

# *Telemedicine*

The Ultimate Guide to  
*BILLING* **SUCCESS**  
& Maximizing  
**REVENUE**

Dusty chairs in your waiting room  
can be good for your bottom line.

# What you'll find inside:

- **Billing & coding tips**
- **A list of common carriers & their stance on telemedicine for 2017 & beyond**
- **A handy reference guide for many available Telehealth HCPCS Level II & CPT Codes**
- **A pre-implementation checklist with step-by-step recommendations**
- **Technology & implementation recommendations**

This eGuide is intended to help you better understand telemedicine codes in a general sense. In this document AdvancedMD is not offering specific coding advice for telemedicine services by facilities or institutions. Nor are we providing advice on how to code for specific telemedicine services.

Telemedicine is medicine's biggest shakeup in history. According to a recent study, the shortfall of primary care physicians over the next decade will be somewhere between 14,900 to 35,600.<sup>1</sup> These challenges call for better technology and new approaches to treatment. In response, Centers for Medicare and Medicaid (CMS) and state Medicaid programs are some of the many institutions turning to telemedicine to fix the gaps. Current trends suggest that virtual home visits will be routine in the near future. After all, patients demand it, doctors love the flexibility and additional revenue, and staff enjoys the ease of administration.

This eGuide is a must-read if you are considering adding telemedicine in your practice and need to better understand the new requirements and processes. We share tips about billing and coding for telemedicine as well as implementation. We've included a list of common carriers and their stance on telemedicine for 2017 and beyond.

You'll also find a handy reference guide for many of the available Telehealth HCPCS Level II and CPT Codes. Finally, a pre-implementation checklist provides you with step-by-step recommendations to help you prepare your patients and staff for the convenience and freedom of telemedicine. We've condensed hundreds of pages of industry data – including current trends – into our most concise overview on managing telemedicine.

# The demand & forecast for telemedicine is booming.

Telemedicine is expected to be commonplace within the next few years, especially with the shift toward value-based care. By the end of 2020, telemedicine is forecasted to be worth \$34 billion globally.<sup>2</sup>



TAPPING INTO THE HOT  
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The industry predicts that as patients become more proactive in their healthcare delivery choices, use of telehealth solutions will increase from an estimated 250,000 patients in 2013 to an estimated 3.2 million in 2018.<sup>3</sup> Tapping into the hot telemedicine trend can play a major role in boosting your practice revenue.

Here are three things you should know about billing and coding for telemedicine as well as ways to execute a successful implementation.

# Simplifying telemedicine coding helps in maximizing reimbursement.

Using the correct CPT code or modifier does not always equate to an accepted claim by the payor. Each payor has its own rules & requirements & the payor determines what services are covered.

The following table contains a sample of current telemedicine HCPCS Level II and CPT codes. This CPT code set is maintained by the CPT Editorial Panel, an independent, multi-stakeholder body appointed by the American Medical Association (AMA).<sup>4</sup>

SERVICE	HCPCS LEVEL II	CPT
Office or other outpatient visits		99201-99215
Annual Wellness Visit – first & subsequent visit	G0438-G0439	
Telehealth consultations, emergency department or initial inpatient	G0425-G0427	
Follow up hospital care services		99231-99233
Follow up nursing facility care services		99307-99310
Transitional care management		99495-99496
Kidney disease education services	G0420-G0421	
Diabetes self-management training services	G0108-G0109	
Individual psychotherapy		90832-90834 & 90836-90838
Family psychotherapy – with or without the patient present		90846-90847
Annual depression screening	G0444	
Annual alcohol misuse screening	G0442	

This sample of HCPCS Level II & CPT codes gives insight into the types of screening, management, & education services that have codes for delivery via telemedicine.

## CMS outlines how to code & submit telemedicine claims.

Per CMS, submit claims for telehealth services using the appropriate CPT or HCPCS code for the professional service along with the telemedicine modifier GT (Modifier 95 for 2017) via interactive audio & video telemedicine. For example, 99201 GT.

