

MMHPI COVID-19 Regulatory & Reimbursement Newsletter

Letter to Providers #20: State and Federal Updates – August 7, 2020

With federal and state health care policies changing in response to COVID-19, the Meadows Mental Health Policy Institute (MMHPI) is issuing *COVID-19 Regulatory & Reimbursement Newsletters* to support providers. In these newsletters, we highlight recent changes and extensions to regulatory and reimbursement rules, as well as newly published or updated guidance and answers to frequently asked questions.

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.

Contents

Texas Updates	3
HHSC Updates FAQs for Behavioral Health Providers	3
ICF and HCSSA Providers: HHSC Resumes Survey Activity	3
Assisted Living Facilities: Updated Response Plan	4
Chemical Dependency Treatment Facility Emergency Rules Adopted	4
HCS and TxHmL: HHSC Postpones Implementation of Penalty Rules	4
Healthy Texas Woman and Family Planning Program: Procedure Codes	5
Day Activity and Health Services Providers: Infection Control Checklist	5
Extended Flexibilities	6
Governor Abbot Announcement	6
Medicaid: Multiple Flexibilities	6
Medicaid: Prior Authorizations	7
Long Term Care Providers	8
CSHCN: Telemedicine and Telehealth	9
CSHCN: Signature Requirement	9
CHIP: Co-Payments	10
1915(c) Waivers: Service Coordinators and Case Managers	10
CLASS: Telehealth Guidance	11
CLASS, DBMD, HCS and TxHmL: Eligibility and Care Plan Revisions	11
HCS and TxHmL: Respite and CFC PAS/HAB	12

HCS and TxHmL: In-Home Day Habilitation 13

Healthy Texas Woman and Family Planning Program: Telemedicine and Telehealth 13

FMSAs and CDS Employers: Face to Face Orientations 13

Existing Electronic Visit Verification Users..... 14

Off-Site Location Emergency Rules..... 14

Nonessential Visitor Emergency Rules..... 15

Provider Enrollment Revalidation Due Dates 16

Federal Updates.....16

Provider Relief Fund Deadline Extended..... 16

CMS and CDC Announce Provider Reimbursement Available for Counseling Patients to Self-isolate at Time of COVID-19 Testing..... 17

CMS Announced New Hospital Procedure Codes for Therapeutics..... 18

CMS Announced Policy for Temporary Premium Reductions..... 18

CMS Proposed Expanding Telehealth Benefits Permanently 19

HHS Updated Reporting Guidance 19

HHS Report: Telehealth Utilization..... 19

CDC Updated Guidance for Use of Pooling Procedures 20

Seroprevalence of Antibody of SARS-COV-2 20

Mass Testing in Long-Term Facilities..... 20

Texas Updates

HHSC Updates FAQs for Behavioral Health Providers

Date	July 31, 2020
Summary	<p>The Texas Health and Human Services Commission (HHSC) updated the COVID-19-related frequently asked questions (FAQs) for behavioral health providers with the following:</p> <ul style="list-style-type: none"> • Is it possible to get the Crisis Counseling Program Grant data by specific region? • Where can we find COVID-19 school guidance and resources from the Texas Education Agency? • Can HHSC please provide clarity and guidance on providing and billing peer services done through telephone and telehealth?
Link	https://hhs.texas.gov/sites/default/files/documents/services/health/behavioral-health-services-covid-faq.pdf

ICF and HCSSA Providers: HHSC Resumes Survey Activity

Date	August 4, 2020
Summary	<p>Effective August 4, 2020, the following long-term care survey activity will resume based on provider type:</p> <ul style="list-style-type: none"> • Intermediate care facilities for individuals with intellectual disabilities (ICF/IID) - All survey activity will resume, including recertification surveys for both health and life safety code. All survey activity includes licensure surveys, follow-ups, complaint and incident investigations, and CHOW visits. • Home and community support services agencies (HCSSAs) - All survey activity will resume. This includes licensure surveys, follow-ups, complaint and incident investigations, and CHOW visits. <p>Providers that are past or close to the end of their certification period will be scheduled first.</p>
Link	https://hhs.texas.gov/about-hhs/communications-events/news/2020/08/hhsc-resumes-survey-activity-icf-hcssa-providers

