



On 3/17/20, Medicare released a policy stating the originating site requirements for Telehealth services will be lifted to allow for patients to be treated in their home. Please see below to help answer some of the most common questions we are receiving.

Question: What platform should I use for Telehealth visits?

In order to best serve the needs of your practice throughout the COVID-19 crisis and beyond, we've teamed up with two telemedicine providers. We want to be sure you're able to continue treating patients while reducing the spread of COVID-19.

Click [here](#) to learn more about our telemedicine partners, DrFirst and Updox, and to see which solution is right for your practice.

Clients may also choose to use alternative Telehealth solutions outside of these solutions. Any standalone Telehealth solution can be used, and the AC products are all equipped to document and bill out for Telehealth services

Question: How is Telehealth different from virtual check-ins and e-visits?

A virtual check-in pays professionals for brief (5-10 min) communications done through the phone or video chat and mitigates the need for an in-person visit, whereas a telehealth visit is treated the same as an in-person visit, and is billed using your regular CPT codes with Telehealth place of service 02. An e-visit is when a beneficiary communicates with their doctors through online patient portals and must be initiated by the patient.

Question: What codes can I bill under Telehealth if the patient is in their home?

You bill using the same codes as if you were seeing the patient in office. A list of billable Telehealth codes is [here](#).

Question: What location is used if the patient is in their home?

Traditionally, for Nursing Home and Hospital visits, you use the location of the patient's care setting. For patients being seen in their home, you will use your location along with the 02 Place of Service.

NOTE: Your Medicare file will need to be updated on the PECOS website to add the locations any providers will be working from as a Telehealth place of service whether it is home or office. You will need to submit the complete list of Telehealth locations at one time because once your application is submitted and pending then no additional updates can be made until Medicare has finalized that application

Question: Can I do Telemedicine from my home?

Yes, you can see patients from your home, but you need to add your home in PECOS as a rendering location. You would add your address under "Other healthcare facility" and then type in the location as "telehealth" as it won't be an option to select.

Question: What location do I use for E-Visits and Virtual Check Ins?

Your office location is used, and no additional Medicare credentialing is needed for codes G2012, 99421, 99422, 99423, G2061, G2062, G2063, 99441, 99442, 99443, G2010, 99451, 99452, 99457, and 99458. See attached document for description of these codes.

Please review your specific commercial payer guidelines before conducting check ins or e-visits to see what they will cover. Not all payers are covering these services

Question: What if a patient lives in a nearby state that I'm not credentialed with and I'm seeing them virtually in their home?

If the patient is in their home during the time of service, your location will be your office, so the state barrier is not an issue.

Question: Can I do Telemedicine in a nursing home or hospital that is in a state that I'm not licensed or credentialed with their state Medicare?

During the time of crisis, Medicare is allowing licensed providers to cross state lines and see patients in other states, but you must first credential with the other state first, to which Medicare is doing expedited credentialing.

Question: Who can bill the Qualified nonphysician health care online assessments (G2061-G2063)?

Clinicians who are not allowed to independently bill for evaluation and management visits (for example – physical therapists, social workers, occupational therapists, speech language pathologists, clinical psychologists)

Question: What types of providers can bill G2012 for Virtual Check Ins?

G2012 can be billed by a physician or other healthcare professional who can report evaluation and management services. So, if your licensure does not allow you to bill for E/M codes, you cannot bill G2012.

Question: Is video chat required for Telehealth appointments?

Per the CMS website the provider must use an interactive audio and video telecommunication system that permits real time communication between the distant site and the patient at home. Alternative

communication has said during this time of crisis the video is not required. AC suggests that providers air on the side of caution and meet the video requirements.

For additional information please refer to <https://www.cms.gov/newsroom/fact-sheets/medicare-telemedicine-health-care-provider-fact-sheet>