

Optum Behavioral Health: COVID-19 updates to telehealth policies

Last update: March 19, 2020

United Behavioral Health (dba Optum Behavioral Health) and EAP are taking action to ensure health plan members affected by COVID-19 (coronavirus) have the support and resources they need. In order to make it easier for our members to receive appropriate treatment during this challenging time, we are encouraging providers and members to observe social distancing, isolation and guarantine rules as outlined by the CDC. To support this, consistent with an applicable Notice of Enforcement Discretion from the Office for Civil Rights (OCR) at the Department of Health and Human Services (Notice), on a temporary basis, health care providers, qualified and licensed in accordance with applicable regulations, may use audio or video communications technology immediately to deliver telephonic and telehealth care to Optum Behavioral Health plan members in addition to any HIPAA-approved telehealth technology as long as this method will effectively support the behavioral health needs of the individual member. Similarly, the Substance Abuse and Mental Health Services Administration (SAMHSA) has issued guidance regarding the medical emergency section to 42 CFR Part 2 to ensure that substance use disorder treatment services are uninterrupted during this public health emergency. With respect to the latter, we encourage providers covered by 42 CFR Part 2 to confirm the application of the medical emergency exception, or some other permission, and proceed with the guidance below.

Immediate care options open to all behavioral health providers during the national COVID-19 health crisis:

Telephonic care:

For providers who do not have access to HIPAA-approved technology typically required to conduct a video-enabled virtual session, or video chat platforms as listed below, telephonic services can begin **immediately**. Providers do not need to attest through our virtual visits process to provide telephonic care. Please refer to reimbursement guidelines below for telehealth billing guidelines as this will allow properly submitted claims to process through auto-adjudication without creating manual work and support timely payment.

Virtual visits:

HIPAA-approved technology can continue to be used by providers to deliver telehealth care to members. For providers who do not have access to HIPAA-approved technology to conduct a virtual video-enabled session, providers can conduct these sessions **immediately** using any nonpublic-facing remote communications product that is available to communicate with members as listed below in accordance with OCR's Notice. Although providers are encouraged to use HIPAA-compliant technologies, consistent with OCR's Notice, as outlined below and follow Optum standard telehealth processes, during the nationwide public health emergency, providers do not need to attest through the Optum virtual visits process to provide telehealth or virtual visit care. (Please note: Providers will not be listed in the virtual visit provider directory until attestation is completed, including the use of HIPAA-compliant technologies.) Please refer to reimbursement guidelines below for telehealth billing guidelines as this will allow properly submitted claims to process through auto-adjudication without creating manual work and support timely payment.

Providers are responsible to provide telehealth services in accordance with OCR's Notice and may use:

- HIPAA-approved telehealth technologies
- The following platforms may be used during the current nationwide public health emergency: Popular applications that allow for video chats including Apple FaceTime, Facebook Messenger video chat, Google Hangouts video, or Skype — may be utilized to provide telehealth without risk that OCR might seek to impose a penalty for noncompliance with the HIPAA rules related to the good faith provision of telehealth during the COVID-19 nationwide public health emergency.
 - Providers are encouraged to notify patients that these third-party applications potentially introduce privacy risks, and providers should enable all available encryption and privacy modes when using such applications.
- These platforms are NOT approved: Facebook Live, Twitch, Snapchat, TikTok, and similar video communication applications are public facing, and should not be used in the provision of telehealth to Optum Behavioral Health plan members by covered health care providers.

In order for a virtual visit provider to be listed in our virtual visit provider directory for members, a provider must complete a <u>virtual visit attestation form</u>. Optum Behavioral Health is processing new virtual visit attestations in the order they are received as quickly as possible and once completed, your information will be displayed in our virtual visit provider directory for members, but, during the nationwide public health emergency, virtual care can be provided to a member. Effective immediately, Optum Behavioral Health is expanding our policies around

telehealth services for our Medicare Advantage, Medicare Part B, Medicaid and commercial membership, making it easier for patients to connect with their behavioral health provider. Optum Behavioral Health will waive the Centers for Medicare and Medicaid's (CMS) originating site restriction for Medicare Advantage, Medicaid and commercial members, so that care providers can bill for telehealth services performed while a patient is at home. This change in policy is effective until April 30, 2020, but we may extend that date as necessary and will communicate through all appropriate channels.

This policy change applies to members whose benefit plans cover telehealth services, and will allow those patients to connect with their provider through audio/video visits. Standard member cost sharing and benefit plan terms apply. Optum Behavioral Health will also reimburse providers for telephone calls to patients, as described below:

Until April 30, 2020, Optum Behavioral Health will reimburse appropriate claims for telehealth services according to the following:

Commercial

For all Optum Behavioral Health commercial plans, any telehealth services provided via a real-time audio and video communication system can be billed for members at home or another location.

Billing guidelines: Optum Behavioral Health will reimburse telehealth services which use standard CPT codes and a GT modifier or a Place of Service of 02 for both video-enabled virtual visits and telephonic sessions to indicate the visit was conducted remotely.

Medicaid

For all UHC Medicaid plans, any originating site requirements that may apply under United Behavioral Health reimbursement policies are waived so that telehealth services provided via a real-time audio and video communication system can be billed for members at home or another location.

Billing guidelines: UnitedHealthcare Community Plan will reimburse telehealth services which use standard procedure codes such as CPT/HCPCS codes and Place of Service 02 or state Medicaid telehealth billing requirements if different than using 02 for both video-enabled virtual visits and telephonic sessions to indicate the visit was conducted remotely.

Medicare Advantage

For all UHC Medicare Advantage and Medicare Part B plans, including dual eligible special needs plans, any originating site requirements that may apply under Original Medicare are waived.

Billing guidelines: UHC will reimburse telehealth services which use standard CPT codes and Place of Service 02 for both video-enabled virtual visits and telephonic sessions to indicate the visit was conducted remotely.

Optum Behavioral Health is continually monitoring this situation and if any further modifications to our normal processes are necessary to accommodate individuals impacted by COVID-19 we will communicate immediate updates on Provider Express. For the latest information as this situation evolves, we encourage people to stay informed by visiting the <u>CDC</u> website.



11000 Optum Circle, Eden Prairie, MN 55344

Optum does not recommend or endorse any treatment or medications, specific or otherwise. The information provided is for educational purposes only and is not meant to provide medical advice or otherwise replace professional advice. Consult with your clinician, physician or mental health care provider for specific health care needs, treatment or medications. Certain treatments may not be included in your insurance benefits. Check your health plan regarding your coverage of services.

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