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NOTE: Revised July 30, 2020 for LOINC code change highlighted below.

SARS-CoV-2 (COVID-19) Client Communication

New Data Collection and Laboratory Reporting Requirements

Issue Date: July 27, 2020 **Effective Date: August 1, 2020**

Dear Valued Clients,

On June 4, 2020, the U.S Department of Health and Human Services (HHS) published new requirements for patient data collection and reporting for COVID-19 test results.

The following patient data is required to be collected by all laboratories performing COVID-19 testing:

- Full Name
- Date of Birth
- Gender
- **Race**
- **Ethnicity**
- **Address including zip code**

In addition, the following **questions need to be answered for each patient** at the time of test ordering:

1. **First Test?** Yes | No | Unknown
2. **Employed in healthcare?** Yes | No | Unknown
3. **Symptomatic as defined by CDC?** Yes | No | Unknown
    a. If Yes, then Date of Symptom Onset mm/dd/yy
    b. If No or Unknown, then NA (Non Applicable)
4. **Hospitalized?** Yes | No | Unknown
5. **ICU?** Yes | No | Unknown
6. **Resident in congregate care setting?** Yes | No | Unknown
   (Resident in congregate care setting - including nursing homes, residential care for people with intellectual and development disabilities, psychiatric treatment facilities, group homes, board and care homes, homeless shelter, foster care or other settings.)
7. **Pregnant?** Yes | No | Unknown

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These new reporting requirements are intended to enhance the ability to monitor disease prevalence and trends by initiating epidemiologic case investigations and assisting with contact tracing. The new guidance standardizes reporting for public health entities and provides them access to comprehensive and real-time data in their response to COVID-19.

ProMedica Pathology Laboratories has modified its paper and electronic COVID-19 Requisition to comply with these requirements. A copy of the paper requisition for COVID-19 testing is attached for reference. If you use an EMR to order COVID-19 tests, we will be contacting your office to update the electronic interface to accommodate these requirements; namely in the form of "Ask at Order Entry" questions. **For your convenience, we have provided the EMR code mappings as charted below. Please share this information with your EMR vendor as soon as possible for updating your laboratory interface.**

Also provided is a Patient History Form, copy attached. The Patient History Form may be used as a supplement to our standard requisition, or for any electronic order, in which the "Ask at Order Entry" questions are not yet added to the COVID-19 test codes within the interface.

The deadline to comply with these new requirements is August 1, 2020. Therefore, beginning that date, we appreciate your support and cooperation to supply this important information on all COVID-19 test orders.

Additional Frequently Asked Questions:
https://www.hhs.gov/sites/default/files/laboratory-data-reporting-for-covid-19-testing-faqs.pdf

COVID-19 Laboratory Data Reporting Requirement – CARES Act:
https://www.hhs.gov/sites/default/files/covid-19-laboratory-data-reporting-guidance.pdf

EMR Code Mapping:

Orderable Code	Test Name	Retired Test Codes	Replacement Code	Replacement Test Codes	Revised Result Field	Specimen Requirements Handling Instructions	Expected Turn Around	Reference Ranges	CPT Change	Other
39429	SARS-COV-2 (COVID-19) BY RT-PCR				X					
39432	SARS-COV-2 IGG (EUROIMMUN)				X					
39433	SARS-COV-2 IGG (ABBOTT)				X					
39434	SARS-COV-2 ANTIBODIES (ROCHE)				X					

Thank you for supporting ProMedica Pathology Laboratories.

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Replacement Test Codes								
		EMR Interface Mapping		Other				
Orderable Code	Test Name	Result Code	Result Name (Test Components)	AOE	Reportable	LOINC	UOM	CPT
39429	SARS-COV-2 (COVID-19) BY RT-PCR	394298	SARS-CoV-2 PCR Result	N	Y	94500-6		87635 (alt code: U0003)
		394297	SOURCE	N	Y	31208-2		
		394001	FIRST TEST	Y	Y	95417-2		
		394002	HEALTHCARE EMPLOYEE	Y	Y	95418-0		
		394003	SYMPTOMATIC	Y	Y	95419-8		
		394004	SYMPTOM ONSET DATE	Y	Y	11368-8		
		394005	HOSPITALIZED	Y	Y	77974-4		
		394006	ICU	Y	Y	95420-6		
		394007	CONGREGATE RESIDENT	Y	Y	95421-4		
		394008	PREGNANT	Y	Y	82810-3		
39432	SARS-COV-2 IGG (EUROIMMUN)	394323	SARS-COV-2 INTERP	N	Y	94563-4		86769
		394321	SARS-COV-2 IGG	N	Y	94505-5		
		394001	FIRST TEST	Y	Y	95417-2		
		394002	HEALTHCARE EMPLOYEE	Y	Y	95418-0		
		394003	SYMPTOMATIC	Y	Y	95419-8		
		394004	SYMPTOM ONSET DATE	Y	Y	11368-8		
		394005	HOSPITALIZED	Y	Y	77974-4		
		394006	ICU	Y	Y	95420-6		
		394007	CONGREGATE RESIDENT	Y	Y	95421-4		
		394008	PREGNANT	Y	Y	82810-3		
39433	SARS-COV-2 IGG (ABBOTT)	394333	SARS-CoV-2 IgG	N	Y	94507-1		86769
		394001	FIRST TEST	Y	Y	95417-2		
		394002	HEALTHCARE EMPLOYEE	Y	Y	95418-0		
		394003	SYMPTOMATIC	Y	Y	95419-8		
		394004	SYMPTOM ONSET DATE	Y	Y	11368-8		
		394005	HOSPITALIZED	Y	Y	77974-4		
		394006	ICU	Y	Y	95420-6		
		394007	CONGREGATE RESIDENT	Y	Y	95421-4		
		394008	PREGNANT	Y	Y	82810-3		
39434	SARS-COV-2 ANTIBODIES (ROCHE)	394341	SARS-COV-2 ABS INTERP	N	Y			86769
		394342	SARS-COV-2 ABS INDEX	N	Y	94762-2		
		394001	FIRST TEST	Y	Y	95417-2		
		394002	HEALTHCARE EMPLOYEE	Y	Y	95418-0		
		394003	SYMPTOMATIC	Y	Y	95419-8		
		394004	SYMPTOM ONSET DATE	Y	Y	11368-8		
		394005	HOSPITALIZED	Y	Y	77974-4		
		394006	ICU	Y	Y	95420-6		
		394007	CONGREGATE RESIDENT	Y	Y	95421-4		
		394008	PREGNANT	Y	Y	82810-3		

If you have any questions, please contact our Customer Service Department at 419-291-4414 / 833-960-0241 or your Account Executive. Thank you.

Thank you for supporting ProMedica Pathology Laboratories.