Improve Access to Care for Your Patients through Telehealth

Health Net®

What is telehealth?

Telehealth is a two-way interaction between you and your patients through telecommunication devices. It is an alternative approach to in-person visits for qualified providers to deliver care and services to patients.

Who can provide telehealth?

- Physicians
- Physician assistants
- Certified registered nurse anesthetists
- Nurse midwives
- Clinical psychologists
- Clinical social workers
- Physical and occupational therapists
- Speech-language pathologists
- Registered dieticians or nutrition professionals

Understand the types of telehealth and when it's appropriate

Telehealth may be used to give evaluation and management (E/M) services, mental health counseling and preventive care screenings. Telehealth may not be right for services that require the patient to be in person, such as:

- Sampling of tissue,
- Insertion or removal of medical devices,
- Direct examination of body structures, or
- When in operating room and the patient is under anesthesia.

Use the correct codes for claims and encounters

When submitting claims, be sure to use correct procedural codes for the covered service or benefit given to patients.

Telehealth types	Coding guidance
SYNCHRONOUS TELEHEALTH: These visits are "real-time" face-to-face, *audio-visual* contact between you and patients to communicate through teleconferences, webcams, smartphones or tablets. **Example:** A doctor having a videoconference on Zoom with a patient to talk to them about their diabetes and discuss their blood sugar levels. **SYNCHRONOUS TELEPHONE:** These "real time" audio-only visits are considered synchronous visits but do not include video interaction. These visits are used for patients who do not have access to, or choose not to use video or web access.	Use the appropriate office visit E/M code (99201–99205, 99211–99215) or preventive service code (99381–99385, 99391–99395) **Place of service (POS):** 02[1,2] **Telehealth modifier:** 95, G0,[3] GT[4] **Originating site:** Q3014 **Transmission fee:**[5] T1014 **Audio only codes:** 98966–98968 (non-physicians), 99441–99443 (as of May 13, 2020) Apply the applicable ICD-10 codes for billing diagnosis

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Telehealth types	Coding guidance
ASYNCHRONOUS TELEPHONE: These visits are not "real-time" and you are exchanging information without video or audio to diagnose, treat, assess or consult with your patients on their health. **Example:** A doctor or clinician uses secure email, text messaging or online patient portal (e-visit) to communicate with their patient on existing symptoms.	Use appropriate code for online assessment *(e-visits or virtual check-ins)*: **CPT** 98969–98972, 99421–99423, 99444, 99541,[1,5] 99458; **ICD-10** G0071, G2010, G2012, G2061–G2063 **POS:** 02[1,2] **Modifier:** GQ (store and forward) **Originating site:** Q3014 Apply the applicable ICD-10 codes for billing diagnosis

Identify when telehealth can be used for HEDIS® measures

BILL THE APPLICABLE CODES BASED ON THE SERVICE RENDERED

Measure	Lines of business	Services conducted through telehealth and billable codes
Antidepressant Medication Management	• Medi-Cal • Commercial • Medicare	• Medication management: ordering refills, medication reminders • Follow-up visits • Major depression diagnosis (can be completed through asynchronous telehealth)
Asthma Medication Ratio	• Medi-Cal • Commercial	• Asthma observations/assessments • Order medication refills • Reviewing medications (1160F) • Advanced illness diagnosis (can be completed through asynchronous telehealth)
Breast Cancer Screening	• Medi-Cal • Commercial • Medicare	• Order screening mammogram • Review reports and past medical history for service • Advanced illness diagnosis (can be completed through asynchronous telehealth)
Care of Older Adult	• Medicare Special Needs Plans	• Advance care planning (1123F, 1124F, 1157F, 1158F, 99483, 99497) • Functional status assessments (1170F, 99483, G0438, G0439) • Pain assessment (1125F, 1126F) • Medication review (1160F)
Colorectal Cancer Screening	• Commercial • Medicare	• Order the screening and follow up on results • Advanced illness diagnosis (can be completed through asynchronous telehealth)
Comprehensive Diabetes Care	• Medi-Cal • Commercial • Medicare	• Review of labs within 14 days of service being completed to capture A1c results (3044F, 3051F, 3052F, 3046F) • Blood pressure vitals taken by a digital blood pressure monitor[6] (remote blood pressure monitoring: 99457; diastolic: 3078F, 3079F, 3080F; systolic: 3074F, 3075F, 3077F) (can also be completed through asynchronous telehealth) • Review of retinal eye exam (2022F, 2023F, 2024F, 2025F, 2026F, 2033F) • Ordering labs • Diabetes diagnosis (can be completed through asynchronous telehealth) • Advanced illness diagnosis (can be completed through asynchronous telehealth)

