Apple Health (Medicaid) telehealth webinar

April 30, 2020

Washington State
Health Care Authority

Agenda

Housekeeping

Introduction to the Health Care Authority (HCA)
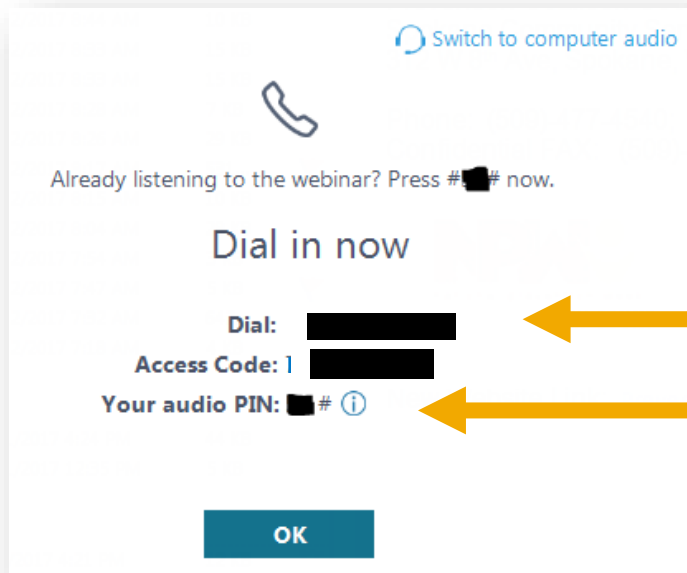
Overview of telehealth

Additional telehealth policies

Best practices and resources

Q&A

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Welcome! We will begin at 12 p.m.

Switch to computer audio

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Dial in now

Dial: ▇▇▇▇
Access Code: 1 ▇▇▇▇
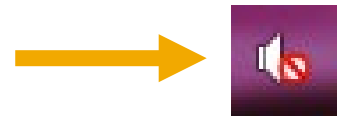Your audio PIN: ▇# ⓘ

OK

It is always a good idea to close other windows.

If participating via phone
Click OK and mute your computer speakers.
Be sure to enter your unique
Audio PIN, if you haven't
already.

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Disclaimer

This webinar is being recorded and will be posted to the HCA COVID-19 page.

This recording is open to public disclosure.

Please do not disclose any private or confidential information.

A short survey will be provided following the webinar. Please provide input on additional webinars and topics.

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Webinar controls

- **Grab Tab** – Allows you to open/close the Control Panel, mute/unmute your audio (if the organizer has enabled this feature) and raise your hand.

- **Audio pane** – Displays audio format. Click Settings to select telephone devices.

- **Hand** – Not planning to use this feature (please use **Questions pane** below).

- **Attendee List** – Displays all the participants in-session.

- **Questions pane** – Allows attendees to submit questions and review answers (if enabled by the organizer). Broadcast messages from the organizer will also appear here.
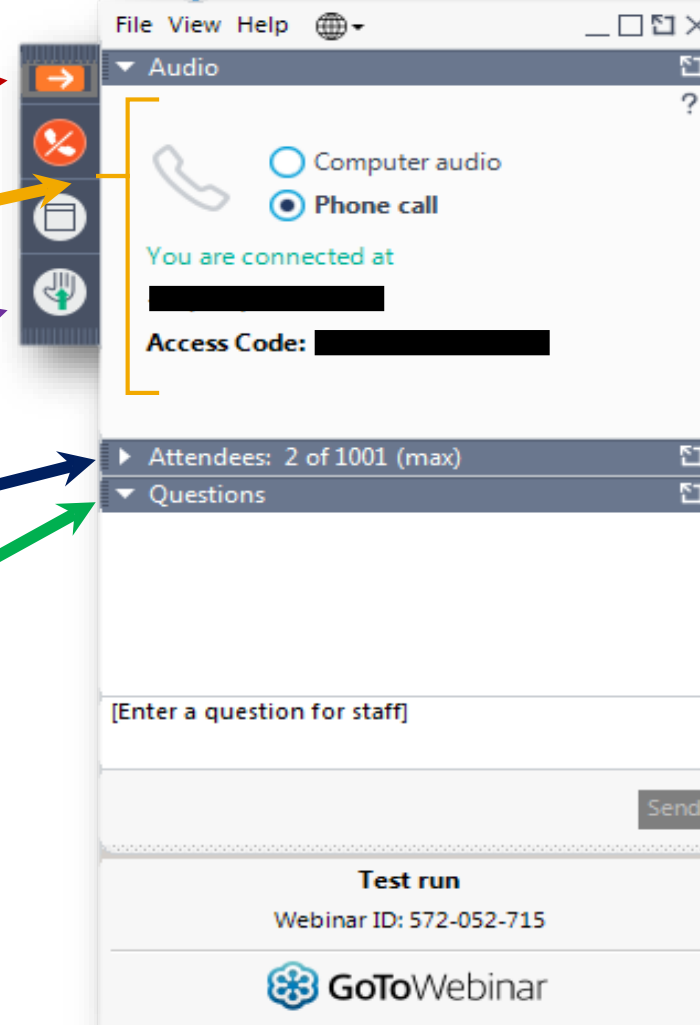
Introduction to the Health Care Authority

