This Update has been revised since its original publication. Revised information appears in red text on pages 2, 3, and 4.



Your First Source of ForwardHealth Policy and Program Information



PERMANENT TELEDENTISTRY POLICY

ForwardHealth will transition to permanent telehealth coverage policy and billing guidelines for synchronous (two-way, real-time, interactive communications) telehealth services effective on the first day of the first month after the public health emergency related to the COVID-19 pandemic expires. For example, if the public health emergency ends on April 12, 2022, permanent policy would become effective for dates of service on and after May 1, 2022. Temporary telehealth policy will remain in effect until the switch to permanent policy occurs. Telehealthrelated updates to the ForwardHealth Online Handbook will be available following the implementation of permanent policy.

This telehealth coverage policy will include coverage for synchronous teledentistry services. Asynchronous teledentistry policy is still in development and will be published in a future ForwardHealth Update.

AFFECTED PROGRAMS

BadgerCare Plus, Medicaid

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Community Health Centers, Dentists, HealthCheck Providers, Tribal Federally Qualified Health Centers, HMOs and Other Managed Care Programs

QUICK LINKS

- Dental Hygienists topic (#2840)
- BadgerCare Plus/Medicaid Diagnostic, Preventative, Restorative, Endodontics, Periodontics, General Codes topic (#2808)

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



Temporary public health emergency allowances, including Health Insurance Portability and Accountability Act of 1996 flexibilities, will continue through the end of the federal health public emergency unless providers are notified otherwise in writing prior to that time.

Allowable Teledentistry Services

The following existing dental codes will be added to teledentistry.

CODE	DESCRIPTION
D0120	Periodic oral evaluation - established patient
D0140	Limited oral evaluation – problem focused
D0170	Re-evaluation – limited, problem focused (established
	patient; not post-operative visit)
D0191	Assessment of a patient*

* D0191 is billable only by a dental hygienist.

The following code will be used on dental claims to indicate teledentistry.

CODE	DESCRIPTION
D9995	Teledentistry synchronous; real-time encounter

Teledentistry Billing Guidance

The use of teledentistry services should be evaluated on an individual basis based on the member's individual situation and will not be required by ForwardHealth.

Providers should report code D9995 along with the applicable allowable oral evaluation procedure codes to indicate the service was delivered via synchronous teledentistry.

Note: D9995 is informational only and is not separately reimbursable.

The applicable teledentistry code is reported on a separate service line of a claim submission that also reports all the other procedures delivered during a virtual evaluation.

Functional Equivalency

All telehealth services must follow the guidelines for functional equivalency. "Functionally equivalent" means that when a service is provided via telehealth, the transmission of information must be of sufficient quality as to be the same level of service as an in-person visit. Transmission of voices, images,

TEMPORARY ALLOWANCES

Alert 052, titled "Continuation of HIPAA Flexibilities Through the Public Health Emergency," includes information about Health Insurance Portability and Accountability Act of 1996 flexibilities, which will continue through the end of the federal health public emergency. data, or video must be clear and understandable. For a telehealth service tobe considered "functionally equivalent," it must meet both of the followingcriteria:

- The quality, effectiveness, and delivery mode of the service provided must be clinically appropriate to be delivered via telehealth.
- The service must be of sufficient quality as to be the same level of service as an in-person visit. Transmission of voices, images, data, or video must be clear and understandable.

Facilitator Policy

To maintain functional equivalency, a facilitator may be needed to assist with the teledentistry visit.

For example, a member may go to a local health department for an oral evaluation to be performed via teledentistry. A dental hygienist would facilitate the oral evaluation for a dentist who is not on site but is interacting synchronously with the member. The hygienist records patient information, performs periodontal probing and charting, and uses an intraoral camera that allows the dentist to see into the member's mouth. Per Current Dental Terminology coding guidelines, the dentist can delegate certain aspects of the evaluation, but they will still take full risk and bill for the service.

Facilitators may include dental hygienists and other appropriately trained

medical or dental professionals within their scope of practice. Facilitators are allowed for teledentistry when appropriate but are not separately reimbursed.

Dental Hygienists

Dental hygienists can perform and bill for an assessment (D0191) of a member via teledentistry if the service is delivered with functional equivalency and the dental hygienist is individually enrolled in Wisconsin Medicaid.

For more information regarding dental hygienists and the process to enroll in Wisconsin Medicaid, providers may refer to the Dental Hygienists topic (#2840) of the Online Handbook.

Diagnostic Imaging

When providing diagnostic imaging services via teledentistry, providers should submit claims for either the interpretation or image capture of the radiograph.

Facilitators are allowed for teledentistry when appropriate but are not separately reimbursed.

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

For more information on dental diagnostic imaging, including covered services and billable codes, providers may refer to the BadgerCare Plus/Medicaid Diagnostic, Preventive, Restorative, Endodontics, Periodontics, General Codes topic (#2808) of the Online Handbook.

Documentation

Documentation requirements for a telehealth service are the same as for an in-person visit and must accurately reflect the service rendered.

Documentation must identify the delivery mode of the service when provided via telehealth, and document the following:

- Whether the service was provided via audiovisual telehealth, audio-only telehealth, or via telehealth externally acquired images
- Whether the service was provided synchronously or asynchronously

 Documentation requirements for a telehealth service are the same as for an in-person visit and must accurately reflect the service rendered.

Additional documentation that is recommended, but not required, includes:

- Provider location (for example, clinic [city/name], home, other)
- Member location (for example, clinic [city/name], home)
- All clinical participants, roles, and actions during the encounter (This could apply if, for example, a member presents at a clinic and receives telehealth services from a provider at a different location.)

Audio-Only Guidelines

Modifier 93 should be used for any service performed via audio-only telehealth. The GT modifier should only be used to indicate services performed using audio-visual technology.

When possible, telehealth services should include both an audio and visual component. In circumstances where audio-visual telehealth is not possible due to member preference or technology limitations, telehealth may include real-time interactive audio-only communication if the provider feels the service is functionally equivalent to the in-person service and there are no face-to-face or in-person restrictions listed in the procedural definition of the service.

Documentation should include that the service was provided via interactive synchronous audio-only telehealth.

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

Referrals and Coordination of Care

As a reminder, when a dentist has performed an oral evaluation via teledentistry and a problem is found, the dentist should help refer the member to a dentist who can provide treatment if the dentist is not able to schedule the member for treatment themselves.

Documentation Retention

Providers are reminded that they must follow the documentation retention requirements per Wis. Admin. Code § <u>DHS 106.02(9)</u>. Providers are required to produce or submit documentation, or both, to ForwardHealth upon request. Per Wis. Stat. § <u>49.45(3)(f)</u>, providers of services shall maintain records as required by the Wisconsin Department of Health Services for verification of provider claims for reimbursement. The Department of Health Services and the appropriateness and accuracy of claims. 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 the Medicaid program.

Information Regarding Managed Care Organizations

This Update contains fee-for-service policy and applies to services members receive on a fee-for-service basis only. For managed care policy, contact the appropriate managed care organization. Managed care organizations are required to provide at least the same benefits as those provided under fee-forservice arrangements.

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

This Update was issued on 01/05/2022 and information contained in this Update was incorporated into the Online Handbook on 09/28/2022.

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/.

REMINDER

Dentists should help refer the member if they are not able to schedule the member for treatment themselves.