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Quarterly Update for Clinical Laboratory Fee Schedule and Laboratory Services Subject to Reasonable Charge Payment

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Note: We revised this article to reflect a revision to CR 11815. The CR revision added information on COVID-19 codes 87426, 0223U and 0224U and we added the same information to this article. We also revised the CR release date, transmittal number and the web address of the CR. All other information remains the same.

PROVIDER TYPES AFFECTED

This MLN Matters Article is for clinical diagnostic laboratories that submit claims to Medicare Administrative Contractors (MACs) for laboratory services provided to Medicare beneficiaries.

PROVIDER ACTION NEEDED

This article informs laboratories of changes in the quarterly update to the clinical laboratory fee schedule. Please be sure your billing staff is aware of these updates.

BACKGROUND

The quarterly updates are as follows:

Advanced Diagnostic Laboratory Tests (ADLTs)

Information about these tests are on the Centers for Medicare and Medicaid Services (CMS) website at https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/ClinicalLabFeeSched/PAMA-Regulations.html#ADLT_tests.

Next Clinical Laboratory Fee Schedule (CLFS) Data Reporting Period for Clinical Diagnostic Laboratory Tests — DELAYED

Section 105(a) of the Further Consolidated Appropriations Act, 2020 (FCAA) (Pub. L. 116-94, enacted December 19, 2019) and section 3718 of the Coronavirus Aid, Relief, and Economic Security (CARES) Act (Pub. L. 116-136, enacted March 27, 2020) made several revisions to the

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next data reporting period for Clinical Diagnostic Laboratory Tests (CDLTs) that are not ADLTs and the phase-in of payment reductions under the Medicare private payor rate-based CLFS. In summary, revisions are:

- The next data reporting period of January 1, 2022, through March 31, 2022, will be based on the original data collection period of January 1, 2019, through June 30, 2019.
- After the next data reporting period, there is a 3-year data reporting cycle for CDLTs that are not ADLTs (that is, 2025, 2028, etc.).
- The statutory phase-in of payment reductions resulting from private payor rate implementation is extended, that is, through Calendar Year (CY) 2024. There is a 0.0 percent reduction for CY 2021, and payment may not be reduced by more than 15 percent for CYs 2022 through 2024.

Coronavirus-19 (COVID-19) Policy Updates

- **Payment for Specimen Collection for Purposes of COVID-19 Testing**

For the duration of the Public Health Emergency (PHE) for the COVID-19 pandemic and in an effort to be as expansive as possible within the current authorities to have diagnostic testing available to Medicare beneficiaries who need it, in the interim final rule with comment period (IFC), CMS-1744-IFC, "Medicare and Medicaid Programs; Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency," CMS changed the Medicare payment rules to provide payment to independent laboratories for specimen collection from beneficiaries who are homebound or inpatients not in a hospital for COVID-19 testing under certain circumstances. For more information on this policy update, please refer to https://www.cms.gov/files/document/covid-final-ifc.pdf.

- **Revisions to Ordering Requirements for Clinical Laboratory Diagnostic Testing**

In the interim final rule with comment period, CMS-5531-IFC, Medicare and Medicaid Programs, Basic Health Program, and Exchanges; Additional Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency and Delay of Certain Reporting Requirements for the Skilled Nursing Facility Quality Reporting Program, on an interim basis for the duration of the PHE for the COVID-19 pandemic, CMS removed the requirement that certain clinical diagnostic laboratory tests must be ordered by a treating physician or non-physician practitioner (NPP). This will allow any healthcare professional authorized to do so under State law to order COVID-19 diagnostic laboratory tests (including serological and antibody tests). Because the symptoms for coronavirus, influenza and respiratory syncytial virus (RSV) are often the same, such that concurrent testing for all three viruses is warranted, this interim policy also applies to influenza and RSV tests, but only when they are given in conjunction with a medically necessary COVID-19 diagnostic laboratory test to establish or rule out a COVID-19 diagnosis or identify an adaptive immune response to SARS-COV-2. For more information on this policy update, please refer to https://www.cms.gov/files/document/covid-medicare-and-medicaid-ifc2.pdf.