Assisted Living Facilities: Updated Response Plan

Date	August 4, 2020
Summary	HHSC Long-Term Care Regulation has updated the COVID-19 response plan for assisted living facility providers.
Link	https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/provider-portal/long-term-care/covid-response-plan-alf.pdf

Chemical Dependency Treatment Facility Emergency Rules Adopted

Date	July 31, 2020
Summary	HHSC adopted emergency rules for Chemical Dependency Treatment Facility (CDTF) abuse, neglect, and exploitation and nonviolent crisis intervention training requirements in response to COVID-19. GL 20-3007 explains the emergency rule that temporarily permits licensed CDTFs to provide abuse, neglect, and exploitation training and nonviolent crisis intervention training through live, interactive, instructor-led, electronic means, or by face-to-face, in-person training.
Link	https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/provider-portal/facilities-regulation/memos/gl-20-3007.pdf

HCS and TxHmL: HHSC Postpones Implementation of Penalty Rules

Date	July 31, 2020
Summary	Due to COVID-19, HHCS is delaying implementation of the administrative penalty rules for Home and Community-based Services (HCS) and Texas Home Living (TxHmL) providers until January 1, 2021.
Link	https://hhs.texas.gov/about-hhs/communications-events/news/2020/07/hhsc-postpones-implementation-administrative-penalty-rules-hcs-txhtml-providers

Healthy Texas Woman and Family Planning Program: Procedure Codes

Date	July 30, 2020
Summary	Effective for dates of service on or after June 1, 2020, procedure codes 71250 and 71260 for computed tomography (CT) of the chest will be benefits of Healthy Texas Women (HTW) and the Family Planning Program (FPP). Affected claims with dates of service on or after June 1, 2020 may be reprocessed and providers may receive an additional payment. Additional payments will be reflected on remittance and status (R&S) reports.
Link	http://www.tmhp.com/News_Items/2020/07-July/073020%20Procedure%20Codes%2071250%20and%2071260%20To%20Be%20a%20Benefit%20of%20HTW%20and%20FPP.pdf

Day Activity and Health Services Providers: Infection Control Checklist

Date	July 29, 2020
Summary	HHSC Long-Term Care Regulation (LTCR) has developed an infection control checklist tool for Day Activity and Health Services (DAHS) providers. The tool allows DAHS providers to review the effectiveness of their infection control policies when providing services to DAHS clients. LTCR survey staff will use these prompts to conduct infection control focused survey activities. All DAHS providers are encouraged to use the tool when determining whether their infection control policies and procedures prevent and control the spread of infectious and communicable diseases.
Link	https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/providers/long-term-care/dahs-infection-control-checklist.pdf

Extended Flexibilities

Governor Abbot Announcement

Date	July 30, 2020
Summary	<p>Governor Abbott announced that HHSC is extending flexibilities to Medicaid and Children’s Health Insurance Program (CHIP) recipients and providers through October 23, 2020. Flexibilities extended through October 23rd, 2020 include:</p> <ul style="list-style-type: none"> • Appeals and fair hearings: extends timelines for clients to request an appeal fair hearing and allows clients to request an appeal verbally. • Face-to-face requirements: suspends face-to-face service coordination, case management visits, and utilization review home visits for Medicaid clients. All managed care plans must use telehealth for service coordination and service planning to ensure clients are receiving needed services. • Provider enrollment requirements: suspends requirements that out-of-state providers be licensed in the state where they are providing services when they are licensed in another state and allows licensed providers to render services outside of their state of enrollment. • Assessments: extends certain assessments and service plans. • Telemedicine and telehealth: allows certain services to continue to be delivered remotely.
Link	https://gov.texas.gov/news/post/governor-abbott-hhsc-extend-flexibilities-for-medicaid-chip-providers-during-covid-19-response

