

Coronavirus (COVID-19) Operational Changes



April 2020

MICHIGAN

Dear Providers,

We recognize that our provider partners are on the front lines as we cope with the COVID-19 pandemic. We are easing and/or eliminating administrative and utilization management functions as systems redeploy and employees relocate to meet the needs of the public.

Medicaid

- **Authorizations**
 - In-Network/Out-of-Network
 - COVID-19 Requests*
 - No prior authorization required
 - Requesting notification to coordinate discharge planning and follow-up
 - Cost share waived for prevention, screening, and treatment
 - Non-COVID-19 Requests
 - Notification extended to 72 hours from date of admission
 - Submission of clinical documentation extended to 30 days of admission
 - No change to NICU clinical submission timelines
 - Meridian will apply plan policies for medical necessity determination
 - No change outpatient non-urgent procedures
- **Existing Authorizations**
 - Any existing authorizations will be honored until 90 days after the end of the state of emergency
 - There is no need to call at this time. The existing authorizations will be automatically extended
- **Peer-to-Peer Requests**
 - Extended to 15 days from date of denial
- **Continued Stay Reviews (Non-Post-Acute)**
 - Extended to 10 days from initial review and 5 days thereafter
 - No change to NICU clinical submission timelines
- **Continued Stay Review (Post-Acute)**
 - Extended to 7 days from initial review and 7 days after
- **Recoupments**
 - Pause all recoupments during state of emergency
 - Restart 30 days from the end of the state of emergency
- **Claim Audits With Record Requests**
 - Teams/vendors will still process
 - Extend timeline to respond to 90 days from end of state of emergency
- **Telehealth Services:**
 - No prior authorization is required
 - Cost sharing is waived
 - Applies to all services that may be administered virtually
 - Applies to all providers in- or out-of-network
- **Pharmacy Changes**
 - Allowing early refills
 - Extended day supply
- **Durable Medical Equipment**
 - COVID-19 Requests*

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- No prior authorization, quantity limits or documentation requirements in accordance with MSA 20-14
- This applies to in-network providers only
- Non-COVID-19 Request
 - Medicaid/MI Health Link will follow MSA 20-14

Medicare

- **2% sequestration suspended May 1, 2020 through December 31, 2020**
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 - COVID-19 Requests*
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 - Cost sharing will be waived for prevention, screening, and treatment
 - Non-COVID-19 Requests
 - No change
- **Continued Stay Reviews (Non-Post-Acute)**
 - Extended to 10 days from initial review and 5 days thereafter
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 - Non-COVID-19 Request
 - No change

Marketplace

- **Authorizations**
 - In-Network
 - COVID-19 Requests*
 - No prior authorization required
 - Requesting notification to coordinate discharge planning and follow-up
 - Cost share will be waived for prevention, screening, and treatment
 - Non-COVID-19 Requests
 - No change
 - Out-of-Network
 - No change
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*COVID-19 Related Diagnostic Code Set

Code	Description
U07.1	2019-nCoV Confirmed by Lab testing (effective 4/1/20)
B97.29	Confirmed Cases-other coronavirus as the cause of diseases classified elsewhere (prior to 4/1/20)
Z03.818	Exposure to COVID-19 and the virus is ruled out after evaluation
Z20.828	Contact with and (suspected) exposure to other viral communicable disease

Thank you for your ongoing partnership in caring for your patients and our members. **We are committed to working with you if there are denials or issues that arise during this state of emergency.** Please work with Jeff Holzhausen, Director of Network Management at jeffrey.holzhausen@mhplan.com or your Provider Network Management Representative if you have questions or suggestions.

Sincerely,

Meridian