

Member FAQs: COVID-19

Beacon Health Options is strongly committed to our members, clients and providers to ensure that behavioral health needs are being met during this unprecedented and stressful time. Today's national public health emergency has no manual or guide. In fact, what we know has been changing hour-by-hour and day-by-day.

We recognize that many of our members are being encouraged or mandated to stay at home to prevent community spread of coronavirus. Telehealth can be an effective way for members to begin or continue their care through a mental health provider from their homes via phone, tablet or computer-enabled web cam. We are encouraging providers in our network, when clinically appropriate, to offer or expand the use of telehealth to provide services to members confidentially and securely.

The policy changes contained in this document are intended to apply to most of our members and plans and offer general guidance only. Not all health plans have adopted the leniencies we describe (especially with respect to certain commercial, Medicaid and employer plans). If you are unsure of coverage or have specific questions about a particular member or plan coverage, please contact the National Provider Service Line at 800-397-1630. Please note that since this is a rapidly evolving situation, any new state and federal mandates will override any guidance we provided below.

We have done our best to provide you with the most recent information, however, since this is an evolving situation, we ask that you check back often for updates and additions to this document.

Q: Is there a copay for telehealth services?

A: During this time of public health emergency, in order to begin or ensure access to care for our members we will waive cost sharing for routine outpatient telehealth services.

Q: Are there restrictions on what type of modality should be used to provide care via telehealth?

A: Beacon is not imposing specific requirements for technologies used to deliver services via phone or telehealth. Please remember that some services are not appropriate for phone only, including ABA, psych testing, IOP and PHP. When clinically appropriate, providers are encouraged to use appropriate technologies to communicate with individuals and should, to the extent feasible, ensure the same rights to confidentiality and security as provided in face-to-face services. We also encourage providers to use HIPAA-complaint telehealth platforms whenever available. The following modalities are acceptable:

- Telephone (including landlines)
- Smartphone
- Tablet
- Laptop
- Computer



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Q: Are there restrictions on when the telehealth program can be used?

A: Appointments with a patient's provider should be coordinated between the patient and provider. Our national telehealth vendor, MDLive, is available 24 hours a day, 7 days a week, and 365 days a year, even on holidays. MDLive may not be available for all clients, please check your plan details or with your HR department).

Q: How can I sign up for telehealth with your national telehealth provider?

- A: Members may sign up and activate an account by using one of the following methods:
 - 1. Visit: MDLive.com
 - 2. Call toll free number: 1-888-632-2738
 - 3. Download the Mobile App, available on the iTunes store and Google Play.

Q: Is there a difference between using a landline vs. cell phone?

- A: Sessions can be conducted via landline and cell phone.
- Q: I am on a limited cell phone plan (pay per minute) and don't have access to the internet.
- A: Your sessions can also be conducted via a landline.

Q: Will I need to go to a certain place to participate in telephonic calls or can I do it from my home or office?

A: You may participate in telehealth from the comfort of your own home, office or any other location. It is recommended that your session be conducted in a private, noise-free location.

CMS made policy changes on a temporary basis under the 1135 waiver authority and Coronavirus Preparedness and Response Supplemental Appropriations Act. Under this new waiver, CMS temporarily removed the "eligible originating site" requirement and 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.

Q: Will this change be a permanent change?

- A: These temporary policy waivers are retroactive to March 6, 2020. The waiver period will end the earlier of when the national emergency order is lifted (in whole or in part) or when Beacon advises of a change.
- Q: Are sessions the same length of time if done via telehealth?
- A: There is no difference in the length of telehealth sessions compared to in-person sessions.

Q: I am hearing-impaired; can I use telehealth?

A: Our national telehealth vendor, MDLive, provides access for hearing-impaired patients. Hearing-impaired patients can communicate with a doctor using the secure, HIPAA-compliant live chat feature. Patients can communicate with their doctor in an environment that works much like texting.

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• To activate this feature, select "hearing-impaired" and any other categories that apply to you from the accommodations menu, and complete the online registration process. The feature is automatically available each time someone logs in by clicking the icon located at the bottom right-hand side of the screen. Currently, live chat is only available via our telehealth vendor's website and not on the app.

Arrangements should be made for those hearing-impaired patients who want to use telehealth through their usual provider.

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