# Telehealth Compliance & Billing Policy

Sunflower Mountain Mental Health (SMMH)

Effective Date: January 1, 2025

### Purpose

Sunflower Mountain Mental Health (SMMH) is committed to providing high-quality mental health services through telehealth in compliance with **Medicare**, **Medicaid**, **HIPAA**, **DEA regulations**, **commercial insurance regulations**, and **Colorado state telehealth regulations**. This policy outlines patient rights, provider responsibilities, billing requirements, and compliance measures.

### Scope

This policy applies to all patients receiving telehealth services at SMMH and all providers delivering virtual care. It governs the use of virtual care, including video and phone-based appointments for psychiatric evaluations, medication management, and therapy sessions.

#### **Definition of Telehealth**

Telehealth is the delivery of healthcare services using **real-time interactive audio and video communication** or, in some cases, **audio-only communication** when permitted by law.

## **Eligibility Requirements**

- Covered Services: Psychiatric evaluations, medication management, and therapy sessions.
- Patient Eligibility:
  - Patients must reside in Colorado at the time of the telehealth appointment.
  - Medicare and Medicaid patients must be physically located in an approved geographic area at the time of service.
  - Patients must provide written or verbal consent before their first telehealth appointment.
- Provider Qualifications: Under Medicare and Medicaid regulations only licensed and credentialed providers may conduct telehealth services.
- Approved Platforms: Only HIPAA-compliant platforms (e.g., CharmHealth with Zoom integration) are used.
- Originating Site Requirements: Medicare may limit telehealth coverage based on the patient's location (e.g., home, clinic, or designated rural areas). SMMH verifies Medicare coverage before scheduling telehealth visits.

## Patient Rights & Responsibilities

#### 1. Privacy & Confidentiality

- a. Patients have the **right to privacy and confidentiality** in telehealth sessions under **HIPAA privacy and security regulations.**
- b. Patients must ensure a private and secure environment for their sessions.
- Patients can review SMMH's Secure Electronic Communication & Patient
  Consent Policy for more details on telehealth data security.

#### 2. Technology & Connection Requirements

- Patients must use a stable internet connection and a camera-enabled device for video-based appointments.
- b. Patients must ensure that they have **updated software and security protections** to prevent disruptions or security risks.
- c. If technical difficulties occur, the provider will attempt to reestablish communication via the secure, encrypted portal. In the event that fails the provider may attempt to continue the session via **phone** (if allowed by insurance) or reschedule as needed.

#### 3. Identity Verification

- a. Patients must verify their **full name and date of birth** at the start of each telehealth session.
- b. A valid government-issued ID may be required for initial verification.

#### 4. Emergency & Crisis Situations

- a. Telehealth is not appropriate for emergency medical or psychiatric crises.
- b. If a patient experiences an emergency during a session, they should **call 911 or visit the nearest emergency room.**
- c. Patients should review the **Crisis & Emergency Response Policy** for additional guidance.

#### 5. General Rights & Responsibilities

- a. Patients have the right to **be informed about the nature, benefits, and risks of telehealth services** and to ask questions before consenting to care.
- b. Patients have the right to **refuse telehealth services** at any time and seek in-person care instead.
- c. Patients are strictly **prohibited from recording sessions**.

## **Provider Responsibilities**

SMMH providers conducting telehealth sessions must:

- Ensure **HIPAA compliance** in all telehealth interactions.
- Confirm patient eligibility and consent before conducting telehealth services.

- Follow Medicare, Medicaid, and commercial insurance billing regulations to prevent fraudulent claims.
- Document each telehealth session with location, modality (video/audio), and clinical details.
- Provide referrals for in-person care if telehealth is deemed insufficient for the patient's needs.

## Billing, Coding Compliance, and Insurance Coverage

Providers must follow Medicare, Medicaid, and commercial insurance guidelines for telehealth reimbursement:

#### Billing Codes:

- Place of Service (POS) Codes:
  - POS 10 Patient's home
  - POS 02 Other telehealth location
- Modifiers for Telehealth Services:
  - Modifier -95 (Synchronous telemedicine service via interactive video)
  - Modifier -GT (Telehealth services provided via interactive audio/video)
- SMMH must verify and use Correct CPT codes based on Medicare, Medicaid, and commercial insurance guidelines.

