

MMHPI COVID-19 Regulatory & Reimbursement Newsletter

Letter to Providers #28: State and Federal Updates – October 2, 2020

Contents

Texas Updates	2
Health Insurers to Continue Payment Parity for Telehealth	2
Updates to Some COVID-related Procedure Codes	2
Emergency Rule on Medication Refills Expires	3
New Guidance on Visitor Policies	3
Emergency ESRD Off-Site Facilities During the COVID-19 Pandemic	3
Extended Flexibilities	4
Expanding ASC Services	4
Certificate of Public Advantage for Qualifying Hospitals	4
Multilingual Prevention Resources.....	5
Federal Updates.....	5
Spread Among School-aged Children	5
COVID-19, Sex and Gender Data	5
Test Charges	6
Point-of-Care Antibody Test	6
In-flight Transmission	6

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

Health Insurers to Continue Payment Parity for Telehealth

Date	September 25, 2020
Summary	Gov. Abbott announced that Texas' major health insurers have agreed to continue reimbursing network health care providers for telehealth appointments at the same rate they pay for office visits through the end of 2020. The agreement is limited to health plans regulated by the Texas Department of Insurance (TDI), including the Employee Retirement System and the Teacher Retirement System health plans. ERISA plans are excluded. TDI's telemedicine emergency rule providing payment parity between telemedicine visits and in-person visits expired on September 12, 2020.
Link	https://gov.texas.gov/news/post/governor-abbott-announces-agreement-with-health-insurers-to-continue-payment-parity-for-telehealth

Updates to Some COVID-related Procedure Codes

Date	September 29, 2020
Summary	As part of the continued response to the COVID-19 public health emergency, diagnosis restrictions have been removed from the COVID-related procedure codes in this table on or after the dates of service listed in the table. Affected claims submitted on or after the listed date of service will be reprocessed, and providers may receive an additional payment, which will be reflected on future Remittance and Status (R&S) Reports.
Link	https://www.tmhp.com/news/2020-09-29-updates-some-covid-related-procedure-codes

Emergency Rule on Medication Refills Expires

Date	September 27, 2020
Summary	TDI's temporary emergency rule that made it easier to get refills and to get prescriptions at more locations, including by home delivery, expired September 27, 2020. The emergency rule required health plans regulated by TDI to: pay for a 90-day refill of covered medications regardless of when the prescription was last refilled, unless specifically prohibited by law; allow prescriptions to be filled at out-of-network pharmacies at no additional cost to the consumer if the drug was not available quickly through mail order or at an in-network pharmacy within 30 miles; allow substitutions if the plan's preferred drug was not available due to shortages or distribution issues; and waive any requirement for a consumer's signature unless specifically required by law.
Link	https://www.tdi.texas.gov/news/2020/tdi07162020.html

New Guidance on Visitor Policies

Date	September 25, 2020
Summary	<p>HHSC issued new emergency rules and guidance letters on reopening or expanded visitation for the following:</p> <ul style="list-style-type: none"> • General hospitals (guidance letter), • Psychiatric hospitals and crisis stabilization units (guidance letter), • Hospice inpatient units (rule, guidance letter), • Long-term care providers (guidance letter), • Assisted living facilities (rule), • Home and community-based services (HCS) (rule, guidance letter), and • Intermediate care facilities for individuals with an intellectual disability or related conditions (ICF/IIDs) (rule).

Emergency ESRD Off-Site Facilities During the COVID-19 Pandemic

Date	September 29, 2020
Summary	The Texas Health and Human Services Commission (HHSC) adopted an emergency rule in response to the COVID-19 disaster declaration. Under the new emergency rule, effective September 30, 2020, a currently licensed end stage renal disease (ESRD) facility may apply to temporarily operate an off-site outpatient facility without obtaining a new license in response to the COVID-19 pandemic.

