

Coverage for Covid-19 Antibody Testing for FDA approved, medically necessary treatment during the outbreak period.
The information below is being provided to help clients gain access to these services

Carrier	Guideline
Aetna	<p>FDA approved testing is covered when medically necessary. Member cost share is waived when administered through an in-network provider. Test must be consistent with CDC guidance and at the direction of a doctor. Non-FDA approved tests will not be covered. Testing must be prescribed / referred by a physician.</p> <p>https://cvshealth.com/covid-19</p>
BCBSTX	<p>FDA approved testing is covered when medically necessary. Member cost share is waived when administered through an in-network provider. Test must be consistent with CDC guidance and at the direction of a doctor. Non-FDA approved tests will not be covered. Testing must be prescribed / referred by a physician.</p> <p>COVID-19 Antibodies Testing Codes:</p> <ul style="list-style-type: none"> • 86318 (revised to indicate immunoassay for infectious antibodies; single-step method) • 86328 (new for COVID-19; single method) • 86769 (new for COVID-19; multiple-step method) <p>https://www.bcbstx.com/provider/covid-19-preparedness.html</p>
BS&W	<p>FDA approved testing is covered when medically necessary. Member cost share is waived when administered through an in-network provider. Test must be consistent with CDC guidance and at the direction of a doctor. Non-FDA approved tests will not be covered. Testing must be prescribed / referred by a physician.</p> <p>BS&W coverage documents and policies provide that they reimburse providers for medically necessary tests and providers would be required to document and be able to provide medical records to support their billing. An employer's screening of all employees does not amount to a medically necessary test.</p> <p>https://www.swhp.org/</p>
Cigna	<p>FDA approved testing is covered when medically necessary. Member cost share is waived when administered through an in-network provider. Test must be consistent with CDC guidance and at the direction of a doctor. Non-FDA approved tests will not be covered. If a member opts to do "walk-in" testing and pays cash for an antibody test, it is not covered. Testing must be prescribed / referred by a physician.</p> <p>https://www.cigna.com/coronavirus/employers</p>
Humana	<p>FDA approved testing is covered when medically necessary. Member cost share is waived when administered through an in-network provider. Test must be consistent with CDC guidance and at the direction of a doctor. Non-FDA approved tests will not be covered. If a member opts to do "walk-in" testing and pays cash for an antibody test, it is not covered. Testing must be prescribed / referred by a physician.</p> <p>For additional questions you may call 1-800-592-3005 or email COVIDquestions@humana.com</p>
National General	<p>FDA approved testing is covered when medically necessary. Member cost share is waived when administered through an in-network provider. Test must be consistent with CDC guidance and at the direction of a doctor. Non-FDA approved tests will not be covered.</p>
Additional Information	<p>Per guidance from the Centers for Medicare and Medicaid Services (CMS), the Department of Labor and the Department of the Treasury, all Commercial and Medicaid plans must cover serological (antibody) testing with no cost-sharing. The requirements for coverage of tests and related services are in effect until the HHS determines that a public health emergency no longer exists. For more detail on COVID-19 coding and guidance, refer to the American Medical Association website.</p> <p>https://www.ama-assn.org/practice-management/cpt/covid-19-coding-and-guidance</p>

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