Medicaid: Multiple Flexibilities

Date	July 30, 2020
Summary	<p>The following Medicaid and CHIP flexibilities have been extended through October 23, 2020, unless the U.S. Secretary of Health and Human Services (HHS) ends the public health emergency earlier. If the public health emergency ends earlier, HHSC will provide additional information.</p> <ul style="list-style-type: none"> • Correction to ‘COVID-19 Guidance: Targeted Case Management Through Remote Delivery’ • Waiver Extension for Durable Medical Equipment Certification and Receipt Form • Claims for Telephone (Audio-Only) Behavioral Health Services • Claims for Telephone (Audio-Only) Medical Services • Federally-Qualified Health Center Reimbursement for Telemedicine (Physician-Delivered) and Telehealth (Non-Physician-Delivered) Services • Rural Health Clinic Reimbursement for Telemedicine and Telehealth Services

- [School Health and Related Services \(SHARS\) Services Provided Through Telemedicine or Telehealth](#)
- [Claims for Telehealth Service for Occupational, Physical, and Speech Therapy](#)
- [Claims for Telephone \(Audio-Only\) Early Childhood Intervention Specialized Skills Training](#)
- [Claims for Telephone \(Audio-Only\) Nutritional Counseling Services](#)
- [Texas Health Steps Checkup Guidance Extended Through July 31, 2020](#)

Link

http://www.tmhp.com/News_Items/2020/07-July/073020%20Multiple%20Medicaid%20COVID-19%20Flexibilities%20Extended%20Through%20October%202023,%202020.pdf

Medicaid: Prior Authorizations

Date	July 31, 2020
Summary	<p>New and Initial Prior Authorizations</p> <p>To help ensure continuity of care during the COVID-19 response, HHSC has directed Texas Medicaid & Healthcare Partnership (TMHP) to move forward with processing new and initial prior authorization requests, including recertification requests, by relaxing document submission timeframes for providers if they are unable to provide certain required documentation during the COVID-19 emergency.</p> <p>This direction will remain in effect until October 23, 2020, unless the U.S. Secretary of Health and Human Services (HHS) ends the public health emergency earlier. If the public health emergency ends earlier, HHSC will provide additional information. This guidance applies to all state plan services, including:</p> <ul style="list-style-type: none"> • Acute care services • Long-term services and supports • Personal assistance services • Personal care services • Community First Choice • Private duty nursing • Day activity and health services • Durable medical equipment and supplies <p>Existing Prior Authorizations</p> <p>To help ensure continuity of care during the COVID-19 (coronavirus) response, HHSC will allow TMHP to extend existing prior authorization requests that are set to expire in August 2020 and until further notice, for 90 days, if providers are unavailable or unable to provide the required documentation on a timely basis due</p>

to a COVID-19 related issue.

A provider may submit an amended request to an existing, extended prior authorization, and TMHP will process the request and override the 90-day extension with required documentation. TMHP may request additional information if it is deemed necessary but will not deny prior authorization requests if providers are unavailable or unable to provide required documentation on a timely basis.

Links

http://www.tmhp.com/News_Items/2020/07-July/073120%20COVID-19%20Guidance%20for%20New%20and%20Initial%20Prior%20Authorizations%20Extended%20to%20October%2023,%202020.pdf

http://www.tmhp.com/News_Items/2020/07-July/073120%20TMHP%20To%20Extend%20Existing%20Prior%20Authorizations%20By%2090%20Days.pdf

Long Term Care Providers

Date	July 30, 2020
Summary	<p>Emergency rules related to COVID-19 screening and visitation in long-term care facilities that were scheduled to expire on July 31, 2020 have been extended. The following rules are extended:</p> <ul style="list-style-type: none"> • Assisted living facilities rule 26 Texas Administrative Code (TAC) §553.45 • Day activity and health services facilities rule 40 TAC §98.65 • Home and community support services agencies rule 26 TAC §558.408 • Intermediate care facilities rule 26 TAC §551.401 • In-patient hospices rule 26 TAC §558.872 • Nursing facilities rule 40 TAC §19.2801 • Prescribed pediatric extended care centers rule 26 TAC §550.212
Links	<p>The extensions take effect on August 1, 2020 and expire on September 29, 2020.</p> <p>http://www.tmhp.com/News_Items/2020/07-July/Emergency%20Rules%20for%20LTC%20Providers%20Extended.pdf</p> <p>https://hhs.texas.gov/about-hhs/communications-events/news/2020/07/emergency-rules-ltc-providers-extended</p>

