

COVID-19 information from Amerigroup Community Care (June 4 update)

Amerigroup is closely monitoring COVID-19 developments and how they will impact our customers and our health care provider partners. Our clinical team is actively monitoring external queries and reports from the Centers for Disease Control and Prevention (CDC) and Maryland Department of Health to help us determine what action is necessary on our part.

Summary

COVID-19 testing and visits associated with COVID-19 testing

Amerigroup will cover reasonable member health care costs related to COVID-19. Tests samples may be obtained in many settings including a doctor's office, urgent care, ER or even drive-thru testing once available. While a test sample cannot be obtained through a telehealth visit, the telehealth provider can connect members with testing.

Telehealth:

Amerigroup is following the communication on telehealth visits per Maryland Department of Health (MDH). MDH telehealth communications can be located on the Provider portal at the following URL: <https://providers.amerigroup.com/pages/md-2012.aspx>.

Prescription coverage

Amerigroup is also providing coverage for members to have an extra 30-day supply of medication on hand. We are encouraging that when member plans allow, they switch from 30-day home delivery to 90-day home delivery.

Frequently asked questions

Action taken by Amerigroup

What is Amerigroup doing to prepare?

Amerigroup is committed to help provide increased access to care to help alleviate the added stress on individuals, families and the nation's healthcare system.

These actions are intended to support the protective measures taken across the country to help prevent the spread of COVID-19 and are central to our commitment to remove barriers and support communities through this unprecedented time.

Amerigroup is committed to help our members gain timely access to care and services in a way that places the least burden on the healthcare system. Our actions should reduce barriers to seeing a doctor, getting tested and maintaining adherence to medications for long-term health issues.

How is Amerigroup monitoring COVID-19?

<https://providers.amerigroup.com>

Amerigroup is monitoring COVID-19 developments and what they mean for our associates and those we serve. We are fielding questions about the outbreak from our customers, members, providers and associates. Additionally, our clinical team is actively monitoring external queries and reports from the Centers for Disease Control and Prevention to help us determine what, if any, action is necessary on our part to further support our stakeholders.

Amerigroup has a business continuity plan for serious communicable disease outbreaks, inclusive of pandemics, and will be ready to deploy the plan if necessary.

Our enterprise-wide business continuity program includes recovery strategies for critical processes and supporting resources, automated 24/7 situational awareness monitoring for our footprint and critical support points, and the Virtual Command Center for Emergency Management command, control and communication.

In addition, Amerigroup has established a team of experts to monitor, assess and help facilitate timely mitigation and response where it has influence as appropriate for the evolving novel coronavirus threat.

In case of mass epidemic, how can you ensure that your contracted providers can still provide services?

Amerigroup is committed to working with and supporting its contracted providers. Our benefits already state that if members do not have appropriate access to network doctors we will authorize coverage for out-of-network doctors as medically necessary.

Is Amerigroup making any additional changes to its prior authorization requirements to assist providers during the COVID-19 national emergency?

Amerigroup is committed to working with and supporting providers. As of March 16, Amerigroup is removing prior authorization requirements for skilled nursing facilities (SNF) for 90 days to assist hospitals in managing possible capacity issues. SNF Providers should continue admission notification to Amerigroup in an effort to verify eligibility and benefits for all members prior to rendering services and to assist with ensuring timely payments.

In addition, Amerigroup is also extending the length of time a prior authorization is in effect for elective inpatient and outpatient procedures to 90 days. This will help prevent the need for additional outreach to Amerigroup to adjust the date of service covered by the authorization.

COVID-19 testing

When member cost sharing has been waived as outlined in this FAQ for COVID-19 testing and visits associated with COVID-19 testing, telehealth (video + audio) services, and in-network telephonic-only services, how does that impact provider reimbursement?

Amerigroup will process the claim, as it does, for example, with preventative health services.

How is Amerigroup reimbursing participating hospitals that perform COVID-19 diagnostic testing in an emergency room or inpatient setting?

Reimbursement for COVID-19 testing performed in a participating hospital emergency room or inpatient setting is based on existing contractual rates.

What codes would be appropriate for COVID-19 lab testing?

Amerigroup is encouraging providers to bill with codes U0001, U0002, U0003, U0004, 86328, 86769, or 87635 based on the test provided.

