

# Claim Picture: Coronavirus Disease (COVID-19)

as of March 4, 2020

HM STOP LOSS  
MANAGED CARE REINSURANCE

## Background

**Virus Name:** SARS-CoV-2

**Disease Name:** COVID-19

**Description:** According to the Centers for Disease Control and Prevention, Coronavirus disease 2019 (COVID-19) is a respiratory illness that can spread from person to person. The virus that causes COVID-19 is a novel coronavirus that was first identified during an investigation into an outbreak in Wuhan, China.

## Protection

No vaccines are currently available. As with most viral diseases, there is nothing available to “cure” COVID-19. All therapies are symptomatic management.

### The Key Is Prevention:

- Isolation while under observation for potential exposure
  - CDC currently recommends four negative tests prior to discontinuing transmission-based precautions
  - It is unclear how long it takes for the virus to no longer be contagious
- Avoid touching your face and mouth
- Respiratory etiquette
  - Covering a cough or sneeze with a tissue, then throwing the tissue in the trash
- Frequent hand hygiene
  - Use soap and water, washing for at least 20 seconds
  - If using hand sanitizer, follow with soap and water
  - Reduce greetings such as a hand shake
  - Reduce the need to touch common surfaces such as handrails or door knobs
- If cases are identified locally, choose disposable dining products, when available
  - Plastic utensils vs. metal
  - Your own water bottle vs. public/commercial glassware

## Population Risk

The population at greatest risk for complex outcomes includes those with underlying conditions such as:

- Age greater than 65 years
- Heart disease
- Lung disease (like asthma)
- Cancer
- Diabetes
- HIV or AIDS
- Patients with history of organ transplantation
- Pregnancy

The mortality risk is ~3.5%.

## Common Clinical Picture for Mild Symptoms

Mild symptoms are expected two to 14 days after exposure to COVID-19 and include:

- Fever (reported or measured)
- Aches/pains
- Fatigue
- Lower respiratory tract symptoms including dry cough and/or shortness of breath

## Possible Treatment Regimens for Mild Cases

Treatment regimens are similar to those used for MERS-CoV and SARS-CoV. Anticipate use of:

### Over the Counter (OTC) Medications:

- Pain reliever – acetaminophen (Tylenol®)
- Expectorant – guaifenesin (Mucinex®)

### Prescription Medications:

- Albuterol
- Antivirals have been shown to be ineffective in most cases, but there is expectation of an increase in the use of drugs that treat Influenza. Medications that are currently FDA-approved for the management of the Influenza Virus are reporting as global drug shortages, including:
  - Oseltamivir (Tamiflu®): Has been used 89.9% of Chinese cases
  - Zanamivir (Relenza®)
  - Peramivir (Rapivab®)
  - Baloxavir (Xofluza®)
  - Laninamivir (not currently FDA approved, in phase III clinical trials)
- Interferon
- Antivirals added to baricitinib
  - Lopinavir/ritonavir (Kaletra®) and remdesivir (not currently FDA approved, in phase III clinical trials)

## CDC Coding Guidance for Mild Cases

ICD-10 Code	ICD-10 Descriptor
Cough	R05
Shortness of Breath	R06.02
Fever, unspecified	R50.9

There may be nominal claims for mild illness from office, clinic or ER/ED, followed by prescriptions and monitoring.

According to the data released by China, approximately 16% of cases are serious illnesses.

## Common Clinical Picture for Serious Symptoms

- Mild symptoms progress to pneumonia or Acute Respiratory Distress Syndrome (ARDS) in **approximately 8 days**.
- The total **hospitalization** for ARDS is an average of 47 days (25 of the days in the ICU) **estimated at \$700,000 a month**.
- 13% of ARDS survivors require **permanent dialysis estimated at \$60,000 a month**.

**Extracorporeal membrane oxygenation (ECMO) has been required in almost 25% of Chinese patients with serious illness.**

## Possible Treatment Regimens for Serious Cases

Serious cases also are addressed with the medications used in the management of mild symptoms. They also may require a stay in the ICU.

- 25% to 30% of Chinese patients have been reported to require an average 10-day ICU stay with mechanical ventilation
- 62% of Chinese patients were still hospitalized at 30 days
- 34% of Chinese patients were discharged home

As a point of reference, currently in the U.S., on average, 7.6% of Influenza cases become classified as “serious.”

## CDC Coding Guidance for Serious Cases

Diagnosis	Primary ICD-10 Code	ICD-10 Descriptor	Secondary ICD-10 Code	Secondary ICD-10 Descriptor
<b>Pneumonia</b>	J12.89	Other viral pneumonia	B97.29	Other coronavirus disease classified elsewhere
<b>Acute Bronchitis</b>	J20.8	Acute bronchitis due to other specified organisms	B97.29	Other coronavirus disease classified elsewhere
<b>Lower Respiratory Infection</b>	J22	Unspecified acute lower respiratory infection	B97.29	Other coronavirus disease classified elsewhere
<b>ARDS</b>	J80	Acute respiratory distress syndrome	B97.29	Other coronavirus disease classified elsewhere
<b>Possible exposure to COVID-19</b>	Z03.818*	Encounter for observation for suspected exposure to other biological agents ruled out		
<b>Actual exposure to COVID-19</b>	Z20.828*	Contact with and (suspected) exposure to other viral communicable diseases		

\*These ICD 10 codes are not limited to COVID-19 and should not alone identify COVID-19 claims.

## Long-Term Treatment

**Following the most serious cases, long-term treatment may include:**

- Permanent dialysis
- Medications to manage the damaged organ(s)
- Transplants of the lungs, heart and/or kidney

**Please contact HM Insurance Group with any notifications of COVID-19, so we can support your process and empower you with knowledge of the most recent trends.**

This is an informational document only and is not intended to provide legal advice, tax advice or advice on your health plan's content and design. This document is not meant to address federal or other applicable laws for health plans. This document only includes HM's suggested best practices for certain provisions in a health plan. You should consult with your legal counsel and/or a qualified plan design professional.

**References:** "What You Need to Know about Coronavirus Disease 2019 (COVID-19), Centers for Disease Control and Prevention Factsheet, March 3, 2020; ICD-10-CM Official Coding Guidelines – Supplement, "Coding encounters related to COVID-19 Coronavirus Outbreak," effective Feb 20, 2020; CDC Health Alert Network, CDCHAN-00428, "Update and interim guidance on outbreak of coronavirus disease 2019 (COVID-19)," Feb 28, 2020; Wang D, Hu B, Hu C, et al., "Clinical characteristics of 138 hospitalized patients with 2019 novel coronavirus-infected pneumonia in Wuhan, China," JAMA, Feb 7, 2020; Stebbing et al., "COVID-19: combining antiviral and anti-inflammatory treatments," The Lancet, ID, Feb 27, 2020; Papazian et al., Ann Intensive Care, "Review: Formal guidelines: management of acute respiratory distress syndrome," 2019; Faron Pharmaceuticals, "Information on ARDS," <https://www.faron.com/patients-and-physicians/information-ards>, accessed March 4, 2020.

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