The Online Handbook will not be revised to include temporary policy information in this Update.

ForwardHealth UPDATE

Your First Source of ForwardHealth Policy and Program Information



ADDITIONAL SERVICES TO BE PROVIDED VIA TELEHEALTH

In response to the COVID-19 pandemic, ForwardHealth is temporarily changing certain policy requirements for services delivered through telehealth. ForwardHealth is actively working to protect and ensure the capacity of the health care system while responding to COVID-19. Continuing to expand coverage of telehealth services gives providers more options to safely and effectively communicate with and treat patients.

Beginning March 12, 2020, these altered policy requirements will remain in effect until ForwardHealth publishes updated policy.

This ForwardHealth Update announces that ForwardHealth will temporarily allow currently covered services to be provided via telehealth using real-time technology as long as the service can be delivered with functional equivalence to the face-to-face service.

Telehealth may be an appropriate service delivery approach for members who are able to stay near the device being used to provide telehealth services and participate in therapeutic or supportive activities with a provider who is not physically present. Telehealth may be appropriate for goals that can be accomplished

AFFECTED PROGRAMS

BadgerCare Plus, Medicaid

TC

Agencies.

Ambulatory Surgery Centers, Anesthesiologist Assistants, Audiologists, Behavioral Treatment Benefit, Case Management Providers, Certified Registered Nurse Anesthetists, Child/Adolescent Day Treatment Providers, Child Care Coordination Providers, Centers, Community Recovery Services Providers, Community Support Programs, Comprehensive Community Service Providers, Crisis Intervention Providers, Dental Hygienists, Dentists, End-Stage Renal Disease Service Providers, Family Planning Clinics, HealthCheck Providers, HealthCheck "Other Services" Providers, Hearing Instrument Specialists, High-Cost Medically Complex Case Management Providers, HMOs and Other Managed Care Programs, Home Health Agencies, Hospice Providers, Hospital Providers, Intensive In-Home Mental Health and Substance Abuse Treatment Services for Children Providers, Licensed Midwives, Master's-Level Psychotherapists, Narcotic Treatment Services Providers, Nurse Practitioners, Nurses in Independent Practice, Occupational Therapists, Opticians, Optometrists, Oral Surgeons, Outpatient Mental Health Clinics, Outpatient Substance Abuse Clinics, Personal Care Agencies, Pharmacies, Physical Therapists, Physician Assistants, Physician Clinics, Physicians, Podiatrists, Portable

Adult Mental Health Day Treatment Providers, Advanced

Practice Nurse Prescribers With Psychiatric Specialty,

Providers. Rural Health Clinics, School-Based Services
Providers, Special Supplemental Nutrition Program for
Women, Infants, and Children (WIC) Agencies, Speech and
Hearing Clinics, Speech-Language Pathologists, Substance
Abuse Counselors, Substance Abuse Day Treatment
Providers, Therapy Groups, Initial Federally Qualified Health

K-ray Providers Prenatal Care Coordination Providers,

Psychologists, Qualified Treatment Trainees, Rehabilitation



through verbal and visual cueing. Telehealth is not appropriate for activities that require physical interaction or for goals that require hands-on support or physical prompting.

Temporary Change in Allowable Telehealth Services

Beginning on March 12, 2020 under this temporary policy, ForwardHealth will allow telehealth services utilizing interactive synchronous (real-time) technology, including audio-only phone communication, for currently covered services that can be delivered with functional equivalency to the face-to-face service. This applies to all service areas and all enrolled professional and paraprofessional providers allowable within current ForwardHealth coverage policy. Services that are not currently covered on a face-to-face basis are not covered via telehealth.

Paraprofessional providers are providers who do not hold a license to practice independently but are providing services under the direction of a licensed provider. Paraprofessional providers are subject to supervision requirements, which may include face-to-face supervision. Under the temporary policy, ForwardHealth will allow supervision requirements to be met via telehealth, but this flexibility does not change or replace licensure or certification requirements of the provider's supervising body or other regulatory authorities. When possible, face-to-face supervision requirements should be met via audio-visual technologies. Supervision must be documented according to existing benefit policy.

Providers must keep complete and accurate documentation according to existing benefit policy requirements. Providers are expected to perform services within their scope of practice and to exercise professional judgment in determining

whether services can be delivered appropriately and effectively via telehealth. Providers must make a good faith effort to provide clinically appropriate services while the temporary policy described in this Update is in effect. Providers must continue to adhere to all ForwardHealth benefit policy requirements.

The Office of Civil Rights within the United States' Department of Health and Human Services announced on March 17, 2020 that they will not impose penalties for noncompliance with Health Insurance Portability and Accountability Act of 1996 (HIPAA) regulatory requirements for remote communications technologies in connection with the good faith provision of telehealth during the national COVID-19 public health emergency.

REMINDER

ForwardHealth is **not expanding** coverage policy
or services allowable under
the permanent telehealth
coverage policy as outlined
in the <u>Telehealth</u> topic (#510)
of the ForwardHealth Online
Handbook.

Services not allowable by ForwardHealth in a face-to-face delivery method will remain not allowable in any delivery method.

The information provided in this ForwardHealth Update is published in accordance with Wis. Stat. § 49.45(61).

Providers may use any non-public facing remote communication product that is available to communicate with patients. Public-facing video communication applications, such as Facebook Live, should not be used in the provision of telehealth. Providers are encouraged to let patients know that these third-party applications can introduce privacy risks. Providers should also enable all available encryption and privacy functions when using such applications.

