

Telehealth

Practice Implementation Guide



Telehealth

At this time, the recommendation is for all appropriate medical care to be delivered via telehealth:

- Every office visit converted to a telehealth visit reduces the exposure of your patients and staff
- Telehealth saves the use of limited personal protection equipment (PPE)
- All payers have agreed to reimburse care provided via telehealth through April 30
- HIPAA requirements for telehealth have been relaxed

VHAN is committed to helping your practice move forward with confidence through:

1. A checklist for getting started with Telehealth
2. Addressing questions sent to info@vhan.com
3. Posting all questions and answers to the Telehealth FAQ section on the VHAN Hub

View the VHAN hub at vhanhub.com



Getting Started – 3 Simple Steps

Select and Test Technology

1. Pick Your Tool

- We are supporting practices using **Doxy.me**: See message from Doxy [here](#)
 - Web-based, so no hardware or app to be installed
 - Three plans available: Free, Professional - \$35/phys/mo, Clinic - \$50/phys/mo.
 - Personalized waiting room/queue
 - White label branding available (for Clinic package)
 - Business Associate Agreement (for HIPAA) is included
 - See additional details [here](#)
- Other considerations
 - Your EMR vendor may have telehealth capabilities built-in
 - FaceTime, Facebook Messenger video chat, Google Hangouts video, and Skype are also acceptable tools to use during the pandemic. **Do not use** Facebook Live, Twitch, TikTok, or other public facing communication services

2. Use a Separate Device for Communication

- Don't attempt to communicate with your patient and document on the same device

3. Test Technology

- Conduct mock visits with your staff as patients
 - Verify the technology works and gain confidence in the process
 - This will prepare your staff to coach patients on their use



STEP 1

Engage Patients in Telemedicine Visits

The physician should review appointments several days in advance, marking visits which can be conducted via telehealth:

1. Consider all visits for which a physical exam is not needed (allowed codes provided below)
2. Strongly consider visits if patients meet the following criteria:
 - Immunocompromised
 - High-risk patients, or patients with concerns about visiting your office
 - COVID-19 symptomatic patients – those with fever, cough, and shortness of breath



STEP 2

Engage Patients in Telemedicine Visits – cont'd

Staff call the patients for whom a telehealth visit is indicated. For all the reasons above, patients should be encouraged to convert to a telehealth visit. If they are willing, verify the following:

- They will place the call from the State in which the physician is licensed
- They have access to a smart phone, tablet or computer equipped with a webcam and sound, connected to the Internet
- They have a secure, private location in which they feel comfortable
- Let them know that copays, co-insurance and deductibles will be the same as for an on-site visit
- Provide the patient specific visit instructions, with a link or other login information. *(Sample email scripting is provided in the pages that follow)*

Use your practice's communication channels to let patients know of your ability and desire to meet their needs via telehealth

- Use your website, social media, email, and patient portal.
- Use your marketing channels (e.g., Google ads).
- Update your phone message system, automated reminders, and scheduling scripts.
- Post a notice on the door of your practice.



STEP 2

Scheduling, Documentation, and Billing

Schedule, document, and bill using your existing process

- **Consider conducting the telehealth visit in your exam room:**
 - The background will be familiar and professional to the patient
 - Your practice's standard exam room privacy will apply during the visit
 - The exam room will be conducive to your mental framework for how you conduct your visits
- **To the extent possible, place the camera of your communication device at eye-level**
- **Complete your documentation during and after the visit, as you would with an in-person visit**
 - Obtain and document consent from the patient about the tele-visit. Verbal consent is acceptable at this time.
 - Consider adding a clause to all documentation – “This visit occurred during the pandemic and telehealth may have some limitations.”
 - Documentation requirements are otherwise unchanged
- **If applicable, you need to be able to e-prescribe.** Note that controlled substances may still require paper prescriptions.



STEP 3

Email Script

Dear “patient name”,

Given the current situation with COVID19, we are working to set up alternative options for your upcoming visit with Dr. (*physician name*). We can now use a video call to conduct your next visit. Typically, the cost for a video visit (also called telehealth) is the same as an in-person visit. Copay and deductibles still apply to telehealth visits, and you may receive a bill for any balance after the appointment.

In order to utilize this option, you will need a computer or electronic device (smartphone or tablet) WITH a camera AND a microphone.

