

# **COVID-19 Provider Webinar: Use of Telehealth or Telephonic Care During the COVID-19 Emergency**

**April 17<sup>th</sup> 2020**

Thank you for joining us today! We will get started shortly after 2 PM.

**Due to increased traffic, WebEx may be experiencing some technical difficulties.**

**Please take a moment to ENSURE YOU ARE MUTED upon entering the webinar.**

**Thank you!**



**Office for People With  
Developmental Disabilities**

# **COVID-19 Provider Webinar: Use of Telehealth or Telephonic Care During the COVID-19 Emergency**

**April 17, 2020**

# Overview of this Presentation

- This presentation will provide an overview of current information on the use of Telehealth during the COVID-19 Emergency.
- This presentation supplements information pertaining to Telehealth presented during the statewide WebEx delivered on March 23, 2020 and addresses questions that were submitted following the presentation.
- Links to various websites that provide useful information on the use of Telehealth are provided throughout this presentation.

# Overview of this Presentation-

## Topics to be Addressed

- Overview of the Interim Guidance Regarding the Use of Telehealth/COVID-19
- Modalities for delivering services that constitute Telehealth during the COVID-19 Emergency
- Types of services and programs that may use Telehealth during the COVID-19 Emergency
- Telehealth applications and platforms

# Overview of this Presentation-

## Topics to be Addressed

- Telehealth and services included in person-centered plans
- Documentation of services delivered via Telehealth during the COVID-19 Emergency
- Billing and reimbursement for services delivered via Telehealth during the current COVID-19 Emergency

# Interim Guidance Regarding the Use of Telehealth/COVID-19

- Guidance regarding the use of Telehealth during the current COVID-19 Emergency is available on the OPWDD website. The most recent version of the guidance can be found here <https://opwdd.ny.gov/coronavirus-guidance/covid-19-guidance-documents>
- Note that the guidance is periodically updated in response to questions submitted to OPWDD. Therefore, it is recommended that you periodically visit the OPWDD website to learn about any new or updated guidance that may be available.

# Spirit and Intent of the Interim Guidance Regarding the Use of Telehealth

- OPWDD providers should continue to deliver services to individuals during the COVID-19 Emergency to ensure the safety of all of the individuals that they support, their families, and staff.
- The Interim Guidance Regarding the use of Telehealth was developed in response to concerns related to COVID-19 pursuant to Executive Order #202.1

# Spirit and Intent of the Interim Guidance Regarding the Use of Telehealth

- Expanding the use of Telehealth to deliver services aligns with recommendations from the NYS Department of Health (DOH) and the Centers for Disease Control (CDC).
- Using Telehealth to the extent possible allows individuals to receive services while remaining at home and limiting the number of people they, and staff, come into contact with.



# Modalities for Delivering Services that Constitute Telehealth Under the COVID-19 Emergency

- Under the current COVID-19 Emergency, the term “Telehealth” includes the following:
  - Telehealth: A provider delivering a service to an individual using live, two-way, audio and visual communications.
  - Telephonic Communications: A provider delivering services to an individual using only telephone communication. During the COVID-19 Emergency, telephonic modalities may be used in limited circumstances.

## Types of Services/ Program Types that may be Delivered using Telehealth

- The following Services may be delivered via Telehealth or Telephonically during the COVID-19 Emergency:
  - Article 16 Clinic Services
  - Day Habilitation Services
  - Day Treatment
  - Independent Practitioner Services for Individuals with Developmental Disabilities (IPSIDD)

## Types of Services/ Program Types that may be Delivered using Telehealth

- The following Services may be delivered via Telehealth or Telephonically during the COVID-19 Emergency:
  - Prevocational Services, Pathway to Employment, Supported Employment
  - Community Habilitation Services
  - Support Brokerage
  - Intensive Behavioral Service

## Types of Services- Respite and Residential

- Respite may be delivered via Telehealth using synchronous, two-way, audio-visual technology. ***The provision of respite services using only telephonic communication is not permissible.***
- Residential services and Live-in Caregiver Services **may not** be delivered via Telehealth.

# Types of Services - Day Habilitation, Day Treatment, and Prevocational Programs

- During the COVID-19 Emergency, Day Habilitation, Day Treatment, and Prevocational Services delivered on site were temporarily suspended beginning March 18<sup>th</sup>, 2020.
- Programs were expected to establish a plan consisting of alternative programming to ensure the continuation of services to the extent possible.
- Telehealth or Telephonic communication may be used to deliver alternative services to Individuals during this temporary suspension.

