

COVID-19 Provider Update - April 24, 2020 PT/OT/ST Services and Nutritional Therapy

Effective March 5, 2020 and during this Maryland State of Emergency, MedStar Family Choice will reimburse specific outpatient PT/OT/ST services and nutritional counseling services.

In order to qualify for the telehealth payment, the covered services must be delivered using two-way audio-visual technology. In addition, the “-GT” modifier is required. Providers should bill using the location of the provider. For example, providers rendering service from their office should bill using place of service 11. Please note POS 2 (Telehealth) is not accepted by MDH and should not be billed.

MDH is temporarily lifting some regulations surrounding confidentiality during the use of various video and telecommunications applications. However, providers should make every effort to use the technology in the order of priority described by MDH:

1. Traditional telehealth technology which meets all formal requirements is strongly preferred.
2. If Medicaid participants are unable to access originating sites possessing fully qualified technology (ability to pan/focus camera, multiple views, etc.) this emergency policy will permit the use of notebook computers, or smartphones.

Providers using telehealth technology (virtual/visual) for patients who are in the home or not located with the provider are permitted to bill when the following conditions are met:

1. Providers must obtain explicit consent of the participant and must clearly explain the confidentiality limitations, including the use of non-HIPAA compliant technology. This must be clearly documented in the medical record.
2. Providers may only deliver services that fall within their normal scope of practice as authorized by the relevant professional board and are listed below as codes eligible for telehealth.
3. Providers must maintain documentation in the same manner as for an in-person visit.

PT/OT/ST Services

MFC will reimburse these services for adults (≥ 21 yrs) when participating PT/OT/ST providers perform these services virtually through a telehealth visit. This telehealth policy applies to professional services only. **The current MFC pre-authorization requirements and benefit limitations are still applicable.** See the [MFC Quick Authorization Guide](#) for specific requirements related to PT/OT/ST.

Please note:

- Participating chiropractors and orthopedic physicians are not contracted to provide PT services.
- PT/OT/ST therapy services for members under the age of 21 are covered under the State of Maryland Medicaid Fee-For-Service program.

Only the following CPT codes will be covered using telehealth.

Physical Therapy Services	
Procedure Code	Description
97161	Physical Therapy Evaluation, Low complexity, 20 minutes
97162	Physical Therapy Evaluation, Moderate complexity, 30 minutes
97164	Physical Therapy Re-Evaluation, Established plan of care
97014	Electrical Stimulation (unattended)
97110	Therapeutic Procedure, each 15-minutes
97112	Neuromuscular Reeducation
97116	Gait Training
97750	Physical performance test or measurement, each 15 minutes

Occupational Therapy Services	
Procedure Code	Description
97165	Occupational Therapy Evaluation, Low complexity, 30 minutes
97166	Occupational Therapy Evaluation, Moderate complexity, 45 minutes
97168	Occupational Therapy Re-Evaluation, Established plan of care
97530	Therapeutic Activities, each 15 minutes

Speech Therapy Services	
Procedure Code	Description
92507	Individual
92508	Group
92521	Evaluation of speech fluency
92522	Evaluation of speech sound production
92523	Evaluation of speech sound production with evaluation of language comprehension and expression
92524	Behavioral and qualitative analysis of voice and resonance
92526	Treatment of swallowing dysfunction and/or oral function for feeding
92607	Evaluation for prescription for speech-generating augmentative and alternative communication device, face-to-face with patient, first hour
92608	Evaluation for prescription for speech-generating augmentative and alternative communication device, face-to-face with patient, each additional 30 minutes
92609	Therapeutic services for the use of speech-generating device, including programming and modification
92630	Auditory rehabilitation; pre-lingual hearing loss
92633	Auditory rehabilitation; post-lingual hearing loss



Nutritional Counseling

The current MFC pre-authorization requirements and benefit limitations are still applicable. See the [MFC Quick Authorization Guide](#) for specific requirements related to nutritional counseling.

Procedure Code	Description	Maximum Units Eligible for Telehealth
97802	Nutrition Assessment and intervention	4
97803	Nutrition Re-assessment and intervention	4
97804	Group Nutrition Service	1

MedStar Family Choice will continue to closely monitor all communications from MDH. We will communicate with our provider community as quickly as possible to any changes that may impact what has been outlined in this provider alert. If you have any questions, please call **800-905-1722, option 5**.

You may also email us questions at MFC-ProviderRelations2@medstar.net.