

# COVID-19 Serology (IgG or IgM) Testing

## I. Policy

COVID-19 Serology (IgG or IgM) testing is a covered benefit under the federal COVID-19 state of emergency and when the test meets the state statutory definition of "medical necessity." UHA must follow both federal and state guidelines and mandates.

#### II. Criteria/Rationale

Serologic testing is complicated. The presence of antibodies to COVID-19 might not confer neutralizing activity. False positive and false negative tests might result in dangerous activities and outcomes. In particular, a false positive or a positive test for a non-neutralizing antibody could result in behavior which would put the patient at extreme risk. False positives may be very common in low prevalence populations.

Accordingly, UHA does not endorse and will not cover tests without FDA standing and insists that the ordering provider be qualified to interpret the results in the context of the clinical situation and the public health milieu.

#### NOTE:

This UHA payment policy is a guide to coverage, the need for prior authorization and other administrative directives. It is not meant to provide instruction in the practice of medicine and it should not deter a provider from expressing his/her judgment.

Even though this payment policy may indicate that a particular service or supply is considered covered, specific provider contract terms and/or member's individual benefit plans may apply, and this policy is not a guarantee of payment. UHA reserves the right to apply this payment policy to all UHA companies and subsidiaries.

UHA understands that opinions about and approaches to clinical problems may vary. Questions concerning medical necessity (see Hawaii Revised Statutes §432E-1.4) are welcome. A provider may request that UHA reconsider the application of the medical necessity criteria in light of any supporting documentation.

## III. Limitations and Exclusions

Population sero-surveys may be conducted by government or other entities. As a reminder, UHA will not pay for a screening provided by another entity which pays for a member's care. For example, UHA will not pay for screenings by the Hawaii Department of Health.

Serology testing is indicated under strict circumstances if one of the following two conditions is met: 1) In the evaluation of a child with post-infectious inflammatory states where an etiology is unclear OR 2) In the evaluation of individuals who have been ill for between 9 and 14 days and a diagnosis must be established using both serology AND routine diagnostic viral testing.

Government agencies and CMS may endorse payment in the course of sero-surverys or in specific populations for administrative decisions which would not meet Hawaii's statutes or regulations.

#### IV. Administrative Guidelines

A. CPT codes are covered when and only when they meet the statutory definition of "medical necessity."

CPT Code	Description
86328	Immunoassay for infectious agent antibody(ies), qualitative or semiquantitative, single step method (eg, reagent strip); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19])
86769	Antibody; severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19])

B. The application of testing and therapies in COVID-19 is subject to reconsideration in the current environment. Policies relating to coverage may change and providers are encouraged to contact UHA's Healthcare Services Department with general or case specific questions.

## V. Policy History

Policy Number: MPP-0131-200501 Current Effective Date: 8/14/2020

**Original Document Effective Date:** 05/01/2020

Previous Revision Dates: N/A PAC Approved Date: N/A

### References:

https://www.ama-assn.org/system/files/2020-04/cpt-assistant-guide-coronavirus-april-2020.pdf