



COVID-19 EMERGENCY TELEHEALTH RULES SUMMARY OF UPDATED GUIDANCE

July 17, 2020

In our continued response to the COVID-19 pandemic, the Ohio Department of Medicaid (ODM) adopted new emergency rule 5160-1-18, "Telehealth." This rule combines all the flexibilities of the previous emergency telehealth policies and continues to provide the same flexibilities for providers and Medicaid covered individuals in need of care.

This policy continues to include:

- ✓ Additional covered telehealth services:
 - Limited oral evaluation provided by a dentist
 - Hospice home care and long-term care
 - Direct skilled nursing services in the home health or hospice setting
 - Services of home health or hospice aides
 - Additional occupational therapy, physical therapy, speech language pathology, and audiology services
 - End stage renal disease (ESRD) related services
 - Originating site fee for the practitioner site
- ✓ Additional covered rendering practitioner types:
 - Dentists
 - Registered Nurses (RN) and Licensed Practical Nurses (LPN) working in a hospice or home health setting
 - Licensed and credentialed health professionals working in a hospital or nursing facility setting (see FAQ question 14 for additional information)
 - Home health and hospice aides
- ✓ Additional covered billing provider types:
 - Professional dental groups
 - Home health and hospice agencies
- ✓ The definition of telehealth now includes additional forms of communication during a state of emergency. This includes telephone calls, fax, email, and other communication methods that do not have audio and video elements.
- ✓ Medicaid covered individuals can access telehealth services wherever they are located. This includes homes, schools, temporary housing, hospitals, nursing facilities, group homes, and any other location, except for a prison or correctional facility.
- ✓ Eligible providers can deliver telehealth services from any location, including their own home offices and other non-institutional settings.
- ✓ Individuals with Medicaid can access telehealth services without having to be established with a provider. This means providers can see new and existing patients for all telehealth services.
- ✓ Medicaid is covering new types of rendering practitioners and billing providers for the services they deliver through telehealth.

- ✓ Medicaid is covering many more services when they are delivered through telehealth, including a number of previously uncovered services that are covered by Medicare.
- ✓ The emergency rule also adopts guidelines found in the Office of Civil Rights' "Notification of HIPAA Enforcement Discretion for Telehealth Remote Communication During the COVID-19 Nationwide Public Emergency."

The following documents released will be helpful to providers implementing ODM's expanded telehealth services:

- ✓ [Medicaid Handbook Transmittal Letter \(MHTL\) No. 3334-20-02](#)
- ✓ Telehealth Billing Guidelines During COVID-19 State of Emergency. *Please note: this document does NOT apply to OhioMHAS-certified providers.*
- ✓ COVID-19 Telehealth Billing Desk Guide
- ✓ Updated List of Frequently Asked Questions (Version 2)
- ✓ [MITS Bits Telehealth Follow Up: IT System Changes Eff. Apr 15 and BH Provider Manual Updated](#)
- ✓ [Provider Requirements and Reimbursement Manual Emergency Version \(Version 1.1\) for OhioMHAS-certified Providers](#)

Please visit Ohio Medicaid's [COVID-19](#) web page for ongoing updates. Additional questions and feedback regarding Medicaid policy can be directed to medicaid@medicaid.ohio.gov. OhioMHAS-certified providers can contact BH-Enroll@medicaid.ohio.gov.

Additional COVID-19 information and resources can be found at coronavirus.ohio.gov or by calling 1-833-4-ASK-ODH (1-833-427-5634).