



COVID-19 (Coronavirus) Questions and Answers for Blue Shield of California Network Providers

Commercial and Medicare Business-related questions

March 16, 2020

Blue Shield of California (Blue Shield) is taking immediate steps to address COVID-19 and promote the health, safety and well-being of our members.

Please carefully review the information below related to providing care for Blue Shield members during this challenging time. If you have questions about eligibility or benefits, we strongly encourage you to visit Provider Connection at blueshieldca.com/provider to use our online services for finding such information. Due to higher than usual call volumes, providers have experienced long waiting periods when calling our Provider Customer Service Department. There is also general information available at our **member website** at blueshieldca.com/coronavirus.

Cost-sharing Responsibilities for Blue Shield Members

1. Are cost-sharing responsibilities waived for Blue Shield members for screening and testing for COVID-19?

Blue Shield is waiving all member cost-sharing and any prior authorization for COVID-19 **screening and testing** for all fully-insured commercial plan HMO and PPO members and Medicare Advantage HMO and PPO members. This includes cost-sharing for screening and testing at hospitals, urgent care, emergency room, or physician offices and other appropriately designated locations.

2. What about Blue Shield members whose coverage is under a self-funded employer plan? Do the same cost-sharing waivers apply to them?

Not all "self-funded" employer plans are waiving cost-sharing for their Blue Shield plan members for COVID-19 screening and testing. Please verify with Blue Shield whether a member whose coverage is through a self-funded client whether their self-funded plan is waiving cost-sharing.

How do I recognize a member's plan as being under a "self-funded" client?

If a member's plan ID card indicates "**Administrative Services Only**," the member's plan is under a self-funded client. Self-funded plans are governed by the Employee Retirement Income Security Act of 1974 (ERISA), which is federal law. Self-funded plans may opt out of compliance with the state mandate to waive cost-sharing for COVID-19 screening and testing.

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3. For those members who qualify for cost-sharing waivers, does the waiver apply to treatment and care resulting from a positive result of testing for COVID-19?

No. Waivers for cost-sharing responsibility DO NOT apply to members receiving treatment and care resulting from their diagnosis of COVID-19.

Consistent with our policy, if a member is admitted to the hospital, the hospital should follow its normal process of notifying Blue Shield that they have admitted one of our members.

4. Will Blue Shield waive copays for calls to Teladoc for COVID-19 screening?

- To support effective access to [Teladoc](#), Blue Shield is waiving copayments for ALL calls to Teladoc for Blue Shield fully-insured members, until further notice. The member will be informed of this decision when they contact Teladoc.

Please note that copayments for [Teladoc](#) access are made up-front; since it is not possible to determine whether the Teladoc call is related to COVID-19 up-front, Teladoc copayments will be waived “across the board” until further notice.

5. Will Blue Shield assume risk for the waived copayments administered by capitated providers for COVID-19 screening and testing provided to Blue Shield Members?

For our fee-for-service business, Blue Shield will absorb the costs for waived copayments for COVID-19 screening and testing in order to support network providers. Providers may submit claims through the normal process.

For our capitated commercial business, Blue Shield will also absorb the costs for waived copayments for COVID-19 screening and testing in order to support network providers. We will send out a follow-up communication to explain the process for this remediation.

For our capitated Medicare business, Blue Shield also will absorb the costs for waived copayments for COVID-19 screening and testing in order to support network providers. We will send out a follow-up communication to explain the process for this remediation.

Prior Authorization

There is no prior authorization required for COVID-19 treatment.

Billing/Coding for testing for COVID-19

- **Which billing codes should be used to bill for testing for COVID-19?**

There are two new HCPCS codes for healthcare providers who need to **test** patients for COVID-19.

- **HCPCS code U0001:** Providers using the Centers for Disease Control and Prevention (CDC) 2019 Novel Coronavirus Real Time RT-PCR Diagnostic Test Panel may bill for that test using this newly created HCPCS code (U0001).
- **HCPCS code U0002:** The second new HCPCS code (U0002) can be used by laboratories and healthcare facilities to bill Medicare as well as by other health insurers that choose to adopt this new code for such tests. HCPCS code U0002 generally describes 2019-nCoV Coronavirus, SARS-CoV-2/2019-nCoV (COVID-19) using any technique, multiple types or subtypes (includes all targets).

[Guidelines](#) provided by Centers for Medicare and Medicaid Services (CMS) are also recognized for commercial coverage, as well. The guidelines are available at www.cms.gov/files.

Blue Shield is offering coverage for these testing codes effective for dates of service on and after **February 4, 2020** for Blue Shield and Blue Shield Promise members. This is a business decision made by Blue Shield for Blue Shield and Blue Shield Promise plan members.

Billing/Coding for screening via office visits, emergency room, and urgent care for COVID-19

- **Which billing codes should be used for screening provided for COVID-19?**

- As stated on the Centers for Disease Control website at www.cdc.gov, there are currently no diagnosis codes as of yet that are specific to COVID-19.
- There are interim ICD-10-CM official coding [guidelines](#), effective February 20, 2020 (see below and at <https://www.cdc.gov/nchs>).
- Because of the public health emergency, the World Health Organization (WHO) developed a new ICD-10 Diagnosis code U07.1 2019-nCoV acute respiratory disease, which will be part of the ICD-10 October 1, 2020 updates.

