**Origins of Telemedicine**

1. When was the first documented example of telemedicine?
   - In 1948, the transmission of radiologic images by telephone between West Chester and Philadelphia, Pennsylvania, a distance of 24 miles (Gershon-Cohen and Cooley, 1950).
   - In 1959 (see, e.g., Bashshur et al., 1975; Perednia and Allen, 1995).
     - In that year, clinicians at the University of Nebraska used two-way interactive television to transmit neurological examinations and other information across campus to medical students (Benschoter et al., 1967; Wittson and Benschoter, 1972).
   - What are your first recollections of telemedicine?
Definitions

**NEW!** FL Statute 456.47. HB 23

*Telehealth* means the use of synchronous or asynchronous telecommunications technology by a telehealth provider to provide health care services, including, but not limited to, assessment, diagnosis, consultation, treatment, and monitoring of a patient; transfer of medical data; patient and professional health-related education; public health services; and health administration. The term does not include audio-only telephone calls, e-mail messages, or facsimile transmissions.

Definitions

- Florida Medicaid
  - [Link](https://ahca.myflorida.com/SCHS/telehealth/docs/TAC_Report.pdf)
  - *Telehealth* is defined as the mode of providing health care and public health services through synchronous and asynchronous information and communication technology by a Florida licensed health care practitioner, within the scope of his or her practice, who is located at a site other than the site where a recipient (patient or licensed health care practitioner) is located.
Definitions

- The Center for Connected Health Policy (cchpca.org)
  - Telehealth: a collection of means or methods for enhancing health care, public health, and health education delivery and support using telecommunications technologies.
  - “Telemedicine” is often still used when referring to traditional clinical diagnosis and monitoring that is delivered by technology. However, the term “telehealth” is now more commonly used as it describes the wide range of diagnosis and management, education, and other related fields of health care.

- American Telemedicine Association (americantelemed.org)
  - In brief, telemedicine is the remote delivery of health care services and clinical information using telecommunications technology. This includes a wide array of clinical services using internet, wireless, satellite and telephone media. ATA has a more comprehensive explanation, complete with examples. [here](https://www.americantelemed.org/)

Rules and Standards

- State Policies: Many States, Many Rules!
  - Telemedicine rules, regulation, and payment vary widely by State.
  - Important Topics:
    - Acceptable Practices
    - Acceptable Locations
    - Parity Laws
    - licensure and Licensure Compacts
    - Reimbursement
NEW! Practice Standards in Florida

- (a) A telehealth provider has the duty to practice in a manner consistent with his or her scope of practice and the prevailing professional standard of practice for a health care professional who provides in-person health care services to patients in this state.

- (b) A telehealth provider may use telehealth to perform a patient evaluation. If a telehealth provider conducts a patient evaluation sufficient to diagnose and treat the patient, the telehealth provider is not required to research a patient's medical history or conduct a physical examination of the patient before using telehealth to provide health care services to the patient.

Note that the above definition represents a unique standard of care for practicing telemedicine in Florida.

- (c) A telehealth provider may not use telehealth to prescribe a controlled substance unless the controlled substance is prescribed for the following:
  1. The treatment of a psychiatric disorder;
  2. Inpatient treatment at a hospital licensed under chapter 395;
  3. The treatment of a patient receiving hospice services as defined in s. 400.601;
  4. The treatment of a resident of a nursing home facility as defined in s. 400.021.

- (d) A telehealth provider and a patient may be in separate locations when telehealth is used to provide health care services to a patient.

- (e) A nonphysician telehealth provider using telehealth and acting within his or her relevant scope of practice, as established by Florida law or rule, is not in violation of s. 458.32711(a) or s. 459.01311(a).
Billing, Coding & Documentation for Telemedicine

Insurance Coverage & Payment

Public Payers

Medicaid

Medicaid and Medicaid MMA's reimburse for telemedicine encounters at a rate equal to an in-person equivalent.
- Rule 59C-1.007 allows for reimbursement for services related to evaluation, diagnosis, or treatment.
- Services provided by practitioners licensed within their scope of practice to perform the service using the same fee schedule for in-person encounters.
- Florida Medicaid reimburses the practitioner who is providing the evaluation, diagnosis, or treatment recommendation located at a site other than where the recipient is located.
- Medicaid supports reimbursement for Direct-to-Patient (DTP) encounters.

