MEDICAID PROVIDER BILLING GUIDANCE FOR COVID-19 TEMPORARY TELEPHONIC CARE AND TELEHEALTH PROVIDED BY PHYSICAL, OCCUPATIONAL AND SPEECH THERAPISTS

Reimbursement for the telephonic and telehealth services addressed below is available if the interaction with Medicaid member includes at least one remote component. Interactions that include video interaction may also be billed, but other forms of electronic communication, such as email and instant and text messaging, are not eligible for reimbursement. Services provided pursuant to the current SCDHHS telemedicine coverage policy should continue to be billed according to those guidelines.

The following guidance can be used to bill for services related to telephonic delivery of services for dates of service on and after March 27, 2020. Absolute Total Care will begin accepting claims for these policy changes beginning May 1, 2020.

Telephonic Care Provided by Physical, Occupational and Speech Therapists

- The services outlined below must be rendered by a licensed physical therapist, occupational therapist or speech therapist and are allowable only when provided to an established patient.
- The services outlined below are available if the interaction with a Healthy Connections Medicaid
 member includes at least one telephonic component. Interactions that also include video interaction
 may also be billed, but other forms of electronic communication, such as email and instant and text
 messaging, are not eligible for reimbursement.
- Up to three encounters will be allowed every 30 days, and services may be provided regardless of the Medicaid member's location.
 - 98966 Telephonic Assess/Mgmt; 5-10 minutes, non-physician
 - o 98967 Telephonic Assess/Mgmt; 11-20 minutes, non-physician
 - 98968 Telephonic Assess/Mgmt; 21-30 minutes, non-physician
- Member copayment will be waived for any claim billed under this temporary guidance.
- Prior authorization requirements for telehealth services under this temporary guidance will be waived until 6/30/2020.
- Services identified above must meet standard requirements for medical necessity.

Delivery of Physical, Occupational and Speech Therapy via Telehealth

- Absolute Total Care will reimburse for the codes outlined below for therapy related to the following, when provided via telehealth:
 - Surgical procedure in the preceding 120 days
 - Acute trauma, such as fractures or dislocations
 - Spinal or neurological disorders, such as brachial plexus, torticollis muscular dystrophy, and hereditary sensory motor neuropathy
 - Juvenile idiopathic arthritis
 - o Acute hip disorders, such as Legg-Calve-Perthes disease and developmental dysplasia of the hip
- Therapy services may also be provided via telehealth if the therapy provider has determined and documented that deferring care would be clinically detrimental for therapy related to the following:
 - Congenital abnormalities

- Cerebral palsy
- o Genetic disorders
- o Down syndrome
- o Autism spectrum disorder
- Neurodevelopment disorders
- Prematurity
- o Apraxia
- Global development delays
- For the clinical circumstances listed above, Absolute Total Care will reimburse for the following CPT codes, with a GT modifier, when delivered via telehealth.
 - o **97530** Therapeutic Activity
 - o **97110** Therapeutic Exercise
 - o **92507** Treatment of speech-language services; individual
- Providers should note that these flexibilities are provided for the licensed provider authorized to
 perform independent practice, and does not extend to assistants, technicians or provider extenders
 that may otherwise be utilized in a face-to-face setting.
- Member copayment will be waived for any claim billed under this temporary guidance.
- All prior authorization requirements for telehealth services under this temporary guidance will be waived until 6/30/2020.
- Prior authorization for all other therapy services not specifically outlined above remain in effect.
- Benefit limits apply to all services according to existing SCDHHS and Absolute Total Care policy..
- Services identified above must meet standard requirements for medical necessity.

Existing Telemedicine Benefits

- Absolute Total Care will continue to follow the standard SCDHHS telemedicine benefit policies as applicable.
- At this time, providers not included in the standard telemedicine benefit, those not authorized to
 participate in telephony through their respective benefits, and those not covered by this notification
 should continue to provide services in the settings and in the manner provided according to existing
 SCDHHS and Absolute Total Care policy.