

The following information should be shared with all CRCT External Behavioral Health Providers:

We would like to identify updates to our system that went into place 3/23/2020. These changes were put in place to address an expansion of current services delivery locations, as a direct result of COVID-19. We understand that many services are being offered and performed outside of the normal face to face process and recent state guidelines are allowing those new processes to happen during the COVID-19 response efforts.

To address these changes, we are working with partners from across our region and following state guidelines to ensure our system is up to date and able to meet all your needs during this time.

COVID-19 Telemedicine Expansion Plan: MDHHS has identified the ability for providers to offer and provide alternative treatment options through Telehealth (Video) or Telephone (Audio) technologies.

1) COVID-19 Video Telehealth

- a. **Descriptor-** Telehealth services delivered on a video platform under expanded and/or relaxed payer rules due to COVID-19. This includes telehealth services that were delivered in non-traditional locations, not subject to traditional geographic restrictions, using non-traditional platforms.

2. COVID-19 Phone Contact

- a. **Descriptor-** Telephone / Audio-Only contact with a client that would not typically qualify as a billable Face-to-Face contact or Telehealth encounter under traditional rules, however, are billable under expanded and/or relaxed payer rules due to COVID-19.

Documentation on Claims

When providing services under the COVID 19 Expansion Plan MDHHS is requiring documentation to identify when a service has been altered due to COVID and what that alternative treatment location was. For our external providers all needed pieces of documentation already exist on the claim forms that they are currently required to complete during claims submissions. However there have been a few enhancements made.

- 1) The claim entry screen has been updated to add a quick way for providers to enter the notes for the COVID-19 Expansion.
- 2) These links will also set the POS to '02' which is required for COVID-19 expansion services.
- 3) It does NOT set the modifier, since we don't want to accidentally overwrite a modifier that has already been entered. **Providers MUST ENTER the modifier GT.** If there is more than one modifier on this entry, the order that those modifiers are placed does not impact the claim.

24.	A	B	C	D	E	F	G	H	I	J
Dates Of Service		POS	EMG	Procedures/ Service	Diagnosis	Charges	Units	EPSTD Family Plan	ID Qual	Rendering/Referring Provider ID #
From	To			CPT/HCPCS Mod(s)						
Corex				T1005	1					Clear Line
Time of Service From: AM To: AM		COB Amount: Paid Amount: Paid Date: HIPAA Adjustment Reason Code		Staff: Ref. Prov: First Last NPI	<input type="checkbox"/> Check to specify Rendering Provider not in the system			<input type="button" value="lookup"/> <input type="button" value="clear"/>		
				Notes:	Prefill COVID-19 Telehealth Note Video Audio-Only					

If at any time you have any questions on this or other needs related to CRCT continue to use the same help and support process that have always been available to you. We are always available to support and answer any questions needed.

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