CSHCN: Telemedicine and Telehealth

Date	July 31, 2020
Summary	<p>HHSC extended the date-of-service for telemedicine (physician-delivered) and telehealth (non-physician-delivered) services for the Children with Special Health Care Needs (CSHCN) services program through October 23, 2020, unless the U.S. Secretary of Health and Human Services ends the public health emergency earlier. HHSC will provide additional information if the public health emergency ends earlier.</p> <p>This is an update to the article titled Update to Date-of-Service Extension for Telemedicine (Physician-Delivered) and Telehealth (Non-Physician-Delivered) Services, which TMHP originally published on June 30, 2020.</p>
Link	http://www.tmhp.com/News_Items/2020/07-July/073120%20Second%20Update%20to%20DOS%20Ext%20for%20Telemedicine%20Physician-Delivered-%20Telehealth%20Non-Phys-DS.pdf

CSHCN: Signature Requirement

Date	August 3, 2020
Summary	<p>HHSC extended the signature requirement waiver for the Children with Special Health Care Needs Services (CSHCN) program through October 23, 2020, unless the U.S. Secretary of Health and Human Services ends the public health emergency earlier. HHSC will provide additional information if the public health emergency ends earlier.</p> <p>This is an update to the article titled Signature Requirement Waiver Extended through July for the CSHCN Services Program Documentation of Receipt Form, which TMHP originally published on June 30, 2020.</p>
Link	http://www.tmhp.com/News_Items/2020/08-August/080320%20Signature%20Requirement%20Waiver%20Extended%20through%20October%2023,%202020-CSHCN%20-Doc-Receipt%20Form.pdf

CHIP: Co-Payments

Date	July 30, 2020
Summary	As part of its continued response to COVID-19 (coronavirus), HHSC will waive Children’s Health Insurance Plan (CHIP) co-payments until further notice. The waiver applies to medical office visit co-payments only. This is an update to the article titled CHIP Co-Payments Waived Through July 31, 2020 , which TMHP originally published on June 29, 2020.
Link	http://www.tmhp.com/News_Items/2020/07-July/073020%20CHIP%20Co-Payments%20Waived%20Until%20Further%20Notice.pdf

1915(c) Waivers: Service Coordinators and Case Managers

Date	July 31, 2020
Summary	<p>In a temporary policy change, fee-for-service Medicaid 1915(c) waiver case managers and service coordinators may suspend face-to-face service coordination visits. HHSC extended this policy change through October 23, 2020, unless the U.S. Secretary of Health and Human Services ends the public health emergency earlier. If the public health emergency ends earlier, HHSC will provide more information.</p> <p>This temporary policy applies to:</p> <ul style="list-style-type: none"> • Community Living Assistance and Support Services (CLASS) • Texas Home Living (TxHmL) • Deaf-Blind with Multiple Disabilities (DBMD) • Home and Community-based Services (HCS) • General Revenue Service Coordinators • Community First Choice (CFC) Service Coordinators • Pre-admission Screening and Resident Review Habilitation Coordinators <p>Case managers, service coordinators, and habilitation coordinators are encouraged to complete visits due through October 23, 2020. These can be done by phone, telehealth, or telemedicine.</p>
Links	<p>http://www.tmhp.com/News_Items/2020/07-July/Update%20to%20COVID-19%20Guidance%20for%20FFS%20Service%20Coordinators%20and%20Case%20Managers_7-31.pdf</p> <p>https://hhs.texas.gov/about-hhs/communications-events/news/2020/07/update-covid-19-guidance-ffs-service-coordinators-case-managers</p>

