

Telemedicine Services – State Medicaid Updates for AL, AR, LA, and MS



March 17, 2022

BKD
CPAs & Advisors



SCAN ME

CORRESPONDENCE – FOR DISCUSSION PURPOSES ONLY

Delta Region Community Health Systems Development (DRCHSD) Program



Delta Regional Authority

U.S. Department of Health & Human Services



HRSA

Federal Office of Rural Health Policy

This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$10,000,000 with 100% funded by HRSA/HHS and \$0 amount and 0% funded by non-government sources. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement by HRSA/HHS, or the U.S. Government.



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Delta Region Community Health System Development (DRCHSD) Program

DRCHSD Telehealth Billing and Coding Series

Sessions:

- March 24- Telehealth Billing and Coding Update- TN, IL, MO, KY

Upcoming:

Quality Improvement Series April 7- May 12

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Support

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Disclosure

As with most topics related to COVID-19, changes are being made rapidly. Please note that this information is current as of the date of this presentation



› **What happens after the Public Health
Emergency**

- **General information**
- **Mental Health**



- › **Updated State Medicaid Billing Guidelines**
- › **Telehealth & Virtual Communication Services**
- › **Telephone/Audio-Only Communication**
- › **Billing & Reimbursement**
- › **Q&A**

Agenda

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Public Health Emergency (PHE) End Dates

Medicare
April 16, 2022

Alabama
March 31, 2022

Arkansas
September 27, 2021

Louisiana
March 16, 2022

Mississippi
November 21, 2021

As of March 10, 2022

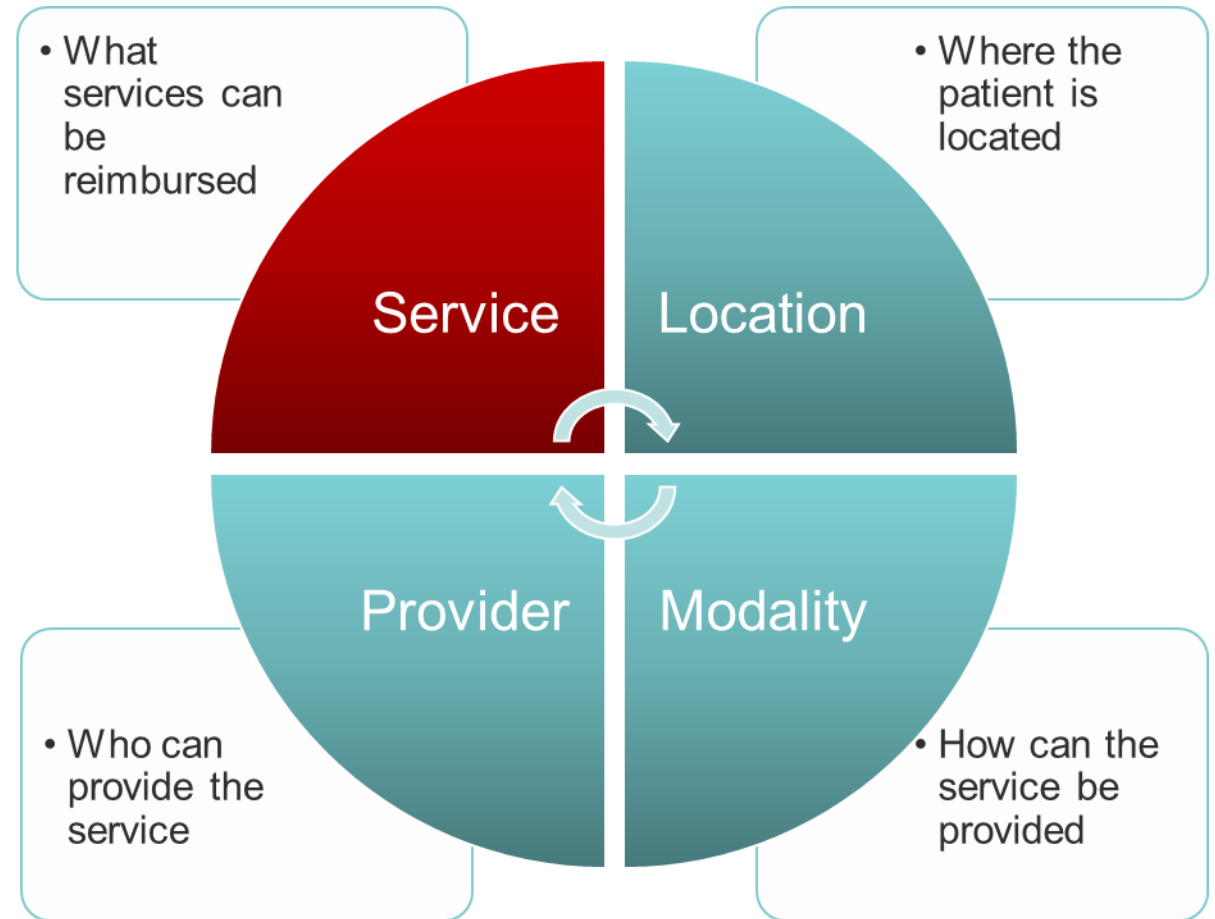
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Medicare Policy Elements

