


Telehealth Reimbursement Elderplan Advantage for Nursing Home Residents (HMO I-SNP)

March 2020

What is Telehealth?

- The Health Resources Services Administration defines telehealth as the use of electronic information and telecommunications technologies to support long-distance clinical health care, patient and professional health-related education, public health and health administration. Technologies include videoconferencing, the internet, store-and-forward imaging, streaming media, and terrestrial and wireless communications.
- Telehealth is different from telemedicine because it refers to a broader scope of remote healthcare services than telemedicine. While telemedicine refers specifically to remote clinical services, telehealth can refer to remote non-clinical services, such as provider training, administrative meetings, and continuing medical education, in addition to clinical services.

Telehealth FAQ

Q: What payment requirements for Elderplan Advantage for Nursing Home Residents (HMO I-SNP) telehealth services are affected by the waiver?

A: Under the waiver, limitations on where patients/residents are eligible for telehealth will be removed during the emergency. In particular, patients/residents outside of rural areas will be eligible for telehealth services, effective for services starting March 6, 2020.



Telehealth FAQ

Q: What services can be provided by telehealth under the new emergency declaration?

A: CMS maintains a list of services that are normally furnished in-person that may be furnished via Medicare telehealth. This list is available here:

<https://www.cms.gov/Medicare/Medicare-GeneralInformation/Telehealth/Telehealth-Codes>.

These services are described by HCPCS codes and paid under the Physician Fee Schedule. Under the emergency declaration and waivers, these services may be provided to patients by professionals regardless of patient location. Medicare pays separately for other professional services that are commonly furnished remotely using telecommunications technology without restrictions that apply to Medicare Telehealth. These services, including physician interpretation of diagnostic tests, care management services and virtual check-ins, are normally furnished through communication technology.

Telehealth FAQ

Q: Will CMS enforce an established relationship requirement?

A: No. It is imperative during this public health emergency (PHE) that patients/residents avoid travel, when possible, to physicians' offices, clinics, hospitals, or other health care facilities where they could risk their own or others' exposure to further illness.

Accordingly, the Department of Health and Human Services (HHS) is announcing a policy of enforcement discretion for Medicare telehealth services furnished pursuant to the waiver under section 1135(b)(8) of the Act. To the extent the waiver (section 1135(g)(3)) requires that the patient/residents have a prior established relationship with a particular practitioner, HHS will not conduct audits to ensure that such a prior relationship existed for claims submitted during this public health emergency.

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Telehealth FAQ

Q: How long does the telehealth waiver last?

A: The telehealth waiver will be effective until the PHE declared by the Secretary of HHS on January 31, 2020 is over.

Q: How is this different from virtual check-ins and e-visits?

A: A virtual check-in pays professionals for brief (5-10 min) communications that mitigate the need for an in-person visit, whereas a visit furnished via Medicare telehealth is treated the same as an in person visit, and can be billed using the code for that service, using place of service 02 to indicate the service was performed via telehealth. An e-visit is when a beneficiary communicates with their doctors through online patient portals.

Elderplan and Telehealth

- Telehealth is being piloted with for Elderplan Advantage for Nursing Home Residents (HMO I-SNP) for claims billed between January 1, 2020 – December 31, 2020
- All Telehealth services provided from the *covered listing, regardless of the provider's location, should be billed using "Place of Service 02"
 - 02 - The location where health services and health related services are provided or received, through a telecommunication system.
- Providers reimbursements will be at their current contracted rate.

Elderplan and Telehealth

- Elderplan Advantage for Nursing Home Residents (HMO I-SNP) is not responsible for providing any equipment or other support (e.g. Apps based support) to providers who provide telehealth services.
- Elderplan Advantage for Nursing Home Residents (HMO I-SNP) does not cover cost associated with Equipment or transportation.



Telehealth Services

*Telehealth services covered under the following categories:

Services	COVID PHE Cost Sharing	Face-Face Cost Sharing	Post-COVID Cost Sharing
**Urgently Needed Svc	0%	20% (up to \$65)	20%
Primary Care Physician Svc	0%	0%	
Physician Specialist Svc	0%	0%	
Individual Sessions for Psychiatric Svc	0%	45%	
Group Sessions for Psychiatric Svc	0%	45%	
Individual Mental Health Specialty Svc	20%	50%	
Group Sessions for Mental Health Specialty Svc	20%	50%	
Individual Sessions for Outpatient Substance Abuse	0%	20%	
Group Sessions for Outpatient Substance Abuse	0%	20%	

**Non-emergency, unforeseen medical illness, injury, or condition that requires immediate medical care. Urgently needed services may be furnished by network providers or by out-of-network providers when network providers are temporarily unavailable or inaccessible.

Telehealth Cost Sharing

The follow Behavioral Health codes have a 20% cost sharing.

