



89 Main Street, Montpelier, VT 05620 - 3101
(p) 802-828-3301 | <http://www.dfr.vermont.gov/>

MEMORANDUM

TO: Health Insurers, including Blue Cross Blue Shield of VT and MVP Health Care
FROM: Michael S. Pieciak, Commissioner, Department of Financial Regulation
SUBJECT: COVID-19 and Telemedicine Services
DATE: March 19, 2020

In light of the continuing COVID-19 pandemic, the Department of Financial Regulation is urging health insurers to expand coverage and reimbursement of telemedicine services, including audio-only telephone, e-mail, or facsimile where clinically appropriate.

- Vermont health insurers, including Blue Cross Blue Shield of Vermont and MVP Health Care, have started to take action in this regard, and the Department applauds and supports those efforts.
- Because many providers do not have access to video-and-audio telehealth equipment, insurers are encouraged to cover and reimburse all office services provided telephonically (audio-only) or by “store-and-forward” means that are currently appropriate for telemedicine.
- Insurers are also encouraged to expand the scope of services that are clinically appropriate for delivery through telephone or telemedicine to include services such as physical therapy, and to allow providers to furnish services from any health care facility or their home.
- Further, the Department urges insurers to provide coverage for provision of other services by telemedicine to the maximum extent appropriate.
- Insurers are reminded that Vermont’s mental health parity law (8 V.S.A. § 4089b) prohibits placing any greater burden on insureds for access to mental health treatment than physical health treatment.
- The Department asks that deductibles, co-payments, or coinsurance for health care services provided by telephone not exceed the deductible, co-payment, or coinsurance applicable to an in-person consultation.
- The Department also urges insurers to reimburse providers for brief screening calls or remote evaluations of recorded video or images (HCPCS codes G2012 and G2010), as recommended by the Vermont Department of Health, without imposing cost-sharing on members. The Department recommends that this be done on the same essential basis as Medicare payments for “Virtual Check-Ins.”