	<b>JOHNS HOPKINS HEALTHCARE</b>	Policy Number: RPC.029 Effective Date: 1/1/2022 Revision Date: 12/20/2021
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**ACTION**

- New Policy
- Repealed Policy Date: \_\_\_\_\_
- Superseded Policy Number: \_\_\_\_\_

The most current version of the reimbursement policies can be found on [www.jhhc.com](http://www.jhhc.com).


These policies serve as a guide to assist you in accurate claim submissions and to outline the basis for reimbursement if the service is covered by a member's Johns Hopkins HealthCare (JHHC) benefit plan. The determination that a service, procedure, item, etc. is covered under a member's benefit plan is not a determination that you will be reimbursed. Services must meet authorization and medical necessity guidelines appropriate to the procedure and diagnosis as well as to the member's state of residence. You must follow proper billing and submission guidelines. You are required to use industry standard, compliant codes on all claim submissions. Services must be billed with ICD-10 codes, CPT codes, HCPCS codes and/or revenue codes. The codes denote the services and/or procedures performed. The billed code(s) are required to be fully supported in the medical record and/or office notes. Unless otherwise noted within the policy, our policies apply to both participating and nonparticipating providers and facilities.

If appropriate coding/billing guidelines or current Reimbursement Policies are not followed, Johns Hopkins HealthCare (JHHC) may:

- Reject or deny the claim
- Recover and/or recoup claim payment

JHHC reimbursement policies are developed based on nationally accepted industry standards and coding principles. These policies may be superseded by mandates in provider, state or commercial client contracts, or state, federal or CMS contracts and/or requirements. System logic or setup may prevent the loading of policies into the claims platforms in the same manner as described; however, JHHC strives to minimize these variations.

JHHC reserves the right to review and revise our policies periodically when necessary. When there is an update, we will publish the most current policy on [www.jhhc.com](http://www.jhhc.com).

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## **POLICY**

It is the policy of JHHC to follow guidance from the Centers for Medicare and Medicaid Services (CMS), as well as the Centers for Disease Control (CDC) and all other applicable federal and state guidance in regards to the testing, treatment and vaccination for COVID-19. **The policy shall expire at the end of the Public Health Emergency (PHE).**

## **SCOPE**

This payment policy applies to all COVID-19 related testing, treatment, and vaccination codes, reported on CMS-1500 or UB-04 claim forms or their electronic equivalent, to a JHHC product, from network and non-network physicians, providers, and suppliers.

## **BILLING GUIDELINES**

**A. COVID -19 Diagnostic Testing:** To support efforts to mitigate COVID-19 population spread, JHHC may cover COVID-19 diagnostic testing, including testing not related to known or suspected exposures and non-symptomatic members.

**Effective December 15, 2021**, in accordance with [Tricare guidance](#), **USFHP** will require a referral to be on file for COVID-19 testing codes U0001-U0005. Claims submitted without a referral on file will be denied.


All providers will be paid for COVID -19 diagnostic testing codes, including:

- Providers billing for services delivered in non-HSCRC regulated facilities
- Providers billing JHHC for services rendered in non-regulated space and contracted to a per diem or visit rate (treated as a bill above)
- FQHCs billing JHHC for COVID-19 diagnostic testing rendered as a stand-alone service (treated as a bill above)

Services billed on the same claim as COVID -19 diagnostic testing codes will be paid in accordance with the provider's contract.

**B. COVID -19 Antibody Testing:** JHHC covers all COVID-19 antibody testing. Per the FDA, antibody testing should be used when medically necessary to support diagnosis or treatment for COVID-19 or for treatment of another disease when information about COVID-19 antibodies may impact the outcome of that treatment, but should not be used as a first line of testing for a current diagnosis of COVID-19.

All providers will be paid for COVID -19 antibody testing codes, including:

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- Providers billing for services delivered in non-HSCRC regulated facilities
- Providers billing JHHC for services rendered in non-regulated space and contracted to a per diem or visit rate (treated as a bill above)
- FQHCs billing JHHC for COVID-19 antibody testing rendered as a stand-alone service (treated as a bill above)

Services billed on the same claim as COVID -19 antibody testing codes will be paid in accordance with the provider's contract.

