



## Provider Bulletin

January 2021

# Information from Optimum Healthcare for Care Providers About COVID-19 (UPDATED January 5, 2021)

**Optimum Healthcare will update FAQs as more information becomes available.**

Optimum Healthcare is closely monitoring COVID-19 developments and what it means for our customers and our healthcare provider partners. Our clinical team is actively monitoring external queries and reports from the Centers for Disease Control and Prevention (CDC) to help us determine what action is necessary on our part.

To help address care providers' questions, Optimum Healthcare has developed the following frequently asked questions:

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### **Update Summary**

#### **Prior authorization changes:**

Optimum Healthcare is committed to working with and supporting providers. As of April 6, 2020, Optimum Healthcare is removing prior authorization requirements for inpatient transfers to lower levels of care for the next 90 days to assist hospitals in managing possible capacity issues. Providers must continue admission notification to Optimum Healthcare in an effort to verify eligibility and benefits for all members prior to rendering services and to assist with ensuring timely payments.

**Concurrent review for discharge planning** will continue unless required to change by federal or state directive.

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

Optimum Healthcare will waive cost shares for the COVID-19 test and visits associated with the COVID-19 test, including visits to determine if testing is needed. Test 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 help you get to a provider who can do so.

**Optimum Healthcare Waives Cost Share for COVID-19 Treatment** During these challenging times, Optimum Healthcare remains committed to living up to our values and supporting those we serve, which includes making it as easy as possible for care providers to focus on what's important right now, keeping the country healthy. In addition to the proactive steps Optimum Healthcare has already taken to support care providers and protect our members, associates and communities against COVID-19, effective April 1, we will expand coverage for our members undergoing treatment related to COVID-19 diagnosis.

The expansion covers the waiver of cost shares for COVID-19 treatment received through January 31, 2021. Optimum Healthcare will reimburse health care providers at in-network rates or Medicare rates, as applicable.

**Telehealth (video + audio):**

Effective from March 17, 2020 through January 31, 2021, Optimum Healthcare will waive member cost shares for telehealth visits from in-network providers, including visits for mental health or substance use disorders. For out-of-network providers, Optimum Healthcare is waiving cost shares from March 17 through June 14, 2020.

**Telephonic-only care**

Effective from March 19, 2020 through March 31, 2021, Optimum Healthcare will cover telephonic only visits with in-network providers. Out-of-network coverage will be provided where required. This includes covered visits for mental health or substance use disorders and medical services. Cost shares will be waived for in-network providers only. Exceptions include chiropractic services, physical, occupational, and speech therapies. These services require face-to-face interaction and therefore are not appropriate for telephone-only consultations.

## Frequently asked questions

### **Optimum Healthcare's Actions**

#### **What is Optimum Healthcare doing to prepare?**

Optimum Healthcare is committed to help provide increased access to care, while eliminating costs and 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 the commitment of Optimum Healthcare's affiliated health plans to remove barriers for their members and support communities through this unprecedented time.

Optimum Healthcare 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.

We are lifting out-of-pocket costs for members to:

- see a telehealth provider for physical or behavioral health
- access diagnostic testing for COVID-19
- visit a doctor's office, urgent care or emergency department to get tested

We are also providing coverage for members to have an extra 30-day supply of medication on hand. We are encouraging members to switch from 30- day home delivery to 90-day home delivery, when allowed.

#### **How is Optimum Healthcare monitoring COVID-19?**

Optimum Healthcare 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.

Optimum Healthcare 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, Optimum Healthcare 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?**

Optimum Healthcare 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 that we will authorize coverage for out-of-network doctors as medically necessary.

**COVID-19 Testing**

**Will Optimum Healthcare cover member out-of-pocket costs related to testing and related visits for COVID-19?**

Out-of-pocket expenses—inclusive of copays, coinsurance and deductibles for COVID-19—are waived for tests and related visits, including visits to determine if testing is needed. 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 help you get to a provider who can do so.

**Does Optimum Healthcare 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.

**Coding, billing and claims**

**Does Optimum Healthcare 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-Gudance-Interim-Advice-coronavirus-feb-20-2020.pdf>

**Does Optimum Healthcare expect any slowdown with claim adjudication because of COVID-19?** We are not seeing any impacts to claims payment processing at this time.