COVID-19 Reimbursement for the Uninsured

August 2020
IHA Disclaimer

• IHA recognizes the many challenges member hospitals and health systems face navigating the various federal and state pathways for reimbursement of health care services provided to uninsured individuals affected by the COVID-19 public health emergency.

• IHA has prepared the following slides to help members examine the current reimbursement options for uninsured patients.

• Although IHA has made every effort to validate this information, federal and state guidance on COVID-19 is constantly changing. These slides reflects IHA’s understanding as of August 14, 2020.

• Each hospital must evaluate its internal processes, financial position, and mission, as well as its understanding of federal and state laws and guidance, when making billing decisions.
Acronyms

- Centers for Medicare & Medicaid Services (CMS)
- Coronavirus Aid, Relief, and Economic Security (CARES) Act
- Durable Medical Equipment (DME)
- Families First Coronavirus Response Act (FFCRA)
- Fee-for-Service (FFS)
- Food & Drug Administration (FDA)
- Health Resources & Services Administration (HRSA)
- Home Health (HH)
- Illinois Department of Healthcare and Family Services (HFS)
- Inpatient Rehabilitation Facility (IRF)
Acronyms continued…

- Long-Term Acute Care Hospital (LTACH)
- Managed Care Organization (MCO)
- Medicaid Management Information System (MMIS)
- Medicare Severity Diagnosis Related Group (MS-DRG)
- Patient Protection and Affordable Care Act (ACA)
- Paycheck Protection Program and Health Care Enhancement Act (PPPHCEA)
- Public Health Emergency (PHE)
- Skilled Nursing Facility (SNF)
- Social Security Number (SSN)
- U.S. Department of Health & Humans Services (HHS)
COVID-19 Claims Reimbursement to Health Care Providers and Facilities for Testing and Treatment of the Uninsured HRSA Program
COVID-19 Uninsured Reimbursement Program

The COVID-19 Claims Reimbursement for Testing and Treatment of the Uninsured (HRSA Program) is a federal program to reimburse health care providers for COVID-19-related testing, testing-related visits, and treatment rendered to “uninsured individuals.”

- Funded by the FFCRA Relief Fund and the Provider Relief Fund.
- Subject to available funding.*
- Reimbursement available for date(s) of service on or after Feb. 4, 2020.
- Administered by HRSA under a contract with UnitedHealth Group.
COVID-19 Uninsured Reimbursement Program continued…

How much money is available in the fund?

The FFCRA Relief Fund includes $2 billion ($1 billion appropriated through the Families First Coronavirus Response Act and $1 billion appropriated through the Paycheck Protection Program and Health Care Enhancement Act) to reimburse providers for COVID-19 testing for uninsured individuals. Additionally, the CARES Act established a Provider Relief Fund and appropriated $100 billion to the fund. The PPPHCEA appropriated an additional $75 billion in relief funds. A portion of the Provider Relief Fund will be used to reimburse providers treating uninsured individuals with COVID-19.

HRSA: Eligible Services

Must have a primary COVID-19 diagnosis, as determined by HRSA (subject to adjustment as may be necessary).

- Specimen collection and diagnostic and antibody testing.
- Testing-related visits rendered in an office, urgent care, or emergency room setting or via telehealth.
- Treatment for COVID-19:
  - Office visits (in-person and telehealth)
  - Emergency room, inpatient, and outpatient/observation services
  - FDA-approved drugs (as available) for COVID-19 treatment and administered as part of an inpatient stay
  - SNF, LTAC, IRF, HH, and DME
  - Emergency ambulance transportation and non-emergent patient transfers via ambulance
  - FDA-approved vaccine (when available)
HRSA: Ineligible Services

- Any treatment without a COVID-19 primary diagnosis, except for pregnancy when the COVID-19 code may be listed as secondary.
- Any services that would not be covered by traditional Medicare if the patient were a Medicare beneficiary.
- Hospice services.
- Outpatient prescription drugs.
HRSA: Reimbursement

Facility and professional reimbursement is generally based on Medicare FFS rates.

- Professional Services: current year Physician Fee Schedule.
- Facility Services: applicable facility reimbursement method.
  - For IPPS, reimbursement will not include the 20 percent increase to the MS-DRG weight.
  - For non-IPPS, rates will not be updated after Feb. 4, 2020.

Testing and specimen collection rates are established by CMS.

Providers must accept reimbursement as payment in full.

- Balance billing prohibited.
- Patient cost-sharing prohibited.
HRSA: Uninsured Individuals

For testing and testing-related visits, an uninsured individual must not be covered by:

- An individual health plan
- An employer-sponsored health plan
- The Federal Employees Health Benefits Program
- A federal healthcare program, including Medicare & Medicaid
- A state Medicaid uninsured COVID-19 testing program (if the date of service is on or after March 18, 2020)

For treatment, an uninsured individual must not have any health care coverage at the time services are rendered.
HRSA: Medicaid Considerations

• Individuals enrolled in limited-benefit Medicaid coverage are considered:
  - Insured for reimbursement of testing and testing-related visits.
  - Uninsured for reimbursement of treatment services.