- › Four elements to consider for reimbursement policy
 - Most limitations are around these areas
- › Three of the four areas require statutory changes
 - CMS cannot change without Congress



<https://www.cchpca.org/wp-content/uploads/2022/02/MEDICARE-MENTAL-HEALTH-POLICIES-DEEP-DIVE-COVERAGE-301.pdf>



Current ‘Permanent’ Laws

ISSUE	POLICY	EXCEPTION	CAA	PFS CHANGES
Patient Location	Patient must be in rural or non- MSA location when telehealth service takes place. Specific list of locations, home not included.	Geographic & home exception for treatment of SUD and co- occurring mental health condition & ESRD treatment Geographic and telestroke	Mental health services can be provided in the home and w/o meeting the geographic requirement Under certain limitations	<u>Implementing CAA</u> , require in-person visit w/telehealth provider prior to telehealth services taking place. Subsequent 12 month in-person visit required, some narrow exceptions.
Modality	Federal law says must be through telecommunication system, no statutory definition. CMS in regulations says must be <u>interactive</u> telecommunication system	None	N/A	Allow the use of audio-only phone to be used to deliver <u>mental health services</u> if certain conditions met including the 6 month/12 month in-person visit.
Providers	Specific list of eligible providers who can provide services via telehealth & be reimbursed by Medicare. FQHCs & RHCs are not eligible providers	None	N/A	FQHC/RHC allow to provide <u>mental health visits</u> via live video or audio-only (certain conditions need to be met if patient receiving services in the home)
Services	CMS can select services to put on the eligible services list that will be reimbursed by Medicare if	None	N/A	Certain COVID-19 temporary telehealth services will remain available until end of 2023

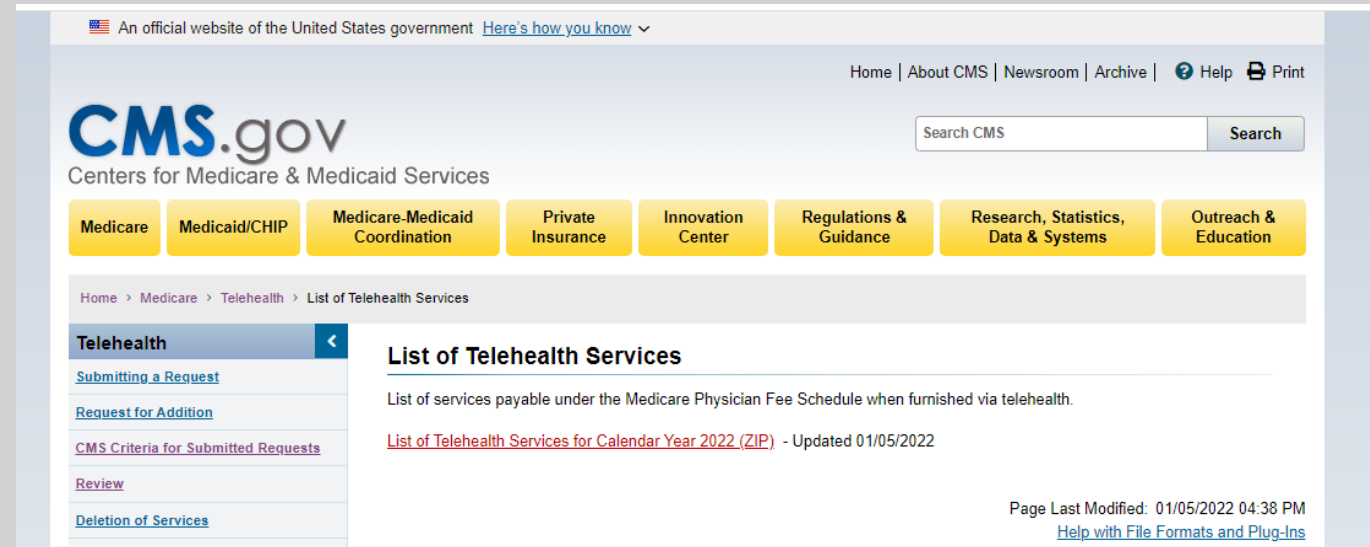
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Physician Fee Schedule

