

## A PROVIDER'S GUIDE:

### Telehealth Reimbursement Coverage in Maine During COVID-19

Rapid developments with the COVID-19 pandemic have resulted in a set of broad expansions of telehealth policy, including key changes to both public and private payer payment policies, at least for the duration of this emergency period. These changes include CMS waivers dramatically broadening Medicare telehealth payment policies under [HR 6074](#), and [HR 748](#); federal action to waive HIPAA sanctions; and a series of [emergency rule](#) changes and orders by the State of Maine that remove MaineCare and commercial payer restrictions on telehealth services and promote sustained access to healthcare services via telehealth for individuals in Maine during this unprecedented pandemic.

This guide is meant to help healthcare providers and organizations get up to speed quickly on these changes and key components of telehealth payment in Maine. Please keep in mind that events and policies are changing rapidly, and that this document will be updated frequently as new information and policies become available/are enacted. The table below synthesizes where policies currently stand for Medicare fee-for-service, MaineCare, and commercial carriers in Maine.

| Key Policy Considerations   | Medicare                               | MaineCare (Medicaid)                            | Private Payers                                  |
|---|--|---|---|
| <b>NO geographic limitations for telehealth services</b> (e.g. service <i>not</i> limited to rural or non-Metropolitan Svc Area (MSA) location) | Yes                                    | Yes   | Yes   |
| <b>Out of state providers allowed</b>   | Yes<br>( <a href="#">1135 waiver</a> ) | Yes<br>( <a href="#">Executive Order 3/20</a> ) | Yes<br>( <a href="#">Executive Order 3/20</a> ) |
| <b>Patient home is eligible “originating site”</b> (i.e. patient site)  | Yes                                    | Yes   | Yes   |
| <b>Other non-healthcare facilities</b> (e.g. schools, worksites, libraries, etc.) <b>are eligible originating/patient sites</b>                 | Yes                                    | Yes   | Yes   |
| <b>Originating/patient sites</b> (other than patient’s home) <b>can bill facility fee</b>   | Rural: Yes<br>Urban/MSA/<br>home: No   | Yes   | No  |
| <b>Prior existing relationship with patient NOT required</b>  | No<br>(HHS will not conduct audits)    | Yes   | Yes   |

This resource was developed in collaboration with the Center for Connected Health Policy (CCHP), and was made possible by grant number G22RH30352 from the Office for the Advancement of Telehealth, Health Resources and Services Administration, DHHS.

| Key Policy Considerations  | Medicare   | MaineCare (Medicaid)   | Private Payers   |
|--|--|--|--|
| <b>Any provider type eligible to use telehealth, as long as practicing within scope</b> (e.g. MD, DO, PA, NP, APRN, PT, OT, LCSW, RD/LD, Genetic Counselors, etc.)   | <b>No</b><br>( <a href="#">Eligible Providers only</a> ) | <b>Yes</b>   | <b>Yes</b>   |
| <b>DEA-registered practitioners may issue prescriptions for controlled substances without requiring in-person medical evaluation</b>   | <b>Yes</b><br>( <a href="#">See conditions</a> )         | <b>Yes</b>   | <b>Yes</b>   |
| <b>Any eligible member service can be provided via telehealth when medically necessary and appropriate</b>   | <b>No</b><br>( <a href="#">Eligible Services only</a> )  | <b>Yes</b>   | <b>Yes</b>   |
| <b>Patient co-pays and out-of-pocket still apply unless waived by the payer/plan</b>   | <b>Yes</b>   | <b>Yes</b>   | <b>Yes</b>   |
| <b>Prior authorization NOT required for telehealth services, unless in-person service also requires prior authorization</b>  | <b>Yes</b>   | <b>Yes</b>   | <b>Yes</b>   |
| <b>Providers can use all telehealth modalities to deliver services</b> (live video, store-and-forward, remote patient monitoring)  | <b>No</b>  | <b>Yes</b>   | <b>Yes</b>   |
| <b>Providers paid for telephone/audio only visits</b> (for Medicare, see <a href="#">AMA Coding Advice during COVID—19 Public Health Emergency; ACP Summary of Interim Final Rule</a> )  | <b>Yes</b><br>(limited codes only)                       | <b>Yes</b>   | <b>Yes</b><br>( <a href="#">BOI emergency order</a> )                                      |
| <b>Providers can deliver services via technology-based communications that are not typically considered telehealth –</b> i.e. virtual check-ins, interprofessional internet consultations (eConsults), remote monitoring services (CCM, Complex CCM, TCM, Remote PM, PCM), online digital evals (see <a href="#">CCHP Telehealth Policies</a> for specific codes and criteria) | <b>Yes</b>   | <b>Yes</b><br>(eConsults, remote monitoring, targeted case management, per emergency enactment of <a href="#">LD1974</a> on 3/18/2020) | <b>Yes</b><br>(eConsults - per emergency enactment of <a href="#">LD1974</a> on 3/18/2020) |