How is Amerigroup reimbursing participating hospitals which are performing COVID-19 diagnostic testing in a drive thru testing setting?

Based on standard AMA and HCPCS coding guidelines, for participating hospitals with a lab fee schedule, Amerigroup will recognize the codes 87635 and U0002, and will reimburse drive thru COVID-19 tests according to the lab fee schedule. Participating hospitals without lab fee schedules will follow the same lab testing reimbursement as defined in their facility agreement with Amerigroup.

Does Amerigroup require a prior authorization on the focused test used to diagnose COVID-19?

No, prior authorization is not required for diagnostic services related to COVID-19 testing.

Virtual, telehealth and telephonic care

What services are appropriate to provide via telehealth?

- Amerigroup covers telehealth services for providers who have access to those platforms/capabilities today and will continue coverage through September 30, 2020.
- Amerigroup is following the communication on telehealth visits per Maryland Department of Health (MDH). MDH telehealth communications can be located on the Provider portal at the following URL: <https://providers.amerigroup.com/pages/md-2012.aspx>.

Will Amerigroup cover telephone- only services in addition to telehealth via video + audio?

Yes. Amerigroup is following the communication on telehealth visits per Maryland Department of Health (MDH). MDH telehealth communications can be located on the Provider portal at the following URL: <https://providers.amerigroup.com/pages/md-2012.aspx>.

What codes would be appropriate to consider for a telehealth visit with a patient who wants to receive health guidance related to COVID-19?

Amerigroup is following the communication on telehealth visits per Maryland Department of Health (MDH). MDH telehealth communications can be located on the Provider portal at the following URL: <https://providers.amerigroup.com/pages/md-2012.aspx>.

How can members get in touch with Amerigroup if they have health questions?

Amerigroup members also can call the 24/7 Nurse HelpLine at the number listed on their Amerigroup ID card to speak with a registered nurse about health questions.

Coding, billing and claims

Does Amerigroup have recommendations for reporting, testing and specimen collection?

The CDC updates these recommendations frequently as the situation and testing capabilities evolve. See the latest information from the CDC: <https://www.cdc.gov/coronavirus/2019-nCoV/hcp/clinical-criteria.html>.

What diagnosis codes would be appropriate to consider for a patient with known or suspected COVID-19?

The CDC has provided coding guidelines related to COVID-19: <https://www.cdc.gov/nchs/data/icd/ICD-10-CM-Official-Coding-Guidance-Interim-Advice-coronavirus-feb-20-2020.pdf>.

What diagnosis codes would be appropriate to consider for a patient with known or suspected COVID-19 for services where a member's cost shares are waived?

The CDC has provided coding guidelines related to COVID-19 <https://www.cdc.gov/nchs/data/icd/COVID-19-guidelines-final.pdf>.

Does Amerigroup expect any slowdown with claim adjudication because of COVID-19?

We are not seeing any impacts to claims payment processing at this time.

Other

Are you aware of any limitations in coverage for treatment of an illness/virus/disease that is part of an epidemic?

Our standard health plan contracts do not have exclusions or limitations on coverage for services for the treatment of illnesses that result from an epidemic.

How does a provider submit a telehealth visit with an existing patient that lives in a bordering state?

For providers in bordering states who were previously seeing members in approved locations that met state and/or CMS billing requirements, effective March 17, 2020, until September 30, 2020, you may submit your telehealth claim using the primary service address where you would have normally seen the member for the face-to-face visit.

Should providers who are establishing temporary locations to provide health care services during the COVID-19 emergency notify Amerigroup of the new temporary address?

Providers should use the provider's location when determining the appropriate POS code to bill. Permitted places of service from where to deliver services via telehealth include school (03), office (11), inpatient hospital (21), outpatient hospital (22), emergency room (23), nursing facility (32), independent clinic (49), Federally Qualified Health Center (FQHC) (50), community mental health center (53), non-residential substance abuse treatment facility (57), end-stage renal disease treatment facility (65), and public health clinic (71).

Maryland Medicaid does not accept or use POS code 02 for telehealth. Providers working from a home office to provide services via telehealth should use POS 11 for office and not POS 12 for home.