

Medicare Administrative Contractor (MAC) COVID-19 Test Pricing

May 19, 2020

On March 5 and February 13, CMS announced new Healthcare Common Procedure Coding System (HCPCS) codes for healthcare providers and laboratories to test patients for SARS-CoV2. Starting in April, laboratories performing the test can bill Medicare and other health insurers for services that occurred after February 4, 2020, using the newly created HCPCS code (U0001). This code is only to be used for the tests developed by the Centers for Disease Control and Prevention (CDC). Laboratories performing non-CDC laboratory tests for SARS-CoV-2/2019-nCoV (COVID-19) can bill for them using a different HCPCS code (U0002). Additionally, the American Medical Association (AMA) created CPT code 87635 for infectious agent detection by nucleic acid tests on March 13, 2020 as well as CPT codes 86769 and 86328 for serology tests on April 10, 2020. Laboratories performing these tests may bill Medicare for services that occurred after their respective effective dates.

Local Medicare Administrative Contractors (MACs) are responsible for developing the payment amount for claims they receive for these newly created HCPCS codes in their respective jurisdictions until Medicare establishes national payment rates. The payment amounts are identified below. As with other laboratory tests, there is generally no beneficiary cost sharing under Original Medicare.

Note: For dates of service on or after April 14, 2020, Medicare pays \$100 for laboratory tests for the detection of SARS-CoV-2 or the diagnosis of the virus that causes COVID-19 making use of high throughput technologies using:

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.

Neither HCPCS code U0003 nor U0004 should be used for tests that detect COVID-19 antibodies.

The Medicare payment rate for these HCPCS codes was established by [CMS-Ruling 2020-1-R](#); they do not appear in the chart below.

MAC Jurisdiction	MAC States/Territories	U0001 Test Price	U0002 Test Price	87635 Test Price	86769 Test Price	86328 Test Price
J6 – NGS	Illinois, Minnesota, Wisconsin	\$35.91	\$51.31	\$51.31	\$42.13	\$45.23
JK – NGS	Connecticut, New York, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont	\$35.91	\$51.31	\$51.31	\$42.13	\$45.23
JH – Novitas	Arkansas, Colorado, New Mexico, Oklahoma, Texas Louisiana, Mississippi	\$35.92	\$51.31	\$51.31	\$42.13	\$45.23
JL – Novitas	Delaware, District of Columbia, Maryland, New Jersey, Pennsylvania; Part B services include Arlington and Fairfax counties in VA, and the city of	\$35.92	\$51.31	\$51.31	\$42.13	\$45.23
JN – FCSO	Florida, Puerto Rico, U.S. Virgin Islands	\$35.92	\$51.31	\$51.31	\$42.13	\$45.23
JJ–Palmetto	Alabama, Georgia, Tennessee	\$35.91	\$51.31	\$51.31	\$42.13	\$45.23
JM–Palmetto	North Carolina, South Carolina, Virginia, West Virginia	\$35.91	\$51.31	\$51.31	\$42.13	\$45.23
JE -- Noridian	California, Hawaii, Nevada, American Samoa, Guam, Northern Mariana Islands	\$35.91	\$51.31	\$51.31	\$42.13	\$45.23
JF – Noridian	Alaska, Arizona, Idaho, Montana, North Dakota, Oregon, South Dakota, Utah, Washington, Wyoming	\$35.91	\$51.31	\$51.31	\$42.13	\$45.23
J5 – WPS	Iowa, Kansas, Missouri, Nebraska	\$35.92	\$51.31	\$51.31	\$42.13	\$45.23
J8 – WPS	Indiana, Michigan	\$35.92	\$51.31	\$51.31	\$42.13	\$45.23
J15 – CGS	Kentucky, Ohio	\$35.92	\$51.31	\$51.31	\$42.13	\$45.23