Providers may **not** require the use of telehealth as a condition of treating a member. Providers must develop and implement their own methods of informed consent to confirm that a member agrees to receive services via telehealth. ForwardHealth considers verbal consent to receiving services via telehealth an acceptable method of informed consent when it is documented in the member's medical record.

Member Privacy Considerations

Providers are reminded that increased telecommuting options for many workers may continue to result in members having limited options for private telehealth communication in their homes. Providers are reminded that they must continue to implement reasonable safeguards to protect patient information against intentional or unintentional impermissible uses and disclosures.

Special Privacy Considerations for Telehealth-Based Group Treatment

Telehealth-based group services will be covered under the temporary policy for group services that were covered by ForwardHealth prior to the pandemic. This includes benefit areas listed as "for individual services only" in the Telehealth topic (topic #510) of the Online Handbook, which will now allow reimbursement for group services delivered via telehealth on a temporary basis.

Providers are reminded that additional privacy considerations apply to members participating in group treatment via telehealth. Telehealth-based group services delivered via video formats can potentially allow other household members to see other group members, which violates the privacy of those other members. Video-based formats may also allow participants to record or obtain screenshots, which violates the privacy of other members. Telehealth services delivered via audio-only formats may afford more privacy for group members, as long as group participants avoid using the speaker-phone feature.

Group leaders have an obligation to provide information about issues of privacy and confidentiality to their members at the beginning of telehealth-

RESOURCES

- For the latest information from ForwardHealth regarding COVID-19, refer to the COVID-19 ForwardHealth News and Resources page on the ForwardHealth Portal.
- For the federal guidance on telehealth, visit the Department of Health and Human Services' Notification of Enforcement Discretion for Telehealth Remote Communications During the COVID-19 Nationwide Public Health Emergency webpage.
- For more information on the Department of Health and Human Services' Notification of Enforcement Discretion, visit the FAQs on Telehealth and HIPAA during the COVID-19 nationwide public health emergency.
- For the latest updates on the COVID-19 outbreak, visit the Wisconsin Department of Health Services' COVID-19 (Coronavirus Disease) webpage.

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based meetings. Members should affirm their understanding of the risks and acceptance of telehealth-based group services in writing or verbally, with documentation in the member's medical record. Providers should direct group members to participate in telehealth group sessions in ways that prevent violating one another's privacy, without disclosing group members' faces, names, identifying details, or circumstances. Providers may not compel members to participate in telehealth-based group treatment and should make individual services available to the greatest extent possible for members who elect not to participate in telehealth-based group treatment due to privacy concerns.

Claims Submission for Services Allowable Under Temporary Telehealth Guidance

There are no changes to the claims submission process for fee-for-service benefits for the new services outlined in this Update for temporary telehealth policy. Modifier GT and place of service (POS) code 02 (Telehealth) must **not** be indicated for these **temporary** services. As a reminder, the POS is where the provider is located. There are no changes to POS guidance for the new services outlined in this Update for temporary telehealth policy. Providers working remotely should use the POS that they are connecting to. For example, providers working remotely from their clinic should use POS 11 (Office). Providers are requested to include modifier 95 as an informational modifier to indicate that they are submitting claims in accordance with ForwardHealth temporary telehealth policy.

For claims submitted to HMOs or managed care organizations, contact the HMO or managed care organization for instructions on claims submission.

Temporary Changes Subject to Modification

All temporary changes described in this Update have been implemented as a rapid response to the COVID-19 emergency. While the Wisconsin Department of Health Services intends to update its permanent telehealth policy in response to Wisconsin Act 56, providers are advised that telehealth policies listed as "temporary" will be rescinded or modified at a future date, when updated policy will be announced.

Documentation Retention

All services provided via telehealth must be documented in the member's medical record in the same manner as services provided face to face. As a

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reminder, documentation for originating sites must support the member's presence in order to submit a claim for the originating site facility fee. In addition, if the originating site provides and bills for services **and** the originating site facility fee, documentation in the member's medical record should distinguish between the unique services provided.

Providers are reminded that they must follow the documentation retention requirements per Wis. Admin. Code § <u>DHS 106.02(9)</u>. Information about those requirements can be found in the following Online Handbook topics:

- Financial Records (#201)
- Medical Records (#202)
- Preparation and Maintenance of Records (#203)
- Record Retention (#204)
- Availability of Records to Authorized Personnel (#1640)

Providers are required to produce and/or submit documentation to ForwardHealth upon request. ForwardHealth may deny or recoup payment for services that fail to meet these requirements. Refusal to produce documentation may result in sanctions including, but not limited to, termination from Wisconsin Medicaid.

Information Regarding Managed Care Organizations

This Update pertains to fee-for-service policy. Managed care organizations are required to provide at least the same benefits as those provided under fee-for-service arrangements. BadgerCare Plus and Medicaid SSI HMOs, as well as special managed care programs including Children Come First, Wraparound Milwaukee, and Care4Kids are expected to extend the same considerations to allowable telehealth services.

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The ForwardHealth Update is the first source of program policy and billing information for providers.

Wisconsin Medicaid, BadgerCare Plus, SeniorCare, and Wisconsin Chronic Disease Program are administered by the Division of Medicaid Services within the Wisconsin Department of Health Services (DHS). The Wisconsin AIDS Drug Assistance Program and the Wisconsin Well Woman Program are administered by the Division of Public Health within DHS.

For questions, call Provider Services at 800-947-9627 or visit our website at www.forwardhealth.wi.gov/.