Keeping up with COVID-19 Codes

With the outbreak of the COVID-19 virus, the world is hyper-focused, as it should be, on the caregivers and the population of patients contracting the virus. However, we must also keep in mind the need for clear and concise documentation regarding the diagnosis, testing, and tracking of the spread of the virus.

There are hundreds of medical terminologies that document every step of the health care process through admission, testing, treatment, discharge, and billing. So when there is a large health event or worldwide pandemic, like COVID-19, it requires quick changes and updates to those terminology sets. This is required to ensure that health care providers have the ability to accurately document, track, and treat their patients in a timely fashion.

For the benefit of medical practices looking to understand what's changed and how to manage this pandemic, let's look at a summary of the changes to the billing and coding sets, their effective dates, provided links to the various standards bodies, and summarized how these codes will benefit clinicians who are tasked with documenting the COVID-19 condition at the point-of-care.

ICD-10-CM

After much speculation and back and forth, the Centers for Disease Control (CDC), under the National Emergencies Act Section 201 and 301, authorized the addition of U07.1, a new diagnosis code specific to COVID-19. Due to the urgent need to capture the reporting of this condition, the CDC announced on Wednesday, March 18th, that the new code would be made effective, April 1st, 2020. This new code falls under the Conditions of uncertain etiology hierarchy that will be new with the 2021 release.
For further information regarding the CDC's guidance, please click here.

Current Procedural Terminology (CPT)

The American Medical Association (AMA) has created a new CPT® code to streamline the testing process by US healthcare providers. Code 87635 for severe acute respiratory syndrome coronavirus 2 (SARS-2-CoV-2) (Coronavirus disease [COVID-19]) was accepted as the new industry standard CPT code for reporting COVID-19 testing, made effective March 13, 2020. Because this is considered an, out of cycle release for CPT, it will be officially included in the 2021 data file, released in the fall 2020.
For further information about the new CPT code and description, click here.

HCPCS

In February, CMS developed a new Healthcare Common Procedure Coding System (HCPCS) code in order to allow healthcare providers and laboratories the ability to appropriately document and bill for COVID-19 specific testing. The new HCPCS code, U0001, can be used specifically for CDC testing laboratories to test patients for SARS-CoV-2 COVID-19. The second HCPCS billing code, U0002, allows laboratories to bill for non-CDC laboratory tests for SARS-CoV-2/2019-nCoV COVID-19. Beginning April 1, 2020, Medicare claims processing systems will be able to accept this new HCPCS code for COVID-19 specific services provided to their patients.
For further information on the new codes for coronavirus lab testing, click here.

With this rapidly changing situation it is best to keep in mind that all these codes have been created due to an urgent and emergent situation and are subject to change or deletion at any time.

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