

# Closing Gaps & Meeting Metrics

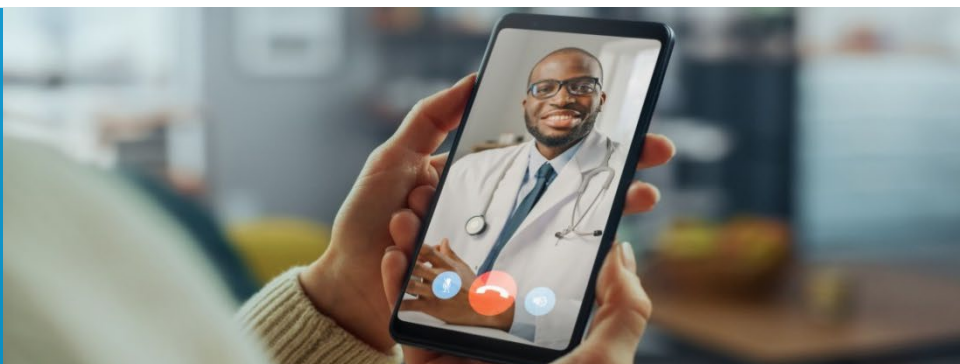
## Coding Tips & Best Practices

June 2022

## Telehealth Documentation and Coding

### What is Telehealth?

Telehealth, sometimes referred to as telemedicine, is the use of electronic information and telecommunication technologies to extend care when the provider and the patient are not in the same place at the same time.



Telehealth can help health care providers:

- Increase continuity of care
- Extend access to care beyond normal hours
- Reduce patient and provider travel burden
- Help overcome clinician shortages, especially among rural and other underserved populations
- Help stop the spread of infectious diseases
- Support patients managing chronic health conditions
- Screen patients with symptoms of COVID-19 and refer as appropriate
- Enable patients who are vulnerable to COVID-19 to continue receiving medical care safely

## Types of Telehealth

### Live Video

- A two-way, face-to-face interaction between a patient and a provider using audiovisual communication technology
- Also referred to as “real-time”

### Store-and-Forward

- Remote evaluation of recorded video and/or images submitted by an established patient

### Remote Patient Monitoring

- Use of digital technologies to collect health data from patients in one location and electronically transmit that information securely to providers in a different location
- Data can include vital signs, weight, blood pressure, blood sugar, pacemaker information, etc.

### Audio-only Visits

- Use of telephone for visits without video

### E-visits

- Non-face-to-face patient-initiated communications through an online patient portal

### Mobile Health (mHealth)

- Allows patients to review their personal health data via mobile devices, such as cell phones and tablet computers that assist in communicating their health status and any changes
- Often includes use of dedicated application software (apps)

### Case-based Teleconferencing

- Method of providing holistic, coordinated, and integrated services across providers
- Usually interdisciplinary, with one or multiple internal and external providers and, if possible and appropriate, the client and family members or close supports

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## Risk Adjustment Data Eligibility

The Centers for Medicare & Medicaid Services (CMS) announced a series of policy changes that broaden Medicare coverage and payment for telehealth services during the COVID-19 public health emergency (PHE).

Medicare Advantage plans must cover all telehealth services covered under Original Medicare fee-for-service.

CMS published an interim final rule on April 30, 2020, waiving the video requirement for certain telephone evaluation and management (E/M) services, as Medicare beneficiaries may not have access to or prefer not to utilize real-time interactive audio-video technology required for Medicare telehealth services.

This interim final rule, however, applies to Original Medicare coverage criteria. It **does not address the criteria for Medicare Advantage risk adjustment data eligibility.**

Based on CMS' April 10, 2020, health plan management system (HPMS) memo and an update made on January 15, 2021, for these services to qualify for risk adjustment, they must be performed using interactive audio telecommunication simultaneously with video telecommunication to permit real-time interactive communication. A smart phone, for example, will satisfy the face-to-face requirement. A standard landline or non-smart phone would not satisfy the face-to-face requirement.

