

MMHPI COVID-19 Regulatory & Reimbursement Newsletter

Letter to Providers #27: State and Federal Updates – September 24, 2020

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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.

Texas Updates

Governor Expands Capacity for Certain Services in Texas

Date	September 17, 2020
Summary	Governor Abbott held a press conference to provide an update on the state's ongoing efforts to combat COVID-19. During the press conference, the Governor issued executive orders expanding occupancy levels for restaurants, retail stores, office buildings, manufacturing facilities, gyms and exercise facilities and classes, museums, and libraries, and re-authorizing elective surgeries for a majority of the state of Texas. The Governor also announced new guidance related to visitations at nursing homes and long-term care facilities across the state.
Link	https://gov.texas.gov/news/post/governor-abbott-expands-capacity-for-certain-services-in-texas-announces-guidance-for-nursing-home-long-term-care-visitations

Telehealth Waiver Lapse

Date	September 12, 2020
Summary	The Texas Department of Insurance's (TDI) telemedicine emergency rule expired September 12, 2020 as TDI has reached its maximum number of extensions. The emergency rule required state-regulated health insurers and health maintenance organizations to: pay in-network health professionals at least the same rate for telemedicine services as for in-person services, including covered mental health services; cover telemedicine services using any platform permitted by state law; and not require more documentation for telemedicine services than they require for in-person services.
Link	https://www.tdi.texas.gov/rules/2020/documents/20206287.pdf

HHSC Updates FAQs for Behavioral Health Providers

Date	September 18, 2020
Summary	<p>The Texas Health and Human Services Commission (HHSC) updated COVID-19-related frequently asked questions for behavioral health providers with the following:</p> <ul style="list-style-type: none"> • Since chemical dependency treatment providers are no longer required to notify the Substance Use Disorder Compliance Unit about clients who have tested positive for COVID-19, do I still need to notify programs of positive client cases? • Pertaining to a permanent allowance for Mental Health Rehabilitation and Target Case Management (MHR/TCM), to be delivered via telehealth, we have heard that Medicaid Managed Care Organizations (MCOs) have the discretion to allow this; however, in conversations with MCOs they state they are waiting for guidance from the State. Which is correct?
Link	https://hhs.texas.gov/sites/default/files/documents/services/health/behavioral-health-services-covid-faq.pdf

Spell of Illness Limitation for COVID-19-related Admissions

Date	September 18, 2020
Summary	<p>For inpatient hospital stays related to COVID-19 for which the client was admitted on or after March 13, 2020, HHSC has received federal approval through a disaster 1115 authority. This extends the 30-day spell of illness limitation that applies to certain adult Medicaid clients for an additional 30 COVID-19-related days, allowing a person to stay up to 60 days in a hospital.</p> <p>HHSC is also waiving the \$200,000 benefit limitation for COVID-19-related stays, which applies to adults in fee-for-service Medicaid and for some members who remain in STAR Health after their twenty-first birthday.</p>
Link	https://www.tmhp.com/news/2020-09-18-spell-illness-limitation-covid-19-related-admissions

New Long-Term Care Expansion of Visitation Guidelines

Date	September 24, 2020
Summary	Governor Abbott directed HHSC to expand visitation options for eligible nursing, assisted living, and intermediate care facilities, home and community-based service providers, and inpatient hospice, effective September 24, 2020. HHSC's updated emergency rules will allow a designated essential caregiver to provide supportive, hands-on care to facility residents who do not have COVID-19. HHSC published an overview of new expansion of visitation guidelines for nursing facilities, assisted living facilities, intermediate care facilities, home and community-based service providers, and inpatient hospice.
Link	https://hhs.texas.gov/sites/default/files/documents/services/health/coronavirus-covid-19/reopening-visitation-ltc-facilities.pdf

HCS Expanded Visitation Rules

Date	September 23, 2020
Summary	HHSC issued home and community-based services (HCS) COVID-19 expanded visitation rules. The rules describe the expansion of visitation in HCS providers, including a program provider's ability to designate essential caregivers for patients.
Link	https://hhs.texas.gov/about-hhs/communications-events/news/2020/09/hcs-covid-19-expanded-visitation-rules-announced

