

Mount Sinai Health Partners is hosting an ongoing series of town hall meetings to help you manage your business and care for your patients during the COVID-19 pandemic. We compiled all of your questions during these meetings into this FAQ document for your use.

Coding:

1. How do you code if you are not performing a physical exam? Use time as the key factor:

New Patient	Established Patient
99201:10 min	99211: 5 min
99202: 20 min	99212: 10 min
99203: 30 min	99213: 15 min
99204: 45 min	99214: 25 min
99205: 60 min	99215: 40 min

Make sure to document what could and could not be done due to the circumstances.

Payers/Reimbursements:

1. Can you request that commercial insurers increase the time for filling claims (usually 3 months) to a longer period?

Although all written documentation received by health insurance carriers will indicate 90 day timely filing limits for claims processing, mostly all managed care plans have unwritten rules of allowing up to 180 day timely filing limits.

MSHP's recommendation is that you should not be holding claims. Best practices here include: contacting the patients carrier to verify insurance benefits upon scheduling the visit. If prior authorization is required, you should obtain this well in advance of the visit. Once the visit is provided, drop the appropriate codes onto the claims and submit. Do not wait! Even if the plan denies your claim, you have appeal rights. You forgo those rights if you hold claims.

We also recommend that you set up EFT with the insurance carriers where applicable and submit your claims electronically.

2. Can you explain more about the Medicare Accelerated and Advance Payment Program? Does it offer faster payment or higher fees?

Medicare Fee for Service only! It offers faster "pre-payment" of Medicare claims; not a higher rate. Medicare processing time is within seven calendar days from receipt of the "Request for Accelerated/Advance Payment" Form. Recommendations are to look back at the last three months of your Medicare FFS business. Calculate how much you collected from Medicare during that time period. Due to your business decreasing during this time, you can expect to receive anywhere between 50-75% of that amount. You would simply indicate that amount as an



advance for the next months. Medicare will reimburse you at 100% of what you write down on the form. After 120 days, CMS will begin recouping accelerated payment from newly submitted claims. You will have 210 days from the date of the accelerated payment was made to repay the balance.

Be conservative! After this epidemic, Medicare may recoup money paid out that isn't substantiated by claims submitted.

3. What is telemedicine reimbursement for commercial insurance? Have the insurance plans adopted the CMS policy?

All Managed Care Organizations are covering Telemedicine visits. The reimbursement will vary by payer but they all indicate they are following CMS/DOH/Market rate structure

Video/Telephone Visits:

- 1. Why is it important to record the location of the patient in a video visit? Medicare reimburses for telehealth services offered by a provider at a distant site (provider location) to a Medicare patient at an originating site (patient location). Traditionally, under Medicare, there are restrictions on where the patient can be located (only approved originating sites) but CMS has temporarily removed those restrictions. Still, we recommend documenting the patient location as typically required by CMS.
- 2. Are mental health telephonic sessions reimbursable now or do those sessions need to be done with video enabled?

CMS has approved several telephonic E&M codes (99441-99443 and 98966-98968) for reimbursement by Medicare during the pandemic but none that are specifically mental health codes. To bill Medicare for psychotherapy and psychiatric diagnostic services, providers must use video. In clarifying telehealth technology requirements during the emergency CMS has advised an "interactive telecommunications system", means multimedia communications equipment that includes, at a minimum, audio and video equipment permitting two-way, real-time interactive communication between the patient and distant site physician or practitioner. Of note, CMS has expanded the list of services that can be provided via telehealth (video) to temporarily include additional behavioral health codes. A list of approved behavioral health codes is included below:

Telehealth		
90785	Psytx complex interactive	
90791	Psych diagnostic evaluation	
90792	Psych diag eval w/med srvcs	
90832	Psytx pt&/family 30 minutes	
90833	Psytx pt&/fam w/e&m 30 min	
90834	Psytx pt&/family 45 minutes	
90836	Psytx pt&/fam w/e&m 45 min	
90837	Psytx pt&/family 60 minutes	
90838	Psytx pt&/fam w/e&m 60 min	