- **Coverage of COVID-19 Serology Testing**

In the interim final rule with comment period CMS-5531-IFC, "Medicare and Medicaid Programs, Basic Health Program, and Exchanges; Additional Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency and Delay of Certain Reporting Requirements for the Skilled Nursing Facility Quality Reporting Program," CMS finalized on an interim basis that during the PHE for the COVID-19 pandemic, Medicare will cover FDA-authorized COVID-19 serology tests, as they are reasonably necessary under section 1862(a)(1)(A) of the Social Security Act (the Act) for beneficiaries with known current or known prior COVID-19 infection or suspected current or suspected past COVID-19 infection. CMS amended CFR Section 410.32(a)(3) to reflect this determination of coverage. For more information on this policy update, please refer to https://www.cms.gov/files/document/covid-medicare-and-medicaid-ifc2.pdf.

- **High Throughput Technologies**

CMS issued CMS Ruling CMS-2020-01-R concerning payment under Medicare Supplementary Medical Insurance (Part B) of certain CDLTs for the detection of SARS-CoV-2 or the diagnosis of the virus that causes COVID-19 making use of high throughput technologies. As described in CMS Ruling CMS-2020-01-R, a high throughput technology uses a platform that uses automated processing of more than 200 specimens a day. For more information on this policy update, please refer to https://www.cms.gov/files/document/cms-2020-01-r.pdf.

Clinical Laboratory Fee Schedule Beginning January 1, 2018

- Effective January 1, 2018, CLFS rates are based on weighted median private payor rates as required by the Protecting Access to Medicare Act (PAMA) of 2014.
- The Part B deductible and coinsurance do not apply for services paid under the CLFS.

- For more details, visit PAMA Regulations at https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/ClinicalLabFeeSched/PAMA-Regulations.html.

- **Access to Data File:** Internet access to the quarterly CLFS data file will be available at https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/ClinicalLabFeeSched/index.html. Interested parties, such as the Medicaid State agencies, the Indian Health Service, the United Mine Workers, and the Railroad Retirement Board, must use the Internet to retrieve the quarterly CLFS. It will be available in multiple formats: Excel, text, and comma delimited.

- **Pricing Information:** The CLFS includes separately payable fees for certain specimen collection methods (codes 36415, P9612, and P9615). The fees are established per Section 1833(h)(4)(B) of the Act. Also, note additional specimen collection codes below during the PHE.

New Codes Effective April 1, 2020

Note: MACs will establish payment for Current Procedural Terminology (CPT) code 0014M, effective April 1, 2020. This code was inadvertently left off the April 2020 CLFS CR. This code was added to the national HCPCS file with an effective date of April 1, 2020, and therefore does not need to be manually added to the HCPCS files by the MACs. This code will be included on the CLFS for the July 2020 release. This new code is contractor-priced (where applicable) until it is addressed at the annual Clinical Laboratory Fee Schedule Public Meeting, which will take place in June or July 2020, as it was received after the 2019 public meeting.

- CPT Code: 0014M
  - Long Descriptor: Liver disease, analysis of 3 biomarkers (hyaluronic acid [HA], procollagen III amino terminal peptide [PIIINP], tissue inhibitor of metalloproteinase 1 [TIMP-1]), using immunoassays, utilizing serum, prognostic algorithm reported as a risk score and risk of liver fibrosis and liver-related clinical events within 5 years
  - Short Descriptor: LIVER DS ALYS 3 BMRK SRM ALG
  - Laboratory: Enhanced Liver Fibrosis™ (ELF™) Test, Siemens Healthcare Diagnostics Inc/Siemens Healthcare Laboratory LLC
  - Type of Service (TOS): 5

New Codes Effective April 10, 2020

As described above in the COVID-19 Policy Updates Section, Coverage of COVID-19 Serology Testing, the below listed new codes have been added to the national HCPCS file with an effective date of April 10, 2020. However, these new codes are contractor-priced (where applicable) until they are addressed at the annual Clinical Laboratory Fee Schedule Public Meeting, which will take place in June or July 2020, as they were received after the 2019 public meeting.

