

Apple Health (Medicaid) FAQ for long-term care facilities and skilled nursing facilities during the COVID-19 pandemic

Effective 10/1/2023

The Health Care Authority (HCA) created this document to help highlight HCA's telemedicine policy. Now that the public health emergency (PHE) has ended, this document is no longer necessary. HCA will sunset this document **effective October 1, 2023**.

Refer to the Department of Social and Health Services (DSHS) <u>Long-term care professionals and providers</u> <u>webpage</u> for the appropriate program to see how telemedince is covered.

Refer to HCA's <u>Provider billing guides and fee schedules webpage</u>, under Telehealth, for more information on the following:

- Telemedicine policy, billing, and documentation requirements, under Telemedicine policy and billing
- Audio-only procedure code lists, under Audio-only telemedicine

For COVID PHE telemedicine/telehealth policies, refer to HCA's <u>Provider Billing Guides and Fee Schedules</u> webpage, under *Telehealth* and *Clinical policy and billing for COVID-19*.

In this time of the COVID-19 pandemic, the Health Care Authority (HCA) is aware that usual and customary ways of providing and billing/reporting services may not be feasible. It is also understood that different providers will have different capabilities. Therefore, in the interest of public health, HCA's Apple Health (Medicaid) program is trying to be as flexible as possible and is creating new policies that will allow you to provide medically necessary services and bill or report the encounter with the most appropriate code you determine applicable, using the guidance below.

This FAQ reinforces HCA's current policies regarding telemedicine as defined in <u>WAC 182-501-0300</u> and covers the new telehealth policies that will only be in effect during this health care crisis.

We will update this FAQ as necessary to respond to new information as it develops.

Frequently Asked Questions

Q: For Apple Health (Medicaid), what is considered telemedicine and what is considered telehealth?

A: Telemedicine

- Delivered via HIPAA compliant interactive, audio and video telecommunications (including webbased applications), and
- The provider works within their scope of practice to provide a covered service to an Apple Health eligible client.



Apple Health is aware that there are instances when telemedicine is not an option and providers need to use other methods to provide care. Therefore, Apple Health is allowing other modalities to be used when current practice for providing services is not an option (face to face, telemedicine). The service rendered must be equivalent to the procedure code used to bill for the service. See HCA's <u>Clinical policy and billing</u> for COVID-19 (includes telemedicine/telehealth) for more information.

- Q: Can the routine 60-day visit the routine 60-day visit as required by DSHS be done via telemedicine or audio-only/telephone calls?
- **A:** Yes, HCA is following CMS guidance and allowing telehealth to fulfill face-to face requirements for clinicians.
- Q: Can you complete the Preadmission Screening and Resident Review (PASRR) via telemedicine or audio-only/telephone call ?
- **A:** Yes, document which modality was used to gather the information. See HCA's <u>Clinical policy and billing</u> for COVID-19 (includes telemedicine/telehealth) for more information.
- Q: Can a Medicaid client receive services via telemedicine or telehealth?
- **A:** Yes, the clients in your facility are eligible to receive services via telemedicine or telehealth. Have the provider see HCA's guidance on the <u>HCA COVID-19 information page</u>. Policies are updated frequently and it is important to check the main page often.

Email HCA's Apple Health clinical policy team for any questions related to HCA's telemedicine policy.