Behavioral Health Telehealth Fact Sheet

While Rhode Island is operating in a 'State of Emergency' because of COVID-19, Governor Raimondo recently issued an Executive Order to expand telehealth (aka, telemedicine) services. Telehealth services help prevent the spread of COVID-19 by restricting in-person encounters and enabling patients to access and continue care via telephone or video conferencing. This Executive Order will be in effect beginning **March 18, 2020 through April 17, 2020**, unless it is renewed, modified or terminated.

What Rhode Islanders Should Know

For Consumers:
- Insurers must now pay providers for telehealth services, including both telephone or video conferencing appointments, with primary care doctors, behavioral health providers, and other specialists.
- The new rules do not require providers to participate. They just ensure that providers who want to provide telehealth services, even by phone, can be paid for doing so.
- Patients or clients may receive telehealth services from participating providers practicing at any location.
- Most insurers, including RI Medicaid plans, must cover these services regardless of a patient's health status or diagnosis.
- Rhode Island's Department of Health announced that out-of-state behavioral health care providers can obtain a temporary 90-day license to practice in the state.
- Many private health insurance plans and Medicaid must cover advance prescription refills to enable patients to maintain at least a 30-day supply during this State of Emergency, as long as the prescription itself would remain valid beyond the refill date.
- HealthSource RI has opened a temporary special enrollment period (SEP) to allow uninsured individuals to enroll in health insurance coverage through April 15, 2020.

For Providers

- Providers at any location may offer telehealth services to patients or clients.
- Many insurers, including Medicaid plans, are not required to cover any services via telehealth unless such services are already covered benefits under the health benefit plan.
- Telehealth services must include a real-time interaction and cannot be solely in writing such as through email or texting
- Rhode Island General Laws § 27-81-3(12) has been suspended to lift the prohibition on audio-only telephone conversation and the limitations on video conferencing. Providers are encouraged to maintain appropriate privacy and security practices during such communications. Insurers may not impose any limitations on the technologies used to deliver telehealth services.
- Services must be provided from licensed providers
- Insurers must provide clear communication materials to in-network providers to explain how to submit claims of reimbursement for telehealth services.
- Carriers must reimburse in-network participating providers for services delivered via telemedicine at least at the rate of reimbursement that the Carrier would reimburse for the same services when provided via in-person methods. Such reimbursement should not include any so-called facility fees for distant or originating sites.
- The rules for telehealth reimbursement may be different in some insurance plans not covered by State law, especially self-insured plans, original Medicare, and Medicare Advantage plans.
- SAMHSA is permitting states with declared emergencies to request blanket waivers to provide up to 28 days of take-home methadone for some patients receiving medication assisted treatment for substance use disorders. Patients who qualify are being provided with Lock Boxes and Naloxone.
- SAMSHA recommends that new clients presenting with an opioid use disorder consider starting with buprenorphine. The initial mandatory face-to-face appointment has been relaxed for telehealth services. For more details, please go to https://bhddh.ri.gov

For questions about your health insurance policy's covered benefits, please call **Rhode Island Insurance Resource, Education, and Assistance Consumer Helpline** at 401-270-0101.

If you are in crisis, please call **BH Link's 24/7 helpline** at 401-414-LINK.