The state's largest health care purchaser

We purchase care for 1 in 3 non-Medicare Washington residents.

We purchase health care for more than 2 million Washington residents through:

Apple Health (Medicaid)

The Public Employees Benefits Board (PEBB) program

The School Employees Benefits Board (SEBB) program

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Medicaid and managed care in Washington

HCA / ProviderOne

Amerigroup
An Anthem Company

COMMUNITY HEALTH PLAN of Washington™

coordinated care.
Apple Health Core Connections.

MOLINA HEALTHCARE

UnitedHealthcare
Community Plan

1.8 million Washingtonians are enrolled in Apple Health (Medicaid). About 85% of them are enrolled in managed care, the remainder are enrolled in fee-for-service (FFS).

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Apple Health response to COVID-19

Partnering across agencies

> Department of Health (DOH), local public health, Department of Social and Human Services (DSHS), Department of Corrections (DOC), Department of Children Youth and Families (DCYF)

Supporting providers

> Additional funding and resources to support the health care system

> Seeking additional flexibility by enacting emergency rules and obtaining emergency waivers

Protecting community members

> Ensuring coverage and eligibility

> Coverage of COVID-19 testing and drive through testing

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A word on COVID-19 testing

State Testing Strategy

Billing

    PCR Tests (U0001, U0002) and high throughput technology codes (U0003, U0004) covered with modifier CR

    Drive through testing – can use 99001 specimen collection code

Please fill out the DOH COVID-19 testing survey!

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Overview of telehealth

Overview of Apple Health telehealth

In the healthcare community the words telehealth and telemedicine are often used interchangeably.

For Apple Health:

Telemedicine per state law is defined as: *the delivery of health care services through the use of HIPAA compliant interactive audio and video technology, permitting real-time communication between the patient at the originating site and the provider, for the purpose of diagnosis, consultation, or treatment.*

Telehealth considered: an umbrella term that includes telemedicine *as well as other temporary policies*, including technologies that may not be HIPAA compliant and may not be conducted through interactive audio-video exchange including and other forms of telehealth, such as on-line digital exchange through a patient portal; telephone calls, Face-Time; Skype; or email.

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Overview of Apple Health telehealth

Apple Health is **committed to access and continuity of care** during a time where the delivery system undergoing a rapid shift

For services that are **appropriate to be delivered via telehealth**, telehealth can be a critical modality for patients and providers

Even prior to the pandemic, **Apple Health paid parity** for services rendered via telemedicine as in-person

In response to the pandemic, **additional policies** have been made available for providers to continue providing high quality care to patients

Where noted, services **apply for the duration of the pandemic** only

HCA will communicate any changes to these policies with **ample notice** to support return to office-based care and ensure a smooth transition

We will work with providers on an ongoing basis to identify those **modalities that may be continued** in the post-pandemic telehealth program

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Telemedicine billing

For services provided via HIPAA compliant real-time audio/video

Pre-existing Apple Health policy

Paid at parity (same reimbursement as in-person)

Use the usual CPT/HCPCS code if applicable

POS 02 for the distant site

Originating site facility fee eligible if criteria are met

If a non-facility provider, need to add modifier 95 to receive the non-facility reimbursement

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Telemedicine billing: Originating site facility fees

Originating site facility fee may be billed for qualified sites using HIPAA compliant real-time audio/video

Originating site is the location of the client at the time they are receiving the service

An originating site facility fee cannot be billed when:

- A client is at home
- The provider and client are in the same location

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Telehealth billing

For services provided via other modalities, including non-HIPAA compliant real-time audio/video (such as FaceTime or Skype), audio only, email, patient portal

Allowed temporarily, for duration of pandemic

Use the usual CPT/HCPCS code if applicable

Paid at parity (same reimbursement as in-person)

Use the POS indicator that that best describes where the client is, for example "12" is home; "31" is skilled nursing facility, "13" is assisted living facility, etc.