# Types of Services - Day Habilitation, Day Treatment, and Prevocational Programs

- Individuals may receive Day Habilitation, Day Treatment, and Prevocational Services as appropriate and in accordance with existing plans.
  - Providers are afforded some flexibility when designing plans for individuals during the COVID-19 Emergency.
  - Information on billing, reimbursement, and retainer day payments is available on the OPWDD website:  
<https://opwdd.ny.gov/coronavirus-guidance/covid-19-guidance-documents>

## **Types of Services- Day Habilitation, Day Treatment, and Prevocational Programs- Examples**

- Providers are afforded some flexibility when designing plans for individuals during the COVID-19 Emergency. For example, consider that some individuals may benefit from receiving services through an online group setting (e.g., Zoom), for 2 hours every day, while another individual may benefit from participating in services two times a day for one hour increments by phone.
- For example, a day habilitation service provider may use FaceTime with an individual to help them continue to learn money management/budgeting skills.

## Types of Services – Community Habilitation

- Community Habilitation may be delivered remotely using either Telehealth or Telephonic communications to deliver supports and services to an individual and/or their family.
- In some cases, Community Habilitation may be delivered via Telehealth or Telephonically instead of Respite, Day Treatment, or Prevocational services.



# Use of Good Clinical Judgement

- OPWDD Providers must ensure the safety of the individuals we support, their families, and our staff. This means that providers or teams should assess the needs of each individual during this time to determine how the individual's needs can be met during the current COVID-19 Emergency.
- Health and Habilitation Services may be delivered via Telehealth or Telephonically when the provider determines that the encounter is appropriate to be delivered using such modalities.
- “As appropriate” means that the provider determined that offering the service remotely will not negatively impact the health and safety of the individual and that the service will benefit the individual.

# Use of Good Clinical Judgement

- Respite Services may be delivered via Telehealth when the provider determines that the encounter is appropriate to be delivered using such modalities. ***Respite services cannot be delivered Telephonically.***
- Where an activity in the individual's Staff Action Plan, or other person centered plan, requires the physical presence of a staff member to ensure the health and safety of the individual, that service is not appropriate for Telehealth and must not be delivered via Telehealth.

# Use of Good Clinical Judgement

- Providers who deliver services that require hands-on care, or that require close observation, monitoring, or coaching (e.g., Physical Therapy (PT) or Occupational Therapy (OT)) to safely deliver the service should apply close scrutiny when determining whether it is appropriate to deliver the service remotely.
- In most cases, PT or OT should not be delivered remotely through the use of Telehealth.

# Carrying out Person-Centered Plans and the use of Telehealth

- All individuals have a person-centered plan, such as a Life Plan or Staff Action Plan, that outlines and describes services and supports an individual may receive.
- During the COVID-19 Emergency, staff may deliver services identified in these plans to individuals remotely using Telehealth or Telephonic means.
- Telehealth is not a unique service. Telehealth/Telephone are simply mechanisms for delivering a services that are already incorporated into a plan. Therefore, the plan (e.g., Staff Action Plan) does not need to be modified or changed to deliver these supports and services.

# Telehealth Applications or Platforms that can be used to Deliver Services

- The Office of Civil Rights (OCR), at the Department of Health and Human Services (HHS) will exercise its enforcement discretion and will waive potential penalties for HIPAA violations against health care providers that serve patients through everyday communication technologies during the COVID-19 nationwide public health emergency.

- Additional information can be found here:

<https://www.hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/notification-enforcement-discretion-telehealth/index.html>



# Telehealth Applications or Platforms that can be used to Deliver Services

- During the COVID-19 Emergency, providers should use HIPAA or HITECH compliant systems that they currently use, or that are currently available, to deliver services via Telehealth.
- Providers who do not have access to audiovisual technology that meets HIPAA and HITECH security standards may use other common and widely available non-public facing technologies in their good faith efforts to deliver services.

# Telehealth Applications or Platforms that can be used to Deliver Services

- Examples of public facing platforms that are commonly available include Apple FaceTime, Skype, WebEx, Zoom, or Google Classroom. These applications are non-public facing because they establish direct communication using phone numbers, meeting identification numbers/codes, or passwords.
- Examples of public facing applications that are prohibited include Facebook Live or TikTok.

