



# New Guidelines to Support New York Providers Delivering Telehealth During the COVID Crisis

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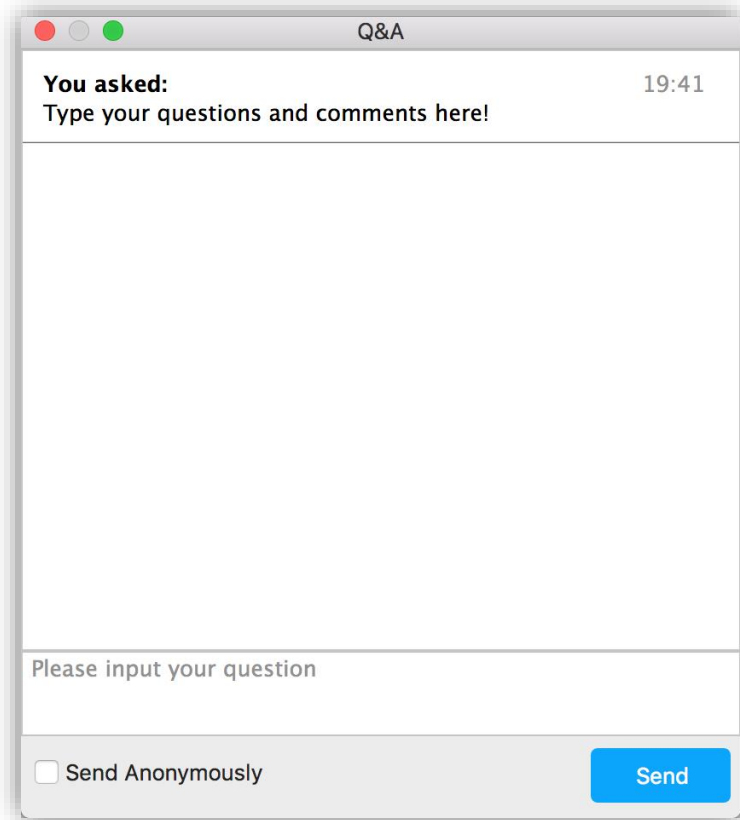
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**May 28, 2020**

# House Keeping Items



Q&A

You asked: 19:41  
Type your questions and comments here!

Please input your question

Send Anonymously Send

1. Today's webinar is 1 hour including Q&A
2. All participants will be muted during the webinar
3. Please use the Q&A function vs. chat. We will monitor questions throughout and answer as many as possible at the end.
4. This webinar is being recorded and will be posted within 24 hours at [www.beaconhealthoptions.com/coronavirus/](http://www.beaconhealthoptions.com/coronavirus/) so you have continued access to the information and resources

# Learning Objectives

Overarching objective is to continue supporting providers as they use telehealth more given COVID-19

1. Ensure you have a clear understanding of NY guidelines on telehealth
2. Provide information on how to bill for telehealth services
3. Hear from you:
  - What are you seeing on-the-ground?
  - How can Beacon support you?

# Beacon has been working with you to facilitate telehealth access; this webinar zeroes in on NY specific information

## Telehealth 101 Training

- National Telehealth 101 on April 8
  - Covered the basics on HOW to deliver telehealth: technology, privacy, sound, camera, etc.
  - You may have participated alongside 369 other NY providers
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## Today

- New York changes during the COVID-19 emergency
- New York billing during COVID- 19 emergency
- Dialogue on NY specific telehealth support needs

Additionally, we are holding a series of Clinical COVID-19 trainings, some of which address telehealth



## Delivering substance use disorder care via telehealth platform

May 27, 3:00 P.M. EST

[REGISTER NOW >>](#)

## Telehealth Documentation 101: Bridging the virtual gap

June 3, 3:00 P.M. EST

[REGISTER NOW >>](#)

