BlueCross BlueShield of Illinois

If a conflict arises between a Clinical Payment and Coding Policy ("CPCP") and any plan document under which a member is entitled to Covered Services, the plan document will govern. If a conflict arises between a CPCP and any provider contract pursuant to which a provider participates in and/or provides Covered Services to eligible member(s) and/or plans, the provider contract will govern. "Plan documents" include, but are not limited to, Certificates of Health Care Benefits, benefit booklets, Summary Plan Descriptions, and other coverage documents. BCBSIL may use reasonable discretion interpreting and applying this policy to services being delivered in a particular case. BCBSIL has full and final discretionary authority for their interpretation and application to the extent provided under any applicable plan documents.

Providers are responsible for submission of accurate documentation of services performed. Providers are expected to submit claims for services rendered using valid code combinations from Health Insurance Portability and Accountability Act ("HIPAA") approved code sets. Claims should be coded appropriately according to industry standard coding guidelines including, but not limited to: Uniform Billing ("UB") Editor, American Medical Association ("AMA"), Current Procedural Terminology ("CPT®"), CPT® Assistant, Healthcare Common Procedure Coding System ("HCPCS"), ICD-10 CM and PCS, National Drug Codes ("NDC"), Diagnosis Related Group ("DRG") guidelines, Centers for Medicare and Medicaid Services ("CMS") National Correct Coding Initiative ("NCCI") Policy Manual, CCI table edits and other CMS guidelines.

Claims are subject to the code edit protocols for services/procedures billed. Claim submissions are subject to claim review including but not limited to, any terms of benefit coverage, provider contract language, medical policies, clinical payment and coding policies as well as coding software logic. Upon request, the provider is urged to submit any additional documentation.

Coronavirus Testing in the Outpatient Setting

Policy Number: CPCPLAB057

Version 1.0

Enterprise Medical Policy Committee Approval Date: January 25, 2022

Plan Effective Date: May 1, 2022

Description

BCBSIL has implemented certain lab management reimbursement criteria. Not all requirements apply to each product. Providers are urged to review Plan documents for eligible coverage for services rendered.

Reimbursement Information:

NOTE 1: Antibody testing for the SARS-CoV-2 (COVID-19) virus provided under an Emergency Use Authorization (EUA) from the U.S. Food and Drug Administration (FDA) during a public health emergency is **NOT** addressed by this policy.

1. Targeted nucleic acid testing, such as RT-PCR, for COVID-19 (SARS-CoV-2) including rapid molecular tests **may be reimbursable** in the following situations:
    a. Individuals displaying signs and symptoms of possible COVID-19 infection (See **NOTE 2**).

b. Asymptomatic individuals with known exposure to COVID-19.
c. Asymptomatic individuals prior to undergoing immunosuppressive or aerosol-producing procedures.

2. Targeted nucleic acid testing, such as RT-PCR, **may be reimbursable** for detection of severe acute respiratory syndrome (SARS) coronavirus RNA in persons with signs or symptoms of SARS who have traveled to endemic areas or have been exposed to persons with SARS.

3. Targeted nucleic acid testing, such as RT-PCR, **may be reimbursable** for detection of Middle East respiratory syndrome (MERS) coronavirus RNA in persons with signs or symptoms of MERS who have traveled to endemic areas or have been exposed to persons with MERS.

4. Host antibody serology testing to support a diagnosis of Multisystem Inflammatory Syndrome in Children (MIS-C) or Multisystem Inflammatory Syndrome in Adults (MIS-A) or Post-Acute Sequelae of SARS-CoV-2 infection (PASC) **may be reimbursable**. (See **NOTES 3 & 4)**

5. The use of an antigen-detecting diagnostic test in symptomatic individuals, including antigen rapid tests, for SARS-CoV-2, **may be reimbursable**.

6. Multiplex PCR-based panel testing of up to **5** respiratory pathogens **may be reimbursable** for patients with signs and symptoms of a respiratory tract infection, as evidenced by a compatible clinical syndrome including at least one of the following: temperature of 102 or greater, pronounced dyspnea, tachypnea, or tachycardia.

7. Antigen panel testing of up to **5** antigens **may be reimbursable** for patients with signs and symptoms of a respiratory tract infection, as evidenced by a compatible clinical syndrome including at least one of the following: temperature of 102 or greater, pronounced dyspnea, tachypnea, or tachycardia.

8. Whole genome sequencing of paired specimens from distinct lineages (as defined in Nextstrain or GISAID) **is not reimbursable** to diagnose SARS-CoV-2 reinfection.

9. Antigen panel testing of **6** or more antigens **is not reimbursable.**

10. Multiplex PCR-based panel testing of **6 or more** respiratory pathogens **is not reimbursable**.

11. Host antibody serology testing to diagnose an acute suspected COVID-19 (SARS-CoV-2) infection or any other human coronavirus infection **is not reimbursable** (except for MIS-C testing in children or MIS-A testing in adults).

12. Host antibody serology testing to determine immunity status for any human coronavirus **is not reimbursable**.

13. Neutralization antibody testing for SARS-CoV-2 **is not reimbursable** for any indications**.**

14. Testing for other endemic coronaviruses, such as 229E, NL63, OC43, and HKU1, **is not reimbursable**.

NOTE 2 Signs and symptoms associated with a possible COVID-19 infection can include a fever, cough, shortness of breath or difficulty breathing, fever, chills, muscle pain, sore throat, new loss of taste or smell, nausea, vomiting, diarrhea, conjunctivitis, rash on skin or discoloration of fingers or toes (CDC, 2020k; WHO, 2020g).

Note 3: According to the CDC, evidence of possible MIS-C includes (CDC, 2020g):

- Fever of at least 38.0˚C for at least 24 hours
- Multisystem (2 or more) organ involvement
- Laboratory evidence of inflammation, "including, but not limited to, one or more of the following: an elevated C-reactive protein (CRP), erythrocyte sedimentation rate (ESR), fibrinogen, procalcitonin, d-dimer, ferritin, lactic acid dehydrogenase (LDH), d-dimer, ferritin, lactic acid dehydrogenase (LDH), or interleukin 6 (IL-6), elevated neutrophils, reduced lymphocytes and low albumin (CDC, 2020h)"
- Some children may fulfill full or partial criteria for Kawasaki disease

Note 4: According to the CDC, evidence of possible MIS-A includes (Morris et al., 2020):

- A severe illness requiring hospitalization in a person aged ≥21 years;
- A positive test result for current or previous SARS-CoV-2 infection (nucleic acid, antigen, or antibody) during admission or in the previous 12 weeks;
- Severe dysfunction of one or more extrapulmonary organ systems (e.g., hypotension or shock, cardiac dysfunction, arterial or venous thrombosis or thromboembolism, or acute liver injury);
- Laboratory evidence of severe inflammation (e.g., elevated CRP, ferritin, D-dimer, or interleukin-6);
- Absence of severe respiratory illness (to exclude patients in which inflammation and organ dysfunction might be attributable simply to tissue hypoxia).

Reimbursement

1. AMA standard practice for COVID-19 testing states not to include both the HCPCS and AMA code for same procedure on same DOS and that only one code should be used, therefore only one code per date of service will be reimbursed.
2. Specimen collection codes for coronavirus testing are considered incidental and will not be reimbursed.

Procedure Codes

Codes
86318, 86328, 86408, 86409, 86413, 86769, 86790, 87426, 87428, 87631, 87632, 87633, 87635, 87797, 87798, 87799, 87811, 0115U, 0202U, 0223U, 0224U, 0225U, 0226U, C9803, G2023, G2024, U0001, U0002, U0003, U0004, U0005

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