

Vantage Health Plan, Inc. COVID-19 Provider Notices

We want to thank our providers for sharing their challenges, concerns, and experiences relating to COVID-19. We are responding to this information by making the following changes to the way we process claims. We have also had providers questioning how other providers are dealing with the COVID-19 challenge in their offices. Some of the things we have learned are listed below.

Notice #4, March 23, 2020:

Due to changing circumstances, we are providing the following update to our COVID-19 telemedicine policy:

Telemedicine Office Visits for all patients:

- Telemedicine visits should be billed with **CPT 99213** with a **POS (place of service) of 02** instead of POS 11 and should **include all acute and chronic diagnoses on each claim.**
- Vantage will pay these claims at the current 99213 allowable with **NO Patient Cost Share.**
- The telemedicine requirement for live video chat is recommended; however, if live video chat is not available, that requirement will be waived. Communication with the patient by phone is sufficient at this time to be billed and paid as POS 02.
- The US Department of Health has relaxed Telemedicine Technology Requirements during this emergency. You may now use common video chat programs like Apple Facetime, Facebook Messenger's video function, and Skype.
- The provider should decide for each patient if a telemedicine visit is appropriate or if the patient still needs the scheduled face-to-face visit.
- The telemedicine visit should be documented in the patient's chart and must be in lieu of a face-to-face visit. All services routinely provided at a face-to-face visit that can be provided telephonically should be performed (e.g., prescription refills).
- Patients should also be given instructions for limiting exposure to COVID-19 in their daily lives.

In response to inquiries from our providers, we are providing the following updates to COVID-19 diagnoses which follow the CDC recommendations:

Other Diagnoses

- a. If the patient is being evaluated for COVID-19, use diagnosis **Z03.818.**
- b. Prior to April 1, 2020, diagnosis **B97.29** (other coronavirus as the cause of diseases classified elsewhere) should be billed and assigned with other diagnoses codes, such as:
 - J12.89 - Other viral pneumonia
 - J20.8 - Acute bronchitis
 - J22 - Unspecified acute lower respiratory infection
 - Other diagnoses as appropriate
- c. After April 1, 2020, diagnosis **U07.1** (COVID-19 acute respiratory disease) should be used for confirmed cases.
- d. Vantage will accept all of the diagnoses listed above whether billed as primary or secondary to the other symptom diagnoses on the claim.
- e. Remember to include **ALL** other acute and chronic diagnoses on the claim as well.
- f. Vantage will pay these COVID-19 claims with **NO Patient Cost Share.**

Notice #3, March 19, 2020:

In response to additional inquiries from providers, we are providing the following updates to our COVID-19 policies:

Physical Therapy (PT), Occupational Therapy (OT), and Speech Language Pathology (SLP) Telemedicine Office Visits:

- PT, OT, and SLP visits performed through telemedicine must be in lieu of a face-to-face visit for an established patient with an existing plan of care.

- **PT and OT:** Bill these telemedicine visits with **CPT 97110** (therapeutic exercise) with the appropriate modifier **GP** or **GO**. We will allow up to three PT and three OT units per week per patient.
- **SLP:** Bill either **CPT 92507** (individual treatment of speech, language, voice, communication, and/or auditory processing disorder) or **CPT 92526** (treatment of swallowing dysfunction and/or oral function for feeding) with modifier **GN**. We will allow up to two SLP sessions per week per patient.
- These claims must be billed with a **POS (place of service)** of **02** instead of POS 11.
- Vantage will pay these telemedicine claims at the current allowables with **NO Patient Cost Share**.
- The telemedicine guidelines 1(d) through 1(g) listed in Vantage Provider Notice #1 dated 3/13/20 also apply to PT/OT/SLP Providers.

