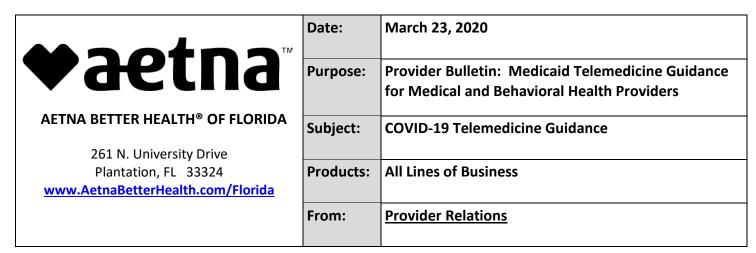
PROVIDER BULLETIN



Dear Providers,

In a recent Policy Transmittal, the Agency for Health Care Administration (AHCA) provided telemedicine guidance to assist with the response efforts to the COVID-19 state of emergency. The policy transmittal outlined AHCA's policy and code sets for telemedicine in the fee-for service delivery system and offered Medicaid plans broad flexibility for the coverage of telemedicine during the state of emergency.

To better serve our members and providers and prevent community spread of COVID-19, Aetna Better Health of Florida (ABHFL) will adopt AHCA's telemedicine waivers/flexibilities and CPT/HCSPCS code sets for the duration of the state of emergency.

Who can provide telemedicine?

- Practitioners, including MDs, DOs, and physician extenders (physician assistants and advanced practice nurses)
- Clinic providers (county health departments, rural health clinics, and federally qualified health clinics)
- Behavioral Health providers
 - o Behavioral health providers should contact ABHFL's behavioral health subcontractor, Beacon Health Solutions at (844) 513-4954 for coverage and billing guidelines.

What services can be provided via telemedicine?

Covered medical services include evaluation, diagnostic, and treatment recommendations for services included on the Agency's <u>practitioner fee schedule</u> to the extent telemedicine is designated in the American Medical Association's Current Procedural Terminology (i.e., national coding standards). All service components included in the procedure code must be completed in order to be reimbursed.

ABHFL reimburses services using telemedicine at the same rate detailed on AHCA's practitioner fee schedule or contracted percentage thereof. Providers must append the GT modifier to the procedure code in the fee-for-service delivery system.



Behavioral health providers should contact ABHFL's behavioral health subcontractor, Beacon Health Solutions at (844) 513-4954 for coverage and billing guidelines.

How should providers bill for telemedicine services?

Live, Two-way Communication

During the state of emergency, ABHFL will continue to cover telemedicine services provided through live, two-way communication, as medically necessary. These services must be billed with modifier GT. ABHFL reimburses these services at the same rate detailed for procedure code in the provider contract or Medicaid fee schedule, as applicable.

Store-and-Forward & Remote Patient Monitoring

For certain <u>evaluation and management services</u> provided during the state of emergency period, ABHFL is expanding telehealth to include store-and-forward and remote patient monitoring modalities rendered by **licensed physicians and physician extenders (including those operating within a clinic)** functioning within their scope of practice. ABHFL will reimburse each service once per day per recipient, as medically necessary, at the rates detailed in the table below or the contracted percentage thereof.

Service	Procedure Code	Modifier Required	Medicaid Reimbursement Rate	
			Maximum Fee*	Maximum Facility Fee**
Store-and-forward	G2010	CR	\$7.69	\$5.66
Telephone Communications - Existing Patients	99441	CR	\$9.05	\$8.05
	99442	CR	\$17.65	\$16.10
	99443	CR	\$25.80	\$23.94
Telephone Communications - New Patients	99441 CG	CR	\$9.05	\$8.05
	99442 CG	CR	\$17.65	\$16.10
	99443 CG	CR	\$25.80	\$23.94
Remote patient monitoring	99453	CR	\$11.77	N/A
	99454	CR	\$39.15	N/A
	99091	CR	\$37.12	N/A
	99473	CR	\$7.02	N/A
	99474	CR	\$9.51	\$5.44
	99457	CR	\$32.36	\$19.80
	99458	CR	\$26.48	\$19.80



*On the AHCA practitioner fee schedule, this represents the fee schedule increase rate, which is the base Florida Medicaid rate with a 4% increase included for all ages.

**The facility fee is the reimbursement rate for a practitioner performing services in one of the following places of service: outpatient hospital-off campus (19), inpatient hospital (21), outpatient hospital-on campus (22), emergency room hospital (23), or ambulatory surgical center (24), according to Medicare's designation.

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Are there specific requirements that must be met?

Providers must comply with the following requirements

- Ensure treatment services are medically necessary and performed in accordance with AHCA's
 corresponding and promulgated <u>policies</u> and <u>fee schedules</u>. For new procedure codes temporarily
 covered during the state of emergency, services must be performed in accordance with the
 American Medical Association's Current Procedural Terminology procedure code definitions and
 guidance.
- Comply with HIPAA regulations related to telehealth communications.
 - See additional guidance provided by the Office of Civil Rights on March 17, 2020 during the state of emergency available at: https://www.hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/notification-enforcement-discretion-telehealth/index.html
- Supervision requirements within a provider's scope of practice continue to apply for services provided through telehealth.
- Documentation regarding the use of telehealth must be included in the medical record or progress notes for each encounter with a recipient.
- The patient and parent or guardian, as applicable, must be present for the duration of the service provided using telehealth except when using store and forward modalities.
- Out-of-state practitioners who are not licensed in Florida may provide telemedicine services to Florida Medicaid recipients, when appropriate, during the state of emergency in accordance with the Department of Health's emergency order (DOH 20 002).
 - These providers must go through the provisional enrollment process, if they are not already enrolled in Florida Medicaid. More information about the provisional enrollment process will be available on March 19, 2020 at http://www.mymedicaid-florida.com.

Additional information about COVID-19 topics, including telemedicine, can be found on AHCA's COVID-19 dedicated alerts webpage: https://ahca.myflorida.com/covid-19 alerts.shtml



We appreciate the excellent care you provide to our members. If you have any questions please feel free to contact us via e-mail: FLMedicaidProviderRelations@Aetna.com. You can also fax us at 1-844-235-1340 or call us through our Provider Relations telephone line: 1-844-528-5815.

Thank you,

Provider Relations Department

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