

#### March 20, 2020

**ATTENTION: South Dakota Medicaid Providers** 

FROM: South Dakota Medicaid

RE: Coronavirus (COVID-19) Frequently Asked Questions

#### Coronavirus (COVID-19) Frequently Asked Questions

This FAQ highlights covered services, coverage requirements, new coverage flexibilities being offered in response to the COVID-19 pandemic. Coverage outlined below is effective beginning March 13, 2020 unless otherwise noted.

### Where can I get information and updates about the coronavirus and COVID-19?

Information is available from the Centers for Disease Control (CDC) at <a href="https://www.cdc.gov/coronavirus/2019-ncov/hcp/clinical-guidance-management-patients.html">https://www.cdc.gov/coronavirus/2019-ncov/hcp/clinical-guidance-management-patients.html</a>

Information about South Dakota's response and updates about the coronavirus (COVID-19) is available from the South Dakota Department of Health at <a href="https://doh.sd.gov/news/Coronavirus.aspx">https://doh.sd.gov/news/Coronavirus.aspx</a>

# Does Medicaid cover testing for coronavirus (COVID-19)?

Yes. South Dakota Medicaid will cover testing for coronavirus (COVID-19) without cost sharing requirements.

#### What code should providers use to bill testing for coronavirus (COVID-19)?

Providers should use the applicable newly designated HCPCS codes U0001 or U0002 to bill for testing for coronavirus (COVID-19). South Dakota Medicaid will accept these codes starting April 1, 2020 for services provided on or after February 4, 2020.

#### What is the reimbursement rate for the test for coronavirus (COVID-19)?

South Dakota Medicaid's maximum allowable reimbursement rate for HCPCS code U0001 will be \$35.91 and \$51.31 for U0002. The rates are based on the South Dakota's Medicare Administrative (MAC) contractor rate.

#### Will HCPCS U0001 and U0002 be available retroactively for billing?

Yes, South Dakota Medicaid will follow Medicare's policy and make the code retroactively effective on February 4, 2020. The codes may be billed beginning April 1, 2020.

# Is a telemedicine visit covered?

The Department of Social Services does not exclude, deny benefits to, or otherwise discriminate against any person on the basis of actual or perceived race, color, religion, national origin, sex, age, gender identity, sexual orientation or disability in admission or access to, or treatment or employment in its programs, activities, or services. For more information about this policy or to file a Discrimination Complaint you may contact: Discrimination Coordinator, Director of DSS Division of Legal Services, 700 Governor's Drive, Pierre SD 57501, 605-773-3305.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-305-9673 (TTY: 711).

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-800-305-9673 (TTY: 711).

Yes, South Dakota Medicaid covers telemedicine services. The originating site and the distant site may be located in the same community if:

- The recipient resides in a nursing facility and the nursing facility is the originating site; or
- Telemedicine is being utilized primarily to reduce the risk of exposure of the provider, staff, or others to infection. Services may be provided via telemedicine when the distant site and originating site are in the same community to reduce the risk of exposure to COVID-19.

More information about telemedicine coverage is available in the <u>Telemedicine Billing and Policy</u> <u>Manual</u>.

# Is a telemedicine visit covered if the patient participates from their home?

Yes, the distant site service is covered even when the patient participates from home. When the patient participates from home, there is no reimbursement for a facility fee.

### Is a telemedicine visit covered for occupational therapy and physical therapy?

South Dakota Medicaid has added temporary coverage of occupational therapy and physical therapy via telemedicine for patients at high risk for COVID-19 or under quarantine or social distancing during a declared emergency for COVID-19. Therapy services may only utilize telemedicine if the patient and provider have previously met for in-person services. Use of telemedicine for the convenience of the provider or recipient is not covered.

South Dakota Medicaid has updated the Telemedicine Billing and Policy Manual to allow coverage for CPT codes 97530, 97110, and 97112. Telemedicine coverage is also available for school districts under CPT codes 97799 and 97139. Providers must document the reason that telemedicine is indicated and treatment modifications used to support delivery of occupational and physical therapy via telemedicine.

# Is an audio-only telemedicine visit covered?

South Dakota Medicaid has added temporary coverage of audio-only telemedicine behavioral health services delivered by a Substance Use Disorder (SUD) Agency, a Community Mental Health Center (CMHC), or an Independent Mental Health Practitioner (IMHP) when the following circumstances exist:

- The provider or recipient is at high risk for COVID-19 19 or under quarantine or social distancing during a declared emergency for COVID-19; **and**
- The recipient does not have access to face-to-face audio/visual telemedicine technology (including smart phone, tablet, computer, or WIFI/internet access.

SUD agencies, CMHCs, and IMHPs must utilize traditional audio/visual telemedicine technology when possible. Audio-only telemedicine is not covered when used for the convenience of the provider or recipient. Providers must document both conditions for the use of audio-only technology in the medical record. SUD agencies and CMHCs may contact the Division of Behavioral Health via email at <u>DSSBH@state.sd.us</u> with further questions regarding the use of audio-only telemedicine technology.

We are actively evaluating audio-only telemedicine visits for other services in light of the COVID-19 pandemic, with the intent to provide additional flexibility where possible.

# Can telemedicine be provided using everyday technology like Skype and FaceTime?

DSS is following the <u>guidance</u> released by Medicare and HHS Office for Civil Rights (OCR). OCR is exercising enforcement discretion and waiving penalties for HIPAA violations against health care

providers that serve patients in good faith through everyday communications technologies, such as FaceTime or Skype, during the COVID-19 nationwide public health emergency. South Dakota Medicaid recommends providers provide telemedicine services via a HIPAA compliant platform, but on a temporary basis is affording providers the same flexibility offered by OCR during the COVID-19 pandemic.

# Can recipients get extra medicine or supplies?

Effective 03/16/2020 South Dakota Medicaid will implement the following changes to the outpatient retail prescription benefit for all medications as allowed by federal or state law:

- 1. The early refill threshold will be reduced to 50%. This will allow a prescription to be refilled after 50% usage. For example, a 30 day supply can be refilled 15 days (50% of 30) after the previous fill date.
- 2. Prescriptions may be filled for up to a 60 day supply.

These changes are temporary and are subject to change or termination at any time. All applicable federal and state laws for prescribing and dispensing still apply.

Providers may dispense a 60-day supply of oxygen supplies (CPT codes E0424, E0431, E0433, E0434, E0439, E0441, E0442, E0443, E0444, E1390, E1391, E1392, E1405, E1406, K0738) and diabetic supplies for recipients at high risk of COVID-19 or under quarantine or social distancing during a declared emergency for COVID-19.

Providers may submit claims for a 60-day supply of oxygen supplies through the portal or via paper.

- Paper claims for dispensing 60-day supply for oxygen supplies may be submitted with future service dates.
- Claims submitted on the portal will need to wait to be submitted until after the last day of the span date.

We are actively evaluating current dispensing limits for other services in light of the COVID-19 pandemic, with the intent to provide additional flexibility where possible.