

ForwardHealth UPDATE

Wisconsin serving you

Your First Source of ForwardHealth Policy and Program Information



MEMBER COPAY EXEMPTION FOR COVID-19 LABORATORY TESTING, LABORATORY TESTING-RELATED SERVICES, AND ALL COVID-19-RELATED TREATMENT SERVICES

The federal Families First Coronavirus Response Act (H.R. 6201), effective March 18, 2020, and as of this ForwardHealth Update, expected to last through December 31, 2020, removes Medicaid copay requirements for COVID-19 laboratory testing, laboratory testing-related services, and all COVID-19-related treatment services. This Update explains coordination of the federal copay exemption with the end of the temporary BadgerCare Plus and Wisconsin Medicaid member copay suspension.

BadgerCare Plus and Wisconsin Medicaid Member Temporary Copay Suspension

As communicated in the December 2019 Update (2019-34), titled [“All BadgerCare Plus and Wisconsin Medicaid Copays Temporarily Suspended Effective for Date of Service Beginning on January 1, 2020, through June 30, 2020,”](#) member copays for all services

AFFECTED PROGRAMS

BadgerCare Plus, Medicaid

TO

Adult Mental Health Day Treatment Providers, Advanced Practice Nurse Prescribers With Psychiatric Specialty, Blood Banks, Child/Adolescent Day Treatment Providers, Chiropractors, Community Health Centers, End-Stage Renal Disease Service Providers, Family Planning Clinics, HealthCheck Providers, HealthCheck “Other Services” Providers, Hospice Providers, Hospital Providers, Independent Labs, Intensive In-Home Mental Health and Substance Abuse Treatment Services for Children Providers, Licensed Midwives, Nurse Midwives, Nurse Practitioners, Nursing Homes, Nurses in Independent Practice, Oral Surgeons, Outpatient Mental Health Clinics, Outpatient Substance Abuse Clinics, Pharmacies, Physician Assistants, Physician Clinics, Physicians, Podiatrists, Prenatal Care Coordination Providers, Rural Health Clinics, Substance Abuse Day Treatment Providers, Special Supplemental Nutrition Program for Women, Infants and Children (WIC) Agencies, Tribal Federally Qualified Health Centers, HMOs and Other Managed Care Programs

were temporarily suspended. This suspension included copay exemption for COVID-19 laboratory testing, laboratory testing-related services, and all COVID-19-related treatment services.

This temporary copay suspension ends July 1, 2020, as announced in the June 2020 Update (2020-25), titled "[Member Copay Policy Effective July 1, 2020.](#)" Effective for dates of service on and after July 1, 2020, providers are required to resume member copay collection for adult members as applicable.

COVID-19 Laboratory Testing, Laboratory Testing-Related Services, and COVID-19-Related Treatment Services Continued Copay Exemption

Despite the resumption of member copay collection for most services as of July 1, 2020, COVID-19 laboratory testing, laboratory testing-related services, and all COVID-19-related treatment services will continue to be exempt from member copay requirements per the federal Families First Coronavirus Response Act.

COVID-19 Laboratory Testing Subject to Exemption

COVID-19 laboratory testing is identified by the following procedure codes:

- U0001 (CDC 2019 novel coronavirus [2019-nCoV] real-time RT-PCR diagnostic panel)
- U0002 (2019-nCoV coronavirus, SARS-CoV-2/2019-nCoV [COVID-19], any technique, multiple types or subtypes [includes all targets], non-CDC)
- 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)
- 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)
- 87635 (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)
- 86328 (Immunoassay for infectious agent antibody[ies], qualitative or semiquantitative, single step method [eg, reagent strip]; severe acute respiratory syndrome coronavirus 2 [SARS-CoV-2] [Coronavirus disease (COVID-19)])

The information provided in this ForwardHealth Update is published in accordance with the federal Families First Coronavirus Response Act (H.R. 6201).

- 86769 (Antibody; severe acute respiratory syndrome coronavirus 2 [SARS-CoV-2] [Coronavirus disease (COVID-19)])

COVID-19 Testing-Related Services Subject to Exemption

COVID-19 testing-related services are medical visits that result in an order for, or administration of, a COVID-19 test, are related to furnishing or administering such a test, or to the evaluation of an individual for purposes of determining the need for such a test.