Code	Short Description	Code	Short Description
90785	Psytx complex interactive	90847	Family psytx w/patient
90832	Psytx pt&/family 30 minutes	96116	Neurobehavioral status exam
90833	Psytx pt&/fam w/e&m 30 min	96150	Assess hlth/behave init
90834	Psytx pt&/family 45 minutes	96151	Assess hlth/behave subseq
90836	Psytx pt&/fam w/e&m 45 min	96152	Intervene hlth/behave indiv
90837	Psytx pt&/family 60 minutes	96153	Intervene hlth/behave group
90838	Psytx pt&/fam w/e&m 60 min	96154	Interv hlth/behav fam w/pt
90839	Psytx crisis initial 60 min	G0445	High inten beh couns std 30m
90840	Psytx crisis ea addl 30 min	G0446	Intens behave ther cardio dx
90845	Psychoanalysis	G0447	Behavior counsel obesity 15m
90846	Family psytx w/o patient	G0444	Depression screen annual

Telehealth services & codes:

LIST OF MEDICARE TELEHEALTH SERVICES					
Code	Short Descriptor	Code	Short Descriptor	Code	Short Descriptor
90785	Psytx complex interactive	96150	Assess hlth/behave init	99496	Trans care mgmt 7 day disch
90791	Psych diagnostic evaluation	96151	Assess hlth/behave subseq	99497	Advncd care plan 30 min
90792	Psych diag eval w/med srvc	96152	Intervene hlth/behave indiv	99498	Advncd are plan addl 30 min
90832	Psytx pt&/family 30 minutes	96153	Intervene hlth/behave group	G0108	Diab manage trn per indiv
90833	Psytx pt&/fam w/e&m 30 min	96154	Interv hlth/behav fam w/pt	G0109	Diab manage trn ind/group
90834	Psytx pt&/family 45 minutes	96160	Pt-focused hlth risk assmt	G0270	Mnt subs tx for change dx
90836	Psytx pt&/fam w/e&m 45 min	96161	Caregiver health risk assmt	G0396	Alcohol/subs interv 15-30mn
90837	Psytx pt&/family 60 minutes	99201	Office/outpatient visit new	G0397	Alcohol/subs interv >30 min
90838	Psytx pt&/fam w/e&m 60 min	99202	Office/outpatient visit new	G0406	Inpt/tele follow up 15
90839	Psytx crisis initial 60 min	99203	Office/outpatient visit new	G0407	Inpt/tele follow up 25
90840	Psytx crisis ea addl 30 min	99204	Office/outpatient visit new	G0408	Inpt/tele follow up 35
90845	Psychoanalysis	99205	Office/outpatient visit new	G0420	Ed svc ckd ind per session
90846	Family psytx w/o patient	99211	Office/outpatient visit est	G0421	Ed svc ckd grp per session
90847	Family psytx w/patient	99212	Office/outpatient visit est	G0425	Inpt/ed teleconsult30
90951	Esrd serv 4 visits p mo <2yr	99213	Office/outpatient visit est	G0426	Inpt/ed teleconsult50
90952	Esrd serv 2-3 vsts p mo <2yr	99214	Office/outpatient visit est	G0427	Inpt/ed teleconsult70
90954	Esrd serv 4 vsts p mo 2-11	99215	Office/outpatient visit est	G0436	Tobacco-use counsel 3-10 min
90955	Esrd srv 2-3 vsts p mo 2-11	99231	Subsequent hospital care	G0437	Tobacco-use counsel>10min
90957	Esrd srv 4 vsts p mo 12-19	99232	Subsequent hospital care	G0438	Ppps, initial visit
90958	Esrd srv 2-3 vsts p mo 12-19	99233	Subsequent hospital care	G0439	Ppps, subseq visit
90960	Esrd srv 4 visits p mo 20+	99307	Nursing fac care subseq	G0442	Annual alcohol screen 15 min
90961	Esrd srv 2-3 vsts p mo 20+	99308	Nursing fac care subseq	G0443	Brief alcohol misuse counsel
90963	Esrd home pt serv p mo <2yrs	99309	Nursing fac care subseq	G0444	Depression screen annual
90964	Esrd home pt serv p mo 2-11	99310	Nursing fac care subseq	G0445	High inten beh couns std 30m
90965	Esrd home pt serv p mo 12-19	99354	Prolonged service office	G0446	Intens behave ther cardio dx
90966	Esrd home pt serv p mo 20+	99355	Prolonged service office	G0447	Behavior counsel obesity 15m
90967	Esrd home pt serv p day <2	99356	Prolonged service inpatient	G0513	Prolong prev svcs, first 30m
90968	Esrd home pt serv p day 2-11	99357	Prolonged service inpatient	G0514	Prolong prev svcs, addl 30m
90969	Esrd home pt serv p day 12-19	99406	Behav chng smoking 3-10 min	G2086	Off base opioid tx first m
90970	Esrd home pt serv p day 20+	99407	Behav chng smoking > 10 min	G2087	Off base opioid tx, sub m
96116	Neurobehavioral status exam	99495	Trans care mgmt 14 day disch	G2088	Off opioid tx month add 30

Contact

- If you have any questions or need more information **prior** to a claim being submitted, please reach out to our Account Manager:
 - **Jennifer Levitt, Provider Account Manager**
Phone: 347-930-8499
Email: JLEAVITT@mjhs.org
- For all claims related questions, contact our Provider line:
 - **Provider Relations Department:**
Phone: 718-921-8418, 9 a.m. – 5 p.m., Monday – Friday
Email: eproviderservices@mjhs.org

THANK YOU!