

July 09, 2020

## MEDICAID ALERT

**TO: All Early Intervention Providers**

**SUBJECT: Coronavirus Disease 2019 (COVID-19) Temporary Telephonic and Telehealth Services Updates**

On Friday, March 13, 2020, President Donald Trump declared a national emergency due to coronavirus disease 2019 (COVID-19) and Governor Henry McMaster declared a state of emergency for the state of South Carolina. On March 30, 2020, the South Carolina Department of Health and Human Services (SCDHHS) issued [Medicaid Bulletin 20-010](#), which created temporary telehealth flexibilities for Early Intervention (EI) providers. These flexibilities included a 90-day extension of all Individualized Family Service Plans (IFSPs) without completion of a new assessment for beneficiaries participating in the state's Individuals with Disabilities Education Act (IDEA) Part C program, commonly referred to as BabyNet in South Carolina. As a part of the state's commitment to ensuring ongoing access to care during the COVID-19 pandemic, SCDHHS is announcing additional temporary modifications related to telehealth coverage and clarifying previously issued guidance.

### **Additional Flexibilities for EI Providers**

SCDHHS is authorizing reimbursement for EI providers to develop relevant portions of a beneficiary's IFSP using curriculum-based assessments (CBAs) or a routines-based interview (RBI) via telemedicine.

Preparation of the IFSP, including the authorization of telemedicine services, must meet the standards set forth in the BabyNet Provider Manual, relevant Healthy Connections Medicaid service-specific provider manuals, and any supplemental COVID-19 telehealth guidance, which can be found at [www.scdhhs.gov/COVID19](http://www.scdhhs.gov/COVID19).

The use of a CBA or RBI to determine the needs of a child and family may not be used as a substitute for evaluations or re-evaluations otherwise required for non-EI services to establish the medical or educational necessity of services.

SCDHHS is also authorizing an additional 30 days for all IFSPs without completing a new assessment, if necessary, to provide time to schedule and update IFSPs that have expired or will expire within the next month. This means BabyNet service coordinators can create a new Initial, Annual or 6-month Review IFSP with updated services and start and end dates without completing a new assessment. If BabyNet service coordinators create a new IFSP, a change review with an updated child/family assessment must be added within 30 days of the most recent initial or annual IFSP.

**Limitations and Clarification**

Interactions that include a video component may be billed, but other forms of electronic communication, such as email and instant and text messaging, are not eligible for reimbursement. Services provided pursuant to the current SCDHHS telemedicine coverage policy should continue to be billed according to those guidelines. SCDHHS will begin accepting claims for these changes for dates of service on or after this alert's date. These temporary policy changes will be in effect for the duration of the federally declared public health emergency unless rescinded or superseded by SCDHHS prior to the end of the emergency.

The telehealth policy modifications outlined in this alert were developed in consultation with clinical professionals and thought leaders throughout the South Carolina provider community and are intended to balance immediate treatment needs that are not appropriate for deferral with the safety and efficacy of remote service delivery. In all circumstances, the services identified above must meet standard requirements for medical necessity.

Additional guidance will be communicated in future bulletins as needed. Providers are encouraged to view the resources, including responses to frequently asked questions, available at [www.scdhhs.gov/COVID19](http://www.scdhhs.gov/COVID19) and submit questions about COVID-19-related policy changes to [COVID@scdhhs.gov](mailto:COVID@scdhhs.gov).

Thank you for your continued support of the South Carolina IDEA Part C and Healthy Connections Medicaid programs.