Payment Policy | Telemedicine/Telephone Services for BlueCHiP for Medicare Products During COVID-19 Public Health Emergency (PHE)



EFFECTIVE DATE: 01|01|2021 **POLICY LAST UPDATED:** 11|04|2000

OVERVIEW

Telehealth, telemedicine, and related terms generally refer to the exchange of medical information from one site to another through electronic communication to improve a patient's health. Innovative uses of this kind of technology in the provision of healthcare is increasing. And with the emergence of the virus causing the disease COVID-19, there is an urgency to expand the use of technology to help people who need routine care, and keep vulnerable members and members with mild symptoms in their homes while maintaining access to the care they need. Limiting community spread of the virus, as well as limiting the exposure to other patients and staff members will slow viral spread.

This temporary policy documents the coding guidelines as set forth by Centers for Medicare and Medicaid Services (CMS) during the timeframe in which the Public Health Emergency (PHE) is in effect and additional supplemental information related to BlueCHiP for Medicare.

Notice of the implementation, update or withdrawal of this policy will be communicated to BCBSRI providers via a notice on BCBSRI's provider website/portal under Alerts and Updates.

Please refer to the following policy for information regarding additional benefit information: *Telemedicine/Telephone services for BlueCHiP for Medicare Products – Effective 2021*

MEDICAL CRITERIA Not applicable

PRIOR AUTHORIZATION Not applicable

POLICY STATEMENT

Blue Cross & Blue Shield of Rhode Island follows CMS guidelines regarding the coverage of Telemedicine/Telehealth services during the period in which the PHE is in effect.

The provider may use a telephone or an interactive audio and video telecommunications system that permits real-time communication between the provider and the patient at home. Providers who can furnish and get payment for covered telehealth services include physicians, nurse practitioners, physician assistants, nurse midwives, certified nurse anesthetists, clinical psychologists, clinical social workers, registered dietitians, and nutrition professionals.

Please refer to the coding section for the list of services/codes that are covered and reimbursable when filed with place of service 02 and/or modifier 95.

Consistent with BCBSRI's 2021 BlueCHiP for Medicare benefit plans, there will be no cost share for selected services provided by primary care providers (PCP) including advance practice providers and behavioral health providers that are recognized for benefit coverage.

For all other providers e.g. specialist providers, the applicable cost share will apply based on the benefit.

Rural Health Centers (RHC) and Federally Qualified Health Centers (FQHC)

In accordance with CMS guidelines, during the COVID-19 PHE, RHCs and FQHCs can furnish any telehealth service that is included on the list of Medicare telehealth services listed in the coding sections of this policy. Telehealth services generally require use of interactive real-time audio and video technology. However, during the PHE, some services can be furnished using audio technology only.

COVERAGE

Benefits may vary between groups and contracts. Please refer to the Evidence of Coverage for applicable benefits/coverage.

BACKGROUND

The Centers for Medicare & Medicaid Services (CMS) has broadened access to Medicare telehealth services so that members can receive a wider range of services from their doctors without having to travel to a healthcare facility. These policy changes build on the regulatory flexibilities granted under the President's emergency declaration. CMS is expanding this benefit on a temporary and emergency basis under the 1135 waiver authority and Coronavirus Preparedness and Response Supplemental Appropriations Act. The benefits are part of the broader effort by CMS and the White House Task Force to ensure that all Americans – particularly those at high-risk of complications from the virus that causes the disease COVID-19 – are aware of easy-to-use, accessible benefits that can help keep them healthy while helping to contain the community spread of this virus.

Expansion of telehealth with 1135 waiver

Under this new waiver, Medicare can pay for office, hospital, and other visits furnished via telehealth across the country and including in patient's places of residence starting March 6, 2020. A range of providers, such as doctors, nurse practitioners, clinical psychologists, and licensed clinical social workers, will be able to offer telehealth to their patients. Additionally, the HHS Office of Inspector General (OIG) is providing flexibility for healthcare providers to reduce or waive cost-sharing for telehealth visits paid by federal healthcare programs.

Prior to this waiver Medicare could only pay for telehealth on a limited basis: when the person receiving the service is in a designated rural area and when they leave their home and go to a clinic, hospital, or certain other types of medical facilities for the service.

CODING

The codes in the grid below are covered as telemedicine and/or telephone services when filed as noted below AND the telemedicine criteria set forth in this policy are met. The appearance of a code on the attached grid does not guarantee separate reimbursement for the code. Please reference BCBSRI's Non-Reimbursable Health Service Codes Policy.

To ensure correct claims processing:

Claims for <u>telemedicine services</u> must be filed with both of the following:

- Place of Service (POS) 02: Telehealth: The location where health services and health related services are provided or received, through telehealth telecommunication technology AND
- Modifier 95: Synchronous Telemedicine Service Rendered Via a Real-Time Interactive Audio and Video Telecommunications System

Claims for **telephone only** services must only be filed with:

• Place of Service (POS) 02: Telehealth: The location where health services and health related services are provided or received, through telehealth telecommunication technology

Note: Any claim filed with a CPT code NOT listed on the attached grid with place of service 02 and/or Modifier 95 will deny as invalid place of service as a provider liability.

For Telephone/Telemedicine codes covered for BlueCHiP for Medicare see below: 2021 Telephone/Telemedicine Covered Services for BlueCHip for Medicare

RELATED POLICIES

Non-Reimbursable Health Service Codes

Telemedicine/Telephone services for BlueCHiP for Medicare Products - Effective 2021

TEMPORARY Cost Share Waiver for Treatment of Confirmed Cases of COVID-19 During the COVID-19 Crisis

TEMPORARY COVID-19 Diagnostic Testing

TEMPORARY Encounter for Determination of Need for COVID-19 Diagnostic Testing

TEMPORARY Telemedicine/Telehealth and Telephone Preventive Medicine Evaluation and Management Visits and Annual Wellness Visits During the COVID-19 Crisis

TEMPORARY Telemedicine/Telehealth and Telephone Services During the COVID-19 Crisis – Effective 3/5/2020 – 3/17/2020

TEMPORARY Timely Filing Limit Extension Policy – Additional 180 Days During the COVID-19 Crisis

PUBLI SHED

Provider Update, December 2020

REFERENCES:

- 1. CMS.gov/newsroom https://www.cms.gov/newsroom/fact-sheets/medicare-telemedicine-health-care-provider-fact-sheet
- https://www.medicare.gov/medicarecoronavirus#:~:text=If%20you%20have%20a%20Medicare,delivery%20or%20medical%20transport%2 0services.
- 3. https://www.cms.gov/Medicare/Medicare-General-Information/Telehealth/Telehealth-Codes

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