Provider Bulletin: March 13, 2020

Dear Provider:

We know there is a lot of information on COVID-19 from many sources and that you are working with your contacts at CHPW, as needed. We wanted to provide a brief consolidated reference for you regarding your work with CHPW. Please share this information with your clinical and administrative staff, as needed. We’ll continue to update you as this response evolves, as information is changing rapidly, please defer to the most recent communication.

We stand ready to partner with you in any ways we can be of assistance. Please reach out to us if you think of anything.

For additional questions, email CHPW Provider Relations at provider.relations@chpw.org.

Frequently Asked Questions

UPDATED INFORMATION as of 3/13/2020.
(Information is subject to change)

The information in this section reflects new or revised information since the last dated bulletin.

PROVIDER WEBINARS:

HCA’s Division of Behavioral Health and Recovery (DBHR) will host a COVID-19 related weekly webinar for providers of mental health, substance use, and problem gambling services on Tuesdays from 12-1 PM from March 17-April 1. Here is the registration link.

The National Consortium of Telehealth Resource Centers free webinar on Telehealth and COVID-19 on Thursday, March 19 at 11 AM. Here is the registration link.

Will CHPW pay for COVID-19 testing?

Yes, codes have been developed and CHPW is now using them. For CHPW members, we will process these codes based on the published HCA and CMS reimbursement rates.

Health care providers who need to test patients meeting CDC criteria for testing for novel coronavirus using the Centers for Disease Control and Prevention (CDC) 2019 Novel Coronavirus Real Time RT-PCR Diagnostic Test Panel may bill for the cost of the test using HCPCS code U0001. CMS developed the first HCPCS code (U0001) to bill for tests and track new cases of the virus. This code is used specifically for CDC testing.
laboratories to test patients for SARS-CoV-2. The second HCPCS billing code (U0002) allows laboratories to bill for non-CDC laboratory tests for SARS-CoV-2/2019-nCoV (COVID-19).

**Will Prior Authorizations be required for Home Health services?**

No. CHPW is temporarily removing prior authorization requirements for home health services to support expedited transition coordination for members leaving an acute setting needed in response to increased demand for inpatient services. Home health services can be coordinated and start immediately without prior written approval from CHPW.

**TELEMEDICINE**

**Medicare**

**Will CHPW cover any other types of virtual/remote patient interactions?**

Yes. During the COVID-19 emergency period, CHPW will cover E/M services provided via telephone (CPT 99441 – 99443). Providers billing for these services for CHPW Medicare Advantage members should follow the same rules and process that applies for CHPW Apple Health members. Please note that CHPW is only able to cover these services during the COVID-19 emergency period, based on guidance from CMS. CHPW will notify providers of any changes.

**Medicaid**

**What about E&M services delivered via telephone (voice only)?**

CPT 99441-99443 are available for telephone visits. Note that these cannot be billed if the patient is seen within 24 hours or next available urgent visit appointment of the phone call. Reference page 47 of the [HCA Physician-Services Billing Guide](#) for additional information. We are working to update and validate our systems for how to bill and how we will pay for telemedicine visits and will share that information early next week.

**Will telemedicine services for Medicaid for behavioral health be reimbursed?**

Yes, telemedicine services delivered with audio/video technology or store and forward (sharing electronic records) are billable for approved Medicaid services. This is currently available for established patients receiving services under the SERI Guide, but behavioral health intakes are currently are not billable as telemedicine services. We are awaiting HCA guidance on this.

The current version of the HCA Physician Billing Guide indicates the rules for telehealth/telemedicine billing, starting on page 85. This includes definitions, allowable locations for clients and required code modifiers.
Will telemedicine services for Medicaid for physical health be reimbursed?

Yes, telemedicine services delivered with audio/video technology or store and forward (sharing electronic records) are billable for approved Medicaid services. The current version of the HCA Physician Billing Guide indicates the rules for telehealth/telemedicine billing, starting on page 85. This includes definitions, allowable locations for clients and required code modifiers. Note that services can be delivered in a patient’s home or any location determined appropriate by the individual receiving service.

Does telemedicine require prior authorization?

Telemedicine alone does not require prior authorization. However, services that do require a prior authorization would continue to do so. Refer to the list of prior authorizations on the CHPW website.

Does CHPW require additional credentialing or privileging for delivering care via telemedicine?

It may, depending on the provider. If your organization is utilizing providers external to your organization to deliver telemedicine services this will require additional credentialing and privileging to be reimbursable. For internal providers to your organization, please reference your internal processes and procedures or contact credentialing@chpw.org.

Will my malpractice insurance cover telemedicine?

Providers should check to make sure that it is included, especially if delivering care in the home is new to the organization.

Do providers need additional training for delivering care via telemedicine?

Training is not required to report to CHPW, but you may develop internal procedures to ensure consistency in delivering care in this modality. You might also consider a formal approval process that requires this training before delivering services to support the billing process, like documentation standards and care delivery expectations.

Can a physical exam be provided over telemedicine?

Yes, some levels of physical exam can be delivered via telemedicine without special technology including visual exam, temperature taken by patient, blood pressure, blood sugar or other measures that can be provided by the patient in their home. This can be combined with history, assessment and plan to complete a billable visit.
Do I need special documentation for visit delivered by telemedicine?
Yes, since the patient is receiving care remotely and you will be billing for a remote encounter, you need to identify the visit as such. You may do this by using a simple phrase at the end of your documentation that should include the location of the patient and provider and anyone else present during the encounter. Other documentation of the encounter should be similar to a regular face-to-face encounter.

What technology can be used to deliver telemedicine?
There are many HIPAA-compliant platforms available with the capacity to deliver care with audio/video care technology. Some examples are Zoom for Healthcare, Skype for Business, Clocktree and doxy.me. Providers delivering telemedicine services are still responsible for compliance with applicable Privacy and Security Rules (i.e., HIPAA).

Are there additional Telemedicine Resources?
The following are reputable organizations in telehealth that have a variety of resources for operational implementation:

- **Northwest Regional Telehealth Resource Center**
- **Washington State Telehealth Collaborative** – contains resources for implementing telehealth
  - [Telehealth Tools](#)
  - [FAQs about Telehealth: A Clinician’s Guide](#)
  - [FAQs about Telehealth: A Patient’s Guide](#)
- **National Telehealth Technology Assessment Resource Center**
- **CMS Telehealth Services Guide** – note that this is the standard guide, not incorporating COVID-19 exceptions
- **Center for Telehealth & e-Health Law**