State Licensing Regulation on Telehealth
Illinois licensing laws do not directly address telehealth counseling. All regular laws apply to telehealth.

Telehealth reimbursement for mental health
We have heard from a few companies about their policies. When we have updates will let our members know.

Blue Cross and Blue Shield of Illinois Further Expands Telehealth in Response to COVID-19


Posted March 18, 2020
Blue Cross and Blue Shield of Illinois (BCBSIL) is responding to the coronavirus (COVID-19) pandemic by offering additional coverage for telehealth visits to give members improved access to care while reducing their risk of exposure.

Effectively immediately, BCBSIL will accept telehealth billing codes for additional services, including behavioral health therapy, as described in the table below. This expansion is in addition to the new telehealth program announced on March 11, 2020, and applies to eligible BCBSIL PPO and Blue Choice PPO SM members for medically necessary services with an in-network Illinois provider who offers telehealth services. Telehealth benefits for medically necessary services are also available to HMO members (in accordance with the details of their health plan) from providers in their medical group who offer telehealth. BCBSIL will continue to follow the applicable guidelines of the Illinois Department of Human Services and Centers for Medicare & Medicaid Services (CMS) as appropriate for Blue Cross Community Health Plans SM (BCCHP SM) (Medicaid Plans), Blue Cross Community MMAI Plans (Medicare-Medicaid Plan) SM and Blue Cross Medicare Advantage (PPO) SM members.

BCBSIL is also temporarily lifting cost-sharing for medically necessary health services delivered via telehealth. This applies to all fully insured members whose benefit plan includes telehealth benefits.
Benefits may be different for our members covered under certain employer-funded health plans, depending on the decisions their employer makes about telemedicine.

Between now and April 30, 2020, BCBSIL will continue to consider whether to extend the timeframe of this temporary cost-sharing change. BCBSIL will continue to evaluate the telehealth program and make adjustments to best serve our members.

The following telehealth codes are now accepted by BCBSIL for use by health care professionals authorized by Illinois State law to provide services via telehealth: (IDFPR Licensed)

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>90791*</td>
<td>Psych diagnostic evaluation</td>
</tr>
<tr>
<td>90792*</td>
<td>Psych diagnostic evaluation w/medical services</td>
</tr>
<tr>
<td>90832*</td>
<td>Psychotherapy 30 min</td>
</tr>
<tr>
<td>90833*</td>
<td>Psychotherapy 30 min w/e&amp;m evaluation</td>
</tr>
<tr>
<td>90834*</td>
<td>Psychotherapy 45min</td>
</tr>
<tr>
<td>90836*</td>
<td>Psychotherapy 45 min w/e&amp;m evaluation</td>
</tr>
<tr>
<td>90837*</td>
<td>Psychotherapy 60 min</td>
</tr>
<tr>
<td>90838*</td>
<td>Psychotherapy 60 min w/e&amp;m evaluation</td>
</tr>
<tr>
<td>90847*</td>
<td>Family psychotherapy</td>
</tr>
<tr>
<td>99213*</td>
<td>Office visit established patient 15 min</td>
</tr>
<tr>
<td>99214*</td>
<td>Office visit established patient 25 min</td>
</tr>
<tr>
<td>99215*</td>
<td>Office visit established patient 40 min</td>
</tr>
<tr>
<td>99421</td>
<td>Physician /Qualified Health Professional telephone evaluation 5-10 min</td>
</tr>
<tr>
<td>99422</td>
<td>Physician /Qualified Health Professional telephone evaluation 11-20 min</td>
</tr>
<tr>
<td>99423</td>
<td>Physician /Qualified Health Professional telephone evaluation 21-30 min</td>
</tr>
</tbody>
</table>
99441
Physician/Qualified Health Professional online digital evaluation 5-10 min
99442
Physician/Qualified Health Professional online digital evaluation 11-20 min
99443
Physician/Qualified Health Professional online digital evaluation 21-30 min
98966
Nonphysician telephone assessment 5-10 min
98967
Nonphysician telephone assessment 11-20 min
98968
Nonphysician telephone assessment 21-30 min
98970
QNHP online digital E/M SVC EST PT <7 D 5-10 min
98971
QNHP online digital E/M SVC EST PT <7 D 11-20 min
98972
QNHP online digital E/M SVC EST PT <7 D 21+ min

Available telehealth visits with BCBSIL providers currently include 2-way, live interactive telephone communication and digital video consultations, which can allow members to connect with physicians while reducing the risk of exposure to contagious viruses or further illness.

As a reminder, it’s critical to check eligibility and benefits for each member at every visit prior to rendering services. Providers may connect with a Customer Advocate to check eligibility and telehealth benefits via phone, or verify general coverage by submitting an electronic 270 transaction via the Availity Provider Portal or other preferred vendor portal. This step will help providers determine coverage information, network status, benefit preauthorization/pre-notification requirements and other important details.

Continue to watch the News and Updates section of the BCBSIL Provider website for more information. For the most up-to-date information about COVID-19, visit the CDC website.

