

Telemedicine Best Practices and Idea Sharing April 20, 2020

MAHEC Health Innovation Partners Team/Practice Support

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Session Plan

- Billing Updates and Clarifications
- Case Studies Jason Goldie, MD,
 The Family Health Centers
- Open Discussion TelemedicineUse Examples
 - Best practices, ideas, barriers, issues

Update – Box 32 on the CMS 1500

NEW CMS Guidance 4/14/20 - Submit the address where the clinician normally practices. Therefore, if the normal location is the office, put the office address in Box 32 of the CMS 1500.

Clarification – Medicare FFS Billing

- 1. AWV These have been on the approved Telehealth list for a while and have to be Telehealth (Audio and Visual)
- 2. Billing for regular E&M visits have to be Telehealth (Audio and Visual)
- 3. Telephone visits (Audio only) are billed using the Tele E/M codes 99441-99443. These are time based: 99441 (5-10 min.), 99442 (11-20 min.), 99443 (21-30 min). Physician and APP
- 4. Behavioral Health (designated BH providers) telephone only visits also use the Tele E/M codes for BH: 98966 (5-10 min.), 98967 (11-20-min.), 98968 (21-30 min.)

CASE STUDIES

Jason Goldie, M.D.

The Family Health Centers

OPEN DISCUSSION

Telemedicine Use Examples

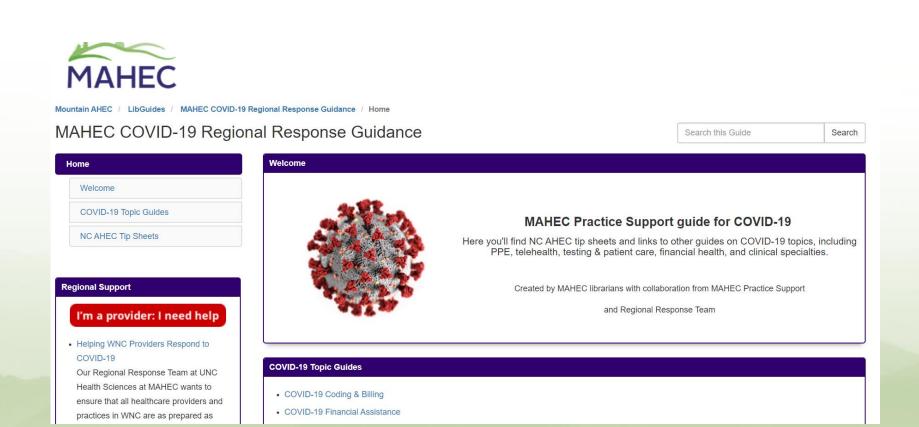
- Best Practices
- Ideas
- Barriers
- Issues

ECHO Series

- Friday, April 24: Telemedicine Experiences at Dry Ridge Family Medicine, Nicole Ogg, M.D. and Anne-Marie Dany, Open Discussion and Q&A
- Monday, April 27: Telemedicine Experiences at Carolina Internal Medicine Associates, David Clements, M.D., Open Discussion and Q&A
- Friday, May 1: Telemedicine Experiences, Open Discussion and Q&A

MAHEC COVID-19 Regional Response Guidance

https://mahec.libguides.com/covid19



Overview and Definitions

Telemedicine/Virtual Visits: refers to the exchange of medical information from one site to another through electronic communication to improve a patient's health. **Not physically in the same room**

Telehealth: A visit with a provider that uses telecommunication systems between a provider and a patient. The provider must use an interactive audio and video telecommunications system that permits real-time communication between the distant site and the patient at home. **Audio and Video**

Virtual Check-in: A brief (5-10 minutes) check in with practitioner and patient via telephone or other telecommunications device to decide whether an office visit or other service is needed. A remote evaluation of recorded video and/or images submitted by an established patient. **Live video not required**

E-Visit: A communication between a patient and their provider through an online patient portal.

