

## Testing



Procedure Code	Effective Date	JHHC Comments	Reimbursement	Cost Share Waived
86328	4/10/2020		\$45.23	Y
86408	8/10/2020		\$42.13	Y
86409	8/10/2020		\$105.33	Y
86413	9/8/2020		\$42.13	Y
86769	4/10/2020		\$42.13	Y
87426	6/25/2020		\$45.23	Y
87428	11/9/2020		\$73.49	Y
87635	3/13/2020		\$51.31	Y
87635	10/6/2020		\$51.31	Y
87636	10/6/2020		\$142.63	Y
87637	10/6/2020		\$142.63	Y
87811	10/6/2020		\$41.38	Y
99072	9/8/2020	<i>Limited to 1 unit per unique patient visit in non-facility settings while the PHE is in effect *Code is not covered by PPMCO, see policy.</i>	\$6.57	Y
0202U	5/20/2020		\$416.78	Y
0223U	6/25/2020		\$416.78	Y
0224U	6/25/2020		\$42.13	Y
0225U	8/10/2020		\$416.78	Y
0226U	8/10/2020		\$42.28	Y
0240U	10/6/2020		\$142.63	Y
0241U	10/6/2020		\$142.63	Y
G2023	3/1/2020	<i>Limited to homebound members per CMS defintion</i>	\$23.46	Y

G2024	3/1/2020	Limited to patients in a part B SNF stay or on behalf of an HHA	\$25.46	Y
U0001	3/1/2020		\$35.92	Y
U0002	3/1/2020		\$51.31	Y
U0003	4/14/2020		\$100	Y
U0003	1/1/2021	Rate update does not apply to PPMCO.	\$75	Y
U0004	4/14/2020		\$100	Y
U0004	1/1/2021	Rate update does not apply to PPMCO.	\$75	Y
U0005	1/1/2021		\$25	Y

**Sources Novitas:**

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

**MDH:**

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



