

Telemedicine and COVID-19 Flexibilities

South Dakota Medicaid



Telemedicine Overview

- Telemedicine is very useful for simple checkups and follow-up consultations.
- Telemedicine involves two sites, the originating and the distant.
 - An originating site is the physical location of the Medicaid recipient.
 - The distant site is the physical location of the practitioner.
- Services provided via telemedicine are subject to the same service requirements and limitations as in person services.
- During COVID-19 the use of telemedicine has allowed recipients to continue to receive necessary services while reducing the risk of COVID-19 exposure.

Telemedicine Provider Types

- Audiologists (temporarily allowed during the COVID-19 public health emergency)
- Certified Social Worker – PIP
- Certified Social Worker – PIP Candidate
- Clinical Nurse Specialists
- Community Health Worker (CHW)
- Community Mental Health Centers
- Diabetes Education Program
- Dieticians
- Federally Qualified Health Center (FQHC)
- Indian Health Services (IHS) Clinics
- Licensed Marriage and Family Therapist
- Licensed Professional Counselor – MH
- Licensed Professional Counselor – working toward MH designation
- Nurse Practitioners
- Nutritionists
- Occupational Therapists (temporarily allowed during the COVID-19 public health emergency)
- Optometrists (temporarily allowed during the COVID-19 public health emergency)
- Physical Therapists (temporarily allowed during the COVID-19 public health emergency)
- Physicians
- Physician Assistants
- Podiatrists
- Psychologist
- Rural Health Clinic (RHC)
- Speech Language Pathologists
- Substance Use Disorder Agencies
- Tribal 638 facilities



Temporarily Covered Service During PHE

- Remote Patient Monitoring
- Therapy Services
- Teledentistry
- Applied Behavioral Analysis
- Optometry Services
- Audiology Services
- Behavioral Health Services
- Audio-only Physician Services

Well-Child Visits

- South Dakota Medicaid has added temporary coverage of well child check-ups for recipients and providers at high risk for COVID-19, under quarantine, or social distancing during the declared emergency for COVID-19.
- Providers bill using modifier 52 to indicate a reduced service was performed since physical components of the exam cannot be completed utilizing telemedicine. The maximum reimbursement rate for services billed with the 52 modifier is 75 percent of the encounter rate for FQHC/RHCs and IHS/Tribal 638 providers.
- Providers are encouraged to complete a physical exam the next time they see the recipient. A provider may resubmit the claim for the full payment if the physical components of the exam are completed within 10 months.
- Additional information can be found in the telemedicine provider manual.





Telephonic Services

- SD Medicaid is temporarily covering some behavioral health and evaluation and management service via audio only technology.
- Behavioral Health Services
 - In response to COVID-19, Substance Use Disorder agencies and Independent Mental Health Practitioners may deliver behavioral health servicing using audio only technology. Providers and recipients must continue to meet the coverage requirements outlined in the Telemedicine and Behavioral Health provider manuals. Audio-only behavioral health services are reimbursed at the encounter rate.
- Evaluation and Management Services
 - Telephonic evaluation and management services for established patients are covered if the recipient is experiencing symptoms consistent with COVID-19, at high risk for COVID-19, under quarantine, or social distancing during a declared emergency for COVID-19. This service is billed using the 52 modifier and will be reimbursed at 75% of the encounter rate.

Documentation Requirements

- Generally, documentation must justify and disclose the extent of services provided and billed to South Dakota Medicaid.
- Originating Site documentation:
 - The originating site must document the physical location of the recipient and provider at the time the services were provided. The originating site must also document if a nurse or other health care professionals were present and provided any services such as checking vitals.
- Distant Site Documentation:
 - The distant site must document the physical location of the recipient and provider at the time the services were provided. The distant site provider must document all services rendered in accordance with the requirements in the Documentation and Record Keeping manual
- The following services require additional documentation requirements:
 - Applied Behavioral Analysis Services (ABA), Therapy Services, Telephonic Behavioral Health Services, IHS Encounters, Remote Patient Monitoring, Teledentistry.

Originating and Distant Site

- South Dakota Medicaid also removed the same community limitation on telehealth services during the PHE that normally requires in-person services when both the provider and patient are located in the same community.
- The originating and distant site may be located in the same community if:
 - The recipient resides in a nursing facility and the nursing facility is the originating site.
 - Telemedicine is being utilized primarily to reduce the risk of exposure of the provider, staff, or others to infection.

HIPAA Compliance

- Office of Civil Rights (OCR) is not imposing penalties for noncompliance with HIPAA requirements for technological communications.
- These services include but are not limited to Facetime, Zoom, or Skype.
- SD Medicaid is allowing the same flexibilities. Once the PHE ends or OCR ends their enforcement discretion providers will be expected to provide telemedicine using a HIPAA complaint platform.
- SD Medicaid encourages providers to use HIPAA complaint platforms when possible.

Telemedicine Provider Manual

Please refer to the [Telemedicine Provider Manual](#) for additional details and requirements associated with telemedicine services.