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@texasstateofmind.org.

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Texas in a Pandemic: A Virtual Peer Support Series

Governor Abbott Announces Phase One to Open Texas

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<thead>
<tr>
<th>Date</th>
<th>April 27, 2020</th>
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| Summary    | Governor Abbott announced a phased approach to reopen businesses in Texas. Abbott will let his stay-at-home order expire on April 30, but vulnerable populations are still encouraged to stay home.

Under Executive Order (GA-19), Abbott also relaxed certain restrictions related to health care professionals and issued amended requirements related to hospital capacity:
- All licensed health care professionals shall be limited in their practice by, and must comply with, any emergency rules promulgated by their respective licensing agencies dictating minimum standards for safe practice during the COVID-19 disaster.
- Every hospital licensed under Chapter 241 of the Texas Health & Safety Code shall reserve at least 15% of its hospital capacity for treatment of COVID-19 patients, accounting for the range of clinical severity of COVID-19 patients, as determined by the Health and Human Services Commission (HHSC).

### HHSC Health Care Regulation Guidance Letter

<table>
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<tr>
<th>Date</th>
<th>April 28, 2020</th>
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<tbody>
<tr>
<td>Summary</td>
<td>HHSC posted guidance to regulated health care facilities and licensed professionals on how the agency is establishing and enforcing compliance with regulations during the COVID-19 pandemic. Governor Abbott has suspended certain state laws and rules. In addition, some federal authorities have issued multiple waivers relieving providers of certain requirements. To the extent that these laws and rules are not in effect at this time, HHSC will not investigate allegations of violations of these laws or rules. This means that HHSC also will not pursue enforcement action related to violation of laws or rules that have been suspended, waived, or otherwise modified by federal or state authorities. This guidance applies only to HHSC state enforcement actions. While HHSC conducts surveys and makes recommendations to the Centers for Medicare and Medicaid Services (CMS) for federal enforcement action, CMS is ultimately responsible for all federal enforcement decisions.</td>
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### Claims for Telephone (Audio-Only) Early Childhood Intervention Specialized Skills Training and Nutritional Counseling Services

<table>
<thead>
<tr>
<th>Date</th>
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<tbody>
<tr>
<td>Summary</td>
<td>HHSC is authorizing providers to bill code T1027 for telephone (audio-only) early childhood intervention (ECI) specialized skills training (SST) delivered from March 15, 2020 through May 31, 2020. HHSC is also authorizing providers to bill procedure code S9470 for telephone (audio-only) nutritional counseling delivered from March 15, 2020 through May 31, 2020. Providers should continue to use the 95 modifier to indicate that remote delivery has occurred.</td>
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### Date of Service Extension for Telemedicine (Physician-Delivered) and Telehealth (Non-Physician-Delivered) Services

<table>
<thead>
<tr>
<th>Date</th>
<th>April 24, 2020</th>
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</table>
| Summary    | As part of its continued response to COVID-19, HHSC will provide Medicaid reimbursement for previously identified telemedicine and telehealth services for March 15, 2020 through May 31, 2020 dates of service. The telemedicine and telehealth services include those listed in the following provider notifications:  
  - Claims for telehealth service for occupational, physical, and speech therapy  
  - School health and related services (SHARS) services provided through telemedicine or telehealth  
  - Clarification to ‘COVID-19 guidance: targeted case management through remote delivery’  
  - Rural health clinic (RHC) reimbursement for telemedicine and telehealth services  
  - Claims for telephone (audio only) medical services  
  - Claims for telephone (audio only) behavioral health services  
  - Federally qualified health center (FQHC) reimbursement for telemedicine (physician delivered) and telehealth (non-physician-delivered) services  
  
All services listed in the *Texas Medicaid Provider Procedures Manual, Telecommunication Services Handbook*, continue to remain eligible for Medicaid reimbursement. Providers can refer to this handbook for additional information about Texas Medicaid telemedicine and telehealth service benefits. |
Update to COVID-19 Guidance for Fee-for-service (FFS) Service Coordinators and Case Managers

**Date**  
April 27, 2020

**Summary**  
Fee-for-service (FFS) Medicaid 1915(c) waiver case managers and service coordinators may continue to suspend face-to-face service coordination visits. This temporary policy change is extended through May 31, 2020 and applies to:

- Community Living Assistance and Support Services
- Texas Home Living
- Deaf-Blind with Multiple Disabilities
- Home and Community-based Services
- General Revenue Service Coordinators
- Community First Choice Service Coordinators
- Pre-admission Screening and Resident Review Habilitation Coordinators

Due to COVID-19, HHSC encourages case managers, service coordinators, and habilitation coordinators to complete visits through May 31, 2020 by phone, telehealth or telemedicine, if possible.