- Telehealth services are broken into Categories
- Category 1
 - Evaluation & managements services or similar service
- › Category 2
 - Other services
 - Must show Clinical benefit
 - › Reduce readmissions
 - › Reduce recovery time
 - › Reduce complication
- › Category 3
 - Added during PHE
 - CMS is seeing some benefit
 - Requires more research



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Home > Medicare > Telehealth > List of Telehealth Services

Telehealth

- [Submitting a Request](#)
- [Request for Addition](#)
- [CMS Criteria for Submitted Requests](#)
- [Review](#)
- [Deletion of Services](#)

List of Telehealth Services

List of services payable under the Medicare Physician Fee Schedule when furnished via telehealth.

[List of Telehealth Services for Calendar Year 2022 \(ZIP\)](#) - Updated 01/05/2022

Page Last Modified: 01/05/2022 04:38 PM
[Help with File Formats and Plug-Ins](#)

<https://www.cms.gov/Medicare/Medicare-General-Information/Telehealth/Criteria>

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Mental Health Services

- › Prior to the PHE, CMS would reimburse only if:
 - Qualified practitioner furnished the services
 - Practitioner was located at qualified distant site (e.g., certain facility types)
 - Patient presented at a qualifying originating site (e.g., a rural area in a provider's office or facility); and
 - The parties used technology that permitted two-way, real-time interactive communications complying with state and federal privacy laws



Mental Health Services (cont.)

- › CMS has significantly relaxed reimbursement criteria for mental health telehealth services
 - Home is an acceptable place of service if:
 - › Patient has had an in-person visit within the prior 6 months
 - › Patient receives an in-person visit no less than every 12 months
 - › May be the provider or another qualified person in their practice
 - Patient location may be outside of the qualifying rural zip code
 - Allowing audio-only when:
 - › The patient home serves as the originating site
 - › Provider has audio-visual capabilities, however the patient either does not have the capability or does not consent to video encounter

86 Fed. Reg. 65058 (Nov. 19, 2021).



Mental Health Services FQHC/RHC

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86 Fed. Reg. 65058 (Nov. 19, 2021).



Mental Health Services FQHC/RHC (cont.)

FQHC

- › G0469 - FQHC visit, mental health, new patient
- › G0470 – FQHC visit, mental health, established patient
- › Appropriate mental health code(s)
 - Psychiatric evaluation
 - Psychotherapy
- › Revenue code 0900
- › Modifier
 - 95 – if audio and visual
 - FQ – if audio only

RHC

- › Appropriate mental health code(s)
 - Psychiatric evaluation
 - Psychotherapy
- › Revenue code 0900
- › Modifier
 - CG – charges subject to coinsurance and deductible
 - 95 – if audio and visual
 - FQ – if audio only

<https://www.cms.gov/Center/Provider-Type/Federally-Qualified-Health-Centers-FQHC-Center>



Place of Service Codes

Definition – Originating Site

- Where an eligible Medicare beneficiary is located when the telehealth service is rendered
 - The facility component of the communication
- › Most states are using the Place of Service Codes (POS)
 - › 02 - for telehealth services provided to a patient outside their home
 - › 10 - for telehealth services provided to a patient who is in their home
 - › Prior authorization may be required depending on service



Telehealth modifiers



- › GT Modifier
 - Interactive audio and video telecommunications systems
- › 95 Modifier
 - Synchronous telemedicine service rendered via a real-time interactive audio and video telecommunications system
- › GQ Modifier
 - Via an asynchronous telecommunications system
- › FQ Modifier*
 - A telehealth service was furnished using real-time audio-only communication technology
- › 93 Modifier
 - Synchronous Telemedicine Service Rendered Via Telephone or Other Real-Time Interactive Audio-Only Telecommunications System
- › FR Modifier*
 - A supervising practitioner was present through a real-time two-way, audio/video communication technology

* Mental Health Modifier - <https://www.cms.gov/files/document/mm12549-cy2022-telehealth-update-medicare-physician-fee-schedule.pdf>



