December 18, 2020

RE: Claim Submission for COVID-19 Exposure in the Workplace

Dear Provider:

This letter’s purpose is to respond to requests for guidance related to submission for claims for COVID-19-related testing, diagnosis, and treatment services provided to a patient who may have caught COVID-19 in the course of their employment. As explained more fully below, you should not submit these claims to Blue Cross and Blue Shield of Vermont (BCBSVT) for members that are either front-line workers or non-front-line workers identified by recent Vermont law (described below). Instead, these claims should be submitted to the patient’s worker’s compensation carrier.


The first presumption is that, in the case of a front-line worker, disability or death resulting from COVID-19 is compensable under worker’s compensation policies provided that the front-line worker receives

- a positive laboratory test for COVID-19 between March 1, 2020, and January 15, 2021, or

Act 150 defines “front-line workers” as individuals who are employed as:

- Firefighters;
- certified law enforcement officers;
- emergency medical and volunteer personnel;
- workers in a health care facility or in an institution or office where health care services are provided by licensed healthcare professionals;
- correctional officers;
- workers in a long-term care facility or residential care facility;
- childcare providers permitted to provide childcare to the children of other front-line workers;
- home health care workers or personal care attendants;

• workers in a morgue, funeral establishment, or crematory facility; and
• workers performing services that place them at a similarly elevated risk of being exposed to or contracting COVID-19 as the occupations listed above.

Please note that the law does not explicitly include teachers or those working in schools as front-line workers. For these patients, we encourage you to ask how they may have contracted COVID-19.

To overcome the presumption for front-line workers, a worker’s compensation insurer must demonstrate that the infection is due to non-work exposure or risk factors.

The second presumption is available for other workers that have a positive test and have either a documented exposure to COVID-19 while working or are able to show that they performed services at a location where others present had COVID-19 at the time or tested positive within 14 days. This presumption can be defeated if the worker’s compensation carrier can demonstrate the infection was due to non-work-related exposure or risk factors OR by demonstrating the employee’s place of employment complied with applicable state and federal guidance for workplaces.²

Worker’s compensation insurance provides workers with access to lost wages, as well as covering medical bills, and it is important that people have access to these benefits if they are entitled to them. As a reminder, work-related injuries are an exclusion of BCBSVT member certificates.

This means that you should not submit to BCBSVT claims for COVID-19-related testing, diagnosis, and treatment for members that are either front-line workers or non-front-line workers that fit within the parameters of the second presumption above. Such claims should be submitted to your patient’s worker’s compensation insurer for appropriate disposition.

If you suspect, but you are not certain the COVID-19-related services are work-related, you are not required to submit a claim to BCBSVT. There may be circumstances, however, when you wish to submit a claim to BCBSVT. For instance, you may believe you will receive other information indicating the injury is not-work related and no claim will be made to the worker’s compensation carrier, but there is risk this information may not be received within the BCBSVT 180-day timely filing window. In these circumstances, be sure to indicate on the claim form that the injury is a work-related injury or condition. Please note that the claim will be denied, but if you subsequently learn from a source other than a denial or rejection from a worker’s compensation carrier that the service is for an injury that is not work-related, but the window for timely filing has passed, we will use the date the original claim was submitted for determining benefits.

If a claim is rejected or denied by the worker’s compensation carrier, it can then be submitted to us for consideration of benefits. Please include the worker’s compensation carrier’s explanation of processing as timely filing will be 180 days from the other carrier’s processing, not the date of service.

If you have any questions regarding this notice, please feel free to contact your provider relations consultant via email at providerrelations@bcbsvt.com or by phone at (888) 449-0443 option 1. Business hours are Monday through Friday from 8 a.m. to 4:30 p.m., except holidays.

Sincerely,

Lou McLaren
Director, Provider Services