

То:	All AmeriHealth Caritas DC Providers	
Date:	March 17, 2020	
Subject:	Telemedicine Provider Guide Follow-up	
Summary:	The purpose of this is to provide follow-up information to AmeriHealth Caritas District of Columbia's telemedicine services.	

On Friday, AmeriHealth Caritas District of Columbia (AmeriHealth) sent a notice to providers reminding them of the telehealth services that are reimbursable. As a follow-up, please note the following:

## Telemedicine Service Model

Telemedicine is a service delivery model that delivers healthcare services through a two-way, real-time interactive video-audio communication for the purpose of evaluation, diagnosis, consultation, or treatment. Eligible services can be delivered via telemedicine when the enrollee is at the originating site (the enrollee's home can be used as an originating site), while the eligible "distant" provider renders services via the audio/video connection. AmeriHealth will not reimburse for service delivery using e-mail messages, facsimile transmissions, or audio only.

## Provider Reimbursement

D.C. Medicaid enrolled providers are eligible to deliver telemedicine services and receive the same AmeriHealth contracted rate they would receive if the service was done face-to-face. For distant site providers, medically necessary services that can reasonably be delivered using technology-assisted communication are specified in the table below.

Telemedicine providers must submit claims in the same manner the provider uses for in person services. When billing for services delivered via telemedicine, distant site providers shall enter the "GT" (via real-time interactive video-audio communication) procedure modifier on the claim and specify the place of service "02".

Services billed where telemedicine is the mode of service delivery, but the claim form and/or service documentation do not indicate telemedicine are subject to recovery in the course of an audit.

The below table is a list of services that can be delivered via telemedicine:

CPT/HCPCS Codes	Brief Service Description
90791-90792	Psychiatric diagnostic evaluation
90832-90834, 90836-90838	Individual psychotherapy
90839-90840	Psychotherapy for crisis



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90845	Psychoanalysis
90846	Family psychotherapy (without patient present)
90847	Family psychotherapy (conjoint psychotherapy)
	(with patient present)
90853	Group psychotherapy (other than of a multiple-
	family group)
92507-92508, 92521-92524	Speech therapy
96151-96155	Health and behavior assessment
99201-99205, 99211-99215, 99221-99223,	Evaluation and management (office or other
99231-99233, 99304-99306, 99307-99310,	outpatient, initial and subsequent hospital care,
99281-99285 and 99288	initial and subsequent physician nursing home
	care, emergency room outpatient)
99241-99245, 99251-99255	Consultation of an evaluation and management
	of a specific problem requested by originating
	site provider
H0002	Behavioral health screening to determine
	eligibility for admission to treatment program,
H0004	Behavioral health counseling

## **Excluded Services**

AmeriHealth will not reimburse telemedicine providers for the following:

- Incomplete delivery of services via telemedicine, including technical interruptions that result in partial service delivery.
- When a provider is only assisting the beneficiary with technology and not delivering a clinical service.
- For a telemedicine transaction fee and/or facility fee.
- For store and forward and remote patient monitoring.