Medicaid (cont)

Telemedicine is available for use by all providers of Florida Medicaid services that are enrolled in or registered with the Florida Medicaid program and who are licensed within their scope of practice to perform the service.
- **Definition.** Telemedicine — The practice of health care delivery by a practitioner who is located at a site other than the site where a recipient is located for the purposes of evaluation, diagnosis, or treatment.
- **Coverage.** Florida Medicaid reimburses for telemedicine services using interactive telecommunications equipment that includes, at a minimum audio and video equipment permitting two-way, real-time, interactive communication between a recipient and a practitioner.
- **Who Can Provide.** Practitioners licensed within their scope of practice to perform the service.

Medicare

CMS finalizes policies to bring innovative telehealth benefits to Medicare Advantage beneficiaries beginning in 2020. Look for details coming soon in the MA private health insurance plans.

Medicare Part B
If you live in rural, medically underserved areas, telehealth services are reimbursable under certain conditions.

Covers certain services, like office visits and consultations, that are provided:
- Using an interactive 2-way telecommunications system (with real-time audio and video).
- By a doctor or certain other health care provider who isn’t at the patient location.

The patient must present at an approved type of originating facility. Private locations (home) are not supported as valid presenting sites except under specific scenarios (see below). New reimbursement eligibility tool is available here: https://data.hrsa.gov/bodl/medicare/telehealth
Medicare Part B (cont)

The following items are excluded from CMS’ site specific rules for telemedicine:
- End Stage Renal Disease.
- In 2018, Medicare has unbundled CPT 99091, remote patient monitoring, that is eligible for monthly reimbursement. The Medicare restrictions, described above, do not apply to this code.
- Beginning 1/1/2019, Medicare began to pay for brief communications (5-10 mins) using HCPCS G2012. Several private payors are following suit.
- Delayed! Starting this July 1, 2019, telehealth for those having certain substance use disorders by allowing Opioid Treatment Programs (OTP) to provide telehealth visits to Medicare beneficiaries while they are at home.

Medicare Supports coverage and reimbursement for an identified set of CPT codes. The complete list is available in the annual CMS Telehealth Services, available here.

Medicare Acute Telestroke Services

Beginning in 2019, CMS now reimburses for acute telestroke events and consultations, regardless of originating patient location. Reimbursement includes two separate charges for the professional consultation and a presenting site facility fee.

Tricare

For contracted practitioners, TRICARE covers the use of interactive audio/video technology to provide clinical consultations and office visits when appropriate and medically necessary (to be medically necessary means it is appropriate, reasonable, and adequate for your condition) to include:
- Clinical consultation
- Office visits
- Telemental health (individual psychotherapy, psychiatric diagnostic interview examination and medication management)
- Services for End Stage Renal Disease

Services are typically available to private locations (OTP).
Private Insurance

Coverage
Contracts between health insurers or health maintenance organizations and telehealth providers must be voluntary and must establish mutually acceptable payment rates or payment methodologies for services provided through telehealth. Any contract provision that distinguishes between payment rates or payment methodologies for services provided through telehealth and the same service provided without telehealth must be initiated by the telehealth provider.

Payment Parity
Payment between telehealth delivered services and in-person services can differ, but it must be initiated in the contract between the insurer and telehealth provider.

GatorCare
GatorCare does reimburse for telemedicine, typically at 85% of an equivalent in-person encounter. The patient co-pay is also reduced for virtual visits. I can provide a detailed fee schedule for GatorCare upon request.

Florida Blue
A selection of FL Blue plans, including the BCBS Federal plan and various BCBS Advantage plans, do reimburse for virtual visits.

