

## COVID-19 TeleHealth Delivery Policy and Procedure Guidance for RI Medicaid

Effective March 18, 2020 and until further notice, Rhode Island will reimburse for clinically appropriate, medically necessary covered services, including behavioral health services to members via TeleHealth. This includes both fee-for-service and managed care. Working with CMS, the state is focused on ensuring that Rhode Islanders' access to critical health care services is not impacted by the widespread disruptions caused by COVID-19.

Temporary steps taken to address the COVID-19 emergency include the use of non-HIPAA compliant videoconferencing. The Office of Civil Rights (OCR), within federal Health and Human Services, stated: *"OCR will exercise its enforcement discretion and will not impose penalties for noncompliance with the regulatory requirements under the HIPAA Rules against covered health care providers in connection with the good faith provision of telehealth during the COVID-19 nationwide public health emergency."*

OCR's notice further stated: *"Covered health care providers may use popular applications that allow for video chats, including Apple FaceTime, Facebook Messenger video chat, Google Hangouts video, or Skype, to provide telehealth without risk that OCR might seek to impose a penalty for noncompliance with the HIPAA Rules related to the good faith provision of telehealth during the COVID-19 nationwide public health emergency. Providers are encouraged to notify patients that these third-party applications potentially introduce privacy risks, and providers should enable all available encryption and privacy modes when using such applications."*

In alignment with OHIC and commercial payers, and in accordance with CMS guidance, EOHHS will also reimburse telephonic (telephone only) services under TeleHealth services. EOHHS encourages providers to use video capabilities as much as possible.

As part of implementation, RI Medicaid has identified specific fee-for-service codes that are prepared to bill under this policy when billed with a place of service '02' TeleHealth. Fee-for-service codes submitted in this fashion will bill at the same rate as in-person codes. Should you have questions or difficulty billing these fee-for service codes, please call the DXC Provider Line at 401-784-8100.

Should you believe that additional fee-for-service codes are medically necessary and clinically appropriate to be delivered via TeleHealth that are not included below, please contact Marti Rosenberg at [Marti.Rosenberg@ohhs.ri.gov](mailto:Marti.Rosenberg@ohhs.ri.gov). Marti will collect requests for review by RI Medicaid.

Pursuant to this policy, all non-essential home visits should be stopped, and contact should be carried out by phone or video conference instead if possible. If codes used for billing are not included below, please email Marti Rosenberg as described above.

Rhode Island Medicaid's Managed Care Organizations; Neighborhood Health Plan of Rhode Island, Tufts Health Plan, and UnitedHealthcare; are working on providing similar TeleHealth options that align with Medicaid and OHIC guidance. Further information will be provided as it

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becomes available. We encourage providers with MCO specific questions to call their provider representatives.

This rule applies to actively participating Medicaid providers as outlined below.

### Medicaid Physicians & Federally Qualified Health Care (FHQC) Providers

The procedure codes listed below will be reimbursable when billed with a place of service '02' TeleHealth, claims should be sent to MMIS in a professional or outpatient claims format only. The codes listed below have a maximum limit of one unit for each date of service

Procedure Code	Description
99201	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: A problem focused history; A problem focused examination; Straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self limited or minor. Typically, 10 minutes are spent face-to-face with the patient and/or family.
99202	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: An expanded problem focused history; An expanded problem focused examination; Straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low to moderate severity. Typically, 20 minutes are spent face-to-face with the patient and/or family.
99203	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: A detailed history; A detailed examination; Medical decision making of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity. Typically, 30 minutes are spent face-to-face with the patient and/or family.
99204	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; Medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 45 minutes are spent face-to-face with the patient and/or family.
99205	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; Medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 60 minutes are spent face-to-face with the patient and/or family.

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99212	Office or other outpatient visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: A problem focused history; A problem focused examination; Straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self limited or minor. Typically, 10 minutes are spent face-to-face with the patient and/or family.
99213	Office or other outpatient visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: A problem focused history; A problem focused examination; Straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self limited or minor. Typically, 15 minutes are spent face-to-face with the patient and/or family.
99214	Office or other outpatient visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: A detailed history; A detailed examination; Medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 25 minutes are spent face-to-face with the patient and/or family.
99215	Office or other outpatient visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: A comprehensive history; A comprehensive examination; Medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 40 minutes are spent face-to-face with the patient and/or family.
X1000	Triage in response to COVID-19 5-10 mins

### HIV Case Management

Procedure Code	Description
X3077	Targeted Case Management for HIV

### Home-Based Therapeutic Services/Applied Behavior Analysis

Procedure Code	Description
H2014 HO	Skills train and dev, 15 min Masters degree or higher
H2014 HP	Skills train and dev, 15 min doctoral degree
T1016	Case management, each 15 minutes
H0046	Mental health service, nos
H0046 HO	Mental health service, nos Masters degree or higher

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H0046 HP	Mental health service, nos Doctoral Degree
T1013	Translation services SIGN LANGUAGE OR ORAL INTERPRETER SERVICES

