Alabama Medicaid Agency



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STEPHANIE MCGEE AZAR
Commissioner

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Colleen Donahue, DO President Alabama Academy of Family Physicians

Wes Stubblefield, MD, MPH, FAAP President Alabama Chapter of the American Academy of Pediatrics

John Meigs, MD, FAAFP President Medical Association of the State of Alabama

Dear Dr. Donahue, Dr. Stubblefield, and Dr. Meigs,

Thank you for your letter dated April 9, 2020 in which you requested specific relief measures to ease the burdens your members are facing during the COVID 19 pandemic. Medicaid commends all health care professionals working diligently to provide the optimal health care to Medicaid recipients, especially during this critical time. Below, I have listed your specific requests individually with Medicaid's response provided under each request.

• Allow payment of well visits through telehealth (on par with Medicaid's current telehealth emergency policy for 99211-3), knowing the exam will be performed later.

Response: Medicaid is allowing the following EPSDT periodic screenings (well child checkups) codes to be billed via telemedicine, knowing not all components of the screening may be completed via telemedicine but will be completed in person when appropriate with no additional payment. Providers should bill with place of service 02 and modifiers CR and 52.

99381EP – 99385EP 99391EP – 99395EP

** Follow up visits in-person should occur as soon as possible to complete the remaining exam screening components. These exam visits can be billed for tracking purposes utilizing CPT 99201EP – 99205EP, 99211EP – 99215EP with modifier 52.

- Allow payment of Level 4 (99214) and Level 5 (99215) office visits via telehealth.

 Response: Under the same guidelines as published in the March 18, 2020 Alert, Medicaid approves codes 99214 and 99215.
- Allow payment for well check-ups and E/M at the same time.

 Response: Medicaid will allow E/M 99201-99205 and 99211-99215 and well check-up 99381EP-99385EP and 99391EP-99395EP to be billed on the same day.

• Allow Bright Futures screening codes to be paid via telehealth on par with face-to-face visits. Response: Under the same guidelines as published in the March 18, 2020 Alert, Medicaid approves codes 96110, 96127, 96160, 96161, and D0145.

Note* The request of the approval of D0145 for telehealth visits followed up with a face to face visit to further evaluate the caries susceptibility of the child would need to be supported by the answering of questions concerning the child's eating and drinking habits along with the oral care delivered to the child by the parents/guardians.

• Allow primary care providers flexibility and creativity when determining how to deliver vaccines in a timely manner.

Response: Medicaid receives quality measure guidance from CMS, which incorporates guidelines from the NCQA and CDC. Please note that the actual bonus payments based on the ACHN Quality Measures are scheduled to begin July 2021, utilizing Calendar Year (CY) 2020 as the measurement period. We expect to receive the final specifications for CY 2021 (i.e. CY 2020 measurement period) from CMS early next year, at which point Medicaid will consider modifications to the immunization measures and adjustments to the benchmarks.

- Allow coverage of CPT codes for nurse phone care and case management services provided by office staff (covered by other state Medicaid programs), provided this doesn't count toward 14-visit limit.
 Response: Under the same guidelines as published in the March 18, 2020 Alert, Medicaid approves codes 98966-98967 for nurses. Also, codes 99451-99452 are covered for physicians, CRNPs, and PAs.
- Relax the 14-visit limit with the understanding that many patients may have telehealth visits that exceed the allowance.

Response: Children under the age of 21 may qualify for visits beyond 14 under the EPSDT Program. Please refer to <u>Provider Billing Manual Appendix A</u> for further guidance. For recipients over the age of 21, Medicaid is not able to change the 14-visit limit at this time.

As we discussed in detail, Medicaid is not able to provide prospective payments at this time due to guidance provided from CMS. We continue to receive guidance from CMS about potential opportunities for flexibility to ease the burden on Alabama's health care system. As we know more about funding streams for states, we will keep our provider network informed.

Medicaid expects these system changes to be implemented by June 1, 2020.

Again, I want to thank your members for providing services and delivering health care to the citizens of Alabama as we progress through this difficult time. If you have further questions, please contact Beverly Churchwell, Director of Medical Services, at beverly.churchwell@medicaid.alabama.gov.

Stephanie McGee Azar

Commissioner