

April 23, 2021 Web Announcement 2480

## Attention All Providers Performing COVID-19 Diagnostic Testing with Procedure Code 87426

Claims for COVID-19 diagnostic testing procedure code 87426 (Infectious agent antigen detection by immunoassay technique) are not required to be billed with procedure code 87301. Claims for procedure code 87426 with dates of service on or after June 25, 2020, that processed prior to April 12, 2021, and denied in error with error code 6511 (Add-on code billed without paid primary) because code 87426 was not billed with 87301 will be automatically reprocessed. A future remittance advice message will notify providers when the claims are reprocessed.

Please note: When claims are reprocessed, please be aware that all system and clinical claim editor edits are applicable. As a result, there may be no additional payment, and other claim denials may be received. Providers have the right to appeal denied claims, including those denied upon reprocessing. Please refer to <a href="Medicaid Services Manual Chapter 100">Medicaid Services Manual Chapter 100</a> and the <a href="Billing Manual">Billing Manual</a> for information concerning the claim appeal process and time frames.

ANVPEC-1633-21 April 2021