- From your computer, use the following browsers: Chrome, Firefox, or Safari 11+
- From an Apple device (iPhone or iPad), use Safari
- From an Android device, use Chrome
 1. A representative from our office will call you to confirm your email address and review your history.
 2. We will send a link to your email to click on at the time of your visit OR you can type in your provider's doxy.me web address (*fill in provider's individual web address*) in the browser.
 3. Type in your First AND Last name and click "Check In".
 4. Make sure to allow your browser to use your CAMERA/WEBCAM and MICROPHONE.
 5. This will put you in the waiting room and when ready, your care provider will start your visit.

You can also view these instructions at the following link: <https://help.doxy.me/en/articles/95857-check-in-flyer-for-patients>.

Coding and Reimbursement Recommendations

- Document the visit and patient consent in the medical record. You'll have to meet the requirements for the code selected.
- Medicare has updated its policies to broaden the scope of its payments. There is variation in what other carriers are saying at this time. Effective March 6, 2020, Medicare is allowing Telehealth (video) visits to be provided when a patient is at home, not just in rural areas.
- New and established patients can be seen by telemedicine at this time. Medicare is not enforcing the requirement that an established patient relationship exists.
- You can bill for telemedicine visits based on the following guidelines:
 - Telehealth Visit: If by real-time video conference you can bill E&M codes. Inpatient and outpatient visits apply. The rules have changed about where this is delivered.
 - 99201-99215
 - G0425-G0427
 - G0406-G0408
 - Virtual Check-in: Often by phone, use codes G2010 or G2012.
 - E-Visit: Brief evaluations initiated by the patient through the patient portal are likely an E-Visit. Use codes 99421-99423 and G2061-G2063.
- Co-pays and deductibles may apply. Some carriers are waiving co-pays and deductibles at this time.

Remarks on Liability

HIPAA

- Effective immediately, OCR has announced "enforcement discretion" as it relates to HIPAA and telehealth remote connections during the pandemic.
- The "relaxed" regulations apply to all evaluations, not just COVID-19.

Professional liability coverage

- Let your carrier/broker know you plan to perform these services and verify coverage.
- Stay within your scope of practice and license.
- Keep up to date regarding the ability to cross state lines when seeing patients.
- Consent the patient. At minimum, document a verbal consent.

Questions?

Contact us at info@vhan.com and access
Telehealth FAQs at VHANHub.com

Appendix

Allowed Codes

Telehealth (Video)	
Outpatient; New	99201
	99202
	99203
	99204
	99205
Outpatient; Established	99211
	99212
	99213
	99214
	99215
Inpatient Consultations	G0425
	G0426
	G0427
	G0406
	G0407
	G0408
	G2062
G2063	

