



# The Center for Comprehensive Mental Health

## A Texas Medicaid Provider

### Results in Brief

#### Why OIG Conducted This Audit

The Texas Health and Human Services (HHS) Office of Inspector General Audit and Inspections Division (OIG Audit) conducted an audit of telemedicine services provided by the Center for Comprehensive Mental Health (the Center). During the audit scope, which covered the period from June 1, 2020, through May 31, 2021, the Center was paid \$21,158 for 307 Medicaid managed care claims for evaluation and management services provided via telemedicine with add-on codes for psychotherapy.

The COVID-19 pandemic prompted an increased use of telemedicine to connect providers with their patients, and the state of Texas adopted waivers and changes to ease technology restrictions and expand the number of Medicaid services available through telemedicine.

OIG Audit initiated this audit of the Center due to the risk associated with telemedicine claims for evaluation and management with add-on psychotherapy services as these services must be (a) significant and separately identifiable and (b) medical services that would be billable if provided in person.

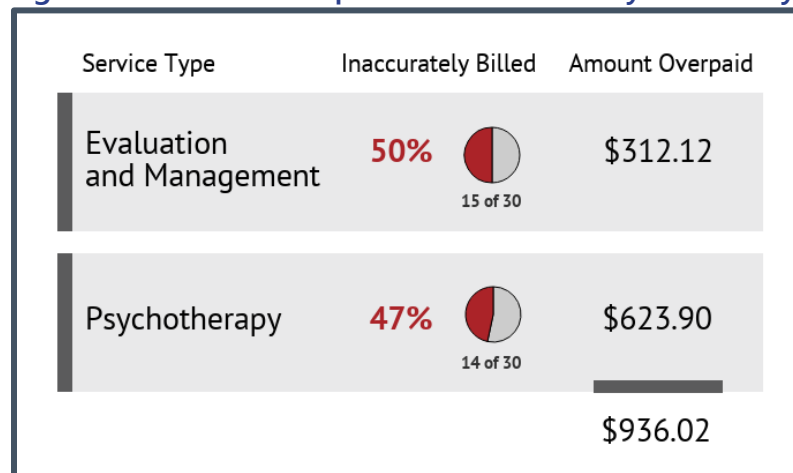
#### Conclusion

The Center for Comprehensive Mental Health (the Center) provided psychiatric services to its patients via telemedicine; however, the Center incorrectly billed for services that it provided for evaluation and management and add-on psychotherapy services. As a result, the Center was overpaid \$936.02. Additionally, the Center did not provide its patients with written or electronic privacy practice notifications prior to evaluation or treatment as required.

#### Key Results

The Center’s physician, who is licensed to provide medical services in Texas, provided behavioral health services in the same manner as those in a traditional in-person setting as required. However, for 30 claims tested, the Center did not always bill the appropriate Current Procedural Terminology (CPT) codes based on time duration parameters for telemedicine evaluation and management services with add-on psychotherapy services. As a result of the Center’s incorrect billing, the Center received an overpayment of \$936.02 for telemedicine evaluation and management services with add-on psychotherapy services. Figure 1 details the amount overpaid to the Center by service type.

**Figure 1: Amount Overpaid to the Center by Service Type**



Source: OIG Audit

## Summary of Review

The audit objective was to determine whether telemedicine services provided by the Center during the COVID-19 waiver period (a) were billed accurately and (b) followed applicable requirements.

The audit scope includes Medicaid managed care telemedicine claims paid for evaluation and management services with add-on psychotherapy services for the period from June 1, 2020, through May 31, 2021, as well as a review of relevant internal controls.

## Background

The Center provides psychiatric, psychological, and counseling services from its office in McAllen, Texas. This audit focused on evaluation and management and psychotherapy telemedicine services provided to Texas Medicaid members through the State of Texas Access Reform (STAR), STAR Kids, and STAR+PLUS programs.

Telemedicine is a health care service that is (a) delivered by a physician licensed in the state of Texas, or a health care professional acting under the delegation and supervision of a physician licensed in Texas, acting within the scope of the physician's or health care professional's license, (b) provided to a patient at a different physical location than the physician or health care professional, and (c) provided using telecommunications or information technology.

## Management Response

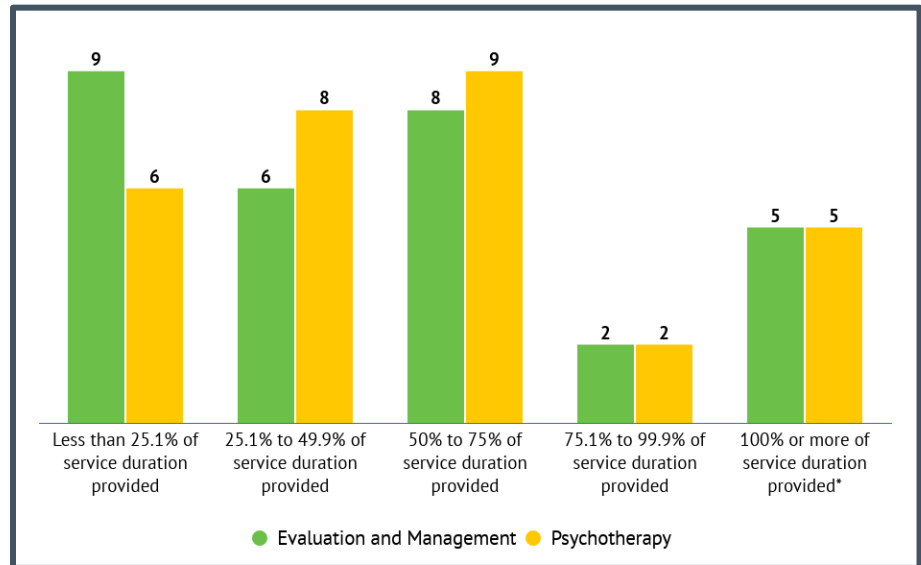
The Center agreed, although it considered the interpretation strict, and indicated corrective actions would be fully implemented by December 2022.

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The Center must return a total of \$936.02 to the state of Texas for services that were overpaid.

Figure 2 details the length of each telemedicine visit by percentage compared to CPT time duration parameters. For example, psychotherapy CPT code 90833 has a minimum duration of 16 minutes. If the recorded time spent by the provider on psychotherapy services was 4 minutes, the visit would be identified in Figure 2 as less than 25.1 percent of the required time met during the visit.

**Figure 2: Summary of Telemedicine Visit Durations by the Center**



\* Telemedicine visits identified as 100 percent or more met or exceeded the identified time duration.

Source: OIG Audit

In addition, for 29 claims tested, the Center did not provide its patients with written or electronic privacy practice notifications prior to evaluation or treatment via telemedicine services as required.

## Recommendations

In addition to returning \$936.02 to the state of Texas, the Center should implement processes to ensure that (a) claims for services billed as time-based CPT codes are based on the actual length of services provided and (b) medical records include documentation to support the CPT codes billed.

Additionally, the Center should provide patients with written or electronic notification of its privacy practices prior to evaluation or treatment via telemedicine services.