#### **Health Plan Advisory 24-01**



**To:** All Providers Participating in the Nebraska Medicaid Program

From: Matthew Ahern, Interim Director

Date: January 5, 2024

Re: Guidance on Telehealth after December 31, 2023

This health plan advisory is being issued to provide direction to the health plans about telehealth coverage for Nebraska Medicaid providers after December 31, 2023.

### **Contents**

These Services will No Longer be Available through Telehealth after December 31, 2023	. 2
These Services will Continue to be Covered through Telehealth without an End Date	. 3
New Allowances for Telehealth starting January 1, 2024	. 4

## These Services will No Longer be Available through Telehealth after December 31, 2023.

Providers will have until April 1, 2024, to make accommodations to deliver the following services face-to-face.

Code	Modifier	Description
90953		End-stage renal disease (ESRD) related services monthly, for patients younger than 2 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents; with 1 face-to-face visit by a physician or other qualified health care professional per month
90956		End-stage renal disease (ESRD) related services monthly, for patients 2-11 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents; with 1 face-to-face visit by a physician or other qualified health care professional per month
90959		End-stage renal disease (ESRD) related services monthly, for patients 12-19 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents; with 1 face-to-face visit by a physician or other qualified health care professional per month
90962		End-stage renal disease (ESRD) related services monthly, for patients 20 years of age and older; with 1 face-to-face visit by a physician or other qualified health care professional per month
94002		Ventilation assistance and management, initiation of pressure or volume preset ventilators for assisted or controlled breathing; hospital inpatient/observation, initial day
94003		Ventilation assistance and management, initiation of pressure or volume preset ventilators for assisted or controlled breathing; hospital inpatient/observation, each subsequent day
94004		Ventilation assistance and management, initiation of pressure or volume preset ventilators for assisted or controlled breathing; nursing facility, per day
94625		Physician or other qualified health care professional services for outpatient pulmonary rehabilitation; without continuous oximetry monitoring (per session)
94625	59	Physician or other qualified health care professional services for outpatient pulmonary rehabilitation; without continuous oximetry monitoring (per session)
94625	80	Physician or other qualified health care professional services for outpatient pulmonary rehabilitation; without continuous oximetry monitoring (per session)
94626		Physician or other qualified health care professional services for outpatient pulmonary rehabilitation; with continuous oximetry monitoring (per session)
94626	59	Physician or other qualified health care professional services for outpatient pulmonary rehabilitation; with continuous oximetry monitoring (per session)
94626	80	Physician or other qualified health care professional services for outpatient pulmonary rehabilitation; with continuous oximetry monitoring (per session)
94664		Demonstration and/or evaluation of patient utilization of an aerosol generator, nebulizer, metered dose inhaler, or IPPB device

# These Services will Continue to be Covered through Telehealth without an End Date

Code	Telehealth Modifier	Place of Service	Description		
97151	95	02/10	Behavior identification assessment administered by a Physician or other health care professional, one patient, each 15 minutes		
97155	95	02/10	Adaptive behavior treatment by protocol, administered by a Physician or other qualified healthcare professional, which may include simultaneous direction of a tech, and one patient, each 15 minutes		
97156	95	02/10	Family adaptive behavior treatment guidance, administered by a Physician or other qualified healthcare professional (with or without the patient present), with a guardian or caregiver every 15 minutes		
97161	95	02/10	Physical therapy evaluation: low complexity		
97162	95	02/10	Physical therapy evaluation: moderate complexity		
97164	95	02/10	Re-evaluation of physical therapy established plan of care		
97165	95	02/10	Occupational therapy evaluation, low complexity		
97166	95	02/10	Occupational therapy evaluation, moderate complexity		
97168	95	02/10	Re-evaluation of occupational therapy established plan of care		
92521	95	02/10	Evaluation of speech fluency (e.g., stuttering, cluttering)		
92522	95	02/10	Evaluation of speech sound production (e.g., articulation, phonological process, apraxia, dysarthria)		
92523	95	02/10	Evaluation of speech sound production (e.g., articulation, phonological process, apraxia, dysarthria); with evaluation of language comprehension and expression (e.g., receptive, and expressive language)		
99211	95	02/10	Established patient Evaluation/Management – office or outpatient visit		
99212	95	02/10	Established patient Evaluation/Management – office or outpatient visit (focused)		
99213	95	02/10	Established patient Evaluation/Management – office or outpatient visit (low complexity)		
99214	95	02/10	Established patient Evaluation/Management – office or outpatient visit (moderate complexity)		
99304	95	02/10	Nursing facility consultation, low complexity (25 minutes)		
99305	95	02/10	Nursing facility consultation, moderate complexity (35 minutes)		
99307	95	02/10	Evaluation Management Nursing Facility 10 minutes		
99308	95	02/10	Evaluation Management Nursing Facility 20 minutes		
99309	95	02/10	Evaluation Management Nursing Facility 25 minutes		

### New Allowances for Telehealth starting January 1, 2024.

Code	Modifier	Telehealth Modifier	Place of Service	Description					
Physical Therapy/Occupational Therapy									
97110		95	02/10	Therapeutic procedure, one or more areas, each 15 minutes; therapeutic exercises to develop strength, endurance, and flexibility					
97112		95	02/10	Therapeutic procedure, one or more areas, each 15 minutes; neuromuscular and/or proprioception for sitting and/or standing activities.					
97116		95	02/10	Gait Training (includes stair climbing)					
97530		95	02/10	Therapeutic activities to improve function, with one-on-one contact between patient and provider, every 15 minutes.					
97750		95	02/10	Physical performance test or measurement (e.g., Musculoskeletal, with a written report, every 15 minutes.					
Speech Therapy									
92524		95	02/10	Behavioral and qualitative analysis of voice and resonance					
92526		95	02/10	Treatment of swallowing dysfunction and/or oral feeding function					
Drug, Alcohol, and Behavioral Health Services									
H0001		95	02/10	Substance Use Assessment					
H0001	52	95	02/10	Substance Use Assessment - Addendum					

Health Plan Advisories, such as this one, are posted on the DHHS website at <a href="https://dhhs.ne.gov/pages/Heritage-Health-Plan-Advisories.aspx">https://dhhs.ne.gov/pages/Heritage-Health-Plan-Advisories.aspx</a>. Please subscribe to the page to help you stay up to date about new Provider Bulletins.