MEDICAID POLICY INFORMATION SHEET

Policy Analyst: Adriena Krul-Hall

Phone Number: 517-284-1221

Initial ☐ Public Comment ☒ Final ☒

Brief description of policy:

The bulletin describes the continuation of several COVID-19 laboratory policies outlined within MSA 20-52, MSA 20-57, MSA 20-74, MSA 21-03, and MSA 21-50. Continued policies include coverage of COVID-19 testing as specified under the American Rescue Plan Act of 2021 (ARP), including over-the-counter testing kits dispensed by a pharmacy, separate reimbursement for COVID-19 specimen collection services, enrollment of pharmacies as independent laboratories, and pharmacist's ability to order and administer COVID-19 testing under the PREP act authority.

Reason for policy (problem being addressed):

To notify providers that MDHHS will temporarily continue many of the COVID-19 laboratory coverage and reimbursement policies after the PHE.

Budget implication:

☐ budget neutral
☒ will cost MDHHS $ 4,447,774 Gross ($3,294,390 Federal/$1,153,384 State), and is not budgeted in current appropriation
☐ will save MDHHS $

Is this policy change mandated per federal requirements?

COVID-19 testing coverages, including coverage of over-the-counter testing kits, are mandated per the ARP.

Does policy have operational implications on other parts of MDHHS?

No

Does policy have operational implications on other departments?

No

Summary of input:

☐ controversial
☒ acceptable to most/all groups
☐ limited public interest/comment

Supporting Documentation:

State Plan Amendment Required: ☒ Yes ☐ No If Yes, please provide status: ☒ Approved ☐ Pending ☐ Denied Date: 4/5/23 Approval Date:	Public Notice Required: ☒ Yes ☐ No If yes, Submission Date: **11/17/22**

DRAFT FOR PUBLIC COMMENT Michigan Department of Health and Human Services		
	Project Number: 2321-Lab	**Date:** April 7, 2023

Comments Due: May 12, 2023
Proposed Effective Date: May 12, 2023
Direct Comments To: Adriena Krul-Hall
Address:
E-Mail Address: Krulhalla@michigan.gov
Phone: 517-284-1221 **Fax:**

Policy Subject: COVID-19 Response: Continuation of COVID-19 Laboratory Policies

Affected Programs: Medicaid, Healthy Michigan Plan, MIChild, Children's Special Health Care Services, Emergency Services Only, Maternity Outpatient Medical Services, MI Health Link

Distribution: Practitioners, Outpatient Hospitals, Laboratories, Pharmacies, Local Health Departments, Federally Qualified Health Centers, Rural Health Clinics, Tribal Health Centers, Medicaid Health Plans, Integrated Care Organizations

Summary: Due to the termination of the COVID-19 public health emergency (PHE), this bulletin describes the continuation of several COVID-19 laboratory policies outlined within MSA 20-52, MSA 20-57, MSA 20-74, MSA 21-03, and MSA 21-50. Coverage of COVID-19 testing as specified under the American Rescue Plan Act of 2021 (ARP), including over-the-counter testing kits dispensed by a pharmacy, and separate reimbursement for COVID-19 specimen collection services will continue until September 30, 2024. In addition, pharmacies with the appropriate Clinical Laboratory Improvement Amendments certificate can continue to enroll as independent laboratories and pharmacists can continue to order and administer COVID-19 testing under the PREP act authority.

Purpose: To notify providers that MDHHS will temporarily continue many of the COVID-19 laboratory coverage and reimbursement policies after the PHE.

Cost Implications: *(Specimen Collection Services Only)*: $4,447,774 Gross ($3,294,390 Federal / $1,153,384 State)

Potential Hearings & Appeal Issues: Aware of None

State Plan Amendment Required: Yes ☒ **No** ☐ **If yes, date submitted:** 5/20/22 (Testing coverages) / 1/9/2023 (Clinic specimen collection reimbursement)	**Public Notice Required: Yes** ☒ **No** ☐ **Submitted date:** 5/26/22 (Testing coverages) / 11/17/22 (Clinic specimen collect reimbursement)

Tribal Notification: Yes ☒ **No** ☐ **- Date:** 1/26/22 (Testing coverages) / 11/9/22 (Clinic specimen collection reimbursement)

