

Billing for Telehealth Therapy Services during the COVID-19 Response

During the COVID-19 response Sendero Health Plans will allow the following in-network telehealth therapy services for dates of service March 1, 2020 and after, unless otherwise noted.

HOME HEALTH, SPEECH, OCCUPATIONAL, AND PHYSICAL THERAPY

- Effective for dates of service 7/27/2020 and after, limited to established Members receiving outpatient PT/OT/ST services with an existing approved prior authorization on file.
- Effective for dates of service 3/1/2020 and after, limited to existing authorizations for home health services with an approved prior authorization on file.
- Covered telehealth service delivery modalities are limited to those providing an interactive audiovisual connection to the Member.
- Telephone-only telehealth services or those delivered via live chat are not covered.
- Telehealth services for ST/OT for swallowing disorders are not covered.
- Providers must obtain informed consent for telehealth services provided to Members under 13 years from the Member's adult caregiver or a designated health professional must participate during the entire duration of each telehealth session.
- Place of service (POS) 02 is required to indicate telehealth service delivery and are reimbursed the same as in-office services.
- Existing authorizations do not need to be updated for place of service codes.

BEHAVIORAL HEALTH SERVICES

- Limited to the following services:
 - Intensive Outpatient Treatment: H0015, S9480
 - Psychiatric Diagnostic Evaluation: 90791, 90792
 - Psychotherapy: 90832, 90834, 90837, 90846, 90847, 90853, 90785, 90833
 - Peer Specialist Services: H0038
 - Screening, Brief Intervention and Referral to Treatment (SBIRT): H0049, G2011, 99408
 - Substance Use Disorder Services: H0001, H0004, H0005
 - Mental Health Rehabilitation services: H0034, H2011, H2012, H2014, H2017
 - Psychological or neuropsychological test administration: 96138, 96139

- Covered telehealth service delivery modalities include those providing an interactive audiovisual connection to the Member and telephone-only delivered behavioral health services.
- POS 02 is required to indicate telehealth service delivery and are reimbursed the same as in-office services.
- Existing authorizations do not need to be updated for place of service codes.

APPLIED BEHAVIOR ANALYSIS (ABA) THERAPY

- Limited to established Members receiving ABA therapy with an existing approved prior authorization on file.
- Covered telehealth service delivery modalities are limited to those providing an interactive audiovisual connection to the Member.
- Telephone-only services or those delivered via live chat are not covered.
- Initial assessments should be rescheduled and are not covered telehealth services.
- For new Members needing urgent services, a higher level of care may be more appropriate to treat acute and imminent risk of harm to self and/or others.
- POS 02 is required to indicate telehealth service delivery and are reimbursed the same as in-office services.
- Existing authorizations do not need to be updated for place of service codes.

Sendero follows standard E&M coding and billing guidelines as promulgated by the Centers for Medicare and Medicaid Services (CMS). Please refer to [CMS.gov](https://www.cms.gov) for additional telehealth billing information.