



Network Notification

Notice Date: March 31, 2020
To: Indiana Marketplace Providers
From: CareSource
Subject: COVID-19: Temporary Telehealth Services
Effective Date: March 26, 2020

Summary

The Centers for Medicare and Medicaid Services (CMS) has made the decision to expand the telehealth benefit on a temporary and emergency basis under the 1135 waiver authority and Coronavirus Preparedness and Response Supplemental Appropriations Act. Telehealth as defined in the emergency rule is the direct delivery of health care services to a patient via synchronous, interactive, real-time electronic communication comprising both audio and video elements; or activities that are asynchronous and do not have both audio and video elements such as telephone calls, images transmitted via facsimile machine, and electronic mail.

Impact

All participating providers are eligible to render services to members following the fact sheet published by CMS in an effort to expand the telehealth benefit on a temporary and emergency basis under the 1135 waiver authority and Coronavirus Preparedness and Response Supplemental Appropriations Act. CareSource will follow all published regulatory guidance in regards to non-participating providers who render telehealth services. All claims will be processed in accordance to the billing guidelines outlined on the [CMS fact sheet](#). CareSource will waive all cost-share for telehealth services related to testing, screening and treatment of COVID-19 based on direction from the Indiana Department of Insurance published on [Bulletin 252](#).

Importance

Given that COVID-19 is a communicable disease, CareSource members are encouraged to utilize telehealth services when available.

Please note: CareSource reserves the right to implement and revoke this policy without the state specific contractual notification requirements for a change in policy that is normally required. This would apply both for the effective date as well as for the withdrawal of the policy due to the urgent and emergent nature of the COVID-19 pandemic.

Questions?

For questions specific to the temporary and emergent expansion of the CMS Telehealth benefit on under the 1135 waiver authority and Coronavirus Preparedness and Response Supplemental Appropriations Act, please refer to the CMS [Frequently Asked Questions resource](#).

For all other questions, please contact CareSource's Provider Services at **1-866-286-9949**. Our hours of operation are 8 a.m. to 6 p.m., Eastern time.

Indiana Department of Insurance

March 26, 2020

Bulletin 252

Due to the declaration of a public health emergency throughout the State of Indiana as a result of the coronavirus disease 2019 ("COVID-19") and the issuance of Governor Holcomb's Executive Order 20-05, on March 19, 2020, the Indiana Department of Insurance (IDOi) issues this bulletin to assist consumers, businesses, and entities regulated by the IDOL

1. Moratorium on Policy Cancellations and Non-Renewals

The IDOi requests all insurance companies and HMOs in Indiana to institute a moratorium on policy cancellations and non-renewals of any insurance policy in effect for a policyholder in Indiana to allow a grace period for any policyholder in Indiana for a period of 60-days for any premium payment due from March 19, 2020 to May 18, 2020.

This moratorium is not a waiver; it is only an extension of the period in which to pay the premium and a suspension of any penalty attached to late payment therein. After the 60-days, the policyholder will have to resume making premium payments. The IDOi requests insurance companies work with the impacted policyholders in paying the premiums that would have become due during the moratorium period by either allowing a payment plan or a further extension in paying the amount due in full.

The moratorium applies only to cancellations and non-renewals attributed to a failure to pay premiums directly during the 60-day period. If a policy is to be cancelled or non-renewed for any other allowable reason, the cancellation or non-renewal may be made pursuant to the statutory notice requirements. However, the IDOi requests insurers and HMOs take into consideration that persons may be unable to receive notice of cancellation or non-renewal during this COVID-19 public health emergency.

In addition, the IDOi will modify its own internal policies by implementing a 60-day grace period relating to renewals and cancellations for all licensees, certificate holders, and registrants. This includes premium tax and surplus lines premium tax filings. Any penalties assessed due to late payment during this period will be waived. The 60-day extension will also be applied to the Continuing Education (CE) Requirements for insurance producers.

The IDOi, recognizing the potential changes in business operations or personnel, will accept temporary address changes at no fee either electronically through www.sircon.com or www.NIPR.com. The duplicate license fee of \$10.00 for producers will be waived during this 60-day period.

