

Guidance for Long Term Care Facilities, DHSS personnel, and DSS personnel on the invoicing process.

Long Term Care facilities, including Assisted Living facilities, Residential Care facilities, Intermediate Care facilities, and Skilled Nursing Facilities (LTCs) that experience an outbreak (one or more positive case) of COVID-19 are working with the state to conduct base-line facility testing and some immediate follow-up testing in order to contain the outbreaks.

In order to furnish immediate aid and relief in response to the state of emergency due to the spread of COVID-19, the state is making some funds from the Coronavirus Relief Fund available to LTCs, so that cost is not a barrier to this important testing.

If a LTC partners with a laboratory that does not bill insurance, the LTC should bill Medicare first if possible. Medicare Part B covers COVID-19 tests. Read more at <https://www.medicare.gov/coverage/coronavirus-disease-2019-covid-19-tests>.

If the LTC still has uncompensated testing costs, they may use this process to submit an invoice to the state along with the lab's bill/invoice, and receive reimbursement from the Coronavirus Relief Fund. The LTC may use this process for residents and employees both. The website is located at <https://apps.dss.mo.gov/LongTermCareCovid19Invoices/>. It allows the LTC's representative to upload documents and submit the invoice, all on-line, and the site provides instructions. There is also a dedicated e-mail account for questions at COVID19invoice@dss.mo.gov.

What happens after the LTC submits the testing invoice? State personnel will review to ensure the invoice is complete and the supporting documentation has been uploaded/provided and the invoice will be processed, reimbursing the facility via direct-deposit. If the LTC is not already in the state's vendor system, they will be required to do that. Detailed instructions are on the website. If the invoice is incomplete or missing documentation, the invoice will not be processed and the facility will be contacted so that the invoice can be resubmitted once complete.

For Skilled Nursing facilities (SNFs) only:

SNFs may also use this process to submit an invoice for other COVID-19 necessary expenditures incurred by the facility. A representative of the SNF will complete and submit an attestation, using the site above. Attestations, the other necessary expenditure invoice, and instructions are all available on the site. SNF representatives may use the email address above for questions about this process, as well.

Costs for SNFs are capped at a certain amount, per facility. The funds are capped at a maximum amount determined by the number of certified skilled nursing facility beds

multiplied by \$1,500.00. This is based on the number of beds reported in the Certificate of Need covering the first quarter (January through March) of 2020.

What happens after the SNF submits the other necessary expenditures invoice? State personnel will review to ensure the invoice is complete, supporting documentation is provided, and an attestation was submitted. If it is incomplete or if there are any questions, the facility will be contacted and allowed to resubmit the invoice if necessary. When an invoice is complete and has necessary supporting documentation to support the costs, and an attestation has been received, the invoice will be processed, reimbursing the SNF via direct-deposit. If the SNF is not already in the state's vendor system, they will be required to do that. Detailed instructions are on the website.

When you submit an invoice, please include a contact name, and email or phone number, in case we need to contact you with questions.