

Women's Health Telemedicine Toolkit

Telemedicine Tip Sheet: Video Visits

COVID-19

Usage:

- Used in place of an in-person visit
- Can prescribe new medication and set up lab-only visits as needed
- Legally can establish care for the 60 days after emergency declaration. Check with our administration for current allowances.
- Used for both obstetric and gynecologic visits

Documentation:

- Visit Type *Encounter type will depend on your personal EMR*
 - Telemedicine NON MyChart Encounter
 - Third party platform (doxy.me, Zoom, FaceTime or other platform)
 - Telemedicine MyChart Encounter
 - Patient must have MyChart account
- Phrasing
 - o "Real Time Video Visit" as header
 - Usual documentation of visit
 - End with "A total of *** minutes was spent in real time video visit with this patient during this encounter, and over half of that time was spent on counseling and coordination of care. We discussed the diagnosis and treatment plan in detail."
- At this time, a physician must perform these video visits to obtain reimbursement

Billing:

- CPT: usual visit code(s)
- LOS
 - o 99212 6-10 minutes
 - o 99213 11-15 minutes
 - o 99214 16-25 minutes
 - o 99215 26-40 minutes
 - o If return OB with private insurance, use global code
- Modifier GT and place of service 02



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Telemedicine Tip Sheet: Telephone Visits
COVID-19

Usage:

- Use when the patient does not have access to a good internet connection or a smart phone or tablet capable of video chat.
- Can prescribe new medications and set up lab-only visits as needed
- Legally can establish care for the 60 days after emergency declaration. Check with your administration for current allowances.
- Used for both obstetric and gynecologic visits

Documentation:

- Visit Type *Encounter type will depend on your personal EMR*
 - Telemedicine NON MyChart Encounter
- Phrasing
 - o "Real Time Audio Visit" as header
 - Usual documentation of visit
 - End with "A total of *** minutes was spent in real time on the phone with this patient during this encounter, and over half of that time was spent on counseling and coordination of care. We discussed the diagnosis and treatment plan in detail."
- At this time, a <u>physician</u> must make these calls to obtain reimbursement.

Billing:

- CPT: usual visit code(s)
 - Add CPT G2012 if patient has Medicaid or Medicare
- LOS
 - 99441 5-10 minutes
 - 99442 11-20 minutes
 - o 99443 21-30 minutes
 - If return OB with private insurance, use global code
- Modifier: none indicated