

COVID-19 update: Guidance for telehealth/telephonic care for behavioral health services

To help address providers' questions regarding behavioral health telehealth/telephonic care specifically, Amerigroup has developed the following frequently asked questions. To view our overall care provider guidance about COVID-19 including our actions, testing, treatment and more, view the FAQ titled: *COVID-19 information from Amerigroup* on our home page in this same section.

Please continue to visit this website regularly, as we will be updating the information as it becomes available. Thank you for the work you do for our members, especially during these difficult times.

These changes for telehealth visits began on March 17, 2020, through September 30, 2020, where permissible. We will continue to actively monitor the rapidly evolving situation.

What codes would be appropriate to consider for mental health and substance abuse outpatient services using telehealth (audio + video)?

Amerigroup would recognize psychiatric diagnostic evaluation (90791-90792), psychotherapy (90832-90838, 90839-90840, 90845-90847), and medication management (90863) and E&M codes (99211-99215) visits within the member's benefits.

What codes would be appropriate to consider for the delivery of ABA therapy using telehealth (audio + video)?

Amerigroup would recognize ABA therapy for functional behavior assessment (FBA) (97151) adaptive behavioral treatment by protocol or protocol modification (97153, 97155) and telehealth caregiver training (97156, 97157) visits within the member's benefits.

Are ABA providers allowed to use the hours approved in a current authorization for telehealth (audio + video) ABA services?

If an ABA provider is not requesting changes to existing authorized codes or units, they can continue to use the authorization they have on file. No further action is required by the provider.

If an ABA provider is requesting changes to the authorization we have in place, such as changes to units or codes, they must submit a request for the change by submitting a new treatment

<https://providers.amerigroup.com>

* Availity is an independent company providing administrative services on behalf of Amerigroup.

Amerigroup STAR+PLUS MMP (Medicare-Medicaid Plan) is a health plan that contracts with both Medicare and Texas Medicaid to provide benefits of both programs to enrollees.

Amerigroup members in the Medicaid Rural Service Area and the STAR Kids program are served by Amerigroup Insurance Company; all other Amerigroup members in Texas are served by Amerigroup Texas, Inc.

request form outlining the changes they are requesting. Please include current authorization reference number and date of change being requested.

If an ABA provider is requesting new authorization of code or units, they should follow the process already in place by submitting the request via fax or through the Availity Portal.

How is Amerigroup approaching the provision of mental health outpatient and substance abuse outpatient services via telephonic-only visits?

Amerigroup is making adjustments in our policy in the provision of these telephonic-only services to address the need for expanded access outside of telehealth (audio + video) to include telephonic-only visits with in-network providers and out-of-network providers where required. We expect all mental health outpatient and substance abuse outpatient care will still be provided within benefits limits, authorization limits, medical necessity criteria, and within state and federal regulatory requirements and licensure requirements including HIPAA compliance and the regulations regarding how substance use information is handled. These changes for telephonic-only visits are effective March 19, 2020, through September 30, 2020. We will continue to actively monitor the rapidly evolving situation.

What codes would be appropriate to consider for mental health outpatient and substance abuse outpatient services via telephonic audio-only visits?

Effective March 19, 2020, through September 30, 2020, Amerigroup would recognize audio-only time based codes, (99441, 98966, 99442, 98967, 99334, 98968).

In addition, Amerigroup would recognize telephonic-only services for diagnostic evaluation (90791-90792), psychotherapy (90832-90838, 90839-90840, 90845-90847), and medication management (90863).

Can behavioral health providers conduct IOP, PHP, psychological testing and the ABA services via telephonic-only care?

No, these services require face-to-face interaction and, therefore, are not appropriate for telephonic-only consultations. Amerigroup is allowing these services to be billed via telehealth (audio + video).

What Place of Service and Modifier should be on the claim?

Place of Service 02 and Modifier 95 should be submitted on Telehealth claims.

What if I have additional questions pertaining to behavioral health telehealth (audio + video) or telephonic-only care visits?

Please contact Provider Services at the appropriate number below:

- Medicaid: 1-888-821-1108