Virtual Care and Care Management Services

CARAVANHEALTH.

Service	Billing Codes	Example of use	Brief Description	Billable in FFS	Billable in RHC/FQHC	Who can bill?	Who else can contribute to time?	Duration of service	Synchronous?	Audio Required?	Video required?
Telehealth Also called Telemedicine, Online or Virtual E/M, Video Visit	Applicable approved service codes During PHE, additional services may be delivered via telehealth	Can be used for acute or chronic E/M visits or preventive care, to replace in-person visits. Limits risk of exposure for patient and staff. Can include Telehealth AWV, ACP, Depression Screen and typical E/M visits. Required TCM visit can be performed via Telehealth. Patient calls with painful rash on side/chest that is "just like the last time I had shingles". Scheduled for a E/M visit. Exam performed, including inspection of the nature and distribution of the rash, treatment e-prescribed and self-management reviewed.	Telehealth is a service delivered via real-time audio and video. Only certain services may be delivered via telehealth. During the PHE, some services have also been approved for audio-only delivery. A complete list of allowable telehealth and audio-only services is available on **the CMS website.**	Use Place of Service where the service would typically be performed if there was not a PHE. Add modifier 95	G2025 describes distant site telehealth services provided during the PHE. Detailed billing guidance is available **here**.	Anyone approved to bill the list of Telehealth services (e.g. physicians, NPPs)	Anyone approved to contribute to the time of the service (e.g. clinical staff can contribute to AWV time but are not used for Level of Service time for E/M visits) Direct supervision requirements remain- provider must be physically in the same place as staff or be immediately available with real-time audio/video	Varies by service- per requirements of code (e.g. AWVs don't have a set time)	x	x	Real time
Telephone E/M	99441-99443, G2025	Patient with newly-diagnosed COPD calls with complaint of "not able to get a good breath." Technology does not support telehealth visit, telephone E/M scheduled. Provider calls patient to discusses symptoms and modifies prescribed medications. Nurse/MA ends the call with education about inhaler/spacer use and technique.	Evaluation and treatment by a provider using audio-only (telephone). Must address an issue that would typically require an office visit and be patient initiated. Time based service.	99441-99443	G2025	Physicians and NPPs	Only provider time contributes to time-based service. Clinical staff may facilitate service (e.g.triage the call, schedule a time for the provider to call the patient back)	Time based codes. 5-21+ minutes	x	x	
Telephone Assessment	98966-98968	Post-stroke patient calls SLP with concern about coughing when swallowing thin liquids. Technology does not support telehealth visit, telephone visit scheduled. SLP discusses concern, performs assessment, and makes recommendation to avoid thin liquids until allergies and cough resolve, and to call provider if any concern for worsening symptoms, including fever.	Assessment by a qualified healthcare professional using audio only (telephone). Must address an issue that would typically require a face-to-face visit and be patient-initiated. Time based service.	x		QHPs: PT, OT, LCSW, Dietitian, etc	Only QHP time contributes to time-based service. Clinical staff may facilitate service (e.g.triage the call, schedule a time for the provider to call the patient back)	Time based codes. 5-21+ minutes	x	x	

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Digital E/M Also called digital visit or E-Visit	99421-99423, G0071	Patient with CHF uses the patient portal to send a message to their provider notifying of "terrible swelling in feet and ankles, weight gain of 7 pounds in 1 week, and feeling winded when walking". Provider and patient exchange messages over the course of a few days to determine extent of problem, create a treatment plan, and assess effectiveness of treatment/ modify plan if needed.	Evaluation and treatment by a provider using the patient portal/ email/secure messaging- can include text, images, videos. Must address an issue that would typically require an office visit and be patient initiated. Time is cumulative over 7 days.	99421-99423	G0071	Physicians and NPPs	Only provider time contributes to time-based service. Clinical staff may facilitate service (e.g. copy conversation from portal to EHR)	Time based codes. 5-21+ minutes			
Digital Assessment	G2061-G2063, G0071	Patient with recent knee surgery is unable to attend physical therapy due to closure of outpatient therapy clinic. Patient messages the physical therapist because of some stiffness and decreased range of motion in the surgical knee. PT and patient exchange messages to assess the extent of the problem, provide some stretches and exercises to try, determine the effectiveness of the intervention, and modify the plan if needed.	Assessment by a qualified healthcare professional using the patient portal/ email/secure messaging- can include text, images, video. Must address an issue that would typically require an office visit and be patient initiated. Time is cumulative over 7 days.	G2061-G2063	G0071	QHPs: PT, OT, LCSW, Dietitian, etc	Only QHP time contributes to time-based service. Clinical staff may facilitate service (e.g. copy conversation from portal to EHR)	Time based codes. 5-21+ minutes.			
Virtual Check-In	G2012, G0071	Patient with a history of recurrent UTI calls with symptoms of UTI. Provider briefly discusses symptoms and options with the patient, and decides to prescribe antibiotics and Uribel. Provider instructs patient to call back if symptoms don't improve within 24 hours of starting the antibiotic.	Brief discussion (telephone or video chat) between provider and established patient to manage an acute or chronic problem. Cannot be related to E/M visit from past 7 days, and if it results in an E/M, only the E/M is billed.	G2012	G0071	Physicians and NPPs	Only provider time contributes to time-based service. Clinical staff may facilitate service (e.g.triage the call, schedule a time for the provider to call the patient back)	5-10 minutes of provider communication	x	x	Video or image optional

