Welcome to the Telehealth ECHO Billing, Coding, Reimbursement & Documentation

The session will start in less than 15 minutes





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For educational and quality improvement purposes, we will be recording this video-session

By participating in this clinic you are consenting to be recorded – we appreciate and value your participation

If you have questions or concerns, please use the chat or email shanna.peters@kansasaap.org





Housekeeping

- •This session will be recorded for educational and quality improvement purposes.
- •Please do not provide any protected health information (PHI) during any ECHO session.
- •IT Trouble? Chat with Amy Trollinger or email amy trollinger@kansasaap.org

Please turn on your video!

Please enter your name and organization in the chat box.

Introduce Yourself Please mute your microphone when not speaking.

Microphones

5 min: Introduction 25 min: Lecture

5 min: QI Review

20 min:

Case/Discussion 5 min: Close

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Today's ECHO Faculty

- Kristen Stuppy, MD, FAAP
- Kathy Farrell, MD, FAAP
- Stephanie Kuhlmann, DO, FAAP





Billing, Coding, Reimbursement & Documentation

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Disclosure

- I have no relevant financial relationships with the manufacturers(s) of any commercial products(s) and/or provider of commercial services discussed in this CME activity.
- I do not intend to discuss an unapproved/investigative use of a commercial product/device in my presentation.





Telehealth Requirements

- Determine type of telehealth
 - Audio visual (recommended)
 - Audio only (telephone)
 - · Store and forward internet
- Consent can be given verbally at the time of the telemedicine visit but should be followed up with a signed written consent
- Note location of provider and of patient in medical record
 - · Now a patient's home is an acceptable location
 - Location of the patient is important: many states temporarily lifted licensing requirements





Medicaid telehealth coverage

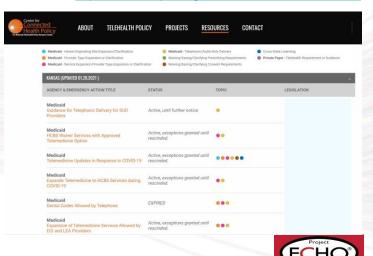
A Kansas telemedicine parity law passed on May 12, 2018, requires private payers to cover telehealth services, but allows them to establish their reimbursement policies. The Kansas telehealth law also allows coverage for telehealth services within the state Medicaid program.

During the pandemic:

- Telehealth services via telephone, electronic and virtual means
- Home as the originating site for telehealth is allowed
- Coverage and pay parity for telehealth services
- Place of service (POS) code 02 (Telehealth) is required when billing for telemedicine services



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



Private Insurance Coverage

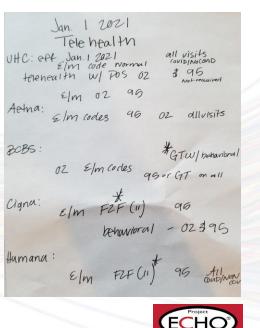
Most insurance providers cover at least some form of telehealth service.

Ask each insurance provider:

- Which CPT and HCPCS codes can be completed via telemedicine?
- Are there any restrictions on the location of the patient or provider?
- Which modifier (-GT or -95) is preferred?
- Does the reimbursement rate match the in office rate?
- Which providers are eligible (physician, NP, PA, therapist)?
- Are there any specific notes that need to be included in the visit documentation?

REVIEW REGULARLY







Types of Telemedicine

- Evaluation and Management (E/M) service codes require a face-to-face visit. This may be done in the office, through a window or by live audio-visual telemedicine.
- Telephone codes are allowable if there are NO E/M service in the preceding seven days or in the subsequent 24 hours.
 - Telephone communication is when audio only two-way synchronous communication is available.
 - Internet is when communication is not synchronous and over the internet, such as email.
 - Telephone consultation can be provided to another clinician but requires
 - No E/M service by the consultant within the past 14 days or within the next 14 days
 - Documentation of a verbal and written report back to the consulting clinician.

You cannot replace an E/M visit with a telephone call but E/M visits can be done by telemedicine or calls and electronic messages can be billed.





Document

- If the service was provided via technology with synchronous audio/video or by audio alone.
- Where the patient is physically located and where you are physically located.
- "Care provided by telemedicine/telecommunication during the COVID-19 pandemic."
- · Consent for telemedicine.
- History, Physical Exam and Medical Decision
 Making as you would for a face-to-face service. For
 example, if a patient complains of shortness of
 breath, there must be an exam of the respiratory
 system.
- · Amount of time you spent providing services.







