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# KanCare

## **KanCare All MCO TeleMedicine**

Spring 2020



Aetna Better Health® of Kansas



sunflower  
health plan™



UnitedHealthcare®  
Community Plan



# Welcome, Introductions & Agenda

- Welcome
- Introductions
  - Aetna Better Health of Kansas
  - Sunflower Health Plan
  - United HealthCare
- Agenda for the day
  - Telemedicine



# Telemedicine Policy

For your information, here is a bulletin about Telemedicine in Kansas, prior to Covid-19.

Bulletin 18224 – Kansas Telemedicine Act

[https://www.kmap-state-ks.us/Documents/Content/Bulletins/18224%20-%20General%20-%20Telemedicine\\_2.pdf](https://www.kmap-state-ks.us/Documents/Content/Bulletins/18224%20-%20General%20-%20Telemedicine_2.pdf)

If you are unsure if you are able to provide the service, you can use the Procedure Code Look up tool on KMAP. This tool can assist providers in determining if a provider is allowed to offer a service.

<https://www.kmap-state-ks.us/Provider/PRICING/Disclaimer.asp?goto=/Provider/PRICING/HCPSCSearch.asp>

Remember when billing Telemedicine, **place of service should be 02** (telehealth)

These services relating to Covid-19 policies will remain in force, for dates of service March 12,2020 through June 30, 2020, or until rescinded.

**\*Please note the list of services are subject to change.**

as of 05/4/2020



# Telemedicine Policy- Claim tips

**Please remember only codes outlined in the recent COVID-19 related telemedicine policies are allowed to be provided when the member is in their home. Codes that are not specifically called out as being allowed while the member is in their home still require the member to be in an originating site**

The originating site code (Q3014) cannot be billed while the member is receiving telemedicine services in their home.

Verify member eligibility – By checking KMAP eligibility you will be able to verify which MCO member has selected.

COB – please remember you must bill other insurance – Medicaid is the payer of last resort.



# Mental Health Telemed

Effective with Dates of Service 3/12/2020 and after, a members home will be added as an allowed originating site for some mental health codes. This means, members will be allowed to receive either telephonic or teleconference telemedicine while remaining in their home.

- No originating site service (Q3014) can be billed when the member receives services at home.
- Telemedicine services (including telephonic only) requires verbal consent from the member, with written consent to be obtained at a later date. This must be clearly documented in the member medical record
- Tele-video communication must be HIPAA complaint
- FQHC/RHC/IHC will receive their encounter rate for Telemedicine services when provided by a qualified provider as noted in the KMAP RHC/FQHC Manual



# Behavioral Health Telemedicine – Mental Health

- Mental Health Services

- 90832 – Psychotherapy, 30 mins, with patient/family
- 90833 - Psychotherapy, 30 mins, with patient/family and E/M Service
- 90834 - Psychotherapy, 45 mins, with patient/family
- 90836 - Psychotherapy, 45 mins, with patient/family and E/M Service
- 90837 - Psychotherapy, 60 mins, with patient/family
- 90838 - Psychotherapy, 60 mins, with patient/family and E/M Service
- 90839 – Psychotherapy crisis, first 60 mins
- 90840 - Psychotherapy crisis, for each additional 30 mins
- 90847 – Family psychotherapy (with patient present)
- **90853 – Group Psychotherapy**
- 90863 – Pharmacologic Management
- 90791 – Psychiatric Diagnostic Evaluation
- 90792 – Psychiatric Diagnostic Evaluation with Medical Services
- 99367- Medical team conference with interdisciplinary team/physician, 30 mins or more
- 99368 - Medical team conference with interdisciplinary team with non-physician



# Behavioral Health Telemedicine – Mental Health

- Mental Health Services

- H0032 HA – MH Service Plan development by non-physician (CBST mtg for PRTF)
- H2011 – Crisis intervention, basic level
- H2011 HK – Crisis intervention, intermediate level
- H2011 HO – Crisis intervention, advanced level
- **H2017 – Psychosocial rehabilitation-individual**
- **H2017 HQ – Psychosocial rehabilitation group-adult**
- **H2017 TJ – Psychosocial rehabilitation group-child**
- **T1019 HE – MH Attendant Care**
- **H0036 – Community psychiatric supportive treatment**
- H0038 – Peer Support
- H0038 HQ – Group Peer Support