Do not bill with the providers location as the place of service.

Not originating site facility fee eligible

Use the CR modifier

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Additional telehealth policies

Additional telehealth policies

Real-time audio only (phone visits)

Interprofessional communication/econsults

Online digital services

Virtual check-ins

Primary care exception

After hours services

Well-child visits / EPSDT

Office based opioid therapy

PT/OT/ST

Dental

- **Specific billing instructions may differ by MCO**

- **The following slides reflect policies current as of 4/30; please check HCA website for updates**

- **For behavioral health, please reference separately developed guidance & webinars on the HCA website**

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https://www.hca.wa.gov/information-about-novel-coronavirus-covid-19

Real-time audio only (phone visits)

99441 – 99443 telephone codes

Code time intervals:

99441: 5-10 minutes

99442: 11-20 minutes

99443: 21-30 minutes

Allowed for duration of pandemic

Allowed for new or established patients

Provider can initiate the phone call

Encounter eligible

Rates comparable to in-person visits

Bill with CR modifier

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Interprofessional communication/econsults

99446 Interprofessional telephone / internet consultation

Pre-existing Apple Health policy

Over half of the time must be spent in verbal/electronic feedback

Verbal **and** written report to requestor

99451 Interprofessional telephone / internet / electronic health record assessment and management service provided by a consultative physician

Allowed for duration of pandemic

Also known as "eConsults"

Written report to requestor

Bill with CR modifier

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Online digital services

99421 – 99423 online digital E&M

Examples include e-visits conducted via patient portal

Code time intervals:

99421: 5-10 minutes

99422: 11-20 minutes

99423: 21+ minutes

Allowed for duration of pandemic

Allowed for new or established patients

Encounter eligible

Rates comparable to in-person visits

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Virtual check-ins

G2012 Virtual check ins

Brief check-in with provider via telephone or other telecommunication device (includes text messaging)

Allowed for duration of pandemic

For established patients

Encounter eligible

Bill with CR modifier

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Primary care exception

For the duration of pandemic, Apple Health is aligning with Medicare policy to allow all levels of an office/outpatient E/M services provided in a primary care center to be provided under direct supervision of the teaching physician in person or by interactive telecommunications technology.

Appropriate level of supervision should be in place for all residents based on each resident's level of education/training and ability, as well as patient complexity and acuity.

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After hours services

After hours and weekend care

99050 - Other than regularly scheduled hours

99051 - During regularly scheduled evening/weekends

For services provided by primary care & behavior health providers via telemedicine or telehealth

Add on codes that can be billed

Bill with CR modifier

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Well child visits / EPSDT

Some components of a well-child/EPSDT visit may not be able to be completed remotely

As those components are critical to the well-being of children/youth there will be a need for a follow-up appointment to complete those components

For EPSDT appointments conducted via telemedicine/telehealth:

- Use usual EPSDT visit procedure codes 99381-99395 as appropriate
- Bill with modifier CR

An in-person follow-up appointment to complete EPSDT components is allowed using the following methodology:

- Use 99429: unlisted preventive medicine service
- Bill with modifier CR

Source: https://www.hca.wa.gov/assets/billers-and-providers/Clinical-policy-and-billing-for-COVID-19-FAQ.pdf

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Office based opioid therapy

99211 Nurse phone call to provide contact and support to assist in accomplishing treatment goals

Allowed for duration of pandemic

This is a separate E/M billed by the provider to be used in lieu of a face to face E/M

Bill with modifier CR

Excludes services funded through a current contract with HCA (such as SOR/OTN/Hub and Spokes/ Nurse Care Manager Projects)

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PT/OT/ST

Additional phone codes allowed for duration of pandemic

98966 - 98968 Telephone E/M codes by non-physician health care provider

Code time intervals:

98966: 5-10 minutes

98967: 11-20 minutes

98968: 21-30 minutes

Allowed for new or established patients

Use modifier CR

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Dental

D0170: Re-evaluation for limited, problem-focused visits and post-op visits

Temporarily allowed for all dental providers, may be billed with teledentistry.

3x in a twelve-month period at a rate of $10.

D9992: Temporary code for phone triage and care coordination if unable to complete teledentistry

Should not be billed with teledentistry codes; rate is at $15 per client, per day

FQHCs/RHCs – code qualifies for encounter rate. If phone service results in an in-person visit on the same day by the same dentist, HCA pays only one encounter rate payment.

D9999: Family oral health education

May be billed with teledentistry if criteria in the ABCD billing guide is met.

