

## **Molina Healthcare 2020 COVID-19 Response: Therapy Delivered via Telehealth**

In response to the current COVID-19 pandemic, Molina Healthcare of Texas is allowing for therapy services to be delivered via telehealth for Medicaid (STAR, STAR+PLUS, MMP-LTSS), CHIP, Medicare (MMP acute or DNSP) and Marketplace members. Changes to Molina's authorization process and requirements have been made to accommodate the delivery of therapy services via telehealth.

### **Medicaid/CHIP Guidance:**

#### **Teletherapy Requirements for Current Authorizations (Approved as of 04/2/2020)**

Molina will temporarily honor existing Medicaid (STAR, STAR+PLUS, MMP - LTSS) and CHIP authorizations for therapy services including physical, occupational and speech therapy (PT/OT/ST) services delivered via telehealth services when the services:

- include Texas Medicaid payable procedure codes per the Texas Medicaid Fee Schedule;
- the delivery of therapy services complies with regulatory, professional licensing agency, and national therapy practice guidelines;
- the therapy is delivered consistent with ethical practice guidelines;
- the claims contain the appropriate modifiers (-95) and place of service per Health and Human Services Commission (HHSC) guidance; and
- documentation meets regulatory requirements including that for members under the age of 13, the member's adult caregiver or designated health professional must participate for the entire duration of each telehealth session.

As a reminder, telehealth services must be delivered by an interactive audiovisual connection to the member. Use of a telephone or live chat without concurrent audio and visual connectivity does not meet these standards.

It is not necessary to contact Molina to update the authorization place of service, please bill the place of service as originally approved on the authorization request.

This guidance is consistent with the Texas HHSC guidance related to telehealth services outlined online at [tmhp.com](http://tmhp.com). More information can be found in the Texas Medicaid Provider Procedures Manual (TMPPM) and the Telecommunication Services Handbook.

## **Medicare Teletherapy Guidance for MMP Acute and DSNP (Published 3/30/2020)**

Clinicians may provide teletherapy services to new or established Molina members. Medicare allowable codes for PT/OT/ST teletherapy are:

- CPT: 97161-97168; 97110, 97112, 97116, 97535, 97550, 97755, 97760, 97761, 92521-92524, 92507
- E-visit: HCPCS G2061 or G2063

## **Marketplace Teletherapy Guidance**

Providers can reference the [Texas Medical Board FAQ](#) for information on providing telemedicine services during the Texas Disaster Declaration for the COVID-19 Pandemic. This FAQ includes information on the TDI emergency telemedicine rule, documentation requirements, billing information and more for teletherapy services.

## **Authorization Requirements for All New Medicaid, CHIP, Marketplace and Medicare Therapy Requests**

Any new authorization request (as of 4/3/2020) for Medicaid (STAR, STAR+PLUS, MMP-LTSS), CHIP, Marketplace or Medicare (MMP acute or DSNP) telehealth therapy services must provide a clear indication of what services will be delivered via telehealth and the specific technology that will be used to deliver those services. Authorization requests are reviewed for medical necessity and appropriateness. Molina may conduct retrospective claims audits of teletherapy to assure that billed services meet regulatory requirements and practice standards.



Your Extended Family

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5605 N. MacArthur Blvd., Suite 400 | Irving, TX 75038

[MolinaHealthcare.com](http://MolinaHealthcare.com)