

SC Payer Telehealth Coverage Scorecard

Coverage Priority	Medicare (incl. FFS, MAPD)	SC Medicaid	BCBS SC (incl. BlueChoice HealthPlan of SC)	UnitedHealth
Priority 1: Removal of originating Site Restrictions	●	●	●	●
Priority 2: Provider Types (Overall Score)	●	●	●	●
2a: Mental Health	●	●	●	●
2b: Registered Dieticians	●	●	●	●
2c: Speech Therapists	●	●	●	●
2d: Occupational Therapists	●	●	●	●
2e: Physical Therapists	●	●	●	●
2f: Audiologists	●	●	●	●
Priority 3: FQHCs and RHCs as distant sites	●	●	●	●
Priority 4: Virtual check-ins	●	●	●	●
Priority 5: Audio-only telehealth	●	●	●	●
Priority 6: Chronic care RPM	●	●	●	●
Priority 7: Interprofessional internet consultation (eConsult)	●	●	●	●
Priority 8: Behavioral Health Integration (including CoCM)	●	●	●	●

Key:

Green - Service or provider type are always allowable, or allowable beyond emergency period for at least five months

Yellow - Service or provider type is allowable during emergency period, or certain services or provider types are allowed (not fully allowable)

Red - Provider type or service is not covered

SC Payer Telehealth Coverage Scorecard - Details and Action Plan

Payer	Priorities	Score	Notes
Medicare <i>(Medicare Advantage plans must cover original Medicare benefits and can go beyond)</i>			Allowable during emergency period (renewed 4/16 for 90 days, plus 151 days thereafter per Omnibus)
	Priority 1: Originating Site removal		Always allowable for mental health services so long as in-person visit takes place within 6 months prior to the use of telehealth. (Consolidated Appropriations Act)
	Priority 2: Provider Types		Overall score (Average of below)
	2a: Mental Health		
	2b: Registered Dieticians		97802, 97803, 97804, always allowable
	2c: Speech Therapists		Numerous codes, available through 12/31/23
	2d: Occupational Therapists		Numerous codes, available through 12/31/23
	2e: Physical Therapists		Numerous codes, available through 12/31/23
	2f: Audiologists		Available for PHE only - sunseting after end of PHE
			Allowable during emergency period (renewed 4/16 for 90 days, plus 151 days thereafter per Omnibus)
	Priority 3: FQHCs and RHCs as distant sites		Live video and audio-only to deliver mental health services are allowable so long as certain parameters are met - they will receive PPS/AIR rates.
	Priority 4: Virtual check-ins		Always allowable
			Allowable for Mental Health treatment, evaluation, and diagnosis under the following conditions: - Established patient - Home is eligible originating site - 6 months in person prior and 12 month subsequent in-person - Provider has capability to provide live video but is utilizing audio-only bc patient chose or cannot use live video
	Priority 5: Audio-only telehealth		For non-MH services, audio-only expires 151 days post PHE
Priority 6: RPM and RTM		Always allowable	
Priority 7: Interprofessional internet consultation (eConsult)		Always allowable	
Priority 8: Behavioral Health Integration (including CoCM)		Telehealth can be used to deliver behavioral care management services and/or to provide psychiatric consultative support to the BH care manager in a BHI/CoCM care model.	
SC Medicaid <i>(Medicaid Managed Care Organizations must cover Medicaid benefits and can go beyond)</i>	Priority 1: Originating Site removal		For Physician, NP, PA only
	Priority 2: Provider Types		Overall score (Average of below)
	2a: Mental Health		Expanded MH: 1 year post Federal PHE for LIPs and associate-level licensed practitioners (Bulletin 20-009: Psychologist, LPC, LISW, LMFT) (Bulletin 20-014: Associate-level LPC and LMFT, Postdoctoral Pending Licensure Psychologist) (Bulletin 20-016: LMSW)
	2b: Registered Dieticians		RD: Not allowable
	2c: Speech Therapists		PT/ST: Allowable for 1 year post Federal PHE with both audio and visual component (no audio-only) for services described in bulletins 20-008 and 20-016.
	2d: Occupational Therapists		OT: Only allowable for OT rendered via tele for children enrolled in BabyNet program
	2e: Physical Therpists		PT/ST: Allowable for 1 year post Federal PHE with both audio and visual component (no audio-only) for services described in bulletins 20-008 and 20-016.
	2f: Audiologists		Not allowable
	Priority 3: FQHCs and RHCs as distant sites		Allowable for 1 year post Federal PHE end
	Priority 4: Virtual check-ins		Allowable for 1 year post Federal PHE end
			Allowable for 1 year post Federal PHE end for Physician, NP, PA, LIP. Also for FQHC and RHC.
	Priority 5: Audio-only telehealth		Established pt only
	Priority 6: Chronic care RPM		Not allowable
	Priority 7: Interprofessional internet consultation (eConsult)		Not allowable
Priority 8: Behavioral Health Integration (including CoCM)		Not allowable	
	Priority 1: Originating Site removal		No originating site definition in Telehealth medical policy (CAM-176)
	Priority 2: Provider Types		Overall score (Average of below)
	2a: Mental Health		Clinical psychologist, clinical social worker, LPC, LMFT
	2b: Registered Dieticians		Not currently credentialed for in-person care
	2c: Speech Therapists		Currently covered per CAM176: 92507: Tx of speech, language, voice, communication and/or auditory processing disorder 92522: Evaluation of speech sound production 92523: Evaluation of speech sound production with evaluation of language comprehension and expression 92524: Behavioral and qualitative analysis of voice and resonance

