



State of Vermont
Department of Vermont Health Access
Office of the Commissioner
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Agency of Human Services

April 10th, 2020

Re: Vermont Medicaid Continuing Telemedicine Coverage for Dental Services & Temporary New Telephonic Coverage for Brief Communication Services for Dental Providers

Dear Dental Provider,

Vermont Medicaid is encouraging Medicaid-participating providers, including dentists, to utilize telemedicine for delivery of medically necessary and clinically appropriate services to Medicaid members when possible. Telemedicine is defined as health care delivery by a provider who is located at a distant site to a patient at an originating site for purposes of evaluation, diagnosis, consultation, or treatment, using telecommunications technology via two-way, real-time, audio and video (visual) interactive communication, through a secure connection that complies with HIPAA (see Emergency waiver information below).^{1,2} Importantly, Vermont Medicaid reimburses dental services delivered via telemedicine (real-time audio and video interactive communication) at the same rate as the service being delivered in a face-to-face setting. This service delivery method is allowed any time and is not limited to the current public health Emergency.³

Telemedicine Billing Guidance: Dental providers should list '02' as the place of treatment on the claim in order to indicate when services are delivered via telemedicine. Telemedicine services are reimbursed at the same rate as services provided in a face-to-face setting; services must be medically necessary and clinically appropriate for delivery through telemedicine.

Waiver of Potential Penalties for HIPAA Violations: It was announced on Tuesday, March 17th by the Office for Civil Rights at the U.S. Department of Health and Human Services (HHS) that [effective immediately, the Office will exercise its enforcement discretion and will waive potential penalties for HIPAA violations against health care providers](#) that serve patients through everyday communications technologies, such as FaceTime or Skype, when used in good faith for diagnosis or treatment during the COVID-19 nationwide public health emergency.⁴ The Governor of Vermont's Executive Order, 01-20,

¹ Agency of Human Services Health Care Administrative [Rule 3.101 Telehealth](#)

² <https://dvha.vermont.gov/sites/dvha/files/documents/News/FAQ%20Telephonic%20Services%20COVID-19%20Emergency%2003.27.20.pdf>

³ <https://governor.vermont.gov/press-release/governor-phil-scott-declares-state-emergency-implement-new-covid-19-community>

⁴ <https://www.hhs.gov/about/news/2020/03/17/ocr-announces-notification-of-enforcement-discretion-for-telehealth-remote-communications-during-the-covid-19.html>

specifies that relevant rules governing medical services shall be suspended to the extent necessary to permit telemedicine to facilitate treatment of patients in place, allowing the Department to follow the direction of the Office of Civil Rights (U.S. Department of Health and Human Services) with regard to its current health care administrative rule.⁵ Vermont law does require telemedicine to be delivered through a secure connection that complies with HIPAA; this is being addressed through the emergency legislation within Sec. 26, Waiver of Certain Telehealth Requirements During State of Emergency, of H.742, which was signed by the Governor of Vermont on March 30, 2020.⁶ Providers are encouraged to notify patients that these third-party applications potentially introduce privacy risks; providers should enable all available encryption and privacy modes when using such applications.

New Coverage of Brief Communication Services for Dental Providers: During the Emergency, Vermont Medicaid is providing temporary new coverage and reimbursement for the use of three ‘triage codes’ to allow dental providers to receive payment for brief virtual communication services used to determine whether an office visit or other service is needed. Dental providers may bill the following G codes:

- **G0071** (for Federally Qualified Health Centers and Rural Health Clinics only) and **G2012 & G2010** (for providers located in non-FQHC/RHC settings). G2012 is the ‘virtual check-in,’ including via telephone, and G2010 is the remote evaluation of a recorded image or video.
 - These codes are often referred to as ‘triage codes’ because they are intended to allow providers to be reimbursed for brief consultations between patient and provider via telephone or other telecommunications device to determine whether an office visit or other service is needed.
 - Providers should **not** bill the triage codes if an assessment results in an office visit or other service within 24 hours or the next available appointment, or if the virtual check-in/remote evaluation is related to a medical visit within the previous 7 days.
 - The G0071 code should **only** be billed by FQHCs/RHCs and under the fee-for-service national provider identifier.
 - The G0071 code should **not** be billed by non-FQHC or non-RHC providers.
 - These triage codes **will not apply** to Medicaid’s \$1,000 annual benefit limit for adult dental services.

More information regarding the Department of Vermont Health Access’ response to the public health Emergency and temporary new coverage for brief communication services may be found on the DVHA

⁵ <https://governor.vermont.gov/content/declaration-state-emergency-response-covid-19-and-national-guard-call-out-eo-01-20>

⁶ <https://legislature.vermont.gov/bill/status/2020/H.742>

COVID-19 website at the following link: <https://dvha.vermont.gov/covid-19>, including a Frequently Asked Question resource that contains a section specific to the G codes for brief communication services.⁷

Thank you for your work to care for Vermonters during this unprecedented public health crisis,



Cory Gustafson, Commissioner
Department of Vermont Health Access

⁷ <https://dvha.vermont.gov/sites/dvha/files/documents/News/FAQ%20Telephonic%20Services%20COVID-19%20Emergency%2003.27.20.pdf>