

**BEHAVIORAL HEALTH
TELEHEALTH UPDATE**

APRIL 24, 2023

DEPARTMENT OF MEDICAL
ASSISTANCE SERVICES




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PRESENTER TODAY

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About Today's Webinar

- The presentation portion of this webinar will be recorded and posted to the DMAS website along with a PDF version of the slide presentation.
- The CHAT function has been disabled for this webinar.
- All participants are muted.
- DMAS will not be answering questions during the presentation.
 - As time permits, DMAS will answer questions at the end of the presentation
 - Please use the Q&A function to type in your questions, make sure to include your full name and email address.
 - If your question(s) is not answered you may email the DMAS Behavioral Health Division at enhancedbh@dmass.virginia.gov

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Agenda Today

- Update on the federal COVID-19 Public Health Emergency (PHE) and related flexibilities
- Brief overview of Telehealth Services Supplement
- Future update to Telehealth Services Supplement
- Question and Answer Session

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Where can I find the provider manuals?

Direct Link: <https://vamedicaid.dmas.virginia.gov/manuals/provider-manuals-library>

The Telehealth Services Supplement is a supplement to the ARTS, Mental Health Services, Psychiatric Services and Physician/Practitioner manuals

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Get Your Copy of the Telehealth Services Supplement!

Mental Health Services

- Chapter 1: General Information
- Chapter 2: Provider Participation Requirements (MHS)
- Chapter 3: Member Eligibility
- Chapter 4: Covered Services and Limitations (MHS)
- Chapter 5: Billing Instruction (MHS)
- Chapter 6: Utilization Review and Control (MHS)
- Chapter 7: Definitions (MHS)
- Chapter 8: Appendix C: Procedures Regarding Service Authorization of Mental Health Services
- Chapter 9: Appendix D: Intensive Community Based Support Youth
- Chapter 10: Appendix E: Intensive Community Based Support
- Chapter 11: Appendix F: Intensive Clinic Based Support
- Chapter 12: Appendix G: Comprehensive Crisis and Transition Services
- Chapter 13: Appendix H: Community Mental Health Rehabilitative Services (CMHRS)
- Chapter 14: Appendix I: Case Management
- Chapter 15: Temporary Detention Orders Supplement
- Chapter 16: Telehealth Services Supplement**
- Chapter 17: Peer Recovery Support Services Supplement

- The supplement is located online at: [Provider Manuals Library | MES \(virginia.gov\)](https://vamedicaid.dmas.virginia.gov/manuals/provider-manuals-library)
- Providers are responsible for adhering to all policies in the Telehealth Services Supplement.

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Definitions - Overview

Telehealth

Telehealth means the use of telecommunications and information technology to provide access to medical and behavioral health assessment, diagnosis, intervention, consultation, supervision, and information across distance. Telehealth encompasses telemedicine as well as a broader umbrella of services that includes the use of such technologies as telephones, interactive and secure medical tablets, remote patient monitoring devices, and store-and-forward devices.

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Definitions - Overview

Telemedicine

Telemedicine is a means of providing services through the use of two-way, real time interactive electronic communication between the member and the provider located at a site distant from the member. This electronic communication must include, at a minimum, the use of audio and video equipment. Telemedicine does not include an audio-only telephone.

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Definitions - Overview

In-Person vs Face-to-Face

- In-person requirements can only be met by being in the physical presence of the individual and cannot be met through telemedicine.
- Unless otherwise noted, face-to-face requirements can be met through either meeting in-person with the individual or through telemedicine (audio/visual components).
 - The definition of Comprehensive Needs Assessment includes the term face-to-face but as noted in Chapter 4, some services require that the Comprehensive Needs Assessment be completed in-person.
 - Some waiver services require in-person meetings to meet face-to-face requirements.

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Federal COVID-19 Public Health Emergency

- The federal COVID-19 Public Health Emergency (PHE) was declared March 13, 2020.
- The federal COVID-19 PHE allowed DMAS the flexibility to quickly update policies to allow for continued service coverage.
- The federal COVID-19 PHE ends at the end of the day on May 11, 2023.

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Federal COVID-19 Public Health Emergency

- Additional COVID-19 related information is located on the DMAS website at:
<https://www.dmas.virginia.gov/covid-19-response/>
- Here you can find recent bulletins related to the end of the PHE including return to normal enrollment and a history of flexibilities related to the PHE.