By coding and billing the GT modifier with a covered telehealth procedure code, you are certifying that the beneficiary was present at an eligible originating site when you furnished the telehealth service. By coding and billing the GT modifier with a covered ESRD-related service telehealth code, you are certifying that you furnished one “hands on” visit per month to examine the vascular access site.<sup>5</sup>

### *Modifiers*

# 95

This is a new modifier for 2017. Synchronous telemedicine service rendered via real-time interactive audio and video telemedicine. See Appendix P of the CPT code set for a complete list of codes that this modifier can be used with.

### *New Place of Service*

# 02

The location where health services and health-related services are provided or received through telemedicine. (Effective January 1, 2017)” that should be considered when billing for telemedicine.

Commercial payors are also using these modifiers for the services that are covered.

Check with each payor to determine which codes & modifiers to use.



## The current position of the common carriers toward telemedicine is shifting towards greater acceptance.

Rising healthcare costs, government-mandated access to healthcare, and a shortage of healthcare providers are driving demand for telemedicine. As a result, current trends suggest that virtual home visits will be routine in a few short years.

Increasingly, the healthcare industry, CMS and state Medicaid programs are turning to telemedicine solve many of these problems. Virtual home visits just may be what the doctor ordered. (Sorry, we couldn't help it!)

It's no surprise that commercial carriers are feeling the heat to comply by reimbursing for telemedicine visits. Check out how some of the biggies' policies have been adjusted to make telemedicine a routine part of their acceptable coverage.

Commercial carriers are feeling the heat to comply by reimbursing for telemedicine visits.



Aetna introduced a new policy on January 1 that covers telemedicine services for members enrolled in certain Aetna plans. Under the policy, Aetna will pay for two-way, real-time audiovisual interactive communication between the patient and health care practitioner. The patient must be present and take part throughout the interaction. This interaction doesn't have to involve direct patient contact.

Per Aetna, you'll need to report a modifier GT along with an eligible CPT/HCPCS code. You can find a list of eligible CPT/HCPCS codes on the Aetna secure provider website. When reporting modifier GT, you're certifying that you're offering services to a patient through an interactive audio and visual telecommunications system.<sup>6</sup>



Telemedicine and telehealth services are covered when Medicare coverage criteria are met.<sup>8</sup>



Independence Blue Cross announced that it is now offering coverage for telemedicine. This coverage option is a new way to make healthcare more convenient and accessible, allowing its members to consult with a doctor via secure video on their smartphone or other digital device for medical issues that aren't emergencies. Independence's telemedicine coverage offers members two options for talking with physicians via a HIPAA-secure video on a cell phone, iPad or other digital device. Each state can have different rules.<sup>9</sup>



**CMS**

Telemedicine/telehealth services including consultation, office visits, individual psychotherapy and pharmacologic management delivered via a telecommunications system are covered when the following criteria are met:

- Telemedicine is the use of electronic information and telecommunications technologies to provide professional health care services.
- Telemedicine is often used to connect practitioners and clinical experts in large hospitals or academic medical centers with patients in smaller hospitals or CAHs, which are typically located in more remote locations.
- Telemedicine can assure that these remotely located patients enjoy the same access to potentially life-saving technologies and expertise that are available to patients in more populated parts of the country.<sup>7</sup>

[View the full list of Medicare telemedicine codes.](#)



Telehealth is available at no cost to GEHA High and Standard Option health plan members. High Deductible Health Plan members will pay the telehealth rate at the time of their call and then submit their receipt to GEHA. GEHA will apply the rate to their deductible or reimburse the member if they have met their deductible.<sup>12</sup>



As part of the telemedicine benefit, your regional contractor has established a network of telemental healthcare originating sites for beneficiaries and networks of offsite providers who can evaluate, treat and refer you as necessary via video. If you are near an originating site, you may use TRICARE's Telemental Health Care benefit for all aspects of behavioral health services including psychotherapy and medication management.

