

Quality Measures and Risk Adjustment

Telehealth Tip Sheet



ConnectiCare

Telehealth uses technology to deliver cost-effective, convenient, high-quality care to ensure patients receive the right care, at the right place, and the right time. But did you know that telehealth can be leveraged to address gaps in care, maximize incentives and obtain the data needed for commercial, Medicaid, and Medicare health plan risk adjustment programs and valuebased contract performance?

Make the Most of Telehealth Patient Visits

Many health visits and assessments must be completed in person, but there are some that can be performed via video teleconferencing, following the U.S. Department of Health & Human Services' guidelines for privacy.

Address Quality Measures

Using telehealth visits, you can broaden access to needed care, improve your quality performance tied to various types of incentive programs, and reduce no-show rates. Remember to collect an updated medication list when conducting a telehealth visit.

See Exhibit A for a list of Quality measures, subject to coding per the telehealth policy.

EmblemHealth website: https://www.emblemhealth.com/content/dam/emblemhealth/pdfs/provider/ reimbursement-policies/CCI-EH-CoBranded-Telehealth-Virtual-Care-Services-2022.pdf

and ConnectiCare website: <u>https://www.connecticare.com/content/dam/connecticare/pdfs/providers/our-policies/reimbursements/Telehealth-Virtual-Care-Services.pdf</u>, that are eligible for provider gap closure through telehealth services.

See Exhibit B for a list of member-reported information that can be used to close quality gaps during telehealth visits.

Modality	Definition	Codes to leverage when you are performing visits this way
Synchronous Telehealth (Audio AND Video)	Real-time, two-way audio- visual communications via a technology platform such as WebEx, Zoom, or your own platform.	Use POS '02' (other than in patient's home) or POS '10' (in patient's home) for telehealth services. Use CPT telehealth modifier '95' for audio and video visits.
Telephonic Visit (Audio ONLY)	Exchange of communication via a live telephone call.	CPT codes for telephone visits include: 99441: 5-10 minutes of medical discussion 99442: 11-20 minutes of medical discussion 99443: 21-30 minutes of medical discussion

Note: You can continue to use other codes to capture services/procedures that occurred during the visit. Additionally, inclusion of a code does not equate to payment; please reach out to your relationship manager if you have questions about payment. Claims coding still must always follow contract/state/federal parameters.

ER/Hospitalizations

During telehealth visits, please document any ER/hospitalizations within the last year.

Additionally, the National Committee for Quality Assurance (NCQA) allows blood pressure readings captured by a member to count for the *Controlling High Blood Pressure* HEDIS[®] measure.

Here are the recommended steps you can take to help your patients with hypertension:

- Encourage patients to monitor their blood pressure at home using a digital at-home device.
- Place an order for a blood pressure monitor ONLY through any EmblemHealth-contracted pharmacy or contracted DME provider. The cost of the device cannot exceed \$40. (This is an EmblemHealth benefit only for members diagnosed with hypertension.)
- Clearly document in the Medical Record that the reading was taken by a digital device and the date it was taken. Blood pressure readings taken by a patient using a non-digital device (e.g., manual blood pressure, stethoscope) do not meet criteria. Electronic submission from the device is not required, though recommended.

These codes are required for Quality care gap closure: Submit CPT II codes to reflect the results of the BP reading and improve performance rate. Adequate control required to meet compliance: BP <140/90 Hg.

Systolic Blood Pressure CPT II:	Diastolic Blood Pressure CPT II:	
3074F - blood pressure less than 130 mmHg	3078F - blood pressure less than 80 mmHg	
3075F - blood pressure 130-139 mmHg	3079F - blood pressure 80-89 mmHg	
3077F - blood pressure greater than or equal to 140 mmHg	3080F - blood pressure greater than or equal to 90 mmHg	

Risk Adjustment

Virtual visits give you an opportunity to reassess existing conditions, evaluate and report any new conditions, and order any necessary tests and/or labs.

- EmblemHealth encourages providers to utilize telehealth services that include both audio and video.
 - CMS has directed providers to use CPT telehealth modifier -95 for audio and video visits.
 - In circumstances where only audio contact is utilized, CPT modifier -93 should be utilized.

There are two code options to indicate the place of service (POS):

- POS 02 for telehealth services provided other than in patient's home.
- 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).

Use Telehealth Now to Help You Manage Later

When you continue to utilize telehealth, you will be able update the status of all chronic and new conditions; order additional tests; and provide additional preventive visits, screenings, and measures to assure high-quality patient care.

We appreciate all you are doing to care for our members.

Exhibit A: Quality measures that are eligible for provider gap closure through telehealth services.

Measure	SynchronousTelehealth (Audio AND Video)	Telephonic Visit (Audio ONLY)
Annual Wellness Visit (AWV)	\checkmark	\checkmark
Care of Older Adults (COA)	\checkmark	\checkmark
Child and Adolescent Well-Care Visits (WCV)	\checkmark	
Controlling High Blood Pressure (CBP)	\checkmark	\checkmark
Blood Pressure Control for Patients with Diabetes (BPD)	\checkmark	\checkmark
Depression Remission or Response for Adolescents and Adults (DRR-E)	\checkmark	\checkmark
Depression Screening and Follow-Up for Adolescents and Adults (DSF-E)	\checkmark	\checkmark
Follow-Up After Emergency Department Visit for Substance Use (FUA)	\checkmark	\checkmark
Follow-up After Emergency Department Visit for Mental Illness (FUM)	\checkmark	\checkmark
Follow-Up After High-Intensity Care for Substance Use Disorder (FUI)	\checkmark	✓
Follow-Up After Hospitalization for Mental Illness (FUH)	\checkmark	√
Follow-Up Care for Children Prescribed ADHD Medication (ADD)	\checkmark	\checkmark
Follow-Up After Emergency Department Visit for People with Multiple High-Risk Chronic Conditions (FMC)	\checkmark	\checkmark
Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP)	\checkmark	\checkmark
Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET)	\checkmark	\checkmark
Postpartum Depression Screening and Follow-Up (PDS-E)	\checkmark	
Prenatal and Postpartum Care (PPC)	\checkmark	\checkmark
Prenatal Depression Screening and Follow-Up (PND-E)	\checkmark	
Social Determinants of Health Screening (SDOH)	\checkmark	\checkmark
Transitions of Care (TRC)	\checkmark	\checkmark
Utilization of the PHQ-9 to Monitor Depression Symptoms for Adolescents and Adults (DMS-E)	\checkmark	
Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC)	\checkmark	\checkmark

Reference EmblemHealth's Quality Measure Resource Guide: 2022 Quality Measure Resource Guide (emblemhealth.com) for additional information on each measure and coding tips.

Exhibit B: Member-reported information that can be used to close quality gaps during telehealth visit.

Measure	Data Needed in Medical Record
Breast Cancer Screening (BCS)	Date of last Mammography; Date and location of Mastectomy
Colorectal Cancer Screening (COL)	Date and type of last Colorectal Cancer Screening; Date and type of Colectomy
Cervical Cancer Screening (CCS)	Date, type, and result of last Pap Smear and/or HPV test; Date and type of Hysterectomy
Osteoporosis Management in Women (OMW/OSW)	Date and type of Bone Mineral Density Screening



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