September 28, 2020

The MMS will continue to monitor developments related to the coronavirus (COVID-19) and the response by state and federal agencies. For current information, including updates from NEJM, visit the dedicated page on the MMS website: massmed.org/covid-19.

Public Health

“Hunger and Housing: Lessons from COVID-19”: Video, slides, and summary available

On September 23, 2020, the Massachusetts Medical Society (MMS) hosted a 60-minute Virtual Forum on the physical and mental health effects of food and housing insecurity with a focus on how systemic economic and racial inequities exacerbate the impact of the pandemic on already disadvantaged individuals and communities. The program included a discussion of recommended actions and policy solutions. Megan Sandel, MD, MPH, associate director of the GROW Clinic at Boston Medical Center, principal investigator with Children’s Health Watch, and associate professor of pediatrics at the Boston University Schools of Medicine and Public Health, presented. Kathryn Brodowski, MD, MPH, preventive medicine physician, chair of the MMS Committee on Nutrition and Physical Activity, moderated the program.

The program recording, along with the slide deck and summary, can be found here.
Practice Management

Telehealth for community-based organizations - a webinar series

Community-based organizations can help connect homeless individuals with telemedicine services during the COVID-19 pandemic. An upcoming live webinar will discuss a federal program to improve access to phone and internet services for low-income individuals. Hosted by The U.S. Department of Health and Human Services’ (HHS) Office of the Assistant Secretary for Preparedness and Response (ASPR) Technical Resources Assistance Center.

- Date: Wednesday, September 30
- Time: 2:00 p.m. EST
- Register today »

Deadline approaching: Request MIPS targeted review by Oct. 5

If you participated in the Merit-based Incentive Payment System (MIPS) in 2019, your performance feedback and final MIPS score are now available for review on the Quality Payment Program (QPP) website. The payment adjustment you will receive in 2021 is based on this final score. A positive, negative, or neutral payment adjustment will be applied to the Medicare paid amount for covered professional services furnished under the Medicare physician fee schedule in 2021.

Physicians, physician groups, and accountable care organizations (and their authorized representatives) can access their performance feedback by logging into https://qpp.cms.gov/ with the same Enterprise Identity Management (EIDM) credentials used to submit and view their data during the submission period.

If you believe there is an error in your group practice or clinician's 2021 MIPS payment adjustment calculation, you can request a targeted review via the QPP site until October 5, 2020, at 8:00 p.m. ET. For more information on how to request a targeted review, please refer to the 2019 Targeted Review.
Harvard Pilgrim telehealth update

Harvard Pilgrim will continue to reimburse for telemedicine, telehealth, and telephone-only services consistent with in-person rates through December 31, 2020, or the end of the public health emergency period—whichever is later. Harvard Pilgrim will comply with state regulations.

- As of October 1, telemedicine services are covered in full (no copays, deductibles, or coinsurance) **only for COVID-19 treatment**.
- As of October 1, cost sharing for all other telemedicine services will resume for other kinds of virtual visits (e.g., urgent care, routine care, and behavioral health), according to the terms of your plan. This policy applies to commercial plans in Connecticut, Maine, Massachusetts, and New Hampshire, as well as Medicare Supplement plans.
- Cost sharing will continue to be waived for all telemedicine services (no copays, deductibles, or coinsurance) for Medicare Advantage members through December 31, 2020.
- Referral requirements for all telemedicine/telehealth services, not only COVID-19 claims, are waived through September 28, 2020.
- Telemedicine services may be used for any clinically appropriate, medically necessary covered service, provided the service can be administered effectively via telemedicine/telehealth technology — including PT/OT/ST, lactation services, and home care. Providers should carefully evaluate whether certain services are appropriate to provide via telemedicine/telehealth, with care plan, patient need, and ability to effectively deliver remotely all considered. For example, certain home health aide services would not be eligible for telemedicine reimbursement.
- Behavioral Health Cost-Sharing: **Member cost shares for behavioral health services, both in-person and via telehealth, resume on October 1, 2020.**

United HealthCare important dates
This document is a quick reference guide for the beginning and end dates of the temporary programs and process changes that UnitedHealthcare implemented because of COVID-19. More details are available here: UHCprovider.com/COVID19.

Keep track of which temporary measures are expiring and which are being extended, including information related to:

- Cost Share Waivers – Testing and Treatment
- Cost Share Waivers – Senior Support
- Cost Share Waivers – Telehealth
- Telehealth Expansion
- Timely Filing and Prescription Refills
- Referrals and Provisional Credentialing
- Prior Authorization

Aetna telehealth cost sharing update

- For commercial plans, the cost share waiver for any in-network covered telemedicine visit – regardless of diagnosis – began on March 6, 2020, and ended on June 4, 2020.*
- Aetna extended all member cost-sharing waivers for covered in-network telemedicine visits for outpatient behavioral and mental health counseling services through December 31, 2020. Aetna self-insured plan sponsors offer this waiver at their discretion.
- Cost share waivers for any in-network covered medical or behavioral health services telemedicine visit for Aetna Student Health plans are extended until December 31, 2020.
- For Medicare Advantage plans, Aetna is waiving cost shares for in-network primary care and specialist telehealth visits, including outpatient behavioral and mental health counseling services, through December 31, 2020.
- *Or as specified by state or federal regulation.