CLASS: Telehealth Guidance

Date	July 31, 2020
Summary	<p>Community Living Assistance and Support Services (CLASS) telehealth flexibilities, initially effective March 15, 2020, have been extended through October 23, 2020, unless the U.S. Secretary of Health and Human Services ends the COVID-19 public health emergency earlier. If the public health emergency ends earlier, HHSC will provide more information.</p> <p>The following CLASS professional and specialized therapy services are available by telehealth:</p> <ul style="list-style-type: none"> • Physical therapy • Occupational therapy • Speech and language pathology • Recreational therapy • Music therapy • Behavior support • Dietary services • Cognitive rehabilitation therapy <p>Acceptable telehealth formats are synchronous audiovisual interaction or asynchronous store and forward technology. Use these with synchronous audio interaction between the client and the distant site provider.</p>
Links	<p>http://www.tmhp.com/News_Items/2020/07-July/COVID-19%20Update%20to%20Telehealth%20Guidance%20on%20CLASS%20Professional%20and%20Specialized%20Therapies_7-31.pdf</p> <p>https://hhs.texas.gov/about-hhs/communications-events/news/2020/07/covid-19-update-telehealth-guidance-class-professional-specialized-therapies</p>

CLASS, DBMD, HCS and TxHmL: Eligibility and Care Plan Revisions

Date	August 3, 2020
Summary	<p>HHSC extended expiring intellectual disability/related condition (ID/RC) assessments and individual plans of care for people enrolled in the Community Living Assistance and Support Services Program (CLASS), the Deaf Blind with Multiple Disabilities (DBMD) program, Home and Community-based Services (HCS), and Texas Home Living (TxHmL) program until HHSC notifies providers otherwise. This will ensure that no one experiences a gap in services due to the temporary suspension of face-to-face service coordination visits for COVID-19.</p>

Links

http://www.tmhp.com/News_Items/2020/08-August/080420%20Update%20-%20Extensions%20of%20Eligibility%20and%20IPC%20Revisions%20for%20People%20in%20CLASS%20and%20DBMD.pdf

<https://hhs.texas.gov/about-hhs/communications-events/news/2020/08/update-extensions-eligibility-ipc-revisions-people-hcs-txhtml>

HCS and TxHmL: Respite and CFC PAS/HAB**Date**

July 31, 2020

Summary

In a temporary policy change effective March 27, 2020, HHSC lifted the prohibition on service providers of respite and Community First Choice (CFC) personal assistance services/habilitation (PAS/HAB) from living in the same home as the person receiving Home and Community-based Services (HCS) and Texas Home Living (TxHmL) program services. This temporary change has been extended through October 23, 2020, unless the U.S. Secretary of Health and Human Services ends the public health emergency earlier. If the public health emergency ends earlier, HHSC will provide more information.

This policy change will provide access to needed services for people living in their own or family's home. A person's spouse or a minor child's parent is still prohibited from being a paid service provider of these services due to prohibition guidelines found in the following:

- [HCS Building Guidelines \(PDF\)](#) and [TxHmL Billing Guidelines \(PDF\)](#) Section 4660(1)
- [CFC Billing Guidelines \(PDF\)](#) Section 3710(a)(1)

Program providers must complete the required background checks for all service providers. They must follow:

- 40 Texas Administrative Code, Part 1, Subchapter D and N
- HCS and TxHmL Rules, [§9.177](#) (n) and (o)
- [§9.579](#) (r) and (s)
- [HCS](#) and [TxHmL Billing Guidelines \(PDF\)](#) Section 3400 for service provider qualifications

Link

<https://hhs.texas.gov/about-hhs/communications-events/news/2020/07/covid-19-update-temporary-change-hcs-txhtml-policy-service-providers-respite-cfc-pashab>

HCS and TxHmL: In-Home Day Habilitation

Date	August 3, 2020
Summary	HHSC extended temporarily waived requirements in Sections 4320 and 3710 of the Home and Community-based Services (HCS) billing guidelines and the Texas Home Living (TxHmL) billing guidelines. The temporary guidance is extended through October 23, 2020, unless the U.S. Secretary of Health and Human Services ends the public health emergency earlier. If the public health emergency ends earlier, HHSC will provide additional information. This information letter was previously issued on June 29, 2020.
Link	https://hhs.texas.gov/about-hhs/communications-events/news/2020/08/il-2020-19-updated-home-day-habilitation-information-program-providers-covid-19

