Service	Type	Codes	Type	Modifier	POS	Diag Code	Cost Share Waived	Par/Npar
Telehealth	LiveHealth Online (LHO)	99422, 90834, 99204, 99213	Prof	Not required	Any	Any	COVID identified (eff 7/1/21)	TIN 541237939 only
	Telephone (audio only)	99441, 99442, 99443, 98966, 98967, 98968	Prof	Not required	Any	Any	No copay (eff 7/1/21)	Par/Npar
	Telehealth (Video and Audio)	99421, 99422, 99423, 98970, 98971, 98972	Prof	Not required	Any	Any	COVID identified (eff 7/1/21)	Par/Npar
		Medicare virtual check ins G2010, G2012	Prof	Not required	Any	Any	COVID identified (eff 7/1/21)	Medicare
		Revenue code 780	Inst	Not required		Any	COVID identified (eff 7/1/21)	Par/Npar
		Any	Prof	Not required	02	Any	COVID identified (eff 7/1/21)	Par/Npar
		Any	Prof	95, GQ, GT, 93 (eff 1/1/22)	Any	Any	COVID identified (eff 7/1/21)	Par/Npar
Testing	Laboratory services	C9803, U0001, U0002, U0003, U0004, U0005 (eff 1/1/21), 86328, 86408 (eff 8/10/20), 86409 (eff 8/10/20), 86413 (eff 9/8/20), 86769, 87635, 87426, 87428 (eff 11/10/20), 87913 (eff 2/21/22), 0224U, 0226U (eff 8/10/20) - COVID specific labs G2023, G2024 - COVID specific specimen collection	Inst/Prof	as appropriate	Any	Any	All	Par/Npar
		eff 10/6/20 - 87636, 87637, 87811, 0240U, 0241U	Inst/Prof	as appropriate	Any	Any	All	Par/Npar

		Pass through billing for COVID testing, same codes as above	Inst/Prof	90	Any	Any	All	Par/Npar
	Monoclonal antibody treatment	Bamlanivimab Q0239, M0239, Q0245, M0245, M0246, M0247, M0248 Regenron Q0243, M0243, Q0244, M0244 Sotrovimab M0247, M0248, Q0247 Rev 771	Inst/Prof	as appropriate	Any	COVID Dx's	COVID identified	Par/Npar
	Monoclonal antibody pre-exposure prophylaxis	Tixagevimab and Cilgavimab Q0220, M0220, M0221 (eff 12/8/21)	Inst/Prof	as appropriate	Any	Any	All	Par/Npar

Treatment								
	Vaccine	0001A, 0002A, 0003A (eff 8/12/21) 0004A (eff 9/22/21), 0011A, 0012A, 0013A (eff 8/12/21), 0021A, 0022A, 0031A, 0034A (eff 10/20/21), 0051A (eff 10/29/21), 0052A (eff 10/29/21), 0053A (eff 10/29/21), 0054A (eff 10/29/21), 0064A (eff 10/20/21), 0071A (eff 10/29/21), 0072A (eff 10/29/21), 0073A (eff 1/3/22), 0094A (eff 3/29/22), 91300, 91301, 91302, 91303, 91305 (eff 10/29/21) 91307, 91309 (eff 3/29/22), M0201 (eff 6/8/21); Rev 771 Dentists must use medical codes if submitting to medical plan	Inst/Prof	as appropriate	Any	Any	All	Par/Npar
	Professional	Any	Prof	as appropriate	Any	COVID Dx's	COVID identified	Par/Npar
		Any	Prof	CS	Any	Any	COVID identified	Par/Npar
		99072 (eff 9/8/20)	Prof	as appropriate	11, 20	Any	All	Par/Npar
	Outpatient	Any	Inst	as appropriate	22	COVID Dx's	COVID identified	Par/Npar
		Any	Inst	CS	22	Any	COVID identified	Par/Npar
	Inpatient	Any	Inst	as appropriate	21	COVID	COVID identified	Par/Npar

CARE VISITS		
Professional claim POS 21	Professional claims: U07.1 (3/1/20), J12.82, M35.81, Z20.822 (eff 1/1/21), B94.8 (eff 9/1/21) is primary diagnosis or CS modifier - waive line level cost shares	
Professional claim any other POS	Professional claims: U07.1, Z03.818, Z20.828 (3/1/20), J12.82, M35.81, Z20.822 (eff 1/1/21), B94.8 (eff 9/1/21) is primary diagnosis or CS modifier - waive line level cost shares	

Any facility outpatient claim	U07.1, Z03.818, Z20.828 (3/1/20), J12.82, M35.81, Z20.822 (eff 1/1/21), B94.8 (eff 9/1/21) is the primary diagnosis - waive cost share at claim level When U07.1, Z03.818, Z20.828 (3/1/20), J12.82, M35.81, Z20.822 (eff 1/1/21), B94.8 (eff 9/1/21) is reported in other than the primary position and the first position dx matches qualifying dx list - waive cost shares at claim level Otherwise, waive cost shares at the line level if CS modifier is billed for the line	QAULIFYING DX LIST: A4189, A419, I2699, J00, J0100, J0110, J0190, J020, J028, J029, J0300, J060, J069, J09X1, J09X2, J1008, J1100, J101, J111, J1281, J1289, J129, J1520, J15211, J15212, J155, J157, J159, J168, J181, J81.1, J188, J189, J208, J209, J210, J218, J219, J22, J36, J40, J440, J441, J449, J4520, J4521, J4531, J4540, J4541, J4551, J45901, J45909, J45998, J705, J80, J81, J82, J8410, J84114, J84116, J849, J95811, J95812, J9600, J9601, J9602, J9620, J9621, J9690, J9691, J982, J984, J988, K529, N170, N178, N179, O98511, O98512, O98513, O9852, O9853, R05 (obsolete 9/30/21), R051 (eff 10/1/21), R0600, R0602, R0603, R0609, R0902, R509
TREATMENT		

Any facility inpatient claim	U07.1 (3/1/20), J12.82, M35.81, Z20.822 (eff 1/1/21), B94.8 (eff 9/1/21) is the primary diagnosis - waive cost share at claim level When U07.1 (3/1/20), J12.82, M35.81, Z20.822 (eff 1/1/21), B94.8 (eff 9/1/21) is reported in other than the primary position and the first position dx matches qualifying dx list - waive cost shares at claim level. *The admitting diag is considered the Primary Diag. Review I-9 to verify Admitting Diag is on the list.	QAULIFYING DX LIST: A4189, A419, I2699, J00, J0100, J0110, J0190, J020, J028, J029, J0300, J060, J069, J09X1, J09X2, J1008, J1100, J101, J111, J1281, J1289, J129, J1520, J15211, J15212, J155, J157, J159, J168, J181, J81.1, J188, J189, J208, J209, J210, J218, J219, J22, J36, J40, J440, J441, J449, J4520, J4521, J4531, J4540, J4541, J4551, J45901, J45909, J45998, J705, J80, J81, J82, J8410, J84114, J84116, J849, J95811, J95812, J9600, J9601, J9602, J9620, J9621, J9690, J9691, J982, J984, J988, K529, N170, N178, N179, O98511, O98512, O98513, O9852, O9853, R05 (obsolete 9/30/21), R051 (eff 10/1/21), R0600, R0602, R0603, R0609, R0902, R509