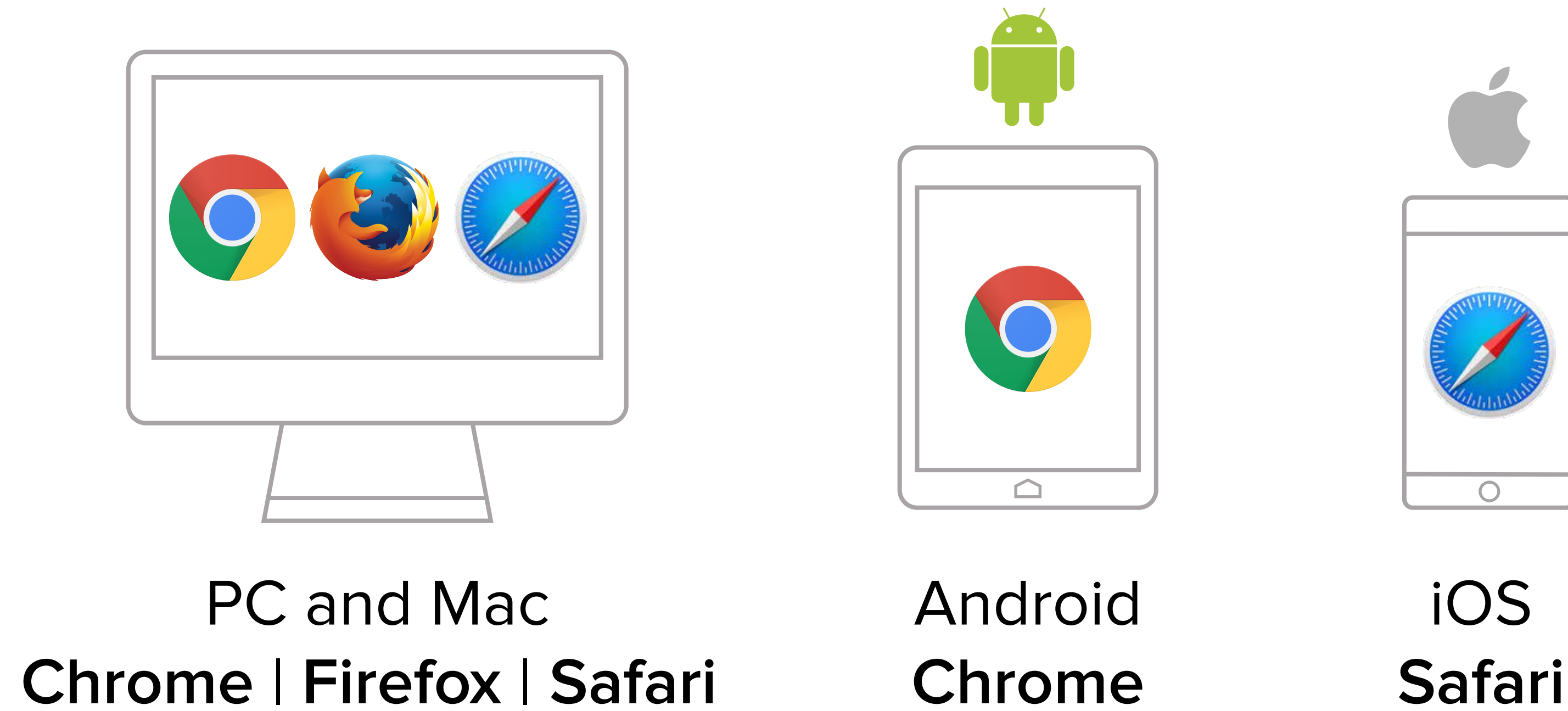
Virtual Check-in (Phone)	
Physician/Qualified Provider	G2010
	G2012
E-Visits (Patient Portal)	
Physician	99421
	99422
	99423
Non-Physician	G2061
	G2062
	G2063

Note: POS 02 for Telehealth (Medicare), Modifier 95 (Commercial Payers)

Additional telemedicine codes are available

How to check in for your video visit

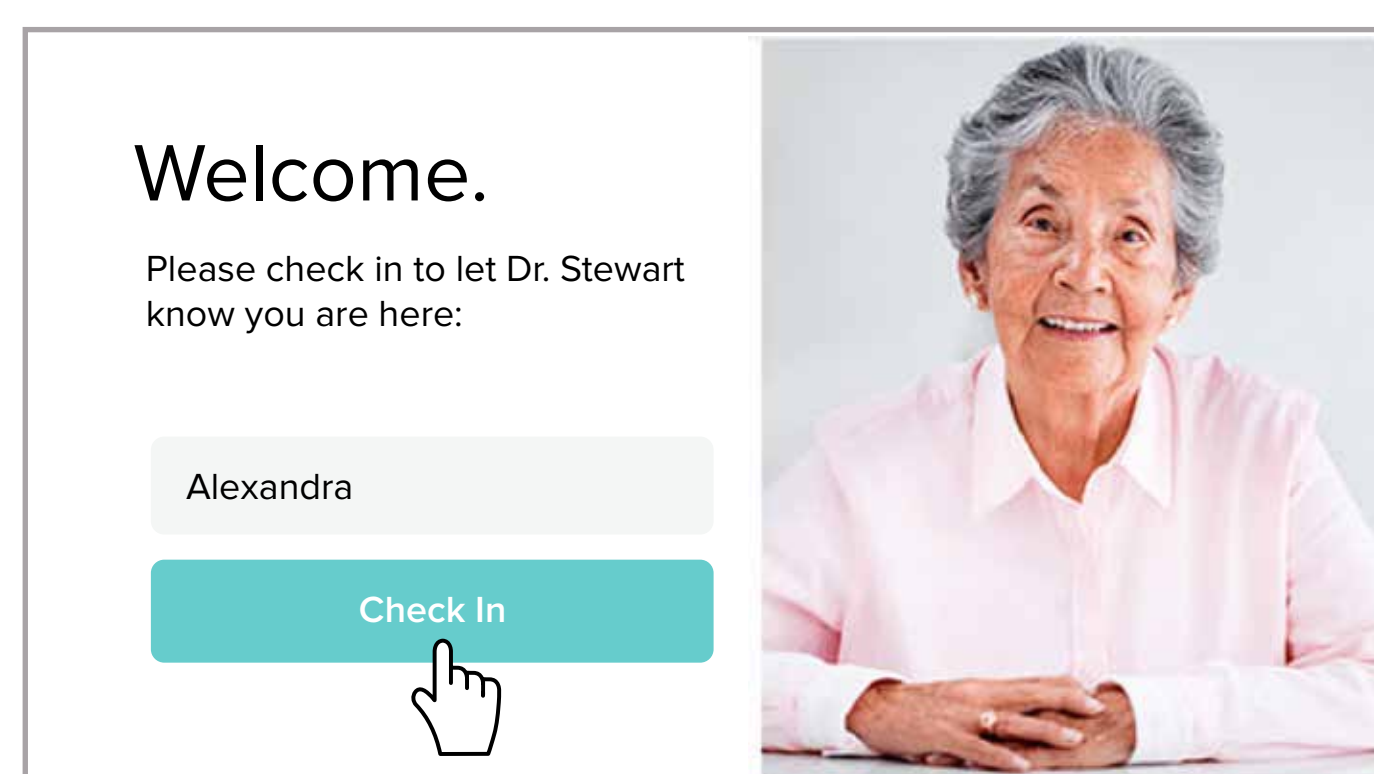
1 Use a computer or device with camera/microphone



