ADCES Association of Diabetes Care & Education Specialists

Q&A: Understand the new COVID-19 telehealth regulations

Tuesday, April 7, 2020

2:00 pm EST
1:00 pm CST
12:00 pm MST
11:00 am PST

What is a Nutrition Professional?

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Professional Standards for Dietitians and Nutritionists

For Medicare Part B coverage of MNT, only a registered dietitian or nutrition professional may provide the services. "Registered dietitian or nutrition professional" means a dietitian or nutritionist licensed or certified in a State as of December 21, 2000; or an individual whom, on or after December 22, 2000:

- Holds a bachelor's or higher degree granted by a regionally accredited college or university in the United States (or an equivalent foreign degree) with completion of the academic requirements of a program in nutrition or dietetics, as accredited by an appropriate national accreditation organization recognized for this purpose;
- Has completed at least 900 hours of supervised dietetics practice under the supervision of a registered dietitian or nutrition professional; and
- Is licensed or certified as a dietitian or nutrition professional by the State in which the services are performed. In a State that does not provide for licensure or certification, the individual will be deemed to have met this requirement if he or she is recognized as a "registered dietitian" by the Commission on Dietetic Registration or its successor organization, or meets the requirements of the first two bullets of this section.

CMS CENTERS for MEDICARE & MEDICAID SERVICES

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Point of Service (POS)

Medicare telehealth services are generally billed as if the service had been furnished in-person- DSMT would still be billed under the Program NPI# using G0108 for 1:1 and G0109 for group. Prior to March 30, 2020, CMS advised the use of the Place of Service (POS) 02 modifier. As of March 30, CMS is now asking providers to report the POS code that would have been reported had the services been provided in person. For example, you may use the POS 11 modifier to indicate a service that would have been provided in an office. CMS has also directed providers to report the 95 modifier for services reported via telehealth. You should now use the appropriate POS modifier and the 95 modifier. The POS code 02 code is not incorrect, CMS has just added more specific guidance.

Pumps and CGM

- In March 30 IFC, CMS announced they will temporarily waive face-to-face requirements for coverage of CGM supplies, insulin pump supplies, and test strips
- CMS has also indicated that they will not enforce the clinical indications for coverage for certain policies, including those policies for insulin pumps (NCD 280.14, LCD L33794).
- These changes are designed to ensure flexibility for providers and beneficiaries

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Telehealth Resources at ADCES

Link: DiabetesEducator.org/Telehealth

- 2017 – 2019: Literature search identified 46 publications related to diabetes care and education & telehealth. Of the 46, we identified 6 systematic reviews, including one systematic review of reviews.
- Why are systematic reviews important?
- Resources to support your work in developing and implementing telehealth programs
- 2020: Update to the Greenwood et al systematic review of reviews

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Telehealth – Private Payers

- BCBS (Texas) Telemedicine and Telehealth Coverage Expansion in Response to COVID-19 (retro effective to 3-10-2020)
- CareSource (Indiana) Telemedicine Services - COVID-19 Temporary Telehealth Services Guidance
- Medicaid South Carolina Provider Bulletin
- Providence Health Plan Telehealth Services DURING COVID-19 CRISIS
- UnitedHealthcare Medicare Advantage National Telemedicine/Telehealth Services – Medicare Advantage Coverage Summary

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Telehealth – Private Payers

- BCBS South Carolina Telehealth
- AllWays Massachusetts Telemedicine - Covid-19 State of Emergency Telemedicine Policy
- HAP Michigan Telemedicine, Telehealth & Virtual Care Services
- CareSource Indiana Telemedicine Services - COVID-19 Temporary Telehealth Services Guidance
- CareSource Ohio Telemedicine Services - COVID-19 Temporary Telehealth Services Guidance

Telehealth – Private Payers

- BCBS North Dakota Expanded coverage for COVID-19
- BCBS Federal Employee Program Telehealth Services-Blue Cross and Blue Shield's Federal ...
- AvMed Florida AvMed Provides Members with Healthcare Services and ...
- Highmark PA, WV, DE Telemedicine and Telehealth Services
- BCBS Nebraska Telehealth: Virtual Doctor Visits | BCBSNE
- LA Care Telehealth with Teladoc | L.A. Care Health Plan
- BCBS Rhode Island Telemedicine Telehealth and Telephone Services - Temporary Policy - Effective 3/18/20

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Telehealth Resources

- Medicare guidance on telehealth: https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/TelehealthSrvcsfctsht.pdf
- Center for Connected Health Policy Reference Sheet: https://www.cchpca.org/sites/default/files/2020-03/CORONAVIRUS%20TELEHEALTH%20POLICY%20FACT%20SHEET%20MAR%2023%202020.pdf
- HIPAA: https://www.hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/index.html
- AND Resources: eatrightpro.org/telehealth

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Medicaid Information

- Center for Connected Health Policy Interactive State Map: https://www.cchpca.org/telehealth-policy/current-state-laws-and-reimbursement-policies#
- Medicaid: https://www.medicaid.gov/resources-for-states/disaster-response-toolkit/coronavirus-disease-2019-covid-19/index.html
- State Medicaid Waivers List: https://www.medicaid.gov/medicaid/section-1115-demo/demonstration-and-waiver-list/index.html

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Call to Action

- **Share Your Story:** Urge CMS to allow RNs and pharmacists to facilitate DSMT services via telehealth during the COVID-19 pandemic
- https://www.diabeteseducator.org/advocacy/adces-legislative-action-center#/8

Questions

Link to MyAADENetwork Discussion: https://www.myaadenetwork.org/covid19-discussion

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