

AMENDMENT

THIS AMENDMENT ("Amendment") is effective March 15, 2020 ("Effective Date"), by and between Aetna Network Services LLC, on behalf of itself and its Affiliates (hereinafter referred to as "Company") and Hospital (hereinafter referred to as "Hospital").

WHEREAS, Company (directly or through its Affiliate(s), including but not limited to Aetna Health Inc.) and Hospital have entered into one or more network participation agreement(s) for Commercial Health and Medicare products (collectively, the "Agreement"), for the provision of access to health care services to Members;

WHEREAS, the United States Secretary of Health and Human Services (HHS) determined, pursuant to section 564 of the Federal Food, Drug, and Cosmetic (FD&C) Act, that there is a public health emergency involving the novel coronavirus SARS-CoV-2, which causes the illness COVID-19 and that circumstances exist justifying the authorization of emergency use of in vitro diagnostics for detection and/or diagnosis of COVID-19;

WHEREAS, Hospital may (i) collect the COVID-19 specimen and send the sample to an independent or reference laboratory ("Specimen Handling"); or (ii) perform its own COVID-19 test ("COVID Testing"), provided that it is certified to perform high-complexity testing under the Clinical Laboratory Improvement Amendments (CLIA), where applicable has notified the FDA that it has validated its own COVID-19 test and has started patient testing, and is otherwise following the guidance set forth in the Food and Drug Administration (FDA)'s Policy for Diagnostics Testing in Laboratories Certified to Perform High-Complexity Testing under CLIA prior to Emergency Use Authorization for Coronavirus Disease-2019 during the Public Health Emergency (the "Guidance");

WHEREAS, in response to the public health emergency issued on January 31, 2020 and the national emergency issued on March 13, 2020, the Agreement is amended to revise the applicable service and rate schedule(s) (collectively, the "Rate Schedule") to provide payment for: (i) Specimen Handling that otherwise would not be compensated due to industry standard bundling policies; and (ii) COVID Testing at rates that are based on the CMS reimbursement rates announced on March 12, 2020;

NOW, THEREFORE, in consideration of the mutual covenants and promises stated herein and in the Agreement, the Parties agree to be legally bound as follows:

1. The Parties shall comply with CMS coding guidelines for COVID-19 laboratory diagnostic testing. The Parties acknowledge that CMS has adopted two CPT codes, (U0001) and (U0002), for COVID-19 testing, and the American Medical Association (AMA) has adopted CPT code 87635 for the description noted below. In connection with Specimen Handling and COVID Testing, rates for CPT codes 99000 and 99001 shall be as set forth below and Company's standard bundling policies will not apply in such circumstances. As such, the Rate Schedule of the Agreement is hereby revised, as follows, to add the following codes and rates with respect to the products identified below, to the extent Hospital is participating in such products under the Agreement:

Product Category	Code	Description	Rate
Medicare	U0001	2019 Novel Coronavirus (2019-nCoV) Real-Time RT-PCR Diagnostic Panel should be used when specimens are sent to the CDC and CDC-approved local/state health department laboratories.	100% Medicare Allowable
	U0002	2019-nCoV Coronavirus, SARS-CoV-2/2019-nCoV (COVID-19), any technique, multiple types or subtypes (includes all targets), non-CDC should be used when specimens are sent to commercial laboratories, e.g. Quest or LabCorp, and not to the CDC or CDC-approved local/state health department laboratories.	100% Medicare Allowable

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	87635	Infectious agent detection by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) [COVID-19], amplified probe technique.	100% Medicare Allowable
	CPT 99000	Handling and/or conveyance of specimen for transfer from the physician's office to a laboratory	100% Medicare Allowable
	CPT 99001	Handling and/or conveyance of specimen for transfer from the patient in other than a physician's office to a laboratory (distance may be indicated)	100% Medicare Allowable

2. The Parties agree that Company may update the Agreement immediately upon written notice to Hospital to add any additional codes for testing COVID-19 and/or SARS-CoV-2 upon publication of such codes by CMS and/or the American Medical Association (AMA).
3. The Parties agree that with respect to Medicare products, any new codes added pursuant to paragraph 2 above shall be priced at the Medicare Allowable percentage set forth in the Agreement.
4. All other terms and provisions of the Agreement not amended hereby shall remain in full force and effect. In the event of any inconsistency between the terms of this Amendment and the Agreement, the terms of this Amendment shall govern and control.

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sshhouse@ohiocountyhospital.com

Authenticated by aetna.com Valid Signature

From: pylesl1@aetna.com
To: SShouse@ohiocountyhospital.com
Sent: Mar 30, 2020 12:19:41 PM EDT
Subject: [SEND SECURE] Aetna COVID-19 Amendment for Ohio County Hospital
Attached: Aetna COVID-19 Medicare Hospital Amendment 03.15.2020.pdf (175 kb)
 Aetna COVID-19 Amendment letter 03.15.2020.pdf (101 kb)