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| Key Policy Considerations  | Medicare   | MaineCare (Medicaid) | Private Payers              |
|--|--|----------------------|-----------------------------|
| Patient consent is required, however verbal consent is acceptable (i.e. written consent not required)  | Yes  | Yes*                 | Yes                         |
| Non-HIPAA compliant technology solutions are acceptable to use for telehealth visits (e.g. Skype, FaceTime) – see <a href="#">OCR guidance</a> for additional detail | Yes  | Yes                  | Yes                         |
| Personal devices, such as smartphones and tablets may be used to deliver telehealth services   | Yes  | Yes                  | Yes                         |
| Modifiers to be used for telehealth services:  | Regular POS + 95<br>Or POS 02  | GT                   | 95 or GT<br>(check w/payer) |
| Special Considerations for FQHCs and RHCs  |  |                      |                             |
| Federally Qualified Health Centers (FQHCs) and Rural Health Centers (RHCs) may serve as “distant” telehealth sites (i.e. provider location sites)                    | Yes<br><i>(Waiting for explicit guidance on billing)</i>   | Yes                  | Yes                         |
| FQHCs and RHCs can utilize some technology-based communications, per 2019 Medicare expansion   | Virtual Check-in: FQHCs/RHCs use G0071 (FFS rate) for initial and f/u<br>Remote Monitoring Services: Chronic Care Management (CCM); Transitional Care Management (TCM)<br>Online digital E/M codes for an established patient (99421-99423) See <a href="#">rule</a> |                      |                             |

\*Written consent is still required for treatment plans under MaineCare Sections 17, 28 and 65

### Telehealth Policy Resources:

|  |   |
|--|---|
| <a href="#">Medicare Learning Network Booklet – Telehealth Services (2020)</a>                                   | <a href="#">Telehealth Coverage Policies in the Time of COVID-19 – Center for Connected Health Policy</a> |
| <a href="#">Medicare Telemedicine Health Care Provider Fact Sheet - CMS</a>                                      | <a href="#">Billing for Telehealth Encounters: An Introductory Guide to Fee-for-Service – CCHP</a>        |
| <a href="#">Waivers &amp; flexibilities for Health Care Providers - CMS</a>                                      | <a href="#">MaineCare Rules – Chapter 1: Section 4 - Telehealth (Emergency Rule 3/16/2020)</a>            |
| <a href="#">Medicare IFC: Revisions in Response to the COVID-19 Public Health Emergency (CMS-1744-IFC) - CMS</a> | <a href="#">Provider Enrollment Relief Frequently Asked Questions - CMS</a>                               |
| <a href="#">DEA COVID-19 Information Page</a>  | <a href="#">MaineCare Telehealth and COVID-19 Fact Sheet</a>  |

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### Telehealth Training and Other Relevant Resources:

- [Telehealth Coordinator eTraining](#) – California TRC and Northeast TRC
- [Tips for Professional Videoconferencing and Telepresenting](#)
- [A Physicians Guide to COVID-19](#) – American Medical Association
- [Special Coding Advice During COVID-19 Public Health Emergency](#) – American Medical Association
- [Summary of Interim Final Rule of CARES Act](#) - ACP
- [Telehealth and COVID-19 Toolkit](#) – National Consortium of Telehealth Resource Centers
- [Roadmap for Implementing Primary Care and Behavioral Telehealth Services during the COVID-19 Pandemic](#) – Northeast TRC
- [Telehealth Resource Webliography for COVID-19 Pandemic](#) – Northeast TRC
- [MATRC Telehealth Resources for COVID-19](#) – Mid-Atlantic TRC

Questions? Contact the Northeast Telehealth Resource Center:

Email: [netrc@mcd.org](mailto:netrc@mcd.org) or via our website: <https://netrc.org/contact.php>

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