Overview and Definitions

Telephonic: A visit between a provider and the patient conducted via telephone. **Audio**

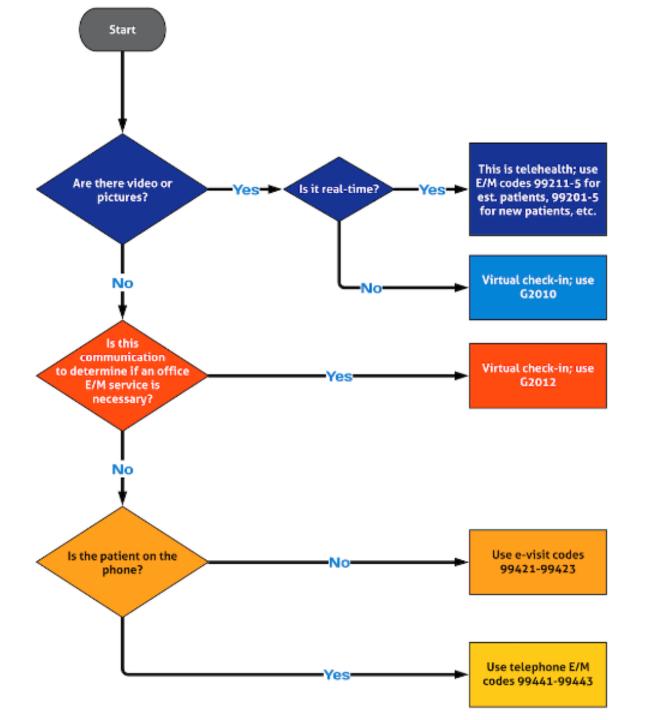
Distant Site: The location of the eligible healthcare provider

Originating Site: The location of the patient

Parity - Paying the same as an in-person visit

Billing Definitions for Telemedicine

- Place of Service Two code descriptor of the actual Place a service is provided to a patient: 11 for Office Telehealth Non Facility PFS or 02 for lower Facility PFS Telehealth. They are structured from 1-99. New CMS guidelines March 31, 2020 for parity. <u>Always verify specific payer requirements</u>
- Address Box 32 of the CMS 1500 (revised 4/14/20) Submit the address where the clinician normally practices. Therefore, if the normal location is the office, put the office address in Box 32 of the CMS 1500.
- Modifier Modifiers are simple two-character designators that signal a change in how the code for the procedure or service should be applied for the claim. Used correctly, modifiers add accuracy and detail to the record of the encounter. For Examples: GT (via interactive audio and video telecommunications systems), CR (Catastrophe/disaster related), 95 (Synchronous Telemedicine Service Rendered via Real-Time Interactive Audio and Video Telecommunications System)



Note: CPT codes for telephone services (99441-99443) are not currently covered by Medicare but may be covered by some private plans. You can find a list of Medicare covered services here: https://www.cms.gov/Medicare/Medicare-General-Information/telehealth/telehealth-codes. For more information, CMS has put together a toolkit for primary care practices:

https://www.cms.gov/files/document/general-telemedicine-toolkit.pdf

Developed by James Dom Dera, MD, FAAFP. Source: A virtual visit algorithm: how to differentiate and code telehealth visits, e-visits, and virtual check-ins. . FPM In Practice blog

https://www.aafp.org/journals/fpm/blogs/inpractice/entry/telehealth_algorithm.html

Telemedicine Documentation Expectations

- Document how you typically would, same chart note, etc. and ADD the following:
 - · Statement that the service was provided using telemedicine
 - Statement that consent was obtained from the patient
 - The location of the PATIENT (enough detail to satisfy a Medicare audit, i.e., covered rural site)
 - The location of the PROVIDER
 - Start and stop time
 - · Additional people who participated in the visit at either site

MAHEC PRACTICE SUPPORT

For any questions and assistance, we are here as your regional AHEC support team: Tammy Garrity, Terri Roberts, Julie Shelton, Michael Melrose, Mark Holmstrom.

Please call or email:

practice.support@mahec.net

828-407-2199

Request for Assistance:

https://app.smartsheet.com/b/form/3f83dc7cf081482aa5730243f7288079

Subscribe to the MAHEC Practice Support Newsletter: http://eepurl.com/gnKQfP

What matters to you, matters to us!