A photograph of a desk setup. In the foreground, a white coffee cup with a yellow and white geometric pattern sits on a white wooden slatted table. Behind it is an open silver laptop. In front of the laptop is a spiral-bound notebook with a blue pen resting on it. To the right, a small potted plant is visible. The background is a bright window with light streaming in.

Tell Me More about Telehealth

ND Medicaid Webinar & Discussion

May 1, 2023 12:15-1pm

Overview



Telehealth in Medicaid

NORTH
Dakota | Health & Human Services
Be Legendary.



New to Telehealth Policy

NORTH
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Be Legendary.

Other changes



NORTH
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Be Legendary.



Questions?

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Be Legendary.

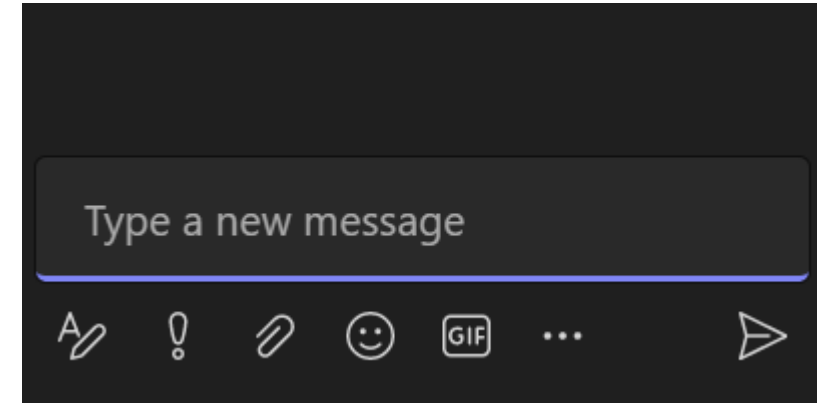
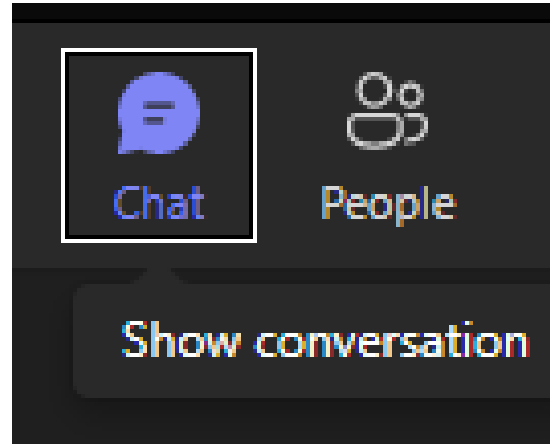
Housekeeping



How to participate in today's webinar



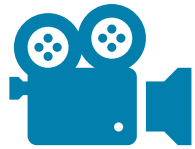
You can ask questions using the Chat feature



The chat icon is featured near the top right-hand side of your screen

Recording & Posting

<https://www.hhs.nd.gov/healthcare/medicaid/provider>



Today's webinar
will be recorded



and posted on
our website



Education and Training

Learn about programs and
processes as a ND Medicaid
provider.

[Learn more >](#)


Your feedback - polls



Please participate in
random polls throughout
today's webinar.
We want to hear from you!

Make sure you are signed up for quarterly **Medicaid Provider newsletters**. Signing up is easy.

Go to the Provider website

 <https://www.hhs.nd.gov/healthcare/medicaid/provider>



Enter your email address

Sign Up for our Medicaid Newsletter

To sign up for updates or to access your subscriber preferences, please enter your contact information below.