Ambulatory Surgical Center Services and Reporting Requirements in Response to COVID-19

Date	September 23, 2020
Summary	HHSC posted GL 20-2020, regarding ambulatory surgical center (ASC) services and reporting requirements as a result of COVID-19. The letter discusses the adoption of emergency rules that temporarily permit licensed ASCs to expand their services beyond surgical services and allow ASCs to keep patients for longer periods of time in response to the COVID-19 pandemic. The letter also provides guidance on ASC reporting requirements during COVID-19.
Link	https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/provider-portal/facilities-regulation/memos/gl-20-2020.pdf

Emergency Hospital Off-Site Facilities in Response to COVID-19

Date	September 21, 2020
Summary	HHSC posted GL 20-1011, regarding emergency hospital off-site facilities in response to COVID-19. The letter describes the adoption of an emergency rule allowing licensed hospitals to temporarily operate off-site, inpatient facilities without obtaining a new license to more effectively treat and house patients in response to the COVID-19 pandemic. The letter also explains the application process for requesting HHSC approval to operate an off-site inpatient facility.
Link	https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/provider-portal/facilities-regulation/memos/gl-20-1011.pdf

TxHmL: HHSC Updates COVID-19 Mitigation Emergency Rules

Date	September 23, 2020
Summary	HHSC issued revised Texas Home Living (TxHmL) COVID-19 emergency rules. The rules update the screening criteria and are based on revised Centers for Disease Control and Prevention (CDC) guidance.
Link	https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/provider-portal/long-term-care/txhml-covid-updated-emergency-rules.pdf

Extended Flexibilities: Prescribing Chronic Pain Prescriptions

Date	September 3, 2020
Summary	<p>The Texas Medical Board extended emergency rules related to prescribing chronic pain prescriptions via telemedicine.</p> <p>On March 19, 2020, the Texas Governor issued a waiver suspending the strict enforcement of §174.5(e)(2)(A), which generally prohibits the utilization of telemedicine to prescribe scheduled drugs for the treatment of chronic pain. The rule, set to expire on September 2, 2020, has been extended for 60 days.</p> <p>Additionally, the emergency rule that permits advanced practice registered nurses to treat chronic pain with scheduled drugs through the use of telemedicine medical services was extended for 60 days beyond the September 4, 2020 expiration date.</p>
Link	https://www.sos.texas.gov/texreg/archive/September182020/Emergency%20Rules/22.EXAMINING%20BOARDS.html#5

Public School Case Data

Date	September 17, 2020
Summary	<p>In collaboration with the Texas Education Agency (TEA), the Texas Department of State Health Services (DSHS) posted on the DSHS website the statewide number of cases of COVID-19 reported by Texas public schools. The reported count of on-campus student cases of COVID-19 in the state's public schools is 2,344 out of an estimated 1.1 million students who have been on campus for instruction or activities since the beginning of the 2020-21 school year. The total count of on-campus staff cases during the same period is 2,175.</p> <p>The number of student and staff COVID-19 cases in Texas public schools will be updated each Wednesday. Beginning September 23, 2020, it will include data by school district. TEA will link to the data from TEA's COVID-19 website.</p>
Link	https://dshs.texas.gov/coronavirus/schools/texas-education-agency/

New Modeling Dashboard Specific to Trauma Service Areas

Summary	<p>The University of Texas at Austin's COVID-19 Modeling Consortium has launched a new online dashboard to track the spread and impact of the virus with detailed information for the state's 22 Trauma Service Areas (TSAs). This is more specific than previously available modeling. Researchers combined hospitalization data for each TSA with anonymous cell phone mobility data to predict how the pandemic is progressing and its impact on local health care resources. Use the drop-down menu to view projections by TSA.</p>
Link	https://covid-19.tacc.utexas.edu/texas-projections/

State Task Force on Infectious Disease Preparedness and Response

Date	September 17, 2020
Summary	<p>Governor Abbott appointed 11 members to the state's Task Force on Infectious Disease Preparedness and Response. The task force provides evidence-based assessments and recommendations to the state and reliable and transparent information on responses to infectious diseases.</p>
Link	https://gov.texas.gov/news/post/governor-abbott-appoints-11-to-task-force-on-infectious-disease-preparedness-and-response

