Michigan Department of Health and Human Services Program Policy Division PO Box 30479 Lansing MI 48909



March 17, 2020

<Provider Name>
<Provider Address 1>
<Provider Address 2>
<Provider City> <State> <zipcode5-zipcode4>

RE: Covered Services related to the Coronavirus Disease 2019 (COVID-19)

Dear Provider:

The Michigan Department of Health and Human Services (MDHHS) is working closely with healthcare providers, local public health departments (LHDs), and the Centers for Disease Control and Prevention (CDC) to respond to the growing public health threat posed by the COVID-19, a respiratory disease caused by a novel coronavirus named Severe Acute Respiratory Syndrome Coronavirus 2 or SARS-CoV-2. The goal of the public health response to COVID-19 is to minimize introductions of the virus, detect new cases quickly, and reduce community spread. Healthcare providers have a vital role to play in the evaluation and care of patients with suspected or confirmed COVID-19, including minimizing the risk of further spread through proper infection prevention and control.

Overview

COVID-19 is an emerging respiratory disease with severity ranging from mild to severe, including potentially resulting in death. COVID-19 was first detected in Wuhan, China, in early December 2019, and has spread to a growing number of countries outside China, including the United States. Sustained (ongoing) person-to-person transmission of COVID-19 has been seen in a growing number of countries.

Symptoms in patients with COVID-19 have been seen 2-14 days from exposure and may include fever, cough and difficulty breathing. There is much to learn about COVID-19, including how it is spread. Based on what is currently known about COVID-19 and what is known about other coronaviruses, spread is thought to occur primarily from person-to-person via respiratory droplets among close contacts. Providers should urge patients to call their office or if necessary emergency room before arriving if they have a recent travel history from an affected geographic area or close contact with a person diagnosed with COVID-19 so they can take precautions to prevent exposure to other individuals.

Patient Assessment and Diagnostic Testing

Community transmission of COVID-19 is now being reported in multiple areas of the United States. Healthcare providers are encouraged to assess patients presenting with fever and acute respiratory illness for a history of close contact with any person with confirmed COVID-19 within 14 days of symptom onset. A detailed history should also include an assessment of travel to a country or geographic area with sustained transmission of COVID-19. CDC has Criteria to Guide Evaluation for Persons Under Investigation (PUI) for COVID-19 to assist clinicians with this assessment and guide decisions about the need for testing and patient disposition. Decisions on which patients receive testing should be based on the local epidemiology of COVID-19, as well as the clinical course of illness. Most patients with confirmed COVID-19 have exhibited fever and/or symptoms of acute respiratory illness such as cough or difficulty breathing. Clinicians are strongly encouraged to test for other causes of respiratory illness, including influenza, which remains widespread throughout the State of Michigan. While the epidemiology of COVID-19 continues to change rapidly, factors that may help guide decisions on whether to test include: 1) Close contact with a laboratoryconfirmed COVID-19 patient within 14 days of symptom onset, or 2) A history of travel from affected geographic areas within 14 days of symptom onset.

If a patient meets these criteria, the healthcare provider should immediately place the patient in respiratory isolation and contact their local health department. If the local health department cannot be reached, contact MDHHS at 517-335-8165.

Health care providers can work with local and state public health authorities on a case-by-case basis if they have questions about whether their patient's clinical presentation and exposure history meet the criteria to be considered PUIs and undergo testing for COVID-19. PUIs awaiting results of rRT-PCR testing for COVID-19 may be directed by public health authorities to remain in isolation at home or in a healthcare facility until their test results are known. MDHHS Bureau of Laboratories is now testing specimens, improving results turnaround time. Additionally, COVID-19 testing capacity will increase substantially as multiple clinical laboratories begin to offer testing authorized by FDA under an Emergency Use Authorization.

Patient Management After Potential COVID-19 Exposure

CDC has provided guidance for Evaluating Persons Under Investigation (PUIs) and Asymptomatic Close Contacts of Confirmed Cases at Their Home or Non-Home Residential Settings to help guide optimal public health management of people following potential COVID-19 exposure. People with confirmed COVID-19 infection should remain in isolation, either at home or in a healthcare facility as determined by clinical status, until they are determined by state or local public health authorities in coordination with CDC to no longer be infectious. The location of isolation will be determined by public health authorities and isolation may be compelled by public health order, if necessary.