• Individuals who *may* be eligible for Medicaid, but are not enrolled, are considered uninsured.

• Individuals who have applied for Medicaid, but are awaiting an eligibility determination (MANG pending), are considered uninsured.
  - Funds must be returned to HRSA if the individual is later determined eligible for Medicaid on the date(s) of service.
HRSA: Coordination of Benefits

• To be eligible for reimbursement, providers must verify or attest that, to the best of their knowledge, the patient was uninsured at the time services were provided.

• UnitedHealth Group will conduct coordination of benefits to verify that the patient was not actively enrolled in health coverage, including Medicaid coverage, on the date(s) of service.

• If UnitedHealth Group finds that a patient had active coverage, payment will be recouped.
HRSA: Patient Information

To receive reimbursement, providers must submit the following patient information:

- Date of admission and discharge/date of service
- First and last name
- Date of birth
- Gender
- SSN and state of residence*
- Address**
- Middle initial (optional)
- Patient account number (optional)
HRSA: Patient Information, continued…

*A SSN and state of residence, or state identification/driver's license is needed to verify patient eligibility. If a SSN and state of residence, or state identification/driver's license is not submitted, you will need to attest that you attempted to capture this information before submitting a claim and the patient did not have this information at the time of service, or that you did not have direct contact with the patient and thus did not have an opportunity to attempt to capture this information. Claims submitted without a SSN and state of residence, or state identification/driver's license may take longer to verify for patient eligibility.

**If the individual is unable or unwilling to provide their address, please add the address of the facility where the care was provided or other location that may be appropriate (e.g., shelter).

HRSA: Undocumented Individuals

Can health care providers submit claims for uninsured individuals who are undocumented?

*Health care providers are not required to confirm immigration status prior to submitting claims for reimbursement. Health care providers who have conducted COVID-19 testing of any uninsured individual or provided treatment to any uninsured individual with a COVID-19 diagnosis for dates of service or admittance on or after February 4, 2020 may be eligible for claims reimbursement through the program as long as the service(s) provided meet the coverage and billing requirements established as part of the program.*

State Option to Cover COVID-19 Testing
HFS Uninsured COVID-19 Testing Program
HFS Uninsured COVID-19 Testing Program

The FFCRA, as amended by the CARES Act, gives states the option to create a new, limited-benefit eligibility group to cover COVID-19 testing and testing-related services provided to uninsured individuals, without respect to income or assets.

• CMS approved Illinois Medicaid’s state plan to elect this option.
• Funded through 100 percent federal matching funds.
• Reimbursement is available for date(s) of service on or after March 18, 2020.
• Administered by HFS.
HFS: Eligible Services

- In vitro diagnostic tests for the detection of SARS-CoV-2 or the diagnosis of the virus that causes COVID-19, including serological tests, and the administration of such tests.
- COVID-19 testing-related services provided during an office visit (in-person and telehealth), urgent care center visit, or emergency room visits, including x-ray services.
- COVID-19-related treatment is not covered.
HFS: Reimbursement

- Reimbursement is based on Medicare rates for services identified on the HFS COVID-19 Fee Schedule, regardless of whether the services are provided in-person or via telehealth.
- Other codes will be reimbursed at Medicaid rates.
- Providers must be enrolled in IMPACT.
  - Enrollment in IMPACT does not require a provider to accept Medicaid.
- Providers must accept reimbursement as payment in full.
  - Balance billing prohibited.
  - Patient cost-sharing prohibited.
HFS: Uninsured Individuals

Uninsured Individuals must not be enrolled in:

• Any health care program that receives federal funds.
  – Medicaid, Medicare, Basic Health Program, TRICARE, Veteran’s Administration, Federal Employee Benefits Program.
• A group health plan or individual health insurance coverage.
  – Employer-sponsored coverage, Qualified Health Plan (ACA), retiree health plan, COBRA.

Uninsured individuals who may be eligible for Medicaid, but are not actually enrolled, are considered uninsured.

Individuals enrolled in short-term limited duration insurance are considered uninsured.
HFS: Enrollment

Patients will not be enrolled in an MCO.

Eligibility will be backdated. In no case may eligibility begin prior to March 18.

Providers will enroll patients using a simplified application to facilitate billing and payment. A full Medicaid application is not required.

- NOTE: HFS has not yet released the simplified application. Additional information is forthcoming.
HFS: Patient Information

Providers must submit the following patient information:

- First and last name
- Date of birth
- Gender
- Address
- Phone
- Any insurance information reported by the patient
- SSN (may be left blank if patient does not have or does not know SSN)

Providers must also attest that they are submitting the application on behalf of the patient.
Undocumented Individuals
Undocumented Individuals: Reimbursement Options

Options for reimbursement of COVID-19-related care rendered to undocumented, uninsured individuals include:

- HRSA Program for testing, testing-related visits, and treatment for date(s) of service on or after Feb. 4.
- The HFS Testing Program for testing and testing-related visits for date(s) of service on or after March 18.
  - Services will be reimbursed with state-only funds in the event federal matching funds are not available.
Undocumented Individuals: Reimbursement Options continued…

Updated 08/20/18

- Emergency Medical Coverage of Noncitizens.
  - COVID-19 treatment will be covered during the PHE at acute care hospitals and LTACHs.
  - A full application is required. If the acute care hospital has not submitted the application, the LTACH must do so.
  - Eligibility may not be backdated more than three months from the date of application.
  - Reimbursement is at the acute care hospital or LTACH’s Medicaid rate.
  - LTAC certification of admission and continued stay review requirements will be suspended for this population only.
Undocumented Individuals: Other Considerations

HRSA Program

- All patient information collected from undocumented individuals must be submitted to the federal government as a condition of reimbursement.