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Flexibilities Made Permanent

- ARTS
 - Opioid treatment programs may administer medication as take home dosages, up to a 28-day supply.
 - A member's home is allowed to serve as the originating site for a prescription of buprenorphine.
- Electronic signatures are now permitted as described in Chapter 2 of the Medicaid Manuals.
- Pharmacy: 90-day supplies allowed for many medications.
- Co-payments were eliminated for Medicaid and FAMIS members.
- Many Behavioral Health services may now be provided through Telemedicine in accordance with the Telehealth Services Supplement.

Resource:

[Public Health Emergency Ends on May 11, 2023 \(virginia.gov\)](#)

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Behavioral Health Flexibilities Expiring 5/11/2023

[COVID-19 Public Health Emergency Flexibilities, Updated February 16, 2023 \(virginia.gov\)](#)

Flexibility #1

During the PHE, providers of Therapeutic Day Treatment, Intensive In-Home, Mental Health Skill-Building and Psychosocial Rehabilitation were allowed to provide one unit of service through audio-only telehealth per day.

This flexibility will not be continued after 5/11/2023.

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Behavioral Health Flexibilities Expiring 5/11/2023

Flexibility #2

During the PHE, providers of Therapeutic Day Treatment, Intensive In-Home, Mental Health Skill-Building and Psychosocial Rehabilitation were allowed to bill for the first unit of service even if the time spent did not meet the time requirement to bill a service unit.

This flexibility will not be continued after 5/11/2023.

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Behavioral Health Flexibilities Expiring 5/11/2023

Flexibility #3

During the PHE, providers of Applied Behavior Analysis were allowed to provide family adaptive behavior treatment (97156, 97157) through audio-only telehealth.

This flexibility will not be continued after 5/11/2023.

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Behavioral Health Flexibilities Expiring 5/11/2023

Flexibility #4

During the PHE, providers of Applied Behavior Analysis were allowed to conduct initial assessments through Telemedicine.

This flexibility will not be continued after 5/11/2023.

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Behavioral Health Flexibilities Expiring 5/11/2023

Flexibility #5

During the PHE, Independent Assessment, Certification and Coordination Team (IACCT) Assessments were allowed to occur through audio-only telehealth.

This flexibility will not be continued after 5/11/2023.

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Behavioral Health Flexibilities Expiring 5/11/2023

Flexibility #6

During the PHE, outpatient psychiatric service face-to-face requirements were waived.

Several CPT codes will be permitted through audio-only telehealth after 5/11/2023. Remaining CPT codes will be required face-to-face (more information on later slides).

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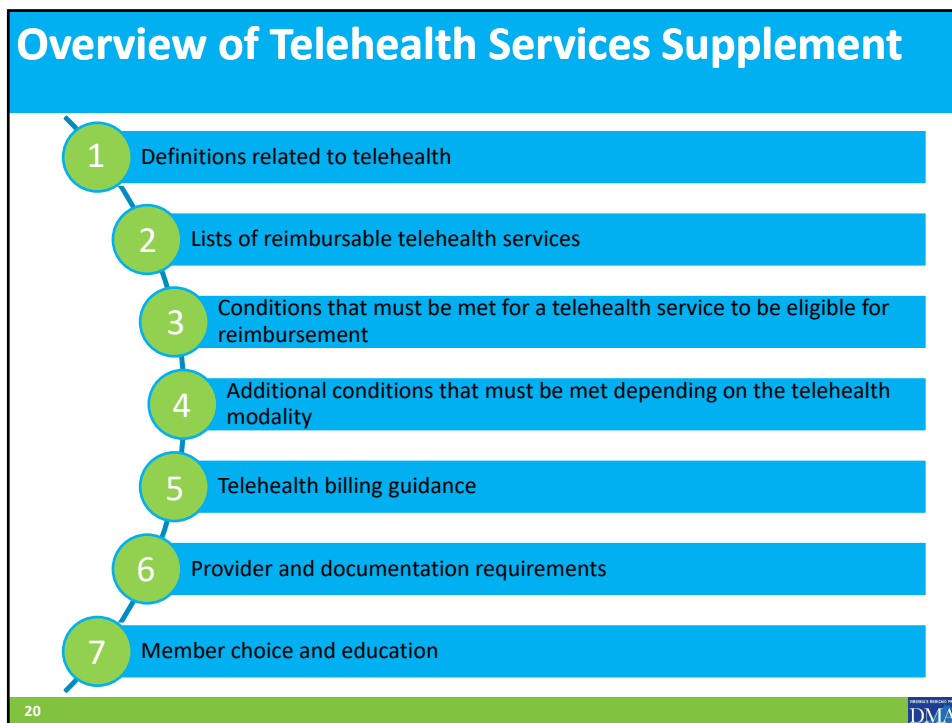
Snapshot of Telehealth Policy Evolution

