

Behavioral Health

Codes for services via telephone in response to COVID-19



In response to COVID-19, CareOregon is temporarily adjusting telehealth/telemedicine requirements per CMS and OHA guidance. Providers may render services to members via telehealth modalities, telephone, OR two-way audio and visual, in any geographic area and from a variety of places, including members' homes. With this flexibility, CareOregon members can receive clinically appropriate services without coming into the clinic or office.

For telephone services: mental health and substance use providers may deliver verbal services via telephone, using the same CPT and HCPC codes they would normally use. Providers should put a note in the client's medical record explaining the extenuating circumstances that prevent the client from accessing services in person. When in-person services resume, the chart should be updated again to reflect that.

We anticipate OHA will provide guidance and recommendations regarding video/telehealth visits soon. We will update our network when further information is available.

Summary

- CareOregon can adjudicate all telehealth/telemedicine claims that are properly submitted per temporary CMS and OHA guidelines.
- Providers are responsible and accountable for appropriate use of CPT and HCPCS codes, diagnosis codes, modifiers and claim form completion that support the provided services.
- Provider contracts do not need to be updated or amended to allow for reimbursement of telehealth services.

Telephone calls and video/telehealth services

- A claim with the appropriate CPT/HCPCS code and any appropriate modifiers for service, submitted by an authorized provider, is required.
- Submit claims with the Place of Service (POS) that corresponds to the rendering provider's location.