
</tr>
</tbody>
</table>

*Note: The links provided are for informational purposes only and may change.*
## COVID-19 patient testing recommendations for physicians
Revised July 16, 2020

<table>
<thead>
<tr>
<th>Lab Name and Phone Number</th>
<th>Testing Instructions</th>
<th>Additional COVID-19 information</th>
</tr>
</thead>
<tbody>
<tr>
<td>LabCorp 1-888-522-2677</td>
<td>Specimen Collection Instructions**</td>
<td>Coronavirus Disease (COVID-19) Latest News and Guidance for Patients, Providers and Health Plans** Register for a LabCorp account**</td>
</tr>
<tr>
<td>Quest Diagnostics™ 1-866-697-8378</td>
<td>COVID-19 Information for Healthcare Professionals**</td>
<td>COVID-19: Doing our part** Quest order form** (for those without an online account)</td>
</tr>
</tbody>
</table>

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### 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 and BCN 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 medically necessary diagnostic tests consistent with CDC guidance related to COVID-19. This coverage is effective Feb. 4, 2020 until further notice and includes the member cost share of diagnostic testing not paid as part of a Public Health service response. Coverage for antibody (serological) testing is effective April 10, 2020 until further notice and also includes the member cost share when not paid as part of a Public Health service response.

**COVID-19 testing that is covered**
Blue Cross and BCN cover COVID-19 tests that are medically necessary. See the COVID-19 testing criteria below.

**COVID-19 testing that IS NOT covered**
Blue Cross and BCN’s standard policy does not cover the cost of workplace or occupational screening tests if not documented as medically necessary by the ordering provider. In keeping with the policy, below are some examples of noncovered COVID-19 testing:

- Testing that is required by an employer or school
- Testing requested by asymptomatic patients (unless the provider documents medical necessity because the patient has been exposed to a COVID-19-infected individual)
- Testing that occurs as part of a research study

Blue Cross and BCN may audit to ensure that only medically necessary testing claims are billed. Claims may be denied for testing that is not medically necessary beginning Aug. 1, 2020.
COVID-19 patient testing recommendations for physicians
Revised July 16, 2020

On April 1, 2020, we announced that services related to all testing and treatment consistent with CDC guidelines were included as part of our COVID-19 payment policies. Initially, the waiving of member cost share for COVID-19 treatment was effective March 18 through June 30, 2020. However, on June 9, 2020, we extended this coverage through Dec. 31, 2020.

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

- The test is ordered by an attending health care provider who determines testing is medically appropriate using judgment in accordance with accepted standards of medical practice. An attending health care provider includes a physician or attending clinician operating within the scope of their license, including a pharmacist. Consistent with policies issued through the governor’s office, we support the role of the attending health care provider’s clinical judgment regarding COVID-19 related procedures and testing.

- The test has received or is waiting to receive approval for use (including emergency use) by the Food and Drug Administration.

- The provider must also:
  - Document medical necessity 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

Pre-operative testing: As with other medical treatment, the use of pre-operative testing is a clinical decision that should be supported by documentation in the medical record, incorporating medical indications, the patient’s views, and coordinated through communication of results to other clinicians caring for the patient. Patients should be informed what the test results mean and any physician recommendations that follow. Blue Cross and BCN encourage all physicians to use clinical judgment to individualize care decisions.

A current list of tests approved by the Food and Drug Administration is available on the FDA’s Emergency Use Authorizations webpage.*

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 patient handout that explains COVID-19** 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

* [FDA’s Emergency Use Authorizations webpage](https://www.fda.gov/emergency-preparedness-response-epreed/medical-devices/emergency-use-authorizations-earma)

** [Patient handout that explains COVID-19](https://www.michigan.gov/documents/2016/10/04/MyRiskAndMeasures-598452.pdf)
COVID-19 patient testing recommendations for physicians
Revised July 16, 2020

More information is available:

- MDHHS: [Michigan Interim COVID-19 Person Under Investigation (PUI) Case Report Form](#)
  - [COVID-19 Test Finder](#)
  - [Michigan Coronavirus Resources for Health Professionals](#)
  - [Michigan.gov/coronavirus](#)
  - [COVID-19 Information for Medical Professional & Staff presentation from March 5, 2020](#)

- Health departments: [Directory of Local Health Departments](#)

- Michigan State Medical Society: [COVID-19 Resource Center for Physicians and Patients](#)
  - [2019 Novel Coronavirus and Patient Safety in the Medical Office](#)

- Michigan Osteopathic Association: [COVID-19 Resources](#)

- The latest CDC recommendations: [Interim Guidelines for Collecting, Handling, and Testing Clinical Specimens from Persons for Coronavirus Disease 2019 (COVID-19)](#)

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