- CPT Code: 86328
  - Long Descriptor: Immunoassay for infectious agent antibody, qualitative or semiquantitative, single step method (e.g., reagent strip); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19])
  - Short Descriptor: Ia nfct ab sarscov2 covid19
  - TOS: 5
- CPT Code: 86769
  - Long Descriptor: Antibody; severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19])
  - Short Descriptor: Sars-cov-2 covid-19 antibody
  - TOS: 5

New Codes Effective April 14, 2020

Per the above discussion in the COVID-19 Policy Updates section, High Throughput Technologies, two new HCPCS codes have been created for laboratories to bill under the

Medicare CLFS for the detection of SARS-CoV-2 or the diagnosis of the virus that causes COVID-19 making use of these high throughput technologies. The listed new codes have been added to the national HCPCS file with an effective date of April 14, 2020. Such tests, as identified by U0003 and U0004, in accordance with CMS Ruling CMS-2020-01-R, will be paid at the rate of $100. These new codes are:

- Code: U0003
  - Long Descriptor: 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
  - Short Descriptor: Cov-19 amp prb hgh thruput
  - TOS: 5
- Code: U0004
  - Long Descriptor: 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
  - Short Descriptor: Cov-19 test non-cdc hgh thru
  - TOS: 5

New Codes Effective May 20, 2020

The listed new code will be added to the national HCPCS file with an effective date of May 20, 2020; however, until such time MAC's may need to manually add it to the HCPCS files. Additionally, this new code is contractor-priced (where applicable) until it is addressed at the annual Clinical Laboratory Fee Schedule Public Meeting, which will take place in June or July 2020, as it was received after the 2019 public meeting. MACs shall only price PLA codes for laboratories within their jurisdiction.

- Code: 0202U
  - Long Descriptor: 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
  - Short Descriptor: Nfct ds 22 trgt sars-cov-2
  - TOS: 5

New Codes Effective June 25, 2020

The listed new code will be added manually to the national HCPCS file by the MACs with an effective date of June 25, 2020. Also, this new code is contractor-priced (where applicable) until it is nationally priced and undergoes the CLFS annual payment determination process in accordance with the Social Security Act § 1833(h)(8), § 1834A(c) and § 1834(A)(f).

- Code: 87426

- Long Descriptor: Infectious agent antigen detection by immunoassay technique, (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], immunochemiluminometric assay [IMCA]) qualitative or semiquantitative, multiple-step method; severe acute respiratory syndrome coronavirus (eg, SARS-CoV, SARSCoV-2 [COVID-19])
- Short Descriptor: CORONAVIRUS AG IA
- TOS: 5

Proprietary Laboratory Analysis (PLAs)

The listed new codes will be manually added to the national HCPCS files by the MACs with an effective date of June 25, 2020. Also, these new codes are contractor-priced (where applicable) until they are nationally priced and undergo the CLFS annual payment determination process in accordance with the Social Security Act § 1833(h)(8), § 1834A(c) and § 1834(A)(f). MACs shall only price PLA codes for laboratories within their jurisdiction.

- Code: 0223U
  - Laboratory Name: QIAstat-Dx Respiratory SARS CoV-2 Panel, QIAGEN Sciences, QIAGEN GmbH
  - Long Descriptor: 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
  - Short Descriptor: NFCT DS 22 TRGT SARS-COV-2
  - TOS: 5
- Code: 0224 U
  - Laboratory Name: COVID-19 Antibody Test, Mt Sinai, Mount Sinai Laboratory
  - Long Descriptor: Antibody, severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), includes titer(s), when performed
  - Short Descriptor: ANTIBODY SARS-COV-2 TITER(S
  - TOS: 5

New Codes Effective July 1, 2020

Proprietary Laboratory Analysis (PLA)

The new codes in Table 1 below have been added to the national HCPCS file with an effective date of July 1, 2020. These new codes are contractor-priced (where applicable) until they are addressed at the annual Clinical Laboratory Public Meeting, which will take place in June or July 2020, as they were received after the 2019 public meeting. MACs will only price PLA codes for laboratories within their jurisdiction. The table includes the laboratory, long descriptor, and short descriptor of each new code. The TOS for all codes in Table 1 is 5.

