

Provider Memorandum

Telehealth Billing Guidelines

Molina Healthcare of Illinois (Molina) requires all providers to follow the telehealth billing requirements provided by the Illinois Department of Health and Family Services (HFS) when billing Molina. Telehealth involves the use of electronic information and telecommunication technology to support and promote clinical health care, as well as health services and information for Molina providers and members. Using this service allows Molina to help its members with health concerns remotely. **Molina contracted providers must abide by certain requirements when administering telehealth services:**

Impacted Line of Business: HealthChoice Illinois and HealthChoice Illinois MLTSS

Telemedicine Requirements

- A physician or other licensed health care professional must be present with the patient at the originating service site. The health care professional is no longer required to be in the same room as the patient.
- The distant site provider must be a physician, physician assistant, podiatrist or advanced practice nurse who is licensed by the state of Illinois or by the state where the patient is located.
- The originating and distant site provider must not be terminated, suspended or barred from the HFS Medicaid medical programs.
- Medical data maybe exchanged through a telecommunication system.
- The interactive telecommunication system must, at a minimum, have the capability of allowing the consulting distant site provider to examine the patient sufficiently to allow proper diagnosis of the involved body system. The telecommunication system must also be capable of transmitting clearly audible heart tones and lung sounds, as well as clear video images of the patient and any diagnostic tools, such as radiographs.

Telepsychiatry Requirements

- A physician, licensed health care professional or other licensed clinician, mental health professional (MHP), or qualified mental health professional (QMHP), as defined in 59 III. Adm. Code 132.25, must be present with the patient at the site, but is no longer required to be present in the same room as the patient.
- The distant site provider must be a physician licensed by the state of Illinois or by the state where the patient is located and must have completed an accredited general psychiatry residency program, or an accredited child and adolescent psychiatry residency program.
- The originating and distant site provider must not be terminated, suspended or barred from the HFS Medicaid medical programs.
- Telepsychiatry services must be rendered using an interactive telecommunication system.
- Group psychotherapy is not a covered telepsychiatry service.

Please see the billing examples for telehealth procedures on the following pages for both physician/practitioners and Encounter Clinics. There are additional resources for provider reference listed after the example charts.

Billing Examples for Telemedicine Services for Physicians/Practitioners

(HFS - Chapter 200 Handbook for Practitioner Services Appendix A-10)

	Originating Site and Billing Example	Distant Site and Billing Example
Example	Physician's Office	Podiatrist's Office
1	Bill Healthcare Common Procedure Coding	Bill appropriate CPT code with modifier GT and Place of
	System (HCPCS) Code Q3014	Service (POS) 02. Provider reimbursement will be based on
	,	the fee schedule rate for the CPT code billed.

	Originating Site and Billing Example	Distant Site and Billing Example
Example 2	Local Health Department Bill HCPCS Code Q3014	APN (Licensed Advanced Practice Nursing) Office. Bill appropriate CPT code with modifier GT and POS 02. Provider reimbursement will be based on the fee schedule rate for the CPT code billed.
Example 3	Physician's Office Bill HCPCS Code Q3014	Local Health Department Not a valid provider. There is no billable service.
Example 4	Encounter Clinic Bill the encounter HCPCS Code T1015 and any appropriate detail code(s) with modifier GT on the detail line(s) provider reimbursement will be based on the facility's medical encounter rate.	Encounter Clinic There is no billable service; the originating encounter clinic is responsible for payment to the distant encounter clinic provider.
Example 5	Encounter Clinic Bill the encounter HCPCS Code T1015 and any appropriate detail code(s) with modifier GT on the detail line(s). Provider reimbursement will be based on the facility's medical encounter rate.	Physician's Office There is no billable service; the originating encounter clinic is responsible for payment to the distant encounter clinic provider.
Example 6	Physician's Office Bill HCPCS Code Q3014	Encounter Clinic Bill the encounter HCPCS Code T 1015 and any appropriate detail code(s) with modifier GT and POS 02 on the detail line(s). Provider reimbursement will be the facility's medical encounter rate. The rendering provider's name and NPI must also be reported on the claim.

Billing Examples for Telepsychiatry Services for Physicians/Practitioners (HFS - Chapter 200 Handbook for Practitioner Services Appendix A-10)

	Originating Site and Billing Example	Distant Site and Billing Example
Example 1	Physician's Office Bill HCPCS Code Q3014	Physician who has completed an approved general or child/adolescent psychiatry residency program. Bill the appropriate CPT code for services provided. Reimbursement will be based on the fee schedule rate for the CPT code billed.
Example 2	Encounter Clinic (Federal Qualified Health Center (FQHC) Rural Health Care (RHC) and Encounter Rate Clinic (ERC) Bill the encounter HCPCS Code T 1015 and any appropriate detail code(s) with modifier on the detail line(s). Provider reimbursement will be based on the facility's medical encounter rate.	Encounter Clinic There is no billable service; the originating encounter clinic is responsible for payment to the distant encounter clinic provider. Provider rendering the service must be a physician who has complete an approved general or child/adolescent psychiatry residencyprogram.
Example 3	Physician's Office Bill HCPCS Code Q3014	Encounter Clinic Bill the encounter HCPCS Code T 1015 and any appropriate detail code(s) with modifier GT on the detail line(s). Provider rendering the service must be a physician who has completed an approved general or child/adolescent psychiatryresidency program. Provider reimbursement will be based on the facility's medical encounter rate.