This clarifying guidance applies to all telehealth services provided in 2019, 2020, 2021 and 2022.



## Documentation and Coding Guidelines

Before submitting a Medicare claim, verify that the service provided is included on the list of [available codes for telehealth](#).

As a best practice, Florida Blue recommends documenting in the medical record whether a visit was conducted via interactive audio telecommunication simultaneously with video telecommunication or through other virtual mechanisms, such as audio only.

Medicare Advantage organizations and other organizations can submit diagnoses for risk adjusted payment purposes for telehealth visits **that meet all criteria for risk adjustment eligibility. These diagnoses must result from an allowable inpatient, outpatient, or professional service – from a face-to-face encounter (including telehealth services with both interactive audio and video).**

Effective January 1, 2022, modifier 93 was added to the Current Procedural Terminology (CPT®) code set to identify services as being audio only and therefore, not eligible for MA risk adjustment.

- **Modifier 93:** Synchronous telemedicine service rendered via telephone or other real-time interactive audio-only system. Billing the telephonic CPT code will clearly indicate that the service was provided as audio only.
- **Modifier 95:** Simultaneous interactive audio with video telecommunication. Use CPT telehealth with any place of service (POS) and the appropriate CPT and Healthcare Common Procedure Coding System (HCPCS) codes.

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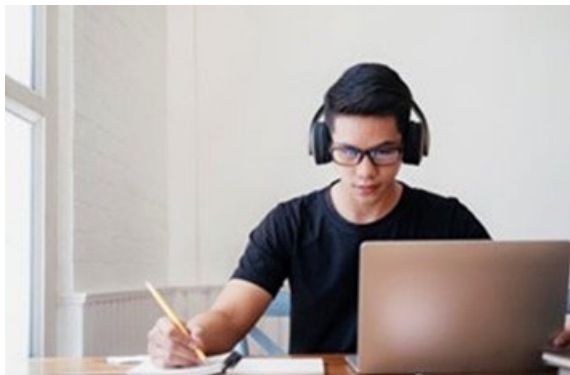
## **Documentation and Coding Guidelines** *continued*

Two new code options are now available to indicate the place of service (POS):

- **POS 02** for telehealth services provided other than in patient's home
- **New POS 10** for telehealth services provided in patient's home (which is a location other than a hospital or other facility where the patient receives care in a private residence)

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## **Earn CEUs through Coding Webinars**



We offer on-demand webinars that provide detail about how to support diagnoses per Centers for Medicare & Medicaid Services and U.S. Department of Health and Human Services guidelines. These courses are updated with current codes and guidelines and are eligible for 1.5 continuing education unit credits each.

Topics include:

- Atrial fibrillation
- Cancer
- Chronic kidney disease
- Chronic obstructive pulmonary disease
- Diabetes
- Major depression
- Mental health
- Rheumatoid arthritis



Register today at [availity.com](https://www.availity.com)<sup>1</sup>.

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## **References**

- **CMS:** [cms.gov/files/document/applicability-diagnoses-telehealth-services-risk-adjustment-update-1152021.pdf](https://www.cms.gov/files/document/applicability-diagnoses-telehealth-services-risk-adjustment-update-1152021.pdf)
- **Available codes for telehealth:** [cms.gov/Medicare/Medicare-general-information/telehealth/telehealth-codes](https://www.cms.gov/Medicare/Medicare-general-information/telehealth/telehealth-codes)
- **Place of service codes:** [cms.gov/Medicare/Coding/place-of-service-codes/Place of Service Code Set](https://www.cms.gov/Medicare/Coding/place-of-service-codes/Place-of-Service-Code-Set)
- **CMS final interim rule from April 2020:** [cms.gov/files/document/covid-medicare-and-medicaid-ifc2.pdf](https://www.cms.gov/files/document/covid-medicare-and-medicaid-ifc2.pdf)

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<sup>1</sup>Availity LLC is a multi-payer joint venture company.

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