State Waivers of Licensure

- Missouri: Licensed physicians may provide telehealth services in Missouri until the state of emergency is lifted (scheduled for 3/31/21).
- Nebraska: Out of state providers have the same provisions as in state providers for telehealth until 30 days after the state of emergency ends (this date is not yet identified).
- <u>Colorado:</u> Waivers are expired. You must hold a Colorado license to see a patient who is in Colorado at the time of your visit.
- Oklahoma: Waiver expires April 11.

Find your state on Federation of State Medical Boards







- · Center for Connected Health Policy: Learn policies, search state rules. https://www.cchpca.org/
- Telehealth HHS: Learn the latest federal efforts to support and promote virtual health care, resources for workflow, billing, and legal aspects. https://telehealth.hhs.gov
- AAP Telehealth Resources https://www.aap.org/en-us/professional-resources/practice-transformation/telehealth/Pages/Getting-Started-in-Telehealth.aspx
- AMA Telehealth Toolkit https://www.ama-assn.org/system/files/2020-04/ama-telehealth-implementation-playbook.pdf
- Telehealth Resource Center: Working to advance accessibility of telehealth with a focus in rural communities, Federally Qualified Health Centers (FQHCs), and Rural Health Clinics (RHCs). https://telehealthresourcecenter.org
- Medicaid and CHIP Toolkit https://www.medicaid.gov/medicaid/benefits/downloads/medicaid-chip-telehealth-toolkit.pdf
- Federation of State Licensing Boards: Check if the state your patient is in allows you to practice medicine there.
 - https://www.medicaid.gov/medicaid/benefits/downloads/medicaid-chip-telehealth-toolkit.pdf
 - states-waiving-licensure-requirements-for-telehealth-in-response-to-covid-19.pdf (fsmb.org)
- Coding Scenarios https://www.aafp.org/family-physician/patient-care/current-hot-topics/recent-outbreaks/covid-19/covid-19-telehealth/coding-scenarios-during-covid-19/telehealth.html
- Medicare Q&A https://edit.cms.gov/files/document/medicare-telehealth-frequently-askedquestions-faqs-31720.pdf
- CMS Telemedicine Toolkit https://www.cms.gov/files/document/general-telemedicine-toolkit.pdf





Resources

Payors

Aetna

- https://www.aetna.com/health-care-professionals/clinical-policy-bulletins/medical-clinical-policy-bulletins.html
- https://www.aetna.com/health-care-professionals/covid-faq/billing-and-coding.html

Blue Cross Blue Shield

https://www.bluekc.com/consumer/agents-providers/

Cigna

https://static.cigna.com/assets/chcp/resourceLibrary/medicalResourcesList/medicalDoingBusinessWithCigna/medicalDbwcCOVID-19.html

Humana

https://www.humana.com/provider/coronavirus/telemedicine

UHC

https://www.uhcprovider.com/en/resource-library/news/Novel-Coronavirus-COVID-19.html

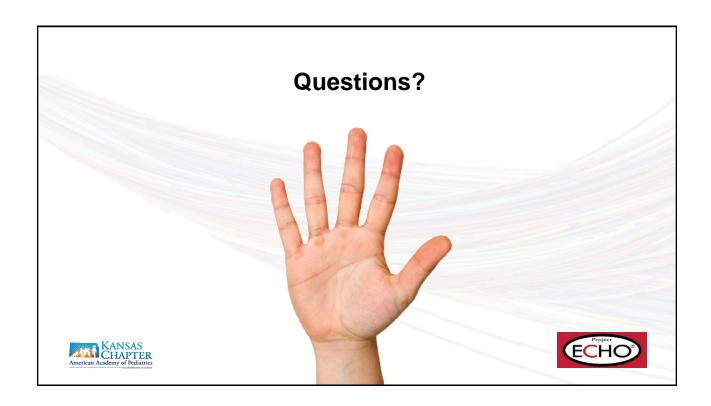
KMAP

https://www.kmap-state-ks.us/Documents/Content/Provider/COVID%2019%20.pdf





Payment Terms



Case Presentation

Questions and Discussion

- Visit that cannot be completed on telehealth platform due to technical issues but is completed via Doximity or on the phone. What is appropriate documentation and billing?
- How do I stay on top of all of the coding changes that seem to occur frequently?
- Should recorded videos be saved as documentation for the visit?







Coming soon...

April 6 – Confidentiality, Privacy & Etiquette
April 20 – Practice Management Side (Forms)



