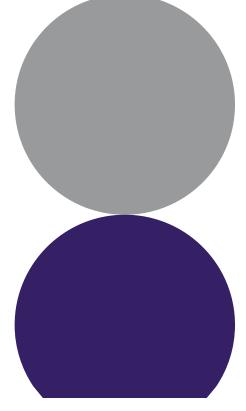


# Coding and Documentation of Telemedicine, Phone Calls & Internet Consultations

Michael X. Repka, MD, MBA Sue Vicchrilli, COT, OCS, OCSR

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## Background

- The Academy has been teaching coding options for telehealth/telemedicine since their release in 2017.
- Important now more than ever expected.
- This content will help you to be as successful as possible in providing medical care to your patients.





#### Telemedicine Overview

- The HIPAA waiver, site of service waiver, and inclusion of new patients are temporary provisions allowed by CMS during the COVID-19 crisis.
- New and established patients included.
- Medicare rules are highlighted.
- Commercial coverage varies, but likely moving to same place.
  Commercial payers may:
  - Waive patient copayment or deductible
  - Implement a time-frame for coverage such as 90-days from initiation or an end date to mid June 2020
- CMS has given Medicaid programs permission to allow coverage.
- In all cases the patient must be informed that a charge will be submitted to insurance.





#### Licensure

- Requirements are being relaxed, though not as fast as media suggest. But they do vary widely by state.
- Latest information on licensure can be found at <a href="http://www.fsmb.org/advocacy/covid-19/">http://www.fsmb.org/advocacy/covid-19/</a>
- The Center for Connected Health Policy is posting national as well as state by state fact sheets

https://www.cchpca.org/resources/covid-19-related-state-actions





#### As of March 23

- CMS released Frequently Asked Questions on Medicare Provider Enrollment Relief related to COVID-19 including:
  - Toll-free hotlines available to provide expedited enrollment and
  - Answers to questions related to COVID-19 enrollment requirements.





## HIPAA - Legal

- HHS Office for Civil Rights (OCR) will not impose penalties on physicians using telehealth in the event of noncompliance with the regulatory requirements under the Health Insurance Portability and Accountability Act (HIPAA) if the platform used is not public-facing.
- Non-public facing remote communication products would include, for example, platforms such as Apple FaceTime, Facebook Messenger video chat, Google Hangouts video, Whatsapp video chat, or Skype. Such products also would include commonly used texting applications such as Signal, Jabber, Facebook Messenger, Google Hangouts, Whatsapp, or iMessageEHR Portal.





#### Who Can Submit Claims?

- Rules apply to MDs, DOs, ODs
- Different set of codes for PAs and NPs detailed at <u>https://www.aao.org/practice-management/news-detail/coding-phone-calls-internet-telehealth-consult</u>





## **Options**

- 1. Phone communication
- 2. E-communication
- 3. Examination via allowed platforms





## Staff Phone Support

#### · Staff should:

- Research the practices top 5 commercial payer policies on their website to determine unique coverage during this time.
- Notify parent that there will be a charge to insurance for the telemedicine visit.
- Confirm insurance
- Obtain
  - The best phone number\* or
  - Email communication\*\* or
  - Approved platforms are available for telemedicine face-to-face encounters\*\*\*
- Notify the parent when the physician will be in contact based on the communication options.





## Liability/Legal

- Best practice is to obtain consent and remind patient this communication is not the same as the face-to-face exam with appropriate legal verbiage.
  - For example, documentation might state, "Patient initiated a request for care and consented to care by phone."





## Telephone Calls

- Initiated by established patient, parent, or guardian of an established patient
- Not billable
  - If phone call results in decision to see patient within next 24 hours
  - 7 days following an appointment
  - If performed within global surgical period that would constitute as postop
  - Less than 5 minutes





## Telephone Calls

Document total time and what was discussed.

99441 5-10 minutes of medical discussion

o 99442 11-20 minutes

o 99443 20-30 minutes





#### E-Visits

- Non-HIPAA compliant platforms are allowed during the public emergency if they are not public facing
- The following are for online digital services with established patients for up to 7 days, cumulative time during the 7 days

o 99421 5-10 minutes of medical discussion

99422 11-20 minutes

o 99423 21 or more minutes





#### E-Visits

- Not to be used for scheduling appointments or conveying test results
- Not billable if conversation constitutes a postop exam





#### Telemedicine Exams

- Office based
  - 99201 99205 E/M new patient
  - 99212 99215 E/M established patient
    - Does not apply to tech code 99211 or Eye visit codes (92002-92014)
- Office consultations
  - For insurances that still recognize these codes
    - 99241 99245





#### Telemedicine Exams

- Need two-way real time audio-video.
- Use 1997 E/M documentation guidelines of history, exam and medical decision making to determine code level.
- Place of service is 2 Telemedicine
- Medicare and other payers may require E/M code appended with modifier -95





### Medicare Quick Check-In

- G2012
- A brief (5-10 minutes) check in with physician via telephone or other telecommunications device to decide whether an office visit or other service is needed.
- Not billable when shorter than 5 minutes

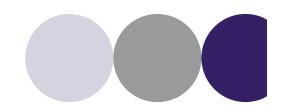




## Video or Image Review

- G2010 Review of video or images, with interpretation and report
- Review of previously recorded video or image taken by patient
- May be Medicare only





## Overview of CPT Options

Type of Service	Definition	CPT or HCPCS Code	Patient Status
Telemedicine visits "face to face"	Real-time audio and video	99201-99205 99212-99215 Place of service "2"	New patient Established patient
Telephone	Phone call with MD, DO, OD	99441 - 99443	Established patients
E-Visits	Non-HIPAA compliant platforms are allowed during the public emergency if they are not public facing	99421-99423	Established patients



## Overview of HCPCS Options

Type of Service	Definition	CPT or HCPCS Code	Patient Status
Virtual Check-In	5-10 minutes to decide whether an office visit or other service is needed	G2012	Established patient
Virtual Review	Review of previously recorded video or image taken by patient	G2010	Established patients





#### Resources

- Paper eye charts at aao.org for patients to check vision
- Coding advice Updated daily
  - https://www.aao.org/practice-management/news-detail/codingphone-calls-internet-telehealth-consult
    - Includes code selection for PAs and NPs
    - Home, nursing home and skilled nursing facility billing
- Telemedicine Primer How to use E/M codes
  - https://www.aao.org/practicemanagement/article/teleophthalmology-how-to-get-started



