

MMHPI COVID-19 Regulatory & Reimbursement Newsletter

Letter to Providers #12: State and Federal Updates – June 12, 2020

With federal and state health care policies changing rapidly in response to COVID-19, the Meadows Mental Health Policy Institute (MMHPI) is issuing *COVID-19 Regulatory & Reimbursement Newsletters* to support providers as they navigate this new terrain. In this newsletter, we highlight several recent changes to regulatory and reimbursement rules. We will be distributing these newsletters on a regular basis during the pandemic to provide information on federal, state, and local regulatory and reimbursement changes.

These newsletters, along with additional information on mental health resources during a pandemic, are posted here: <https://www.texasstateofmind.org/covid-19/>. If you would like to have additional organizations added to our distribution list or have follow up questions on the content, please email Catie Hilbelink at chilbelink@mmhpi.org.

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Texas Updates

Updated Intermediate Care Facilities COVID-19 Response Plan

Date	June 8, 2020
Summary	The Texas Health and Human Services Commission (HHSC) updated the COVID-19 response plan for intermediate care facilities for individuals with an intellectual disability or related conditions (ICF/IIDs). The document provides guidance to ICFs/IID on response actions in the event of a COVID-19 exposure.
Link	https://hhs.texas.gov/sites/default/files/documents/services/health/coronavirus-covid-19/icf-covid-19-plan.pdf

Auto-Renewals of Individual Plans of Care

Date	June 8, 2020
Summary	<p>The client assignment and registration (CARE) system will be processing auto-renewals for individual plans of care (IPC) that expire in June 2020, one week before the IPC expiration date. If a service plan team meeting was held to renew the IPC, program providers will be able to enter renewed IPCs up until one week before the expiration of the current IPC. No action in CARE is needed by the program provider or the Local Intellectual and Developmental Disability Authority (LIDDA) to process the auto-renewal of the IPC. Program providers must continue to work with the LIDDA service coordinators to make changes or corrections on IPCs that have been auto renewed in CARE.</p> <p>This guidance applies to:</p> <ul style="list-style-type: none"> • Home and Community-based Services (HCS) program providers • LIDDA service coordinators • Texas Home Living (TxHML) program providers
Link	https://hhs.texas.gov/about-hhs/communications-events/news/2020/06/auto-renewals-ipcs-care

Extension of Emergency Rule Related to Issuance of Prescriptions

Date	June 5, 2020
Summary	The Texas Medical Board (TMB) extended the waiver allowing providers to telephonically renew scheduled drugs for patients with chronic pain. The extension was set to expire on June 6, 2020 and has now been extended for another 30 days. This allows for telephone refills of a prescription for chronic pain by a physician with an established chronic pain patient.
Link	http://www.tmb.state.tx.us/dl/BCD2EF6B-186F-C204-1F70-121C07BAB042

Updated Behavioral Health Services Providers COVID-19 FAQs

Date	June 4, 2020
Summary	<p>HHSC updated the COVID-19 related frequently asked questions (FAQs) for behavioral health services providers. New FAQs include:</p> <ul style="list-style-type: none"> • We all have been seeking resources for personal protective equipment (PPE). Has HHSC considered making a large purchase as stock to distribute to local mental health authorities? • How is feedback on future service delivery methods being solicited from communities and clients? • Has HHSC determined when the community mental health grant awardees will be announced? • Are there grant funds to assist with COVID-19 mental health services provided by nonprofit organizations? • Many centers have reported not being able to hire certified family partners because of COVID-19. Will local mental health and behavioral health authorities receive a sanction for not having a certified family partner?
Link	https://hhs.texas.gov/sites/default/files/documents/services/health/behavioral-health-services-covid-faq.pdf

