

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

Through 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 Update**

During the COVID-19 Public Health Emergency, Sanford Health Plan was proud to support temporarily enhanced access for members to receive health care safely and conveniently. Effective June 15, 2021, Telehealth Coverage reverted to how it was covered pre-COVID-19.

Sanford Health Plan members still have access to Telehealth and Virtual Care options. Click [here](#) to learn more.

### **Telehealth Updates Effective June 15, 2021;**

1. Sanford Health Plan will no longer cover Telephone/Audio Only Services (CPT Codes; 98966, 98967, 98968, 99441, 99442, 99443)
2. Telehealth services returned to cover at cost-share based on Member's plan (previously were no cost to all Members regardless of Plan)
3. Sanford Health Plan will continue excluding acupuncture, chiropractic and dental from Telehealth coverage

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

As long as the COVID-19 Federal Public Health Emergency is in effect, The Centers for Medicare & Medicaid Services (CMS) has issued multiple waivers providing flexibility (e.g., geographic location, type of health site) during the pandemic and granting payment parity between telehealth and in-person clinical care for Medicare. Medicaid programs are administered at the state level and states can choose whether to cover telehealth services as an alternative to traditional in-person methods of care.

- Iowa's state of emergency that allowed out-of-state license waivers for Telehealth will expire on August 22, 2021, per the state's July 24, 2021, Emergency Proclamation.
- Minnesota will no longer be processing applications for out-of-state Telehealth registration effective May 6, 2021.
- North Dakota's state of emergency that allowed out-of-state licensure for Telehealth rescinded on April 30, 2021.
- South Dakota's state of emergency that allowed out-of-state licensure for Telehealth expired on June 30, 2021.

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

Reimbursement for Telehealth is subject to a provider's current contract. You will find general information regarding telehealth services in our reimbursement policy that is posted on our secure portal. The policy is named "MemE-REB-029 Telehealth Benefit Reimbursement". It is important to note that also per this policy, "Reviewers utilizing this policy must first establish

the Member's eligibility, identify any state and/or federal regulatory requirements, and reference the Member's plan benefit plan documents (Summary Plan Description, Certificate of Insurance and Formulary) prior to use of this policy."

### **Is Sanford Health Plan going to accept the CS modifier that CMS has recently released to identify COVID-19 Claims?**

Yes, Sanford Health Plan 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.

### **For what date of service can the CS modifier be included?**

Sanford Health Plan 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 CPTs (lab test U0001, U0002 or 87635) on previous claims, those claims will be identified and paid according to COVID-19 rules.

### **Does Sanford Health Plan cover COVID-19 testing for surveillance (e.g., travel, entertainment, etc.) or employment purposes?**

No, COVID-19 testing is only covered at 100% when the testing is being performed for individualized diagnosis or treatment purposes. When being conducted to screen for general workplace health and safety, for public health surveillance, or for other purposes not related to individualized diagnosis or treatment, the test is not covered.

### **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. Sanford Health Plan 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 Sanford Health Plan reimburse?**

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

### **Will Sanford Health Plan be covering rule-out testing through the CARES Act?**

Sanford Health Plan 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 Sanford Health Plan be following the CMS waiver and granting a 20% increase in DRG payments for COVID-19 discharges?**

We will continue to reimburse at the current contractual rates.

### **Are local public health units able to bill Sanford Health Plan for beneficiaries who received COVID-19 testing done at a community testing event?**

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

### **Will Sanford Health Plan cover COVID-19 services at a relocated department?**

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

### **Will Sanford Health Plan be revising or reducing reimbursement on DME?**

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

### **Will Sanford Health Plan cover COVID-19 testing that is administered outside of the health care office setting?**

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

Effective Jan. 15, 2022, Sanford Health Plan will reimburse members for the cost of up to eight over the counter at-home COVID-19 tests per calendar month. View more information on at-home tests at [sanfordhealthplan.com/covid-19](https://sanfordhealthplan.com/covid-19).

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

Sanford Health Plan 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.