

CORONAVIRUS DISEASE 2019 (COVID-19)

COVID-19 Viral Test Panel Coding, Billing and Result Reporting Guidance



Audience: PBS, HIM, Revenue Integrity, CFO, MGPS, TIS, Laboratory, CMO

Revision Date: 01/11/2021

Version : 2

COVID-19 Response Team Owner: Finance

Date of Last Review: 01/12/2021

What's Changed: Clarification added on appropriate HCPCS coding of these panels when only COVID-19 test is ordered.

Our Laboratory leaders have requested guidance on how to appropriately code, bill and report results for COVID-19 only orders performed using respiratory viral panels that include COVID-19 and other tests when no other rapid in-house single COVID-19 testing kit is available.

Some COVID-19 test kit manufacturers, including BioFire and Cepheid, are no longer producing COVID-19 only test kits. BioFire is only producing COVID-19 testing through their 2.1 Panel, which includes 22 tests (CPT 0202U). Cepheid created a 3-test panel that includes Flu A, Flu B and COVID-19 (CPT 0240U) and a 4-test panel that includes Flu A, Flu B, RSV and COVID-19 (CPT 0241U).

In addition, several MACs including WPS, Noridian, CGS, Palmetto have created Local Coverage Determinations (LCDs) that deny coverage for respiratory viral panels that include more than five tests.

System Office has sent questions to CMS and the American Hospital Association (AHA) but have not received additional guidance to-date regarding the appropriate billing under this scenario.

Billing Should Match Orders

Charging and billing for services should match the physician's order and medical necessity for diagnosis of the patient. Even though CMS/AMA have created specific PLA CPT codes for the BioFire and Cepheid COVID panels, those codes should only be used if the panel or combination of tests is ordered by a physician.

If the physician orders only a COVID-19 test, then the CPT coding should match the order and only the COVID-19 test should be coded, even if multi-test panels are used because no other test kits are available.

- The BioFire and Cepheid PCR testing may be high throughput or not depending on the equipment configuration.

- For configurations that meet the requirement to bill with U0003 (make sure these are included in the high throughput COVID TAT process).

Cepheid	GeneXpert Systems on a system(s) comprised of 8 modules or more such as:	Charge Code	>200 Tests/Day
---------	--	-------------	----------------

GeneXpert® Infinity System	U0003	YES
GeneXpert XVI-XVI	U0003	YES
GeneXpert XVI-XII	U0003	YES
GeneXpert XVI-VIII	U0003	YES
2 or more GeneXpert IV-IV systems	U0003	YES
GeneXpert System(s) with less than 8 modules	87635	NO

Biofire	Torch Module Configurations:	Charge Code	>200 Tests/Day
---------	------------------------------	-------------	----------------

Torch 10 (220 tests/day)	U0003	YES
Torch 12 (264 tests/day)	U0003	YES
Two Torch 6 (264 tests/day)	U0003	YES
Two Torch 8 (352 tests/day)	U0003	YES
Torch Module configurations with less than 10 modules	87635	NO

The panel CPT codes would be billed only if the panel or combination of tests that make up the panel are ordered by the physician. For example, if a Health Ministry uses Cepheid equipment and a physician orders both COVID-19 and Influenza A&B, then CPT 0240U can be billed.

Reporting Test Results

For orders placed for COVID-19 only, which are performed using a respiratory panel, the following should occur:

- Report out only the COVID-19 result if all other panel tests are negative.
- For panels that show other positive incidental results beyond the ordered COVID-19 result, the entire panel is to be reported.
- Ordering physicians should be made aware that incidental results will be reported automatically and not require that an additional order be placed for the panel results to be reported.
- Each HM's Quality Officer should ensure that the reporting of incidental results has been documented via communication to ordering physicians and review and sign off by their local Medical Executive Committee.

Implementation

Health Ministries may need to create additional COVID-19 orderable or CDMs that allow a COVID-19 respiratory panel to be performed and resulted, but which only charges the COVID-19 CPT code 87635. With

the variety of electronic health information systems and laboratory information systems in use in Trinity Health, each site will need to determine the best process to accommodate the Coding and Billing guidelines noted above.

References

- CMS COVID FAQs High Throughput section beginning on page 12: [Frequently Asked Questions to Assist Medicare Providers \(PDF\)](#)
- [COVID-19 CPT/HCPCS Testing Codes](#)
- Cepheid Customer Response: CMS Ruling 2020-1-R



We appreciate your support as we work Together to ensure the safety of our patients and communities at large.