**Link**  

COVID-19 Update to Telehealth Guidance on Community Living Assistance and Support Services (CLASS) Professional and Specialized Therapies

**Date**  
April 27, 2020

**Summary**  
The following Community Living Assistance and Support Services (CLASS) professional and specialized therapy services may be provided by telehealth due to COVID-19. This is retroactive, effective March 15, 2020 and is through May 31, 2020.

- Physical therapy
- Occupational therapy
- Speech and language pathology
- Recreational therapy
- Music therapy
- Behavior support
- Dietary services
- Cognitive rehabilitation therapy

Acceptable telehealth formats are synchronous audiovisual interaction or asynchronous store and forward technology. Use these along with synchronous audio interaction between the client and the distant site provider.
The Office of Civil Rights (OCR) has relaxed HIPAA requirements to allow for the use of video capabilities to deliver services by telehealth. Texas Medicaid recognizes OCR’s HIPAA enforcement discretion as it relates to telehealth platform requirements.

Therapies not eligible for delivery via telehealth are:

- Massage therapy
- Hippotherapy
- Therapeutic horseback riding
- Aquatic therapy


Home and Community-based Services (HCS), CLASS, and Deaf Blind with Multiple Disabilities (DBMD) Slot Release IDD Providers

**Date**: April 24, 2020

**Summary**: HHSC published a [REVISED IL20-15, COVID-19 HCS Interest List Reduction Slots](https://hhs.texas.gov/about-hhs/communications-events/news/2020/04/il20-15-covid-19-hcs-interest-list-reduction-slots-revised-4232020), previously issued on April 9, 2020, to extend the temporary guidance through May 2020. To align with the direction given to local intellectual and developmental disability authorities (LIDDA) regarding face-to-face visits through the end of May 2020, HHSC is postponing the release of Home and Community-based Services (HCS) Interest List Reduction Slots through the same time period.

HHSC published a [Revised IL2020-14 COVID-19 CLASS and DBMD Interest List Reduction Slots](https://hhs.texas.gov/about-hhs/communications-events/news/2020/04/il20-14-class-dbmd-slot-release-idd-providers-due-covid-19-revised-4232020), previously issued on April 9, 2020, to extend the temporary guidance through the month of May 2020. To align with HHSC direction to CLASS case management agencies (CMAs) and direct services agencies (DSAs) and Deaf Blind with Multiple Disabilities (DBMD) program providers regarding face-to-face visits through May 2020, HHSC is postponing interest list releases through May 2020. HHSC will re-evaluate the interest list release process prior to June 1, 2020 and issue further guidance.

**Links**

Waiver Related to Telehealth for Licensed Marriage & Family Therapists & Associates in Response to COVID-19

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<tr>
<th>Date</th>
<th>April 23, 2020</th>
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<tr>
<td>Summary</td>
<td>GL 20-5000, related to rules waived by the Office of the Governor for Licensed Marriage &amp; Family Therapists (LMFT) and Licensed Marriage &amp; Family Therapist Associates (LMFT-A), has been posted. Under this waiver, a LMFT and LMFT-A (under appropriate supervision) may immediately provide counseling to clients via audio and video services without receiving education, training, or supervised experience in the specific technology. In addition, a LMFT and LMFT-A will not be required to maintain documentation of their training or supervision related to technology-assisted services at this time.</td>
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<tr>
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<tbody>
<tr>
<td>Summary</td>
<td>Texas Medicaid &amp; Healthcare Partnership (TMHP) posted a correction to their article titled, “COVID-19 Guidance: Targeted Case Management Through Remote Delivery,” originally posted on April 1, 2020. Case management may be delivered through synchronous audio-visual technologies or telephone (audio-only). For mental health targeted case management and targeted case management for early childhood intervention (ECI), providers should bill procedure code T1017 using the 95 modifier to indicate that remote delivery occurred. Case management providers in other programs should utilize existing billing codes and modifiers along with the 95 modifier to indicate that remote delivery occurred.</td>
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FAQs for Opioid Treatment Programs

