

COVID-19 and Telehealth Billing Guide for Medi-Cal Managed Care

Anthem Blue Cross (Anthem) is closely monitoring COVID-19 developments and what it means for our customers and health care provider partners. Anthem will continue to follow policies from the Department of Health Care Services (DHCS).

To help address care providers' questions, Anthem has developed the following interim billing guidelines for Medi-Cal Managed Care (Medi-Cal) providers in the Anthem network during this state of emergency.

Billing guidelines:

COVID-19 vaccines — As the federal government will pay for the initial vaccines, there will be no Medi-Cal provider reimbursement for the COVID-19 vaccines themselves. However, providers will be able to bill Medi-Cal FFS for the COVID-19 vaccine administration fees. Please refer to the COVID-19 Medi-Cal Response webpage for billing guidance at https://files.medi-cal.ca.gov/pubsdoco/COVID19_response.aspx.

The following COVID-19 administration codes will be carved out to the State. Please bill Medi-Cal directly for the following:

HCPCS/CPT®	Description
0001A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3mL dosage, diluent reconstituted; first dose – (PFIZER)
0002A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3mL dosage, diluent reconstituted; second dose- (PFIZER)
0011A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 100 mcg/0.5mL dosage; first dose- (MODERNA)
0012A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 100 mcg/0.5mL dosage; second dose- (MODERNA)
0021A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, DNA, spike protein, chimpanzee adenovirus Oxford 1 (ChAdOx1) vector, preservative free, 5x10 ¹⁰ viral particles/0.5mL dosage; first dose (AstraZeneca)
0022A	Second Dose (AstraZeneca)

<https://mediproviders.anthem.com/ca>

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Diagnosis codes

Code only a confirmed diagnosis of the 2019 novel coronavirus disease (COVID-19) as documented by the provider or documentation of a positive COVID-19 test result. For a confirmed diagnosis, assign code U07.1, COVID-19.

In this context, “confirmation” does not require documentation of a positive test result for COVID-19; the provider’s documentation that the individual has COVID-19 is sufficient.

When COVID-19 meets the definition of principal diagnosis, code U07.1, COVID-19, should be sequenced first, followed by the appropriate codes for associated manifestations, except when another guideline requires that certain codes be sequenced first, such as obstetrics, sepsis, or transplant complications.

Patients showing any COVID-19 signs/symptoms (such as cough, fever, etc.) and where a definitive diagnosis has not been established, assign codes for the Signs & Symptoms (S&S). For example:

- R05 — Cough
- R06.02 — Shortness of breath
- R50.9 — Fever, unspecified

Note: Diagnosis code B34.2 is not appropriate for COVID-19 cases.

COVID-19 lab tests

Per DHCS guidance, Anthem is covering the below codes for COVID-19 testing. **Please note that IPAs/PMGs that are at risk for labs will be responsible for all COVID-19 tests. Please note that the following testing codes are not split-billable.**

HCPCS/CPT	Description	DHCS rate
U0001	CDC 2019 novel coronavirus test	\$35.91
U0002	Non-CDC 2019 novel coronavirus test	\$51.31
*87635	Infectious agent detection by nucleic acid (DNA or RNA); Severe Acute Respiratory Syndrome Coronavirus 2-	\$51.31
G2023	Specimen collection for Severe Acute Respiratory Syndrome Coronavirus 2(sars-cov-2/Covid-19) any specimen source	\$23.46
G2024	Specimen collection for Severe Acute Respiratory Syndrome Coronavirus 2(sars-cov-2/Covid-19) from individual skilled nursing	\$25.46
86318	infectious agent antibody(ies), qualitative or semiquantitative, single-step method (for example, reagent strip)	\$14.10
86328	Immunoassay for infectious agent antibody(ies), qualitative or semiquantitative, single step method (for example, reagent strip); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19])Immunoassay for infectious agent antibody(ies) qualitative semi-quantitative, single step method (for example, reagent strip)	\$45.23
86769	Antibody; Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) (Coronavirus disease-Covid-19)	\$42.13
U0003	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.	\$100.00
U0004	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.	\$100.00

