



Public Health Emergency Flexibilities & Waivers

Continuing Coverage after May 10, 2023

Coronavirus Disease (COVID-19)

Based on current COVID-19 trends, the US Department of Health and Human Services (HHS) is planning for the federal Public Health Emergency (PHE) for COVID-19, declared under Section 319 of the Public Health Service (PHS) Act, to expire at the end of the day on May 11, 2023. Over the past three (3) years the Bureau for Medical Services (BMS) made numerous operational changes in response to the corresponding PHE. In response to the conclusion of the PHE, BMS reviewed its operational changes and has determined that the following flexibilities will remain in place beyond the conclusion of the PHE.

For a complete list of all operational changes please see [Coronavirus Disease 2019 \(COVID-19\) Alerts and Updates \(wv.gov\)](#)

All other PHE-related flexibilities and waivers not listed below will terminate on or before May 11, 2023.

Continuing Flexibilities

Billing

- [COVID-19 Specimen Collection Billing Guidelines](#)
 - CMS established two Level II HCPCS codes to identify and reimburse specimen collection for COVID-19 testing. The rate for codes G2023 and G2024 is \$25.
- [COVID-19 Vaccine Billing Guidelines](#)
 - CMS established the national average payment rate for physicians, hospitals, pharmacies, and other immunizers at \$40 to administer each dose of a COVID-19 vaccine.
- [BMS COVID-19 Vaccine Billing](#)
 - BMS provided guidance to help with three (3) specific denial reasons when submitting COVID-19 vaccine Pharmacy POS claims to WV Medicaid.
- [COVID-19 Vaccine Claims Processing Guidance](#)
 - BMS provided guidance to help with processing of COVID-19 vaccine pharmacy point-of-sale (POS) claims to WV Medicaid.
- [Vaccine Administration Payment Rates \(WV SPA-21-0005\)](#)
 - BMS established payment rates for administration of COVID-19 vaccines up to the Medicare payment for equivalent services.
- [Medicaid Coverage for COVID-19 Self-Test Kits](#)

Continuing Flexibilities

- BMS provided guidance to help with writing, billing, and filling approved at-home COVID-19 self-test kits.

Eligibility

- [Local Health Departments \(LHDs\) Making Presumptive Eligibility Determinations \(WV SPA-21-0010\)](#)
 - BMS provided guidance on LHDs in WV making presumptive eligibility determinations for specific 1902 (a) Modified Adjusted Gross Income (MAGI) mandatory groups.

Nursing Homes

- [Days Awaiting Placement Reimbursements \(WV SPA-20-0004\)](#)
 - BMS established the reimbursement rate for when the member cannot be discharged to home or to another care setting, including but not limited to nursing home settings, due to a need for isolation or continued medical care.
- [Expanded Long-term Acute Care \(LTAC\) Hospital Services \(WV SPA-20-0004\)](#)
 - BMS provided guidance on Medicaid per diem cost and calculations.

Personnel

- [Staff Requirements at the Crisis Stabilization Unit \(CSU\)](#)
 - BMS waived the requirements in Chapter 503 under section 503.21.2 that providers may utilize Behavioral Health Technicians to fulfill the second required staff present at the CSU.

Pharmacy

- [Waiver of Requirement for Member Signatures of Non-Controlled Substances](#)
 - BMS waived requiring member signatures for the receipt of non-controlled prescriptions, and a record must be made by the provider that the medication was delivered/dispensed along with the reason for not obtaining the member's signature.
- [Early and up to 90-day Supply of Pharmacy Refills](#)
 - BMS provided guidance to allow up to a ninety (90) day supply of non-controlled maintenance medications to be dispensed with each fill.
- [Staff Requirements to Administer Vaccines \(WV SPA-21-0005\)](#)
 - BMS waived requirements to allow pharmacy interns and pharmacy technicians to administer COVID-19 vaccines.

Telehealth

- [Telehealth Services \(Section 1135 Waiver Requests\)](#)
 - CMS approved a waiver to allow facilities to be fully reimbursed for services rendered to an unlicensed facility (during an emergency evacuation or due to other need to relocate residents where the placing facility continues to render services) provided that the State

Continuing Flexibilities

makes a reasonable assessment that the facility meets minimum standards, consistent with reasonable expectations in the context of the current public health emergency, to ensure the health, safety and comfort of beneficiaries and staff. The placing facility would be responsible for determining how to reimburse the unlicensed facility.

- [Non-Emergent E&M Visits through Telehealth Modality at Federally Qualified Health Center and Rural Health Clinic \(FQHC/RHC\) Locations](#)
 - BMS approved the expansion of this service which will include the use of live video conferencing in the appropriately equipped members home with a Medicaid enrolled FQHC/RHC provider.
- [Psychological Testing and Evaluation Services Through Telehealth Modality](#)
 - BMS approved psychological testing services to be rendered through the telehealth modality. This applies to all psychological testing codes.
- [Telehealth Modality](#)
 - BMS approved all existing telehealth services listed in the BMS policy manual and the telehealth services temporarily approved during the COVID-19 pandemic to use live video conferencing or telephonic service in the member's home.
- [Certification Requirements Allowed to be Completed Electronically or Telephonically \(Appendix K\)](#)
 - BMS waived requirements for provider agencies to provide on-line training such as CPR and First Aid in lieu of in-person training. Trainings may also be conducted by telephone/electronic means (Skype/Zoom). If member-specific training is provided electronically, it must be through a secure network to protect the member's confidentiality.

Transportation

- [Ambulance Transport COVID-19 Cases Reimbursement Rate](#)
 - BMS increased the reimbursement rate for ambulance medical transportation services for codes A0425, A0427, A0429, and A0998.
- [EMS Specimen Collection and E-100 Protocol](#)
 - BMS added Specimen Collection to the Transportation Contract to allow additional reimbursement to enrolled transportation providers.