

COVID-19 Telehealth Summary and Response

What is Telehealth?

Generally, telehealth is one of three types of encounters where the patient is not physically present in the same location as the provider:

- **Telehealth Video Visit** – video or other technology-enabled visit where the patient and provider communicate in real time. Uses normal CPT/HCPC codes based on payer guidelines (list of CMS-approved codes as of 3/17/2020: <https://www.cms.gov/Medicare/Medicare-General-Information/Telehealth/Downloads/covered-telehealth-services.zip>). *Phone visits during the COVID crisis are allowed by Medicare in this category.*
- **Telehealth Telephone visit/Virtual check-in** – Brief (5-10 minute) check-in with provider via remote device including potential review of video or images provided by the patient, does not need to be in real time (relevant HCPCs code G2012 and G2010)
- **E Visit** – Communication with patient and provider via online patient portal. Generally, does not occur in real time and is a time-based service (see table below for code usage for Medicare).

Who is covering Telehealth and Who (only physicians, APPs, MAs, etc.) can deliver Telehealth during the COVID-19 Pandemic?

Many payers are loosening or even removing their guiderails and restrictions on Telehealth visits at this time. These rules are changing daily. Attached is a list as of 3/20/2020. Please refer to payer websites for the most up to date specific coverage information.

Where do patients and providers have to be to conduct telehealth?

Payers are also rapidly changing the rules on locations eligible for Telehealth. Please consult the link referenced above for the most-current information, and remember that at a minimum the patient and provider *cannot* be at the same physical location.

How do I document and charge for telehealth?

Documentation:

- **E Visits** currently have pathways built into Epic and are available to patients via MyChart.
- **Telehealth Telephone visits/ Virtual check-ins:**

Required Components:

- a) Documented verbal consent from the patient
- b) Document duration of time spent with patient (5-10 minutes usually)
- c) Code G2012: billed for a Synchronous Telephone visit between the Provider and Patient
- d) Code G2010: billed for an Asynchronous Visit such as: My Chart encounter; Secure Text message; Secure Email; Any other Audio -visual method

- **Telehealth Video Visit –**

Required Components:

Providers must document all encounters/ services within the medical record and provide that documentation to the originating site when applicable. Providers must document:

- That the visit occurred via telemedicine/ video device
- The physical location of the patient
- The physical location of the provider
- The names of all persons participating in the telehealth video service and their role in the encounter
- That the patient provided consent to treat via a telehealth video device
- Documentation equivalent to the corresponding clinical notes that would be generated during a face to face visit of the same type e.g. SOAP note, TCM note
- These visits encompass multiple E/M visit types and TCM visits

Charges: Telehealth has certain special modifiers and billing rules. See table below for details

TYPE OF SERVICE	WHAT IS THE SERVICE?	HCPCS/CPT CODE	Patient Relationship with Provider
MEDICARE TELEHEALTH VISITS	A visit with a provider that uses telecommunication systems between a provider and a patient.	Common telehealth services include: <ul style="list-style-type: none"> • 99201-99215 (Office or other outpatient visits) • G0425–G0427 (Telehealth consultations, emergency department or initial inpatient) • G0406–G0408 (Follow-up inpatient telehealth consultations furnished to beneficiaries in hospitals or SNFs) For a complete list: https://www.cms.gov/Medicare/Medicare-General-Information/Telehealth/Telehealth-Codes	For new* or established patients. *To the extent the 1135 waiver requires an established relationship, HHS will not conduct audits to ensure that such a prior relationship existed for claims submitted during this public health emergency
VIRTUAL CHECK-IN	A brief (5-10 minutes) check in with your practitioner 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.	<ul style="list-style-type: none"> • HCPCS code G2012 • HCPCS code G2010 	For established patients.
E-VISITS	A communication between a patient and their provider through an online patient portal.	<ul style="list-style-type: none"> • 99431 • 99422 • 99423 • G2061 • G2062 • G2063 	For established patients.