- C. COVID -19 Travel Reimbursement for Homebound Patients:** JHHC will cover specimen collection for all members who meet the CMS criteria of homebound and for COVID-19 tests ordered by a healthcare professional.
- D. COVID -19 Treatments:** All providers will be paid for FDA approved COVID -19 treatments administered according to clinical guidance from the FDA, found in the treatment's Emergency Use Authorization (EUA), to JHHC members with a current COVID-19 diagnosis. Providers can visit the CMS website, [www.cms.gov/medicare/covid-19/monoclonal-antibody-covid-19-infusion](http://www.cms.gov/medicare/covid-19/monoclonal-antibody-covid-19-infusion), for the current list of authorized treatments.

As of April 17, 2021 Bamlanivimab (codes Q0239 and M0239) is no longer covered when administered alone, in accordance with [FDA and Medicare guidance](#). JHHC will only cover and pay for Bamlanivimab, when administered alone, for dates of service from November 10, 2020 – April 16, 2021.


When the government provides monoclonal antibody products to treat COVID-19 for free, providers should only bill for the administration; do not include the monoclonal antibody product codes on these claims.

Treatments are authorized for:

- Outpatient use only with immediate access to medications to treat a severe infusion reaction and the ability to activate the emergency medical system *and*
- Patients who are 12 years of age and older *with*
  - Positive results of direct SARS-CoV-2 viral testing *and*
  - Weighing at least 40 kgs (~88 lbs) *and*
  - Are at high risk for progressing to severe COVID-19 and/or hospitalization

Treatments are not authorized for:

- Patients under the age of 12 years

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- Patients who are hospitalized due to COVID-19
- Patients who require oxygen therapy due to COVID-19
- Patients who require an increase in baseline oxygen flow rate due to COVID-19 in those on chronic oxygen therapy due to underlying non-COVID-19 related comorbidity

**E. COVID -19 Vaccinations:** All providers will be paid for the administration of FDA approved vaccines, including:

- Providers billing for services delivered in non-HSCRC regulated facilities
- Providers billing JHHC for services rendered in non-regulated space and contracted to a per diem or visit rate (treated as a bill above)
- FQHCs billing JHHC for COVID-19 vaccinations rendered as a stand-alone service (treated as a bill above); effective 2/1/21, the Maryland Department of Health adjusted FQHC's cost-based rate to account for COVID-19 vaccination when billed in conjunction with other services.

When the government provides the COVID-19 vaccines for free, providers should only bill for the administration; do not include the vaccine product codes on these claims.


**F. COVID -19 Additional Supplies (99072):**

- **For dates of service on and before December 31, 2021:** EHP and USFHP will cover CPT code 99072, in accordance with AMA billing guidelines. This code is not a covered benefit, nor reimbursable for PPMCO, and CMS considers this a bundled service, thus not separately reimbursable for AdvantageMD. (CMS MLN Article [MM11939](#)).
- **For dates of service on or after January 1, 2022:** JHHC will not cover nor reimburse for this code, following CMS guidelines, considering this to be a bundled service, thus not separately reimbursable for AdvantageMD, EHP, USFHP. This code continues to be a non-covered benefit, nor reimbursable for PPMCO.

### **PAYMENT METHODOLOGY**

1. JHHC will reimburse as stated below, for each plan, with cost sharing waivers applied as appropriate to each plan and in accordance with Federal and State guidelines:

- **EHP & USFHP** – JHHC will reimburse these services per CMS rate guidance for the *DC + MD/VA Suburbs locality*. In the absence of a CMS rate, JHHC will look to guidance from Maryland's MAC. Cost sharing is waived for CPT 99072 for dates of service on or before

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December 31, 2021, and for dates of service January 1, 2022 and after the code will be denied.

