March 20, 2020

State of Alabama
Press Release: Medicaid

Alabama Medicaid Extends Temporary Telemedicine Coverage for Optometrists

PDF Version

TO: Optometrists

As the Agency continues to monitor the outbreak of the Coronavirus Disease 2019 (COVID-19) in Alabama, we are extending telemedicine to ease access to appropriate medical services for certain codes for your established patients who are recipients of Alabama Medicaid.

What does the extension include?
The extension of telemedicine services is effective **March 16, 2020.** This extension allows Optometrists to provide medically necessary services that can be appropriately delivered via telecommunication services including telephone consultations. These actions will be effective for one month, expiring on dates of service **April 16, 2020**. It will be reevaluated for a continuance as needed.

This is applicable for recipients who wish to receive their care remotely and limit their exposure to the virus. It can also serve as an initial screening for recipients who may need to be tested for COVID-19. For guidance on coronavirus testing, please refer to the Centers for Disease Control & Prevention, Alabama Department of Public Health, and Alabama Department of Mental Health websites.

Recipient copayments will apply according to the Medicaid recipient handbook. A provider may not deny services to an eligible recipient due to the recipient's inability to pay the copayment amount imposed.

Which types of providers can perform telemedicine?
This applies to Optometrists who are currently receiving Alabama Medicaid payments.

Which services can be performed?
Telemedicine is appropriate for consultations and visits for either low complexity, routine, or ongoing evaluation and management. This would include acute illnesses and chronic disease management that, based on the provider's medical judgment, can be managed by utilizing telecommunication services.

Which procedure codes, modifiers, and place of service codes apply?
Medical providers should bill established-patient evaluation and management codes **99211, 99212 and 99213**. Standard documentation applies and additional billing justification must be documented in the recipients' medical records.

For Medicaid to ensure proper reporting with the Centers for Medicare and Medicaid Services (CMS), it is necessary to file the claim with place of service '02' (telemedicine) and a modifier of 'CR' for catastrophic/disaster to assist with claims tracking.

Providers should only bill for telecommunications when the provider speaks directly with the recipient. Providers should not bill Alabama Medicaid for services when, for example, a nurse speaks to the recipient, even if the provider was consulted.

How will the telemedicine services agreements and recipient consent forms apply?
Effective for dates of service March 16, 2020 – April 16, 2020, the telemedicine services agreement and recipient consent for will be waived. *However, the provider must receive verbal consent from the recipient, and the provider must document that consent in the medical record.*

When can a provider submit a claim?
Providers should begin submitting claims on March 20, 2020.

Will the 14 office visits limit apply?
Yes. The 14 office visit benefit will apply.

This Alert is an interpretation based on guidance from Centers for Medicare and Medicaid Services (CMS) as it relates to the COVID-19 pandemic emergency.

Alabama Medicaid will review and verify that requirements for the extension of telemedicine services are being met. Payments to providers that do not meet the specifications are subject to recoupment.

If you have questions, please visit the Medicaid website at www.medicaid.alabama.gov, or call the Medicaid Fiscal Agent at 1.800.688.7989.

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