AETNA Expands Telehealth Coverage Services for 90 Days





This document is available to members as an informational resource. KMA expresses no opinion as to the feasibility, applicability, or impact to your particular practice. The guidance outlined below applies to <u>Aetna plans only.</u>

Aetna is temporarily expanding telehealth coverage during the COVID-19 emergency to allow for **limited** telephone-only services in addition to telehealth services via video + audio.

Here's what you need to know

1. Telephonic-only Care (visual connection not required)

- Telephonic-only visits with in-network providers for **minor acute evaluation and management services** are covered for **90 days** (until June 4, 2020).
- Cost shares are waived for such visits during the **90-day** period regardless of diagnosis.
- For Medicare Advantage members, telephonic-only visits with in-network providers for minor acute evaluation and management services are covered without cost shares on an indefinite basis.
- Telephone-only visits (99441-99443, 98966-98968, G2010, G2012) do not equate to an office visit and will not be reimbursed at the in-office rate.
- Self-insured plan sponsors may opt out of this program.

2. Telehealth (video + audio)

- For **general medicine and behavioral health visits** with in-network providers, a synchronous audiovisual connection is still required.
- Cost shares are waived for such visits during the **90-day** period regardless of diagnosis.
- For Medicare Advantage members, general medicine and behavioral health visits with innetwork providers are covered without cost shares on an indefinite basis.
- General medicine and behavioral health visits are reimbursed at the same rate as in-person visits.
- Self-insured plan sponsors may opt out of this program.

3. Coding Guidance

• Aetna's telemedicine policy is available to providers on the <u>Availity</u> and <u>NaviNet</u> portals.

Additional Aetna Resources:

Information from Aetna for Care Providers about COVID-19