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April 13, 2020

The MMS will continue to monitor developments related to the coronavirus (COVID-19) and the response by state and federal agencies. For current information, including updates from the NEJM, visit the dedicated page on the MMS website: massmed.org/covid-19.

As a reminder, physicians may continue to email questions to the MMS for assistance. For information on developments related to the COVID-19 response and resources available from the state and federal agencies, send questions to dph@mms.org. For assistance with practice management and sustainability, telemedicine, and payer relations, send questions to [pprc@mms.org](mailto:pprac@mms.org).

Educational Resources

Join the conversation: “Telemedicine amid COVID-19”

The AMA kicked off a virtual discussion focused on telemedicine amid COVID-19, where the community will have the opportunity to ask questions and engage with experts and physicians from across the country to learn what is working well for them. This discussion is designed to share best practices and the latest policy and payment updates to support physicians and practices in expediting the implementation of telemedicine. Join the conversation by [clicking here](#).

Practice Management

Updated COVID-19 coding and guidance

A revision to code 86318, and the addition of two codes, are effective April 10, 2020 for use as the industry-standard when reporting of novel coronavirus antibody tests.

Category I/pathology and laboratory

- Coronavirus (SARS-CoV-2): [Long descriptors \(PDF\)](#)
- Coronavirus (SARS-CoV-2): [Medium descriptors \(PDF\)](#)
- Coronavirus (SARS-CoV-2): [Short descriptors \(PDF\)](#)

CPT® Assistant provides guidance for new codes

- Download the April 10, 2020 CPT [Assistant guide \(PDF\)](#)

Coding advice and testing guides

- [Quick reference flow chart for CPT reporting for COVID-19 testing \(PDF\) 04/06](#)
- [Coding scenarios and how to apply best coding practices \(PDF\) 04/03](#)

COVID-19 Frequently Asked Questions (FAQs) on Medicare Fee-for-Service (FFS) billing

The FAQs in this document include information about physician services, home health, payment for specimen collection for purposes of COVID-19 testing, diagnostic laboratory services, hospital services, ambulance services, rural health clinics, federally qualified health centers, and telehealth. The policies set out in this FAQ are effective for the duration of the public health emergency unless superseded by future legislation. To learn more, [click here](#).

Using cost-sharing modifier when cost-sharing is waived

The Centers for Medicare and Medicaid Services now waives cost-sharing (coinsurance and deductible amounts) under Medicare Part B for Medicare patients using certain COVID-19 testing services. For services furnished on March 18, 2020 and through the end of the public health emergency, outpatient providers, physicians, and others who bill Medicare for Part B services, under the specific payment systems outlined in the [April 7](#) message, should use the **CS modifier** on applicable claim lines. This is done to identify the service as subject to the cost-sharing waiver for COVID-19 testing services and to get 100% of the Medicare-approved amount. Additionally, they should not charge Medicare patients any co-insurance and/or deductible amounts for those services.

Government Guidelines

Applications open for FCC telehealth funding program

Applications open today (April 13) for the Federal Communications Commission's (FCC) new [\\$200 million program](#) to help fund telehealth programs for qualifying providers during the COVID-19 pandemic. Interested health care providers must complete several steps to apply for funding through the COVID-19 Telehealth Program, including: (1) obtain an eligibility determination from the Universal Service Administrative Company (USAC); (2) obtain an FCC Registration Number (FRN); and (3) register with System for Award Management. This [public notice from the FCC](#) provides guidance on how to apply.

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