### Personal Assistance Services and Supports

Procedure Code	Description
T1016	Case management, each 15 minutes
T1027	Family training and counseling for child development, per 15 minutes

### Child and Adolescent Intensive Treatment Services

Procedure Code	Description
H0004	Behavioral health counseling and therapy, per 15 minutes
H2014	Skills train and dev, 15 min

### Early Intervention

Procedure Code	Description
T1027	Family training and counseling for child development, per 15 minutes
T1027 AJ	Family training and counseling for child development, per 15 minutes Clinical Social Worker
T1027 GN	Family training and counseling for child development, per 15 minutes, services delivered under an outpatient speech-lang
T1027 GP	Family training and counseling for child development, per 15 minutes; service delivered personally by a physical therapist
T1027 HP	Family training and counseling for child development, per 15 minutes; doctoral level
T1027 TG	Family training and counseling for child development, per 15 minutes; complex / high tech level of care
T1027 TG HO	Family training and counseling for child development, per 15 minutes; complex/high tech level of care/masters degree level
T1027 GO	Family training and counseling for child development, per 15 minutes; service delivered personally by an occupational
T1027 HN	Family training and counseling for child development, per 15 minutes; bachelor's degree level
T1027 TD	Family training and counseling for child development, per 15 minutes; rn
T1027 AE	Family training and counseling for child development, per 15 minutes; nutritionist dietitian

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### First Connections

Procedure Code	Description
P009	Newborn affected by unspecified maternal condition; 0-6 Months
R6250	Unspecified lack of expected normal physiological development; 6 months – 3 years
99502	Home visit newborn care and assessment; Paraprofessional
99502 TD	Home visit newborn care and assessment; Nurse
99502 AJ	Home visit newborn care and assessment; Social Worker

### Developmental Disabilities

Procedure Code	Description
T2017	Habilitation, residential, waiver; 15 minutes

## RI Medicaid FFS Behavioral and Mental Health Services

The procedure codes and procedure/modifiers listed below will be reimbursable at their existing in-home or in-office-setting rates when billed with place of service '02', Telehealth. All code unit-of-service limits remain unchanged and claims should continue to be billed in their customary format.

### Physician

Procedure Code	Description
90792	Psychiatric diagnostic interview examination including history, mental status, or disposition
90846	Family psychotherapy (without the patient present)
90847	Family psychotherapy (conjoint psychotherapy) (with patient present)
90853	Group psychotherapy (other than of a multiple family group)
X1000	Triage in response to COVID-19 5-10 mins

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### Registered Nurse

Procedure Code	Description
90791 TD	Psychiatric diagnostic evaluation without medical services
99211 TD	Office or other outpatient visit for the evaluation and management of established patient

### Certified Ph.D. Psychologist

Procedure Code	Description
90791 HP	Psychiatric diagnostic evaluation without medical services
90832 HP	Psychotherapy, 30 minutes with patient and/or family member
90834 HP	Psychotherapy, 45 minutes with patient and/or family member
90837 HP	Psychotherapy, 60 minutes with patient and/or family member
90846 HP	Family psychotherapy (without the patient present)
90847 HP	Family psychotherapy (conjoint psychotherapy) (with patient present)

### MSW Social Worker; Principal Occupational Therapist; Principal Rehabilitation Counselor

Procedure Code	Description
90791 AJ	Psychiatric diagnostic evaluation without medical services
90832 AJ	Psychotherapy, 30 minutes with patient and/or family member
90834 AJ	Psychotherapy, 45 minutes with patient and/or family member
90837 AJ	Psychotherapy, 60 minutes with patient and/or family member
90846 AJ	Family psychotherapy (without the patient present)
90847 AJ	Family psychotherapy (conjoint psychotherapy) (with patient present)

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### Marriage and Family Therapist

Procedure Code	Description
90791 HO	Psychiatric diagnostic evaluation without medical services
90832 HO	Psychotherapy, 30 minutes with patient and/or family member
90834 HO	Psychotherapy, 45 minutes with patient and/or family member
90837 HO	Psychotherapy, 60 minutes with patient and/or family member
90846 HO	Family psychotherapy (without the patient present)
90847 HO	Family psychotherapy (conjoint psychotherapy) (with patient present)

### Mental Health Counselor

Procedure Code	Description
90791 HO	Mental health assessment by non-physician, 90 minutes
90832 HO	Psychotherapy, 30 minutes with patient and/or family member
90834 HO	Psychotherapy, 45 minutes with patient and/or family member
90837 HO	Psychotherapy, 60 minutes with patient and/or family member
90846 HO	Family psychotherapy (without the patient present)
90847 HO	Family psychotherapy (conjoint psychotherapy) (with patient present)

### Principal Counselor

Procedure Code	Description
90791 UA	Psychiatric diagnostic evaluation without medical services
90832 UA	Psychotherapy, 30 minutes with patient and/or family member
90834 UA	Psychotherapy, 45 minutes with patient and/or family member
90837 UA	Psychotherapy, 60 minutes with patient and/or family member