Healthy Texas Woman and Family Planning Program: Telemedicine and Telehealth

Date	July 31, 2020
Summary	<p>HHSC extended date-of-service for telemedicine (physician-delivered) and telehealth (non-physician-delivered) services for Healthy Texas Women (HTW) and Family Planning Program (FPP) through October 23, 2020, unless the U.S. Secretary of Health and Human Services ends the public health emergency earlier. HHSC will provide additional information if the public health emergency ends earlier.</p> <p>This is an update to the article titled, Further Updates to Date-of-Service Extension for Telemedicine (Physician-Delivered) and Telehealth (Non-Physician-Delivered) Services, which TMHP originally published on July 2, 2020.</p>
Link	http://www.tmhp.com/News_Items/2020/07-July/073120%20More%20Updates%20to%20Further%20Updates%20to%20DOS%20Ext-Telemedicine%20Physician-Deliv-Telehealth-Non-HTW-FPP.pdf

FMSAs and CDS Employers: Face to Face Orientations

Date	July 31, 2020
Summary	HHSC extended the suspension of face-to-face consumer directed services (CDS) orientations for financial management service agencies (FMSAs) and CDS employers through October 23, 2020, unless the U.S. Secretary of Health and Human Services ends the public health emergency earlier. If the public health emergency ends earlier, HHSC will provide additional information.

Link | <https://hhs.texas.gov/about-hhs/communications-events/news/2020/07/il-2020-08-revised-covid-19-guidance-fmsas-cds-employers>

Existing Electronic Visit Verification Users

Date	August 3, 2020
Summary	<p>The temporary electronic visit verification (EVV) policies in response to COVID-19 have been extended through October 23, 2020, unless the U.S. Secretary of Health and Human Services ends the public health emergency earlier. If the public health emergency ends earlier, HHSC will provide additional information.</p> <p>The temporary EVV claims matching policy was revised to include information about the June 29, 2020 EVV portal updates. Program providers can now refer to the informational match result field in the EVV portal to see the result of the claims matching process when receiving an EVV07 in the claims match result field. See the June 29, 2020 TMHP EVV Portal Updates (PDF) for more information.</p>
Link	http://www.tmhp.com/News_Items/2020/08-August/080320%20Existing%20EVV%20Users%20Temporary%20Policies%20for%20COVID-19%20Extended%20to%20Oct.%2023,%202020.pdf

Off-Site Location Emergency Rules

Date	July 31, 2020
Summary	<p>HHSC provided 60-day extensions to off-site location emergency rules.</p> <p>GL 20-1003-A-6 provides a 60-day extension to the emergency rule permitting HHSC to temporarily waive the requirement that an off-site facility must have been licensed or open within the past 36 months, to operate an off-site facility, when the waiver will not detrimentally affect the health or safety of patients, hospital staff, or the public. This letter describes the emergency rule adopted and extended during the disaster.</p> <p>GL 20-1005-A, related to the extension of emergency rules for End Stage Renal Disease (ESRD) off-site locations, explains the 60-day emergency rule extension and allows ESRD facilities to temporarily use certain off-site locations to more effectively dialyze and train patients in response to the COVID-19 pandemic.</p>
Links	https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/provider-portal/facilities-regulation/memos/gl-20-1003-a-6.pdf

<https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/provider-portal/facilities-regulation/memos/gl-20-1005-a.pdf>

Nonessential Visitor Emergency Rules

Date	July 31, 2020
Summary	<p>HHSC provided 60-day extensions to emergency rules for nonessential visitors.</p> <p>GL 20-2015-A, related to the emergency rule extension passed for general and special hospitals, explains the emergency rule extension for 60 days and provides instructions regarding the prohibition of all visitors except persons providing critical assistance from entering the hospital and provides criteria hospitals must follow prior to allowing entry.</p> <p>GL 20-2016-A, related to the extension of the emergency rule passed for private psychiatric hospitals and crisis stabilization units, provides instructions regarding the 60-day emergency rule extension related to the prohibition of all visitors except persons providing critical assistance from entering a facility and provides criteria facilities must follow prior to allowing entry.</p> <p>The letters define providers of essential services, persons with legal authority to enter, and persons providing critical access. The letters also provide rule language that prohibits hospitals from restricting hospital access to government personnel performing their official duties, unless the person meets screening criteria.</p>
Links	<p>https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/provider-portal/facilities-regulation/memos/gl-20-2015-a.pdf</p> <p>https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/provider-portal/facilities-regulation/memos/gl-20-2016-a.pdf</p>

