Medicare Advantage

Provider Bulletin
June 2020

COVID-19 Update: Simply Healthcare Plans, Inc. suspends select prior authorization rules and announces significant policy adjustments in response to unprecedented demands on health care providers (updated May 30, 2020)

June 1, 2020

Simply recognizes the intense demands facing doctors, hospitals and all health care providers in the face of the COVID-19 pandemic. Today, unless otherwise required under State and Federal mandates as detailed below, Simply is making adjustments to assist providers in caring for members. These adjustments apply to members of all lines of business except as noted below, including self-insured plan members and in-network and out-of-network providers, where permissible. We encourage our self-funded customers to participate, although these plans may have an opportunity to opt out.

Medicare adjustments and suspensions may have different timeframes or changes where required by federal law.

Where permissible, these guidelines apply to Federal Employee Plan (FEP) members. For the most up-to-date information about the changes FEP is making, go to **https://www.fepblue.org/coronavirus**.

Inpatient and respiratory care
Prior authorization requirements are suspended for patient transfers through May 30, 2020.

- Prior authorization will be waived for patient transfers from acute IP hospitals to skilled nursing facilities, rehabilitation hospitals, long-term acute care hospitals, and behavioral health residential/intensive outpatient/partial hospitalization programs, and to home health including ground transport in support of those transfers. Although prior authorization is not required, Simply requests voluntary notification via the usual channels to aid in our members' care coordination and management.
- **Extending the length of time a prior authorization issued on or before May 30, 2020, is in effect** for elective inpatient and outpatient procedures to 180 days. This will help prevent the need for additional outreach to Anthem to adjust the date of service covered by the authorization.
- **The 21-day inpatient requirement** before transferring a patient to a long-term acute care hospital is suspended.
- **Concurrent review for discharge planning** will continue unless required to change by federal or state directive.
- **Prior authorization requirements are suspended for COVD-19 Durable Medical Equipment** including oxygen supplies, respiratory devices continuous positive airway pressure (CPAP) devices noninvasive ventilators, and multi-function ventilators for patients who need these devices for any medical reason as determined by a provider, along with the requirement for authorization to exceed quantity limits on gloves and masks.

- **Respiratory services** for acute treatment of COVID-19 will be covered. Prior authorization requirements are suspended where previously required.

COVID-19 testing
Laboratory tests for COVID-19 at both in-network and out-of-network laboratories will be covered with no cost sharing for members.

Claims audits, retrospective review, peer-to-peer review and policy changes
Simply will adjust the way we handle and monitor claims to ease administrative demands on providers:

- **Hospital Claims audits** requiring additional clinical documentation will be limited through June 24, 2020, though Simply reserves the right to conduct retrospective reviews on these findings with expanded lookback recovery periods for all lines of business except Medicare. To assist providers, Simply can offer electronic submission of clinical documents through the provider portal.
- **Retrospective utilization management review** will also be suspended through June 24, 2020, and Simply reserves the right to conduct retrospective utilization management review of these claims when this period ends and adjust claims as required.
- **Suspend peer to peer reviews** through June 24, 2020 except where required pre-denial per operational workflow or where required by the state during this time period for all lines of business except Medicare.
- **Our Special Investigation programs** targeting provider fraud will continue, as well as other program integrity functions that help ensure payment accuracy
- **New payment and utilization management policies and policy updates** will be minimized, unless helpful in the management of the COVID-19 pandemic.

Otherwise, Simply will continue to administer claims adjudication and payment in line with our benefit plans and state and federal regulations, including claims denials where applicable. Our timely filing requirements remain in place, but Simply is aware of limitations and heightened demands that may hinder prompt claims submission.

Provider credentialing
Through June 24, 2020, Simply will continue to process provider credentialing within the standard 15-18 days even if we are unable to verify provider application data due to disruptions to licensing boards and other agencies. We will verify this information when available.

If Simply finds that a practitioner fails to meet our minimum criteria because of sanctions, disciplinary action etc., we will follow the normal process of sending these applications to committee review, which will add to the expected 15-18 day average timeline. We are monitoring and will comply with state and federal directives regarding provider credentialing.

Additional PA changes
Simply is committed to working with and supporting providers. As of March 16, 2020, Simply is removing PA requirements for skilled nursing facilities (SNF) for the next 90 days to assist hospitals in managing possible capacity issues. SNF providers should continue admission notification to Simply in an effort to verify eligibility and benefits for all members prior to rendering services and to assist with ensuring timely payments.

Simply is also extending the length of time a PA is in effect for elective inpatient and outpatient procedures to 90 days. This will help prevent the need for additional outreach to Simply to adjust the date of service covered by the authorization.

Providers should watch the **Provider News** page for any future administrative changes or policy adjustments we may make in response to the COVID-19 pandemic.