

## 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. And in June, 2020, [updated MaineCare Telehealth Rules](#) were enacted, making many of these expansions permanent.

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 we are continuing to see policy changes at Federal and State levels, and that this document will be updated 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 Service Area (MSA) location)	Yes	Yes	Yes
<b>Out of state providers allowed</b>	Yes ( <a href="#">1135 waiver</a> )	Yes ( <a href="#">Executive Order 3/20</a> )	Yes ( <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 Urban/MSA/ home: No	Yes	No
<b>Prior existing relationship with patient NOT required</b>	Yes	Yes	Yes

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<b>Any provider type eligible to use telehealth, as long as practicing within scope</b> (e.g. MD, DO, PA, NP, APRN, PT, OT, SLP, LCSW, RD/LD, GCs, etc.)	<b>Yes</b> ( <a href="#">Any Medicare Provider Eligible to Bill</a> )	<b>Yes</b> ( <a href="#">Executive Order #35</a> )	<b>Yes</b>
<b>DEA-registered practitioners may issue prescriptions for controlled substances without requiring in-person medical evaluation</b>	<b>Yes</b> ( <a href="#">See conditions DEA: How to Prescribe Controlled Substances During COVID-19</a> )	<b>Yes</b> ( <a href="#">MaineCare TH Rules June, 2020</a> )	<b>Yes</b>
<b>Any eligible member service can be provided via telehealth when medically necessary and appropriate</b>	<b>No</b> ( <a href="#">Eligible Services only, but significantly expanded</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>Telehealth claims are paid at the same rate as in-person visits (payment parity)</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> ( <a href="#">MaineCare TH Rules June, 2020</a> )	<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> ) (For MaineCare: note difference between Telephonic Services (Telehealth, audio-only) and Telephone E/M)	<b>Yes</b> (See <a href="#">Medicare TH Services list</a> )	<b>Yes</b> ( <a href="#">MaineCare TH Rules June, 2020</a> )	<b>Yes</b> ( <a href="#">BOI emergency order</a> )

\* Store-and-forward provisions effective pending CMS approval of June, 2020 request

Key Policy Considerations	Medicare	MaineCare (Medicaid)	Private Payers
<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> (Virtual check-ins, remote consultations, eConsults, remote monitoring, targeted case management <a href="#">MaineCare TH Rules June, 2020</a> )	<b>Yes</b> (eConsults - per emergency enactment of <a href="#">LD1974</a> on 3/18/2020)
<b>Patient consent is required, however verbal consent is acceptable</b> (i.e. written consent not required)	<b>Yes</b>	<b>Yes*</b>	<b>Yes</b>
<b>Non-HIPAA compliant technology solutions are acceptable to use for telehealth visits</b> (e.g. Skype, FaceTime) – see <a href="#">OCR guidance</a> for additional detail	<b>Yes</b>	<b>Yes</b>	<b>Yes</b>
<b>Personal devices, such as smartphones and tablets may be used to deliver telehealth services</b>	<b>Yes</b>	<b>Yes</b>	<b>Yes</b>
<b>Modifiers to be used for telehealth services:</b>	Regular POS + 95 Or POS 02	<b>GT</b>	<b>95 or GT</b> (check w/payer)
<b>Special Considerations for FQHCs and RHCs</b>			
<b>Federally Qualified Health Centers (FQHCs) and Rural Health Centers (RHCs) may serve as “distant” telehealth sites</b> (i.e. provider location sites)	<b>Yes</b> <i>(See <a href="#">MLN SE20016</a> and <a href="#">CMS FAQ for Guidance</a>)</i>	<b>Yes</b>	<b>Yes</b>
<b>FQHCs and RHCs can utilize some technology-based communications, per 2019 Medicare expansion</b>	Virtual Check-ins and eVisits: FQHCs/RHCs use G0071 (FFS rate) for initial and f/u Remote Monitoring Services: Chronic Care Management (CCM); Transitional Care Management (TCM) 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 (Enacted June 15, 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>

## 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
- [NETRC COVID-19 Telehealth Resources](#) webpage – 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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