COVID-19: Coverage guidelines for laboratory tests

July 23, 2020

Blue Cross Blue Shield of Massachusetts follows federal and state mandated requirements for SARS CoV-2 (COVID-19) testing coverage. This article clarifies when:

- COVID-19 testing is covered
- Services associated with testing do not require a cost share.

Commercial members: Managed care (HMO and POS), PPO, and Indemnity

Viral testing

Reverse transcription-polymerase chain reaction (RT-PCR) or antigen testing to detect the presence of SARS-CoV-2 for the diagnosis of COVID-19 infection is covered when ordered by a medical provider at their clinical discretion, following Centers for Disease Control (CDC) or the Department of Public Health (DPH) guidelines. Covered tests must be approved by the FDA or the Emergency Use Authorization, or the developer must have requested, or intends to request, Emergency Use Authorization approval.

Covered scenarios include (but are not limited to):

- Symptoms consistent with COVID-19, such as fever, cough, shortness of breath, chills, muscle pain, sore throat, anosmia, and gastrointestinal distress
- Asymptomatic patients with direct exposure to another individual with a confirmed case of COVID-19
- Asymptomatic patients who have been identified by contact tracing
- Symptomatic or asymptomatic patients who require testing prior to a medical procedure or surgery
- Admission to a facility – including but not limited to a hospital operated or licensed by the Department of Public Health or Mental Health, a long-term acute care hospital, or a skilled nursing facility

Covered testing sites include (but are not limited to):

- Drive-through testing sites
- Emergency rooms
- Medical provider offices
- The patient's home (using a testing kit—a patient self-swab)

What's not covered

PCR or antigen testing to detect SARS-CoV-2 is not covered in the following scenarios:

- General screening purposes such as third-party requests (return-to-work screening, public health or surveillance screening, or for travel or camp settings)
- Periodic or serial testing of asymptomatic high-risk individuals (examples include congregate housing and repeat exposure in the workplace)
- Tests that have been denied approval, an Emergency Use Authorization, or laboratories that have not submitted an Emergency Use Authorization request within a reasonable timeframe
- Member transportation to or from testing sites (unless the member meets requirements for ambulance services)

Antibody testing

Serologic testing for the presence of SARS-CoV-2 IgM/IgG antibodies are covered for FDA and Emergency Use Authorization tests (as described above) when ordered by a medical provider at their clinical discretion, following Centers for Disease Control (CDC) or the Department of Public Health (DPH) guidelines.

The CDC released the following guidance. Serologic testing[1]:

- Should not be used to determine immune status in individuals until the presence, durability, and duration of immunity is established
- Can be offered as a method to support diagnosis of acute COVID-19 illness for persons who present late.* For persons who present 9-14 days after the onset of illness, serologic testing can be offered in addition to recommended direct detection methods, such as polymerase chain reaction
- Should be offered as a method to help establish a diagnosis when patients present with late complications of COVID-19 illness, such as multisystem inflammatory syndrome in children

* Detection of specific antibody in serum, plasma, or whole blood that indicates new or recent infection provides presumptive laboratory evidence of COVID-19 illness according to the Council of State and Territorial Epidemiologists (CSTE) interim case definition for COVID-19.

Serologic testing for the presence of antibodies is **not covered** for general screening purposes such as:

- Eligibility to donate plasma
- Third-party requests (return-to-work screening, public health or surveillance screening, or for travel or camp settings)

[1] Serologic testing for the presence of antibodies is not recommended per current CDC guidance. May 23, 2020

Medicare HMO Blue℠ and Medicare PPO Blue℠ Members

Viral testing

The use of reverse transcription-polymerase chain reaction (RT-PCR) or antigen testing to detect the presence of SARS-CoV-2 for a diagnosis of COVID-19 infection is covered for FDA-approved tests when ordered by any healthcare professional authorized under state law.

Antibody testing

Serologic testing for the presence of antibodies for known or suspected current or prior COVID-19 infection is covered for FDA-approved tests when ordered by any healthcare professional authorized under state law.

Resources:

- See the COVID-19 Temporary payment policy for codes and effective dates
- FDA list of approved tests
- Coverage article: What you should know about COVID-19 tests

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