As with any behavioral health care received from a TRICARE network provider, active duty service members will need a referral before getting care under the Telemental Health Care benefit. TRICARE Prime active duty family members and retirees do not need a referral or authorization to set an online care appointment with a distant provider, as long as the Telemental Health Care appointment is one of the first eight behavioral health sessions in a fiscal year: October 1-September 30.<sup>11</sup>



Optum is focused on the development of telehealth to support providers, consumers, payers and other groups to improve the delivery of care, access from primary care to specialty and general population health management.<sup>13</sup>



Therapy and medication management telehealth sessions are available to Cigna customers nationwide and related claims will be administered in accordance with the customer's benefit plan. Offering services via telehealth to Cigna customers gives you the potential to broaden the scope of your practice, earn additional income during "off" hours, reach patients in a larger geographical area, expand access to mental health care, and reduce your time on the road.

You must be appropriately licensed in the state in which the customer is being treated. Use of a secure video-based technology is preferred as it can provide you with information and a patient experience that is similar to an in-person examination.

You must also be aware of relevant in-person and telehealth practice guidelines. You are expected to follow federal, state and local regulatory and licensure requirements related to your scope of practice, any limitations on the use of specific technologies and prescribing practices, and need to abide by state board and specialty training requirements.

Contracted behavioral providers who meet the telehealth specialty requirements may deliver services via telehealth with no additional credentialing. To provide telehealth sessions to Cigna customers, please attest to meeting the designated specialty requirements on the Attested Specialty Form. Upon receipt and approval by Cigna of the completed form, "telehealth" will be added as a specialty to your Cigna profile.<sup>10</sup>

## Follow our 5-point checklist to ensure a better, smoother implementation process.

1. Plan your telemedicine strategy. Determine how you are going to use telemedicine in your practice. For example, are you trying to improve the patient experience by offering after hours or weekend visits? Are you seeking to improve continuity of care with chronic and elderly patients? Are you trying to attract and retain physician employees? Whether your goals are focused on patient outcomes or financial improvement, telemedicine can help. You need to understand how.

technology evaluation and selection process, workflow integration, and training and coaching staff.
2. Appoint a telemedicine champion in your practice. This person is an advocate for the success of your telemedicine initiative. His or her role should promote the benefits of your telemedicine strategy to your staff. This person should be part of the
3. Market the benefit of telemedicine to your patients. This won't be hard, but requires a bit of setup to create a flawless patient experience. Your champion should help with patient support and education. Appointment reminders should be automated and properly triggered to help reduce no-show rates. Utilizing email and text patient messaging services to create awareness of your telemedicine option is mutually beneficial and can help fill empty timeslots.
4. Practice conducting a telemedicine visit both as a provider and patient. Being on camera can take some practice.
5. Meet all state licensing requirements. Telehealth makes it possible for providers to connect with patients in other states. When this happens, the originating site (the location of the patient) is considered the "place of service", and therefore the distant site provider must adhere to the licensing rules and regulations of the state in which the patient is located. Each state has their own laws and regulations around licensing which are typically enforced by the state medical board.<sup>14</sup>

Be awareness of ambient noise, your stage (what's behind you) and your body language. Be sure to practice with staff and friends before going live with patients.



# Summary

AdvancedMD is a complete medical office software suite. We believe integration at the software level is key to your success with telemedicine as the best telemedicine systems act like a virtual clinic when you have cloud access to all your patient health information, medication histories and demographics.

Integration through the cloud is like having a complete virtual practice. All you need is a computer with a webcam and an internet connection.

AdvancedTelemedicine is part of AdvancedMD. Because everything we offer is cloud-based, you never rack up expenses on costly software, servers, or IT services. Our HIPAA-compliant system works seamlessly as one and includes clinical, billing and patient engagement solutions.