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Measure	Lines of business	Services conducted through telehealth and billable codes
Controlling High Blood Pressure	• Medi-Cal • Commercial • Medicare	• Blood pressure vitals taken by a digital blood pressure monitor[6] (remote blood pressure monitoring: 99457; diastolic: 3078F, 3079F, 3080F; systolic: 3074F, 3075F, 3077F) (can be completed through asynchronous telehealth) • Advanced illness diagnosis (can be completed through asynchronous telehealth)
Depression Screening	• Medi-Cal • Commercial • Medicare	• Screenings (PHQ2 or PHQ9) (G8431, G8510) • Follow-up visits for positive screening • Depression diagnosis
Diabetes Screening for People with Schizphrenia or Bipolar Disorder Who Are Using Antipsychotic Medications	• Medi-Cal	• Screenings • Order lab tests • Follow-up visits • Diabetes diagnosis (can be completed through asynchronous telehealth)
Diabetes Monitoring for People with Diabetes and Schizophrenia	• Medi-Cal	• Screenings • Order lab tests • Follow-up visits
Follow-Up Care for Children Prescribed ADHD Medication	• Medi-Cal • Commercial	• Medication management: order refills, medication reminders • Follow-up visit
Osteoporosis Management in Women Who Had a Fracture	• Medicare	• Order the bone mineral density test • Order prescriptions to treat osteoporosis
Postpartum Care	• Medi-Cal • Commercial	• Blood pressure vitals taken by a digital blood pressure monitor[6] (remote blood pressure monitoring: 99457; diastolic: 3078F, 3079F, 3080F; systolic: 3074F, 3075F, 3077F) (can be completed through asynchronous telehealth) • Weight check • Lactation consulting • Wound incision through pictures of the wound • Evaluation of postpartum depression (G8431, G8510) • Discussion of family planning • Postpartum visit (Z39.2)
Timeliness of Prenatal Care	• Medi-Cal • Commercial	• Risk assessments • Order labs and confirm pregnancy with pregnancy diagnosis (i.e., O09 or Z34) • Fundus height measurement • Blood pressure vitals taken by a digital blood pressure monitor[6] (remote blood pressure monitoring: 99457; diastolic: 3078F, 3079F, 3080F; systolic: 3074F, 3075F, 3077F) (can be completed through asynchronous telehealth) • Weight check • Order ultrasound • Monitor for conditions, like diabetes and hypertension • Documentation of last menstrual period (LMP), estimated due date (EDD) and obstetrical history • Pregnancy diagnosis

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Measure	Lines of business	Services conducted through telehealth and billable codes
Statin Therapy for Patients with Cardiovascular Disease	• Medi-Cal • Commercial • Medicare	• Order and review medications (1160F) • Advanced illness diagnosis (can be completed through asynchronous telehealth)
Statin Therapy for Patients with Diabetes	• Medi-Cal • Commercial • Medicare	• Order and review medications (1160F) • Advanced illness diagnosis (can be completed through asynchronous telehealth
Transitions of Care	• Medicare	• Patient engagement after inpatient discharge (99495, 99496) • Medication reconciliation post-discharge (1111F) • Advanced illness diagnosis (can be completed through asynchronous telehealth)
Weight Assessment and Counseling for Nutrition and Physical Activity	• Medi-Cal • Commercial	• Vitals[6] (BMI percentiles, blood pressures) (remote blood pressure monitoring: 99457; diastolic: 3078F, 3079F, 3080F; systolic: 3074F, 3075F, 3077F) (can be completed through asynchronous telehealth) • Staying Health Assessments • Anticipatory guidance
Well-child and Adolescents Well-care Visits	• Medi-Cal • Commercial	Some elements of a well-care visit can be captured: • Initial/interval history • Developmental surveillance, • Developmental screening (9 months, 18 months, 30 months) (standardized screening: 96110) • Anticipatory guidance • Psychosocial behavioral assessment • Depression screenings (ages 12–21) (G8431, G8510) • Preventive E/M code (99381–99385, 99391–99395) The member will need to complete the physical portion of the exam by the end of the measurement year with the provider. Submission of claims or encounters is evidence that a wellness visit took place

The table above is not an all-inclusive list of HEDIS measures that are eligible for telehealth.

Follow best practices for using telehealth

• Make sure the communication venue is secure and compliant with the Health Insurance Portability and Accountability Act (HIPPA) Security Rule and Health Information Technology for Economic and Clinical Health Act (HITECH).