## Social determinants of health: Treatment implications

June 17, 3:00 P.M. EST

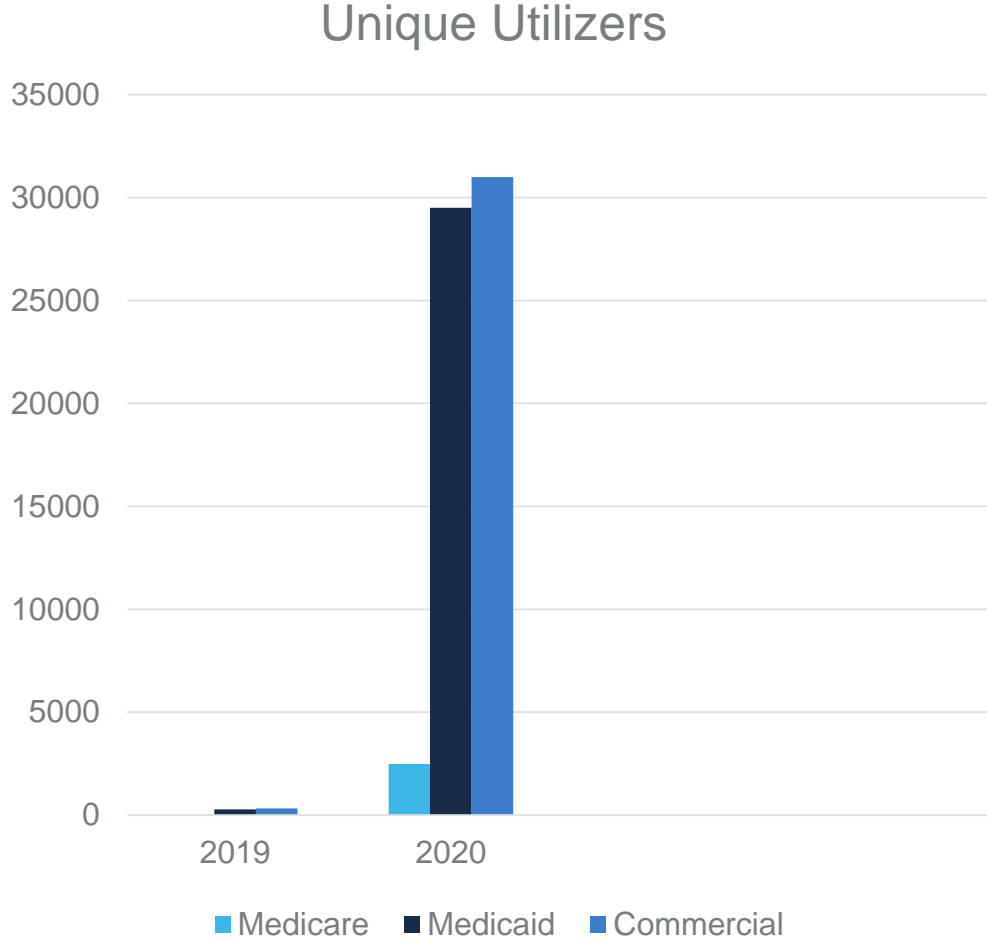
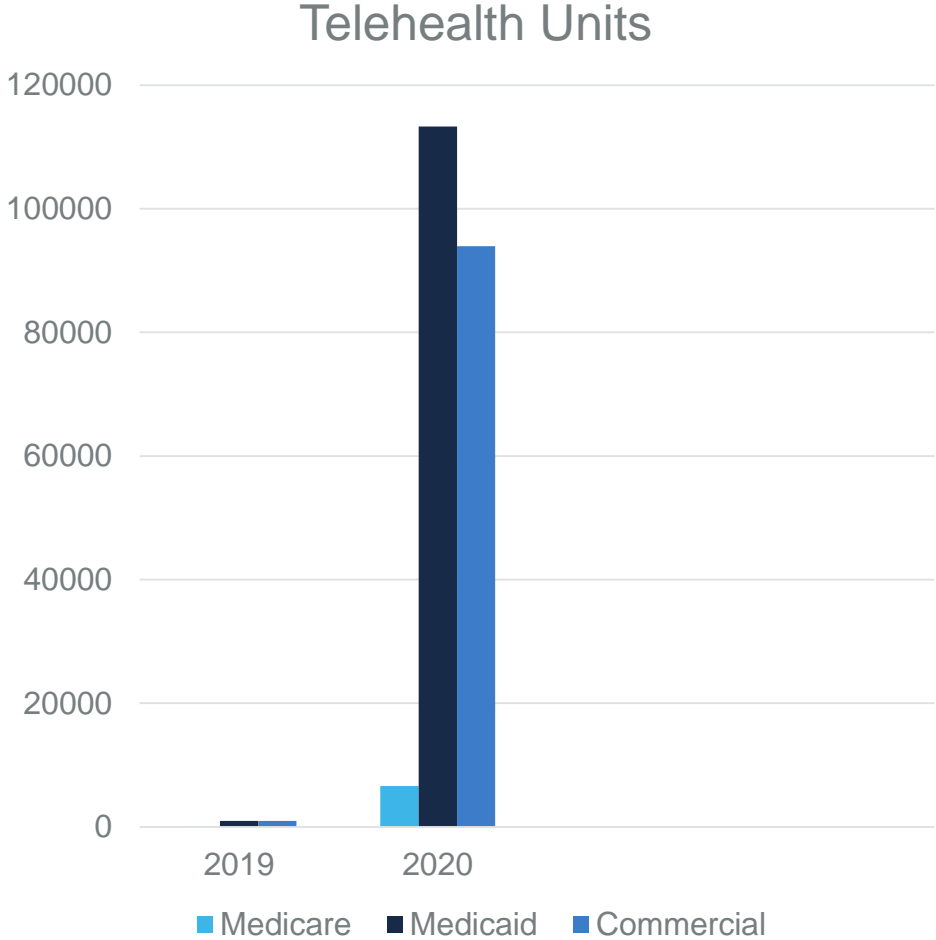
[REGISTER NOW >>](#)

