



Deidre S. Gifford, MD, MPH, Commissioner

Effective Date: March 18, 2020
Contact: Refer to Responsible Units

TO: All Providers

RE: CMAP COVID-19 Response – Bulletin 29: Updated Guidance Regarding Audio-Only Telephone Services and Guidance Regarding the Use of Synchronized Telemedicine Services for Supervision of Resident Services

Effective for dates of service on and after March 18, 2020 until the Department of Social Services (DSS) has notified providers in writing that the state has deemed COVID-19 no longer to be a public health emergency (the “Temporary Effective Period”), DSS is (1) expanding coverage of audio-only telephone services to new patients and (2) providing guidance related to the supervision of residents through the use of synchronized telemedicine under the Connecticut Medical Assistance Program (CMAP).

Updated Guidance Regarding Audio-Only Telephone Services:

In accordance with guidance issued by the Centers for Medicare and Medicaid Services (CMS), effective for dates of service retroactive to March 18, 2020 and after, DSS is expanding coverage for the following audio-only telephone procedure codes to new patients.

Code	Description
99442	Physician telephone patient service, 11-20 minutes of medical discussion
99443	Physician telephone patient service, 21-30 minutes of medical discussion
*98967	Telephone assessment and management service, 11-20 minutes of medical discussion (to be used for Behavior Health (BH) services)

*98968	Telephone assessment and management service, 21-30 minutes of medical discussion (to be used for BH services)
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Providers may bill the appropriate audio-only telephone procedure codes for a new patient in addition to established patients in accordance with the guidance issued in PB 2020-14 (*CMAP COVID-19 Response – Bulletin 4: Expanded Telemedicine and New Audio-Only (Telephonic) Services*) and all other subsequent PBs and provider communications that address CMAP’s temporary 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 note that DSS will be issuing further guidance related to the billing for BH services (including medication management) rendered via telephone to new and established patients. Please continue to monitor the Connecticut Medical Assistance Program (CMAP) website for future policy bulletins and billing guidance.*

Use of Synchronized Telemedicine Services for Supervision of Resident Services:

Effective for dates of service retroactive to March 18, 2020 and after, DSS is following guidance issued by CMS regarding the supervision requirements of services performed by residents. Unless otherwise noted in this PB, all other applicable requirements stated in PB 2016-40 – *Documentation and Billing Guidelines for*

Services Performed by Residents remain in effect.

During the Temporary Effective Period, the requirement of a teaching physician to be present during the key and critical portions of a service can be met, at a minimum, through synchronized telemedicine (live audio and video), as defined in Provider Bulletin (PB) 2020-09. The teaching physician must provide supervision during the key and critical portions of the service either by being physically present or being present through the use of synchronized telemedicine. In the case of surgical, high-risk, or other complex procedures, the teaching physician must be physically present during the key and critical portions of the service and be immediately available during the entire service. Supervision of residents cannot be fulfilled by audio-only.

Primary Care Exception:

As is the case under Medicare, DSS will permit reimbursement for all levels of an Office and Outpatient Evaluation and Management (E/M) services provided in primary care centers when rendered by a resident under the supervision of a teaching physician. During the Temporary Effective Period, supervision requirements can be met, at a minimum through synchronized telemedicine. Supervision of residents cannot be fulfilled by audio-only.

Billing Questions:

For questions about billing or if further assistance is needed to access the fee schedules on the Connecticut Medical Assistance Program (CMAP) 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.

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