



Maryland

DEPARTMENT OF HEALTH

Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Robert R. Neall, Secretary

Date: March 26, 2020

To: All Medicaid Provider Types, Medicaid Managed Care Organizations, Optum Behavioral Health ASO

From: Jill Spector, Director
Medical Benefits Management *Jill Spector*

Re: COVID-19 Information and Updates

Note: Please ensure that appropriate staff members in your organization are informed of the contents of this memorandum.

This transmittal provides information and updates from the Maryland Medical Assistance Program (Medicaid) related to the novel coronavirus (COVID-19) state of emergency.

COVID-19 Lab Testing and Reimbursement

On March 20, 2020, Secretary Neall issued an Order stating that anyone meeting the Centers for Disease Control and Prevention (CDC) criteria to be tested for COVID-19 receive testing from all providers offering the service, regardless of the individual's ability to pay, type of health insurance, or participation in any provider network. See here:

<https://phpa.health.maryland.gov/Documents/03.20.2020%20COVID-19%20Tests%20MDH%20Sec%20Neall%20Order.pdf>

The Centers for Medicare and Medicaid Services (CMS) have identified two new HCPCS codes to use for COVID-19 laboratory testing. Medicaid fee-for-service (FFS) will reimburse for these codes at 100% of Medicare charges for dates of service on or after February 4, 2020.

HCPCS Code	Description	Reimbursement Rate
U0001	Reimbursement for using the CDC 2019 Novel Coronavirus Real Time RT-PCR Diagnostic Test Panel	\$35.92
U0002	Reimbursement for 2019-nCoV Coronavirus, SARS-CoV-2/2019-nCoV testing using any technique, multiple types, or subtypes (includes all targets)	\$51.33

Change to the Medicaid HealthChoice Helpline

Due to the state of emergency, the Maryland Medicaid HealthChoice Helpline is moving to email until further notice. For help, HealthChoice participants can email mdh.hchelpline@maryland.gov and should include their names, a number where they may be reached, and a brief summary of their issue in the mail. HealthChoice Helpline staff will then call the participant to assist with their issue. "No caller ID" may show when staff return the call. This email is only for the Medicaid HealthChoice Helpline.

Administrative Care Coordination Units (ACCUs) and Medicaid Referrals

Local health departments have been instructed to limit activities involving contact with the general public, and some local health departments have switched to telework arrangements in response to Governor Hogan's directive to all non-essential State personnel. Effective March 12, 2020, the Maryland Department of Health (MDH) instructed local ACCUs to suspend all face-to-face communication with participants and home visits until further notice. ACCU staff will continue to perform telephonic and written outreach to participants in response to referrals from MCOs and other sources.

Non-Emergency Medical Transportation Guidance

Effective March 18, 2020, MDH issued guidance regarding the provision of non-emergency medical transportation (NEMT). To the extent that local health departments can operate NEMT programs remotely, all dialysis, radiation, chemotherapy, physical therapy, substance use disorder, counseling, or other recurring transportation services will continue to be provided as scheduled. All other transports to non-urgent services will be postponed, and other normal routine visits will not be scheduled until April 6, 2020 at the earliest. If an appointment cannot be postponed, or a clinician calls to request the patient be present for services, the transport request will be honored.

For more information, including the relaxation of cancellation policies should someone exhibit COVID-19 symptoms or have contact with someone with symptoms, please visit the following link:

<https://mmcp.health.maryland.gov/SiteAssets/pages/home/COVID-19%203Md.%20Medicaid%20NEMT%20Guidance.pdf>

Administrative Flexibilities and COVID-19

MDH is in the process of requesting temporary waivers of Medicaid program requirements under Section 1135 of the Social Security Act. Separate and apart from the 1135 waiver, MDH is permitted flexibility to waive or relax program requirements for MCOs under the authority of the HealthChoice MCO Agreement until the state of emergency period ends. Below are some of the areas where MDH intends to exercise administrative flexibility. More information regarding administrative flexibility will be distributed in future guidance.

Recipient Eligibility

In response to COVID-19, MDH is postponing redeterminations for March 2020 to April 30, 2020. MDH will re-evaluate the need to postpone redeterminations on a monthly basis so Medicaid participants may maintain coverage during the state of emergency. All eligibility-related disenrollments for current Medicaid participants will be suspended on a rolling basis until further notice.