Interest List Reduction and Promoting Independence Slot Releases

Date	June 2, 2020
Summary	<p>Home and Community-based Services (HCS)</p> <p>HHSC is resuming the release of HCS interest list reduction slots starting June 1, 2020. HHSC is continuing releases of HCS promoting independence slots. Local Intellectual and Developmental Disability Authorities (LIDDAs) will request the following HCS promoting independence slots, when appropriate:</p> <ul style="list-style-type: none"> • Crisis diversion • Nursing facility diversion • Young adults aging out of foster care • Nursing facility transition • Nursing facility transition for children • SSLC transition <p>HHSC will continue to monitor the impact of COVID-19 on the release of HCS slots and issue further guidance as needed.</p> <p>Community Living Assistance and Support Services (CLASS)</p> <p>HHSC is resuming the release of CLASS interest list reduction slots starting June 1, 2020. HHSC will continue to monitor the impact of COVID-19 on the release of CLASS slots and issue further guidance as needed. HHSC is permitting CLASS case management agencies (CMAs) and CLASS direct services agencies (DSAs) to complete the following <i>pre-enrollment activities</i> for CLASS enrollments in progress and for new CLASS releases referenced above:</p> <ul style="list-style-type: none"> • in-person or telehealth initial in-home visit; • in-person or telehealth initial Intellectual Disability/Related Condition (ID/RC) assessment; • in-person or telehealth comprehensive nursing assessment; • in-person or telehealth service planning team meeting; and • in-person or telehealth/telephone enrollment individual plan of care (IPC). <p>Deaf Blind with Multiple Disabilities (DBMD)</p> <p>HHSC is continuing to postpone the release of DBMD interest list reduction slots. HHSC is evaluating when to resume the release of DBMD slots and will issue further guidance once available.</p>
Links	<p>HCS: https://apps.hhs.texas.gov/providers/communications/2020/letters/IL2020-27.pdf</p> <p>CLASS and DBMD: https://apps.hhs.texas.gov/providers/communications/2020/letters/IL2020-26.pdf</p>

Coronavirus Testing Codes

Update to “Coronavirus Testing Procedure Codes to Become a Benefit”

Date	June 4, 2020
Summary	Texas Medicaid & Healthcare Partnership (TMHP) posted an update to their article, <i>Coronavirus Testing Procedure Codes to Become a Benefit</i> , which was originally posted on March 16, 2020. The article stated procedure code U0002 is a benefit of Texas Medicaid and the Children with Special Health Care Needs (CSHCN) Services Program for dates of service on or after February 4, 2020. The Centers for Medicare & Medicaid Services (CMS) has categorized procedure code U0002 as a Clinical Laboratory Improvement Amendments (CLIA) waived test. Effective for dates of service on or after March 20, 2020, procedure code U0002 must be submitted with modifier QW.
Link	http://www.tmhp.com/News_Items/2020/06-June/06-04-20%20Update%20to%20Coronavirus%20Testing%20Procedure%20Codes%20to%20Become%20a%20Benefit.pdf

Additional Procedure Codes for Coronavirus Testing for Texas Medicaid

Date	June 4, 2020										
Summary	<p>Additional procedure codes for coronavirus testing are a benefit of Texas Medicaid, effective on or after the following dates of service:</p> <table border="1"> <thead> <tr> <th>Dates of Service</th> <th>Procedure Codes</th> </tr> </thead> <tbody> <tr> <td>March 1, 2020</td> <td>G2023 and G2024</td> </tr> <tr> <td>March 13, 2020</td> <td>87635</td> </tr> <tr> <td>April 10, 2020</td> <td>86328 and 86769</td> </tr> <tr> <td>April 14, 2020</td> <td>U0003 and U0004</td> </tr> </tbody> </table> <p>Note: The new procedure codes will not be reimbursed until expenditures are approved and rates are adopted by Texas Medicaid. Providers must adhere to TMHP standard claims filing deadlines. Providers will be notified of any benefit changes in a future article.</p> <p>Services provided before the expenditures are approved will be denied with an explanation of benefits (EOB) 02008, “This procedure code has been approved as a benefit pending the approval of expenditures. Providers will be notified of the effective dates of service in a future notification if expenditures are approved.” Once expenditures are approved, TMHP will automatically reprocess the affected claims. Providers are not required to appeal the claim unless they are denied for other reasons after claim reprocessing is complete.</p>	Dates of Service	Procedure Codes	March 1, 2020	G2023 and G2024	March 13, 2020	87635	April 10, 2020	86328 and 86769	April 14, 2020	U0003 and U0004
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Modifier Requirement for Procedure Code 87635

Effective for dates of service on or after March 20, 2020, procedure code 87635 must be submitted with modifier QW.