Provider Enrollment Revalidation Due Dates

Date	July 30, 2020
Summary	<p>Provider enrollment revalidation due dates have been extended through October 23, 2020 to prevent provider disenrollment, unless the U.S. Secretary of Health and Human Services ends the public health emergency earlier. If the public health emergency ends earlier, HHSC will provide additional information.</p> <p>This is an update to the article titled Provider Enrollment Revalidation Due Dates Extended in Response to COVID-19 Emergency, which TMHP originally published on April 1, 2020.</p>
Link	http://www.tmhp.com/News_Items/2020/07-July/073020%20Update%20to%20Provider%20Enrollment%20Revalidation%20Due%20Dates%20Extended%20in-COVID-19%20Emergency.pdf

Federal Updates

Provider Relief Fund Deadline Extended

Date	July 31, 2020
Summary	<p>U.S. Department of Health and Human Services (HHS) extended the application deadline for the Medicaid/CHIP Provider Relief Fund portal until August 28, 2020.</p> <p>In addition, HHS announced their intention to reopen the Medicare distribution portal beginning the week of August 10, 2020 for certain providers who had challenges during the Phase I Medicare distribution allocations from the Provider Relief Fund. HHS has indicated that the portal, once reopened, will also remain open until August 28, 2020.</p>
Link	https://www.hhs.gov/about/news/2020/07/31/hhs-extends-application-deadline-for-medicare-providers-and-plans-to-reopen-portal-to-certain-medicare-providers.html

CMS and CDC Announce Provider Reimbursement Available for Counseling Patients to Self-isolate at Time of COVID-19 Testing

Date	July 30, 2020
Summary	<p>The Centers for Medicare and Medicaid Services (CMS) and the Centers for Disease Control and Prevention (CDC) announced that payment is available to physicians and health care providers to counsel patients, at the time of coronavirus disease 2019 testing, about the importance of self-isolation after they are tested and prior to the onset of symptoms.</p> <p>Provider counseling to patients, at the time of their COVID-19 testing, will include the discussion of immediate need for isolation, even before results are available, the importance of informing their immediate household that they too should be tested for COVID-19, and the review of signs and symptoms and services available to aid in isolating at home. In addition, they will be counseled that if they test positive, to wear a mask at all times and they will be contacted by public health authorities and asked to provide information for contact tracing and to tell their immediate household and recent contacts in case it is appropriate for these individuals to be tested for the virus and to self-isolate as well.</p> <p>CMS will use existing evaluation and management (E/M) payment codes to reimburse providers who are eligible to bill CMS for counseling services no matter where a test is administered, including doctor's offices, urgent care clinics, hospitals and community drive-thru or pharmacy testing sites.</p>
Links	<p>https://www.cms.gov/files/document/counseling-checklist.pdf</p> <p>https://www.cms.gov/files/document/covid-provider-counseling-qa.pdf</p> <p>https://www.cms.gov/files/document/covid-provider-patient-counseling-talking-points.pdf</p>

CMS Announced New Hospital Procedure Codes for Therapeutics

Date	July 30, 2020
Summary	<p>CMS is implementing new procedure codes to allow Medicare and other insurers to identify the use of the therapeutics remdesivir and convalescent plasma for treating hospital patients with COVID-19. These new codes, which went into effect August 1, 2020, will enable CMS to conduct real-time surveillance and obtain real-world evidence in how these drugs are working and provide critical information on their effectiveness and how they can protect patients. These codes can be reported to Medicare and other insurers may also use the codes to identify the use of COVID-19 therapies and help facilitate monitoring and data collection on their use.</p> <p>These new codes are being implemented into the International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS). ICD-10-PCS is the Health Insurance Portability and Accountability Act (HIPAA) designated code set for reporting hospital inpatient procedures.</p>
Link	https://www.cms.gov/newsroom/press-releases/cms-announces-new-hospital-procedure-codes-therapeutics-response-covid-19-public-health-emergency