	Originating Site and Billing Example	Distant Site and Billing Example
Example	Encounter Clinic	Physician's Office
4	Bill the encounter HCPCS Code T 1015 and any appropriate detail code(s) with modifier GT on the detail line(s). Reimbursement will be based on the facility's medical encounter rate.	There is no billable service; the originating encounter clinic is responsible for payment to the distant encounter clinic provider. Provider rendering the service must be a physician who has completed an approved general or child/adolescent psychiatry residency program.

Billing Examples for Telemedicine Services for Encounter Clinic Service provider types of Federally Qualified Health Center (FQHC), Rural Health Clinic (RHC) & Encounter Rate Clinics (ERC): (HFS Chapter 200 handbook for Encounter Clinic Services Appendix D-3)

	Originating Site and Billing Example	Distant Site and Billing Example
Example 1	Encounter Clinic Bill the encounter HCPCS Code T1015, along with any additional appropriate detail code(s). Maximum provider reimbursement will be based on the facility's medical encounter rate.	Encounter Clinic There is no billable service; the originating encounter clinic is responsible for payment to the distant encounter clinic provider. The distant site rendering provider's name and NPI must also be reported on the claim.
	Bill the encounter HCPCS Code T 1015 on line 1. Additional appropriate detail code(s) along with the GT modifier with place of service 02 should be on subsequent lines. Maximum reimbursement will be the facility's medical encounter rate.	There is no billable service; the originating encounter clinic is responsible for payment to the distant encounter clinic provider.
Example 2	Encounter Clinic Bill the encounter HCPCS Code T 1015, along with any additional appropriate detail code(s). Maximum provider reimbursement will be based on the facility's medical encounter rate. Bill the encounter HCPCS Code T 1015 on line 1. Additional appropriate detail code(s) along with the GT modifier with place of service 02 should be on subsequent lines. Maximum reimbursement will be the facility's medical encounter rate.	Physician/Advanced Practice Nurse (APN)/Podiatrist'sOfficeThere is no billable service; the originating encounter clinic is responsible for payment to the distant site provider. The distant site rendering provider's name and NPI must also be reported on the claim.There is no billable service; the originating encounter clinic is responsible for payment to the distant site provider.
Example 3	Physician/Advance Practice Nurse (APN)/ Podiatrist's Office Bill HCPCS Code Q3014.	Encounter Clinic Bill the encounter HCPCS Code T 1015 and any appropriate detail code(s) with modifier GT and POS 02 on the detail line(s). Maximum provider reimbursement will be based on the facility's medical encounter rate. The rendering provider's name and NPI must also be reported on the claim. Bill the appropriate CPT code with modifier GT; POS 02. Maximum reimbursement will be the fee schedule rate for the CPT code billed.

Billing Examples for Telepsychiatry Services for Encounter Clinic Service provider types of Federally Qualified Health Center (FQHC), Rural Health Clinic (RHC) & Encounter Rate Clinics (ERC)

(HFS Chapter 200 handbook for Encounter Clinic Services Appendix D-3)

	Originating Site and Billing Example	Distant Site and Billing Example
Example 1	Encounter Clinic Bill the encounter HCPCS Code T 1015 and HCPCs Code Q3014, along with any additional appropriate detail code(s). Maximum provider reimbursement will be based on the facility's medical encounter rate.	Encounter Clinic There is no billable service; the originating encounter clinic is responsible for payment to the distant encounter clinic provider. The distant site rendering provider's name and NPI must also be reported on the claim.
Example 2	Physician/Advance Practice Nurse (APN)/ Podiatrist's Office Bill HCPCS Code Q3014.	Encounter Clinic Bill the encounter HCPCS Code T 1015 and any appropriate detail code(s) with modifier GT and POS 02 on the detail line(s). Maximum provider reimbursement will be based on the facility's medical encounter rate. The rendering provider's name and NPI must also be reported on the claim.
Example 3	Encounter Clinic Bill the encounter HCPCS Code T 1015 and HCPCs Code Q3014, along with any additional appropriate detail code(s). Maximum provider reimbursement will be based on the facility's medical encounter rate.	Physician/Advance Practice Nurse (APN)/Podiatrist's Office There is no billable service; the originating encounter clinic is responsible for payment to the distant encounter clinic provider. The distant site rendering provider's name and NPI must also be reported on the claim.

Additional Reference Source:

Joint Committee on Administrative Rules ADMINIST RATIVE CODE Title 89: Social Services Chapter I: Department
of Healthcare and Family Services Subchapter d: Medical Programs Part 140 Medical Payment Section 140.403
Telehealth Services link page link: http://www.ilga.gov/commission/jcar/admincode/089/089001400D04030R.html

Questions

Providers who have questions, concerns or would like additional training, including how to use the Molina Provider Portal, may contact their provider network managers or email the Provider Network Management Department at <u>MHILProviderNetworkManagement@MolinaHealthcare.com</u>.

For help identifying your provider network manager please visit Molina's Service Area page at www.MolinaHealthcare.com.