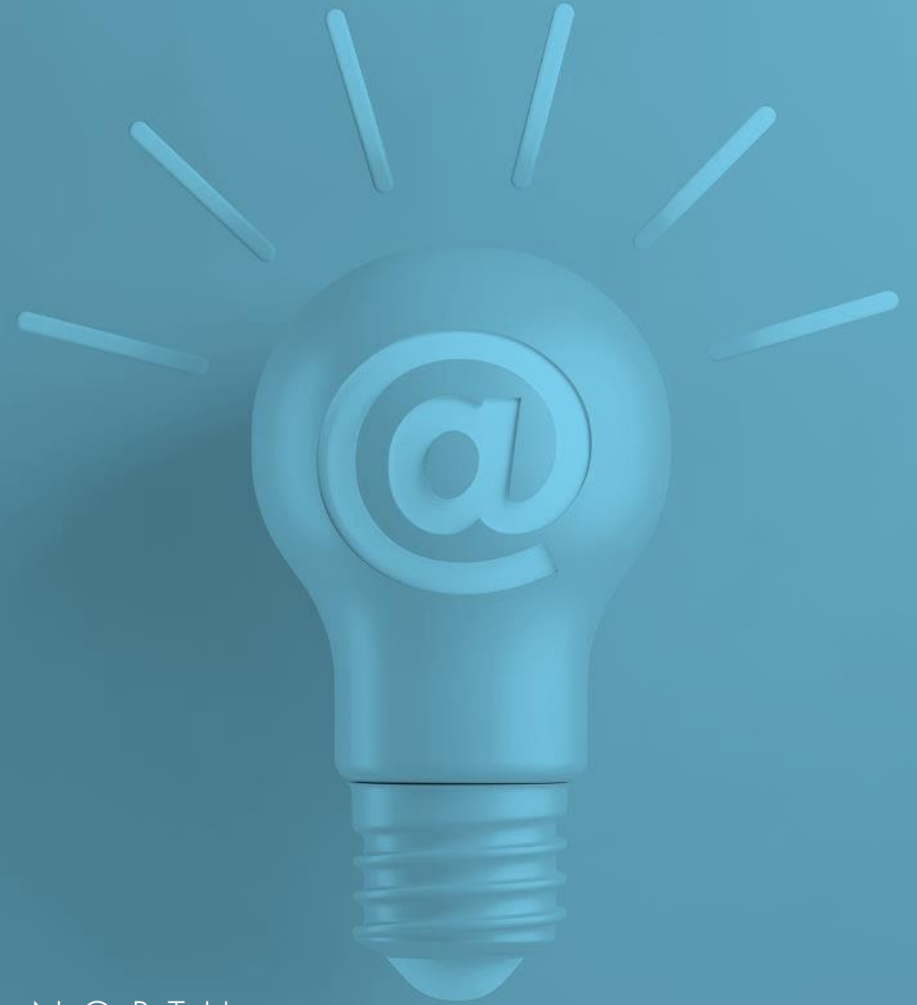
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Click **Submit** and follow directions to set up and **choose** your subscription options.

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Stay in the loop!



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Health & Human Services

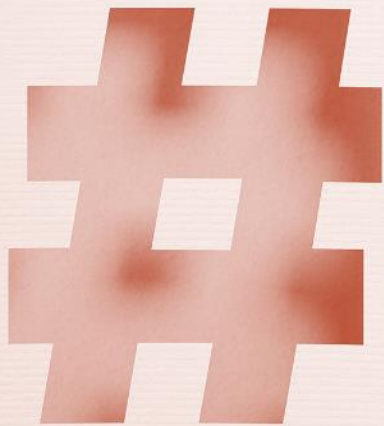
Updated Policy Manuals – May 2023

Updated General Information
for Providers manual

and

Behavioral Health Services
Provider manual now online

Click the hashtag for the Provider webpage
<https://www.hhs.nd.gov/healthcare/medical/provider/manuals-and-guidelines>



Stay Covered ND Resources!

<https://www.hhs.nd.gov/human-services/medicaid/StayCoveredND>




What you need to know about ND Medicaid renewals

And how you can encourage members to take action!

Starting April 1, 2023, ND Medicaid may need to contact members to see if they still qualify for coverage.

What do ND Medicaid members need to know?

ND Medicaid is working to inform members about steps they need to take to stay covered, if they qualify. These include:

-  Ensure contact information is correct.
-  Check the mail.
-  Complete their renewal form (if they get one).

#StayCoveredND

NORTH Dakota | Health & Human Services
Be Legendary.

Here's how you can help:

- 1. Share where and how to update their information.**
 - Contact the Customer Support Center toll-free 866-614-6005, 711 (TTY) or email applyforhelp@nd.gov.
- 2. Offer assistance.**
 - Help them update their contact information, read and understand the letter they may receive in the mail or submit the requested documentation online. (e.g. pay stubs, income tax returns, proof of disability, etc.).
- 3. Share resources.**
 - Encourage conversations about renewals and/or share resources in your community.

If they no longer qualify for ND Medicaid and need help finding a plan on the federal Health Insurance Marketplace, have them contact ND Navigators at ndcpd.org/NDNavigator or 1-800-233-1737.



Learn more or visit [hhs.nd.gov/StayCoveredND](https://www.hhs.nd.gov/StayCoveredND)



Downloadable Resources and Materials

Help us spread the word! More materials are still under development including several flyers, posters and other resources in Spanish and Somali languages. Check back often! To access the materials, click on the + sign.