Most other private insurers typically do not reimburse for telemedicine. Providers and practices should push for inclusion of telehealth services when renegotiating payor contracts.
Coding & Documentation

Documentation

Obtaining Consent

No different than an in-person encounter. Consider adding a section about the potential risks and benefits of telemedicine.

Wording at UF Health (an example):

Telemedicine. I understand and agree that my Healthcare Provider may utilize telemedicine (the electronic communication of medical information) including, but not limited to, videoconferencing, electronic transmission of imaging, and remote monitoring of vital signs as part of my Care. Except in emergency circumstances, my Healthcare Provider will explain the risks and benefits of telemedicine prior to the telemedicine encounter. I understand that I have the right to seek Care elsewhere in lieu of a telemedicine encounter.

Encounter Notes

- Ensure your providers’ notes are specific and relevant to the current encounter. Strongly discourage wholesale copy & paste from previous encounters with the same patient.
- The above applies to encounters coded on E&M and on Time.
- Due to increasing telehealth utilization and payer coverage, Federal and private payer audits are likely in the foreseeable future. Be ready!

Coding & Documentation

Coding E&M

Be aware of limitations regarding physical exams (nothing tactile) as it relates to complexity level.

Outside behavioral health, complexity levels 4 & 5 are difficult to achieve. For example, UFHP limits E&M complexity to level 3. Remember, for E&M:

New patients require all three (3) key elements, including
- History of Present Illness (HPI)
- Physical Examination
- Medical Decision Making/Complexity

May be challenging to meet criteria for some new patients.

Existing patients require two of the three elements above.

* E&M rule does not restrict E&M complexity level. However, complexity greater than 3 is difficult to achieve without tactile physical exam components.
Billing, Coding & Documentation for Telemedicine

Coding

Billing on Time
Only when appropriate.
Establish Medical Necessity
Must be able to support and provide documentation for services.

Documentation must support a detailed narrative regarding specific topics of counseling and decision making services to cover at least 50% of the encounter duration:
Level 3 35 minutes (min. 1/2 spent on Counseling and MDM)
Level 4 45 minutes (min. 1/2 spent on Counseling and MDM)
Level 5 40 minutes (min. 1/2 spent on Counseling and MDM)
Narrative should be both patient specific and date specific to that encounter.

Coding

POS and Modifiers
- Place of Service Code 02
  CMS created POS code 02 for use by the physician or practitioner furnishing telehealth services from a distant site.
  Descriptor: “The location where health services and health related services are provided or received, through telecommunication technology.”
- Common Telemedicine Modifiers
  - Modifier [GT] Interactive audio and video telecommunications systems.
  - Modifier [GQ] Asynchronous telecommunications system.
  Use of [GT] or [95] varies by payer. If unsure, use GT.

Coding

Specific Payor Information
- Florida Medicaid, MMA’s and Tricare
  Use CPT modifier [GT] or [GQ] as appropriate.
  Use POS [02]
- Medicare
  ONLY use POS [02]
- Florida Blue and GatorCare
  Use CPT modifier [95] or [GQ] as appropriate.
  Use POS [02]
- Other private payors in Florida
  Use CPT modifier [95] or [GQ] as appropriate.
  Use POS [02]
Coding

Acute Telestroke – NEW for 2019!

Medicare, Private Payors, and all others

- Distinct (Consulting) Site
  - Use modifier [00] with appropriate CPT
  - Use POS [02]

- Originating Site Facility Fee
  - Billed with HCPCS code Q3014.
  - Use modifier [G0]

Coding

Acute Telestroke – NEW for 2019!