Table 1 – Codes Effective July 1, 2020

Laboratory	CPT Code	Long Descriptor	Short Descriptor
myChoice® CDx, Myriad Genetics Laboratories, Inc, Myriad Genetics Laboratories, Inc	0172U	Oncology (solid tumor as indicated by the label), somatic mutation analysis of *BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated)* and analysis of homologous recombination deficiency pathways, DNA, formalin-fixed paraffin-embedded tissue, algorithm quantifying tumor genomic instability score	ONC SLD TUM ALYS BRCA1 BRCA2
Psych HealthPGx Panel, RPRD Diagnostics, RPRD Diagnostics	0173U	Psychiatry (ie, depression, anxiety), genomic analysis panel, includes variant analysis of 14 genes	PSYC GEN ALYS PANEL 14 GENES
LC-MS/MS Targeted Proteomic Assay, OncoOmicDx Laboratory, LDT	0174U	Oncology (solid tumor), mass spectrometric 30 protein targets, formalin-fixed paraffin-embedded tissue, prognostic and predictive algorithm reported as likely, unlikely, or uncertain benefit of 39 chemotherapy and targeted therapeutic oncology agents	ONC SOLID TUMOR 30 PRTN TRGT
Genomind® Professional PGx Express™ CORE, Genomind, Inc, Genomind, Inc	0175U	Psychiatry (eg, depression, anxiety), genomic analysis panel, variant analysis of 15 genes	PSYC GEN ALYS PANEL 15 GENES
IBS*chek*®, Commonwealth Diagnostics International, Inc, Commonwealth Diagnostics International, Inc	0176U	Cytolethal distending toxin B (CdtB) and vinculin IgG antibodies by immunoassay (ie, ELISA)	CDTB&VINCULIN IGG ANTB IA

Laboratory	CPT Code	Long Descriptor	Short Descriptor
therascreen® *PIK3CA* RGQ PCR Kit, QIAGEN, QIAGEN GmbH	0177U	Oncology (breast cancer), DNA, *PIK3CA (phosphatidylinositol-4,5-bisphosphate 3-kinase catalytic subunit alpha)* gene analysis of 11 gene variants utilizing plasma, reported as *PIK3CA* gene mutation status	ONC BRST CA DNA PIK3CA 11
VeriMAP™ Peanut Sensitivity – Bead Based Epitope Assay, AllerGenis™ Clinical Laboratory, AllerGenis™ LLC	0178U	Peanut allergen-specific quantitative assessment of multiple epitopes using enzyme-linked immunosorbent assay (ELISA), blood, report of minimum eliciting exposure for a clinical reaction	PEANUT ALLG ASMT EPI CLIN RX
Resolution ctDx Lung™, Resolution Bioscience, Resolution Bioscience, Inc	0179U	Oncology (non-small cell lung cancer), cell-free DNA, targeted sequence analysis of 23 genes (single nucleotide variations, insertions and deletions, fusions without prior knowledge of partner/breakpoint, copy number variations), with report of significant mutation(s)	ONC NONSM CLL LNG CA ALYS 23
Navigator ABO Sequencing, Grifols Immunohematology Center, Grifols Immunohematology Center	0180U	Red cell antigen (ABO blood group) genotyping (ABO), gene analysis Sanger/chain termination/conventional sequencing, *ABO (ABO, alpha 1-3-N-acetylgalactosaminyltransferase and alpha 1-3-galactosyltransferase)* gene, including subtyping, 7 exons	ABO GNOTYP ABO 7 EXONS
Navigator CO Sequencing, Grifols Immunohematology Center, Grifols Immunohematology Center	0181U	Red cell antigen (Colton blood group) genotyping (CO), gene analysis, *AQP1 (aquaporin 1 [Colton blood group])* exon 1	CO GNOTYP AQP1 EXON 1
Navigator CROM Sequencing, Grifols Immunohematology Center, Grifols Immunohematology Center	0182U	Red cell antigen (Cromer blood group) genotyping (CROM), gene analysis, *CD55 (CD55 molecule [Cromer blood group])* exons 1-10	CROM GNOTYP CD55 EXONS 1-10