All providers are invited to attend these webinars. Telehealth can be an effective way for members to begin or continue their care from their homes. If you are unable to attend, the recorded webinars and accompanying PowerPoint presentations are posted within the week at [beaconhealthoptions.com/coronavirus](https://beaconhealthoptions.com/coronavirus)

Join us for a webinar!



# You are part of a historical shift in behavioral health; use of telehealth has dramatically expanded in New York during the COVID-19 crisis



# NY Telehealth Regulations

COVID-19 Emergency pushed providers to develop capacity to deliver services via telehealth

Regulatory changes have eased requirements during emergency, to encourage transition to telehealth via:

- Executive Orders
- Department of Financial Service (DFS) Circular Letters
- State Agency (Department of Health, Office of Mental Health, Office of Addiction Supports and Services) Guidance

Based on New York guidance and to aid in initiation or continuity of care:

- Beacon will cover telehealth services including telephonic services as means by which members may access all clinically appropriate, medically necessary covered services;
- When clinically appropriate, we are currently encouraging providers to use technologies to communicate with individuals in a confidential and secure manner.

If you have questions about how a particular service is covered please call:

- Beacon's Provider Service Line at 800-397-1630
- (Monday-Friday, 8 a.m.- 8 p.m. ET)

# NY COVID-19 Related Changes

**3/1/2020**

NYS expands use of **Telehealth** services

**3/15/2020**

NYS expands use of telehealth services to include telephonic modality during Emergency (**DFS Circular Letter 6**)

**4/22/2020**

State expands suspension of UR to include in network, outpatient hospital services (**supplement to DFS Circular Letter 8**)

**3/13/2020**

NYS issues direction to waive cost share for in network, telehealth services (**58<sup>th</sup> Amendment to 11 NYCRR 62**)

**3/20/2020**

State calls for suspension of utilization review (UR) for inpatient hospital services (**DFS Circular Letter 8**)

**5/2/2020**

State waives cost share for all in network, mental health services delivered to Essential Workers (**DFS Circular Letter 10**)

What's New During the Emergency

- Changes in collection of cost-share
- Changes in utilization review
- Expansion in services that can be delivered via telehealth
- Allowance for telephonic delivery of services, where clinically appropriate
- Changes for Medicaid in the minimum time standards to bill for select services
- Changes to help individuals retain health insurance coverage
- New Crisis Response modifier for use with select Medicaid services
- Addition of new reimbursement structure for Opioid Treatment Program (OTP) services for Medicaid



# Department of Financial Services Guidance

Communication	Link	Provider Impact	Current End Date
<b>DFS Circular Letter 6</b>	<a href="#">Insurance Circular Letter No. 6 (2020): Coronavirus and Telehealth Services</a>	<ul style="list-style-type: none"> <li>Providers, where clinically appropriate, may deliver services telephonically.</li> <li>Billing should include modifiers or codes to indicate when service is provided via telehealth</li> </ul>	
<b>Fifty-Eighth Amendment to 11 NYCRR 52.16 (Insurance Regulation 62)</b>	<a href="#">NYS Insurance Regulation 62</a>	<ul style="list-style-type: none"> <li>Requires that providers not collect copays for in-network telehealth services delivered</li> <li>Note Beacon extended this to any services that could be delivered via telehealth so providers should not collect copayments for services delivered via telehealth or that could be delivered via telehealth.</li> <li>If copayments were collected, they should be returned once payment is received</li> </ul>	6/14/2020
<b>DFS Circular Letter 8</b>	<a href="#">Insurance Circular Letter No. 8 (2020): Coronavirus, Utilization Review, and Emergency Admission Notification Requirements</a>	<ul style="list-style-type: none"> <li>Hospitals should make best efforts to provide 48 hours' notice to the insurer after the admission to a hospital, including information necessary for an insurer to assist in coordinating care and discharge planning.</li> </ul>	6/18/2020

