

OMHSAS Status Update for Behavioral Health Telehealth Expansion—March 20, 2020

Dear Stakeholders,

We are pleased to provide an update on the status of the expansion of behavioral health – telehealth. On March 15, 2020, OMHSAS provided guidance supporting broad use of telehealth to deliver behavioral health services in the community, including in homes. The guidance is based on the current allowable services in PA with additional flexibility that is aligned with CMS guidance. Since the expansion guidance was issued, we have received over 1400 requests by providers who were provisionally approved to immediately initiate the expanded use of telehealth. We are encouraged by these numbers and expect the expansion is being implemented consistently across all behavioral health networks according to the provided guidance.

We recognize these are unprecedented times as we come together to jointly address the COVID-19 crisis. More than ever, it is incumbent upon each local community to continue to provide the necessary behavioral health supports and services to ensure individuals receive the services they need and in the delivery format that is necessary during this crisis. During these times innovation is critical, such as expanding the use of telehealth, delivering services in the home, and allowing staff to work from home. It is also critical to ensure sufficient office and clinic hours are available to meet the needs of new patients and established patients who either do not choose or cannot use telehealth or receive services in their homes. As such, there should be a balance of service delivery modalities based on safety and the needs of individuals receiving services, staff providing services and overall community needs.

It is the expectation of the Department that all providers will be approved to render services as clinically appropriate through telehealth as described within the guidance based on individual needs. Please take note of the below guidance that is being restated to reinforce the direction for the delivery of behavioral health services to support our behavioral health community needs related to telehealth during the emergency disaster declaration.

- Telehealth will allow the use of telephonic video technology commonly available on smart phones and other electronic devices. In addition, telephone only services may be utilized in situations where video technology is not available.
- The practitioner types that can provide services through telehealth will not be limited to psychiatrists, licensed psychologists, Certified Registered Nurse Practitioners and Physician Assistants certified in mental health; Licensed Clinical Social Workers; Licensed Professional Counselors; and Licensed Marriage and Family

Therapists. Other individuals providing necessary behavioral health services will be permitted to utilize telehealth for services that are within their scope of practice.

- The provider types that can bill for telehealth under MA FFS will not be restricted to Psychiatric Outpatient Clinics, Psychiatric Partial Hospitalization Programs, and Drug & Alcohol Outpatient Clinics. When completing the Attestation Form (Appendix B), the “Other” Field (section I.a.) is not limited to HealthChoices during this state of emergency. BH-MCOs may continue to allow billing for any provider type they determine appropriate.
- The services (procedure codes) that can be provided through telehealth under MA FFS will not be restricted to the procedure codes identified in Attachment A of the Bulletin OMHSAS-20-02. BH-MCOs already have the flexibility to do this.
- The provision of telehealth services in homes will not be limited to Assertive Community Treatment, Dual Diagnosis Treatment Team, or Mobile Mental Health Treatment.
- Program requirements for the number or percentage of face-to-face contacts for various behavioral health services may be met with the use of telehealth.
- Program limits on the amount of service that can be provided through telehealth are temporarily suspended.
- Telehealth is a modality for delivering services that can be used across all levels of care for both mental health and substance use services.
- Telehealth should not be the only service modality used in a community and sufficient office and clinic hours should remain available to meet the needs of new and established patients.
- Telehealth includes the ability for providers to deliver services from locations outside of the office, including the home.

Should you have any further questions or concerns, please connect with us at RA-PWTBHS@pa.gov.