Telehealth Policy	Pre-PHE	Federal Public Health Emergency (PHE)		Post-PHE
		3/19/20 – 7/1/21	7/1/21 – end of PHE (5/11/23)	
Originating site: patient location	No	Yes		
Telemedicine (audio/visual)	Services per 2014 Policy	Coverage as described in Medicaid Memos and Telehealth Services Supplement		As described in Telehealth Services Supplement
Telemedicine Billing Modifier (GT)	Required	Encouraged	Required as described in Telehealth Services Supplement	
Audio-only Telehealth	Not authorized	Allowed for some services		In policy development*

* List of known allowed outpatient CPT codes on later slide, modifier will be required at a future date.

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Universal Telehealth Policies Across All Services for Medicaid Reimbursement

- Service is clinically appropriate to be delivered via telehealth
- Service meets CPT/HCPCS requirements
- Service meets state/federal laws regarding confidentiality of information/patient's right to medical information
- Services meet applicable state laws, regulations and licensure requirements on telehealth
- Service limitations are same as in-person unless otherwise noted

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Reimbursable Telehealth Services: Telemedicine-specific Conditions

- Telemedicine must be provided with the same standard of care as in-person services
- Telemedicine must not be used when in-person services are clinically necessary (Provider responsible for determining appropriateness)
- Telemedicine must be able to be converted to in-person if needed

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Billing Procedures - Telemedicine

- ❑ Provider types authorized to bill via telemedicine for services are the same as those provider types allowed to bill for in-person services
- ❑ Modifier
 - Modifier: GT (unchanged from pre-PHE)
- ❑ Place of Service
 - Place of Service: where service would have normally been provided
- ❑ Originating site facility fee (Q3014) may be billed if:
 - It is medically necessary for a provider to be physically present with the member at the originating site at the time the telemedicine service is delivered
 - The originating site is a provider location where healthcare services are rendered (does not include member's residence)

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Additional Telemedicine Requirements

- ❑ Providers must maintain a practice located in Virginia or be able to make referrals to a Virginia-based Provider
- ❑ Providers must meet state licensure, registration or certification requirements per the applicable health regulatory board with the Virginia Department of Health Professions
- ❑ Informed patient consent (verbal, electronic, written) must be documented in medical record
 - Ongoing consent agreement acceptable
- ❑ Equipment used must be of sufficient audio/visual quality to be functionally equivalent to in-person
- ❑ Documentation requirements are the same as for a comparable in-person service

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Reimbursable Telemedicine Services – Table 2 Behavioral Health (BH)

BH Services allowed through telemedicine*

- Early Intervention/Screening Brief Intervention and Referral to Treatment (ASAM 0.5)
- Case Management (Substance Use, Mental Health and Treatment Foster Care)
- Peer Recovery Support Services
- Opioid Treatment Programs and Office-Based Addiction Treatment (includes substance use care coordination)
- Outpatient Psychiatric and Outpatient Substance Use (ASAM 1.0) Services (limited CPT codes)

* See the Telehealth Supplement, Table 2 for list of allowed CPT/HCPCS codes

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Reimbursable Telemedicine Services – Table 2 Behavioral Health (continued)

BH Services allowed through telemedicine

- Intensive In-home (IIH)*
- Therapeutic Day Treatment (TDT)*
- Psychosocial Rehabilitation (PSR)
- Mental Health Skill-building Services (MHSS)*
- Multisystemic Therapy (MST)
- Functional Family Therapy (FFT)
- Applied Behavioral Analysis (ABA)* - limited CPT codes

* Initial assessment required in-person

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Reimbursable Telemedicine Services – Table 2 Behavioral Health (continued)

BH Services allowed through telemedicine

- Assertive Community Treatment
- Mental Health and Substance Use (ASAM 2.1)
Intensive Outpatient
- Mental Health and Substance Use (ASAM 2.5)
Partial Hospitalization
- Mobile Crisis Response (with limits)
- Some professional services in 23-hour Crisis
Stabilization and Residential Crisis Stabilization
Units (RCSUs)

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Reimbursable Telemedicine Services – Table 2 Behavioral Health (continued)

BH Services allowed through telemedicine

- Children's Residential Treatment Services
 - IACCT initial assessment
 - IACCT follow-up assessment
- Within Children's Residential and ARTS
Residential Services: Professional services as
allowed through applicable CPT codes

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Telehealth Services Supplement – Future Updates

The following additions/corrections will be made to Table 2 (Telemedicine):

- CPT code updates effective 1/1/2023
 - CPT codes for Multifamily Therapy, 96202 and 96203, will be added
 - CPT codes for Prolonged Services 99354 – 99357 will be replaced with the updated codes for this service, 99417 and 99418.

