

Covid-19 Emergency Period

Greetings from MCS Advantage, Inc. and MCS Life Insurance Company. COVID-19 was declared a major public emergency by the World Health Organization (WHO), and categorized as a pandemic on March 11, 2020. The Government of Puerto Rico issued an emergency declaration starting March 12, 2020 for as long as the emergency lasts.

We are working hard to ensure continuity and access to the healthcare services our members and insureds need. Therefore, you can rest assured that we will continue communicating with you as the situation develops.

Among other topics we wish to inform you about are the regulatory letters issued by the Puerto Rico Insurance Commissioner (Spanish acronym OCS) during the COVID-19 emergency period, and Joint Senate Resolution 491, signed March 20, 2020, which makes the provisions of the law for the use of telemedicine in Puerto Rico more flexible.

Applicable Exceptions During the Emergency Period

Pharmacy Services

MCS Life

Any requirements used for the management of drug dispensing (excluding controlled drugs), have been suspended. This includes:

- Waiting time for refills (Refill Too Soon)
- Pre-authorizations
- Step Therapy
- Limit by Medical Specialty
- Limit on Drug Quantities
- Extended Drug Requirements (benefits with mail order mandates)

MCS Advantage

- The Refill Too Soon order has been inactive since January 2020, and will continue to be so until further notice.
- Access to all pharmacies is allowed, even if they are not contracted as part of our network.

For both lines of business, and in accordance with Joint Senate Resolution 491, and for the duration of the emergency, in addition to **e-prescribing**, all doctors may send a prescription by the following means:

- Orally (phone call from the doctor to the pharmacy)
- Fax
- Photo sent only by text message, email or WhatsApp. In these cases, the pharmacists will call the doctor to validate or confirm the veracity of the prescription.

Controlled drugs must follow prescription and dispensing requirements established by federal or state law.

The exceptions listed here remain subject to the eligibility of the member or insured, and the benefit being part of their coverage. In addition, provided services must meet the clinical criteria of the medical need.

Providers Outside the Network

MCS Life and MCS Advantage

All members and insureds may access healthcare services through non-participating providers without any penalty or restriction, whether an emergency or not, within the plan's service area. The service must be medically necessary and be part of the coverage. Co-payments and co-insurance will be applied as they correspond to the services accessed within the network (in-network).

Pre-authorizations and Referrals

MCS Life and MCS Advantage

Exemptions related to the suspension of preauthorization requirements will remain, in accordance with directives issued by the OCS and CMS, as detailed below:

- MCS Life – March 15, 2020 until further notice
- MCS Advantage – December 28, 2019 until further notice

Durable Medical Equipment (DME) and Drugs Covered by Medicare Part B

MCS Life and MCS Advantage

In accordance with the exemptions currently in force, the following services do not require pre-authorization:

- Durable Medical Equipment
- Orthotics
- Prosthetics
- Supplies (DME/POS)
- Drugs Covered by Medicare Part B

MCS Advantage and MCS Life will continue to evaluate whether services are medically necessary and covered by the plan prior to issuing a payment, and subject to the eligibility of the member and

benefits covered. Together with your claim, you must submit documentation showing that the services provided are medically necessary and covered by the plan.

Claims Submission

MCS Life and MCS Advantage:

Effective March 12, 2020, the payment regulation was extended:

- **New Invoices:** From 90 to 120 days. This 120-day period applies to invoices dated December 13, 2019 and forward.
- **Adjustments:** From 45 to 120 days. This 120-day period applies to explanations of payment dated January 27, 2020 and forward.

Given the state of emergency decreed by the Governor of Puerto Rico, we urge you to continue submitting your claims electronically.

Telemedicine

MCS Life and MCS Advantage

All encounters are subject to medical need, the correct coding rules, and industry standards, as applicable. Providers can offer remote evaluation services and virtual consulting for the duration of the emergency. Go to the Communications section of Provinet, Coding Rules subcategory, to download the **Payment Rates and Regulations for Virtual Services, Telemedicine and SARS-CoV-2 Detection** document.

The fee for the service will be recognized according to the provider's contract and the patient's coverage. We are including the official communication on COVID-19 billing and coding.

Joint Senate Resolution 491 provides for the following use of telemedicine:

- Any doctor authorized to practice medicine in Puerto Rico may care for patients through the use of telemedicine, telephone consultations and/or any other remote means, and bill for the services. Certification for the telemedicine practice granted by the Licensing and Medical Discipline Board will not be required for the duration of the emergency.
- The primary physician's countersignature is not required for prescriptions or referrals.
- Doctors using telemedicine are authorized to submit a prescription or medical order. The latter applies to any provider whose service requires an order, such as clinical laboratories, radiological studies or other studies.

The services must comply with documentation guidelines for evaluation and management services. The rate will be recognized based on the doctor's contract with MCS Advantage or MCS Life for that patient (capitated or FFS). **You must use Place of Service 02 (POS/Place of Service) with the CR (catastrophe/disaster related) modifier.**

Laboratory Tests for COVID-19 and SARS-COV-2

MCS Life and MCS Advantage

- COVID-19 and SARS-COV-2 tests are covered without co-payments or co-insurance, and referral requests are suspended. They only require a medical order.
- In addition, and included in the basic coverage, any current or future diagnostic tests and medical treatments will be paid to attend to COVID-19, in line with the rates established by the CMS.

CMS has developed the codes under the Healthcare Common Procedure Coding System (HCPCS) to bill and monitor new Covid-19 cases, as follows:

Code	Description
U0001	CDC 2019 Novel Coronavirus (2019-nCoV) real time RT-PCR Diagnostic Panel – (code established on February 2020)
U0001	Non-CDC laboratory tests for SARS-CoV-2/2019 (COVID-1) (code established on March 2020)

Other Aspects to Consider

Any permanent or temporary building enabled as a service facility to attend to isolated patients with COVID-19 symptoms will be considered an extension of the facility where you are.

References

1. <http://ocs.gobierno.pr/ocspr/files/Cartas%20Normativas%202020/CN-2020-270-D-.pdf>
2. <http://ocs.pr.gov/ocspr/files/Cartas%20Normativas%202020/CN-2020-268-D.pdf>
3. [http://ocs.pr.gov/ocspr/files/Cartas%20Normativas%202020/CN-2020-269-D Enmienda a Directrices sobre el COVID-19.pdf](http://ocs.pr.gov/ocspr/files/Cartas%20Normativas%202020/CN-2020-269-D%20Enmienda%20a%20Directrices%20sobre%20el%20COVID-19.pdf)

We remain committed to keeping you informed of any additional guidelines we receive on this subject. If you have any concerns regarding the contents of this communication or our operations, contact your assigned Service Specialist. You can also contact our Provider Service Call Center at 787.620.2535 (metro area) or 1.800.981.4766 (toll free) Monday to Friday from 8:00 a.m. to 5:00 p.m., and Saturday from 8:00 a.m. to 1:00 p.m.