

PREFERRED NETWORK PROVIDERS

COVID-19 Weekly Update

March 25, 2020

Agenda

- Welcome
 - This is a weekly broadcast for our Preferred Provider Network
- Purpose of Broadcasts
- New Post Acute Website
 - COVID-19 Resources
- Honor Health Restricted Visitors
 - NO Liaisons
- AHCA & NCAL Guidelines- Website
- Waving for Skilled Nursing Facilities
 - BCBS & UHC
- PPE Exchange
 - How can we support each other ?

Information Regarding Broadcast

- Live broadcast and audio is through your computer or mobile device.
 - One way communication
 - Live Q&A on the right side of your screen
- ICP and HonorHealth will be hosting these broadcasts weekly
 - Calendar invites to be sent out for each week.

Purpose of Weekly Calls

- Provide the most up to date factual Information COVID-19
- Show where and how to access the best information



New Preferred Provider COVID -19 Website

- Up to date Honor Health & ICP information for COVID 19
- Factual Information Sharing

ANNOUNCEMENT 

Liaisons in Hospitals - Restricted

EFFECTIVE IMMEDIATELY:

Vendor restrictions at HonorHealth facilities

Effective immediately, for everyone's safety, including our patients, staff and community, in response to COVID-19, HonorHealth has instituted strict vendor guidelines which applies to all Post-Acute vendors:

- Restriction of any Post-Acute Liaison going into any HonorHealth campus
 - Exception:
 - Hospice Liaisons for end-of-life planning
 - Delivery of Durable Medical Equipment for a patient transferring/discharging
 - Hospice & DME liaisons will need to enter through one of the restricted entrances and undergo screening and asked screening questions.

Currently, there are now limited entry ways into all the HonorHealth Hospitals. If you need to communicate about patient care, please utilize [NaviHealth](#).

As our planning continues to evolve, this strict vendor guideline could change and become more restrictive. Thank you for your help and support to keep our patients, staff and community safe



Waiving for Skilled Facilities



COVID-19 update: Temporary change in post-acute care admission protocols Draft11 03/18/20

We understand that our network healthcare providers are experiencing increased and urgent demands due to the unusual circumstances created by COVID-19. For this reason, Blue Cross® Blue Shield® of Arizona (BCBSAZ) is responding quickly to adapt to the emergency situation.

From March 16 through March 29, we will temporarily suspend some of our normal pre-service protocols for most BCBSAZ plans:

- We are waiving initial precertification/prior authorization for admission to post-acute care facilities (including skilled nursing, extended acute rehabilitation, and long-term acute care) for all members, both commercial, Medicaid, and Medicare Advantage (MA). You must still notify us of the admission within 24 hours and send us medical records for concurrent review within three days.
- In compliance with [CMS's emergency declaration](#), we are waiving the 3-day prior hospitalization requirement for coverage of a SNF stay.

Please note: these temporary changes do not apply to members with PCP Coordinated Care HMO plans, CHS group plans, BCBSAZ-TPA co-administered plans, FEP® plans, or BlueCard® (out-of-area) plans.

We will re-assess the COVID-19 situation in two weeks (March 30) to determine if this temporary arrangement needs to be extended. If so, we will be back in touch with that information.

You can upload or fax medical records as usual:

- For patients with BCBSAZ-administered Medicare Advantage benefit plans, fax records to 602-544-5654.
- For patients with most commercial benefit plans, you can use the online precertification tool in the secure provider portal at "Practice Management > Precertification > BCBSAZ Members-Requests for 2020."

Please ensure that your pre-service and notification office staff receive this information. We appreciate your partnership and the service you're providing to our members during this time of uncertainty.

If you have questions, contact your [network contract specialist](#) or call Provider Partnerships at 602-864-4231 or 1-800-232-2345, ext. 4231.

Health Care Provider Facts- Waiving “3 – Day Stay”

COVID-19 Emergency Declaration Health Care Providers Fact Sheet

The Trump Administration is taking aggressive actions and exercising regulatory flexibilities to help healthcare providers combat and contain the spread of 2019 Novel Coronavirus Disease (COVID-19). In response to COVID-19, CMS is empowered to take proactive steps through 1135 waivers and rapidly expand the Administration’s aggressive efforts against COVID-19. As a result, the following blanket waivers are available:

- **Skilled Nursing Facilities**

CMS is waiving the requirement at Section 1812(f) of the Social Security Act for a 3-day prior hospitalization for coverage of a skilled nursing facility (SNF) stay provides temporary emergency coverage of (SNF services without a qualifying hospital stay, for those people who need to be transferred as a result of the effect of a disaster or emergency. In addition, for certain beneficiaries who recently exhausted their SNF benefits, it authorizes renewed SNF coverage without first having to start a new benefit period.