2 Enter your clinician's doxy.me web address into the browser

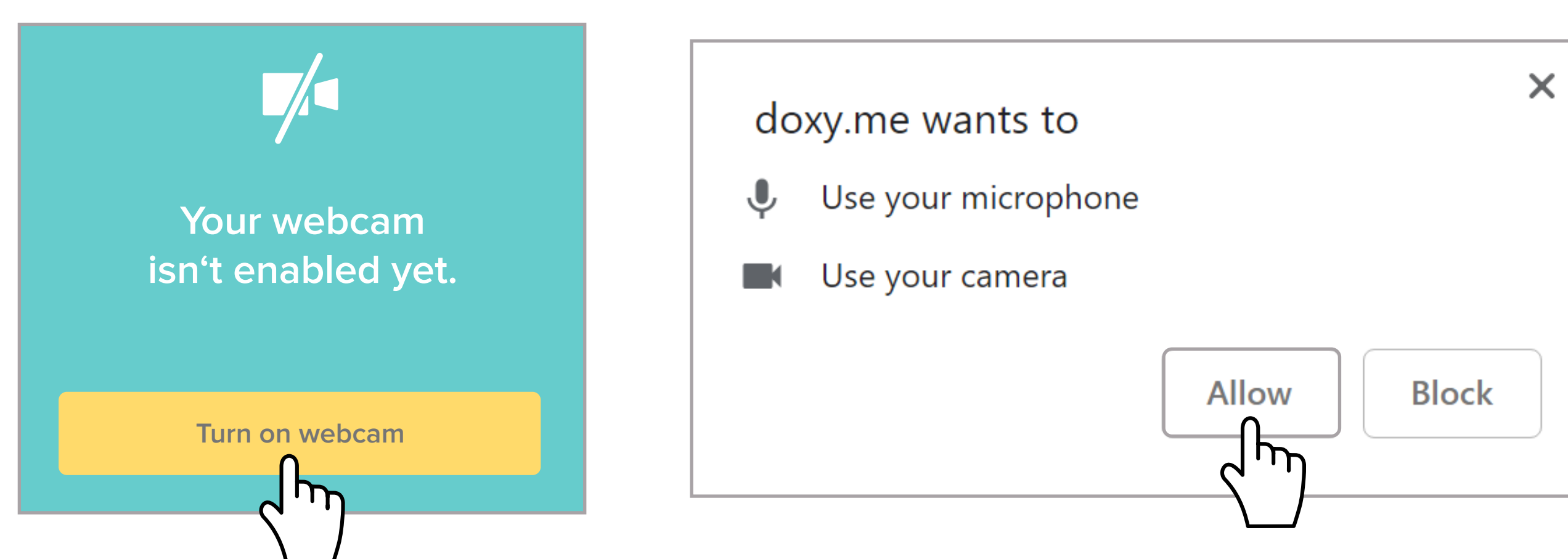


3 Type in your name and click check in



- ✓ Secure
- ✓ No software to download
- ✓ HIPAA compliant
- ✓ No registration needed

4 Allow your browser to use your webcam and microphone



5 Your care provider will start your visit

Call Tips

- Have a good internet connection
- Restart your device before the visit
- Use the [Start Test](#) button in the waiting room
- Need help? Send us a message <https://doxy.me>