2. Cost-Sharing and Prior Authorizations for COVID-19 Testing Services and Treatment

The IDOi reminds health insurers and HMOs about the enactment of the Families First Coronavirus Response Act Public Law 116-127, (H.R. 6201), and interprets that increase prices or coverage costs involving medical care given for COVID-19 means the following:

Insurers and HMOs must cover testing services and treatment for COVID-19, and waive cost-sharing amounts, including deductibles, copayments, and coinsurance for COVID-19 testing or treatment associated with health care provider office visits, urgent care center visits and emergency department visits that result in an order for or administration of testing.

Insurers and HMOs must waive any prior authorization for COVID-19 testing services and treatment, which thereby enabling members receive care as soon as possible without any administrative and management barriers.

In addition, the IDOi encourages the use of telemedicine in all reasonable instances in connection with testing, screening, and treatment of COVID-19, and to waive any cost-sharing for the use of telemedicine related to testing, screening, and treatment of COVID-19 to ensure policyholders have access to this critical preventive care.

Finally, while self-funded and employer-sponsored group health plans are not regulated by the IDOi, the IDOi would like to remind the sponsors of self-funded plans that Families First Coronavirus Response Act Public Law 116-127 (H.R. 6201), requires coverage of COVID-19 testing and treatment by self-funded plans.

3. Suspending of Requirement for Indiana Licenses

In response to the COVID-19 pandemic, and to ensure healthcare access to all Hoosiers, Governor Holcomb has directed IDOi Commissioner Stephen W. Robertson to temporarily suspend requirements for providers participating in the Indiana Patient's Compensation Fund (PCF) to hold an Indiana license. Out-of-state licensed providers are eligible for the credits and rate reductions listed in [Rule 21](#) and [Rule 60](#).

The enrollment process for out-of-state licensed providers to participate in the PCF will be similar to current procedures for in-state licensed providers. When filing a certificate of insurance for an out-of-state provider not licensed in Indiana, the provider's insurance carrier or agent will first notify the PCF staff by sending an email to PCF-COI@idoi.IN.gov with the provider's:

- Full name, including middle initial or middle name
- A copy of the current license from the provider's home state
- Full business address (addresses are visible to the public at <https://www.indianapcf.com/>)
- Indiana ISO (specialty class) code
 - o ISO Codes recognized by Indiana can be found in [Rule 60](#) (Rule 60 rates set by [Bulletin 247](#) and [Bulletin 251](#)) and [Rule 21 Rates](#).

Enrollment requests are processed by the end of the next business day whenever possible; however a large number of requests could result in a delay. Please allow up to 2-3 business days for entry. Once you receive a provider ID from the PCF, you will be able to proceed with filing the certificate of insurance coverage.

Online filing of certificates of coverage for out-of-state providers will be conducted by the out-of-state provider's insurance carrier or agent using the PCF online system located at

<https://secure.in.gov/apps/idoi/certificates/>. For any questions, please e-mail PCF-COI@idoi.IN.gov.

In addition, pursuant to Executive Order 20-05, the IDOI waives the 30-day deadline for the payment of surcharge for up to 60 days, making the surcharge due and payable within 90 days. No penalties will be incurred because of late or delayed surcharge payments for up to 90 days from the effective date of coverage. These provisions regarding part-time providers and retired physicians are effective for the duration of time that Executive Order 20-05 is in force.

Moreover, under the Indiana Medical Malpractice Act, Ind. Code 34-18-1-1, health care providers must pay a surcharge to be qualified in the Indiana Patient's Compensation Fund. Providers employed less than full-time are eligible to pay a decreased surcharge based on their part-time status. In the event that any part-time providers work above and beyond their part-time hours in response to the COVID-19 pandemic, the PCF will honor their part-time qualification status for all hours worked.

Retired physicians, or other providers not currently participating in the PCF who mobilize in response to the COVID-19 pandemic and wish to have PCF coverage will need to qualify pursuant to standard procedures. However, as noted above, under Executive Order 13(A), no penalties will be incurred because of late or delayed surcharge payments for up to 90 days from the effective date of coverage. These provisions regarding part-time providers and retired physicians are effective for the duration of time that Executive Order 20-05 is in force.

Questions regarding this bulletin should be directed to Heather Alford at HALford@idoi.IN.gov 317-232-2421.

INDIANA DEPARTMENT OF INSURANCE

A handwritten signature in black ink that reads "Stephen W. Robertson". The signature is written in a cursive style with a horizontal line drawn through the middle of the name.

Stephen W. Robertson
Insurance Commissioner