

# **Vermont Medicaid: Telehealth, Telemedicine & Telephonic Coverage**

Updated Guidance to Support Medicaid Providers  
During the Emergency Response to COVID-19

# Protecting Health and Well-being during an Emergency Response to COVID-19

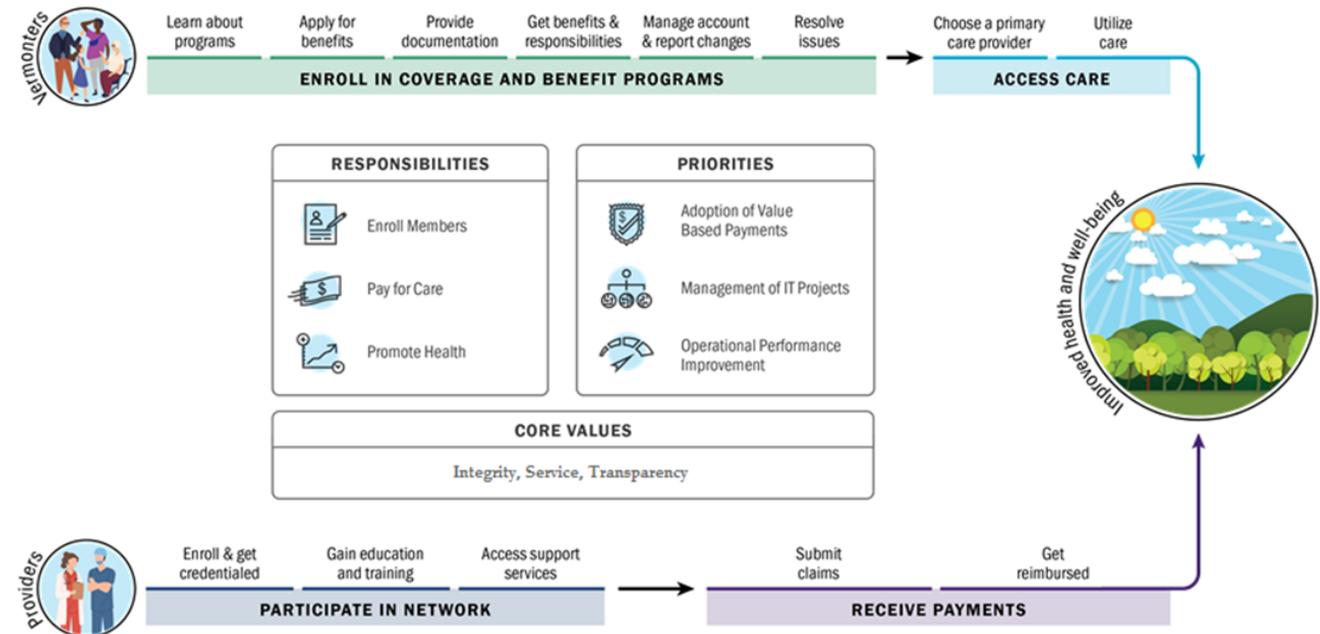
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**DVHA's mission is to improve the health and well-being of Vermonters by providing access to quality health care cost effectively.**

## Summary of Presentation:

- Vermont Medicaid providers are encouraged to continue to use telemedicine to care for their Medicaid members during this Emergency when possible;
- As telemedicine (2-way, real-time, audio and video/visual) may not be possible for Medicaid providers to reach all their Medicaid members requiring care during this Emergency, Vermont Medicaid will be temporarily providing reimbursement for medically necessary and clinically appropriate services delivered by communications technology, including telephone, from a date of service of 3/13/2020.

<https://dvha.vermont.gov/news/state-emergency-declared-community-mitigation-strategies-response-covid-19>  
<https://dvha.vermont.gov/covid-19>  
<https://humanservices.vermont.gov/sites/ahsnew/files/documents/MedicaidPolicy/3.101-telehealth-rule-adopted-rule.pdf>



# Telehealth & Telemedicine

For the purposes of Vermont Medicaid, **telehealth** refers to methods for health care service delivery using telecommunications technologies. Telehealth includes:

- Telemedicine (**2-way, real-time, audio and video/visual interactive communication** through a secure connection that complies with HIPAA);
- Store and forward (the asynchronous transfer of medical information from provider at one site to a provider at a distant site through a secure connection that complies with HIPAA);
- Telemonitoring (the remote monitoring of a member's health-related data, i.e. by a home health agency).

<https://www.medicaid.gov/medicaid/benefits/telemedicine/index.html>

<https://humanservices.vermont.gov/sites/ahsnew/files/documents/MedicaidPolicy/3.101-telehealth-rule-adopted-rule.pdf>

# Vermont Medicaid & Telemedicine

**Telemedicine:** Refers to health care delivery by a Medicaid provider who is located at a distant site from the Medicaid member at the originating site for the purposes of evaluation, diagnosis, consultation, or treatment using **2-way, real-time, audio and video/visual interactive communication.**

- Seeks to improve a patient's health by connecting the patient with a provider at a distant site;
- Includes **audio and video interactive communication** through a secure connection that complies with HIPAA\* but the HIPAA compliant platform requirement is essentially WAIVED per federal guidance and through Act 91 of 2020 during this Emergency response to COVID-19.