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<tr>
<th>Date</th>
<th>April 17, 2020</th>
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<tbody>
<tr>
<td>Summary</td>
<td>HHSC posted frequently asked questions (FAQs) for opioid treatment programs (OTPs). FAQs include the following: Q. Can my physician utilize telemedicine to admit a patient into our clinic? A. This question is dependent on the type of drug to be utilized. <strong>Buprenorphine:</strong> During this health emergency, programs may utilize telemedicine for buprenorphine induction without an in-person, face-to-face medical evaluation. <strong>Methadone:</strong> Methadone will continue to require an in-person, face-to-face medical evaluation prior to the first dose of medication. The Drug Enforcement Agency has provided guidance on the use of telemedicine here: <a href="https://www.deadiversion.usdoj.gov/coronavirus.html#TELE">https://www.deadiversion.usdoj.gov/coronavirus.html#TELE</a> SAMHSA has also provided guidance on the usage of both medications here: <a href="https://www.samhsa.gov/sites/default/files/faqs-for-oud-prescribing-and-dispensing.pdf">https://www.samhsa.gov/sites/default/files/faqs-for-oud-prescribing-and-dispensing.pdf</a></td>
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Interactive Map of Texas Test Collection Sites

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<tr>
<th>Date</th>
<th>April 24, 2020</th>
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<tbody>
<tr>
<td>Summary</td>
<td>Governor Abbott announced that the state has launched an online map to help Texans locate COVID-19 test collection sites in their communities. The interactive map has a search feature and provides detailed information about public and private mobile, walk-in, and drive-thru test collection sites in Texas. The map currently lists 340 test collection sites, and additional sites will be added as they are identified. Texans are encouraged to submit updated information about sites or suggest additional sites by filling out an online form.</td>
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### Senate COVID-19 Workgroups

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<thead>
<tr>
<th><strong>Date</strong></th>
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<tr>
<td><strong>Summary</strong></td>
<td>Lieutenant Governor Patrick announced that the Senate will convene six new workgroups to discuss COVID-19 related challenges the state will face in the 2021 legislative session. The purpose of the groups is to discuss challenges and options, not to craft legislation. The workgroup on Health, Hospitals and COVID-19 Issues will be led by Sen. Lois Kolkhorst and includes Sens. Dawn Buckingham M.D., Donna Campbell M.D., Charles Schwertner, M.D. and Borris Miles.</td>
</tr>
<tr>
<td><strong>Link</strong></td>
<td>[<a href="https://www.ltgov.state.tx.us/2020/04/24/Lt-gov-patrick-announces">https://www.ltgov.state.tx.us/2020/04/24/Lt-gov-patrick-announces</a> senate-work-groups-to-discuss-pandemic-impact-on-texas/](<a href="https://www.ltgov.state.tx.us/2020/04/24/Lt-gov-patrick-announces">https://www.ltgov.state.tx.us/2020/04/24/Lt-gov-patrick-announces</a> senate-work-groups-to-discuss-pandemic-impact-on-texas/)</td>
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Federal Updates  
COVID-19 Claims Reimbursement

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<tr>
<th>Date</th>
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<tr>
<td>Summary</td>
<td>The U.S. Health Resources and Services Administration (HRSA) launched a portal to reimburse providers for COVID-19 testing and treatment for the uninsured. Providers can use the portal to enroll in the program and submit claims. Health care providers who have conducted COVID-19 testing or provided treatment for uninsured individuals on or after February 4, 2020, can request reimbursement and will be reimbursed generally at Medicare rates, subject to available funding. Steps involve enrolling as a provider participant, checking patient eligibility, submitting patient information, submitting claims electronically, and receiving payment via direct deposit.</td>
</tr>
<tr>
<td>Link</td>
<td><a href="https://coviduninsuredclaim.linkhealth.com/">https://coviduninsuredclaim.linkhealth.com/</a></td>
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Updated CDC Testing Criteria and Symptom List

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<tr>
<td>Summary</td>
<td>The Centers for Disease Control and Prevention (CDC) announced new testing guidance, updating priority populations for testing, and increasing some additional flexibilities. The CDC also added chills, repeated shaking with chills, muscle pain, headache, sore throat and loss of taste or smell to the list of symptoms for COVID-19.</td>
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CMS Reevaluates Accelerated Payment Program and Suspends Advance Payment Program