Link | <https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/provider-portal/facilities-regulation/memos/gl-20-1012.pdf>

Extended Flexibilities

Expanding ASC Services

Date	September 23, 2020
Summary	HHSC amended and extended through January 21, 2021 an emergency rule permitting ambulatory surgical centers (ASCs) to expand their services beyond surgical services and keep patients for longer periods of time in response to the COVID-19 pandemic. Under the emergency rule originally issued on April 10, 2020, an ASC may provide surgical services and “other health care services to patients” and keep patients for longer than 23 hours. In addition, ambulatory surgical centers do not need to report patient transfers to hospitals and patient stays exceeding 23 hours.
Link	https://hhs.texas.gov/doing-business-hhs/provider-portals/health-care-facilities-regulation/guidance-memo/ambulatory-surgical-center-asc-services-reporting-requirements-response-covid-19

Certificate of Public Advantage for Qualifying Hospitals

Date	September 29, 2020
Summary	HHSC published GL 20-1000-A, related to the extension of emergency rules concerning the Certificate of Public Advantage (COPA) for qualifying hospitals. These rules implement Chapter 314A, Health and Safety Code, authorizing certain hospitals to apply for a COPA, which grants merging hospitals immunity from federal and state antitrust laws and provides the opportunity for hospitals in rural counties to remain open to treat patients during the COVID-19 pandemic.
Link	https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/provider-portal/facilities-regulation/memos/gl-20-1000-a.pdf

Multilingual Prevention Resources

Summary	The Texas Department of State Health Services (DSHS) has offered multilingual, public-facing messages to help providers promote COVID-19 prevention strategies and messaging in Spanish and Vietnamese. Hospitals can reach English and Spanish speakers with these COVID-19 prevention videos and social media messages . Hospitals also can reach Spanish, Vietnamese and English speakers with these printable posters .
Link	https://dshs.texas.gov/coronavirus/tools.aspx

Federal Updates

Spread Among School-aged Children

Date	September 28, 2020
Summary	The Centers for Disease Control and Prevention (CDC) issued a new report studying the incidence of spread among school-aged children. Since March, more than 277,000 COVID-19 cases in children have been reported. COVID-19 incidence among adolescents aged 12–17 years was approximately twice that in children aged 5–11 years. Some children may be at increased risk for severe illness, as children with reported Hispanic ethnicity, Black race, and underlying conditions were more commonly hospitalized or admitted to an intensive care unit (ICU).
Link	https://www.cdc.gov/mmwr/volumes/69/wr/mm6939e2.htm?s_cid=mm6939e2_w

COVID-19, Sex and Gender Data

Summary	A new database project, led by gender equity group Global Health 5050, is tracking COVID-19's effects on sex and gender. According to current disease information, more men than women are dying from COVID-19. Additional research will determine how the virus affects people of different gender identities or sexes.
Link	https://globalhealth5050.org/the-sex-gender-and-covid-19-project/the-data-tracker/

Test Charges

Date	September 15, 2020
Summary	A new study by the <i>Journal of General Internal Medicine</i> examined charges for COVID-19 tests and found that providers billed insurers \$144 on average for diagnostic tests. Prices range from one cent to \$14,750; Medicare's rate is \$51.
Link	https://link.springer.com/article/10.1007/s11606-020-06198-y

Point-of-Care Antibody Test

Date	September 23, 2020
Summary	The United States Food and Drug Administration (FDA) issued an emergency use authorization (EUA) for the first serology (antibody) point-of-care (POC) test for COVID-19. The Assure COVID-19 IgG/IgM Rapid Test Device was first authorized for emergency use by certain labs in July 2020 to help identify individuals with antibodies to SARS-CoV-2, indicating recent or prior COVID-19 infection. Yesterday, the EUA was reissued to authorize the test for POC use with fingerstick blood samples. This authorization means that fingerstick blood samples can now be tested in POC settings like hospitals, clinics, urgent care centers, and emergency rooms rather than having to be sent to a central lab for testing.
Link	https://www.fda.gov/news-events/press-announcements/coronavirus-covid-19-update-fda-authorizes-first-point-care-antibody-test-covid-19

In-flight Transmission

Date	September 21, 2020
Summary	Three new studies were recently published that examine in-flight COVID-19 transmission and risk based on seat proximity, industry guidelines, symptoms, and other factors.
Link	https://www.cidrap.umn.edu/news-perspective/2020/09/studies-trace-covid-19-spread-international-flights