Q. With the recent COVID-19 virus issue – how can patients receive healthcare without going out into the community?

A. Telemedicine and sometimes telephone calls may be an option, refer to the Apple Health COVID-19 website for updates.

Q. What is Telehealth?

A. Telehealth is not an HCA-defined term. What may be considered to be Telehealth is either

- Telemedicine (WAC), or
- Services rendered by some other means most likely via a telephone call but may be an online digital interaction through a patient portal

Q. What is telemedicine?

- Telemedicine is HIPAA-compliant, interactive, real-time audio and video telecommunications to deliver covered services that are within a practitioner's scope of practice to a client at a site other than the site where the provider is located
 - HHS on 03/11 and HCA notice on 03/06 relaxes the originating site rules to include the client's home
 - HCA 1135 waiver submitted on 03/15/2020
 - 03/20/2020 CMS releases telehealth toolkits
 - 03/20/2020 HCA Bulletin offers limited number of no-cost telehealth technology licenses
 - The COVID-19 issue may cause further guidance (e.g relaxation of HIPAA rules) in regards to telemedicine
- Telemedicine qualifies for the IHS encounter rate beginning in November, 2018
- Telemedicine Guidelines for P1 billing are located in the following guides:
 - Medical category Refer to the <u>Physician-Related Billing Guide</u>
 - Dental category Refer to the Dental Billing Guide
 - Mental Health and SUD Refer to SERI for information on Telemedicine

Q. What services are covered by P1 for telemedicine due to the COVID-19 issue?

A. It depends on the category of the service

| Category | Is Telemedicine a covered service? | What Telemedicine services are covered? | Billing/Coding for Telemedicine |
|------------------|--|--|--|
| MEDICAL | Yes. Refer to the P1 Physician-Related Billing Guide, page 85 | The agency reimburses medically necessary covered services through telemedicine when the service is provided by a Washington Apple Health provider and is within their scope of practice. | Use the regular CPT codes (e.g., 99213) Add modifier 95 after adding all other modifiers (eg UA/SE/25/etc) Add modifier CR if the service was disaster/catastrophe related Place of Service code is 02 |
| DENTAL | Yes. Tele-Dentistry is in the Dental Billing Guide | Teledentistry is not a specific procedure, but a broad variety of technologies and tactics used to deliver dental services | Use the regular ADA code (eg D0140) Add the Teledentistry code (D9995) Place of Service code is 02 |
| MENTAL HEALTH | Yes. Modifier GT is added to the codes that are eligible to be rendered via telemedicine. Refer to the Service Encounter Reporting Instructions (SERI), page 129 | Alcohol/Drug Information School, Brief Intervention, Care Coordination Services, Case Management, Child and Family Team Meeting, Co-Occurring Treatment Services, Crisis Services, Engagement and Outreach, Family Treatment, High Intensity Treatment, Individual Treatment Services, Intake Evaluation, Interim Services, Interpreter Services, Jail Services/Community Transition, Medication Management, Outpatient Treatment, Peer Support, Recovery Support Services, Rehabilitation Case | Use the regular CPT codes (e.g. 90832) Add modifier GT after adding all other modifiers (eg. HE/SE/25/etc) Add modifier CR if the service was disaster/catastrophe related Add modifier CR if the service was disaster/catastrophe related Place of Service code is 02 |
| SUD (Outpatient) | Yes. Modifier GT is added to the codes that are eligible to be rendered via telemedicine. Refer to the Service Encounter Reporting Instructions (SERI), page 129 | Management, Request for Services, Special Population Evaluation, Stabilization Services, Therapeutic Psychoeducation (page 129) 03/17/2020 DOH update 1. DOH is waiving certain behavioral health agency licensing and certification requirements that impose an obligation on licensed behavioral health agencies to provide certain assessments and services "in person" or "face-to-face." 2. Clarification from DOH: there are no behavioral health agency WACs or RCWs that prohibit the use of (telemedicine) for group therapy | Use the regular CPT/HCPCS code (e.g. 96164 or H0004) Add modifier GT after adding all other modifiers (e.g. HF) Place of Service code is 02 |

