Tip Sheet

Temporary Telemedicine Services

April 8, 2020

Effective for dates of service March 16, 2020 – April 30, 2020, the Alabama Medicaid Agency is allowing the delivery of mental health services via telemedicine/telepsychology/telehealth.

The Mental Health Program unit defines telemedicine/telepsychology/telehealth as the use of interactive telecommunications to deliver mental health services when the recipient and the psychologist/behavioral health/allied mental health provider are not in the same physical location.

For the purposes of this telemedicine/telepsychology/telehealth provision, telecommunications include synchronous (live) services via a real-time audio and video telecommunication system **or** the use of audio-only telephone (if that is the only option available—i.e. recipient only has land line, flip phone, etc.).

Telemedicine **does not** include the use of text, e-mail, or facsimile (fax) for the delivery of behavioral health services.

To ensure reimbursement and proper reporting with the Centers for Medicare and Medicaid Services (CMS), it is necessary to file the claim with **Place of Service 02** (telemedicine) and a modifier of 'CR' for catastrophic/disaster to assist with claims tracking.

There will not be a requirement for a telemedicine services agreement or a recipient consent form during this time period. **However**, the provider **must** receive verbal consent from the recipient and **document** in the medical record.

The following codes are turned on for telemedicine billing. Please follow all of the established guidelines for service provision.

90791	H0002	H0038-HE:HC or HF:HC	96130
90832	H0004	H0038 HF:HQ	96131
90834	H0020	H0040	96136
90837	H0031-HF	H0040-HQ	96137
90846	H0034	H0040-HA	96138
90847	H0038-HE:HA or HF:HA	H2021	96139
90853	H0038-HE:HB or HF:HB	H2022-HA	96146

The Agency will review and verify that requirements for the extension of telemedicine services are being met. Payments to providers that do not meet the specifications are subject to recoupment. Please document the delivery method in the medical record/progress note.

*Please make sure when billing codes with multiple modifiers that the CR modifier is in the last position.