Please note: Blue Shield has made a business decision to adopt the diagnosis code U07.1 in our claims system with an effective date of February 4, 2020 (meaning for dates of service on and after February 4, 2020).

This decision applies ONLY to those plans for which Blue Shield is the primary payor.

This means that Blue Shield will be accepting (for diagnoses) EITHER the CDC diagnosis coding spelled out below OR the new ICD-10 Code U07.1 described above.

The interim coding advice states to use existing codes and assign the following ICD-10-CM codes for confirmed cases related to COVID-19:

- Pneumonia due to COVID-19: J12.89 (Other viral pneumonia) and B97.29 (Other coronavirus as the cause of diseases classified elsewhere)
- Acute bronchitis due to COVID-19: J20.8 (Acute bronchitis due to other specified organisms) and B97.29 (Other coronavirus as the cause of diseases classified elsewhere)
- Bronchitis not otherwise specified (NOS) due to COVID-19: J40 (Bronchitis, not specified as acute or chronic) and B97.29 (Other coronavirus as the cause of diseases classified elsewhere)
- Lower respiratory infection NOS or acute respiratory infection NOS due to COVID-19: J22 (Unspecified acute lower respiratory infection) and B97.29 (Other coronavirus as the cause of diseases classified elsewhere)
- Respiratory infection NOS due to COVID-19: J98.8 (Other specified respiratory disorders) and B97.29 (Other coronavirus as the cause of diseases classified elsewhere)
 - Acute respiratory distress syndrome (ARDS) due to COVID-19: J80 (Acute respiratory distress syndrome) and B97.29 (Other coronavirus as the cause of diseases classified elsewhere)
- For possible exposure to COVID-19 that is ruled out after evaluation, assign code Z03.818 (Encounter for observation for suspected exposure to other biological agents ruled out). If a patient was exposed to someone with a confirmed case of COVID-19, assign code Z20.828 (Contact with and (suspected) exposure to other viral communicable diseases).
- If a patient presents with signs or symptoms without an established definitive diagnosis, assign codes for each of the presenting signs and symptoms such as:
 - Cough (R05)
 - Shortness of breath (R06.02)
 - Fever, unspecified (R50.9)

Of special note, it typically would **not** be appropriate to assign code B34.2, Coronavirus infection, unspecified, for COVID-19 since this code is for unspecified sites and COVID-19 cases have usually been respiratory in nature.

Do not assign code B97.29 for cases documented as "possible," "probable" or "suspected." Instead, assign codes for the signs or symptoms present or exposure to the virus.

These guidelines may be updated if new clinical information becomes available. Visit the [NCHS website](#) to find information related to the coding of COVID-19.

Claims

- **Has Blue Shield received any claims related to COVID-19?**
Due to federal privacy laws, we will not comment on whether any of our plan members have the virus or are receiving treatment.

Access to Supplies/Care

- **Is Blue Shield using telehealth to increase access to care while decreasing infection risks?**

[Teladoc service](#) is available with waived co-payments for **all** calls for our fully insured members, as well as our Medicare Advantage HMO and PPO members. Only our self-funded clients have Teladoc as an optional buy-up. Teladoc service representatives and doctors are prepared to address questions around Coronavirus as they would any other illness, natural disaster, etc. This is a good first step to take for members who have Teladoc or NurseHelp 24/7 hotline benefits in order to learn more about their condition and treatment options.

- **Do all members with access to Teladoc have this service listed on their member ID cards?**

All standard ID cards include the Teladoc copay and the Teladoc phone number. Only customized ID cards may not have this information.

- **How much do tests and test kits cost? How many are available for our network of providers?**

We are not commenting on the cost or availability of the test kits. This is a question for either state or federal agencies.

- **With the interrupted supply chain between the US and China, there are general concerns about a pending shortage of prescription drugs. Will Blue Shield allow members to obtain early refills on their regular medications to ensure they have no disruption?**

If a member cannot access their current supply of medication or requires an additional supply, a member or their provider/prescriber can call in and request an early refill of their prescription. Blue Shield is also closely monitoring the impact to the prescription drug supply and will take immediate steps to ensure members have access to medications.

In the event of a drug shortage, Blue Shield has a standard process to ensure members have access to available medications to treat their condition.

Blue Shield's messages to members

Blue Shield is actively encouraging members to stay home from work (or school) if they are feeling ill. We are reminding our members of their benefits for using the [Teladoc](#) service, and encouraging them to report their conditions to their family doctor or urgent care clinic so that they can be appropriately referred for screening and lab tests, if necessary. [Heal](#) is available to many of our members for in-home visits, and NurseHelp 24/7 is available to our members to help them navigate healthcare decisions. This approach will help ensure they go to the right location to be tested and may help them avoid unnecessary visits to service locations where they may infect others.

Whom should I contact with questions?

If you are looking for eligibility, benefits and claims information, or to submit an authorization, please visit blueshieldca.com/provider. Providers calling Provider Customer Service phone lines are experiencing long wait times due to a higher volume of calls resulting from the COVID-19 pandemic.

We will continue to update and periodically distribute *Questions and Answers for Blue Shield of California Network Providers*. We also invite you to subscribe to [Blue Shield's News Center](#) for general, periodic announcements from Blue Shield.