## Documentation of Services Delivered using Telehealth or Telephone During the Current COVID-19 Emergency

- Documentation requirements for services delivered via telehealth or telephonically are established in OPWDD's Interim Guidance Regarding the use of Telehealth/COVID-19.
- Documentation of services delivered via Telehealth shall be maintained in accordance with MHL Section 33.13 and current documentation requirements.



# Documentation of Services Delivered using Telehealth or Telephone During the Current COVID-19 Emergency

- In addition to typical documentation requirements that already exist, the provider must also document the reason for the encounter, the mechanism used to deliver the service (Telehealth or Telephonic), the location of the provider and the location of individual, others present and participating during the session (e.g., a family member, another provider, or a member of the person's circle of support who participated in the session), and plans for follow-up/aftercare.

# Documentation of Services Delivered using Telehealth or Telephone During the Current COVID-19 Emergency

- The provider of the service must be identified as well as their credential.
  - The staff delivering the service may be licensed or certified to deliver a particular service (e.g., Physician Assistant, Licensed Psychologist) and should document their credential accordingly.
  - Non-licensed staff (e.g., Direct Support Professionals) working for an OPWDD certified or operated program may also deliver services via Telehealth and should also document their title accordingly. Again, such documentation should be similar to documentation maintained if the DSP delivered the service in-person or face-to-face.

# Billing and Reimbursement

The following slides provide general guidelines. Monitor the OPWDD COVID-19 and DOH Websites for more Up to Date and Current Information

- For the duration of the emergency response to COVID-19, providers certified or operated by OPWDD delivering non-residential habilitation and respite services delivered by means of Telehealth shall be entitled to reimbursement by Medicaid.
- HCBS waiver services delivered via Telehealth should be billed as normally billed.

# Billing and Reimbursement

- An Article 16 clinic provider should bill for the encounter using the appropriate billing rules and CPT code(s) for the services rendered, using the Telehealth modifier and the location of the clinic or satellite clinic that the service billed is associated with. Where applicable, include the Place of Service code 02 indicating delivery of a telehealth service on the claim submission. *Supplemental information on the use of rate codes for Article 16 services delivered Telephonically is pending/forthcoming.*

# Billing and Reimbursement

- Providers delivering services as Independent Practitioner Services for Individuals with Developmental Disabilities (IPSIDD) may deliver such services via Telehealth and bill at the IPSIDD rate. These services shall be billed similar to how they would be billed if delivered in-person/face-to-face using the correct CPT code to reflect the service and should include the Telehealth modifier. Because these are professional claims, the Place of Service code 02 should be included on the claim submissions.

# Billing and Reimbursement

- All other providers (e.g., community habilitation) delivering non-residential health and habilitation services should bill for services delivered remotely in the same manner they would if the service were to be delivered in-person/face-to-face.
- Day Habilitation, Prevocational, and Day Treatment service providers may bill Medicaid for retainer day payments but must comply with requirements established in the COVID-19 Interim Billing Guidance for Day Services available on the OPWDD website.

# Regularly Visit Various Websites to receive Current Information

<b>New York State OPWDD</b> Information and guidance documents pertaining to the provision of services and supports across the OPWDD system during the COVID-19 Emergency.	<a href="https://opwdd.ny.gov/coronavirus-guidance">https://opwdd.ny.gov/coronavirus-guidance</a>
<b>New York State Department of Health (DOH)</b>	<a href="https://coronavirus.health.ny.gov/home">https://coronavirus.health.ny.gov/home</a>
	<a href="https://www.health.ny.gov/health_care/medicaid/program/update/2020/index.htm">https://www.health.ny.gov/health_care/medicaid/program/update/2020/index.htm</a>

# Information Available on the DOH Website

<b>Medicaid Update-Special Edition</b>	Establishes that during the COVID-19 Emergency, NYS Medicaid has updated its Telehealth guidance, including expanding services to include Telephonic services.	<a href="https://www.health.ny.gov/health_care/medicaid/program/update/2020/index.htm">https://www.health.ny.gov/health_care/medicaid/program/update/2020/index.htm</a>
<b>Frequently Asked Questions</b>	<p>-NYS Medicaid will reimburse providers for assessment, monitoring, and evaluation and management services delivered via Telehealth or Telephonically during the COVID-19 Emergency.</p> <p>-For Article 16 clinics only, DOH established Rate Codes that correspond to services delivered Telephonically. Certain providers will use the CPT service code as well as the Telephonic rate code. <u>Additional guidance on the use of these codes is forthcoming.</u></p>	<a href="https://health.ny.gov/health_care/medicaid/covid19/index.htm">https://health.ny.gov/health_care/medicaid/covid19/index.htm</a>



# Information Available on the DOH Website

## **Guidance regarding the use of Telehealth and Telephonic Services**

-Information on Billing and Reimbursement for services delivered via Telehealth or Telephonically during the COVID-19 Emergency is available on OPWDD's COVID-19 website.

