

Educational Handout

For informational purposes only - subject to change.

March 24, 2020

Coronavirus Disease (COVID-19) Telehealth

- The West Virginia Department of Health and Human Resources, Bureau for Medical Services (BMS), pursuant to Section 1135 of the Social Security Act, is requesting from the Centers for Medicare and Medicaid Services (CMS) to modify certain program requirements, policies operational procedures, and deadlines applicable to the states' administration of its Medicaid program during the period of the emergency declaration to prevent the transmission of the Coronavirus Disease (COVID-19) to the extent possible effective with the President's declaration of a national state of emergency on March 13, 2020.
- On March 17, 2020, BMS issued a memorandum allowing for services to be rendered through telehealth (audio and visual) or telephonic (audio only) modalities. The goal of allowing services through this modality is to ensure continuation and access to services that are needed to ensure our members can be safe and stable within our communities.
- The United States Department of Health and Human Service Office for Civil Rights issued a HIPAA waiver due to COVID-19 that allows for greater flexibility of telehealth services. The waiver can be found at this link: <https://www.hhs.gov/sites/default/files/hipaa-and-covid-19-limited-hipaa-waiver-bulletin-508.pdf>
- In relation to substance use disorder services, SAMSHA has issued guidance on 42 CFR part 2 that allows for greater flexibility concerning these services. The link for more information for these services can be found at this link: <https://www.samhsa.gov/sites/default/files/covid-19-42-cfr-part-2-guidance-03192020.pdf>
- Enrolled Medicaid providers can utilize telehealth services (including telephone) for non-emergent services to allow patients to stay at home during this pandemic. Providers should use their best judgement on what services can be performed in this setting; must work within the scope of their license; and have access to the patient's previous records (for established patients). Consent from the patient, verbal or written, to provide services via telehealth must be obtained and documented in the member's record.
- To bill for services rendered through telehealth, bill the services code of the service that was rendered and add the following:
 - If billing on HCFA 1500, bill the appropriate CPT/HCPCS code for the services rendered and use 02 for the Place of Service.
 - If billing on a UB04, bill the appropriate CPT/HCPCS code for the services rendered and add -GT modifier.
- To the degree that is humanly possible, we encourage providers to perform due diligence when selecting telehealth and telephonic platforms and vendors and to consult with their professional associations regarding guidance on adherence to codes of ethics, while prioritizing access to services.