- **AdvantageMD** – JHHC will follow CMS rate guidance for these services.
  - **PPMCO** – JHHC will reimburse these services at the Maryland Medicaid rate, with the exception of testing code U0005, which will pay at the MAC rate for dates of service on or before December 31, 2021. **For dates of service on or after January 1, 2022 U0005 will be denied as not covered, following Maryland Medicaid guidelines.**
2. **New COVID-19 codes:** For EHP and USFHP, any new COVID related codes created by CMS and AMA, which are not yet priced by CMS, or other above-mentioned resource, will be reimbursed at 70% billed charges, subject to retro-adjustment back to the code’s effective date once a rate is established by CMS or an applicable regulatory body.
- PPMCO will continue to follow Maryland Medicaid guidance for these occurrences.
- AdvantageMD will continue to follow CMS guidance for these occurrences.
3. **As of January 1, 2022, JHHC will not reimburse supply code CPT 99072, in accordance with CMS and State guidelines.** As such, the claim line will deny and is subject to balance billing restrictions.

## RATE GUIDANCE LINKS:

### CMS:

**Vaccines and Antibody Treatment:** <https://www.cms.gov/medicare/medicare-part-b-drug-average-sales-price/covid-19-vaccines-and-monoclonal-antibodies>

**Testing:** <https://www.cms.gov/files/document/mac-covid-19-test-pricing.pdf>


### Novitas, Maryland MAC, Jurisdiction JL:

**Vaccines:** <https://www.novitas-solutions.com/webcenter/portal/MedicareJL/pagebyid?contentId=00243705>

**Testing:** <https://www.novitas-solutions.com/webcenter/portal/MedicareJL/pagebyid?contentId=00228104>

**Monoclonal Antibody Treatment:** <https://www.novitas-solutions.com/webcenter/portal/MedicareJL/pagebyid?contentId=00243703>

### Maryland Medicaid:

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**Testing:** <https://health.maryland.gov/mmcp/Documents/COVID-19%20Reimbursable%20Laboratory%20Codes%20Fee%20Schedule%20update%201-12-21.pdf>

**Vaccine and Infusions:** <https://health.maryland.gov/mmcp/Documents/COVID-19%20Reimbursable%20Vaccine%20and%20Infusion%20Codes%20Fee%20Schedule%2011-17-21.pdf>

## **REFERENCES**

The CARES (Coronavirus Aid, Relief, and Economic Security) Act, [HR 748](#)

CMS Guidance:

- [CMS COVID-19 Vaccines and Monoclonal Antibodies Coding and Payment List](#)
- CMS Interim Rule, COVID-19 Vaccine Policies & Guidance, [CMS-9912 IFC-4](#)
- [Medicare Administrative Contractor \(MAC\) COVID-19 Test Pricing \(January 25, 2021\)](#)
- [COVID-19 Frequently Asked Questions \(FAQs\) on Medicare Fee-for-Service \(FFS\) Billing](#)
- [Medicare Monoclonal Antibody COVID-19 Infusion Program Instruction](#)
- [Toolkit On Covid-19 Vaccine: Health Insurance Issuers And Medicare Advantage Plans \(Updated March 16 2021\)](#)
- [MLN Matters, MM11939: Quarterly Update to the Medicare Physician Fee Schedule](#)
- Database (MPFSDB) – October 2020 Update


More information can be found on the CMS Current Emergencies webpage, <https://www.cms.gov/About-CMS/Agency-Information/Emergency/EPRO/Current-Emergencies/Current-Emergencies-page>

Tricare, USFHP Guidance:

- [COVID Testing Coverage](#)
- TRICARE Policy Manual 6010.60-M, April 1, 2015, [Chapter1 Section 15.1](#), TRICARE Coverage and Payment for Certain Services in Response to the Coronavirus Disease 2019 (COVID-19) Pandemic

MDH, Maryland Medical Assistance Program Guidance:

- [Hospital Transmittal No. 280, Laboratory Transmittal No. 77, Managed Care Organizations No. 144, Physician Transmittal No. 150 \(December 23, 2020\)](#)- UPDATE - COVID-19 Reimbursable Vaccine, Laboratory and Infusion Codes
- [COVID-19 Personal Protective Equipment \(PPE\) Requests and Balance Billing Medicaid Participants \(June 1, 2020\)](#)

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More information can be found on the Medicaid COVID-19 Provider Updates page,  
<https://mmcp.health.maryland.gov/Pages/Provider-Information.aspx>

**APPROVALS**

Reimbursement Policy Committee      Date:

Review/Revision Dates: 6/10/2021, 9/22/2021, 11/23/2021, 12/20/21