**Note – Codes bolded indicate new codes for telemedicine**

All of the mentioned Mental Health services can use Tele-video and telephone

CMHC providers can function as a distant site if requested by a hospital or jail for eligible members for the above codes



# Behavioral Health Telemedicine – SUD Providers

- SUD Services

- H0001 - Assessment and Referral
- H0004 - Individual Outpatient
- H0005 U5 – Group Outpatient
- H0006 U5 – Person-Centered Case Management
- H0007 – Alcohol and/or drug services, crisis intervention (outpatient)
- **H0015 U5 – Intensive outpatient Adult/Youth**
- H0038 – Peer Support
- H0038 HQ – Group Peer Support

## Related SUD Codes

- **H0049 – SBIRT Alcohol and/or Drug Screening**
- **H0050 – SBIRT Alcohol and/or Brief Intervention**
- 99408 or 99409 – SBIRT Alcohol and/or Drug Screening and Brief Intervention

All of the above services can use the following - Tele-video and telephone

**Note – Codes bolded indicate new codes for telemedicine**





# Behavioral Health Telemedicine – Autism

- Autism Services

- **97155** – Adaptive behavior treatment with protocol
- **97156** – Family adaptive behavior treatment guidance

The above codes must be provided via HIPAA compliant tele-video and telephonic communication.

**Note – Codes bolded indicate new codes for telemedicine**



# Evaluation and Management Telemedicine

Effective with dates of service 3/12/2020 and after the following evaluation and management (E&M) codes will be allowed when provided via telephone. This policy does not change current coverage of these codes it simply adds an additional delivery method.

- Payment for these codes will be the same regardless of the delivery mode
- Existing NCCI edits/limitations will apply and are not waived with this policy
- Any requirement noting a face to face examination is waived at this time
- FQHC/RHC/IHC will receive their encounter rate for Telemedicine services when provided by a qualified provider as noted in the KMAP RHC/FQHC Manual
- Both In and Out of state physicians may provide these services to KS members.
  - Providers who are non-par with the MCO's will require a PA.
  - Additionally non-par providers choosing to offer these services will be required to provide documents required to validate license, exclusionary database checks, and any item required for the MCO's to make payment. (These steps are only required if the provider lacks a KMAP Provider ID)
  - This is applied to telemedicine services only



# Evaluation and Management Telemedicine

- E & M Services

- 99201 – Office or other outpatient visit, new patient 10 minutes
- 99202 – Office or other outpatient visit, new patient 20 minutes
- 99203 - Office or other outpatient visit, new patient 30 minutes
- 99204 – Office or other outpatient visit, new patient 45 minutes
- 99211 - Office or other outpatient visit, established patient 5 minutes
- 99212 - Office or other outpatient visit, established patient 10 minutes
- 99213 - Office or other outpatient visit, established patient 15 minutes
- 99214 – Office or other outpatient visit, established patient 25 minutes



# HCBS Services - Telemedicine

- Brain Injury Waiver
  - H0004 – Behavior Therapy
  - 97129 and 97130 - Cognitive Rehabilitation
  - G0152 – Occupational Therapy
  - G0151 – Physical Therapy
  - G0153 – Speech-Language Therapy
- Autism Waiver
  - T1027 – Parent Support (individual)
  - S9482 – Family Adjustment Counseling
- Frail Elderly Wavier
  - S5190 – Wellness Monitoring
  - T1001 – Nursing Evaluation Visit

All of the above services can utilize Tele-video and telephone



# HCBS Services - Telemedicine

- Technologically Assisted Waiver
  - T1001 – Health Maintenance Monitoring
- Intellectual/Developmental Disability Waiver
  - S5190 – Wellness Monitoring
  - T2021 – Adult Day Supports \*Must be Tele-video
  - H2023 – Supported Employment
- Severe and Emotionally Disturbed Waiver
  - T1019 HK – MH Attendant Care (specific to SED waiver)
  - T2038 – Independent Living/Skill Building
  - S5110 – Parent Support/Training (individual)
  - S5110 TJ – Parent Support/Training (group)
  - H2021 – Wrap-around Facilitation