Community Toolkit	+
Tribal Toolkit	+
Stakeholder Toolkit	+
School Toolkit	+

Frequently Asked Questions

Why are regular Medicaid renewals resuming?	+
What can members do now to prepare?	+
How should members update their contact information?	+
What is the renewal process?	+
What if I lose coverage?	+
What are the other health care coverage options?	+
What else is ND Medicaid doing to communicate with members?	+



Telehealth in Medicaid

Telemedicine



Telehealth

- **Why the change?**

Consistency with the Centers for Medicare and Medicaid (CMS), federal Health and Human Services (HHS), and service billing codes.

Telehealth – the use of telecommunications and information technology to provide access to physical, mental, and behavioral health care across distance.

What kinds of services* can be delivered via telehealth?



*see the published list for specific codes and services

Psychotherapy (Individual and Family)

Vision

Speech & Hearing

Cardiac Rehab

Neuropsych

Physical & Occupational Therapy

Diabetes Management

1915(i) services

Behavioral Services

- Medication Assisted Therapy, Peer Support, Counseling, and more

Telehealth Policy & COVID-19

Medicaid's telehealth policy predates COVID-19.

COVID-19 changed the landscape of telehealth.



Meet the same standard of care as in-person care.

Medically appropriate and necessary with supporting documentation.

Provided via secure and appropriate equipment to ensure confidentiality and quality in the delivery of the service. The service must be provided using a HIPAA-compliant platform.

Use appropriate coding and coding guidelines.

Rendered by licensed professionals enrolled with ND Medicaid, within the scope of practice per their licensure, and in compliance with any practice laws, rules, or guidelines

Telehealth Basic requirements:

These telehealth service requirements remain relatively unchanged.

Telehealth Payment Limitations

Payment will be made only to the distant health care professional.

- No payment for a professional at the originating site if their sole purpose is the presentation of the patient to the professional at the distant site.

Payment made to the originating site as a facility fee only in the following places of service

- office,
- inpatient hospital,
- outpatient hospital, or
- skilled nursing facility/nursing facility.

Service limits set by ND Medicaid apply.

There is no additional payment for equipment, technicians, or other technology or personnel



Indian Health Service and Tribal 638 Facilities

Reimbursed
at the All-
Inclusive
Rate (AIR)

- Regardless of whether the originating site is outside the “four walls” of the facility or clinic

Federally Qualified Health Centers and Rural Health Clinics

Continue to bill revenue codes from FQHC & RHC manual sections

Along with the CPT[®] or HCPCS code for the service rendered appended with modifier GT or 95.

COVID-19 Policy Expiration

HIPAA Platforms required – can no longer use CR or DR Modifiers



Poll Time!





New to Telehealth Policy

Definitions

There are now definitions in policy explaining telehealth terms.

POLICY DEFINITIONS

Digital Health consists of online digital evaluation and management (E/M) services¹ which are patient-initiated services with health care professionals. These are not real-time services. Patients initiate services through HIPAA-compliant secure platforms which allow digital communication with the health care professional. Online digital evaluation and management services are for established patients only. These services do not include nonevaluative electronic communications of test results, scheduling of appointments, or other communication that does not include evaluation and management.

Distant Site is the location of the health care professional.

Originating Site is the location of the patient.

Synchronous Telehealth is two-way, real-time interactive communication between a patient and their health care provider using technology such as interactive video/television, audio/visual secure online digital portals, and videoconferencing. Synchronous telehealth involves two collaborating sites: an “originating site” and a “distant site.” The patient is located at the originating site and the health care professional is located at the distant site.

Audio-Only Telephone Services can be delivered by using older-style “flip” phones or a traditional “land-line” phones that only support audio-based communication. Only certain services are covered using audio-only telephone services (see linked list of covered services below).

Telehealth is an umbrella term which includes digital health and synchronous two-way real-time interactive audio/visual services. It does not include store and forward services.

Telehealth



Umbrella term

Digital Health

Synchronous Health

Audio-only
telephone services

Digital Health

Online digital evaluation and management (E/M) services

Patient initiated by established patients

Through a HIPAA-compliant secure platform

These are not real-time services

Do not include

- nonevaluative electronic
- communications of test results,
- scheduling of appointments, or
- other communication that does not include evaluation and management.

Synchronous Telehealth

“Traditional” concept

Two-way, real-time communication between patient and provider

Using technology such as interactive video/television, audio/visual secure online digital portals, and videoconferencing

Two collaborating sites

- originating site
- distant site

Audio-Only Telephone Services



Delivered using older-style “flip” phones or “land-line” phones

Only certain services are covered

Expire December 31, 2024

Digital E/M Services

Cumulative within a 7 day period.

