

# ForwardHealth **ALERT**

Wisconsin serving you



**TO**

All Providers, HMOs and Other Managed Care Programs

**REGARDING**

New COVID-19-Related Diagnosis Codes Available for Claims Submission Effective January 1, 2021

## **New COVID-19-Related Diagnosis Codes Available for Claims Submission**

As a result of the ongoing COVID-19 federal public health emergency, the Centers for Disease Control and Prevention is implementing additions to the International Classification of Diseases, 10th Revision. These new codes are intended to identify conditions that result from COVID-19.

The following new codes are effective for dates of service on and after January 1, 2021:

- Z11.52 (Encounter for screening for COVID-19)
- Z20.822 (Contact with and [suspected] exposure to COVID-19)
- Z86.16 (Personal history of COVID-19)
- M35.81 (Multisystem inflammatory syndrome [MIS])
- M35.89 (Other specified systemic involvement of connective tissue)
- J12.82 (Pneumonia due to coronavirus disease 2019)

## **Member Copay Exemption for New COVID-19-Related Diagnosis Codes**

Providers must not collect copays from members for any services in which the new COVID-19-related diagnosis codes are submitted. These copay exemptions are in addition to the exemption allowed for diagnosis code U07.1 (2019-nCoV Acute Respiratory Disease), as communicated in the June 2020 ForwardHealth Update (2020-26), titled "[Member Copay Exemption for COVID-19 Laboratory Testing, Laboratory Testing-Related Services, and All COVID-19-Related Treatment Services.](#)"

This off-cycle update is unprecedented and is an exception to the code-setting process established by the Health Insurance Portability and Accountability Act of 1996. ForwardHealth is complying with the Health Insurance Portability and Accountability Act of 1996 and implementing the new COVID-19-related diagnosis codes to be available for claims submission for dates of service on and after January 1, 2021.