

Effective for dates of services on or after March 6, 2020 until April 15, 2020, coverage for Tufts Health Commercial (including Tufts Health Freedom Plan), Tufts Health Medicare Preferred HMO, Tufts Health Plan Senior Care Options (SCO), Tufts Health Public Plans (Tufts Health Direct, Tufts Health RItogether, Tufts Health Together – MassHealth MCO Plan and Accountable Care Partnership Plans [ACPPs], and Tufts Health Unify) members

Telehealth/telemedicine

- Tufts Health Plan will compensate providers at 100% of the in-office rate as specified in their provider agreements or fee schedules for telehealth
- All Tufts Health Plan contracting providers can provide telemedicine services to our members (medical, behavioral health and ancillary health visits)
- This will also include telephone consultation
- Tufts Health Plan will waive member cost share for any primary care and behavioral health service
- Documentation requirements for a telehealth service are the same as those required for any face-to-face encounter, with the addition of the following:
 - A statement that the service was provided using telemedicine or telephone consult;
 - The location of the patient;
 - The location of the provider; and
 - The names of all persons participating in the telemedicine service or telephone consultation service and their role in the encounter.
- This applies for all diagnoses and is not specific to a COVID-19 diagnosis
- This is intended to prevent people from having to leave their house to receive care
- **Note for Behavioral Health Providers:** For the time period specified above, there are no restrictions on service type. Additionally, the usage of audio without video is acceptable.
- Providers must use appropriate modifiers to indicate when telehealth services have been rendered.