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COVID-19 Town Halls

Frequently Asked Questions

90839	Psytx crisis initial 60 min	
90840	Psytx crisis ea addl 30 min	
90845	Psychoanalysis	
90846	Family psytx w/o patient	
90847	Family psytx w/patient	
Temporary		
90853	Group psychotherapy	
96130	Psycl tst eval phys/qhp 1st	
96131	Psycl tst eval phys/qhp ea	
96132	Nrpsyc tst eval phys/qhp 1st	
96133	Nrpsyc tst eval phys/qhp ea	
96136	Psycl/nrpsyc tst phy/qhp 1s	
96137	Psycl/nrpsyc tst phy/qhp ea	
96138	Psycl/nrpsyc tech 1st	
96139	Psycl/nrpsyc tst tech ea	

3. Can a video visit lead to a face-to-face visit in the next 24 hours?

Video visits are treated the same as a regular office visit. If there is a reason to see the patient face to face within 24 hours, ensure the documentation supports the additional visit.

4. What other apps can you use for video?

WhatsApp, FaceTime, Skype.

During the COVID-19 national emergency, the HHS Office of Civil Rights will exercise enforcement discretion and waive penalties for HIPAA violations against health care providers that serve patients in good faith through everyday communication technologies.

5. Would EMR direct email-messaging count as a secure patient portal for email communications?

To our understanding, this is a provider-to-provider communication not provider to patient.

6. Earlier you said, 99421-99423 was for video calls, but then on the chat, you said these same codes are for email?

99421 -99423 are for Online Digital Evaluation and Management.

7. How often can a telehealth visit audio-video be billed for the same patient whether it is for the same complaint vs new problem?

Video visits are treated the same as a regular office visit. If there is a reason to see the patient face to face within 24 hours ensure the documentation supports the additional visit. Use modifier 25 for a significant, separately identifiable E&M service by the same physician or other qualified health professional on the same day of the procedure or other service.



8. What is the Healow app exactly? How does it work what are the fees involved? Healow is an App that works with different EMR's such as E-clinical works, Athena and Criterion

to name a few. Use Healow for the following capabilities:

- Televisits
- To establish your web presence and let patients locate you anytime, anywhere
- Allows patients to book appointments 24x7
- Convert appointment requests to a scheduled visit with just one click. <u>Healow.com</u> takes care of confirmation and reminders automatically
- Data sharing can help your patients become more involved in their health and give you better insight into their lifestyles, allowing you to provide better guidance and care.

CHOOSE THE OPTION THAT'S BEST FOR YOU **\$2 PER VISIT OR \$50 FOR 250 MINUTES PER MONTH** Due to COVID-19, through June, we're capping your overall TeleVisit costs, regardless of usage. Contact eClinicalWorks for details.

Click the link to learn more: <u>https://www.eclinicalworks.com/products-services/patient-engagement/televisits/</u>

9. Can you share other telehealth applications?

- Athena If providers/groups are interested in engaging with one of the vendors, they should connect with the vendor directly (in link below on chart). Once the connection is established between vendor and practice, the Athena CSM will be notified. Some of our clients are getting creative and using Zoom, FaceTime, Microsoft Teams and other web conferencing platforms to perform remote visits, as well. So, a Telehealth visit does not require one of these vendors at this time. For example, Mount Sinai South Nassau, is using Microsoft Teams
- **Quanum -** ELVI telehealth module through their vendor partner, CompuGroup Medical (CGM).
 - <u>Click here for brochure</u>
 - 2 month free trials