Revised Procedure Code Description

Effective for dates of service on or after April 10, 2020, the description for procedure code 86318 has been revised. Providers must contact the appropriate copyright holder to obtain procedure code descriptions.

Link

http://www.tmhp.com/News_Items/2020/06-June/06-04-20%20Additional%20Procedure%20Codes%20for%20Coronavirus%20Testing%20for%20Texas%20Medicaid.pdf

Expanded Testing in Underserved Communities Disproportionately Impacted by COVID-19**Date**

June 8, 2020

Summary

Governor Abbott announced that the Texas Division of Emergency Management (TDEM) is coordinating with local officials, public health officials, and emergency management offices in cities across the state to identify and rapidly expand COVID-19 testing in underserved and minority communities that have been disproportionately impacted by the virus. TDEM is already working with local officials in Dallas, San Antonio, Houston, El Paso, Abilene, the Rio Grande Valley, the Coastal Bend, Laredo, and Midland-Odessa to identify and establish walk-up and drive-thru testing sites that will meet the needs of each community and is in the process of working with other cities to bring more sites online in the coming days. TDEM is also working with local leaders to expand walk-up and drive-thru testing in urban areas where large-scale protests have taken place.

Link

<https://gov.texas.gov/news/post/governor-abbott-tdem-announce-expanded-testing-in-underserved-communities-disproportionately-impacted-by-covid-19>

Submitting Contract Applications and Contract Information for Access and Eligibility Services – Eligibility Operations Provider Contract Management (AES-EOPCM) Community-based Programs

Date	June 4, 2020
Summary	<p>Due to COVID-19, applicants and current contractors for long-term care programs and services can submit applications and other information by email or fax. For community-based programs enrolled by Access and Eligibility Services – Eligibility Operations Provider Contract Management (AES-EOPCM), submit contract applications and other contract information by fax to 512-206-3979 or email to HHSC Eligibility Operations Provider Contract Management.</p> <p>Click on the links below for each program or service listed to find out how to become a contracted provider for these programs or services:</p> <ul style="list-style-type: none"> • Adult Foster Care • Community Attendant Services • Day Activity Health Services • Emergency Response Services • Family Care • Home-Delivered- Meals • Primary Home Care • Residential Care
Link	https://hhs.texas.gov/about-hhs/communications-events/news/2020/06/submitting-contract-applications-contract-information-aes-eopcm-community-based-programs

COVID-19 Mental Health Crisis Hotline for El Paso and the Permian Basin

Date	June 8, 2020
Summary	<p>Emergence Health Network (EHN), together with the Federal Emergency Management Agency (FEMA) and HHSC, announced the launch of a free COVID-19 Mental Health Support Hotline. Through a grant awarded by FEMA and HHSC, EHN will now offer residents in El Paso and the Permian Basin a new resource to help with emotional concerns related to the pandemic. EHN's counselors are trained in trauma-informed support and recognize a person's emotional health can be affected by disasters, such as the coronavirus pandemic.</p> <p>To speak to an EHN Crisis Counselor, call 915-779-1800.</p>
Link	https://emergencehealthnetwork.org/

Phase 3 Reopening

Date	June 3, 2020
Summary	Governor Abbott announced the third phase of the state's plan to open the economy. Effective immediately, all businesses in Texas will be able to operate at up to 50% capacity, with very limited exceptions.
Link	https://gov.texas.gov/news/post/governor-abbott-announces-phase-iii-to-open-texas

Federal Updates

HHS Announces Provider Relief Fund Payments for Safety Net Hospitals, Medicaid & CHIP Providers

Date	June 9, 2020
Summary	The U.S. Department of Health and Human Services (HHS), through the Health Resources and Services Administration (HRSA), is announcing additional distributions from the Provider Relief Fund to eligible Medicaid and Children's Health Insurance Program (CHIP) providers that participate in state Medicaid and CHIP programs. HHS expects to distribute approximately \$15 billion to eligible providers that participate in state Medicaid and CHIP programs and have not received a payment from the Provider Relief Fund General Allocation. HHS is also announcing the distribution of \$10 billion in Provider Relief Funds to safety net hospitals that serve our most vulnerable citizens. The safety net distribution will occur via direct deposit this week.
Link	https://www.hhs.gov/about/news/2020/06/09/hhs-announces-enhanced-provider-portal-relief-fund-payments-for-safety-net-hospitals-medicaid-chip-providers.html