Second, CMS is waiving 42 CFR 483.20 to provides relief to SNFs on the timeframe requirements for Minimum Data Set assessments and transmission.

- **Critical Access Hospitals**

CMS is waiving the requirements that Critical Access Hospitals limit the number of beds to 25, and that the length of stay be limited to 96 hours.

- **Housing Acute Care Patients In Excluded Distinct Part Units**

CMS is waiving requirements to allow acute care hospitals to house acute care inpatients in excluded distinct part units, where the distinct part unit’s beds are appropriate for acute care inpatient. The Inpatient Prospective Payment System (IPPS) hospital should bill for the care and annotate the patient’s medical record to indicate the patient is an acute care inpatient being housed in the excluded unit because of capacity issues related to the disaster or emergency.



PPE Exchange

- We are all working together to obtain PPE
- We can create a PPE network –
Where and how to obtain what is critically low or purchase from each other.
- Looking for thoughts and ideas –
Can use the website to communicate



Updated Hospital to SNF Covid-19 Screening

On Hospital to SNF transfer orders, you will see the following statement – signed by the discharging physician:

“The patient has been screened/ The patient has not had any fever of 100.4 or higher in the past 24 hours. At this time, the patient does not require further testing for COVID-19 as per CDC guidelines.”

COVID-19 Screening Components

- Temp > 100.4
- Cough
- Dyspnea
- Exposure to COVID-19+ patient
- Travel to area of high prevalence

Home Health Notification for COVID-19 Screening

- Home Health language for COVID-19 screening is same as SNF; however it is in the discharge navigator in Epic and many home health orders are written outside of the navigator.
- Case Management workflow is to verify no test pending and confirm that in NaviHealth documentation.
- If COVID-19 testing is pending that will be made clear and confirmation made that patient can be accepted to home health with that status.

CMS 135 Waiver Language for SNF

- In the event Medicare patient is transferred without 3 day stay under waiver, Case Management has been instructed to document the following in NaviHealth:

“Patient is being transferred to Skilled Nursing Facility without a 3 night stay in accordance with the CMS 1135 waiver as the hospital is under a declared emergency for management of COVID-19”

SNF to ED COVID-19 Screening

When transferring patients to ED – please send documentation with the following:

- Indicate if patient has been febrile or had respiratory symptoms or possible exposure
- Indicate if patient has been febrile or had respiratory symptoms without alternate diagnosis?
- Lab confirmed/pending COVID-19 – please indicate if yes
- If yes, please send test or indicate lab where test performed

SNF Notification Process of COVID-19 Test Done in Hospital

- If COVID-19 test is performed on patient sent to us by facility, we have a process in place to notify the SNF
- Please note that testing is taking anywhere from 2-6 day turnaround, although we are optimistic this will improve
- We will be checking status for any patient who tests + to see if they came from a SNF and then will notify the SNF of those results.

CMS Approved Medicaid Waiver – AHCCCS (updated 3/23/20)

- During the COVID-19 emergency, all AHCCCS Health plans must remove any prior authorization for:
 - Assisted Living Facilities/Centers
 - Skilled Nursing Facilities
 - Inpatient Rehabilitation Facilities

****Concurrent review is maintained for these levels of care**

Reduced Authorization Policy for United Healthcare – visit website at UHCprovider.com

Provisions effective 3/24/20 – 5/31/20:

- Waiving prior auth for admissions to LTACH, IRF and SNF
- Consistent with existing policy, the admitting provider must notify UHC within 48 hours of transfer and penalties still apply
- Length of stay reviews still apply, including denial sfor days that exceed approved length
- Discharges to home health will not require Prior Auth
- Prior aut is not required for COVID-19 testing or related visits

HonorHealth COVID-19 Information/Nurse Helpline

HonorHealth has a 24/7 nurse helpline to offer assistance with COVID-19 related questions:

480-587-6200

Where is HonorHealth providing COVID-19 Testing

Outpatient testing is being offered at the following HonorHealth Urgent Care locations (note you must meet criteria to be tested):

- Gavilan Peak: 3648 W. Anthem Way, Bldg A-100C, Anthem AZ
- Bethany Home: 1515 E. Bethany Home Rd., Ste 120 B, Phoenix AZ

Questions – Type in Q & A section and we will respond with a Q & A on the website

