

Coronavirus (COVID-19) FAQs for Sanford Health Plan Providers



In the midst of the evolving COVID-19 outbreak, we are dedicated to keeping you informed about the latest coverage and updates as partners in care. Here are some things you should know.

Telemedicine Expansion

Given that COVID-19 is a communicable disease, patients are encouraged to utilize Telemedicine as much as possible instead of going in to their provider's office. As a part of Sanford Health Plan, all Members have access to Telemedicine services and we are strongly encouraging their use at this time.

As part of our pledge to help Members receive suitable access to needed health care services, we are now offering all expanded Telemedicine services at no cost-share to the Member. All e-visits, video visits, and telehealth visits are covered for the Member at 100% when received from a participating provider. This coverage is applied to Sanford Health Plan's fully-insured product line.

Does this include all services, even those not related to COVID-19?

Yes, all covered services are eligible regardless of diagnosis if they are medically appropriate to do via Telehealth.

Is all cost-share waived during this time?

Yes, all medically appropriate telemedicine visits are covered at 100%.

Does this include phone conversations with patients?

Yes, audio-only to audio-only is covered at no cost to the Member.

Can providers utilize FaceTime to perform services?

Providers are responsible for their compliance with HIPAA and other requirements to protect patient privacy and safety. As long as HSS and OCR are not monitoring for or enforcing HIPAA compliance, Sanford Health Plan will cover telemedicine services in accordance with what is allowable for the duration of the COVID-19 public health emergency.

Are the state licensure requirements for physicians waived for telemedicine/telehealth?

As long as the COVID-19 National Emergency is in effect, the state of North Dakota and Iowa and the Medicaid/Medicare programs will allow health coverage from providers who are not licensed in the state in which the member is receiving the services. The provider must still be licensed in at least one state and in good standing. South Dakota will allow physicians to provide services without a South Dakota license if they are licensed in surrounding states and in good standing. The state of Minnesota has not issued a waiver granting licensure exemption at this time.

Will reimbursement for Telemedicine visits where the patient is at home be the same as an in-person visit?

No, providers will still be paid according to their current reimbursement schedule. Sanford Health Plan will reimburse claims when coding according to accepted standards adopted by the National Center for Health Statistics, the American Health Information Management Association, the American Hospital Association and the Centers for Medicare & Medicaid Expansion.

Where can I find more information related to reimbursement for telehealth visits?

Reimbursement for Telehealth is subject to a provider's current contract, but the list of expanded telehealth services changed and is available on our website.

Is SHP going to accept the CS modifier that CMS has recently released to identify COVID-19 Claims?

Yes, SHP is asking that providers submit COVID-19 claims using the CS Modifier to identify those line items as charges subject to the cost sharing waiver.

What date of service can the CS modifier be included for?

SHP has a start date of March 13, 2020 for all COVID-19 and Telehealth related claims.

Do I have to resubmit COVID-19 claims that were filed prior to the release of the CS Modifier?

No, if claims were submitted with the appropriate CPT's (lab test U0001, U0002 or 87635) on previous claims, those claims will be identified and paid according to COVID-19 rules.

Will you be requiring the CS modifier on claims outside of testing related visits?

Yes, include the CS modifier on all COVID-19 related claims. SHP will also identify Institutional claims by the DR modifier.

If a provider bills both a Flu test & a COVID-19 test on same claim how will SHP reimburse?

SHP will cover the COVID-19 that includes the CS modifier at the 100% cost share rules and then regular Flu test will pay according to normal member benefits.

Will SHP be covering rule-out testing through the CARES Act?

SHP will cover rule-out testing (i.e. flu, strep, etc) at no cost share to the member when done in conjunction with COVID-19 testing or during the same date. Effective March 13, 2020.

Will SHP cover remote patient monitoring for COVID-19 positive patients?

Yes, SHP will cover home monitoring at no cost to the member until June 30 because SHP has pledged to waive all COVID-19 related treatment at no cost until June 30, 2020.

Will SHP be following the CMS waiver and granting a 20% increase in DRG payments for COVID-19 discharges?

SHP will continue to reimburse at the current contractual rates.

Are local public health units able to bill SHP for beneficiaries who received COVID-19 testing done at a community testing event?

Yes, SHP will reimburse them at the standard non-contracted provider reimbursement rate.

Will SHP waive the rule that certain COVID-19 diagnostic tests will be covered based on the order of the treating physician?

Yes, SHP will cover diagnostic testing ordered by any health care professional authorized to do so under state law.

Will SHP cover COVID-19 services at a relocated department?

Yes, SHP will cover COVID-19 services billing during the public health emergency from a relocated off-campus location.

Can hospital and community mental health center staff provide outpatient therapy, counseling and education services during COVID-19 to a SHP member in their home or other temporary location using telephone technology?

Yes, SHP will temporarily allow during COVID-19.

Will SHP be revising or reducing reimbursement on DME?

No, SHP will follow rules on the CARES Act on DME and not revise reimbursement during the time frame of the public health emergency.

Will SHP reimburse audio-only E&M codes as if they were onsite office visits?

Yes, on an interim basis, SHP will pay the 99441-99443 codes as if services were given as a normal 99212-99214 visit onsite.

Will SHP cover COVID-19 testing that is administered outside of the health care office setting?

Yes, SHP will cover the tests and the lab processing fees of self-collected COVID-19 tests that are FDA approved for self-collection.

What code do I bill as a hospital outpatient department for collection to physicians, non-physicians, practitioners and hospitals?

SHP will accept the same code as CMS, HCPCS code C9803: Hospital outpatient clinic visit specimen collection for severe acute respiratory syndrome coronavirus 2 (sars-cov-2) (coronavirus disease [covid19]), any specimen source.