HCPCS/CPT	Description	DHCS rate
C9803	Hospital outpatient clinic visit specimen collection for Severe Acute Respiratory Syndrome(sars-cov-2) (Covid-19)any spec	\$22.99
87426	Infectious agent antigen detection by immunoassay technique (for example, enzyme immunoassay(eia)enzyme-linked immunosorbent	\$35.33
86408	Neutralizing antibody, severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]); screen	\$42.13
86409	Neutralizing antibody, severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]); titer	\$79.61
86413	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) antibody, quantitative	\$51.43
87811	Infectious agent antigen detection by immunoassay with direct optical (i.e. visual) observation; severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19])	\$41.38
87636	Infectious agent by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) and influenza virus types A and B, multiplex amplified probe technique	\$142.63
87637	Infectious agent by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) influenza virus types A and B, respiratory syncytial virus, multiplex amplified probe technique	142.63

*CPT 87635-Providers can bill Medi-Cal for at-home test when using the appropriate HCPCS/CPT codes(s), and for now, CPT 87635

Telehealth for professional providers

Please follow the DHCS guidelines for billing virtual and telephonic visits including specific documentation in the medical records that satisfies the requirements of the CPT or HCPCS code utilized. The provider needs to make a clinical decision if treatment via telehealth is/will be effective for the Applied Behavior Analysis visits.

Place of service **02** should be billed for all telehealth visits with the exception of clinic visits and visits billed on a CMS1450/UB04.

Type of service	Code(s)	Description	Modifiers
Virtual communication	G2010 G2012 G0071	Remote evaluation and brief communication	95 or GQ
Evaluation and management	99202-99205 99211-99215 99381-99385 99391-99395	Evaluation and management sick and well visits	95 or GQ
Behavioral health	90791-90792 90832-90838 90853 90863	<ul style="list-style-type: none"> • Psychiatric evaluations • Psychotherapy • Group psychotherapy • Pharmacologic management 	95 or GQ

Behavioral health for autism and related disorders	97151-97158, 0362T and 0373T	Family guidance, treatment and assessment	95 or GQ
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Type of service	Code(s)	Description	Modifiers
E-consults	99451	Inter-professional e-consult	GQ
Originating site	Q3014	Telehealth originating site facility fee	95 or GQ
Transmission	T1014	Telehealth transmission per minute	95 or GQ
FQHC*/RHC** clinic visit	T1015	Telehealth clinic visit	SE
IHC† clinic visit	T1015	Telehealth IHC visit	SE

* Federally Qualified Health Center

** Rural Health Clinic

† Indian Health Clinic

Sources:

- <https://www.dhcs.ca.gov/Documents/COVID-19/COVID-19-Antibody-Testing.pdf>
- December 28, 2020, “COVID-19 Vaccine FINAL”, APL 20-022
<https://www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2020/APL20-022.pdf>
- March 18, 2020, “Supplement to All Plan Letter 19-009” <https://www.dhcs.ca.gov/Documents/COVID-19/APL19-009-Supplement-Telehealth-031820.pdf>
- Medi-Cal payment for Telehealth and Virtual/Telephonic Communications Relative to the 2019-Novel Coronavirus (COVID-19) https://www.dhcs.ca.gov/Documents/COVID-19/Telehealth_Other_Virtual_Telephonic_Communications_V3.0.pdf

For additional COVID-19 information and resources, we encourage you to review the following resources:

- <https://covid19.ca.gov>
- [DHCS COVID-19 Response](#)
- [Latest news from California Department of Public Health \(CDPH\) about COVID19 || En Español](#)
- [CDPH Testing categories](#)
- [U.S. Food & Drug Administration FAQs on Diagnostic Testing for COVID-19](#)
- <https://www.medicaid.gov/state-resource-center/downloads/covid-19-faqs.pdf>