EMR	On-demand activation	3rd Party Vendor Partner
eClinicalWorks	Healow	
Athena	Healow	List of 23 Vendor Partner for telemedicine can be found at <u>https://marketplace.athenahealth.com/</u> Expand Efficiency Tools and select Telehealth to narrow down the search results.
Quanum	Elvi Compu Group	ELVI telehealth module through CompuGroup Medical (CGM)
Criterion	Healow	X (Intended Workflow- Seeing patients through doxy.me and documenting in Telephonic encounter)
Practice Fusion	Updox	
Amazing Charts	Updox	



Frequently Asked Questions

Other Telehealth aka Telemedicine applications are:

- Doxy.Me <u>https://doxy.me/</u>
- FaceTime Apple Store
- UpDox <u>https://www.updox.com</u>
- What's App <u>https://www.whatsapp.com</u>
- Zoc Doc <u>https://www.zocdoc.com/about/integrate/</u>

Care Management:

 How are care management services being impacted with social distancing? What outreach is the care management team doing to high-risk patients?
All of our CM staff are providing telephonic services rather than in-person in order to stay safe. We

provide continual supervision to and monitoring of our staff who are talking with high-risk patients as a way to help them with the anxiety that arises. Our CM staff also attends virtual trainings specifically focused on coping with patients' and their own anxiety. They can also take advantage of MSHS mental health services and staff support programs.

2. Do you have suggested scripts for your outreach team to schedule patients for wellness visits and high-risk outreach?

Please <u>click here</u> on MSHP's COVID-19 Resource Hub to access an email and phone script to make your patients aware of telehealth services.

3. Can care management staff go into homes of symptomatic patients?

For patients in need of home health services, please contact:

- MSHP Post-Acute Care Team: Manager, Ruchi Thakkar: <u>Ruchi.thakkar@mountsinai.org</u> or at (347) 835-3254. *Email is preferred.*
- Home Health Utilization RN, Agnes Taylor: <u>Agnes.taylor@mountsinai.org</u>
- Home Health Utilization RN, Ramona Padilla: <u>Ramona.padilla@mountsinai.org</u>

They will collaborate with you and refer to certified home health agencies those patients with COVID related symptoms as well as those with other home health needs (e.g. PT, ST, home health aide). Please keep in mind that home health agencies go into the home within 24-48 hours of referral. Therefore, referrals should not be made when patients are in need of immediate attention. For patients needing immediate symptom management, please refer to our Community Paramedicine Program.

Mount Sinai's Community Paramedicine Program, available throughout NYC, is available 24/7 with a response time of 30-60 minutes. To make referrals, please call 646-605-5962. For more information, please click here.



4. Is anyone seeing patients without wearing a mask?

While MSHP recognizes that we do not have any authority over community practices and/or your policies that do not relate to network activities, we feel compelled to ask any physician to consider wearing a mask in addition to the steps you are already taking in your office to help prevent the spread of COVID.

We now know that approximately 25% of patients with COVID are asymptomatic, based on some recent studies. However, this number may be fluid, as we understand more about this virus. The basic point is that many are likely shedding virus days before symptoms arise. Not only for your own protection but for the protection of your patients, MSHP strongly advises adding this additional precaution to what we are sure are comprehensive procedures for protecting your patients and staff.

MSHP fears that we have only just begun to see the impact of this on our health professionals and want to try and support anything we need to do to protect our docs, nurses and office staff.

Miscellaneous:

- 1. How do you apply for small business loans? Please click here for application details: <u>https://covid19relief.sba.gov/#/</u>
- 2. What is the status of Mount Sinai main campus with COVID-19 patients? Please visit here for additional information MSHP's COVID-19 Resource Hub: <u>https://mshp.mountsinai.org/group/mshp/covid-19#providers</u>
- **3.** Does anyone know if CPAP can be useful when ventilators are short? It is a last resort, but for acute oxygenation and ventilation needs, would rather use Nasal Canula, High Flow Nasal Cannula, BiPap (including V60 Philips), and Non Rebreather masks.
- 4. Any update on private offices doing testing in the future? No update at this point