THIS SECTION COMPLETED BY RECEIVER

☐ **Approved**	☐ **No Comments**
	☐ **See Comments Below**
☐ **Disapproved**	☐ **See Comments in Text**

Signature:	**Phone Number**
Signature Printed:	
Bureau/Administration *(please print)*	**Date**

Michigan Medicaid Policy | MMP

BULLETIN

BEHAVIORAL AND PHYSICAL HEALTH AND AGING SERVICES ADMINISTRATION

MDHHS

Bulletin Number: MMP 23-24

Distribution: Practitioners, Outpatient Hospitals, Laboratories, Pharmacies, Local Health Departments, Federally Qualified Health Centers, Rural Health Clinics, Tribal Health Centers, Medicaid Health Plans, Integrated Care Organizations

Issued: April 7, 2023

Subject: COVID-19 Response: Continuation of COVID-19 Laboratory Policies

Effective: May 12, 2023

Programs Affected: Medicaid, Healthy Michigan Plan, MIChild, Children's Special Health Care Services, Emergency Services Only, Maternity Outpatient Medical Services, MI Health Link

Consistent with the public health emergency (PHE) conditions related to COVID-19, the Michigan Department of Health and Human Services (MDHHS) issued several COVID-19 laboratory bulletins, including MSA 20-52, MSA 20-57, MSA 20-74, MSA 21-03, and MSA 21-50. This bulletin notifies providers of the intent to temporarily continue many of the COVID-19 laboratory coverage and reimbursement policies after the PHE.

I. COVID-19 Test Coverage

As required under the American Rescue Plan Act of 2021 (ARP), Medicaid covers COVID-19 diagnostic and screening laboratory tests and their administration when given in accordance with Centers for Disease Control and Prevention (CDC) definitions and its recommendations for who should receive these tests. COVID-19 testing coverages provided under ARP are anticipated to continue until September 30, 2024. Following the expiration of the ARP provisions, medically necessary COVID-19 laboratory testing will continue to be covered in accordance with Medicaid laboratory policy.

Providers must use appropriate Current Procedural Technology (CPT) codes for the COVID-19 laboratory service when submitting a medical claim for reimbursement. Medicaid-covered CPT codes and associated rates can be found on the Laboratory fee screen database located on the MDHHS website at www.michigan.gov/medicaidproviders >> Billing & Reimbursement >> Provider Specific Information.

II. COVID-19 Test Reimbursement

In accordance with the Centers for Medicare & Medicaid Services (CMS) PHE rulings 2020-1-R and 2020-1-R2, MDHHS temporarily increased payments for laboratory tests used to detect infectious COVID-19 when performed using high throughput technologies and billed under CPT U0003, U0004 and U0005. CMS will discontinue the higher reimbursement rates and return to traditional laboratory payment methodologies following

the end of the COVID-19 PHE. In alignment, MDHHS will discontinue coverage and reimbursement of HCPCS codes U0003, U0004, and U0005 effective for COVID-19 testing performed on or after May 12, 2023. Reimbursement for all other Medicaid-covered COVID-19 laboratory testing will continue in accordance with laboratory policy. Covered COVID-19 tests and their associated reimbursement rates are available on the Laboratory fee screen database located on the MDHHS website at the address indicated above.

III. Ordering COVID-19 Testing

COVID-19 tests performed by a laboratory or over-the-counter (OTC) COVID-19 testing kits dispensed by a pharmacy must be prescribed/ordered by a Medicaid-enrolled physician, physician assistant (PA), advanced practice registered nurse (APRN), or other authorized prescriber allowed per Medicaid policy.

Bulletin MSA 20-52, issued July 31, 2020, temporarily enabled a broader range of qualified medical professionals to order COVID-19 tests in alignment with State and Federal PHE allowances. Pharmacists continue to be authorized ordering providers/prescribers and administrators of COVID-19 testing when acting within the scope specified under the Public Readiness and Emergency Preparedness (PREP) Act. The federal PREP authorities are currently anticipated to end no earlier than October 1, 2024. State licensure scope of practice permissions will resume following the termination of the PREP authority.