Notice #2, March 16, 2020:

1. Telemedicine Office Visits for patients at high risk for complications if they contract COVID-19:

- a. Many of our providers are calling patients who are scheduled for a routine medical follow-up visit a few days before those scheduled visits and will perform those visits telephonically. This is to avoid the patient's risk of exposure to COVID-19 in the provider's office.
- b. These telemedicine visits should be billed with CPT 99213 with a **POS (place of service)** of **02** instead of POS 11 and should **include all chronic diagnoses on the claim**.
- c. Vantage will pay these claims at the current 99213 allowable with **NO Patient Cost Share**.
- d. The telemedicine requirement for live video chat is recommended; however, if live video chat is not available, that requirement will be waived. Communication with the patient by phone is sufficient at this time to be billed and paid as POS 02.
- e. The provider should decide for each patient if a telemedicine visit is appropriate or if the patient still needs the scheduled face-to-face visit.
- f. The telemedicine visit should be documented in the patient's chart and must be in lieu of a face-to-face visit. All services routinely provided at a face-to-face visit that can be provided telephonically should be performed (e.g., prescription refills).
- g. Patients should also be given instructions for limiting exposure to COVID-19 in their daily lives.

2. Office Visits for patients with symptoms consistent with COVID-19:

- a. Patients with unexplained cough, fever, or shortness of breath should be billed as an office visit with diagnosis code **Z03.818** to indicate the patient is being evaluated for COVID-19. **All other existing chronic diagnoses** should also be billed on the claim.
- b. These office visits and the lab test for COVID-19 will be paid by Vantage with **NO Patient Cost Share**.

3. What other providers are doing to protect their most vulnerable patients:

- a. Many of our providers are calling their scheduled patients and triaging incoming calls to move patients without respiratory symptoms to morning visits. They are seeing their patients with respiratory symptoms after lunch and toward the end of the day. They are trying to keep their patients at high risk for complications from COVID-19 either at home (Telemedicine visits) or, if they have to be seen face-to-face, scheduled for an early morning visit segregated from patients with respiratory symptoms who will be seen at the end of the day.
- b. Unexpected patients who walk into an office with respiratory symptoms are being taken out of the waiting room immediately, given a mask, and placed in one reserved exam room. Providers are seeing these patients, collecting a specimen for COVID-19 if appropriate, and treating their other illness as needed. Patients subject to testing for COVID-19 are instructed to quarantine at home until test results are back. Personal protective equipment should be used as appropriate.
- c. Patients with acute respiratory distress or shortness of breath are being referred directly to the emergency room for evaluation.

Notice #1, March 13, 2020:

In response to several inquiries from providers, we are providing the following updates to our COVID-19 policies:

1. **COVID-19 Testing Update:**

- **LabCorp** and **Quest Diagnostics** laboratories are in-network and are now offering COVID-19 testing.

2. **Rural Health Clinic Telemedicine Office Visits:**

- a. Telemedicine office visits performed by a Rural Health Clinic (RHC) should be billed with **HCPCS G0071** and should **include all chronic diagnoses on the claim.**
- b. Because Rural Health Clinics bill office visits on a UB, a Place of Service is not indicated on the claim.
- c. Vantage will pay these RHC telemedicine claims at the current all-inclusive rate with **NO Patient Cost Share.**

3. **Behavioral Health Clinic Telemedicine Office Visits:**

- a. The following behavioral health CPT's will be paid as telemedicine office visits when they are billed with a **POS (place of service) of 02** instead of POS 11. These claims **will not require pre-authorization** and should include **all chronic diagnoses on the claim.**
 - ♦ **90791**
 - ♦ **90792**
 - ♦ **90832**
 - ♦ **90833**
 - ♦ **90834**
 - ♦ **90836**
 - ♦ **90837**
- b. Vantage will pay these telemedicine claims at the current allowables with **NO Patient Cost Share.**

The telemedicine guidelines 1(d) through 1(g) listed in Vantage Provider Notice #1 dated 3/13/20 also apply to RHC's and behavioral health providers.

4. **Physical, Occupational, and Speech Therapy Services:**

- a. These services are not covered as telemedicine at this time.

5. **High-risk patients:**

- Patients over 60 years of age.
- Patients with chronic medical conditions, such as hypertension, diabetes, or lung disease.
- Healthcare professionals are considered high-risk.