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Remote Evaluation	G2010, G0071	Patient sends picture of a rash via the patient portal, wondering if it's poison ivy or something more serious. Provider reviews the image and calls the patient to confirm that it looks like poison ivy, recommend topical treatments, and instruct patient to call back if it fails to improve within a few days.	Provider reviews videos or images sent by patient and follows up with the patient within 24 business hours. Cannot be related to an E/M visit from past 7 days, and if it results in an E/M, only the E/M is billed.	G2010	G0071	Physicians and NPPs	Only provider time contributes to time-based service. Clinical staff may facilitate service (e.g.triage the call, schedule a time for the provider to call the patient back)	5-10 minutes of provider communication		Audio (phone call) follow up of interpretation required by provider	Image or video required
E-Consults Also called Internet Consults, Interprofessional, Internet Consultation	99446-99449, 99451, 99452	PCP is managing a patient with uncontrolled hypertension despite multiple medications. PCP (Requestor) reviews and gathers the patient records and emails to request a consult from cardiologist. Cardiologist (Consultant) reviews the records, writes a report of recommendations, then calls PCP to discuss briefly.	2 broad categories are described: the provider who requests a consultation via phone, internet or EHR and the physician who performs the consult and provides feedback to the requesting provider	x		Requests: Physicians, NPPs, QHPs Consultant: Physician	Only provider time contributes to time-based service. Clinical staff may facilitate service (e.g. schedule a time for providers to speak)	Time based codes. Request: at least 16 min Consult: 5-31+ min		Consultant must have verbal discussion with Requestor except for 99451	
Chronic Care Management (CCM)	99490, G2058, 99487, 99489, 99491, G0511	Patient with hypertension and diabetes calls frequently with concerns about COVID-19. Patient has no known exposures and is asymptomatic, but enrolls in CCM to manage chronic conditions and situational anxiety.	Monthly care management for patients with 2+ chronic conditions	99490, G2058, 99487, 99489, 99491	G0511	Physicians and NPPs	Clinical staff under general supervision Provider-Only codes exist	Time based codes, minimum 20 minutes of service per month	x	x	Optional

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Principal Care Management (PCM)	G2064, G2064	Patient with uncontrolled, insulin-dependent diabetes is unable to attend diabetes self-management classes due to facility closures. Patient has difficulty consistently checking blood sugar and was recently set up with continuous blood glucose monitor; continues to have trouble regularly administering insulin shots. Enrolled in PCM by PCP for additional support in managing diabetes in an effort to reduce COVID-19 risk/exposure.	Monthly care management for patients with 1 serious condition. Generally reserved for specialists, but may be billed by primary care	x	CMS guidance is unclear; check with MAC to determine if G0511 may be billed when PCM requirements are met	Physicians and NPPs	Clinical staff under general supervision Provider-Only codes exist	At least 30 minutes of service per month	x	x	Optional
Transitional Care Management (TCM)	99495, 99496	Patient is being discharged after 5 day hospitalization for COVID-19 (did not require intubation). Patient continues with mild symptoms but is being discharged because the bed is needed for sicker patients. Patient is enrolled in TCM to support self-management of persistent symptoms, early identification any deterioration in status, and coordination of follow-up support and care.	Post-discharge care management for patients transitioning back to their home environment from an acute setting. No limits on discharge diagnosis.	x	x	Physicians and NPPs	Clinical staff under general supervision	30 days of coverage with specific patient contact times	x	x	Real-time video is required if 7 or 14 day visit is performed via telehealth