Period begins with the health care professional's review of the patient-generated inquiry.



Established patients only

Permanent document storage
(electronic or hard copy) required.

Physicians and other qualified
professionals whose scope of
practice include E/M services may
bill for E/M digital health visits.

- These professionals include physicians, nurse practitioners, and physician assistants.

Digital E/M Included Services not separately billable

* Separate reimbursement may be allowed for online digital inquiries initiated for a new problem within 7 days of previous online digital E/M service

For the same or related problem occurring within 7 days of a previous E/M service

Related to a surgical procedure occurring within the postoperative period of a previously completed procedure

Any subsequent online communication that does not include a separately reported E/M service

E/M services related to the patient's inquiry provided by qualified health care professionals in the same group practice

Audio Only Telephone E/M Services

These services continue to be covered post-COVID Public Health Emergency.

Audio only service coverage ends
12/31/24

Patient initiated

Established patient

Can be initiated by
patient or guardian of
established patient

Do not report Audio Only Telephone services if:



It's decided the patient will be seen within 24 hours or at the next available urgent visit appt

There is an E/M service for the same or a similar problem within the previous 7 days

Patient is within a postoperative period and the inquiry is related to the surgical procedure

Poll Time!



Other changes



Spreadsheet listing covered codes

This [list](#) includes codes from the [Medicare Telehealth list](#) and codes covered elsewhere within ND Medicaid

Telehealth		
Code	Descriptor	Can Audio-only Interaction Meet the Requirements? (Modifier -93 required when billed as audio only)
77427	Radiation tx management x5	
90785	Psytx complex interactive	Yes
90791	Psych diagnostic evaluation	Yes
90792	Psych diag eval w/med srvc	Yes
90832	Psytx w pt 30 minutes	Yes
90833	Psytx w pt w e/m 30 min	Yes
90834	Psytx w pt 45 minutes	Yes
90836	Psytx w pt w e/m 45 min	Yes
90837	Psytx w pt 60 minutes	Yes
90838	Psytx w pt w e/m 60 min	Yes
90839	Psytx crisis initial 60 min	Yes
90840	Psytx crisis ea addl 30 min	Yes
90845	Psychoanalysis	Yes
90846	Family psytx w/o pt 50 min	Yes
90847	Family psytx w/pt 50 min	Yes
90853	Group psychotherapy	Yes
90875	Psychophysiological therapy	
90951	Esrd serv 4 visits p mo <2yr	
90952	Esrd serv 2-3 vsts p mo <2yr	
90953	Esrd serv 1 visit p mo <2yrs	
90954	Esrd serv 4 vsts p mo 2-11	
90955	Esrd srv 2-3 vsts p mo 2-11	
90956	Esrd srv 1 visit p mo 2-11	
90957	Esrd srv 4 vsts p mo 12-19	
90958	Esrd srv 2-3 vsts p mo 12-19	

Digital Health Services	
Code	Descriptor
Practitioners who may independently bill Medicaid for evaluation and management visits (for instance, physicians, nurse practitioners, and physician assistants) can bill the following codes:	
99421	Online digital evaluation and management service provided by a physician or other qualified health professional for an established patient for up to 7 days, total time 5-10 minutes
99422	Online digital evaluation and management service provided by a physician or other qualified health professional for an established patient for up to 7 days, total time 11-20 minutes
99423	Online digital evaluation and management service provided by a physician or other qualified health professional for an established patient for up to 7 days, total time 21 or more minutes
Telephone Only Services	
Code	Descriptor
Practitioners who may independently bill Medicaid for evaluation and management visits (for instance, physicians, nurse practitioners, and physician assistants) can bill the following codes:	
99441	Telephone medical discussion with a physician or other qualified health professional, 5-10 minutes
99442	Telephone medical discussion with a physician or other qualified health professional, 11-20 minutes
99443	Telephone medical discussion with a physician or other qualified health professional, 21-30 minutes

Noncovered Services

Type of Noncovered Service	CPT®/HCPCS Code
Store and forward	G2010
Virtual check-in	G2012
Interprofessional services	99446-99449, 99451
Digital Assessment and Management Services	98970-98972



Questions?

Poll Time!



Resources

Online list of covered telehealth services

<https://www.hhs.nd.gov/sites/www/files/documents/Telehealth%20Approved%20Services.xlsx>

ND Medicaid [telehealth policy](#)

[Provider Guidelines, Manuals and Policies](#)





Contact

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