

## Report on Medicare Compliance Volume 29, Number 17. May 04, 2020 CS Modifier: To Waive Cost Sharing, E/M Must Result In COVID-19 Test; CMS Adds Code

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By Nina Youngstrom

When a patient comes to the emergency room with symptoms of the coronavirus, the physician evaluates the patient and orders a lab test. But something goes wrong with the specimen, and it's not processed. That's lousy for a sick patient, but it doesn't matter for purposes of the cost-sharing waiver, which is in effect until the end of the COVID-19 public health emergency. The hospital is still permitted to bill Medicare for an evaluation and management (E/M) service with a CS modifier because the E/M service gave rise to the COVID-19 test.

"The E/M needs to result in an order for the test, but the E/M and the lab test charge don't necessarily need to be on the same claim," said Chris Anusbigian, a specialist senior manager with Deloitte & Touche in Detroit. The CS modifier for the Part B copay waiver is attached to the related E/M, observation or other service and can be billed separately from COVID-19 lab tests, which are 100% covered. The patient is off the hook for cost sharing.

In a new development, CMS has put an end to beneficiary cost sharing for hospital outpatient visits that result in a COVID-19 test. The April 30 interim final rule<sup>[1]</sup> (see story, p. 1)<sup>[2]</sup> created a new HCPCS code (C9803) for "hospital outpatient clinic visit specimen collection for severe acute respiratory syndrome coronavirus 2 (sars-cov-2) (coronavirus disease [covid-19]), any specimen source." If the hospital outpatient visit resulted in a test, providers should attach the CS modifier to the claim, Anusbigian said. "That is in addition to the physician E/M services where it was already in place," she added.

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