<u>Healthcare Personnel At Risk For Exposure</u>

In the setting of community transmission, all healthcare personnel are at some risk for exposure to COVID-19, whether in the workplace or in the community. Healthcare personnel are on the front lines of caring for patients with confirmed or possible COVID-19 and, therefore, have an increased risk of exposure to this virus. When caring for confirmed or possible COVID-19 patients, healthcare personnel should minimize their risk of exposure by adhering to all CDC infection prevention and control (IPC) recommendations, including use of recommended personal protective equipment (PPE). CDC has issued multiple IPC guidance documents for healthcare personnel including: Interim Infection Prevention and Control Recommendations for Patients with Confirmed Coronavirus Disease 2019 (COVID-19) or Persons Under Investigation for COVID-19 in Healthcare Settings, Healthcare Infection Prevention and Control FAQs for COVID-19, What Healthcare Personnel Should Know about Caring for Patients with Confirmed or Possible COVID-19 Infection, and Strategies for Optimizing the Supply of N95 Respirators. If a healthcare provider is potentially exposed to a patient with confirmed COVID-19, they are advised to work with their occupational health program to assess their exposure risk and the need for any follow-up actions in accordance with CDC's Interim U.S. Guidance for Risk Assessment and Public Health Management of Healthcare Personnel with Potential Exposure in a Healthcare Setting to Patients with Coronavirus Disease 2019 (COVID-19).

Preventive Measures

It is important to remind clients that everyday preventive steps to help prevent spread of other viruses, like the flu and common cold, will also help prevent spread of the novel coronavirus that causes COVID-19. These include preventive actions such as practicing good hand hygiene, covering a cough or sneeze with tissue, avoiding close contact with people who are sick, and staying home when sick. Additionally, influenza activity remains widespread in Michigan and throughout most of the United States, so continue encouraging patients to get a flu vaccine.

Medicaid Covered Services

Treatment and Services

The following services are covered to treat individuals with COVID-19 infection:

- Practitioner visits and services, including home visits and telemedicine services
- Clinical diagnostic laboratory tests and diagnostic imaging
- Prescribed drugs
- Vaccines
- Medical supplies and equipment
- Inpatient and outpatient hospital services
- Long-term services and supports
- Other ancillary and medically necessary Medicaid-covered services, as appropriate

Providers are encouraged to contact the Medicaid Health Plans regarding additional services that may be covered for beneficiaries enrolled in a health plan.

Coding Guidance

Medically necessary diagnostic testing for COVID-19 virus is a Medicaid covered benefit. There are two new Healthcare Common Procedure Coding System (HCPCS) codes for providers who need to test patients for Coronavirus, U0001 and U0002.

- HCPCS U0001 Providers using the CDC 2019 Novel Coronavirus Real Time RT-PCR Diagnostic Test Panel may bill for that test using HCPCS code U0001.
- HCPCS U0002 generally describes 2019-nCoV Coronavirus, SARS-CoV-2/2019-nCoV (COVID-19) using any technique, multiple types or subtypes, can be used by private laboratories and healthcare facilities.

The Medicaid claims processing system will be able to accept these codes on April 1, 2020 for dates of service on or after February 4, 2020. For additional coding information, refer to https://www.cdc.gov/nchs/data/icd/ICD-10-CM-Official-Coding-Gudance-Interim-Advice-coronavirus-feb-20-2020.pdf

Providers seeking reimbursement for Medicaid covered services are expected to report the diagnosis code(s) at the highest level of specificity in compliance with the International Classification of Diseases (ICD) coding guidelines and conventions.

<u>Additional Resources</u>

Final Bulletin MSA 20-09, General Telemedicine Policy Changes; Updates to Existing Policy; Federally Qualified Health Center and Rural Health Clinic Policy Changes, can be found at Michigan.gov/MedicaidProviders >> Policy, Letters & Forms.

Additional information about Medicaid-covered services can be found in the Michigan Medicaid Provider Manual at Michigan.gov/MedicaidProviders >> Policy, Letters & Forms.

For more information about Michigan's response to COVID-19, visit Michigan.gov/Coronavirus.

For more information about COVID-19 and up-to-date guidance, visit www.CDC.gov/coronavirus.

An itemized list of new CDC guidance documents and updates to existing CDC guidance documents can be found at: https://www.cdc.gov/coronavirus/2019-ncov/whats-new-all.html.

Sincerely,

Kate Massey, Director

Medical Services Administration