

March 04, 2021

Effective March 6, 2020, the Center for Medicare and Medicaid Services has established an expansion of services usually performed in the office, hospital, and other outpatient facilities via various means of telehealth communication on a temporary and emergency basis.

Effective March 6, 2020, Health Network One, Inc. (HNI) and Eye Management, Inc. (EMI) shall reimburse for the following services for the assigned Medicare Advantage and Commercial members:

1. Virtual Check-In:

Definition:-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 a new or established patient.

Following Medicare guidelines, **Virtual Check-ins** will be reimbursed by HNI and EMI when performed by a **Physician, Nurse Practitioner or Physician Assistant** defined as follows:

- They are for new or established (or existing) patients, where the communication is not related to a medical visit within **the previous 7 days and does not lead to a medical visit within the next 24 hours (or soonest appointment available)**
- We expect that these virtual services will be initiated by the patient
- The patient must verbally consent to receive virtual check-in services
- **Billing for physicians, nurse practitioners and physician assistants:**
 - **Effective January 1, 2021 HCPCS code G2012 has been deleted and replaced by G2251** (Brief check-in by MD or qualified practitioner)
 - **Effective January 2, 2021 HCPCS code G2010 has been deleted and replaced by G2250** (Remote image submitted by patient)
 - Place of Service (POS) equal to what it would have been had the service been furnished in-person, include Modifier 95, indicating that the service rendered was actually performed via telehealth
 - POS 02 will be accepted
- **Reimbursement:** Reimbursement shall be based on your current contract terms and fee schedule
- Virtual Check-ins can be conducted with a broader range of communication methods (e.g. telephone), unlike Medicare telehealth visits, which require audio and visual capabilities for real-time communication

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2. Telehealth Visits:

Definition: A visit with a provider that uses telecommunication systems between a provider and a patient.

Following Medicare guidelines, **Telehealth Visits** will be reimbursed by HN1 and EMI when performed by a **physician, nurse practitioner and physician assistant** when performed as defined as follows:

- For established patients
- For new patients to the extent the CMS waiver under section 1135(g)(3) requires that an established relationship exists with a particular practitioner
- Require the use of an interactive, “real-time”, audio and video telecommunication between the distant site and the patient at home
- **Billing:**
 - **92002-92014** (Eye Exam)
 - **99201-99215** (Office or other Outpatient Visit)
 - **99231-99233** (Subsequent hospital care)
 - **99307-99310** (Subsequent SNF)
 - **G0425-G0427** (Telehealth consultations, emergency department or initial inpatient)
 - **G0406-G0408** (Follow-up inpatient telehealth consultations furnished to beneficiaries in hospitals or SNFs)
 - Place of Service (POS) equal to what it would have been had the service been furnished in-person; include Modifier 95, indicating that the service rendered was actually performed via telehealth
 - POS 02 will be accepted
- **Reimbursement:** Reimbursement shall be based on your current contract terms and fee schedule.

3. E-Visits

Definition:-A patient-initiated online evaluation and management which is conducted via an online patient portal.

Following Medicare guidelines, **E-visits** will be reimbursed by HN1 and EMI when performed by **physicians, nurse practitioners and physician assistants** and when performed as defined as follows:

- Patients communicate with their doctors without going to the doctor’s office by using online patient portals
- For new and established patients
- **Billing:**
 - **Physicians, Nurse Practitioners and Physician Assistants - 99421-99423** (online digital evaluation and management services, for a new or established patient, for up to 7 days, cumulative time during the 7 days)

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- Place of Service (POS) equal to what it would have been had the service been furnished in-person; include Modifier 95, indicating that the service rendered was actually performed via telehealth
- POS 02 will be accepted
- **Reimbursement:** Reimbursement shall be based on your current contract terms and fee schedule.

4. E/M Telephone Services

Definition:-Telephone evaluation and management service by a physician or other qualified health care professional who may report evaluation and management services provided to a new or established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment.

Following Medicare guidelines, **telephone E/M services** will be reimbursed by HN1 and EMI when performed by **physicians, nurse practitioners and physician assistants** and when performed as defined as follows:

- Evaluation and management services via telephone are provided to a new or established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment.
- **Billing:**
 - Physicians, Nurse Practitioners and Physician Assistants – **99441-99443**
 - Place of Service (POS) equal to what it would have been had the service been furnished in-person, or POS 02 will be accepted
 - Modifier 95, indicating that the service rendered was actually performed via telehealth
- **Reimbursement:** Reimbursement shall be based on your current contract terms and fee schedule.

In order to provide the services referenced herein you must complete the enclosed **HN1/EMI Telemedicine Attestation**. Please contact your provider relations representative if you meet the qualifications to provide Telemedicine; you will be asked to complete and return the attached attestation so we can confirm your agreement with these regulations and provide us with the technology you will be using.

Claims Submissions

Electronic claims submission is preferred by HN1 and EMI at all times, it is of utmost importance now. Please submit all claims via electronic transmission, or by direct data entry via the secure HN1/EMI Provider Web Portal, which allows for documentation attachment. Paper claims submission is to be used only as last resort. The only exception to this are claims that are submitted in response to a previously finalized claim, which may be sent via US Mail (e.g. medical records, disputes, etc.).

If you have any questions regarding this transmittal, please contact HN1 at 800-595-9631 or EMI at 800-329-1152; or you may contact your assigned representative directly.