<https://www.medicaid.gov/medicaid/benefits/telemedicine/index.html>

<https://humanservices.vermont.gov/sites/ahsnew/files/documents/MedicaidPolicy/3.101-telehealth-rule-adopted-rule.pdf>

<https://www.hhs.gov/about/news/2020/03/17/ocr-announces-notification-of-enforcement-discretion-for-telehealth-remote-communications-during-the-covid-19.html> & \*Health Insurance Portability and Accountability Act of 1996 (HIPAA) &

<https://legislature.vermont.gov/Documents/2020/Docs/ACTS/ACT091/ACT091%20As%20Enacted.pdf>



# Continuing Telemedicine Coverage During the Emergency Response to COVID-19

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**Telemedicine:** Vermont Medicaid will continue to cover health care delivery by a Medicaid provider who is located at a distant site from the Medicaid member at the originating site for the purposes of evaluation, diagnosis, consultation, or treatment using **2-way, real-time, audio and video/visual interactive communication** just as it did before the Emergency with this change:

- The 'secure connection that complies with HIPAA' requirement is essentially [WAIVED per federal guidance](#) and Act 91 of 2020 during this [Emergency](#) response to COVID-19;
- Providers will continue to bill as normal with their service-specific codes and the Place of Service (02) for telehealth/telemedicine.

<https://www.medicaid.gov/medicaid/benefits/telemedicine/index.html>

<https://humanservices.vermont.gov/sites/ahsnew/files/documents/MedicaidPolicy/3.101-telehealth-rule-adopted-rule.pdf>

<https://www.hhs.gov/about/news/2020/03/17/ocr-announces-notification-of-enforcement-discretion-for-telehealth-remote-communications-during-the-covid-19.html>

<https://www.hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/index.html> &

<https://legislature.vermont.gov/Documents/2020/Docs/ACTS/ACT091/ACT091%20As%20Enacted.pdf>



AGENCY OF HUMAN SERVICES  
DEPARTMENT OF VERMONT HEALTH ACCESS

# New Temporary Coverage of Services Delivered by Telephone During the Emergency Response to COVID-19

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During the [Emergency](#) response to COVID-19, Vermont Medicaid will provide reimbursement for Medicaid providers delivering medically necessary and clinically appropriate services, including those delivered [by telephone \(audio-only\)](#) as follows:

- **The use of 3 ‘triage’ codes (G0071 [for FQHCs & RHCs only], G2012, and G2010) to allow providers to receive payment for brief virtual communication services used to determine whether an office visit or other service is needed. These codes should only be billed if they do not result in a service needing to be delivered in the next 24 hours (or next available appointment) and the virtual check-in/remote evaluation is not related to a service provided in the past 7 days;**
- **Providing reimbursement at the same rate for medically necessary, clinically appropriate services (e.g. new patient and established patient office visits, psychotherapy, etc.) delivered by telephone as the rate currently established for Medicaid-covered services provided through telemedicine/face-to-face as long as the claim is submitted to Vermont Medicaid with a **V3 modifier** (to indicate “service delivered via telephone, i.e. audio-only”) and a **place of service code of “99 – other.”****

<https://dvha.vermont.gov/covid-19>

# Vermont Medicaid: Coverage and Provider Requirements

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For the purposes of Vermont Medicaid, the coverage and provider requirements are:

- **Coverage Requirements:** Medically necessary and clinically appropriate; providers must work within the scope of their practice and be enrolled with Vermont Medicaid.
- **Provider Requirements:** Meet or exceed federal and state legal requirements of medical and health information privacy (including telemedicine compliance with HIPAA – but the ‘secure connection that complies with HIPAA’ requirement is essentially [WAIVED per federal guidance](#) and [Act 91 of 2020](#) during this [Emergency](#) response to COVID-19). Additional requirements may be found in the link to the Rule for telehealth, below.

<https://humanservices.vermont.gov/sites/ahsnew/files/documents/MedicaidPolicy/3.101-telehealth-rule-adopted-rule.pdf> & <https://www.hhs.gov/about/news/2020/03/17/ocr-announces-notification-of-enforcement-discretion-for-telehealth-remote-communications-during-the-covid-19.html> & <https://legislature.vermont.gov/Documents/2020/Docs/ACTS/ACT091/ACT091%20As%20Enacted.pdf>

# Vermont Medicaid: Provider Services Contact Information for Provider Recommendations

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- Vermont Medicaid Provider Services may be reached at **1-802-878-7871** (press 3);
- A process has been established to collect provider recommendations for additional service-specific codes to be reviewed for delivery by telephone during the Emergency through Provider Services;
- [Reference Charts](#) are being regularly updated and posted to the DVHA COVID-19 website;
- A [Frequently Asked Questions \(FAQs\)](#) document is being regularly updated and posted to the DVHA COVID-19 website.

<https://dvha.vermont.gov/covid-19> & additional resources at: <http://www.vtmedicaid.com/#/home>,  
<http://www.vtmedicaid.com/#/feeSchedule>

# Vermont Medicaid: Preliminary Data for Telemedicine, Telephonic, and Brief Virtual Communication Services

	Telemedicine <sup>1</sup>	Telephone <sup>2</sup>	Brief Virtual <sup>3</sup>
March of 2020*	15,324	3,795	261
April of 2020*	28,404	9,764	480

**By contrast, from January 2019 to February 2020, the highest total number of telemedicine services per month was 1,636 (January of 2020).**

\*Based on claims submitted for dates of service in March or April of 2020; as more claims are submitted, it is anticipated that the service counts will increase.

<sup>1</sup> Two-way, real-time, audio and video (visual) interactive communication.

<sup>2</sup> Audio-only; temporary coverage and reimbursement for medically necessary and clinically appropriate services furnished by telephone effective for dates of service on/after March 13, 2020.

<sup>3</sup> Brief virtual communication services, commonly referred to as the 'triage codes,' include G0071, G2012, & G2010.

<https://dvha.vermont.gov/covid-19>