Southwestern Health Resources

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Medicare and Medicare Advantage (MA) Telemedicine
Medical Documentation Guidance

March 19, 2020

Public Health Emergency and 1135 Waiver

In response to the COVID-19 pandemic, the United States Health and Human Services Department (HHS) declared a national **public health emergency (PHE) on January 31, 2020.**

On **March 5, 2020**, HHS temporarily modified telemedicine requirements for Medicare, Medicaid and the Children's Health Insurance Program via an **1135 Waiver.** The modifications will remain in place, indefinitely, until further guidance from HHS.

This document details the Medicare (Traditional and Medicare Advantage) coding and documentation modifications to telemedicine that will support sufficient delivery of health care services to member populations in the community during this public health emergency.

Three Types of Telehealth: Definitions & Examples

(Additional detail provided in slides 4-6)

1. **Medicare Telemedicine Visit**

   Definition: A service that would generally be conducted face-to-face (e.g., office visit), but is furnished via an interactive audio and video telecommunications system that permits real-time communication between a patient and their provider.

   Example: Routine check-up for diabetes management that includes audio and video interaction between a patient and a their provider.

2. **Virtual Check-In**

   Definition: A brief (5-10 minutes) communication between a patient and a provider to determine whether a patient's condition requires further services. Can include a number of communication technology modalities including discussion over a telephone or exchange of information through video or image.

   Example: Patient sends a picture to their provider, via text message, of their gangrene foot for the provider to evaluate and determine if further services are required.

3. **E-Visit**

   Definition: Online evaluation and management conducted via a patient portal that can extend over a period up to 7 days. This does not include telephone or telemedicine communication.

   Example: Patient sends a question, electronically through an EMR, to their provider related to the management of their congestive heart failure. The provider responds 24 hours later.

Medicare Telemedicine Visit

Type of Service	Service Definition	HCPCS / CPT Code	Patient Relationship with Provider
Medicare Telemedicine Visit	A visit with a provider that uses telecommunication systems (audio and video) between a provider and a patient	Common Telehealth Services Include: • 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) • Complete List of codes: 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

Medical Documentation Tips:

- Use as proxy for face-to-face office visits during the PHE by using place of service **(POS) 02-telemedicine with an E&M 99201 – 99215 or Telemedicine G-code for IP, ED of SNF.**

- Document **originating site** (i.e., patient location at time of service) and **distance site** (i.e., practitioner location at time of service) in progress note

- Complete all other coding and documentation as you would during face-to-face office visit

Virtual Check - In

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Type of Service	Service Definition	HCPCS / CPT Code	Patient Relationship with Provider
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	• HCPCS code G2012 • HCPCS code G2010	For established patients

Medical Documentation Tips:

- Use for patient communication that is **unrelated to any medical visit within the previous seven days, and does not lead to a visit within a 24-hour window**; use

- **Patients must consent** to virtual check-in, however, physicians may educate patients on the availability of the service prior to patient consent

E-Visits

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Type of Service	Service Definition	HCPCS / CPT Code	Patient Relationship with Provider
E-Visits	A non face-to-face communication between a patient and their provider through an online patient portal	• 99421, 99422, 99423 • G2061, G2062, G2063	For established patients

Medical Documentation Tips:

- **Patients must initiate E-Visit**, however, physicians may educate patients on the availability of the service prior to patient initiation

- Communications can occur **over a 7-day period**

Sources

Centers for Medicare and Medicaid Services (CMS)

Source Title: President Trump Expands Telehealth Benefits (Released March 17th 2020)
Source Link: https://www.cms.gov/newsroom/press-releases/president-trump-expands-telehealth-benefits-medicare-beneficiaries-during-covid-19-outbreak

Source: Medicare Telemedicine Health Care Provider Fact Sheet (Released March 17th 2020)
Link: https://www.cms.gov/newsroom/fact-sheets/medicare-telemedicine-health-care-provider-fact-sheet

Source: CMS Medicare Telehealth Frequently Asked Questions (Released March 17th 2020)
Link: https://www.cms.gov/files/document/medicare-telehealth-frequently-asked-questions-faqs-31720.pdf

American Health Information Management Association (AHIMA)

Source Title: Telemedicine Services and Health Record (2013 Update)
Source Link: http://bok.ahima.org/PB/Telemedicine#.XnP1_KZYY2w