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Telehealth Services Supplement – Future Updates

The following additions/corrections will be made to Table 2 (cont.):

- Psychosocial Rehabilitation - assessment code (H0032 U6) will be added
- Mobile Crisis – language clarifying that code mandated CSB prescreening activities can be conducted through telehealth will be added.

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Telehealth Services Supplement – Future Updates

Medicaid Bulletin “Telehealth Updates to Outpatient Psychiatric and Addiction Recovery and Treatment Services” posted on 4/20/2023

<https://vamedicaid.dmas.virginia.gov/provider/library>

Latest Published Memos and Bulletins

[Telehealth Updates to Outpatient Psychiatric and Addiction Recovery and Treatment Services \(ARTS\) Services](#)

2023-04-20

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Telehealth Services Supplement – Future Updates

The following CPT codes will be allowed through audio-only telehealth:

90785	90791	90792	90832
90833	90834	90836	90837
90838	90839	90840	90845
90846	90847	90853	96116
96121	96127	96156	96158
96159	96160	96161	99406
99407	99408	99409	

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Telehealth Services Supplement – Future Updates

The following CPT codes will be allowed through audio-only telehealth:

- 90785 – Interactive Complexity Add-on
- 90791 – Psychiatric Diagnostic Evaluation
- 90792 – Psychiatric Diagnostic Evaluation with medical services
- 90832 – Psychotherapy (30 min)
- 90833 – Psychotherapy (30 min) with evaluation and management (E&M)

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Telehealth Services Supplement – Future Updates

The following CPT codes will be allowed through audio-only telehealth:

- 90834 – Psychotherapy (45 min)
- 90836 – Psychotherapy (45 min) with E&M
- 90837 – Psychotherapy (60 min)
- 90838 – Psychotherapy (60 min) with E&M
- 90839 – Psychotherapy for crisis (60 min)
- 90840 – Psychotherapy for crisis (+30 min)
- 90845 – Psychoanalysis

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Telehealth Services Supplement – Future Updates

The following CPT codes will be allowed through audio-only telehealth:

- 90846 – Family psychotherapy (50 min) without patient
- 90847 – Family psychotherapy (50 min) with patient
- 90853 – Group Psychotherapy
- 96116 – Neurobehavioral status exam (first hour)
- 96121 – Neurobehavioral status exam (each additional hour)

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Telehealth Services Supplement – Future Updates

The following CPT codes will be allowed through audio-only telehealth:

- 96127 – Brief behavioral assessment
- 96156 – Health behavior assessment
- 96158 – Health behavior intervention (initial 30 minutes)
- 96159 – Health behavior intervention (additional 15 minutes)

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Telehealth Services Supplement – Future Updates

The following CPT codes will be allowed through audio-only telehealth:

- 96160 – administration of patient-focused health risk assessment instrument
- 96161 – administration of caregiver-focused health risk assessment instrument for the benefit of the patient
- 99406 – smoking and tobacco use cessation counseling (3 – 10 minutes)
- 99407 – smoking and tobacco use cessation counseling (>10 minutes)

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Telehealth Services Supplement – Future Updates

The following CPT codes will be allowed through audio-only telehealth:

- 99408 – Alcohol and/or substance abuse structured screening and brief intervention services (15 – 30 min.)
- 99409 – Alcohol and/or substance abuse structured screening and brief intervention services (> 30 minutes)

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Telehealth Services Supplement – Future Updates

Billing for these outpatient CPT codes:

The Telehealth Services Supplement will be updated to include audio-only telehealth policy. Until this update is in place, providers can continue to bill for audio-only telehealth for those outpatient CPT codes included in the 4/20/2023 Medicaid bulletin as they normally would if the service was provided in-person until otherwise notified.

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Telehealth Services Supplement – Future Updates