Laboratory	CPT Code	Long Descriptor	Short Descriptor
Navigator DI Sequencing, Grifols Immunohematology Center, Grifols Immunohematology Center	0183U	Red cell antigen (Diego blood group) genotyping (DI), gene analysis, *SLC4A1 (solute carrier family 4 member 1 [Diego blood group])* exon 19	DI GNOTYP SLC4A1 EXON 19
Navigator DO Sequencing, Grifols Immunohematology Center, Grifols Immunohematology Center	0184U	Red cell antigen (Dombrock blood group) genotyping (DO), gene analysis, *ART4 (ADP-ribosyltransferase 4 [Dombrock blood group])* exon 2	DO GNOTYP ART4 EXON 2
Navigator FUT1 Sequencing, Grifols Immunohematology Center, Grifols Immunohematology Center	0185U	Red cell antigen (H blood group) genotyping (FUT1), gene analysis, *FUT1 (fucosyltransferase 1 [H blood group])* exon 4	FUT1 GNOTYP FUT1 EXON 4
Navigator FUT2 Sequencing, Grifols Immunohematology Center, Grifols Immunohematology Center	0186U	Red cell antigen (H blood group) genotyping (FUT2), gene analysis, *FUT2 (fucosyltransferase 2)* exon 2	FUT2 GNOTYP FUT2 EXON 2
Navigator FY Sequencing, Grifols Immunohematology Center, Grifols Immunohematology Center	0187U	Red cell antigen (Duffy blood group) genotyping (FY), gene analysis, *ACKR1 (atypical chemokine receptor 1 [Duffy blood group])* exons 1-2	FY GNOTYP ACKR1 EXONS 1-2
Navigator GE Sequencing, Grifols Immunohematology Center, Grifols Immunohematology Center	0188U	Red cell antigen (Gerbich blood group) genotyping (GE), gene analysis, *GYPC (glycophorin C [Gerbich blood group])* exons 1-4	GE GNOTYP GYPC EXONS 1-4

Laboratory	CPT Code	Long Descriptor	Short Descriptor
Navigator GYPA Sequencing, Grifols Immunohematology Center, Grifols Immunohematology Center	0189U	Red cell antigen (MNS blood group) genotyping (GYPA), gene analysis, *GYPA* (*glycophorin A [MNS blood group])* introns 1, 5, exon 2	GYPA GNOTYP NTRNS 1 5 EXON 2
Navigator GYPB Sequencing, Grifols Immunohematology Center, Grifols Immunohematology Center	0190U	Red cell antigen (MNS blood group) genotyping (GYPB), gene analysis, *GYPB (glycophorin B [MNS blood group])* introns 1, 5, pseudoexon 3	GYPB GNOTYP NTRNS 1 5 SEUX 3
Navigator IN Sequencing, Grifols Immunohematology Center, Grifols Immunohematology Center	0191U	Red cell antigen (Indian blood group) genotyping (IN), gene analysis, *CD44* (*CD44 molecule [Indian blood group])* exons 2, 3, 6	IN GNOTYP CD44 EXONS 2 3 6
Navigator JK Sequencing, Grifols Immunohematology Center, Grifols Immunohematology Center	0192U	Red cell antigen (Kidd blood group) genotyping (JK), gene analysis, *SLC14A1 (solute carrier family 14 member 1 [Kidd blood group])* gene promoter, exon 9	JK GNOTYP SLC14A1 EXON 9
Navigator JR Sequencing, Grifols Immunohematology Center, Grifols Immunohematology Center	0193U	Red cell antigen (JR blood group) genotyping (JR), gene analysis, *ABCG2 (ATP binding cassette subfamily G member 2 [Junior blood group])* exons 2-26	JR GNOTYP ABCG2 EXONS 2-26
Navigator KEL Sequencing, Grifols Immunohematology Center, Grifols Immunohematology Center	0194U	Red cell antigen (Kell blood group) genotyping (KEL), gene analysis, *KEL* (*Kell metallo-endopeptidase [Kell blood group])* exon 8	KEL GNOTYP KEL EXON 8