1 Under current Illinois law, “health care professional” includes physicians, physician assistants, optometrists, advanced practice registered nurses, and clinical psychologists licensed in Illinois, prescribing psychologists licensed in Illinois, dentists, occupational therapists, pharmacists, physical therapists, clinical social workers, speech-language pathologists, audiologists, hearing instrument dispensers, and mental health professionals and clinicians authorized by Illinois law to provide mental health services. (Licensed Counselors) Always verify coverage!

Checking eligibility and benefits and/or obtaining preauthorization/pre-notification is not a guarantee of payment of benefits. Payment of benefits is subject to several factors, including, but not limited to, eligibility at the time of service, payment of premiums/contributions, amounts allowable for services, supporting medical documentation, and other terms, conditions, limitations, and exclusions set forth in the member’s policy certificate and/or benefits booklet and or summary plan description. Regardless of any preauthorization or benefit determination, the final decision regarding any treatment or service is between the patient and their health care provider.

Availity is a trademark of Availity, LLC, a separate company that operates a health information network to provide electronic information exchange services to medical professionals. Availity provides administrative services to BCBSIL. BCBSIL makes no endorsement, representations or warranties regarding any products or services provided by third party vendors such as Availity. If you have any questions about the products or services provided by such vendors, you should contact the vendor(s) directly.
Medicare has temporarily expanded its coverage of telehealth services to respond to COVID-19.

Medicare beneficiaries can temporarily use telehealth services for common office visits, mental health counseling and preventive health screenings. This will help ensure Medicare beneficiaries are able to visit with their doctor from their home, without having to go to a doctor's office or hospital, which puts themselves and others at risk.

If you have an existing healthcare appointment, or think you need to see your doctor, please call them first to see if your appointment can be conducted over a smartphone with video capability or any device using video technology, like a tablet or a laptop. For some appointments, a simple check-in over the phone without video capabilities may suffice.

(Note: Many Illinois residents on Medicare have supplemental or a PPO/HMO that allows for billing the HMO/PPO.)

AETNA
March 17, 2020

In response to the rapidly evolving COVID-19 outbreak, CVS Health and Aetna are here to support you with timely answers and information. Through CVS Health and Aetna's combined resources and your partnership, we can best support your Aetna patients' health and well-being, ensure their access to medication and remove barriers to care.

We're here to help you, help your patients and recently announced these resources and enhancements when applicable:

- If you request testing related to COVID-19, we'll waive your Aetna patient's cost sharing.
- Aetna Commercial patients pay $0 for covered telemedicine visits until June 4, 2020.
- Until further notice, Aetna is also expanding coverage of telemedicine visits to its Aetna Medicare members, so they can receive the care they need from you without leaving their homes. With this change and new flexibilities announced by the Centers for Medicare and Medicaid Services to help combat the virus, Aetna Medicare members can now see their providers virtually via telephone or video.
- Aetna is offering its Medicare Advantage brief virtual check-in and remote evaluation benefits to all Aetna Commercial members and waiving the co-pay.
- Care packages will be sent to Aetna patients diagnosed with COVID-19. Through Aetna's Healing Better program, Aetna Commercial and Medicare Advantage members will receive CVS items to help relieve symptoms as well as personal and household cleaning supplies to help keep others in the home protected from potential exposure. Call the number on your Aetna patient's ID card to register a recently diagnosed patient.
- Patients won't have to pay a fee for home delivery of prescription medications from CVS Pharmacy®.
- Aetna is extending its Medicare Advantage virtual evaluation and monitoring visit benefit to all Aetna members as a fully-covered benefit.
- We're waiving early refill limits on 30-day prescription maintenance medications for all Commercial members with pharmacy benefits administered through CVS Caremark.
- Aetna Medicare members may request early refills on 90-day prescription maintenance medications at retail or mail pharmacies if needed. For drugs on a specialty tier, we're waiving early refill limits for a 30-day supply.
- Through existing care management programs, Aetna will proactively reach out to your patients who are most at-risk for COVID-19.

Please refer to the What You Need to Know About the Coronavirus (COVID-19) - Aetna Providers FAQs on Aetna.com for additional important information. There, you'll find information about codes related to COVID-19 and selected labs approved to do COVID-19 testing. This page will continually be updated with information as it becomes available to help you care for your patients.

Let's work together to provide your patients with a clear path to care. Thank you for your continued partnership.

Best Regards,
Angie Meoli
SVP, Network Strategy and Provider Experience

Aetna is the brand name used for products and services provided by one or more of the Aetna group of companies, including Aetna Life Insurance Company and its affiliates (Aetna).
Refer to Aetna.com for more information about Aetna® plans.
Help/contact us:
If you have any questions, please contact us.

What to do if you or a client is diagnosed with an infectious illness:
Seek medical help.

You should self isolate yourself. Follow CDC recommendations.

ACA Code of Ethics
B.2.c. Contagious, Life-Threatening Diseases
When clients disclose that they have a disease commonly known to be both communicable and life threatening, counselors may be justified in disclosing information to identifiable third parties, if the parties are known to be at serious and foreseeable risk of contracting the disease. Prior to making a disclosure, counselors assess the intent of clients to inform the third parties about their disease or to engage in any behaviors that may be harmful to an identifiable third party. Counselors adhere to relevant state laws concerning disclosure about disease status.