Name of Policy: Telemedicine

Effective Date: December 2015

Telemedicine

Telemedicine provides medical care to patients by utilizing an eligible referring provider site (Originating site) and an eligible consulting provider site (distant site) via two-way, real-time (synchronous), interactive, secured and HIPAA-compliant, electronic audio and video telecommunications systems. The use of these interactive telecommunication devices, together with the input of the intervening healthcare provider, is sufficient to provide the same information to the practitioner diagnosing or treating patients as if their examinations had been conducted in-person.

Telemedicine services are used to support health care delivery when an eligible Blue Cross network provider and patients are physically separated. Reimbursement for telemedicine services may be available if the service can be appropriately performed using HIPAA-compliant telemedicine processes and equipment and meets policy and member benefit criteria. As a condition of payment, approved Blue Cross network providers must use an interactive audio and video telecommunications system that permits real-time communication between the approved Blue Cross network provider at the distant site, and the patient at the originating site. Both distant and originating site providers must attest to meeting all Blue Cross and Blue Shield of Alabama telemedicine criteria.

Originating Site

- The originating site is the place where the patient and referring Blue Cross network provider are located at the time of the telemedicine service. **EXCEPTION:** For behavioral health providers in the Blue Choice or Expanded Psychiatric Services networks only, the patient’s home (place of service 12) may qualify as a valid originating site if telecommunication method is HIPAA-compliant. Please see Page 82 of the New Directions Provider and Facility Manual for more information on the New Directions Behavioral Health Telemedicine policy.

- Originating site providers must be enrolled as an originating site provider, have a signed Telemedicine Attestation, meet all telemedicine credentialing, equipment and personnel standards necessary to provide services that are HIPAA-compliant, equivalent to a face-to-face visit, and utilize only approved Blue Cross network providers as distant site practitioners.

- To address the administrative burden associated with the coordination and implementation of a live audio/video telemedicine consultation, the originating site may bill HCPCS code Q3014 for each encounter.

- If a provider from the originating site performs a medically necessary, separately identifiable
service for the member on the same day as a telemedicine service, both services are eligible for reimbursement with the proper use of modifier 25. Documentation for both services must be clearly and separately identified in the member’s medical record.

**Distant Site**

- The distant site is the place where the approved Blue Cross network rendering provider is located at the time the service is provided.
- A distant site provider is a Blue Cross network provider in good standing that has enrolled as a distant site provider, signed a Telemedicine Attestation and meets all telemedicine credentialing, equipment and personnel standards necessary to provide services that are HIPAA-compliant and equivalent to a face-to-face visit.
- Services eligible for reimbursement to distant site providers include those services which are eligible for professional reimbursement in an office or outpatient setting, can be delivered via an appropriately secure telecommunications system and are performed at the same level of quality and security as an in-person service.
- In addition to office and outpatient locations, Annual Wellness Visits - G0402, G0438 and G0439 may be performed for patients in a nursing facility (Place of Service 31 or 32 only).

**Note**: Information in this policy does not guarantee reimbursement.

**Additional Requirements**

- All services are subject to a member’s contract benefits, deductibles and copayments when applicable.
- Professional services rendered via an interactive telecommunication system from the distant site are only eligible for reimbursement for the provider rendering the telemedicine services.
- Reimbursement to the provider rendering the telemedicine services from the distant site is the same as equal to the current fee schedule amount for the services provided.
- The patient and an intervening approved Blue Cross network provider must be present when a remote practitioner provides a consultation.
- The medical examination of the patient must be under the control of the approved Blue Cross network provider at the distant site.
- All services provided must be medically appropriate and necessary.
- Services rendered via an interactive telecommunication system must be provided by an approved Blue Cross network provider who is licensed, registered or otherwise authorized to engage in his or her healthcare profession in the state where the patient is located.
- Only a licensed and approved Blue Cross network provider who has completed specialized training appropriate to the condition of the referral may provide consulting care via telemedicine.
- Appropriate consent is obtained and includes all of the information that applies to routine office visits, as well as a description of the potential risks, consequences and benefits of telemedicine.
- A permanent record of online communications relevant to the ongoing medical care of the patient should be maintained as part of the patient’s medical record by the distant site provider who is performing the services.
Services not considered appropriate for telemedicine (some exceptions may apply for behavioral health, see the New Directions Behavioral Health Policy).

Facsimile transmission
- Telephone conversations
- Email and/or text messages
- Video cell phone interactions
- Internet based audio-video communication that is not secure or HIPAA-compliant (e.g., Skype, FaceTime)
- Installation or maintenance of any telecommunication devices or systems
- Software or other applications for management of acute or chronic disease
- Provider-to-provider consultations when the member is not present
- Appointment scheduling
- Refilling or renewing existing prescriptions without substantial change in clinical situation
- Scheduling diagnostic tests
- Reporting normal test results
- Updating patient information
- Providing educational materials
- Brief follow-up of a medical procedure to confirm stability of the patient's condition without indication of complication or new condition including, but not limited to, routine global surgical follow-up
- Brief discussion to confirm stability of the patient's chronic condition without change in current treatment
- When information is exchanged and further evaluation is required such that the patient is subsequently advised to seek face-to-face care within 48 hours
- A service that would similarly not be charged for during a regular office visit
- Reminders of scheduled office visits
- Requests for a referral
- Consultative message exchanges with an individual who is seen in the provider's office immediately afterward
- Clarification of simple instructions
- Exclusively for the ordering and referring of ancillary services

The list above is not an exhaustive list of services not appropriate for telemedicine but rather consists of a subset of common examples.

Modifiers

The following modifiers must be used in conjunction with the distant site billing codes to annotate these encounters are live video telemedicine consultations. By coding and billing the appropriate modifier with a covered telemedicine procedure code, the provider at the distant site is certifying that the member was present at the originating site when the telemedicine service was rendered.

Prior to January 1, 2017:
GT via interactive audio and video telecommunications systems
Effective January 1, 2017:
Modifier “95” or “GT” may be used.

95 synchronous telemedicine services rendered via a real-time audio and video telecommunications system

GT synchronous telemedicine service rendered via real-time interactive audio and video telecommunications system

CPT  Current Procedural Terminology, CPT codes, descriptions and data copyright ©2018 American Medical Association
EICU  Electronic Intensive Care Unit
HCPCS  Healthcare Common Procedure Coding System
HIPAA  Health Insurance Portability and Accountability Act of 1996
MFM  Maternal-Fetal Monitoring