Building an Episode of COVID-19 Care in Claims Data

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Questions to Answer

- ▶ How do I find cases of COVID-19?

- ▶ What diagnosis codes should I look for?

- ▶ What analyses can I perform?

- ▶ How do I build a care episode related to COVID-19?

- ▶ Ideas for analyses with other data sets?

Finding the Cases

- A new diagnosis code specific to COVID-19 is expected to be released in October.

- Until then, the CDC recommends using B97.29, Other coronavirus as the cause of diseases classified elsewhere in conjunction with the code for the reason for the encounter (e.g. pneumonia, acute bronchitis).

Three Cautions

The CDC recommends only using B97.29 code for confirmed cases. Suspected, possible or probable cases are to be reported only with codes explaining the reason for the encounter (e.g. pneumonia, acute bronchitis).

1. Considering the lack of widely available testing and testing delays, this may result in some related care not including the B97.29 code.
2. Some providers may still use B97.29 for unconfirmed cases.
3. Patients may be more likely to seek medical care for minor coughs, bronchitis and fevers that are unrelated to COVID-19 due to concerns about COVID. Similarly, some patients with mild cases of COVID-19 will never seek care and as such, not be documented in claims.

Codes to Explore

Therefore, we're recommending analysts review potentially related diagnoses **with and without the B97.29 code**

- Cough, R05
- Fever, unspecified R50.9
- Shortness of breath, R06.02
- Pneumonia, J12.89, Other viral pneumonia
- Acute Bronchitis, J20.8
- Bronchitis, Not Otherwise Specified, J40,
- Lower Respiratory Infection, J22
- Respiratory infection, Not Otherwise Specified, J98.8
- ARDS due to COVID-19, J80 *(only code specific to COVID-19)*

Possible Claims-Based Analyses

- Medical and Rx cost and utilization related to the care episode

- Trends or commonalities among patients needing more intensive care and services (e.g. age, gender, pre-existing comorbidities)

- Future care patterns: Are there long-term impacts of a COVID-19 diagnosis?

- Increase in use of telehealth services
  - AMA guide
  - FHC blog post

Building a COVID-19 Episode

1. Define your index event

2. Define the span of your episode

3. Define inclusions and exclusions

Index Event

1. Health care utilization related to one of the diagnosis codes above

<u>or</u>

2. COVID diagnostic testing (87635 RNA test, U0001 CDC PCR test, U0002 Non-CDC PCR test)

Episode Span

1. Anchored by a particular service (i.e. hospitalization), sometimes including a period of time prior and/or after

<u>or</u>

2. A length of time (e.g. 30 days, 60 days, 90 days, 1 year)

Analytical question should inform episode span.

Inclusions and Exclusions

Which diagnoses codes should do you include?

- Index event diagnosis codes are a great start

- The longer your episode, the more difficult to determine appropriate inclusions and exclusions.

Three Tips for Defining Inclusions and Exclusions

1. **Research**: New information is coming out each day on the course of this disease and the care needed to support patients

2. **Descriptive statistics within your own data**: What trends in utilization do you see in patients with one of the index events, particularly those with a confirmed case?

3. **Stakeholder input**: Develop a draft, share to gain input and develop a process to adjust over time; stay humble, don't be afraid to ask for help

More information

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