

Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Robert R. Neall, Secretary

MARYLAND MEDICAL ASSISTANCE PROGRAM Laboratory Transmittal No. 74 August 21, 2020

To: Laboratories

From:

Jill Spector, Director
Medical Benefits Management

Medical Spector, Director

Medical Benefits Management

Re: UPDATE - COVID-19 Reimbursable Laboratory Codes

Note: Please ensure that appropriate staff members in your organization are informed of the contents of this memorandum.

Note: This is an update to Laboratory Transmittal No. 72, which was issued on May 22, 2020. This transmittal adds three new reimbursable laboratory codes for COVID-19 testing with an effective date of June 25, 2020.

The Centers for Medicare and Medicaid Services (CMS) have announced new Healthcare Common Procedure Coding System (HCPCS) codes for healthcare providers and laboratories to use when testing patients for the novel coronavirus (COVID-19). Additionally, the American Medical Association (AMA) Current Procedural Terminology (CPT) Editorial Panel has also created codes for COVID-19 laboratory tests. In response, the Medicaid fee-for-service (FFS) program is reimbursing for these codes at 100% of the Medicare rate. Below is a summary of the codes, their descriptions, their effective dates, and the FFS reimbursement rate.

Code	Effective	CPT or	Description	FFS
	Date	HCPCS		Rate
U0001	2/4/20	HCPCS	CDC 2019 Novel Coronavirus (2019-nCoV) Real-	\$35.92
			Time RT-PCR Diagnostic Panel	
U0002	2/4/20	HCPCS	2019-nCoV Coronavirus, SARS-CoV-2/2019-	\$51.33
			nCoV (COVID-19), any technique, multiple types	
			or subtypes (includes all targets), non-CDC	
87635	3/16/20	CPT	Infectious agent detection by nucleic acid (DNA	\$51.33
			or RNA); severe acute respiratory syndrome	
			coronavirus 2 (SARS-CoV-2) (Coronavirus	
			disease [COVID-19]), amplified probe technique	

86328	4/10/20	CPT	Immunoassay for infectious agent antibody(ies),	\$45.23
00020	1,10,20		qualitative or semiquantitative, single step method	Ψ.ε.2ε
			(e.g., reagent strip); severe acute respiratory	
			syndrome coronavirus 2 (SARS-CoV-2)	
			(Coronavirus disease [COVID-19])	
86769	4/10/20	CPT	Antibody; severe acute respiratory syndrome	\$42.13
00707	4/10/20		coronavirus 2 (SARS-CoV-2) (Coronavirus	Ψ-2.13
			disease [COVID-19])	
U0003	4/14/20	HCPCS	Infectious agent detection by nucleic acid (DNA	\$100.00
00003	4/14/20	ner es	or RNA); severe acute respiratory syndrome	Ψ100.00
			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	4/14/20	HCPCS	2019-nCoV Coronavirus, SARS-CoV-2/2019-	\$100.00
00004	4/14/20	iici cs	nCoV (COVID-19), any technique, multiple types	ψ100.00
			or subtypes (includes all targets), non-CDC,	
			making use of high throughput technologies as	
			described by CMS-2020-01-R	
87426	6/25/20	CPT	Infectious agent antigen detection by	\$45.23
07420	0/23/20		immunoassay technique, (e.g., enzyme	ψ43.23
			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, SARSCoV-2	
0223U	6/25/20	HCPCS	[COVID-19]) Infactious disease (begtariel or viral respiratory)	\$416.78
02230	0/23/20	ncres	Infectious disease (bacterial or viral respiratory	φ410./δ
			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,	
022411	6/25/20	HCPCS	each pathogen reported as detected or not detected	\$42.12
0224U	0/23/20	TUPUS	Antibody, severe acute respiratory syndrome	\$42.13
			coronavirus 2 (SARS-CoV-2) (Coronavirus	
			disease [COVID-19]), includes titer(s), when	
			performed (Do not pagent 0224H in conjugation with 96760)	
]	(Do not report 0224U in conjunction with 86769)	

When billing for HCPCS codes U0003 and U0004, please note the following:

- 1) U0003 should identify tests performed with high throughput technologies that would otherwise be billed using CPT code 87635.
- 2) U0004 should identify tests performed with high throughput technologies that would otherwise be billed using U0002.
- 3) Neither U0003 nor U0004 should be billed for tests that detect COVID-19 antibodies.

Payment for Specimen Collection for Purposes of COVID-19 Testing

In addition to the codes above, CMS has created two HCPCS codes for COVID-19 specimen collection to provide reimbursement to independent laboratories for specimen collection from beneficiaries who are homebound or inpatient, but not in a hospital setting, under certain circumstances.

Independent laboratories can bill FFS for the specimen collection fee. The specimen collection fee applies if the specimen is collected by trained laboratory personnel from a homebound individual or non-hospital inpatient. Excluded are specimens that only require the services of a messenger to pick up the specimen or when a patient collects his or her own specimen.

Effective	HCPCS	Description	FFS
Date	Code		Rate
3/1/20	G2023	Specimen collection for severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), any specimen source	\$23.46
3/1/20	G2024	Specimen collection for severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), from an individual in a SNF or by a laboratory on behalf of a HHA, any specimen source	\$25.46

If you have any questions, please contact Tenesha Lynch at (410)767-3074 or tenesha.lynch@maryland.gov.