PRESBYTERIAN

PRESBYTERIAN CODING GUIDANCE FOR SUBMITTING CLAIMS FOR TREATMENT OF COVID-19

In order to ensure timely and affordable care for our Members, Presbyterian Health Plan is waiving all cost-sharing for screening, testing and treatment of COVID-19. It is important for Presbyterian network providers to understand Presbyterian's billing requirements for submitting COVID-19 related claims.

By following the guidelines in this document, you will enable Presbyterian to both adjudicate claims with no member cost-share*, and to track and report COVID-19 cases.

SCREENING

Screening for COVID-19 involves either an in-person or telephonic evaluation of a patient to determine if they are displaying symptoms consistent with the need to order laboratory testing for COVID-19.

- Providers should refer to NMDOH guidance for screening and reporting here: https://cv.nmhealth.org/wp-content/uploads/2020/03/HAN_nCoV_Mar13_2020_clean.pdf
- Presbyterian will waive cost-sharing for evaluation services performed in order to determine whether patients require COVID-19 testing
- Claims should be submitted with either 'Z20.828' or 'Z03.818' in the primary diagnosis position along with any other applicable ICD-10 codes for signs and symptoms
- Effective March 18, 2020 providers may also submit claims for screening visits that are related to furnishing or administering COVID testing or to the evaluation of an individual for purposes of determining the need for such tests; and are in any of the following categories of HCPCS evaluation and management services:
    - Office and other outpatient services
    - Hospital observation services
    - Emergency department services
    - Nursing facility services
    - Domiciliary, rest home, or custodial care services
    - Home care services
    - Online digital evaluation and management services
- Providers who submitted screening claims without the CS modifier may re-submit corrected claims after April 28, 2020 to have claims processed for no member cost-share
- Providers offering screening services should submit the appropriate level of in-person/telephonic evaluation

*Please note that self-funded (ASO) groups have the option to continue assessing cost-sharing for any of the services. Most ASO groups are following Presbyterian's lead, but some may not.

TESTING

Information on testing for COVID-19 may be found through the NM DOH website here: https://cv.nmhealth.org/laboratories/

- Providers who perform laboratory testing for COVID-19 should report the applicable HCPCS code (U0001, U0002, 87635)
- In addition, Presbyterian Health Plan is considering additional 'rule-out' laboratory tests for influenza, pneumonia and RSV to be related to COVID testing (87631, 87633, 87804, 87807)
- Presbyterian will not assess member cost-sharing for these laboratory testing codes

TREATMENT

Presbyterian is waiving member cost-sharing for all treatment related to confirmed COVID-19 cases.

- Providers should submit either ICD-10 U07.1 or B97.29 in the second position along with a primary diagnosis for the condition being treated
- Additional guidance for coding COVID-19 related treatment may be found here: https://www.cdc.gov/nchs/data/icd/ICD-10-CM-Official-Coding-Gudance-Interim-Advice-coronavirus-feb-20-2020.pdf

ADDITIONAL REPORTING UNRELATED TO MEMBER COST-SHARING

Providers are encouraged to submit claims using the 'DR' condition code or 'CR' modifier for professional claims when services were provided in accordance with CMS waivers. A full listing of CMS 1135 waivers may be found here: https://www.cms.gov/files/document/summary-covid-19-emergency-declaration-waivers.pdf including, but not limited to:

- Alternative hospital sites, including temporary locations
- Various waivers relating to normal supervision requirements
- Monitoring and oversight
- Reporting requirements

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