

DRAFT COVID-19 Content for HHS Public Site

People Receiving Services section

Where to go for information on the coronavirus (COVID-19)

Visit the [Centers for Disease Control \(CDC\)](#) and [Texas Department of State Health Services \(DSHS\)](#) for information on the coronavirus, including:

- Situation updates.
- Who is at higher risk.
- How the virus spreads, symptoms, prevention and treatment.
- FAQs.

Any changes to Medicaid and CHIP services will be posted here.

Illness concerns

People who are concerned that they have COVID-19 should contact their healthcare provider via phone before going to a clinic or hospital to prevent spread in healthcare facilities. Call your healthcare provider for the following reasons:

- You feel sick with fever, cough, or difficulty breathing, and have been in close contact with a person known to have COVID-19.
- If you live in or have recently traveled from an area with ongoing spread of COVID-19.

Testing for COVID-19

Medicaid and CHIP will cover COVID-19 testing for Medicaid or CHIP clients. Your doctor will work with local public health officials to determine to if you should be tested for COVID-19.

No prior authorization will be required on the COVID-19 lab test by Medicaid and CHIP health plans or traditional Medicaid.

Teleservices

Your health plan can cover teleservices, including in your home. HHSC has encouraged health plans to use this option when responding to COVID-19.

CHIP co-payments are not required for covered services delivered via telemedicine or telehealth to CHIP members.

Extra medicine or supplies

At this time, Texas's dispensing limits have not changed. Medicaid recipients should continue to get supplies on an as-needed basis.

In-Home Service Delivery Back-Up Plans

You or your legally authorized representative (LAR) should talk to your in-home care provider, service coordinator or case manager about what to do if your provider can't come to work because they are sick. You or your LAR should:

- Work with your provider and your service coordinator or case manager to develop a backup plan if one is not in place.
- Update any existing backup plans.
- Keep a copy of the backup plan.

Provider agencies are required to have back-up and emergency plans in place, which include if an in-home care provider cannot work because they are sick. Your provider agency and MCO service coordinator must support you in developing those plans.

If you use the Consumer Directed Services (CDS) option, you or your LAR should work with your MCO and service coordinator or case manager to develop a backup plan if you don't have one. Financial Management Services Agencies (FMSAs) can help you make CDS budget revisions as needed.