Please be advised that if a Medicaid participant requests services and does not have a Medicaid identification card or number available, providers are encouraged to check the Eligibility Verification System by dialing 1-866-710-1447 or visiting www.emdhealthchoice.org.

Pharmacy

In order to comply with the directive from Governor Hogan issued on March 6, 2020, the Office of Pharmacy Services (OPS) relaxed the early refill edits that are currently in place for the FFS Program and allow a one-time early refill of at least 30-day supply of the participant’s medication (up to 90-day supply for maintenance medication) before the participant uses 85% of their medication on March 10, 2020.

MCOs have also worked with their Pharmacy Benefit Managers (PBMs) to implement the same early refill protocols. This policy will be effective until further notice from MDH.

Temporary Telehealth Expansion

Governor Hogan and Secretary Neall have permitted critical temporary expansions of Medicaid telehealth services to connect Medicaid participants with needed care during the state of emergency.

Providers who are not able to meet in-person with a participant should make every effort to use the following technology, in order of priority:

1. Traditional telehealth technology which meets all formal requirements is strongly preferred. (These services remain unaffected by the measures in this guidance).
2. If Medicaid participants are unable to access originating sites possessing fully qualified technology (ability to pan/focus camera, multiple views, etc.) this emergency policy will permit the use of notebook computers, smartphones, or audio-only phones.
3. If Medicaid participants cannot access cellular phone-based video technology, audio-only telephone calls will be permitted.

Audio-only telephone services, or services using video applications that do not meet State regulations, may only be delivered with the explicit consent of the participant. Participants must be provided with a clear explanation of the telehealth or voice service and its confidentiality limitations, including the use of non-HIPAA compliant technology. Providers must ensure that this is documented in the Medicaid participant’s medical record. Attention to ensuring that participants’ confidentiality is protected in terms of private space, etc., must be a priority.

The following codes and modifiers should be used when billing telehealth:

Telehealth Service Delivery Type	CPT Code(s)	Modifier	Place of Service
Two-way audio-visual technology assisted communication	Traditional code for the covered service	-GT modifier	11 (Office)
Audio-only communication	99211, 99212, or 99213	-UB modifier	11 (Office)

Please review the guidance issued for more information about telehealth requirements during the state of emergency, including issuing prior authorizations and rendering covered services within provider scope of practice:

- COVID-19 #1: Temporary Expansion of Medicaid Regulations to Permit Delivery of Telehealth Services to the Home to Mitigate Possible Spread of Novel Coronavirus (“COVID-19”) (Effective March 11, 2020), https://phpa.health.maryland.gov/Documents/COVID-19.1_Telehealth%20Guidance_Neall.pdf
- COVID-19 #4a (Somatic Health Providers): Temporary Authorization of Audio-Only Health Care Services to Mitigate Possible Spread of Novel Coronavirus (“COVID-19”) (Effective March 21, 2020), https://mmcp.health.maryland.gov/SiteAssets/pages/home/COVID-19%204a_Telephonic%20Services%20Guidance_3.21.20.pdf
- COVID-19 #4b (Behavioral Health Providers): Temporary Authorization of Audio-Only Health Care Services to Mitigate Possible Spread of Novel Coronavirus (“COVID-19”) (Effective March 21, 2020), https://mmcp.health.maryland.gov/SiteAssets/pages/home/COVID-19%20%204b_Telephonic%20Services%20Guidance_3.21.20%20Final.pdf
- COVID-19 #4c (Psychiatric Rehabilitation Programs): Temporary Authorization of Audio-Only Health Care Services to Mitigate Possible Spread of Novel Coronavirus (“COVID-19”) (Effective March 21, 2020), https://mmcp.health.maryland.gov/SiteAssets/pages/home/COVID-19%204c_PRP%20Telephonic%20Services%20Guidance_3.21.20%20Final.pdf

HealthChoice Quality Assurance Activities

MDH is postponing the following Maryland HealthChoice Program quality assurance activities until further notice due to COVID-19 responsibilities for MCOs and providers:

- MCO Network Adequacy Validation
- Early and Periodic Screening, Diagnosis, and Treatment (EPSDT)/Healthy Kids Medical Record Review
- Administration of the Primary Care Provider Satisfaction Survey

Information about other HealthChoice quality assurance activities will be available in future guidance.

For Medicaid-related Coronavirus updates, visit mmcp.health.maryland.gov.

For questions about the Coronavirus, visit coronavirus.maryland.gov.

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