

Part Two of a Two-Part Series:

Billing and Coding Refresher: Untangling Telehealth Billing and Coding From the End of the Federal PHE

WyTN is a collaboration between the Wyoming Department of Health divisions of Medicaid and Rural Health and the University of Wyoming through the Wyoming Institute for Disabilities.



College of Health Sciences
Wyoming Institute
for Disabilities



Housekeeping and Introductions

Logan Trautwein

Manager | Payment Integrity

Blue Cross Blue Shields Wyoming

logan.trautwein@bcbswy.com

(307) 829-3384

bcbswy.com

Kathy McMahan

Provider Relations Manager

CIGNA

kathleen.mcmahan@cigna.com

571-401-4873

cigna.com

Patti Guerin

Manager, Provider Services

CIGNA

cigna.com

Helpful Resources to Navigate the End of the Federal PHE

Disentangling Telehealth from the Public Health Emergency

<https://southwesttrc.org/blog/2023/disentangling-telehealth-public-health-emergency>

Center for Connected Health Policy

<https://www.cchpca.org/>

Northwest Regional Telehealth Resource Network

<https://nrtrc.org/>

National Consortium of Telehealth Resource Centers

<https://telehealthresourcecenter.org/>

Wyoming Telehealth Network

www.wyomingtelehealth.org

Objectives

- Participants will increase knowledge of current CMS rules for coding and billing.
- Participants will receive tools and resources to help them navigate the end of the federal PHE
- Participants will learn and refresh best practices for coding and billing for telehealth in a variety of situations.
- Participants will leave with experts they can contact directly if they have further questions.

Question One

What has changed in the new 2023 CMS Billing and Coding Fee Schedule?

Question Two

If the patient is located in a provider's office and the provider is distant or out of state, is the service paid for?

Question Three

Where can practitioners and patients find information on billing codes/policies and specialties/services that are covered for telehealth?

Question Four

Where can telehealth encounters originate from? Do you provide reimbursement for originating site fees?

Question Five

What restrictions are there on the types of practitioners/specialties that can bill for telehealth?

Question Six

Are any authorizations needed from your agency to deliver telehealth? From the client? Who submits these authorizations?

Question Seven

What billing codes/modifiers are needed to be used for telehealth encounters?

Question Eight

Is telemedicine reimbursed at the same rate as in-person services?

Question Nine

What mental health services are covered for telehealth?

Question Ten

What Allied Health (OT, PT, SLP, etc.) services are covered for telehealth? Can you address the new POS 10 for PT at home?

Question Eleven

Centers for Medicare and Medicaid Services (CMS) has updated its rules in terms of physiological monitoring. What is the difference between Remote Patient Monitoring (RPM) and Remote Therapeutic Monitoring (RTM) coding?

Question Twelve

Does your agency plan to continue reimbursement for telehealth after the pandemic?

Question Thirteen

Are there other impacts of the 2023 Omnibus bill passed in December of 2022 that affect telehealth billing and coding as a result of COVID-19? Can you explain the different PHE extension timelines between PHE and CMS?

Question Fourteen

Audio only telehealth provides access to underserved, low income patients with limited connectivity. Do payers currently reimburse for audio only telehealth? Do you expect reimbursement for audio only telehealth to change?

Question Fifteen

If you had a crystal ball, do you think agencies will change the way they handle telehealth reimbursement after the pandemic?

Additional Tips and Tricks?

Billing and Coding Best Practices

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QUESTIONS?