Laboratory	CPT Code	Long Descriptor	Short Descriptor
Navigator *KLF1* Sequencing, Grifols Immunohematology Center, Grifols Immunohematology Center	0195U	*KLF1 (Kruppel-like factor 1),* targeted sequencing (ie, exon 13)	KLF1 TARGETED SEQUENCING
Navigator LU Sequencing, Grifols Immunohematology Center, Grifols Immunohematology Center	0196U	Red cell antigen (Lutheran blood group) genotyping (LU), gene analysis, *BCAM (basal cell adhesion molecule [Lutheran blood group])* exon 3	LU GNOTYP BCAM EXON 3
Navigator LW Sequencing, Grifols Immunohematology Center, Grifols Immunohematology Center	0197U	Red cell antigen (Landsteiner-Wiener blood group) genotyping (LW), gene analysis, *ICAM4 (intercellular adhesion molecule 4 [Landsteiner-Wiener blood group])* exon 1	LW GNOTYP ICAM4 EXON1
Navigator RHD/CE Sequencing, Grifols Immunohematology Center, Grifols Immunohematology Center	0198U	Red cell antigen (RH blood group) genotyping (RHD and RHCE), gene analysis Sanger/chain termination/conventional sequencing, *RHD (Rh blood group D antigen)* exons 1-10 and *RHCE (Rh blood group CcEe antigens)* exon 5	RHD&RHCE GNTYP RHD1-10&RHCE5
Navigator SC Sequencing, Grifols Immunohematology Center, Grifols Immunohematology Center	0199U	Red cell antigen (Scianna blood group) genotyping (SC), gene analysis, *ERMAP (erythroblast membrane associated protein [Scianna blood group])* exons 4, 12	SC GNOTYP ERMAP EXONS 4 12
Navigator XK Sequencing, Grifols Immunohematology Center, Grifols Immunohematology Center	0200U	Red cell antigen (Kx blood group) genotyping (XK), gene analysis, *XK (X-linked Kx blood group)* exons 1-3	XK GNOTYP XK EXONS 1-3

Laboratory	CPT Code	Long Descriptor	Short Descriptor
Navigator YT Sequencing, Grifols Immunohematology Center, Grifols Immunohematology Center	0201U	Red cell antigen (Yt blood group) genotyping (YT), gene analysis, *ACHE (acetylcholinesterase [Cartwright blood group])* exon 2	YT GNOTYP ACHE EXON 2

Revised Codes Effective July 1, 2020

Proprietary Laboratory Analysis (PLA)

The laboratory name of the following existing code was changed effective July 1, 2020:

- Existing code 0068U
  - Laboratory Name: MYCODART-PCR™ Dual Amplification Real Time PCR Panel for 6 Candida species, RealTime Laboratories, Inc/MycoDART, Inc, RealTime Laboratories, Inc

Deleted Codes Effective July 1, 2020

Existing code 0124U is being deleted.
Existing code 0125U is being deleted.
Existing code 0126U is being deleted.
Existing code 0127U is being deleted.
Existing code 0128U is being deleted.

ADDITIONAL INFORMATION

Note that MACs will not search their files to either retract payment or retroactively pay claims previously processed; however, they should adjust claims if you bring the claims to their attention.

The official instruction, CR 11815, issued to your MAC regarding this change, is available at https://www.cms.gov/files/document/r10217CP.pdf.

If you have questions, your MACs may have more information. Find their website at http://go.cms.gov/MAC-website-list.

DOCUMENT HISTORY

Date of Change	Description
July 9, 2020	We revised this article to reflect a revision to CR 11815. The CR revision added information on COVID-19 codes 87426, 0223U and 0224U and we added the same information to this article. We also revised the CR release date, transmittal number and the web address of the CR. All other information remains the same.
June 12, 2020	Initial article released.