Common CPT/HCPCS used for acute telestroke:

<table>
<thead>
<tr>
<th>CPT</th>
<th>Description</th>
<th>Medicare Rate</th>
<th>WRVU</th>
</tr>
</thead>
<tbody>
<tr>
<td>99201</td>
<td>New pt office/OH; straightforward</td>
<td>527.64</td>
<td>0.48</td>
</tr>
<tr>
<td>99202</td>
<td>New pt office/OH; straightforward</td>
<td>511.61</td>
<td>0.35</td>
</tr>
<tr>
<td>99203</td>
<td>New pt office/OH; moderate comp.</td>
<td>612.16</td>
<td>1.45</td>
</tr>
<tr>
<td>99204</td>
<td>New pt office/OH; high comp.</td>
<td>617.40</td>
<td>2.17</td>
</tr>
<tr>
<td>99212</td>
<td>Est pt office/OH; straightforward</td>
<td>226.12</td>
<td>0.68</td>
</tr>
<tr>
<td>99213</td>
<td>Est pt office/OH; low complexity</td>
<td>271.11</td>
<td>0.97</td>
</tr>
<tr>
<td>99214</td>
<td>Est pt office/OH; moderate comp.</td>
<td>438.31</td>
<td>1.52</td>
</tr>
<tr>
<td>99215</td>
<td>Est pt office/OH; high comp.</td>
<td>213.23</td>
<td>2.11</td>
</tr>
<tr>
<td>G0425</td>
<td>Initial ER or inpt Th consult, 30</td>
<td>5138.06</td>
<td>2.61</td>
</tr>
<tr>
<td>G0426</td>
<td>Initial ER or inpt Th consult, 50</td>
<td>1204.67</td>
<td>3.88</td>
</tr>
<tr>
<td>G0427</td>
<td>Initial ER or inpt Th consult, 70</td>
<td>1045.67</td>
<td>4.08</td>
</tr>
<tr>
<td>G0406</td>
<td>Follow-up inpt Th consult, 15 min</td>
<td>213.23</td>
<td>1.39</td>
</tr>
<tr>
<td>G0407</td>
<td>Follow-up inpt Th consult, 25 min</td>
<td>371.22</td>
<td>1.39</td>
</tr>
</tbody>
</table>

Please note that the reimbursement rates on 99201-99215 are based on the services being provided in a facility setting. Reimbursement rates for these are higher in the doctor’s office.

Questions?
Modalities

- **Live Videoconferencing (Synchronous):** Live, two-way interaction between a person and a provider using audiovisual telecommunications technology.
- **Store-and-Forward (Asynchronous):** Transmission of recorded health history through an electronic communications system to a practitioner, usually a specialist, who uses the information to evaluate the case or render a service outside of a real-time or live interaction.
- **Remote Patient Monitoring (RPM)**
- **Mobile Health (mHealth)**
Multiple Terms, Similar Meanings:

- Hub and Spoke
- Originating Site (or Presenting Site) and Distant Site
- DTP
- MyChart
- mHealth
- Apple Health Kit

Examples of clinical scenarios deemed appropriate for Telehealth services:

Usage

- Acid reflux
- Red eyes
- Allergies
- Anxiety
- Depression
- Assessment of minor wounds
- Asthma/COPD (not having an acute exacerbation)
- Burns, minor, sunburn

- Bronchitis, mild (pneumonia not suspected)
- Common rashes (eczema, shingles, scabies etc.)
- Constipation
- Diabetes management (routine and follow-up)
- Hypertension (routine and follow-up)
- Migraine headache (uncomplicated, diagnosis established)

Examples of clinical scenarios deemed appropriate for Telehealth services:

Usage

- Musculoskeletal issues, muscle strain, and joint sprains
- Pain control (mild to moderate for known conditions)
- Sinusitis (uncomplicated)
- Upper respiratory infection (uncomplicated)
- Urinary tract infections (uncomplicated in non-pregnant women and in the absence of vaginitis)
- Vomiting, diarrhea (without significant abdominal pain)

- Weight management
- Insomnia
- Hyperlipidemia
- Contraception management
- CHF-stable management
- Smoking cessation counseling
- Alcohol and/or substance (other than tobacco) abuse screening and intervention
- Transition care management following IP discharge
- Urgently needed services for high ED utilizers
Technology and Equipment

Telemedicine Delivery at UF Health

Secure, HIPAA compliant, point-to-point capable video conferencing.
- EPIC (Integrated Video in EMR)
- Optimized for existing UF Health patients

Billing, Coding & Documentation for Telemedicine

October 26, 2019
**Telemedicine Peripherals**

**Stethoscopes**
- Think Labs ONE
  - Multiple frequency filters to isolate lung and cardiac sounds.
  - Works with any audio input or headset.
  - Unusual form factor.
  - Integrates with Vidyo.