The telemedicine appointment dashboard is intuitive, so there's no dreaded learning curve. You enjoy a single location to review the status of all your telemedicine appointments. It just takes a click to launch and end two-way HD video sessions. It's that easy.

Appoint a telemedicine champion in your practice. This person is an advocate for the success of your telemedicine initiative. His or her role should promote the benefits of your telemedicine strategy to

your staff. This person should be part of the technology evaluation and selection process, workflow integration, and training and coaching staff.

Integration through the cloud is like having a complete virtual practice.

Now you can attract and engage patients with virtual healthcare, especially in rural areas, with our simple and integrated telehealth technology. See how easily you can care without boundaries.

<sup>1</sup>New Research Confirms Looming Physician Shortage. April 5, 2016. [https://www.aamc.org/newsroom/newsreleases/458074/2016\\_workforce\\_projections\\_04052016.html](https://www.aamc.org/newsroom/newsreleases/458074/2016_workforce_projections_04052016.html)

<sup>2</sup>Mordor Intelligence. "Global Telemedicine Market: Growth, Trends, and Forecasts (2015-2020)". August 2015.

<sup>3</sup>American Hospital Association. "The Promise of Telehealth for Hospitals, Health Systems and Their Communities." Trend Watch. January 2015. P. 6.

<sup>4</sup>Workgroup for Electronic Data Interchange. "Innovative Encounters Issue Brief: Introduction to Telehealth Codes." December 21, 2016.

<sup>5</sup>Extracted January 25, 2017. <https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/downloads/TelehealthSrvcsfctshst.pdf>

<sup>6</sup>Extracted January 25, 2017. <http://www.aetna.com/healthcare-professionals/assets/documents/OLU-MA-Sept2016.pdf>

<sup>7</sup>Extracted January 25, 2017. <https://www.cms.gov/Newsroom/MediaReleaseDatabase/Press-releases/2011-Press-releases-items/2011-05-02.html>

<sup>8</sup>Extracted January 25, 2017. [https://www.unitedhealthcareonline.com/ccmcontent/Provider/IL/UHC/en-US/Assets/ProviderStaticFiles/ProviderStaticFilesPdf/Tools%20and%20Resources/Policies%20and%20Protocols/UnitedHealthcare%20Medicare%20Coverage/Telehealth\\_and\\_Telemedicine\\_UHCMA\\_CS.pdf](https://www.unitedhealthcareonline.com/ccmcontent/Provider/IL/UHC/en-US/Assets/ProviderStaticFiles/ProviderStaticFilesPdf/Tools%20and%20Resources/Policies%20and%20Protocols/UnitedHealthcare%20Medicare%20Coverage/Telehealth_and_Telemedicine_UHCMA_CS.pdf)

<sup>9</sup>Extracted January 25, 2017. <https://www.bcbs.com/news/press-releases/independence-blue-cross-announces-new-telemedicine-coverage>

<sup>10</sup>Extracted January 26, 2017. <https://www.cigna.com/newsroom/news-releases/2016/cigna-telehealth-connection-expands-access-and-choice-to-millions-including-adding-access-to-behavioral-health-consults>

<sup>11</sup>Extracted January 26, 2017. <http://www.tricare.mil/CoveredServices/IsItCovered/TelementalHealth>

<sup>12</sup>Extracted January 26, 2017. <https://www.geha.com/about-us/news-and-alerts/articles/with-telehealth-geha-has-you-covered-24-7-365>

<sup>13</sup>Extracted January 26, 2017. [https://www.optum.com/content/dam/optum3/optum/en/resources/white-papers/8637\\_39732-042014\\_Telehealth\\_whitepaper\\_FINAL\\_042215.pdf](https://www.optum.com/content/dam/optum3/optum/en/resources/white-papers/8637_39732-042014_Telehealth_whitepaper_FINAL_042215.pdf)

<sup>14</sup>Extracted January 26, 2017. <http://www.telehealthresourcecenter.org/toolbox-module/cross-state-licensure>