**\*All of the above services utilize Tele-video and Telephone**



# OneCare Kansas - Telemedicine

- OneCare Kansas
    - S0280 U1 – Comprehensive Care Management; Completion of the HAP one-time only
    - S0281 U1 – Comprehensive Care Management
    - S0311 U1 – Care Coordination
    - G9148 U1 – Health Promotion
    - G9149 U1 – Comprehensive Transitional Care
    - G9150 U1 – Patient and Family Support
    - S0221 U1 - Referral to Community and Social Supports
- \*Specific Identifying Modifier for SUD. Add this modifier to OCK service code for tracking purposes. HF Modifier identifies members with a diagnosis of Substance Use Disorder. Does not have to be primary diagnosis.**



# Tobacco Cessation - Telemedicine

## Tobacco Cessation

- 99406 – Smoking and Tobacco use cessation counseling visit; intermediate, greater than 3 minutes up to 10 minutes
- 99407 - Smoking and Tobacco use cessation counseling visit; intermediate, greater than 10 minutes
- S9453 – Smoking cessation classes, non-physician provider per session

The above CPT/HCPCS codes must be billed with an appropriate ICD-10 code to signify that the beneficiary receiving the service, is a tobacco user. ICD-10 codes appropriate to use are:

The range F17.and O99.33 - Z72.0



# Wheelchair Seating Assessment - Telemedicine

## Wheelchair Seating Assessment

- 97542 – Wheelchair management (e.g., assessment, fitting, training), each 15 minutes
- 97755 – Assistive technology assessment (e.g. to restore, augment or compensate for existing function, optimize functional tasks and/or maximize environmental accessibility), direct one-on one contact, with written report, each 15 minutes
- 97760 – Orthotic(s) management and training (including assessment and fitting when not otherwise reported), upper extremity(s), lower extremity(s) and/or trunk, each 15 minutes

Telemedicine services (including telephonic contact) can be made when there is verbal consent received from the patient (to be followed up by written approval) in the medical record. Audio/visual communication can only be utilized if that contact is HIPAA compliant.

\*Please note only a select few providers are allowed to be reimbursed for these codes.





# Physical Therapy Services - Telemedicine

- 97110 – Therapeutic Exercise to develop strength, endurance, range of motion, and flexibility, each 15 minutes
- 97112 – Therapeutic procedure to re-education brain-to-nerve-to-muscle function, each 15 minutes
- 97140 – manual (Physical) therapy techniques to 1 or more region, each 15 minutes
- 97161 – Evaluation of Physical Therapy, typically 20 minutes, low complexity
- 97162 - Evaluation of Physical Therapy, typically 30 minutes, moderate complexity
- 97163 - Evaluation of Physical Therapy, typically 45 minutes, high complexity
- 97164 – Re-evaluation of Physical Therapy, typically 20 minutes, low complexity

The above codes are allowed via Tele-video only (not allowed over the phone)



# Occupational Therapy Services - Telemedicine

- 97165 - Evaluation of Occupational Therapy, typically 30 minutes, low complexity
- 97166 - Evaluation of Occupational Therapy, typically 45 minutes, moderate complexity
- 97167 - Evaluation of Occupational Therapy, typically 60 minutes, high complexity
- 97168 – Re-evaluation of Occupational Therapy establish plan of care, typically 30 minutes
- 97530 – Therapeutic Activities to improve function, each 15 minutes
- 97535 – Self-care or home management training each 15 minutes
- 97750 – Physical performance test or measurement, with report, each 15 minutes

The above codes are allowed via Tele-video only (not allowed over the phone)



# Speech Language Therapy Services - Telemedicine

The following list are the only Speech Language Therapy codes that can be billed while the member is receiving services in their home via tele-video or telephone:

- 92521 – Evaluation of Speech Fluency
- 92522 – Evaluation of Speech Sound Production
- 92523 – Evaluation of Speech Sound Production with Evaluation of Language Comprehension and Expression
- 92524 – Behavioral and Qualitative Analysis of Voice and Resonance

The above codes are allowed via Tele-video and Telephone



# Questions?



as of 05/04/2020