- Eko Core
  - Eko-based live remote listening with uncompressed full-range audio.
  - Appropriate for cardiac and lung auscultations.
  - Using in GP-Peds-Tallahassee.

**Cardiac Monitoring**
- Eko DUO
  - Digital Stethoscope with One-Lead ECG
  - DUO combines ECG and digital stethoscope technology into a portable, handheld device for unprecedented insight into cardiac function. Review rhythms and heart sounds quickly from the accompanying mobile application for advanced bedside analysis or groundbreaking remote care.
  - Ideal for remote monitoring of CHF patients.
  - Remote providers can listen and visualize live sounds.

**Otoscope**
- Firefly Digital Otoscope
  - DE550 Wireless Digital Video Otoscope
  - Internal illumination and 30x magnification.
  - Wireless Bluetooth communication.
  - Provides live, streaming video within EPIC MyChart and Vidyo.
  - Switch video source between otoscope and webcam on the fly.
  - Using in GP-Peds-Tallahassee.
Telemedicine Peripherals

- Spirometry
  - MIR Spirobank II Smart
  - Oximetry via iPad
  - Virtual iPad based assistant to facilitate compliance of the patient during testing and the difficulty of interpretation.
  - Wireless Bluetooth communication.
  - Pediatric Incentive Animations
  - iPad app creates files which can be easily printed, sent via Email or uploaded into an EHR for future reference.

- Cameras and Other Optics
  - Webcams
    - Logitech c930e. Wide angle and macro function.
    - Logitech PTZ Pro. Supports foreign end camera control.
    - Lens attachments for enhanced functionality.

- Retinal Cameras
  - For screening patients for diabetic retinopathy.
  - Mydriatic and non-mydriatic versions available.

- Snake Oil and Smoke and Mirrors?!?!?
  - Beware:
    - Many vendors seeking to sell essentially the same product.
    - Start-up.
    - Major EHR players
    - Look out for claims of easy or "free" EHR integration.
    - Slick marketing comes with an equally sharp price.
    - It's a robot... So what?
  - Good strategy:
    - Start simple and grow from there.
Resources

Stuart Clarry
Telemedicine Coordinator
stclarry@ufl.edu | (o) 352.265.8309 | (m) 352.682.6771

UF Health Bridge Group is here: UFHP – Telemedicine and Telehealth
Search for “Telemedicine”

Additional Links:
- American Telemedicine Association http://www.americantelemed.org/
  - UF Health maintains an institutional membership – open to employees.
  - Telemedicine Practice Guidelines
    - http://www.americantelemed.org/resources/telemedicine‐practice‐guidelines
- Florida Board of Medicine http://flboardofmedicine.gov
- Medicare: https://www.cms.gov/Medicare/Medicare‐General/Telehealth/Telehealth‐Codes.html
- HRSA HPSA Lookup Tool: https://data.hrsa.gov/tools/shortage‐area
- Medicaid
  - https://www.flrules.org/gateway/ruleno.asp?id=59G‐1.057
  - House Bill 7087, establishing the Telehealth Advisory Council
  - http://www.flsenate.gov/Session/Bill/2016/7087/BillText/er/PDF
- Tricare
  - Coverage Information for Telemedicine
    - https://www.tricare.mil/Coverage/Telemedicine
  - Coverage for Telemental Health
    - https://www.tricare.mil/Coverage/TelementalHealth
- Florida Telehealth Advisory Council
  - http://www.myflorida.com/ahca/telehealth
- Telehealth Resource Centers
  - https://www.telehealthresourcecenter.org
- Center for Connected Health Policy (CCHP)
  - https://www.myflorida.com/ahca/telehealth
  - State Laws and Reimbursement Policies