HFS Testing Program

- HFS is required to annually report aggregate data by program type for state-funded services to the HHS Assistant Secretary for Program Evaluation. All claims data are captured in MMIS, regardless of funding source.

Emergency Medical Coverage for Noncitizens.

- All claims under the Emergency Medical category of assistance are part of the regularly reported data to CMS under federal MMIS reporting requirements.

Hospitals may also choose to provide charity care to undocumented uninsured patients.
Which Uninsured Program to Bill?
Hospital Considerations

When an uninsured individual needs COVID-19-related care, there are multiple pathways for reimbursement.

- HRSA Program
- HFS Testing Program
- Emergency Medical Coverage for Noncitizens
- Hospital Charity Care

Each option has its own set of requirements and limitations to consider:

- Covered services
- Date of service
- Citizenship status
- Reimbursement

Decisions about which pathway to take are at the discretion of the hospital.
# Billing Considerations

<table>
<thead>
<tr>
<th>Question</th>
<th>HRSA Program</th>
<th>HFS Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>What is the earliest date of service for which a claim may be submitted?</td>
<td>2/04/2020</td>
<td>3/18/2020</td>
</tr>
<tr>
<td>Are COVID-19 testing and screening services covered?</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Is treatment of COVID-19 covered?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>What is the reimbursement rate for covered COVID-19-related services?</td>
<td>Medicare FFS</td>
<td>Medicare FFS</td>
</tr>
<tr>
<td>Can the hospital bill for patients who are MANG pending?</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>If a patient is likely eligible for full Medicaid benefits, does an application need to be submitted and denied before the hospital can bill?</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>If an undocumented patient is likely eligible for Emergency Medical, does an application need to be submitted and denied before the hospital can bill?</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Can I bill for testing and screening services provided to undocumented residents?</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Can I bill for treatment services provided to undocumented residents?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Are there income or asset limits?</td>
<td>No</td>
<td>No</td>
</tr>
</tbody>
</table>
Resources
Federal Laws & Regulations

Families First Coronavirus Response Act (PL 116-127, March 18, 2020)

Coronavirus Aid, Relief, and Economic Security Act (PL 116-136, March 27, 2020)
  • https://www.congress.gov/116/bills/hr748/BILLS-116hr748enr.pdf

CMS Interim Final Rule with Comment Period (CMS-1744-IFC, April 6, 2020)

CMS Interim Final Rule (CMS-5531-IFC, May 8, 2020)
HRSA Guidance

COVID-19 Uninsured Program Portal
  • [https://coviduninsuredclaim.linkhealth.com/](https://coviduninsuredclaim.linkhealth.com/)

FAQs for COVID-19 Claims Reimbursement to Health Care Providers and Facilities for Testing and Treatment of the Uninsured
  • [https://www.hrsa.gov/coviduninsuredclaim/frequently-asked-questions](https://www.hrsa.gov/coviduninsuredclaim/frequently-asked-questions)

FFCRA Relief Fund Payment Terms and Conditions (Testing/Screening)

Uninsured Relief Fund Terms & Conditions (Treatment)
  • [https://www.hhs.gov/sites/default/files/terms-and-conditions-uninsured-relief-fund.pdf?language=en](https://www.hhs.gov/sites/default/files/terms-and-conditions-uninsured-relief-fund.pdf?language=en)
CMS Medicaid Guidance

Medicaid COVID-19 Webpage


COVID-19 FAQs on Implementation of Section 6008 of the FFCRA and CARES Act (April 13, 2020)


COVID-19 FAQs for State Medicaid and CHIP Agencies (June 30, 2020)


Operationalizing Implementation of the Optional COVID-19 Testing (XXIII) Group Potential State Flexibilities

HFS Medicaid Guidance

HFS COVID-19 Webpage
  • https://www.illinois.gov/hfs/Pages/coronavirus.aspx

COVID-19 Testing Free to Illinois Residents (Provider Notice, May 18, 2020)
  • https://www.illinois.gov/hfs/MedicalProviders/notices/Pages/prn200518a.asp

Illinois Medicaid COVID-19 Fee Schedule (Updated July 23, 2020)
  • https://www.illinois.gov/hfs/SiteCollectionDocuments/COVID19FeeScheduleFINALRev07232020.pdf

Emergency Medical Coverage for Noncitizens
  • https://www.dhs.state.il.us/page.aspx?item=13826
  • https://www.illinois.gov/hfs/MedicalProviders/notices/Pages/prn200819a.asp (new 08/20/20)

CMS-Approved Emergency State Plan Amendments