



AmeriHealth Caritas[™]
District of Columbia

To:	All AmeriHealth Caritas DC Providers
Date:	April 8, 2020
Subject:	NEW Guidance Concerning COVID-19 Diagnosis Coding

COVID-19 is affecting all aspects of healthcare and has even led the Centers for Disease Control and Prevention (CDC) to take the unprecedented step of introducing a new code, outside of its usual time cycle, which negates the code introduced just weeks ago.

Usually, new ICD codes are introduced to healthcare after months of deliberation and as a set of dozens of new codes. But the coronavirus is proving to be anything but usual for physicians and other healthcare providers.

Starting on April 1, 2020, healthcare professionals will use U07.1 for confirmed COVID-19 cases. The CDC recommendations from February 20 are superseded by this update. This is a change from the earlier guidance and is “unprecedented,” according to the CDC, to introduce the code by itself outside of its usual update cycle. The CDC said that given the national emergency and the urgent need to capture reporting of COVID-19 in claims and surveillance data, the new code was needed. After April 1, physicians should not use B97.29 (other coronavirus as the cause of diseases classified elsewhere).

The first ICD-10 direction is to use an additional code to identify pneumonia or other manifestations. That tells the practice to use U07.1 as the first listed diagnosis for a patient with confirmed COVID-19. Then, add an additional diagnosis for pneumonia or condition, or symptom.

Here are some examples:

Pneumonia, confirmed as due to COVID-19

- U07.1 COVID-19
- J12.89: other viral pneumonia

Acute bronchitis, confirmed as due to COVID-19

- U07.1 COVID-19
- J20.8: acute bronchitis due to other specified organisms

There are also three "Excludes1" notes. This designation means "not coded here." The code should never be used at the same time as the code listed above it. That is, do not use U07.1 with:

- Coronavirus infection, unspecified (B34.2)
- Coronavirus as the cause of diseases classified to other chapters (B97.2-)
- Severe acute respiratory syndrome [SARS], unspecified (J12.81)



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The availability of testing for COVID-19 is increasing in some areas. If the physician has not confirmed the condition as being due to this new coronavirus, do not use U07.1. Use the condition (pneumonia, bronchitis, or symptom, or symptoms such as cough, fever, shortness of breath) in the first position.

If the patient has been exposed to someone who is confirmed to have had COVID-19, use Z20.828: contact with and (suspected) exposure to other viral communicable diseases.

If the COVID-19 virus is suspected but testing does not confirm that the patient has the disease, use the confirmed diagnosis such as bronchitis, or assignment symptom such as cough, and add Z03.818 (encounter for observation for suspected exposure to other biological agents ruled out).

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