Q&A for Telemedicine

- Q. What if we are not able to update our billing systems to account for new code requirements, such as the 95, CR, or GT modifier?
- A. It is acceptable to reprocess claims that have any billing type issues for up to 2 years from the date of service We can fix billing issues later
- Q. Do we add the modifier 95/GT/CR to the T1015?
- A. No, it is only needed on the service codes, and not required on the T1015
 - Q. what if our billing software automatically adds the GT/95 to the T1015?
 - A. We will be OK. P1 will 'ignore' the extra modifier on the T1015
- Q. Do we add the CR (catastrophe/disaster related) modifier?
- A. Sometimes
 - Yes, CR modifier is indicated in the Apple Health FAQ for COVID-19 for telephone E&Ms and Consults
 - Yes, if a service is being rendered differently due to the COVID issue, add modifier CR.
 - o No, If the service was not impacted by COVID-19
- Q. Does the order of the modifiers matter?
- A. No, the modifiers may be reported on the claim in any order
- Q. Does Telemedicine qualify for the IHS encounter rate?
- A. Yes, Telemedicine was added to the State Plan as an encounter eligible service in 2018

Q. What services are covered by P1 if rendered over the telephone due to the COVID-19 issue?

A. It depends on the category of the service

| Category | Are services rendered over the telephone covered? | What services rendered over the telephone are covered? | Billing/Coding for services rendered over the telephone |
|------------------|---|---|--|
| Medical | Yes. Telephone E&Ms. Physician- Related billing guide p.47 In Response to COVID-19, HCA posted an FAQ — that added Online Digital Evaluations as a covered service | Per the Physician-Related billing guide The agency pays for telephone services when used by a physician to report and bill for episodes of care initiated by an established patient or by the patient's guardian. Report and bill for telephone services using the following CPT codes: CPT 99441-99443 (page 47) HCA FAQ - CPT 99421-99423 (online digital evaluations) are now covered along with the telephone E&Ms | CPT code is 99441-99443, 99421-99423 Place of service is the entity where service(s) were rendered (CMS) (if the client was at home then '12') Modifier – add modifier CR if the means of rendering the service was catastrophe/disaster related |
| Dental | Yes. Refer to notice on HCA COVID website (link tbd) | In response to the circumstances surrounding COVID-19 the Health Care Authority has activated CDT D9992, care coordination to allow reimbursement for phone triage (link tbd) | CDT code D9992 Place of service is the entity where service(s) were rendered (CMS) (if the client was at home then '12') |
| Mental Health | Yes. Apple Health is temporarily allowing BH services using a telephone or other means of electronic transaction to conduct an office visit. (link) | Per the HCA notice - During this crisis, you can provide any modality in the Mental Health Billing Guide | CPT code is the regular CPT (e.g., 90832, 90853) Place of service is <i>the entity where service(s) were rendered</i> (CMS) (if the client was at home then '12') Modifier – add modifier CR if the means of rendering the service was catastrophe/disaster related |
| SUD (outpatient) | Yes, per the HCA notice (<u>link</u>) | Per the <u>HCA notice</u> - SAMSHA provided guidance on this issue. There guidance is very permissive and is intended to support the delivery of care using all the technology modalities available during this crisis. See https://www.samhsa.gov/coronavirus for details | CPT code is the regular CPT/HCPCS (e.g., 96164/H0004) Place of service is <i>the entity where service(s) were rendered</i> (CMS) (if the client was at home then '12') Modifier – add modifier CR if the means of rendering the service was catastrophe/disaster related |

Q&A for telephone services

- Q. Do the services rendered over the Telephone (99441-99442) or online digitally (CPT 99421-99423) qualify for the IHS encounter rate?
- A. Yes, beginning 03/18/2020, refer to the HCA FAQ
- Q. Do Mental Health and SUD and other services rendered over the Telephone qualify for the IHS encounter rate?
- A. Stay tuned. HCA has asked for CMS to approve a SPA that will authorize payment for professional services provided via telephone services and/or online digital evaluation and management services at the same rates as for professional services provided face-to-face or via telemedicine.
- Q. Do we add the CR (catastrophe/disaster related) modifier?
- A. Sometimes
 - Yes, CR modifier is indicated in the Apple Health FAQ for COVID-19 for telephone E&Ms and Consults
 - Yes, if a service is being rendered due to the COVID issue, add modifier CR (most likely scenario for telephone calls at this time)
 - o No, If the service was not impacted by COVID-19 (unlikely scenario for telephone calls at this time)
- Q. What if we are not able to update our billing systems to account for any of the new code requirements, such as the CR modifier?
- A. We can fix billing issues later It is acceptable to reprocess claims that have any billing type issues for up to 2 years from the date of service —we can fix the claim and add the CR modifier later.
- Q. Does the order of the modifiers matter?
- A. No, the modifiers may be reported on the claim in any order
- Q. Do we add the modifier CR to the T1015?
- A. No, it is only needed on the service codes, and not required on the T1015
 - Q. what if our billing software automatically adds the CR to the T1015?
 - A. We will be OK. P1 will 'ignore' the extra modifier on the T1015