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Medicaid policy references

For additional HCA billing guidance, see our COVID-19 information page

Apple Health managed care organizations also have specific billing instructions:

- Molina Healthcare
- Coordinated Care
- United Health Care
- Community Health Plan of Washington
- Amerigroup

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Documentation

Documentation requirements for telehealth services are the same as those for documenting in-person care and, at a minimum, should also include:

- **Date of the service**, including start and stop time or duration of service
- The **names of all participants** in the encounter, including other patients and providers involved
- The **location of the client** and a note of any medical personnel with the client, as well as **location of the provider**
- That the encounter was **conducted via telehealth**, which telehealth platform was used, and whether it is HIPAA compliant
- If a **physical exam** is conducted, whether vital signs and exam findings are self-reported or obtained under direction
- For guidance regarding **consent**, please see our FAQ

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Best practices and resources

**The following are recommendations, not policies or rules

Best practices

When conducting telehealth services, it is important to ensure that the standard of care for telehealth is the same as that for an in-person visit providing the same health care service.

Best practices may include but are not limited to:

Consider the **patient's resources** when deciding the best platform to provide telehealth services.

Test the process and **have a back-up plan**; connections can be disrupted with heavy volume. Communicate a back-up plan in the event the technology fails.

Introduce yourself, including what your credential is and what specialty you practice. Show a badge when applicable.

Ask the patient their name and **verify the patient's identity**. Consider requesting a photo ID when applicable/available.

Inform patients of your location and obtain the location of the patient. Include this information in documentation.

Inform the patient of how the patient can see a clinician in-person **in the event of an emergency** or as otherwise needed.

Inform patients they may want to be in a room or space where **privacy can be preserved** during the conversation.

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Additional resources

Washington State Telehealth Collaborative

Northwest Regional Telehealth Resource Center (NRTRC)

    Telemental health toolkit from NRTRC

Washington State Dental Association

University of Washington Behavioral Health Institute

American Telemedicine Association

Check professional society websites for additional resources

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Privacy

HIPAA-compliant telemedicine technology is covered by a Business Associates Agreement that provides protections for personal health information and data privacy

Department of Health and Human Services Office for Civil Rights (OCR) has issued a Notification of Enforcement Discretion for Telehealth Remote Communications during the COVID-19 Nationwide Public Health Emergency

OCR will exercise its enforcement discretion and will not impose penalties for noncompliance with the regulatory requirements under the HIPAA rules against covered health care providers in connection with the good faith provision of telehealth during the COVID-19 nationwide public health emergency

Public facing platforms should not be used in the provision of telehealth

When using non-HIPAA compliant technology, providers should:

- **Inform patients** that non-HIPAA compliant technology is being used
- **Ensure patient privacy** to the best of their ability, including only sharing or communicating PHI with individuals authorized to receive the information.
- Enable all available **encryption and privacy modes**
- Keep in mind that **billing** for HIPAA compliant and non-HIPAA compliant audio/video technologies may be different; have your billers reference our FAQs for further information

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HCA Zoom license program

HCA has procured a limited number of Zoom licenses to facilitate continuity of care for our safety net when it would otherwise be compromised due to disruptions caused by the pandemic.

Zoom is an easy-to-use video conferencing software

HCA provided licenses are HIPAA and 42 CFR Part 2 Compliant under BAA.

Users should have a device (laptop, tablet, phone, desktop), an internet connection, a microphone and a camera.

Apply for a Zoom license through HCA

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HCA Zoom license distribution

Zoom licenses available free of charge to individual providers who:

- Are primary care providers, dental providers, or therapy providers (PT/OT/Speech)
- Are licensed behavioral health professionals or paraprofessionals, including those who:
  - Are opioid treatment programs.
  - Prescribe or support prescribers of medications to people diagnosed with significant mental illness or substance use disorder.
  - Serve as community mental health centers.

Inclusion criteria may include a combination of, but are not limited to those providers who:

- Have active licenses and are currently seeing patients
- Serve a meaningful number of Medicaid clients
- Do not already have HIPAA or 42 CFR Part 2-compliant video capabilities
- Are in smaller practices with less infrastructure
- Serve children, adolescents, pregnant or parenting women or tribal members

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Questions?

For COVID-19 billing, coding, or telehealth policy questions: HCAAH_COVID19@hca.wa.gov

More information: https://www.hca.wa.gov/information-about-novel-coronavirus-covid-19

Please fill out the DOH COVID-19 Testing Survey!

https://redcap.iths.org/surveys/?s=FX8ATA7XLC