Emergency Telehealth Rules – An Overview for CPC Practices

March 26, 2020
Agenda

- Quick CPC update
- Telehealth
- What’s next and reminders
- Q & A
CPC Updates for 2021

- Discussions have begun to determine any potential changes for 2021 program year
  - Input was received from the managed care plans
- Building a new pharmacy efficiency metric
- Working on 2021 rule updates
- For CPC practices who have ideas for improvement – complete the survey questionnaire link, being sent via the CPC listserv
Emergency Telehealth Updates
Added Provider Types

In addition to those who can provide telehealth services under 5160-1-18, the emergency rule 5160-1-21 adds:

<table>
<thead>
<tr>
<th>Provider Types</th>
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<tbody>
<tr>
<td>Audiologist, Audiology aide</td>
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<tr>
<td>Occupational Therapist, OT Assistant</td>
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<tr>
<td>Physical Therapist, PT Assistant</td>
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<tr>
<td>Speech-Language Pathologist, SLP aides</td>
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<td>Individuals holding a conditional license under 4753.071 of the Revised Code</td>
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<tr>
<td>Medicaid School Program practitioners</td>
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<tr>
<td>Dietitians</td>
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<tr>
<td>Supervised practitioners and trainees defined in 5160-8-05</td>
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<tr>
<td>Other as designated by the Director of ODM (to be communicated in guidance to providers)</td>
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**Added Covered Services**

In addition to covered telehealth services under 5160-1-18, the emergency rule 5160-1-21 adds:

<table>
<thead>
<tr>
<th>Service</th>
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<tr>
<td>Remote evaluation of recorded video or images</td>
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<td>Virtual check-ins</td>
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<tr>
<td>Online digital evaluation and management services</td>
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<tr>
<td>Remote patient monitoring</td>
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<tr>
<td>Audiology, speech-language pathology, physical therapy, and occupational therapy</td>
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<tr>
<td>Medical nutrition services</td>
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<tr>
<td>Lactation counseling provided by dietitians</td>
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<tr>
<td>Psychological and neuropsychological testing</td>
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<tr>
<td>Smoking and tobacco use cessation counseling</td>
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<tr>
<td>Developmental test administration</td>
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<tr>
<td>Other services as designated by the director of ODM</td>
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Reinstated Originating Site Fee

- Q3014 will be an available code
- **Can** be billed in conjunction with a separate evaluation and management service provided on the same day
- Limit of 1 per day, per patient
- Rate is $21.28
Removed Location Restrictions

- **Patient can be anywhere**
  - Includes home, temporary housing, school, community, etc.

- **Practitioner can be anywhere**
  - Any valid place of service code will be accepted (except 09)

- **New and established patients can be seen by any eligible practitioner**
Expanded Telehealth definition

During the state of emergency, telehealth is defined as:

- Delivery of services via live, interactive, real-time electronic communication with audio and video elements; **OR**
- Asynchronous activities that do not have both audio and video elements. This includes:
  - Telephone calls
  - Images transmitted via fax or other means
  - Electronic mail

Providers should use their best judgment
Removes Active Patient Requirements

Patients are not required to be “active”

Not required to have at least on in-person physical exam within the previous twelve months

Practitioner location can be anywhere even if the patient is not active (not a change for CPC practices)
Office of Civil Rights Notification

- Adopts Office of Civil Rights “Notification of HIPAA enforcement discretion for telehealth remote communications during the COVID-19 nationwide public emergency”
  - Covered entities subject to HIPAA may communicate with patients remotely even though some technologies do not fully comply with HIPAA rules
Temporary HIPAA Changes

Providers:

☑️ Can use any audio or video **non-public facing** remote communication product
  - Facebook Live, Twitch, TikTok are public facing and should not be used for telehealth

☑️ Should notify patients that potential privacy risks are introduced with use of these third-party applications
  - Providers should enable all available encryption and privacy modes when using these

☑️ Are to exercise professional judgment in the use of telehealth
COVID-19 Emergency Actions

The Ohio Department of Medicaid (ODM) and the Ohio Department of Mental Health and Addiction Services (OhioMHAS), in partnership with the Governor’s Office, executed emergency rules to expand and enhance telehealth options for Ohioans and their providers. These rules relax regulations so more people can be served safely in their homes, rather than needing to travel to health care providers’ facilities. This set of regulatory changes is being collectively implemented by our departments to help reduce risk of exposure to COVID-19 for patients, their families, and our health care workforce that is engaged in the community response to COVID-19. Links to the new rules can be found below.

Telehealth is the practice of caring for patients remotely when the provider and patient are not physically present with each other. It supports long-distance clinical health care, patient and provider health-related education, public health, and health administration. The ODM/MHAS emergency rules address both in-person and telehealth options, so providers and patients can access a wide variety of telehealth services. They ease restrictions on provider/patient locations and the types of technologies and interactions that can be used for telehealth services.

Please note: the ODM/MHAS rule change applies to all community behavioral health providers certified by OhioMHAS (medicaid provider types 54 and 95). ODM’s new telehealth rule applies to all individuals covered by Medicaid and many types of practitioners: doctors, nurse practitioners, podiatrists, psychologists, occupational and physical therapists, audiologists, speech-language pathologists, dieticians, and behavioral health clinicians. ODM’s rule allows telehealth services to be billed by independently practicing clinicians, as well as hospitals and their outpatient facilities, Federally Qualified Health Centers (FQHC), emergency rooms, and OhioMHAS-certified providers. ODM’s rule applies to Medicaid fee-for-service, Medicaid Managed Care Plans, and MyCare Ohio Plans.

Ohio Medicaid Emergency Rules

- ODM Telehealth FAQs
- ODM Emergency Telehealth Rule
  - Appendix to Rule 5160-1-21
- ODM Telehealth Executive Order
- Coronavirus.ohio.gov
- NITS BITE Newsletter

http://www.registerofohio.state.oh.us/rules/search/details/312431
What’s Next and Reminders
Upcoming CPC Key Dates:

**2020 PMPM Payments**
Q2 Payments will go out by the end of:
April 2020

**2020 Quarterly Reports**
Q1 2020 Reports are estimated to post in:
April 2020

**2020 Attribution Files**
Q2 Files will post on the MITS Portal in:
April 2020

**Don’t Forget**
In-Person Learning Sessions coming:
Around July/August 2020
New Provider Resource

A new training video has been posted to the CPC webpage!

Learn more:

- How to Setup a MITS Agent Account and Access CPC Reports - Video *NEW*
- Managed Care Plan's Consolidated Resource Guide
- Ohio's Vision for Primary Care
- Frequently Asked Questions
- Provider Assistance
- Medicare Comprehensive Primary Care Plus (CPC+)
- Ohio CPC 2020 Practice List

Upcoming Webinars

4/23/2020  CPC 101
5/28/2020  CPC 201
6/25/2020  Best Practice

CPC Webpage:
http://medicaid.ohio.gov/Providers/PaymentInnovation/CPC.aspx

Information on:

- CPC 2020 program year
- CPC enrollment
- CPC payment
- CPC requirements
- CPC reporting
- CPC provider webinars

Don’t Forget to Signup for our CPC Listserv to receive all the important communication for the 2020 program year
If you have any questions, you will need to contact our provider assistance team via the IVR at, 1-800-686-1516, option 5. You must enter two of the following: tax ID, 7-digit Medicaid ID, or NPI in order to authenticate and speak with a representative.