

## Billing for COVID-19 Evaluation and Testing

***This document applies to Medicaid Fee For Service only***

Provider One will be updated to accept the new code developed by CMS for testing of the novel coronavirus, COVID-19

### Billing for COVID-19 Testing

The following codes have been created to bill for testing for COVID-19. The codes will take effect by April 1, however retroactive claims will be accepted from dated from February 4<sup>th</sup> forward.

- U0001- for CDC testing laboratories to test patients for SARS-CoV-2
- U0002 non-CDC laboratory tests for SARS-CoV-2/2019-nCoV (COVID-19)

### Billing for COVID-19 Related Services

Currently, there are no specific ICD-10 codes to use when billing for services related to COVID-19. The CDC has provided the following coding guidelines for COVID-19.

Condition Related to COVID-19	Associated ICD-10 code	Condition Related to COVID-19	Associated ICD-10 code
Pneumonia confirmed as due to COVID-19	J12.89 Other viral pneumonia  <b>AND</b>  B97.29 Other coronavirus as the cause of diseases classified elsewhere.	Acute bronchitis confirmed as due to COVID-19	J20.8 Acute bronchitis due to other specified organisms  <b>AND</b>  B97.29, Other coronavirus as the cause of diseases classified elsewhere
Lower respiratory infection, not otherwise specified (NOS), or an acute respiratory infection	This should be assigned with code J22, Unspecified acute lower respiratory infection  <b>AND</b>  B97.29 Other coronavirus as the cause of diseases classified elsewhere	Bronchitis not otherwise specified (NOS) confirmed as due to COVID-19	J40 Bronchitis, not specified as acute or chronic  <b>AND</b>  B97.29, Other coronavirus as the cause of diseases classified elsewhere.
If the COVID-19 is documented as being associated with a respiratory infection, NOS	J98.8, Other specified respiratory disorders,  <b>AND</b>  B97.29, Other coronavirus as the cause of diseases classified elsewhere.	Cases with ARDS due to COVID-19	J80, Acute respiratory distress syndrome  <b>AND</b>  B97.29, Other coronavirus as the cause of diseases classified elsewhere
Possible exposure to COVID-19, but this is ruled out after evaluation	Z03.818, Encounter for observation for suspected exposure to other biological agents ruled out.	Actual exposure to someone who is confirmed to have COVID-19	Z20.828, Contact with and (suspected) exposure to other viral communicable diseases.

signs/symptoms (such as fever, etc.) and where a definitive diagnosis has not been established	R05 Cough • R06.02 Shortness of breath • R50.9 Fever, unspecified		
<p>Diagnosis code B34.2, Coronavirus infection, unspecified, would in general not be appropriate for the COVID-19, because the cases have universally been respiratory in nature, so the site would not be “unspecified”</p> <p>If the provider documents “suspected”, “possible” or “probable” COVID-19, do not assign code B97.29. Assign a code(s) explaining the reason for encounter (such as fever, or Z20.828)</p>			
<p>This coding guidance has been developed by CDC and approved by the four organizations that make up the Cooperating Parties: the National Center for Health Statistics, the American Health Information Management Association, the American Hospital Association, and the Centers for Medicare &amp; Medicaid Services.</p>			

<https://www.cdc.gov/nchs/data/icd/ICD-10-CM-Official-Coding-Guidance-Interim-Advice-coronavirus-feb-20-2020.pdf>