CMS Announced Policy for Temporary Premium Reductions

Date	August 4, 2020
Summary	<p>CMS announced a policy that will allow issuers to offer temporary premium reductions for individuals with 2020 coverage in the individual and small group markets. CMS is providing this additional flexibility to help ensure that consumers struggling to pay their premiums can continue to be covered and receive the care they need. This temporary policy will be in effect until the end of 2020. Issuers are generally prohibited under current federal requirements from changing premiums for health insurance coverage offered in the individual and small group markets after the start of the benefit year.</p>
Link	https://www.cms.gov/newsroom/press-releases/cms-announces-temporary-policy-premium-reductions

CMS Proposed Expanding Telehealth Benefits Permanently

Date	August 3, 2020
Summary	CMS proposed changes to expand telehealth permanently, consistent with the Executive Order on Improving Rural and Telehealth Access that President Trump signed. The Executive Order and proposed rule advance efforts to improve access and convenience of care for Medicare beneficiaries, particularly those living in rural areas. Additionally, the proposed rule implements a multi-year effort to reduce clinician burden and to ensure appropriate reimbursement for time spent with patients.
Link	https://www.cms.gov/newsroom/press-releases/trump-administration-proposes-expand-telehealth-benefits-permanently-medicare-beneficiaries-beyond

HHS Updated Reporting Guidance

Date	July 29, 2020
Summary	HHS released updated guidance and FAQs on reporting, effective immediately. The guidance provides updates on supply data hospitals report, new HHS data liaisons, and additional FAQs. Providers now only have to report supply-related data fields (items 26-32 in the guidance document's table) three times a week (Monday, Wednesday, and Friday) instead of daily.
Link	https://www.hhs.gov/sites/default/files/covid-19-faqs-hospitals-hospital-laboratory-acute-care-facility-data-reporting.pdf

HHS Report: Telehealth Utilization

Date	July 28, 2020
Summary	HHS released a report demonstrating the explosion of telehealth services during the COVID-19 public health emergency. The report indicates that prior to COVID-19, only 14,000 Medicare or Medicaid beneficiaries utilized telehealth services per week. During the pandemic, the same category of patients have had more than 10 million telehealth visits. HHS concludes that "telehealth flexibilities played a critical role in helping to maintain access to primary health care services." The report also suggests telehealth will continue to play a key role in health care after the pandemic.
Links	https://aspe.hhs.gov/pdf-report/medicare-beneficiary-use-telehealth

CDC Updated Guidance for Use of Pooling Procedures

Date	August 1, 2020
Summary	The CDC updated its guidance on the appropriate use of pooled or batch COVID-19 testing.
Link	https://www.cdc.gov/coronavirus/2019-ncov/lab/pooling-procedures.html

Seroprevalence of Antibody of SARS-COV-2

Date	July 21, 2020
Summary	The <i>Journal of American Medical Association</i> released a study that estimated the prevalence of COVID-19 antibodies from people in 10 U.S. cities. Most of the 16,000 study participants did not have evidence of antibodies. The proportion of people with antibodies ranged from one percent in the San Francisco Bay area to seven percent of people in New York City. When comparing people with antibodies to people with confirmed cases, six to 24 times more infections were estimated with seroprevalence than with COVID-19 case report data.
Link	https://jamanetwork.com/journals/jamainternalmedicine/fullarticle/2768834

Mass Testing in Long-Term Facilities

Date	July 20, 2020
Summary	An article published by published by Oxford University Press for the Infectious Diseases Society of America describes lessons learned from mass testing in long-term care facilities (LTCFs). The study describes four COVID-19 outbreaks in San Francisco area LTCFs where mass testing identified a high proportion of asymptomatic infections (four to 41% in health care workers and 20-75% in residents). Findings indicate that symptom-based screening alone is insufficient for monitoring for COVID-19 transmission.
Link	https://academic.oup.com/cid/article/doi/10.1093/cid/ciaa1020/5873783