

## **Telehealth/Telemedicine and Telephone Call (Audio Only)** **Frequently Asked Questions**

### **Q1: What is the difference between Telehealth services and telephone (audio only) calls?**

**A1:** Telehealth services are live, interactive audio and visual transmissions of a physician-patient encounter from one site to another using telecommunications technology. They may include transmissions of real-time telecommunications or those transmitted by store-and-forward technology. Telephone calls (audio only), which are considered audio transmissions, per the CPT definition, are non-face-to-face evaluation and management (ELM) services provided to a patient using the telephone by a Physician or Other Qualified Health Care Professional, who may report evaluation and management services.

*\*Please note Telehealth and telephone (audio only) services are covered according to the temporary reimbursement policy.*

### **Q2: What changes has EmblemHealth made to its Telehealth reimbursement policies as a result of the COVID-19 public health emergency?**

**A2:** EmblemHealth is temporarily waiving the CMS and state-based originating site restrictions, where applicable and permitted, for Medicare Advantage, Medicaid and commercial members for in-network providers. Care providers will be able to bill for telehealth services performed while a patient is at home. This change will apply immediately and be effective until the end of the COVID-19 public health emergency or sooner as permitted by law. It may be effective longer under subsequent written guidance, if it's determined necessary.

By removing the originating site requirement, EmblemHealth has broadened access to telehealth services. Telehealth services will be reimbursed based on national reimbursement determinations, policies and contracted rates as outlined in a care provider's participation agreement.

The policy changes apply to all members and allow those patients to connect with their doctor through live, interactive audio and video visits. Reimbursement will be the same as if the visit was face-to-face. Cost share is waived for telehealth visits during this public health emergency for most plans.

### **Q3: Will EmblemHealth reimburse me for providing telehealth services by telephone (audio only)?**

**A3:** Yes, while the use of telephone calls (audio only) does not fall within the definition of telehealth under New York law, EmblemHealth will reimburse telephone (audio only) services for Medicare Advantage, Medicaid and Commercial plans. To bill Telephone (audio only) services, use 98966-98968 and 99441-99443. Refer to the EmblemHealth Supplemental Telehealth Reimbursement policy for additional information and complete procedure code listing (Medicaid has approved additional Telephone (audio only) codes) EmblemHealth will not reimburse for the technical fees or technical costs for the provision of telehealth services. Fax, text and electronic mail are not covered under telehealth.

### **Q4: What will EmblemHealth reimburse me for the telephone (audio only) codes, 99441-99443?**

**A4:** EmblemHealth will process the telephone (audio only) codes, 99441-99443, in accordance with CMS guidance released on April 30<sup>th</sup>, 2020. The reimbursement for telephone (audio only) codes, 99441-99443 will be based upon the contracted percentage of the applicable revised rates.

**Q5: Do the reimbursement policy changes require me to bill differently?**

**A5:** Yes. Prior to Public Health Emergency temporary change, telehealth services were required to be billed with POS 02 to identify them as telehealth services. We are suspending this requirement. In order to identify telehealth or telephone (audio only) services that were historically performed in the office or other in person setting (E.g. POS 11, 19 and 22) modifier GT or 95 (or GQ for Medicaid) must be used. Place of Service 02 will reimburse at traditional telehealth rates. *Audio-only CPT codes 98966-98968 and 99441-99443 do not require telehealth modifiers to be reported.*

**Q6: Why is EmblemHealth changing its reimbursement policy requirements to allow members to receive telehealth services in their homes?**

**A6:** This change is to help reduce potential exposure to COVID-19 and make it even easier for members to connect with their health care provider. We encourage members, if they exhibit symptoms of COVID-19, to seek medical care through their primary care physician.

There is no change to the type of care provider who may submit claims for telehealth services. EmblemHealth follows CMS's policies and state mandates on the types of care providers eligible to deliver telehealth services.

Examples of these providers include:

- Physicians
- Nurse Practitioners
- Physician Assistants
- Nurse-Midwives
- Clinical Nurse Specialists
- Licensed Clinical Social Workers
- Registered Dietitians
- Doulas (Medicaid Only)
- Dentists
- Clinical Psychologists
- Certified Registered Nurse Anesthetists
- Licensed Physical Therapists
- Occupational Therapists
- Speech Language Pathologists
- Adult Day Care Centers (Medicaid Only)

**Q7: During this time, can members receive telehealth services from any care provider?**

**A7:** Members may continue to receive telehealth services from EmblemHealth's in-network telehealth provider Teladoc and can now also receive telehealth services from their care provider from home through interactive audio and video visits. This also includes urgent care providers.

**Q8: Can I render services to a new patient via telehealth?**

**A8:** Yes, Consistent with CMS we are extending the telehealth benefit to allow providers to see new patients. New patient codes require all three key elements (history, exam, and medical decision making) to be performed for new patient visit codes to be assigned. The exception to this is when coding is based on time. Telephone (audio only) codes are time based and can be used to render services to a new patient. Per CPT guidelines, if NO exam is performed the established patient codes should be used.

**Q9: Can I perform a preventive service code 99381-99397?**

**A9:** No, for these services to be properly billed then a full preventive examination must be performed which is not able to be performed via telehealth. Please reschedule these in person preventive exam visits when it is safe to do so.

**Q10: Will EmblemHealth accept the expanded CMS list of telehealth codes?**

**A10:** Yes, EmblemHealth will accept the updated code list from CMS for both Medicare Advantage, Medicaid and Commercial lines of business. Please refer to the updated Telehealth policy for complete code list.

#### **ADDITIONAL FAQs FOR MEDICAID**

**Q1: Can Article 28 Clinics, FQHC facilities and Licensed Home Care Services Agencies supply telehealth services?**

**A1:** Telehealth services can be supplied to Medicaid members consistent with NYS telehealth guidelines. Please see updated guidance on Medicaid coverage for telemedicine/telephonic services at [https://www.health.ny.gov/health\\_care/medicaid/program/update/2020/no05\\_2020-03\\_covid-19\\_telehealth.htm](https://www.health.ny.gov/health_care/medicaid/program/update/2020/no05_2020-03_covid-19_telehealth.htm)

**Q2: What provider types can render telehealth and telephone (audio only) services for Medicaid members?**

**A2:** EmblemHealth coverage for telehealth and telephone (audio only) services for Medicaid members is consistent with NYS Medicaid guidance for Telehealth.