Has the process for authorizations changed?

No. Physicians and other providers are to continue to submit all services that require authorization in the same manner as they do today: Via the portal, secure link, or fax. CenCal Health has approved the following exceptions/extensions for authorizations:

**The Prior Authorization requirements for the following CPT codes have been removed until further notice:**

- 87486 – Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia pneumoniae, amplified probe technique.
- 87581 – Infectious agent detection by nucleic acid (DNA or RNA); Mycoplasma pneumoniae, amplified probe technique.
- 87633 – Infectious agent detection by nucleic acid (DNA or RNA); Respiratory virus (e.g., adenovirus, influenza virus, coronavirus, metapneumovirus, parainfluenza virus, respiratory syncytial virus, rhinovirus), incl multiplex reverse transcription, when performed, & multi amplified probe technique; multi type.
- 87798 – Infectious agent detection by nucleic acid not otherwise specified; amplified probe technique, each.

**The Prior Authorization requirements for the following have been modified or removed until further notice:**

- Member transfers to a local/in area SNF, an Acute Inpatient Rehab or a LTAC.
  - First week in facility approved automatically.
  - Notify CenCal Health’s Health Services department of transfers within 48 hours via the Provider Portal or fax.
  - Out of area transfers still require a prior authorization.
- Waived approved prior authorization for members discharged from hospital to home health agency.
- Waived approved prior authorization for member movement from an equivalent location for the same service(s).

**Additional CPT procedure codes have been distributed by DHCS for COVID-19 antibody testing:**

- 86318 – Immunoassay for infectious agent antibody(ies), qualitative or semiquantitative, single step method.
- 86328 – Immunoassay for infectious agent antibody(ies), qualitative or semiquantitative, single step method; severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) [Coronavirus disease (COVID-19)].
- 86769 – Antibody; severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) [Coronavirus disease (COVID-19)].
Where can I get current information on COVID-19 news?

Check credible sources for information, especially public health agencies.

It is crucial that providers stay informed as to the most current guidance and best practices relative to COVID-19, and should whenever possible support continuity and integration of medical and behavioral health services via telehealth and related adaptations in delivery during the crisis. CenCal Health and our network providers have a crucial responsibility to ensure strong care coordination and services linkage among primary care, behavioral health, and other specialty care, among other areas of health care services. During public health crisis such as COVID-19, this role is more important than ever.

DHCS is asking that providers stay alert for signs of and assess for stress-related morbidity, and create responsive treatment plans, including supplementing usual care with measures that help regulate the stress response system.

Additional resources on how to mitigate the stress-related health outcomes anticipated with the COVID-19 emergency can be found on ACEsAware.org. ACEs resources and information for Medi-Cal can be found on the DHCS webpage at dhcs.ca.gov/provgovpart/Pages/TraumaCare.

For general information on COVID-19, please visit the California COVID-19 Response web page at covid19.ca.gov/ and the California Department of Public Health’s COVID-19 web page at cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/ncov2019. For Medi-Cal information, please reference the DHCS COVID-19 Response web page at medi-cal.ca.gov.

The California Medical Association Issues COVID-19 Financial Toolkit

California Department of Public Health Recommends Reassuring Messaging to Patients

AAP and CDC recommend that childhood immunizations continue to be prioritized during the COVID-19 pandemic. However parents may be reluctant to bring their children in during the pandemic. To help reassure them, you may use the following messages, adapting them as needed to how your clinic is operating:

1. Emphasize steps your practice is taking to keep patients and clinic staff safe.
   - “We are taking several precautions to help keep our patients safe, including scheduling baby shot visits in the morning and only seeing sick children in the afternoon.”
   - “We’re screening everyone who comes into the office, including taking everyone’s temperature.”
   - “We disinfect our clinic twice daily and exam rooms after each visit.”
   - “We have designated areas of our offices to separate sick patients from healthy patients.”
   - “We all wear masks at all times.”
   - “We’re scheduling appointments so only one patient is at the clinic at a given time.”

2. Consider alternate ways to deliver care.
   - “We can schedule a telehealth appointment, where I address your questions and concerns on your phone or computer, followed by a brief immunization visit to help keep your baby safe.”
   - “Our clinic is offering ‘drive-thru’ immunizations, so you don’t even have to come inside the clinic!”

3. Reinforce the fact that vaccine-preventable diseases will continue to be a threat to the child.
   - “As a parent, I would not wait to immunize my baby; as your doctor, I am strongly recommending we help protect your baby from diseases that could cause harm during or after the pandemic.”

4. Inform them that getting caught up later may not be so easy.
   - “When California ‘reopens,’ there may be many children who need to catch up on immunizations, increasing wait times for appointments. While waiting they could be exposed to dangerous vaccine-preventable diseases circulating in the community. Let’s avoid that danger by keeping your child on track.”

To help your vital work, we encourage you to check out CDC’s NIIW tools and resources and the California Department of Public Health’s on-demand webinar on guidance for immunizations during the pandemic. Thank you again for all that you do!

Disclaimer: The article, “California Department of Public Health Recommends Reassuring Messaging to Patients,” was written and published by the Immunization Branch of the CDPH.
How can we help patients get their prescriptions easier?

A list of network pharmacies providing free delivery of medications, as well as a mail-order option, is available on our website at cencalhealth.org/coronavirus.

Effective March 25, 2020, CenCal Health elected to allow for prescription fills up to 90-days for routine (non-narcotic) maintenance medications in an effort to reduce both pharmacy deliveries and member trips to the pharmacy.

How should providers bill CenCal Health for COVID-19 testing?

DHCS provided the following guidance to all health plans on March 13, 2020:

**HCPCS Code Addition for COVID-19:**

- U0001, Laboratory testing of patients for SARS-CoV-2
  - Has been deployed to the production environment on 3/21/2020
  - Will be effective for dates of service beginning February 4, 2020
- U0002, Laboratory testing of patients for COVID-19
  - Has been deployed to the production environment
  - Will be effective for dates of service beginning February 4, 2020

The reimbursement rates for the above codes will be $35.91 and $51.31 respectively. The rates are subject to Medi-Cal policy and contracted provider agreements, if applicable.

Where can I get current information on COVID-19 news?

Check credible sources for information, especially public health agencies.

- Centers for Disease Control and Prevention: cdc.gov
- Santa Barbara County Public Health: countyofsb.org/phd/ 1-833-688-5551
- San Luis Obispo Public Health: slocounty.ca.gov 1-805-781-5500
- California Department of Public Health: cdph.ca.gov
- CenCal Health’s COVID-19 provider updates: cencalhealth.org/coronavirus/providers