# DFS Guidance

Communication	Link	Provider Impact	Current End Date
<b>Supplement to DFS Circular Letter 8</b>	<a href="#">Insurance Circular Letter Supplement No. 1 to CL No. 8 (2020): Coronavirus, Utilization Review Requirements, and Payments to Participating Hospitals</a>	<ul style="list-style-type: none"><li>A hospital should use its reasonable best efforts to provide 48 hours' notice to the insurer after the provision of outpatient services provided at a hospital.</li></ul>	6/18/2020
<b>DFS Circular Letter 10</b>	<a href="#">Insurance Circular Letter No. 10 (2020): Coronavirus and Mental Health Services for Essential Workers</a>	<ul style="list-style-type: none"><li>Requires that providers not collect copays for in-network, outpatient mental health services delivered to Essential Workers.</li><li>Beacon is unable systematically identify Essential Workers so this requirement has been extended.</li><li>Note Beacon previously waived copayments for services that could be delivered via telehealth. We've now waived cost share for remaining in network, outpatient services being delivered face to face.</li></ul>	7/31/2020

# Current NY Telehealth Requirements

## Self Attestation

- OMH and OASAS licensed or designated facilities must complete telehealth self-attestations with the appropriate licensing agency prior to delivering services

## Consent

- During the emergency consent for treatment may be verbal
- Verbal consent from patient/guardian should be documented in medical record

## Confidentiality

- To the extent feasible, ensure the same rights to confidentiality and security as provided in face-to-face services
- Inform members of relevant privacy considerations
- Confidentiality will be maintained as required by NYS Mental Hygiene Law Section 33.13 and 45 CFR Parts 160 and 164 (HIPAA Privacy Rules). (HIPAA confidentiality requirements have been relaxed to permit service delivery via telehealth. Current guidance regarding relaxed HIPAA enforcement standards can be found at <https://www.hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/notification-enforcement-discretion-telehealth/index.html>



I know what you're thinking.....  
Just tell me how to get paid already

# Billing

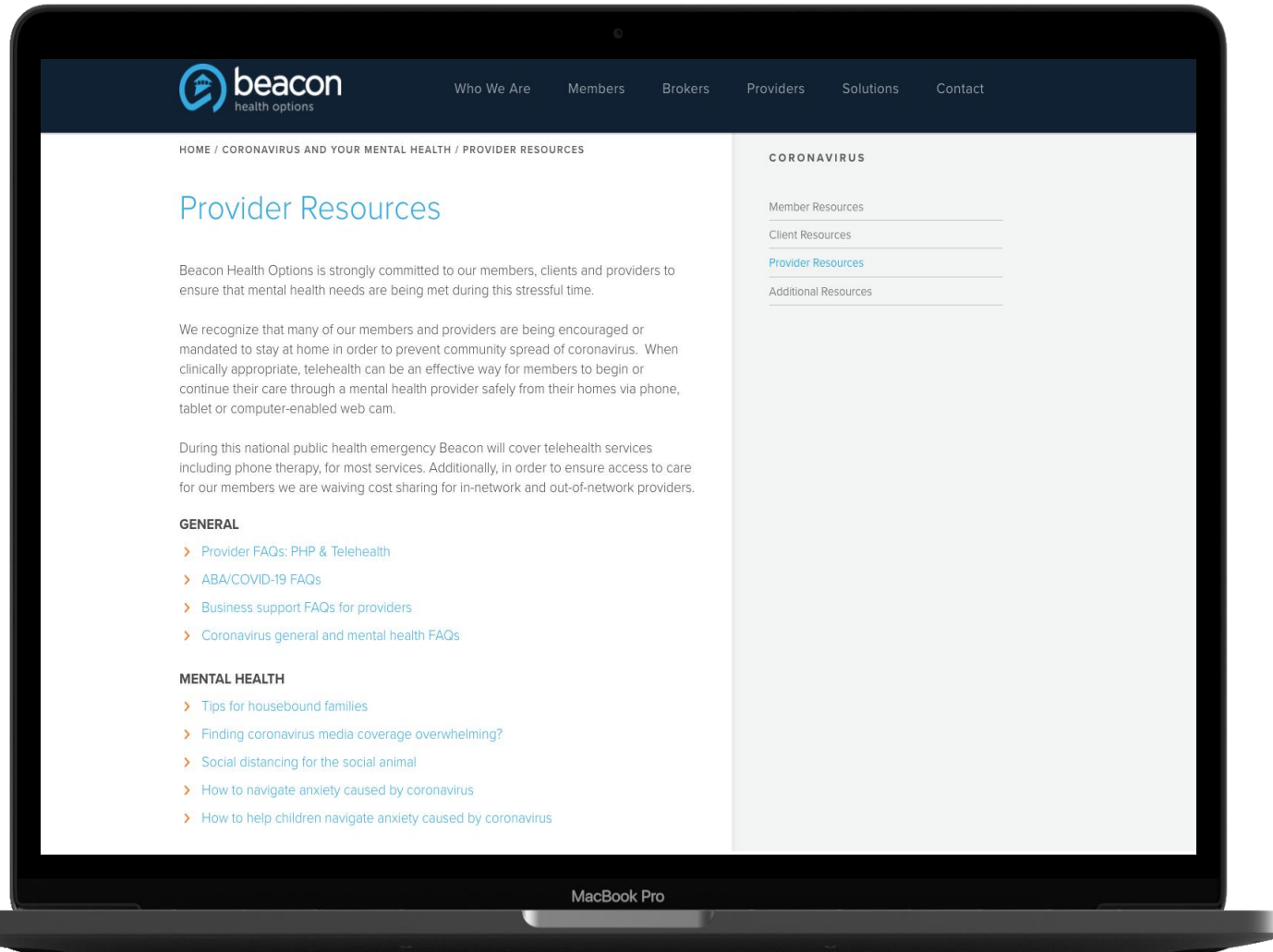
Expectation of services are equivalent to those delivered for an in-office visit