CARES Act Provider Relief Fund FAQs Updated

Date	June 8, 2020
Summary	<p>The CARES Act Provider Relief Fund FAQs have been updated, including:</p> <p>In order to accept a payment, must the provider have already incurred eligible expenses and losses higher than the Provider Relief Fund payment received? (Added 6/8/2020)</p> <p>No. Providers do not need to be able to prove, at the time they accept a Provider Relief Fund payment, that prior and/or future lost revenues and</p>

increased expenses attributable to COVID-19 (excluding those covered by other sources of reimbursement) meet or exceed their Provider Relief Fund payment. Instead, HHS expects that providers will only use Provider Relief Fund payments for permissible purposes and if, at the conclusion of the pandemic, providers have leftover Provider Relief Fund money that they cannot expend on permissible expenses or losses, then they will return this money to HHS. HHS will provide directions in the future about how to return unused funds. HHS reserves the right to audit Provider Relief Fund recipients in the future and collect any Relief Fund amounts that were used inappropriately.

The Terms and Conditions set forth a list of “statutory provisions” that “also apply” to the Provider Relief Fund payment. Do these requirements apply to any government funding received by the recipient, or only the Provider Relief Fund payment associated with those Terms and Conditions? (Added 6/8/2020)

The “statutory provisions” listed in the Terms and Conditions apply to the Provider Relief Fund payment associated with those Terms and Conditions. Those statutory provisions may also independently apply to other government funding that you receive.

Link

<https://www.hhs.gov/sites/default/files/provider-relief-fund-general-distribution-faqs.pdf>

CMS and CDC Release Guidance for Healthcare Facilities, Group Homes, Direct Service Providers, and Others

Date

June 9, 2020

Summary

CMS released a guide for patients and beneficiaries as they consider their in-person care options. During the height of the pandemic, many healthcare systems and patients postponed non-emergency, in-person care to keep patients and providers safe and to ensure capacity to care for COVID-19 patients. CMS provided these recommendations to ensure that non-emergency healthcare resumes safely and that patients are receiving needed in-person treatment that may have been postponed due to the public health emergency.

The Centers for Disease Control and Prevention (CDC) also released several other new guidance documents, including:

- [Guidance for group homes for individuals with disabilities](#)
- [Guidance for direct service providers](#)
- [Guidance for direct service providers, caregivers, parents, and people with developmental and behavioral disorders](#)

Link | <https://www.cms.gov/files/document/covid-recommendations-reopening-facilities-provide-non-emergent-care.pdf>

CDC Communication Toolkit for Migrants, Refugees, and Other Limited-English-Proficient Populations

Summary | The CDC created a communication toolkit to help public health professionals, health departments, community organizations, and healthcare systems and providers reach populations who may need COVID-19 prevention messaging in their native languages. The toolkit provides:

- Current messaging from a trusted source.
- Information in plain language available for downloading and sharing.
- Translated materials to help communities disseminate messages to a wider audience.

Link | https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/communication-toolkit.html?deliveryName=USCDC_2067-DM30162

FDA COVID-19 Resources for Health Professionals

Summary | The Food and Drug Administration (FDA) has launched a new page dedicated to COVID-19 information specific to health care professionals. The site includes information on several issues, including emergency use authorizations, personal protective equipment, and medical products, including investigational drugs and fraudulent devices.

Link | <https://www.fda.gov/health-professionals/coronavirus-disease-2019-covid-19-resources-health-professionals>

Non-Invasive Monitoring Devices Guidance

Date | June 2020

Summary | The FDA released new guidance that expands, for the duration of the COVID-19 emergency, the availability and capability of non-invasive monitoring devices. This replaces the FDA's March 20, 2020 guidance and includes additional device types and offers more references and standards. Remote devices reduce patient and health care provider contact, ultimately limiting potential COVID-19 exposure.

Link

<https://www.fda.gov/regulatory-information/search-fda-guidance-documents/enforcement-policy-non-invasive-remote-monitoring-devices-used-support-patient-monitoring-during>