

#### MCC teams including Utilization

Management and Customer Service.

- x MCC will monitor call and authorization request volume and consider additional resources or schedule changes in response to need. We will notify providers of any changes via email. You can also find copies of these notices posted on [MCCofVA.com](https://www.MCCofVA.com).

How will MCC ensure that claims payments remain consistent and timely during this time?

- x MCC has executed our pandemic/disaster plan. We do not foresee any untimely payments specifically related to the pandemic response.
- x Providers experiencing claim issues should contact MCC at 1-800-424-4524 (TTY 711).

What codes should providers use for billing COVID-19 testing?

- x U0001 ±CDC testing laboratories to test patients for COVID-19
- x U0002 ±non-CDC testing for COVID-19

How should providers bill for services related to COVID-19?

- x MCC will follow the most recently released DMAS guidelines for COVID-19-related billing.
- x 3 O H D V H V H H W K H ' 0 \$ 6 P H P R W L W O H G 3 3 U R Y L G H U ) O H [ L E D W L W L H V 5 H O D W H G W R & <https://www.dmas.virginia.gov/#/emergencywaiver> and the Official Coding Guidelines from the Centers for Disease Control (CDC): <https://www.cdc.gov/nchs/data/icd/ICD-10-CM-Official-Coding-Gudance-Interim-Advice-coronavirus-feb-20-2020.pdf>.

How will MCC handle coverage and billing for telehealth services?

- x MCC will follow the most recently released DMAS guidelines for telehealth services. Current guidance relaxes platform requirements for provision of telehealth.
- x Telehealth modifiers
  - o GT<sup>2</sup> interactive audio and video telecommunications system
  - o GQ<sup>2</sup> synchronous telecommunications system
- x Telehealth place of service (POS) code
  - o POS (02)
- x For more about telehealth coverage and billing guidelines, please see these sections in the ' 0 \$ 6 P H P R W L W O H G 3 3 U R Y L G H U ) O H [ L E D W L W L H V 5 H O D W H G W R & <https://www.dmas.virginia.gov/#/emergencywaiver>
  - o Attachment A, Table of Codes for Telehealth
  - o Coverage of Targeted Services Delivered Via Telehealth

Will MCC allow a provisional participation status for providers who have submitted credentialing applications but are not yet approved? In particular, what can be done for practitioners who are returning to the workforce to help with the pandemic response after retiring or another break from active practice?

- x Provisional status will not be necessary. MCC will default to 100% of Medicaid rates for non-participating providers.

Thank you for all you are doing to help our members during this challenging time.