Blue Cross Blue Shield of SC (includes BlueChoice HealthPlan of SC)	2d: Occupational Therapists	●	<p>Currently covered per CAM176</p> <p>97165: Occupational therapy evaluation, low complexity, requiring certain components (see medical policy for detail) 97168: Re-evaluation of occupational therapy established plan of care, requiring certain components (see medical policy for detail)</p>
	2e: Physical Therapists	●	<p>Currently covered per CAM176</p> <p>97161: PT evaluation, low complexity, requiring certain components 97164: re-evaluation of PT plan of care, requiring certain components (see medical policy for details)</p>
	2f: Audiologists	●	<p>Not currently covered provider type under CAM176</p> <p>Codes of interest: ● 92601 - Diagnostic analysis of cochlear implant (<7 years) ● 92602 - subsequent reprogramming (<7) ● 92603 - Diagnostic analysis of cochlear implant (> 7 years) ● 92604 - Subsequent reprogramming (>7)</p>
	Priority 3: FQHCs and RHCs as distant sites	●	No mention in CAM-176
	Priority 4: Virtual check-ins	●	No mention of G2010 or G2012 as covered in CAM-176
	Priority 5: Audio-only telehealth	●	Telehealth policy (CAM-176) explicitly calls out that telephonic (audio only) services are not reimbursed
	Priority 6: Chronic care RPM	●	
	Priority 7: Interprofessional internet consultation (eConsult)	●	Provider-to-provider consultation is allowable by real-time video (Telemedicine policy CAM-032), but not asynchronous P2P communication
	Priority 8: Behavioral Health Integration (including CoCM)	●	
UnitedHealth (Commercial Plans policy: 2022R0046A)	Priority 1: Originating Site removal	●	<p>POS 10: Effective 1/1/22 Telehealth Provided in Patient's Home</p> <p>MH: Clinical psychologist, clinical social worker included</p> <p>Rehab Therapist: PT, OT ST included</p> <p>Registered dietitian or nutrition professional INCLUDED!</p>
	Priority 2: Provider Types	●	
	2a: Mental Health	●	
	2b: Registered Dietitians	●	
	2c: Speech Therapists	●	
	2d: Occupational Therapists	●	
	2e: Physical therapists	●	
	2f: Audiologists	●	
	Priority 3: FQHCs and RHCs as distant sites	●	No mention
	Priority 4: Virtual check-ins	●	Always allowable
	Priority 5: Audio-only telehealth	●	No mention
	Priority 6: Chronic care RPM	●	Always allowable
	Priority 7: Interprofessional internet consultation (eConsult)	●	Always allowable
	Priority 8: Behavioral Health Integration (including CoCM)	●	Not in list of covered codes in UHC Telehealth policy