#### • Verification:

- Medicare and Medicaid coverage, limitations, and prior authorization must be confirmed before billing.
- Patients are advised to check with their insurance providers regarding telehealth benefits and cost-sharing responsibilities.

#### Payment Responsibility:

- Patients may be responsible for co-pays, deductibles, or non-covered services under their plan.
- For patients whose insurance does not cover telehealth services, out-of-pocket costs will be handled per the Billing & Financial Assistance Policy.

## Medicare & Medicaid Telehealth Coverage Requirements

#### **Medicare Telehealth Requirements:**

- Medicare covers specific telehealth services under Part B, which must be delivered using real-time interactive audio-video platforms.
- Audio-only services are permitted only for certain CPT codes when authorized by CMS.

- Patient Location (Originating Site): Telehealth is typically covered when the patient is in their home or a designated location. During public health emergencies, restrictions may be waived.
- **Provider Location:** SMMH providers must deliver services from an approved site and must use **POS 02 or POS 10** with appropriate modifiers.
- All billing must adhere to CMS telehealth coverage lists, including documentation and compliance with ABN requirements when applicable.

#### Medicaid (Health First Colorado) Telehealth Requirements:

- Colorado Medicaid allows telehealth for patients located in home or community settings at the time of service.
- Audio-only visits are not permitted as of December 31, 2024 in accordance with Centers of Medicare and Medicaid Services policy.
- Services must be delivered through a HIPAA-compliant platform, unless specifically waived.
- Billing must follow Colorado's **Medicaid Telemedicine Billing Manual**, including required modifiers and authorization where needed.
- Providers may not bill Medicaid patients for missed appointments or balance billing under any circumstances.

#### **Limitations & Exclusions**

- Audio-only telehealth sessions are only permitted when Medicare, Medicaid, or commercial insurance allows it.
  - Services are covered under Medicare Part B with restrictions and require designated CPT codes.
  - o Medicaid policies vary by state; SMMH follows Colorado Medicaid guidelines.
- Controlled substance prescriptions via telehealth must comply with DEA and state telehealth prescribing laws, including Colorado's Prescription Drug Monitoring Program (PDMP) requirements.
- Telehealth is not a substitute for in-person emergency care. Patients in crisis must seek in-person or emergency medical services.

# Medicare & Medicaid Appeals for Telehealth Denials

If a patient's telehealth claim is denied, they have the right to appeal through:

• Medicare Beneficiary Ombudsman

o Phone: 1-800-MEDICARE (1-800-633-4227)

o Website: www.medicare.gov

#### Colorado Medicaid Appeals

o Phone: 1-800-221-3943

o Website: <a href="https://hcpf.colorado.gov">https://hcpf.colorado.gov</a>

## **Compliance Monitoring**

- SMMH **regularly reviews telehealth policies** to ensure compliance with federal and state regulations.
- SMMH conducts **regular audits** of telehealth documentation and billing to ensure adherence to Medicare, Medicaid, and commercial insurance regulations.
- Staff receive annual training on HIPAA, security, reimbursement guidelines, Medicare, and Medicaid telehealth requirements.
- SMMH will make a reasonable effort to notify patients if telehealth regulations change, affecting service availability.

#### **Corrective Actions**

- **Non-compliance** with telehealth billing and documentation standards may result in claim denials, repayment obligations, or disciplinary action.
- Fraudulent billing or improper telehealth practices may be reported to **Medicare Fraud Prevention** at 1-800-MEDICARE or <a href="https://www.medicare.gov/fraud">www.medicare.gov/fraud</a>.

### Discontinuation of Telehealth Services

SMMH may discontinue telehealth services if:

- The patient requires a higher level of care that cannot be managed remotely.
- The patient does not comply with technology requirements or repeatedly experiences connection issues.
- The patient's insurance no longer covers telehealth services.
- In such cases, SMMH will provide **alternative care recommendations** or referrals for in-person services.

Last Updated: March 2025

For further assistance, please contact SMMH at **(719) 679-5022** or visit www.sunflowermountainmentalhealth.com.