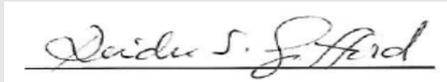




**Connecticut Medical Assistance Program
Policy Transmittal 2020-19**

**Provider Bulletin 2020-24
March 2020**



Deidre S Gifford, MD, MPH, Commissioner

Effective Date: March 20, 2020
Contact: Dana.robinson-rush@ct.gov

TO: Rehabilitation Clinics

RE: CMAP COVID-19 Response – Bulletin 9 Emergency Temporary Telemedicine Coverage for Specified Therapy Services Rendered at Rehabilitation Clinics

As an interim measure in response to the Governor’s recent declaration of a public health emergency as the result of the outbreak of COVID-19 (coronavirus), the Department of Social Services (DSS) is temporarily expanding telemedicine to cover specified physical therapy (PT), occupational therapy (OT) and speech and language pathology (SLP) services.

Effective for dates of service March 20, 2020 until DSS has notified providers in writing that the state has deemed COVID-19 to no longer to be a public health emergency (the “Temporary Effective Period”), specified PT, OT and SLP services will be permissible to be rendered via synchronized telemedicine to **established patients**. Please refer to **PB 2020-09 – New Coverage of Specified Telemedicine Services under the Connecticut Medical Assistance Program (CMAP)** for DSS’s general telemedicine coverage parameters. Except as otherwise specified below, all provisions of PB 2020-09 and PB 2020-14 remain in effect.

Note: Please carefully review the entirety of this bulletin along with all other provider bulletins and documents (i.e. FAQs) found on the Connecticut Medical Assistance Program (CMAP) Web site, <https://www.ctdssmap.com>.

Eligible Services:

Effective for dates of service March 20, 2020 until the state deems COVID-19 to no longer

be a public health emergency, the following rehabilitation clinic services may be rendered via telemedicine for **established patients only**:

CPT Code	Description
97010	Hot or cold packs therapy
97012	Mechanical traction therapy
97014	Electric stim therapy
97016	Vasopneumatic device therapy
97022	Whirlpool therapy
97110	Therapeutic exercises
97112	Neuromuscular reeducation
97113	Aquatic therapy/exercises
97129	Ther ivntj 1st 15 min
97130	Ther ivntj ea addl 15 min
97533	Sensory Integration
92507	Treatment of speech, language, voice, comm., and/or hearing processing disorder
92521	Evaluation of speech fluency
92522	Evaluation of speech sound production
92523	Evaluation of speech sound production w/ evaluation of language comprehension and expression

Please Note: Evaluations, reevaluations and group therapy services are **not** eligible to be performed via telemedicine.

Billing and Documentation Guidelines:

As noted in PB 2020-09, subject to all other applicable requirements for reimbursement

under the CMAP, the following guidelines apply to all service rendered via telemedicine:

- Reimbursement/payment rates are the same as for equivalent in-person services;
- Comply with all CMAP requirements that would otherwise apply to the same service performed in-person, including, but not limited to, enrollment, scope of practice, licensure, supervision, documentation, and other applicable requirements;
- Providers should use “Place of Service” (POS) 02 when furnishing telemedicine services from a distant site;
- Documentation must be maintained by the provider to substantiate the medical necessity of the services provided; and
- If a telehealth service cannot be provided or completed for any reason, such as due to a technical difficulty, providers shall not submit a claim.

Modifiers:

All providers billing for telemedicine services must append the applicable telemedicine modifier to their claim. As noted in PB 2020-09, the following modifiers are being appended on claims when services were rendered via telemedicine:

- Modifier “GT” is used when the member’s originating site is located in a healthcare facility or office; or
- Modifier “95” is used when the member is located in the home.

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 Unit:

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