IV. Pharmacies Performing COVID-19 Testing

As indicated in bulletin MSA 20-52, MDHHS allowed pharmacies who obtained the appropriate Clinical Laboratory Improvement Amendments (CLIA) certificate to enroll with Medicaid as an Independent Clinical Laboratory. These pharmacies can perform COVID-19 and other laboratory testing permissible under their CLIA certification. Pharmacies should refer to MSA 20-52 for additional information including enrollment instructions. This is a permanent policy change and does not expire following the termination of the PHE.

V. COVID-19 Specimen Collection

Under bulletins MSA 20-57 and MSA 20-74, MDHHS temporarily offers separate reimbursement for COVID-19 laboratory specimen collection performed by physicians, other qualified practitioners, Federally Qualified Health Centers (FQHCs), Rural Health Clinics (RHCs), Tribal Health Centers (THCs), and Tribal FQHCs when no other evaluation and management service or qualifying clinic visit is provided on the same date of service. MDHHS also offers sperate reimbursement for COVID-19 specimen collection when performed by a pharmacist, pharmacy technician under the supervision of a pharmacist, outpatient hospital, or an independent clinical laboratory collecting a sample from a beneficiary when it is medically contraindicated for the beneficiary to leave the home. Separate reimbursement for COVID-19 specimen collection is anticipated to continue until September 30, 2024. MDHHS will notify providers prior to its termination.

Providers are reminded that separate COVID-19 specimen collection reimbursement is limited to providers who only perform collection, packaging, and conveyance services and submit samples to an off-site laboratory for test processing. Otherwise, specimen collection is considered to be an integral part of the laboratory testing procedure and is included in the reimbursement for the test processing.

Refer to bulletins MSA 20-57, MSA 20-74, and MSA 21-03 for complete coverage details and billing instructions.

Effective May 12, 2023, procedure code G2023 will be discontinued. Independent clinical laboratories collecting a COVID-19 specimen from a homebound beneficiary on or after this date must report services using CPT 99001 (handling and conveyance of specimen for transfer from patient in other than an office to lab) along with ICD-10-CM diagnosis code Z20.822 or Z11.52. Associated travel millage should continue to be reported under procedure code P9603.

VI. COVID-19 Home Test Kit Coverage

As required under the ARP, Medicaid coverage continues to be available for OTC COVID-19 home test kits that are FDA approved or granted FDA Emergency Use Authorization (EUA) when dispensed by a Medicaid-enrolled pharmacy. Kits must be ordered by an authorized prescriber and up to one test per day will be covered. Kits containing more than one individual test can be dispensed but will count as a multiple-day supply. Providers should refer to bulletin MSA 21-50 for complete coverage details and pharmacy billing instructions. Coverage of these pharmacy dispensed OTC COVID-19 home kits is anticipated to continue until September 30, 2024. MDHHS will notify providers prior to its termination.

OTC COVID-19 test kit coverage allowances described are in addition to coverages that may be available through a beneficiary's Medicaid Health Plan or Medicare coverage. Beneficiaries and providers should contact the beneficiary's health plan for coverage specifics.

Public Comment

The public comment portion of the policy promulgation process is being conducted concurrently with the implementation of the change noted in this bulletin. Any interested party wishing to comment on the change may do so by submitting comments to Adriena Krul-Hall at KrulhallA@michigan.gov.

Please include "COVID-19 Response: Continuation of COVID-19 Laboratory Policies" in the subject line.

Comments received will be considered for revisions to the change implemented by this bulletin.

Manual Maintenance

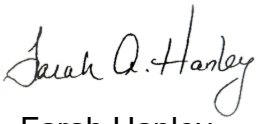
Information is time-limited and will not be incorporated into any policy or procedure manuals.

Questions

Any questions regarding this bulletin should be directed to Provider Inquiry, Department of Health and Human Services, P.O. Box 30731, Lansing, Michigan 48909-8231, or e-mailed to ProviderSupport@michigan.gov. When you submit an e-mail, be sure to include your name, affiliation, NPI number, and phone number so you may be contacted if necessary. Typical Providers may phone toll-free 800-292-2550. Atypical Providers may phone toll-free 800-979-4662.

An electronic copy of this document is available at www.michigan.gov/medicaidproviders >> Policy, Letters & Forms.

Approved



Farah Hanley
Senior Chief Deputy Director for Health