-This Medicaid Update from DOH provides additional information on Telehealth (i.e., audio-visual, live communication) versus services delivered only Telephonically. Billing rules for services delivered via Telehealth are provided including information on the use of Modifier Codes to indicate that the service was delivered via Telehealth (i.e., GT or 95 Modifiers). In most cases, OPWDD providers will use the GT Modifier Code.

[https://www.health.ny.gov/health\\_care/medicaid/program/update/2020/no05\\_2020-03\\_covid-19\\_telehealth.htm](https://www.health.ny.gov/health_care/medicaid/program/update/2020/no05_2020-03_covid-19_telehealth.htm)

<b>Centers for Disease Control and Prevention (CDC)</b>	<a href="https://www.cdc.gov/coronavirus/2019-ncov/index.html">https://www.cdc.gov/coronavirus/2019-ncov/index.html</a>
<b>Medicare</b> <ul style="list-style-type: none"><li>- Individuals with Medicare coverage may receive services through Telehealth or other communication technologies during the COVID-19 Emergency.</li><li>- This document lists CPT service codes that may be delivered via Telehealth.</li><li>- This document also provides information on some clinical supervision and allows for physician supervision to be delivered virtually.</li><li>- Licensed clinical social worker services, clinical psychologist services, and some speech and language pathology services can be paid for as Medicare telehealth services.</li></ul>	<a href="https://www.medicare.gov/medicare-coronavirus">https://www.medicare.gov/medicare-coronavirus</a>  <a href="https://www.cms.gov/files/document/covid-19-physicians-and-practitioners.pdf">https://www.cms.gov/files/document/covid-19-physicians-and-practitioners.pdf</a>
<b>Health and Human Services (HHS)</b>	<a href="https://www.hhs.gov/about/news/coronavirus/index.html">https://www.hhs.gov/about/news/coronavirus/index.html</a>

# Temporary Use of Technology to Perform Nursing Services in Residential Settings During the COVID-19 Emergency

- OPWDD does not permit the use of Telehealth/Telephonic Communication to deliver residential services.
- There may be circumstances, however, when technology may be used to support the ongoing work performed by staff who may typically work in a residential setting. Technology may include the use of audio-visual communications, telephonic communications, use of an Electronic Medical or Health Record (EHR/EMR), or sharing scanned documents from the record.

# Temporary Use of Technology to Perform Nursing Services in Residential Settings During the COVID-19 Emergency

- During the COVID-19 Emergency, some nursing tasks or duties may be carried out remotely, when it is safe and appropriate to do so.
- OPWDD will provide additional guidance on duties that may be carried out remotely by Registered Nurses (RNs).

Examples of Duties that May be Carried out by an RN working remotely	Examples of Duties that an RN must complete in-person or on site.
Medication regimen reviews	Observation and/or education of some complex care procedures carried out by staff (i.e., Delegated Nursing Tasks)
Review of the Medication Administration Record (MAR) (e.g., missed doses, transcription accuracy)	New and annual training on Delegated Nursing Tasks.
Review of reports, including consultation sheets/reports from other providers	Wound assessment and monitoring
Review of diet orders	Pressure injury assessment and monitoring
Review of charting records (e.g., weight, bowel movement, food intake/output, seizures, blood sugar, vitals) and Staff notes	
Review of laboratory, imaging, and diagnostic results. Making arrangements for follow-up care or treatment regarding abnormal results	
Scheduling and/or rescheduling appointments	
Development of Plans of Nursing Services (PONS)	

# Questions about the use of Telehealth

For follow up questions related to the use of  
Telehealth, please email us at  
[mccop.info@nyu.edu](mailto:mccop.info@nyu.edu) and we will  
direct them to the appropriate person.

Thank you!