Federal Updates

Request for Additional Hotspot Funding

Date	September 18, 2020
Summary	The 30 members of the Texas Congressional delegation signed on to a bipartisan letter, asking the United States Department of Health and Human Services (HHS) to provide an additional allocation of hotspot funding for Texas. The letter, co-led by U.S. Reps. Roger Williams (R-Austin) and Eddie Bernice Johnson (D-Dallas), explains that the timeframe HHS used to determine eligibility for the last round of hotspot funding did not coincide with when COVID-19 hospitalizations were surging in Texas. HHS should reevaluate hotspot funding opportunities for states like Texas that began surging after the January 1, 2020 – June 10, 2020 window.
Link	https://williams.house.gov/sites/williams.house.gov/files/9.18.20%20Texas%20Delegation%20Hotspot%20Letter%20to%20HHS.pdf

New Reporting Requirements for Provider Relief Fund

Date	September 19, 2020
Summary	HHS released a notice to provide information about reporting requirements for providers that received Provider Relief Fund payments. The notice includes the categories of data elements that recipients must submit for calendar years 2019 and 2020. The notice also supports HHS' post-payment notice of reporting requirements . The reporting system will be available in early 2021, according to HHS.
Link	https://www.hhs.gov/sites/default/files/post-payment-notice-of-reporting-requirements.pdf

CMS Reports Steep Decline in Care for Children in Medicaid and CHIP

Date	September 23, 2020
Summary	The Centers for Medicare & Medicaid Services (CMS) released preliminary Medicaid and Children's Health Insurance Program (CHIP) data revealing that, during the COVID-19 public health emergency (PHE), rates for vaccinations, primary, and preventive services among children in Medicaid and CHIP have steeply declined. CMS data analysis reveals that, compared to the same time period in 2019, there was a significant decline in critical primary and time-sensitive preventative services for children between March and May. Specifically, during this timeframe, there

were 22 percent fewer (1.7 million) vaccinations received by beneficiaries up to age 2, 44 percent fewer (3.2 million) child screening services that assess physical and cognitive development and can provide early detection of autism and developmental delay, among other conditions, even after accounting for the increased use of telehealth, and 69 percent fewer (7.6 million) dental services.

Link

<https://www.cms.gov/newsroom/press-releases/cms-issues-urgent-call-action-following-drastic-decline-care-children-medicaid-and-childrens-health>

CDC Updates and Reports

Testing Guidance

Date

September 18, 2020

Summary

CDC updated its testing guidance for SARS-CoV-2, reinforcing the need to test asymptomatic persons, including close contacts. The guidance now recommends a diagnostic test for asymptomatic people who have been within 6 feet of someone with the virus for at least 15 minutes.

Link

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/testing-overview.html>

COVID-19 and the Flu

Date

September 18, 2020

Summary

CDC issued a new study indicating that COVID-19 mitigation practices could help substantially reduce flu incidence and impact this season.

Link

https://www.cdc.gov/mmwr/volumes/69/wr/mm6937a6.htm?s_cid=mm6937a6_w

Pregnant Women

Date

September 16, 2020

Summary

CDC released a new report on characteristics of hospitalized pregnant women with COVID-19. In a sample of 598 hospitalized pregnant women with COVID-19, 55% had no symptoms on admission. Among the 272 women with COVID-19 symptoms, 44 were admitted to an intensive care unit, 23 received mechanical ventilation, and two died.

Link

<https://www.cdc.gov/mmwr/volumes/69/wr/mm6938e1.htm>

Deaths Among Children

Date	September 18, 2020
Summary	A new study from the CDC found that roughly 121 children and adolescents under 21 have died from COVID-19 from February to July, accounting for about .08% of all deaths reported in that time period in the U.S. While younger people seem to fare better than adults, death still occurs. Racial and ethnic disparities also are prevalent among the younger generation.
Link	https://www.cdc.gov/mmwr/volumes/69/wr/mm6937e4.htm?s_cid=mm6937e4_w