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90846 UA	Family psychotherapy (without the patient present)
90847 UA	Family psychotherapy (conjoint psychotherapy) (with patient present)

### Counselor

Procedure Code	Description
90791 UA	Psychiatric diagnostic evaluation without medical services
90832 UA	Psychotherapy, 30 minutes with patient and/or family member
90834 UA	Psychotherapy, 45 minutes with patient and/or family member
90837 UA	Psychotherapy, 60 minutes with patient and/or family member
90846 UA	Family psychotherapy (without the patient present)
90847 UA	Family psychotherapy (conjoint psychotherapy) (with patient present)

### Child Mental Health Physician

Procedure Code	Description
90791	Psychiatric diagnostic interview examination including history, mental status, or disposition
90837	Psychotherapy, office/outpatient facility, 60 minutes face to face with the patient
90834	Psychotherapy, 45 minutes with patient and/or family member
90832	Psychotherapy, 30 minutes with patient and/or family member
H2010	Comprehensive medication services, per 15 minutes

### Child Mental Health Psychologist

Procedure Code	Description
90791 HP	Psychiatric diagnostic interview examination including history, mental status, or disposition
90837 HP	Psychotherapy office/outpatient facility, 60 minutes face to face with the patient



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90834 HP	Psychotherapy 45 minutes with patient and/or family member
90832 HP	Psychotherapy 30 minutes with patient and/or family member

### Child Mental Health Social Worker

Procedure Code	Description
H0031 AJ	Mental health assessment by non-physician
H0004 AJ	Behavioral health counseling and therapy, per 15 minutes
H0004 HQ AJ	Group behavioral health counseling and therapy, per 15 minutes
H0004 HO HR	Behavioral health counseling and therapy, per 15 minutes with patient present
H0004 HO HS	Behavioral health counseling and therapy, per 15 minutes without patient present

### Peer Recovery

Procedure Code	Description
H0038 U2	Self-help/peer services, per 15 minutes
H0038 U3	Self-help/peer services, per 15 minutes

### Centers of Excellence

Procedure Code	Description
H0025	Behavioral Health prevention education service (delivery of services with target population to affect knowledge, attitude and/or behavior)

### Substance Abuse

Procedure Code	Description
H0001	Alcohol and/or Drug assessment, 60 – 90 minutes
H0004	Behavioral health counseling and therapy, per 15 minutes
H0020	Alcohol and/or drug services; methadone administration and/or service 1 unit/week
H0020 U1	Alcohol and/or drug services; methadone administration and/or service 1 unit/week

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### Licensed Chemical Dependency Professional

Procedure Code	Description
90791 HF	Psychiatric diagnostic evaluation without medical services
90832 HF	Psychotherapy, 30 minutes with patient and/or family member
90834 HF	Psychotherapy, 45 minutes with patient and/or family member
90837 HF	Psychotherapy, 60 minutes with patient and/or family member
90846 HF	Family psychotherapy (without the patient present)
90847 HF	Family psychotherapy (conjoint psychotherapy) (with patient present)

### Coordinated Care Services

Procedure Code	Description
H2011 U1	Crisis intervention service, per 15 minutes
H0037	Community psychiatric supportive treatment program, per diem
H0040	Assertive community treatment program, per diem
X1000	Triage in response to COVID-19 5-10 mins

### Psychiatrist

Procedure Code	Description
90792	Psychiatric diagnostic evaluation with medical services
90846	Family psychotherapy (without the patient present)
90847	Family psychotherapy (conjoint psychotherapy) (with patient present)
99212	Office or other outpatient visit for the evaluation and management of an established patient
99213	Office or other outpatient visit for the evaluation and management of an established patient
99214	Office or other outpatient visit for the evaluation and management of an established patient

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99215	Office or other outpatient visit for the evaluation and management of an established patient
90833	Psychotherapy, 30 minutes with patient &/or family member when performed with an evaluation and management service
90838	Psychotherapy, 60 minutes with patient &/or family member when performed with an evaluation and management service

### Psychiatric Clinical Nurse Specialist

Procedure Code	Description
90792 TD TF	Psychiatric diagnostic evaluation with medical services
90846 TD TF	Family psychotherapy (without the patient present)
90847 TD TF	Family psychotherapy (conjoint psychotherapy) (with patient present)
99212 TD TF	Office or other outpatient visit for the evaluation and management of an established patient
99213 TD TF	Office or other outpatient visit for the evaluation and management of an established patient
99214 TD TF	Office or other outpatient visit for the evaluation and management of an established patient
99215 TD TF	Office or other outpatient visit for the evaluation and management of an established patient
90833 TD TF	Psychotherapy, 30 minutes with patient &/or family member when performed with an evaluation and management service
90838 TD TF	Psychotherapy, 60 minutes with patient &/or family member when performed with an evaluation and management service