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<tr>
<th>Date</th>
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<tr>
<td>Summary</td>
<td>CMS announced that it is reevaluating the amounts that will be paid under its Accelerated Payment Program and suspending its Advance Payment Program to Medicare Part B suppliers effective immediately. CMS will not be accepting any new applications for the Advance Payment Program and will be reevaluating all pending and new applications for the Accelerated Payment Program in light of payments made available through the Department of Health &amp; Human Services’ (HHS)</td>
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</table>
Provider Relief Fund. CMS had expanded these temporary loan programs to ensure providers and suppliers had the resources needed to combat the beginning stages of the 2019 Novel Coronavirus (COVID-19). Funding will continue to be available to hospitals and other healthcare providers on the front lines of the COVID-19 response through the Provider Relief Fund.


$484B COVID-19 “Phase 3.5” Relief Package Signed

Date: April 24, 2020

Summary: President Trump signed the $484 billion Payment Protection Program and Health Care Enhancement Act that delivers more relief to small businesses and health care providers. The package provides $310 billion for the depleted Paycheck Protection Program (PPP), $75 billion in additional relief for hospitals and health care providers through the Provider Relief Fund, and $25 billion to ramp up COVID-19 testing at the federal, state, and local levels. The HHS Secretary is working to determine how the additional funds in the Provider Relief Fund will be distributed as, to date, mental health and substance use disorder providers have received little funding.

Link: https://www.congress.gov/bill/116th-congress/house-bill/266

CMS Released More Blanket Waivers for Intermediate Care Facilities (ICFs)

Date: April 21, 2020

Summary: CMS provided more blanket waivers related to care for residents in intermediate care facilities (ICFs). This is for people who have an intellectual disability or related condition. Waivers were issued in the following areas:

- Staffing Flexibilities. CMS is waiving the requirements at 42 CFR §483.430(c)(4). This requires the facility provide sufficient direct support staff so direct care staff don’t have to perform support services that interfere with direct client care.

- Suspension of Community Outings. CMS is waiving the requirements at 42 CFR §483.420(a)(11). This requires clients can participate in social, religious, and community group activities.

- Suspend Mandatory Training Requirements. CMS is waiving, in-part, the requirements at 42 CFR §483.430(e)(1) related to routine staff training programs unrelated to the public health emergency.
- Modification of Adult Training Programs and Active Treatment. The requirements at 42 CFR §483.440(a)(1) require that each client must receive a continuous active treatment program. This includes consistent implementation of a program of specialized and generic training, treatment, health and related services. CMS is waiving the components of beneficiaries’ active treatment programs and training that would violate current state and local requirements for social distancing, staying at home, and traveling for essential services only.

Link  

### FCC COVID-19 Telehealth Program Accepting Applications

**Summary**

The COVID-19 Telehealth Program at the Federal Communications Commission (FCC) is live and accepting applications.

The CARES Act provided $200M to the FCC to support the efforts of health care providers to address COVID-19 by providing telecommunications services, information services, and devices necessary to enable the provision of telehealth services.

In a previous newsletter, we mentioned FCC Chairman Pai’s intent to use the $200 million to create a COVID-19 Telehealth Program to provide funding to nonprofit and public-eligible health care providers to purchase telecommunications, broadband, and devices to provide of telehealth services during the emergency period. The Program provides immediate support to providers responding to the COVID-19 pandemic by fully funding their telecommunications services, information services, and devices necessary to provide critical connected care services.

Link  
https://www.fcc.gov/covid-19-telehealth-program

### Distance Learning and Telemedicine Program

**Summary**

The CARES Act includes $25 million to support the Distance Learning and Telemedicine program. This is a grant program at the United States Department of Agriculture (USDA) that requires a 15% match. Grant funds may be used for:

- Acquisition of eligible capital assets, such as broadband transmission facilities; audio, video and interactive video equipment; and computer hardware, network components and software;
- Acquisition of instructional programming that is a capital asset; and
• Acquisition of technical assistance and instruction for using eligible equipment.

Grants are awarded through a competitive application process. Eligible applicants include most entities that provide education or health care through telecommunications (state and local governmental entities, nonprofit organizations).

Applications are currently being accepted until July 13, 2020.

Link: https://www.rd.usda.gov/programs-services/distance-learning-telemedicine-grants

Paycheck Protection Program Loans for Public Hospitals

Date: April 13, 2020

Summary: The Small Business Administration released an interim final rule, clarifying that a public hospital is now eligible for the Paycheck Protection Program (PPP) if it receives less than 50% of its funding from state or local government sources, excluding Medicaid.

