



## HEALTH SYSTEMS DIVISION

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**Date:** April 6, 2020

**To:** Fee-for-service physical health providers  
Fee-for-service behavioral health providers  
Fee-for-service oral health providers

**From:** Donny Jardine, Transformational Programs Manager  
Medicaid Programs, Health Systems Division

**Subject:** Telemedicine/Telehealth Billing Guidance for Oregon Health Plan Fee for Service Providers

To ensure members of the Oregon Health Plan have continued access to appropriate physical, behavioral and oral health services during the COVID-19 pandemic, the Oregon Health Authority (OHA) is expanding coverage for the delivery of services using telemedicine/telehealth platforms, effective January 1, 2020, consistent with:

- Health Evidence Review Commission's (HERC) [Ancillary Guideline Note A5](#) (Teleconsultations and non-face-to-face telehealth services) from the Prioritized List of Health Services (revised March 30, 2020). Additional revisions are expected by April 8, 2020.
- Oregon Administrative Rules (OAR) [410-120-1200](#) (Excluded Services and Limitations), [410-130-0610](#) (Telemedicine), [410-172-0850](#) (Telemedicine for behavioral health) and [410-123-1265](#) (Teledentistry)

Providers must ensure they can communicate effectively with a person with limited English proficiency (LEP); accurately interpret the oral statements of a person with LEP, or the statements of a person who communicates in sign language, into English as required by Title VI of the Civil Rights Act of 1964, Section 1557 of the Affordable Care Act, and the corresponding Code of Federal Regulation (CFR) at 45 CFR Part 92 (Section 1557).

Health care providers may provide, and bill OHA, medically necessary and appropriate covered services using telemedicine. Services performed must be provided within the health care provider's scope of practice as governed by their licensing board and, as applicable, provider qualifications described in OAR 309-019-0125.

OHA encourages the delivery of medically necessary and appropriate physical, behavioral and oral health services through live audio and video interaction between the patient and their health care provider whenever possible. Telephone (audio only) or electronic communications (patient portal) may be used to remove barriers such as a patient not having access to a computer with internet access or video capability. Providers may be reimbursed at the in-person rate for using telephone communications when barriers to equipment and access exist. In some cases, specific modifiers or place of service codes are needed to specify the service was delivered by telehealth (see guidance below).

Certain service code descriptions specify they are only for established patients. OHA allows providers, during the COVID-19 emergency, to offer telemedicine services to new patients. OHA, following federal guidance, will not audit to confirm established patient status for these telephone/online codes during the COVID-19 emergency timeframes, when services are provided in the best interest of the patient and in accordance with OHA's guidance.

OHA-enrolled providers may provide telemedicine services from a clinic, office, home or other setting that supports a private interaction. Patients may receive services from their home, day treatment setting, or where they are physically located if telemedicine services are appropriate. Providers must obtain and document a verbal consent from patients prior to the provision of telemedicine services.

Normally, online services, including patient portal interactions and audio/video communications, require HIPAA encryption. During the governor's COVID-19 emergency declaration (including any extensions), OHA will follow [federal guidance](#) and not audit this requirement so services such as Skype, FaceTime, Zoom and Google Hangouts can be used. HIPAA-compliant platforms with appropriate business agreements are preferred.

OHA is reviewing ways to increase member access to emergent physical, behavioral and oral health services during this challenging time. OHA is requesting additional telehealth authority from the Centers for Medicare & Medicaid Services (CMS) to assure continued access to services for covered members and will communicate any changes that allow services to be provided via telemedicine that are not currently available.

### **What should you do?**

**Physical health providers:** Please provide telehealth services as described above. You may bill for these services retroactive to January 1, 2020. Please allow up to two weeks for OHA to make system changes to support billing. All telemedicine/telehealth services should be billed using the 02 Place of Service. For services delivered by synchronous video and audio, use modifier 95 in addition to other appropriate modifiers. For services delivered by telephone (when synchronous audio and video is not available to the patient and/or provider), use place of service 02 with no other modifier.

**Behavioral health providers:** Please provide telehealth services using audio-video platforms when able and utilize the GT modifier, as identified on the behavioral health fee schedule. When the audio-video platform is unavailable or there is limited to no access, providers can offer telephone services using Place of Service 02 with no other modifier.

**Oral health providers:** Please provide teledentistry services including telephone calls with audio-visual capability and services such as Skype, FaceTime, or Google Hangouts if a HIPAA-compliant platform is not available. Reimbursement will be the same as for services provided in-person. Use Place of Service 02 regardless of whether the connection is by video with audio or regular telephone. No modifier is required, as modifiers are not used on dental claims.

### **Resources:**

A link to telemedicine code lists will be posted to the [COVID-19 Guidance for CCOs and Oregon Health Plan providers webpage](#) by April 8, 2020

Please refer to the following resources and guidance for telemedicine services:

- [Oregon Health Plan Telemedicine coverage](#)
- [Expanded telehealth coverage for behavioral health providers](#)
- [DCBS-OHA telehealth guidance](#)
- [Oregon Health Plan Expanded Coverage of Teledentistry](#)
- [COVID-19 Telehealth Provider Webinar slide deck \(April 6, 2020\)](#)

### **Questions?**

If you have questions about OHA's fee-for-service coverage of telephone/telehealth services, contact Provider Services at 800-336-6016 or [dmap.providerservices@dhsosha.state.or.us](mailto:dmap.providerservices@dhsosha.state.or.us).

Thank you for your continued support of the Oregon Health Plan and the services you provide to our members.