



Quality and Risk Adjustment

Telehealth Guide for Providers

As you know, not all patients can get to an office to be seen by a doctor when they need care. Telehealth is an effective alternative for those patients. It's convenient, cost-effective, and another way for them to get high-quality care. With the use of technology, you can ensure patients receive the right care, at the right place, and the right time.

What you may not know is that telehealth can also help:

- Address gaps in care.
- Maximize incentives.
- Obtain the data needed for risk adjustment programs for commercial, Medicaid, and Medicare health plans, and value-based contract performance.

This guide contains practical information on maximizing telehealth patient visits, outlines our telehealth guidelines, includes sample billing codes, and explains how to use telehealth to support risk adjustment and quality measures.

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.

Prepare for the telehealth visit

Find a quiet place with no distractions for your visit.

Introduce yourself and let the patient know what to expect

These small gestures can go a long way in helping patients feel more comfortable.

Technology

Test run your technology before your visits to make sure it's fully charged, connected to the internet, and ready to go.

WEB-SIDE manner

Web-side manner, like bedside manner is an important deciding factor of patient satisfaction. Be mindful of your camera location to allow for eye contact. Avoid eating or drinking during the visit.

Practice intentional listening

Use positive body language such as nodding your head to acknowledge understanding. Sit up straight, uncross your arms, and try not to touch your face.

Telehealth Services

Telehealth refers to a broad collection of electronic and telecommunications technologies that support delivery of health care services from distant locations. Forms of telehealth include:

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 platform such as WebEx, Zoom, or your own platform.	Use POS '02' for telehealth services provided other than in patient's home. Use 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 CPT telehealth modifier '95' for audio and video visits.
Telephone Visit (Audio ONLY)	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 Use CPT telehealth modifier '93' for audio contact.
Online Assessments (E-visits/Virtual Check-ins)	Communication via patient portals, secure text messages or emails.	CPT codes for online assessments: 98970-98972, 99421-99423 HCPCS codes for online assessments include: G0071 and G2010

Refer to [EmblemHealth's Telehealth and Virtual Care Services policy](#).

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 EmblemHealth policies and procedures, your participating provider contract, and state and federal parameters.

Capture chronic conditions for risk adjustment

Risk adjustment requires that reported diagnoses stem from face-to-face visits between patients and providers. Telehealth services that employ synchronous audio and video technology that permits communication between patients and providers in real time **meet risk adjustment's face-to-face requirement.**

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

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

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

Reference EmblemHealth's Quality Measure Resource Guide: 2025 Quality Measure Resource Guide for additional information on each measure and coding tips.

Measure	Synchronous Telehealth	Telephone Visit
Annual Wellness Visit (AWV)	✓	✓
Controlling High Blood Pressure (CBP)	✓	✓
Plan All-Cause Readmission (PCR)	✓	✓
Postpartum Depression Screening and Follow-Up (PDS-E)	✓	N/A
Prenatal and Postpartum Care (PPC)	✓	✓
Prenatal Depression Screening and Follow-Up (PND-E)	✓	N/A
Social Determinants of Health Screening (SDOH)	✓	✓
Statin Use in Persons With Diabetes (SPD)	✓	✓
Statin Therapy for Patients With Cardiovascular Disease (SPC)	✓	✓
Transitions of Care (TRC)	✓	✓
Follow-Up After Emergency Department Visit for Mental Illness (FUM)	✓	✓
Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA)	✓	✓
Follow-Up After Emergency Department Visit for People With Multiple High-Risk Chronic Conditions (FMC)	✓	✓
Follow-Up After High-Intensity Care for Substance Use Disorder (FUI)	✓	✓
Follow-Up After Hospitalization for Mental Illness (FUH)	✓	✓
Adherence to Antipsychotic Medications for Individuals With Schizophrenia (SAA)	✓	✓
Depression Screening and Follow-Up for Adolescents and Adults (DSF-E)	✓	✓
Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD)	✓	✓
Follow-Up Care for Children Prescribed ADHD Medication (ADD-E)	✓	✓
Initiation and Engagement of Substance Use Disorder Treatment (IET)	✓	✓
Care for Older Adults (COA)	✓	✓
Ambulatory and Preventive Care Visits (AAP)	✓	✓
Blood Pressure control for Patients With Diabetes (BPD)	✓	✓
Weight Assessment and Counseling (WCC)	✓	✓

Member-reported information that may 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

ER/Hospitalizations

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

Controlling High Blood Pressure

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. Patients aged 18 to 85 are noncompliant for this measure if they have hypertension AND their most recent blood pressure reading was above 140/90 OR they haven't had their blood pressure tested yet during the measurement year.

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 through any EmblemHealth-contracted DME provider.
- 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 blood pressure reading and improve performance rate. Adequate control required to meet compliance: blood pressure <140/90 mmHg.

Table 4

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

Use Telehealth Now To Help You Manage Later

When you continue to use 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.



Learn more at
[emblemhealth.com/together.](https://emblemhealth.com/together)