COVID-19 EMERGENCY TELEHEALTH RULES
SUMMARY OF UPDATED GUIDANCE

April 13, 2020

In response to the COVID-19 pandemic and the state of emergency declared by Ohio Governor Mike DeWine on March 9, 2020, the Ohio Department of Medicaid (ODM) adopted emergency rule 5160-1-21, “Telehealth during a state of emergency.” This rule enhanced ODM’s telehealth policy and provides several flexibilities for providers and Medicaid covered individuals in need of care. Today, ODM is releasing additional policy guidance and detailed billing guidelines related to this rule.

ODM’s policy guidance further expands telehealth to the following:

✓ Additional covered telehealth services:
  o Limited oral evaluation
  o Hospice home care and long-term care
  o Direct skilled nursing services in the home health or hospice setting
  o Services of home health or hospice aides
  o Additional occupational therapy, physical therapy, speech language pathology, and audiology services
  o End stage renal disease (ESRD) related services

✓ Additional covered rendering practitioner types:
  o Dentists
  o Registered Nurses and Licensed Practical Nurses working in a hospice or home health setting
  o Licensed and credentialed health professionals working in a hospital or nursing facility setting
    (see the question 14 in the updated FAQ document for additional information)
  o Home health and hospice aides

✓ Additional covered billing provider types:
  o Professional dental groups
  o Home health and hospice agencies

ODM’s billing guidelines detail the following:

✓ For nearly all services, the telehealth changes resulting from the emergency rule will be implemented in claims processing systems on April 15, 2020 by Medicaid fee-for-service (FFS), Medicaid Managed Care Plans (MCPs), and MyCare Ohio Plans (MCOPs).

✓ ESRD-related services and some skilled therapy services will not be implemented in the FFS, MCP, and MCOP claims processing systems on April 15. These services should be billed as if they were rendered face-to-face until the IT system changes are in place. Additional details about these services can be found in the billing guidance. ODM will communicate about the implementation date for these services in the near future.

✓ Providers must maintain documentation of services delivered via telehealth prior to and after the IT system changes are made.
Once the IT system changes are implemented on April 15, 2020, to the extent possible, providers should comply with the new billing guidance.

Providers should maintain documentation to support any necessary exceptions to the billing guidance while working to provide access to care for individuals during this time of emergency.

The April 13 updates add to the March 2020 emergency telehealth rule, which implemented the following changes:

- The definition of Telehealth now includes additional forms of communication during a state of emergency, including telephone calls, fax, email, and other communication methods that may not have audio and video elements.
- Medicaid covered individuals can access telehealth services wherever they are located. This includes homes, schools, temporary housing, hospitals, nursing facilities, group homes, and any other location, except for a prison or correctional facility.
- Eligible providers can deliver telehealth services from any location, including their own home offices and other non-institutional settings.
- Individuals with Medicaid can access telehealth services without having an established relationship with a provider.
- Medicaid is covering new types of rendering practitioners and billing providers for the services they deliver through telehealth.
- Medicaid is covering many more services when they are delivered through telehealth, including a number of previously uncovered services that are covered by Medicare.
- The emergency rule also adopts guidelines found in the Office of Civil Rights’ “Notification of HIPAA Enforcement Discretion for Telehealth Remote Communication During the COVID-19 Nationwide Public Emergency.”

The following documents released today will be helpful to providers implementing ODM’s expanded telehealth services:

- For OhioMHAS-certified Providers:
  - MITS Bits Telehealth Follow Up: IT System Changes Eff. Apr 15 and BH Provider Manual Updated
  - Provider Requirements and Reimbursement Manual Emergency Version (Version 1.1) for OhioMHAS-certified Providers
- Updated List of COVID-19 Telehealth Rule Frequently Asked Questions (Version 2)
- COVID-19 Telehealth Billing Desk Guide
- Additionally, a new Medicaid Handbook Transmittal Letter (MHTL) will be posted by 4/15/20

Please visit Ohio Medicaid’s COVID-19 website for ongoing updates. Additional questions and feedback regarding Medicaid policy can be directed to medicaid@medicaid.ohio.gov. OhioMHAS-certified providers can contact BH-Enroll@medicaid.ohio.gov.

Additional COVID-19 information and resources can be found at coronavirus.ohio.gov or by calling 1-833-4-ASK-ODH (1-833-427-5634).