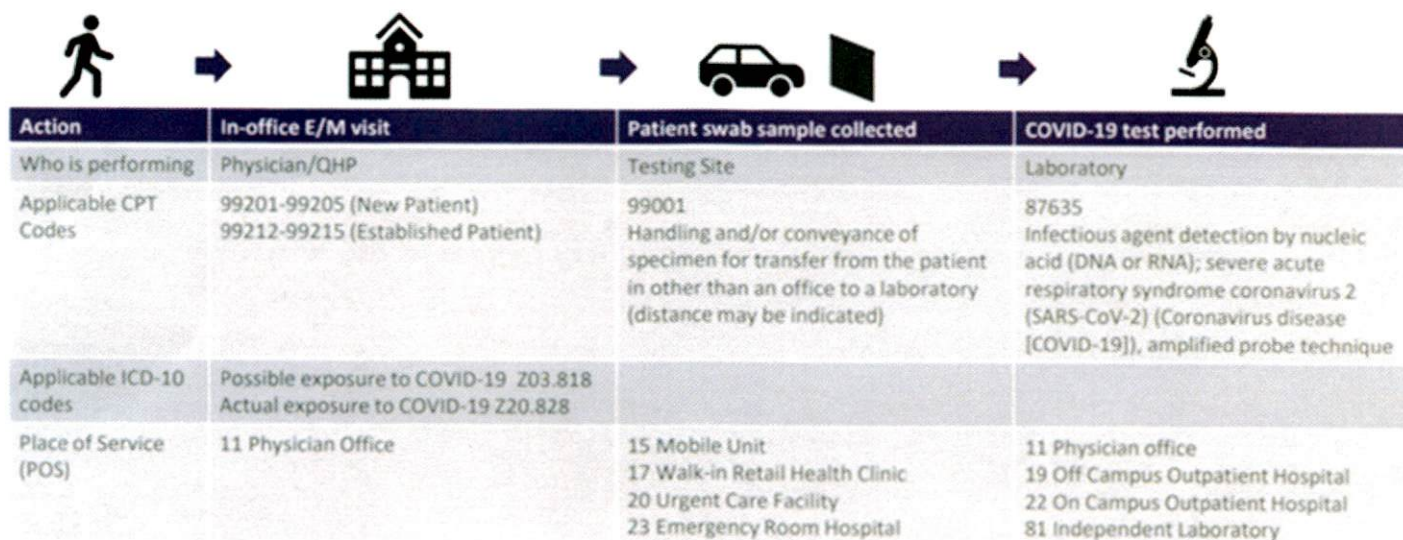
Hello Ms. Shouse,

My name is Lydia Pyles and I've been assigned to service Ohio County Hospital. Enclosed is a hospital Amendment for the COVID-19 testing and Specimen collection which includes additional reimbursement rates for 99000/99001. These are the codes being used for the swab only (collection and handling of the specimen) to support you if you are setting up screening sites / drive-thru testing. The amendment includes reimbursement for the following codes used for COVID19 testing:

- HCPCS U0001: For the laboratory test developed by the CDC.
- HCPCS U0002: For the laboratory test developed by entities other than the CDC.
- CPT 87635: For lab testing for severe acute respiratory syndrome coronavirus 2 (SARS-2-CoV-2).
- 99000: For handling and/or conveyance of specimen for transfer from the physician's office to a laboratory
- 99001: For handling and/or conveyance of specimen for transfer from the patient in other than a physician's office to a laboratory (distance may be indicated)

Our guidance for using 99001 is aligned with recent AMA special coding advice related to COVID-19 (see diagram below and link for more info: <https://www.ama-assn.org/system/files/2020-03/covid-19-coding-advice.pdf>).

Scenario 2: Patient comes to office for E/M visit re: COVID-19 and is directed to a testing site



There is no need to sign the amendment as we know you are working diligently to respond to the COVID19 emergency and take care of patients. Please refer to the "What You Need to Know About the Coronavirus (COVID-19) - Aetna Providers" FAQs on Aetna.com for additional information.

Thanks,

Lydia J. Pyles, MHA

Network Manager, KY Network

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Louisville, KY 40223



Our new provider website is here! Log-in or register today! Go to www.Availity.com/aetnaproviders

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Thank you. Aetna

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Angie Meoli
SVP, Network Strategy and Provider Experience
1425 Union Meeting Road
Blue Bell, PA 19422

Dear Hospital Administrator:

We value our partnership, especially during these unprecedented times, and are striving to serve you and the millions of patients who rely on us for their health care coverage. Aetna was one of the first payers to announce COVID-19 diagnostic testing and telemedicine visits with no out-of-pocket costs or cost sharing for Aetna members, and we're working to introduce more programs that help deliver timely and seamless access to care.

Aetna has been monitoring actions taken by the Centers for Medicare & Medicaid Services (CMS) and other national and local resources to establish and update coding guidelines and reimbursement amounts. Effective now, hospitals should use the newly created HCPCS codes or new CPT code when billing for COVID-19 testing. If your facility will be performing COVID-19 lab testing or collecting swabs for distribution to national labs approved for COVID-19 testing, you should bill with the following codes:

- HCPCS U0001: For the laboratory test developed by the CDC.
- HCPCS U0002: For the laboratory test developed by entities other than the CDC.
- CPT 87635: For lab testing for severe acute respiratory syndrome coronavirus 2 (SARS-2-CoV-2).
- 99000: For handling and/or conveyance of specimen for transfer from the physician's office to a laboratory
- 99001: For handling and/or conveyance of specimen for transfer from the patient in other than a physician's office to a laboratory (distance may be indicated)

In order to minimize disruption of care, in alignment with actions taken by our federal and state governmental authorities during this state of national emergency, we're issuing the enclosed amendment to your participation agreement, which will be effective on March 15, 2020. The reimbursement rates for COVID-19 testing are based on rates recently announced by CMS.

We're here to support you during this difficult time. Please refer to the "What You Need to Know About the Coronavirus (COVID-19) - Aetna Providers" FAQs on [Aetna.com](https://www.aetna.com) for additional information for providers. This page will be continually updated with information as it becomes available to help you care for your patients. You don't need to sign the enclosed amendment, but please keep a copy for your records.

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Let's work together to eliminate barriers and provide a clear path to care for our members, your patients. Thank you for your continued partnership.

Sincerely,

Angie Meoli

SVP, Network Strategy and Provider Experience

Enclosure: Amendment

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