

## **COVID-19 Update: Dell Children's Health Plan suspends select prior authorization rules and announces significant policy adjustments in response to unprecedented demands on health care providers**

March 26, 2020

Dell Children's Health Plan recognizes the intense demands facing doctors, hospitals and all health care providers in the face of the COVID-19 pandemic. Today, unless otherwise required under state and federal mandates, Dell Children's Health Plan will suspend select prior authorization requirements, member cost sharing, and certain claims review and handling protocols to allow health care providers to focus on caring for patients diagnosed with COVID-19. These adjustments apply to members of all lines of business.

### **Inpatient and respiratory care**

Prior authorization requirements are suspended for patient transfers:

- All hospital inpatient transfers to lower levels of care (by land only). Although prior authorization is not required, Dell Children's Health Plan requests voluntary notification via the usual channels to aid in our members' care coordination and management.
- The 21-day inpatient requirement before transferring a patient to a long-term acute care hospital is suspended.
- Concurrent review for discharge planning will continue unless required to change by federal or state directive.
- Prior authorization requirements are suspended for COVID-19 Durable Medical Equipment including oxygen supplies, respiratory devices and continuous positive airway pressure (CPAP) devices for patients diagnosed with COVID-19, along with the requirement for authorization to exceed quantity limits on gloves and masks.
- Respiratory services for acute treatment of COVID-19 will be covered. Prior authorization requirements are suspended where previously required.

### **COVID-19 testing**

Laboratory tests for COVID-19 at both in-network and out-of-network laboratories will be covered with no cost sharing for members.

### **Claims audits, retrospective review and policy changes**

Dell Children's Health Plan will adjust the way we handle and monitor claims to ease administrative demands on providers:

- Hospital Claims audits requiring additional clinical documentation will be limited for the next 90 days, though Dell Children's Health Plan reserves the right to conduct retrospective reviews on these findings with expanded lookback recovery periods. To assist providers, Dell Children's Health Plan will continue to offer electronic submission of clinical documents through the Availity Portal.
- Retrospective utilization management review will also be suspended during this 90-day period, and Dell Children's Health Plan reserves the right to conduct retrospective utilization management review of these claims when this period ends and adjust claims as required.
- Our special Investigation programs targeting provider fraud will continue, as well as other program integrity functions that ensure payment accuracy.
- New payment and utilization management policies and policy updates will be minimized, unless helpful in the management of the COVID-19 pandemic.

Otherwise, Dell Children's Health Plan will continue to administer claims adjudication and payment in line with our benefit plans and state and federal regulations, including claims denials where applicable. Our timely filing requirements remain in place, but Dell Children's Health Plan is aware of limitations and heightened demands that may hinder prompt claims submission.

### **Provider credentialing**

Dell Children's Health Plan will continue to process provider credentialing within the standard 15-18 days even if we are unable to verify provider application data due to disruptions to licensing boards and other agencies. We will verify this information when available.

If Dell Children's Health Plan finds that a practitioner fails to meet our minimum criteria because of sanctions, disciplinary action etc., we will follow the normal process of sending these applications to committee review, which will add to the expected 15-18 day average timeline. We are monitoring and will comply with state and federal directives regarding provider credentialing.

Dell Children's Health Plan is also extending the length of time a prior authorization is in effect for elective inpatient and outpatient procedures to 90 days. This will help prevent the need for additional outreach to Dell Children's Health Plan to adjust the date of service covered by the authorization.

Providers should watch the [Provider News](#) page for any future administrative changes or policy adjustments we may make in response to the COVID-19 pandemic.