- Submit claims in the same format
- Reimbursement for a telehealth service is same amount as a traditional office visit
- Utilize the appropriate CPT code in concert with the type of service and duration of each visit
- A telehealth indicator, such as a 95 or GT modifier is required when appropriate.
- If billing a telephone-specific code such as 99441, 98966, a modifier is not required.
- A 2-digit place of service code is required on a HCFA 1500 paper or electronic submission (837p).
  - Please note: if you billed with an incorrect place of service code but were paid appropriately, please do not re-bill your claim as the encounter has already been reported to the state.
- A place of service is not documented on a UB 04 or it's 837I equivalent.

# Billing

- New, shorter times allowed for certain CPT codes/services for Medicaid members. See Office of Mental Health (OMH) guidance for OMH clinics, Assertive Community Treatment (ACT), Personalized Recovery Oriented Services (PROS), Adult behavioral health home and community based services (Adult BH HCBS), Continuing Day Treatment (CDT) & Partial Hospitalization
- For Medicaid services where a reduced duration is allowed, the Crisis Response (CR) modifier may be required
- New guidance issued for Medicaid and Medicare OTP services.
  - Billing variation between Medicaid and Medicare. See Medicaid and Medicare guidelines.
  - Medicare – bill on HCFA with POS 58
    - Add-on codes for take home supplies allowed.
  - Medicaid – bill on UB no POS
    - Add-on codes not included for take home supplies using new methodology
    - May bill using existing APG methodology or new rate codes

# Beacon COVID-19 Provider Resources



- **Provider Webinars**
- **National Telehealth FAQ's**
- **New York Telehealth FAQ's**

**All can be found at:**

[Provider Resources | Beacon Health Options](#)

# New York State COVID-19 Resource Pages

Below are links to New York COVID-19 resource pages:

- **NY Office of Mental Health (OMH)**
  - <https://omh.ny.gov/omhweb/guidance/>
- **NY Office of Addiction Services and Supports (OASAS)**
  - <https://oasas.ny.gov/keywords/coronavirus>
- **NY Department of Health (DOH)**
  - [https://www.health.ny.gov/health\\_care/medicaid/covid19/index.htm](https://www.health.ny.gov/health_care/medicaid/covid19/index.htm)
- **NY Department of Financial Services (DFS)**
  - <https://www.dfs.ny.gov/industry/coronavirus>
- **Medicaid Managed Care Technical Assistance Center of New York (MCTAC)**
  - <https://ctacny.org/covid-19-resources>



# Thank you for joining us

- This presentation will be posted at [beaconhealthoptions.com/coronavirus/](https://beaconhealthoptions.com/coronavirus/)
- Please take our short survey at the end of this presentation

## CONTACT US:

- Beacon's NY Provider Services Line 800-397-1630  
(Monday-Friday, 8 a.m.- 8 p.m. ET)