



# NH HEALTHY FAMILIES TAKING ADDITIONAL STEPS TO PROTECT MEMBERS' HEALTH AMID COVID-19 OUTBREAK

As we continue to learn more and address the novel coronavirus and its resulting illness COVID-19, we want to update you on important coverage information around its testing, treatment and care.

NH Healthy Families will be extending coverage for COVID-19. This important step is being taken in partnership with other major insurers and with the support of the White House Coronavirus Task Force.

We intend to cover COVID-19 testing and screening services for NH Healthy Families and Ambetter members and are waiving all associated member cost share amounts for COVID-19 testing and screening. To ensure that our members receive the care they need as quickly as possible, NH Healthy Families will not require prior authorization, prior certification, prior notification or step therapy protocols for these services.

This coverage extension follows the Centers for Medicare & Medicaid Services' (CMS) guidance that coronavirus tests will be fully covered without cost-sharing for Medicare and Medicaid plans, a decision that NH Healthy Families fully supports for our members covered under these programs. The specific guidance includes:

- Waiving cost-sharing for COVID-19 tests
- Waiving cost-sharing for COVID-19 treatments in doctor's offices or emergency rooms and services delivered via telehealth
- Removing prior authorizations requirements when related to COVID-19
- Waiving prescription refill limits
- Relaxing restrictions on home or mail delivery of prescription drugs
- Expanding access to certain telehealth services
- Extension of provider appeals and routine related auditing notification timeframes by 60 days
- No new payment policies introduced for a minimum of 30 days

## **HCPCS Codes for COVID-19 Testing Services**

- Effective April 1, 2020, providers performing the COVID-19 test can begin billing NH Healthy Families for services that occurred after February 4, 2020, using the following newly created HCPCS codes:
  - o **U0001** For CDC developed tests only 2019-nCoV Real-Time RT-PCR Diagnostic Panel

- U0002 For all other commercially available tests 2019 nCoV Real-Time RT-PCR Diagnostic Panel
- Code (87635) effective March 13, 2020 and issued as "the industry standard for reporting of novel coronavirus tests across the nation's health care system"

*Please note*: It is not yet clear if CMS will rescind the more general HCPCS Code U0002 for non-CDC laboratory tests that the Medicare claims processing system is scheduled to begin accepting starting April 1, 2020.

- All cost share (co-pay, coinsurance, and deductible) will be waived across all products for any claim billed with the new COVID-19 testing codes
- NH Healthy Families has configured its systems to apply \$0 member liability for those claims submitted utilizing these new COVID-19 testing codes
- In addition to cost share, authorization requirements will be waived for any claim that is received with these specified codes
- Providers billing with these codes will not be limited by provider type and can be both participating and non-participating
- Adjudication of claims is currently planned for the first week of April 2020

## **Diagnosis Codes for COVID-19**

- Effective April 1,2020, providers may utilize the following ICD-10-CM diagnosis code when a member has a confirmed diagnosis of COVID-19:
  - o U07.1 COVID-19, virus identified
- Confirmed diagnosis of COVID-19 prior to April 1, 2020:
  - o **B97.29** Other coronavirus as the cause of diseases classified elsewhere
- For members suspected of COVID-19, please utilize the following ICD-10-CM diagnosis codes:
  - z20.828 Contact with and (suspected) exposure to other viral communicable diseases
  - o **Z03.818** Exposure to COVID-19 and the virus is ruled out after evaluation

## Reimbursement Rates for COVID-19 Testing Services for All Provider Types

- NH Healthy Families is complying with the rates published on 3/12/20 by CMS:
  - o U0001 = \$35.91
  - O U0002 = \$51.31
  - o **87635 = \$51.31**
- Any additional rates will be determined by further CMS and/or state-specific guidance and communicated when available

### **Telemedicine Services**

In order to ensure that all NH Healthy Families and Ambetter from NH Healthy Families members have needed access to care, we are increasing the scope and scale of our use of telehealth services for all products for the duration of the COVID-19 emergency. These coverage expansions will benefit not only members who have contracted or been exposed to the novel coronavirus, but also those members who need to seek care unrelated to COVID-19 and wish to avoid clinical settings and other public spaces.

NH Healthy Families will be following the NH Medicaid Telehealth Informational Bulletin COVID-19 Preparedness and Response guidance that was issued on April 2, 2020.

Effective immediately, we will be amending the Medicaid Telemedicine Payment Policy (NH.PP.14) in accordance with Emergency Order #8 Pursuant to Executive Order 2020-04:

- All medical and behavioral health providers will be allowed to perform Telemedicine services through video and audio, audio only, or other electronic media as outlined
- There will be no restrictions on the originating site, where the member resides during the Telemedicine interaction
- Telemedicine services will be reimbursed at the same rates as when the services are conducted via traditional methods
- Continuation of zero member liability (copays, cost sharing, etc.) for care delivered via telehealth\*
- Any services that can be delivered virtually will be eligible for telehealth coverage
- All prior authorization requirements for telehealth services will be lifted for dates of service from March 17, 2020 through June 30, 2020
- Telehealth services may be delivered by providers with any connection technology to ensure patient access to care\*\*

\*Please note: For Health Savings Account (HSA)-Qualified plans, IRS guidance is pending as to deductible application requirements for telehealth/telemedicine related services.

\*\*Providers should follow state and federal guidelines regarding performance of telehealth services including permitted modalities.

Providers who have delivered care via telehealth should reflect it on their claim form by following standard telehealth billing protocols in their state.

The current policy located in the link below dictates how to bill for telemedicine services.

https://www.nhhealthyfamilies.com/content/dam/centene/NH%20Healthy%20Families/Medicaid/pdfs/Telemedicine-Payment-Policy-NH-PP-14-20200210.pdf

In order to report Telemedicine services, claims should be billed as follows:

- Utilize Place of Service (POS) code as follows:
  - o "02" Telehealth
- Utilize modifiers, if applicable, as follows:
  - "GT" Via interactive audio and video telecommunication systems
  - "G0" Telehealth services for diagnosis, evaluation, or treatment, of symptoms of an acute stroke
- For UB-04 billing, please ensure the "GT" modifier is appended to the CPT/HCPCS code billed on the claim to indicate telemedicine

This amended policy will remain in place until **April 30, 2020** in conjunction with CMS proposed regulations with an option to extend. Emergency Order #8 Pursuant to Executive Order 2020-04 can be located in the link below.

https://www.dhhs.nh.gov/ombp/medicaid/documents/telehealth-covid19.pdf

NH Healthy Families has been working in close partnership with state, local and federal authorities to serve and protect patients during the COVID-19 outbreak, including ensuring that its members and providers have the most up-to-date information to protect themselves and their families from the virus. We remain committed to protecting our communities during the outbreak.

To ensure you are keeping your environment safe from the coronavirus, please refer to the CDC guidelines below.

https://www.cdc.gov/coronavirus/2019-ncov/downloads/workplace-school-and-home-guidance.pdf

Please contact Provider Services at 1-866-769-3085 with any questions.

Sincerely,

NH Healthy Families
Ambetter from NH Healthy Families