March 20, 2020

Dear Valued Provider,

We appreciate your partnership over the past several days as we looked for ways to increase members’ access to telehealth and to help you continue to provide quality behavioral health services to your patients during this unprecedented time.

To mitigate the spread of COVID-19, Beacon is committed to enabling members to remain in their homes to reduce exposure and transmission, and to preserve health system capacity for the duration of this public health emergency consistent with governmental mandates. Beacon will permit providers to deliver clinically appropriate, medically necessary covered services to members via telehealth (including telephone and secure live video conferencing). Moreover, Beacon strongly encourages providers to utilize this increased telehealth flexibility to maximize the number of services provided by telehealth.

The following changes are effective immediately (until further notice) for providers serving Beacon members as follows: all Commercial and GIC plans partnered with Beacon Health Options including, Boston Medical Center HealthNet Plan (BMCHP), Fallon Health, and UniCare State Indemnity Plan.

**Attestation (New telehealth providers)**

- Beacon is not requiring any contract adjustments or signed attestation to provide services to Beacon members at this time.

**Acceptable Modalities**

- Beacon is not imposing specific requirements for technologies used to deliver services via telehealth and will allow reimbursement for covered services delivered through telehealth so long as such services are medically necessary and clinically appropriate.
- The U.S. Department of Health and Human Services (HHS) Office for Civil Rights (OCR) Notification of Enforcement Discretion has stated that it will not be enforcing HIPAA compliance for telehealth remote communications during the COVID-19 nationwide public health emergency. Providers are reminded, however, that state confidentiality requirements may still apply.
- Providers are encouraged to use appropriate HIPAA compliant telehealth platforms to communicate with individuals. When leveraging widely available communication apps, such as FaceTime or Skype, to the extent feasible, ensure the same rights to confidentiality and security as provided in face-to-face services. Providers must inform members of any relevant privacy considerations.

**Documentation of Services**

- Clinical documentation for telehealth services is the same as face-to-face documentation for services.
- For an initial appointment with a new patient, the provider must review the patient’s relevant medical history and any relevant medical records with the patient before initiating the delivery of any service.
For existing provider-patient relationships, the provider must review the patient's medical history and any available medical records with the patient during the service.

Prior to each patient appointment, the provider must ensure that the provider is able to deliver the services to the same standard as in-person care and in compliance with the provider's licensure regulations and requirements, programmatic regulations, and performance specifications related to the service (e.g., accessibility and communication access).

If the provider cannot meet appropriate standard of care or other requirements for providing requested care via telehealth, then the provider must make this determination prior to the delivery of treatment, notify the patient of this, and advise the patient to instead seek appropriate in-person care.

To the extent feasible, providers must ensure the same rights to confidentiality and security to a patient as provided in face-to-face services and must inform members of any relevant privacy considerations prior to providing services via telehealth.

Providers must follow consent and patient information protocols consistent with those followed during in-person visits.

Providers must inform patients of the location of the provider rendering services via telehealth (i.e., distant site) and obtain the location of the patient (i.e., originating site).

Providers must inform the patient of how the patient can see a clinician in-person in the event of an emergency or otherwise.

**Reimbursement and Claims**

- Providers must include the Place of Service (POS) Code 02 when submitting a claim for services delivered via telehealth.
- Beacon will also temporarily cover clinically appropriate, medically necessary telephone evaluations through the following CPT codes:
  - 99441, 99442, 99443 for physicians; and
  - 98966, 98967, 98968 for qualified non physicians.
- Provider may not bill a facility fee for distant originating sites.
- Providers will be able to bill Beacon for these telephonic codes beginning April 1, 2020, for dates of service beginning March 16, 2020.
- This will remain in effect until Governor Baker’s "Order Expanding Access to Telehealth Services and to Protect Health Care Providers" ("Emergency Order") is rescinded or until the State of Emergency is terminated, whichever happens first.

The situation with COVID-19 is very dynamic and we will continue to monitor developments and review our policies each week as we have new information.

Our focus remains on supporting our providers, customers and members during the COVID-19 pandemic. Because of the fluid nature of the situation, we will continue to adjust our policies and procedures and provide updates to you as necessary.
Thank you for your ongoing dedication to supporting individuals as we navigate this situation.

Sincerely,

Provider Relations Contact

Resources

The bulletins and guidance are based on what is currently known about the transmission and severity of COVID-19 and will be updated as needed and as additional information is available. Please regularly check mass.gov/2019coronavirus for general updated information.


Additional Information

For Beacon health plan providers with questions regarding this Broadcast, please email provider.relations@beaconhealthoptions.com or call our National Provider Service Line at 1-800-397-1630.