

**Louisiana Medicaid  
COVID-19 Laboratory Testing Fee Schedule**

| <b>TOS</b> | <b>Procedure Code</b> | <b>Code Description</b>   | <b>Fee</b> | <b>Effective Date of Service</b> | <b>End Date of Service</b> |
|------------|-----------------------|---|------------|----------------------------------|----------------------------|
| 03         | U0002                 | COVID-19 Lab Test Non-CDC   | \$51.33    | 03/05/2020                       | 04/19/2020                 |
| 03         | 87635                 | Infectious agent detection by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), amplified probe technique | \$51.33    | 04/20/2020                       | TBD                        |
|            |                       |   |            |                                  |                            |
| 30         | U0002                 | COVID-19 Lab Test Non-CDC   | \$51.33    | 03/05/2020                       | 04/19/2020                 |
| 30         | 87635                 | Infectious agent detection by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), amplified probe technique | \$51.33    | 04/20/2020                       | TBD                        |
|            |                       |   |            |                                  |                            |
| 37         | U0002                 | COVID-19 Lab Test Non-CDC   | \$51.33    | 03/05/2020                       | 04/19/2020                 |
| 37         | 87635                 | Infectious agent detection by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), amplified probe technique | \$51.33    | 04/20/2020                       | TBD                        |
|            |                       |   |            |                                  |                            |
| 39         | U0002                 | COVID-19 Lab Test Non-CDC   | \$51.33    | 03/05/2020                       | 04/19/2020                 |
| 39         | 87635                 | Infectious agent detection by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), amplified probe technique | \$51.33    | 04/20/2020                       | TBD                        |
|            |                       |   |            |                                  |                            |
| 40         | U0002                 | COVID-19 Lab Test Non-CDC   | \$53.04    | 03/05/2020                       | 04/19/2020                 |
| 40         | 87635                 | Infectious agent detection by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), amplified probe technique | \$53.04    | 04/20/2020                       | TBD                        |

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| TOS (Type of Service): File from which claims are paid. |   |  |  |  |
|---|---|--|--|--|
| 03  | Physician, physician-owned labs and independent laboratory services.<br><small>(Nurse Practitioners, Clinical Nurse Specialists, Certified Nurse Midwives, and Physician Assistants are reimbursed at 80% of this fee.)</small> |  |  |  |
| 30  | Acute Care Outpatient Hospital  |  |  |  |
| 37  | Small Rural Outpatient Hospital   |  |  |  |
| 39  | State Hospitals Outpatient Hospital   |  |  |  |
| 40  | Sole Community Outpatient Hospital  |  |  |  |
|   |   |  |  |  |