

PPE and Respiratory Pathogens

The purpose of this bulletin is to notify providers of changes to Aetna Better Health of Texas reimbursement policies pertaining to certain COVID-19 related services.

Reimbursement to Providers for Personal Protective Equipment

We are updating our reimbursement policy for procedure code S8301 when billed according to Texas Medicaid guidelines. Effective May 1, 2021, we will update our system to no longer require submission of pricing documentation with this code. Instead, reimbursement for this code will be made at 35% of billed charges. Providers are required to maintain appropriate documentation regarding the billing of this code in the event of an audit. If providers believe that this reimbursement does not adequately cover the cost of PPE, appropriate documentation supporting the cost may be submitted via the appeals process.

As part of this effort to reduce the administrative burden on our providers, we will also be reprocessing all claims for this code that were previously denied for insufficient documentation. These adjustments will be complete no later than July 1, 2021. No action is required from providers to trigger these adjustments.

As a reminder, in accordance with Texas Medicaid guidelines, S8301 may be reported for any encounter in which personal protective equipment (PPE) above and beyond normal protocol is required to safely treat a patient with or without a diagnosis of COVID-19. For example, if under normal circumstances gloves alone are sufficient for the encounter, any additional PPE required is considered “above and beyond normal protocol.” Commonly used supplies for any given service/procedure are not considered “above and beyond normal protocol.”

Reimbursement for Respiratory Panel Codes

Point of care testing for respiratory panels in an outpatient setting will continue to be allowed without prior authorization. We are implementing a claims edit to ensure appropriate diagnoses are submitted on the claim for dates of service June 1, 2021 and after.

For test codes for up to 5 respiratory pathogens (87631, 87635, U0001, U0002, U0003, U0004), we will allow the service with COVID-19 ICD codes B97.29 and U07.1, to guide therapy in acute lower respiratory tract disease, for immunocompromised members, and for those considered at high-risk for complications.

For test codes for more than 5 respiratory pathogens (87632, 87633), we will allow the service for immunocompromised members and for those considered at high-risk for complications.

Questions

For any questions, please contact your provider rep directly or Provider Services at: **1-800-248-7767** (Bexar), **1-800-306-8612** (Tarrant) and **1-844-787-5437** (STAR Kids).