• Find out which telehealth method to use depending on the services conducted and what telecommunication devices are available to the patient.

• Ask if your patient needs help prior to telehealth visit (i.e., language translator, privacy).

• Obtain and record patient, parent or caregiver's verbal or written consent that the use of telehealth is an acceptable method to deliver health care to the patient.

• During a real-time telehealth visit, confirm the patient's identity and ask if the patient has the privacy they need prior to starting.

• Maintain documentation on telehealth health discussions in the patient's medical record with dates of service.

• Plan for technical issues or interruptions that may occur during visits.

Refer to the following resources for additional telehealth guidance

- Follow the American Medical Association (AMA) and/or American Academy of Pediatrics (AAP) billing guidelines for telehealth:
  - AMA coding for telehealth:
    » www.ama-assn.org/system/files/2020-05/covid-19-coding-advice.pdf
    » www.ama-assn.org/system/files/2020-05/telehealth-services-covered-by-Medicare-and-included-in-CPT-code-set.pdf
  - AAP coding for telehealth: www.aap.org/en-us/Documents/coding_factsheet_telemedicine.pdf
- For commercial, refer to the Department of Managed Health Care Service (DMHC) All Plan Letters (APLs) for telehealth guidelines during COVID-19 pandemic:
  - APLs 20-009, 20-013, 20-032: www.dmhc.ca.gov/LicensingReporting/HealthPlanLicensing/AllPlanLetters.aspx
- For Medicare, refer to Centers for Medicare & Medicaid Services (CMS) billing guidelines and resources
  - List of covered telehealth services:
    » www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/clm104c12.pdf
    » www.cms.gov/Medicare/Medicare-General-Information/Telehealth/Telehealth-Codes
  - Telehealth resource: www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/TelehealthSrvcsfctsht.pdf
  - Telehealth FAQs: www.cms.gov/files/document/medicare-telehealth-frequently-asked-questions-faqs-31720.pdf
  - List of POS codes: www.cms.gov/Medicare/Coding/place-of-service-codes/Place_of_Service_Code_Set
- Follow separate telehealth billing requirements for Federally Qualified Health Clinics (FQHCs), Rural Health Clinics (RHCs) or Indian Health Service (IHS) providers:
  - CMS.gov guidance:
    » www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/clm104c12.pdf
    » www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/bp102c15.pdf
    » www.cms.gov/files/document/se20016.pdf
  - Department of Health Care Services (DHCS) telehealth guidance:
    » www.dhcs.ca.gov/provgovpart/Pages/Telehealth.aspx
    » files.medi-cal.ca.gov/pubsdoco/publications/masters-mtp/Part2/ruralcd.pdf
- Refer to the COVID-19 Updates & Alerts for Providers web page at www.healthnet.com/content/healthnet/en_us/covid-19-updates/providers.html

Telehealth terminology and codes were referenced from the NCQA HEDIS MY 2020 and 2021 Volume 2 Technical Specifications, ama-assn.org, cms.org, dmhc.ca.gov, and dhcs.ca.gov. The information in this tip sheet is for educational purposes and is not meant to replace professional coding standards or guidelines. Codes are subject to change and coverage is not guaranteed. Providers are required to follow the plan's payment policies and state and federal requirements, laws, and regulations on rendering and billing telehealth services.

[1]Codes are not applicable to FQHCs, RHCs or IHS. Some payers have recommended billing telehealth codes for rural clinics under HCPCS G0071, G2025, revenue code 052X, modifier 95, CG.

[2]Commercial and Medicare will bill the normal POS codes (11, 23 etc.) with modifier 95.

[3]For Medicare E/M therapy services to evaluate, diagnose and treat acute stroke, use modifier G0 with POS 02 or HCPCS Q3014. For Critical Access Hospital (CAH), use revenue codes 096X, 097X or 098X. Source: www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/2018Downloads/R2142OTN.pdf.

[4]Use modifier GT for Medi-Cal specialty mental health and Medicare CAH Optional Payment Method II (revenue codes 096X, 097X or 098X) for telehealth claims. Some private payers may also allow modifier GT

[5]Applicable to Medi-Cal. Refer to https://files.medi-cal.ca.gov/pubsdoco/Publications/masters-MTP/Part2/mednetele.pdf.

[6]Member-reported services (biometric values: BMI, BMI percentiles, height, weight and blood pressures) at telehealth visits can be utilized for HEDIS when the following criteria are met: information is collected by a primary care practitioner or specialist if specialist is providing primary care service related to condition being assessed while taking the patient's history. Information must be documented, dated and maintained in the member's legal health record.