



Telemedicine

What is Telemedicine?

Telemedicine is the use of telecommunication and information technologies in order to provide clinical health care at a distance. Any medical practice that meets all the requirements can participate in telemedicine.

Why Telemedicine?

Telemedicine is viewed as a cost-effective alternative to the more traditional face-to-face consultations or examinations. This service provides an easy and beneficial experience for both parties.

Benefits:

- Convenient and efficient for both patient and physician/practitioner.
- Provides real time interactive communication between the patient and physician or practitioner at the distant site.
- Reimbursement available when billing is filed correctly.
- States can also reimburse any additional costs such as technical support, transmission charges, and equipment.
- Hospitals are allowed 1 telehealth consult every 3 days and nursing facilities are allowed 1 telehealth consult every 30 days.

Requirements:

- Interactive telecommunications equipment. (Including, at a minimum, audio and video equipment.)
- Physician must document every consult-without documentation, consult has not occurred.
- Services only available to patients in a

Modifier GT: Interactive audio and video communications. This modifier tells the Medicare contractor that the beneficiary was present an eligible originating site when the telehealth service was furnished.

Modifier GQ: used for Asynchronous (video clips, still images, X-Rays, Echos, Lab Results).

Insurance Coding:

Insurance will pay Consult Codes by adding the correct GCode to the Superbill with a modifier of GT or GQ and also documenting 3 key areas: *History, Exam and MDM* (Medical Decision Making). These 3 areas will determine level of billing.

The following codes will help to get physician or practitioner reimbursed for telehealth:

- G0425- consult in ED or initial inpatient 30 minutes of communication
- G0426- consult in ED or initial inpatient 50 minutes of communication
- G0427-consult in ED or initial inpatient 50 minutes of communication

Codes Used for Follow-up Telehealth Consults:

- G0406- Follow-up inpatient consult, limited, 15 minutes of communication
- G0407- Follow-up inpatient consult, intermediate, 25 minutes of communication
- G0408- Follow-up inpatient consult, complex, 35 minutes of communication.
- G0425- consult in ED or initial inpatient 30 minutes of communication
- G0426- consult in ED or initial inpatient

- qualified originating site.
 - These sites must be located in a designated rural health professional shortage area. Locations either outside metropolitan area or in a rural census tract or country outside of MSA.
 - While billing for telehealth services, modifiers must be used in order for transaction to be complete.
- 50 minutes of communication
 - G0427-consult in ED or initial inpatient 50 minutes of communication.

Telemedicine is a decision that should be based around the experience for the patient. With the use of a smart phone or computer, it is possible to receive professional help from a physician or practitioner within the convenience of the patients' home, therefore being beneficial for *both* parties.

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