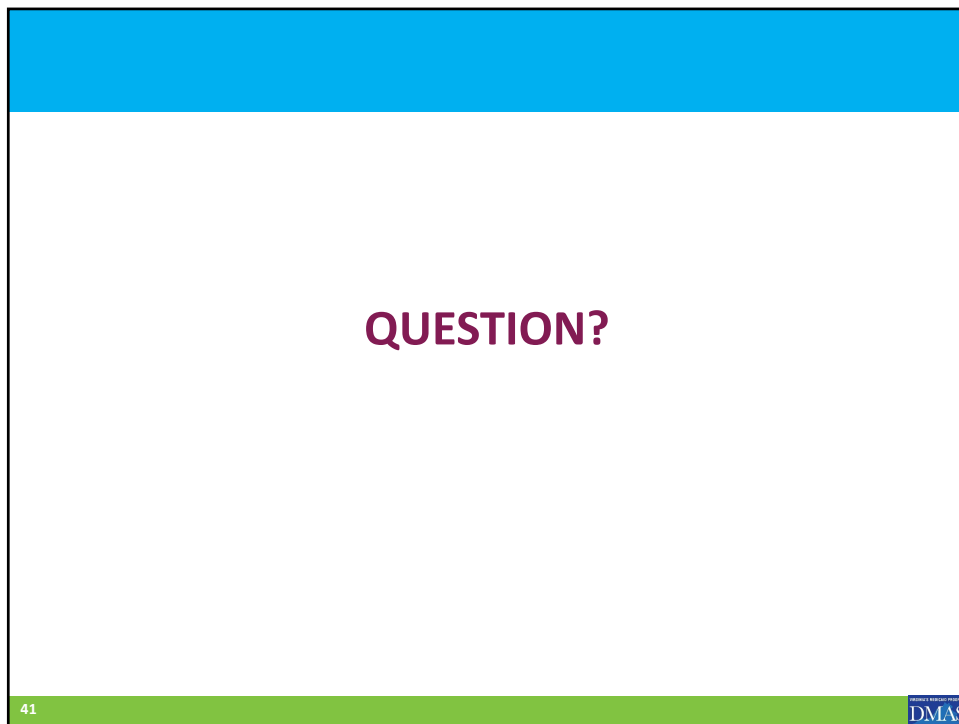
Until the Telehealth Services Supplement is Updated:

- Providers must follow the conditions for telehealth reimbursement outlined in the Reimbursable Telehealth Services section of the Telehealth Services Supplement (page 3).
- Provider and documentation requirements remain the same as if the service was provided in-person.

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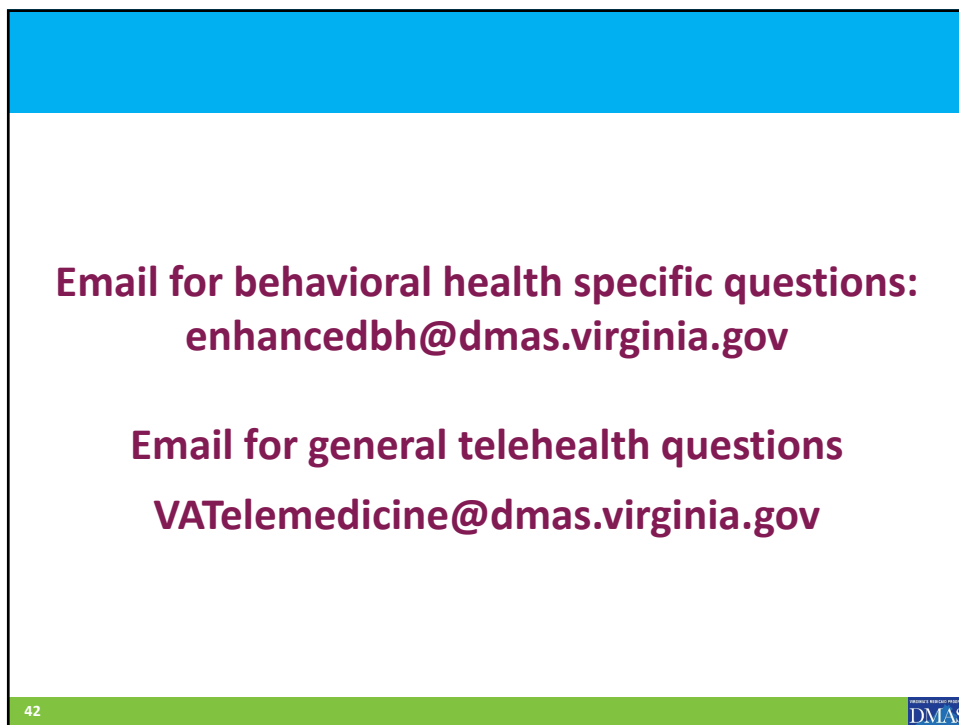
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A presentation slide with a blue header bar at the top and a green footer bar at the bottom. The text "Email for behavioral health specific questions: enhancedbh@dmas.virginia.gov" is centered in the white middle section in a dark red font. Below it, "Email for general telehealth questions VATElemedicine@dmas.virginia.gov" is also centered in the same font. The number "42" is in the bottom left corner of the footer bar, and the "DMAS" logo is in the bottom right corner.

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