

COVID-19 FAQ: Providers

As of April 10, 2020

Q: What is being done to keep claims moving through the system?

A: Our teams continue to actively process claims. AHCCCS and CMS claims processing timeliness requirements remain in place, and our teams work hard to meet those standards. New regulations related to the COVID-19 crisis are being reviewed and our systems are being updated to ensure claims can be processed timely and accurately.

Q: Are BUHP staff members telecommuting?

A: Almost all B-UHP staff are working from home in order to reduce community spread of coronavirus. A small number of staff continue to work in the office, to print and mail regulator-required mailings. All employees follow social-distancing and other recommended policies.

Q: Will you offer zero co-pays?

A: BUHP will follow CMS and AHCCCS guidelines for COVID-19 related Services.

Q: Will (prior) authorization be waived for COVID-related lab testing and doctor visits? Please provide an end-date of waived services?

A: Prior Authorization is not required for COVID-19 testing or treatment. This will remain in effect until AHCCCS and CMS determine there is no longer a need.

Q: Will BUHP cover telehealth services for all lines of business? What are the licensing and credentialing requirements for Providers? What visit types can be done virtually? How do I submit telephonic or telehealth claims?

A: Both AHCCCS and CMS have broadened the coverage of telehealth services to include multiple modalities. Credentialing, licensing and provider location requirements have been relaxed. Regulations continue to evolve, so we STRONGLY encourage providers to check both the CMS and AHCCCS websites for update information.

https://azahcccs.gov/AHCCCS/AboutUs/covid19FAQ.html

https://www.cms.gov/outreach-education/partner-resources/coronavirus-covid-19-partner-toolkit

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Q: What are the current guidelines around Attendant care, including DCW testing, CPR/First Aid renewals, Family Caregiver cases and therapeutic home leave?

A: These regulations continue to evolve. For the most recent information, please see the AHCCCS FAQ website: https://azahcccs.gov/AHCCCS/AboutUs/covid19FAQ.html

Q: What telehealth services will be covered for Behavioral Health Providers? How should these be billed? Can therapy be delivered via telemedicine? Can JJET assessments be completed telephonically?

A: Many services can be covered via telehealth/telephonic means. For the most up to date information, including covered codes and billing/claims requirements, please the following websites:

AHCCCS: https://azahcccs.gov/AHCCCS/AboutUs/covid19FAQ.html

Medicare: https://www.cms.gov/outreach-education/partner-resources/coronavirus-covid-19-

partner-toolkit

Q: What procedures are being cancelled? Is it on a tiered system based on age and expected length of hospital stay?

A: Elective procedures (including dental) are being postposed per state and federal mandates. Facilities, in order to preserve resources (including PPE), are not scheduling elective procedures. Providers should work with their facilities to determine if a procedure is elective or not. BUHP is extending prior authorization for procedures previously approved so a resubmission once the emergency is over will not be necessary.

Q: Is Banner Imaging only available for emergency imaging?

A: Banner Imaging Centers are asking providers to only schedule urgent or emergency cases through May 18. However, this may change as the pandemic evolves.

Q: Is there a protocol for chest x-rays in mild cases?

A: Clinical guidelines continue to evolve. Please see www.azdhs.gov for the most recent updates.

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