Telehealth Visits

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Executive Summary

Alabama

- Allows Live video
- Does not cover telephonic visit
- Allows for Patient monitoring
- Requires consent
- No payment parity law

Arkansas

- Allows Live video
- Does not cover telephonic visit
- Private Payor laws exist
- Allows for Patient monitoring
- Requires consent
- No payment parity law

Louisiana

- Allows Live video
- Does not cover telephonic visit
- Private Payor laws exist
- Allows for Patient monitoring
- Requires consent
- No payment parity law

Mississippi

- Allows Live video
- Does not cover telephonic visit
- **Private Payor laws exist**
- Allows for Patient monitoring
- Requires consent
- No payment parity law



Originating Site – Billing When Patient Is Located in a Health Care Entity

- › Q3014 – Billed by the health care site where the patient is physically located
- › Independent Physician Clinic – CMS-1500, POS code, i.e., 11- office
- › RHC
 - UB-04, 711 (RHC) TOB, revenue code 0780
 - CMS-1500, POS 02
- › Hospital – UB-04 TOB 12X, type of service “9-other items & services,” revenue code for the site of service, i.e., 510 clinic
- › Paid under Medicaid Fee Schedule allowance

**Phone-Only
Telehealth
Distant Site
Services –
State
Medicaid**

Arkansas Medicaid

Bill CPT or HCPCS supported

Rev Code or POS 02

Modifier and GT

Louisiana Medicaid

Bill service code supported

POS 02

Modifier 95

Mississippi Medicaid

CPT 99441-99443

POS 02

Modifier GT



State Medicaid – List of Telehealth Services

- › Each state plan maintains a list of eligible services & service codes that has been expanded for telehealth, audio/phone-only or virtual communications
 - Medical
 - Behavioral/mental health
 - › LCP, LPC, LAC, LAMFT, LMFT, LCSW, LMSW
 - Case management
 - Dental
 - Therapy
 - School clinic services

Definitions – Distant Site Practitioner

- An eligible provider who can furnish & be paid for covered telehealth services rendered through audio & video telecommunication system
- Licensed in the state
- Enrolled in state Medicaid program
- Acting under Scope of Practice

- › Providers must be licensed in any state & enrolled in state Medicaid
- › Physician
- › Physician assistant
- › Podiatrist
- › Advanced practice nurse
- › FQHC
- › RHC (or encounter rate clinic)
- › Licensed clinical psychologist (LCP)
- › Licensed clinical social worker (LCSW)
- › Advanced practice registered nurse (psychiatric/mental health certified)
- › Local education agency
- › School-based health center
- › PT, OT or ST
- › Dentist
- › Local health department
- › Community health agency
- › Community mental health center
- › Behavioral health center
- › Hospital

Virtual/E-Check-In

G2010 – Review of images or documentation sent from patient (Not Acceptable for AR)

G2012 – E-check

Virtual communication, e.g., phone call, initiated by the patient. Could be an initial call & return call by provider after “appointment” is scheduled

At least five minutes of technology-based or remote audio evaluation services

Can be for new or established patients (effective during COVID-19 emergency)

Cannot be related to a visit provided related within the prior seven days & does not result in a visit within the next 24 hours or soonest available appointment

If either of the caveats are met, the virtual check-in is not billed separately from the prior or subsequent in-person visit charges

May only be billed once during a seven-day time frame



Virtual/E-Check-In G2012 G2010

Recognized for billing by the following state Medicaid plans

Arkansas

Mississippi

Arkansas: Report G2012 or T1015, POS 02 or Revenue Code (i.e., 521), Modifiers U7 and GT
Mississippi: Report G2015, POS 02

Paid under fee schedule



Consents

- › A patient consent is required for audiovisual, phone-only, e-checks & digital/portal visits
- › CMS & state Medicaid indicate consent can be obtained when the service is furnished instead of prior to the service being furnished during the emergency period, but must be obtained prior to billing
- › Consent (verbal or written) may be obtained by ancillary staff under the general supervision of the RHC provider



Documentation Criteria, Once More

Type of service (telehealth (audiovisual), phone-only, e-check or digital/portal visit)

Location of patient & rendering provider

Names & roles of any ancillary staff involved in case

Orders

Medical necessity for telehealth or virtual services

Rendering provider should document under the same criteria as a face-to-face encounter

Questions?

Questions?

Thank you!

Thank You!

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