



Deidre S. Gifford, MD, MPH, Commissioner

Effective Date: May 7, 2020
Contact: See below

TO: All Providers

RE: CMAP COVID-19 Response – Bulletin 30: Updated Audio-Only Behavioral Health (Telephonic) Services - NEW Billing Guidance

In response to the declaration of a public health emergency as the result of COVID-19 (coronavirus) in Connecticut, DSS is taking several temporary steps to address the needs of our shared members as well as the provider community in order to facilitate prompt testing for the virus when medically necessary, help reduce unnecessary exposure to health care workers and the general public, and generally help address and contain the spreading of the virus.

DSS is updating the billing guidance for Behavioral Health (BH) services that are rendered telephonically (audio only) under the Connecticut Medical Assistance Program (CMAP). This provider bulletin (PB) supersedes the guidance stated in PB 2020-14 under section “Behavioral Health Services Rendered to Established Patients via the Telephone” and PB 2020-45 “Updated Guidance Regarding Audio-Only Telephone Services and Guidance Regarding the Use of Synchronized Telemedicine Services for Supervision of Resident Services”. All other guidance in PB 2020-14 and PB 2020-45 remains in effect.

UPDATE: AUDIO-ONLY BEHAVIORAL HEALTH TELEPHONE SERVICES:

The following procedure codes previously used for BH services rendered via telephone (audio-only) will be **end-dated effective May 6, 2020**.

Procedure Code	Description
98967	Telephone assessment and management service, 11-20 minutes of medical discussion
98968	Telephone assessment and management service, 21-30 minutes of medical discussion

Effective for dates of service (DOS) on or after **May 7, 2020**, until the state deems COVID-19 to no longer be a public health emergency (the Temporary Effective Period) the following procedure codes can be used to bill BH services for both new and established patients. The identified modifier must be submitted on the claim to signify that the services are rendered via audio-only (telephone).

Procedure Code	Mod	Description
90791	CR	Psych Diag Eval
90792	CR	Psych Diag Eval with E&M
90832	CR	Psytx w pt 30 minutes
90833	CR	Psytx w pt w/e&m 30 min
90834	CR	Psytx w pt 45 minutes
90836	CR	Psytx w pt w/e&m 45 min
90837	CR	Psytx w pt 60 minutes
90838	CR	Psytx w pt w/e&m 60 min
90847	CR	Family psytx w/pt 50 min
90846	CR	Family therapy w/o pt 50 min
S9484 S9485	CR	Emergency Mobile Psychiatric Services (EMPS)

*All of these services will be paid at the same rate as the equivalent in-person services when rendered as an audio-only service

Med Management - Psychiatric Service Only*		
99201 - 99205	CR	Office/outpatient visit (New patients)
99211 - 99215	CR	Office/outpatient visit est (Established patients)

* **Please note:** Medication management can be the only service rendered on that DOS when billing with the 99201-99215 via audio-only.

Outpatient Hospitals must bill the Revenue Center Code (RCC)/Procedure code/Modifier combination when the above services are rendered via audio-only (telephone).

MODIFIER:

Effective for dates of service on or after May 7, 2020, modifier **CR - Catastrophe Related Claims must** be appended to all claims when one of the BH services listed above is rendered telephonically. Please continue to follow the guidance specified in PBs 2020-09, 2020-10 and 2020-14 in relation to BH services rendered via synchronized telemedicine (audio and visual).

PROVIDERS ELIGIBLE TO BILL BH SERVICES VIA THE TELEPHONE:

The services listed above may only be billed by the following categories of CMAP enrolled providers: independent licensed behavioral health clinicians (licensed psychologists, licensed clinical social workers (LCSWs), licensed marital and family therapists (LMFTs), licensed professional counselors (LPCs), and licensed alcohol and drug counselors (LADCs)), behavioral health clinics (including enhanced care clinics), outpatient hospital behavioral health clinics, public and private psychiatric, outpatient hospital clinics, free-standing medical clinics (including school-based health centers), chronic disease hospitals, rehabilitation clinics, behavioral health FQHCs, physicians, advanced practice registered nurses, and physician assistants.

FQHCs are reminded that payment is limited to one behavioral health encounter rate per member per date of service.

GENERAL TELEMEDICINE AND TELEPHONIC GUIDELINES:

All providers must follow the guidelines published by DSS related to the provision of telemedicine and telephonic services. Providers should refer to the policies and guidelines outlined in PB 2020-09, PB 2020-10 and PB 2020-14 and all other subsequent PBs and provider communications that address CMAP’s temporary telemedicine and telephonic coverage in response to COVID-19. Additional clarification is also provided in the “Updated COVID-19 Information and FAQs” posted on the CMAP Web site.

Please refer to these documents for policies and guidance related, but not limited to, the following:

- General provider requirements for the provision of telemedicine and telephonic services (informed consent, provider and patient verification)
- Additional codes covered under Telemedicine and Telephonic Services
- Use of modifiers and Place of Service Codes for Telemedicine Services
- Location of the provider at the time that the service is rendered
- Guidance related to the use of HIPAA compliant software.

Billing Questions:

For questions about billing or if further assistance is needed to access the fee schedules on the Connecticut Medical Assistance Program Web site, please contact the Provider Assistance Center, Monday through Friday from 8:00 a.m. to 5:00 p.m. at 1-800-842-8440.

Posting Instructions:

Policy transmittals can be downloaded from the Web site at www.ctdssmap.com.

Distribution:

This policy transmittal is being distributed to providers of the Connecticut Medical Assistance Program by DXC Technology.

Responsible Units:

DSS, Division of Health Services:

Behavioral Health – William Halsey at William.halsey@ct.gov or Hector Massari at Hector.Massari@ct.gov

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