On April 24, 2020, the President approved an additional $310 billion for the depleted PPP in the latest COVID-19 relief package, known as the Payment Protection Program and Health Care Enhancement Act. Loans are available through banks and other lenders on a first come, first served basis. Hospitals are encouraged to contact their banks to apply. The rule applies to applications submitted through June 30 or until PPP funds are exhausted.


Statements from the Office of the National Coordinator for Health IT and CMS on Interoperability Flexibilities amid the COVID-19 Public Health Emergency

Date: April 21, 2020

Summary: The Office of the National Coordinator for Health IT (ONC) and CMS, in conjunction with the HHS Office of Inspector General (OIG) announced a policy of enforcement discretion to allow compliance flexibilities regarding the implementation of the interoperability final rules announced on March 9, 2020 in response to the coronavirus disease public health emergency.
### Links

| OIG announcement: [https://healthit.gov/curesrule](https://healthit.gov/curesrule) |

### Medical Staff Needed in Other States

#### Summary

Many states are seeking help filling health care workforce needs during the pandemic. In the link below, the American Hospital Association (AHA) lays out the needs by state and includes requests for medical and public health volunteers and other workers.

#### Link

[https://www.100millionmasks.org/100-million-workforce](https://www.100millionmasks.org/100-million-workforce)

### SAMHSA Award Announcement

#### Summary

The CARES Act provided $425 million to the Substance Abuse and Mental Health Services Administration (SAMHSA). Funds are provided to address mental health and substance use disorders as a result of COVID-19. Of the $425 million:

- **Certified Community Behavioral Health Clinics (CCBHCs)** receive $250 million to increase access to mental health care services;
- **SAMHSA** receives $50 million for suicide prevention to provide increased support for those most in need of intervention; and
- **SAMHSA** receives $100 million in Emergency Response Grants to provide flexible funding to address mental health, substance use disorders, and provide resources and support to youth and the homeless during the pandemic. On April 20, 2020, SAMHSA announced the distribution of these grants to successful state, territory, and tribal applicants. However, Texas did not receive an award.

On April 27, 2020, SAMHSA announced the awarding of $450 million in grant funding, including the $250 million for CCBHCs appropriated under the CARES Act. The following Texas providers received a total of $26.4 million in funding:

- Andrews Center (Tyler) - $3,784,318
- Burke Center (Lufkin) - $1,433,393
- The Center for Health Care Services (San Antonio) - $2,000,000
- Community Healthcare (Longview) - $4,000,000
- Emergence Health Network (El Paso) - $2,000,000
- Helen Farabee Centers (Wichita Falls) - $1,705,428
• Lakes Regional MHMR Center (Terrell) - $1,992,031
• LifePath Systems (McKinney) - $2,000,000
• MHMR of Tarrant County (Ft. Worth) - $4,000,000
• Pecan Valley Centers for Behavioral & Developmental HealthCare (Granbury) - $1,449,703
• Texoma Community Center (Sherman) - $1,997,460


Policing in a Pandemic: A Virtual Peer Support Series

The Meadows Mental Health Policy Institute (MMHPI) and Caruth Police Institute (CPI) recognize that the COVID-19 pandemic represents one of the biggest policing challenges in modern times. At a time when the public is taking measures to protect family and loved ones from exposure to the Coronavirus, first responders face the uncertainty of community exposure and in turn the fear of exposing their loved ones. In addition, first responders are facing increased workloads as they adapt to policing and emergency response models in a pandemic. This compounds the dynamic nature of first responder stress and fatigue at a time health, wellness, and resiliency are more critical than ever. To provide an immediate resource to first responders, we have established the Policing in Pandemic Virtual Peer Networking Series. MMHPI and CPI will host weekly interactive online events including nationally recognized peer specialists, health and wellness experts, and first responder wellness providers in a digital platform that provides anonymity to officers to join online, share experiences, hear from their peers, and get real time resources to address the impact of this new normal.

May 7: Scott and Renee Witt, authors of Good Cop Bad Love and founders of LawAndOrder4Life.Com discussing police officer communications and healthy transitions from work to home.

May 14: Nick Daughtery, founder of Serve and Protect Financial discussing overcoming the financial impact of COVID for law enforcement officers.

Please join us at 6:00 PM CST at: https://zoom.us/j/806383664.