

# Provider Memorandum

To protect the public health in connection with the present public health emergency, Molina will reimburse medically necessary and clinically appropriate telehealth services with dates of service on or after March 9, 2020 until the public health emergency no longer exists, that meet the following requirements:

## Telehealth: Telemedicine/ Telepsych

This notice informs providers of changes to telehealth policy due to the current public health emergency related to COVID-19.

Originating Site	Distant Site Providers
<p><b>Originating Sites eligible for a facility fee;</b></p> <ul style="list-style-type: none"> <li>• Physician Office</li> <li>• FQHC, RHC or ERC</li> </ul> <p><i>New/Temporary – Public Health Emergency</i></p> <ul style="list-style-type: none"> <li>• <b>New</b> Community Mental Health Center</li> <li>• <b>New</b> Substance Abuse Center licensed by the Department of Human Services Division of Substance Use Prevention and Recovery</li> <li>• <b>New</b> Supportive Living Program providers;</li> <li>• <b>New</b> Hospice providers;</li> <li>• <b>New</b> Community Integrated Living Arrangement (CILA) providers; and</li> <li>• <b>New</b> Providers who receive reimbursement for a patient's room and board, including nursing facilities and Intermediate Care Facilities for the Developmentally Disabled</li> </ul> <p><b>Additional Originating Sites;</b></p> <ul style="list-style-type: none"> <li>• <b>New</b> Patients Place of Residence</li> <li>• <b>New</b> Temporary Location within or outside the State of IL</li> </ul>	<p>Practitioner listed in <a href="#">140.403(b)(1)(B)</a> or <a href="#">(b)(2)(B)</a>;</p> <p><i>New/Temporary – Public Health Emergency</i></p> <ul style="list-style-type: none"> <li>• <b>New</b> Federally Qualified Health Center (FQHC) as defined in Section 1905(l)(2)(B) of the federal Social Security Act;</li> <li>• <b>New</b> Rural Health Clinic (RHC) or Encounter Rate Clinic (ERC);</li> <li>• <b>New</b> Licensed Clinical Psychologist (LCP);</li> <li>• <b>New</b> Licensed Clinical Social Worker (LCSW);</li> <li>• <b>New</b> Advanced Practice Registered Nurse certified in psychiatric and mental health nursing,</li> <li>• <b>New</b> Local Education Agency (LEA)</li> <li>• <b>New</b> School Based Health Center as defined in <a href="#">77 Ill. Adm. Code</a>, 641.10.</li> <li>• <b>New</b> Physical, Speech, or Occupational therapist as defined in <a href="#">140.457</a></li> <li>• <b>New</b> Dentist</li> <li>• <b>New</b> Local Health Department</li> <li>• <b>New</b> Community Health Agency</li> <li>• <b>New</b> Community Mental Health Center or Behavioral Health Clinic</li> <li>• <b>New</b> Hospital as defined in <a href="#">148.25</a></li> </ul>

Originating Site HCPCS	Distant Site Providers CPT / HCPCS
Q3014	<ul style="list-style-type: none"> <li>○ Place of Service: 02</li> <li>○ Modifier: GT</li> <li>○ All services in corresponding HFS fee schedule adequate and complete thru telehealth</li> <li>○ CMHC: Molina will reimburse for all behavioral health services detailed in <a href="#">140.453</a> (except for Mobile Crisis Response and Crisis Stabilization as defined in <a href="#">140.453(d)(3)</a>) and behavioral health services contained on an applicable IL HFS fee schedule</li> </ul>

**Distant Site for Inpatient or Emergency Department – *New/Temporary***

HCPCS Code	Description
G0406	Follow-up inpatient consultation, limited, physicians typically spend 15 minutes communicating with the patient via telehealth
G0407	Follow-up inpatient consultation, intermediate, physicians typically spend 25 minutes communicating with the patient via telehealth
G0408	Follow-up inpatient consultation, complex, physicians typically spend 35 minutes communicating with the patient via telehealth
G0425	Telehealth consultation, emergency department or initial inpatient, typically 30 minutes communicating with the patient via telehealth
G0426	Telehealth consultation, emergency department or initial inpatient, typically 50 minutes communicating with the patient via telehealth
G0427	Telehealth consultation, emergency department or initial inpatient, typically 70 minutes or more communicating with the patient via telehealth

**Telehealth Reimbursement:**

Reimbursement for telehealth services will continue to be made at the same rate paid for face-to-face services provided on-site. The distant site provider and originating site provider eligible for a facility fee must maintain adequate documentation of the telehealth services provided in accordance with the record requirements of section [140.403\(d\)](#).

**Additional New/Temporary- Public Health Emergency**

Molina will also reimburse for the following services that do not meet the definition of “telehealth services” during this public health emergency, including:

- Virtual Check In
- Online Patient Portal or “E-Visit”

**Virtual Check In**

- A brief communication technology-based service that uses audio-only real-time telephone interactions or synchronous, two-way audio interactions that are enhanced with video or other kinds of data transmission.

- Virtual check-ins must be rendered by a physician or advance practical nurse, or physician assistant who can report evaluation and management (E/M) services provided to an **established** patient,
- Virtual Check In cannot originate from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment.

The patient must verbally consent to receive Virtual Check In services.

- **Online Patient Portal or “E-Visit”**

- These services are non-face-to-face patient-initiated communications using online patient portals.
- These services can only be reported when the billing practice has an **established relationship with the patient**.
- For these encounters, the patient must generate the initial inquiry and communications can occur over a 7-day period.
- The patient must verbally consent to receive Patient Portal or “E-Visit” services.

“Virtual Check In” Codes	Online Patient Portal or “E-Visit” Codes
G2010	G2061 99421
G2012	G2062 99422
GT Modifier and POS 02 Required	G2063 99423
	GT Modifier and POS 02 Required

**Virtual Check In/ “E-Visit” Reimbursement:**

Molina will reimburse these codes at the lesser of the provider charge amount or the State Maximum rate established in Illinois HFS fee schedule [COVID-19 Fee Schedule](#).

**For additional Detailed Billing Guidelines**

- Please refer to <https://iamhp.net/providers>

**Questions**

Providers with questions may contact their provider network managers or email the Provider Network Management Department at [MHILProviderNetworkManagement@MolinaHealthcare.com](mailto:MHILProviderNetworkManagement@MolinaHealthcare.com).

Providers who need help identifying their assigned provider network manager may visit Molina’s Service Area page at <https://www.molinahealthcare.com/providers/il/medicaid/contacts/pages/servicearea.aspx>.

**Additional Reference sources:**

- Joint Committee on Administrative Rules ADMINISTRATIVE 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>
- Physician/Practitioner Appendix A-10 Telehealth Billing Examples A-10 page link: <https://www.illinois.gov/hfs/SiteCollectionDocuments/11817PractitionerAppendices.docx>
- Encounter Clinic(s) Chapter D-200 – Appendices page link: <https://www.illinois.gov/hfs/SiteCollectionDocuments/d200a.pdf>



Last Modified: 05/29/2020

- <https://www.illinois.gov/hfs/MedicalProviders/notices/Pages/prn200330d.aspx>
- <https://www.illinois.gov/hfs/SiteCollectionDocuments/FINALTelehealthRulesChangeFAQs03302020.pdf>
- <https://www.illinois.gov/hfs/SiteCollectionDocuments/COVID19FeeScheduleFINALRev05212020.pdf>
- <https://www.illinois.gov/hfs/MedicalProviders/notices/Pages/prn200320b.aspx>