Applicable Evaluation and Management Services and Medical Visits Reimbursed to Facilities

The COVID-19 testing-related services copay exemption includes any of the following evaluation and management services (identified by applicable Healthcare Common Procedure Coding System procedure codes) for which a copay would normally apply:

- Domiciliary, rest home, or custodial care services
- Emergency department services
- Home services
- Hospital observation services
- Nursing facility services
- Office and other outpatient services
- Online digital evaluation and management services

“Evaluation and management services that would normally require a copay are exempt when the terms of the policy for COVID-19 laboratory testing-related services outlined in this Update are met.”

Applicable Providers

COVID-19 testing-related services provided by the following provider types are subject to the copay exemption:

- Community health centers
- Hospital providers
- Physicians and other professionals who are eligible to provide evaluation and management services
- Rural health clinics
- Tribal federally qualified health centers

Claims Submission Modifier Requirement for Testing-Related Services

Effective for dates of service on and after July 1, 2020, when submitting claims to ForwardHealth for COVID-19 testing-related services of evaluation and

The information provided in this ForwardHealth Update is published in accordance with the federal Families First Coronavirus Response Act (H.R. 6201).

management services and medical visits reimbursed to facilities, providers are required to include modifier CS (cost-sharing for specified COVID-19 testing-related services that result in an order for or administration of a COVID-19 test) to identify the service as exempt from the copay requirement.

Note: Use of the CS modifier applies only to COVID-19 **testing-related services**; providers should not indicate the CS modifier when submitting claims for copay-exempt COVID-19 laboratory testing.

COVID-19-Related Treatment Services

Effective for dates of service on and after July 1, 2020, any treatment services related to COVID-19 for BadgerCare Plus or Wisconsin Medicaid members are exempt from copay. Providers are instructed not to collect copayment from members for any services in which the diagnosis submitted is U07.1 (2019-nCoV Acute Respiratory Disease).

“ Providers are instructed not to collect copayment from members for any services in which the diagnosis submitted is U07.1 (2019-nCoV Acute Respiratory Disease). ”

Retention of Documentation Reminder

Providers are reminded that they must follow the documentation retention requirements per Wis. Admin. Code § [DHS 106.02\(9\)](#). Information about those requirements can be found in the following Online Handbook topics:

- [Financial Records](#) (#201)
- [Medical Records](#) (#202)
- [Preparation and Maintenance of Records](#) (#203)
- [Record Retention](#) (#204)
- [Availability of Records to Authorized Personnel](#) (#1640)

Providers are required to produce and/or submit documentation to ForwardHealth upon request. ForwardHealth may deny or recoup payment for services that fail to meet these requirements. Refusal to produce documentation may result in sanctions including, but not limited to, termination from Wisconsin's Medicaid program.

The information provided in this ForwardHealth Update is published in accordance with the federal Families First Coronavirus Response Act (H.R. 6201).

Information Regarding Claims for COVID-19 Testing-Related Services Submitted to HMOs

Some HMOs in Wisconsin have chosen not to collect copays for members enrolled in BadgerCare Plus and Medicaid SSI. Providers should contact the member's HMO to determine whether or not to collect a copay for non-COVID-19 services. Providers are required to follow the claims submission modifier requirement for COVID-19 testing-related services outlined in this Update when submitting claims for these services to an HMO.

The information provided in this ForwardHealth Update is published in accordance with the federal Families First Coronavirus Response Act (H.R. 6201).

The ForwardHealth Update is the first source of program policy and billing information for providers.

Wisconsin Medicaid, BadgerCare Plus, SeniorCare, and Wisconsin Chronic Disease Program are administered by the Division of Medicaid Services within the Wisconsin Department of Health Services (DHS). The Wisconsin AIDS Drug Assistance Program and the Wisconsin Well Woman Program are administered by the Division of Public Health within DHS.

For questions, call Provider Services at 800-947-9627 or visit our website at www.forwardhealth.wi.gov/.