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FLORIDA MEDICAID

A Division of the Agency for Health Care Administration

Florida Medicaid Health Care Alert

April 3, 2020

Provider Type(s): 39

Updated: COVID-19: Telemedicine Guidance for Behavior Analysis Services

The purpose of this alert is to provide additional flexibility for Medicaid providers of behavior analysis services during the COVID-19 state of emergency to ensure continuity of care. **This alert replaces the alert published on March 18, 2020 titled “Telemedicine Guidance for Behavior Analysis Services”.**

Telemedicine Definition

Telemedicine is the practice of health care delivery by a practitioner who is in a site other than the site where a recipient is located, using interactive telecommunications equipment that minimally includes real time, two-way interactive communication between a recipient and a practitioner using audio and video equipment.

Current Coverage in the Florida Medicaid Program

In the fee-for-service delivery system, Florida Medicaid covers the use of telemedicine for the purpose of evaluating, diagnosing, and making treatment recommendations by a licensed practitioner. Florida Medicaid does not cover the use of telemedicine for behavior analysis services. The Agency’s current telemedicine policy in the fee-for-service delivery system is available at: http://ahca.myflorida.com/medicaid/review/General/59G_1057_TELEMEDICINE.pdf.

Telemedicine Flexibilities During the COVID-19 State of Emergency

It is imperative that services continue for children in need of behavior analysis services. During the state of emergency, the Agency is expanding coverage of behavior analysis services provided through telemedicine (live, two-way communication) through the fee-for-service delivery system:

Caregiver Training Services:

Behavior analysis services may be provided via telemedicine for the purposes of caregiver training when the caregiver needs to be supported in the delivery of care because the provider is unable to

provide care on that date of service (e.g., provider is diagnosed with COVID-19, the center is closed and home-based care was not an option, etc.). The provider must guide the caregiver in the implementation of certain components of the recipient’s behavior plan to promote carryover of treatment gains. Services are covered, as described below:

Service	Procedure Code	Required Modifier
Behavior Analysis: Lead Analyst Caregiver Training	H2019 BA	GT
Behavior Analysis: Assistant Behavior Analyst Caregiver Training	H2012 BA	GT

Florida Medicaid reimburses for up to 2 hours per day (eight 15-minute units) of caregiver training provided through telemedicine.

Providers using telemedicine as a modality to deliver **caregiver services** must also comply with the following:

- The recipient and caregiver must be present for the duration of the service provided using telemedicine.
- All direct observation requirements must be met.
- Florida Medicaid does not reimburse for caregiver services if another behavior analysis provider is in the home on the same date of service.
- For existing Florida Medicaid recipients receiving behavior analysis, the provider will need to submit a brief expedited administrative authorization request to eQHealth Solutions.
 - The administrative authorization for telemedicine does not replace the existing the prior authorization for behavior analysis services. The number of caregiver training hours requested cannot exceed the hours that have already been approved on the existing authorization.

Direct Observation and Supervision of the Behavior Plan Implementation:

During the state of emergency, providers may utilize the **currently approved** Lead Analyst or Board Certified Assistant Behavior Analyst (BCaBA) hours (procedure codes H2019 BA or H2012 BA) to render services using telemedicine in order to promote in-home training and direct observation of the registered behavior technician (RBT) on the implementation of the behavior plan and intervention strategies. Lead analysts or BCaBA providers rendering services using telemedicine must continue to implement behavior analysis interventions, including monitoring and assessing the recipient’s progress towards goals in the behavior plan.

Florida Medicaid does not reimburse for the services of two or more practitioners delivering services during the same time (i.e., supervision). Therefore, providers must either bill for the services of the RBT or the practitioner performing the direct observation. Providers cannot concurrently bill for the time of both practitioners.

Florida Medicaid will not authorize additional services (hours) at the assistant or lead analyst level solely for the purpose of providing additional services via telemedicine. The purpose of this flexibility is to allow assistant or lead analysts to fulfill hours that were already approved by eQHealth Solutions and determined to be medically necessary in overseeing the care of a child receiving BA services.

In order to qualify for reimbursement of telemedicine services, providers must use interactive telecommunications equipment that minimally includes real time, two-way interactive communication between a recipient and a practitioner using audio and video equipment.

Providers using telemedicine to provide **direct observation** of the implementation of the behavior plan must also comply with the following:

- The recipient and the RBT must be present for the duration of the service provided using telemedicine.
- All direct observation requirements must be met.
- Additional prior authorization is not needed. The Florida Medicaid Management Information System is being modified to implement this change in a manner that does not require the provider to submit a modification request to eQHealth.

Behavior Analysis Provider Telemedicine Requirements (Applies to Caregiver Training and Direct Observation Services)

Providers using telemedicine as a modality to deliver services must comply with the following:

- Ensure services are medically necessary and performed in accordance with the [BA coverage policy](#) and [fee schedule](#).
- Providers utilizing telemedicine for delivering behavior analysis services must already be authorized to provide services to the recipient and must be fully enrolled in Florida Medicaid (i.e., provisional enrollment enacted for the duration of the emergency will not be accepted for telemedicine for BA).
- Telemedicine should not be used by a provider if it may result in any reduction to the quality of care or if the service delivered through this modality could adversely impact the recipient.
- Documentation regarding the use of telemedicine must be included in the progress notes for each encounter with a recipient. All other documentation requirements for the service must be met as described in the coverage policy.
- Providers must comply with the Health Insurance Portability and Accountability Act (HIPAA) when providing services; all equipment and means of communication transmission must be HIPAA compliant.
- Telephone (audio-only) contact without a video component is not permitted.

Reimbursement

The Agency reimburses telemedicine services as outlined in the preceding paragraphs at the same rate listed on the Behavior Analysis [fee schedule](#). Providers must append the GT modifier to the procedure codes when services are delivered via telemedicine.

The Agency does not reimburse the acquisition, installation, and maintenance of telecommunication devices or systems.

Additional Information

The Agency will continue to provide more information as it becomes available.

For more information, visit the Agency's COVID-19 website: http://ahca.myflorida.com/covid-19_alerts.shtml.

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